

# A national registry to assess the value of cardiovascular magnetic resonance imaging after primary percutaneous coronary intervention pathway activation: a feasibility cohort study

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## Plain English summary

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## Plain English summary

Cardiovascular magnetic resonance (CMR) is a non-invasive test that can be used to assess damage to the heart and help guide treatment in people who have had a suspected heart attack. CMR is expensive ( $\approx$ £300), so it is important to know whether or not it benefits patients or the NHS.

This study had two aims. The first was to find out whether or not it is feasible to create a database of patients who had a suspected heart attack by bringing together information collected routinely during patients' hospital care. The second was to determine the ways in which CMR changes treatment. A registry database could be used to test whether or not patients who undergo CMR do better than those who do not undergo CMR.

Attempts were made to identify all eligible individuals at four hospitals, obtain their consent to participate, collect information from the hospital where they were treated, including whether or not they had CMR, and combine this with other information collected routinely during patients' hospital care over the following year.

A group of experts discussed and agreed in whom, and in what ways, CMR can influence treatment. Some of these treatments could be identified in the data about participants' care in the year after their heart attack. However, most hospitals were unable to provide all the information requested about the suspected heart attack. Using conventional ways of recruiting participants, it was not possible to invite many patients who would have been eligible. Therefore, it is not currently feasible to establish the database.



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