

Razvoj prevencije i ambulantne rehabilitacije kardiovaskularnih bolesnika u Zagrebu

Development of prevention and outpatient rehabilitation of cardiovascular patients in Zagreb

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Dok su početkom 19. stoljeća glavni zdravstveni problem, osnovni uzroci smrti i radne nesposobnosti bili tuberkuloza, trahom, tifus i druge zarazne bolesti, a praktični su liječnici jedva nešto čuli o angini pectoris, nakon Drugog svjetskog rata glavni javnozdravstveni problem postaju bolesti srca i krvnih žila, dijabetes, tumori, povrede i trovanja, alkoholizam, duševne bolesti i psihološki problemi.

Dr. Paul Dudley White, često nazvan ocem kardiologije, 1948. godine je uveo koncept kardiovaskularne prevencije i potaknuo čuveno prospektivno Framinghamsko ispitivanje. Tada je razvijen koncept koronarnih čimbenika rizika, na kojem je utemeljena moderna primarna i sekundarna prevencija koronarne bolesti srca (KBS).

Još od prvih dana, 1950. godine, prepoznata je važnost kardiovaskularnih bolesti (KVB) u pobolu i smrtnosti ukupnog, a posebice radno aktivnog stanovništva. Stoga je osnivanje posebne zdravstvene ustanove bio sasvim konkretan i logičan odgovor društvene zajednice na uočene zdravstvene probleme. Tako je Narodni odbor Grada Zagreba, a na prijedlog i obrazloženje dr. Miljenka Krausa već 2. studenoga 1950. god. donio Rješenje o osnivanju Dispanzera za bolesti srca¹. Zadatak Dispanzera bio je "obuhvatiti sve srčane bolesnike u Zagrebu i bližoj okolici, naročito radnike, službenike, fiskulturnike, studente i čak te nad njima obavljati liječnički nadzor i liječenje", da se posebno posveti pitanje radne sposobnosti, dijetalne prehrane, detekciji i otklanjanju čimbenika rizika te edukacija stanovnika. Tijekom vremena pravni status ustanove se mijenjao, ali je zadržana temeljna koncepcija rada na prevenciji srčanih bolesti. Tako se 1958. god. mijenja naziv ustanove u Stanicu za bolesti srca, a već 1961. god. ustanova je uključena u Zavod za zaštitu zdravlja grada Zagreba pod nazivom Odjel za sprečavanje i suzbijanje bolesti srca s Dispanzerom za bolesti srca. Godine 1974. postaje Služba za sprečavanje i suzbijanje bolesti srca i krvnih žila (OOUR III), a 1979. god. postaje Centar za bolesti srca i krvnih žila (OOUR V). Ustanova tijekom idućih godina se sve više profilira kao preventivna te je u okviru javnozdravstvene epidemiološke djelatnosti 1978. i 1979. god. pokrenuto vođenje Registra kardiovaskularnih bolesnika i Registra akutnoga infarkta miokarda za zagrebačku populaciju. Od 2003. godine mijenja se naziv ovog popula-

While at the beginning of the 19th century, a major health problem, the main causes of death and invalidity were tuberculosis, trachoma, typhus and other infectious diseases, and physicians practically hardly heard of angina pectoris, after the Second World War, a major public health problem becomes cardiovascular diseases, diabetes, tumors, injuries and poisoning, alcoholism, mental illnesses and psychological problems.

Dr. Paul Dudley White, often called the father of Cardiology introduced the concept of cardiovascular prevention in 1948 and stimulated the well-known prospective Framingham study. This was followed by the development of the concept of coronary risk factors that the modern primary and secondary prevention of coronary heart disease (CHD) is based on.

Since the first days in 1950, the importance of cardiovascular diseases (CVD) in morbidity and mortality of the whole and especially the working population was recognized. Therefore, the establishment of the health facility was a very concrete and logical response of the social community to identified health problems. Thus, the National Committee of the City of Zagreb upon proposal and explanation by Dr. Miljenko Kraus issued on 2 November 1950 a Decision on establishing the Outpatient Clinic for Cardiac Diseases¹. The task of the Outpatient Clinic was "to include all cardiac patients in Zagreb and its surrounding, especially employees, officers, persons engaged in physical education, students and pupils who were supposed to undergo medical check-ups and treatment," and especially to focus on an issue about job capacity, diet, detection, elimination of risk factors and education of inhabitants. Over the time, the legal status of the institution changed while maintaining the basic concept of the prevention of cardiac diseases. Thus, in 1958 the name changed to the Station for Cardiac Diseases, and already in 1961 the institution was included in the Institute for Health Protection of the City of Zagreb called the Department for Prevention and Combating Heart Diseases with the Outpatient Clinic for Heart Diseases. In 1974, it became the Service for Prevention and Combating Cardiovascular Diseases (OOUR III), and in 1979 it turned into the Center for Cardiovascular Diseases (OOUR V). During the years to come, the Institute was focusing more and more on prevention and as a part of the public health epidemiological activi-



cijskog registra u Registar akutnog koronarnog sindroma za grad Zagreb^{2,3}.

Nastanak ambulante rehabilitacije u gradu Zagrebu bio je uvjetovan polivalentnim potrebama velike urbane cjeline. Pučanstvu od gotovo milijun stanovnika koncentriranom na relativno malom prostoru među kojima oko 1.000 godišnje preživi akutni infarkt miokarda, desetak tisuća ima simptomatsku ili asimptomatsku prepoznatu KBS, a u više od sto tisuća osoba je prisutno dva ili više čimbenika rizika za aterosklerotske bolesti trebalo je pružiti mogućnost lako dostupne, relativno jeftine i učinkovite kardioangiološke evaluacije, edukacije i rehabilitacije. Program djelatnosti ambulante rehabilitacije kardiovaskularnih bolesnika i sekundarne prevencije KBS utemeljen je na općeprihvaćenim stručnim i znanstvenim medicinskim činjenicama i dugogodišnjim međunarodnim iskustvima čija su osnovna polazišta definirana dokumentima Svjetske zdravstvene organizacije. Aktualno se stanje povremeno sintetizira u preporukama Radne skupine za prevenciju i rehabilitaciju Europskog kardiološkog društva i Zajedničke radne skupine europskih društava (Europsko kardiološko društvo, Europsko društvo za hipertenziju i Europsko društvo za aterosklerozu) za prevenciju KBS u kliničkoj praksi koje su prvi puta donesene 1998. god. Sadržaj i oblik programa rehabilitacije osuvremenjuje se u skladu s novim saznanjima i dostignućima kardioangiološke rehabilitacijske struke. Pritom je organizacijski oblik rehabilitacije maksimalno prilagodljiv i prema osobama koje trebaju i žele proći kroz program, a da istodobno ne prekidaju svoje profesionalne, društvene i privatne obveze.

Krajem 1982. god. je tadašnji Centar za bolesti srca i krvnih žila koji je bio u sastavu Zavoda za zaštitu zdravlja Grada Zagreba, kao prva i do danas jedina ustanova u Hrvatskoj, započeo provoditi ambulanti oblik rehabilitacije kardiovaskularnih bolesnika, a sustavno ga provodi od početka 1983. god. To je za Hrvatsku i bivšu državu, pa i za čitavu jugoistočnu Europu, bio novi oblik rehabilitacijskog liječenja. Prvih se mjeseci rehabilitacija odvijala u jednoj prilagođenoj ordinaciji s kapacitetom od četvero bolesnika istodobno, no ona se ubrzo razvijala i konačno postala samostalni odjel u ustanovi. Ustanova je 1983. god. namjenski adaptirana i počela je koristiti napuštene prostore skladišta tvrtke *Tekstil-promet* u prizemlju dvorišne zgrade u Draškovićevoj 13, a 1985. god. veliku dvoranu u koju je preseljena rehabilitacijska jedinica te galeriju nad dvoranom u koju je smještena epidemiološko-informatička djelatnost, dvorana s audiovizualnom opremom i biblioteka. Kako bi se i u nazivu ustanove naglasio njezin preventivni karakter u siječnju 1986. god.

ty in 1978 and 1979 the Institute started maintaining the Registry of cardiovascular patients and Registry of acute myocardial infarction for the Zagreb inhabitants. In 2003, the name of this popular registry changed into the Registry of acute coronary syndrome for the City of Zagreb^{2,3}.

The occurrence of outpatient rehabilitation in the City of Zagreb was conditioned by various needs of large urban areas. The population of nearly one million residents concentrated on a relatively small area, among whom about 1,000 a year survive the acute myocardial infarction, some ten thousand persons have a symptomatic or asymptomatic CHD and more than one hundred thousand persons had two or more risk factors for atherosclerotic diseases that needed to be given the possibility to undergo easily available, relatively inexpensive and effective cardioangiology evaluation, education and rehabilitation. The program of the activities of the outpatient rehabilitation of cardiovascular patients and secondary prevention of CHD is based on generally accepted professional and scientific medical facts and extensive international experience whose concept of work is defined by the documents of the World Health Organization. The current condition is periodically synthesized in the recommendations of the Working Group for Prevention and Rehabilitation of the European Society of Cardiology and Joint Working Group of the European Societies (European Society of Cardiology, the European Society of Hypertension and the European Society of Atherosclerosis) for the prevention of CHD in clinical practice, which were first adopted in 1998. The content and form of the rehabilitation program became more contemporary owing to the new information and achievements of cardioangiology rehabilitation profession. The organizational form of rehabilitation is fully adaptable to persons who need and want to undergo the program, without needing to stop performing their professional, social and personal obligations at the same time.

By the end of 1982 the previously called Center for Cardiovascular Diseases, which formed a part of the Institute for Health Protection of the City of Zagreb, which was the first and is still the only institution in Croatia, started performing the outpatient rehabilitation of cardiovascular patients, and it has been systematically performed such rehabilitation since 1983. It was for Croatia and the former state, including the entire south-east of Europe, a new form of rehabilitation treatment. During the first few months, the rehabilitation took place in an refurbished doctor's office with a capacity of four patients at once, but it soon developed and eventually became an independent department in the institution. In

ponovo mijenja naziv u Centar za bolesti srca i krvnih žila — prevencija i rehabilitacija. Daljnji razvoj Centra stvorio je temelje za njegovo izdvajanje iz Zavoda za zaštitu zdravlja grada Zagreba u prosincu 1989. god. osnovana samostalna ustanova naziva Zavod za prevenciju kardiovaskularnih bolesti i rehabilitaciju. U siječnju 1994. god. je na temelju novog zakona Ministarstvo zdravstva ustanovi odredilo novi pravni status poliklinike pa od tada ona posluje pod sadašnjim nazivom: Poliklinika za prevenciju kardiovaskularnih bolesti i rehabilitaciju.

Temeljni koncept rada Poliklinike je pružanje zdravstvene zaštite korisnicima iz područja specijalističko-konzilijarne djelatnosti u internoj medicini i kardiologiji. Kako bi profesionalno, kvalitetno i pouzdano odgovorila na zahtjeve korisnika u ustanovi je zaposleno ukupno 22 liječnika koji su, na obje svoje lokacije (u Draškovićevoj ulici i u Sigetu), u mogućnosti neinvazivno kardiološki obraditi pacijente. Za specijalističke preglede i obradu namijenjeno je 14 funkcionalnih ordinacija (gotovo 30.000 pregleda godišnje), a u četiri laboratorija učini se više od 40.000 elektrokardiograma. U sedam ultrazvučnih laboratorija učini se više od 16.000 ehokardiografskih pregleda, a u tri laboratorija učini se više od 9.000 24-satnih kontinuiranih snimanja EKG i mjerenja arterijskog tlaka godišnje. Na godišnjoj razini se u tri ergometrijske jedinice učini više od 8.000 ergometrijskih testiranja, a u biokemijsko-hematološkom laboratoriju se analizira oko 3.000 uzoraka krvi³.

Poliklinika za prevenciju kardiovaskularnih bolesti i rehabilitaciju u povodu 60. obljetnice rada, tijekom kojeg je postala jedna od vodećih zdravstvenih ustanova za prevenciju srčanih bolesti i rehabilitaciju srčanih bolesnika, dobila je 31. svibnja 2012. godine prestižnu Nagradu Grada Zagreba.



1983, the institution was purposefully reconstructed and began using the abandoned warehouse space of the company *Tekstilpromet* in the basement of the courtyard house in Draškovićeveva 13 and in 1985 it used a large hall where the rehabilitation unit was relocated and the gallery over the hall used for performing epidemiological and IT activity and a hall with audiovisual equipment and a library. In order to emphasize the preventive character of the institution in the name of the institution, in 1986 it again changed the name to the Center for Cardiovascular Diseases — Prevention and Rehabilitation. The further development of the Center resulted in its separation from the Institute for Health Protection of the City of Zagreb in December 1989 resulting in the establishment of an independent institution named Department for Prevention of Cardiovascular Diseases and Rehabilitation. In January 1994, according to the new Act, the Ministry of Health established a new legal status of the polyclinic and since then it has been operating under the current title of: Institute for Prevention of Cardiovascular Diseases and Rehabilitation.

The basic concept of work of the Institute is providing health protection to users in the field of medical specialist and consulting activity in internal medicine and cardiology. In order to respond to the users' demands professionally, at a high quality level and reliably, the institution employs a total of 22 physicians who can, at the both locations (in the Draškovićeveva and Siget street), perform a non-invasive cardiac workup of the patients. For specialist examinations and workup there are 14 functional physicians offices (almost 30,000 visits a year), and more 40,000 electrocardiograms are performed in the four laboratories. More than 16,000 echocardiographic examinations are performed in seven ultrasound laboratories, and more than 9,000 24-hour continuous ECG and blood pressure measurements are performed in three laboratories on an annual basis. More than 8,000 treadmill tests are performed in three units on an annual basis, and about 3,000 blood samples are analyzed in biochemical-hematological laboratory³.

The Institute for Prevention of Cardiovascular Diseases and Rehabilitation celebrating the 60th anniversary of its work, during which period it became one of the leading medical institutions for prevention of cardiovascular diseases and rehabilitation of cardiac patients received the highly esteemed City of Zagreb Award on 31 May 2012.

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