

# Swiss coronary register, AMIS Plus, with new real-time reporting

“Because specialists in cardiology departments have direct access to data and can compare their own patients with patients from other hospitals for the purpose of benchmarking, new knowledge regarding treatment and medication will be implemented much more quickly into daily practices. And thanks to the know-how of Dynelytics, our long-standing partner for online data collection and analysis, it is possible for us to track the treatment of patients with acute coronary syndrome and optimise their progress.”

*Dr. Dragana Radovanovic, Head of the AMIS Data Center.*



AMIS Plus is the National Registry of Acute Myocardial Infarction in Switzerland and collects data on heart attacks and similar heart diseases. AMIS is located in the Institute for Social and Preventive Medicine at the University of Zurich.

Around 50 hospitals continuously record over 200 characteristics of heart patients in AMIS, including socio-demographic information, risk factors (such as smoking, obesity, diabetes), symptoms, laboratory findings and information on medication and treatments in hospitals. Since summer 2003, this data has been entered via the Internet with SPSS online data collection software, mostly directly by the hospitals in question. Throughout the years, questionnaires and data entry were continuously adapted and im-

proved in order to take into account advances in patient treatment.

Since it was founded in early 1997, AMIS has collected data on over 36,000 patients. The register should above all guarantee medical quality, and therefore, for example, check to what extent national and international medical guidelines on treatment are followed. The assessment of risk factors and therapy strategies, as well as analyses of patient groups that do not undergo much clinical research, are also part of the brief. Thanks to AMIS data, we now know more about Swiss heart attack patients and can also carry out targeted prevention campaigns. Since 2005, follow-up questionnaires on well-being and checks on patients' progress have been integrated into AMIS.

## **New solution by Dynelytics speeds up real-time online reporting**

Thanks to the Switzerland-wide patient comparison, the register has long been a valuable instrument for improving quality. Important components include user-friendly online data entry, as well as online reporting functions.

In early 2011, Dynelytics programmed a new, enhanced reporting solution for the AMIS Plus project on the AMIS homepage. The new solution calculates significantly more quickly than before and produces attractive graphics, which gives a better view of the data.

Authorised users can access their data in real time and compare them with all AMIS data. Online reporting makes it possible to calculate fre-

quency counts, contingency tables, graphics, etc., in real time simply via a browser. Of course filters can be defined, groups selected and tables redesigned with a simple click of the mouse. With this new technology, no pre-processed outputs are represented, but results based on individual requests by users over the Web are newly calculated thanks to data updated daily.

Today, via remote access, Data Center employees download newly entered cases from the AMIS server at least once a week, check the data, adjust it if necessary and then upload the full record onto the server again for online reporting. This interface was programmed by Dynelytics in accordance with the individual requirements of the project.

Access to online data entry and online reporting is simple for skilled hospital staff: they can connect to the page [www.amis-plus.ch](http://www.amis-plus.ch) and then click either on “Data Entry” or “Reporting System”, enter their password and get started.

## **New knowledge can be quickly passed on**

Dr. Dragana Radovanovic, Head of the AMIS Data Center, is convinced of the advantages of the new reporting system: “Because specialists in cardiology departments have direct access to data and can compare their own patients with patients from other hospitals for the purpose of benchmarking, new knowledge in treatment and medication is implemented much more quickly into daily practices.” In this respect, doctors are more motivated to enter their own data, in the knowledge that within a short space of time the results will be

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available to them again for analysis. Dr. Dragana Radovanovic is very satisfied with the work of Dynelytics: “Thanks to the know-how of Dynelytics, our long-standing partner for online data collection and analysis, it is possible for us to track the treatment of patients with acute coronary syndrome and optimise their progress.”

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