Toulouse MONICA Project - Registry of acute coronary syndromes in South-Western France

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General

Identification

Detailed name	Registry of acute coronary syndromes in South-Western France
Sign or acronym	Toulouse MONICA Project
CNIL registration number, number and date of CPP agreement, AFSSAPS (French Health Products Safety Agency) authorisation	998155

General Aspects

Medical area	Cardiology Emergency medicine
Health determinants	Pollution
Others (details)	myocardial infarction coronary deaths sudden death
Keywords	heart disease, prognostic, mortality, attack rate, therapeutic care, incidence

Scientific investigator(s) (Contact)

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Organization	INSERM

Collaborations

Funding

Funding status	Public
Details	INSERM ET InVS

Governance of the database

Sponsor(s) or organisation(s) responsible	CHU de toulouse INSERM U1027
Organisation status	Public

Additional contact

Main features

Type of database

Type of database	Morbidity registers
Database recruitment is carried out by an intermediary	A selection of health institutions and services
Database recruitment is carried out as part of an interventional study	No
Additional information regarding sample selection.	Selection of subjects having the required inclusion criteria.

Database objective

Main objective	In the area of public health: Permanent, regular and continuous monitoring of the acute heart disease makes it possible to establish epidemiological indicators that describe myocardial infarction: rate of incidence, rate of occurrence or rate of attack (incident and recurring cases), mortality rate (death from ischemic heart disease, sudden death), fatality rate. All of these indicators can be declined according to age, sex, and canton of residence. Their changes over time are analyzed on a regular basis and compared to other indicators such as the prevalence of cardiovascular risk factors measured in the population covered by the registry. Within the framework of the national network for monitoring ischemic heart diseases, transversal comparisons are also conducted on a regular basis with the

	other two French registries that use the same methodology. The registry is the reference tool for validating the regional or départemental indicators of morbidity built from other sources of data. This is for example the case for the construction of a regional indicator for ischemic heart diseases taking PMSI data into account. It is also used for validating the medical causes of death for deaths of heart or cardiac origin and sudden deaths. The recording of the cases of myocardial infarction has been enriched with several population surveys (the latest from 2006-2007) which have made it possible to set up a genuine observatory on the change in the factors of risk in our département, in the département of Bas-Rhin and in the urban community of Lille. In the area of research: The registry of ischemic heart diseases makes it possible to develop analytical descriptive epidemiology. The cases of myocardial infarction have been used to conduct case/control surveys (ECTIM, GENES, etc.) making it possible to analyze the relative protection with regards to heart disease in our region. The registry also facilitates the development of several surveys of cohorts including the PRIME study and makes it possible to study new markers of the coronary risk. The indicators in the registry are directly placed in line with the recording of environmental indicators. It was as such possible to study the influence of atmospheric pollution on the survival of myocardial infarction and to analyze the consequences of an industrial accident on the incidence of myocardial infarction.
Inclusion criteria	All of the cases of myocardial infarction (living and dead), of coronary deaths (probable coronary death), sudden deaths (all of the sudden deaths occurring in less than 24 hours without any other cause of death), non-coronary deaths (cause of death indicated as sudden or coronary annulled by the registry), and death of undetermined origin (the cause of death could not be determined) in the département of Haute-Garonne.
Population type	
Age	Adulthood (19 to 24 years) Adulthood (25 to 44 years) Adulthood (45 to 64 years) Elderly (65 to 79 years)

Population covered	Sick population
Gender	Male Woman
Geography area	Departmental
French regions covered by the database	Languedoc-Roussillon Midi-Pyrénées
Detail of the geography area	Haute-Garonne
Data collection	
Dates	
Date of first collection (YYYY or MM/YYYY)	1984
Date of last collection (YYYY or MM/YYYY)	2007
Size of the database	
Size of the database (number of individuals)	[1000-10 000[individuals
Details of the number of individuals	10746 (2002)
Data	
Database activity	Current data collection
Type of data collected	Clinical data Declarative data Biological data Administrative data
Clinical data (detail)	Direct physical measures Medical registration
Declarative data (detail)	Face to face interview Phone interview
Paraclinical data (detail)	angiographic results
Biological data (detail)	Laboratory parameters
Administrative data (detail)	Admission lists
Presence of a biobank	No

Health parameters studied	Health event/morbidity Health event/mortality Health care consumption and services
Care consumption (detail)	Hospitalization Medicines consumption

Procedures

Data collection method	A systematic collection of information intended to identify the cases is conducted with: (1) cardiology and cardiovascular surgery departments in hospitals and clinics (2) rehabilitation and convalescence centers (3) retirement homes (4) SAMU services (5) coroner services (6) DDASS for death certificates (7) general practitioners and liberal cardiologists
Participant monitoring	No
Links to administrative sources	Yes
Linked administrative sources (detail)	PMSI

Promotion and access

Promotion

Access

Terms of data access (charter for data provision, format of data, availability delay)	Annual report to InVS and INSERM Weekly Epidemiological Record Scientific publications
Access to aggregated data	Access on specific project only
Access to individual data	Access on specific project only