

H1N1 in New York City: Where did patients seek treatment – Emergency Departments or Primary Care Clinics?

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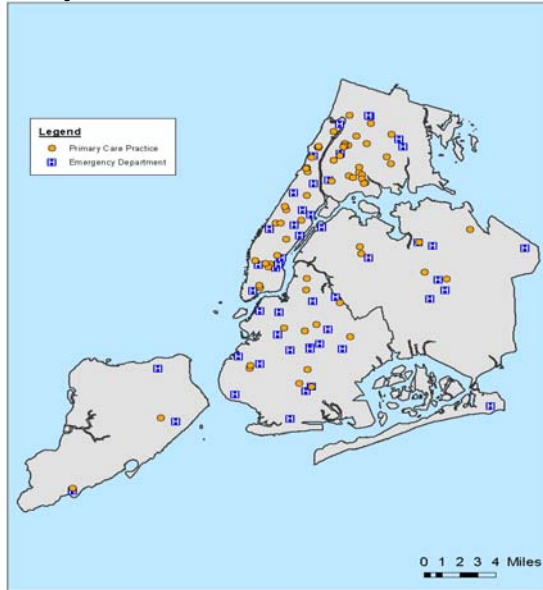


Objective

- To determine whether the timing of the increase in patient visits was different at emergency departments from primary care clinics during the spring 2009 H1N1 influenza outbreak across the five boroughs of New York City.

Study Sites

- 58 Primary Care Providers (PCP): 9 Institute for Family Health clinics & 49 practices enrolled in the NYCDOHMH PCIP (30 visits/day)
- ▼ 50 Emergency Departments (247 visits/day)

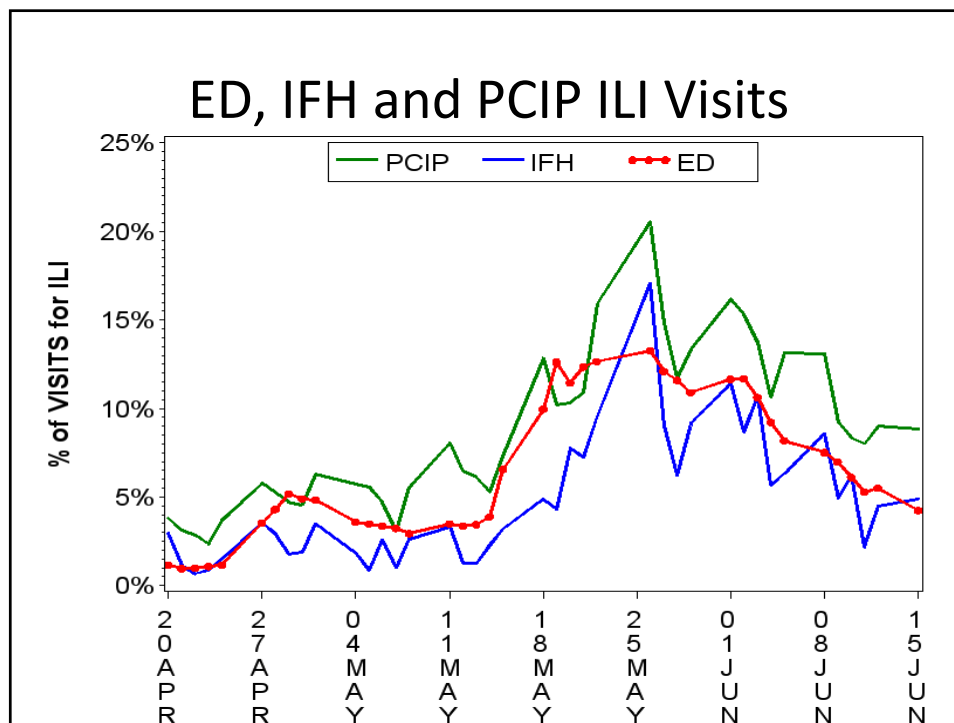


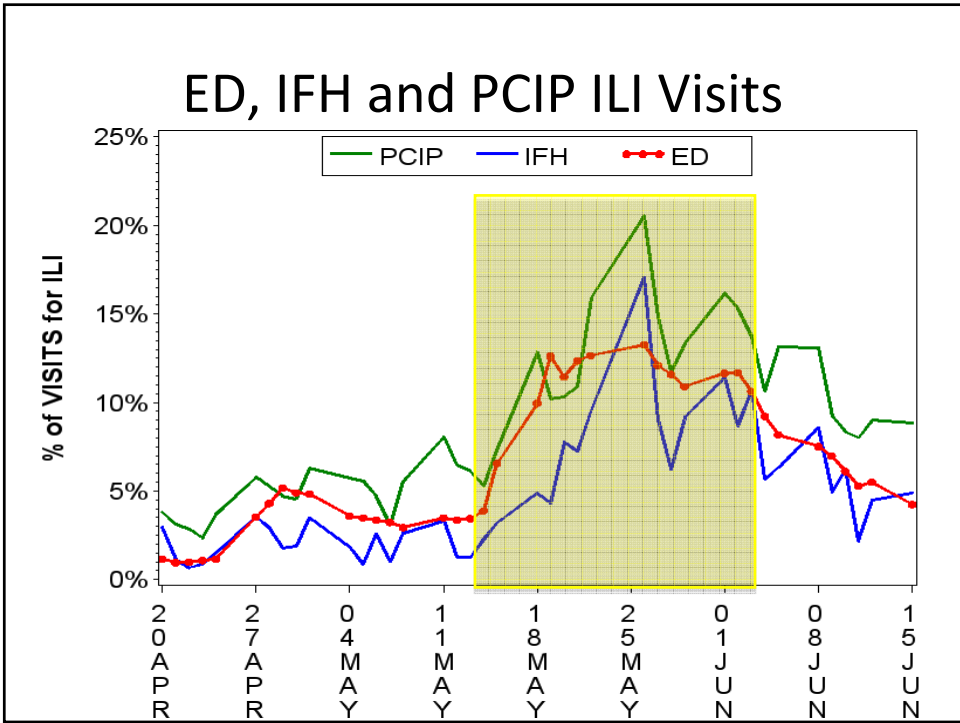
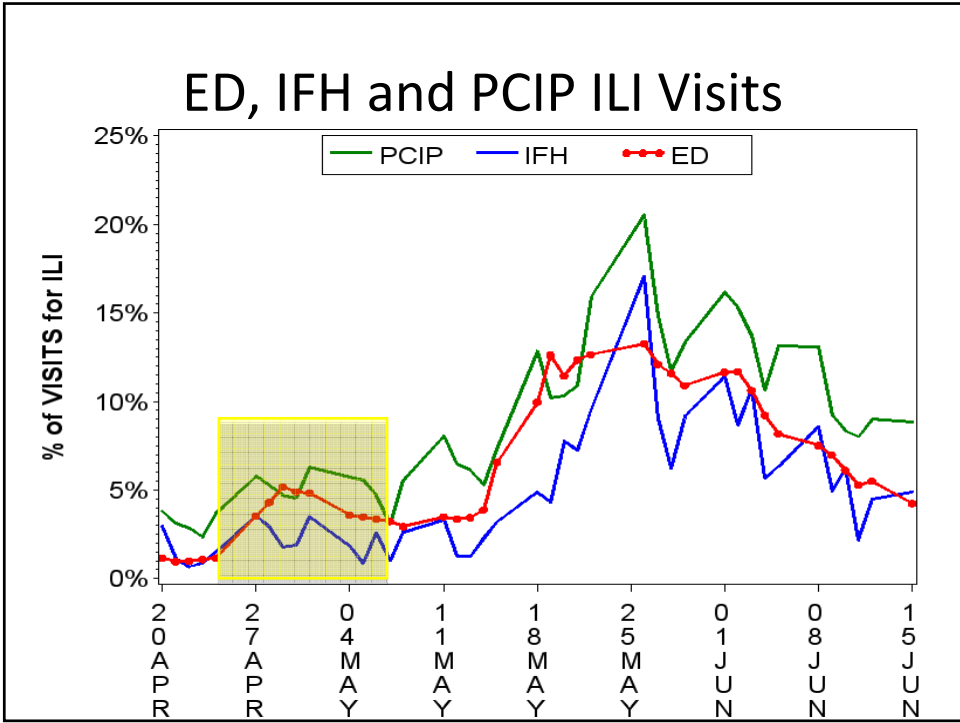
Methods

- Influenza-like Illness (ILI) as a broad estimate of H1N1
 - PCP: Fever + respiratory related reason for visit or diagnosis
 - ED: chief complaint of fever + a sore throat or cough, or a chief complaint of flu

Methods

- Compared number of days to a significant increase at EDs to PCIP clinics using a log-rank test
 - City-wide
 - By borough to see if there was a geographic difference
- Two Waves:
 - 4/24-5/8
 - 5/14-6/4





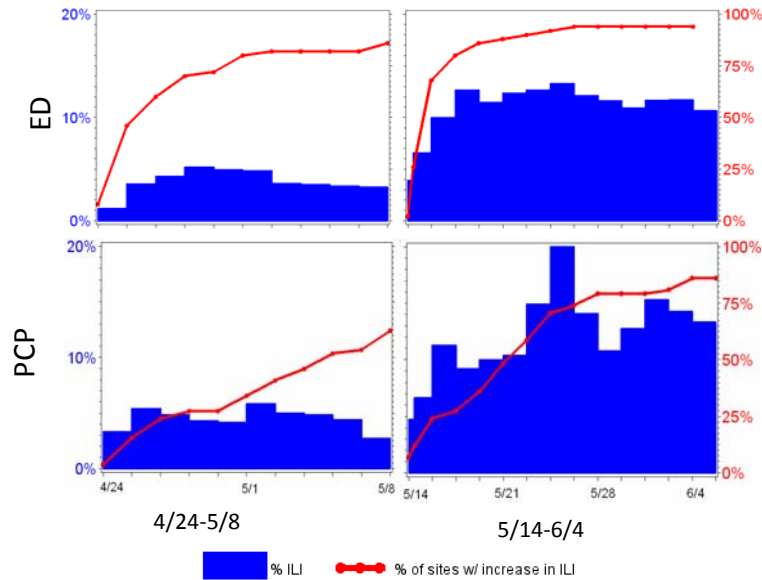
Results, April 24-May 8

Borough	Median Days to Increase in ILI		Number of Facilities with Increase in ILI		1-sided log rank
	ED	PCP	ED	PCP	p-value
All	4	12	43/50 (86%)	36/58 (62%)	<0.0001
Bronx	5	12	8/9 (88%)	10/17 (59%)	0.045
Brooklyn	3	14	12/15 (80%)	6/9 (67%)	0.025
Manhattan	4	13	13/15 (87%)	11/19 (58%)	0.008
Queens	3	7	8/8 (100%)	6/7 (86%)	0.007
Staten Island	14	10	2/3 (67%)	3/3 (100%)	0.902

Results, May 14-June 4

Borough	Median Days to Increase in ILI		Facilities with Increase in ILI		1-sided log rank
	ED	PCP	ED	PCP	p-value
All	4	8	47/50 (94%)	50/58 (86%)	<0.0001
Bronx	1	6	9/9 (100%)	16/17 (82%)	0.004
Brooklyn	4	12	13/15 (87%)	7/9 (78%)	0.039
Manhattan	4	7	14/15 (93%)	17/19 (89%)	0.016
Queens	4	8	8/8 (100%)	5/7 (71%)	0.091
Staten Island	5	8	3/3 (100%)	3/3 (100%)	0.012

Results



Findings

- Emergency Departments experienced an increase in patients with ILI before Primary Care Providers
- Primary Care Providers were vastly under-utilized
- NYCDOHMH changed messaging to encourage visiting PCPs instead of EDs for mild illness.

