

GENERAL ASSEMBLY OF NORTH CAROLINA

SESSION 1997

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HOUSE BILL 171*

Short Title: Strike Out Stroke Project.

(Public)

Sponsors: Representatives Earle; Adams, Beall, Boyd-McIntyre, Clary, Ives, Jeffus, Kiser, Luebke, McAllister, Moore, Mosley, Nye, Redwine, Saunders, Sexton, Shubert, Sutton, Wainwright, Warwick, Watson, and Womble.

Referred to: Human Resources, if favorable, Appropriations.

February 13, 1997

A BILL TO BE ENTITLED

1
2 **AN ACT TO PROVIDE FUNDS TO CONTINUE THE STRIKE OUT STROKE**
3 **PROJECT IN THE DEPARTMENT OF ENVIRONMENT, HEALTH, AND**
4 **NATURAL RESOURCES, AS RECOMMENDED BY THE HEART DISEASE**
5 **AND STROKE PREVENTION TASK FORCE.**

6 Whereas, stroke is the leading cause of disability and the third leading cause of
7 death in North Carolina, and hypertension is the leading cause of stroke; and

8 Whereas, in North Carolina, mortality rates from stroke are highest in African
9 American men, the second highest mortality rate is experienced by African American
10 women, and the incidence and effect of stroke are felt most severely in Eastern North
11 Carolina; and

12 Whereas, the estimated lifetime cost of a mild stroke in an older adult is
13 \$100,000; the estimated lifetime cost of a severe stroke in a younger adult is \$500,000;
14 and

15 Whereas, in North Carolina, stroke and heart disease are the leading causes of
16 hospitalization expenditures; and

1 Whereas, the annual costs of cardiovascular disease to the health care system in
2 the United States in 1996 were estimated to have been \$151 billion, - a 9% increase from
3 the previous year; and

4 Whereas, experts in this area agree that early detection and control
5 management of risk factors such as hypertension, and cardiovascular disease, including
6 but not limited to atrial fibrillation, are the most effective ways to reduce the incidence of
7 stroke and other forms of cardiovascular disease; and

8 Whereas, new drug therapies show great promise in arresting or reversing the
9 damage from a stroke if administered within hours of the occurrence of the stroke; and

10 Whereas, from 1992 to 1996, North Carolina hosted a federally funded pilot
11 project called "Strike Out Stroke"; and

12 Whereas, the "Strike Out Stroke" project was an effective professional
13 education, public education, and public awareness tool in the effort to reduce the
14 incidence of stroke in North Carolina; Now, therefore,

15 The General Assembly of North Carolina enacts:

16 Section 1. (a) The purposes of this act are to:

- 17 (1) Build the capacity of health care providers to control hypertension and
18 treat cardiovascular disease through increased professional education;
- 19 (2) Provide the appropriate standards for equipment, screening and
20 measurement of blood pressure;
- 21 (3) Provide for the development and adoption of protocols for blood
22 pressure measurement;
- 23 (4) Raise awareness of the general public, and specifically the minority
24 community, about the importance of controlling high blood pressure;
- 25 (5) Provide lasting improvement in the health and physical well-being of
26 North Carolinians with hypertension and treating cardiovascular
27 disease, thus providing the State's citizens with an improved quality of
28 life and society with the reduction of health care costs;
- 29 (6) To improve professional education about strategies to prevent stroke by
30 the appropriate treatment of heart disease (including, but not limited to,
31 atrial fibrillation);
- 32 (7) To increase professional awareness as to the emergency nature of stroke
33 and new strategies to reverse or minimize the effects of a stroke; and
- 34 (8) To improve public education about the symptoms of stroke and the need
35 for stroke patients to seek immediate care.

36 (b) There is established in the Department of Environment, Health, and
37 Natural Resources the North Carolina Strike Out Stroke Project. The purpose of the
38 project is to build the capacity of health care providers to control hypertension and
39 effectively treat cardiovascular disease, and to increase awareness among minorities of
40 the importance of controlling high blood pressure and other cardiovascular risk factors.
41 The program shall consist of the following:

- 42 (1) Strategies for educating and training health professionals. The
43 strategies shall include:

- 1 a. Implementation of training sessions on high blood pressure
2 management and prevention that include advice concerning the
3 purchase and maintenance/calibration of blood pressure
4 measurement equipment;
- 5 b. Development of protocols for blood pressure measurement that
6 are consistent with the latest report of the Joint National
7 Committee on Hypertension Control;
- 8 c. Provide and implement programs on the proper treatment of
9 patients with heart disease (including, but not limited to, atrial
10 fibrillation) to prevent stroke in this population;
- 11 d. To disseminate the American College of Chest Physicians
12 recommendations for stroke prevention;
- 13 e. Develop and disseminate protocols for treating stroke as a
14 medical emergency, including recommendations for
15 hospitalization and medical care of acute stroke patients; and
- 16 f. Provide information about blood pressure medications,
17 medications for treatment of risk factors that contribute to heart
18 disease and stroke, including the problems of polypharmacy and
19 side effects.
- 20 (2) Strategies for educating and training patients and targeted communities.
21 The strategies shall include:
 - 22 a. Develop, market and distribute resource and education materials
23 on issues concerning hypertension and stroke prevention,
24 including stroke symptoms and the need for emergency treatment
25 for stroke symptoms;
 - 26 b. Provide such materials to clinical sites through electronic means;
27 and
 - 28 c. Ensure that such materials are culturally sensitive to appropriate
29 literacy levels.
- 30 (3) Strategies for raising public awareness on the causes, nature, treatment,
31 and prevention of hypertension and stroke. The strategies shall include:
 - 32 a. Plan and implement a communication plan incorporating a
33 variety of complementary media and marketing activities
34 targeting medically underserved persons, ethnic populations, and
35 low literacy groups;
 - 36 b. Plan and implement a public awareness campaign that educates
37 the public on the symptoms of stroke and TIA, and the need to
38 seek emergency care if they experience such symptoms; and
 - 39 c. Seek opportunities for public/private partnerships and for
40 building hypertension and risk factor awareness into community
41 events and existing programs, services, and activities.
- 42 (c) In implementing the project, the Department shall do the following:
 - 43 (1) Provide sufficient staff to implement the Strike Out Stroke Project;

- 1 (2) Provide appropriate training for the staff of the Strike Out Stroke
2 Project;
- 3 (3) Develop and disseminate resource materials for professional and patient
4 education and public awareness; and
- 5 (4) Provide training and support to health care professionals in local health
6 departments and clinical settings.

7 Section 2. There is appropriated from the General Fund to the Department of
8 Environment, Health, and Natural Resources the sum of one hundred seventy-five
9 thousand dollars (\$175,000) for the 1997-98 fiscal year and the sum of one hundred
10 seventy-five thousand dollars (\$175,000) for the 1998-99 fiscal year to implement the
11 North Carolina Strike Out Stroke Project.

12 Section 3. This act becomes effective July 1, 1997.