

The Cardiovascular Disease (CVD) Programme is one of the cross cutting themes seen as priority in NHS Cheshire and Merseyside (C&M).

Public Health England (PHE) and NHS England (NHSE) have published data that demonstrates the emphasis that CVD prevention should have in England, and particularly in Cheshire and Merseyside. The 'Size of the Prize' has identified the opportunity to save lives through improved prevention and management of conditions such as atrial fibrillation, hypertension and hypercholesterolemia.

In this Autumn newsletter I would like to share with you some interesting facts and relevant activities linked to the prevention arm of the CVD programme, but also invite you to watch this very informative video from the King's Fund which sets the scene for all the current transformational work in the NHS.

I hope you enjoy it.

Jane Tomkinson

Senior Responsible Officer CVD Programme
Chief Executive, Liverpool Heart and Chest Hospital



The CVD Programme has seven clearly differentiated workstreams spanning primary care, community, acute and specialist care.

The themes are:

- *CVD Prevention & Risk Factor Management*
- *Cardiac Rehabilitation*
- *Integrated Community Heart Failure Services*
- *Integrated & Shared IT Systems & Diagnostics*
- *Primary Pacing Services*
- *Acute Coronary Syndromes Pathway*
- *Stroke Services Sustainability.*

Additionally, we are also working on the implementation of a single aortic dissection pathway across C&M.

In this newsletter we are focusing on the first theme: CVD Prevention.

The Size of the Prize

New PHE analysis suggests that there is now an opportunity to prevent more than 9,000 heart attacks and at least 14,000 strokes over the next three years with better detection and management of high blood pressure, high cholesterol and atrial fibrillation.

Some 5.5 million people in England have undiagnosed high blood pressure and nearly half a million have undiagnosed atrial fibrillation, which are both usually symptomless conditions that substantially increase the risk of stroke, heart attack, dementia and limb amputations. Treatment is effective at reducing risk but under treatment is common among those who are diagnosed.

By working across larger populations, STPs (Sustainability and Transformation Partnerships) can mobilise clinical leaders across a geography and drive larger-scale improvements such as increasing access to blood pressure testing in the workplace, and using the wider local authority and third sector workforce to carry out health checks in community settings.

In Cheshire and Merseyside, the gap between diagnosis and treatment is significant as can be seen in the charts on the following page.

However, these figures demonstrate that prevention of CVD is cost effective



1. The diagnosis and treatment gap, 2015/16

 Hypertension	Estimated adult population with hypertension	647,700
	Estimated adult population with undiagnosed hypertension	261,600
	GP registered hypertensives not treated to 150/90 mmHG target	76,100
 Atrial Fibrillation (AF)	GP registered population with Atrial Fibrillation (AF)	52,800
	Estimated GP registered population with undiagnosed AF	14,000
	GP registered high risk AF patients (CHA2DS2VASc >=2) not coagulated	9,500
 CVD risk	Estimated adult population 30 to 85 years with 10 year CVD risk >20%	180,400
	Estimated percentage of people with CVD risk >20% treated with statins	49%

2. The burden: first ever CVD events, 2015/16

Coronary Heart Disease	6,900
Stroke	3,250
Heart Failure	2,350

3. The opportunity: potential events averted and savings over 3 years by optimising treatment in AF and hypertension, 2015/16

Optimal anti-hypertensive treatment of diagnosed hypertensives averts within 3 years:	460 heart attacks	Up to £3.3million saved
	680 strokes	Up to £9.6million saved
Optimally treating high risk AF patients averts within 3 years:	760 strokes	Up to £12.7million saved

Atrial Fibrillation (AF):

Working with Innovation Agency

Identification of atrial fibrillation is important as timely diagnosis and treatment will help prevent stroke and reduce the number of early deaths. Undiagnosed patients can be identified in primary care by using the GRASP-AF tool to review clinical records. In this way, newly identified AF patients are appropriately managed.

Working with the Innovation Agency and NHSE, we are helping to deploy GRASP-AF across GP practices in C&M; GPs are trained on the use of the tool with support from NHSE and the STP.

In Warrington, Dr Quincy Chukka has proactively shared best practice among his GP peers, and now Warrington CCG are one of the best in the country for the use of GRASP-AF and appropriate management of AF cases.

Use of Technology to promote CVD prevention

The Innovation Agency is deploying healthcare innovations across C&M. One of them is AliveCor, a small device that connects to a smart phone and reads an electrocardiogram (ECG) from holding the device with the two hands. The information is analysed and seen by a clinician.

At an AF awareness session at LHCH, the team came across an incidental finding; one member of staff trying the device showed an irregular reading; this person has seen been diagnosed with an inherited cardiac condition unknown to them.

This type of testing can be done anywhere and can most definitely save lives.

This type of device has been piloted by the Cheshire Fire and Rescue Service at the same time as fire alarm checks for those who are house-bound.

Smoking: Making Every Contact Count

The STP working with Public Health England, Local Authorities and NHS providers and commissioners is using the Making Every Contact Count (MECC) initiative to 'educate' patients and the public about the risks and harm to health from smoking. There is a lot of evidence that demonstrate the direct link between smoking and CVD. It is down to all of us as healthcare employees to promote smoking cessation by educating people and offering alternatives that can help give up the habit.

At LHCH Jan Naybour is the MECC lead and is an ambassador for smoking cessation across C&M.



CVD working group at LHCH