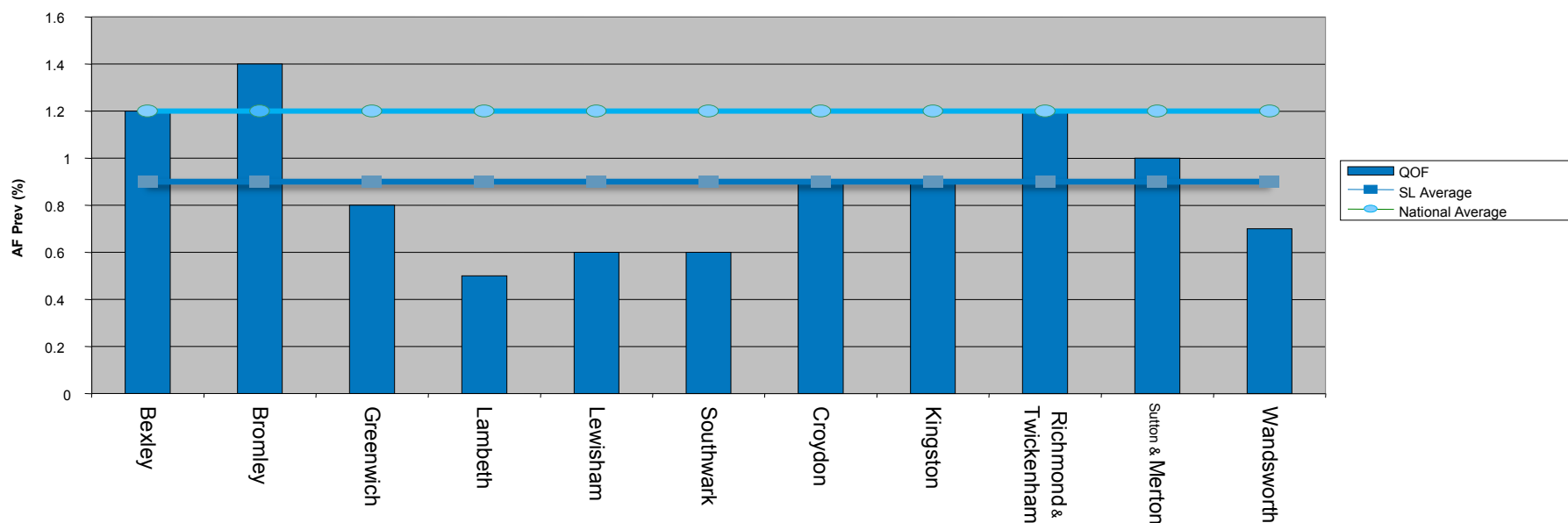


# Why focus on Stroke Prevention through addressing AF?

## The South London Picture



# Does the national picture reflect the South London situation?



*PCT Prevalence Variation across South London PCTs (QOF)*

# Age Adjusted Prevalence

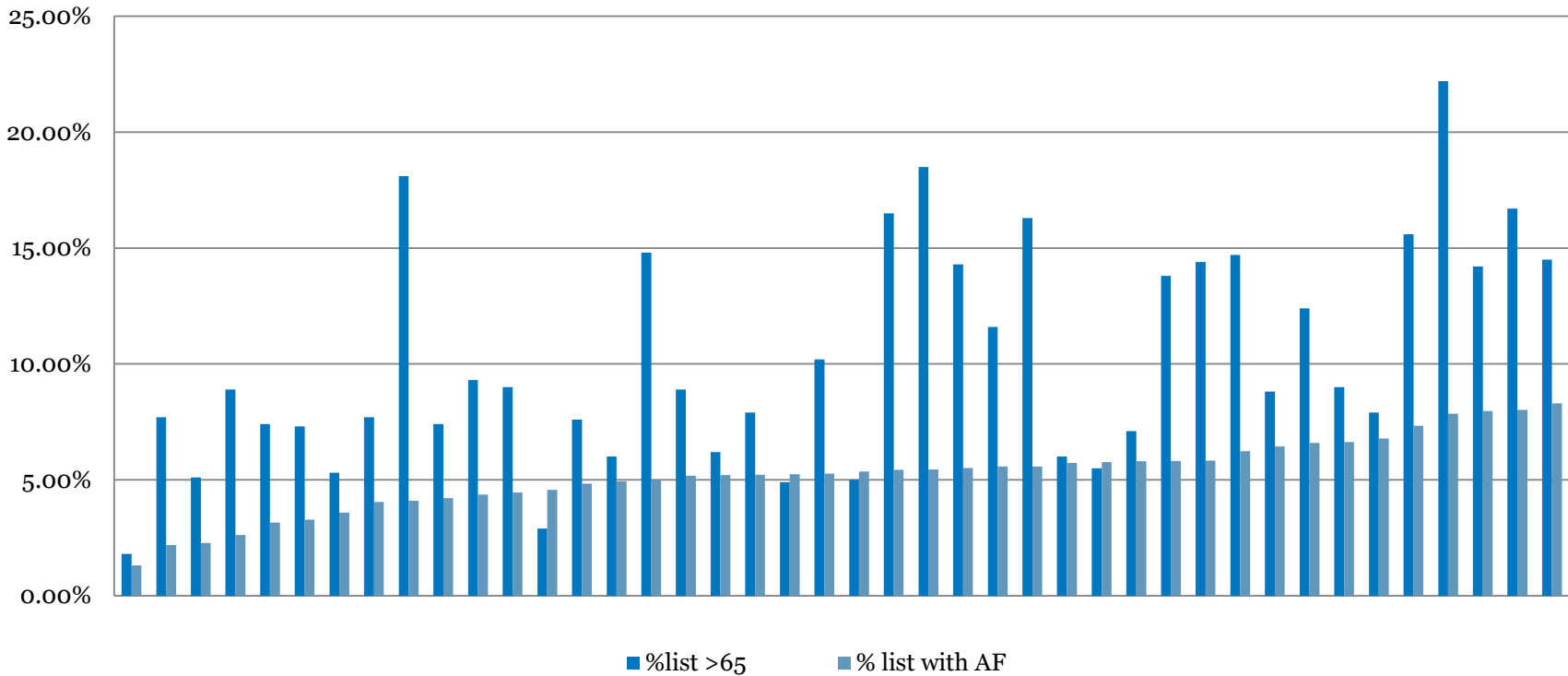
South London AF Prevalence (%) CHECK THIS			
National	Local (QOF)	Age adjusted >65 years	Age adjusted >75 years
1.2	0.9	7.7	16.2

More informative to use age adjusted prevalence because;

- AF increases per decade
- relates to CHADS2 risk stratification tool
- can be used to identify those practices with higher age bracket population that should have a higher prevalence
- identify 'within borough' variation

# Age adjusted AF prevalence by practice

AF prevalence and practice population



An example from a south London PCT



# Focus Areas

## STROKE PREVENTION

### 1. Identifying AF

- Promote pulse checks;*
- Opportunistic opportunities e.g., flu clinics/health checks
  - Add onto disease templates
  - Patient recalls/reviews
  - Patient awareness

### 2. Diagnosing AF

- Access to timely diagnostics
- Clinician confidence in interpretation
- Utilise new technologies e.g., remote interpretation

### 3. Treating AF

- Treatment optimisation for existing AF
- Using CHADS2 for stroke risk stratification
- Robust local pathway to allow primary care management as appropriate

## EDUCATION

# The BIG question.....

## Any cost savings?

- The cost of maintaining one patient on warfarin for one year, including monitoring is estimated to be £383.
- The cost per stroke due to AF in the first year is estimated to be £11,900

	PCT 1	PCT 2	PCT 3	PCT 4	PCT 5	PCT 6	PCT 7	PCT 8	PCT 9	PCT 10	PCT 11
Estimated prevalence of atrial fibrillation for your population (persons)	1,700	3,100	1,200	2,600	1,500	2,100	3,100	1,400	1,600	1,700	1,500
Estimated additional number requiring Warfarin according to NICE guidance for AF (persons)	580	1,050	420	900	510	730	1,060	490	550	570	530
Total number of strokes avoided p.a. if fully compliant with NICE guidelines for AF	23	41	16	35	20	28	41	19	21	22	20

Using the above figures for PCT 2 the cost of treating additional patients on Warfarin to avoid 41 strokes equates to a yearly saving of **£85,750**

And we haven't even looked at diagnostics yet.....



# Suggested local actions.....

- Map local AF pathway
  - How/when/why is AF identified
  - How/when/ where is AF diagnosed
  - What further management services are available
- Baseline the problem
  - % of practice population >65 and >75
  - % of >65 with AF
  - % of >75 with AF
  - % of patients on optimal therapy
  - Conversion rate
  - Demand and capacity
- Familiarise yourself with local PCT commissioning process
- Get in touch with the South London Cardiac & Stroke Network (SLCSN) for project resources, local contacts, national picture and general project support.



# Tools available

## Identifying AF

- Commissioning paper – why address AF in the first place?
- Patient awareness leaflet
- Local results from a flu clinic pulse pilot
- Know your pulse

## Diagnosing AF

- ECG economic modelling template
- Telemedicine service

## Treating AF

- Pathway and FAQ
- 10 steps before secondary care referral, traffic lights
- GRASP-AF
- Warfarin decision tool
- Anticoagulation NPSA standards
- New drugs consensus statement

Examples of initiatives from other areas are also available.....