

Primary Care Cardiovascular Society

Driving primary care to deliver the best in cardiovascular health



Delivering Detect, Protect and Perfect in AF treatment, in primary care

Tristan Groves – CAVUHB Anticoagulation and inherited bleeding disorder pharmacist

Declarations of Interest



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Received honoraria from:

- BMS, Pfizer and Bayer for providing educational sessions
- BMS/Pfizer alliance for attending conferences

No such thing as a stupid question? \heartsuit



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Why do meteors always land in craters?

AF Prevalence in Wales Primary Care Rhwydwaith GIG Cardiovascular Cardiaidd Cymru YMRL Society Wales Cardiac Driving primary care to deliver Network the best in cardiovascular health All Registers - Prevalence Primary Care Information Portal Wales - 2021/22 Cancer (Total Pop) Asthma (Total Pop) COPD (Total Pop) **All Wales Prevalence** Atrial Fibrilation (Total Pop) Coronary Heart Disease (Total Pop) 2021/22= 2.49% Diabetes Mellitus (Total Pop) Diabetes Mellitus (Age Spec Pop) Heart Failure (Total Pop) Hypertension (Total Pop) Obesity (Total Pop) Obesity (Age Spec Pop) Stroke (Total Pop) Dementia (Total Pop) Epilepsy (Total Pop) Epilepsy (Age Spec Pop)

6

Learning Disabilities (Total Pop) Mental Health (Total Pop) Palliative Care (Total Pop) Osteoporosis (Total Pop) Osteoporosis (Age Spec Pop) Rheumatoid Arthritis (Total Pop) Rheumatoid Arthritis (Age Spec Pop)

0

2

Prevalence %

10

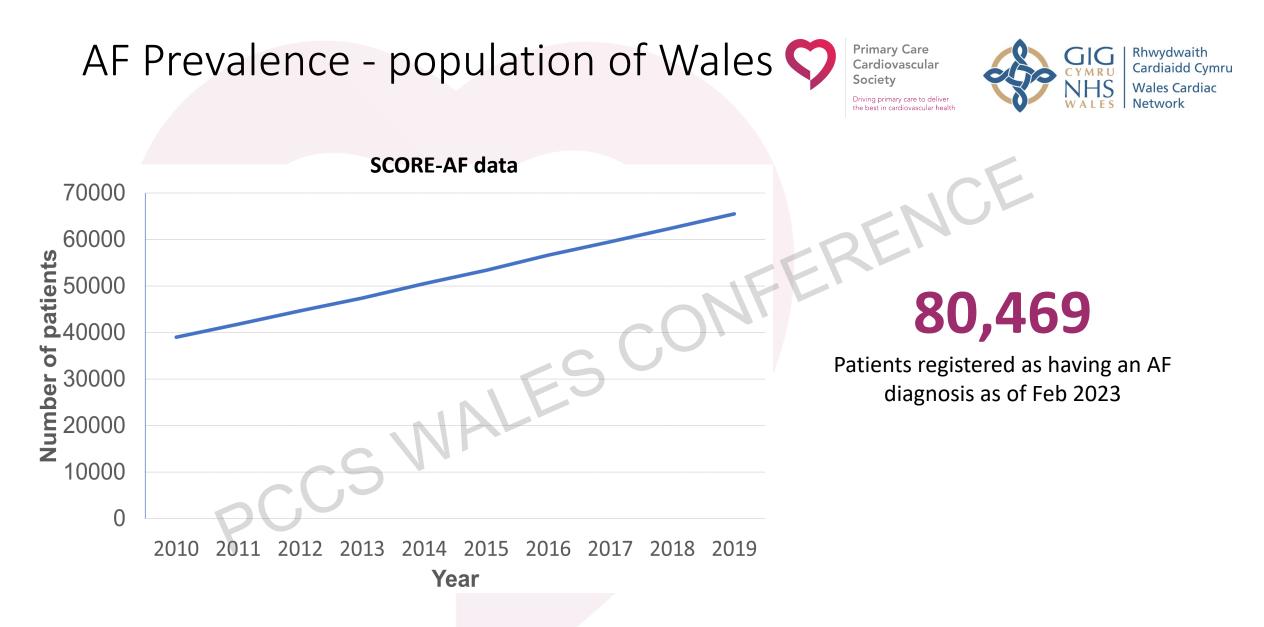
12

14

16

18

8



AF, atrial fibrillation.

Harris D, et al. Population Trends in Prevalence, Risk Status, Antithrombotic Therapy, and Hospitalisation with Thromboembolic Events in Non-Valvular Atrial Fibrillation: SAIL Comparative Anticoagulation Outcomes Risk Evaluation Study (SCORE-AF). Paper presented at the 4th International Conference of the ESC Council on Stroke 2-4 June 2021.

What do we mean by Detect, Protect and Perfect?¹

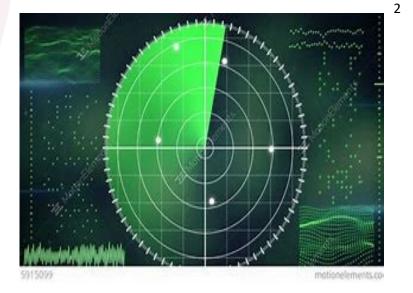






• Detect

- Are we identifying those people in the community with AF?
 - Are we making every contact count?



AF, atrial fibrillation.

1. NHS England. Atrial Fibrillation (AF) toolkit Detect, Protect and Perfect: Working together across London to prevent AF related strokes. Available from https://www.england.nhs.uk/london/wp-content/uploads/sites/8/2019/07/detect-protect-perfect-london-af-toolkit-062017.pdf. Accessed March 2023; 2. Image from Shutterstock.

What do we mean by Detect, Protect and Perfect?¹







• Detect

- Are we identifying those people in the community with AF
 - Are we making every contact count?

Protect

• Are new patients, identified as being at risk of AF related stroke been given appropriate evidence based treatment to reduce their risk of stroke?



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What do we mean by Detect, Protect and Perfect?¹

• Detect

- Are we identifying those people in the community with AF?
 - Are we making every contact count?
- Protect
 - Are new patients, identified as being at risk of AF related stroke been given appropriate evidence based treatment?
- Perfect
 - Are existing AF patients being regularly reviewed and are they on appropriate evidence based treatment?

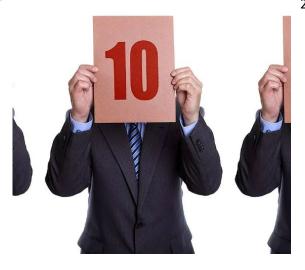
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Protect - what treatments are our AF patients receiving?



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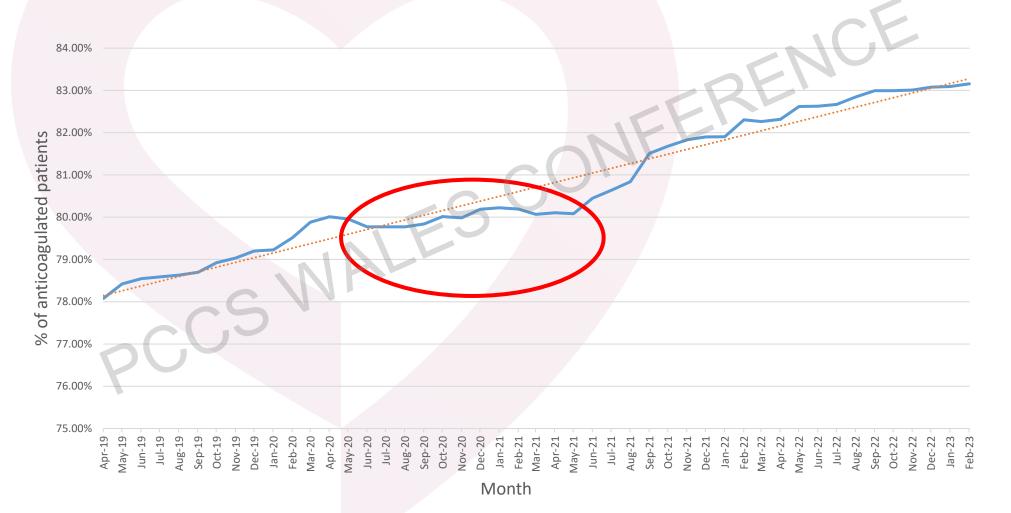
Total of 66,899 (approx. 83% of total AF population) patients diagnosed with AF currently prescribed an anticoagulant.

All Wales - Anticoagulated AF Patients as % of Total AF patients





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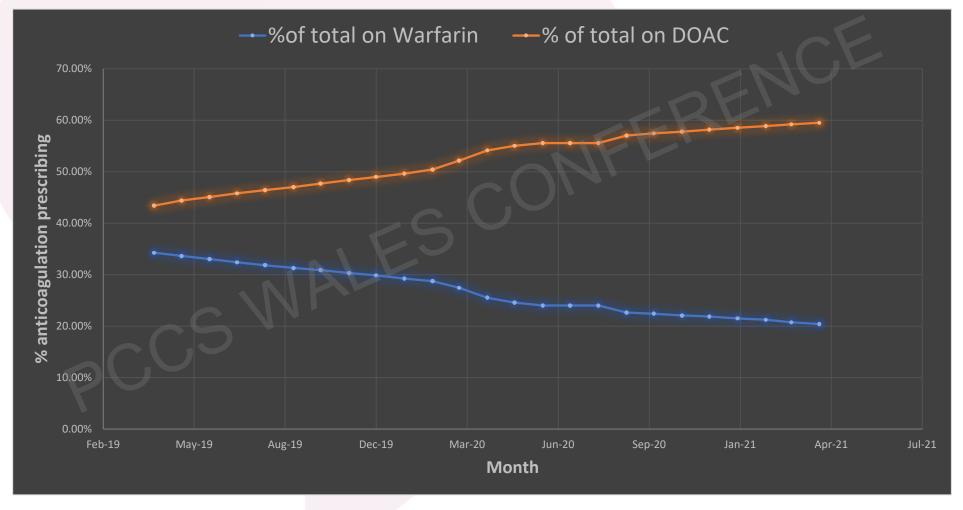
All Wales - Anticoagulation Prescribing as % of Total AF Population



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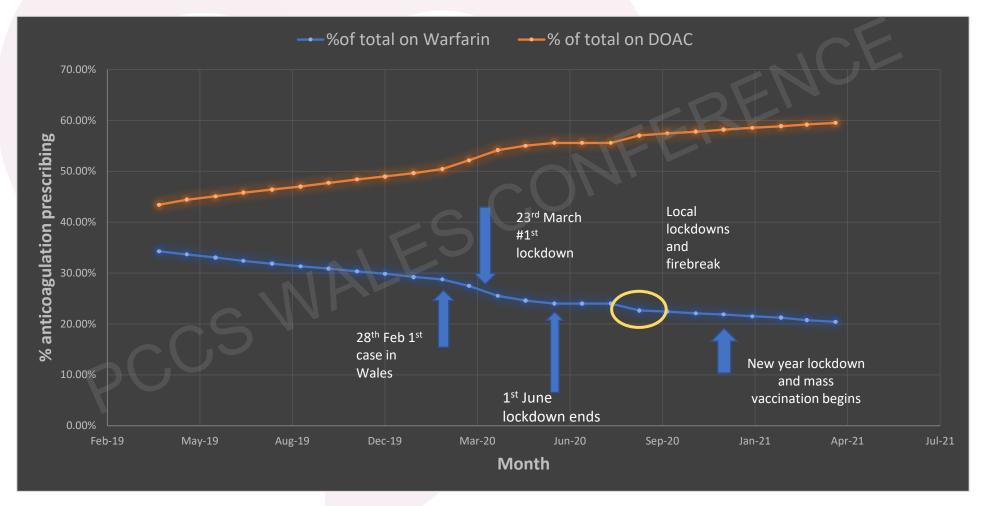
AF, atrial fibrillation; DOAC, direct-acting oral anticoagulant.

All Wales - Anticoagulation Prescribing as % of Total AF Population



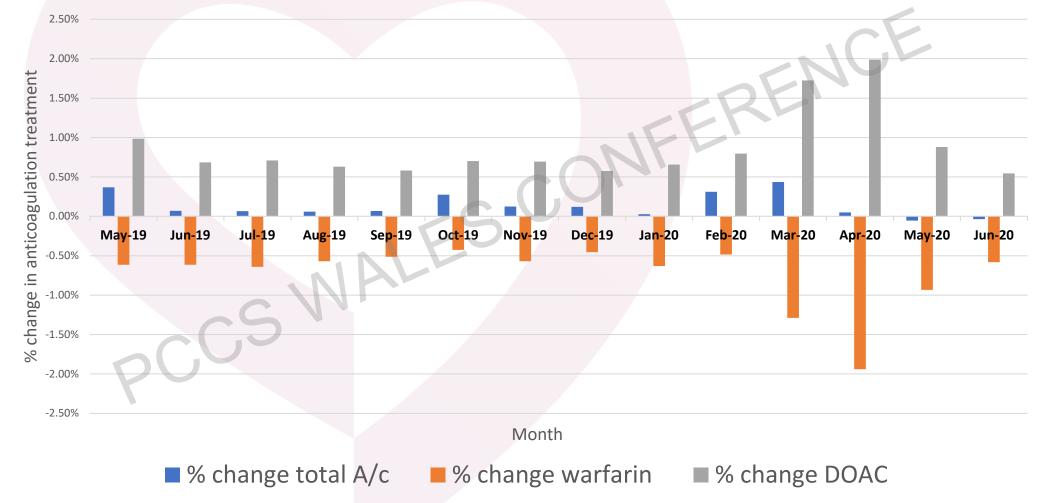






AF, atrial fibrillation; DOAC, direct-acting oral anticoagulant.

% change in AF patients anticoagulation treatment



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NHS

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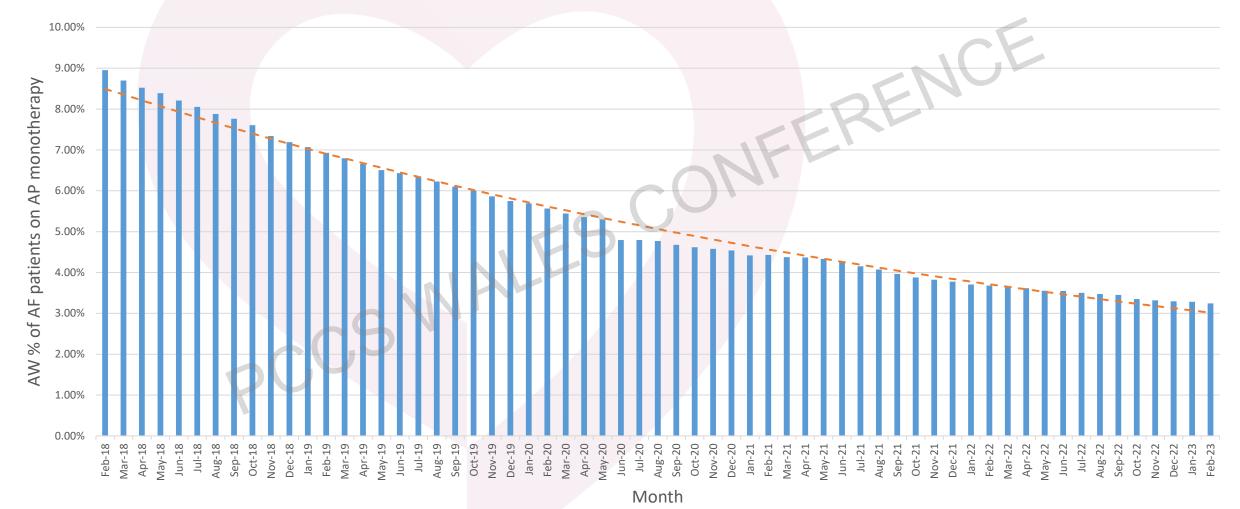
All Wales % of AF patients on Antiplatelet Monotherapy



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AF, atrial fibrillation; AP, antiplatelet; AW, All Wales.

Are existing AF patients being regularly reviewed and are they on appropriate evidence based treatment?







All Wales % of AF patients with CHA_2DS_2 -VASc >2 on no treatment



AF, atrial fibrillation.

Month

Are existing AF patients being regularly reviewed and are they on appropriate evidence based treatment?



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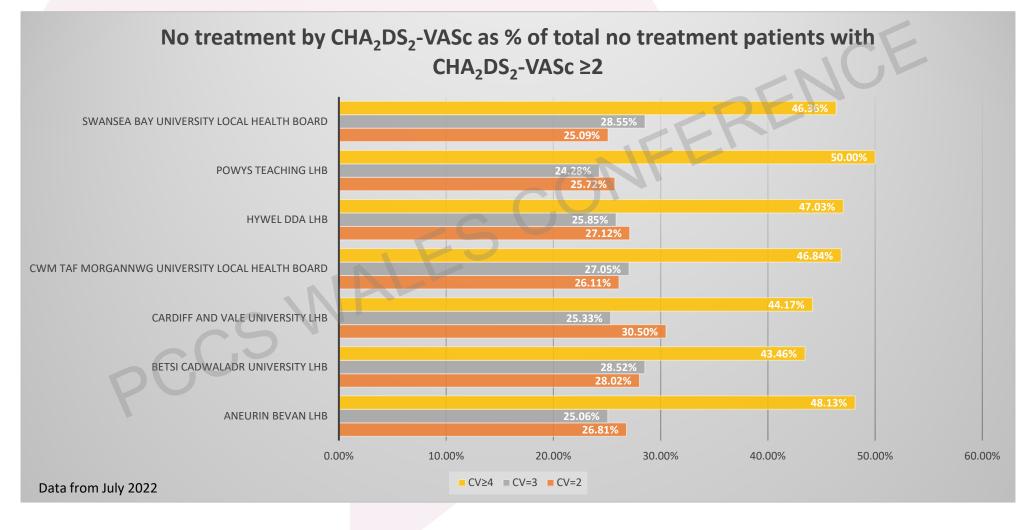
Which patients should we be focusing on to review?



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CV, CHA₂DS₂-VASc.

Impact o	of national initiatives Primary Care Cardiovascular Society Driving primary care to deliver the best in cardiovascular health	Image: Constraint of the second system Image: Constraint of the second system Rhwydwaith Image: Constraint of the second system Image: Constraint of the second system Rhwydwaith Image: Constraint of the second system Image: Constraint of the second system Rhwydwaith Image: Constraint of the second system Image: Constraint of the second system Image: Constraint of the second system Image: Constraint of the second system Image: Constraint of the second system Image: Constraint of the second system Image: Constraint of the second system Image: Constraint of the second system Image: Constraint of the second system Image: Constraint of the second system Image: Constraint of the second system Image: Constraint of the second system Image: Constraint of the second system Image: Constraint of the second system Image: Constraint of the second system Image: Constraint of the second system Image: Constraint of the second system Image: Constraint of the second system Image: Constraint of the second system Image: Constraint of the second system Image: Constraint of the second system Image: Constraint of the second system Image: Constraint of the second system Image: Constraint of the second system Image: Constraint of the second system Image: Consecond system Image: Constrai
	Disease registers	
	Atrial fibrillation (AF)	CE
	Indicator	
	AF001. The contractor establishes and maintains a register of patients 2 with atrial fibrillation	
	Atrial Fibrillation (AF)	
	Indicator Points	
P	AF006. The percentage of patient with atrial fibrillation in whom stroke risk has been assessed using CHA2DS2-VASx score risk stratification scoring system in the preceding 3 years (excluding those patients with a previous CHADS2 or CHA2DS2-VASc score of 2 or more) and a record of counselling regarding the risks and benefits of anticoagulation therapy has been made	
	AF007. In those patients with atrial fibrillation with a record of a CHA2DS2-VASc score of 2 or more the percentage of patients who are currently treated with anticoagulation drug therapy.	

GOV.Wales. Quality Assurance and Improvement Framework: Guidance for the GMS Contract Wales 2019/20. Available from https://www.gov.wales/sites/default/files/publications/2020-11/guidance-for-the-gms-contract-wales-2019-20.pdf. Available from https://www.gov.wales/sites/default/files/publications/2020-11/guidance-for-the-gms-contract-wales-2019-20.pdf.

Impact of national initiatives - QAIF



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4.4.4 Measurement of the implementation of the project

Each GP practice will lead the implementing a stroke reduction action plan.

The practice has had a meeting to discuss the AF dashboard measures.

Number of structured reviews for patients with AF.

The outcomes we expect from the project are:-

% of patients with AF on anticoagulant or with documented shared decision making declined anticoagulant.

AF, atrial fibrillation; GP, general practice; QAIF, Quality Assurance and Improvement Framework.

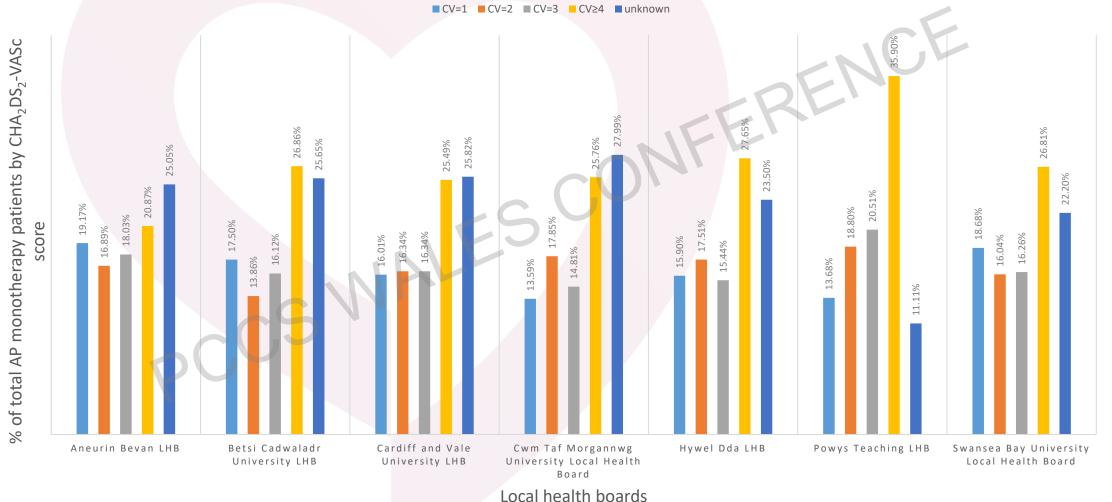
GOV.Wales. Quality Assurance and Improvement Framework: Guidance for the GMS Contract Wales 2019/20. Available from https://www.gov.wales/sites/default/files/publications/2020-11/guidance-for-the-gms-contract-wales-2019-20.pdf. Accessed April 2023.

% of total AP monotherapy patients \heartsuit by CHA₂DS₂-VASc score July 2018



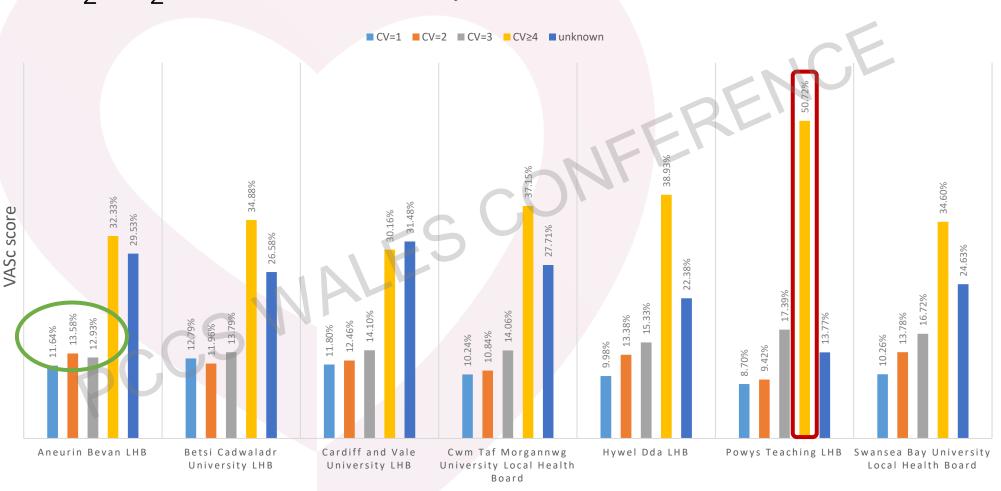


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AP, antiplatelet; CV, CHA₂DS₂-VASc.

% of total AP monotherapy patients \heartsuit by CHA₂DS₂-VASc score July 2022



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Local health boards

% of total AP monotherapy patients by CHA $_2$ DS $_2$ -

Review of impact of QAIF







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- Data suggests that those patients with lower CHA₂DS₂-VASc score were more likely to have been reviewed
 - Difficulties in accessing GP practices
 - Due to COVID
 - Highest CV score patients will be older with increased co-morbidities so may not be able to attend the GP practice
 - ?Nursing home patients

Impact of interventions made by the Welsh Cardiac Network

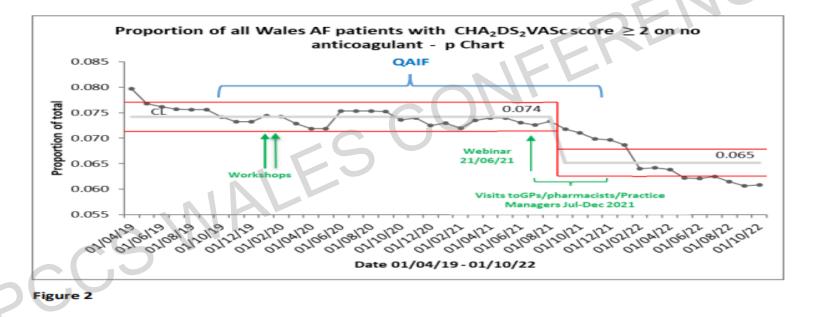


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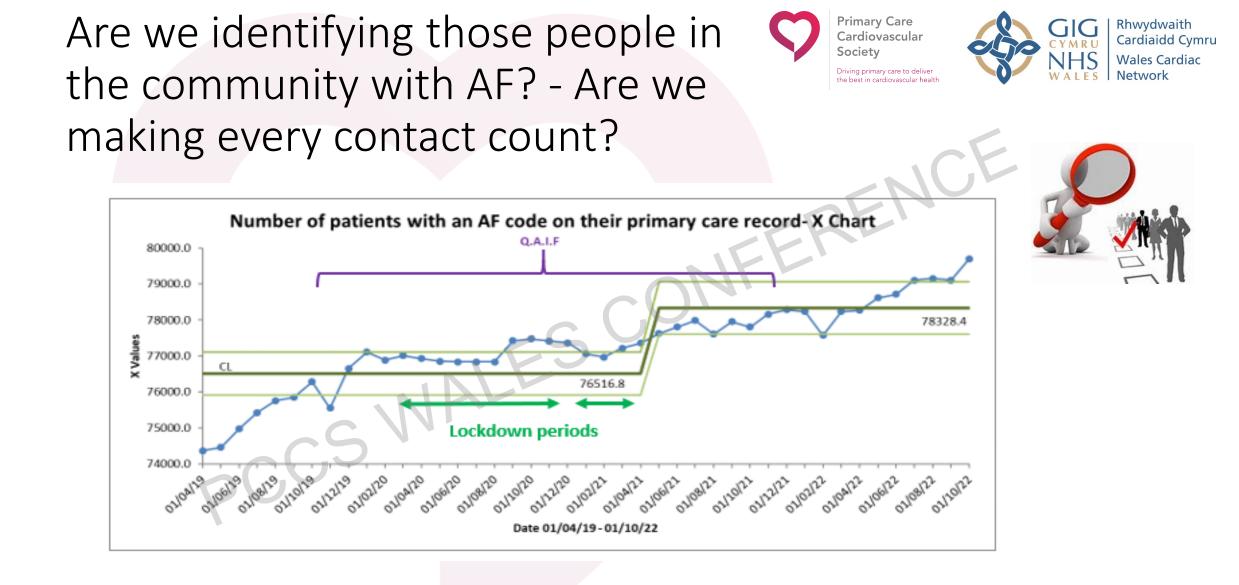
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We then looked at the cohort with known AF and a CHA₂DS₂Vasc score of ≥2 who were on no treatment, the target group for the QI project (QAIF) (Fig 2).



There was a significant shift downwards, again coinciding with the targeted education intervention. The proportion of AF patients with a CHA_2DS_2Vasc score of ≥ 2 on no treatment diminished, and the trend appears to be continuing downward.

AF, atrial fibrillation; GPs, general practitioners; QAIF, Quality Assurance and Improvement Framework; QI, quality improvement. Unpublished original research by the Welsh Cardiac Network. Due to be presented at the BMJ – International Forum on Quality and Safety in Healthcare (Copenhagen May 2023).



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Are we identifying those people in the community with AF? - Are we making every contact count?

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- AF can often be challenging to diagnose as it can present as both intermittent and asymptomatic and studies have demonstrated that only 70-80% of patients with AF are diagnosed¹
 - Based on current "know AF" patients in Wales, an estimate of undiagnosed AF may be as high as 34,000 patients
- This has led the British Heart Foundation to estimate that there may be as many as 300,000 patients with undiagnosed AF at risk of stroke in the UK²

AF, atrial fibrillation; UK, United Kingdom.

1. GOV.UK. Research and analysis: Atrial fibrillation prevalence estimates for local populations. Available from https://www.gov.uk/government/publications/atrial-fibrillation-prevalence-estimates-for-local-populations. Accessed April 2023; 2. British Heart Foundation. Atrial fibrillation: finding the missing 300,000. Available from https://www.bhf.org.uk/for-professionals/healthcare-professionals/blog/2019/atrial-fibrillation-finding-the-missing-300000. Accessed April 2023.

Future Directions



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- Targeted reviews of patient(s) at highest risk
 - Role of "national initiative to support these reviews"
 - Targeted education and support provided to Practices/clusters has been shown to have impact - expansion of this to specific identified practices/clusters?
 - Greater role of allied health care professionals to carry out reviews away from Practice setting?
- Making every contact count
 - Greater use of targeted opportunistic screening for AF
 - Larger adoption of technology such as AliveCOR[®], Iphone[®] etc, to facilitate this.





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