

CVD Prevention Recovery

How the NHS is working to restore diagnosis and management of cardiovascular disease



Background to CVD Prevention

What is CVD?

Heart and circulatory disease, also known as cardiovascular disease or CVD, causes a quarter of all deaths in the UK and is the largest cause of premature mortality in deprived areas. The NHS Long Term Plan identified CVD as the single biggest area where the NHS can save lives over the next 10 years.

What are the risk factors?

Millions of people are unaware that they are living with serious but treatable conditions such as atrial fibrillation, high blood pressure (hypertension) and high cholesterol. These are known as the A-B-C conditions, which are the major causes of CVD.

How can we prevent CVD?

CVD can often largely be prevented by leading a healthy lifestyle, for example stopping smoking, reducing alcohol intake, maintaining a healthy diet and exercising regularly. Spotting risk factors early reduces the chance of developing potentially life-threatening conditions including heart attacks, stroke and dementia.

What impact did COVID-19 have?

During the pandemic, fewer people came forward for the kind of non-urgent/routine care where the early signs of CVD are often picked up. As a result we saw a reduction in diagnosis, monitoring and treatment of the A-B-C conditions. Data shows that two million fewer people were recorded as having controlled hypertension in 2021 compared to the previous year.

Modelling indicates that this reduction in blood pressure control could lead to an estimated 11,190 and 16,702 additional heart attacks and strokes respectively over a three year period. There are also indications that lifestyle changes during the pandemic such as reduced exercise, changes in diet and increased alcohol consumption may have also increased people's risk of developing CVD.

How has the NHS responded?

The NHS has urged people to come forward if they are worried about their heart throughout the pandemic, and embraced innovation to deliver monitoring and care safely.

We are now working with local teams on four high-impact areas to support them to restore detection, monitoring and treatment of high-risk conditions. These are:

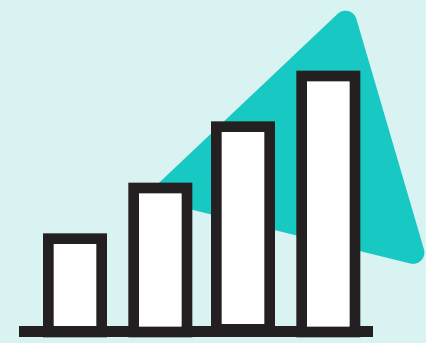
- monitoring and targeting unwarranted variation
- prioritising system leadership for CVD prevention
- supporting a system-wide response
- increasing public education.

CVD Prevention Recovery



For the NHS this means:

Monitoring & targeting unwarranted variation



We will equip local teams with the data they need to target populations with the highest variation and highlight inequalities in CVD.

Supporting a system-wide response



We will provide guidance and resources on innovative ways of reaching patients to help teams across the NHS. From health checks in high street pharmacies and blood pressure monitors at home, to partnerships with the third sector.

Enabling system leadership



We will provide funding to create CVD leadership posts in each Integrated Care System and local networks of clinical specialists to help coordinate care pathways.

Increasing public education



We will continue to build on national communications campaigns that signpost patients to NHS support and build public awareness of the importance of prevention of cardiovascular disease.

CVD Prevention Recovery

For our patients this means:

Driven by data



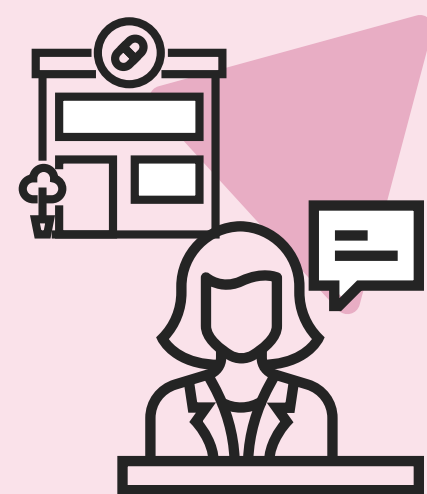
GP teams will be able to access the data they need to be able to spot those at risk of CVD earlier and support them to manage their condition if necessary.

More choice



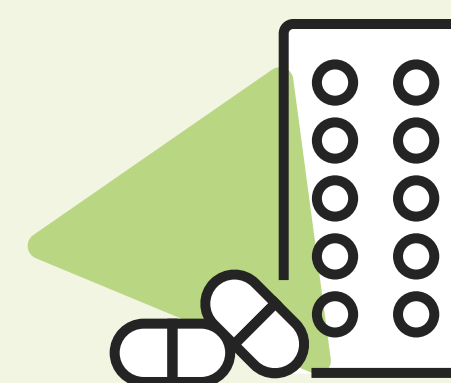
We will continue to build on initiatives that give patients more choice on how they monitor their condition.

Making every contact count



Using learning from the success of the NHS COVID-19 vaccination programme we are expanding ways to make it as convenient as possible for people to get checked for CVD risk factors.

Expanding treatment options



Through national agreements, we will ensure patients have access to a range of cutting-edge treatments whilst providing value for taxpayers and the NHS.

CVD Prevention Recovery: Case Studies

Using data to target local interventions

As part of the national CVDPREVENT audit, a data and improvement tool is available which enables GPs and healthcare professionals to understand the performance of their services and identify potential improvement opportunities. This data can be compared against national and local benchmarks, which can be broken down by demographics to highlight inequalities.

Blood Pressure Monitoring @Home

Through the NHS@Home programme, free blood pressure monitors are being made available to 220,000 people who have been diagnosed with uncontrolled high blood pressure and who could benefit from regular checks. Patients can measure their blood pressure from home and send the reading to their GP to review by telephone, email or through a digital remote monitoring platform.

Making every contact count

As part of the COVID-19 vaccination programme, a number of NHS Primary Care Networks have offered a blood pressure test at vaccination centres to all over 40s who have not had a check in the past 5 years, along with anyone with a previous hypertension diagnosis. In addition to this, since October 2021, more than 6,000 community pharmacies have signed up to offer free blood pressure checks for over-40s. Over 18,000 people had a blood pressure check in the first three months of the service going live with patients' readings recorded and shared with their GP Practice.

NHS strikes nationwide drug agreements

From 2022, the NHS has secured a national procurement deal on direct-acting oral anticoagulants (DOACs), a type of blood-thinning drugs recommended by NICE as being more effective for the prevention of AF-related stroke than other blood thinners. The agreement means up to 610,000 more patients could benefit from treatments. It is estimated that uptake at this level could help to prevent an estimated 21,700 strokes and save the lives of 5,400 patients from a fatal outcome over the next three years.