



GP Practice

Outcome Report

June 2019

This Presentation



- Population size and AF prevalence
- Number of medical notes reviewed
 - AF case finder
 - Coded AF and not treated (High Risk)
 - Vitamin k antagonist
 - DOACs
- AF Register and prevalence following AF Case Finder
- Patients eligible / ineligible for Cardiologist Review
- Outcome of Cardiologist Review
- Number of potential AF related strokes prevented and savings to the NHS

Practice Population and AF Prevalence



- GP Practice population 11,490
- Number of patients on AF Register 291
- AF prevalence 2.5%

Number of Medical Notes Reviewed and Revised AF Prevalence



- Number of medical notes reviewed:
 - AF case finder 162
 - Coded AF and not treated 53
 - Vitamin K antagonist 102
 - DOACs 136
 - Total medical notes reviewed 453

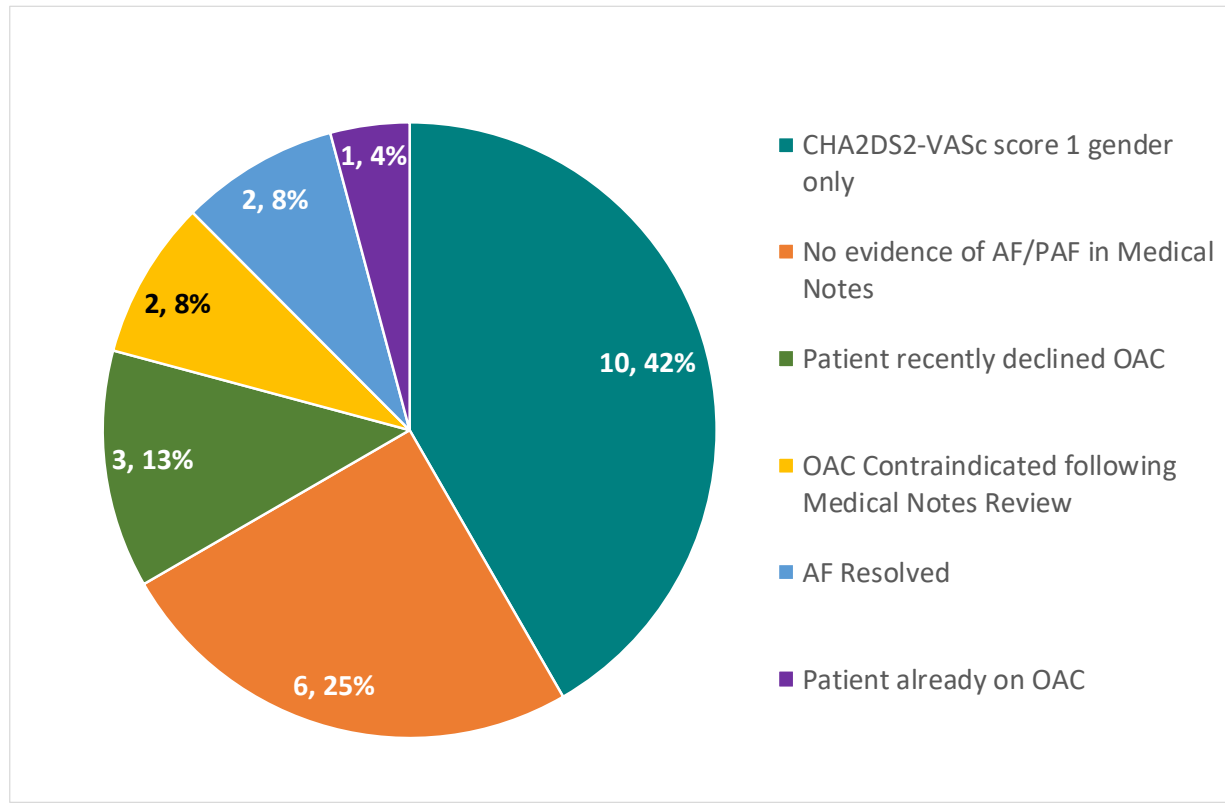
- Number of patients on AF Register after AF case finder 313 (22 additional AF cases found)

- AF prevalence after AF case finder 2.7%

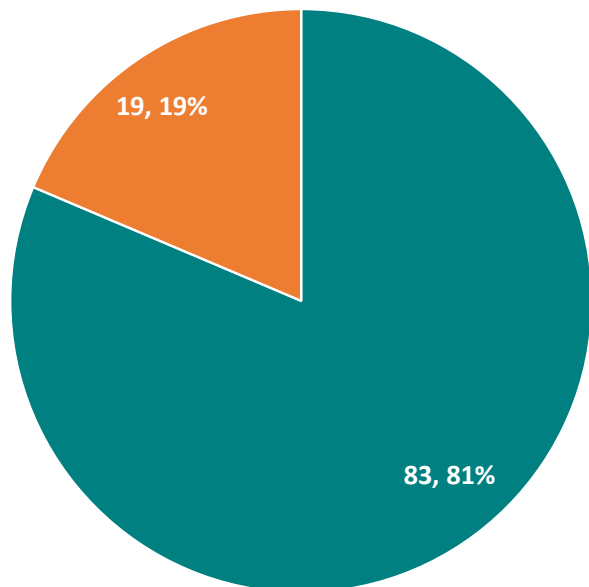
Patients Eligible / Ineligible for Cardiologist Review



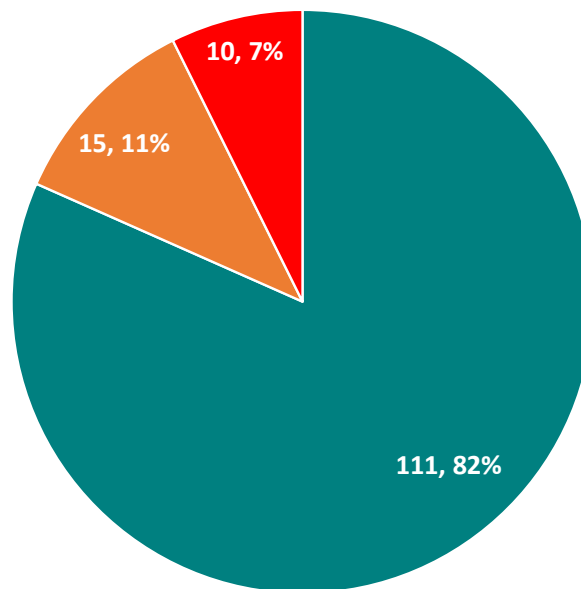
- Patients eligible for Cardiologist Review 55
 - (7 AF case finder, 29 coded AF not treated, 19 vitamin K antagonist)
- Patients ineligible for Cardiologist Review (coded AF not treated) 24 (45.3% of 53)
- Reasons why patients were ineligible are as follows:



Vitamin K Antagonist and DOAC Findings



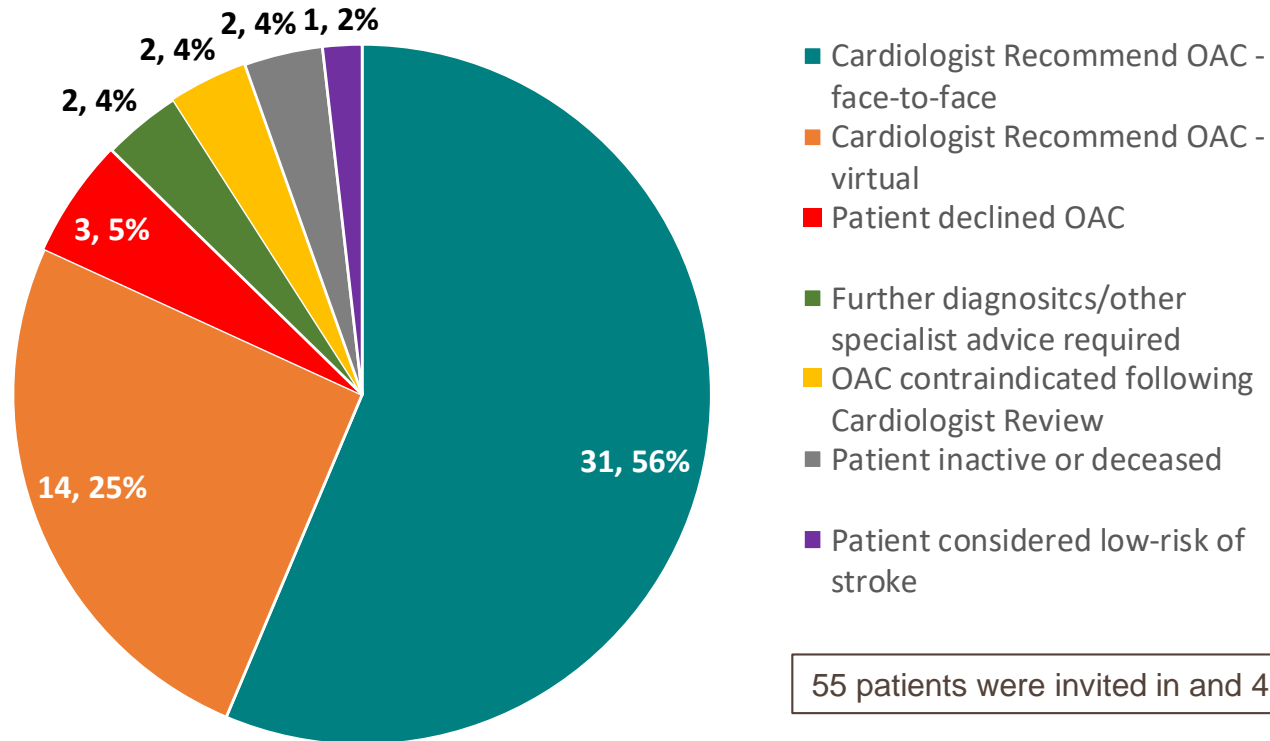
- Vitamin K Antagonist Well Managed
- Vitamin K Antagonist - sub-optimal TTR



- DOAC - Well Managed
- DOAC - Requires Dose Review
- DOAC - Requires Blood Tests

Patients Eligible for Cardiologist Review

Outcomes



55 patients were invited in and 41 attended

Of those recommended for OAC previously not treated:
DOAC 100% and Vitamin K Antagonist 0%

19 patients recommended to switch from Vitamin K Antagonist to DOAC



- Two months after PCAF Clinics, a Clinical Auditor followed-up on the recommendations made which include:
 - Changes in medication
 - Referral for further diagnostics
 - GP consultations regarding AF and OAC
- This review reveals the number of patients who:
 - Commence OAC
 - Switch from VKA to DOAC
 - Decline recommended changes in medication
 - Rule in/out AF following further diagnostics
 - Confirm OAC eligibility following other specialist opinion
 - Currently active patients

Vitamin K Antagonist and DOAC Prescribed



- Pre-PCAF review the breakdown of 238 patients on OAC was as follows:
 - Vitamin K Antagonist 102 (42.9%)
 - DOAC 136 (57.1%)

- Post-PCAF review the breakdown of 262 patients on OAC was as follows:
 - Vitamin K Antagonist 89 (34.0%)
 - DOAC 173 (66.0%)

Number of AF Related Strokes Prevented following PCAF and Potential Savings (NNT = 25 and cost of stroke = £24,000)



- 55 patients were deemed eligible for Consultant Cardiologist review with 45 patients recommended for Anticoagulation and 2 for further diagnostics
- Post-PCAF review:
 - 24 on DOAC, 13 switched from Vitamin K Antagonist to DOAC, 6 remain on Vitamin K Antagonist, 2 contraindicated for OAC, 3 declined OAC, 3 not indicated for OAC, and 4 patients inactive
- We would expect **1.72** AF related strokes prevented
 - a cost saving to the NHS of **£41,280**