



GP Practice Comparisons at AHSN / CCG Level

Outcome Report

June 2019

This Presentation

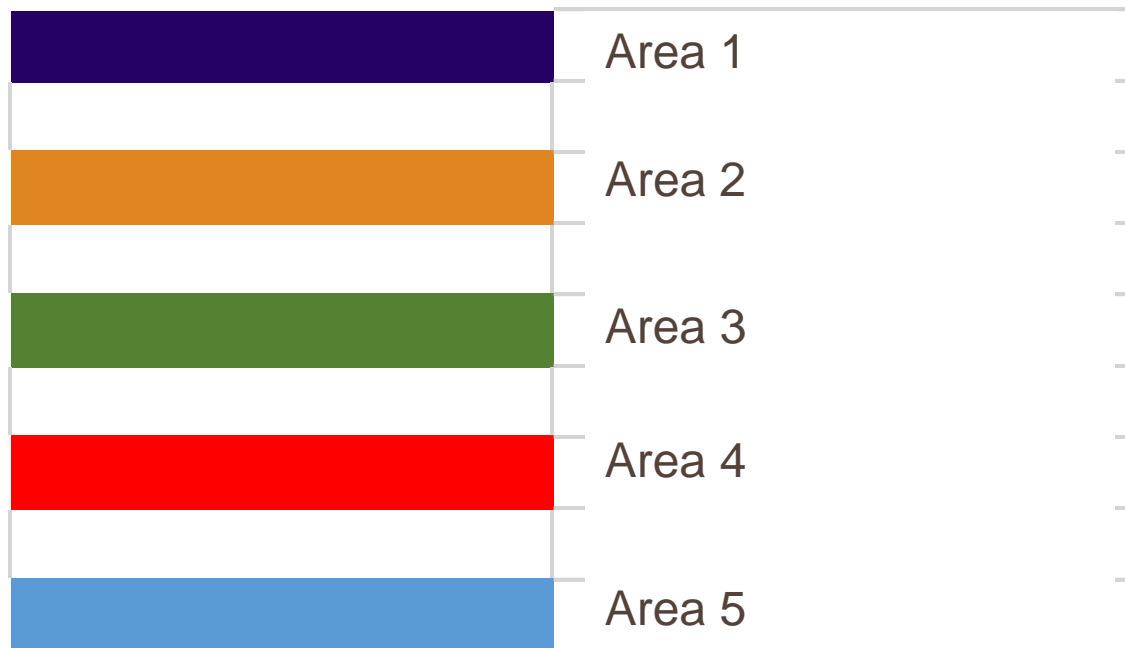


- Population size and AF prevalence
- Number of medical notes reviewed
 - AF case finder
 - Coded AF and not treated (High Risk)
 - Vitamin k antagonist
 - DOACs
- AF Register and prevalence following AF Case Finder
- Patients eligible / ineligible for Cardiologist Review
- Outcome of Cardiologist Review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

Legend for Bar Charts



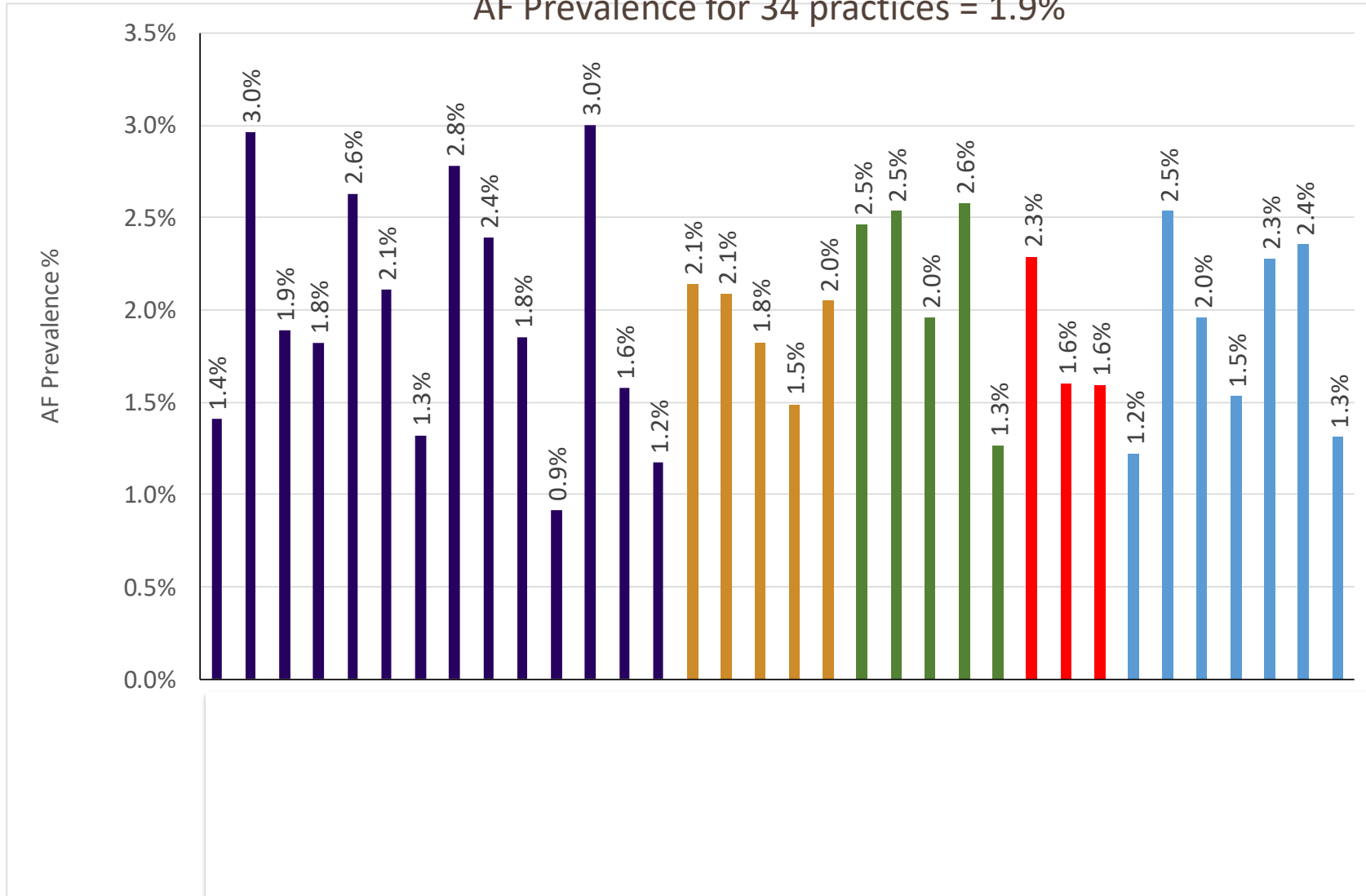
Total GP practice population covered to date = 376,311



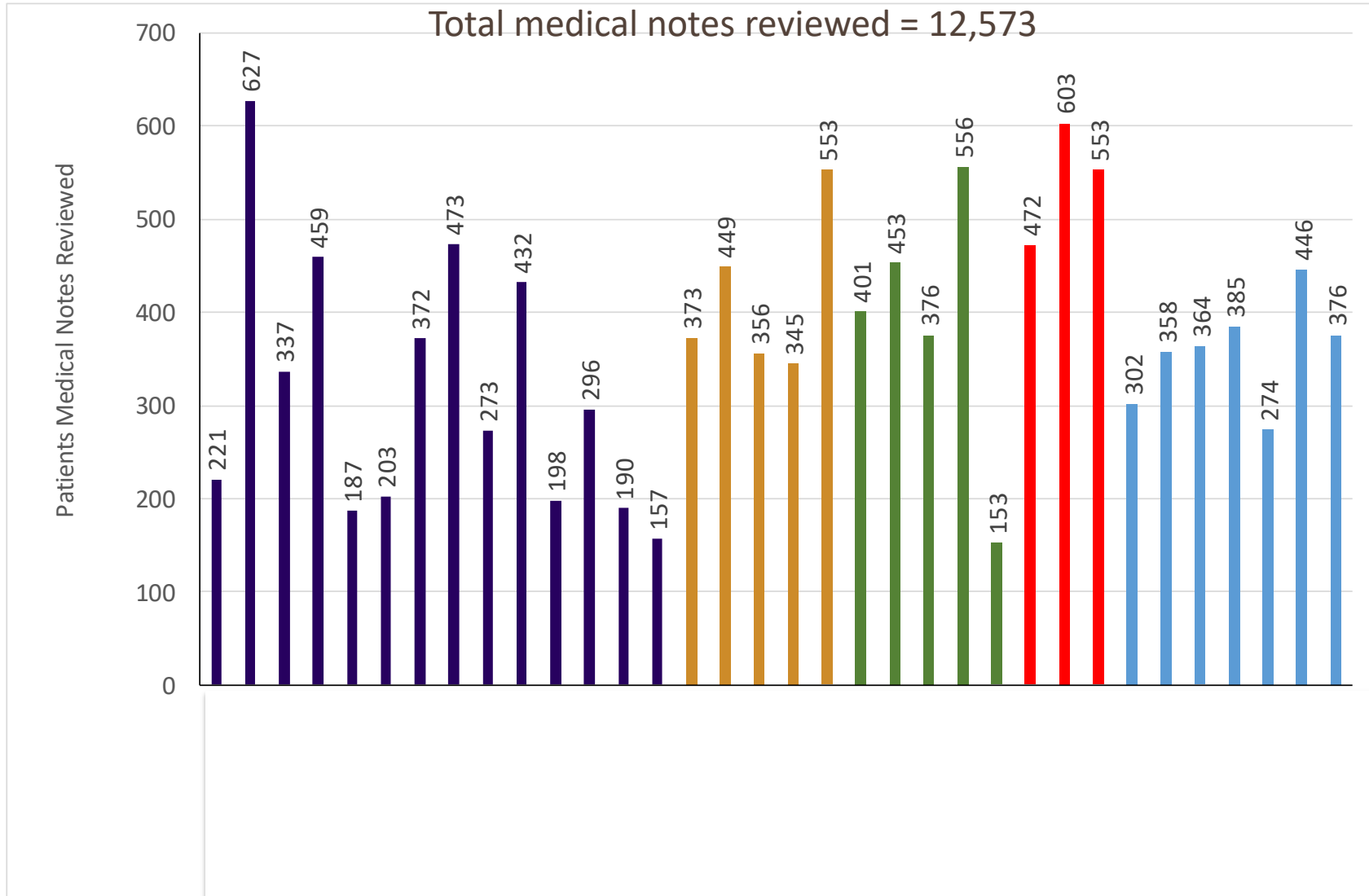
AF Prevalence from Register



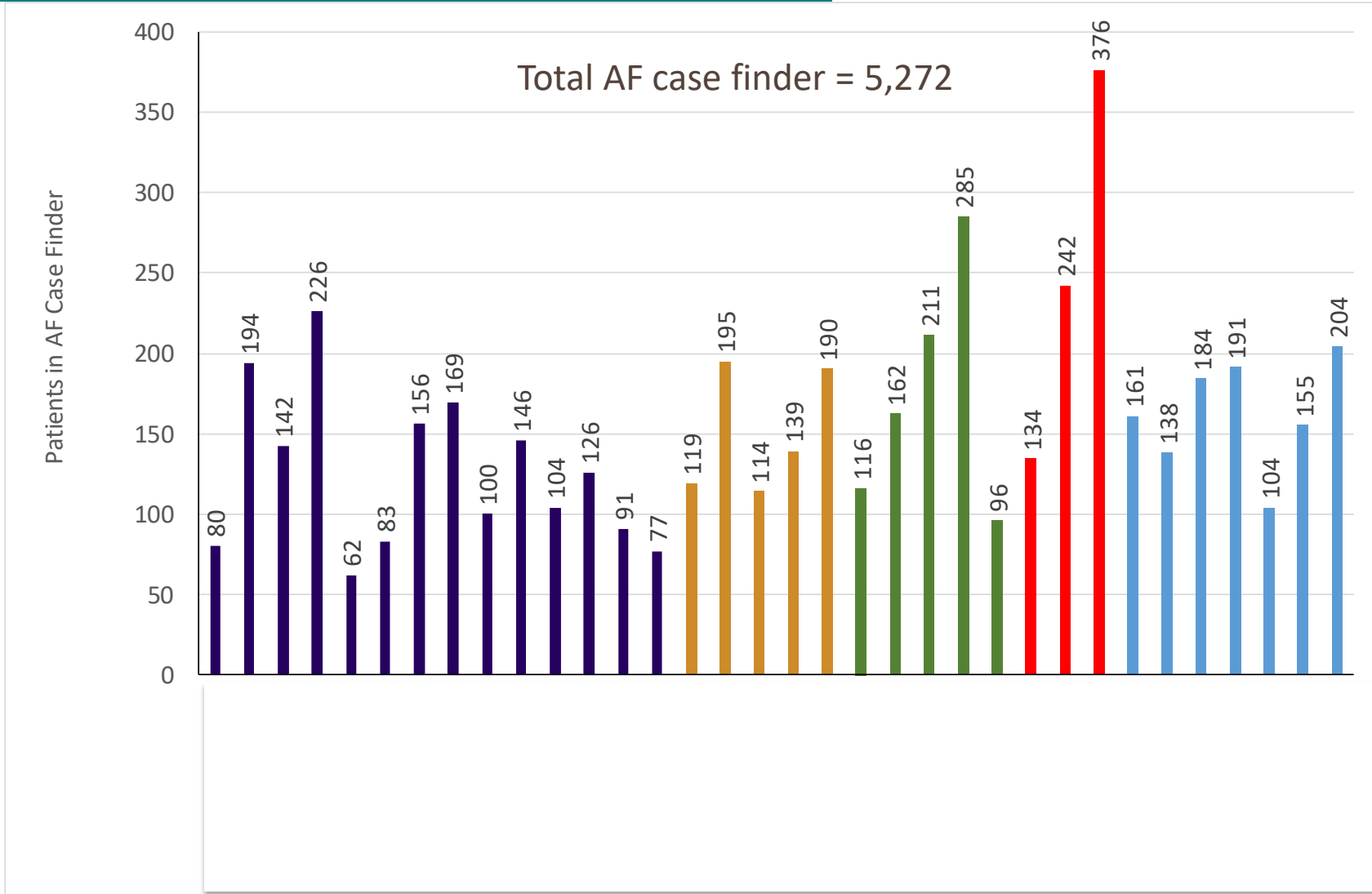
AF Prevalence for 34 practices = 1.9%



Patients Medical Notes Reviewed



Patients Medical Notes Reviewed in AF Case Finder



AF Case Finder Results following Review of Medical Notes

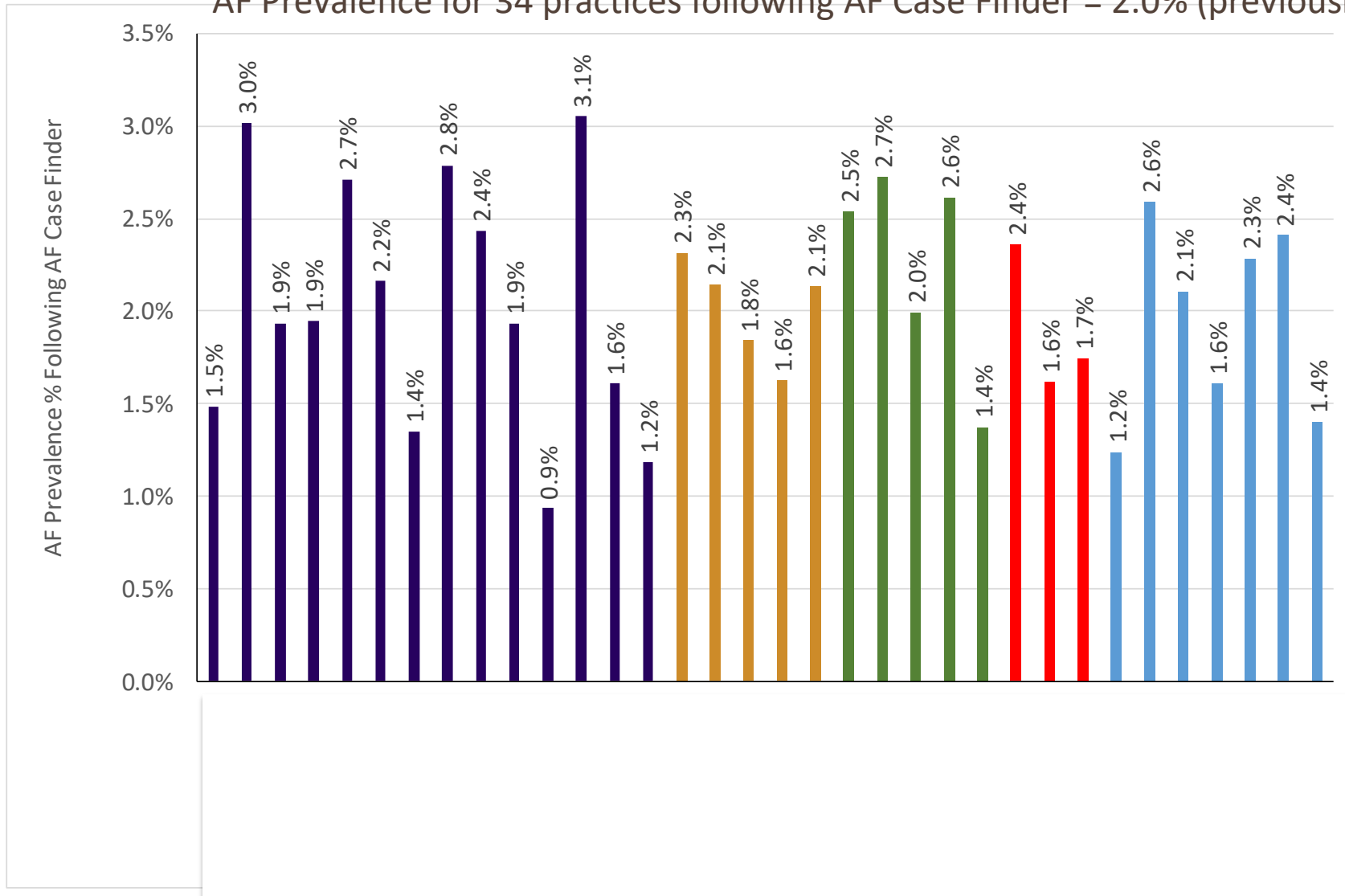


- Following review, additional patients were identified who have AF but are not coded on the system:
 - Total additional AF cases found 265

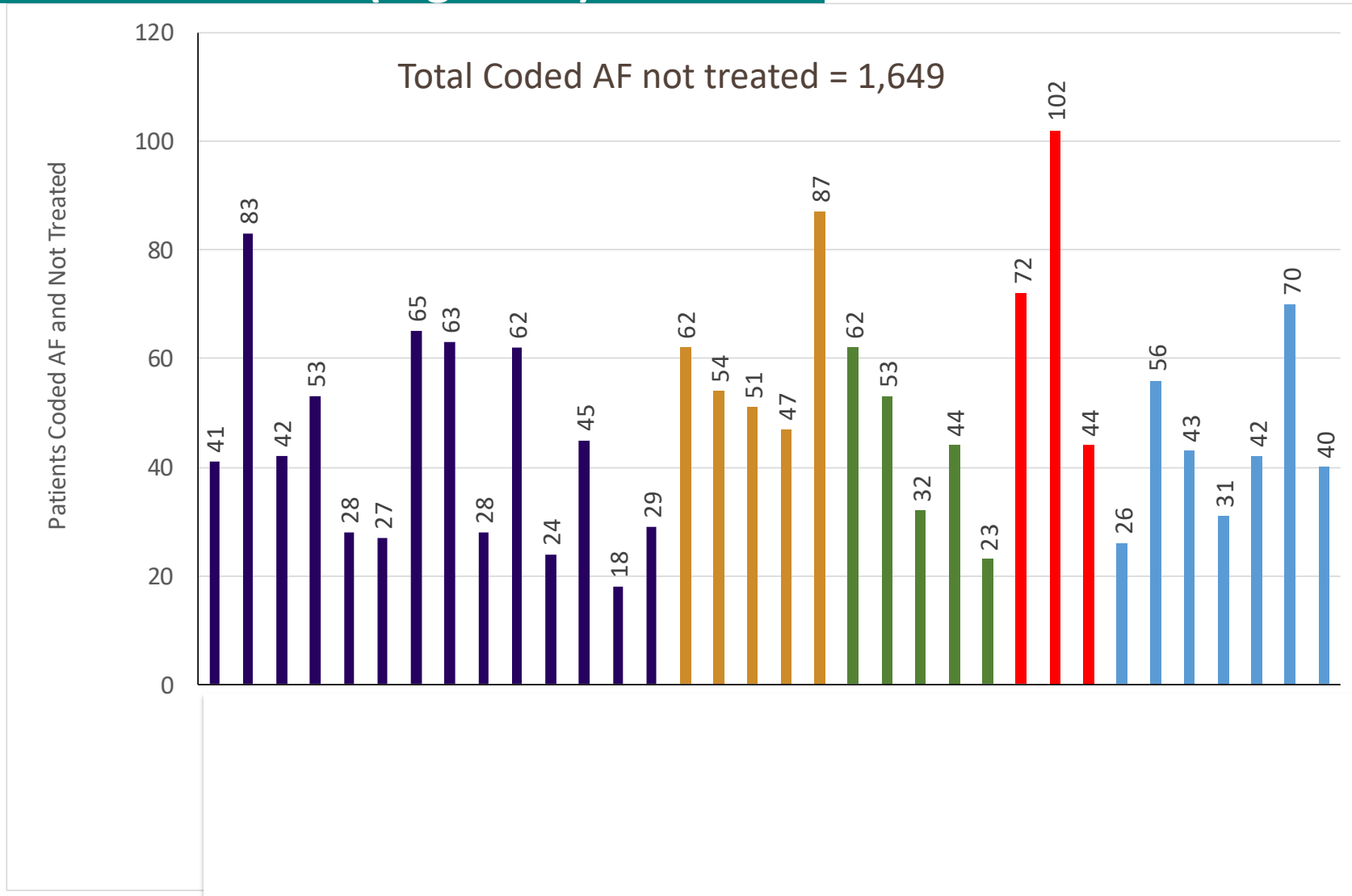
AF Prevalence from Register Following AF Case Finder



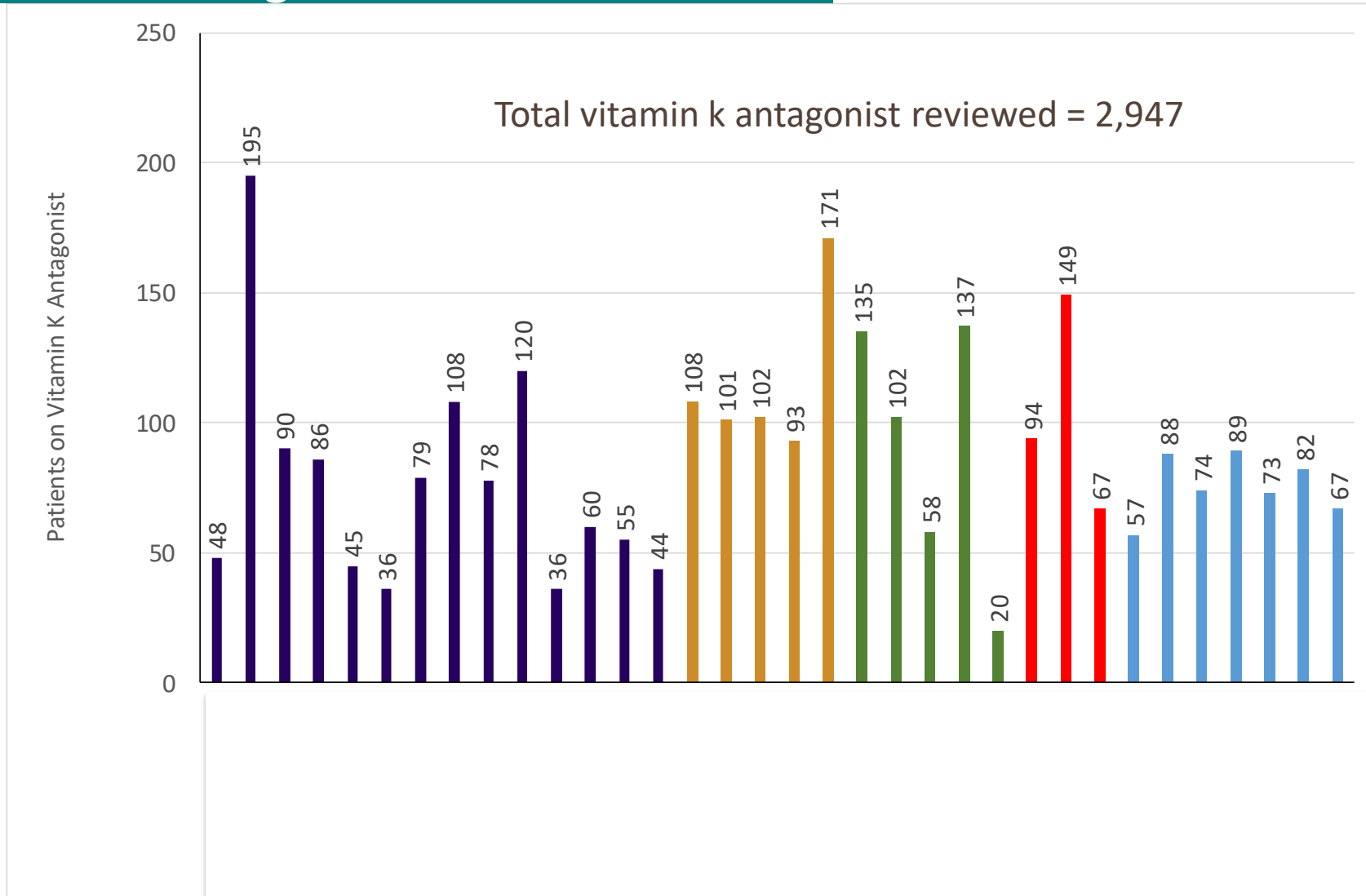
AF Prevalence for 34 practices following AF Case Finder = 2.0% (previously 1.9%)



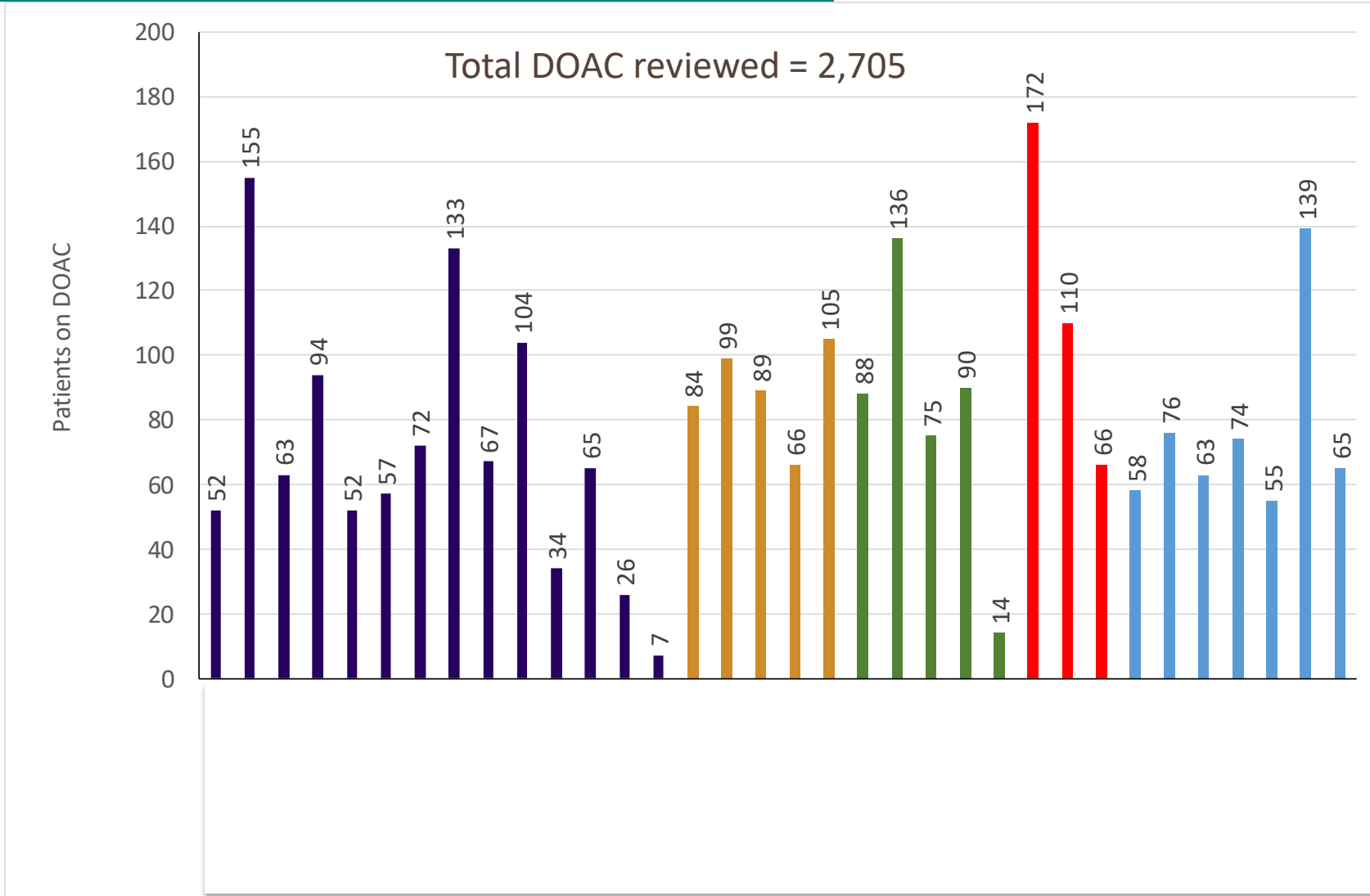
Patients Medical Notes Reviewed Coded AF and Not Treated (High Risk)



Patients Medical Notes Reviewed on Vitamin K Antagonist



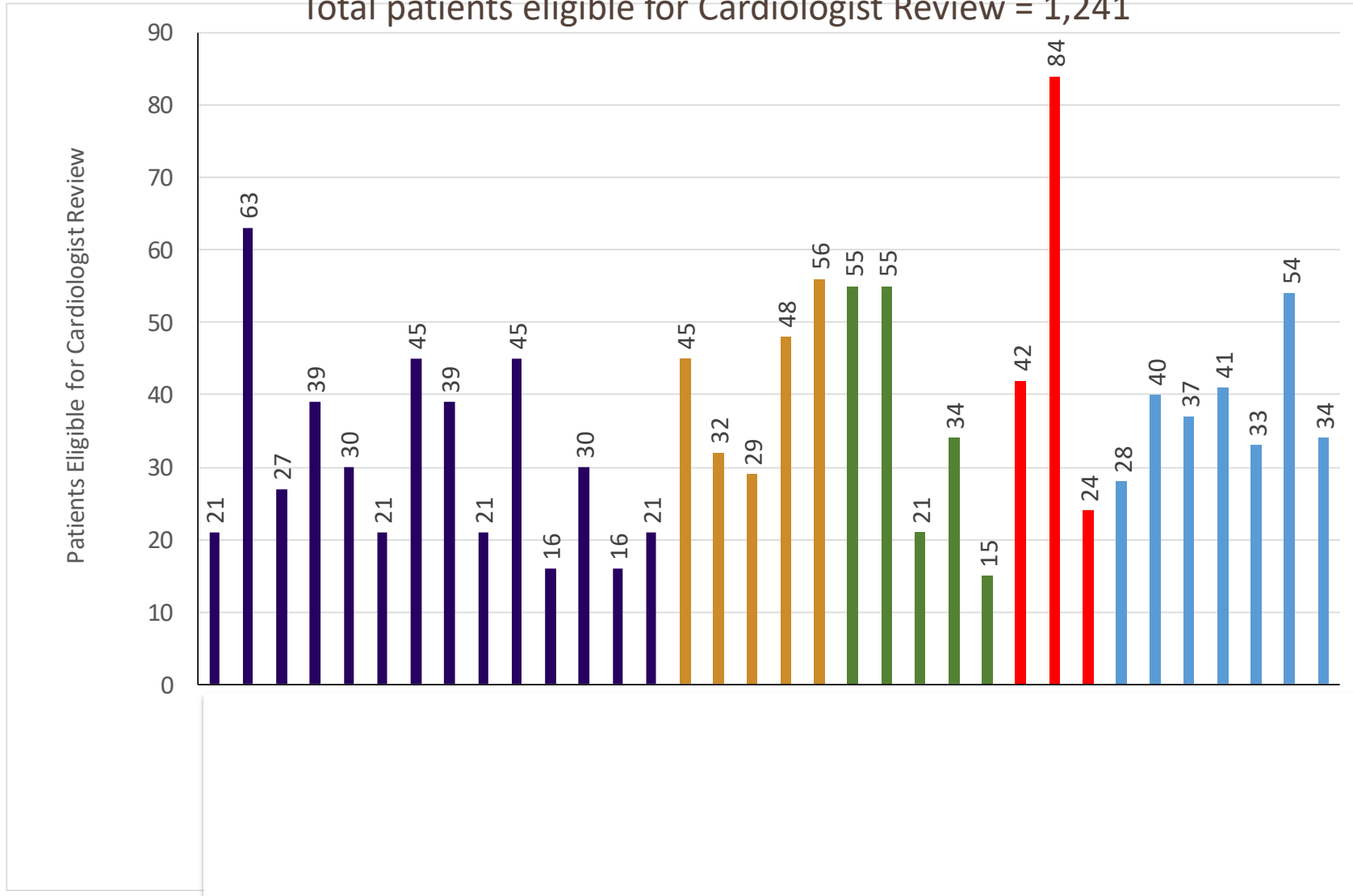
Patients Medical Notes Reviewed on DOAC



Patients Eligible for Cardiologist Review



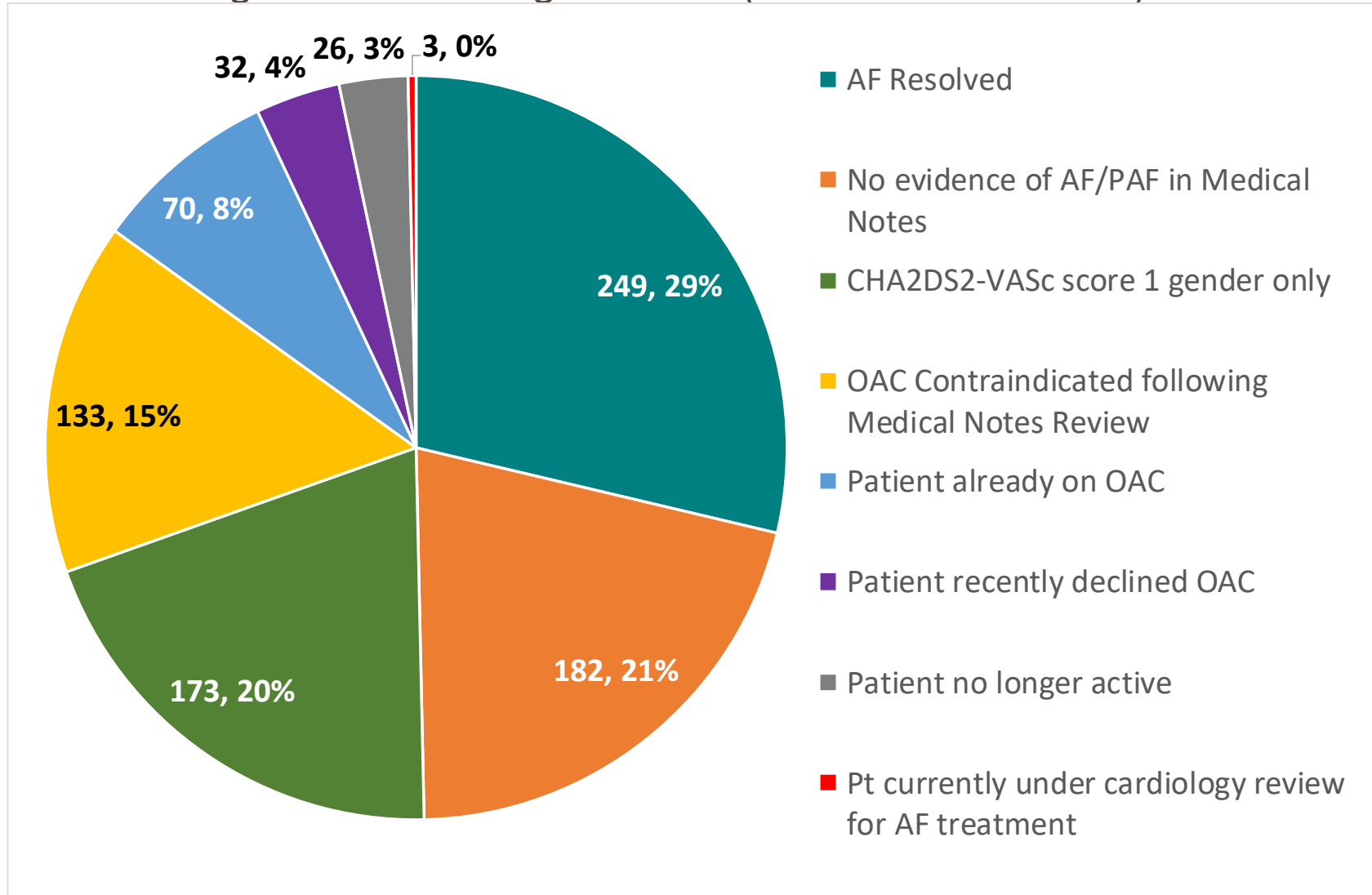
Total patients eligible for Cardiologist Review = 1,241



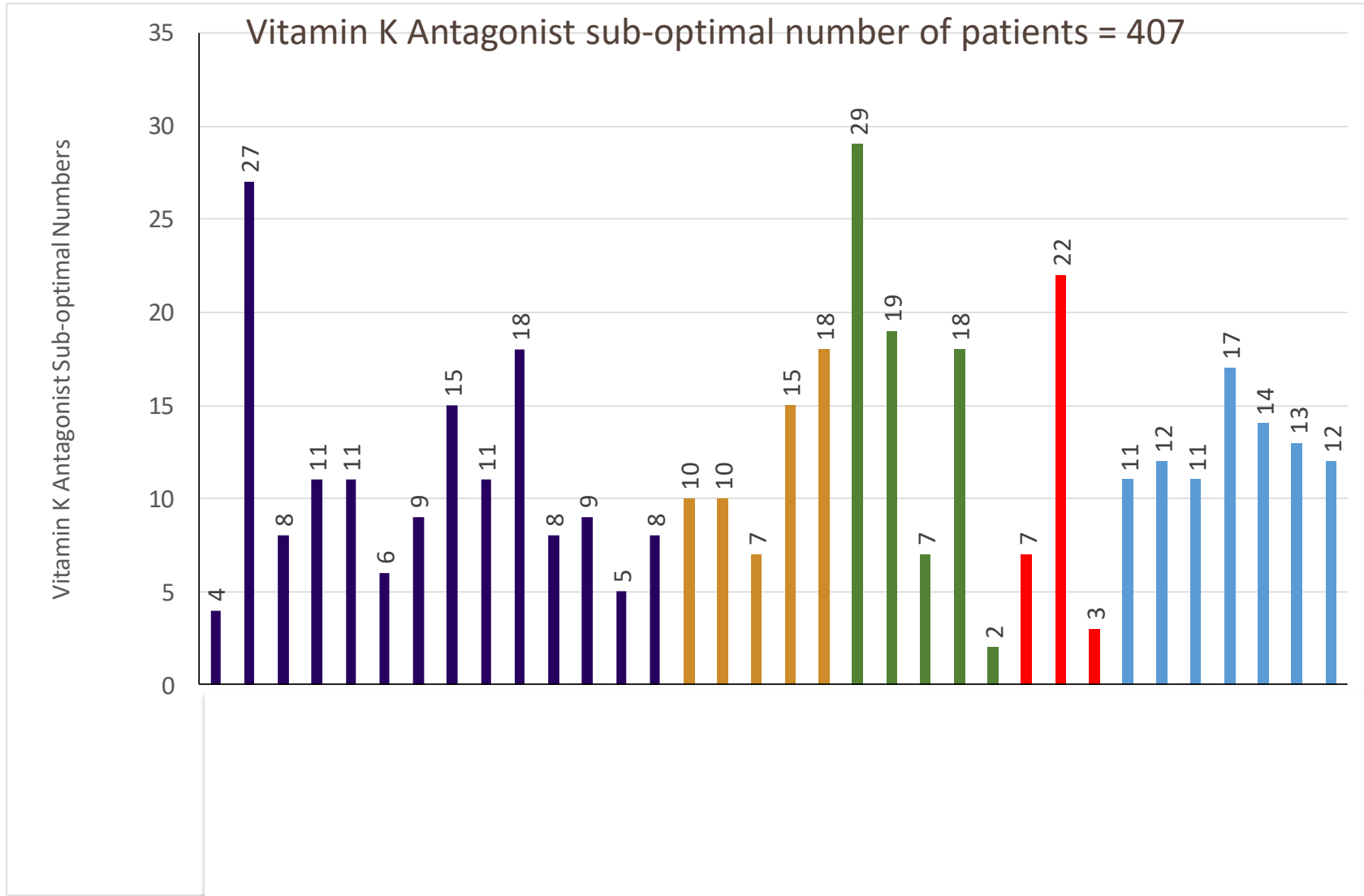
Patients Ineligible for Cardiologist Review



- Patients ineligible for Cardiologist Review (Coded AF not treated) 868



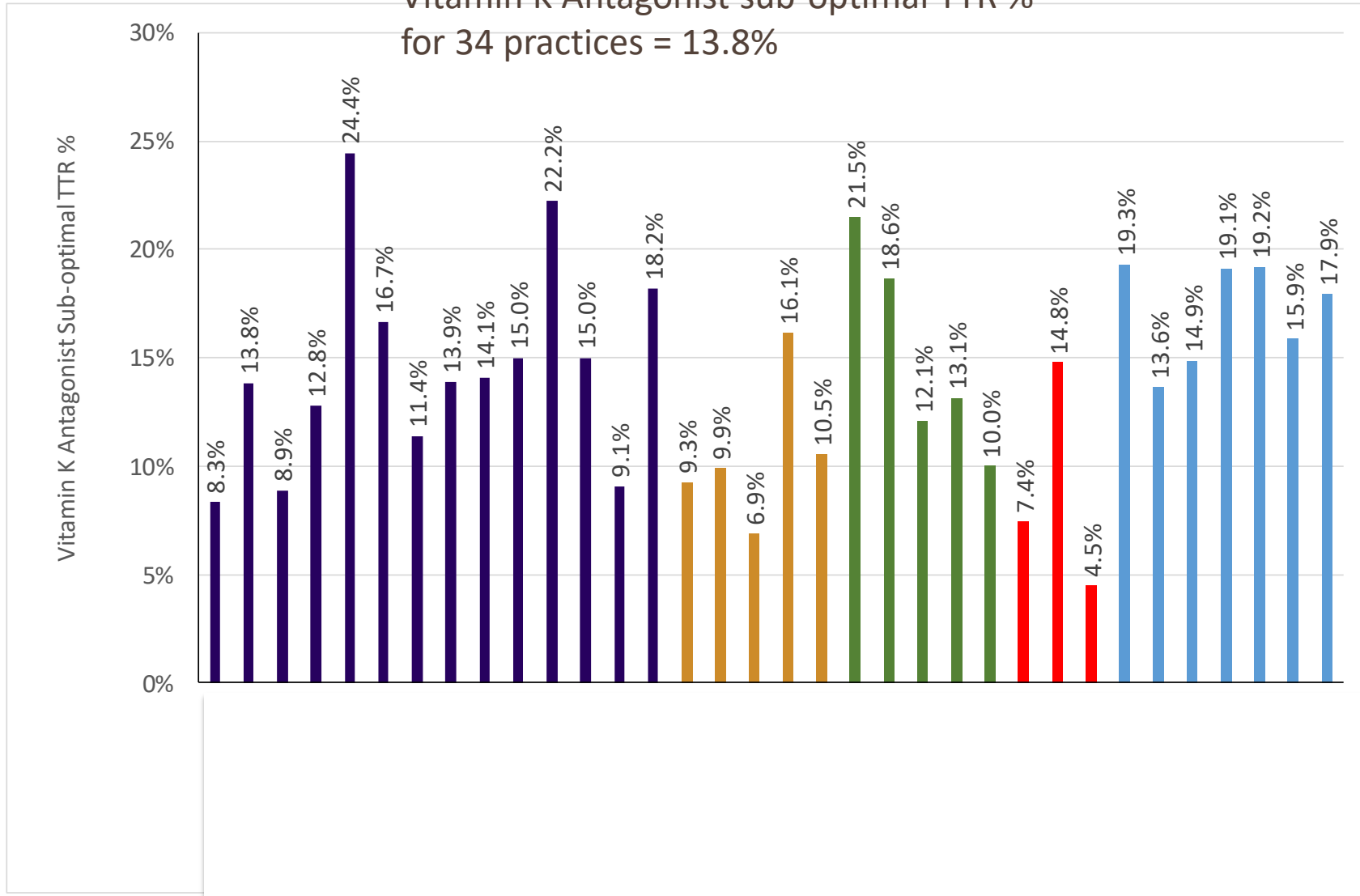
Vitamin K Antagonist Findings



Vitamin K Antagonist Findings



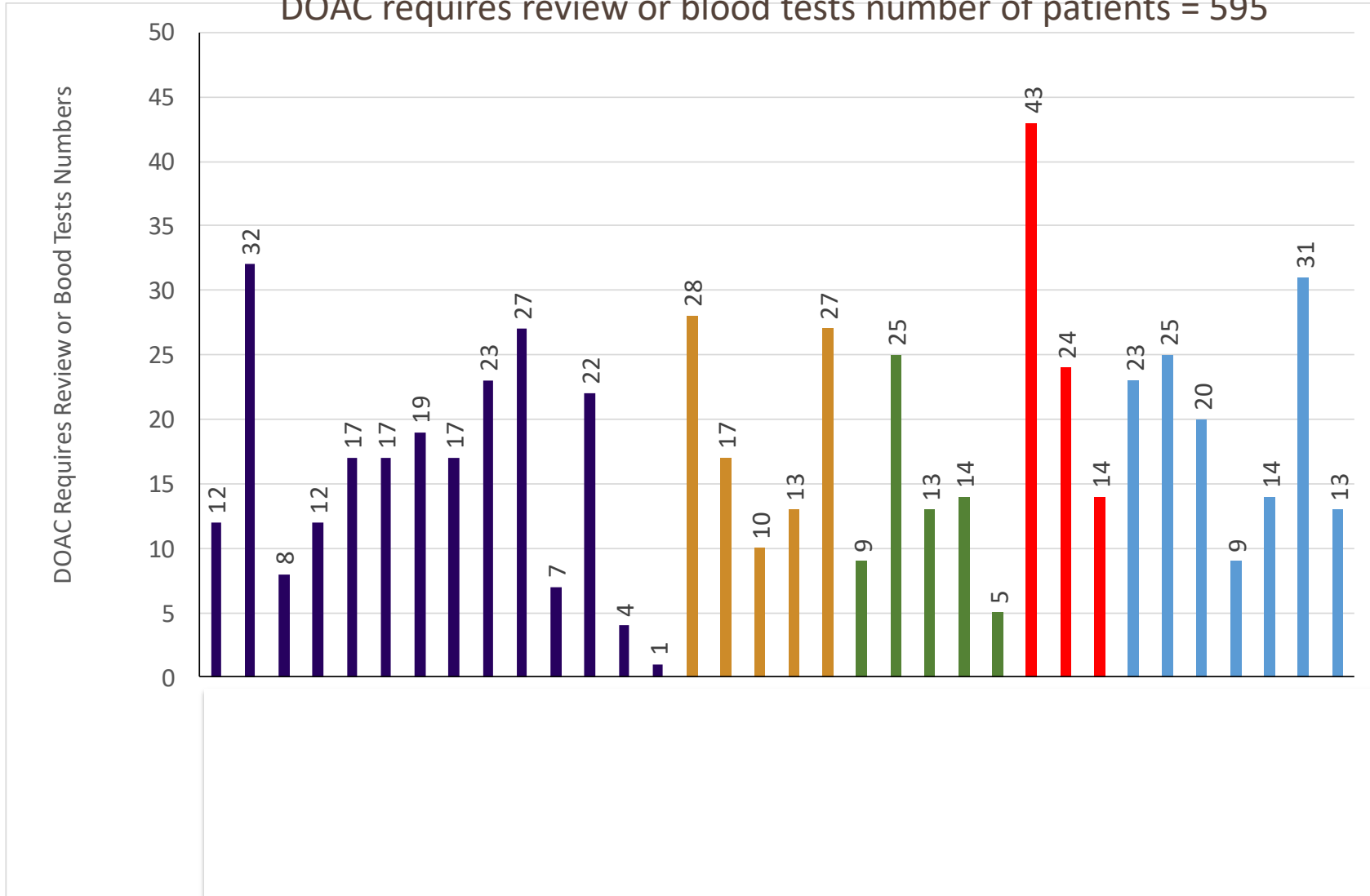
Vitamin K Antagonist sub-optimal TTR %
for 34 practices = 13.8%



DOAC Findings



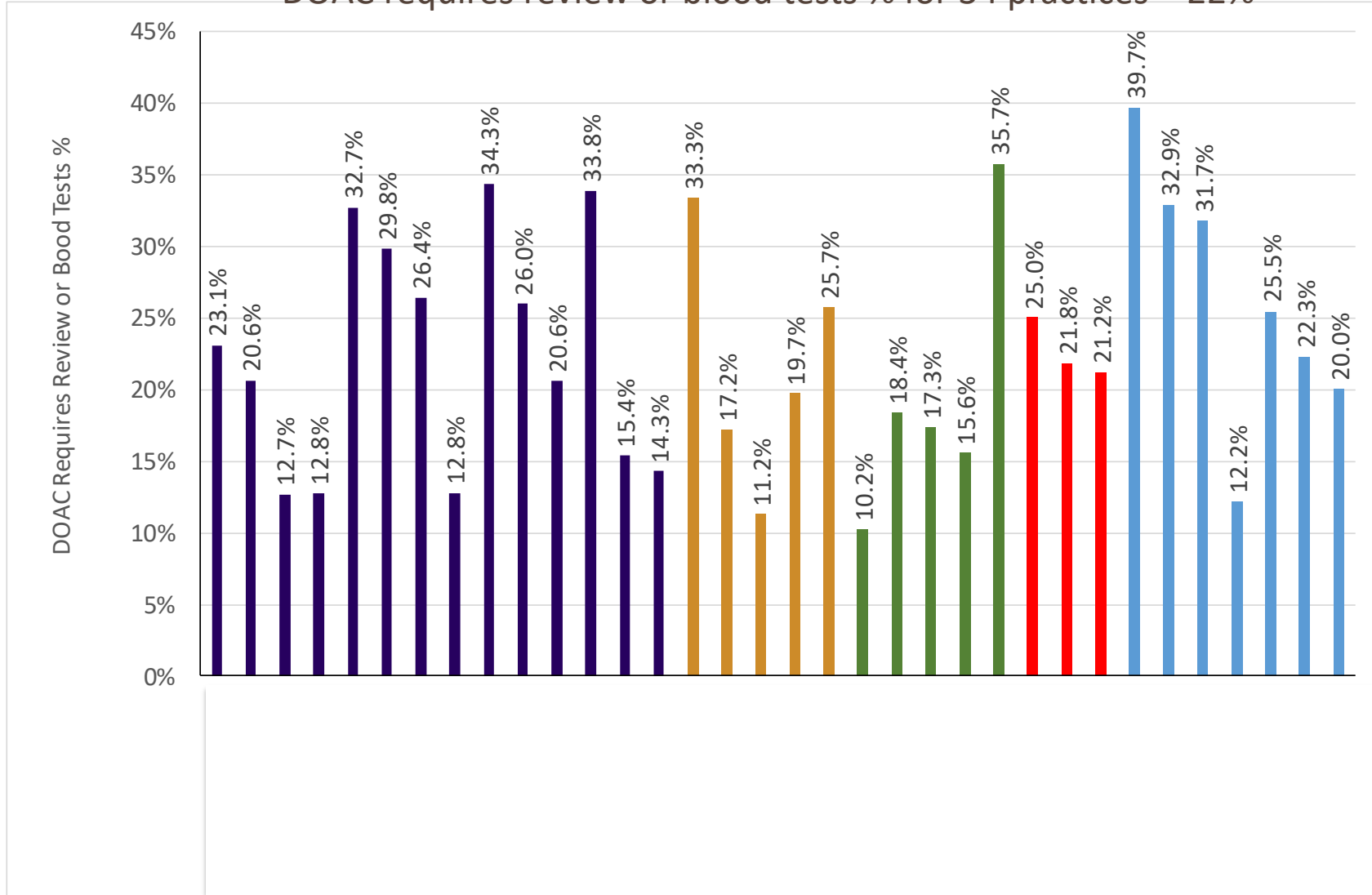
DOAC requires review or blood tests number of patients = 595



DOAC Findings

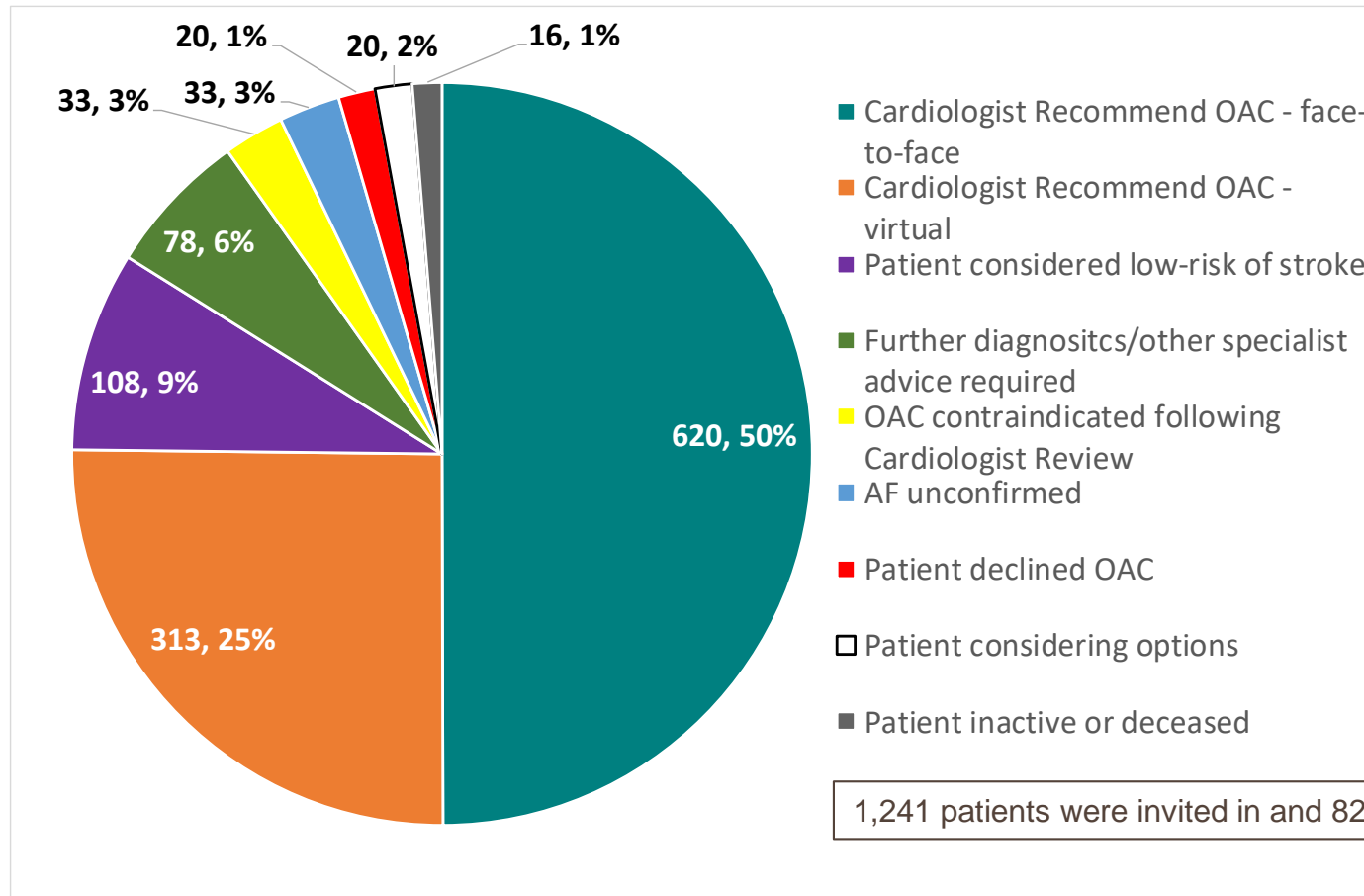


DOAC requires review or blood tests % for 34 practices = 22%



Patients Eligible for Cardiologist Review

Outcome for CCG



1,241 patients were invited in and 821 attended

Of those recommended for OAC previously not treated:
DOAC 99.5% and Vitamin K Antagonist 0.5%

331 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 5,652 patients on OAC was as follows:
 - Vitamin K Antagonist 2,947 (52.1%)
 - DOAC 2,705 (47.9%)

- Post-PCAF review the breakdown of 6,011 patients on OAC was as follows:
 - Vitamin K Antagonist 2,718 (45.2%)
 - DOAC 3,293 (54.8%)

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



- 1,241 patients were deemed eligible for Consultant Cardiologist review with 933 patients recommended for Anticoagulation and 78 for further diagnostics
- Post-PCAF review:
 - 359 on DOAC, 229 switched from Vitamin K Antagonist to DOAC, 130 remained on Vitamin K Antagonist, 190 still require further action regarding OAC, 78 declined OAC, 35 contraindicated for OAC, 174 not indicated for OAC, and 46 patients inactive
- If all recommendations are actioned:
 - we would expect **36.3** AF related strokes prevented and
 - a cost saving to the NHS of **£871,680**