

Failure to treat atrial fibrillation (AF) costs the NHS millions of pounds every year¹

Atrial Fibrillation Association (AFA) calls on health professionals and NHS to improve services for people with AF

A new report, released today by the AFA (www.atrialfibrillation.org.uk) to mark the launch of Arrhythmia Awareness Week, examines the key issues and challenges that currently hinder optimal AF care and suggest where policy makers could focus their attention to reduce AF's personal, clinical and economic impact.

*The report, **Keeping Our Finger on the Pulse: Why the UK must address the personal, clinical and economic impact of atrial fibrillation**, analyses, for the first time, the total cost to the NHS of AF, the most common heart rhythm disorder². Data from The Office of Health Economics (OHE) highlights that patients with primary or secondary diagnoses of AF occupied 5.7 million bed days in 2008, at a cost to the NHS of £1,873million³. Outpatient costs (such as electrocardiograms, monitoring anti-coagulant treatment, and post discharge attendance) accounted for £205 million³. Inpatient costs other than bed days reached £124 million³. These figures underscore the importance of improving diagnosis and standardising data collection.*

Trudie Lobban MBE, Founder and Chief Executive of the Atrial Fibrillation Association, says "Failure to diagnose and treat AF causes untold misery and costs the NHS millions of pounds every year. This is a bleak picture but it doesn't need to be this way. Some relatively straightforward measures could transform the situation socially, medically and financially."

GP Matt Fay comments "As a GP I understand the impact of AF of patients and their carers and welcome this new report, which draws attention to the need for improved detection and management of AF."

AF is associated with an increased long-term risk of stroke, heart failure and death, especially in women⁴. The NHS Stroke Improvement Programme's own data suggests that up to 4,500 strokes and 3,000 deaths per year could be prevented through improved coagulation⁵.

It is not only the financial implications that are concerning. AF has a significant impact on patients' quality of life, dramatically undermining a patient's ability to perform simple everyday tasks that the most of us take for granted, such as housework, cooking or gardening. In a study published in Chest, 2007, a third

of AF patients had reported developing increased levels of depression and anxiety as a direct result of their AF experience⁶.

Keeping Our Finger on the Pulse calls for improvements in seven key areas:

1. *Make AF an NHS priority – supported by standards, targets, initiatives and incentives*
2. *Raise awareness of AF prevention amongst healthcare professionals and the public – several factors increase the likelihood of developing AF – screening and information campaigns should target those patients most at risk*
3. *Encourage early identification and treatment of AF - early diagnosis and treatment is essential for reducing ill health and death associated with AF*
4. *Establish an AF champion in every trust – drive best practice, lead initiatives and represent patients' interests*
5. *Commission better services for AF – ensuring AF care links seamlessly with the care of other conditions such as stroke, dedicated clinics in primary and secondary care, access to specialist nurses*
6. *Improve patient information – stakeholders should provide better information and education to encourage patients to become 'experts' in their condition and care*
7. *Encourage research and implement new treatments – there is a pressing need for further research into the causes and management of AF. Innovative new treatments, of which there is urgent need, must be evaluated and implemented as soon as possible*

To support these recommendations, the AFA is running a series of meetings aimed at all those involved in providing a service and care for patients with cardiac arrhythmias. Each session will contain a session dedicated to arrhythmia service and primary care. For more information please visit: <http://www.heartrhythmcharity.org.uk/news-and-events/aa-events/regional-meetings>

Arrhythmia Awareness Week also launches the 'Know Your Pulse' campaign, which aims to raise awareness of the need for regular pulse checks. To help the public check their pulse, a Pulse Check Card can be downloaded from www.knowyourpulse.org. In recent research conducted on behalf of 'Know Your Pulse', UK consumers stated they thought it was important for their doctor to check their pulse regularly.⁷

In addition, the AFA are developing a sophisticated database which will highlight where AF services are located throughout the UK. Clinicians are being encouraged to register their name, status and name of hospital in order for the AFA to act as a central resource for healthcare professional to access localities of

AF services nationwide. To register please visit: <http://www.atrialfibrillation.org.uk/atrial-fibrillation-specialists/register.html>

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About AF

Atrial fibrillation is a common and potentially devastating abnormal heart rhythm disease that is associated with poor quality of life and increased risk of severe and potentially fatal cardiovascular complications such as stroke, as well as death^{8,4,9}. As the most common abnormal heart rhythm disorder seen by doctors, it affects approximately 1% of the population of England¹⁰.

While in many patients AF has no cause, it commonly develops in patients who have conditions such as high blood pressure, and coronary artery disease, and is also associated with chest infections and thyroid gland disorders. Symptoms include palpitations, tiredness, shortness of breath, dizziness or chest pain but not all people have symptoms, with AF being diagnosed during a routine examination.

Treatment of AF focuses on treating the rhythm itself either through drug therapies, such as dronedarone, or electrical treatments.

About Arrhythmia Alliance

Arrhythmia Alliance, the Heart Rhythm Charity, is a coalition of patients, carers, patient groups, charities, medical professionals and allied professionals who all work together under the A-A umbrella to promote better understanding, diagnosis, treatment and quality of life for individuals with cardiac arrhythmias.

About sanofi-aventis

Sanofi-aventis, a leading global pharmaceutical company, discovers, develops and distributes therapeutic solutions to improve the lives of everyone.

¹ Department of Health. *DH progress in improving stroke care n/a 2009;n/a: n/a*

² ACC/AHA/ESC 2006 Guidelines for the management of patients with atrial fibrillation. *Europace* 2006 8 (9); 651-745

³ The Office of Health Economics *Estimating the direct costs of atrial fibrillation to the NHS in the constituent countries of the UK and at SHA level in England, 2008 November 2009, London*

⁴ Stewart S, Hart C, Hole D. A population-based study of the long-term risks associated with atrial fibrillation: 20 year follow up of the Renfrew/Paisley study. *Am J Med.* 2002; 113:359-364

⁵ NHS Improvement. *Stroke Improvement in Primary Care.* Last accessed May 2010

⁶ Thrall G., Lip GY., Carroll D., Lane D. Depression, anxiety and quality of life in patients with atrial fibrillation. *Chest* 2007; 132:1259-64

⁷ Opinion Health. *Healthcare consumer survey for Arrhythmia Alliance.* May 2010

⁸ Wolf P.A., Dawber T.R., Thomas H.E. Jr, et al. Epidemiologic assessment of chronic atrial fibrillation and risk of stroke: the Framingham study. *Neurology.* 1978; 28: 973-77

⁹ Benjamin E.J., Wolf P.A., D'Agostino R.B., et al. Impact of atrial fibrillation on the risk of death: the Framingham Heart Study. *Circulation.* 1998; 98: 946-52

¹⁰ National Service Framework for Coronary Heart Disease. *Chapter Eight: Arrhythmias and Sudden Cardiac Death.* March 2005