Size of the Prize: Driving Improvement in CVD Prevention by Doing Things Differently

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NHS England and Public Health England

The Size of the Prize in Cardiovascular Disease (CVD) Prevention

Cheshire and Merseyside

Public Health England

NHS England

1. The diagnosis and treatment gap, 2015/16

Hypertension	Estimated adult population with hypertension	647,700
	Estimated adult population with undiagnosed hypertension	261,600
	GP registered hypertensives not treated to 150/90 mmHg target	76,100
Atrial Fibrillation (AF)	GP registered population with Atrial Fibrillation (AF)	52,800
	Estimated GP registered population with undiagnosed AF	14,000
	GP registered high risk AF patients (CHA2DS2VASc >=2) not anticoagulated	9,500
CVD risk	Estimated adult population 30 to 85 years with 10 year CVD risk >20%	180,400
	Estimated percentage of people with CVD risk ≥20% treated with statins	49%

2. The burden: first ever CVD events, 2015/16

Coronary Heart Disease	6,900
Stroke	3,250
Heart Failure	2,350

3. The opportunity: potential events averted and savings over 3 years by optimising treatment in AF and hypertension, 2015/16

Optimal anti-hypertensive treatment of diagnosed hypertensives averts within 3 years:	460 heart attacks	Up to £3.30 million saved[2]
	680 strokes	Up to £9.60 million saved[1]
Optimally treating high risk AF patients averts within 3 years:	760 strokes	Up to £12.70 million saved[1]

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1. The diagnosis and treatment gap

Hypertension	Estimated adult population with hypertension	13,550,700
	Estimated adult population with undiagnosed hypertension	5,601,600
	GP registered hypertensives not treated to 150/90 mmHg target	1,618,900
Atrial Fibrillation (AF)	GP registered population with Atrial Fibrillation (AF)	983,300
	Estimated GP registered population with undiagnosed AF	422,600
	GP registered high risk AF patients (CHA2DS2VASc >=2) not anticoagulated	177,800
CVD risk	Estimated adult population 30 to 85 years with 10 year CVD risk >20%	3,960,200
	Estimated percentage of people with CVD risk ≥20% treated with statins	49

2. The burden: first ever CVD events

Coronary Heart disease	128,750
Stroke	66,450
Heart Failure	48,350

3. The opportunity: potential events averted and savings over 3 years by optimising treatment in AF and hypertension

Optimal anti-hypertensive treatment of diagnosed hypertensives averts within 3 years:	9,710 heart attacks	Up to £72.5 million saved
	14,500 strokes	Up to £201.7 million saved
Optimally treating high risk AF patients averts within 3 years:	14,220 strokes	Up to £241.6 million saved

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