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SCANDAL OF HIGH RISK PATIENTS SECRETLY DENIED ACCESS TO LIFE-SAVING TREATMENT

Patients left stranded on non-existent ‘waiting lists’ as specialist cardiac centres are prevented from providing urgent treatment due to indefinite NHS England ‘evaluation process’

“How many strokes must you have to get treatment?”

Leading specialists available for interview

Tuesday 25 July: London, UK: Arrhythmia Alliance is calling on NHS England to reconsider its ‘Commissioning through Evaluation’ (CtE) process, which has left hundreds of patients with AF (Atrial Fibrillation) at serious risk of suffering a debilitating or life-threatening AF-related stroke. The evaluation process has meant patients being denied access to potentially life-saving treatment with no guarantee when the process will be completed to allow access.

Left atrial appendage occlusion (LAAO) is the only treatment available to prevent an AF-related stroke in hundreds of patients in whom oral anticoagulant drugs are contra-indicated. Many of these high-risk patients who are suitable for LAAO have suffered from previous stroke or transient ischaemic attack (TIA), and many have also suffered from intracranial haemorrhage or major bleeds at other sites.

“How many of these patients are living with a potential ticking time-bomb as they are at seriously high risk of suffering an AF-related stroke and the only treatment option open to them is LAAO,” stated Trudie Lobban MBE, Founder & Trustee, Arrhythmia Alliance.

Mrs L, Surrey, “My husband has had three strokes and two TIAs and was originally considered for LAAO three years ago. Following his most recent stroke he was deemed suitable for LAAO but due to lack of funding has been left on a virtual waiting list. We don’t understand what this means. We now live with the fear of another stroke happening at any time.”
A Freedom of Information request made by Arrhythmia Alliance to specialist cardiac centres across England uncovered that many patients suitable for LAAO are unable to receive treatment on the NHS due to funding constraints, while the CtE evaluation process is completed. Some of the most high-risk patients are now being offered the treatment privately as the only means to receive this potentially life-saving treatment.

A recent survey undertaken by the charity of 800 people with AF found that over 10 percent had previously suffered an AF-related stroke and nearly 4 percent were unable to take anticoagulant medication.

Despite having a large body of evidence to support its use, including FDA approval and full reimbursement in a number of EU countries, and having been used successfully by a number of centres across the UK, NHS England decided in 2014 to put LAAO into the CtE programme to carry out further assessment on its effectiveness, limiting funding to a total of 450 patients across ten specialist cardiac centres in the country.

The CtE programme is now in its ‘assessment phase’, which means no more funding is available for any patient until the evaluation has been reported and, if approved, the level of funding agreed. This means no access to LAAO on the NHS for these very high-risk patients until the financial year commencing in April 2018 – at the earliest.

“Although we believe in the concept of CtE, we cannot accept such high-risk patients with AF being unable to receive this often life-saving treatment. The Arrhythmia Alliance together with many UK Cardiac Specialists is urging NHS England to allow those centres already in the CtE process to continue to provide LAAO while the wider funding decisions are taken.” Said Trudie Lobban MBE, Founder & Trustee, Arrhythmia Alliance.

“If each of the current ten centres was able to continue providing LAAO implants over the coming 12 months – as they were during the CtE process - this would reduce the number of inevitable AF-related strokes that many patients are likely to suffer during this time period,” added Dr Dhiraj Gupta, Consultant Cardiologist, Liverpool Heart and Chest Hospital.

Ms Lobban concluded, “The cost of an LAAO as used by NHS England for CtE was £7,470 – however, the first-year cost per patient that suffers an AF-related stroke is calculated at well over £13,000. We believe it makes sense both clinically and economically for NHS England to allow this specific sub-population of patients to receive this potentially life-saving, and life-improving technology, whilst the data evaluation is completed.”

-ENDS-
Working together to improve the diagnosis, treatment and quality of life for all those affected by arrhythmias

Notes to editors

1. **To arrange an interview** with Trudie Lobban, or for more details on the Arrhythmia Alliance FOI request on access to LAAO and/or the AF Patient survey please contact: nigel@heartrhythmalliance.org or on 07785 277343

2. Arrhythmia Alliance, are global advocates, working in partnership to reduce deaths and impact on individuals caused by cardiac arrhythmias and their associated morbidities. By raising awareness and campaigning for the improved detection and care of heart rhythm disorders, Arrhythmia Alliance aims to extend and improve the lives of the millions around the world that these conditions affect. Visit website [www.heartrhythmalliance.org](http://www.heartrhythmalliance.org)