Atrial Fibrillation (AF) is the most common heart rhythm disorder with about 800,000 cases currently diagnosed in England. AF is associated with a multitude of symptoms including palpitations, breathlessness and fatigue. It causes serious discomfort to the patient and increases the risk of stroke by 500%. Without adequate anti-coagulation, nearly one in every twenty AF patients is expected to suffer a stroke each year. Furthermore, it is estimated that AF costs the NHS £1.8 billion annually.

Despite the high stroke risk associated with the condition, AF remains severely under-diagnosed. It is estimated that up to half of people with AF are still undetected and live in great danger of suffering disabling and often fatal strokes, heart failure or other serious complications. A simple manual pulse check is one of the most effective ways of detecting suspected AF. Pulse checks can be delivered in a variety of settings, ranging from GP surgeries to flu clinics, pharmacies and libraries. This report was produced on the back of a nationwide survey of Primary Care Trusts (PCTs) and aims to showcase the most original ideas and best practice in delivering opportunistic pulse checks. We would encourage commissioners and healthcare professionals from across the country to take note of these examples and explore the feasibility of implementing some of these ideas in their localities. Through carrying out more opportunistic pulse checks and improving AF detection rates, we will not only help identify those with AF but also help to prevent much of the human suffering associated with AF-related strokes, and assist the NHS to meet its efficiency challenge set out in the Quality, Innovation, Productivity and Prevention (QIPP) programme.
Best Practice Examples

Through our survey of PCTs, we have learnt about some excellent innovative ideas across the NHS that can help increase AF detection rates. Here are some of the best examples of work being undertaken by the PCTs in promoting targeted pulse checks across the country.

Targeted Pulse Checks

Long-term Conditions: “Practitioners are expected to undertake a pulse check at every opportunity, for example during their consultations with their long term conditions patients, as this is likely to yield a higher return, as the prevalence is higher in people with existing medical conditions or older patients.” (NHS Wakefield District)

Flu Clinics: “We have asked practices to undertake a pulse check as part of the annual influenza immunisation programme in those aged 65 and over.” (NHS Sutton and Merton)

The Elderly: “We are in the process of considering the development of an IT alert, to flag up the need for a pulse check for all patients over 65 years, and/or those with risk factors for AF.” (NHS Hammersmith and Fulham)

Emergency Care: “Surrey Heart and Stroke Network are in discussion with the ambulance provider to pilot a pathway whereby their crews might identify a cardiac arrhythmia and be able to refer that patient to their GP.” (NHS Surrey)

Opportunistic Checks: “In the shopping centre, at a faith venue, during influenza vaccination.” (Barking and Dagenham PCT)

Educating Professionals and Patients

Education Events in Partnership with Local Heart and Stoke Networks: “The North West London CardioVascular and Stroke Network are holding an ‘Atrial Fibrillation Learning Event’. This event has been developed to raise awareness of the identification, risk stratification and risk management of AF patients... The event is primarily aimed at General Practitioners but General Cardiologists, Geriatricians, Cardiac Physiologists, Pharmacists, Specialist Nurses and others involved in or with an interest in AF are invited to attend.” (NHS Hammersmith and Fulham)

“Surrey Heart and Stroke Network are running a number of training events for primary care staff that run INR clinics and are taking the opportunity to raise the awareness of opportunistic pulse checks to staff who attend these events. Surrey Heart and Stroke Network presented at a recent educational event for private hospital providers in Surrey, and encouraged the use of manual pulse checks to identify AF.” (NHS Surrey)

Local AF Advisors: “We are aiming to recruit an AF advisor... part of the role will be to co-ordinate opportunistic screening of pulses e.g. during flu vaccinations” (NHS Haringey)

AF Diploma Courses: “We have over 18 practitioners currently undertaking an Atrial Fibrillation diploma course.” (NHS North East Lincolnshire Care Trust)

Promoting Best Practice

Local Enhanced Services (LES): “We have added ‘taking of the pulse’ to the Local Enhanced Services which 92% of GPs in Lincolnshire are now signed up to.” (NHS Lincolnshire)

Quality and Outcomes Framework (QOF): “We also have a local QOF which further incentivises GP practices to find patients with AF who are not currently on the QOF register.” (NHS Bury)

References:
1) QOF Prevalence Data Tables 2010/11
2) South London Cardiac and Stroke Network, Atrial fibrillation pathway for primary care, 2011
3) Atrial Fibrillation Association and Anticoagulation Europe (UK), The AF Report, 2011