

Innovative Approaches To Increase The Identification Of Atrial Fibrillation In The Community And Primary Care

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Introduction

- PHE estimates 474,000 undiagnosed cases of AF in England.
- Left untreated, AF can result in a 5-fold increased risk of having a stroke.
- AF related stroke prognosis in terms of severity and recovery is worse when compared to non AF strokes.
- The stroke causing blood clots induced by AF can easily be treated by the use of anticoagulants.
- The problem is, how to screen for an unknown population the size of Liverpool that is spread throughout the whole of England.

The NWCAHSH embarked upon the “ Know Your Pulse”

AF awareness campaign with support from the Stroke Association, Arrhythmia Alliance, AF Association, CCGs, SCNs Healthwatch, Heartbeat and the British Heart



Method

- 1) Hosted a range of drop-in sessions and workshops where members of the public would learn about the symptoms and associated consequences of AF. While in attendance, they would also have the opportunity to use a handheld AF detection device (a MyDiagnostick).
- 2) Handheld devices (AliveCor) were issued to GPs throughout the region for a six month evaluation period. After the six months, GPs were asked to rate the device on a range of criteria.

MyDiagnostick

Over 500+ tests performed. Of which, 464 left details to allow analysis of data.

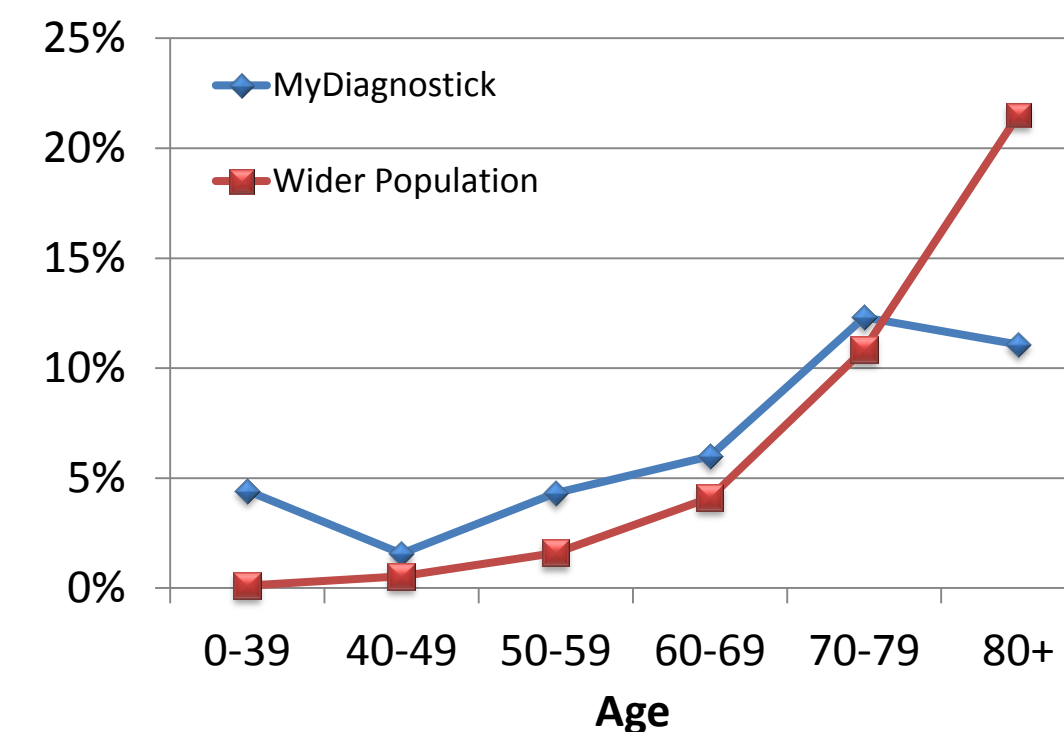


AGE	Number Males	Cases AF	Prevalence	Number Females	Cases AF	Prevalence	Average
0-39	21	1	4.8%	49	2	4.1%	4.4%
40-49	18	0	0.0%	32	1	3.1%	1.6%
50-59	29	1	3.4%	58	3	5.2%	4.3%
60-69	51	5	9.8%	46	1	2.2%	6.0%
70-79	60	9	15.0%	52	5	9.6%	12.3%
80+	20	3	15.0%	28	2	7.1%	11.1%
Total	199	19	Av 8.0%	265	14	Av 5.2%	

How reliable is the MyDiagnostick?

Compared to a wider population (n= 75,945) where AF was diagnosed by a traditional ECG, the MyDiagnostick detected similar prevalence rates.

Comparison of MyDiagnostick vs Wider Population



Differences in upper and lower ranges are due to a small sample size

MyDiagnostick Summary

- Comparable results to a known population
- Detected greater prevalence in males as expected

AliveCor

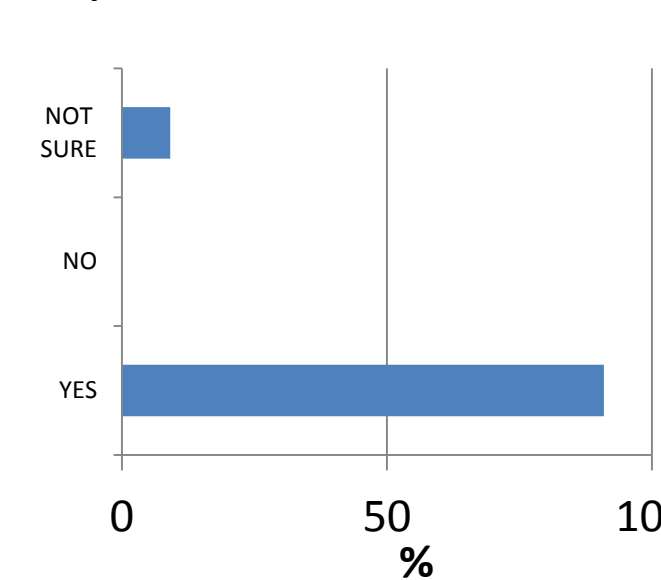
Respondants to AliveCor Evaluation

- GP 15
- Nurse 5

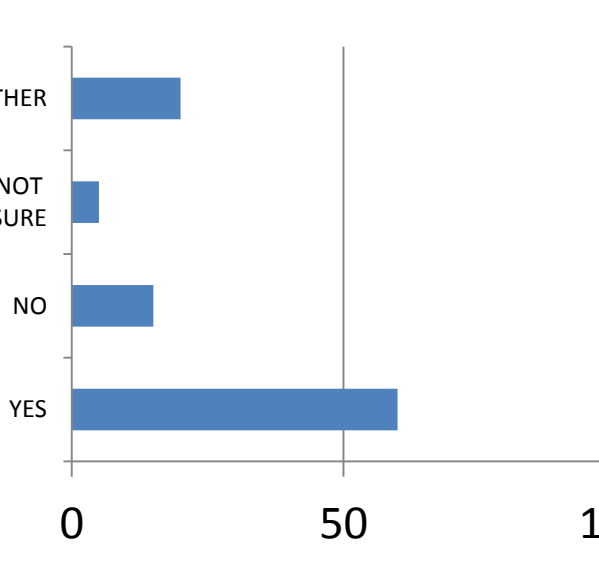
No patients refused to use the device

HOW WOULD YOU RATE?	VERY POOR	POOR	AVERAGE	GOOD	VERY GOOD	NA
LEGIBILITY OF THE TRACE	0%	0%	15%	40%	45%	0%
AUTO DETECT FUNCTION	0%	6%	6%	33%	28%	28%
PATIENT USABILITY	0%	5%	40%	30%	20%	5%

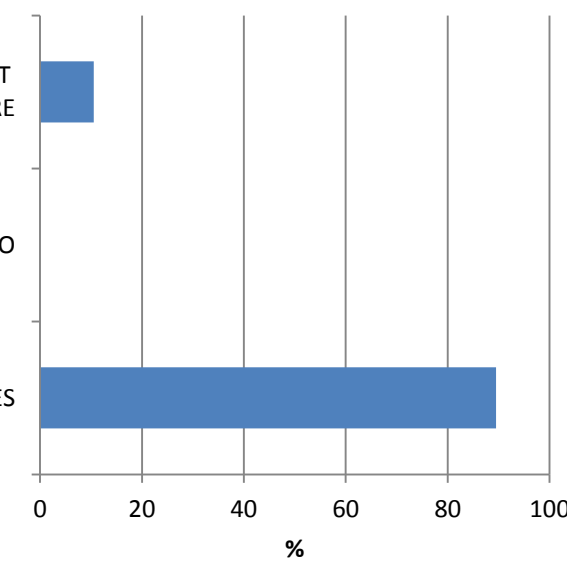
Has the device helped in clinical practice?



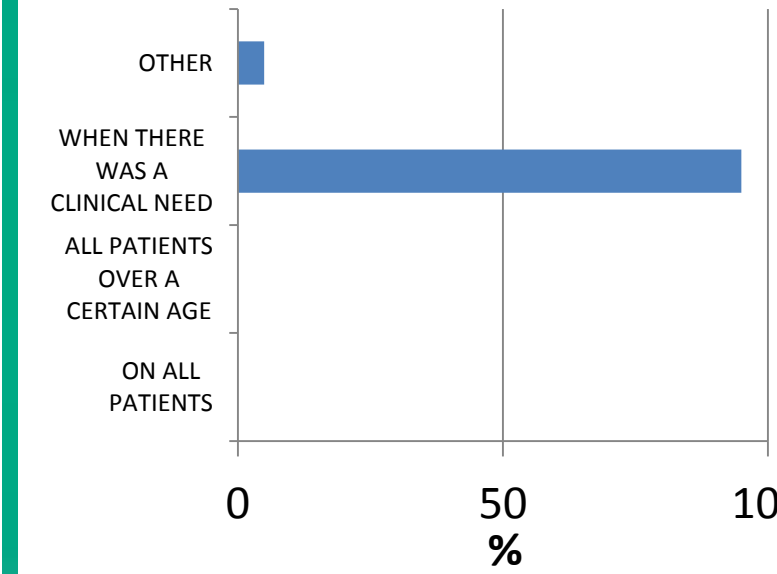
Would you Benefit from ECG analysis training?



Would you like to keep the device?



How did you decide when to use the device?



User Comments

- you'd still be checking pulses and getting ECGs even if you didn't have it, it just speeds up the process and improves patient experience
- Useful in consultation in situation where pt is symptomatic and no immediate access to 12 lead ecg. Has prevented admission to hospital in few occasions
- Really useful piece of equipment. I am using it daily especially on the elderly
- Excellent device which has assisted in clarification of patient's rhythm where irregularity was detected but lack of community ECG facility has allowed prompt treatment/reassurance for the patient
- I think the area where it would increase diagnoses is if other staff started using as a screening tool (HCAs, perhaps even health trainers, trained reception staff etc, who wouldn't necessarily be able to accurately assess a pulse or ecg, but could use the device and refer patients for a GP opinion if came back with AF

AliveCor Summary

- Generally well accepted and seen as a useful tool to aid health care professionals

Implications of conclusions



Accuracy and acceptability of the devices would indicate that there is a future role for hand held devices. This could be in general practice, community nurses, pharmacists or on occasions where large numbers of people attend e.g. flu clinics.