



British Heart
Foundation

the untold heartbreak

Cancelled procedures. Missed appointments. Lost lives.
Covid-19's devastating impact on cardiovascular care and the case for building a stronger and more resilient health system

Despite the great strides that have been made over the past several decades, cardiovascular diseases (CVD) remain a major cause of morbidity and mortality in the UK. Since March 2020, when the pandemic hit, this reality has only worsened for heart patients like Chandni (pictured on the front cover).

Despite the heroic efforts of everyone across the health and care system to respond to the needs of all patients, millions of people have not been able to access the care they need to stay well. And fast on the heels of the pandemic, the health service is already grappling with its next challenge: clearing the backlog in care that has accumulated while it was focussed on saving lives from Covid-19. In many cases, clinicians are being placed in the unenviable position of making decisions about delaying treatment and ultimately, people living with heart disease stand to suffer.

But we can shift the dial. There are green shoots of recovery, and there is incredible will in the NHS to address current problems quickly. BHF modelling that suggests it could take between 2.5 and 5 years to return to pre-pandemic waiting times in England does not have to turn into reality. But this will require strong Government support and leadership with targeted interventions at key points in the health system.

Heart and circulatory diseases did not stop for the pandemic. On behalf of the millions of people who live with these conditions in the UK, we at the BHF believe that by acting now, we can build a stronger, better and more resilient health system, giving doctors and nurses the tools they need while empowering patients with the support that they seek to turn the tide on cardiovascular diseases.

1 in 4

CVD accounts for a quarter of all deaths in the UK

7.6m

There are currently 7.6 million people living with CVD in the UK

6,000

Cancelled procedures, missed appointments and growing waiting lists are likely to have contributed to the more than 6,000 excess deaths from CVD in the UK in the first year of the pandemic

350k

BHF modelling suggests that between 350,000 and 400,000 people could be waiting for a heart procedure in England by March 2022

**2.5–5
years**

It may take between 2.5 and 5 years to return to pre-pandemic waiting times in England

Putting an end to the untold heartbreak

To tackle the backlog of cardiovascular care and transform outcomes, a clear national cardiovascular strategy for recovery from the Covid-19 pandemic is needed. This strategy must focus on infrastructure, the NHS workforce

and how to empower people with heart and circulatory diseases to manage and feel supported in their care. All of this must be backed up with clear leadership that prioritises cardiovascular health and the funding to sustain it.

I feel like I've just been forgotten.

I understand that Covid-19 has placed a huge pressure on the health system, but there are thousands of people with heart conditions who still need care.

Diane, diagnosed with aortic stenosis, a condition where the aortic valve becomes narrowed, reducing blood flow to the rest of the body



We are calling on the UK Government to:



Provide substantial long-term investment in the health and care system.

- HM Treasury should commit in the upcoming Comprehensive Spending Review to substantial and long-term investment in the health and care system.

This should include:

- Targeted funding for tackling the backlog of cardiovascular care, based on robust modelling of future demand.
- A 4% increase in funding in real terms for healthcare for the next ten years to bring health spending in the UK closer to other G7 countries.
- Rapid investment to set up hubs to improve access to diagnostics, adequate resourcing of Cardiac Networks to drive improvements in CVD services and reduce variation in care across England, and investment to allow innovations to be embedded across the system.

In England, we need a commitment to:



Address the gaps in the cardiovascular workforce

- A national strategy for tackling workforce pressures will be vital for dealing with the vast and growing backlog of care and to improve outcomes for people with heart and circulatory diseases both now and in the longer term.



Embed leadership in cardiovascular care at all levels

- Clear leadership roles for cardiovascular diseases must be developed at every stage of the health and care system, in Integrated Care Systems, Cardiac Networks and Primary Care Networks, to achieve a full pathway approach to preventing and treating cardiovascular diseases.



Empower people with heart and circulatory diseases to self-manage their conditions

- People need to be given the right tools to be able to manage their conditions at home and access help when needed, and the health service should be set up to support them to do so.

We have an opportunity to get this right across all four nations of the UK, and the BHF in Scotland, Wales and Northern Ireland will continue to work with devolved governments and health and care systems to ensure there are appropriately resourced plans to address the backlog of care and transform cardiovascular disease services for their populations.

You can learn more about the Covid-19 pandemic and the impact it has had on cardiovascular care, as well as our full list of recommendations at bhf.org.uk/untoldheartbreak