# Health and Social Care Committee HSC(4)-05-11 paper 2 Inquiry into Stroke Risk Reduction – Evidence from Public Health Wales





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Dear Sir,

### **Health and Social Care Committee Enquiry into Stroke Risk Reduction**

Thank you for the opportunity to provide evidence to the committee on Stroke Risk Reduction.

Public Health Wales is an NHS organisation providing professionally independent public health advice and services to protect and improve the health and wellbeing of the population of Wales. These services include delivery of Screening Services and Health Improvement Programmes such as Stop Smoking Wales.

The risk factors for Stroke are common to a number of other leading causes of disease, disability and death in Wales, namely smoking, physical inactivity, overweight and obesity and unhealthy diets. Addressing these issues is complex and requires integrated approaches that both support individuals in adopting and sustaining healthy behaviours but also create environments through the use of policy, legislative or fiscal measures that enable those changes for all sectors of society.

Addressing these primary risk factors should not be approached from a disease specific perspective, the approach currently adopted in Wales of developing strategic action plans for Tobacco Control and Physical Activity (Climbing Higher) is appropriate and should continue. There is potential to strengthen the strategic approach to improving diet and health related outcomes in Wales.

Traditionally health improvement and preventative measures have been less well described, defined and resourced than treatment and care interventions. In an increasingly financially challenging environment it is essential to ensure that the focus on prevention that has been achieved in Wales in recent years is maintained and further developed.



Existing public awareness programmes should continue to ensure that the links between unhealthy lifestyles and Stroke, alongside Cancer, other cardiovascular diseases etc. are understood at a population level.

Public Health Wales is currently undertaking a review of Cardiovascular Risk Assessment and Management in Wales following the Halcox Report (Vascular Risk Management in Wales) at the request of the Minister. A first stage review report has been submitted for consideration and identifies opportunities to ensure that:

- Those at known risk of disease, including Stroke, receive optimum clinical and behavioural management to reduce that risk in line with evidence based guidelines
- Those with risk factors but not yet identified received systematic assessment of their risk and appropriate management.

The review has highlighted a number of complex ethical and service delivery issues that would need to be addressed.

The existing Stroke Risk Reduction Action Plan includes a number of actions for delivery by March 2012, Public Health Wales is contributing to a number of these and anticipates delivery of these actions in line with the plan.

#### Screening for atrial fibrillation.

The UK National Screening Committee (NSC) advises Ministers and the NHS in the four UK countries about all aspects of screening and supports implementation of screening programmes. Using research evidence, pilot programmes and economic evaluation, it assesses the evidence for programmes against a set of internationally recognised criteria covering the condition, the test, the treatment options and the effectiveness and acceptability of the screening programme. Assessing programmes in this way is intended to ensure that they do more good than harm at a reasonable cost. (http://www.screening.nhs.uk/about). Population screening programmes should not be introduced in the NHS if they are not recommended by the NSC.

The NSC has reviewed the evidence for screening for atrial fibrillation, and concluded that screening should not be offered. Supporting evidence for this policy is the Health Technology Assessment 'A randomised controlled trial and cost-

effectiveness study of systematic screening (targeted and population screening) versus routine practice for the detection of atrial fibrillation in people aged 65 and over: the SAFE study. (available from <a href="http://www.hta.ac.uk/project/1129.asp">http://www.hta.ac.uk/project/1129.asp</a>)

The NSC policy is currently under review. The review process is estimated to be completed by March 2012. Wales should not make any plans for a systematic population based screening programme for atrial fibrillation until the outcome of the NSC policy review is published.

Yours faithfully

## **Dr Julie Bishop**

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