

Cholesterol Control and Lipid Management

A focus on secondary prevention



Bilal Mukhtar, Advanced Clinical Pharmacist, Cardiac Services
Wanstead and Woodford PCN, North-East London

Aim

95% of all patients on the Chronic Kidney Disease (CKD), Coronary Heart Disease (CHD), Transient Ischaemic Attack (TIA) / Stroke Register to have had an offer of lipid lowering therapy by April 1st 2024.

Method

Through a targeted search of 261 patient medical records, these patients were systematically invited for consultations regarding the initiation of lipid-lowering therapy as well as chronic disease review. By proactively addressing lipid management in patients with high cardiovascular risk, we have not only enhanced individual patient outcomes but also contributed to the reduction of overall cardiovascular morbidity and mortality in the community. The project is particularly advantageous for patients with comorbidities such as diabetes and hypertension, where lipid control is paramount in preventing adverse cardiovascular events. Moreover, this initiative supports the broader public health agenda by aligning with national guidelines for cardiovascular disease prevention, thereby optimizing resource utilization within the healthcare system and reducing the long-term burden of cardiovascular diseases on the NHS.

Summary of results

The project successfully identified and reviewed 261 patients across the chosen registers. As a result, 95% of the eligible patients were offered statin therapy by the April 1st, 2024 deadline. This high rate of intervention underscores the effectiveness of a structured, data-driven approach in achieving significant improvements in the management of cardiovascular risk factors within a primary care setting.

Sustaining the change

Lipid management for these high-risk groups remain on the QOF register. The outcomes of this project will remain sustainable as the automatic electronic recall of patients on high-risk registers will occur. Staff education has taken place to ensure that non-clinical staff are aware how to invite patients who are flagged routinely to have lipid lowering medication discussed. The follow-on project from this will target those with uncontrolled LDL >1.8 and begin a pharmacist led lipid titration clinic.

Learnings

This project has provided valuable insights into the management of lipid-lowering therapy in high-risk patients. The outcomes demonstrate the importance of systematic and proactive patient engagement in improving clinical care. However, future iterations of this project could benefit from enhanced patient education materials to increase acceptance and adherence to statin therapy. Additionally, incorporating multidisciplinary team discussions, including input from dietitians and lifestyle coaches, could further enrich the therapeutic approach. Moving forward, a more personalized strategy, utilizing risk stratification tools, may optimize therapy offers and ensure that the most appropriate patients are targeted for intervention.

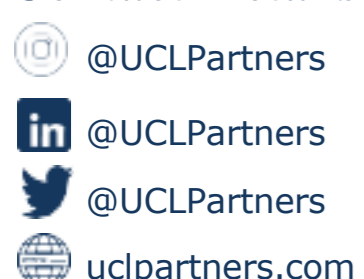
Staff feedback

The junior pharmacists and nurses are now aware of the counselling needed to let patients make an informed decision when offered lipid lowering therapy

Staff feedback

Patients are not left at increased risk of cardiac disease by being left out on the chance for cholesterol lowering medication

Contact Details



@UCLPartners

@UCLPartners

@UCLPartners

uclpartners.com



Daiichi-Sankyo

Funded by an independent grant from Daiichi Sankyo UK Ltd