Cardiovascular disease (CVD) describes the range of conditions that affect the heart and blood vessels. CVD includes all heart and circularity diseases, including heart disease, heart attack, stroke, heart failure and atrial fibrillation. CVD is one of the leading causes of death and disability in the UK.

This factsheet highlights some of the key statistics and indicators of CVD in the borough of Hammersmith and Fulham, focusing on coronary heart disease, stroke and CVD risk factors.

## KEY INDICATORS

## Coronary Heart Disease <br> Prevalence (all ages)

$1.3 \%$

Stroke Prevalence
(all ages)
$0.8 \%$

Hypertension
Prevalence (all ages)
7.5\%

## Coronary Heart Disease (CHD)

CHD describes when the heart's blood supply is blocked by a build-up of fatty substances in coronary arteries. CHD is the single most common cause of premature death in the UK.

| CHD Prevalence | $1.3 \%$ <br> All ages |
| :--- | ---: |
| England $3.1 \%$ <br> CHD Hospital admissions | 412.2 |
|  |  |
| England 469.9 |  |

## PCN Trend:

The PCNs with the highest prevalence of CHD are H\&F North and H\&F Central, at $1.6 \%$. This is $0.3 \%$ higher than the LBHF average. Babylon GP at hand has the lowest prevalence at $0.4 \%$


## Long term trend:

The long-term trend in CHD demonstrates an overall decline in disease prevalence. For H\&F, the prevalence of the disease has fallen by $0.5 \%$ in the last 10 years, from 2009/10 to 2019/20.

This is a similar level of decline seen in the London and England prevalence.


CHD and other CVD complications can lead to Heart Failure. It is a long-term condition with poor prognosis and is expensive to treat.

| Heart Failure Prevalence | 0.35\% <br> All ages | $\downarrow$ |
| :--- | ---: | :--- |
|  |  |  |
| England 0.9\% |  |  |

## Stroke

A stroke occurs when a blockage or bleed of the blood vessels interrupts or reduces the supply of blood to the brain. When this occurs, the brain does not receive enough oxygen and brain cells start to die.

This is a serious medical condition needing immediate medical intervention.

| Stroke Prevalence* | $0.8 \%$ |
| :--- | ---: |
| All ages | England 1.8\% |
| Stroke Hospital Admissions | 221.2 |
| Per 100,000 | England 170.2 |

* The percentage of patients with stroke or transient ischaemic attack (TIA - also known as a "mini stroke"), as recorded on GP disease registers

Stroke Mortality:
Stroke Mortality rate <75 years 13
Per 100,000
England 12.5
Stroke Mortality rate 75 years+ 327
Per 100,000
England 479.4

## PCN Trend:

The PCN with the highest prevalence of stroke and TIA is H\&F Central at $1.2 \%$, which is $0.4 \%$ higher than the LBHF average. Babylon GP at hand has the lowest prevalence at 0.2\%


## Long term trend:

The long-term trend in Stroke prevalence has not changed significantly. For H\&F, the prevalence of the disease has fallen by $0.1 \%$ in the last 10 years.

Stroke prevalence in London has remained at $1.1 \%$. In contrast, prevalence is greater in England at $1.8 \%$ and has seen a $0.1 \%$ increase in the past 10 years.


## Atrial Fibrillation

Atrial fibrillation (AF) is a heart condition which can result in an irregular/fast pulse. AF can increase the chance of blood clots forming, leading to increased risk of stroke. It is associated with a 5 X increase in risk of stroke.

| Atrial Fibrillation Prevalence | $0.8 \%$ |
| :--- | ---: |
| All ages | England $1.1 \%$ |

The prevalence of AF is rising, due to improved survival of people with CHD (the most common underlying cause of AF).

Atrial Fibrillation Treatment:
Treating appropriate AF patients with anticoagulant drug therapy lowers their risk of stroke.

$$
\begin{array}{lr}
\begin{array}{l}
\text { AF Patients treated with } \\
\text { anti-coagulation therapy }
\end{array} & \begin{array}{r}
85 \% \\
\text { England } 87.3 \%
\end{array} \\
\begin{array}{l}
\text { Stroke admissions who had a }
\end{array} & 41 \% \\
\begin{array}{l}
\text { history of AF not prescribed } \\
\text { anticoagulation }
\end{array} & \text { England } 38.9 \% \\
\hline
\end{array}
$$

## Risk Factors of CVD

Smoking, high cholesterol, hypertension, physical inactivity, obesity, and diabetes are all risk factors for CVD.

## Hypertension

High blood pressure, puts extra strain on blood vessels and other organs, increasing risk for CVDs and other life-threatening health conditions. At least half of all heart attacks and strokes are caused by high blood pressure.

High blood pressure is $140 / 90 \mathrm{mmHg}$ or higher.

## Hypertension Prevalence

All ages
7.5\%

England 14.1\%
Patients with a record of Blood
84.5\% $\downarrow$

Pressure (taken in last 5 years) England 89.5\% 45+ age

## Ethnicity:

Caribbean community in LBHF has the highest prevalence of hypertension at $26 \%$, followed by the Irish community at $16 \%$.


PCN Trend:
H\&F Central PCN has the highest prevalence of hypertension in the borough at $9.9 \%$. Babylon GP at Hand has the lowest prevalence at 2.8\%


## Long term trend:

The long-term trend in hypertension demonstrates a decline in prevalence. For H\&F, the prevalence of the disease has fallen by $1.9 \%$ in the last 10 years, from 2009/10 to 2019/20.

This is a similar level of decline in the London and England hypertension prevalence.


## Smoking

Smoking increases the formation of plaque in blood vessels and is a major risk factor for CVD. In H\&F, the prevalence for the following population groups are:

| 18+ Smoking Prevalence | $10.3 \%$ <br> England $13.9 \%$ |
| :--- | ---: |
| 15+ Smoking Prevalence | $16.0 \%$ |
|  | England $16.5 \%$ <br>  <br> 18+ Smoking Prevalence |
| In routine/manual jobs | $\mathbf{2 5 . 0 \%}$ England $23.2 \%$ |

Mortality:
Smoking attributable deaths from Stroke 6.94 per 100,000

England:
Smoking attributable deaths from Heart Disease 17.7 per 100,000

England:

## Obesity

\% Adults Overweight/Obese* $\quad 48.9 \%$
Age 18+
Age 18+
England 62.3\%
*Classified by BMI

