



Primary prevention and the role of health services

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Primary prevention

- What are the important factors?
- How common are they?
- How big an impact might they have?
- How do we change them?
- What's happening to make it happen?
- What can local health services do?
- What can primary care do?



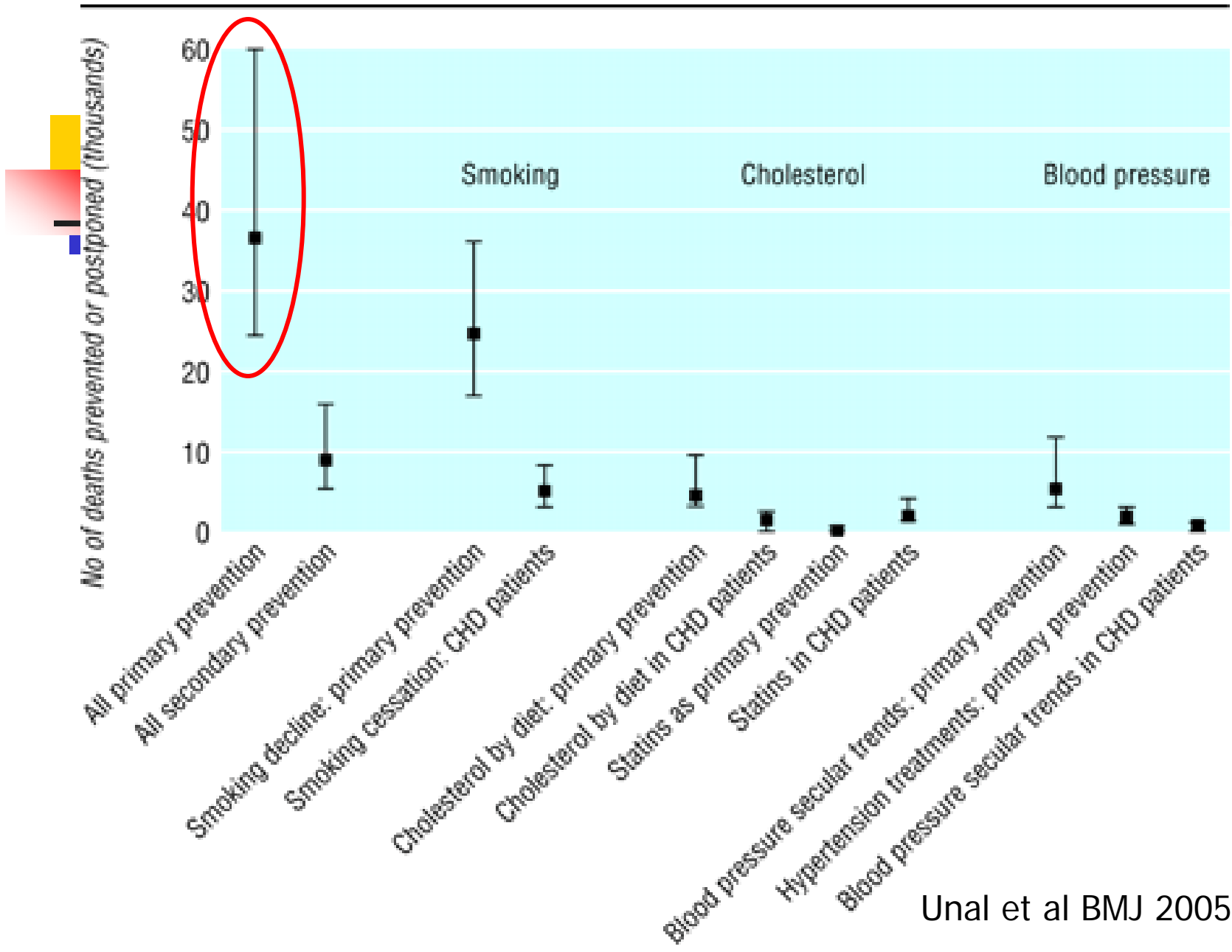
Modifiable CVD risk factors

- Smoking
 - Increases risk of CHD *death* by 70%
- Blood pressure
 - DBP 5mmHg drop reduces CHD risk 20%
- Raised cholesterol
 - 0.6mmol/l drop reduces CHD risk 25%
- Physical Activity
 - 30 mins 5 times week reduces CHD risk 50%



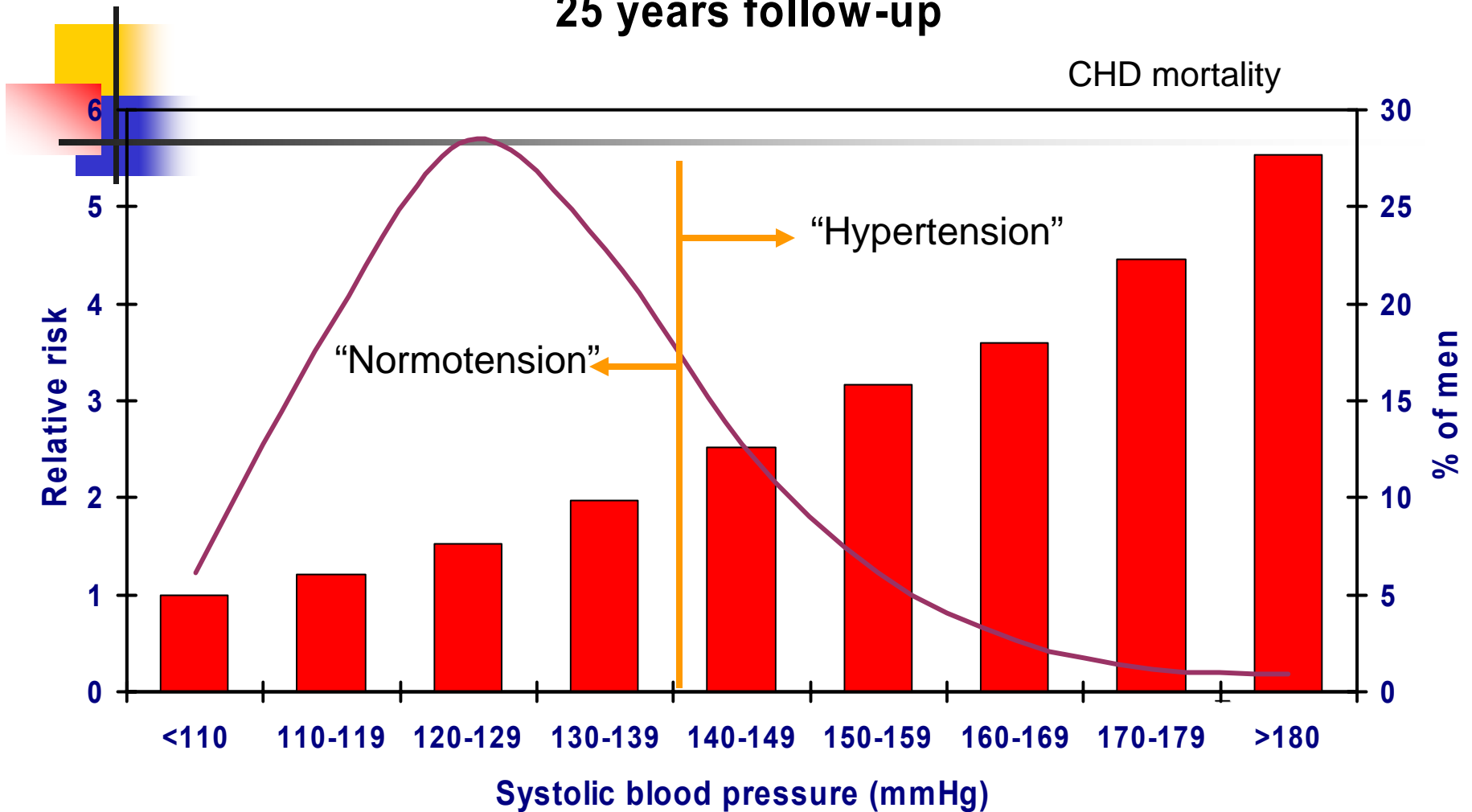
Europe - 7 main factors leading to death

1. High blood pressure (25%)
2. High cholesterol (2/3)
3. Tobacco use (25%)
4. Overweight or obese (2/3)
5. Low fruit & vegetable intake* (20-50%)
6. Physical inactivity (2/3)
7. Alcohol excess (38%/24%)



Unal et al BMJ 2005

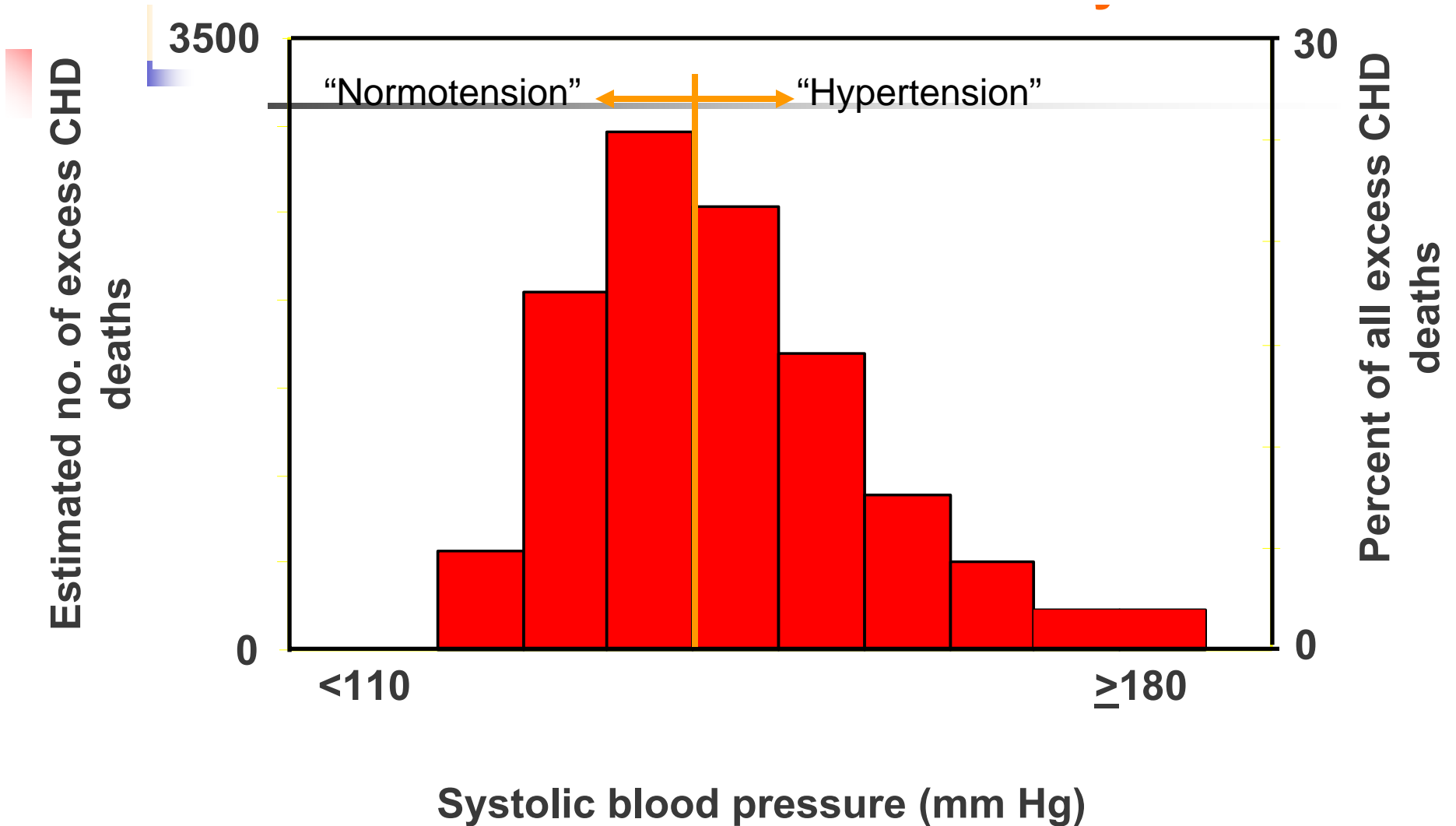
MRFIT blood pressure distribution and risk of death at 25 years follow-up



347,978 men ages 35-57 at baseline

Adapted from Elliott & Stamler 2005

MRFIT 25-year follow-up: Numbers and proportions of excess CHD deaths by SBP



Adapted from Elliott & Stamler 2005

“We may estimate that all the life-saving benefits achieved by current antihypertensive treatment might be equalled by a downward shift of the whole blood pressure distribution in the population by a mere 2-3 mm Hg. The benefits from a mass approach in which everybody receives a small benefit may be unexpectedly large.”



Top 10 tips for better health

-
1. **Don't smoke and don't breathe others' tobacco smoke.**
 2. **Eat at least 5 portions of fruit and veg each day and cut down on fat, salt and added sugar.**
 3. **Be physically active for at least 30 minutes, 5 days a week. This can be done in 3 x 10 minute segments.**
 4. **Maintain, or aim for, a healthy weight (BMI 20 -25).**

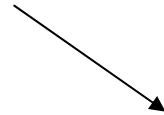
Chief Medical Officer 2004



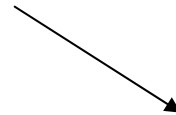
KAB model

1

Knowledge



Attitudes



Behaviour

the **ISSUE** is
PUBLIC
EDUCATION







So how to promote change?

- Choosing Health
 - Choosing Health summaries pack 2004
 - Health Challenge England Factsheets 2006
- Prevention paradox
- Small Change, Big Difference
 - Physical Activity
 - Healthy Eating
 - 5 a day website
- Smoke Free England 1/07/2007
- Sport England & 2012



Choosing Health, UK 2004

“The key to national health improvement is more people making healthier choices more of the time.”

Annex B Making it happen



Wanless reports 2002 & 2004

- NHS costs set to rise by 2022/23
- Fully engaged scenario
- Reduces increase by £30 billion



Prevention paradox

- ... a preventive measure that brings large benefits to the community offers little to each participating individual.

Rose, Geoffrey, 1992



Small change, big difference

- However, if lots of people make small changes, it will have major impact on health



Health Belief Model

- Psychology model with origins in USA PH 1950s Rosenstock et al, updated Becker 1974
- Function of beliefs in individual health decision making
- Used to predict protective health behaviour e.g. vaccine uptake
- Four original constructs:
 - Perceived susceptibility (risk of getting condition)
 - Perceived severity (seriousness of condition/consequences)
 - Perceived barriers (to adoption of promoted behaviour)
 - Perceived benefits (positive consequences of behaviour)
- Becker added:
 - Perceived efficacy (ability to successfully adopt behaviour)
 - Cues to action (external influences promoting desired behaviour)



Social marketing

- See new national website
 - www.nsms.org.uk
- Apply marketing principles
- Achieve behaviour change relevant to a social good
- 4 Ps
 - Product – what's on offer
 - Price – what will it cost the individual
 - Place – opportunities to reach audience
 - Promotion – incentives



Role of NHS & staff

- Knowledge
 - Expert on the health benefits & evidence
 - Be aware of national campaigns
- Attitudes
 - Primary prevention matters
 - We are not always the lead.....don't have time
 - Value others role
- Behaviour
 - Model the healthier choice
 - Support local cues to action, alongside national



Role of NHS & staff

- Perceived susceptibility
 - The majority of British population could lower their risk of CHD
- Perceived severity
 - Heart disease is still the single largest cause of death
- Perceived barriers (to adoption of promoted behaviour)
- Perceived benefits (positive consequences of behaviour)
- Perceived efficacy (ability to successfully adopt behaviour)
- Cues to action (external influences promoting desired behaviour)



Role of NHS & staff

- Product – what's on offer
 - Better health – smell, skin, wellness
 - Quit smoking, reduce wt, check & control BP
- Price – what will it cost the individual
 - Promote access & identify & reduce costs
- Place – opportunities to reach audience
 - NHS has a number of interfaces with public
- Promotion – incentives
 - Focus on health benefits



Role of NHS providers

- Dietetic teams
- Exercise development staff
- Stop Smoking Services

- Cardiac rehabilitation teams
- Primary Care teams
- Occupational health



1 July 2007

- Smoke Free England website
- 14 March – No Smoking Day
- 100 day countdown
- 1 July 2007 – Smoke Free public places
- 3 month follow up



Smoke Free England

- Needed
 - Wanted
 - Worth it
-
- Local Authorities lead implementation
 - Massive programme with businesses



NHS role

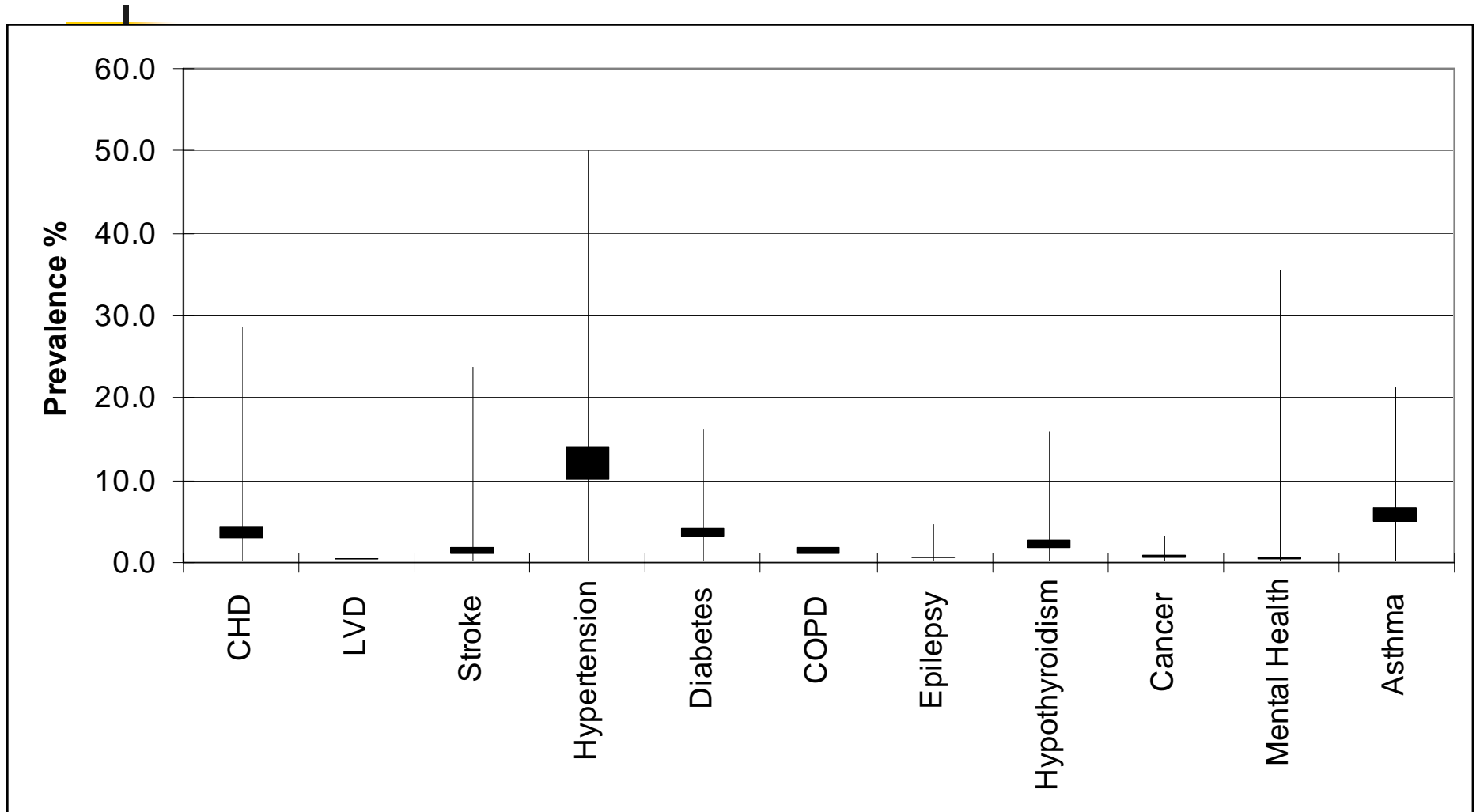
- People start trying to quit ahead of the Smoke Free date
- This is the largest national cue to action we will ever have this generation
- Support Smoke Free by helping quitters
- Be prepared to give advice &/or refer to Stop Smoking Services



Primary Care role 2007

- Stick to QOF
 - BP/cholesterol control – treat to current target
 - BMI recording
 - ?prevalence
- Support Stop Smoking Services
 - Prioritise for funding, especially in 2007/8
 - Secure funding
 - Support marketing
 - Refer
 - Do you smoke? Y
 - Do you want to stop? Y
- Obesity strategies
 - Healthy diet & physical activity pathways & directories

QOF 2005-6 National Data at Practice Level





Primary Care

- Breathe.....
- JBS2
 - 20% CVD risk accepted but logistics not
 - NICE on statins still due
- Switching to simvastatin could save £500,000 but watch compliance
- Treat using judgement



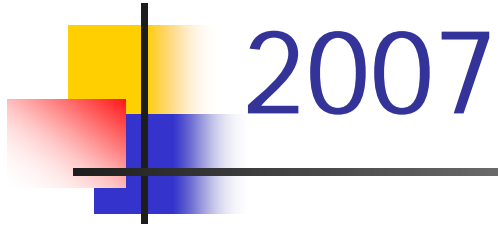
Primary Care role - Horizon

- 2006 Health Trainers in Spearhead PCT
- 2007 Life Check
- 2007 NICE guidance Statin et al
- 2007 Oct – Legal age for tobacco purchase 18 years
- 2008/9 – Contract???



Prevention horizon

- Food & diet action plan
 - Salt reduction in foods
 - Switch to reduced fats in processed foods
- Physical activity promotion
 - Active everyday
 - Getting the Olympic dividend



2007

- SMOKE FREE ENGLAND
 - SMOKE FREE ENGLAND
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 - Smoke Free ENGLAND
 - Smoke Free ENGLAND
- SMOKE FREE.....ENGLAND