Passion for Innovation.
Compassion for Patients.™

Daiichi-Sankyo

Joint Working

Executive Summary

Project title:	Remote detection and diagnosis of Atrial Fibrillation (AF): service redesign project – East Cornwall Primary Care Network
Project partners	NHS: East Cornwall Primary Care Network Daiichi Sankyo UK Ltd
Start date	July 2022 - April 2023
Project Support	Daiichi Sankyo UK Ltd financial contribution £ 51,200.05 NHS East Cornwall Primary Care Network indirect contribution £ 50,260.63

This summary has been written by Daiichi Sankyo with consultation and approval from the Joint Working Group.

Project summary

The aim of the project is to improve the AF detect gap by detecting AF and confirming AF diagnosis using digital health technologies. In addition, this project brings detection and diagnosis of AF into patients' homes, allowing at-risk patients access to the right treatments at the appropriate times.

The project allows systematic and opportunistic case finding, and managing local AF pathway (adhering to local guidance) whilst patients are at home. The project intends to improve the AF detect gap, health economic outcomes and enhance the healthcare professionals' and patients' experiences with the remote detection and diagnosis of AF.

This project is the fourth of four/five pilots planned to run in parallel across various regions. Each pilot project will be individually evaluated, and the collective outcome for overall evaluation. The outcomes of the evaluation of this pilot site are available below.

Expected benefits to patients the NHS & Daiichi Sankyo UK Ltd

Expected benefits to patients:

- Shorter time to diagnose cardiac arrhythmia with digital health technologies compared to conventional 12 lead ECG and/or ambulatory cardiac monitoring.
- Higher proportion of AF detection with subsequent access to treatment and management of atrial fibrillation.
- Reduce patients' visits to the GP practices and outpatient setting in times of COVID, and detection and diagnosis conducted remotely.
- Prevent AF related stroke, hospitalisation, morbidity, and mortality secondary to undiagnosed and untreated AF.
- Increase awareness of Atrial Fibrillation.

- Improvement of patient experience with novel detection/diagnosis devices compared to conventional management.

Expected benefits to NHS:

- Able to conduct systematic and opportunistic case finding remotely at scale (i.e., high-risk group at PCN/CCG level).
- Higher proportion of AF detection due to systematic and opportunistic case finding, in addition to conventional care pathway.
- Shorter time to diagnose cardiac arrhythmia with the digital health technologies compared to conventional 12 lead ECG and/or ambulatory cardiac monitoring.
- Able to offer AF detection/diagnosis and subsequent treatment to vulnerable and shielded patients during COVID-19.
- Able to adhere to local guidance.
- Reduce primary and secondary care workload and improve efficiencies.
- Financial benefit from prevention of AF related stroke and subsequent hospitalisation, morbidity, and mortality.
- Reduction in cost of repeat investigation due to delay in diagnosis and outpatient reviews.
- Improve HCPs' experience with novel AF detection/diagnosis devices.
- Bring services from secondary to primary care and support NHS Long Term Plan.

Expected benefits to Daiichi Sankyo UK Ltd:

- To be recognised and engaged as a trusted partner of choice for the NHS.
- Raise Daiichi Sankyo's corporate profile and awareness of digital health solutions for improving patient outcomes.
- It is anticipated as part of the project that more patients may be treated with a pharmaceutical product. This may include but is not exclusive to products manufactured by Daiichi Sankyo UK Ltd.
- Potential of upscaling the project and supporting local guidelines/requirements.
- Journal publication and associated publicity likely resulting in future collaborations.

Outcomes

- In total, the AF detection project enabled a service evaluation of 979 patients in seven practices.
- The FibriCheck app usage was very good, with 9 in 10 patients using the app at least once. Nearly all patients used the app for seven days but after this the use was very low.
- 4.6% detection yield for possible AF or AFl (which included persistent AF or AFl) using the FibriCheck app.
- 37.5% were diagnosed with AF and 10.0% were diagnosed with a non-AF arrhythmia using the QuardiocoreTM device. Most (60%) of patients used the device as recommended.