

Ignoring simple heart test puts Aussies at unnecessary risk of stroke

An irregular heartbeat that dramatically increases the risk of stroke is going undiagnosed among older Australians because simple pulse and heart rate monitoring is not being undertaken during routine doctor visits.

This is according to Hearts4Heart which has released findings from a survey of 550 Australians aged 65 years and over that reveals that blood pressure and cholesterol levels are prioritised during doctor visits over a heart condition known as atrial fibrillation which increases the risk of stroke five-fold.

The survey found that only one-in-three older Australians have discussed their heart health with a doctor in the past 12 months, and only one-in-ten has discussed atrial fibrillation as a risk factor for cardiovascular disease in this period.¹

New medical guidelines recommend routine screening (using a pulse test or handheld electrocardiogram [ECG]) of people aged 65 years or older for an irregular heartbeat. These guidelines state that one-in-ten strokes occur in people with previously undiagnosed atrial fibrillation.²

“The research shows that on average, older Australians see a doctor six times a year which provides plenty of opportunity to discuss and detect an irregular heartbeat,” said Tanya Hall, CEO of leading patient support group Hearts4Heart, and an atrial fibrillation patient herself.

“Testing and treatment of atrial fibrillation must become as routine as cholesterol or blood pressure monitoring and management,” she said.

“Thousands of Australians suffer strokes that could have been prevented if more had been done to diagnose and treat an irregular heartbeat.”

An irregular heartbeat known as atrial fibrillation can cause blood clots to form in a chamber of the heart which can then travel to the brain, causing a devastating stroke. It is estimated that one-in-four strokes occur in people with atrial fibrillation.³

Experts say that early diagnosis of atrial fibrillation is key to the prevention of stroke and are calling for pulse and heart rate testing with follow up ECG examination, to be included as part of the Medicare-funded Heart Health Check.

Introduced in April this year, the Heart Health Check incentivises doctors to screen for cardiovascular risk factors, including high blood pressure, elevated cholesterol, type 2 diabetes, smoking history and alcohol consumption. It does not require a doctor to undertake a pulse or ECG test to detect and diagnose atrial fibrillation.⁴

The omission of heart rate testing from Heart Health Checks is of concern to Hearts4Heart, which points to new Australian research which found that atrial fibrillation is now the leading

cause of heart-related hospitalisation (more than 61,000 admissions annually) – surpassing heart attack and heart failure.⁵

Experts also say that early diagnosis of atrial fibrillation must be matched by long-term use of medication that can reduce the risk of stroke by up to 70 per cent.

A new analysis produced for Hearts4Heart reveals that about 25 per cent of people prescribed anticoagulation medicine to prevent stroke discontinue therapy within 12 months.⁶

“This is alarming. We need to ensure people with atrial fibrillation understand why they’ve been prescribed an anticoagulant and why they need to continue to take this medication over the long term,” Ms Hall said.

Hearts4Heart is using Atrial Fibrillation Awareness Week (16-22 September 2019) to highlight the need for early diagnosis of an irregular heartbeat and appropriate long-term use of stroke prevention therapy.

Atrial fibrillation screening and information stations will operate at hospitals and pharmacies across Australia during Atrial Fibrillation Awareness Week. More information is available at: www.hearts4heart.org.au

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