



## **Project Improving experience and outcomes for people with recent ACS admission and raised cholesterol in Barts Health NHS Trust– project closure executive summary.**

In Early 2018, Barts Health NHS trust and Sanofi commenced a joint working project aimed at improving experience and outcomes for people with recent ACS admission and raised cholesterol in East London. As summary of the expected benefits of the project can be found below

### **Expected Benefits for Patients and the NHS**

By developing this service, the aim is to increase the proportion of patients with recent ACS receiving appropriate care in line with local and national guidelines, especially in relation to lipid lowering therapy. In turn, this is expected to lead to improved patient outcomes, reduced burden on the local health economy and deliver innovation to the localities served by Barts Health NHS Trust.

### **Expected benefits for Sanofi**

Improving care for patients with hypercholesteremia is the principal benefit. Working with a key Cardiac Centre in London will provide opportunity for partnership working and improved reputation with the NHS. Improvement in care of patients at high risk due to hypercholesteremia in line with NICE guidance may result in the increased use of appropriate medicines, including Sanofi medicines.

The project was due to complete in two years, but due to impact of Covid-19, it was eventually closed within budget in late 2021.

As a result of the project, Barts Health NHS Trust have created a formal process to identify 'high risk' CV patients following admission for ACS along with Key Performance Indicators for the patient pathway in line with National and local ACS standards. This includes formalisation of blood tests post ACS to assess non-HDL cholesterol and escalate therapy where >40% reduction was not achieved, the ability to follow up HbA1c, initiate / optimise anti-diabetic therapy, a robust data collection to review antithrombotic therapy, BP, cholesterol, diabetes, lifestyle, and medicines adherence. All early discharge patients are followed up at 3 months by a specialist cardiac pharmacist, and a greater awareness of the pathway has increased referrals to clinic and direct referrals into the high-risk clinic for PCSK9i initiation if lipid targets not achieved. The project has also contributed to publications by Barts Health NHS Trust. The Barts Health NHS Trust CV team won the BMJ Stroke and Cardiovascular team of the year award for 2021 and have presented abstracts at clinical congress including the European Association of Hospital pharmacists (EAHP)