

**Pennine GP Learning Group**

**Minutes of meeting**

**Date: Tuesday 8th May 2018**

**Time: 7.45 - 9.15pm (1.5 hours)**

**Topic: Various Topics Update**

**Members present:** Dr Rukhsana Hussain, Dr Ainie Chaudhry, Dr Mark Wilshire and Dr Ann Holmes

Dr Hussain shared some learning from several clinical updates. The group discussed how these learning points may impact their practice.

Below are outlined some of the topics covered in the session:

- Qrisk3 CVD risk assessment calculator - we discussed several different parameters that are included compared to the Qrisk2 which will mean we will likely be having discussions regarding statins with many more people. We learned that men with erectile dysfunction have a 25 % increased cardiovascular risk and this is one of the new parameters in the updated Qrisk calculator. This will be introduced into clinical systems this year.
- Regarding Atrial Fibrillation, new guidelines advise NOT to use bleeding risk scores as they have been identified as being barriers to anticoagulation. This is because people the HASBLED score is inevitably higher in those with a high stroke risk as they share the same risk factors. We are advised to assess bleeding risk clinically and look to correcting modifiable risk factors such as uncontrolled hypertension to allow us to prescribe anticoagulation.
- Dr Hussain highlighted that new guidelines regarding hypertension are advocating treating bp to lower targets than current advice, regardless of the age of the patient. The group were concerned about the risks of overtreatment in older people especially. New guidelines also recommend using home monitoring, rather than clinic readings, to diagnose, treat and monitor blood pressure. As a group we agreed that this seemed sensible and probably represented a more accurate reflection of the patient's blood pressure. Some of us have already been doing this for a proportion of our patients. The guidelines advocating our practice was reassuring.
- We discussed diabetes and the role of the Freestyle Libre Flash monitoring system.

- Dr Hussain also mentioned that SGLT2 inhibitors such as Empagliflozin have been found to reduce cardiovascular risk and may well have a role in the treatment of heart failure in future.
- We spoke about new prenatal non-invasive fetal testing which is becoming available on the NHS as an adjunct to current tests. The tests are based on genetic testing of fetal DNA in maternal blood and are more accurate than the current screening tests available to women. Dr Wilshire shared that the tests are available privately at a price of around £150. We felt that this was a reasonable price for most people given these tests do not carry the risk of miscarriage and false positives of the current more invasive tests available on the NHS. We could raise awareness of the availability of these tests to relevant patients.

### **Action Plan**

1. Dr Hussain will upload the minutes of the meeting to the website.
2. The next meeting will hopefully be scheduled for August 2018.