

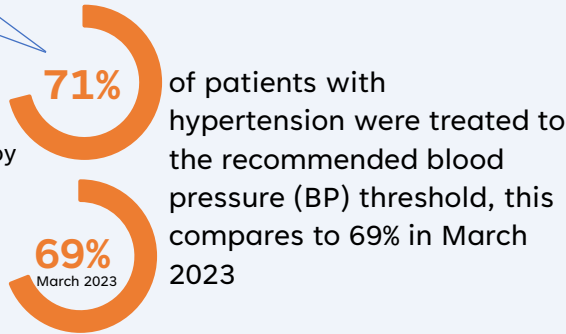
CVDPREVENT is a national primary care audit that automatically extracts routinely held GP data about the prevention of cardiovascular disease, for more information click [here](#). This infographic summarises the key findings from the 2024 annual report which can be found [here](#), highlighting key pieces of the data from March 2024.

## HYPERTENSION

### Key finding 1

**499,314**

patients need to be treated to meet the 77% ambition<sup>(1)</sup> set by NHS England



### Key finding 2

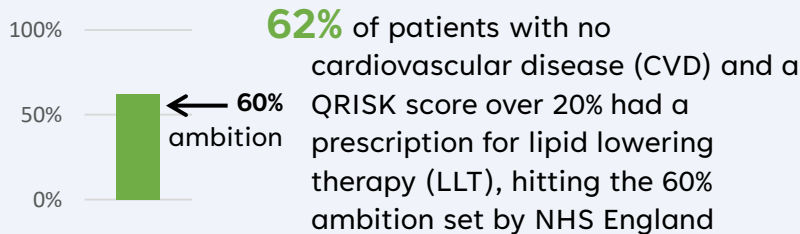
**1 in 4** people with hypertension were aged 18 – 59 years



They were less likely than people in older age groups to be treated to recommended BP threshold

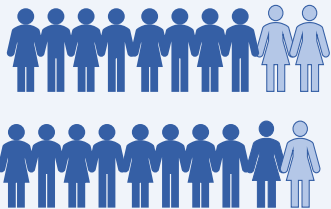
## CHOLESTEROL

### Key finding 5



### Key finding 7

Looking at patients with diagnosed CVD

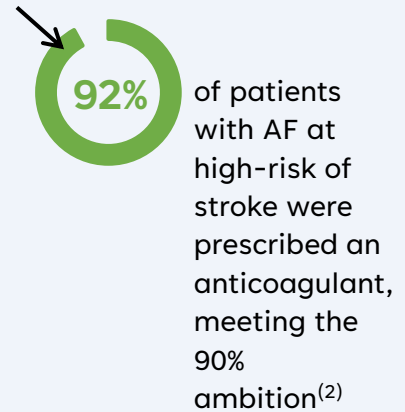


8 in 10 people in the black ethnic group compared to 9 in 10 people in the Asian ethnic group had a current prescription for LLT

## ATRIAL FIBRILLATION (AF)

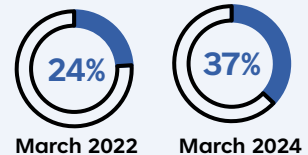
### Key finding 8

**90%** ambition set by NHS England



### Key finding 6

**37%** of patients with CVD had their cholesterol lowered to threshold<sup>(3)</sup>



This compares to 24% in March 2022 when this indicator was first reported

(1) [NHS priorities and operational planning guidance 2023/24](#)

(2) [Public Health England, 2019](#)

(3) Threshold refers to the 2023/24 QOF threshold of non-HDL cholesterol less than 2.5mmol/l or LDL-cholesterol less than 1.8mmol/l.

(4) Blood pressure over 160/100mmHg

(5) Mortality rates calculated for people as per CVDPREVENT outcomes analysis. For more information, please read our [guidance](#).

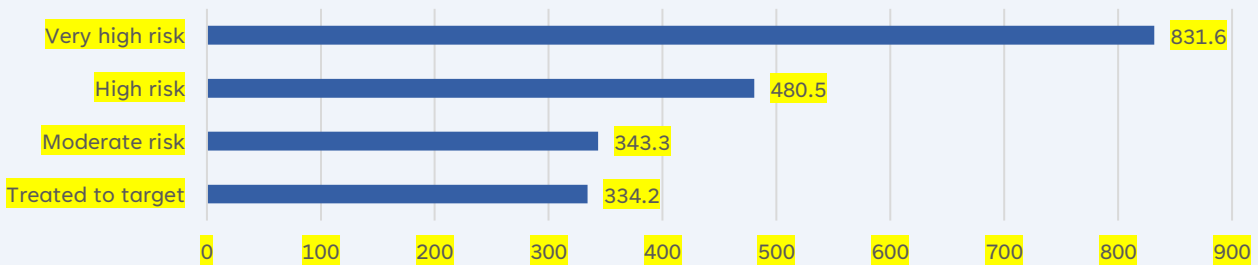
In February 2024 the CVDPREVENT audit data was linked to hospital and deaths records to better understand the health outcomes of its patients. Using this linked dataset, outcomes indicators were developed and are now being reported on by the audit. Click [here](#) to find out more about these indicators and view key findings around mortality and health inequalities below, as identified in the CVDPREVENT 2024 Annual Audit Report.

## MORTALITY & INEQUALITIES

### Key finding 3

People with hypertension with ‘high’ and ‘very high’ BPs<sup>(4)</sup> on 1<sup>st</sup> April 2023 were more likely to die<sup>(5)</sup> from CVD than those with lower risk blood pressures, measured 1<sup>st</sup> April 2023 – 31<sup>st</sup> March 2024

Mortality from cardiovascular disease among patients with hypertension aged 18 to 79 (Age-standardised rate per 100,000 person years)



### Key finding 4

Looking at patients who had a diagnosis of hypertension as of 1<sup>st</sup> January 2023

The CVD mortality rate<sup>(5)</sup> for the most deprived quintile was

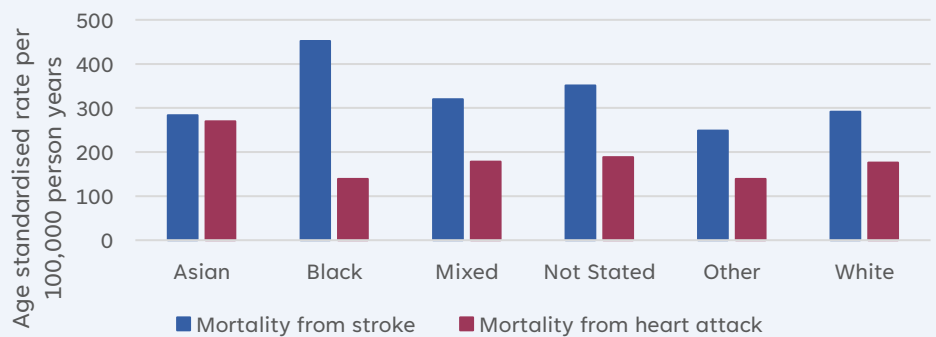
**2 TIMES HIGHER**

when compared to CVD mortality rate for the least deprived quintile

### Key finding 9

Looking at patients with CVD, mortality from stroke<sup>(5)</sup> was highest in the black ethnic group and mortality from heart attack<sup>(5)</sup> was highest in the Asian ethnic group

Mortality from stroke/heart attack among patients with CVD by ethnicity



(1) [NHS priorities and operational planning guidance 2023/24](#)  
(2) [Public Health England, 2019](#)  
(3) Threshold refers to the 2023/24 QOF threshold of non-HDL cholesterol less than 2.5mmol/l or LDL-cholesterol less than 1.8mmol/l.  
(4) Blood pressure over 160/100mmHg  
(5) Mortality rates calculated for people as per CVDPREVENT outcomes analysis. For more information, please read our [guidance](#).