

MEDICAL TECHNOLOGY - SAVING LIVES & MONEY

Patient attends GP appointment
Symptoms include blackouts & seizures.

CONVENTIONAL PATHWAY (NHS procurement focused solely on cost)

Misdiagnosis: Without access to diagnostic equipment the GP misdiagnoses Temporal Lobe Epilepsy leaving potentially fatal condition undetected. Studies show this occurs in the region of 30% of cases in the UK.

IMPACT ON PATIENT

Untreated cardiac causes of Vasovagal Syncope are associated with a mortality of 50.5%, despite the fact that it is often treatable with early diagnosis. Without the right diagnostic technology in place the patient consequently is:

- Denied potentially life-saving treatment, such as a pacemaker or defibrillator;
- Commenced on potentially harmful anticonvulsant therapy;
- Symptom recurrence may lead to more expensive but still incorrect drugs being employed (with high cost to both the patient and the hospital budget).

IMPACT ON NHS

- Hours of NHS time & resources wasted & misused;
- Around 47% of syncopes are infrequent and remain unexplained using conventional tests;
- Services can be fragmented or duplicated, with no standardised diagnostic pathway and;
- This is a major reason why less than half of patient pathways are completed in 18 weeks.

IMPACT ON TREASURY

- Annual cost of epilepsy misdiagnosis in England is estimated at around £189 million a year taking into account unnecessary treatment costs, lost working days and payments of the Disability Living Allowance, which itself totals £55 million a year;
- Misdiagnosis of epilepsy is believed to cost the NHS at least £250m in primary care, hospital care & drugs.

NEW AND BETTER PATHWAY (NHS procurement focused on cost & effectiveness)

Correct Diagnosis: Using diagnostic technology at a rapid access multi-disciplinary clinic, Vasovagal Syncope, a potentially fatal cardiac condition is detected.

IMPACT ON PATIENT

Overall, a shorter wait for treatment and resolution of symptoms. The patient receives a pacemaker and is able to live a normal life meaning less social burden for the tax payer. The patient benefits from:

- A reduced risk of misdiagnosis, unnecessary treatment, and sudden cardiac death;
- More likely to receive the treatment within NHS 18 weeks Patient Pathway target;
- Studies showed that Implantable Loop Recorder (ILR) directed therapy resulted in a 92% reduction in syncope burden and an 80% reduction in the one year recurrence rate.

IMPACT ON NHS

- Reduced waiting lists and times for appointments means improved performance towards 18 Week Patient Pathway target and against the health gain targets of extended life expectancy and reduced mortality;
- Compliance with national standards on clinical and cost effectiveness and positive impact on staff morale;
- NHS has more time and resources to offer other patients.

IMPACT ON TREASURY

- Treasury funds are spent efficiently;
- ILRs cost less per diagnosis than conventional testing;
- Delivers savings against ongoing investigations and possibly overall hospitalisation costs;
- Reduces the cost of unnecessary treatment and the cost of treatment of older people for falls.

WE NEED AN NHS PROCUREMENT POLICY WHICH TAKES INTO ACCOUNT NOT JUST COST BUT VALUE AND EFFECTIVENESS TOO

The NHS needs to invest in up to date medical technology which will then ensure:

- Patients receive correct definitive diagnosis early;
- NHS time and resources are not wasted.

