

New heart disease risk score outperforms existing test

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An independent external validation of QRISK -- a new score for predicting a person's risk of heart disease — has shown that it performs better than the existing test and should be recommended for use in the United Kingdom by the National Institute for Health and Clinical Excellence (NICE).

The University of Nottingham and leading healthcare systems supplier EMIS worked together, through the not-for-profit partnership QResearch, to develop the ground-breaking formula which has been strongly endorsed in new research published in the [British Medical Journal](#).

Researchers from the University of Oxford have recommended its widespread use across the UK in place of the more commonly-used Framingham equation.

Professor Julia Hippisley-Cox of The University of Nottingham's Division of Primary Care, said: "We are delighted to receive another strong endorsement of the value of QRISK in assessing the risk of [heart disease](#) in the UK population. We believe this formula has the potential to save many thousands of lives, by helping clinicians to more accurately predict those at risk of developing cardiovascular disease — the nation's biggest killer. It will arm doctors with all the information they need to decide how best to target patients with preventative measures such as lifestyle advice and cholesterol-lowering treatments."

Soon every patient's record will contain an automatically calculated heart risk score allowing GPs to identify and target those at greatest risk.

NICE currently recommends that doctors use a modified version of the long established Framingham score to identify who should be offered statin treatment to reduce their risk of heart disease over the next 10 years.

However, in 2007, the BMJ published research showing that the new QRISK® score was a more accurate measure of how many UK adults are at risk of developing heart disease and which adults are most likely to benefit from treatment compared with the Framingham model. Now, two independent experts have compared the performance of the two scores for predicting the 10 year cardiovascular disease risk in over one million UK patients.

They tracked the progress of 1.07 million patients registered at 274 general practices in England and Wales for up to 12 years after first diagnosis of [cardiovascular disease](#). All participants were aged between 35 and 74 at the start of the study.

The 56 per cent of GPs in the UK who use EMIS clinical records systems can already access the QRISK2 formula, which has been embedded in their systems.

EMIS Managing Director Sean Riddell said: "We are pleased to confirm that all EMIS GPs can now benefit from QRISK, and we would like to thank all those GPs who contributed anonymous patient data to support the development of this vital clinical tool."

Other clinical systems providers are able to access QRISK through a software development kit that has been designed to ensure the safe and accurate use of the formula. The QRISK software is also available for

further academic research and teaching and personal use.

QRISK can be found at www.qrisk.org

The QRISK research was undertaken using the QResearch anonymised primary care database at The University of Nottingham in collaboration with the University of Edinburgh, Bristol PCT and St Mary's School of Medicine and Dentistry, London.

Source: University of Nottingham ([news](#) : [web](#))

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