

Effective stroke drugs are saving the NHS millions

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Drugs prescribed to high-risk stroke patients are costing the NHS hundreds of millions each year—but they are so effective, the service is actually saving money.

Analysis of [stroke](#) data showed that the cost to NHS England of

prescribing direct oral anticoagulants (DOACs) increased by £733m from 2011 to 2017, but resulted in a substantial 11% reduction in stroke cases. This reduction in the number of strokes, and the related expenses, means the cost of treating a patient in the first year after a stroke has dropped by 25%.

Researchers from the Health Economics Unit and University of Leeds looked at the cost of treating strokes in 2011-2014 and compared it with that in 2014-2017, after DOACs were added to the recommended drugs for treating the most common type of strokes.

In the paper, published on World Stroke Day in *Heart Journal* the researchers found that prescribing [costs](#) for [atrial fibrillation](#) (AF) had risen £149 per year per patient—but due to their effectiveness in preventing strokes, care costs, included stroke aftercare, fell by £289 per patient.

The drugs were prescribed to patients with AF, a common condition affecting around 2% of the population.

Patients with AF are five times more likely to suffer a stroke. The condition is believed to cause around a third of the most common type of stroke—*ischaemic stroke*—and to increase the severity.

The cost of prescribing DOACs is estimated at 5% of the overall [drug](#) budget in England, but studies have shown they are cost-effective and should be made available to patients, particularly as AF becomes more prevalent in the [ageing population](#).

Chris Gale, Professor of Cardiovascular Medicine, Consultant Cardiologist and co-author from the University of Leeds, said: "Despite an increase in the use of DOACs for the prevention of stroke in people with AF, there remain notable gaps in the use of these drugs. This is

important because these drugs reduced the risk of stroke.

"But DOACS are expensive, and their costs may be a barrier to their use in the NHS.

"We found that the total costs of oral anticoagulant between 2014 and 2017 was huge, but because they were associated with a reduction in stroke, there was a per-patient saving to the NHS."

Andi Orlowski from the Health Economics Unit, an NHS analytics organisation, said: "Across the study period there was nearly a doubling of the number of people being treated with oral anticoagulant, primarily driven by DOAC. This amazing increase in the numbers receiving treatment reduced stroke by 11% and understandably came with a significant budget impact. We must remember that all oral anticoagulants are cost effective and the cost per person treated, when taking in to account the costs associated with managing stroke, reduced by nearly £290 a head.

"There is still work to do to ensure everyone at risk of an AF related stroke who wants an OAC receives one but this study shows the huge improvement the NHS has made in the last few years."

More information: *Heart* (2020). [DOI: 10.1136/heartjnl-2020-317006](https://doi.org/10.1136/heartjnl-2020-317006)

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