

Our Doctor Writes

March 2009

For those of you who are picking up from where I left off last month I promised that I would tell you more about how our local practices are working together to deliver a new service for heart failure in our locality. If you didn't read last month's article: no problem, read on.

Heart failure is a term that has made me cringe for the whole of my professional career. It means one thing to doctors and something completely different to everyone else. For doctors it conveys an immediate message that the heart is struggling to function exactly as it was designed to do. It means that the filling pressure of the heart may rise a little and that the heart rate will have to rise because of this. There are many other effects and many, many causes. To a non doctor the term just tends to be just frightening and that's why it has always made me cringe. Traditionally the diagnosis is only made when a patient visits a doctor with symptoms that are caused by the heart being inefficient. Typically these are being short of breath, not being able to sleep flat at night or having swollen ankles. The problem with this is that, as doctors, we can make a much bigger difference to people's quality of life and life expectancy if we pick this up early.

Our local practices are, as far as I can tell, the first in the country to introduce an innovative screening programme to look for early heart failure in vulnerable patients. Recently innovative technology has been developed and perfected to enable immediate near patient testing of important markers in the blood of patients. One such marker is called pro-BNP. We will be testing for this and then arranging for patients with raised levels to have a heart scan. We have managed to commission this to be delivered at Savernake Hospital.

I'm thrilled that our local practices are working together to deliver this cutting edge initiative to our patients. I think you should be as well.

This week, as I write, the new national stroke programme has been launched. In short this aims to deliver high quality interventional care to patients with strokes in the same time frame that we have come to expect for heart attacks. The latest evidence is that the faster a stroke patient begins their treatment the better they are likely to do. Your part in this is to be aware of the symptoms and dial 999. Typically a stroke causes localised problems with the nervous system. Often this presents with one side of the face becoming weak, speech being suddenly slurred or the loss in power of an arm or leg. There are other presentations but these are probably the easiest to spot and to react to.

The take home message for stroke is that if you think this might be happening don't delay ask for urgent help.

Best Wishes,

Dr Tim Ballard