

Key Recommendations

Heart Valve Disease in Scotland

- The exclusion of specific actions aimed at tackling heart valve disease in the Scottish Heart Disease Action Plan should be recognised, with a conscious effort from the Scottish Government and others to equally prioritise combating this disease along with other serious heart conditions.
- More standardised data needs to be collected on heart valve disease in Scotland to ensure there is a clearer picture of how the condition is currently being diagnosed, managed and treated. For example, statistics on heart valve disease referrals and echocardiograms should be included more specifically in the Scottish Heart Disease Statistics.
- The Scottish Government should build on the commitments in the new Women's Health Plan to improve information and public awareness of heart disease symptoms and risks for women, by ensuring there is a specific focus on heart valve disease.

COVID-19 recovery

- As the National Heart Disease Task Force works to support Health Boards to implement the Heart Disease Action Plan, it should consider how effective recovery from the COVID-19 pandemic can be expedited.

Detection

- The Scottish Government should urgently seek to review services in Scotland that offer heart valve disease services, to identify areas of expertise and construct an optimal patient pathway.
- Awareness of the signs and symptoms of heart valve disease amongst primary care healthcare professionals and the public must be improved through effective and targeted education and awareness-raising campaigns.
- All individuals over the age of 65 should have their hearts routinely checked with a stethoscope by a trained primary care healthcare professional.
- All patients with heart murmurs detected should be referred within appropriate timelines or echocardiography to assess the severity of the valve pathology. With the increased use of telemedicine and virtual appointments, there is a need to be mindful of the impact this may have in incidental or opportunistic detection / diagnosis.

Diagnosis

- The target waiting time for echocardiography should be reduced to six weeks, in line with recommended European standards and in symptomatic patients, the target should be lowered to two to three weeks.
- The current variation in access to echocardiography across Scotland needs to be addressed as a matter of urgency.

Treatment

- Heart valve disease patients must have access to appropriate and effective treatments. Specifically:
 - A multidisciplinary approach should be taken to ensure patients have a more informed choice of how best their disease can be managed.
 - There needs to be recognition of variation in access to treatment centres, particularly for those living in the Highlands.
- The Scottish Government should commit to filling the data gap created by the NICOR withdrawal and ensure heart valve disease data for TAVI procedures is collated.
- The Scottish Government should ensure that in consideration of any expansion of CVD waiting time targets, the needs of heart valve disease patients are also taken into account.