NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE

**NICE INDICATOR DEVELOPMENT PROGRAMME**

**Resource impact statement: NM173**

**Date:** August 2019

# Indicator

NM173: The percentage of patients with a current diagnosis of heart failure due to left ventricular systolic dysfunction, who are currently treated with a beta-blocker licensed for heart failure.

# Introduction

There is good evidence ([NICE NG106, Chronic heart failure in adults: diagnosis and management](https://www.nice.org.uk/guidance/ng106)) that prescribing ACE-I/ARB as well as beta-blockers for heart failure with reduced ejection fraction below 40%, can improve symptoms, reduce hospitalisation rate and improve survival.

This indicator focuses on beta-blockers only to ensure the denominator size is large enough at practice level to not be subject to random variation in achievement.

# Resource impact

The change to the existing indicator removes the need to include people who are currently treated with an ACE-I or ARB in the denominator. This changes the denominator to be people with a current diagnosis of heart failure due to left ventricular systolic dysfunction.

The overall resource impact of the proposed indicator is therefore unlikely to be significant.