



Myocardial infarction: medication for MI more than 12 months ago

NICE indicator

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www.nice.org.uk/indicators/ind126

Indicator

The percentage of patients with a history of myocardial infarction (more than 12 months ago) who are currently being treated with an ACE-I (or ARB if ACE-I intolerant), aspirin (or clopidogrel, or anticoagulant drug therapy) and a statin, and a beta-blocker for those patients with left ventricular systolic dysfunction.

Indicator type

General practice indicator suitable for use in the Quality and Outcomes Framework.

This document does not represent formal NICE guidance. For a full list of NICE indicators, see our menu of indicators.

To find out how to use indicators and how we develop them, see our <u>NICE indicator</u> process guide.

Rationale

This indicator aims to reduce associated morbidity and mortality in people who have had a myocardial infarction (MI). The NICE guideline on acute coronary syndromes recommends that all people who have had an acute MI more than 12 months ago should be offered the following drug therapy for secondary prevention of cardiovascular disease:

- angiotensin-converting enzyme inhibitor (ACE-I)
- aspirin (or clopidogrel, or anticoagulant therapy)
- statin.

The guideline recommends additional treatment with a beta-blocker if the patient has heart failure and left ventricular ejection fraction. The indicator refers to left ventricular systolic dysfunction (LVSD) rather than reduced ejection fraction because it is the term historically used in GP practice. However, it is recommended for the ejection fraction to be recorded and for the ACE inhibitor or ARB to be prescribed to patients with reduced ejection fraction below 40% in line with the guideline.

Source guidance

Acute coronary syndromes. NICE guideline NG185 (2020), recommendations 1.4.9, 1.4.10, 1.4.12, 1.4.29 and 1.4.39

Specification

Numerator: The number of patients in the denominator who are currently being treated with the following:

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- ACE-I (or ARB if there is a record of ACE-I intolerance)
- aspirin (or clopidogrel if there is a record of aspirin intolerance, or an anticoagulant therapy)
- beta-blocker (if there is a record of left ventricular systolic dysfunction)
- statin.

Denominator: The number of patients with a record of a myocardial infarction more than 12 months ago.

Calculation: Numerator divided by the denominator, multiplied by 100.

Exclusions: None.

Minimum population: The indicator would be appropriate to assess performance at individual general practice level.

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