



Diabetes: statins for primary prevention of CVD (40 years and over)

NICE indicator

Published: 17 October 2018

Last updated: 5 June 2023

www.nice.org.uk/indicators/ind183

Indicator

The percentage of patients with diabetes aged 40 years and over, with no history of cardiovascular disease and without moderate or severe frailty, who are currently treated with a statin (excluding patients with type 2 diabetes and a cardiovascular disease risk score of less than 10% recorded in the preceding 3 years).

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 [NICE indicator process guide](#).

Rationale

This indicator aims to reduce cardiovascular risk and prevent future cardiovascular events. Management of diabetes regardless of co-morbidities may inadvertently lead to both under-treatment and overtreatment. People with diabetes and less complex care needs may be undertreated, whilst people with more complex care needs may be at risk of overtreatment.

A focus on primary prevention of cardiovascular disease in people with diabetes without moderate or severe frailty aims to reduce under-treatment and support better control of biomedical targets through individualised, patient-centred care.

Source guidance

[Cardiovascular disease: risk assessment and reduction, including lipid modification. NICE guideline NG238 \(2023\)](#), recommendations 1.6.7, 1.6.10 and 1.6.12

Specification

Numerator: The number of patients in the denominator who are currently treated with a statin.

Denominator: The number of patients with diabetes aged 40 years and over, with no history of cardiovascular disease and without moderate or severe frailty (excluding patients with type 2 diabetes and a cardiovascular disease risk score of <10% recorded in the preceding 3 years).

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

Definitions: Cardiovascular disease is defined as angina, previous myocardial infarction, revascularisation, stroke or TIA or symptomatic peripheral arterial disease.

Exclusions: Patients who have any of the following diagnoses:

- familial hypercholesterolemia
- unresolved chronic kidney disease (CKD) 3 to 5 not superseded by a chronic kidney disease (CKD) 1 to 2 diagnosis.

Personalised care adjustments or exception reporting should be considered to account for situations where the patient declines, does not attend or if treatment with a statin is not appropriate.

Expected population size: QOF data for indicator DM022 for 2022 to 2023 shows that 3.2% of people in England have a diagnosis of diabetes and are aged 40 years and over, with no history of cardiovascular disease and without moderate or severe frailty (excluding patients with type 2 diabetes and a cardiovascular disease risk score of <10% recorded in the preceding 3 years): 317 patients for an average practice with 10,000 patients. To be suitable for use in QOF, there should be more than 20 patients eligible for inclusion in the denominator, per average practice with 10,000 patients, prior to application of personalised care adjustments.

Update information

Minor changes since publication

April 2024: We updated links to source guidance and added expected population size.

ISBN: 978-1-4731-5978-5