



Atrial fibrillation: admission rates (stroke, on anticoagulation)

NICE indicator

Published: 27 July 2016

Last updated: 24 September 2020

www.nice.org.uk/indicators/ind38

Indicator

The proportion of patients admitted to hospital for stroke with a pre-existing diagnosis of atrial fibrillation, who were on anticoagulation.

Indicator type

Network / system level indicator.

The indicator would be appropriate to understand and report on the performance of networks or systems of providers.

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

Atrial fibrillation is a major risk factor for stroke, and when strokes occur in association with atrial fibrillation levels of mortality, morbidity and disability increase. Management of atrial fibrillation can prevent or reduce the number that lead to strokes. This indicator alongside [NICE's indicator on atrial fibrillation: admission rates \(stroke, not on anticoagulation\)](#) aims to measure the percentage of people with atrial fibrillation who are receiving effective treatment for prevention of stroke.

Source guidance

[Atrial fibrillation: management. NICE guideline CG180 \(2014\)](#)

Specification

Numerator: The number of patients in the denominator on anticoagulation before admission.

Denominator: The number of patients admitted to hospital with a primary diagnosis of stroke, who had a pre-existing diagnosis of atrial fibrillation.

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

Exclusions: None.

Data source: [Sentinel Stroke National Audit Programme \(SSNAP\)](#).

Minimum population: The indicator would be appropriate to assess the performance of networks or systems of providers.

ISBN: 978-1-4731-5575-6