

The Fib & Fit program: prehabilitation to improve AF outcomes

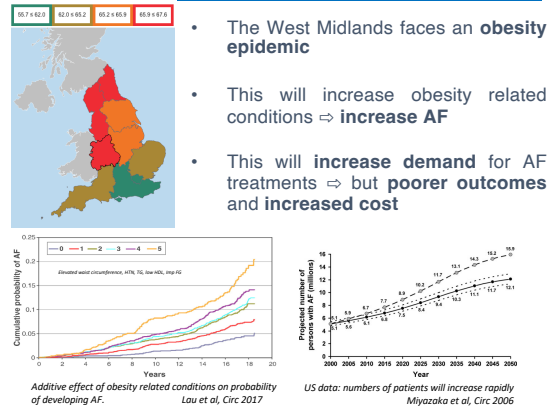
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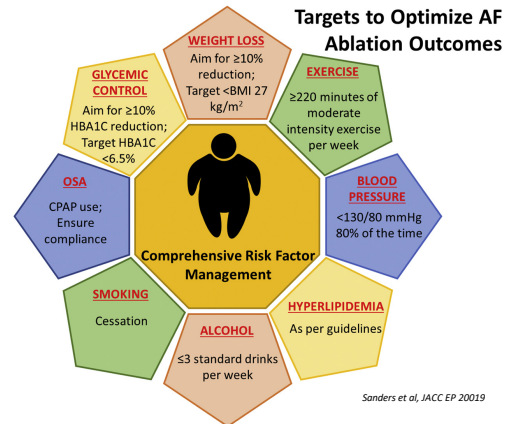
ABSTRACT

- Atrial fibrillation is the **most common** heart rhythm condition in the UK
- AF prevalence is **rapidly increasing** due to accumulation of upstream risk factors
- Risk factor modification** programs improve AF treatment outcomes ⇒ but are not standard of care
- They will also reduce other major cardiac events
- A holistic, **AF prehab** treatment model would deliver these benefits
- Aligns to **new models of care: GIRFT**

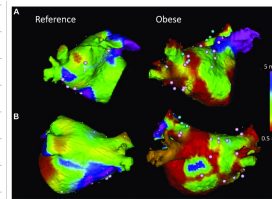
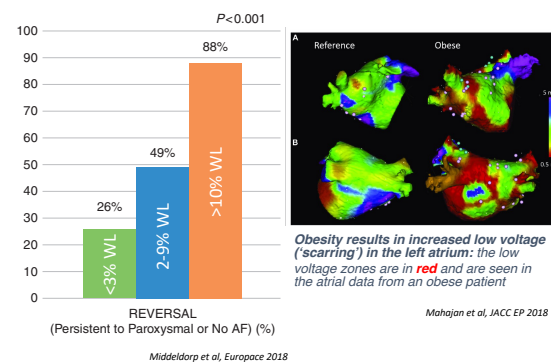
The Scope of the Problem



Prehab can achieve huge gains

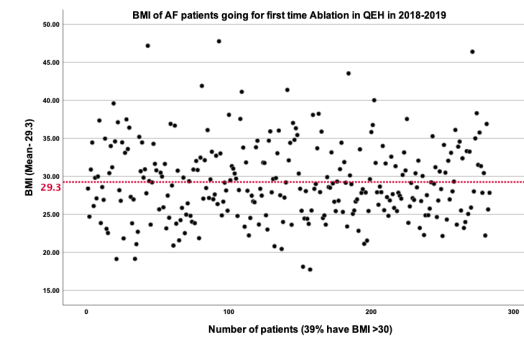


- Targets for risk factor treatment have been defined by **randomized trials**
- This optimization journey can begin at the time of referral



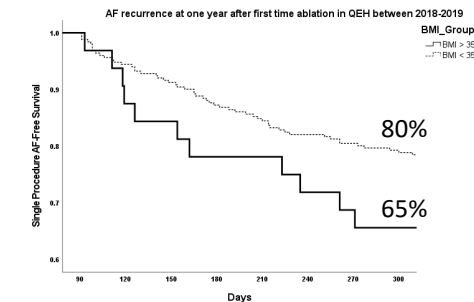
- Risk factor modification and **weight loss** specifically can improve or resolve symptoms
- The mechanisms that underpin this effect remain the subject of exciting research

Do we actually need this program?



Audit of 1st time AF ablation undertaken to assess unmet need (1408 cases ⇒ 546 AF ablation ⇒ 285 1st time cases)

Approximately **40%** have BMI>30 at time of 1st ablation

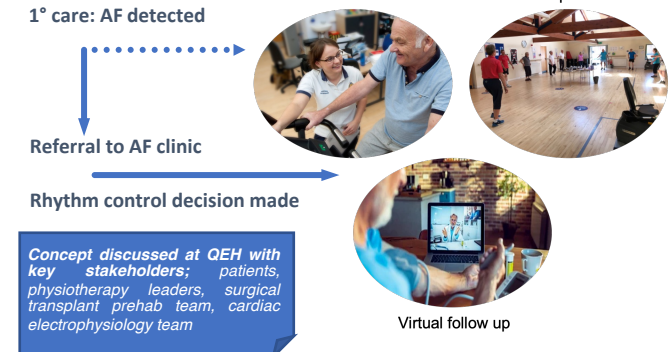


High BMI results in significant reduction in success at 1 year

References

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- Middelorp et al. Prevention and regressive effect of weight-loss and risk factor modification on atrial fibrillation: the REVERSE-AF study. *Europace*, 2018; 20(12): 1929-1935
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The concept and progress



Business case development

Key members of prehab team and costs identified

- Band 7 physiotherapist 1.0 WTE with cover: £54,623
- Band 3 physiotherapy assistant 0.5 WTE: £12,114
- Band 6 dietician 0.5 WTE: £16,178
- Cost per patient (50 patients): £1658
- NHS tariff for ablation: £5500 (2 procedures on average for persistent AF, therefore £11,000)
- Does not factor **additional gains** with other obesity related conditions