

Dear all,

This year's annual public health report is on stroke. Many of you will have a family member or friend who has experienced a stroke, and will have seen at first hand the impact that stroke can have.

While recent reductions in the number of people dying early from stroke in Haringey are to be welcomed, there are still higher numbers of people having strokes and higher death rates from stroke in Haringey than the London and England average.

The good news is that many strokes can be prevented from happening in the first place and this report demonstrates the wide variety of work currently taking place in Haringey to prevent future strokes.

For example, we want people in Haringey to know their blood pressure and how to control it, so we are working with local voluntary and community sector organisations to train them to carry out over 5,000 blood pressure checks in community based locations over the next 2 years.

Our local GP practices have been carrying out over 10,000 additional blood pressure checks and pulse checks each year which has helped us to identify more than 1,500 extra people with high blood pressure and more than 500 people with atrial fibrillation, two of the most important risk factors for stroke.



We are also working with partners such as businesses and schools to make Haringey a healthier place to live, study and work, so that it is easier for people to be physically active and eat a healthy diet in order to help stay free from cardiovascular diseases like stroke.

For those people who have suffered a stroke we will continue to focus on providing high quality rehabilitation and support to help them stay as independent as possible.

As a recognition of the joint commitment to preventing strokes across health and social care in Haringey, you will notice that this year's annual public health report has been co-signed by Haringey Clinical Commissioning Group's Chief Operating Officer and Haringey Council's Director of Adult Social Services.

Recommendations

1. For Haringey CCG and other local NHS organisations to continue to prioritise stroke prevention by further improving the identification and treatment of people with high blood pressure and atrial fibrillation.
2. For the NHS, local public health teams and voluntary and community sector organisations to work with residents to support them to know their blood pressure, how to take it, and how to manage it themselves.
3. For public, private and third sector organisations to work together to create a healthy Haringey where it's easy to be active, eat well and stay smoke free.
4. For Haringey Council and Haringey CCG to continue to work together to support people living with stroke and their carers to be as independent as possible.

We would like to hear your thoughts and ideas about how we can work together to prevent strokes in Haringey. Please contact Jeanelle.degruchy@haringey.gov.uk.

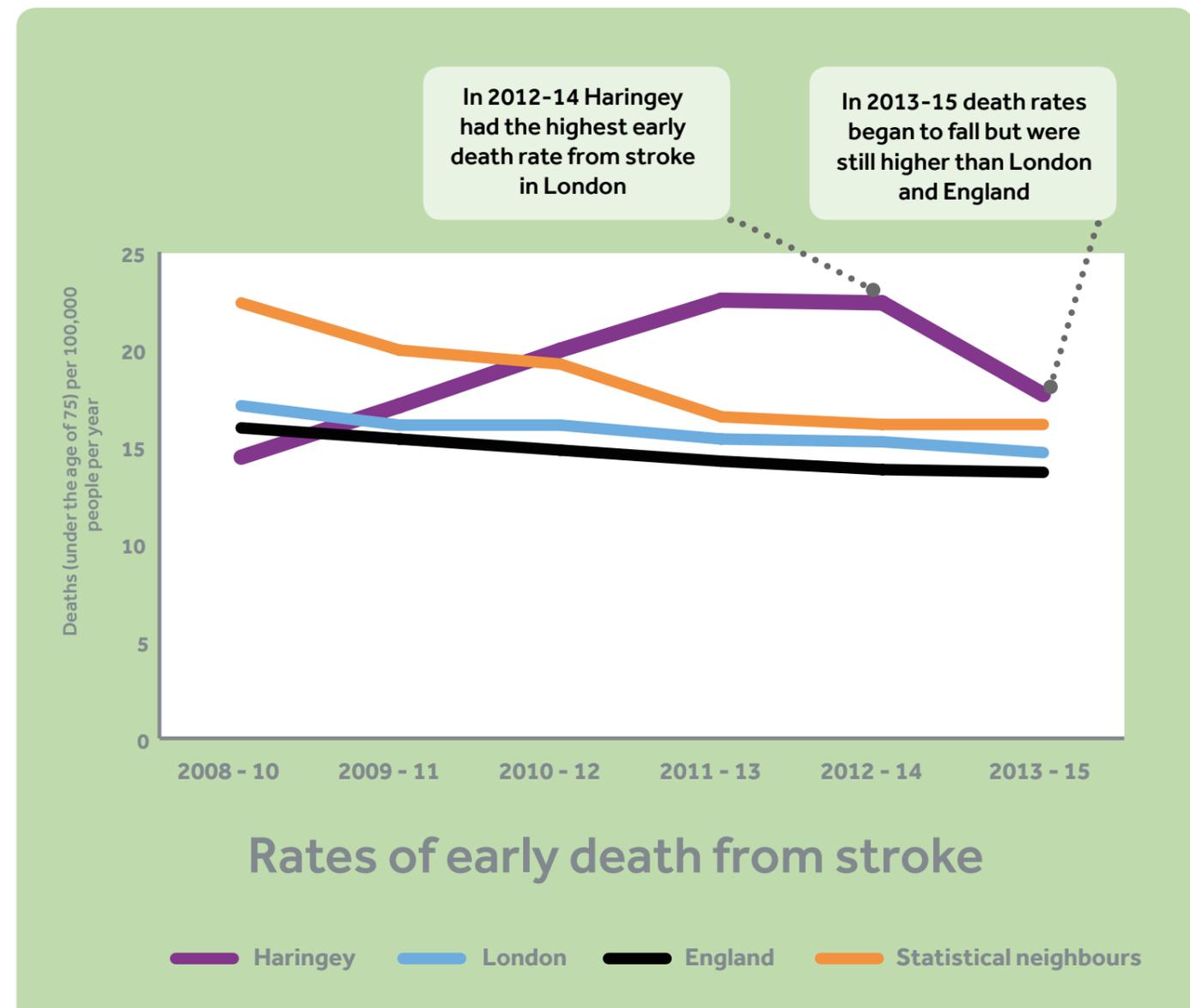
Dr Jeanelle de Gruchy, Director of Public Health, Haringey Council

Beverley Tarka, Director of Adult Social Services, Haringey Council

Tony Hoolaghan, Chief Operating Officer, Haringey and Islington Clinical Commissioning Group

Haringey's Annual Public Health Report 2017/18

Stopping strokes for longer, healthier lives



Source: Public Health England Cardiovascular Disease Profiles (2017)

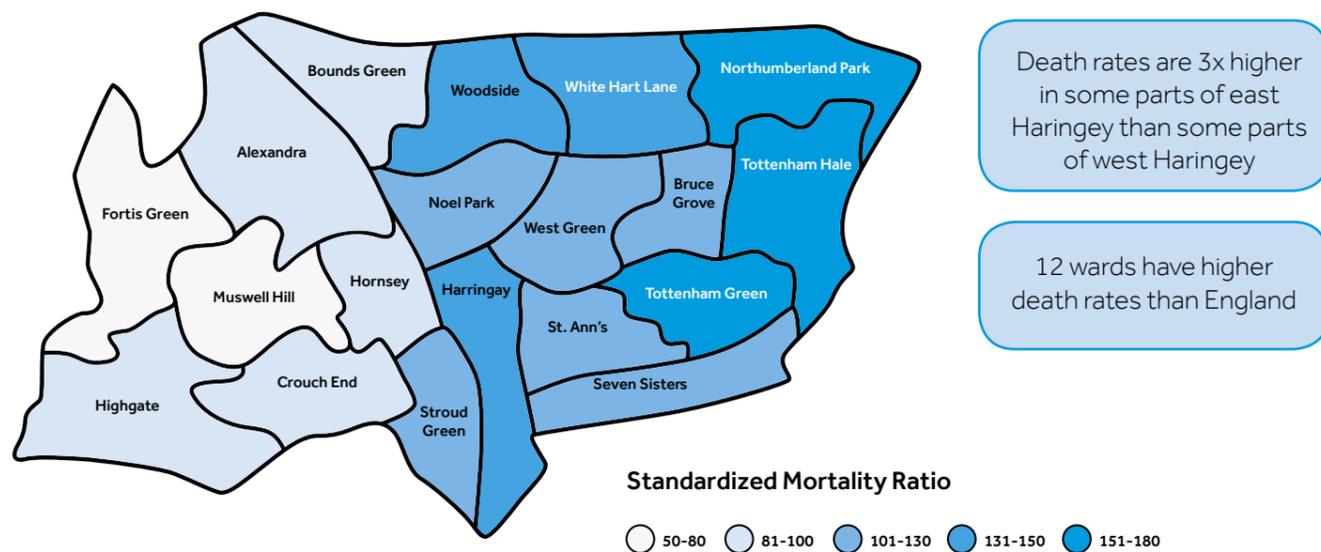
Why does stroke matter in Haringey?

Each year in Haringey more than 400 people have a stroke, and each stroke will have a significant impact on that individual and their family.

Until recently, Haringey had the highest rate of early death from stroke – defined as people dying from stroke under the age of 75 – of any London borough. We have recently seen a fall in the rate of early death from stroke in Haringey. This is good news, and is likely to be linked to lower smoking rates and local work on other risk factors for stroke.

The overall number of strokes and death rates from stroke still remain higher than comparable areas and, as with many other health conditions in Haringey, we see clear inequalities in how stroke impacts our communities. For example: men are more likely to die young from stroke than women, some ethnic groups such as Black African people are at increased risk of stroke and people living in the poorest parts of Haringey are at greater risk of dying young from cardiovascular diseases such as stroke than people living in the most affluent parts of the borough.

Inequalities in early deaths from stroke and other cardiovascular diseases across Haringey



What is stroke?

- A stroke is a serious, life-threatening medical condition that occurs when the blood supply to part of the brain is affected
- Risk factors for stroke include high blood pressure, smoking, excess alcohol, physical inactivity and atrial fibrillation (which is a kind of irregular pulse rhythm)
- 1 in 8 people who have a stroke die within 30 days of the stroke
- Half of all people who survive stroke have long-term disabilities that affect their ability to live and work independently, including problems with movement, vision, memory and speech
- A mini-stroke is where people experience symptoms of a stroke that resolve within 24 hours. A mini-stroke is also known as a TIA or transient ischaemic attack

Working together to prevent strokes in Haringey

Stroke is the biggest cause of physical disability in adults; over a third of people surviving stroke need the help of others to carry out daily tasks like washing themselves and getting around the house. Some people with stroke require many years of residential or nursing care and the average cost of providing health and care services for someone with a stroke is over £40,000.

Strokes are not inevitable, and it is estimated that as many as 4 in 5 strokes are

preventable through action on the main risk factors: high blood pressure, smoking, atrial fibrillation, excess alcohol, physical inactivity and unhealthy diet.

Haringey Council and Haringey Clinical Commissioning Group are working in partnership with a number of organisations across Haringey taking action to prevent strokes. Some of the things we are doing locally are highlighted in the prevention pyramid below.

Prevention Pyramid: Haringey's Whole System Response to Stroke

