

# Live Well

## Diabetes and Other Long-Term Conditions, including Cardiovascular Disease (CVD)

### Introduction

#### Long term conditions

Long-term conditions or chronic diseases are conditions for which there is currently no cure, and which are managed with drugs and other treatment, for example: diabetes, cardiovascular disease, and hypertension<sup>1</sup>.

Diabetes mellitus is a common chronic disease that significantly affects the health of many people. It may lead to a range of complications<sup>2</sup> which can cause disability and reduce quality of life as well as the life expectancy. Diabetes constitutes a significant health and social burden in the community. There are two types of diabetes, type 1 & 2. Type 1 diabetes is a genetic condition that often shows up early in life, and type 2 although can be genetically inherited is mainly lifestyle-related and develops over time<sup>3,4</sup>.

Vascular or cardiovascular diseases (CVDs) are a group of disorders of the heart and blood vessels<sup>5</sup> CVD includes all heart and circulatory diseases, including coronary heart disease, angina, heart attack, peripheral vascular disease, congenital heart disease, hypertension, stroke, and vascular dementia<sup>6</sup>. It's usually associated with a build-up of fatty deposits inside the arteries (atherosclerosis) and an increased risk of blood clots. It can also be associated with damage to arteries in organs such as the brain, heart, kidneys, and eyes<sup>7</sup>.

### Diabetes

Genetics play a strong role in the chances of developing both type 1 and type 2 diabetes. Other factors include environment and lifestyle<sup>8</sup> some of which include:

- Increase in age. People are more at risk if they are over 40, or over 25 for people from African-Caribbean, Black African, or South Asian ethnic minority groups.
- Ethnicity: people from South Asian descent and African-Caribbean or Black African descent are two to four times more likely to develop type 2 diabetes (and at an earlier age)<sup>9</sup>.
- High blood pressure
- Being overweight or obese<sup>10</sup>

### Cardiovascular disease

Hypertension is one of the most important risk factors for cardiovascular disease (CVD), which is the leading cause of mortality. Approximately 54% of strokes and 47% of coronary heart diseases, worldwide, are attributable to high blood pressure<sup>11</sup>. High cholesterol, tobacco use, diabetes, sex and age are also risk factors; CVD is most common in people over 50 and the risk of developing it increases as people age. Being overweight or obese increases the risk of developing diabetes and high blood pressure, both of which are risk

factors for CVD. Family history of CVD and people of south Asian and Black African or African Caribbean ethnic minority groups are also risk factors<sup>12</sup>. Topics covered in this subchapter are long-term health conditions including:

- Diabetes,
- Cardiovascular Disease and
- Hypertension

### Diabetes Prevalence

In Merton the prevalence of diabetes has been increasing yearly. In 2020, there were an estimated 4,102 people living with diabetes (type 1 & 2) in Merton aged 18 to 64. This is predicted to increase to 4,279 by 2040, where more men than women will have diabetes<sup>13</sup>. Currently (2020/21), the recorded prevalence of diabetes in Merton among people aged 17 and over is 6.4%, which is higher than Southwest London (5.7%) but lower compared to England (7.1%)<sup>14</sup>. The estimated total prevalence of diabetes (undiagnosed and diagnosed) was 8.4% for 2020 and is expected to rise to 9.3% in 2035 (Table 1 and Figure 1)<sup>15</sup>.

*Table 1: Estimated overall prevalence of people aged 16 years or older who have diabetes (diagnosed and undiagnosed) in Merton, 2015-2035. Source: National Cardiovascular Intelligence Network<sup>15</sup>.*

Year	2015	2016	2017	2018	2019	2020	2025	2030	2035
<b>Number</b>	13,324	13,578	13,745	13,935	14,205	14,501	15,708	17,063	18,360
<b>Prevalence</b>	8.1%	8.2%	8.2%	8.3%	8.3%	8.4%	8.7%	9.0%	9.3%

Figure 1: Recorded and estimated overall prevalence of people with diabetes in Merton.  
 Source: Quality Outcomes Framework (QOF), NHS Digital; National Cardiovascular Intelligence Network<sup>13,15</sup>.

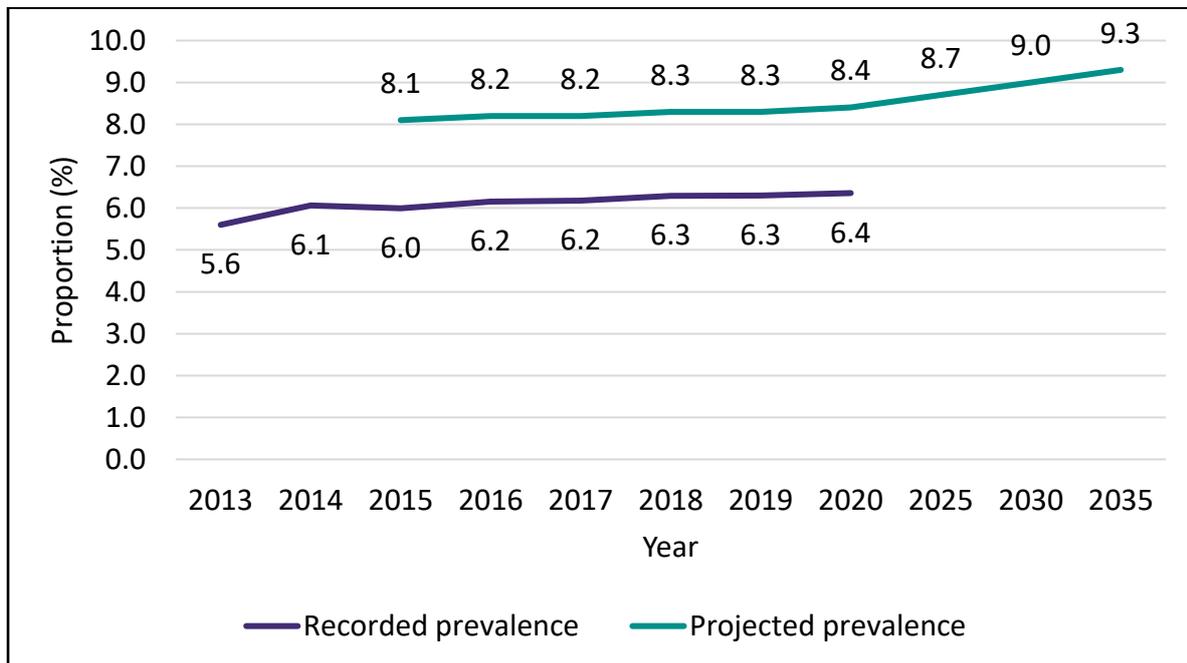
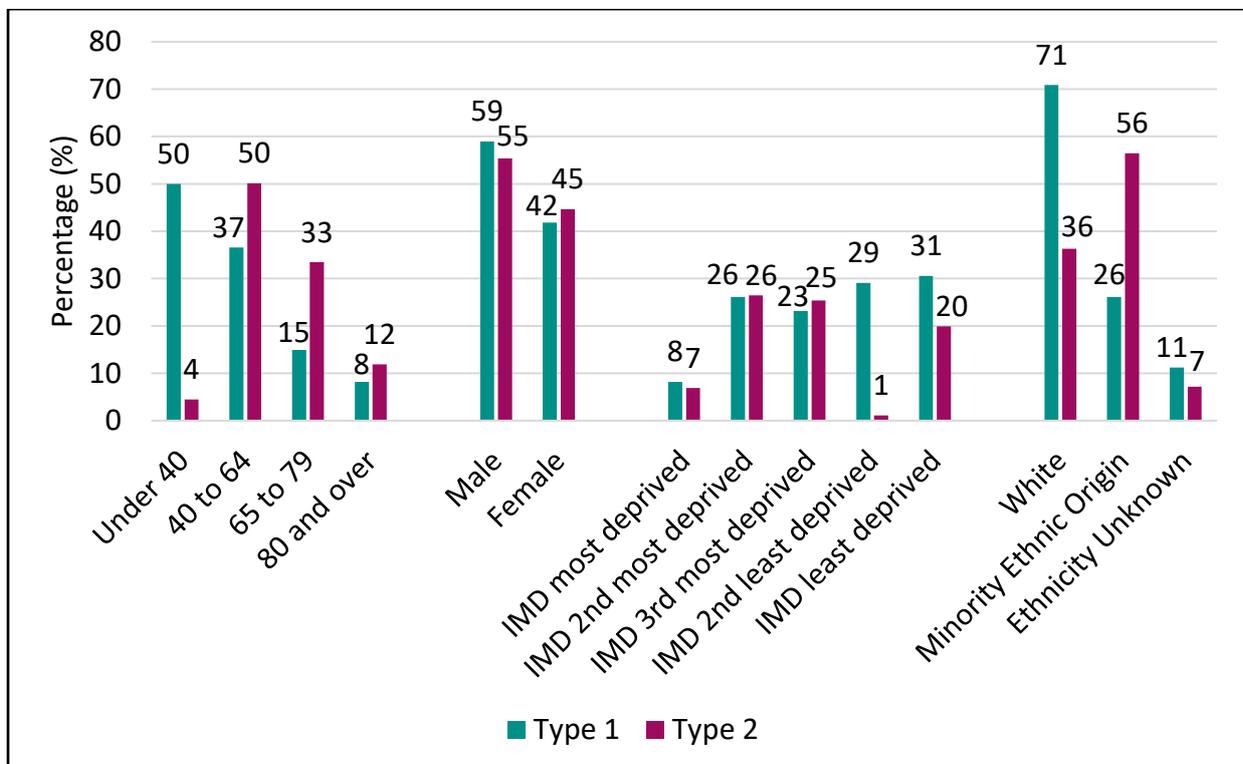


Figure 2: Demographic breakdown of people living with Type 1 and 2 diabetes in Merton, 2020/21. Source: National Diabetes Audit<sup>16</sup>.

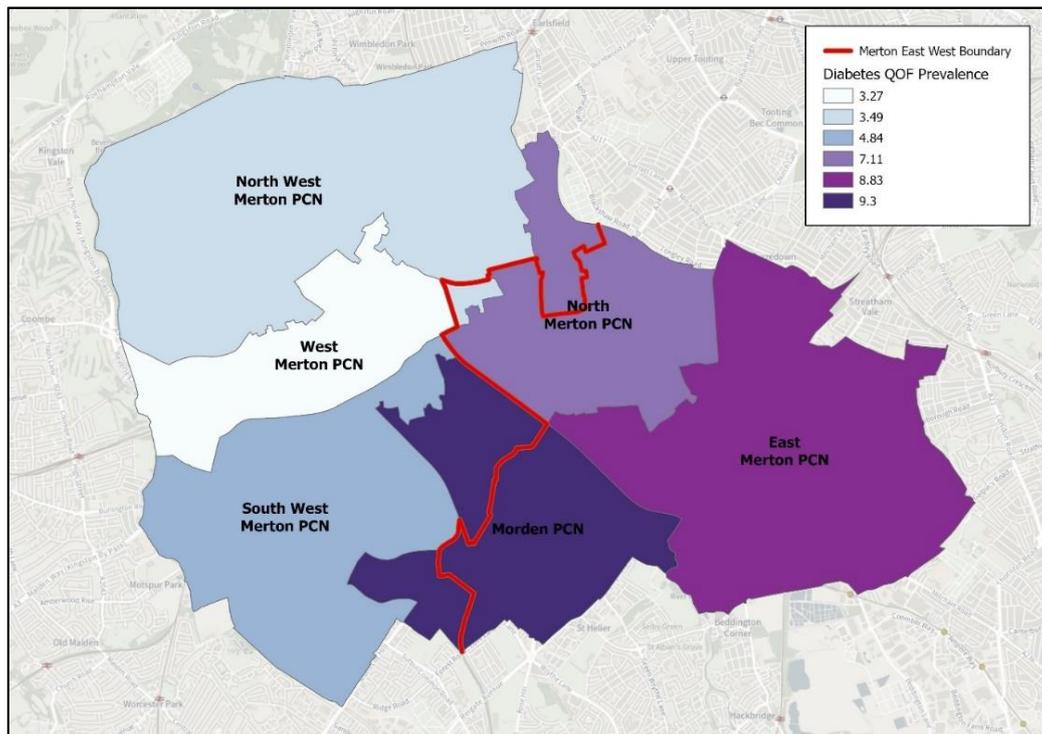


Both type 1 and type 2 diabetes are more common in males than females, accounting for 59% of people diagnosed with type 1 diabetes, and 55% of people diagnosed with type 2 diabetes (Figure 2). Type 1 and Type 2 varies with age, in general, children and young people are more likely to have Type 1 diabetes than Type 2 diabetes. People living in the most deprived quintiles are more likely to be diagnosed with type 2 diabetes, with 51% from the 2<sup>nd</sup> and 3<sup>rd</sup> most deprived quintiles. Around 60% of people diagnosed with type 1 diabetes are from the two least deprived quintiles. Around 71% of people diagnosed with type 1 diabetes are from a White ethnic group, 26% Minority Ethnic Origin. The opposite is seen with type 2 diabetes, where 56% of people diagnosed are from a minority ethnic origin, and 36% from white ethnic groups.

### Geographical differences in diabetes

Recorded diabetes prevalence is significantly higher in East Merton (8.4%) compared to West Merton (3.9%)<sup>17</sup>.

*Figure 3: Number of people with diabetes recorded on GP practice registers in as a proportion of the people (all ages) registered at each GP practice in 2020/21 in Merton's PCNs. Source: National General Practice Profiles, OHID; Quality Outcomes Framework (QOF), NHS Digital<sup>17</sup>.*



## Cardiovascular disease and hypertension

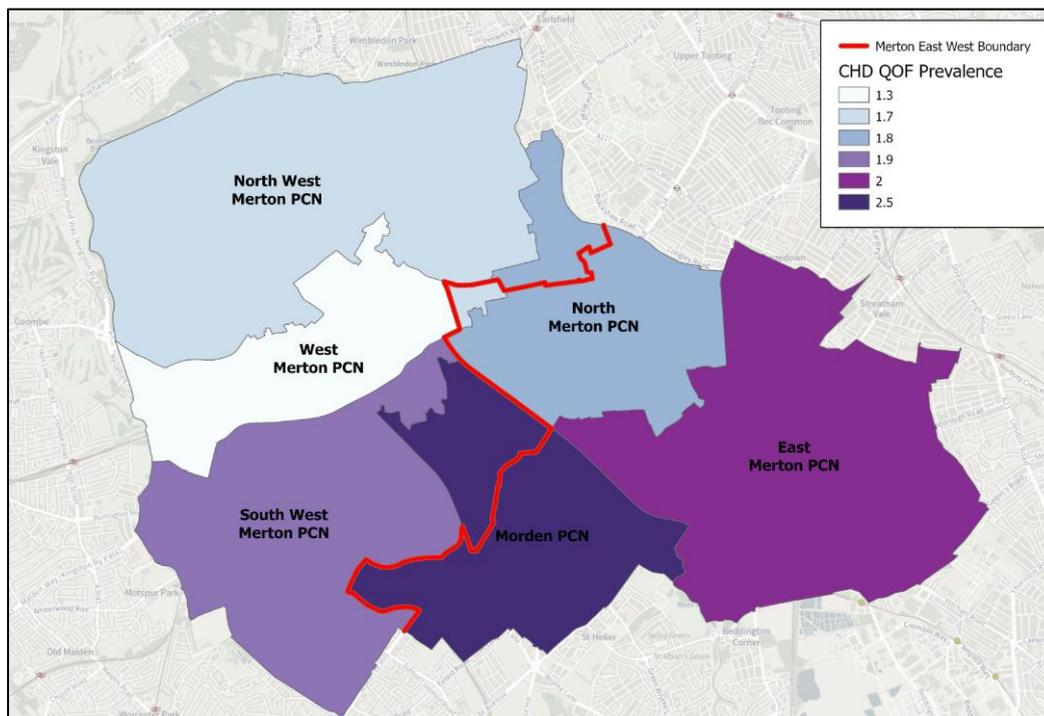
In 2020/21, it was estimated that 7% of Merton residents live with heart and circulatory disease (includes coronary heart disease, stroke, hypertension, heart failure, peripheral arterial disease, and atrial fibrillation)<sup>18</sup> which is lower than the England prevalence of 11%.<sup>19</sup> GP data indicates Merton's rates of diagnosed hypertension is 10.5%. This is lower than London's (10.8%) and England's (13.9%), and similar to Southwest London's value (10.5%). The trend in the number of people diagnosed has remained stable for Merton, a similar trend can be seen for London and England<sup>20</sup>. The diagnosed to expected ratio of hypertension across SWL in 2019/20 was 59%, which means that there are a large number of people in Merton with undiagnosed high blood pressure<sup>21</sup>.

In England, people living in most deprived areas are 4 times more likely to die prematurely from CVD compared to those living in least deprived areas<sup>22</sup>. Mortality rate from all CVD among under 75-year-olds for Merton was 53.2 per 100,000 in 2020, this is significantly lower than London's rate (72.3 per 100,000) and England's rate (73.8 per 100,000)<sup>23</sup>.

## Geographical Differences in Coronary Heart Disease

Similar trends to diabetes can be seen for cardiovascular disease, East Merton (2.1%) also has a significantly higher prevalence of recorded CHD compared to West Merton (1.7%), see Figure 4<sup>24</sup>.

*Figure 4: Number of people with coronary heart disease recorded on GP practice registers in as a proportion of the people (all ages) registered at each GP practice in 2020/21 in Merton's PCNs<sup>24</sup>.*



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