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New report shows valvular heart disease is rising rapidly

- A thorough physical examination of the cardiovascular system, including auscultation, should form part of an annual GP check-up for Australians over 65.
- Cardiovascular experts are issuing this plea today to help curb our nation's rising rates of undiagnosed valvular heart disease.
- The plea coincides with the release of a Baker Institute whitepaper today (16 August) revealing valvular heart disease is an emerging public health issue.
- The whitepaper, *'Our hidden ageing: time to listen to the heart'*, explains timely diagnosis is crucial to avoid a person presenting to an ED in crisis.

Monday, 16 August, 2021, MELBOURNE: Australian cardiovascular experts have revealed the number of people with valvular heart disease that could lead to serious complications is rising rapidly, particularly as the population ages.

A new whitepaper, titled *Our hidden ageing: time to listen to the heart*, developed by experts at the Baker Heart and Diabetes Institute, shows more than half a million Australians have valvular heart disease, including narrowing (stenosis) and leaking (regurgitation).

Perhaps more concerning, is that more than a quarter of a million Australians have faulty heart valves, and are at risk of serious complications, and don't know it. These complications include heart failure, stroke, blood clots, heart rhythm abnormalities, and even death.

The number of undiagnosed cases of valvular heart disease is projected to spiral in the ensuing three decades, to 336,000 cases in 2031, and 435,000 in 2051ⁱ, placing a heavy burden on our nation's healthcare system, ageing population, and economy.

Cardiologist, researcher and lead author of the whitepaper, Professor Tom Marwick says: "Ageing causes the blood vessels to progressively lose elasticity and become stiff, impacting the vascular structure and function. This arterial damage increases mechanical stress on the valves, which are also susceptible to the same threats.

"A heart murmur is often the first symptom of heart valve disease," Professor Marwick says.

"It is important to keep in mind that the common symptoms of heart valve disease — especially exercise intolerance — are often misattributed to 'old age'."

While there are four main causes of valvular heart disease, including a congenital defect; family history; and infection or inflammation; degenerative heart disease far exceeds the other causes.

Aortic valve disease is the most frequent cause of severe valvular heart disease. Its most common manifestation is aortic stenosis — a moderate-to-severe narrowing of the aortic valve. Cases of aortic stenosis are predicted to climb to 200,000 in 2031, and 266,000 in 2051, respectively.

Although serious, Professor Marwick says valvular heart disease is increasingly treatable.

Previously, people living with aortic stenosis had few options to replace their unhealthy aortic valve, including open heart surgery. These days however, aortic stenosis is the most treatable valve lesion due to the development of non-surgical valve replacement, such as transcatheter aortic valve implantation (TAVI). This is currently considered for people with severe and symptomatic aortic stenosis. However, untreated, moderate stenosis may also have an adverse impact. While trials are under way for these indications at present, economic modelling in the whitepaper showed that offering a TAVI for people aged 65 years and over could potentially prevent \$117 million in productivity loss in a single year due to withdrawal from productive activities.

Professor Marwick [together with other cardiovascular experts nation-wide] is calling on the Federal Government today to help address the nation's rising rate of undiagnosed valvular heart disease.

“We need increased awareness through marketing campaigns; strategies to upskill and support primary care; financial support for the use of emerging technologies; health service design, including improved access to echocardiography; funding to improve access and equity to interventions; and development of national heart valve disease guidelines,” he says.

“Heightened awareness and education is critical to ensuring older Australians are aware of this disease, and to adequately support GPs to identify people at risk, and provide appropriate treatment before they develop a major cardiovascular problem.”

Professor Marwick says performing a thorough physical examination of the cardiovascular system, including auscultation, should form part of an annual GP check-up for every Australian over 65 years of age.

“Any abnormalities should then be further examined via echocardiography — the test of choice for valvular heart disease.

“Doctors should also take advantage of innovations in detection, diagnosis and treatment of valvular heart disease. The use of the digital stethoscope and handheld ultrasound may vastly improve the detection of valvular heart disease in the community,” he says.

“We must all keep in mind that valvular heart disease can go unrecognised, undiagnosed, and untreated, and the complications can be devastating.”

- ENDS -

Key report findings

- There were 50–170% increases in the numbers of people, deaths and loss of disability adjusted life years from non-rheumatic aortic or mitral valve disease between 1990 and 2017 in Australia.
- There are 500,000–600,000 Australians currently living with heart valve disease (2021).

- An estimated 254,000 Australians are living with undiagnosed heart valve disease. This number will grow substantially to 336,000 in 2031, and to 435,000 in 2051.
- Aortic valve disease is the most frequent cause of severe valvular heart disease.
- Aortic stenosis is arguably the most treatable valve lesion due to the development of interventions, such as non-surgical valve replacement (i.e. Transcatheter Aortic Valve Implantation) interventions or TAVI.
- Early intervention in the form of TAVI for people aged 65 years and above could potentially prevent productivity losses of up to \$117 million in a single year.
- The common symptoms of heart valve disease — especially exercise intolerance — are often misattributed to ‘old age’. Timely diagnosis is based on awareness and clinical examination — especially a doctor listening to the heart sounds.
- Access to echocardiography is a vital component in managing valvular disease in the community.

Access the full report and support material at: baker.edu.au/valvedisease

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About Baker Heart and Diabetes Institute

Baker Heart and Diabetes Institute is an independent, internationally renowned medical research facility, with a history spanning 95 years. The Institute’s work extends from the laboratory, to wide-scale community studies with a focus on the diagnosis, prevention and treatment of cardiovascular disease, diabetes and their complications. www.baker.edu.au

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ⁱ Baker Heart and Diabetes Institute. *Our Hidden Ageing: Time to Listen to the Heart*. 2021.