



Amarin UK Collaborative Working Summaries

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Collaborative Working Project Executive Summary

St. Barts Hospital Post-Acute Coronary Syndrome Medicines Optimisation Project

Expected Start Date March 2023

Expected Duration 24 Months

Summary Published March 2023

Outcomes will be published within 6 months of project completion.

Aim of the Project is to improve the clinical outcomes of patients with Secondary Prevention Atherosclerotic Cardiovascular Disease (ASCVD) who have been admitted to St. Barts Heart Centre (St. Barts) via the Secondary Prevention Pathway, this will include:

- Funding for, and training of, a cardiac specialist pharmacist.
- Establishing a new virtual clinic service at St. Barts for the digital review of patients following hospital discharge using the Ortus iHealth digital platform.
- Measurement of the improvements to the quality of patient care resulting from the project.

The financial contribution by Amarin is £136,000 over the project duration.

Expected Benefits to patients:

- Improved clinical outcomes by increasing their adherence to secondary prevention medicines and identifying patients who are suitable for long term treatment and secondary prevention.
- Greater satisfaction of patients discharged from the hospital due to greater follow up provision.

Expected Benefits to the NHS:

- Improved outpatient capacity and more efficient evaluation of post myocardial infarction patients.
- More frequent touch points from specialists and greater improvements in medicines optimization, that will translate into an improved service for patients discharged from the hospital.

Expected Benefits to Amarin

- Better understanding of the challenges faced by the NHS in delivering high-quality patient services and care.
- Faster implementation of NHS policy (such as the Hospital Secondary Prevention Clinical Pathway) which may be relevant to Amarin's business.

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Collaborative Working Project Executive Summary

Dorset County Hospital Cardiovascular Risk Reduction Clinic

Expected Start Date May 2023

Expected Duration 24 Months

Summary Published May 2023

Outcomes will be published within 6 months of project completion.

Dorset County Hospitals NHS Foundation Trust (DCHFT) and Amarin UK Limited have agreed to collaboratively work, in line with ABPI Code of Practice rules, on a project to provide a Cardiovascular Risk Reduction Clinic for cardiology patients attending DCHFT.

The clinic aims to implement NICE Guidelines and Technology Appraisals for Secondary Prevention of Cardiovascular Disease (CVD) patients including lipid lowering, blood pressure, smoking cessation, and anti-coagulation in line with approved Dorset pathways.

The project supports DCHFT to fund a Cardiovascular Prevention Nurse with Consultant supervision and administrator to provide a follow-up clinic.

The financial contribution by Amarin is £80,000 over the project duration.

Expected Benefits to Patients

- Improved clinical care and outcomes for patients by optimising their treatment therapies through earlier identification and optimised individual treatment plans alongside ongoing support.
- Greater satisfaction of patients discharged from DCHFT due to greater follow-up provision.

Expected Benefits to the NHS

- The project will lead to an increase in the number of patients achieving the clinical targets set out in NICE Guidelines and Technology Appraisals.

Expected Benefits to Amarin

- Enhanced reputation and supporting Amarin's vision to stop CVD from being a leading cause of death. Our goal is to create a new paradigm in CVD management and to make a life-changing impact on patients' lives.
- Insight on the appropriate use of ASCVD licensed medicines in line with NICE guidelines.

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Collaborative Working Project Executive Summary

Branch End Surgery, NEELI Guideline implementation, service model development project.

Expected Start Date August 2023

Expected Duration 15 weeks

Summary Published July 2023

Outcomes will be published within 6 months of project completion.

Aim of the Project is the establishment of a new service that tests and implements a Primary Care service model, designed by Branch End Surgery for patients which implements the Northern England Evaluation and Lipid Intensification (NEELI) Guidelines on lipid and CVD management. This will include...

- Funding for, and training of, a GP to manage and support the clinic.
- Measurement of the improvements to the quality of patient care resulting from the project, and the testing of the service model, which will potentially support other GP practices in the Northeast who wish to implement NEELI Guidance with their patients at a later date.

The financial contribution by Amarin will amount equal to ten thousand and fifty pounds. (£10,050) over the project duration.

The expected benefits of the Project for Patients are:

- Improved clinical care for patients with established cardiovascular disease, through identification of at-risk Patients and optimising lipid modification therapy management.

The expected benefits of the Project for the NHS are:

- The establishment of the services to identify and manage patients with established cardiovascular disease in line with the NEELI guidelines may lead to reduction in recurrent cardiac events, with eventual medium and long-term saving for NHS and reduction in the downstream burden on the health system (e.g. hospitalisation) from recurrent cardiac events.

The expected benefits of the Project for Amarin are:

- The service evaluation may lead to identification of patients within the NEELI pathway with established cardiovascular disease who may require further lipid modification management which may lead to use of appropriate medicines in line with local and national guidance.

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Collaborative Working Project Executive Summary

Sandwell and West Birmingham NHS Trust Community Lipid Clinic

Expected Start Date September 2023

Expected Duration 24 Months

Summary Published September 2023

Outcomes will be published within 6 months of project completion.

Sandwell and West Birmingham NHS Trust and Amarin UK Limited have agreed to collaboratively work, in line with ABPI Code of Practice rules, on a project to Secure and expand the 'Community Lipid Clinics' currently run by the Trust in partnership with Modality confederation of GP practices operating in Birmingham and across the UK. The 'Community Lipid Clinics' bring together the skills of both primary and secondary care clinicians to create a single pathway for patients with Atherosclerotic cardiovascular disease ("ASCVD")

Patients identified as being at risk of future cardiac events are invited to attend the 'Community Lipid Clinics' currently run across two sites (owned and operated by Modality).

The financial contribution by Amarin is £99,380 over the project duration.

Expected Benefits to Patients

- Improved patient outcomes due to increased diagnosis rates and improved management of all lipid-related residual risk factors, as well as optimization of treatment and lipid management.
- Improved access to specialised lipid services.
- Patients will be equipped with knowledge and tools to manage their diagnosis and factors that put them at risk of a future cardiac event.
- Greater Patient satisfaction due to better accessibility to lipid management services and reduced waiting times for accessing these services.

Expected Benefits to the NHS

- Continuation and expansion of the 'Community Lipid Clinics', enabling early identification of patients at risk of future cardiac events and referral of these Patients to appropriate clinics to manage their risk.
- Reduction in cardiac events, with eventual medium and long-term savings for the NHS and the reduction in the downstream burden on the health system (e.g. hospitalisation)
- Development of a primary care service that could be commissioned across other Primary Care Networks (PCN's).

Expected Benefits to Amarin

- Enhance corporate reputation and supporting Amarin's vision to stop CVD from being a leading cause of death.
- Insight on the appropriate use of ASCVD licensed medicines in line with NICE guidelines

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Collaborative Working Project Executive Summary

Manchester University NHS Foundation Trust, Wythenshawe Hospital, Department of Cardiology. Secondary Prevention Paradigm Programme, Nurse led risk factor analysis and support in the post-acute period for understanding service model development project.

Expected Start Date September 2023

Expected Duration 1 year

Summary Published September 2023

Outcomes will be published within 6 months of project completion.

There is currently a deficit in secondary prevention and/or opportunities to support patients after they have been discharged from hospitals following treatment for cardiac events. As a consequence many of these patients end up being re-admitted to hospitals and clinics.

There is therefore a need to put in place measures to make available to patients secondary prevention pathways, such as pharmacotherapies to reduce the risk of further cardiac events. This is a unique opportunity to pilot a medicines management initiative and to measure the success of this kind of programme on the longer-term outcomes of Patients. The outcome of this Project will be used to build a business case to support a request that the NHS fund the permanent introduction of this kind of longer-term support by the MFT for patients that have atherosclerotic cardiovascular disease and undergo elective or emergent revascularisation with the MFT.

The **MFT** will contribute a total amount of thirty thousand Pounds (£30,000) to cover [forty-three percent (43%)] of the costs of appointing and employing a grade 8/7 nurse to carry out the Programme for the Project Term; and, **Amarin** will contribute an amount equal to forty thousand Pounds (£40,000) to cover the balance of the costs for employing a specialist grade 8/7 nurse for the Project Term.

The expected benefits of the Project for Patients are:

- Improved clinical care for patients with established cardiovascular disease, through identification of at-risk Patients and optimising lipid modification therapy management, education and support, post-acute incidents.

The expected benefits of the Project for the NHS are:

- Care quality improvement will reduce further risk of cardiac events in patients with eventual medium and long-term saving for NHS.
- Reduction in the return of patients to secondary care in the short-term period after initial discharge.
- Understand the feasibility of a long-term NHS funded programme by the end of the project.

The expected benefits of the Project for Amarin are:

- The service evaluation may lead to identification of patients with established cardiovascular disease who may require further lipid modification management which may lead to use of appropriate medicines in line with local and national guidance.

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