
JSNA
Joint Strategic Needs Assessment
LIVE WELL
Authored by: JSNA COLLABORATORS
SEPTEMBER 2021
THE BRIGHTER BOROUGH
Wandsworth

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Live Well Long Term Conditions

COVID-19 Impact on the JSNA Report

The COVID-19 pandemic in 2020 has had multiple and wide ranging impacts on the population. It has increased and expanded the role of both statutory and voluntary sector organisations, and other community led services. The Pandemic has created a whole new set of challenges for carers, hospitals, GPs and care homes, leaving in its wake health and social care service backlogs, establishment and management of a new and significant vaccination programme. The impacts span the life course and wide-ranging issues from political, economic, social, technology, lifestyle and health.

The pandemic has highlighted more starkly, issues such as health and social inequalities and deprivation, anxiety and mental ill-health, and many others. The JSNA health outcomes and wider determinants data presented in this JSNA generally predate the pandemic and could be expected to deteriorate in areas such as life expectancy, mortality and morbidity rates. Mortality from COVID-19 has had an unequal impact on different population sub-groups and exacerbated health inequalities; however, this will not be fully reflected in this JSNA as the data is not yet available at a local level.

It remains important to monitor pre-Covid time trends to understand the baseline from which to measure the local effects of Covid on key statistics. The Protect Well chapter has more detailed COVID health outcomes and impact. It is expected that the first post-COVID information will be available in the next 12 months as we continue to monitor the available information.

Introduction

Chronic diseases (long term conditions) are the leading causes of death and disability worldwide. The World Health Organisation (WHO) acknowledges that rates of these conditions are accelerating and account for around 71% of deaths globally. Long term conditions are associated with modifiable behaviours and develop over a prolonged period of time, offering an opportunity for intervention. Cardiovascular disease, cancer, respiratory diseases and diabetes account for most of these deaths globally.

The WHO states the 5 main risks for developing non-communicable disease risks, all of which involve modifiable human behaviours, include:

- Unhealthy diet: high in salt, sugar or unhealthy fats
- Tobacco use
- Air pollution
- Harmful use of alcohol
- Physical inactivity.

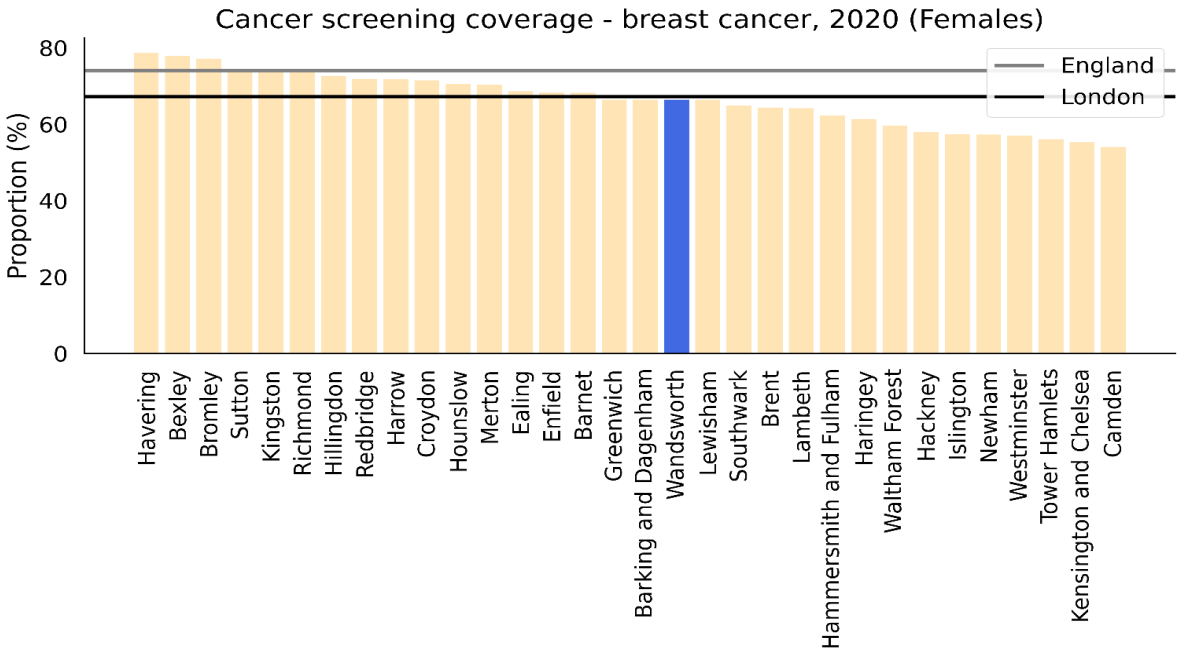
Unhealthy behaviours tend to cluster together creating multiple risk factors for poor health both in individuals and communities. However, to some degree they can be prevented, outcomes improved, and disease processes reversed with changes in lifestyle behaviour.

1. Adult Screening Programmes

1.1 Breast Cancer Screening

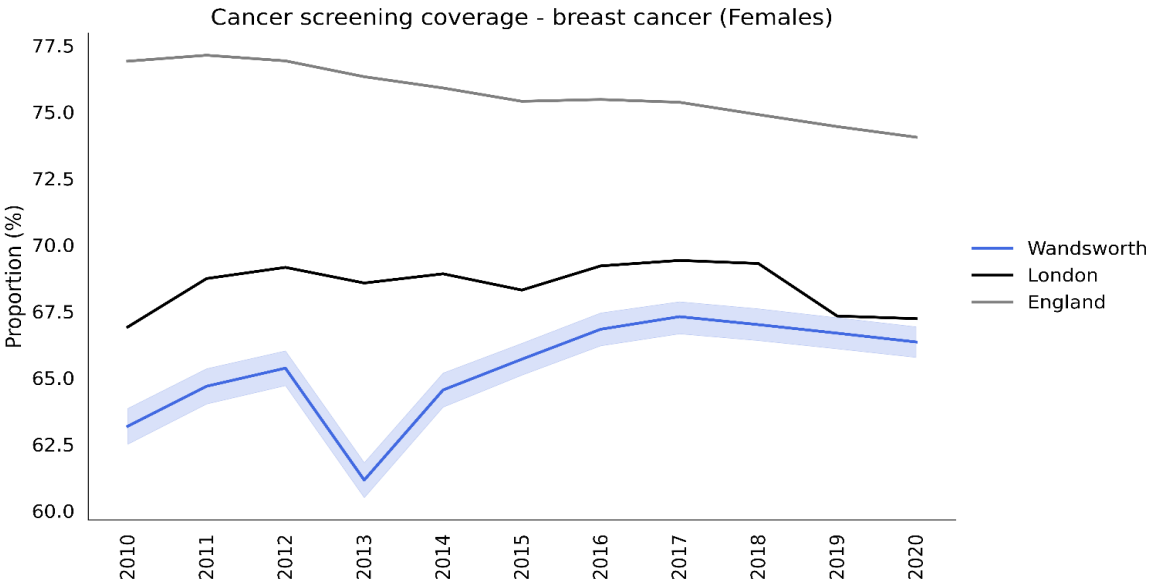
Wandsworth's latest(2020) breast cancer screening coverage in females aged 50—70 years was 66.3%, the 15th lowest rate in London (**Figure 1**), lower than the England average, and 1.3% lower than the London average. The coverage has been slowly declining since 2018 (**Figure 2**).

Figure 1: Breast Cancer Screening Coverage by Local Authority, 2020



Source: PHE Public Health Profiles

Figure 2: Breast Cancer Screening Coverage, 2010 – 2020



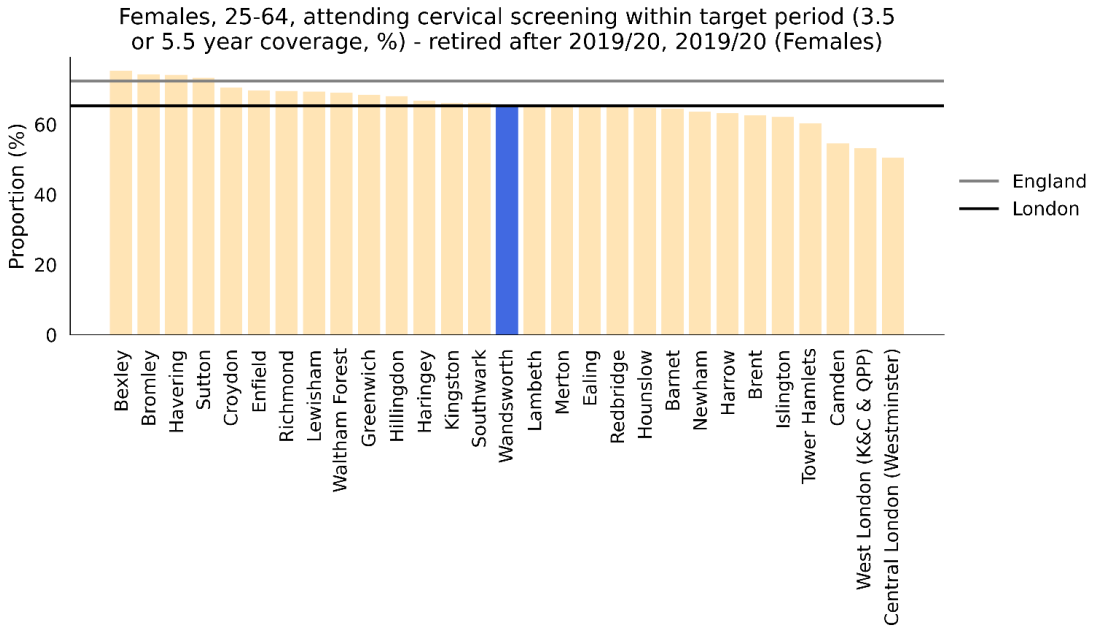
**- blue ribbon shows 95% confidence interval around Wandsworth's indicator values*

Source: PHE Public Health Profiles

1.2 Cervical Cancer Screening

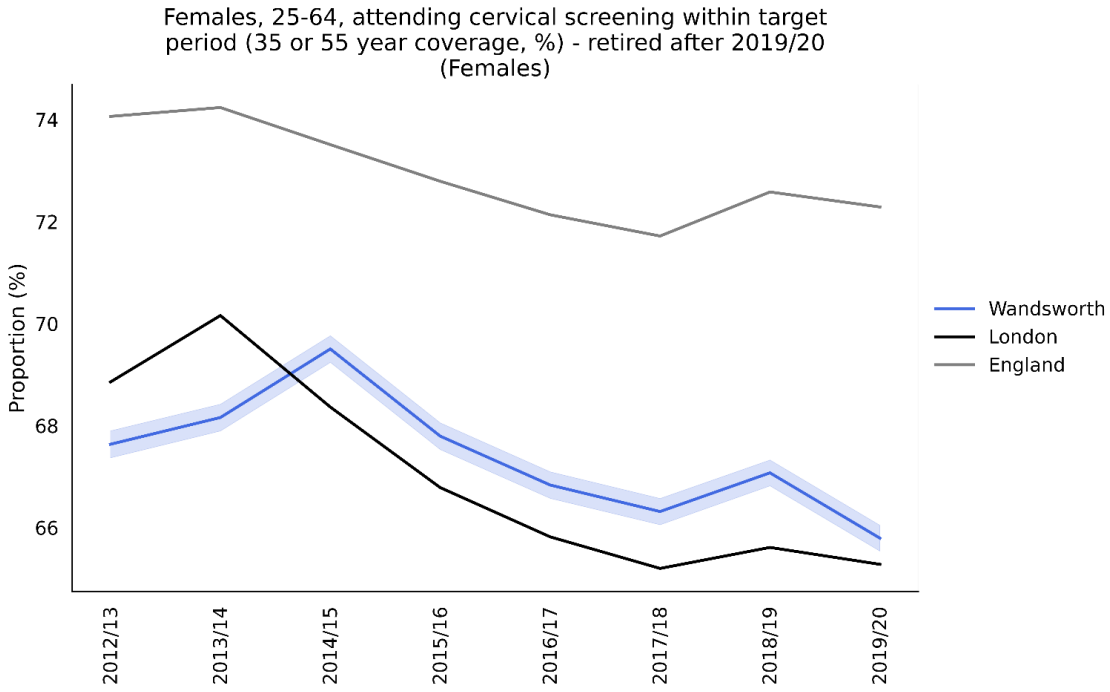
In 2019/20, Wandsworth's rate of females aged 25-64 attending cervical screening within the target period was 65.8% (n=88544), 15th highest rate in London, 9.0% lower than the England average, and 0.8% higher than the London average (**Figure 3**). The overall trend in cervical screening coverage has been slowly declining since 2014/15 (**Figure 4**).

Figure 3: Cervical Cancer Screening Coverage by Local Authority, 2020



Source: PHE Public Health Profiles

Figure 4: Cervical Cancer Screening Coverage, 2013 – 2020

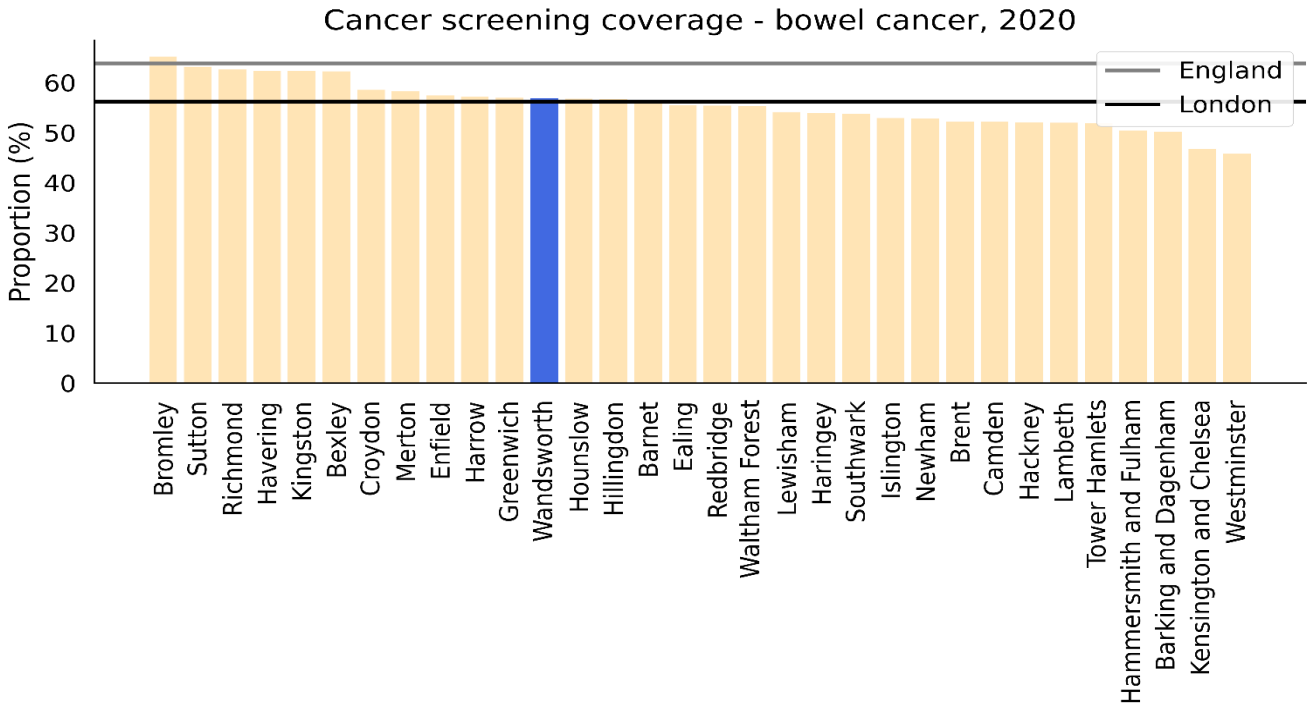


**- blue ribbon shows 95% confidence interval around Wandsworth's indicator values*
Source: PHE Public Health Profiles

1.3 Bowel Cancer Screening

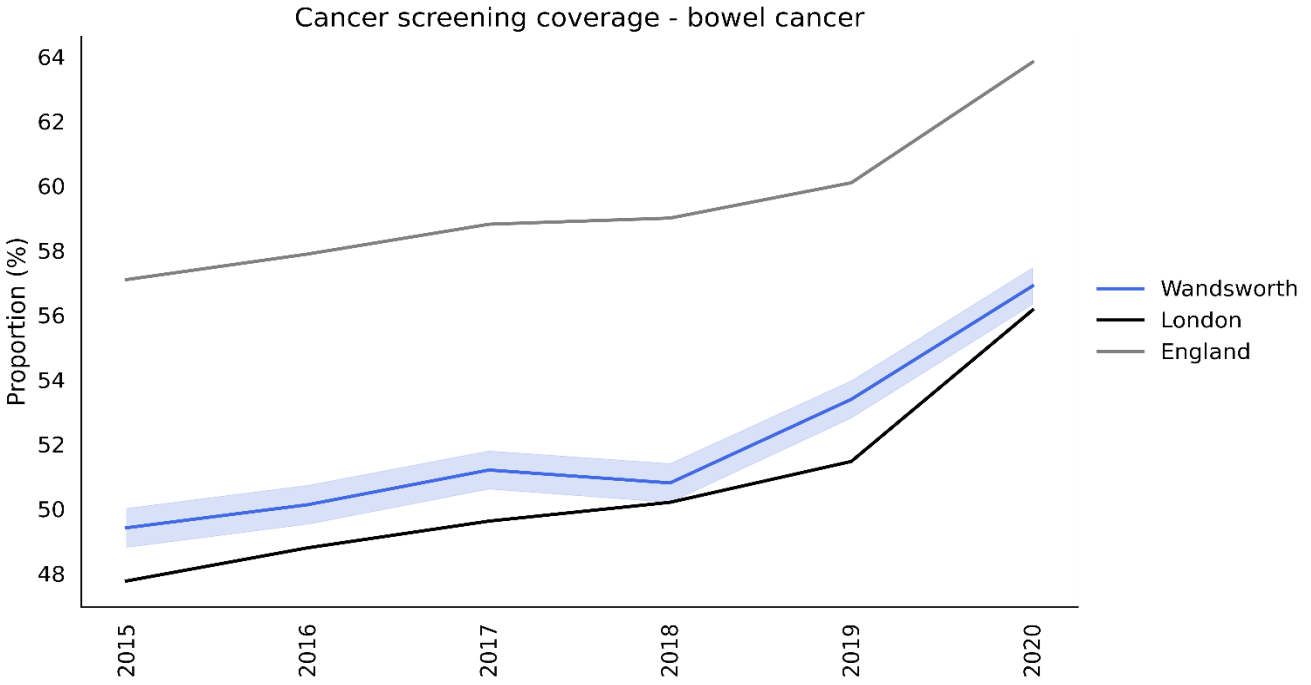
Wandsworth's bowel cancer screening for people aged 60–74 was 56.9% (2020), the 12th highest rate in London (**Figure 5**). The coverage of screening has been rising sharply over the last 2 years (**Figure 6**).

Figure 5: Bowel Cancer Screening Coverage by Local Authority, 2020



Source: PHE Public Health Profiles

Figure 6: Bowel Cancer Screening Coverage, 2015 – 2020



**- blue ribbon shows 95% confidence interval around Wandsworth's indicator values*

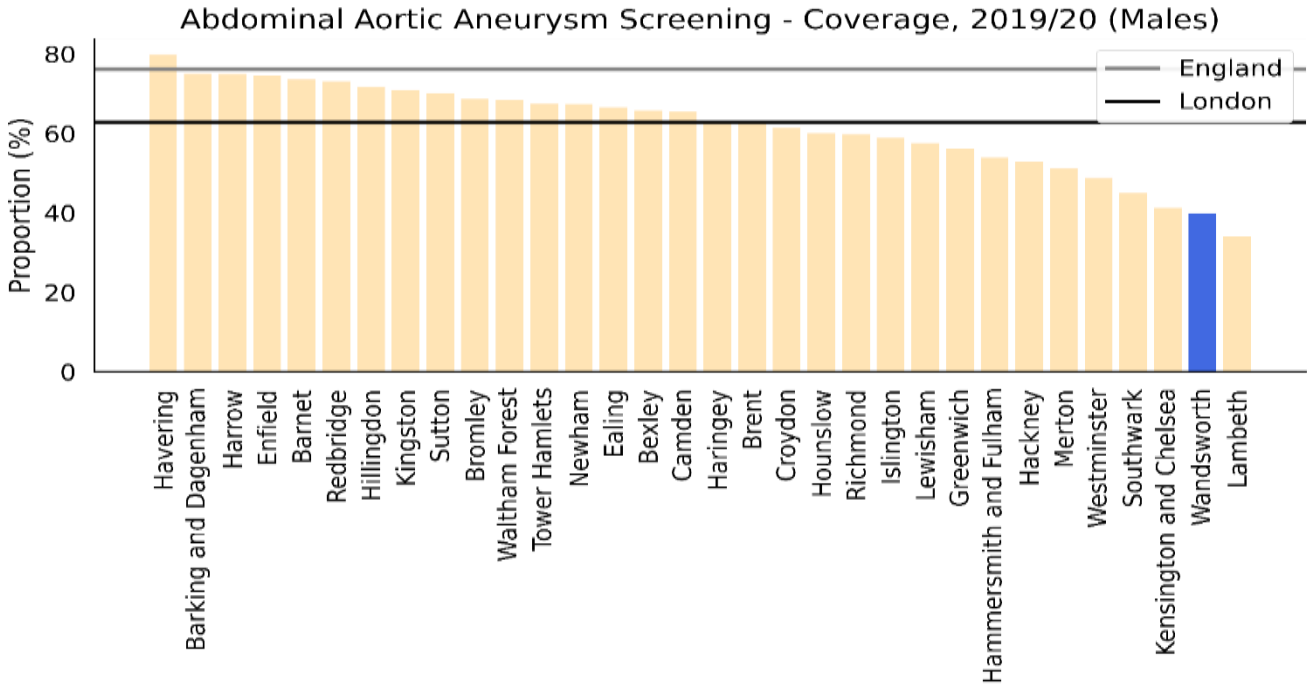
Source: PHE Public Health Profiles

1.4 Other Adult Screening

Abdominal Aortic Aneurysm Screening

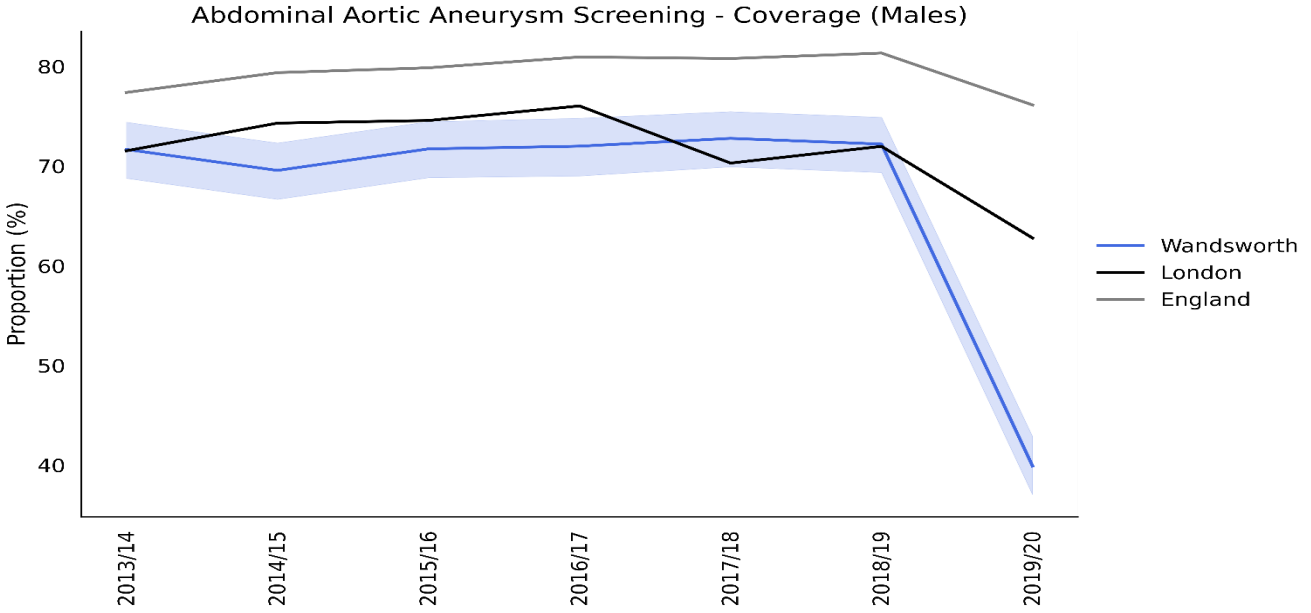
Wandsworth's 2020 abdominal aortic aneurysm (AAA) for people aged 60–74 was 39.9%, the 2nd lowest rate in London (**Figure 7**), lower than the England and London averages. The Borough coverage in 2019/20 has fallen by 44% since 2018/19 (**Figure 8**).

Figure 7: Abdominal Aortic Aneurysm Screening Coverage by Local Authority, 2020



Source: PHE Public Health Profiles

Figure 8: Abdominal Aortic Aneurysm Screening Coverage, 2015 – 2020



**- blue ribbon shows 95% confidence interval around Wandsworth's indicator values*

Source: PHE Public Health Profiles

Diabetic eye screening

In 2019, 68.7% of people with diabetes on GP registers had a record of retinal screening in the preceding 12 months.[1] This is lower than London and England (73.7% and 77.3% respectively).

2. Cardiovascular Disease, CVD

This section explores the latest available Wandsworth-level information on prevention, prevalence, primary care management, hospitalisations, and mortality from cardiovascular conditions. The local coverage and outcomes of the NHS Health Checks, a programme for adults in England aged 40 to 74, is designed to spot early signs of stroke, kidney disease, heart disease, type 2 diabetes and dementia, included in this section. The NHS Health Check helps find ways to lower cardiovascular risk and has a clear role in delivering preventative and personalised solutions to ill-health, and empowering individuals to live healthier and more active lives

Cardiovascular disease (CVD) includes a group of diseases affecting the heart or blood vessels. The list of specific diseases within the CVD classification include coronary heart disease (CHD), myocardial Infarction (heart attack), angina, coronary artery diseases and stroke. Primary prevention of CVD requires patients at risk are identified before disease has become established. People with hypertension are at high risk of developing CVD. Controlling blood pressure is therefore a significant factor that protects the patient from developing serious circulatory conditions.

2.1 Prevention - The NHS Health Checks Programme

The NHS Health Checks Programme is a mandated service under the Health and Social Care Act 2012. Local Authorities have a legal duty to invite 100% of its eligible population over a 5-year period and deliver at least 50% NHS Health Checks. The annual local targets translate to 20% invitations and 10% NHS Health Checks. The programme is a systematic vascular risk assessment and management programme, aiming to reduce the incidence of heart disease, stroke, diabetes and kidney disease. It is also an opportunity to identify dementia across the population, particularly high risk and vulnerable groups. It helps people to take action to avoid, reduce or manage their risk of developing these conditions It also contributes to the objectives of tackling health inequalities, including socio-economic, ethnic and gender differences.

Public Health England estimates the NHS Health Check Programme could, on average, prevent 1,600 heart attacks and strokes, and save at least 650 lives each year. The programme aims to prevent over 4,000 people a year from developing diabetes, detect at least 20,000 cases of diabetes or kidney disease earlier, allowing individuals to be better managed and improve their quality of life. It achieves this by assessing the top seven risk factors driving the burden of non- communicable disease in England and by providing individuals with behavioural support and, where appropriate, pharmacological treatment.

[1] QOF 2019

Aims and Delivery Model

For Wandsworth, the NHS Health Checks Programme aims to improve health outcomes and quality of life of residents. It does this by identifying individuals at an earlier stage of vascular change and provide opportunities to encourage them to substantially reduce their risk of CVD morbidity or mortality. All 40 Wandsworth GP Practices provide NHS Health Checks, giving good geographical coverage across Wandsworth. GPs can prioritise invitations for people identified with a high predicted CVD risk score (based on QRISK prediction). As the number of NHS Health Checks increase during 2021-22 towards pre-COVID levels, the Public Health Division will explore adopting a proportionate universalism approach. The service will remain available to all eligible residents, groups and communities at increased risk of CVD and related illnesses. Those who may be disproportionately affected by COVID are prioritised for a health check.

During 2019/20, Wandsworth exceeded its annual target to invite 20% of the eligible population for an NHS Health Check; 16,279 patients were invited, and 6,733 eligible Wandsworth residents received a Health Check.

Of those 6,733 who received an NHS Health Check in 2019-20:

- 3,757 (55.8%) 40-50 years
- 2,168 (32.2%) 51-60 years
- 1,104 (16.4%) 61-74 years
- 3,737 (55.5%) female
- 2,996 (44.5%) male
- 2,114 (31.4%) BAME
- 2,208 (32.8%) of attendees were recall patients, post five-years
- 263 (3.9%) registered to addresses in the most deprived areas of the Borough*
- 1,145 (17%) not resident in the Borough but registered with a Wandsworth GP.

** LSOAs ranked amongst the 50% most deprived nationally (deprivation deciles 1 – 5) on the Index of Multiple Deprivation 2019*

According to the data, 55.5% of service users were female. This shows that women are more likely to attend the health checks service than men. Females account for 49.3% of the borough profile. People aged 40-50 years are the highest age group (55.8%), followed by people aged 51-60 years check post five-years.

32.8% of service users were BAME; the proportion was smaller when compared to the percentage of borough BAME population within 40-74 age range (34.7%).
3.9% were registered to addresses in the 20% most deprived areas of the Borough compared to the borough profile at 4.5%.
17% of patients registered with a Wandsworth GP do not live in the Borough.

NHS Health Checks Outcomes

During 2019/20, from the 6,733 patients who received a Health Check, outcomes included:

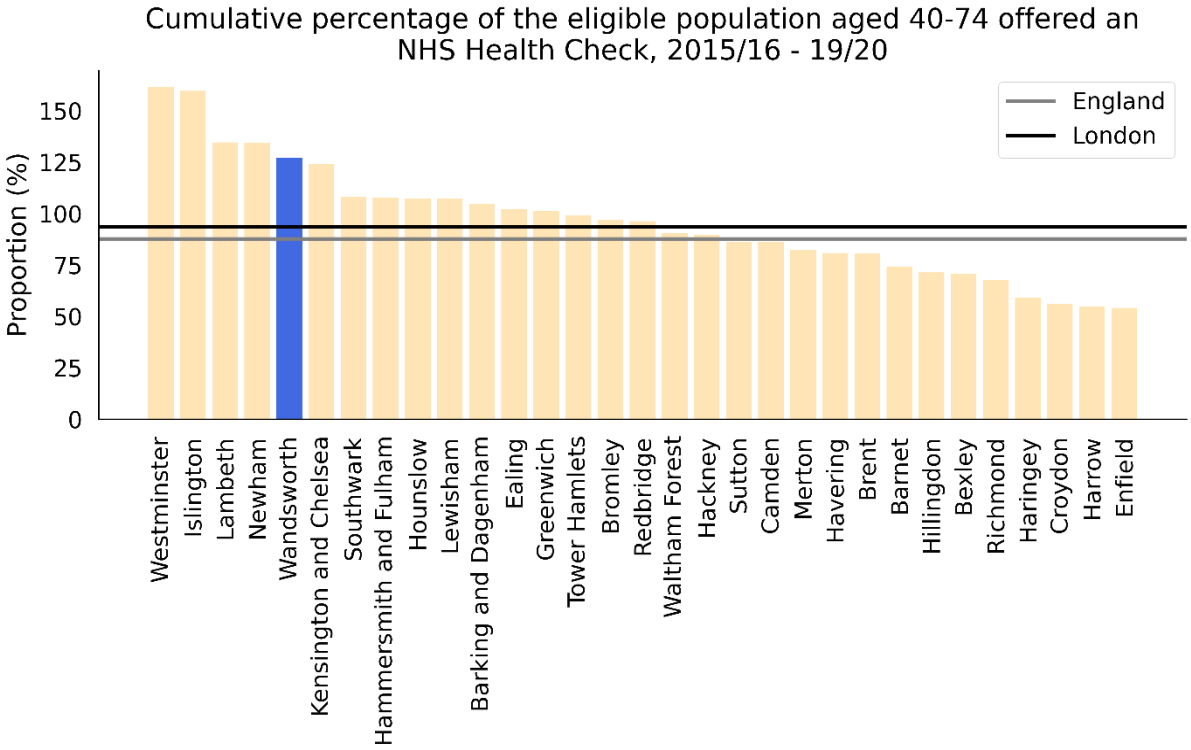
- 22 residents were identified with a high QRISK score (>20%)
- 243 residents were identified as having high blood pressure
- 232 residents were diagnosed hypertensive
- 6 patients diagnosed with stage 3 or higher chronic kidney disease (CKD)
- 3,747 patients were classified as obese (BMI > 30kgm^2)
- 808 were identified with a Q-Diabetes score greater than 5.6%
- 98 residents were diagnosed Type 2 Diabetic.

Referrals from an NHS Health Check to lifestyle support services during 2019/20 included:

- 57 patients were referred to the National Diabetes Prevention Programme (NDPP), 19 people (25%) declined
- 192 people were referred to the Exercise on Referral Programme, 221 people (54%) declined
- 113 patients were referred to Weight Management Programme, 126 people (53%)declined
- 93 patients were referred to Smoking Cessation Services 53 people (36%) patients declined.

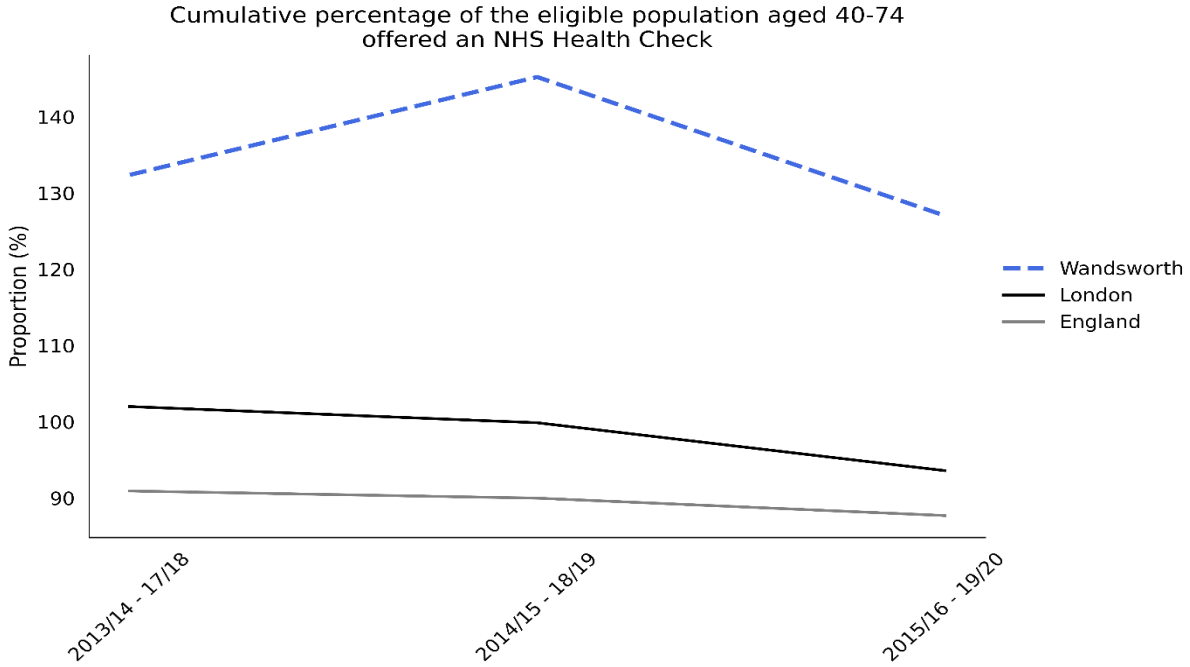
The cumulative percentage of the eligible population aged 40-74 years were offered an NHS Health Check (Figure 9). Wandsworth's latest rate was 127%, higher than the England and London average.

Figure 9: Cumulative Percentage of the Eligible Population Aged 40-74 Offered an NHS Health Check, 2015/16-2019/20



Source: PHE Public Health Profiles

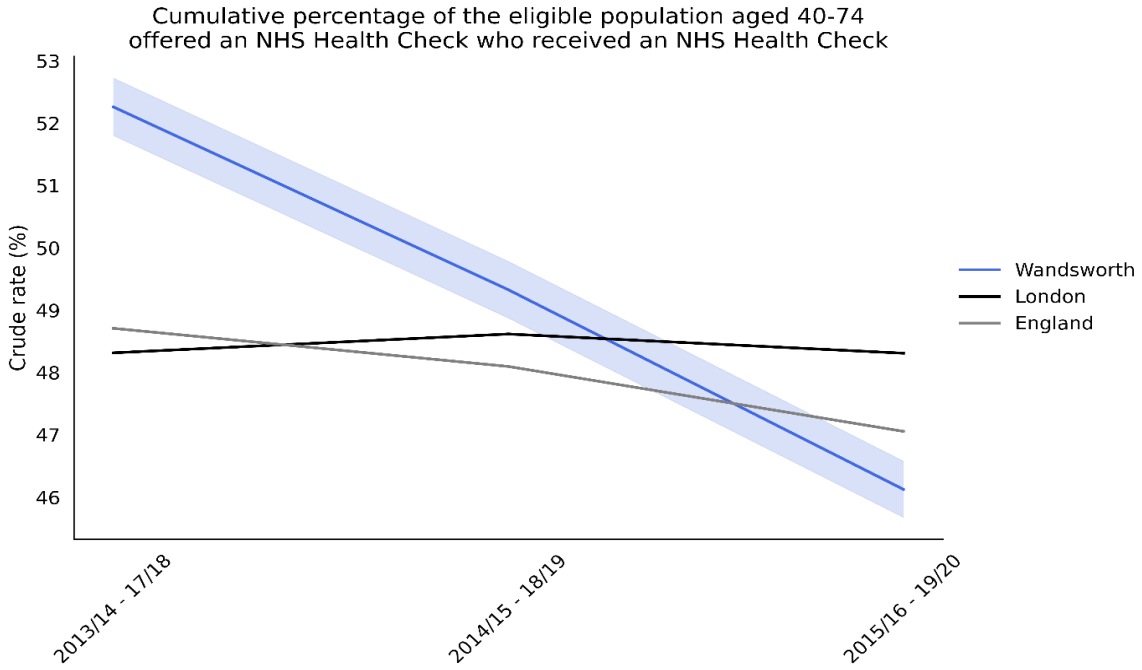
Figure 10: Cumulative Percentage of the Eligible Population Aged 40-74 Offered an NHS Health Check, 2013/18 – 2015/20



Source: PHE Public Health Profiles

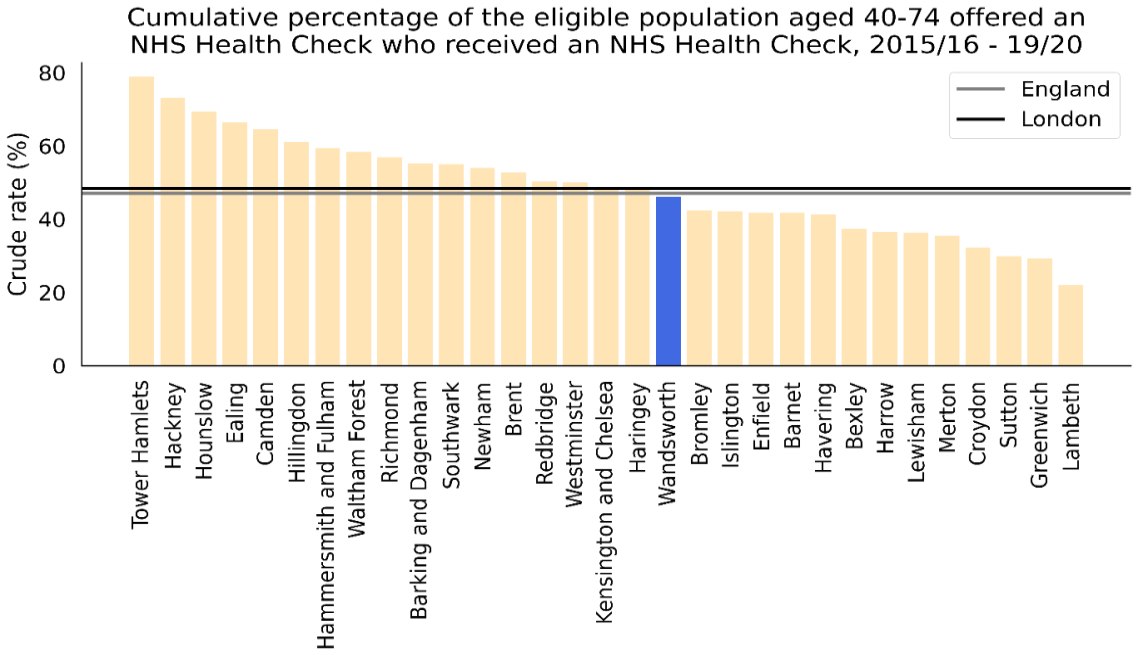
Figure 11 shows the cumulative percentage of the eligible population aged 40-74 years offered an NHS Health Check, who received an NHS Health Check. For the period 2015/16 – 2019/20, Wandsworth's rate was 46.1%, lower than England (47.1%) and London (48.3%) (**Figure 12**).

Figure 11: Cumulative Percentage of the Eligible Population aged 40-74 offered an NHS Health Check who Received and NHS Health Check; 2013/14 – 2017/18, 2014/15 – 2018/19, 2015/162019/20



**- blue ribbon shows 95% confidence interval around Wandsworth's indicator values*
Source: PHE Public Health Profiles

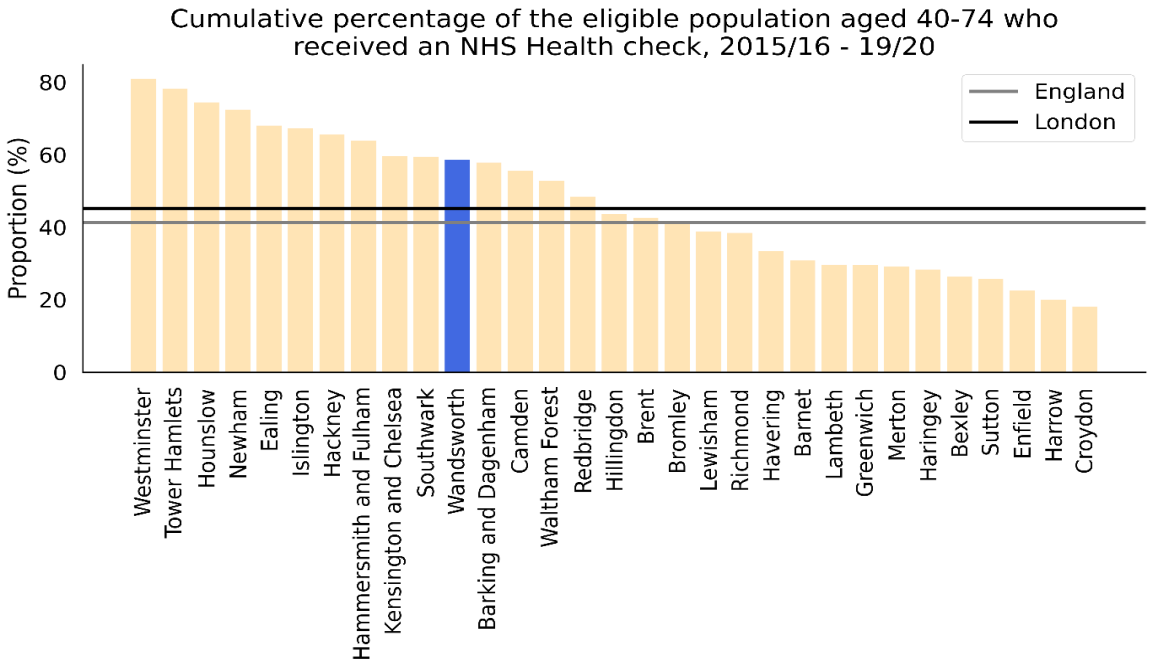
Figure 12: Cumulative Percentage of the Eligible Population Aged 40-74 Offered an NHS Health Check, 2015-16 – 2019/20



**- Definition: The rolling 5-year cumulative percentage of the eligible population aged 40-74 who received an NHS Health check*
Source: PHE Public Health Profiles

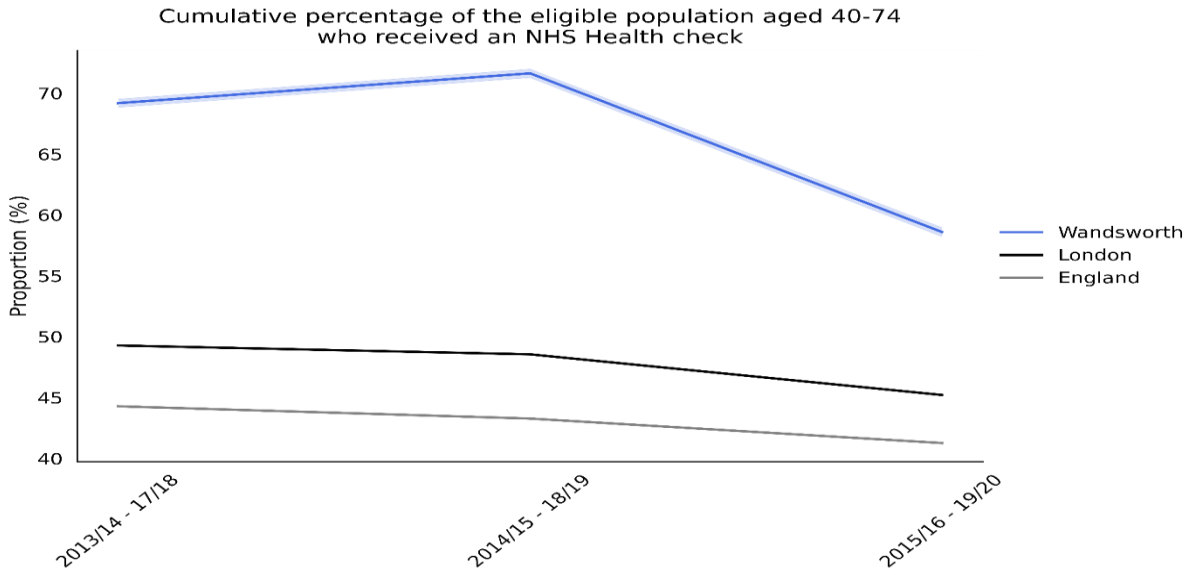
The Wandsworth cumulative percentage of the eligible population aged 40–74 years who received an NHS Health Check in 2015/16 – 2019/20, was 58.6%, higher than both England 41.3% and London 45.2% (**Figure 13**). Wandsworth's latest figure has shown a substantial decrease from previous year (**Figure 14**).

Figure 13: Cumulative Percentage of the Eligible Population Aged 40-74 who Received an NHS Health Check by local authority, 2015/16 – 2019/20



Source: PHE Public Health Profiles

Figure 14: Cumulative Percentage of the Eligible Population Aged 40-74, 2013/18 – 2015/20



**- blue ribbon shows 95% confidence interval around Wandsworth's indicator values*
Source: PHE Public Health Profiles

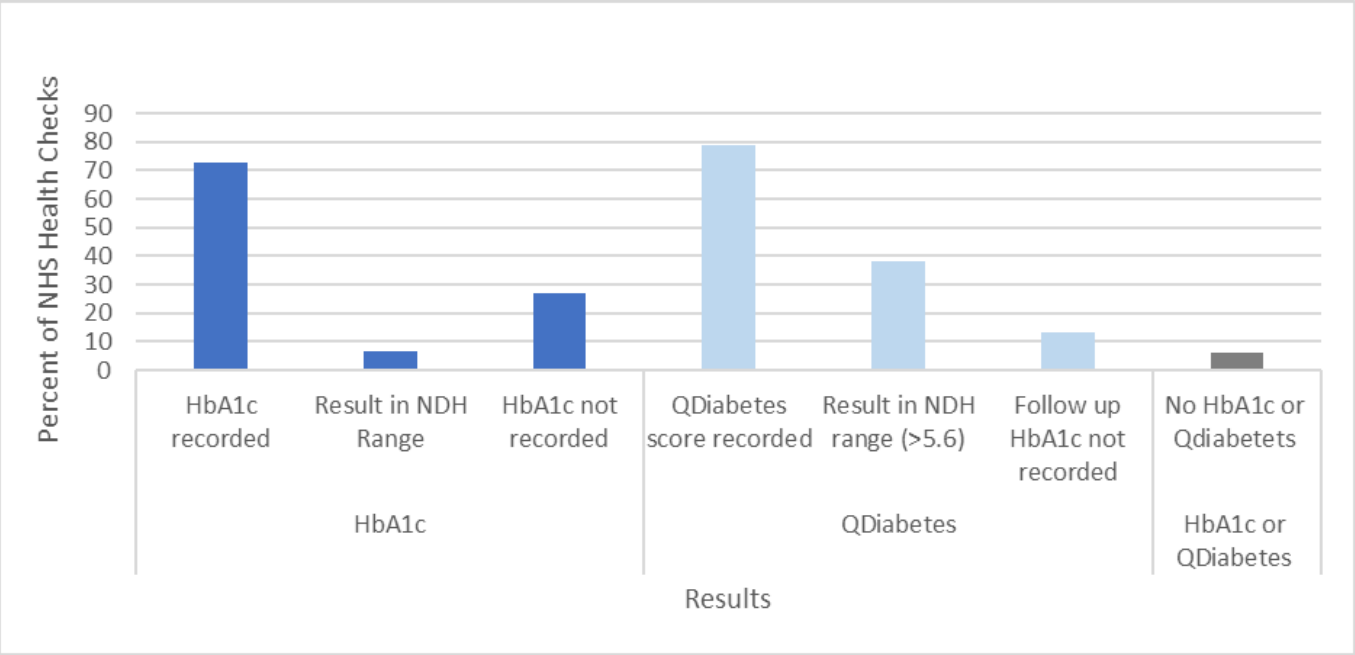
Diabetes identification through the NHS Health Check

In 2019/20, Wandsworth completed 6,602 NHS Health Checks; blood test results showed that 58 people had an HbA1c result in the diabetic range.[2] Nationally, it is estimated that NHS Health Checks could prevent 4,000 people a year from developing diabetes.[3] For every 80 – 200 NHS Health Checks, one person is diagnosed with Type 2 Diabetes (0.5%–1.25% of checks).[4] Wandsworth was within this range with 0.87% of checks resulting with a diabetes diagnosis.

In 2019/20, 4,951 (75%) of people having an NHS Health Check had an HbA1c result recorded, and of these 326 (6.6%) had an HbA1c reading in the non-diabetic hyperglycemia (NDH), 5% of all NHS Health Checks. Thirty percent of people had a QDiabetes score greater than 5.6, indicating they are at high risk of Type 2 Diabetes. 23% of people within this group did not have an HbA1c result recorded. A further 5% of people did not have a QDiabetes or HbA1c result recorded. This shows missed opportunities for NDH identification and early intervention (**Figure 15**).

[2] 2019-20 Wandsworth NHS Health Checks data, Public Health Primary Care Team.
[3] Public Health England, NHS Health Check Best practice guidance, March 2016.
[4] Public Health England, Emerging evidence on the NHS Health Check: findings and recommendations, 2017.

Figure 15: NDH Identification through NHS Health Checks, 2019/20



Source: 2019-20 Wandsworth NHS Health Checks data, Public Health Primary Care Team

2.2 Diabetes

Diabetes is a condition where the amount of glucose (a type of sugar) in the blood is too high. There are many types of diabetes including Type 1, Type 2, gestational, and other rarer types of diabetes. Type 1 Diabetes accounts for around 8% of cases, other rarer types of diabetes accounts for 2%, and Type 2 Diabetes accounts for 90%.

Type 1 Diabetes develops when the body is unable to produce insulin. Type 2 Diabetes develops when the body stops producing enough insulin, or the body's cells stop reacting to the insulin produced. This means sugar builds up in the blood and cannot get into the cells of the body where it is used for fuel.

This section focuses on Type 2 Diabetes as it is associated with lifestyle factors and can be delayed or prevented. The other types of diabetes, such as Type 1 Diabetes, are not related to lifestyle issues and cannot be prevented. There are various terms used for describing the high risks for developing Type 2 Diabetes including:

- pre-diabetes
- borderline diabetes
- impaired fasting glucose (IFG)
- impaired glucose tolerance (IGT)
- impaired glucose regulation (IGR)
- non-diabetic hyperglycaemia (NDH).

NDH will be used throughout this section to mean high risk of Type 2 Diabetes.

Once people know they are at risk, they can often prevent or delay Type 2 Diabetes by making healthy changes to their diet and lifestyle. Without lifestyle changes, people with NDH are very likely to progress to Type 2

Diabetes. Eating healthy foods, incorporating physical activity in daily routines, and maintaining a healthy weight can help bring blood sugar levels back to normal.

Prevalence of non-diabetic hyperglycemia

A blood test which detects the level of glucose in blood is needed to make the diagnosis of NDH and Type 2 Diabetes. An HbA1c blood test is often used and gives an average of how high the blood glucose levels have been over the preceding few months.

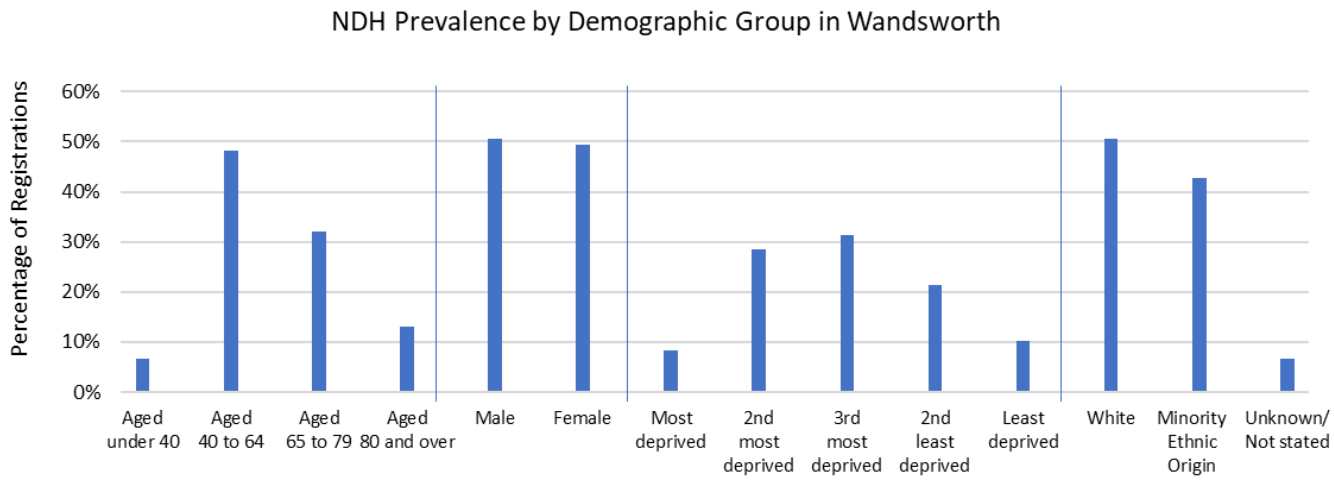
NDH is defined as an HBA1c value between 6.0% (42mmol/mol) and 6.4% (47mmol/mol), excluding those who had already been diagnosed with diabetes with an HBA1c value in this range. An HbA1c value of 6.5% (48 mmol/mol) or above, is recommended as the blood level for diagnosing diabetes. A value of less than 48mmol/mol (6.5%) does not exclude diabetes from being diagnosed using glucose tests.

The number of people developing Type 2 Diabetes has been increasing globally. [5] This is largely due to the rise in obesity, which is estimated to account for 80-85% of all Type 2 Diabetes cases in the UK.[6] Being overweight or obese is the major modifiable risk factor for Type 2 Diabetes.

Figure 16 provides the demographic breakdown of registered people in Wandsworth with NDH by GP Practice. At individual GP practice level, the percent of people identified with NDH varies, ranging from around 0.2% to 6%. NDH prevalence by age, sex, deprivation and ethnicity:

- males and females have a similar percent of people registered with NDH
- NDH prevalence varies with age. The 40-64 years age group has the highest percent of people registered with NDH, followed by the 65-79 years age group
- NDH prevalence also varies with deprivation, with over one third of people registered with NDH from the two most deprived quintiles
- there is a higher proportion of people with NDH in the white group compared to minority ethnic groups; 51% compared to 43% respectively. However, BAME groups make up around 30% of the population in Wandsworth. This shows the health inequality of diabetes risk among BAME groups.

Figure 16: NDH Prevalence by Demographic Group, Wandsworth, 2018/19



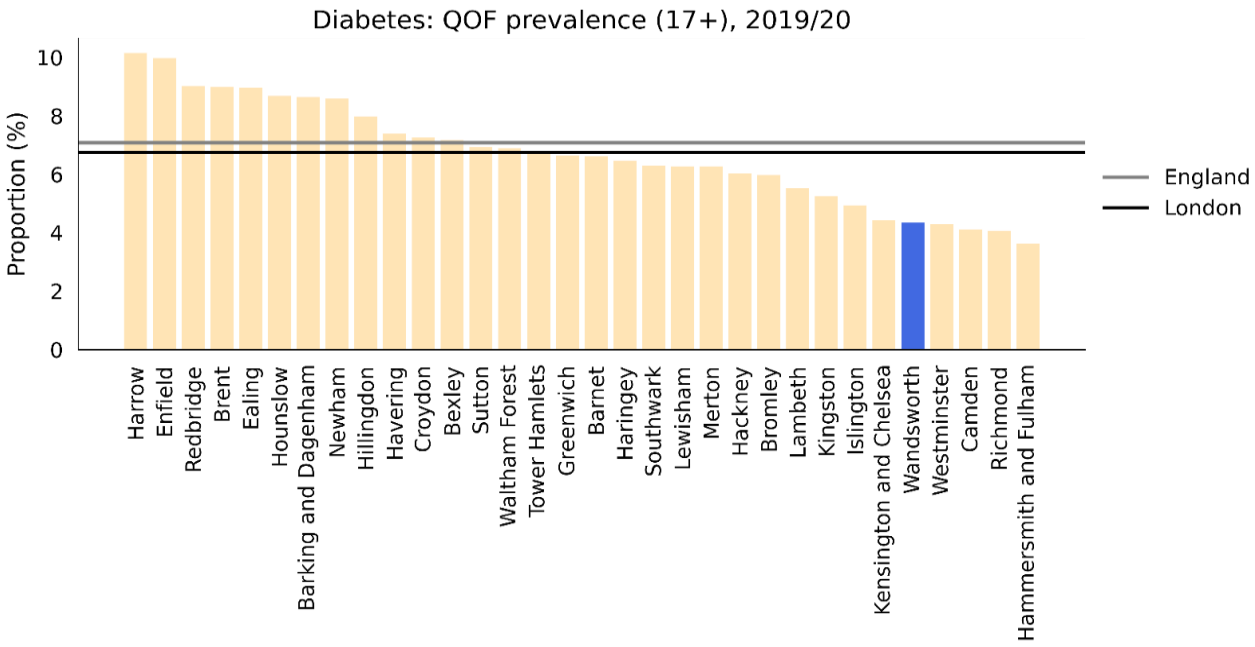
Source: NHS Digital. National Diabetes Audit. 2018/19

[5] Diabetes UK, Us, Diabetes and a lot of facts and stats, January 2019
[6] Diabetes UK, Us, Diabetes and a lot of facts and stats, January 2019

Type 2 Diabetes prevalence

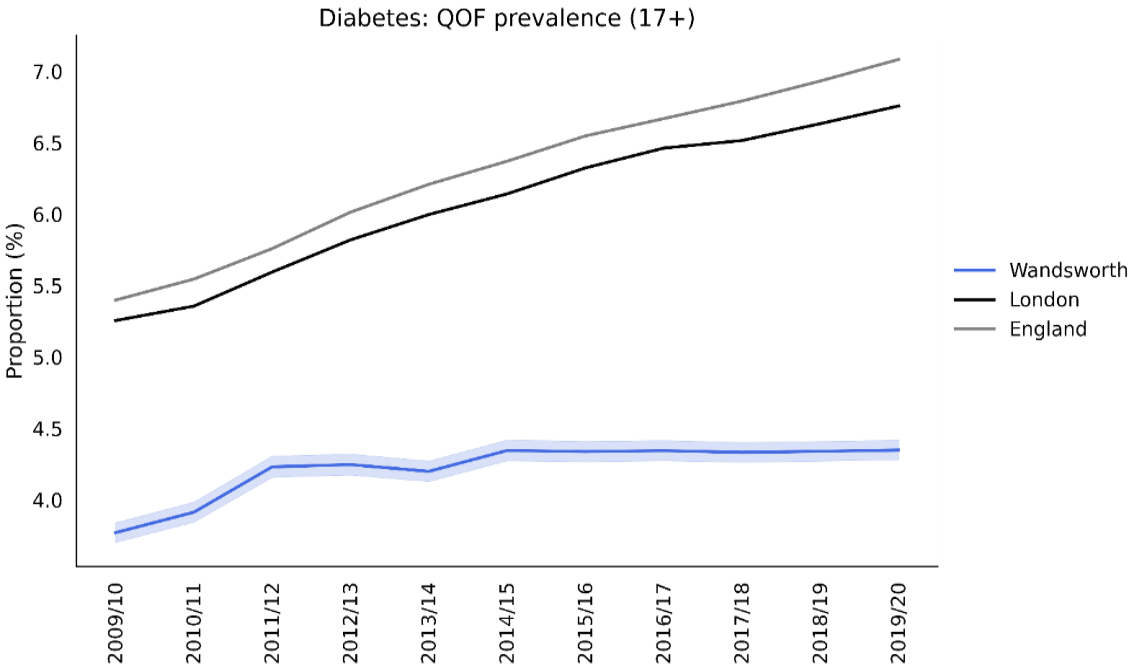
In 2017, there were 825 people newly diagnosed with Type 2 Diabetes. In 2019/20, Wandsworth's prevalence of diabetes was 4.3% (n=14,839) , 5th lowest rate in London **(Figure 17**), 38.6% lower than the England average, and 35.7% lower than the London average. Wandsworth has had a lower rise in diabetes prevalence since 2014/15, whilst London and England prevalence has continued to rise (**Figure 18**).

Figure 17: Type 2 Diabetes prevalence by local authority, 2019/20



Source: PHE Public Health Profiles

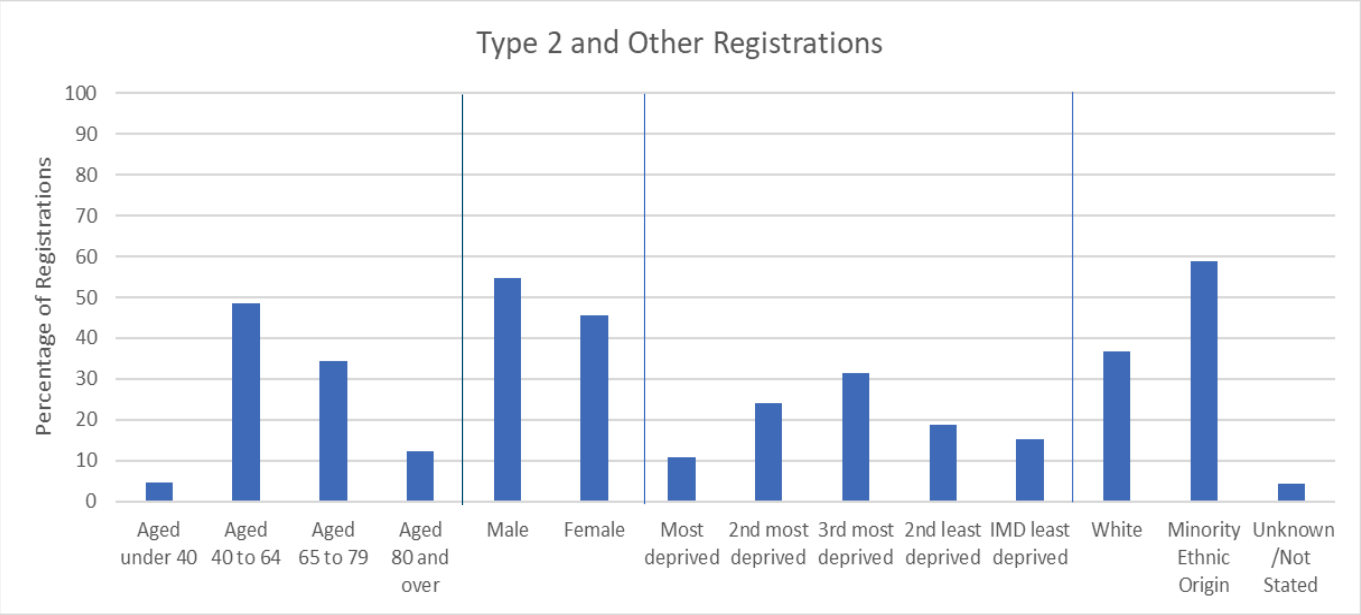
Figure 18: Type 2 Diabetes prevalence, 2010–2020



**- blue ribbon shows 95% confidence interval around Wandsworth's indicator values*
Source: PHE Public Health Profiles

Figure 19 provides the demographic breakdown of people diagnosed with Type 2 Diabetes. At individual GP practice level, the prevalence of diagnosed diabetes ranges from around 1% to 12%.

Figure 19: Demographic Breakdown of People Diagnosed with Type 2 Diabetes, 2018/19



Source: NHS Digital. National Diabetes Audit. 2018/19

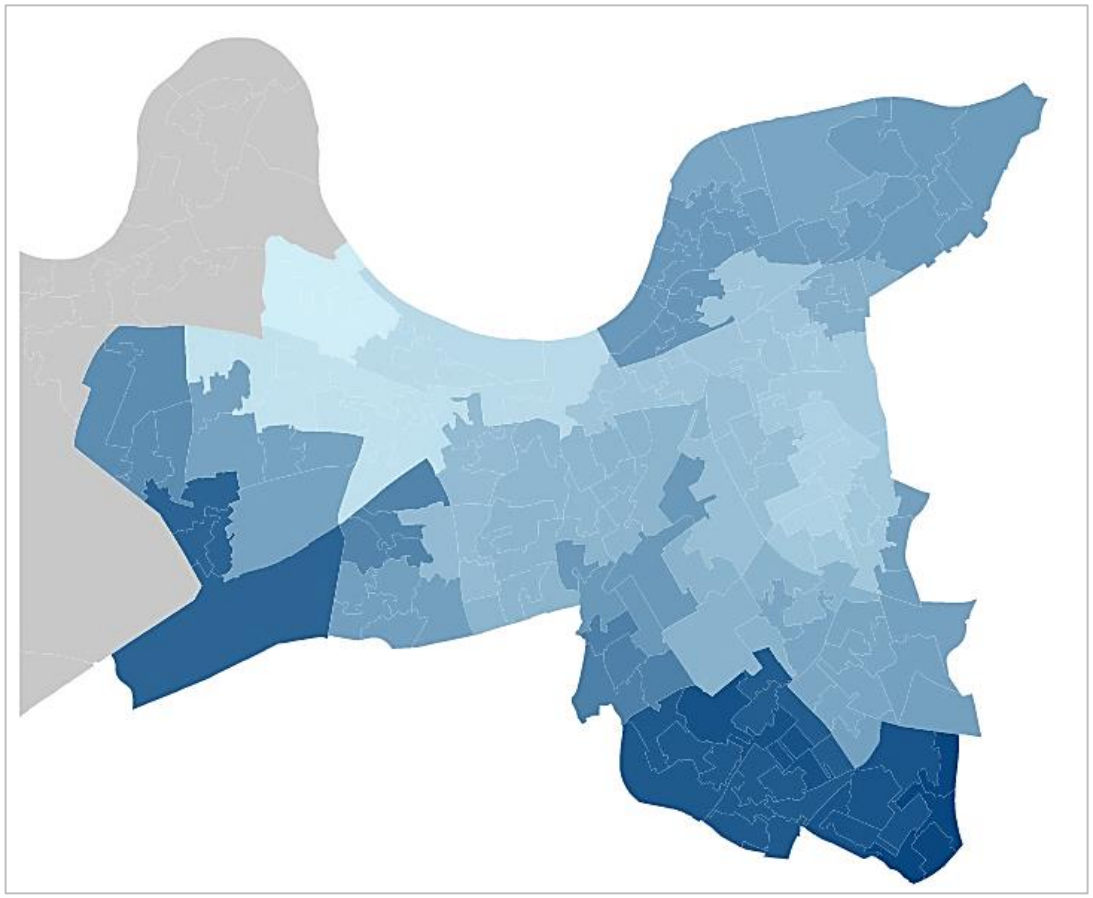
- Type 2 Diabetes is more common in males than females; 55% are male. While there is little difference in the prevalence of NDH by sex, males have a higher prevalence of diabetes overall compared to females.
- Just under half of Type 2 registrations are amongst the 40-64 years age group and over one third in the 65-79 years age group.
- Similar to NDH, over one third of people diagnosed with Type 2 diabetes are from the two most deprived quintiles.
- Around 35% of people diagnosed with Type 2 diabetes are white, 60% minority ethnic origin, with a further 5% unknown or not stated. As BAME groups make up around 30% of the population in Wandsworth, this reflects the health inequality of diabetes among minority ethnic groups.

Comparing prevalence of NDH to Type 2 diabetes, a higher proportion of males and BAME groups develop Type 2 diabetes.

Prevalence by ward

There is variation in diabetes prevalence across the Borough. Diabetes is most prevalent in Roehampton and the Furzedown & Tooting cluster (Furzedown East, Furzedown West, Tooting North, Tooting West, Tooting East,). This corresponds with having a higher proportion of older people aged 65+, deprived areas, and BAME groups (Tooting), risk factors for Type 2 Diabetes (**Figure 20**).

Figure 20: Diabetes Prevalence in Wandsworth by LSOA, 2017/18



Source: https://www.datarich.info/covid-19/#wmdata

This map shows diabetes prevalence across Wandsworth, with darker blue areas indicating higher prevalence.

Around 30% of the Wandsworth population (81,000 residents) are from BAME groups.[7] The BAME population is higher in the south and north-east areas of the borough. Tooting has the highest BAME population with over half of its residents from this group, while Thamesfield ward has the greatest proportion of white/white British ethnic group at 88%. Latchmere ward has the greatest proportion of black/black British ethnic group. The BAME group is expected to increase to nearly 40% of the population by 2040.

23% of the Wandsworth population is aged 50 years and over. Higher numbers of those aged 65+ are concentrated in Roehampton/West Putney and St. Mary's Park (Battersea Park area). There are larger numbers of 70+ and 80+ residents in the Nightingale Lane and Tooting Bec West neighbourhoods. In addition, 21% of older people in the Borough are affected by income deprivation, with 8,874 adults over 60 years living in deprived areas. The most deprived areas of the Borough, in terms of overall deprivation, are Roehampton, West Putney, Latchmere, Queenstown and Tooting.

An estimated 11% of the Wandsworth population has a disability affecting day to day activities.[8] People with one or more LTC account for approximately 25% of the population in Wandsworth.[9]

[7] London Datastore, Ethnic Groups by Borough,2011-2018. Data used:2018
[8] Office of National Statistics, 2011 census
[9] LES Agreement: Planning All Care Together 2013/14
https://www.lmc.org.uk/visageimages/files/Wandsworth/PACT%20LES%202013%20v0.3.pdf

Undiagnosed diabetes

It is estimated that 22,854 people in Wandsworth have diabetes (all types of Diabetes).[10] This includes people that have already been diagnosed by their GP, and those who have diabetes but do not know it (undiagnosed). Around 60% of people living with diabetes are diagnosed.[11] This is lower than the diagnosis rates for England 78%, and London 71.4%.

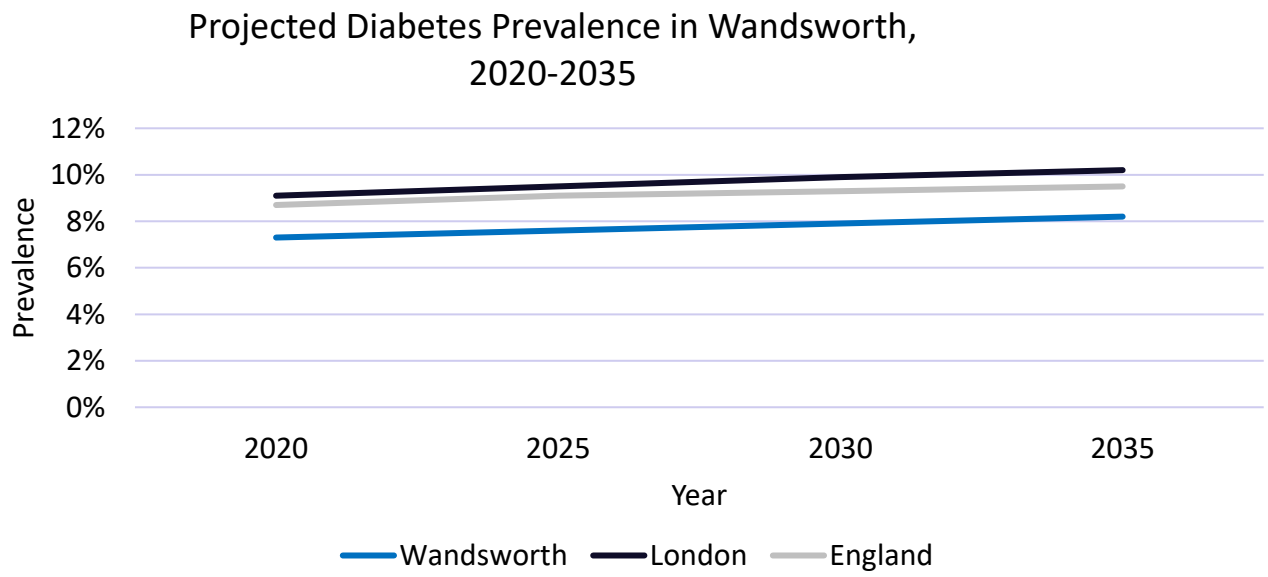
Approximately 40% (8749)of people live with undiagnosed diabetes and do not receive vital health monitoring, checks and treatment.

NDH estimates show that 18,650 people have high blood sugar. They are unaware the risk of developing diabetes and miss out on intervention or annual monitoring.

Projected diabetes prevalence

Projections for diabetes prevalence up to 2035 show an increase in the number of people living with diabetes in Wandsworth, as well as in London and England at a similar rate. By 2035, it is estimated that 8.2% of people in Wandsworth will have diabetes. This is less than a 1% increase but amounts to a further 5,960 people living with diabetes in Wandsworth over the next 15 years (**Figure 21**).

Figure 21: Projected Diabetes Prevalence in Wandsworth. 2020–2035



Source: Prevalence estimates of Diabetes, Public Health England, 2016

Risk of Type 2 Diabetes

The risk factors for being at high risk of Type 2 Diabetes and developing Type 2 Diabetes are the same. These factors include:

- overweight or obesity - there is a seven times greater risk in people who are obese and three times if overweight

[10] Public Health England, Public Health Profiles, Estimated Prevalence of Diabetes (undiagnosed and diagnosed), 03 February 2018.
[11] Public Health England, Public Health Profiles, Estimated Diabetes diagnosis rate, 05 February 2019.

- high blood pressure - people are more at risk if they have ever had high blood pressure
- certain ethnicities - people of South Asian origin are six times more likely to develop diabetes and Black-Caribbean and Black African are three times more likely
- age - people are more at risk if they are older than 40 years or older than 25 years if they are Black Caribbean, Black African, or South Asian
- family history - people are two to six times more likely to get Type 2 Diabetes if they have a parent, brother, sister or child with diabetes
- smoking - smoking has been proven to be an independent risk factor for diabetes, and amongst diabetics it increases the risk of complications. The highest risk is among heavy smokers. Risk remains elevated for about 10 years after smoking cessation, reducing more quickly for lighter smokers.[12]
- deprivation - is strongly associated with higher levels of obesity, physical inactivity, unhealthy diet, smoking and poor blood pressure control, all of which are linked to the risk of developing Type 2 Diabetes
- prevalence of Type 2 Diabetes is 60% more common among individuals in the most deprived quintile compared to those in the least deprived quintile in England[13]
- Gestational diabetes - gestational diabetes affects around 5% of all pregnancies.[14] Women who have had gestational diabetes have a sevenfold increased risk of developing Type 2 Diabetes later in life, especially if they gain weight
- Children born to mothers with diabetes during pregnancy tend to have a greater BMI, raised fasting glucose levels and an increased risk of developing Type 2 Diabetes later in life
- People at high risk of Type 2 Diabetes have a greater chance of developing Type 2 Diabetes in the future. One out of four people with high risk will develop Type 2 Diabetes in the next 10 years.[15]

Complications

People who develop Type 2 Diabetes are at greater risk of developing complications from the disease including:

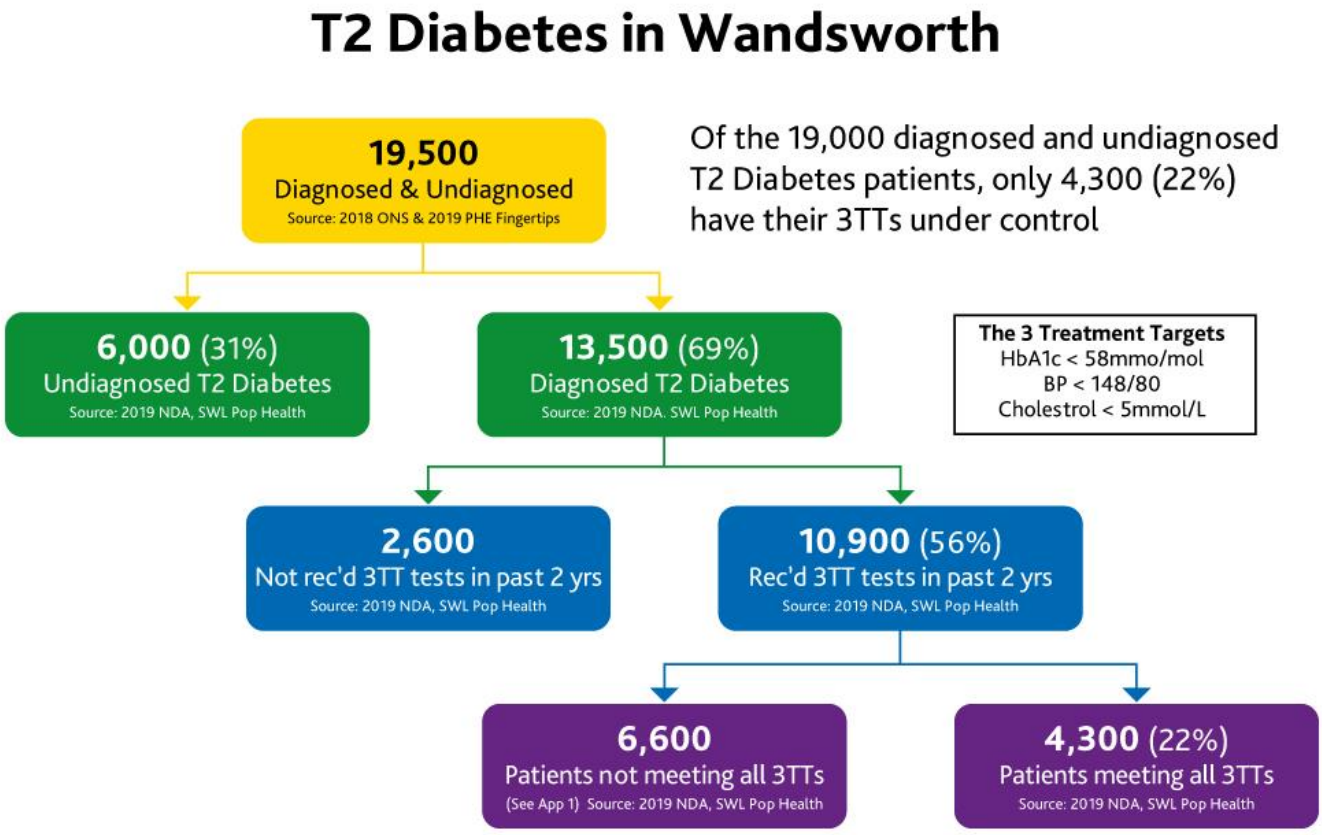
- CVD including heart attack and stroke – Type 2 Diabetes leads to a 2-fold excess risk of CVD. In Wandsworth, people with diabetes are 51.1% more likely to have a heart attack, and 57.9% more likely to have a stroke[16]
- blindness – a leading cause of preventable slight loss among people of working age
- nerve damage - most often in legs or feet
- Kidney Disease and Failure - Diabetes is the leading cause of Kidney Disease
- diabetic foot disease- a potential consequence of nerve damage and the complication of peripheral vascular disease.
- foot problems are the most frequent reasons for hospitalisation amongst people who have diabetes. Latest figures[17] for Wandsworth show that between 2016/2017 and 2018/2019, there were 580 hospital spells for Diabetic Foot Disease; this was significantly better than the England average. The median length of stay in hospital was 5.5 days.[18]
- diabetes is one of the leading causes of amputation of the lower limbs. From 2016/2017- 2018/2019 there were 25 major amputation procedures, above or below the knee (an age and ethnicity standardised rate of 8.0 major amputations per 10,000 population-year).

[12] World Health Organization, Global Report on Diabetes, 2016.
[13] Public Health England, Health Matters: preventing Type 2 Diabetes, 24 May 2018
[14] NICE, Diabetes in pregnancy: management from preconception to the postnatal period, last updated August 2015.
[15] Diabetes UK, https://www.Diabetes.org.uk/preventing-type-2-Diabetes/what-does-it-mean-if-im-at-risk
[16] Public Health England, CVD Profiles – Diabetes, NHS Wandsworth CCG, January 2019.
[17] Public Health England, CVD Profiles – Diabetes, NHS Wandsworth CCG, November 2020.
[18] Public Health England, National Cardiovascular Intelligence Network (NCVIN), Diabetes Foot Care Profiles- NHS Wandsworth CCG, April 2019.

- there were 80 minor amputation procedures (removal of toes or feet) with a directly age and ethnicity standardised rate of 22.0 per 10,000 population-year. These were similar to the England averages.[19]

Figure 22 shows that out of 19,500 Wandsworth's patients that are expected to have type 2 diabetes, 13,500 (69%) patients have been identified as diabetic and recorded on GP diabetes registers. Only 4,300 have been recorded to meet the 3 diabetes treatment targets for blood sugar level, blood pressure and cholesterol (22% of the estimated population of people with diabetes).

Figure 22: Type 2 Diabetes Detection Rates and Treatment Targets Compliance in Wandsworth, 2019



Source: SWL CCG, 2021 from QOF data and ONS estimates of type 2 diabetes prevalence for Wandsworth.

Current Services

A range of services are available for people at high risk of developing or being Type 2 diagnosed with Type 2 Diabetes. The services offer support to people to help prevent Type 2 Diabetes, as well as to diagnose people with diabetes early, ensuring quality of care and effective management.

[19] Public Health England, CVD Profiles – Diabetes, NHS Wandsworth CCG, November 2020.

Primary Care

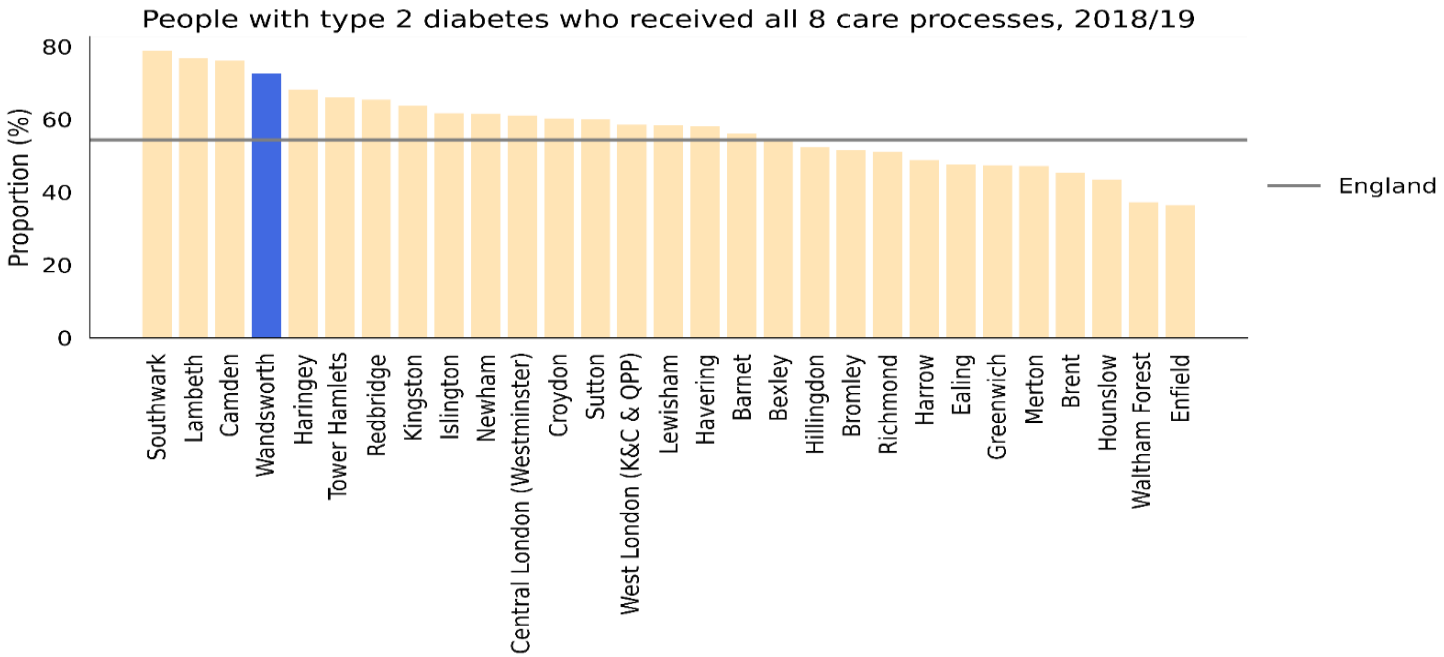
Much of the management and monitoring of patients at risk of and with Type 2 Diabetes is undertaken by GPs and members of the Primary Care Team through:

- blood tests
- registers of patients with Type 2 Diabetes and those at high risk
- annual recall assessments
- advice and signposting by GPs and practice nurses
- medication (metformin, insulin)
- blood sugar checks (HbA1c) every three months when newly diagnosed, and every 6 months once stable
- annual diabetic review (eight care processes recommended by NICE)
- the five risk factors include body mass index, blood pressure, smoking, glucose levels (Hba1c) and cholesterol
- four tests to identify early complications include urine albumin creatinine ratio, serum creatinine, foot nerve and circulation examination.

These important markers ensure diabetes is well controlled and prevent long-term complications.

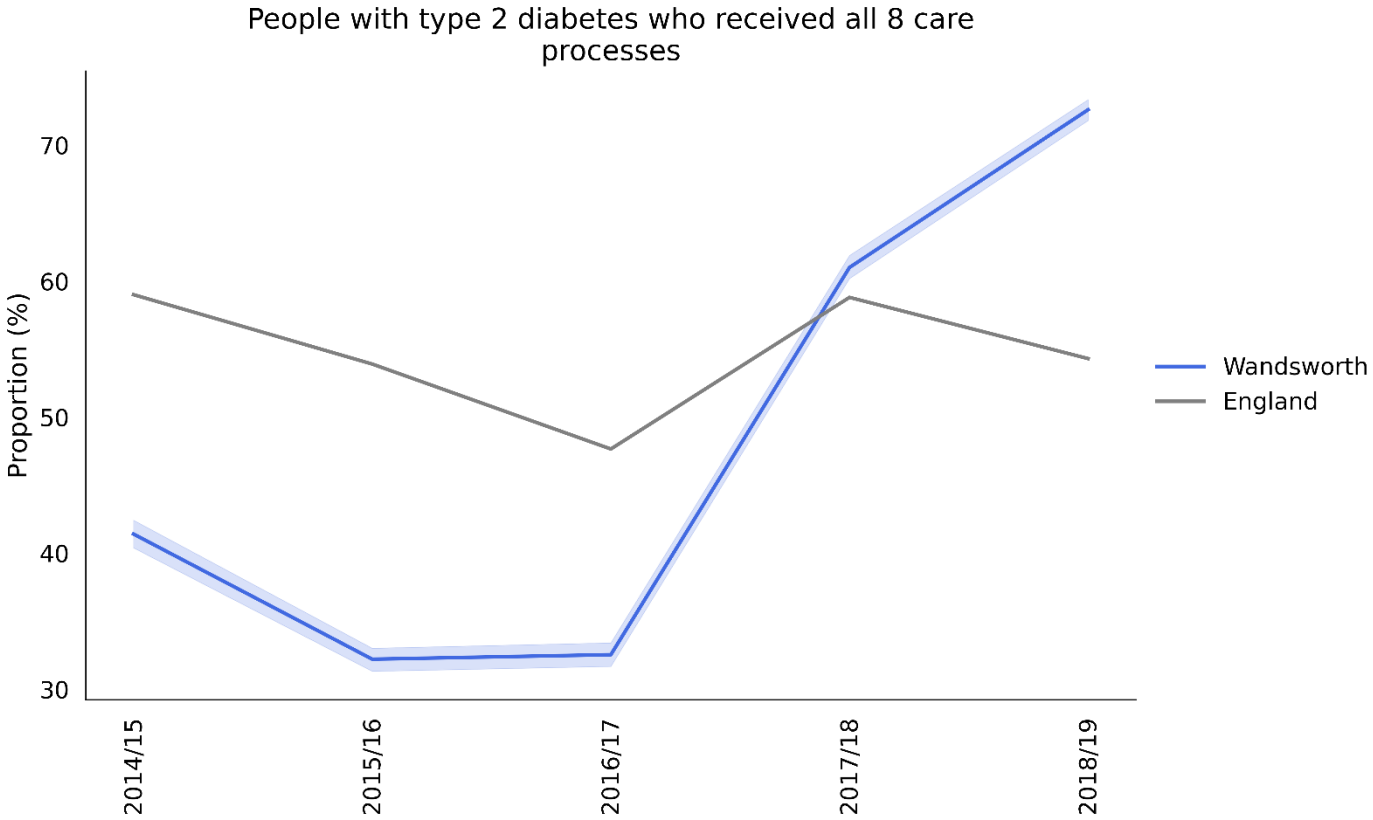
In 2018/19, Wandsworth's proportion of people with Type 2 Diabetes who received all eight care processes was 72.6% (n=9370) , 4th highest rate in London,(**Figure 23**), and 33.7% higher than the England average. The latest Wandsworth's figure for 2018/19 was also 75.4% higher from 2014/15, in comparison with an 8.0% decrease in England's rate in the equivalent time period (**Figure 24**). Wandsworth's proportion has doubled in the last two years.

Figure 23: Percentage of people on GP diabetes registers who received all 8 care processes by CCG, 2018/19



Source: PHE Public Health Profiles

Figure 24: Percentage of people on GP diabetes registers who received all 8 care processes, 2015–2019



**- blue ribbon shows 95% confidence interval around Wandsworth's indicator values*
Source: PHE Public Health Profiles

Healthier You: NHS Diabetes Prevention Programme (NDPP)

The NDPP is an intensive lifestyle support programme for people identified as high risk for developing Type 2 Diabetes. Individuals are eligible if they are identified by their GP with NDH, defined as having an HbA1c 42 – 47 mmol/mol (6.0 – 6.4%), or a fasting plasma glucose (FPG) of 5.5 – 6.9 mmol/l. The service offers tailored, personalised support to reduce the risk of Type 2 Diabetes. This includes education on healthy eating and lifestyle, help to lose weight and physical exercise programmes. Local group sessions are delivered in community settings, and a digital option is offered to those declining face-face group sessions.

Table 1 shows the outcomes of the service.

Table 1: NDDP Outcomes, Wandsworth, 2018–2020

NDPP Outcomes Data June 2018 to October 2020	
Total referred	1549
% Uptake	51%
Mean weight change at 6 months (Oct 2019)	-2.8kg

Source: NDDP programme

Of the people who attended the NDPP Service in Wandsworth:

- 58% male
- 42% Female
- 73% were aged less than 70

- 53% were of Asian, Black, mixed or another ethnicity
- 30% were from the two most deprived quintiles
- 16% were of normal weight (BMI 18–24.9), 33% overweight (BMI 25–29.9), and 30% obese (BMI >30).

Early outcomes of the service across England demonstrate that those completing the programme had a mean weight loss of 3.3 kg and an HbA1c reduction of 2.04 mmol/mol.[20]

Structured Education Programmes

Good management of diabetes reduces risk and serious complications. However, most people do not receive structured education, or care processes recommended by NICE. Structured Education uptake is low. In 2017, there was 15.8% attendance of patients newly diagnosed with Type 2 Diabetes over the first 12 months.

Structured Education Programmes can help adults with Type 2 Diabetes to improve their knowledge and skills and help to motivate them to take control of their condition and self-manage it effectively. A range of Diabetes Education Programmes exist in London, such as DESMOND and X-PERT. Remote courses such as Oviva are also available for those who prefer digital support.

Alongside GPs, practice nurses and healthcare professional's referrals, people are now able to self-refer. The Diabetes Book & Learn Website allows people to book courses across London using online booking.

Table 2 provides an overview of referrals to Structured Education in 2017.[21]

Table 2: Referrals to Structured Education, 2017

Newly diagnosed Type 2 Diabetes	Offered within 12 months of diagnosis	Offered within 12 months of diagnosis (%)	Attended within 12 months of diagnosis	Attended within 12 months of diagnosis (%)
825	675	81.8	130	15.8

Source: NHS Digital, National Diabetes Audit (NDA) 2018-19 Interactive report for England, Clinical Commissioning Groups and GP practices, 13 December 2019.

Table 3 provides an overview of referrals to Diabetes Book & Learn from October 2018-January 2020 for people with Type 2 Diabetes. However, these are approximate figures due to issues with recording of attendance by providers on the Diabetes Book & Learn Website.

[20] Valabhji J , Barron E, BradleyD et al. Early Outcomes From the English National Health Service Diabetes Prevention Programme. Diabetes Care Jan 2020, 43 (1) 152-160; DOI: 10.2337/dc19-1425

[21] NHS Digital, National Diabetes Audit (NDA) 2018-19 Interactive report for England, Clinical Commissioning Groups and GP practices, 13 December 2019.

Table 3: Referrals to the Diabetes Book and Learn Website, 2018–2020

Total referrals to the Diabetes Book & Learn Oct 2018-Jan 2020	980
Percent of patients accessing courses outside Wandsworth	32%
Percent of patients accessing digital/remote provider	21%

Source: NHS Digital, National Diabetes Audit (NDA) 2018/19 Interactive report for England, Clinical Commissioning Groups and GP practices, 13 December 2019.

Treatment targets

NICE recommends treatment targets for Hba1c (glucose control), blood pressure and serum cholesterol:

- measuring and managing Hba1c helps reduce the risk of all diabetic complications
- managing high blood pressure can reduce the risk of vascular complications and the progression of eye disease and kidney failure
- reducing cholesterol can reduce the risk of vascular complications.

Meeting all three treatment targets' is achieved where a patient has HbA1c ≤58mmol/mol, cholesterol <5mmol/L and blood pressure ≤140/80.

Around 60% of people with Type 2 Diabetes have not achieved all three treatment targets (for blood glucose, blood pressure, cholesterol). **Table 4** shows that in comparison with similar CCGs, the Sustainability and Transformation Plan (STP) and England, Wandsworth is performing similarly to CCGs and England, but slightly lower than the STP.

There was a variation in the achievement between GP Practices, ranging from 25%–60%.

Table 4: Treatment Target Comparisons, 2017/18

2018/19	Wandsworth	Similar CCGs	South West London Sustainability and Transformation Partnership (STP)	England
People with Type 2 Diabetes who achieved all three treatment targets (per cent)	41.4	41.7	42.6	41.7
HbA1c ≤ 58 mmol/mol (7.5%)	66.9	65.3	66.7	66.5
Blood Pressure ≤ 140/80	71.6	74.1	74.7	74.5
Cholesterol < 5 mmol/L	80.4	79.3	78.8	78.4

Source: National Diabetes Audit (NDA) 2018/19

Data Limitations

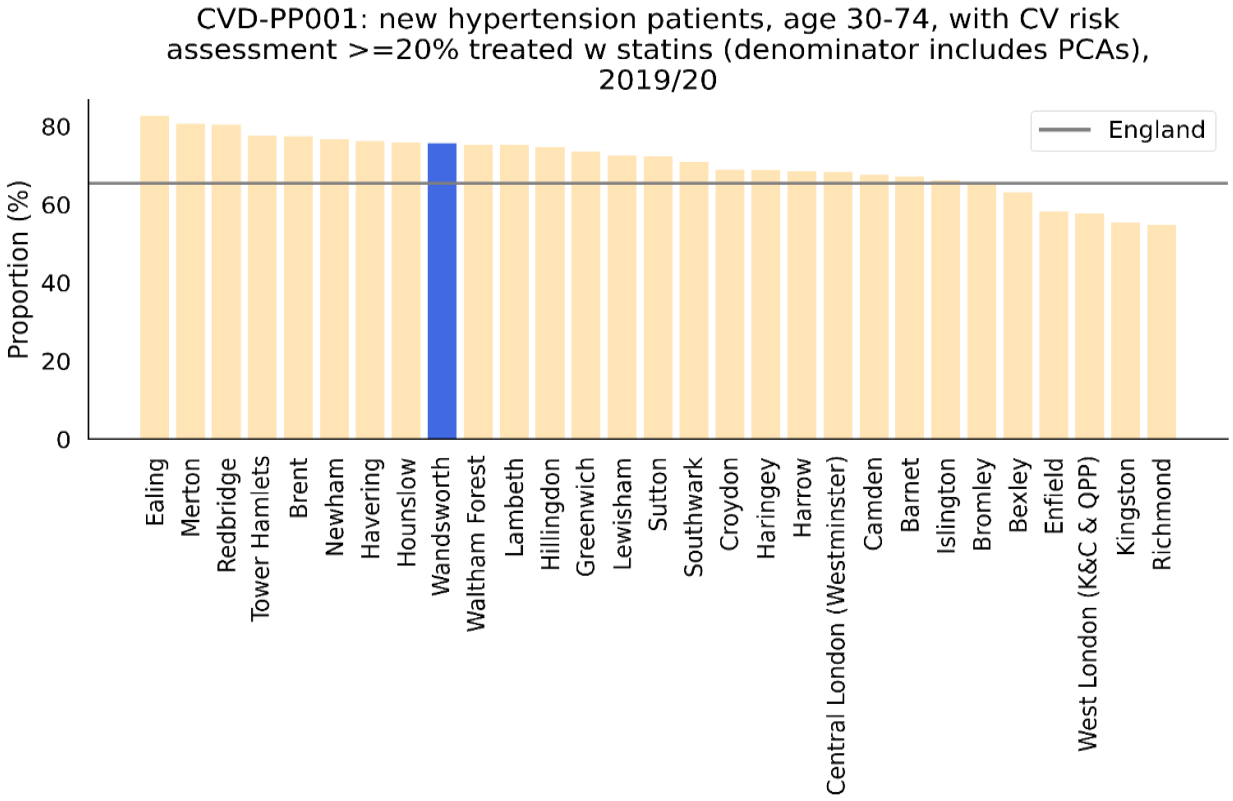
The estimated NDH prevalence is based on modelled data. PHOF states “with all modelled data, there is a degree of uncertainty associated with these estimates therefore should be considered indicative only.” Additionally, ward level or LSOA breakdown of the data is not available for both data sets.

Like the estimated NDH prevalence data, diabetes prevalence is based on modelled data and does not include confidence intervals. The data has not been interpreted beyond borough level. This data includes Type 1 Diabetes and does not make a distinction between the types of diabetes.

2.3 Hypertension

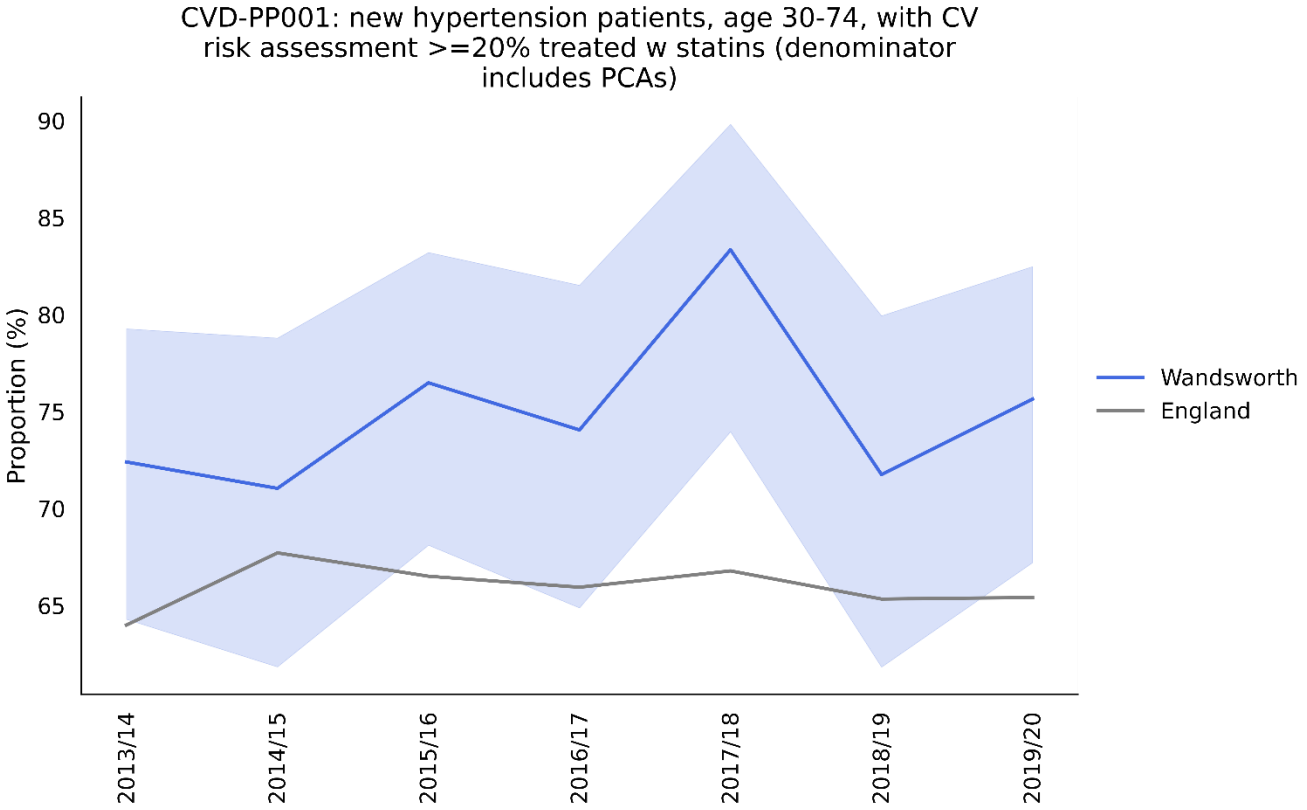
Wandsworth's proportion of high risk CVD patients, with a new diagnosis of hypertension in the last year, treated with statins was 75.6/100 (n=90), the 9th highest rate in London (**Figure 25**), 15.6% higher than the England average. The 2019/20, Wandsworth's figure was 4.5% higher than 2013/14, in comparison with a 2.2% across England (**Figure 26**).

Figure 25: High CVD Risk Patients with Hypertension Diagnosis that are Treated with Statins by the CCG, 2019/20



Source: PHE Public Health Profiles

Figure 26: High CVD Risk Patients with Hypertension Diagnosis that are Treated with Statins, 2014–2020



**- blue ribbon shows 95% confidence interval around Wandsworth's indicator values*

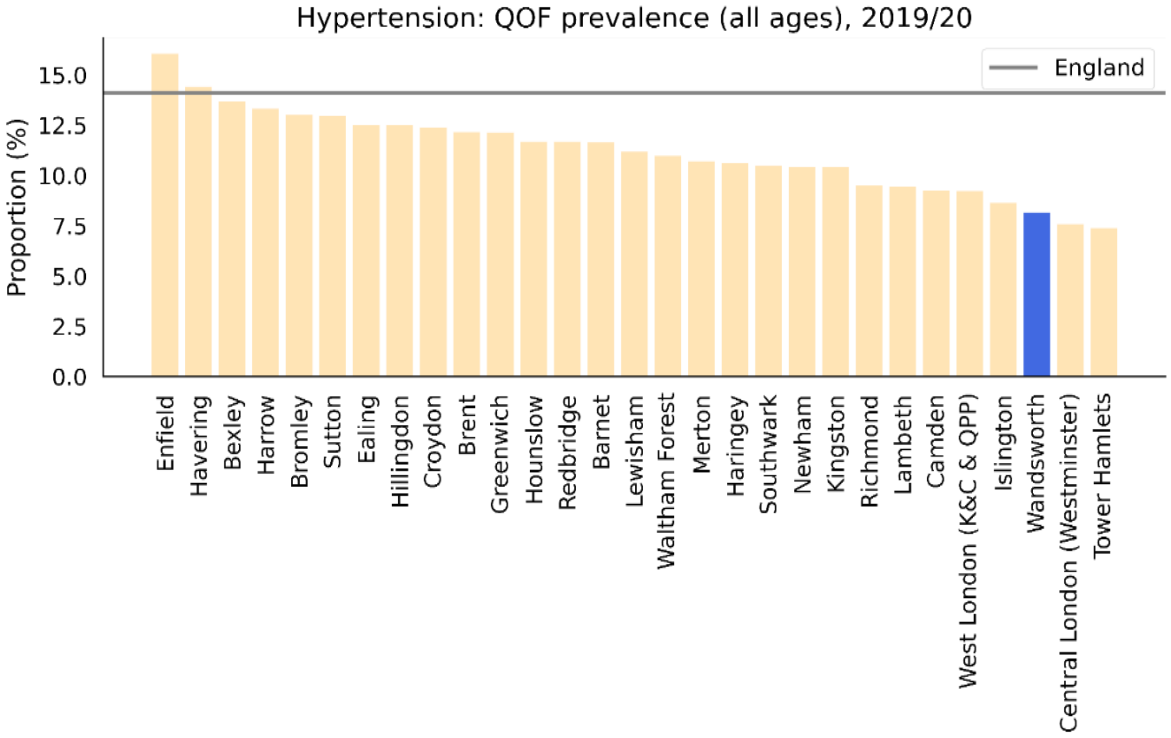
Source: PHE Public Health Profiles

GP recorded hypertension prevalence

Early diagnosis and the treatment of hypertension significantly reduces the risk of CVD.

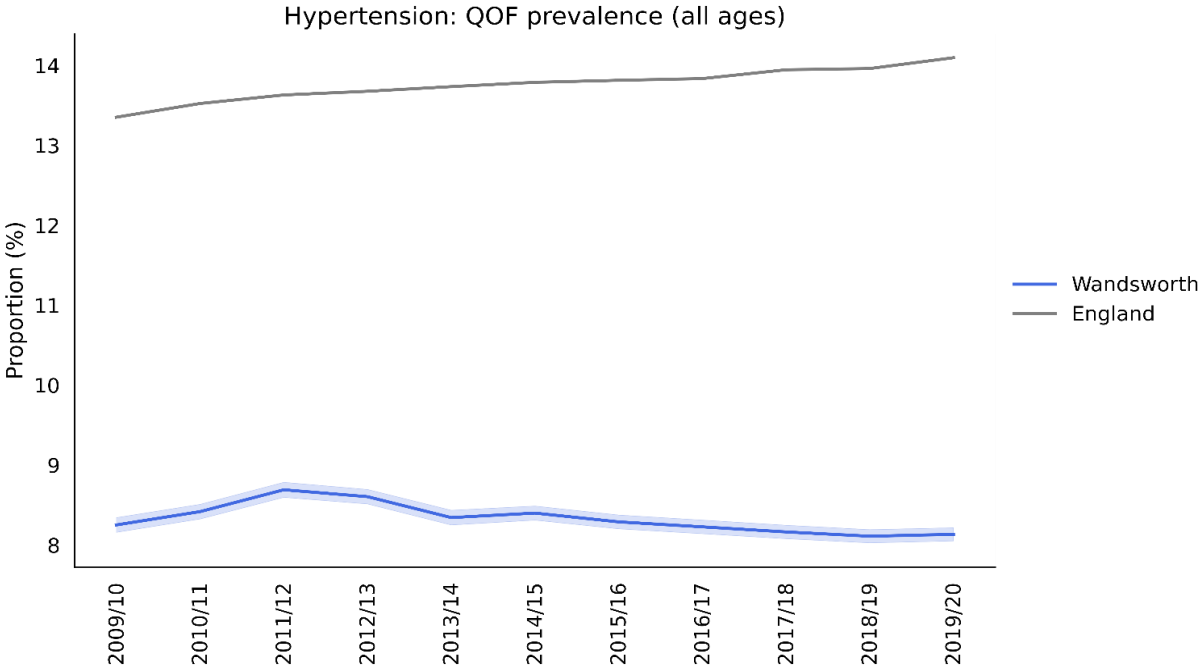
In 2019/20, Wandsworth's prevalence of hypertension was 8.1% (n=33985), lowest rate in London lower than the England average (**Figure 27**). Wandsworth's figure for 2019/20 was 1.4% lower from 2009/10, in comparison with a 5.6% increase across England (**Figure 28**). The trend in recorded prevalence in Wandsworth has been falling since 2011/12.

Figure 27: Recorded Prevalence of Hypertension by CCG, 2019/20



Source: PHE Public Health Profiles

Figure 28: Recorded Prevalence of Hypertension, 2010–2020

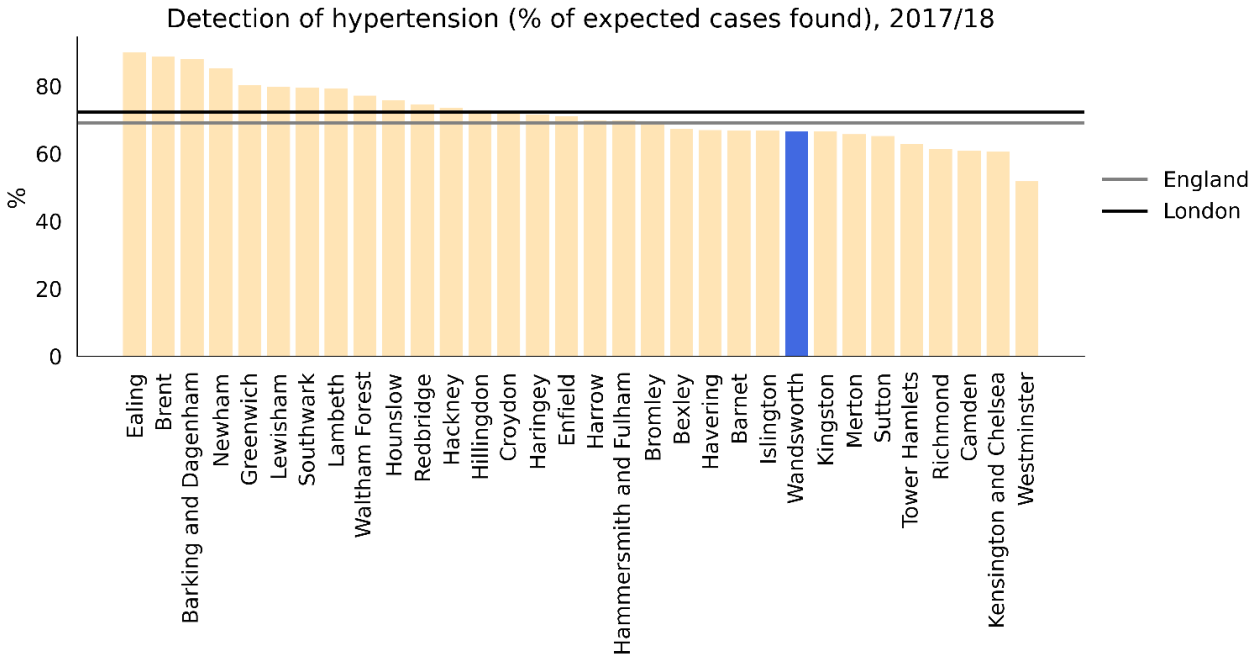


**- blue ribbon shows 95% confidence interval around Wandsworth's indicator values*
Source: PHE Public Health Profiles

Hypertension Detection Rate

In 2017/18, Wandsworth's GP recorded number of patients with hypertension (n=32,098) was just 66.6% of the expected number of patients with hypertension (n=48,170[22]). Wandsworth's ratio of observed to expected patients with hypertension is the 9th lowest rate in London (**Figure 29**), 3.6% lower than the England average and 7.7% lower than the London average.

Figure 29: Hypertension Observed vs Expected Ratio by local authority, 2017/18



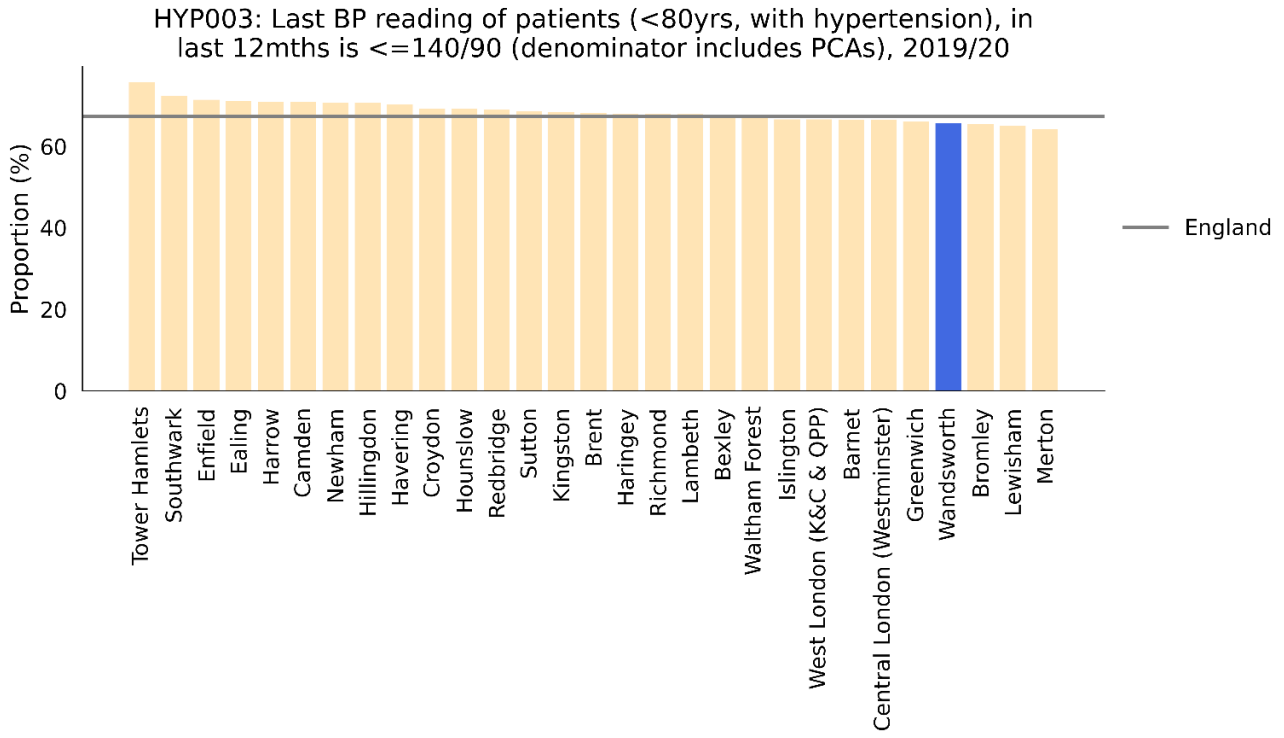
Source: Expected hypertension prevalence: PHE National Cardiovascular Intelligence Network. Adult hypertension prevalence estimates, 2017. Recorded prevalence: QOF 2017/18

Hypertension treatment

In 2019/20 Wandsworth's proportion of hypertensive patients aged under 80, with blood pressure measurements within the agreed limits of less than 140/90, was 65.7% (n=18288), the 4th lowest rate in London (**Figure 30**), 2.4% lower than the England average. No time trend data is available for this indicator.

[22] PHE National Cardiovascular Intelligence Network. Adult hypertension prevalence estimates, 2017.

Figure 30: Patients with Hypertension with Controlled Blood Pressure by CCG, 2019/20



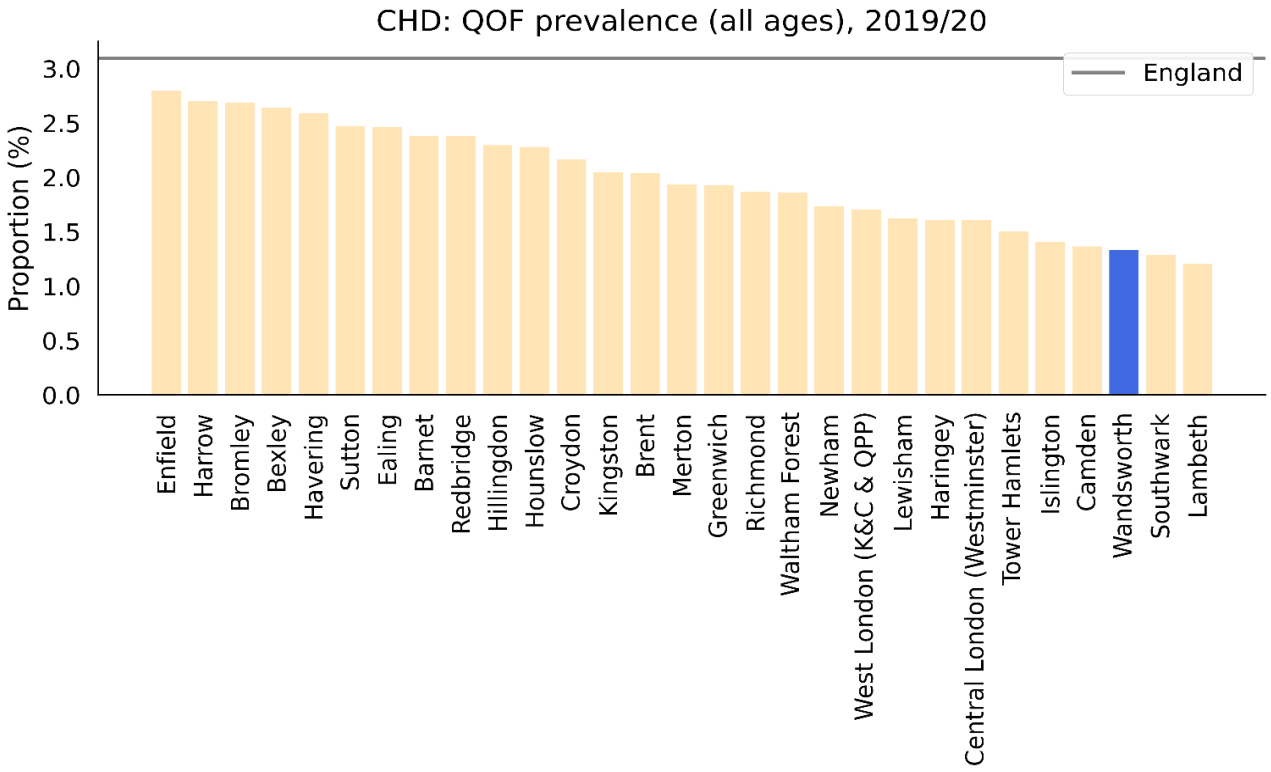
Source: PHE [Public Health Profiles]

2.4 Coronary Heart Disease (CHD)

GP recorded CHD prevalence

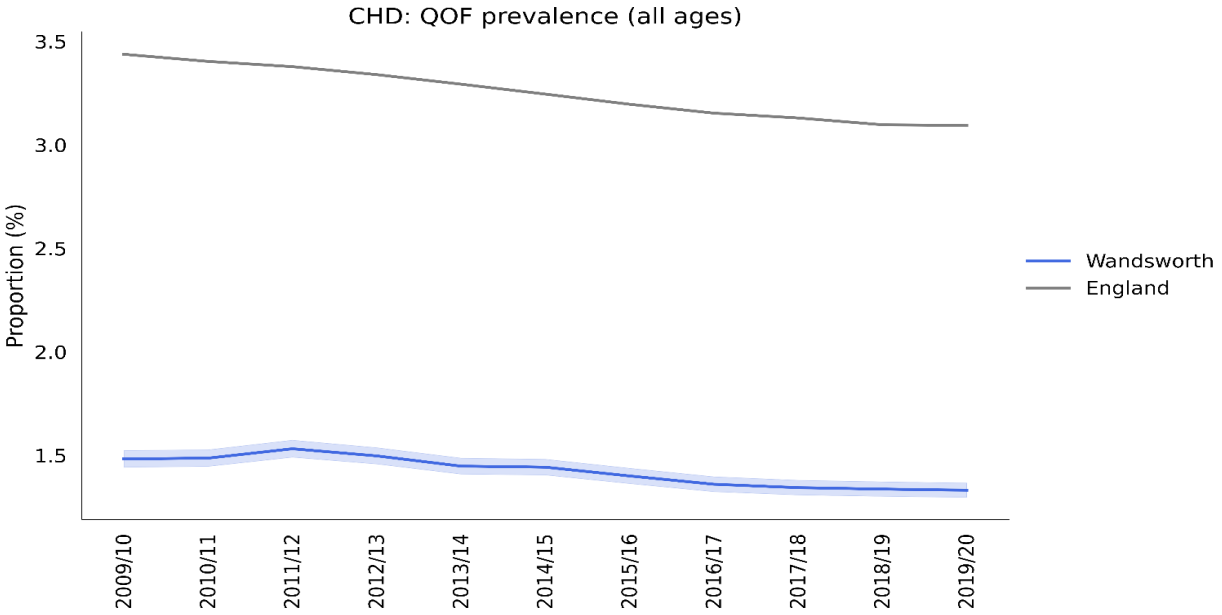
In 2019/20 Wandsworth's recorded prevalence of CHD in the GP population was 1.3/100 (n=5563), 3rd lowest in London (**Figure 31**), 57.0% lower than the England average. The prevalence in 2019/20 was 10.2% lower from 2009/10, in comparison with a 10.0% decrease in England's rate in the equivalent time period (**Figure 32**). The prevalence has been slowly reducing in the past decade in Wandsworth.

Figure 31: GP Recorded CHD Prevalence by CCG, 2019/20



Source: PHE Public Health Profiles

Figure 32: GP Recorded CHD Prevalence, 2011 – 2020

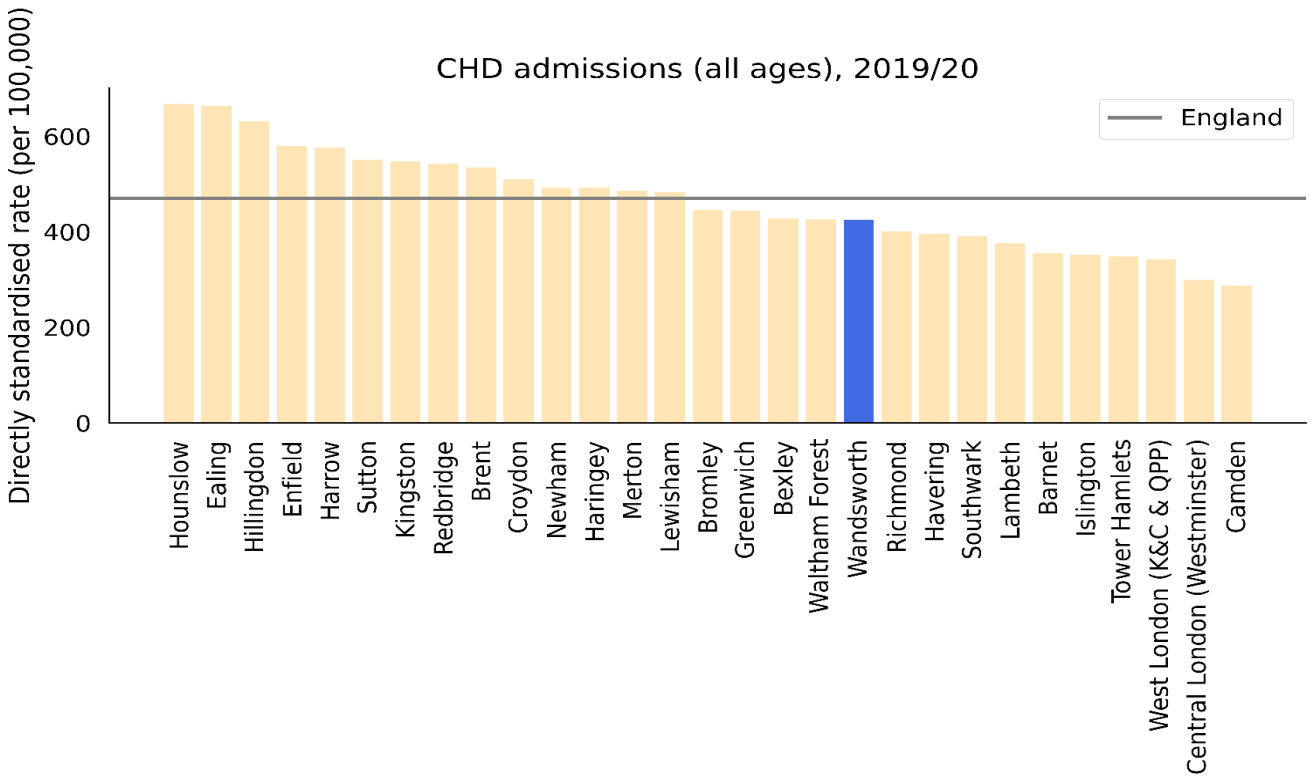


**- blue ribbon shows 95% confidence interval around Wandsworth's indicator values*
Source: PHE Public Health Profiles

CHD admissions

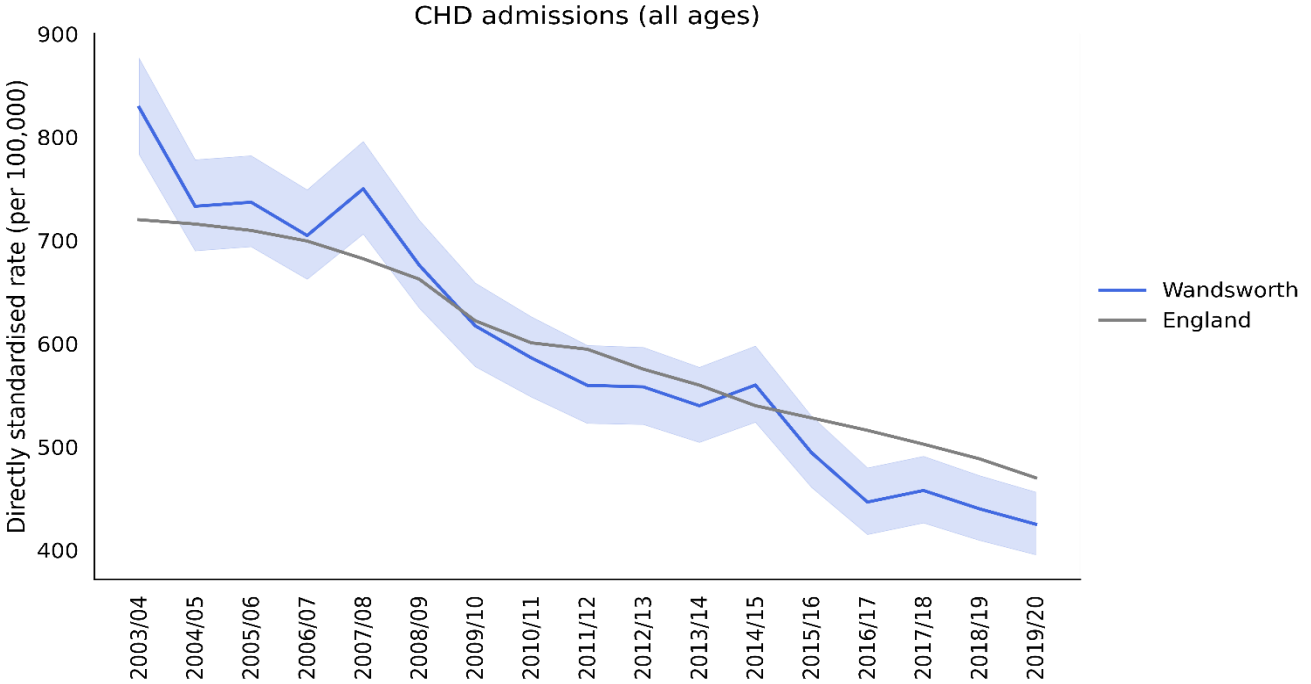
In 2019/20, Wandsworth's CHD admissions rate was 424.9/100,000 population (n=805), the 11th lowest in London (**Figure 33**), 9.6% lower than the England average. The Wandsworth's figure for 2019/20 was 8.7% lower than 2003/04, in comparison with a 34.7% decrease in England's rate in the same time period (**Figure 34**).

Figure 33: CHD Admissions by CCG, 2019/20



Source: PHE Public Health Profiles

Figure 34: CHD Admissions, 2004–2020



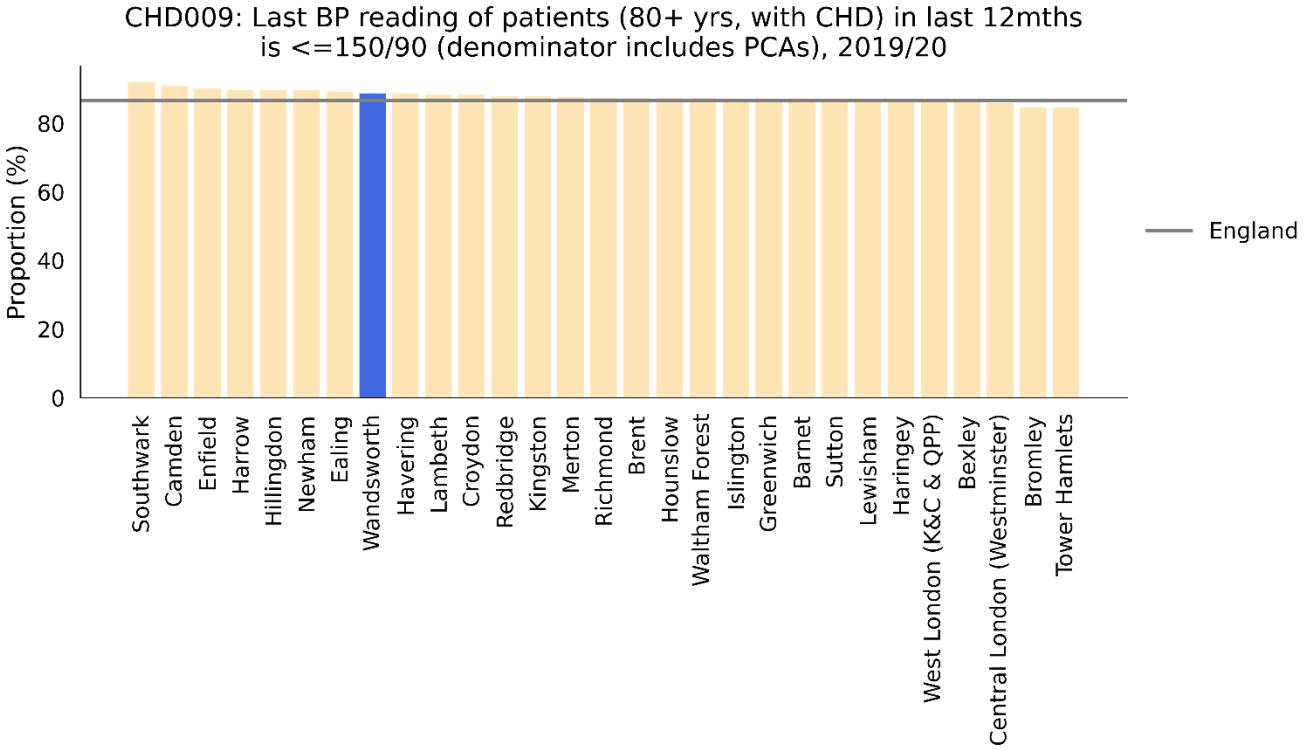
**- blue ribbon shows 95% confidence interval around Wandsworth's indicator values*

Source: PHE Public Health Profiles

CHD management

In 2019/20 Wandsworth's proportion of CHD patients aged 80+ with last blood pressure measurement within the agreed standard was 88.6% (n=1312), 8th highest in London (**Figure 35**), 2.5% higher than the England average. No time trend data is available for this indicator.

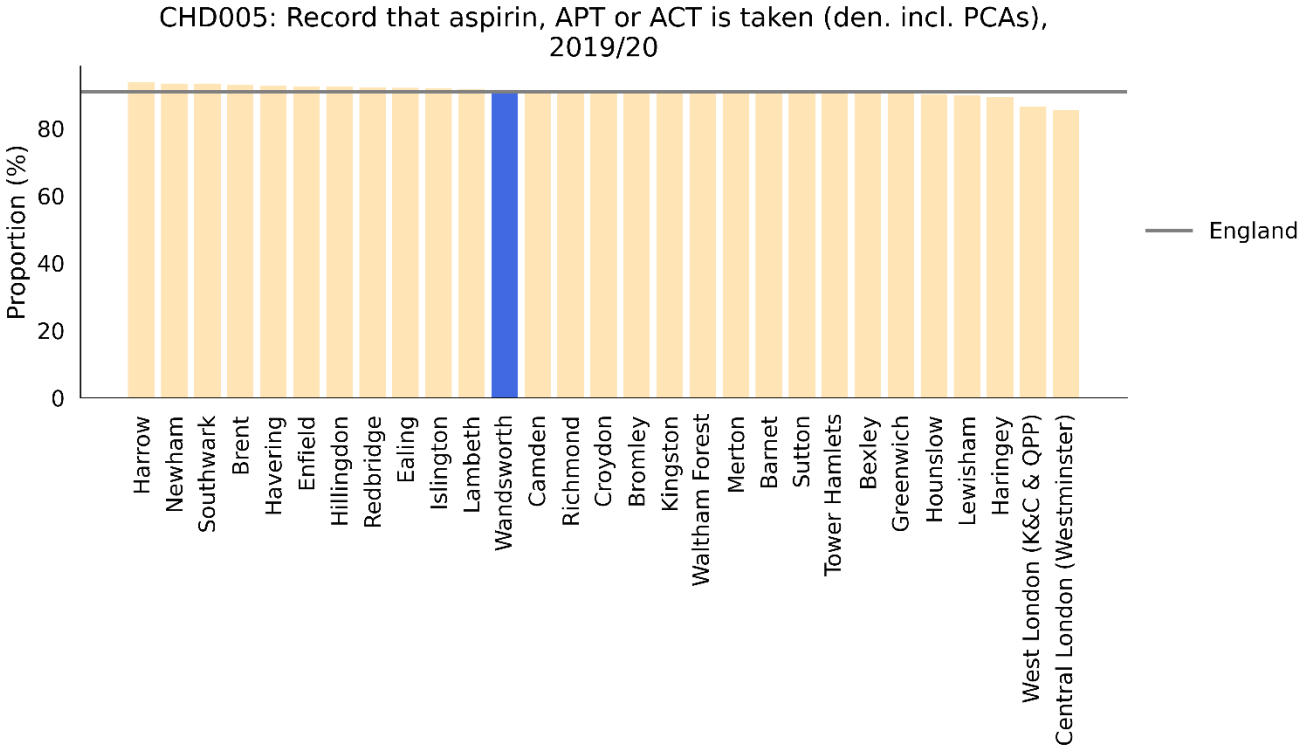
Figure 35: CHD Patients Aged 80+ with Blood Pressure Measurement within the agreed Standards by CCG, 2019/20



Source: PHE Public Health Profiles

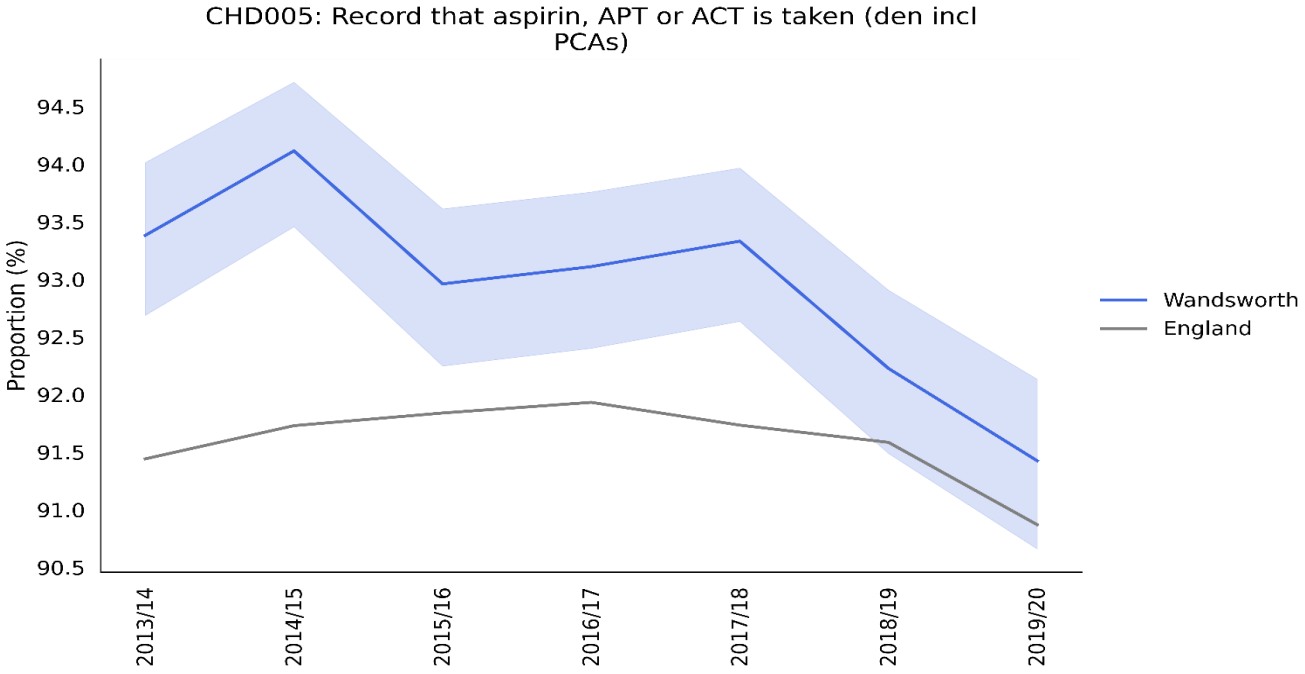
In 2019/20, the proportion of CHD patients in Wandsworth recorded as regularly taking recommended aspirin, or equivalent, was 91.4% (n=5086), 12th highest in London and 0.6% higher than the England average(**Figure 36**).The latest Wandsworth's figure was 2.1% lower from 2013/14, in comparison with a 0.6% decrease in England's rate (**Figure 37**). The uptake of aspirin, or equivalent, among Wandsworth's CHD patients has been slowly dropping since 2014/15.

Figure 36: CHD Patients Regularly Taking Recommended Dose of Aspirin or its Equivalent by CCG, 2018/19



Source: PHE Public Health Profiles

Figure 37: CHD Patients Regularly Taking Recommended Dose of Aspirin or its Equivalent, 2014–2020



**- blue ribbon shows 95% confidence interval around Wandsworth's indicator values*

Source: PHE Public Health Profiles

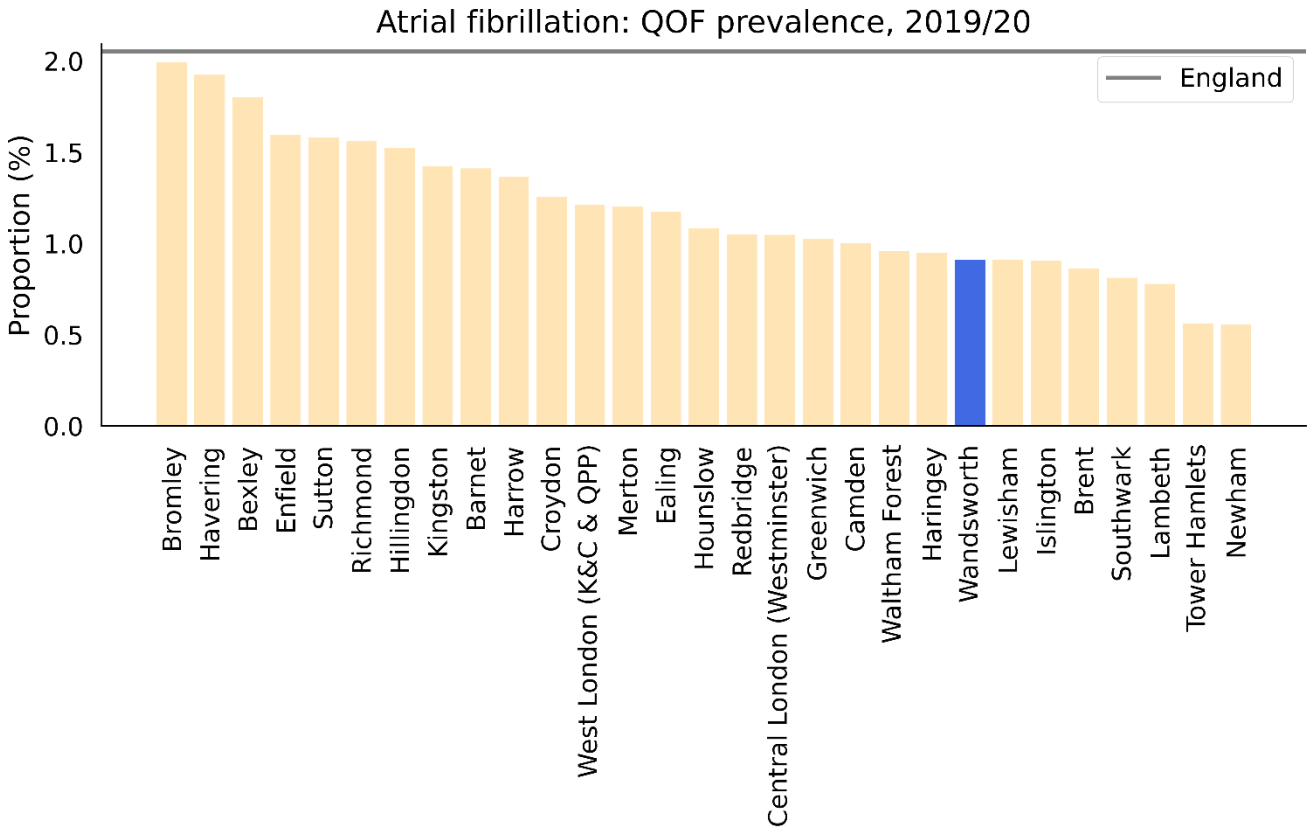
2.5 Atrial Fibrillation

Atrial fibrillation (AF) is an important cause of morbidity and mortality. The prevalence of AF in England is rising, possibly due to improved survival rates of people with CHD. 5% of over 65s, and 9% of over 75-year-olds live with AF. Atrial fibrillation is associated with a 500% increase in risk of stroke.

GP recorded AF prevalence

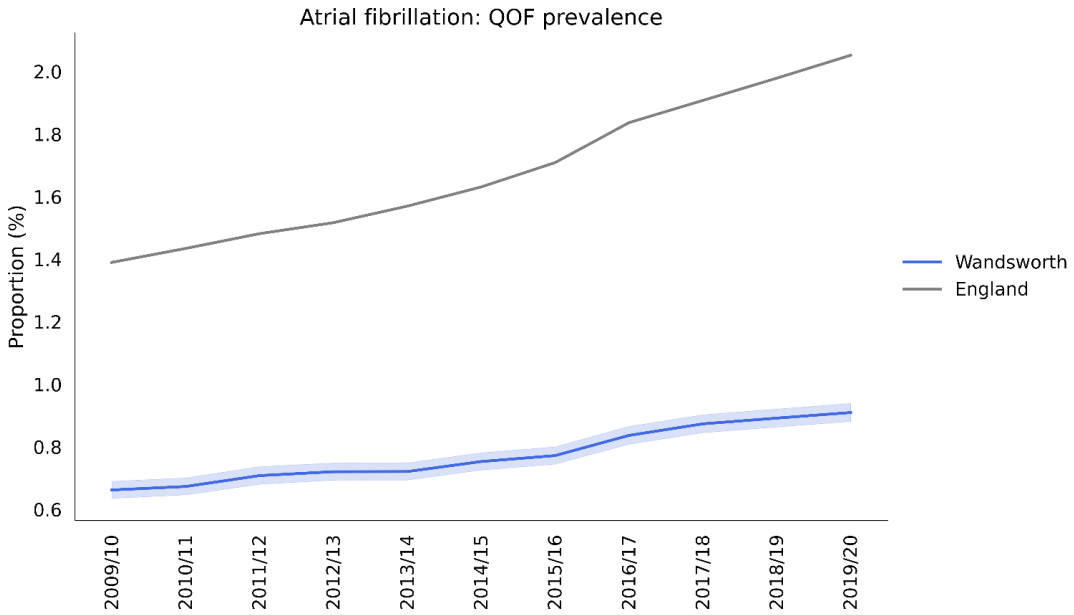
In 2019/20 Wandsworth's recorded prevalence of CHD in GP population was 0.9/100 (n=3800), 8th lowest in London, 55.7% lower than the England average (**Figure 38**), . The latest Wandsworth's figure for 2019/20 was 37.4% higher from 2009/10, in comparison with a 47.7% increase in England's rate in the equivalent time period (**Figure 39**).

Figure 38: GP Recorded AF Prevalence by CCG, 2019/20



Source: PHE Public Health Profiles

Figure 39: GP Recorded AF Prevalence, 2011 – 2020



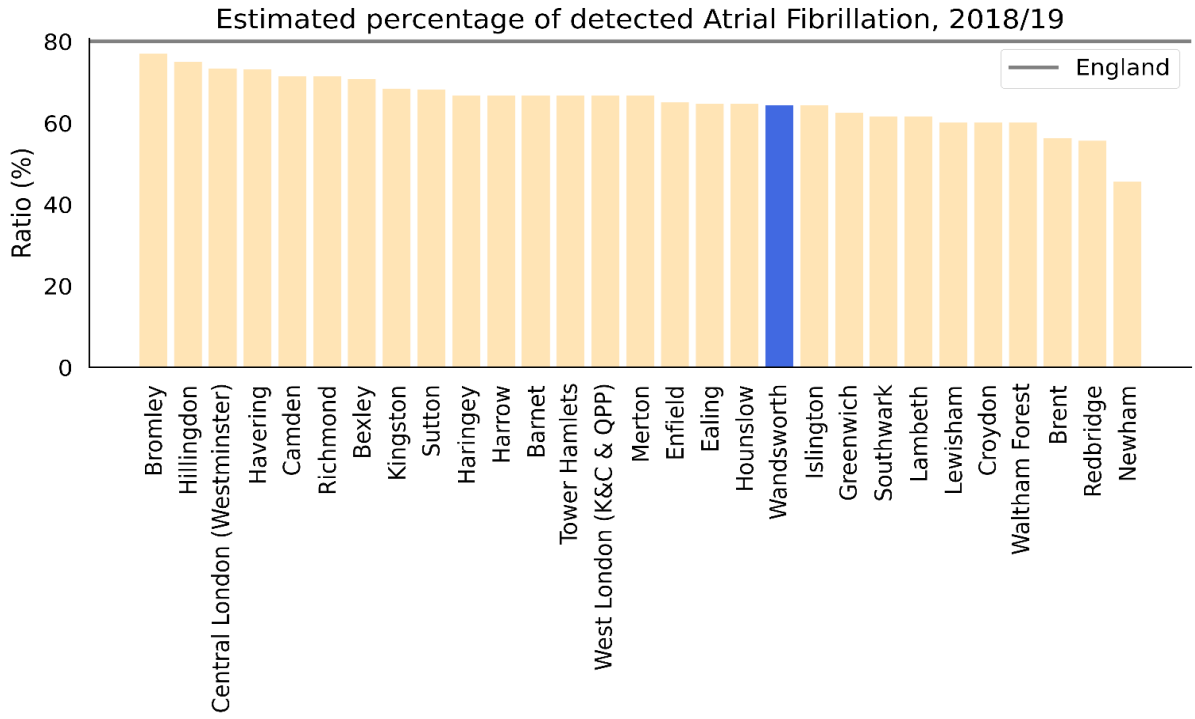
**- blue ribbon shows 95% confidence interval around Wandsworth's indicator values*

Source: PHE Public Health Profiles

AF detection rate

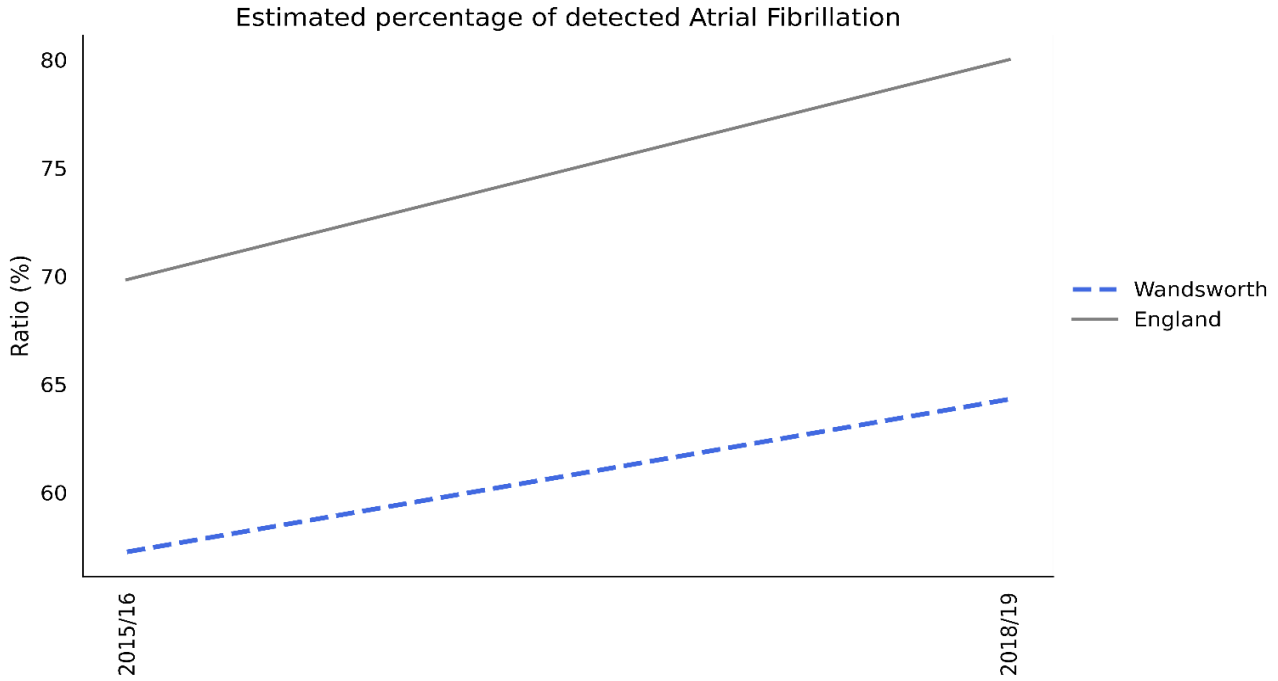
In 2018/19, Wandsworth's estimated detection rate for AF was 64.3%, the 10th lowest in London, and 19.6% lower than the England average (**Figure 40)** . The latest Wandsworth's figure for 2018/19 was 12.3% higher from 2015/16, in comparison with a 14.6% increase in England's rate in the equivalent time period (**Figure 41**).

Figure 40: Estimated AF Detection Rate by CCG, 2018/19



Source: PHE Public Health Profiles

Figure 41: Estimated AF Detection Rate, 2016 – 2019



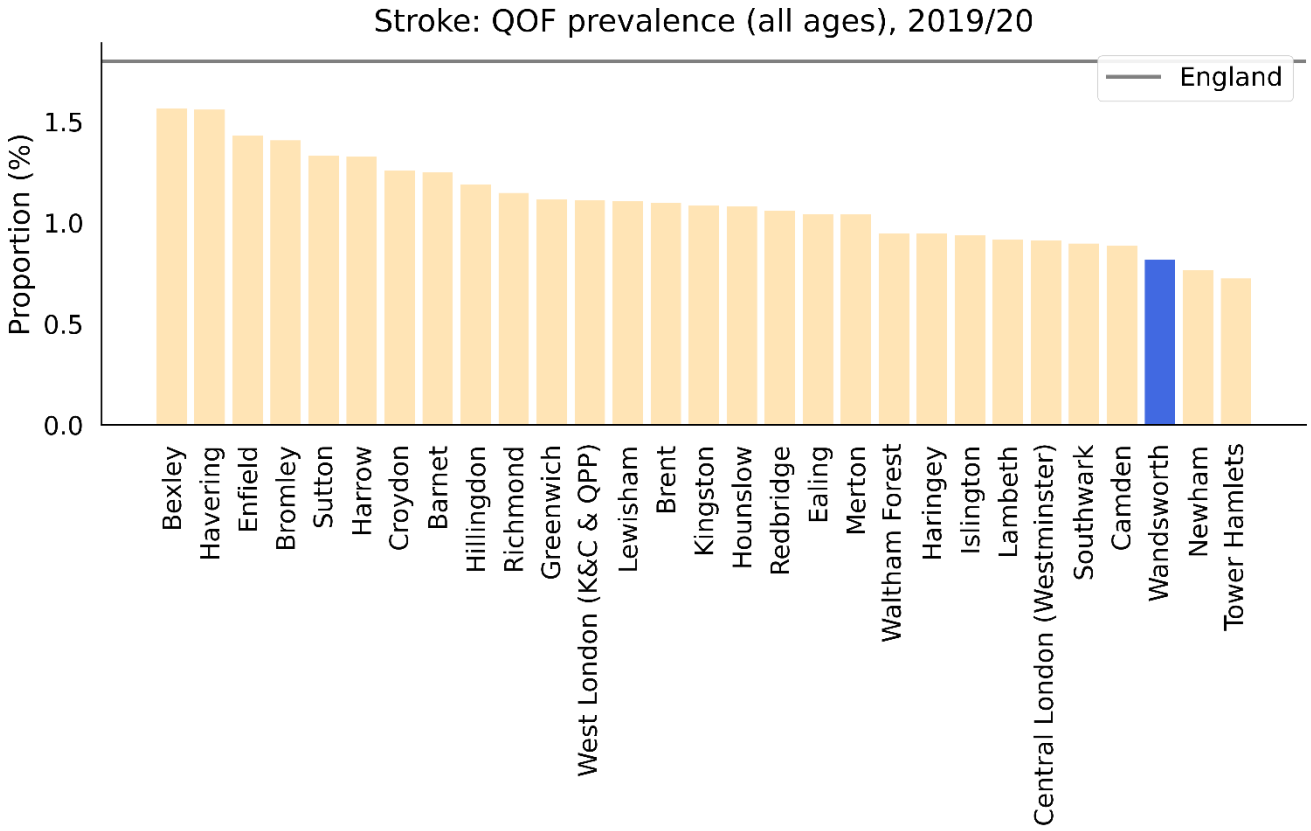
**- blue ribbon shows 95% confidence interval around Wandsworth's indicator values*
Source: PHE Public Health Profiles

2.6 Stroke

GP recorded prevalence of stroke

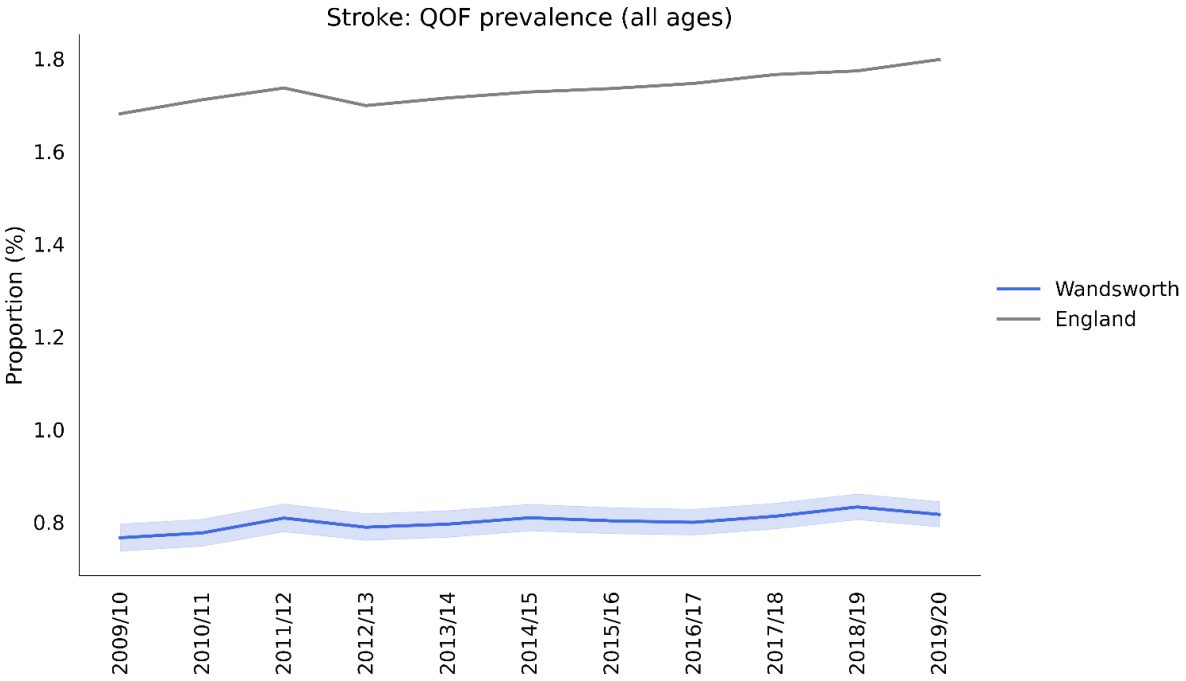
In 2019/20, Wandsworth's recorded prevalence of stroke in the GP population was 0.8/100 (n=3412), the 3rd lowest rate in London, 54.6% lower than the England average (**Figure 42**). The latest Wandsworth's figure for 2019/20 was 6.6% higher from 2009/10, in comparison with a 7.0% increase in England's rate in the equivalent time period (**Figure 43**).

Figure 42: GP Recorded Stroke Prevalence by CCG, 2019/20



Source: PHE [Public Health Profiles]

Figure 43: GP Recorded Stroke Prevalence, 2011 – 2020



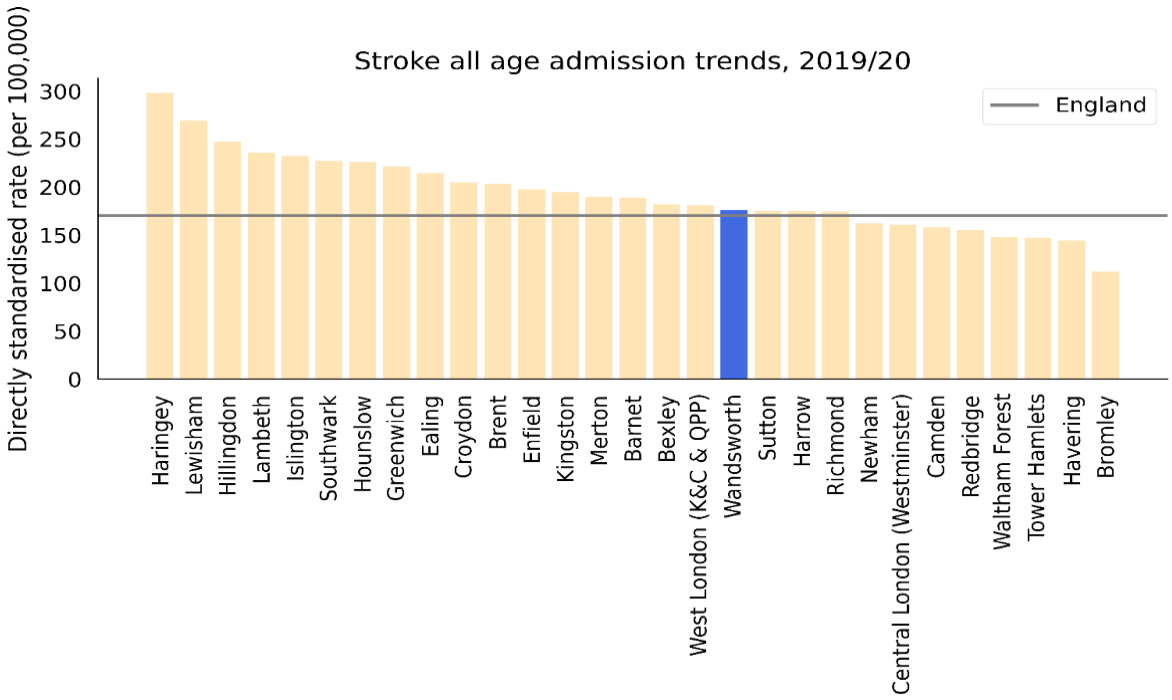
**- blue ribbon shows 95% confidence interval around Wandsworth's indicator values*

Source: PHE [Public Health Profiles]

Stroke Admissions

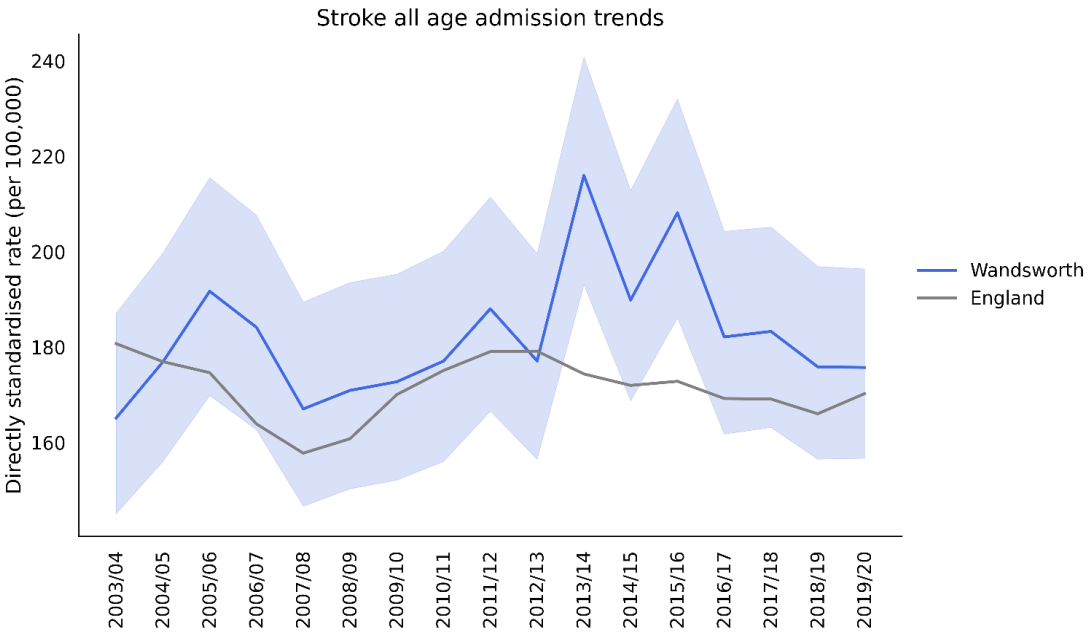
In 2019/20, Wandsworth's CHD admission rate was 175.7/100,000 population (n=330) this is the 12th lowest rate in London (**Figure 44**), which was 3.2% higher than the England average. The latest Wandsworth's figure for 2019/20 was also 6.4% higher from 2003/04, in comparison with a 5.8% decrease in England's rate in the equivalent time period (**Figure 45**). Stroke admissions have been declining since 2015/16.

Figure 44: Stroke Admissions by CCG, 2019/20



Source: PHE Public Health Profiles

Figure 45: Stroke Admissions, 2004–2020

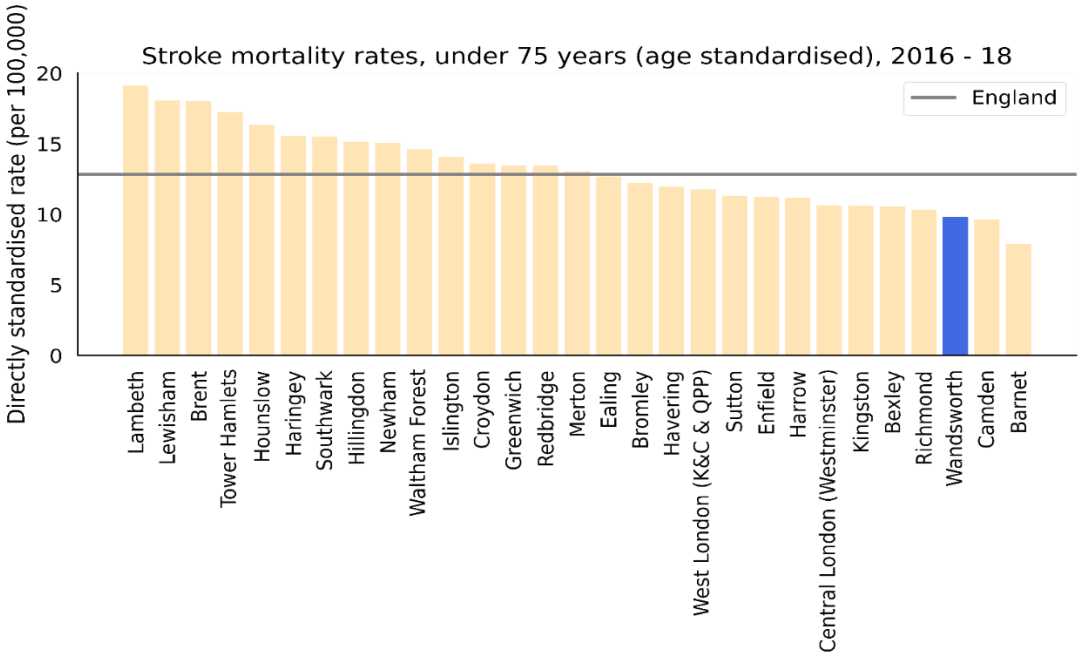


**- blue ribbon shows 95% confidence interval around Wandsworth's indicator values*
Source: PHE Public Health Profiles

Stroke mortality

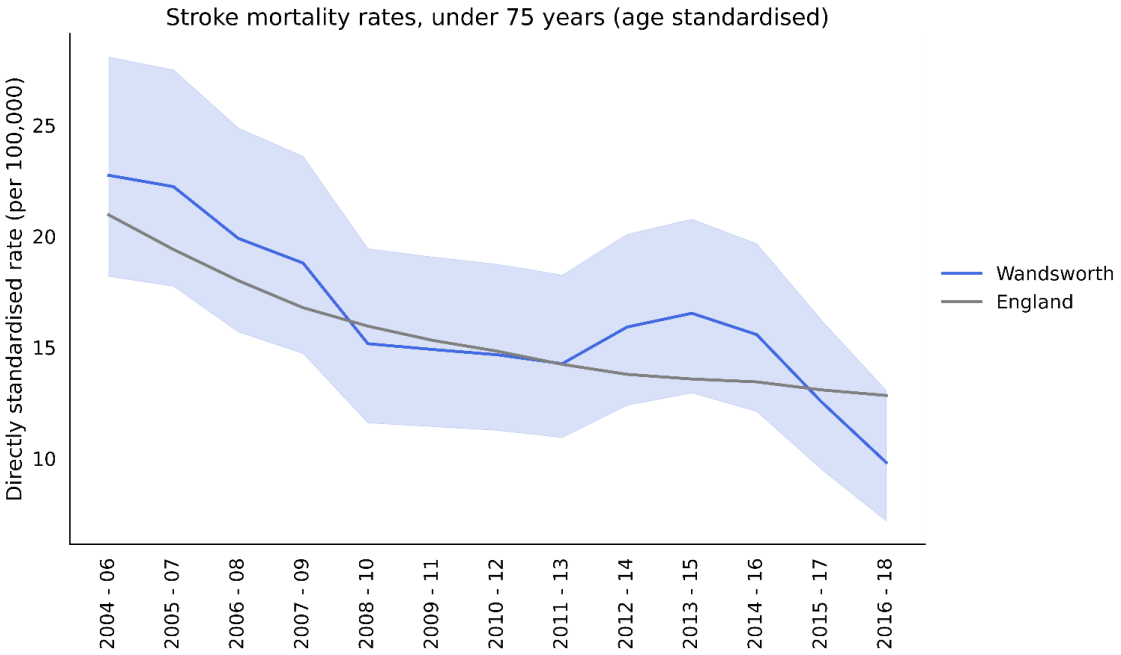
In 2019/20, Wandsworth's under 75 years stroke mortality rate was 9.8/100,000 population (n=49, the 3rd lowest in London (which was 23.5% lower than the England average (**Figure 46**). The Wandsworth's figure for 2016–18 was 56.9% lower than 2004–06, in comparison with a 38.8% decrease in England's rate in the equivalent time period (**Figure 47**).

Figure 46: Stroke Mortality in People Aged under 75 by CCG, 2019/20



Source: PHE Public Health Profiles

Figure 47: Stroke Mortality in People Aged Under 75, 2004–2020



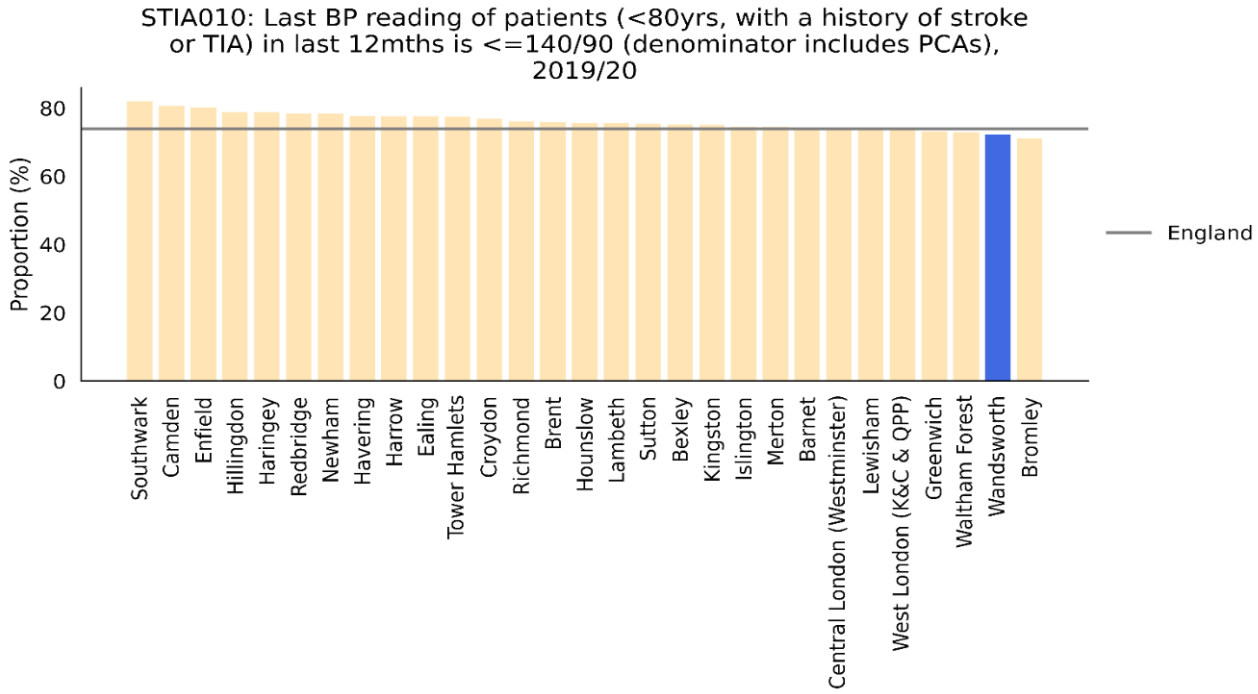
**- blue ribbon shows 95% confidence interval around Wandsworth's indicator values*

Source: PHE Public Health Profiles

Stroke management

In 2019/20 Wandsworth's proportion of stroke patients under 80 years who had a blood pressure measurement within the agreed standards was 72.3% (n=1717), the 2nd lowest in London and 2.2% lower than the England average (**Figure 48**). No time trend data is available for this indicator.

Figure 48: Stroke Patients aged 80+ with Blood Pressure Measurement Within the Agreed Standards by CCG, 2019/20



Source: PHE Public Health Profiles

3. Cancer

Cancer is a group of diseases involving abnormal cell growth with the potential to invade or spread to other parts of the body. These contrast with benign tumours, which do not spread. This section presents cancer prevalence (including new diagnoses), hospitalisations and cancer survival rates of Wandsworth's patients.

Most of the data presented are published for the registered CCG population[23] (patients registered with a Wandsworth's GP). In 2019/20, five South West London (SWL) CCGs merged into a single South West London CCG. This makes it difficult to distinguish cancer information specific to Wandsworth residents, as the latest 2019/20 and 2020/21 data is only available at SWL CCG level.

For most CCG indicators, the data presented in the chapter is two years old.

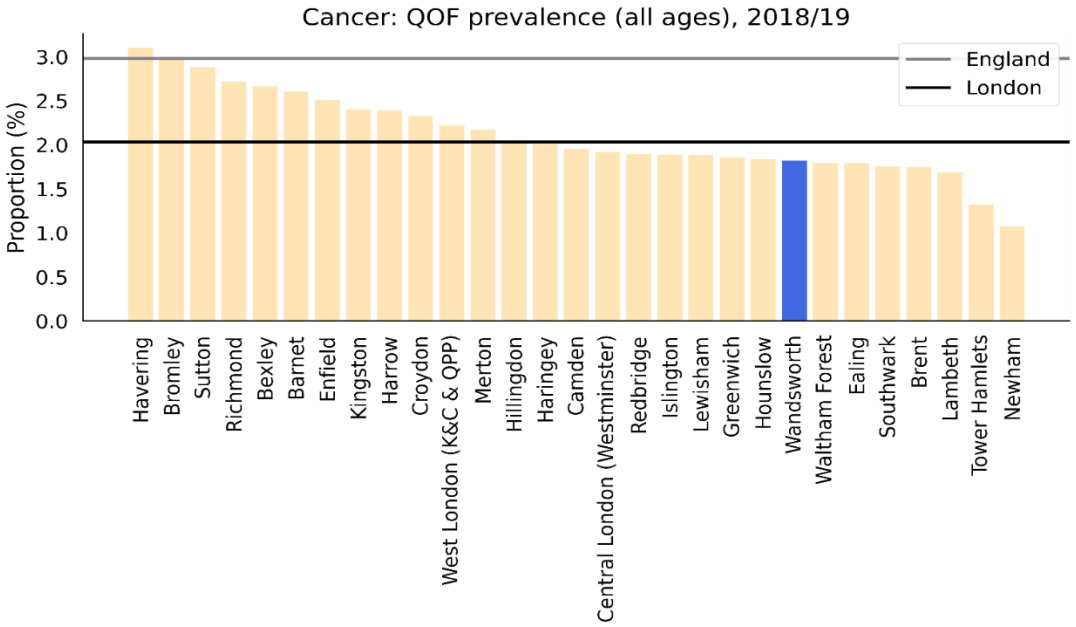
[23] PHE. Public Health Profiles. 2021

3.1 Cancer Diagnosis and Prevalence

GP recorded cancer prevalence

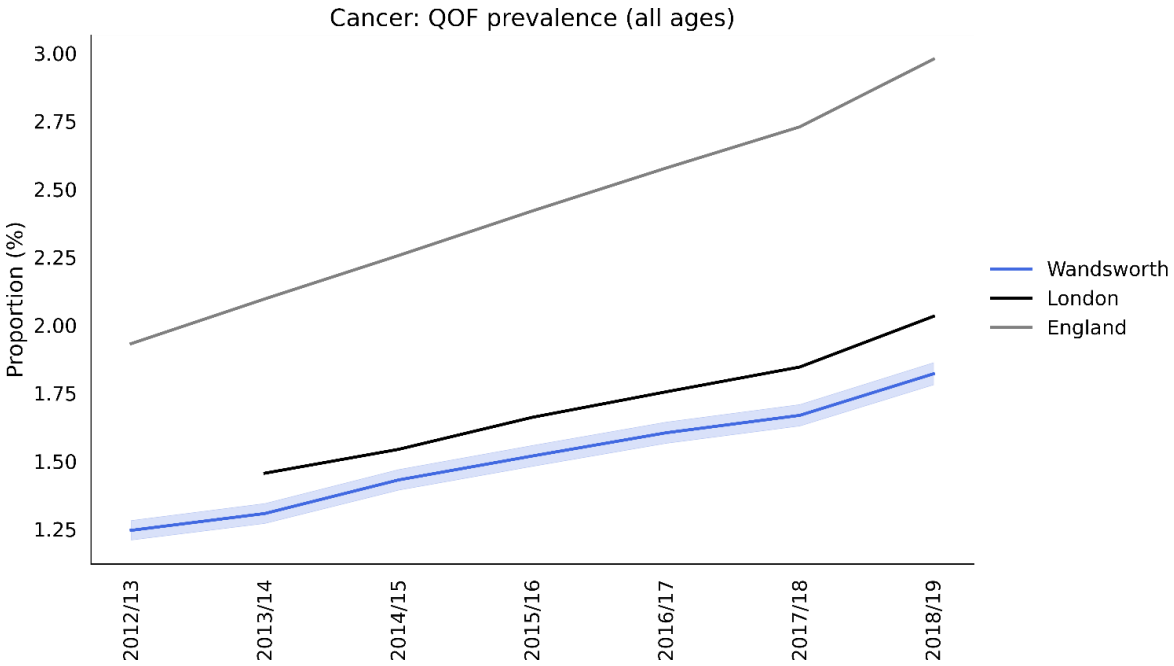
In 2018/19, Wandsworth's GP recorded cancer prevalence was 1.8/100 (n=7484), the 8th lowest rate in London and 38.9% lower than the England average (**Figure 49**). The latest Wandsworth's figure was 46.2% higher from 2012/13, in comparison with a 54.2% increase in England in the equivalent time period (**Figure 50**).

Figure 49: GP Recorded Cancer Prevalence by CCG, 2018/19



Source: PHE Public Health Profiles

Figure 50: GP Recorded Cancer Prevalence, 2013 – 2019



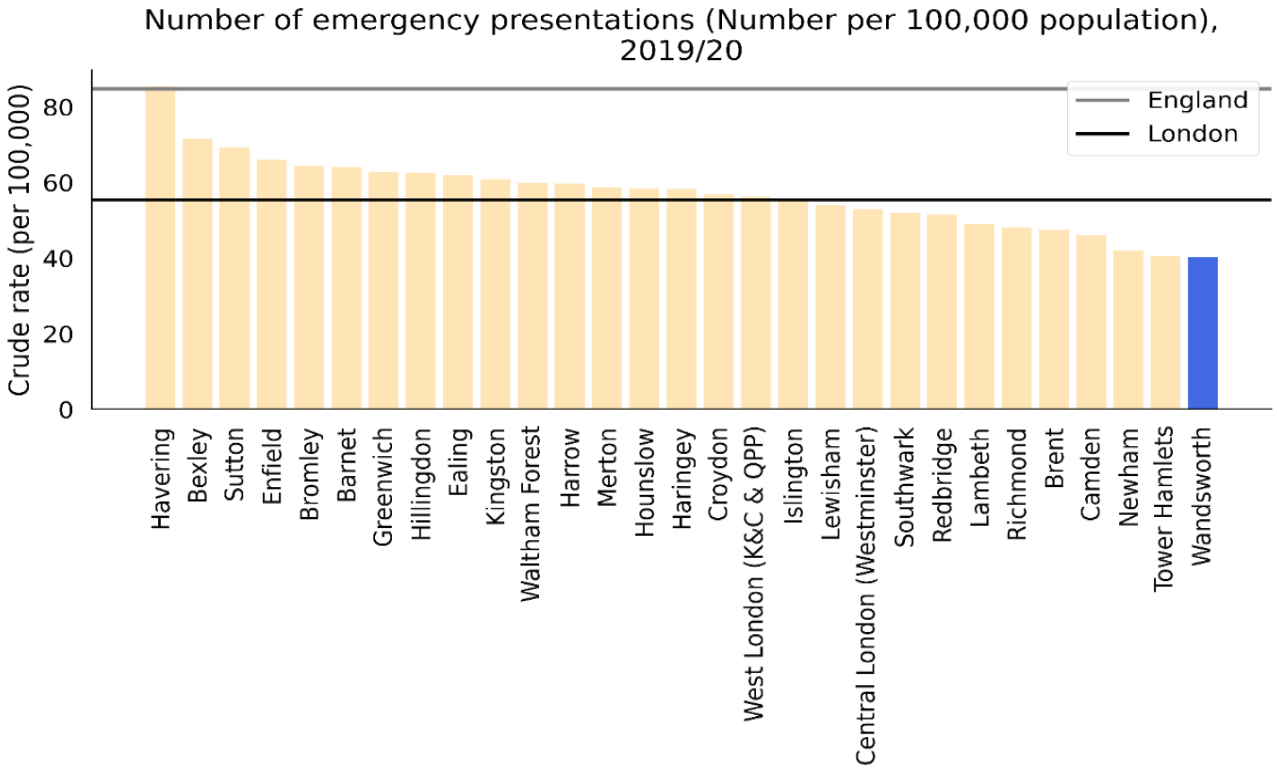
**- blue ribbon shows 95% confidence interval around Wandsworth's indicator values*
Source: PHE Public Health Profiles

3.2 Cancer Emergency Presentations

In 2019/20, Wandsworth's rate of emergency cancer presentations (cancers diagnosed in hospital following an emergency admission) was 40.2/100,000 population (n=168), the lowest rate in London, 52.6% lower than the England average, and 27.4% lower than the London average (**Figure 42**). The latest Wandsworth's figure for 2019/20 was 36.1% lower from 2012/13, in comparison with a 7.8% decrease in England's rate in the equivalent time period (**Figure 43**).

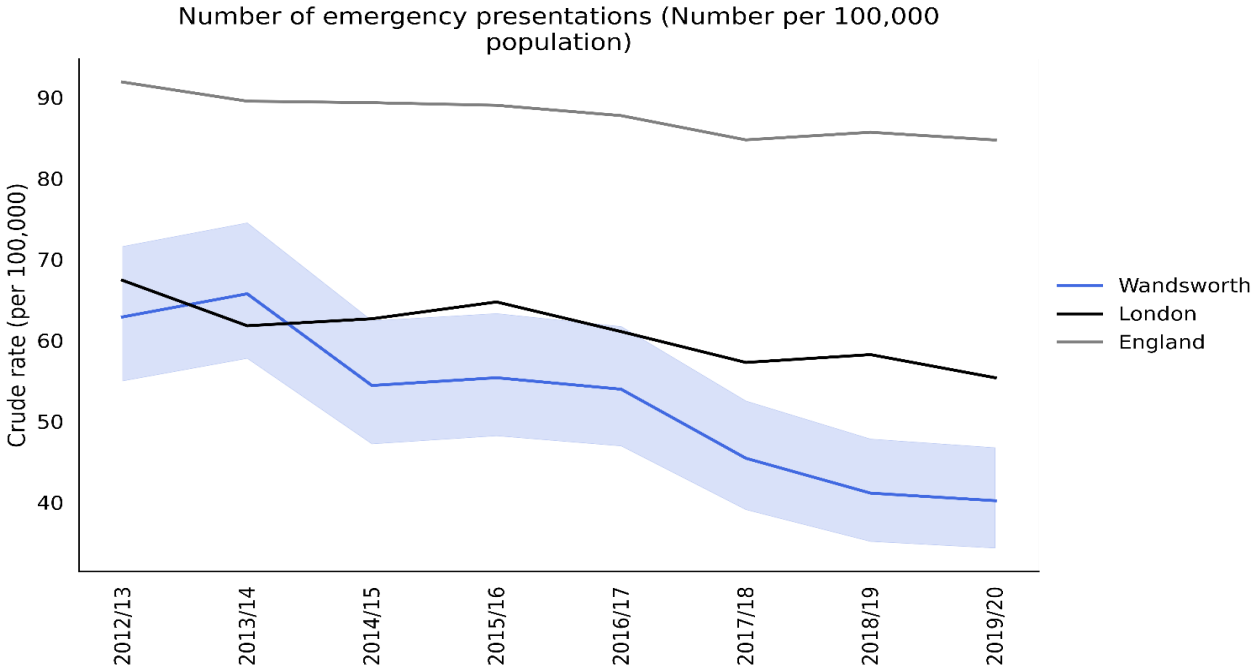
The 2019/20 rate of non-emergency cancer presentations for Wandsworth was 221/100,000 population, which means that 15.4% of cancer presentations were identified during an emergency hospital stay; the equivalent percentages for England and London were higher, at 17.8% and 18.4% respectively.

Figure 42: Cancer Emergency Presentations by CCG, 2019/20



Source: PHE Public Health Profiles

Figure 43: Cancer Emergency Presentations, 2013–2020



**- blue ribbon shows 95% confidence interval around Wandsworth's indicator values*

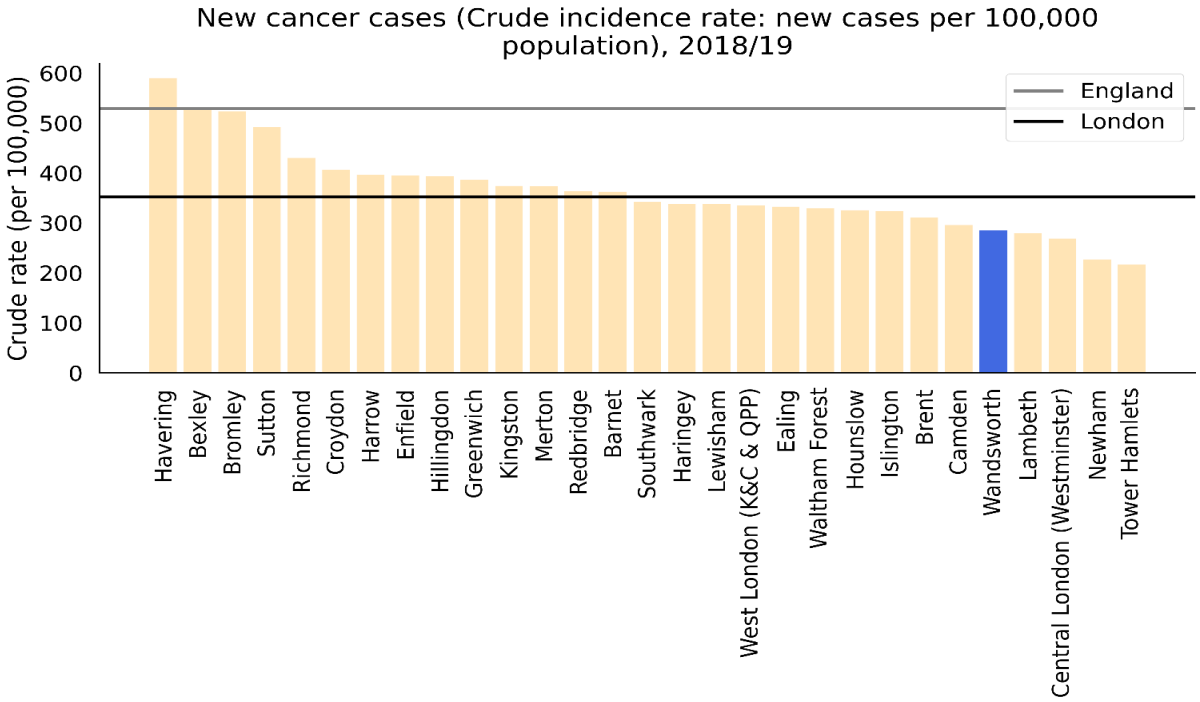
Source: PHE Public Health Profiles

3.3 Diagnosis

New cancer diagnoses

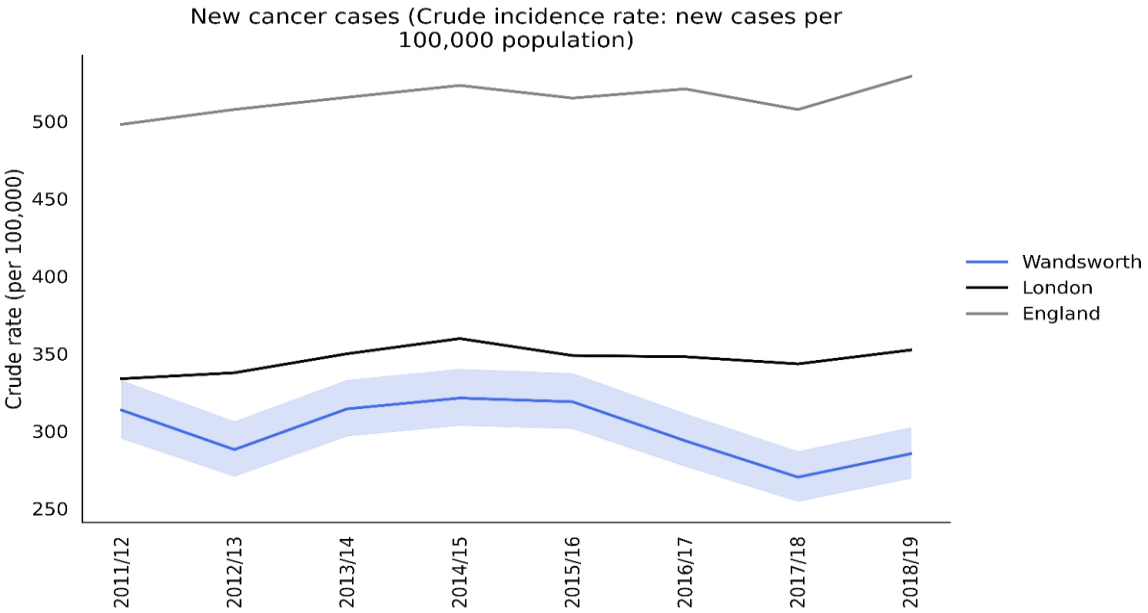
In 2018/19, Wandsworth's new cancer diagnosis rate was 285.3/100,000 population (n=1172), the 5th lowest rate in London, 46.1% lower than the England average, and 19.0% lower than the London average (**Figure 51**). The latest Borough's figure for 2018/19 was also 9.0% lower from 2011/12, in comparison with a 6.2% increase in England's rate in the equivalent time period (**Figure 52**).

Figure 51: New Cancer Diagnoses by CCG, 2019/20



Source: PHE Public Health Profiles

Figure 52: New Cancer Diagnoses, 2012–2019

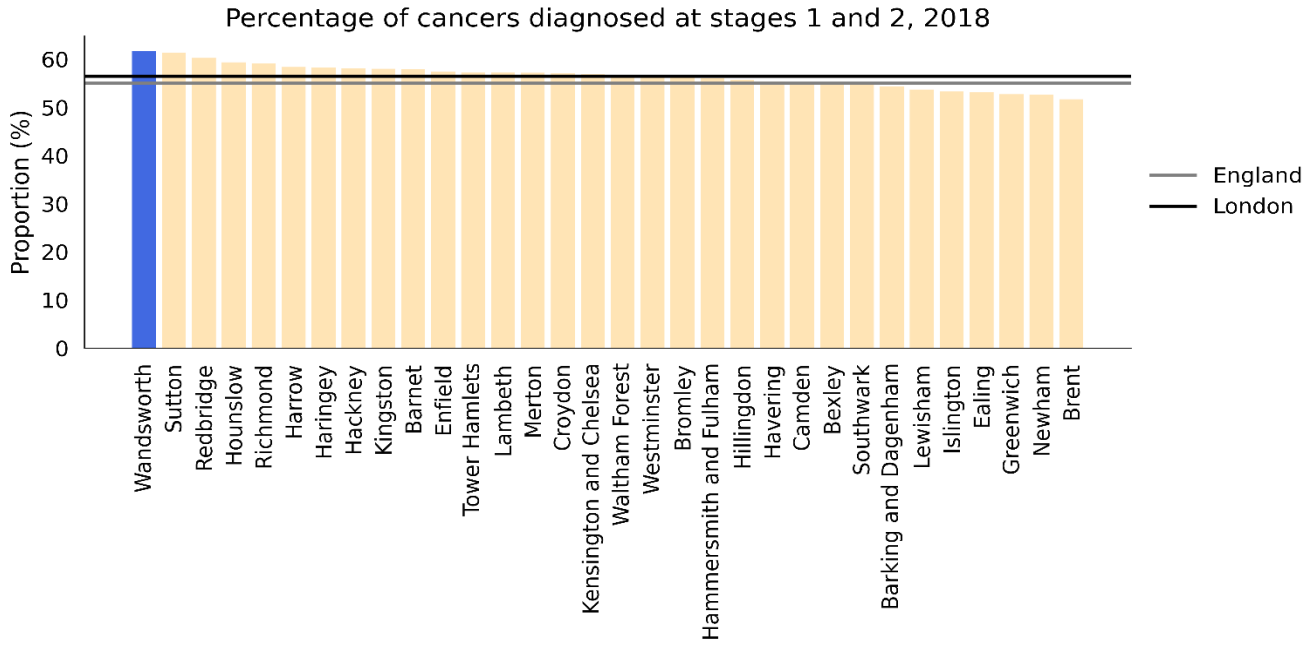


**- blue ribbon shows 95% confidence interval around Wandsworth's indicator values*
Source: PHE Public Health Profiles

Cancer diagnosed at early stages

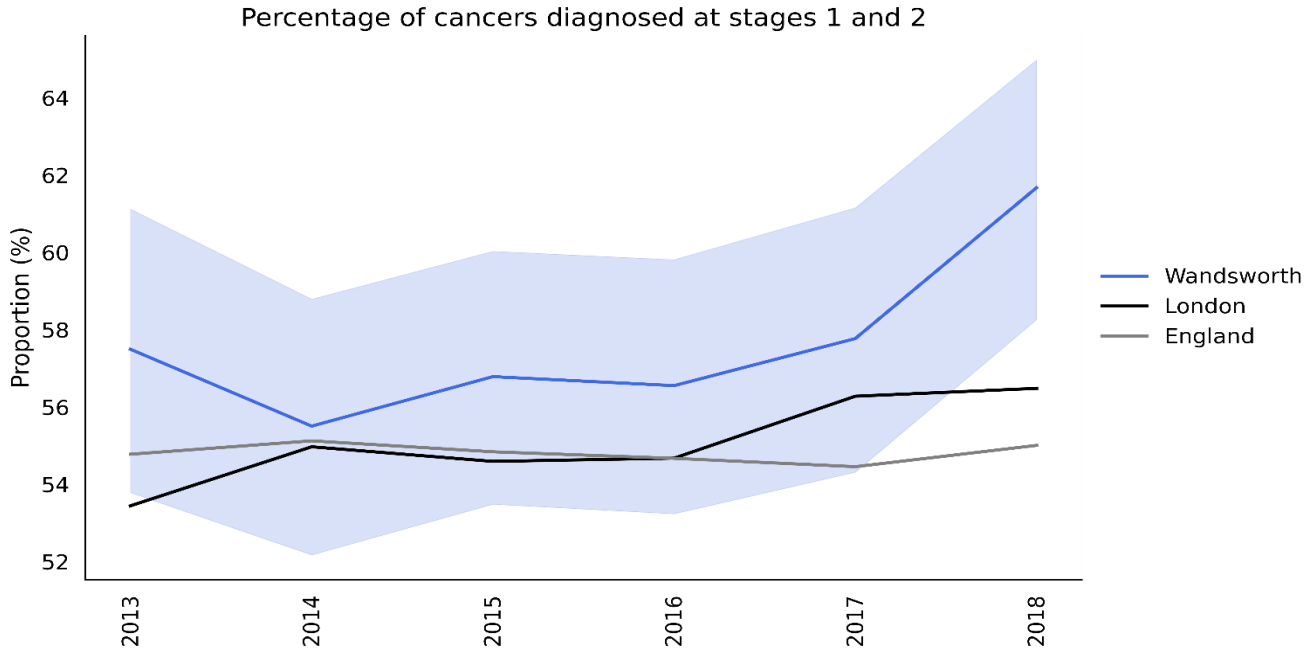
In 2018, Wandsworth's proportion of cancer diagnosed at early stages of disease was 61.7% (n=494), the highest rate in London, which is 12.1% higher than the England average and 9.2% higher than the London average (**Figure 53**). The latest Borough's figure for 2018 was 7.3% higher from 2013, in comparison with a 0.4% increase in England over the equivalent time period (**Figure 54**).

Figure 53: Percentage of Cancer Diagnoses made at Early Stages of the Disease by Local Authority, 2018



Source: PHE Public Health Profiles

Figure 54: Percentage of Cancer Diagnoses made at Early Stages of the Disease, 2013–2018



**- blue ribbon shows 95% confidence interval around Wandsworth's indicator values*
Source: PHE Public Health Profiles

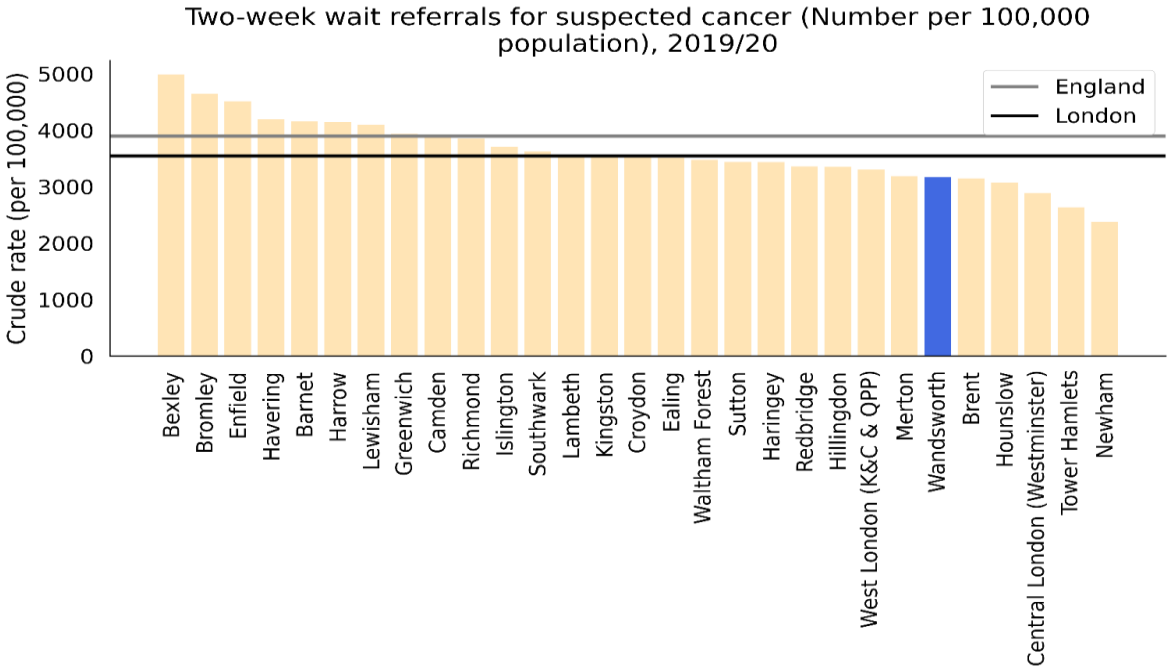
3.4 Two Week Wait Referral Rate

The Two-Week Wait (2WW) referral pathway for earlier diagnosis of suspected cancer was introduced in England in 2000. Nonetheless, a significant proportion of patients with cancer are diagnosed by other routes (detection rate), only a small proportion of 2WW referrals have cancer (conversion rate).

Two Week Wait Referral Rate for Suspected Cancer

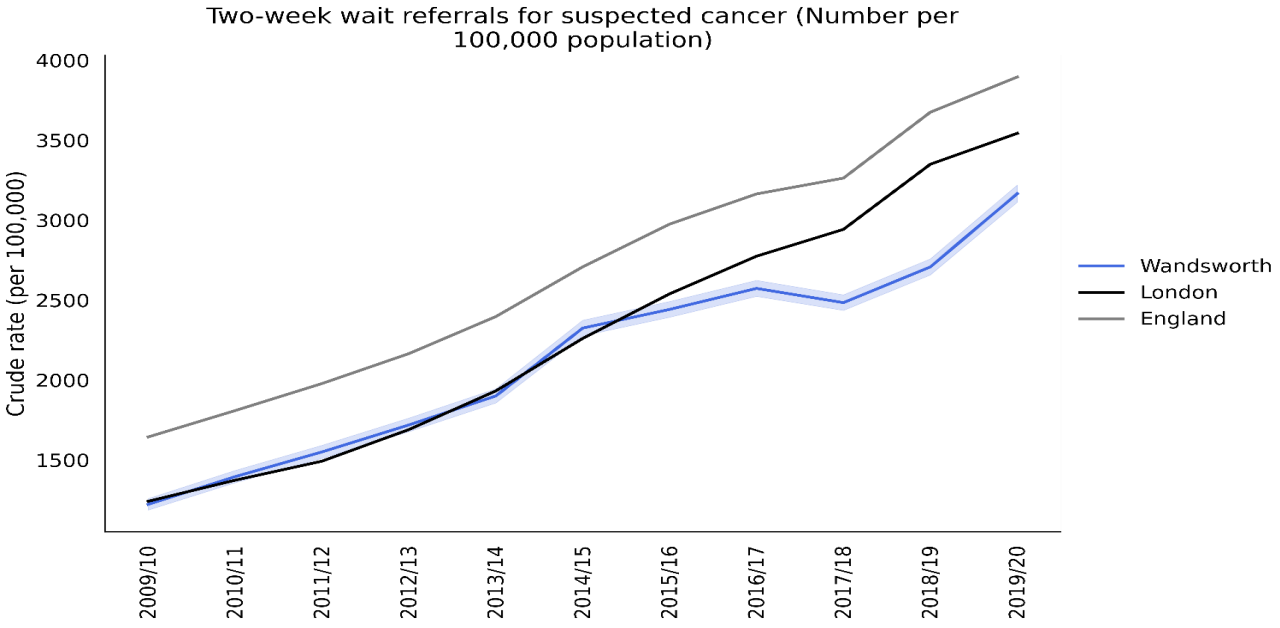
In 2019/20, Wandsworth's Two Week Wait crude referral rate was 3165.6 per 100,000 population (n=13229), the 6th lowest rate in London, 18.7% lower than the England average, and 10.7% lower than the London average (**Figure 55**). Although the rate of Two Week Wait referrals remains significantly lower than the England and London averages, it has increased sharply from the previous year's figure of 2707.1/100,000 population (**Figure 56**).

Figure 55: Two Week Wait Referral Rate by CCG, 2019/20



Source: PHE Public Health Profiles

Figure 56: Two Week Wait Referral Rate, 2010–2020



**- blue ribbon shows 95% confidence interval around Wandsworth's indicator values*

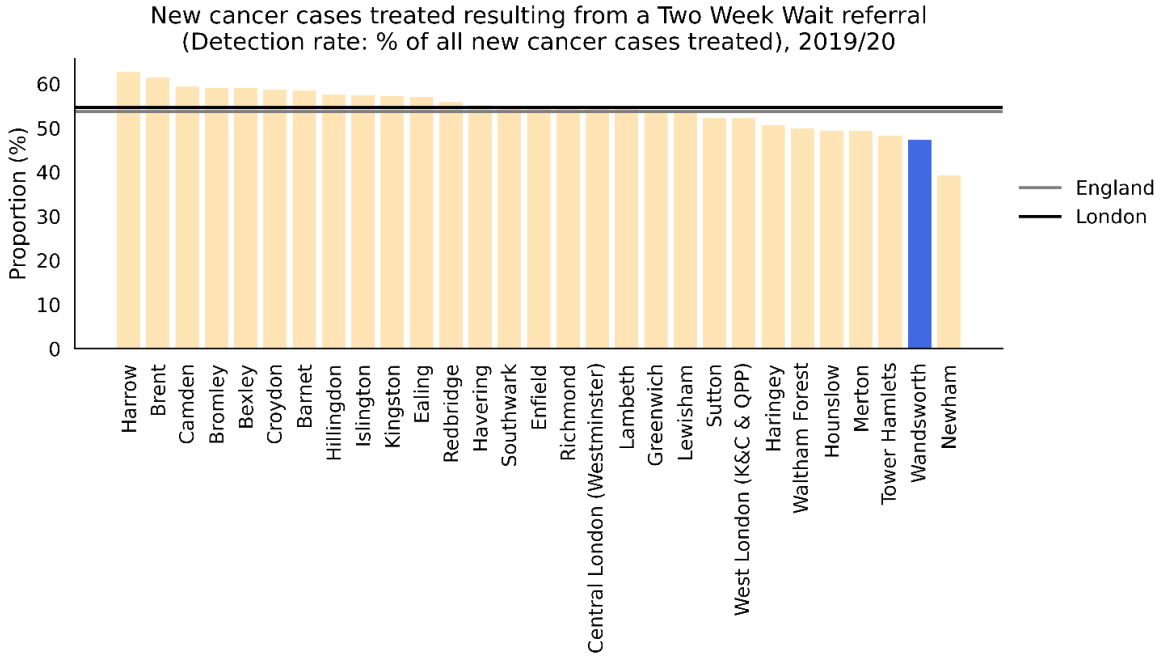
Source: PHE Public Health Profiles

New cancer cases detected through Two Week Wait referrals

A high proportion of new cancer cases diagnosed and treated as a result from a Two Week Wait referral reflects positively on GPs' abilities to screen for cancer symptoms and act on their concerns.

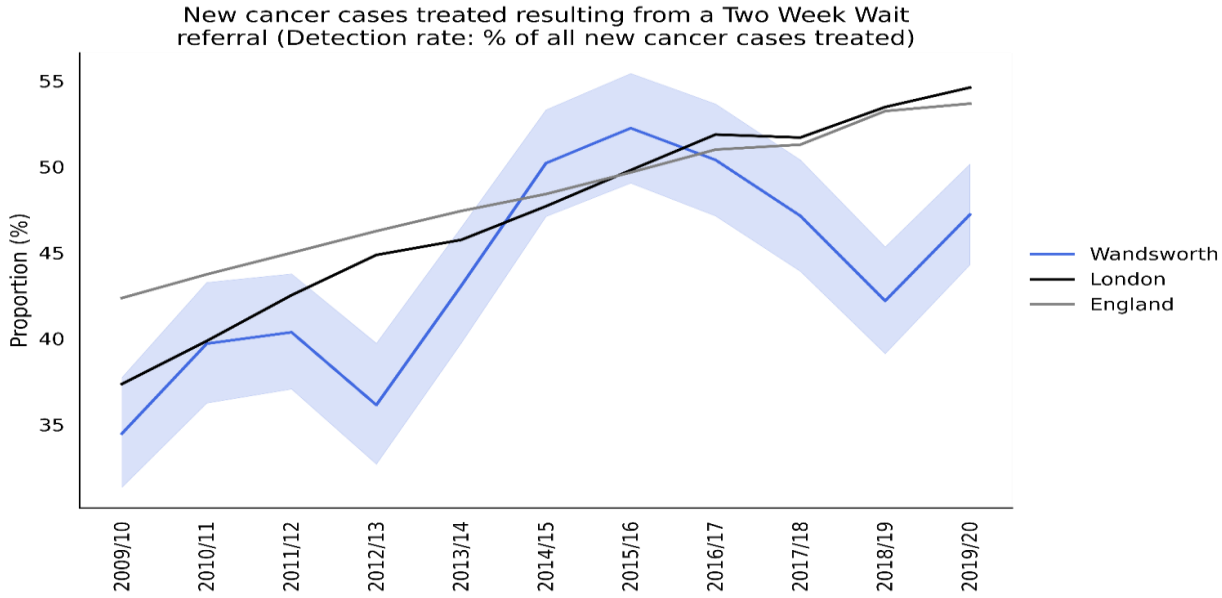
In 2019/20, Wandsworth's percentage of cancer detections attributable to Two Week Wait referrals was 47.2% (n=525), the 2nd lowest rate in London, 12.0% lower than the England average, and 13.5% lower than the London average (**Figure 57**). The Wandsworth's figure for 2019/20 was 36.9% higher from 2009/10, in comparison with a 26.7% increase in England's rate in the equivalent time period (**Figure 58**).

Figure 57: New Cancer Cases Detected via Two Week Wait Route by CCG, 2019/20



Source: PHE Public Health Profiles

Figure 58: New Cancer Cases Detected via Two Week Wait route, 2010–2020



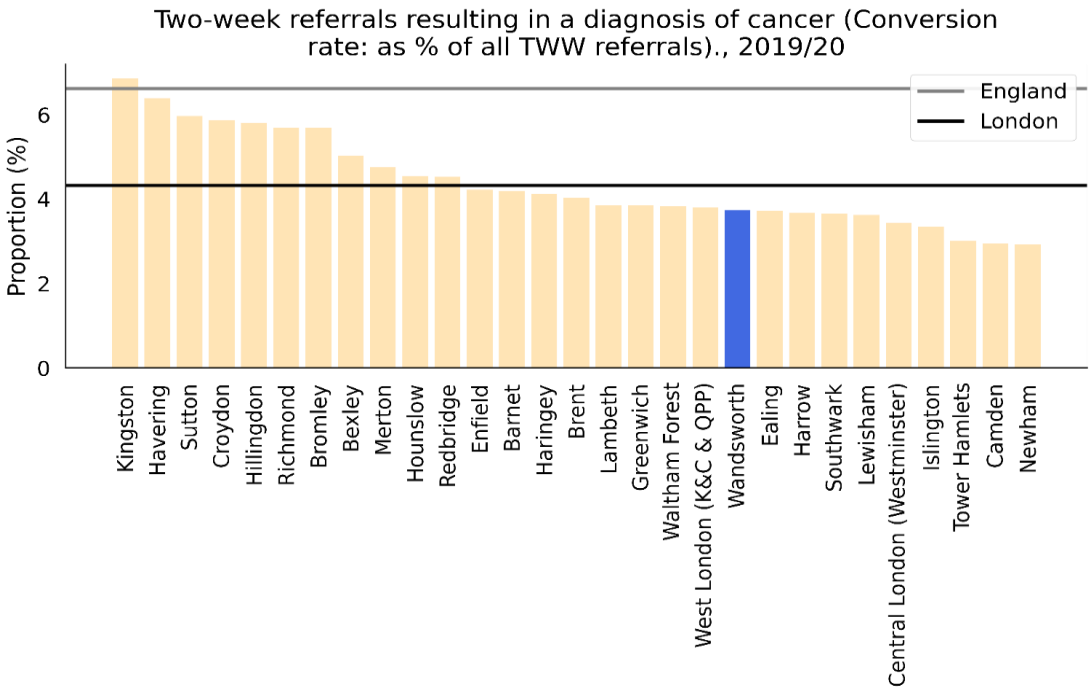
**- blue ribbon shows 95% confidence interval around Wandsworth's indicator values*

Source: PHE Public Health Profiles

Two Week Wait referrals resulting in a diagnosis of cancer

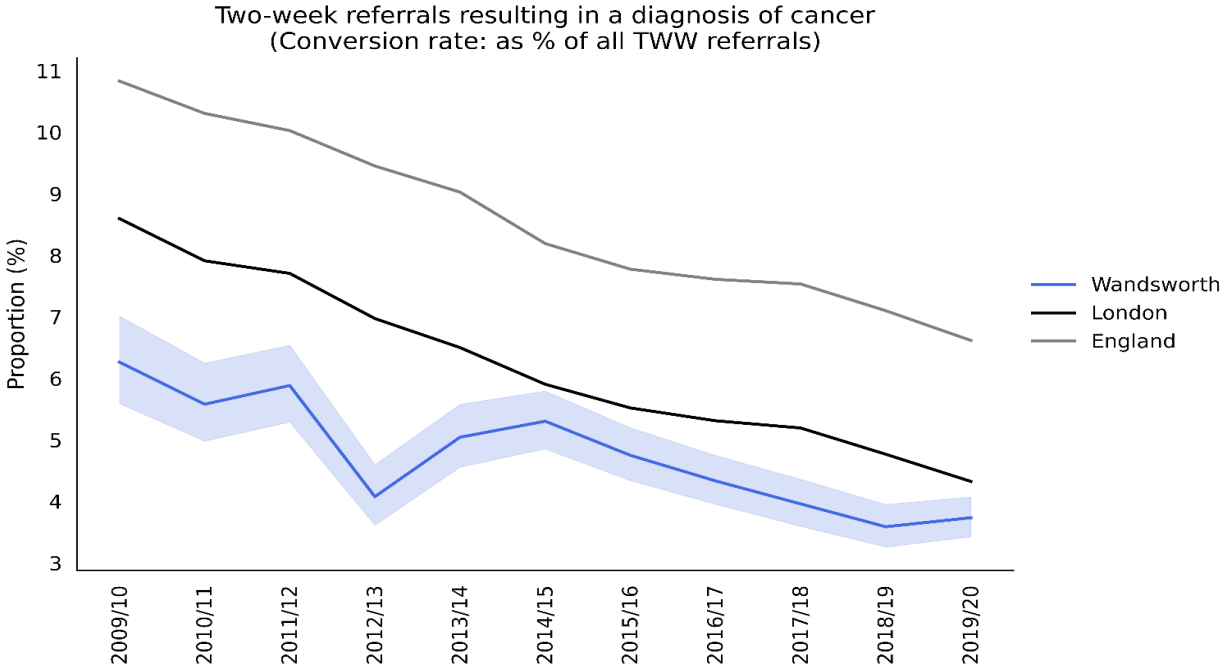
In 2019/20, the proportion of Wandsworth's Two Week Wait GP referrals that resulted in cancer diagnosis was 3.7% (n=494), the 10th lowest rate in London, 43.6% lower than the England average and 13.6% lower than the London average (**Figure 59**). The latest Wandsworth CCG figure was 6.5% lower from year 2011/12, in comparison to a 34.0% decrease in England's rate in the equivalent time period (**Figure 60**).

Figure 59: Proportion of Two Week Wait Referrals that Resulted in Cancer Diagnosis by CCG, 2019/20



Source: PHE Public Health Profiles

Figure 60: Proportion of Two Week Wait Referrals that Resulted in Cancer Diagnosis, 2010–2020



**- blue ribbon shows 95% confidence interval around Wandsworth's indicator values*

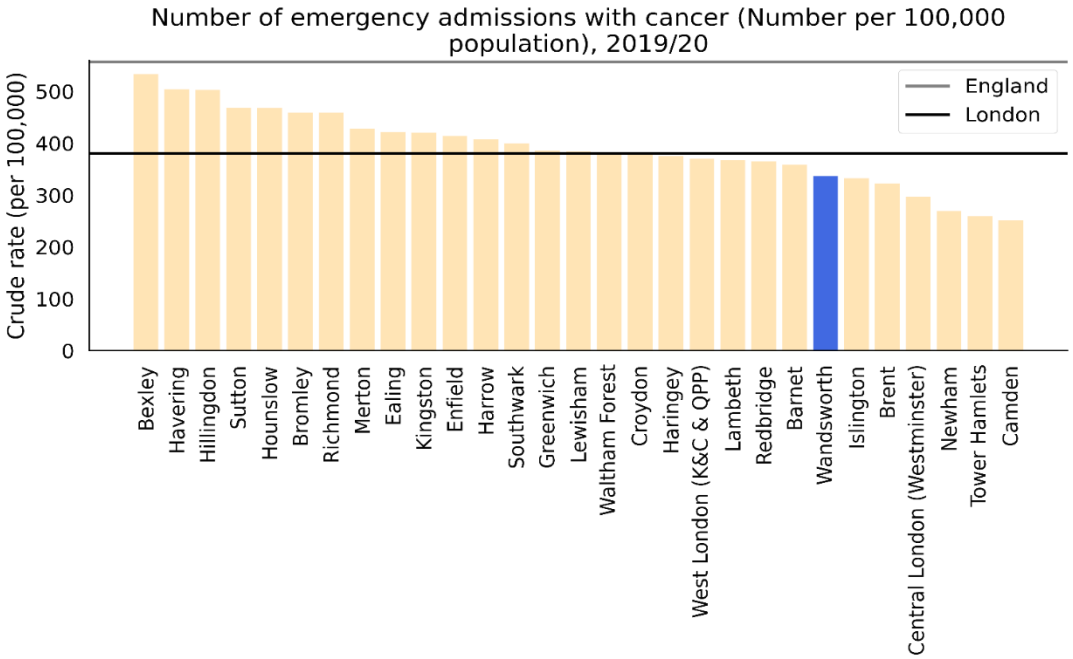
Source: PHE Public Health Profiles

Wandsworth's Two Week Wait referral data shows that local Primary Care Services are making fewer referrals through the 2WW route compared to the London and England average referral rates.

Cancer Emergency Admissions

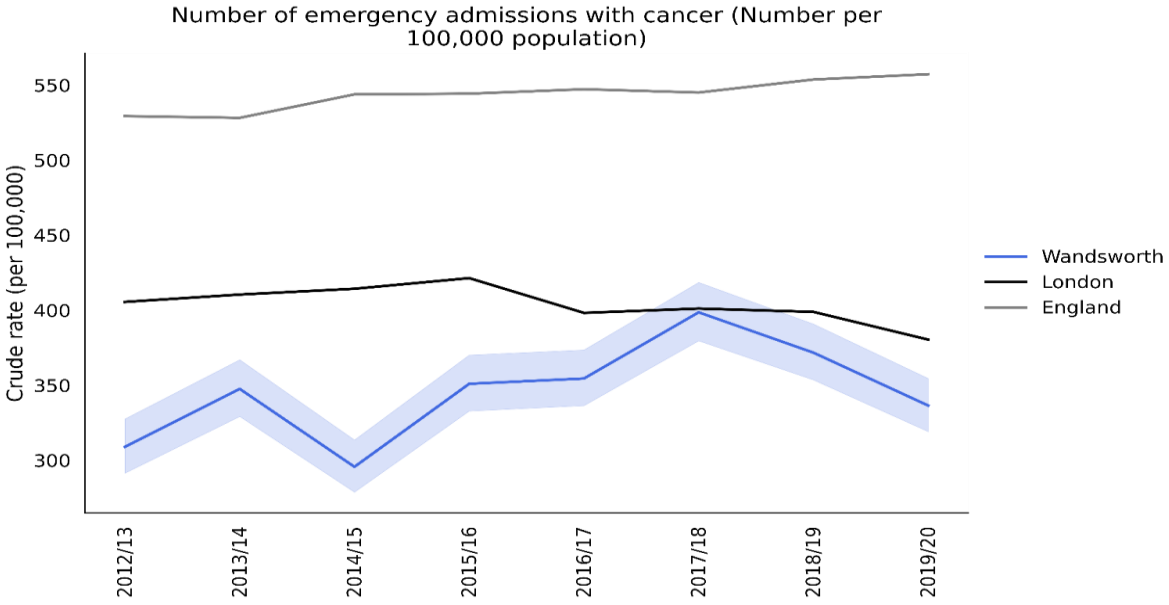
In 2019/20, Wandsworth's crude rate of cancer emergency admissions was 336.4/100,000 population (n=1406), the 7th lowest rate in London, lower than London and England (**Figure 61**). Wandsworth's figure for 2019/20 was 8.9% higher from 2012/13, in comparison to a 5.3% increase in England's rate in the equivalent time period (**Figure 62**). The rate has been decreasing since 2017/18.

Figure 61: Cancer Emergency Admissions by CCG, 2019/20



Source: PHE Public Health Profiles

Figure 62: Cancer Emergency Admissions, 2013 – 2020



**- blue ribbon shows 95% confidence interval around Wandsworth's indicator values*

Source: PHE Public Health Profiles

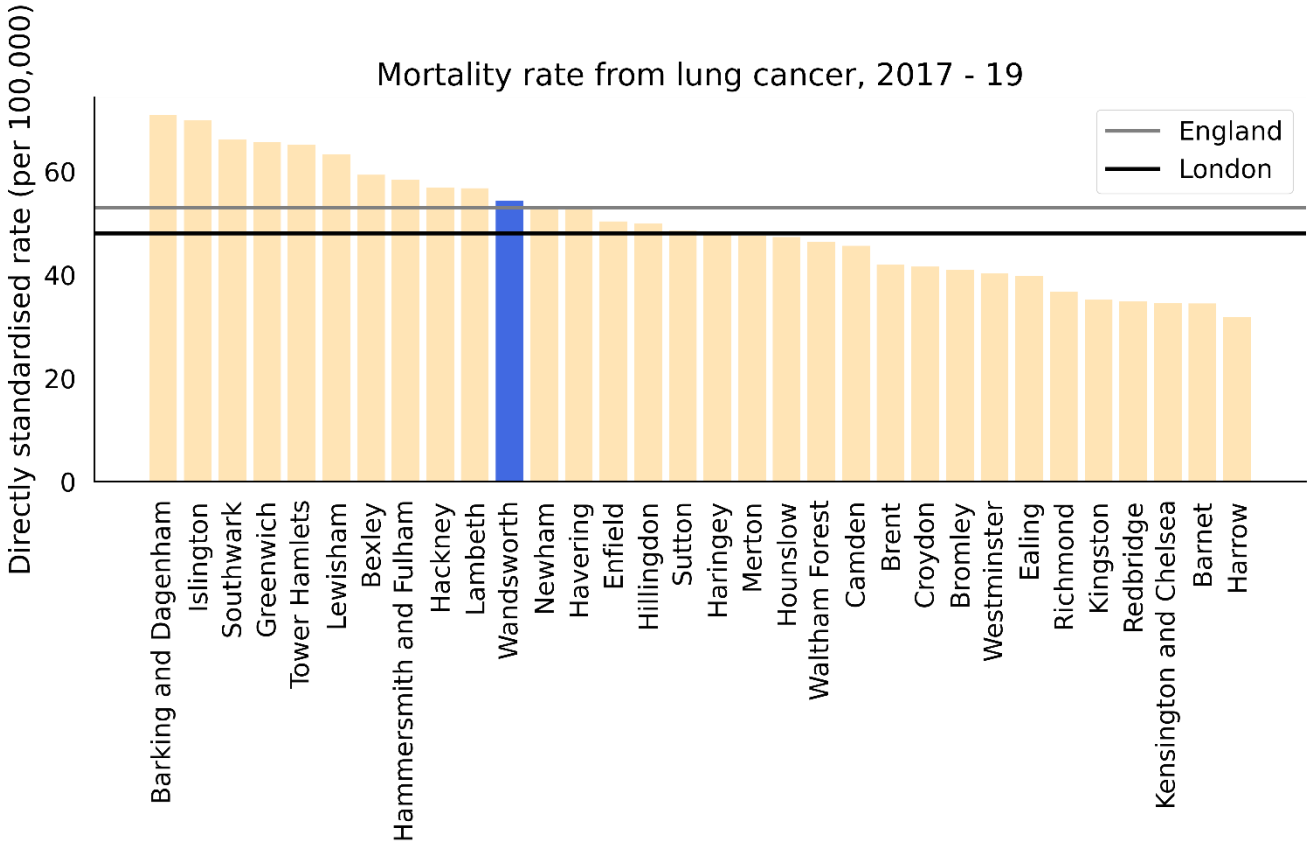
3.5 Cancer Mortality

Premature and preventable cancer mortality can be found in People JSNA Chapter. This section presents mortality from main cancer types including lung, breast and colorectal. There are no mortality indicators for prostate cancer that can be reported. However, the 2012/16 Wandsworth's incidence ratio for prostate cancer was 110.8 (n=695), the 13th highest rate in London, and higher than the England average[24].

Lung cancer mortality

In 2017–19, Wandsworth's lung cancer mortality rate was 54.4 per 100,000 population (n=270), the 11th highest rate in London, 2.6% higher than the England average, and 13.2% higher than the London average (**Figure 63**). The latest Borough's figure for 2017–19 were 25.7% lower from 2001–03, in comparison with an 18.7% decrease in England's rate in the equivalent time period (**Figure 64**).

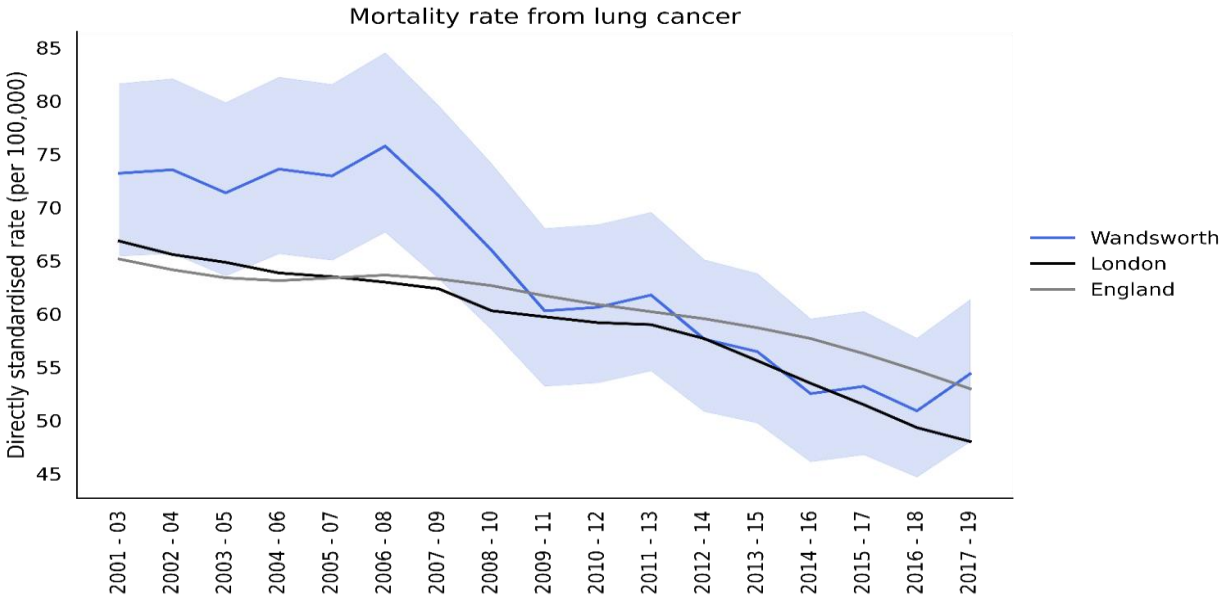
Figure 63: Lung Cancer Mortality by Local Authority, 2017–19



Source: PHE Public Health Profiles

[24] PHE. Public Health Profiles. 2021

Figure 64: Lung Cancer Mortality, 2003–2019

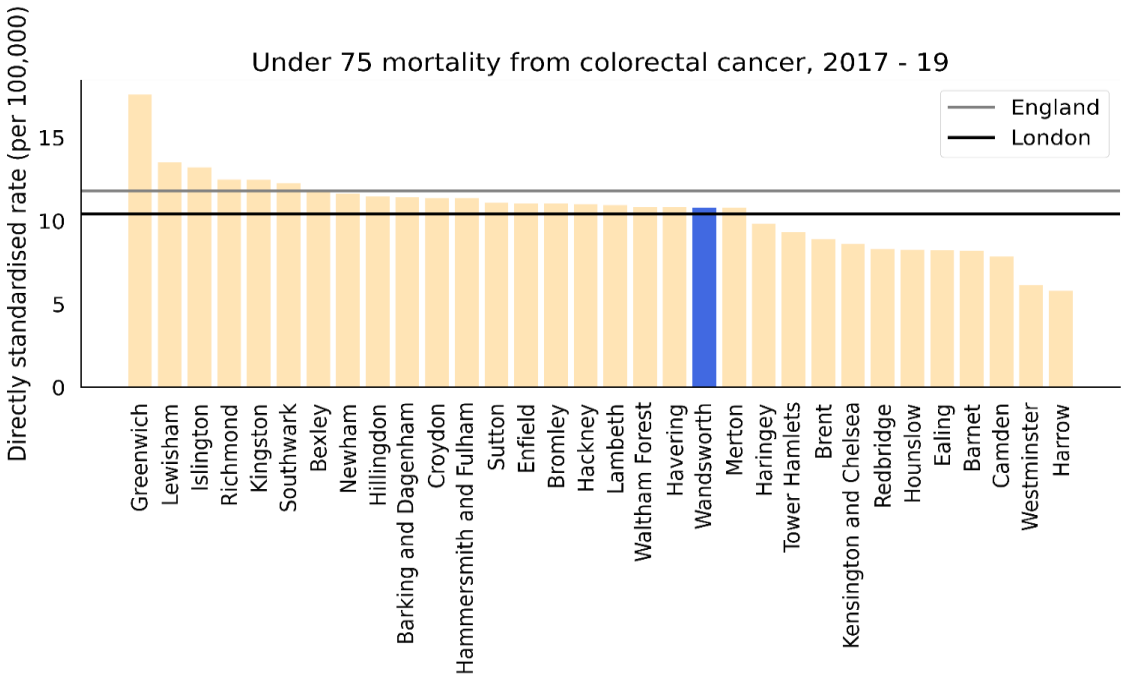


**- blue ribbon shows 95% confidence interval around Wandsworth's indicator values*
Source: PHE Public Health Profiles

Colorectal cancer mortality

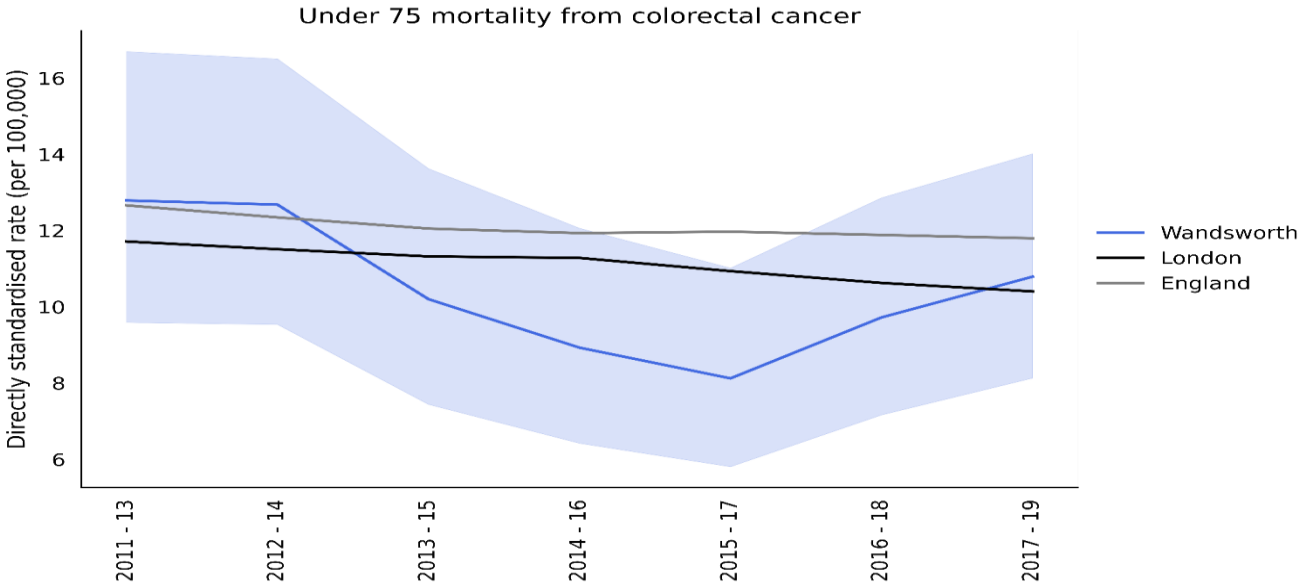
In 2017–19, Wandsworth's under 75 years mortality from colorectal cancer was 10.8 per 100,000 population (n=60) , 13th lowest rate in London, 8.5% lower than the England average and 3.7% higher than the London average (**Figure 65**). The Borough's figure for 2017–19 was 15.6% lower from 2011–13, in comparison with a 6.8% decrease in England's rate in the equivalent time period (**Figure 66**). The rate has been increasing in Wandsworth since 2015–17.

Figure 65: Colorectal Cancer Mortality in People aged under 75 by Local Authority, 2018/19



Source: PHE Public Health Profiles

Figure 66: Colorectal Cancer Mortality in People aged under 75



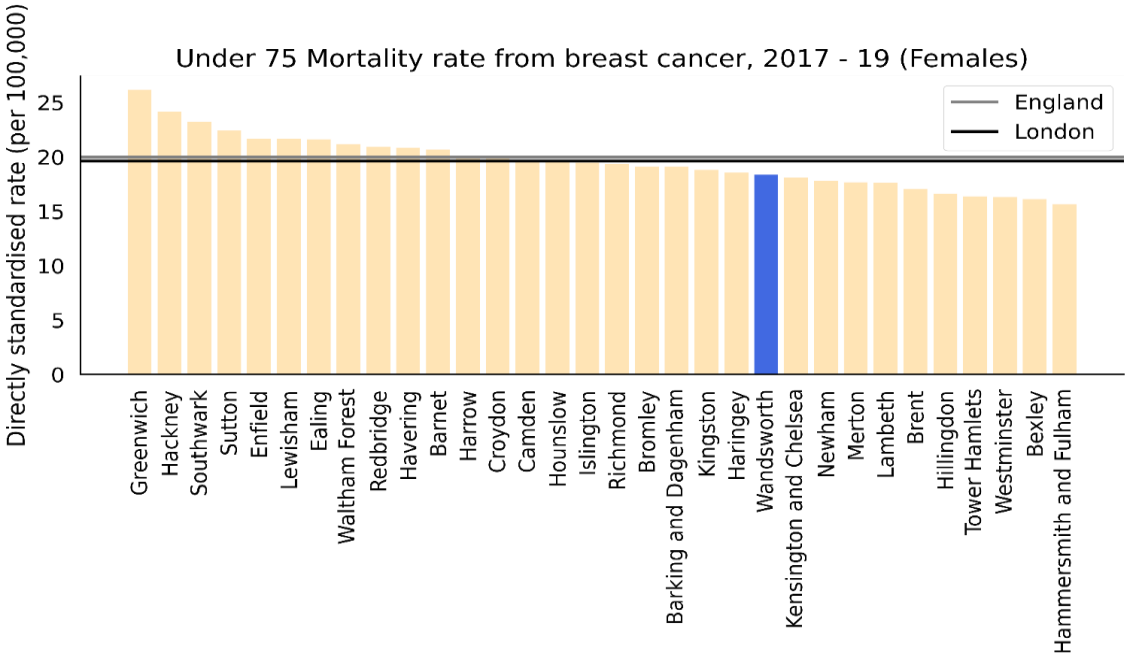
**- blue ribbon shows 95% confidence interval around Wandsworth's indicator values*

Source: PHE Public Health Profiles

Breast cancer mortality

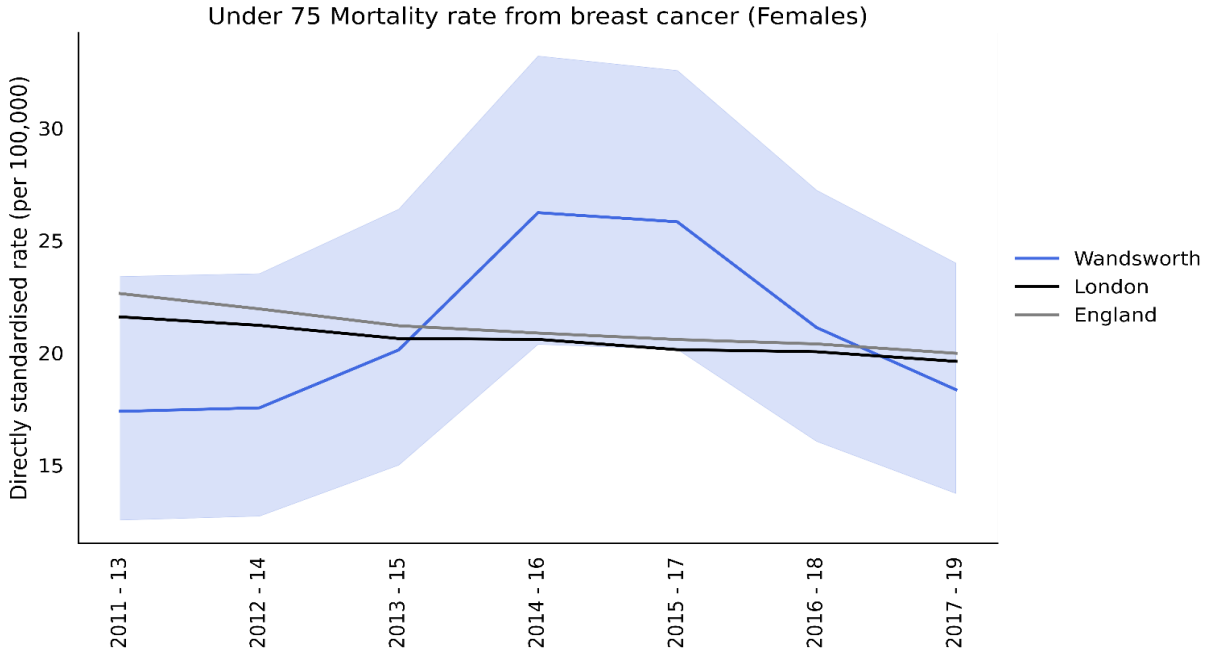
In 2017–19, Wandsworth's under 75 years mortality from breast cancer was 18.4 per 100,000 population (n=56), the 11th lowest rate in London, 8.1% lower than the England average, and 6.4% lower than the London average (**Figure 67**). The latest Borough's figure was 5.6% higher from 2011–13, in comparison with a 11.7% decrease in England's rate in the equivalent time period (**Figure 68**). The rates in Wandsworth have been decreasing since 2014–16.

Figure 67: Breast Cancer Mortality in Females Aged Under 75 by Local Authority, 2018/19



Source: PHE Public Health Profiles

Figure 68: Breast Cancer Mortality in Females Aged Under 75



**- blue ribbon shows 95% confidence interval around Wandsworth's indicator values*
Source: PHE Public Health Profiles

4. Respiratory Diseases

Respiratory diseases include asthma, chronic obstructive pulmonary disease (COPD), pulmonary fibrosis and pneumonia. In this section the latest available Wandsworth-level information on prevalence, hospitalisations and mortality linked to respiratory conditions will be explored. Most of the data presented are published for the registered CCG population[25] (patients registered with Wandsworth's GP). In 2019/20 five South West London (SWL) CCGs merged into a single South West London CCG which makes it difficult to distinguish information specific to Wandsworth. For most CCG indicators the data presented in the chapter is two years old, as the latest 2019/20 and 2020/21 data is only available at SWL CCG level.

4.1 COPD

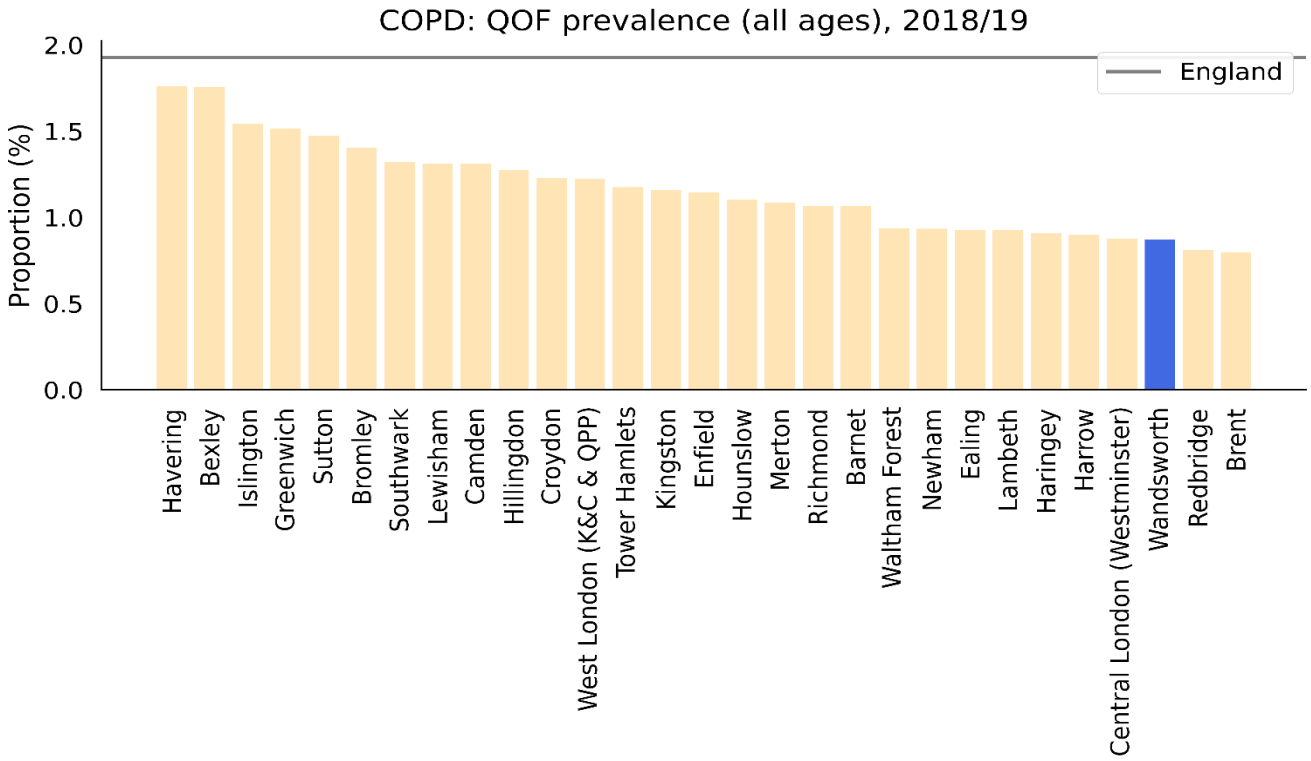
COPD (chronic obstructive pulmonary disease) is a diagnostic term that captures a variety of serious lung conditions including chronic bronchitis and emphysema. COPD is usually prevalent in adults over the age of 35 years. COPD is a serious lung disease for which smoking is the biggest preventable risk factor.

GP recorded prevalence of COPD

In 2018/19, Wandsworth's percentage of patients with COPD recorded on GP practice disease registers was 0.9/100 (n=3573), the 3rd lowest rate in London, 54.9% lower than the England average (**Figure 69**). The latest Wandsworth's figure was 9.5% higher from 2009/10, in comparison with a 22.7% increase in England's rate in the equivalent time period (**Figure 70**). Whilst the proportion of COPD patients in England continues to rise, the Borough's proportion remains roughly the same.

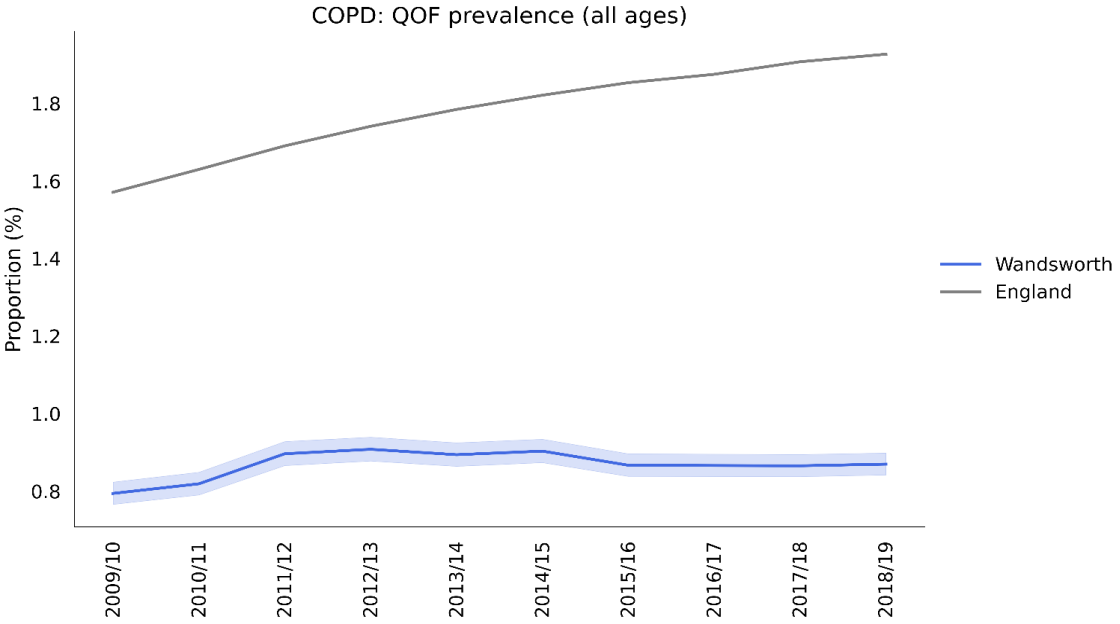
[25] PHE. Public Health Profiles. 2021

Figure 69: GP recorded Prevalence of COPD by CCG, 2018/19



Source: PHE Public Health Profiles

Figure 70: GP Recorded Prevalence of COPD, 2010–2019



**- blue ribbon shows 95% confidence interval around Wandsworth's indicator values*

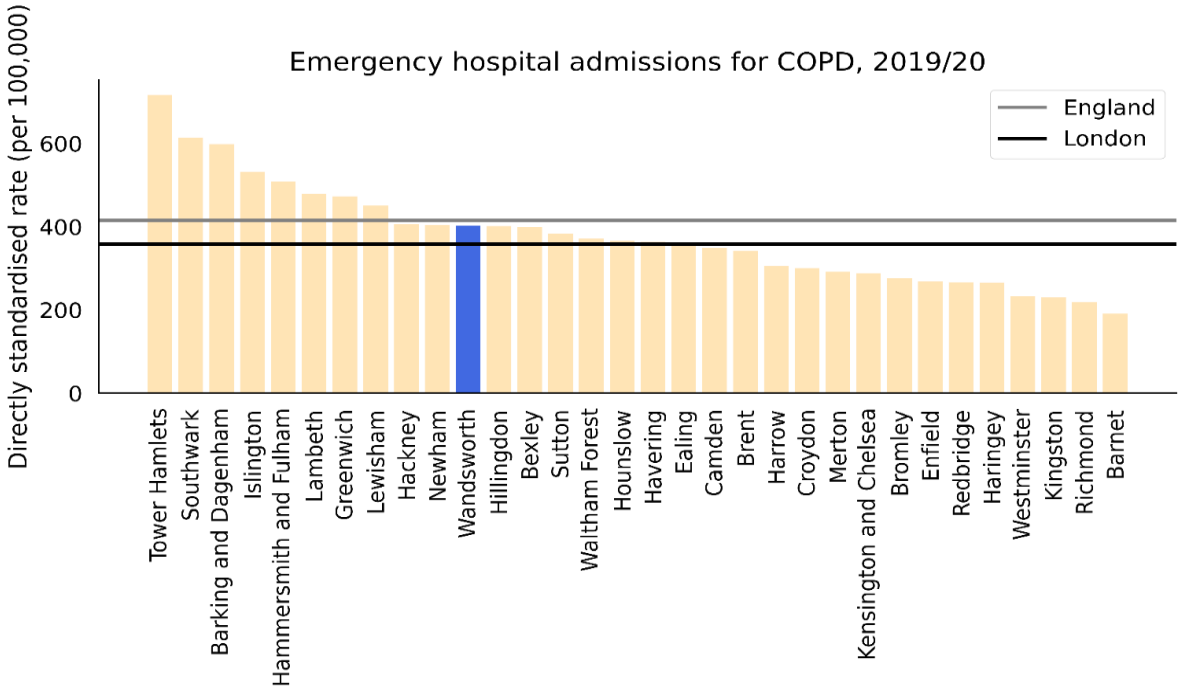
Source: PHE Public Health Profiles

Emergency hospital admissions for COPD

Wandsworth's latest rate of emergency hospitalisations for COPD was 401.6/100,000 population (n=415), the 11th highest rate in London, 3.3% lower than the England average, and 12.3% higher than the London average

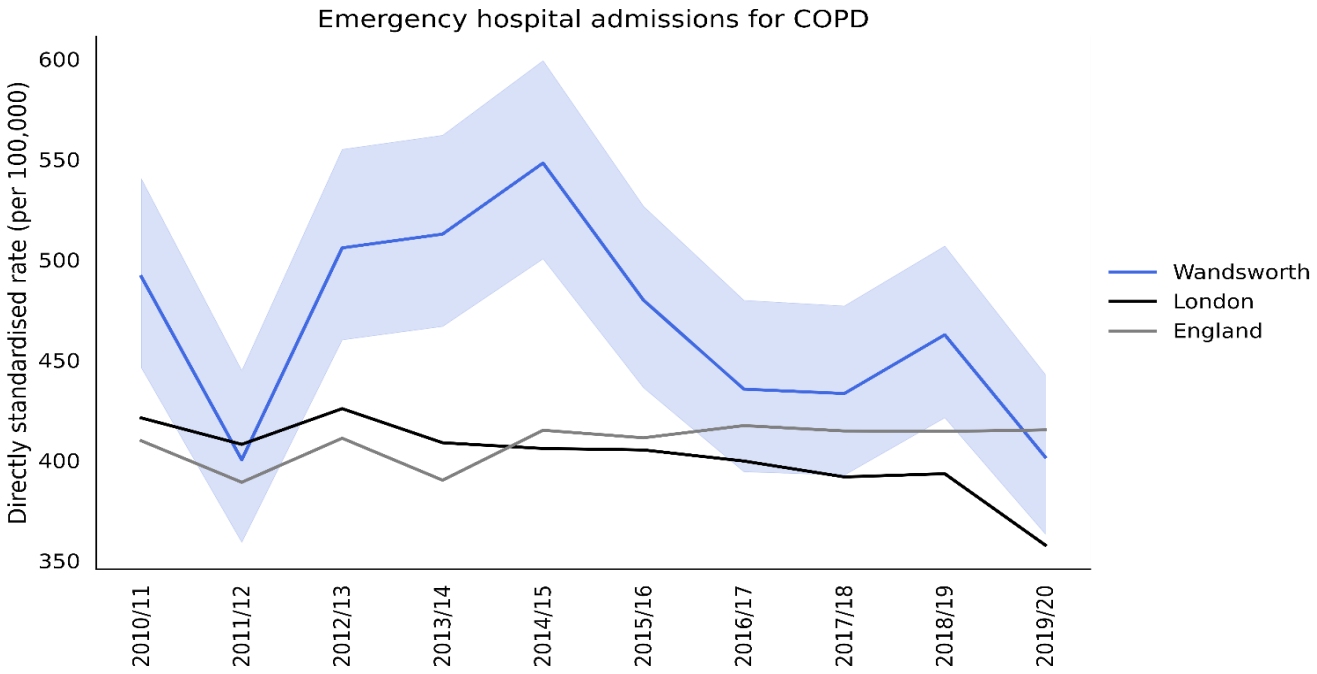
(**Figure 71**). The latest Borough's figure was also 18.3% lower from 2010/11, in comparison with a 1.3% increase in England's rate in the equivalent time period (**Figure 72**). The coverage has been slowly declining since 2018.

Figure 71: Emergency Hospitalisations for COPD by Local Authority, 2019/20



Source: PHE Public Health Profiles

Figure 72: Emergency Hospitalisations for COPD, 2011 – 2020



**- blue ribbon shows 95% confidence interval around Wandsworth's indicator values*

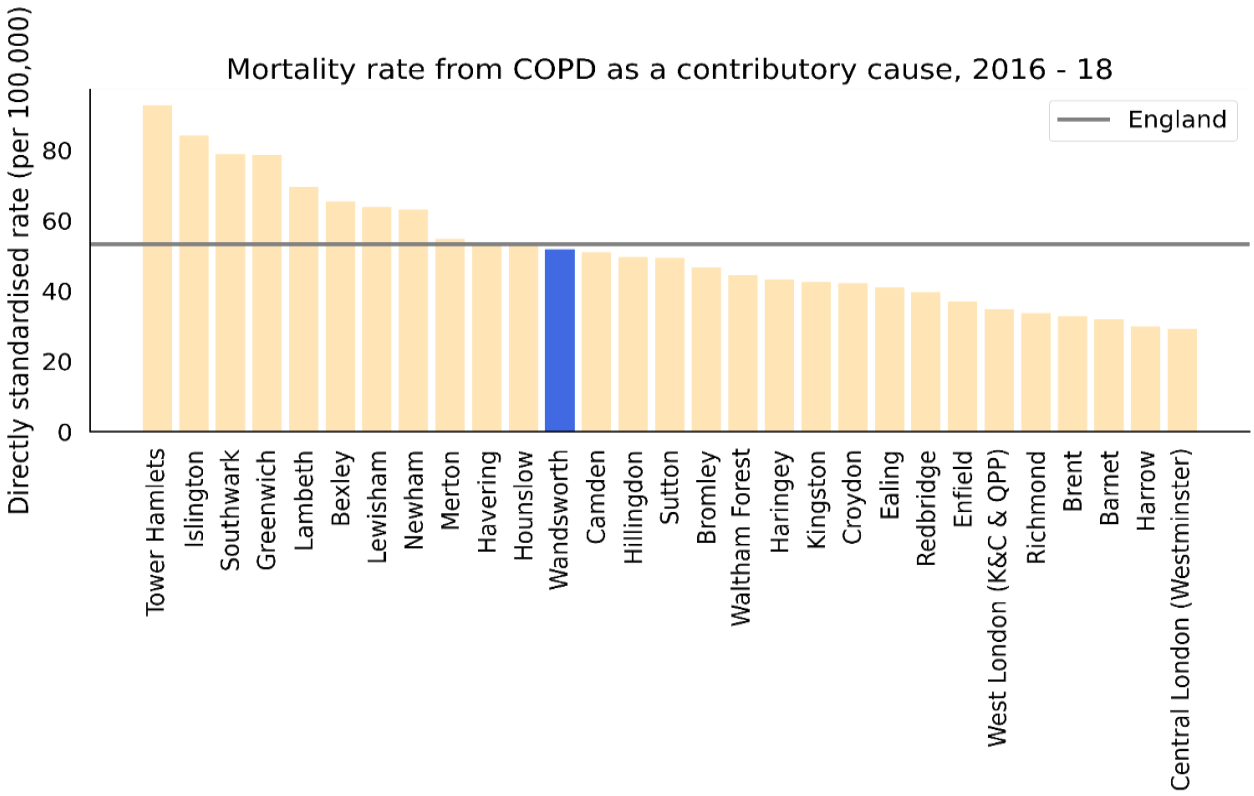
Source: PHE Public Health Profiles

Mortality from COPD as a ontributory c,ause

This indicator presents mortality from COPD in all contributory causes of deaths fields (not including the underlying cause of death). Focusing on those that die with but not directly from COPD allows to understand better the role of COPD in mortality from other conditions.

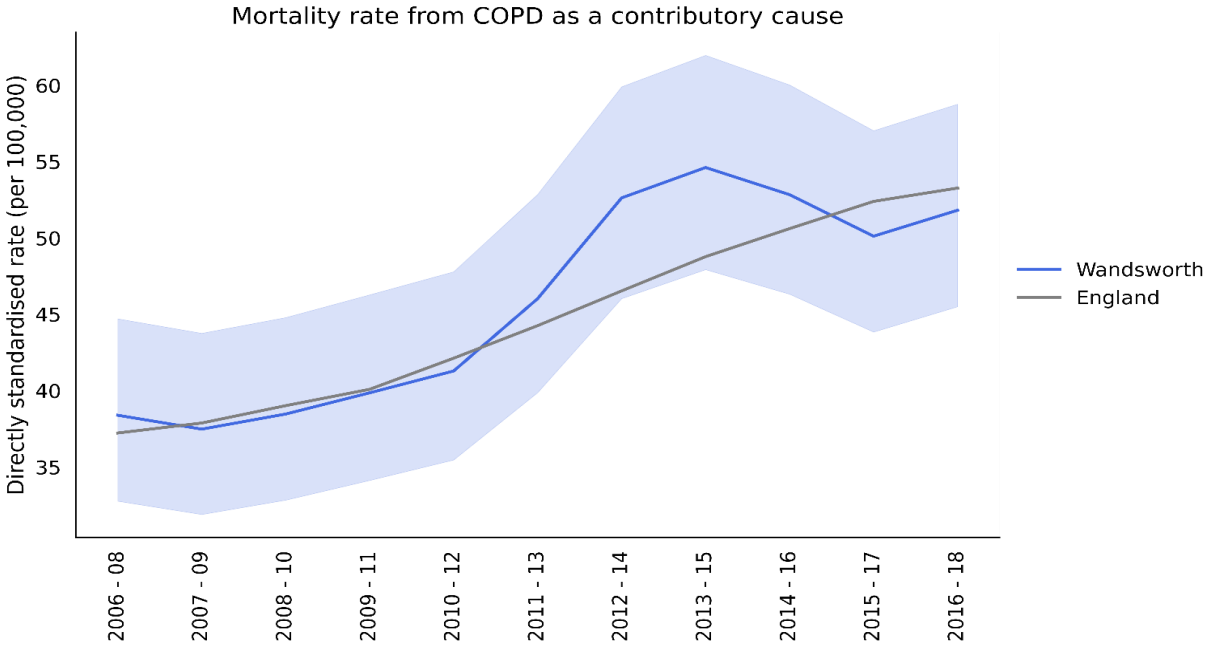
Wandsworth's latest mortality rate for COPD as a contributory factor was 51.8 per 100,000 population (n=245), the 12th highest rate in London and 2.7% lower than the England average (**Figure 73**). The latest Wandsworth's figure was 35.0% higher from 2006–08, in comparison with a 43.1% increase in England's rate in the equivalent time period (**Figure 74**).

Figure 73: Mortality from COPD as a Contributory Cause by CCG, 2016–18



Source: PHE Public Health Profiles

Figure 74: Mortality from COPD as a Contributory Cause, 2008–2018



**- blue ribbon shows 95% confidence interval around Wandsworth's indicator values*

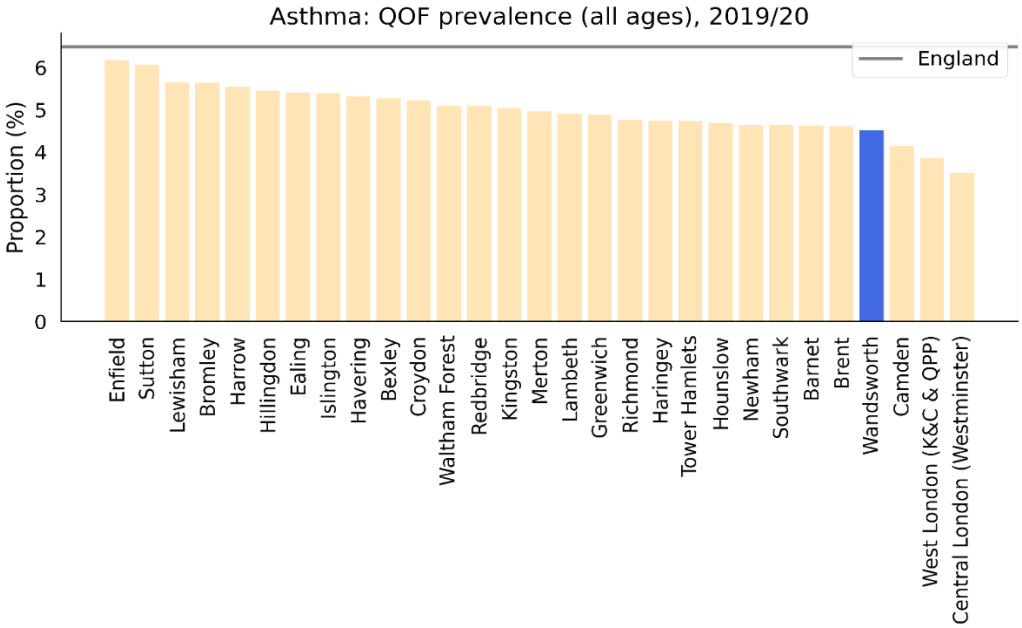
Source: PHE Public Health Profiles

4.2 Asthma

Asthma recorded prevalence

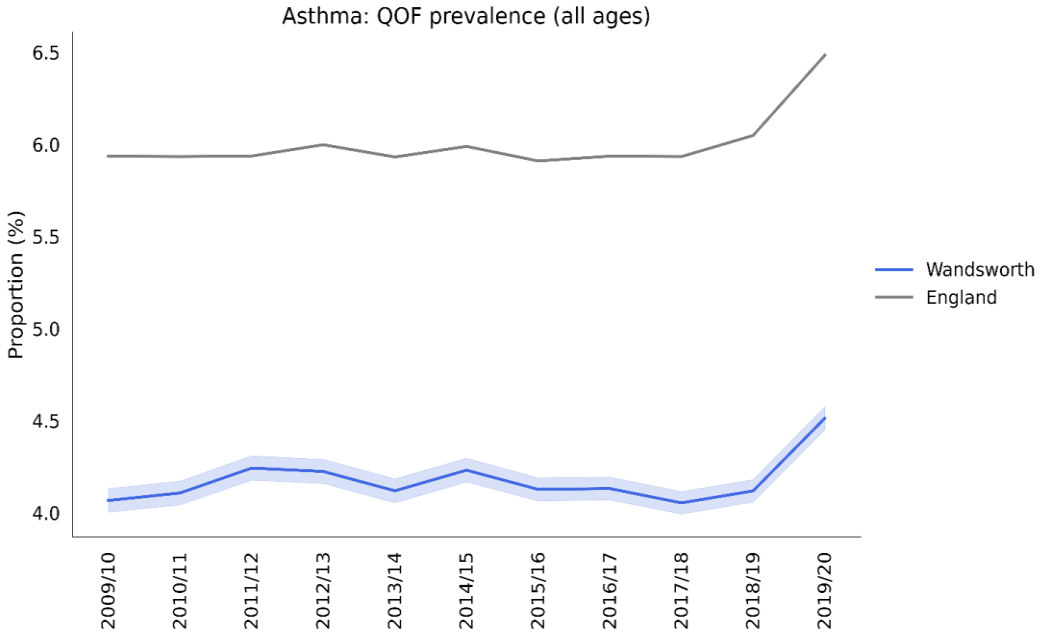
Wandsworth's latest GP recorded asthma prevalence was 4.5/100 (n=18857), the 4th lowest rate in London which was 30.4% lower than the England average (**Figure 75**). The latest Wandsworth's figure was 11.0% higher from 2009/10, in comparison with a 9.2% increase in England's rate in the equivalent time period (**Figure 76**). There has been a substantial increase in asthma diagnoses in the last year in Wandsworth and England.

Figure 75: GP recorded Prevalence of Asthma by CCG, 2019/20



Source: PHE Public Health Profiles

Figure 76: GP Recorded Prevalence of Asthma, 2010 – 2020

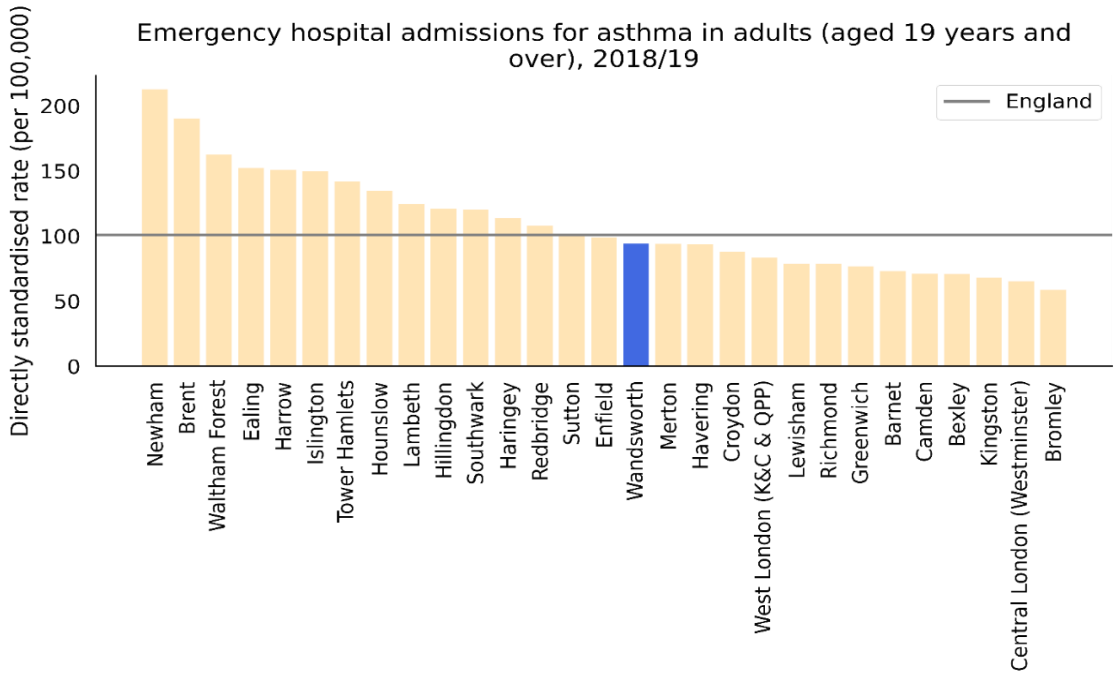


**- blue ribbon shows 95% confidence interval around Wandsworth's indicator values*
Source: PHE Public Health Profiles

Emergency hospital admissions for asthma in adults

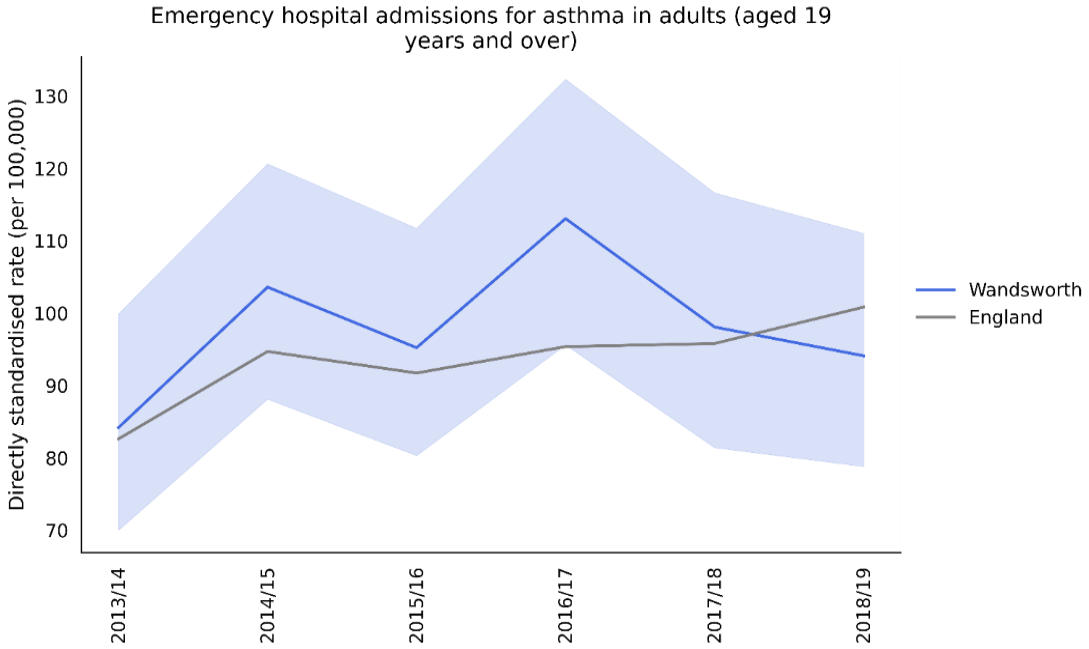
Wandsworth's latest rate of emergency hospitalisations for asthma in adults aged 19 and over was 94.1/100,000 population (n=210), the 14th lowest rate in London and6.7% lower than the England average (**Figure 77**). The latest Wandsworth's figure was 11.8% higher from 2013/14, in comparison with a 22.0% increase in England's rate in the equivalent time period (**Figure 78**). The coverage has been rising sharply in the last 2 years.

Figure 77: Emergency Hospitalisation for Asthma in Adults by CCG, 2018/19



Source: PHE Public Health Profiles

Figure 78: Emergency Hospitalisations for Asthma in Adults, 2014–2019



**- blue ribbon shows 95% confidence interval around Wandsworth's indicator values*
Source: PHE Public Health Profiles

5. Mental Health

People living with mental health problem are more likely to make unhealthy lifestyle choices and twice as likely to smoke[26]. Mental health problems often lead to alcohol and substance misuse[27]; increasing the risk of obesity, asthma, diabetes, chronic obstructive pulmonary disease (COPD) and cardiovascular disease[28]. This section provides an overview of nationally available data on mental health in adults living in Wandsworth. This includes GP recorded prevalence of mental illnesses, referral rates to specialist services, admissions to hospital, employment rates, accommodation status, and premature mortality rates in adults with mental health problems.

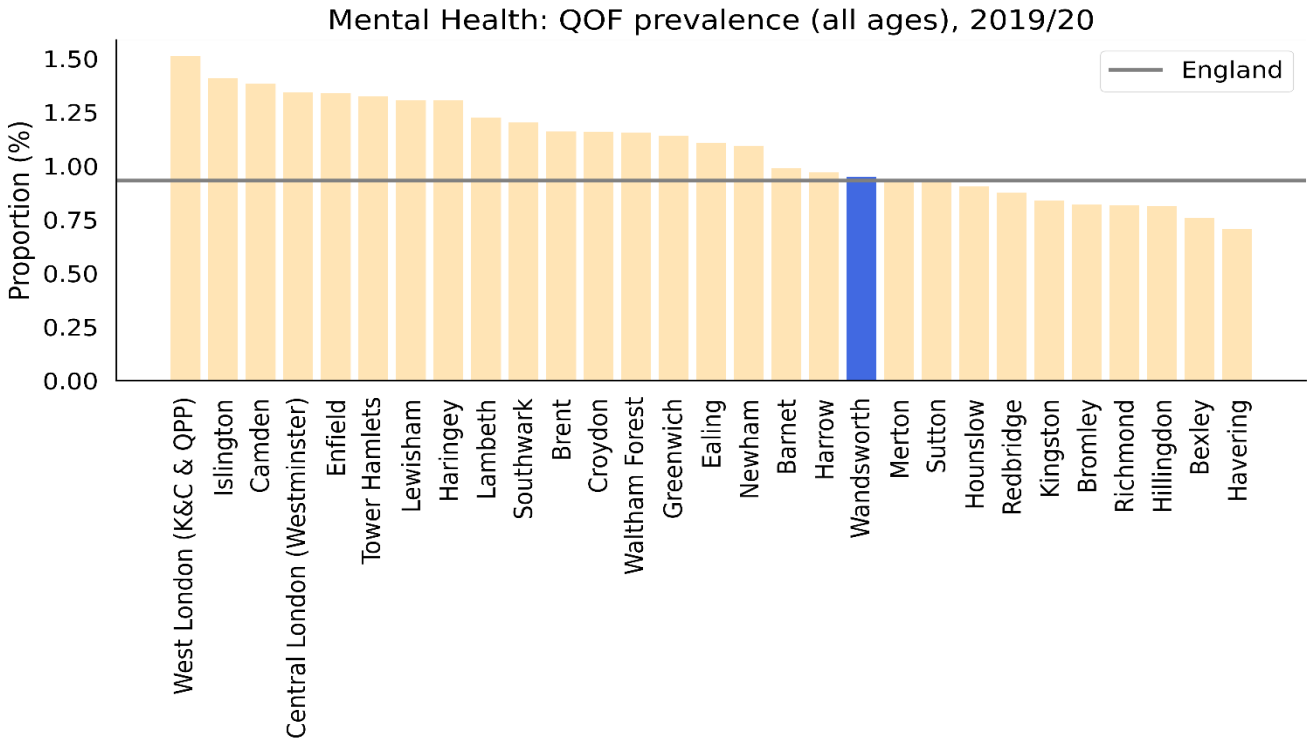
5.1 Key Demographics and Need

GP recorded prevalence of mental illness

GP Mental Health Registers include patients with a diagnosis of schizophrenia, bipolar affective disorder and other psychoses. In 2019/20, Wandsworth's proportion of registered patients with recorded mental illness was 0.9/100 all age population (n=3965), the 11th lowest rate in London and 1.8% higher than England (**Figure 79**). The latest Wandsworth's figure for 2019/20 is also 2.1% higher from 2012/13, in comparison with a 11.0% increase in England's rate in the equivalent time period (**Figure 80**).

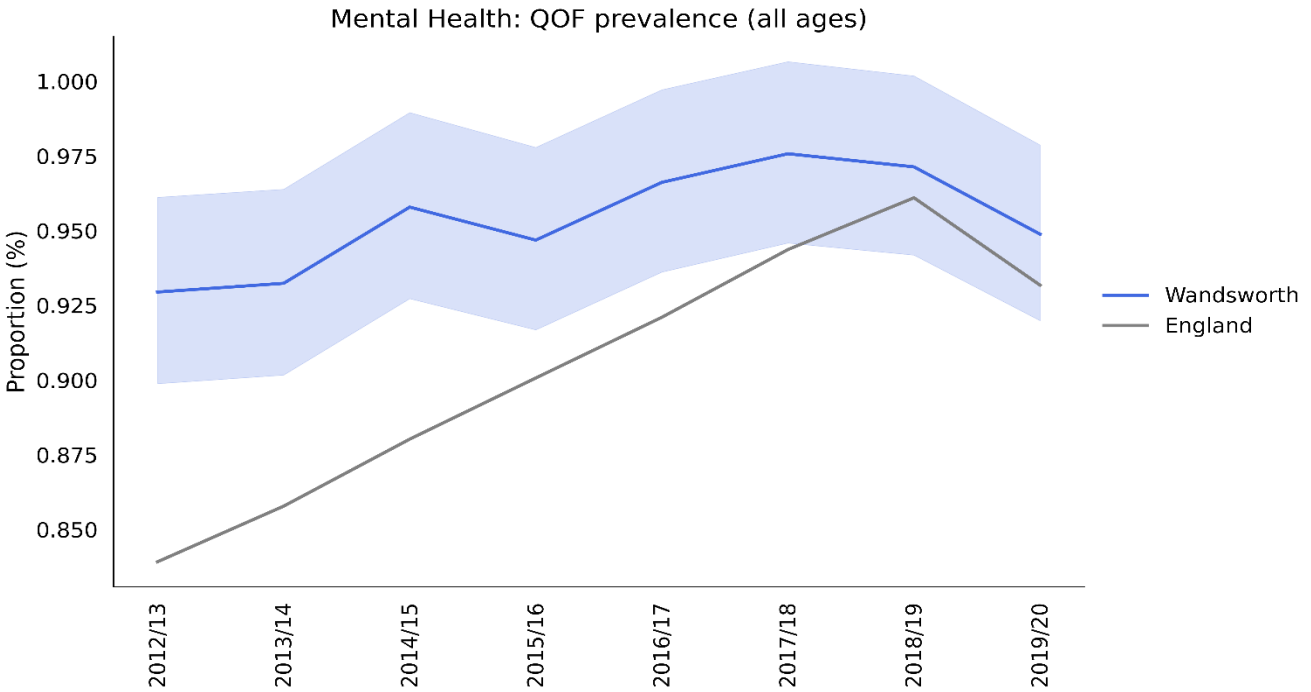
[26] https://www.gov.uk/government/publications/severe-mental-illness-smi-physical-health-inequalities
[27] Langås, AM., Malt, U.F. & Opjordsmoen, S. Comorbid mental disorders in substance users from a single catchment area - a clinical study. *BMC Psychiatry* 11, 25 (2011). https://doi.org/10.1186/1471-244X-11-25
[28] https://www.gov.uk/government/publications/severe-mental-illness-smi-physical-health-inequalities

Figure 79: GP recorded Prevalence of Mental Illness by CCG, 2019/20



Source: PHE Public Health Profiles

Figure 80: GP Recorded Prevalence of Mental Illness, 2010–2019

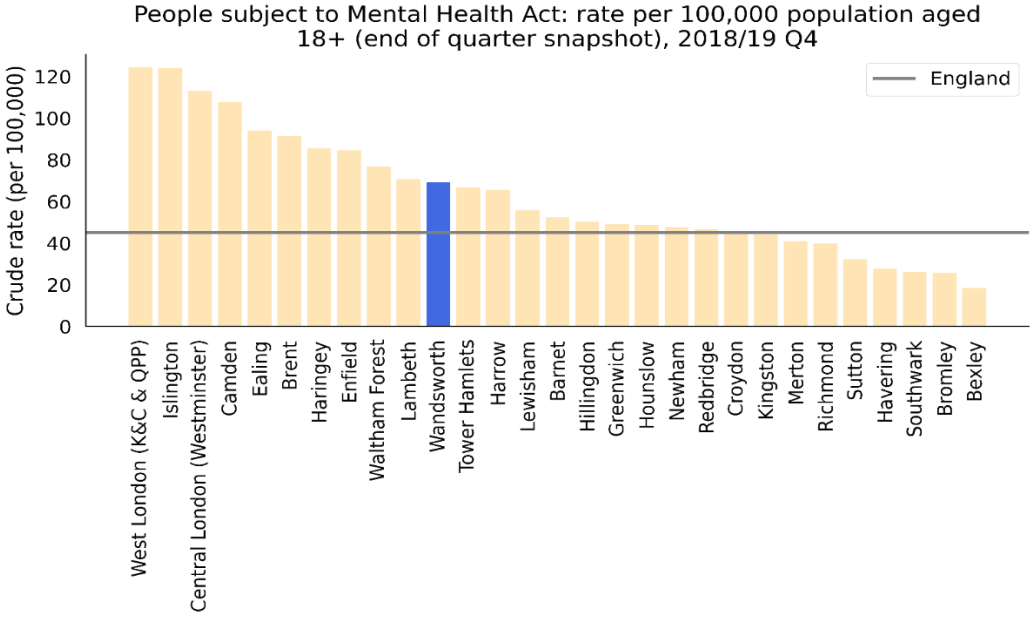


**- blue ribbon shows 95% confidence interval around Wandsworth's indicator values*
Source: PHE Public Health Profiles

People Subject to Mental Health Act

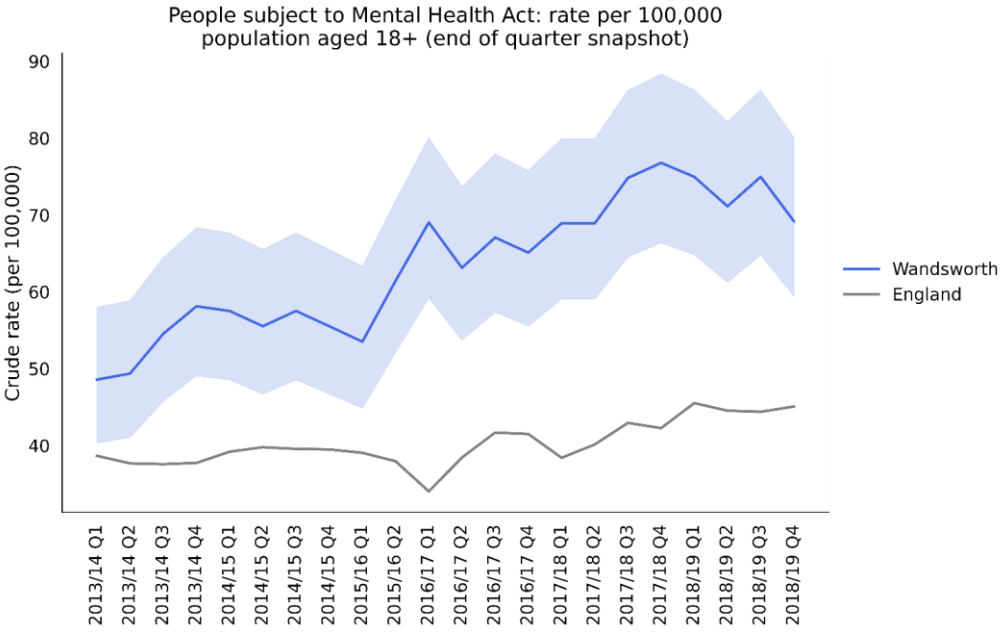
The Mental Health Act is used to formally detain a patient for their own safety, or that of other people.
In 2018/19 Q4, Wandsworth's rate of people aged 18+ detained under the Mental Health Act was 69.2 per 100,000 population (n=180), the 11th highest rate in London which is 53.6% higher than the England average and equal to the London average (**Figure 81**). The latest Wandsworth's figure for 2018/19 Q4 was 42.5% higher from 2013/14 Q1, in comparison with a 16.6% increase in England's rate in the equivalent time period (**Figure 82**). Wandsworth's figures are consistently significantly above the England average, and similar to the London average. The overall trend for the rate appears to be increasing.

Figure 81: People Detained under Mental Health Act by CCG, 2019/20



Source: PHE Public Health Profiles

Figure 82: People Detained under Mental Health Act, 2014–2019



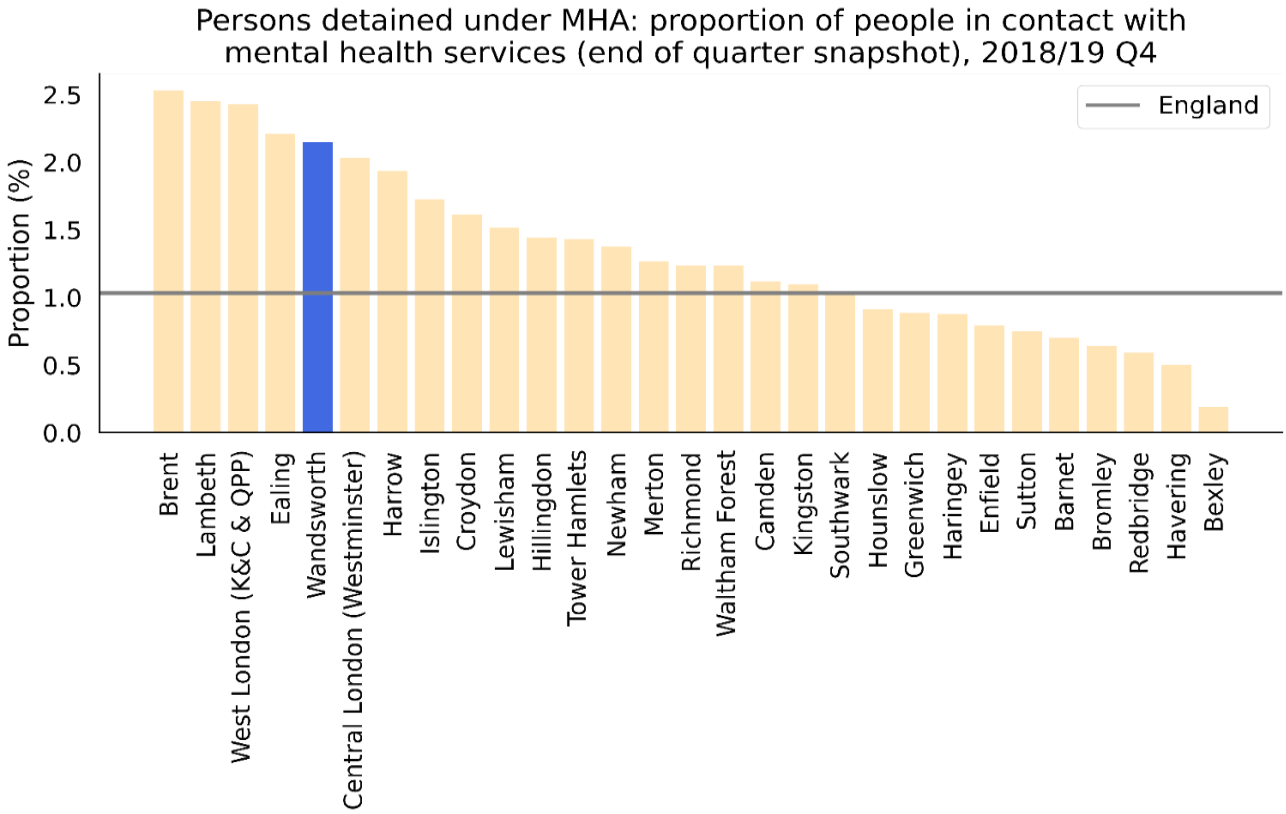
**- blue ribbon shows 95% confidence interval around Wandsworth's indicator values*
Source: PHE Public Health Profiles

Proportion of People in contact with mental health services that are detained under the Mental Health Act

This indicator explores the people who are accessing mental health services who end up being detained. A high detention rate can indicate that the service is not sufficiently resourced once a person is at risk to themselves and others. It may also indicate missed opportunities for early intervention or people are reaching crisis before their treatment commences.

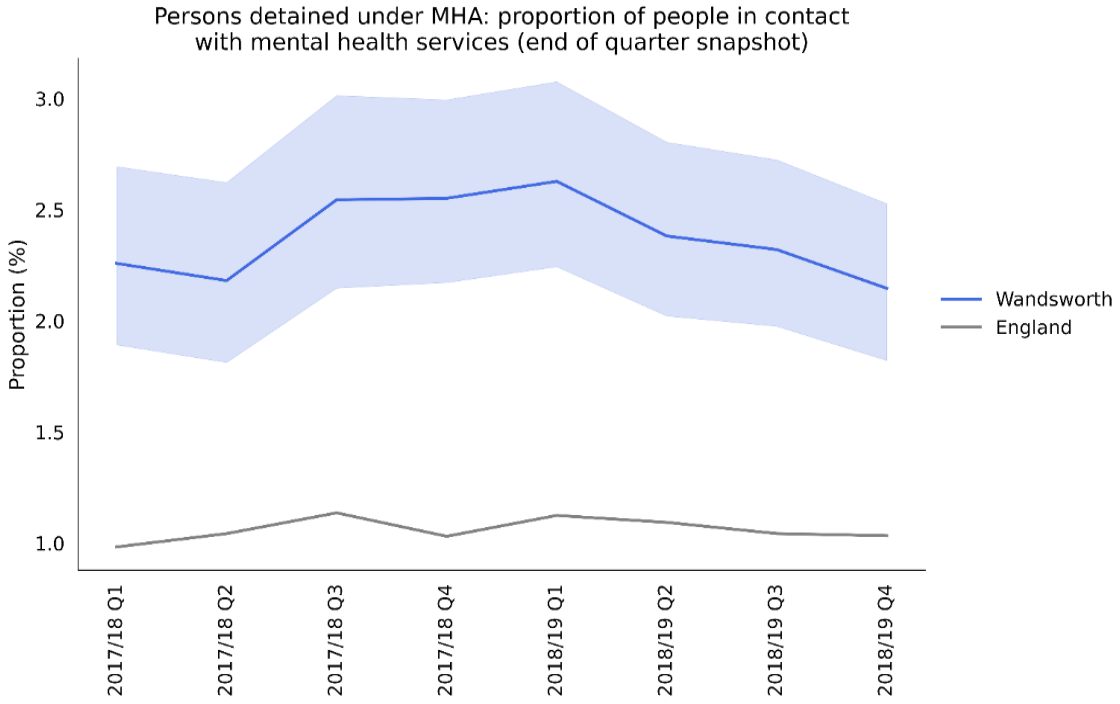
In 2018/19 Q4, Wandsworth's proportion of detained Mental Health Service Users was 2.1/100 (n=140) this is the 5th highest rate in London, which is 107.8% higher than England (**Figure 83**) . The latest Wandsworth's figure for 2018/19 Q4 is 5.0% lower from 2017/18 Q1, in comparison with a 5.1% increase in England's rate in the equivalent time period (**Figure 84**). However, the percentage of detained mental health service users is consistently and significantly above the average for England and London.

Figure 83: People Detained under Mental Health Act by CCG, 2018/19 Q4



Source: PHE Public Health Profiles

Figure 84: People detained under Mental Health Act, 2014–2019



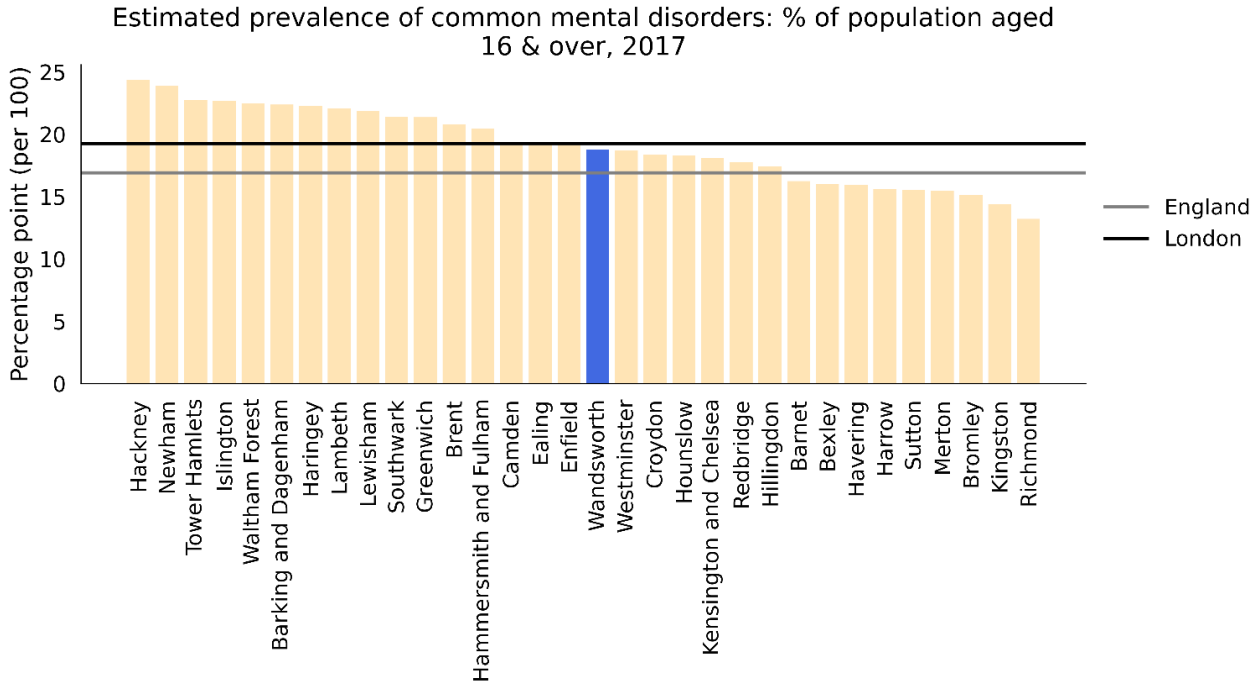
**- blue ribbon shows 95% confidence interval around Wandsworth's indicator values*

Source: PHE Public Health Profiles

Estimated prevalence of common mental disorders

In 2017, Wandsworth's estimated prevalence of common mental disorders was 18.8% (n=49805),the 15th highest rate in London, 11.0% higher than the England average, and 1.8% higher than the England average (**Figure 85**). No time trend data is available for the estimates.

Figure 85: Estimated Prevalence of Common Mental Disorders by Local Authority, 2017



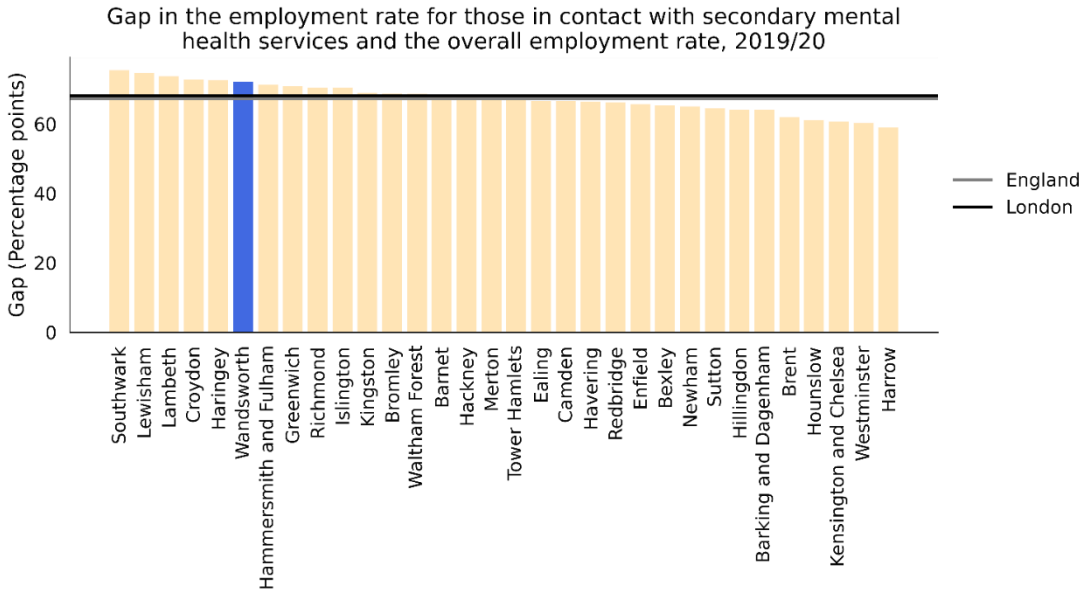
Source: PHE Public Health Profiles

5.2 Social Factors

Employment of mental health service users

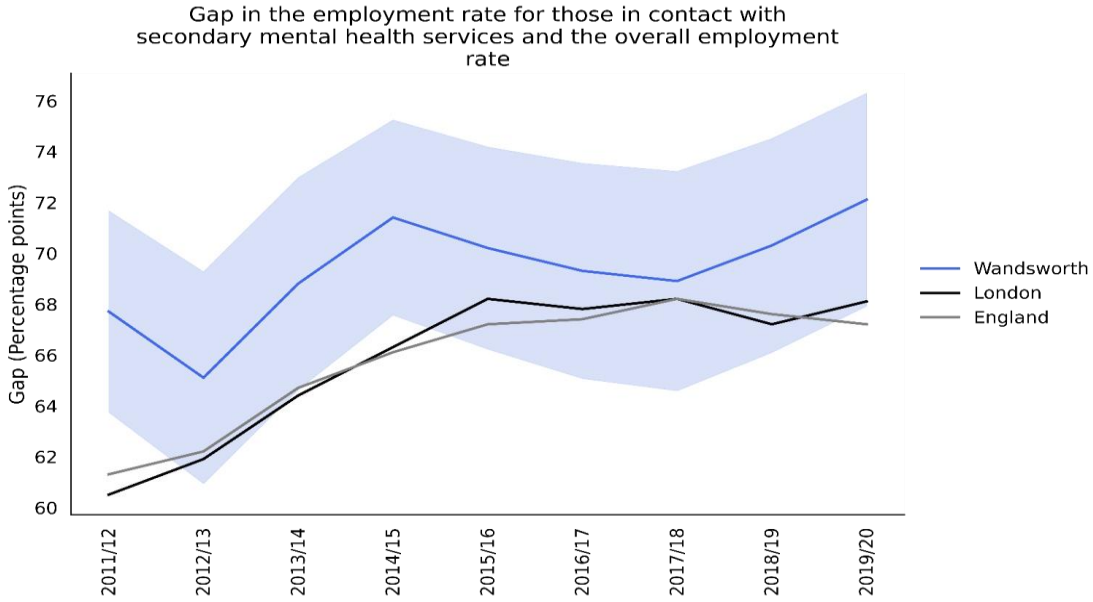
In 2019/20, Wandsworth's gap in the employment rate for those in contact with Secondary Mental Health Services and the overall employment rate was 72.1% which is the 6th highest in London (**Figure 86**). This is 7.3% higher than the England average and 5.9% higher than the London average. The latest Borough's figure for 2019/20 was a6.5% higher from 2011/12, in comparison with a 9.6% increase in England's rate in the equivalent time period (**Figure 87**).

Figure 86: Gap in Employment for Secondary Mental Health Service Users and the General Public by Local Authority



Source: PHE Public Health Profiles

Figure 87: Gap in Employment for Secondary Mental Health Service Users and the General Public, 2012–2020



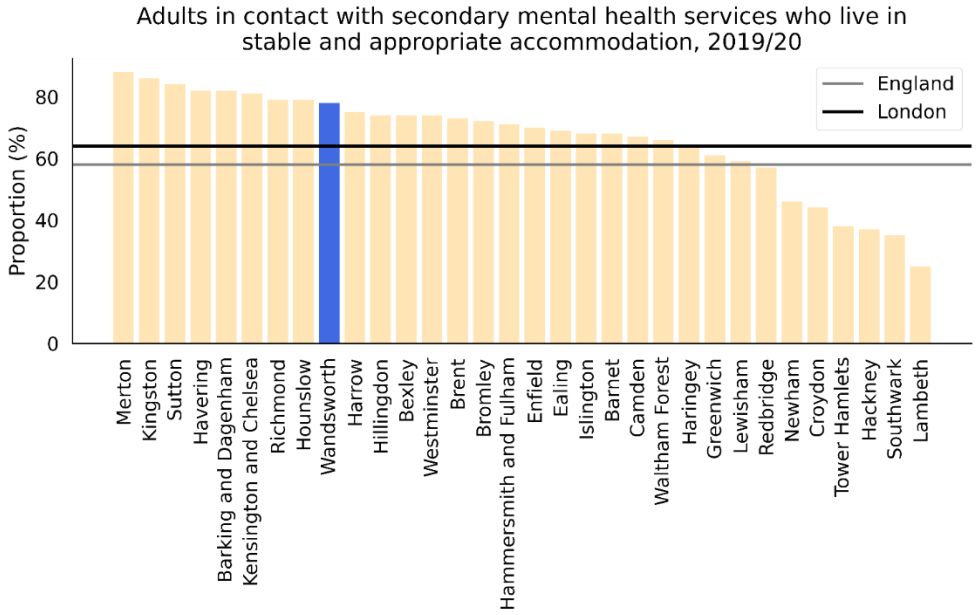
**- blue ribbon shows 95% confidence interval around Wandsworth's indicator values*

Source: PHE Public Health Profiles

Mental health service users living in stable accomodation

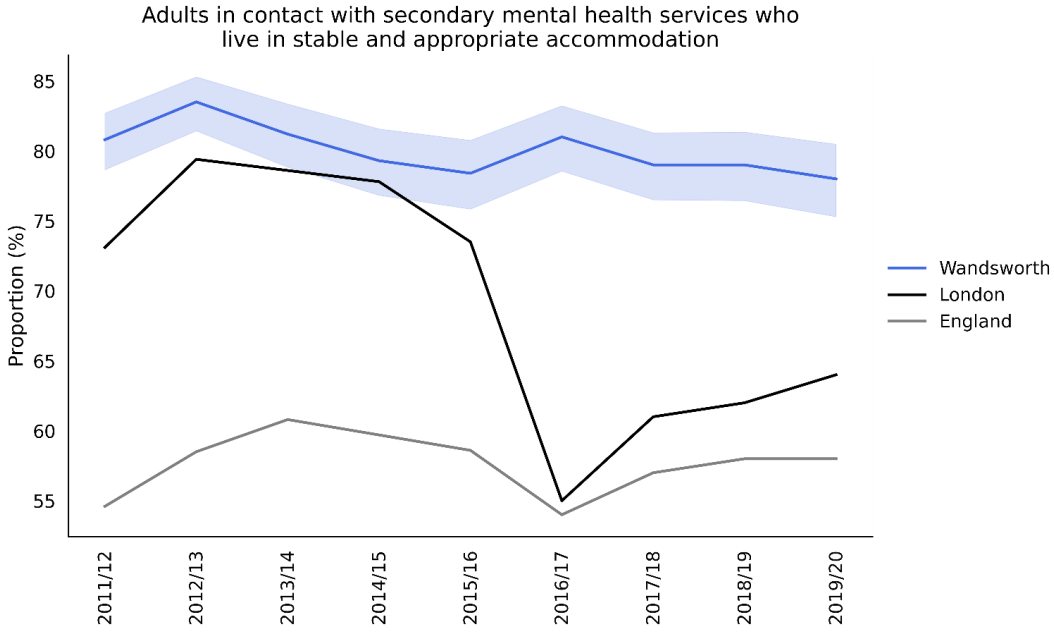
In 2019/20, Wandsworth's proportion of adults in contact with secondary mental health services who live in stable and appropriate accommodation was 78.0%, the 9th highest rate in London (**Figure 88**). The Wandsworth rate is 34.5% higher than the England average, and 21.9% higher than the London average. The latest Borough's figure for 2019/20 is 3.5% lower from 2011/12, in comparison with a 6.2% increase in England's rate in the equivalent time period (**Figure 89**).

Figure 88: Proportion of Secondary Mental Health Service Users Living in Stable Accommodation by Local Authority, 2019/20



Source: PHE Public Health Profiles

Figure 89: Proportion of Secondary Mental Health Service Users Living in Stable Accommodation, 2012–2020



**- blue ribbon shows 95% confidence interval around Wandsworth's indicator values*

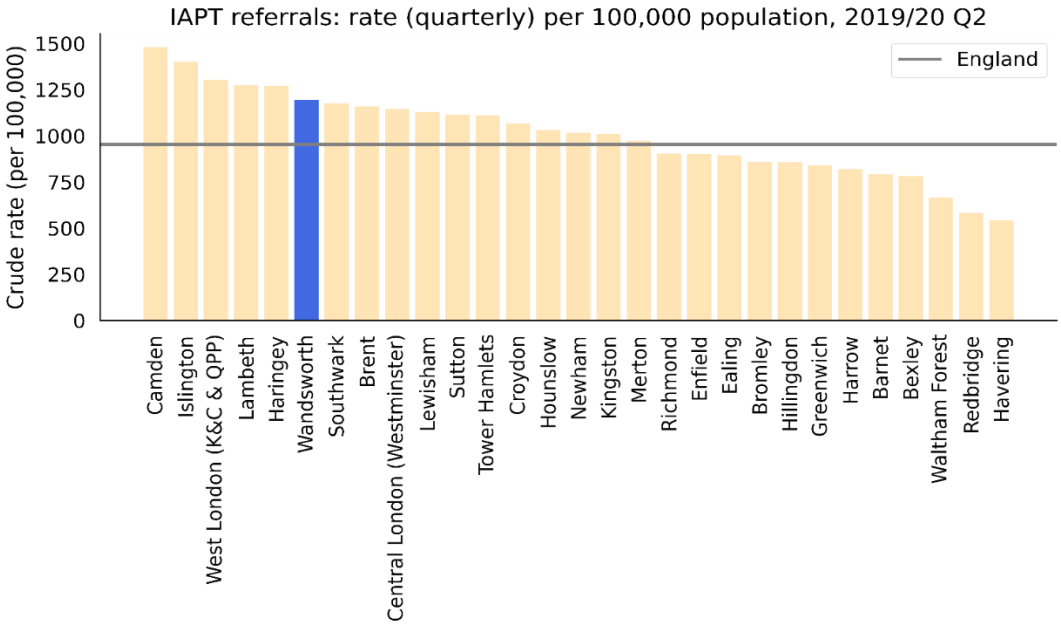
Source: PHE Public Health Profiles

5.3 Improving Access to Psychological Therapies (IAPT)

IAPT referral rates

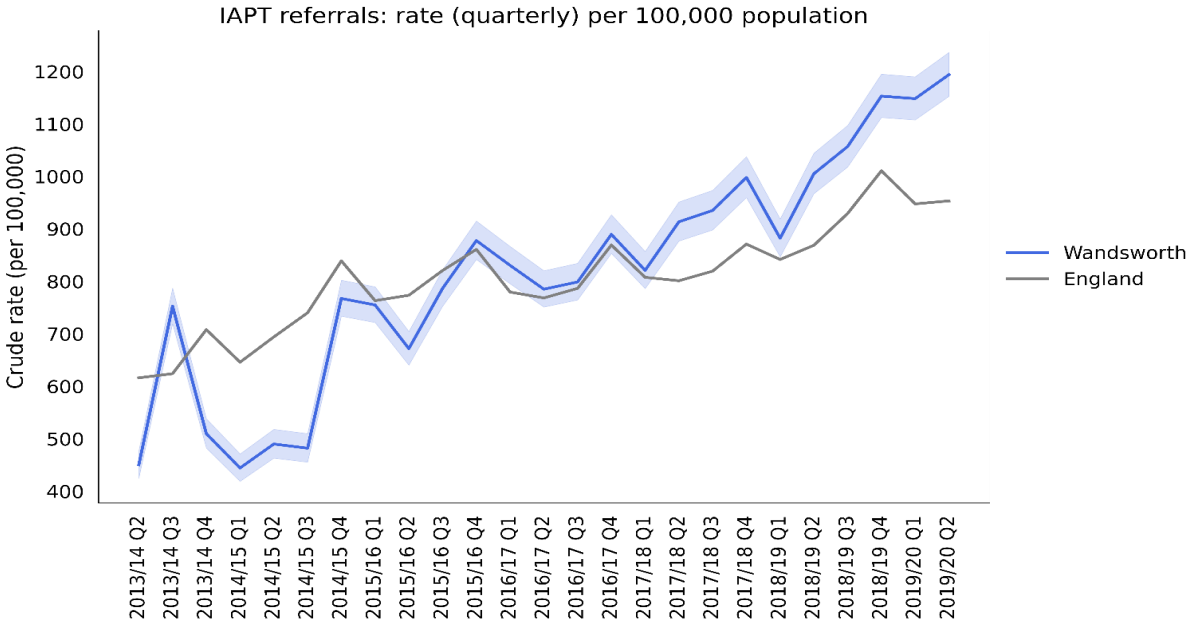
In 2019/20 Q2, Wandsworth's IAPT referral rate for adults aged 18+ was 1193.7 per 100,000 population (n=3135), 6th highest rate in London, and 25.3% higher than the England average . The latest Wandsworth's figure for 2019/20 Q2 was 165.3% higher from 2013/14 Q2, in comparison with a 54.8% increase in England's rate in the equivalent time period (**Figure 91**).

Figure 90: IAPT Referral Rate for Adults Aged 18 and Over by CCG, 2019/20 Q2



Source: PHE Public Health Profiles

Figure 91: IAPT Referral Rate for Adults aged 18 and Over, 2014–2020

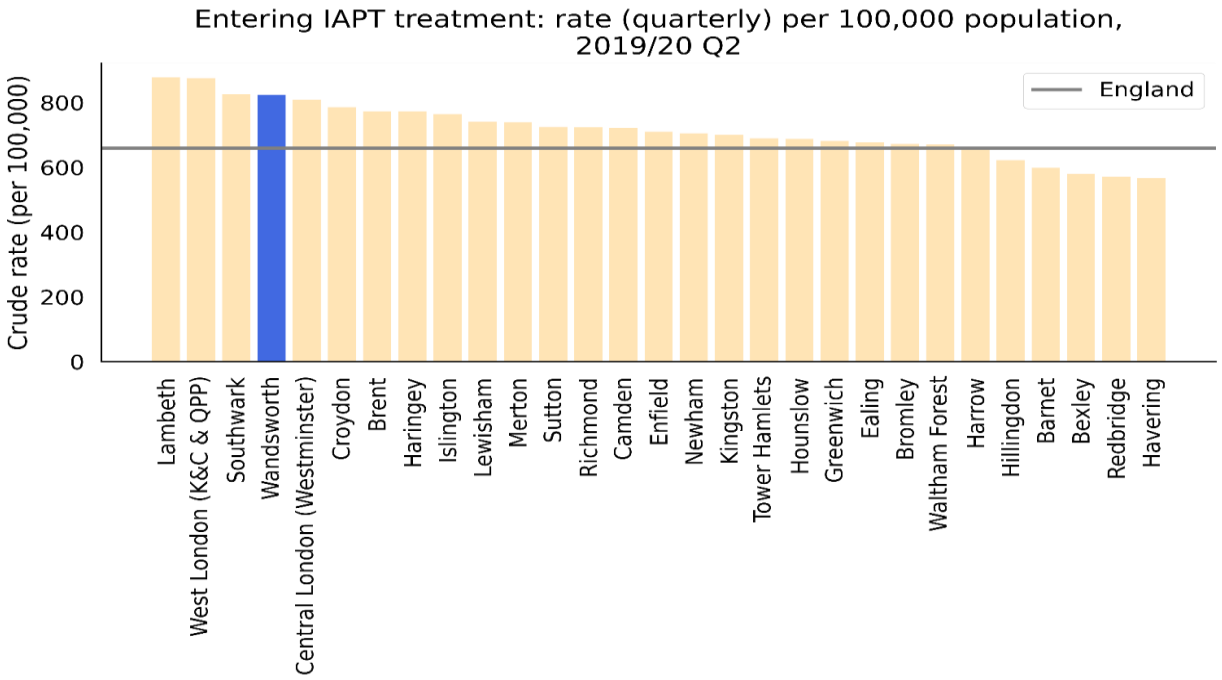


**- blue ribbon shows 95% confidence interval around Wandsworth's indicator values*
Source: PHE Public Health Profiles

Rate of adults entering IAPT treatment

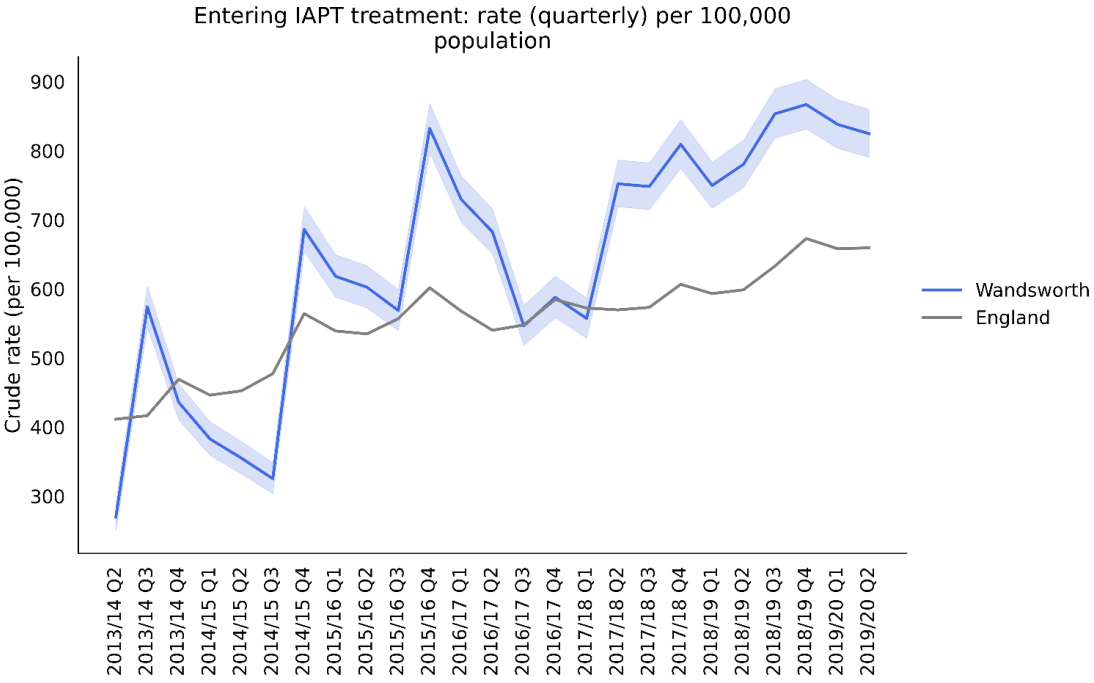
In 2019/20 Q2, Wandsworth's rate of adults aged 18+ entering IAPT treatment was 824.3/ 100,000 population (n=2165), the 4th highest rate in London, 25.1% higher than the England average, and identical to the London average (**Figure 92**). The latest Wandsworth's figure for 2019/20 Q2 was 205.6% higher from 2013/14 Q2, in comparison with a 60.3% increase in England's rate in the equivalent time period (**Figure 93**).

Figure 92: IAPT Treatment Starts for Adults Aged 18 and Over by CCG, 2019/20 Q2



Source: PHE Public Health Profiles

Figure 93: IAPT Treatment Starts for Adults Aged 18 and Over, 2014–2020



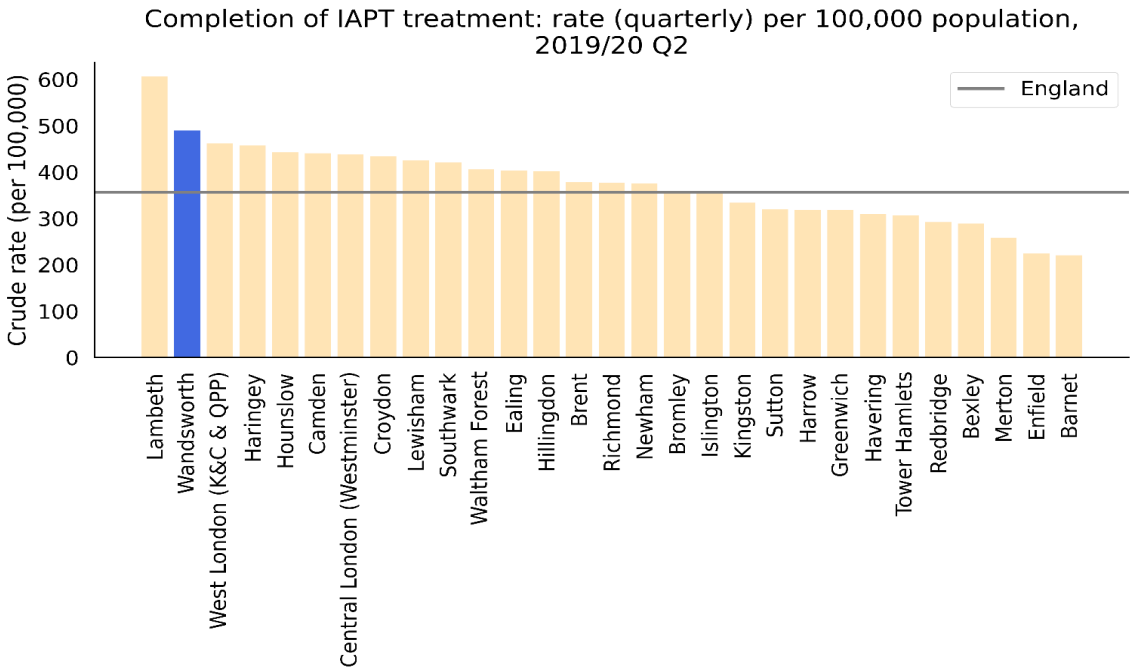
**- blue ribbon shows 95% confidence interval around Wandsworth's indicator values*

Source: PHE Public Health Profiles

IAPT completion rates

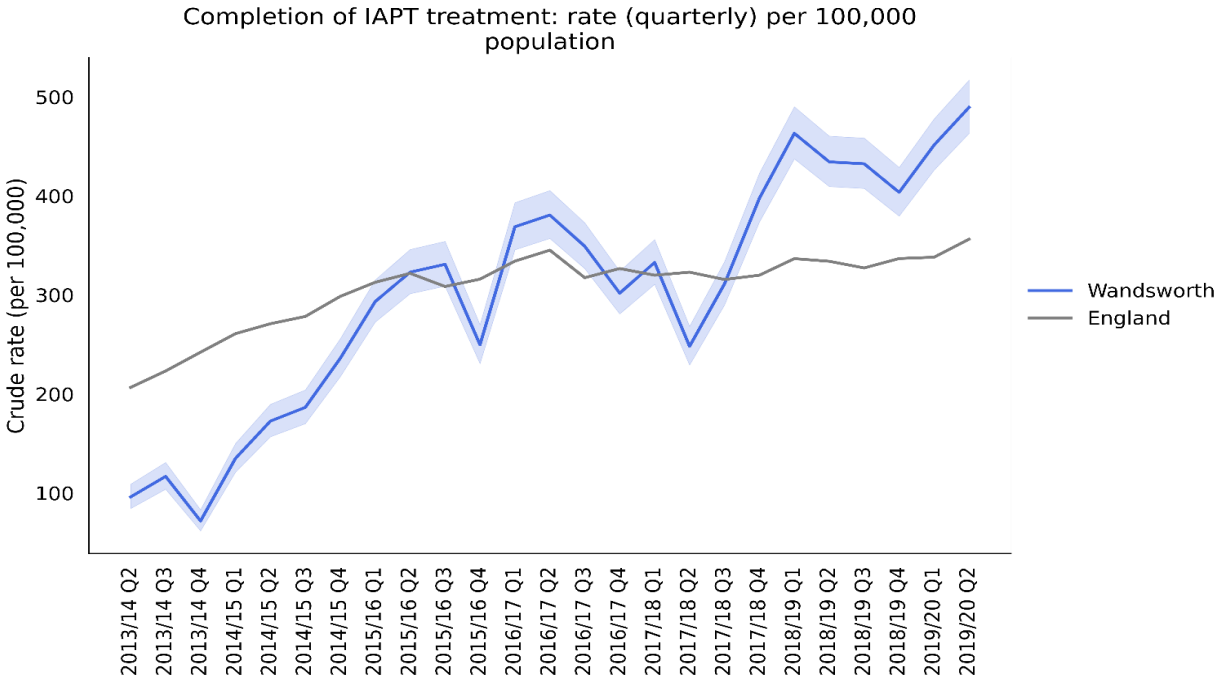
In 2019/20 Q2, Wandsworth's completion rate for IAPT was 489.3/100,000 population (n=1285), the 2nd highest rate in London and 37.4% higher than the England average (**Figure 94**). The latest Wandsworth's figure for 2019/20 Q2 is 410.3% higher from 2013/14 Q2, in comparison with a 72.5% increase in England's rate in the equivalent time period (**Figure 95**).

Figure 94: IAPT Completion Rates for Adults Aged 18 and Over by CCG, 2019/20 Q2



Source: PHE Public Health Profiles

Figure 95: IAPT Completion Rates for Adults Aged 18 and Over, 2014–2020



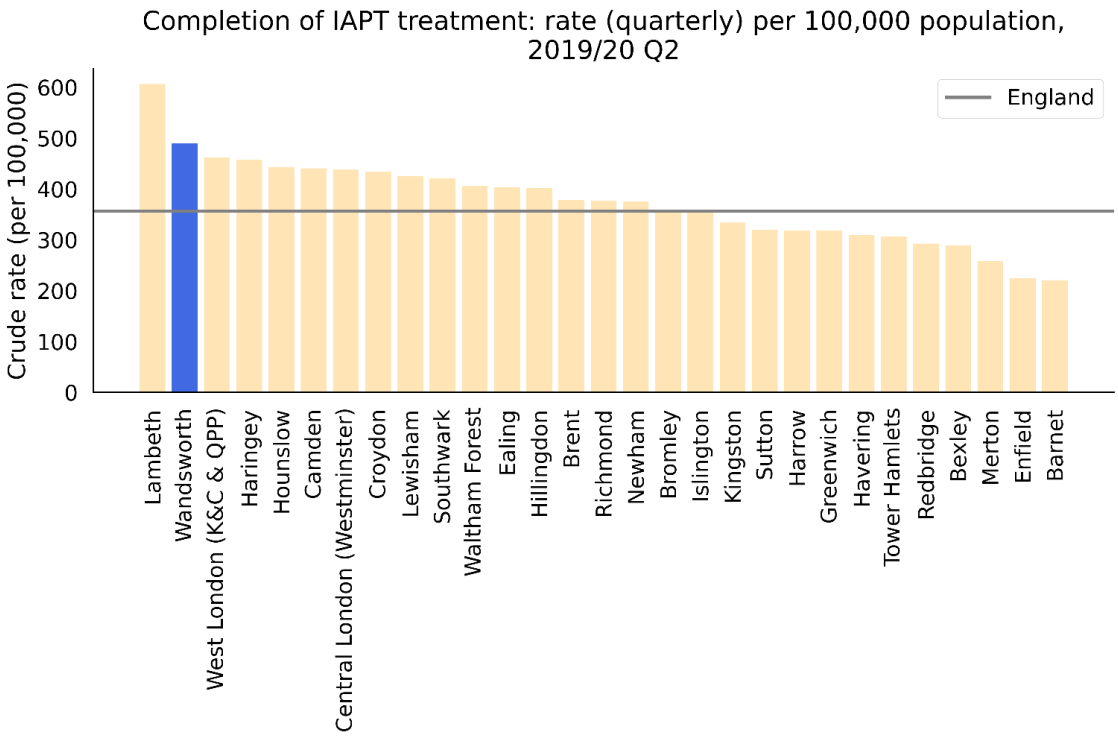
**- blue ribbon shows 95% confidence interval around Wandsworth's indicator values*

Source: PHE Public Health Profiles

IAPT service users that achieved reliable improvement

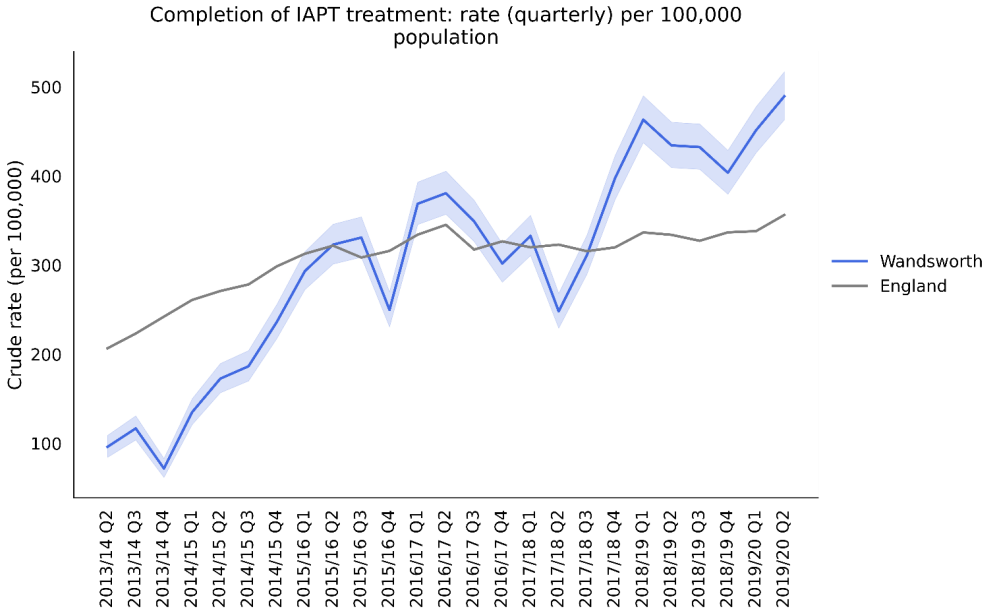
In 2019/20 Q2, the percentage of people who completed IAPT treatment and achieved "reliable improvement" is 70.1% (n=820), the 6th lowest rate in London, and 2.2% lower than the England average (**Figure 96**).
The latest Wandsworth's figure for 2019/20 Q2 is 12.4% higher from 2013/14 Q2, in comparison with a 16.1% increase in England's rate in the equivalent time period (**Figure 97**).

Figure 96: IAPT Completion Rates for Adults Aged 18 and Over by CCG, 2019/20 Q2



Source: PHE Public Health Profiles

Figure 97: IAPT Completion Rates for Adults Aged 18 and Over, 2014–2020

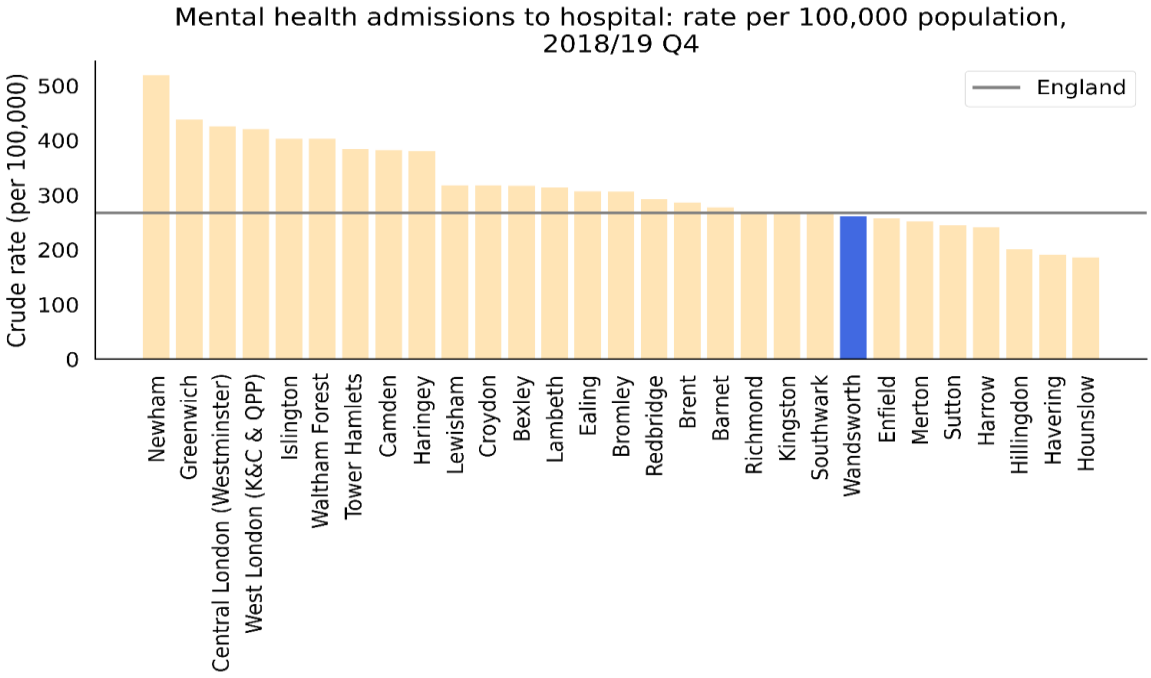


**- blue ribbon shows 95% confidence interval around Wandsworth's indicator values*
Source: PHE Public Health Profiles

5.4 Admissions to Specialist Mental Health Hospitals

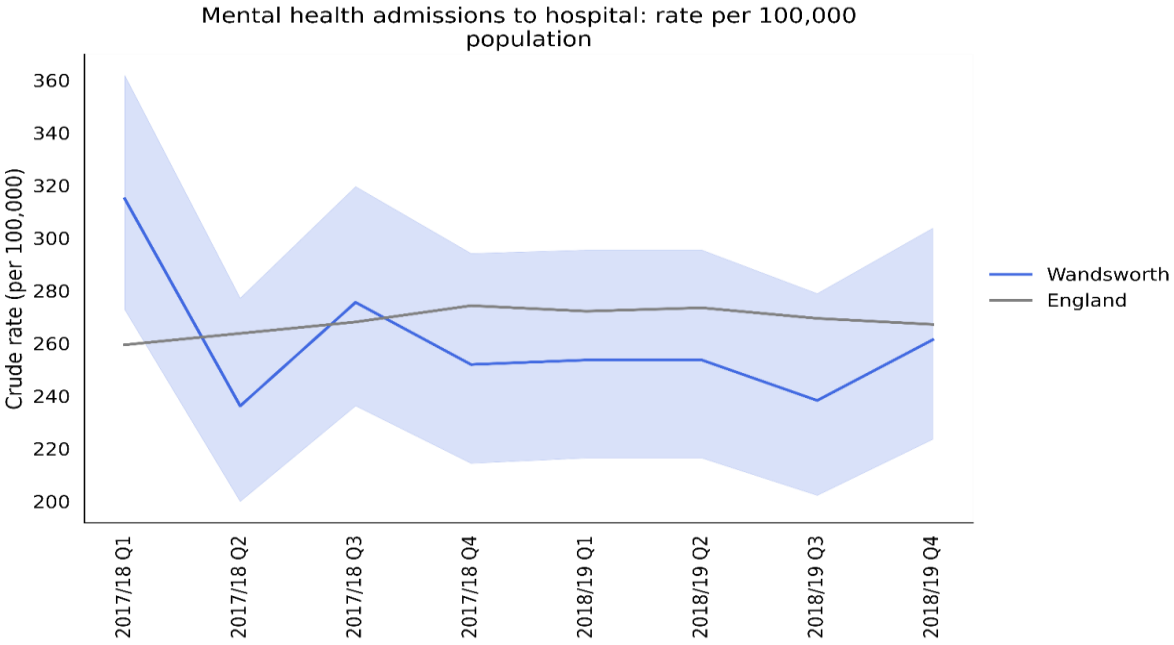
In 2018/19 Q4, Wandsworth's rate of admissions to mental health specialist trusts was 261.3 per 100,000 population (n=170), the 8th lowest rate in London, 2.2% lower than the England average, and the same as the London average (**Figure 98**). The latest Wandsworth's figure for 2018/19 Q4 was 17.0% lower from 2017/18 Q1, in comparison with a 3.0% increase in England's rate in the equivalent time period (**Figure 99**).

Figure 98: Admissions to Specialist Mental Health Hospitals by CCG, 2018/1 Q4



Source: PHE Public Health Profiles

Figure 99: Admissions to Specialist Mental Health Hospitals, 2018–2019



**- blue ribbon shows 95% confidence interval around Wandsworth's indicator values*

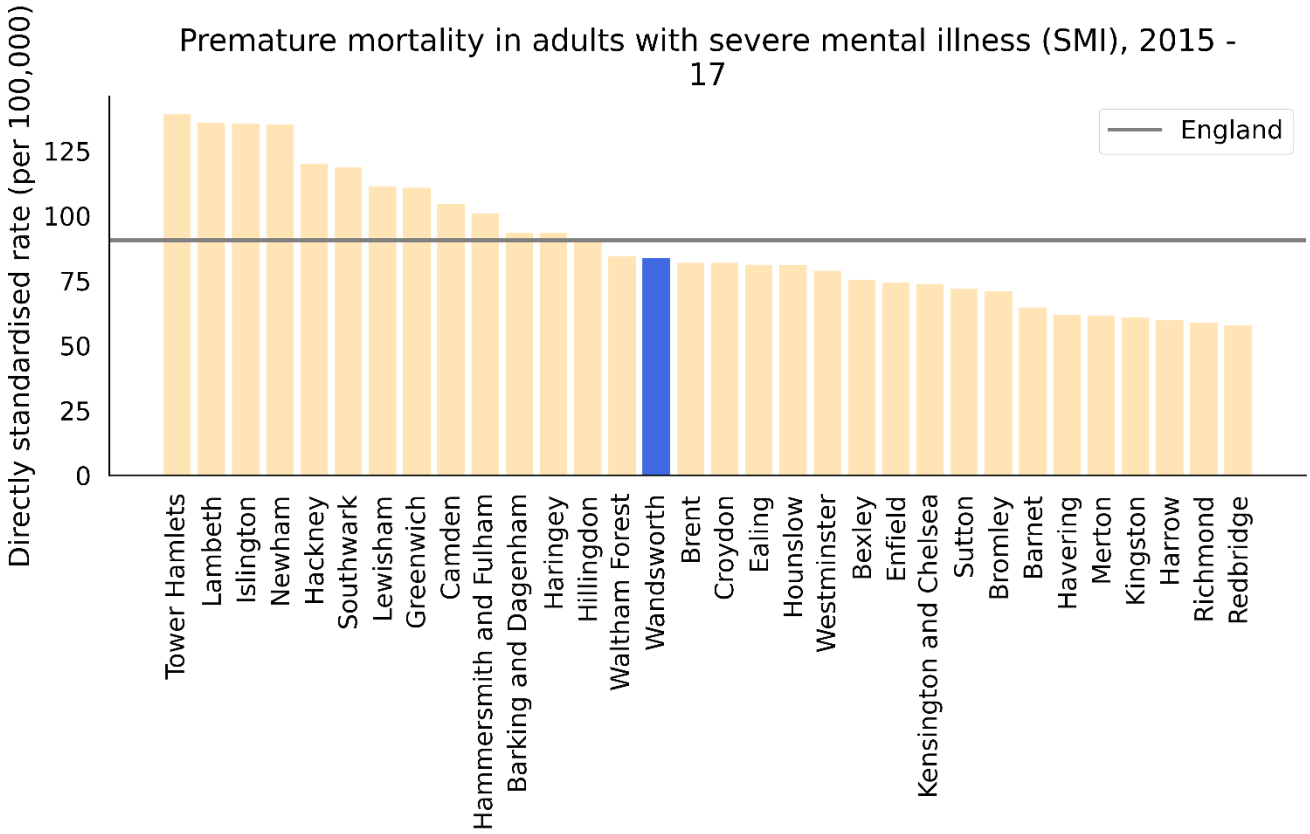
Source: PHE Public Health Profiles

5.5 Premature Mortality in Adults with Severe Mental Illness (SMI)

In 2015–17, Wandsworth's premature mortality rate in adults with SMI was 83.5 per 100,000 population (n=350), the 15th highest rate in London and 7.7% lower than the England average (**Figure 100**). No time trend data is available for this indicator.

Wandsworth's 2015–17 mortality rate in adults with SMI is 341% higher than the mortality rate in the general population, compared to England's excess mortality of 355%; more on this can be found in People JSNA Chapter.

Figure 100: Premature Mortality in Adults with SMI by Local Authority, 2015–17



Source: PHE Public Health Profiles

6. Sexual Health

6.1 Sexually Transmitted Infections

Sexual health is an important public health issue with health, social and economic impacts that can affect the people across the life course. It is a fundamental aspect of human identity and life experience. Wandsworth uses the World Health Organisation's definition of sexual health:

"A state of physical, mental and social well-being in relation to sexuality. It requires a positive and respectful approach to sexuality and sexual relationships, as well as the possibility of having pleasurable and safe sexual experiences, free of coercion, discrimination and violence."[29]

Poor sexual health can lead to sexually transmitted infections (STIs), HIV and unintended pregnancies which can lead to further long-lasting and costly impacts for both individuals and wider society. However, they can be reduced through safer sex practices such as the use of condoms, regular testing, and access to sexual health and reproductive services.[30.] Sexual health services currently focus on treatment for sexual health transmitted infections, HIV, unplanned pregnancies, and prevention.

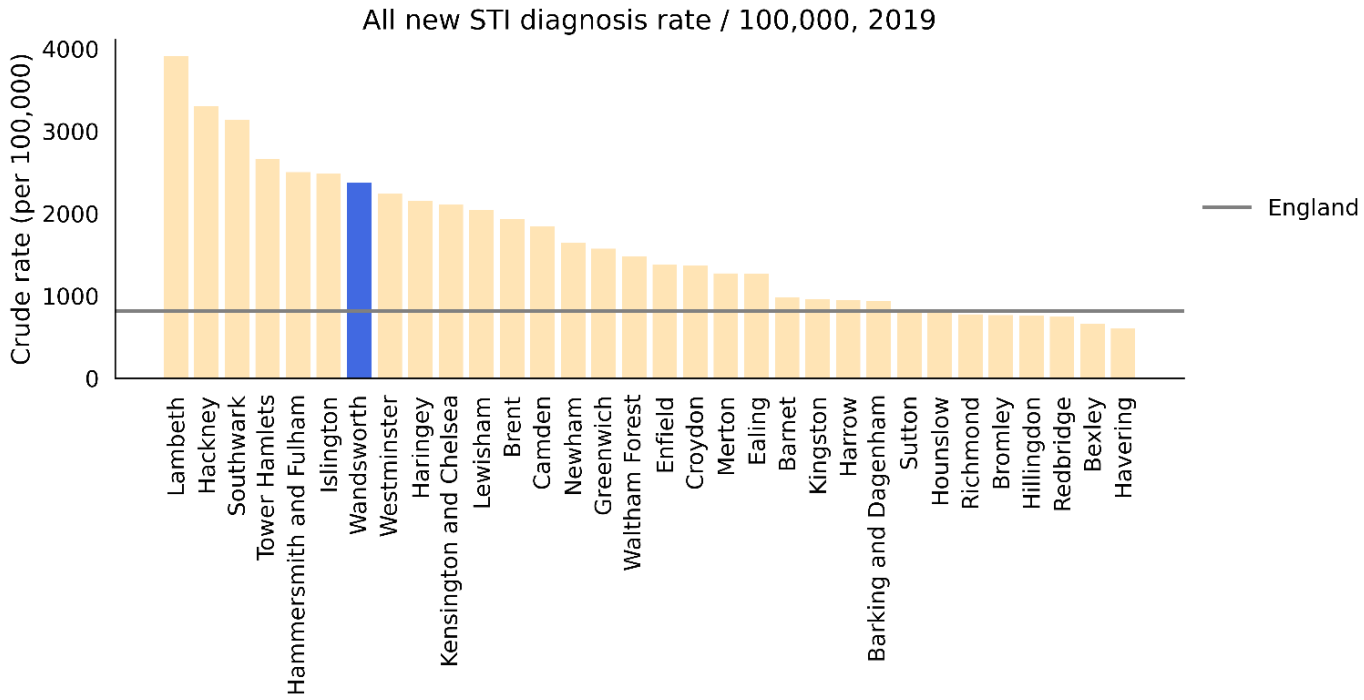
In 2018, there were 447,694 diagnoses of sexually transmitted infections (STIs), an increase of 5% since 2017. National increases have been seen across the spectrum of different STIs. However, in 2018 gonorrhoea had the highest STI diagnoses (56,000) representing a 26% increase since 2017. This is most concerning as cases of drug resistant strains of gonorrhoea have also been identified. The UK has also seen an increase of syphilis (5%) since 2017.

In 2019, Wandsworth's rate of new STI diagnoses was 2377.5 per 100,000 population (n=7838) , 7th highest rate in London, 191.4% higher than the England average (**Figure 101**). In 2019 the STI rate was 27.5% higher than 2012, in comparison with a 0.1% increase in England's rate in the equivalent time period (**Figure 102**).

Further detail regarding sexual health profiles in Wandsworth can be found in our comprehensive Sexual Health Needs Assessment and corresponding Strategy and Action Plan published in 2019.

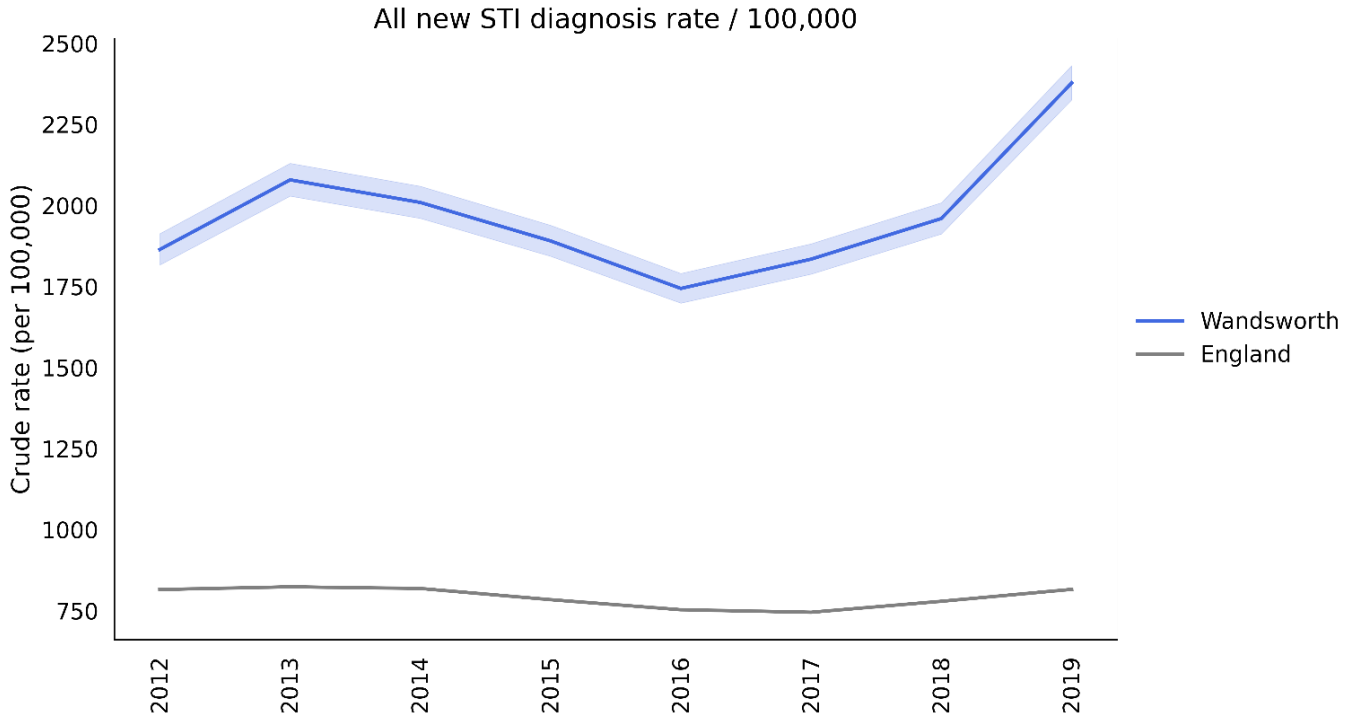
[29] WHO (2006) Defining sexual health: Report of a technical consultation on sexual health, 28-31 January 2002, Geneva
[30] Department of Health (2001) The national strategy for sexual health and HIV.

Figure 101: New STI diagnosis rate by local authority, 2019



Source: PHE Public Health Profiles

Figure 102: New STI diagnosis rate, 2012–2019



**- blue ribbon shows 95% confidence interval around Wandsworth's indicator values*

Source: PHE Public Health Profiles

Key Findings from Wandsworth Sexual Health Needs Assessment, 2018 (STIs):

- the 2018 STI diagnosis rate for England was784/100,000 population, and higher in Wandsworth at 1976/100,000 population
- newly diagnosed STIs (excluding chlamydia aged <25) at 2195/100,000 population is significantly higher than both England at 851/100,000 population and London at 936/100,000
- trends have stabilised since 2012
- diagnostic rates of gonorrhoea is 328.5/100,000 population, with recent trends showing a slow increase in diagnosis which is higher than the London average of 279.4
- London is currently witnessing an increase in the rate of Syphilis. In Wandsworth in 2018, the syphilis diagnostic rate was at 54.8/100,000 population which is higher than the other London boroughs and significantly higher than the rest of England
- an HIV prevalence rate of 5.49/1000 people aged 15–59 years, Wandsworth is now classed as an 'extremely high' prevalence area for HIV in accordance with NICE guidance
- a larger proportion of white gay/lesbian are newly diagnosed with STIs
- the 2018 chlamydia infection rate represents a 16% increase from the previous year (3,063/100,000 population).
- on-line screening activity is beginning to grow, rising to 439 by the end of quarter two, with positivity increasing from 4.9% to 6.2%. This provides good evidence to suggest that the channel shift form clinic to e-services is starting to take hold.
- National and local evidence clearly demonstrates that sexual health need varies according to factors such as age, gender, sexuality and ethnicity with inequalities in sexual health disproportionately affecting Black & Asian, Minority Ethnic (BAME) communities, those identifying as LGBTQ+, men who have sex with men (MSM).

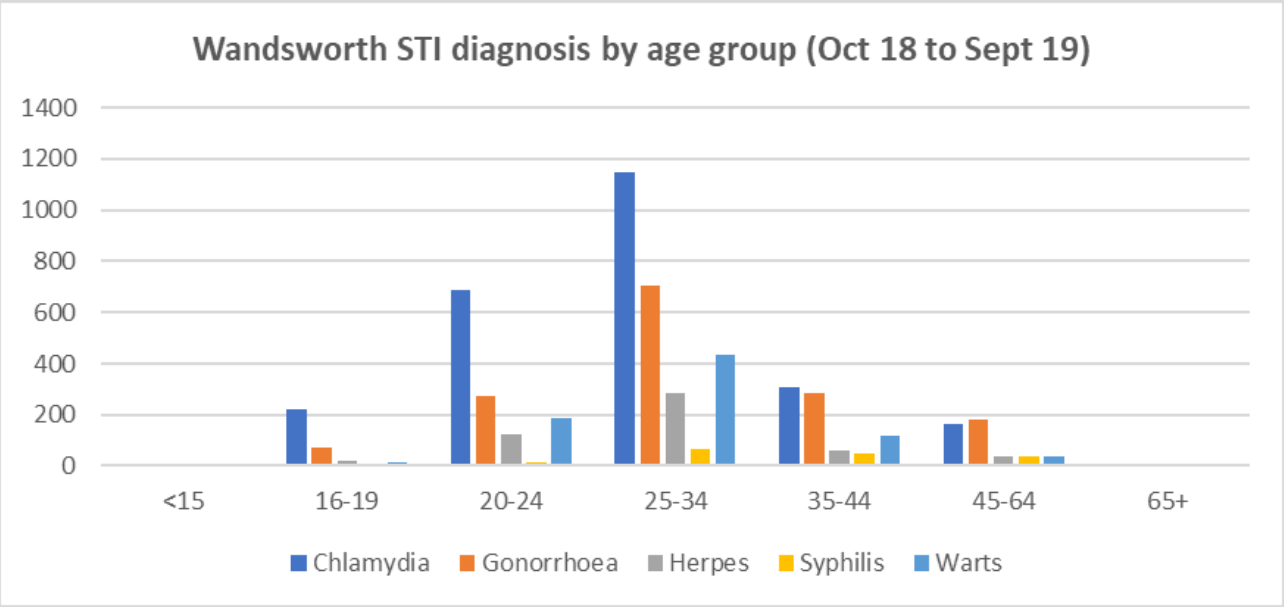
MSM are among the largest groups diagnosed with a new STI diagnosis. BAME communities in Wandsworth also experience a significantly higher proportion of STI infection compared to the proportion of the population from other ethnic groups. Moreover, with an HIV prevalence rate of 5.49/1000 people aged 15–59 years, Wandsworth is classed as an 'extremely high' prevalence area for HIV in accordance to NICE guidance. This compares with an England rate of 2.4/1000, and 5.7/1000 across London. While this rate has remained stable over the last 5 years universal testing is recommended for high prevalence areas[31]. National analysis shows two-thirds of late HIV diagnoses occur in high-and extremely-high-prevalence local authorities[32]. More intensive testing is recommended in areas exceeding the 5/1000 threshold.

Age and gender distribution of new STI diagnoses

The age and gender distribution of new STI diagnoses (chlamydia, gonorrhoea, herpes, syphilis, warts) in Wandsworth residents in 2018 highlights that the largest number of newly diagnosed STI's are in the 25 to 34-year-old age cohort (**Figure 103**).

[31] NICE guideline [NG60] (2016) HIV testing: increasing uptake among people who may have undiagnosed HIV

Figure 103: STI diagnoses by age group in Wandsworth, 2018/19

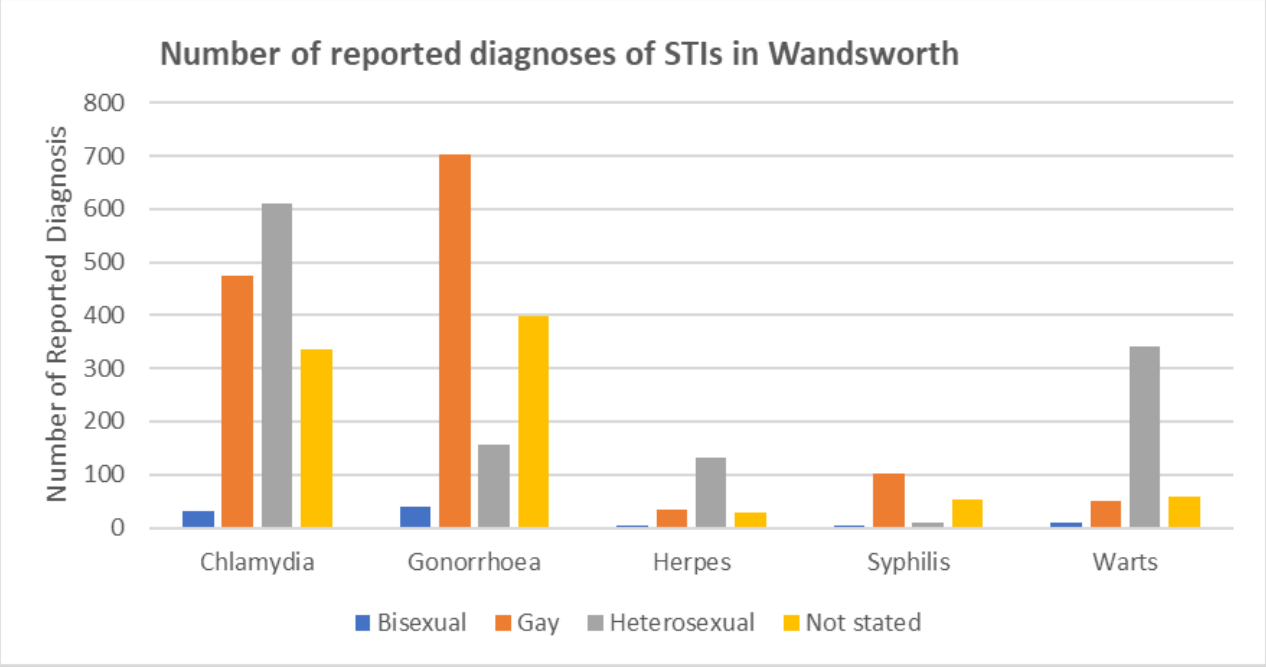


Source: GUMCAD Extracted Feb 2020

Sexual orientation

People identifying as LGBTQ+ can experience a greater degree of health inequalities, including sexual health[33]. National data shows where gender and sexual orientation are known. MSM account for 29% of London residents diagnosed with a new STI in a specialist health clinic. 90% have syphilis and 63% have gonorrhoea. In line with the national picture, the amount of diagnoses of gonorrhoea and syphilis are higher in gay men compared to heterosexual men (**Figure 104**).

Figure 104: Count of STI diagnoses in Wandsworth by sexual orientation



Source: GUMCAD Sep '18–Oct '19

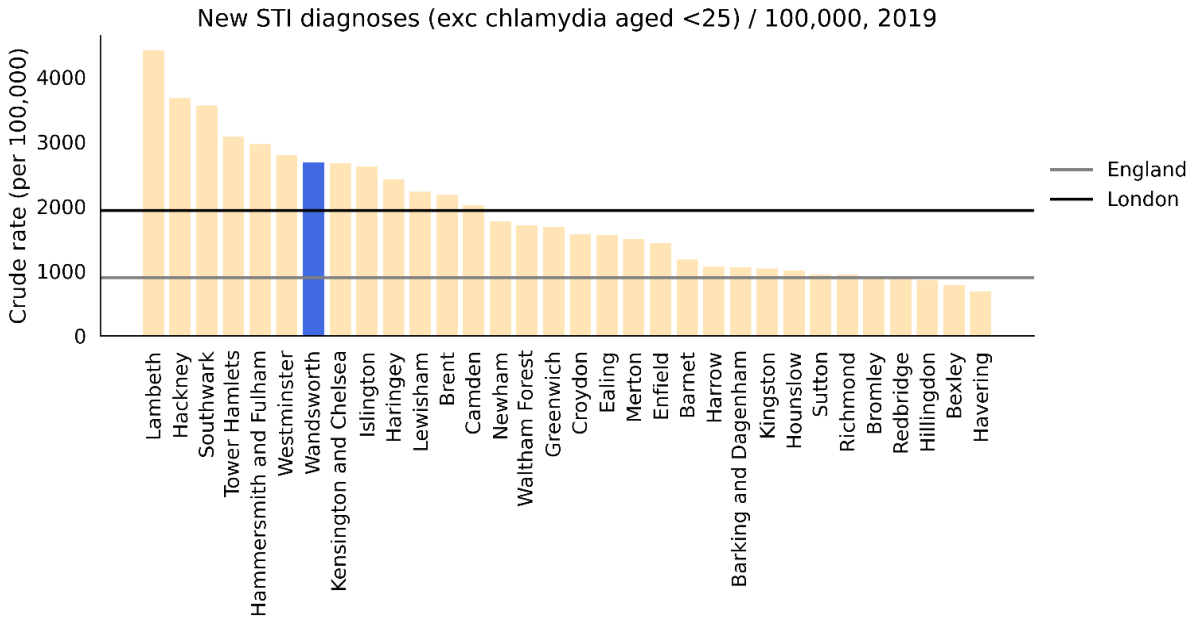
[33] Government Equalities Office (2018) LGBT Action plan 2018 – improving the lives of lesbian, gay, bisexual and transgender people

When comparing new diagnosis of STIs by ethnic origin and sexual orientation a larger proportion of white gay/lesbian are newly diagnosed.

New STI diagnoses (excluding chlamydia) in people aged under 25 years

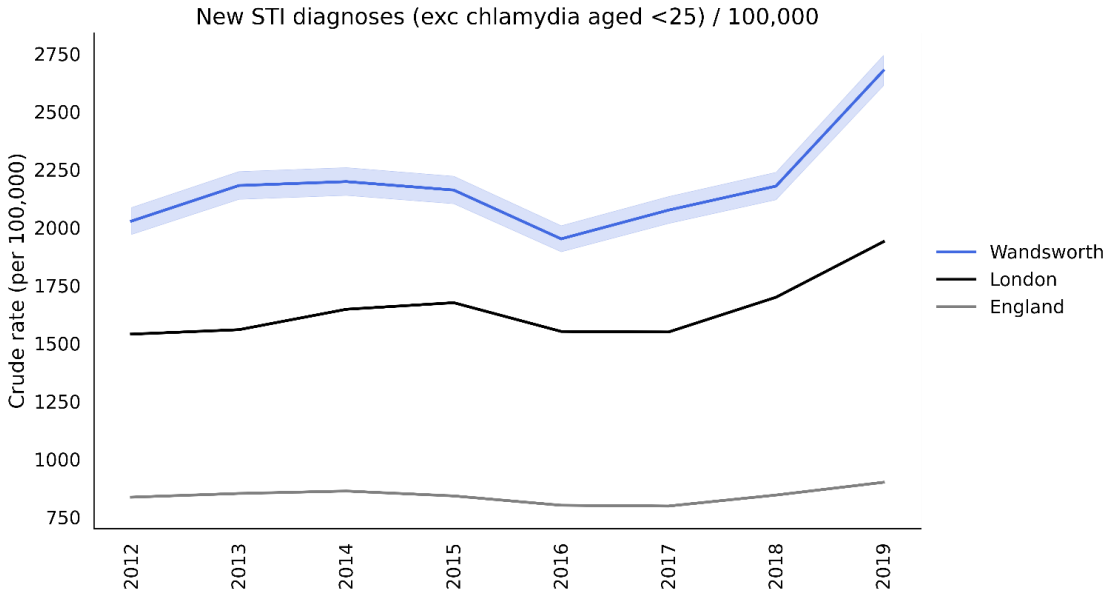
In 2019, Wandsworth's rate of new STI diagnoses (excluding chlamydia) in under 25 year olds was 2677.0 per 100,000 (n=6455), 7th highest, 197.4% higher than the England average, and 38.1% higher than the London average (**Figure 105**). The latest borough figure for year 2019 was 32.0% higher from year 2012, in comparison with a 7.7% increase in England's rate in the equivalent time period (**Figure 106).**

Figure 105: New STI diagnoses, excluding chlamydia, in people aged under 25 by local authority, 2019



Source: PHE Public Health Profiles

Figure 106: New STI diagnoses, excluding chlamydia, in people aged under 25, 2012–2019



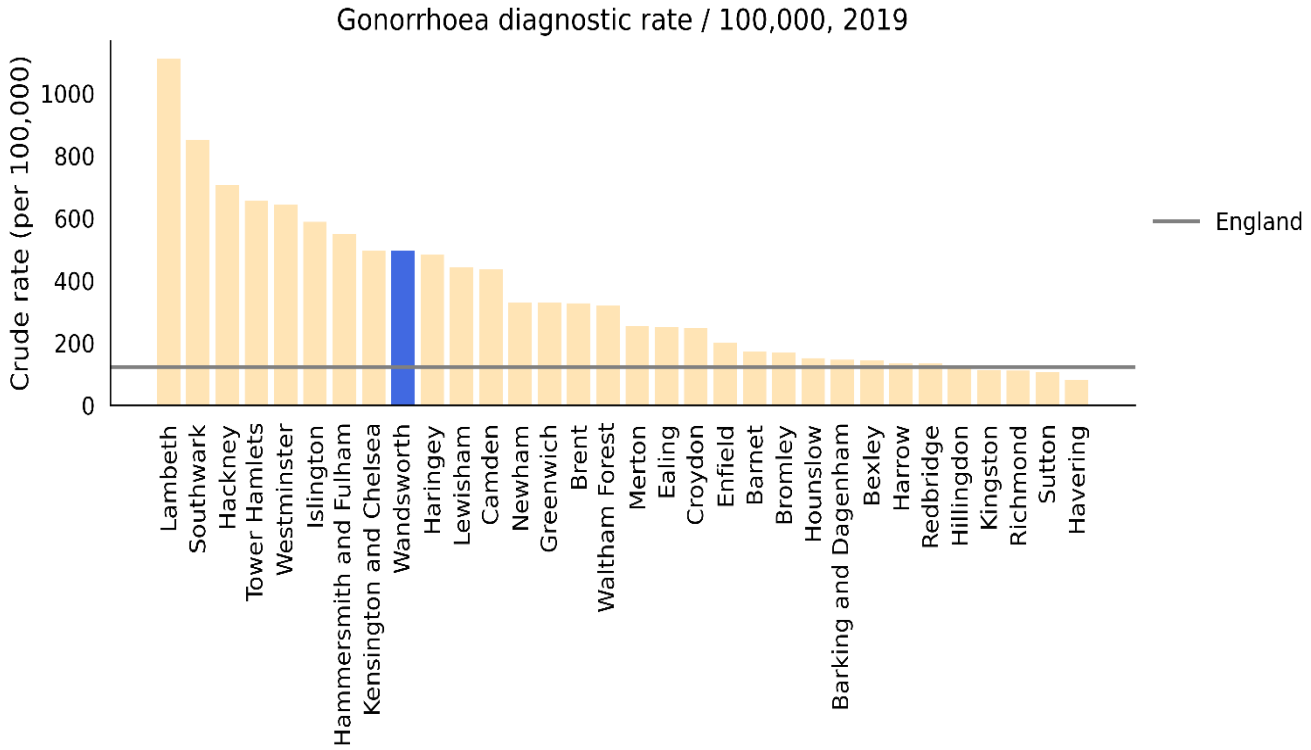
**- blue ribbon shows 95% confidence interval around Wandsworth's indicator values*
Source: PHE Public Health Profiles

Genital chlamydia trachomatis is the most commonly reported bacterial STI in England. Infection is asymptomatic in at least 70% of women and 50% of men. As a result, most infections remain undiagnosed[34]. Untreated chlamydia infection has significant health consequences. It is associated with considerable health risks in women of reproductive age, including pelvic inflammatory disease, ectopic pregnancy and infertility. In men, complications can include urethritis, epididymitis and Reiter' Syndrome. The chlamydia detection rate is one of the Health Protection, part the Public Health Outcomes Framework (PHOF). In 2013 the department of Health set a recommended chlamydia detection rate of ≥2300 per 100.000 population requiring high volumes of screening and diagnosis.

Gonorrhoea diagnostic rate

In 2019, Wandsworth's rate of gonorrhoea diagnoses was 495.0 per 100,000 population (n=1632) , 9th highest rate in London and 300.9% higher than the England average (**Figure 107**). The latest borough figure for 2019 was 147.1% higher from 2012, in comparison with a 154.1% increase in England's rate in the equivalent time period (**Figure 108**).

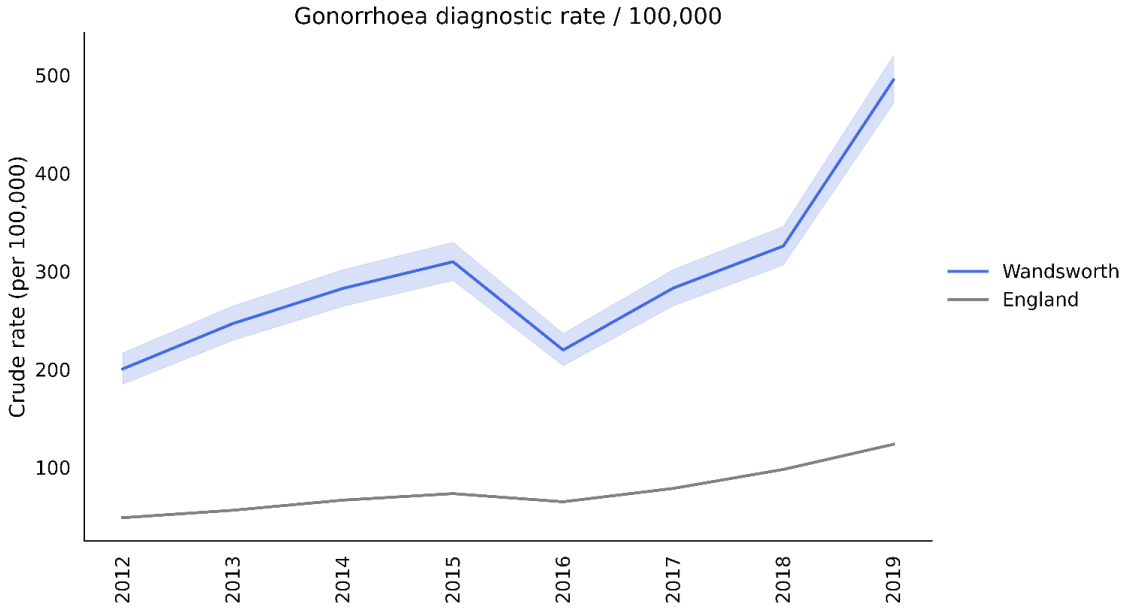
Figure 107: Gonorrhoea diagnostic rate by local authority, 2019



Source: PHE Public Health Profiles

[34] Stamm W.E. Chlamydia trachomitis: progress and problems. Journal of Infectious Diseases. 1999; 179:S380-3.

Figure 108: Gonorrhoea diagnostic rate, 2012–2019

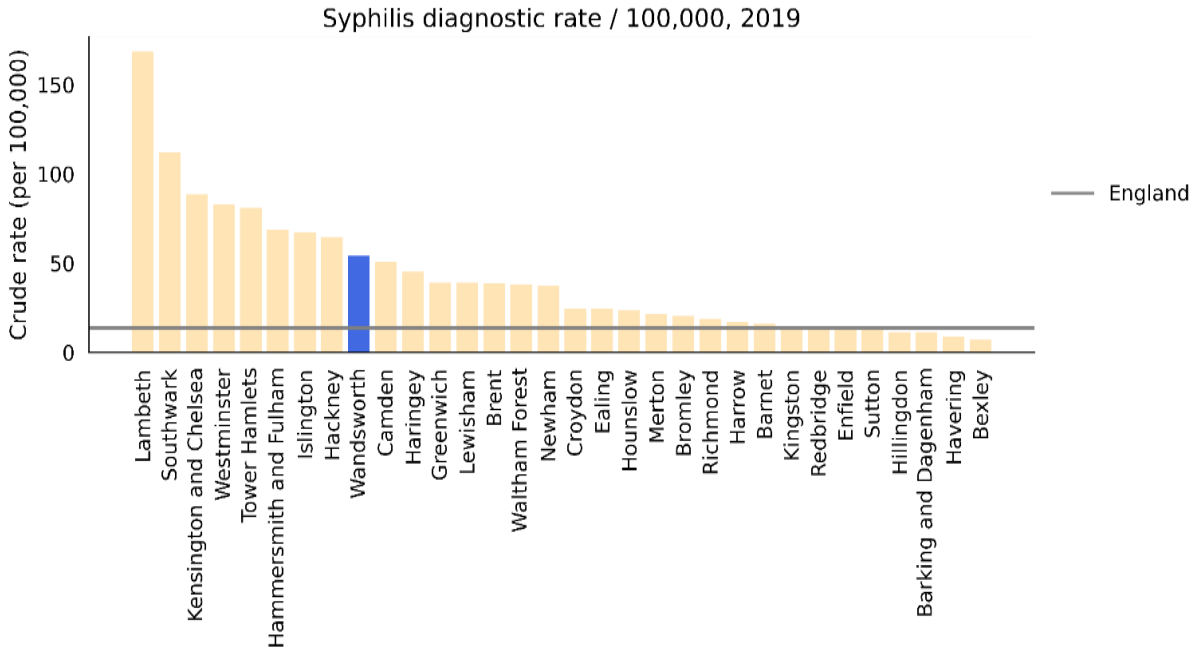


**- blue ribbon shows 95% confidence interval around Wandsworth's indicator values*
Source: PHE Public Health Profiles

Syphilis diagnostic rate

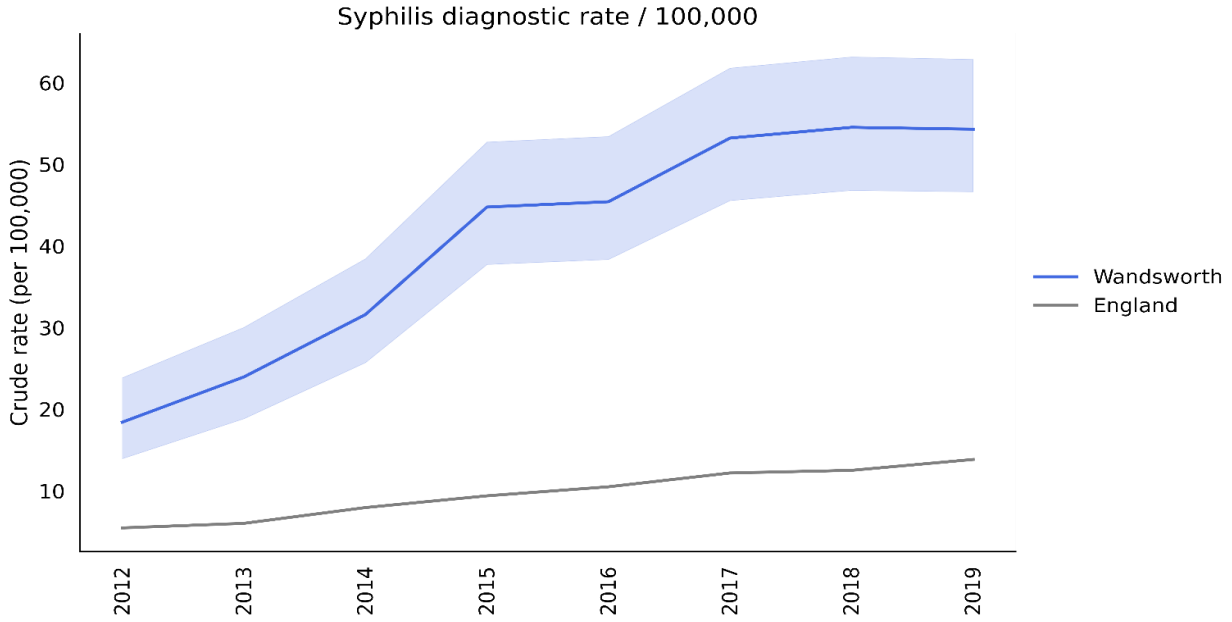
In 2019, Wandsworth's syphilis diagnostic rate was 54.3 per 100,000 population (n=179) , 9th highest rate in London, , and 292.2% higher than the England average (**Figure** 109). The latest borough figure for 2019 was 194.8% higher from 2012, in comparison with a 153.2% increase in England's rate in the equivalent time period (**Figure 110**). In response to the rise, Public Health England has formed a "Syphilis Action Group" to develop and initiate a London wide syphilis action plan. Wandsworth has been actively involved in the group.

Figure 109: Syphilis diagnoses by local authority, 2019



Source: PHE Public Health Profiles

Figure 110: Syphilis diagnostic rate, 2012–2019

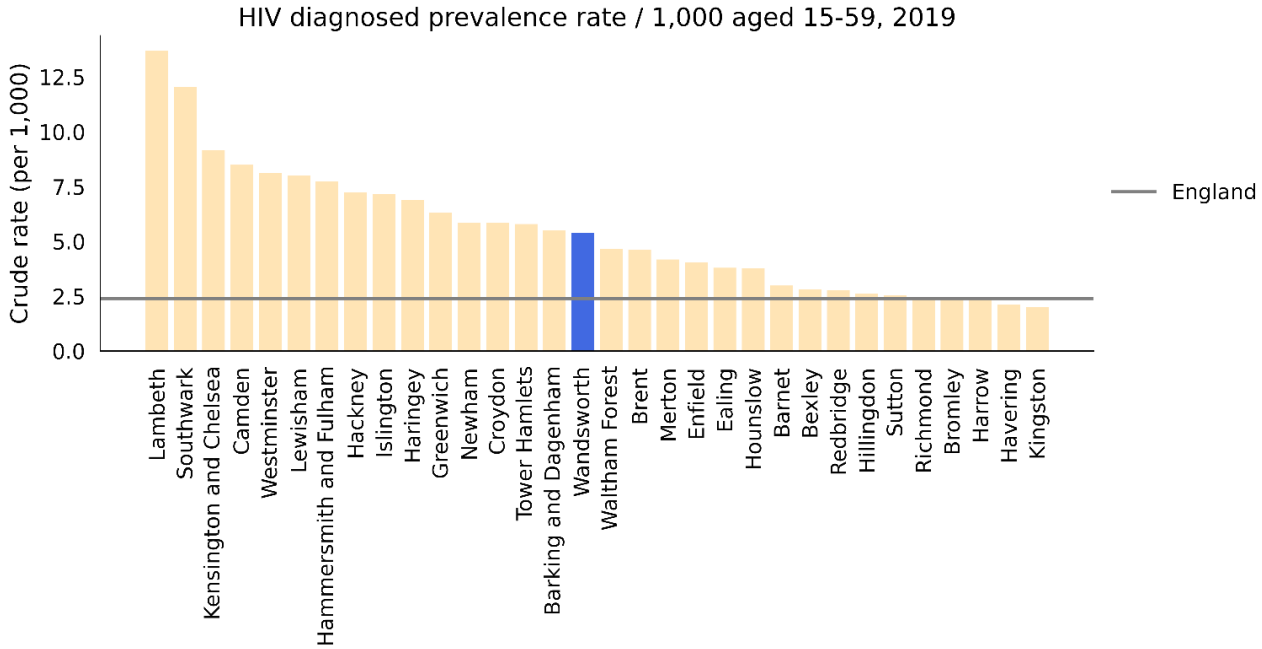


**- blue ribbon shows 95% confidence interval around Wandsworth's indicator values*
Source: PHE Public Health Profiles

HIV Prevalence

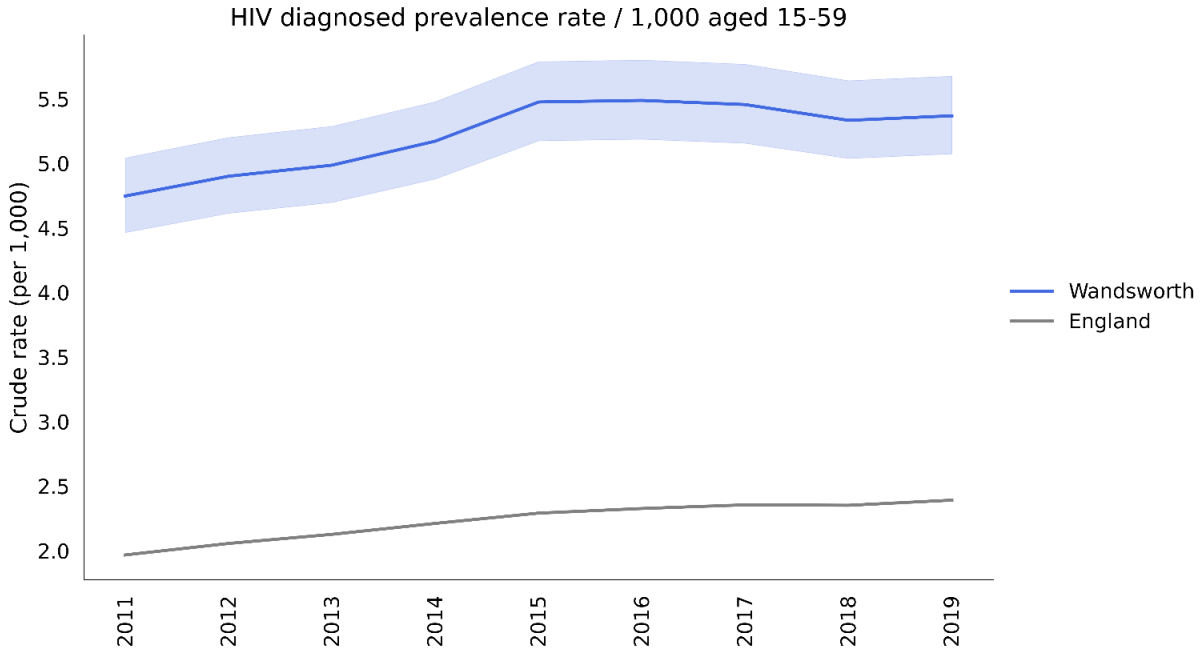
In 2019, Wandsworth's diagnosed prevalence of HIV amongst the 15-59 years was 5.4 per 1,000 population (n=1233) , 16th highest rate in London, 124.5% higher than the England average, and identical to the London average, (**Figure 111**). The latest borough figure for year 2019 was 13.1% higher than 2011, in comparison with a 21.6% increase in England's rate in the equivalent time period (**Figure 112**).

Figure 111: HIV diagnosed prevalence by local authority, 2019



Source: PHE Public Health Profiles

Figure 112: HIV diagnosed prevalence, 2011–2019



**- blue ribbon shows 95% confidence interval around Wandsworth's indicator values*
Source: PHE Public Health Profiles

The rate of new HIV diagnosis per 100,000 population among people aged 15 years and above was 25.9% compared to 20.9% across London, and 8.7% in England. This year, 70 adult residents were newly diagnosed with HIV. Since 2015, Wandsworth has seen a 34.4% decrease in new HIV diagnoses. The decrease implies the success of a combination HIV prevention which includes condom provision, pre-exposure prophylaxis (PrEP), expanded HIV testing, and prompt initiation of treatment after diagnosis.

In Wandsworth the E-Service during this period had HIV detection rates for over 24 year olds of non-reactive 7,018 (99.7%) and reactive 21 (0.3%) while the numbers of postal test kits sent out by the newly commissioned SH:24 service totalled 26 with 11 being processed. Most of these kits were requested by people in the 25-34 age group (48.39%) and by males (64.34%). 2 reactive results were produced from those kits processed.

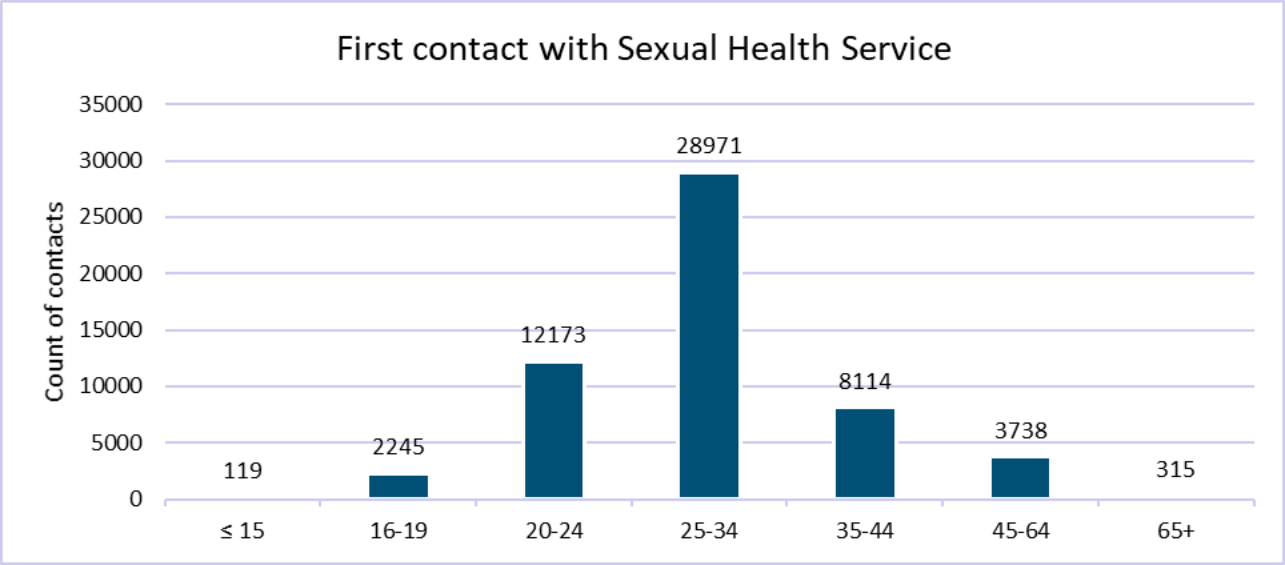
The vast majority (79.6%) of newly diagnosed patients with HIV in the borough were put on Antiretroviral treatment (ART) within 91 days of their diagnosis. Successful ART decreases a person's viral load, significantly reduces the risk of future transmission and transforms HIV from a fatal infection to a chronic but manageable condition. However, between 2016 and 2018, 34.5% HIV diagnoses were made at a late stage of infection (CD4 count =<350 cells/mm 3). Late diagnosis is the most important predictor of HIV-related morbidity and short-term mortality and is a key component of valuating the success of HIV testing efforts.

Contact with sexual health services

In addition to accessing services at the local Integrated Sexual Health, ISH service, borough residents can also choose to access sexual health service anywhere in the country. Latest available service data shows that there has been good and improving access to the variety of sexual health services offered across the borough. In Wandsworth from October 2018 to September 2019 over 55,500 people accessed a sexual health service for the first time (**Figure 113**). Access was greater amongst females who represented 59% of attendees[35].

[35] GUMCAD (accessed Feb 2020), Wandsworth Patients attending all GUM and non-GUM services (Oct 18-Sept 19)

Figure 113: Count of contacts with Wandsworth's sexual health service by age group



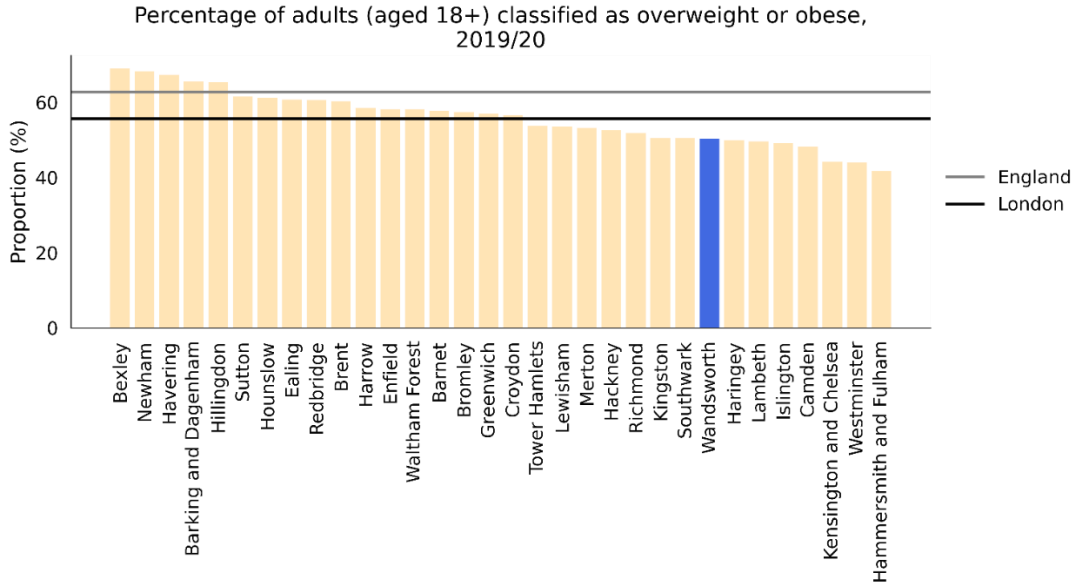
Source: GUMCAD Extracted Feb 2020

7. Obesity

7.1 Prevalence

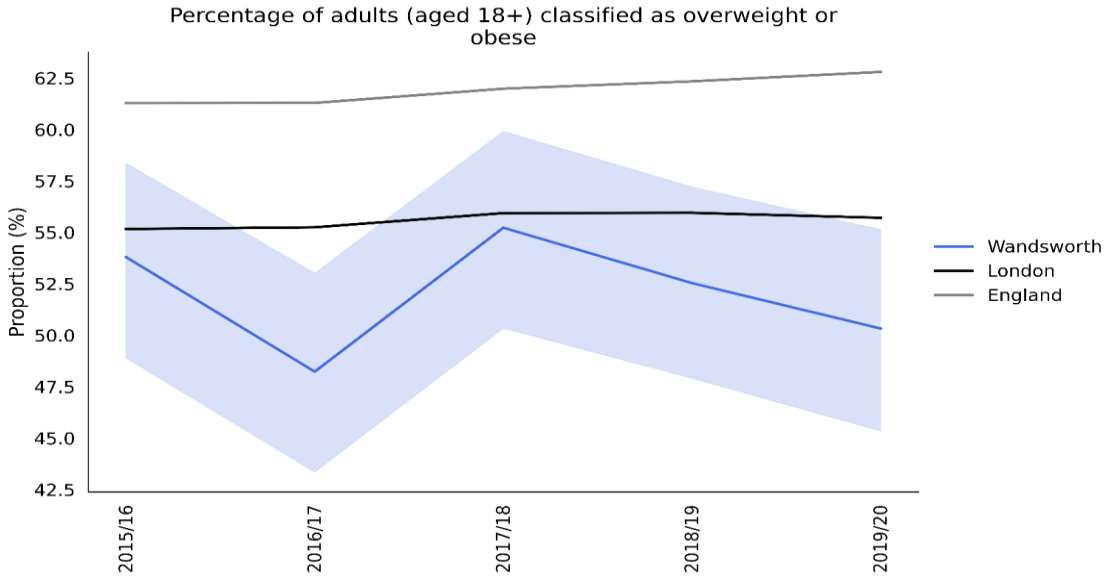
In 2019/20, Wandsworth's percentage of adults (aged 18+) classified as overweight or obese was 50.3%, 8th lowest in London (**Figure 114**) , 19.9% lower than the England average, and 9.7% lower than the London average. The latest borough figure was 6.5% lower than in 2015/16, in comparison with a 2.5% increase in England's rate in the equivalent time period (**Figure 115**).

Figure 114: Proportion of obese or overweight adults by local authority, 2019/10



Source: PHE Public Health Profiles

Figure 115: Proportion of obese or overweight adults, 2016–2020



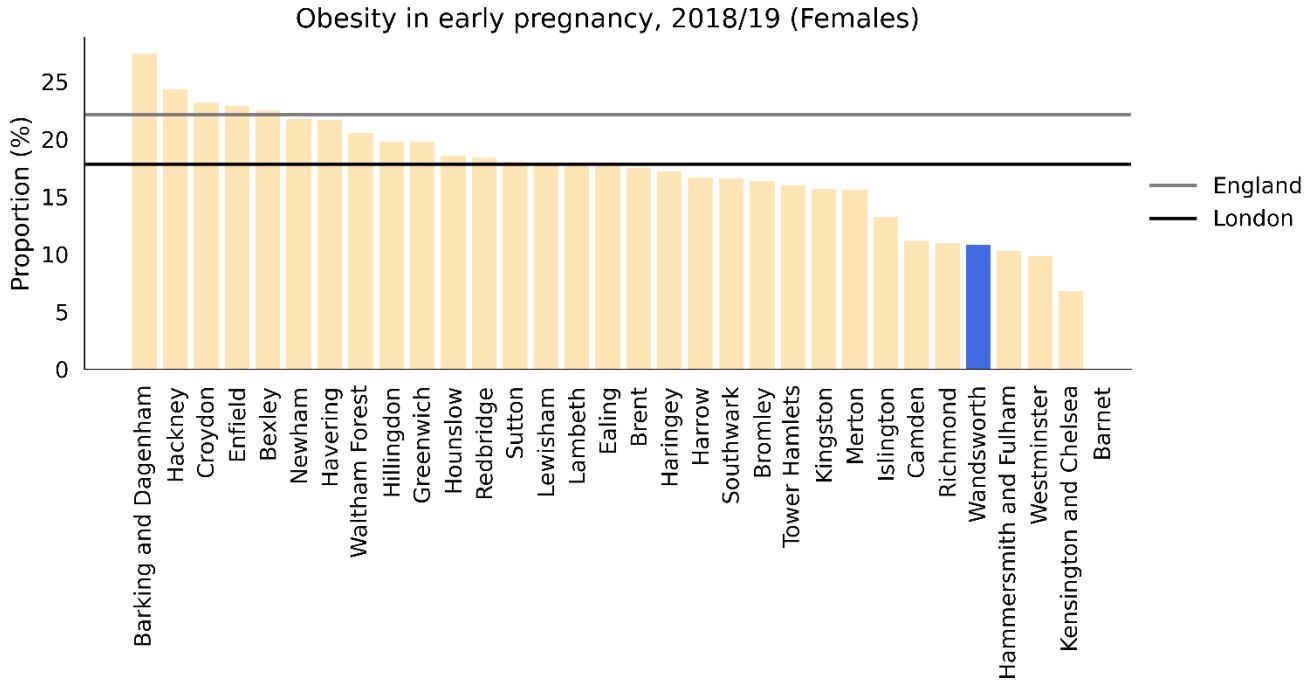
**- blue ribbon shows 95% confidence interval around Wandsworth's indicator values*

Source: PHE Public Health Profiles

7.2 Obesity in early pregnancy

In 2018/19, Wandsworth's prevalence of obesity in early pregnancy was 10.8%, the 4th lowest rate in London (**Figure 116**) , 51.2% lower than the England average, and 39.4% lower than the London average. No time trend information is available for this indicator.

Figure 116: Prevalence of obesity in early pregnancy by local authority, 2019/10



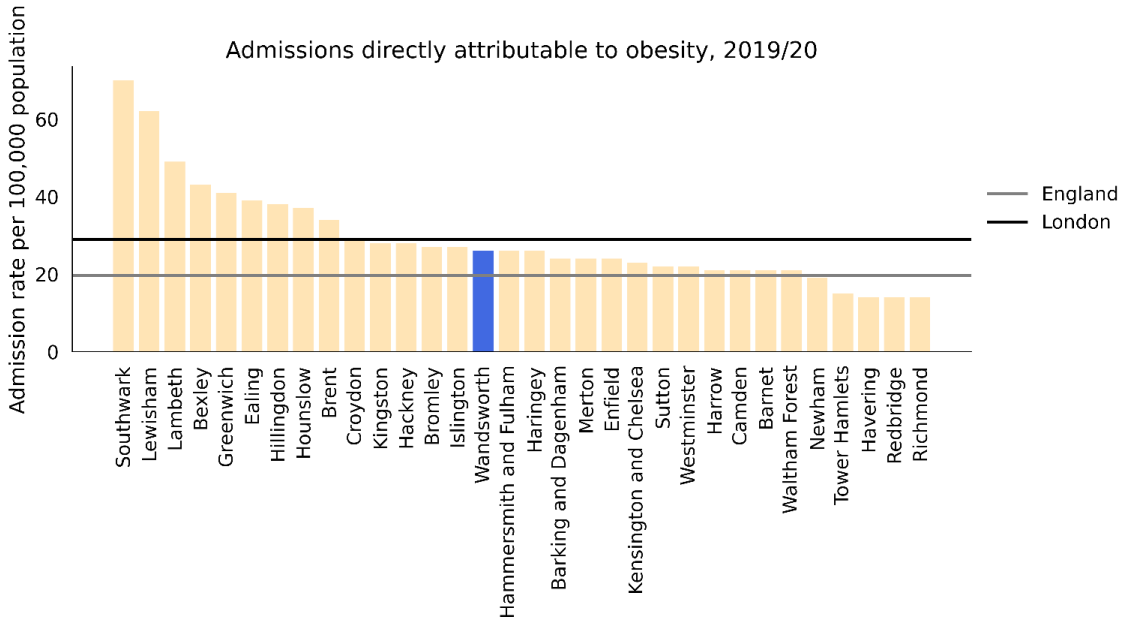
Source: PHE Public Health Profiles

7.2 Hospital Admissions for Obesity

Admissions directly attributable to obesity

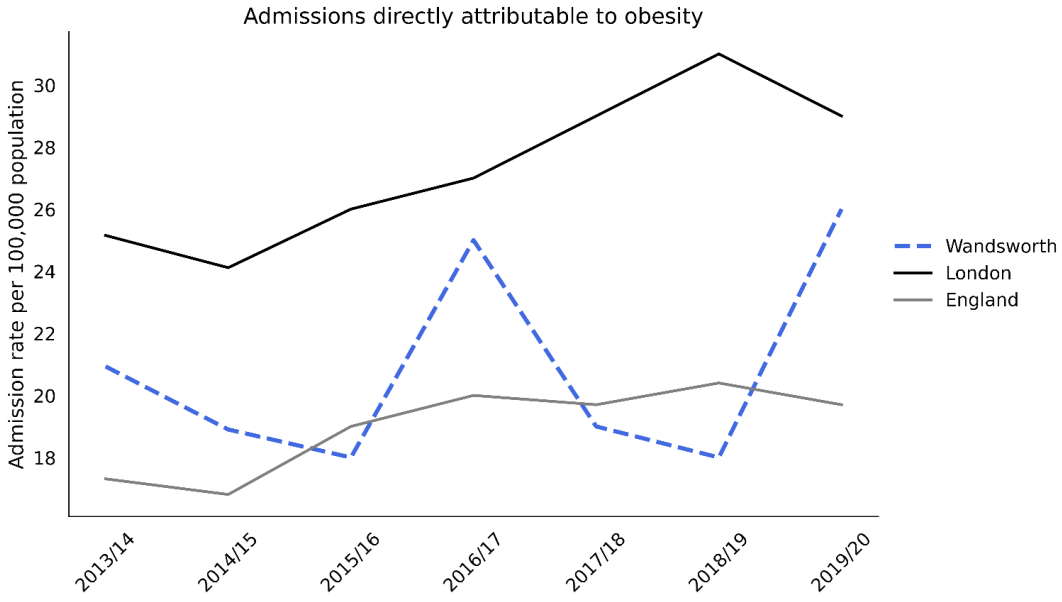
In 2019/20, Wandsworth's rate of hospital admissions directly attributable to obesity was 26.0 per 100,000 population, the 16th highest rate in London (**Figure 117**), 32.0% higher than the England average, and 10.3% lower than the London average. The latest borough figure was 24.2% higher than in 2013/14, in comparison with a 13.8% increase in England's rate in the equivalent time period (**Figure 118**).

Figure 117: Admissions with obesity in primary diagnostic field by local authority, 2019/20



Source: NHS Digital Statistics on Obesity, Physical Activity and Diet

Figure 118: Admissions with obesity in primary diagnostic field, 2014–2020

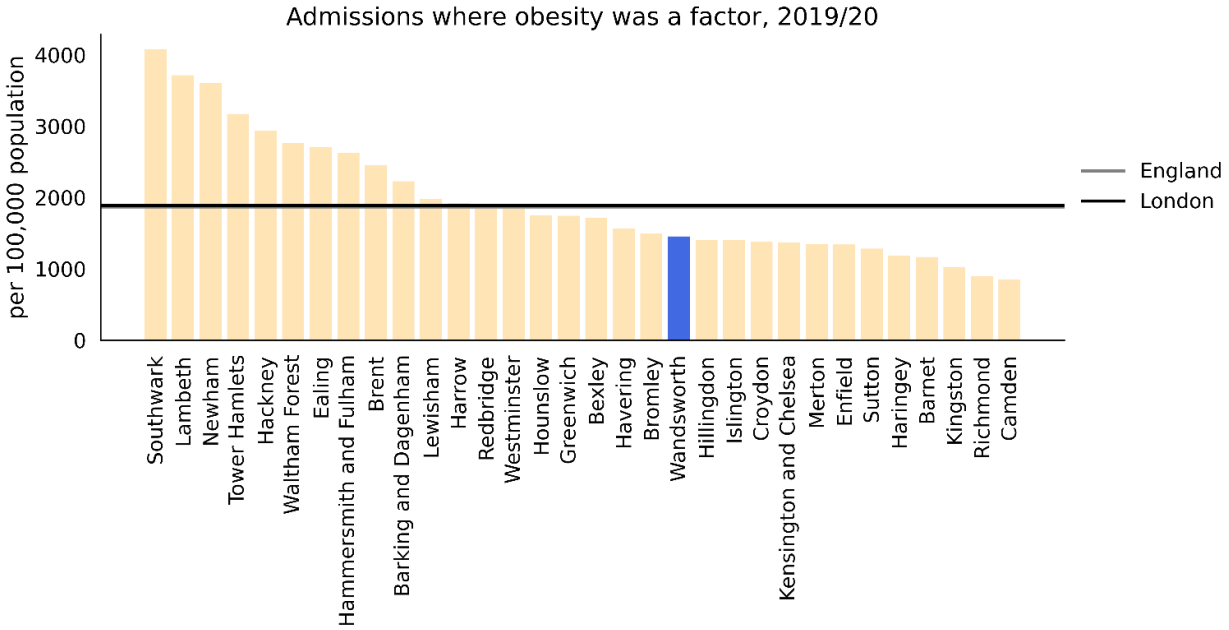


Source: NHS Digital Statistics on Obesity, Physical Activity and Diet

Admissions where obesity was a factor

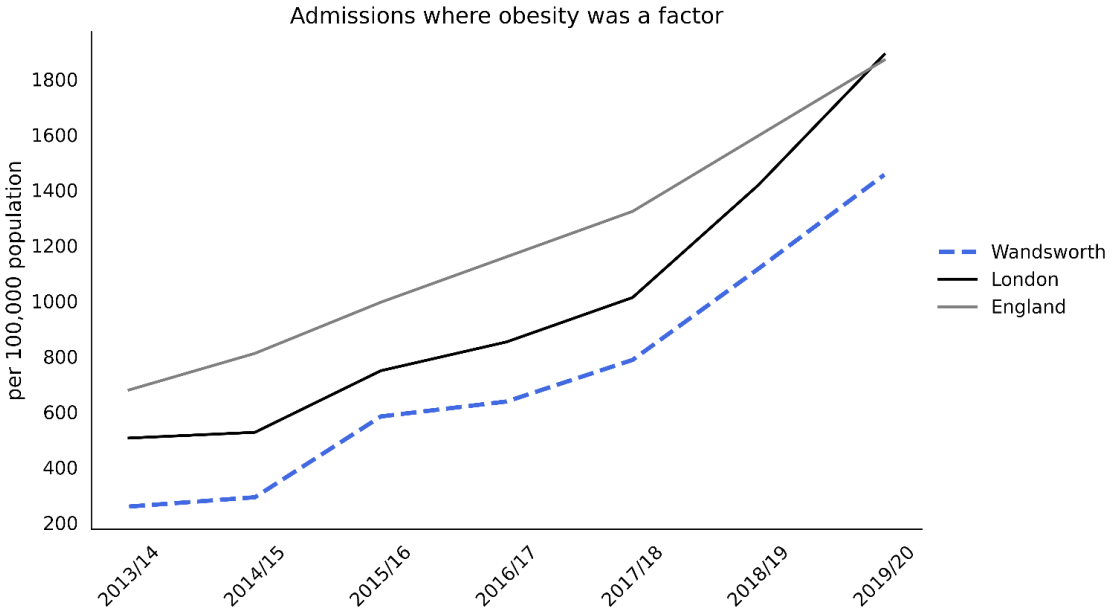
In 2019/20, Wandsworth's rate of admissions where obesity was recorded anywhere in the diagnostic fields was 1455.0 per 100,000 population, the 13th lowest rate in London (**Figure 119**) , 22.1% lower than the England average, and 23.0% lower than the London average. The latest borough figure was 464.0% higher than in 2013/14, in comparison with a 175.4% increase in England in the equivalent time period (**Figure 120**).

Figure 119: Admissions with obesity mentioned in either primary or secondary diagnostic fields by local authority, 2019/20



Source: NHS Digital Statistics on Obesity, Physical Activity and Diet

Figure 120: Admissions with obesity mentioned in either primary or secondary diagnostic fields, 2014–2020

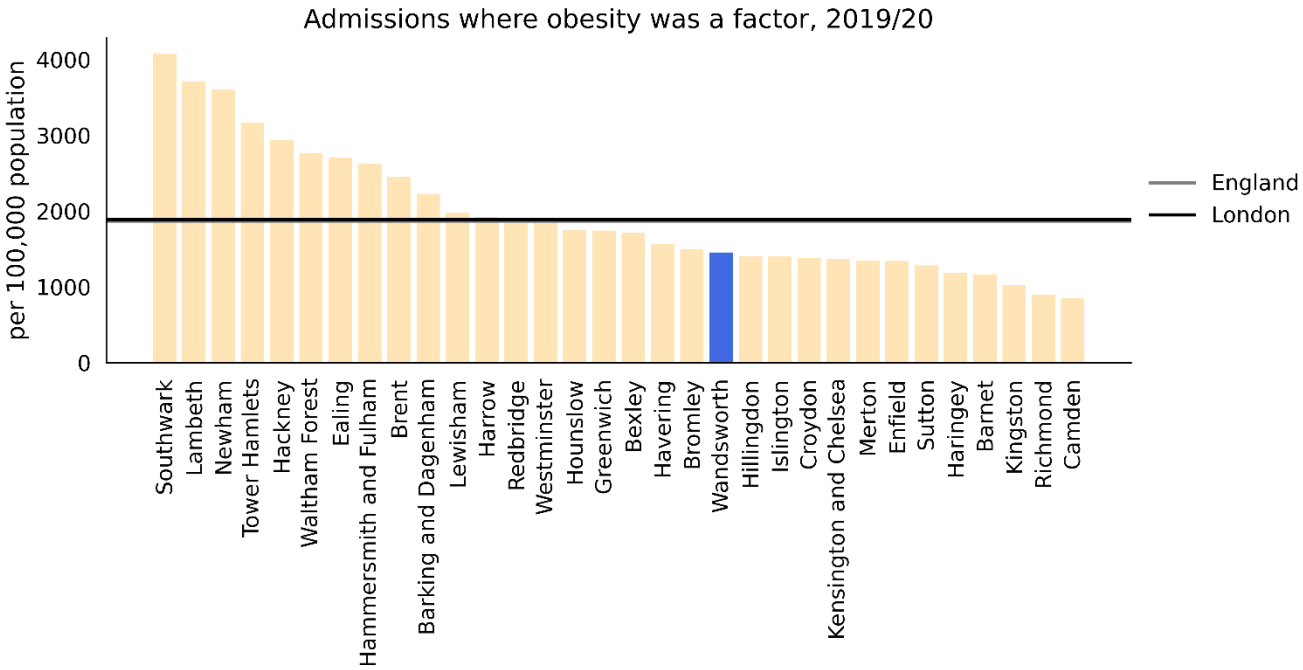


**- blue ribbon shows 95% confidence interval around Wandsworth's indicator values*
Source: NHS Digital Statistics on Obesity, Physical Activity and Diet

Bariatric surgery admissions

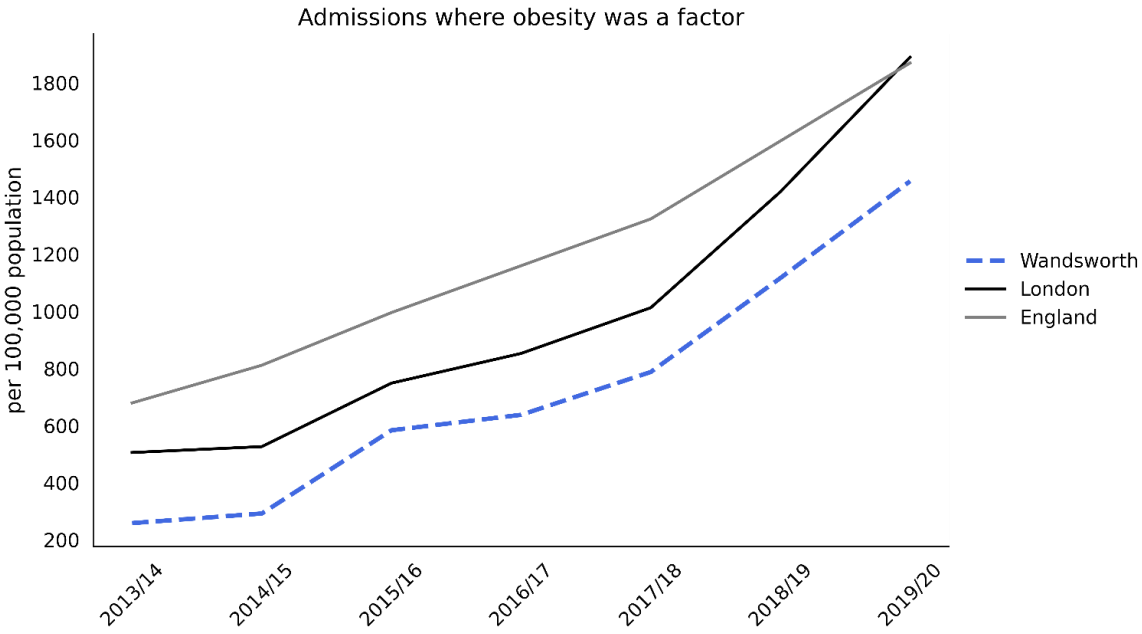
In 2019/20, Wandsworth's rate was 13.0 per 100,000 population, which is the 15th lowest rate in London (**Figure 121**), 4.8% higher than the England average, and 23.5% lower than the London average. The latest borough figure was also 19.3% lower than in 2013/14, in comparison with a 4.6% increase in England's rate in the equivalent time period (**Figure 122**).

Figure 121: Admissions for bariatric surgery by local authority, 2019/20



Source: NHS Digital Statistics on Obesity, Physical Activity and Diet

Figure 122: Admissions for bariatric surgery, 2014–2020



**- blue ribbon shows 95% confidence interval around Wandsworth's indicator values*

Source: NHS Digital Statistics on Obesity, Physical Activity and Diet

Acronyms

AAA	Abdominal Aortic Aneurysm
AF	Atrial Fibrillation
BAME	Black, Asian And Minority Ethnic Groups
BMI	Body Mass Index
BP	Blood Pressure
CBT	Cognitive Behaviour Therapy
CCG	Clinical Commissioning Group
CHD	Coronary Heart Disease
CKD	Chronic Kidney Disease
CLCH	Central London Community Healthcare
COPD	Chronic Obstructive Pulmonary Disorder
CVD	Cardiovascular Disease
IAPT	Improving Access to Psychological Therapies
IFG	Impaired Fasting Glucose
IGR	Impaired Glucose Regulation
IGT	Impaired Glucose Tolerance
ISH	Integrated Sexual Health Services
JSNA	Joint Strategic Needs Assessment
LSOA	Lower Super Output Area
LTC	Long Term Conditions
NDH	Non Diabetic Hyperglycaemia
NICE	National Institute for Clinical Excellence
PHOF	Public Health Outcomes Framework
SMI	Serious Mental Illness
SWLCCG	South West London Clinical Commissioning Group

Acknowledgments

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Date release	21st September 2021
Description	The Joint Strategic Needs Assessment covering Wandsworth resident population overview, life expectancy and healthy life expectancy at birth and at age 65 years
Contact	Wandsworth Council 020 8871 6000 The Town Hall, Wandsworth High Street, London SW18 2PU
Related Documents	DataWand