WNL Primary Care

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Also Notes for Session 4 CRM Update 20th May 2026

Setting the scene

Meeting 15th May 2026

- “Myth busting” – WNL NWL CRM Element of the single offer 2026 2027

- Ask – request – DM suite of investigations to also include Fib4 – *will reduce duplication of AST*

- Ask – commence better shared understanding of the MASLD diagnostic pathway as well as “treatment” pathways…

“Myth busting”

- 1. “All patients on the CRM register need a Fib4” Incorrect.

- The NWL CRM element of the single offer clearly advises that the Fib4 is for those with MASLD or DM (registers only) over a 39 month period (please check pages 208 “**FIB-4** in **MASLD** in last 39 months”, “**FIB-4** in **T2DM** in last 39 months” and page 217)

Why? 10 Leading causes of death in NWL
ONS / OHID cause groupings (2024–2025)

Under age 75

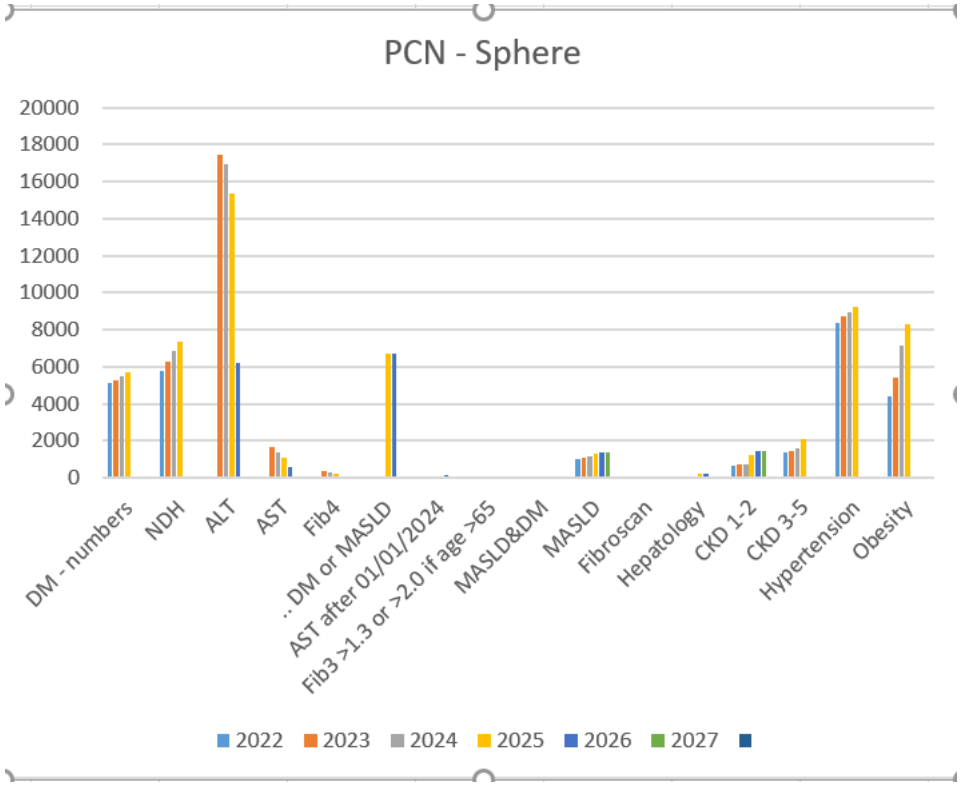
- In NWL and London, deaths <75 are dominated by cancers and cardiometabolic disease, with lifestyle-related causes featuring more strongly.
- Cancers (all malignant neoplasms) Lung, colorectal, breast, prostate most important
- Ischaemic heart disease (IHD)
- Stroke (cerebrovascular disease)
- Chronic lower respiratory disease (COPD, asthma)
- Liver disease (incl. alcohol-related)
- Diabetes mellitus
- Suicide & undetermined injury
- Drug-related poisoning / overdose
- Infectious diseases (incl. pneumonia, sepsis)
- Hypertensive / other circulatory disease

Over 75

•Mortality shifts to degenerative disease and frailty-related conditions

•Dementia & Alzheimer's disease
•Ischaemic heart disease
•Stroke
•Respiratory disease (COPD, pneumonia, influenza)
•Cancers
•Heart failure & other circulatory diseases
•Chronic kidney disease / renal failure
•Frailty-related causes (falls, debility)
•Infections (especially pneumonia & sepsis
•)Parkinson's disease / neurological disorders

Emerging Themes Example PCN



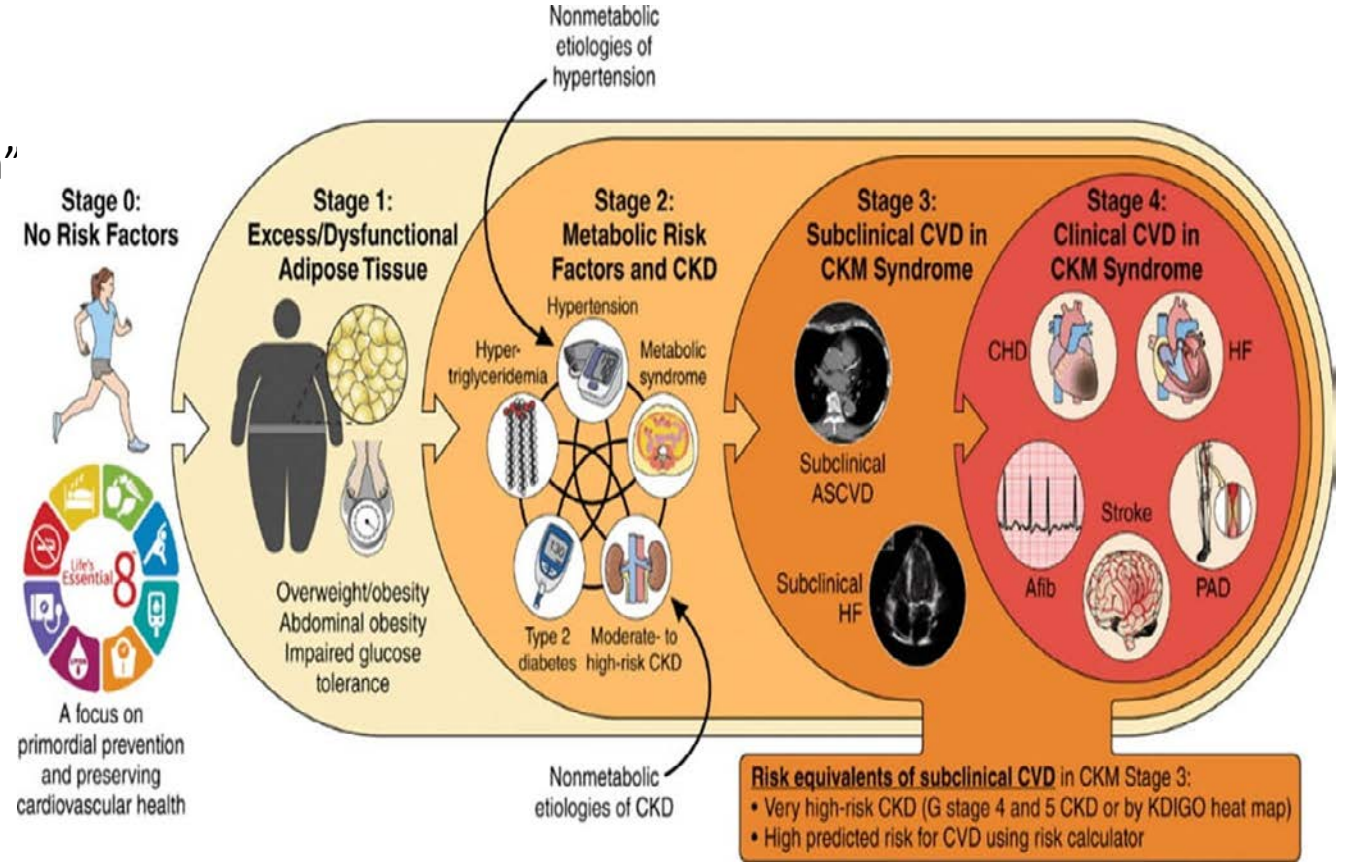
						Data to April 2026	
		2022	2023	2024	2025	2026	2027
	DM - num	5103	5299	5503	5732		
	NDH	5806	6284	6860	7376		
All CRM	ALT		17488	16971	15357	6215	
All CRM	AST		1632	1398	1060	592	
	Fib4		382	331	235	93	
... DM or M	.. DM or MASLD				6715	6715	
	AST after 01/01/2024					164	
	Fib3 >1.3 or >2.0 if age >65					49	
	MASLD&DM						
	MASLD	1007	1080	1194	1312	1374	1382
	Fibroscan						
FNDP	*Hepatology*		18	25	237	194	
	CKD 1-2	657	702	754	1259	1462	1464
	CKD 3-5	1358	1437	1578	2081		
	Hypertens	8377	8706	8926	9242		
	Obesity	4390	5437	7157	8321		

Key themes – Double number of patients on Obesity register in 4 years, NDH numbers greater than DM numbers, >90% of patients on the CRM registers have had LFTs (ALT), MASLD numbers increasing – improved detection NWL MASLD Guidelines since 2019 – Ensuring adherence re “Metabolic syn” – “Lifestyle etc”

“Motivational”, “Personalise” – increasing patient awareness re interlinkage/inter-relationship – NWL CRM Spec

- Enabling adherence
- “Heart age” – can be reduced
- “Chronic kidney disease – “chronic kidney health”
- “Fatty liver - Liver disease - MASLD” –“liver health”

- Reduce alcohol/stop
- Understand diet and exercises
- Glucose control - optimise
- Cholesterol control - optimise
- Blood pressure control - optimise
- Reduce adiposity – BMI/Waist reduction
- Reduction by >5% or 10%



NWL Dataset to May 2026

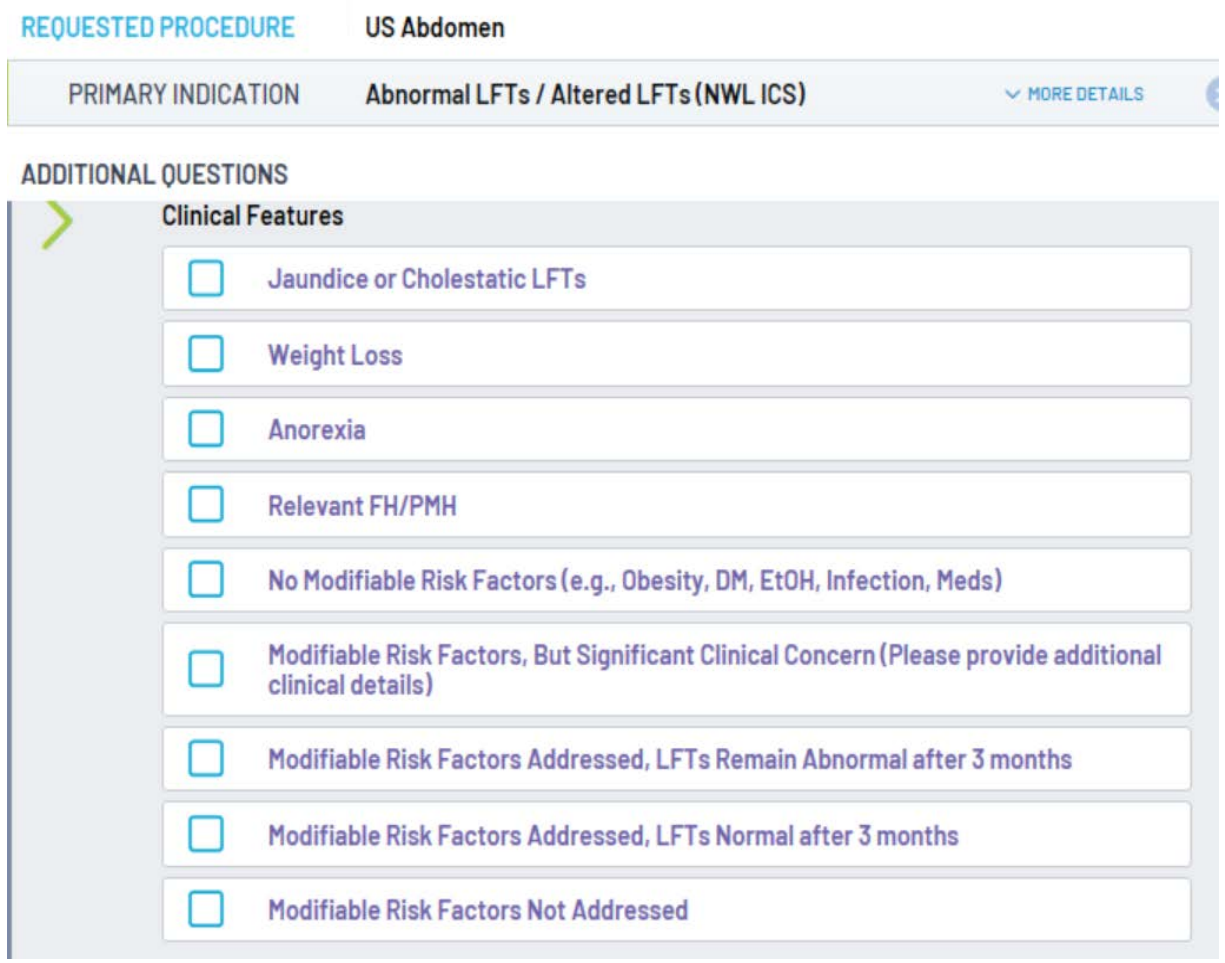
- Number of patients on the CRM pathway in NWL across 8 boroughs 587251
- Number of patients with either DM or MASLD
- 203755 = 34.7% of the cohort
- And AST since 01/01/2024
- 42241 ie 20.7% of the DM/MASLD group or 7.2% of the CRM cohort
- And AST since 01/01/2025
- 31809 ie 15.6% of the DM/MASLD group or 5.4% of the CRM cohort

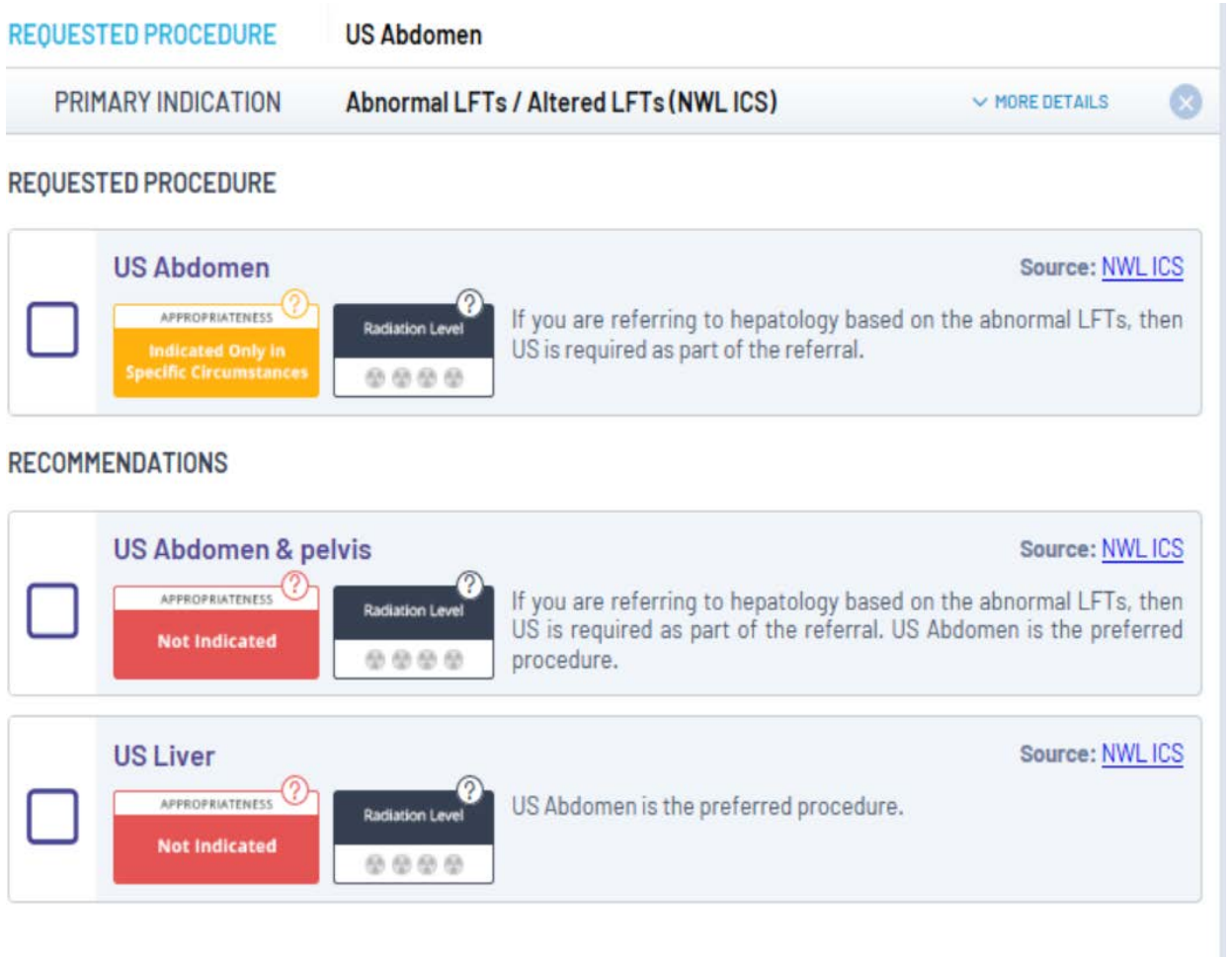
>01/01/2024 Fib4 done (DM or MASLD)	>01/01/2025 Fib4 done (DM or MASLD)	>01/01/2024 Fib4 >1.3 (<65y) or 2.0 (>65y)	01/01/2025 Fib4 >1.3 (<65y) or 2.0 (>65y)
7843	5844	2440	1598

QOF Diabetic Register	MASLD	Total
183108	10882	214637

	2023 (since 01/01/2023)	2024 (since 01/01/2024)	2025 (since 01/01/2025)	2026 (since 01/01/2026)
ALT request	551611 *(94% of CRM cohort)*	535740 (91%)	491933 (84%)	208857 (36%)
AST request	93678 *(17% of LFTs request)*	79545 *(14.8% of LFT request)*	58231 *(11.8% of LFT request)*	25440 *(12.2% of LFT request)*
Fib4	16159	13649 *(12530 is DM/MASLD cohort)*	9531	5237
Fib4 – triggering referrals		*3992 (since 01/01/2024)*		

Ensure alignment with CDS in ICE and the clinical pathway





Summary

- MASLD is on the increase – this diagnosis in primary care is after the patient has seen a specialist
- There is an anticipated step change in requests since the introduction of the CRM Specification – but this is on the background of increased clinician awareness and improved quality of care and a trend that has been ongoing since 2023

- Primary care may be detecting it in those with Obesity/NDH – raised ALT – hence resulting increased investigations
- Key ask – support
- 1. DM suite of tests
- 2. Join training webinar re NWL pathway
- 3. Collaborate re supporting screening/community services of appropriate testing

- "Moderate" risk cases

- What would you advise -
- Primary care is already re-emphasising reduction of risk factors in relation to CRM (Metabolic syndrome) risk factors…..
- Whilst awaiting further investigations…

- Primary care action -where previously AST already done – calculate and record Fib4 and may already have been actioned…