

VIEWS & REVIEWS

NO HOLDS BARRED

NHS Health Check betrays the ethos of public health

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NHS Choices has gone to town on the NHS Health Check project. New web pages aim to encourage people to use this “sophisticated check of your heart health.” Through blood pressure, cholesterol, and body mass index being “properly checked,” they say that strokes, diabetes, heart disease, kidney disease, and some forms of dementia can “often be prevented.”¹

Helping people to stop smoking, increasing their physical activity, and encouraging a balanced diet, with weight and diet being classed as “healthy,” are fine aims. But is NHS Health Check the way to achieve it?

The responses to “Why should I have an NHS Health Check?” are emotive, such as “watching your children and grandchildren grow up,” “living independently for longer,” and “improved emotional wellbeing.” The website also claims that “the NHS Health Check is based on the best scientific evidence from Britain and around the world.”² Yet there is no direct evidence that NHS Health Check will deliver on these claims. I have heard from several public health doctors who had read the literature and didn’t believe this either—but it is mandated, meaning that the scientific brakes are off.

Health checks are all about individual actions and self determination. This is an odd departure for public health, which is a specialty poised on the true observation that our environment and circumstances make many choices for us. Health checks create the illusion that GPs can solve health inequalities by prescribing exercise, statins, or weight loss. Politicians can think that a solution is being created for them. Yet we are simply throwing money towards those people most likely to attend, who may also be the least likely to benefit. We are creating a fallacy that will, of course, fail.

We need a dose of real public health. Inequalities harm us all. It should be easier to walk or cycle to work or school than to drive. Alcohol should have a minimum price assigned and its advertising curtailed. Cigarettes should be in plain packs, and

salt and sugar added to food should be controlled under restrictions designed for health, not the propagation of a sweet toothed marketing strategy. Unemployment and poor housing should be prioritised, because it is insanity to suppose that prescribing a statin and instructing a patient to exercise will somehow level the playing field for a child born into poverty. And children should be able to play on the streets they live on, because they should have priority over cars.

Public health has a history of being strong, outspoken, and determined—challenging politicians of all colours on harmful policies and damnable silences. It would be a tragedy if it started to become a charade of policies that were weak on evidence.

Competing interests: I have read and understood the BMJ policy on declaration of interests and declare the following interests: I’m an NHS GP partner, with income partly dependent on Quality and Outcomes Framework (QOF) points. I’m a part time undergraduate tutor at the University of Glasgow. I’ve written a book and earned from broadcast and written freelance journalism. I’m unpaid patron of Healthwatch. I make a monthly donation to Keep Our NHS Public. I’m a member of Medact. I’m occasionally paid for time, travel, and accommodation to give talks or have locum fees paid to allow me to give talks but never for any drug or public relations company. I was elected to the national council of the Royal College of General Practitioners in 2013.

Provenance and peer review: Commissioned; not externally peer reviewed.

Follow Margaret McCartney on Twitter, @mgmtmccartney

- 1 NHS Choices. Your NHS Health Check guide. www.nhs.uk/Conditions/nhs-health-check/Pages/What-is-an-NHS-Health-Check.aspx.
- 2 NHS Choices. Why should I have an NHS Health Check? www.nhs.uk/Conditions/nhs-health-check/Pages/Why-have-an-NHS-Health-Check.aspx.

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