SPCR research finds gout not associated with increased risk of fractures

A large study led by Keele University has found that patients suffering with gout are not at a higher risk of fractures, contradicting previous research findings. Gout is a common form of inflammatory arthritis, which affects 2.4% of adults in the UK. The painful condition is caused by high levels of uric acid in the blood which develops needle-like crystals in the joint.

Previous research has provided conflicting evidence about whether or not patients suffering with gout are more likely to experience fractures. These earlier studies have failed to take into account lifestyle related factors, such as body mass index (BMI) and alcohol consumption. The National Institute for Health Research (NIHR) School for Primary Care Research funded this large study, which aimed to gain a better understanding of fracture risk for gout patients and improve pain management.

Using data from a large primary care research database, the research team studied over 31,000 patients with gout and followed them up for between 6.8 years and 13.6 years. The research found that the number of patients with fractures also suffering with gout, was similar to those without the condition. In addition, it found that the medication used to lower the uric acid levels in gout patients had no effect on the long-term risk of fractures. Read the full press release: https://www.keele.ac.uk/pchs/newsandevents/primarycarenews/keelestudyfindsgoutnotassociatedwithincreasedriskoffractures.php
New NIHR PGfAR Programme Director

Congratulations to SPCR lead at Keele University, Professor Elaine Hay, who was appointed as the new Programme Director for NIHR Programme Grants for Applied Research (PGfAR) on 1 June 2018. Read more: https://www.keele.ac.uk/pchs/newsandevents/primarycarenews/elainehaynewprogrammedirectorfornihr.php

RCGP achievements in general practice

Professors Elaine Hay and Joanne Protheroe, from Keele University, and Peter Bower from the University of Manchester were presented with awards in recognition of their achievements in general practice at the RCGP’s spring general meeting on 11 May. Professors Hay and Bower were awarded Honorary Fellowships, the College’s most important award, given for outstanding work towards the objectives of the College. Professor Joanne Protheroe was presented with the John Fry award. It is awarded to Joanne as an RCGP Member or Fellow of the College who has promoted the discipline of General Practice through research and publication and has actively encouraged people to undertake research as a practicing GP. Professor of Education in General Practice, Bob McKinley, was nominated to present this year’s ‘William Pickles’ lecture.

Queen’s Honours for Paul Little

Congratulations to Professor Paul Little on being awarded a CBE in the Queen’s birthday honours for his services to General Practice Research. Professor Paul Little is Professor of Primary Care Research within the School of Medicine at the University of Southampton. Amongst Professor Little’s two primary interests of research are the importance of health promotion and the management of common self-limiting illnesses - including the more appropriate use of antibiotics to combat the major public health threat of antibiotic resistance.

“I am very touched by the fact that my colleagues appreciate what I have done to nominate me for this honour,” said Professor Little. “There are so many people to thank but I would like to acknowledge my GP colleagues who are working at the pretty tough coal face without whom no patients would be asked to participate in the studies I have done.

Congratulations to Professor Christian Mallen who has been appointed as the interim Director for the Institute for Primary Care and Health Sciences (iPCHS) at Keele University. Christian has been the School's training lead since the first cohort of trainees began in October 2010. He provides an enormous amount of support, inspiration and insight to the School's training programme as well as to the training events held in September each year.

Read the news from Keele University: https://www.keele.ac.uk/pchs/newsandevents/primarycarenews/professorchristianmallenappointedasinterimipchsdirector.php

NHS70 Excellence in primary care award

Professor Tony Avery (above, middle), and researchers involved in the SPCR's PINCER and Patient Safety Toolkit projects, at the University of Nottingham, were chosen as regional winners in the ‘Excellence in Primary Care Award’ category of the NHS70 Parliamentary Awards. They are part of the shortlist for the national award.


Their achievements include:

- Creating PINCER – an IT-based improvement tool that is helping more than 350 surgeries across the East Midlands to prescribe medicines safely
- Creating a Patient Safety Toolkit that’s hosted on the website of the Royal College of General Practitioners (RCGP) and has been accessed more than 10,000 times since 2015
- Working with RCGP to ensure there’s a greater focus on safe prescribing during GP training and assessment.
Wine-ing Down in Retirement

Following shortlisting for the prestigious Newcastle University Faculty for Medical Sciences PGR INSIGHTS public lecture award, SPCR trainee Beth Bareham presented a public engagement piece on her PhD studies to the judging panel in May. Her talk ‘Wine-ing Down in Retirement’ was developed with extensive training and expert input from the faculty. Her lecture can be accessed here: https://www.youtube.com/watch?v=T8rOY_QJSO8

“Working towards this public lecture enabled me to consider how my work can be communicated in an accessible manner. Although the lecture material was created for the purpose of the public, I’ve found I can draw on this to effectively communicate my work to my multi-disciplinary audience within academia. The personalised training also helped me to build on my presentation style and recognise what works and how I can improve my current approach.” Beth Bareham

SAPC ASM is hosted by Queen Mary University from 10-12 July this year and promises to provide an extremely busy three days highlighting the latest research and education in academic primary care at London’s Barbican Centre.

The programme will showcase the work of local and international primary care colleagues with a special emphasis on the challenges faced by populations on the move: migration, displacement, homelessness, delivering cross-cultural primary care. Themes include Education, Migration and Migrant Health, Cancer, Ageing and Frailty, and Patient Clinical Relationship. We wish our School members well during their presentations. A list of School presentations is included on the website: https://www.spcr.nihr.ac.uk/news/sapc-2018
Momentum picks up for collaboration across the School

Funding Round 16 saw renewed drive from across the nine partners to work together to answer key research questions in primary care. Large scale projects in the past have illustrated a key strength of the School - the ability to partner expertise and pool resources. Here we highlight the twelve successful bids.

Understanding antibiotic prescribing patterns in out-of-hours primary care

Geraldine Leydon and Rebecca Barnes
Southampton, Bristol, UCL, Oxford

A multidisciplinary research team from the Universities of Southampton, Bristol, University College London and University of Oxford have been funded by the National Institute for Health Research (NIHR) School for Primary Care Research to undertake a 2.5 year study to explore antibiotic prescribing out of hours.

The overuse and misuse of antibiotics in primary care is of increasing national and global concern due to the increasing risk of antimicrobial resistance (when bacteria becomes resistant to treatments). Most research in primary care has so far focused on GP prescribing during usual surgery hours. However, there is evidence that antibiotic prescribing is increasing out-of-hours. The study will explore how communication patterns between patients and out-of-hours practitioners, such as GPs, nurses, pharmacists and paramedics, influence antibiotic prescribing in cases of common infections. The research will be used to optimise communication training to guide healthcare practitioners in best prescribing practices. With the help of NHS patients and staff, the researchers aim to record 300 routine out-of-hours health care encounters, including telephone calls, primary care centre visits and home visits, in organisations serving over two million people across the South and West of England. Read the full news piece: [http://www.bristol.ac.uk/primaryhealthcare/news/2018/out-of-hours-prescribing.html](http://www.bristol.ac.uk/primaryhealthcare/news/2018/out-of-hours-prescribing.html) Project [Website](http://www.bristol.ac.uk/primaryhealthcare/news/2018/out-of-hours-prescribing.html)

Other SPCR collaborations:

Investigating burnout in general practitioners and indicators of suboptimal patient care using the Clinical Practice Research Datalink.

Maria Panagioti
Manchester, Keele, Bristol, Southampton

The aims of the research are to understand the characteristics of general practices which make GPs vulnerable to burnout. The study will also look at whether GPs with burnout provide inappropriate patient care by engaging in potentially unsafe prescribing and/or high referral to specialists. [Website](http://www.bristol.ac.uk/primaryhealthcare/news/2018/out-of-hours-prescribing.html).
Investigating the unintended consequences of the use of digital health tools in primary care

Jeremy Horwood
Bristol, Manchester, Oxford

The use of digital technology is promoted as having the potential to improve patient access, quality and efficiency of care. Three popular uses in primary care include 1) smartphone apps/wearables, 2) online triage and 3) patients online access to their medical records. This study aims to improve the appropriate adoption of digital health tools in primary care by identifying and understanding their unintended consequences (both benefits and problems) for patients and primary care staff. The study design includes stakeholder workshops, a conceptual literature review and a qualitative study. Website.

Saline Nasal Irrigation For acute Sinusitis (II): A Randomized Controlled Pilot Trial

Paul Little
Southampton, Bristol, Oxford

This study aims to see if saline nasal irrigation for acute sinusitis will improve symptom management and reduce antibiotic use. Research will provide information about how easy it is to recruit people and follow them up. It will also provide a good indication of whether or not antibiotic use can be reduced. This study is a pilot study which will inform a larger application for a full trial. Website.

Evaluation of the new ePACT2 national polypharmacy prescribing indicators

Rupert Payne
Bristol, Manchester, Nottingham

This project aims to describe the association of practice-level factors and aspects of quality of care with national ePACT2 polypharmacy prescribing indicators. It will examine practice-level statistical reliability of national ePACT2 polypharmacy prescribing indicators, and examine the individual patient-level predictive validity of polypharmacy prescribing indicators based upon ePACT2. Website.

Screening for atrial fibrillation

Jonathan Mant
Cambridge, Oxford, Southampton, Bristol

This study aims to look at how long and how often screening should take place to see if patients have paroxysmal Atrial Fibrillation. It will consider the practice experience of AF screening, and how best to measure the psychological effects on patients of screening for AF.

This project will work alongside the recent £3 million award from the NIHR’s Programme Grant for Applied Research. Website.

Do cranberry capsules reduce the consumption of antibiotics for symptoms of acute uncomplicated urinary tract infections?

Kome Gbinigie
Oxford, Southampton, Bristol

This study will assess whether cranberries can treat UTIs in women and safely reduce antibiotic use. Researchers will test whether the study design works and is acceptable to participants. This will help in the planning of a subsequent, similar, but much larger study. By comparing the information from different treatment groups on a larger scale, researchers will confirm whether cranberries treat UTIs and help reduce the need for antibiotics. Website.

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Quantifying the Risk of Type 2 Diabetes Across the UK

Benjamin Feakins
Oxford, Manchester

This study aims to inform the production of maps of diabetes risk across the UK at regional level by identifying key areas with the most at risk populations. The diabetes risk maps are visually dramatic, highlighting ‘hot spots’ of high risk in deprived multi-ethnic areas and thus providing a talking point for local policymakers and citizens. Website.
Helping parents of children with respiratory tract infections decide when to consult primary care: a RAND appropriateness study

Stephen Campbell
Manchester Bristol, Oxford

Children with Respiratory Tract Infections are the most common reason for parents contacting primary care internationally. Parents and patients are offered little if any advice on if, when or how to use primary care services. This project will see if professional consensus can be reached on the signs and symptoms that should be used by parents/guardians when deciding if and when to consult, both during the day and out of hours. The main study output (a guide for parents) will inform the design of future interventions that could (once proven safe and effective) be implemented by GP practices and other NHS primary care providers (such as NHS 111), e.g. via general practice and NHS websites. Website.

Understanding the Relationship between Multimorbidity in Later Life, Use of Health Services and Costs of Health Care

Raphael Wittenburg
Oxford, Bristol, Manchester

The effective management of multimorbidity – generally defined as two or more health conditions - is a major challenge for the NHS. The aim of the study is to understand how the use of health services by middle-aged and older people (aged 50 and over) and the associated costs of health care rise with each additional chronic health condition. Researchers aim to help the NHS target resources toward those older patients who are most likely to have high use of services in future due to multimorbidity. The research team will examine how much the costs of health care among older people with multimorbidity vary with the number of health conditions they have. They will also explore whether the increase in costs for each additional condition differs by age, gender and deprivation and by whether the conditions include dementia or depression. Website.

IMproving the Accuracy of Psychosis PrEDiction using primary-care consultation data (M.A.P.P.E.D)

Sarah Sullivan
Bristol, UCL, Exeter

GPs need to be able to recognise the early stages of a psychotic illness and quickly refer to specialist mental health services for treatment. Many GPs find this difficult because they see few people with this problem limiting their ability to build up their diagnostic skills. Researchers want to develop a tool to help GPs recognise the early signs of psychosis using primary care consultation data. Earlier research using primary care consultations for non-specific prodromal symptoms has found strong associations with a later diagnosis of psychosis. Researchers will now use these predictors to develop and validate a prediction model to help GPs determine risk of psychosis. An effective tool would tell GPs about the risk of developing psychosis for each patient and indicate who to refer to mental health services improving the outcome for patients and decreasing pressure on the NHS. Website.

STRatifying Antihypertensive Treatments In multi-morbid hypertensives For personalised management of Blood Pressure

James Sheppard
Oxford, Keele, Cambridge, Bristol

As people get older, the risks and benefits of their blood pressure drugs may change. However, doctors and patients have little information to inform their understanding of when this might happen. This research aims to begin development of a support tool that hopes to estimate a person’s likelihood of suffering harm from blood pressure lowering drugs. The tool will help patients and doctors to make better informed decisions about starting or continuing these drugs. Website.
New £3m research investigates screening that could prevent one in ten strokes

A new £3m research programme funded by an National Institute for Health Research Programme Grant for Applied Research (PGfAR) will investigate screening to detect undiagnosed atrial fibrillation, a heart condition responsible for one in ten strokes.

With the School’s Cambridge lead Professor Mant at the helm and the School’s Director Professor Richard Hobbs as co-applicant, the study aims to find out if screening for atrial fibrillation in people aged 65 and over can prevent stroke and other problems that cause early deaths like heart attacks, and whether screening represents good value for money for the NHS.

The research will involve 120,000 patients aged over 65 in 300 general practices across England. Patients in 100 practices will undergo screening, and those in 200 practices will not. If screening detects a case of atrial fibrillation, the patient will be offered treatment such as anticoagulant drugs to reduce their risk of stroke and heart attack. Both sets of patients will be followed up for five years to see whether screening and treatment leads to fewer strokes, heart attacks and deaths. Read the full press release.

Both Professors Mant and Hobbs were involved in earlier School funded studies that significantly added to the current evidence on stroke prevention strategies, projects that were instrumental in leveraging this further funding from the NIHR. One of these resulted in the following publication: Would primary healthcare professionals prescribe a polypill to manage cardiovascular risk? A qualitative interview study. Satnam K Virdee, Sheila M Greenfield, Kate Fletcher, Richard J McManus, F D Richard Hobbs, Jonathan Mant. (http://bmjopen.bmj.com/content/3/3/e002498.short)

Read the full press release: http://www.phpc.cam.ac.uk/pcu/nihr-awards-3m-for-new-research-to-investigate-screening-to-prevent-one-in-ten-strokes/

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http://nihr.us3.list-manage.com/subscribe?u=c031c9cc29b4b899935088b4a&id=a77a720444
School research finds that local real-time surveillance of infectious disease could improve antibiotic prescribing

Antimicrobial resistance is a significant threat to public health. Principal investigator Professor Alastair Hay and researchers from the University of Bristol's Centre for Academic Primary Care and NIHR Health Protection Research Unit in Evaluation of Interventions have found promising evidence that local real-time surveillance of infectious disease, such as flu, could help GPs make better diagnostic and treatment decisions, reducing the amount of unnecessary antibiotic prescribing.

GPs are more likely to prescribe antibiotics when there is uncertainty about a diagnosis on a ‘just in case’ basis. The researchers wanted to find out whether having access to real-time information on infectious diseases circulating in their local area could help them make better decisions about diagnosis and, therefore, treatment.

In the study published in the journal Family Practice, the authors (Isabel Lane, Ashley Bryce, Suzanne M Ingle and Alastair D Hay) identified surveillance systems in the US, Canada, New Zealand, Spain and Norway that use weekly or daily emails or faxes to share locally relevant information on circulating illnesses to primary care centres. One of the systems was embedded in the electronic health record.


Public Involvement in research

Dr Emma Palmer-Cooper, who started the Yarnfulness Project with University of Oxford’s Dr Anne Ferrey in January 2018, has written an article on the value of working with members of the public as more than just the subjects of research.


Emma was Patient and Public Involvement Officer for the SPCR from November 2016 to April 2018. She took up a lecturing position in Psychology at the University of Southampton in May 2018.
Researchers from the Universities of Bristol, Oxford, Cambridge and Lancaster are teaming up with health professionals, patients, carers and members of the public to identify the top ten research priorities for advanced heart failure.

**About the project:** Heart failure affects 1-2% of the adult population and up to 1 in 10 older people in the United Kingdom. People with heart failure may be well for many years after diagnosis however in the advanced stages of the disease they often have worsening symptoms and increasing needs. For example they may need more medication, increased support from carers, and admissions to hospital. Increasingly, it is recognised that involving people affected by a condition in identifying research priorities is important; this helps ensure that research findings are relevant. Through this project we will work with patients with heart failure, their healthcare professionals and carers to develop a ‘Top 10’ list of research priorities for patients with advanced heart failure.

The Universities of Oxford, Bristol and Cambridge will work together to establish a Priority Setting Partnership (PSP) following the methods set out by the James Lind Alliance. A steering group of people directly affected by, or caring for, people with advanced heart failure including patients, carers and clinicians will oversee the project. The steering group will develop an online survey to collect research questions. The survey will be distributed to a broad group of stakeholders (including patients, carers, and healthcare professionals) through the steering group’s networks such as healthcare clinics and relevant charities. The survey results will be checked against existing evidence to see which of the suggested questions have not yet been answered by research. Stakeholders will be asked to rank the unanswered questions. The highest ranking unanswered questions will be discussed at a final workshop with 30 stakeholders who will draw up the final ‘Top 10’ priority list. These priorities will be communicated to researchers and funders to make sure that future research answers questions that are important to patients and clinicians.

Joint applicants: Dr Clare Taylor, Dr Alyson Huntley, Prof Gene Feder, Prof Richard Hobbs, Prof Jonathan Mant.

**What questions do you want answered by advanced heart failure research?**

The group launched a survey on Tuesday 12 June, inviting people who are affected by advanced heart failure to send them the most important questions that they want answered by research.

The invitation is for patients with advanced heart failure, their families and friends, as well as health and other care professionals who look after them.

The results of the survey will help guide researchers to focus on the needs of people living with advanced heart failure.

**Survey link:** [https://oxford.onlinesurveys.ac.uk/ahf_psp](https://oxford.onlinesurveys.ac.uk/ahf_psp)
Lack of evidence supporting the use of antidepressants for insomnia

Research led by the University of Southampton has found there is not enough evidence to support the current clinical practice of prescribing antidepressants for insomnia.

Part-funded by the NIHR School of Primary Care Research, the review, published in the Cochrane Systematic Reviews Library, re-examined 23 previous studies involving a total of 2806 patients with insomnia.

The researchers found that, overall, evidence supporting the use of antidepressants for people with sleep problems is of low quality – partly due to the small number of people in individual studies and partly due to how the studies were undertaken and reported.

Some low quality evidence was identified supporting short term (weeks, rather than months) use of some antidepressants, but no evidence was found for amitriptyline, which is commonly used in clinical practice. There was also no evidence to support long-term antidepressant use for insomnia. Read the full press release: https://www.southampton.ac.uk/news/2018/05/antidepressants-insomnia.page

“High quality trials of antidepressants for insomnia are needed to provide better evidence in this area to inform clinical practice. Additionally, health professionals and patients should be made aware of the current lack of evidence for antidepressant medications commonly used for insomnia management.”

-Associate Professor Hazel Everitt

RCGP’s Bright Ideas Awards 2018

This year the RCGP would like to capture, share and spread Bright Ideas in general practice which are able to show (qualitatively or quantitatively) that they have benefitted the practice in one, or more, of the areas illustrated below. To find out more visit: http://www.rcgp.org.uk/clinical-and-research/resources/bright-ideas.aspx
#iamresearch

The NIHR’s ‘I Am Research’ campaign gives patients, the public, and health and social care research professionals another opportunity to announce how fantastic research is. The NIHR’s aim to raise awareness of the benefits of research and the positive impact it has on people’s lives co-incides with the NHS’s 70th birthday celebrations. For the week around International Clinical Trials Day on 20th May this year, the School used social media to broadcast the reasons why our researchers and trainees do research. Here are six contributions. Find out more on the NIHR website: https://www.nihr.ac.uk/news-and-events/support-our-campaigns/i-am-research/

Thanks to our members for taking part - left to right and top to bottom, Shoba Dawson (Bristol), Barry Coughlan (Cambridge), Kate Ellis (Cambridge), Faraz Mughal (Keele), Georgia Richards (Oxford) and Matthew Ridd (Bristol).

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PhD funding

The Greater Manchester Patient Safety Translational Research Centre at the University of Manchester is advertising a PhD award to conduct research on:

Understanding and enabling Patient and Public Involvement and Engagement (PPIE) for diverse and marginalised groups in patient safety research and practice.

Advert: https://www.findaphd.com/search/ProjectDetails.aspx?PJID=98173
**Dates for your diary**

47th SAPC ASM  
London  
10-12 July 2018  
https://sapc.ac.uk/conference/2018

SPCR Annual Trainees' Event  
24 & 25 September 2018  
St Anne’s College, Oxford  
https://www.spcr.nihr.ac.uk/events/spcr-annual-trainees-event

SPCR Showcase  
13 November 2018  
Wellcome Collection, London  
https://www.spcr.nihr.ac.uk/events/spcr-showcase-2018

NIHR Events Diary  
https://www.nihr.ac.uk/news-and-events/events/

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**Blogs**

**A week of interdisciplinary knowledge and expertise exchange**  
Ryc Aquino

**Engaging with the rural community for future research**  
Laura Campbell, Keele University

**The Primary Care Outcomes Questionnaire: a new generic instrument for measuring outcomes in primary care**  
Mairead Murphy and Chris Salisbury, International Research Community on Multimorbidity

**Evidence of a legend - meeting the information needs of patients and clinicians more effectively**  
Carl Heneghan, NIHR blog

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**BRC Academic Training**

Great Ormond Street Hospital for Children NHS Trust. Paediatric Clinical Academics

**3rd National Residential Training Weekend**  
10-11 November 2018, Ashridge Business School

- An opportunity for academic trainees working with children and young people to develop their research skills and career.
- Open to clinical academics working in child health.
- Facilitated interactive small group work on developing and undertaking research from design through to implementation.
- A great opportunity to network with fellow clinical trainees and academic leaders in child health.
- A Fee of £75 will be charged to include accommodation for Saturday night and food.

More info:  

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**Publishing soon?**

Please send all SPCR funded publications and press releases to Kate Farrington before the proposed date of release.  
All info about outputs is available on the [website](https://www.gosh.nhs.uk/research-and-innovation/nihr-gosh-brc/brc-opportunities).