

GP Links

Bi-monthly newsletter

March 2016

Follow us on:   

E-messaging error affects UCLH clinic letters

Earlier this month, work on our eMessaging service triggered the sending of an unexpected batch of clinic letters to some GP practices in Camden and Islington.

We would like to offer our sincere apologies for the extra work created for extremely busy GP practices by this eMessaging error.

As you will be aware, eMessaging is the UCLH system that sends inpatient discharge summaries and outpatient clinic letters from the UCLH Clinical Data Repository (CDR) directly to GP practices.

UCLH found a technical error in the eMessaging system that led to practices not being sent some clinic letters and discharge summaries.

To fix this we implemented a change to the system on the 5th March. Unfortunately, this led to a large number of clinic letters and discharge summaries being released as an unforeseen consequence of this change.

We are in contact with GP practices about the information they have been sent and to date no notification of ongoing clinical risk has been received.

We are still using the eMessaging system and I would like to assure you that we are monitoring the system closely.

If you have been affected by the arrival of an unexpected large batch of clinic letters, please get in touch.

Contact: Karla Isaacs or Renato Celani, GP Liaison team, 020 3447 5522 or 020 3447 9083, UCLH.gpqueries@nhs.net

Phone numbers reminder:

UCLH's dedicated GP switchboard number is **020 3447 9000**.

University College Hospital Referral Contact Centre:

Tel: 020 3447 9393

Fax: 020 3447 9354

uch.appointments@uclh.nhs.uk

GP web app

Call UCLH services direct from your smart phone or tablet: www.uclh.nhs.uk/mobile

Written referrals for University College Hospital

For written referrals please address your letter to:

University College Hospital (Name of consultant/specialty) Referrals Contact Centre

Ground Floor North
250 Euston Road
London NW1 2PG

Please remember to include patient contact details in ALL written referrals to the hospital.

This is important under our booking system as we need to be able to contact the patient.

If you have queries about any of the articles in GP Links, contact Communications Unit

2nd Floor Central
250 Euston Road
London NW1 2PG

Tel: 020 3447 7542

UCLH.gpqueries@nhs.net

www.uclh.nhs.uk/GPs

Research news

Tumours contain the seeds of their own destruction

Researchers from UCL and UCLH have made a breakthrough in understanding the genetic make-up of tumours that could lead to personalised treatments even when cancer is advanced.

The genetic make-up of tumours changes as the tumours grow and can be complex which can make it very difficult for the body's immune system to identify and fight the cancer. What researchers have discovered is that there is one 'flag' that is present in every cancer cell even at the early stages of cancer.

These findings are especially exciting because they suggest that this flag might be used to get a patient's own immune system to attack all cancer cells at once.

The researchers analysed data from hundreds of patients from previous studies to unearth more information about the flags, known as neo-antigens. Then, in the lab they isolated immune cells, called T-cells from samples from lung cancer patients, demonstrating that such cells are able to recognise the flags present on every tumour cell.

The team suggest their research could pave the way for therapies that specifically activate these T-cells to target all tumour cells based on the disease's genetic signature.

First evidence to suggest that screening for ovarian cancer may save lives

New results from the world's biggest ovarian cancer screening trial co-led by UCLH and UCL suggest that screening based on an annual blood test may help reduce the number of women dying from the disease by around 20%.

The research, published in the *Lancet*, also cautions that longer follow up is needed to establish more certain estimates of how many deaths from ovarian cancer could be prevented by screening.

Ovarian cancer was diagnosed in 1,282 women during the 14-year study of more than 200,000 post-menopausal women aged 50 to 74, of whom 649 had died of the disease by the trial end in December 2014.

The study showed a delayed effect on mortality between the screening and control arms, which became significant after the first seven years of the trial. The research team are now following up the study for three more years to establish the full impact of ovarian cancer screening.

The early results suggested that approximately 15 ovarian cancer deaths could be prevented for every 10,000 women who attend a screening programme that involves annual blood tests for seven to 11 years.

The trial also confirmed previous findings that on average, for every three women who had surgery as a result of an abnormal screen, one woman had ovarian cancer while two women did not. For those who had surgery, around three per cent had major complications, which is the standard complication rate for this type of surgery in the NHS.

First maternal gene therapy trial to start at UCLH

A pioneering trial of what is thought to be the first clinical use of gene therapy during pregnancy could be undertaken at UCLH, with the potential to save thousands of lives.

The trial took a step closer following the results of a study into the questions raised by gene therapy, which would be given to mothers whose placenta is not providing sufficient nutrients and oxygen for their baby to grow.

This condition, called fetal growth restriction, is the most common cause of stillbirth. The study by the EVERREST consortium, a group including University College London and other institutions, found that there were no ethical or legal objections to maternal gene therapy.

The consortium has been working since 2013 to develop a therapy for FGR which affects up to 8 percent of all pregnancies. Currently no treatment is available.

Once fetal growth restriction is identified in mid pregnancy, parents face a difficult choice - delivering their baby very prematurely knowing that it might die, or allowing the pregnancy to continue with the strong likelihood that the baby will die in the womb.

If the trial is approved, it will start in early 2017 at University College Hospital and then be rolled out to other European centres.

Cannabis-mimicking MS drug trial starts at UCLH **A trial has started at UCLH of a treatment that mimics the properties of cannabis to help reduce spasticity associated with MS.**

One of the most common and disabling symptoms of MS, spasticity affects up to 80 per cent of patients, causing muscle stiffness, spasms and reduced mobility.

Many people with MS use cannabis medically to alleviate symptoms, but often suffer unwanted side effects like lethargy. Current treatments derived from cannabis are only moderately effective in reducing symptoms and also leave patients feeling fatigued and sedated.

The new drug, discovered at UCL, is called VSN16R and does not produce the sedative effect of current drugs. It was developed with the aim of finding a synthetic compound that interacts with the body's own cannabinoid receptors without the disadvantages of other drugs.

Our bodies produce what are known as cannabinoid receptors (proteins) in the part of the brain involved in pain sensation, mood and memory. These receptors activate those parts of the brain when triggered by naturally-occurring chemicals known as endocannabinoids.

Chemicals found in cannabis mimic the effect of endocannabinoids. VSN16R works on a neural pathway which controls excessive nervous excitability and so reduces the symptoms that result from damage caused by MS.

www.uclh.nhs.uk/Research

Urgent referrals to the ear, nose and throat service

The urgent referral clinic at the Royal National Throat Nose and Ear Hospital provides speedy access and effective care to all adult and paediatric patients aged above two years old with urgent ear, nose, throat problems.

The clinic is designed to treat severe short-term (less than a week) conditions. Patients who want to be seen in the urgent referral clinic should be pre-approved by the ENT on-call team before referral. The team can be contacted on 07415 624 966. Once approved, patient will be offered an appointment within five days of the clinic receiving the referral form which can be downloaded from www.uclh.nhs.uk/ENT-UrgentReferral

However, the following conditions can now be referred without prior approval by the on-call team:

- > Isolated nasal fractures (within two weeks from date of injury)
- > Recurrent epistaxis
- > Acute infections of the ear, nose and throat (not suitable to be treated in primary care)
- > Foreign bodies in the ear (Except batteries which will need urgent review and removal)
- > Acute sudden onset unilateral hearing loss

For these conditions, the referral form must still be completed and sent by fax to 020 7837 8248.

The urgent referral clinic is not a walk-in service and does not accept head and neck cancer two-week-wait referrals.

Contact: Luke White, general manager, luke.white@uclh.nhs.uk, 020 3456 5076.

Planning the future of cancer services

UCLH has been developing a programme of work to plan the future of local cancer services, after submitting a successful bid to NHS England to become a vanguard site, with The Royal Marsden and The Christie last October.

Vanguard sites are tasked with developing local models that can be replicated across the NHS.

The UCLH Cancer Collaborative, which encompasses London Cancer, will work with patients, primary care providers, commissioners and public health. The four areas of focus will be:

- > Earlier diagnosis – better survival rates, improved patient experience
- > Centre for Cancer outcomes- publication of data that matters to patients and healthcare professionals
- > London Cancer pathway boards – improving quality and reducing variation, bringing appropriate care closer to home
- > New models of care – defining a kite mark for chemotherapy, delivering chemotherapy in community settings and establishing innovative service models in radiotherapy

These changes will be enabled by sharing workforce and IT/information governance and changes to the system architecture, for example, working with providers and commissioners to identify how whole pathways could be funded.

UCLH has set out a strategic direction for cancer services over the next five years – you can download the UCLH Cancer Strategy 2015-2020 at www.uclh.nhs.uk/CancerStrategy

Contact: Jonathan Gardner, cancer programme director, jonathan.gardner@uclh.nhs.uk or Nick Kirby, cancer services divisional manager, nick.kirby@uclh.nhs.uk.

NHNN hemianopia service

The National Hospital for Neurology and Neurosurgery (NHNN) runs a clinic for patients with visual disorders as a result of stroke, tumours or traumatic brain injury.

The multidisciplinary one-stop clinic for patients with hemifield disturbances or other higher-level visual or spatial dysfunction offers four main services:

- > Assessment by a neurologist, a neuropsychologist and an orthoptist, providing an “eye to brain” examination.
- > Rehabilitation, for reading and other visual tasks. A free web-based rehabilitation application is already available for a specific group of patients with a hemianopia and slow text reading. We are working on other similar projects for patients with residual visual search problems. We can also liaise with community therapists or low-vision services in the community.
- > Advice on fitness to drive (DVLA) and partial sight registration
- > Treatment and management for any underlying cause (usually stroke or head injury, although we do see patients with other causes such as tumours, MS or degenerative conditions).

Contact: Dr Alexander Leff, consultant neurologist, a.leff@ucl.ac.uk, 020 7679 1129.

CQC inspection

The Care Quality Commission (CQC) undertook an announced inspection of University College Hospital from 8-11 March.

They inspected core services including urgent and emergency care, medical services, surgery, critical care, maternity and gynaecology, services for children and young people, end-of-life care, outpatient services and diagnostic imaging provided at University College Hospital (including the maternity wing, the cancer centre and Westmoreland Street).

The inspectors will publish their findings in a report, together with a rating, in due course.

Contact: Maria Adiseshiah, quality and safety manager, maria.adiseshiah@uclh.nhs.uk, 020 3447 242.

New website pages for urological cancers

We have launched a new website for patients with urological cancers at www.uclh.nhs.uk/UrologicalCancers

The site was developed to meet the needs of patients during treatment, and offers information about the different types of cancer and the treatments available, as well as links to charities and support services.

Visitors to the website can read the stories of previous UCLH patients and get an idea of what their own treatment pathway might look like.

UCLH is a regional specialist centre for the treatment of urological cancers. Services are provided from University College Hospital at Westmoreland Street and the purpose built University College Hospital Macmillan Cancer Centre which are equipped with the latest technology to diagnose and treat cancer.

Many of our staff are renowned clinical experts in their area. We have close links with UCL that means research breakthroughs are translated into patient care as quickly as possible.

Contact: Laurie Hayes, Online Development Communications Officer, laurie.hayes@uclh.nhs.uk, 020 3447 5251.

GP education

The list of dates for the 2016 evening seminars has been published.

The seminars will be held at the UCH Education Centre, 250 Euston Road, London NW1 2PG from 6.30pm on the following dates:

- > Thu 14 Apr – Women’s Health
- > Thu 19 May – Ambulatory Care
- > Thu 23 Jun – Musculoskeletal medicine
- > Thu 15 Sep – Dermatology
- > Wed 19 Oct – Frailty
- > Thu 1 Dec – Diabetes

To book for any of these seminars email GPeducation@uclh.nhs.uk More details at www.uclh.nhs.uk/GPseminars