

GP Choice

Rotherham Hospital *Your hospital, your health, your choice*

June 2010

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Welcome to our new Consultants at Rotherham Hospital



Dr Suzanne Brady

Dr Suzanne Brady, Clinical Director, Accident and Emergency

We would like to offer a warm welcome to Dr Suzanne Brady, who has recently joined the Trust as Clinical Director for Accident & Emergency.

After qualifying in 2002, Dr Brady held the position of Lead A&E Consultant at Worthing for five years. She then completed a placement at Operation Wallacea, a medical expedition based in Honduras, Central America and an ITU post in Sydney, Australia. In addition, Dr Brady has held a range of positions in Sydney and worked with the armed forces in Iraq and Afghanistan.

Dr Brady joined the Trust in December 2009. She has subspecialty interests in pre-hospital care and expedition medicine and she is looking forward to developing unscheduled care services for the whole community and working with colleagues in primary care and the ambulance service.



Mr Stephen Poku

Mr Stephen Poku

To access via Choose & Book, select Specialty: General Gynaecology.

Mr Poku joined the Trust in February from Barnsley Hospital and subspecialises in maternal medicine. Mr Poku told GP Choice: "I'm delighted to be joining the team here at Rotherham and continuing to provide excellent care for our patients."



Miss Wala'a Al-Safi

Miss Wala'a Al-Safi

To access via Choose & Book, select Specialty: General Gynaecology.

Miss Al-Safi joined the Trust in January and subspecialises in obstetric and fetal scanning.

Prior to joining the Trust, Miss Al-Safi was a consultant at

Tawam / John Hopkins Hospital, United Arab Emirates, a tertiary teaching hospital where she was instrumental in establishing the only tertiary fetal medical centre in Abu Dhabi.

Speaking about her role, Miss Al-Safi said: "I will be working within the team to provide more consultant presence on the labour ward and I will also be supporting the middle grade obstetricians and gynaecologists. I will also be contributing to fetal scanning and will have an active role in the management of fetal abnormalities locally."

subspecialty interest is lower limb arthroplasty, including hip and knee. I'll be helping to improve the quality of our service for patients, helping to decrease their length of stay and improve patient outcomes."



Mr Naren Garneti

Mr Naren Garneti

To access via Choose & Book, select Specialty: Hips and Over 50's knees.

Mr Garneti trained in Leeds and went on to complete a trauma fellowship in the US. He also spent a year in New Zealand before completing an arthroplasty fellowship in Bristol in 2008.

"I'm pleased to be working in this progressive and dynamic department and am looking to develop a specialist service for young patients with arthritis of the hip and knee", said Mr Garneti. "I'm keen to develop a teaching programme for medical nursing, physio assistants and junior doctors, both locally and overseas."



Mr Kevin Wembridge

Mr Kevin Wembridge

Choose & Book referral details to be confirmed.

Mr Wembridge joins us from Barnsley Hospital, where he worked as a consultant from 2006. Prior to this, Mr Wembridge completed a hip fellowship at Guys and St Thomas Hospital after completing orthopaedic training at Sheffield Medical School.

Mr Wembridge told GP Choice Magazine: "My

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Mr Radwan Faraj

at the Advanced Fertility and Genetics Centre in Oman in 2002. He then joined the Northern Deanery, Gateshead in 2004 before taking up his first UK registrar post in the Manchester North West Region.

Mr Faraj subspecialises in fertility, recurrent miscarriages, PCOS and minimum access surgery. He told GP Choice: "I'm very excited to be taking up this position. We provide an exceptional fertility service, starting from ovulation induction to follicular tracking and laparoscopic fertility surgery and the provision of gonadotropin injections for ovarian stimulation. I am replacing Mrs Kumar and my main focus will be to

Mr Radwan Faraj
To access via Choose & Book, select Specialty: General Gynaecology.

Mr Faraj joined the team in January. After qualifying as a consultant in 1999 in Jordan, Aman, Mr Faraj took the position of Clinical Director

further develop this service and establish a network with surrounding hospitals."



Mrs Radhika Gosakan

Mrs Radhika Gosakan
To access via Choose & Book, select Specialty: General Gynaecology.

Mrs Gosakan previously worked as a Consultant at Bradford

Teaching Hospital before joining the Trust in March.

She told GP Choice: "I trained locally in Sheffield, where I developed special interests in colposcopy and maternal medicine. As part of my work here at Rotherham, I will be taking on the role of colposcopy lead. I will also be providing educational supervision for the Registrars and obstetric and gynaecology trainees who are rotated through the hospital."



In this edition of GP Choice, we speak to Miss Shakti Thakur regarding

Age Related Macular Degeneration

What is ARMD?

Age related macular degeneration is the most common cause of severe visual impairment in the elderly population of the Western world. Nearly a quarter of a million patients are affected in the UK, with an associated quality of life impairment perceived on a par with moderate stroke.

What are the symptoms?

Symptoms are loss of clarity of central vision, resulting in a central field defect and distortion of straight lines. When these symptoms are gradual (months to years) the underlying degenerative process is dry macular degeneration, for which there is currently no active treatment. When a sudden onset of symptoms occurs, the process is usually caused by a neovascular membrane below the central retina, causing leakage of fluid and blood, which disrupts the tissues. This is wet age related macular degeneration (wet AMD or ARMD). The resulting scarring process leads to rapid and permanent decline in central vision and the ability to recognise faces, read and see detailed images, which have a major impact on the patient's ability to remain independent.

What treatment is available for wet ARMD?

Fortunately there is treatment for wet ARMD which limits the scarring process and is highly successful in preventing loss of vision. To benefit, patients must be referred into our service directly and without delay, so that appropriate investigations can be arranged before commencing treatment, ideally within 2 weeks from the onset of symptoms. Whilst optometrists have been made aware of the direct referral process many still refer by the traditional route via GPs.

Here at Rotherham, we provide a wet ARMD service. The service was established in October 2008 and has treated nearly 200 patients.

Each week we receive 4-6 new referrals. Patients are commenced on treatment with Ranibizumab (Lucentis), an anti VEGF antibody fragment, which inhibits the neovascular process. The drug is given as a series of injections into the vitreous cavity, provided in the outpatient department on a monthly basis. Alongside this treatment, full support and advice regarding visual rehabilitation, low visual aids and practical support in the community is made available.

What are the risk factors?

Smoking increases the risk of ARMD associated visual loss. Healthy eating is encouraged with plenty of green and coloured vegetables (lutein and zeaxanthin content protect macular function, antioxidant effect). Oily fish intake (omega 3FFA) may decrease the risk by 38%.

Patients are encouraged to self monitor for any change in distortion, particularly if they have dry age related macular change which predisposes to wet ARMD, using the Amsler grid or equivalent.

How can I refer into the service?

Whilst not available on Choose and Book, direct referrals via fax are strongly encouraged so that patients may be offered timely treatment. Any optometrist report that suggests the onset of wet ARMD should be directed via this route and not as a Choose and Book or referral to an Ophthalmologist as these other routes will delay diagnosis and treatment.

For patients presenting with a sudden onset loss central vision/distortion, who have a history of AMD wet or dry either eye or those with a presence of subretinal blood/fluid in the macular area, please refer directly by fax to Viv Nicholson (Nurse Practitioner) Wet ARMD Service on 01709 304775 or see the referral form on the Trust's website: www.rotherhamhospital.nhs.uk/ophthalmology.

For more information on the service, please contact 01709 304421



Miss Shakti Thakur

Permanent birth control made easier with ESSURE

Couples looking for a permanent method of birth control can now benefit from a new service at Rotherham Hospital



Mr Hany Lotfallah



'ESSURE', manufactured by Conceptus, provides a quick, convenient method of permanent contraception for women. Unlike the other forms of permanent birth control, the procedure does not involve tubal ligation or anaesthesia and is almost 100% effective.

The procedure is carried out by placing small inserts into the fallopian tubes by a very fine telescope passed from the vagina through the cervix into the cavity of the womb. Once in place, tissue develops around the inserts to form a natural occlusion within the fallopian tubes. Although the procedure can sometimes cause minor discomfort, no form of anaesthesia is required.

An X-ray is undertaken three months following the procedure to confirm the device is in the correct position and has been successfully implanted. During this time the couple is advised to use alternative methods of contraception.

Speaking about the service, Mr Hany Lotfallah, Obstetric and Gynaecology Consultant said: "We're delighted to be offering this service here at Rotherham. The procedure is less invasive than traditional tubal ligation or vasectomy and is undertaken quickly as an outpatient procedure, meaning that the patient can resume her normal activities relatively quickly."

For more information on the Essure procedure at Rotherham Hospital, please contact Mr Lotfallah on 01709 304610

In each edition of GP Choice, we focus on a different clinical service to keep you informed of new services and developments here at Rotherham Hospital. This month, we focus on the sleep services provided by the Respiratory Physiology team.

The sleep clinic deals primarily with patients with Obstructive Sleep Apnoea Hypopnoea Syndrome (OSA), but also assesses patients with ventilatory failure from a variety of causes such as neuromuscular weakness and chest wall deformities.

The physiologist-led service was set up by Dr Philip Bardsley, Consultant Physician who has an interest in sleep disordered breathing and nocturnal ventilatory support.

Obstructive Sleep Apnoea Hypopnoea Syndrome (OSA)

Dr Bardsley explained that OSA is a condition where people experience transient but repeated upper airway obstruction during sleep. In bad cases this can happen every minute leading to repeated arousals and very little good quality refreshing sleep.

“Sufferers are often extremely sleepy during the day, which can lead to accidents, particularly road traffic accidents, poor work performance and relationship difficulties. Most, but not all sufferers are overweight and the prevalence of OSA in the UK is around 4% of middle aged men and around 2% of middle aged women.

“Patients with untreated OSA often have a higher incidence of diabetes and hypertension and OSA is also thought to be associated with a higher risk of ischaemic heart disease and strokes. These factors, coupled with the associated cost implications of not treating OSA have resulted in greater awareness of the condition which has resulted in a dramatic increase in referrals, particularly over the last five years.”

About the service

This has led to the development of a dedicated service at Rotherham, which is provided by a team of Advanced Practitioner Respiratory Physiologists with extensive knowledge & experience in sleep disordered breathing. The team is managed by Jane Caldwell, Respiratory Physiology Services Manager.

Jane told GP Choice “We now have the facilities to assess and treat a variety of sleep disorders. Patients can be referred to the clinic directly by the Choose & Book system. This speeds up the process to the benefit of patients.

“At the first clinic, a number of investigations can be carried out including domiciliary overnight oximetry in the patients own home. If required, more detailed investigations such as an inpatient sleep study can give more information about what is happening at night.”

Continuous Positive Airway Pressure (CPAP) treatment

Lee Radforth, Sleep Physiologist has recently joined the Trust from the Northern General Hospital with the remit of developing further sleep services. He explained that patients found to be suffering from moderate or severe OSA are offered treatment with night time Continuous Positive Airway Pressure (CPAP) delivered through a nasal mask. Patients are then followed up in the CPAP follow up clinic.

Lee said: “We currently have around 350 patients on CPAP and these patients are offered 1:1 specialist support throughout their therapy. They are also provided with a wide range of consumables and equipment to aid comfort, improved sleep architecture & quality of sleep.”

Lee also stressed the importance of overweight patients with OSA tackling the root cause of their problem. “Losing weight can significantly benefit OSA sufferers. With this in mind, we are looking to develop links with weight management projects, such as Reshape Rotherham.”

The clinic will also refer patients found simply to be snorers (who do not have OSA) for assessment to the ENT surgeons or directly to orthodontics to be fitted with a Mandibular Advancement Device (MAD). If patients are found to have one of the rarer sleep related problems such as narcolepsy or REM sleep behaviour disorder then they are referred on to the neurologists in Sheffield who are able to perform full polysomnography.

Patients suspected of sleep disordered breathing or other sleep disorders can be referred directly via the C&B access or via electronic letter referral to Dr Bardsley.

Accessing the service

Further information can be obtained from our Specialist Sleep Physiologist Lee Radforth or Jane Caldwell, Respiratory Physiology Services Manager.

Email

lee.radforth@rothgen.nhs.uk
jane.caldwell@rothgen.nhs.uk

Telephone

Medical Physics reception
01709 304572

Focus on... Sleep Services



Patient profile: Paula Procter

This month, GP Choice spoke to Paula Procter about her experiences with the hospital's Sleep Clinic.

By way of introduction, I am female, the wrong side of 50, although I am convinced someone added 10 years when I wasn't looking! For the last six years I have lived alone and am seriously overweight. In recent years I have been labelled a Type II Diabetic with high blood pressure and high everything else, the taking of pills became a routine seemingly unavoidable.

For the last 10 to 15 years, I would often be found at my desk asleep. When driving to meetings, I would have to stop about every 50 miles to have a sleep as I was aware of the possibility of falling asleep at the wheel, this meant I had to allow around an extra two hours for any journey of any length.

To counteract these situations I developed coping strategies, I used a lot of telephone and video connections for meetings to prevent me from driving, and yet I still arrived home exhausted, so I would make a call and get a meal delivered, fall asleep on the settee, wake at around 2am and drag myself off to bed only to wake the next morning feeling just as tired.

I wanted to make some changes in my life. I particularly wanted to lose weight and so reduce my other 'labels' but I had no inner strength to get the ball rolling. A friend mentioned sleep apnoea, I had heard of sleep apnoea, so I looked into it further through the internet, all the descriptions could have been of me, so I booked in to see my GP to see if a referral would be possible.

Luckily I was referred to Rotherham Hospital, where I was seen by the Chief Respiratory Physiologist, Lee Radforth, who put me at my ease and explained all that was going to happen.

Along with my 'pulse-oxy-ometer' I spent a usual night and returned the next day for the results to be downloaded. When I saw the doctor, it was agreed that I had indeed got Obstructive Sleep Apnoea and my results showed that I was 'waking' around 41 times an hour, so there was no wonder why I was so tired. My enthusiasm for the Continuous Positive Airway Pressure (CPAP) machine increased one hundred fold.

I was given a trial machine and was advised to sleep on my back, something I've not done in years. I had expected a blast of air to come through the mask, but no just a gentle breeze which I barely felt, I was informed of the 'ramping' effect which is where the breeze increases as you sleep.

That night I couldn't wait to go to bed. I set everything up, lay back, turned the machine on and waited to go to sleep. I think my excitement had overcome my need to sleep. I must have fallen asleep at some point, having reset my machine, and awoke the next morning feeling different but I couldn't explain what was different. This was the start of my new life.

Now I have my own CPAP machine on loan from the clinic and I am awake, with boundless energy and the inner strength I needed to start to lose weight, I rarely sit down at home and find I get on with things rather than put them off. At work, my output has doubled and colleagues are amazed at my productivity. I have an opportunity to enjoy life thanks to a little box of tricks, some tubing and a nose mask.

Thank you to the team at Rotherham Hospital.



CPAP machine

New service at Rotherham for Endoscopy patients

Patients requiring examination of the small intestine can now benefit from a speedier, less invasive screening service at Rotherham Hospital

The 'Pillcam' endoscopy capsule provides a more convenient visual assessment of the small bowel for patients than a traditional endoscopy. It also enables speedier diagnosis and treatment for those with diseases of the small bowel, such as unexplained bleeding, Crohn's disease, iron deficiency anaemia, polyps and tumours.

The procedure is performed as a day case attendance and is undertaken by the patient ingesting a small video capsule which contains a camera and light source. As the capsule travels naturally through the digestive tract, it emits images to a data recorder, which can then be viewed on a video monitor.

Speaking about the new service, Dr Pierre Willemse, Consultant Gastroenterologist said: "This revolutionary technology will provide significant benefits for our patients as it reduces the need for them to make repeat hospital visits or have further investigations and transfusions.

"This is a much more convenient, comfortable solution for patients concerned about having a stomach or bowel camera screening in the usual way.

"The capsule endoscopy service also forms a key aspect of streamlining investigations for iron deficiency anaemia (IDA), a new service which we have developed following on from the recent appointment of a secondary inflammatory bowel disease specialist nurse.

"We aim to significantly improve the speed of investigation and outcomes for patients presenting with this frequently encountered problem by providing direct referral to the IDA service or capsule endoscopy service."



Actual size

For further information on the capsule endoscopy service, please contact Dr Willemse, Consultant Gastroenterologist on: 01709 304270

Weight management support for diabetes patients

Patients with diabetes often struggle to manage their weight due to their medication, which not only contributes to weight gain but also jeopardises their plans to cut down on their dietary intake by causing hypoglycaemia. Most standard weight management programmes do not take this into consideration, but Rotherham's diabetes weight specialist team offers a dedicated programme specially designed for patients affected by diabetes.

The structured, 12 week education programme has been specifically designed to support people with diabetes to help them to make choices about their food and lifestyle to enable them to lose weight and manage their Diabetes. The course comprises six sessions, followed by reviews at three and 12 months.

The programme provides advice and guidance to patients to help with:

- weight management, specifically looking at calorie restriction tailored to each patient.
- reducing the risk of hypoglycaemia when altering dietary intake.
- adjusting diabetes medications to aid weight loss and prevent hypoglycaemia.
- increasing exercise and altering medication accordingly.
- changing behaviour, eating out, recipe ideas and goal setting.

The programme is led by specialist dietitians and comprises a multidisciplinary team, including Consultant Diabetologists, Psychologist, Diabetes Specialist Nurses and Podiatry team.

The service is suitable for anyone with Type 1 or Type 2 Diabetes who is taking hypoglycaemic medication or Insulin, with a BMI of over 27kg/ m2.

Referral to the Diabetes Specialist Dietitian team can be made using a standard dietetic referral form. Please provide details of the patient's most recent Diabetes medication or insulin doses, any weight management medication, HbA1c, Lipid levels, height, weight and BMI.

For more information on the service, please contact 01709 307910

Help is at hand for victims of sexual violence

Sexual violence affects people of all ages, backgrounds, race, religion and gender and is massively under-reported by both men and women throughout the UK.

In order to help those affected by sexual assault, Sexual Assault Referral Centres (SARCs) have been established nationally, to provide medical care and counselling, quickly and sympathetically.

The Isis Sexual Assault Referral Centre is situated at Rotherham Hospital and provides comprehensive, one-stop care for female and male victims of rape and sexual assault throughout South Yorkshire.

The Isis team provides holistic and specialist medical and forensic care to minimise risks to victims' physical and mental well-being and to aid recovery. The team also reviews victims' ongoing care needs during their visit to the centre and provides assistance in accessing community based services. Victims can also benefit from advice and guidance from the Isis team to help them make informed choices when deciding whether to report the crime.

The centre encompasses a forensically secure examination room so that evidence can be collected for use in the investigation of crime. Facilities are also available for South Yorkshire Police to perform visually recorded interviews, which can be played in court, thereby simplifying the process of providing evidence.

The Isis team works closely with the Independent Sexual Violence Advocates (ISVA) within South Yorkshire, an independent service which supports victims of rape or sexual assault through the legal processes.

If you have a patient who you feel may benefit from the service, or for further information, please contact the Isis team on 01709 307327

Parkinson's disease services at Rotherham Hospital

Parkinson's disease diagnosis & management can be challenging even in the hands of experts. As well as accurate diagnosis, patients also require access to services throughout the course of this progressive lifelong condition, to help manage their condition effectively and promote a good quality of life.

Rotherham Hospital's dedicated Parkinson's multi-disciplinary team comprises a range of consultant and nurse-led clinics and therapy services. These include:

Two Consultant & Associate Specialist clinics per week. These include:

- Assessment & diagnosis
- DaTSCAN requests for differential diagnosis
- Initiation of medication
- Clinical monitoring & management of medication

Two Parkinson's disease nurse specialist clinics per week. These include:

- Independent nurse prescribing
- Clinical monitoring & adjustment of medication
- A point of contact for support, including home visits, when appropriate
- A reliable source of information about clinical & social matters relevant to Parkinson's Disease

Physiotherapy (one to one and group sessions). Monday - Friday. This includes:

- Gait re-education, improvement of balance & flexibility
- Enhancement of aerobic activity
- Improvement of motor function
- Improvement of functional independence, including mobility & activities of daily living

Occupational therapy. This includes:

- Support for patients to encourage independence to continue with work, family roles, leisure and self care
- Environmental issues to improve safety & motor function
- Cognitive assessment & appropriate intervention
- Depression and anxiety management

Speech and Language therapy. This includes:

- Improvement of vocal loudness, & pitch range, including the Lee Silverman Voice treatment programme
- Review & management to support safety & efficacy of swallowing & to minimise the risk of aspiration

We also provide further support to our patients and their carers through referrals to a range of other services, such as the local Parkinson's Disease Society, Expert Patient Programme, "Who Cares for Me" (for carers of patients with Parkinson's Disease), Dietitians and Parkinson's Disease Community Support workers for patients & their families.

For further information on all Parkinson's Disease Services, please contact Dr Abdelhafiz 01709 305740 or Joanne Rose, Parkinson's Disease Nurse Specialist 01709 304165.

A new website for you, your patients and the community...

We are always looking at ways in which we can improve communication with our stakeholders. After feedback from GPs, patients and other stakeholders, we've redeveloped our website to make it more attractive and much easier to use.

What's new?

You'll notice that the new site looks very different to our previous site. Our new design and menus make the website much easier to use, but our work didn't end there. We've also;

- Implemented a new web address; www.rotherhamhospital.nhs.uk, which is shorter and more memorable than the old one.
- Developed an integrated search engine to make information easier to find.
- Redesigned the GP area, which now includes GP focused links, guidelines to Choose & Book and other resources plus electronic copies of your magazine, GP Choice.
- Included searchable contact details for all of our consultants.



If you have any feedback about our website, or you would like to recommend a link or resource to go into the GP area of the site, then please get in touch with the Web Editors:

Fran Puddick **01709 426256**

Chris Witham **01709 426257**

Email webmaster@rothgen.nhs.uk

CHOOSE&Book

Referral information for GPs

April 2010		Look how many Rotherham Hospital waiting times (in days) are the shortest in South Yorkshire – they are highlighted in green .															
O/P = Outpatient Appointments D/C = Day Case Appointments I/P = Inpatient Appointments		Cardiology	Dermatology	ENT	Gastroenterology	General Medicine	General Surgery	Gynaecology	Neurology	Obstetrics	Oral Surgery	Ophthalmology	Paediatrics	Rheumatology	Trauma & Orthopaedics	Urology	
South Yorkshire Providers	The Rotherham NHS Foundation Trust	O/P	-	13	19	28	24	12	13	-	-	23	10	13	10	15	14
		D/C	18	10	16	14	17	14	4	-	-	16	13	6	-	26	14
		I/P	-	-	22	-	15	23	54	-	-	17	-	-	-	79	10
	Barnsley NHS Foundation Trust	O/P	33	42	24	30	17	24	11	-	23	18	-	26	-	23	17
		D/C	35	-	23	24	36	30	49	-	-	21	-	-	-	30	29
		I/P	-	-	15	-	-	30	70	-	-	-	-	-	-	46	38
	Doncaster & Bassetlaw NHS Foundation Trust	O/P	-	14	26	-	17	14	20	-	21	28	21	12	23	22	21
		D/C	-	-	50	-	32	52	68	-	-	32	56	-	-	63	70
		I/P	-	-	66	-	28	57	73	-	-	62	-	-	-	67	47
	Sheffield Teaching Hospitals NHS Foundation Trust	O/P	16	24	34	32	-	-	-	-	-	45	22	-	25	26	-
		D/C	27	45	-	27	28	-	-	-	-	33	-	-	-	62	-
		I/P	81	-	-	28	-	-	-	-	-	44	-	-	-	87	-