

Connect



Quarterly Newsletter for GPs

Issue 6 - Spring 2017



Tallaght Hospital
Tel: 01 414 2845

Email: GPConnect@amh.ie

Dear Colleagues

Welcome to the Spring issue of Connect. With the onset of Spring and new beginnings I am delighted to advise that the Tallaght-Clondalkin Local Integrated Care Committee (TC-LInCC) is now up and running with the inaugural meeting taking place in the Maldron Hotel on Tuesday 28th February ably chaired by the Irish College of General Practitioners faculty elected chairperson, Dr. Aisling Ní Shúilleabhain who is well known to many of you.

The overarching aim of the TC-LInCC is to enhance the professional working relationships between GPs, consultants, hospital management and the community health organisations in order to create more effective and efficient services for patients in the greater Tallaght/Clondalkin catchment area.

This involves but is not limited to:

- › Development of integrated care pathways between acute and community services so as to improve patient outcomes.
- › Establish an effective medium for communications between all three entities on matters such as patient safety alerts, service developments and policy changes (these can be both urgent & routine in nature) as well as regular updates on the TC-LInCC activities.
- › Ensure evidence based effective and transparent decision making incorporating all key stakeholders including in particular the CHO7
- › Develop a consensus approach to service enhancements required and the collective advocacy opportunities to the likes of the HSE and Department of Health on policy matters.
- › Act as a conduit of any issues of conflict which have a direct or indirect impact on stakeholder or service users and aim for resolution of same using a consensus approach.

It is intended that the meetings are open to all interested parties from the local GPs, Tallaght Hospital and CHO 7 to attend.

However, to ensure effective decision making and achieve the above aims, a core group has been appointed to conduct the core business and administration of the TC-LInCC.

The membership of the core group is currently as follow:

- › Six GPs: Dr. Aisling Ní Shúilleabhain (Chairperson), Dr. Andy Jordan, Dr. Brian Blake, Dr. Catherine Wilkinson, Dr. Darach O'Ciardha, Dr. Hugh Nohilly
- › Two CHO7 representatives: David Walsh & Anne O'Shea
- › Five Clinical Directors, Tallaght Hospital: Dr. Catherine Wall (lead Clinical Director & Medicine), Dr. Ciara Martin (Paediatrics), Dr. Ronan Browne (Radiology), Dr. Michael Jeffers (Laboratory) and Dr. Eleanor O'Leary (Perioperative)
- › Chair of Medical Board, Tallaght Hospital: Dr Siobhán Ní Bhriain
- › Corporate Representatives, Tallaght Hospital: Lucy Nugent (Deputy CEO) & John Kelly (Chief Operations Officer)

In addition to the above the TC-LInCC wishes to foster networking and collaboration and is planning a social event soon!

I hope you enjoy this edition which aims to showcase the work of the Hospital and help inform you of developments here in Tallaght.

Kind Regards

Lucy Nugent
Deputy Chief Executive Officer

New Research Laboratory

In recent weeks the newest research centre at Tallaght Hospital was officially named. The new Meath Foundation Research Laboratory, located in the Trinity Centre at the Hospital has undergone a major upgrade with support from the Meath Foundation.

The aim of the new facility is to expand the culture of scientific discovery at Tallaght Hospital and to enable access for patients to new novel therapies through their participation in clinical trials.

The Laboratory has been externally assessed by international experts and approved for Clinical Trial's bench-based work. This development has enabled clinical research activity to increase by 50%. One area that has particularly benefited is cell culture standards which now meet international best practice. This allows for all primary synoviocyte cultures to take place on-site and not in UCD as was previously the case. The new laboratory also contains clinical research and bio-banking facilities, as well as upgraded facilities for performing proteomic analysis and immunoassays.



Pictured from left to right following the lab opening were David Slevin CEO Tallaght Hospital; Professor Paul Browne, Head of School of Medicine Trinity College Dublin; Mairéad Shields, Chairman of the Meath Foundation; Professor Stephen Lane Respiratory Consultant and Chairman of the Meath Foundation Research Committee and Michael Scanlan, Chairman of Tallaght Hospital Board.

Tallaght Hospital selected to lead study in Ireland

In November the Hospital was very proud to announce our selection as the lead research site in Ireland as part of a global study for Alzheimer Disease.

This is a significant milestone for Alzheimer's research at the Hospital and an acknowledgment of the excellent work undertaken by our Age Related team. Alzheimer's disease is the most common form of dementia, characterised by progressive loss of cognition - our ability to learn, remember and plan our lives. Right now there are approximately 48,000 people in Ireland suffering from the disease and that number is set to increase as the population ages. The disease impacts many families around the country, and current therapies are limited so there is a great need to understand how Alzheimer's disease develops, and what the underlying processes are in order to develop effective treatments.

The trial is focussing on a newly developed drug, Verubecestat produced by MSD. This tablet has been shown to "switch off" the production of the protein amyloid



Some of the Memory Clinic team - Dr. Sean Kennelly (Consultant Geriatrician), Cathy McHale (Age Related Healthcare Nurse), Deborah Fitzhenry (clinic nurse age-related health care), Aine Connolly (clinical nurse) and Dr. Tara Coughlan (Consultant Geriatrician)

in the brain which is thought to be the chief cause of Alzheimer's disease. Importantly, amyloid accumulation in the brain can precede the onset of symptoms of Alzheimer's disease by several decades. Therefore, participants in the MSD trial have been selected based on having mild memory difficulties but without the presence of Alzheimer's, as memory difficulties can indicate this amyloid accumulation.

The Chief Investigator for the Irish leg of this trial is Dr. Sean Kennelly, commenting on the hospital's participation in the trial said: *"This is a key milestone, for the first time Irish people who have memory difficulties but haven't yet clinically developed Alzheimer's disease have the opportunity to participate in a trial of a medication which could potentially delay or halt progression of their symptoms. Alzheimer's is a progressive, degenerative disorder and with a high projected growth in older persons over the next 20 years it is a disease that is most*

likely to continue to increase. Causing great distress to those diagnosed and their loved ones, increased diagnosis also has a massive impact on care needs in the acute hospital setting and in our communities. This is a very exciting time for Alzheimer's disease research with several treatments showing early promise, having said that we must remain cautious as there have been many false dawns in this field."

Tallaght Hospital has developed several high quality supports and services for Alzheimer's and Dementia research, including the Hospital's weekly Memory Clinic. Launched last year it offers a multidisciplinary service incorporating geriatric medicine physicians, clinical nurse specialists, clinical neuropsychologists and occupational therapists among others, aiming to identify those most at risk of Dementia as early as possible. For more information on the clinical human study trials, you can click [here](#).

New Pilot Project to Support Patients with Kidney Disease

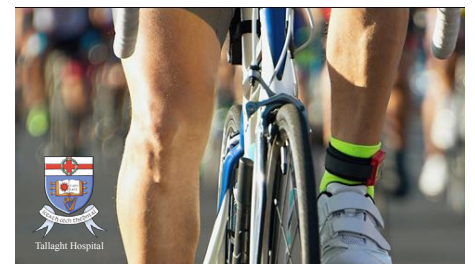
The Trinity Health Kidney Centre is conducting a new Pilot Psychology Project supported by the Meath Foundation Quality Improvement Fund.

The project will examine the effectiveness of psychological interventions to improve patient adherence to the challenging treatment demands of Chronic Kidney Disease (CKD). Currently there is no psychology service for patients with CKD and their families attending Tallaght Hospital. This pilot project will examine the benefit of such a service for patients.

Living with CKD can be challenging and stressful. Becoming unwell can trigger a range of difficult emotions. These include disbelief, sadness or depression, as well as anger and fears about what the future might hold. Being psychologically ready for major changes such as transition to end-stage renal disease, renal replacement therapy or kidney transplant, is a vital part of adjusting to the illness.

As part of this pilot, a Psychologist will provide clinical sessions to patients, working closely with the MDT Trinity Health Kidney Centre team. Providing psychological support at key transition points can aid adjustment and lead to an improvement in the patients' ability to cope with treatment adherence. This results in better health outcomes.

The Project is led by Professor Mark Little of the Trinity Health Kidney Centre and Dr. Veronica O'Doherty, Head of the Psychology Department, Tallaght Hospital and is supported by Dr. Catherine Wall, Clinical Lead at Tallaght Hospital. Academic support is provided by Professor David Hevey, Lecturer in Psychology, School of Psychology, at Trinity College Dublin.



The Summer 99 Charity Cycles

for the Intensive Care Unit at Tallaght Hospital

Saturday 17th June 2017 at 9am

www.iregister.ie/v2/events/summer-99-charity-cycle-2017/

www.iregister.ie under Tallaght Hospital Summer 99

Tallaght Vasculitis & Allergy Group: a stepping stone to participation in European Reference Networks

The Tallaght Vasculitis and Allergy Group (TVAG) was established in 2014 with support from the Adelaide Foundation. It is co-chaired by Professor Mark Little and Professor Stephen Lane and, through coordinator Caroline O'Halloran, enables a periodic multi-disciplinary meeting to discuss challenging complex cases in the realm of vasculitis and allergy.

Consultants from nephrology, rheumatology, respiratory, radiology, histopathology, immunology and others feed into these discussions as required, with the goal of streamlining the patient pathway and promoting more efficient use of hospital resources.

Such a Multi-Disciplinary Team approach is considered a core component of delivering care in the context of rare disease.

Autoimmune vasculitis is one such rare disease that, under stewardship from the TVAG and chaired by Professor Little, is now managed at a national level through a virtual network: The Vasculitis Ireland Network (VINE, <http://www.medicine.tcd.ie/thkc/vasculitis-ireland-network/>). By aligning this with the Irish National Rare Kidney Disease Registry, Professor Little has been successful in obtaining designation from the Dept of Health for VINE as a national centre of expertise for the purposes of applying for membership of European Reference Networks (ERN). These major international networks seek to consolidate care for

specific rare diseases, such as vasculitis, across all European countries.

The Rare Immune Disorders ERN (RITA: Rare Immunodeficiency, Autoinflammatory and Autoimmune) will streamline and enhance care for patients with rare conditions such as vasculitis, who have frequently suffered from fragmented care and delayed diagnosis. VINE is represented on the steering committee of this evolving European organisation, with Professor Little coordinating the autoimmune strand. Through this initiative, Tallaght Hospital has the opportunity to influence care pathways for rare immune disorders internationally, and improve care and outcomes for patients locally. For further information on TVAG or ERN please contact [Professor Mark Little](#).

Drug induced interstitial nephritis

Professor George Mellotte recently gave a talk of drug induced interstitial nephritis in grand rounds.

Typically acute kidney injury is precipitated by hypotension due to sepsis or cardiac failure or exposure to nephrotoxins such as NSAIDs or contrast material. Chronic kidney disease on the other hand is typically associated with hypertension and/or overt proteinuria.

Drug induced interstitial nephritis, however is a relatively uncommon disease characterised by development of unexplained kidney injury in the absence of overt proteinuria or a classical precipitant. Patients with kidney failure do not have any symptoms until kidney injury is severe, so most cases are diagnosed as a result of routine blood test done for another indication. When diagnosed on the basis of symptoms, the damage is usually permanent.

Traditionally, drug induced interstitial nephritis was associated with penicillin antibiotic use but over the last 15 years, there has been a significant increase in the prevalence of proton pump inhibitor (PPI) induced interstitial nephritis. A recent paper published in the *QEJM*, recorded doubling of prevalence in the last 13 years in Scotland. This data is consistent with a number of other papers indicating the increased risk and prevalence of chronic kidney disease in patients taking proton pump inhibitors. These indicate that the relative risk of chronic kidney disease is 3-5 times

higher in patients on PPIs compare to controls. While the absolute prevalence of chronic kidney disease in patients taking PPIs is extremely low (0.04%), it is becoming a major public health risk, due to the widespread use of PPIs in the general population. PPIs can now be bought over-the-counter. They are on the highest prescribed class of drugs prescribed in Ireland. The diagnosis is often clinical, but for diagnostic proof, a renal biopsy is required. This reveals a characteristic pattern of eosinophilic cells in the renal interstitium.

In the final part of his grand rounds, Prof. Mellotte explained the SADMAN sick day rules. These are rules that were developed by the NHS to be applied to patients with known chronic kidney disease.

- If a patient with chronic kidney disease is unable to maintain adequate fluid intake or has excess fluid losses during an illness (such as diarrhoea or vomiting)
- They are advised that potentially nephrotoxic or renally excreted drugs should be held 24-48 hours until patient has recovered.

The drugs in question can be remembered by the acronym SADMAN (Sulfonylureas, ACE inhibitors, Diuretics, Metformin, A angiotensin receptor blockers, NSAIDs)



National Patient Experience Survey

During the month of May a national survey will assess patients' overall experience of their stay in hospital. With 40 participating hospitals and an estimated 27,000 patients eligible to

participate, this will be the largest single survey of the healthcare system to be conducted in Ireland. The survey is a joint initiative by the Health Information and Quality Authority (HIQA), the Health Service Executive (HSE) and the Department of Health and all data collected will be used to shape future healthcare policy and improve health outcomes for patients.

Adult patients who are discharged from a public acute hospital having spent at least one night and with a postal address in the Republic of Ireland will be asked to participate. Survey packs will be sent by the National Patient Experience Survey team approximately two weeks after their discharge. The survey can also be completed online up until 26 July 2017.

Please help to make the survey a success by encouraging patients to tell us about their experience by completing a survey. We need a rich source of data to inform our quality improvements. You can find further information on the initiative [here](#).



ESD

Early Supported Discharge (ESD) for stroke facilitates an early discharge from hospital with home-based acute rehabilitation. It aims to reduce hospital length of stay for patients with mild-moderate impairments post-stroke. ESD services are relatively new in Ireland and Tallaght hospital is one of only three sites in the Republic of Ireland who have a formal ESD for the stroke service.

Our ESD service was established in late 2012 and continues to grow and develop as an integral part of stroke care in Tallaght Hospital. The team consists of a physiotherapist, and a part-time occupational therapist and speech & language therapist. We accept referrals for inpatients under the care of our stroke or neurology teams, from Peamount Healthcare and St. James's Hospital stroke/MedEL services.

To be considered for the service patients must meet specific criteria. This includes being medically stable, willing and consenting to ESD, continuing to require acute rehabilitation from at least one of the three disciplines, mobilising with at least assistance of one person and residing within a 15km radius of the hospital.

Despite limited resources, we have enabled an earlier discharge home from hospital for a total of 137 patients since January 2013.

This includes 87 patients from Tallaght Hospital alone with zero stroke related readmissions within 30 days of discharge home.

ESD for stroke also aims to improve functional outcomes post-acute stroke. The ESD service has been shown to increase patients' functional independence. In 2016 there was an average improvement of 12% in patients' overall Functional Independence Measure scores.

One of the most important goals of ESD, which we are very proud of, is to improve quality of life of stroke survivors while ensuring a positive patient experience. Our satisfaction audits since the start of 2013 show that 100% of our patients were happy that therapy was carried out in their home. 89%-100% of patients reported feeling they were involved in their treatment plan during ESD and that they would still choose this service over staying in hospital.



"For me it was great to be in your own home....instead of being stuck in hospital. I found the therapy made me come back to myself"

"...therapy much more effective in the comfort of home"

"The one-to-one relationships built up with each therapist was a very positive factor, and the fact that I was in my home environment"

More than Skin Deep

New research published recently revealed that 44% of people with Psoriasis have never heard of Psoriatic Arthritis. Yet, up to 30% of the estimated 73,000 people with Psoriasis in Ireland may go on to develop the inflammatory arthritis that can cause pain, swelling and damage to joints.

In an effort to increase awareness of Psoriatic Arthritis Tallaght Hospital consultants Professor David Kane, Consultant Rheumatologist, and Dr. Anne-Marie Tobin, Consultant Dermatologist have become involved in a campaign called 'More than Skin Deep'.

"The symptoms of psoriatic arthritis are quite different to those of psoriasis in that it's a disease of joints rather than a disease of the skin. Those affected will experience swelling, pain and stiffness in the joints and will have difficulty moving their joints, particularly the hands, knees or feet", said Prof David Kane, Consultant Rheumatologist. "Early diagnosis of psoriatic arthritis is important. If we intervene and treat early we may be able to put the disease into remission and prevent permanent damage to the joints.

To learn more about Psoriasis and Psoriatic Arthritis, three information videos are available they are:

- ▶ [The Journey](#) – Professor David Kane and Dr. Anne-Marie Tobin talk about the link between psoriasis and psoriatic arthritis, including the signs, symptoms and how it is diagnosed
- ▶ [Managing the Journey](#) – Professor David Kane and Dr. Anne-Marie Tobin give advice on how best to manage the journey from psoriasis to psoriatic arthritis
- ▶ [More than Skin Deep](#) – interview with patient Marion Morrissey about her journey from psoriasis to psoriatic arthritis

TLC – DOC

Please note that since the middle of January TLC-DOC is no longer located inside Tallaght Hospital. The out of hours service now operates from a new purpose built facility located beside Aldi in the Tallaght Cross West complex. The contact number of 1890 20 22 24 remains unchanged. The clinic times operate from 6pm-10pm Monday to Friday and from 10am-6pm at weekends and Bank Holidays.

Consultant Appointments

Dr. Sean O'Dowd

– Consultant Neurologist

Dr. Brenda Griffin

– Consultant Nephrologist

Upcoming education events available for GPs and Practice Nurses

DATE	COURSE DETAILS	CONTACT
Every Friday	Grand Rounds 8.00am – 9.00am Trinity Lecture Theatre – Every Friday during Term Time	Sandra Daly. Tel: 01 414 2883 Sandra.Daly@amnch.ie Fee - Free of Charge
09.05.2017 23.05.2017	Venepuncture & Cannulation Skills 10.30am – 12.30pm, Two Rock Clinical Skills Lab, Centre for Learning & Development, Tallaght Hospital	Clodagh McLoughlin Ext. 2851 Clodagh.mcloughlin@amnch.ie



If you would like any more information about any articles in the Connect or have suggestions for future editions please do get in touch.

Email: GPCConnect@amnch.ie