Scottish Primary Care Research Network

SPCRN NEWS

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Best Recruiting Practice Award

Congratulations to Erskine Practice and Maryfield Medical centre both from Tayside for winning the Best Recruting Practice of the year Award. They both took part in 5 studies in 2010.

The awards were held at the SSPC Conference April 2011. The conference was a huge success and was attended by 120 delegates from around the UK and overseas. We had a range of excellent speakers and workshops. Some of the presentations can be viewed at www.sspc.ac.uk events/2011presentations.htm

Erskine Practice, Tayside

Maryfield Medical Centre

SSPC Annual Conference 2012

IMPROVING PATIENT CARE IN RESEARCH"

The Scottish School of Primary Care

The 2012 SSPC Conference will be held on 24th & 25th April at the centrally located Glasgow Hilton Hotel. Delegate rates and Key note speakers will be confirmed shortly. The SSPC Annual Conference is the event that should not be missed. It brings together a broad range of health care practitioners, researchers and academics from all over the world and offers an impressive range of national and international speakers.

The call for abstract and poster submissions will open towards the end of the year. Please refer to www.sspc.ac.uk for updates on the conference or email l.wilkie@cpse.dundee.ac.uk for more information or to be added to our mailing list.

SHARE - Scottish Health Research Register

Scotland's technical ability to identify people eligible for medical research studies is not yet matched by a practical capability to approach them directly to ask them to consider participation in those studies. This can lead to recruitment to research being much more difficult than it might be and consequently some projects fail. This makes Scotland a less attractive location to undertake clinical research than it should be. In order to overcome this increasingly important obstacle, we plan to create a Scottish Population Health Research Register (SHARE) of all Scottish residents who wish to be considered for participation in a range of studies.

Registers of patients who have given advance notice of their willingness to consider participation in research have been developed elsewhere in the world. The Volunteer for Vanderbilt system in Nashville is an example of a hospital-based system which allows individuals to register the option of choosing up to three diseases of interest about which they might be contacted to participate in studies.

There is enthusiasm amongst the public to participate in health research; the research community now needs to match this enthusiasm with concrete opportunities to participate. Experience in Scotland with the SDRN patient register suggests that almost 90% of patients who are identified as eligible for studies are willing to be contacted and participate with only 5% screen failure rates. We suggest that the Scottish public should be supported in moving away from passively waiting for an approach about an interesting piece of health research towards proactively being able to express an interest in participation in health research. Facilitating this more active approach to increase the efficiency of clinical research in Scotland is the purpose of the Scottish Health Research Register.

SHARE Scottish Health Research Register

NHS Highland Primary Care Research Day- Highland GPs Pushing their own Research Agenda

Highland region it turns out is no stranger to pioneering research. If you go back a hundred years, the groundbreaking "research" carried out by the Highlands and Islands Medical Service Committee which was reported in 1912 and later became known as the "Dewar Report", laid the foundations for what was, years later, to evolve into the National Health Service (NHS). If we move forward to more recent years, in the 1990s, we had three Scottish Government funded "research practices" in Highland and a thriving primary care research community, with the Highland and Grampian Research Network producing several pieces of excellent practice based research. Unfortunately, with changes to research funding streams, and an increase in the regulatory side of research, the number of research projects originating in primary health care in Highland has diminished and recent activity has been limited.

Highland is at a disadvantage in that it has limited academic institutional involvement in primary care research. There has been some excellent primary care research carried out by committed individuals and there is also some research associated with education within the primary care sector, but we often have to fight for national projects, which originate in one of the four major Scottish Universities or elsewhere, to recruit here. As a result, we do not have the inbuilt capacity, as in other health boards, to recruit the number of research participants seen in reports from other areas of Scotland. There is the possibility for us to boost our research activity by initiating eligibly funded projects in primary care in Highland, but this requires commitment by practitioners in Highland to become investigators in their own right.

Though it is not widely recognised, we have a wealth of research experience in general practice in Highland, with much enthusiasm being tempered by several concerns, mainly surrounding perceived lack of support, "fear" of the paperwork, legislation and regulation associated with research, and a lack of confidence in applying for funding to support projects.

During conversations with many GPs, I noted that they had an interest in taking on some local original research but, even though offers of practical support were made, these projects failed to come to fruition. Based on discussions with five local research active clinicians, the idea was born to stage a GP research day involving several enthusiastic GPs from within NHS Highland to facilitate the sharing of research ideas and stimulate the group to move forward with a single research project.

A proposal including a list of possible research projects and an agenda for the day was drafted and submitted in response to a small grant call from the NHS Highland R&D Endowments Committee and has been subsequently accepted and funded for the full sum to cover the costs of the meeting.

This idea that a collaboration of Highland practices could move forward with a mutually selected idea and move through the research pathway; from research idea, to securing of funds, to ethical and NHS approval, to successful recruitment and management of a project and finally to publication of data, is, I think, definitely achievable with current research support. This in turn would hopefully stimulate further research, perhaps by expanding on the original idea with the same or a greater number of Highland practices, or pursuing research of other topics as a result of confidence gained through the original study. The collaborative approach would give the group the ability to get viable numbers for quantitative research, but also the ability to make inter-practice comparisons possible (rural/urban; big/small). Pooled expertise would mean that there would be a smaller perceived pressure on any one practitioner to shoulder all the responsibility for the project. It should also lay the foundation for a research community and provide a 'face' of primary care research to foster collaborations with secondary care.

At the end of the day, from a remote and rural perspective, the Highlands have a unique population within the UK, so, who better to take control of the primary care research agenda in the region than Highland GPs?

Samantha Holden
Research Co-ordinator - Scottish Primary Care Research Network,

NHS Highland

National Studies

SPCRN is currently involved in recruiting patients for the following National Studies:

Study Title	Chief Investigator	Funder	Recruitment
The Scottish Family Health Study (Generation Scotland)	Professor Andrew Morris, University of Dundee	Scottish Government Health Directorate	East & West
PATHWAY 1: Monotherapy vs Dual Therapy for Initial Treatment for Hypertension.	Professor Morris Brown, University of Cambridge	BHF	East, South East & West
PATHWAY 2: Prevention and treatment of hypertension with algorithm based therapy (Pathway) Number 2. A multicentre Phase 4 study of optimal treatment of drug resistant hypertension.	Professor Morris Brown, University of Cambridge	BHF	East, South East & West
PATHWAY 3: A multicentre phase 4 study of comparison of single and combination diuretics in low-rennin hypertension.	Professor Morris Brown, Univesity of Cambridge	BHF	East, South East & West
UK component of EUDRAGENE: studying the pharmacogenetics of selected adverse drug reactions (ADRs): identifying possible cases of ADRs through primary care databases and hospitals across the UK.	Dr Mariam Molokhia, London School of Hygiene and Tropical Medicine	NIHR - Research Capacity Development Serious Adverse Events Consortium	East, North, North East, South East & West
Interstroke: Importance of conventional and emerging risk factors for stroke in different regions of the world and in different ethnic groups: a case controlled study.	Professor Peter Langhorne, University of Glasgow	Chest Heart & Stroke Scotland	North East & West
LEADER: Liraglutide Effect and Action in Diabetes: Evaluation of Cardiovascular Outcome Results. A five year Multi-centre, International, Randomised Double-blind, Placebo-controlled Trial to Determine Liraglutide Effects on Cardiovascular Events (COMMERCIAL).	Professor Stephen Bain, University of Swansea	Novo Nordisk	North East & West
TECOS: A Randomized, Placebo Controlled Clinical Trial to Evaluate Cardiovascular Outcomes after Treatment with Sitagliptin in Patients with Type 2 Diabetes Mellitus and Inadequate Glycemic Control on Mono- or Dual Combination Oral Antihyperglycemic Therapy (COMMERCIAL).	Professor Rury Holman, University of Oxford	Merck & Co Inc	North East & West
SHaRE: A pilot study on the feasibility of creating and using a Scottish Population Health Research Register.	Professor Frank Sullivan, University of Dundee	CSO	East & South East
The impact of a telemetric monitoring service in type 2 Diabetes: randomised controlled trial with nested qualitative study.	Dr Brian McKinstry, University of Edinburgh	Chief Scientist Office	North & South East
SEARCH Breast Cancer - A Population based study of genetic predisposition and gene-environment interactions in breast cancer.	Dr Paul Pharoah, Cambridge	Cancer Research UK	North, North East, West, South East & East
SEARCH Endometrial Cancer - A Population based study of genetic predisposition and gene-environment interactions in endometrial cancer.	Dr Paul Pharoah, Cambridge	Cancer Research UK	North, North East, West, South East & East

SEARCH Other Cancers - A Population based study of genetic predisposition and gene-environment interactions in cancer.	Dr Paul Pharoah, Cambridge	Cancer Research UK	North, North East, West, South East & East
SEARCH Ovarian Cancer - A Population based study of genetic predisposition and gene-environment interactions in ovarian cancer.	Dr Paul Pharoah, Cambridge	Cancer Research UK	North, North East, West, South East & East
PAGES - Establishing a database to study gene -environment interactions and pharmacogenomics for asthma among Scottish children.	Dr Steve Turner, University of Aberdeen	CSO	North & North East

Local Studies

Study Title	Chief Investigator	Funder	Recruitment
Maximising physical function in later life: a 2-centre randomised controlled trial of progressive resistance exercise training in combination with ACE inhibition.	Professor Marion McMurdo, University of Dundee	CSO	East
TRACE RA: Trial of atorvastatin for the primary prevention of cardiovascular events in rheumatoid arthritis.	Professor George Kitas, Dudley Group of Hospitals NHS Trust	Arthritis Research Campaign	East
VitDish: Can high-dose vitamin D supplementation reduce blood pressure and markers of cardiovascular risk in older people with isolated systolic hypertension?	Dr Miles Witham, University of Dundee	CSO	East
GenCep: A pilot investigation into the feasibility of developing a record-linked database to study the genetics of childhood eczema in primary care	Prof Frank Sullivan, University of Dundee	CSO	East
3P Study - Do phosphodiesterase 5 inhibitors improve exercise capacity in COPD patients with pulmonary hypertension?	Professor Allan Struthers, Ninewells Hospital, Dundee	CSO	East
The TASCFORCE Project: Tayside Screening for risk of cardiac events.	Professor Jill Belch, University of Dundee	Chest Heart & Stroke Scotland	East
BIOSTAT-Tayside CHF: A system BIOlogy Study to TAilored Treatment: Tayside Comprehensive Heart Funtion Study	Professor C C Lang, University of Dundee	EC Seventhg Framework Programme (FP7) Co-operation-Health	East
PROVIDE : Effect of nutritional supplementation on physical performance in elderly (COMMERCIAL)	Professor Marion McMurdo, University of Dundee	Danone Research	East
KIMVASC: Vitamin K to improve markers of vascular health and physical function in older patients with vascular disease - a randomised controlled trial	Dr Miles Witham, University of Dundee	Chest Heart & Stroke Scotland	East
DUAL/IDegLira: A trial comparing the efficacy and safety of insulin degludec/liraglutide, insulin degludec and liraglutide in subjects with type 2 diabetes (COMMERCIAL)	Ms Claire Henderson, Fife	Novo Nordisk	East
Developing a RCT of general practice-based, pharmacist-led, management of chronic pain: Phase II.	Professor Christine Bond, University of Aberdeen	MRC	North East

LANSCAPE-Comparison of a basal plus one insulin regimen (glargine/glulisine) with a biphasic insulin regimen (NovoMix 30) in type 2 patients after basal insulin optimisation (COMMERCIAL).	Professor Jiten Vora, Royal Liverpool University Hospital	Sanofi Aventis	North East
Epidemiology, prevalence and characteristics of heart failure with preserved left ventricular ejection fraction.	Prof Michael Frenneaux, School of Medicine and Dentistry, University of Aberdeen	BHF	North East
WAIT - Parent-determined oral montelukast therapy for preschool wheeze	Prof Jonathon Grigg, Queen Mary Uni London/Barts and the London School of Medicine	NIHR/MRC Efficacy and Mechanism Evaluation programme	North East
Chronic Obstructive Pulmonary Disease: The impact of a telemetric COPD monitoring service: Randmonised controlled trial with nested qualitative study.	Dr Hilary Pinnock, University of Edinburgh	CSO	South East
SIRTIS - A Phase I, Randomized, Placebo-Controlled, Crossover Clinical Trial to Assess the Safety of Oral SRT2104 and its Effects on Vascular Dysfunction in Otherwise Healthy Cigarette Smokers and Subjects with Type 2 Diabetes Mellitus COMMERCIAL).	Prof David Newby, University of Edinburgh	Sirtris Pharmaceuticals Inc	South East
5 alpha Reductase Inhibitors and Metabolism Study (RIMS).	Professor Brian Walker, University of Edinburgh	CSO	South East
South Asian Carotid Plaques - A novel assessment of vascular disease, and its association with insulin resistance and adiposity in South Asians.	Professor Naveed Sattar, University of Glasgow	CHSS	West
Getting out of the House Study: A multi-centre randomised controlled trial of rehabilitation aimed at improving outdoor mobility for people who have had a stroke (TOMAS)	Dr Pip Logan, University of Nottingham	HTA	West
Patient/carer/clinician experience of palliative care in heart failure.	Professor Frances Mair, University of Glasgow	BHF	West
Developing a conceptual model of the burden of treatment and the work involved in living with heart failure.	Professor Frances Mair, University of Glasgow	CSO	West

For more information on any of these National or Local Studies please see our website www.sspc.ac.uk/spcrn/current_projects or contact the relevant Node Co-ordinators below.

Node	Health Board	Staff	Emails
East	NHS Tayside NHS Fife NHS Forth Valley	Marie Pitkethly, Node Co-ordinator Kim Stringer, Research Officer	m.c.pitkethly@cpse.dundee,ac,uk K.Stringer@cpse.dundee,ac,uk
South East	NHS Lothian NHS Borders	Rebecca Skillen, Research Officer Michelle Rostant-Bell	Rebecca.Skillen @nhs.net Michelle.Rostant@nhs.net
West	NHS Greater Glasgow & Clyde NHs Ayrshire & Arran NHS Lanarkshire NHS Dumfries & Galloway	Tracy Ibbotson, Node Co-ordinator Yvonne McIlvenna, Node Co-ordinator Janice Reid, Research Officer	t.ibbotson@clinmed.gla.ac.uk Y.McIlvenna@clinmed.gla.ac.uk janice.reid@clinmed.gla.ac.uk
North East	NHS Grampian	Amanda Cardy, Node Co-ordinator	a.h.cardy@abdn.ac.uk
North	NHS Highland NHS Western Isles NHS Orkney NHS Shetland	Samantha Holden, Node Co-ordinator	Samantha.holden@nhs.net

Social Events

The SPCRN team took part in some voluntary team building activities at The Brae Riding for Disabled as part of their away day in 2010. This included stone-picking from fields, mending fences and poo-picking! The Brae is an independent charity group that is part of the national Riding for the Disabled Association (RDA). They provide horse-riding lessons/carriage driving lessons to disabled children and adults. They rely on the public for donations and volunteers to help provide assistance with the lessons, care of the horses and the maintenance of the buildings. The team raised £130 for The Brae. For more information please see their website *http://www.brae.org.uk/*

SPCRN

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SPCRN can help by:

- Providing advice on the practical aspects of conducting research in primary care
- Calculating the costs of involving primary care staff in research and arranging their reimbursement from the NHS support cost budget for eligibly funded studies
- Linking researchers and practices by recruiting health care professionals and practice staff to studies
- Providing practical assistance with recruitment of patients
- Trouble-shooting where recruitment becomes problematic

Download a copy of our Annual Report at www.sspc.ac.uk/spcrn/reports

We would like to thank the practices who help us recruit patients for studies we are involved in. Your help is greatly appreciated.