

# **PATIENTS GROUP**

**Queen Edith Medical Practice**

*The Patients Participation Group (PPG)*

**Complementing the work of the Practice**

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## **NEWSLETTER Number 38..... JULY 2024**

**Editors: Alan Wiliams/Karen Lain**

### **Introduction from the Editors**

Our previous Newsletter (No 37 - published April 2024) indicated that we would be producing about three talks in the summer months (June to September but avoiding the school holiday period when many of our members will be on holiday or perhaps looking after their children or grandchildren.

At the request of one of our members, we have pulled out all the 'stops' to get a superb talk (even a little bit of training) from experts at St John Ambulance on CPR – Cardio Pulmonary Resuscitation (chest compressions etc.) This will happen on July 11<sup>th</sup> and there are more details on page 7, including a copy of the poster which you might have seen in various local places. Please come along – we anticipate that attendance will be good – do not miss out! We will be looking ahead for something in September to rouse your interest. Watch out for the posters and any mailing we do direct to you.

We are planning two further Newsletters this year with target publication dates of late September and one in December, which will be earlier in the month to avoid the Christmas rush when your e-mails will be humming on family matters, dinners, parties etc.

If you have any ideas that would interest you in those later Newsletters, please send suggestions to us and will see what we can do.

In this Newsletter, we have taken a different approach to the article entitled "Health Care Snippets". There is so much happening in the medical world that we have found a host of potential things to refer to that were announced in the Press (usually) since late March. A selection of about a dozen is shown.

Finally, please note that this Newsletter is produced by the Patients Group, and not the Practice, and therefore any opinions expressed are those of the Group and not necessarily of the Practice (with the exception of the Practice News).

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## A Change of Editors

You will have noticed that there is a change of Editors going on. As the Chair, Alan has Edited the Newsletter for around seven years. Karen has volunteered to take on the lead role and we have worked together on No 37 and No 38, although she was not able to contribute as much on the latter as planned. We will work together again on No 39 with her taking more control; then she will lead on No 40. If she is keen for the “Healthcare Snippets” to continue we will agree on the format to be used in the future.

## Practice News from Claire Surridge, Practice Manager

### ON-THE-DAY APPOINTMENTS

We would like to remind all our patients that our on-the-day appointments are for **clinically urgent medical problems only**. Our reception/admin team are fully trained and advised by our GPs to ask specific questions to help assess whether your problem is clinically urgent. **It is therefore important that you answer the questions asked fully and honestly**. If your problem is not clinically urgent, then you will be offered our next available routine appointment or may be signposted to a more suitable service such as the pharmacy or our physiotherapist.

**If the member of the team you speak to is unable to ascertain the urgency, they will liaise with the on-call GP or ask you to complete an AccuRX Patient Triage form.** The latter is usually sent to your mobile phone via a text message link or it can be emailed to you. You will be asked to complete this as soon as received and submit back to us. For those patients that do not have a smart phone or access to email, the member of staff will complete the form for you.

A clinician will review the triage form once you have submitted it and, again, if clinically urgent you will be offered an appointment on the day. If not clinically urgent you will be offered our next available routine appointment or may be signposted to a more suitable service.

### **DR ABBAS SABBATICAL**

Dr Abbas will be away from the practice on sabbatical for 6 weeks from 23<sup>rd</sup> July and returning on 10<sup>th</sup> September.

### **DR BOGDAN PETRISOR**

Some of you will already have met Dr Petrisor over the past year during his time with us as a GP Trainee. He has now successfully passed his training and agreed to stay with us as a Salaried GP. He will start in his new post on 7<sup>th</sup> August. Initially he will be covering the last few weeks of Dr Abbas's sabbatical but then he will be providing an extra 6 sessions of GP cover for the practice to hopefully help with the inevitable increased winter demand.

### **ADMIN TEAM SHORTAGES**

The practice is currently experiencing significant shortages in our admin team due to sickness, annual leave and the training of new staff. This may mean you have had a longer wait for your call to be answered or for your enquiry to be dealt with. We apologise for any inconvenience this may cause.

We do have two new members of the team, Stephanie and Andrea who joined us recently and are currently being trained. It is a complicated role so this does take time to pick everything up so please bear with them and us!

Most importantly:

**Please do remember to be kind to our hard-working and dedicated staff.**

## **A Report from Howard Sherriff, a Patient Governor at Cambridge University Hospitals (*submitted on 26<sup>th</sup> June 2024*)**

After Easter the work of the Board and Governors has started after a relatively quiet spell. One of the major committees I observe on with other governors is the Addenbrookes Futures committee. With the approval of the Cambridge Cancer Research Hospital, and initial planning permission for the Children's Research Hospital exciting times are ahead over the next few years.

This group is working on Urgent and Emergency Care facilities. Three new wards have become available, and with the Surgical Hub working independently, cancellations over winter were avoided for elective orthopaedic surgery, and additional release of ward beds for emergencies. It is still troubling that long waits in A&E continue but the ICB is planning extended hours of operation for the Urgent Care centre staffed by experienced GPs. A lot of work is being done to identify where the blocks occur and improve this.

However, this week another 5-day strike by junior doctors is taking place. As a retired doctor I do not understand why this is happening a few days before a general election, when no one can negotiate as the outcome is unknown, and the party that will be in power to negotiate is up to the electorate.

One factor that I am aware of is many junior doctors are at risk of not completing essential training modules to allow them to sit professional exams, and complete training, to allow them to move further on in their career. Hopefully we will see progress in the near future. These strikes are having an immense effect on nursing and senior admin staff who are often working 15-18 hour days to reorganise rotas, cancel outpatient and surgical appointments, and then rebook them.

New Governors have been appointed following voting, covering Public Governors, Patient Governors, and Staff Governors so we are welcoming new faces to future meetings.

Mike More is the current Chairman. He retires at the end of this year. Some of you may know that Mike was appointed in 2015 when Addenbrooke's Trust was in special measures and rated inadequate by the CQC. In his 9 years he has chaired a complete turn round to where we are today. Interviews are taking place to replace him and the new Chair should be known in July.

On the Staff side many agreed to use Park and Ride to get to work. The capacity for the buses has been overwhelmed recently, with queues at Trumpington P&R being quarter of a mile long to get to work. CUH meets regularly with the Councils involved, and with the contractors supplying the services. New measures are being proposed, including shuttle buses.

Governors are available to give talks to local groups such as PPGs, so if such a talk on the work and duties of a Governor is of interest the PPG can always contact CUH.

*Please note that Howard is a former member of the Group but moved house and is now registered at another Practice.*

### **Healthcare Snippets** (*Information supplied by Alan Williams*)

In this edition, I have adopted a different approach from before. There is so much available medical news that I am offering quite a lot of "headlines" rather than just three half-page "summaries". These headlines are all based on news in the period of March to June. If something interests you, send an email to me and I will send you the original article and would be willing to try and answer your questions. And, I have added a light-hearted element towards the end!

**AstraZeneca** (a very large Cambridge company) is buying a Canadian research company (Fusion) that is developing **new types of cancer treatment**. These are expected to be more effective than existing approaches. The aim is to deliver a radioactive dose straight into cancer cells. This is expected to be safer and achieve more than other approaches.

**16% of men** in this country are diagnosed with **prostate cancer** at some age (mostly 55 to 85). Many die because "screening" does not find them early enough. They need to be watchful and seek support quickly. There is also a lot of research on new and better treatment approaches.

**Obesity in UK men** is higher than in most countries and more than threequarters of men over 45 are overweight (BMI of about 25-30 or obese BMI above 30). It is estimated that this costs our economy somewhere in excess of £65 billion per year. Temptation should be resisted! Note: BMI is calculated from weight and height. Take your weight in kilos. Then take your height in metres and square it (multiply it by itself). Then calculate you BMI as kilograms divided by height in metres times itself. An example is 70 kilos divided by 1.7 metres two times. So, 70 divided by 1.7 twice gives a BMI score of 24.2 which is defined as healthy. Someone of the same height but weighing 110 kg would have a BMI of 36.9 -- quite seriously obese. You can find calculators on the web.

**Dr Mark Porter** (who has a weekly article in the Times) has advised his readers that he now takes a drug called atorvastatin to reduce his blood **cholesterol** score. Apparently, there are more than 10 million UK residents taking this routinely; the costs are estimated to exceed £7 billion a year.

**There is an idea** in the NHS that older people arriving at A&E departments should be offered “**Health MOTs**”. The suggestion is that, if at all possible, they can be checked and given medication to go home rather than be admitted and add to the number of people stuck in wards.

**Mental Health 360** is a concept aimed at improving nine aspects of mental healthcare which, taken together, will be beneficial. A charity (the King’s Fund) has written a brief report, only about 9 pages! summarising the full report (which runs to many more pages!).

**Research at Queen Mary College** (in London) suggests that it is possible to use a brain scan to predict the likely/possible development of **dementia** as long as nine years before there is obvious illness. More research is required to determine if this really help.

**Wouldn’t it be nice** if doctors could use a drug to prevent the damage to brain cells that leads to **dementia**? Three companies are expected to complete trial testing of specific candidate drugs in the next few months. We wait with bated breath. This **MIGHT** be a breakthrough!

**Just 1% get a test** developed for **Alzheimer’s drugs**. Two new drugs are expected to be approved in the UK soon. But whether they will help everyone is debateable because, it seems, that they need to be used early in the development of the condition for maximum effect. More people needed to be tested before the problem spreads through the brain.

**Craig McKinlay was an MP**. He contracted **sepsis** which attacked him very severely and very quickly. Both his legs had to be amputated below the knee and both arms below the elbows. His operation took place within a couple of days of the sepsis attacking him. He says, “*I am not disabled; I am temporarily incapacitated*”.

**Child Catcher** refers to an increasing trend for young people (under 18) to be able to access sugary vapes. This can hook them on tobacco but also doctors at University College, London have observed that the inner cheek cells of smokers and vapers have similar changes to their DNA; in smokers these changes are understood to indicate the possible development of lung cancer.

**Chemotherapy's bad days can be brutal but side-effects do pass.** Inspired by the Princess of Wales, and her recent appearance, there has been some emphasis on this subject. Such a "course" typically takes six cycles of 21 days with two days of infusions (several hours long) in each cycle and the remainder of the time resting". Overall, the process takes 18 weeks.

**Sir Venki Ramakrishnan and Ageing.** One of the many Nobel Prize winners working in the Laboratory of Molecular Biology (LMB) on the Addenbrooke's campus is Sir Venki Ramakrishnan. He is also one of the 24 Members of the Order of Merit (he was appointed personally by the late Queen in 2022) His current research effort is reported to be attempting to answer the question "why do we die?". If there is an answer, people could live longer – perhaps more than 120 years. That then raises the question of what the very old people will do (their retirement will be lengthy, and they will need good pensions to keep them going).

## **Talks**

Details of our next talk have been appearing on Noticeboards in various sites, including in the Practice itself and local shops and churches. We hope to achieve a large turnout and, if you are interested, we suggest you arrive early to get a good seat.

**The details of the talk and demonstration of CPR is on the next page**

**Queen Edith Patients' Group**

**Could you**

# **Restart a Heart**

**Someone has stopped  
breathing - could you help?**

**Come and learn basic chest  
compressions**

**You could save a life**

**Where – St James Church, Wulfstan Way**

**When – July 11<sup>th</sup> at 7:30 pm**

**Who can come – all welcome, no charge**

**Instruction by [St John Ambulance](#)**