

NAPC Annual  
Conference

PAGE 6



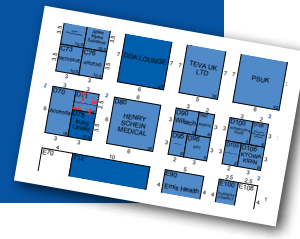
DDA Annual  
Conference

PAGE 7



2020  
Floorplan

PAGE 12



JOIN THE  
WAITING LIST!



Incorporating



Incorporating



Annual  
Conference

The Home of General Practice

Issue 17 • January 2020

# NAPC stages best ever conference at Best Practice

**The National Association of Primary Care (NAPC) is a "force for good" and its work in driving forward the primary care home model has been key to primary care transformation.**

That was the message from Secretary of State for Health and Social Care Matt Hancock when he addressed the NAPC 2019 annual conference at Best Practice – one of the organisation's best yet according to feedback from delegates.

Conference sessions included an exploration of how primary care networks (PCNs) can prepare for the draft network DES (Directed Enhanced Service) specifications proposed for 2020 and beyond. Trailblazing PCNs showcased how they

are already providing enhanced services in care homes and reducing A&E attendances as a result. Others described the progress they've made in introducing personalised care plans for frail patients and anticipatory care which involves healthcare professionals recording decisions agreed with patients about their anticipated care needs and wishes.

There was also a strong focus at the conference on innovative ways of improving mental health services. Highlights included the inspiring Tony O'Neill who shared his story of depression which

CONTINUED ON PAGE 3



## Making a difference? Improving quality and addressing health inequalities in cancer

**It has been stated that "more and more people are living long enough to develop cancer", with age being one of the biggest risk factors. However, each year, 64% of all cancers are still diagnosed under the age of 75 (2014-2016). What is encouraging is that 50% of those diagnosed with cancer will survive their disease for at least 10 years, and for some of those that will represent a cure.**

The NHS England Long Term Plan has set a target of 75% of all cancers to be diagnosed at an early stage (stage 1 or 2) by 2028. One key to unlocking this aspiration is through early diagnosis of cancer.

If achieved, this will both improve outcomes and

save money, as for some cancers, treating cancer at the earliest stage could be up to 73% less expensive compared to treating it at the latest stage<sup>1</sup> – a win-win. To achieve this will require a broad range of approaches, and resourcing. It will require education of both the public and front-line clinicians, smoother investigation and referral pathways, and a larger workforce in both primary care and diagnostics. A classic example of investing money to save money.



CONTINUED ON PAGE 8



*"A networking goldmine..."*

**Head of Growth & Development, Southern Hampshire Primary Care Alliance**

More  
testimonials  
inside...

CONTINUED ON PAGE 4-5

**JOIN THE WAITING LIST!**  
[WWW.BESTPRACTICESHOW.CO.UK/WAITING-LIST-2020](http://WWW.BESTPRACTICESHOW.CO.UK/WAITING-LIST-2020)



Supporters:



Contents

01

NAPC stages best ever conference at Best Practice

01

Making a difference?  
Improving quality and addressing health inequalities in cancer

04

Show Testimonials

06

Sound advice: don't miss our PCN podcasts

06

NAPC to announce successful digital incubation pilot sites

07

Putting rural matters at the heart of the 2019 General Election

08

Vitamin B12 Deficiency-  
Veganism, Health and Wellbeing

09

Reflections of a Speaker at Best Practice

10

Inflammatory Bowel Disease Guidance in 2019

12

Floorplan

Credits

Best Practice Team:

Oliver Parker

Senior Sales Executive

Bogdan Mihalache

Senior Marketing Manager

Laura Shapiro

Group Event Director

Ian Reynolds

Group Show Manager

Richard Wareing

Sales Executive

Contact us:

Exhibition House

Addison Bridge Place

Kensington

W14 8XP

T: 02476 719683

E: bp\_team@closerstillmedia.com

Organised by:

CloserStill

Update your core clinical skills

12 CPD Points

Free high-quality training

Team learning

Incorporating  
NAPC ANNUAL CONFERENCE 2019  
Annual Conference

Best Practice

14-15 October 2020

Birmingham NEC

Incorporating  
DDA DISPENSING DOCTORS' ASSOCIATION  
Annual Conference

This conference is supported by educational grants from various companies who have not influenced the meeting content or the choice of speakers. Sponsors have not had any input into the programme except where an individual session states it's sponsored. The session topic and speaker have been developed by each sponsoring company. By attending these sessions you are agreeing to sponsors receiving your registration data. To revoke consent of your details being shared after your badge has been scanned, please visit Registration. Programme correct at time of print.

# Thank you to our show partners

The British Journal of  
Primary Care  
Nursing

Cardiovascular  
Disease, Diabetes, Stroke,  
Liver and Kidney Care

education for health

PCSG

GP

IndependentNurse

Journal of Community Nursing  
JCN

Nurse  
Prescribing

MONTHLY EDUCATION IN PRESCRIBING AND PHARMACOLOGY

Primary Care Cardiovascular Journal  
PCCJ

Keeping up to date with CVD and diabetes

PRIMARY CARE  
P-CNS  
NEUROLOGY SOCIETY

Family Doctor  
Association  
Member

PMA

Practice Managers  
Association

PracticeNursing

PROMOTING EXCELLENCE IN EDUCATION AND CLINICAL PRACTICE

PRACTICE INDEX

Inspiring progress

2 @BestPracticeUK #BP20





## NAPC Annual Conference 2020 at Best Practice on the 14-15 October 2020 at the NEC, Birmingham

Join us for NAPC20! The 2020 annual conference is an opportunity for people across primary care to come together to connect and find out all the latest that is happening.

We are once again part of Best Practice 2020 at Birmingham's NEC and focusing on practical content and case studies that we hope will inspire you.

You'll hear from some great speakers – including healthcare experts, leaders and peers who're leading the way.

For further details about Best Practice 2020 please [click here](#). We will provide further detailed information about NAPC at Best Practice 2020 and the NAPC annual conference in the near future.

### CONTINUED FROM PAGE 1

led him to set up the Men's Shed - a community group tackling high levels of male suicide in his home town of Fleetwood, Lancashire. In a conference first, delegates had the chance to sing along with the Health and Harmony singing group – one of Healthier Fleetwood Primary Care Home's initiatives aimed at relieving isolation and improving social interaction.

PCNs from across the country offered insights into the different ways they're working to improve mental health resilience in their local communities and schools.

Winners of the NAPC Annual Awards, announced at the conference, included East Cornwall PCN which scooped the PCN of the year title – a new award to reflect the changing primary care landscape in 2019 - and St Austell Healthcare which was named Primary Care Home of the Year.

## Highlights from Best Practice 2019...



**JOIN THE WAITING LIST!**  
[WWW.BESTPRACTICESHOW.CO.UK/WAITING-LIST-2020](http://WWW.BESTPRACTICESHOW.CO.UK/WAITING-LIST-2020)





# Visitor Testimonials

★★★★★

*"There is so much strategy, so much vision encouraging and shaping the new generation of leaders."*

**Catherine Wills, Workforce Programme Lead, Northamptonshire CCG's**

★★★★★

★★★★★

*"The lectures have been excellent...I could have filled the day up 2 or 3 times!"*

**Andrew Marshall, GP Partner / Primary Care Network Director, Newhall Surgery**

★★★★★

★★★★★

*"There is not much direction within the sector at the moment. Best Practice is a great opportunity to combat this- by networking, getting new ideas... The lectures have been really good... I could have filled the day up 2 or 3 times!"*

**Andrew Marshall, GP Partner / Primary Care Network Director, Newhall Surgery**

★★★★★



## BOOK YOUR STAY WITH US AT THE NEC BIRMINGHAM FOR 2020



The Best Practice Show has partnered with Event Express to get Best Practice delegates the best possible rates and booking terms.



**VISIT: [WWW.EVENTEXPRESSUK.COM/E/BEST-PRACTICE-2020](http://WWW.EVENTEXPRESSUK.COM/E/BEST-PRACTICE-2020)**



# Exhibitor Testimonials



*"The footfall has been the best part about this show, it has been very busy, engaging and extremely productive."*

**Marketing Manager,  
Wiggly Amps**



*"Good show, good engagement and good experience!"*

**Sales Manager,  
AT Group**



*"Best Practice is a prime place for us to collect data, build brand awareness and a place to check on our competitors..."*

**Health Partnership Manager,  
Glenmark Pharmaceutical Europe**



## Respiratory Show 2020

### The Integrated Respiratory Care Show

Register your interest here:

 [www.respiratoryshow.co.uk/2020](http://www.respiratoryshow.co.uk/2020)

 **0203 957 6847**

**SAVE THE DATE**  
**14th-15th OCT 2020**

## JOIN THE WAITING LIST!

[WWW.BESTPRACTICESHOW.CO.UK/WAITING-LIST-2020](http://WWW.BESTPRACTICESHOW.CO.UK/WAITING-LIST-2020)





# Sound advice: don't miss our PCN podcasts

**Primary care networks (PCNs) promise to be one of the most exciting developments in primary care in years. Not only do they signal an increase in funding designed to transform the fortunes of general practice, PCNs represent the foundation layer of integrated care services.**

It's a bold plan to create more than 1200 practice networks, which are expected to work with each other and with other provider organisations to increase the range and quality of services available to patients in neighbourhood settings, and end the fragmentation that so often results in frustration and delay.

But it's a fast-moving programme and time is the enemy. Clinical directors, network managers and practice managers involved in PCN development often struggle to keep up with the latest information or to find answers to burning questions.

The PCN project is fast-moving and few of us have the time to keep up. That's why we've started producing a weekly podcast covering the issues we're hearing about in our work with PCNs.

Episodes are typically no more than 10 minutes long – about the length of a GP consultation – and guests include clinical directors, practice managers and others at the coalface of PCN development, plus experts from the PCC team who can comment on issues such as premises, workforce and funding. Since our first episode in May we've had more than 9000 listens.

#### In recent episodes we've talked to:

- **Dr Mark Sanford-Wood**, part of the GPC negotiating team, to put the funding settlement in context
- **Mike Simpson**, a PCC adviser on the role of premises in enabling transformation
- **Dr Mike Smith**, a clinical director in St Albans, about his approach to collaborative working
- **Helen Kilminster**, one of only three clinical pharmacists working as a clinical director
- **Mel Pickup**, an acute trust CEO and STP leader, about the place of PCNs in the wider system.



Our weekly programmes have had more than 9000 listens since we started making them in May. You can listen at [https://soundcloud.com/pcc\\_nhs](https://soundcloud.com/pcc_nhs)

Follow us on Soundcloud to get alerts about the latest episodes. Alternatively subscribe to our weekly newsletter PCN News, which contains briefings about all the latest PCN developments as well as links to the podcast. Sign up on our website – it takes less than a minute and it's free: <https://bit.ly/20GhC4q>

PCC provides personal and team development, consultancy and support to individual practices and primary care networks – [enquiries@pcc-cic.org.uk](mailto:enquiries@pcc-cic.org.uk)

## NAPC to announce successful digital incubation pilot sites

**The National Association of Primary Care (NAPC) will shortly be announcing the first primary care networks chosen to pilot its digital incubation programme.**

The programme, launched at NAPC19, the organisation's annual conference at Best Practice 2019, aims to galvanise digital health innovation in primary care and support primary care networks to embrace and adopt technology that meets the needs of its population and workforce.

The selected PCNs will have the opportunity to work with innovative digital health firms and the NAPC Digital Faculty – a network of specialists in primary care digitalisation – to test and deliver digital health innovations.

NAPC is also inviting digital start-ups, keen to enter or increase their presence in primary care, to apply to take part in the incubation programme.

When applying to become a digital incubation site, PCNs were asked to demonstrate their vision of becoming a digitally-enabled primary care network, including what would make them a good adopter of

innovative health technologies. They had to show how they would secure broad buy-in for new digital health solutions across the PCN, provide examples of previous health technology they have implemented and describe the challenges they faced.

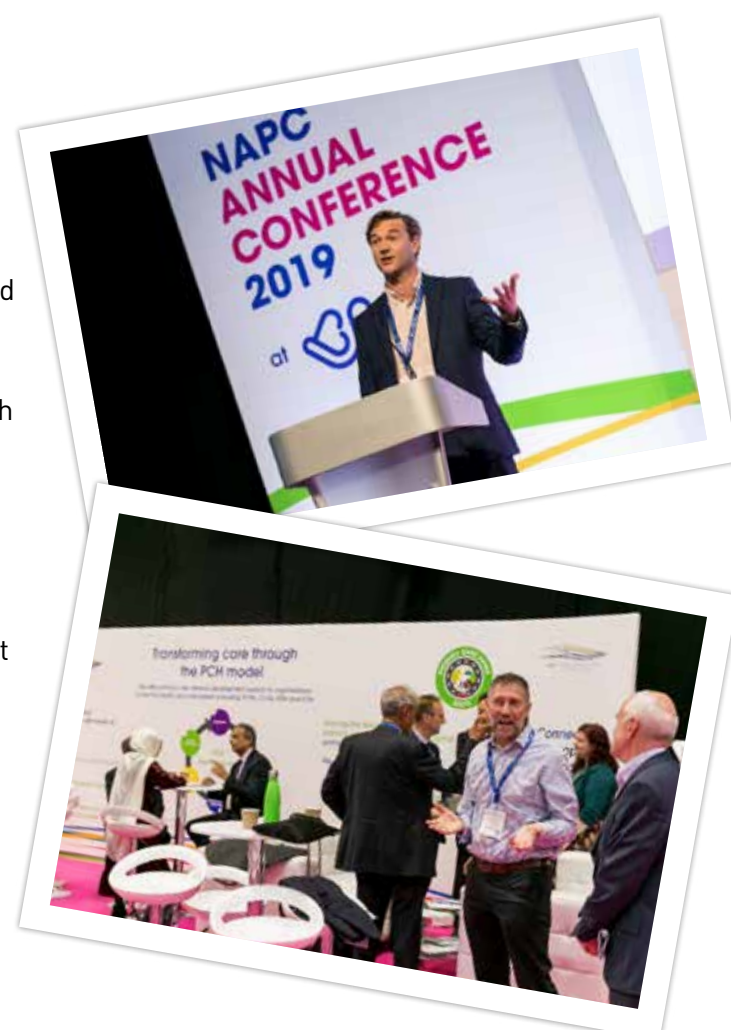
The programme is part of NAPC Digital – an initiative that brings together NAPC's networks with clinical innovators, entrepreneurs and leaders to drive digital transformation across primary care, particularly primary care networks.

NAPC's Director of Strategy Matthew Walker said: "The primary care networks chosen to take part in the programme will receive tailored support in testing and developing technological innovation with the ultimate aim of improving patient care and working practices for staff."

The call for potential incubation sites has generated a big response from PCNs across the country. Other successful applicants will be announced over the coming months following the initial pilot.



**NAPC  
ANNUAL  
CONFERENCE  
2020**



**JOIN THE WAITING LIST!**  
**WWW.BESTPRACTICESHOW.CO.UK/WAITING-LIST-2020**





# Putting rural matters at the heart of the 2019 General Election



**Ahead of the 2019 General Election the Dispensing Doctors' Association issued a Rural Practice Manifesto. Election candidates were invited to work with the DDA to answer the following calls to action:**

1. Involve the DDA in the second phase of the consultation on drug reimbursement, so that dispensing practices and their patients are not disadvantaged when the changes are implemented
2. 'Rural proof' Primary Care Networks (PCNs) and support the call for an updated rural NHS funding formula that recognises the increased costs of delivering a robust and resilient health service in rural areas
3. Protect the unique rural GP one-stop-shop service that improves people's access to scarce healthcare resource
4. Recognise that rural medical practices are the hub of their local communities, offering traditional family doctor GP services, creating skilled jobs for local people, and reducing social isolation
5. Lobby for urgent improvements to the rural infrastructure, particularly, public transport and broadband
6. Recognise that dispensing income is vital for the sustainability of high quality rural general practices

Unrelenting pressure on dispensing margins and the search for 'efficiencies' within GP dispensing services were among the challenges raised by the Dispensing Doctor's Association at the 2019 Best Practice conference and exhibition. A carefully selected mix of political thought-leadership and practical tips and hints for dispensing, the DDA's 2019 annual conference covered topics affecting dispensing practices such as the establishment of Primary Care

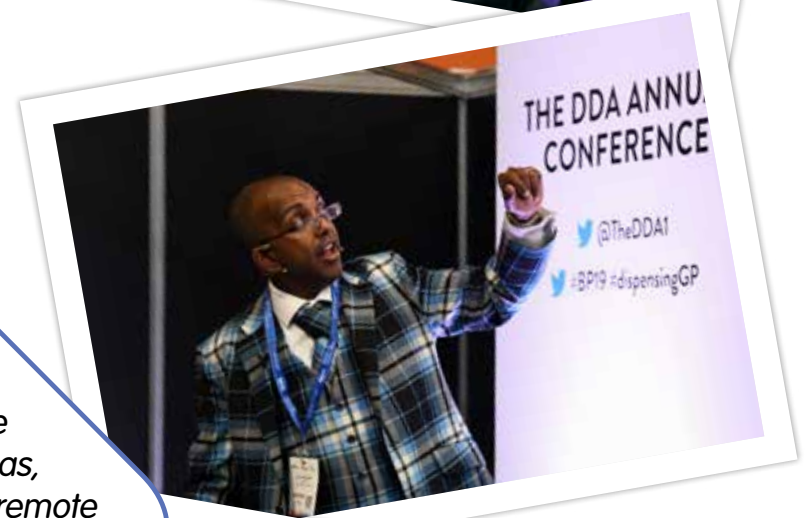
Networks in England, the threat of Amazon to the medicines supply chain, and the reimbursement review and the Treasury's search for dispensing efficiencies. Popular 'practical dispensary' presentations included Dr Philip Koopowitz's look at the factors affecting dispensary profitability and the insight into practical dispensary management provided by Garstang Medical Centre dispensary manager Fiona Doddrell.

The DDA's 2019 Election Manifesto has been designed to alert candidates from all parties, and their communities, to the importance of dispensing GP practices. They are the hub from which health and social services should be delivered in the future and, if local health economies are not to be destabilised further, they must be preserved and invested in over the next five to ten years.



*"The DDA Annual Conference, hosted alongside Best Practice, is a great opportunity for dispensing and rural GPs to come together to get up to date with the ever-changing political and administrative agendas, find solutions to the problems of delivering rural and remote general practice and to network with colleagues in an informal and non-challenging environment. We look forward to meeting members and colleagues in dispensing practice at our 2020 event"*

**Matthew Isom, Chief Executive,  
Dispensing Doctors' Association**



**JOIN THE WAITING LIST!**  
**WWW.BESTPRACTICESHOW.CO.UK/WAITING-LIST-2020**





Investment and evolution: A five-year framework for GP contract reform to implement The NHS Long Term Plan – published in January 2019 by NHS England set out plans for the GP contract to focus on the early diagnosis of cancer from April 2020. At the time of writing, we are eagerly awaiting the details of the QOF Quality Improvement module for 2020-2021, and the Primary Care Network (PCN) specification, but know they both recognise the central role that GPs play in diagnosing cancer earlier. With a focus on screening uptake, referral practice, audit and safety netting, they encourage quality improvement at individual practice level, as well as across the Primary Care Network (PCN) and wider system.

The 2020 Best Practice conference provides an invaluable opportunity for GPs and PCN Clinical Directors to access further information and support from Cancer Research UK, to help them fulfil the GP contract requirements. Dr Pete Holloway, a CRUK GP and PCN Clinical Director in Suffolk says, “CRUK has a wealth of expertise and experience in both promoting early diagnosis and primary care engagement, so is ideally placed to help GPs and PCNs deliver their cancer agenda.” We would encourage you to register for your place at the earliest opportunity.

In the meanwhile, GPs can benefit from a number of free training and support opportunities from CRUK. North Tyneside CRUK GP, Dr Katie Elliott, recommends Cancer Research UK Facilitator Teams who can help local primary care professionals carry out quality improvement activity to improve cancer early diagnosis and prevention.

For those who prefer on-line information, or are short of time, we also recommend the following which CRUK has developed with the RCGP:

- Primary Care and Cancer Matters: the essentials - short videos
- E-learning module on Early Diagnosis of Cancer
- E-learning screencasts on QI
- The QI Toolkit for Early Cancer Diagnosis

Additionally, taking part in the National Cancer Diagnosis ‘deep-dive’ Audit is a rewarding quality improvement exercise. Dr Sadaf Haque, CRUK GP for Somerset Wiltshire Avon & Gloucestershire Cancer Alliance, says “As a practice, our tailored reports allow benchmarking against a similar practice group. They help us reflect on our patient pathways to cancer diagnosis, identify challenges with health inequalities, examine where there was avoidable delay and identify other opportunities where we can influence, such as implementing team process changes with safety-netting and robust



recording. This will also help our PCN focus on the Early Diagnosis Service Specification from 2020.”

**To keep abreast of these opportunities and the available support, please follow us at @CRUKHCPs or visit our hub at [cruk.org/GPcontract](http://cruk.org/GPcontract) when it goes live from February.**

## REFERENCES

- <sup>1</sup> [http://www.cancerresearchuk.org/sites/default/files/saving\\_lives\\_averting\\_costs.pdf](http://www.cancerresearchuk.org/sites/default/files/saving_lives_averting_costs.pdf) Accessed 4.12.19

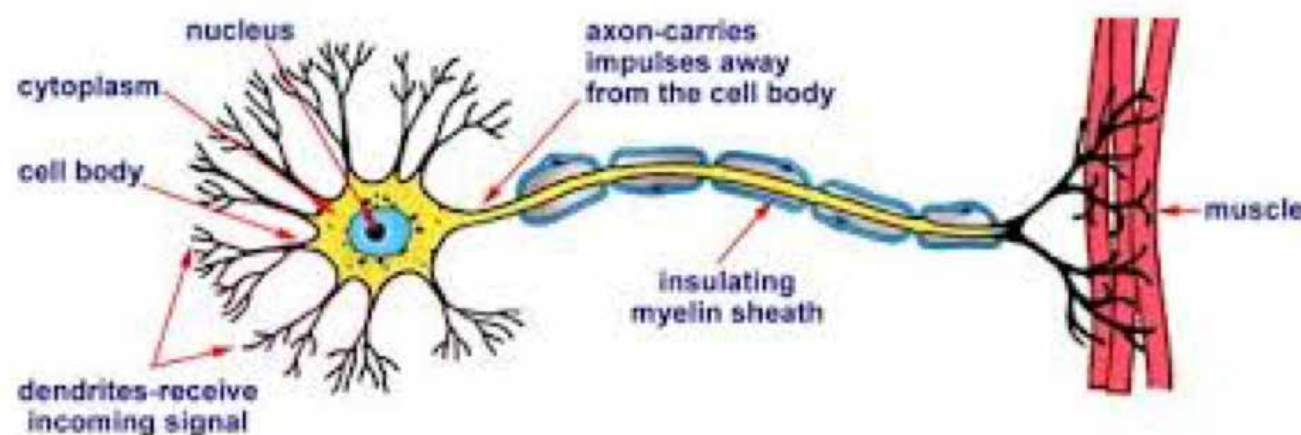
# Vitamin B12 Deficiency- Veganism, Health and Wellbeing



As we begin a new decade and a new year it's time to reflect and set some goals for the upcoming year. Perhaps you will allow me to enlighten you to the benefits of Vitamin B12 supplementation. Professor Tim Key from Oxford, Professor Tom Sanders from King's College London and Professor Janet Cade University of Leeds, have highlighted the importance of this vital vitamin for Vegans and those who do not eat animal products ([www.sciencemediacentre.org/veganism-and-health-is-meat-free-always-healthy/](http://www.sciencemediacentre.org/veganism-and-health-is-meat-free-always-healthy/)).

The number of Vegans in the UK have quadrupled to over 600,00 and rising, we must ensure that B12 deficiency is not missed in this important group of people. However, it is not only Vegans who are at risk, older people and those who have had gastric surgery, those with ulcerative colitis and Crohn's disease and neurological symptoms.

Apart from Dietary issues Vitamin B12 deficiency is often caused by a loss of activity in cells in the stomach (parietal cells) they excrete protein called Intrinsic Factor (IF). Younger people can have autoimmune disease that form antibodies which destroy the intrinsic factor. As we age, we also produce less hydrochloric acid and this can also be a cause of deficiency especially in older people. 'B12 deficiency is more common after the age of 60 and, once levels fall below 500 pg/ml (picograms per millilitre — the normal range being 500 to 1,000), the brain starts to deteriorate at twice the usual rate, making memory loss six times more likely."



David Smith, Professor Emeritus of Pharmacology at Oxford University. <https://www.bbc.co.uk/news/health-11232356>. [Many patients wait years for a proper diagnosis.](#)

Many doctors have been saying for decades – we have underestimated the role that vitamin B12 plays in our general wellbeing. Vitamin B12 deficiency can cause a condition known as pernicious anaemia (PA). This is identified by blood tests and contrary to what was previously thought, B12 deficiency can occur in the absence of enlarged red blood cells (megaloblastic anaemia). Vitamin B12 deficiency symptoms include: Foggy thinking, lack of concentration, Pins and Needles, Mood Swings and Memory Loss. See [www.b12d.org/admin/healthcheck/diagnosticcalculator](http://www.b12d.org/admin/healthcheck/diagnosticcalculator). If untreated it can cause irreversible nerve damage.

- Vitamin B12 is needed for the brain and nervous

system every neurone requires the myelin sheath (a fatty layer that insulates nerves) for the neurone to function.

- Vitamin B12 is essential for the integrity of the myelin sheath and also for the formation of neurotransmitters.

## Mental Health and B12 Deficiency

Contrary to accepted belief, the presenting symptoms are frequently neurological or neuropsychiatric and only rarely haematological

Homocysteine is a bad mood chemical which rises with lack of B12. High homocysteine (hyperhomocysteinemia), can contribute to arterial damage and blood clots in your blood vessels. High



levels usually indicate a deficiency in vitamin B-12 or folate. [Studies have found that increased depression and anxiety may be positively associated with higher serum homocysteine levels in older boys.](#)

Over past 35 several surveys have shown a high incidence of folate deficiency in psychiatric populations, [especially in those with depression.](#)

In conclusion more research is required to review the links between neuropsychiatric and neurological symptoms and B12 deficiency. Drs and other healthcare professionals need educating on signs and symptoms of B12 deficiency and outdated references ranges need to be reviewed. We should encourage those who do not eat animal produce to supplement with B12. Sources available are B12 tablets, B12 mouth sprays, Sublingual tablets and Transdermal B12 Patches.

For those with Pernicious anaemia and those who cannot tolerate or absorb the methods above then they require Vitamin B12 Injections. Should we empower patients to self-manage B12 deficiency by giving them a choice to self-inject? Diabetic patients administer their own insulin. Patients also administer their own anticoagulants so maybe it's time for healthcare professionals to teach self-injection. This would save on GP appointment times, save on resources such as Practice nursing time and give patients a choice.

## ABOUT THE AUTHOR

Annie Barr is the Clinical Director at AB Health Group based in North East of England. Annie was the former RCGP representative for Nursing (North East Faculty) for 6 years. Annie is also chair of Best Practice in Nursing. Annie was awarded an MBE for her services overseas in Healthcare Export. Annie is passionate about training, raising standards in healthcare and health and wellbeing. Annie has also developed her own brand of Vitamin B12 Transdermal Patches.

## REFERENCES

- <https://pernicious-anaemia-society.org>
- <https://www.ncbi.nlm.nih.gov/pubmed/24732991>
- <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5566365/>
- <https://www.sciencedirect.com/science/article/abs/pii/S016503279090093N?via%3DIhuh>
- Chandy, Dr J, and Minney, Dr H (2019) "Vitamin B12 Deficiency in Clinical Practice: "Doctor, you gave me my life back!" Available on Amazon B12 in Clinical Practice
- Key, T, Professor Saunders, Prof T, and Cade Prof J, 2019 <https://www.sciencemediacentre.org/veganism-and-health-is-meat-free-always-healthy/>
- Smith, A. D., Refsum, H., Bottiglieri, T., Fenech, M., Hooshmand, B., McCaddon, A., Miller, J. W., Rosenberg, I. H., & Obeid, R. (2018). Homocysteine and Dementia: An International Consensus Statement. *Journal of Alzheimer's Disease*, 62(2), 561-570. doi:10.3233/JAD-171042. Available from: <https://www.ncbi.nlm.nih.gov/pubmed/29480200>; <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5836397/pdf/jad-62-jad171042.pdf>; <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5836397/pdf/jad-62-jad171042.pdf>
- Smith, A. D., Refsum, H., & Jacoby, R. (2016). Evidence-based prevention and treatment of dementia. *Lancet Neurology*, 15(10), 1005-1006. doi:10.1016/S1474-4422(16)30074-6. Available from: <https://www.ncbi.nlm.nih.gov/pubmed/27450472>
- Smith, A. D., Smith, S. M., Jager, C. A. d., Whitbread, P., Johnston, C., Agacinski, G., Oulhaj, A., Bradley, K.
- M., Jacoby, R., & Refsum, H. (2010). Homocysteine-Lowering by B Vitamins Slows the Rate of Accelerated Brain Atrophy in Mild Cognitive Impairment: A Randomized Controlled Trial. *PLoS One*, 5(9), 10. doi:10.1371/journal.pone.0012244. Available from: <http://www.plosone.org/article/info:doi%2F10.1371%2Fjournal.pone.0012244>
- Smith, D. A., & Refsum, H. (2011). Do we need to reconsider the desirable blood level of vitamin b12? *Journal of Internal Medicine*, epub. doi:10.1111/j.1365-2796.2011.02485.x. .



# Reflections of a Speaker at Best Practice

**I've been attending Best Practice as a delegate and a speaker for many years but 2019 looked a little different. My colleagues from the Association of Respiratory Nurse Specialists ([www.arns.co.uk](http://www.arns.co.uk)) had the stand right outside the new 'Respiratory Show' theatre and a quick look at the agenda showed that we were in prime position to see the array of top class speakers arriving to deliver their sessions. I was able to nip backward and forwards between my own sessions to listen to speakers in this and other theatres on a wide range of subjects. I am always delighted with the breadth of subjects on offer and enjoyed hearing from colleagues on a range of key topics, including heart failure, atrial fibrillation, musculo-skeletal conditions and neurology, as well as the respiratory sessions throughout the two days.**

I had my diabetes and cardiovascular head on as a speaker and was representing the Primary Care Cardiovascular Society ([pccsuk.org](http://pccsuk.org)) in sessions on the cardiovascular and renal aspects of diabetes, the role of injectable therapies in diabetes care, the newly updated NICE guidelines for hypertension. I thoroughly enjoyed chairing the diabetes theatre and it was a particular honour to chair Professor Melanie Davies who helped to develop the American Diabetes Association/ European Association for the Study of Diabetes (ADA/EASD) consensus statement on the management of hyperglycaemia.

This statement has revolutionised the approach that many clinicians are now taking to improving glycaemic control in people with type 2 diabetes as it takes a very person-centred approach. The consensus statement focuses on lifestyle interventions and drug therapies for raised blood sugar levels based on the patient profile. Although metformin remains first choice for treating hyperglycaemia, the first and second intensifications of treatment will depend on whether that individual has a history of established cardiovascular disease, is renally impaired, is overweight, has heart failure or needs to avoid hypoglycaemia as a priority. Recognising that the ADA/EASD statement is an international document, there is also a section for health economies where cost is, unfortunately, the primary concern. In this latter group, sulfonylureas and pioglitazone are noted to be appropriate choices but in the other categories both the SGLT2 inhibitors and the GLP-1 receptor agonists (GLP1-RA) were seen to be the preferred options. With several studies reporting on cardiovascular and renal outcomes, there was much to discuss in the injectables session and the renal issues in diabetes session.

The CREDENCE study was a good place to start when it came to renal outcomes trials. The CREDENCE study, which was stopped early based on a planned interim analysis and on the recommendation of the safety committee, showed that using 100mg of canagliflozin, an SGLT2 inhibitor, reduced the risk of end-stage kidney disease or death from renal or cardiovascular causes by 30% when compared with placebo. Diabetic nephropathy has a significant impact on patients, their families and resources so any drug which slows the progression of renal complications is going to create interest and there was much to discuss in the question and answers session at the end, not least with regard to prescribing off licence. Other studies have positive renal signals and specific studies will report in the near future.

This was an exciting conference to attend and my only regret as a speaker and chair was that I didn't have more time to attend more sessions! Best Practice provides an excellent opportunity to consolidate new learning about a wide range of subjects, to hear from key opinion leaders who are at the top of their field and also to network with colleagues from around the UK. I'm already looking forward to 2020!

## FURTHER READING

- ADA/EASD (2018) Management of Hyperglycemia in Type 2 Diabetes, 2018. A Consensus Report <https://care.diabetesjournals.org/content/41/12/2669>
- Gerstein HC et al (2019) Dulaglutide and cardiovascular outcomes in type 2 diabetes (REWIND): a double-blind, randomised placebo-controlled trial. *Lancet*. 2019 Jul 13;394(10193):121-130. doi: 10.1016/S0140-6736(19)31149-3.
- Mc Murray JJV et al 2019 Dapagliflozin in Patients with Heart Failure and Reduced Ejection Fraction DOI: 10.1056/NEJMoa1911303
- Marso SP et al (2016a) Liraglutide and Cardiovascular Outcomes in Type 2 Diabetes *N Engl J Med* 2016; 375:311-322
- Marso SP et al (2016b) Semaglutide and Cardiovascular Outcomes in Patients with Type 2 Diabetes *N Engl J Med* 2016; 375:1834-1844 DOI: 10.1056/NEJMoa1607141
- Neal B et al (2017) Canagliflozin and Cardiovascular and Renal Events in Type 2 Diabetes *N Engl J Med* 2017; 377:644-657 DOI: 10.1056/NEJMoa1611925
- NICE 2019 Hypertension guidance <https://www.nice.org.uk/guidance/ng136>
- Perkovic V et al (2019) Canagliflozin and Renal Outcomes in Type 2 diabetes and Nephropathy *NEJM* 380:2295-2306 DOI: 10.1056/NEJMoa1811744
- Wiviott et al (2019) Dapagliflozin and Cardiovascular Outcomes in Type 2 Diabetes *N Engl J Med* 380:347-357 DOI: 10.1056/NEJMoa1812389
- Zinman et al (2015) Empagliflozin, Cardiovascular Outcomes, and Mortality in Type 2 Diabetes *N Engl J Med* 2015; 373:2117-2128 DOI: 10.1056/NEJMoa1504720



# Inflammatory Bowel Disease Guidance in 2019



An update from Dr Kevin Barrett, Primary Care Society of Gastroenterology

**Inflammatory Bowel Disease (IBD) is a lifelong relapsing-remitting condition affecting 500,000<sup>1,2</sup> people in the UK. IBD predominantly causes inflammation and ulceration in the bowels, with extra-intestinal symptoms in the joints, skin, eyes and liver. IBD can have a significant impact on relationships, work and education.<sup>3</sup>**

2019 has seen the release of five significant sets of updated guidance to help clinicians manage, diagnose and support their patients with IBD:

1. NICE NG129 - Crohn's disease: management<sup>3</sup>
2. NICE NG130 - Ulcerative Colitis: management<sup>4</sup>
3. The British Society of Gastroenterology Guidelines on the Management of Inflammatory Bowel Disease in Adults<sup>5</sup>
4. The RCGP and Crohn's and Colitis UK Spotlight Project Flare Pathways<sup>6</sup>
5. The IBD Standards<sup>7</sup>

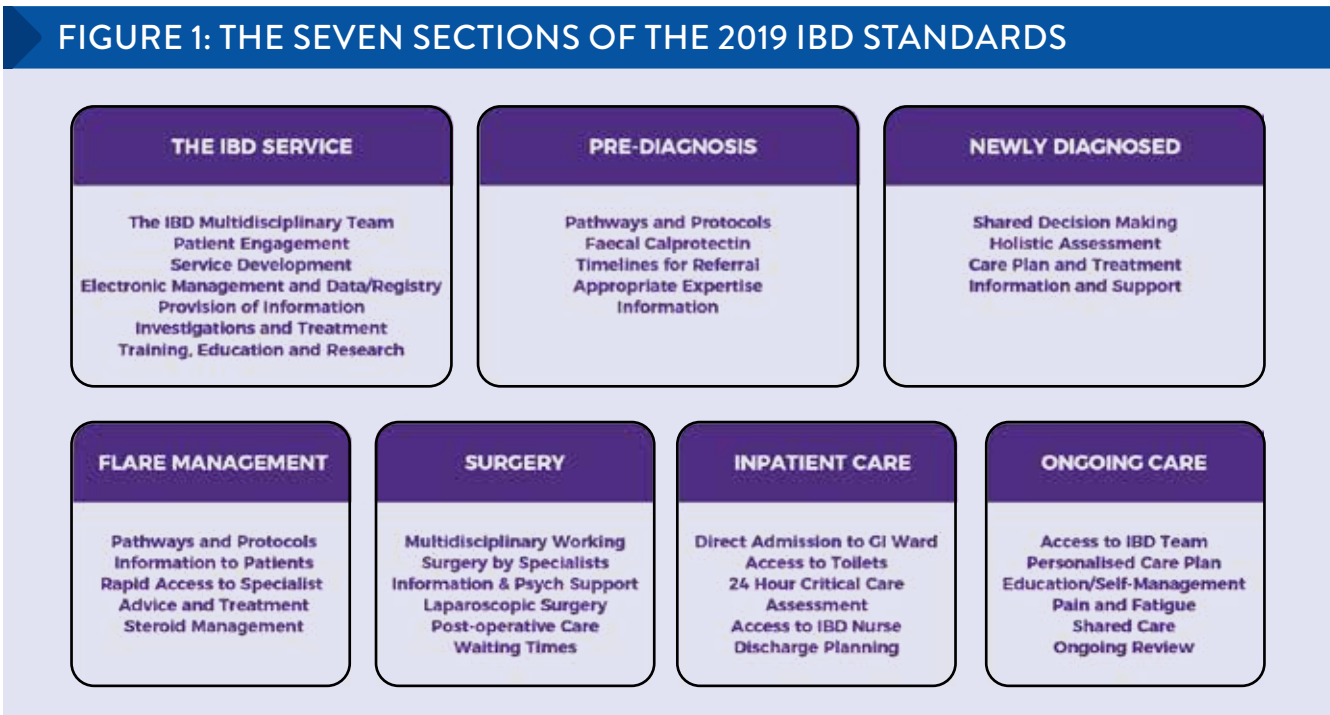
### BSG IBD Guideline

The British Society of Gastroenterology (BSG) released the latest revision to the Consensus Guidelines on the Management of IBD in Adults in June of 2019 and this reflects major advances in investigations and interventions for both IBD. The evidence for the use of biologic medication has progressed and these drugs are being used at an earlier stage of disease. Much of the content is very relevant to primary care, including:

1. Diagnosis
2. Flare management and prevention of corticosteroid-induced osteoporosis
3. Ongoing medical management
4. Supporting patients
5. Investigation of other symptoms
6. Pregnancy
7. Vaccination
8. Colorectal cancer surveillance

### Flare Pathways

The RCGP and Crohn's & Colitis UK IBD Spotlight Project was launched in 2017, with the aim to increase understanding of IBD amongst primary care clinicians. Now in its third year, the project is has been focusing on flare management as around 50% of patients experience at least one relapse a year, and it costs the NHS two to three times more to treat patients in a flare compared to those in remission.<sup>8</sup> Potentially life-threatening complications can occur during severe flares. When patients have a suspected flare, they often visit their GP. Despite this, 52% primary care clinicians are less than confident or not confident in managing flares according to the Spotlight Project



survey of 525 GPs and GP trainees carried out in April 2017. To build confidence and support GPs with flare management, a project group of patients, GPs, IBD Nurse Specialists and gastroenterologists was set up to co-create pathways based on NICE, BNF, and European Crohn's and Colitis Organisation (ECCO) guidance. These have been endorsed by the British Society for Gastroenterology, the Primary Care Society for Gastroenterology and the Royal College of General Practitioners. They are available to view or download on the RCGP and Crohn's & Colitis UK IBD Spotlight Project Toolkit [www.rcgp.org.uk/ibd](http://www.rcgp.org.uk/ibd).

In addition to flare management, the IBD Spotlight Project Toolkit provides advice on diagnosis, nutrition, psychological support, anaemia, fatigue, fertility, immunisation, and contraception for patients with IBD. The Toolkit also signposts to patient organisations including [Crohn's & Colitis UK](http://Crohn's & Colitis UK) and [CICRA](http://CICRA) for further information on all aspects of the disease and support and resources for healthcare professionals and patients.

### IBD Standards

Alongside the creation of the Flare Pathways, 2019 has seen the launch of new [UK IBD Standards](http://UK IBD Standards), which set out what good care looks like at all stages of the patient journey, from first symptoms to ongoing care. The IBD Standards were first created in 2009 to define what was required to provide integrated, high quality IBD services. Updated in 2013, they now underpin the 2015 NICE quality standard on IBD.<sup>9</sup> IBD UK, a body of 17 professional and patient organisations, including the Primary Care Society for Gastroenterology and Crohn's & Colitis UK, was formed in 2017 with a key priority to update and build on the IBD Standards and ensure

implementation throughout the UK. The updated 2019 IBD Standards comprises 59 statements, divided into seven sections. 22 statements have an impact on primary care and the relationship between primary and secondary care (Figure 1).

### 2020 and beyond

These publications will enable all those involved in the care of patients with IBD to work towards consistent high-quality care throughout the UK.

**REFERENCES**

1. Hamilton B, Heerasing N, Hendy PF, et al. PTU-010 Prevalence and phenotype of IBD across primary and secondary care: implications for colorectal cancer surveillance. Gut 2018;67:A67-A.
2. Jones G, Lyons M, Plevris N, et al. DOP87 Multi-parameter datasets are required to identify the true prevalence of IBD: The Lothian IBD Registry (LIBDR). Journal of Crohn's and Colitis 2019;13:S082-S3.
3. NICE. Crohn's disease: management. NICE Guideline 129, 2019. Available at: [nice.org.uk/ng129](http://nice.org.uk/ng129)
4. NICE. Ulcerative colitis: management. NICE Guideline 130, 2019. Available at: [nice.org.uk/ng130](http://nice.org.uk/ng130)
5. Lamb CA, Kennedy NA, Raine T, et al British Society of Gastroenterology consensus guidelines on the management of inflammatory bowel disease in adults Gut 2019;68:s1-s106.
6. <https://www.rcgp.org.uk/clinical-and-research/our-programmes/clinical-priorities/spotlight-projects-2019-to-2020/inflammatory-bowel-disease.aspx>
7. Kapasi R, Glatter J, Lamb CA, et al Consensus standards of healthcare for adults and children with inflammatory bowel disease in the UK Frontline Gastroenterology Published Online First: 24 July 2019. doi: 10.1136/flgastro-2019-101260 Ghosh N, Premchand PA UK cost of care model for inflammatory bowel disease Frontline Gastroenterology 2015;6:169-174.
8. NICE. Inflammatory bowel disease. Quality Standard 81. NICE, 2015. Available at: [www.nice.org.uk/qs81](http://www.nice.org.uk/qs81)

## JOIN THE WAITING LIST!

[WWW.BESTPRACTICESHOW.CO.UK/WAITING-LIST-2020](http://WWW.BESTPRACTICESHOW.CO.UK/WAITING-LIST-2020)



# SURGERY CONNECT

Cloud-based GP phone system  
tailored to meet the growing  
communication and collaboration  
needs of GPs and PCNs

Clinical system integration  
Optional built-in video  
Extended hours platform

## Primary Care Networks

Scalable Phone & Video Communication

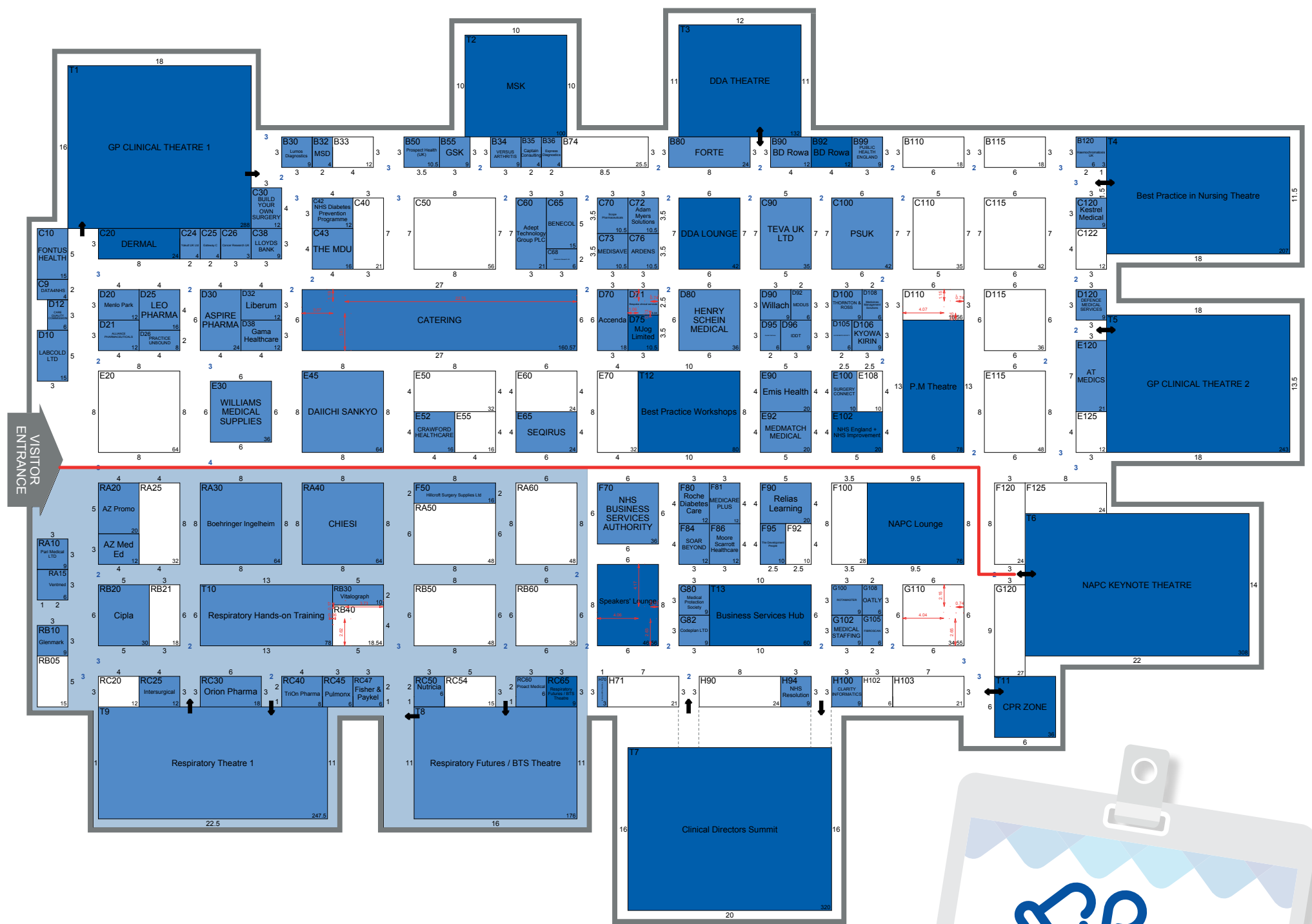
**X·cn**  
GOOD CALL

**0333 332 0000**  
[PCN.SURGERYCONNECT.CO.UK](http://PCN.SURGERYCONNECT.CO.UK)



# BIGGER. BUSIER. BETTER.

Best Practice 2020 • 14 - 15 October 2020



If you wish to enquire about this year's show, please contact Oli on 02476 718 567 or email [bp\\_team@closerstillmedia.com](mailto:bp_team@closerstillmedia.com) to put your company and products in front of the UK's most influential figures in primary care.



## Witness the best moments of Best Practice 2019

Visit our YouTube Channel today!

