



SALI – SIGNIFICANT ANKLE LIGAMENT INJURY - NOW RECRUITING IN THE ED

This study is being funded by Arthritis Research UK and looks at incidence and risk factors for poor ankle functional recovery, and the development and progression of post-traumatic ankle osteoarthritis (OA) after significant ankle ligament injury. Patients will be identified in Minor Injuries by the Emergency Nurse Practitioners (ENP) or the treating clinician. Study participants will be followed up for a series of 15 years with questionnaires serially sent to participants at seven different time-points. The questionnaires will ask participants about their overall physical and specific joint health. The study aims to recruit 5000 patients across three sites over an 18 month period, to get a better understanding of why some people who have an ankle injury go on to develop osteoarthritis, and why others don't. The data collected will be used to help develop guidelines for the prevention and treatment of ankle injuries related to osteoarthritis.

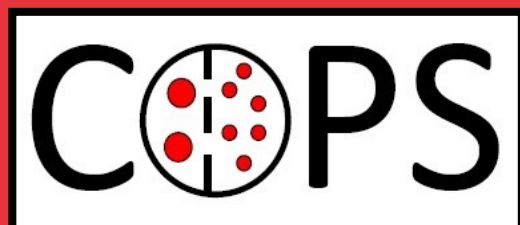
Objectives

1. To identify the prevalence and risk factors for incomplete recovery of full and normal function, poor patient reported outcome measures - post significant ankle ligament injury.
2. To identify the incidence, and individual risk factors for the development of ankle OA following significant ankle injury.



This study will involve working closely with care providers in Exam – who can help by letting us know of any ankle injuries which are Ottawa positive – with non-bony injuries.

Julia Grahmslaw



CALCULATING OSMOTIC PRESSURE IN HEALTHY PATIENTS (COPS)

EMERGE and RRG are undertaking a preliminary study into the principles of fluid exchange within the body. In 1896, Ernst Starling suggested that fluid balance and exchange resulted from the interaction of two pressures in the capillary. RRG's own Frank Prior, suggests a different mechanism of fluid balance and exchange. The Prior Hypothesis is based on the pulsatile nature of capillary flow and the inverse relationship between osmotic pressure and pore size. Results from healthy patients will build on previous work and could lead to individualised treatments for patients in shock.

For more information on either of these studies, please call ext. 23863 or speak to one of the EMERGE Research team

EMERGE TWITTER UPDATES

Here's what we've been up to on social media over the past few months...



As part of the EMERGE team bake off, Research Administrator Emma made gingerbread versions of the whole team! We're sure Paul and Mary would approve...



The iconic EMERGE tote bag has been travelling around the world again, this time to Paris where it took in all the sights. Here it is, soaking up the sun at the Musée du Louvre.



Kirsty Simpson and Emma Ward were lucky enough to bump into Alan Cumming whilst volunteering for Save a Life for Scotland at the Royal Edinburgh Military Tattoo. He even tweeted and instagramed this selfie to promote the cause.

NEW TEAM MEMBER

Hedda Nyhus recently started as a Research Nurse with EMERGE, here's her story...



Hedda obtained her Bachelors in Nursing Science from the University of Oslo and has eight years of clinical experience encompassing emergency medicine, acute gynaecology/obstetric care and tropical medicine.

Drawing on her experience working in acute care, interest in clinical research and the ambition to work within the humanitarian sector - she completed her Master's Degree in International Health in 2014. Following this she worked as an Emergency Nursing Advisor for the King's Sierra Leone Partnership in Sierra Leone, before joining the EMERGE team this autumn.

Hedda is delighted to have been given the opportunity to work in a research active role - being able to learn more about research in the ED setting, as well as getting to know and learn from enthusiastic and motivated nurses and clinicians. She is new to the NHS, and looks forward to embarking on new challenges.


GOODBYE & GOOD LUCK

Unfortunately this quarter, EMERGE has had to say goodbye to two very well-loved research nurses. Kirsty Simpson started with EMERGE in 2014 and has had success coordinating the PATCH-ED Trial. Kirsty has now taken up a full time Acute Nurse Practitioner post in RIE's ED, so we're glad she'll still be in the building!

Jill Steven joined the team in 2015 and since then has been very productive, recruiting predominantly for the 4AT trial. Jill is now working at the Centre for Dementia Prevention as a Lead Research Nurse.

Thank you both for your hard work and dedication, and good luck in your new roles.

RAPID CTCA RECRUITMENT UPDATE

	NO. OF PATIENTS RECRUITED - EDINBURGH	NO. OF PATIENTS RECRUITED - REST OF UK	NO. OF PATIENTS RECRUITED - TOTAL
January	0	35	35
February	5	43	48
March	7	37	44
April	1	50	51
May	5	40	45
June	4	63	67
July	3	39	42
August	3	53	56
September	4	47	51
Total	32	407	439

Across all sites, RAPID CTCA has successfully recruited 691 patients so far.

STUDY INFORMATION - WHAT YOU CAN DO TO HELP

Study	Clinical condition	Patient group	How can you help?
 <p>Haemorrhage alleviation with tranexamic acid - Intestinal system</p>	Significant upper or lower GI bleeding	<ul style="list-style-type: none"> Hypotension/tachycardia Likely to need transfusion For urgent endoscopy or surgery 	Highlighting patients, confirming eligibility, prescribing drug and recruiting out of office hours
	Traumatic haemorrhage patients	<ul style="list-style-type: none"> The participant is judged to be an adult (16 years or over) and is affected by traumatic injury The participant is deemed by the attending clinician to have on-going haemorrhagic shock <p>AND REQUIRES</p> <ul style="list-style-type: none"> Activation of the local major haemorrhage protocol for management of severe blood loss 	Highlighting patients, informing research team if code red or haemorrhage protocol has activated, confirming eligibility, waiver consent and prescribing drug
	Intracerebral haemorrhage	<ul style="list-style-type: none"> Patients who have had onset of symptoms in past 8 hours 	Highlighting patients, confirming eligibility, prescribing drug
	Long bone fracture/dislocation	<ul style="list-style-type: none"> All adult and paediatric patients attending with confirmed isolated long bone fracture and/or dislocation. 	Be aware of the posters about POEM displayed in all areas in the ED - direct patients to the EMERGE Research Nurses if they have any questions.
	Palpitations or pre-syncope	<ul style="list-style-type: none"> Episodes of palpitation or pre-syncope Underlying ECG remains undiagnosed after assessment Patients with compatible smartphone 	Highlighting patients, confirming eligibility
	Chest pain	<ul style="list-style-type: none"> Anyone having a troponin sent 	Highlighting patients who have a troponin sent
	Suspected or confirmed ACS	<ul style="list-style-type: none"> ECG changes not in keeping with high risk History of Ischemic heart disease Raised troponin 	Highlighting patients, confirming eligibility, prescribing beta blockade if necessary
	Patients vulnerable to delirium	<ul style="list-style-type: none"> Patients aged 70 or above Patients vulnerable to delirium (old, frail, known cognitive impairment) Brought in by ambulance or via GP referral 	Highlighting patients, particularly those who may have delirium and/or cognitive impairment <i>and</i> are accompanied by a relative, confirming eligibility
	Patients presenting after an episode of syncope - defined as transient loss of consciousness and spontaneous recovery without medical intervention	<ul style="list-style-type: none"> Patients aged 16 or above Presenting within 6 hours of syncope Patients with unexplained cause of syncope after ED assessment 	Highlighting patients, confirming eligibility

RESUSCITATION RESEARCH GROUP

All the latest updates from the RRG...

PIPES, DRUMS AND CPR!

Save a Life for Scotland at The Royal Edinburgh Military Tattoo

Thousands of visitors to one of Scotland's biggest events had the chance to learn life-saving CPR this summer. The Royal Edinburgh Military Tattoo is one of the biggest events in Scotland's tourist calendar, drawing an audience of around 220,000 people over its three week run.

This year, Save a Life for Scotland offered free CPR coaching sessions at The Royal Edinburgh Military Tattoo every night from 5 to 27 August with volunteers on hand to give one-to-one training.

Come rain or shine partners and supporters volunteered, in their own time, to teach those attending the Tattoo the simple, life saving skill. In all, over 1500 members of the public stopped on the way to

their seats to learn and have a go. Some performers dropped by!

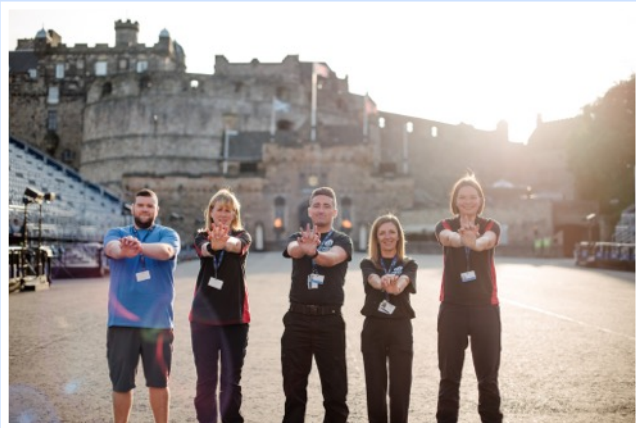
We had massive organisational and training support from EMERGE and the Emergency Department at the Edinburgh Royal Infirmary.

Thanks to all and here's to next year!

Want to find out more and get involved? Visit www.savealife.scot or email lisa@savealife.scot



Lisa MacInnes



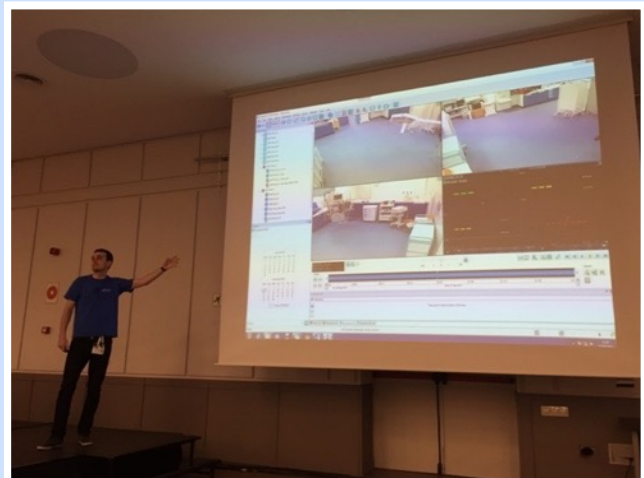
EDINBURGH EMERGENCY NURSING IN BARCELONA

In September 2016, former EMERGE Research Nurse Polly and I attended the 2nd Global Conference on Emergency Nursing and Trauma Care in Sitges (near Barcelona). Over 240 abstracts were submitted from 30 countries and we were privileged to be invited to present three separate pieces of work. These were: '24 hours in A&E: a video analysis of nurses' clinical and non-clinical task performance during live clinical resuscitation episodes', 'It's a silent leadership': an interview and questionnaire study investigating staff conceptualisations of leadership during emergency department resuscitation' and 'Clinical engagement with emergency medicine research'.

The feedback from the international nursing community was overwhelmingly positive. Staff are interested in how our department manages to conduct high-quality research whilst being such a large, busy service. A number of centres from the UK and further afield are particularly interested in our departmental video-audit system. We are currently submitting an article for publication to explain how we achieved this so that other centres can learn from Edinburgh's model.

This could not have been possible without the continued support from the ED staff who have embraced video-audit and research within the department. Formally, support from the Nursing Directorate, Medic One and the University of Edinburgh made presenting at this conference possible.

Adam Lloyd



Quote of the quarter: "If you live the questions, life will move you into the answers." - Deepak Chopra

**For more information on EMERGE and our team please visit
www.emergeresearch.org
Newsletter edited by Emma Ward**