



Issue 34

EMERGE Newsletter

June – Sep 2021

Emergency Medicine Research Group of Edinburgh & Resuscitation Research Group Newsletter

ABC Sepsis Re-Opens for Recruitment



NHS Lothian is the lead site for ABC Sepsis which aims to compare two different fluids; 5% Human Albumin Solution (HAS) and Balanced Crystalloid, in patients with sepsis. This study plans to find out if there is evidence that one fluid is better overall to determine the need for a subsequent, definitive trial.

After recruiting its first few participants the trial was put on hold to review the recruitment and data collection processes. After a brief hiatus and a few minor changes ABC Sepsis is back and already recruiting well! 8 participants have been recruited at the Royal Infirmary to date, but we're always on the lookout for more! If a patient fills the following criteria:

- Patients aged 18 years old or over
- Acute illness due to proven or suspected infection
- NEWS/NEWS2 >5
- Clinician determined that IV fluid is needed within 1 hour of assessment.

Please contact the EMERGE team on 21284 or 21315.

Thanks to the many ED clinicians that have already completed training to support this local led study. For those that have not yet done any training **WE NEED YOUR SUPPORT!** Please complete your ABC sepsis training if you haven't already! Training videos have been sent out via email or see Julia or Alison Williams for on the spot training. Completing the training not only supports CPD it is **vital for the success of this study.**

SHED - An Opportunity to Contribute to Research

The SHED study, being run by Rajesh Chatha and Rory Anderson, is collecting information on patients that present to the Emergency Department with non-traumatic, **acute headaches that have maximal onset within 1 hour**. Acute headaches account for **between 1 and 2 % of all Emergency Department attendances**, a significant proportion of which will have a serious pathology such as a **subarachnoid haemorrhage (SAH)**. It has been suggested in literature that CT imaging is able to exclude SAHs if performed within 6 hours for patients presenting with an acute, severe headache. However, this has not yet been validated in UK populations.

If you are a clinician with a patient that has an non-traumatic, acute headache that is over the age of 18 please consider talking to them about the SHED study. The study is data collection only and uses an opt-out model, you do not need to consent a patient in order for them to be included. We do, however, ask that you complete the inclusion checklist, copies of which are at the EMERGE research desk in the Emergency Department.

Quote of the Quarter

"Research is formalized curiosity. It is poking and prying with purpose." - Zora Neale Hurston. Author, anthropologist, and filmmaker

New Senior Research Nurse - Anna!



EMERGE is very excited to welcome the newest member of the Team - Anna Miell!

Anna is an experienced ED nurse joining us from Oxford, where she spent some time with a local research team and was bitten by the research bug! Her curious mind and positive attitude has meant that Anna has hit the ground running. You might have already seen her in the Emergency Department with the rest of the team, recruiting to our core studies. We're thrilled to have Anna join us and excited to have her do so as we start opening new and exciting trials to recruitment!

Coming soon:

The Randomised Evaluation of early topical Lidocaine patches In Elderly patients admitted to hospital with rib Fractures (RELIEF): feasibility trial.



Trauma in older patients is a significant challenge for healthcare systems, with rib fractures representing the most common non-spinal fracture in older people. Opioid analgesia has been used for years for treatment of rib fractures. **However the elderly population are particularly vulnerable to the side effects of opioid medication**, such as pulmonary complications that often leads to increased morbidity and mortality. Alternatives such as thoracic epidural anaesthesia have been used to reduce these side effects. But require specialist anaesthetic support and intensive monitoring, as well as rarely being available soon after injury.

RELIEF aims to trial the use of non-invasive local anaesthesia in elderly rib fracture patients through topical lidocaine patches. Lidocaine patches are not currently licensed for use in the treatment of rib fractures, but have been used in the treatment of other pain such as shingles.

There have been a small number of studies that have evaluated the use of lidocaine patches for the treatment of rib fractures. None of these have focussed on older patients however, who stand to benefit the most from improved analgesic regimens. This study aims to evaluate the feasibility of the planned recruitment and data collection methods, in order to design a larger investigation into the performance of lidocaine patches in the older population





Researcher of the Quarter goes to...



Scott Morisson

We'd like to thank Scott for for being a great associate PI for RECOVERY! COVID research has slowed, but Scott's helpful attitude and efforts to keep himself available meant that he was able to help with the recruitment of HEAL-COVID and RECOVERY participants. Scott has since moved onto orthopaedics, but we managed to give him some EMERGE swag before he could get away!

EMERGE Study Information – HOW CAN YOU HELP?

Study	Clinical Presentation	Patient Group	How Can You Help?
	Sepsis	<ul style="list-style-type: none"> Patients aged 18 years old or over Acute illness due to proven or suspected infection NEWS/NEWS2 ≥ 5 Clinician determined that IV fluid is needed within 1 hour of assessment. 	<p>Highlighting potential patients to the EMERGE team who will investigate further</p> <p>Ext 21315 or 21284</p> <p>Highlight potential patients to the research team and hand out the study postcards when the research team are unavailable</p>
SHED	Acute Headache	<ul style="list-style-type: none"> Acute, non-traumatic head-ache Maximal onset within 1 hour Patients aged 18 years or older 	
	Acute Kidney Injury	<ul style="list-style-type: none"> Patients aged 16 years old or over Diagnosis of AKI 	
	D-DIMER or CRP required	<ul style="list-style-type: none"> Patients aged over 16 years old D-DIMER or CRP completed 	
	Suspected ACS	<ul style="list-style-type: none"> Patients with troponin results between 5 and the 99th centile (Amber pathway) 	

Research-focused Courses

Unfortunately at the moment the Wellcome Trust are unable to run research courses due to the COVID-19 pandemic however if you want to be research active and complete a Good Clinical Practice course, you can complete the free online RCEM or NIHR GCP courses (links below).

RCEM GCP Course: https://www.rcem.ac.uk/RCEM/Quality_Policy/Professional_Affairs/Research/RCEM/Quality-Policy/Professional_Affairs/Research.aspx?hkey=e822bd01-59ba-4003-9bdb-f9cc3e5a0474

NIHR ICH-GCP Course: <https://www.nihr.ac.uk/health-and-care-professionals/learning-and-support/good-clinical-practice.htm>



Stroke Research Team

Share Stroke Decisions

Development and implementation of Realistic Medicine for severe stroke through Shared Decision Making at The Royal Infirmary of Edinburgh (RIE)






Stroke is a sudden and unexpected event that can leave individuals with major disability. Approximately 1000 people are admitted to RIE each year with a Stroke and 50% of these cases are categorised as severe. Patients and their families are often unprepared to make major treatment decision and significant communication issues can mean that patients are unable to express their own views.

This study will use co-production, audit, and research to explore and improve the shared-decision making process with Stroke patients and their families. We will build on previous work in this area in order to develop a more collaborative approach between patients and professionals which recognises the interpersonal and interdependent nature of shared decision making.

- Co-production with Stroke survivors, relatives and professionals to develop shared decision making framework
- Audit to record implementation of shared decision making and patient outcomes
- Research to gain real-time views of patients and families on the shared decision making process

Professor Gillian Mead is leading the study which we hope to launch in the autumn.

Current Stroke Studies in the Emergency Department

Study	Clinical Presentation	Patient Group	How can you help?
 ATTTEST 2	Ischaemic Stroke	-Patients aged over 18 years old -Less than 4.5 hours after symptom onset -Male or non pregnant females	Highlighting potential patients to the EMERGE team who will investigate further
BRAINED-TBI	Traumatic Head Injury	-Patients aged over 16 years old -Presenting to the ED having sustained a recent traumatic brain injury requiring CT imaging	
	Intracerebral Haemorrhagic Stroke	-Patients aged over 18 years old - Confirmed intracerebral haemorrhagic - less than 12 hours onset	
 INFERENCE	Head, chest, abdomen, pelvis-related presentation requiring radiological investigation	-Patients aged over 16 years old -Present to the hospital with a new onset symptoms related to their head, chest, abdomen or pelvis which requires radiological investigation	Ext 21315 or 21284
 LINCHPIN	Primary Spontaneous Intracerebral Haemorrhage (ICH)	-Patients aged over 16 years old - First ever ICH	
	Acute Stroke (Intracranial haemorrhage or ICH)	- Patients over 66 years old -Less than 24 hours after onset	

#ALifesaverLooksLike Social Media Campaign

In the coming weeks our #ALifeSaverLooksLike campaign will be launched on social media! The campaign aims to push one of the key messages of Save A life For Scotland – everyone can be part of the chain of survival and save a life. We will kick-start the campaign by sharing stories of lifesavers with a diverse range of skills and experiences. Each story will focus on a different part of the chain of survival, and explore how and why the person learnt that lifesaving skill. We will then encourage the general public to get involved by printing off a template hosted on our website, adding their story, and sharing them on social media.

Keep an eye out on social media, and be ready to get involved and share your story! If you have any questions about getting involved please just email diane@savealife.scot.

PADMap Study



RRG has recently been awarded seed funding from the Laerdal Foundation for the research project titled: *PADMap - Developing the requirements for a web portal to facilitate optimal placement of Public Access Defibrillators in communities at highest risk of OHCA using participatory design*. The objective of this project is to develop and test a web portal (PADMap) for making optimal PAD placement locations available to policy makers, charitable organisations and individual community members in order to (i) facilitate increased PAD use by the public after OHCA and (ii) reduce the mismatch between areas at high risk of OHCA and PAD locations. If you place PADs in Scotland and are interested in helping us develop PADMap, please email dlac@ed.ac.uk.

Disability Accessible CPR Project

Our work on creating accessible and inclusive resources around the chain of survival is now underway! To ensure that what we create meets the needs of CPR awareness trainers and Disabled people we have been having conversations with both communities to learn from their experience and expertise. To allow these conversations to be ongoing we have two surveys – one for CPR awareness trainers which can be found [here](#) and one for Disabled people which can be found [here](#), and both can be found attached as word documents. If you are part of either of these groups and have 5 – 10 minutes to share your experiences, we would appreciate you completing the relevant survey.

If you would like a word document version of the survey or if you have any questions about the surveys, or the project as a whole, please get in touch with us at alloyd10@exseed.ed.ac.uk or gmclean5@exseed.ed.ac.uk.

For more information on EMERGE, RRG and our team, please visit www.emergeresearch.org

Or follow us on Twitter [@emerge_research](https://twitter.com/emerge_research)

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