Flu vaccination is therefore especially important in children with asthma and neurological conditions.

Flu (influenza) is a viral infection, which is common in children and sometimes leads to further complications such as chest, throat and ear infections.

Our study looked at the medical records of nearly 17,000 children with flu-like symptoms seen in GP surgeries during the 2009-10 flu pandemic.

1 in 12 developed further complications, mostly within one day of seeing their GP or nurse.

Children with asthma were most at risk of complications from flu.

Children with neurological conditions (e.g. epilepsy) were most at risk of being admitted to hospital.

Careful monitoring and early intervention in these children is also needed to prevent complications from flu.

Flu vaccination is therefore especially important in children with asthma and neurological conditions.

School funded research, led by Kay Wang and Joseph Lee from the University of Oxford, recently published in *Epidemiology and Infection*, recommends that strategies for preventing flu and complications arising from flu in the community should be targeted at children with asthma and neurological conditions. The research looked at risk factors for influenza-related complications in children during the 2009/10 pandemic.

To find out which children are at greatest risk of developing complications from flu, researchers studied data from the medical records of nearly 17,000 children who were seen in a GP surgery with flu-like illness during the swine flu pandemic in 2009-10. They found that:

- Around 1 in 12 children developed further complications from flu, mostly within one day of being seen by a doctor or nurse.
- Children with asthma were at greatest risk of complications from flu requiring treatment in the community or admission to hospital.
- Children with neurological conditions, such as epilepsy, cerebral palsy, and other medical conditions which affect the brain and nerves, were at greatest risk of being admitted to hospital for any reason, not just complications from flu.

Complications from flu were less common in children who were prescribed antibiotics or antiviral medications (such as Tamiflu®) during their first visit to the GP surgery. However, it was not possible to tell whether these medications had a direct effect on preventing complications in these children. Read more: [https://www.spcr.nihr.ac.uk/](https://www.spcr.nihr.ac.uk/)
Yarnfulness

Drs Emma Palmer-Cooper and Anne Ferrey established The Yarnfullness Project in January this year with funding from the University of Oxford’s Engagement Fund. The science engagement and research project, looks at the potential benefits of creative and yarn-based activities. Emma and Anne were recently featured in the UK Handmade Magazine (http://ukhandmade.co.uk/magazine) on pages 26-29.

The School for Primary Care Research would like to welcome Ellie Morgan-Jones who joined us at the beginning of April as part-time Events Officer.

Ellie has been a member of the Department of Primary Care Health Sciences for three and a half years, working on the NIHR Diagnostic Evidence Co-operative (which became the Community Healthcare MedTech in vitro diagnostic co-operative in January 2018) as an administrator encompassing communications, marketing, event organisation and diary management. Ellie will focus on event management for conferences, board meetings, training days and the SPCR showcase.

Rosa Lau, from Primary Care and Population Health at University College London, has successfully completed her SPCR funded PhD titled: Implementation of complex interventions in UK general practice.

Rosa is now working as Public Health Officer at Camden and Islington Public Health, and advising and supporting evaluation of a number of...
Britain’s fat fight with Hugh Fearnley Whittingstall

The University of Oxford’s Professor Paul Aveyard and SPCR doctoral student Charlotte Albury were involved in the filming of the BBC’s ‘Britain’s fat fight with Hugh Fearnley-Whittingstall in November 2017. They appear in the programme on 9th May. Charlotte is seen training GPs to offer commercial weight management referrals - strategies she developed during her DPhil.

Charlotte’s current research explores doctor-patient conversations in the Brief interventions for weight loss (BWeL) trial. In this trial GPs offered patients with obesity a free referral to a commercial weight management program (like slimming world) for twelve weeks. Charlotte used a method called conversation analysis to identify conversational patterns used by doctors which were both well received by patients and could be associated with patient attendance at their free referral. She has developed training for GPs in these methods.

“During my DPhil, I developed training for GPs in line with the evidence I have developed on how best to offer weight management referrals. I put this training into practice during filming for ‘Britain’s fat fight’. I trained GPs, asked them to practice with each other, and provided feedback... I haven’t seen the results but I am, of course, interested to watch on Wednesday to find out if the GPs followed the training in practice, and how well patients received these conversations.”

Charlotte Albury

Research paper makes Pulse top five practice-changing papers of 2017

A paper on the use of oral steroids for the treatment of acute lower respiratory tract infection by Professors Alastair Hay, Paul Little and Anthony Harnden, et.al., from research funded by the School, has been selected as one of Pulse magazine’s top five practice-changing papers of 2017.

Read more: http://www.pulsetoday.co.uk/clinical/more-clinical-areas/dermatology/the-top-five-practice-changing-papers-of-2017/20035761.article
Systematic review training bursaries awarded

Congratulations to the three successful recipients of ESWG bursaries. They are (from top to bottom) Ruth Abrams, Stephanie Tierney and Faraz Mughal. The ESWG bursaries will fund course fees to attend a Masters level module on the postgraduate programme in Evidence Based Healthcare at the University of Oxford.

We asked Ruth, Stephanie and Faraz what they are currently working on and what they hoped to gain from the training.

Ruth Abrams (top)
Research Assistant, Primary Care & Population Health, University College London.

I have recently joined the ESWG as a research assistant at UCL alongside Dr Sophie Park. I’m currently researching the impact of early visiting services (EVS) on GP workload and hospital admission rates. EVS are a relatively recently intervention in primary care and are intended to reduce both strain on GPs and A&E wards by providing housebound patients with access to locum GPs or other, qualified staff who are able to treat them at home. The aim of our work is to produce a realist review that is able to explain who EVS work for, why, how and when based on the evidence we find on EVS. This in turn may offer guidance on how to implement best practice when using EVS as an intervention.

As a result of attending the realist review and evaluation module, I’m hoping to develop my foundational knowledge of realist reviews in order to apply this more strongly within my role at UCL. I’m excited to delve more deeply into understanding the role of programme theory in realist reviews, as well as develop my own confidence in working effectively with the data extraction processes and realist logic. In the long run I hope to eventually use these skills to support others through the same process. Therefore another skill I’m hoping to gain from this module is learning how to manage the more messy aspects of realist reviews such as mapping configurations.

Stephanie Tierney (middle)
Researcher in Evidence Synthesis, Nuffield Department of Primary Care Health Sciences, University of Oxford.

I recently joined the department, where I am undertaking a realist review on the topic of care navigators within primary care. Care navigators aim to identify non-medical needs of patients, and then support and signpost them to available services, including those within the community or voluntary sector.

The training will allow me to expand my skills and understanding of realist approaches, which I can apply to other areas of healthcare going forward.

Faraz Mughal (bottom)
GP and NIHR In-Practice Fellow, Research Institute for Primary Care & Health Sciences, Keele University.

I am currently leading on an in-progress systematic review and narrative synthesis on the ‘role of the General Practitioner in the management of patients with self-harm behaviour in primary care’ (PROSPERO CRD42018084703) and a qualitative study exploring the experiences of self-harm in young people in general practice.

I hope to learn skills in developing advanced search strategies, understanding complex methodology, undertaking qualitative reviews, and becoming familiar with emerging forms of evidence synthesis.
Third year Graduate Entry Medicine student at the University of Oxford, Zuzanna Bien, was selected as the first winner of the School for Primary Care Research George Lewith Prize. Zuzanna writes about her submission below:

"Is it our responsibility to discuss with a COPD patient the guilt that they feel about their lifelong smoking habit? At what point during a ten-minute consultation is it appropriate to tell a patient that they might be approaching the end of their life? In practice, doctors often perceive it is more important to focus on the current crisis that the patient has presented with – to prescribe antibiotics for an infective exacerbation or arrange a hospital admission – than to breach these subjects. This firefighting approach, however, means that the more difficult questions are rarely tackled.

Drawing on my encounter with an end-stage COPD sufferer, as well as qualitative literature, I noticed that some experiences seemed ubiquitous in this patient population: feelings of guilt and anxiety, loss of confidence, uncertainty about the future. I realised that many of these issues could be remediated through honest discussions between patients and doctors. Often, addressing these difficulties could transform patients' life more radically than treating their physical symptoms. Through my essay I hope to encourage all medical professionals not to shy away from having such conversations.

Aside from managing the chronically ill, aging population, the medical profession has another great issue to tackle: healthcare in the times of mass migration. With generous sponsorship of the George Lewith prize committee and the School for Primary Care Research, I am very pleased to be able to attend the next SAPC conference, where migrant health is the leading theme of the conversation. As a medical student, this will be an excellent opportunity for me to immerse myself in current debates and learn more about the steps that are being taken to address the situation.”
New study aims to better understand the role of food allergy testing in childhood eczema

GPs and researchers from the Universities of Bristol, Southampton and Nottingham have been funded by the School to undertake a study to explore the role of food allergy testing in children with eczema in the TEST project. Dr Matthew Ridd, a GP and Senior Lecturer at the Centre for Academic Primary Care at the University of Bristol said: “At the end of this project, we will know how well a bigger study, involving more GPs, parents and children, would work. We will also have a better understanding of what parents and GPs think about food allergies and tests in children with eczema.

Recruitment to the study begins in summer 2018 and the results will be reported in early 2020. For more information, see the study website www.bristol.ac.uk/eczema-allergy-study, and follow progress on Twitter (@eczema_allergy) or email test-study@bristol.ac.uk.

Find out more on the Centre for Academic Primary Care Website: http://www.bristol.ac.uk/primaryhealthcare/news/2018/test-study.html

University of Oxford’s Julie McLellan was awarded the Kellogg College Gillian Nicholls Prize for her MSc dissertation in Evidence-Based Health Care. Her dissertation entitled: The Impact of Small Studies with Small Sample Sizes in Large Systematic Reviews, addressed an important question regarding methods that are used in Evidence Based Health Care research. The number of published medical papers has increased rapidly over the last 20 years. For clinicians and patients to be able to keep up with all this information, systematic reviews are produced, which compile all the available studies on a single topic/question, into a more useable form. However, this is a comprehensive process, involving considerable resource, including time. This means that there may be delays in useful information being used for clinical decisions.

“In this dissertation, Julie has shown that in cases where a large number of studies have been published, a smaller scale review, incorporating only the largest studies will provide an adequate answer. This is likely to have a huge impact in reducing the time and effort required to obtain the required answer; potentially leading to prompt and better clinical care.”

Dr Annette Pluddeman,
Course Director: MSc in Evidence-Based Health Care
Part-funded by the School, research conducted at
the Universities of Oxford and Exeter has found that
general practices in England with the worst prescribing
quality scores are 2.1 times more likely to prescribe
homeopathy than practices with the best prescribing
quality scores.

Researchers looked at practices that prescribe home-
opathy to see if they differ in their prescribing of other
drugs. They found that even infrequent homeopathy
prescribing is strongly associated with poor perfor-
mance on a range of prescribing quality measures,
but not with overall patient recommendation or quality
outcomes framework score.

**Publication:**

*Is use of homeopathy associated with poor prescrib-
ing in English primary care? A cross-sectional study.*

Alex J Walker, Richard Croker, Seb Bacon, Edzard
Ernst, Helen J Curtis and Ben Goldacre.

Journal of the Royal Society of Medicine, Thursday 19
April 2018. DOI: 10.1177/0141076818765779

**OpenPrescribing newsletter**

April 2018: https://ebmdatalab.net/openprescribing-april-newsletter/
Targeted approaches for male and BAME patients to improve equity in uptake

Patients are more likely to attend an NHS Health Check if they’re already at lower risk of stroke or heart attack, a SPCR funded University of Bristol evaluation has found. The patient groups most likely to respond to the standard invitation to attend a check are female, ‘white British’, older or from more affluent areas.

In a School funded study, researchers from NIHR CLAHRC West and the Centre for Academic Primary Care (CAPC) and led by Dr Jeremy Horwood, looked at routinely collected data from GP practices in Bristol between 2010 and 2014, assessing which patients followed up their invitation to attend an NHS Health Check. Over the data collection period, 31,881 invitations for an NHS Health Check were offered to eligible individuals and 13,733 checks were completed.

Slightly more women compared to men attended (53 per cent versus 47 per cent), and, from the target 40–74 age range, more patients aged over 60. People from the most deprived communities were less likely to attend than those from more affluent areas (39 per cent versus 47 per cent).

The proportion of black, Asian and minority ethnic (BAME) people attending NHS Health Checks was lower than in Bristol’s overall population. BAME groups make up 16 per cent of the population of Bristol. But more non-black and Asian patients were invited (64 per cent versus 9 per cent) and most attendees were also from non-black and Asian groups (85 per cent versus 10 per cent). However, ethnicity was poorly recorded by GP practices, particularly for those patients who didn’t attend an NHS Health Check. Read more: http://www.bristol.

The School recently published two case study booklets which include examples of high-quality involvement and engagement taken from systematic reviews, database studies, and mixed methods studies. It demonstrates the value placed on providing support for SPCR staff and trainees at all levels of project development.

https://www.spcr.nihr.ac.uk/PPI/ppi-publications
PRIMER: making a difference

This year marks the tenth anniversary of PRIMER (Primary Care Research in Manchester Engagement Resource), established at the University of Manchester to shape primary care research with an overarching focus on patient and public involvement. Since the early days with SPCR funding, PRIMER has demonstrated dedication and commitment to connecting patients and the public to researchers, goals which resulted in a Making a Difference Award from the Social Responsibility team at the University on 1 May. They received a Highly Commended Award in the Outstanding Contribution to Public and Community Engagement category. [https://www.spcr.nihr.ac.uk/news/primer-is-winner-at-making-a-difference-awards](https://www.spcr.nihr.ac.uk/news/primer-is-winner-at-making-a-difference-awards)

New £2.7 million study to personalise care for people with shoulder pain

Following School funded research comparing the effectiveness of treatment options for shoulder conditions, principal investigators Danielle van der Windt and Gwenllian Wynne-Jones from Keele University, Carl Heneghan from University of Oxford, and a number of researchers from across the School, have successfully secured further funding from the NIHR and ARUK.

The £2.7 million programme of research hopes to personalise care for people with shoulder pain, to make sure that people receive the care that is best for them and avoid unnecessary investigations and treatments.

The new programme of research, led by Keele University with joint funding from the National Institute for Health Research (NIHR) and Arthritis Research UK, aims to develop a more effective way of ensuring that patients receive treatments they are most likely to benefit from.

“Many patients with shoulder pain recover quickly, but in others, the pain does not diminish and can affect sleep, work and everyday life for many months. At the moment, we don’t have good evidence that can help clinicians to identify patients at increased risk and make decisions about which treatment is likely to be best”

Prof Danielle van der Windt
Dates for your diary

47th SAPC ASM
London
10-12 July 2018
https://sapc.ac.uk/conference/2018

SPCR Annual Trainees’ Event
24 & 25 September 2018
St Anne’s College, Oxford
https://www.spcr.nihr.ac.uk/events/spcr-annual-trainees-event

SPCR Showcase
13 November 2018
Wellcome Collection, London
https://www.spcr.nihr.ac.uk/events/spcr-showcase-2018

Blogs

Carl Heneghan, University of Oxford

Repeat prescriptions are expensive and time consuming - it’s time for an NHS rethink http://bit.ly/2ItOMlF
Rupert Payne, University of Bristol, NIHR blog

Emma Palmer-Cooper and Georgia Richards

Recent publications


Primary Care Outcomes Questionnaire: psychometric testing of a new instrument. Mairead Murphy, Sandra Hollinghurst, Sean Cowlishaw and Chris Salisbury, (2018), BJGP.

Read more: www.spcr.nihr.ac.uk/publications