

## Message from the Director

Welcome to the Spring 2014 issue of School for Primary Care Research news, a bi-annual publication designed for primary care researchers and healthcare practitioners. SPCR news aims to bring you research and trainee highlights from across the eight academic departments of the School for Primary Care Research.

Since the School's inception seven years ago, we have funded 240 primary care research projects and supported 71 trainees through their studies and fellowships.



Our focus continues to have a positive impact on primary care practice, policy, research and capacity building among the future leaders of primary care research. Recent publications in The Lancet Respiratory Medicine, the British Medical Journal (BMJ) and The Journal of the American Medical Association (JAMA) are evidence of the wide reach of School's research. They are indicative of the School's fortunate position of being able to select trainees from a number of high quality applicants. The research outputs add confidence and credibility to the excellent research produced by the School and the NIHR.

The well attended SPCR training event in September was testament to the steady increase in trainee numbers across our academic departments over the years.

Training Leads commented on the enthusiasm and level of discussion around a range of research topics – each at varying stages of completion – in the presentations they facilitated. Trainees have attended a number of external training events and conferences during the past year and encouraging feedback from these can be found on page 4.

Other School highlights include the refinement and implementation of a Public and Patient Involvement policy in line with the NIHR's objective to encourage involvement from patients and members of the public in all aspects of the research process. Two of our largest research projects, the Cancer Diagnosis Decision rules (CANDID) and the Benefits of Aldosterone Receptor Antagonism in Chronic Kidney Disease (BARACK D), have generated media interest since they commenced in 2012. Updates on these projects on page 7.

The School launched a new website in August ([www.spcr.nihr.ac.uk](http://www.spcr.nihr.ac.uk)) and a twitter feed (@NIHRSPCR), and is well placed to keep abreast of research and policy engagements, and to communicate these to our members. Preparation is underway for this year's SPCR Showcase which will be run back to back with the SPCR Trainees' Event in Oxford in September. We hope to give researchers, trainees and healthcare professionals an excellent opportunity to engage in discussions in primary care research. Look out for the call for abstracts on our website.

**Richard Hobbs**  
NIHR SPCR Director

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The National Institute for Health Research (NIHR) School for Primary Care Research (SPCR) is a partnership between eight leading academic centres for primary care research in England.

The School's main aim is to increase the evidence base for primary care practice through high quality research and strategic leadership.



## SAPC North, trainee of the year...

SPCR doctoral student Abigail Methley (University of Manchester) was awarded the Society for Academic Primary Care (SAPC), North, Early Career Researcher prize in November 2013. The prize recognises the research Abi has done towards her PhD entitled 'Experiences of mental health support for people with Multiple Sclerosis: What can the concept of candidacy contribute to our understanding of care?' Awarded to people with less than three years' research experience, the title gives Abi complimentary registration to the SAPC Annual Scientific Meeting in Edinburgh in July this year. Abi has just started her third year of a NIHR SPCR funded PhD at the University of Manchester. Her research qualitatively investigates the experiences of people with Multiple Sclerosis in healthcare services, and the corresponding experiences and perceptions of their health care providers.

## Is it safe to wake up?

In June 2013, James Sheppard won the Alberto Ferrari prize for best poster at the European Society for Hypertension and Cardiovascular Protection Annual Meeting in London for his poster 'Is it safe to wake up?' The presentation was based on a SPCR study 'Defining the prognostic value of the morning blood pressure surge in clinical practice', a collaborative study with Richard McManus (University of Oxford), James A Hodgkinson, Richard Riley and Una Martin (University of Birmingham).

# Inspiring another generation of primary care leaders

The School's third Annual Trainees' Event was held in September 2013 and welcomed 79 participants to the industrious two day meeting. Students and fellows across four years (2010 to 2013) arrived in Oxford to present posters and attend talks by primary care professionals from the Department of Health, the NIHR, SPCR training leads and former trainees. The broad range of primary care topics currently under research by participants was noted as a particular strength, and the event gave trainees a platform to network with colleagues from other primary care departments around the country.

Keynote speaker Dr David Cox from the Department of Health discussed the future of public funding for primary care research. Director of the NIHR Trainees' Co-ordinating Centre, Dr Lisa Cotterill, informed the group of training and career progression opportunities within the NIHR. The School was pleased to welcome Professor Richard Young, Director of Research at the University of Texas, whose entertaining presentation of the health system in the USA served as a useful comparative tool.

The School received positive feedback from participants about the programme of events. Second year doctorate student Josie Messina from the University of Manchester commented, "The two day event was perfectly executed with warm welcomes, expert advice, knowledge sharing, networking, and open forum discussions in small groups. I have always felt very fortunate to be part of the NIHR SPCR community, and after attending the event I left feeling like I was part of something special.

**“ The trainees' meeting is always one of the highlights of my academic year. The quality of the science, the depth of the discussion and the sense of collegiality never fails to make me brighten up and be optimistic about the future of academic primary care ”**

*Christian Mallen,  
SPCR Training Director  
Keele University*

The event provided information on how the NIHR would support me through my career, enabling me to become a future leader in primary care research. The event allowed for peer networking and research sharing, but also provided an opportunity for trainees to speak with the more senior members from across each of the member universities."

New non-clinical Fellow, Kate Button from University of Bristol added: "As a new fellow I found the School faculty welcoming and supportive. It was a pleasure to meet both the other trainees and the senior researchers, and I look forward to being reunited with many of these new acquaintances at next year's event."





## Trainee Awards in 2013

13 Studentships    3 General Practice Career Progression    2 Fellowships

### New projects

Proactive familial breast cancer risk assessment in primary care: feasibility of an optimised intervention to improve identification and care of women at risk (Phase 1 & 2)	Alyson Hunt, Bristol
Primary care patients' views and experiences of treatments for depression, and of those delivering their care: a secondary analysis of qualitative data	George Dowswell, Birmingham
Pain App I & II - validity and utility	Danielle Van der Windt, Keele
An analytical framework for increasing the efficiency and validity of research using primary care databases	Evan Kontopantelis, Manchester
Modelling the cost effectiveness of prescribing safety indicators to identify those that are likely to be most cost-effective for inclusion in a rollour of the PINCER trial intervention	Sarah Rodgers, Nottingham
Improving outcomes for stroke survivors in the community and in care homes: adherence to guidance in primary care	Daniela Goncalves, Oxford
How has the GP management of depression changed since 2006? Exploring the effects of the QOF, the economic recession, and NICE guidelines, on rates of diagnosis, antidepressant prescribing and referrals for depression	Tony Kendrick, Southampton
Patient participation in UG medical education in general practice (Pat Med)	Sophie Park, UCL

## Blood pressure surges at NAPCRG

At the North American Primary Care Research Group (NAPCRG) annual meeting in Ottawa in November, James Sheppard (University of Oxford) presented the findings of his SPCR systematic review 'Examining the morning surge in blood pressure.' He was appreciative of the opportunity to present to and develop links with primary care researchers working in similar areas to his own. Noteworthy presentations included Andrew Murphy's follow up on secondary prevention of heart disease, and Ranit Mishori's poster examining the credibility of daytime TV advice from doctors.

After the event, James commented: "The conference had a distinctly international flavour, particularly evident in the poster sessions where the contrast in the way healthcare systems from different countries are organised was striking. This gave me a new perspective on my research and how it might better be disseminated for researchers across the world. The conference as a whole was very engaging, particularly the poster sessions which were well attended and stimulated a lot of discussion and debate. Our Canadian hosts were extremely welcoming and I would recommend this conference to anyone considering attending in the future."

## Experiencing antidepressants

healthtalkonline.org

A joint University of Oxford and University of Nottingham study on the experiences of people who use antidepressant medication, was featured at the launch of Healthtalkonline's 'Experiences of antidepressants' website in November.

The research captures the experiences of people taking anti-depressants and video clips are available as an online information resource for members of the public. Senior Researcher with the Health Experiences Research Group (HERG) at the University of Oxford, Susan Kirkpatrick, speaks about the research in an interview on the healthtalkonline.org site. "People have different ideas, values and beliefs about taking medication, so we have tried to capture as many different views as we can." Asked about the relevance of the research, Susan replied, "By looking at this website and seeing other people talk about how 'medication for the mind' affected them, we hope it will be a very useful and reassuring resource for people with depression."

## Screening for NICE NICE cites screening for alcohol consumption study

The National Institute for Health and Care Excellence (NICE) referred to a SPCR publication on screening for alcohol consumption in its November 2013 issue of *Update for Primary Care*.

The article 'Alcohol consumption screening of newly-registered patients in primary care: a cross sectional analysis' was published in the British Journal of General Practice in October 2013 by researchers in the Department of Primary Care and Population Health at UCL. The study investigates the use of NICE recommended screening tests by GPs to identify people with alcohol-use disorders. Researchers examined how alcohol screening data are recorded in primary care, the extent to which they are recorded, and whether reported levels of consumption differ from general population data. Researchers: Zarnie Khadjesari, Louise Marston, Irene Petersen, Irwin Nazareth and Kate Walters.

## Better Knowledge for Better Health

SPCR fellow Helen Atherton (University of Oxford) and doctoral student Jasmin Knopp (University of Manchester) presented their research at the Cochrane Colloquium in Quebec in September 2013. The conference theme focussed on how evidence informs health care decisions at every level. Helen and Jasmin spoke about their experiences after the event:

**Helen:** "The conference offered the opportunity to learn more about systematic review methodology and explore alternatives. There was much exploration about how we should best approach the review of complex interventions, something that challenges many review authors but remains unsolved. Increasingly qualitative approaches like realist reviews are seen as essential for fully exploring complex interventions."

**Jasmin:** "The sessions went beyond Cochrane reviews to consider alternative approaches and interesting methods and review topics which don't currently form part of the Cochrane spectrum of reviews. There were opportunities to learn more about qualitative review methods and the role of qualitative work in informing the interpretation of quantitative review findings."

## Adding value in research

Doctoral student Grace Moran (University of Birmingham) presented her poster 'How minor are minor strokes?' at the 7th Annual NIHR trainees event in Leeds in November and reported: "The theme of the event was 'adding value in research' and trainees were encouraged to avoid waste in research at every stage of study design. Importantly we were taught to be creative when disseminating findings, from comic strips to YouTube videos, and to use different methods and versions to target different audiences. The best part was meeting researchers from different backgrounds and the opportunity to network across disciplines. It was interesting to see the wide variety of research topics and research methods."

SPCR doctoral students Abi Eccles and Derek Kyte were prize winners after representing the School at the fourth NIHR Experimental Medicine Research Training Camp in Berkhamsted in July 2013.

## Developing a post-doctoral career

By supporting the career progression of NIHR doctoral students, the annual NIHR Experimental Medicine Research Training Camp provides participants with scientific and research skills vital for developing proposals, communicating with team members and forming successful research collaborations.

The 2013 training camp focussed on a 'call for proposals' from a fictitious funding body to develop research infrastructure. Participants worked in groups, alongside a mentor, to build a research programme and multi-disciplinary team. Their proposals were then presented to a panel of experts who assessed them for fundability.

“ The representation of different disciplinary backgrounds within each group was a great strength of the camp ”

Abi and Derek, from the universities of Oxford and Birmingham respectively, spoke about the pressures of the session, "It was very stimulating and fast paced with various deadlines for developing presentations, leaflets, lay summaries and opportunities to attend lectures and arrange meetings with different experts for advice and ideas."

Guest speakers Professors Ashley Adamson and Anne Schilder (Winners of the first

NIHR Professorships) addressed the group with accounts of the career progression decisions they had made. They reassured early career researchers of the many career professionals who have succeeded in their chosen field, without compromising the work/life balance.

The camp was a "great opportunity to practice skills in presenting and responding to criticism and questions on the spot," said Abi. Her group won the 'Best Patient and Public Engagement and Involvement Strategy' award while Derek's group (photographed below) received the 'First Prize for Overall Proposal', giving them the £5million 'funding award.'



The overall winning team at the NIHR Experimental Medicine Doctoral Research Training Camp (from right to left): Radha Desai (UCLH BRC), Bushra Ahmed (BRU Royal Brompton respiratory), ZinZin Hitke (BRU Leister Diet and Nutrition), Marianne Johnstone (BRU Liverpool Gastrointestinal), Derek Kyte (NIHR School for Primary Care Research) and Alendra Pender (BRC Royal Marsden) photographed with Professor Dave Jones (NIHR Lead for Academic Training, Chair of the Infrastructure Training Forum).



## Recent Publications

Withdrawing performance indicators: retrospective analysis of general practice performance under UK Quality and Outcomes Framework. **Kontopantelis E**, Springate D, Reeves D, Ashcroft DM, Valderas JM. *BMJ*, January 2014

Montelukast for post-infectious cough in adults: a double-blind randomised placebo-controlled trial. **Wang K**, Birring Surinder S, Taylor K, Fry N, Hay A D, Moore M, Jin J, Perera R, Farmer A, Little P, Harrison T, Mant D, Harnden A. *The Lancet Respiratory Medicine*, December 2013

A systematic review of predictors and moderators of response to psychological therapies in OCD: Do we have enough empirical evidence to target treatment? **Knopp J**, Knowles S, Bee P, Lovell K, Bower P. *Clinical Psychology Review*, December 2013

Health related quality of life in gout: a systematic review. **Chandratre P**, Roddy E, Clarson L, Richardson J, Hider SL, Mallen CD. *Rheumatology (Oxford)*. November 2013

Brief interventions for weight loss in primary care. **Lewis AL**, Aveyard P, Jebb S A. *Current Obesity Reports*, December 2013

Alcohol consumption screening of newly-registered patients in primary care: a cross sectional analysis. **Khadjesari Z**, Marston L, Petersen I, Nazareth I, Walters K. *British Journal of General Practice*, October 2013

The Sexunzipped pilot trial: optimizing the design of online randomized controlled trials. **Bailey JV**, Pavlou, M, Copas A, Mccarthy O, Carswell K, Rait G, Hart G, Nazareth I, Free C, French R, Murray E. *Journal of Medical Internet Research*, December 2013

Suitability of emergency department attenders to be assessed in primary care: survey of general practitioner agreement in a random sample of triage records analysed in a service evaluation project. Thompson MIW, **Lasserson D**, McCann L, Thompson M, Heneghan C. *BMJ Open*, December 2013

Inconsistencies in quality of life data collection in clinical trials: a potential source of bias? Interviews with research nurses and trialists. **Kyte D**, Ives J, Draper H, Keeley T, Calvert M. *PLoS One*, October 2013

Experiences of using email for general practice consultations: a qualitative study. **Atherton H**, Pappas Y, Heneghan C, Murray E. *British Journal of General Practice*, November 2013

Suicide-related events in young people following prescription of SSRIs and other antidepressants: a self-controlled case series analysis. **Wijlaars LPM**, Nazareth I, Whitaker H J, Evans SJW, Petersen I. *BMJ Open*, September 2013

Primary care clinicians' attitudes towards point-of-care blood testing: a systematic review of qualitative studies. Jones C, **Howick J**, Roberts N, Price CP, Heneghan C, Plüddemann A, Thompson M. *BMC Family Practice*, September 2013

Same difference? Complementary therapy consultations delivered in NHS and private settings - A qualitative study. Wye L, **Shaw A**, Sharp D. *European Journal of Integrative Medicine*, August 2013

N-terminal pro brain natriuretic peptide but not copeptin improves prediction of heart failure over other routine clinical risk parameters in older men with and without cardiovascular disease: population-based study. **Wannamethee SG**, Welsh P, Whincup PH, Lennon L, Papacosta O, Sattar N. *European Journal of Heart Failure*, July 2013

Evidence for non-communicable diseases: analysis of Cochrane reviews and randomised trials by World Bank classification. **Heneghan C**, Blacklock C, Perera, R, Davis R, Banerjee A, Gill P, Liew S, Chamas L, Hernandez J, Mahtani J, Hayward G, Harrison S, Lasserson D, Mickan S, Sellers C, Carnes D, Homer K, Steed L, Ross J, Denny N, Goyder C, Thompson M, Ward A J. *BMJ Open*, July 2013

Identifying families' reasons for engaging or not engaging with childhood obesity services: a qualitative study. Banks J, **Cramer H**, Sharp DJ, Shield JP, Turner KM. *Journal of Child Health*, May 2013

The Effect of Complex Interventions on Depression and Anxiety in Chronic Obstructive Pulmonary Disease: Systematic Review and Meta-Analysis. **Coventry PA**, Bower P, Keyworth C, Kenning C, Knopp J, Garrett C, Hind D, Malpass A, Dickens C. *PLoS ONE*, April 2013



Abi Eccles  
University of Oxford

When I began my doctoral studies to explore the information and decision support needs of people with multiple sclerosis, Patient and Public Involvement (PPI) had not really crossed my mind. However, a year into my studies during a PPI INVOLVE workshop at the NIHR SPCR trainee event, I was enlightened to its potential value and inspired to incorporate PPI into my research. With the support of my supervisors, I developed a plan to recruit six members of the public with long term conditions to a PPI group which would provide input for my research at various stages. Using guidance from the INVOLVE website and knowledge gained from the workshop, I devised a role description outlining planned activities, expectations and the desired attributes that members would possess. This role description was distributed to interested members of the public before they decided whether or not to participate.

Taking a novel approach, I designed the PPI group to exist online with a secure website to host information on the research and the activities participants can volunteer to carry out. Members can ask questions via the secure website or contact me at any time by email or phone. The online element allows flexibility for PPI members and minimises research costs: activities can be carried out as and when it is convenient. The costs of organising meetings are avoided and involvement is more accessible for those who have disabilities or other responsibilities which may make attending face-to-face meetings difficult.

Input from PPI members is gained by designing 'activities' to complete online. They are invited to take part and are reimbursed for their time on receipt of completed worksheets. Activities to date have included: providing feedback on research design; amending recruitment literature, participant information and consent forms; carrying out qualitative analysis on an excerpt of interview data (to act as an audit against my own analysis); and identifying which outcomes should be considered most important in a systematic review. It has been great working with the public and gaining early insights from the people who I am ultimately doing the research for. They have improved the quality of my recruitment information, provided conceptual

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# Supporting patients with diabetes

Andrew Farmer

**The first strand of this study explores the impact of interventions targeted at medication adherence, and the second strand investigates telehealth to support self-management of patients with diabetes twelve months after randomisation.**

The study's importance lies in the fact that there remains few reliable data on interventions that improve patient adherence to their medicines, which increases the potential impact of this ongoing work. Importantly, the technologies under investigation in this work could also apply to chronic conditions beyond diabetes. The change in glycaemic control and prescription of medication over a period of twelve months was assessed, as well as the levels of glycaemic control and the prescribing of medication.

**Strand 1** looks at adherence and includes the follow up of the MRC funded Support and Advice for Medication Study (SAMS) cohort, a study of an alternative electronic medication monitor, and development work for a pragmatic trial (with Cambridge). The work shows that a simple adherence measure improves tablet taking behaviour. Work on developing a future trial is in progress, building on the work in the SAMS trial. This has led to a collaboration with Exeter University on the MRC Stratified Medicine Initiative on Diabetes, where the expertise we have built in the Department of Primary Care Health Sciences has been used to measure medication adherence in a large-scale study exploring whether the response to different glucose lowering drugs varies between individuals.

**Strand 2** continues work with telemedicine with a series of studies to evaluate the use of the m-health platform (mobile phone based telemedicine) in providing support for people with diabetes, in collaboration with Professor Lionel Tarassenko at the Institute of Biomedical Engineering. A pilot study with 23 participants shows acceptability and feasibility of using the system to support people titrating insulin without regular practice visits. This study has been extended to a Wellcome Trust funded investigation of a mobile health platform to monitor people with chronic obstructive pulmonary disease.

In addition, the work has been extended to inform the design of a trial with people treated for hypertension, in a low income setting in South Africa. This brings together the work outlined in Strand 2 as the intervention is based on text messaging.

Funding was also provided for statistical support to develop methods for evaluating and exploring monitoring in diabetes. The work has been carried out on databases from previous trials. The methods developed have enabled us to determine optimal measurement intervals originally developed by Irwig and Glasziou to take account of the initial distribution of values in the population. The expertise developed has been used within an NIHR HTA funded programme of work on renal monitoring in diabetes, and an NHS Diabetes grant to extend the work on optimal management of glycaemia.

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## Evidence, Engagement ... and Elves?: Blogging for the Mental Elf website

Sarah Knowles  
University of Manchester

If I had to make a list of 'things I like', then the internet, mental health research and terrible puns would all rank quite highly. It's no surprise then that I've been a follower of the Mental Elf website since its beginning. The blog was started in May 2011 by André Tomlin, an Information Scientist, and it aims to "highlight evidence-based publications relevant to mental health practice in the UK and further afield". I began blogging for the site myself last year, partly to work on my writing skills, but also to contribute to the effort to disseminate research findings more widely.

Engagement and dissemination are increasingly prioritised in health services research (HSR). Trials and systematic reviews are the bread and butter of what we do in HSR, but the evidence base can be hard to engage with. The Mental Elf website provides accessible summaries of the latest studies, written by authors ranging from Masters students to professors, who read the original paper itself and summarise the results. I think this is a core part of its success – people can rely on it for information rather than promotion. This is reflected in the audience, which includes health and information professionals through to service users and patients.

If you had asked me in 2011 if there would be a big audience for daily summaries of health research papers, I would probably have said "If only." The success of the site, and its appeal to such a broad audience, gives me a lot of reassurance that the kind of work we do in the School is relevant, important and interesting beyond academia. It also confirms to me our responsibility to make sure that work is communicated to those who want, or need, to hear about it.

Sarah's posts for The Mental Elf are archived here. The Mental Elf website will be expanding in 2014 to include journal clubs, evidence alerts and more – find out more here.







## profile: Evan Kontopantelis

**A researcher at the Centre for Primary Care, University of Manchester, Evan studied in Athens and grew up in nearby Piraeus. He joined the School as a Fellow in 2010 and currently has School funding to investigate QOF indicator removal, diabetes and exception reporting, as well as Clinical Practice Research Datalink (CPRD) methodology. Evan is a Fellow of the Royal Statistical Society and Secretary for the Manchester group.**

### **Where did your interest in statistics and health research come from?**

I excelled in mathematics as a child and was interested in computer programming. I remember weekends typing basic code from a book into my Commodore 64 to run games. At university I became interested in biostatistics through an influential lecturer and my PhD used health care data.

### **Where did you complete your studies?**

I completed my Masters and PhD at the National Technical University of Athens (NTUA), probably the most prestigious HE institution in Greece.

### **How did you first hear of the School for Primary Care Research?**

I was fortunate to be in Manchester when the School was formed in 2006 and worked at the National Primary Care Research and Development Centre as it was then called.

### **What was the topic of your Fellowship research?**

QOF and meta-analysis, and various methodological aspects.

### **Has the SPCR Fellowship supported your career progression?**

The contact I received from other researchers through the School was very helpful. When the questions in my research got harder to answer, more collaboration was required from people of various disciplinary backgrounds and with different expertise. The School enabled me to connect to an established group of researchers and I was introduced to investigators with similar interests.

### **How do you keep your work relevant to primary care practitioners?**

I am immersed in primary care data - if research is not of interest to primary care practitioners, I am not interested either. Even the methodological work that emerges from my work is relevant to answering clinical questions.

### **What advice do you have for SPCR Fellows and students?**

Don't let anyone dictate your agenda during these years of academic freedom. Focus on what you are passionate about and utilise the School's network to get appropriate mentorship and advice in order to make progress with your research. The School for Primary Care Research gave me the financial means and networks to collaborate with the best people in primary care research in the country and internationally.

## CANDID

CANcer, Diagnosis Decision rules (CANDID) is the first collaborative project within the School to involve all eight partner universities. The five year study, led by Paul Little from the University of Southampton, received £2 million – the largest award made to date by the SPCR.

The study uses clinical information (supplemented with optional blood or saliva samples and lifestyle information) from 20,000 patients who visit their GP with possible symptoms of early lung or colon cancer. The research aims to develop ways of predicting who is more at risk of getting cancer. It hopes to determine which signs and symptoms are most predictive of those who go on to be diagnosed with the disease and thus reduce referral rates. While improving early referral rates is important, it is essential that the system isn't overloaded with patients who are at low risk of contracting cancer. As Professor Little explains, "Waiting for results and dealing with the possibility of having cancer can be a distressing and daunting time for patients and their families, our research aims to aid the patient pathway and help medical professionals."

## BARACK D

Jointly funded by the NIHR School for Primary Care Research and the NIHR Health Technology Assessment Programme, The Benefits of Aldosterone Receptor Antagonism in Chronic Kidney Disease (BARACK D) Trial is the largest primary care based chronic kidney disease (CKD) trial conducted to date. With seven recruitment centres across the country, BARACK D aims to determine whether an established cardiovascular medication, spironolactone, can reduce cardiovascular risk and the decline in renal function through 120 GP practices recruiting 2616 patients.

Although cardiovascular disease is a major cause of morbidity and death in CKD, few therapies have proved effective in moderating increased cardiovascular disease risk or the rate of renal decline. Increased vascular events and rate of progression to end stage renal failure in patients with CKD is a major cause of increased mortality and morbidity with the resultant high cost to healthcare. To date, no large study of aldosterone receptor antagonists with renal or cardiovascular outcomes has been done. This collaborative project includes six of the eight SPCR member universities and is led by the Director of the School, Professor Richard Hobbs, University of Oxford.



## SPCR opportunities

### Upcoming events

#### SPCR Training Event

St Anne's College, University of Oxford,  
25 September, 2014

#### SPCR Showcase

Mathematical Institute, University of  
Oxford, 26 September 2014



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 @NIHRSPCR

#### The International Primary Care Research Leadership programme (Brisbane)

The International Primary Care Research Leadership programme is designed to foster and develop future leaders in primary care research. The programme consists of three residential meetings in Oxford aimed to help participants explore different aspects of leadership in primary care research. Participants are encouraged to identify their own development needs, form peer learning sets and establish a two year follow up programme. They are provided with access to current leaders in primary care research, experts in strategic leadership and one-to-one coaching. The School funds two places per year.

#### Transdisciplinary Understanding and Training on Research - Primary Health Care

TUTOR-PHC is a one year, national interdisciplinary research training program funded by the Canadian Institute of Health Research (CIHR) and the Canadian Health Services Research Foundation (CHSRF) with representation from the disciplines of: Family Medicine, Nursing, Psychology, Epidemiology, Social Work, Sociology, Education and many others. The SPCR is fortunate to be allocated one place on the programme each year.

Further details about SPCR opportunities can be found on our website:

[www.spcr.nihr.ac.uk/trainees](http://www.spcr.nihr.ac.uk/trainees)

## NIHR opportunities

#### NIHR Evaluation, Trials and Studies Co-ordinating Centre (NETSCC)

- Efficacy and Mechanism Evaluation (EME) Programme
- Health Service and Delivery Research (HS&DR) Programme
- Health Technology Assessment (HTA) Programme
- Public Health Research (PHR) Programme

Find out more:  
[www.nets.nihr.ac.uk/funding](http://www.nets.nihr.ac.uk/funding)

#### NIHR Central Commissioning Facility (CCF)

- Invention for Innovation (i4i)
- Programme Grants for Applied Research (PGfAR)
- Programme Development Grants (PDG)
- Research for Patient Benefit (RfPB)

Find out more about NIHR CCF research calls and competitions, guidance notes and supporting information: [www.ccf.nihr.ac.uk](http://www.ccf.nihr.ac.uk)

#### NIHR Trainees Coordinating Centre (NIHR TCC)

- NIHR Fellowships (Doctoral, Post-Doctoral, Career Development, Senior Research, Transitional Research)
- NIHR Integrated Academic Training (ACF, CL, IPF and Clinician Scientist Schemes)
- NIHR Research Professorships
- NIHR Research Methods
- NIHR/HEE Clinical Academic Training for nurses and midwives (Doctoral, Clinical Lecturer, Senior Clinical Lecturer)
- NIHR/HEE Healthcare Science Research Fellowships (Doctoral, Post-Doctoral, Senior Clinical Lecturer)
- NIHR Clinical Trials Fellowships
- NIHR Knowledge Mobilisation Research Fellowships

Find out more about our awards and the funding available from NIHR TCC:  
[www.nihrtcc.nhs.uk](http://www.nihrtcc.nhs.uk)

