

Autumn meeting

An international multi-disciplinary conference covering a wide range of topics of interest to geriatricians and healthcare professionals concerned with the care of older people



ExCeL Platinum Suite, London
14-16 November 2018

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Vice President for Workforce Dr Zoe Wyrko
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Deputy Digital Media Editors Dr Fran Kirkham and Dr Dan Thomas
Chief Executive Mr Colin Nee

CPD Accreditation

Wednesday 14 November Code 122253 - 6 hours
Thursday 15 November Code 122254 - 6 hours
Friday 16 November Code 122255 - 6 hours

BGS Meetings Secretariat

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Supported by

The British Geriatrics Society acknowledges, with grateful thanks, the support given through sponsorship from:

Silver Partners



Organised in association with:



Special thanks to the SIG and Section officers who contributed to the programme content planning:

Anaemia SIG

Dr Khai Lee Cheah and Dr Pandora Wright

Cardiovascular Section

Dr Jackie Taylor, Dr Lara Mitchell, Dr Andrew Davies, and Dr Shahbaz Roshan

Community Geriatrics SIG

Dr Adam Gordon, Dr Rebecca Watt, Dr Liz Kendrick, and Dr Katie Athorn

GeriGPs

Dr Maggie Keeble, and Dr Eva Kalmus

Ethics and Law SIG

Dr Shuli Levy

POPS SIG

Dr Jugdeep Dhese

Frailty and Sarcopenia SIG

Prof Miles Witham and Professor Avan Sayer

Movement Disorders SIG

Dr Emily Henderson, Dr Sara Evans, and Dr Richard Genever

Dedication

Our Autumn Meeting this year is dedicated to the memory of Professor Peter Millard. Peter was President of the British Geriatrics Society from 1994 – 1996, Emeritus Professor of Geriatrics at St George's, University of London, and an inspiration to all who knew him.

Bronze Partner



Keeping life
in mind.



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General information

CPD Accreditation

The meeting has been accredited for CPD with the RCP London (see inside front cover for details). No physical copy of the certificate will be available at the conference. They will be emailed following the meeting. **There is no paper attendance register. Delegates will be required to have their badges scanned each day they are attending as evidence of their attendance.**

Please note that sponsored symposia will only receive CPD accreditation if applied for by the sponsor. In accordance with the rules of the Federation of Royal Colleges, a maximum of 6 CPD points a day may be claimed. Please sign in at the symposia to receive these.

Venue

The meeting is taking place at ExCel Platinum Suite, London. The registration desk can be contacted on 0203 7476940 during the hours of the conference.

Exhibition

The exhibition is located in **Platinum Suite, Level 2-3**.

Cloakroom

A free cloakroom, which can be accessed on **level 1**, is available and will be open during the following times:

Wednesday	08.00 – 19.00
Thursday	07.30 – 18.00
Friday	07.30 – 17.00

Security/ Badges

Name badges must be worn at all times as these serve as the admission pass to the exhibition and presentations areas.

Lunch and Refreshments

For those with special dietary requirements please inform a member of the catering staff. The catering team will direct you to a specific catering point located on Level 3. Breakfast will be available for delegates attending the morning sponsored symposia and policy breakfast. A lunch bag will be available for delegates attending the sponsored symposia on Friday.

Wi-fi

1. To use the Wi-Fi you will need to connect to the SSID: **_ExCeL free Wi-Fi**
2. From there a landing page will automatically load
3. You can either login via social media or enter the requested information to register manually

Insurance

The organisers are unable to accept any responsibility for damage or loss of personal property during the conference.

Notice

Delegates are kindly requested not to leave any items in the meeting rooms between sessions as we will be moving the room partitions throughout the conference. All items left behind will be removed.

Programme overview

Wednesday 14 November	Community geriatric medicine <ul style="list-style-type: none">• The emergency services• MDT working• GeriGPs• Case study: Tower Hamlets Together	<ul style="list-style-type: none">• Anaemia• Heart failure
Thursday 15 November	<ul style="list-style-type: none">• Bereavement• Ethics: Clinically assisted nutrition and hydration• Workshop Urodynamics	<ul style="list-style-type: none">• Rheumatology• Comprehensive geriatric assessment• Trainees session
Friday 16 November	<ul style="list-style-type: none">• Neurology• Movement disorders• Sarcopenia and Frailty	<ul style="list-style-type: none">• Vascular disease• Perioperative Medicine• Clinical effectiveness

Ancillary meetings

Wednesday, 14 November	Meeting	Location	Notes
08.15-17.00	Speakers preview	Zinc Room	Speakers and platforms presenters only
08.30-08.45	Volunteers' briefing*	BGS Stand	Volunteers only
08.30-9.00	Chairs' briefing	Titanium room	Chairs only
17.00-18.30	Annual UK AAGM Meeting	Titanium room	By invitation only
Thursday, 15 November	Meeting	Location	Notes
08.00-09.00	Policy Breakfast	Room 5/6	All welcomed
08.15-17.00	Speakers preview	Zinc Room	Speakers and platforms presenters only
08.30-08.45	Volunteers' briefing*	BGS Stand	Volunteers only
08.30-09.00	Chairs' briefing	Titanium room	Chairs only
13.00-15.00	NIHR meeting	Titanium room	By invitation only
16.30-18.30	GeriGPs meeting	Titanium room	By invitation only
Friday, 16 November	Meeting	Location	Notes
08.15-16.00	Speakers preview	Zinc Room	Speakers and platforms presenters only
08.30-08.45	Volunteers' briefing*	BGS Stand	Volunteers only
08.30-09.00	Chairs' briefing	Titanium room	Chairs only
14.00-15.30	BGS Meeting Committee	Titanium room	By invitation only

* See page 6 for more details

Sponsored symposia

Wednesday, 17.00 - 18.00

Ferring Pharmaceuticals

A Debate: Shifting the paradigm for managing Nocturia due to Nocturnal Polyuria - where should the focus be?

Venue: Room 5/6/7

Thursday, 16.30 - 17.30

Bial

Non-invasive options for "wearing off" in Parkinson's Where do the most recent therapeutics options fit in?

Venue: Room 5/6/7

Friday, 08.00 - 09.00

AbbVie

Panel discussion: Optimising patient outcomes in advanced Parkinson's disease. Why? When? How?

Venue: Room 5/6/7

Friday, 13.30 - 14.30

Profile Pharma Ltd

Managing Parkinson's Disease across the Spectrum - Interactive case studies

Venue: Room 5/6

Extracurricular activities

This year the Autumn meeting will see a lot going on during breaks, and before and after the sessions, making much more than a medical conference!

Wednesday 14th - Friday 16th November

Get up, get moving, get inspired! break activities facilitated by **Professor Dawn Skelton**

Delegates will be encouraged to get up and moving by joining in activities in the exhibition hall during the breaks including stretches, tai chi and giant puzzles.

If you have an idea for an activity please get in contact by emailing registrations@bgs.org.uk

Wednesday 14 November

18.00 Drinks Reception, ExCel Platinum Suite Level 2

Take this opportunity to catch up with your colleagues and meet other delegates from around the UK and overseas attending the conference. Guests will be treated to drinks and nibbles and meet the Co-Chairs of the newly formed GeriGPs group, Maggie Keeble and Eva Kalmus.

Open to delegates who have indicated their attendance during registration

18.15 Walking tour London Docklands

Enjoy a relaxing and informative walk around the historic London Docklands. The route will cover the Royal Victoria Dock, the site of the 2012 Olympic Games, the Crystal, the Cable Car and then cross over via the footbridge to Silvertown, the new Thames Barrier Park and down to the Thames Barrier.

Delegates who've indicated their interest to attend should meet the tour guides at 18.15 in front of the entrance doors of the ExCeL Platinum Suite Level 1

Thursday 15 November

All-day Fringe, ExCeL Platinum Suite 5/6

Borne from the question "could humanities help us resist the inhumanities of life in hospital?" the fringe explores how the humanities can positively impact on the working lives of geriatricians, the MDT and patients. Make the most of this novel experience alongside the traditional educational content of the conference. The fringe will take place during scheduled breaks in the conference and will include inspiring displays, installations, sessions and activities addressing a wide variety of relevant topics.

08.00 Policy breakfast, ExCeL Platinum Suite 5/6

Would you like to learn more BGS's work to influence health and social care policy at a national level, or become involved in shaping it? The Policy Breakfast offers the opportunity to do just that. We would like to increase member engagement in our policy influencing work. We will be discussing why and how we engage in policy and influencing activity, our key messages, and how you can become more involved, without any overly onerous commitments on your time.

08.00 and 15.00 Tai Chi, ExCeL Platinum Suite Level 3

Tai Chi is now being widely practised in the UK by the older population because of the evidence that it improves balance and coordination and reduces the risk of falls. This short session suitable for any age or level of ability will be presented by Jane Ward who has been practising Tai Chi for over 30 years and has over 20 years' experience teaching older adults.

13.00 CANH: ethics, law and new guidelines clinic, ExCeL Platinum Suite 5/6

Decisions about clinically assisted nutrition and hydration (CANH) are some of the most clinically, ethically, and legally challenging decisions to make in medical practice. In November, the British Medical Association (BMA) and the Royal College of Physicians (RCP), working with the General Medical Council (GMC), will be publishing new guidance to support doctors in making these decisions. This clinic is a chance to have some informal conversations about the development of the guidance and its particular relevance in the care of the elderly. It will supplement the main session taking place on the new guidelines, led by Dr Shuli Levy and Dr John Chisholm.

All delegates are invited to drop by and no pre-registration is required.

18.30 Conference evening reception, The Crystal London

This year evening reception has something for everyone, conference delegates and their friends and partners alike! The conference evening reception will commence at 18.30 with a short drink reception. It will be followed by a light finger food buffet, entertainment, music, and dancing. The evening reception will provide attendees with opportunities to network with colleagues and friends in an informal and fun atmosphere. The interactive entertainment is designed to act as icebreaker to encourage attendees to mingle and meet people. Activities will include;

- A Treasure Hunt
- HCOP 'Speed Dating' (a networking and learning opportunity)
- Live Music and dancing
- A Silent Disco
- Access to an highly interactive exhibition area about the future of sustainability and design of cities. More info on the exhibition can be found here: <https://www.thecrystal.org/visit-the-exhibition/>

Attendees are welcome to drop by to start their evening before heading in Central London or stay for the whole evening until the event ends at 9:30pm. We encourage attendees to invite their partners and friends to attend as well. It is not designed as a 'geriatricians only' night. Prepaid tickets will be required. Ticket price include 2 drinks per person and food (canapes and bowl food that will be served throughout the evening). The dress code is smart casual.

Friday 16 November

07.30 Social run, ExCeL Platinum Suite entrance

Give your mind and your body a challenge and join likeminded colleagues for this 5k run around the docklands. There will also be a competition for the best photo tweeted during the run using the hashtag #BGSconf.

Indicate your interest to participate on your registration or by emailing conferences@bgs.org.uk if you have already registered for the meeting

Volunteering opportunities

We are looking for volunteer medical students who are interested in or considering a career in geriatric medicine to assist in the daily running of our annual meetings. Responsibilities includes assisting with registration, greeting and directing attendees to key points, providing microphone support during Q & A sessions in presentations. The opportunity to observe the sessions and meet with geriatricians is invaluable when deciding whether to pursue geriatric medicine as a specialty. Benefits also includes contact with current Geriatric healthcare professional and a certificate of contribution for CV/portfolio. Interested candidates should visit www.bgs.org.uk for more details and list of events. Reasonable travel costs will be reimburse & subsistence at the event is offered.



BGS Autumn Meeting Evening Reception

15th November 2018

The Crystal London

Royal Victoria Dock, One Siemens Brothers Way, London E16 1GB

This year evening reception has something for everyone, conference delegates and their friends and partners alike! The conference evening reception will commence at 18.30 with a short drink reception. It will be followed by a light finger food buffet, entertainment, music, and dancing. The evening reception will provide attendees with opportunities to network with colleagues and friends in an informal and fun atmosphere. The interactive entertainment is designed to act as icebreaker to encourage attendees to mingle and meet people. The dress code is smart casual.

Green wall lounge

18.30 Arrival drinks & live music

18.50 Welcome speeches

Eileen Burns, BGS President & Tahir Masud, BGS President-Elect

19.00-21.00 Live music

Band tbc

19.50 Medals ceremony

John Hindle (BGS medal) and Gary FitzGerald (Marjory Warren medal)

21.30 Close of event

Pumpkin lounge

19.00 'HCOP Speed dating

Networking activity bringing together healthcare professionals to share ideas and expand their networks of contacts and resources

20.10 Silent disco

Send your songs suggestions to registrations@bgs.org.uk

Exhibition

19.00 Treasure hunt

Follow the clues in the exhibition to find the treasure. The first team to find it takes it home. Recommended team size is 2-3 people. We will match you with other participants if you do not have a team

19.00 - 21.20 Free access to the interactive exhibition space for guests. See a BGS staff member for direction to the start of the exhibition.

Prepaid tickets will be required. Ticket are £35 and include 2 drinks per person and food (canapes and bowl food that will be served throughout the evening). Purchase ticket during your registration. If you are already registered, email conferences@bgs.org.uk to purchase your ticket(s).

British Geriatrics Society Autumn Meeting 2018 Venue overview

EXCEL LONDON

Key

- Access Route from Prince Regent for ICC London DLR
- Access route from Custom House DLR
- Entrance Point (Level 1 Boulevard)

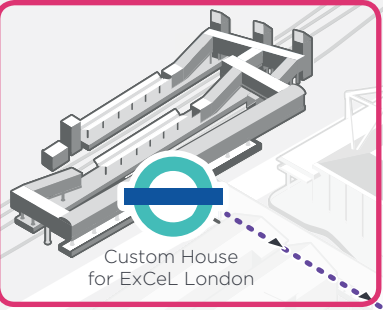
Prince Regent
for ExCeL (East)

The Holiday
Inn ExCeL
0.5 miles
(10 min walk)

EAST
ENTRANCE

Estimated
walking time of
5 minutes from
East entrance

Getting to the Platinum Suite Exit DLR at Custom House



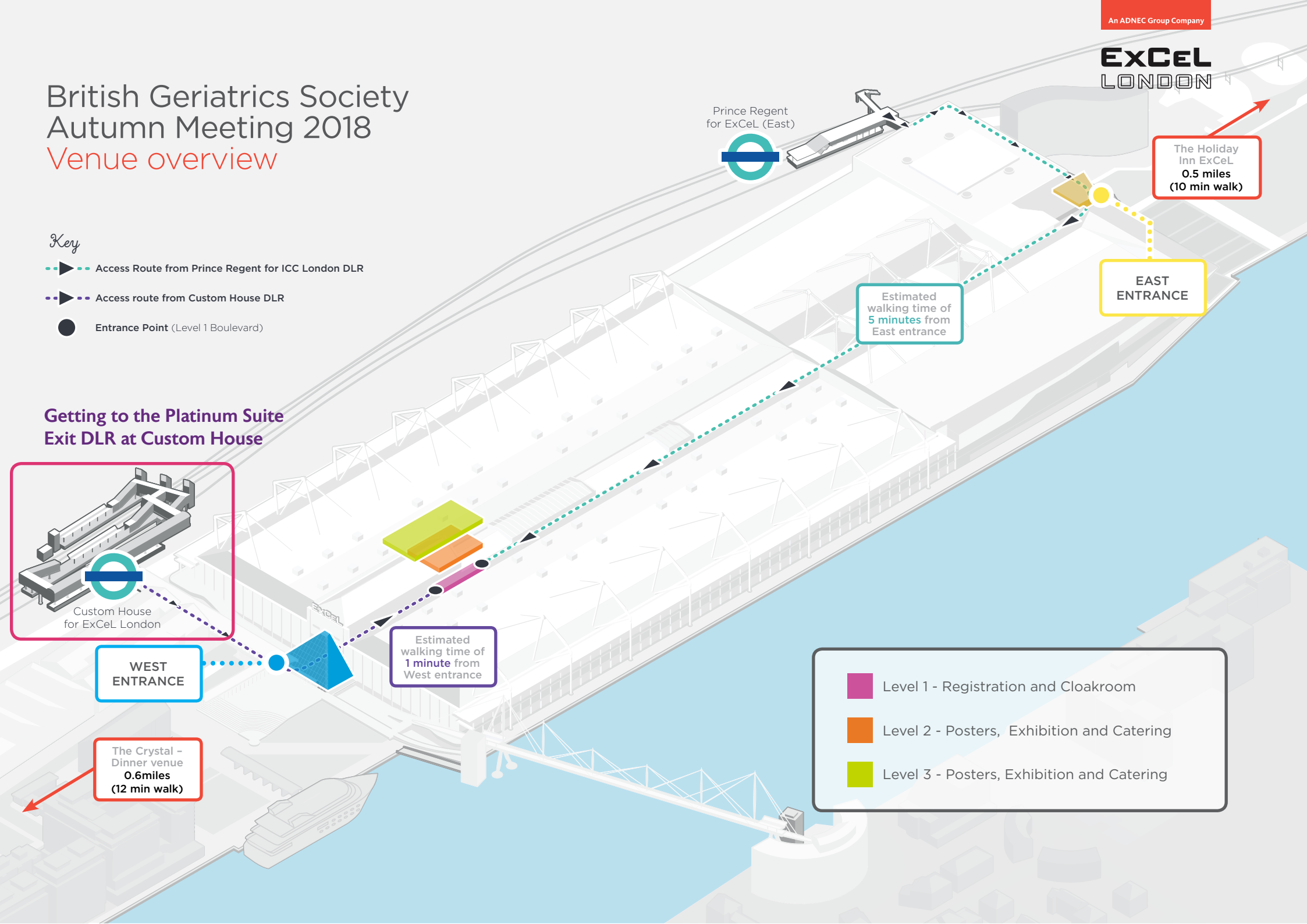
Custom House
for ExCeL London

WEST
ENTRANCE

Estimated
walking time of
1 minute from
West entrance

The Crystal -
Dinner venue
0.6miles
(12 min walk)

- Level 1 - Registration and Cloakroom
- Level 2 - Posters, Exhibition and Catering
- Level 3 - Posters, Exhibition and Catering

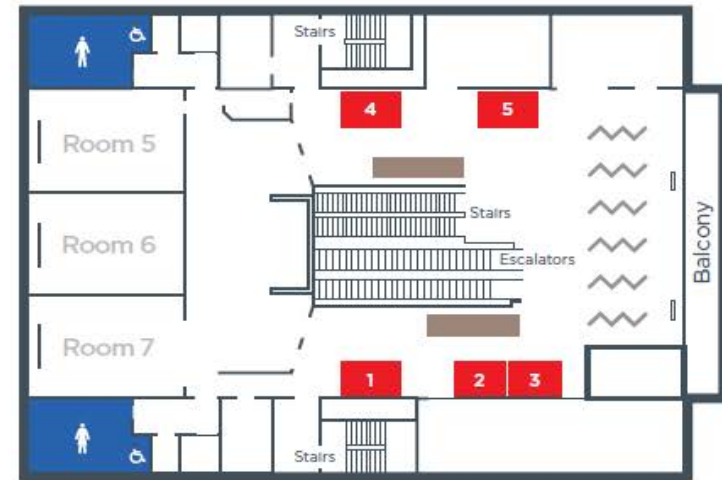


Platinum Suite

Level 2

Posters, Exhibition
and Catering

- Posters
- Catering
- Exhibition

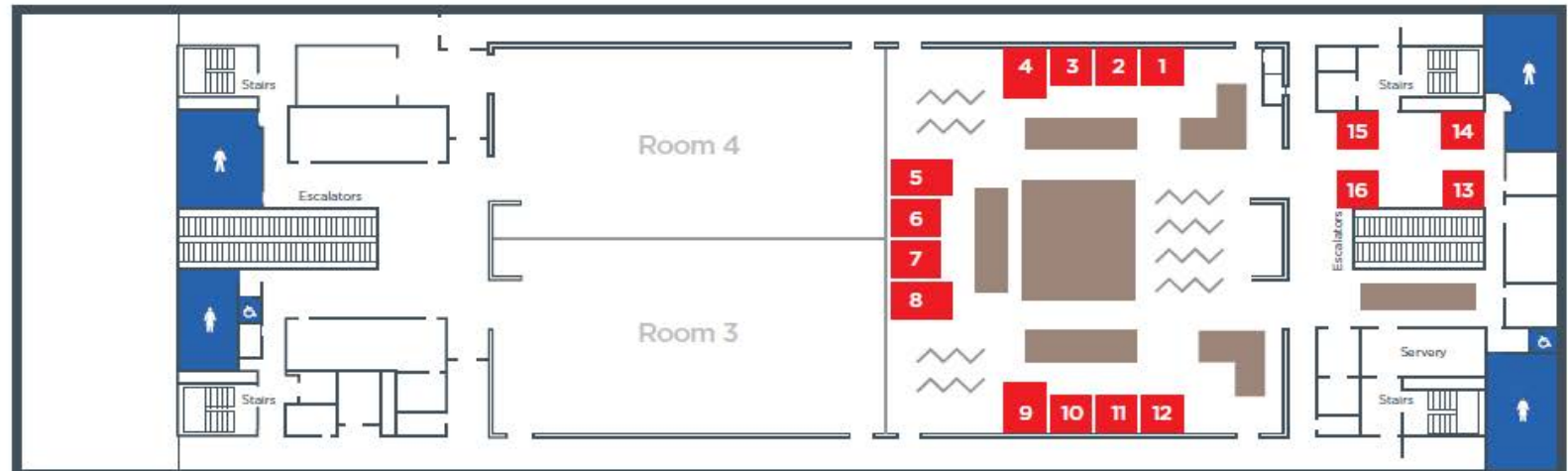


Platinum Suite

Level 3

Posters,
Exhibition
and Catering

- Posters
- Exhibition
- Catering



Conference programme

Wednesday, 14 November 2018

08.15 **Registration**, Registration on ground floor and coffee on Platinum suite level 2 & 3

09.00 **Presidential address**, room 3

09.30 – 11.00	Community Geriatric Medicine The emergency services Chair: Dr Adam Gordon Venue: Room 3	Anaemia Chair: Khai Lee Cheah Venue: Room 4
	<p>09:30 Fire Services – Hampshire Mr Rob Cole, Head of service: Community Safety and Mr Nigel Cooper, Group manager, Hampshire Fire and Rescue Service</p> <p>10:00 Ambulance Service Ms Carol Robertson, Community specialist paramedic, North West Ambulance Service</p> <p>10:30 Policing and mental health: not just doing the wrong thing righter Chief Inspector Michael Brown OBE, Mental health coordinator, College of Policing and National Police Chiefs Council</p>	<p>09:30 Anaemia in the older population – how big is the problem? Prof Dan Lasserson, Professor of ambulatory care, Institute of Applied Health Research, University of Birmingham and OPAL service, University Hospitals Birmingham NHS Foundation Trust</p> <p>10:00 Anaemia and GI tract Dr Rupert Negus, Consultant Gastroenterologist, Royal Free Hospital</p> <p>10:30 Anaemia and renal disease Prof Edwina Brown, Professor of renal medicine, Imperial College London and consultant nephrologist, Hammersmith Hospital</p>

11.00 **Refreshments break**, Exhibition area Platinum suite level 2 & 3

11.30 – 13.00	Community Geriatric Medicine MDT working Chair: Dr Shelagh O’Riordan Venue: Room 3	Anaemia Chair: Pandora Wright Venue: Room 4
	<p>11.30 Achieving system wide change at the interface between health and social care – lessons from the PEACH study Dr Adam Gordon, Clinical Associate Professor in Medicine of Older People, University of Nottingham</p> <p>12.00 Professional care workers - an invaluable resource in geriatric care Ms Karolina Gerlich, CEO and founding director, National Association of Care and Support Workers</p> <p>12.30 Radical MDT working- Frailty Support Team Ms Esther Clift, Consultant practitioner in frailty, Southern Health NHS Foundation Trust</p>	<p>11.30 Anaemia and the ageing bone marrow Dr Simona Deplano, Consultant haematologist, Imperial College Healthcare NHS Trust</p> <p>12.00 Patient blood management Prof Mike Murphy, Professor of blood transfusion medicine, University of Oxford and President, American Association of Blood Banks</p> <p>12.30 Q&A</p> <p>12.45 SIG Business meeting</p>

13.00 **Lunch**, Exhibition area Platinum suite level 2 & 3


Conference programme

Wednesday, 14 November 2018

14.00 – 15.30	Community Geriatric Medicine GeriGPs Chair: Dr Liz Lawns Venue: Room 3	Heart Failure Chair: Dr Shahbaz Roshan Venue: Room 4
	<p>14.00 Bringing primary care on to the ambulance – a project in NCL Dr Lyann Gross, General Practitioner, James Wigg Group Practice</p> <p>14.30 Why should GPs use data to identify frail older patients and what then? Dr Eva Kalmus, Interface medicine general practitioner and Co-Chair GeriGP group</p> <p>15.00 A GPs approach to quality end of life care in care homes Dr Maggie Keeble, Care home general practitioner and clinical lead for ICOPE Worcestershire, Co-Chair GeriGP group</p>	<p>14.00 Interpretation of heart monitoring-who needs a pacemaker? Dr Derek Connelly, Consultant Cardiologist, Golden Jubilee National Hospital</p> <p>14.30 When is a fall not a fall? Multidisciplinary management of syncope Dr Lara Mitchell, Consultant Geriatrician, Queen Elizabeth University Hospital</p> <p>15.00 Acute Coronary Syndrome or Troponinitis? A rational approach to management Dr Iqbal Malik, Consultant Cardiologist and Clinical Lead for Structural Heart Disease, Imperial College Healthcare NHS Trust</p>

15.30 **Refreshments break**, Exhibition area Platinum suite level 2 & 3

16.00 – 17.00	Community Geriatric Medicine Vanguard case study: Tower Hamlets Together Chair: Dr Claire Dow Venue: Room 3	Heart Failure Chairs: Dr Shahbaz Roshan and Dr Lara Mitchell Venue: Room 4
	<p>16.00 Physician Response Unit (PRU) Dr Tony Joy, Consultant in emergency medicine and clinical lead for the Physician Response Unit, Barts Health NHS Trust & London's Air Ambulance</p> <p>16.20 Community nursing teams Ms Caroline Ogunsola, Head of quality, compliance and transformation and Ms Comfort Ekwueme, Team leader, Tower Hamlets Community Health Services</p> <p>16.40 Admission avoidance and discharge service (AADS) / Rapid Response team Ms Fiona Davies, Clinical lead admission avoidance & discharge service, Tower Hamlets Community Health Service</p>	<p>16.00 How do you optimise heart failure therapy in older patients? Dr John Baxter, Consultant geriatrician, Sunderland Royal Hospital</p> <p>16.30 How do we train the heart failure team of tomorrow? Prof Theresa McDonagh, Professor of heart failure and consultant cardiologist, King's College London</p>

17.00 – 18.00	<p>Sponsored Symposium</p> <p>Ferring Pharmaceuticals</p> <p>A Debate: Shifting the paradigm for managing Nocturia due to Nocturnal Polyuria - where should the focus be?</p> <p>Chaired by Susie Orme. Speakers: Mr Dudley Robinson; Dr Sanjay Suman; Dr Jonathan Rees; and Mr Nimalan Arumainayagam</p> <p>Venue: Room 5/6/7</p>	
		

18.00 **Drinks Reception**

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19.00 Venue: ExCel Exhibition area Platinum suite level 2
Open to delegates who have indicated their attendance during registration and those attending the symposium

Conference programme

Thursday, 15 November 2018

07.30 **Registration**, Registration on ground floor and coffee on Platinum suite level 2 & 3

08.00 **Policy breakfast**, Room 5/6, all welcome

09.00 – 10.30	Session B Association of Academic Geriatric Medicine symposium Chairs: Prof David Stott and Prof Avan Sayer Venue: Room 3	Session C Bereavement Chair: Dr Mark Taylor Venue: Room 4
	<p>09.00 HoW-CGA – an overview Prof Simon Conroy, Professor of geriatric medicine, University of Leicester</p> <p>09.05 Current care provision – a UK survey Prof Helen Roberts, Professor of medicine for older people, University of Southampton</p> <p>09.20 Identifying frailty in acute hospitals using routine data Dr Thomas Gilbert, Consultant geriatrician, Hospices Civils de Lyon and honorary clinical research fellow, University of Leicester</p> <p>09.45 Formative evaluation of the HoW-CGA toolkit – taking CGA hospital wide? Prof Graham Martin, Director of Research, THIS Institute, University of Cambridge and Professor of Health Organisation and Policy, University of Leicester.</p> <p>10.10 HoW-CGA – next steps Prof Simon Conroy, Professor of geriatric medicine, University of Leicester</p>	<p>09.00 Bereavement in older age Dame Barbara Monroe, Trustee, Marie Curie, special commissioner, Royal Hospital Chelsea and trustee, Compassion in Dying</p> <p>09.45 Information on bereavement support – how can HCP recognize and offer bereavement support including counselling Ms Letizia Perna-Forrest, Head of patient and family support, Royal Trinity Hospice and vice chair, Association of Bereavement Service Coordinators</p> <p>10.05 Bereavement in older men: delivering practical and emotional support Ms Janet Morrison, Chief executive, Independent Age</p>

10.30 **Refreshments break and poster viewing**, Exhibition area Platinum suite level 2 & 3

10.30 **Presidential poster round**, Exhibition area Platinum suite level 3

12.00 – 13.00	Session D Comprehensive geriatric assessment Chair: Dr Kalman Kafetz Venue: Room 3/4	Session E Trainee's Session Chair: Dr Stephen Lim Venue: Room 5/6
	<p>12.00 How to undertake CGA in the community Dr Claire Dow, Community geriatrician, Barts Health NHS Trust</p> <p>12.30 CGA – What's so comprehensive about comprehensive geriatric assessment? Dr Naomi Fox, Consultant; Ms Julia Folder, Senior physiotherapist; and Ms Kerry Porter, Advanced nurse practitioner, Poole Hospital</p>	<p>12:00 Geriatric medicine training in the UK Dr Zoe Wyrko, Associate medical director and consultant physician, University Hospital Birmingham</p> <p>12:30 Trainees update and trainees' council election</p>

13.00 **Lunch**, Exhibition area Platinum suite level 2 & 3

13.00 **CANH: ethics, law and new guidelines clinic**, Room 5/6

Conference programme

Thursday, 15 November 2018

<p>14.00 - 15.00</p> <p>Session F Rheumatology Chair: Dr Jennifer Burns Venue: Room 3/4</p>	<p>Session G Clinically assisted nutrition and hydration: new BMA guidelines Chair: Dr Shuli Levy Venue: Room 5/6</p>	<p>Workshop Urodynamics Venue: Room 7</p>
<p>14.00 Back pain in older people Mr Julian Leong, Consultant spinal surgeon and honorary senior lecturer, Royal National Orthopaedic Hospital</p> <p>14.30 Biologics and inflammatory arthritis Dr Christopher Holroyd, Consultant rheumatologist, University of Southampton</p>	<p>14.00 CANH: Ethics, Law and New Guidelines Dr Shuli Levy, Consultant geriatrician, Imperial College Healthcare NHS Trust and chair, BGS ethics and Law SIG; Dr John Chisholm CBE, Chair Medical Ethics Committee, British Medical Association; and Veronica English, Head of medical ethics and human rights, Policy Directorate, British Medical Association</p>	<p>14.00 Initial assessment and management of lower urinary tract symptoms</p> <p>14.15 Urodynamics</p> <p>14.30 Older adult specific guidelines, recommendations and practicalities in clinics</p> <p>14.45 Case studies</p> <p>Ms Angela Rantell, Lead nurse urogynaecology and nurse cystoscopist, Kings College Hospital and Mr Dudley Robinson, Consultant urogynaecologist and honorary senior lecturer, Kings College Hospital</p>

15.00 **Refreshments break and poster viewing**, Exhibition area Platinum suite level 2 & 3

<p>15.30 - 16.30</p>	<p>Guest Lecture New thinking on the measurement and monitoring of healthy ageing Chair: Prof Tash Masud Venue: Room 3/4</p> <p>Dr John Beard, Director Ageing and Life Course Department, World Health Organisation</p>
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<p>16.30 - 17.30</p>	<p>Sponsored Symposium Bial</p> <p>Non-invasive options for "wearing off" in Parkinson's Where do the most recent therapeutics options fit in? Speakers: Dr Francesca Morgante and Mrs Hannah Martin</p> <p>Venue: Room 5/6/7</p>	 Keeping life in mind.
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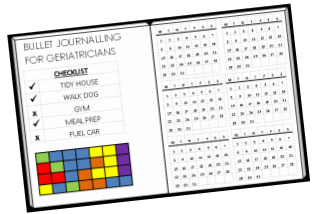
18.30 **Conference evening reception** Venue: The Crystal London

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21.30 **Prepaid tickets will be required.** Dress-code is smart casual

<p>Green wall lounge</p> <p>18.30 Arrival drinks & live music</p> <p>18.50 Welcome speeches</p> <p>19.00-21.00 Live music</p> <p>19.50 Medals ceremony</p>	<p>Pumpkin lounge</p> <p>19.00 HCOP Speed dating Networking activity bringing together healthcare professionals to share ideas and expand their networks of contacts and resources</p> <p>20.10 Silent disco</p>	<p>Exhibition</p> <p>19.00 Treasure hunt Follow the clues in the exhibition to find the treasure. The first team to find it takes it home.</p> <p>19.00 - 21.20 Free access to the interactive exhibition space for guests.</p>
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SESSIONS

1100
BULLET JOURNALLING
FOR GERIATRICIANS



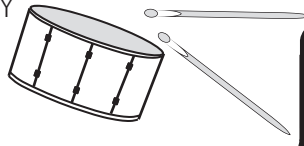
WITH BGS FRINGE TEAM



G
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1130

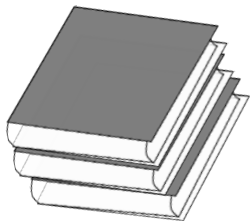
1300
HEARING AIDS, AUDIOLOGY & DRUMMING
WITH ALEXANDRA LYNDSAY



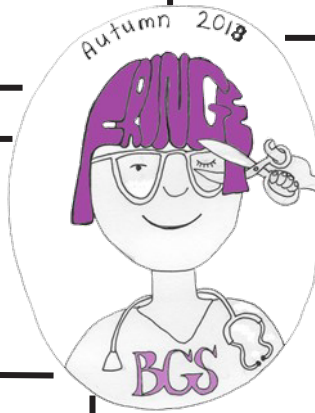
1500
PERFORMING MEDICINE



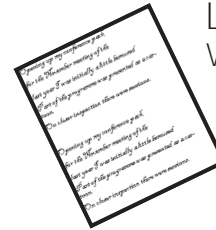
1645
PHOTOGRAPHY COMPETITION RESULTS



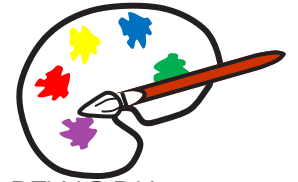
1700-END
BOOK CLUB WITH THE END IN MIND
WITH BGS FRINGE TEAM



EXHIBITION AREA



LIMERICK
WITH LUCY JONES

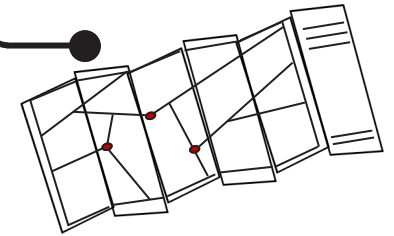


ARTWORK
WITH JESSICA PINTO



AUDIOLOGY
WITH ALEXANDRA LYNDSAY

THOUGHT MAP
WHAT I FEEL ABOUT AGING



PHOTOGRAPHY
COMPTITION DISPLAY



WHATS CAUGHT YOUR ATTENTION
&
MADE AN IMPACT
IN THE LAST 24 HOURS

SESSIONS

11:00 Bullet journaling for geriatricians

Perfect for list lovers and note takers. And those who want to use their phone less. Bullet journaling is a life organisation system with a difference

11:30 Gaming

Come and join us for games of uno, dobbie and bananagrams. Learn the rules and take some joy back to your wards. Games will be left out all day

13:00 Audiology and drumming: think pink project

Come and join in with some hand drumming! The Think Pink project between Senior Adult Medical Services and Audiology at Ashford & St Peter's Hospitals highlights communication problems and seeks to help address the common problem of lost hearing aids on wards.

15:00 Performing medicine

Performing Medicine exists to support health professionals to provide high-quality, compassionate care. We pursue this mission through arts based training and courses, research, advocacy and public events. Through practical exercises and lateral-learning techniques, we nurture the flexibility, adaptability and responsiveness required to thrive within demanding healthcare environments.

17:00 Book Club

Join us to discuss "With the end in mind" by Kathryn Mannix

EXHIBITIONS

The MDT by Lucy Jones

An MDT-themed limerick

Artwork by Jessica Pinto

Embroidered textile and written composition inspired by my first home visit

Audiology and drumming: think pink project

See information under sessions

Photography competition display

Come and see the entries for our competition challenging perceptions of ageing #nomorewrinklyhands

Thought map "How I feel about ageing"

Whats it's like to be 100?

We present a selection of quotes from centenarians explaining how they feel about being 100.

After reading them we ask you to reflect on how you feel about ageing and contribute to a thought map.


What's caught your attention and made an impact on you in the last 24hrs

Come and contribute to our interactive display, share what's made an impact on you in the last 24hrs and learn from others' experiences

Conference programme

Friday, 16 November 2018

07.30 **Registration** Registration on ground floor and breakfast on Platinum suite level 2 & 3

08.00 - 09.00	<p>Sponsored Symposium</p> <p>AbbVie</p> <p>Panel discussion: Optimising patient outcomes in advanced Parkinson's disease. Why? When? How? AbbVie invite you to an interactive symposium where you will have the chance to ask your questions to leading specialists in the field of complex Parkinson's disease.</p> <p>Chaired by: Dr Robin Fackrell Speakers: Dr Robin Fackrell, Dr Laura Daunt, Mr Neil Barua, Dr Jonathan Evans and Ms Alison Leake</p> <p>Venue: Room 5/6/7</p>	
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09.00 - 10.30	Session J Neurology Chair: Dr Atef Michael Venue: Room 3	Session I Sarcopenia and frailty - research into practice Chairs: Prof Miles Witham and Prof Avan Sayer Venue: Room 4	Clinical quality Platform presentations Chair: Dr Tom Bartlett Venue: Room 5/6/7
	<p>09.00 Multiple Sclerosis - making progress through trials Dr Jeremy Chataway, Consultant neurologist, National Hospital for Neurology and Neurosurgery/UCLH</p> <p>09.45 Abstract 143: Practices, issues and possibilities at the interface between geriatrics and palliative care: an exploratory study (InGaP) Rebekah Schiff</p> <p>10.00 Abstract 142: Time to redefine initial orthostatic hypotension in older adults? Ciaran Finucane</p> <p>10.15 Abstract 141: What keeps you sharp? People's views about preserving thinking skills in old age Malwina Niechcial</p>	<p>09.00 New developments in sarcopenia: findings from the second European Working Group on Sarcopenia in Older People (EWGSOP) Dr Alfonso Cruz-Jentoft, Head of geriatric department, Hospital Universitario Ramón y Cajal</p> <p>09.30 A life course approach to sarcopenia: informing future interventions Dr Richard Dodds, Intermediate clinical fellow, Newcastle University and honorary consultant, Newcastle upon Tyne Hospitals NHS Foundation Trust</p> <p>09.45 Managing hypertension in older people with frailty - lessons from the literature Mr Oliver Todd, Dunhill Medical Trust doctoral research fellow, University of Leeds and Bradford Royal Infirmary</p> <p>10.00 Results of the SIG sarcopenia and frailty survey + next steps for the SIG Dr Miles D. Witham, Professor of trials for older people, Newcastle University</p> <p>10.20 SIG Annual General Meeting Dr Miles D. Witham, Professor of trials for older people, Newcastle University and Prof Avan Sayer, Professor of geriatric medicine, Newcastle University</p>	<p>09.00 BGS rising star award for clinical quality presentation Dr Ruth Law, Consultant in care of older people and clinical lead, Integrated Community Ageing Team (ICAT)</p> <p>9.15 Abstract 139: SHOP-75: safer handover for older people 75+ Charles Earnshaw</p> <p>9.30 Abstract 140: Head over heels Amanda Crawford</p> <p>9.45 QI and ge and Ageing Prof Finbarr Martin, Emeritus geriatrician and professor of medical gerontology, Guy's & St Thomas' NHS Foundation Trust and KCL</p> <p>10.00 Quality improvement and delirium Dr Emma Vardy, Consultant geriatrician and clinical dementia lead, Salford Royal NHS Foundation trust and Greater Manchester and Eastern Cheshire Strategic Clinical Network</p> <p>10.20 Q&A</p>

Conference programme

Friday, 16 November 2018

10.30 **Refreshments break**, Exhibition area Platinum suite level 2 & 3

11.00 - 12.30	Session L	Session M	Workshop
	<p>Research platforms Chair: Dr Oliver Todd Venue: Room 5/6</p> <p>11.00 Abstract 144: A prospective study on factors predicting early functional outcomes of hip fracture rehabilitation in a Singapore community hospital Kiat Sern Goh</p> <p>11.15 Abstract 145: Abnormal diurnal blood pressure variability in patients with recent delirium Elaine Shanahan</p> <p>11.30 Abstract 146: A grounded theory approach to understanding the role of medication safety within a hospital early discharge team Heather Smith</p> <p>11.45 Abstract 147: Early life risk factors for symptoms of depression and anxiety in later life: analysis of 4 cohort studies Ellen Backhouse</p> <p>12.00 Abstract 148: Medication-related harm due to non-adherence may explain the relationship between polypharmacy and mortality Nikesh Parekh</p> <p>12.15 Abstract 149: Did you mean to make me bleed? Treating frail older people with NSTEMI carries a high risk of bleeding Sean Ninan and Joshua Michaels</p>	<p>Perioperative Medicine Chair: Dr Jugdeep Dhese Venue: Room 3/4</p> <p>11.00 POPS OOPE, developing the future workforce Dr Magda Sbai and Dr Cathryn Mainwaring, POPS clinical fellows, Guy's & St Thomas' NHS Foundation Trust</p> <p>11.30 Perioperative management of diabetes Dr Tess O'Halloran, POPS Registrar, Guy's & St Thomas' NHS Foundation Trust</p> <p>11.50 Can POPS work at a district general hospital? Dr Catherine Meilak, POPS Consultant and Dr Anna Whittle, Consultant Geriatrician, Dartford and Gravesham NHS Trust</p> <p>12.20 Abstract 150: The Canterbury Community Rehabilitation, Enablement and Support Team (CREST) service: A novel service to support wellbeing and independence in the community Claire Heppenstall</p>	<p>Vascular disease Venue: Room 7</p> <p>Aortic Disease in older people Ms Meryl Davis, Consultant vascular surgeon, Royal Free London NHS Foundation Trust</p>
12.30 - 13.15	<p>Trevor Howell Guest Lecture</p> <p>Intrinsic ageing – clinically important but often ignored Chair: Dr Eileen Burns Venue: Room 3/4</p> <p>Prof David Stott, Professor - David Cargill Chair of Geriatric Medicine, Institute of Cardiovascular and Medical Science, University of Glasgow</p>		

13.15 **BGS AGM**, Room 3/4, Open to all BGS members

13.30 -	Sponsored Symposium
14.30	<p>Profile Pharma Ltd</p> <p>Managing Parkinson's Disease across the Spectrum Interactive case studies</p> <p>A one hour symposium focussing on a series of three complex interactive Parkinson's Disease case studies using interactive voting</p> <p>Speaker: Dr Emily Henderson</p> <p>Venue: Room 5/6/7 Lunch will be provided in the room for the symposium's attendees</p>

13.30 **Lunch**, Exhibition area Platinum suite level 2 & 3

14.30 -	Session N
16.00	<p>Movement disorders</p> <p>Chair: Dr Emily Henderson Venue: Room 3/4</p>

	<p>14.30 Update on dementia with lewy bodies Dr Rimona Weil, Consultant neurologist and Wellcome clinician scientist, National Hospital for Neurology and Neurosurgery</p> <p>15:00 Driving with Parkinson's disease Ms Helen Mann, Occupational Therapist, Driving and Mobility</p> <p>15.30 Palliative care in PD Dr Ed Richfield, Consultant geriatrician, North Bristol NHS Trust</p>
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16.00 **Close of meeting**

Movement Disorders Meeting

1 February 2019, Birmingham

**Organised by the
BGS Movement Disorders Section**



BGS

British Geriatrics Society
Improving healthcare for older people



**MOVEMENT
DISORDER
SECTION**

A Specialist Group of the
British Geriatrics Society

The meeting highlights current clinical practice and provides a platform to present research outcomes and showcase successful service delivery. The intended audience is healthcare professionals working in the field of movement disorders. The programme enables a multidisciplinary audience of healthcare professionals to share their experiences of best clinical practice.

Reasons to attend:

- Understand more on movement disorders in older people
- Hear focused presentation on research and clinical effectiveness projects
- Network and socialise with other healthcare professionals working in this area of older people medicine

Registration and programme available on the BGS website
Accreditation will be applied from the RCP (London)



ENGAGE IN THE RIGHT CONVERSATIONS

Experts in Parkinson's

BGS Symposium 2018

**Register your interest
now by emailing:**

engage@sciterion.eu

Your chance to ask **your
questions** to experts in the
field of Parkinson's

Friday 16 November 2018,
08:00–09:00

Room 5/6,
Platinum Suite,
Level 2

Chaired by:

Dr Robin Fackrell

Consultant Physician
Royal United Hospital, Bath



Mr Neil Barua

Consultant Neurosurgeon
Southmead Hospital, Bristol



Dr Laura Daunt

Consultant Geriatrician
Queen's Medical Centre, Nottingham



Dr Jonathan Evans

Consultant Neurologist
Queen's Medical Centre, Nottingham



Ms Alison Leake

Movement Disorder
Specialist Nurse
St George's University Hospitals
NHS Foundation Trust, London



**Optimising
patient outcomes
in advanced
Parkinson's**

What? When? How?

About the speakers

Wednesday

Mr Rob Cole

Rob Cole is a Group Manager for Hampshire Fire and Rescue Service (HFRS). Overall he is responsible for delivering the Medical Response including Clinical Governance and Fire as a Health Asset prevention work.

Ms Carol Robertson

Carol Robertson is a Community Specialist Paramedic, Knutsford and Macclesfield for the North West Ambulance Service (NWS). She is currently studying Advanced Clinical Practice at the University of Bolton. She has helped develop eLearning modules for frailty, pressure sores and delirium within her ambulance trust and delivers falls and frailty awareness to ambulance clinicians, care and nursing home staff, independent living communities, older persons groups such as lunch clubs, Womens Institute, U3A.

Speaker abstract:

The part paramedics and ambulance clinicians can play (and their limitations) in helping recognise older patients who may be at risk from frailty syndromes and what to do about it; engagement with care providers and approaches to raising awareness of frailty syndromes with the general public.

Chief Inspector Michael Brown OBE

Michael is a Chief Inspector in West Midlands Police, currently seconded to the College of Policing and the National Police Chiefs Council as the Mental Health Coordinator. He is the author of the national guidelines for the police service on mental health, largely based on his blog, 'MentalHealthCop'.

Speaker abstract:

- Legal perspective on healthcare issues relating to mental health and the elderly.
- The role of the police in supporting the health service.
- How health can learn from untowards incidents in policing
- How to improve partnership working.

Prof Dan Lasserson

Dan Lasserson works clinically and academically at the interface between primary care and acute medicine, with a focus on older people living with frailty. He has set up and delivered acute ambulatory care from both community and acute settings and now works in the OPAL team at the Queen Elizabeth Hospital in Birmingham. His research interests include integrated models of acute and primary care for older people, blending hospital and community approaches and utilising point of care diagnostic technology. He leads the Ambulatory Care and Future Hospital theme in the NIHR Community Healthcare MedTech and IVD Cooperative and is the academic lead for the Health and Wellbeing Pillar in Birmingham Health Partners.

Speaker abstract:

- Anaemia is common in the older person but differentiation of the underlying cause is not systematically achieved
- Substantial variation exists in the community approach to diagnosis
- More research is needed to support accurate diagnosis of underlying causes of anaemia at scale and the monitoring of response to therapy

Dr Rupert Negus

Dr Rupert Negus is a consultant physician and gastroenterologist at the Royal Free Hospital, Hampstead. He is the clinical director for acute medicine and health services for elder people and has had a long term interest in the management of bleeding from the gastrointestinal tract both from the point of view of the specialist and the generalist. He is currently supervising an audit of the management of non-variceal GI tract bleeding on the Royal Free site and would hope to use these contemporaneous data to inform a discussion of the problems and pitfalls of this condition in older people.

Speaker abstract:

This session will try to cover the major gastrointestinal causes of anaemia in the older population and will aim to cover the important causes of blood loss, their investigation and management and other causes of anaemia related to the GI tract.

Prof Edwina Brown

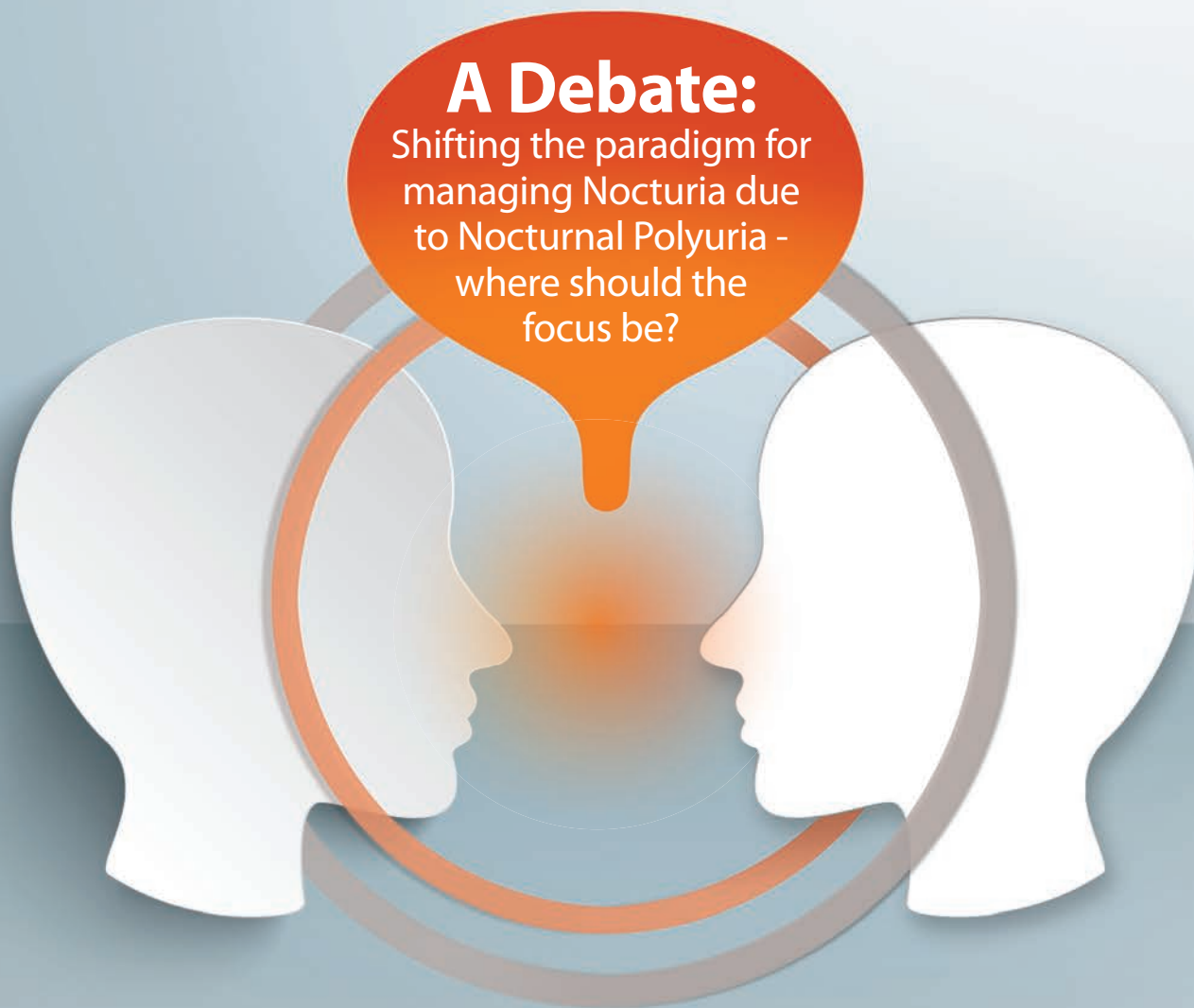
Professor Edwina Brown's main research interests are peritoneal dialysis, dialysis outcomes in the elderly and renal palliative care. She is the principal investigator for FEPOD (Frail Elderly Patient Outcomes on Dialysis) comparing outcomes on assisted PD and haemodialysis with conservative care. She is currently working on a project integrating renal and elderly care. She organises an annual meeting on Renal Supportive Care (now in its 15th year), and co-organises the UK PD Academy. She has published extensively on peritoneal dialysis and dialysis in the elderly and is the author/ editor of several books.

Dr Adam Gordon

Dr Adam Gordon is Clinical Associate Professor in Medicine of Older People at the University of Nottingham and Derby Teaching Hospitals NHS Foundation Trust. He has been conducting research in Care Homes since 2008 including the following studies: Care Home Outcome Study, Staff Interviews in Care Homes, the Optimal study, Proactive Healthcare in Care Homes (PEACH) study and the LPZ and UK Care Homes (LAUNCH) Study. He was a co-investigator on the Falls in Care Homes (FiCH) feasibility RCT and now the multicentre cluster randomized controlled trial of a Guide to Action for Falls in Care Homes (FiNCH) study. He leads the Enabling Research in Care Homes (EnRICH) network for Nottingham and Derbyshire and is a collaborator on the international WE-THRIVE project to establish agreed core data elements for long-term care research internationally.

Speaker abstract:

- Implementing change in long-term care homes is notoriously difficult because of the multiple stakeholders involved.
- This talk will discuss lessons from the Proactive Healthcare in Older People Living in Care Homes (PEACH) study which investigated quality improvement collaboratives as a means of implementing Comprehensive Geriatric Assessment in care homes across South Nottinghamshire.
- Case studies from the individual collaboratives will be provided as well as overarching lessons about how to achieve quality improvement at the boundary between health and social care.



AGENDA + FACULTY

- 17:00 – 17:05 CHAIR’S WELCOME AND INTRODUCTION**
Dr Susie Orme
- 17:05 – 17:15 I AM THE BEST: THE UROGYNACOLOGIST’S PERSPECTIVE**
- 17:15 – 17:25 I AM THE BEST: THE UROLOGIST’S PERSPECTIVE**
- 17:25 – 17:35 I AM THE BEST: THE GERIATRICIAN’S PERSPECTIVE**
- 17:35 – 17:45 I AM THE BEST: THE GP’S PERSPECTIVE**
- 17:45 – 17:55 QUESTIONS FROM THE FLOOR**
- 17:55 – 18:00 CASTING VOTE AND CLOSING COMMENTS**



Dr Susie Orme (Chair)
Consultant in Elderly Medicine
Barnsley Hospital



Mr Dudley Robinson
Consultant Urogynaecologist
Kings College Hospital
London



Dr Sanjay Suman
Consultant Geriatrician
Medway Hospital NHS
Foundation Trust



Dr Jonathan Rees
General Practitioner
Nailsea, Bristol, and Chair of
the Primary Care Urology Society



Mr Nimalan Arumainayagam
Consultant Urologist, Ashford
and St Peters Hospitals NHS
Foundation Trust

Prescribing information is available at the meeting

This symposium is organised and funded by Ferring Pharmaceuticals
NOQ/727/2018/UKa Date of preparation: May 2018



About the speakers

Ms Karolina Gerlich

Karolina is a proud care worker and one of the founding directors of the National Association of Care & Support Workers. She has worked in the care industry for the last eight years mainly as a home care worker. She is a psychology student and she has also finished BTEC HND in Health and Social Care. In her work she is focused on care delivery with respect and dignity and empowering clients to live their life to the full. Her work with the association focuses on promoting better training for care workers, professional registration and better working conditions. The best care can be delivered only if we treat care workers with the respect and dignity that we expect them to guide their work.

Speaker abstract:

Professional care workers - an invaluable resource in geriatric care.

- Close relationship between care workers and patients means they have a lot of helpful information that can help manage patients in the hospital, including discharge appointments.
- Care workers know patients homes and can help negotiate with patients about getting what is needed for the to go home sooner.
- Care workers can help patients with physiotherapist and specialist post-discharge diets or medication at home.
- Care workers can help facilitate negotiating more difficult issues with patients as they already have their trust.

Ms Esther Clift

Esther Clift is a Consultant Practitioner in Frailty with Southern Health NHS Foundation Trust. She is developing a Multi Disciplinary Frailty Support Team to support older people to remain at home during an episode of decompensating frailty. Her research areas are around exercise uptake by older people, and spirituality in later life.

Speaker abstract:

This session will outline the working of the Frailty Support Team, and integration within a complex web of community care.

Dr Simona Deplano

Dr Deplano works as consultant haematologist at Hammersmith Hospital. She has a special interest in geriatric haematology. She runs a dedicated clinic for patients aged 75 or older with haematological disorders.

Dr Deplano completed her specialist training in Italy in 2006. She moved to the UK in 2007 to carry on laboratory research at Imperial College which led to the award of a PhD. Her research interests are: anaemia and bone marrow changes in the elderly, effects of age on chemo-related toxicity and how to prevent it.

Speaker abstract

- Age-related changes in the bone marrow
- Myelodysplastic syndromes and anaemia of chronic disease
- Anaemia in the frail and management options
- Our experience at Hammersmith Hospital

Prof Michael F. Murphy

Mike Murphy is Professor of Transfusion Medicine at the University of Oxford and Consultant Haematologist for NHS Blood & Transplant and Oxford University Hospitals. He is a recipient of the British Blood Transfusion Society's Kenneth Goldsmith Award, and co-founded the NHSBT Clinical Studies Unit, its Systematic Reviews Initiative for transfusion medicine and

the Transfusion Evidence Library (www.transfusionevidencelibrary.com). Professor Murphy chaired the UK National Institute for Health and Care Excellence (NICE) guideline on transfusion published in November 2015. He is current Chair of the international BEST Research Collaborative and President of the American Association of Blood Banks.

Speaker abstract:

- Understand the progress made in improving transfusion practice in England in the last 15 years.
- Consider the opportunities and challenges to delivering further improvements for improving transfusion practice with a focus on geriatrics.

Dr Eva Kalmus

Dr Eva Kalmus has been a "portfolio GP" for nearly 30 years. She undertook additional posts in Care of the Elderly early in her career and later provided medical input to inpatients at New Epsom and Ewell Community Hospital for 10 years. She was also a Wandsworth Community Ward GP within an MDT focussing on healthcare cost optimisation including admission avoidance. Working in Epsom and St Helier NHS Trust for some years, she has been a GP within the OPALS team, lead GP for a supported discharge and admission avoidance service and lead doctor in two newly established post-Acute wards.

Speaker abstract:

- GPs have an intuitive understanding of something now called "frailty"
- We are incentivised to identify patients with frailty using eFI followed by clinical correlation. Patients so identified need to be offered some further (evidence based) interventions but this can feel like just another job piled onto an already unmanageable workload.
- However, we can positively change the journey of these patients once we have a grip on what frailty is. Case studies:
- What GPs interested in providing person-centred care for older people need to know and what is still to be learnt. Work collaboratively with geriatrician colleagues including attending BGS events
- GeriGPs are becoming part of the answer: promoting different ways of working and preventing professional isolation for those already undertaking these new roles

Dr Lyann Gross

Lyann qualified from UCL in 2003 with distinction and gained her MRCP in 2012. After CCT she joined the James Wigg Practice in North London, a large teaching practice where she has been for the past 6 years. Concurrently, she has been leading on a project with London Ambulance Service since January 2017 aiming to develop the ambulance clinician workforce and improve multi-professional working. Lyann is passionate about bringing primary care to the ambulance clinician and looking at ways of integrating urgent & emergency care.

Speaker abstract:

- Have a deeper understanding of the workings of ambulance services and the interface between primary and secondary care.
- Understand the impact that shared understanding and mutual respect between frontline staff in different parts of the healthcare system can have on patient care, quality, cost and efficiency. Be able to appreciate how multi-professional working can enhance care delivery

About the speakers

- Be able to take away some top tips about how to develop your personal or organisational interactions with the ambulance service to improve staff satisfaction as well as patient safety and experience and quality of care delivery.

Dr Maggie Keeble

Dr Maggie Keeble works two days a week as a Care Home GP looking after 160 residents in five different homes. She has always had an interest in End of Life and Palliative Care and having done a Diploma in Palliative Care in 2012 she decided to leave her GP practice to focus on the Care of Older People and in particular on the area of Palliative and End of Life Care in Frailty. In addition she has recently taken up the role of Strategic Clinical Lead for Integrated Care for Older People living with Frailty in Worcestershire.

Dr Claire Dow

Dr Claire Dow is a Consultant Geriatrician at Barts Health NHS Trust and is based at the Royal London Hospital and the London Borough of Tower Hamlets. She works both in the community and the acute hospital and has an interest in how to identify frailty in the community to look after people better.

Dr Lara Mitchell

Consultant in Medicine for the Elderly at QEUH. Set up syncope service at Southern now QEUH. Runs weekly clinic with MDT including cardiology and neurology. Clinical lead at QEUH for acute site and set up Frailty service. Vice President cardiovascular SIG BGS.

Speaker abstract:

- Learn about guidelines for managing TLoC (transient loss of consciousness)
- Key ingredients to a multidisciplinary syncope service

Dr Tony Joy

Dr Tony Joy is a Consultant in Emergency Medicine at Barts Health NHS Trust and the Clinical Lead for the Physician Response Unit, an emergency response service that operates in collaboration with London's Air Ambulance, Barts Health NHS Trust and London Ambulance Service. He has a strong interest in developing Emergency Care such that the right care can be provided for patients at the time of need regardless of their whereabouts. He is interested in the inter-agency working between acute trusts, ambulance services and community providers, and believes that Emergency Departments are well placed to reach out and make a health impact in to their local communities.

Speaker abstract:

The Physician Response Unit: Taking the Emergency Department to the patient

- Demonstration of an innovative model of 'Community Emergency Medicine' that is making significant impact in support of emergency patients and the wider system
- Description of cases in whom the clinical trajectory can be augmented by coordinating community services instead of the default conveyance to an Emergency Department
- Outline the strategy and impact for targeted dispatch to the 250 highest users of the local emergency healthcare system.

Ms Caroline Ogunsola

Caroline is currently the Head of Quality and Compliance for Tower Hamlets Community services. She trained as a district and has worked in the National Health Service as a Service Manager and has undergone various training that promotes the wellbeing of the older adults for many years. She has extensive experience in community services and health and well-being of the local population. Academically, she holds a BSc degree in Community Health practice from the Surrey University and also holds a Master's degree in Professional Education from Kings College London. In recognition of her contribution to excellence care in the community and continuous improvement of quality, Caroline was awarded in 2017 with Queen's Nursing Institute award as a Queen's Nurse, a title she uses with great pride and honour. Caroline has worked extensively in the past 18 months project leading the piloting of the Neighbourhood Care community nursing model (Buurtzorg) model of care for adults in Tower Hamlets.

Speaker abstract:

The Neighbourhood Care Team (Buurtzorg) pilot presented an exciting opportunity for the Tower Hamlets Together Board to test out a new approach to delivering integrated community nursing and personal care around a GP practice in the borough. The pilot, and its accompanying evaluation, will allow the Board, and Health Education England, to consider whether the approach has the potential to address on a more substantive basis some of the current quality challenges facing health and care services in the borough, in London, and across England.

Those receiving community nursing services place a high value on caring for the whole person, particularly the way they enable people to continue living in their own homes. The good practice literatures often describes the characteristics of good care as "caring for the whole person", including taking a holistic, person-centred approach rather than a task-focused approach: seeing the person not just the need, continuity of care, a personal manner and approach, other elements including predictable and reliable visit times, contact with services between appointments, valuing and involving carers and family members, nurses acting as co-ordinators and advocates with excellent clinical competence. The Buurtzorg approach represents an opportunity to try out caring for the whole person, and tackle some of the nationally identified problems facing community nursing and home care services, and respond innovatively to the opportunities set out by the national policy and legislative context, and recognized good practice in Tower Hamlets borough.

Ms Comfort Ekwueme

Comfort is a registered nurse, and a District Nurse by background. She is also a Practice teacher for district nursing students. Comfort has undergone various training to be able to provide seamless care for patients in the community. She worked in the Neighbourhood Care team as one of the nurses who piloted the project. She will share her experience of working in a flat structured self-managing team, having trained in an hierarchical environment.

Ms Fiona Davies

Fiona Davies is the clinical lead for the Tower Hamlets AADS service, East London Foundation Trust. This integrated team works with people being discharged from the Royal London Hospital, incorporating the Discharge to Assess model and to avoid unnecessary admissions from the community. Fiona's background is district nursing and discharge planning. She has worked in the area

SYMPOSIUM



Non-invasive options for “wearing-off” in Parkinson’s

Where do the most recent
therapeutic options fit in?

A symposium at the **BGS Autumn Meeting**, London
Thursday 15th November 2018, 16:30-17:30, Room 5/6/7

Agenda

- 16:30 Welcome and introductions
Dr Francesca Morgante, St George’s University Hospitals NHS Foundation Trust
- 16:35 Current treatment options for managing wearing-off in patients with PD on levodopa
Dr Francesca Morgante, St George’s University Hospitals NHS Foundation Trust
- 17:00 Practicalities of treatment within clinical practice
Mrs Hannah Martin, University Hospital Coventry and Warwickshire NHS Trust
- 17:25 Summary and close
Mrs Hannah Martin, University Hospital Coventry and Warwickshire NHS Trust

This promotional symposium is
organised and funded by:

Bial

caring for your Health

About the speakers

of community rehabilitation for the last 6 years.

Speaker abstract:

Most people who receive the AADS service are in the older age group and the team works closely with the specialist older people's wards with the aim of enabling people to return to independence in the community or adapt to new circumstances they are presented with, for example memory impairment. One of the pathways is discharge to assess for continuing health care, which enables people to have their DST in the community rather than staying in hospital when this is not clinically necessary. The team uses a whole systems approach to enable the older person to achieve their goals. There is also a rapid response service, In-reach nurses and an admission avoidance team based in the emergency department.

Dr John Baxter

Dr John Baxter is a consultant geriatrician at Sunderland Royal Hospital. He is clinical lead for heart failure in older persons. He has been a member of the British Geriatrics Society for 22 years. He is past treasurer for the Cardiovascular Section of the British Geriatrics Society. He is a board member of the British Society for Heart Failure. He has provided clinical advice to NICE, the Department of Health and Hospice UK on the management of heart failure in older persons and also has given evidence to the All Party Parliamentary Group on heart failure management. He has an active research portfolio in heart failure in older persons.

Speaker abstract:

- How to establish an accurate diagnosis, which is essential in guiding optimum heart failure therapy in older persons.
- Approach to diuretic therapy in fluid overloaded treatment resistant heart failure patients.
- How to establish an elderly patient with heart failure due to left ventricular systolic dysfunction on optimum cardiac medication.

Thursday

Dr Thomas Gilbert

Dr Thomas Gilbert is a consultant geriatrician (Hospices Civils de Lyon, FRANCE), with interests in Health Services Research. Last year, he participated to the How-CGA project as a clinical research fellow under the mentorship of Professor Simon Conroy in the department of Health Sciences in Leicester, and has worked with Dr Jenny Neuberger and colleagues from the Nuffield trust (London) on the development of the Hospital Frailty Risk Score.

Speaker abstract:

This study developed and validated a Hospital Frailty Risk Score using routine data. The score identified older people at risk of frailty and adverse outcomes (30 day mortality, bed-days and readmission).

Prof Graham Martin

Graham Martin is Director of Research at THIS Institute (The Healthcare Improvement Studies Institute), University of Cambridge, a new Health Foundation-funded research institute which seeks to develop the evidence base for interventions and

approaches to improve healthcare safety and quality. He leads some of the Institute's applied research programmes and contributes to the Institute's strategy and development. He was previously Professor of Health Organisation and Policy at the University of Leicester, acting as Head of Department of Health Sciences from 2015 to 2018, and prior to that held research posts at Nottingham and Leicester. Graham's research interests are in the organisation and delivery of healthcare, and particularly the role of professionals, managers and patients and the public in efforts at organisational change. Primarily a qualitative researcher, he has long experience of undertaking research and evaluation in relation to healthcare improvement, from major policy-driven programmes to locally led initiatives.

Speaker abstracts:

This session will discuss findings from a recent formative qualitative evaluation of the use of a toolkit designed to assist in the implementing the principles of Comprehensive Geriatric Assessment in areas of the acute hospital not specialised in the care of older people. While the toolkit was well received, the evaluation found that several challenges—including misaligned perceptions of the role of CGA, the challenges of fitting further processes into tightly specified and time-limited pathways, and divergent views on the proper role of the specialist geriatrician—presented constraints on the toolkit's potential.

Prof Helen Roberts

Professor Helen Roberts is Professor of Medicine for Older People at the University of Southampton and national lead for the NIHR Comprehensive Research Network Ageing Speciality Group. Her research interests include the translation of research evidence on the assessment and management of sarcopenia and frailty in older people into clinical practice.

Speaker abstract:

A national survey of provision of acute care was developed, validated and sent to 175 Trusts. Service provision was patchy, poorly standardised, and in surgical and oncology settings, did not usually involve geriatric teams. Most services relied on clinical assessment processes to identify patients; 26% used a standardised method to identify frailty.

Prof Simon Conroy

Professor Conroy is an academic geriatrician based in Leicester, and has a clinical and research on urgent care for older people. He developed vertically integrated urgent care pathways for frail older people in Leicester – Interface Geriatrics.

Speaker abstract:

Overview: The HoW-CGA study was a partnership between the NIHR Clinical Research Network Ageing Specialty Group and the BGS, alongside other stakeholders. It sought to determine how best to generalise geriatric care in all parts of the acute hospital. This session will report on the study findings, and discuss next steps.

Next steps: The HoW-CGA study findings have informed the development of an exciting new initiative – the Specialised Clinical Frailty Network, which will be discussed. The Hospital frailty Risk Score is being embedded into NHS IT systems – we hope to have an example ready in time for the conference!

About the speakers

Dame Barbara Monroe

Barbara was a social worker for over 40 years. She joined St Christopher's Hospice, London in 1987 and was CEO there between 2000 and 2014. She has lectured on numerous national and international programmes and written extensively about psychological and social aspects of palliative care. Barbara was Vice Chair of the Commission on the Future of Hospice Care which reported in 2013 and has sat on a variety of national committees supporting the development of end of life care.

Speaker abstract:

This session will provide an overview of recent developments in our understanding of grief and bereavement and consider features specific to older age. It will examine research on risk factors for complicated grief and the efficacy of interventions.

Ms Letizia Perna-Forrest

Letizia Perna-Forrest is a clinical social worker and psychotherapist with over 15 years of experience in the non-profit/third sector as a clinician, clinical supervisor and educator. Presently Letizia is the Head of Patient and Family Support at Royal Trinity Hospice in London, the Vice Chair of the Association of Bereavement Service Coordinators (ABSCo) and the Vice Chair of Cruse Bereavement Care. Letizia is presently the clinical lead on an ethically approved research study aimed at understanding the potential benefits of virtual reality therapy in palliative care. Letizia is passionate about palliative care, bereavement and mental health.

Ms Janet Morrison

Janet Morrison is Chief Executive of Independent Age, a dynamic national older people's charity which is a thought leader on ageing and provides information, advice and friendship support to older people, their families and carers.

Janet is a founder member and Chair of the Campaign to End Loneliness - a coalition of over 10,000 organisations which raises awareness of loneliness in old age and what works to address it. She is also Chair of the Baring Foundation, an independent grant making trust which funds strengthening the voluntary sector, arts and international development; and a Director of Reconnections, a pilot social finance initiative (SIB) to tackle loneliness amongst older people. She is also Chair Elect of the Association of Charitable Foundations, the membership body for UK foundations and grant-making charities.

Janet was previously Deputy Chief Executive of NESTA - the National Endowment for Science Technology which promotes creativity and innovation in the UK. Prior to NESTA, Janet was senior adviser on UK Policy at the BBC and before that was Director of Policy and Research at NCVO.

Speaker abstract:

Bereavement in later life affects older people's wellbeing, mental health and risk of loneliness and impacts people differently. This session will look at the evidence of risks and impacts and effective preventive responses to help health professionals understand how to support older people, provide early interventions and to speak openly about end of life and grief.

Dr Claire Dow

Dr Claire Dow is a Consultant Geriatrician at Barts Health NHS Trust and is based at the Royal London Hospital and the London Borough of Tower Hamlets. She works both in the community and

the acute hospital and has an interest in how to identify frailty in the community to look after people better.

Speaker abstract:

This talk aims to show how comprehensive geriatric assessment can be undertaken in the community and the experience of the speaker in doing this. This includes:

- Working with community teams such as district nurses and therapists
- Experience of working with GPs and primary care nurses
- Local ways we have improved communication

Dr Zoe Wyrko

Dr Wyrko graduated from the University of Birmingham in 2000, was appointed as Consultant Geriatrician at the Queen Elizabeth Hospital Birmingham in 2009, and is now Associate Medical Director for Quality Development. She is currently Director of Workforce Planning for the BGS, and has previously served as Honorary Secretary and Chair of the Trainees Council.

Clinical interests are varied and include sessions as an acute physician running the Clinical Decision Unit, as well as establishing a specialised ward for looking after older people with 'delayed transfers of care'. This unit featured as an exemplar in the RCP Future Hospitals report. Her main priority and focus over the past few years has been development of the OPAL (older person's assessment and liaison) service at QEHB, which provides early CGA in the ED and CDU, to avoid unnecessary hospital admissions and reduce the risk of complications in older people living with frailty.

Mr Julian Leong

Julian Leong is a Consultant Spinal Surgeon and the Surgical Tutor at the Royal National Orthopaedic Hospital in Stanmore, his practice involves all aspects of spinal problems with children and adults. He is an Honorary Clinical Senior Lecturer at UCL, and his research interest is in Surgical Technology and Surgical Skills Training and Assessment. He completed his PhD thesis in 'Hand-eye coordination in Surgery' at Imperial College London. (Supervisors: Prof Ara Darzi, Prof Guang-Zhong Yang, and Prof Roger Emery). His specialist orthopaedic training was based at the UCLH/Middlesex rotation, which included Spinal Surgery training at Great Ormond Street Hospital, Whipps Cross University Hospital and the Royal National Orthopaedic Hospital at Stanmore. He completed fellowships at Great Ormond Street Hospital, Royal Devon & Exeter Hospital (Norman Capener Fellowship), and Hokkaido University (Sapporo, Japan).

Speaker abstract:

- Causes of back pain in older people
- Imaging modalities for back pain
- Treatment options

Dr Christopher Holroyd

Dr Holroyd is a Rheumatology Consultant at University Hospital, Southampton. He is the lead consultant for the Biological Therapies Service, which has received the British Society for Rheumatology Best Practice award, and was selected to represent Rheumatology at the House of Lords Innovation within the NHS event in 2015. Dr Holroyd has a keen clinical and epidemiology research interest focusing on inflammatory arthritis, biological

About the speakers

therapies and osteoporosis. He is a member of the British Society of Rheumatology guideline group and recently led the British Society for Rheumatology Biologic Safety Guidelines.

Dr John Chisholm

John Chisholm has been a member of the British Medical Association's Medical Ethics Committee from 2004 and its Chair from 2014. He is chairing the core group on clinically assisted nutrition and hydration. John has been a member of many national professional and Governmental bodies over the last 42 years. He was a member of the General Medical Council (1999-2003) and its Standards Committee. He has represented the BMA at a number of international human rights conferences.

John is a member of the Councils of the BMA (1981-82, 1988-2022) and the Royal College of General Practitioners (2005-2014, 2015-2021), has been a Vice-President of the BMA since 2007, and is Deputy Chair of the RCGP Trustee Board. He chaired the BMA's General Practitioners Committee (1997-2004) and was a GP negotiator (1990-2004). He led the negotiation of the new GP contract from 2001 to 2004.

Speaker abstract:

The BMA has been working with the Royal College of Physicians and the General Medical Council to develop new guidance for doctors on decisions about clinically assisted nutrition and hydration (CANH). The development of the guidance has been led by a small multi-disciplinary core group of representatives from the BMA, RCP and GMC, joined by five individuals invited to join in an advisory capacity on the basis of their experience from a legal, clinical and family perspective. We have been aided by a wider professional consultative group made up of over 60 senior individuals with experience of handling decisions about CANH, including doctors and nurses, allied health professionals, lawyers and representatives of organisations. In addition to consulting with individuals and organisations, we held focus group events with practising clinicians and a roundtable exercise with groups representing patients, and engaged on an individual level with families who have experience of these decisions. The guidance takes into account legal cases, including the Supreme Court's judgment in the case of Mr Y, which have determined that there is no requirement to go to court in any CANH cases, provided there is agreement about best interests and the proper process has been followed.

Dr Shuli Levy

Shuli Levy is a Consultant Geriatrician at Imperial college healthcare NHS Trust, London. Based at the Hammersmith hospital, she works predominantly in Cardiology liaison, running a pioneering integrated service embedded within the Cardiology department. She also provides liaison for Haematology and Renal medicine, and does acute medicine at St Mary's hospital. She is chair of the BGS Ethics and Law special interest group and has been working for several months as part of the core writing group on the new guidelines on Clinically Assisted Nutrition and Hydration.

Ms Angela Rantell

Angie gained a BSc (Hons) in Nursing Studies from King's College London in 2003. She started working in the field of women's health. Since 2007, she has been working in the Urogynaecology Department at King's College Hospital and is currently the lead

nurse / nurse cystoscopist. She is actively involved in research and is finalising a PhD investigating sexual function in women with overactive bladder. To date she has published 30 articles in peer reviewed journals and has written book chapters and contributed to National guidelines. As well as her clinical and research activities she provides advice to governmental bodies including NHS England and CCG's throughout the UK.

Speaker abstract:

The aim of this session is to gain an understanding of basic assessment and investigation techniques for lower urinary tract symptoms. It will also discuss more complex investigation that may be performed in specialist services, how these may be adapted to meet the health and functional needs of older adults and what additional information they may provide prior to offering treatment.

Ms Janet Morrison

Janet Morrison is Chief Executive of Independent Age, a dynamic national older people's charity which is a thought leader on ageing and provides information, advice and friendship support to older people, their families and carers. She is a founder member of the Campaign to End Loneliness - a coalition of over 10,000 organisations which raises awareness of loneliness in old age and what works to address it. Janet is also Chair of the Baring Foundation, an independent grant making trust which funds strengthening the voluntary sector, arts and older people and international development. She is also a Director of Reconnections, a pilot social finance initiative (SIB) to tackle loneliness amongst older people, and a member of Big Society Capital Advisory Board. Janet was previously Deputy Chief Executive of NESTA - the National Endowment for Science Technology which promotes creativity and innovation in the UK. Prior to NESTA, Janet was senior adviser on UK Policy at the BBC and before that was Director of Policy and Research at NCVO.

Dr John Beard

John Beard, M.B.B.S., Ph.D., is Director of the Department of Ageing and Life Course with the World Health Organization in Geneva. He was a lead editor and writer for the first World report on ageing and health released in 2015. The political mandate for this action is provided by the Global Strategy and Action Plan on Ageing and Health which was developed by Dr Beard's team and adopted by WHO's 194 Member States in 2016. Dr Beard's team is responsible for a number of major global initiatives. In 2012, he established the WHO Global Network of Age-friendly Cities and Communities. Other ongoing work includes the Integrated Care for Older People (ICOPE) programme that is developing innovative and country-specific strategies to deliver integrated health and social care for older people.

Dr Beard has held a range of senior public health and academic roles in Australia and the USA. He works closely with the World Economic Forum and is past chair of their Global Agenda Council on Ageing and a current member of their Council on the Future of Human Enhancement. He was a co-editor of the 2014 Lancet series on Ageing, and of special issues of the Bulletin of the World Health Organization on "Women Beyond Reproduction" and "Healthy Ageing". He remains actively involved in several large international research projects, with a particular interest in the influence of the physical, social and economic environments on health.

About the speakers

Friday

Dr Jeremy Chataway

Dr Jeremy Chataway MA, PhD, FRCP is a Consultant Neurologist National Hospital for Neurology and Neurosurgery (NHNN), Queen Square, University College Foundation NHS Trust and Reader in Neurology, University College London. After qualifying in medicine at Cambridge and Oxford Universities, and general medical training in London, he specialised in Neurology over an 8 year period with posts in Edinburgh, Cambridge and London. He was awarded a PhD from Cambridge University in genetic epidemiology of multiple sclerosis and took up his post as a consultant Neurologist in 2001 at The National Hospital for Neurology and Neurosurgery, Queen Square, University College Foundation NHS Trust, London.

He is the clinical lead of the MS group at the National Hospital (about 3000 patients) and was a member of the 2014 MS NICE panel. He has a particular interest in clinical trial design and was the Chief Investigator (CI) of the MS-STAT1 trial in secondary progressive MS, using high dose simvastatin; and is the CI of the MS-SMART and MS-STAT2 trials in secondary progressive MS. He is the Clinical Director of the UCL Comprehensive Clinical Trials Unit.

Dr. Alfonso J. Cruz-Jentoft

Dr. Cruz Jentoft is the head of the Geriatric Department at the Hospital Universitario Ramón y Cajal in Madrid (Spain). He chairs the Spanish Board of Geriatric Medicine. He is past president of the European Geriatric Medicine Society and belongs to the Academic Board of this organization. He chairs the European Working Group on Sarcopenia in Older People (EWGSOP).

Speaker abstract:

- This session will be focused on the presentation of the updated 2018 EWGSOP definition on sarcopenia. The former 2010 version of this consensus is the most widely used definition of this condition worldwide.
- Participants will understand the major advances made in the new definition and the reasons that prompted the update.
- They will also have an overview of the most relevant open research areas in this field.

Dr Richard Dodds

Richard Dodds is an intermediate clinical fellow at Newcastle University and an honorary consultant at Newcastle upon Tyne Hospitals NHS Foundation Trust. He previously undertook a Wellcome Trust fellowship on the epidemiology of changes in muscle strength across the life course. He is interested in the clinical assessment of sarcopenia and the biological mechanisms that underpin the age-related loss of muscle mass and strength.

Speaker abstract:

Simple tests of muscle function such as grip strength reach a peak in mid-life and then have a period of broad maintenance prior to decline. An improved understanding of these age-related changes, including those occurring in skeletal muscle tissue, has the potential to improve the prevention and treatment of sarcopenia.

Dr Oliver Todd

Dr Oly Todd is a registrar at Bradford Teaching Hospitals NHS trust. He is currently undertaking a PhD at University of Leeds, funded by the Dunhill Medical Trust. His research focuses on the optimisation of blood pressure in older people with frailty.

Speaker abstract:

This interactive session will aim to increase delegate understanding and confidence in management of blood pressure in older people with frailty, based on principles of shared decision making. We will:

- Present a clinical case of hypertension management in the context of frailty
- Briefly review relevant trial and observational evidence to support shared decision making
- Discuss appropriate management options

Prof Miles Witham

Professor Miles Witham is Professor of Trials for Older People, based at the NIHR Newcastle Biomedical Research Centre, Newcastle University, and is a consultant Geriatrician with Newcastle upon Tyne Hospitals Trust. He is a clinical trialist aiming to improve physical function for older people via interventions including nutrition, drugs and exercise, with a particular focus on sarcopenia. He is the co-chai of the BGS sarcopenia and frailty research special interest group.

Speaker abstract:

This session will cover results from our recent survey of practice with a focus on frailty and sarcopenia assessment and diagnosis, focussing particularly on:

- How many respondent organisations look for sarcopenia or frailty across a range of care environments?
- What tools do organisations use to find cases and make the diagnosis?
- What treatments are offered to those with frailty or sarcopenia?
- And where should we go next in terms of research and practice?

Prof Avan Sayer

Professor Avan Sayer is Director of the NIHR Newcastle Biomedical Centre and Professor of Geriatric Medicine at Newcastle University. She leads an internationally recognised research programme on sarcopenia and frailty with particular focus on the translation of understanding of mechanisms into advances in diagnosis, treatment and prevention across the life course.

Dr Ruth Law

Dr Ruth Law is a consultant at Whittington Health. She is clinical lead for ICAT service which provides CGA both in care homes and patients own homes using an interdisciplinary approach. She is the recipient of the BGS rising star award for quality 2018.

Speaker abstract:

This session will focus on the work of ICAT. It will consider the development of integrated services for older people both in their own homes and care homes. Learning points will include

- The elements of integration that have had the most impact
- What to measure and how to measure it
- The secret of successful interdisciplinary working

About the speakers

Finbarr Martin

Finbarr Martin was consultant geriatrician at Guy's & St Thomas' NHS Foundation Trust (London) until 2016, working in and developing a broad range of acute and community clinical services. He was awarded a personal chair in Medical Gerontology at King's College London in 2011 and remains active in academic and policy work, with particular interest in the clinical management and improving the health service provision related to geriatric syndromes of falls, frailty and delirium. He was president of the British Geriatrics Society 2010-12, a non-executive director of NICE 2013-2016, and is currently president of the European Geriatric Medicine Society.

Speaker abstract:

- Healthcare quality improvement aims to make healthcare more safe, effective, patient-centred, timely, efficient and equitable improvement, bridging the gap between what we know should happen and what does happen.
- Success requires applying scientific understanding from a range of disciplines encompassing quantitative and qualitative methods.
- This is core business for most readers of Age and Ageing.
- We will describe what potential authors and readers can expect from the newly launched QI section of the Journal.

Dr Emma Vardy

Dr Emma Vardy has been a Consultant at Salford since 2015 and has extensive clinical experience in the assessment and diagnosis of dementia. In her role as Clinical lead for dementia at Salford she chairs the dementia steering group and is a member of the operational committee for the Greater Manchester Dementia United programme. She is lead for the award winning delirium and dementia Global digital exemplar project at Salford which has been selected for national blueprinting. Dr Vardy was awarded a PhD in 2007 and has a number of publications in the areas of dementia and delirium. She is a graduate of the Haelo quality improvement for senior leaders programme and has recently been appointed as a RCP QI faculty member. Dr Vardy is a committee member for the NICE dementia quality standards update committee.

Speaker abstract:

- understand the principles of quality improvement
- understand how quality improvement methodology can be used to improve the detection of delirium
- overview of the Salford Delirium Global Digital Exemplar project

Dr Magda Sbai

Dr Magda Sbai is a clinical fellow with the POPS (proactive care of older people undergoing surgery) team at Guys and St Thomas's hospital.

Speaker abstract:

This talk focuses on the use of out of programme fellowship posts to upskill future specialists as well as discussing the benefits an OOPE post can yield to a department in terms of audit, quality improvement and research.

Dr Tessa O'Halloran

Dr Tessa O'Halloran is an Australian geriatrics trainee who has spent a year as a registrar with the POPS team (proactive care of older people undergoing surgery), and is now continuing in the

department as a Darzi fellow in 2018.

Speaker abstract:

This talk will consider the use of personalised, patient-centred treatment targets in a complex multimorbid population, and how this can be applied to the perioperative period.

Dr Catherine Meilak

Dr Catherine Meilak is a POPS (Perioperative Medicine for Older People undergoing Surgery) consultant at Darent Valley Hospital (DGT) with an honorary contract at Guy's and St Thomas' (GSTT). Her current roles include: Joint clinical lead for POPS service at Darent Valley hospital and part of the End of Life trust steering group. She has specialist interests in perioperative medicine and delirium and having achieved a distinction in an MSc in Gerontology from the University of Southampton, she has developed further research interests in delirium and mild cognitive impairment.

Speaker abstract:

- Our journey developing a POPS service at a District general hospital - translating from a tertiary centre
- Early outcome data
- Key lessons in our journey

Dr Anna Whittle

I graduated with MBBS at the University of Adelaide, Australia, and moved to the United Kingdom for my post graduate training. I trained in Geriatrics and General Medicine in London, on the South East Thames rotation. I have obtained a Masters in Medical Education with UCL. In the last 18 months I have co-led an innovative Vanguard project translating the POPS model of care for frail older surgical patients from a Teaching Hospital setting to a District General Hospital site. My clinical interest is in the perioperative care of older people.

Ms Meryl Davis

Meryl Davis is a Consultant Vascular Surgeon at the Royal Free London NHS Foundation Trust and holds an honorary contract for Great Ormond Street Hospital. She has an interest in the management of aortic disease both in adults and children. She also is the Clinical Lead for North London Abdominal Aortic Aneurysm Screening Programme which offers screening to men aged 65 years plus. In addition she is the Chair of the Advisory Board for the National Abdominal Aortic Aneurysm Screening programme.

Speaker abstract:

- How to choose well
- How to cut well
- How to get well
- How to stay well before and after surgery

Dr Cathryn Mainwaring

Dr Cathryn Mainwaring is a clinical fellow with the POPS (proactive care of older people undergoing surgery) team at Guys and St Thomas's hospital

Speaker abstract:

This talk focuses on the use of out of programme fellowship posts to upskill future specialists as well as discussing the benefits an OOPE post can yield to a department in terms of audit, quality improvement and research.

Prof David Stott

David is the David Cargill Professor of Geriatric Medicine in the Institute of Cardiovascular and Medical Sciences at the University of Glasgow. He was appointed Editor-in-Chief of Age and Ageing, the Journal of the British Geriatrics Society in February 2014 and Chair of the Association of Professors of Geriatric Medicine UK in 2013. His research has contributed substantially to the understanding of cognitive decline and disability in later life and to the evidence-base for practice of geriatric medicine and health care of older people and he has over 180 publications in this area. His high quality research has been recognised with major grants from the MRC, Wellcome Trust and European Union.

Dr Rimona Weil

Dr Rimona Weil is a Consultant Neurologist at the National Hospital for Neurology and Neurosurgery, Queen Square and Wellcome Clinician Scientist at the UCL Dementia Research Centre. She specializes in Parkinson's dementia and Dementia with Lewy Bodies. Her research focuses on detecting early signs of dementia in Parkinson's disease using visual measures combined with brain and retinal imaging.

Speaker abstract:

This session will cover 9 new things to be aware of in Dementia with Lewy bodies, with a focus on clinical practice. It will include updates on diagnosis and treatment.

Ms Helen Mann

Helen Mann is a qualified Occupational Therapist with over 20 years' experience. She currently works at 'Driving and Mobility Centre (West of England)' in Bristol and performs adaptation and 'fitness to drive' assessments for those with a disability or medical condition including those with movement disorder. Prior to her

current role, Helen was the Neurosciences OT team leader at the John Radcliffe Hospital in Oxford and subsequently part of the palliative care team at the Bristol Royal Infirmary.

Speaker abstract

- The role of driving assessment centres
- Referring drivers with Parkinson's when, why and how
- The assessment process
- Outcomes for drivers

Dr Ed Richfield

Ed Richfield is a consultant in Elderly medicine with a sub-specialty of movement disorders. He was recently appointed at North Bristol Trust, having previously worked and trained in Yorkshire and has a particular interest in palliative care for Parkinson's disease, which was the subject of his PhD. He has been involved in the Neurology Academy as a delegate and faculty member since 2014 and is a member of the international Movement disorders Society (MDS) taskforce exploring palliative care in Parkinson's disease.

Spring Meeting

10 - 12 April 2019, RWCMD, Cardiff



British Geriatrics Society
Improving healthcare for older people



Sessions on:

- Dementia
- Frailty and Sarcopenia
- Diabetes and Endocrinology
- End of life care
- Surgery in Older People
- Movement Disorders
- Loneliness in older people
- Stroke

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products in the fields of fertility, obstetrics, endocrinology, urology and gastroenterology. Ferring continues to invest in R&D to enable the introduction of new and enhanced medicines. At present, there are a number of major projects in the Ferring R&D pipeline, which complement the existing portfolio and offer innovative development of current brands. They also fit neatly into the core expertise areas of peptide chemistry, pharmacology and drug delivery systems. Ferring's developmental activities are on a global scale and are conducted in collaboration with leading academic centres and teaching hospitals worldwide. Co-ordination of development is maintained from the International PharmaScience Center in Copenhagen, Denmark. The accumulated knowledge and experience of Ferring are paving the way for novel compounds that will become tomorrow's pharmaceuticals. Ferring Pharmaceuticals Ltd, Drayton Hall, Church Road, West Drayton. UB7 7PS, Tel: 0844 931 0050 www.ferring.co.uk

For further information please visit their stand or consult the SPC.

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Profile

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Profile Pharma Ltd is a specialist pharmaceutical company, recognised for its contribution to specialist and rare disease medicine and most recently for the launch of Xadago for mid-to-late stage fluctuating Parkinson's Disease patients. Xadago was the first New Chemical Entity (NCE) in 10 years to receive a positive opinion from the Committee for Medicinal Products for Human Use (CHMP) for the treatment of Parkinson's Disease. Xadago launched into the UK market in May 2016. Profile Pharma Ltd is proud to be a subsidiary of Zambon SpA an Italian family-owned company that has operated for almost 110 years in the chemical and pharmaceutical industries.

Exhibitors



BGS

Level 3 Stand 12

The British Geriatrics Society (BGS) is the professional association of doctors practising geriatric medicine, nurses, therapists, researchers, GPs, old age psychiatrists and others engaged in the specialist care of older people and in promoting better health in old age. It has over 3,000 members and is the only society in the UK offering specialist medical expertise in the wide range of health care needs of older people. At the stand you will also find information and support for reading, reviewing and submitting articles to *Age and Ageing* journal.
www.bgs.org.uk



Vifor Pharma UK

Level 3 Stand 2

Vifor Pharma UK, affiliated to Vifor Pharma: a world leader in the discovery, development, manufacturing and marketing of pharmaceutical products for the treatment of ion imbalances such as iron deficiency and elevated potassium, is based in Bagshot, Surrey. Established in 2010, Vifor Pharma UK has grown in size, commands a market leading position in the intravenous (IV) iron therapy market and has recently introduced a medicine for the treatment of hyperkalaemia, which has a key role in the optimisation of RAASi therapy in heart failure. Vifor Pharma UK is committed to investing in the education of health care professionals and in responsible public awareness initiatives.
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- Lactulose Sachets offers convenience, ease of use, avoids wastage and minimises risk of contamination.
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Consilient Health

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Consilient Health is a pharmaceutical company, focused on bringing medicines that address unmet clinical needs to Europe and the Middle East. The Company is headquartered in Ireland, with operations in UK, Sweden, UAE and additional partnerships in Europe. Our current therapeutic focus includes endocrinology, women's health and urology.

In the UK, within endocrinology, we have a focus on bone health with a range of prescription medicines that address vitamin D deficiency. In women's health, the Consilient Health range of oral

contraceptives offer quality products, significant savings for the NHS and comprehensive support programmes for medical professionals and patients. We have recently entered the field of urology with a medicine for bladder pain syndrome / interstitial cystitis.

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University Hospitals Plymouth NHS Trust

Level 3 Stand 10

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Worcestershire Acute Hospitals and Worcestershire Health & Care Trusts

Level 2 Stand 1

Worcestershire Acute Hospitals and Worcestershire Health & Care Trusts are investing in an Integrated Care of Older People (ICOPE) pathway. We're seeking enthusiastic Consultant Geriatricians to join our team and become an integral part in helping us to build the best Frailty service in the Midlands. Our ultimate goal is to make sure we provide integrated care by

working together to align the acute service with current and developing services in the county, working with colleagues in primary, community and social care, and with patients and carers, to contribute to the very best outcomes for older people living with frailty in the many communities we serve.



Everpharma

Level 3 Stand 11

EVER Pharma is a fully integrated specialty Pharmaceuticals Company focused on the research, development, production and commercialization of products in the areas of neurology, critical care, anaesthesia and oncology. As a forward-looking company, we take care to think and act in a sustainable manner regarding our customers, employees and the environment and our main business focus has always been to improve the quality of life and well-being of patients. Innovation is the gateway to the future – Funding innovation is an important driver for the EVER Pharma Group and we continue to invest in R&D leading to innovative solutions and high quality products.

The Neurology business unit is focused on treatments for stroke, traumatic brain injury, vascular dementia, Alzheimer's and Parkinson's disease. We look to develop well tolerated and easier to use products in this field and our global portfolio encompasses proprietary delivery devices such as pens and pumps as well as drug products. EVER Pharma moved into the UK in 2018 and is focused on supporting people with Parkinson's, in the form of Apomorphine for intermittent off episodes delivered as a single injection pen/cartridge or as a continuous infusion using a mini pump.

**For further information please visit the
EVER Pharma UK stand.**



AFN

Acute Frailty Network

Level 3 stand 15

The Acute Frailty is a 12 month improvement programme designed as a professional network to support participating sites to rapidly improve acute emergency services particularly focussing on frail

older people and same day discharge. The programme is delivered by an experienced team of clinicians, operational managers and improvement leaders and is made up of national collaborative events workshops, site visits, webinars and on-site individual support for participating teams; both supported by the NHS working with partners from ADASS, SAM, third sector and royal colleges.



Edwards

Edwards

Level 2 Stand 3

Edwards Lifesciences, based in Irvine, Calif., is the global leader in patient-focused medical

innovations for structural heart disease, as well as critical care and surgical monitoring. Driven by a passion to help patients, the company collaborates with the world's leading clinicians and researchers to address unmet healthcare needs, working to improve patient outcomes and enhance lives.

For more information, visit Edwards.com



AGILE

Level 3 Stand 16

AGILE is the Association of Physiotherapists working with Older Adults. Founded in 1978, it aims to support physiotherapists working in this field through education, resources and networking. With a membership standing at just over 1000, the membership is varied and encompasses a wide range of settings including community, acute and intermediate care, higher education and third sector. AGILE represents both its membership and the CSP on both National and International platforms and has a key role in contributing to policy and guidance for various organisations. AGILE hosts a National conference yearly and also collaborates with the CSP and the BGS for other learning events.

Exhibitors



**National Institute for
Health Research**

NIHR CRN

Level 2 Stand 2

The National Institute for Health Research (NIHR) Clinical Research Network provides researchers with the practical support they need to make clinical studies happen in the NHS, so that more research takes place across England, and more patients can take part. We work collaboratively with our counterparts in the Devolved Nations where similar arrangements exist to support clinical research. The ageing specialty is one of 30 specialties which bring together communities of clinical practice to provide national networks of research expertise. It is made up of research-interested

clinicians and practitioners who work at both national and local levels to ensure the studies that are included in our national portfolio of research are delivered successfully in the NHS. By “successfully” we mean ensuring that studies recruit the right amount of patients within planned timescales.



Ashford and St. Peter's Hospitals
NHS Foundation Trust

Ashford and St Peters Foundation Hospital Trust

Level 2 Stand 5

Guildford Road
Lyne
Chertsey
KT16 0PZ



Daiichi-Sankyo

Daiichi-Sankyo

Level 3 Stand 1

At Daiichi Sankyo, our Mission is to contribute to the enrichment of quality of life around the world through the creation of innovative pharmaceuticals, and through the provision of pharmaceuticals addressing diverse medical needs.

For further information please visit our stand or consult www.daiichi-sankyo.co.uk

co.uk





EXTENDING CHOICE

CONNECTING EXPERTS IN PD

Profile

SYMPOSIUM

Managing Parkinson's Disease across the Spectrum

Interactive Case Studies

FRIDAY 16TH NOVEMBER 2018

13:30-14:30

Room 5/6/7 Level 2 of the Platinum Suite, ExCel, London

SPEAKER:

Dr Emily Henderson - Consultant Geriatrician, Royal United Hospitals Bath and Honorary Consultant Senior Lecturer, University of Bristol

A one hour symposium focusing on a series of Parkinson's Disease case studies using interactive voting

Prescribing Information

Xadago ▼ 50 and 100 mg film-coated tablets

Consult Summary of Product Characteristics before prescribing. Legal Category: POM Marketing Authorisation number and basic NHS cost: EU/1/14/984/001-005, EU/1/14/984/006 £69 for 30 tablets.

Presentation: Each film-coated tablet contains safinamide methanesulfonate equivalent to 50 or 100mg safinamide. **Uses:** Xadago is indicated for the treatment of adult patients with idiopathic Parkinson's disease (PD) as add-on therapy to a stable dose of Levodopa (L-dopa) alone or in combination with other PD medicinal products in mid- to late-stage fluctuating patients. **Dosage and administration:** Treatment with Xadago should be started at 50 mg per day. This daily dose may be increased to 100 mg/day on the basis of individual clinical need. If a dose is missed the next dose should be taken at the usual time the next day. **Method of administration:** Xadago is for oral administration. It should be taken with water. It may be taken with or without food. **Special populations:** **Paediatric population:** The safety and efficacy of safinamide in children and adolescents under 18 years of age have not been established. **Elderly:** No change in dose is required for elderly patients. Experience of use of safinamide in patients over 75 years of age is limited. **Hepatic impairment:** Caution should be exercised when initiating treatment with Xadago in patients with moderate hepatic impairment. The lower dose of 50 mg/day is recommended for patients with moderate hepatic impairment. It is contraindicated in severe hepatic impairment. **Renal impairment:** No change in dose is required for patients with renal impairment. **Women of childbearing potential:** Xadago should not be given to women of childbearing potential unless adequate contraception is practiced. **Pregnancy:** Women of childbearing potential should be advised not to become pregnant during safinamide therapy. Xadago should not be given during pregnancy. **Breast-feeding:** Xadago is expected to be excreted in breast milk. A risk for the breast-fed child cannot be excluded. Xadago should not be given to breast-feeding women. **Warnings and Precautions:** Xadago may be used with selective serotonin re-uptake inhibitors (SSRIs) at the lowest effective dose, with caution for serotonergic symptoms. The concomitant use of Xadago and fluoxetine or fluvoxamine should be avoided, or if concomitant treatment is necessary these medicinal products should be used at low doses. A washout period corresponding to 5 half-lives of the SSRI used previously should be considered prior to initiating treatment with Xadago. At least 7 days must elapse between discontinuation of Xadago and initiation of treatment with MAO inhibitors or pethidine. Impulse control disorders can occur in patients treated with dopamine agonists and/or dopaminergic treatments. Patients and carers should be made aware of the behavioural symptoms of ICDs that were observed in patients treated with MAO-inhibitors, including cases of compulsions, obsessive thoughts, pathological

gambling, increased libido, hypersexuality, impulsive behaviour and compulsive spending or buying. Safinamide used as an adjunct to levodopa may potentiate the side effects of levodopa, and pre-existing dyskinesia may be exacerbated, requiring a decrease of levodopa. Xadago has no or negligible influence on the ability to drive and use machines. **Contraindications:** Hypersensitivity to the active substance or to any of the excipients. Concomitant treatment with other monoamine oxidase (MAO) inhibitors or with pethidine. Use in patients with severe hepatic impairment. Xadago should not be administered to patients with ophthalmological history that would put them at increased risk for potential retinal effects e.g. in patients with albinism, retinal degeneration, uveitis, inherited retinopathy or severe progressive diabetic retinopathy. **Interactions:** Concomitant administration of dextromethorphan or sympathomimetics such as ephedrine or pseudoephedrine, requires caution. Serious adverse reactions have been reported with the concomitant use of selective serotonin reuptake inhibitors (SSRIs), serotonin norepinephrine reuptake inhibitors (SNRIs), tricyclic/tetracyclic antidepressants and MAO inhibitors. In view of the selective and reversible MAO-B inhibitory activity of safinamide, antidepressants may be administered but used at the lowest doses necessary. Xadago can be used safely without any dietary tyramine restrictions. **Side Effects:** Consult the summary of product characteristics for other side effects. Serious adverse reactions are known to occur with the concomitant use of SSRIs, SNRIs, tricyclic/tetracyclic antidepressants and MAO inhibitors, such as hypertensive crisis, neuroleptic malignant syndrome, serotonin syndrome, and hypotension. Other serious adverse reactions include bronchopneumonia, basal cell carcinoma, leukopenia, delirium, suicidal ideation, glaucoma, diabetic retinopathy, eye haemorrhage, keratitis, papilloedema, hallucination, depression, compulsions, delirium, suicidal ideation, impulse disorders, myocardial infarction, hyperkalaemia, peptic ulcer, upper gastrointestinal haemorrhage, hyperbilirubinaemia, ankylosing spondylitis, electrocardiogram QT prolonged and fat embolism, photosensitivity. Common undesirable effects include insomnia, dyskinesia, somnolence, dizziness, headache, Parkinson's Disease, cataract, orthostatic hypotension, nausea and fall. Further information is available from: Profile Pharma Ltd, Bicentennial Building, Southern Gate, Chichester, West Sussex, PO19 8EZ, United Kingdom. Email: info.profilepharma@ZambonGroup.com
Tel: +44 (0)1243 859000 **Prescribing Information drawn up: February 2017**

Adverse events should be reported. Reporting forms and information can be found at www.mhra.gov.uk/yellowcard. Adverse events should also be reported to Profile Pharma Ltd. at profile.drugsafety@ZambonGroup.com or telephone: +44 (0) 800 0288 942

XADAGO ▼
(safinamide)

This symposium contains promotional information and is organised and funded by Profile Pharma Ltd (a subsidiary of Zambon SpA)

LCW Consulting Ltd are supporting Profile Pharma Ltd with the development of this symposium



British Geriatrics Society
Improving healthcare
for older people

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Patron
HRH The Prince of Wales

Get up, get moving, get inspired!

All delegates are encouraged to get up and move by joining in activities in the exhibition hall during the breaks including stretches and giant puzzles.

On Thursday 15th November, you'll have the opportunity to enjoy a few moments of the ancient art of Tai Chi!

Tai Chi is now being widely practised in the UK by the older population because of the evidence that it improves balance and coordination and reduces the risk of falls. This short session suitable for any age or level of ability will be presented by Jane Ward who has been practising Tai Chi for over 30 years and has over 20 years' experience teaching older adults.

You can join the Tai Chi session at 08.00 and 15.00. All welcome, no pre-booking required

On Friday 16th November, the break activities will be facilitated by Professor Dawn Skelton

Schedule of activities:

- **08.30 - 08.55** Chair based exercises for bedside fun!
- **10.30-10.55** Exercise by stealth, breaking up prolonged sitting
- **13.30-13.55** Otago, the falls programme everyone talks about but does badly!
- **14.00-14.25** Otago, the falls programme everyone talks about but does badly!

All welcome, no pre-booking required