



Who Are We And What We Do??

We're very excited to bring you our very first Newsletter!

Our small, but perfectly formed team is based in the Chancellor's Building at the Royal Infirmary Edinburgh and the Western General Hospital. A team of 7 Research Nurses, 1 Manager and 1 Assistant recruiting to around 18 critical care studies keeps us on our toes! Our Research Lead is Professor Tim Walsh.

We work closely with the teams in the Critical Care wards (118 and 116) the principle investigators, study teams and of course, our wonderful patients and their families who agree to take part in the research.

We also have a number of peri-operative and post operative studies so if we are not on ITU you may see us on other wards, particularly the orthopedic wards.

Read our 'A day in the life of a research nurse' on page 2 find out exactly what we do each day.

In the meantime, we bring you...

THE TEAM!



Back row- Kate, Sophie and Mia
Middle row – Jo, Dave and Ruth
Front row – Lucy, Scott and Katie

Calling All Students!!

Kate and Lucy visited Queen Margaret University on 23 February and spoke to 3rd and 4th year nursing students about our exciting and varied job in Critical Care research. The event was organised by Ailsa McMillan one of the Senior Lecturers. Research nurses from around NHS Lothian went along to the event. Students were surprised how many different research specialities there were and were really keen to find out more about our roles.

If you are nursing student and would like to spend time with us please contact edcriticalcare@nhslothian.scot.nhs.uk would be happy to show you what our role involves.



Inside this issue:

Who We Are And What We Do??	1	Long Covid Initiative Wins Award	3
Calling All Students!!	1	Edinburgh Critical Care PPI Group	3
GenOMICC	2	D-RISC-ii: Looking At Potential Stresses In Optical Blood Vessels	3
A Day In The Life Of A Research Nurse	2	Word Search and Acronym Buster	4
Why We Do What We Do	2	Get In Touch!	4

GenOMICC (Genetics of mortality in Critical Care)

Principle Investigator

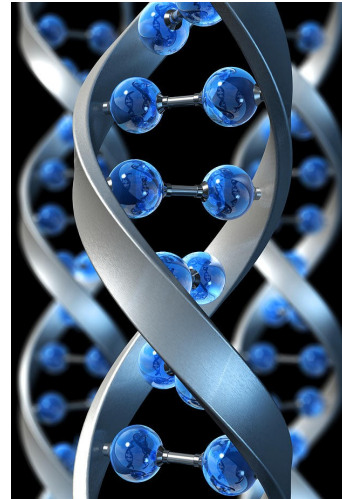
Professor Kenny Baillie

ECCRG have recruited an amazing 283 participants from wards 118 /116 to GenOMICC since recruitment began on 08/01/2018. Our research team took over recruitment at the WGH in January 2022 building on recruits to that now reach 103.

We have been in the top 5 recruiting sites in January and top 10 in February. There are 225 other sites in the UK alone and many others around the world! Thanks very much for the nursing teams support who often take the blood test for us.

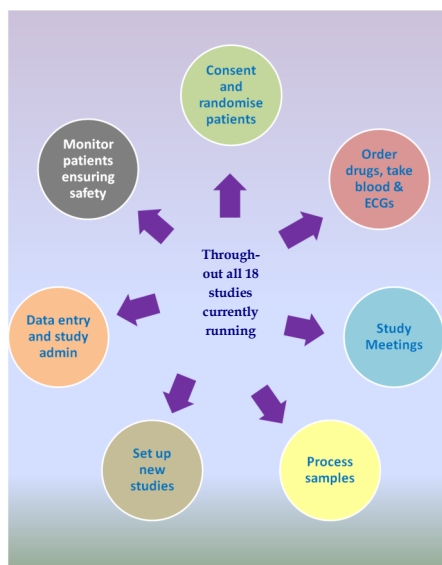
The GenOMICC study aims to find the genetic factors that determine outcome in critical illness. Infectious diseases affect millions of people around the world every year. Most cases are mild, but some people become very unwell and are admitted to intensive care. Our genes (DNA) can determine how much critical illness affects us. The study aims to find the genes that cause some people to be more

sick by comparing the DNA of critically-ill patients with members of the general population. By finding these genes enable us to develop better treatments for patients in the future.



Have a look at how our award winning work on Long Covid provides digital support for our patients on Page 3

A Day In The Life Of A Research Nurse



0800—ICU Screening: review all new patients for eligibility into the studies using defined criteria and medical notes. Then review all other patients too as they may now be eligible for research if their condition has changed.

0900—attend bed meeting to discuss any eligible patients with Consultants.

0930 —screening patients for peri-operative and post-ICU studies.

1000—team ‘huddle’ to work through all the daily tasks. Highlight any study/admin issues and ensure workload is covered. Our priority after screening is consenting and recruiting patients.

1430—2nd screening review of new patients and any who are being monitored for a specific study criteria and attend bed meeting.

1500 —The afternoons often involve meeting patients who have now regained capacity and are ready to hear about the research that their family consented them in to. It is always nice to see how they have improved after being looked after so well in ITU.

The infographic on the left highlights some of the main daily tasks that we do. Every one of our 18 studies is different and has varied tasks.

Why We Do What We Do

Here are some of the main reasons in an infographic.

Of course, there are many more— but the essentials are highlighted in bold here

Let us know what you think— find our email address on **page 4**



Long Covid Initiative Wins Award

On the 21st February, NHS Lothian along with Chest Heart & Stroke Scotland (CHSS) won the Technology Enabled Independent Living Award for their Long Covid 'MyTailoredTalks' initiative. The award was presented at the Digital Health and Care Awards 2023. The awards are designed to recognise the accomplishments of individuals and celebrate the creativity and innovation which helps to put Scotland at the forefront of the digital revolution.

The Long Covid Digital pathway was launched on 17th March 2021 and included 26 GP surgeries from across Edinburgh. This was the pilot phase and now all GP surgeries in Midlothian have been invited to take part. It aims to provide a pathway of support including digital information via the Tailored Talks plat-

form and incorporates an advice line service led by CHSS. It aims to promote self-management and improve well-being and quality of life for those with Long COVID.



What has our role been?

Lucy Macdonald, one of our Senior Research Nurses has been involved in the evaluation of the pilot phase with Profes-

or Tim Walsh who leads the initiative. This involved a mixed methods evaluation using both qualitative and quantitative data. Lucy interviewed patients to find out their views and experiences of the pathway in order to find out what improvements could be made. CHSS staff were also interviewed and GPs are currently being contacted for their views on the service. After analysing the data from the patient interviews a number of changes have been implemented including adding videos, making the tailored talks more interactive and shortening the self-assessment questionnaire. Overall feedback was positive and patients particularly valued the advice line for emotional support. Ongoing evaluation is being performed in order to improve the service which is gradually being rolled out throughout the whole of Lothian.

Edinburgh Critical Care PPI Group

The Edinburgh Critical Care Patient and Public Involvement (PPI) Group is now an integral key to a study set-up. The Group is made up of patients and family members who have been through ICU and HDU. They recognize the value of critical care research and volunteer their time to contribute to the development of research projects.

They consult on what we research and how it is done. Contributing to the development of studies so they are relevant to patient concerns. They also advise on a number of topics including reviewing study documentation such as consent forms, patient

information sheets to ensure they're written in plain English and understandable. They pass on their insight and lived experience of critical care through their own unique perspectives. This helps the study Investigators plan their research so it's aim and methods are appropriate for and important to our patients.

Together with our team the PPI Group input into how the Group is managed, design posters, leaflets and meet with us on a regular basis. An invaluable asset in the research toolkit! Find out more at:

<https://www.rds-sc.nihr.ac.uk/ppi-information->

Follow us on
Twitter

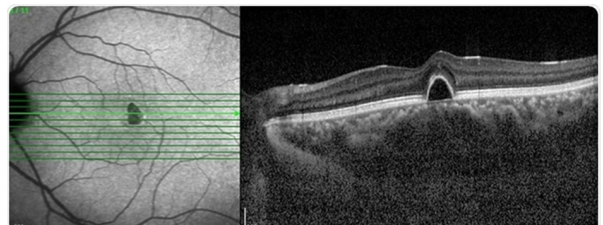
@EdCriticalCare

D-RISC-ii: Looking at potential stresses in optical blood vessels

You may have seen a new machine being wheeled in to ITU over the last month. This is for a new study called the D-RISC study. (Direct Retinal Imaging for Shock Resuscitation in Critically Ill patients). At the moment, we don't have a good way of measuring how much of the treatments for shock to give potentially exposing patients to the harmful effects of giving too much or too little fluid. Observing OCT (optical coherence tomography) appearances of the retina and whether they differ according to fluid balance (over 24-hour), blood pressure, and circulatory shock diagnosis, in critically ill adult patients will give us answers, says George Cooper, Medical Student, leading the research

So far we have recruited 10 patients. Each participant has a baseline retinal imaging scan then another 12–72 hours after. Imaging only takes around 15mins and is non-invasive. The study uses a special camera (that opticians already widely used to diagnose disease in the eye) to work out if we can improve how we measure response to treatment in these critically unwell patients.

Principle Investigator – Dr David Griffith





Word Search

You could win a prize! Just complete the word search, give it to one of the re-search nurses and your name will go in the hat for the prize!!!

Critical Care Research

R	S	L	T	S	I	L	A	E	R	I	R	T	D
N	E	T	T	H	I	A	D	S	P	O	C	I	G
S	D	P	U	E	U	A	U	E	C	S	S	R	
A	R	A	E	M	R	T	P	E	T	S	S	T	E
T	I	H	N	O	E	E	T	U	H	T	R	A	S
O	S	N	S	T	M	N	S	N	G	I	T	E	C
B	C	S	D	I	A	G	E	S	I	N	S	P	T
I	I	S	R	O	P	I	P	T	A	R	D	I	S
A	I	O	A	N	C	S	S	T	T	N	M	D	P
N	T	S	E	S	A	I	I	N	S	P	E	I	C
R	O	D	T	A	P	E	S	S	I	S	A	B	B
P	P	R	C	C	I	M	O	N	E	G	A	T	D
D	T	A	A	E	O	H	C	R	A	M	T	H	C
S	N	S	R	E	S	U	L	T	H	I	P	E	S

- ADAPTSEPSIS
- RESULTHIP
- ARDSNEUT
- SOS
- TPOT
- MARCH
- DRISCI
- ATOB
- HEMOTION
- TARDIS
- REMAPCAP
- ABC
- REALIST
- GENOMICC
- SIGNET

Acronym Buster!

Ever wondered what TARDIS stands for?

Get In Touch!

API – Associate Principal Investigator
 CI - Chief Investigator
 CRF – Clinical Research Facility
 Or Case Report Form
 GCP – Good Clinical Practice
 PerLR – Personal Legal Representative
 PI – Principal Investigator
 PIS – Patient Information Sheet
 PPI – Patient and Public Involvement
 ProLR – Professional Legal Representative
 REC – Research Ethics committee

Six Studies:

A2B: Alpha-2 Agonists For Sedation To Produce Better Outcomes From Critical Illness

GenOMICC: Genetics of Mortality in Critical Care

HEMOTION: Hemoglobin transfusion thresholds in Traumatic Brain injury Optimisation

MARCH: Mucoactives in Acute Respiratory failure: Carbocisteine and Hypertonic saline

SOS: Salt Or Sugar– Hyperosmolar therapy in traumatic brain injury

TARDIS: Traumatic Brain Injury Associated Radiological DVT Incidence and Significance

Need to know anything else? Just call or drop us an email!

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