## lssue 18 Feb 2010

# **Network News**

## www.ukdctn.org

## UK Dermatology Clinical Trials Network

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We are delighted to announce that the PATCH study has now exceeded its recruitment target with a total of 272 patients having been recruited into the study (against a target of 260). This makes it the largest study into the prevention of cellulitis ever conducted.

Hywel Williams, Chair of the UK DCTN comments "PATCH is the first trial that the UK DCTN has taken on and it has been delivered by true grit, imagination and sheer determination. It is a testament to the collaborative nature of all the investigators involved and a sign that we can achieve something much bigger in this country by working together."

This announcement is tinged with sadness, following the sudden death of the clinical lead

for the study, Dr Neil Cox. Read more about Neil on page 3.

The table below shows the number of patients recruited by the top 11 recruiting centres (out of a total of 29) during the study.

1	Nottingham	46
2	Durham	35
3	Reading	32
4	Derby	27
5	Norwich	25
=6	Hull	24
=6	Portsmouth	24
7	Carlisle	18
8	Cork	15
=9	Swansea	15
=9	Liverpool	15

To recognise their efforts, a token of appreciation will be sent out to all centres who recruited patients into the study in due course.

The results of the study, which is investigating whether the use of low dose prophylactic

antibiotics (penicillin) will prevent recurrent cases of cellulitis, will be available early in 2011.



## **Call for Research Ideas**

The central remit of the UK DCTN is to develop independent, multi-centre clinical trials for the treatment and prevention of skin disease that answer important questions to clinicians, nurses, patients and the NHS. We have some interesting studies in the pipeline which you can view on our website <u>http://www.ukdctn.org/trials\_development/amber</u> but we continue to seek new research ideas and for 2010 we would like you to contact us with your suggestions.

There has never been a better time to conduct clinical research in the NHS, in terms of the infrastructure (e.g. support via the Comprehensive Local Research Networks) and the funding opportunities (e.g. NIHR Health Technology Assessment awards, Research for Patient Benefit programmes) that are available. BUT, we need to take advantage of these opportunities NOW, as on average it takes 2-3 years to develop an idea through to a fully funded trial and the funding streams available over the next few years may well change further down the line.

Please do submit any clinical questions and research ideas you may have, and encourage your colleagues, who may not be members of the Network, to do so as well. If you're inspired by the success of the PATCH study above, please contact the Network Manager Carron Layfield for further information on developing your research ideas through the Network.

## New UK DCTN SpR Fellows

We are delighted to announce the winners of the 2010/11 UK DCTN SpR Fellowship Awards. Launched two years ago the awards are now well established and aim to demonstrate the training opportunities that becoming more involved with the Network can offer to the SpR community and to provide the successful applicants with a thorough and complete training in clinical trials research.

The calibre of applicants was again very high and to recognise this three Fellowships have been awarded this year, instead of the usual two. The successful applicants were named as Dr Kave Shams who is currently on rotation in Lanarkshire, Dr Abby Macbeth who is based in Norwich and Dr Roz Simpson who is currently based in Leicester (all three are pictured below). As part of the Fellowship programme they will now join the UK DCTN Steering Committee and will visit the UK DCTN coordinating centre later in the year for further training opportunities They will also attend the BEES dermato-epidemiology course and spend time developing their critical appraisal skills with Prof Hywel Williams.



Dr Abby Macbeth



Dr Kave Shams



Dr Roz Simpson

### Annual Evidence Based Update Meeting Thurs 13th May 2010 – Eczema

We are now taking bookings for the 2010 Annual Evidence Update meeting which this year focuses on eczema. Confirmed speakers for the one day event, which will take place at Holywell Park in Loughborough, include Alain Taieb, Jochen Schmitt, Robert Boyle, Doris Staab and Marie-Louise Schuttelaar. The meeting will include presentations on recently completed clinical trials, systematic reviews and updates on clinical practice. The programme for the day is available on the UK DCTN website at http://www.ukdctn.org/meetings/evidence/eczema\_EBU\_programme\_version\_1.pdf

All proceeds from the event will be donated to the UK DCTN pump priming funds. To register, or for further information, please contact Maggie McPhee.

## **UK DCTN Nursing Prize Award Winner**



The greatly deserved 2010 UK DCTN Nursing Prize Award winner is Jane Grundy (pictured left), a research nurse based at The David Hide Allergy and Asthma Centre at St Marys Hospital, Isle of Wight. Jane was awarded the UK

DCTN Nursing Prize for the commitment and enthusiasm shown while she was working on the Softened Water Eczema (SWET) trial. This HTA study was adopted into the UK DCTN portfolio in 2008 and is investigating whether the use of water softeners improves childhood eczema.

After exhausting the study population on the Isle of Wight, Jane turned her attentions to opening a further recruiting centre in the Dermatology Unit at St Marys Hospital Portsmouth to increase recruitment rates and thought nothing of travelling three times a week between the two sites (a journey which included a hovercraft trip). In total, Jane was responsible for recruiting 84 patients into the study.

In supporting Jane's application for the award, Prof Taraneh Dean (the local PI for the SWET study) commented that in addition to her dedication and hard work, Jane had shown an exceptional level of initiative and innovation while working on the study and also played a key role in mentoring newly appointed nurses within the Allergy and Asthma Centre. Jane has now joined the UK DCTN Steering Committee to represent the views of the nursing community and will visit the UK DCTN co-ordinating centre later in the year.

The results from the SWET study will be available at the end of May.



## New UK DCTN SAS Award

Following on from a suggestion by Dr Sue Jackson (who represented Staff and Associate Grade Dermatologists on the BAD sub-

committee before her retirement) we are delighted to be able to announce the new UK DCTN SAS Award. The award has been developed by the UK DCTN co-ordinating centre in collaboration with representatives from the SAS community including Rosemary Black, Helen Horn and Glenda Hill. The purpose of the award is to encourage more SAS staff to become involved in clinical research.

The UK DCTN SAS Award aims to develop skills in clinical trials and critical appraisal in years one and two and then apply these skills in year three as the successful applicants become increasingly involved in UK DCTN activities. It is similar to the UK DCTN SpR Fellowship Award but has a decreased annual commitment and is spread over a longer period of time to reflect the lower amount of study leave that SAS Grade staff receive. The time commitment for the award is estimated at six days per annum for a period of three years.

Each year, up to two awards of £1500 each will be made with the funds to cover expenses for the following activities:

#### Year One

- An opportunity to visit the UK DCTN co-ordinating centre for 2-3 days to spend time with trial managers, and develop an understanding of what's involved in developing and managing dermatology clinical trials.
- The development of critical appraisal skills by working on a targeted reading curriculum with UK DCTN Chair Prof Hywel Williams.
- Joining the UK DCTN Steering Committee and attending relevant meetings (2-3 per year).

#### Year Two

- Attend the 3 day BEES 'Getting to Grips with Evidence Based Dermatology' course.
- Continue with Steering Committee responsibilities.

#### Year Three

- Become involved in a UK DCTN trial development team.
  (other activities such as joining a review team for a Cochrane Systematic Review may also be available)
- Attend Annual Evidence Based Update Meeting.

Please contact Carron Layfield the UK DCTN Network Manager for further details if you are interested in applying for this award. The closing date for applications is Friday 5th March.

## **Annual Evidence Update on Acne**

NHS Evidence-skin disorders (formerly the NLH Skin Disorders Specialist Library) is hosting an Annual Evidence Update on acne and this will be available w/c 1st March. This excellent resource can be accessed via the homepage <u>www.library.nhs.uk/skin\_and</u> includes all recent systematic reviews and a commentary on what's new and its significance for clinical practice.



## Remembering Dr Neil Cox

Many of you will already be aware of the tragic death of Dr. Neil Cox on 8<sup>th</sup> December 2009. Neil was lead clinician

for the PATCH study and a long serving member of both the UK DCTN Steering and Executive Committees.

Based in Carlisle, it was Neil who suggested the idea to the UK DCTN for a study investigating the use of low dose penicillin to prevent recurrence of cellulitis of the leg. Neil took on a major role in working with the Network to develop the idea into successful funding applications. His knowledge of cellulitis was phenomenal, and he will be remembered for drawing attention to this common and often ignored debilitating condition which does not seem to belong to any speciality.

Neil recruited patients into the study himself and was always available during the study to deal with recruitment queries right up to the end of his life. He was aware that we had completed our recruitment target of 260 patients for the PATCH I study just before he died. We know he was very proud to have witnessed this, especially since PATCH was the first national study that the UK DCTN took on.

Neil was always a pleasure to work with and was more than a hard–working, knowledgeable, clever and thoroughly decent man. He was an exemplar of how a busy dermatologist working in a district general hospital could still participate in, and lead, clinically important research. We will all miss him very much in the PATCH study team and throughout the UKDCTN. We have lost a champion, a fountain of knowledge, but most of all a good friend.

We are now considering the best way in which to remember Neil and his wonderful contribution to the Network. This could be to name one of our SpR Fellowship Awards in his memory. Please tell us if you are in support of this, or if you have any other suggestions.



## British Society for Medical Dermatology

Dermatology has become increasingly complex and strong sub-speciality interests have developed including

dermatopathology, surgical dermatology,

contact dermatitis and paediatric dermatology. New therapies are changing our practice and we can do much more for patients with serious skin diseases. Medical dermatology might be defined as the study and care of patients with skin diseases that can have systemic manifestations or patients with potentially disabling or fatal skin diseases usually treated with systemic therapy, as well as the management of patients with cutaneous manifestations of systemic disease. The British Society for Medical Dermatology

was established in 2009 to ensure that medical dermatology retains a place at the heart of our speciality (and within hospital medicine). The Society aims to strengthen and foster interest in all aspects of medical dermatology, but in particular to provide education in medical dermatology, to strengthen links with other medical specialities, to promote research and to organise scientific meetings that advance the knowledge and practice of medical dermatology.

Why not apply for membership if you are interested in medical dermatology? Look at our website <u>http://www.medderm.org.uk/</u> for more information.

Susan Burge President BSMD

### **Membership Update**

We're pleased to report that the UK DCTN now has over 560 members. If you know anyone who is working on one of our studies or who just wants to get involved and isn't currently a member please do encourage them to join. Membership of the Network is free and you can join via the website http://www.ukdctn.org/join/. Also, please do remember to let us know if you move or even just change your e-mail address to enable us to keep in touch with you.

## And Finally.....

We say goodbye to Jonathan Batchelor and John Ingram, the very first UK DCTN SpR Fellows who have now completed their two year Fellowship programme with us. Both John and Jonathan were fantastically enthusiastic and committed throughout the duration of their awards and helped us enormously with developing the programme for future UK DCTN SpR Fellows, something which we are extremely grateful for. We're pleased to report that Jonathan has decided to stay on the UK DCTN Steering Committee and John will continue with his role on the STOP GAP Trial Steering Committee. Both will also continue to be involved in the UK DCTN as co-investigators for the STOP GAP and BLISTER studies. We hope you will join us in wishing them both well in their future dermatology careers.

## **Dates for your Diary**

Thurs 13th May 2010

Annual Evidence Based Update Meeting (Eczema)

Holywell Park, Loughborough

Thurs 8th July 2010

BAD Annual Meeting 8.30-9.30am TGPP meeting (Exchange 6) 1.00-2.30pm UK DCTN AGM (Exchange 7)

Manchester Central Convention Centre, Manchester

## **UK DCTN Contact Details**

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