



Innovation

Research and Development Newsletter

Tariq Mahmood's New Study...

*to determine genetic
cause of schizophrenia
within families
(pictured)*

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Completed Projects

to read about projects
that have recently been
completed simply
look out for the symbol

Primary Care Research Event

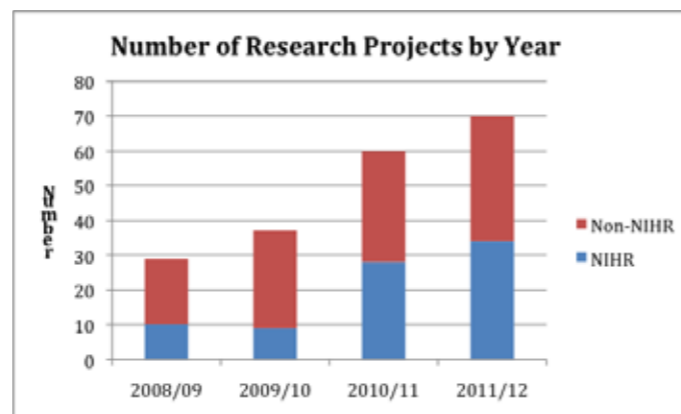
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Innovation Issue 10 Summer 2012

There is much to celebrate!

Leeds and York Partnership NHS Foundation Trust was involved in conducting 70 clinical research studies in mental health and learning disabilities in 2011/12. Of these, 34 were National Institute of Health Research (NIHR) adopted studies.

Full recruitment numbers for York are not yet complete, but the number of participants recruited to Leeds NIHR projects was 403. This exceeds the Trust strategy milestone (Learning, Research and Innovation (Means Goal 5)) for the year of 300 by 103 (34%). Recruits to all Leeds research studies of 1384 were more than double the milestone of 682. The graph below shows the growth in the number of research studies being conducted in the Trust over recent years.



Alison Thompson
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Do let me know if you would like to contribute to a future edition of Innovation or if there are topics that you would like to read about.



Understanding & Preventing Adverse Effects of Psychological Therapies

If you are a therapist or a client and have had an experience of therapy that you feel has 'gone wrong' or been harmful, we are keen to hear from you.

For further information regarding this study please contact:

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www.shef.ac.uk/scharr/sections/hsr/mh/mhresearch/adept

Allocation of Trust Research Funding

Flexibility and Sustainability Funding (FSF) 2011/12

Last year Leeds Partnerships NHS Foundation Trust received research funding, namely Flexibility and Sustainability Funding (FSF) of £45,956 from the Department of Health (DH) for use in 2011/12. The calculation used by the DH to determine the amount of FSF the Trust received was a proportion (44p in the £) of NIHR grant received by the Trust in 2010/11.

The Learning, Research & Innovation Standing Group (Means Goal 5) agreed the strategy for allocating this £46k. The strategy was to use half the FSF ie £23k to reimburse researchers who had already recruited service users to National Institute for Health Research studies. This was divided proportionately (£46.23 per recruit). The other half was opened to bids and used to support new recruitment and other qualifying spend.

National Institute for Health Research (NIHR) FSF is allocated to research-active NHS organisations to enable them to attract, develop and retain high-quality research, clinical and support staff by supporting some, or the entire research-related component, of the salary of researchers and support staff where that component is not already provided by another research-funding source. NHS organisations use FSF to create and maintain a sustainable capacity for people and patient-based research.

FSF can be used to support the costs of some or all of the following:

1. the research-related component of an NIHR Faculty member's salary which is not covered by other funding sources;
2. salary costs of new staff, who are expected to be Faculty members, but who have not yet obtained funding from other NIHR sources;
3. salary costs of existing Faculty members who are 'between grants';
4. time of Faculty members in preparing grant proposals (this is not applicable to the NIHR FSF associated with research networks);
5. the time of Faculty members in contributing to the wider research endeavour (e.g. membership of peer review panels);
6. the research-related time of NHS-employed scientific, administrative and secretarial staff that are supporting Faculty members in their NIHR-related work;
7. the cost of training and development in research management when NHS Trust R&D Departments join the NIHR research support services.

Allocation of Trust FSF in 2011/12

The following table summarises the allocation of FSF according to the criteria above. Further detail has been reported to Learning, Research & Innovation Standing Group (Means Goal 5) and is available on request.

Criterion numbered above and project (where applicable)	FSF granted/£
2. Salary costs of staff that have recruited to NIHR studies:	
Rehabilitation Effectiveness & Activities for Life (REAL)	1479
Mental Health Survey of Experiences of Stigma and Discrimination in England (VIEWPOINT)	11928
The prevalence and importance of unrecognised bipolar disorder among patients prescribed antidepressant medication in UK General Practice (PAPPA); Study of Mood Disorders: A Bipolar 11 Disorder Cohort (ABC); A Cohort Study To Monitor the Safety and use of Prolonged Release Quetiapine (Seroquel XL) In the Mental Health Trust Setting (OASIS) and (ADD) anTIGLUCOCORTICOID AUGMENTATION OF Antidepressants in Depression: a double-blind, randomised, placebo controlled, parallel-group trial	3051
Comparative Evaluation of QUetiapine-Lamotrigine combination versus quetiapine monotherapy, (and folic acid versus placebo) in people with bipolar depression. (CEQUEL) and European study to describe hospital stay in patients (HOME)	693
Randomised pragmatic trial comparing the cost effectiveness of supplementing standard care with an intervention for carers (Carers Assessment, Skills and Information Sharing, CASIS) of people with eating disorders and Internet-based relapse prevention for in-patients with Anorexia Nervosa (iMANTRA-R)	1479
AESOPS - The effectiveness and cost-effectiveness of opportunistic screening and stepped care interventions for older hazardous alcohol users in primary care	4577
Total for completed recruitment	£23207
2. Prospective Principal Investigator for and recruit to:	
Personal Concerns Inventory (PCI) study	1092
Understanding the Adverse Effects of Psychological Therapies (AdEPT)	2500
2. Prospective Scoping project for NIHR bid on Feasibility Study for a randomised controlled trial on trans-generational trauma impacting on the parent-child relationship	12194
3. Salary of existing faculty members between grants	4484
6. Maternity cover, 1 day/week for follow ups for Systemic Therapy for At Risk Teens (START)	2066
Management of research income and expenditure and preparation of finance reports	248
Cost to HR of recruiting research staff	165
Total allocation	45956

Primary Care Research Event

Feedback from PCRN for Lucas and the team

The third Primary Care Research Network (PCRN) event was attended by over 60 multidisciplinary delegates from across the West Yorkshire (WY) Primary Care Trusts and NHS Trusts. The event was Chaired by Robbie Foy, Professor of Primary Care, West Yorkshire Comprehensive Local Research Network.

Cath Jackson, Senior Research Fellow from the Health Sciences Department, University of York presented results of the DECIDA study, a National Institute of Health Research (NIHR) RfPB funded 3-armed Cluster Randomized Control Trial (RCT) 'Evaluating a web-based decision aid for the Measles Mumps and Rubella (MMR) vaccine'. The study looked at how web-based Decision Aids could help reduce decisional conflict for parents considering MMR vaccines and was conducted at multiple GP surgeries across 5 PCTs. Decisional conflict post-intervention was significantly reduced in the Decision Aid (DA) and leaflet arms in comparison to control. DAs also appeared to be useful for parents considered to be 'Late' or 'Hesitant' immunizers. The study team's next step is to investigate the cost effectiveness of DAs.

Dr Mahendra Patel, Fellow of the National Institute for Health and Clinical Excellence, Senior Lecturer in Pharmacy and PCRN Pharmacy Research Lead spoke about the current efforts to enhance partnership and collaboration between pharmacy and General Practices in high quality research activities to: improve the evidence base in Primary Care, facilitate increased participation in research and further develop a pharmacy base for research across WY. Dr Patel asked delegates to identify current challenges and obstacles to improving collaborative research efforts. Unsurprisingly, the common themes were those familiar to all Clinical Research Networks and centered on

- availability of staff
- work load
- level of experience/knowledge/training
- remuneration as an enabler and
- staff/practice views about research.

Dr Patel spoke about the many benefits available for pharmacists and practices being involved in research via the Research Site Initiative Scheme (RSI), pending pharmacy studies and the potential for pharmacists in WY to replicate existing successful research groups like the Cutler Group in Sheffield, with the goal of eventually developing local clinical trials investigating medicinal products (CTIMPs).

Dr Bruno Rushforth, GP and Clinical Research Fellow in Primary Care introduced speakers from GP surgeries who gave their realistic insights and experiences of being involved in research. Fiona Purdie, Business Manager (Buttershaw Lane and Park Road Medical Practices-Bradford) and Dr Ramesh Edara (Colne Valley Family Doctors- Huddersfield)

generated a healthy discussion among delegates about the day-to-day aspects of conducting research and excellent feedback for the PCRN and researchers to use in future collaborations. Most notable was feedback from several practices that participants/patients appreciated the opportunity to be involved in research and that some found it a rewarding experience (see speech bubbles).

Vic Shepard, Research Nurse Manager introduced a new study. HEAT (Helicobacter Eradication Aspirin Trial) is a double-blind placebo controlled outcomes study of Helicobacter pylori eradication to prevent ulcer bleeding in aspirin users. It will be run by the University of Nottingham, with recruitment from 57 PCTs, across 12 Comprehensive Local Research Networks (CLRN). It is funded by the NIHR Health Technology Assessment Programme. Vic provided a very clear description of the study and how it evolved, highlighting what the PCRN can offer to facilitate local practice engagement.

John Hodgson, Clinical Trial Coordinator, PCRN Northern & Yorkshire spoke about the distinction between PCRN led and supported research and other Topic Specific Research Networks. He gave encouraging figures, highlighting the local PCRN's achievements that have resulted in a steady increase in recruitment to NIHR portfolio studies over the past 3 years.

On a personal note it was a great opportunity for me to catch up with all the Primary Care staff that have been involved with the PAPP Study-Prevalence and importance of unrecognized Bipolar Disorder in Primary Care over the last 16 months. On behalf of the PAPP Team and LYPT Research & Innovation Unit, well done to the PCRN staff and thank you for the invitation. We look forward to continuing to work with PCRN and the opportunity to present the PAPP study results at a future event.

"Great feedback from the practices, they all say how they have enjoyed working with yourself and the team on the study. They found you very helpful, knowledgeable and accommodating" Satti Saggi, PCRN

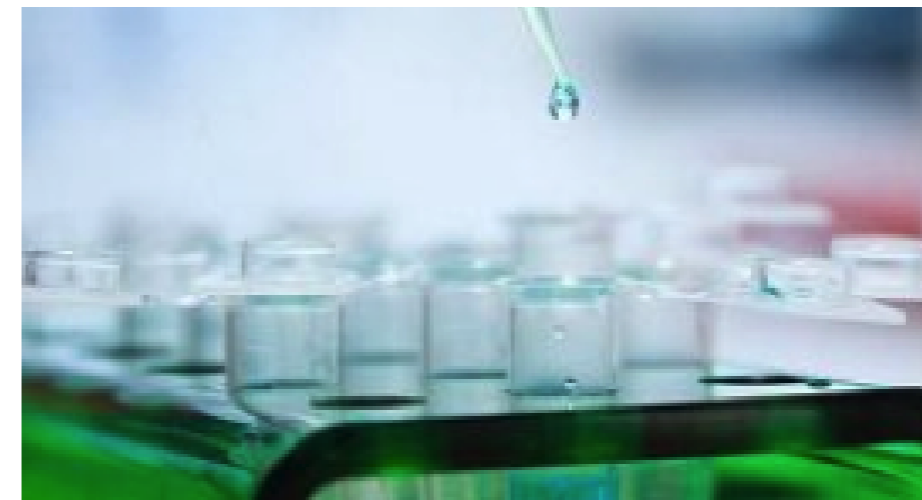
"The PAPP study was easy to administer in general practice ,with the help of Lucas!" Anonymous

"as a clinician I found it very helpful to have depressed patients screened for BPD as it is a worry that it can be missed in a standard depression review consultation we have had positive feedback from patients who were grateful to be screened" Dr A Moulson, Tong Health Centre, Bradford"

Lucas Coulson (PAPP Study Research Assistant)
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New study to determine genetic causes of schizophrenia within families

Researchers at the University of Leeds aim to pinpoint genetic defects involved in the development of schizophrenia within families.



Schizophrenia is a common yet poorly understood condition believed to be caused, in part, by genetic mutations. The two year project, funded by the Medical Research Council (MRC), builds on previous research at Leeds that suggests the existence of a genetic mutation, possibly causing an inherited form of the illness.

"If we can confirm which specific genes and processes are at fault, we can start to develop new treatments to target them," says lead researcher Dr Steve Clapcote from the University's Faculty of Biological Sciences. "Our study is important because medicines currently used to treat schizophrenia aren't effective in about a third of patients and can also cause severe side effects," he added.

The £400,000 MRC grant funds a team of University of Leeds academics including biologist Dr Clapcote, geneticist Professor Chris Inglehearn and psychiatrist Dr Alistair Cardno, both from the University of Leeds' School of Medicine, and consultant psychiatrist Dr Tariq Mahmood of Leeds Partnerships NHS Foundation Trust.

The team will initially be working with families from the Pakistani community of West Yorkshire, most of whom are the children of settlers from the 1950s. "We tend to find a smaller range of genetic mutations when individuals marry within a close-knit community, but it also means that we see certain mutations more often," says Professor Inglehearn. The team believe that this new approach will

allow them to narrow the search to uncover which mutated genes have been inherited that might cause the development of the illness. "In recent genetic studies of schizophrenia, researchers have usually studied large groups of unrelated people, looking for small increases in disease risk in a broad range of genes," says Dr Clapcote. "This new research uses a simpler approach, by working with a much smaller group of related patients," he explains.

The Leeds team has already tried this approach in one family, producing compelling evidence of the presence and location of a mutation on chromosome 13 which may cause a 'simple' genetic form of schizophrenia. They found that a child who inherits two copies of this mutation - usually from consanguineous marriage (marriage between cousins) - is more likely to

develop the illness.

Previous research had suggested the existence of such a gene, but with vague and varied suggestions as to its exact location. Dr Clapcote believes that the team's preliminary work should make it easier to confirm and locate the gene involved. If successful, they plan to apply the new gene discovery approach to other families with multiple cases of schizophrenia. The identified genes may include suitable targets for new drugs, which the team is hopeful will treat the causes of the disease, not just the symptoms, and with fewer side effects.

The Yorkshire Times

New study to determine genetic causes of schizophrenia within families



Thu 19th Jan, 2012 | 10:20am

<http://www.yorkshiretimes.co.uk/article/New-study-to-determine-genetic-causes-of-schizophrenia-within-families>



Autism Spectrum Disorder Traits and Eating Disorders

Dr John F Morgan and Vanessa Huke at the Yorkshire Centre for Eating Disorders (YCED) are leading a national research programme addressing autism spectrum disorders and eating disorders. The study is expanding knowledge of cognitive psychopathology and clinical outcome.

Anorexia Nervosa (AN) is a severe psychiatric disorder with one of the highest morbidity rates (5.86%, Arcelus et al 2011). Reported dropout rates range from 20.2%-49.6% for AN within inpatient clinics (Wallier et al, 2009), supporting the notion that AN is extremely difficult to treat (Guarda, 2007).

Recent empirical studies suggest, but do not prove, that Autism Spectrum Disorder (ASD) traits may be overrepresented in populations with eating disorders. The concept of ASD in eating disorders was first explored by Professor Christopher Gillberg who suggested 'in some families a common vulnerability in interaction with environmental factors causes Anorexia Nervosa (AN) in girls at puberty and autism in boys in infancy' (Gillberg 1985). This model was tested by Wentz et al, (2005) who suggested that 53% of eating disorder patients had at least one "Childhood Onset Neuropsychiatric Disorder" diagnosis, in which 23% appeared to have ASD. This research spawned international interest in the possible overlap between the autism spectrum and eating disorders (Zucker et al, 2007; Oldershaw et al, 2010; 2011), leading some influential commentators to argue that AN is 'the female form of Asperger's' (The Times, 2007).

Research on the association between ASD and eating disorders has evolved since the notion was conceptualized by Gillberg (1983), with a vast amount of the literature investigating three particular features which are evident in ASD: theory of mind (the ability to interpret another person's emotions and actions), central coherence (the ability to see the 'bigger picture') and set shifting (the ability to shift from one course of action to another with little difficulty). In addition there is evidence of similarities between the two conditions in difficulties with inflexible thought processes and an obsessive need for sameness in certain aspects of the daily routine (Zucker et al, 2007).

The next logical step in the evolution of this research is to examine the link between ASD and eating disorders in relation to clinical outcomes. If ASD traits are to be found in an eating disordered sub-group, investigations are to be conducted to explore how this may affect the service user's experience of treatment. It may be the case that an increase in traits of ASD could explain resistance to treatment, due to a lack of understanding or engagement with certain psychological therapies.

The YCED, Avalon Ward-Tooting and St George's University are currently collaborating in research that aims to examine the prevalence of different features of ASD in relation to treatment, resistance to treatment and recovery.

A question that also needs to be addressed is whether traits of ASD are artifacts of starvation or endophenotypes for eating disorders. Those arguing that ASD traits are apparent before (and may even lead to) the eating disorder state that AN and ASD appear to co-exist within families (Gillberg, 1983). However recent research i.e. the findings of Oldershaw et al (2010) suggest that there may be a recovery of emotional Theory of Mind (eToM) with nutritional improvement (especially in the recognition and experience of one's own emotions), indicating that a lack of eToM may be a factor of starvation, instead of a predisposed trait. Consequently the research taking place at the YCED and St George's is investigating specific ASD traits (central coherence, set shifting and theory of mind) on participant admission and then again on discharge from the eating disorder service. This is to examine whether traits of ASD improve with re-feeding/weight gain.

In conclusion, if an association between ASD and specific eating disorders is identified, this may help explain resistance to treatment with conventional psychotherapies. This will allow treatment to be modified according to the identified cognitive processing deficits of individual sufferers and increase the potential to offer more effective treatments for specific eating disorders, as well as broadening our understanding of treatment resistance.

Vanessa Huke

email: vanessahuke@nhs.net
Picture taken from url:

<http://www.psychiatrictimes.com/eating-disorders/content/article/10168/1519015>

CLAHRC Training Programme

FREE places now available

The NIHR Collaboration for Leadership in Applied Health Research and Care (CLAHRC) for Leeds, York and Bradford

The CLAHRC 2012/13 Training Programme has recently been launched. It aims to build capacity and capability in the local NHS and Social Care, to conduct high quality research and implement the findings. Courses range from undertaking the research (e.g. 'Writing and Disseminating Research') to practical support in implementing evidence-based practice (e.g. 'Introducing Research Implementation and Knowledge Transfer'). Places are available to people who are

involved in the work of the CLAHRC and/or employees of our partner organisations. Leeds and York Partnership NHS Foundation Trust is actively involved in the CLAHRC's two workstreams of addictions and translating research into practice (TRIP-LaB).

The link below takes you to our website which lists all the current opportunities available, gives more details of the work of the CLAHRC and allows you to book on a course:
www.clahrc-lyb.nihr.ac.uk/events/

Other courses available are:

- Introducing Research
- Capturing data for Research
- Handling Data in Research
- Writing and Disseminating Research
- Intervention Research
- Clinical Trials
- Qualitative Research
- Health Economics
- Systematic Reviews
- The Application of born in Bradford results into practice: symbiosis of health and education
- Analytical Research
- Statistical Inference in Research
- Statistical Modelling in Research
- How To Think Like An Economist
- Introduction to Health Economics for NHS Decision Makers
- The Social Determinants of Health and Health Inequalities: the role of the NHS and Local Authorities
- What works and how can I find out? Using existing evidence and routine data to inform and evaluate NHS management and organisation.

Contact us

Research and Development

Innovation is a newsletter for sharing and learning about research. This includes information about projects being carried out in your area. As such we welcome any articles or suggestions for future editions.

For more information please contact:

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WYCLRN Training Courses

Introduction to GCP - Course Dates

Wednesday 02 May 2012

Seminar Room 1.16, 11-14 Blenheim Terrace,
University of Leeds

Friday 22 June 2012

St James's University Hospital, Leeds

Wednesday 12 September 2012

Bradford Royal Infirmary

Friday 21 September 2012

St James's University Hospital, Leeds

GCP Refresher Course

This is a course for those who have attended the Introduction to GCP course and have experience of working on clinical trials.

Friday 11 May 2012, 9.30 - 12.30

WYCLRN Annex, 34 Hyde Terrace, Leeds

Wednesday 13 June 2012

Bradford Royal Infirmary

Wednesday 20 June 2012, 9.30-12.30

WYCLRN Annex, 34 Hyde Terrace, Leeds

Wednesday 12 December 2012

Bradford Royal Infirmary

Essential Project Management Skills in Clinical Research

This is a one day course aimed at research nurses and allied health professionals who are working proficiently in clinical trials and want to develop their skills in project management.

Wednesday 18th July 2012

The Eurich Room, Bradford Royal Infirmary

Monday 5th November 2012

The Eurich Room, Bradford Royal Infirmary

Monday 4th February 2013

The Eurich Room, Bradford Royal Infirmary

Informed Consent Workshop

A course for those currently working on, or with experience of, clinical trials who will be obtaining informed consent from study participants.

Thursday 31 May 2012,

ICOSS, 219 Portobello, Sheffield

To book a place on any of these training courses, please contact Laura Pryer (l.pryer@wyclrn.org.uk). Alternatively, if you have any queries regarding training and education please contact Emma Giddings (e.giddings@wyclrn.org.uk).