Dear Joe Bloggs,

Welcome to your Evidence Update email from KnowledgeShare.

The resources listed below have been chosen based on the interests you have provided. I hope they are useful.

Please contact me via email if you would like a copy of any of the journal articles. If you would like to change the interests we have listed, stop receiving the notifications, or request a search on a specific topic, please don't hesitate to let me know.

Articles

The following journal articles are available from the Library and Knowledge Service electronically or in print. Please follow links to access full text online, contact me to order copies, or call into your nearest library.

**Are molecular scanners going to make double-blind placebo-controlled trials impossible?**
[Letter to the Editor. Recently a molecular scanner (SCiOS), which costs less than US$150, has hit the market. The manufacturer states that the device can identify the substances in pills and capsules and even distinguish these from a placebo. If this is so, and since the device can be acquired easily and at low cost, the blindness of trials is at stake. It is highly likely that already currently running trials are at stake of a compromise in their blindness, with all the unwanted consequences.]
Available with an NHS OpenAthens password for eligible users

**Designing and analysing clinical trials in mental health: an evidence synthesis approach.**
[When planning a clinical study, evidence on the treatment effect is often available from previous studies. However, this evidence is mostly ignored for the analysis of the new study. This is unfortunate, since using it could lead to a smaller study without compromising power. We describe a design that addresses this issue.]
Freely available online

**Economic case for intraoperative interventions to prevent surgical-site infection.**
Gillespie BM. *British Journal of Surgery* 2017;104(2):e55-e64.
[Surgical-site infection (SSI) occurs in 1-10 per cent of all patients undergoing surgery; rates can be higher depending on the type of surgery. The aim of this review was to establish whether (or not) surgical hand asepsis, intraoperative skin antisepsis and selected surgical dressings are cost-effective in SSI prevention, and to examine the quality of reporting.]
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**Evaluating an undergraduate interprofessional education session for medical and**
pharmacy undergraduates on therapeutics and prescribing: the medical student perspective.
Shelvey BM. *Advances in Medical Education and Practice* 2016;(7):661—670. [The current literature on undergraduate interprofessional education (IPE) for pharmacy and medical students highlights a range of positive outcomes, although to date IPE has focused predominantly on student views and experiences of IPE sessions with these opinions being sought at the end of the sessions. This study aimed to evaluate medical students' experiences of therapeutics and prescribing IPE, with pharmacy students, 1 year following the session.]
*Freely available online*

Evidence basis for using perineural dexmedetomidine to enhance the quality of brachial plexus nerve blocks: a systematic review and meta-analysis of randomized controlled trials.
Vorobeichik L. *British Journal of Anaesthesia* 2017;118(2):167-181. [New evidence now indicates that perineural dexmedetomidine improves BPB onset, quality, and analgesia. However, these benefits should be weighed against increased risks of motor block prolongation and transient bradycardia and hypotension.]
*Contact the library for a copy of this article*

Information transfer in multidisciplinary operating room teams: a simulation-based observational study
Cumin D. *BMJ Quality & Safety* 2017;26(3):209 - 216. [Background: Communication of clinically relevant information between members of the operating room (OR) team is critical for safe patient care. Formal communication processes, such as briefing, sign in and time out, are designed to promote this.]
*Available with an NHS OpenAthens password for eligible users*

Investigating the Efficacy of Dexmedetomidine as an Adjuvant to Local Anesthesia in Brachial Plexus Block: A Systematic Review and Meta-Analysis of 18 Randomized Controlled Trials.
Hussain N. *Regional Anesthesia and Pain Medicine* 2017;42(2):184-196. [Dexmedetomidine has been thought to be an effective adjuvant to local anesthetics in brachial plexus blockade. We sought to clarify the uncertainty that still exists as to its true efficacy.]
*Contact the library for a copy of this article*

Liposomal bupivacaine infiltration at the surgical site for the management of postoperative pain.
Hamilton TW. *Cochrane Database of Systematic Reviews* 2017;(2):CD011419. [Liposomal bupivacaine at the surgical site does appear to reduce postoperative pain compared to placebo, however, at present the limited evidence does not demonstrate superiority to bupivacaine hydrochloride.]
*Freely available online*

Methadone for cancer pain.
Nicholson AB. *Cochrane Database of Systematic Reviews* 2017;(2):CD003971. [Authors' conclusions: Based on low-quality evidence, methadone is a drug that has similar analgesic benefits to morphine and has a role in the management of cancer pain in adults. Other opioids such as morphine and fentanyl are easier to manage but may be more expensive than methadone in many economies.]

[Conclusions: The implementation of the Surgical Safety Checklist represents a global concern in patient safety research. Yet how teams huddle for the checks has to be acknowledged as an issue in its own right. Appropriate mobilisation practices can help bringing fuller teams together, which has direct relevance to team training.]

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Routine use of antipsychotics to prevent or treat delirium is not recommended. Kishi. *Evidence-Based Mental Health* 2016;19(4):123.

[ABSTRACT FROM: Neufeld KJ, Yue J, Robinson TN, et al. Antipsychotic medication for prevention and treatment of delirium in hospitalized adults: a systematic review and meta-analysis. *J Am Geriatr Soc* 2016;64:705–14. Previous meta-analyses showed that antipsychotics were more beneficial than placebo for preventing the incidence of delirium, while this study demonstrated no significant association between antipsychotics and prevention of postoperative delirium.]

Available with an NHS OpenAthens password for eligible users

Topical anaesthesia for needle-related pain in newborn infants. Foster JP. *Cochrane Database of Systematic Reviews* 2017;(2):CD010331.

[Authors' conclusions: Overall, all the trials were small, and the effects of uncertain clinical significance. The evidence regarding the effectiveness or safety of the interventions studied is inadequate to support clinical recommendations. There has been no evaluation regarding any long-term effects of topical anaesthetics in newborn infants.]

Freely available online

Books

*New book(s) from the Library and Knowledge Service. Call into your nearest library or contact me for more information.*

Managing people: a practical guide for front-line managers

Rosemary Thomson & Eileen Arney. 4th ed.. Routledge. 2015. Library Shelf Location: HF 120 THO.

[This updated fourth edition of Managing People: A Practical Guide for Front-Line Managers addresses the growing needs of front-line managers who are not themselves specialists in personnel management but whose roles require them to have these skills. A growing trend over the last two decades has given these managers an increasing amount of responsibility of direct line management, which can be extremely challenging especially if the correct training is not given.]

Available with appropriate registration or membership

Events

*You may be interested in this (these) forthcoming event(s):*

An exploration of young people’s narratives of hope following experience of psychosis.

[Speaker: Victoria Bonnett, Clinical Psychologist, Sussex Partnership NHS Foundation Trust.]
The Sussex Psychosis Research interest Group (SPRiG) incorporates clinical and academic researchers within the University of Sussex, Brighton and Sussex Medical School and Sussex Partnership NHS Foundation Trust. We host SPRiG seminars on the last Wednesday of the month, at 4pm-5pm, at Sussex Education Centre. Follow us on Twitter @SPRiGSussex for updates on research projects and psychosis events.

Lecture Theatre, Sussex Education Centre, Mill View Hospital, Nevill Avenue, Hove BN3 7HZ.
Date: 25th January, 2017, 4:00pm - 5:00pm
http://www.sussex.ac.uk/spriglab
For more information, please contact a.c.wright@sussex.ac.uk.

BSUH Dissertation Presentation Day 1 (Inter-Professional).
[Have you completed a Dissertation for a BSc, Masters or PhD in the last 2 years? Would you like an opportunity to present your completed research, perhaps as a rehearsal for a national event? All professions are welcome. Closing date for submissions: 1st February 2017.]
Euan Keat Education Centre, PRH
All day event on: 22nd March, 2017
For more information, please contact alison.davies@bsuh.nhs.uk.

BSUH Dissertation Presentation Day 2 (Inter-Professional).
[Have you completed a Dissertation for a BSc, Masters or PhD in the last 2 years? Would you like an opportunity to present your completed research, perhaps as a rehearsal for a national event? All professions are welcome. Closing date for submissions: 1st February 2017.]
Euan Keat Education Centre, PRH
All day event on: 28th March, 2017
For more information, please contact alison.davies@bsuh.nhs.uk.

Grand Round: Neurosurgery.
[Every year the Euan Keat Education Centre presents a series of ten Grand Rounds about developments in medical research and practices. The educational lectures are aimed at and open to all clinical staff. Speaker: Mr Sorin Bucur.]
Euan Keat Education Centre, PRH
For more information, please contact Amelia.Amon@bsuh.nhs.uk.

Introduction to Good Clinical Practice (GCP).
[NIHR accredited training session. Good Clinical Practice (GCP) is the international ethical, scientific and practical standard to which all clinical research is GCP training conducted. Compliance with GCP provides public assurance that the rights, safety and wellbeing of research participants are protected and that research data are reliable.]
CIRU Seminar Room, RSCH
All day event on: 15th March, 2017
https://www.bsuh.nhs.uk/working-here/learning-zone/research-and-development-education-noticeboard/study-days-and-workshops/
**Leadership Saves Lives.**
[From the Institute of Healthcare Improvement (IHI) Brighton Chapter. Keynote speaker Peter Lees (Chief Executive and Medical Director of Faculty of Medical Leadership and Management) will explore the concept of vertical leadership development, what the evidence tells us about how to develop leaders for the 21st century and why it is so important in healthcare. In addition, find out about what the IHI can offer you. Refreshments from 5pm. ]
Audrey Emerton Building, RSCH

**Sussex Trauma Network Conference: Trauma Journeys.**
[With internationally renowned speakers, we will be taking a full view of the major trauma pathway from pre hospital care, through to rehabilitation. The programme includes workshop sessions for specific interest groups around pre hospital care and reception and resuscitation; definitive care and rehabilitation.]
AMEX Community Stadium, Brighton
All day event on: 28th March, 2017

**Taking Virtual Clinics from concept to completion.**
[As recent winners of the NHS innovation and AHA awards 2016 BSUH have decided to run a conference to show exactly how to move from concept to completion of a virtual clinic with the support of digital technology. Although examples will mainly be from the Virtual Fracture Clinic model, we will include examples of where virtual technique can be applied to many outpatient settings supporting a very diverse model of adoption so clinicians form all areas are very welcome.]
Royal Sussex County Hospital, Brighton
All day event on: 27th February, 2017
[https://www.eventbrite.co.uk/e/taking-virtual-clinics-from-concept-to-completion-tickets-29647072191](https://www.eventbrite.co.uk/e/taking-virtual-clinics-from-concept-to-completion-tickets-29647072191)

**Reports**

*The following report(s) may be of interest:*

**By the Team for the Team: Evolving Interprofessional Continuing Education for Optimal Patient Care: Report from the 2016 Joint Accreditation Leadership Summit.**
Joint Accreditation Interprofessional Continuing Education; 2016.
[http://www.jointaccreditation.org/resources](http://www.jointaccreditation.org/resources)

[Participants from 28 healthcare organizations and continuing medical education, pharmacy, and nursing accreditors gathered in Chicago last spring for the Leadership Summit for Jointly Accredited Providers. The result of the summit is a report that outlines some key challenges, recommendations, and best practices, along with a series of videos of educators talking about what they do and why they do it -- what brings them pride and joy in their work. ]
*Freely available online*

**Effective use of NHS funding: case studies.**
The BMA has been working to provide ideas and examples of where local change can help to make effective use of NHS funds. Read our case study report that provides examples of successful initiatives that have sought to improve value for money in the NHS within the UK and internationally.

Freely available online

**NIHR Signal: Following programmes to improve recovery after surgery linked to shorter hospital stays.**
NIHR Dissemination Centre; 2017.
[https://discover.dc.nihr.ac.uk/portal/article?id=SIG-5000364](https://discover.dc.nihr.ac.uk/portal/article?id=SIG-5000364)
[Reduced compliance with enhanced recovery protocols was associated with more days in hospital after keyhole bowel surgery, an increased likelihood of readmission and complications. Enhanced recovery, also known as fast track access, is considered standard practice but there is considerable variation in what this means and how this is implemented locally.]

Freely available online

**NIHR Signal: General surgery is mostly safe during pregnancy.**
NIHR Dissemination Centre; 2017.
[https://discover.dc.nihr.ac.uk/portal/article?id=SIG-5000359](https://discover.dc.nihr.ac.uk/portal/article?id=SIG-5000359)
[Routine data from English hospitals show that general surgery during pregnancy, such as removing the appendix or gallbladder, does not commonly harm mother or baby. This suggests that surgery in pregnant women is generally safe, but that mothers could be provided with more specific estimates of the risks.]

Freely available online

**NIHR Signal: Low-dose sedative reduces sudden confusion after major surgery in older adults.**
NIHR Dissemination Centre; 2016.
[https://discover.dc.nihr.ac.uk/portal/article?id=SIG-5000356](https://discover.dc.nihr.ac.uk/portal/article?id=SIG-5000356)
[Giving a low-dose sedative to older adults in intensive care after surgery reduces sudden confusion, also known as delirium, without increasing the risk of adverse effects.]

Freely available online

**Safeguarding children newsletter - February 2017.**
Brighton and Sussex University Hospitals NHS Trust (BSUH); 2017.
[Updates on FGM, stalking and domestic violence along with details of upcoming events and training dates.]

Available from NHS PCs

**State of the health system: Beds in the NHS: UK.**
British Medical Association (BMA); 2017.
[Although not the only indicator, data on how beds are used within the NHS provide an]
excellent insight into the healthcare system. This paper presents NHS bed data from across the UK in one place. The data demonstrates the increasing pressures on the system in each nation.]

Freely available online

Websites

The following website(s) may be of interest:

e-PAIN e-learning.
http://www.fpm.ac.uk/faculty-of-pain-medicine/e-pain
[The e-learning programme "e-PAIN" from the Faculty of Pain Medicine, the British Pain Society and Health Education England is the place to start for anyone working in the NHS who wishes to better understand and manage pain. e-PAIN distills the knowledge of a range of professionals into 11 modules made up of interactive sessions to meet the needs of a multidisciplinary audience. ]

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Cate