New guideline on management of suspicious skin lesions

A new guideline on the management of suspicious skin lesions was adopted at the Primary Care Surgical Association (PCSA) AGM last month. This will form the basis of continuing discussion with the ICGP, according to Dr David Buckley, PCSA chairperson.

The AGM took place in conjunction with the PCSA’s second scientific meeting in Connemara, with Dr Declan Larkin as convenor. The scientific programme got underway with lectures on lesion recognition, which stressed the use of dermoscopy to improve clinical diagnosis. Dr Stephen Hayes, a UK GP with special interest, reinforced the core principles of being alert to changing or unusual lesions. Nurse specialist, Caron Woodward of Durham presented on the operation of a nurse-run cryosurgery service in the UK.

Dr Christy Chou, Durham, opened day two of the meeting with a presentation on surgical techniques for lesion excision. This was followed by an overview of the approach to carpal tunnel syndrome and ganglia, by Mr Jack Kelly of University Hospital Galway. Also from UHG Mr Sherif Sultan provided an analysis of the economic potential of privately-delivered, community-based surgical services.

Dr Brian Kinirons, anaesthetist at UHG, presented a review of basic anaesthetic chemistry and of the hazards of topical and local anaesthetic. Dr David Buckley gave an evidence based critique of the recent National Cancer Control Programme Naevus Guideline. The PCSA website, www.pcsa.ie was launched by Dr Ross Ardill. Dr Niall Maguire reported on the progress achieved with the PCSA surgical audit project in conjunction with the Healthone user group and the Irish Primary Care Research Network.

Next year’s PCSA meeting takes place in April in Cork.

Research underway into generic substitution of antiepileptic drugs

New multi-centre research is underway to study generic antiepileptic drugs (AEDs) and to provide data on whether they are therapeutically equivalent to branded drugs and can be safely used interchangeably.

While the generic substitution of AEDs has been controversial, there has been little data to assist doctors in making clinical decisions, though anecdotally, problems have been arising. The new study at the University of Cincinnati, which is funded by the FDA and national epilepsy groups, will look at generic equivalence by comparing a branded drug with two different generics.

Epilepsy Ireland, which has welcomed the research, has been running a campaign highlighting concerns about substituting branded AEDs with generics. While a HSE report in 2010 recommended that AEDs be excluded from new legislation on generic substitution, this was not taken on board.

According to consultant neurologist, Prof Norman Delanty, director of the Epilepsy Programme at Beaumont Hospital, in cases where patients are controlled, switching between one version of a drug and another may lead to breakthrough seizures. “AEDs have a narrow therapeutic range and variation in the manufacture and composition of a medication introduces a factor that may disturb the balance and result in an otherwise avoidable or breakthrough seizure”.

Epileptologists internationally have expressed reservations about generic substitution of AEDs. A Lancet Neurology editorial in 2010 urged caution and particularly any measures to include the drugs in automatic substitution schemes. Leading epileptologists in the UK expressed their concern collectively in a letter to the Daily Telegraph.

Epilepsy Ireland suggests that health professionals err on the side of caution and include the words ‘do not substitute’ in scripts. Results of the research, due next year, are awaited.

Support group for people with skin conditions

A new organisation has been launched to support people with skin conditions. The Irish Skin Foundation brings together three groups – the Irish Eczema Society, the Psoriasis Association of Ireland and the Melanoma and Skin Cancer Society.

The new body has been established to support, educate and advocate on behalf of people affected by skin conditions and their families and carers. It will work in close liaison with the Irish Association of Dermatologists.

It also aims to set up an Irish registry of skin diseases, to establish new education and awareness programmes and to promote research into these diseases. It is estimated that more than one third of the Irish population is living with a skin condition at any time. See www.irishskinfoundation.ie

New vaccine guide for general practice

A new document, Guidelines for Vaccinations in General Practice, has been published by a multidisciplinary committee established by the HSE.

The 40-page document outlines clinical and administrative guidance for all vaccinations administered in primary care settings. It is due to be distributed to all GPs around the country this month. The guidelines aim to inform relevant staff in general practice and the HSE about procedures to be followed for immunisations.

Areas covered include: immunisation schedules, reporting adverse events and maintenance of the cold chain. Dr Conor O’Shea represented the ICGP on the multidisciplinary committee that drew up the guidelines. For further information see the HSE website, www.immunisation.ie
Something for everyone at this year’s College AGM in Galway

‘Facing current challenges and safeguarding the future of general practice’ is the theme of this year’s ICGP AGM, which will be held in the Galway Radisson Hotel from Friday May 10 to Sunday May 12.

There is something for everyone at this year’s AGM.

The College Forum debate on the Saturday is entitled ‘Back to the future – where now for general practice?’ It will be addressed by Dr John Gillies, chair of the RCGP in Scotland; Dr John Ball, ICGP communications chair; and Dr Margaret O’Riordan, College medical director.

The AGM business session will also debate the College’s proposed new governance structures, which will be formally voted upon at an EGM later this year.

This year’s Foundation lecture will be delivered by Co Cork GP Dr Tom O’Callaghan on ‘The power of technology for training. Using animation, multimedia and mobile phone technology to train the next generation of primary care doctors across the globe.’

The Friday evening sessions include workshops for CME tutors and ‘sunsets’, and workshops on travel medicine and managing pain.

Saturday morning workshops focus on issue such as HIQA’s national standards, audit, and prescribing dilemmas.

Saturday will also feature the annual QIP awards and presentations, as well as rapid updates and launches of College projects.

The AGM of the Republic of Ireland Faculty of the RCGP will also be held. The Saturday sessions will be followed in the evening by the President’s reception and the annual dinner.

The Sunday business session includes motions for debate on the abortion issue.

A special AGM preview supplement appears with this month’s Forum.

Primary care research networks – what value can they add?

Prof Paul Wallace, director of the UK NIHR Primary Care Research Network, has been confirmed as the keynote speaker at this year’s ICGP research and audit conference. He will address the question of what value primary care research networks can add.

The conference takes place on Saturday June 22 at the Lyrath Hotel, Kilkenny and will focus on the theme of ‘Networks: making audit easier/increasing research participation’.

Prof Wallace, who was a general medical practitioner for 20 years until his retirement in 2012, has long been involved with the development of research networks in primary care, both in the UK and internationally.

His research is focused on the identification and management of patients with risky drinking patterns and he currently leads an international programme of research into the effectiveness of digitally-mediated screening and brief interventions for alcohol problems in primary care settings. His keynote delivery will set the scene for what is anticipated as an enlightening and engaging day.

This conference is noted for its convivial style and is particularly appropriate for researchers who have not presented previously at a national event. It also provides a supportive avenue to obtain advice on work in development.

The conference will include the presentation of both research and audit projects in oral and poster format. MEDISEC is sponsoring the event again this year with prizes for the best oral presentation and the best poster.

Instructive workshops will also be held in the afternoon, with a particular emphasis this year on supporting audit activities and advising on research projects.

CME points are available for attendance at this conference. Register online at www.icgp.ie

Elearning suicide prevention programme launched

HIQA urges use of new guidelines for common surgical referrals

In a series of health technology assessments, the health safety body HIQA has recommended the introduction of hospital referral and treatment guidelines for some common surgical procedures.

The rules are intended to minimise the number of patients who may be referred to hospitals by GPs for surgery but may not actually need a procedure.

It says the new guidelines will ensure that the right patients are referred for the right treatment at the right time.

This, according to HIQA, would release capacity in the hospital system without causing harm to patients or reducing the potential clinical benefit of procedures.

The surgical procedures covered by the guidelines are varicose vein surgery, tonsillectomy, grommet insertion/adenoidectomy and cataract surgery.

The guidelines are intended to provide greater clarity to GPs and patients about the clinical criteria used by surgeons to inform their decision to operate.

The guidelines outline new thresholds for referral intended to minimise the number of patients referred to surgical outpatients who do not proceed to having surgery, according to HIQA. The guidelines are available at www.hiqa.ie

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