



SYMPOsia
Hybrid



ROYAL
COLLEGE of
PHYSICIANS of
EDINBURGH

Respiratory Medicine

Programme & Abstracts



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Friday 20 May 2022

 #rcpeResp22

Symposium organising committee

Dr Melanie Cross OBE (Chair)

Dr Ahsan Akram

Dr William Anderson

Dr Graeme Currie

Dr Rob Grecian

Dr Eleanor Hampton

Dr Joy Miller

The Federation of the Royal Colleges of Physicians of the UK runs a Continuing Professional Development (CPD) Scheme for all post-training physicians. Please note it is your responsibility only to claim credits for the hours you attend.

CPD ID Code: 139759
CPD Credits: 6



CPD certificates and feedback

The CPD sign-in register is now online and is combined with the symposium feedback form.

- Please note that in order for us to issue CPD certificates, we require participants to complete our online feedback survey and you should have received an email containing a link to your individual feedback form. If you have not received this please contact: a.serelis@rcpe.ac.uk
- There is an option to save your feedback as you complete it during the day and finish your responses later. This is done through the 'Finish later' button which is at the bottom of every page of the survey.
- Please note that the 'Finish later' feature supplies you with an updated individual link which contains your previous answers. These are not accessible to our administration team so please ensure that you store this link as otherwise you will have to begin your survey again.
- The sign-in and feedback form will be open for 28 days after the event, **closing at midnight on Friday 17 June 2022**. Electronic certificates will be issued shortly after that date via email. It will not be possible to issue certificates to delegates who do not complete the form by this date as it is your confirmation that you attended – so please make sure you do. Please note that it is not possible to download a certificate directly from the online feedback survey platform.

Asking questions and interactive sessions

- You can submit questions to the speakers during the talks using 'Slido.com' - we will be using interactive software, 'Slido', so that everyone can ask the speakers questions and participate in any polls and case discussions.
- Additionally, if you are attending the building there are microphones for you to use in the auditorium.
- On your mobile, tablet or computer, go to [slido.com](https://www.slido.com).
- Enter the event code: **#rcpeResp22**
- This code will be used throughout the day for all presentation.
- When delegates send questions to speakers, your device will display the delegate questions.
- You can 'like' any delegate questions submitted, questions will rearrange based on how many 'likes' they have, highlighting to the Chair popular questions.
- Any questions not answered on the day will be responded to retrospectively and posted on <https://events.rcpe.ac.uk/events/symposia>.

Social media

The College encourages online discussion and the use of social media. Please feel free to participate – the Twitter hashtag for this event is **#rcpeResp22**

You don't have to join Twitter to participate, anyone can access the tweets from the event, just type the event hashtag into the search bar of your browser and all tweets with the hashtag will be displayed. The College has its own Twitter account @RCPEdin and this is usually highly active during symposia and a useful summary of key messages from the day.

**A Heritage Exhibition and other useful and interesting
information is on the live event pages**

Symposium Programme

Respiratory Medicine

RCPE Symposium held on Friday 20 May, 2022

- 09.00** **Registration and Coffee**
- 09.25** **Welcome by Professor Andrew Elder, President, Royal College of Physicians of Edinburgh**
- Session 1** **Airways update 2022**
- Chair:** Dr Paul Cadden, Consultant Respiratory Physician, Perth Royal Infirmary, NHS Tayside
- 09.30** **Cutting edge severe asthma/airways treatment**
Dr Brian Lipworth, Ninewells Hospital, University of Dundee
@doclip1
* airway inflammation * mechanisms * therapeutics * future developments
- 10.05** **25 years: The changing face of severe asthma management (as seen by a has been!)**
Dr Rob Niven, Respiratory Consultant (Retired)
@robnivenonarran
* historical perspectives * current missed diagnoses * getting the choice of therapies correct * differential diagnosis (historic) * development of biologics and bronchial thermoplasty
- 10.40** **Chronic obstructive pulmonary disease (COPD) cohort data**
Professor Wisia Wedzicha, Professor of Respiratory Medicine, National Heart and Lung Institute, Imperial College, London
@wisia4449
* COPD accounts for 10% of all hospital admissions * 30% of COPD admissions readmitted within 3 months * 10% of COPD patients die within 3 months of being admitted * in UK 25,000 –30,000 deaths per year * associated co-morbidities COPD - statistics and triggers of COPD exacerbations
- 11.15** **Coffee/Tea**
- Session 2** **Covid-19 and impact on respiratory care in 2022 and beyond**
- Chair:** Dr Melanie Cross OBE, Respiratory Consultant, Edinburgh Royal Infirmary
- 11.40** **Physical activity: Covid-19 and beyond**
Dr David Salman, Research Fellow in Physical Activity & Clinical Fellow in Sports and Exercise Medicine, Imperial College, London
@drdavidsalman
* Covid-19 * community re-habilitation
- 12.15** **DR ANDREW CAIRNS DOUGLAS LECTURE**
Chair: Professor Andrew Elder, President, Royal College of Physicians of Edinburgh
- COVID 19 and COVID recovery: working together across sectors**
Professor Linda Bauld OBE, Bruce and John Usher Chair of Public Health in The Usher Institute, University of Edinburgh & Chief Social Policy Advisor to the Scottish Government
@LindaBauld
* COVID-19 * public health * future and beyond
- 13.00** **Lunch**

Symposium Programme

Respiratory Medicine

RCPE Symposium held on Friday 20 May, 2022

Session 3 Lung cancer futures

Chair: Dr Ahsan Akram, Cancer Research UK Clinician Scientist & Honorary Consultant in Respiratory Medicine, NHS Lothian

13.45 The national optimum lung cancer pathway

Professor David Baldwin, Consultant Respiratory Physician, Nottingham University Hospital, & Hon. Professor, School of Medicine, University of Nottingham Chair, CEG for Lung Cancer, NHSE @DRBLungs

* lung cancer * optimum pathway * service delivery planning

14.20 Navigational bronchoscopy

Dr Adam Marshall, Respiratory Consultant, Edinburgh Royal Infirmary @adamdlmarshall

* reach small nodules in the periphery of the lung * steerable, flexible instruments and GPS-like technology * 3-D imaging

14.55 Modern treatments for lung cancer

Dr Nicola Steele, Lung Cancer Medical Oncologist, Beatson Cancer Centre, Glasgow

* lung cancer * medical therapeutics * new treatments

15.30 Coffee/Tea

Session 4 Respiratory redesign for the 2020s

Chair: Dr Joy Miller, Respiratory Consultant and Associate Postgraduate Dean, Aberdeen Royal Infirmary

15.50 Integrated care in respiratory medicine

Dr Binita Kane, Consultant Respiratory Physician, Manchester University Trust @BinitaKane

* integrated respiratory services and care * COPD health innovation * severe asthma network * community based respiratory care * respiratory hubs * virtual wards

16.25 Respiratory short case clinical conundrums

Dr Tom Fardon, Consultant Respiratory Physician, Ninewells Hospital, NHS Tayside, Chair of the Scottish National Advisory Group for Respiratory Medicine @DundeeChest

* slido quiz * interactive * audience responses to a mixed collection of clinical respiratory presentations * respiratory update * discussion points

17.00 Close

Session 1 – Airways update 2022

Cutting edge severe asthma/airways treatment

Dr Brian Lipworth, Ninewells Hospital, University of Dundee @doclip1

Patients with severe refractory asthma are characterised by increased expression of downstream type 2 cytokines IL4, IL5, IL3 and upstream epithelial alarmins TSLP, IL25 and IL33. Such patients have elevated type-2 biomarkers including blood eosinophils, FeNO and IgE which are treatable phenotypic traits in regards to targeted biological therapy. The main effects of type 2 biologics is to reduce exacerbations and oral corticosteroid-sparing effects, improve symptoms and quality of life and to a lesser degree improve function. Attention should be paid to coexistent type 2 comorbidities including nasal polyposis, atopic dermatitis, and eosinophilic oesophagitis in terms of choosing the most appropriate biologic.

25 years: The changing face of severe asthma management (as seen by a has-been!)

Dr Rob Niven, Respiratory Consultant (retired) @robnivenonarran

The talk will look at the historical perspective of severe asthma, from early attempts at diagnosing severe or difficult asthma and identifying the early differential diagnoses which were responsible for symptoms in a treatment-unresponsive asthma referral population. This will take us from Vocal Cord Dysfunction, through non adherence and include other patterns of disordered breathing and eventually on to tracheomalacia and the need for early bronchoscopy and sputum inflammometry in the modern era.

We will look at how historical events changed the perception of the disease, its management

and influenced the current approaches to asthma management.

The aim will be to set the scene for how severe asthma clinics are and should be run in the modern era of biologics, without losing the critical view, that 'not all that wheezes, is asthma'.

Session 2 – COVID-19 and impact on respiratory care in 2022 and beyond

Physical activity: COVID-19 and beyond

Dr David Salman, Research Fellow in Physical Activity & Clinical Fellow in Sports and Exercise Medicine, Imperial College London @drdavidssalman

Physical inactivity is a key driver of non-communicable disease globally, and being physically active appears to be a protective factor against the severity and sequelae of COVID-19 infection. Prior to the COVID-19 pandemic, a third of men and half the women in the UK were not sufficiently physically active for good health. Such physical inactivity is bound together with socio-economic inequalities; these appear to have been exacerbated by the COVID-19 pandemic along with worsened rates of physical activity across all ages. Barriers to physical activity cut across personal, societal and structural factors, and interventions to increase participation should therefore include systems thinking approaches. Those who have suffered from COVID-19 may have a renewed interest in increasing physical activity, and some will need additional considerations when returning to movement-based activities. Messaging around physical activity needs to be supportive and sensitive to all these factors to ensure broad and inclusive access to an intervention with wide-reaching health benefits.

Session 3 – Lung cancer futures

The national optimum lung cancer pathway

Professor David Baldwin, Consultant Respiratory Physician, Nottingham University Hospital, and Honorary Professor, School of Medicine, University of Nottingham Chair, CEG for Lung Cancer, NHSE @DRBLungs

The National Optimum Lung Cancer Pathway (NOLCP) was developed in response to a request from the Programme of Care Board for NHS England in 2015. It was published in 2017 after extensive stakeholder review and modification and sent as 'clinical advice' to the newly established Cancer Alliances. The pathway has been updated twice to provide additional detail and clarity and is now an established benchmark for lung cancer services in England and Wales. It has been the focus of a Getting it Right First Time (GIRFT) review for England. The tough targets for every step can often be achieved through optimal logistics, but capacity is a major barrier. The pathway serves to identify where capacity is the predominant factor and provides a powerful tool to argue for increases in staffing and equipment. Key points that have been the focus of detailed implementation work are the direct-to-CT and triage process, diagnosis and staging investigation bundles, and optimum treatment strategies.

NHS England has established many other optimal pathways for different tumour sites, drawing on the learning from the NOLCP. The concept of a single cancer pathway, with specific modifications for individual tumour sites is the approach taken in England and Wales. In the latest analysis from the National Cancer Programme Team, lung cancer had the best performance of the common cancers in the 28-day diagnostic standard, although still short of the target. The optimum lung cancer pathway for Scotland is in development and

Northern Ireland Cancer has a published pathway.

Navigational bronchoscopy

Dr Adam Marshall, Respiratory Consultant, Edinburgh Royal Infirmary @adamdlmarshall

Diagnosis of the indeterminate pulmonary nodule remains a challenge and early intervention in cases of malignancy are linked with improved outcomes. Navigation bronchoscopy offers an alternative opportunity to obtain tissue confirmation in selected patients. The current technology, outcomes and limitations of this procedure will be reviewed.

Session 4 – Respiratory redesign for the 2020s

Integrated care in respiratory medicine

Dr Binita Kane, Consultant Respiratory Physician, Manchester University Trust @BinitaKane

For many years, we have heard the rhetoric about the need for 'patient-centred integrated care, co-production of services with patients ('no decision about me without me') and transforming the care of those with long-term conditions.

In a post-pandemic world, with dwindling budgets, worsening workforce crises and increasing burden of chronic disease, there has never been a greater need to integrate care around patient needs. At the same time, it has never been a more challenging time to implement.

This session covers: why integrated care is important, what the term means and how to start transforming systems. It is aimed at people who are new to systems leadership and innovation to help them get started on the journey.

Respiratory short case clinical conundrums

Dr Tom Fardon, Consultant Respiratory
Physician, Ninewells Hospital, NHS Tayside,
Chair of the Scottish National Advisory
Group for Respiratory Medicine
@DundeeChest

A number of recent clinical conundrums and
challenging cases will be presented. There will
be audience interaction using SLIDO.com, to
keep attendees on their toes to the end of the
day. No prizes for the right answers, if indeed
there are any.



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Upcoming Events 2022

Most events within our Education programme are being delivered as hybrid, with the option to attend the College in-person or to watch the event online from home. Each event page will highlight the mode of delivery. All events and CPD/Feedback surveys are open for 28 days after the event so that you catch-up from any time zone.



Education Portal

Material from these events is available to Fellows, Members and Associates on the College's Education Portal, along with accredited specialty modules.

learning.rcpe.ac.uk

RCPE
PORTAL

The Royal College of Physicians of Edinburgh's education programme continues with:

May

TUE
24

A run-through of Rheumatology

EMU

THU
26

COP26 Legacy Series: Building our COP26 legacy with eyes on COP27

EMU

June

TUE
21

Predicaments in Palliative Medicine

EMU

THU
23

RCPE USA: Updates in Clinical Medicine

IMU

July

THU
14

RCPE India: Updates in Clinical Medicine

IMU

TUE
26

Top Tips for New Doctors

EMU

WED
27

RCPE Bangladesh: Updates in Clinical Medicine

IMU

To book, or for more information on our events, visit: events.rcpe.ac.uk