

Updates in General Internal Medicine

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A symposium organised by the Trainees and Members' Committee of the RCPE held on 30th October 2015 at the Royal College of Physicians Edinburgh

DECLARATION OF INTERESTS KEW was on the organising committee for the symposium and is chair of the Royal College of Physicians Edinburgh Trainees and Members committee from November 2015.

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INTRODUCTION

The popularity of the Trainees and Members' Committee (T&MC) Symposium continues to grow after 20 years. With 180 registered and 32 live web-streaming sites worldwide it attracted a global audience of students, medical and allied healthcare professionals and created 67,500 impressions on Twitter.

The topical junior doctor contract was at the forefront of many trainees' minds. The day started with a reflection from Professor Derek Bell (President, RCPE) and Dr Rosemary Hollick (Chair, T&MC) recognising the importance of supporting trainees and the future workforce through symposia, developing our general medicine knowledge and by valuing the trainees' role.

UPDATES IN PRACTICE

The first session covered a wide range of key updates in general medicine. Dr Ron Kerr (Ninewells Hospital, Dundee) opened with 'Updates in practice' discussing appropriate use of long-term anticoagulation for recurrent venous thromboembolism (VTE), new oral anticoagulants and safety data, and the synergy of multiple risk factors in guiding appropriate VTE management.

Dr Andrew Bathgate (Royal Infirmary of Edinburgh) gave an overview of hepatitis C management advances. Interestingly we learnt that obesity is the greatest influence on cirrhosis progression in genotypes 1 and 4 at 35 years' follow-up. Genotype 1, notoriously difficult to treat, has new hope with recent combined drugs (sofosbuvir/ledipasvir and ribavirin) achieving 95–100% response rates.¹

CASE-BASED DISCUSSIONS

Thought-provoking cases produced lively discussion. Informative video-clips by Dr Martin Zeidler (Victoria Hospital, Kirkcaldy) illustrated blackouts which reinforced key differences. We were reminded of ensuring correct diagnoses by focusing on history and good eye-witness accounts. Examination tips included looking at the eyes – if tightly shut this indicates pseudo-seizure.

Dr Ivan Tonna (Aberdeen Royal Infirmary) highlighted a complex case with delayed diagnosis of Lyme disease and subsequent Post-treatment Lyme Disease Syndrome (PTLDS). The highest incidence of Lyme disease in Scotland is in the Highlands.² He discussed the importance of a two tier approach in suspected Lyme disease (ELISA then Western blot if positive), and testing those with Bell's palsy in endemic areas (including Scotland). For PTLDS, the treatment controversy results from different guidelines.³ The Infectious Diseases Society of America (IDSA) is evidence-based and does not advocate long-term antibiotics.

CROOM LECTURE

Dr Hasan Haboubi (Swansea University) delivered the 42nd Croom Lecture: 'Can a finger-prick test be used to diagnose cancer? Lessons from the oesophageal cancer model'. The occurrence of oesophageal cancer is rising, but his exciting new research using a biomarker (Pig-A mutation) for detection has good sensitivity (80.6%) and specificity (80.9%). All this just by analysing a finger-prick of blood – the potential future for this biomarker looks promising.

PRIMARY/SECONDARY INTERFACE

We discussed the challenges of designing care around a patient's needs and across the primary/secondary interface.

Dr James Shaw (Whitehills Hospital & Community Care, Forfar) discussed anticipatory care plans (ACPs). The SPICT™ tool⁴ is a helpful starting point. He reminded us it is not simply a form-filling exercise. Clarity in the plan, to avoid ambiguity, and good communication are key alongside regular updates to reflect a patient's changing wishes and disease progression as part of a living document.

Continuing the theme, Dr Conway (Roxburghe House, Dundee) discussed that a good death is what matters to the patient. Although the UK was considered best for providing end of life care in 2015,⁵ she argued there is still much to be done.

CLINICAL LESSONS

Four fascinating clinical cases were presented. The student and foundation category winner Ms Sugeeta Sukumar (5th year, Manchester) gave a dynamic account highlighting an immunosuppressed patient with lymphadenopathy secondary to cat-scratch disease (*Bartonellosis*). The key learning point was that a detailed history can provide the answer.

The collegiate winner Dr Kirsty Weaver (CT2, Kilmarnock) gave a reflective account of an older patient with delirium due to delayed recognition of sporadic Creutzfeldt-Jacob disease. She communicated the importance of not over-treating urine infections and considering alternative diagnoses sooner in a changing clinical presentation.

Co-author Dr Amy Baggott (ST6 Infectious Diseases, Leeds) presented the RCPE Journal Prize paper 'HIV testing in Lanarkshire'⁶ which resulted in a local protocol to increase appropriate HIV testing.

TAKE HOME MESSAGES

The symposium was thoroughly informative, covering a breadth of specialties and discussing challenging clinical conundrums. Lessons of the day included questioning our diagnosis in evolving clinical situations; communicating patients' wishes across different interfaces; and being attentive to detail in complex cases. Summarising the day, we heard about exciting new advancements in clinical medicine and research and high calibre presentations from our students and doctors in training sharing their clinical experiences.

REFERENCES

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