

# WOLFSON INSTITUTE OF POPULATION HEALTH NEWSLETTER ISSUE 52: 28 MARCH 2024

In this issue of our Wolfson Institute of Population Health Newsletter, we celebrate the achievements and work of staff and students in March.

## FROM OUR DIRECTOR

Dear Colleagues,

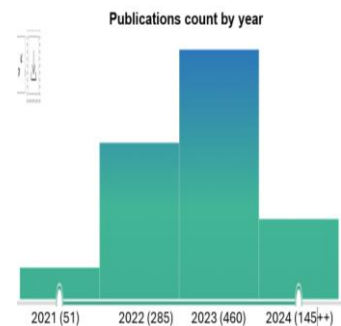
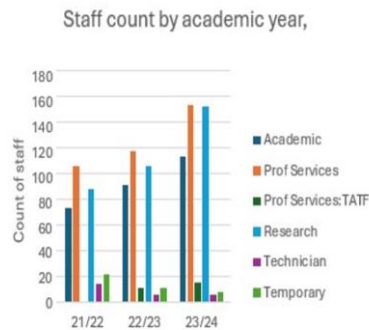
Last night many of us heard a fabulous inaugural lecture from Suzanne Scott, reflecting on the pathways she has followed during her career and as the focus for so much of her impressive research. She waved a flag for there being 'no such thing as a clear (career) pathway', and for multi-disciplinary research - both important issues in our Institute.

I'm rather surprised to report that it's the third anniversary of my arrival at QM next week. Jan and Tor have kindly produced these charts to show the year on year rise in staff count and in publications since my arrival, and I'd like to take this opportunity to thank you all for your fantastic support over this time. It takes every member of staff, working together in a dedicated and multi-disciplinary way, to produce such excellent progress.

Wishing everyone a peaceful break and enjoyable short holiday now, and let's hope that we see less rain and more sunshine.

With best wishes

Fiona



MEET WIPH

## MEET – AVINASH CHANDRA (Centre for Preventive Neurology)

### How would you describe your roles and responsibilities?

My main role is as the postdoc research assistant on the NIHR-funded ABATED study, which aims to provide more timely and accurate diagnosis of dementia by using AI technology (computer analysis) to interpret brain scans of mild cognitive disorder patients attending East London NHS memory clinics. My responsibilities include patient screening and recruitment, administering study assessments, database curation, data analyses, manuscript preparation, and managing administrative aspects of the study. I also help with PPIE work for the study, including focus groups, newsletters, and our study [website](#), and I am working on several research projects examining the pathophysiology of modifiable dementia risk factors. I am a PhD supervisor, a facilitator for PBL modules, and an undergraduate supervisor for the BMD606 module. I also co-lead the Applied Models and Digital Health Working Group for the Deep Dementia Phenotyping Network.

### What has been your greatest professional achievement?

Giving my first platform presentation at an international scientific conference - it was an initially nerve-racking but very rewarding experience.

### What aspects of your role do you most enjoy?

I really enjoy working with my fellow team members and our collaborators to ensure that all aspects of our study run efficiently and smoothly. I also enjoy interacting with our research participants and hearing about their experiences.

### What would be your second choice as a profession?

Having grown up in the US, I spent a lot of time watching baseball. I've always had an interest in working behind the scenes at a baseball club, maybe as a statistician, or helping to recruit players.

### What do you enjoy doing outside work?

In my spare time I enjoy travelling, hiking, and reading. I love trying new restaurants and exploring new places in the UK.

### Something about you that most people don't know?

My last 3 academic/work placements have all been royally themed - Queens College, City University of New York (master's), King's College London (PhD), and Queen Mary University of London (postdoc)!



## GENERAL INSTITUTE NEWS

### Randomised trials conducted using cohorts

8 March (Bev Nickolls, Clare Relton, Sandra Eldridge, Ratna Sohanpal. Centres for Evaluation and Methods/Primary Care)

To examine the extent, range and nature of research using cohorts for randomised controlled trials (RCTs) and describe the varied definitions and conceptual boundaries for RCTs using cohorts, a scoping review identifies 61 protocols, 9 descriptions of stand-alone cohorts intended to be used for future RCTs, 39 RCTs using cohorts and 34 methodological papers. Authors reported that the approach can lead to more efficient recruitment, more representative samples, and lessen disappointment bias and crossovers. The review outlines the development of cohorts to conduct RCTs, including the range of use and innovative changes and adaptations, and also highlights inconsistencies in the use of terminology and concepts. Researchers call for guidance to support the design and reporting of RCTs conducted using cohorts.

#### STRENGTHS AND LIMITATIONS OF THIS STUDY

- ⇒ The study's methodological strengths include the use of the CONSORT-ROUTINE extension search strategy to update the scope of work taking place using cohorts.
- ⇒ Another strength is the overview of methodological writing on trials using cohorts including how informed consent procedures are operationalised.
- ⇒ While we aimed to assess reporting and terminology, the identification of our sample relied on reporting and terminology.
- ⇒ The review was limited by the amount of detail available on some important design features, for example, how informed consent processes were operationalised in different clinical populations.
- ⇒ The studies identified are pre-January 2022. As most are protocols for RCTs yet to run or complete, it is difficult to draw inferences on trends in recruitment and retention. The impact of COVID-19 on these trials is also an unknown factor.

### The Telegraph - Preventing Dementia

9 March (Claudia Cooper. Centre for Psychiatry and Mental Health)

## The Telegraph

Health / Conditions

Dementia

Explore Health and Fitness



Can supplements really help prevent dementia?

A growing number of nutritional supplements claim to reduce our risk of developing dementia – but is there any evidence that they work?

Posing the question *Can supplements really help prevent dementia?* a Telegraph article examining whether there is evidence that nutritional supplements may reduce risk quotes Claudia Cooper, who explains that 40% of dementia cases could be delayed by better lifestyle choices. Encouraging people to take up the 5-yearly NHS health check, she says that risk of dementia is determined by genetics, lifestyle and stress levels. Claudia discusses the Apple-tree study, which is developing a prevention programme to reduce risk through behaviour change

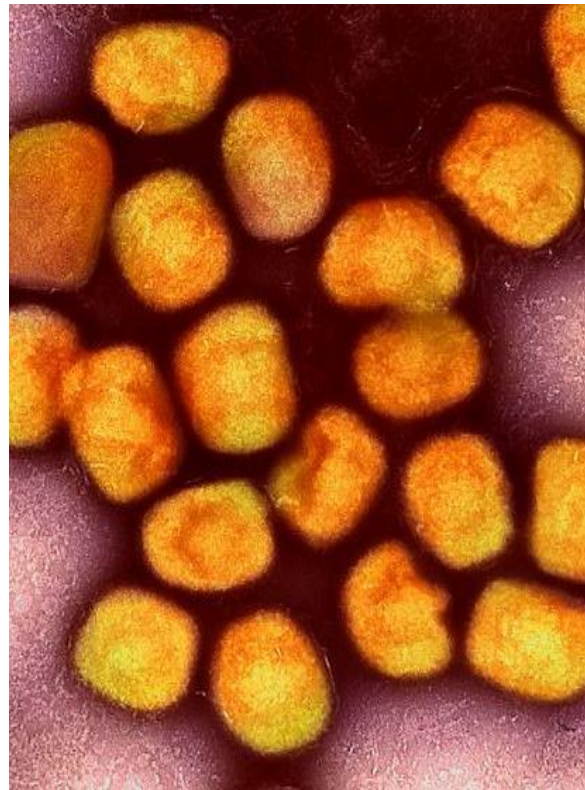


and technology: *'What we recommend in the Apple-tree intervention is eating more healthily, moving more, and reducing alcohol and smoking. These are the key things, but anything that gives you a sense of ownership over your health is likely to help.'*

### **Illness narratives of people who experienced mpox in Australia in 2022**

10 March (Sara Papparini. Centre for Public Health and Policy)

Illness narratives derived from interviews with 16 cisgender, gay, or bisexual men living in Australia (13 diagnosed with mpox and 3 close contacts) describe minor to severe periods of sickness, negative and stigmatising experiences engaging with healthcare, and some participants experiencing long-term effects on their sexual well-being and mpox complications. Mpox was narrated as disruptive in different ways: as a minor interruption to holiday plans, a prolonged period of poor health, or a biographically disruptive event prompting a re-evaluation of sexual values and health. This analysis demonstrates that an unfamiliar emergent disease outbreak related to sexual practices and sociality can reconfigure personal life and sexual well-being, suggesting a need to focus on providing quality patient care in outbreaks of mpox and other infectious diseases.



### **Additional funding for the Parkinson's Progression Markers Initiative**

11 March (Al Noyce, Cristina Simonet. Centre for Preventive Neurology)

#### **THE MICHAEL J. FOX FOUNDATION FOR PARKINSON'S RESEARCH**

The Michael J Fox Foundation has made an additional funding award of USD 600,000 over two years to support QMUL Parkinson's Progression Markers Initiative (PPMI) activities, based on the



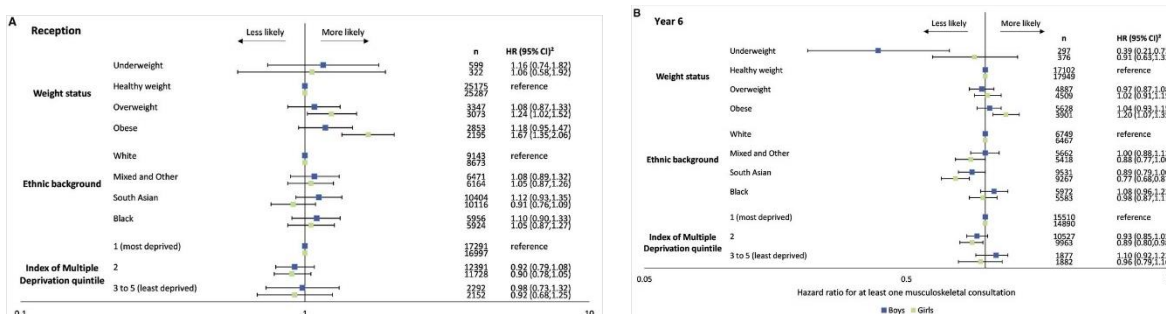


impressive start the team has made with recruitment. This money will be used to further efforts in prodromal Parkinson's disease, and recruitment from diverse backgrounds. PPMI is changing how patients, families, doctors and scientists think about brain disease.

## Obesity and musculoskeletal symptoms during childhood

12 March (Nicola Firman, Kate Homer, Gill Harper, John Robson, Carol Dezateux. Centre for Primary Care)

A longitudinal study of 63,418 reception and 55,364 yr6 children using data from the National Child Measurement Programme and electronic health records finds that 3.0% of reception and 8.1% of yr6 children had at least one musculoskeletal related GP consultation. Girls in reception with a BMI classified as overweight or obese, and yr6 girls with obesity were more likely than girls with a healthy weight to have had at least one musculoskeletal consultation. Knee and back pain were among the most common symptoms reported, and authors say these may be caused by excess weight placing additional stress on the body's joints. This paper received widespread media coverage on 13 March.

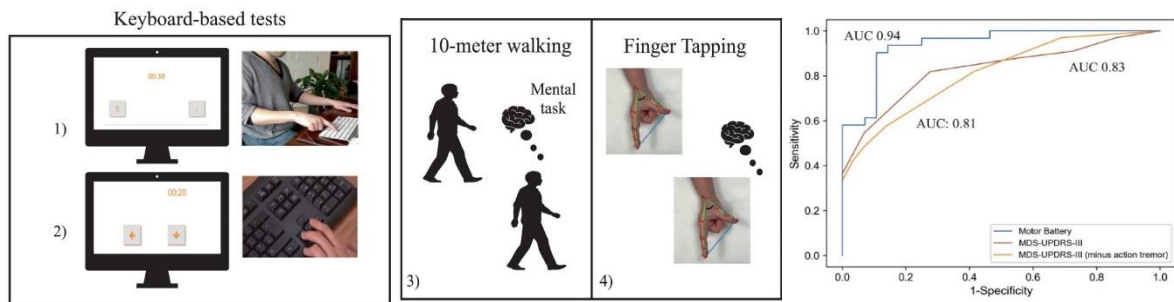


## Motor dysfunction in isolated REM sleep behaviour disorder

12 March (Cristina Simonet, Brook Huxford, Harneek Chohan, Aneet Gill, Alastair Noyce. Centre for Preventive Neurology)

Motor dysfunction seems the strongest predictive marker of Parkinson's Disease conversion in patients with Isolated Rapid Eye Movement (REM) sleep Behaviour Disorder (iRBD). A precise tool for early motor dysfunction in at-risk people would be important if neuroprotective treatments become available. Researchers evaluated 4 tests: 2 keyboard tapping tests and 2 motor tasks, first in isolation, and then as dual tasks (walking and finger tapping) in patients with confirmed iRBD and in controls. The iRBD group performed both keyboard-based tests more slowly and less rhythmically than controls but, unlike controls, they increased their walking duration and had a smaller amplitude and slower finger tapping with dual task. Compared with the Movement Disorder Society-Unified Parkinson's Disease Rating Scale part III, a combination of the most salient motor markers showed 90.3%

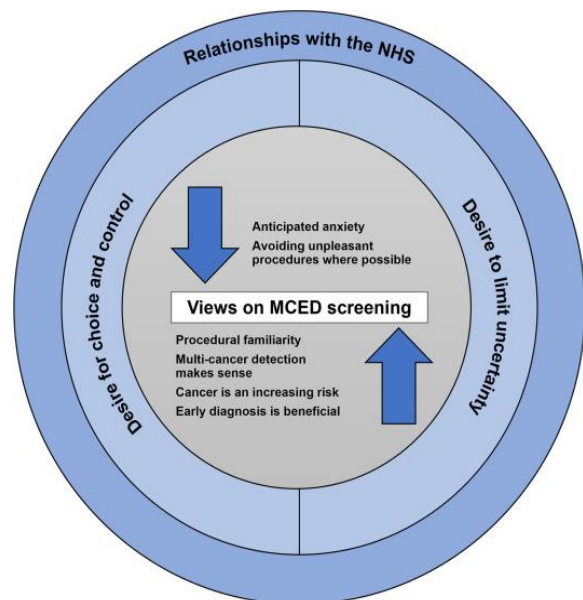
sensitivity for 89.3% specificity (v 69.7% sensitivity, 72.4% specificity) for detecting motor dysfunction. Speed, rhythm, and dual task motor deterioration might be accurate indicators of incipient PD in iRBD.



### Multi-cancer early detection blood tests for population screening

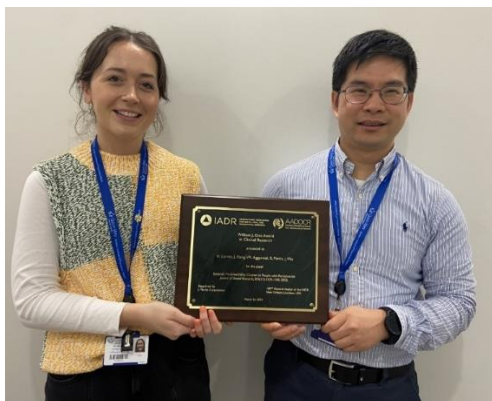
12 March (Ninian Schmeising-Barnes, Jo Waller, Laura Marlow. Centre for Cancer Screening, Prevention and Early Detection)

Assessing acceptability to the public of multi-cancer early detection (MCED) blood testing in online focus groups, researchers find that responses were generally enthusiastic, particularly in relation to the familiarity of the procedure and potential to screen for many cancers. Some participants felt they would not want to know if they had cancer, and were concerned about potential to raise anxiety, especially in relation to false-positives. Views on MCED screening were influenced by wider factors including dislike of uncertainty, desire for choice and control over one's health, and existing relationships with the NHS.



### William J Gies award for clinical research

13 March (Harriet Larvin, Jianhua Wu. Centre for Primary Care)

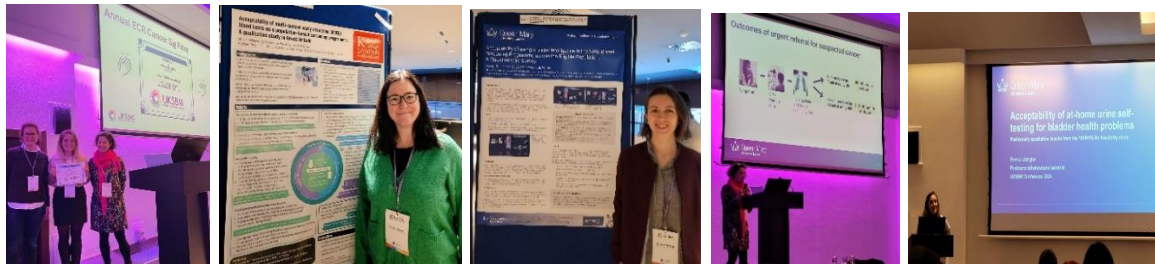


The winners of the 2024 International and American Associations for Dental, Oral, and Craniofacial Research William J Gies award for clinical research, announced at the IADR meeting in New Orleans on 13 March are Harriet Larvin and Jianhua Wu. The award was made for their 2022 paper entitled *Systemic Multimorbidity Clusters in People with Periodontitis*. Congratulations to both!

## UK Society for Behavioural Medicine Annual Scientific Meeting

13-14 March (Jo Waller, Ninian Schmeising-Barnes, Ruth Evans, Emma Lidington, Hannah Drysdale. Centre for Cancer Screening, Prevention and Early Diagnosis)

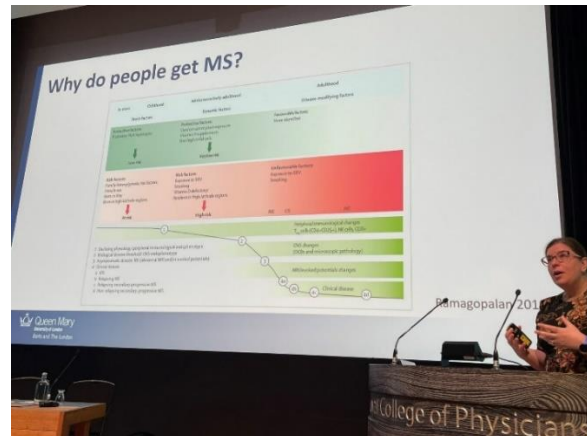
A team led by Jo Waller from the Cancer Behavioural Science Group in the CCSPED presented their work at the 19th Annual Scientific Meeting of the UK Society for Behavioural Medicine in Glasgow. Jo presented on 'Attitudes to self-sampling as a choice in future cervical screening', Ruth delivered the findings of the ORCA study on the feasibility of offering additional support to patients with symptoms suspicious for cancer after a negative diagnosis, and Laura discussed her work on the acceptability of multi-cancer early detection blood test screening. Emma's presentation was on the acceptability of at-home urine self-testing in the YORKSURE trial, and Hannah presented her research on HPV self-sampling in the YouScreen trial. Special congratulations to PhD student Ninian Schmeising-Barnes, who was awarded the UKSBM Cancer Prevention & Screening special interest group Prize for the best ECR conference abstract.



## British Neuropsychiatry Association Annual Meeting

14 March (Ruth Dobson. Centre for Preventive Neurology)

Ruth Dobson delivered a talk in the opening session of the 37<sup>th</sup> annual conference of the British Neuropsychiatry Association held at the Royal College of Physicians in London. The theme for the conference was 'How do our situations and environment shape us?' and the first session focused on 'New Perspectives on Environmental Influences on Neuropsychiatry'. Ruth spoke on Environmental factors and social determinants of health in Multiple Sclerosis.



## Small changes to reduce salt intake

14 March (Sonia Pombo. Centre for Public Health and Policy)





Following a suggestion, made to the House of Lords Food, Diet and Obesity Committee, that chip shops should cut the number of holes in saltshakers to improve the nation's health, Sonia Pombo told the Daily Mail that making small dietary changes can go a long way to reducing blood pressure. *'This just shows how simple it can be to lower your salt whilst still enjoying your fish and chips'* she said. *'There is no reason why initiatives like this shouldn't also be extended to the rest of the hospitality sector, not just with saltshakers for customers, but for chefs in the kitchens, who are notorious for over-salting food.'*

### The Rise and Rise of BirthStrike

14 March (Heather McMullen. Centre for Public Health and Policy)

Heather McMullen is extensively quoted in an article on the climate crisis, plummeting birth rates, and the BirthStrike movement. Heather told Elle magazine that covid, climate change, cost of living, and global crises and conflicts are leading some people to think that the decision to have children feels like an unbearably vulnerable choice to make: *'A sense of instability connects a number of these different drivers. People are reacting to a more unpredictable future and that doesn't just relate to climate, it relates to precarity more broadly. These things are all connected, and they contribute to an overarching sense that the future is not as stable as we once imagined it to be.'*

ELLE



### International Conference on Eating Disorders

14-16 March (Hannah Lewis. Centre for Psychiatry and Mental Health)



At the 2024 International Conference on Eating Disorders in New York City, Hannah Lewis from the Unit for Psychological Medicine delivered presentations sharing key findings from her PhD, including: an integrated theory of the prevention of body image disorders; an exploratory study of the risk





and protective factors in the development of body dissatisfaction and eating disorders; and a cultural adaptation of a co-designed cognitive-dissonance based intervention to prevent eating disorders.

### **Online support exchanged by survivors of paediatric stroke and their families** 15 March (Anna De Simoni. Centre for Primary Care)

A qualitative thematic analysis to identify the types of social support provided in posts from a paediatric stroke population on a UK online stroke community analyses 425 posts, of which 193 contained at least one instance of social support. Five types of social support were identified: informational, emotional, network, esteem support, and tangible aid. Emotional support was offered more often than informational support among participants aged  $\leq 18$ , but this finding was reversed in the group aged  $>18$ . Engagement of long-term survivors of paediatric stroke through the online community was key, as they were able to offer informational support from lived experience.



### **Annual MS Trust Conference**

17 March (Alison Thomson. Centre for Preventive Neurology)



Alison Thomson chaired a satellite symposium at the MS Trust Annual conference, held at Hinckley Island from Sunday 17 to Tuesday 19 March. The title of the symposium was Patient perspectives on MS Services.

### **Study protocol for the IMPROVE trial**

19 March (Steph Taylor. Centre for Primary Care)

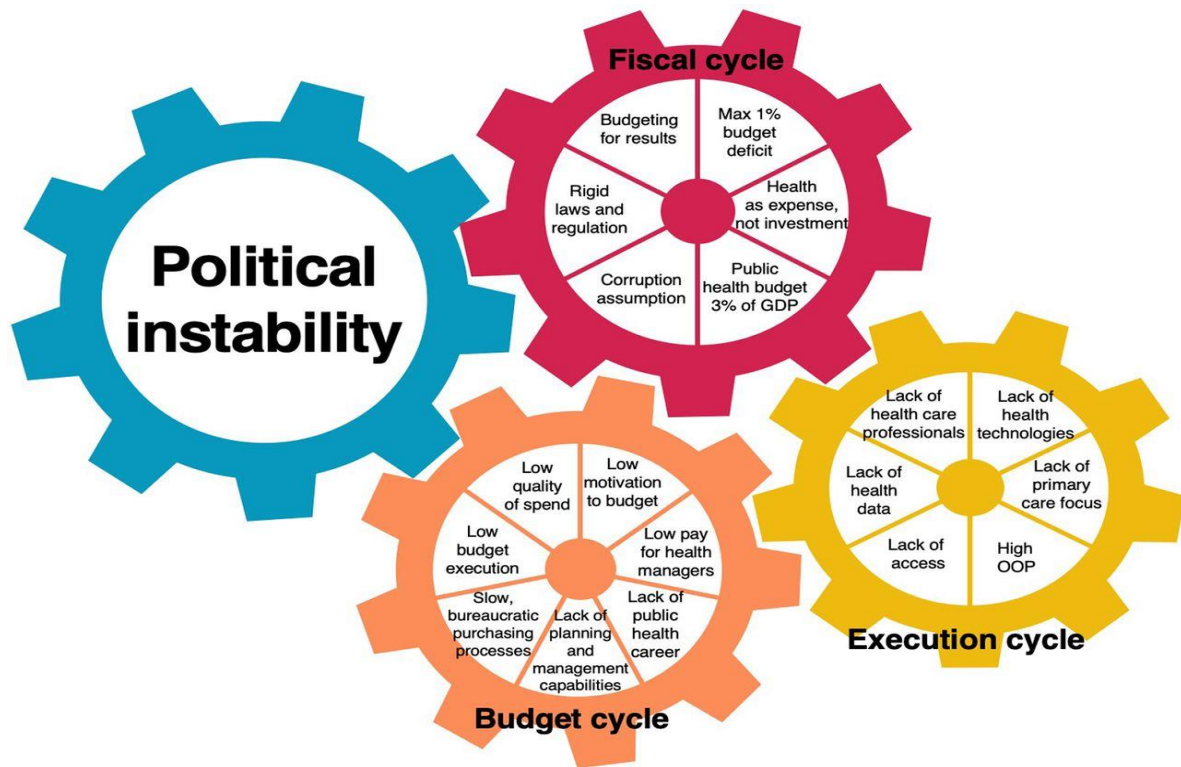
The study protocol has been published for the IMPROVE trial, a pragmatic cluster RCT to determine whether using trained volunteer lay health workers ('PR buddies') improves uptake and completion of pulmonary rehabilitation (PR) in patients with chronic obstructive pulmonary disease (COPD), and whether it is cost-effective. The trial will be conducted in 38 PR services across England and Wales, where staff randomised to the intervention arm will receive training in recruiting and training PR buddies. They will then deliver training to volunteers who have recently completed PR in their service. Improving COPD outcomes and access to PR are priorities in the UK NHS long-term plan.



### **Underperformance of the Peruvian Health System**

19 March (Doreen Montag. Centre for Public Health and Policy)

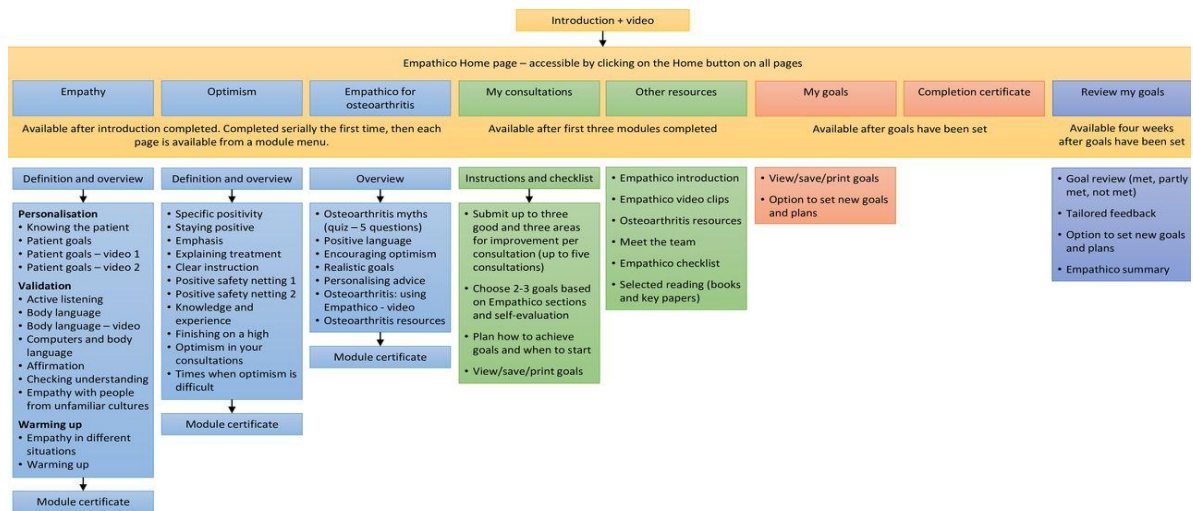
Despite high economic growth, the health system in Peru remains fragmented and underfinanced, with difficulties accessing health services and a high out-of-pocket share for the population, many of whom lack insurance. From 17 interviews with former ministers and other senior health officials, researchers identify 4 interconnected influences negatively affecting the health system: Political instability, resulting in inefficiencies and restrictive budgeting laws; fiscal cycle limiting public health expenditure to 3% of GDP; restrictive budget and lack of planning and management capabilities result in low-quality health expenditure and low budget execution; these factors lead to a lack of human resources, data, and technology that hinder access to health care and fuel high out-of-pocket spending. Researchers say that the Health Ministry must argue in economic terms for the prioritization of health.



### Talking in Primary Care (TIP) trial protocol

19 March (Beth Stuart. Centre for Evaluation and Methods)

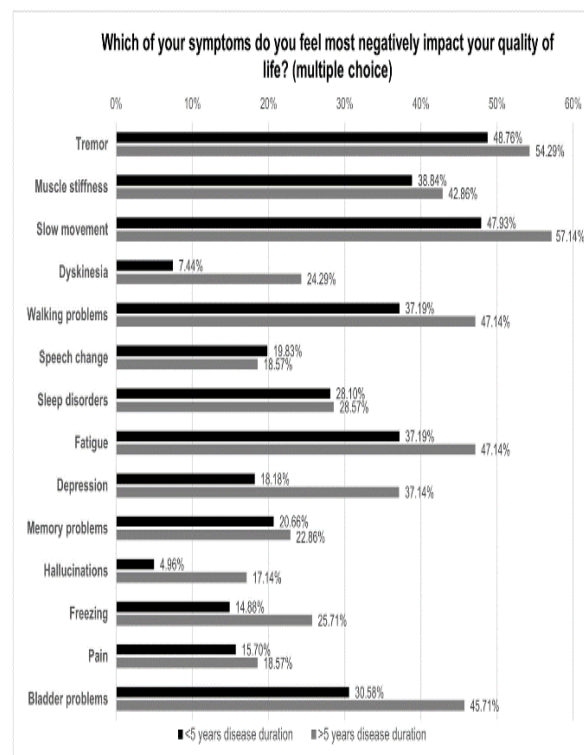
Authors have published the [protocol](#) for the Talking in primary care (TIP) RCT to be conducted in GP surgeries in England and Wales to assess the effectiveness and cost-effectiveness of an eLearning tool, EMPathicO, for health practitioners. Surgeries will be randomised to receive the e-learning immediately or at trial end, and the study will examine outcomes among 840 patients with and 840 without musculoskeletal pain consulting in person or remotely. Outcomes assessed at baseline, week 1, and 1, 3, and 6 months later will include two primary outcomes, patient-reported pain intensity and patient enablement. Secondary measures include practitioner patterns of use of EMPathicO, practitioner-reported self-efficacy and intentions, patient-reported symptom severity, quality of life, satisfaction, perceptions of practitioner empathy and optimism, treatment expectancies, anxiety, depression and continuity of care.



## AccessPD: a next generation registry to accelerate Parkinson's research

19 March (Maria Teresa Periñan, Alastair Noyce. Centre for Preventive Neurology)

Showcasing the potential of AccessPD, a unique platform aiming to create a registry of >2000 Parkinson's disease (PD) patients, authors describe the commonest diagnoses before and after PD diagnosis, the most commonly prescribed drugs, and identify participants who could benefit from device-aided therapies. AccessPD participants are identified through primary care electronic health records (EHRs), with reported outcomes collected via online questionnaires and integrated with EHRs. In the first 6 months, 200 participants were recruited, of whom 191 answered the follow-up questionnaire. AccessPD is uniquely able to link different data sources for patient stratification in longitudinal studies and recruitment to clinical trials.



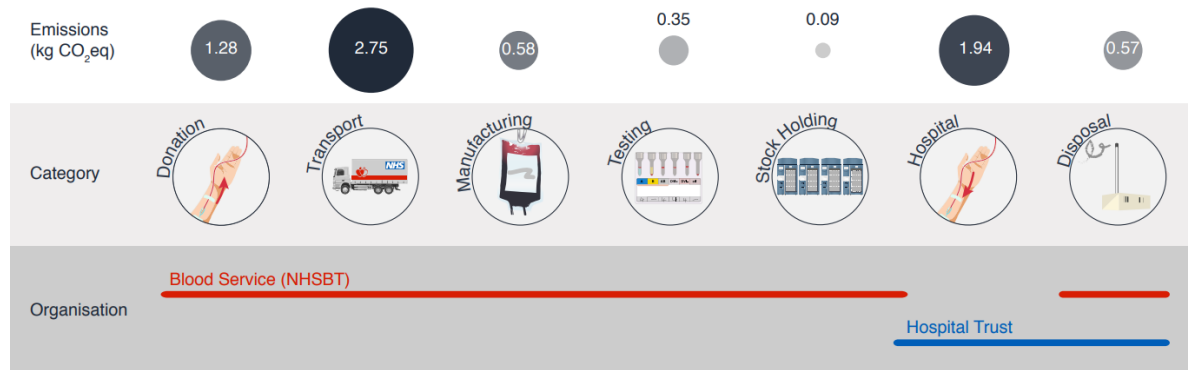
## Environmental impact of a blood transfusion

20 March (Stephen Hibbs. Centre for Primary Care)

Healthcare activities contribute significantly to greenhouse gas emissions. A new study identifies ways to reduce the footprint for blood transfusions. Assessing red blood cell (RBC) transfusions in England (1.36 million units transfused/yr), authors defined 7 stages of process: donation, transportation, manufacturing, testing, stockholding, hospital transfusion, and disposal, and measured power usage, embodied carbon in disposable materials and reagents, and assessed direct emissions through transportation, refrigerant leakage, and disposal at each stage.



Carbon footprint per unit of RBC transfused was 7.56 kg CO<sub>2</sub> equivalent (CO<sub>2</sub>eq) with total annual emissions of 10.3 million kg CO<sub>2</sub>eq. Largest contributions were from transportation, hospital transfusion processes (driven mostly by refrigeration), and donation (due to plastic blood packs). Researchers suggest that mitigation may include electric vehicles for the blood service fleet, improved energy efficiency of refrigeration, renewable electricity sources, changing the plastic of blood packs, and using methods of disposal other than incineration.

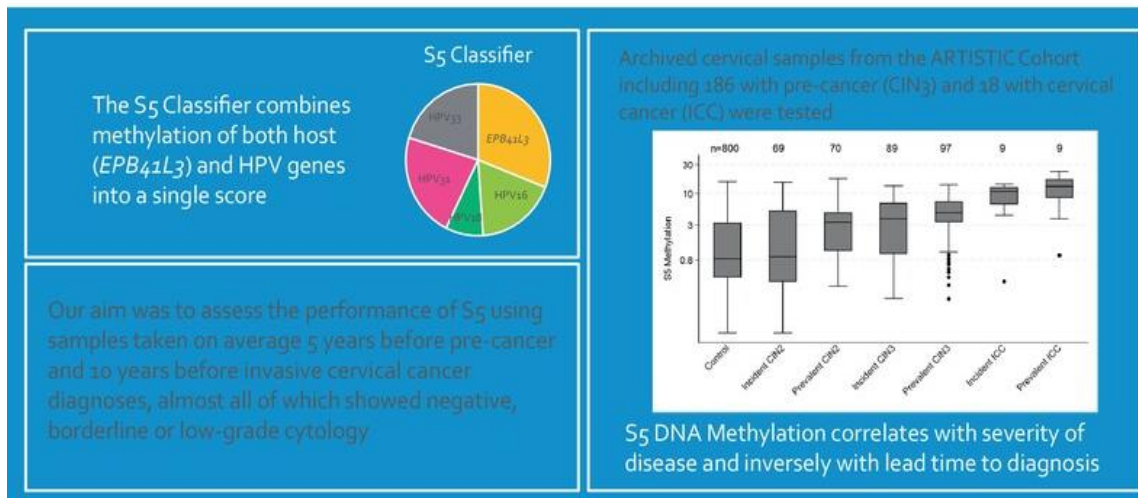


### Predictive value of S5 DNA methylation in the ARTISTIC trial

20 March (Belinda Nedjai, Dorota Scibior-Bentowska, Adam Brentnall, Jack Cuzick)

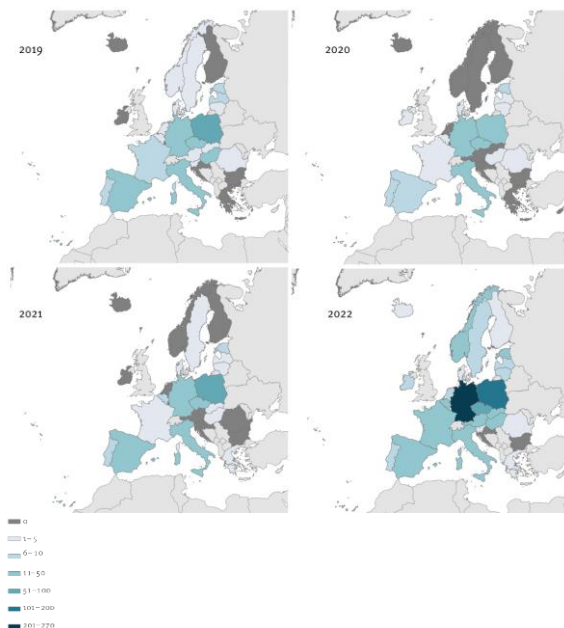
To assess the performance of the S5 DNA methylation classifier in predicting incident high-grade cervical intraepithelial neoplasia (CIN) and invasive cervical cancer (ICC) among hrHPV+ women in the ARTISTIC screening trial cohort, researchers assayed the S5 classifier in archived hrHPV+ liquid-based samples from 343 women with high-grade disease and in 800 hrHPV+ controls. S5 correlated directly with increasing severity of disease and inversely with lead time to diagnosis, and could discriminate between hrHPV+ women who developed CIN3 or ICC and hrHPV+ controls using samples taken on average 5yrs before diagnosis. S5 showed much higher sensitivity than HPV16/18 genotyping for identifying prevalent CIN3. Authors conclude that S5 appears to be an objective test for triage of hrHPV+ women.

## S<sub>5</sub> DNA METHYLATION IDENTIFIES CERVICAL CANCER AND PRE-CANCER MANY YEARS IN ADVANCE



## TB in people of Ukrainian origin in the EU and EEA

21 March (Dominik Zenner, Centre for Public Health and Policy)



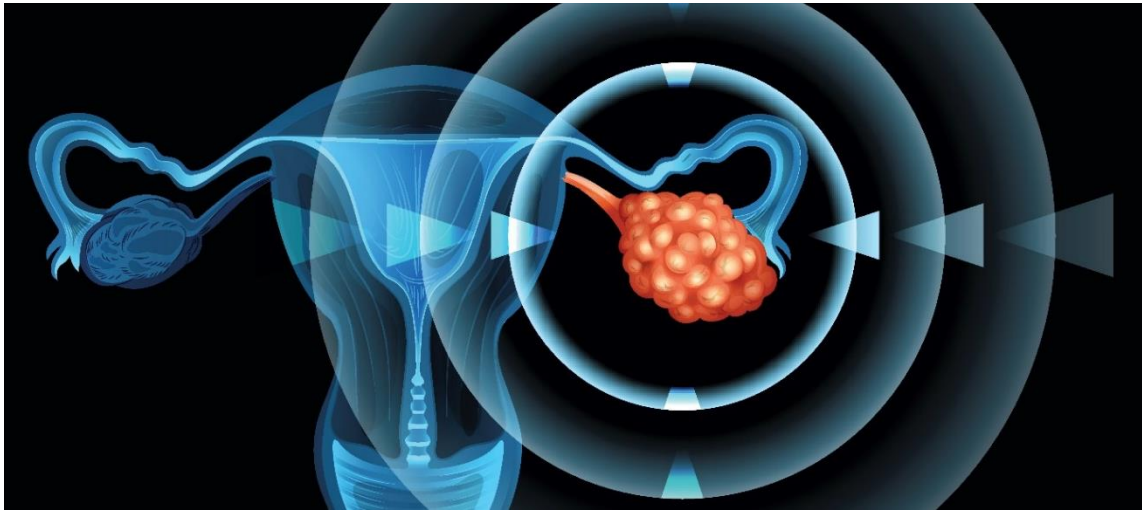
Around 5 million Ukrainians were displaced to the European Union/European Economic Area following the Russian invasion. While tuberculosis (TB) notification rates per 100,000 Ukrainians in the EU/EEA remained stable, the number of notified TB cases in Ukrainians increased almost fourfold, from (mean) 201 in 2019-2021 to 780 in 2022. In 2022, 71% cases were notified in 3 countries (Czechia, Germany and Poland) and almost 20% of drug-resistant TB cases were of Ukrainian origin. Researchers say that targeted healthcare services for Ukrainians are vital for early diagnosis and treatment, and preventing transmission.

## New NICE Guideline on familial and genetic risk for ovarian cancer

21 March (Ranjit Manchanda, Adam Brentnall, Centres for Cancer Screening, Prevention and Diagnosis/Evaluation and Methods)

A new NICE guideline 'Ovarian cancer: identifying and managing familial and genetic risk', is the product of 2½ years of painstaking work topic lead Ranjit Manchanda and an expert committee including Adam Brentnall. The guideline aims to raise awareness, increase the availability of genetic testing, and allow individuals to take preventive measures, such as surgery, which will lead to fewer people developing ovarian cancer. Around 340,000-440,000 women in the UK carry one of

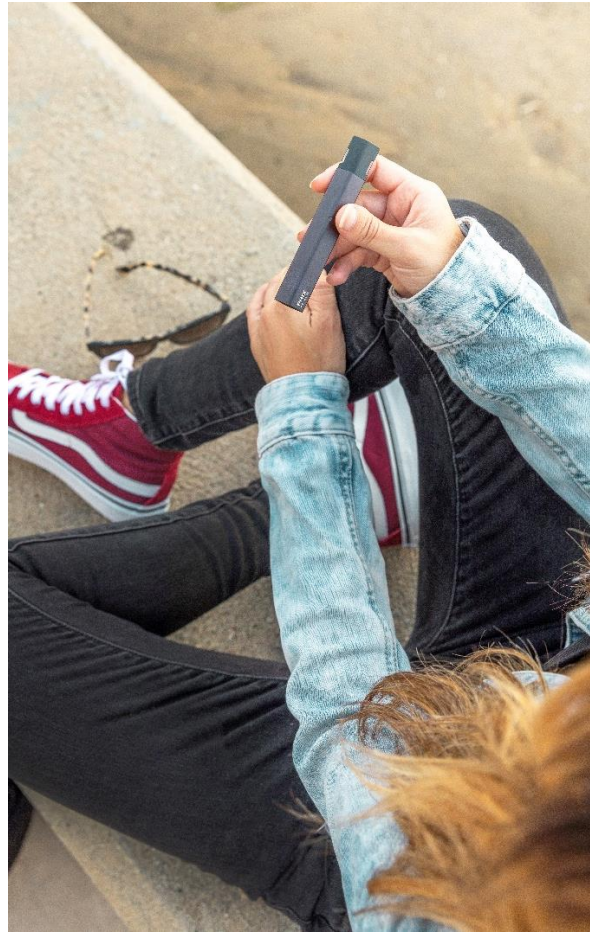
the pathogenic variants. People who could be carriers, who have already had certain cancers, or have a blood relative who has had breast or ovarian cancer should be referred to genetic services for testing, and offered counselling. NICE recommends that genetic services should assess the likelihood of people carrying the genes using modelling or family history, and test for 9 pathogenic variants. People who carry one of the genes should be supported in discussions about the best option to reduce their risk. The most effective intervention is oophorectomy, and in some cases hysterectomy.



### Vaping health risks

22 March (Peter Hajek. Centre for Public Health and Policy)

In a letter to the Times responding to articles on the problem of youth vaping, Peter Hajek said that young people experiment with e-cigarettes, but only 2.3% of young people who have never smoked used e-cigarettes in the past month, and even fewer vape daily. 'Rates of smoking among young people are at an all-time low. Low-risk nicotine delivery devices can help smokers avoid heart disease, lung disease, and cancer, which is a large and crucial payoff, but e-cigarettes can also deflect young would-be smokers to do something much less risky instead. Limiting youth access to e-cigarettes is sensible, but exaggerating risks of vaping to young people and to smokers can harm public health if this pushes regulators to make vaping less attractive or accessible - which would risk protecting the cigarette trade and keeping smokers smoking'. An accompanying letter from Professor Ann McNeil (KCL), noted that >half of smokers now wrongly believe that vaping is as at least as harmful as smoking.

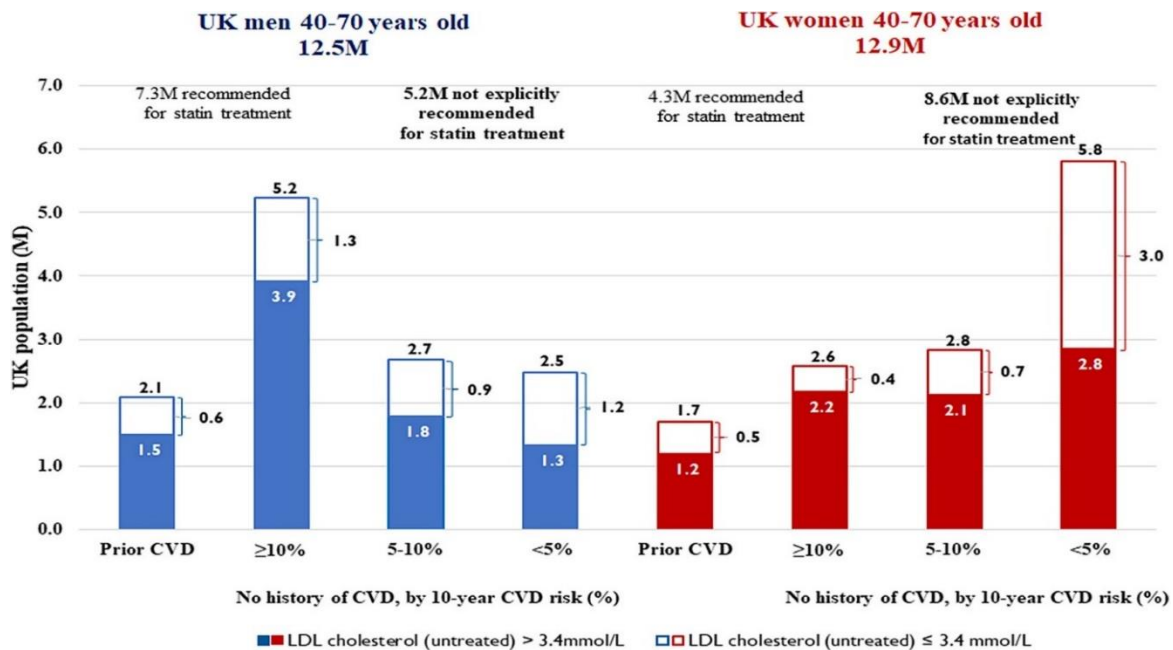


### **Lifetime effects and cost-effectiveness of statin therapies in the UK**

22 March 2024 (Boby Mihaylova, Runguo Wu. Centre for Evaluation and Methods)

Using a microsimulation model developed using the Cholesterol Treatment Trialists' Collaboration data (117,896 participants; 5 yrs follow-up), researchers have projected risks of myocardial infarction, stroke, coronary revascularization, diabetes, cancer and vascular and nonvascular death for all UK Biobank participants, without and with statin treatment. Results showed that, across categories by sex, age, LDL-cholesterol and cardiovascular disease history/10yr cardiovascular risk, lifetime standard statin increased survival by 0.28-1.85yrs, and higher intensity statin by a further 0.06-0.40yrs per person. Standard statin was cost-effective across all categories. Stopping statin early reduced benefits and was not cost-effective. Authors say that strengthening and widening statin treatment could cost-effectively improve population health.





### Chemotherapy explainer

22/23 March (Mangesh Thorat, Centre for Cancer Screening, Prevention and Early Diagnosis)

Mangesh Thorat provided expert comments on chemotherapy that were quoted internationally in the media on 22 and 23 March. He noted that surgery is the most curative form of treatment for early-stage cancers, but occasionally some cancer cells escape the organ of their origin. A range of drugs, including chemotherapy, can reach other organs where such spread might have occurred. Mangesh discussed the side effects of chemotherapy, and that risk of side-effects is often lower in younger patients due to greater functional reserves and ability of young tissues to heal more rapidly. He said that duration of regimens can vary from 4 months - a year or more.



### Blue Festival: The Art of Mental Health

25 March (Victoria Bird, Maria Grazia Turri, Centre for Psychiatry and Mental Health)

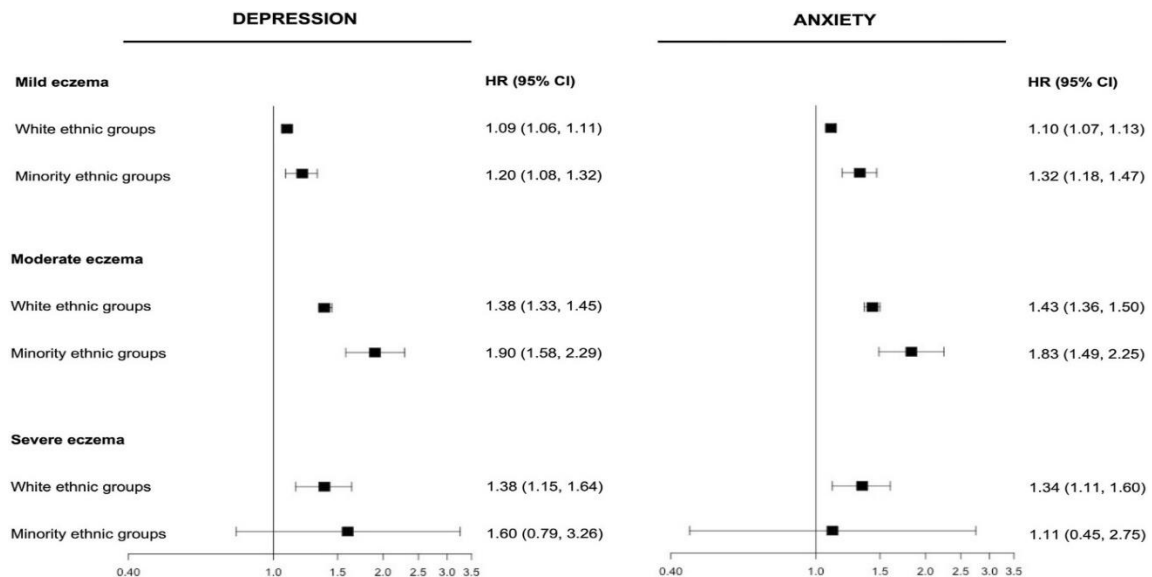


On 25 March Victoria Bird opened the 'Blue Festival: The Art of Mental Health' held at the Mile End campus. Maria Grazia Turri (Senior Lecturer in Creative Arts and Mental Health) also contributed, taking part in a panel discussion on 'Remembering, reimagining and rethinking mental health and wellbeing through the arts'. The 3-day festival explored the role played by the arts in mental health and well-being through film screenings, talks, workshops, and live performances.

### Ethnic differences in depression and anxiety among adults with eczema

25 March (Rohini Mathur, Caroline Morton. Centre for Primary Care)

To investigate whether associations between eczema and depression or anxiety differ between adults from white and minority ethnic groups in the UK, researchers conducted matched cohort studies of adults with depression and with eczema. After adjusting for matching variables and potential confounders (age, sex, practice, deprivation, calendar period), the study found strong evidence ( $p < 0.01$ ) of ethnic differences in associations between eczema and both depression and anxiety. Adults with eczema from minority ethnic groups appear to be at increased depression and anxiety risk compared with their white counterparts, and culturally adapted mental health promotion and prevention strategies should be considered in individuals with eczema from minority ethnic groups.



### RCT of a decision aid for cancer chemoprevention

25 March (Fiona Walter. Centre for Cancer Screening, Prevention and Early Diagnosis)

Australian guidelines recommend taking low-dose aspirin to reduce the risk of colorectal cancer (CRC) for people aged 50-70. In 6 general practices in Victoria, researchers compared the effect of an intervention (consultation with a researcher using a decision aid) with that of a CRC brochure. At 6 months, the proportions of individuals who reported using aspirin at six months were: 10.2% (12/118) intervention vs 13.8% (16/116) control. Authors say that while the decision aid improved informed decision-making, it had little effect on long-term regular use of aspirin to reduce CRC risk.



### WIPH Welcomes delegation from Sierra Leone

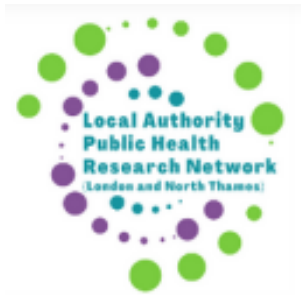
25-28 March (Centre for Public Health and Policy)

The CPHP this week welcomed an esteemed delegation from Sierra Leone for a visit that provided opportunities to build relationships and facilitate collaborative research. In seminars on 25 March the Deputy Minister of Health, Jalikatu Mustapha, delivered a presentation on *Achieving Universal Healthcare in Sierra Leone* and Abdul Malik Tejan-Sie (Director of Science, Technology, and Innovation in the Ministry of Health) discussed the use of data and digitalisation in Sierra Leone. The delegation met with the Research and Action on Salt and Obesity unit on 26 March. On 27 March James Russell (Dean of the Faculty of Clinical Sciences and Dentistry of the University of Sierra Leone) delivered a presentation on cardiovascular disease in Sierra Leone. The Director of Non-communicable diseases in the Ministry of Health, Santigie Sesay, then delivered a lecture on *Prioritization of Fiscal and Legislative Policies: Establishment of Non-Communicable Disease care in Health Facilities in Sierra Leone*.



### Local Authority Public Health Research Network Conference

26 March (Trevor Sheldon, Emma Doohan. Centre for Public Health and Policy)



Trevor Sheldon addressed a panel discussion at the Local Authority Public Health Research Network (LAPHRN) inaugural conference at the Wellcome Collection in London on 26 March. LAPHRN, founded in 2021, is hosted and administered by NIHR ARC North Thames and aims to identify, share, support and progress opportunities for generating robust academic research in local authority settings. The conference theme was *Public Health in Local Authorities – What is it, what’s happening, how can it be improved?* The panel on *The Future for Applied Research in London and North Thames* discussed the importance of data linkage, political engagement, greater research diversity, and community-based research for applied public health research in London and North Thames.

## FORTHCOMING EVENTS

### Inaugural Lecture: Alastair Noyce 18 April, 5:15pm

Alastair Noyce will deliver his inaugural lecture: ‘PRE-occupied by Parkinson’s’, on Thursday 18 April at 5:15pm in the Perrin Lecture Theatre, Blizard Building, Whitechapel. His lecture will cover early detection of Parkinson’s, with a view to better treatment, risk factors, improving our understanding in under-served global populations, training the next generation of researchers, and imagining a future with fewer patients. Click below to register.

[Register](#)



**Many thanks to all who so enthusiastically contribute. Please send any news items for the next newsletter to [j.a.mackie@qmul.ac.uk](mailto:j.a.mackie@qmul.ac.uk)**