

WOLFSON INSTITUTE OF POPULATION HEALTH NEWSLETTER ISSUE 56: 31 May 2024

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

FROM OUR DIRECTOR

Dear Colleagues

Hoping that all of you who are on half-term are having better weather than the cold, wet and blustery morning here in East Anglia today.

On a more cheerful note, I am told that our Institute continues to expand its research output - in 2024 so far we have produced an average of 50 publications a month. By comparison, in 2023 we averaged 38 publications a month. Congratulations to all, and do keep up all this brilliant work!

Finally, a reminder that our WIPH 2024 Showcase is fast approaching (18 June). Do join us if you can. You still have time, until 5pm on 7 June, to nominate your colleagues for the WIPH Staff awards, to be announced at the Showcase.

With best wishes

Fiona



MEET WIPH

MEET – Moneeza Siddiqui (Centre for Primary Care)

How would you describe your roles and responsibilities?

I'm in the happy position of helping to shape interesting and valuable genetic research into metabolic diseases in ancestrally diverse populations, with a focus on south Asians. I work alongside and supervise early career researchers, and a substantial part of my role involves applying for funding for more research, and growing my collaborations and team. In addition, I am associate director of the Wellcome Trust funded Health Data in Practice PhD programme, which entails helping to make decisions about the programme, recruiting and providing pastoral care to students, and supervising a few. I am also involved in developing new postgraduate curriculum and courses.

What has been your greatest professional achievement?

Creating bridges and relationships between epidemiological cohorts of South Asian populations living in the UK and India. Recently I was delighted to host collaborators from India alongside the Genes & Health team in Whitechapel, building collaborative networks that are likely to improve the quality and scale of research. The lopsided representation of populations of white European ancestry in human genetic research, especially in how genetics relates to human health, has stemmed from limited resources for research in diverse ancestries. Building these global and local links is critical to allow an unobstructed flow of scientific progress, and deliver equity in research.

What aspects of your role do you enjoy the most?

The development of research and researchers. In academia we're uniquely situated to undertake world-class research and simultaneously develop individuals who can initially participate in and eventually lead such work. Participating in this process is the most fulfilling aspect of my job.

What would be your second choice as a profession?

Food critic. I haven't been in London very long, but in the Whitechapel/Brick Lane/Spitalfields area I've found a few absolutely delightful spots: Damascus bite for lovely Syrian shawarma, and Yeye Noodle & Dumpling for exceptional Sichuanese.

What do you enjoy doing outside work?

Gastronomy is a great interest and I gravitate towards people who share my love of good food and cooking diverse cuisines. This is probably the main creative outlet for someone like me, working and speaking in very rigid scientific frameworks. Similarly with the creative arts, especially comedy (theatre, TV), I find that a person's sense of humour and their sense of the absurd are some of the best barometers of personal compatibility and intelligence.

Something most people don't know about you?

I played tennis semi-professionally until I turned 16 and was often ranked #1 in my state. It feels long enough ago that I don't mind bragging, but more than that, I think playing a sport, especially a solo sport, taught me a lot about the reward of effort, problem-solving, and thinking clearly in stressful situations, and most importantly not fearing failure.



GENERAL INSTITUTE NEWS

How Can We Best Support Suicidal Youth?

14 May (Lauren Jerome, Dennis Ougrin. Centre for Psychiatry and Mental Health)

Effective treatment for youth at risk of suicide is one of the most pressing and important tasks within psychiatry, but the evidence base for treatments is severely lacking, according to a new [editorial](#). Self-harm is becoming increasingly more common and at younger ages, and is one of the strongest predictors of suicide. Dialectical behaviour therapy (DBT) is the most established treatment option, but supporting evidence comes from just a handful of studies, and primarily focuses on its ability to reduce the repetition of self-harm. Whether it is successful in supporting young people along their recovery journey, and equally effective at treating different forms of self-harm, is yet to be properly explored.



Measurement instruments for genitourinary symptoms in menopause

14 May (Matina Iliodromiti. Centre for Public Health and Policy)

COMMA: CORE OUTCOMES IN MENOPAUSE

To identify suitable definitions and patient-reported outcome measures (PROMs) to assess 8 core outcomes in menopause relating to genitourinary symptoms (pain with sex, vulvovaginal dryness, vulvovaginal discomfort or irritation, discomfort or pain when



urinating, change in most bothersome symptom, distress bother or interference of genitourinary symptoms, satisfaction with treatment, and side effects) researchers conducted a systematic review. Suitable PROMs and definitions were identified to measure 3/8 core outcomes: pain with sexual activity; distress, bother or interference from genitourinary symptoms; and side effects. Authors propose that future work will focus on developing or validating PROMs for the remaining 5 core outcomes.

Gynaecological Oncology Centre Certification in Finland

14-15 May (Ranjit Manchanda. Centre for Cancer Screening, Prevention and Early Diagnosis)

Working on behalf of the European Society of Gynaecological Oncology (ESGO), on 13-14 May Professor Ranjit Manchanda undertook an accreditation visit to the Gynaecological Oncology Centre in Tampere, Finland. The accreditation will certify the centre for gynaecological oncology training.



N2O use in patients with unexplained venous thromboembolism

15 May (Marta Patyjewicz, Ruth Dobson, Peter MacCallum, Alastair Noyce. Centres for Preventive Neurology/Cancer Screening, Prevention and Early Diagnosis)



In a study of 50 nitrous oxide (N₂O) users who presented at the Royal London Hospital, researchers identify 4 cases (8%) with recent unprovoked N₂O-related venous thromboembolism (VTE). Ethnic distribution was 50% Asian or Asian British and 50% Black or Black British, 3 were male, and the patients were distributed across quintiles of the index of multiple deprivation. All had actual or functional vitamin B12 deficiency. A plausible mechanism involving hyperhomocysteinaemia has been proposed, but authors say the association between N₂O use and VTE requires further investigation, and clinicians should be vigilant for VTE in N₂O users, especially those presenting with unexplained symptoms.

ActEarly community engagement event: Food and the Future

15 May (Natalia Concha, Meredith Hawking, Pratima Singh, Mathilda O'Donoghue, Laura Nixon, Sonia Pombo. Centres for Primary Care/Public Health and Policy)

In partnership with the Bromley by Bow Centre, the ActEarly research collaborative hosted a community engagement event connecting local parents and organisations with council members and researchers to discuss research findings, local policy, initiatives and experiences around the theme of Food and the Future. Natalia Concha presented at a panel on free school meals in Tower Hamlets, chaired by Mathilda Odonoghue, and Pratima Singh chaired a panel on The Future of Food. The team also held several stalls to share findings and plans around specific research programmes, including Food Improvement Goals in Schools (FIGS) - an evaluation of universal free school meals led by Meredith Hawking. Hosting the event with a trusted local organisation created successful dialogical spaces to continue driving initiatives and improvements in child and family health.



English HPV vaccine programme reduces cervical disease in all socioeconomic groups

15 May (Milena Falcaro, Peter Sasieni. Centre for Cancer Screening, Prevention and Early Diagnosis)

The HPV vaccination programme in England has led to a substantial reduction in cervical disease, and has done so in all socioeconomic groups, according to a WIPH-led CRUK-funded study. The study found that the high vaccination effectiveness seen from January 2006 to July 2019 continued to June 2020. In those women offered vaccination at age 12-13, cervical cancer and CIN3 rates in the additional year were 84% and 94% lower than in the older unvaccinated group. Researchers estimate that by mid-2020 HPV vaccination had prevented 687 cancers and 23,192 CIN3s. Results also showed that highest cervical cancer rates remained among women living in the most deprived areas, but the programme had a large effect in all levels of deprivation. The number of women with CIN3 prevented was also high across all deprivation groups, but greatest among women living in the more deprived areas. For cervical cancer, the strong downward gradient from high to low deprivation seen in the older unvaccinated cohort was no longer present among those offered the vaccine. This story was widely covered in the media (incl Times and BBC).



Healthy Speculations Workshop

15 May (Alison Thomson, Meg Clinch. Centres for Preventive Neurology/Public Health and Policy)

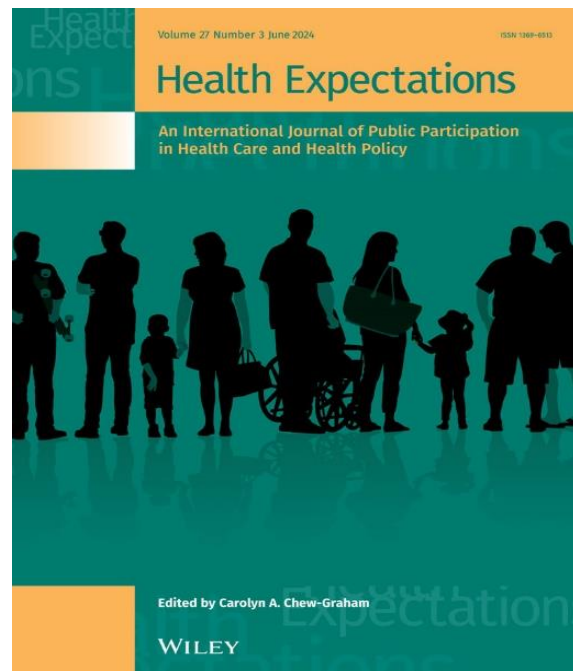


At a half-day workshop organised in collaboration with St Margaret's House, WIPH health researchers undertook a series of exercises to explore creative research methods. Working with recognised arts practitioners Liz Atkin and Kane Husbands the group was challenged to think about the challenges of integrating creative methods into traditional health research settings, and how equitable research collaborations with creative practitioners from across the Arts and Culture sector might be forged.

Diabetes self-management in people experiencing socioeconomic deprivation

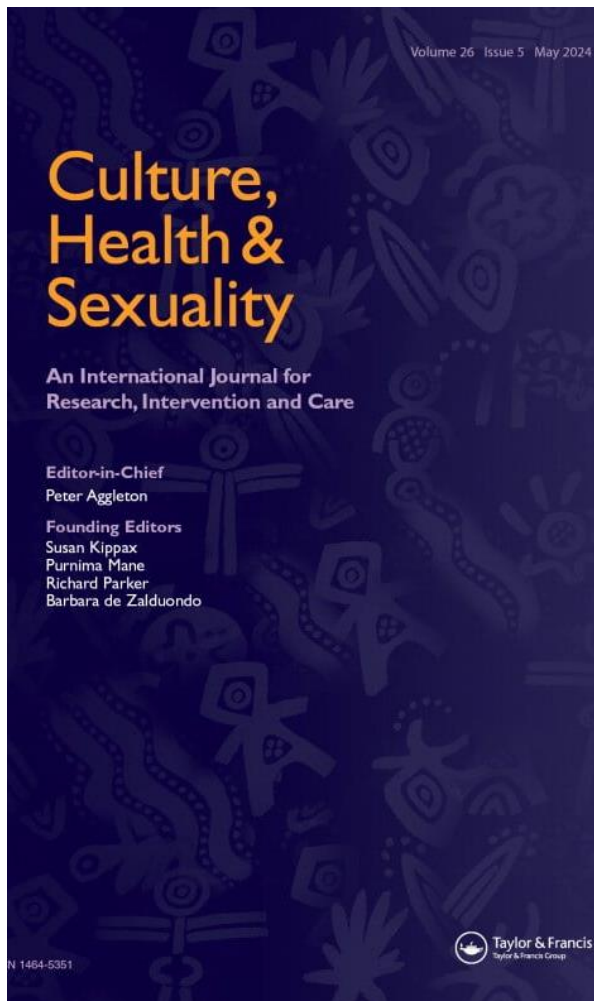
15 May (Meg Armstrong. Centre for Psychiatry and Mental Health)

A review of qualitative evidence on the barriers and facilitators of diabetes self-management among socioeconomically disadvantaged people identifies 2 overarching themes: socioeconomic barriers to diabetes self-management (healthcare costs, financial costs of healthy eating, cultural influences, living in areas of deprivation, competing priorities and time constraints, health literacy), and facilitators of diabetes self-management (lifestyle and having goals, support from healthcare providers, informal support). Authors conclude that support from healthcare providers can facilitate self-management, and that people with diabetes should have access to interventions that are designed to be culturally inclusive and affordable.



Managing mpox transmission risk among gay and bisexual men in Australia

17 May (Sara Papanini. Centre for Public Health and Policy)



An interview study with cis-gender gay and bisexual people diagnosed with mpox, and their close contacts, investigates how people affected by mpox in Australia managed risk of transmission, and navigated self-isolation. Using the concept of 'counterpublic health', which acknowledges the incorporation of official science and experiences of affected communities into embodied practice, the study shows that participants often found public health advice restrictive. Gay and bisexual men attended to the varied and inconsistent information available, thoughtfully navigating the relationships that mattered to them, evaluating acceptable strategies, and developing a response to an unfamiliar viral threat that drew on their knowledge and experience of past viral crises. Authors say future public health responses to infectious disease outbreaks would benefit from identifying opportunities to formalise and embed mechanisms to obtain real-time feedback from affected communities and their close contacts.

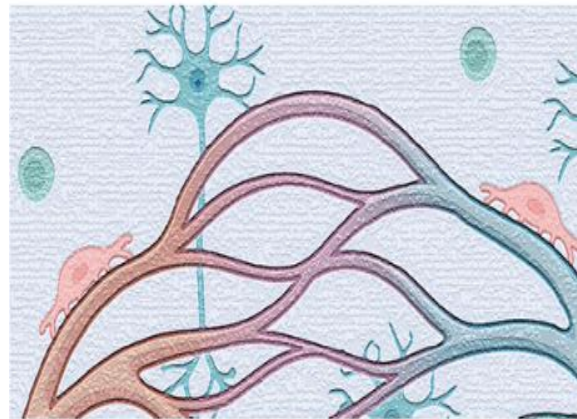
Identification of Prodromal Parkinson's Disease

17 May (Alastair Noyce. Centre for Preventive Neurology)

Evidence points to a detectable phase before clinical diagnosis of Parkinson's disease (PD), and to the likelihood that lifestyle modification may positively affect disease onset and progression, but debate surrounds disclosure to individuals of risk of progression to PD. An article reviewing the debate through the perspectives of the pillars of medical ethics: beneficence, nonmaleficence, autonomy, and justice concludes that waiting for established disease states is likely to be *too little, too late*, and to result in failures of expensive trials and wasted participant and researcher effort. Authors say clinicians must arrive at a decision with the patient that solicits and integrates patients' goals, considering their individual life circumstances, perspectives, and philosophies, and recognizing that one size cannot fit all.

Neurology®

The most widely read and highly cited peer-reviewed neurology journal



Aidsmap Webinar: HIV and Unmet Needs

20 May (Sara Paparini. Centre for Public Health and Policy)

As part of an invited panel discussing the diverse needs of people living with HIV, and the wider health and wellbeing impacts of meeting these needs, Sara Paparini participated in a webinar organised by aidsmap. As a special guest representing the SHARE Collaborative, Sara specifically discussed the challenges faced by children born with HIV when they transition into adolescence. Aidsmap is a UK charity providing independent and accessible research on HIV. The webinar is available online.

aidsmap LIVE

HIV and unmet needs

Monday 20 May
5-6pm (UK time)



Hosted by **Susan Cole** with special guests **James Cole, Sophie Strachan, Revd Jide Macaulay, Eli Fitzgerald** and **Dr Sara Paparini**

Notification! You May Have Cancer

20 May (Suzanne Scott. Centre for Cancer Screening, Prevention and Early Diagnosis)

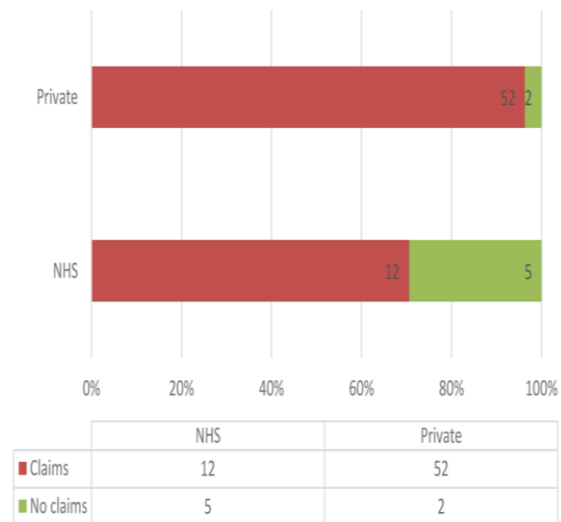


A viewpoint [article](#) considering the potential role of smartphones, wearables, and other technologies in the timely detection of cancer signals or symptoms suggests that they may monitor subtle changes in behaviour, assist in symptom interpretation, and guide and facilitate access to health care. Authors provide an overview of the scientific rationale, and outline the next steps for research and development to drive investigation into these technologies and optimize implementation, while also considering potential barriers, regulatory challenges, and unintended consequences for individuals and health care services. A QMUL [Opinion](#) piece on this has also been published.

Fertility clinic adherence to time-lapse imaging information guidelines

20 May (Priya Bhide. Centre for Public Health and Policy)

In an analysis of 106 UK clinic websites offering fertility treatment to self-funded patients, researchers examined how information on Time Lapse Imaging (TLI) was presented. Of 71 websites offering TLI as a service, over 90% made claims or implied that TLI led to improved clinical outcomes by enhancing embryo selection, and 47.9% did not mention or provide links to the Human Fertilisation and Embryology Authority (HFEA) rating system. On 29.6% of the websites no cost information for TLI was provided. Authors say the [findings](#) raise concerns about the reliability and accuracy of information on fertility clinic websites, which are typically the primary source of information for patients.



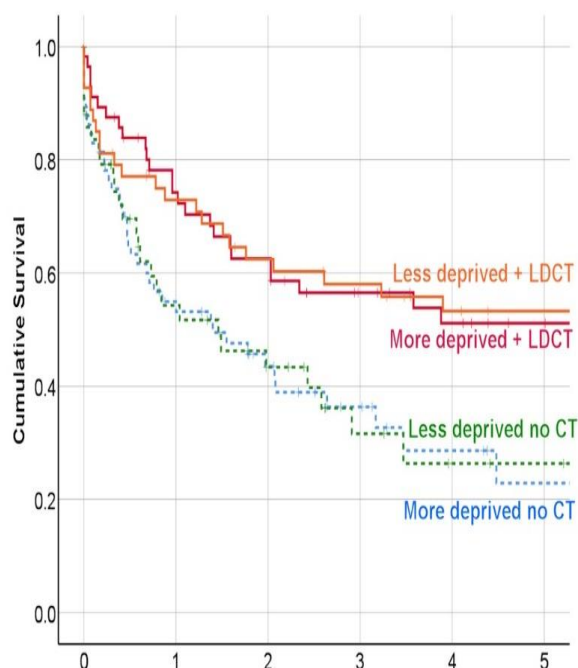
Claims on the benefits of TLI in terms of clinical outcome.

Impact of lung screening across the socioeconomic spectrum

20 May (Daniel Vulkan, Rhian Gabe, Stephen Duffy. Centres for Evaluation and Methods/Cancer Screening, Prevention and Early Diagnosis)

Follow-up from lung cancer diagnosis to death (years)

In long term follow-up analysis of results from the UKLS low dose CT screening

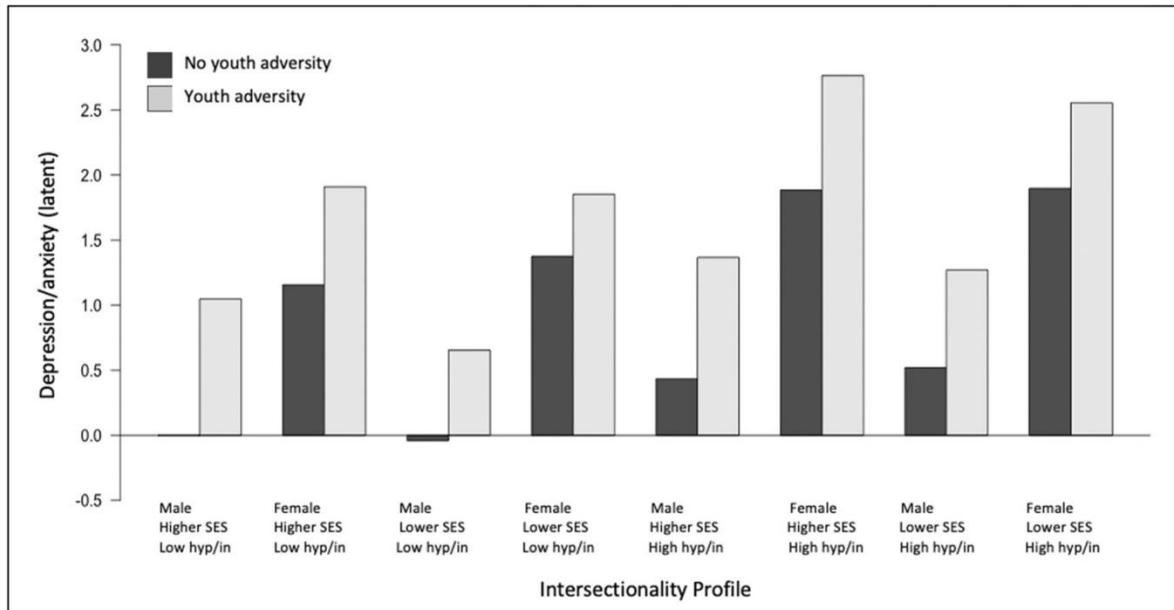


trial, researchers find that lung cancer outcomes are comparable across all socioeconomic groups, and that screening may provide additional health benefits for other smoking-related diseases. Results showed that participants from lower IMD quintiles benefitted from LDCT screening in terms of lung cancer survival to the same extent as upper quintiles, but there was a significant impact on death rates from other smoking-related diseases, notably COPD and emphysema, seen primarily in lower socioeconomic groups. In press coverage Stephen Duffy said: 'These results indicate the potential for lung cancer screening to address some serious inequalities in health. As the targeted programme is rolled out nationally, we need to make an effort to deliver the service to those deprived populations who need it most'.

Youth adversity and adolescent depression/anxiety: intersectionality as a moderator

20 May (Laura Havers, Ruichong Shuai, Georgina Hosang, Sania Shakoor. Centre for Psychiatry and Mental Health)

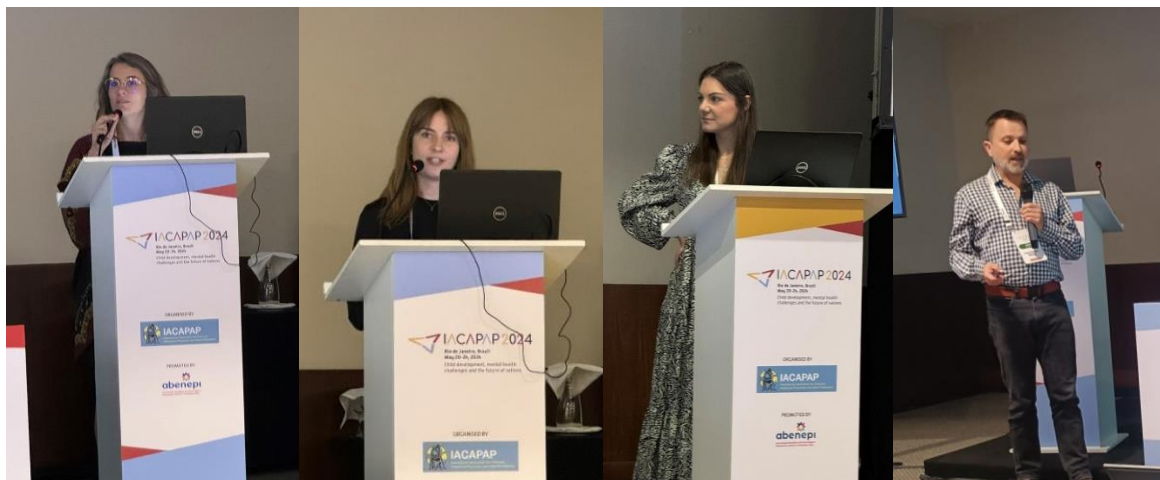
Examining the effects of youth adversity on depression/anxiety symptoms across eight intersectionality profiles (based on gender, socioeconomic status (SES), and traits of hyperactivity/inattention) in 13-14 year olds in Cornwall, researchers find stronger effects for males and for those with higher SES, with indications of moderation attributable to the intersection between gender and hyperactivity/inattention. Authors conclude that the stronger effects observed for males and for higher SES may be interpreted in terms of structural privilege, and say that their results invite further investigation.



2024 IACAPAP Congress, Brazil

20-24 May (Aisling Murray, Ellie Keiller, Mariana Steffen, Francois van Loggerenberg. Centre for Psychiatry and Mental Health)

A team from the Youth Resilience Unit delivered presentations at the International Association for Child and Adolescent Psychiatry and Allied Professions (IACAPAP) 2024 congress held in Rio de Janeiro. PhD students Mariana Steffen and Aisling Murray presented their research on 'Exploring social prescribing for children and young people with mental health difficulties' and 'Children's emerging concepts of resilience: insights from using body mapping in an East London cohort sample of 7-10yr old children'. Ellie Keiller chaired and participated in a panel on 'The arts therapies: responding to children and young people's preferences for creative mental health interventions', and Francois van Loggerenberg presented on the adaptation of a psychosocial intervention delivered by teachers in school in Columbia.



Away Day: Centre for Psychology and Mental Health

21 May

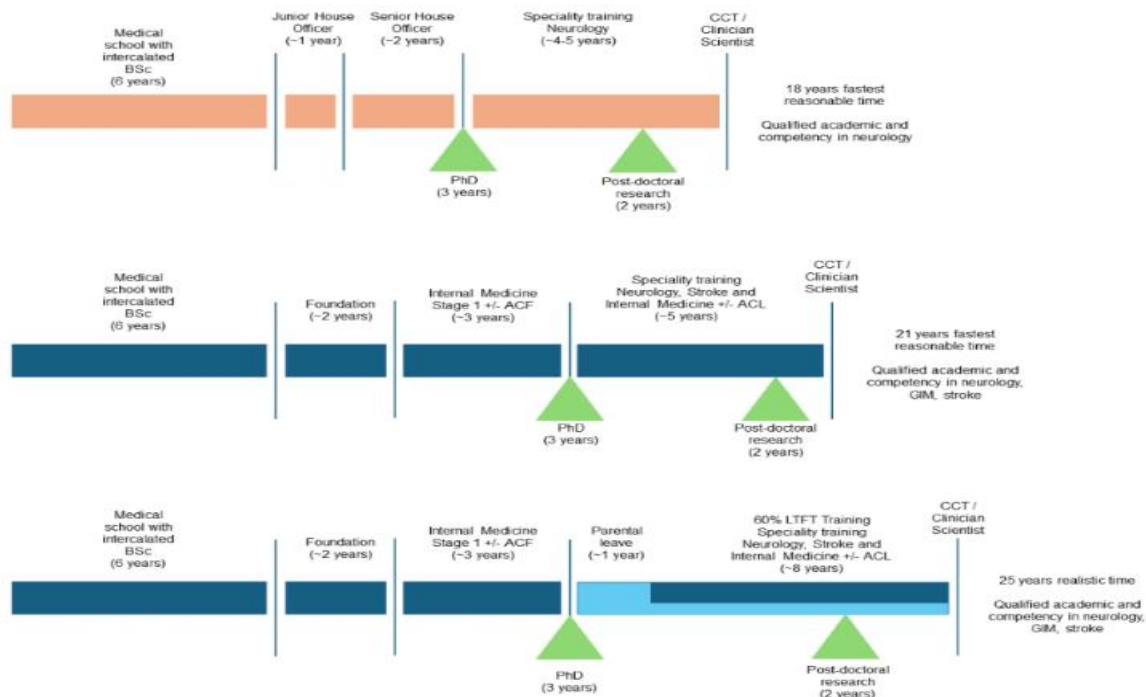
The CPMH Away Day 21 May brought together over 56 staff and students from across the 3 units, in addition to invited visitors from other QM groups. In the first session, staff from the units presented current research projects. An update from the CPMH teaching team followed, covering psychiatry postgraduate taught (PGT) programmes, reflections on semester B teaching, and a discussion on ways to develop and improve distance learning and short course experiences. In the second session, clinical fellows and fixed term researchers across the Centre gave updates on their research projects, followed by PhD student presentations and a discussion on PhD supervision and support.



Academic neurology in crisis in the UK

21 May (Ruth Dobson. Centre for Preventive Neurology)

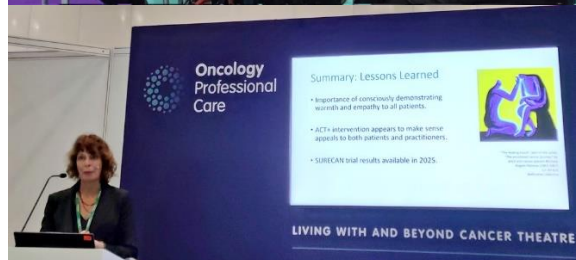
Despite being in 'a golden age of neurological innovation' in life-changing improvements for patients, academic neurology is in crisis according to an Opinion piece in *Brain*. Academic neurologists overall are older and less diverse than they should be, with fewer young clinical academics being trained as a proportion of the workforce. Authors describe 'a leaky pipeline with catastrophic loss of talent at key points' in clinical neurology training, and say that major changes in clinical neurology training recently introduced in the UK will exacerbate these issues. They conclude: 'the neurology speciality needs to relook at the mandatory training requirement for generalism: our collective strength should be in a diversity of talents and roles - from the jack of all trades to the master of one'.



Oncology Professional Care Conference

21 May (Steph Taylor, Imran Khan. Centre for Primary Care)

At the Oncology Professional Care Conference in London, Steph Taylor and Imran Khan from the Survivors' Rehabilitation Evaluation after Cancer (SURECAN) team presented the lessons learned from the study. Steph introduced SURECAN's aim to develop and test a novel psychological intervention based on Acceptance and Commitment Therapy for patients living with and beyond cancer in the UK. She discussed the importance of psychological support for people who have completed cancer treatment and have a diminished quality of life. Imran discussed the recruitment challenges faced by the study due to the COVID-19 pandemic. This year's Conference theme was Fostering Collaboration.

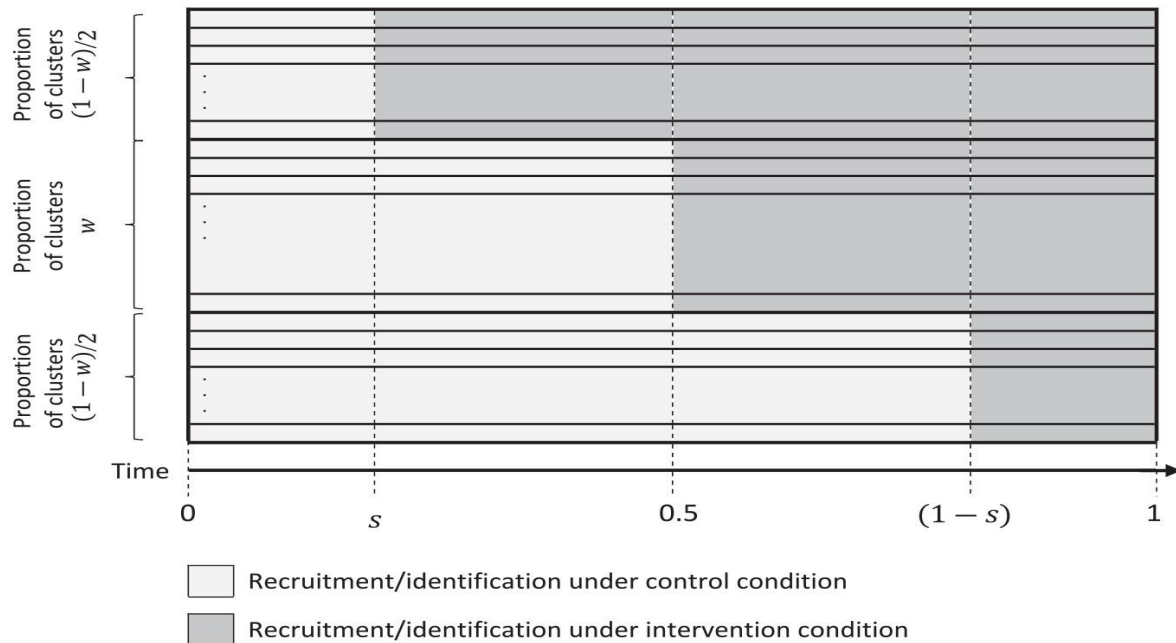


Designs for 3-sequence stepped wedge trials with continuous recruitment

21 May (Richard Hooper, Olivier Quintin. Centre for Evaluation and Methods)

In stepped wedge trials recruiting participants in a continuous stream, design choice is 'infinitely flexible' and need not adhere to standard approach of dividing time into equal length periods, say authors of a Clinical Trials [paper](#). They consider a stepped wedge design with clusters randomised to 3 sequences, and investigate design

choice that minimises the variance of the treatment effect estimator under different assumptions about the intra-cluster correlation. Authors say that in many settings a relatively simple fraction- based design can be found that offers close-to-optimal efficiency, and that there may also be designs that are robustly efficient over a wide range of settings.



Theatre, laughter and the unconscious

21 May (Maria Grazia Turri. Centre for Psychiatry and Mental Health)

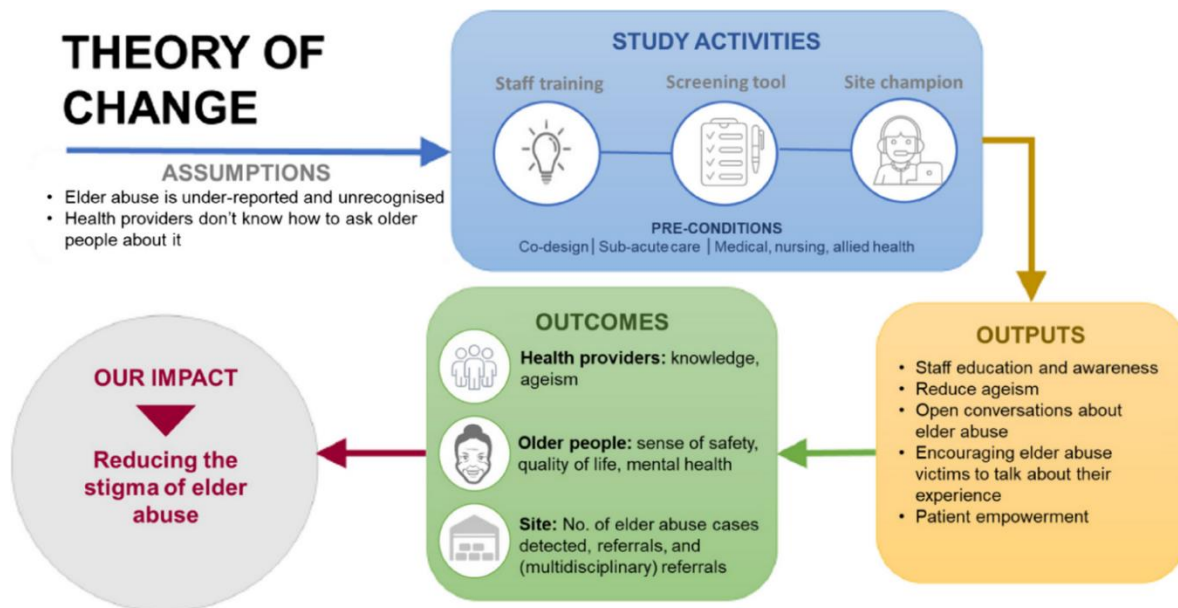
In a presentation on her psychoanalysis and theatre work, Maria Turri delivered a talk entitled "Theatre, laughter and the unconscious: how comedy empowers and what it denies" on 21 May. The talk, at the Municipality Theatre in Istanbul, was covered by the RAILLY news network.



No More Shame: Protocol for an RCT to address elder abuse

22 May (Claudia Cooper. Centre for Psychiatry and Mental Health)

To evaluate an intervention to improve health provider's recognition, response and referral of elder abuse, the No More Shame RCT will be conducted across 10 subacute hospital sites in Australia. The multi-component intervention comprises a training programme for health providers, implementation of a screening tool, and use of site champions. Outcomes will be collected at baseline, 4 and 9 months. Primary outcomes are change in health providers' knowledge of responding to elder abuse and older people's sense of safety and quality of life.



UNFPA Regional reports on sexual and reproductive health and rights

23 May (Heather McMullen. Centre for Public Health and Policy)

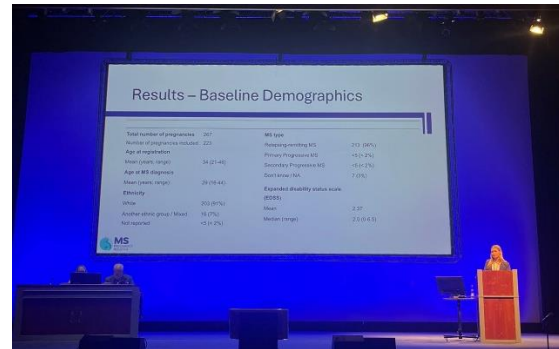
A QMUL/UN Population Fund (UNFPA) collaboration has produced a set of 5 regional analyses taking stock of Sexual and Reproductive Health and Rights (SRHR) references and reviewing the nationally determined contributions (NDCs) outlined in the climate plans and commitments of countries that have ratified the Paris Climate Agreement. The reviews, produced in collaboration with the International Development Research Centre, cover references to gender, health, rights, vulnerable groups, youth, and population dynamics, aiming to highlight existing action in this area and to draw attention to a lack of inclusion of those being hardest hit by climate change in national climate policy priorities. With climate impacts increasing in scale and intensity, communities on the frontlines, and especially women and girls, are becoming more vulnerable. The 5 reports cover SRHR commitments from UNFPA member countries in the Arab states, West and Central Africa, Latin America and the Caribbean, Asia and the Pacific, and East and Southern Africa.



Association of British Neurologists Annual Conference

23 May (Emily Tregaskis-Daniels. Centre for Preventive Neurology)

In a talk on disease modifying therapy exposure during pregnancy and postpartum decision making for women with Multiple Sclerosis at the 2024 Association of British Neurologists conference, Emily Tregaskis-Daniels delivered the latest findings from the UK MS Pregnancy Register. This year's ABN conference was held in Edinburgh.



Society of Apothecaries Galen Medal

23 May (Jack Cuzick. Centre for Cancer Screening, Prevention and Early Diagnosis)



In recognition of his work '*transforming identification of women at high risk of breast cancer and pioneering modern prevention cervical screening strategies that have been adopted worldwide*', Jack Cuzick was awarded the Galen Medal in Therapeutics for 2024 at a dinner held by the Society of Apothecaries. Our congratulations to Jack on this truly deserved award.

Care for common mental disorders in urban v less urban areas in England

23 May (Natalie Shoham, Claudia Cooper. Centre for Psychiatry and Mental Health)

Analysing data on 7455 adults in the 2014 English Adult Psychiatric Morbidity Survey, a cross-sectional study examines whether those living in less urban areas received less psychological interventions and antidepressant medications than those in urban areas. Findings show that participants living in less urban areas were half as likely to be in receipt of any psychological intervention relative to those living in urban areas, but there was no association between urbanisation and antidepressant receipt. Authors conclude that while Improving Access to Psychological Therapies services have increased therapy access nationwide, this may have had more impact in urban areas, potentially widening urban/rural inequalities.



A conceptual framework for defining trial efficiency

23 May (Charis Xie, Anna De Simoni, Sandra Eldridge, Clare Relton. Centre for Evaluation and Methods)

To establish a consensus on a conceptual framework to define trial efficiency, researchers identified a set of defining terms in a literature review, and consulted with an e-Delphi panel of experts in the global trial community. Consensus was reached on 9 items: 4 constructs that collectively define trial efficiency (scientific efficiency, operational efficiency, statistical efficiency and economic efficiency), and 5 essential building blocks for efficient trials (trial design, trial process, infrastructure, superstructure, and stakeholders). Authors hope the consensus lays the groundwork for evaluating efficiency of individual trials or trial systems.



Thinking In Between Podcast

23 May (APOLLO Social Science team. Centre for Primary Care)

Featured in this month's Thinking In Between podcast is Cervantee Wild, Research Fellow at the Nuffield Dept of Primary Care Health Sciences at the University of Oxford, who shares her research journey. Cervantee brings three ideas: Community Up research values, challenges posed by online interviewing and data collection, and the question of whether researchers can be advocates.



British Geriatrics Society 2024 Spring Meeting

23 May (Camilla Parker. Centre for Psychiatry and Mental Health)

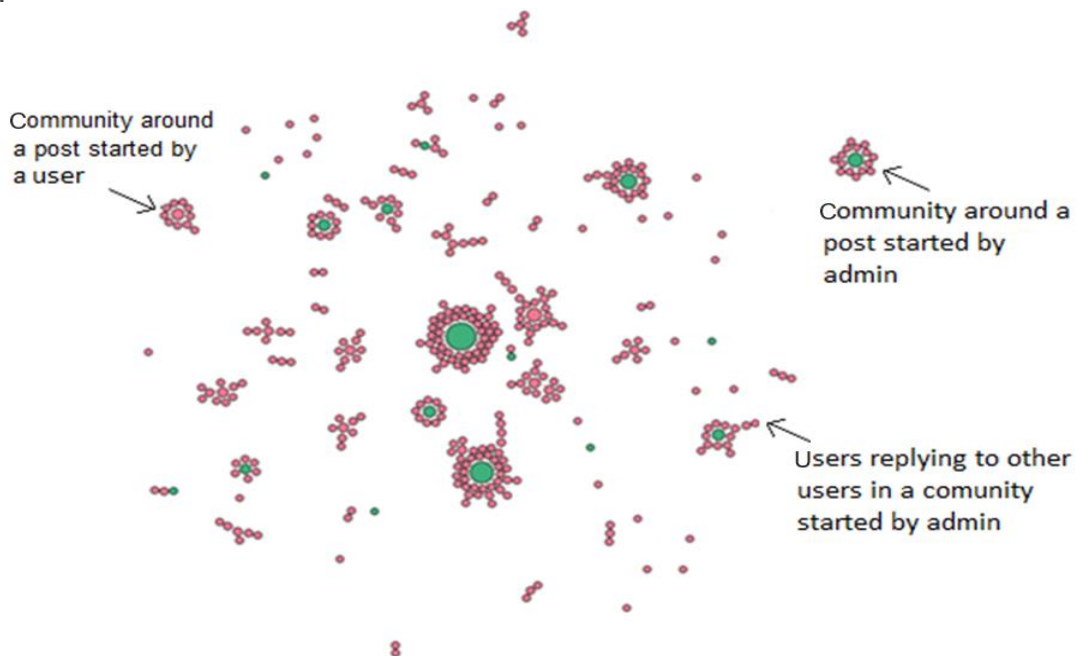


At the British Geriatrics Society (BGS) meeting in Birmingham, Camilla Parker delivered a presentation entitled NHS Staff experiences of racism from patients and carers: survey from a London Older Persons Service. The survey found that 69% of BAME staff have personally experienced racism, but that most of these incidents were unchallenged and unreported. Camilla concluded that comprehensive policies with a zero-tolerance approach to racism are crucial.

Online social engagement and risk of Parkinson’s Disease

24 May (Aneet Gill, Jon Bestwick, Alastair Noyce, Anna De Simoni. Centres for Preventive Neurology/Primary Care)

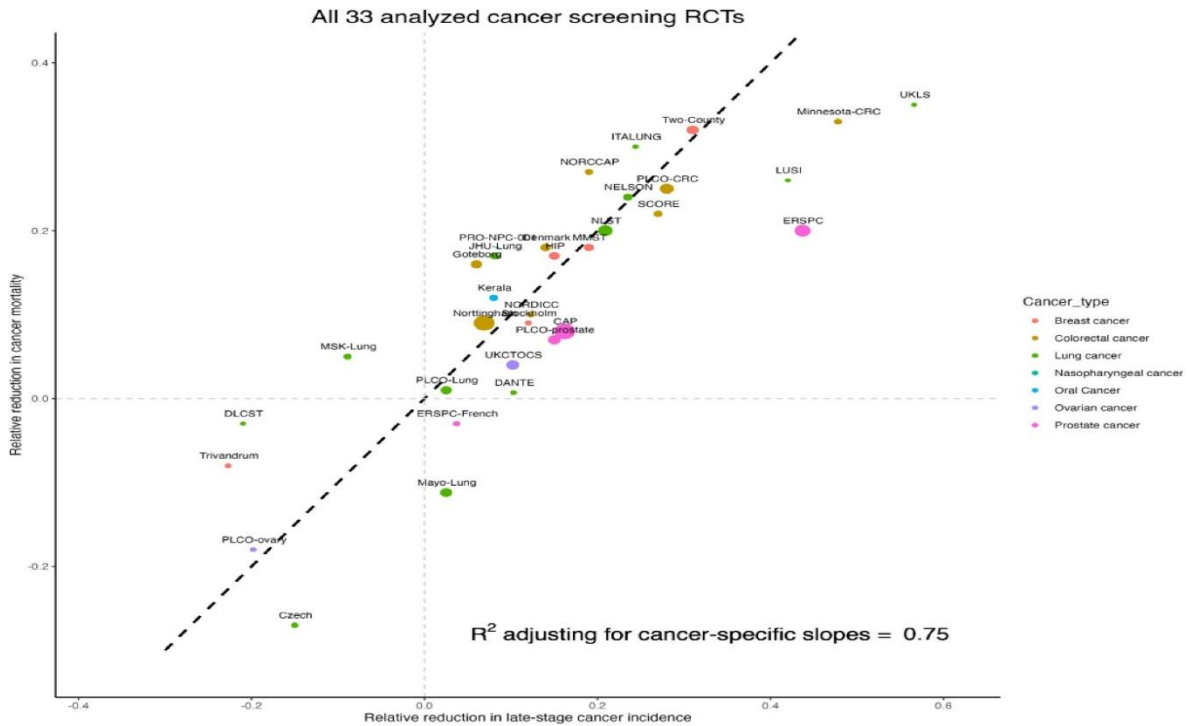
To explore the relationship between web-based social engagement and potential predictive risk indicators of Parkinson’s disease (PD), researchers built an application to enable online social interaction in the PREDICT-PD cohort. In the 4-month trial, weekly engagement activities based on PD-related research and queries were used to stimulate discussion. Researchers analysed the pattern of connections generated through the number of posts, replies, and networks, and used regression analysis to estimate the relationship between risk scores and network measures. Results from the pilot study suggest that an online forum can serve as an intervention to enhance social connectedness, and to investigate whether patterns of online engagement can affect the risk of developing PD through long-term follow-up.



Association between reduction of late-stage cancers and reduction of cancer-specific mortality

26 May (Stephen Duffy. Centre for Cancer Screening, Prevention and Early Diagnosis)

A meta-regression analysis of 33 cancer screening RCTs reporting both late-stage cancer incidence and cancer mortality shows that the relative reduction of late-stage cancer incidence is linearly associated with the relative reduction of cancer mortality across cancer types. The programmes reported on 7 cancer types, including lung, colorectal, breast, and prostate. Trials with a $\geq 20\%$ reduction in late-stage cancers were more likely to achieve a significant reduction in cancer mortality.

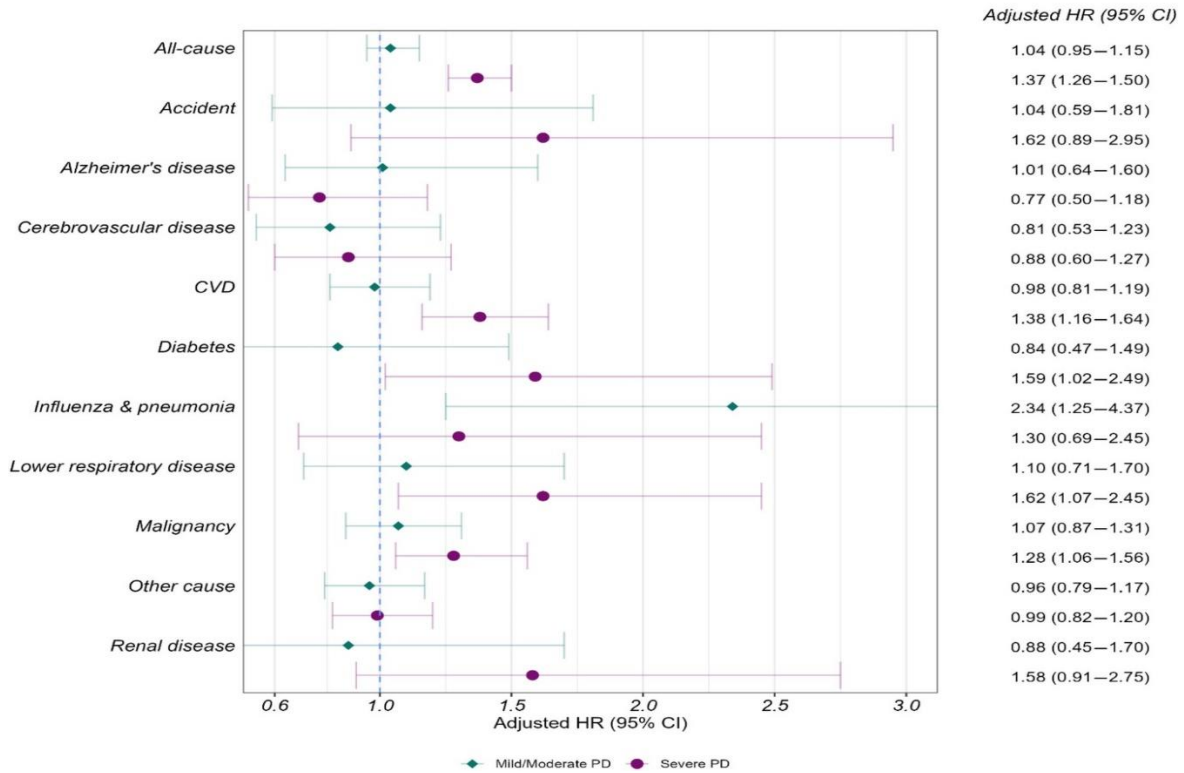


Mortality in US adults with periodontal diseases

27 May (Harriet Larvin, Paris Baptiste, Jianhua Wu. Centre for Primary Care)

Using data on >15k adults from 6 National US Health and Nutrition Examination Survey cycles followed up for a median 9yrs, a prospective cohort study investigates the association between periodontal diseases (PDs) and mortality. Researchers found that risk of all-cause mortality was 22% greater in people with PD than controls, and that risks of mortality by cardiovascular diseases, respiratory disease, and diabetes were highest in participants with severe PD.

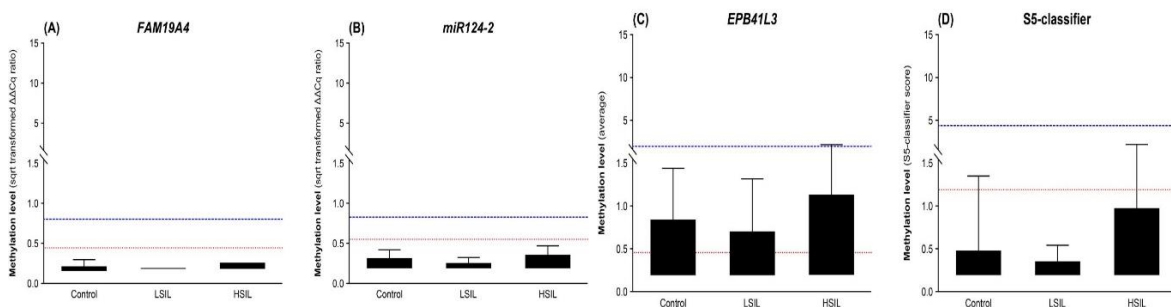
Mortality by underlying cause of death



Methylation levels in HPV-vaccinated women with cervical HSIL

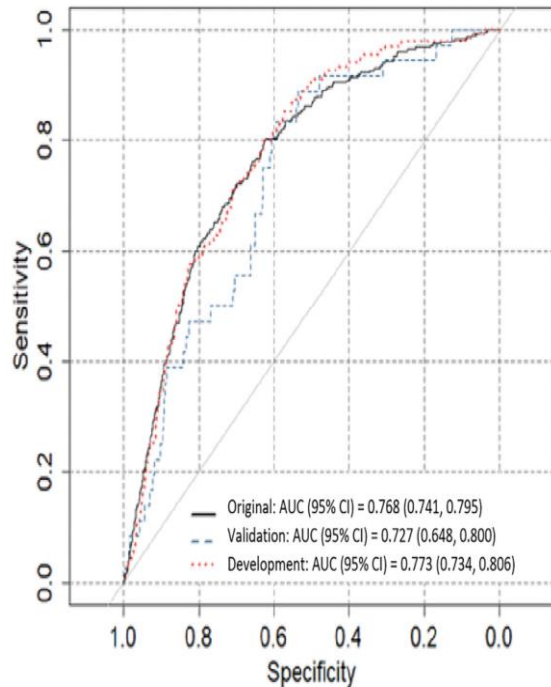
27 May (Dorota Scibior-Bentkowska, Elizabeth Sumiec, Belinda Nedjai. Centre for Cancer Screening, Prevention and Early Diagnosis)

As human papillomavirus (HPV)-vaccinated women enter cervical screening programmes, redesign is needed to reduce false-positive rates. In a nested case-control study, 9242 women who received the 3-dose HPV16/18-vaccine were followed up over 15yrs. Results showed that vaccinated women with cervical high-grade squamous intraepithelial lesions (HSIL) had infections with HPV genotypes that very rarely cause cancer in this age group. They also displayed low methylation levels, similar to those in HPV-vaccinated women with low-grade squamous intraepithelial lesions and HPV-vaccinated controls. The low methylation levels and potential for lesion regression suggest that HPV-vaccinated women would benefit from active surveillance of their HSIL rather than immediate treatment. Methylation markers offer a potential solution to reduce false-positive rates by identifying clinically relevant cervical lesions with progressive potential. Further investigation is warranted to understand the likely regressive nature of HSIL among HPV-vaccinated women and its implications for management.



Haematuria Cancer Risk Score + ultrasound for cystoscopy triage

28 May (Yin Zhou, Fiona Walter, Peter Sasieni. Centre for Cancer Screening, Prevention and Early Diagnosis)

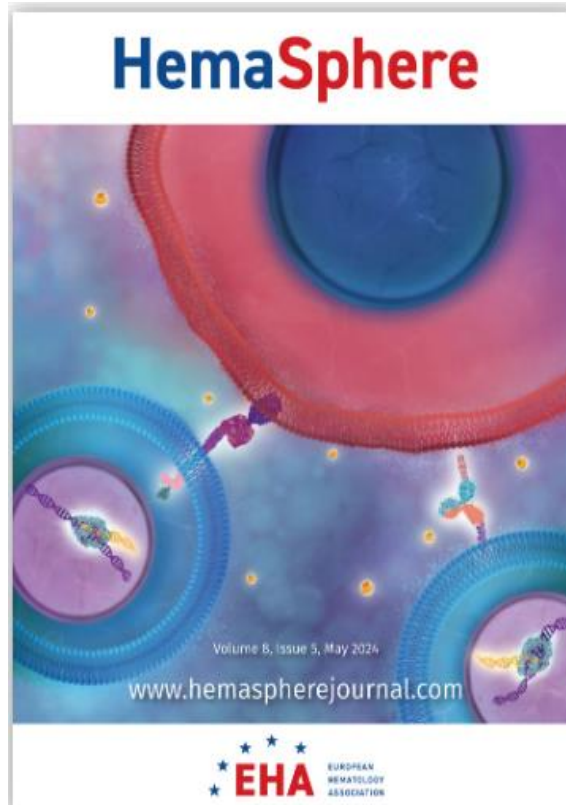


Haematuria is a cardinal symptom of urinary tract cancer, but investigation using visual examination of the bladder (cystoscopy) is an invasive and expensive procedure. In 2 cohorts of patients (1984 with haematuria from 40 UK hospitals, and 500 referred to secondary care for suspicion of bladder cancer) researchers evaluated the ability of renal bladder ultrasound (RBUS) with the Haematuria Cancer Risk Score (HCRS) to inform cystoscopy use. In the 2 cohorts respectively, 134 and 36 patients were diagnosed with urinary tract cancer. Results show that the HCRS with RBUS enables triage of patients with haematuria who would benefit from cystoscopy, resulting in 25% of patients safely omitting cystoscopy, with resultant health care cost savings.

Transfusions: When to Stop

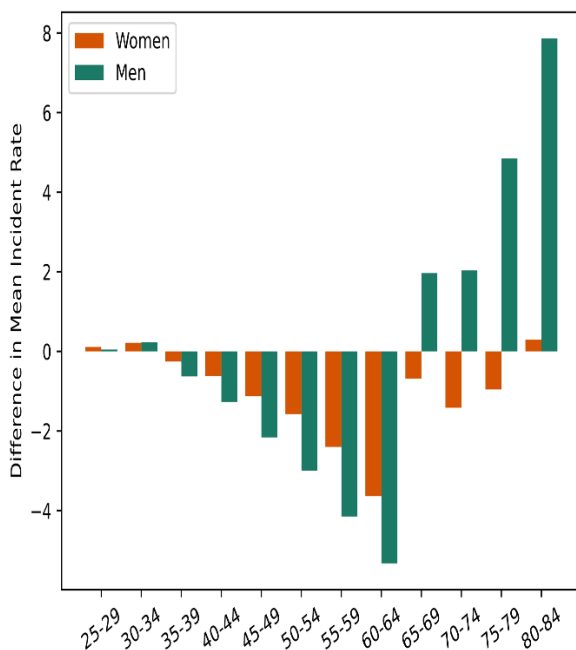
28 May (Stephen Hibbs. Centre for Primary Care)

Introducing an illustrated personal account by Dr Sophie Evans, Stephen Hibbs writes about patient choice on whether to continue blood transfusions. Reflecting that the prevailing story of haematology is of progress and advancement, with a general policy of finding alternative treatment if one does not work, Stephen considers the situation in which this dominant optimism does not mirror personal options for patients. For frail elders offered supportive care in blood transfusion clinics, the burden of continuing treatment may outweigh the benefits. Weighing up these choices is freighted with the fear of dying and potential accusations of giving up. 'Creative approaches highlight the value of bringing our own humanity and creativity to the conversations we find hardest in haematology practice', he says, 'like when to stop'.



Spread of behavioural risk-factors for CVD in city-scale populations

28 May (Lola Oyebode. Centre for Public Health and Policy)



Difference between observed data (Hippisley-Cox et al) and modelled rate

Seeking to address the 4 main behaviours that increase risk of cardiovascular disease (smoking, poor diet, physical inactivity and harmful use of alcohol), researchers have created and validated a city-scale agent-based model (ABM) of how these risk-factors spread through social networks (spousal, household, friendship and workplace). They examine whether the modelled impact of interventions could be used to identify targets for public health intervention and to test intervention strategies. Comparing the model output (predicted CVD events over 10yrs) with observed data, they demonstrate that the model output is realistic, and stable up to at least a population of 1.2 million. Results show that there is scope for the modelled interventions targeting the spread of these behaviours to change the number of CVD events experienced.

People from ethnic minorities seeking help for Long Covid

28 May (Dipesh Gopal. Centre for Primary Care)

In an NIHR-funded interview study of people representing diverse socio-economic demographics who self-disclosed Long Covid, researchers investigate the lived experiences of Long Covid in people from ethnic minorities. Results show that the stigma of Covid-19, racism, and discrimination in healthcare had an impact on the ability of minority ethnic patients to access healthcare. Additional barriers reported included feeling unworthy of receiving care, not having enough information about Long Covid, and a lack of awareness of healthcare options for coping with the chronic condition. Authors say these experiences resulted in mistrust in healthcare, creating barriers to help-seeking.



Protocol for Every Woman Study: low- and middle-income countries

29 May (Garth Funston. Centre for Cancer Screening, Prevention and Early Diagnosis)

In the published protocol for an observational study of the challenges and opportunities to improve survival and quality of life for women with ovarian cancer in 24 low- and middle-income countries in Asia, Africa and S.America, researchers describe their aim to recruit >2000 women within 5yrs of their ovarian cancer diagnosis. The study will use an adapted questionnaire from the HIC Every woman study to collect information on demographics, knowledge of ovarian cancer, route to diagnosis, access to treatments, surgery and genetic testing, support needs, the impact of the disease on women and their families, and their priorities for action.



LSHTM Vaccine Centre seminar series

30 May (Milena Marszalek. Centre for Primary Care)



As part of the London School of Hygiene and Tropical Medicine's Vaccine Centre seminar series, Milena Marszalek presented a talk on 'Improving the timeliness and equity of preschool childhood vaccinations'. She spoke about the CEG-led quality improvement programme to an audience of around 60 attendees.

Did Homo Sapiens finish off Neanderthals through deadly infectious diseases?

30 May (Jonathan Kennedy. Centre for Public Health and Policy)

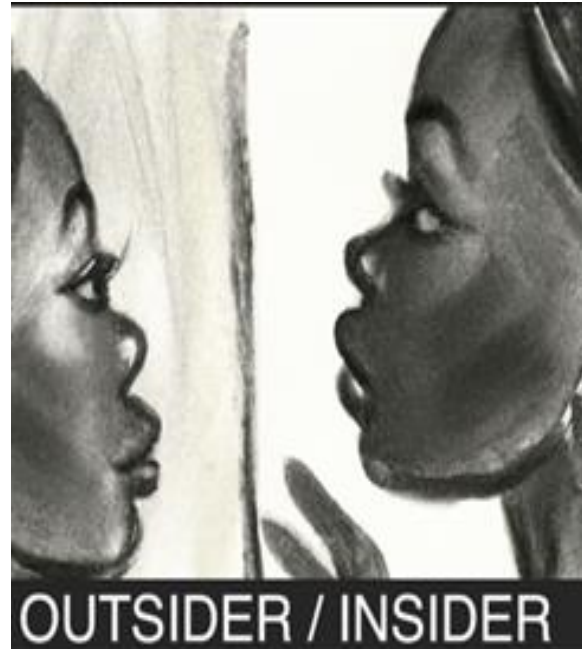
In an Archaeology Opinion article for The Guardian, Jonathan Kennedy hails a groundbreaking study identifying 3 viruses (adenovirus, herpesvirus, and papilloma virus) in 50,000yr old Neanderthal bones. Reflecting that this discovery may potentially resolve the mystery of the extinction of the Neanderthals, and the rise to world domination of Homo Sapiens, Jonathan concludes that 'Our ancestors 50,000 years ago had germs on their side, but we might not be so lucky in the future.'



FORTHCOMING EVENTS

Mad Hearts 2024: The Art of Mental Health (6-7 June)

This collaborative conference exploring the theme of Outsider/Insider will be held 6-7 June at ArtsOne (Mile End Campus). Participants will be invited to consider, re-frame and discuss - whatever this opposition might mean, and wherever we choose to place ourselves: outsiders, insiders, both, & in between. This year, Mad Hearts joins with PsychArt to explore the theme. The event explores productive, radical, contemporary encounters between the arts and mental health, bringing together clinical, artistic and research perspectives that offer a re-interpretation of contemporary mental health science and practice, with a view of imagining a different future. Sign up [here](#) or for more info contact [Maria Turri](#).



Festival of Communities (8 June)

Please join us for a fantastic day of free family fun at the Festival of Communities on Saturday 8 June, from 11:30am to 4:30pm, in Stepney Green Park. The Festival is hosted by QM in collaboration with local organisations and groups (many from WIPH!) who will be running hands-on activities that showcase local research, creativity, and community initiatives. QM students and staff will deliver activities throughout the day, with performances, games, and demonstrations. More info [here](#).



WIPH Showcase 2024 (18 June)

We look forward to seeing you all at the annual WIPH Showcase, to be held on Tuesday 18 June from 10:30am to 4pm, with a celebratory BBQ to follow on the lawn at Charterhouse. The morning will focus on our Centres, and the stellar work of our students and staff, and in the afternoon we will welcome colleagues from across the Faculty to hear about the ambitions of our work addressing Health Equity and Inequalities, and our focus on Applied Social Science in Health, Health Data Science, and our Public Advisory Panel. Finally, we will be announcing the winners of our WIPH 2024 awards, for which [nominations](#) close at 5pm on Friday 7 June.



Triple Inaugural Event (19 June)

All are welcome to join this special triple inaugural event, with lectures celebrating the work of Professors Beth Stuart, Rohini Mathur, and Jianhua Wu. The event will be held from 5pm on 19 June at the Derek Willoughby Lecture Theatre in Charterhouse Square, with a reception to follow at The Shield at 7:30. [Click here for Tickets](#)



Many thanks to all who so enthusiastically contribute. Please send any news items for the next newsletter to j.a.mackie@qmul.ac.uk