

The latest news from the library service

June 2016

CPFT Library Survey, open until July 16!

Each year CPFT Libraries conduct a short library survey, to get an idea of how our services are doing and what more we can do to deliver quality library services. This year's survey is open from now until July 16th, and should only take about ten minutes to complete. To thank you for taking the time to fill out this survey, we will be given a randomly chosen survey respondent books of their choice up to the value of £50 (for work or home reading). Be sure to fill in your details at the end of the survey if you wish to participate.

The survey can be found at https://www.surveymonkey.co.uk/r/CPFTLibrary2016

New library resources

NHS Injectable Medicines Guide now available for staff.

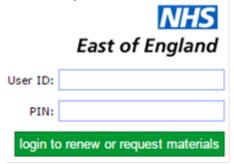
Learning and Development and CPFT's pharmacy services have secured access for staff to the Medusa Injectable Medicines Guide. This is an online resource to give staff access to continually updated monographs about the use and administration of injectable medicines. Access to these resources will be by group username and password and access is currently being set up. If you work in an area where access

to this guide would be useful, please let the library know by emailing fulbourn.library@cpft.nhs.uk so you can be included in notifications about access.

Request books and journals online via ELMS

The library's catalogue at http://www.elms.nhs.uk is a valuable resource for finding books on the shelf at your local library or available for request from our partner libraries. From the ELMS website you can now also place requests for books, journals, literature searches and library purchases. To do so:

- Go to http://www.elms.nhs.uk
- Enter your "User ID" and "PIN" in the box in the top right hand corner.



- If you do not have a user ID or PIN, contact the library at fulbourn.library@cpft.nhs.uk so they can be set up for you.
- Click on the link marked "make a request" and choose from the options to recommend a purchase, request a book, request a journal article, or request a literature search.

Cambridgeshire and Peterborough Foundation Trust Library Search/Home Make a request My Account Contact Us

• The library will be in touch about your request as soon as possible.

Current Awareness

Influenza vaccination for healthcare workers who care for people aged 60 or older living in long-term care institutions

Cochrane Review: A systematic review found that 3% of working adults who had received influenza vaccine and 5% of those who were unvaccinated had laboratory-proven influenza per season; in healthcare workers (HCWs) these percentages were 5% and 8% respectively. Healthcare workers may transmit influenza to patients. The

purpose of this review is to identify all randomised controlled trials (RCTs) and non-RCTs assessing the effects of vaccinating healthcare workers on the incidence of laboratory-proven influenza, pneumonia, death from pneumonia and admission to hospital for respiratory illness in those aged 60 years or older resident in long-term care institutions (LTCls). The review findings did not identify conclusive evidence of benefit of HCW vaccination programmes on specific outcomes of laboratory-proven influenza, its complications (lower respiratory tract infection, hospitalisation or death due to lower respiratory tract illness), or all cause mortality in people over the age of 60 who live in care institutions.

Antipsychotics for fibromyalgia in adults

Cochrane Review: Fibromyalgia is a clinically well-defined chronic condition of unknown aetiology characterised by chronic widespread pain that often co-exists with sleep problems and fatigue. It affects approximately 2% of the general population. Up to 70% of patients with fibromyalgia meet the criteria for a depressive or anxiety disorder. Antipsychotics might reduce fibromyalgia and associated mental health symptoms. This review assesses the efficacy, tolerability and safety of antipsychotics in fibromyalgia in adults. Very low quality evidence suggests that quetiapine may be considered for a time-limited trial (4 to 12 weeks) to reduce pain, sleep problems, depression and anxiety in fibromyalgia patients with major depression. Potential side effects such as weight gain should be balanced against the potential benefits in shared decision making with the patient.

Speech and language therapy for aphasia following stroke

Cochrane Review: Aphasia is an acquired language impairment following brain damage that affects some or all language modalities: expression and understanding of speech, reading, and writing. Approximately one third of people who have a stroke experience aphasia. This study assesses the effects of speech and language therapy (SLT) for aphasia following stroke and finds evidence of the effectiveness of SLT for people with aphasia following stroke in terms of improved functional communication, reading, writing, and expressive language compared with no therapy.

NICE guideline: Psychosis and schizophrenia in children and young people: recognition and management

Updated NICE guideline: This guideline covers recognising and managing psychosis and schizophrenia in children and young people. It aims to improve early recognition of psychosis and schizophrenia so that children and young people can be offered the treatment and care they need to live with the condition.

NUCE Guideline: Dementia: supporting people with dementia and their carers in health and social care

Updated NICE guideline: This guideline covers preventing, diagnosing, assessing and managing dementia in health and social care, and includes recommendations on Alzheimer's disease. It aims to improve care for people with dementia by promoting

accurate diagnosis and the most effective interventions, and improving the organisation of services.

Risky stem cell treatment 'halts progress of multiple sclerosis'

Behind the headlines: "New treatment can 'halt' multiple sclerosis, says study," BBC News reports. The treatment involves effectively destroying the existing immune system and creating a new one using stem cells. But this new treatment carries a high risk of complications. Multiple sclerosis (MS) is an autoimmune disease where the immune system mistakenly attacks healthy cells in the body – in this case, the coating of the nerves (myelin sheath). In this Canadian study, researchers essentiality destroyed a patient's existing immune system with an aggressive course of chemotherapy, then transplanted stem cells - which have the potential to become any type of blood cell – in an attempt to rebuild an immune system without the flaws that trigger MS. Of the 24 patients that took part in the study, 70% had no disease activity three years after the transplant, and about a third had sustained improvement in disability status. For example, 16 patients were able to go back to work or college. This was a small study with no comparison group, and one of the 24 patients died after transplant as the result of an infection, representing a mortality rate of 4%. Whether or not this was just an unfortunate one-off is unclear. Further trials in larger groups of people with MS, including those with different disease characteristics, and comparing it with other treatments, would be needed to better gauge the effectiveness and safety of this approach.

Should we rethink the causes of anorexia?

Behind The Headlines: "Anorexia is not about a fear of getting fat, but rather a pleasure at losing weight, experts reveal," says the Daily Mail. The headline oversimplifies the results of a study that looked at women's responses to photos of women of varying weights. In the study, 71 women with anorexia and 20 without were shown photographs of women who were either a normal weight, underweight or overweight, while monitors recorded sweating caused by emotional excitement. Researchers found women with anorexia felt more negatively about images of normal and overweight women, and more positively about images of underweight women, compared with women without anorexia. This suggests a desire to be thin may be more important than a fear of getting fat, say the researchers, who said that their results showed the positive feelings towards images of underweight bodies were stronger than negative feelings towards overweight bodies. The study involved only 71 people, with different types of anorexia and at different stages in their illness, and a control group of only 20. A bigger study with more specific groups might help us understand more.

Green tea extract 'boosts mental ability' in people with Down's Syndrome

Behind The Headlines: "Down's syndrome can be treated with green tea," says The Daily Telegraph, reporting on a study that looked at the effect of a chemical extract on learning difficulties. A Spanish study found some improvement in thinking abilities among people with Down's syndrome who took a supplement of green tea extract, and also had training, for a year. The study gave 43 adults with Down's an

extract called EGCG and compared them with 41 adults with Down's given a placebo. The researchers used 24 cognitive tests. They found improvements in three of the tests for the extract group. This is an interesting, but early-stage, study into a treatment that might help people with Down's syndrome cope better with everyday life. However, the study does not provide conclusive evidence that green tea extract makes a big difference to people's thinking, memory or behaviour. A small sample size and neutral results in most tests increase the risk that the reported results are chance. A larger study is needed.

Depression blood test could lead to personalised treatments

Behind The Headlines: "UK scientists have developed a blood test to help doctors pick the best drug for patients with depression," BBC News reports, somewhat prematurely. It is currently unproven whether such a test, based on measuring inflammation, would improve treatment outcomes. Researchers screened blood samples from people with depression who had, and had not, responded well to antidepressant medicines in the hope of identifying molecules associated with inflammation and drug response. They then used this information for a second group to see if they could predict who would and wouldn't respond to treatment with antidepressants. This study shows how a new blood test in development can help identify people with depression who are most and least likely to benefit from antidepressants. While promising, the test is far from perfect. For example, it missed 39-43% of non-responders, meaning these people would continue to receive standard antidepressant treatment that is unlikely to work for them. A large proportion of patients (22-38%) also fell into the "intermediate" group who were neither responders nor non-responders, so the test wasn't too useful here. Larger studies are needed before this test can be shown to be effective.

New articles from CPFT staff

This is a selection of recent articles written by CPFT staff and available via your Athens account, including full text links to the articles:

Lewis-Fernández, R., et al. "<u>Acculturation dimensions and 12-month mood and anxiety disorders across US Latino subgroups in the National Epidemiologic Survey of Alcohol and Related Conditions.</u>" Psychological medicine (2016): 1-15.

Dibben, C. R., Khandaker, G. M., Underwood, B. R., O'Loughlin, C., Keep, C., Mann, L., & Jones, P. B. "First-generation antipsychotics: not gone but forgotten." BJPsych Bull 40.2 (2016): 93-96.

Catani, Marco, et al. "Frontal networks in adults with autism spectrum disorder." Brain 139.2 (2016): 616-630.

Voon, Valerie, et al. "Waiting impulsivity: the influence of acute methylphenidate and feedback." International Journal of Neuropsychopharmacology 19.1 (2016)

Nishida, Atsushi, et al. "<u>Adolescent Self-Organization and Adult Smoking and Drinking over Fifty Years of Follow-Up: The British 1946 Birth Cohort.</u>" PloS one 11.1 (2016): e0146731.

Access to these and other articles by CPFT staff an Athens account. Sign up for Athens online by going to https://openathens.nice.org.uk, then visit http://www.eel.nhs.uk for a comprehensive list of available journals and resources. For more information email the library at fulbourn.library@cpft.nhs.uk.

Athens training dates

New NHS Evidence Database training dates for 2016

Do you need help navigating the maze of resources available through your Athens account? Do you want access to journal articles or information on a particular subject? Do you want to find evidence to better support your work and improve patient care? NHS Evidence Database Training is a short, informative course delivered by library professionals to show you how to use the Trust's electronic resources, how to use eBooks and e-journals, how to search the Cochrane Library, and even how to perform advanced literature searches using the Healthcare Databases Advanced Search.

All courses run from 10AM to 12PM. Upcoming dates are as follows:

Fulbourn:

- July 20th
- August 17th

Cavell Centre:

- July 27th
- August 24th

Please note that you will need a valid NHS Athens username to take part in this course. Contact the Trust's Athens administrator at fulbourn.library@cpft.nhs.uk for more information.

One-to-one Athens training sessions

If you are unable to make any of the Athens training dates, the library also offers one-to-one training sessions for staff. These sessions take up to 2 hours and can be booked by at either the Fulbourn or Cavell Centre by emailing your availability to: fulbourn.library@cpft.nhs.uk

Browse our library catalogue: www.elms.nhs.uk