



Keeping you up to date with [Lothian Referral Guidelines](#)- for previous e-Bulletin issues see [News](#)

Lead Referral Advisor - Becky Cheesbrough

Welcome to December's edition of the RefHelp e-bulletin and the last of 2023! It's been another busy year for the RefHelp team as we continue to try and bring you up to date information regarding referral pathways within Lothian.

There have been over 140 new pages added to the website and more than 6000 updates this year. In addition, we have continued with our educational webinar series, RefTalks, and delivered another 8 of these in 2023.

We have had some new additions to the website, including a section of "[Useful Resources](#)" for referrers and "RefBites". These are things we will continue to work on in 2024. We also have some other exciting new projects in the pipeline for 2024 so keep tuned!

There have been some changes in the team this year too. We were very sad to say goodbye to Caroline Wiggins last month and wish her all the best with her new ventures. It was a delight to welcome Jane Burnett back to the team in September (see more from Jane below) and we welcome David Millar who is joining us this month.

I would personally like to take this opportunity to say a few thank yous - to our secondary care and specialty colleagues for their collaboration and hard work, to our users for your continued support and the whole of the RefHelp team for their dedication and generally being a "top team" to be part of.

We are genuinely interested in your feedback, good and bad, and encourage you to keep in touch and let us know what you think so that we can continue to improve and be the best resource we can be.

Guest Writer - Dr Jeremy Chowings

RefHelp - Instant access to referral guidelines for Lothian

[RefHelp](#) is designed to help all clinicians make the best possible referrals within Lothian.



The homepage title of NHS Lothian's Refhelp service is clear and to the point and more often than not the guidance in the different sections is equally succinct and helpful.

I first worked in NHS Lothian in 1997 and have seen RefHelp develop from a few guidelines with (usually!) helpful local comments to a comprehensive resource for many specialist services. Initially I used it every few weeks but now, following a "scientific survey over coffee" of my practice colleagues it's clear most use it many times a day.

RefHelp is a wonderful example of what can be achieved when colleagues work across the primary/secondary care interface with a determination to improve quality of care. Its sometimes forgotten that RefHelp is there to help clinicians access the best care pathways for patients; not just to make my life better on a busy duty doctor afternoon in Leith.... which it definitely does!

RefHelp is now more than referral information. It contains excellent education resources like RefTalks and RefBites, links to waiting times and news of important changes.

A measure of its success is the surprise of colleagues when they can't find the information they were looking for, or when one of the myriad of links is temporarily broken. Who remembers "having to know" that Clinical Genetics was in Springwell House if you wanted to be able to make a referral? Now the guidance and pathway are all there on RefHelp.

We need your help! RefHelp is so large that often it's the users who spot problems. Using the feedback section in "[about us](#)" you can report problems, make suggestions, and receive feedback about issues raised. This helps the RefHelp team to provide the best possible resource. They are a small but dedicated team who respond promptly and professionally to our enquiries.

However, the most striking thing about the RefHelp team is their unquenchable enthusiasm for the job at a time of huge pressures and the enduring relationships they have forged across the interface.

All your STI questions answered - [and take our mini-quiz challenge!](#)

We have been working closely with colleagues in Chalmers to update all the Sexually Transmitted Infection (STI) guidance, which is in a colourful easy-to-follow diagram format. Check your knowledge round some tricky STI questions - answers in the links!:

- How does management differ for [chlamydia](#) contacts depending on the timeframe since contact?
- Should GPs test for [Mycoplasma Genitalium](#)?
- What [testing and prevention measures](#) should I be recommending for MSM? And what [vaccinations](#) should MSM have and how do they access them?
- What do I do if someone tests positive for [gonorrhoea](#)?
- STIs - what should I be [testing for in primary care](#) and when should I refer?
- And how can my patients with risks or concerns, but without symptoms, arrange a [self-sample STI check](#)?
- Can you remember the symptoms and treatment for [lymphogranuloma venereum](#)?

For answers to all your STI questions please see our updated pages: [Sexually Transmitted Infections \(STIs\) - RefHelp \(nhslothian.scot\)](#).

HIV Indicator Conditions



Scottish Government has a target of [ending HIV transmission in Scotland by 2030](#). We all have a role to play - there is still stigma, and many are unaware that diagnosed and treated early, the prognosis for HIV is at least as good as for those who are not infected.

To mark this year's World AIDS Day on 1st December, we launched our [HIV indicator conditions RefBite](#), and are very grateful to Dr Naomi Bulteel for her excellent work on this. Some indicators you may find surprising or may have forgotten about - and are conditions we often see in general practice. These include, amongst others, shingles, community acquired pneumonia, unexplained weight loss, chronic diarrhoea, unexplained persistent leucopenia or thrombocytopenia and so on. Please see our [RefHelp HIV indicator condition page](#) for full details.

There is evidence of delayed diagnoses in Lothian, resulting in worse outcomes for patients, and all clinicians should be aware of the red flags and the [HIV referral pathways](#). [HIV PrEP and PEPSE](#) are also important and those RefHelp pages have been updated, too.

Menopause and HRT

Requests for menopause care are rising and HRT guidance is now complex. We have updated our pages with the very latest advice from our Chalmers experts about diagnosing the menopause, when to do tests (and what), and how to best manage HRT prescribing.

Please see RefHelp's [Menopause page](#) for details - and a reminder that referrals should be via SCI Gateway to Chalmers. There is also an excellent [RefTalk](#) too.



Benign Paroxysmal Positional Vertigo (BPPV) Training

BPPV can be quick and easy to manage in General Practice - and interventions often hasten recovery. Please see our [Audiology BPPV](#) RefHelp page with lots of educational materials for patients and clinicians. These include [Brandt-Daroff exercises](#) but also videos on the [Hallpike test](#) and the [Epley manoeuvre](#).

There is now an offer from Audiology to visit practices and give a quick and practical update on BPPV. If you are interested, please contact Rona Russell, Vestibular Audiologist (Rona.Russell@nhslothian.scot.nhs.uk), to arrange a mutually convenient time for her or one of the balance team to attend the surgery to provide hands on training.

ENT Throat Cancer Risk Calculator- SCI Gateway to change

ENT presented evidence of the efficacy of the [head and neck cancer risk calculator](#) - at our February [RefTalk](#). Reflecting that our specialist colleagues need different information, and that the calculator over-estimates risk in the very highest risk, SCI Gateway will be changing soon.

We will be sending details later in December - please look out for them!

Clinical Genetics

The Clinical Genetics team, based at the Western, have comprehensively updated their RefHelp pages. They have updated the main [Clinical Genetics](#) page. The pages for genetic testing for patients with a [Family History of Breast and or Ovarian Cancer](#) have been updated and amalgamated onto one page. The page for patients with a [Family History of Colorectal and or Lynch-related Cancer](#) has been updated. And there is a new page for patients with a [Family History of Mixed Cancers](#). The pages have a lot of information on

them to help you navigate the often quite complex questions that patients present with in this area. A new feature is the helpful option, for patients who meet the appropriate criteria, to self-refer, which is very welcome for this group of patients.

Patients who have not had cancer but report a significant family history of cancer should self-refer using the family history questionnaire (FHQ). The patient should only be directed to the Family History Questionnaire, if you believe that the family history is significant. The questionnaire can be printed out for a patient, or they can be sent the website link:

[LINK TO PDF FOR FHQ](#)

[LINK TO WEBSITE TO DOWNLOAD FHQ](#)

Text for copying to send to patients (e.g. to copy in a letter or text message) for FHQ:

<https://services.nhslothian.scot/geneticservice/wp-content/uploads/sites/54/2023/10/FHQ-draft-3.pdf>

Patients should return this to Clinical Genetics directly to initiate a referral. They **must** complete the first section which asks which service/healthcare professional referred them to this questionnaire. The questionnaire is an editable PDF and by clicking submit at the end of questionnaire, this should attach to an email to be sent directly by the patient.

Alternatively, patients can attach it to an email manually and send this to: WGH.ClinicalGenetics@nhslothian.scot.nhs.uk

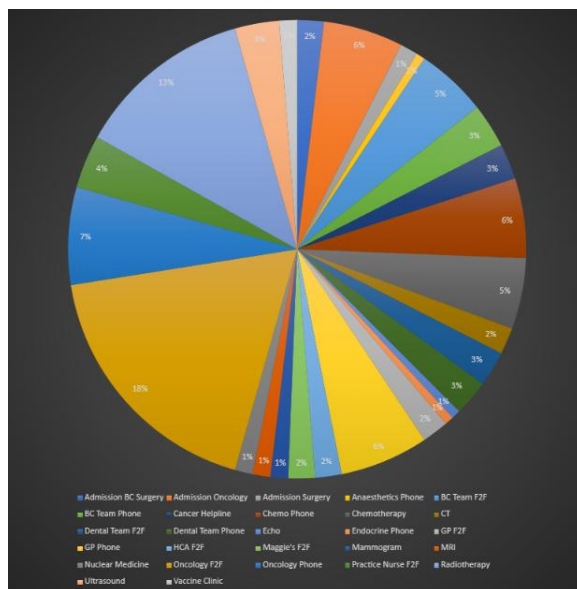
Or patients can print out the questionnaire and post it to:

Team Update

For most of the past year I have been on sick leave from RefHelp (and my Salaried GP post) with Breast Cancer. I am very grateful to my colleagues in RefHelp who have worked with the Specialties that I cover whilst I have been away.

I have learned a lot in my year of sick leave. I have been, and continue to be, very well cared for by my colleagues in Primary and Secondary care. It is both humbling and instructive to spend time on the other side of the referral pathways.

I hope to bring the insights I have gained, particularly into the referral process, during the more than 100 appointments I have had during my year on sick leave.



Maternity



The Health Visitor (HV) and Community Midwife (CMW) are the first point of contact and support for families experiencing any feeding issues. Where breastfeeding issues cannot be resolved with their support, the

HV/CMW can arrange an appointment at the breastfeeding clinic for mother and baby. There is one clinic in each hospital (Edinburgh Royal Infirmary and St John's Hospital). For more information about that or any breast feeding related problems, refer to [Breast Feeding Problems - RefHelp \(nhslothian.scot\)](#).

MSK Physio

The vertebral fragility fracture pathway is a new pathway developed by the MSK physiotherapy team in conjunction with the Rheumatology and Neurosurgery teams and accessible now via the [NHS Lothian Primary Care Back Pain Decision tool on NHS Lothian Integrated Back Pain Pathway - RefHelp](#).

West Lothian Community Physiotherapy team support patients who are unable to attend an outpatient clinic with physiotherapy input in their own environment. To know more about this domiciliary service, care offered & referral guidelines please see [West Lothian Community Physiotherapy \(Domiciliary\) - RefHelp \(nhslothian.scot\)](#)

Endocrine



The sick day rules on the [Management of long term high dose steroid therapy - RefHelp \(nhslothian.scot\)](#) page have been updated on the main page and the patient information leaflet. Remember to refer to this extremely useful guidance when starting or weaning patients off long term high steroid treatment e.g. Polymyalgia Rheumatica (which is usually diagnosed and treated in primary care).

Diabetes

The [Diabetes-Prescribing Guidance - RefHelp \(nhslothian.scot\)](#) page provides guidance for managing and prescribing in diabetes. It has 2 useful links that have been recently updated. The **Prescribing Flow Chart/Algorithm** which now has the **Dapagliflozin** as the preferred SGLTi thus replacing the empagliflozin as a second line after Metformin. Furthermore, the **Supplementary information (FAQs) for the Algorithm** has also been updated to reflect that. The Diabetes team is currently developing a new PIL for Dapagliflozin which will be available on [Patient Information Leaflets - Diabetes Managed Clinical Network \(nhslothian.scot\)](#).

Quit your way (Smoking Cessation)

Quit Your Way NHS Lothian ([Stop Smoking support - RefHelp \(nhslothian.scot\)](#)) is an advice and support service for anyone trying to stop smoking in Lothian. You can now refer patient to them via SCI gateway (Lothian Quit Your Way > Quit Your Way > LI Smoking Cessation)



Covid

There have been a few changes on the RefHelp Adult COVID pages. The main page has been updated with current guidance and resources. The new Post-Covid Referral Guidance page takes the place of the previous Long Covid pathway within the Infectious Diseases section.



There is now a resource for Long Covid in Children and Young People. This is available on both the main adult Covid page resources and links tab and also in the Paediatrics General Medicine page resources and links tab.

Chronic Pain

A Physiotherapy-led Chronic Pain service now has its own page within the Chronic Pain section. More pages will be appearing in this section over the next few months which will hopefully provide more resources and local options for patients suffering with chronic pain.

General Medicine at the Western General Hospital

The WGH now has a new page under adult General Medicine. This gives information mostly about outpatient services and contact details for the team.

RefTalks & RefBites

On 1st December-World AIDS Day in support to raise awareness, RefHelp launched a short video "[RefBites on HIV Indicator Conditions](#)". A collaborative effort by Dr Naomi Bulteel, Consultant in ID & our Referrals Advisor. The video is interesting, informative & insightful...a must see! There is a related RefHelp Page with more information: [HIV Indicator Conditions - RefHelp \(nhslothian.scot\)](#)

REFHELP
RIGHT INFO FOR RIGHT CARE

QUICK REMINDERS

RefTalks Winter Series 2024

- 29th January - Oncology
- 28th February - HIV
- March - Easter Break

Save the dates!
More info about topics and registration will be announced nearer time

Catch up on previous missed webinars by viewing the recordings here: [Archives](#)

Indulge in quick bitesize learning during your lunch break: [RefBites](#)

Keep informed of any changes in clinical guidelines or new patient pathways via [RefTweets](#) and [RefNews](#)

New to RefHelp? Or need little reminders please check out our additional resources: [Useful Resources](#)

To get regular news and updates you can follow us on X (formerly Twitter): [RefHelp_Lothian](#)

To report a problem or provide feedback please use the form here: [Contact Us](#)

Contributors to this issue were:

Dr Becky Cheesbrough, Dr Catriona Morton, Dr Jane Burnett, Dr Mohammad Alshaikly, Dr Caroline Wiggins & Aparna Amanna. Thank you to all who have supported the development content for the RefHelp website.

Was this useful and interesting? We would love to hear your feedback or suggestions for future updates and content! Email us at: RefHelp@nhslothian.scot.nhs.uk or even send us a tweet