

RefTweets –February 2023

Recurrent Aphthous Stomatitis (RAS) is very common in childhood. To know more about assessment, investigations, treatment and PILs check out the Oral Ulceration page under Paediatric Oral Medicine: <https://apps.nhslothian.scot/refhelp/oral-ulceration-paediatric/>

Rheumatology and Bone Disease RefHelp page updated with information about the service, appointments, referral guidelines and useful contact details:
<https://apps.nhslothian.scot/refhelp/guidelines/rheumatology/>

New advice on treatment of iron deficiency anaemia - if patient experiences side effects (nausea or bowel disturbance), reduce frequency to alternate day iron supplementation or change oral iron preparation. For more information & referral criteria visit:
<https://apps.nhslothian.scot/refhelp/guidelines/haematology/anaemia/irondeficiencyanaemiahaematology/>

Updates on Disease Modifying Anti Rheumatic Drugs (DMARDs) both conventional and biologics - dosages, their side effects and management, specific advice for vaccination, pregnancy and surgery. Detailed info here: <https://apps.nhslothian.scot/refhelp/guidelines/rheumatology/disease-modifying-anti-rheumatic-drugs-dmards/>

Giant Cell Arteritis (GCA) information outlining history, examination, investigations including a probability scoring system which can be used to assess likelihood of GCA based on clinical features and the scoring interpretation available on RefHelp:
<https://apps.nhslothian.scot/refhelp/guidelines/rheumatology/giant-cell-arteritis/>

Specific recommendations for the management of DMARDs and Biologics in the perioperative period. For detailed advice please see:
<https://apps.nhslothian.scot/refhelp/guidelines/rheumatology/disease-modifying-anti-rheumatic-drugs-dmards/dmards-biologics/>

Detailed algorithms for monitoring patients on DMARDs - Abnormal FBC:
<https://apps.nhslothian.scot/refhelp/guidelines/rheumatology/disease-modifying-anti-rheumatic-drugs-dmards/dmard-monitoring-abnormal-fbc/> and Abnormal LFTs:
<https://apps.nhslothian.scot/refhelp/guidelines/rheumatology/disease-modifying-anti-rheumatic-drugs-dmards/dmard-monitoring-abnormal-lft/>

Gender Identity Clinic SCI gateway is now up and running. It asks for details of expectation and treatment history where available. For more details about the service, prescribing advice and referral guidelines please see RefHelp:
<https://apps.nhslothian.scot/refhelp/guidelines/sexualreprohealth/gender-identity-clinic/>

A diagnosis of gout can be made in primary care using a scoring criteria. To know more including history, examination, and management please see:
<https://apps.nhslothian.scot/refhelp/guidelines/rheumatology/gout/>

Antibody testing should not be undertaken without high clinical suspicion for the condition as no diagnosis can be made in the absence of symptoms. Check out this rough clinical guide on when to consider immunology testing and related referral guidelines:
<https://apps.nhslothian.scot/refhelp/immunology-testing-2/>

Please note the Adult self-referral form for walking aid assessment has been updated on RefHelp's Physio@Home page:

<https://apps.nhsllothian.scot/refhelp/guidelines/musculoskeletalphysiotherapy/physiohomeedinburgh/>

Useful information on a wide range of complex autoimmune conditions outlining history, examination, investigations and referral details available on RefHelp's Lupus and Connective Tissue Disease page:

<https://apps.nhsllothian.scot/refhelp/guidelines/rheumatology/connectivetissuedisease/>

Myositis or inflammatory myositis is the name for a group of rare multi-system autoimmune conditions characterized by inflammation of the muscles. Please see useful guidance on history, examination, and referral guidelines here:

<https://apps.nhsllothian.scot/refhelp/guidelines/rheumatology/myositis/>

Patients with Osteoarthritis should NOT be referred to Rheumatology unless there is uncertainty about the diagnosis. Please see useful information on diagnosis and primary care management:

<https://apps.nhsllothian.scot/refhelp/guidelines/rheumatology/osteoarthritis/>

Guidelines updated for Post-op rehab & injury management of these MSK conditions: tennis elbow, achilles tendon surgical repair, total knee/ankle replacement, medial patello femoral ligament, lower limb tendinopathy and DRAM Lothian physiotherapy.

<https://apps.nhsllothian.scot/refhelp/guidelines/musculoskeletalphysiotherapy/postoprehabmskinjurymanagement/>

Most patients with Osteoporosis can be managed in primary care but if specialist input is required refer to Rheumatology. Detailed advice on investigations, drug treatment, patient counselling & treatment review at 5/10 years clearly outlined on RefHelp:

<https://apps.nhsllothian.scot/refhelp/guidelines/rheumatology/osteoporosis/>

Recently added updated advice on safe steroid withdrawal for patients on long term high dose steroid therapy including sick day rules. For detailed info please see:

<https://apps.nhsllothian.scot/refhelp/guidelines/diabetes/management-of-long-term-high-steroid-therapy/>