

9th National Conference of the PCDS

The Conference Centre – National Motorcycle Museum, Birmingham, 7–8 November 2013

The 9th National Conference of the PCDS, which was titled *Diabetes care: Choosing the right path*, brought together primary care clinicians from around the UK to offer guidance on practical pathways through the dizzying array of diabetes guidelines, new therapies and NHS changes. Delegates attended a mixture of plenary lectures, parallel track sessions and practical breakouts, and were able to choose a personalised programme that best matched their individual needs.

David Millar-Jones (GPwSI in Diabetes, Torfaen, and Chair, PCDS) welcomed delegates to the conference and discussed the increased extent to which it was possible to personalise the conference programme, compared with previous years. He also

wished delegates an educationally engaging and rewarding conference experience.

Simple tips on unusual presentations

Maggie Shepherd, Honorary Reader, Exeter
The opening plenary session began with current figures, diagnostic criteria, and tests

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that might help in the differential diagnosis for maturity-onset diabetes of the young (MODY). Six cases were then presented to illustrate important practical considerations in recognising and diagnosing MODY, as well as other unusual presentations such as renal cysts and familial partial lipodystrophy.

Abnormal test results

Eugene Hughes, GP, Isle of Wight
In this interactive session, all delegates were given keypads to answer multiple-choice questions relating to a series of cases on test results, such as abnormal liver function test results. The cases and questions covered a range of clinical issues to consider in consultations, including alcohol consumption, driving, neuropathy and onward referral.

Prescribing dilemmas and polypharmacy

Neil Munro, Visiting Professor, University of Surrey
This keynote lecture covered the most important clinical issues to bear in mind when people with diabetes are taking a range of agents in addition to their diabetes medications. These included the potential risks relating to interactions, as well as compliance considerations. A thorough question-and-answer session moved through topics as diverse as pipeline drugs and the pros and cons of HbA_{1c} dual reporting.

Lipids in diabetes

Rob Sapsford, Consultant Cardiologist, Leeds
This session provided an insight into best-practice management of dyslipidaemia

Breakout sessions

Eating to lose weight

Pam Dyson, Research Dietitian, Oxford

This session explored various weight-loss diets that people with diabetes might use and reviewed the supporting evidence. The only consistent finding across the trials was that adherence is strongly associated with weight loss. Behavioural and environmental factors associated with adherence, it was thus argued, should be addressed.

Oral therapies – practical refresher

Alia Gilani, Health Inequalities Pharmacist, Glasgow

A practical refresher on the complexities of oral therapies was delivered that included advice on when to initiate and escalate treatment. Special clinical considerations, prescribing “do’s and don’ts” and group discussions on case studies were used to emphasise the importance of individualising patient care.

Injectable therapies – practical refresher

Claire Holt, Practice Nurse, Coventry

Fiona Kirkland, Diabetes Nurse Consultant, Staffs.

This session provided the audience with a practical refresher on injectable therapies and the factors that clinicians must take into account when making prescribing decisions, such as the occupation of the person with diabetes and how there may be nuances to the perception of the act of injecting within some minority ethnic groups.

Practical topics, such as the best area on the body to inject each drug, were explored. A case-study approach stimulated an engaging discussion among the delegates.

Taking the risk out of travel

Sara Da Costa, Nurse Consultant – Diabetes, Western Sussex Hospitals NHS Foundation Trust

This breakout focused on a case study of a young married couple, who both had type 1 diabetes and had booked a last-minute holiday to Egypt. Some of the common, and not-so-obvious, issues that people with diabetes may face when travelling abroad were highlighted, such as carrying insulin in hand luggage, getting sick abroad, and problems caused by different types and amounts of food and drink, the effects of different climates and time zones. Delegates asked a range of questions during the session and also shared some of their own clinical experiences.

Focus on the forgotten complications

Paul Downie, GP, Ross-on-Wye

This session provided a run-through of practical considerations relating to some of the less-discussed complications seen in diabetes. Of these, the importance of being aware of the clinical manifestations of cardiac autonomic neuropathy was stressed in particular.

Gastroparesis was also covered in depth, as was sexual dysfunction in men and women with diabetes.

Multiple-choice questions were posed to delegates throughout the session, triggering further discussions.

Should we be initiating insulin in general practice?

Gwen Hall, Diabetes Specialist Nurse, Portsmouth
Jane Diggle, Practice Nurse, Wakefield

This interactive session challenged the audience to consider what level of professional and patient education is needed to initiate insulin therapy safely in general practice. The impracticability of conducting a comprehensive consultation in 20 minutes, while providing individualised care, was also discussed.

The at-risk foot: More than just ticking a box

Heather Schofield, Advanced Podiatrist, Salford Royal Foundation Trust

This interactive presentation provided practical advice on how to complete a comprehensive diabetic foot assessment and what to do with the results. The key points included: the importance of checking both feet; the benefits of a fast diagnosis, because of the rapid progression of diabetic foot; and the need to refer if there is clinical uncertainty.

Understanding dose adjustment in type 1 diabetes

Alison Edwards, Diabetes Specialist Dietitian, Surrey
Julie Widdowson, Diabetes Service Lead, Norfolk

This masterclass was delivered in two parts. The first looked at carbohydrate counting and dose adjustment in depth, with a helpful overview of which foods contain carbohydrate and a reminder of the recommended amounts for men and women. A practical example generated many questions from delegates. The second part explored sick-day rules, discussing how each person with diabetes should have rules tailored to their own specific needs and emphasising the importance of regularly monitoring blood glucose and ketones.

in people with diabetes. The broad range of factors that come into play when making prescribing decisions for lipid management in diabetes was illustrated through six case examples, and the audience was posed questions at various points during the presentation that they answered using keypads.

Intercurrent illness

Debbie Hicks, Nurse Consultant
– Diabetes, Enfield

This session covered the management of diabetes and intercurrent illness in the community, with the cost to individuals and the NHS of avoidable emergency hospital admissions being highlighted. Illustrated by case studies, advice about lessening the glycaemic effects of illness and improving patient knowledge was provided.

Quality and Outcomes Framework

Colin Kenny, GP, Dromore

Last April saw the implementation of the biggest set of changes to the Quality and Outcomes Framework since its inception in 2004. In this session, delegates had an opportunity to ask questions on the changes, and were also presented with views on the positives (e.g. high achievement of the nine care processes) and the negatives (e.g. a risk of a narrowing of topics covered in consultations) that have emerged during the first 9 years of the incentive scheme.

Women's health

Julia Platts, Consultant Diabetologist and Endocrinologist, Cardiff

This session covered a wide range of women's health issues associated with



Clockwise from top left: David Millar-Jones, conference Chair; delegates in a breakout session; the exhibition hall; the awarding of the annual poster prize; delegates networking during a refreshments break; a plenary session.

diabetes. These included reproductive health, contraception, preconception care, pregnancy and gestational diabetes. The challenges faced in the management of each of these areas were illustrated with practical information and advice. While evidence of great improvements in morbidity and mortality was presented, it was emphasised that the complications of poorly managed diabetes remain severe for women and their babies.

Innovations in diabetes care

Partha Kar, Consultant Endocrinologist and Clinical Director of Diabetes, Portsmouth

The conference's closing plenary had a dual purpose: to share experience from a range of new local diabetes initiatives and to provide the motivation for each and every delegate to return to their clinical practice with inspiration to explore the opportunities to implement innovations in their own area. ■