As we finish the first quarter of a new year already we wanted to take the opportunity to fill you in with what has been happening here at CURE.

Thank you to everyone who contributed via email and Twitter and I hope you enjoy reading. Don’t forget you can keep up to date on goings on via @CURE_ScHARR on Twitter and on the CURE website.

CHRISTMAS DONATIONS

In what was a tough year for everyone it was wonderful to see that the ScHARR Christmas Charity Collection raised £750 for local charities.

£150 was donated to the following charities:
- St Lukes Hospice
- Crisis UK (helping the homeless)
- Cathedral Archer Project (a local homeless project)
- Sheffield Foodbank
- Foodworks (distributing excess food)

A huge thank you to everybody who donated and helped raise much needed funds for these great charities.
CONGRATULATIONS

Congratulations to Matthew Wilson who was recently appointed National Speciality Lead, Anaesthesia, Perioperative Medicine and Pain Research with the NIHR CRN.

This post leads local speciality CRNs and strives to facilitate NIHR funded research in their purview.

This role is administered from NIHR "Cluster 3" at KCL and Matthew will hold an Hon Chair at King's College.

A WELCOME TO OUR NEW PHD STUDENTS

AKSHAY KUMAR

My name is Akshay and my background is in mathematics and statistics with a BSc in Actuarial Science & Mathematics from the University of Manchester and an MSc in Statistics from the University of Nottingham, my PhD will be looking into the management of paediatric patient pathways in urgent and emergency healthcare settings.

SAM WATCHORN

While studying as an undergraduate economist and then a health economics masters student at Sheffield, I developed an interest in applied statistics in healthcare. This motivated me to seek out the PhD with ScHARR where I'm looking to investigate machine learning applications in emergency care settings.
Since our last PRIEST update there have been three papers and three preprints published from the PRIEST study

Papers:
Characterisation of 22446 patients attending UK emergency departments with suspected COVID-19 infection: Observational cohort study - This paper describes the PRIEST cohort and identifies important differences between patient groups, based on age, sex and ethnicity. It reports that people with confirmed COVID-19 have a poor prognosis, compared with similar emergency admissions without confirmed COVID-19.

Post-exertion oxygen saturation as a prognostic factor for adverse outcome in patients attending the emergency department with suspected COVID-19: Observational cohort study - This paper examines a small group of PRIEST patients who had post-exercise oxygen saturation measured. It shows that this can provide some additional prediction of who will suffer an adverse outcome among a highly selected group of patients whose characteristics suggest they may not need hospital admission.

Derivation and validation of a triage tool for acutely ill adults with suspected COVID-19: The PRIEST observational cohort study - This paper reports the derivation and validation of a clinical severity score for predicting adverse outcome (death or the need for organ support) in people who are acutely ill with suspected COVID-19.

Preprints:
Prognostic accuracy of emergency department triage tools for adults with suspected COVID-19: The PRIEST observational cohort study - This paper evaluates the accuracy of emergency department triage tools with suspected COVID-19 in 20892 adults from the PRIEST cohort.

Prognostic accuracy of emergency department triage tools for children with suspected COVID-19: The PRIEST observational cohort study - This paper evaluates the accuracy of emergency department triage tools with suspected COVID-19 in 1520 children from the PRIEST cohort. It shows that existing triage tools have good but not excellent prediction for adverse outcome.

Do Not Attempt Resuscitation (DNAR) status in people with suspected COVID-19: Secondary analysis of the PRIEST observational cohort study - This paper reports the characteristics and outcome of adults admitted to hospital with suspected COVID-19 according to whether they had a DNAR order recorded on or before their day of admission. Early DNAR decisions were associated with recognised predictors of adverse outcome, and were also associated with Asian ethnicity. Most people with an early DNAR decision survived to 30 days and many received potentially life-saving interventions.
RECENT PUBLICATIONS


RECENT CONFERENCES

Fiona Lecky recently spoke at a number of online conferences:

Speaker at the Royal Society of Medicine Friday 22 January 2021 - Breaking barriers of emergency medicine research: How to get published

Speaker at RCEM Friday 15th January 2021 - Essentials for a successful grant application to a large funder

CONTRIBUTE

If you wish to contribute to the next CURE Newsletter please email your submission to m.botting@sheffield.ac.uk