

Leicester Medical Society

Minutes of the Ordinary Meeting Tuesday 22nd October 2019
The George Davis Centre, Leicester

Retiring President Professor Mayur Lakhani welcomed guests and brought to their attention the deaths of Dr Aubrey Stewart, Consultant Anaesthetist and Dr John Wales, Consultant Physician which had occurred since the last meeting. He then introduced Professor Joe Dias and endowed him with the Presidents Chain of Office. Professor Dias thanked Professor Lakhani for his excellent programme and then introduced his four Vice-Presidents who represented the spectrum of training in the local medical community from Phase 1 Medical Student to experienced General Practitioner.

Fighting for Breath - The Life and Times of a National Clinical Director

Professor Mike Morgan

In a brief CV Professor Morgan outlined his career to date. From his background appointment as a Consultant Respiratory Physician at UHL he has held appointments as a Clinical Director UHL and President of the British Thoracic Society. He has just stepped down as the National Clinical Director Respiratory at NHSEngland

The Burden of Lung Disease

Although the NHS was founded within a background of occupational lung disease, TB, a culture of smoking and city smogs there was no priority for respiratory diseases in the planning.

Nowadays 1 in 5 are affected by Respiratory Diseases and many go undiagnosed. The spending from the research budget is only 1.7% compared to 19.6% for cancer. 20% of deaths (over 28 days old) can be attributed to Lung Diseases the major contributors being Lung Cancer 6.2%, COPD 5.3% and Pneumonia 5.1%.

Two conditions serve as examples of the impact on society. COPD affects 3.7 million people but only 1.1 million are formally diagnosed. There are 140,000 hospital admissions and 44,000 deaths annually. There has been a CMOs Report (2004), an RCP audit (2008) and a DOH Report (2011) to highlight the situation. Unfortunately a consultation and impact assessment document 'Liberating the NHS' foundered when austerity measures were prioritised by the Coalition Government 2010. An additional problem was the limitations of the Health and Social Care Act of 2012.

Asthma affects 5.1 million and causes 1,200 deaths per year and precipitates 121,000 A&E attendances and 2.7 million GP consultations.

How the NHS works

In 2013 David Nicholson led the initiative to develop a system reorganised around quality and outcomes, commissioned by clinical leaders with patient and public involvement, responding to local priorities but modified in the light of the difficult financial situation. In 2013 the Health Spend was 8.8% of GDP (compared to USA 17.1% and France 11.6%). An NHS money flow diagram was presented. In 2016/17 £122 billion was allocated by Parliament to the DOH of which £106 billion was allocated to NHSE of which over £75 billion distributed to the Clinical Commissioning groups.

Experiences as National Clinical Director

A Director is involved providing advice to medical bodies e.g. NICE, engaging with politicians, Parliament and the media. The Respiratory Directorate is regarded as 'B' list, that is without resources and which needs to respond when asked. However there is scope for trying to influence policy.

NHS Long Term Plan 2019

Since 2000 there have been number of NHS Plans but these have suffered from being short term projects. Simon Stevens has injected a new way of long term planning to override the vagaries of oscillating political agendas. The directive is to improve the outcomes related to respiratory disease from their current lowly position in the league tables to at least equal our international counterparts. Recognition has been made in the Long Term Plan proposal of the impact of respiratory disease on mortality, rising winter hospital admissions and crises, and the economy as well as noting that the incidence and mortality rates are higher in disadvantaged groups and areas of social deprivation. There are five themes : Prevention, early and accurate diagnosis, optimal treatment with personalised care, population health management and integrated care.

A series of slides with statistical evidence to support the above followed. However the speaker recommended careful analysis to avoid the misinterpretation of some mortality figures which do not use age specific results.

In the NHS Long Term Plan 2020-2030 Respiratory Disease is classified as one of the four clinical priorities. Tackling the problems include addressing prevention and health inequalities, providing increased pulmonary rehabilitation capability and optimisation of medicines, and adopting a lung health check model for lung cancer. It is envisaged that integration of care and population level commissioning are key features. The British Lung Foundation has contributed with 43 Recommendations. The templates have been set.