



HEALTHWISE

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HIGH INTENSITY SPORT AND CARDIAC CONDITIONS

Sneeze the day

All about allergies

Chronic cough:

New approaches



RB&HH
SPECIALIST CARE

WHAT'S NEW

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RB&HH Facebook 15 May 2018

Heart Transplant: A Chance to Live - BBC Two

Using an extraordinary process called ex vivo perfusion, doctors can now reanimate organs, medicate them and keep them alive outside the body, keeping the deterioration process at bay whilst they are transported to the recipient patient.

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RB&HH Instagram 5 Jun 2018

At Harefield Hospital, patients with pleural pathology and those with metastatic tumours in the lung can be treated using less invasive and more effective surgical approaches in the form of video-assisted and open procedures using the new PlasmaJet® System. [#tumour](#) [#lungs](#) [#surgery](#) [#PlasmaJet®](#) [#disease](#) [#london](#) [#healthcare](#)

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RB&HH Twitter 11 Jun 2018

The [@RBHHPrivateCare](#) team are visiting China this month to meet with our partners and build new relationships. Together the teams are exploring how we can collaborate with Chinese hospitals and medical associations to achieve great things and share best practices.

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RB&HH Twitter 12 Jun 2018

The [#Harefield](#) Cardiology Study Day is underway as Dr David Gareth Jones talks us through the management of Atrial Fibrillation [#gp](#) [#education](#)

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Dr Alanna Hare, consultant in respiratory and sleep medicine at Royal Brompton Hospital, shares her best tips for when you're really struggling with your sleep. [#BBC](#) [#shortfilm](#) [#RB&HHSpecialistcare](#) [#expertadvise](#) [#respiratoryconsultant](#) [#sleep](#)

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Royal Brompton and Harefield Specialist Care

SNEEZE THE DAY

All about allergies

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Asthma and allergic rhinitis are estimated to result in more than 100 million lost workdays and missed school days in Europe every year*

Allergy is the most common chronic disease in Europe, and the UK has some of the highest prevalence rates of allergic conditions in the world. Roughly half of the population suffer from at least one allergy.

Allergies occur when your immune system overreacts to substances called allergens. Common allergens that can trigger allergic reactions include pollen, pet dander, and bee venom. People also have allergies to certain foods and medications.

Royal Brompton & Harefield Hospitals Specialist Care offers a wide range of allergy services for adults of all ages, including specialist services for patients with difficult-to-manage allergies including rhinitis (hay fever), anaphylaxis, asthma and food allergies.

ALLERGIC RHINITIS (HAY FEVER)

People with hay fever have inflamed lining in their nose, which causes it to be blocked, running and itchy, and can cause sneezing. Many cases of rhinitis are due to an allergy such as grass pollen. Patients who are referred with rhinitis may be required to take skin prick testing (an allergy test used to find what is causing the allergy), lung function testing, or an examination of the nose using an endoscope.

ANAPHYLAXIS

Anaphylaxis is a serious allergic reaction that can be life threatening or fatal. The reaction happens quickly and usually involves difficulty in breathing, feeling light headed and can lead to collapse. Triggers for anaphylaxis may include food, drugs or stinging insects such as bees, wasps or hornets. The first step for anyone who has had an anaphylactic reaction is to identify the triggers and seek to avoid them. Diagnosis may involve careful provocation testing in hospital, under medical supervision.

ALLERGIC ASTHMA

Asthma symptoms of wheezing, coughing, shortness of breath and tightness in the chest are caused by an allergic reaction to an allergen. Common allergens include dust mites, pets and pollen. There are multiple tests available to diagnose asthma more accurately including lung function tests, histamine provocation tests, or imaging tests such as a computerised tomography (CT) scan of the lungs.

FOOD ALLERGIES

Adults who have a food allergy tend to react to shellfish, fruits, vegetables or nuts. Most patients will be able to identify which foods are causing the problem themselves, however further testing may be needed. This may include a skin prick test or a specific blood test. Once the food allergy is identified, patients will be given written information and advice on how to manage their allergy, and what medication to take if they have a reaction.



Do you have concerns about allergies or asthma?

Royal Brompton & Harefield Hospitals Specialist Care have an allergy testing service along with the country's leading respiratory consultants who specialise in asthma testing and treatment.

To book an appointment, call us on +44 (0)20 3811 6423 or email privatepatients@rbht.nhs.uk

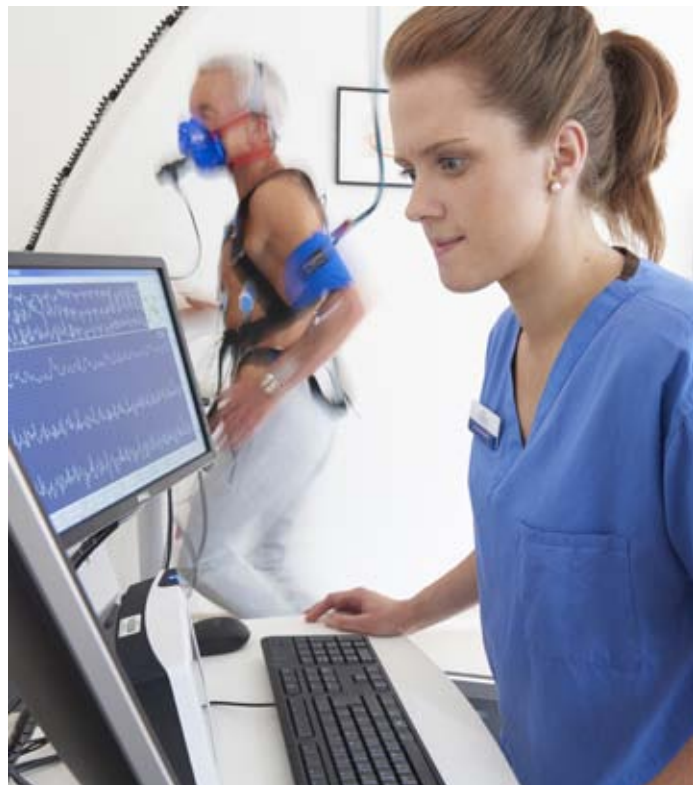
*The European Academy of Allergy and Clinical Immunology (EAACI) Advocacy Manifesto, <http://www.eaaci.org>, April 2016

HIGH INTENSITY SPORT AND CARDIAC CONDITIONS

Is there a link between sport and cardiac arrest? Can high intensity sport cause cardiac events? If you have an undetected cardiovascular condition then it might – but, for the vast majority of people, exercise remains hugely beneficial.

Over the years, a number of high-profile sportspeople under the age of 35 have been affected by undetected cardiovascular conditions. Footballer Fabrice Muamba and cricketer James Taylor both survived their cardiac events but, tragically, there are fatalities, every year in endurance events such as the London Marathon.

“Affected people under the age of 35 could have an inherited condition — although they may be the first person in their family to experience it” says Dr Mark Mason, consultant cardiologist at Royal Brompton & Harefield Hospitals Specialist Care. Broadly, problems result from different types of cardiomyopathy (which affects the heart ventricles) or harder-to-find channelopathies, which are underlying conditions causing abnormal rhythms in an otherwise normal heart. Most over-35s who experience a cardiac event, meanwhile, will do so because of previously undiagnosed coronary artery disease.





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To put it in perspective, around one in 20,000 exercisers per year have a cardiac event.

KNOW THE SYMPTOMS

If you have an undetected cardiovascular condition then longer duration, high intensity exercise could heighten the risk of a cardiac event, particularly in the over-35s. However, Dr Mason stresses, the overwhelming evidence is that exercise is hugely beneficial for the vast majority of people. So it's important to keep active.

“To put it in perspective, around one in 20,000 exercisers per year have a cardiac event,” says Dr Mason. “Instances are probably lower for the under-35s who are generally healthy, and a bit higher for those over 35 with underlying cardiovascular risk.”

Symptoms can include shortness of breath, lightheadedness or blackouts, heart palpitations or chest pain, “which could be tightness, heaviness, or the sensation of having a belt being tightened around your chest,” says Dr Mason.

MAKE LIFESTYLE CHANGES

Over-35s can reduce their risk of cardiovascular disease by eating a healthy diet and cutting out smoking. In the under-35s, however, reducing the risk of a cardiac event is more challenging — particularly if you don't know you have a problem to begin with. “Then we get into the contentious issue of mass screening programmes,” says Dr Mason.

In Italy, for example, anyone between the ages of 16 and 35 has to undergo screening – by law – before participating in sport at any level. “As a result, it's estimated that Italy has reduced its instances of cardiac events by around 90 per cent,” says Dr Mason. However, as high profile cases such as Piermario Morisini and David Astori show, there is still a risk.



Dr Antonis Pantazis
Consultant cardiologist and clinical lead for cardiomyopathy service

Dr Antonis Pantazis is a leading expert in inherited heart muscle conditions (cardiomyopathies). He has a special interest in all cardiomyopathies, most commonly hypertrophic cardiomyopathy, arrhythmogenic cardiomyopathy and dilated cardiomyopathy.



Dr Mark Mason
Consultant cardiologist and director of the heart division

Dr Mark Mason is an internationally-recognised expert in the implantation of pacemakers, implantable cardioverter defibrillators (ICDs) and biventricular pacemakers. He has a special interest in the management of patients experiencing dizziness or blackouts, have weakened hearts or those who have potentially life-threatening rhythms.



To find out more about our endurance sport heart screening, please email privatepatients@rbht.nhs.uk or call +44 (0)20 3553 2615

CHRONIC COUGH: NEW APPROACHES

Having a cough that will not go away can be maddening and exhausting. While an occasional cough is normal, a cough that persists for more than eight weeks is termed a chronic cough and can have a massive impact on day-to-day life.

While managing a chronic cough can be challenging for both doctors and patients, Royal Brompton & Harefield Hospitals Specialist Care have experts on hand who can identify the triggers and provide treatment to lessen and even eliminate symptoms.

Some of the more common problems that trigger a chronic cough include nasal problems, untreated infection, acid reflux or asthma. Treatment targeting these problems doesn't always help the cough go away. This can lead to patients being treated unsuccessfully again and again, resulting in frustration with the lack of progress.

A new diagnostic tool, fractional exhaled nitric oxide (FeNO) testing is available at the Royal Brompton Hospital and RB&HH Specialist Care Outpatients and Diagnostics, at 77 Wimpole Street. FeNO testing involves the patient breathing in to a hand-held device used to measure the levels of nitric oxide in their breath, providing physicians with a better diagnostic tool for respiratory conditions. During inflammation, the levels of nitric oxide (NO) released from the epithelial cells of the bronchial walls are higher than normal. The concentration of nitric oxide in exhaled breath is known as fractional exhaled nitric oxide (FeNO), and can help to identify airway inflammation.



Above: FeNO testing device



Patients who come to Royal Brompton & Harefield Hospitals will meet with a specialist who will examine them, and where necessary, recommend diagnostic tests to confirm or help with a diagnosis and treatment plan. These could include lung function tests, x-ray, computerised tomography (CT) scan, or fractional exhaled nitric oxide (FeNO) testing (see left).

The consultant will provide a treatment plan to lessen or eliminate the cough. Treatment often includes a combination of both medication and therapy.

“ **Some medications have been found to reduce the cough frequency in patients with refractory chronic cough by up to 75%** ”

Some of the new pharmacological developments for treating chronic cough include drugs which target nerve sensation. These drugs can be particularly effective as people suffering with chronic cough often report uncomfortable nerve type sensations in the throat and upper chest.

Neuromodulators such as gabapentin can be effective in treating chronic cough, significantly improving cough-specific quality of life.

Speech language pathology is also an effective management intervention for chronic cough that persists despite medical treatment. This can aid in the improvement of symptoms by suppressing the cough and increasing the cough threshold.

Consultants work to find the best approach for the patient to improve quality of life and help the patient get back to normal.



Dr James Hull
Consultant respiratory physician

Dr James Hull's areas of expertise include asthma, cough, shortness of breath and identifying the reasons for difficulty in exercising.



For more information on our chronic cough services please email privatepatients@rbht.nhs.uk or call +44 (0)20 3811 6423



RB&HH

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heart and lung care**

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