# Allied Health Research News, Issue 61, Dec 2022

## 2022 Allied Health Research Forum

**022 has been another successful year for research from our allied health clinicians which was showcased at the recent annual Allied Health Research Forum on November 10th.**

Nearly 100 clinicians tuned in to the virtual event, which was a great opportunity to reflect on the fantastic achievements of our allied health clinicians and scientists over this past year. There was broad representation across the allied health disciplines, with a variety of presentations on display.

As in previous years, the presentations took the form of a three minute presentation competition. Presenters rose to the challenge of delivering their work to the audience in precisely 3 minutes and a single slide.

Our judging panel, consisting of Associate Professor Casey Peiris of La Trobe University and our Eastern Health Director of Research Professor David Taylor, awarded the prize for best presentation to dietitian Matilda Bissett. The People’s Choice was awarded to physiotherapist, Emma Parsons.

If you missed out on attending the forum and would like to see one or more of the presentations, the recording of the event is available [here](https://cloudstor.aarnet.edu.au/plus/s/vulwnhHHImo9IGF) along with a program with time tags for each of the presentations

Our thanks to the organisers, our host Nick Taylor, our judges, presenters and audience for a wonderful celebration of Allied Heath Research.

**¶ Winner: Best Presentation**

**Tilly Bissett:** High Energy Meal Plans in Paediatric Eating Disorder Patients

**¶ Winner: People’s Choice Award**

**Emma Parsons:** A Neuro Student Led Ward -   
Two Birds With One Stone

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**Belinda Ross:** Health Passports: the tool to understand needs and preferences of people with disability

**Christina Georgiadis:** Disability awareness education - filling the gaps

**Christine Lee:** One cup of coffee with Cardiac Stress Test to go

**Ellie Ross:** Expanding our scope - Dietitians prescribing parenteral nutrition

**Georgia Stringer:** Implementation of ERAS

**James Gooden:** Maybe it's not the meth?

**Kate Lipson:** Use of sensory modulation interventions to reduce behaviours of concerns amongst hospital patients with dementia: A systematic review

**Kelly Papatolicas and Jessica Clingin:** Dorsal blocking orthoses for proximal interphalangeal joint (PIPJ) volar plate injuries: A retrospective cohort study investigating the impact of PIPJ angle on patient outcomes.

**Kelly Stephen:** The patient experience of a bed-chair sensor alarm in falls prevention in a subacute ward setting.

**Michaela Watts:** Eastern Health High Risk Foot Service Inaugural Database Audit and Reflections

**Susan Hyland:** Screening for balance in a falls clinic over 6 years

**Christy Walsh:** Signs of the times: Auslan access in acute healthcare

**Annie King:** The role of the GEM@Home pharmacist in the provision of medication related interventions

**Ricky Hansen:** MyTherapy

**Deena Tumber:** Exploring the value of patients’ own medications as an information source for   
completing medication histories.

**Stefanie Carino:** The origins of hospital food: where does it come from and what do staff,   
patients and suppliers think about local food?

## 3 Minute Presentation Competition Winner: Can Hospitalized Eating Disorder Patients be Managed Safely on Standard Carbohydrate/ High Energy Meal Plans?

**A transcription of Matilida Bassett’s inspiring winning three minute presentation from the Allied Health Research Forum. Congratulations Tilley!**

“I want you to imagine you are a child again, and that you have been finding it difficult to eat your food. Every time you try and eat you feel guilty, you feel like you are making yourself fat. At meal times you can’t eat anything, you’re upset and your parents are worried about you. Because they are so concerned, they take you to Box Hill Hospital.

You’re admitted to Eastern Health Box Hill Hospital’s Paediatric ward under the Eating Disorder team. You are told you have an eating disorder called Anorexia Nervosa and that food is your medicine. You have to eat the food on the meal plan prescribed by your dietitian so you can get well enough to go home. You do not like being in hospital. You have to share a room with another patient, there are loud noises and crying. You don’t sleep well. You miss your parents desperately; all you want is to go home

You meet with the Eating Disorder Team and the first question you ask them is; how long do I have to be here??

At Eastern Health the average length of stay for Paediatric Eating Disorder patients used to be 13.3 days. In 2021 members of the Paediatric Eating Disorder team, including myself who is the dietitian, and the consultant, performed a literature review and found that high energy meal plans were safe to be implemented in Paediatric Eating Disorder patients. We created new high energy meal plans and implemented them on our ward.

We then conducted a retrospective audit for 87 patients. Half of these patients were on the previous low energy meal plan, and half were on the new high energy meal plans, which contained a 25% increase in energy content. The high energy meal plan was found to be easier for patients to eat, with a decreased use of nasogastric tubes as an alternative source of providing nutrition.

The low energy meal plans were found to have an average weight gain of 260g/day, whereas the new high energy meal plans were found to have an average weight gain of 330g/day. This might not seem like a lot, however it decreased the patient length of stay by 2.7 days.

To a scared, lonely and confused child, getting home 2.7 days earlier makes a huge difference; both to their mental wellbeing, and to their parents mental wellbeing.

Getting home 2.7 days earlier also makes a huge difference to Box Hill Hospital. The average cost per Paediatric bed, per night is $1400. That means the new meal plans are saving the hospital $3780 per Paediatric Eating Disorder patient.

At Eastern Health our priority is what is best for our patients, and these high energy meal plans benefit both patients and their families as well as assisting in reducing hospital bed pressures and costs.”

## Mental Health Research Forum 2022

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**The Eastern Health Mental Health and Wellbeing program presented the 4th annual Mental Health Research Forum held 4th October, online.**

The Forum was attended by over 115 participants, and showcased 9 research presentations, where allied health was well represented.

Special mentions go to **Dr Paul Sadler** for the Early Career Researcher Prize, and to **Ms Cathy Ngo** and **Dr Rohit Sawhney** for most popular presentation.

Congratulations to all participants!

## Eastern Health podiatrists collaborating in new multi-site project

Easter Health podiatrists are about to join an exciting new randomised controlled phase 1 study to investigate safety, tolerability and efficacy of CYP-006TK in adults with diabetic foot disease.

Patients with foot ulcers will be randomised to receive a treatment involving stem cells seeded onto a plasma polymer-coated silicon dressing, or a control condition of standard of care for ulcer management.  Wounds will be photographed and measured by podiatrists at each appointment to monitor wound reduction.  The clinical photographs of the wounds will be assessed by trial staff who are blinded to group allocation.

The study will led by Prof Robert Fitridge, a vascular Surgeon from Central Adelaide Local Health Network. Eastern Health’s Endocrinology team were approached to participate as an additional trial site. The trial is currently under ethical review, with the intention to begin recruitment in January 2023.

Inclusion criteria is quite specific and potential participants will be identified from existing high risk foot clinics at Eastern Health. For each patient, the journey through the trial will include a screening period of approximately 2 weeks, a four week treatment period and follow-up over a total period of 24 weeks.

This is an exciting opportunity for the Eastern Health Endocrinology, Clinical Research Coordinator and Podiatry teams, and we look forward to bringing further updates as the trial gets underway.

## Euan’s Musings

***Euan Donley works with the Psychiatric and Emergency Response Team and is a regular columnist for Allied Health Research News.***

So as Christmas approaches I thought it would be a good time to have a think about getting through the Christmas period for the budding researcher.

I should add, I have worked my fair share of Christmas days working in ED.  Whilst this can be a pain, it does stop the whole argument about Christmas day hopping unless everyone is keen on a lovely pre-packaged Zouki dinner.  Over the years on Christmas day I have been fortunate to enjoy cold chicken schnitzel wraps, soggy multi-grain turkey and cranberry sandwiches, and if I am really feeling festive, hot chips.  On Christmas day, if they feel generous, you can add cold gravy. Ho Ho Yippity Ho.

I can today review my own social constructivist longitudinal study of this over a seven-year period at 12-month intervals and can share my findings that Santa will not bring you a finished thesis or research report on Christmas day.  I can also reveal that the Ethical Review Manager will not magically add all of your pre-online only ethics applications to their system.  Sadly, there is no such movie, Miracle on Arnold Street.

Family tend to look at you blankly (more so) when you ask them to buy you the latest SPSS statistical analysis package for Christmas.  And they walk away when you tell the base package is one grand per year. I can also confirm your partner may point to school fees and children’s clothing as more important than SPSS, but will be slightly relieved you are finally not asking for the latest Star Wars toy.  Which, by the way, must be an important methodological approach to getting more Star Wars toys.

I can also save you the time and experience when Christmas shopping.  You can’t really find any gifts suitable for your 8 and 10 year-old children in the university bookshop. This is not through my lack of effort at highlighting this to the bookshop employee who just looked away mumbling something about ‘$20 per hour not being nearly enough’.  And if you are thinking of giving your partner some reading material as a present, your pre-submitted literature review with an invitation to make comments does not cut it.

I guess, research never really takes a break.  Especially if it is part of a higher study. But it is important to take some time away from it. Myself, I have come up with what I think are some decent ideas when I have walked away from the research for a few days.

So if you are not working, and you have some time, take a few days off.  Enjoy the little but important moments of life in whatever Christmas means to you.

*Dr Euan’s musings are now available as an original NFT for a large price.  A great Christmas idea.*

## International researcher on patient flow presents at Eastern Health

Wednesday 7th December was supposed to be the day of our annual Eastern Health Research Forum, but unfortunately COVID once again disrupted our plans. However, we were still fortunate to receive a visit from our international guest speaker Dr Sara Kreindler.

Dr Kreindler is a health services researcher from the University of Manitoba in Canada, with expertise in patient flow. She was in Australia as a keynote speaker for the Health Services Research Association of Australia and New Zealand’s National Conference in Sydney (se p.5) and agreed to add Melbourne to her itinerary to speak at the Eastern Health Research Forum. While the forum couldn’t go ahead in person, we were fortunate to be able to experience her presentation as a webinar.

Dr Kreindler shared some valuable insights into her research on methods to improve patient flow through health service systems. She talked about the impacts of gatekeeping, and the paradoxes created by the simultaneous arrangement of services both by geographical sites and clinical programs.

A key take away message was the need to consider the needs of the population being served by a particular health service. Different approaches are needed for populations with similar, well defined needs (such as those managed in clinical programs) and those with disparate needs, typical of site or location based services (such as emergency departments).

Dr Kreindler’s talents don’t stop at academic research. She also shared a brief preview of the online musical that she has written and produced, following the adventures of starry eyed policy advisor Larry as he tries fix Canada’s healthcare system. His hilarious journey is told in 11 short episodes and is well worth a look!

## PhD Spotlight: Lyndon Hawke Physiotherapy

Lyndon Hawke is a PhD candidate looking at ways of improving physical activity levels after knee joint   
replacement. Lyndon is a physio-therapist and will be familiar to many at Eastern Health from his long period of service with our community rehabilitation program. He is undertaking this body of work with the EH Allied Health Clinical Research Office, La Trobe University and the Centre of Research   
Excellence in Joint Replacement based at St Vincent’s Hospital.

During this time, Lyndon became aware of evidence demonstrating that people often don’t return to   
adequate levels of physical activity after a hip or knee joint replacement. Consequently, these people are at an increased risk of serious health conditions, such as cardiovascular disease. The thought that all the hard work that went into providing rehabilitation after a joint replacement may be wasted when that person develops further health issues served as inspiration to study the topic further as a PhD.

Lyndon’s work began with an observational study that found people’s physical activity levels increased immediately after a joint replacement, but their activity plateaued after finishing outpatient rehab-ilitation. This occurred despite a continuing increase in their capacity to do more activity, suggesting that activity levels were more likely linked to patterns of behaviour, rather than physical capacity.

This finding was used to inform a systematic review of the effect of behaviour change interventions for improving physical activity after joint replacement. The review found that these interventions show promise but have not successfully demonstrated consistent improvements in physical activity.

Lyndon then went on to complete a qualitative study to find out what motivates people who have had a knee replacement to be active. He found that people were motivated by what is important to them rather than a desire to improve their health outcomes. For example, they were more likely to be motivated to use their new knee to participate in the activities they enjoy with family and friends, rather than to meet physical activity recommendations.

Lyndon’s final project is looking at whether health information presented in the form of an infographic, co-designed by people with lived experience of knee replacement (below), is an effective way to increase people’s knowledge of physical activity after joint replacement. Stay tuned for the results, due next year!

## Conference News

**Eastern Health was well represented at the recent HSRAANZ Health Services Research Conference held in Sydney between the 30th November to 2nd December.**

Katherine Harding was the scientific committee chair and the program did not disappoint with highlights from A/Prof Sara Kriendler from University of Manitoba in Canada on building research bridges with policy makers and a high calibre 3MT competition featuring our own Dr Annie Lewis. Our EH researchers also flexed their social prowess, winning the Early Career Researcher Trivia night and starting the best (only) dance party the University of Sydney’s Great Hall has ever seen!

Our EH presentations included:

· Dennett, A. Going digital in a hurry: A process evaluation of the rapid implementation of a cancer telerehabilitation program

· Gohkale S. Hospital Length of Stay Prediction Tools for General Surgery Populations and Total Knee Arthroplasty Admissions: Systematic Review and Meta-Analysis

· Harding K. Training health service champions: An innovative approach to reduce health service waiting lists for community based paediatric therapy services

· Lewis, AK, Taylor, N., Carney, P., Harding, K. Reducing the waitlist in outpatient clinics: Let's Renovate!

· Lewis, AK Taylor, N., Carney, P., Harding, K. Specific Timely Appointments for Triage (STAT) to reduce wait times in a medical outpatient clinic

· Ngo K. Validation of a Pharmacy High Needs Criteria; a tool to identify hospital inpatients at higher risk of medication-related problem

The growth in Allied Health participation in this event over recent years is notable, and reflects the important contribution that Allied Health professionals make to health services research. The next HSR conference will come around in 2024, so look out for it as an option to share your work with an audience beyond your discipline specialty.

**Other recent conference presentations:**

· Gooden, J R., Petersen, V., Bolt, G. L. Curtis, A., Manning, V., Cox, C. A., Lubman, D. I., Arunogiri, S. (2022) Beyond the ice: Differences in biopsychosocial risk factors and neuropsychological profiles among individuals with histories of alcohol or methamphetamine-polysubstance use. Paper presentation at the National Centre for Clinical Research on Emerging Drugs Annual Symposium, Canberra, Australia, 2022

· Lee, Vincci The application of the Ottowa Charter for Health promotion in acute psychiatry. Nov 25, 2022. OT Australia Mental Health Forum, Sydney 2022

## Allied Health Research Achievements

**Publications**

**Bolt, GL**, **Piercy H**, **Barnett A**., & **Manning V** (2022). ‘A circuit breaker’ – Interrupting the alcohol autopilot: A qualitative exploration of participants’ experiences of a personalised mHealth approach bias modification intervention for alcohol use. Addictive Behaviors Reports, 16, 100471.

**Dennett AM**, Porter J, Ting S, **Taylor NF**. (2022) Prehabilitation to Improve outcomes afteR Autologous sTem cEll transplantation (PIRATE): A pilot randomised controlled trial protocol PloS One [In press

**Tan G,** Peiris CL, **Dennett AM.** Cancer survivors maintain health benefits 6 to 12 months after exercise-based rehabilitation: A systematic review and meta-analysis. Journal of Cancer Survivorship. [In press].

**Thompson A**, **Harding KE**, Khalil H, **Taylor NF**. The impact of outsourcing bed-based aged care services on quality of care: a multisite observational study. International Journal for Quality in Health Care   
[Early Online]

**Sullivan R**, **Harding KE**, Skinner I, Hemsley B. Falls in patients with communication disability secondary to stroke. Clinical Nursing Research. [In press]

**Carino S, Collins J**, Malekpour S, Porter J. Harnessing the pillars of institutions to drive environmentally sustainable hospital foodservices. Frontiers in Nutrition. 2022 [Early onine]

**Cook N, Collins J,** Goodwin D, Porter J. Factors influencing implementation of food and food-related waste audits in hospital foodservices” Frontiers in Nutrition [In press].

**Dennett AM** et al. Embedding lifestyle interventions into cancer care: has telehealth narrowed the equity gap? JNCI Monographs [In press]

## Trials now recruiting

**TeleCaRe:** A randomised controlled trial of exercise based cancer rehabilitation for   
cancer survivors. Send referrals to telecaretrial@easternhealth.org.au

**CanFit:** A randomised controlled trial of a behavioural intervention for hospitalised patients with cancer. Recruiting from ward 4.1 BHH. Send referrals to canfittrial@easternhealth.org.au

**AAT-APP trial:** Recruiting individuals 55+ years looking to reduce their drinking.   
Participants will be randomly assigned to one of two different types of app-delivered brain training. The intervention Involves downloading the app and completing   
training weekly for four weeks. Participants receive $40. For further details email:   
Georgia.Bolt@monash.edu

## Upcoming opportunity

**HIPSTER Trial –** Hip Fracture Supplemental Therapy to Enhance Recovery, Multicentre trial led by Monash University commencing at BHH in early 2023. 12 month positions to be advertised for intervention therapy staff shortly.