





Clinical Research Network West Midlands

Coventry and Warwickshire VTS, CRN West Midlands and Warwick Medical School

'Primary Care Research and Audit in Coventry and Warwickshire'

11<sup>th</sup> July 2019

**Abstract Submission Form - Deadlines -** April 29th 2019 for oral presentations and May 13th for poster presentations. A poster/oral presentation is guaranteed. **Prizes will be awarded for best poster and best oral presentation in student and VTS categories.** 

PRESENTER'S DETAILS			
<b>Title</b> (Prof, Dr, Mr, Mrs, Miss)	First Name		Surname
Dr	Mishkat		Shehata
Place of work/study			
Warwick Medical School			
PRESENTATION DETAILS (total max 250 words - not including title)			
<b>Co-Authors</b> Dr Emma Grennell		Title of Study	
		Lifestyle medicine & social prescribing	

## What's the problem you are tackling? (Background)

Chronic disease costs the NHS circa £161 billion per annum. Figures suggest that 40-90% of this is preventable. 80% of GP workload is due to lifestyle related disease. Lifestyle medicine is an evidence-based branch of medicine that addresses the causes of chronic diseases such as nutrition, sleep, exercise, stress management and environmental exposures. Social prescribing has been included in the NHS long-term plan 2019 and it adds practical leverage to the themes of lifestyle medicine. Social prescribing has been shown to reduce GP and secondary care attendance by 21%. GP trainees are not equipped with the knowledge pertaining to lifestyle medicine and social prescribing to be able to manage their workload appropriately.

## How did/will you do it? (Method)

We invited 120 GP trainees from the West Midlands deaneries. Funding was granted from HEE and it was study leave approved to facilitate attendance. We ran 12 lectures in total including practical workshops and lunch time activities. Handouts were circulated via a QR code on the day.

## What did you find? (Results)

The conference was well received, with promising informal feedback on the day and suggestions to re-run the event and extend it to other doctors and AHPs. Formal feedback is currently pending. From an organisational point of view, lessons on timetabling, lecture content, and time keeping were learnt.

## Why does this matter? (Conclusion)

Given the economic and clinical burden of lifestyle related diseases, it is prudent to equip GP trainees with the knowledge, skills and understanding of lifestyle medicine, social prescribing and related local services. This can help to improve holistic patient care and better manage chronic disease.