Obituary for Anne Szarewski

“Women’s Health” mourns the loss of Anne Szarewski, who died suddenly and unexpectedly, at home on Saturday 24th August 2013.

Anne, who was Editor in Chief of the Journal of Sexual and Reproductive Healthcare, was unique in many ways. She was a true character, who will never be forgotten. As a result of her hard work and enthusiasm she moulded development and delivery of contraceptive care and immunization against HPV both in the UK and abroad. She was a role model for the medical profession and her guidance has enabled many women to receive the care necessary to improve the quality of their lives.

She was selflessly supportive to her colleagues for the ultimate benefit of the patient. I am sure that I share with many of her colleagues a sense that this is a loss that we will never truly recover from.

Her intellect, wit and enthusiasm for progress live on. She will be missed more than words can say.

Primary Care LARC Delivery in England

Thank-you very much to everyone who completed the survey we attached to the e-letter last month. We have had a tremendous response to this and collected information from around the country about what is happening to primary care delivery of LARC provision. The overriding response so far is that the future is uncertain. This has significant implications about whether to continue training the future workforce and on any service development.

I have attached the survey link again to give more people an opportunity to complete this and we will share the results in a future e-letter. The aim is to use this information to raise awareness to the RCGP and other relevant organisations about our concerns.

To complete the survey please [Click Here](#).

For those of you who are currently delivering LARC services in your primary care settings please note that not only should we be funded for the work delivered by the local authority with whom you have your current contract but we should also be getting the cost of the contraceptive devices reimbursed. Refer to page 40 of the Dept of Health a Framework for Sexual Health Improvement in England document of March 2013 regarding this. See attached or [Click Here](#). It is important that this money is reimbursed appropriately so that the LAs do not see this as an under spend and
The PCWHF is becoming a useful network for primary care clinicians to share concerns such as this. If you have already developed a mechanism to claim the LARC costs from your LA we would like to know how so that we can share it with others, email enquiries@pcwhf.co.uk. If you have not been made aware of this then you should contact your public health lead for sexual health in your LA or a CCG board member without delay.

**Future of the e-letter**

Unfortunately because of the publishing costs the latest edition of the Primary Care Women’s Health Journal will be the last. I am sure you will all join me in congratulating Sherborne-Gibbs on the fabulous materials that they produced and to Sue Lyon the managing editor who made the journal such a useful, practical resource.

We now aim to focus activity through this e-letter and other on-line activity. If you have any interesting papers to share or you would like to write case studies or share any developments that you have made in your local workplace please forward these to enquiries@pcwhf.co.uk and we will include them in this monthly communication.

**PCWHF Annual Conference**

**Registration:**
The focus at our annual conference will be on ‘Keeping Women’s Healthcare on the agenda’ and boasts an impressive line-up of key note speakers and a powerful agenda, which should prove both thought-provoking and beneficial for all those attending. The agenda has been designed to be relevant for healthcare professionals working in a primary care setting. Places are limited and with over 80 registered to date, we will soon be reaching capacity so if you wish to attend please register now to avoid disappointment.

The conference will be held at The Cavendish Conference Centre, London on Thursday 10th October 2013.

Delegates will be eligible to gain up to 5 hours of CPD and reflective learning.

To view the agenda and to book your tickets, please Click Here

**GP Hot Topics**

These workshops will assist GPs to resolve specific patient issues by using case studies on a variety of patient types in a particular therapy area. Five hours of CPD are available from this day. Courses are limited to 30 delegates on each course, to maximise interactive learning opportunities, please register now to secure your place. Feedback from the last event included:

- “All the sessions had practical “take home” messages”
• “All sessions were informative; this was an excellent day, very enjoyable and interactive”
• “Very informative, good coverage of the relevant subjects”
• “What’s new in Women’s Health was very valuable and well presented”
• “Dr Connolly is fantastic! Course was relevant to general practice with all lectures designed to answer questions for GPs”

Women’s Health

• Wednesday 16th October, London
• Wednesday 27th November, Manchester

For more information please Click Here

Cervical Screening Campaign

Cervical cancer affects over 3000 women in the UK every year with three deaths every day. Early detection and treatment via the UK Cervical Screening programme save an estimated 5000 lives annually. However one in five women ignores their cervical screening invitation. And in the under 35 age group this rises to one in three. Jo’s Cervical Cancer Trust is looking to recognise successful cervical screening campaigns and encourage organisations to share best practice by entering the 2013 Cervical Screening Awards.

Application forms can be downloaded at www.jostrust.org.uk/screeningawards. Closing date for entries is 30th September 2013.

New Products on the Horizon

A recent paper from the International Journal of Women’s Health is attached:

Management of osteoporosis and menopausal symptoms: focus on bazedoxifene/conjugated estrogen combination.

The conclusion of this is that treatment with BZA/CE demonstrated clinically meaningful improvements in vasomotor symptoms and vulvovaginal atrophy as well as a protective effect on the skeleton in postmenopausal women seeking treatment for menopausal symptoms, while protecting the endometrium. BZA/CE also showed significant improvements in tolerability compared with HT, as measured by lower rates of uterine bleeding and breast pain. BZA/CE treatment had an effect on breast density similar to placebo. These clinical benefits were associated with an acceptable safety profile. No apparent increased risk for serious adverse events, such as venous thromboembolism, cardiovascular events, endometrial cancer, or breast cancer, was observed with either dose strength of BZA/CE. BZA/CE is an alternative option for treating non-hysterectomized, symptomatic postmenopausal women.
Risk of Uterine Cancer in Symptomatic Women in Primary Care

Uterine cancer is the fourth most common cancer in women in the UK, with approximately 7700 new diagnoses and 1700 deaths annually. The attached paper aims to identify and quantifies features of uterine cancer in primary care by doing a case control study using electronic primary care records in primary care in the UK.

Method: Putative features of uterine cancer were identified in the year before diagnosis, and odds ratios (ORs) calculated using conditional logistic regression. Positive predictive values (PPVs) were calculated for women who consulted.

Conclusion: This study confirms the importance of several features, particularly postmenopausal bleeding, for uterine cancer. Haematuria is an important risk marker. The results of this study may inform GPs in the selection of women for investigation and should assist the NICE in their update of GP referral guidance.

Vitamin D

As the weather changes I am sure we are all going to be reaching for our vitamin D supplies. This product currently seems to be the panacea for all ailments. A paper on the importance of this in antenatal care is also attached.

Tip of the Month

Save hours of time in menopausal consultations by advising our women to consult the website Menopause Matters so that they can make informed choices about their management options. www.menopausematters.co.uk

Love, Life and LARC Campaign

The Primary Care Women’s Health Forum is supporting the campaign – Love, Life & LARCs

New research, commissioned by MSD has revealed ongoing access issues for LARCs in the UK with over two thirds (70%, n=2,089) of women surveyed feeling they had not been provided with enough information about these contraceptive methods.1 In an effort to raise awareness of LARCs, MSD in partnership with the FPA has launched the Love, Life & LARCs campaign. The Love, Life & LARCs campaign aims to address misconceptions and encourage more informed discussions between women and their healthcare professionals about their contraceptive options.
“Every woman in the UK should have awareness of and easy access to the most suitable contraception option for her,” commented Natika H Halil, Director of Communications, Health and Wellbeing at the FPA. “Comprehensive, integrated LARC training is essential to enabling practitioners to be able to deliver the full-range of contraceptive methods. In those practices where LARC fitting is not currently available, GPs and nurses should make sure they know their local referral pathway to allow their female patients access to the most comprehensive contraception service possible.”

As part of the campaign, MSD and the FPA have created posters that will be distributed in GP surgeries. Women will also be able to access more information at www.talkchoice.co.uk. The consumer launch of Love, Life & LARCs will commence on 9th September.

1. Love, Life & LARCs consumer research. Carried out July 2013 by OnePoll. Research funding supplied by MSD.