



Hemisphere News

Volume 32

October November 2012

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It has been just over a month since I returned from Hobart after attending our national conference as well as the State Delegates meeting and AGM. It is always wonderful meeting with like minded colleagues. It was great observing the enthusiasm still remaining in the long serving ANNA members as well as that evident in our newer members. The conference was an opportunity to learn something new and share with others what we do within our own working environment.

ANNA NSW was able to award two John Sheard scholarships of \$1000 each this year as there were no applications from 2011. The recipients were Vicki Evans and Caleb Ferguson who presented at the Hobart conference so be sure to read their reports in the newsletter. Both gave excellent presentations.

One initiative we are looking at trialling at state level is a mentoring program for neuroscience nurses within the state. Caleb Ferguson presented this to the national executive in Hobart and we are planning to pilot the program next year so will keep you posted on that early in 2013.

We are very interested in jointly sponsoring a symposium in 2013 and would encourage other hospitals interested in this arrangement to contact me as sharing the responsibilities is beneficial to those involved in the planning.

CONTACTS

If you have any unanswered questions please email me , Jeanne Barr at JBarr@nsccahs.health.nsw.gov.au

Or

Newsletter editor ,Shae Miller, at SHMil-ler@nsccahs.health.nsw.gov.au

When I first moved to Australia almost 20 years ago I had to learn the "lingo". One Aussie expression I love is 'sticky-beak'. Well, ANNA NSW is holding the next education session at the *new* Royal North Shore Hospital so everyone is invited for a sticky-beak. The details are located elsewhere in the newsletter so take note and put 28 November in your calendar.

Have a wonderful holiday season and see you next year!

Jeanne Barr
NSW State Delegate



The Australasian Journal of Neuroscience needs YOU!

It's good for the profession, it's good for you!

The AJoN is published in May & October.

Deadline for submission of articles:

1 March for publication in May

&

1 August for publication in October.

Manuscripts are to be in MS Word format. Help is available to assist you if needed.

More information available on the ANNA website
www.anna.asn.au

Email to the Editor - Vicki Evans -

editor@anna.asn.au

See you in PRINT!



From the Editor

Getting to conference, seminars and other opportunities for ongoing professional development seems to be harder and harder as time goes on. This is real pity as these events can be both educational but also motivational and rewarding. Just read the following conference reports.

They can be the spark that spurs you on to do more or better as you learn what can be done despite the hurdles that can be put in the way. It can be the opportunity to spread your wings and present something that you or your unit have achieved or demonstrated. It can simply be the time you overcome those nerves about public speaking.

These events are also a good opportunity to network and meet like minded people. There's often an element of fun to them as well, just ask anyone who went to this years dinner at Cascade Beer!

One of the ways that can help you attend these events, at least from a monetary point of view , is to apply for any of the number of scholarships that are around such as those listed below. The task of applying is not as difficult as you think . Try it and maybe we'll see you in Sydney or even Japan next year.

Shae

Scholarships to attend conferences

- <http://www.health.nsw.gov.au/nursing/scholarships.asp>
- http://www.health.nsw.gov.au/resources/gmct/neuro/guidelines_pdf.asp
- Applications for GMCT funding to be in by the **LAST Friday** in Feb, May, July, Aug, and Nov
- John Sheard Travel Award through ANNA -Applications to be in by the **last working day** in August at <http://www.anna.asn.au/index.php?page=nsw-branch>

Conference Reports-1

Insights into the ANNA Conference – Tasmania 2012.



Hobart was the host city for this year's ANNA Conference. Although cold and blustery, the location was wonderful. There was even a dinner and tour of the Cascade Brewery! Although no "devils" to be seen around the hotel, Linda Nichols had conveniently hidden 40+ inside the Program Book for everyone to find....yes, the "The Devil was in the Detail"!

The topics were thorough and peaked our interest. Some of which are outlined below -

Paediatric Head Injury - Dr Reece Sher.

Dr Sher spoke about the impact of head injuries being a major source of morbidity and mortality in trauma and neurosurgery and the aim of treatment being to prevent secondary injury. He presented a rare case of trauma and severe head injury in a 12 year old boy who defied all odds to make a magnificent recovery. This case demonstrates how good multidisciplinary management can lead to extraordinary outcomes and also questioned ethics and the need to keep trying no matter what the odds, especially in paediatrics.

"She'll be right mate – it's just a concussion" - Vicki Evans

Concussion, once thought to be insignificant has over the last year been drawn into the public arena as something a lot more than "insignificant". Television dramas and news coverage have covered this type of insidious brain injury, showing that it has ramifications for the individual's future – including schooling, work life and lifespan. Whilst current technology can highlight significant head injury showing up lesions such as extradural haematomas, subdural haematomas and the like, concussion does not impact visually on a scan – yet.

Sporting codes have become drawn into the concussion debate and as of this year, the NRL, AFL and American NFL all have guidelines for concussion identification and treatment management plans. Whilst this is a step in the right direction, the education department could do with a more in depth plan. The main message that needs a platform is that it is not alright to send a player, no matter what age, back into play if they still have neurological symptoms – "she (won't) be alright mate"!

Better the Devil you Know? 'Boswellia serrata' as an alternative to 'Dexamethasone' to treat peritumoural oedema. - Kylie Wright

Kylie discussed peritumoural oedema as being one of the most common complications of a brain tumour. Such oedema and its inflammatory processes are major contributors to morbidity/mortality and the most common treatment has been the use of the corticosteroid - Dexamethasone. Despite significant adverse side effects such as cushingoid habitus, immunosuppression, hyperglycaemia and proximal myopathy, dexamethasone is widely used and considered effective in neuro-oncology management. However, Kylie suggested that there could be an alternative - Boswellia serrata, which is a traditional herbal extract of the Indian frankincense tree. Boswellia serrata is virtually unknown, however clinical research has shown its use can significantly reduce cerebral oedema with less adverse effects.

"A Pain in the Neck!" The Challenges of C-spine fractures in the Elderly. - Kathleen Naughton

As the population ages, cervical spine fractures in the elderly carries a high risk of morbidity/mortality. The elderly have changes in bone structure, physiologic reserve and accumulated chronic illnesses. Management of such injuries in this population, with prolonged bed rest is recognised as poorly tolerated. Stabilising the c-spine includes strategies such as surgery, halo traction and/or rigid collars.

Kathleen discussed, through a case presentation, a 91 year old female's recovery from a c-spine injury with associated neurological deficits sustained from a fall at home. This case study highlighted the potential and actual problems faced by the elderly post cervical spine injury and the need for staff to be aware of the needs of this population.

Inaugural ANNA Louie Blundell Prize Winner: - Glioblastoma Multiforme - Jessica Child

Glioblastoma Multiforme (GBM) is the most common and aggressive adult brain tumour that will result in loss of life. The diagnosis is frightening to the patient and family, and the adjustment and adaptation to cognitive and neurological impairments can be stressful. Jessica discussed the importance of managing the symptoms associated with the illness and side effects of treatment to enhance quality of life and to provide emotional support to the patient and their family throughout the illness.

Can nursing care decrease death & dependency? Final results of the Quality in Acute Stroke Care (QASC) Trial – Simeon Dale

The Quality in Acute Stroke Trial (QASC), was a single blind cluster randomized controlled trial of a multidisciplinary implementation intervention, targeted clinicians' evidence-based management of fever, hyperglycaemia and swallowing dysfunction following acute stroke. A total of 1699 patients participated from 19 NSW acute stroke units (ASUs).

Conclusion: Patients who received care in ASUs delivering the multidisciplinary intervention demonstrated an absolute reduction for 90-day death or dependency of 16%. "This finding is of international significance, made all the more compelling in that it resulted from teamwork and evidence-based nursing care".

What the hell is a Twitter? The potential uses of social media in neuroscience clinical care. - Caleb Ferguson.

This paper was thought-provoking and although not a winning paper, deserves mention in that Caleb questioned the future for nursing in regards to social media (Facebook, Google+, LinkedIn, Pinterest, Yammer, Tumblr, YouTube, Flickr, Instagram, Wikipedia, Twitter) and its use. He stated that whilst the health field has been slow to catch onto the boom, the potential uses within clinical care could be extremely innovative and should be harnessed.

POSTER PRIZE: Stimulation: How's your technique? - Danielle Wheelwright / Stephanie Gilmore

This poster was visually appealing, uncluttered and to the point. Their aim was to compare the knowledge and practice of nurses working in neuroscience to that of nurses in the non-neuroscience area, regarding how to elicit painful stimulation during the Glasgow Coma Scale assessment.

They developed a survey discussing sternal rub, nail-bed pressure, supra-orbital ridge pressure and the trapezius squeeze. In analysing the results they advocate the trapezius pinch as being the safest technique for healthcare workers to use. However, a high percentage of both neuroscience nurses and non neuroscience nurses are still using techniques of painful stimulation that are not in line with current literature.

In summary, the ANNA Conference team needs to be congratulated. They developed a program full of information, innovation and provided ample opportunity to network. We were able to learn from and interact with colleagues, share knowledge and expertise, whilst enjoying the venue, city and laughs with friends. The John Sheard Scholarship allowed me to attend the ANNA Conference, and I thank ANNA NSW for this privilege.

Yours Sincerely,

Vicki Evans



Conference Reports-2

I am writing with thanks to the ANNA NSW Chapter for my recent award of the prestigious John Sheard Travel scholarship of \$1000, which was used as financial support to attend the annual ANNA Conference in Hobart, Tasmania 10-12th October.

The conference provided a fabulous opportunity to network with both clinicians and academics, old and new and to learn about the great advances being made in neuroscience nursing across Australasia. I was fortunate to attend the State Delegates meeting on October 10th to provide a brief overview of the proposed ANNA NSW Mentorship project that we plan to develop and implement across the state, aimed at developing leadership capacity in early and mid career neuroscience nurses. It was great to be able to meet with the fellow state delegates and gain vital feedback to move forward with the project. I intend to leverage support from the Australian College of Nursing, The Nursing & Midwifery Office at the Ministry of Health, the Agency for Clinical Innovation and the Neurosurgical Nurses Professional Development Committee in the very near future.

The welcome cocktails were delightful and this was a great platform to enable me to reconnect with some old colleagues from the Royal Prince Alfred Neurosurgical Intensive Care Unit and meet some new academics from the University of Tasmania who are also teaching in the neuroscience area.

The morning of day 1 of the conference kicked off with Simeon Dale from St Vincent's Hospital and the Australian Catholic University, where she was able to provide feedback and dissemination of results and findings from the QASC Study. This study has had great press, recently through a publication in *The Lancet*. The study really reminded me that acute stroke nursing care actually makes a difference and that by undertaking simple nursing tasks such as maintaining normal temperature and blood glucose as well as undertaking a simple swallow screen, you actually are making a difference to a patients outcome and can reduce death and disability and improve functional outcome. Fabulous work from St Vincent's & ACU and always a pleasure to hear Simeon speak. I'm very interested in hearing more from the group at their new project gets underway looking at triage and stroke care in the emergency department.

Later that morning, I presented on Twitter and Social Media in Neuroscience Nursing, explaining that access to point of care internet and search engines including Google and Google Scholar may prove useful in the increase of evidence based, research inspired care and that prohibition of the Internet at point of care is folly and futile and is clearly not the way forward, to enhancing patient care quality or safety.

WFNN Vice president and AJON Editor Vicki Evans provided us with an overview of concussion and why resting off field is important and must be advocated, particularly for very mild head injuries, as "*She'll be right mate!*" may not always be the case.

Other highlights for me included a case study on Falls from Ladders from RPA Neurosurgery Case Manager Jane Raftesath and the mismatch between evidence based seizure management care and what occurs in clinical practice from Linda Nichols from UTas.

The evening saw the conference dinner at the Cascade Brewery and no trip to the brewery would be complete without a pint pulling competition! Congratulations to Talia from the Brain Injury Rehab Unit at Liverpool Hospital, who by far knows how to pull the best pint!

Friday was equally as bumper packed: The morning started off with a presentation from ANNA President Sharryn Byers on Futility from a neuroscience nursing perspective. I really enjoyed this presentation, this topic is very hot at the moment, as we move into an era where the public are demanding care, perhaps due to the advancements in drug and devices therapy. However, Sharryn really made the point that what should be done is often overshadowed by what can be done and that death as an endpoint is often viewed as a failure

of the healthcare system. It was great to catch up with Sharryn at the morning coffee and chat some more about this. Thanks Sharryn for such a thought provoking talk.

Kylie Wright took out the award for best neurosurgical paper, with her presentation on Boswellia Serrata as an alternative to Dexamethasone to treat peritumoural oedema. A really interesting presentation from Kylie and made me think about why more non traditional medicine and alternate therapies are not used more frequently in our western healthcare practice, particularly in the acute care setting. Hope to hear more from Kylie on Boswellia in the future! Dr Reece Sher from the Royal Hobart Hospital provided us with an overview of a paediatric head injury case study that was truly amazing and very neatly linked to Sharryn's earlier discussion on treatment futility. When the audience was asked mid presentation if further treatment was ethical, we were much divided in our thoughts and poised on the edge of our seats to learn of the outcome. Great to hear of such a positive outcome and really reinforced the great work the neuroscience nurses do, particularly when a multi-disciplinary model of care approach is taken.

I'd like to take this opportunity to thank ANNA NSW chapter again for their generous scholarship funding this was significantly important to me, as this opportunity allowed me to develop skills in both moderation and presentation at a conference that are really important to me as I develop through my PhD studies at UTS.

With thanks and kind regards, Caleb Ferguson.

Recipient of the John Sheard Award, 2012.

PhD Candidate, Centre for Cardiovascular & Chronic Care.

University of Technology, Sydney.



Don't forget !



the **John Sheard Travel Award**

is available to attend the ANNA conference or any neuroscience educational event .

Closes last working day of August.

Go to

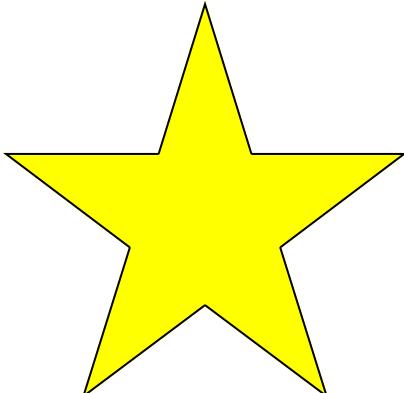
<http://www.anna.asn.au/index.php?page=nsw-branch>

For more details and the application forms.

Another Award!

Professor Sandy Middleton and her colleagues have given another award for their paper -reporting the results of the Quality in Acute Stroke Care trial –. The award American Heart Association CVN Stroke A Professor Sandy Middleton and her colleagues have given another award for their paper -reporting the results of the Quality in Acute Stroke Care trial . The award is the American Heart Association CVN Stroke Article of the Year Award. For more information go to

http://www.acu.edu.au/about_acu/our_university/newsroom/news/media_releases/repository/top_award_for_stroke_researcher/



Westmead Private Hospital Supports International Brain Tumour Awareness Week and “NOgin”

Once again Westmead Private Hospital held their fund raising BBQ on **Thursday 8th November**.

Neuroscience nursing staff from both Westmead Public & Westmead Private Hospital joined together, wearing their purple NOgin polo shirts, running the BBQ and selling their home baked goods to help raise awareness about brain tumours.

All proceeds raised on the day went to “NOgin”:The Neuro-Oncology Information Network.

NOgin is a charitable, non-profit organisation whose mission is dedicated to reducing the physical and emotional impact associated with the diagnosis and ongoing treatment of patients with a brain tumour.

It aims to improve outcomes for patients and their families living in western Sydney through the following activities.

- Offer support, guidance and education
- Facilitate educational sessions and support groups
- Organise fundraising events to help support educational programs and research projects
- Improve communication resources
- Collaborate with other similar local, state and national organisations
- Enhance the management of brain tumours through targeted research and information sharing
- Raise awareness among medical professionals and the public

Ensure adequate access to all

Contact details

Emma Everingham CNC Westmead Private Hospital

Diane Lear CNC Westmead Hospital



The 11th Quadrennial Congress of The World Federation of Neuroscience Nurses

WFNN Congress 2013



Integration

Knowledge and Skill,
Clinical Practice and Education

Abstract submission opens September 1st, 2012 and
closes December 1st, 2012

To learn more: <http://www.wfnn2013.jp/>

Date : September 13-16, 2013

Venue : Nagaragawa Convention Center, Gifu, Japan

Secretariat

Japanese Association of Neuroscience Nurses

President: Mitsue Ishiyama

Chubu Medical Center for Prolonged Traumatic Brain Dysfunction, Department of Neurosurgery

Kizawa Memorial Hospital, Head of Nursing Department

680 Shimo-kobi, Kobi-cho, Minokamo City, Gifu 505-0034, Japan E-mail: info@jann-1973.jp



Gifu WFNN Congress ~

September 13-16, 2013

Nagaragawa Convention

Center, Gifu - JAPAN.

Registrations are OPEN!
www.wfnn2013.jp

Abstracts close Dec. 1st, 2012

Notification of abstract acceptance,
15th Feb. 2013

Arigato ☺
See you in Japan!!

A Stitch in Time Wins a Prize!

The Neurosurgical Nurses at Liverpool Hospital NSW recently gained recognition when The Stitch in Time Project led by Kylie Wright, CNC was awarded a NSW Health Award.

The aim of this project was to improve patient outcomes through timely drain removal and site suturing. Nurses gained accreditation for the procedure of suturing drain sites.

Certain drains used in neurosurgery require the site to be sutured after drain removal to prevent complications. Historically the suturing has been the responsibility of medical staff and it is believed that this is the current practice of neurosurgical units Australia-wide. Clinical review identified delays having these drains removed and hence patients were experiencing adverse outcomes associated with prolonged immobilisation due to mandatory bed rest until drain removal.

During the first phase of the project, 47% of drain sites were sutured by a nurse within the benchmark timeframe, and with a zero infection rate. At periods of 3 months and over 1 year into the second phase of the project results improved. This unique model of care is transferable, creates professional development opportunities, enhances service delivery and maximises patient outcomes.

This project was presented at the 2010 ANNA Annual Scientific Meeting in New Zealand, and was awarded the NSA Prize for the best neurosurgical nursing paper and has also been published in the Australasian Journal of Neuroscience (AJoN).



Education Session - What the heck is Twitter? The Potential Uses of Social Media in Neuroscience Clinical Care

Presented by

Caleb Ferguson: PhD candidate UTS

Plus Update from ANNA National Conference held in Hobart in October
for those who couldn't make it.

*All Nurses and Allied Health with an interest in Neurosciences welcome to attend.
Refreshments will be served.*

Parking: Hospital Multi storey car park \$5.00/hr
Or surrounding streets, metered parking. Also easily accessible by public transport:
train-St Leonards stop or bus -144, 143

For catering purposes please RSVP by: Monday 26th November 2012

email: jbarr@nsccahs.health.nsw.gov.au
to indicate your intention to attend.

Wednesday 28 November 2012

1445 – 1530.

**Venue: The New RNSH Acute
Services Building!**

Level 7 Meeting Rooms 7C/B

