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PROGRAMME
AND
ABSTRACTS



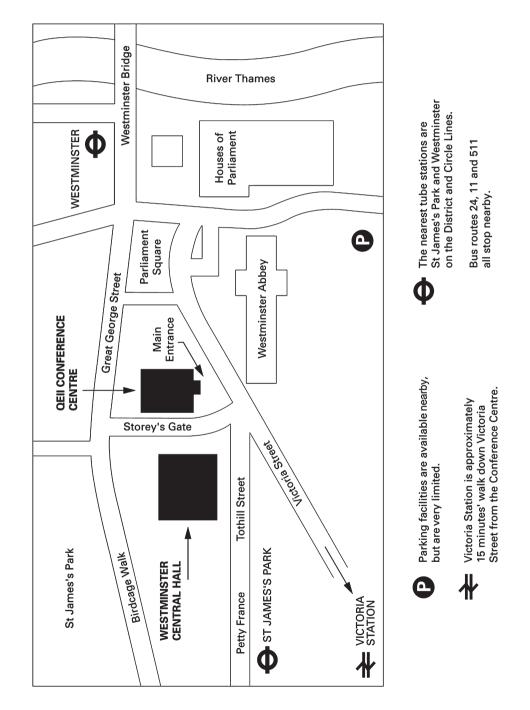
# British Thoracic Society Winter Meeting 2010

The Queen Elizabeth II Conference Centre
Broad Sanctuary
Westminster
London SWIP 3EE

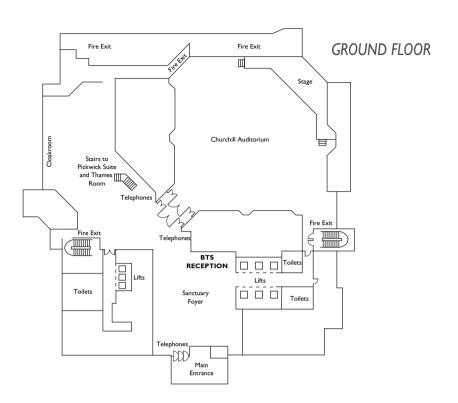
I to 3 December 2010 Programme and Abstracts

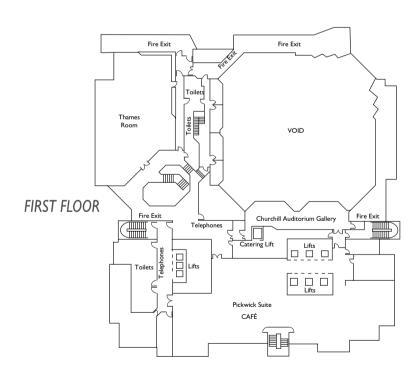
## Map to QEII Conference Centre

PowerPoint preview facilities will be available throughout the three days of the Meeting in the Thames Room on the first floor of the Centre. All presenters and chairs should report to the Speakers' section of the Registration Desks on arrival.



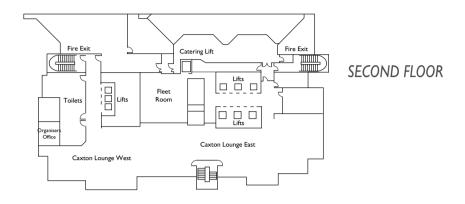
## **QEII Conference Centre – Ground and First Floors**

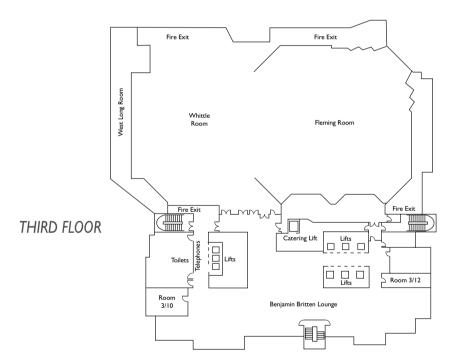




Full cafe facilities will be open from 8.00am to 4.00pm each day in the Pickwick Suite on the I<sup>st</sup> floor. A snack bar, serving hot and cold drinks, sandwiches and confectionery only, will be open in the Whittle & Fleming Rooms on the 3<sup>rd</sup> floor, also from 8.00am to 4.00pm daily.

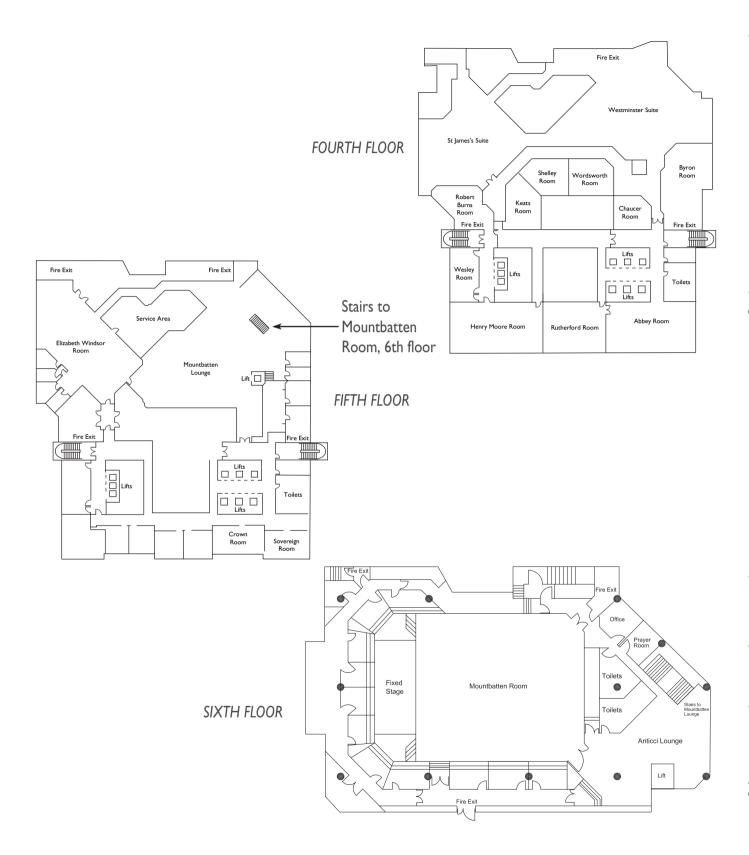
## **QEII Conference Centre – Second and Third Floors**





Full cafe facilities will be open from 8.00am to 4.00pm each day in the Pickwick Suite on the I<sup>st</sup> floor. A snack bar, serving hot and cold drinks, sandwiches and confectionery only, will be open in the Whittle & Fleming Rooms on the 3<sup>rd</sup> floor, also from 8.00am to 4.00pm daily.

## **QEII Conference Centre – Fourth, Fifth and Sixth Floors**



Full cafe facilities will be open from 8.00am to 4.00pm each day in the Pickwick Suite on the Ist floor. A snack bar, serving hot and cold drinks, sandwiches and confectionery only, will be open in the Whittle & Fleming Rooms on the 3rd floor, also from 8.00am to 4.00pm daily.

## **PROGRAMME** at a glance

## WEDNESDAY I DECEMBER 2010

INOGINAL	IIIL at a gid	ance	VVLDINL3DAI	DECLINDER 2010
Time	<b>Details</b>			<b>Location/Floor</b>
8.00am – 9.00am	COFFEE/TEA	Whittle & I	Fleming Rooms/3 <sup>rd</sup>	
8.45am – 4.00pm	Poster viewing	PI-PI3	Work-related respiratory disease	Whittle & Fleming Rooms/3rd
10.00am – 11.00am	Authors present	P14-P27	Clinical and experimental studies in asthma	· ·
		P28-P40	Pulmonary arterial hypertension	
		P41-P53	Pulmonary rehabilitation	
		P54-P62	Changing patterns of mycobacterial disease	
		P63-P70	Investigating pleural disease	
		P71-P82	Paediatric lung diseases	
8.45am – 4.00pm	Moderated poster viewing	P83-P95	Respiratory education training issues	Caxton Lounge East/2 <sup>nd</sup>
10.00am - 11.00am	Authors present			
8.15am – 8.45am	BTS Journal Club		Pulmonary rehabilitation	Fleet Room/2 <sup>nd</sup>
8.30am - 10.15am	Symposium		The management of difficult asthma	Churchill Auditorium/Ground
8.30am – 10.15am	Spoken session	S1–S6	Screen, educate and treat – managing the challenge of TB	Abbey Room/4 <sup>th</sup>
8.30am - 10.15am	Spoken session	S7–S12	Economics and the burden of respiratory disease	Mountbatten Room/6 <sup>th</sup>
8.30am – 10.30am	Joint BTS/BALR sym (part I)	posium	The science of danger signalling	Westminster Suite/4 <sup>th</sup>
8.45am – 10.15am	Spoken session	S13–S17	Assessing the impact of interventions in sleep disordered breathing	St James's Suite/4 <sup>th</sup>
8.45am – 10.30am	Spoken session	S18-S23	New assessments in cystic fibrosis	Elizabeth Windsor Room/5 <sup>th</sup>
10.00am - 11.00am	COFFEE/TEA	Whittle & I	Fleming Rooms, Benjamin Britten Lounge/3 <sup>rd</sup>	
10.30am - 12.15pm	Symposium		National Clinical Strategy in England for COPD	Churchill Auditorium/Ground
10.30am - 12.15pm	Symposium		Frontiers in the control of mycobacterial disease	Mountbatten Room/6 <sup>th</sup>
10.30am - 12.15pm	Spoken session	S24-S29	Paediatric infectious diseases	St James's Suite/4 <sup>th</sup>
10.45am - 12.15pm	Spoken session	S30-S34	Linking airways inflammation and remodelling	Abbey Room/4 <sup>th</sup>
10.45am – 12.30pm	Spoken session	S35-S40	How should we be investigating suspected lung cancer?	Elizabeth Windsor Room/5 <sup>th</sup>
11.00am - 1.00pm	Joint BTS/BALR sym (part II)	posium	The role of danger signals in respiratory disease	Westminster Suite/4 <sup>th</sup>
12.15pm – 2.00pm	LUNCH		Cash catering only	Pickwick Suite/Ist Whittle & Fleming Rooms/3rd
12.30pm – 1.15pm	The Snell Memorial	Lecture	Lessons from clinical trials' research	Churchill Auditorium/Ground
12.30pm – 2.10pm	Poster discussion	PI-PI3	Work-related respiratory disease	Elizabeth Windsor Room/5 <sup>th</sup>
1.00pm – 2.45pm	Poster discussion	P14-P27	Clinical and experimental studies in asthma	St James's Suite/4 <sup>th</sup>
1.20pm — 3.00pm	Poster discussion	P28-P40	Pulmonary arterial hypertension	Abbey Room/4 <sup>th</sup>
1.30pm – 3.00pm	Moderated poster discussion	P83-P95	Respiratory education training issues	Caxton Lounge East/2 <sup>nd</sup>
1.30pm – 3.15pm	Joint BTS/BPRS symp	oosium	Cystic fibrosis – how paediatricians can help adult physicians	Mountbatten Room/6 <sup>th</sup>
2.00pm – 3.30pm	Symposium	TI-T6	BTS/BLF/BALR Young Investigators' symposium	Westminster Suite/4th
2.00pm – 3.40pm	Poster discussion	P41-P53	Pulmonary rehabilitation	Henry Moore Room/4 <sup>th</sup>
2.00pm – 3.45pm	Symposium		Sleep: the young, the elderly, the obese	Churchill Auditorium/Ground
2.30pm – 3.45pm	Symposium		The future of specialism	Elizabeth Windsor Room/5 <sup>th</sup>
3.00pm – 4.30pm	COFFEE/TEA	Whittle & I 3.30pm)	Fleming Rooms, Benjamin Britten Lounge/3 <sup>rd</sup> and Mo	untbatten Lounge/5 <sup>th</sup> (3.15pm–
3.00pm – 4.15pm	Poster discussion	P54-P62	Changing patterns of mycobacterial disease	St James's Suite/4th
3.15pm – 4.15pm	Poster discussion	P63-P70	Investigating pleural disease	Abbey Room/4 <sup>th</sup>
3.30pm – 5.00pm	Poster discussion	P71-P82	Paediatric lung diseases	Mountbatten Room/6 <sup>th</sup>
4.00pm – 4.30pm	The BTS President's	Address	Learning in respiratory medicine	Churchill Auditorium/Ground
4.30pm – 4.45pm	Presentation		Presentation of the BTS Medal	Churchill Auditorium/Ground
4.45pm — 5.00pm	The ERS President's	Address	Achievements of the Year of the Lung and Vision of the ERS Presidency	Churchill Auditorium/Ground
5.00pm — 5.30pm	BTS AGM		BTS Annual General Meeting (BTS members only)	Churchill Auditorium/Ground
5.30pm – 6.30pm	The President's Rece	eption and Aw	ard Presentations – All welcome!	Sanctuary Foyer/Ground

Coffee and tea is complimentary ONLY during the coffee/tea break times shown above. Outside these times, drinks may be purchased from the cafe in the Pickwick Suite (1st floor), or the snack bar in the Whittle & Fleming Rooms (3rd floor).

## THURSDAY 2 DECEMBER 2010

Thorax 2010;65(Suppl IV)

## **PROGRAMME** at a glance

Time	Details			Location/Floor
8.00am – 9.00am	COFFEE/TEA	Whittle & Flei	ming Rooms/3rd	
8.45am – 4.00pm	Poster viewing	P96-P109	Clinical studies in cystic fibrosis	Whittle & Fleming Rooms/3 <sup>rd</sup>
10.00am - 11.00am	Authors present	PIIO-PI2I	COPD: sputum and exacerbations	
		P122-P136	Respiratory physiology: old and new concepts	
		P137-P151	Clinical interventions in COPD	
		P152-P159	Clinical aspects of NIV	
		P160-P171	Improving patient outcomes in TB	
		P172-P184	Therapeutic interventions in asthma and	
			airways disease	
8.45am – 4.00pm	Moderated poster viewing	P185P190 P191P196	Challenges in smoking cessation Clinical studies in lung cancer	Caxton Lounge East/2 <sup>nd</sup>
10.00am - 11.00am	Authors present			
8.15am – 8.45am	BTS Journal Club		Interstitial lung disease	Fleet Room/2 <sup>nd</sup>
8.30am – 10.15am	Joint BTS/BTOG syr	nposium	Developments in lung cancer therapeutics	Churchill Auditorium/Ground
8.30am – 10.15am	Joint BTS/BPRS sym	posium	Oxygen – plenty of guidelines, not much evidence	St James's Suite/4 <sup>th</sup>
8.30am - 10.15am	Spoken session	S41-S46	Immunity and fibrosis in chronic asthma	Henry Moore Room/4 <sup>th</sup>
8.30am - 10.30am	Spoken session	S47-S53	Inflammation in lung injury: the key mediators	Westminster Suite/4 <sup>th</sup>
8.45am - 10.15am	Spoken session	S54–S58	Orphan lung diseases	Elizabeth Windsor Room/5 <sup>th</sup>
8.45am – 10.30am	Symposium		Novel mechanisms and new therapies for PAH	Mountbatten Room/6 <sup>th</sup>
8.45am – 10.30am	Spoken session	S59–S64	αI-antitrypsin: what it tells us about COPD	Rutherford Room/4th
8.45am – 10.30am	Spoken session	S65-S70	NIV: the acute and domiciliary settings	Abbey Room/4 <sup>th</sup>
10.00am – 11.00am	COFFEE/TEA	Whittle & Flei	ming Rooms, Benjamin Britten Lounge/3 <sup>rd</sup>	,
10.30am - 12.15pm	Symposium		Plenary scientific symposium	Churchill Auditorium/Ground
10.30am – 12.15pm	Spoken session	S71-S76	Novel outcomes and interventions in pulmonary rehabilitation	Elizabeth Windsor Room/5 <sup>th</sup>
12.15pm – 2.00pm	LUNCH		Cash catering only	Pickwick Suite/Ist Whittle & Fleming Rooms/3rd
12.30pm – 1.15pm	The BTS Lecture		Acute lung injury: new opportunities with cell-based therapy	Churchill Auditorium/Ground
1.30pm – 2.15pm	Moderated poster discussion	P185-P190	Challenges in smoking cessation	Caxton Lounge East/2 <sup>nd</sup>
1.30pm – 3.15pm	Poster discussion	P96-P109	Clinical studies in cystic fibrosis	Henry Moore Room/4 <sup>th</sup>
1.45pm – 3.15pm	Poster discussion	PII0-PI2I	COPD: sputum and exacerbations	St James's Suite/4 <sup>th</sup>
1.45pm – 3.30pm	Symposium		Nano materials: an emerging health threat?	Mountbatten Room/6 <sup>th</sup>
1.45pm – 3.30pm	Spoken session	S77–S82	Mechanisms of lung infection in the	Elizabeth Windsor Room/5 <sup>th</sup>
			community and hospital setting	
1.45pm – 3.45pm	Poster discussion	P122–P136	Respiratory physiology: old and new concepts	Abbey Room/4 <sup>th</sup>
2.00pm – 3.45pm	Symposium		Connective tissue disease associated interstitial lung disease	Churchill Auditorium/Ground
2.00pm – 3.45pm	Spoken session	S83–S88	Pathophysiological mechanisms in childhood asthma	Westminster Suite/4 <sup>th</sup>
2.00pm – 3.45pm	Spoken session	S89–S94	Basic mechanisms in lung cancer	Rutherford Room/4 <sup>th</sup>
2.15pm – 3.00pm	Moderated poster discussion	P191–P196	Clinical studies in lung cancer	Caxton Lounge East/2 <sup>nd</sup>
3.15pm – 4.15pm	COFFEE/TEA		ming Rooms, Benjamin Britten Lounge/3 <sup>rd</sup>	
3.30pm — 5.30pm	Poster discussion	P137–P151	Clinical interventions in COPD	St James's Suite/4 <sup>th</sup>
3.30pm – 5.30pm	Spoken session	S95–S101	Novel disease mechanisms in pulmonary arterial hypertension	Henry Moore Room/4 <sup>th</sup>
3.45pm – 5.30pm	Spoken session	S102-S107	Acute lung injury: what are the causes?	Mountbatten Room/6 <sup>th</sup>
4.00pm – 5.00pm	Poster discussion	P152-P159	Clinical aspects of NIV	Westminster Suite/4 <sup>th</sup>
4.00pm – 5.30pm	Poster discussion	P160-P171	Improving patient outcomes in TB	Elizabeth Windsor Room/5 <sup>th</sup>
4.00pm — 5.40pm	Poster discussion	P172–P184	Therapeutic interventions in asthma and airways disease	Abbey Room/4 <sup>th</sup>
4.00pm – 5.45pm	Symposium		What's new in pneumonia in adults and children?	Churchill Auditorium/Ground
5.45pm – 7.15pm	BLF symposium		BLF 25 <sup>th</sup> anniversary symposium	Mountbatten Room/6 <sup>th</sup>

Coffee and tea is complimentary ONLY during the coffee/tea break times shown above. Outside these times, drinks may be purchased from the cafe in the Pickwick Suite (1st floor), or the snack bar in the Whittle & Fleming Rooms (3rd floor).

## **PROGRAMME** at a glance

## FRIDAY 3 DECEMBER 2010

Time	<b>Details</b>			Location/Floor
8.00am – 9.00am	COFFEE/TEA	Whittle & Flo	eming Rooms/3 <sup>rd</sup>	
8.45am – 2.00pm	Poster viewing	P197-P209	Clinical studies in obstructive sleep apnoea	Whittle & Fleming Rooms/3 <sup>rd</sup>
10.00am – 11.00am	Authors present	P210-P222	Developments in the delivery of lung cancer care	
		P223-P236	Organisation of respiratory care	
		P237-P247	Clinical challenges in diagnosing and managing respiratory infection	
		P248-P254	Outcome determinants in acute lung injury	
8.45am – 2.30pm 10.00am – 11.00am	Moderated poster viewing Authors present	P255–P261	Clinical studies in pulmonary embolism	Caxton Lounge East/2 <sup>nd</sup>
8.15am – 8.45am	BTS Journal Club		Asthma	Fleet Room/2 <sup>nd</sup>
8.30am – 10.15am	Symposium		COPD: the patient with complex advanced disease	Churchill Auditorium/Ground
8.30am - 10.15am	Spoken session	S108-S113	Epidemiology of lung disease	Westminster Suite/4 <sup>th</sup>
8.30am - 10.15am	Spoken session	S114-S119	Measurements in patients with chronic cough	Abbey Room/4 <sup>th</sup>
8.30am - 10.15am	Spoken session	S120-S125	Inflammation: an important regulator of the fibrotic response	Mountbatten Room/6 <sup>th</sup>
8.45am – 10.15am	Joint BTS/UKRRC symposium		Building an academic career in respiratory research	Elizabeth Windsor Room/5 <sup>th</sup>
10.00am - 11.00am	COFFEE/TEA	Whittle & Flo	eming Rooms, Benjamin Britten Lounge/3 <sup>rd</sup>	
10.15am - 12.00pm	Spoken session	S126-S131	Lung infection: a multi-faceted problem	Henry Moore Room/4 <sup>th</sup>
10.30am - 12.00pm	Spoken session	S132-S137	Clinical and translational observations in asthma	Westminster Suite/4 <sup>th</sup>
10.30am – 12.15pm	Symposium		How has imaging changed lung cancer investigation?	Churchill Auditorium/Ground
10.30am - 12.15pm	Symposium		The industry and UK respiratory medicine: time for closer liaisons	Mountbatten Room/6 <sup>th</sup>
10.30am - 12.15pm	Spoken session	S138-S143	Mechanisms of fibrosis in respiratory disease	St James's Suite/4 <sup>th</sup>
10.30am - 12.15pm	Spoken session	S144-S149	Smoke and pollution in COPD mechanisms	Abbey Room/4 <sup>th</sup>
12.15pm – 2.00pm	LUNCH		Cash catering only	Pickwick Suite/Ist Whittle & Fleming Rooms/3 <sup>rd</sup>
12.30pm — 1.15pm	John Donaldson Asthma UK Lecture		The role of the patient in asthma management	Churchill Auditorium/Ground
1.00pm – 3.00pm	Spoken session	S150–S156	Cell signalling and cell responses in pulmonary vascular disease	Abbey Room/4 <sup>th</sup>
1.30pm – 2.30pm	Moderated poster discussion	P255-P261	Clinical studies in pulmonary embolism	Caxton Lounge East/2 <sup>nd</sup>
1.30pm – 3.10pm	Poster discussion	P197–P209	Clinical studies in obstructive sleep apnoea	Westminster Suite/4 <sup>th</sup>
1.30pm – 3.10pm	Poster discussion	P210-P222	Developments in the delivery of lung cancer care	Henry Moore Room/4 <sup>th</sup>
1.30pm – 3.15pm	Poster discussion	P223-P236	Organisation of respiratory care	St James's Suite/4th
1.30pm – 3.15pm	Symposium		Non-CF bronchiectasis: the known knowns, the known unknowns and the unknown unknowns	Mountbatten Room/6 <sup>th</sup>
1.45pm – 3.30pm	Symposium		'Late breaking news' symposium – The best of BTS Audit	Churchill Auditorium/Ground
2.00pm – 3.45pm	Spoken session	S157–S162	Occupational asthma	Rutherford Room/4th
2.00pm – 3.45pm	Spoken session	S163-S168	Survival in COPD	Elizabeth Windsor Room/5 <sup>th</sup>
3.15pm – 4.40pm	Poster discussion	P237-P247	Clinical challenges in diagnosing and managing respiratory infection	Abbey Room/4 <sup>th</sup>
3.30pm – 4.30pm	Poster discussion	P248-P254	Outcome determinants in acute lung injury	Mountbatten Room/6 <sup>th</sup>
3.00pm – 4.45pm	COFFEE/TEA	Benjamin Bri	tten Lounge/3 <sup>rd</sup>	

Coffee and tea is complimentary ONLY during the coffee/tea break times shown above. Outside these times, drinks may be purchased from the cafe in the Pickwick Suite ( $I^{st}$  floor), or the snack bar in the Whittle & Fleming Rooms ( $3^{rd}$  floor).

#### **ADDITIONAL SESSIONS**

Other events during the Winter Meeting will include the following sessions. Further details may be found in the leaflets in the conference bags or by reading the screens in the conference centre.

#### WEDNESDAY I DECEMBER 2010

9.00am - 10.00am Rutherford Room, 4<sup>th</sup> Floor

**OPEN MEETING** 

Thorax - "Meet the Editors"

Professor Andrew Bush and Professor Ian Pavord

#### FRIDAY 3 DECEMBER 2010

8.30am – 10.00am
St James's Suite, 4<sup>th</sup> Floor
OPEN MEETING
DEPARTMENT OF HEALTH BRIEFING SESSION

2.30pm – 3.45pm
Elizabeth Windsor Room, 5th Floor
SYMPOSIUM
THE FUTURE OF SPECIALISM – A DEBATE
WITH THE NHS CONFEDERATION

## THURSDAY 2 DECEMBER 2010

12.30pm – 1.30pm Elizabeth Windsor Room, 5th Floor OPEN MEETING DEPARTMENT OF HEALTH BRIEFING SESSION

5.45pm – 7.15pm Mountbatten Room, 6<sup>th</sup> Floor

# BRITISH LUNG FOUNDATION 25<sup>TH</sup> ANNIVERSARY SYMPOSIUM

Chaired by: Professor Sir Malcolm Green (London)

**5.45pm** Overview: 25 years of the BLF

Professor Sir Malcolm Green

**6.10pm** COPD: a global epidemic

Professor Sonia Buist (Washington)

**6.40pm** How pathology links to abnormal

function

Professor Jim Hogg (Vancouver)

**7.10pm** Vote of thanks

Professor Peter Barnes (London)

## BRITISH THORACIC SOCIETY OPEN MEETINGS

The programme will also include open meetings of some of the BTS Specialist Advisory Groups (SAGs) and Guideline Groups. Further details may be found in the leaflets in the conference bags or by reading the screens in the conference centre.

#### WEDNESDAY I DECEMBER 2010

Time	Details	Location/Floor
12.30pm – 1.30pm	BTS COPD SAG	Henry Moore Room/4 <sup>th</sup>
1.15pm – 2.15pm	BTS Interventional Pulmonology SAG and Advanced Bronchoscopy Guidelines	Rutherford Room/4 <sup>th</sup>
1.30pm – 2.45pm	BTS TB SAG	Fleet Room/2 <sup>nd</sup>

## THURSDAY 2 DECEMBER 2010

Details	Location/Floor
BTS Nurse Advisory Group	Rutherford Room/4 <sup>th</sup>
BTS Orphan Lung Disease SAG	Abbey Room/4 <sup>th</sup>
BTS Tobacco SAG	Henry Moore Room/4 <sup>th</sup>
BTS Pulmonary Vascular Disease SAG	St James's Suite/4 <sup>th</sup>
BTS Lung Cancer and Mesothelioma SAG	Abbey Room/4 <sup>th</sup>
BTS Cystic Fibrosis SAG	Westminster Suite/4 <sup>th</sup>
BTS Pulmonary Infection SAG	Rutherford Room/4th
BTS ILD SAG	Rutherford Room/4th
	BTS Nurse Advisory Group BTS Orphan Lung Disease SAG BTS Tobacco SAG BTS Pulmonary Vascular Disease SAG BTS Lung Cancer and Mesothelioma SAG BTS Cystic Fibrosis SAG BTS Pulmonary Infection SAG

## FRIDAY 3 DECEMBER 2010

Time	Details	Location/Floor
10.45am – 11.45am	BTS Sleep Apnoea SAG	Wesley Room/4 <sup>th</sup>
12.15pm – 1.15pm	BTS Specialist Trainee Advisory Group	Henry Moore Room/4th
12.30pm – 1.15pm	BTS Oxygen Champions	Elizabeth Windsor Room/5 <sup>th</sup>
12.30pm – 1.30pm	BTS Respiratory Critical Care SAG	Rutherford Room/4 <sup>th</sup>

# The British Thoracic Society President's Reception and Award Presentations

Wednesday 1 December, 5.30pm to 6.30pm Sanctuary Foyer, Ground floor, QEII Conference Centre

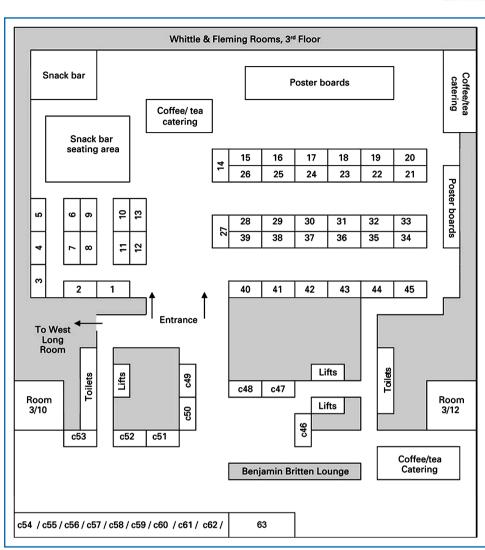


All participants are warmly invited to join us on this special occasion. The presentations will be made for the annual BTS/BLF/BALR Young Investigator of the Year Awards, as well as the Medical Student Awards for the medical students who were judged to have submitted the best abstracts.

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## FLOOR PLAN OF THE EXHIBITION STANDS

#### **Exhibitors and stand numbers**



## **Charity and non-commercial stands**

#### Benjamin Britten Lounge, 3rd floor

Benjamin Br	ricten Lounge, 3 moor
C63	Association for Respiratory Technology and Physiology (ARTP)
C59	Association of Chartered Physiotherapists in Respiratory Care (ACPRC)
C52	Association of Respiratory Nurse Specialists (ARNS)
C57	Asthma UK
C51	British Lung Foundation
C60	British Thoracic Oncology Group, Mesothelioma UK and UKLCC
C47	British Thoracic Society
C49	Department of Health
C53	Education for Health
C50	European Respiratory Society
C55	Healthy Outlook® from the Met Office
C62	LAM Action
C65	Lung Improvement Programme
C54	The NHS Information Centre (The NHS IC)
C48	Primary Care Respiratory Society UK (PCRS-UK)
C56	Primary Ciliary Dyskinesia (PCD) Family Support Group UK
C58	Pulmonary Hypertension Association (PHA) UK
C64	Respiratory Education UK
C61	TB Alert

# Whittle & Fleming Rooms, 3<sup>rd</sup> floor

3 11001	
10 & 13	Actelion
	Pharmaceuticals Ltd
12	Air Products
43	Airsonett
27, 28 & 39	AstraZeneca
19	Atrium
44	Bedfont Scientific Ltd
9	Boehringer Ingelheim
45	GmbH & Pfizer Inc
45	BOC Healthcare
20	Cellestis Ltd
30, 36 & 37	
22	Cryopal
31	Fentons Solicitors LLP
6	Fisher & Paykel Healthcare Ltd UK
7 & 8	Forest Laboratories UK Ltd
17, 23 & 24	GlaxoSmithKline
2	Hill-Rom
14	Hitachi Medical Systems
4	Medela
П	Merck Sharp &
	Dohme Ltd
15	Napp Pharmaceuticals Ltd
32 & 35	Novartis
29	Nutricia UK
25	Olympus KeyMed
18	Oxford Immunotec
3	PARI Medical Ltd
26	Pentax
16	Pfizer Vaccines
38	Pharmaxis
I	Philips Respironics
5	Rocket Medical PLC
33	S-Med Ltd
40 & 41	Teva UK Ltd
21	Uptake Medical
42	Corporation
42	UK Medical
34	Vitalograph

# Benjamin Britten Lounge, 3<sup>rd</sup> floor

46	Wisepress Medical
	Bookshop

## Wednesday I December 2010

8.00am - 9.00am

COFFEE/TEA will be served in the Whittle & Fleming Rooms, 3<sup>rd</sup> floor

#### 8.45am - 4.00pm

Whittle & Fleming Rooms, 3<sup>rd</sup> floor

#### **POSTER VIEWING**

Authors present: 10.00am - 11.00am

#### PI-PI3

#### Work-related respiratory disease

Discussion of abstracts will take place from 12.30pm to 2.10pm in the Elizabeth Windsor Room, 5<sup>th</sup> floor

#### P14-P27

#### Clinical and experimental studies in asthma

Discussion of abstracts will take place from 1.00pm to 2.45pm in the St James's Suite, 4th floor

#### P28-P40

#### Pulmonary arterial hypertension

Discussion of abstracts will take place from 1.20pm to 3.00pm in the Abbey Room, 4<sup>th</sup> floor

#### P41-P53

#### Pulmonary rehabilitation

Discussion of abstracts will take place from 2.00pm to 3.40pm in the Henry Moore Room, 4th floor

#### P54-P62

#### Changing patterns of mycobacterial disease

Discussion of abstracts will take place from 3.00pm to 4.15pm in the St James's Suite, 4th floor

#### P63-P70

#### Investigating pleural disease

Discussion of abstracts will take place from 3.15pm to 4.15pm in the Abbey Room, 4th floor

#### P71-P82

#### Paediatric lung diseases

Discussion of abstracts will take place from 3.30pm to 5.00pm in the Mountbatten Room,  $6^{\text{th}}$  floor

#### 8.45am - 4.00pm

Caxton Lounge East, 2nd floor

#### **MODERATED POSTER VIEWING**

Authors present: 10.00am - 11.00am

#### P83-P95

#### Respiratory education training issues

Discussion of abstracts will take place from 1.30pm to 3.00pm in the Caxton Lounge East, 2<sup>nd</sup> floor

#### 8.15am - 8.45am

Fleet Room, 2<sup>nd</sup> Floor

#### THE BTS JOURNAL CLUB

#### **Pulmonary rehabilitation**

Professor Sally Singh (Leicester)

## **SCIENTIFIC PROGRAMME**

8.30am - 10.15am

Churchill Auditorium, Ground Floor SYMPOSIUM

# THE MANAGEMENT OF DIFFICULT ASTHMA

Chaired by: Dr Bernard Higgins (Newcastle upon Tyne)

and Professor Neil Thomson (Glasgow)

8.30am Epidemiology and predictors of difficult

asthma

Dr Robert Niven (Manchester)

**8.55am** Management of psychosocial aspects of

difficult asthma

Dr Paul Gill (Sheffield)

**9.20am** Assessing and promoting adherence in

patients with difficult asthma

Dr Liam Heaney (Belfast)

**9.45am** Phenotype specific management of severe

asthma

Professor Ian Pavord (Leicester)

#### 8.30am - 10.15am

Abbey Room, 4<sup>th</sup> Floor

SPOKEN SESSION: SI - S6

# Screen, educate and treat: managing the challenge of TB

Chaired by: Dr Ben Marshall (Southampton) and Professor Peter Ormerod (Blackburn)

8.35am SI

HIV-I infection of macrophages modulates host responses to Mycobacterium

tuberculosis to contribute to

immunopathogenesis and viral propagation

GS Tomlinson, PTG Elkington, M Noursadeghi

8.50am **S2** 

Multi-drug resistant tuberculosis (MDR-TB) treatment in the UK: a survey of injectable

use and toxicity in practice

use and toxicity in practice

A Sturdy, A Goodman, RJ José, A Loyse, M O'Donoghue, OM Kon, MJ Dedicoat, T Harrison, L John, M Lipman, G Cooke

9.05am **S3** 

Factors for successful treatment completion

among MDR TB cases in the UK LFA Anderson, ST Tamne, JW Watson,

IA Abubakar

9.20am **S4** 

Evaluation of TB Peer Educators — Essential partners in Metropolitan TB Control J Hall, S Bethell, S Helleren, A Story, M Lipman

9.35am **S5** 

Prevalence of latent tuberculosis infection in immigrants to the UK: findings from a multicentre study

M Pareek, JP Watson, OM Kon, G Woltmann,

A Lalvani

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## SCIENTIFIC PROGRAMME

#### 9.50am **S6**

Sensitivity and specificity of mobile digital chest radiography for the diagnosis of active pulmonary tuberculosis. A cohort study in high risk groups in London RW Aldridge, A Story, H Stagg, M Lipman, J Knight, D Taubman, K Shaji, D Quinn, J Watson, I Abubaka, A Hayward

8.30am - 10.15am

Mountbatten Room, 6<sup>th</sup> Floor SPOKEN SESSION: S7 – S12

# **Economics and the burden of respiratory disease**

Chaired by: Professor Michael Morgan (Leicester) and Professor Sue Hill (Department of Health)

8.35am **S7** 

Annual trends in asthma emergency attendance, hospital admission and readmission *V Kuan, SJ Quantrill* 

8.50am **S8** 

The National COPD Resources and Outcomes Project (NCROP): action plan achievement since 2007

IF O'Reilly, NA Pursey, CM Roberts,

RA Stone

9.05am **S9** 

Feasibility of establishing a regional weaning unit in Scotland: modelling resource implications and costs

NI Lone, D Sorensen, TS Walsh

9.20am **SIO** 

9.35am

Is it cost-effective to replace nurses with lay asthma educators in primary care?

NJ Roberts, K Boyd, A Briggs, A-L Caress, MR

Partridge

SII

The South East Essex (SEE) model of integrated COPD Care and QUIP (Quality Innovation and Productivity) improvements AG Davison, E Paddison, C Hanna, S Taylor

9.50am **S12** 

Pre-clinic telephone consultations: a costing

L O'Byrne, NJ Roberts, K Boyd, A Briggs, MR Partridge

8.30am – 10.30am Westminster Suite, 4th Floor SYMPOSIUM

## JOINT BTS/BALR SYMPOSIUM PART I: THE SCIENCE OF DANGER SIGNALLING

Chaired by: Professor Rachel Chambers (London) and Professor Ann Millar (Bristol)

## Wednesday I December 2010

**8.30am** The biology of the toll-like receptors and

their signalling pathways

Professor Luke O'Neill (Dublin)

**9.00am** Non-TLR danger signals: the role of C-type

lectins

Professor Gordon Brown (Aberdeen)

**9.30am** The NALP3 inflammasome in the recognition of pathogenic dust

Dr Isabelle Couillin (Orleans)

10.00am Links between PAMPs, innate immunity and

adaptive immunity in allergic airway disease

Professor Bart Lambrecht (Ghent)

8.45am - 10.15am

St James's Suite, 4th Floor

SPOKEN SESSION: S13 – S17

# Assessing the impact of interventions in sleep-disordered breathing

Chaired by: Professor John Stradling (Oxford) and Professor Adrian Williams (London)

8.50am **SI3** 

The primary results of the MOSAIC trial: does CPAP for minimally symptomatic OSA reduce daytime sleepiness or calculated

vascular risk?

SE Craig, M Kohler, D Nicoll, DJ Bratton, AJ Nunn, RJO Davies, JR Stradling

9.05am \$14

CPAP improves endothelial function in minimally symptomatic OSA patients: results from the MOSAIC trial

M Kohler, SE Craig, JCT Pepperell, D Nicoll, D Bratton, A Nunn, RJO Davies, JR Stradling

9.20am **S15** 

An office based advanced driving simulator to assess driving performance in Obstructive Sleep Apnoea Syndrome (OSAS): a pilot study

D Ghosh, S Jamson, MW Elliott

9.35am \$16

Detection of sleep-disordered breathing in chronic heart failure patients: utility of heart rate variability versus pulse oximetry? NR Ward, MR Cowie, SD Rosen, VR Roldao, J Hooper, TA McDonagh, AK Simonds, MI Morrell

9.50am S17

A pilot study of the prevalence of sleep disordered breathing (SDB) and nocturnal hypoxia in symptomatic adults with Sickle Cell Disease (SCD) and its relationship with

disease severity

P Murphy, R Dillon, AJ Williams, J Howard,

N Hart

## Wednesday | December 2010

8.45am - 10.30am

Elizabeth Windsor Room, 5th Floor SPOKEN SESSION: S18 - S23

#### New assessments in cystic fibrosis

Chaired by: Professor Stuart Elborn (Belfast) and

Dr Andrew Jones (Manchester)

8.50am **S18** 

> Longitudinal assessment of biomarkers for clinical trials of novel therapeutic agents; the

Run-in Study

EWFW Alton, C Boyd, S Cunningham, JC Davies, SC Hyde, JA Innes, DR Gill, A Greening, U Griesenbach, T Higgins, DI Porteous

**S19** 9.05am

> Real time PCR in the identification and management of aspergillus in CF CG Baxter, AM Jones, AK Webb,

DW Denning

9.20am **S20** 

> The bacterial cytoskeleton - A new antimicrobial target in cystic fibrosis

pathogens?

SC Carnell, JD Perry, CMA Khan,

A De Soyza

9.35am **S21** 

> Identification of Pseudomonas aeruginosa infection via volatile organic compounds in

sputum headspace gases

S Savelev, J Perry, SJ Bourke, R Taylor, AJ Fisher, M Petrie, PA Corris, A De Soyza

9.50am **S22** 

> Lung Clearance Index, FEVI and CT findings in Cystic Fibrosis: Data from the UK CF Gene Therapy Consortium Run-In Study HS Sheridan, NJ Bell, KA Macleod, PA Reid, AR Horsley, G Davies, C Saunders, S Cunningham,

JA Innes, JC Davies, EW Alton

10.05am **S23** 

> A comparative study of polymicrobial diversity in CF and non-CF bronchiectasis SP Cummings, A Nelson, PJ Purcell, A De Soyza, SJ Bourke, JD Perry

10.00am - 11.00am

COFFEE/TEA will be served in the Whittle & Fleming Rooms and Benjamin Britten Lounge, 3rd floor

10.30am - 12.15pm **Churchill Auditorium, Ground Floor** SYMPOSIUM

**NATIONAL CLINICAL STRATEGY IN ENGLAND FOR COPD** 

To be confirmed

#### SCIENTIFIC PROGRAMME

10.30am - 12.15pm

Mountbatten Room, 6th Floor

SYMPOSIUM

## FRONTIERS IN THE CONTROL OF **MYCOBACTERIAL DISEASE**

Chaired by: Dr Marc Lipman (London) and

Dr Alistair Story (London)

10.30am What's "latent" about latent TB infection?

Professor Robert Wilkinson (Cape Town)

10.55am New drugs for TB and the challenge of

resistance

Professor Peter Davies (Liverpool)

11.20am Managing TB in a resource poor country:

> what can the UK learn? Dr Alison Grant (London)

11.45am New developments in the biology of

> non-tuberculous mycobacteria Dr Andres Floto (Cambridge)

10.30am - 12.15pm

St James's Suite, 4th Floor

SPOKEN SESSION: S24 - S29

## **Paediatric infectious diseases**

Chaired by: Professor Alan Smyth (Nottingham) and

Dr Anne Thomson (Oxford)

10.35am **S24** 

Differentiated Primary Bronchial Epithelial

Cell (pBECs), Monocyte derived

Macrophages (MdMs) and Monocyte derived dendritic cells (MODCs) Transwell co-culture: Respiratory Syncytial Virus (RSV) infection of

the apical and basolateral surfaces KB Ugonna, K Plant, ML Everard

10.50am **S25** 

> IL 17 production in primary and secondary Respiratory Syncytial Virus (RSV) infection

and neutrophil transmigration KB Ugonna, K Plant, ML Everard

11.05am **S26** 

> Recurrent respiratory tract infections and specific antibody deficiency in children MTC Lim, K Jeyarajah, H Pandya, M Browning, E Gaillard

11.20am **S27** 

> Should routine screening for Vitamin D deficiency be incorporated into current guidelines for treatment of paediatric TB patients?

A Ting, M Jiki, C Bell, C Murray, Z Mughal, F Child

11.35am

Clinical predictors of admission in infants with acute bronchiolitis M Marlais, J Evans, E Abrahamson

11.50am \$29

Mannose binding lectin deficiency in children with respiratory infection

S Prudon, | Wake, D Barge, C Simmister, S Tremble, V Stevenson, T Flood, DA Spencer

10.45am - 12.15pm Abbey Room, 4th Floor

SPOKEN SESSION: S30 - S34

Linking airways inflammation and remodelling

Chaired by: Professor Peter Bradding (Leicester) and Dr David Singh (Manchester)

10.50am S30

TRUSS is a regulator of TNF $\alpha$ -TNF-RI induced NF-κB activation IP Horan, AJ Langton, S Farrow, DW Riches, ER Chilvers, H Parfrey

11.05am

Characterisation of cell adhesion molecule-I in lung mast cells

EP Moiseeva, M Leyland, P Bradding

II.20am **S32** 

> Cyclical mechanical stretch enhances the pro-fibrotic responses of primary embryonic fetal fibroblasts, but not ADAM33 expression A Noto, W Manuyakorn, HM Haitchi, F Bucchieri, D Davies

11.35am **S33** 

> Suppression of constitutive and stimulated secretion of histamine from human lung mast cells by a secreted factor from lung epithelial cells

N Martin, GK Arthur, WYH Wan, L Woodman, CE Brightling, ID Pavord, P Bradding

**S34** 11.50am

> Effects of the cyclin-dependent kinase inhibitor R-roscovitine on eosinophil survival and clearance N Farahi, L Uller, JK Juss, AJ Langton, AS Cowburn, A Gibson, MR Foster, SN Farrow, A Sobolewski, AM Condliffe, **ER Chilvers**

10.45am - 12.30pm

Elizabeth Windsor Room, 5th Floor SPOKEN SESSION: S35 - S40

How should we be investigating suspected lung cancer?

Chaired by: Mr Sion Barnard (Newcastle upon Tyne) and Dr Pallav Shah (London)

10.50am S35

A randomised controlled trial comparing combined EBUS/EUS followed by surgical

## Wednesday | December 2010

staging versus surgical staging alone in non-small cell lung cancer: the ASTER study RC Rintoul, KG Tournoy, C Dooms, P De Leyn, AG Nicholson, E Deschepper, OM Dekkers, KF Rabe, JP van Meerbeeck, JT Annema

11.05am **S36** 

> Novel in vivo real time imaging of the bronchial mucosa using an endo-cytoscopy K Shibuya, N Okada, H Kohno, N Iwai, M Noro, B Akikusa, H Hoshino, I Yoshino

11.20am

Comparison of Dynamic Contrast Enhanced MRI (DCE-MRI) parameters with integrated PET-CT and serum mesothelin in the baseline assessment of malignant pleural mesothelioma

C Hooper, D Hall, P Virgo, P White, M Darby, T Hall, | Braybrooke, | Searle, | Lyburn,

N Maskell

**S38** 11.35am

> Fourier Transform Infra-Red (FTIR) spectroscopy on sputum from lung cancer patients, healthy controls and a high-risk cohort

R Ghosal, KE Lewis, P Kloer, S Bayliss, L Mur,

PD Lewis

**S39** 11.50am

> Sub typing of non small cell carcinoma in **EBUS-TBNA** samples M Gautam, K Mohan, T Giles, S Forrest, C Smyth, M Walshaw, B Sukumaran

12.05pm **S40** 

> Early experience of endobronchial ultrasound - miniprobe (EBUS-MP) for investigation of peripheral pulmonary mass lesions JF Tiernan, W Wallace, KM Skwarski

11.00am - 1.00pm

Westminster Suite, 4th Floor SYMPOSIUM

## **JOINT BTS/BALR SYMPOSIUM PART II:** THE ROLE OF DANGER SIGNALS IN **RESPIRATORY DISEASE**

Chaired by: Dr Deborah Clarke (Cambridge) and Professor Ian Sabroe (Sheffield)

TLR polymorphisms and susceptibility to 11.00am lung disease

Professor Nicholas Gay (Cambridge)

**Opportunities for therapeutic intervention** 

11.35am Matrix regulation of lung inflammation and

> fibrosis: location matters Professor Paul Noble (Durham, NC)

## Wednesday I December 2010

**12.10pm** Therapeutic strategies targeting PAMPs and DAMPs

Dr Matthew Robinson (MedImmune)

#### 12.15pm - 2.00pm

LUNCH will be available to purchase in the Cafe in the Pickwick Suite, Ist floor, and the Snack Bar in the Whittle & Fleming Rooms, 3<sup>rd</sup> floor

## 12.30pm – 1.15pm Churchill Auditorium, Ground Floor SNELL MEMORIAL LECTURE

#### Lessons from clinical trials' research

Professor Jeffrey Drazen (Boston)

Introduced by: Dr Ed Neville (Portsmouth)

## 12.30pm – 2.10pm

Elizabeth Windsor Room, 5th Floor POSTER DISCUSSION: PI - PI3

#### Work-related respiratory disease

Chaired by: Professor Sherwood Burge (Birmingham) and Professor Paul Cullinan (London)

- Quality of life related to COPD and occupational exposures

  AC Darby, JC Waterhouse, V Stevens, CG Billings,
  SE Hickman, A Seriki, J Wight, D Fishwick
- P2 Outbreak case definitions for extrinsic allergic alveolitis due to metal working fluids CM Burton, PS Burge, AS Robertson, W Robertson, CAC Pickering, DJ Hendrick, CM Barber
- P3 COPD causation; an assessment of agreement between expert clinical raters AC Darby, R Barraclough, PS Burge, NS Hopkinson, JL Hoyle, RA Lawson, RM Niven, SC Stenton, CJ Warburton, CM Barber, PD Blanc, AD Curran, D Fishwick
- P4 Breathlessness and work performance in older adults in Kent
- P5 J Szram, SJ Schofield, APM Woods, P Cullinan
  Airway responsiveness measurements in
  asthmatic recruits to emergency services
  - asthmatic recruits to emergency services S Wiscombe, V Jeebun, SC Stenton
- Work-related respiratory symptoms in the UK; do primary care physicians miss diagnostic opportunities in occupational asthma?

  [ Hoyle, L Hussey, R Barraclough, R Agius
- P7 Occupational eosinophilic constrictive bronchiolitis with asthma in a foam cutter caused by Soya bean products
  - J Hoyle, K Ballance, H Francis, CAC Pickering, RMc Niven
- P8 Unique outbreak of occupational asthma in toolmakers caused by chrome GI Walters, VC Moore, AD Vellore, AS Robertson, PS Burge

## **SCIENTIFIC PROGRAMME**

P9	The evaluation of an improved method
	of occupational asthma diagnosis from
	timepoint analysis of serial PEF records
	CBSG Burge, VC Moore, AS Robertson,
	CFA Pantin, PS Burge
PI0	Asbestos-induced diffuse pleural thickening -
	a continuing problem
	V Jeebun, SC Stenton
PII	Cardio-respiratory fitness at work; the
	effects of public health guidance?
	M Naughton, JSS Gaynor, L Bradshaw, A Curran,
	S Till, D Fishwick
PI2	Alarming ignorance about the dangers of
	asbestos among UK homeowners
	N Eiser, I Jarrold, H Richardson, K Huntly
PI3	Clinical, radiographic and pulmonary function
	findings in silicosis
	CD Lucas, N Hirani, AJ Simpson, PT Reid

I.00pm – 2.45pm St James's Suite, 4<sup>th</sup> Floor POSTER DISCUSSION: PI4 – P27

#### Clinical and experimental studies in asthma

Chaired by: Professor Andrew Greening (Edinburgh) and Dr Liam Heaney (Belfast)

- P14 Does Vitamin D axis have an effect on the severity of asthma?
  - R Sathyamurthy, S Manney, A Wood, G Perkins, CWebster, MT Krishna, AH Mansur
- P15 Concerns about corticosteroids among people with asthma: implications for clinical interventions
  - V Cooper, L Metcalf, J Upton, S Walker, J Versnel, R Horne
- P16 Fluticasone propionate/formoterol fumarate combination therapy has an efficacy and safety profile similar to that of its individual components administered concurrently: a randomised controlled trial
- D Bumbacea, A Dymek, H Mansikka
  Self reported physical activity levels
  and attitudes towards a structured
  exercise programme in adults with

difficult asthma A Singapuri, SJ Singh, B Hargadon, M Shelley, D Desai, R Carter, CE Brightling, ID Pavord,

- P Bradding, AJ Wardlaw, RH Green
  Experimental infection with low dose
- rhinovirus in asthma

  DJ Jackson, J Del Rosario, SL Johnston
- P19 Psychosocial factors and the morbidity of severe asthma
- P20 A Pooler, A Caress
  The eligibility of patients with difficult

asthma for omalizumab since the change to the treatment criteria

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## **SCIENTIFIC PROGRAMME**

	AJ Burton, B Hargadon, AC Murphy, CE Brightling, ID Pavord, AJ Wardlaw, P Bradding, RH Green
P2I	Success rate of sputum induction in the
	Leicester paediatric severe asthma clinic using
	R Herzallah, KS Staley, M McFeeters,
	C Brightling, P Bradding, D Parker,
P22	H Pandya, E Humphreys, EA Gaillard
PZZ	Factors associated with refractoriness to
	repeat exercise challenge in adults with asthma N Martin, ID Pavord
P23	Effect of omalizumab on oral corticosteroid
	requirements of young children with severe
	asthma; results of a UK survey
	A Kirk, D Spencer, A Radwan
P24	Fluticasone propionate/formoterol fumarate
	combination therapy has a more rapid
	onset of action than fluticasone propionate/
	salmeterol xinafoate in the treatment of
	asthma: a randomised controlled trial
	A Bodzenta-Lukaszyk, A Dymek, H Mansikka
P25	Relationships between airway hyper-
	responsiveness, airway inflammation and
	airway calibre in asthmatic subjects
<b>D</b> 0/	PM Short, SIW Lipworth, BJ Lipworth
P26	Home serial spirometry as an adjunct in the
	diagnosis of vocal cord dysfunction
D27	SY Barnett, B Ziso, SJ Quantrill
P27	Personal allergen exposures are increased by
	changes in sleep position and improved by Temperature-Controlled Laminar Airflow
	RB Gore, RJ Boyle, H Hanna, A Custovic,
	C Gore, P Svensson, JO Warner
	<u> </u>
I.20pm –	3.00pm om, 4 <sup>th</sup> Floor
-	DISCUSSION: P28 – P40
	ry arterial hypertension
	Professor Paul Corris (Newcastle upon Tyne) and
Dr John Wor	
P28	Inflammatory profiling of adventitial
	fibroblasts in pulmonary hypertension
	AC Church, A Melendez, RM Wadsworth,
	AJ Peacock, DJ Welsh
P29	Endothelial cell NF-kB activation is increased
	in human idiopathic PAH
	LC Price, G Caramori, P Dorfmuller, F Perros, J
	Zhu, D Shao, M Humbert, I Adcock, SJ Wort
P30	The changing face of pulmonary hypertension:
	the role of heart and lung disease
	SF Crawley, MK Johnson, AJ Peacock
P31	Disease targeted therapies and effect
	on survival in idiopathic, heritable and
	anorexigen-associated Pulmonary Arterial

Hypertension (PAH)

Y Ling, M Johnson, A Peacock

## Wednesday | December 2010

P32	Delivering pulmonary hypertension services –
	5 year experience from a satellite centre
	S Sturney, S Reddecliffe, H Davies, G Robinson,
P33	J Easaw, J Suntharalingam, G Coghlan
F33	Iron deficiency independently predicts survival in idiopathic pulmonary arterial
	hypertension
	CJ Rhodes, LS Howard, M Busbridge,
	D Ashby, E Kondili, JSR Gibbs, J Wharton,
	MR Wilkins
P34	Characterising T cell sub-populations in
	pulmonary hypertension
	AJ Shepherd, K Hopkinson, DG Kiely,
	CE Elliot, R Condliffe, DC Crossman,
	AG Pockley, A Lawrie
P35	Elevated tricuspid regurgitation jet velocity
	on echocardiogram in Sickle Cell Disease
	is associated with raised inflammatory
	mediators and low steady state haemoglobin
	but not other markers of haemolysis
	H Ranu, E Connell, C Hunt, F Boa, J Lee,
P36	L Brown, F Willis, H Buyck, BP Madden
F30	Functional class and gas transfer are useful tools in the assessment of pulmonary
	hypertension associated with Sickle Cell
	Disease
	H Ranu, L Brown, J Lee, BP Madden
P37	Flying – safer than we thought? A
	questionnaire-based study of 156 individuals
	with hereditary haemorrhagic telangiectasia;
	95 with pulmonary AVMs
	CG Mason, CL Shovlin
P38	Which patients with pulmonary
	arteriovenous malformations are dyspnoeic?
	Retrospective analysis of a single centre
	2005 – 2010 cohort
	V Santhirapala, JT Springett, H Wolfenden,
	HC Tighe, CL Shovlin
P39	Pulmonary Hypertension (PH) associated
	with lung disease/hypoxia
	J Hurdman, RA Condliffe, C A Elliot, I Sabroe,
P40	DG Kiely
F40	A comparison of the value of oxygen shunt studies and cardiac bubble echo as
	screening tools for pulmonary arteriovenous
	malformations in patients with suspected
	hereditary haemorrhagic telangiectasia
	JW Donaldson, K Pointon, T Mathew,

I.30pm – 3.00pm
Caxton Lounge East, 2<sup>nd</sup> Floor
MODERATED POSTER DISCUSSION: P83 – P95
Respiratory education and training issues
Chaired by: Dr Ian Forrest (Newcastle upon Tyne) and
Dr Duncan Powrie (Southend)

#### Wednesday | December 2010 **P83** Validation of a novel porcine – resin thorax model for chest drain insertion training TR Naicker, EA Hughes, DT McLeod P84 The impact of a multidisciplinary educational programme on the prescribing of oxygen in an Acute Trust H Khachi, M Burman, L Walters, R Sinha-Ray, S Antoniou, S Mandal **P85** Pictorial representation of respiratory examination in hospital notes N Mahmood, C Gobbett, S Malik, C Houghton, G Ng Man Kwong **P86** Chest drain insertion training; is simulation training the answer? TR Naicker, DT McLeod **P87** Evidence based emergency oxygen guidelines are not being followed in the emergency department SM Wallace, LE Doy, EN Kedgley, WM Ricketts **P88** The Aintree Hospital Pleural Disease Training Programme: achieving competency in intercostal drain insertion and in management of pleural problems on the "acute take" B Chakrabarti, LG Spencer, A Kwok, P Albert, C| Warburton, |E Earis **P89** A decade on still not enough time for asthma C Mordaunt, SJ Billington, MG Pearson, **P90** Simulated bronchoscopy training delivered by experienced peers improves confidence of new trainees ARC Patel, S Mandal, JJP Goldring **P91** Can health care professionals in a respiratory unit correctly set an oxygen flow rate on a standard oxylitre medical regulator? SJ Billington, C Mordaunt, RM Angus, LG Spencer **P92** Training opportunities in thoracic ultrasound for respiratory specialist trainees in the West Midlands Deanery TS Jordan, F Choudhary, R Heinink, S Mathew, I Hussain, M Allen **P93** A simulated bronchoscopy course for new specialist trainees S Mandal, ARC Patel, JJP Goldring **P94** Do health care professionals have sufficient knowledge of inhaler techniques in order to educate their patients effectively in their use? M Baverstock, N Woodhall, V Maarman **P95** Oxygen delivery in an acute hospital setting J Maycock, K Ellis, P Mullholland, L Bate, V Sadananda, D Nazareth, S Agarwal,

P Stockton

## SCIENTIFIC PROGRAMME

1.30pm - 3.15pmMountbatten Room, 6th Floor SYMPOSIUM

## **IOINT BTS/BPRS SYMPOSIUM: CYSTIC** FIBROSIS - HOW PAEDIATRICIANS CAN **HELP ADULT PHYSICIANS**

Chaired by: Dr Steven Conway (Leeds) and Dr David Honeybourne (Birmingham)

1.30pm The impact on future CF adults of newborn

Dr Kevin Southern (Liverpool)

1.55pm Difficult diagnoses: is it CF?

Dr Stephen | Bourke (Newcastle upon Tyne)

2.20pm Practical lessons from iatrogenic disease

Dr Alan Smyth (Nottingham)

2.45pm Newer therapies, drugs and genes

Dr Jane Davies (Brompton)

2.00pm - 3.30pm

Westminster Suite, 4th Floor

SYMPOSIUM: TI-T6

#### BTS/BLF/BALRYOUNG INVESTIGATORS **SYMPOSIUM**

Chaired by: Professor Andrew Fisher (Newcastle upon Tyne) and Professor Nicholas Morrell (Cambridge) Judging panel: Professor Andrew Fisher (Newcastle upon Tyne), Dr Sam Janes (London), Professor Ann Millar (Bristol) and Professor Nicholas Morrell (Cambridge)

2.00pm ΤI

> Rev-erbα, a novel anti-inflammatory target, modifies the circadian oscillation of pulmonary inflammation

| Blaikley, L Green, | Gibbs, S Farrow,

A Loudon, D Singh, D Ray

2.15pm

Blockade of intraalveolar p55 TNF-receptor signalling by a domain antibody decreases inflammation and oedema in an in vivo mouse model of ventilator-induced lung injury S Bertok, MR Wilson, PJ Morley, R de Wildt, A Bayliffe, M Takata

2.30pm **T3** 

> Tissue inhibitor of Metalloproteinase-3 (TIMP3) protects against inflammatory processes in Interstitial Lung Disease (ILD) MJ Heightman, HL Booth, GJ Laurent,

MR Hill, RM McAnulty

2.45pm

Increased reticular basement membrane thickness but NOT airway smooth muscle in endobronchial biopsies of severe preschool wheezers

R O'Reilly, T Oates, J Zhu, PK Jeffery, A Bush,

S Saglani

## 3.00pm**T5** KCa3.1 ion channel blockers restore corticosteroid sensitivity in cytokine-treated airway smooth muscle (ASM) cells from both COPD and asthmatic patients L Chachi, A Shikotra, A Sutcliffe, C Brightling, P Bradding, Y Amrani 3.15pm **T6** Acute exacerbations of chronic obstructive pulmonary disease: identification of phenotype-

specific biomarkers and biological clusters M Bafadhel, S McKenna, S Terry, V Mistry, C Reid, P Haldar, M McCormick, K Haldar, T Kebadze, A Duvoix, K Lindbald, P Rugman, P Dodson, M Jenkins, P Newbold, P Venge, RH Green, DA Lomas, MR Barer, SL Johnston, ID Pavord, CE Brightling

2.00pm - 3.40pmHenry Moore Room, 4th Floor **POSTER DISCUSSION: P41 – P53** 

**Pulmonary rehabilitation** Chaired by: Dr William Man (London) and

Professor Sally Singh (Leicester)

- **P41** The COPD Assessment Test (CAT) used to evaluate outcome in pulmonary rehabilitation QC Jones, DW Eyre, J Young, E Tucker, J Riley, M Hardinge
- **P42** Comparison of a one and two walk protocol for the Endurance Shuttle Walk Test when measuring change due to therapeutic intervention in COPD patients SE Roberts, M Stern, FM Schreuder, T Watson
- P43 Do changes in objective outcome measures match patient-reported experience of pulmonary rehabilitation?
  - RP Fowler, KA Ingram, AL Clark, CM Nolan, WD Man
- **P44** COPD patients derived benefits from attending PR: "This has given me my life back" L Matheson, J O'Connor, T Cartwright, CH Blunt, A Clow, C Lee, S Elkin
- **P45** Outcomes following pulmonary rehabilitation for patients with restrictive lung diseases with or without oxygen therapy VL Warrington, | Scullion, L Sewell, | Williams, S Singh
- **P46** Effects of Physical Activity Top Up "PAT on the back" programme on exercise capacity and healthcare utilisation for people with Chronic Obstructive Pulmonary Disease (COPD) G Arbane, A Douiri, L Enright, L Haggis, T Poulter, R Garrod
- **P47** Outcomes of static versus continuous rolling community pulmonary rehabilitation (PR) programmes IL Tomkinson, M Rossdale

## Wednesday | December 2010

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Attendance rates and response to pulmonary rehabilitation
CM Nolan, KA Ingram, RP Fowler, AL Clark, WD Man
Seasonal effect upon attendance at a
pulmonary rehabilitation programme
GE Walker, C Lee, SL Elkin
Facilitation of continued exercise via patient volunteers with Chronic Obstructive
Pulmonary Disease (COPD) following a
pulmonary rehabilitation programme: a
feasibility study
CA Langley-Johnson, E Jenkin, CAE Dyer,
K Gruffydd-Jones, N Harris, M Reed, G Taylor
Group-based pulmonary rehabilitation
delivered to the home via the Internet – a
feasibility study
DJ Godden, J Colligan, A Aitken, A Taylor
Is a Pulmonary Rehabilitation (PR)
programme effective in reducing severe
symptoms of anxiety and depression in
patients with COPD?
S Harrison, N Greening, J Williams, S Singh
The effect of co-morbidities on response
to pulmonary rehabilitation
KA Ingram, RP Fowler, AL Clark, CM Nolan,
WD Man

2.00pm - 3.45pm**Churchill Auditorium, Ground Floor** SYMPOSIUM

## SLEEP: THE YOUNG, THE ELDERLY AND THE OBESE

Chaired by: Professor Sir Neil Douglas (Edinburgh) and Dr Anita Simonds (London)

2.00pm Do children need sleep labs? Dr Rob Primhak (Sheffield)

2.25pm Obstructive sleep apnoea in older people Professor Mary Morrell (London)

2.50pm Obesity-related respiratory failure:

pathophysiology to clinical outcomes

Dr Nicholas Hart (London)

3.15pm Obstructive sleep apnoea: diabetes and the

metabolic syndrome

Dr Sophie West (Newcastle upon Tyne)

3.00pm - 4.30pm

COFFEE/TEA will be served in the

Whittle & Fleming Rooms and Benjamin Britten Lounge, 3<sup>rd</sup> floor and the Mountbatten Lounge, 5<sup>th</sup> floor (3.15pm - 3.30pm)

## Wednesday I December 2010

St James's Suite, 4th Floor POSTER DISCUSSION: P54 – P62 Changing patterns of mycobacterial disease Chaired by: Dr John Moore-Gillon (London) and Dr John Watson (Leeds) P54 Do the NICE new entrant TB screening guidelines under-diagnose cases of latent TB infection? D Thomas, M Jarvis, A Williams P55 Post-bronchoscopy sputum: increasing the diagnostic yield in smear negative pulmonary tuberculosis PM George, M Mehta, J Dhariwal, A Singanayagam, CE Raphael, M Salmasi, DW Connell, P Molyneaux, M Wickremasinghe, A Jepson, OM Kon P56 High incidence of tuberculosis in patients with chronic kidney disease in a tertiary referral unit P Palchaudhuri, A Riding, P Begum, M Ostermann, H Milbum P57 The London TB Metrics: are targets achievable in a local district hospital clinic? LSC Lok, L Ridge, J Barrett, DJF Mack, DD Creer P58 What does pulmonary tuberculosis (TB) look like in London? C Brown, S Natas, A Salam, R Breen P59 Why do we often fail to meet the gold standard for the diagnosis of active tuberculosis? S Huq, M Haris, M Gautam, PDO Davies Questionable utility of T-SPOT testing in a TB exposure incident on a clinical haematology unit J Brebner, J Mann, H Jones, W Bladen, N Syed, P Dawkins P61 Pulmonary nontuberculous mycobacterial (NTM) culture is common following lung transplantation, and NTM lung disease is associated with poor prognosis TT Gorsuch, I Crossingham, M Cullen, MAI-Aloul P62 Are we missing opportunities to obtain a microbiological diagnosis of TB? Z Al-Nakeeb, V Gupta, C Bell, M Woodhead	3.00pm -	4.15pm
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P58 What does pulmonary tuberculosis (TB) look like in London?  C Brown, S Natas, A Salam, R Breen  P59 Why do we often fail to meet the gold standard for the diagnosis of active tuberculosis?  S Huq, M Haris, M Gautam, PDO Davies  P60 Questionable utility of T-SPOT testing in a TB exposure incident on a clinical haematology unit  J Brebner, J Mann, H Jones, W Bladen, N Syed, P Dawkins  P61 Pulmonary nontuberculous mycobacterial (NTM) culture is common following lung transplantation, and NTM lung disease is associated with poor prognosis  TT Gorsuch, I Crossingham, M Cullen, M Al-Aloul  P62 Are we missing opportunities to obtain a microbiological diagnosis of TB?  Z Al-Nakeeb, V Gupta, C Bell, M Woodhead	P57	The London TB Metrics: are targets
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P58 What does pulmonary tuberculosis (TB) look like in London?  C Brown, S Natas, A Salam, R Breen  Why do we often fail to meet the gold standard for the diagnosis of active tuberculosis?  S Huq, M Haris, M Gautam, PDO Davies  Questionable utility of T-SPOT testing in a TB exposure incident on a clinical haematology unit  J Brebner, J Mann, H Jones, W Bladen, N Syed, P Dawkins  Pollmonary nontuberculous mycobacterial (NTM) culture is common following lung transplantation, and NTM lung disease is associated with poor prognosis  TT Gorsuch, I Crossingham, M Cullen, M Al-Aloul  P62 Are we missing opportunities to obtain a microbiological diagnosis of TB?  Z Al-Nakeeb, V Gupta, C Bell, M Woodhead		LSC Lok, L Ridge, J Barrett, DJF Mack,
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P60 Questionable utility of T-SPOT testing in a TB exposure incident on a clinical haematology unit  J Brebner, J Mann, H Jones, W Bladen, N Syed, P Dawkins  Pulmonary nontuberculous mycobacterial (NTM) culture is common following lung transplantation, and NTM lung disease is associated with poor prognosis  TT Gorsuch, I Crossingham, M Cullen, M Al-Aloul  P62 Are we missing opportunities to obtain a microbiological diagnosis of TB?  Z Al-Nakeeb, V Gupta, C Bell, M Woodhead		standard for the diagnosis of active
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Z Al-Nakeeb, V Gupta, C Bell, M Woodhead	P62	Are we missing opportunities to obtain a
M Woodhead		microbiological diagnosis of TB?
		Z Al-Nakeeb, V Gupta, C Bell,
2.15		M Woodhead
	2.15	

## 3.15pm – 4.15pm Abbey Room, 4<sup>th</sup> Floor POSTER DISCUSSION: P63 – P70

## Investigating pleural disease

Chaired by: Dr Nabeel Ali (Sutton-in-Ashfield) and Dr Nicholas Maskell (Bristol)

## **SCIENTIFIC PROGRAMME**

D/2	A consequence of the consequence
P63	A prospective observational trial examining
	the diagnostic utility of serum and pleural
	fluid procalcitonin in the initial investigation
	of unilateral pleural effusions
P64	CE Hooper, AJ Morley, JE Harvey, NA Maskell Course and variation of the intercostal
P04	
	artery by computed tomography
	NM Rahman, EJ Helm, O Talakoub,
P65	RJO Davies, FV Gleeson
P03	Is serum N-terminal pro B type natriuretic
	peptide (NT-proBNP) measurement useful
	in the investigation of unilateral pleural
	effusions? A prospective observational study
	CE Hooper, I Rider, RS Finn, AJ Morley,
	JE Harvey, A Skyrme-Jones, NA Maskell
P66	Histone deacetylase inhibitor CBHA
	attenuates the expression of plasminogen
	activator inhibitor-1 in human pleural
	mesothelial cells
	C-L Chung, W-L Chen, Y-W Cheng, Y-C Chou,
	M-J Hsu, C-J Hsiao, J-R Sheu, G Hsiao
P67	Outcomes from surgical management of
	pleural infection: 12 year experience from
	a tertiary cardiothoracic centre
	DJB Marks, M Fisk, CY Koo, SF Lee, D Lawrence,
	RF Miller, A Zumla
P68	Surgery for mesothelioma: the case for
	macroscopic complete resection
	KKW Lau, A Nakas, DA Waller
P69	Mesothelioma in the 21st Century. A one
	year survey of malignant mesothelioma in
	the South West of the UK
	R Bhatnagar, S Earl, K Lansdell, TJ Howell
P70	Talc slurry pleurodesis: does mixing talc with
	50% dextrose rather than normal saline
	increase success rate?
	A Khanna, C Mackinlay, A Kerry
	· · · · · · · · · · · · · · · · · · ·
2 20	F 00

## 3.30pm – 5.00pm Mountbatten Room, 6<sup>th</sup> Floor POSTER DISCUSSION: P71 – P82

#### Paediatric lung diseases

Chaired by: Dr Stephen Turner (Aberdeen) and Dr David Spencer (Newcastle upon Tyne)

P7I	Reduced airway beta-defensin 2 levels in children with cystic fibrosis and Vitamin
	D-deficiency
	K Naderi, J Donovan, S Brown, N Leaver, H-L Tan
	EWFW Alton, A Bush, JC Davies
P72	Feasibility of recruiting newborn babies

P72 Feasibility of recruiting newborn babies with cystic fibrosis diagnosed by newborn screening to a clinical study with invasive outcome measures

J Chudleigh, A-F Hoo, SA Prasad, D Ahmed,
A Bush, C Wallis, J Stocks

#### **P73** The complexities of defining atopy in severe childhood asthma | Frith, L Fleming, C Bossley, N Ullmann, A Bush **P74** British Asthma Guideline revision does affect prescribing patterns in children H Elkout, IS McLay, CR Simpson, PI Helms **P75** Clinical predictors of continuous positive airway pressure requirement in bronchiolitis I Evans, M Marlais, E Abrahamson **P76** General and respiratory health outcomes in adult survivors of bronchopulmonary dysplasia: a systematic review A Gough, D Spence, MA Linden, L McGarvey, H Halliday **P77** Children's exposure to airborne fine particulate matter at home and asthma outcomes K Woods, A Apsley, S Semble. SW Turner **P78** Impact of severe allergic asthma in children: highlighting a role for understanding the family perspective KG Staley, R Herzallah, H Pandya, E Humphreys, E Gaillard **P79** Impulse oscillometry for the assessment of lung function deficits associated with preschool wheezing U Banerjee, S Goldring, | Kirkby, | Stocks, 10 Warner, RI Boyle **P80** Pre-operative assessment of children undergoing scoliosis surgery AL Ross Russell, S Charlton, ER Mooney, C Ward, RI Ross Russell **P81** The changing incidence of paediatric empyema in NE England 2006 - 2010 MF Thomas, C Simmister, SP Rushton, DA Spencer **P82** What is the role of chest computed tomography in children with parapneumonic

effusion?

E Gaillard

A Parmar, G Peek, R Firmin, H Pandya,

## Wednesday I December 2010

4.00pm - 4.30pm**Churchill Auditorium, Ground Floor** THE PRESIDENT'S ADDRESS

Learning in respiratory medicine

Dr Ed Neville (Portsmouth)

4.30pm - 4.45pm**Churchill Auditorium, Ground Floor** PRESENTATION OF THE BTS MEDAL

4.45pm - 5.00pm **Churchill Auditorium, Ground Floor** THE ERS PRESIDENT'S ADDRESS Achievements of the Year of the Lung and Vision of the ERS Presidency

5.00pm - 5.30pm**Churchill Auditorium, Ground floor** BTS ANNUAL GENERAL MEETING (BTS members only)

Professor Marc Decramer (Leuven)

5.30pm - 6.30pm Sanctuary Foyer, Ground Floor THE PRESIDENT'S RECEPTION -YOUNG INVESTIGATORS AND MEDICAL STUDENT AWARDS

## **Thursday 2 December 2010**

8.00am - 9.00am

COFFEE/TEA will be served in the Whittle & Fleming Rooms, 3<sup>rd</sup> floor

8.45am - 4.00pm

Whittle & Fleming Rooms, 3rd floor

**POSTER VIEWING** 

Authors present: 10.00am - 11.00am

P96-P109

Clinical studies in cystic fibrosis

Discussion of abstracts will take place from 1.30pm to

3.15pm in the Henry Moore Room, 4th floor

P110-P121

COPD: sputum and exacerbations

Discussion of abstracts will take place from 1.45pm to

3.15pm in the St James's Suite,  $4^{\text{th}}$  floor

P122-P136

Respiratory physiology: old and new concepts

Discussion of abstracts will take place from  $1.45 \mathrm{pm}$  to

3.45pm in the Abbey Room, 4th floor

P137-P151

Clinical interventions in COPD

Discussion of abstracts will take place from 3.30pm to

5.30pm in the St James's Suite, 4th floor

P152-P159

Clinical aspects of NIV

Discussion of abstracts will take place from 4.00pm to

5.00pm in the Westminster Suite, 4th floor

P160-P171

Improving patient outcomes in TB

Discussion of abstracts will take place from 4.00pm to

5.30pm in the Elizabeth Windsor Room, 5th floor

P172-P184

Therapeutic interventions in asthma and airways disease

Discussion of abstracts will take place from 4.00pm to

5.40pm in the Abbey Room, 4th floor

8.45am - 4.00pm

Caxton Lounge East, 2nd Floor

**MODERATED POSTER VIEWING** 

Authors present: 10.00am - 11.00am

P185-P190

Challenges in smoking cessation

Discussion of abstracts will take place from 1.30pm to

2.15pm in the Caxton Lounge East, 2nd floor

P191-P196

Clinical studies in lung cancer

Discussion of abstracts will take place from 2.15pm to

3.00pm in the Caxton Lounge East, 2<sup>nd</sup> floor

8.15am - 8.45am

Fleet Room, 2<sup>nd</sup> Floor

THE BTS JOURNAL CLUB

Interstitial lung disease

Dr Toby Maher, London

## **SCIENTIFIC PROGRAMME**

8.30am - 10.15am

**Churchill Auditorium, Ground Floor** 

SYMPOSIUM

BTS/BTOG JOINT SYMPOSIUM: DEVELOPMENTS IN LUNG CANCER THERAPEUTICS

Chaired by: Dr Paul Beckett (Burton upon Trent) and

Dr Denis Talbot (Oxford)

**8.30am** EGRF targeted therapies: from promise to

practice

Professor David Ferry (Wolverhampton)

**9.10am** Radiofrequency ablation – its role in lung

cancer

Dr Paras Dalal (London)

**9.40am** Stereotactic radiotherapy – will it

make surgery for early lung cancer

redundant?

Dr Matthew Hatton (Sheffield)

8.30am - 10.15am

St James's Suite, 4th Floor

SYMPOSIUM

# JOINT BTS/BPRS SYMPOSIUM: OXYGEN – PLENTY OF GUIDELINES, NOT MUCH EVIDENCE

Chaired by: Dr Rupert Jones (Plymouth) and

Dr Rob Primhak (Sheffield)

**8.30am** Home oxygen for adults – new issues

Professor Wisia Wedzicha (London)

**8.55am** Home oxygen for children – unanswered

questions

Dr Ian Balfour-Lynn (London)

**9.20am** Emergency oxygen for adults –

controversies

Dr Ronan O'Driscoll (Salford)

**9.45am** Oxygen for neonates – benefits and

harm

Professor Ben Shaw (Liverpool)

8.30am - 10.15am

Henry Moore Room, 4<sup>th</sup> Floor

SPOKEN SESSION: S41 - S46

P Clark

#### Immunity and fibrosis in chronic asthma

Chaired by: Professor Fan Chung (London) and Professor Donna Davies (Southampton)

8.35am **S41** 

Expression of functional receptor activity modifying protein (RAMP)-I by airway epithelial cells with dysregulation in asthma AB Kay, K Bonner, HH Kariyawasam, FR Ali,

Thorax 2010;65(Suppl IV) xxiii

## **SCIENTIFIC PROGRAMME**

8.50am **S42** 

Airway epithelial toll receptor expression in asthma and its relationship to disease severity L Cottey, N Jayasekera, H-M Haitchi,

B Green, C Grainge, P Howarth

9.05am S43

The expression of CRACM ion channels in

human lung mast cells

I Ashmole, SM Duffy, M Leyland, P Bradding

9.20am **S44** 

Increased expression of immunoreactive thymic stromal lymphopoetin in severe

asthma

A Shikotra, B Hargadon, M Shelley, J Bennett, C Brightling, C Austin, DF Choy, LC Wu,

JR Arron, P Bradding

9.35am **S45** 

Functional KCa3.1 K+ channels are required

for human fibrocyte migration

SM Duffy, G Cruse, S Singh, C Doe, R Saunders,

CE Brightling, P Bradding

9.50am **S46** 

Activation of TGF- $\beta$  by airway smooth muscle cells via the  $\alpha V\beta 5$  Integrin in

asthmatic airway remodelling

AL Tatler, AE John, L Jolly, AJ Knox, L Pang, G Jenkins

8.30am - 10.30am

Westminster Suite, 4th Floor SPOKEN SESSION: S47 – S53

## Inflammation in lung injury: the key mediators

Chaired by: Dr Mark Griffiths (London) and Dr Cecilia O'Kane (Belfast)

8.35am **S47** 

RAGE-mediated cytokine release from leukocytes: implications for systemic

inflammation

M Kaneshamoorthy, BC Creagh-Brown,

A Burke-Gaffney

8.50am **S48** 

NGAL inhibits cytoskeletal re-organisation, MMP-2 production and invasion in alveolar epithelial cells in an in vitro model of acute lung injury

CM O'Kane, E Moran, DF McAuley

9.05am **S49** 

Is the development of acute lung injury influenced by increased levels of IL17 as a

result of Treg/TH17 imbalance?

RCA Dancer, V D'Souza, L Jeffery, D Sansom,

CR Bassford, G Perkins, DR Thickett

## **Thursday 2 December 2010**

9.20am **S50** 

Evaluation of Secretory Leucoprotease Inhibitor (SLPI) as an anti-inflammatory therapy for donor lung inflammation HR Walden, DM Karamanou, CR Fox, AJ Rostron, JA Kirby, AJ Simpson, JH Dark,

AJ Fisher

9.35am **S51** 

Thioredoxin modifies MIF release from human monocytes following stimulation

with LTA and LPS

SK Leaver, GJ Quinlan, TW Evans,

A Burke-Gaffney

9.50am **S52** 

The role of the receptor for advanced end products (RAGE) in acute lung injury (ALI)

BA Thompson, CW Stitt, DF McAuley,

CM O'Kane

10.05am \$53

Nanoparticles cause pulmonary inflammation

through IL-Talpha and partial activation of

the NLRP3 inflammasome

NR Riteau, AY Yazdi, LB Baron, AG Gombault,

GG Guarda, JT Tschopp, IC Couillin

8.45am - 10.15am

Elizabeth Windsor Room, 5<sup>th</sup> Floor SPOKEN SESSION: S54 – S58

## **Orphan lung diseases**

Chaired by: Dr Howard Branley (London) and Dr Simon Johnson (Nottingham)

8.50am **S54** 

Characterising sarcoidosis using a web-based

registry: a pilot study

RK Coker, CWang, A Sepahzad, NJ Roberts,

MR Partridge

9.05am **\$55** 

Pulmonary fibrosis with and without

co-existing connective tissue disease: does

it affect survival?

V Navaratnam, N Ali, CJP Smith, A Fogarty,

**RB** Hubbard

9.20am **\$56** 

Flat trachea syndrome - an under-diagnosed

and under-treated condition?

G Niranjan, JFK Marzouk

9.35am **\$57** 

Evaluation of circulating biomarkers in

lymphangioleiomyomatosis

WYC Chang, LM Magowan, SR Johnson

## **Thursday 2 December 2010**

9.50am **S58** 

Pulmonary Langerhans' Cell Histiocytosis

(PLCH): a new national register

RH Mason, NM Foley, MR Hetzel, H Branley,

J Suntharalingam

8.45am - 10.30am

Mountbatten Room, 6th Floor

**SYMPOSIUM** 

## NOVEL MECHANISMS AND NEW THERAPIES FOR PULMONARY ARTERIAL HYPERTENSION (PAH)

Chaired by: Dr David Kiely (Sheffield) and Professor Andrew Peacock (Glasgow)

**8.45am** Inflammation and PAH: lessons from

schistosomiasis

Professor Nicholas Morrell (Cambridge)

**9.10am** The role of cell-based therapies in the

treatment of PAH

Dr Duncan Stewart (Ottawa)

**9.35am** Manipulating the cyclic GMP signalling

pathway in PAH

Professor Martin Wilkins (London)

10.00am On the TRAIL of new biomarkers

in PAH

Dr Allan Lawrie (Sheffield)

8.45am - 10.30am

Rutherford Room, 4th Floor SPOKEN SESSION: S59 - S64

#### αI-antitrypsin: what it tells us about COPD

Chaired by: Dr Ravi Mahadeva (Cambridge) and Professor Robert Stockley (Birmingham)

8.50am **\$59** 

 $\mbox{A}\alpha\mbox{-Val360:}\ a$  plasma marker of neutrophil elastase activity and COPD disease

severity

R Carter, MJ Ungurs, RA Stockley

9.05am **S60** 

Cigarette smoke induced oxidation of alpha-I antitrypsin amplifies the pulmonary

inflammatory response S Alam, Z Li, R Mahadeva

9.20am **S61** 

Cigarette smoke promotes polymerisation

of  $Z \alpha I$ -antitrypsin

S Alam, Z Li, S Janciauskiene, R Mahadeva

9.35am **S62** 

Characterisation of a novel 'pseudo-Z'

variant of  $\alpha I$ -antitrypsin

M-P Nyon, L Segu, B Roussel, N Kalsheker, DA Lomas, K Thalassinos, B Gooptu

## **SCIENTIFIC PROGRAMME**

9.50am **S63** 

Use of NMR spectroscopy and nanospray mass spectrometry to characterise binding of lead compounds for drug design in

 $\alpha$ I-antitrypsin deficiency

M-P Nyon, G Levy, J Kirkpatrick, U Ekeowa, DA Lomas, LD Cabrita, J Christodoulou,

A McKay, B Gooptu

10.05am S64

Changes in physiological phenotypes of  $\alpha$ -I-antitrypsin deficiency with time H Ward, MR Miller, RA Stockley

8.45am - 10.30am

Abbey Room, 4th Floor

SPOKEN SESSION: S65 - S70

NIV: the acute and domiciliary settings

Chaired by: Dr Mark Elliott (Leeds) and Dr Anita Simonds (London)

(London)

8.50am **S65** 

Interim data from a randomised controlled trial of average volume-assured pressure support (AVAPS) versus spontaneoustimed (ST) pressure support in obesity hypoventilation syndrome (OHS) P Murphy, AC Davidson, AJ Williams,

J Moxham, A Simonds, M Hind, MI Polkey, N Hart

9.05am **S66** 

A randomised crossover trial of Pressure Support Ventilation (PSV) vs Pressure Controlled Ventilation (PCV) in stable

hypercapnic Chronic Obstructive Pulmonary

Disease (COPD)

KA Brignall, PB Murphy, J Moxham, M Polkey, AC

Davidson, N Hart

9.20am **S67** 

Phenotypic differences between obese patients with eucapnic and hypercapnic sleep-disordered breathing (SDB) KK Lee, E Suh, J Peisch, A McGlone, A Mistry, P Murphy, A J Williams,

A C Davidson, N Hart

9.35am **\$68** 

Evaluation of noninvasive ventilation in management of acute severe asthma D Chaudhry, M Indora, V Sangwan, IPS Sehgal,

A Chaudhry

9.50am **S69** 

HOT HMV UK: Prevalence of persistent significant hypercapnia following acute exacerbation of COPD (AECOPD) requiring

non-invasive ventilation (NIV)
P Murphy, GJ Gibson, MI Polkey, N Hart

#### 10.05am S70

Non-invasive ventilation (NIV) in chronic obstructive pulmonary disease (COPD) exacerbations with acute hypercapnic respiratory failure (AHRF) with pH A Thomas, B Beauchamp, B Chakraborty, E Gallagher, A Ali, R Mukherjee, D Banerjee

#### 10.00am - 11.00am

COFFEE/TEA will be served in the Whittle & Fleming Rooms and Benjamin Britten Lounge, 3rd floor

#### 10.30am - 12.15pm

**Churchill Auditorium, Ground Floor SYMPOSIUM** 

#### PLENARY SCIENTIFIC SYMPOSIUM

Chaired by: Professor Edwin Chilvers (Cambridge) and

Professor Andrew Fisher (Newcastle upon Tyne)

10.30am Genetic and molecular mechanisms in the

pathogenesis of COPD

Professor David Lomas (Cambridge)

The epidemiology of chronic lung disease: 10.55am

what does it teach us?

Professor Richard Hubbard (Nottingham)

11.20am The lungs at work: future directions?

Dr David Fishwick (Sheffield)

11.45am Pulmonary AV malformations: from patient,

> to bench, to bedside Dr Claire Shovlin (London)

#### 10.30am - 12.15pm

Elizabeth Windsor Room, 5th Floor SPOKEN SESSION: S71 - S76

## Novel outcomes and interventions in pulmonary rehabilitation

Chaired by: Ms Julia Bott (Surrey) and Dr Michael Steiner (Leicester)

**S71** 10.35am

> Ambulatory oxygen improves the effectiveness of pulmonary rehabilitation

(PR) in selected patients

FJ Dyer

**S72** 10.50am

> The utility of the modified BODE index (incorporating the incremental shuttle walking test) in assessing survival in patients with COPD screened for Pulmonary Rehabilitation (PR)

JEA Williams, V Warrington, SJ Singh, R Green

11.05am **S73** 

> 4-metre gait speed as a functional outcome measure in patients with Chronic Obstructive Pulmonary Disease (COPD) AV Donaldson, BE Garfield, MS Patel, AL Clark, MI Polkey, WD Man

## **Thursday 2 December 2010**

#### 11.20am

Effect of pulmonary rehabilitation on the Short Physical Performance Battery (SPPB)

MS Patel, AL Clark, KA Ingram, RP Fowler, AV Donaldson, SS Kon, MI Polkey, WD Man

11.35am

Is a practice incremental shuttle walk test always necessary and is it influenced by MRC dyspnoea grade?

AK Dhaliwal, L Sewell, R Collier, SJ Singh

11.50am **S76** 

> The COPD assessment test score (CAT) - amulticentre, prospective study of response to pulmonary rehabilitation [W Dodd, L Hogg, | Nolan, H Jefford, VM Lord, R Garrod, MI Polkey, PW Jones,

WD-C Man, NS Hopkinson

#### 12.15pm - 2.00pm

LUNCH will be available to purchase in the Cafe in the Pickwick Suite, Ist floor, and the Snack Bar in the Whittle & Fleming Rooms, 3rd floor

#### 12.30pm - 1.15pm

**Churchill Auditorium, Ground Floor** THE BTS LECTURE

## Acute lung injury: new opportunities with cell-based therapy

Professor Michael Matthay (San Francisco) Introduced by: Professor Michael Morgan (Leicester)

#### 1.30pm - 2.15pm

Caxton Lounge East, 2nd Floor

#### **MODERATED POSTER DISCUSSION: P185 – P190**

#### Challenges in smoking cessation

Chaired by: Dr Elin Roddy (Shrewsbury) and Dr Michael Ward (Sutton-in-Ashfield)

P185 Public attitudes to smoking in cars E De Lacy, R Morrison, M Dockrell,

T Buchanan, KE Lewis

P186 Public attitudes to the UK smoking ban M Dockrell, E DeLacy, R Morrison,

T Buchanan, KE Lewis

P187 Parents support ban of smoking in cars where minors are present

I Jarrold, K Huntly, T Turkel, N Eiser

**P188** An evaluation of a novel semi-quantitative saliva test for cotinine and other nicotinic

metabolites

GF Cope, GV O'Donovan, B Savage,

HJ Milburn

P189 Smoking status predicts benefit from breathing retraining for hyperventilation CA Maguire, AG Robson, J Pentland,

D McAllister, JA Innes

## **Thursday 2 December 2010**

P190 Attitudes of health care professionals towards smoking cessation S Pearce, I Maycock, C McCauley, D Nazareth, P Stockton

1.30pm - 3.15pmHenry Moore Room, 4th Floor **POSTER DISCUSSION: P96 - P109** 

Clinical studies in cystic fibrosis

Chaired by: Dr Mary Carroll (Southampton) and

Dr Daniel Peckham (Leeds)

**P96** Haplotype variability in Pseudomonas aeruginosa (Psa) strains in the adult CF population A Ashish, | Fothergill, E Mowat, | Greenwood, C Winstanley, M Walshaw

**P97** Do intravenous antibiotics influence arterial stiffness in adults with cystic fibrosis? JH Hull, R Garrod, TB Ho, RK Knight, IR Cockcroft, DJ Shale, CE Bolton

**P98** Accuracy of routine antibiotic susceptibility testing of sputum samples in adult cystic fibrosis patients colonised with Pseudomonas aeruginosa (Psa)

A Ashish, | Fothergill, E Mowat, S Hug, M Harris, C Winstanley, M Walshaw

**P99** Social deprivation and clinical outcomes in adult CF patients

A Ashish, D Nazareth, A Tsoulkani, G Priona, M Harris, M Ledson, M Walshaw

**P100** An investigation of mutator Pseudomonas aeruginosa in chronically infected cystic fibrosis patients treated for pulmonary exacerbation

> T Gouliouris, CR Laughton, DM Pearce, V Athithan, JE Foweraker

PIOI Surface parasternal intercostal electromyogram (sEMGpara) as a

monitoring tool in cystic fibrosis C Reilly, C Jolley, C Elston, G F Rafferty, J Moxham

**PI02** Quantitative biological imaging of plasmid DNA in live human airway epithelial cells following non-viral gene transfer C Singh, FM Munkonge, SN Smith,

U Griesenbach, R Carzaniga, P Tillmann, S Cheng, A Rogers, A Dewar, EWFW Alton

**PI03** Oral contraceptive use does not affect CF disease severity

NG Kernan, P Cullinan, EWFW Alton,

D Bilton, U Griesenbach

P104 T Helper I and T Helper 22 cell responses against Pseudomonas aeruginosa infections HK Bayes, T Evans

	SCIENTIFIC PROGRAMME
P105	Burkholderia latens – a new infection in CF patients
	A Horsley, C Perry, K Martin, K Webb,
	D Kenna, A Jones
P106	Inflammatory markers: data from the UK
	CF Gene Therapy Consortium Run-in study
	JA Innes, J Donovan, S Soussi, N Newman,
	Leiton, K Campbell,   Gibson, A Doherty,
	EWFW Alton, C Boyd, U Griesenbach,
	IC Davies
PI07	Pulmonary imaging techniques to identify
	suitable patients and act as outcome
	measures in the UK CF Gene Therapy
	Consortium clinical programme
	JC Davies, JH Conway, J Fleming, M Dewar,
	N Voase, EWFW Alton, A Greening,
	D Hansell, JA Innes
P108	Phenotypic changes in Pseudomonas
	aeruginosa (Psa) populations during
	exacerbations in adult cystic fibrosis patients
	infected with non-epidemic strains
	A Ashish, J Fothergill, E Mowat, M Gautam,
	C Winstanley, M Walshaw
P109	Exercise capacity and physical activity in
	patients with CF: data from the UK CF Gene
	The control of the co

Therapy Consortium (UKCFGTC) 'Run-In' Study CJ Saunders, G Davies, NJ Bell, PA Reid, HS Sheridan, SC Hyde, JA Innes, EWFW Alton

1.45pm - 3.15pm St James's Suite, 4th Floor POSTER DISCUSSION: PI 10 - PI 21

**COPD:** sputum and exacerbations

Chaired by: Dr John Hurst (London) and Dr Tom Wilkinson (Southambton)

**PII0** Quantitative PCR-based detection and quantification of atypical bacteria at baseline and exacerbation of COPD DS Garcha, SJ Thurston, ARC Patel, JJP Goldring, TD McHugh, GC Donaldson, IA Wedzicha

PIII FTIR spectroscopic profiling of COPD sputum: identification of distinct spectral signatures and correlation to COPD status N Patel, P Coleborn, A Hampton, V Campbell,

M Allen, A Gahkani, M Spiteri

**PII2** Association of sputum Pseudomonas aeruginosa (PsA) isolation and length of hospital stay in patients with Chronic Obstructive Pulmonary Disease (COPD) A Ali, M Bhattacharya, J Corcoran, B Chakraborty, A Thomas, M Raza, R Mukherjee

**PII3** Procalcitonin (PCT) is a safe and reliable biomarker of bacterial infection in exacerbations of COPD – So why is it

so challenging to introduce it into a large UK hospital?

L Burke, M Alhajji, N Todd, JS White

- **PI14** C-reactive protein at onset predicts symptom resolution in acute exacerbations of COPD Al Mackay, GC Donaldson, ARC Patel, IR Hurst, IA Wedzicha
- **PII5** Vitamin D binding protein in COPD exacerbations M Newnham, R Carter, L Sapey, RA Stockley, AM Wood
- **PI16** Serum PARC (CCL18) and exacerbation frequency in COPD CG George, JK Quint, RJ Sapsford, GC Donaldson, IA Wedzicha, IR Hurst
- **PII7** Comparison of indices of nutritional status in prediction of in-hospital mortality and early readmission of patients with acute exacerbations of COPD
- | Steer, E Norman, G| Gibson, SC Bourke **PII8** Predicting survival in patients admitted to hospital with an acute exacerbation of Chronic Obstructive Pulmonary Disease (COPD)

K Williamson, A Sullivan, N Folland, S Rees.

S Gombertz

- **PII9** COPD assessment test scores: short term changes during recovery from COPD exacerbation
- S Chandramouli, S Huq, | Lagan, L Davies **PI20** Observational study of acute admissions with non-infective asthma and COPD to Perth Royal Infirmary following the eruption of Icelandic volcano Eyjafjallajokull and

subsequent ash cloud formation MEM Wilkie, M Anderson, S Schembri

**P121** Feasibility of performing valid spirometry in rural India: preliminary results from a population study assessing the prevalence of COPD

> R Mukherjee, V C Moore, S Purkait, P Goon, C | Warburton, B Chakrabarti, P M A Calverley

1.45 pm - 3.30 pmMountbatten Room, 6th Floor **SYMPOSIUM** 

## **NANO MATERIALS: AN EMERGING HEALTH THREAT?**

Chaired by: Dr Chris Barber (Sheffield) and

Dr Chris Warburton (Liverpool)

2.10pm

Nano-materials - uses (benefits) and 1.45pm

> exposures in the real world Professor Andrew Maynard (Michigan)

Nano-tubes and health - another asbestos?

Professor Ken Donaldson (Edinburgh)

## **Thursday 2 December 2010**

Nano-particles and health – just air pollution 2.35pm

magnified?

Professor Jon Ayres (Birmingham)

3.00pm Should we be concerned about exposures to

nano-materials?

Professor Robert Maynard (London)

1.45pm - 3.30pm

Elizabeth Windsor Room, 5th Floor SPOKEN SESSION: S77 - S82

Mechanisms of lung infection in the community and hospital setting

Chaired by: Dr Rosemary Boyton (London) and

Dr David Dockrell (Sheffield)

1.50pm **S77** 

> Compartmentalisation of surface Triggering Receptor Expressed on Myeloid Cells-I (TREM-I) in Ventilator-Associated

Pneumonia (VAP)

V Grover, P Kelleher, D Henderson, N Soni, S Singh

2.05pm **S78** 

Determinants of macrophage responses to

Streptococcus pneumoniae G S Tomlinson, S Khandavilli, J Cohen, C Hyams, J Brown, M Noursadeghi

**S79** 2.20pm

> Potential diagnostic significance of neutrophil proteases in ventilator-associated pneumonia A Conway Morris, K Kefala, TS Wilkinson, K Dhaliwal, IF Laurenson, T Walsh,

DF McAuley, C O'Kane, AJ Simpson

**S80** 2.35pm

> The role of MyD88 in rhinovirus IB infection CA Stokes, EP Dick, JA Bennett, S Ismail, MR Edwards, I Sabroe, LC Parker

**S81** 2.50pm

> Primary type II alveolar epithelial cells respond differentially to bacterial virulence

factors

OL Moncayo Nieto, M Brittan, TS Wilkinson, A Conway Morris, K Dhaliwal, WS Walker,

AJ Simpson

3.05pm**S82** 

Survival of HIV-infected patients admitted

to the intensive care unit

A G Adlakha, M Pavlou, D Walker, A J Copas, S Batson, S G Edwards, M Singer, R F Miller

1.45pm - 3.45pm Abbey Room, 4th Floor

**POSTER DISCUSSION: P122 - P136** 

Respiratory physiology: old and new concepts

Chaired by: Dr William Kinnear (Nottingham) and Professor John Gibson (Newcastle upon Tyne)

Thursda	y 2 December 2010
P122	The use of impulse oscillometry (IOS) to study fractal scaling and sample entropy in
	airway resistance time series in severe asthma I Umar, D Desai, S Corkill, M Shelley, A Singapuri, C Brightling, S Siddiqui
P123	Impulse oscillometry (IOS) indices in severe asthma and healthy controls after deep breath manoeuvres and bronchodilator administration
	I Umar, D Desai, S Corkill, M Shelley, A Singapuri, C Brightling, S Siddiqui
P124	Neuroventilatory uncoupling during cycle and treadmill exercise in COPD  CJ Jolley, YM Luo, J Steier, G Rafferty,
DIOF	MI Polkey, J Moxham
P125	Non-invasive assessment of ventilation distribution in infants using Electrical Impedance Tomography
	PA Shah, H Shannon, A-F Hoo, D Ahmed, J Chudleigh, J Stocks
P126	The influence of breathing pattern on specific airways resistance  JC Kirkby, S Sonnappa, J Stocks
P127	Does it matter how they breathe? Perceptions in COPD patients when adopting different routes of breathing
	AJ Williams, A Pitcher, P Thomas, R Baker
P128	The challenges of hypertonic saline in non CF bronchiectasis
	T M Small, H Groves, P McAlinden, J Davison, A DeSoyza
P129	Lung Clearance Index is a sensitive marker of early airway changes in smokers with normal spirometry
	NJ Bell, AR Horsley, PA Reid, HS Sheridan,
	M Monaghan, H Connelly, AP Greening, JA Innes
P130	Limits of agreement for peak expiratory flow measured by mini-Wright's meter and a pneumotachograph
DIN	SJ Oliver, E Ingram, D Fynn, DS Urquhart
PI3I	Fitness to fly assessment in patients with neuromuscular disease
	J Humphreys, S Agarwal, I Cliff, S Mathew, N Mustfa
P132	Carbon dioxide sensitivity in patients with hyperventilation syndrome KA Bazin, S Moosavi, K Murphy, A Perkins,
P133	M Hickson, LS Howard
P133	Prediction equations for pulmonary function values in healthy Iranian children (aged 4–10 years)  MH Boskabady, S Tababaei, S Shahmohammadi,
	O Mohammadi, P Saremi, S Amery, H Esmaili,

Z Ghafari

## SCIENTIFIC PROGRAMME

P134	Lung function in post-transplant Hodgkin's
	lymphoma patients
	H McConkey, S Sachchithanantham,
	M Gillion, K Raj, M Kazmi, P Fields,
	M Streetly, H Milburn
P135	Lung function in post-transplant multiple
	myeloma patients
	H McConkey, M Streetly,
	S Sachchithanantham, M Gillion,
	M Kazmi, K Raj, HJ Milburn
PI36	Comparison of the ROBD and the Ventimask
	method of pre-flight evaluation
	SE Martin, JM Bradley, JB Buick, JS Elborn

2.00pm - 3.45pm

**Churchill Auditorium, Ground Floor** SYMPOSIUM

## **CONNECTIVE TISSUE DISEASE** ASSOCIATED INTERSTITIAL LUNG **DISEASE (ILD)**

Chaired by: Professor Ann Millar (Bristol) and Professor Athol Wells (London)

2.00pm The pathogenesis of pulmonary fibrosis in

scleroderma

Professor Chris Denton (London)

The clinical course of connective tissue 2.25pm

disease associated ILD

Professor Kevin Brown (Denver)

2.50pm Connective tissue disease associated ILD -

> should it be treated like IPF? Dr Ulrich Costabel (Essen)

3.15pm A biologic revolution - emerging

therapeutics for rheumatological disease

Dr David d' Cruz (London)

2.00pm - 3.45pmWestminster Suite, 4th Floor SPOKEN SESSION: S83 – S88

#### Pathophysiological mechanisms in childhood asthma

Chaired by: Dr James Paton (Glasgow) and Dr Sejal Saglani (London)

2.05pm **S83** 

> Preschool wheezing phenotypes in a representative UK birth cohort

JM Harris, A Bush, N Wilson, P Mills, C White,

S Moffat, L Shread, P Cullinan

2.20pm **S84** 

> Childhood incident asthma and physical activity: a systematic literature review and meta-analysis with heterogeneity assessments

L Lochte, R Granell, JAC Sterne,

Al Henderson

#### 2.35pm **\$85**

The effects of exposure to IL-9 alone or in combination with IL-13 on the mucociliary differentiation of bronchial epithelial cells from normal and asthmatic children JC Parker, ST Thavagnanam, G Skibinski, MD Shields, LG Heaney

2.50pm **\$86** 

Effects of exposure to IL-13, IL-31 and an IL-13/31 combination on mucociliary differentiation of bronchial epithelial cells from normal children

JC Parker, ST Thavagnanam, G Skibinski,

LG Heaney, MD Shields

3.05pm **S87** 

Relationship between bronchial reticular basement membrane thickness (RBM) and smooth muscle mass in childhood severe asthma (SA)

CJ Bossley, N Regamey, L Fleming, T Oates,

C Lloyd, A Bush, S Saglani

3.20pm **\$88** 

Mast cell myositis is associated with persistent airflow limitation (PAL) in childhood severe asthma (SA)

C J Bossley, T Oates, N Regamey, L Fleming,

C Lloyd, A Bush, S Saglani

2.00pm - 3.45pm

Rutherford Room, 4<sup>th</sup> Floor SPOKEN SESSION: S89 – S94

## Basic mechanisms in lung cancer

Chaired by: Dr Sam Janes (London) and Professor Tariq Sethi (Edinburgh)

2.05pm \$89

Bimodal iron oxide nanoparticles for hyperthermia therapy and MR imaging

in cancer

KL Parcell,TL Kalber, S Walker-Samuel, P Southern, QA Pankhurst, MF Lythgoe,

SM Janes

2.20pm **S90** 

Homocystine levels in non-small cell lung

cancer

J Maguire, V Kelly, C Smyth, M Ledson, M Walshaw

ivi vvaisnav

2.35pm **S91** 

The role of the vitamin D axis in lung cancer LA McGowan, AM Wood, P Newby, B Naidu

2.50pm **S92** 

Epithelial mesenchymal transition occurs earlier than previously thought in the development of squamous cell carcinoma of

NM Cummings, DM Rassl, HC Boobier, JR Gosney, AG Nicholson, LD Sharples, RC Rintoul

## **Thursday 2 December 2010**

3.05pm **S93** 

Is Bcl-2 important in small cell lung cancer? MH Lawson, DM Rassl, SL Vowler, NM Cummings, WJ Howat, G Murphy, RC Rintoul

3.20pm **S94** 

Two novel determinants of etoposide resistance in small cell lung cancer MH Lawson, NM Cummings, DM Rassl, R Russell, JD Brenton, RC Rintoul, G Murphy

2.15pm – 3.00pm

Caxton Lounge East, 2<sup>nd</sup> Floor

MODERATED POSTER DISCUSSION:

P191 - P196

#### Clinical studies in lung cancer

Chaired by: Dr Richard Harrison (Stockton-on-Tees) and Dr Mark Slade (Cambridge)

P191 Development of a new patient reported experience measure for the Improving Lung

Cancer Outcomes Project

S Christie, N Bell, T Malinowski, A Roberts,

**I Woolhouse** 

P192 Fibreoptic bronchoscopic insertion of the Gianturco stent for tracheobronchial obstruction in patients with cancer at a lung cancer tertiary referral centre:

20 year experience

A Collins,T Jordan, M Ledson, M Walshaw

P193 The value of a regional mesothelioma multidisciplinary team meeting – an audit A Jeyabalan, A Pillai, S Smith, M Darby, N Ibrahim, NA Maskell

The Rise of EBUS: the fall of mediastinoscopy?

H Tan, S Binukrishnan, PA Smith, C Smyth,

M Walshaw, K Mohan

P195 Temporal trends and distribution of recurrent disease following lung cancer

surgery and relationship to pre-operative

PET scan

R Tunney, D Gnananandha, R Shah, SCO

Taggart

P196 Cryo-recanalization via day-case flexible bronchoscopy for central airway obstruction

B Ng, U Oltmanns, C Hardy, CYip, M Slade

#### 3.15pm - 4.15pm

COFFEE/TEA will be served in the Whittle & Fleming Rooms and Benjamin Britten Lounge, 3<sup>rd</sup> floor

3.30pm – 5.30pm

St James's Suite, 4th Floor

**POSTER DISCUSSION: P137 – P151** 

Clinical interventions in COPD

Chaired by: Dr Nicholas Hopkinson (London) and Dr William MacNee (Edinburgh)

Thursday 2 December 2010	
P137	Efficacy and safety of once-daily aclidinium bromide 200 µg in combination with formoterol in patients with COPD
P138	P Sliwinski, D-W Perng, A Chuchalin, PW Jones Efficacy of inhaled pan-selectin antagonist Bimosiamose on ozone-induced airway inflammation in healthy subjects A Kirsten, H Watz, G Kretschmar, F Pedersen, W Meyer-Sabellek, D Bock, H Magnussen
P139	Atelectasis following bronchoscopic lung volume reduction (BLVR) is associated with improved survival in COPD  NS Hopkinson, SV Kemp, TP Toma, DM Hansell, DM Geddes, PL Shah, MI Polkey
P140	Thoracoscopic bullectomy for dyspnoea in emphysema: defining new boundaries DS Stavroulias, KL Lau, IO Oey, AN Nakas, SR Rathinam, DAW Waller
PI4I	Lung volume reduction surgery – the first 200 operations in a UK centre: the benefits of a multidisciplinary strategy and minimally invasive approach KA Abdul Aziz, IF Oey, DA Waller, MD Morgan,
P142	MC Steiner, SJ Singh Inflammatory cells in the quadriceps of COPD patients and response to resistance training
P143	MK Menon, L Houchen, S Harrison, SJ Singh, MDL Morgan, P Bradding, MC Steiner NF-kappa B (NF-κB) and Activator Protein-I (AP-I) DNA binding in the quadriceps of COPD patients
P144	SA Natanek, RCJ Langen, HR Gosker, GS Marsh, I Slot, NS Hopkinson, WD-C Man, PR Kemp, J Moxham, AMWJ Schols, MI Polkey Muscle fibre atrophy and aerobic to anaerobic fibre type shift in the quadriceps in COPD
P145	SA Natanek, HR Gosker, I Slot, GS Marsh, RCJ Langen, NS Hopkinson, WD-C Man, J Moxham, PR Kemp, AMWJ Schols, MI Polkey Evaluation of a quadriceps muscle endurance leg lift test in patients with Chronic Obstructive Pulmonary Disease
P146	S Hattle, C Hayton, J Elia, AM Wilson Cognitive loss in stable non-hypoxaemic patients with moderate Chronic Obstructive Pulmonary Disease (COPD) JW Dodd, M Van Den Broek, D Shrikrishna,
P147	NS Hopkinson, PW Jones Deprivation is associated with increased healthcare utilisation in patients with chronic obstructive pulmonary disease PF Collins, RJ Stratton, R Kurukulaaratchy, M Elia

Correlating changes in lung function with patient reported outcomes in COPD PW Jones, J Donohue, J Nedelman, G Pinault,
S Pascoe Validation of the COPD Assessment Test (CAT) within $\alpha$ -1 antitrypsin deficiency (A1ATD)
RG Edgar, D Griffiths, RA Stockley How well do patients with chronic respiratory failure secondary to COPD and their carers
adapt to long-term oxygen therapy at home? CWrench
Reduced mortality with beta blockers when added to stepwise therapy for COPD PM Short, SIW Lipworth, DH Elder, S Schembri, BJ Lipworth

#### 3.30pm - 5.30pm

Henry Moore Room, 4th Floor SPOKEN SESSION: S95 - S101

## Novel disease mechanisms in pulmonary arterial hypertension

Chaired by: Dr Luke Howard (London) and Dr David Kiely (Sheffield)

3.35pm **S95** 

> Application of proteomics to explore the pathobiology of pulmonary arterial hypertension VB Abdul-Salam, | Wharton, MR Wilkins,

RI Edwards

3.50pm **S96** 

> Novel biomarkers in idiopathic pulmonary arterial hypertension CJ Rhodes, J Wharton, LS Howard, JSR Gibbs, MR Wilkins

4.05pm **S97** 

> Inflammatory cytokines are elevated in patients with operable chronic thromboembolic pulmonary hypertension and predict outcome post-endarterectomy E Soon, AM Holmes, L Barker, C Treacy, J Suntharalingham, M Toshner, P Nicklin, CWalker, D Budd, D Jenkins, KK Sheares, | Pepke-Zaba, NW Morrell

4.20pm **S98** 

> Ventilatory efficiency in pulmonary arterial hypertension and chronic thromboembolic pulmonary hypertension: physiological differences and implications for diseasespecific end-points

Z Zhai, K Murphy, H Tighe, C Wang, M Wilkins, S Gibbs, LS Howard

4.35pm **S99** 

Multiple regression analyses in a cohort of hereditary haemorrhagic telangiectasia

patients suggest a novel role for iron in thrombosis

JA Livesey, JE Jackson, CL Shovlin

4.50pm **S100** 

> Change in diastolic pulmonary artery pressure (3 months post surgery compared to pre-surgery value) as a long term prognostic parameter in patients treated with pulmonary endarterectomy for chronic thromboembolic pulmonary hypertension GC Hagan, CTreacy, K Sheares, DP Jenkins, l PepkeZaba, A Kacprzak

SIOI 5.05pm

> Praziquantel prevents progression and reverses pulmonary hypertension and pulmonary vascular remodelling in a mouse model of Schistosomiasis

A Crosby, F M Jones, E Kakolos, M Southwood, I Purvis, G Butrous, DW Dunne, N Morrell

3.45pm - 5.30pm

Mountbatten Room, 6th Floor SPOKEN SESSION: S102 - S107

#### Acute lung injury: what are the causes?

Chaired by: Dr Daniel McAuley (Belfast) and Professor Moira Whyte (Sheffield)

3.50pm **S102** 

> KGF enhances pulmonary production of pro-epithelial repair factors in a human in vivo model of acute lung injury M Shyamsundar, CM O'Kane, C Calfee, ST McKeown, C Taggart, MA Matthay, DF McAuley

4.05pm **S103** 

> A decrease in elafin due to proteolytic cleavage may contribute to alveolar inflammation in patients with ALI A Kerrin, C O'Kane, M Shyamsundar, T Craig, CC Taggart, DF McAuley

4.20pm **S104** 

> Monocyte influx accompanies the early neutrophilic inflammation seen in bronchoalveolar lavage fluid following lipopolysaccharide inhalation

LC Barr, M Brittan, A Conway Morris, S Johnston, F Rossi, R Duffin, N Hirani, K Dhaliwal, AG Rossi, DF McAuley, AJ Simpson

4.35pm **S105** 

> Does Vitamin D deficiency increase risk of acute lung injury post oesophagectomy? RCA Dancer, D Park, V D'Souza, F Gao Smith, GD Perkins, DR Thickett

4.50pm **S106** 

> Polymorphisms in genes encoding RAGE or RAGE ligands predispose patients to adverse

## **Thursday 2 December 2010**

outcomes following surgery necessitating cardiopulmonary bypass N Zakeri, B Creagh-Brown, LR Hector, RI Hewitt, AL Lagan, GI Quinlan, P Pantelidis

**S107** 5.05pm

> Comparison of high-stretch versus atelectasis in the pathophysiology of ventilator-induced lung injury using the mouse isolated perfused lung K Wakabayashi, MR Wilson, KP O'Dea, M Takata

4.00pm - 5.00pm

Westminster Suite, 4th Floor

POSTER DISCUSSION: P152 - P159

## Clinical aspects of NIV

Chaired by: Dr Naveed Mustfa (Stoke-on-Trent) and Professor Michael Polkev (London)

P152 Effect of obesity in patients admitted to Non Invasive Ventilation (NIV) unit with acute hypercapnic respiratory failure (AHRF) CM Thippanna, A Thomas, W Tosh, B Chakraborty, B Beauchamp, D Banerjee, R Mukherjee

P153 The effect of body mass index on outcomes of acute Non-invasive Ventilation (NIV) in a district general hospital H Liddicoat, C Zammitt, | Loft, I Moonsie,

H Makker

P154 The patients' experience of NIV.A phenomenological study H Matthews

**P155** Non-Invasive Ventilation (NIV) in acute hypercapnic respiratory failure in Restrictive Lung Diseases (RLD)

> A Thomas, A Ali, B Chakraborty, B Beauchamp, E Gallagher, D Banerjee, R Mukherjee

P156 Does analysis of patient-ventilator interaction offer benefits in addition to overnight pulse oximetry in patients with motor neurone disease being followed on non-invasive ventilation?

B Chakrabarti, H Ando, E Thornton, V Ford,

CA Young, RM Angus

**PI57** Staff education improves non-invasive ventilation outcomes in COPD patients presenting with acute hypercapnoeic respiratory failure S Roychowdhury, O Kankam, C Jackson,

D Sword, K Prasad, V Stark

**P158** The strength of association between the risk of endotracheal intubation and initial arterial blood (ABG) pH in patients presenting with acute hypercapnic respiratory failure (AHRF) treated with Non-Invasive Ventilation (NIV) A Thomas, B Beauchamp, B Chakraborty, M Page, S Khanum, E Gallagher, D Banerjee, R Mukherjee

## **Thursday 2 December 2010**

**P159** HOT HMV UK: sleep disruption following initiation of domiciliary NIV in hypercapnic COPD P Murphy, MI Polkey, N Hart

4.00pm - 5.30pm Elizabeth Windsor Room, 5th Floor POSTER DISCUSSION: P160 - P171 Improving patient outcomes in TB

Chaired by: Professor Peter Davies (Liverpool) and Dr Gerrit Woltmann (Leicester)

P160 Treating TB patients with no entitlement to social support – welcome to the social jungle S Hemming, P Windish, J Hall, A Story, M Lipman

P161 Global prevalence of chronic pulmonary aspergillosis (CPA) following pulmonary tuberculosis (PTB)

DW Denning, A Pleuvry, DC Cole

**P162** How many and how much? Assessing resource utilisation in Multi-drug Resistant Tuberculosis (MDRTB) management using routinely-collected hospital data RI José, C Smith, R Breen, N Marshall, I Cropley, S Hopkins, MCI Lipman

P163 Incidence and clinical relevance of nontuberculous mycobacteria isolates based on 10 years experience at York Hospital, North Yorkshire (UK)

L Burke, A Anderson, S Waring, N Thompson,

P164 Enabling next day processing of blood samples with T-SPOT.TB I Durrant, I Radcliffe

P165 TB-ST Rapid Test for tuberculosis diagnosis in a resource poor setting: are cases of tuberculosis going undiagnosed? N Javanshir, DS Shah, DE Jennings, J Ivanyi, HJ Milburn

P166 Quantiferon testing in close contacts of smear positive pulmonary TB identifies people at low risk of secondary progression P Haldar, H Thuraisingam, H Patel, W Hoskyns, G Woltmann

P167 Characterisation of tuberculous mediastinal lymphadenopathy on CT and correlation with biomarkers and chest radiograph findings A Singanayagam, P George, D Connell, S Kaneria, | Dhariwal, P Molyneaux, M Wickremasinghe, A Lalvani, A Wright,

P168 Rifabutin is a useful alternative to rifampicin in the treatment of active TB/HIV co-infection R Singh, N Marshall, CJ Reynolds, RAM Breen, CJ Smith, L Swaden, S Bhagani, S Hopkins, MA Johnson, MCI Lipman

OM Kon

## SCIENTIFIC PROGRAMME

P169	Subclinical ocular manifestations of
	pulmonary and extrapulmonary tuberculosis
	in a Hampshire population
	S Beeson, N Wetherill, S Mansour, AK Banerjee,
	D Rowen, N Hall, BG Marshall
P170	TB-HIV co-infection: how does the UK
	compare to Europe?
	ME Kruijshaar, L Pimpin, C Ködmön,
	M Lipman, V Delpech, B Rice, L Drumright,
	D Manissero, I Abubakar
PI7I	The development of a UK national MDRTB
	service
	PDO Davies, DM Cullen
4.00pm	– 5.40pm
Abbey F	Room, 4 <sup>th</sup> Floor

POSTER DISCUSSION: P172 - P184

## Therapeutic interventions in asthma and airways disease

Chaired by: Dr Ruth Green (Leicester) and Dr Andrew Menzies-Gow (London)

**PI72** Fluticasone/Salmeterol combination confers significant benefits in smoking asthmatics KL Clearie, L McKinlay, PA Williamson, P Hopkinson, KT Meldrum, BJ Lipworth

**PI73** Management of sputum eosinophil-negative patients in a severe asthma clinic G Tavernier, C Pris-Picard, R Gore, R Niven

**PI74** Identifying non-adherence with asthma medication and the relationship to clinical outcomes amongst adults with difficult-tocontrol asthma AC Murphy, A Proeschel, ME Linnett,

CE Brightling, AJ Wardlaw, ID Pavord, P Bradding, RH Green

**P175** Cross-sectional and longitudinal relationships of self-management behaviours and other psychological factors with outcomes in patients with severe asthma JR Smith, MJ Noble, BDW Harrison, M Adams

**P176** Evaluating the role of triamcinolone in a difficult asthma service

R Carter, A Murphy, B Hargadon, J Agbetile, I D Pavord, A | Wardlaw, R H Green, P Bradding

**PI77** Fluticasone propionate/formoterol fumarate combination therapy is as effective as fluticasone propionate/salmeterol xinafoate in the treatment of asthma: a randomised controlled trial

A Bodzenta-Lukaszyk, A Dymek, H Mansikka **P178** Validation of a novel Synthetic Absorptive Matrix (SAM) for sampling nasal mucosal lining fluid

D Jackson, Y Clements, SL Johnston, TT Hansel

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#### SCIENTIFIC PROGRAMME

#### **P179** Lung-based assessment in Anderson Fabry Disease (AFD) demonstrates differential alpha galactosidase A enzyme (GLA) activity at blood and tissue sites NT Shafi, DA Hughes, R Baker, C Smith, | Hurst, A Mehta, M Lipman **P180** Sputum eosinophil positivity to tailor steroid management of severe asthmatics G Tavernier, C Pris-Picard, R Gore, R Niven **P181** Better asthma control with Montelukast than Salmeterol in arg-16 homozygous children with asthma K Basu, HP Donald, BJ Lipworth, R Tavendale, DF Macgregor, SA Ogston, CNA Palmer, S Mukhopadhyay **P182** Adenosine potentiates human mast cell fibrinolytic activity MI Sereda, P Bradding, CVial **P183** Global burden of allergic bronchopulmonary aspergillosis (ABPA) complicating asthma DW Denning, A Pleuvry, DC Cole **P184** Can we predict asthma exacerbations in working-age adults? SJ MacNeill, AB Jones, CJP Smith, R Hubbard,

4.00pm – 5.45pm Churchill Auditorium, Ground Floor SYMPOSIUM

P Cullinan

# WHAT'S NEW IN PNEUMONIA IN ADULTS AND CHILDREN?

Chaired by: Dr Jeremy Brown (London) and

Dr Wei Shen Lim (Nottingham)

**4.00pm** Aetiology and diagnosis of hospital/ventilator

acquired pneumonia

Professor John Simpson (Newcastle upon Tyne)

**4.25pm** Beyond the CURB65

Dr Adam Hill (Edinburgh)

**4.50pm** Lessons from paediatrics

Dr David Spencer (Newcastle upon Tyne)

**5.15pm** Vaccinating infants and protecting adults:

global experience with pneumococcal

conjugate vaccines

Professor David Goldblatt (London)

## **Thursday 2 December 2010**

5.45pm - 7.15pm

Mountbatten Room, 6th Floor

# BRITISH LUNG FOUNDATION 25<sup>TH</sup> ANNIVERSARY SYMPOSIUM

Chaired by: Professor Sir Malcolm Green (London)

5.45pm Overview: 25 years of the BLF

Professor Sir Malcolm Green

**6.10pm** COPD: a global epidemic

Professor Sonia Buist (Washington)

**6.30pm** How pathology links to abnormal function

Professor Jim Hogg (Vancouver)

**7.10pm** Vote of thanks

Professor Peter Barnes (London)

## Friday 3 December 2010

8.00am - 9.00am

COFFEE/TEA will be served in the Whittle & Fleming Rooms, 3<sup>rd</sup> floor

8.45am - 2.00pm

Whittle & Fleming Rooms, 3<sup>rd</sup> floor

**POSTER VIEWING** 

Authors present: 10.00am - 11.00am

P197-P209

Clinical studies in obstructive sleep apnoea

Discussion of abstracts will take place from  $1.30 \mathrm{pm}$  to

3.10pm in the Westminster Suite, 4th floor

P210-P222

Developments in the delivery of lung cancer care

Discussion of abstracts will take place from 1.30pm to

3.10pm in the Henry Moore Room, 4th floor

P223-P236

Organisation of respiratory care

Discussion of abstracts will take place from 1.30pm to

3.15pm in the St James's Suite, 4th floor

P237-P247

Clinical challenges in diagnosing and managing respiratory infection

Discussion of abstracts will take place from 3.15pm to

4.40pm in the Abbey Room,  $4^{th}$  floor

P248-P254

Outcome determinants in acute lung injury

Discussion of abstracts will take place from 3.30pm to

4.30pm in the Mountbatten Room, 6th floor

8.45am - 2.30pm

Caxton Lounge East, 2<sup>nd</sup> Floor

**MODERATED POSTER VIEWING** 

Authors present: 10.00am - 11.00am

P255-P261

Clinical studies in pulmonary embolism

Discussion of abstracts will take place from 1.30pm to

2.30pm in the Caxton Lounge East, 2<sup>nd</sup> floor

8.15am - 8.45am

Fleet Room, 2<sup>nd</sup> Floor

THE BTS JOURNAL CLUB

**Asthma** 

Dr Philip Ind (London)

8.30am - 10.15am

**Churchill Auditorium, Ground Floor** 

**SYMPOSIUM** 

COPD:THE PATIENT WITH COMPLEX ADVANCED DISEASE

Chaired by: Professor Martyn Partridge (London) and Ms Jane Scullion (Leicester)

**8.30am** The clinical relevance of systemic

manifestations of COPD Dr Alvar Agusti (Barcelona)

## SCIENTIFIC PROGRAMME

**8.55am** The challenges of managing COPD in the

elderly patient

Dr Charlotte Ruse (Sheffield)

**9.20am** Volume reduction therapies in advanced

emphysema

Professor Michael Polkey (London)

**9.45am** The role of home ventilatory support in

advanced COPD

Dr Mark Elliott (Leeds)

8.30am - 10.15am

Westminster Suite, 4th Floor

SPOKEN SESSION: S108 - S113

**Epidemiology of lung disease** 

 ${\it Chaired by: Dr Andrew Fogarty (Nottingham) and Dr David}$ 

Hendrick (Newcastle upon Tyne)

8.35am \$108

A historical cohort study to determine the prevalence of common chronic respiratory diseases and medication use in drug misusers

F Palmer, M Jaffray, M Moffat, C Matheson,

J Haughney, A Coutts

8.50am \$109

Current COPD care in the UK; results from

180,000 patients in the POINTS database

A De Soyza, J Roberts

9.05am **SII0** 

Employment histories of people with asthma

in the 1958 Birth Cohort

R Ghosh, D Jarvis, D Strachan, P Cullinan

9.20am **SIII** 

Asthma, puberty and BMI in the 1958 British

Birth Cohort

DL Jarvis, L Gnatiuc, RB Newson

9.35am SII2

The natural history of wheeze from birth to

adult life: a cohort study

ML Burr, FDJ Dunstan, S Hand, KP Jones, S Rolf

9.50am \$113

The effect of small airways disease and emphysema on the association between smoking and lung function, and bronchodilator

response

BD Patel, HO Coxson, PG Camp, SG Pillai, AG Agusti, PM Calverley, CF Donner, BJ Make, NL Müller, SI Rennard, J Vestbo, EF Wouters, WH Anderson, PD Paré, RD Levy, EK Silverman, DA Lomas

8.30am - 10.15am

Abbey Room, 4th Floor

SPOKEN SESSION: S114 - S119

Measurements in patients with chronic cough

Chaired by: Professor Alyn Morice (Hull) and

Professor Ian Pavord (Leicester)

**SII4** 8.35am

> A double blind, placebo controlled, randomised, study to assess the effects of placebo, codeine and Talnetant, on citric acid cough threshold in healthy subjects S Khalid, A Woodcock, B Haumann, P Ventresca, SI Langley, IA Smith

8.50am **SII5** 

> Magnitude of cough response to inhaled capsaicin differentiates between health and

disease

EC Young, H Sumner, A Kelsall, AA Woodcock, IA Smith

**S116** 9.05am

> Urge-to-cough intensity in chronic cough patients compared to asthmatics and healthy

ECYoung, H Sumner, A Kelsall, AA Woodcock, JA Smith

9.20am **SII7** 

Four hour cough frequency monitoring with

the Leicester Cough Monitor KK Lee, A Savani, S Matos, C Woods,

ID Pavord, SS Birring

9.35am **S118** 

> Acute hemispheric stroke patients have reduced functional residual capacity and

cough flow rates

PR Rao, KW Ward, CR Reilly, GR Rafferty,

I Moxham

9.50am **S119** 

Variation in pharyngeal pH in the diagnosis

of airway reflux

ID Molyneux, W Jackson, AH Morice

8.30am - 10.15am

Mountbatten Room, 6th Floor SPOKEN SESSION: S120 - S125

Inflammation: an important regulator of the fibrotic response

Chaired by: Dr Nik Hirani (Edinburgh) and

Dr Toby Maher (London)

8.35am **S120** 

> IL-I is a key epithelial alarmin which promotes fibroblast activation

MI Suwara, LA Borthwick, | Mann, AJ Fisher,

DA Mann

8.50am **S121** 

> Individual cell tracking in a transgenic zebrafish inflammation model reveals the fates of inflammatory neutrophils during

inflammation resolution

G Dixon, CA Loynes, X Wang, PW Ingham,

MKB Whyte, SA Renshaw

## Friday 3 December 2010

9.05am **S122** 

> The MI macrophage phenotype accentuates TGF-βI driven epithelial to mesenchymal transition (EMT) via the secretion of TNF $\alpha$ LA Borthwick, M Brodlie, GE Johnson, CWard, I Perry, PA Corris, A De Soyza, AJ Fisher

9.20am **S123** 

> Mononuclear inflammation and disruption of normal alveolar structure following deletion of  $G\alpha O/II$ , but not  $G\alpha I2/I3$ , in

type II alveolar epithelial cells

AE John, J Porte, L Jolly, AL Tatler, RG Jenkins

9.35am **S124** 

> Macrophage deletion of vHL results in alternative activation and enhanced lung

fibrosis independent of HIF-I MA Gibbons, PM Fitch, A MacDuff,

AC Mackinnon, SI Forbes, V Aidinis, RS Johnson, T Sethi, C Haslett, AG Rossi, AJ Simpson,

SEM Howie, N Hirani

9.50am **S125** 

> Ly6Chi circulating monocytes direct alternatively activated, pro-fibrotic, lung macrophage regulation of pulmonary fibrosis MA Gibbons, AC MacKinnon, P Ramachandran, R Duffin, K Dhaliwal, C Haslett, SEM Howie, Al Simpson, N Hirani, | Gauldie, |P Iredale, T Sethi, SJ Forbes

8.45am - 10.15am

Elizabeth Windsor Room, 5th Floor SYMPOSIUM

## **IOINT BTS/UKRRC SYMPOSIUM: BUILDING AN ACADEMIC CAREER IN** RESPIRATORY RESEARCH

Chaired by: Professor Stephen Holgate (Southampton) and Dr Samantha Walker (London)

Starting an academic career in respiratory 8.45am

paediatrics

Dr Malcolm Brodlie (Newcastle upon Tyne)

9.05am Balancing clinical training with building your

academic career

Dr Sarah Walmsley (Sheffield)

9.25am Research careers for respiratory nurses

Dr Linda Pearce (Bury St Edmunds)

9.45am Developing an academic career via the NIHR

route

Dr William Man (London)

10.00am - 11.00am

COFFEE/TEA will be served in the Whittle & Fleming Rooms and Benjamin Britten Lounge, 3rd floor

## Friday 3 December 2010

10.15am - 12.00pm

Henry Moore Room, 4th Floor SPOKEN SESSION: S126 - S131

#### Lung infection: a multi-faceted problem

Chaired by: Professor John Simpson (Newcastle upon Tyne) and Dr Mark Woodhead (Manchester)

10.20am **S126** 

> Measuring quality in pneumonia care. The North West Advancing Quality programme 2008 - 2009

M Woodhead, I Butterworth, L-A Myers

**S127** 10.35am

> Is healthcare associated pneumonia a distinct clinical phenotype?

l Taylor, | Chalmers, A Singanayagam, A Akram, G Choudhury, P Mandal, A Hill

10.50am **S128** 

> Analysis of volatile biomarkers within exhaled breath for the diagnosis of pneumonia PR Boshier, V Mistry, JR Cushnir, S Curtis, S Elkin, OM Kon, N Marczin, GB Hanna

II.05am **S129** 

> Predicting outcome from HIV-associated Pneumocystis pneumonia

D Armstrong-James, AJ Cobas, PD Walzer,

SG Edwards, RF Miller

II.20am **S130** 

> Outcomes of Pseudomonas eradication therapy in patients with non-cystic fibrosis bronchiectasis

L White, G Mirrani, M Grover, | Rollason, A Malin, | Suntharalingam

11.35am

Fatigue in bronchiectasis: its relationship to Pseudomonas colonisation, dyspnoea and airflow obstruction

JG Macfarlane, H Tedd, P McAlinden, T Small, L Rostron, I Newton, A De Soyza

10.30am - 12.00pm

Westminster Suite, 4th Floor SPOKEN SESSION: S132 - S137

#### Clinical and translational observations in asthma

Chaired by: Professor Sebastian Johnston (London) and Professor Neil Thomson (Glasgow)

10.35am **SI32** 

> Airway dysfunction and inflammation in pool and non-pool based elite endurance athletes N Martin, MR Lindley, B Hargadon,

W Monteiro, ID Pavord

10.50am

Eosinophilic airway inflammation is associated with FEVI decline in severe asthma | Agbetile, D Desai, B Hargadon, P Bradding, Al Wardlaw, ID Pavord, RH Green, CE Brightling, S Siddiqui

## SCIENTIFIC PROGRAMME

**SI34** 11.05am

**ABSTRACT WITHDRAWN** 

11.05am **S135** 

> Can your mobile phone improve your asthma? D Ryan, H Pinnock, L Tarassenko, A Lee, A Sheikh, D Price

11.20am **S136** 

> Fungal sputum culture in patients with severe asthma is associated with a reduced

post bronchodilator FEVI

I Agbetile, A Fairs, M Bourne, B Hargadon, K Mutalithas, W Monteiro, R Edwards, I Morley, D Desai, CE Brightling, PH Bradding, RH Green, ID Pavord, AJ Wardlaw, CH Pashley

11.35am **SI37** 

The At-Risk Registers in Severe Asthma (ARRISA) Study: a cluster-randomised controlled trial in primary care [R Smith, M] Noble, SD Musgrave, [ Murdoch, G Price, A Martin, I Windley, R Holland. BDW Harrison, D Price, A Howe, I Harvey, AM Wilson

10.30am - 12.15pm

**Churchill Auditorium, Ground Floor** SYMPOSIUM

#### **HOW HAS IMAGING CHANGED LUNG CANCER INVESTIGATION?**

Chaired by: Dr Matthew Callister (Leeds) and Dr Richard Harrison (Stockton-on-Tees)

10.30am Pro-con debate: "PET-CT, EBUS and EUS mean that mediastinoscopy is no longer

needed in staging lung cancer"

Pro: Dr Ian Woolhouse (Birmingham) and

Con: Mr David Waller (Leicester)

II.I0am Pro-con debate: "Conventional TBNA is outmoded in staging the mediastinum since

the advent of EBUS"

Pro: Dr Robert Rintoul (Cambridge) and Con: Dr Mark Slade (Cambridge)

What has the national PET programme 11.50am

delivered for the UK?

Professor Fergus Gleeson (Oxford)

10.30am - 12.15pm

Mountbatten Room, 6th Floor

**SYMPOSIUM** 

## THE INDUSTRY AND UK RESPIRATORY **MEDICINE: TIME FOR CLOSER LIAISONS**

Chaired by: Professor Peter Barnes (London) and Professor Michael Morgan (Leicester)

10.30am

Why is the government promoting strong collaborations between the NHS and industry? Professor Dame Sally Davies (Department of Health)

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## SCIENTIFIC PROGRAMME

10.55am Making relationships between the NHS,

respiratory academia and industry work for

patients with lung disease

Dr Richard Marshall (GlaxoSmithKline)

11.20am "This could be something big": create your

own respiratory biotech company

Dr Garth Rapeport (RespiVert)

**II.45am** The pivotal role of NHS respiratory

medicine in drug discovery and development

Professor Tim Higenbottam (Chiesi)

10.30am - 12.15pm

St James's Suite, 4th Floor

SPOKEN SESSION: S138 - S143

#### Mechanisms of fibrosis in respiratory disease

Chaired by: Dr Gisli Jenkins (Nottingham) and

Dr Chris Scotton (London)

10.35am \$138

Clara cells inhibit alveolar epithelial wound repair through a TRAIL-dependent apoptosis

mechanism

KM Akram, M Spiteri, NR Forsyth

10.50am \$139

The K+ channel KCa3.1 is a novel target for the treatment of idiopathic pulmonary fibrosis MC Shepherd, SR Sabir, C McSharry, H Wulff,

P Bradding

11.05am \$140

The role of Transforming Growth Factor- $\beta$ 

Activated Kinase-I (TAK-I) in the development of airway fibrosis

A Gardner, MJ Brodlie, DA Mann, LA Borthwick,

Al Fisher

11.20am **SI4**I

A Disintegrin And Metalloprotease (ADAM)33

protein in patients with pulmonary sarcoidosis

AS Shaffiq, HMH Haitchi, YYP Pang,

AA Alangari, MGJ Jones, BGM Marshall,

KMAO O'Reilly, DED Davies

11.35am S142

The K+ channel KCa3.1 is expressed in

human lung fibroblasts

K Roach, G Arthur, C Feghali-Bostwick,

W Coward, SM Duffy, P Bradding

11.50am \$143

Serum Mannose binding lectin deficiency

is present in patients with early onset Interstitial pulmonary fibrosis and those with

affected relatives suggesting a genetic risk factor for defects in the innate immune

system

VA Varney, J Evans, H Parnell, A Nicholas,

B Barjardeen, N Sumar

## Friday 3 December 2010

10.30am - 12.15pm

Abbey Room, 4th Floor

SPOKEN SESSION: S144 - S149

### Smoke and pollution in COPD mechanisms

Chaired by: Professor Ian Adcock (London) and

Dr Louise Donnelly (London)

10.35am \$144

Cigarette smoke dysregulates proinflammatory cytokine release from airway

epithelial cells and macrophages in response

to Haemophilus influenzae

EJ Moisey, LA Borthwick, J Perry, A De Soyza,

AJ Fisher

10.50am \$145

The impact of cigarette smoke extract on inflammatory responses and Toll-like receptor-4 expression in healthy nasal

epithelial cells

D Comer, JS Elborn, V Brown, C McDowell,

M Ennis

11.05am **S146** 

Microvascular endothelial cell apoptosis and dysregulation of Vascular Endothelial Growth Factor Receptor 2 (VEGF-R2) in response

to cigarette smoke. New insights into the

pathogenesis of emphysema

 $LS\ Mackay, S\ Dodd, W\ Tomlinson, I\ Dougall,$ 

HWalden, B Isherwood, A Gardner,

L Borthwick, K Pinnion Brown, M Foster,

Al Fisher, PA Corris

11.20am \$147

Diesel exhaust particles alter monocyte differentiation in vitro but have little impact

on neutrophil function

H Jary, K Piddock, K Donaldson, LR Prince,

LC Parker, I Sabroe, N Chaudhuri

LC Tarker, T Sabio

11.35am \$148

Regulation of neutrophil apoptosis by

phosphoinositide 3-kinases

JK Juss, AM Condliffe, PT Hawkins,

L Stephens, ER Chilvers

11.50am \$149

Characterization of T cell populations in

the lung

R Spruce, G Rankin, | Ward, S | Wilson,

C Pickard, J A Warner

## 12.15pm - 2.00pm

LUNCH will be available to purchase in the Cafe in the Pickwick Suite, I<sup>st</sup> floor, and the Snack Bar in the Whittle & Fleming Rooms, 3<sup>rd</sup> floor

## Friday 3 December 2010

12.30pm - 1.15pm

**Churchill Auditorium, Ground Floor** 

**IOHN DONALDSON ASTHMA UK LECTURE** 

The role of the patient in asthma management

Professor Martyn Partridge (London) Introduced by: Dr Robert Wilson (London)

1.00pm - 3.00pmAbbey Room, 4th Floor

SPOKEN SESSION: S150 - S156

Cell signalling and cell responses in pulmonary vascular disease

Chaired by: Professor Nicholas Morrell (Cambridge) and Professor Duncan Stewart (Ottawa)

1.05pm **S150** 

> Smad-dependent and Smad-independent induction of Id I by prostacyclin analogues inhibits proliferation of pulmonary artery smooth muscle cells in vitro and in vivo | Yang

**S151** 1.20pm

TRAIL deficiency is protective in experimental

pulmonary arterial hypertension

AG Hameed, | Chamberlain, ND Arnold, SE Francis,

CMH Newman, DC Crossman, A Lawrie

1.35pm **S152** 

> Dexamethasone reverses established monocrotaline-induced pulmonary hypertension in rats and increases pulmonary BMPR2 expression

LC Price, SJ Wort, D Montani, CTcherakian, P Dorfmuller, R Souza, D Shao, G Simonneau, LS Howard, I Adcock, M Humbert, F Perros

1.50pm **S153** 

> Bone morphogenetic protein receptor-II regulates pulmonary artery endothelial cell barrier function: relevance to heritable

pulmonary arterial hypertension VI Burton, LI Ciuclan, AM Holmes, D Rodman, CWalker, DC Budd

2.05pm **S154** 

> Is there a role for IL-33 in the pathogenesis of pulmonary arterial hypertension? D Shao, F Perros, M Humbert, G Caramori, L Price, I Addcock, S Wort

2.20pm S155

The role of ST2 in a model of pulmonary

hypertension

A Mahmood, C McSharry, D Xu, AJ Peacock,

DI Welsh **S156** 2.35pm

> Chloride intracellular channel protein 4 (CLIC4) in the regulation of human pulmonary endothelial responses to hypoxia VB Abdul-Salam, MR Wilkins, B Wojciak-Stothard

## SCIENTIFIC PROGRAMME

1.30pm - 2.30pmCaxton Lounge East, 2nd Floor **MODERATED POSTER DISCUSSION:** P255 - P261

Clinical studies in pulmonary embolism

Chaired by: Dr Derek Bell (London) and

Dr Adam Hill (Edinburgh)

**P255** Defining a circadian pattern of presentation of pulmonary embolism on CT/VQ imaging N Shah, AS Jubber, I Syed

**P256** Investigating suspected pulmonary embolism as outpatient, the Portsmouth experience I Shafiq, N Siddique, A | Chauhan, L Albon, V King, SR Alapati

**P257** A comparison of scoring systems in the management of a range of pulmonary embolism patients in a university hospital M Maruthappu, A Manuel, A Christian, A Hollington, M Ramsden, Z Alexopoulou,

M Healy, M Giles

**P258** Is Chronic Thromboembolic Pulmonary Hypertension (CTEPH) underdiagnosed in the UK?

S Sturney, G Robinson, G Coghlan, | Pepke-Zaba,

| Easaw, | Suntharalingam

**P259** Incidental findings on computed tomography pulmonary angiography: what should we be looking for?

R Thiagarajah, M Qureshi, A Sahu, R Riordan

**P260** Managing the indeterminate CT pulmonary angiogram: Do we get it right?

EL O'Dowd, JD Birchall, RJ Berg

P261 Questionnaire to assess acceptability of venous thromboembolism risk assessment tool by admitting doctors and nurses in the medical assessment unit of a district general hospital

E K Nuttall, F Zaman

1.30pm - 3.10pm

Westminster Suite, 4th Floor

**POSTER DISCUSSION: P197 – P209** 

Clinical studies in obstructive sleep apnoea Chaired by: Dr Martin Allen (Stoke-on-Trent) and Dr Joerg

Steier (London)

**P197** The effect of CPAP therapy on insulin sensitivity and CV risk factors in patients with OSA

M Paracha, D Ahearn, W Flight, V Gupta,

M Abdelhalim

**P198** Effects of oxygen therapy on central sleepdisordered breathing in infants with Prader-Willi Syndrome

DS Urguhart, P Wales, C Parsley, S Suresh

## SCIENTIFIC PROGRAMME

#### P199 Diabetic Macular Oedema (DME) and Obstructive Sleep Apnoea (OSA) - visual improvement post CPAP therapy. Proof of principle study RH Mason, CA Kiire, A Bolton, L Smith, V Chong, IR Stradling **P200** Snoring and carotid atheroma: no association RH Mason, Z Mehta, PM Rothwell, JR Stradling P201 Health literacy and sleep apnoea R Ghiassi, MR Partridge **P202** Clinics for Obstructive Sleep Apnoea Hypopnoea (OSAH) - time for a change? TS Jordan, E Idris, R Haggee, M Allen **P203** Management of obesity in respiratory clinics are we doing enough? S Mandal, DI Powrie Travel with CPAP machines: how frequent P204 and what are the problems? S Faruqi, P Carveth-Johnson, AOC Johnson **P205** Obstructive sleep apnoea screening – cost and clinically effective in a TIA clinic? M Waller, A Hussey, A Morris, D Hargroves, B Prathibha **P206** Compliance with CPAP: subjective vs objective methods of assessment and regional variations A Lal, L Dale, T Lucas, B Chakraborty, D Banerjee, D Brocklebank **P207** Obstructive sleep apnoea in patients undergoing bariatric surgery - a London teaching hospital experience CI Jolley, S Zimmerman, S Shah, N Davison, S Singh **P208** A prospective observational study to evaluate the effect of social and personality factors on CPAP compliance in OSA A Gulati, K Jordan, M Ali, R Chadwick, IE Smith **P209** What might patients mean by "sleepiness"?

1.30pm - 3.10pmHenry Moore Room, 4th Floor **POSTER DISCUSSION: P210 - P222** Developments in the delivery of lung cancer care

R Ghiassi, L O'Byrne, AR Cummin, MR Partridge

Chaired by: Dr David Baldwin (Nottingham) and

Dr Michael Peake (Leicester)

**P210** The National Lung Cancer Audit – year 5 completeness and outcomes P Beckett, I Woolhouse, R Stanley, MD Peake

P211 Assessment of operability in early stage lung cancer: results from the national lung cancer audit

I Woolhouse, R Stanley, P Beckett, MD Peake

## Friday 3 December 2010

P212	Screening for lung cancer: a qualitative study of the acceptability of screening and participation in the Lung-SEARCH trial
	A Akporobaro, D Patel, N Chinyanganya, R Butawan, A Hackshaw, C Seale, S Spiro, C Griffiths
P213	Long term results of concurrent
	chemotherapy and hypofractionated
	radiotherapy for inoperable NSCLC
	Maguire, V Kelly, C Smyth, M Ledson,
	M Walshaw
P214	Pathological staging of malignant pleural
	mesothelioma – how important is nodal
	disease in selection for radical surgery ?
	A Nakas, K Lau, D Waller
P215	The influence of age on management of lung
	cancer patients in England
	P Beckett, I Woolhouse, MD Peake, R Stanley,
	RN Harrison
P216	Lung cancer in young patients: a
. 2.0	retrospective study
	R Sarkar, G Jones, T Peacock, A de Ramón Casado
P217	What's happening to lung cancer in females?
1 417	A Ives,   Verne
P218	
7210	Is there any value in obtaining a tissue
P219	diagnosis in suspected lung cancer patients
	with a performance status 3-4?
	M Gautam, M Haris, S Huq, M Shaw,
	M Ledson, M Walshaw
	Is there a role for conventional
	transbronchial needle aspiration in the
	endobronchial ultrasound era?
	UH Oltmanns, P Perera, M Slade
P220	High prevalence of malignancy in HIV
	infected patients with enlarged mediastinal
	lymphadenopathy
	J Alçada, N Navani, M Taylor, P Shaw, RF Miller,
	SM Janes
P221	Distal airway bacterial colonisation in
	patients with lung cancer
	P Agarwal, DJ Newberry, J Waller, J Mullings,
	S Sundaram, PC Russell
P222	A retrospective study of disease recurrence
	post thoracotomy for non-small cell lung
	cancer
	J Naqvi, N Navani, S Saeed, M Shastry,
	A Groves, P Shaw, D Lawrence, S Kolvekar,
	M Hayward, S Janes

**POSTER DISCUSSION: P223 - P236** Organisation of respiratory care

Chaired by: Professor Martyn Partridge (London) and Professor Michael Roberts (London)

## Friday 3 December 2010

····aay	
P223	One blood gas is not enough to assess a
	patient for LTOT – how to kiss goodbye to
	circa £10 million in England
	C Loutsios, G Logan, C Deeming, D Powrie,
	A Davison
P224	Screening of coronary care inpatients with
	spirometry to detect early obstructive
	airways defects
	W Alwan, N Stolagiewicz, N Raison, R Saha,
	P Murray
P225	First National Survey of the Respiratory
	Physiotherapy Workforce
	C Mikelsons, M Buxton
P226	Prevalence and treatment of pain in hospital
	in-patients with respiratory disease
	K Matthews, D Brunnen,Y Mahmood, EH Baker
P227	Disparities in care of adult CF patients in the
	UK
	M Salako, SJ MacNeill, E Gunn, M Baker,
	D Bilton, P Cullinan
P228	Patient experience of a nurse led therapeutic
	pleural aspiration service
	N Surange, JA Murray, SCO Taggart
P229	Choose and Book: not a patient-centred
	service?
	L O'Byrne, N Roberts, MR Partridge
P230	Inappropriate referrals to the Rapid Access
	Lung Clinic (RALC)
	S Huq, M Gautam, M Haris, A Ashish, M Ledson,
<b>D</b> 001	M Walshaw
P23 I	Audit of pre-hospital oxygen therapy by
	North West Ambulance Service (NWAS)
	one year after publication of new JRCALC
	guidance for oxygen use
Daga	A Matthews, C Gavin, BR O'Driscoll
P232	The early detection of chronic obstructive
	pulmonary disease
Daga	A Gupta, S Church, S Lacey
P233	COPD and me: the development and
	implementation of an individual patient
	management plan and hand-held record
	T Robinson, S Shires, C Fletcher, J Parrington,
P234	J Norell, S Mabbett BLF and BTS "Ready for home" survey of the
P234	
	experiences of patients admitted to hospital with COPD.Pt2:—The discharge process
	• •
P235	JE Scullion, SJ Singh, MDL Morgan
r 433	BLF and BTS "Ready for home" survey of
	patients admitted to hospital with COPD;
	the hospital experience
P236	I Jarrold, N Eiser
r 230	Allergy services at a tertiary referral centre: a one year retrospective review of all referrals
	a one year remospective review or all releffals

NL Swindlehurst, AM Swindlehurst, S Kaul,

C Corrigan

## **SCIENTIFIC PROGRAMME**

I.30pm – 3.15pm Mountbatten Room, 6<sup>th</sup> Floor SYMPOSIUM

# NON-CF BRONCHIECTASIS: THE KNOWN KNOWNS, THE KNOWN UNKNOWNS AND THE UNKNOWN UNKNOWNS

Chaired by: Dr Diana Bilton (London) and Dr Anthony De Soyza (Newcastle upon Tyne)

**1.30pm** Recent insights into the microbiology of

non-CF bronchiectasis

Dr Juliet Foweraker (Cambridge)

**1.55pm** Therapies for bronchiectasis: what works,

what does not work and what will work in

the future

Dr Alan Barker (Portland)

**2.20pm** The Bronchiectasis Guideline

Dr Mark Pasteur (Norwich)

**2.45pm** How can the immunologist help with the

management of bronchiectasis?

Dr Elizabeth McDermott (Nottingham)

## 1.45pm – 3.30pm

Churchill Auditorium, Ground Floor SYMPOSIUM

## 'LATE BREAKING NEWS' SYMPOSIUM – The best of BTS Audit

Chaired by: Professor Nick Black (National Clinical Audit Advisory Group)

**1.45pm** The National Scene *Professor Nick Black* 

**2.00pm** The BTS Audit Programme Dr Christine Bucknall (Glasgow)

2.15pm The 2010 National Pleural Procedures

Audit

Dr Nick Maskell (Bristol) and Dr Clare Hooper

(Bristol)

2.30pm The 2009/10 Community Acquired

Pneumonia in Adults Audit Dr Wei Shen Lim (Nottingham)

The second section (Notes Indian)

2.45pm The 2009/10 Paediatric Asthma and

Paediatric Pneumonia Audits
Dr James Paton (Glasgow)

**3.00pm** The 2010 Emergency Oxygen Audit

Dr Ronan O'Driscoll (Salford) and Professor Tony

Davison (Southend)

**3.15pm** Discussion/conclusion

## 2.00pm – 3.45pm

Rutherford Room, 4th Floor

SPOKEN SESSION: S157 - S162

#### **Occupational asthma**

Chaired by: Dr David Fishwick (Sheffield) and Dr Jo Szram (London)

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## SCIENTIFIC PROGRAMME

2.05pm

Prevalence of asthma related to employment

in the UK

I Szram, SI Schofield, SI MacNeill, P Cullinan

2.20pm **S158** 

Occupational asthma; referral patterns from

primary care in the UK

IL Hoyle, L Hussey, R Agius

2.35pm **S159** 

> Do occupational asthmatics with small changes in PEF at work have less FEVI decline than those with larger changes?

W Anees, VC Moore, PS Burge

**S160** 2.50pm

> The effect of shift work on serial peak expiratory flow measurements used to

diagnose occupational asthma VC Moore, MS Jaakkola, CBSG Burge, CFA Pantin, AS Robertson, PS Burge

**S161** 3.05pm

> Reducing exposure to allergens in bakeries SJ Fraser, HJ Mason, A Thorpe, P Roberts, I Smith,

G E Evans, | Morton, D Mark

3.20pm

Job categories and risk of adult onset asthma in the 1958 birth cohort from age 16 to age

R Ghosh, P Cullinan, D Strachan, D Jarvis

2.00pm - 3.45pm

Elizabeth Windsor Room, 5th Floor SPOKEN SESSION: S163 - S168

Survival in COPD

Chaired by: Dr Charlotte Bolton (Nottingham) and

Dr David Halþin (Exeter)

2.05pm **S163** 

The 'Obesity Paradox' in chronic obstructive

pulmonary disease

PF Collins, RJ Stratton, R Kurukulaaratchy, M Elia

2.20pm **S164** 

> Diminished left ventricular end-diastolic dimensions predict an amplified risk of death in chronic obstructive pulmonary disease M Mendonca, J Brown, M Rashid, HZ Ling, S Kang, A Cheng, E Boston-Griffiths, M Okorie,

M Thomas, S Woldman, H Booth, DO Okonko

2.35pm S165

> Deprivation is an independent predictor of I-year mortality in outpatients with chronic

obstructive pulmonary disease

PF Collins, RJ Stratton, R Kurukulaaratchy, M Elia

2.50pm **S166** 

> The role of clinical, metabolic and cardiac biomarkers in predicting outcome from COPD exacerbations requiring hospital admission: a prospective observational study

## Friday 3 December 2010

GTack, V Osman-Hicks, A Hicks, Y Perry, RM Angus, PMA Calverley, B Chakrabarti

3.05pm **S167** 

> Expansion of the red cell distribution width and evolving iron deficiency as predictors of poor outcome in chronic obstructive

pulmonary disease

M Rashid, J Brown, HZ Ling, M Mendonca, S Kang, R Sofat, M Okorie, M Thomas, S Woldman, H Booth, DO Okonko

**S168** 3.20pm

> Evaluation of the MRC dyspnoea scale and a novel extended version in prediction of inhospital death and early readmission in acute

exacerbations of COPD

| Steer, E Norman, G Afolabi, G | Gibson,

SC Bourke

3.15pm - 4.40pmAbbey Room, 4th Floor

**POSTER DISCUSSION: P237 – P247** 

Clinical challenges in diagnosing and managing respiratory infection

Chaired by: Dr Wei Shen Lim (Nottingham) and Professor John Macfarlane (Nottingham)

**P237** The utility of the Nottingham Health Profile in exacerbations of non-cystic fibrosis bronchiectasis

MP Murray, | Twiss, SP McKenna, AT Hill **P238** Characteristics, treatment patterns and outcomes of patients with non-CF bronchiectasis: a single institution district general hospital (DGH) analysis MI McDonnell, C Mashamba, A Foden

**P239** Audit of once daily Nebulised Hypertonic 6% Saline (HTS) in adult non-CF bronchiectasis

H Pyne, B Kane, BR O'Driscoll

**P240** Longitudinal study of sputum microbiology

in adult non-CF bronchiectasis JG Macfarlane, P McAlinden, A De Soyza

P241 Functional impairment in patients with

bronchiectasis

NS Gale, IM Duckers, M Munnery, S Enright,

**P242** The treatment of Pseudomonas Aeruginosa (PA) in non-CF bronchiectasis

O Hewitt, L Mc Crossan, R Hanna, J Rendall,

JM Bradley, JS Elborn

**P243** Duration and choice of antibiotics in hospital admitted community acquired pneumonia

patients over a period of 5 years in NHS

South East of Scotland

GC Choudhury, PM Mandal, AA Akram, AS Singanayagam, JC Chalmers, AH Hill

## Friday 3 December 2010

**P244** Adherence with Department of Health guidelines for the management of pandemic HINI influenza in secondary care MM Khan, RB Gore, SI Fowler

**P245** Assessment of acute illness severity and radiological extent identify patients at heightened risk of developing major pneumonic progression in influenza A HINI/2009 infection

> I Choy, A Draper, E Ribbons, I Vlahos, S Grubnic, T Bicanic, P Riley, M Wansbrough-Jones, F Chua

**P246** Suspicion-prompted testing reveals missed opportunities for diagnosing new HIV cases amongst patients with community-acquired pneumonia

S Safavi, FJK Chua, P Reilly, GK Russell

**P247** High levels of iron in the soil are associated with an increased incidence of bovine tuberculosis in cattle GV O'Donovan, HJ Milburn

3.30pm - 4.30pm

Mountbatten Room, 6th Floor

**POSTER DISCUSSION: P248 – P254** 

## Outcome determinants in acute lung injury

Chaired by: Dr Craig Davidson (London) and

Dr Nicholas Hart (London)

**P248** Measuring physical recovery in the critical care population: development of the Chelsea Critical Care Physical Assessment tool (CPAx)

> E | Corner, H Wood, C Englebretsen, S Boot, D Nikoletou

P249 Physicians' opinion: ceilings of therapy in chronic obstructive pulmonary disease (pilot study)

JL Gallagher, B Morton, I Clegg, J Walker, L Davies

P250 Incidence, clinical profile and outcomes of ventilator-associated pneumonia in a tertiary hospital

RM Panaligan, JP Guiang, MD

P251 Flow cytometric detection of intracellular activation markers of pulmonary cells during acute lung injury

AC Waite, KP O'Dea, MR Wilson, M Takata

P252 A physiological characterisation of injury, inflammation and resolution in murine aspiration pneumonitis

BV Patel, MR Wilson, M Takata

**P253** Pulmonary infiltrates in HIV negative immunocompromised patients: outcome and predictive factors S Chandramouli, M Devine, H Shoo, N Duffy

## SCIENTIFIC PROGRAMME

**P254** Investigating HMGBI as a potential inflammatory mediator in brain death induced lung damage AE Vallance, HR Walden, DM Karamanou, CR Fox, AJ Rostron, JA Kirby, AJ Simpson, **IH Dark, Al Fisher** 

3.00pm - 4.30pmCOFFEE/TEA will be served in the Benjamin Britten Lounge, 3rd floor

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## **SPEAKERS' BIOGRAPHICAL DETAILS**

**Dr Alvar Agustí** is Director of the Thorax Institute at Hospital Clinic in Barcelona and Scientific Director of the National Spanish Network for Respiratory Research (www.ciberes.org). His main research interest is COPD. He has a seat at the Royal Academy of Medicine of the Balearic Islands, is an Honorary Fellow of the Royal College of Physicians of Edinburgh (UK) and an Associate Editor of the American Journal of Respiratory and Critical Care Medicine.

Professor Jon Ayres is Professor of Environmental and Respiratory Medicine at the University of Birmingham. His research interests are the health effects of environmental exposures especially indoor/outdoor air pollution. He chairs the Department of Health's Committee on the Health Effects of Air Pollutants (COMEAP) and is a member of the Royal Commission on Environmental Pollution.

Dr Ian Balfour-Lynn is a Consultant at the Royal Brompton Hospital as well as the Chelsea and Westminster Hospital. He specialises in all aspects of paediatric respiratory medicine including both tertiary and secondary care. He is past President of the British Paediatric Respiratory Society. Dr Balfour-Lynn's current research interests are pulmonary hypertension in CF, health issues of air travel, and use of home oxygen. He co-chaired the committee who wrote the recent BTS guidelines on home oxygen in children.

Dr Chris Barber is a Consultant Respiratory Physician at the Royal Hallamshire Hospital in Sheffield, and Deputy Chief Medical Officer of the Centre for Workplace Health at the Health and Safety Laboratory in Buxton. He qualified in Medicine from Nottingham University in 1993 and proceeded to train in respiratory and general medicine in Trent and the North West. In addition, he spent two years as a research fellow at HSL dedicated to research into occupational lung disease. Dr Barber has specialist recognition in Respiratory and General Medicine from the GMC, and is an Associate of the Faculty of Occupational Medicine. He is also a member of GORDS, the government funded national group of experts in occupational lung disease, and sits on the advisory committee for SWORD, the national surveillance scheme for occupational lung disease. His main areas of clinical interest relate to the diagnosis and management of all types of occupational lung disease. Current research interests include the national/ international approach to the diagnosis/management of occupational airway disease, and occupational lung disease relating to metal working fluid.

**Dr Alan Barker** has been a member of the faculty of Oregon Health and Science Center, Portland, Oregon since 1976. He serves as Medical Director of Respiratory Care and the Pulmonary Function Laboratory. He also maintains active inpatient and outpatient practices in Pulmonary Medicine. Dr Barker has been recognized as a regional and national expert on AAT deficiency and

has published numerous articles on the subject. He has been the Oregon Principal Investigator for an NIH Rare Lung Disorders network and is involved in studies of AAT deficiency and Lymphangioleiomyomatosis. He also maintains a longstanding interest in bronchiectasis, specializing in clinical trials involving reducing infection with aerosol antibiotics including tobramycin and more recently aztreonam.

Professor Peter Barnes is Head of Respiratory Medicine at Imperial College London. He has published over 1000 peer-review papers on asthma, COPD and related topics and has been the most highly cited respiratory researcher in the world over the last 20 years. He was elected a Fellow of the Royal Society in 2007.

Dr Paul Beckett is a Consultant Respiratory Physician in Burton-on-Trent. He went to medical school in Cambridge and did his specialist training in Southampton, including an MD in asthma pharmacology. He is one of the clinical leads for the National Lung Cancer Audit and is the current chair of the BTS Lung Cancer and Mesothelioma Specialist Advisory Group. His other interests include patient safety and the use of IT as a tool for service improvement in healthcare.

Dr Diana Bilton is a Consultant at the Royal Brompton Hospital and Honorary Senior Lecturer at Imperial College London. She specialises in cystic fibrosis and non-CF bronchiectasis. She has served on the Non-CF Bronchiectasis guidelines committee as well as the BTS Infection Specialist Advisory Group. She chairs the Medical Advisory Group of the CF Trust. Dr Bilton has research interests in new treatments of both CF and non-CF bronchiectasis.

**Dr Stephen J Bourke** is a Consultant Physician in Respiratory Medicine at the Royal Victoria Infirmary, Newcastle upon Tyne. He is Director of the Newcastle Adult Cystic Fibrosis Centre and has research interests in clinical aspects of cystic fibrosis.

Dr Malcolm Brodlie is an SpR in Respiratory Paediatrics at The Great North Children's Hospital in Newcastle. He was awarded a Joint MRC/CF Trust Clinical Research Training Fellowship to fund a PhD developing a primary airway epithelial cell culture model from CF lungs removed at transplantation. He is the trainee-representative on the CSAC for paediatric respiratory medicine and BPRS executive committee.

Professor Gordon Brown completed a PhD in microbiology at the University of Cape Town, South Africa. He was a Wellcome Trust travelling postdoctoral fellow at the University of Oxford, UK, then a Wellcome Trust Senior Fellow at the University of Cape Town, South Africa, and is now a Professor of Immunology at the University of Aberdeen. His primary research interests are macrophage receptors and their role in immunity and homeostasis.

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## SPEAKERS' BIOGRAPHICAL DETAILS

**Dr Jeremy Brown** is a clinician scientist and a Reader in Respiratory Infection in the Centre for Respiratory Research at UCL. His main research interest is the molecular pathogenesis of Streptococcus pneumoniae pneumonia, and his clinical interests are pneumonia, infections in the immunocompromised host and bronchiectasis.

Dr Kevin K Brown is a Professor and Vice Chairman in the Department of Medicine at National Jewish Health, Denver, USA. He has an active clinical practice as well as an NIH-funded translational research programme focused on the development, progression, and control of fibrosing lung diseases. His clinical research interests include the development and progression of lung disease in the connective tissue disorders.

Dr Mat Callister is a Consultant Physician at St James's University Hospital, Leeds. He was previously a Wellcome Clinical Research Fellow at the National Heart and Lung Institute, and is currently a member of the BTS Lung Cancer and Mesothelioma SAG. His research interest is in the early detection of lung cancer.

Professor Rachel Chambers heads a group of basic scientists and physician scientists at University College London (UCL). Her research interests are centred on the elucidation of the pathomechanisms leading to lung inflammation, remodelling and fibrosis; with a particular focus on the contribution of procoagulant signalling pathways. Professor Chambers is also Divisional Postgraduate Tutor (UCL Division of Medicine) and is an Editorial Board member of the American Journal of Respiratory Cell and Molecular Biology. Her research is funded by major peer-reviewed grants awarded from the MRC, the Wellcome Trust, the British Lung Foundation and the European Commission.

Professor Edwin Chilvers is Professor of Respiratory Medicine at the University of Cambridge and Honorary Consultant Physician at Addenbrooke's Hospital, CUHNHSFT and Papworth Hospital NHSFT. His research interests include understanding the molecular basis of neutrophil priming, activation and apoptosis, in particular, the role of the phosphoinositide 3-kinases and the use of radiolabelled autologous granulocytes to define neutrophil kinetics in vivo.

Dr Deborah Clarke is a Senior Scientist at Medlmmune, a leading biologics company. She obtained her PhD in Respiratory Pharmacology from Imperial College, London in 2003 and since then has continued to focus on the inflammatory signalling pathways activated in asthma.

**Dr Steven Conway** is Clinical Director for Cystic Fibrosis Services at Leeds Teaching Hospitals NHS Trust caring for both children and adults. He trained at St George's Medical School, London. Dr Conway's interest in cystic fibrosis was first stimulated by a student placement on Dr John Batten's (ex-President of the

UK Cystic Fibrosis Trust) firm, and later as a Registrar in Leeds for Dr Jim Littlewood. He has lectured and presented his work extensively both at International meetings and European meetings with approximately 170 publications. He has been Deputy Chair of the UK CF Trust Medical Advisory Committee, Chair of the UK CF Trust Consensus Committee on Bone Disease, Deputy Chief Editor of the European Cystic Fibrosis Society Journal, and he acts on the Executive Board of the European Clinical Trials Network.

**Professor Ulrich Costabel** is Professor of Medicine and Chief of the Division of Pneumology and Allergology at the Ruhrlandklinik in Essen, Germany. He received his undergraduate training and his MD magna cum laude at the University of Freiburg. After graduating, he completed his residency and fellowship in internal and chest medicine in the Department of Professor Heinrich Matthys at the University Hospital in Freiburg. Professor Costabel's research interests lie in clinical and immunological studies in interstitial lung diseases, with a specific focus on clinical and research applications of bronchoalveolar lavage. In recent years, he was Principal Investigator of major clinical trials in IPF (N-acetylcysteine, etanercept, bosentan, interferon-y, prifenidone). He is President of the World Association of Sarcoidosis and Other Granulomatous Disorders (WASOG) and organised the World Congress on Sarcoidosis in Essen in 1997. He is also Chairman of the European BAL Group since 1998 and has co-organised several International Conferences on BAL. In 1992/1993 he spent a sabbatical of six months with Professor Takateru Izumi at the Chest Disease Research Institute of the University of Kyoto in Japan.

Professor Costabel has been actively involved with the European Respiratory Society (ERS) since its birth, having been Chair of the Occupational and Environmental Health Group and Secretary of the Assembly, and later Chair of the Bronchoalveolar Lavage Group. From 2002 to 2005 he was Head of the Clinical Assembly and member of the Executive Committee of the ERS, and in 2006 Chairman of the ERS Congress in Munich. Since 1990 he has served on the Editorial Board of the ERI, first as an Associate Editor, then as an Assistant Chief Editor, and from 1994-1999 as the Chief Editor. He was Editor of the German journal Pneumologie from 2001 – 2005, has co-edited the European Respiratory Monograph "Sarcoidosis", and is currently on the board of Sarcoidosis, Seminars in Respiratory and Critical Care Medicine, and Current Opinion in Pulmonary Medicine, among others. He is the recipient of several honours and awards, including the Sarcoidosis Research Prize presented by the German Sarcoidosis Association. He is also the author of numerous scientific papers (275) PubMed listed publications) and chapters, and has edited several books.

**Dr Paras Dalal** is a Consultant Cardio-Thoracic Radiologist at the Royal Brompton and Harefield Foundation Trust and an Honorary Senior Lecturer at Thorax 2010;65(Suppl IV) xlv

## SPEAKERS' BIOGRAPHICAL DETAILS

Imperial College. He is particularly interested in lung cancer imaging and in percutaneous ablations therapies for lung tumours, and is currently involved in various studies involving radiofrequency ablation, microwave ablation and cryotherapy.

Dr Jane Davies is a Reader and Honorary Consultant in Paediatric Respiratory Medicine and Gene Therapy at Imperial College London and the Royal Brompton Hospital. The focus of her research is cystic fibrosis, in particular the design and implementation of the clinical programme for the UK CF Gene Therapy Consortium. She is also PI for clinical trials of novel pharmacological approaches to CFTR correction and collaborates on research into the pathogenesis of CF and other chronic suppurative lung diseases.

Professor Peter Davies qualified at Oxford and St Thomas's Hospital in 1973. He was appointed a Consultant Respiratory Physician to Aintree Hospital and the Liverpool Heart and Chest Hospital, in 1988. He is author of over 100 peer reviewed papers and is editor of Clinical Tuberculosis, now in its fourth edition. In 2004 he was appointed Honorary Professor to Liverpool University.

Professor Dame Sally C Davies is the Director General (DG) of Research and Development and Chief Scientific Adviser for the Department of Health and NHS. Since May I<sup>st</sup> Dame Sally has also been CMO (Interim). She has been actively involved in NHS R&D from its establishment and as DG she established the National Institute for Health Research (NIHR) with a budget of £1 billion. In the CMO role she is advising on the development of the Government's new Public Health Service.

Dame Sally led the UK delegations to the WHO Ministerial Summit in November 2004 and the WHO Forum on Health Research in November 2008. She spoke on R&D at the World Health Assembly May 2005 and is a member of the WHO Global Advisory Committee on Health Research (ACHR). She also chaired the Expert Advisory Committee for the development of the WHO research strategy, endorsed by the World Health Assembly in May 2010. She is a member of the International Advisory Committee for A\*STAR, Singapore and the Caribbean Health Research Council Board and advises many others on research strategy and evaluation including the Australian NHMRC. Her own research interests focus on Sickle Cell disease.

Professor Marc Decramer is Professor of Respiratory Medicine and Chief of the Respiratory Division at the Katholieke Universiteit Leuven, Belgium. In the past, he has been Chairman of the Scientific Committee of the European Respiratory Society (ERS) and Chief Editor of the European Respiratory Journal. He is currently President of the ERS.

**Professor Christopher Denton** is Professor of Experimental Rheumatology at University College and

Consultant Rheumatologist at Royal Free Hospital, London. He leads a large multidisciplinary clinical scleroderma service at the Royal Free Hospital, managing more than 1200 patients. Professor Denton's laboratory research has focused on mediators of vasculopathy and fibrosis in connective tissue disease and preclinical models.

Dr Anthony De Soyza is a HEFCE Clinical Senior Lecturer working at Newcastle University and The Freeman Hospital where he runs a busy bronchiectasis service in addition to a COPD service. His research interests are non culture based diagnostics in CF and non CF bronchiectasis, the systemic aspects of both COPD and bronchiectasis as well as the interaction between pathogens and host immunity. He is also interested in network building in bronchiectasis and has set up a regional network of interested professionals (BRING). He leads the William Leech Centre for Respiratory Clinical Trials and has had great satisfaction in being a lead UK recruiter to bronchiectasis trials.

**Professor Ken Donaldson** is the Scientific Director of the ELEGI Colt Laboratory in the Queens Medical Research Institute, University of Edinburgh, where he is Professor of Respiratory Toxicology. He has published over 300 scientific papers on lung injury caused by inhaled particles and fibres and over 100 on nanoparticles.

Sir Neil Douglas is Professor of Respiratory and Sleep Medicine at the University of Edinburgh and an Honorary Consultant Physician at the Royal Infirmary of Edinburgh. He has published over 200 original papers, two books and 300 chapters and reviews on sleep and breathing, including, the chapter on Sleep Apnoea in Harrison's textbook. He is an international authority on the causation, consequences and treatment of sleep apnoea. Previous roles included President of the British Sleep Society and Secretary of the British Thoracic Society. He was President of the Royal College of Physicians of Edinburgh from 2004-2010, the longest serving President of that College for 250 years, when his major focus was on training. In 2007, he chaired a Review Group to manage the crisis in the Medical Training Application System (MTAS) at the request of the Secretary of State for Health in England, Patricia Hewitt. Sir Neil is currently Chairman of the UK Academy of Medical Royal Colleges.

Dr Jeffrey M Drazen was born and raised in St Louis and majored in physics at Tufts University and graduated from Harvard Medical School in 1972. After serving his medical internship at Peter Bent Brigham Hospital in Boston, he joined the Pulmonary Divisions of the Harvard Hospitals. He served as Chief of Pulmonary Medicine at the Beth Israel Hospital, Chief of the combined Pulmonary Divisions of the Beth Israel and Brigham and Women's Hospitals, and then as Chief of Pulmonary Medicine at Brigham and Women's Hospital. Through his research, Dr Drazen defined the role of

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## SPEAKERS' BIOGRAPHICAL DETAILS

novel endogenous chemical agents in asthma, leading to four new licensed pharmaceuticals for asthma with millions of people on treatment worldwide. In 2000, he assumed the post of editor-in-chief of the New England Journal of Medicine. During his tenure, the Journal has published major papers advancing the science of medicine, including the first descriptions of SARS and modifications in the treatment of cancer, heart disease and lung disease, and it has been at the forefront of the worldwide effort to register all clinical trials. The Journal, which has over a million readers every week, has the highest impact factor of any journal publishing original research.

Dr Mark Elliott is Consultant Physician in Respiratory and General Medicine at St James's University Hospital, Leeds. He qualified from the University of Cambridge and Royal London Hospital in 1982. Dr Elliott trained in London and in 1993 was appointed as Consultant Physician at St James's University Hospital, Leeds. He has been responsible for developing the home sleep and assisted ventilation service, for acute in hospital NIV and weaning of patients with prolonged ventilator dependence. He has research interests in acute and chronic non invasive ventilation and sleep related abnormalities of breathing.

Professor David R Ferry is a medical oncologist based at New Cross Hospital, Wolverhampton. He is the BTOG-2 Chief Investigator and enters around 50 patients per year into lung cancer clinical trials. He has taken part in lung cancer trials testing targeted therapies including, sorafanib, ZD6467, aflibercept, cetuximab, R1507, pemetrexed gefitinib and the PARP inhibitor BSI 201.

Professor Andrew Fisher graduated from Nottingham University in 1993. He received research training as an MRC training fellow in Newcastle and Edinburgh from 1996–99 and graduated PhD in Lung Transplantation in 2001 from Newcastle University. He completed specialist training in Respiratory Medicine in the Northern Deanery in 2003 and was subsequently awarded a GlaxoSmithKline Senior Clinical Fellowship in 2004. His current post is Professor of Respiratory Transplant Medicine in the Institute of Cellular Medicine at Newcastle University and Honorary Consultant Respiratory and Transplant Physician at Freeman Hospital, Newcastle upon Tyne. He has recently taken on the role of Academic Director of the Institute of Transplantation in Newcastle, the first dedicated multi-organ transplant facility in the UK.

Dr David Fishwick is a Reader in Respiratory Medicine at the University of Sheffield, Co-Director of the Centre for Workplace Health, an Honorary Consultant Respiratory Physician at Sheffield Teaching Hospitals NHS Foundation Trust and the Chief Medical Officer at the Health and Safety Laboratory. He has an active clinical and research interest in all aspects of occupational lung disease.

**Dr R Andres Floto** is a Wellcome Trust Senior Fellow based in the Cambridge Institute for Medical Research,

University of Cambridge where his research focuses on understanding the regulation of antigen processing by macrophages and dendritic cells during infection (particularly with mycobacteria) and how it can be manipulated therapeutically. As an Honorary Consultant at Papworth Hospital, Cambridge, his clinical interests centre on cystic fibrosis (CF), non-CF bronchiectasis and non-tuberculous mycobacterial infections.

**Dr Juliet Foweraker** is a Consultant Microbiologist at Papworth Hospital, Cambridgeshire, UK. Her interests are in the microbiology of non-CF and CF bronchiectasis, lung transplant infections, and treatment and prevention of endocarditis. She is a member of two UK Cystic Fibrosis Trust working groups, for antibiotics and for microbiology laboratory standards.

Professor Nick Gay worked with Professor John Walker (Nobel Prize for Chemistry 1997) on the F1Fo ATPase for his PhD and then spent a postdoctoral period at the University of California San Francisco with Tom Kornberg. Since returning to the UK in 1987, the lab has worked on Toll signalling initially as a developmental system in Drosophila and more recently as key regulators of innate immunity. Professor Gay is currently Professor of Molecular and Cellular Biochemistry at the University of Cambridge and Tutor for Advanced Students at Christ's College, Cambridge.

**Dr Paul Gill** is a Consultant Liaison Psychiatrist working in Sheffield. He is Chair of the Faculty of Liaison Psychiatry at the Royal College of Psychiatrists and also Chairs the Accreditation Advisory Committee of the Psychiatric Accreditation Network (PLAN). He has extensive experience of working with patients with difficult asthma and optimising their clinical management.

**Professor David Goldblatt** is Professor of Vaccinology and Immunology and Head of the Immunobiology Unit at the Institute of Child Health, University College London as well as a Consultant Paediatric Immunologist at the Great Ormond Street Hospital for Children NHS Trust. He is the Director of Clinical Research and Development for the joint Institution where he is also Director of the National Institute for Health Research (NIHR) Specialist Biomedical Research Centre. He was recently appointed as Programme Director of the Child Health theme for the UCL Partners Academic Health Science Centre. He obtained his medical degree from the University of Cape Town, South Africa, his Paediatric qualifications from the Royal College of Physicians (London) and a PhD in Immunology from the University of London, United Kingdom.

Professor Goldblatt has a long-standing interest in the immune response to vaccines and infectious diseases in childhood and has an active research programme studying bacterial conjugate vaccines, the kinetics of immunological memory and immunity and infections in early life. He is involved in clinical trials and basic science research projects in the United Kingdom, Africa and SE

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## **SPEAKERS' BIOGRAPHICAL DETAILS**

Asia and collaborates with colleagues in Europe and the USA. He is a regular advisor to the World Health Organisation (WHO) on bacterial conjugate vaccines and is Director of the WHO Reference Laboratory for Pneumococcal Serology based at the UCL Institute of Child Health in London. He served as a member of the United Kingdom Department of Health Joint Committee on Vaccines and Immunisation for 10 years (1997–2007) and the MRC Infection and Immunity Panel, and is currently co-chair of the Wellcome Trust Immunology and Infectious Disease Funding Committee.

Dr Richard Harrison is Consultant Respiratory Physician in Lung Health at the University Hospital of North Tees. He trained in Liverpool and Southampton and was appointed as a consultant in 1984. He is a member of the BTS Lung Cancer and Mesothelioma SAG. Dr Harrison currently provides the EBUS service for the Northern Region and his special interests include medical thoracoscopy and the use of indwelling pleural catheters in malignant effusions.

Dr Nicholas Hart is a Clinical Research Consultant in Respiratory and Critical Care Medicine within Guy's and St Thomas' NHS Foundation Trust and Kings College London Comprehensive Biomedical Research Centre. In addition to providing clinical support for critical care, he provides support to the Lane Fox Respiratory Unit, which is the regional weaning and non-invasive ventilation unit specialising in providing long-term support for patients with neuromuscular, skeletal deformities, chronic obstructive airways disease and obesity-related respiratory failure. He is a co-author of over 30 peer-reviewed original articles. His research is focused on advanced physiological monitoring, ventilation and rehabilitation with his current projects assessing and monitoring respiratory muscle activity in acutely breathless patients, investigating different ventilatory strategies for patients with obesity-related respiratory failure, neuromuscular disease and COPD, and rehabilitation for patients during weaning, following critical illness and post lung cancer resection.

Dr Matthew Hatton is a Consultant Clinical Oncologist at Weston Park Hospital and Honorary Senior Lecturer at the University of Sheffield. His practice involves the non-surgical treatment of lung and breast cancer. He is a member of the NCRI Lung Cancer Study Group (chairing their LORD subgroup), CTAAC, Clinical and Translational Radiotherapy research group and chairs the UK Consortium for Stereotactic Radiotherapy in early lung cancer. His research interests include functional imaging for lung cancer radiotherapy and he is the principle investigator for a number of CHART based studies.

**Dr Liam Heaney** is based at Belfast City Hospital and runs a multi-disciplinary Regional Difficult Asthma Service. He chairs the Difficult Asthma Evidence Review Group for the BTS/SIGN Asthma Guidelines and sits on the National Steering Committee and BTS Asthma

SAG. He leads the BTS UK Difficult Asthma Registry and research interests include clinical difficult asthma assessment, mechanisms behind refractory asthma and viral/epithelial interactions in asthma.

Professor Tim Higenbottam's academic and clinical career was in Cambridge (1980-1995) and Sheffield (1995-2001). In Cambridge during the 1980s he worked on lung transplant surgery, and in Cambridge and Sheffield, study of the role of endothelial nitric oxide production in PAH was undertaken. In 2001 he moved to Respiratory and Inflammation R&D at AstraZeneca. His work centred on target identification for new therapies in COPD and the development of proof of concept study design for COPD therapies. Following a successful pharmacovigilance study of Iressa in Japan, Professor Higenbottam became a Senior Principle Scientist in AstraZeneca. In 2008 he joined Chiesi as Director of Corporate Clinical Development in Italy and is responsible for the clinical development of therapies for COPD, asthma and the special care disease of cystic fibrosis and neonatal RDS. This includes the highly successful new combination therapy Foster®.

Professor Higenbottam is a co-board member of the Severe Asthma UBIOPRED IMI project, a private public partnership to enhance therapy development in the EU. This is to stimulate academic industry interaction to enhance new therapy development. He is the Chairman of the Professional Standards Committee for the Faculty of Pharmaceutical Medicine, Royal College of Physicians and provides oversight of the CCT training for Pharmaceutical Medicine in the UK. He remains a visiting Professor of Medicine in the University of Sheffield, School of Medicine.

Dr Bernard Higgins is a Consultant Respiratory Physician in Newcastle, having previously trained in Manchester, Edinburgh and Nottingham. He has a particular interest in asthma, and is currently Chair of the BTS Specialist Advisory Group for Asthma and co-Chair of the British Asthma Guideline Steering Group.

Dr Adam Hill is a Consultant Chest Physician and Honorary Senior Lecturer at the Royal Infirmary and University of Edinburgh. He is the Respiratory Infection Lead and has a special interest in bronchiectasis, community acquired pneumonia and tuberculosis. He is involved in clinical and translational research and was on the committees for the BTS Bronchiectasis and Community Acquired Pneumonia Guidelines.

Professor Stephen Holgate is MRC Professor of Immunopharmacology at the School of Medicine in Southampton with research interests in the mechanisms and treatment of asthma. He is Chair of the MRC Population and Systems Medicine Board and Chair of the UK Respiratory Research Collaborative. In 2010 he was appointed as Chair Designate of REF Main Panel A (Medicine, Health and Life Sciences).

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## SPEAKERS' BIOGRAPHICAL DETAILS

Dr David Honeybourne is a Consultant Physician at Birmingham Heartlands Hospital. He is also Honorary Clinical Reader in Biological Sciences and Respiratory Medicine at the University of Warwick and Honorary Senior Clinical Lecturer in Medicine at the University of Birmingham. He is the Director of the West Midlands Adult Cystic Fibrosis Centre at Heartlands Hospital Birmingham. This centre has over 335 CF patients and moved into a purpose built unit in 2002. His main research interest is respiratory infection. He is an examiner for the Universities of Birmingham, Warwick and London. He is an editor of the Journal of Antimicrobial Chemotherapy and is the author of 130 papers, 75 abstracts and co-author of several books.

Professor Richard Hubbard is the GSK/BLF Professor of Respiratory Epidemiology at the University of Nottingham, based at Nottingham City Hospital. His research interests include the epidemiology of interstitial lung disease and asthma, drug safety, co-morbidity of respiratory disease, access to services and outcomes for people with lung cancer. He has clinical interests in interstitial lung disease and lung complications of bone marrow transplantation.

Dr Philip Ind is a Respiratory and General Physician at Hammersmith Hospital who trained initially in Clinical Pharmacology. He was appointed Consultant Physician in 1986 and Clinical Head of Department in 1996. His main research interest is in airway disease. He is a member of the BTS Specialist Advisory Group for Asthma and a Member of the Cardiovascular, Respiratory & Allergy Expert Group to MHRA.

Dr Sam Janes trained in respiratory medicine in North West Thames region and completed an MSc in Respiratory Medicine in 1999. He performed an MRC Training Fellowship and post-doctoral period working in the CRUK Lincoln's Inn Fields Institute with Fiona Watt working on integrin adhesion molecules and cancer cell survival. He then moved as an MRC Clinician Scientist to UCL leading a group interested in the role of stem cells in lung disease pathogenesis including cancer formation and treatment of lung disease using cell therapies in the Centre for Respiratory Research. He was awarded a Wellcome Senior Clinical Fellowship in June 2010 to work on therapies for lung cancers. He works as a Consultant for the NHS in Respiratory and General Medicine with a particular interest in lung cancer, mesothelioma, bronchoscopy and early lung cancer detection.

Dr Rupert Jones is a GP and Honorary Clinical Lecturer at the Peninsula Medical School, Plymouth. He is a GP with special interest in Plymouth PCT running oxygen and pulmonary rehabilitation services. His research interests include diagnosis of COPD, psychological factors in COPD, pulmonary rehabilitation, patient education and self-management.

**Dr David Kiely** is a Consultant Physician in Respiratory and General Medicine at Sheffield Teaching Hospitals.

He has a sub-speciality interest in pulmonary vascular disease and leads a nationally designated Pulmonary Hypertension Centre. He graduated from the University of Edinburgh and completed a period of post-graduate research investigating the cardiopulmonary interactions of hypoxia and hypercapnia and the role of vasoactive mediators in the pulmonary circulation. He completed his post-graduate training in Cambridge before moving to Sheffield in 2001.

Professor Bart N Lambrecht obtained his MD/PhD degree at the University of Ghent, Belgium in 1993 and 1999. After obtaining the MD/PhD degree under the mentorship of Professor Romain Pauwels, he moved to The Netherlands where he trained in Pulmonary Medicine. He became Professor of Pulmonary Medicine in 2005, holding a special chair in Immunopathology of the Lung at the pulmonary research programme of Erasmus University, Rotterdam, The Netherlands. After ten years in The Netherlands, he moved back to Belgium and was appointed Professor of Pulmonary Medicine at Ghent University, and is currently heading a group of 24 scientists dealing with the immunopathology of asthma and immunotherapy of cancer.

He is the author of over 100 papers dealing with the use of mouse models to study the pathogenesis of asthma and cancer related immunosuppression. In the last few years, he has received several awards, including the Odysseus Grant of the Flemish government, The Inbev-Baillet Latour Prize for Clinical Research, The Sabin Prize for Vaccine research, The Pharmacia Allergy Research Foundation Award 2004, The NWO Vidi Scholarship, The Schering Plough Respiratory 2000 Award, and the 1998 European Respiratory Society Annual Allergy and Immunology award. Among academic activities, he is a Young Academy member of the Royal Dutch Academy of Arts and Sciences (KNAW), advisory editor of The Journal of Experimental Medicine and associate editor of Mucosal Immunology. The interest of his research group is on the role of antigen presenting dendritic cells in the initiation of the pulmonary immune response that ultimately leads to sensitization to antigens, applied to allergic disease, respiratory viruses and cancer immunotherapy.

Dr Allan Lawrie is an MRC Career Development Award Fellow and head of the Pulmonary Vascular Research Group in the Department of Cardiovascular Sciences at the University of Sheffield. After completion of his PhD at the University of Sheffield he undertook a Post-doctoral Fellowship under the mentorship of Professor Marlene Rabinovitch at Stanford University. He returned to Sheffield at the end of 2004 to continue his studies into the pathogenesis of pulmonary hypertension.

**Dr Wei Shen Lim** is a Consultant Respiratory Physician at Nottingham University Hospitals, City Hospital Campus. His research interest is in respiratory infections. He is currently Chairman of the BTS Infection SAG and was Chairman of the BTS Community Acquired

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Pneumonia Guidelines Committee and joint BTS/BIS/HPA/DoH Pandemic Influenza Clinical Management Guidelines Committee.

Dr Marc Lipman is a HEFCE-NHS Clinical Senior Lecturer and Consultant in Respiratory and HIV Medicine at the Royal Free Hospital, London. He is Chair of the BTS TB Specialist Advisory Group, advisor to the Department of Health, a member of the Health Protection Agency TB Programme Board and the National MDRTB advisory service. His research interests focus on tuberculosis, respiratory infection and HIV.

Professor David Lomas was elected to the Professorship of Respiratory Biology at the University of Cambridge in 1998. He is an Honorary Consultant Respiratory Physician at Addenbrooke's and Papworth Hospitals and has a particular interest in  $\alpha$ I-antitrypsin deficiency, the serpinopathies and COPD.

**Dr Toby Maher** is a Consultant Respiratory Physician on the Interstitial Lung Disease Unit at the Royal Brompton Hospital. Prior to this, he was a Wellcome Trust Clinical Research Fellow at the Centre for Respiratory Research, UCL. His research interests include; biomarker discovery, clinical trials in fibrosing lung disease and studying the role of prostanoids and apoptosis in the pathogenesis of IPF.

**Dr William Man** is Consultant Chest Physician and National Institute for Health Research Clinician Scientist at the Royal Brompton and Harefield NHS Foundation Trust. His research interests include pulmonary rehabilitation and skeletal muscle dysfunction in COPD.

Dr Richard Marshall trained in respiratory and critical care medicine at UCL, with PhD and post-graduate training as a Wellcome Fellow. At GSK, he has lead research groups in translational medicine, clinical development and target biology. Currently, he is Head of the Fibrosis Discovery Performance Unit, responsible for R&D in the fibrosis area and also Head of External Discovery in Respiratory R&D responsible for collaborative partnerships and business development across biotech and academia. Externally, Dr Marshall has represented GSK on a number of public-private partnership initiatives.

Professor Michael A Matthay is a Professor of Medicine and Anesthesia at the University of California at San Francisco and a Senior Associate at the Cardiovascular Research Institute. He is Director of Critical Care Medicine Training in the Department of Medicine and Associate Director of the Intensive Care Unit. He received his AB from Harvard University in 1969 and his MD from the University of Pennsylvania School of Medicine in 1973. Dr Matthay received clinical training in Internal Medicine at the University of Colorado from 1973–76 and in pulmonary and critical care medicine from the University of California at San Francisco from 1977–78. He also received research

training from the Cardiovascular Physiology Laboratory, University of Colorado in 1976 and the Cardiovascular Research Institute from 1978–79.

Dr Matthay's basic research is focused on active ion and water transport mechanisms that account for the resolution of pulmonary oedema as well as mechanisms that account for alveolar epithelial repair after acute lung injury. The studies are carried out in several in vivo and in vitro models. Dr Matthay's clinical research is focused on the mechanisms that account for the pathogenesis and resolution of clinical acute lung injury and pulmonary oedema. More recently his research group has focused on mesenchymal stem cells and acute lung injury.

Dr Andrew Maynard is Director of the University of Michigan Risk Science Centre. A leading authority on the safe development and use of emerging technologies, he has testified before the US Congress, is a member of the World Economic Forum Global Agenda Council on the Challenges of Emerging Technologies, and serves on numerous review and advisory panels. An author of over one hundred scientific papers, reports and articles, Dr Maynard appears frequently in print and on television and radio, and writes regularly on science and society at http://2020science.org. He is a graduate of the University of Birmingham, and has a PhD in physics from the University of Cambridge.

Professor Bob Maynard leads the Air Pollution and Noise Unit of the Health Protection Agency. He is a medical physiologist and toxicologist and led the Department of Health's work on air pollution from 1990 to 2006. Prior to that, he led the Medical Division at the Chemical Defence Establishment at Porton Down. He has edited monographs on air pollutants, chemical warfare agents and the scientific foundations of trauma. He edited the World Health Organisation's Air Quality Guidelines for Europe in 1998. He was a co-organiser of a Royal Society meeting on nano-particles in 2005 and leads for the Health Protection Agency in this area. He holds an Honorary Chair in Public Health at Birmingham University and was awarded a CBE for his work on air pollution in 2000.

Dr Liz McDermott is a Consultant Immunologist in Nottingham with an interest in primary immune deficiency and autoinflammatory disease. She currently works closely with the local respiratory team to provide a combined immune deficiency/respiratory service. She is part of the respiratory/immune deficiency team within the National Ataxia Telangiectasia (AT) Clinic. Research interests include primary immune deficiency, AT and TRAPS (TNF Receptor Associated Periodic Syndrome).

Professor Ann Millar is Professor of Respiratory Medicine at the University of Bristol, having trained in London and Liverpool. She has clinical interests in diffuse parenchymal lung disease, acute lung injury and the immunocompromised lung. Professor Millar's research interests are in the mechanism regulating the outcome of acute and chronic lung injury.

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**Professor Mike Morgan** is a Consultant Respiratory Physician at the Department of Respiratory Medicine, Allergy and Thoracic Surgery at the University Hospitals of Leicester NHS Trust at Glenfield Hospital and Honorary Professor at the University of Leicester. He has previously worked at Birmingham Heartlands and the Brompton Hospitals. His career interests have included the assessment and management of respiratory disability particularly in COPD. He has published widely and was an author of the BTS and ERS/ATS statements on pulmonary rehabilitation. He is also a Council member and Vice President of the British Lung Foundation, the editor of Chronic Respiratory Disease and previously, Chairman of the Asthma UK Research Committee. He has been a member of the external reference group for the NICE COPD guidelines and the COPD NS. He is Chairman of the Executive of the British Thoracic Society.

Professor Mary J Morrell is Professor of Sleep and Respiratory Physiology, Imperial College London, Royal Brompton Hospital. Her research is focused on sleep related breathing disorders, and is supported by the Wellcome Trust, British Heart Foundation, and National Institute of Health Research.

Professor Nick Morrell is the British Heart
Foundation Professor of Cardiopulmonary Medicine at
the University of Cambridge School of Clinical Medicine,
Addenbrooke's and Papworth Hospitals. His major
research interest is in the molecular basis of pulmonary
arterial hypertension and the translation of these studies
into novel therapies. He is the Research Director of the
Pulmonary Vascular Diseases Unit at Papworth Hospital.

Dr Ed Neville has been a Consultant Chest Physician in Portsmouth since 1983. He was Chairman of the Executive Committee of the British Thoracic Society from 2002 to 2005, having previously been BTS Secretary, and has sat on most other BTS committees. He is a former Director of Training (Linacre Fellow) at the Royal College of Physicians. His respiratory publications have mostly been in asbestos related pleural disease and sarcoidosis. He had major involvement in the original asthma guidelines and currently the pleural disease guidelines. His interest in medical education includes the development of curricula and assessment methodology. He is President-elect of the BTS.

Dr Rob Niven is a Senior Lecturer and Consultant Respiratory Physician at the University of Manchester and University Hospital of South Manchester. As a clinician he runs a supra-regional service for severe asthma. He has assessed over 600 severe asthma patients, with around 50% of these referrals being for patients on maintenance oral steroids. He is a core member of the UK National Severe Asthma Network, with over 650 patients entered onto a national database, with Manchester being the leading site.

As a researcher he has published over 70 peer reviewed papers and authored 5 book chapters. Areas of interest

have included occupational lung disease, environmental epidemiology and more recently clinical practice in severe asthma. He has innovated research into clinical practice in the fields of hypertonic saline for bronchiectasis as a therapy, awareness and diagnosis of dysfunctional breathing patterns, the role of antifungal therapy in severe asthma with fungal sensitisation and has been a chief investigator in the UK in the Bronchial thermoplasty trials.

In addition Dr Niven is a keen educator and leads the final year exams for the south Manchester site as well as being active in all aspects of education at undergraduate level.

Dr Paul W Noble is the Charles Johnson MD Professor of Medicine at Duke University Medical Centre and Chief of the Division of Pulmonary, Allergy and Critical Care Medicine. Dr Noble has a long-standing interest in the mechanisms that control lung inflammation and fibrosis in the absence of infection. His laboratory has focused on the role of the extracellular matrix glycosaminoglycan hyaluronan and its cognate receptors in lung injury, inflammation and repair.

Dr Ronan O'Driscoll is a Consultant Respiratory Physician in Salford. His research interests include asthma, COPD, bronchoscopy and oxygen therapy. He was the lead author of the European Respiratory Society Nebulizer Guideline in 2001 and the BTS Guideline for Emergency Oxygen Use in Adults in 2008.

Professor Luke O'Neill currently holds the Chair of Biochemistry at Trinity College Dublin. He obtained his PhD in Pharmacology from the University of London in 1988. He was a Medical Research Council Postdoctoral fellow at the Strangeways Research Laboratory, Cambridge until 1991, when he returned to Trinity College Dublin where he was appointed Lecturer in Biochemistry. He became a fellow at Trinity in 1996. In 2002 he was appointed Science Foundation Ireland Research Professor. He has won numerous awards for his research, notably the Royal Irish Academy Medal for Biochemistry, The Irish Society for Immunology Medal, the Royal Dublin Society/Irish Times Boyle Medal for Scientific Excellence and the Science Foundation Ireland Researcher of the Year Award 2009. He was elected a member of EMBO in 2005. He is a co-founder and director of Opsona Therapeutics. In 2008 he was appointed Chair of the Immunity and Infection panel of the European Research Council. His research is in the area of the molecular basis to inflammatory diseases, with a particular interest in pro-inflammatory cytokines and Toll-like receptors. Professor O'Neill has published over 180 papers and reviews on his research, in journals such as Nature, Science, Cell, Nature Immunology, Nature Medicine, Nature Genetics and PNAS. His contribution to the field of immunology in Ireland and internationally can be seen from the recent ranking of Ireland as third in the world in terms of citations per paper (1999–2009), where seven of his publications were ranking in the top nine from Ireland since 2006. He is on the editorial boards of six journals, including

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the Journal of Biological Chemistry and the Journal of Immunology.

Professor Martyn R Partridge is Professor of Respiratory Medicine at Imperial College London, UK, NHLI Division based at Charing Cross Hospital, and Honorary Consultant Respiratory Physician to Imperial Hospitals NHS Trust. His research interests are in the delivery of effective respiratory healthcare, with especial interest in evaluating novel methods of delivering care and patient centred approaches. Professor Partridge was (Honorary) Chief Medical Advisor to Asthma UK for 20 years and Chairman of the Trustees of the National Respiratory Training Centre (NRTC) (now part of Education for Health) from 1993 to 2008. From 1991 to 2003 he was a member of the executive committee of the Global Initiative for Asthma (GINA) and from 1992 to 2002, on the medical aerosols subcommittee of the United Nations Environment programme overseeing phase out of CFCs in inhalers. He has chaired a number of WHO initiatives. Professor Partridge was a member of the British Asthma Guidelines group from 1989 to 2008. He completed three years as Chairman of the British Thoracic Society in 2003 and was elected Vice President and then President of the Society in 2007-9. Professor Partridge is head of the Undergraduate Final Year for the Faculty of Medicine at Imperial College and was Lead Clinical Director of the North West London Comprehensive Local Research Network from 2008 to 2010. In 2009 he was appointed to Chair the UK Department of Health's Asthma Steering Group and Children's Asthma Sub Group and he serves on the Department of Health Respiratory Programme Board.

**Dr Mark Pasteur** is a Consultant Respiratory Physician in Norwich and has been a member of the BTS Standards of Care Committee and chaired the BTS guideline on non-CF bronchiectasis steering group.

Professor Ian D Pavord has been a Consultant Physician since 1995 and Honorary Professor of Medicine since 2005 at the Institute for Lung Health, Glenfield Hospital, Leicester, UK. He trained at University College London and Westminster Hospital, graduating in 1984. As a postgraduate he has worked in respiratory medicine at all grades and was a Lecturer in Respiratory Medicine at Nottingham University and a Visiting Fellow at the Firestone Regional Chest and Allergy Unit, McMaster University, Canada. His research interests include the non-invasive assessment of airway inflammation in asthma, cough, and chronic obstructive pulmonary disease.

Professor Pavord is Editor of Thorax, Chief Medical Officer of Asthma UK and a former Associate Editor of the American Journal of Respiratory and Critical Care Medicine. He is the author of more than 200 publications including four in the New England Journal of Medicine and eight in the Lancet. He gave the Cournand Lecture at the 2004 European Respiratory Society meeting, the

second UK based researcher to have been given this honour. He is married to a Consultant Haematologist and has three children and is a keen golfer with a handicap of four.

Professor Andrew Peacock is the Director of the Scottish Pulmonary Vascular Unit, which looks after all the patients with pulmonary hypertension in Scotland (population 5 million). He is also Professor in Medicine at the University of Glasgow (Respiratory Medicine). Professor Peacock trained at St Bartholomew's Hospital Medical College, London, Caius College Cambridge, Brompton Hospital, London, UK and at the University of Colorado Health Sciences Centre, CO, USA, where he studied the effect of high altitude on the pulmonary circulation of chickens! Hypoxia remains the main theme of his research because it combines the science of the pulmonary circulation with an unhealthy interest in mountains. His laboratory studies the effects of hypoxia on pulmonary vascular-cell proliferation and on the physiological responses of the human pulmonary circulation. He has been involved in many of the clinical trials of new therapies for pulmonary hypertension in the last years, and has spent time developing new end points in the assessment of patients with pulmonary vascular disease. He is Chair of the Pulmonary Circulation Group of the European Respiratory Society and the author of more than 150 papers, reviews and chapters on pulmonary vascular disease. He is co-editor with Lew Rubin of Pulmonary Circulation (2<sup>nd</sup> Edition): diseases and their treatments (3rd Edition in process).

Dr Linda Pearce is a Respiratory Nurse Consultant at West Suffolk Hospital and Clinical Lead for the Suffolk COPD Services. Her interest in respiratory health started as an occupational nurse and progressed through practice nursing. She completed her Doctorate in Nursing at Essex University and her thesis looked at non drug management of breathlessness in COPD.

Professor Michael Polkey is Consultant Physician in the Department of Sleep and Ventilation at the Royal Brompton Hospital and Professor of Respiratory Medicine at the National Heart and Lung Institute, London. His research interests include mechanisms of respiratory failure, systemic aspects of COPD and lung volume reduction surgery.

**Dr Robert Primhak** is a Consultant Paediatric Respiratory Physician at Sheffield Children's Hospital. He trained in paediatrics in Auckland, Newcastle, Toronto and Sheffield, and worked for two years as a paediatrician in Papua New Guinea. He was chair of the RCPCH Working Party on Sleep Physiology.

**Dr Garth Rapeport** is Managing Director of Respivert, a London-based drug discovery company focussed on new approaches to COPD, severe asthma and cystic fibrosis (CF). Respivert was co-founded with Dr Peter Strong (ex GSK) together with Professor Peter Barnes and Dr Kaz Ito, based at the National Heart and Lung

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Institute (NHLI), Imperial College, London. Dr Rapeport is also a non-executive director of Galapagos NV and is Honorary Principal Research Fellow at the National Heart and Lung Institute, Imperial College School of Medicine in London.

Dr Robert Rintoul is a Consultant Respiratory Physician with a special interest in lung cancer and mesothelioma at Papworth Hospital, Cambridge, UK. He undertook clinical training in Edinburgh and London and performed his doctoral research in Professor Tariq Sethi's laboratory in the University of Edinburgh. He is currently Lead Clinician for Thoracic Oncology at Papworth Hospital. He has a particular interest in developing novel techniques in diagnostics and staging. Part funded by the NIHR Cambridge Biomedical Research Centre and the Comprehensive Local Research Network, Dr Rintoul is a principal investigator for several translational and basic science research projects in lung cancer and mesothelioma. In collaboration with colleagues in Cambridge and beyond, he is building a research programme for the detection and management of preneoplasia. Dr Rintoul is a member of the NCRI Lung Clinical Studies Group and the Mesothelioma subgroup as well as being Chair of the Lung CSG SCEPTRE subgroup. He is also a member of the NICE Lung Cancer Guideline Development Group, BTS interventional bronchoscopy guideline and DH Lung Cancer and Mesothelioma Advisory Group.

**Dr Matthew Robinson** leads a number of programmes at Medlmmune centred on innate immune cell biology in respiratory and autoimmune diseases. Previously, his post-doctoral research focused on Pattern Recognition Receptors, most noticeably defining the roles of novel C-type Lectins Receptors in host defence with Professor Reis e Sousa at CRUK.

**Professor Ian Sabroe** is Professor of Inflammation Biology at the University of Sheffield. His lab focuses on mechanisms of airway and vascular inflammation, with a particular interest in innate immunity and phagocyte biology. His clinical interests are severe asthma and pulmonary arterial hypertension.

Jane Scullion is currently a Respiratory Nurse Consultant at the University Hospitals of Leicester and SHA East Midlands LTC Clinical lead and shared post of Respiratory Clinical Lead. She is currently Chair of the Nurse Advisory Group for the BTS and a Trustee at PCRS and Respiratory Education UK.

Professor Ben Shaw trained in Birmingham, Edinburgh and Liverpool and is now Consultant in Neonatal and Respiratory Paediatrics at Liverpool Womens Hospital and the Royal Liverpool Children's Hospital, and Professor at Evidence-based Practice Research Centre, Edge Hill University. Previously he was Clinical Director of the Neonatal Unit at Liverpool Women's Hospital, R and D Director at Liverpool Women's Hospital and Associate Postgraduate Dean for Mersey Region. His

research interests are neonatal respiratory disease and medical education.

Dr Claire Shovlin is Senior Lecturer at Imperial College London and Honorary Consultant at Imperial College Healthcare NHS Trust. Dr Shovlin's early research training was in the laboratories of Professors Sir Martin Evans (Cambridge, 1984) and Michael Hayden (UBC, Vancouver, 1987). Her subsequent experience in pulmonary AVMs and hereditary haemorrhagic telangiectasia spans 18 years, including three years at the Department of Genetics, Harvard Medical School, and 11 years running a national service, reviewing more than 1,000 patients.

By 1998, she had recognised the substantial obstacles to the delivery of molecular medicines for rare diseases, and the potential value of more generic approaches. Using replicate prospective series to define the HHT/PAVM cohorts as models of thrombovascular risk, she has generated a reverse translational research programme in which clinical, cellular and second generation molecular approaches are delivering tangible health benefits to patients.

**Dr Anita Simonds** is a Consultant in Respiratory Medicine at the Royal Brompton Hospital with a special interest in non-invasive ventilation, home ventilation in adults and children, neuromuscular disorders and end stage lung disease.

Professor John Simpson is Professor of Respiratory Medicine at Newcastle University. His group is interested in mechanisms of innate immune regulation and dysfunction, with particular reference to nosocomial infection and acute lung injury. In parallel, the group seeks to develop novel therapeutic strategies for severe infective and non-infective lung injury.

Professor Sally Singh has worked in the field of pulmonary rehabilitation for several years; she is Head of Pulmonary and Cardiac Rehabilitation at the University Hospitals of Leicester NHS Trust and is Professor of Pulmonary and Cardiac Rehabilitation at Coventry University. She is the current Chair for the Pulmonary Rehabilitation Group for the ERS.

Dr Mark Slade graduated from Cambridge University in 1979 in theoretical physics. He worked in scientific book publishing as an editor before deciding to study medicine as a mature student at Guy's Hospital, beginning in 1986. He completed his training in medicine in Oxford, Cambridge, Sydney and Norwich, before being appointed to a consultant post in respiratory medicine in Oxford in 2000. Dr Slade specialises in lung cancer and mesothelioma, and more particularly in interventional bronchoscopy. He moved to Papworth Hospital in July 2008 and was appointed as Clinical Director of Thoracic Services in April 2009. Dr Slade represented Great Britain at the Olympic Games in sabre fencing in 1980,

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1984 and 1988, and has three Commonwealth silver medals for fencing.

Professor Alan Smyth is Professor of Child Health at the University of Nottingham and Honorary Consultant in Paediatric Respiratory Medicine at Nottingham University Hospitals NHS Trust. He is Director of the Nottingham Children and Young Person's Cystic Fibrosis Clinic, which provides care for 160 children. He also sees children with asthma, TB, HIV, specialist respiratory problems and general paediatric problems.

Professor Smyth is a member of the Nottingham Respiratory Biomedical Research Unit, and has a major research interest in novel ways of treating infection in cystic fibrosis. His group have ongoing projects looking at inhibition of bacterial communication. By way of contrast they are also looking at more effective ways of communicating with sick children.

He is also Director of the Trent Local Research Network, under the Medicines for Children Programme, and Coordinating Editor of the Cochrane Cystic Fibrosis and Genetic Disorders Group. When not working, he loves cycling, runs half marathons (increasingly slowly) and tries to keep up with his children.

**Dr Kevin Southern** completed his PhD, examining gene transfer as a therapy for CF, and then consolidated his research training with a MRC Research Fellowship at the University of North Carolina. He is currently Reader at the University of Liverpool, Editor for the CF and Genetics Disorders Cochrane Review Group and Chair of the European NBS Working Group.

**Dr David Spencer** is a Consultant in Respiratory Paediatrics in Newcastle. He trained in paediatrics in Edinburgh, London and the West Midlands before moving to Newcastle in 1996. His clinical and research interests include the consequences of community acquired pneumonia in children, non-CF bronchiectasis and the epidemiology of empyema in children.

**Dr Duncan Stewart** is the CEO and Scientific Director of the Ottawa Hospital Research Institute. His group has initiated Canada's first clinical trials using gene and cell therapy for cardiovascular disease, including therapeutic angiogenesis for end stage coronary artery disease and progenitor cell therapy for pulmonary hypertension.

Dr Alistair Story is a Consultant Nurse and Epidemiologist at the Health Protection Agency Centre for Infections in London. His main area of interest is the control and public health impact of infections among 'hard to reach' groups, especially homeless people, drug users and prisoners. He currently leads Find and Treat, a pan-London street outreach service supporting the detection, diagnosis and management of TB among hard to reach groups in London.

**Dr Denis Talbot** is a Reader in Cancer Medicine at the University of Oxford and has an active interest in clinical trials in thoracic oncology and the development of objective assessment of physician/patient communication skills. He is Regional Specialty Advisor for medical oncology, a member of the NCRI lung cancer group and of the CRUK Clinician Scientist Fellowship Appointment Board.

**Professor Neil Thomson** is the Professor of Respiratory Medicine at the University of Glasgow and Heads the Respiratory Medicine Section within the Institute of Infection, Immunity and Inflammation at the University of Glasgow. He is an Honorary Consultant based at Gartnavel General Hospital, Glasgow. He graduated from the University of Glasgow and undertook postgraduate training in Glasgow, London and McMaster University, Canada. He is a former member of the Committee for Safety of Medicine and a former Chair of the Scientific Committee of the British Lung Foundation and of the National Asthma Campaign Therapy Working Group. He has co-edited several textbooks on asthma and COPD. His current research interests include the interaction between smoking and asthma, biomarkers in airway disease and the assessment of novel treatments for asthma and COPD.

Mr David Waller graduated from Nottingham in 1985 and trained in cardiothoracic surgery in Sheffield, Leeds, Newcastle, Coventry and Birmingham. He has been a Consultant at Glenfield Hospital, Leicester since 1997. He has a special interest in mesothelioma, performing over 25 radical procedures annually and with over 25 peer reviewed publications on the subject. He is Chair of the NCRI mesothelioma subgroup and a member of the ERS/ESTS mesothelioma taskforce.

Dr Sarah Walmsley is a Wellcome Intermediate Fellow in the Academic Unit of Respiratory Medicine, the School of Medicine and Biomedical Sciences at the University of Sheffield. She has a research interest in the role of hypoxia and the HIF hydroxylase pathway in the regulation of neutrophilic inflammation.

Dr Chris Warburton is Consultant Physician and Clinical Director of the Aintree Chest Centre, Liverpool and is Chair of the BTS Occupational and Environmental Lung Health Specialist Advisory Group. The SAG's main aim is to promote training and understanding of occupational and environmental aspects of lung disease.

Professor Wisia Wedzicha is Professor of Respiratory Medicine at the UCL Medical School, University College London and the Royal Free Hospital. She qualified from Somerville College, Oxford University and St Bartholomew's Hospital Medical College, London University. She has a major interest in the causes, mechanisms and impact of COPD exacerbations and in the role of bacterial and viral infection at COPD exacerbation. She directs an active research group into COPD exacerbations and has published extensively on this topic. She chairs the Department of Health Home

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Oxygen Clinical User Group. She was a member of the Guideline Development Group for the revision of the NICE COPD guidelines, and is currently a member of the Programme Board for the COPD National Clinical Strategy. Until June 2010, she was Editor in Chief of Thorax, and is a member of the BMJ and AJRCCM advisory boards and on the editorial board of a number of international journals.

**Dr Sophie West** is a Consultant in Respiratory Medicine at the Freeman Hospital, Newcastle upon Tyne, where she is Head of the Regional Sleep Service. Her main research interests are obstructive sleep apnoea, insulin resistance and type 2 diabetes.

Professor Martin R Wilkins is Professor of Clinical Pharmacology, Head of the Division of Experimental Medicine, Imperial College London and Director of Clinical and Investigative Sciences within Imperial College Healthcare NHS Trust. He is a Consultant Physician within Imperial College Healthcare NHS Trust and has been the Director of the Sir John McMichael Centre for Clinical Research at the Hammersmith Hospital since its establishment in 2001.

Professor Robert J Wilkinson is a Wellcome Trust Senior Fellow in Clinical Tropical Medicine and Director of the University of Cape Town Clinical Infectious Diseases Research Initiative. He is also Professor of Infectious Diseases at Imperial College London, and MRC Programme Leader at the National Institute for Medical Research, Mill Hill, London. Professor Wilkinson trained in Cambridge, Oxford, London, Edinburgh, Sudan and the United States. His major research interest is the immunology of tuberculosis, particularly in the context of HIV infection. He is an author of the Oxford Handbook of Tropical Medicine and has published a number of original research and review articles on tuberculosis and other infectious diseases.

Dr Ian Woolhouse is a Consultant Physician in Respiratory and General Medicine at University Hospitals Birmingham NHS Foundation Trust. In 2007 he set up the first endobronchial ultrasound service in the Midlands. He took up the role of associate director to the National Lung Cancer Audit in 2009. He is clinical lead on the Improving Lung Cancer Outcomes Project which aims to reduce process and outcome variation for lung cancer patients in England.

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#### **Actelion Pharmaceuticals Ltd**

#### Stand numbers 10 & 13

Actelion Pharmaceuticals Ltd is a biopharmaceutical company, focusing on the discovery, development and commercialisation of innovative treatments to serve high unmet medical needs. Please come and visit us at stands 10 & 13 for more information on pulmonary arterial hypertension and our products.

Tel: +44 (0)20 8987 3336 Email: Rachel.fortes@actelion.com

Website: www.actelion.com

### Air Products Stand number 12

Air Products is a global provider of home respiratory services. We serve 420,000 patients across the world through the provision of respiratory therapies, such as CPAP, oxygen, NIV, nebuliser and infusion services in their homes. In the UK, we provide the NHS Home Oxygen Service to over 52,000 patients across England and Wales. Our specialist teams serve patients with conditions ranging from chronic lung disease, asthma and emphysema to sleep apnoea. And we strive to improve their quality of life, by supporting clinicians through the provision of therapy equipment to patients in the home environment, offering 24/7 technical support and sharing therapy compliance data.

Tel: + 44 (0)800 373 580

Website: www.airproducts.co.uk/homecare

#### Airsonett Stand number 43

Airsonett is a research based medical technology company with a unique technology which leads the development of preventative and secondary preventative treatment of allergic asthma as well as management of airborne bacteria and virus contamination. Airsonett has an extensive patent portfolio and is investing heavily in clinical research and product development.

Airsonett was awarded the title Sweden's MedTech Company of the Year 2009.

Protexo<sup>®</sup> is a secondary preventative device which minimizes the exposure of allergen during night time. Protexo is recommended to patients with moderate to severe perennial allergic asthma (such as pet and mite allergies).

Tel: +46 43 I 402 530 (Headquarters in Sweden)

+44 (0)777 542 3322 (Brian Jones, UK Sales

Office)

Email: brian.jones@airsonett.com

Website: www.airsonett.com

## Association of Chartered Physiotherapists in Respiratory Care (ACPRC)

#### Stand number C59

ACPRC are a special interest group for physiotherapists, working to promote best physiotherapy practice in all areas of respiratory care. The ACPRC champions four specific areas within respiratory care: chronic disease, paediatrics, critical care and surgery/cardiothoracics.

## **EXHIBITORS' INFORMATION**

We have over 800 members with expertise in all areas of respiratory physiotherapy and are closely linked with the Chartered Society of Physiotherapy.

We run annual study days, publish a peer reviewed journal and are a source of expertise for national and international projects.

Tel: +44 (0)207 831 8778

Website: www.acprc.org

## The Association of Respiratory Nurse Specialists (ARNS)

#### Stand number C52

LEADING, INSPIRING, EMPOWERING

The Association of Respiratory Nurse Specialists (ARNS) exists to promote a higher level of respiratory nursing practice through leadership, education and professional development and to influence the direction of respiratory nursing care.

Tel: +44 (0)20 7228 3847 Email: info@arns.co.uk Website: www.arns.co.uk

## Association for Respiratory Technology and Physiology (ARTP)

#### Stand number C63

The ARTP is the sole professional organisation in the UK for practitioners working in clinical respiratory physiology and technology.

The ARTP provides the only national, professionally recognised, professional qualifications in Pulmonary Function Testing and Spirometry. An important function of the ARTP is the provision for Continuing Professional Development. The ARTP organises an Annual Conference and training courses on many respiratory topics including practical blood gas sampling, interpretation of lung function results, respiratory muscle assessment, sleep disorders and cardiopulmonary exercise testing. Additionally, ARTP coordinates spirometry training centres throughout the UK. The ARTP also write and publish textbooks in lung function testing and physiology.

The ARTP have recently launched ARTP Sleep to represent practitioners working in Sleep Medicine, and have written standards documents. The ARTP will shortly be launching an e-learning module in spirometry.

Tel: +44 (0)845 226 3062 Website: www.artp.org.uk

#### Asthma UK Stand number C57

Asthma UK is the charity dedicated to improving the health and well-being of the millions of people with asthma in the UK. We work with people with asthma, healthcare professionals and researchers to develop and share expertise to help people increase their understanding and reduce the effect of asthma on their lives.

You can contact the Asthma UK Advice line team of asthma nurse specialists on:

Tel: +44 (0)800 121 62 44

## **EXHIBITORS' INFORMATION**

Our Supporter and Information Team deals with queries about membership, donations and information, plus any general queries you have about Asthma UK.

Tel: + 44 (0)800 121 62 55 Email: info@asthma.org.uk Website: asthma.org.uk

#### AstraZeneca Stand numbers 27, 28 & 39

AstraZeneca is a major international healthcare business engaged in the research, development, manufacturing and marketing of meaningful prescription medicines and supplier for healthcare services. AstraZeneca is one of the world's leading pharmaceutical companies, investing \$5.2 billion in medicines research and development in 2009, and is a leader in gastrointestinal, cardiovascular, neuroscience, respiratory, oncology and infectious disease medicines.

Tel: +44 (0) 1582 836 000 Website: www.AstraZeneca.co.uk

#### Atrium Stand number 19

Atrium was founded with the philosophy of providing the finest quality, most innovative and cost effective medical products available. This commitment to excellence and quality has earned Atrium the reputation as a leading edge medical device provider to the global healthcare community.

#### INDICATION BY DESIGN

With millions of chest drains sold to date worldwide, Atrium has discovered that one drain design does not necessarily fit all thoracic drainage indications. Atrium's innovative Indication By Design platform now sets a new bar for clinical performance, providing a full line of operating systems and specialty drainage products designed to cater to the needs of cardiac, thoracic and pediatric patients as well as a line of mobile drains that can get your patients ambulatory faster and safer. Atrium's complete family of chest drains are MRI compatible, latex-free, and feature multi-position hangers, a needleless access port for patient drainage sampling, automatic high negative pressure relief and knock-over nozzles to help reduce interchamber spills.

Tel: +44 (0)161 209 3675

Email: atriumuk@atriummed.com

Website: www.atriummed.com

#### **Bedfont Scientific Ltd** Stand number 44

BREATH ANALYSIS IS THE NEW BLOOD TEST Bedfont Scientific Ltd is an award-winning worldwide market leader in breath gas analysers for medical applications.

Smokerlyzer handheld CO monitors are the global benchmark in smoking cessation, the NObreath FE<sub>NO</sub> monitor is a revolutionary monitor for airway inflammation in asthma, and the Gastro+ is an indispensible hydrogen monitor for gastrointestinal disorders including lactose malabsorption.

With over 30 years' experience in its field, Bedfont is a small company with a big global presence. Bedfont's experienced research and development team is passionate about finding quick, simple and non-invasive solutions for a variety of medical disorders.

Tel: +44 (0)1634 673 720 Email: ask@bedfont.com Website: www.bedfont.com

#### **BOC** Healthcare

#### Stand number 45

BOC Healthcare is a leading supplier of medical gases globally and in the UK. Our home oxygen service provides the best oxygen therapy and full support for patients of all ages with a wide variety of respiratory conditions (breathing problems). We currently supply oxygen therapy to approximately 10,000 patients living in the East of England.

BOC Healthcare is also involved in providing superior associated services to respiratory deficient patients. These services to patients of all ages and suffering from a variety of breathing conditions are supported by the latest innovative equipment and clinical assistance. To find out more please visit stand 45.

Tel: +44 (0)800 136 603

Email: healthcare.home-uk@boc.co.uk
Website: www.bochealthcare.co.uk

#### Boehringer Ingelheim GmbH and Pfizer Inc Stand number 9

Boehringer Ingelheim is one of the 20 leading pharmaceutical corporations in the world. As leader in COPD treatment, the company is committed to delivering high-quality respiratory care through the discovery of new respiratory medicines (SPIRIVA®) and delivery systems (RESPIMAT®), thus providing benefit for patients and healthcare providers.

Pfizer Inc discovers, develops, manufacturers, and markets leading prescription medicines for humans and animals and many of the world's best-known brands. Our innovative products improve the quality of life of people the world over and helps them enjoy longer, healthier, and more productive lives.

Tel: +44 (0) 1344 424 600 (Boehringer

Ingelheim)

+44 (0) 1304 616 161 (Pfizer)
Websites: www.boehringer-ingelheim.com

www.pfizer.com

## **British Lung Foundation** Stand number C51

The British Lung Foundation is the only UK charity working for everyone affected by lung disease. We focus our resources on providing support for people affected by lung disease today; and work in a variety of ways, including funding world-class research, to bring about positive change, to improve treatment, care and support for people affected by lung disease now and in the future.

Tel: +44 (0)20 7688 5555 Email: enquiries@blf-uk.org Website: www.lunguk.org Thorax 2010;65(Suppl IV) kii

## British Thoracic Oncology Group (BTOG) Stand number C60

BTOG aims to improve the care of patients with thoracic malignancies through multidisciplinary education and clinical and scientific research.

BTOG represents all the disciplines involved in the care of lung cancer and mesothelioma throughout the UK. BTOG also aims to provide a Continuing Education Format for all professionals involved in the management of lung cancer and mesothelioma and to act as a body that could both help develop and give advice on thoracic oncology guidelines for patient care and to generate ideas for clinical trials and develop these ideas into full protocols.

Tel: +44 (0)116 250 2811 Email: dawn.mckinley@uhl-tr.nhs.uk

Website: www.BTOG.org

#### Cellestis Ltd Stand number 20

Cellestis Limited is a listed Australian biotechnology company that is a leader in the detection and control of tuberculosis, with the development of its breakthrough blood test: QuantiFERON®-TB Gold In-Tube (QFT™). Using its patented QuantiFERON technology, Cellestis develops diagnostics tests that measure immune function for diseases with an unmet medical need. QFT and other QuantiFERON products are sold directly in the US by Cellestis Inc; in Europe by Cellestis GmbH (Germany); and in Australia and Asia by Cellestis International Pty Ltd (Australia). QFT is also available through commercial partners in Japan, Europe, the Middle East and other countries worldwide.

Tel: +49 (0)6151 428 590 Email: Europe@cellestis.com Website: www.cellestis.com

#### Chiesi Ltd Stand numbers 30, 36 & 37

A research-focused international company, developing and bringing innovative pharmaceutical solutions, which relieve and improve the quality of human life. An organisation that combines commitment and results with integrity, operating in a socially and environmentally responsible manner.

Established in the areas of respiratory, cardiovascular and musculoskeletal medicine, with a research pipeline focused on the treatment of respiratory disease and rare illnesses.

Tel: +44 (0)161 488 5555 Email: info@chiesi.uk.com Website: www.chiesi.uk.com

## Cryopal Stand number 22

Specialising in the homecare oxygen therapy system, CRYOPAL has been designing, manufacturing and distributing the FREELOX range of stationary reservoirs and portables for more than 30 years throughout the world. Its good range of homecare devices have been nicely designed to help active patients maintain a normal day to day life. To discover the full range of FREELOX, come and visit us at the BTS Winter Meeting (stand number 22), or through our website.

Tel: + 33(0)164 761 500 Website: www.laboutiquecryo.com

## **EXHIBITORS' INFORMATION**

#### Department of Health

Stand number C49

Under the Coalition Government the Department of Health now has five priorities:

- First, that patients must be at the heart of everything we do – as more than simply beneficiaries of care, but as participants in its design.
- Second, the NHS must be focused on achieving continuously improving outcomes for patients – not inputs or processes, but results.
- Third, we must empower clinicians those responsible for patient care – to deliver those improvements.
- Fourth, if we are to improve overall health outcomes and make the demands on the NHS more sustainable, we must prioritise prevention and create a public health service.
- Fifth, we must reform social care alongside healthcare – and deliver closer integration in how services are commissioned and provided.

The primary purpose of the NHS must be: to improve the quality of care, and achieve outcomes that are amongst the best in the world.

Website: www.dh.gov.uk

and expertise.

#### **Education for Health Stand number C53**

Education for Health is the UK's leading education charity for health professionals working with patients with long term conditions and our education has been shown to measurably improve services and health outcomes. We believe education should be at the heart of service improvement and not as an add on. We find ourselves being asked to set the standard for effective education and asked to partner with health organisations across the globe to pioneer best practice learning experiences to materially and substantially benefitting patient care. We would welcome any opportunity to share this unique information, knowledge

Historically our distance learning programmes have been paper based but in 2010 we have harnessed the enormous potential of the internet and digital technologies by developing dynamic, interactive e-learning programmes.

Tel: +44 (0) 1926 836 849 (Rachel Clarke)
Email: r.clarke@educationforhealth.org
Website: www.educationforhealth.org

#### Fentons Solicitors LLP Stand number 31

Fentons Solicitors LLP is one of the country's leading claimant personal injury firms. We have a specialist occupational illness department with experienced solicitors dealing with mesothelioma, asbestos related lung cancer, asbestosis, pleural thickening, occupational asthma and byssinosis cases. We are happy to explain the complexities of the legal system, why some cases are successful and some are not and the importance of early referrals to specialist solicitors. Our team of specialists

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## **EXHIBITORS' INFORMATION**

is at stand 31 to discuss any issues you may have and answer your questions.

Tel: +44 (0)845 026 4749 Email: info@fentons.co.uk Website: www.fentons.co.uk

### Fisher & Paykel Healthcare Ltd UK

#### Stand number 6

Fisher & Paykel Healthcare Ltd UK is a wholly owned subsidiary of Fisher & Paykel Healthcare New Zealand. Fisher & Paykel Healthcare has more than twenty years of expertise in heated humidification and temperature control. Our product range reflects the continuing technological development that is our aim, and which ensures we continue to provide our customers with innovative and reliable products that assist in providing the best patient care.

Tel: +44 (0)1628 626 136

Email: customerservice@fphcare.co.uk

Website: www.fphcare.co.uk

#### Forest Laboratories UK Ltd

#### Stand numbers 7 & 8

Forest Laboratories UK Ltd has recently launched Nebusal™ (Sterile 7% hypertonic sodium chloride solution) for use in mobilisation of secretions in the lower respiratory tract in patients such as those with cystic fibrosis (CF), bronchiectasis, chronic obstructive pulmonary disease (COPD) and severe asthma. Forest also markets Colomycin (Colistimethate sodium) as a treatment option within cystic fibrosis, within the UK and Ireland.

Tel: +44 (0)1322 421 800 Website: www.forestlabs.com

#### GlaxoSmithKline Stand numbers 17, 23 & 24

GlaxoSmithKline have a challenging and inspiring mission: to improve the quality of human life by enabling people to do more, feel better and live longer. This mission gives us the purpose to develop innovative medicines and products that help millions of people around the world.

We are one of the few pharmaceutical companies researching both medicines and vaccines for the World Health Organization's three priority diseases – HIV/AIDS, tuberculosis and malaria, and are very proud to have developed some of the leading global medicines in these fields.

Headquartered in the UK and with operations based in the US, we are one of the industry leaders, with an estimated seven per cent of the world's pharmaceutical market. But being a leader brings responsibility. This means that we care about the impact that we have on the people and places touched by our mission to improve health around the world.

It also means that we must help developing countries where debilitating disease affects millions of people and access to life-changing medicines and vaccines is a problem. To meet this challenge, we are committed to providing discounted medicines where they are needed the most.

As a company with a firm foundation in science, we have a flair for research and a track record of turning that research into powerful, marketable drugs. Every hour we spend more than £300,000 (US\$562,000) to find new medicines.

We produce medicines that treat major disease areas such as asthma, virus control, infections, mental health, diabetes and digestive conditions. In addition, we are a leader in the important area of vaccines and are developing new treatments for cancer.

Tel: +44 (0)800 221 441

Email: customercontactuk@gsk.com

Website: www.gsk.co.uk

## Healthy Outlook® from the Met Office Stand number C55

Healthy Outlook® is a service provided by the Met Office which helps people with COPD to stay well and avoid hospital admissions. Traditionally the service has been offered in the winter months, however in 2010 in response to patient feedback, it will be a year round service. It warns them by an automated telephone call when environmental conditions are expected which could make their condition worse. The service encourages patient self-care and can alleviate some of the pressure on NHS resources.

Tel: +44 (0)870 900 0100 Email: Health@metoffice.gov.uk

Website: www.metoffice.gov.uk/healthyoutlook

#### Hitachi Medical Systems Stand number 14

EBUS guided TBNA – The new generation complementary to EUS-FNA

Hitachi's latest Endobronchial Ultrasound System (EBUS) combines high resolution ultrasound with high definition video imaging which together play a vital role in delivering accurate information for precise tumour staging. Safe, accurate and significantly less invasive for complete mediastinal staging.

Tel: +44 (0)844 800 4294

Website: www.hitachi-medical-systems.com

#### LAM Action

#### Stand number C62

LAM Action is the UK charity for patients with lymphangioleiomyomatosis (LAM). Its primary aims are:

- To provide support and information for LAM patients and their families
- To educate health professionals about LAM and advance research into LAM

LAM is a rare multi-system disease, diagnosed mainly in women of childbearing age. It mainly affects the lungs, causing excessive growth of smooth muscle cells which progressively destroys lung tissue and erodes lung function. Currently, there is no cure for LAM and no effective treatment, so for many patients lung transplantation is the only means of survival.

Tel: +44 (0)115 823 1934 (Jan Johnson, LAM

Coordinator)

Email: jan.johnson@nottingham.ac.uk

Website: www.lamaction.org

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#### **Lung Improvement Programme**

#### Stand number C65

The Lung Improvement programme was officially launched on Ist November 2009 and is the latest programme to come under the growing NHS Improvement umbrella. Like the other NHS Improvement programmes, Lung Improvement will look to establish a robust and practical programme that will be closely aligned to QIPP policy and national strategy, and support both implementation and delivery.

The programme will initially cover chronic obstructive pulmonary disease (COPD), asthma and home oxygen services. It is an initiative to support the implementation of a National Strategy for England. The programme will work closely with the Department of Health respiratory team and in partnership with each Strategic Health Authority (SHA) and the SHA Clinical Leads for Respiratory Care.

Priorities and delivery for 2010/2011 – The programme objectives for 2010/11 are:

- To undertake local projects and testing to inform and accelerate local change using robust evidence, information management and service improvement and redesign methodologies
- To support clinical teams and the SHA respiratory clinical leads to deliver the National Strategy for England
- To align with other key national priorities such as Long Term Conditions, Right Care and the QIPP agenda
- Support the SHA clinical leads to develop communities of practice and to enhance existing respiratory networks at local level
- Identify early evidence of new models and pathways of care, and tested principles for COPD improvement, including their potential application across all respiratory services
- Disseminate information, resources and good practice examples that support the delivery of high quality respiratory services

Tel: +44 (0)116 222 5233
Email: phil.duncan@improvement.nhs.uk

Website: www.improvement.nhs.uk

#### Medela Stand number 4

Medela has been established for over 45 years working in the areas of breastfeeding, neonatology and medical vacuum. In 2007 Medela launched the innovative Thopaz digital drainage system which enables surgeons and physicians to accurately quantify postoperative air leaks. Clinical experience has shown Thopaz reduced chest tube duration by 1.4 days and length of stay for pneumothorax patients by more than one day with between 20 and 75% patients discharged early depending on the type of procedure. In addition both patients and surgeons expressed a preference for Thopaz over traditional analogue drains.

Tel: +44 (0)870 950 5994 Website: www.medela.co.uk

## **EXHIBITORS' INFORMATION**

#### **Merck Sharp & Dohme Limited**

#### Stand number 11

Today's MSD is a global healthcare leader who is working to help the world be well.

Through our medicines, vaccines, biologic therapies, and consumer and animal products, we collaborate with human and animal health professionals across the UK and in more than 140 countries to deliver innovative health solutions.

Beyond this, we have a commitment to increasing access to healthcare through far-reaching programmes that donate and deliver our products to people who need them.

Tel: +44 (0)1992 467 272 Website: www.msd-uk.co.uk

#### Mesothelioma UK Charitable Trust

#### **Stand number C60**

Mesothelioma UK is a resource centre dedicated to mesothelioma. A national free phone helpline that provides access to impartial, accurate and relevant advice specific to mesothelioma for patients, carers and health care professionals. For health care professionals, Mesothelioma UK provides numerous training and educational events, regular news bulletins, has established a National Mesothelioma Nurse Action Team and generally supports health care teams in the management of mesothelioma patients. Mesothelioma UK relies totally on donations to its own independent charity; Mesothelioma UK Charitable Trust.

Tel: +44 (0)800 169 2409

Email: mesothelioma.ukcharity@uhl-tr.nhs.uk

Website: www.mesothelioma.uk.com

#### **Napp Pharmaceuticals Limited**

#### Stand number 15

Napp Pharmaceuticals Limited is committed to building a respiratory portfolio in the UK. Napp holds the strong belief that people matter and caring about them counts, so we're proud to develop and market products to help relieve patients' symptoms and we strive to improve quality of life. Napp already has an established analgesic portfolio and a strong track record in innovation with plans to expand in the respiratory marketplace to begin a new commitment to respiratory medicine.

Tel: +44 (0) 1223 424 444 Email: enquiries@napp.co.uk or

medicalinformationuk@napp.co.uk

Website: www.napp.co.uk

## The NHS Information Centre (The NHS IC) Stand number C54

The NHS IC is England's central authoritative source of health and social care information for frontline decision makers. We release over 120 official and national statistics each year. We provide access to high quality comparative data and information for benchmarking and analysis to help local organisations plan and deliver better care.

The NHS IC Audit Support Unit manages the National Lung Cancer Audit in partnership with the Royal College of Physicians on behalf of HQIP. The audit provides public

## **EXHIBITORS' INFORMATION**

information on the key outcomes concerning patients diagnosed with lung cancer or mesothelioma.

Tel: +44 (0)845 300 6016 Email: enquiries@ic.nhs.uk Website: www.ic.nhs.uk

#### **Novartis**

#### Stand number 32 & 35

Novartis provides healthcare solutions that address the evolving needs of patients and societies. Focused solely on healthcare, Novartis offers a diversified portfolio to best meet these needs: innovative medicines, cost-saving generic pharmaceuticals, preventive vaccines, diagnostic tools and consumer health products.

The Respiratory Research Centre at Horsham in West Sussex is the Novartis worldwide headquarters for respiratory research, employing over 300 scientists with the site also being the global centre for gastro-intestinal research for Novartis.

Novartis UK employs over 3,500 people across 9 sites. In the UK, the Novartis sites are involved in manufacturing, packaging, customer service and marketing for products used in the UK and worldwide.

Tel: +44 (0) 1276 692 255 Website: www.novartis.co.uk

#### **Nutricia UK**

#### Stand number 29

Nutricia specialises in the delivery of advanced medical nutrition for the very young, the old and the sick. As well as being the largest specialist nutrition company in Europe, Nutricia is the market leader in the UK. We supply high quality feeds, systems and support services to patients and health care professionals. Through our Nutricia Homeward service, we deliver nutritional feeds, enteral feeding systems and nursing care directly to patients' homes.

One of Nutricia's latest innovations is a disease targeted nutritional supplement which has been shown to enhance physical capacity when combined with exercise in COPD patients.

Tel: +44 (0)1225 711 688

Email: resourcecentre@nutricia.co.uk

Website: www.nutricia.co.uk

#### Olympus KeyMed

#### Stand number 25

A wholly-owned subsidiary of the Olympus Corporation of Japan, Olympus KeyMed is an important part of the global Olympus network, with specific responsibility for the development and manufacture of medical equipment and industrial products for distribution worldwide. During the BTS Winter Meeting, Olympus KeyMed will be featuring the latest respiratory products on its stand, including a wide range of products for Endobronchial Ultrasound, flexible bronchoscopes, autoclavable semirigid thoracoscope, bronchoscopy accessories and the IBV Valve System, a new minimally invasive treatment for diseased lung in emphysematous patients or damaged lung resulting in air leaks.

Tel: +44 (0)1702 616 333 Website: www.olympus.co.uk

#### Oxford Immunotec

#### Stand number 18

On stand 18, Oxford Immunotec will present the in vitro T-SPOT®. TB test for active and latent tuberculosis. The T-SPOT. TB test is extremely sensitive and specific, accurately identifying TB in contact tracing scenarios, regular screening of healthcare workers, immigrants, prisoners and the immunosuppressed including HIV patients, cancer, transplant and pre anti-TNF alpha therapies. The test does not cross react with the BCG vaccination or other common mycobacteria. The T-SPOT. TB test can be easily accessed through Oxford Diagnostic Laboratories National TB Testing

Services.
Tel: +44 (0)1235 433 164
Email: odl@oxfordimmunotec.com
Website: www.tbtestingservices.com

Tel: +44 (0)1235 442 780

Email: info@oxfordimmunotec.com

Website: www.oxfordimmunotec.com

#### **PARI Medical Ltd**

#### Stand number 3

PARI are Europe's leading manufacturer of nebuliser systems, with offices worldwide. For more than 100 years, PARI has been developing solutions for people suffering from respiratory diseases in the form of efficient, reliable nebuliser devices.

Precisely targeted and optimised for different age groups and target areas, the PARI product range can treat an enormous variety of conditions, including asthma, COPD and cystic fibrosis.

The PARI range also includes an anti-static spacer device – VORTEX – which gives a reliable dosage and will fit any MDI. Visit PARI at stand number 3.

Tel: +44 (0)1932 341 122 Email: infouk@pari.de Website: www.parimedical.co.uk

#### Pentax

#### Stand number 26

PENTAX has a long held reputation as a major innovator in the design and development of medical endoscopy equipment. Our products are used to help save lives and improve the health of others. We have unique and innovative technologies which enable doctors to speed up the diagnosis and treatment of lifethreatening diseases. Technologies including SAFE-3000 Autofluorescence Bronchoscopy, Video Endobronchial Ultrasound (EBUS) and High Resolution EUS.

Tel: +44 (0) 1753 792 723 Email: lifecare.sales@pentax.co.uk

Website: www.pentax.co.uk

#### **Pfizer Vaccines**

#### Stand number 16

Pfizer, the world's leading biopharmaceutical company, applies science and global resources to improve health and well-being at every stage of life.

Our commitment to vaccines has a long heritage and spans well into the future. It stretches across a broad range of diseases and populations, including infants, children and adults.

Our innovative conjugate vaccines include Prevenar 13<sup>®</sup>, against pneumococcal disease and Meningitec<sup>®</sup>, against meningitis C.

We are a reliable and trusted flu vaccine supplier to the NHS with a track record of partnering healthcare professionals to help deliver successful vaccination programmes in the UK.

Tel: +44 (0)1304 616 161 Website: www.pfizer.com

#### **Pharmaxis**

#### Stand number 38

"Focused innovation in respiratory medicine"
Pharmaxis is a specialist pharmaceutical company committed to the research, development and commercialisation of human therapeutic products that address chronic respiratory and autoimmune diseases.

Our R&D activity has resulted in the successful development of mannitol as a diagnostic test for bronchial hyperresponsiveness. An osmotic agent is also currently being researched as a therapeutic mucoactive agent for potential indications including cystic fibrosis and bronchiectasis.

Website: www.pharmaxis.com.au

#### **Philips Respironics**

#### Stand number I

Philips Respironics, a global leader in the sleep and respiratory markets, is passionate about improving the quality of people's lives with solutions that are designed around the needs of our customers and their patients. For Philips Respironics, innovation is driven by gaining insight into the needs of the people who use our products in the areas of sleep management, oxygen therapy, non-invasive ventilation and respiratory drug delivery. This tradition of innovation combined with our ability to anticipate market needs has made Philips Respironics a name acknowledged worldwide as a pace-setter in the markets we serve.

Tel: +44 (0)800 1300 845

Email: rukcustomerservices@respironics.com

Website: www.philips.com/respironics

## Primary Care Respiratory Society UK Stand number C48

The Primary Care Respiratory Society UK (PCRS-UK) is the UK-wide professional society committed to improving respiratory care in primary care. Registered as a charity, we are led by our members through a range of committees and faculties dedicated to meeting the vision of "optimal respiratory care for all".

Providing education, policy support and research — We work across all areas of respiratory medicine in primary care; in particular COPD, asthma and respiratory-related allergy, and focus on:

 Offering a wide range of educational services to help you as a health professional – whether you are new to respiratory medicine, simply need to brush up your knowledge or are already an 'expert' – to provide quality care to your patients with respiratory disease

## **EXHIBITORS' INFORMATION**

- Influencing policy and setting standards in respiratory medicine, relevant to primary care both nationally and locally
- Facilitating the development of primary care research and generation of evidence needed to support policy and education activities

Our resources and events are written and facilitated by experts who understand both primary care and respiratory care. They provide, not only a quick and easy way to keep up to date in respiratory medicine, but also an opportunity to further your own personal development and network with peers similarly interested in respiratory primary care.

More information about PCRS-UK, and how to join, can be found on our website.

Website: www.pcrs-uk.org/about/join.php

## Primary Ciliary Dyskinesia (PCD) Family Support Group

## Stand number C56

The Primary Ciliary Dyskinesia (PCD) Family Support Group is a registered charity who:

- Provide support to patients with PCD and parents of children with the condition
- Bring PCD to the attention of the medical profession and the public
- Provide an up to date information service
- Raise money to promote research to aid diagnosis and treatment of children and adults with PCD

Tel: +44(0)1908 281 635
Email: chair@pcdsupport.org.uk
Website: www.pcdsupport.org.uk

## Pulmonary Hypertension Association UK Stand number C58

The goal of the Pulmonary Hypertension Association UK is to provide support and information for people with PH, their families, and healthcare professionals working in PH. We hope to improve understanding of the condition and raise awareness of PH among the general public and healthcare professionals.

Tel: +44 (0)1709 761 450

Email: office@phassociation.uk.com
Website: www.phassociation.uk.com

#### Respiratory Education UK Stand number C64

At Respiratory Education UK our fundamental goal is to support patients and practitioners through the challenges now faced within the NHS.

This is achieved through a number of key objectives including the design and delivery of practical and academic study events; influencing respiratory practice via active research and promoting best practice through a number of respiratory related projects.

COPD, Spirometry, NIV, Leadership, Commissioning and Consultation Skills are just some examples of the topics we cover, offering a number of named awards at diploma, degree and masters level. These are attainable within as little as one year.

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## **EXHIBITORS' INFORMATION**

We look forward to continuing to contribute towards the ongoing advancements in respiratory care through aiding the development of healthcare professionals across the country.

Tel: +44 (0)151 529 2598 Website: www.respiratoryeduk.com

#### Rocket Medical PLC Stand Number 5

As a UK design and manufacturing company, Rocket take pride in listening to our customers and making appropriate changes to the products to meet the ever changing ideas and to ensure patient safety.

Last year we launched the NEW Safety Seldinger Sets and procedure Trays and since then we have added the new fixation device along with the larger sizes. Visit our team on stand 5 and discuss new ideas in the pipeline, ideas that you may have for new products or improvements to existing products or just come along and say 'hello'.

Tel: +44 (0)191 419 6988

Email: homesales@rocketmedical.com

Website: www.rocketmedical.com

#### S-Med Ltd

#### Stand number 33

S-Med Ltd will be showing the KarmelSonix Acoustic Respiratory Monitoring (ARM) Equipment at this year's BTS Winter Meeting.ARM offers advantages with respect to the capture, storage and analysis of respiratory sounds objectively and with no patient cooperation.

KarmelSonix provides a full range of products, from ambulatory to PFT Labs, A&E, Sleep Labs to ITU. Come see how the PulmoTrack, Wholter and Wheezometers can help with both asthma and COPD diagnosis and management.

Tel: +44 (0)121 446 6953 Email: sales@s-med.co.uk Website: www.s-med.co.uk

#### **TB Alert**

#### Stand number C61

TB Alert – the UK's national tuberculosis charity
For over ten years TB Alert has been the only TB-specific charity working to address tuberculosis both in the UK and overseas. We work in both these arenas not only because they are inter-related, with global travel and migration patterns affecting TB rates in the UK, but also because there is much to be learned from one context that can be applied to the other.

Our Vision is the control and ultimate eradication of TB Our Mission is to increase access to effective treatment for all

Tel: +44 (0) 1273 234 029 Email: info@tbalert.org

Websites: www.tbalert.org and www.thetruthabouttb.

org

#### Teva UK Limited Stand numbers 40 & 41

Teva UK Limited is one of the biggest pharmaceutical companies in the UK. We're proud to be part of the Teva Pharmaceutical Industries group, and we make medicines that help improve lives.

We estimate that on average every second, of every day, over 200 tablets or capsules supplied by us are taken

by patients all around the UK. In fact, we like to think of ourselves as the nation's medicine cabinet.

We supply medicines to pharmacies and hospitals, from painkillers to antibiotics, and cholesterol reducers to lifesaving injectable medicines to fight cancer. Our specialities are generic medicines, which are usually medicines whose patents have expired; and respiratory medicines, especially inhalers to relieve the symptoms of asthma.

Tel: +44 (0)1977 628 500 Website: www.tevauk.com

#### **UK Medical**

#### Stand number 42

UK Medical is the UK distributor of the PleurX catheter for the home management of recurrent pleural effusion and malignant ascites. PleurX is an excellent option for patients with trapped lung and those that have failed talc pleurodesis. Furthermore, PleurX is also indicated as an alternative to talc slurry or thoracoscopic talc insufflation as a first line pleurodesis option. With UK Medical's commitment to providing the highest

level of training and support and over thirty published clinical papers supporting its use, PleurX is an evidence-based option that you can offer your patients with confidence.

Tel: +44 (0) | 14 268 8880 | Email: info@ukmedical.com | Website: www.ukmedical.com

## Uptake Medical™ Corporation Stand number 21

Uptake Medical™ Corporation is dedicated to improving the lives of patients suffering from emphysema. Uptake is developing Bronchoscopic Thermal Vapor Ablation (BTVA). BTVA is a bronchoscopic lung volume reduction technology intended to improve patients' lung function and quality of life to help them breathe better and live better.

Tel: + 00 1 949 275 5172 (Mike Numamoto, Vice

President, Marketing)

Email: miken@uptakemedical.com Website: www.uptakemedical.com

#### Vitalograph

#### Stand number 34

Vitalograph is respected around the world by secondary care practitioners as a leading provider of high performing respiratory screening, diagnostic and monitoring devices. Vitalograph products and services are also widely trusted in primary care, occupational health and clinical trial environments.

Our commitment to innovation ensures that our wide range of spirometers, electronic and mechanical peak flow meters and consumables remains at the cutting edge of respiratory performance and reliability.

New products include:

- Vitalograph In2itive, a lightweight handheld spirometer that combines the benefits of full spirometry, data integration and mobility with connectivity to Spirotrac V
- ALPHA Touch, a portable spirometer with printing and PC connectivity

## **EXHIBITORS' INFORMATION**

Tel: +44 (0)1280 827 110
Email: sales@vitalograph.co.uk
Website: www.vitalograph.co.uk

#### Wisepress Medical Bookshop Stand number 46

Wisepress.com, Europe's leading conference bookseller, has a complete range of books and journals relevant to the themes of the meeting. Books can be purchased at the stand or, if you would rather not carry them, posted to you – Wisepress will deliver worldwide. In addition to attending 250 conferences per year, Wisepress has a comprehensive medical and scientific bookshop online with great offers, some up to 40% off the publisher list prices.

Tel: +44 (0)20 8715 1812 Email: bookshop@wisepress.com

Website: www.wisepress.com