Research activity survey January 2015

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With assistance from;
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Executive summary

One of the aims of the Bristol Dementia HIT is to increase the amount of dementia research being conducted locally. In order to establish a baseline level of research, in the spring of 2013, the research committee of the HIT carried out a survey of dementia research. The results indicated that 33 projects were in progress, with a combined grant income of £4,623,410.

This survey was repeated in the autumn of 2014 and indicated 51 projects were in progress, with a grant income of £12,130,156. This suggests that in the 18 months between the two surveys, there has been a significant increase in both the amount of research being undertaken and the quality of this work (as judged by the increase in external funding).

In addition to the project information, the survey for the first time also collected data about publications, presentations, and teaching. Findings indicated that 56 peer-reviewed publications had been published in the preceding year, with a further 5 in press, and 9 under review. In addition, 32 oral and 15 poster presentations had been completed. There were 6 current PhD students, and many other BSc and MSc students being supervised.

As a subsidiary aim, it is hoped that by publishing this research on the Bristol Health Partners web-site will help to raise the profile of dementia research in the Bristol, Bath and Swindon.
Background

In the spring of 2013, the Dementia HIT research stream undertook a survey of research activity within the HIT. This led to a list of research activity being compiled (see Appendix A) which consisted of responses from roughly 20 individuals.

In February 2014, the Dementia HIT research meeting agreed that a follow-up survey of research activity should be undertaken. In addition to collecting information from the 2013 survey, this follow-up survey also looked at other forms of research activity, as well as asking respondents to provide ideas for future HIT-related research. However, by this point, the nature of the meeting had changed, and as well as researchers from the Bristol area, the meeting now included dementia researchers from RICE (in Bath) and Kingshill (in Swindon).

The survey was distributed via e-mail on the 31st March 2014, with a request to send responses by 22nd April 2014 (Appendix B) inviting participants to complete a short survey (Appendix C). Due to a limited response to the initial request, a second email was sent on 24th October 2014 requesting further information. The response rate to this second request was higher, and respondents were contacted individually in November 2014 to ensure accuracy of data.

The project team responsible for circulating the 2014 survey was Dementia HIT co-ordinator (Dr Jude Hancock), Dr Liz Coulthard and Dr Sarah Cullum (HIT leads), Prof Richard Cheston (co-chair of the Dementia HIT research committee), Lauren Dennis and Ailis Campbell (Bristol Health Partners Management Assistants), Clive Lambert (Dementia HIT administrator) on behalf of the research workstream of the Dementia HIT.

Response to survey

The research survey was sent to 75 researchers known to the HIT and who worked for the HIT’s partner organisations. In addition, 320 other staff who had been identified as having an interest in research or service evaluation were also sent the survey and invited to suggest areas for future research. The breakdown of organisations that staff worked for included; Avon and Wiltshire Mental Health Partnership, Alzheimer’s Society, Bristol CCG, Bristol Community Health, Dementia Action Alliance, North Bristol Trust, South Gloucestershire CCG, South Gloucestershire Council, University Hospital Bristol, Volunteer Bristol.

In April 2014, 21 responses were received. After the prompt in October 2014 a further 31 responses were received. The majority of responses were received from research staff (n = 46). The difficulties with using email to compile responses to this survey suggests a new mechanism to record HIT-related research activity is required for monitoring of future research activity.

Research priorities for the HIT

As part of the research survey, ideas for further research were requested. These research ideas were reviewed on the 13th May 2014 by the two research stream co-chairs (Richard Cheston and Yoav Ben-Sholmo) and by one of the leads of the Dementia HIT (Liz Coulthard). This review of research ideas was used to inform the development of research priorities for the Dementia HIT (see Appendix D).
On the 19th September 2014 two research outlines, based on these research priorities, were submitted to the first call for CLAHRCWest research support. One application led by Rik Cheston was titled ‘targeting post-diagnostic psychosocial interventions for people affected by dementia within a stepped care model’ and the second application led by Dr Sarah Cullum was titled ‘Understanding the causes and reasons behind avoidable hospital admissions in people living with dementia: bringing together national and local data.’ Both these projects were successful and are currently being supported by CLAHRCWest.

Research activity – grants active on the 1st September 2014

In all, 49 projects were active on the 1st September 2014, compared to just 33 projects were in progress on the 1st April 2013. In defining what does and does not constitute a “dementia research project” we have adopted a liberal approach, and have included some projects (e.g. the SPHERE project) which is not primarily aimed at people affected by dementia, but which may nevertheless still have important implications for the care or cure of people affected by dementia. In addition, the survey had now increased in size, so that as well as covering researchers in Bristol, the two memory clinics at Bath (RICE) and Swindon (Kingshill) were now also involved.

It is hard to estimate the overall worth of these projects, partly because we do not have this information for all of the projects and partly because many projects are multi-site and where we do have a figure about the project value, this is for the overall amount, rather than for the Bristol site. In addition, we have decided to remove the SPHERE project from our calculation not only because it does not primarily focus on people affected by dementia, but also that its large size (£12,000,000) would render any comparison with 2013 meaningless. However, despite these caveats, the grant income for the 1st April, 2013 was £4,623,410, while for the 1st October 2014 it was £12,130,156.

This suggests that in the 18 months between the two surveys, there has been a significant increase in both the amount of research being undertaken and the quality of this work, as judged by the increase in external funding. Although the enlarged nature of the 2014 survey means that it is difficult to draw direct comparisons, the scale of the increase in both grant activity and funding does point to an increase in dementia research activity over 18 months.

Research activity – outputs

Respondents were asked to list research outputs over the previous year. In 2013, 27 peer review journal papers were listed, with 24 in the ten months of 2014 up until the 1st October. In addition a book, and several book chapters have also been produced. Thirty-two oral conference presentations were provided during 2013 and 2014, and 15 poster presentations. A list of dementia-related teaching and training is also provided.
Research projects active on the 1st September 2014


Caldwell, M., Love, S., Coulthard, E., Uney, J., Kehoe, P. Use of IPS technology to model Alzheimer’s disease in vitro: assessing the influence of disease status and APOE genotype on basal forebrain-type neurons derived from skin fibroblasts. £216,409, BRACE, 01/03/2012 – 28/02/2014.

Cheston, R. The LivDem study: conducting a literature review of Psychotherapy with people affected by dementia, and consulting with the public. £16,000, AWP, 1/6/14 – 31/3/15.


Cheston, R. Gray, R. and colleagues. A preliminary comparison inpatient dementia wards which use Protected Engagement Time, with other wards delivering standard care alone. £249,843, NIHR – RFPB, ends 31/5/2015.

Conway, M.E. and Paul, C. The role of increased hBCATm in the endothelial cells of patients with Alzheimer’s disease, £420,000, BRACE PhD studentship, 2014-2017.


Conway, M.E. The brain specific hBCAT proteins and redox partners as biomarkers of Alzheimer’s disease and other neurodegenerative conditions, £60,000, UWE, PhD studentship, 2012-2015.


Coulthard, E. (local PI). Euro HD Registry 3 (REGISTRY – a study by the European Huntington’s Disease Network [EHDN]), Cure Huntington’s Disease Network (Inc) CHDI USA (NIHR portfolio), ends 01/01/2030.

Coulthard, E. (local PI). ENGAGE-HD: Activity Engagement in Huntington's Disease (Supporting Activity Engagement in People with Huntington’s disease: A Phase II Evaluation), National Institute of Social Care and Health Research (NIHR portfolio), ends 31/03/16.

Creavin, S. TIMeLi: Towards Improving the Diagnosis of Memory Loss in General Practice. £19,705 until March 2015 from NHS Bristol Clinical Commissioning group. £9,971 from School of Primary Care Research.

Holmes, R. Development and Implementation of Neuroimaging Analysis in Dementia. NIHR/HEE fellowship (reference NIHR-HCS-P13-04-003) 01/03/2014 – 03/2018.

Holmes, R. Improvements in PET/SPECT Anthropomorphic Phantoms Using 3D Printing. £5,600, Institute of Physics and Engineering in Medicine Innovation and Research Award.

Jones, R., & Noonan, K. Improving the experience of Dementia and Enhancing Active life: Living well with dementia’ (IDEAL), £4, 000,000, ESRC and NIHR, 01/08/2014 – 01/08/2019.


Kingshill Research Centre. A Prospective, Randomized, Double-Blind, Placebo-Controlled, Phase 2 Efficacy and Safety Study of Oral ELND005 for Treatment of Agitation and Aggression in Patients With Moderate to Severe Alzheimer’s Disease. Sponsor: ELAN.

Kingshill Research Centre. Effect of Passive Immunization on the Progression of Mild Alzheimer’s Disease: Solanezumab (LY2062430) versus Placebo. LZAX.


Kingshill Research Centre. An Efficacy and Safety Trial of MK-8931 in Subjects with Amnestic Mild Cognitive Impairment (aMCI) due to Alzheimers Disease (AD). Sponsor: Merck.


Kingshill Research Centre. Randomized, double-blind, placebo-controlled, parallel-group, 12-month trial of Leuco-methylthioninium (bi(hydromethanesulfonate) in subjects with mild to moderate Alzheimer’s Disease. Sponsor: TauRx therapeutics.


Pennington, C., Coulthard, E., Adams, D. Detecting the earliest hippocampal changes in Alzheimer’s disease – extension to include patients with behavioural variant frontotemporal dementia. (Neuropsychology Masters project), UoB, 12 months, £1,000.

R.I.C.E. Observational study of resource use and cost of Alzheimer’s disease in Europe (The GERAS Study), Sponsor: Lilly, 18 month observational study to assess the burden of caring for someone with Alzheimer’s disease.

R.I.C.E. Addendum to Observational study of resource use and cost of Alzheimer’s disease in Europe, Sponsor: Lilly. (This is an extension to the GERAS study).

R.I.C.E. A Randomized, Double-Blind, Placebo controlled, Parallel Group, Multicentre, Phase II Study to Evaluate the Efficacy and Safety of MABT5102A in Patients with Mild to Moderate Alzheimer’s Disease Extension study. Sponsor: Lilly (This is an extension study).

R.I.C.E. Randomized, Double-Blind, Placebo-Controlled, Parallel-Group, 12-Month Trial of Leucometh-ylthioninium bis (hyromethanesulfonate) in Subjects with Mild to Moderate Alzheimer’s Disease. Sponsor: TauRx

R.I.C.E. An Open-Label, Extension Study of the Effects of Leuco-methylthioninium bis (hyromethanesulfonate) in Subjects with Alzheimer’s Disease or Behavioral Variant Frontotemporal Dementia. Sponsor: TauRx (This is an extension study).

R.I.C.E. A Prospective, Randomized, Double-Blind, Placebo-Controlled, Phase 2 Efficacy and Safety Study of Oral ELND005 for Treatment of Agitation and Aggression in Patients With Moderate to Severe Alzheimer’s Disease. Sponsor: Elan Pharma International Limited.

R.I.C.E. Effect of Passive Immunization on the Progression of Mild Alzheimer’s Disease: Solanezumab (LY2062430) Versus Placebo. Sponsor: Lilly

R.I.C.E. A Randomized, Double-Blind, Placebo-Controlled, Parallel-Group, 26-Week, Phase 3 Study of Two Doses of EVP-6124 or Placebo in Subjects with Mild to Moderate Alzheimer’s Disease Currently or Previously Receiving an Acetylcholinesterase Inhibitor Medication. Sponsor: EnVivo Pharmaceuticals Inc.


R.I.C.E. Improving the experience of dementia and enhancing active life: living well with dementia. £4,000,000, ESRC/NIHR dementia initiative, 30/06/2016.

R.I.C.E. Charting Techniques for object-name relearning in Semantic Dementia. £9,100, Gwyneth Forrester Trust. 2011-2014.

Sharma, K. Effects of caffeine in Dementia with Lewy Bodies. No funding attached, time was funded from Dr Coulthard’s research fund, which occurs on an ad hoc basis.

Shoemark, D., & Allen, S. Developing a bacterial biomarker to select Alzheimer’s patients for whom oral bacteria may be contributing to AD progression. £59,009, BRACE, 01/09/2013-31/08/2014.

Williams, R.J., & Wonnacott, S. Activity dependent processing of APP in the ageing brain. £65,000, BBSRC DTG, 10/10 – 09/14.

**Recently completed projects**

Foster, L. Family Work in dementia. AWP RCF grant.

Kehoe, P., & Martin, R. Exploring ‘Polypill’ options to treat dementia. £19,000, University Hospitals Bristol NHS Trust Flexibility and Sustainability Fund Pump Priming grant, 01/04/2012 – 30/09/2012.


**PhD students**

Cockbill, L. Control of astrocytoma (brain tumour) cancer cell motility and invasiveness by PICK1 and other actin regulators. £87,200, MRC PhD studentship at UoB.

Isotalus, H. Neuroimaging of memory, healthy ageing and dementia. Jointly funding by MRC and BRACE at UoB.

Ismail, S. The Psychosocial functions of Nostalgia for people affected by dementia, UWE funded.
Shaikh, N. Dopamine, decision making and memory consolidation, Wellcome PhD student stipend at UoB.

Swirski, M. The contribution of Aβ in dementia with Lewy bodies. PhD studentship at UoB.

Watts, H. Discourses of care: Interactions between care home staff with residents early / mid-stage dementia. PhD studentship at UWE.

Wood, B. Hippocampal Subfield Volumetry as a Marker of Early Alzheimer’s Disease. PhD studentship at UoB.

Publications

Peer review Publications (2012)


Peer review Publications (2013)


**Peer review Publications (2014)**


**Books**


**Book chapters**


In press


Dodd, E., Cheston, R., Ismail, S., Cullum, S., Gatting, L., Jefferies, R., Fear, T., & Gray, R. - Primary Care Led Dementia Services: themes from families, patients and health professionals, Dementia: the International Journal of Social Research and Policy.


Under review


**Conference presentations**

**Oral**


Bagshaw, P. Dementia the South Gloucestershire experience.


Cheston, R. (2014). Psychotherapy and Dementia – all day workshop to North-West Faculty of Psychology in Preston, 30th January.


Cheston, R. et al. (2014). The Living Well with Dementia group project, Faculty of Psychology of Older People Annual Conference, Shrewsbury, 26th June.


Cheston, R. (2014). Living well with dementia therapy groups, 9th UK Dementia Congress, Brighton 12th November.


R.I.C.E. (2014). Cost and resource use in non-institutionalised Alzheimer’s patients - results from an observational study in the UK over 18 months.


Ruud ter Meulen (Invited Speaker) (2014). Dementia: an ethical framework. Solidarity and care for people with dementia Annual Conference of the European Association of Centers for Medical Ethics EACME, Lille 2\textsuperscript{nd} – 4\textsuperscript{th} October.


Patel, A. (2013). Members of the group have presented a Poster at the Royal College of Psychiatrists International Congress in Edinburgh on Crowdsourcing citation screening for a Cochrane diagnostic test accuracy review on the mini-mental state examination. Available at; http://www.youtube.com/watch?v=ufwQZKuYkuE


\textbf{Poster}

Allen, S. (2013). Human proBDNF Val66Met polymorphism: binding and signalling profiles. 5th Conference on Advances in Molecular Mechanisms Underlying Neurological Disorders. 23rd – 26th June, University of Bath, UK.


Hancock, J., Coulthard, E. & the Bristol Health Partners Dementia HIT. (2014). The Bristol Health Partners Dementia HIT: Baseline attitudes toward dementia in the area. From research to practice, 28th January, Southampton


**Supervision of students**


Allen, S. PhD student: Stephanie Wallis until April 2016 (September 2014 took over as supervisor) Investigating the role of tau in neurodegenerative disease using iPSC modelling. James Tudor funded.


Allen S, MSc Molecular Neurobiology Project student in lab June- September 2013. The role of proBDNF in tau pathogenesis

Allen, S. MSc Stem Cell – Stem cells as treatment for Alzheimer’s Disease - library projects


Bufton, H. (2014/15) Possible supervision of BSc in Occupational Therapy Student and continued informal supervision for Mental Health Nursing and Medical Students.


Conway M (2014) Thomas Forshaw. (DOS) (2012-2015) Title: The role of increased hBCATm in the endothelial cells of patients with Alzheimer’s disease. UWE, UK.

Crompton, L. PhD student who is using human induced stem cell technology to investigate the role of Tau in Alzheimer’s and Frontotemporal Dementia.

Cullum, S. PhD supervisor – Sam Creavin. Dementia diagnosis in primary care (University of Bristol).

Holmes, R. MSc Experimental Psychology student Kelly Warr. Effects of education on resting state fMRI.

Holmes, R. PhD supervisor – Angus Prosser – University of Southampton. Translating imaging biomarkers into dementia clinical practice — co-supervision with Chris Kipps.

Holmes, R. Proposal submitted to Alzheimer’s Society doctoral training centre programme: Biomarker Development and Application to Clinical Diagnosis in Dementia. This adds neurochemistry and multivariate analysis to existing (mainly fellowship) work.

Leonards, U. 2nd PhD supervisor for George Stothart (degree awarded in July 2013): “The McGurk effect in healthy and pathological ageing"

Leonards, U. 2 MSc projects together with Robin Holmes (see his info), using the ADNI2 database

Leonards, U. Several MSc (2013: Terry Mills, Theo Tillney; 2014: Karine Adamson) and 3rd year BSc projects (2013-14: Anne Milner, Gaby Oliva, Katie Stringer, Olga Perski) on the impact of vision on locomotion for healthy young and older participants – all linked to the BRACE charity funded pilot study.


Noonan, K. 2014 – Clare Burgon – “The effects of cognitive stimulation therapy on neuropsychiatric symptoms in people with dementia”. In progress – University of Bath BSc Psychology Dissertation.

Pennington, C. MSc student who has been recruiting patients with behavioural variant frontotemporal dementia as part of an extension to the Hippocampal Imaging in Alzheimer’s disease study

Pennington, C. BBSRC undergraduate student placement looking at correlations between personality type and cognition in the healthy elderly
Sharma, K. Supervising a psychology MSc student and Dementia BSc course lecturer.

Ben-Shlomo, Y. & Whone, A. supervising Henderson, E. A randomised control trial of rivastigmine versus placebo for improving gait stability in patients with Parkinson’s disease with a past history of a fall. PDUK clinical PhD studentship

Williams, R. & Cox, C. (Alzheimer’s Society) Flavonoids as modulators of APP processing. 2010-2014

Williams, R. Victoria Hammond (BBSRC) Nicotinic receptors in Alzheimer’s Disease. 2010-2014

**Dementia-related teaching**


Allen, S. (2013/14) Lecture in Regenerative medicine module in BSc final year Cellular and Molecular Medicine (2014)

Bufton, H. (2013/14). Dementia Carer’s Education Course- 6 week programme (the Complex Interventions and Therapies Team staff collaborate to give these presentations). NOTE: this will continue in 2014/15.

Bufton, H. (2013/14). Dementia Care Home Training Pilot- three times 2 hourly sessions covering ‘Person Centred Care’, ‘Behaviour’ and ‘Non –Pharmacological Approaches to Care’.

Bufton, H. (2013/14). Assistive technology for People with Dementia- 1 – 2 hour presentation and question and answer session. This was presented to a post diagnostic group by the OT for South Gloucestershire run by the South Gloucestershire Memory Service. This presentation was delivered to ‘Milestones Outreach Dementia Service’ staff in 2014.

Bufton, H. (2014). Question and answer session with South Gloucestershire Consultant in Old Age Psychiatrist, Specialist Doctor in Old Age Psychiatry and Occupational Therapist from the ‘Milestones Outreach Dementia Service’ team.


Cullum, S. (2013). Medical peer group meetings on dementia.

Cullum, S. (2013). Dementia teaching for medical students at memory clinics

Individual / group and CCG organised teaching for GPs.
Cullum, S. (2013). Dementia and distressing behaviours teaching for care home staff (organised by CCG) 3 half day sessions.

Cullum, S. (2013). Dementia teaching to F1/ F2/GP trainees and Consultant mandatory updates(NBT).

Cullum, S. (2013). Dementia teaching to general adult psychiatrists.


Holmes, R. (2014). Imaging and analysis workshops – bridging gap between research and clinical application. Currently in discussion with fellowship mentors – likely to be organised via the EBI (UoB).

Howcroft, D. (2014) organised DeNDRoN rater training workshop May 2014.

Leonards, U. Neuropsychiatry (PSYC31053 – 3rd year Single Honours Psychology BSc students) (2x1-hour lectures dedicated to neurodegenerative diseases, in particular Dementia and Parkinson’s disease)

Leonards, U. STEMNET ambassador activity: Dementia lecture to Prior Park Medical Society (Prior Park College); 26th November.

Mawson, G. (2013). Eight presentations at Dementia Roadshows. Five further talks at BAWA event, Patchway Alliance launch Coniston community centre, Courtside surgery dementia event, Stakeholder event AWP at Patchway community centre, and Festival event at Patchway library.

R.I.C.E. runs a 4-week Carers’ Course two to three times a year, including speakers from R.I.C.E., Stone King Solicitors, the Peggy Dodd Centre, Citizen’s Advice Bureau, The Alzheimer’s Society, BANES Carers’ Centre and Designability (previously the Bath Institute of Medical Engineering).

R.I.C.E. ran an afternoon session of Dementia Awareness Training for the BANES GP Clusters on Thursday 20th March 2014.

Shoemark, D. (2013/14). MSc Unit 5 2 lectures and workshop.

Wensley, S. (2014). Student undergraduate teaching Year 4 medical students, Bristol dementia and delirium case studies

Yates, M. (2013/14). The Care Home Liaison Team, provides on-going training to older adult care homes throughout Bristol. Particular focus is placed on dementia and focuses on: understanding and managing dementia, person centred care, and meaningful activity.

Attendance at training events
Doran, L. May 2014 DeNDRoN National Rater Training event for psychometric tests and subsequent local follow up teleconferences. Training of staff across region to undertake assessments for Brains for Dementia Research project.

**Conference attendances for networking (not presenting)**


**Dementia-related teaching, workshops or training events ran in 2013/2014**


Conway, M. CPD Event, “Assessment and screening for dementia” (July, 2014). This was a collaborative CPD event with Health and Social care, UWE, keynote lectures to clinical practitioners.


Conway, M. Speakers Event (January, 2014): Hosted and directed a Speakers event for BRACE. “G8 summit sets 'ambitious' 2025 target for dementia cure.” UWE, Bristol, UK.

Conway, M. Dementia Awareness Week (December, 2013): Dementia Awareness Week, UWE: Invited speaker: “Why are new diagnostics important to patients with early-onset dementia.” UWE, Bristol, UK.


Conway, M. ARUK Network Event (September, 2013). Presented lecture and organized speakers for event: “Alzheimer’s disease, from bench to bedside.” The BAWA, Bristol, UK.

Appendix A: Research activity

Projects relating to care and treatment/service delivery

- BRACE Detecting the earliest hippocampal changes in Alzheimer’s disease. Elizabeth Coulthard (co-PI), Risto Kauppinen (co-PI), Marcus Bradely, Margaret Newson. £154, 388, 01/05/2013 – 30/04/2016
- BRACE Base rate of symptom validity test failure in persons with Mild Cognitive Impairment. Margaret Newson (PI), Elizabeth Coulthard and Sarah Cullum. £20, 094, 01/10/12 – 01/10/13
- Engineering and Physical Sciences Research Council (EPSRC) Digital Economy – Research in the Wild inTouch: A video link system to improve social inclusion for people with dementia. £180,000. Roy Jones
- NIHR Health Policy Research Programme, The CHOICE study £551,408 (PR-IP-09-10-0250065). CARE HOME FINAL STUDY: IN DEPTH EXAMINATION OF CARE (Richard Gray)
- NIHR. A preliminary comparison of wards for people with dementia using patient engagement time with other wards delivering standard care alone £249,843 (Richard Gray)
- NIHR. A Pilot Randomised Controlled trial to compare changes in quality of life for participants with early diagnosis dementia who attend a "Living well with dementia" group compared to waiting-list control £249,000. Marshall A, Coleman P, Cheston R (PI)
- NIHR HTA. Goal Oriented Cognitive Rehabilitation In Early-Stage Alzheimer’s Disease : Multi-Centre Single-Blind Randomised Control Trial (GREAT). £2,430,568, Roy Jones
- BRACE pilot grant, Identifying the causes for increased falls in dementia – a pilot study in healthy older and younger volunteers; £53,255. Ute Leonards with Judy Haworth
- BRACE equipment grant. Gait changes in people with AD and the effect of galantamine (£9,000) Ute Leonards with Judy Haworth

Projects relating to cause and cure

- Alzheimer’s Society. Disentangling the genetic, pathophysiological and classification complexities of vascular dementia. Kehoe PG (PI), Passmore P, Love S, Ben-Shlomo Y, Munafö M.
- Alzheimer’s Research UK Collaborative grant. Contribution of Abeta to Lewy Body Diseases. Miners JS, Kehoe PG (Co-PI), Love S. 01/04/2012 - 30/03/2013 : £39,771
• Alzheimer’s Research UK ARUK-PG2012-8 "Investigation into the impact of systemic inflammation due to infection on microglial phenotype and its contribution to Alzheimer’s disease neuropathology" Boche D, Holmes C, Love S, Nicoll J, Perry H. 01/01/2013-31/12/2016, £316,261.24
• Alzheimer’s Research UK ART-PG2011-1 "Evaluating the relationship between ischaemia and neurodegeneration in post-mortem brain tissue" Love S, Kehoe PG 03/10/2011-02/10/2015, £290,743
• Alzheimer’s Research UK Hippocampal subregions in early Alzheimer's disease E Coulthard (PI), Risto Kaupinnen, Margaret Newson, Marcus Bradley £49,999 01/05/2013-01/05/2015.
• BRACE. A new approach to enhance memory consolidation in dementia Elizabeth Coulthard (PI), Jack Mellor, Netasha Shaikh 01/05/2013-30/04/2015 £50,000
• BRACE. The Role of dopamine in memory consolidation Elizabeth Coulthard (PI), Margaret Newson, Demitra Tsivos, Alan Whone £21,440. Start date 7th November 2011
• BRACE. Use of IPS technology to model Alzheimer’s disease in vitro: assessing the influence of disease status and APOE genotype on basal forebrain-type neurons derived from skin fibroblasts. Caldwell M, Love S, Coulthard E, Uney J, Kehoe PG (Co-PI). 01/03/2012 – 28/02/2014 : £164,409
• BRACE. Base rate of symptom validity test failure in persons with mild cognitive impairment. Margaret Newson (PI), Elizabeth Coulthard and Sarah Cullum (2012). £20, 094
• British Heart Foundation. Influence of amyloid β peptide (Aβ) on ECE-mediated regulation of cerebral blood flow. Love S, Kehoe PG (Co-PI), Paton J. 01/04/2011 - 31/03/2014 : £266,848
• Institute of Physics and Engineering in Medicine Innovation and Research Award £5,600 – Improvements in PET/SPECT Anthropomorphic Phantoms Using 3D Printing. Robin Holmes
• Medical Research Council PhD scholarship. Angiotensin II in the brain: the link between dementia and hypertension. Kehoe PG (Co-PI), Paton JFR.01/10/2011 - 30/09/2015: £87,200
• MRC PhD studentship (Louisa Cockbill) "Control of astrocytoma (brain tumour) cancer cell motility and invasiveness by PICK1 and other actin regulators" Hanley J, Love S, 2011-2015, £87,200.


- Parkinson’s UK and Cure Parkinson’s Trust. A Randomised, Double-blind Trial to Assess the Safety and Efficacy of Intermittent Bilateral Intraputamenal Glial Cell Line Derived Neurotrophic Factor (GDNF) Infusions Administered via Convection Enhanced Delivery (CED) in Subjects with Parkinson’s Disease. Alan Whone (PI), Steven Gill, Nik Patel, Lucy Mooney, Elizabeth Coulthard, Andrew Lawrence, Stephen Daniels. £1.35 million - start date to be established.


- University Hospitals Bristol NHS Trust Flexibility and Sustainability Fund Pump Priming grant. “Exploring ‘Polypill’ options to treat dementia”, Kehoe PG (PI), Martin R. 01/04/2012 - 30/09/2012: £19,000
Hello,

As part of the dementia Health Integration Team (HIT), we have the opportunity to seek funding from Collaborations for Leadership in Applied Health Research and Care (CLAHRC) West. CLAHRC West will fund specific projects to bring together public health and NHS specialists with applied health scientist, commissioners and patients. We can only submit 1-2 projects per year from the HIT and so will have to prioritise and we already have several ideas. However, we wanted to make sure that we had consulted widely with people involved in dementia care and research about what research projects might be usefully supported by CLAHRC. So, we are contacting you to see if there are any ideas you think should be considered for this funding. If you want to, please send your thoughts on the attached word document to Lauren.Dennis@UHBristol.nhs.uk before 5pm on Tuesday 22nd April 2014.

When we have any ideas, a small group will meet to see which we can prioritise and we will also give feedback about other potential funding opportunities. The rationale for any decision will be available for scrutiny and discussed at the dementia research workstream meeting.

This is part of our wider research program for which we are trying to collate dementia research activity as a resource for people developing new projects and so that we can demonstrate local endeavours. Therefore, if you are undertaking dementia research, teaching or training, we would like to know the following information from you:

- Projects you are currently involved in (even early concepts), and details of any funding sources;
- Publications in 2013/2014 or web links to lists if there are many;
- Conference presentations and/or posters during 2013/2014, and any you have planned for 2014;
- Supervision of student projects with a dementia focus (whether BSc, MSc, or PhD);
- Dementia-related teaching, workshops or training events you ran in 2013/2014, and any planned for 2014.

Feel free to use the attached document for this too, but we recognise that much of this information will be held in your current CVs. Therefore if it is more convenient for you to send your CV with a note of project concepts, then please do.

If this email is not applicable to you at the moment, but you would like to carry out research or evaluation in the future can you please let us know so we can keep you informed of opportunities. Please forward this email to anyone else you think might want to contribute.

Again, could all responses please be sent to Lauren.Dennis@UHBristol.nhs.uk (Management Assistant for the BHP) before 5pm on Tuesday 22nd April 2014.

Best wishes
Dr Elizabeth Coulthard
Dementia HIT Co-Lead Director, http://www.bristolhealthpartners.org.uk/health-integration-teams/dementia-hit/
Consultant Senior Lecturer in Dementia Neurology, University of Bristol and North Bristol NHS Trust.
Appendix C: Screen shot of word version of survey

Dementia Health Implementation team

A. Survey of dementia related activity – 2013/14

As part of our wider research program we are trying to collate dementia research activity as a resource for people developing new projects and so that we can demonstrate local activity.

Therefore, if you are undertaking dementia research, teaching or training, we would like to know the following information from you - however, if it is more convenient for you to send your CV with a note of project concepts then please do.

<table>
<thead>
<tr>
<th>Current projects, and details of any funding sources</th>
<th>2013/14</th>
<th>Planned in 2014/15</th>
</tr>
</thead>
<tbody>
<tr>
<td>Publications (or web-links)</td>
<td></td>
<td></td>
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<tr>
<td>Conference presentations (including posters)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Supervision of students with a dementia focus (whether BSc, MSc, or PhD)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Dementia-related teaching workshops or training events</td>
<td></td>
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</tbody>
</table>

If this email is not applicable to you at the moment, but you would like to carry out research or evaluation in the future can you please let us know so we can keep you informed of opportunities.

B. Setting priorities for research

As part of the dementia HIT, we have the opportunity to seek funding from CLAHRCWest for applied research projects. CLAHRC West will fund specific projects to bring together public health and NHS specialists with applied health scientist, commissioners and patients. We can only submit 1-2 projects per year from the HIT and so will have to prioritise and we already have several ideas. However, we wanted to make sure that we had consulted widely with people involved in dementia care and research about what research projects might be usefully supported by CLAHRC. So, we are contacting you to see if there are any ideas you think should be considered for this funding.

If you have an idea that you feel should be funded, then please submit a brief outline of this bid (minimum 300 words), specifying how the funding would be used, and what the main outcome of this funding would be (e.g. how it might support a future research bid).

If you don’t have a specific idea for a project, but nevertheless would like to recommend an area of dementia research that should be prioritised, then please let us know:

My suggestion for a research project that should be funded by CLAHRC West is:

I don’t have any specific ideas about projects to be funded, but I believe the main priority for dementia research is:

Many thanks

Dr. Elizabeth Coulthard, Dementia HIT Co-Lead Director
http://www.istolhealthpartners.org.uk/health-integration-team/dementia-hit/

Consultant Senior Lecturer in Dementia Neurology, University of Bristol and North Bristol NHS Trust
### Appendix D: Research ideas and priorities from survey

<table>
<thead>
<tr>
<th>Name(s)</th>
<th>Project idea and notes</th>
<th>Notes/feedback</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Projects prioritised for possible submission in the first round</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sarah Cullum/Sarah Purdy</td>
<td>Interventions to prevent inappropriate admissions to secondary care</td>
<td>A joint HIT bid and could be linked to work suggested for Sian Jones too.</td>
</tr>
<tr>
<td>Rik Cheston</td>
<td>Intervention and evaluation of post-diagnostic care</td>
<td>Could be linked to Emily Dodd suggestion too.</td>
</tr>
<tr>
<td><strong>Projects for which more information is required that may possibly be suitable for submission to CLAHRC in future rounds</strong></td>
<td></td>
<td></td>
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</tbody>
</table>
| Helen Bufton & Paula Clough (OTs with AWP) | Assistive Technology, Wandering and the Cost Impact to Public Services | More information required:  
  - Is this technology already available?  
  - What does it cost?  
  - Who would provide it?  
  - Could CLAHRC usefully review the literature as to what is available etc?  
  In other words it is a question that is potentially of interest to CLAHRC, but the form of the research project is not yet clear. |
| Karen Hillier (Service Manager AWP) | Comment, ‘I wonder if people with dementia do better when they are kept at home with direct payment packages of care or whether they survive longer in Res care or Nursing homes. My view is that we put too many people into NH and should be facilitating packages in the community and accepting psychologically as a society that part of having an ageing generation who will because of medicine live longer and | This is a significant national issue and if of interest to local commissioners may be possible to investigate here. Plan – send feedback to Karen Hillier and ask commissioners if it is something they would be interested in taking forward. Note Emma Moody’s suggestion of evaluating the new care home model in Bristol – could they be tied together at all? |
therefore be subject to dementia, that we need to massively adjust to provide sufficient services in both health and social care as part of a day to day community life whatever that consists of.’

Matthew Yates (Assistant Psychologist with AWP)  Comment, ‘I feel that our progress on improving the lives of those with dementia is an example of an area where there has been considerable growth in our understanding, but a lack of this being actively applied to those it impacts i.e those with dementia and their carers, particularly in care homes. The research into improving the lives of those with dementia has been excellent. We are now fully aware of how we should be treating and caring for those with dementia in care homes, however in practice this doesn’t take place.

A large proportion of those with dementia eventually move into care homes. We are an aging population, dementia and care of those with dementia is a is ticking time bomb for care homes. I feel the best way to make a positive change is to build findings such as those found by:

What makes a real difference to resident experience? Digging deep into care home culture: The CHOICE (Care Home Organisations Implementing Cultures of Excellence) research report by Anne Killett, Alison

More information needed. Plan – to ask Matthew if he means that the recommendations of Killett et al are not being implemented. This could be evaluated if there is a specific question.
<table>
<thead>
<tr>
<th>Name</th>
<th>Description</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bowes, Dawn Brooker, Diane Burns, Fiona Kelly, Jenny La Fontaine, Isabelle Latham, Martin O’Neill, Fiona Poland, Michael Wilson</td>
<td>’</td>
<td></td>
</tr>
<tr>
<td><strong>Projects not thought suitable for CLAHRC at present, but we would be happy to discuss/reconsider</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mary Griffin (DeNDRoN)</td>
<td>Enabling Research in Care Homes (ENRICH)</td>
<td>This national initiative appears to be a potential useful resource for projects about which we should be informed. We did not think it was a research idea for CLAHRC as such.</td>
</tr>
<tr>
<td>Mary Griffin (DeNDRoN)</td>
<td>Recruitment and Feasibility Tool (RAFT). A rebranding is in progress</td>
<td>This national initiative appears to be a potential useful resource for projects about which we should be informed. We did not think it was a research idea for CLAHRC as such.</td>
</tr>
<tr>
<td>Deborah Shoemark (UoB)</td>
<td>A “Proof of Principle” project using the biomarker DS is developing to select five early Alzheimer’s disease (AD) patients for an intervention lasting a year</td>
<td>This would not fall under the remit of the CLAHRC although could be reconsidered at a stage when the intervention is being evaluated potentially.</td>
</tr>
<tr>
<td>Subitha Baghirathan (Volunteer Bristol)</td>
<td>Supported Volunteering Project for people with dementia</td>
<td>We weren’t sure of specific research ideas that required input.</td>
</tr>
<tr>
<td>Robin Holmes (UoB/UHBT)</td>
<td></td>
<td>This research is underway and does not fall within the remit of the CLAHRC.</td>
</tr>
<tr>
<td>Kanch Sharma (UoB)</td>
<td></td>
<td>Need specific project ideas for CLAHRC.</td>
</tr>
<tr>
<td>Patricia Holley (UoB)</td>
<td>No specific project idea but suggestion of SPHERE project</td>
<td>Happy to engage with SPHERE when helpful.</td>
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<tr>
<td>Seth Love (UoB)</td>
<td>Comment, ‘I wonder whether simply analysing the demographic and existing cognitive data for the full (~2,500 participant) BDR cohort would be worth considering in this context. Nobody has done this yet. Apart from the fact that it would be interesting to find out how comparable this self-referred group is to other large cohorts of similar age distribution, the data would be invaluable for the planning of any other studies on this cohort.’</td>
<td>The CLAHRC will only support applied health research questions.</td>
</tr>
<tr>
<td>Jude Hancock</td>
<td>PPI evaluation – how do we best do it in dementia</td>
<td>This should be discussed with David Evans in the first instance.</td>
</tr>
<tr>
<td>Jude Hancock</td>
<td>Impact of Dementia Friends initiative Possible monies will be available from Health Education South West for this</td>
<td>More information required about the initiative.</td>
</tr>
</tbody>
</table>