

The Northern Echo
The North's campaigning newspaper

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COMMENT

A&E ban not the answer

THE idea that patients could be stopped from attending hospital accident and emergency departments without first getting a referral sounds like something dreamt up on April 1.

But no, Dr Helen Thomas, a senior official at NHS England, says a pilot scheme is being considered which would involve people having to consult a GP or the 111 non-emergency number before being allowed into A&E – a plan later denied by the Department of Health.

Clearly something needs to be done to ease pressure on A&E departments, especially with winter approaching, but this proposal would just shift the problem elsewhere into the health system, particularly onto GPs, who have very little capacity to take on what would be a huge amount of extra appointments.

Earlier this year, data released after a Freedom of Information request revealed hundreds of thousands of patients across the UK have at times been left without a GP out-of-hours service because of staff shortages and high insurance costs. The solution? Patients were told to go straight to A&E.

Those who know the reality of the problems in the NHS say A&E departments are struggling not because of time-wasters, but because of chronic funding problems in areas such as social care and mental health.

Elderly and vulnerable people are unable to leave hospital because there is no one to look after them in the community, while many suffering with serious mental illnesses have nowhere to turn other than A&E when they reach crisis point.

Properly funding those services would take a huge burden off emergency departments, and mean ill and injured patients do not have to wade through a layer of bureaucracy before getting the help they need.

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The end of smoking as we know it?



STOPTOBER: Public Health England has put its full weight behind the use of e-cigarettes for the first time **Picture:** YUI MOK/PA WIRE

AS October rolls around again, the annual Stoptober campaign to highlight the ills of tobacco consumption picks up speed once more.

This year, for the first time e-cigarettes feature in the Public Health England campaign, which includes images of individuals "vaping". With its bold claim that e-cigarettes are "95 per cent more safe" than conventional cigarettes, it has even stated that the devices should be available on prescription, in a manner similar to currently approved nicotine replacement products (NRTs). Presently, NRTs available on prescription include gum, lozenges, tablets and patches.

However the National Institute of Clinical Excellence (NICE), the governing body which approves all prescribed treatments has cautiously advised that although "some people have found e-cigarettes helpful to stop smoking... [there is] currently little evidence on their long term benefits or harms".

With 80,000 smoking-related deaths in the UK alone every year, and the estimate that at current levels of tobacco consumption, a billion people will die from its effects worldwide in this century, is it time to accept that e-cigarettes may actually be the way forward?

Although for non-smokers the image of somebody vaping may be as unpalatable as that of a smoker lighting up, 50 per cent of would-be quitters are now using e-cigarettes in an attempt to stop completely, with smoking cessation rates at an all time high.

There are two types of e-cigarettes, as some do not actually contain nicotine. In those that do, the chemical is in liquid state. A battery powered element heats it to a point where it vapourises, and it is in this form that the user inhales it. It is the nicotine component of tobacco that habitual users crave, not the tar and sometimes five hundred plus other chemicals, but it tends to be these that are indicated in the development of the myriad of smoking related diseases. So a mechanism which delivers nicotine without all the other chemicals seems like a godsend. Yet nicotine is also a chemical and as research has shown, not completely harm free.



With more individuals than ever trying to stop smoking, and 50 per cent of those attempting to quit using e-cigarettes, North-East GP **Dr Zak Uddin** asks if we have finally found a solution to this deadly habit?

The latest evidence comes from the University of California and Los Angeles, and is headed by Professor Holly Middlekauff, a researcher and practising heart specialist. It took 33 healthy non-smoking individuals and looked at the effect of nicotine containing e-cigarettes against those who did not. A control group were given "sham" devices with nothing in them. It found that those containing nicotine raised the heart rates and indeed altered heart rate variability to a noticeable level in participants, whereas this effect was not seen in the other two groups.

NICOTINE works by raising adrenaline levels in the bloodstream, which results in greater alertness. In nature this is known as the "fight or flight" response, and smokers often report that they not only experience relaxation after a cigarette, but also feel more able to address any task in hand.

Sadly and rather distressingly, these changes in heart rate and heart rate variability are strongly linked with heart attacks and indeed sudden cardiac death. Worse, this effect may occur in those without underlying cardiac disease as well as in those with known heart problems. So are e-cigarettes just as bad as conventional tobacco?

As always, it helps to take a pragmatic approach to such issues. Successful cessation

relies on a smoker recognising the harmful effects of prolonged tobacco consumption, while at the same time being in the correct frame of mind to put these thoughts into action. With many people having attempted to quit several times, it is important to make the process as easy as possible, and for the maximum amount of assistance to be offered. Currently, the NHS offers dedicated smoking cessation services, with specifically trained nurses, who can support patients through a 12-week programme, using approved nicotine replacement therapies.

In my opinion, this is the best way forward as it provides not only tried and tested therapies, but also the help of a healthcare professional to support you throughout. However, if you have tried and failed in this manner, are still keen to kick the habit, and feel that an e-cigarette may provide you with a way out, I would advise that this is far preferable to continuing smoking. The caveat is that it should be viewed as a bridge to not needing any nicotine at all, rather than a switch from one bad habit to another, and you should also set a deadline for when to give up e-cigarettes completely.

● doctorzak.co.uk; @AskDoctorZak

Useful websites

www.nhs.uk/smokefree
www.smoking-cessation.org

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Dr Zak Uddin