

## Research

Sometimes you may be offered the opportunity to participate in clinical research, including trials of new treatments for IBD. Your participation is entirely voluntary and your normal care remains unaffected whether you chose to take part or not. Information about the studies we are currently involved in will be on the board in the clinic, or can be requested using the helpline (either telephone or e-mail).

**Tel: 01582 718368**

**Email: IBD@ldh.nhs.uk**

If you are interested feel free to ask your Doctor or nurse about taking part in a research study.

## Charity information

The National Association for Colitis and Crohns disease (NACC) is a national charity which offers patient support including information leaflets, newsletters, a 'Can't Wait' card and the NACC-in-contact support line. They raise funds for IBD research and have a useful web site with a lot of information:

[www.nacc.org.uk](http://www.nacc.org.uk)

## NACC

4 Beaumont House  
Sutton Road  
St Albans  
Herts  
AL1 5HH

## Telephone:

Information Line: 0845 130 2233 (or 01727 844296)

NACC-in-Contact Support Line: 0845 130 3344

# THE LUTON AND DUNSTABLE HOSPITAL INFLAMMATORY BOWEL DISEASE (IBD) SERVICE

## INFORMATION FOR PATIENTS

This leaflet tells you about the Inflammatory Bowel Disease (IBD) service and how to access the support services you need after a diagnosis of Ulcerative Colitis or Crohn's disease (also known as IBD). It contains information about members of the IBD team, their roles and how to contact them. If you have any questions please ask one of the team in clinic or call the IBD helpline.

### **IBD HELPLINE**

For particular concerns related to your IBD you should contact the helpline. The telephone service has a voicemail for messages if there is nobody available to take your call immediately and we will aim to return your call within 1 working day (please note the office is not staffed at weekends). The e-mail service is for less urgent queries and we will aim to reply to any e-mail within 3 working days. Please note that this is not a secure method of communication and we are not allowed to send any patient-identifiable information this way, so it is better suited to more general queries.

#### **Helpline number**

**Telephone: 01582 718368**

**Email: [IBD@ldh.nhs.uk](mailto:IBD@ldh.nhs.uk)**

### **Investigations**

You will probably need to have blood tests, x-rays, scans and or endoscopy procedures to diagnose IBD and to monitor your progress. Sometimes an internal examination or sigmoidoscopy may be necessary in clinic. This is carried out in a separate room, with a nurse attending. Please let us know if you do not want to have this done. Other tests may be needed. The X-ray department or the Endoscopy Unit will send you an appointment for these outpatient investigations.

If you have been on steroids for a long time then you will need to have a DEXA scan to check your bone density. Your Consultant or GP can arrange this for you.

### **The Role of your General Practitioner (GP)**

Your GP is kept informed of our involvement in your care. We send your GP a letter after a clinic appointment or a stay in hospital. This letter contains information about your condition, any investigations or monitoring required and advice on any routine treatment you may need. We will also send your GP a copy of your self management plan. Your GP is responsible for prescribing any medication you take on a regular basis.

## Self Management Plans

Most patients will be able to have a Self Management Plan. This is a plan of treatment agreed between you and your Consultant. You will be given written information about your condition and what to do when you have a relapse or flare up. You will know when blood tests and other monitoring tests are due.

Patients on immunosuppressant drugs will also be given a blood test monitoring card to record the results of their tests, ensuring that results are always checked after bloods have been taken, whether this is through the GP or through the hospital.

Patients with self management plans will not need routine clinic appointments, but will always be able to contact the helpline whenever help or advice in managing their IBD is needed.

Our aim is to ensure that patients always have rapid access to advice and treatment whenever they have problems.

## Relapses and changes in your condition

Patients with IBD typically go through periods of remission, when they feel well and relapse or flare up, when symptoms return. If you have a self management Plan then follow your instructions. If a flare up is not responding to the treatment recommended on the self management plan or if you are not sure that your symptoms are due to a flare up, you should contact the helpline. If you do not have a self management plan and are having problems then you should contact the IBD helpline. If you require medical attention out of hours you should call your GP emergency service.

## The IBD Team

### Gastroenterologists

Gastroenterologists specialise in intestinal disorders such as Ulcerative Colitis or Crohn's disease. Three Consultants head a team of doctors who are responsible for making decisions with you about your care and the appropriate treatment options for you.

### Consultant Gastroenterologists

Dr N Simmonds

*Secretary Susan Hill*

497242

Dr A Griffiths

*Secretary Gaynor Craig*

497478

Dr M Johnson

*Secretary Susan Hill*

497242

### IBD Nurse Specialist

You may see the specialist nurse who can offer you support and information about your condition and treatment. This could be at a clinic appointment during a stay in hospital, by phone or email.

Sister T Price

718368

### Surgeons

Patients with IBD sometimes require surgical treatment if medical treatment fails to control their symptoms. There are two Consultant Surgeons who specialise in surgery for patients with IBD.

### Consultant Surgeons

Miss K Brown

Secretary Nina Burnett and Claire Cooper 497562

Miss M Obichere

Secretary Gemma Bright 497234

### Stoma Nurse Specialists

You may see a stoma nurse specialist if you have to have surgery where a stoma may be necessary. They will provide support before and after surgery, even after you leave the hospital

Sister H Ilett

497091

Sister D Schrader

### Pharmacy

If you need an urgent prescription after a clinic appointment, we can give you a prescription to take to a community pharmacy. Please do not ask the hospital doctor for medicines you usually get from your GP. You can obtain a Prepayment Certificate (a season ticket) to help with prescription charges by phoning: 0845 8500 030 or e-mail [www.ppa.org.uk](http://www.ppa.org.uk) This is a helpful cost effective way method of paying prescription charges if you require five or more medicines in a four month period.

### Admission to hospital

Sometimes patients with IBD need to be admitted to hospital for intensive medical treatment, close monitoring, tests and maybe surgery. Ward 11 is the specialist gastroenterology ward. Wards 20 and 22 are the specialist surgical wards. Whenever possible we will try to admit you to these wards for your treatment.

### Clinic sessions

Monday morning

**Dr Simmonds** sees new patients.

**Dr Griffiths** sees new patients.

**Miss Obichere** sees surgical patients.

**Sr Price IBD Nurse Specialist**

sees patients.

Tuesday morning

**Dr Simmonds** sees follow up patients .

**Dr Johnson** sees follow up patients.

**Sr Price IBD Nurse Specialist**

sees patients.

Tuesday afternoon

**Dr Griffiths** sees follow up and urgent patients.

**Sr Price IBD Nurse Specialist**

sees patients.

Wednesday afternoon

**Miss Brown** sees surgical patients.

Thursday morning

**Miss Brown** and **Miss Obichere** see surgical patients on alternate weeks.

Thursday afternoon

**Stoma nurses** see patients.

Friday morning  
(Alternate weeks)

**Dr Griffiths** sees follow up patients

**Dr Johnson** sees new patients

Friday afternoon  
(Alternate weeks).

**Dr Griffiths** sees new patients