



## **Regional Anaesthesia Research Priority Setting Partnership**

### **What is Regional Anaesthesia?**

Regional Anaesthesia is a term used to describe a wide variety of procedures which aim to make part of the body numb. These procedures are often called “nerve blocks” but also include “spinals” and epidurals. Sometimes regional anaesthesia is used to allow an operation to take place without the need for a general anaesthetic (being put to sleep) some examples would include hand surgery or caesarean sections. It is also used to provide pain relief after surgery or for other painful event such as an injury or childbirth.

### **Why is research into Regional Anaesthesia Important?**

Regional anaesthesia offers many potential benefits to patients, for example:

- Less pain after operations or other painful events
- Less Nausea and Vomiting
- Less Respiratory complications after surgery
- Avoiding the risks of general anaesthesia
- Improved theatre efficiency

Research into regional anaesthesia could improve regional anaesthetic techniques, allow regional anaesthesia to be used where it can't currently and reduce regional anaesthesia related complications. With the enormous challenge of reducing the backlog of patients waiting for surgery as a result of the Covid-19 pandemic, advances in treatment are needed now more than ever.

### **What is this project aiming to do?**

This project aims to identify the 10 most important questions that researchers in regional anaesthesia should address. We will seek the view of both patients and healthcare professionals and ensure the final questions reflect the priorities of both. We hope that publication of this will work will focus future research into the areas which have been deemed the most important.

### **How can you help?**

Hearing the opinions of patients and healthcare professionals is vital to this project. Promotion of the project to your members through email/social media will ensure they have the opportunity to influence the questions we identify.

## How will the project achieve its aims?

The regional anaesthesia research PSP will progress through the following stages

Initial Survey	2 Months	Patients and Healthcare Professionals will be contacted and asked to input their ideas for regional anaesthesia research via an online survey
Data Processing and Establishing Uncertainty	2 Months	Submitted questions will be reviewed and collated. Literature review will be conducted to establish which if any, questions have been answered.
Interim Prioritisation	2 Months	Patients and Healthcare professionals will be contacted and asked to rank unanswered questions in order of importance. This will produce a list of the 20 most important research questions.
Final Prioritisation	2 Months	A multidisciplinary group of experts will review the top 20 questions and form a consensus about the top 10 most important regional anaesthesia research questions.

## Who is leading the Regional Anaesthesia Research PSP?

Regional Anaesthesia UK (RA-UK) have assembled a multidisciplinary steering group to lead and manage this project. Its members are listed below.

James Bowness (JB; *PSP Lead, Aneurin Bevan University Health Board*)  
Owen Lewis (OL; *PSP Co-ordinator, Aneurin Bevan University Health Board*)  
James Lloyd (JL; *PSP Co-ordinator, Aneurin Bevan University Health Board*)  
Alan Macfarlane (AJRM; *RA-UK President, NHS greater Glasgow and Clyde*)  
Kariem El-Boghdady (KEB; *Guys and St Thomas NHS foundation Trust*)  
Rachel Kearns (RK; *RA-UK Research Network Chair, NHS greater Glasgow and Clyde*)  
Jonathan Womack (JW; *RA-UK Research Network Deputy Chair, Newcastle upon Tyne Hospitals NHS Foundation Trust*)  
Andrew Smith (AS; *University Hospitals of Morecambe Bay NHS Foundation Trust*)  
Annabel Pierce (*University Hospitals Bristol NHS Foundation Trust*)  
Jim Connolly (JC; *Newcastle upon Tyne Hospitals NHS Foundation Trust*)  
Carol Pellowe (CP; *RCOA lay committee,*)  
Cliff Shelton (CS; *PSP Advisor Manchester University Hospitals NHS Foundation Trust*)  
Tom Quick (TQ; *Royal National Orthopaedic Hospital NHS Trust*)  
Karin Cannons (KC; *Frimley Health NHS Foundation Trust*)  
Daniel Rodger (DR; *London South Bank University*)  
Leila Heelas (LH; *Oxford University Hospitals NHS Trust*)  
John Marshall (JM; *Lay Member*)

