



# UPDATE

Below is an **UPDATE** list from both Rushbottom Lane Surgeries. This shows the number of wasted appointments last month (April 2026), where patients just **Did Not Attend**.

St Georges Medical Practice April 2026 DNA's			
Clinician	Appointment	Minutes	Hours
GP	21	337	5hr 37min
ANP	5	75	1hr 15min
Nurse	19	343	5hr 43min
<b>TOTAL</b>	<b>45</b>	<b>755</b>	<b>12hr 35min</b>

Dr Khan & Partners April 2026 DNA's			
Clinician	Appointment	Minutes	Hours
GP	66	1,000	16hr 40min
ANP	0	0	0hr 0min
Nurse	65	1,018	16hr 58min
<b>TOTAL</b>	<b>131</b>	<b>2,018</b>	<b>33hr 38min</b>

Combined total number of Did Not Attend			
	WASTED Appointments	Minutes	Hours
April 2026	176	2,773	46hrs 13mins
March 2026	191	3,108	51hrs 48mins



To cancel an appointment, call the surgery number and select option 6

**OR: - Text CANCEL**

**in response to the appointment text reminder from the surgery**

**OR: - Email [reception.rushbottomlane@nhs.net](mailto:reception.rushbottomlane@nhs.net)**

Rushbottom Lane Surgery received 177,809 Incoming telephone calls over the past 12 months. That's an average of 14,817 per month



## Here are just three of the awareness events taking place in May 2026



International Nurses Day is a global healthcare event that is celebrated on the 12th of May every year, which honours the birth anniversary of Florence Nightingale (1820–1910), who is commonly considered the pioneer of modern nursing. The day honours the critical roles that nurses play in healthcare and society.

Nurses are the backbone of patient care and public health, and this special day honours their unwavering commitment, compassion, and essential contributions to healthcare systems around the world. The celebration empowers nurses to carry out their mission of providing compassionate and skilled care to others by encouraging society to show gratitude and appreciation for their selfless service.

This **Salt Awareness Week** (11<sup>th</sup> to 17<sup>th</sup> May) we'll be bringing salt back into the focus to spotlight the many ways it impacts our body, our health and our environment – and calling on both the government and food industry to '**Salt It Out!**' for good.



Salt has been worryingly absent from the food and health narrative in recent years – despite the fact it remains one of the simplest and most cost effective ways to improve health.

**Action on Salt & Sugar** <https://www.actiononsalt.org.uk/>



## Make May Purple /Action On Stroke Month 2026

May 1 – May 30



Action on Stroke Month, organized annually by the Stroke Association throughout May (also known as "**Make May Purple**"), raises vital awareness about stroke prevention, symptoms, and support for survivors. The campaign educates the public on the **F.A.S.T** (Face, Arms, Speech, Time) acronym to recognise symptoms and encourages fundraising to support recovery, with many landmarks lighting up purple. Action on Stroke Month began as a way to highlight the urgent need for more research and better care for stroke survivors. Over the years, it has expanded into a global initiative that brings together healthcare professionals, stroke survivors, and the public to push for advancements in stroke treatment and prevention.

**Go Purple: Wear purple or light up your home or workplace in purple to show support for stroke survivors and to raise awareness.**

# AI



## Artificial Intelligence is one of the most topical issues in the NHS today

**Artificial Intelligence (AI)** is one of the most topical issues in the NHS today. It is being trialled in numerous ways in the NHS today, including in booking appointments, diagnostics testing, improving efficiency for NHS staff and in the creation of new treatments and medicines. If an AI tool is used for medical purposes, it is treated as a medical device and must meet strict safety and performance standards.

### How AI is being used in healthcare

Artificial intelligence (AI) is being used in many ways to help health providers and to assist people with their health. Some examples include:

- **Chatbots and Apps:** Nearly 1 in 10 people now use AI-powered chatbots to get health advice. Many apps use AI to analyse health data from devices like smartwatches.
- **Admin Support:** Some hospitals use automated systems to invite patients to appointments or screenings.
- **Voice Technology:** AI can record and summarise doctor-patient conversations, helping doctors spend less time taking notes. Some services even give patients a summary of their visit and advice based on it.
- **Screening and Diagnosis:** AI can help spot diseases (like cancer), support doctors in making treatment decisions, and assist with therapies. Some AI tools focus on specific tasks, while others have a broader range of applications.

While AI offers numerous opportunities for the improvement of health and care services, evidence from the Health Foundation indicates patients are split on its benefits in making improvements to the NHS.

## Foot care (podiatry)

Foot health is vital for overall wellbeing. Podiatry services offer treatment for foot pain, mobility issues, and diabetic foot care.



Your feet play a crucial role in your mobility. Whether you have minor foot issues or more serious conditions, there are podiatry services in mid and south Essex who can help and that you can now self-refer into, without the need to see your GP.

South East and South West Essex Podiatry team, helps people with foot and lower limb problems caused by medical conditions like diabetes or arthritis.

The department specialises in the assessment, diagnosis and treatment of diseases and conditions that affect the feet and associated structures. The Podiatrists are trained to assess the neurological, vascular, biomechanical and orthopaedic status of the lower limb and have the expertise to treat patients with a variety of presenting problems such as diabetes mellitus, peripheral vascular disease, acute and chronic nail pathologies and arthritis, both degenerative and inflammatory.

The service is currently delivered in community clinics across south Essex; we also have strong links to the Diabetic multi-disciplinary foot clinics within the hospital settings.

To self-refer to the Podiatry service please use our online form which can also be accessed using QR code below to self-refer to the Podiatry service.

Podiatry/ Chiropody self referral form (The Patient/ Patients family)



# Fibromyalgia - PTSD

Fibromyalgia (FM) is often described as an ‘invisible illness,’ yet for millions of people worldwide, its impact is painfully visible in daily life. Chronic widespread pain, unrelenting exhaustion, cognitive difficulties, and emotional distress shape every waking hour. What is less frequently discussed, however, is the **strong connection between fibromyalgia and psychological trauma**, particularly **Post-Traumatic Stress Disorder (PTSD)**.

## Fibromyalgia patients should be evaluated for Posttraumatic Stress Disorder (PTSD)

Growing evidence suggests that **fibromyalgia patients should be routinely evaluated for PTSD**, not because the pain is “all in their head,” but because trauma and the nervous system are deeply interconnected. Understanding this link can change treatment outcomes, improve quality of life, and offer long-overdue validation to those who suffer in silence.



Fibromyalgia sufferer.  
Actress, Emily Clarke

## Understanding Fibromyalgia Beyond Physical Pain,

Fibromyalgia is a complex neurological condition characterised by widespread musculoskeletal pain, heightened pain sensitivity, sleep disturbances, cognitive issues (often called *fibro fog*), and profound exhaustion. Despite decades of research, many patients still struggle to receive accurate diagnoses or effective treatment plans. What makes fibromyalgia especially challenging is that **standard medical tests often appear normal**, leaving patients feeling dismissed or misunderstood. Yet science now recognizes fibromyalgia as a disorder of **central nervous system processing**, where the brain and spinal cord amplify pain signals.

PTSD develops after exposure to traumatic experiences such as abuse, violence, accidents, war, or prolonged emotional neglect. While PTSD is often associated with flashbacks and nightmares, it also causes **chronic nervous system dysregulation**—a constant state of alert that affects the entire body. Research has shown that a significant percentage of people with fibromyalgia report a **history of trauma**, whether in childhood or adulthood. This does not mean trauma ‘causes’ fibromyalgia in every case, but it strongly suggests a **biological connection**.

Trauma does not simply exist as a memory; it is stored in the nervous system. In PTSD, the brain remains stuck in survival mode, constantly scanning for danger. This prolonged state of hypervigilance can **sensitise pain pathways**, making the body more reactive to even minor stimuli. Fibromyalgia is now widely understood as a condition involving **central sensitisation**, where the brain overreacts to pain signals. PTSD contributes to this process by keeping stress hormones elevated and preventing the nervous system from returning to a calm baseline. Evaluating fibromyalgia patients for PTSD is not about labelling or stigmatizing. It is about **understanding the full picture**. Many patients live with unresolved trauma for years without recognizing its impact on their physical health. Others may dismiss emotional symptoms as irrelevant to their pain. Unfortunately, this separation often delays effective treatment.

Fibromyalgia treatment works best when it is **multidisciplinary**. Medications, physical therapy, and lifestyle adjustments are important, but they should not exist in isolation. When PTSD is present, integrating psychological support can dramatically enhance results. This do not suggest that fibromyalgia is “psychological.” Instead, they acknowledge that **the nervous system connects emotional and physical experiences**. One of the greatest barriers to PTSD evaluation in fibromyalgia patients is stigma. Many fear that acknowledging trauma will lead doctors to dismiss their pain as imaginary.

**By evaluating fibromyalgia patients for PTSD, we move closer to compassionate, evidence-based care.**

Healing is rarely linear, but knowledge is empowering. And for those living with fibromyalgia, understanding *why* the pain exists can be just as powerful as treating the pain itself.

## Early Alzheimer's Disease study

University College London Hospital have recruited the first participant in the world to a new global phase 1 study for early Alzheimer's Disease (AD).

The study is testing an experimental study drug which is designed to reduce the amount of a protein called ApoE in the brain. Studies have demonstrated that ApoE contributes to worsening of brain health in people with AD. For example, ApoE speeds up the accumulation of abnormal proteins called amyloid and tau in the brain. These proteins cause brain inflammation and damage, and lead to memory loss in people with AD. By reducing the ApoE protein in the brain this drug **may** have an impact on AD.

Professor Catherine Mummery, consultant neurologist and head of Clinical Trials at UCLH and clinical lead for the National Hospital for Neurology and Neurosurgery Cognitive Disorders Clinic, is leading the trial.

Professor Mummery says: *"This tremendously exciting treatment approach is based on the fact that ApoE is a major risk factor for the development of Alzheimer's disease. This is the first drug trialled that directly addresses ApoE-related disease progression using gene silencing methods to lower production of ApoE and therefore reduce levels in the brain. The phase 1 trial is the first step in assessment in patients. The major aim of this Phase 1 study is to investigate safety and tolerability of the drug. Six countries will be supporting the study, with five sites in the UK."*

Currently treatments provide modest clinical benefit for symptoms and against the progression of AD, so there is need for alternative treatments. There is compelling evidence suggesting that once AD has started, ApoE contributes to several key manifestations of the disease.

## MSE Trust Performance in March 2026

The Mid and South Essex NHS Foundation Trust aimed to achieve a target establishment of 15,980 whole-time equivalent (WTE) roles by March 2026. The trust had set an £85M deficit plan 2025-26 and remains in the **national recovery support programme** due to its financial challenges. The trust plans to cut more than 700 additional jobs and will miss performance targets this year due to its "unsustainable" deficit.

The trust's performance metrics include waiting times for elective and cancer treatment, hospital environments and maintenance backlog, and capital investment delays.

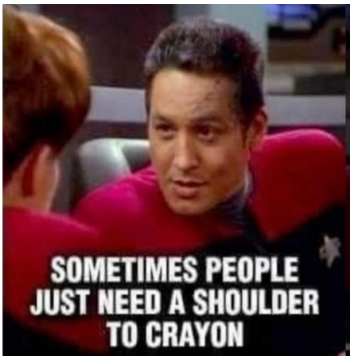
The trust is committed to digital transformation of patient pathways and had allocated £12M for 2025/26 to achieve an 18% reduction in elective waiting times by March 2026.

**68.1%** of patients were seen within four hours in our emergency departments, against the national standard of **78%**. This is a 3.6% increase from February. Nationally the performance was **77.1%** and in East of England it was **76.7%**. A revised Urgent and Emergency Care improvement programme was introduced in March along with increased senior leadership presence in clinical areas which has led to some improvement.

The average time for ambulances to hand over patients is **38 minutes**. This compares to **35 minutes** in East of England and nationally where it is also **35 minutes**.

**63%** of patients received cancer diagnosis results within 28 days in March, against a standard of **79%**. We have a focused improvement programme around cancer diagnosis with the most challenged tumour sites reviewing their lists in order of clinical priority. The new Community Diagnostic Centres are helping to speed up access to tests and scans.

**The oldest computer was owned by Adam and Eve. It was an Apple with very limited memory, just 1 byte, and everything crashed.**



## Members Stories

### Migraine Soother

Derek was diagnosed with Chronic Headache Syndrome about ten years ago and has also been a sufferer of Migraine since the age of thirteen.

Chronic Headache Syndrome means that you have a headache 15 times or more each month for a minimum of 3 months.

Derek unfortunately suffers 24/7 with he’s headaches. They vary in strength throughout the day (and night), from very mild to excruciating. So, it’s more like multiple headaches each day rather than just one continuous headache.

Derek has decided to trial a drug free device called **MigraineSoother™** It is a Hot & Cold compression cap, with a light-blocking mask to help you relax. The gentle compression eases facial tension, migraine and headache. You can use cold therapy to reduce swelling or heat to open your sinuses and relieve the pressure in your head.



It cost £22.00. Derek said, if it helps, then it’s worth it. <https://aurenovastore.com/products/sinussoother-1>

Derek has promised to come back and give us he’s thoughts on it. Fingers crossed it really helps him.

# National PPG Awareness Week

## 31<sup>st</sup> May to June 6<sup>th</sup> 2026

**Patient Participation Week is a significant event that focuses on the importance of patient engagement, communication, and involvement in healthcare decision-making.**

National Patient Participation Week originated in the 1970s as a grassroots effort to bridge the gap between patients and healthcare providers. Early advocates saw the need for patient involvement in decision-making. They recognised that patient feedback could lead to significant improvements in healthcare services. The initiative gained momentum, inspiring healthcare professionals to listen closely to patients. This collaborative approach emphasised transparency and accountability, ensuring healthcare systems were aligned with patient needs.

By the early 2000s, National Patient Participation Week had become a recognised Event, celebrated with activities and discussions that empowered patients.

Today, this event draws participation from thousands of healthcare organisations and patients. It serves as a platform to recognise the pivotal role patients play in shaping their own healthcare experiences and to promote collaborative relationships between patients, healthcare providers, and communities.

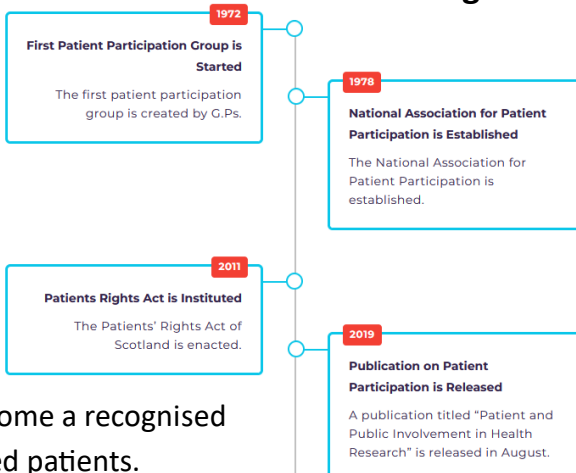


**Together we can make a difference**

Email: -

[rushbottomppg@gmail.com](mailto:rushbottomppg@gmail.com)

**to find out how you can get involved.**



## The struggle to get medication in England

Chloe is a 29-year-old health reporter who has epilepsy and is struggling to get the drugs she needs to prevent life-threatening seizures. And the situation is getting worse!

Her Lamotrigine-based medication is one of hundreds of everyday drugs that are now extremely hard to get hold of in England. She has other medications that she can easily get, but the one that helps her to safely live her life and go to work is the one that she struggles to get access to.

Chloe says, *"I get panic attacks. In the last few weeks, I haven't been able to get the right medications and my seizures came back. I fell and hit my head and have a big scar across my back now from it."*

Access to medicines in England is at its most fragile point in years. People living with heart conditions, stroke risks, eye infections, bipolar and ADHD - to name just a few - are among those unable to get the medications they depend on. Supply problems mean people like Chloe are all too often leaving pharmacies up and down the country without the medication they need. Shortages are caused in part by surging global prices. However, the problem is also being exacerbated by a complicated process of funding medicines in the UK.

The NHS pays pharmacies a fixed price for each medicine it dispenses. Pharmacies are then expected to source the drug for that amount, or less. When the price of a drug rises above what the NHS pays, the medication is placed on the government's price concessions list. Pharmacy owners will then automatically be reimbursed for drugs on the list at the new price. However, when market prices rise suddenly – often above the original tariff and even above the concession price offered - pharmacies end up dispensing medication at a loss. The situation is also putting pressure on pharmacy owners.

The Epilepsy Society has already identified three deaths in the last two years where a lack of medication was a contributing factor.

**B B C News**

<https://www.bbc.co.uk/news/articles/c202jgn3jzro>



Mid and South Essex -  
NHS Foundation Trust

# NEW phone numbers



**Broomfield**  
**0300 443 0001**



**Southend**  
**0300 443 0002**



**Basildon**  
**0300 443 0003**

OR

Dial **0300 443 000** and select option **1** for **Broomfield**, option **2** for **Southend**, option **3** for **Basildon**

## PLEASE NOTE

**THE SURGERY WILL BE CLOSED: -**

- ✗ **MONDAY 4<sup>th</sup> MAY – BANK HOLIDAY**
- ✗ **TUESDAY 12<sup>th</sup> MAY – FROM 1pm “TIME TO LEARN”**
- ✗ **MONDAY 25<sup>th</sup> MAY – BANK HOLIDAY**
- ✗ **TUESDAY 2<sup>nd</sup> JUNE – FROM 1pm “TIME TO LEARN”**



Accurx is a digital triage and online consultation platform that is ideal for those unable to make the 8am telephone queue.

Available from 6.00am

Dr Khan & Partners click here:

<https://accurx.nhs.uk/patient-initiated/F81001>

St Georges Medical Practice click here:

<https://accurx.nhs.uk/patient-initiated/F81142>

If you have any feedback or suggestions for articles in future issues of our **UPDATE** magazine, then please email us.

[PPG-RushbottomLane@gmx.com](mailto:PPG-RushbottomLane@gmx.com)

EST. 2025  
MARKING 12<sup>th</sup> AS  
FIBROMYALGIA AWARENESS DAY

**CELEBRATING OUR 1<sup>st</sup> BIRTHDAY & FIBROMYALGIA AWARENESS DAY**  
**THE BURRELL WELLNESS WAVE FUNDRAISER**  
AN EVENING OF RESTORATION, RESONANCE AND COMMUNITY

**GUEST SPEAKER:**  
SAM MANNING FROM SERENIFY WELLBEING

**MINI WELLBEING TREATMENTS**  
(VARIOUS STALL HOLDERS)

**SOUND BATH FINALE**  
WITH EMMA HOLMES - SOCIAL PRESCRIBER

**DATE:** 12TH MAY 2025 | **TIME:** 18:00 – 20:00 | **LOCATION:** THE BURRELL WELLNESS CENTRE, BENFLEET, SS7 4BS

**FREE PARKING • REFRESHMENTS SUPPORT BURRELL COMMUNITY GROUPS AND FIBROMYALGIA SUPPORT SERVICES**

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