

Dying patients 'denied pain relief' by nursing crisis

By **Laura Donnelly** HEALTH EDITOR

NHS rationing is leaving dying patients to suffer in pain, a leading think tank has warned.

A report by the King's Fund found that people at the end of their life are being left for hours without pain relief as a result of nursing shortages.

The think tank looked at four areas where rationing has affected patient care – sexual health services, district

nursing, planned hip operations and neonatal care. It said that in some areas there is “clear evidence that access to and quality of patient care has suffered”.

District nurses support the care of people at home including those who are housebound, suffering a long-term illness or at the end of their life.

The report found that services in this area are under “significant financial pressure”, with funding either static or reducing, despite rising demand. The number of district nurses

fell by almost half between 2000 and 2014, and dropped by a further 15 per cent between 2014 and 2016 for full-time posts.

One hospice manager told the King's Fund: “The district nurses at night are not able to give effective response times. You can wait up to eight hours ... for patients experiencing pain and discomfort in the last two to three days of their life it has a massive impact.”

The report also examined common procedures such as hip surgery. It

found that the number of patients waiting more than 18 months for orthopaedic operations such as hip and knee surgery has risen by 45 per cent in just one year.

The study says patients are being forced to wait longer for some of the most common procedures amid “unsustainable” rising pressures on services. It reveals that the average waiting times for a hip operation is now 14 weeks – a week longer than it was a year ago – with more than

500,000 patients on the waiting list for trauma and orthopaedics. The analysis shows 62,577 patients waiting more than 18 months last October, a rise from 43,289 a year before. The King's Fund study examined the impact of financial pressures on the NHS in a number of aspects of patient care.

Lead author Ruth Robertson said: “Longer waiting times for hospital treatment and restrictions to operations are just one small part of the picture. Our research shows that services like dis-

trict nursing and sexual health, where we found evidence that access and quality are deteriorating for some patients, have been hardest hit by the financial pressures facing the NHS.”

A Department of Health spokesman said: “We're investing £10 billion to fund the NHS's own plan for the future, supported by an immediate cash injection of £2 billion for social care and £100 million for A&E to help to improve care in the community and ease the pressure on hospitals.”

Blueberries can beat baby blues, claim scientists

Oliver Moody Science Correspondent

New mothers can ward off the sadness and mood swings that often follow the birth of a child by taking three dietary supplements including blueberry juice, a study suggests.

In the first week after giving birth, about three quarters of women experience the baby blues, which usually fade within days. Those with severe cases are about four times more likely to go on to have post-natal depression, which affects one in eight mothers.

Scientists in Canada say the blues can be prevented by giving women a handful of pills containing the raw materials that their brains need to make up for the chemical changes they go through after the end of pregnancy.

Two doses of concentrated blueberry juice, which helps to prevent oxidation damage to the brain's messenger chemicals, as well as two compounds that are essential for making those chemicals, can "virtually eliminate" post-partum melancholy, according to a small clinical trial.

The researchers argue that the "nutraceutical" treatment could also be an effective way of protecting some women from post-natal depression, although this has yet to be demonstrated.

Post-partum blues are thought to be largely the indirect result of a sudden decline in a new mother's sex hormones. As these chemicals dissipate, there is a corresponding rise in the levels of a brain enzyme known as monoamine oxidase A, which breaks down several molecules linked to happiness and motivation, including dopamine and serotonin.

A group led by Jeffrey Meyer, from the Centre for Addiction and Mental Health in Toronto, speculated that giving women the ingredients might banish the blues.

They recruited 41 pregnant women in their late 20s and early 30s, roughly half of whom were about to give birth for the first time. Starting three days after the births, the researchers gave

half of the women two blueberry drinks, 2g of tryptophan and 10g of tyrosine. The rest were not given any supplements.

The results, in the journal *PNAS*, indicate that the treatment worked: the depression scores for most of the mothers in the control group rose swiftly after birth, while those in the nutraceutical group barely changed.

Scientists suggested that this method could work for other psychiatric conditions and potentially prevent many cases of post-natal depression long before diagnosis.

"Developing successful nutrition-based treatments, based on neurobiology, is rare in psychiatry," Dr Meyer said. "We believe our approach also represents a promising new avenue for creating other new dietary supplements for medicinal use."

Gertrude Seneviratne, head of the perinatal faculty at the Royal College of Psychiatrists, said that the data was promising but came with several caveats. The study was relatively small, for example, and the women also knew whether they were getting the supplements or not, making it hard to tell how much of the difference between the groups was down to the placebo effect.

It was also unlikely that post-natal depression could be staved off altogether with a few capsules of anti-oxidants and amino acids, according to Dr Seneviratne.

There are thought to be at least two forms of the condition, one beginning about three or four weeks after birth and largely linked to sleep deprivation and biochemical changes, while the other tends to become noticeable about a month later and is often blamed on the other social and psychological stresses.

Nevertheless, Dr Seneviratne said the researchers appeared to be on the right track. "It's quite a good study and one that people should have done years and years ago," she said. "It's a good biochemical pathway so it's definitely tapping into the biology of what happens."