



# THE ALL PARTY PARLIAMENTARY GROUP FOR GAS SAFETY

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## NOTES OF THE MEETING HELD ON 23 APRIL 2008

### PANEL

- Dr Ed Walker, West Yorkshire Accident-and-Emergency specialist and advisor to CO Awareness
- Dr Louise Newport, Scientific Policy Manager, Air Pollution, Climate Change, Noise & Nanotoxicology Radiation, Chemical & Environmental Hazards Health Improvement & Protection Division, Department of Health
- Isabella Myers, Air Pollution Unit, Health Protection Agency

### ATTENDING

Barry Sheerman MP, Co-Chair  
Scott Darroch, CORGI  
Leigh Greenham, CoGDEM  
Neil Coussens, Masimo  
Chris Bielby, British Gas  
David Wilson, GISG  
Dan Caesar, CORGI  
John Walsh, Fireangel Ltd  
Neil Wallington, Capita  
Trevor Smith, Bedford  
Agatha Ferrao, Department of Health  
Paul Overton, CO-Gas Safety  
Alex Trotter, CO-Gas Safety  
John Moseley, Downstream Gas  
Lynn Griffiths, CO-Awareness  
Russell Hamblin-Boone, Energy Retail Association  
Eleanor Turner, Secretariat, All Party Parliamentary Gas Safety Group  
Samuel Fox, Secretariat, All Party Parliamentary Gas Safety Group

Maria Miller MP, Co-Chair  
Kelly Clarke, CORGI  
Andrew Humber, London Ambulance Service  
Ruth Ruggles, Health Protection Agency  
Blane Judd, IPHE  
Keith Needham, CORGI  
Nigel Dumbrell, CORGI Trust  
Ross Bates, Fireangel Ltd  
Andy Stoll, Capita  
Andrew Whitcombe, Department of Health  
Zoe Forman, CoGDEM  
Kairen Sanderson, ROSPA  
Stephanie Trotter, CO-Gas Safety  
Gareth Hughes, CO-Awareness  
Harry Rogers, CO-Gas Safety  
Jenny Lynch, Secretariat, All Party Parliamentary Gas Safety Group  
Sarah Lee, Secretariat, All Party Parliamentary Gas Safety Group

### 1. WELCOME

Maria Miller MP welcomed all, explaining that this meeting would be looking at awareness of carbon monoxide (CO) among medical professionals. Maria Miller MP introduced the panel, and said that each member of the panel would give their views on current levels of awareness among medical professionals and the session would then be opened up to wider questioning.

## **2. PRESENTATIONS FROM THE PANEL**

### **Dr Ed Walker**

Dr Ed Walker was the first of the panel members to present, and explained that he works in A&E at Dewsbury hospital and has been involved in work relating to CO for ten years. Some of the past activity he has been involved in has included writing about medical professionals' awareness of CO in the British Medical Journal, and more recently acting in a voluntary capacity as medical advisor to CO Awareness.

Dr Walker said that there is a 'baffling resistance' to learning more about CO amongst medical professionals. Dr Walker said that whilst if you gave the list of recognised symptoms to a fireman he would immediately think of CO, medical professionals don't seem to think in the same way. As such, he has been involved in a variety of activities to try and raise awareness of CO amongst medical professionals, including setting up a website for medics with an online tutorial, which will go live later this month. Dr Walker pointed out to the Group that there is no such thing as a 'national curriculum' for medical training, making the problem very difficult to solve without utilising a number of different methods.

Blane Judd of the Institute for Plumbing, Heating and Engineering asked whether Dr Walker thought greater use should be made of the materials on CO that are used by the fire industry, to which Dr Walker said that there could be some merit to this approach.

Stephanie Trotter of CO-Gas Safety asked whether the website Dr Walker referred to was available to the public, to which he replied that it was, and whether it dealt with other toxins. Dr Walker replied that other toxins were not his area of expertise, and that he was concerned that too many mixed messages on other toxins could dilute the overall message. He added that if you spot the symptoms of CO then this can act as a flag to the medic to look for high levels of other toxins.

Maria Miller MP asked who could access the online module, to which Dr Walker replied that anyone with a GMC number could gain access, but that it is primarily targeted at A&E practitioners and GPs. Blane Judd pointed out that it is important to ensure that trainee doctors are also aware of the symptoms and asked whether medical students can access the online module. Dr Walker said that he was fairly sure that they could, but that he would double check.

### **Isabella Myers, Health Protection Agency**

Isabella Myers explained that she works in the Air Pollution branch of the Health Protection Agency, and that CO only forms part of a much larger remit. Dr Myers said that the Health Protection Agency has recently worked on a number of initiatives relating to increasing awareness of CO amongst medical professionals, including: a seminar at the Royal Society of Medicine, funded by the CORGI Trust; using the information from this seminar to successfully bid for funding from the DH for research into this area; running a training workshop on CO; the creation of the HPA CO Action Card; the development of a diagnostic algorithm which was piloted in 2007 and which should be made available later this year; working with the DCSF on CO information for schools; and targeting smoking cessation clinics.

Gareth Hughes of CO Awareness asked whether the HPA had done any research into the products being emitted from appliances, to which Ms Myers asked whether he had seen Ben Croxford's research. Gareth Hughes said that he was interested in finding out about research into toxins other than CO. Ms Myers said that the HPA does not go out and test appliances and that her primary focus was on CO. Ms Myers echoed Dr Walker's comments about the potential to dilute the message by focussing on other toxins too heavily.

In response to a question about the work in smoking cessation clinics, Dr Ruth Ruggles of the HPA said that in cases where high levels of CO were found in individuals, they had suggested to the patient that they check their appliances. As a result, they had seen a number of cases where the patient had had their appliances tested and found a fault.

#### **Dr Louise Newport, Department of Health**

Dr Newport explained that she was from the Air Pollution Unit in the Department of Health, and that CO is a part of her remit. Dr Newport gave an overview of the work that the Department of Health is doing in this area, including: organising stands at two key medical conferences; including CO in the Chief Medical Officer's update in November 2007; calling for research to investigate the incidence of CO poisoning, health outcomes and patient experience; providing funding to leading national voluntary organisations; including information in CO in the 'Keep Warm, Keep Well' booklets; and providing information for NHS direct.

### **3. GENERAL DISCUSSION AND QUESTIONING**

Maria Miller MP thanked the panel for their contributions, and asked Dr Walker what, in his view, was the main barrier to medical professionals having greater awareness of CO. Dr Walker replied that he thought it is a type of attitude that is hard to change, and that in his view one of the best ways of ensuring that more correct diagnoses are made is to make testing appliances available in every A&E department and GP surgery.

Maria Miller MP asked what type of equipment is most reliable. Dr Walker said that two main types of detector are used – one that is placed on the patient's finger and one that analyses the patient's breath. Both are easy to use, although breathometers typically come at a much lower cost. A breathometer typically costs £200 - £300, whereas a finger monitor costs in the region of £2,500, but the benefit is that it can be used on unconscious patients.

Gareth Hughes (CO-Awareness) asked whether the victims who visit doctors with symptoms of CO poisoning are tested for other toxins, to which Dr Newport said that this was a clinical decision and dependant on local funding. Paul Overton, father of Katie Overton who died from carbon monoxide poisoning, stated that if you treat patients with Hyperbaric Oxygen Therapy and they also have other toxins in their systems, this could do more harm to the patient.

Paul Overton also noted that Lloyds Pharmacy is currently offering to test their customers for high levels of carbon monoxide, but questioned why it is up to pharmacies to do this rather than doctors. Isabella Myers welcomed the initiative taken by Lloyds Pharmacy, saying that it has been very useful in terms of finding new cases of CO poisoning. She also noted that many people don't go to their GP, but prefer to visit their local pharmacy when they are unwell. Louise Newport echoed these sentiments, welcoming the fact that a commercial company had taken a lead on this issue.

Andy Humber from the London Ambulance spoke, saying that in the last four to five months they have been sending their crews out with CO detectors. They had found that 13 crew members had been exposed to high levels of CO when visiting patients housing on five occasions during this period. Maria Miller MP asked when they would be reporting the findings of this trial, to which Andy said that they hope to report back in December 2008.

Following further discussion on the difficulties associated with communicating messages effectively to medical professionals, Barry Sheerman MP asked each member of the panel what they would do to improve the situation.

Isabella Myers said that she would like to raise political awareness of the issue, and also have additional research into CO to further our understanding of its mechanisms. Ms Myers said that research foundations need to be funded, and further incentives need to be provided to encourage research of a high quality. Barry Sheerman asked if Isabella Myers could provide a note to the Group on which research councils she would recommend, to which Ms Myers said that she would.

Louise Newport said that she would like to see more statistics on the number of people being poisoned, to help build up a better profile.

Ed Walker said that he would put testing equipment in every GP's surgery and A&E department.

Trevor Smith from Bedfont said that his company manufactures breath CO analysers, and that there are thousands of analysers already in surgeries and hospitals across the country that are designed to aid smoking cessation. He said that the medical professionals simply don't realise that the equipment can also be used for testing for CO. Mr Smith said that this had been noted in the CMO's newsletter over ten years ago, but that they had not seen any increase in sales as a result of this communication.

Nigel Dumbrell of the CORGI Trust provided further detail on the work that Lloyds Pharmacy is doing in conjunction with the CORGI Trust, noting that this had helped to identify a number of cases of people who were being exposed to CO without realising it. Dr Ruth Ruggles of the Health Protection Agency made a plea for any additional cases to come forward so that they can have a better picture of the extent of the problem, and said that she would be contacting Andy Humber's team at the London Ambulance Service for more details. Maria Miller MP asked whether Lloyds are monitoring the number of cases they have seen, but a representative for Lloyds Pharmacy was not available to provide details. It was agreed that the Group would endeavour to find out whether the results of this work will be made available.

Alex Trotter of CO-Gas Safety asked whether any breath monitoring was taking place of other products of combustion such as Manganese. Isabella Myers replied that they are currently doing research into CO, which may lead to further research being undertaken into other products of combustion, depending on the results.

Gareth Hughes of CO-Awareness commented that the All Party Parliamentary Gas Safety Group should deal with all gases, not just CO, calling on the gas industry to provide further information on the other toxins associated with the incomplete combustion of gas. Chris Bielby of British Gas stated that he had previously invited Gareth Hughes to Advantica's research establishment, who are leading the research in this area.

In response to a question from Maria Miller MP, Dr Louise Newport said that if the research that is currently going through the tender process raises questions about other toxins, the DH will look at whether a second stage of the research should be commissioned into this area.

Isabella Myers noted that there are difficulties associated with testing CO on animals, to which Stephanie Trotter said that they should be testing the people who have already been exposed. Mrs Trotter also noted that HSE data is only confined to gas so is not very useful, and discussed the difficulties associated with getting tested for other toxins on the NHS. Dr Ed Walker agreed that most NHS labs would not be able to test for evidence of toxins such as Manganese.

Following discussion over the need for CO tests to be carried out routinely in post mortems, Louise Newport said that she would raise this issue with the Pathology Tsar.

The effectiveness of hyperbaric oxygen therapy was discussed, and Isabella Myers pointed out that NHS Quality Improvement Scotland is undertaking a systematic review of the clinical and cost effectiveness of this treatment. The review will report in later in 2008 and, once completed, NICE will be considering whether hyperbaric oxygen therapy is a suitable subject for appraisal within its own work programme.

Leigh Greenham of the Council for Gas Detection and Environmental Monitoring (CoGDEM) said that shortly a new carbon monoxide alarm would be on the market which will be triggered by much lower levels of CO over a period of time. This is designed to ensure that consumers are protected from long term low level CO poisoning.

As a final point, Stephanie Trotter called for a levy on the energy industry to fund further activity on raising awareness of CO.

Maria Miller MP rounded up the discussion, thanking everyone for attending a fascinating and very insightful meeting. As a next step, the Group will be shortly calling for written evidence on this subject which will be used to develop a report issuing recommendations for how to improve awareness of CO among medical professionals. The report will be published in the autumn.