

## The Royal Hospital

Many of you born and bred in Wolverhampton will have received treatment or visited the Royal Hospital. Most people will have memories and talk nostalgically of this hospital which sadly closed in 1997.

## A Brief History of The Royal Hospital – Roy Stallard

In the mid eighteen forties, in essence prior to Nightingale, a group of Victorian philanthropic businessmen in Wolverhampton were determined that the town was worthy of a hospital as an alternative to a six bedded dispensary.

Duty was done and a total of some £18,000 was raised which purchased land from the Duke of Cleveland, and a fine portico fronted hospital with 84 beds was built with the residual £14,000 plus.

The hospital opened its doors on January 1st 1849 to “patients who are such unable to pay for medicine and advice and are destitute of funds to make provision for them”. It was run by a non-stipend Board of Governors and was totally reliant for its complete running costs on charity. By the turn of the century, the hospital was recognised for training doctors and nurses and had established a pathological laboratory (albeit in a shed), a steam laundry, medical library, hospital chaplaincy, electricity and a new kitchen. By the year 1912 the hospital had developed a 53 bed nurses home, a new wing of beds dedicated to King Edward VII, its own motorised ambulance provided by Wolverhampton Police Force, an electric lift and a new laboratory.



During the First World War, much use of its facilities was made for the war wounded from France. Lady doctors were used for the first time, and many of the staff themselves gave war service. In the ten years immediately after the Great War the hospital added many new departments and wards, including operating theatres and VD clinics.

The hospital was visited by the Prince of Wales and granted its Royal Charter. By 1928 it became known as the Royal Hospital, losing one of its former names of Wolverhampton and Staffordshire Hospital.

In the late thirties a complete new wing of five floors containing 120 beds and a fine swimming pool were added. By the forties the hospital had developed into an excellent general hospital encompassing all the necessary medical specialities and facilities, including cancer treatments. During the Second World War it again received many war wounded. In 1948 it was handed over to the NHS with its books in the black and having been developed and run for 100 years on the charity and zeal of Wolverhampton's businessmen and charities.

During the fifties, in addition to its excellent male and female Nurse Training School of some distinction, it established both Physiotherapy and Radiotherapy Schools of similar note. Its quality of care and training of staff became legion throughout the UK with increasing numbers of overseas medical, nursing and physiotherapy students arriving. In the early fifties a Nurses League, Hospital Friends and Nurses Christian Movement were established. Considerable improvements to patient services were seen, and a new kitchen was built.

Throughout the sixties and seventies a new theatre suite and ITU facility, plus a coronary care unit were established; however talk had begun to move the hospital's facilities to the out of town New Cross Hospital site of some 60 acres, albeit a former workhouse. This decision was finally enacted, and the Royal Hospital closed on Tuesday 24th June 1997 after more than 148 years of care and dedication to the citizens of Wolverhampton, thus ending a centre of excellence in the epicentre of Wolverhampton Millennium City.

# Wolverhampton Prostate Cancer Support Group

## Newsletter December 2011

Welcome to the latest newsletter for the Wolverhampton Prostate Cancer Support Group. Meetings will continue for 2012 at the regular time of 1.30pm to 3.30pm at the Community Centre, Marsh Lane, Wolverhampton. Please be aware that the community centre is being rebuilt at present so we have moved to the building opposite. Thank you to everyone who continues to support the group and attends the meetings. Please continue to contribute to the raffles, we rely on monies raised to fund the meetings. 2012 will mark the 10 year anniversary of the support group so we will endeavour to make this a special year and we let you know of any special events planned.

## New Programme for 2012

Here is the new programme for the next year's meetings. If there are any subjects of particular interest to you that do not appear on the programme then please let Clare Waymont or Alan Morris know.

### Monday 30th January 2012 – RAFFLE

Complimentary Therapy  
(Debbie Tolley – Complimentary Therapist)

### Monday 19th March 2012

Radiological Staging of Prostate Cancer  
(Mike Collins – Consultant Radiologist)

### Monday 14th May 2012 – RAFFLE

My experience of Robotic Surgery  
(Mike Fitchett – Patient)

### Monday 9th July 2012

Robotic surgery – one year on  
(Mr Cooke – Consultant Urologist)

### Monday 3rd September 2012 – RAFFLE

Update on Prostate Cancer Management  
(Brian Waymont – Consultant Urologist)

### Monday 22nd October 2012

The History of the Royal Hospital  
(Roy Stallard)

### Monday 10th December 2012 – RAFFLE

Living with Prostate Cancer and the Effects of Treatment  
(Clare Waymont – Urology ANP)

## 10 Year Anniversary for Support Group

2012 will mark the 10 year anniversary of the support group so we will endeavour to make this a special year. We are planning an evening of celebration sometime in May and Alan Morris is organising this. It would be lovely if you would join us. If you would like further details then contact Clare Waymont or speak to Alan at one of the group meetings.

## Robotic Surgery -

## The First in the West Midlands

The Trust took delivery of its new surgical robot in February. A first for the West Midlands region, its first procedure was carried out at the end of March.

“This is a truly exciting and major step forward for the Trust, which we expect others to follow”, explained Peter Cooke, Prostate Cancer Specialist. “Using the Da Vinci Robot opens up a whole new world of technical innovation and accuracy that is unheard of using the more traditional methods of surgery.”

The Da Vinci Robot helps surgeons provide less invasive surgery, giving them the ability to see far greater detail during operations. It offers high definition 3D vision and improves wrist movements the human hand is not capable of achieving.

“The operation went without a hitch and took around four hours to complete, so I am absolutely over the moon”, said Mr Cooke. “Keyhole surgery is already common place for many of our procedures, so this was a natural progression for us. Myself and the theatre team underwent an intensive three month training programme and had a dress rehearsal the day before, so performing the surgery became a seamless transition”.

67 year-old patient Philip Hansford, from Romsley, who was up and enjoying a cuppa following his operation said: “I had absolute confidence in Mr Cooke and his team. I had no concerns about being his first patient and I am so thankful to everyone at New Cross Hospital”.



“Wishing you all a very happy new year for 2012 from Alan, Clare, Jenny, Helen and everyone in Urology”





## Bridgnorth Fundraising Event

(written by Karen Sawbridge)

Being a motley crew of friends & known as "Victor's Great Balls of Fire" for our charity walk, we set off at 10 am on Monday 30th May 2011 on the historical 22 mile walk from Bridgnorth High Street to the highest point in the West Midlands, that of the Brown Clee Hill, returning in a loop back to Bridgnorth High Street, some 6 hours later.

The weather conditions on the day of the walk, were the worst ever known, in the 44 years of the charity walk having taken place (the walk takes place annually on Whitsun Bank Holiday Monday), with horrendous driving rain, but this wasn't to deter us or the other 951 walkers who finished the walk (969 walkers started the walk).

However, our mission was not just to finish the walk, but to raise the most money we could, for the Urology Department at New Cross Hospital, by way of a huge thank you from all of the men in Bridgnorth who have received treatment for prostate cancer over the last 2 years, due to the Bridgnorth Lions PSA testing. 18 men are now receiving treatment at the Urology Department at New Cross Hospital as a consequence of this testing. We would encourage all men over 50 years of age to get tested and the next annual PSA testing is on 31st October 2011 in Bridgnorth.

In total, all of the 2011 walkers raised £120,000 and our own team effort enabled us to provide a cheque for £3,190 for the Urology Department at New Cross Hospital. Indeed, our team achieved the honour of "Best Team Effort" and Victor Flavell was presented with a Trophy and one team member, Karen Sawbridge raised the most money of all the walkers taking part and she was presented with a Cup.



## The Prostate Cancer Charity comments on new Government commitment to prostate cancer

The Prostate Cancer Charity comments on a new announcement from the Department of Health that prostate cancer will be included in the next round of National Clinical Audits, which for the first time will mean that prostate cancer services, the experiences of men with prostate cancer and the outcomes of different treatments for the disease will be audited in England and Wales on a large scale, monitored and made available to the public.

Owen Sharp, Chief Executive of The Prostate Cancer Charity, explains: "It is extremely pleasing to see that the Charity's call for prostate cancer to be included in the next round of clinical audits has been heeded. This decision stands as a testament to

the need for better information about the quality of prostate cancer services and care provided in England and Wales. We are encouraged that the Government has shown a firm commitment to making this happen.

"Currently, we still do not know the best way to treat the majority of men diagnosed with early forms of the disease. As well as giving clinicians the opportunity to learn more from one another and compare their performance, this clinical audit will allow us to better understand the long-term outcomes of the different treatments available for the disease. This will help clinicians and men make informed decisions about the best treatment options for them, and will lead to vital improvements in the quality of care men with prostate cancer receive.

"We know from the success of previous audits for other common cancers, that improvements in the quality of services and care for men with prostate cancer should not be far behind. The audit must get underway as swiftly as possible and we urge the Government to quickly confirm when it will begin so that better quality care can be rapidly delivered to men affected by the disease. We look forward to actively supporting the implementation of this audit over the next three years."

## The Prostate Cancer Charity comments on new research into the association of the contraceptive pill and prostate cancer

The Prostate Cancer Charity comments on new research into the association of the contraceptive pill and prostate cancer, from the International Agency for Research on Cancer (IARC) and the United Nations World Contraceptive Use, published in BMJ Open.

Dr Kate Holmes, Research Manager at The Prostate Cancer Charity, said: "This study does not present a strong evidence case for an association between the use of the contraceptive pill and prostate cancer, nor does it intend to. It is intended to explore the possibility that release of endocrine disruptive chemicals (EDCs) into the environment, a process which is not unique to the pill, might impact on the incidence of the disease. However, for all of the 87 countries in the study, there is no information on the level of these chemicals in the environment, with the focus on the contraceptive pill as the sole source, which we know is not the case.

"Other types of contraceptive use are investigated too, to rule out the potential that increased levels of sexual activity are related to prostate cancer, or that a sexually transmitted infection could be linked to the disease. However, it would not be a surprise that countries which have a higher use of the contraceptive pill also have a higher detection level of prostate cancer, as this would be a reflection of a higher quality health care system in that country.

"While this study raises some interesting questions about the presence of EDCs in the environment, it does not contribute to our overall understanding of the development of prostate cancer."

## New magnetic treatment to target prostate cancer revealed

Scientists developing work funded by The Prostate Cancer Charity are taking an important step forward in tackling the disease by developing a new magnetic treatment to accurately target prostate cancer cells, according to new research presented at the National Cancer Research Institute (NCRI).

The research, which was carried out by scientists at the University of Sheffield, takes a novel approach to treating the disease by using magnetic nanoparticles to deliver cancer fighting white blood cells - known as macrophages - to the heart of prostate tumours.

By delivering these macrophages - which have been charged with a new type of gene therapy to tackle the disease - into the core of the cancer, treatment can be focused on the tumour itself whilst sparing the surrounding healthy tissue.

Lead author, Dr Jay Richardson, explains: "We know that when prostate cancer develops, a type of white blood cells called macrophages flock to the scene. Previous research has allowed us to harness these cells to deliver cancer fighting therapies directly into the cancer cells. Now, with some magnetic assistance, we are able to refine this method so that the macrophages reach and deliver the therapy to prostate cancer cells only, leaving healthy cells unharmed."

To improve the effectiveness of this new treatment, the researchers discovered that when magnetised, the number of macrophages travelling only into prostate cancer cells under laboratory conditions dramatically increased. The greater the number of macrophages that were delivered into the cancer cells, the greater the number of cancer cells that were destroyed during treatment.

Due to the treatment's ability to seek out prostate cancer cells, the authors are hopeful that it could be particularly useful in tackling the advanced form of the disease, where cancer cells have migrated to other parts of the body, as well as the cancer contained within the prostate gland.

Plans are now underway to continue this research in mice to see if the study's success can be replicated outside of the petri dish.

Owen Sharp, Chief Executive of The Prostate Cancer Charity, explains: "Although in its early stages, this innovative new research has produced some particularly exciting foundations for the development of a new treatment to tackle the disease. Through utilising new technology, the researchers have been able to design a new treatment which has the potential to deliver cancer killing cells to the very heart of a prostate tumour. This study is particularly exciting, as it could lead to a new treatment for men living with an advanced form of the disease, where the cancer has spread to other parts of the body, who have very few treatment choices open to them."



## Behind the Scenes

All your cancer care and treatment planning is required to be discussed by the urology multidisciplinary team, not just by your individual consultant. The team meets every Friday afternoon to discuss all new cancer cases and reviews any scans or results. All your urologists are members of the team, along with the nurse practitioners. The radiologists, oncologists and pathologists are also present each week. Most of you will never meet a lot of the team but each person's role is very important. We are very lucky to have Dr Collins and Dr Qaiyum as our radiologists and they give the team information about the stage of cancers which then allows the team to decide on a treatment plan. This treatment plan can then be discussed with you by your Consultant. Dr Collins has been a radiologists at New Cross since 1994 and Dr Qaiyum has worked within the trust since 2001.