

DR SANJEEV SHARMA

**MBBS MD MRCP (London) FHEA
FRCP (Endocrinology & Diabetes)**

***CONSULTANT
ENDOCRINOLOGY & DIABETES***

***DEPUTY DIRECTOR – RESEARCH &
DEVELOPMENT***

***PRINCIPAL INVESTIGATOR – CLINICAL
TRIALS***

**IPSWICH HOSPITAL
EAST SUFFOLK & NORTH ESSEX NHS
FOUNDATION TRUST**

May 2024

CURRICULUM VITAE

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<i>GMC no.</i>	6104205	
<i>Primary education</i>	Carmel Convent (Digboi, India)	1979 – 1989
	Cotton College (Guwahati, India)	1989 – 1991
<i>Higher education</i>	AIIMS (New Delhi - India)	1991-1996
<i>Qualifications</i>	MBBS	1996
	Diploma in Diabetes	2001
	MD (Internal Medicine)	2002
	DNB (Internal Medicine)	2003
	MRCP (UK), MRCP (London)	2006
	PG Cert in Medical Education	2012
	FHEA	2013
	MRCP (Endo/Diab)	2015
	FRCP (Endo/Diab)	2017
<i>Registered for</i>	PhD – Univ of Warwick	2022
<i>CCT Date</i>	1 st January 2015	

PRESENT POST(S)

Consultant (substantive) in Endocrinology & Diabetes and General Medicine

June 2015 onwards

Ipswich Hospital (ESNEFT)

Prof G Rayman, Dr P D Fowler, Dr C Parkinson

Dr D G Morris, Dr Z Banu

- A 552 bedded district general hospital serving a population of 390,000 in East Suffolk
- The on-site Diabetes department forms a part of the Ipswich Integrated Diabetes Service offering specialist diabetes services to around 3500 patients in secondary care
- This is a full time 10 PA post with both outpatient sessions related to Endocrinology & Diabetes and inpatient responsibilities. Additional 4.75 PA's have now been added due to additional services
- I form a part of a group of 4 consultants who provide inpatient services in diabetes and general medicine including specialist diabetes foot service and in-patient referrals. Currently, this is for 2 weeks per consultant rotating every 8 weeks (Consultant of the week).
- I am also a part of the diabetes inpatient management group providing cross-cover to a group of 4 diabetes inpatient nurses
- I run the only specialist painful diabetes neuropathy clinic in the East of England
- Lead – diabetes pump service at Ipswich Hospital
- General medicine on-call commitments are 1:16.5
- Weekly outpatient clinics:
 - 2 general diabetes clinics
 - 1.5 endocrinology clinics
 - Alternate week diabetes foot clinic
 - Once a month insulin pump clinic
 - Once a month adolescent diabetes clinic
 - Once a month lipid clinic
- Educational commitments include teaching of core medical trainees, educational sessions for year IV/V/VI Cambridge university and Stage IV/V University of East Anglia medical students and endocrinology/diabetes training for GP's on their training days
- Other administrative responsibilities:
 - Chair of Diabetes medical management group
 - Member of ESNEFT/IESCCG/NEECCG/WSCCG Medical Optimisation committee
 - Chair of Rushmere Medical Day unit for outpatient care services
 - Audit and Quality Improvement lead in Diabetes & Endocrinology at ESNEFT

Principal Research Investigator – Diabetes Trials unit

June 2015 onwards

Ipswich Hospital (ESNEFT)

Prof G Rayman, Dr P D Fowler, Dr C Parkinson

Dr D G Morris, Dr Z Banu

- Research responsibilities:
 - Currently PI at the Diabetes research unit for 18 trials (10 commercial and 8 portfolio. These trials cover a wide portfolio of specialities including diabetes, renal, lipid, cardiovascular outcomes, heart failure, painful neuropathy, cirrhosis and foot disease
 - Previous experience includes important trials like TRIUMPH, SURMOUNT-MMO, REDEFINE-3, PROXYMO-ADVANCE, ZEAL, SURPASS, ESSENCE, FLOW, LEADER, ELIXA, CANVAS-R, EMPA-REG, ONSET - 1 & 2, SUSTAIN, SURPASS-CVOT, ESSENCE, OPTION-DM etc.
 - Fully equipped Research unit dealing with studies ranging from Phase 1b to Phase IV
- Academic research:
 - Ongoing research related to small fibre neuropathy using methods of small fibre function (LDI_{FLARE}) and structure (corneal confocal microscopy)
- Research supervision:
 - I also supervise a Research Associate who has taken over my previous role in academic studies related to small fibre neuropathy

Deputy Director – Research & Development

November 2020 onwards

East Suffolk & North Essex NHS Foundation Trust

Dr Shane Gordon, Dr Richard Smith

- Deputy Director of Research at ESNEFT leading on the ESNEFT research strategy and liaisons with academic units
- Chair of the Research Funding group
- Deputy chair of Research governance
- Lead – Associate PI programme
- Key stakeholder in the R&D research strategy and innovation committee for ESNEFT

PREVIOUS POSTS

Locum Consultant in Endocrinology & Diabetes and General Medicine

Jan 2015 – Jun 2015

Ipswich Hospital (ESNEFT)

Prof G Rayman, Dr P D Fowler, Dr C Parkinson

Dr D G Morris

- A 552 bedded district general hospital serving a population of 390,000 in East Suffolk
- The on-site Diabetes department forms a part of the Ipswich Integrated Diabetes Service offering specialist diabetes services to around 3500 patients in secondary care
- This is a full time 10 PA post with both outpatient sessions related to Endocrinology & Diabetes and inpatient responsibilities.
- I form a part of a group of 4 consultants who provide inpatient services in diabetes and general medicine including specialist diabetes foot service and in-patient referrals. Currently, this is for 2 weeks per consultant rotating every 8 weeks (Consultant of the week).
- I am also a part of the diabetes inpatient management group providing cross-cover to a group of 4 diabetes inpatient nurses.
- General medicine on-call commitments are 1:14.5
- Weekly outpatient clinics:
 - 2 general diabetes clinics
 - 1.5 endocrinology clinics
 - 1 diabetes research clinic
 - Alternate week diabetes foot clinic
 - Once a month insulin pump clinic
 - Once a month adolescent diabetes clinic
- I am also a sub-PI for the Diabetes research unit and am currently involved in 6 industry trials in diabetes and foot disease
- I also supervise a Research Associate who has taken over my previous role in academic studies related to small fibre neuropathy
- Meetings attended are weekly vascular MDT's, departmental meeting and grand rounds and biweekly pituitary MDT and M&M meetings
- Educational commitments include teaching of core medical trainees, educational sessions for Stage III Cambridge university medical students and endocrinology/diabetes training for GP's on their training days

Acting-up Consultant in Endocrinology & Diabetes and General Medicine

Oct 2014 – Dec 2014

The Ipswich Hospital NHS Trust, Ipswich
Dr G Rayman, Dr D G Morris Dr P D Fowler,
Dr C Parkinson

- This post was ratified by GMC and JRCPTB for the last 3 months of my Specialist Registrar training tenure
- This was a full time 10 PA with responsibility for inpatient management for General Medical and Diabetes and Endocrinology patients with outpatient sessions
- Inpatient sessions in wards were for 2 weeks every 4 weeks as part of a rota with 3 other consultants providing both diabetes and general medicine in-patient services along with managing in-patient referrals for diabetes and endocrinology
- Provided cross-cover to the inpatient diabetes in-patient management group
- General medicine on-call commitments were 1:14.5
- Weekly outpatient clinics:
 - 1 general diabetes clinic
 - 1 endocrinology clinics
 - 1 diabetes research clinic
 - Once a month insulin pump clinic
 - Once a month adolescent diabetes clinic
- MDT's attended were weekly vascular MDT and biweekly pituitary MDT's
- There was a weekly departmental meeting and grand rounds and biweekly M&M meetings
- Educational commitments include teaching of core medical and foundations trainees

Specialist Registrar training in Endocrinology & Diabetes and General Medicine – East of England multiprofessional deanery rotation (January 2008 to September 2014)

ST7 – Endocrinology & Diabetes/General Medicine

Aug 2014 – Sept 2014

The Ipswich Hospital NHS Trust, Ipswich
Dr G Rayman, Dr C Parkinson Dr DG Morris
Dr PD Fowler,

- 1:12 general medicine on-call with up to 70 patients per acute medical take daily
- Team leader of a medical team responsible for the initial assessment and management of patients in Emergency Assessment Unit (EAU). This included initial management of patients in Coronary Care unit (CCU) including acute coronary syndromes, tachy/bradyarrhythmias and temporary cardiac pacing.
- Member of Cardiac Arrest team
- I supervised a junior inpatient team comprising of a FY1, GPVTS CMT and trust grade doctor with 15-20 medical inpatients
- I covered ward referrals, personally carried out or supervised invasive procedures and cross-covered dynamic endocrine tests in the Clinical Investigation Unit
- Weekly outpatient clinics:
 - 1 general diabetes clinic – seeing both new referrals and follow-ups
 - 1 endocrinology clinics – seeing both new referrals and follow-ups
 - Covered antenatal diabetes clinics in consultant's absence
- MDT's attended were biweekly pituitary MDT's other meetings included weekly departmental meeting and grand rounds and biweekly M&M meetings
- Educational commitments include teaching of core medical and foundations trainees

OUT OF PROGRAMME EXPERIENCE

Aug 2011 – Jul 2014

Clinical Research Fellow
Diabetes Research unit
The Ipswich Hospital NHS Trust, Ipswich
Supervisor – Dr G Rayman

PREVIOUS POSTS ON NTN ROTATION (CONTINUED)

ST5 – Endocrinology & Diabetes/General medicine

Mar 2011 – Jul 2011

Peterborough & Stamford NHS Foundation Trust
Dr S Oyibo, Dr J Rowlands

- A busy DGH of 635 beds serving a population of around 500,000
- Diabetes clinics were off-site but general endocrinology and inpatients were located at Peterborough City hospital
- General medicine on-calls were 1:10 with upto 80 medical patients admitted per take daily in medical assessment unit located in A&E itself.
- I supervised a junior inpatient team comprising of a FY1, army medical trainee and trust grade doctor with 25 medical inpatients
- Weekly outpatient clinics:
 - 1 general diabetes clinic – seeing both new referrals and follow-ups
 - 1 endocrinology clinics – seeing both new referrals and follow-ups
 - 1 antenatal clinic
 - Diabetes foot clinic
- There was a weekly grand round, departmental meeting and monthly M&M meetings
- Educational responsibilities included training sessions of diabetes specialist nurses and army medical trainees

ST4 – Endocrinology & Diabetes/General medicine

Jun 2009 – Feb 2011

The Ipswich Hospital NHS Trust
Dr DG Morris, Dr C Parkinson, Dr PD Fowler, Dr G Rayman

- 40-50 admissions per acute 1:9 General Medicine on-calls
- I supervised a junior inpatient team comprising of a FY1, CMT and a GPVTS doctor with 15 medical inpatients
- I covered ward referrals and cross-covered dynamic endocrine tests in the Clinical Investigation Unit
- Weekly outpatient clinics:
 - 1 general diabetes clinic – seeing both new referrals and follow-ups
 - 1 endocrinology clinics – seeing both new referrals and follow-ups
 - Fortnightly antenatal clinics
 - Fortnightly diabetes foot clinics
- Weekly grand rounds, departmental journal clubs and regular audit meetings

ST3 – Endocrinology & Diabetes/General medicine

Jan 2008 – Jun 2009

Norfolk & Norwich University Hospitals NHS Foundation Trust

Prof M Sampson, Dr K Dhatariya, Dr R Temple,
Dr TM Wallace, Dr F Swords

- A teaching hospital of 1000 beds serving a population of 820,000
- General medicine commitments comprised of 2 monthly posting in acute medicine annually with 80-100 daily admissions
- Rest 10 months comprised of exclusive endocrinology & diabetes work as both inpatient and outpatient commitments
- Outpatient clinics:
 - Endocrinology clinics including Paediatric endocrinology
 - Diabetes clinics including antenatal and clinics
 - Diabetes foot clinic
- The duties of the 3 SpR's covering the firm included supervision of FY1, FY2 and CMT doctors looking after the inpatients, overseeing the outpatient dynamic investigations and assessing urgent new cases on the wards
- Weekly departmental meetings, endocrine x-ray meeting, hospital grand rounds and endocrine club
- Educational responsibilities included teaching of medical students as honorary junior lectures at University of East Anglia

Specialist Registrar (LAT) – South Yorkshire and South Humber deanery (February 2007 – December 2007)

Mar 2007 – June 2007

Royal Hallamshire Hospital, Sheffield

Prof S Tesfaye, Prof R Ross, Dr J Newell-Price, Dr A Scott, Dr W Bennett, Dr L Caddick

Jul 2007 – Dec 2007

Chesterfield Royal Hospital, Chesterfield

Dr R Robinson, Dr R MacInnerney

Senior House Officer – Endocrinology & Diabetes

Jan 2006 – Feb 2007

West Wales General Hospital, Camarthen

Dr SK Gupta, Dr RC Chowdhury

OVERSEAS EXPERIENCE (INDIA)

Senior Resident – Endocrinology & Diabetes/General medicine

Jun 2002 – May 2005

**All India Institute of Medical Sciences (AIIMS)
New Delhi, India**

Prof N Tandon, Prof N Gupta, Prof R Goswami,
Dr R Khadgawat, Dr P Jyostna, Dr Md. A Ganie

- A tertiary care centre of 1700 beds providing specialist services to New Delhi and adjoining areas of around 25 million
- As part of a group of 5 senior residents, I provided cross-cover for specialist endocrine investigation unit dealing with dynamic testing
- 24 hour endocrine cover on a 1:5 rota including cover to the neurosurgical unit
- General medicine component consistent of 1:24 on calls
- In-patient responsibilities in a ward of 30 patients supervising 3 post-graduate residents and 4 house officers and 2 interns
- Outpatient clinics
 - Endocrinology clinics including paediatric endocrinology
 - Endocrine oncology clinics – thyroid and neuroendocrine tumours
 - Diabetes clinics including antenatal clinics
 - Obesity clinics providing cover to bariatric services
- Educational sessions as Honorary lecturer to MBBS students at AIIMS

Post-graduate Resident (MD) – General Medicine

Apr 1999 – Mar 2002

Dr S. N. Medical College. Jodhpur (India)

Prof JS Ujwal, Dr D Kothari, Dr A Agarwal

- An university teaching hospital in Rajasthan catering to a population of 10 million
- 3-year rotation in all disciplines of general medicine of 4 months including 3 months in ITU and 3 months on coronary care unit.
- Included MD dissertation title “Glycaemic control in diabetes with particular reference to diabetes nephropathy”

Pre-Registration House Office (Internship)

Aug 1996 – Jul 1997

**All India Institute of Medical Sciences (AIIMS)
New Delhi, India**

CLINICAL EXPERIENCE

Diabetes

I am proud of my comprehensive experience in various diabetes sub-specialities that I have acquired during my clinical career as well as training that I have received in diabetes and endocrinology during my Specialist Registrar rotation in the East of England deanery. This has provided me with extensive experience in managing not only acute emergencies but also managing the many challenges associated with a chronic complications of diabetes including micro and macrovascular disease.

- **Diabetes foot clinic:** I have now worked for more than 14 years in diabetes foot clinics with various multidisciplinary teams and feel confident about patient management in this environment. I have kept my knowledge and skill-set updated by attending training courses and feel confident in further improving the quality of foot care provided locally
- **Expertise in insulin pump management:** I am trained in insulin pump management in diabetes and am the Clinical lead in diabetes pump services at ESNEFT. Our pump services have increased under my stewardship and we have incorporated IT updates to enable us to seamlessly review pump and sensor downloads and their interpretation
- **Experience in studies related to diabetes neuropathy:** I have more than 10 years' experience in managing patients with diabetes neuropathy – both large fibre (painless) and small fibre (painful) as well as autonomic neuropathy. Apart from my research experience in small fibre neuropathy, I run the only specialist diabetes painful neuropathy clinic in the East of England. This has also enabled me to do employ newer innovative treatments like spinal cord stimulation and research modalities like FREMS. I am involved in both academic as well as commercial trials for diabetes neuropathy
- **Education and DAFNE training:** I have been certified as a Category II DAFNE doctor which empowers me to deliver doctors' education sessions. I have already delivered such sessions at Ipswich hospital and am fully confident with the principles of diabetes education
- **Adolescent diabetes:** I have experience of the challenges involved in the management of adolescent diabetics and am currently involved in the monthly adolescent diabetes clinic at Ipswich hospital
- **Diabetes Nephropathy:** I am well trained in the investigation and management of diabetes renal disease and have experience in managing complications like anaemia, secondary hyperparathyroidism and hyperphosphataemia
- **Cardiovascular risk assessment:** CV risk assessment is now a key area in the management of especially Type 2 diabetes (as well as other types of diabetes). I am leading in both academic and research initiatives in this area so as to improve care and awareness amongst colleagues both locally and across our ICS. Furthermore, I have

been involved in many CVOT trials like SURPASS, SUSTAIN, EMPA-REG in my role as Principal Investigator

- **Diabetes database:** I am well conversant with SystmOne – the current electronic database used at the diabetes centre at Ipswich hospital and also have experience of using other software like Diasend and Diamond as well as cloud-based portals like Libreview, Dexcom Clarity, Medtronic Carelink etc.
- **Artificial intelligence:** AI holds a lot of promise in the field of modern medicine including diabetes. Although its implementation in the UK is still in its infancy, I have been collaborating with industry partners to design predictive algorithms for assessing painful neuropathy, basal insulin adjustments and population models for the early diagnosis of asymptomatic diabetes

Endocrinology

My clinical experience in endocrinology as well as training has been comprehensive and I have had a broad experience of both common endocrinopathies like thyroid, parathyroid and reproductive disorders and rarer conditions of pituitary and adrenal anomalies.

- I currently look after a large case load of >70 patients with pituitary tumours who have had pituitary surgery at Cambridge and are under my endocrine surveillance. I am fully conversant with various aspects of pituitary hormone replacement (both anterior and posterior)
- I am also fully conversant with adrenal conditions including Cushing's and Conn's syndrome, Pheochromocytoma including their peri-operative care. Annually, I have around 5-7 patients with these conditions who are referred both locally and regionally for reductive surgery.
- I run two endocrine clinics per week and these include other commoner endocrinopathies including thyroid, parathyroid, hyper and hypo androgenic conditions.
- I also run the transition endocrine clinics with paediatrics
- We have a fully equipped endocrinology unit with all forms of dynamic endocrine testing including insulin tolerance test, stimulation tests, day curves and tolerance tests being regularly performed.
- I am a member of the East of England Pituitary MDT group
- I also have experience in managing neuroendocrine tumours and have managed thyroid cancer patients with Dr Morris here at Ipswich hospital. I am a regular attendee at Pituitary MDT's and keep myself updated with the latest guidelines.

General Internal Medicine (GIM)

I am competent in all aspects of GIM having worked in this speciality for more than 20 years. Currently, we do inpatient ward rounds two weeks out of ten and on call GIM on weekends 1:16. All aspects of GIM are managed as part of this responsibility, including tirage of patients, care of elderly, multidisciplinary input, liaison with care services to ensure smooth transfer back to the community.

EXPERIENCE WITH INFORMATION TECHNOLOGY

I am computer literate and familiar with many software packages, including word-processing (Office and iWork), statistics (SPSS) and graphics (StatsDirect and SAS). I am also very familiar with the development and implementation of Electronic Medical Records (EMR); and also Electronic Data Capturing (EDC) in clinical trials. In my current role in the management of inpatient diabetes, I have also acquired skills of data capturing glucometrix data from the PXP module. I am also familiar with diabetes databases like SystmOne and Diamond as well as cloud-based portals like Libreview, Dexcom Clarity, Medtronic, Carelink etc.

TEACHING EXPERIENCE

I enjoy my role as a medical educator and have been associated with teaching at various levels to both health care professionals and aspiring students for more than 15 years. Formal teaching training was obtained through achieving a PG certification in medical education.

MEDICAL STUDENTS:

Ipswich hospital (ESNEFT) is associated with both Cambridge University (CU) and University of East Anglia (UEA) to provide teaching to medical students at all levels. I enjoy my role as a medical

- Diabetes and Endocrine module training to stage III/IV UEA students
- CU students at year IV/V have endocrinology/diabetes placement with us both in outpatient and inpatient environments
- CU pre-foundation year students are placed in the inpatient GIM environment for practical training.

POST GRADUATE MEDICAL EDUCATION:

- I am a member of the East of England Speciality Training Committee looking at curriculum and training of Speciality trainees in the East of England
- I am a regular teacher in the regional and national Speciality trainee meetings
- Grand rounds at ESNEFT
- Educational supervisor for Speciality trainees
- Bedside teaching during clinics and ward rounds for junior doctors

DIABETES & ENDOCRINOLOGY TEACHING FOR OTHER HCP'S (INDUSTRY-LED)

For the past 10 years, I have assisted the pharmacological industry to deliver non-promotional teaching at national, regional and local levels

- Lilly UK
 - National speaker meetings at various aspects of diabetes management
 - Regional meetings: in 2021/22: I completed the first Diabetes Masterclass module for HCP's in diabetes for HCP's in East Anglia
 - Local meetings for HCPs in various topics including cardiovascular risk reduction, early initiation of treatment, management of complications, insulin initiation etc.

- NovoNordisk UK
 - National speaker meetings including podcasts
 - Regional meetings including chairing of training events
 - Local meetings regarding new drug launches
- Viatrix
 - National speaker meetings on various topics related to pancreatic exocrine insufficiency (PEI)
 - I designed the patient questionnaire related to PEI
 - Regional and local meetings related to diagnosis and management of PEI
- Astra Zeneca
 - Regional and local meetings related to heart failure, chronic kidney disease and management of diabetes specifically looking at the SGLT-2i class
- Boehringer Ingelheim
 - Regional and local meetings related to heart failure, cardiovascular risk reduction and management of diabetes specifically looking at the SGLT-2i class

MANAGEMENT EXPERIENCE / SERVICE AND QUALITY IMPROVEMENT PROJECTS

- **Treatment of Type-2 diabetes guideline (since 2015):**
Based on NICE NG28 and ADA/EASD Type 2 diabetes guideline (2019/20), I designed our local ICS guideline, which has now been adopted not only locally but around 50 CCG's countrywide. Available at :
<https://ipswichandeastsuffolkccg.nhs.uk/LinkClick.aspx?fileticket=3UvTA2n6rvQ%3d&tabid=870&portalid=1&mid=3031> (accessed 7th October 2022)
- **Screening of NAFLD in diabetes (since 2019)**
I introduced the practice of screening every patient with diabetes for presence of non-alcoholic fatty liver disease (NAFLD) in our secondary care patients
- **Diabetes foot clinic eForm (since April 2015):**
Recently, I have proposed the use of a diabetes foot clinic eForm to facilitate foot clinic notifications into Evolve and also to serve as a GP letter. Due to the busy nature of the foot clinics, it is not possible to write clinic letters for each patient and I believe this will enable proper documentation of the activities within the foot clinic. I am currently discussing its implementation with the IT department who have agreed to implement it.
- **Ophthalmology Pathway for pituitary adenoma patients (February 2015):**
Based on new recommendations by the Endocrine society, I have set up a pathway through which we can now easily get visual field assessment and OCT of optic nerve head for all our pituitary macro adenoma patients pre and post-operatively. This will facilitate regular monitoring of such patients with visual field complications and has been appreciated by the East Anglia Pituitary MDT group.

- **Inpatient diabetes management (January 2015):**
I am now a part of the inpatient diabetes management group and have contributed in various aspects of inpatient management including se-up of the diabetes dashboard, pre-operative diabetes guidelines and setting up of foot care champions.
- **Departmental rota management (January 2015):**
I have also taken on the responsibility for managing the Consultant of the week rota for the endocrine firm and also manage the rota for the junior doctors in the firm. There is now dedicated spread sheets for both groups which enable us to see staff availability in order to improve our standards of patient care.
- **Clinical photography during joint vascular foot rounds (January 2015):**
I have liaised with clinical photography department to have presence of clinical photographs taken during Friday joint vascular foot rounds so that we may benefit from serial photographs of chronic foot lesions and this has been active since January 2015.
- **SOP for trial subjects who need admission (February 2014):**
As a Clinical research fellow at Ipswich hospital, I realised that when trial patients were admitted in emergency medical or surgical units, the information did not percolate to the research department and this was a research governance issue since such admissions could be a related to a drug adverse effect. So I set up a standard operating procedure (SOP) through which admissions related to any trial patients were automatically notified to the respective research department.
- **ePortfolio app for trainees (November 2013):** As a trainee representative for EOE deanery at the Royal College of Physicians, I led the team which looked into the provisions for setting up a smartphone app for the ePortfolio. I was given the opportunity to trial it and fed back suggestions to the electronic team at JRCPTB/RCP and suggested amendments. This is now freely available to all trainees nationwide.
- **The Ipswich Touch Test (IpTT) - screening for neuropathy at home (February 2012):**
Our results showed that IpTT when done by relatives and friends showed high sensitivity and specificity and 98% comparable concordance to results by trained health care professionals. Based on this, DiabetesUK endorsed the test as effective and to be done by diabetes subjects at home (Touch The Toes Test)
- **Change in practice of thromboprophylaxis for inpatients at Ipswich hospital (February 2011):**
The above audit was done to see whether the dose of enoxaparin as thromboprophylaxis was appropriately reduced in inpatients with renal impairment during hospital stay. The results were quite poor and this led to a change in the inpatient drug prescription with specific boxes denoting reduced enoxaparin doses.

LEADERSHIP EXPERIENCE

Throughout my career, I have never hesitated to take extra responsibility and feel proud to have contributed to various organisations as follows:

As Deputy Director of research at ESNEFT, I have introduced various measures to improve various aspects of research governance including patient safety. I have also been able to attract commercial research at ESNEFT which has enabled ESNEFT to have the second highest research accruals every year for the past 5 years in the East of England area.

As member of the Medical Optimisation committee, I have introduced new molecules in our drug formulary making the Ipswich and North East Essex diabetes and endocrinology formularies amongst the most advanced in the country

As chair of the diabetes medical management committee at Ipswich hospital since April 2015, I have regularly updated our diabetes and endocrinology treatment pathways on par with national and international guidelines

Member of Royal Society of Medicine (RSM) Council (Endocrinology /Diabetes) member since April 2014. During this time, I have assisted in the designing of the RSM web pages and contributed in the organisation of the three annual conferences by the endocrinology & diabetes section.

Prior to this, I was the Royal College of Physicians Trainee representative (EOE deanery) from August 2011 to April 2014. As a member of the above group, I represented the trainees of the EOE deanery and participated in a range of RCP-led activities for trainees including web design and piloting of the mobile version of ePortfolio. I also contributed to the RCP documents, 'Hospital Workforce – fit for the future' (March 2013) and 'Future Hospital - Caring for medical patients' (September 2013). Moreover, I was the member of two key RCP council groups as the trainee representative – Neuropathy complications and New Consultants' committees

I also have been the Regional Trainee Committee representative (Endocrinology & Diabetes) for EOE deanery for 5 years between 2009 and 2014. During this time, I voiced the concerns of the trainees in the RTC meetings and helped in arranging training days and liaising with individual centres. I have also assisted trainees with issues related to ePortfolio and have helped to remedy problems related to conflict between GIM rotas and speciality training in some hospitals in the region.

RESEARCH EXPERIENCE:

Proposed PhD topics – “5- year longitudinal study on Diabetes Polyneuropathy looking at various measures of large and small fibre methods”

MD Thesis – “Investigation of small fibre dysfunction using methods of small fibre function and structure in clinical conditions associated with neuropathy”

There is increasing evidence to suggest that small fibre neuropathy precedes large fibre involvement in diabetes and hence methods for small fibre dysfunction could be used to assess diabetes nerve damage at an earlier stage. The LDI_{FLARE} technique under Dr Gerry Rayman’s supervision has been the cornerstone of in-house academic diabetes neuropathy research carried out the Diabetes Research unit, Ipswich hospital for more than 10 years. It assess early C-fibre dysfunction by measuring the axon-reflex mediated hyperaemia after heating the foot fore-skin. There is also now evidence that in-vitro corneal confocal microscopy (IVCCM) is also a valuable technique to assess early small fibre dysfunction in diabetes.

However, apart from diabetes, there is a relative paucity of knowledge related to small fibre damage in other conditions like Chemotherapy-induced Peripheral Neuropathy (CIPN), hypothyroidism and hypertriglyceridaemia. I was fortunate to be given the opportunity to perform this research on small fibre neuropathy not only in diabetes but also the above mentioned 3 conditions by using both methods i.e. the LDI_{FLARE} and IVCCM for a period of 3 years between August 2011 and July 2014. The aims of my study were to deploy these two novel non-invasive tests of small fibre damage:

- In a cross-sectional and longitudinal study in Type 1 and Type 2 diabetes to determine:
 - i. Their comparative values as biomarkers to diagnose and assess progression of neuropathy
 - ii. To determine risk factors and mechanisms involved in the development and progression of diabetic sensorimotor polyneuropathy (DSPN), and
 - iii. To explore differences in aetiopathogenesis of DSPN in type 1 and 2 diabetes
- Prospective studies in CIPN, hypothyroidism and hypertriglyceridaemia to see the effect of individual treatment.

The seminal findings in the diabetes arm of my research are firstly, excellent correlations between both methods, secondly, the significant inverse correlation between triglyceride levels and small fibre neuropathy, thirdly, the linear relation of age to reduction in small fibre modalities and finally, I have shown that the aetio-pathogenesis of microvascular complications is different in both type-1 and type-2 diabetes. In the CIPN arm, our findings have shown that the LDI_{FLARE} method correlates well with patient symptoms and in both hypothyroidism and hypertriglyceridaemia arms, there are improvements in small fibre modalities on appropriate pharmacological management. I am currently writing up my dissertation and also have as upto 9 papers for consideration for publishing.

Other academic research:

During my tenure as research fellow I was involved in the following in-house academic studies:

- i. Screening of neuropathy in high risk individuals underdoing renal replacement therapy using the Ipswich Touch Test.
- ii. The Ipswich Touch Test: a simple and novel method to screen patients with diabetes at home for increased risk of foot ulceration.

Commercial trial responsibilities:

The Diabetes Research Unit at Ipswich Hospital is a fully functioning research unit comprising of two clinical investigators, three research nurses and one research facilitator and research secretary. It is an integral part of the Diabetes Research Network (DRN) and actively contributes to various academic research projects driven by DRN. The unit has also a strong history – both past and present - of involvement in commercial research projects involving diabetes pharmacotherapy and financed by pharmaceutical companies. In my role as Principal / Sub Investigator (PI/SI) in these research endeavours, I was responsible for patient screening and enrolment, supervising case report forms (CRF's), monitoring of laboratory outcome and adverse events, and day-to-day running of the research unit.

Clinical trials where I have worked as a Principal investigator include TRIUMPH, REFEFINE-3, SURMOUNT-MMO), PROXYMO ADVANCE, IMAGINE-3, ONSET-I, ELIXA, LEADER-6, GWDL, PRIBA IMPERIUM, MOBILE, SUSTAIN-4, SURPASS, ESSENCE, SURMMOUNT etc.

I am GCP accredited and am fully conversant with the process of research applications including protocol submissions, sponsorship criteria, MHRA regulations and trial closure regulations.

Overseas Research Experience:

- Submitted and Published (Rajasthan University Journal, 2002) a research work to the University of Rajasthan during my postgraduate training., the title of which was “Glycaemic control in diabetes mellitus and its correlation with microvascular complications with particular reference to diabetic nephropathy” Original post graduate research conducted by myself in lieu of my M.D. degree course in General Medicine (November 1999 – December 2001).
- Neurological manifestations of enteric fever- A retrospective clinical study conducted in Western Rajasthan population subset from January 2000 - March 2003).
- Lipoprotein A levels in Type-2 diabetes and its correlations with microvascular complications – An original research conducted at Mahatma Gandhi hospital, Jodhpur, Rajasthan, India. (July 2001 – December 2003).

PUBLICATIONS

Peer Reviewed Papers

Sharma S, Rayman G. Frontiers in diagnostic and therapeutic approaches in diabetic sensorimotor neuropathy (DSPN), *Front Endocrinol (Lausanne)*. 2023 May 18;14:1165505.

Tesfaye S, Sloan G, Petrie J, White D, Bradburn M, Young T, Rajbhandari S, **Sharma S**, et al. Optimal pharmacotherapy pathway in adults with diabetic peripheral neuropathic pain: the OPTION-DM RCT. *Health Technol Assess*. 2022 Oct;26(39):1-100. doi: 10.3310/RXUO6757.

Tesfaye S, Sloan G, Petrie J, White D, Bradburn M, Julious S, Rajbhandari S, **Sharma S** et al. Comparison of amitriptyline supplemented with pregabalin, pregabalin supplemented with amitriptyline, and duloxetine supplemented with pregabalin for the treatment of diabetic peripheral neuropathic pain (OPTION-DM): a multicentre, double-blind, randomised crossover trial. OPTION-DM trial group. *Lancet*. 2022 Aug 27;400(10353):680-690.

Cross J, **Sharma S**, John WG, Rayman G. Validation and feasibility of a postal system for remote monitoring of HbA1c. *BMJ Open Diabetes Res Care*. 2021 Nov;9(2):e002527. doi: 10.1136/bmjdr-2021-002527.

Sharma S, Gaur S. Endocrine manifestations in Rheumatological disorders: Oxford Textbook of Rheumatology. Oxford University Press (2022)

Sharma S, Vas P, Rayman G Small Fibre Neuropathy in Diabetes Polyneuropathy: Is It Time to Change? *J Diabetes Sci Technol*. 2021 Apr 12

Sharma S, Schaper N, Rayman G. Microangiopathy: Is it relevant to wound healing in diabetic foot disease? *Diabetes Metab Res Rev*. 2020

Sharma S, Tobin V, Vas PRJ, Malik RA, Rayman G. The influence of age, anthropometric and metabolic variables on LDIFLARE and corneal confocal microscopy in healthy individuals. *PLoS One*. 2018 Mar 8;13(3):e0193452.

Sharma S, Gurnell M. Diabetes module: Royal College of Physicians Diabetes and Endocrinology Masterclass. RCP (London): 2018

Sharma S, Tobin V, Vas PRJ, Rayman G. The LDIFLARE and CCM Methods Demonstrate Early Nerve Fiber Abnormalities in Untreated Hypothyroidism: A Prospective Study. *J Clin Endocrinol Metab*. 2018 Aug 1;103(8):3094-3102

Sharma S, Venkitaraman R, Vas P.R.J., Rayman G. Assessment of chemotherapy-induced peripheral neuropathy using the LDIFLARE technique: A novel technique to detect neural small fibre dysfunction. *Brain and Behaviour* 2015 Jul;5(7):e00354. doi: 10.1002/brb3.354. Epub 2015 May 26.

Sharma S, Vas P.R.J., Rayman G. Assessment of diabetes neuropathy using a point-of-care nerve conduction device shows significant associations with the LDI_{FLARE} technique and clinical neuropathy scoring. *J Diabetes Sci Technol*. 2015 Jan; 9(1):123-131.

Vas PR, **Sharma S**, Rayman G. Distal Sensorimotor Neuropathy: Improvements in Diagnosis. *Rev Diabet Stud*. 2015 Spring-Summer;12(1-2):29-47. doi: 10.1900/RDS.2015.12.29. Epub 2015 Aug 10.

Vas PR, **Sharma S**, Rayman G. Utilizing the Ipswich Touch Test to simplify screening methods for identifying the risk of foot ulceration among diabetics: Comment on the Saudi experience. *Prim Care Diabetes*. 2015 Aug;9(4):308-9. doi: 10.1016/j.pcd.2015.01.003. Epub 2015 Feb 9

Vas P.R.J., **Sharma S**, Rayman G. LDI_{FLARE} small fibre function in normal glucose tolerant subjects with and without hypertriglyceridaemia. Assessment of diabetes neuropathy using a point-of-care nerve conduction device shows significant associations with the technique and clinical neuropathy scoring. *Muscle and Nerve*. 16 Jan 2015. DOI: 10.1002/mus.24504 [Epub ahead of print].

Vas P.R.J., **Sharma S**, Rayman G. Comment on Breiner et al. Does the prevailing hypothesis that small-fibre dysfunction precedes large fibre dysfunction apply to type-1 diabetic patients? *Diabetes care* 2014; 37:1418-1424.

Sharma S, Kerry C, Atkins H, Rayman G. The Ipswich Touch Test: A simple and novel method to screen patients with diabetes at home for increased risk of foot ulceration. *Diabetes Med* 2013 Dec; 30(12):1403-1406.

Kerry C, Mitchell S, **Sharma S**, Scott A, Rayman G. Diurnal temporal patterns of hypoglycaemia in hospitalised people with diabetes may reveal potentially correctable factors. *Diabet Med*. 2014 Sep; 31(9):1100-3.

Sharma S, Seechurn S, Oyibo S. Administration of levothyroxine 45-60 minutes before breakfast improves biochemical availability as evidenced by reduced thyrotropin levels. *OJMED* 2012; 2: 36-39.

Sharma S, Jain P, Choudhury D.R., Lakhotia M. Lipoprotein A levels in Type 2 diabetes subjects in relation to diabetic microvascular complications. *JACM* 2003; 4(4): 304-307.

Sharma S, Ujjwal J.S., Jain P, Lakhotia M. Placement of defibrillator pedals – how correct are we? *JACM* 2003; 4(34): 200-204.

Sharma S, Choudhury A, Jain P, Choudhury D.R., Lakhotia M. Neurological manifestations of enteric fever. *JACM* 2003; 4(3): 196-199.

Sharma S, Lakhotia M. Tropical myositis – an atypical case involving biceps brachii and latissimus dorsi muscle. *JACM* 2002; 3(4): 4001-4003.

Sharma S, Choudhury D.R., Lakhotia M. A case of saw scale viper snakebite presenting as pleuro-pericardial haemorrhage. *JACM* 2002; 3(4): 392-394.

Peer Reviewed Book Chapters

Sharma S, Rayman G. Rheumatological manifestations of endocrine disorders. *In Oxford Textbook of Rheumatology 4th Edition*. Eds, Watts R.A., Conaghan P.G., Denton C, Foster, Isaacs J, Müller-Ladner U. Oxford: Oxford University Press. October 2013 pp1457-1467. ISBN: 978-0199642489

Sharma S, Rayman G. Microvascular disease. *In The Diabetic Foot 1st Edition*. Eds. Hinchcliffe R, Thompson M, Schaper N, Tripathi R, Timaran C. London: JP Medical Publishers. September 2014. Pp 101-110. ISBN: 9781907816628

ABSTRACTS (THIS NEEDS UPDATING – I HAVE HAD 100 MORE ABSTRACTS SINCE THEN!)

Sharma S, Rayman G. Assessment of small fibre dysfunction of small fibre dysfunction in hypothyroidism using methods of small fibre function and structure. *63rd Annual Meeting of the British Thyroid Association*. London 2014. 3-OR

Sharma S, Vas P.R.J., Rayman G. A prospective comparative study of changes in small fibre function in subjects with diabetes and healthy individuals assessed by LDI_{FLARE} and in-vitro corneal confocal microscopy methods. *24th Annual Scientific Meeting of Diabetic Neuropathy Study Group of EASD (NEURODIAB)*. Sopron 2014. 41-OR.

Sharma S, Vas P.R.J., Rayman G. The influence of age and other variables on small fibre function and structure in healthy individuals assessed by LDI_{FLARE} and in-vitro corneal confocal microscopy methods. *24th Annual Scientific Meeting of Diabetic Neuropathy Study Group of EASD (NEURODIAB)*. Sopron 2014. 53-P.

Hassler-Hurst J, **Sharma S**, Rayman G. Abnormal small nerve fibre function in children and young people with type 1 diabetes and relationship to glycaemic control. *24th Annual Scientific Meeting of Diabetic Neuropathy Study Group of EASD (NEURODIAB)*. Sopron 2014. 54-P.

Sharma S, Vas P.R.J., Rayman G. A Cross-Sectional Study of the Influence of Triglyceride Levels on Small Nerve Fibre Function in Subjects with Diabetes and Healthy Controls. *74th scientific sessions of the American Diabetes Association*. San Francisco 2014. 112-OR

Sharma S, Vas P.R.J., Rayman G. A Prospective Comparative Study of Changes in Small Fibre Function in Subjects with Diabetes and Healthy Controls Using the LDI_{FLARE} technique. *74th scientific sessions of the American Diabetes Association*. San Francisco 2014. 587-P

Sharma S, Rayman G. Assessment of diabetic neuropathy using a point-of-care nerve conduction device (NC-STAT®|DPNCHECK™) shows significant associations between the LDI_{FLARE} technique and clinical neuropathy scoring. *15th scientific sessions of the Malvern Foot Conference*. Malvern 2014. OR-5

Sharma S, Vas P.R.J., Rayman G. The influence of triglyceride levels on small nerve fibre function in subjects with diabetes and healthy controls – a cross sectional study. *Scientific sessions of the Diabetes UK Professional Conference*. Liverpool 2014. O-23

Sharma S, Vas P.R.J., Rayman G. Factors influencing diabetes polyneuropathy: assessment using methods of small fibre function and structure. *Scientific sessions of the Diabetes UK Professional Conference*. Liverpool 2014. P-385

Hassler-Hurst J, **Sharma S**, Rayman G. Abnormal small nerve fibre function demonstrated by the laser Doppler imaging(LDI_{FLARE}) technique in children and young people with Type 1 diabetes. *Scientific sessions of the Diabetes UK Professional Conference*. Liverpool 2014. P-387

Sharma S, Vas P.R.J., Rayman G. Small nerve fibre structure and function assessed by CCM and LDIFlare techniques respectively are highly correlated in both healthy volunteer and diabetes groups. *23rd Annual Scientific Meeting of Diabetic Neuropathy Study Group of EASD (NEURODIAB)*. Casteldefells 2013. O-22.

Sharma S, Vas P.R.J., Rayman G. Assessment of diabetic neuropathy using the NC-stat® DPNCheck™ device: significant associations between the modified LDIFlare method and clinical neuropathy scoring. *23rd Annual Scientific Meeting of Diabetic Neuropathy Study Group of EASD (NEURODIAB)*. Casteldefells 2013. O-22. Barcelona 2013. P-39.

Vas P.R.J., **Sharma S**, Rayman G. Comparison of age-related rate of decline in nerve structure and function assessed using different methodologies. *23rd Annual Scientific Meeting of Diabetic Neuropathy Study Group of EASD (NEURODIAB)*. Casteldefells 2013. P-41. Barcelona 2013. P-39.

Sharma S, Vas P.R.J., Rayman G. Correlation between Small Fibre Neuropathy Assessed by the LDIFlare Technique and the SUDOSCAN® in Type-1 Diabetes. *72nd scientific sessions of the American Diabetes Association*. Philadelphia 2012. 580-P

Vas P.R.J., **Sharma S**, Rayman G. Improved Diagnostic Accuracy of the LDIFlare in Diagnosing Clinical Neuropathy Using Age-Related Centile Charts. *72nd scientific sessions of the American Diabetes Association*. Philadelphia 2012. 575-P

Sharma S, Kerry C, Atkins H, Rayman G. The Ipswich Touch Test – Community screening for neuropathy. *14th scientific sessions of the Malvern Foot Conference*. Malvern 2012. OR-2

Sharma S, Kerry C, Atkins H, Rayman G. The Ipswich Touch Test 0 screening for neuropathy at home. *Scientific sessions of the Diabetes UK Professional Conference*. Glasgow 2012. P-45

Oyibo S, **Sharma S**. The effect of levothyroxine administration before breakfast for raised thyrotropin levels in patients on levothyroxine. *60th Annual Meeting of the British Thyroid Association*. London 2011. P-9

Sharma S, Gurnell M, Morris D.G. Pheochromocytoma and Acromegaly: A rare but relevant co-existence. *Proceedings of the 93rd Annual Meeting of the Endocrine Society*. Boston 2011. P3-282.

Sharma S, Brahma A, Swords F, Sampson M. Occult Cushing's syndrome in diabetes. *Scientific sessions of the Diabetes UK Professional Conference*. Glasgow 2009. P-27

Sharma S, Swords F, Dozio N. Unusual hypoglycaemia: real or factitious? <http://www.endocrine-abstracts.org/ea/0018/ea0018p13.htm>. Published: 2008-12-01.

Sharma S, Swords F, Gorick S, Chatterjee V.K., Al-Ali N, Halsall D. An unusual case of a disappearing TSHoma. <http://www.endocrine-abstracts.org/ea/0019/ea0019p232.htm>. Published: 2009-03-01.

Sharma S, Dutta V. Prepubertal gynaecomastia due to aromatase excess syndrome: novel allele presence in CYP19A1 gene. <http://www.endocrine-abstracts.org/ea/0019/ea0019p49.htm>. Published: 2009-03-01.

Sharma S, Vas P, Tornout F.V., Pendle K, Parkinson C. DIPNECH: precursor to pulmonary neuroendocrine tumors. <http://www.endocrine-abstracts.org/ea/0021/ea0021p102.htm>. Published: 2010-03-31.

ORAL PRESENTATIONS (THIS NEEDS UPDATING – I HAVE HAD MORE THAN 50 ODD MORE SINCE THEN!)

- 2015** ABCD National meeting – Cardiff, UK
- 2014** ABCD SpR meeting – London, UK
EASE meeting – Bury St. Edmunds
NeuroDiab – Sopron, Hungary
ADA Scientific sessions– San Francisco, USA
Malvern Foot Conference – Malvern, UK
ABCD National meeting – Edinburgh, UK
Diabetes UK APC – Liverpool, UK
- 2013** ABCD SpR meeting – London, UK
NeuroDiab Casteldefells, Spain
- 2012** ADA Scientific sessions– Philadelphia, USA
Diabetes UK APC – Glasgow, UK
- 2011** EASE meeting – Bury St. Edmunds
EASE meeting – Bury St. Edmunds
- 2010** British Endocrine Society meeting
EASE meeting – Bury St. Edmunds
- 2009** Royal Society of Medicine Endocrinology meeting – London
Clinical Update – Manchester
EASE meeting – Bury St. Edmunds
- 2008** Clinical Update – Bristol
Hammersmith Endocrine symposium – London

AUDIT PROJECTS (THIS NEEDS UPDATING – I HAVE HAD 30 MORE AUDITS SINCE THEN!)

- 2013** Temporal variations in hypoglycaemia in hospital in people who are at risk of hypoglycaemia (The Ipswich Hospital NHS Trust)
- 2011** Clinical prescription of thromboprophylaxis in renal impairment in the acute medical setting (The Ipswich Hospital NHS Trust)
- 2010** Prescription of statins in acute coronary syndrome (The Ipswich Hospital NHS Trust)
- 2009** Exenatide therapy in type-2 diabetes (The Ipswich Hospital NHS Trust)
- 2009** Use of metformin in gestational diabetes (Norfolk and Norwich University Hospital NHS Trust)
- 2007** Radio-iodine treatment in the management of thyrotoxicosis (Chesterfield Royal Hospital NHS Trust)

PRIZES AND AWARDS

- 2016** Goran Sundqvist International prize for excellence in Research related to Diabetes neuropathy – by EASD- NeuroDiab
- 2014** Best oral poster prize at the 63rd Annual BTA meeting, London
 ABCD SpR prize for best oral presentation at the ABCD SpR meeting, London
 Oral presentation prize at EASE meeting (Endocrinology), Bury St. Edmunds
 ADA Young Investigators Travel Grant - 74th ADA meeting, San Francisco, USA
 Short listed for DiabetesUK Lilly Clinical science award – DiabetesUK APC
- 2013** ABCD SpR prize for best oral presentation at the ABCD SpR meeting, London
- 2012** QiC national award in Diabetes for Best early detection and prevention initiative
 East of England Deanery Celebration of Success award for best academic research
 Co-recipient of HSJ awards (awarded to the Diabetes centre, Ipswich Hospital)
 Diabetes UK National award 2012 for Education and Self-Management at
 DiabetesUK APC
- 2011** Oral presentation prize at EASE meeting (Endocrinology), Bury St. Edmunds
- 2010** Oral presentation prize at EASE meeting (Endocrinology), Bury St. Edmunds
 Oral presentation prize at EASE meeting (Endocrinology), Bury St. Edmunds
- 2009** Best poster award - Society of Medicine, Endocrinology Clinical Cases meeting
 Best poster award - 3rd Hammersmith Hospital Endocrine symposium, London
- 2002** Recipient of Novo Nordisk Postgraduate research scholarship
 Best outgoing post graduate student – (Dr. S. N. Medical College, India)
- 1996** Gold medals – Medicine, Surgery, ENT, Ophthalmology and Biochemistry
 Gold medal (Honours) – MBBS Curriculum

1991 Gold medals- Biology, Physics and Chemistry in A levels

1989 Recipient of National scholarship

COURSES AND MEETINGS (NEEDS UPDATING)

National ABCD meeting – Cardiff (April 2015)
 RSM meeting for inpatient diabetes – RSM, London (January 2015)
 ABCD meeting – RCP, London (November 2014)
 24th NeuroDiab – Sopron, Hungary (September 2014)
 RSM Imaging in Endocrinology – London (July 2014)
 74th ADA – San Francisco (June 2014)
 15th Malvern Diabetic Foot conference – Malvern (May 2014)
 National ABCD meeting – Edinburgh (May 2014)
 Diabetes UK APC – Glasgow (March 2014)
 ABCD SpR meeting – London (November 2014)
 OCDEM Finishing School for SpR's – Oxford (November 2013)
 23rd NeuroDiab – Dresden, Germany (September 2013)
 DAFNE Category II for Doctors – London (June 2012)
 YDF Pump course – Ascot (May 2013)
 YDF Endo Masterclass – Oxford (October 2012)
 Pioneers in Diabetes – Warwick (November 2012)
 ABCD meeting – RCP, London (November 2012)
 22nd NeuroDiab – Dresden, Germany (September 2012)
 RCP Update in Medicine – UEA, Norwich (June 2012)
 Oxford Symposium – Exeter college - Oxford (June 2012)
 72nd ADA Professional Conference – Philadelphia (June 2012)
 14th Malvern Foot Conference – Malvern (May 2012)
 DiabetesUK APC – Glasgow (March 2012)
 YDF Retinopathy Day – Birmingham Heartlands hospital (November 2011)
 YDF Research Day – University of Warwick (September 2011)
 DRN Suffolk Podiatry meeting – Ipswich (September 2011)
 ENDO 2011 (Endocrinology) – Boston, Massachusetts (June 2011)
 EASE meeting (Endocrinology) – Bury St. Edmunds (February 2011)
 EASE meeting (Endocrinology) – Bury St. Edmunds (October 2010)
 RSM Update in Endocrinology & Diabetes – London (April 2010)
 The Society of Endocrinology BES 2010 meeting – Manchester (March 2010)
 EASE meeting (Endocrinology) – Bury St. Edmunds (February 2010)
 4th Hammersmith Hospital Endocrinology Multidisciplinary symposium - Imperial College, London (December 2009)
 2nd Norwich Diabetes & Eye Day – Barnham, Norfolk (November 2009)
 Leadership & Interview Skills Course – Bury St. Edmunds (November 2009)
 Clinical Update - 2009 (Endocrinology) – Manchester (November, 2009)
 The Society of Endocrinology BES 2009 meeting – Harrogate (March 2009)
 The Annual Professional Conference 2009 - Diabetes UK, Glasgow (March 2009)
 Young Diabetologists' Forum – Glasgow (March 2009)
 Society of Medicine, Endocrinology Clinical Cases meeting - London on (February 2009)
 3rd Hammersmith Hospital Endocrinology Multidisciplinary symposium - Imperial College, London (December 2008)

BSP Men's Health Forum – Manchester (November, 2008)
 Insulin Pump course – Birmingham (November, 2008)
 Successful Diabetes: World Diabetes Day – Peterborough (November, 2008)
 Clinical Update - 2008 (Endocrinology) – Bristol (October, 2008)
 Management and Professional Development Skills in Endocrine Care - Bristol (October, 2008)
 EASD (European Association for the Study of Diabetes) – Rome (September, 2008)
 Norwich Eye day – Norwich (September, 2008)
 Cambridge Medical Seminars (Endocrinology/Diabetes) – Cambridge (May, 2008)
 10th Clinicopathological Conference on Pituitary Disease – RCP, London (March, 2008)
 ABCD Conference on Diabetes – London, November 2007
 Acute Medicine Course for SpR's – The Lister, Edinburgh, October 2007

AFFILIATIONS

1. Diabetes UK
2. British Society of Endocrinology
3. NeuroDiab
4. European Association for the Study of Diabetes
5. ABCD (UK)
6. American Diabetes Association
7. Endocrine Society

PERSONAL ACTIVITIES

- **Amateur Photography**

I am a keen amateur photographer and have found numerous locations in Suffolk that are very conducive to outdoor photography. I have undergone semi-professional training in DSLR photography and am also a member of the NIKON photographic school which I attend whenever my schedule permits. Some of my pictures have been published.

- **Cricket**

Being Indian in origin, cricket comes naturally to me. I have played cricket at all levels of my education including club cricket. I have also represented Ipswich hospital in the last 3 years contributing in our triumph over East Suffolk Primary care each time.

- **Model trains**

I have now developed a keen interest in model trains acquired secondarily from my older son. Together, we are gradually graduating from 'N' scale to 'O' scale trains.

- **Gardening**

One of the non-clinical skills that I acquired in recent times is a keen interest in gardening. I am trying to improve my prowess in this new found interest.

REFEREES

The following persons have kindly agreed to give me references:

1. Professor. G. RAYMAN

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