

St Andrews Community Hospital
Largo Road
St Andrews
KY16 8AR

Dermatology
Tel: 01334 465694 Ext 55702
<http://www.nhsfife.scot.nhs.uk>



Dr KJ MacLaren
Bank Street Medical Group
The Health Centre
Bank Street
Cupar
KY15 4JN



CHI: 1703751191
Our Ref: AM/SG

Letter ID: 5513189

Dear Dr MacLaren

Clinic Date: 14/05/2024

Date: 15/05/2024

Leon Gratton, 3 Makgill Row, Springfield, Cupar, Fife, KY15 5SA

Date of Birth: 17/03/1975

Diagnosis:
Atopic eczema

Management:
Continue Methotrexate 10mg weekly
Aveeno as an emollient
Betnovate 1% when needed

Follow up:
Telephone 3 months

I had a further telephone consultation with Leon today. He tells me that he is still not regularly getting his Methotrexate but the prescription on clinical portal from Primary Care looks to being done regularly and I spoke to his local Pharmacy Rolands in Cupar and they said the last dispensing they did for his Methotrexate was at the end of March so I am not sure what is going wrong but I will ask for this to be looked into via Community Pharmacy. He is managing with creams but he himself is worried that his skin will break down again and he seems to have his Methotrexate for a few weeks and then doesn't for another few weeks. I know he is on a compliance aid for when he was on other medications and he reports that the Methotrexate is usually stapled in a separate box to the compliance aid and he takes it on a Tuesday and he gets his compliance aid weekly so whether this is just not always happening is unclear. Hopefully we can sort this out and do contact me if there is anything I can do from my end.

Kind regards.

Yours sincerely

Dr Alexandra McMullan
Consultant Dermatologist

Authorised on 24/05/2024 14:48:37 by Dr Alexandra McMullan.

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Dr KJ MacLaren
Bank Street Medical Group
The Health Centre
Bank Street
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KY15 4JN



CHI: 1703751191
Our Ref: AMcM/JC

Letter ID: 5395497

Dear Dr MacLaren

Clinic Date: 06/02/2024

Date: 07/02/2024

Leon Gratton, 3 Makgill Row, Springfield, Cupar, Fife, KY15 5SA

Date of Birth: 17/03/1975

Diagnosis: Atopic eczema

Other diagnoses: Schizophrenia and depression, anxiety disorder

Management: Continue 10mg Methotrexate once weekly and Folic Acid 6-days a week
Betnovate as needed for topical flare-ups
Emollients
Soap substitute

Follow-up: 3-months telephone clinic

I had a telephone appointment with Leon today. I have not met him before but he is well known to Dr Foerster. Unfortunately Leon told me that his skin has significantly flared and when I asked why he said that his Methotrexate had been stopped a few weeks ago. On further questioning and on looking on his prescription it looks like the prescriptions are actually still going but he has not had them delivered so I wonder if there is a problem at the Pharmacy end so I have urged Leon to call his local Pharmacy to find out if there is a problem with this being delivered as it is important that he does restart this as this will be why his skin is flaring significantly. He is happy to do this and has just been managing with topicals but says that it is getting worse. As he is only on 10mg weekly it would be find to restart this again at this dose and he has been having regular blood tests which have been fine.

I will arrange to have a further telephone appointment with him in another 3-months time but please to contact me if there are any problems in the meantime.

Kind regards,

Yours sincerely

Dr Alexandra McMullan
Consultant Dermatologist

Authorised on 12/02/2024 12:41:46 by Dr Alexandra McMullan.

St Andrews Community Hospital
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Dr Alex McMullan
Specialist Registrar
Dermatology Department
Photobiology Unit
Ninewells Hospital
DD1 9SY



CHI: 1703751191

ADMINISTRATIVE
LETTER
Our Ref: JF/LN

Letter ID: 5140306

Dear Alex

Date: 11/07/2023

Leon Gratton, 3 Makgill Row, Springfield, Cupar, Fife, KY15 5SA

Date of Birth: 17/03/1975

I wanted to bring to your attention another long term return patient who has atopic dermatitis and also quite severe panic disorder. He has been getting on quite well with Methotrexate now on 10mg dose originally at only 2.5mg once weekly along with topical corticosteroids. His blood tests are done regularly in Cupar where he stays and there are no real clinical issues. I just wanted to highlight that due to his quite severe anxiety and agoraphobia he has been managed by telephone appointments and I arranged that for yourself as well.

With kind regards

Yours sincerely

Dr John Foerster
Honorary Consultant in Dermatology

Authorised on 05/10/2023 22:00:36 by Dr John Foerster.

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Dr KJ MacLaren
Bank Street Medical Group
The Health Centre
Bank Street
Cupar
KY15 4JN



CHI: 1703751191
Our Ref: JF/LN

Letter ID: 5055820

Dear Dr MacLaren

Clinic Date: 25/04/2023

Date: 23/05/2023

Leon Gratton, 3 Makgill Row, Springfield, Cupar, Fife, KY15 5SA

Date of Birth: 17/03/1975

Diagnosis: Atopic dermatitis

Leon attended with a massive flare up of his atopic dermatitis. Clearly the mini dose of only 2.5mg once weekly Methotrexate had not been able to control his skin. Had no adverse affects and his bloods were fine therefore I have now increased the dose to the standard starting dose of 10mg once a week, he takes this on a Tuesday.

Because this is going to take at least 3-4 weeks and his flare is really severe I have also given him a treatment recommendation for Betnovate cream to be applied twice daily which hopefully within the next week to ten days will give him some relief. I have arranged a telephone review to see how he is getting on in about 6 weeks time.

With kind regards

Yours sincerely

Dr John Foerster
Honorary Consultant in Dermatology

Authorised on 31/05/2023 14:11:18 by Dr John Foerster.

St Andrews Community Hospital
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Dr KJ MacLaren
Bank Street Medical Group
The Health Centre
Bank Street
Cupar
KY15 4JN



CHI: 1703751191

Letter ID: 4962748

Dear Dr MacLaren

Clinic Date: 07/02/2023

Date: 22/02/2023

Leon Gratton, 3 Makgill Row, Springfield, Cupar, Fife, KY15 5SA

Date of Birth: 17/03/1975

I caught up with Leon on the landline because he has not yet updated his mobile phone which has not changed to the NHS system. Leon advises that skin is clear. He takes only 1 2.5 mg of Methotrexate per week on Tuesdays. He has no adverse effects. Bloods were fine. Given his long term stable course, lack of adverse effects and the very small dose, it is warranted to now move to once yearly review. He knows to be in touch in the hopefully unlikely event that his skin changes and he requires an adjustment of treatment.

Yours sincerely

Dr John Foerster
Honorary Consultant in Dermatology

Authorised on 28/02/2023 14:33:59 by Dr John Foerster.

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Dr KJ MacLaren
Bank Street Medical Group
The Health Centre
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KY15 4JN



CHI: 1703751191
Our Ref: JF/SG

Letter ID: 4739390

Dear Dr MacLaren

Clinic Date: 02/08/2022

Date: 03/08/2022

Leon Gratton, 3 Makgill Row, Springfield, Cupar, Fife, KY15 5SA

Date of Birth: 17/03/1975

Diagnosis:
Atopic dermatitis

Leon was reviewed by telephone. He advises that his skin is keeping up quite well with Methotrexate. He evidently has not been taking folic acid on the other days (he takes Methotrexate on a Tuesday) but he is not having any nausea and so that is fine because folic acid primarily is given to avoid the side effect of nausea. Dosing with Methotrexate should continue as is and I have arranged for review in 6 months time.

Yours sincerely

Dr John Foerster
Honorary Consultant in Dermatology

Authorised on 12/08/2022 13:53:03 by Dr John Foerster.

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Leon Gratton
3 Makgill Row
Springfield
Cupar
Fife
KY15 5SA



CHI: 1703751191
Our Ref: JF/SG

Letter ID: 4658181

Dear Leon

Clinic Date: 24/05/2022

Date: 25/05/2022

Leon Gratton, 3 Makgill Row, Springfield, Cupar, Fife, KY15 5SA

Date of Birth: 17/03/1975

I was sorry that I was unable to be in touch by telephone today. I think we had a scheduled telephone call. I hope that your skin has been holding up with the Methotrexate medicine. I have seen your blood tests which look overall fine but we will require for your blood tests to be repeated in about 4-8 weeks to make sure the medicine is not doing any harm to your liver. I am copying in your GP so that they can arrange for you to have the updated blood tests. Other than that I will arrange for you to receive another appointment in 8-12 weeks so we can catch up by telephone.

Yours sincerely

Dr John Foerster
Honorary Consultant in Dermatology

Authorised on 31/05/2022 11:07:09 by Dr John Foerster.

(D) Dr KJ MacLaren, Bank Street Medical Group, The Health Centre, Bank Street, Cupar, KY15 4JN

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Dr KJ MacLaren
Bank Street Medical Group
The Health Centre
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KY15 4JN



CHI: 1703751191
Our Ref: JF/SG

Letter ID: 4444699

Dear Dr MacLaren

Clinic Date: 16/11/2021

Date: 08/12/2021

Leon Gratton, 3 Makgill Row, Springfield, Cupar, Fife, KY15 5SA

Date of Birth: 17/03/1975

Diagnosis:
Eczema

I was pleased to see that Leon gets on very well with Methotrexate. Even his legs look much better. Overall his skin is quite dry, especially concerning his hands, to do with frequent washing and also with application with Dermal which he does to disinfect. Now I understand put added stress onto the integrity of his skin barrier. I advised to apply Aveeno cream right after to alleviate that.

I see his anaemia has also normalised back into the normal range which is great news.

I advised that regarding Methotrexate there is no reason whatsoever for him not to undergo COVID vaccination. There have been absolutely no reports that Methotrexate poses any risk for COVID vaccination. I did point out however that patients with eczema may very well experience a flare up that can last several weeks after the COVID vaccination. If that is the case then increasing steroid exposure should be used to mitigate that. I have arranged a review by telephone in 3 months time.

Kind regards.

Yours sincerely

Dr John Foerster
Honorary Consultant in Dermatology

Authorised on 13/12/2021 15:40:03 by Dr John Foerster.

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Dr KJ MacLaren
Bank Street Medical Group
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KY15 4JN



CHI: 1703751191
Our Ref: JF/SG

Letter ID: 4333115

Dear Dr MacLaren

Clinic Date: 17/08/2021

Date: 18/08/2021

Leon Gratton, 3 Makgill Row, Springfield, Cupar, Fife, KY15 5SA

Date of Birth: 17/03/1975

Diagnosis:
Atopic dermatitis

I spoke to Leon over the phone and he confirms that his skin continues to be much less inflamed than before he started Methotrexate and that he is also much less bothered by itch. His liver function is fine. His latest blood test from July show once more anaemia. Unfortunately the blood test taken today has been unavailable. He was keen for a review in person at the next appointment especially to have a look at his legs. Initially he said "I need somebody to look at my legs". However when I offered a soon appointment he said that it was nothing urgent and that the legs were not red. I came away confused as to exactly what was going on but felt reassured that he himself was happy to be slotted in the normal 12 week cycle as a walk in patient. I have arranged. Methotrexate dosing will continue as is as will his blood tests once every 4 weeks.

Yours sincerely

Dr John Foerster
Honorary Consultant in Dermatology

Authorised on 31/08/2021 11:43:50 by Dr John Foerster.

St Andrews Community Hospital
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Dr KJ MacLaren
Bank Street Medical Group
The Health Centre
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CHI: 1703751191
Our Ref: JF/SG
ADMINISTRATIVE
LETTER

Letter ID: 4242059

Dear Dr MacLaren

Dictated: 01/06/2021
Date: 03/06/2021

Leon Gratton, 3 Makgill Row, Springfield, Cupar, Fife, KY15 5SA

Date of Birth: 17/03/1975

Just to let you know that I saw relatively notable iron deficiency in the blood tests taken on 25th May 2021. I don't think this is to do with his Methotrexate. Also his full blood count was fine except that previously in April it had actually shown anaemia. It is probably sufficient to simply repeat and observe but I thought I would bring this to your attention.

Yours sincerely

Dr John Foerster
Honorary Consultant in Dermatology

Authorised on 08/06/2021 13:25:41 by Dr John Foerster.

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Dr KJ MacLaren
Bank Street Medical Group
The Health Centre
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KY15 4JN



CHI: 1703751191
Our Ref: JF/SG

Letter ID: 4224879

Dear Dr MacLaren

Clinic Date: 18/05/2021

Date: 19/05/2021

Leon Gratton, 3 Makgill Row, Springfield, Cupar, Fife, KY15 5SA

Date of Birth: 17/03/1975

Leon was telephone reviewed. He is delighted about the effect of Methotrexate. His skin is much better, he says "I feel like a new person". He also says that hayfever symptoms he had previously had in the springtime appear to be less than previously.

A slight cause of concern is that I saw signs of a bacterial infection on his latest blood test available that was sampled on 27th April. He says he did feel a bit chesty at the time and says he feels better now but clearly this needs to be monitored 4 weekly as Methotrexate is to do with chest infections. I am not sure his pneumonia vaccine status has been updated but he would clearly now have a very strong indication to receive the pneumonia jab if he hasn't had that because he is now likely to stay on Methotrexate as a medication since it has been effective. Thus I would be grateful if his full blood count, LFTs, Us & Es could be continued to be checked 4 weekly and I have arranged another telephone review in 12 weeks time.

Yours sincerely

Dr John Foerster
Honorary Consultant in Dermatology

Authorised on 20/05/2021 11:52:05 by Dr John Foerster.

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Dr KJ MacLaren
Bank Street Medical Group
The Health Centre
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CHI: 1703751191
Our Ref: JF/SG

Letter ID: 4161617

Dear Dr MacLaren

Clinic Date: 23/03/2021

Date: 26/03/2021

Leon Gratton, 3 Makgill Row, Springfield, Cupar, Fife, KY15 5SA

Date of Birth: 17/03/1975

Diagnosis:

Atopic dermatitis, anxiety and panic disorder

I spoke to Leon by phone and, 3 weeks into treatment with Methotrexate he advises that he has had no adverse effects. His bloods are fine. He does say that he feels the itchiness and also the skin associated pain sensation has subsided. Therefore, it may be that Methotrexate has been of benefit for him. I have therefore sent a further prescription for 12 weeks to be kept at the very same dose at 10mg once weekly plus folic acid on the other days to be then handed through to his local chemist in Cupar and for them to then deliver to his house. Review in our clinic here will be in 8 weeks time and he told me he has further tests coming up for review which is reassuring in terms of safety.

Yours sincerely

Dr John Foerster
Honorary Consultant in Dermatology

Authorised on 30/03/2021 12:48:19 by Dr John Foerster.

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Dr KJ MacLaren
Bank Street Medical Group
The Health Centre
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CHI: 1703751191
Our Ref: JF/SG

Letter ID: 4131314

Dear Dr MacLaren

Clinic Date: 23/02/2021

Date: 24/02/2021

Leon Gratton, 3 Makgill Row, Springfield, Cupar, Fife, KY15 5SA

Date of Birth: 17/03/1975

Diagnosis:
Atopic dermatitis, anxiety disorder

Leon came for an inperson review to chat about treatment options given that phototherapy has not been a success despite him having spent 100s of pounds for transport due to his claustrophobia. He only manages 1 minute in the cabin before he gets a claustrophobia attack. I checked a drug interaction checker for his current medication which already requires close monitoring of his Fluoxetine, Aripiprazole and Clozapine. Adding Methotrexate does not evidently increase interactual risk as such. Given that we do not have much choice at this point I have added that in. He gets his bloods taken every 4 weeks anyway and is due blood test next week so that would be after the first dose of Methotrexate. Moving forward I will review him in 3 weeks time. We will keep a close tab on things.

Yours sincerely

Dr John Foerster
Honorary Consultant in Dermatology

Authorised on 02/03/2021 14:37:47 by Dr John Foerster.

(P) Stephanie McLaren, Staff Nurse, Outpatient Department, St Andrews Community Hospital, Largo Road, KY16 8AR

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Community Mental Health Team
North East Fife
Weston Day Hospital
West Port
Cupar
KY15 4AN



CHI: 1703751191
Our Ref: JF/SG

Letter ID: 4131315

Dear Colleagues

Clinic Date: 23/02/2021

Date: 24/02/2021

Leon Gratton, 3 Makgill Row, Springfield, Cupar, Fife, KY15 5SA

Date of Birth: 17/03/1975

I have had to start Leon on another medication for his rather severe eczema. This is Methotrexate, the drug dosing requires monitoring of full blood count, liver function and urea, electrolytes. I will need to review this when I speak to him in 3 weeks time over the phone and would hence be obliged if it could be arranged in 2 weeks from now to be placed on the system that can be viewed on the clinical portal.

Yours sincerely

Dr John Foerster
Honorary Consultant in Dermatology

Authorised on 02/03/2021 14:38:09 by Dr John Foerster.

(D) Dr KJ MacLaren, Bank Street Medical Group, The Health Centre, Bank Street, Cupar, KY15 4JN

(P) Stephania McLaren, Staff Nurse, Outpatient Department, St Andrews Community Hospital, Largo Road, KY16 5SA

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Dr KJ MacLaren
Bank Street Medical Group
The Health Centre
Bank Street
Cupar
KY15 4JN



CHI: 1703751191
Our Ref: JF/SG

Letter ID: 4096301

Dear Dr MacLaren

Clinic Date: 19/01/2021

Date: 22/01/2021

Leon Gratton, 3 Makgill Row, Springfield, Cupar, Fife, KY15 5SA

Date of Birth: 17/03/1975

Diagnosis:
Atopic eczema

Leon has not had any sufficient progress from narrowband UVB and I spoke to him on the phone today. He is keen to try PUVA instead. At the very least this will only then require twice weekly treatment which should ease his problems with transport coming here. If that is not of any use we would have to look into third line systemic treatment but I would rather avoid that given that he is already taking a number of drugs every day.

Yours sincerely

Dr John Foerster
Honorary Consultant in Dermatology

Authorised on 26/01/2021 12:42:04 by Dr John Foerster.

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Dr KJ MacLaren
Bank Street Medical Group
The Health Centre
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CHI: 1703751191
Our Ref: JF/SG

Letter ID: 3939460

Dear Dr MacLaren

Clinic Date: 25/08/2020

Date: 27/08/2020

Leon Gratton, 3 Makgill Row, Springfield, Cupar, Fife, KY15 5SA

Date of Birth: 17/03/1975

I was delighted and also surprised to hear from Leon over the phone that he feels his skin has already seen quite notable improvement after having commenced narrowband UVB phototherapy a few weeks ago. I am very pleased to hear that he has managed to get a lift to come here with people helping him along. I was originally quite dismayed that we were unable to arrange for him to have home based flat screen phototherapy but he seems to be tolerating very well both the journey here and also standing inside the cabinet.

Yours sincerely

Dr John Foerster
Honorary Consultant in Dermatology

Authorised on 01/09/2020 13:41:24 by Dr John Foerster.

17F54031784

Stratheden Hospital
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NHS Fife Community Service
Mental Health Service
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Fife Health
& Social Care
Partnership



Dr KJ MacLaren
Bank Street Medical Group
The Health Centre
Bank Street
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KY15 4JN



CHI: 1703751191

Letter ID: 3869404

Dear Dr MacLaren

Clinic Date: 27/05/2020

Date: 01/06/2020

Leon Gratton, 3 Makgill Row, Springfield, Cupar, Fife, KY15 5SA, Date of Birth: 17/03/1975

Unfortunately, Mr Gratton's Care Programme Approach (CPA) meeting had to be postponed earlier in the year due to the Covid-19 outbreak therefore an appointment with me was arranged to review his progress. I had a telephone appointment with him on the 28th May 2020.

Diagnosis:

1. Schizophrenia
2. Anxiety disorder (chronic agoraphobia and panic disorder, with avoidance being used regularly).
3. Eczema

Medication: Clozapine 300mg nocte, Fluoxetine 60mg od, Folic acid 5mg od, Aripiprazole 20mg od, Simvastatin 15mg nocte, Omeprazole 20mg od and Cream for eczema

Update from the appointment: Mr Gratton reported having difficulty with COVID restrictions and has been feeling more anxious on a background of this. He stated that he is often having panic attacks, in the afternoons, which can last up to two hours at a time and has generally been feeling lower in mood over the last two months. He denied problems with sleep, he stated that he is eating regularly, he is spending time in the garden and playing his guitar regularly. He stated that he is also continuing to enjoy cooking. He denied suicidal ideation or plans.

When directly questioned about psychotic symptoms he stated that he still hears voices, although reported that he was more able now to ignore these and insight into auditory hallucinations remains reasonably good. There was no description of paranoid ideation or other psychotic symptoms that day. Anxiety remains his most prominent difficulty and he has rarely been leaving his accommodation due to this.

He continues to live alone with minimal contact with other individuals outside of Weston day hospital staff. He stated that he has been having less face to face contact with his mother since the Covid 19 outbreak, though he still remains in regular telephone contact with her. He denied use of alcohol or illicit drugs.

I note that recent blood tests had been within normal ranges. Thank you for sending us the results of his ABPI earlier in the year – I see that no abnormality was identified, so there was no indication for starting new Hypertension medication.

Fife Council and NHS Fife are supporting the people of Fife together through the Fife Health & Social Care Partnership.
www.fifehealthandsocialcare.org



AF540317

Object
apn

St Andrews Community Hospital
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Dr KJ MacLaren
Bank Street Medical Group
The Health Centre
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CHI: 1703751191
Our Ref: JF/SG

Letter ID: 3692458

Dear Dr MacLaren

Clinic Date: 10/12/2019

Date: 11/12/2019

Leon Gratton, 3 Makgill Row, Springfield, Cupar, Fife, KY15 5SA

Date of Birth: 17/03/1975

Diagnosis:

Atopic dermatitis, palmar plantar pustulosis, schizophrenia, depression

This gentleman who has had a 2-3 year worsening of his skin has done moderately well with topical treatment but he will need more than that. He is claustrophobic and I have therefore arranged home based phototherapy with a flat screen. If this isn't going to work then we will need to look into third line systemic treatment.

Yours sincerely

Dr John Foerster
Honorary Consultant in Dermatology

Authorised on 11/12/2019 12:32:33 by Dr John Foerster.

(P) Department of Phototherapy, Ninewells Hospital, Dundee

3/7
Objectively, his mood appeared mildly flat on the telephone that day, although behaviour was appropriate with speech normal. There was no evidence of formal thought disorder or objective evidence of impairing psychotic symptoms.

We had a discussion about his medication. We agreed that this was not the time to make changes to his combination of tablets. He did not want to change his antidepressant at present. He stated that he was due to work with a new Befriender soon and instead of changing medication he stated that he would like to see how this goes first before considering a change of antidepressant.

Recommendations:

1. We agreed to not make changes to his medication that day - if anxiety remains impairing at next appointment, we will discuss use of an alternative antidepressant if he would want this.
2. Continued regular input from Weston Day Hospital. They will continue to undertake 6 monthly blood tests and a further annual ECG is due later in the year, when feasible. Physical observations will return when feasible also.
3. Follow up appointment via telephone in due course later in the year. An earlier appointment could be arranged if required before this if requested by him, his GP or Psychiatric nurse.
4. Future CPA meeting to be reorganised when feasible.

Yours sincerely

Dr Christopher Olley
Specialty Doctor in Psychiatry

Authorised on 03/06/2020 16:57:58 by Christopher Olley.

(P) Trixie Heather, Staff Nurse, Weston Day Hospital, Weston House, CUPAR.

St Andrews Community Hospital
Largo Road
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Mr Leon Gratton
3 Makgill Row
Springfield
Cupar
Fife
KY15 5SA



CHI: 1703751191
Our Ref: HD/JC

Letter ID: 3257798

Dear Leon

Clinic Date: 17/01/2019

Date: 18/01/2019

Date of Birth: 17/03/1975

Diagnosis: Atopic eczema

Management: Regular moisturisers
Fucibet twice daily for flares, reducing to once or twice weekly when skin good
Protopic ointment twice daily for flares, reducing to once or twice weekly when good
Antihistamine if required at night-time

Follow-up: Open appointment

It was nice to see you in the clinic today. As we discussed your skin is really looking much, much better and I think this is because you have been scratching it less and applying your creams more regularly, which is fantastic. I have advised you to try using the Protopic ointment again as this doesn't have any steroid in it and will prevent thinning of your skin in the long-term. If this doesn't work then use the Fucibet twice daily for 2-3 weeks when your skin flares up but try and reduce it to maybe 2 or 3 times a week when your skin is good so that we can minimise the damage of thinning of the skin from long-term steroid creams. I have also suggested if you are really itchy at night-time that you try an antihistamine tablet and to try and avoid scratching your skin at all. I have given you an open appointment so that if things flare-up you can come back to the clinic at any point.

Yours sincerely

Dr Hannah Dakin
Clinical Assistant

Authorised on 24/01/2019 09:42:50 by Dr Hannah Dakin.

(D) Dr KJ MacLaren, Bank Street Medical Group, The Health Centre, Bank Street, Cupar, KY15 4JN

St Andrews Community Hospital
Largo Road
St Andrews
KY16 8AR

Department of Dermatology
Tel: 01334 465694 55702
<http://www.nhsfife.scot.nhs.uk>



Dr KJ MacLaren
Bank Street Medical Group
The Health Centre
Bank Street
Cupar
KY15 4JN



CHI: 1703751191
Our Ref: HD/JC

Letter ID: 2853953

Dear Dr MacLaren

Clinic Date: 08/03/2018

Date: 12/03/2018

Leon Gratton, 3 Makgill Row, Springfield, Cupar, Fife, KY15 5SA

Date of Birth: 17/03/1975

Diagnosis: Dermatitis

Management: Continue emollients regularly
Fucibet sparingly as required

Follow-up: 4-months

I reviewed Leon in the clinic today. His skin is not looking as bad as I have seen it at some points but his hands are still fairly irritated and scaly. I suggested the above treatment and have emphasised how important it is for him not to scratch his skin as this continues to break down the protective barrier and will just create a vicious cycle of his skin flaring up. He is doing his best to try and stop this. I will see him again in 4-month's time.

Yours sincerely

Dr Hannah Dakin
Clinical Assistant

Authorised on 13/03/2018 10:31:41 by Dr Hannah Dakin.

Appt 4 months

St Andrews Community Hospital
Largo Road
St Andrews
KY16 8AR

Department of Dermatology
Tel: 01334 465694 55702
<http://www.nhsfife.scot.nhs.uk>



Dr KJ MacLaren
Bank Street Medical Group
The Health Centre
Bank Street
Cupar
KY15 4JN



CHI: 1703751191
Our Ref: HD/JC

Letter ID: 2638618

Dear Dr MacLaren

Clinic Date: 19/09/2017

Date: 21/09/2017

Leon Gratton, 3 Makgill Row, Springfield, Cupar, Fife, KY15 5SA

Date of Birth: 17/03/1975

Diagnosis: Severe eczema ? contact component

Management: Trial of Protopic ointment bd
Refer for patch testing

Follow up: 2-months

I reviewed Leon in the clinic today. Unfortunately the UVB phototherapy hasn't really made a great difference to his skin and he has now had 79 treatments. I think we should stop and I have discussed this with him today. I am going to try him with Protopic instead of the Fucibet as he tells me he is using a tube of this a week and I have suggested he tries to reduce this to a tube maybe every second or third week. I will see him again in the clinic in 2-month's time to see how things are doing.

Yours sincerely

Dr Hannah Dakin
Clinical Assistant

This document has NOT been verified.

St Andrews Community Hospital
Largo Road
St Andrews
KY16 8AR

Department of Dermatology
Tel: 01334 465694 55702
<http://www.nhsfife.scot.nhs.uk>



Dr KJ MacLaren
Bank Street Medical Group
The Health Centre
Bank Street
Cupar
KY15 4JN

CLINIC LETTER



CHI: 1703751191
Hospital ID: AF5403178H
Our Ref: HD/SG

Letter ID: 2327149

Dear Dr MacLaren

Clinic Date: 24/01/2017

Date: 06/02/2017

Leon Gratton, 3 Makgill Row, Springfield, Cupar, Fife, KY15 5SA

Date of Birth: 17/03/1975

Diagnosis:
Atopic dermatitis

Management:
Refer UVB phototherapy

Follow up:
As above

I reviewed Leon in the clinic today. Unfortunately his skin has flared again since the Christmas period when he was at home with his mum and his skin was actually quite good. I discussed phototherapy with him today and he is keen to try this. We will arrange this for him sometime soon.

Yours sincerely

Dr Hannah Dakin
Clinical Assistant

This document has NOT been verified.

(P) Department of Phototherapy, St Andrews Community Hospital, Largo Road, St Andrews

St Andrews Community Hospital
Largo Road
St Andrews
KY16 8AR

Department of Dermatology
Tel: 01334 465694 55702
<http://www.nhsfife.scot.nhs.uk>



Dr KJ MacLaren
Bank Street Medical Group
The Health Centre
Bank Street
Cupar
KY15 4JN

CLINIC LETTER



CHI: 1703751191
Hospital ID: AF5403178H
Our Ref: HD/SG

Letter ID: 2276674

Dear Dr MacLaren

Clinic Date: 13/12/2016

Date: 05/01/2017

Leon Gratton, 3 Makgill Row, Springfield, Cupar, Fife, KY15 5SA

Date of Birth: 17/03/1975

Diagnosis:
Severe atopic eczema

Management:
Flucloxacillin
Fucibet bd
Regular emollients
Certirizine as an antihistamine

Follow up:
6 weeks

I reviewed Leon in the clinic today. Unfortunately his skin has flared somewhat although according to his carer he has not been applying his steroids or emollients particularly regularly. Today it looks quite weepy and infected and he has been given a course of Flucloxacillin by his GP. I have also suggested Fucibet bd and regular emollients. I will see him again in the clinic in 6 weeks time.

Yours sincerely

Dr Hannah Dakin
Clinical Assistant

This document has NOT been verified.

St Andrews Community Hospital
Largo Road
St Andrews
KY16 8AR

Department of Dermatology
Tel: 01334 465694 55702
<http://www.nhsfife.scot.nhs.uk>



Dr KJ MacLaren
Bank Street Medical Group
The Health Centre
Bank Street
Cupar
KY15 4JN

CLINIC LETTER



CHI: 1703751191
Hospital ID: AF5403178H
Our Ref: HD/SG

Letter ID: 100124185

Dear Dr MacLaren

Clinic Date: 25/10/2016

Date: 27/10/2016

Leon Gratton, 5 Macgill Row, Springfield, Cupar, Fife, KY15 5SA

Date of Birth: 17/03/1975

Your patient failed to attend his Dermatology clinic appointment today. I will send him one further appointment.

Yours sincerely

Dr Hannah Dakin
Clinical Assistant

This document has NOT been verified.

St Andrews Community Hospital
Largo Road
St Andrews
KY16 8AR

Department of Dermatology
Tel: 01334 465694 55702
<http://www.nhsfife.scot.nhs.uk>



Dr KJ MacLaren
Bank Street Medical Group
The Health Centre
Bank Street
Cupar
KY15 4JN

CLINIC LETTER



CHI: 1703751191
Hospital ID: AF5403178H
Our Ref: HD/SG

Letter ID: 2164238

Dear Dr MacLaren

Clinic Date: 20/09/2016

Date: 06/10/2016

Leon Gratton, 5 Macgill Row, Springfield, Cupar, Fife, KY15 5SA

Date of Birth: 17/03/1975

Diagnosis:
Severe atopic eczema

Management:
As previous

Follow up:
4 weeks

I reviewed Leon in the clinic today with his CPN. His skin is miraculously much better but probably more down to the fact that he stopped using his E cigarette rather than Fucibet and Epaderm as he only managed to get hold of them yesterday. He is quite happy to continue applying Fucibet twice daily to his feet which looks slightly weepy and red today and also his hands, arms and lower back. I suggest he does this twice a day for the next 4 weeks and will see him again in the clinic in a month.

Yours sincerely

Dr Hannah Dakin
Clinical Assistant

This document has NOT been verified.

St Andrews Community Hospital
Largo Road
St Andrews
KY16 8AR

Department of Dermatology
Tel: 01334 465694 55702
<http://www.nhsfife.scot.nhs.uk>



Dr KJ MacLaren
Bank Street Medical Group
The Health Centre
Bank Street
Cupar
KY15 4JN

CLINIC LETTER



CHI: 1703751191
Hospital ID: AF5403178H
Our Ref: HD/SG

Letter ID: 2154577

Dear Dr MacLaren

Clinic Date: 13/09/2016

Date: 15/09/2016

Leon Gratton, 5 Macgill Row, Springfield, Cupar, Fife, KY15 5SA

Date of Birth: 17/03/1975

Diagnosis:
Extensive atopic eczema

Management:
Dermol 200 as a soap substitute
Epaderm as an emollient
Fucibet bd

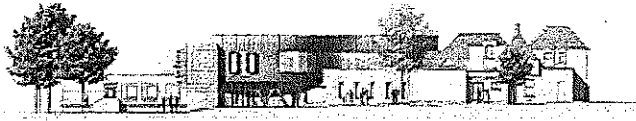
Follow up:
1 week

Thanks for referring this chap who attended the Dermatology Department in Kirkcaldy but is finding it difficult to travel there. He had extensive atopic eczema with multiple allergies to various pets and animals. He has had chronic impetiginisation and eczema currently affects his face, trunk and all of his limbs. I have suggested the above treatment for him today and will see him again in a week's time to see how he is getting on and if he is not managing this himself we might try bandages and other treatment.

Yours sincerely

Dr Hannah Dakin
Clinical Assistant

This document has NOT been verified.



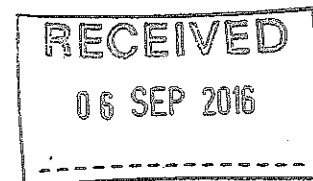
BANK STREET MEDICAL GROUP
THE HEALTH CENTRE
BANK STREET
CUPAR KY15 4JN
TEL: 01334-651201
FAX: 01334-657305
www.bankstreetmedical.co.uk

URGENT

KT/JS

5th September 2016

Dr Dawe
Consultant Dermatologist
Department of Dermatology
Adamson Hospital
Bank Street
Cupar
Fife



Dear Dr Dawe

Re: Leon Gratton D.O.B 17/03/1975 1191
3 Makgill Row, Springfield, Cupar, Fife, KY15 5SA

This gentleman is well known to the dermatology department with extensive eczema. This has really gotten out of hand and is chronically impetiginised and affecting much of his body surface. He had been seen in Kirkcaldy recently and is awaiting review in Cupar. The main issue for him is he has chronic paranoid schizophrenia and needs quite a bit of help with attending appointments and so on. It is difficult for him to concord with treatment plans and to be honest even without his mental health problems I think it would be difficult to comply without some nursing assistance. He does not drive. He has carers from the Richmond Fellowship but they are not allowed to take him to appointments in their own vehicles. His CPN has been going beyond the call of duty and helping him to apply creams and dressings but this is not really his forte. What would be ideal would be a period of quite intensive out-patient nursing to try and improve his skin while being as close as possible to home. The only alternative unfortunately might be admission but he is keen to avoid this. I wondered if there would be any way for him to attend the dermatology nurse at St Andrews on a frequent basis perhaps alternating with local nurses in Cupar?

Yours sincerely

Dr K Taylor

Victoria Hospital
Hayfield Road
Kirkcaldy
Fife
KY2 5AH

Department of Dermatology
Tel: 01592 643355 28634
<http://www.nhsfife.scot.nhs.uk>



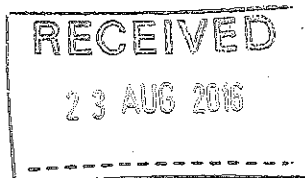
Dr Robert Dawe
Consultant Dermatologist
Dermatology Department
Adamson Hospital
Cupar

REFERRAL LETTER



CHI: 1703751191
Hospital ID: V700828K

Letter ID: 2122970



Dear Dr Dawe

Referral Date: 19/08/2016

Date: 19/08/2016

Leon Gratton, 3 Macgill Row, Springfield, Cupar, KY15 5SA

Date of Birth: 17/03/1975

DIAGNOSIS – ATOPIC ECZEMA WITH RECENT FLARE SECONDARY TO
IMPETIGENISATION
BACKGROUND OF SCHIZOPHRENIA

I would be very grateful if you could offer this gentleman an appointment reasonably urgently. He had been referred to yourselves by his GP, but due to an acute flare in his eczema, he was subsequently referred to the Victoria Hospital Kirkcaldy as an emergency.

He has longstanding atopic eczema, but over the last year or so it has got a lot worse, and he blames this on switching from cigarettes to E-cigarettes. He has a history of schizophrenia, and attended with his community psychiatric nurse, but this condition has been reasonably well controlled on Clozapine and Aripiprazole.

When I saw him at the end of July he had widespread impetigenised eczema, which initially partially responded to Betnovate C, emollient and Ichthammol. He struggles to apply the treatments himself, and unfortunately he is really struggling to attend our Department, and his community psychiatric nurse is going to be on holiday for several weeks, so it would be very helpful if he could receive some treatment closer to home.

With many thanks and kind regards.

Yours sincerely

Dr Susannah Fraser
Consultant Dermatologist

Authorised on 19/08/2016 17:01:33 by Dr Susannah Fraser.

(D) Dr KJ MacLaren, Bank Street Medical Group, The Health Centre, Bank Street, Cupar, KY15 4JN

Screening Notes

Ambulance required	No
Redirected between specialties	No
Redirected between locations	No
Clinic booking recommendation	Yes
Cancelled	No
Manual entry to Topas	Unknown

BOOKING DETAILS

CLINIC: AD - General Dermatology
 DATE: 02/07/2016 SCREENED BY: Muthu Sivaramakrishnan:Screening User
 SPECIALTY: F708H_A7
 ORIGINAL URGENCY: Routine LATEST URGENCY: Routine
 INSTRUCTIONS: None entered
 SUGGESTED CLINICIAN: None selected
 CLINICAL INSTRUCTIONS: None entered

Af 5403178H

~~N100828K~~CRN: H/L B/O - NewNotes

Address inc POSTCODE: ✓

Home & Mobile nos inc STD: ✓

Interpreter Required Yes/No No

BSL / Face to Face / Language Line ✓

Referral Diagnosis completed: ✓

Ticked the RTT box on Partial Booking ✓

Clinic: 0024 Date or W/D: _____Staff member initials: N109

REFERRAL LETTER



MEDICAL IN CONFIDENCE

Hospital use only	Clinic	Day Date	Time	Hospital No.
-------------------	--------	----------	------	--------------



Unique Care Pathway Number: 1010116928873

Transport required?

REFERRAL LETTER
 MEDICAL IN CONFIDENCE

 Suspected Cancer Site:
 NOT A CANCER REFERRAL


DERMATOLOGY

REFERRAL TO

 Dermatology A7
 Fife General Referral

 Adamson Hospital
 Bank Street
 Cupar
 KY15 4JG

 Consultant / receiving practitioner
 and/or specialty clinic

Hospital and hospital address

Hospital Location Code

F708H

Email address

Urgency of referral

Routine

PATIENT DETAILS

Surname Gratton

Forename(s) Leon

Title Mr

Sex Male

Date of birth 17-Mar-1975

CHI no. 1703751191

Patient's address

 3 Makgill Row
 Springfield
 Cupar
 KY15 5SA

Contact number(s)

Voice: 01334 769473

REFERRING PRACTITIONER DETAILS

Name Dr. Kathryn MacLaren

GMC code 6103632

GP code 92363

Practice name Bank Street Medical Group (20413)

Practice code 20413

Practice address

 The Health Centre
 Bank Street
 Cupar
 KY15 4JN

Contact number(s)

Voice: 01334 651201

Date submitted by practice: 01-Jul-2016

Reason for referral

Care type requested: Out Patient - New

Expected outcome: Not Specified

Administrative Information

Suspected Cancer Site: NOT A CANCER REFERRAL

Patient Contact: N/A Not a cancer referral

Does the patient need to be seen in clinic following any investigations: N/A Not a cancer referral

Patient can accept a short notice appointment: yes

Interpreter Required: no

CLINICAL INFORMATION**History of presenting complaint / examination findings / investigation results****Presenting complaint**

Description: Eczema

Comment: Dear Dr I would be grateful if you would see this 41-year-old chap who has very poorly controlled eczema. He has had numerous courses of antibiotics over the last few months with minimal relief. He is itching quite a lot. He has a background of schizophrenia and is under the Weston Day Hospital and psychiatry and has a CPN. Today he has quite a lot of excoriations to his arms hands and back and fissuring of his hands. I have started him on healing tape and Fucibet plus his regular emollients and antibiotic but given the repeated flares and antibiotics I would be grateful for your review and advice. Many thanks Yours sincerely Dr C Colbeck (GP locum)

Examinations and Investigations

Blood Pressure (systolic): 134 -
 Blood Pressure (diastolic): 80 -
 Height (m): 182 -
 Weight (kg): 122 -
 Body Mass Index: 36.83 -
 Ex smoker: 10-Mar-2016
 Alcohol consumption, 0 units/week: 10-Mar-2016

Past Medical History**Pre-existing conditions (High and Medium Priority)**

<u>Description</u>	<u>Laterality</u>	<u>Modifier</u>	<u>Comment</u>	<u>Date Recorded</u>
Non-alcoholic fatty liver	-	-	- without fibrosis	28-Nov-2013
Osteoarthritis NOS, of knee (Left)	Left	-	early	11-Oct-2012
[X]Osteopenia	-	-	(xray appearance)	11-Oct-2012
Benzodiazepine dependence	-	-	-	22-Nov-2010
H/O: repeated overdose	-	-	-	22-Nov-2010
Migraine	-	-	-	05-Nov-2010
Psychotic episode NOS	-	-	-	12-Sep-2008
Anxiety states	-	-	-	12-Oct-2006
Schizophrenia NOS	-	-	-	28-Jun-2004
Psychotic episode NOS	-	-	- admission	22-Nov-2003
[X]Depressive episode	-	-	-	01-Nov-2001
Psychotic episode NOS	-	-	-	24-Oct-2001
Morbid jealousy	-	-	- admission 12 weeks	01-Nov-2000
Borderline personality disorder	-	-	-	01-Nov-2000
Psychotic episode NOS	-	-	- 4/12 admission	12-Sep-1993
Accidental poisoning by lysergide, LSD	-	-	-	24-Mar-1993
Misuse of drugs NOS	-	-	-	30-Dec-1992
Eczema NOS	-	-	-	15-Mar-1976

Current Medication (Active Repeat medication issued within the last 12 months)

<u>Drug name</u>	<u>BNF code</u>	<u>Formulation</u>	<u>Dosage</u>	<u>Frequency</u>	<u>Course started</u>	<u>Duration</u>
Light Liquid Paraffin Bath additive 63.4 %	1302011M0BDAEAB	500 ml	USE AS DIRECTED	-	22-Apr-2016	-
Dermol 500 Lotion	130201000BBICBW	500 ML	APPLY AS REQUIRED FOR DRY SKIN	-	06-Jan-2016	-

Recent Medication (Any medication issued within last 90 days not shown above)

<u>Drug name</u>	<u>BNF code</u>	<u>Formulation</u>	<u>Dosage</u>	<u>Frequency</u>	<u>Course started</u>	<u>Duration</u>
Fludrocortide Tape 4 micrograms/square cm, 7.5 cm	-	2 m	APPLY TO AFFECTED AREA AT NIGHT	-	28-Jun-2016	42 Days
Co-Amoxiclav 500/125	0501013K0AAAJA	21 tablet	ONE TO BE TAKEN THREE	-	28-Jun-	7.Days

Tablets			TIMES A DAY	2016	
Fucibet Cream	1304000F0BCABCC	30 GRAM	APPLY ONCE A DAY	28-Jun-2016	42 Days
Dermol 600 Bath emollient	-	600 ML	ADD ONE OR TWO CAPFULS TO BATH WATER	28-Jun-2016	42 Days
Doublebase Gel	-	500 GRAM	APPLY AS REQUIRED FOR DRY SKIN	17-Jun-2016	-
Epaderm Cream	-	500 gram	APPLY AS REQUIRED FOR DRY SKIN	22-Apr-2016	42 Days
Flucloxacillin Capsules 500 mg	0501012G0AAABAB	56 capsule	TWO TO BE TAKEN FOUR TIMES A DAY	22-Apr-2016	7 Days
Fucibet Cream	1304000F0BCABCC	120 gram	APPLY TWICE DAILY TO ECZEMA FOR 2 WEEKS	22-Apr-2016	42 Days

Lifestyle risks

Exercise status: Not Known

RECEIVED

08 APR 2019

Stratheden Hospital
Springfield
Cupar
KY15 5RR

NHS Fife Community Service
Mental Health Service
Tel: 01334 696353
<http://www.nhsfife.scot.nhs.uk>

Fife Health
& Social Care
Partnership



Consultant Cardiologist On Call
Cardiology Department
Victoria Hospital
Hayfield Road
Kirkcaldy
KY2 5AH



CHI: 1703751191

Letter ID: 100252264

Dear Dr,

Referral Date: 01/04/2019

Date: 05/04/2019

Leon Gratton, 3 Makgill Row, Springfield, Cupar, Fife, KY15 5SA, Date of Birth: 17/03/1975

I would be grateful for your assistance with this 44 year male who I see at the Psychiatry outpatient in Cupar. He has a diagnosis of Paranoid Schizophrenia and has a chronic anxiety disorder. He takes Clozapine amongst other medication for treatment of these.

As part of monthly physical monitoring due to his use of Clozapine, Day hospital nursing staff check his physical observations each month. During the last 6 months he has regularly been found to have a Tachycardia (ranges between 104 and 123 bpm regular) and have Hypertension (137-146/87-97).

I have enclosed his ECGs taken during the last 6 months - which show a mildly prolonged QTC interval and sinus tachycardia. As per the Fife Physical Monitoring guidelines for Clozapine patients, due to his persistent Tachycardia he has had Troponin blood levels taken previously: on 16.1.18: it was 4 and on 18.10.19: it was <3. He denies current physical concerns and denies cardiac symptoms. Clinically he is mentally stable at present and has done well with his current combination of antipsychotic medication.

Past Medical History: Non Alcoholic Fatty Liver, Eczema (improved recently following Phototherapy); wheeze reported in past but no diagnosis of Asthma, obesity (weight fluctuated in last year - BMI = 39).

Medication: Clozapine 300mg nocte, Simvastatin 40mg nocte, Omeprazole 20mg od, Aripiprazole 20mg od, Folic acid 5mg od, Fluoxetine 60mg od and creams for Dermatitis.

I would be grateful if you could please provide us with advice on the most suitable way forward in trying to manage Mr Gratton's persistent hypertension, persistent tachycardia and more recent prolonged QTC interval.

Due to previous wheeze and potential exacerbation of this, his GP had advised that Bisoprolol was contraindicated and was not keen for him to be prescribed this. Would you suggest that an alternative medication be used for tachycardia and hypertension instead? Would you suggest any changes to his dose of Clozapine? or further investigations be undertaken? I do not have evidence in Fife psychiatry notes that he has had an Echocardiogram previously. Thank you for your advice

Yours sincerely,

Dr Christopher Olley
Specialty Doctor in Psychiatry

Authorised on 05/04/2019 12:26:44 by Christopher Olley.

(D) Dr KJ MacLaren, Bank Street Medical Group, The Health Centre, Bank Street, Cupar, KY15 4JN

St Andrews Community Hospital
Largo Road
St Andrews
KY16 8AR

Department of Dermatology
Tel: 01334 465694 55702
<http://www.nhsfife.scot.nhs.uk>



Leon Gratton
3 Makgill Row
Springfield
Cupar
Fife
KY15 5SA



CHI: 1703751191
Our Ref: HD/SG

Letter ID: 3560318

Dear Leon

Clinic Date: 03/09/2019

Date: 04/09/2019

Leon Gratton, 3 Makgill Row, Springfield, Cupar, Fife, KY15 5SA

Date of Birth: 17/03/1975

Diagnosis:

Severe dermatitis

? palmar plantar pustulosis

Management:

Diprosalic ointment twice daily for 2-3 weeks to feet and then reducing to 2 times weekly

Protopic ointment to legs

Flucloxacillin 500mg tds for 1 week for mild cellulites

It was nice to see you in the clinic today. As we discussed your feet have been quite bad recently and are very scaly and flaky so I have suggested the above treatment using initially for 2-3 weeks regularly and then cutting it down to once or twice weekly. You could also try Protopic on your legs and Flucloxacillin as an antibiotic as they looked as though there was a mild infection in your legs. I will see you again in 6 weeks time to check that things are settling.

Yours sincerely

Dr Hannah Dakin
Clinical Assistant

Authorised on 24/09/2019 16:21:27 by Dr Hannah Dakin.

(D) Dr KJ MacLaren, Bank Street Medical Group, The Health Centre, Bank Street, Cupar, KY15 4JN

St Andrews Community Hospital
Largo Road
St Andrews
KY16 8AR

Department of Dermatology
Tel: 01334 465694 55702
<http://www.nhsfife.scot.nhs.uk>



Mr Leon Gratton
3 Makgill Row
Springfield
Cupar
Fife
KY15 5SA



CHI: 1703751191
Our Ref: HD/JC

Letter ID: 3257798

Dear Leon

Clinic Date: 17/01/2019

Date: 18/01/2019

Date of Birth: 17/03/1975

Diagnosis: Atopic eczema

Management: Regular moisturisers
Fucibet twice daily for flares, reducing to once or twice weekly when skin good
Protopic ointment twice daily for flares, reducing to once or twice weekly when good
Antihistamine if required at night-time

Follow-up: Open appointment

It was nice to see you in the clinic today. As we discussed your skin is really looking much, much better and I think this is because you have been scratching it less and applying your creams more regularly, which is fantastic. I have advised you to try using the Protopic ointment again as this doesn't have any steroid in it and will prevent thinning of your skin in the long-term. If this doesn't work then use the Fucibet twice daily for 2-3 weeks when your skin flares up but try and reduce it to maybe 2 or 3 times a week when your skin is good so that we can minimise the damage of thinning of the skin from long-term steroid creams. I have also suggested if you are really itchy at night-time that you try an antihistamine tablet and to try and avoid scratching your skin at all. I have given you an open appointment so that if things flare-up you can come back to the clinic at any point.

Yours sincerely

Dr Hannah Dakin
Clinical Assistant

Authorised on 24/01/2019 09:42:50 by Dr Hannah Dakin.

(D) Dr KJ MacLaren, Bank Street Medical Group, The Health Centre, Bank Street, Cupar, KY15 4JN

St Andrews Community Hospital
Largo Road
St Andrews
KY16 8AR

Department of Dermatology
Tel: 01334 465694 55702
<http://www.nhsfife.scot.nhs.uk>



Dr KJ MacLaren
Bank Street Medical Group
The Health Centre
Bank Street
Cupar
KY15 4JN



CHI: 1703751191
Our Ref: HD/JC

Letter ID: 2853953

Dear Dr MacLaren

Clinic Date: 08/03/2018

Date: 12/03/2018

Leon Gratton, 3 Makgill Row, Springfield, Cupar, Fife, KY15 5SA

Date of Birth: 17/03/1975

Diagnosis: Dermatitis

Management: Continue emollients regularly.
Fucibet sparingly as required

Follow-up: 4-months

I reviewed Leon in the clinic today. His skin is not looking as bad as I have seen it at some points but his hands are still fairly irritated and scaly. I suggested the above treatment and have emphasised how important it is for him not to scratch his skin as this continues to break down the protective barrier and will just create a vicious cycle of his skin flaring up. He is doing his best to try and stop this. I will see him again in 4-month's time.

Yours sincerely

Dr Hannah Dakin
Clinical Assistant

Authorised on 13/03/2018 10:31:41 by Dr Hannah Dakin.

KJ MacLaren

1703751191

3 Makgill Row
Springfield
CUPAR
KY15 5SA

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**PRESCRIPTION RECOMMENDATION
FOR ACTION BY GENERAL PRACTITIONER**

N.B. If the medicine needs to be started within 3 working days, it should be prescribed on a HBp prescription for supply from a community pharmacy or if it is a hospital only medicine a White Hospital prescription form.

I recommend the following change in prescribed medicine(s) for the above named patient

[illegible]

Prescriber Name	Thomas M	Clinic/Dept	YD/MC	Date	25 Apr 2023
Signature		Professional Registration Number	6665768	Contact Number	

WHITE COPY: General Practitioner

BLUE COPY: Patient's Notes

PINK COPY: Pharmacy department

MS1402A

Dermatology Department
Ninewells Hospital
Dundee
DD1 9SY

Enquiries To:
Leigh McIntosh: Receptionist
Contact No: 01382 660111

DR C GREEN - DERMATOLOGY CLINIC

Clinic date: Monday 04 December 2017

Date typed: 19/01/18

Dr H Dakin
Clinical Assistant
Department of Dermatology
St Andrews Community Hospital
Largo Road
St Andrews
FIFE
KY16 8AR

Dear Hannah

Re: LEON GRATTON. 3 MAKGILL ROW, SPRINGFIELD, CUPAR, FIFE, KY15 5SA (CHI: 1703751191)

Active Diagnosis:
Diagnosis not made

I was given the medical notes of Liam Gratton because he evidently failed to attend a patch test appointment 4th December 2017. I see in your own medical notes that last entry from 21st November that he has been awaiting a patch test appointment. Because of his psychiatric background I have, in the first instance, not simply arranged for new appointment to be sent out because I am not sure for the reason when he failed to attend.

Yours sincerely

John Foerster: Clinician
e Signature: 25/01/2018

John Foerster
Honorary Locum Consultant

c.c.
DR. KATHRYN MACLAREN
Bank Street Medical Group
The Health Centre
Bank Street
Cupar
KY15 4JN

AFS403178H.

Summary Sheet

CHI NUMBER:

1703751191

NAME:

LEON GRATTON

PHOTOTHERAPY (UVB)		Total Treatments:	247 (135 Whole Body, 112 Localised)
PHOTOCHEMOTHERAPY (PUVA)		Total Treatments:	0 (0 Whole Body, 0 Localised)
PHOTOTHERAPY (UVA1)		Total Treatments:	0 (0 Whole Body, 0 Localised)
SKIN TYPE:	2	OCCUPATION:	
CENTRE REFERRED TO:	St Andrews		
DIAGNOSES:	Atopic Eczema		
GENERAL RISKS:			
SKIN CANCER RISK FACTORS:	Prior PUVA/UVB therapy		

PHOTOTHERAPY (UVB)									
				TOTAL DOSE (J/cm ²)					
Treatment Area + Freq			Start	Finish	Narrow Band TL/01	Face Shield	Broad Band TL/12	No. of trmts	Result/Adverse effects
1	WB	3x	15/02/2017	18/09/2017	23.64		00	79	Moderate Clearance
2	ES	3x	19/08/2020	18/01/2021	15.545		0	56	No Change PUVA inappropriate Commenced on systemic
3	H	3x	19/08/2020	18/01/2021	117.21		0	56	No Change
4	F	3x	19/08/2020	18/01/2021	117.21		0	56	No Change

DATE LAST SEEN:

18/01/2021

FORM 3 - PUVA/UVA1/UVB SUMMARY

Dermatology Life Quality Index (DLQI)



Name: Leon Gutter

Date: 23/2/21

The aim of this questionnaire is to measure how much your skin problem has affected your life OVER THE LAST WEEK. Please tick one box for each question. Please check you have answered EVERY question. Thank you.

1 Over the last week, how ITCHY, SORE, PAINFUL or STINGING has your skin been?

- ☒ 1. Very much ☐ 2. A lot ☐ 3. A little ☐ 4. Not at all

2 Over the last week, how EMBARRASSED or SELF-CONSCIOUS have you been because of your skin?

- ☒ 1. Very much ☐ 2. A lot ☐ 3. A little ☐ 4. Not at all

3 Over the last week, how much has your skin interfered with you going SHOPPING or looking after your HOME or GARDEN?

- ☐ 1. Very much ☒ 2. A lot ☐ 3. A little ☐ 4. Not at all ☐ 5. Not relevant

4 Over the last week, how much has your skin influenced the CLOTHES you wear?

- ☒ 1. Very much ☐ 2. A lot ☐ 3. A little ☐ 4. Not at all ☐ 5. Not relevant

5 Over the last week, how much has your skin affected any SOCIAL or LEISURE activities?

- ☒ 1. Very much ☐ 2. A lot ☐ 3. A little ☐ 4. Not at all ☐ 5. Not relevant

6 Over the last week, how much has your skin made it difficult for you to do any SPORT?

- ☐ 1. Very much ☐ 2. A lot ☐ 3. A little ☐ 4. Not at all ☒ 5. Not relevant

7 Over the last week, has your skin prevented you from WORKING or STUDYING?

- ☐ 1. Yes ☐ 2. No ☒ 3. Not relevant

8 NOT over the last week, how much has your skin been a problem at work or studying?

- ☐ 1. A lot ☐ 2. A little ☐ 3. Not at all

9 Over the last week, how much has your skin created problems with your PARTNER or any of your CLOSE FRIENDS or RELATIVES?

- ☐ 1. Very much ☐ 2. A lot ☐ 3. A little ☐ 4. Not at all ☒ 5. Not relevant

10 Over the last week, how much has your skin caused any SEXUAL DIFFICULTIES?

- ☐ 1. Very much ☐ 2. A lot ☐ 3. A little ☐ 4. Not at all ☒ 5. Not relevant

11 Over the last week, how much of a problem has the TREATMENT for your skin been, for example by making your home messy, or by taking up time?

- ☐ 1. Very much ☐ 2. A lot ☐ 3. A little ☐ 4. Not at all ☐ 5. Not relevant

Ward/Clinic/
Hosp.

PHOTOTHERAPY

JFO Cons.

HISTORY/CONTINUATION SHEET

Surname

GRATTON

First Name

LEON

Address

D D M M Y Y
1 7 0 3 7 5 1 1 9 1

C.H.I. No.

M. State

Sex

UNIT/WARD/DEPT.

G.P. & Address (G.P. Requests only)

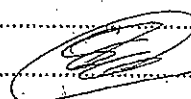
USE BLOCK LETTERS
OR PATIENT LABEL

DATE

Page

7/5/20

I called Leon today to offer training for home phototherapy, but he declined treatment at the moment as he did not wish to travel to Dundee at the moment. He feels his skin is not too bad at the moment and will contact us once restrictions are lifted.

 S/N

29/5/20

Mr Grattan has decided he would like to go ahead with home phototherapy treatment, but does not have the money to pay the camera costs. His CPN will discuss with him and get back in touch.

Rutherford Spn

1/6/20

Mr Grattan's CPN has asked if we can transfer the unit in hospital transport to St Andrews and they would pick it up there. I have explained that this is, unfortunately, not possible.

I spoke to St Andrews who said that Mr Grattan was unable to stay in the cabinet for much longer than 2 minutes. We discussed whether Mr Grattan's treatment could be split up into shorter sessions to allow him to get treatment in St Andrews. Emma & Foster re this and he is happy.

Rutherford Spn

5/6/20

Spoke to Brian (CPN) regarding commencing treatment. He will speak with Leon regarding commencing treatment. Brian mentioned alternatives e.g. systemic treatment but advised this would have to be discussed with dermatologist. Awaiting phone call back.

CPN K Pease

HISTORY/ CONTINUATION SHEET

Stack
phototherapy

Ward/Clinic/

Hosp

Surname GRATTON

First Name LEON

Address 3 Makgill Row

Address Springfield

Occupation CUPAR

G.P. & Address KY15 5SA

AF5403178H

17/03/1975

1703751191

Un

D. o.

M. Stat

Sex

UNIT/WARD/DEPT

USE BLOCK CAPITALS

DATE

15/6/20

12:15

Spoke with Brian regarding starting as no contact from him. He is arranging care package for Leon in community. Advised him that Leon's referral ~~is~~ is urgent and treatment can ^{be} commenced quickly despite cond restrictions. He will contact us again regarding this

C/N Kleave

12:30

Further call from Brian - stating Richmond care enquiring about mileage costs for bringing patient in and out for treatments. Asking for 40p/mile for mileage. Advised Brian that I will enquire ~~what~~ how this can/not be achieved.

C/N Kleave

19/6/20

Telephoned Brian @ Weston House / Day Hospital. He is still awaiting a call back regarding transporting Leon to and from hospital. (aware that Leon would only get 14p/mile if claiming). Awaiting call from Brian

C/N Kleave

Received phone call from Brian.

A care programme approach (CPA) meeting is being held on 6/7/20 and hopefully a decision will be made then. Will discuss with Dr Foerster next week regarding ? systemics.

C/N: KPearce

Dermatology Department
Ninewells Hospital
Dundee
DD1 9SY

Enquiries To:
Leigh McIntosh: Receptionist
Contact No: 01382 660111



DR C GREEN - DERMATOLOGY CLINIC

Clinic date: Monday 04 December 2017

Date typed: 19/01/18

Dr H Dakin
Clinical Assistant
Department of Dermatology
St Andrews Community Hospital
Largo Road
St Andrews
FIFE
KY16 8AR

file 119

Dear Hannah

Re: LEON GRATTON. 3 MAKGILL ROW, SPRINGFIELD, CUPAR, FIFE, KY15 5SA (CHI: 1703751191)

Active Diagnosis:
Diagnosis not made

I was given the medical notes of Liam Gratton because he evidently failed to attend a patch test appointment 4th December 2017. I see in your own medical notes that last entry from 21st November that he has been awaiting a patch test appointment. Because of his psychiatric background I have, in the first instance, not simply arranged for new appointment to be sent out because I am not sure for the reason when he failed to attend.

Yours sincerely

John Foerster: Clinician
e Signature: 25/01/2018

John Foerster
Honorary Locum Consultant

c.c.
DR. KATHRYN MACLAREN
Bank Street Medical Group
The Health Centre
Bank Street
Cupar
KY15 4JN

Please file in notes
Thanks



ACUTE SERVICES DIVISION

Date 23/11/17

Audit number:

GRATTON
LEON
3 Makgill Row
Springfield
CUPAR
KY15 5SA
AF5403178H
17/03/1975
1703751191

If no sticky label is available then the following details must be recorded for the secretaries:

Unit Number

Full Name and Address

GP's name (including initials) and Address

If stickies are available, please leave 2 or 3 for the secretary.

These notes have been removed for the patient's attendance at

1. NNEWELL'S PATCH TESTING Clinic on 27/11/17
2. As the patient has been admitted to Ward _____

Signature C. Dakin

I reviewed Leon in the clinic today. His skin is worse at present and he is scratching quite a lot. I have reminded him about the itch/scratch cycle and tried to get him to break that. He also looks as though he has a slight infection so I have given him a course of Flucloxacillin and said that he can increase his Fucibet to twice daily for a couple of weeks only when his skin flares and then reduce it back down to 2 or 3 times a week when things are better. I will see him again in January.

Yours sincerely

Dr Hannah Dakin
Clinical Assistant

This document has NOT been verified.

Community Hospital

Department of Dermatology
Tel: 01334 465694 55702
<http://www.nhsfife.scot.nhs.uk>



CHI: 1703751191
Our Ref: HD/JC

Clinic Date: 21/11/2017

Date: 24/11/2017

Dr KJ MacLaren
Bank Street Medical Group
The Health Centre
Bank Street
Cupar
KY15 4JN

Letter ID: 2721173

Dear Dr MacLaren

Leon Gratton, 3 Makgill Row, Springfield, Cupar, Fife, KY15 5SA

Date of Birth: 17/03/1975

Diagnosis:

Management:

Severe eczema ?contact component

Await patch testing

Flucloxacillin 500mg qds for one week

Increase Fucibet to bd for 2-weeks only

3 months

Follow-up:

I reviewed Leon in the clinic today. His skin is worse at present and he is scratching quite a lot. I have reminded him about the itch/scratch cycle and tried to get him to break that. He also looks as though he has a slight infection so I have given him a course of Flucloxacillin and said that he can increase his Fucibet to twice daily for a couple of weeks only when his skin flares and then reduce it back down to 2 or 3 times a week when things are better. I will see him again in January.

Yours sincerely

Dr Hannah Dakin
Clinical Assistant

This document has NOT been verified.

Summary Sheet

CHI NUMBER: 1703751191

NAME: LEON GRATTON

PHOTOTHERAPY (UVB)	Total Treatments:	79 (79 Whole Body, 0 Localised)
PHOTOCHEMOTHERAPY (PUVA)	Total Treatments:	0 (0 Whole Body, 0 Localised)
PHOTOTHERAPY (UVA1)	Total Treatments:	0 (0 Whole Body, 0 Localised)
SKIN TYPE:	2	OCCUPATION:
CENTRE REFERRED TO:	St Andrews	
DIAGNOSES:	Psoriasis	
GENERAL RISKS:		
SKIN CANCER RISK FACTORS:		

PHOTOTHERAPY (UVB)

			TOTAL DOSE (J/cm ²)				No. of trmts	Result/Adverse effects
Treatment Area + Freq	Start	Finish	Narrow Band TL/01	Face Shield	Broad Band TL/12			
1 WB 3x	15/02/2017	18/09/2017	23.64		00		79	Moderate Clearance

New UVB Treatment

DATE LAST SEEN: 18/09/2017

