



British Geriatrics Society
Improving healthcare for older people

Major Trauma in Older People 2026

19 May

IET Auston Court, Birmingham & Online
(Hybrid meeting)

Five top tips for getting the most out of your meeting:

1. Record your attendance

In person: Attendance should be recorded by scanning in at the registration desk using the QR code on your joining email or providing your name. Each day you attend you will need to scan in.

Online: You will receive a CPD certificate for the days you have watch online. **Viewing the content post-event will be certified, and certificates are issued 3 days after your last viewing.**

2. Give feedback

Please take the time to fill out the feedback form after each day. It is mandatory for us to generate and issue a CPD certificate but also helps us improve our conference and provides invaluable information to our speakers about their presentation.

3. Visit our sponsors and browse our posters

Consider spending 5 minutes to speak to a sponsor. Take the time to browse and comment on our submitted posters on the digital screens.

4. Join the discussion

All delegates are encouraged to ask questions for the speakers and panel discussions. If you are thinking it, someone else is too, so please use the 'Ask' function on the online platform or the microphone in the room.

5. Get social

Chat with attendees, join a socialising event or interact in a group discussion.

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PROGRAMME

overview and information

	Programme
8.30	Registration and poster viewing Meet the authors of the presented posters and ask them about their work
9.15	Welcome
9.30 - 11.00	Head Trauma Chronic subdural haematoma (cSDH)
11.00	Free time
11.30 - 13.00	Trauma Coagulation, regional anaesthesia and exercise
13.00	Lunch and posters Join colleagues over lunch to catch up Look out for the signs indicating where to meetup
13.30	Sponsored symposium
14.00 - 15.30	The Future of Major Trauma in Older People and Spinal Trauma Spinal fractures and peg fractures
15.30	Free time
15.45 - 16.45	Escalation, prognostication, and palliative care in older trauma patients ITU, major brain injury and end of life

Registration and Poster viewing

08.30	Registration and poster viewing
08.30	Poster viewing - Presenters of posters will be available to discuss their work
09.20	Welcome Dhanupriya Sivapathasuntharam and Mark Baxter

Head Trauma

Chronic subdural haematoma (cSDH)

Moderators: David Shipway and Clare Hughes

	09.30 Surgical management of acute and chronic SDH Mr Pragnesh Bhatt, Consultant Neurosurgeon, Aberdeen, Scotland, UK and Honorary Clinical Senior Lecturer, University of Aberdeen
9.30 - 11.00	10.00 Middle meningeal artery embolisation for cSDH - which patients should I pick? Dr Frances Rickard, Consultant Geriatrician, Southmead Hospital, North Bristol NHS Trust
	10.30 Future directions in cSDH- will the neurosurgeons really be out of a job? Anthony Cox, Consultant Interventional Radiology, North Bristol NHS Trust
11.00	Poster viewing time and coffee break Visit the sponsored stands and view our submitted posters:

Trauma

Coagulation, regional anaesthesia and exercise

Moderators: Dhanupriya Sivapathasuntharam and Mark Baxter

	11.30 Coagulation in Trauma patients Mr Paul Vulliamy, Clinical Senior Lecturer and Wellcome Trust Early Career Fellow and Honorary Consultant Surgeon Barts Health and Queen Mary University of London <i>(remote)</i>
11.30 - 13.00	12.00 Regional anaesthesia for rib fractures- what should we block and when? Dr Ruth Greer, Anaesthetist, Southmead Hospital Bristol
	12.30 Chest physio in thoracic trauma- evidence for breathing exercises? Professor Ceri Battle, Consultant Respiratory Physiotherapist, Swansea Bay University Health Board

The Future of Major Trauma in Older People and Spinal Trauma

Spinal fractures and peg fractures

Moderators: Abigail Probert and Mark Baxter

KEYNOTE

14.00 - 15.30	<p>14.00 The future of Major Trauma in Older People Dr Anne Weaver, Consultant in Emergency Medicine & Pre-Hospital Care, Barts Health NHS Trust. Clinical Director for Trauma, Royal London Hospital, Medical Director - London's Air Ambulance Joint Clinical Director - London Major Trauma System (NHS London) National Specialty Advisor for Major Trauma and Burns (NHSE)</p>
	<p>14.45 What makes a spinal fracture unstable and when do I need spinal restrictions? Mr Andraay Leung, Consultant Spinal Surgeon, Honorary Associate Clinical Professor, University of Birmingham, Deputy Lead, West Midlands Regional Spinal Network</p> <p>15.10 Spine and Sensibility: Managing Odontoid Fractures in the Older Patient Mr Elie Najjar, Consultant spine surgeon, Nottingham University Hospitals NHS Trust</p>

15.30 **Poster viewing time and coffee break**

Escalation, prognostication, and palliative care in older trauma patients

ITU, major brain injury and end of life

Moderators: Frances Rickard and Rebecca Taljaard

15.45 - 17.00	<p>15.45 ITU in older trauma patients – what can we offer and who will benefit? Dr Alejandro Barrios, Consultant - Anaesthetics, UHB</p> <p>16.05 Prognostication in traumatic brain injury Dr Harri Sivasathiaseelan, Consultant Neurologist, Rapid Access Acute Rehabilitation (RAAR) Unit Royal London Hospital</p> <p>16.25 Palliative Care in Trauma Professor Elaine Cole, Director of Research and Innovation, Queen Mary University of London/London Trauma System (<i>remote</i>)</p>
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17.15 **Meeting Close**
 Closing Remarks

Professor Ceri Battle

Consultant Respiratory Physiotherapist
Swansea Bay University Health Board

- Chest physio in thoracic trauma - Evidence for breathing exercises?

Ceri is a Consultant Respiratory Physiotherapist in Morriston Hospital and an Honorary Professor in Trauma and Emergency Care at Swansea University Medical School. She is the Research Lead for the South Wales Trauma Network and the Associate Director (Clinical) of Swansea Trials Unit at Swansea University. Her main research interest is the management of chest trauma.

Chest physio is included on most care pathways in the UK for patients with thoracic trauma, however the evidence supporting this is variable. This presentation will consider current evidence for breathing exercises and other related interventions for this patient cohort.

- Middle meningeal artery embolisation for cSDH - which patients should I pick?

Dr Frances Rickard
Consultant Geriatrician
Southmead Hospital

Dr Frances Rickard is a Consultant Geriatrician at Southmead Hospital in Bristol, specialising in Geriatric Trauma and Perioperative Care.

Her special interest within Geriatric Trauma is management of cSDH. She has been part of UK and European working groups looking at the role of MMA embolisation in the management of cSDH, and has worked collaboratively with Bristol Neurosurgeons and INRs to develop a regional service for cSDH advice and management across Severn Major Trauma Network. She is also interested in the management of odontoid peg fractures in older people, and is in the early stages of producing a UK and Ireland multi-professional

This talk will give an introduction to cSDH as well as explore MMAE for cSDH. It will cover the procedure and evidence base for treatment and look at patient selection criteria for MMAE.

Spine and Sensibility: Managing Odontoid Fractures in the Older Patient

Mr Elie Najjar

Consultant spine surgeon, Nottingham University Hospitals NHS Trust

Mr Elie Najjar, MD, FRCS, is a fellowship-trained spinal surgeon with a specialist focus on trauma and age-related spinal conditions. His practice centres on delivering safe, thoughtful, and evidence-driven care for older adults with fractures, instability, and complex degenerative disease. He leads a multinational research collaborative working on spinal trauma outcomes, machine-learning prognostic tools, and frailty-informed surgical pathways, with publications across leading spine journals. Known for his calm, analytical style, he aims to translate advanced research into pragmatic, patient-centred decisions for a growing elderly population.

Alongside his surgical and research practice, Mr Najjar is also a published medical writer, exploring the human and clinical dimensions of contemporary spine care.

Odontoid fractures are now one of the most common cervical spine injuries in older adults, yet their management remains one of the most debated areas in spinal trauma. Low-energy falls, frailty, and poor bone quality create a pattern of injury in which traditional goals—such as radiological union—do not reliably predict functional recovery. Recent prospective evidence challenges long-held assumptions, showing that outcomes may depend more on physiology, tolerance of immobilisation, and pre-injury independence than on achieving bony fusion. This session will review contemporary data on conservative versus surgical pathways, the clinical relevance of pseudoarthrosis, and emerging tools such as Hounsfield Unit-based bone assessment to guide personalised decision-making. The aim is to move beyond a binary “fix or collar” paradigm and toward a model that prioritises mobility, safety, and quality of life in an ageing population.

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20 May 2026

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