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From left, Mene Pangalos and Pascal Soriot, of AstraZeneca, with Anders Danielsson, of Skanska, and Cambridge University's Duncan Maskell at the topping-out ceremony  
Picture: Keith Heppell

# AstraZeneca 'will push boundaries of science' at new Cambridge HQ

CEO marks topping-out ceremony with pledge to transform patient care

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AstraZeneca's chief executive officer said the company will "push the boundaries of science" at its state-of-the-art new site in the city - which he told the *Cambridge Independent* was the best place in Europe for medical research.

Pascal Soriot pledged that the firm will deliver medicines that could "transform patient care around the world" as it held a topping-out ceremony for its new £500million research and development centre and global corporate headquarters on the Cambridge Biomedical Campus yesterday (Tuesday).

Mr Soriot told the *Cambridge*

*Independent*: "I think this site is going to make a big difference to AstraZeneca because we are at the heart of science here. You are surrounded. You can see the Laboratory for Molecular Biology, the Cancer Research UK centre, Papworth, Addenbrooke's. This is the best place in Europe for science, to do research in biology, in medicine. That will help us to discover new medicines."

"It will make a big difference to our company and to the ecosystem in Cambridge - and it will make a big difference to life sciences in the UK."

In a traditional rooftop ceremony watched by 800 people, he helped smooth the final section of concrete and a crane swung a fir tree over it for good luck.

AstraZeneca will be hoping it

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What it means for healthcare



doesn't need to rely on luck though.

Its army of 2,000 employees - a number that includes those in its biologics research and development arm, MedImmune - will begin occupying the site in stages in late 2018 with the aim of creating a pipeline of drugs to tackle some of the worst diseases afflicting mankind.

The site will become AstraZeneca's largest centre for cancer research and will also be home to scientists tackling respiratory, cardiovascular and metabolic diseases.

Mr Soriot said: "Our new global HQ

and strategic R&D site, designed by world-leading architects Herzog & de Meuron, embodies AstraZeneca's innovation-led transformation and I am delighted to mark today's milestone, which signals our progress in advancing a world-class environment where science can thrive.

"As a long-standing investor in UK science, we believe Cambridge offers a tremendously vibrant academic and life-sciences ecosystem that can truly catalyse discovery and innovation."

"Together with our partners, we will push the boundaries of science to deliver innovative medicines that transform patient care around the world."

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## Health



Dr Anoop Kuttikat

Are you allergic to this time of the year?

**S**pring has finally sprung and we all look forward to the longer days, hopefully filled with sunshine and warmth.

A variety of health concerns also start to rear their heads, most notably allergies.

Allergies occur when your immune system overreacts to substances ranging from dust to certain foods and medications. Seasonal allergies (also called hay fever) are triggered by pollen from trees, weed and grass. Mold spores which grow when weather is humid, wet or damp can also cause problems.

Many people first get seasonal allergies in childhood or early adult life. Symptoms can be lifelong but can get better or worse over time. Genetic factors (bad genes) are important and sometimes they run in families.

Stuffy or runny nose, sneezing, red itchy eyes and an itchy throat or ears can all be unpleasant allergy symptoms.

Diagnosis is made by your GP after asking about your problems and examining you. You might be sent for blood tests and skin allergy testing to confirm the diagnosis. In difficult-to-treat cases, you might also be referred to a consultant allergist.

Rinsing out the nose with salt water, nasal steroid sprays and anti-histamine tablets can all help to relieve the symptoms. Allergy shots (immunotherapy) or allergy pills (under the tongue) can be suitable for some patients.

Avoidance of the allergic substance, if possible, is the best policy. Pollen forecasts by the Met Office can be used to avoid going out on high pollen days. If you have to be out, then please remember to wash your hair and change your clothes when you are back inside.

Another springtime health issue is body aches and pains. This is often due to deconditioned muscles being jump-started by eager outdoor activities.

It is important to ease your way into spring by gentle stretching exercises. Strengthening your core (muscles in the lower back, hips and tummy area) is recommended.

Despite the health woes for some folks, spring is overall a slightly healthier and very enjoyable time for many. So make the most of the delights of spring!

■ Dr Anoop Kuttikat is a consultant rheumatologist at Mulberry Clinic, Hinchingsbrooke Hospital, Huntingdon, and at Kettering General. Visit [cambridge-kettering-rheumatologist.com](http://cambridge-kettering-rheumatologist.com).

# Because being in hospital is not child's play

GEMMA GARDNER meets the Addenbrooke's team which helps children learn and develop and relieves boredom during a hospital stay.

**A**ll done," five-year-old Jasper Mosedale proudly announces as Charlie the teddy bear has a bandage secured on his paw.

"Do you think Charlie is being brave?" asks health play specialist Vicki Brown. "Charlie is brave," declares Jasper.

Vicki continues: "You're doing a good job, well done. Charlie is happy. He says thank you very much." Jasper beams: "I want to do it again!"

Vicki is part of a team of 23 health play specialists and nursery nurses working across 11 areas, including the children's wards and the emergency department at Cambridge University Hospitals NHS Trust.

The team plays a vital role in supporting the hospital's young patients throughout their stay, ensuring that stress and anxiety are kept to a minimum.

They organise daily play and art activities, use play to maintain a child's level of development during illness, help children deal with their feelings, use play to prepare children for hospital procedures, encourage peer group friendships and even organise parties and special events.

Speaking to the *Cambridge Independent*, therapeutic play manager Stephanie Fairbairn, who has worked at Addenbrooke's for 10



Sheena Belham in the 'toy cupboard'

years, explained: "When we say therapeutic play, we're talking about working with children to help them to cope with their hospital experiences.

"The main aim is to reduce stress and anxiety and to reduce the long-term effects of trauma relating to hospital experiences."

Children can suffer long-term problems resulting from a hospital experience, particularly if they have come through the emergency department. The team supports those children and their families through normalising play and therapeutic play.

"We have children who can be here for months, and if you can imagine that they're not taking part in their daily activities, that can be a real chunk out of their developmental opportunities – they're not mixing with other children in the same way, they're not going to nursery, they're not out and about. The play team – play specialists and nursery nurses – will get involved," said Stephanie.

"From a developmental point of view, we can have children not meeting their milestones. That can be physical and cognitive, emotional and how they react with other children – that can take a long time to catch up on. But it depends on how long a child is in for."

In the play room on the hospital's children's ward, nursery nurse Emma Meade is doing some painting with 14-year-old Elizabeth Fyfe, who has been in hospital for three months after a serious bout of influenza left her in intensive care.

The teenager has undergone a tracheotomy to help her breathe and is missing her school and friends. With Emma, Elizabeth can enjoy being creative and escape the medical world of the ward.

Her mother, Cheryl Fyfe, 42, from Norfolk, said: "She does a lot of colouring, art and craft stuff... she likes using her hands. She's very creative and she also likes going out into the garden. The messier she is, the happier she is."

The play room is packed full of games, puzzles, arts and crafts, and plenty of toys.

Emma, who has been in her role for 11 years, explained: "Sometimes it might take them a while to get in the play room because they're a bit reluctant or scared, but as soon as you bring them into that environment, which is bright and colourful, and you start showing them the activities you've got, then



Addenbrooke's nursery nurse Emma Meade with Elizabeth Fyfe, 14

Pictures: Keith Heppell

you start to build a relationship with them. They grow to trust you and to bond with you."

On the same ward is Jasper, who has been in hospital for eight days with a blood infection.

His mum Helen, 34, from Cambourne, said: "It's amazing as Jasper's quite a lively boy and because he's now starting to feel better he wants things to do.

"When he had to have an MRI, they brought a Lego model of an MRI scanner in to play with and then, on a DVD, the sounds of the MRI to get him used to it so he knew what would be happening."

Stephanie added: "We adapt to children's needs. You have to think on your feet and you have to be creative. I've put cannulas in fire engines, because children don't always play with teddies. It's about finding ways to engage that child."

Although not medically-trained, health play specialists must complete a foundation degree, hold a professional childcare qualification at level 3 or above and must have completed two years' post-qualifying work experience in

a childcare setting. Nursery nurses have qualifications in childcare or early years.

Children who are preparing for a major operation, or who have a particular fear or anxiety, are also referred to the team.

"You can have some children who won't be in the same room as a needle or won't come into the hospital," Stephanie said.

"The first steps might just be getting them into hospital or onto the concourse. And then coming onto a ward and then maybe having a look at a cannula at a distance not with a needle in. And then gradually touching it.

"It can be a six-month piece of work to build up that child's confidence to handle a needle. It's about desensitising to the object and understanding it, and then looking at what coping mechanism we can put in place to cope with the procedure.

"It's their body, the procedure is happening to them – how would they like it to be done?" she added.

The team also supports breastfeeding mothers, takes responsibility for ordering food for those with special dietary needs and supports children who are starting to eat again after surgery.

They work with children from as young as three days old to 16-year-old teenagers, who mostly ask to play on a computer or games console.