

Dr Silvia Antiga

CV

PRINCIPAL PROFESSIONAL SPECIALISMS

CESR, LLM, MBBS, FEBRM

Consultant in Rehabilitation Medicine

QUALIFICATIONS & ACCREDITATION

LLM Medical Ethics and Law with merit,
University of Leicester (2020)

CESR in Rehabilitation Medicine (2019)

Specialization degree in Physical and
Rehabilitation Medicine, Bologna University,
Italy (2014)

European Board for Physical and

Rehabilitation Medicine(FEBPRM) (2015)

MBBS, University of Bologna, Italy (2008)

MEMBERSHIPS OF PROFESSIONAL BODIES

- General Medical Council: member
number 7448339
- Italian medical register number 04936
- Rehabilitation Medicine UK specialist
register
- MDU Membership number 69227D

PAST & PRESENT POSITIONS

Consultant in Rehabilitation Medicine

Royal Hospital for Neuro-disability, 2018 - present

I lead the MDT in weekly case conferences, ward rounds and complex interactions involving patients, families, commissioners and various members of the MDT. I exercise professional leadership for all staff working in the speciality. I share responsibility with the other consultants in Rehabilitation Medicine to provide cover for the Brain Injury Service. I supervise junior medical staff as a shared responsibility with other consultant colleagues.

I am responsible for carrying out teaching, examination and accreditation duties as required and contributing to Continuing Medical Education and clinical governance initiatives. I ensure that the medical process from referral to discharge/transfer of the patient is effective and efficient. I assist with discussions regarding service plans and developments with both internal and external agencies. I am responsible for contributing to and preparing audits, guidelines and policies.

Locum Consultant in Rehabilitation Medicine

King's College Hospital, 2016 - 2018

Specialty Doctor

Royal Hospital for Neuro-disability, 2016

Specialty Registrar

Cambridge University Hospital, 2016

Staff Grade Doctor

Central England Rehabilitation Unit, 2015

Clinical Fellow

Midland Centre for Spinal Injuries, RJAHS NHS. 2014

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RESEARCH PUBLICATIONS

Management of Spasticity with Intrathecal Phenol Injections: The Past and the Present. The Journal of the International Society of Physical and Rehabilitation Medicine. Volume XX, Issue XX. Month 2019.

Against the odds: extraordinary recovery from complete cauda equina syndrome following L3 fracture. Time still matters, Spinal Cord Ser Cases 2016 10; 2:16027. Epub 2016 Nov 10

Post-traumatic amnesia after brain injury: reflections from an early acute specialist rehabilitation service in United Kingdom, Journal of Rehabilitation Medicine, Supplement 55 August 2016-ISPRM 2016

Management of Spasticity and Pain with Intrathecal Phenol Injections: a review of literature, Journal of Rehabilitation Medicine, Supplement 55 August 2016-ISPRM 2016 and published in The Journal of The International Society of Physical and Rehabilitation Medicine: 2019 , Volume : 2, Issue : 2, Page : 94-99

Training the trainees in Physical and Rehabilitation Medicine: identifying the differences and aspirations through an international survey in European countries, Abstract book, ECNR 2015

Risk factors and diagnosis of Pulmonary Embolism (PE) in people with spinal cord injury, Abstract book ISCOS 2015

Transient ischaemic attack (TIA) of spinal cord following anterior cervical discectomy and fusion (ACDF) at C5/6 with left sided graft from iliac crest: case report, Abstract book ISCOS 2015

Recto-vaginal fistula in a patient with diverticular disease following spinal cord injury (SCI): a case report, Abstract book ISCOS 2015

Effect of early verticalisation and deterioration of neurology in SCI patients: case series. Abstract book, ISCOS 2014

Comorbidities in over 65 Spinal cord injury patients: a 1 year retrospective study in a spinal unit. Abstract book, ISCOS 2014

Salisbury assessment method (SAM) for determining the neurological level and ASIA impairment scale in patients with spinal cord lesion. Abstract book, ISCOS 2014

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ORAL PRESENTATIONS

Multicentre study on comorbidities in patients over 65 with acute SCI and prediction of length of stay- ISCOS 2016-INTERNATIONAL

Post-traumatic amnesia after a brain injury: reflection from an early acute specialist rehabilitation service in United Kingdom- ISCOS 2016-INTERNATIONAL

Management of spasticity and pain with intrathecal phenol injections: a review of literature-ISPRM 2016-INTERNATIONAL

Training the trainees in Physical and Rehabilitation Medicine: identifying the differences and aspirations through an international survey in European countries, ECNR 2015-INTERNATIONAL

Hydrocephalus anatomy, pathophysiology and treatment-Royal Hospital for Disability-in service training day- DEPARTMENTAL

Management of respiratory dysfunction in SCI-Salisbury NHS Trust-in service training day- DEPARTMENTAL

Anatomy and pathophysiology of respiratory dysfunction in SCI-Salisbury NHS Trust-in service training day- DEPARTMENTAL

AIS (Asia Impairment scale)-Salisbury NHS Trust-in service training day- DEPARTMENTAL

CT Pulmonary angiography and risks factors for the diagnosis of PE in SCI patients-Guttman multidisciplinary meeting Stoke Mandeville, 27/06/2014-NATIONAL

POSTER PRESENTATIONS

Risk factors and diagnosis of pulmonary embolism in people with spinal cord injuries: a multi centre study-ISCOS 2015-INTERNATIONAL

Transient ischaemic attack (TIA) of spinal cord following anterior cervical discectomy and fusion (ACDF) at C5/6 with left sided graft from iliac crest: case report, ISCOS 2015-INTERNATIONAL

Recto-vaginal fistula in a patient with diverticular disease following spinal cord injury (SCI): a case report, ISCOS 2015-INTERNATIONAL

Quality of life and spinal cord injury: changes over time and association with functionality-Guttman multidisciplinary meeting 2014-NATIONAL

Severity of neurogenic bowel dysfunction in patients with spinal cord injury- Guttman multidisciplinary meeting 2014-NATIONAL

Neurological deterioration following early or sudden verticalisation in SCI patients: a case series-ISCOS 2014-INTERNATIONAL