



Vascular Anaesthesia Society Newsletter 2014

Welcome to the 9th edition of the society's newsletter.

Message from the Chairman

I hope that you have fully recovered from the Christmas and New Year festivities and are ready for another exciting year. As the centralisation of vascular services continues, albeit at a slower pace than perhaps expected, we are all starting to get a feel for how the future may look. In Greater Manchester the number of hospitals providing arterial surgery has now substantially reduced to only three sites covering a population of approximately 2.5 million (and ~4.5 million for tertiary work). For us the commissioning process starts in earnest very soon and there are two "models" being considered; further centralisation onto two sites or a single site. The latter seems rather ambitious given the volume of arterial work in this part of the world and given the problems that would be encountered with respect to co-dependant services if vascular surgery were relocated to a single site (e.g. cancer surgery, major trauma, transplant, HPB, cardiac, nephrology etc). Rather unsettling times ahead for many of us across the UK but opportunities too. Many vascular anaesthetists will be affected by these changes; not least within our current job plans but also by the numerous serious clinical governance issues that need to be considered

whether your hospital continues to deliver vascular surgery or does not. In my own hospital we will open two Hybrid theatres in April; in line with many others across the UK. This has been in the planning for nearly two years and is expected to provide new challenges both on an operational level and in our day to day clinical practice.

The National vascular registry went live in December and you must register if you are to enter your anaesthetic data. The mandatory anaesthetic questions will be filled in by the surgeon but the other anaesthesia related questions may not be (as they are not mandatory). If you want to compare your anaesthetic and surgical outcomes with mean outcome data from across all the UK's vascular units then you need to engage. I hope it will provide useful data to support our appraisal, revalidation and in supporting local clinical governance. The link for NVR registration and "log in" is <https://nvr.northgate.thirdparty.nhs.uk> and can only be accessed via an NHS computer. The senior anaesthetist responsible for the case ("anaesthetist 1") is a mandatory field and if you haven't already, your vascular surgeon has probably provided the NVR with your name and GMC number. Emergency cases undertaken by anaesthetist not registered will be coded separately.

We need fresh ideas to freshen up the new website so if you have any good ideas please get in contact. You'll notice there has been a gentle restructuring of the sub-committees to try and reduce unnecessary replication and assist the convergence of similar work streams within the VASGBI. We have registered as a stakeholder with NHS England with regards to "vascular disease" and as such we hope to be consulted by the national commissioners on matters that relate

directly to the provision of vascular anaesthesia services. On that note you may have noticed that the third edition of RCoA GPAS (Guidelines for the Provision of Anaesthetic Services) has been posted on the RCoA website recently. Gerry Danjoux and Jonathan Thompson have updated their excellent document in conjunction with a review by the society and it gives me great pleasure to fully support this comprehensive, thoughtful and insightful document.



The Manchester meeting was attended by 200 delegates and received super feedback on the presentation and content of the lectures and workshops. However we on the committee recognise that the temperature inside of the building was not ideal due to an unseasonably cold snap! I don't suppose anyone will believe me if when I say that Manchester's weather is not usually that bad in September! However my overriding memory of the Town Hall will always be from 2012; watching Manchester City's victory parade after winning the Premier league for the first time in 44 years! I accept that for the majority of other members the iconic Town Hall will probably serve as a reminder of an arctic expedition! We have listened to your feedback and the Glasgow meeting is in a warm and luxurious centrally located hotel (I promise) with the provisional program again looking excellent. I hope to see you there. All the best for 2014.

Adam Pichel – Chairman
Central Manchester University
Hospitals NHS Foundation Trust

Report of the VASGBI Annual Scientific Meeting

The 2013 Annual Scientific Meeting saw the society travelling north to Manchester and was hosted by Dr Helen Alexander and Dr Paul Lancaster at the impressive but cold Gothic setting of Manchester Town Hall.

Delegates had the opportunity to explore the exhibits during the day and nearly everyone commented on the Bee Mosaics adorning the floor. The Bee was adopted as a motif for Manchester during the industrial revolution and denoted Mancunians' hard work during this era and Manchester being a hive of activity in the 19th century.



This year's meeting was, as usual, efficiently run, with online registration and CPD certificates provided through the website and abstract booklets provided on the e-badge as last year.

As has become the custom the scientific meeting started on Monday morning with 3 excellent workshops available at 2 sittings. The sessions on offer – Cardiac Output workshop, Shared Decision Making for High Risk Vascular Surgery and Cardiopulmonary Exercise Testing. All were very well

attended and received very positive feedback.

The meeting was introduced by local organiser, Dr Helen Alexander who welcomed delegates to Manchester and introduced the Training and Centralisation Session. This commenced with an interesting talk from Dr Jane Eddleston on the implications of centralisation the need for society representation at national level. This was followed by Dr Nolan representing the Royal College and speaking on the generalities of anaesthetic training. Finally our VASGBI trainee rep Kristy Wagstaff gave a very enlightening talk on how to get the most out of vascular training. She described her own experiences of undertaking a vascular fellowship and introduced her ideas of registering local fellowships centrally on the society website maximising their exposure to trainees looking for such positions.



Lunch passed quickly as it was combined with poster browsing, visiting the trade, and of course catching up with old friends and running on the spot to keep warm!

After lunch the first CPD session got underway chaired by Dr Simon Howell. Topics covered included Reducing Respiratory Complications after Vascular Surgery, (Dr Andrew Lumb), Haemostatic Management in Thoraco-

abdominal Aortic aneurysm repair (Dr Alastair Nimmo) and Preoperative Assessment for Abdominal Aortic Surgery (Dr Nick Wisely). All of which were enthusiastically received.

After tea Dr Mark Stoneham chaired his final AGM and closed the meeting handing over the reigns to Dr Adam Pichel. He then chaired the final session of the day – on Endovascular Surgery. This commenced with a fascinating journey through the emerging surgical trends in stent technology and endovascular repair by Mr Ferdinand Serracino-Inglott. Dr Adam Pichel followed with the planning and perioperative management of complex EVAR surgery.

A select number of delegates braved the cold and attended a very enjoyable three course dinner at the Town Hall in the evening.

Day 2 commenced with a change in the programme and a stimulating session on Haemodynamic therapy for Vascular Anaesthesia chaired by Dr Karen Kerr. Professor Miodrag Filipovic – Consultant at St Gallen Hospital in Switzerland eloquently negotiated us round the Clotting cascade and new anticoagulants before Dr Stefan De Hert from Ghent University Hospital in Belgium challenged us with an interesting talk on Haemodynamic Pharmacotherapy.

The traditional breakfast session of Free Papers followed coffee and was chaired by Dr Indran Raju. 28 abstracts were submitted, five of which were selected for the verbal presentation and the rest displayed as posters – which were judged on day one by Dr Indran Raju and Dr Simon Howell.

The trainees presented to a much fuller hall than usual and the session was

judged by Dr Raju and Dr Stefan De Hert. The winner was Dr Claire Cruikshanks from Sheffield with her presentation on post operative delirium and persistent cognitive dysfunction.

This years debate was as ever entertaining, Dr Watson Gomez from Bedford argued the motion “This House Believes all EVAR’s should be done awake” and was opposed by Dr Jonathan Thompson from Leicester – who won the day.

Following lunch and due to popular demand, the final session of the 2013 Annual Scientific meeting this year was a second CPD session. Topics covered included Monitoring in Carotid Surgery (Dr Mark Stoneham), Lower Limb amputation (Dr Paul Lancaster), and TOE in vascular anaesthesia. (Dr Carl Moores).

It was then left to the Chair, Dr Adam Pichel to close the meeting by thanking the local organisers and of course Jane Heppenstall who effortlessly coordinates us all!

Education and Training Committee Report

2013 saw another successful Annual Scientific Meeting in Manchester with the abstracts submitted being of a very high quality covering a wide range of topics within vascular anaesthesia. Congratulations to both the winners of the Free Papers session and the Poster session. The 2014 ASM in Glasgow will see the introduction of a secure electronic submission system for abstracts. The aim is to make it easier for abstract submission and for the abstracts to be reviewed by the Education & Training sub-committee members. The Education & Training sub-committee is also considering changing the format of the poster and oral presentations for the forthcoming

meeting. Details of the new format will be available together with the invitation for abstracts for the 2014 meeting. Selected abstracts from future meetings will be available on the VASGBI website for membership access. The CPD section on the Society website is currently being updated and we aim to have a full range of educational topics available soon. Suggestions for future educational topics are always welcome.

Thank you and we look forward to seeing everyone in Glasgow in September 2014.

Research and Audit Committee Report

The Research and Audit committees of the Society have merged to form a single committee. This reflects the overlap between the activities of the two committees and is similar to the approach taken by a number of other societies. The current membership of the merged committee is:

Dr Simon Howell (Leeds)

Dr Adam Pichel (Manchester)

Dr Paul Lancaster (Manchester)

Dr Judith Gudgeon (Frimley)

Dr Ronelle Mouton (Bristol)

The committee is responsible for overseeing the research grant awarding activities of the Society. The Society awards project grants which are managed through the National Institute of Academic Anaesthesia (NIAA) grant process. The Society is currently advertising a project grant of up to £20,000 for research into vascular anaesthetic topics. The closing date for applications is 28 April 2014 and details can be found at <http://www.niaa.org.uk/>.

Small grants to support anaesthetic trainees undertaking research projects

under appropriate consultant supervision are planned. These will be awarded directly by the Society and will be announced on the VASGBI website in the coming months.

The VASGBI is one of a number of specialist societies supporting the NIAA led Second National Anaesthetic Research Priority Setting Exercise. This is being conducted in partnership with the James Lind Alliance. The initial meeting of the steering group of this priority setting partnership took place recently. A call for suggestions to help identify unmet research needs in anaesthesia and perioperative medicine will follow later this year.

The committee represents the VASGBI on the Research and Audit Committee of the Vascular Society and has been closely involved with the discussions that led to the development of the National Vascular Registry (NVR). The Registry has succeeded the National Vascular Database and went live on 10 December 2013. Data are collected on

- The repair of Abdominal aortic aneurysm (AAA)
- Carotid endarterectomy
- Lower limb angioplasty/stenting
- Lower limb bypass and Lower limb amputation

It is expected that all vascular surgeons will submit their data to the Registry. The NVR includes a number of anaesthetic fields including information on preoperative testing assessment, type of anaesthesia and immediate post-operative outcomes. The name of the lead anaesthetist is a mandatory field in the Registry and whilst this information can be entered by the surgeon the VASGBI would encourage all vascular anaesthetists to register for Access to the NVR and to review their own data. Colleagues who had access to the National Vascular Database should have been sent login details of the NVR.

If you do not have access please contact the Registry administrators at 0207 869 6621 or nvr@rcseng.ac.uk.

The Audit and Research Committee is keen to hear from interested members of the society who would like to contribute to current activities or suggest new areas of research and audit. Please contact Dr. Simon Howell either directly (s.howell@leeds.ac.uk) or through the Society website.

Treasurer's Report - a few words from the vaults.

The VASGBI finds itself in a very healthy position due to the success of the one day meeting, held for the first time May 2013 and the annual 2 day scientific meeting. That income is balanced against Society running costs which we are consciously reducing with an increasing use of technology. You can assist with that by making sure that your contact details remain up to date.

We are using the funds to support national research projects being organised through NIAA but the intention is also to support departmental/fellowship research/audit projects with smaller funds that can be applied for through calls that the VASGBI will put out during the year. Our bank balance will determine how many and for how much and for how long such funds will be available so if you have a project in mind strike whilst the iron is hot (whilst there is money in the kitty). More information on how to apply for such funds will come from the audit and research sub-committee. The amalgamation of roles is part of the societies agenda to cut down on spending. Next treasurers' report will update on how that is going.

Website

The website continues to be improved and updated by Dr David Nunn and our thanks go out to him for all his hard work on behalf of the VASGBI. (www.vasgbi.com). Members are encouraged to visit the website to update their details.

ACCEA Committee

The sieving committee met via teleconference at the beginning of the summer following the announcement that the 2013 round was proceeding. Candidates had submitted applications in preparation and these were duly considered, with four people being supported by VASGBI.

There is no news regarding timing of national awards this year but in order for VASGBI to consider supporting members we would encourage you to submit applications before the announcement is made. This can be done via Judy Gudgeon or Jane Heppenstall but please continue to watch ACCEA website for announcements.

Future Meetings

Next year's Annual Scientific Meeting (Monday 8th and Tuesday 9th September 2014) is to be held in Glasgow.

Dr Mark Stoneham and Dr Adam Pichel will be presenting a vascular session at ACTA on June 19th and 20th 2014

Any member who is interested in organizing the yearly meeting should contact one of the committee or Jane Heppenstall – see website for contact details.

Other News

Elections and Retirements

2013 saw 3 members leave the committee, Dr Jeremy Langton, Tracey Wall – our long serving secretary and of course Dr Mark Stoneham. 3 new members were elected to the committee, Dr Tim Wood from Derby, Dr Nathalie Courtois from St Marys, Paddington and Dr Elke Kothman from Middlesborough. We would like to extend a warm welcome to them all and look forward to working with them.

Dr Kristy Wagstaff the committee trainee rep would like to hear from you if you have a Fellowship post which you would like included on the Society Registry. Please include annual start dates and a short job description to include on the website. (email K.wagstaff@doctors.org.uk)

Best Wishes for 2014 to all our members from the committee.

Dr Judith Gudgeon - Secretary
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