

ACPGBI 2022 Travelling Fellowship Report

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My interest lies in beyond TME surgery so I opted to use my travelling fellowship to visit some of the leading UK centres for this. I began with the ACPGBI 2023 Annual Meeting at Manchester, which was a great meeting where I presented research about the role of the gut microbiome in acute diverticulitis. It also provided an opportunity to meet with some of my hosts.

After the meeting, I travelled to Leeds to see the <u>John Goligher Colorectal Unit at</u> <u>St James University Hospital</u>, where my host was Mr Jim Tiernan. On the first day, we did a total pelvic exenteration, which I found a great demonstration of operative teaching with Mr Tiernan skilfully guiding his senior registrar through the majority of the case. The second day was spent moving between theatres from a lateral pelvic sidewall dissection with Mr Tiernan, to Professor Peter Sagar doing a total pelvic exenteration. Partaking in the famous Prof Sagar "Pork Pie Friday" and hearing his charismatic story telling of lifelong friendships forged at my stage of training was a memorable experience.

Moving south to London, my next stop was the <u>Royal Marsden Hospital</u> hosted by Mr Sheng Qiu and Mr Shahnawaz Rasheed, which is a relatively small, boutique hospital similar to where I currently work at the Peter MacCallum Cancer Centre. I was there over a quiet couple of days for the Colorectal Unit in terms of clinical activity but enjoyed seeing how the oncology-led MDM ran, and spent some time in theatre with the sarcoma team doing a partial scapulectomy, which had a fond resemblance to a sacrectomy with better access!

The last centre on my tour was <u>St Mark's Hospital</u> where Ms Elaine Burns and Mr Ian Jenkins had a fantastic couple of days instore for me. On the first day, Mr Jenkins did a total pelvic exenteration. The following day I spent touring the infrastructure and logistics of working across two sites post-covid, and spent the morning meeting with the lead for exenterative anaesthesia, lead of their prehabilitation program and nurse consultant learning how St Mark's optimise these complex patients pre- and intra-operatively. The afternoon was spent in the complex cancer MDM which was the most comprehensive MDM I've ever seen, and a great model to replicate. Overall, I had a superb trip, and learnt multiple technical considerations that I will incorporate into my practise in the future as well as finding it a useful experience for seeing how other units manage these complex patients before and after the operating theatre. Fortunately, none of my tour was impacted by the junior doctor strikes. The hospitality shown by my hosts was phenomenal and I look forward to meeting and collaborating with this great community of surgeons in the future.

I would once again like to thank the ACPGBI for this fantastic experience – I learnt far more in the two weeks than I ever expected.