

British Society for Gynaecological Endoscopy
Annual General Meeting
Thursday, 4th June 2015 at 17:30
At Central Hall Westminster, London

Present: Mr Ertan Saridogan (President)
Mr Dominic Byrne (President elect)
Mr Mark Whittaker (Honorary Secretary)
Mr Thomas Ind (Honorary Treasurer)
Plus approximately 70 members of the BSGE.

1. **Apologies:** Siya Sharma
2. **Minutes of the last BSGE AGM held on 15th May 2014, Norwich** were received and accepted as correct.
3. **Matters arising**

4. President's report

The BSGE had another busy but very successful year. The membership numbers continued to grow and it is expected to reach 1000 by early 2016. SJM was expected to be successful both academically and financially, the attendance was a record 600, + delegates. The training programmes for trainees in partnership with the industry has been popular and it has been anticipated a second programme will be announced with another company to increase the number of places. Endometriosis Centres programme was continuing to grow and the data were submitted for consideration of publication. Morcellation debate had some effect on the practice in UK and the BSGE released a statement to guide the clinicians on this issue. Collaboration with the ESGE has been strong and the delegates have been encouraged to submit their abstracts to the meeting in Budapest. Laparoscopic hysterectomy training programme for consultants was being developed and announcements would be made in due course to invite applications.

5. President elect's report

BSGE ASM 2016- DB reported that the BSGE ASM 2016 will be held on 3- 4 March at Bedruthan Hotel in Cornwall. Masterclass will be held at Royal Cornwall Hospital on 16th May. The hotel will be taken over completely by the BSGE delegates from 5 pm on Monday.

Endo nurses BSGE membership- It was agreed that BSGE should actively encourage endometriosis nurses to join the BSGE. Membership for the first year would be free and the nurses would be expected to attend the BSGE ASM on an annual basis.

6. Honorary Treasurer's report

TI reminded the AGM that the BSGE has charitable status and as Honorary Treasurer of the society, he is responsible for financial governance and end of year accounts to be submitted to the Charity Commission.

Haslers are appointed accountants for the BSGE and Trustees' report and financial statements of the year ending 31 December 2014 are now ready. BSGE has over 880 members now. BSGE has over £440k in bank account but this will be reduced after paying the ASM invoices.

7. Honorary Secretary's report

BSGE Election 2015- MW reported that Sameer Umranikar was re-elected for a second term.

Membership – BSGE now comprises of over 900 members and continues to grow. There are 497 seniors and 287 juniors and 105 nurse members plus 21 honorary members.

8. BSGE LapHyst project

JE reported on the progress made in the BSGE Laparoscopic Hysterectomy project. The Council had considered a proposal made by Jim English, Mark Whittaker and Natasha Waters. It was decided that the project would proceed and be supported by BSGE. The aim would be to finalise the course content, identify trainers and look for funding options. The clinical governance issues were presented by NW. A timeline for the project was shown to the Society.

9. Portfolio reports:

- Endometriosis Centres

DB reported currently there are 45 BSGE accredited Endocentres and 9 BSGE Provisional Endocentres. The distribution of centres in the UK is becoming more even but there are still gaps in the North East of England, in Scotland and in Northern Ireland.

Enhancing assurance of Endocentre quality-DB reported over recent years there has been challenges made about ensuring surgical experience is sufficient in Endocentres and how to ensure comparability of the surgery between centres. To address these issues further enhancements in the BSGE accreditation criteria have been agreed by the officers. These will be phased in over the next two years and include:

2016 – Annual first quarter submission of a short video of an exemplar case of severe RVE requiring pararectal dissection. Videos from all centres will be viewed in one meeting by the Scientific Advisory Group to confirm that the surgery is consistent with other centres and accords with what is described in the database.

2017 – The workload criteria will change from a minimum of 12 cases of pararectal dissection per centre to a minimum of 12 cases per surgeon. Accreditation numbers will therefore be different for centres with different numbers of surgeons; 12 for single surgeon centre, 24 for two surgeon centres, 36 for three etc.

Endometriosis Clinical Nurse Specialists- The Royal college of Nurses has endorsed the role of Endometriosis CNS and has published documents to describe the role. There was a national launch of the development at the RCN recently and it was fully supported by the BSGE. Trusts now have clear evidence that this is a nationally recognised role and this will help units to maintain, or develop, this important role. The BSGE with support from the RCN and Endometriosis UK, will be running training programmes for Endometriosis CNS's. There will be a training course at each Annual Scientific Meeting from 2016 onwards. It is hoped there will be an initial launch training session at the RCN this year.

2016 - It will be mandatory for Endometriosis CNS's to attend the BSGE Annual Scientific Meeting, in a similar fashion to other specialist nurses and specialist society requirements. To help with the costs involved it has been agreed that Endometriosis CNS's who are not members of the BSGE will be allowed their first year of membership free. Also the officers will work with industry to obtain as much financial support for the nurses to attend the ASM as possible.

- Awards

SJ announced successful members who applied for BSGE Awards and Bursaries:

BSGE Video Competition (Trainee) 2014

Tom Holland- £250, Rajiv Sreekumar- £250, CP Lim- £250, George Goumalatsos- £250

BSGE Video Competition (Senior) 2014

Dimitrios Miligkos- one year membership fee, Wael Agur- one year membership fee

BSGE Alan Gordon Fellowship 2014

Kausik Das- £750, Nilesh Agarwal- £750, Prithwiraj Saha- £750, Surjit Mitra- £750

BSGE Trainees Travelling Fellowship 2014

James McLaren- £2000, Rasiah Barathan- £2000, Tom Holland- £2000, William Hoo- £2000

BSGE Educational Bursary 2014

Bally Attilia, Chellapah Gnanachandran, Debbie Panes, Dhivya Chandarshekar, Donna Ghosh, Elhami Ebeid, Fevzi Shakir, Katherine Gale, Natasha Waters, Paul Simpson, Subashini Sivalingam, Zweilihe Magama

Successful candidates for BSGE/ETHICON Laparoscopy Training programme 2015 were:

Antonios Anagnostopoulos, Meera Adishesh, Karolina Afors, Aisha Alzouebi, Charles Baker, Helen Bolton, Jane Borley, Chris Brewer, Manos Damigos, Emily Fairclough, Annabel Grossmith, Ayman Hassadia, Peter Hintridge, Tom Holland, Tina Kapoor, Ken Ma, Rebecca Mallick, Anita Nargund, Kathy Niblock, Olorunfunmi Odusoga, James Rowland, Simon Tarsha, Yadava Jeve Rekha Wuntakal

- Industry relations & meetings

TC reported that industry relations remain excellent with more sponsors than every supporting the Silver Jubilee ASM which has been the main focus since the last report. So far we have raised in excess of £130k in support including five platinum sponsors.

- Research & Audit

JC reported that he was involved in the Endocentre Scientific advisory Group. CSG are progressing well. JC will present them at the BSGE SJM 15 if he gets a slot. JC is planning on working on common guidelines such as common procedures of laparoscopy and hysteroscopy.

We are currently supporting four portfolio RCTs funded by the NIHR:

PRE-EMPT – Preventing Recurrence of Endometriosis by Means of long acting Progestogen Therapy (recruiting in 6 pilot sites)

HEALTH – Laparoscopic subtotal hysterectomy vs. endometrial ablation for HMB (recruitment opened in all core sites, expanding to 20 sites).

UCON – Ulipristal vs LNG-IUS for HMB (recruitment to start spring 2015). Estimated first patient date March 2015, all sites identified.

GAPP – Gabapentin vs placebo for chronic pelvic pain (recruitment to start 2015)

We have also supported three other portfolio studies. The OPT trial (Outpatient vs. day-case polypectomy) is accepted and awaiting publication in the BMJ subsequent to which the full HTA report members again as I did in 2011 both suggesting and touting for some new benign gynaecology and MAS research ideas.

The first two publications from the BSGE endometriosis centre database have been submitted for publication. Paper 1: The location of pelvic endometriosis and its relationship to presenting symptoms has been accepted by Fertility and Sterility (F&S) subject to major revisions. Paper 2: Laparoscopic surgical treatment of deep infiltrating endometriosis involving the bowel or recto-vaginal septum: A multicentre prospective cohort study of over 2000 women has been rejected by the green journal and just recently by F&S. I had approached the EiC of BJOG about possible submission but given the 50% loss to follow up he was not confident it would make the mark. We will discuss with the BSGE Scientific Advisory Group set up by Dominic Byrne where to go next. My view is to put in the ESGE journal Gynaecological Surgery and then with Dominic's major updates on the database (mandatory fields) combined with strategies to ensure better follow up at set time points (aim for 70%) then we would hope to publish a six month prospective paper in a high impact specialist O&G journal in 2017.

- Laparoscopy

SU reported that the RCOG ATSM meeting in September has almost been finalised. We are also planning to hold some parallel practical / stack sessions during the ATSM meeting and will work on this after the annual meeting. The RCOG Sim pilot project is almost complete and feedback of the project will be given to the SIM NET group in September.

- Hysteroscopy

NW gave update on hysteroscopic morcellation of fibroids: NICE IPC guideline on hysteroscopic morcellation of fibroids is due to be published on 5 June 2015 after over a year of reviewing evidence on hysteroscopic morcellation as there was a confusion between hysteroscopic and laparoscopic morcellation, which was thought to be the same procedure. This resulted in NICE publishing a guideline, specifying that morcellation should be only performed in the context of research (special measures) due to risk of occult malignancy in the fibroid (April 2014) and a guideline been withdrawn.

OPT (Outpatient versus inpatient uterine polyp treatment for abnormal uterine bleeding: randomised controlled non-inferiority study) trial published in BMJ (23 March 2015). Main results: Outpatient polypectomy was non-inferior to inpatient polypectomy. Failure to remove a uterine polyp was, however, more likely with outpatient polypectomy and acceptability of the procedure was slightly lower. All bowel perforations occurred in the inpatient group (4 in 211 patients).

A survey of outpatient hysteroscopy services (produced by a BSGE hysteroscopy working group) is on the way and the preliminary results will be available for BSGE Jubilee Meeting in June 2015. These questions and answers will help to see how Outpatient Hysteroscopy Services are currently set up in the UK. Currently, 28% of services are using WHO checklist, 25% do not use consent for 'See and Treat' procedure, only 30% of patients are dirtily referred with clear patients pathway and 70% of services do not do routine pregnancy test despite mainly seeing premenopausal women.

Hysteroscopy Hands on Workshop is running one day before Jubilee meeting, covering all existing operative and diagnostic techniques of hysteroscopy with the participation of many companies showing their technological advances/new equipment.

- Nurse & Paramedic

GS reported on Endometriosis Clinical Nurse Specialists Project. This very exciting project has involved both professionals and charities working together to improve the care and health of women. A very successful launch event took place at the RCN headquarters, London on 3 March. As part of Endometriosis Awareness Week, the event highlighted the condition and gave specialist nurses time to network and reflect on their roles.

The RCN Women's Health Forum, Endometriosis UK and the BSGE have published a new fact sheet aimed at raising awareness of this condition with non-specialist nurses. This gives the main symptoms and information on what to do. It also includes a symptoms checklist for women to use. They have also published a document titled 'Clinical nurse specialist in endometriosis', which aims to guide nurses in developing their services.

The 12th Annual Nurse Hysteroscopy Conference took place on the 30th January 2015 at the University of Bradford. The event was attended by many Nurse Hysteroscopists, both trained and in training. Thanks to the hard work of Julia Pansini-Murrell, Kath Gale and the academic support staff at Bradford University the day was very successful. The agenda included audit Presentations, workshops and latest equipment/device updates from industry, who generously supported the event.

- Website & Communications

SK reported it has been an extremely busy few months for the Website and Communications Committee. SK is grateful to Atia, Natasha, Tom, Mark, Fevzi, Kirana and Chris who kindly offered to help and joined the committee. We have run two live webcasts in 2014, one on endometriosis and another on hysterectomy and myomectomy. Thanks to the excellent panel members who made the webcasts interactive, interesting and informative, we have received very positive feedback. This has been a new experience for us and look forwards to continuing to run these webcasts in 2015.

- Trainee representatives

FS updated members on trainees programme.

10. Future meetings:

- Joint BSGE/RCOG meeting- Benign Abdominal Surgery, 21-22 September 2015
- Joint BSGE/RCOG meeting- Diagnostic and Operative Hysteroscopy, 1-3 December 2015
- BSGE ASM 2016, 3-4 March 2016

11. AOB