# THE SCOPE

Newsletter of the British Society for Gynaecological Endoscopy

# **BSGE news...**

President's Message Full details of ASM25 Leeds NEW - The Legend Slot... Keith Issacson All the usual News, Portfolios and much more



Watch to see what a varied and impactful programme ASM25 has planned



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BRITISH SOCIETY for GYNAECOLOGICAL ENDOSCOPY

# Welcome



#### Welcome fellow BSGE members to our Sping 2025 edition of The Scope

## Message from the Editor



Dear BSGE members,

I hope everyone managed to enjoy some well-deserved rest over the holiday period, and that 2025 has started with fresh energy and anticipation of the year ahead. The BSGE diary is certainly full of fantastic opportunities for expanding skills and knowledge, plus always importantly, catching up with fabulous friends and colleagues across the globe.

2024 has been a brilliant year for the BSGE with an award winning, record breaking ASM in Belfast, another sell-out for the ACN meeting in Birmingham, a jam-packed webinar schedule and top "Brits abroad" BSGE representation at the ESGE in Marseille and the AAGL in New Orleans.

For those who couldn't attend the trips to France or the USA, we have fantastic reports and entertaining photos documenting the experience of the conference goers. Perhaps it'll inspire some new faces to join the BSGE family on their adventures this year, as the ESGE takes us to Istanbul in October and the AAGL to Vancouver in November. Anyone new to international conferences or feeling nervous about travelling solo, there is always a crowd from the BSGE to join for dinner or to sit with in the meeting. Don't hesitate to reach out if you're looking for a friendly face to connect with.

Plans for the BSGE ASM 2025 in Leeds are in full swing with tickets selling fast for both the conference and the social events. Be sure to secure your place and take advantage of the early bird prices which end on 24th March. In this edition of the Scope, we have a sneak preview of our inspirational guest speakers who will take the stage in The Royal Armouries, alongside 12 Leedsbased facts to prepare us for our visit. This year's meeting promises to be another exceptional opportunity for networking, collaboration, and learning, featuring groundbreaking research and engaging discussions on the latest advancements and hot topics in minimal access gynaecological surgery. We truly are spoilt for choice with 11 high quality and great value pre-congress workshops. We invite readers to submit their photos from Leeds for our next edition, which will be an ASM Scope special.





I am excited to announce a new feature in the Scope Magazine offerings. "The Legend Slot" will feature an interview with a superstar of gynaecological endoscopy. In this edition we present an exclusive interview with our very first legend, Keith Issacson, who shares invaluable insights from his extensive experience and perspectives on the future of gynaecological surgery.

Another exciting addition to The Scope, which I am sure will quickly become a reader favourite, is the new "Diagnostic Challenge" led by Lizzie Bean and Sian Mitchell from the diagnostics portfolio team. We encourage interaction and member submissions in preparation for our next issue. The team have also been busy integrating diagnostics into the ASM programme to enhance the educational content and boost awareness for non-invasive diagnosis of gynaecological conditions.

The remarkable work of the RIGS team continues to provide incredible support and training opportunities in minimal access gynaecology surgery. The trainee portfolio report showcases their contributions and commitment to improving training nationally. Congratulations to the newly appointed RIGS regional reps. I would encourage any trainee to seek opportunities to become involved in the RIGS team, and any consultants to support your local RIGS representatives by facilitating training sessions and promoting trainees' participation in this fantastic programme. Which region will win the prestigious suturing competition in 2025?!

In our news section, we detail the timely BSGE mission statement on gender and race led by Honorary Secretary Donna Ghosh. We also learn about the sobering report from the RCOG addressing the UK gynaecology care crisis. It is crucial that we advocate for our patients by striving to address these challenges and by identifying where we can make changes in our local services to positively impact and improve patient experience and outcomes.

Thank you to everyone who worked so hard to submit pieces for this edition of the Scope, and a special mention to Jane Gilbert who is the driving force behind each publication. I hope our newsletter reflects the diverse membership of the BSGE, the hard work and commitment to improving training and care for patients, and the fun, supportive community of our society. We welcome submissions from BSGE members, whether it be photos from a conference, a review of a meeting, an appraisal of an interesting scientific paper, or any thought-provoking developments relating to gynaecology.

I look forward to catching up with everyone at the sold-out ACN meeting in Birmingham in a couple of weeks and again in Leeds in April. For anyone seeking an additional challenge, find out how you can raise money for Endo UK by joining the annual BSGE charity bike ride from Carlisle to Leeds.

Best wishes

#### **Angharad Jones**

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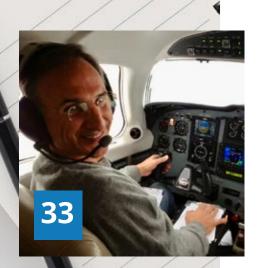


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Cover photo: Footbridge at Clarence Dock and the Royal Armouries museum in Leeds



# **President's Report**

# BSGE President Arvind Vashisht sent a seasonal message to all members, the updated message is included below:

#### Due to the nature of our work, undoubtedly some of us had to work over the Christmas period including the bank holidays, but I hope all of us managed at least some time to rest, recharge and be merry over the festive season.

I want to express my gratitude to all of you for your contributions to the Society, and to those of you who also give up time to serve on Subcommittees, the Council Members and Officers, to Charis and Atia.

Since our very successful Annual Scientific Meeting in Belfast, we have run an array of courses for trainees, nurse specialists and consultants and have exciting future plans for 2025.

During 2024 we have contributed to fellow Societies and their scientific programs, including sharing common goals at the BIARGS Meeting in Liverpool. We also had our usual strong presence at the ESGE Meeting in Marseille, where we proudly had the first presentation by a Nurse Hysteroscopist, our very own Caroline Bell. We have broken a glass ceiling and started to influence and highlight the importance of Nurse Specialists in the patient journey for our colleagues in the rest of Europe. I also felt very proud that my colleague and our former President, Ertan Saridogan, has now taken on the reins as the new President at ESGE.

We ran a very well attended BSGE session at AAGL in New Orleans and showcased some of the innovative work we have been doing in the UK treating diaphragmatic endometriosis. Our collaboration with overseas Societies strengthens our Society by giving an opportunity to learn from others, widening our spheres of interest, influence, training and education, improving awareness of our Society, as well as providing the possibility to increase our overseas membership. We have future cohosted sessions planned for Endo Dubai, as well as the AGES conference in Perth, Australia.

To kick off 2025 and as part of our pledge to improve diagnostics, we are running an inaugural ultrasound scan and endometriosis course, shortly followed by the Ambulatory Care Network meeting. GESEA, hysteroscopy and cadaveric anatomy courses further punctuate the first quarter of the year offerings.





This all leads up nicely to our ASM at the Royal Armouries in Leeds 30th April – 2nd May. Put it in your diaries! The Local Organising Committee and Council have worked hard to come up with an excellent program and I hope many of you will get the opportunity to join us and share in the educational and cultural showpiece that the ASM promises to be.

Just in case you were not satiated by the above, there are more treats from the Presidential stocking. We have plans for revamping the website with a key focus on adding to our surgical videos, as well as maintaining our complement of information and educational channels via our webinar series and Scope magazine; awards and bursaries a plenty, new training programs, as well as planning for our usual host of BSGE meetings in 2025.

I am delighted at the way that the BSGE has been able to set standards and maintain the key components of training, support and information for its Members and beyond. We seek to further improve by embracing innovation, diversity and new directions. This bodes very well for keeping us as a meaningful and progressive Society for 2025 and will help surmount the very apparent challenges that patients face to receive high quality care.

I hope everyone had a lovely Christmas and that you have returned refreshed, enthused and full of ideas and energy to support us in 2025.







# ASM 2025 – Bringing new skills to your armoury

#### 30th April to 2nd May 2025

Book your study leave and register now for the BSGE ASM 2025. The meeting will take place in the vibrant, cosmopolitan city of Leeds. Known as the unofficial capital of Yorkshire, Leeds is steeped in a rich history of medicine, innovation, and culture. Easily accessible by road, rail, and air, the city is also just a stone's throw away from the breathtaking Yorkshire Dales.

The Leeds Local Organising Committee promises to deliver a conference that combines cutting-edge scientific content with unforgettable experiences—all wrapped in a warm Yorkshire welcome.

Leeds is a compact, walkable city brimming with diversity, heritage, and modern vibrancy. Equidistant from London and Edinburgh, it's one of the UK's most accessible cities and serves as the perfect host for this year's conference theme: **'Bringing New Skills to Your Armoury'**.

#### A historic and unique venue

ASM 2025 will be held at the Royal Armouries, a world-renowned museum in Leeds Dock that houses one of the UK's most important collections of arms and armour. This distinctive venue offers a dramatic backdrop, blending modern facilities with historical charm. Delegates can explore galleries filled with fascinating artifacts, from medieval weaponry to intricately crafted tools of war. Special events, including a drinks reception in the Oriental Gallery and a medieval-themed exhibition area, will make this ASM truly unique.



Watch to see what a varied and impactful programme ASM25 has planned





#### **Convenience and comfort**

The iconic Queens Hotel, a newly renovated art deco masterpiece in City Square, will serve as the accommodation base and host of the much-anticipated Gala Dinner. With a history of welcoming luminaries like Grace Kelly, Cary Grant, and Nelson Mandela, the Queens Hotel promises a luxurious stay just minutes from Leeds station. Water taxis will ferry delegates to and from the Royal Armouries, adding a picturesque touch to your journey.

# An ambitious and impactful scientific programme

Under the leadership of Professor Adam Balen, the ASM 2025 scientific programme will feature three transformative streams:

- Enhancing UK's Leadership in Endoscopic Surgery
- Fostering Multidisciplinary Collaborative Work
- Applying State-of-the-Art Technology

Delegates can look forward to live-streamed surgery, debates and discussions and plenty of surgical tips and tricks.

The Leeds LOC, lead by Co-chairs Dorota Hardy and James Tibbott, has collaborated with industry partners to introduce innovative techniques and products while emphasising sustainable surgical practices and resource regeneration. Dorota summed it up:

#### "We have planned a very diverse, novel, and ambitious programme."

#### More for your money!

ASM 2025 has been extended to two and a half days, ending at lunchtime on Friday, 2nd May. This schedule allows attendees to enjoy a long weekend exploring the stunning Yorkshire countryside or return home in time for family commitments.

#### Living it up in Leeds

Leeds' vibrant nightlife, eclectic food scene, and proximity to the Yorkshire Dales make it an ideal destination for both work and play. The city's compact layout ensures easy navigation, creating excellent opportunities for socializing and networking.

Whether you're exploring historic landmarks, enjoying late-night entertainment, or savouring a meal at one of its many renowned restaurants, Leeds has something for everyone.

#### Conference social highlights include:

- Laparoscopic In-Armour Suturing Competition: Test your skills in this exciting, BSGE challenge.
- **Social Programme:** A packed schedule of events, including the RIGS Dinner, Royal Armouries Drinks Reception, and the grand Gala Dinner with dancing and after-dinner tickets available.

#### Don't miss out!

ASM 2025 promises to empower the gynaecological surgeons of tomorrow while offering an unforgettable experience in one of the UK's most dynamic cities. Join us in Leeds for three days of innovation, collaboration, and celebration.

Register now to secure your place and be part of this landmark event.

We can't wait to welcome you to ASM 2025!





Dorota Hardy

James Tibbott





# **Global Health at ASM25**

One of James Tibbott and Dorota Hardy, ASM25 Co-chairs', anticipated conference favourites is a BSGE first – a multidisciplinary session on Global Surgery which will explore endometriosis care in Kenya and setting up a minimal access surgery service in Uganda. Dorota told The Scope:

"I'm looking forward to our star session on global health. My colleague John Dalton has been travelling to East Africa since 2005 and contributed to an inaugural laparoscopy camp at Mengo Hospital, Kampala, Uganda in March 2024. He has invited colleagues from Uganda and Kenya as well as those closer to home and created this unique, first of this kind session at the BSGE ASM."



The session will take place on the Thursday 1st May, the second day of the conference, from 9-9:25 in the Royal Armouries Hall. Presentations will include:

- Endometriosis care in Kenya
- Gasless Laparoscopy and rural surgery
- Getting laparoscopy off the ground at Mengo Hospital, Kampala









# International experts and thought leaders at ASM25

Dorota Hardy, Co-chair of the Leeds LOC, shares some of her anticipated highlights of this year's ASM

Several inspirational lecturers and MAS pioneers are travelling from near and far to present their lifetime experience in gynaecological surgery and share their skills, knowledge and insights at ASM 2025 in Leeds.

# The Alec Turnbull Lecture presented by Professor Adam Balen

Professor Adam Balen will deliver the prestigious Alec Turnbull Lecture at this year's ASM. Sir Alec Turnbull was a Professor of Obstetrics and Gynaecology in Oxford and a key figure in the development of minimally invasive surgery in the UK. Every year the BSGE organises a keynote lecture at the ASM in his honour.

Adam is a Leeds local, he is currently an NHS consultant at Leeds Teaching Hospitals NHS Trust, with a personal Chair in Reproductive Medicine and Surgery. He is clinical lead of a large multidisciplinary reproductive medicine service, including the supra-regional paediatric and adolescent gynaecology service for the North of England.

Amongst numerous national and international roles over the last 30 years, Adam is former Chair of the British Fertility Society (BFS) and the ESHRE SIG for Reproductive Medicine. He sat on Council for RCOG for six years, is a member of the WHO Guideline Development Group for infertility and PCOS, and was responsible for formulating the FIGO definition of disorders of ovulation. In recognition of his research, Adam was awarded a personal (honorary) chair in 2004 and a DSc in 2010, by the University of Leeds.

Throughout his career, Adam has worked with many of the pioneers of IVF including its founders, Bob Edwards and Howard Jacobs. It was a time of significant innovation in both fertility treatment and the development of minimal access surgery. Adam said:







"Bob had initially commuted between Cambridge and Oldham, where the gynaecologist Patrick Steptoe had introduced laparoscopic surgery to the UK and enabled access to the human ovary for the first time." He added that: "Real-time ultrasound was evolving by the time I started doing egg collections, and we were amongst the first to use transvaginal ultrasound, although I also learned to do laparoscopic egg collections in the beginning. Bob was a truly inspirational man, and we enjoyed many fruitful and entertaining conversations."

As Scientific Lead, Adam has been instrumental in preparing the scientific programme for ASM 2025. He told The Scope:

"It has been an honour to chair the programme committee for this year's BSGE ASM in Leeds. We have a fabulous team who have worked tirelessly to ensure the meeting is a success. We have invited some fabulous speakers who are true experts in their fields and will be covering a range of topics both familiar and new - something for everyone, whether you are an expert or just starting out. There's always a lot to talk about endometriosis but so many other important topics too, from the management of congenital anomalies, urogynaecological conundrums and fertility enhancing surgery. We will be discussing how to get fit for surgery to optimise outcomes - enhancing lifestyle is a hot topic these days. We won't be shying away from debating controversial issues and how to deal with complications."

"I also am honoured to be giving this year's Sir Alec Turnbull lecture, which will cover how I have seen the evolution of reproductive medicine since I started my career back in 1978 - the year that Louise Joy Brown, the world's first IVF baby, was born.

"We have a great social programme too - Leeds is a vibrant city and the organising committee have enjoyed sampling what's on offer at the different venues! So be sure to book your place before the tickets sell out!"

Don't miss Professor Adam Balen's keynote lecture in the Royal Armouries Hall on Wednesday 30th April at 14:00.

#### Reflections on a lifetime in Gynaecological Endoscopy by Ray Garry

Professor Ray Garry will present his keynote lecture at the ASM in Leeds. Ray was a founding member, Honorary Secretary and eventually President of the BSGE. He was board member of the ESGE and ISGE who both awarded him commendations of excellence and a board and life member of AGES. His awards include the Harry Reich Award for Pioneering Work in the Science and Treatment of Endometriosis and an award by the World Endometriosis Society for being one of the most influential workers in the field of endometriosis during the first decade of the 21st century.

As a pioneer in the development of minimal access surgery, Ray told the Scope about his experience watching the innovative American surgeon Harry Reich operate on complex endometriosis and how it changed his approach to endometriosis surgery:

"By the time I started laparoscopy, I'd been a consultant for years. At this time, endometriosis was considered to be only little spots. Much time was devoted to determining the difference between clear, red and black spots. I thought myself an expert at removing these lesions with my laser until I visited Harry's to watch him operate over two weeks.







This was my Damascene conversion. I observed one of his 'foreveroscopies'. I stood semi bored, watching him chop out hard fibrotic material that I considered 'burnt out' and of no significance. Harry patiently removed all of this, as I considered, clinically irrelevant material. He filled 19 separate specimen bottles, and by the time he'd finished, I brashly said, 'what a waste of time'. In reply, he said, 'go to the path lab and look'. To my amazement, every single sample contained endometrial glands and stroma indicative of active endometriosis. This brought self-realisation that everything I had considered 'good science' and 'good practice' was absolutely wrong! This, of course, opened a can of worms because the response required the diligent removal of all this difficult material which was technically very challenging. Painfully mastering this approach gradually but seriously improved patient outcomes, which we subsequently proved in a randomised clinical trial."

Don't miss Professor Ray's lecture at 15:00 in the Royal Armouries Hall on Wednesday 30th April.

# Women and surgery and breaking the glass ceiling by Liselotte Mettler

Liselotte Mettler was born in Vienna, Austria. After finding a love for Obstetrics and Gynaecology in the Peruvian jungle she conducted her medical studies, doctorate, gynaecological specialist training, and professorship in Tübingen, Vienna, and Kiel. She was Deputy Director of the Department of Obstetrics and Gynaecology at the University Hospitals Schleswig-Holstein, Director of the Kiel School of Gynaecological Endoscopy and Head of the Kiel Gynaecological Endocrinology and Reproductive Medicine Division. Liselotte was a pioneering surgeon and one of the first to offer women laparoscopic hysterectomies in Europe.

Since 1973 'Lilo' has attended nearly all major endoscopic and IVF conferences in the world. She is an acclaimed surgeon, winning an Excel Award from the Society of Laparoscopic and Robotic surgeons. Her private life has been no less exceptional with an Olympic bronze for swimming in the 1960 Olympics and a wonderful love story described in her book 'Long, long ago.'

A mother of four Liselotte Mettler has also combined an enormously successful surgical career with the balances of family life. However, she has faced enormous challenges including misogyny. She told The Scope that she has experienced sexism during her career:

"I have experienced this a great deal. Even my chief Kurt Semm - if he could get any male really interested in the work, he would always prefer that. So it took years for him to understand that females can do the same thing and that it's about dedication - it's neither female or male - one can do the same if they take anatomical knowledge and are persistent"

Liselotte will share her experiences of women and surgery and breaking the glass ceiling at 14:00, Friday 2nd May in the Pearl Suite.







# ASM25 Pre-congress courses

The pre-congress programme at ASM25 offers something for everyone. The BSGE is running eleven workshops and masterclasses on Tuesday, April 29th in Leeds. The programme features lots of old favourites and some exciting new innovations, but places are going quickly, so register now to guarantee your place.

#### Pre-congress Workshop Advanced Urogynaecology

This is a one-day surgical simulation workshop, a unique opportunity to participate in hands-on surgical techniques for pelvic organ prolapse and urinary incontinence.

#### Fully booked!

#### Pre-congress Workshop Da Vinci Surgery

This workshop offers hands-on experience with the da Vinci Xi surgical system.

Fully booked!

#### Pre-congress Workshop Cadaveric Endometriosis Masterclass

Enhance surgical skills and knowledge in the surgical management of endometriosis.

Fully booked!

#### Pre-congress Workshop Endometriosis CNS Education

A fun, engaging, and educational experience designed to refresh and enhance clinical skills and knowledge.

**Register here** 

#### Pre-congress Workshop Gynaecological Response to the Acute Surgical Presentation (GRASP)

Preparing gynaecological surgeons for the emergency scenarios.

**Register here** 

#### Pre-congress Workshop Chronic Pelvic Pain

This full-day workshop explores the complexities of chronic pelvic pain (CPP) through a multidisciplinary lens, addressing its physiological, psychological, and social dimensions.

#### Register here

#### Pre-congress Workshop Hysteroscopy

Combining lectures, case study discussion and practical stations.

Fully booked!

#### Pre-congress RIGS ST5-7 Handson Laparoscopic Workshop

This intensive practical simulation course is arranged jointly by BSGE RIGS.

Fully booked!

#### Pre-congress Workshop Transcervical Fibroid Ablation (Sonata Treatment)

The workshop will combine lectures, case study discussion and practical stations.

**Register here** 

#### Pre-congress Workshop Gynaecological Ultrasound for Minimal Access Surgery

Lectures and case studies applicable to all major diseases encountered in everyday minimal access gynaecology.

**Register here** 

#### Pre-congress Workshop vNotes

The Leeds 2025 VNote workshop is aimed at Consultant and Senior Trainees (ST6/7) who are interested in understanding this novel endoscopic procedure.

Register here

If you would like to be put on waiting list for any of the workshops, please email <u>bsge@outsourcedevents.com</u>



# Gynaecological Response to the Acute Surgical Presentation (GRASP)

BSGE

#### Who is this aimed for?

This programme is aimed at preparing senior gynaecological trainees and gynaecology consultants for emergency scenarios they may face when in theatre or on-call. By developing a strategy for approaching typical presentations such as acute haemorrhage, or the perioperatively compromised patient, it will help standardise the management of the acutely unwell patient and reduce the impact of human factors that come into play. There is the potential to develop multi-disciplinary programme to include nursing and theatre staff who regularly practice in gynaecology.

#### What's the format of the course?

This will be a one day, face to face, interactive course. It will be run within simulation equipment where real-time scenarios can be simulated within a realistic environment. There will be a combination of lectures, tutorials as well as emergency simulation drills. Each scenario will have an associated algorithm developed for optimal and timely management.

#### Faculty

- > Donna Ghosh MBBS BSc (Hons), FRCOG
- > Jessica Preshaw MRCOG
- > Lina Antoun MRCOG
- > James Tibbott MRCOG
- > Jay Ghosh BSc MBBS PhD MRCOG
- > Jennifer Tamblyn MBChB BmedSci PhD MRCOG
- > Sabrina Butt MRCOG
- > Carl Ilyas FRCoA
- > Robert Jackson FRCoA
- > Paul Panesar FRCoA

#### **Expert speakers**

- > Lilli Cooper MRCS (Plast) Post CCT fellow
- > Jacqueline Clarke MBBS, MRCOG PGCert
- > John Coughlan KC, BCL, LLb (Hons)
- > Jonathan Ghosh FRCS

#### Programme

09:00-09:10...Welcome and introductions All faculty 09:10-09:50 ... Managing pressure to optimise performance (40min) Miss Lilli Cooper MRCS (Plast) Post CCT fellow 09:50-10:30 .. Scenario 1/2/3 (delegates into 3 groups to rotate) 10:30-10:50....Coffee Break 10:50-11:30 .... Scenario 1/2/3 (delegates into 3 groups to rotate) 11:30-12:10.....Scenario 1/2/3 (delegates into 3 groups to rotate) 12:10-12:40 .... How the gynaecologist can optimise the patient with acute vascular injury Mr Jonathan Ghosh, Consultant vascular surgeon 12:40-13:00....Industry sponsored lecture TBC 13:00-13:40....Lunch 13:40-14:10 .... Interactive session - developing an algorithm in your unit Mr James Tibbott, Consultant Gynaecologist 14:10-15:00 .... Panel discussion of challenging cases 15:00-15:30....Common legal themes and pitfalls in gynaecological surgery John Coughlan, KC No 5 Chambers 15:30-15:45 .... Tea break 15:45-16:25 .... Debrief and reflection following an incident Dr Jacqueline Clarke, Consultant Obstetrician 16:25-16:45....Discussion and close

#### **Register here**





VBSGE

#### Description

#### Innovations in Pelvic Pain: A Multidisciplinary Approach.

This full-day workshop explores the complexities of chronic pelvic pain (CPP) through a multidisciplinary lens, addressing its physiological, psychological, and social dimensions. Featuring leading experts, interactive sessions, and cutting-edge discussions, the event offers attendees actionable insights into innovative treatments, communication strategies, and service design for effective CPP management.

#### Objective

#### Understanding pain mechanisms

Explore how pain develops and transition into chronic conditions, including neuropathic, nociceptive and nociplastic pain mechanisms. Explore the connections between CPP and fibromyalgia, understanding the shared pathways of central sensitisation and widespread pain.

#### **Uncover the Drivers of Chronic Pain**

Explore the hormonal connections, sleep secrets, and lifestyle habits that can amplify or calm pelvic pain. Decode the biopsychosocial blueprint to better understand chronic pelvic pain

#### Master the art of collaboration

Engage in interactive workshop to identify biases, improve communication and foster empathy in managing pelvic pain

#### **Discover multimodal pain solutions**

Discover groundbreaking approaches to tackle complex challenges like bladder pain syndrome, pelvic floor dysfunction, and myofascial pain. Learn how to integrate transformative therapies like neuromodulation and pelvic nerve blocks for pain relief.

#### Tackle the invisible impact of pain

Shine a light on the emotional toll of chronic pelvic pain - its effect on intimacy, relationships and mental well-being. Empower patients with mindset shifts and strategies in a bid to improve quality of life.

#### Explore the future of chronic pelvic pain

Learn about innovative technologies shaping the future of chronic pelvic pain care.

#### Who should attend?

Primary care providers, Gynaecologists, Nurse specialists, Physiotherapists, Medical students, Specialist trainees, Mental health providers, Pain management specialists. Allied healthcare practitioners.



#### Tuesday, 29th April 2025

Start time: 09:00 End Time: 16:30

Registration fee: £75 Maximum delegates: 50

#### Address:

Bridge Community Church Conferencing Poplar Room 2 Rider Street Leeds LS9 7BQ

#### **Course organiser:**

> Karolina Afors

#### **Register here**

Delegates will be able to claim 6 CPD credits for attendance.



# Pre-congress Workshop Gynaecological Ultrasound for Minimal Access Surgery

BSGE

#### Objective

- To understand how advanced ultrasound techniques can transform the patient pathway and optimise surgical treatment
- To develop an understanding of recent progress in advanced ultrasound techniques as applied to common disease treated by minimal access surgeons
- To gain an understanding of the research evidence base for the use of ultrasound in gynaecology



Supported by

#### Description

After a successful introductory pre-congress workshop in Belfast 2024, we are pleased to be offering the BSGE course on gynaecological ultrasound for minimal access surgery in Leeds 2025.

The workshop will provide lectures and case studies applicable to all major diseases encountered in everyday minimal access gynaecology.

We will focus on early pregnancy complications, adnexal pathology, uterine pathology, 3D ultrasound and non-invasive diagnosis of pelvic endometriosis, including assessment of the bowel and urinary tract. Lectures will be given by leaders in their field who all have a detailed understanding of minimal access surgery and the use of ultrasound to enhance patient care.

#### Who should attend?

The workshop is aimed at nurses, radiographers, radiologists, resident doctors and consultants practicing gynaecological ultrasound that want to develop their clinical practice.

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#### Tuesday, 29th April 2025

Start time: 09:30 End Time: 16:30

# Registration fee: £200

Maximum delegates: 50

#### Address:

Horizon Leeds 3rd Floor, Create@1 2 Brewery Wharf Kendell Street Leeds LS10 1JR

#### Course organiser:

> Elisabeth Bean

#### **Register here**

Delegates will be able to claim maximum of 6 CPD credits for attendance





VBSGE

#### **Objective**

The pre-congress workshop aims to offer a fun, engaging, and educational experience designed to refresh and enhance clinical skills and knowledge. This day is all about learning from each other, sharing experiences, and strengthening our collective expertise to improve clinical practice.

#### Description

In addition to the insightful sessions, we've planned plenty of opportunities for socialising and connecting with fellow colleagues, making this a great event for both professional development and building lasting relationships.

The workshop aims to explore:

- Case study discussions.
- Care strategies and insights for real-world application.
- Expert-led sessions on improving clinical outcomes in endometriosis management.
- Networking opportunities with fellow Clinical Nurse Specialists and healthcare professionals.

\*Please note the agenda is subject to change.

#### Who should attend?

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This event is designed for all Endometriosis Nurse Specialists and all Nurses with an interest in caring for women with Endometriosis, seeking to enhance their knowledge, refine clinical skills and engage with the experts and network with peers.

#### Tuesday, 29th April 2025

Start time: 09:00 End Time: 17:30

Registration fee: £100

# Maximum delegates: 50

#### Address:

Bridge Community Church Conferencing The Acacia Room Rider Street Leeds LS9 7BQ

#### **Course organisers:**

- > Claudia Tye
- > Jenny Shaw
- > Zway Magama
- > Rosie McCluskey
- > Sophie Patrickson

#### **Register here**

Delegates will be able to claim 7 CPD credits for attendance.





# On your bike- registration for the 2025 BSGE Charity Cycle Ride is now open

Registration for this year's BSGE Charity Cycle Ride is now open. The 2025 challenge will be a two-day bike ride from Carlisle to Leeds through the beautiful countryside of the Lake District and the Yorkshire Dales. The ride starts on Sunday 27th April and finishes on Monday 28th April to allow those attending or running pre-congress workshops to be able to join in. The band of intrepid cyclists will take to their bikes to both raise awareness about endometriosis and also raise funds for Endometriosis UK.

Last year, 27 fearless riders, supported by two heroic volunteers, cycled 242 miles and raised over £15,000 for Endometriosis UK. Ed Harrison, one of #teamendo said:

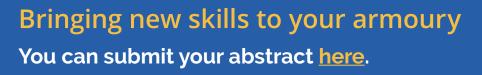
"2024 saw the biggest ever turn out for the annual BSGE Endometriosis UK charity cycle ride! This year's goal was not solely to try and recruit more riders but to ensure we represented as many groups from our multidisciplinary team as possible; and that we did! We had a 27 strong, band of endo nurses, trainees and surgeons and a flock of industry reps from Cooper Surgical. Not to mention our two invaluable support crew Lizzie and Lutfi, bringing us our largest and most inclusive ride to date."

If you would like to be part of this exciting event then register at: BSGE Charity Cycle Ride 2025 | Endometriosis UK.





# ABSTRACTS DEADLINE EXTENSION DEADLINE: 5TH FEBRUARY 2025







# Twelve things you didn't know about Leeds

Whether you're a history buff, foodie, cyclist or nature lover, Leeds has something to offer everyone. There's so much more to this vibrant Yorkshire city than meets the eye. Here are twelve fascinating facts about Leeds to enrich your visit. Why not extend your visit to Yorkshire and uncover some of these hidden gems while you're here?

#### 1. The birthplace of Cluedo



The classic murder mystery board game Cluedo was invented by Anthony E. Pratt, a solicitor's clerk from Leeds. Originally named "Murder!", the game has gone on to become a worldwide phenomenon, making Leeds an unexpected hub of mystery and intrigue! Murder at the ASM? It was Professor Plum in the conference room with the lead piping!



Leeds is home to the Middleton Railway, established in 1758. Initially built to transport coal, this railway still operates today as a heritage line run by volunteers, making it the oldest continually operating commercial railway in Europe. Why not take a ride on one of the regular steam or diesel runs on the 'Little Railway with a Big History?'

#### 3. A foodie's paradise



Leeds Kirkgate Market is one of the largest indoor markets in Europe, with over 800 stalls. It's also the birthplace of Marks & Spencerthe first M&S penny bazaar opened here in 1884. Don't miss the chance to explore the market's diverse culinary offerings, with street food stalls, including traditional Yorkshire dishes like Yorkshire pudding and parkin. The ASM will also offer you the opportunity to sample some culinary delights at the Gala Dinner in the Queen's Hotel, the RIGS Dinner and the BSGE Dinner at the fabulous Sky Lounge, a show-stopping venue with the perfect backdrop of the Leeds city skyline.

#### 4. The Leeds literary connection

Did you know that J.R.R. Tolkien, the author of The Lord of the Rings, lived and

worked in Leeds? He was a professor at the University of Leeds in the 1920s and co-authored A Middle English Vocabulary during his time there.







To explore more of Yorkshire's literary heritage, head out of Leeds across the wild and rugged moorland to Haworth, the home of the Bronte sisters. The home where they lived and wrote, the Bronte Parsonage now houses an excellent museum and the town is a beautiful place to explore - but, take it from The Scope team, the famous cobbled hill is an absolute killer to cycle up!

#### 5. The Leeds-Liverpool Canal



The Leeds-Liverpool Canal is the longest canal in Northern England, stretching 127 miles. It took nearly 46 years to complete and played a crucial role in the Industrial Revolution. The canal passes the Royal Armouries, the stunning venue for ASM 2025. Today, it's a scenic route for walkers, cyclists, and narrowboats and the perfect escape from the hubbub of the city.

#### 6. Shop 'til you drop



The <u>Corn Exchange</u> is one of the finest examples of Victorian architecture in the city. It is now a hub for independent shops, boutiques, and eateries. Its striking domed roof is an architectural marvel and a must-see for visitors. Leeds is also home to a network of <u>Victorian</u> and modern arcades housing designer shops such as Harvey Nicks and Vivienne Westwood, high street favourites, vintage gems and independent boutiques.

#### 7. The city with hidden owls



Leeds' civic symbol is the owl, and you'll find them hidden all over the city – from statues to building facades. Keep an eye out for these feathered friends as you explore. It's a fun scavenger hunt during ASM breaks!

#### 8. Hollywood loves Leeds



Several blockbuster movies and TV dramas have been filmed in and around Leeds, including The King's Speech and Downton Abbey. The city's stunning Victorian architecture makes it a favourite location for period dramas. Why not visit <u>Harewood</u> <u>House</u>, a stately home with opulent interiors and scenic grounds that served as the home of Princess Mary in the *Downton Abbey* movie?



#### 9. Gateway to the Yorkshire Dales



Leeds also serves as the perfect gateway to the Yorkshire Dales National Park, a stunning area of rolling hills, beautiful villages, and dramatic landscapes. Just a short journey from the city, it's ideal for a post-ASM escape into nature, a day of hiking and exploring or a delicious pub lunch.

#### 10. A medical history hub



Leeds boasts a rich medical heritage, showcased at the <u>Thackray Medical Museum</u>. Located in a former workhouse next-door to Leeds' famous Jimmy's hospital, the museum offers an eye-opening look at the history of medicine, from gruesome Victorian surgical practices to modern advancements. It's a fascinating and unique attraction for visitors.

#### 11. Cycling hotspot

BSGE



Leeds has a special place in cycling history as the starting point for the 2014 Tour de France Grand Départ. The event highlighted the city's love for cycling and its surrounding picturesque landscapes, making it a centre for both professional and recreational cyclists. Today, Leeds continues to embrace its cycling culture, offering numerous trails and hosting cycling events.

#### 12. Green City



With over 4,000 hectares of green space, Leeds is one of the greenest cities in Europe. Roundhay Park, one of the largest urban parks in the world and a historic concert venue, spans more than 700 acres and offers a beautiful escape from the city hustle. Head a little further south of the city and you can explore art outdoors at the <u>Yorkshire</u> <u>Sculpture Park</u>, the best and most dynamic collection of outdoor sculpture in Britain in 500 acres of gorgeous landscape.



# ESGE 33rd Annual Congress

# Caryl Thomas reports on the ESGE Congress which was held from 27th-30th October in Marseille.

The Sunday morning flight from London to Marseille was overflowing with Gynaecologists. A few of us had the same idea...to escape the gloomy British weather in search of sunshine, French cuisine, a tipple of Provence rosé, and, of course, attending the ESGE Congress. Upon arriving in the oldest city in France, we made a beeline to the Old Port. The schedule was busy, the Congress had a jam-packed three-day timetable which rolled into evening symposiums, diners and socialising.

Our first day of Congress did not disappoint! The renowned Dr Shailesh Puntambekar, who presented the Alec Turnbull Lecture on Uterine Transplant at BSGE ASM 2019 delivered an inspirational keynote lecture on changing the paradigm in pelvic anatomy, presenting new insights following uterine transplant. It was amazing to see how far the field has come in just five years. Live surgery showcased a range of slick surgical techniques from robotic oncology cases to the excision of deep endometriosis and advanced hysteroscopic interventions.





Every seat was taken at the BSGE session, with engaging talks from Mr Angus Thomson, Mr Martin Hirsch, Mr Funlayo Odejinmi and Ms Rebecca Mallick. One of the afternoon highlights was the endometriosis session, co-chaired by Professor Wattiez, which presented the latest evidence on the surgical management of bowel endometriosis. The day concluded with the anticipated ESGE laparoscopic suturing competition. It was great to see UK residents taking part.

Day two began with a session dedicated to the precision and progress of Robotics in gynaecological surgery. Robotic surgery has been gaining traction at ESGE in recent years, and it was fantastic to see it take centre stage in this year's programme. After a few rounds to the exhibition hall for a much-needed caffeine fix at the Industry Barista, we were ready for more learning. The 'hot topic' Neuropelveology session was a standout, with impressive laparoscopic video demonstrations on how to spare the hypogastric and pudendal nerve during excisional surgery.



No ESGE Congress would be complete without the Congress party! After a day packed with discussions on laparoscopic, hysteroscopic, robotic techniques, and 'how are you going to get that out', we were ready to unwind and relax. It's always a great opportunity to catch up with old friends, meet new colleagues, and share ideas with professionals from across the globe. The ESGE Congress is a must-attend event – make sure to mark it in your calendar. The next Congress is set to take place in Istanbul next October. See you in Türkiye!









# Liz Bruen reports on her experience, as a nurse hysteroscopist, at the ESGE Congress

The ESGE ASM in Marseille 2024 was a fantastic experience. It was great to reconnect with European colleagues but also to see so many multidisciplinary BSGE members as well. There was a wide selection of discussions and presentations to satisfy sharing of knowledge of experience for hysteroscopic and laparoscopic interests. I was particularly impressed with the focus on adolescents with gynaecology issues and their management and expectations.

I was also delighted to see that my friend and colleague Caroline Bell was formally invited to attend, the ESGE clearly demonstrated recognition of the benefits for multidisciplinary working.

This is a great step forward and can only result in even more nurse hysterocopists and endometriosis clinical nurse specialists attending and contributing to future meetings.

Industry supported the meeting with its usual abundance, it was great to see the advances that continue to be developed to help improve patient care and clinical outcome.

I was delighted with my visit to Marseille and was so impressed by the surroundings; the historical sites; incredible sea front and the best steak and chips I have ever had. Would highly recommend a visit.





# Ambulatory Care Network Meeting 2025

#### Professor Justin Clark reports on plans for the sold-out ACN meeting in Birmingham in February 2025.

The 6th BSGE Ambulatory Care Network will shortly be upon us. We are delighted that the meeting has sold out with more than 220 delegates attending. We are so pleased about the popularity of the ACN and your support. Ambulatory interventions are key to the delivery of contemporary gynaecology and there remain many uncertainties and unanswered questions and so a forum to share experience, best practice and ideas is most welcome.

We are sorry to disappoint some of you because from an 'elf and safety' point of view we are at full capacity at the Grand Hotel in Brum so whilst we would like to take everyone our hands are tied. Going forward we can look at hiring a conferencing centre to accommodate more people and of course a nice nearby hotel to stay and have our network meal.

In other ACN news, the BSGE website will have a section for the ACN where presentations and outputs from our previous meetings can be accessed. In addition, research and quality assurance publications arising directly from the collaborative work of the BSGE ACN and important guidelines and audit tools / patient reported outcome measures 'PROMs' will be available to download for use in your own day to day practice.

I look forward to seeing many of you on the 13-14 February in Brum and also at the upcoming ASM in Leeds.







# 13th and 14th February 2025



## Learn

Presentations from national and international experts on topics relevant to outpatient hysteroscopy.



#### Discuss

Discuss interesting cases, address controversies and share ideas. Consider the changed landscape after Covid, learn about new innovations in practice and health technologies / pharma.



#### Collaborate

Be part of a national network, sharing good practice and filling gaps in evidence.

#### Venue

- The Grand Hotel, 1 Church Street,
- Birmingham, B3 2FE

Supported by











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# **BSGE News**



## **BSGE Mission Statement on Gender and Race**

The BSGE launched a mission statement on race and gender equality in November, 2024. Honorary Secretary Donna Ghosh announced the new statement to members:

At the British Society for Gynaecological Endoscopy (BSGE) we are proud of the diversity represented within our society and are dedicated to ensuring inclusivity and opportunity for all our members. Recent Royal College of Obstetricians and Gynaecologists (RCOG) reports have highlighted difficulties and bias faced by members based on many factors including gender and race.

The RCOG workforce report identifies that Obstetrics and Gynaecology has the highest number of female trainees (61%) of any speciality within medicine. Amongst these, there is a disproportionately low number of females completing surgical subspecialties, such as advanced laparoscopy, beyond that of the expected gender divide. Similar disparities are seen in the 2023 GMC workforce report highlighting the lowest proportion of female doctors were seen within general surgery.

We also acknowledge that racial discrimination can also be also experienced. The 2024 RCOG Experiences of racism and discrimination document identified that 41% of respondents stated ethnic background hampered their career progression.

As the largest specialist surgical society of the RCOG it is our responsibility to try to understand and address the barriers to underrepresentation that exist within the field of gynaecological surgery.

#### Our BSGE mission statement on gender and racial equality is to ensure:

All members feel represented and are encouraged to participate within the core of our society.

The society will recognise expertise and achievement in surgery, research and education, across gender and race and promote this through the forum of conferences, meetings and other educational events.

That we provide a platform for mentorship of members of all genders and ethnicity in gynaecological endoscopy.

That we identify, discuss, and address the gender and racial-specific challenges faced within gynaecological endoscopy.

The BSGE acknowledges the multifaceted influences that affect personal career decisions, and many trainees choose not to embark on a surgical career. However, the society is clear that this decision should not be due to lack of opportunity, representation or discrimination. The BSGE, is committed to ensuring that the journey of those who choose to pursue a career in gynaecological endoscopy, contributing to our inclusive society, remains equitable and supported.





# **BSGE News**

## Jonathan Frappell Memorial Lecture

# The Plymouth Medical Society are holding a Memorial Lecture in honour of Jonathan Frappell on 21st February 2025 at Plymouth PGMC.

Jonathan Frappell was a Past President of the BSGE and a valued colleague.

Tim Hookway described Jonathan as:

"A true gentleman, a giant of gynaecology and a pillar of society. It may well be a cliché, but nobody ever heard him say a bad word about anyone – and he never said a bad or unkind word about anyone else. He will be sorely missed by all."

Mark Coleman, Consultant Surgeon at University Hospitals Plymouth NHS Trust, invited BSGE colleagues, friends and members of the Obstetrics and Gynaecology community to the lecture saying:

"21st Feb 2025 will be almost a year since the sad passing of Jonathan Frappell. Dame Lesley Regan DBE will give a lecture in memoriam, and I hope many of you and your colleagues and partners will attend.

*Susie Frappell, his widow, and members of his family will be there. Non PMS members are welcome, including for the dinner afterwards."* 

Dinner will also be served following the lecture from 18.30-20.00 (£35pp) and can be booked through the email address below.

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Friday 21<sup>st</sup> February 2025 18.30 Plymouth PGMC Dame Lesley Regan DBE Lecture: The Jonathan Frappell Memorial Lecture <u>membership.pmsoc@gmail.com</u> for details and dinner









# **BSGE News**

# RCOG report reveals devastating impact of UK gynaecology care crisis on women and NHS staff

A new report published in November by the Royal College of Obstetricians and Gynaecologists revealed the true scale and impact of the UK's gynaecology care crisis, with over three quarters of a million (763,694) women and people currently waiting for months and years with serious gynaecological conditions. The report will be no surprise to BSGE members who face the impact of these delays daily in their practices.

The RCOG report highlighted the fact that the number of women waiting for hospital gynaecology services in the UK would fill Wembley stadium eight times over. Indeed, more women are also now requiring emergency care to manage severe symptoms, with gynaecology emergency admissions in England increasing by a third (33%) between 2021 and 2024.

Developing the new report, 'Waiting for a way forward: Voices of women and healthcare professionals at the centre of the gynaecology care crisis', the RCOG surveyed over 2000 affected women and over 300 healthcare professionals to fully understand the impact of the care crisis.

Over three quarters (76%) of women waiting for care reported worsening mental health and over two thirds (69%) reported being unable to take part in daily activities including work.

Healthcare professionals reported being deeply concerned for their patients and the majority of primary (65%) and secondary care clinicians (69%) surveyed reported their own health and wellbeing has been affected by managing pressure in their clinics.

Additionally, over 90% of primary care professionals reported a severe impact on general practice due to longer waits for hospital gynaecology services.

A way forward is urgently needed, and the RCOG is calling on the UK Government to deliver urgent help for women and people currently waiting for hospital gynaecology care, and for longterm, sustained funding to address the complex systemic issues driving waiting list growth.

Waiting for a way forward was funded by Theramex and follows on from the RCOG's 2022 Left for Too Long report, and makes recommendations on how governments can support the health system to deliver high quality gynaecology care across the UK.

Dr Ranee Thakar, President of the Royal College of Obstetricians and Gynaecologists, said, "A way forward is urgently needed to tackle the UK gynaecology crisis. Our new report shows too many women are waiting too long with serious conditions that can devastate their lives. NHS staff are also deeply concerned and distressed that they do not have the necessary resources to deliver good care, affecting their own wellbeing.

"UK governments must act now. The RCOG is calling on them to commit to long-term, sustained funding to address the systemic issues driving waiting lists, alongside delivering an urgent support package for those currently on waiting lists.

"This investment will not only benefit thousands of individual women but the wider economy too, because the evidence shows that healthy women are the cornerstone of healthy societies. Get it right for women and everyone benefits."

Jane Plumb, RCOG Women's Voices Lead, said: "The state of gynaecology waiting lists in the UK is a crisis that demands immediate attention. Millions of people are waiting for non-cancer hospital



# **BSGE** News

gynaecological care, many are suffering with severe pain and heavy bleeding, and the impact on their physical and mental health is devastating.

"The heart-wrenching testimonials we've heard underscore the significant consequences of these delays. It's imperative that all UK governments prioritise this issue, allocating resources to provide timely, compassionate care. Women's voices must be heard, and we must take action now to address their urgent needs and alleviate their suffering."

India Weir, 27 from near Edinburgh, comments: "I've been living with chronic pelvic pain and significant symptoms associated with endometriosis since 2017 and have been on and off gynaecology waiting lists throughout this time. I'm currently waiting for surgery to manage my deep infiltrating endometriosis and ovarian cysts.

"Physically, being in pain every single day takes a huge toll on me whilst I have to get on with day-today life. Also, living with the uncertainty of when I'll undergo surgery makes it hard to plan ahead. It impacts every part of my life and my quality of life. My relationships, friendships, social life, career and mental health are all affected – and my condition is getting worse without treatment and relevant care."

Kerry Briggs, early 50s from near Manchester, commented:

"I've been on a waiting list for treatment for fibroids since January 2023. During this time, I've experienced severe bleeding, back pain, hip pain and had to manage challenging symptoms of anaemia as a result of my blood loss.

"The anxiety I've felt whilst waiting has been all encompassing. I can't book anything in advance and I feel completely stuck in the house. If you don't have cancer, your condition is given less urgency and importance but there is no part of my life left untouched by this. It has to be taken more seriously." Professor Kamila Hawthorne, Chair of the Royal College of GPs, said:

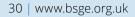
"GPs understand how hard living with a gynaecological condition can be, and how frustrating and concerning it is to have to wait months or even years for the right specialist care. GPs and our teams play a key role in managing our patients' conditions while they are on waiting lists, and it is deeply worrying to see their health deteriorating, becoming more complex to treat, and affecting their quality of life while they wait. As GPs, we carry the additional risk of patients' conditions worsening while they wait many months for specialist treatment. It is part of our normal practice now to ask women we have referred to a gynaecologist to let us know if their symptoms are worsening, so that we can alert the hospital waiting list and expedite the referral if needed.

"Women's health – including gynaecology – is a key part of the RCGP curriculum. There is a lot of support we can and do offer but in many cases, the most appropriate course of action is to refer to specialist care and services – however access is patchy and waiting lists are far too long. Cutting waiting lists will benefit everyone across the NHS, particularly outpatients, and we need to see everything being done to make this possible."

Rebecca Sloan, Women's health lead at LCP Health Analytics, commented:

"The report highlights the ongoing challenges facing gynaecology health services UK wide which has very real implications for patients and those treating them. The analysis should help healthcare professionals and policymakers to identify where additional resource and focus is likely to have greatest impact on patient outcomes and health inequalities."

Royal College of Obstetricians & Gynaecologists





## **BSGE News**



## Facts, Views and Vision in ObsGyn

#### Professor Justin Clark announces his appointment as Editor of Facts Views and Vision in ObsGyn

It is a great honour for me to have been appointed as the new Editor in Chief of Facts Views and Vision in ObsGyn, the official journal of the European Society for Gynaecological Endoscopy (ESGE) and its Corporate Societies which include the BSGE. I have taken over from Professor Ertan Saridogan, the current ESGE President, who has been without any shadow of a doubt the main driving force in establishing FVVO Gyn with articles listed in all major electronic databases and gaining the journal an impact factor.

The older members will remember the BSGE's "Gynaecological Endoscopy" journal (1992-2002) edited by Ray Garry, which was pioneering in helping the development of gynaecological endoscopy. "Gynecological Surgery", the ESGE journal followed but closed in 2021 when the society acquired FVVO Gyn.

FVVO Gyn is a global peer reviewed and open access journal publishing original research in all aspects of gynaecology as well as reviews, opinions and video articles that advance or illuminate science or practice related to women's health with a focus on the role, practice and place of endoscopic surgery and related interventions.

My goal is to continually improve the journal's impact factor and other publication metrics, as well as enhance access to readers, improve the speed of decision making for authors and to ensure relevance and coverage of modern and cutting edge developments. In this way FVVO Gyn can become the 'go to' minimally invasive surgical and medical journal in gynaecology, eclipsing all competitors!

It remains vitally important to have high quality peer reviewed medical journals that reflect contemporary practice and promote evidence-based interventions especially as surgical and wider clinical practice evolves. Your contributions to FVVO Gyn, such as submitting work, peer reviewing articles, accessing the content and promoting it to colleagues will be of key importance to achieving these aims. If any of you would like to become named peer reviewers and ultimately join the editorial board then please let me know.

T Justin Clark, Editor in Chief FVVO ObsGyn









## **BSGE News**



## **BSGE Elections 2025**

#### With the ASM and the AGM fast approaching-it's BSGE election time again. BSGE Honorary Secretary Donna Ghosh encouraged nominations, saying:

"As a member of this Society, we encourage you to contribute to shaping its future by considering nomination to stand in the BSGE elections. We are inviting nominations for Honorary Treasurer, Senior council and two Senior trainee positions."

Donna thanked Council for their contributions and explained that some existing Council Officers and members and are eligible to stand for re-election:

"Fevzi Shakir has completed a term as Honorary Treasurer and is eligible to stand again. Fevzi has successfully overseen the finances over the last four years, and we are extremely grateful that the Society continues to grow, with sound financial security.

Martin Hirsch has completed his first term in Council as International Relations Chair, developing and strengthening bonds between the BSGE and other international societies. Martin is also eligible to re-stand for election. Samantha Kirkwood has completed a term as Senior Trainee Representative and Ben Mondelli his first year in the role. I am sure you will agree both have made significant contributions to the training portfolio and I wish them the very best for their future endeavours."

The deadline for nominees application forms is midday, Friday, 21st February 2025. The deadline for sponsors to confirm their nomination is Monday, 24th February 2025. Donna said:

"Please do read and agree with the guideline for BSGE Council applications and elections process including rules regarding canvassing before submitting your nomination form.

With your nomination form, please submit a digital photograph and a short statement (maximum of 250 words) about why you are a suitable candidate and how you would contribute to the BSGE if elected into this position. The election statement will be displayed on the website and sent by email to all BSGE members. Good luck!"

Online voting will commence Friday, 28th February 2025 and you will be required to log in to the website in order to vote with elections closing on Friday, 28th March 2025 at 5pm.

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Election results will be announced at the BSGE AGM in Leeds on Thursday, 1st May 2025.



# The Legend Slot... Keith Issacson

In our new "Legend Slot" feature, Scope Editor Angharad Jones will interview a trailblazer in gynaecological endoscopy to learn about their story, gain sage advice and share insightful anecdotes into what has made them so successful.

I met up with American gynaecological legend, Keith Issacson and his dog, 6-year-old Golden Retriever Sammy, in his hometown of New Orleans the morning after the AAGL gala party to chat all things MIGS.

#### Hi Keith, thanks so much for being our first interview for the new legend slot. Tell us how you got into MIGs.

I finished my residency here in New Orleans and then did a fellowship at the University of Pennsylvania in reproductive endocrinology. Back in 1989 the reproductive endocrinologists were the ones doing all the microsurgery. There wasn't a lot of laparoscopic surgery, but it all made sense that they were operating under magnification. So, you could use similar microsurgical techniques, keeping tissues moist and operating with magnification laparoscopically, as well as open with loupes. The majority of my training and fellowship was in reproductive surgery, tubal re-anastomosis, tubal disease, endometriosis, but all open surgery really. Then I got my first job at Massachusetts General Hospital in Boston in 1989 and when I arrived, they were probably 10 years behind on their laparoscopic techniques, as were pretty much the rest of the country. When I got there, I did the very first laparoscopic ectopic pregnancy surgery in Boston, even

though when I was in New Orleans during my residency we were doing them all the time. My chairman at the time was Isaac Schiff and he did his residency with Harry Reich. So, he said, "Harry is doing some interesting things in Pennsylvania, why don't you go down there and spend 2 weeks with him, and you can bring back what you've learned and start it up in Boston?".

So, in 1989 I went down to Pennsylvania for two weeks, Harry was doing huge hysterectomies. His hysterectomies back then were different to now - they were 4 hours each. There was a different atmosphere in the operating room to what there is now. But I learned a lot. Harry back then was really pushing the limits of what could be done, not only laparoscopically but he was doing a lot of novel things in hysteroscopy, again pushing the boundaries. Some of the things he was doing we wouldn't do now, but he was testing the water.

After that I came back to Boston and really started focussing on minimally invasive surgery, trying to bring Mass General, Boston and the Harvard system up to speed, which is what we did. We performed our first laparoscopic hysterectomy in 1992 or 1993, so 2 – 3 years later. Then as a reproductive endocrinologist I did a lot of infertility surgery.



I also had an interest in hysteroscopy and product development. Back in the early 90's everyone was using monopolar electricity, and it didn't make sense to me. There used to be 2 – 3 deaths annually in New England alone from hyponatraemia from the glycine. I asked, "could we change to bipolar and use a physiological distension media such as saline?". So, my colleagues and I developed the first bipolar hysteroscope allowing us to use saline.

Ever since I got involved in that I have had a huge interest in hysteroscopy. In 1991 I helped Storz to develop the first flexible hysteroscope. I was a huge fan of flexible hysteroscopy, and I would have several arguments with Bettocchi about using flexible versus rigid. Back in 1996 Bettocchi was promoting vaginoscopy. I said, "you're torturing women using rigid when you can use a flexible". I was very stubborn until I went to Italy, worked with Bettocchi and tried his technique - I haven't used a flexible since! I learned that it's ok to be wrong, which I was!

So, once we brought the vaginoscopic technique back to Boston, we got involved in doing a lot of cases in the office, primarily Asherman's. That typically arose through self-referrals from patients as there are these advocacy groups. In these groups they talk amongst themselves, and they chose 3 or 4 doctors around the world they wanted to focus their care with. That was me, Charlie March, Terry Vancaillie and Mark Emmanual. So, the 4 of us were operating on the majority of patients with Asherman's around the world. This has been growing since.



# Do you perform most of your hysteroscopic work in the office?

We would prefer to do everything in the office, but the reimbursement particularly since I moved to Louisiana is not good for office procedures, so we have to use a surgery centre, but it's the same techniques.

# So, you are an inventor as well as a surgeon?

Yes, so you see a need and I'm not trying to invent a robot, my philosophy is things that we use likely were developed 25 years ago but with new technology I'm sure we can make it better. I'm not trying to recreate the wheel, but whatever we're doing, let's make it better. We have developed simple things - side opening lighted speculums, fluid management drape systems, just things to make it easier to do procedures in the office. Solutions to make life easier, less expensive and more user friendly.

I became involved with MIT (Massachusetts Institute of Technology) in 2009 and started the centre for gynaecology research with Linda Griffin. We have been focussing on an invitro model for endometriosis and are trying to grow a uterus in the lab, including peritoneal surfaces so we can actually study endometriosis in the lab. So that has been a huge focus of mine recently and the slides from my adenomyosis talk were from our lab.

#### I really enjoyed your adenomyosis talk yesterday, do you have any advice for hysteroscopic adenomyosis resection?

For hysteroscopic adenomyosis resection you must find the right cases who would benefit from it, such those who have cystic lesions of the inner myometrium. I would never touch it if they had never had an IVF transfer. I would only resect it if they have had a failed transfer of genetically tested embryos. In those patients you don't have much to lose so it is worth resecting the lesions to see if it improves their IVF outcomes.





#### You must have trained loads of gynaecologists throughout your career?

I started reproductive endocrinology fellowships at Mass General in Boston in the mid 90's and most of those were overseas graduates. We had fellows from Beirut, Canada, from India and they have gone on to be very successful. I then moved from Mass General to a smaller hospital affiliated with Harvard called Newton Wellesley in 2001 and we started the MIGS fellowship there in 2004. We have had 1 fellow per year ever since and every year we meet up at the AAGL for dinner. The AAGL meetings are great networking, it's fun and they make up stories about me that aren't true!

## Now your back in New Orleans where it all started?

I'm back where I started because my 2 daughters are here, I want to spend time with my 3-year-old grandson. So, my family have moved from Boston to New Orleans, and I have followed them! It's so perfect for me because I get just enough time to play with my grandson, spoil him and then give him back. I'm originally from Atlanta Georgia.

New Orleans is a great city, it's got problems, but you either love it or you hate it here. It's supposed to have a lot of crime. I've not ever seen it, but you hear about it. It's got potholes and corrupt politicians like everywhere else, but the vibe is just so unique. The music is so good, the food is so good. The weather is horrible! It gets far too hot from May through October. That's the only downfall. The pool that we have at my new house - it air conditions the water because it gets too hot!! I have never seen that before.

#### Are you now officially retired?

I'm still doing work - a little more IVF now. Still doing all the hysteroscopic work and in the process of setting up an endometriosis centre. There's a great need for an endometriosis centre here in New Orleans. There's a healthcare system here similar to that at Mass General which covers about 30% of people in Louisiana and they want to invest and start an endometriosis programme, which at age 67 I don't really want to get too involved in. I would love some younger people to use that as a board to launch their career.

# Not only are you a MIGS legend and an inventor, you're also a pilot?

I'm a pilot as a hobby and have been flying since I was here at Tulane University in 1977. I bought my fist plane for \$4,000 and didn't tell my folks. I learned how to fly and have been ever since. I fly to all the AAGLs, and I try to avoid commercial flights unless travelling internationally as I much prefer to fly myself.



The furthest I've been in my plane was when I flew to Iceland in 2017 for the endometriosis summit organised by Jon Einarsson. I took my 2 girls, and we flew from Boston, stopped in Greenland, Goose Bay in Canada and then on to Iceland. It was amazing.



#### In terms of Human Factors, comparing the aviation industry to surgeons, what do you make of it?

It's made a huge difference particularly in my education of the fellows, because what aviation teaches you is to try and always stay one step ahead. Don't ever fall behind otherwise you get lost. It's the same in surgery - you want to be thinking about your next step. What do you need? What do you need to ask for? What problems may you encounter? So, you are always anticipating 1, 2, 3 steps ahead. That philosophy has worked well for me as far as education is concerned.

#### Have you had any near misses while you've been flying?

Only once - and it was by accident. I was flying in the Bahamas and got stuck in a thunderstorm, and you never want to be in a thunderstorm, not even in the largest of planes. It will rip the wings off. That happened for about 5 minutes, but it was the most terrifying 5 minutes. The lightning going all around at 10 thousand feet, it was like being in a movie. My co-pilot was screaming lots of words we can't repeat! And then, we had ice one time in Key West - the wings were covered in ice which isn't good. It wasn't an emergency, but it was interesting!

# Do you have any advice for someone starting out their career in ?

I try to tell everyone, at least I tell my fellows, "Find a niche". It depends on what you want to do - go into private practice? Be involved in academia? Give lectures at international organisations? Then you must find your niche. You need to focus and do something, whether it be basic science, or do a study, present your work.

Although it's a 2-way street because you can become pigeonholed into one thing. For example, people look at me and say, "all you do hysteroscopy" but only about 10% of what I do is hysteroscopy but that's all they think about.

The other the advice I have is the importance of being part of the AAGL, ESGE, BSGE. It's where



your friends are. It's all about the people you meet, who you want to be around, that's what I enjoy. When you go to these meetings that's what you look forward to - the people. The science and lectures are all the same!!

I find personally, if you're working and feel a bit downtrodden by it all. You go to one of these conferences and you feel rejuvenated and inspired again.

You see so many things that you know you're never going to do - for example I have no desire to dissect out the sciatic nerve, thankfully many people want to. But we really need to teach the basics well, not to the people who come to these meetings but when we leave here. You probably see the same in the UK - the quality of those who are not MIGS trained. And it's getting worse as the volume is going down and therefore the quality does the same.

# If you were starting over again, would you do gynaecology or OBGYN again?

I think so. I am lucky that I wanted to do a surgical specialty that I could actually follow patients long term, and I think it's the only specialty you can do that. I've had patients for 35 years and it's been kind of fun, as I've done IVF on the daughters of patients I originally did IVF for. I get to say - I knew you when you were an egg!! I can't think of another disciple that allows that sort of continuity.

Although I feel bad for the young guys coming through OBGYN now, as all patients much prefer to see a female. It's not a discipline for guys anymore in the US.





## Who would you say is your ultimate legend of Gynae endoscopy?

I look at the legends who are active now -Shailesh Puntambekar, Arnaud Wattiez, Mario Malzoni. These to me are the legends. I like the way they teach, the way they operate, they're so talented.

Hysteroscopically I love the work Attilio is doing. He's publishing in so many different areas and is a great character.

What Shailesh is doing is just incredible. If you ever get the opportunity to go watch him operate you should definitely go, it's so worth it. He's doing uterine transplants in 2 hours laparoscopically! He has great rates and outcomes. It's 2 million dollars to have a He's also a general surgeon so, when I was there, he would do like 3 radical hysterectomies in the morning, go do a radical neck dissection and then back down to do more OBGYN. I've never seen any old school surgeon who can do that. And his knowledge of anatomy is unbelievable. I go every year to watch him speak - it's the same lecture and I always learn something new.



So now you have lots of new legends to go interview!!

Thank you so much to Keith for his time and enthusiasm in contributing to the Scope, and his hospitality in hosting the BSGE members attending the AAGL in New Orleans.

### Getting to know Keith Issacson

- > What's your star sign? Taurus
- > What's your favourite colour? Blue
- Dogs or cats? Dog.
  Golden retriever English cream
- > What's your favourite food? Veal parmigiano
- Favourite cocktail?
  Varies on the day, but we will go with Long Island iced tea
- Favourite karaoke song? Mr Brightside by the Killers
- > Favourite holiday destination? Israel
- > Skiing or snowboarding? Skiing



Angharad Jones Interviewer / Scope Editor



# A Rookie's Guide to The AAGL

### Ceri Daniel reports for The Scope on a memorable visit to the AAGL Global Congress in New Orleans.

Since the BSGE brought the ASM to Newport in 2019, both our own meeting and that of the ESGE have become firm fixtures in my academic diary. However, I was yet to venture across the Atlantic to visit our American cousins at the AAGL Global Congress. To use a rugby metaphor, as the Welsh so often do, I had failed to secure the triple crown in any of my previous seasons of gynaecology.

With 2024 seeing the AAGL hitting New Orleans, described by Wikipedia as both 'unusual' and 'lively', it was obvious it was time to make my AAGL debut and join the great and the good of the gynaecology world in the 'big easy'. Before we go any further, let me clarify, I am certainly no writer. In fact, this may be my first foray into putting serious pen to paper since GCSE English in 2006. Hopefully you can bear with me as I try to remember the fundamentals of literacy and manage to string some words together.

### Saturday

Before we'd even left the country, Ash Alam and his clipboard had the majority of Team BSGE gathered at Heathrow, preloading with fluids before the 10 hour flight. I was delighted to have found a group of people to travel with who enjoy organised fun as much as I do.

We landed in New Orleans, to be greeted by the least efficient airport security I've ever encountered. The level of organisation required to make it this inefficient was actually quite impressive and I truly believe that the staff here must have attended the same training day as our NHS managers.







The next challenge was locating the taxi stand, which should have been significantly easier than it was for a group of well-educated, highly intellectual people, but eventually we succeeded and were deposited at our various hotels across the city. We were ready for our first evening soaking up the lights and sights of New Orleans. Our dinner on night one was kindly organised by LiNA Medical at a charming restaurant called Annunciation. We were treated to a selection of creole-inspired seafood dishes and enough wine to keep us going until way after our bedtimes, but with jet lag catching up on us all, we called it a night.

### Sunday

I've already alluded to my fondness for organised fun, and our first full day allowed me to not only take part in some, but to actually arrange some. Giddy! I won't bore you with the details, but despite knowing nothing about American sports, I found myself not only taking part in a fantasy American football league, but supporting the New Orleans Saints. Throwing myself in whole-heartedly, I'd already booked myself a ticket to go and watch my mighty Saints long before we arrived, and proving they were all as much fun as I'd expected, the entire British contingent decided to join me. We attempted to buy so many tickets that Ticketmaster thought we were bots and Angharad Jones got each and every one of her cards blocked, but eventually we had enough seats secured and we were off to the game en masse.

To say everything in America is bigger and bolder than in the UK is no exaggeration. The Caesars Superdome was exactly that, super. Like the medical students lurking at the back of theatre, we had no idea what was going on. Unlike those students, we threw ourselves in with gusto. We bought snap-backs. We bought foam fingers. We nearly bought novelty outfits. Chants of 'move dem chains' and 'it's no good' would continue long after the final whistle, which, for those interested, saw the Saints soar to a spectacular 35-14 victory. We were clearly good luck and the locals were keen for us to return in the coming weeks. We didn't rule it out.



The AAGL Welcome Drinks followed soon after, giving us a chance to visit the Convention Centre that would host us for the congress. Musicians playing jazz greeted us, with mardigras performers on stilts walking amongst us. A token system designed to limit us to two drinks each was in place, but we seemed to find a way to subvert this. I forget the details. The convention centre was gigantic, as was to be expected, and industry were out in force. This was our first chance to mingle with other delegates and start a game of Gynaecologist Bingo. We made an excellent start with Dr Jón Einarsson, Dr. Gaby Moawad and the one and only Professor T. Justin Clark all ticked off.



The next stop on our evening tour was Gynaesonic's VIP educational event at Pat O'Brien's, on the famous Bourbon Street. This would not be our last visit to Bourbon Street more on that later. As usual, we were well looked after by the Sonata team, before heading off to our final appointment of the evening, a party at the home of Dr Keith Isaacson, inventor of the bipolar resectoscope and legend of the gynaecology world. Back in Marseille, Keith had extended the invitation upon hearing of my support for the New Orleans Saints, and a few other members of team BSGE were also invited meaning the touring circus was moving on. We left behind the bright lights of Bourbon Street and headed to a very different, far classier side of town. This was clearly the big leagues and we had high hopes for ticking off several boxes in our Gynaecologist Bingo.

Our host had put on a spectacular buffet, with troughs of seafood and a chef onsite cooking up further delicacies, and it was clear we would be well fed and watered. Our bingo cards certainly didn't prepare us for where the evening would take us next. Enter Mr Chuck Miller and his celebrity friend-Mary Bonnet of 'Selling Sunset' fame. Our jaws were scooped off the floor, and we were introduced, much to our excitement. Explanations were obviously needed and were provided. Introduced by friend and gynaecologist, Dr Ido Sirota, Mary sits on the board of the AAGL foundation as a patient advocate.



We talked at length about her issues with fertility, her passion for advancing, and advocating for, women's healthcare, and the infamous dog funeral of Season 8, Episode 9. Did we want to join them for karaoke later that night? It won't surprise anyone to find out that was a firm yes.

So there we were, at the end of the party, in a twist that no-one saw coming, heading back to Bourbon Street in search of a bar in which to exercise our vocal cords, Dr Sirota and Mrs Bonnet in tow.



### Monday

Having been in New Orleans for 36 hours, it seemed appropriate to attend the congress that had brought me here in the first place. Time to get those CPD points and engage our brains. The scientific programme was broad and varied, and there were some genuinely interesting sessions on offer. I chose to head to the main auditorium, or the New Orleans Theater as it had been re-named, for a panel session entitled "From Diagnosis to Modern Management: Navigating the Challenges of Endometriomas".





The auditorium was vast, brightly lit, and decorated in the colours and style of the famous Mardi Gras that takes over our host city every Spring. The speakers were not outshone by their setting, and this session, along with those that followed was well-structured, insightful and thought-provoking. I stayed in the New Orleans Theater for the session on complications, including injury to iliac vessels during pelvic side wall excision, trocar injury to aorta and retained foreign body. This was, very appropriately, followed by the Keynote Address by Dr Patrice Weiss "The Second Victim: Coping with Medical Errors". The session served as a reminder that even those we revere are liable to err, as is human, and we all need to be aware of how to support our colleagues and ourselves in these events. Lunch followed, and turned out to be one of the worst things I've ever put in my mouth. Abhorrent doesn't even come close. Thank goodness we'd been so spoiled with the culinary offerings up until this point. After lunch we headed back to the New Orleans Theater for the afternoon sessions, which would include our own BSGE session.

First up though was another panel session, this time entitled "Ultrasound in the Surgeon's Hands". We took a whistle stop tour through bowel endometriosis, adenomyosis and adnexal pathologies, and I made a mental note to brush up on my scanning upon my return to the UK. Martin Hirsch will cover the BSGE session in more detail, and with far more expertise than I could manage, but it will come as no surprise that it was excellent and our representatives did us all proud. The sessions would continue way into the evening, but after the disastrous excuse for lunch, our evening dinner plans were all the more pressing and we bid farewell to the convention centre for the day.





My dinner that evening was again provided by the Sonata team at Gynaesonics, this time a more intimate affair with David Toub and their core team, plus a small group of other UK clinicians. The venue was Pêche Seafood Grill, a laid back, contemporary restaurant that restored our faith in the culinary provisions of New Orleans. After dinner we headed over to meet the rest of Team BSGE who had been entertained by Hologic for the evening. Our destination was The Spotted Cat on Frenchmen Street, a jazz bar serving lethal cocktails alongside some truly excellent music. We danced with plenty of enthusiasm, but surprisingly little co-ordination for a group of people who earn a living from their use of motor skills. I made a mental note to study this phenomenon for the next Christmas BMJ.

### Tuesday

Up bright and early for another day of congress, and my first session of the day was the provocatively entitled "Female Sexuality". Sign me up. Sergio Haimovich opened with a talk on the uterine cavity, covering the functionality, anatomy and function-preserving approaches to surgery. Then came Debra Wickman giving a special lecture on optimising sexuality outcomes following minimally invasive gynaecological surgery. We were encouraged to discuss sexual pleasure with our patients pre-operatively to ensure we prioritised preservation of sexual function that is important to them. A brilliant start to the day. 10/10. Would recommend.





"Atypical or Non-Tubal Ectopic Pregnancy Diagnosis and Management" was next up, before a lunch that was, incredibly, even worse than the previous day's offering. Adnexal Masses and Adenomyosis were on the menu after lunch, and a stroke of genius from Tony Griffiths ensured British Attendance was high. Uber Eats was enlisted to deliver us 12 Coors Light and a bottle of chicken wine, direct to the convention centre. This was the perfect antidote to late nights and flagging concentration, and as anticipated, we were revitalised sufficiently to stay until the close of play. Bonus marks for entertainment were awarded for the spectacle of watching our Mr G trying to convince the Uber driver that it was acceptable to hand over the goods without government-issued ID on his person due to his male-pattern baldness. It was really wonderful stuff.

The AAGL was, of course, rounded off with a gala dinner. We all scrubbed up exceptionally well, if I do say so myself, with not one hint of the exhaustion and apathy present prior to the auditorium beers. Ash Alam was back on the organised fun with the provision of margaritas in his hotel room. Despite how it could sound, the entire thing was entirely legitimate and above board, aside from the contraband lime juice he had prepared back in Liverpool and smuggled into the States.

In true New Orleans style, the gala took the form of of a masquerade ball, hosted at Antoine's restaurant, an establishment claiming to be the oldest in town. The restaurant was a winding labyrinth of rooms set across two floors, each containing a different dish to feast upon.



Cheese in the entrance hall, seafood in the '1840 Room', steak in the 'Mystery Room'. Like a spectacular living version of cluedo, where the jeopardy was replaced by gastronomic treats. Those who ventured upstairs could choose between two types of absinthe served by a fairy wearing a table. What else would you expect? In the ballroom itself, a 9 piece swing band provided the main entertainment. We danced until the early hours, with and without our masks. Proving once again, that our moves were lethal, Ash Alam managed to swing his hips with such vigour that his cummerbund pinged off into the crowd, never to be seen again. If anyone finds themself passing Antoines in the near future, do please call in and see if it's been located.

### Wednesday

There were no return flights to London until Thursday, so we took the the opportunity of a free day to explore New Orleans by daylight.



I was joined by a friend from Alabama who took me straight to Cafe du Monde for their legendary beignets and chicory coffee. Sat in the sunshine, with the taste of icing sugar on the breeze and the sound of street musicians playing jazz (what else?), it felt like I'd really started to see the real New Orleans. We walked through the French Quarter, around Jackson Square, and along the Mississippi River. We ate gumbo at The Gumbo Shop (where else?). We visited the New Orleans Museum of Art in City Park. It turns out, New Orleans has a whole lot more to offer than the hedonism of Bourbon Street.



The trip wouldn't be complete without some more organised fun to round off events. I was in my element, gathering the troops aboard the Steamboat Natchez, the last remaining authentic steamboat on the Mississippi River. We were booked onto an evening jazz cruise, which turned out to be lacking in jazz but we were compensated with generous pours and access to the engine room. It may seem an unlikely place to gather a group of British gynaecologists, the engine room of a steamboat in Louisiana, but it was a perfect metaphor for the unlikely group we were. The last supper took place at The Roosevelt Hotel, almost entirely so we could admire the Christmas decorations in the lobby. Over dinner, I learned that Angharad Jones will not forgive easily if you deny her french onion soup.

After dinner I learned that Uber Eats delivery drivers really will not hand over the drinks unless you show them ID. Thankfully I had what they required, and we were able to end the night with more chicken wine in the bougiest hotel room I've ever stayed in (thanks Amex).



### Thursday

I chose to stay on in America for a few days of annual leave rather than taking the first flight home, but I'll stop this account here as anyone who actually wants to hear about my holidays would be on my Instagram rather than here!

I promised you a rookie's guide to the AAGL. I'm not sure if that's what I've given you, but hopefully your curiosity has been piqued. Would I recommend attending? Absolutely. The scientific programme is high quality with engaging speakers and genuine expertise on display.



Even if you went for that alone, you wouldn't be disappointed. But, as with the majority of events in the academic calendar, the value extends far beyond the knowledge being dished out. It's about the people, the connections, the human experience. It's about leaving the comfort of our own deanery, society, country. It's about seeing things from a different point of view. The 2025 AAGL Global Congress will be taking place in Vancouver and I'll certainly be attending; no longer a rookie but a season two veteran. I reckon you'd be a fool not to join me.

# **Portfolio Reports**

### **Diagnostics Portfolio Report**

Following the AGM in Belfast in 2024 and Arvind Vashisht's inauguration as President a new Diagnostics Portfolio was introduced in the BSGE Council.



Lizzie Bean is the first Chair of the Diagnostics Portfolio. She said:

"The development of a new Diagnostics Portfolio is a fantastic opportunity to improve awareness of ultrasound and MRI for triage, earlier diagnosis and treatment planning for patients with endometriosis, streamlining patient pathways and optimising patient care.

It will be essential to liaise with other specialists such as sonographers and radiologists to improve awareness of the diagnostic yield of ultrasound and MRI. Working together with BMUS, RCR and RCOG will be crucial.

Together we can provide educational events, resources and training in the non-invasive diagnosis of gynaecological conditions.

Work in the sub-committee will generate educational events and resources for the BSGE communication platforms, will augment the diagnostics stream at the ASM and support training and engagement of BSGE members and allied health professions."

The portfolio plans to introduce a new '**BSGE Diagnostics Challenge**' page in The Scope. In each issue we will feature an interesting case that provides a diagnostic or management challenge. Members and experts will discuss and debate the case, offering readers an insight into the potential of ultrasound and MRI in diagnosis and treatment planning.

We will invite members to submit competitive applications for the 'Image of the Edition'. Sian Mitchell, one of the resident members of the Diagnostics Subcommittee is leading this initiative. Sian told The Scope:

"It very exciting that the Diagnostics portfolio has been introduced to the BSGE. The Diagnostics contribution to the Scope will give us the ability to disseminate and discuss images and tricky cases with their management plans. It gives us the opportunity to learn from one another and move closer to improving the accurate diagnosis of endometriosis. If you have an interesting case you feel the wider community can learn from and would like to share, then please do get in touch."

If you have a diagnostic conundrum to share with Scope readers, please email Sian at sian.mitchell@nhs.net

Remember to check the next Scope for the first **BSGE Diagnostic Challenge**.

### Lizzie Bean

Chair of Diagnostics Portfolio



# **Portfolio Reports**

### Laparoscopy Portfolio Report

The joint RCOG / BSGE benign abdominal surgery course ran in September 2024 with more than 80 delegates. This course was redesigned with new lectures, and simulation models to reflect the RCOG SITMS focusing on skills required to perform total laparoscopic hysterectomy, laparoscopic suturing and morcellation.

The course feedback was extremely positive. 95% of delegates felt the course met their personal development needs and 95% felt that the content of the programme was up to date. We will be delivering this course in September 2025, again with excellent speakers and workshop faculty.

RIGs programme was successfully completed for all three streams (basic, intermediate and advanced) under the BSGE trainee representatives Samantha Kirkwood, Ben Mondelli and Flo Britton and will continue to run in 2025. We will also run our annual laparoscopic pre-congress workshop and suturing competition in Leeds ASM.

A cadaveric course will be held in March 2025 aiming to improve laparoscopic surgical skills and anatomical knowledge at an advanced level and registration is currently open for the course.



**Lina Antoun** Chair of Laparoscopy Portfolio



# **Nurse Specialists**

### Nurse Hysteroscopy Portfolio Report

### Nurse Operative Hysteroscopy Course

We successfully ran our second nurse operative hysteroscopy course in December 2024. We had 20 nurses progressing from diagnostic to operative hysteroscopy.



The course received excellent feedback and was well supported by industry. We had a great faculty including nurses and consultants with great presentations. The course covered the theory needed for operative hysteroscopy and a hands on workshop with operative devices. This course is designed for nurses who have completed the Bradford University diagnostic course. Once the nurse feels competent in their role they can register for the operative course we generally recommend 12 months performing diagnostic procedures. The course provides a log book which the nurse can use to collect cases within trust.

Our next course is on the 1st and 2nd July 2025, we look forward to seeing you there and at the ASM in Leeds.

### Hysteroscopy and ESGE

As an affiliated Society with ESGE, I wanted to make a difference and get nurses recognised at a European level.

I spoke to Ertan Saridogan regarding this, he helped me by setting up a meeting for Gilly Macdonald and I to meet with Professor Tanos from the ESGE. After meeting with Professor Tanos I was invited to teach on the hysteroscopy workshop at the ESGE Annual Congress in Marseille in October (I pestered them until I got an invite!)

I am now going to ask for another meeting with the ESGE to see how we can move forward from this to get nurses recognised more in Europe.



Caroline Bell, Nurse Hysteroscopists Portfolio Chair / Email: Caroline.Bell@ncic.nhs.uk



# **Nurse Specialists**

### **Endometriosis CNS Portfolio Report**

### Foundations of Endometriosis Care for the Specialist Nurse

The Endometriosis Nurse Sub-committee held a two-day education event entitled "Foundations of Endometriosis care for the specialist nurse" in November 2024. The event was kindly hosted by Karl Storz in their Slough based Training and Technology Centre. The venue was both comfortable and professional and the wonderful staff (special mention to John, Toni and Beckie) were on hand to support whenever needed. Industry sponsors from Gedeon Richter, Kent Pharma and VernaCare were in attendance to showcase their latest innovations.

Around 50 delegates from the UK, Ireland and The Netherlands enjoyed the diverse content of the sessions, a networking dinner and workshops discussing current hot topics.

A highlight of the event was the presentation from two pioneering Endometriosis CNSs, Sarah Parker and Elsa Palmer of University College London Hospitals NHS Foundation Trust. Following their fascinating talk on the "Evolution of the Endometriosis nurse's role; How to adapt and take care of ourselves" they were each presented with a bouquet of flowers and Certificate of Excellence from the BSGE in recognition of their long service and dedication to endometriosis specialist nursing.

The sub-committee would like to thank Atia and everyone involved in making this event a huge success and we look forward to our next get together at the pre-congress CNS day, prior to the ASM in Leeds next year.

### Claudia, Jenny, Rosie and Zway





## Celebrating New RIGs Representatives: Enhancing Training Access Across UK and Ireland

We're excited to introduce six new RIGS Representatives who will help enhance access to gynaecological laparoscopic surgery training for O&G trainees. We now also have a dedicated Representative for the Republic of Ireland, ensuring comprehensive support and training opportunities throughout Ireland.

### Meet your new RIGs Representatives:

- **Republic of Ireland**: Sarah Murphy
- North East: Lucinda Black
- Yorkshire and Humber: James McConnell
- West Midlands: Mohamed Elsheikh
- Thames Valley: Hikari Sakurai
- East of England: Misbah Haq

If you have any questions or ideas to enhance training in your deanery, we encourage you to reach out to your local reps. Their details can be found in the 'Trainees' section on the BSGE website.

## **RIGS HUB National Training Programme 2024**

This year's RIGS Hub National Training Programme has been a resounding success, with all three streams completed ahead of the Christmas break. We were happy to see an outstanding turnout, with 325 delegates participating in the programme—our highest level of engagement to date!

### Practical Excellence at Laparoscopic Hubs

The hands-on workshops, a key component of this free, trainee-focused, and standardised BSGE training programme, took place at 15 Hubs across the country. These sessions were expertly led by our dedicated RIGS Regional Reps and Faculty Members, whose hard work and commitment were invaluable in delivering a high-quality learning experience.

This year, we also introduced innovative DIY laparoscopic models, including an ovarian cystectomy and ureterolysis model. These additions were well-received, bringing an exciting new element to the laparoscopic training and enhancing the overall experience.

During the practical sessions, we held a suturing competition for both the Intermediate and Advanced streams. Winners from each Hub have earned a place in the Grand Final, set to take place at the BSGE ASM 2025 in Leeds, where they'll compete for the highly sought-after Karl Storz Golden Needle Holder—a mark of surgical excellence!

### **Revised Webinars Aligned with SITM Curriculum**

This year, the webinar series was updated in response to trainee feedback and recent curriculum changes, including the introduction of SITMs. We sincerely thank the consultant specialists who dedicated their time and expertise to delivering valuable and informative lectures. These webinars, which remain accessible on the BSGE website, provide a key resource for trainees, equipping them with knowledge to advance their surgical careers.





### RIGS ASM 2025

Trainee representatives Ben Mondelli, Sam Kirkwood, and Flo Britton are looking forward to welcoming all trainees to the BSGE Annual Scientific Meeting (ASM) in Leeds. This year's programme has plenty to offer, including the Laparoscopic Skills Workshop, reconnecting with colleagues at the RIGS Dinner, or exploring the exceptional scientific programme and live surgery.

## RIGS ST5-ST7 Hands-On Laparoscopic Workshop

Date: Tuesday, 29th April Capacity: 20 delegates

This pre-congress workshop promises a day packed with high-quality lectures from expert endoscopic surgeons and extensive hands-on laparoscopic skills practice. Delegates will have access to state-of-the-art simulation models to practice cystectomy, hysterectomy, myomectomy and of course, suturing techniques with plenty of expert tips and tricks.

This is always a popular pre-congress course, so book early to secure your place!

## **RIGS Dinner**

Date: Wednesday, 30th April Venue: Brasserie Blanc

Join us for an evening of vibrant conversation and great company at this year's RIGS Dinner—the perfect opportunity to catch up with friends and colleagues. We are honoured to welcome Professor Giovanni Scambia, who will share insights into his remarkable career journey and the lessons he has gained along the way.



## **RIGS Suturing Competition Grand Final**

Date: Thursday, 1st May

Winners from the RIGS Intermediate and Advanced Laparoscopic Courses have secured their places in the Grand Final of the suturing competition. This exciting, high-stakes event will crown one winner with the prestigious Golden Needle Holder and an incredible 1–2 week sponsored fellowship with Professor Scambia at Gemelli Hospital in Italy! Good luck to all our finalists!



Samantha Kirkwood



Florence Britton



Benedetto Mondelli

RIGS ASM25 DINNER

Tickets

On 30th April 2025 at 19:30 Brasserie Blanc, 4, Victoria Mill, The Embankment, Sovereign St, Leeds LS1 4BJ Sponsored by





Guest speaker: Prof Giovanni Scambia, Gemilli Hospital, Rome 'Minimally Invasive Surgery in Ovarian Cancer'

Registrars In Gynaecological Surgery Training and Support in Endoscopy

**Register here** 



# **BSGE Survey Section**



Dr Hajra Khattak, Specialty Registrar in Obstetrics and Gynaecology (University College London Hospitals), National Clinical Coordinator for LAMP trial, NIHR Academic Clinical Lecturer in Reproductive Health (University College London) and Honorary Research Fellow (University of Birmingham) invites BSGE members to take part in a survey on fertility preservation

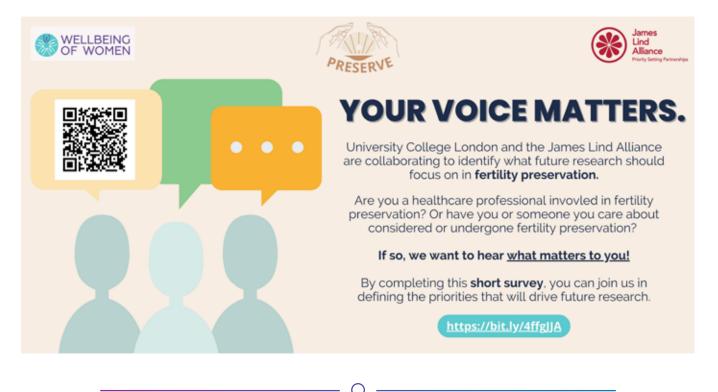
I am seeking the support of British Society of Gynaecological Endoscopy members in our James Lind Alliance (JLA) Priority Setting Partnership (PSP) project on female fertility preservation.

Our project (funded by Wellbeing of Women charity) aims to identify and prioritise the most pressing unanswered questions in this field, as voiced by patients, clinicians, and researchers. To achieve this, we are keen to engage a diverse and representative audience.

We would be immensely if BSGE members could contribute your perspectives and expertise. Your assistance will greatly enhance the reach and impact of our work.

Link to our website (and further information on the steering group) is available at preservepsp.uk

Thank you for considering our request. I look forward to hearing from you.







# **Upcoming Events**

Nadine di Donato lists upcoming events Don't forget, you can register for BSGE events online <u>here</u> Please note that the BSGE courses are highlighted in blue.

#### BSGE AMBULATORY CARE NETWORK 2025

Date: 13-14 February 2025 Where: The Grand Hotel Birmingham, 1 Church St, Birmingham B3 2FE Click here for more info >>

#### 10th Edition ENDO DUBAI 2025

Date: 20-22 February 2025 Where: Dubai, United Arab Emirates Click here for more info >>

#### Congress ESGO (European Congress on Gynaecological Oncology) 2025

Date: 20-23 February 2025 Where: Rome, Italy Click here for more info >>

#### AGES XXXV Annual Scientific Meeting (Australasian Gynaecological Endoscopy & Surgery) 2025

Date: 27 February – 1 March 2025 Where: Perth, Australia Click here for more info >>

### Annual Meeting of the Society for Reproductive Investigation (SRI) 2025

Date: 25-29 March 2025 Where: Charlotte (NC), USA Click here for more info >>

### AGCES Conference (American and Global College of Endometriosis Specialists) 2025

Date: 28-30 March 2025 Where: Atlanta, Georgia Click here for more info >>

### Global community hysteroscopy 2025

Date: 23-25 April 2025 Where: Barcelona, Spain Click here for more info >>

### 14th Congress of the European Pain Federation (EFIC) 2025

Date: 24-26 April 2025 Where: Lyon, France Click here for more info >>

## Endometriosis and uterine disorders (SEUD) 2025

Date: 24-26 April 2025 Where: Prague, Czech Republic Click here for more info >>

### BSGE Annual Scientific Meeting 2025

Date: 29 April – 02 May 2025 Where: Leeds, United Kingdom Click here for more info >>

### WCE 2025 | World Congress on Endometriosis 2025

Date: 21-24 May 2025 Where: ICC Sydney 14 Darling Drive Sydney, NSW 2000, Australia Click here for more info >>

#### 37th ISGE annual meeting in conjunction with 28th AGOTA national congress 2025

Date: 21-24 May 2025 Where: Zanzibar - Tanzania Click here for more info >>

### **GYNITALY 2025**

Date: 27-29 May 2025 Where: Venice (Italy) Click here for more info >>





### BSGE/RCOG Hysteroscopy Workshop 2025

Date: 11-12 June 2025 Where: The Royal College of Obstetricians and Gynaecologists 10-18 Union St, London SE1 1GH, United Kingdom Click here for more info >>

#### BSGE Nurse Hysteroscopy Operative Workshop

Date: 1-2 July 2015 Where: Karl Storz Training and Technology Centre, 415 Perth Avenue, Slough, Berkshire, SL1 4TQ United Kingdom Click here for more info >>

#### ESHRE 41st Annual Meeting (European Society of Human Reproduction and Embryology) 2025

Date: 29 June – 2 July 2025 Where: Paris, France Click here for more info >>

### Society of European Robotic Gynaecological Surgery (SERGS) 2025

Date: 5-7 June 2025 Pisa, Italy Click here for more info >>

#### XXV FIGO World Congress of Gynaecology and Obstetrics 2025

Date: 5-9 October 2025 Where: Cape Town International Convention Centre Click here for more info >>

### BSGE/RCOG hysteroscopy workshop 2025

Date: 4 November - online Where: The Royal College of Obstetricians and Gynaecologists 10-18 Union St, London SE1 1GH, United Kingdom Click here for more info >>

### BSGE Nurse Hysteroscopy Workshop

1-2 December 2025 Where: Karl Storz Training and Technology Centre, 415 Perth Avenue, Slough, Berkshire, SL1 4TQ United Kingdom Click here for more info >>



## **BSGE Scope Team**

### Meet our dedicated team...



**Angharad Jones** Editor



Assistant Editor



Atia Khan **BSGE Manager** 



**Charis Ayton** BSGE Administrator



**Nadine Di Donato** Events



**Ben Mondelli** Trainees and The Scope meets



**Florence Britton** Trainees



Samantha Kirkwood Trainees



BRITISH SOCIETY for GYNAECOLOGICAL ENDOSCOPY

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