

THE SCOPE

Newsletter of the British Society for Gynaecological Endoscopy



Includes details of the
BSGE Annual Scientific Meeting Cornwall

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Editor's Notes

Dear friends and colleagues,

Since my last report to you three months ago, it has been a very busy time for the Webcomms team. We have successfully launched the new website, which I hope you'll agree is a great improvement on the previous site. BSGE.org.uk is now visually more appealing, it is accessible from phones and tablets and offers much better security and an overall improved user experience.

We hope to encourage greater engagement from all BSGE members. The updated video library allows you to comment on the videos and the discussion forum offers a place to debate, chat and share information. These functions now only require a single log in, making the process much more user friendly. Of course, the more members utilise the functions, the better the experience will be for everyone. So please log in and have a look and contact me on S.Khazali@me.com if you're interested in being more involved. I have been delighted that Pille Pargmae, Nadine Di Donato and Suruchi Pandey have joined the website team, they are all helping us improve the quality of information and interactivity offered. Fevzi Shakir and Donna Ghosh are also involved in developing a much more extensive and useful section for the trainees. You can learn more about the new website later in this issue of The Scope.

I am particularly excited to welcome Dr Jane Gilbert to the webcomms team, as our new assistant editor. Jane has already improved the way in which we communicate with you; she has started tweeting regularly on @theBSGE and keeps the news on the website up to date and relevant. Please follow us on Twitter and get in touch if you have any interesting news and photos to share with members.

With these successes have come some challenges. We discovered earlier this year that the e-mail addresses and passwords of members had been accessed by hackers on the old website. You should all have received communications from myself and our new president Dominic Byrne asking you to ensure that you have changed your passwords, especially if they have been used on other websites. We would like to reassure you that all the evidence suggests that the attacks only took place on the old website. We take your security very seriously and are working hard with the new developers to ensure that the new site meets all industry standards, so that you can safely use the new functions in the knowledge that your data is secure.

Please contact me if you have any ideas or if you would like to work with the webcomms team.

Shaheen Khazali

Chair, BSGE website and communications – S.Khazali@me.com



PRESIDENT'S MESSAGE



My first duty as President is to thank Ertan Saridogan for all his hard work and considerable achievements as President. It has been a pleasure to work with Ertan whose expertise and wise judgment has been invaluable. He has overseen the growth of the society to over 1,000 members.

In addition to Ertan, I would like to thank the other officers, Thomas Ind and Mark Whittaker; we have made a cohesive and productive team to the benefit of the BSGE.

On the Council I would like to draw particular attention to the achievements of Shaheen Khazali in his role as Webcomms portfolio lead. He has always been a very productive member of council, introducing many excellent new ideas and his latest work in redeveloping the BSGE website is his best achievement to date. The Website is now launched and if you are reading this you have clearly found it!

I hope you will agree that it is better laid out, more interactive and when fully functioning, will provide the society with a substantial increase in communication direct with the membership. Joining the society, voting in elections, viewing surgical videos and accessing BSGE databases will now all occur through the website. Credit/debit card payments for booking courses or training are all now available for the first time.

Tyrone Carpenter has done a great job in his role as industry relations portfolio lead and has worked hard to ensure we achieved the best ever industry support for a BSGE Annual Scientific Meeting at the Cornwall meeting in May 2016. Justin Clark has lead the research and audit portfolio and introduced the developing concept of creating a surgical information collection system (SICS) for members to record their endoscopic operations on a new BSGE database. Gill Smith has done an excellent job and represented all nurse members equitably whether they are endometriosis nurses or hysteroscopy nurses. Liza Ball has established a template for writing a joint guideline with the RCOG and is progressing well on the latest BSGE guideline on Laparoscopy in Pregnancy. Training in Laparoscopy and Hysteroscopy has been led by Sameer Umraniyar and Natasha Waters respectively. They have helped run BSGE ATSM courses at the RCOG and Natasha will be taking on the accreditation of hysteroscopy nurse training with Gill Smith. Simon Jackson completes his term on council as lead of the awards portfolio and has efficiently overseen the competition for annual awards to all groups of BSGE membership, distributing nearly £20,000 annually in prize money to our members. Finally, thank you to



Fevzi Shakir and Kirana Arambage who have represented trainees on council and have recently set up a subgroup (Registrars in Gynaecology Surgery) of the BSGE specifically for trainees.

I have now handed over the leadership of the Endometriosis Centres portfolio to Chris Guyer who has been shadowing the role for two years and has a firm grasp on the brief. It is a significant responsibility and I am confident that he will continue to build on all the achievements made to date. However I am available to support Chris and all the Endocentre leads as needed.

We welcome Donna Ghosh to Council who takes over from Kirana Arambage as trainee representative. Kirana has been re-elected and will take on the Awards portfolio.

I give special thanks to the local organising committee, who have delivered the extremely successful ASM in Cornwall. We await delegates' formal feedback but informally it appears to have been one of the most successful meetings for the BSGE. Delegates have been very complimentary about the meeting content, the venue and the standard of organisation. My thanks go to Susie Bates who chaired the local organising committee and worked with me and all the members: Cathy Dean, Tom Smith-Walker, Richard Keedwell, Jonathan Lord, and Lisa Verity.

As you can probably appreciate the majority of work for the BSGE Council is running meetings and organising training. Currently we provide five annual scientific meetings:

- The Annual Scientific Meeting
- Benign surgery ATSM
- Hysteroscopy ATSM
- Cadaveric Anatomy course
- Fibroid meeting

In addition, with the support of industry, we also run training programmes in complex laparoscopic surgery and the recently launched national LapHyst Project, which aims to train Consultant Gynaecologists in laparoscopic hysterectomy techniques over the coming years. Organisation of these meetings and training requires an eye for detail and excellent organisational skills. Whilst each course is run by a team from the BSGE, we need to continually improve the quality of our meetings to attract delegates and also to maintain the high standards of the BSGE. As a consequence we have co-opted Ertan Saridogan to the Council to be the first BSGE Meetings Convener, for one year in the first instance. His role will be to oversee the organisation and quality content of our meetings.

Looking ahead we will be enhancing training in basic laparoscopic surgery by running dry lab training skills courses using the European Academy validated LASTT and SUTT training methods.

We have run successful Hands on Training (HOT sessions) using these techniques, at last years Silver Jubilee Meeting and this years ASM; we will continue these HOT sessions alongside other BSGE courses such as the benign surgery ATSM. The BSGE has now purchased the dry lab training equipment and plans to run HOT sessions, throughout the UK in due course.

The Endometriosis Centres project continues to draw national and international acclaim and we will be strengthening the quality of Endocentre accreditation with the introduction of an exemplar surgical video annually from each centre. In addition, the workload accreditation requirements for each centre will be varied depending on the number of surgeons listed, to make it more equitable and appropriate. We hope to publish the BSGE Endometriosis Database dataset that was presented at the recent Cornwall ASM and will be presented again at the RCOG World Congress in June 2016.

Our growing portfolio of training in all aspects of laparoscopic surgery will hopefully allow us to attract new members from other specialist societies like BSUG and BGCS. This, linked with the launch of Surgical Information Collection System (SICS) will provide members with all the tools to monitor and develop their laparoscopic and hysteroscopic surgery skills plus provide data for their own appraisal and revalidation.

The website with its increased interactivity will become the interface for increased connection with the membership. We hope to have our SICS system on the website so that Gynaecologist members can collect all the surgical data they need and ultimately be able to compare their individual surgical performance against background data from the whole database.

So the future direction of the BSGE is consolidation of what has been achieved and then enhancing our three main areas:

- More training opportunities for members
- Enhance data Collection for members
- Greater Web based interaction for members

The BSGE is in great health and opportunities for the society and its membership are growing all the time.

Dominic Byrne
President, BSGE



BSGE ASM 2016

“KERNOW A’GAS DYNERGH” – WELCOME TO CORNWALL

More than 300 delegates were welcomed to the BSGE’s Annual Scientific Meeting in Cornwall. Susie Bates, chair of the local organising committee, arranged a hugely successful meeting, in a glorious location, with the largest number of delegates that the BSGE has ever hosted outside London.

Introducing the meeting’s chosen theme of training in endoscopy, she talked about the BSGE’s exponential growth and the importance of building “from shifting sands to firm foundations.”

With a busy and diverse schedule, including meet the expert sessions, an active and well-attended nurses’ conference, stimulating lectures, debates, lots of support and information from industry partners and a patient panel, there was plenty to interest, educate and entertain everyone.



Patient representatives

Representatives from Endometriosis UK joined consultants, trainees and nurse specialists. Carol Pearson, patient lead for Endo UK, talked to members about empowering women and Rachel Jackson was part of a patient panel, relating individual experiences of endometriosis and ensuring that the patient’s voice was heard.

“The BSGE are innovative. Here we are talking about the best of the best. Unfortunately too many women are still seeing medical staff who aren’t aware about endometriosis, we want to spread the word so that there is increased referral to specialist centres.

Too many doctors believe there is no point in diagnosing endometriosis because they feel that nothing can be done. But women deserve to get the right diagnosis so that they can make informed choices about their future life and treatment, based on the facts.”

Both Carol and Rachel were positive about the BSGE’s Accredited Endocentre scheme, saying it was really helpful for signposting specialist centres but also observed that it highlighted areas where there are gaps, such as the presence of only one Endocentre in the whole of Wales. They looked forward to the centres progressing even further to provide women with consistent and quality care.



BSGE ASM 2016

Industry Partners

We were blown away by the level of support from industry at this year's ASM. Tyrone Carpenter, chair of the BSGE industry portfolio, reported that the meeting was over-subscribed with a huge number of stands, sponsored presentations and support for pre-meeting courses.

The Scope spoke to the platinum sponsors Covidien/Medtronic, Ethicon, Karl Storz, Olympus Medical and Stryker UK.



"As a long-time supporter of BSGE we are heavily committed to supporting training and continuing our great relationship. We are also looking to showcase our 3D technology and advanced energy" Mark Martin, Karl Storz



"We are glad to be in Cornwall supporting professional education, promoting our new products and building relationships. We are particularly hoping to demonstrate 3D and 4K, our latest imaging technologies" Olympus Medical



"As a company we are focused on gynaecology. We have worked with new president Dominic Byrne and are here at the ASM to support him and meet BSGE members. We provided the live integrated theatre link for the pre-conference masterclass which went seamlessly." Ben Greaves, Stryker



"We have a longstanding partnership with BSGE and are here at the ASM to show our support, showcase new products and talk about our global research and development direction. We even have a secret booth to surprise members later on in the conference!" Kate McGeechan, Ethicon



BSGE ASM 2016



"Gynaecology is a key market for us and we are here supporting the BSGE, reinforcing our message, catching up on training needs, promoting our energy sources and cementing our relationships." Medtronic/Covidien

Nurse Conference

It was the seventh year of the Endometriosis Nurse conference at the ASM and with the BSGE stipulating that accredited Endocentres require a specialist nurse, it really has gone from strength to strength. The Scope spoke to Cathy Dean who put together an agenda designed to respond to the specific needs of the delegates.

"We wanted to put together a programme that was relevant and interesting. We used the data obtained from Gill Smith's audit and took the subjects that the nurses really wanted to

hear about. We heard from a patient experience panel, had a lecture on the care and advice for women following bowel resection and discussed the use of acupuncture for pain management"

The final debate was a particular high point, with everyone able to share ideas and experiences and discuss strategies together with Cathy and Wendy Norton from the RCN Women's Health Forum Committee.

Cathy added that the conference is really the only time the endometriosis nurses get together and it is an invaluable opportunity to further their education, discuss the latest treatment strategies and, most importantly, learn from each other's experiences.





BSGE ASM 2016

Time for work and play

In the evening the BSGE took over the stunning Eden project for the annual Gala Dinner. Guests sipped champagne, safe from the rain, in the beautiful scented surroundings of the Mediterranean Biodome.

Later, we were told about how Eden's vital botanical work is helping to connect us with each other and the living world and exploring how we can work towards a better and more sustainable future. With fantastic food, free flowing wine and extremely lively conversation, a wonderful time was had by all.



NEW BSGE COUNCIL ANNOUNCED AT AGM

The results of the recent BSGE council elections were announced at the annual general meeting at the ASM in Cornwall.

Ertan Saridogan handed over the presidency of the BSGE to president-elect Dominic Byrne. Ertan has overseen a period of exponential growth for the BSGE, easily surpassing the target of a thousand members by January this year. The financial figures and the individual portfolio reports, presented at the meeting, confirmed that the society has grown stronger and more influential under his leadership.

Handing over to Dominic Byrne, he said

"It is a pleasure to be handing over to Dominic, he has been a strong, hard-working and supportive vice president and I'm sure the Society will be in very safe hands"

Dominic has previously been active in setting up the BSGE's well-regarded and successful accredited Endometriosis Centres programme, which he has now placed into the capable hands of Chris Guyer.

He will be supported on the council by Sanjay Vyas, who was elected as Vice President. Mark Whittaker and Thomas Ind will continue in their very successful roles as Honorary Secretary and Treasurer respectively.

Shaheen Khazali and Justin Clark will continue as senior representatives and will be joined by Kirana Arambage who replaces Simon Jackson. Jackson has stepped down from his role as a fair, organised and supportive allocator of awards. Donna Ghosh joins Fevzi Shakir who was re-elected as the trainee representatives.



In his first presidential address, delivered confidently without notes, Dominic thanked the members of the committee for their individual achievements as well as praising Susie Bates and the local organising committee for the hugely successful ASM. He paid tribute to the outgoing president saying

"I would like to thank Ertan for all his hard work and considerable achievements as President. It has been a pleasure to work with Ertan whose expertise and wise judgment has been invaluable."

With the launch of the LapHyst project, the new website and a number of courses and meetings running this year, including a symposium on modern management of fibroids in London in November, the BSGE certainly has another exciting year in prospect. We wish council members new and old all the very best for the challenges and opportunities ahead.





LAUNCH OF THE NATIONAL LAPAROSCOPIC HYSTERECTOMY TRAINING PROGRAMME (LAPHYST)

The BSGE has launched an ambitious project to train four hundred gynaecologists in the UK to perform Total Laparoscopic Hysterectomy (TLH) so that patients across the country can have access to the many benefits of this procedure.

Outgoing BSGE president Ertan Saridogan, Honorary Secretary Mark Whittaker, Jim English and Natasha Waters (project governance) updated members on the National Laparoscopic Hysterectomy Training Programme (LapHyst) at the Annual Scientific Meeting in Cornwall.

Rates of laparoscopic hysterectomies in the UK are low compared to other countries, with only approximately 20% being performed using some form of laparoscopic assistance. To offer a modern service that better provides for women we should be replacing many total abdominal hysterectomies with TLH. With the BSGE's history of promoting minimal access surgery there is no one better placed than the Society to take on this project.

The team were inspired by the LAPCO project, where rates of laparoscopic colorectal surgery increased significantly from just 15% to an impressive 40%, smashing the initial target of 25%.

LAPHYST will include four modules, including one-to-one mentorship by a trained faculty member. The course has been developed recognising the need for a standardised programme using the skills and enthusiasm of those involved. The modules are:

Module 1: Online training

Module 2: Skills development and assistance

Module 3: Masterclass and anatomy

Module 4: One-to-one mentorship at the trainees own hospital

A training the trainers course has already been run and now a series of pilot programmes are being run by Olympus and Ethicon/Storz. Funding is an issue but the BSGE has already been assured of support and assistance from our industry partners. Storz, Ethicon and Olympus have all committed to help sponsor early courses, with Stryker and Medtronic as well as many other smaller companies also interested in being involved.

The first two courses will train twelve gynaecology consultants in the UK. The first course was recently successfully completed. It was sponsored by Olympus and run by Jim English and Natasha Waters. The second course will take place in September, sponsored by Ethicon.

Many BSGE members were disappointed not to gain places on these early courses. However, this is just the start of the process, with many more programmes to follow. It is hope that the course fees will be covered by a combination of industry support and payment from NHS trusts because of the undoubted cost benefits of TLH, with shorter hospital stays and improved patient outcomes. This is a groundbreaking project for the BSGE, with huge potential benefits for surgeons, trusts and women across the country. If any members have ideas on how we can access any additional funding for the training or research, or if you are interested in learning more please get in touch.





WHERE WE ARE NOW AND WHERE WE'RE GOING – ASM 2017 HULL

The BSGE ASM 2017 will take place in Kingston upon Hull. Announcing the meeting, Kevin Phillips, who was BSGE president from 2012 to 2014 and is now one of four trust medical directors at Hull and East Yorkshire Hospitals NHS Trust, enthused about the vibrant city which is to be the UK's City of Culture in 2017.

The very first full meeting of the new BSGE was held in Hull, hometown of the first president Alan Gordon, in September 1990. Back in 1990 Jacques Donnez from Brussels was the keynote speaker. The meeting took the form of a two-day presentation of scientific papers with a dinner in the hotel on the first evening. The meeting was very successful with about 50 participants, many of whom have since become leaders in the field. More than a quarter of a century later, next year's meeting will hopefully be just as innovative and influential.

Hull was recently named by the Rough Guides as one of the top ten places in the world to visit, alongside Amsterdam, Nashville and Mexico City.

"...brimming with new hotels and restaurants, and even more of that distinctive home-grown creativity the city has always had. There are atmospheric old-timey pubs, eight excellent museums and a picturesque Old Town with cobbled streets."

With excellent transport links, great meeting locations and a packed programme of lectures, debates, education, research and the odd chance to socialise too, Hull 2017 is not to be missed.

Kevin told The Scope that the main theme of ASM 2017 will be where we are currently and where we are going in gynaecological endoscopy.

We will look at the current state of play around the country. For example in hysteroscopy, we may debate hot topics like the move of procedures to the outpatients which were traditionally done in theatre, what we need to do to move things forward and the impact this will have on care, access and safety for these patients.



Kevin Phillips

For laparoscopy we will explore the treatment of common problems such as the hysterectomy, how do we compare to the rest of Europe and the developed world? How do we change nationally to move forward and what is the resource implication of such moves? For the more complex areas, what are we doing locally and nationally and what is the evidence telling us.

I hope we will be able to draw together the themes of how we can deliver the very best care for all patients in gynaecological endoscopy, rather than this be governed by postcode or who you see.

The BSGE as the leaders will be the catalyst for helping us get to where we think is the correct place in the years to come.

So, make a note in your diary – BSGE ANNUAL SCIENTIFIC MEETING 2017, HULL from the 17th to 19th May, 2017. Keep an eye for further information and early booking discounts.





<http://www.bsge.org.uk/>



Visit Hull and
East Yorkshire

<http://www.visitthullandeastyorkshire.com/>

Where we are now and Where we are going...



BSGE Annual Conference 2017
17-19th May 2017





THE BSGE MEETS... FABIO GHEZZI

The Scope were privileged to talk to pioneering Italian endoscopic surgeon, Fabio Ghezzi, from Università degli Studi dell'Insubria, Varese, ahead of his fascinating and inspiring presentation to delegates at the ASM in May. We chatted about everything from surgical technique and simplicity to mini laparoscopies and Cornish pasties.

It is an honour for me to be at this meeting. I'm here because some surgeons from the UK came to my hospital to see how we work and they invited me to speak. We are a small team of people and we have tried to make laparoscopic surgery very simple.

We don't work in a different way. What we have tried to do is to simplify all the minimally invasive gynaecological operations so that we always follow the same steps from the beginning to the end.

What do I mean by simplicity? I mean that you can perform very sophisticated operations with just three instruments. If you only use three instruments you will be very familiar with these instruments and use them more easily. We perform most of our operations including oncology, endometriosis and urogynaecology with just a few instruments.

The most important instrument we have in our hands is the brain. I see surgeons performing a simple salpingo-oophorectomy using four disposable instruments and I ask why? Using expensive instruments doesn't mean good surgery.

In theatre the role of the rest of the team, of the scrub nurse and the anaesthesiologist, is crucial. In our theatre they know exactly what they have to do. On a Monday morning, from eight o'clock to two o'clock, it could be that the anaesthesiologist doesn't say a single word and the same for the scrub nurse. And the reason for that is, we have made everything very, very simple. We always use the same configuration for every operation, we never, ever change it. Everyone knows exactly what they have to do. Sometimes we perform as many as six total laparoscopic hysterectomies in one morning.



To me, the mini laparoscopy we perform, is an opportunity. It is not for everyone but the advantage is we have the small instruments available on the market.

You do not need to change your way of thinking, of working, it's the same devices, same positions, just changing the calibre of the instruments. People ask me if the instruments are fragile. Yes, they are, but that is not a reason to use a disposable instrument that costs £600.

My most important advice for young trainees would be to imagine they are working in a place where they have no money and they have to perform an operation without opening the abdomen. The only thing they would have is their knowledge of anatomy; they need to really know anatomy. They do not need sophisticated instruments and robotic devices as it can prevent them learning the skills they need.

Cornwall is beautiful and, in my opinion, a very good choice to hold the meeting. We were lucky the weather was fantastic and my wife and I had the opportunity to visit some nice places; we will definitely try some Cornish Pasties before we leave!



INTRODUCING OUR NEW ASSISTANT EDITOR



Dr Jane Gilbert has recently joined the BSGE editorial board. As the assistant editor she has helped produce this edition of The Scope. She joined us in Cornwall for the ASM and regularly reports on recent news and developments on the website. Jane has launched the BSGE twitter stream @TheBSGE and keeps members regularly updated on anything interesting, relevant or entertaining in the world of gynaecological endoscopy.

Jane qualified as a doctor from St Mary's Hospital Medical School just as it was being eaten up by Imperial College. She has been working for the past eighteen years as a health journalist. She has been published widely and created content for Roche Pharmaceuticals, Diabetes Wales, Hamlyn books, Boots, ITV and Channel 4 and a number of NHS Trusts, she has also presented her own series 'Call Dr. Jane' for regional ITV. Members of a certain age may remember Jane's toe-curling interview for medical school which featured on the popular BBC series 'Doctors to Be.'

Jane told The Scope

"I'm delighted to be joining the BSGE webcomms team at this exciting time of change. Hopefully by improving the way we communicate we can make members more likely to engage with the society. I was so impressed with the level of engagement and passion for minimal access surgery demonstrated in Cornwall. With the new website forum, video library and social media activity we hope to continue this level of interaction and enthusiasm in the virtual world of the BSGE."

Please feel free to drop Jane an email if you have any interesting news, photos or events to share with our members on drjanegilbert@hotmail.com.



Advertising on the website and newsletter

Advertising with the BSGE, in 'The Scope' or on the website, can help your business reach a specific target group of gynaecological consultants, trainees and specialist nurse practitioners.

'The Scope' is delivered quarterly to more than a thousand members and is also available to download online on our newly relaunched website. Back issues are still accessed and read by members and casual clickers.

If you would like to find out more please email Atia Khan at bsge@rcog.org.uk





PORTFOLIO REPORTS

Hysteroscopy

It has been another productive and interesting year for the Hysteroscopy portfolio. Sameer Umranikar started work on the Hysteroscopic Fluid Management Guideline. We look forward to reading his report in due course.

As ever there have been plenty of training opportunities.

Mary Connor and Stephen Burrell ran the successful annual hysteroscopy course in conjunction with the RCOG and held at the college. The Annual Nurse Hysteroscopy Meeting, held at Bradford University in March, was well-attended and stimulating with a strong emphasis on pain management. And there's more to come. Due to demand and positive feedback there will be an additional hands-on hysteroscopy course in July, so look at the events section of the website and book a place if you're interested.

We have also been involved in the successful launch of 'See and Treat', a one-stop outpatient hysteroscopy service in Ireland, which gathered coverage on National Irish News.

An outpatient hysteroscopy patient information leaflet has been developed in conjunction with a freedom of information request and an analysis of pain and patient choice in outpatient hysteroscopy, conducted by Katharine Tylko-Hill (Macmillan CancerVOICE and Cochrane Gynae Group Consumer) and the nurse hysteroscopists workshop. A WHO outpatient hysteroscopy checklist has been developed based on the recommendation of NPSA, which should help members deliver a better service.

So what about the future? In a survey of members, we found that 70% of clinicians are trained on site with no curriculum or competence assessment. We hope to improve this by working on a training module for outpatient hysteroscopy in conjunction with European Colleagues. We have contacted the RCOG ATSM officers to request an update to the current hysteroscopy advanced training skills module. Keep an eye on the website for more information, opportunities, courses and final guidelines.

Natasha Waters

Hysteroscopy Portfolio Chair



Endometriosis Centres

The development of accredited Endometriosis Centres has been one of the BSGE's most successful and well-regarded programmes. Between 2004 and 2010 we established a gynaecological and colorectal coalition, developed a database of the effects and complications of surgery for DIE and introduced accreditation for centres with a minimum number of cases in their database.

Over the last six years we have taken the programme several steps further. We have refined the database, introducing IT support, data entry and e-mail follow up. We have increased openness and accountability with the publication of data collected and we now release an annual accreditation report and exemplar video to encourage best practice.

So what next? We are committed to the ongoing improvement in quality of care for women with endometriosis. We will continue to develop the accredited Endometriosis Centres by introducing video scoring and endometriosis classification with Visual Numeric Endometriosis Surgical Staging (VNESS). The BSGE has further plans to hold an annual meeting or masterclass to share best practice, so we can educate and learn together.

Chris Guyer

Endometriosis Centres Portfolio Chair



Awards Portfolio

The BSGE offers a number of awards and bursaries for members who have been with us for at least twelve months. We award Ethicon educational grants, which are generous bursaries allowing hands-on and theoretical training, in laparoscopic hysterectomy techniques.

In addition we have awarded over £20,000 worth of grants in the financial year to support consultants, trainees and nurse specialists in education, research and travel.





PORTFOLIO REPORTS

Applications are welcomed from medical, nurse and paramedical BSGE members. Bursaries are available to support educational courses relevant to gynaecological endoscopy. Examples would include nurse and GP hysteroscopy courses, endoscopic MSc. courses & nurse endoscopic surgical assistant courses.

Travel awards are available to enable medics to visit other centres of excellence, either UK or overseas. There are categories for consultants/SAS, trainees, GPs, nurses and paramedics.

Find out more and keep up-to-date with application deadlines on the website at <http://bsge.org.uk/awards-bursaries/>

Kirana Arambage

Awards Portfolio Chair

Guidelines

In the past producing guidelines has been a laborious process due to poorly defined methodology. Often individuals learned by doing and the burden of guidelines fell on just a few collaborators.

We have worked to make producing guidelines a simpler and more streamlined process and have encouraged wider engagement

and greater collaboration. We are currently developing a laparoscopy in pregnancy guideline. We have a network of researchers involved and are working closely with the RCOG, who have just recently received our draft submission.

The next stage will be the BSGE peer review in August, followed by submission of the final guidelines to the Royal College in September.

Looking forward, we are planning to create a document entitled 'How to Write a Guideline'. It will be a guideline to guidelines, if you like, making the process clearer, less complicated and improving methodology. We hope to source funding for systematic searches and will assemble a directory of motivated future researchers and continue to encourage our close links with the RCOG guideline team.

Please continue to check the Guidelines and News sections of the website for updates on the release of new material.

Elizabeth Ball

Guidelines Portfolio Chair



Industry Relations

The BSGE's relationship with industry continues to go from strength to strength. This allows the society to stage first-class scientific meetings as well as run an advanced training programme in laparoscopic hysterectomy supported by both Ethicon and Olympus.



Support for the Annual Scientific Meeting in Cornwall has been outstanding, in fact it was oversubscribed. We would particularly like to thank our platinum sponsors for the meeting: Covidien/Medtronic, Ethicon, Karl Storz, Olympus Medical and Stryker UK. Other sponsors included Braun Medical Ltd., Espiner Medical Ltd, ConMed UK, Hologic, Kebomed UK, Lotus (SRA Developments), Smith & Nephew, Stericom Ltd and Teleflex Medical UK.

In addition this year the BSGE, in collaboration with the RCOG, will be running a one day symposium at the RCOG on 'Modern Management of Fibroids'. This will be held on Friday 4th November. This has also been well supported by industry and there are only a few sponsorship packages left. If you know of any company who may wish to sponsor this meeting please advise them to contact Tyrone Carpenter (tyrone.carpenter@poole.nhs.uk) or Ursula Samson (USamson@RCOG.ORG.UK) as soon as possible.

So, where does the future lie? The BSGE is always looking at ways to enhance industry relations. We want to maintain the excellent support for the ASM but also diversify. Advertising in The Scope and on the Website or encouraging an industry presence at other meetings could help to increase industry engagement and financial support. Better 'joined up' sponsorship of projects and longer term packages would help develop our relationships further, resulting in an improvement in the quality of training, research and patient care by working together with industry. If you have any ideas or suggestions please let us know.

Tyrone Carpenter

Industry Relations Portfolio Chair



PORTFOLIO REPORTS

Laparoscopy Training

The laparoscopy training portfolio has always been a key part of the BSGE, with extensive opportunities to take part in workshops, courses, meet the expert sessions and hands-on-training programmes (HOT).



Recently we have developed links with the RCOG SIM Net group and undertaken the pilot project on SIM training. We ran a practical workshop at the last joint RCOG and BSGE course and a successful hands-on-training workshop at the ASM in Cornwall. Due to popular demand there will be a further practical HOT day at the college later this year, keep an eye on the events section of the website for details of all the training opportunities available.

In the future we will continue to drive and support training. We hope to develop a national BSGE standardised curriculum. This can be set up across all the Deaneries in a standard format to ensure educational consistency and quality.

We plan to develop a trainers' training day, to be held by the BSGE or in conjunction with the RCOG, to further improve the standard of training. We also hope to increase our communication and engagement with other international societies committed to promoting minimally invasive gynaecological surgery.

Sameer Umranikar

Laparoscopy Training Portfolio Chair

Nurses and Paramedics

The BSGE nurse and paramedic portfolio can reflect on a very successful year and look forward to an even more exciting future.



The ASM, in both 2015 and 2016, had large numbers of nurse delegates and there were very interesting and educational breakout sessions during both meetings. There have also been two very successful NH meetings and the NH treatment audit was completed. We plan to use the results gained to inform future accreditation.

We have also been active in the field of Endometriosis, with the Endometriosis CNSs audit completed, a new Endometriosis project launched and the first training day for Endometriosis CNSs held in November 2015.

Currently we are working hard towards developing NH accreditation for diagnostic hysteroscopy and treatments and also developing BSGE guidelines for Endometriosis CNSs. We have created a documents working party and are working closely with the RCOG to achieve our goals.

In the future we have greater plans ahead. We are planning to introduce a reaccreditation structure, to standardise and streamline the process. Through document sharing we hope to improve the successful exchange of information. The new BSGE website has been launched, with much improved functionality. We plan to take advantage of this by launching a nurse and paramedic discussion forum to share our knowledge, our successes and our failures. With so much planned for the future of the Society, we all also need to consider succession planning and choosing the right people to continue to drive us forward.

Gill Smith

Nurses and Paramedics Portfolio Chair



PORTFOLIO REPORTS

Research and Audit

As innovators working to ensure women receive the very best quality of care, research and audit has always been key part of the BSGE's remit. We have cemented links with the clinical studies group MDEGE and have been actively involved in four funded trials in our speciality, with funding worth in excess of £5million: (NIHR)



- PRE-EMPT (Preventing Recurrence of Endometriosis by Means of long acting Progestogen Therapy) – RCT of LARCs vs COC post laparoscopic endometriosis surgery (CI Sildatiya Bhattacharya)
- HEALTH – RCT of short stay laparoscopic subtotal hysterectomy vs second generation endometrial ablation (CIs Kevin Cooper and Sildatiya Bhattacharya)
- UCON – RCT with mechanistic assessment of Ulipristal acetate vs LNG-IUS for HMB (CI Hilary Critchley)
- GAPP – RCT of Gabapentin vs placebo for chronic pelvic pain (PI Andrew Horne)

We continue to drive new PICO's and are in the process of surveying all BSGE members for new research ideas and directions.

In the field of audit we have successfully developed BSGE data collections tools for both laparoscopic and hysteroscopic procedures. We are currently in the process of moving this to the next level with IT programming, followed by pilot schemes (3-6 months), before rolling this out to the BSGE membership.

In the future we hope to expand our research and audit interests, forging closer links with clinical studies groups for generating PICO's, conducting surveys and obtaining pilot data to inform research applications. We will develop our research networks in laparoscopy, hysteroscopy and ambulatory services. We aim to have a funded BSGE Research Fellow to research into aspects of gynaecological endoscopy.

In audit we hope to encourage widespread adoption of BSGE surgical data collection tools. We will develop indicators for Gynaecological Endoscopy and bespoke 'off the shelf' electronic audit tools linked to the BSGE surgical data collection tools. It is a very exciting time, with the BSGE continuing to act as leaders in the field. If anyone has a suggestions or feedback please get in touch on t.j.clark@doctors.org.uk.

T. Justin Clark

Research and Audit Portfolio Chair





PORTFOLIO REPORTS

Trainees

The BSGE is becoming an increasingly welcoming and stimulating society for trainees. There are currently 361 fully paid trainee members, making up 35% of total BSGE members and the popularity continues to increase. We collaborated with the ESGE Young Endoscopists Platform at the Silver Jubilee Meeting, increasing opportunities for members to share knowledge and network.

There was a BSGE presence at the both the junior doctors' day and the medical student day at the RCOG. We have recently agreed to free BSGE membership for medical students to encourage them to join and hopefully stay with us for the rest of their careers.

We have run a number of popular industry sponsored courses for trainees. Sponsored Advanced Laparoscopy Courses for

Trainees have been supported by Ethicon (24 places) and Olympus (12 places). The successful and well-regarded fresh Human Cadaveric Course (sponsored by Striker and Covidien) took place this year for the third time and goes from strength to strength.

Looking forward, we will continue to work with our current industry partners, who have been a great support. We also hope to develop industry sponsored courses with other companies, currently not involved. We are designing a web-based video endoscopic procedural skills programme, to make training and education more accessible and available to a larger number of members.

One of the most exciting developments for trainees was launched at the ASM in Cornwall.

Registrars in Gynaecological Surgery (RIGS) is a group run by trainees for trainees and will have an integral role within the BSGE. The new website launch has allowed us the opportunity to develop a dedicated trainee section providing useful links, resources, courses, ATSM/fellowship information and news of bursaries and awards. In the future we hope to drive this further with a trainee forum and increased interaction and engagement.

As you can see, it is an exciting time for trainees within the society and we will continue to represent your needs at the council meetings, voicing your views and suggestions to improve training opportunities and address any concerns.

Fevzi Shakir and Donna Ghosh

BSGE Trainee representatives



Fevzi Shakir



Donna Ghosh





WINNERS AT THE BSGE ASM

There were plenty of opportunities for trainees at the recent ASM in Cornwall. The BSGE ran a hands-on-training laparoscopic surgical masterclass ahead of the meeting at the Royal Cornwall Hospital, supported by platinum sponsors Storz. Participants learned new techniques and were able to see how their skills rated against their peers. The workshop consisted of different, validated, exercises performed on pelvic trainers according to the LAST+T (Laparoscopic Skills Training and Testing method) and SUT+T methods (suturing training and testing). After having their camera navigation, hand-eye coordination, bimanual coordination and suturing skills rigorously tested, the delegates received confidential results of their performance from the European Academy direct to their smart phones, tablets or computers.

Gemma Clemente was the winning participant with the top score and has been invited and funded to represent the UK in the World Championship in Laparoscopic Suturing at the upcoming ESGE meeting in October. We wish Gemma all the best as she represents the BSGE in Brussels this autumn.

The BSGE also handed out £1450 in prizes. This year's ASM had a record number of delegates for a meeting outside London and the high level of engagement and involvement was reflected in the abstract entries. The awards for video, oral, poster and video poster presentations were all hotly contested, with the judges extremely impressed with the overall standard.

In the oral presentation category, Zahid Khan won gold and the £200 prize for his abstract asking if animal models are superior to virtual reality simulation. Mehrnoosh Aref-Adib and Chou Phay Lim took the silver and bronze awards.



Fevzi Shakir was presented with the gold for his video presentation of a combined laparoscopic, vesicoscopic and vaginal repair of a vesico-vaginal fistula. Fellow BSGE council trainee representative, Donna Ghosh, followed him in silver, with Ryan Hogan taking the bronze award.

Tom Holland won £150 and the gold prize for his video poster on ultrasound diagnosis and three techniques for the laparoscopic treatment of interstitial ectopic pregnancy. George Goumalatsos and Richard Keedwall also received plaudits for their silver and bronze winning presentations.

In the final section, Katerina Efstathiou collected gold and £100 for the poster presentation 'Diagnostic Laparoscopy is not indicated in young adults with normal findings at examination and on ultrasound scan'. Completing the awards were Zahid Khan and Liz Bruen winning silver and bronze.



NEW BSGE TRAINEE REPRESENTATIVE



The results of the recent BSGE elections were announced at the ASM in Cornwall. Donna Ghosh was elected to join Fevzi Shakir, who was successfully re-elected, in running the Trainee Portfolio and the Registrars in Gynaecological Surgery Group.



Donna Ghosh

Kirana Arambage and Fevzi Shakir have been instrumental in driving the membership and opportunities for trainees forward with sponsored courses, the recent launch of the RIGS and membership reaching its highest ever level. Following his election, Kirana will now take over the Awards portfolio as a senior council member.

Donna has been a member of the BSGE since 2010 and says she has benefitted from a range of training and development opportunities supported by the BSGE. She completed the first Ethicon-BSGE sponsored TLH course in 2014, won the trainee video competition in 2016 and has also presented at national and international conferences, receiving prizes at the 2014 and 2016 BSGE ASM.

Donna is undertaking the ATSM in advanced laparoscopy at the Wirral University Teaching Hospital. With experience across deaneries in the UK and within Australia, she promises to represent the views of UK trainees, aiming to improve training for those with a similar passion for minimal access surgery.

It is an intriguing time of development and change for the Trainee portfolio and The Scope wishes Fevzi and Donna all the best with their plans to support training, increase engagement and provide the best opportunities for members.

ADVANCED LAPAROSCOPY ATSM, WHAT'S IT REALLY LIKE?



Tim Hookway reports on his experience of the first year of his advanced training

Having enjoyed many aspect of my training to date, I was initially unsure of which area within obstetrics and gynaecology most interested me. A few years ago, I spent a year working in an Endometriosis Centre, and found the workload intriguing, challenging and rewarding. This certainly piqued my interest in laparoscopic surgery as a career and thus, as I approached the latter stages of specialty training, I applied for the Advanced Laparoscopy ATSM.



Tim Hookway

Owing to the specialised nature of the ATSM, only 5 places are available nationally each year. A centralised recruitment system is used, often co-ordinated by London Shared Services Recruitment. The first step was a structured application form, with questions designed to discuss relevant experience, aptitude and enthusiasm for laparoscopic surgery. High scoring applicants were invited to an interview at the RCOG, consisting of a structured interview, a clinical scenario and discussion, and a practical skills test on a simulator. I left the interview thinking that my knowledge, skills and experience had certainly been thoroughly assessed!

I was successful and was offered a post in Wessex – meaning I had to apply for out of programme approval from London. The first year is spent in Winchester learning laparoscopic hysterectomy, with some endometriosis work and I will shortly be moving to Southampton with a greater volume of severe endometriosis surgery. In most of the other units, the trainee stays in the same Trust for the entire ATSM. The training itself is challenging, but interesting and rewarding, and there is enough space within the rota to develop other specialist interests, or to complete a second ATSM required to obtain a CCT.

I would wholeheartedly recommend the ATSM to anyone wanting to pursue a career in laparoscopic surgery. The training on offer is fantastic and widely supported by the ever-increasing array of courses available via the BSGE.



ENDOMETRIOSIS SURGERY WITHOUT BORDERS

Saikat Banerjee talks about his recent visit to ACEMIG (Avicenna Centre for Endometriosis and Minimally Invasive Gynaecology), Tehran

The Scope spoke to Saikat Banerjee, Consultant Gynaecologist at CEMIG (Centre for Endometriosis and Minimally Invasive Gynaecology), Ashford & St Peter's Hospitals, Chertsey, Surrey and past BSGE Council member. Saikat had just returned from a trip to Tehran, giving a lecture in a workshop and visiting ACEMIG, BSGE accredited Endocentre there. He told us about his experience.

I visited Tehran at the invitation of my colleague, Shaheen Khazali. My fellow travellers were our Clinical Fellow, Nadine Di-Donato and Paul Lewis, Head of Gynaecology at Karl Storz-UK. Shaheen goes regularly to teach and operate there and speaks of it in glowing terms. I suppose I was curious, but in many ways I was a bit anxious about travelling to Iran, with all the negative media coverage.

However, from the moment we were met at the airport by the man with my name on his board at the foot of the airplane and the greeting lounge with food, drinks and all

the creature comforts for the long distance traveller, I started to relax. Iranians are certainly welcoming and we were well looked after at every point during our stay. It was clean and modern, the roads were new-but they drive like maniacs!

The hospital was very modern and clean. Most UK facilities would be in awe of the quality of care, the commitment and enthusiasm from the team and how things just happen without any fuss. While some of the laparoscopic equipment



Saikat Banerjee





ENDOMETRIOSIS SURGERY WITHOUT BORDERS

was relatively basic, the ultrasound was extremely advanced. I was most impressed by both the volume and the level of work. Shaheen and his team of 4 fellows operated on 34 complex endometriosis cases in 8 days, which included 7 segmental bowel resections; that is an extraordinary workload.

I have returned to the UK with a new view; it was arrogant of me to think. We could all learn something from the service in Tehran. I always learn new ideas and tricks and this visit was no exception. There are many things the NHS can learn from the Avicenna center in Tehran.

I think years of sanctions and also internal restrictions have been a barrier to free movement of expertise and information. In the UK we have a network of international contacts for research and for sharing knowledge. This is much more difficult in Iran. For example, the internet is restricted and although they can view the BSGE website, they are unable to watch our video library.

What they do have in abundance is experience, pride in their team, camaraderie and a real desire to do the best for their patients, to put the patient first and work towards a common goal.

In a country where I thought women are restricted in their careers, It was interesting to see that most (almost all) of the gynaecologists were women. The state TV had produced a series of programmes to promote endometriosis awareness which is an eye opener and something we could adopt in the West!

What came across the most was their desire to perform a high quality service, from the boss to the porter. At every level the staff have a pride in the service they provide and want to offer the very best possible care to their women.

I would definitely love to go there again.

ACEMIG is organising a meeting on Endometriosis and Minimally Invasive Gynaecology in Tehran 24th-27th October 2016.

BSGE members have been offered free conference registration. The organisers will also assist in travel arrangements and visa.

If you are interested in finding out more about attending the meeting in Tehran or if you want to go and observe endometriosis surgery at ACEMIG, contact Avicenna Research Institute's international relations office at s.abouzar@ari.ir

The 3rd National and the 1st International Congress on Endometriosis and Minimally Invasive Gynecology (EMIG)

کنگره بین المللی اندومتریوز جراحی های کم تهاجمی زنان

۴-۶ آبان ماه ۱۳۹۵
25 - 27 October 2016

In collaboration with ACEMIG (European Centre for Endometriosis and Minimally Invasive Gynaecology)

International Faculty: (in alphabetical order)

Dr. Madhavi Kharali Chair of Scientific Committee England - Iran GIBSIC Addenbrooke & St. Peter's Hospitals, Queen's Bread Hallway, University of London	Dr. Vangelia Ouzouni Greece Athens	Dr. Mikko Pesonen Finland Hospital Dr. Aho, Helsinki Finland
Professor Karen Ballard England University of Surrey and Surrey College, Guildford	Dr. Sarah Louden England Hampshire Endometriosis Centre Winchester	Dr. Russell Taylor England Royal United Hospital Bath
Professor Fabio Cibasi Italy University of Turin Varese	Dr. Natalia Pisan England Independent in Gynaecology Oxford	Dr. Abbas Kazemifard Iran Tehran
Dr. Adam Mann England Hampshire Endometriosis Centre Southampton	Dr. Roberto Yessif England Independent in Gynaecological Oxford	Professor Jeremy Wright England Past president - British Society for Gynaecological Endoscopy (BSGE)
Dr. Hansman Sukermeel Vaid England University Fellow in Gynaecological Oxford		

تلفن: ۰۲۱-۷۷۱۹۱۳۱ | ایمیل: ari@endometriosis.org.uk | www.endometriosis.org.uk



OPINION

Endometriosis Classification – The Quest for the Holy Grail?



Shaheen Khazali

In this new section of “The Scope”, we will be publishing opinions, clinical or otherwise, from BSGE members.

Professor Justin Clark – member of BSGE council and member of The Scope editorial board – looks after this section and reviews submissions. If you wish to submit an opinion piece for this section please get in touch by emailing BSGE@rcog.org.uk

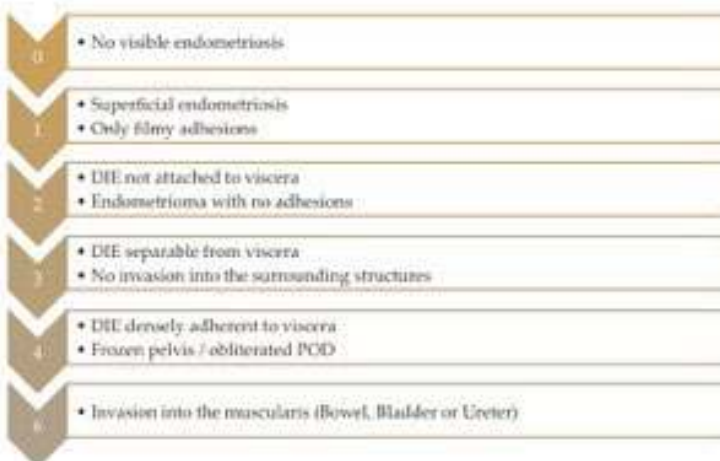
Endometriosis has baffled us for almost a century. Despite important advances, there is a constant struggle to confidently answer many fundamental questions regarding this enigmatic disease. Lack of a widely accepted classification system that accurately describes the extent and severity of the disease and takes into account various phenotypes-in particular deep infiltrative disease- is amongst factors that have hindered research in the field. Furthermore, comparison of surgical outcomes and complication rates requires a tool that accurately describes surgical complexity.

Numerous systems for classification or staging of endometriosis have been proposed to date. The most commonly used is currently the revised American Society for Reproductive

Medicine (rASRM) (1). rASRM has been criticized for its arbitrary point system, its poor reproducibility and lack of correlation with symptoms (2). Also, this system is unhelpful in describing deep infiltrative endometriosis.

The Enzian system (3) attempts to address some of the above problems in more advanced diseases but has failed to gain wide acceptance, perhaps because of its complexity. Endometriosis Fertility Index (EFI) has shown promise in predicting pregnancy outcomes (4) and is the only system validated to predict a clinical outcome in endometriosis but is not designed to benchmark surgical complexity or to correlate with symptoms. Attempts to develop a better classification system are ongoing (2) but are we on the right track?

VNESS





OPINION

With permission from Journal of Reproduction and Infertility.

Editorial published in J Reprod Infertil, Vol 17, No 2, Apr-Jun 2016

The more we understand endometriosis, the clearer it becomes that the highly complex nature of the disease defies a single all-encompassing classification system. Perhaps a system that accurately describes the surgical findings, whilst correlating with symptoms and predicting fertility outcomes cannot exist as the pathophysiology of the disease and the ways it causes its multitude of symptoms are convoluted. The success of EFI is due to its narrow scope and the fact that it doesn't aim to solve all the problems at the same time. Therefore, a similar approach is needed to devise a system that limits itself to describing the surgical findings; without attempting to correlate with symptoms or fertility outcomes.

We have been working on such a system in the last two years. VNESS (Visual Numeric Endometriosis Surgical Staging) merely describes intra-operative findings using 8 numbers. Each number corresponds to a compartment in the pelvis, starting from the left adnexa, and going down to the pouch of Douglas and back up to the right adnexa.

The disease severity in each compartment can be between 0 (No disease) to 4 (Visceral invasion). A "Complexity score" on a scale of 0-10 accompanies VNESS to assist in benchmarking for surgical outcome and complication rates. VNESS does not attempt to correlate with symptoms and only attempts to turn intraoperative findings into quantitative values. Results of validation studies using videotaped procedures with multiple scorers are encouraging, showing excellent intra-observer and inter-observer correlation (5, 6).

A classification system is a language for communication and like languages, its survival depends on its simplicity, practicality, flexibility and the number of its users. We are forming an international collaborative group to refine this new language and we invite interested endometriosis surgeons to join us.

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Shaheen Khazali *

Editorial Board Member of the Journal

*Centre for Endometriosis and Minimally Invasive Gynaecology (CEMIG), Ashford and St. Peter's Hospitals NHS Foundation Trust, Chertsey, UK.

Are you interested in getting involved?

VNESS (Visual Numeric Endometriosis Scoring System) will be piloted by 10 BSGE accredited endometriosis centres and will be modified and discussed at the next ASM. If you are interested in taking part in the upcoming validation project – whether or not you are an endometriosis centre – please get in touch with Shaheen Khazali by emailing s.khazali@me.com

UPCOMING EVENTS AND MEETINGS



RCOG/BSGE BENIGN ABDOMINAL SURGERY

19-20 September 2016, RCOG, London

RCOG/BSGE SYMPOSIUM ON MODERN MANAGEMENT OF FIBROIDS

4 November 2016, RCOG, London

RCOG/ BSGE DIAGNOSTIC AND OPERATIVE HYSTEROSCOPY

29 November to
1 December 2016, RCOG, London

BSGE ANNUAL SCIENTIFIC MEETING 2017, HULL

17 to 19 May 2017

They are all available [here](#).



NOTEWORTHY ARTICLES



**New trainee representative
Donna Ghosh has scoured
the journals to shortlist
some articles to keep you
stimulated, educated and
up-to-date.**



Donna Ghosh

- [Malzoni et al \(2016\). Feasibility and Safety of Laparoscopic-Assisted Bowel Segmental Resection for Deep Infiltrating Endometriosis: A Retrospective Cohort Study With Description of Technique](#)
JMIG 23 (4) p512–525
- [Riiskjær et al \(2016\). Pelvic organ function before and after laparoscopic bowel resection for rectosigmoid endometriosis: a prospective, observational study](#)
BJOG 123 (8) p1360-1367
- [Kiran et al \(2016\). The risk of ureteric injury associated with hysterectomy: a 10 year retrospective cohort study](#)
BJOG 123 (7) p1184–1191
- [Holland et al \(2016\). Surgeon preference when purchasing integrated laparoscopic theatres: a survey of British gynaecologists.](#)
Gyn Surg DOI: 10.1007/s10397-016-0949-1
- [Venturella et al \(2016\). In-bag manual versus uncontained power morcellation for laparoscopic myomectomy: randomized controlled trial](#)
Fertil Steril 105 (5) p1369–1376
- [Hitzerd et al \(2016\). Twelve-year retrospective review of unintended pregnancies after Essure sterilization in the Netherlands](#)
Fertil Steril 105 (4) p932-937





BSGE TAKES COMMUNICATIONS TO THE NEXT LEVEL

The BSGE have launched a new website with a fresh, modern look, significantly better security and improved function. We hope that members will find the new site more user-friendly. It is compatible with mobiles and tablets and the features that members found irritating and time consuming, like the double log-ins, have been removed. There is now a single log-in for both the members' area and the video library.

With increased interactivity we hope that we will offer members more, so that they'll feel more engaged and involved with the society.

A place to talk

For the first time we have a dedicated and integrated BSGE discussion forum where members can ask questions, offer advice or just enjoy a virtual get-together. Suruchi Pandey, clinical fellow at St Peter's Hospital, Chertsey, is the discussion forum representative, she told The Scope:

"The BSGE wants to get people talking and engaged. We hope this can become a 'phone a friend' forum, where if you're stuck you can ask a question and get answers. It will be a community of gynaecological endoscopists, freely sharing and exchanging ideas.

As well as discussing successes it could also offer a platform to share where things went wrong and how we managed it, so that we can all learn from our collective experiences."

Video Library

The video library has been updated with fresh new videos and an interactive function enabling you to make comments or ask questions on the videos you view. It's the BSGE's own version of YouTube! Pille Pargmae is overseeing the video section. She told The Scope

"Members will find thought provoking lectures from annual scientific meetings, inspiring, educational videos of surgical procedures and techniques as well as complex, challenging, unusual case reports."

The library will work better and offer more if members get involved. So please watch and comment on the films and contact Pille on pillepargmae@gmail.com to submit your own videos, or with any comments and suggestions.



Trainees

With trainees now comprising more than a third of BSGE membership, we are working to support them and adapt to their needs. The new website has a dedicated section for the registrars' group featuring advice on how to pursue a career in endoscopic surgery, preparation tips for consultant posts, courses, videos, fellowship opportunities, meetings specifically for trainees and, of course, social events.

The site is still developing and improving. We are developing a patients' area and generating and improving content all the time. We would love to hear your feedback, positive and negative, and any ideas about how we could improve things.

@TheBSGE

We have taken our first steps into the world of social media and now the BSGE is part of the Twitterati. You can find and follow us on @TheBSGE. We will be tweeting information about the society, relevant updates and interesting news stories, research and courses.

So please stay in touch. E-mail drjanegilbert@hotmail.com if you have anything that you would like to be tweeted to our followers and don't forget to mention @TheBSGE in any relevant messages that you tweet. You can also send ideas, complaints and interesting news items and photos to be featured in The Scope or the website to drjanegilbert@hotmail.com



Modern Management of Fibroids

4th November 2016, at RCOG, London

The BSGE are running a symposium on the Modern Management of Fibroids on the 4th November 2016, at RCOG, London. Course organisers Thomas Ind and Tyrone Carpenter have put together a fascinating programme offering an insight into the very latest information, techniques and controversies.



This meeting will cover a range of diagnostic and therapeutic issues concerning fibroids. The course will feature lectures on current techniques and future developments in both hysteroscopic and laparoscopic procedures as well as discussing fertility, the scientific background, medical management, and radiological approaches.

The course will offer plenty of time for discussion, debate and networking and there should be a good representation from industry demonstrating equipment and explaining drugs.

The symposium will benefit trainees in Obstetrics and Gynaecology who are registered or who plan to register for the Benign Gynaecology or Hysteroscopy ATSMs, gynaecologists at all levels and nurses or nurse hysteroscopists who are looking to enhance their knowledge in fibroids as well as interested GPs and interventional radiologists.

After completing the course, you will be able to understand up-to-date issues in the modern management of fibroids. You should have a firm grip on the investigations available and when they are best utilised as well as being able to balance the pros and cons of medical, radiological and surgical therapies.

Delegates will also have learned about new hysteroscopic methods and debated the concerns regarding fibroid morcellation.

Members will be able to claim a maximum of 6 CPD credits for full attendance at this meeting.

Find out more [here](#)



BRITISH SOCIETY for GYNAECOLOGICAL ENDOSCOPY



BSGE Web/Comms Team

Introducing the Newsletter Editorial Team



Shaheen Khazali
Editor



Jane Gilbert
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Suruchi Pandey
Discussion Forum



Nadine Di Donato
Discussion Forum



Donna Ghosh
Trainees



Fevzi Shakir
Trainees/Papers



BRITISH SOCIETY for GYNAECOLOGICAL ENDOSCOPY

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