BADMS

The Face of Surgery

British Association of Oral and Maxillofacial Surgeons

APRIL 2015



I would like to congratulate Ilanko Ilankovan for his excellent year as President and the quality of the meeting in Edinburgh.

I am very much looking forward to welcoming you all to the new look Liverpool in July. The meeting is taking place at the Arena and Convention Centre built on the waterfront close to the famous Three Graces (Royal Liver, Cunard and Port of Liverpool Buildings completed in the early 1900's) and the redeveloped and highly praised Albert Dock.

James S Brown, President

The hotels, sights and museums are all within an easy walk and I recommend a stroll along the waterfront and a visit to the Tate Modern showing a Jackson Pollock exhibition.

The aim of the meeting is to emphasise the multidisciplinary nature of our work requiring teamwork, cooperation, and understanding of the complexity of some of the problems our patients face. The specialty is now divided between Oncology and Deformity and those wishing to treat primary clefts or craniofacial abnormalities are required to further specialise into designated units. In Liverpool we are privileged to have Oral & Maxillofacial Surgeons in all the disciplines, and as a reconstructive surgeon I have been able to help with complex syndromic cases as well as clefts, complex trauma, and skull base cases. Just as important is the role of the associated specialties of ENT, Neurosurgery, Ophthalmology, Plastic surgery and Dermatology so that any aspect of a patient's care can be covered by the most expert and experienced team. As a result there are no breakout sessions in the programme and all the 48 free papers and the 20 short poster presentations will be delivered to the whole auditorium so that we hear not only the keynotes but also the free papers. It is often

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very instructive to listen to talks in related fields to improve our general understanding and bring the specialty together. This is an opportunity for surgeons, trainees and students to present their work to the largest audience of Oral and Maxillofacial surgeons in the world. In my early years of training I presented my first paper at the Royal College of Surgeons (1987) on the fate of miniplates to the whole auditorium⁽¹⁾ which certainly concentrated the mind and presented the work of the Sunderland unit, at which I was training. By attending all the free papers I hope that we will have a better insight and understanding of Oral and Maxillofacial Surgery across the specialty.

6 One of the highlights will be a surgical demonstration of cadaveric dissection.
Invited top surgeons will share their flap raising techniques with us.

The scientific part of the meeting is biased towards reconstructive surgery which I am sure is not a surprise to anyone. One of the highlights will be a surgical demonstration of cadaveric dissection. Invited top surgeons will share their flap raising techniques with us. You will be able to see them at work, ask questions during the operation and cases will be shown highlighting reconstructive dilemmas. David Richardson is giving the President's lecture on the use of Costal cartilage in maxillofacial reconstruction. Bernard Devauchelle has agreed to give a reflective review of reconstruction and face transplant as it stands today and is not to be missed. Other International speakers include Ralph Gilbert from Toronto who I hope will demonstrate the scapula tip and teres major harvest technique for midface reconstruction, and Ed Ellis will give a keynote on condyles and orbits. There is a discussion session on trauma services and training, with the opportunity of asking a distinguished panel questions relating to the specialty. I have introduced limited attendance case-based discussion groups called Wake -up with the Professor starting at 08.00 on Thursday and Friday mornings. I hope that these will be fairly informal study groups with the opportunity to pick the brains of some of the most influential surgeons in our specialty and related fields.

BAOMS Study Day – Friday 27 November 2015, RCS England, London

It is some time since there has been a day on oral cavity malignancy, so I have arranged a study day on Friday 27 November 2015 at the Royal College of Surgeons of England. This is being held jointly with the International Academy of Oral Oncology (IAOO). I will be attending and speaking at the IAOO meeting in Sao Paulo and following discussions there it may be possible to set up a European arm of the International Association to enable an exchange of ideas and stimulate the recruitment of patients to clinical trials. For this meeting in November I wanted to concentrate on the controversies in the management of oral cancer and pre-cancer. I hope to generate

discussion on whether premalignant lesions should be removed or treated more conservatively and update the audience with the latest on our ability to predict conversion to malignancy. Oral cancer clinically related research will be discussed and Graham Putnam has agreed to talk on the DAHNO dataset and ongoing audit and will present the findings over the 10 years of the project. There is a session on the management of early oral cancer, and the neck in particular, including the role of sentinel node biopsy and neck surveillance. In the last session we tackle the dilemma of postoperative radiotherapy for the patient at intermediate risk of recurrence,

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followed by an MDT type case presentation and discussion. I hope this programme will be interesting to all those involved in the management of oral and head and neck cancer.

A big talking point in my first year at Medical School was the unravelling of unusual chest infections in young men, resulting in an early death, later found to be HIV. Our specialty has come a long way since then, moving from a dental base to a surgical specialty with one of our number performing the first face transplant in 2005. My first post was a Houseman at the Edinburgh Dental School (1979-80), during which time I studied for the primary fellowship (15% pass rate) and really enjoyed demonstrating Anatomy. My first Oral Surgery post was as the Resident Dental Officer (Senior House Officer) between the Newcastle General Hospital and the Royal Victoria Infirmary working for Arthur Hind, Jack Murgatroyd and John Hawkesford. As I neared the end of the year I began to consider a career without Medicine but was dissuaded by one Ian Martin while at a BAOMS meeting at King's in London. Even after finishing Medical School and returning to the North East to work for Peter Ward-Booth and Bob Ord in Sunderland, I thought my surgical role would be limited mainly to dentolaveolar and trauma.

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As it was the seed had fallen on fertile ground and I was soon being introduced to the radical neck dissection and free tissue transfer. It was here, and during my exchange at Columbus, Ohio that I started to spend some time in the library and became fascinated by how little we actually knew. I still think that the most fulfilling part of my job as a surgeon has been in the writing of a paper that I thought might have an impact and improve understanding, and that remains to this day. I happen to agree with revalidation and appraisal - the publication of single surgeons' outcomes in various fields, the National Institute of Clinical Excellence and the Care Quality Commission. To me this is a way of reassuring patients that the doctors and hospitals charged with their care are under scrutiny. The method of dividing commissioning and providers in small competitive Trusts has clearly failed. Rather than competing for services we should be talking to each other, setting aside our differences and putting the patient at the forefront of our reasoning. As doctors we have a responsibility to ensure that we have the correct facility and team to deliver high quality care in our own department and region. I would encourage more regional meetings between providers and specialists to discuss the future provision of services.

6 As your President, I hope that I can share my enthusiasm for the specialty with you and encourage the next generation to contribute to the improvement of our service...

As your President, I hope that I can share my enthusiasm for the specialty with you and encourage the next generation to contribute to the improvement of our service through excellent surgery and good evidence of its outcome. Sub-specialisation in Oral and Maxillofacial Surgery allows expertise to develop with a higher specific case-load and the time and opportunity to contribute to research. As specialists in deformity, oncology, trauma, cleft and craniofacial, we have much in common, reflected in the emphasis on multidisciplinary team working at BAOMS this year. I hope you can find time to be with us in Liverpool to learn, be inspired, and enjoy the atmosphere of the waterfront and the city.

James S Brown, President

Reference: Brown, J.S., Trotter, M., Cliffe, J., Ward-Booth, R.P. & Williams, E.D. The fate of miniplates in facial trauma and orthognathic surgery: a retrospective study. Br J Oral Maxillofac Surg 1989; 27: 306-315

BAOMS Sub Specialty Interest Groups (SSIGs)

The following BAOMS SSIGs now have a lead and deputy lead. They are elected for 2 year terms and at the end of the term expressions of interest in both posts will be requested from within the group. Post-holders can re-stand. If there is more than one nomination, an election is held within that SSIG. Each group has its own section on the BAOMS members' area with a comments page.

Any comment added to the discussion page is automatically circulated to the whole SSIG.

If you need reminding of your log-in details to the members' area of the website, please contact **office@ baoms.org.uk**

Mini-Interest Groups (MIG) and Affiliations Alongside the SSIGs the website also has mini-groups. For example undergraduate training or sleep surgery. They also each have a dedicated area for discussion and comment. Comments are automatically circulated to the MIG. By recording your affiliation on your members' profile, BAOMS can contact members who are affiliated to a college or group.

	Lead	Deputy Lead
Aesthetic	Paul Johnson	Tim Mellor
Cleft	Mark Devlin	Kanwal Moar
Craniofacial	Martin Evans	Satyajeet Bhatia
Deformity	Paul Johnson	Vyomesh Bhatt
Oncology	Michael Fardy	Michael Bater
Oral & Dento-Alveolar	Steven Liggins	Karan Singh
Paediatric	Keith Altman	
Salivary	Katherine George	Richard Crosher
Skin Surgery	Carrie Newlands	Rajiv Anand
Reconstruction	Timothy Martin	Michael Nugent
тмј	Andrew Sidebottom	Martin Dodd
Trauma	Simon Holmes	Niall McLeod

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BAOMS / Saving Faces (FSRF)

Joint Research Fellowship

Applications are invited from BAOMS members/Fellows in Training for a research fellowship in oral and maxillofacial surgery (OMFS). The fellowship lasts for 12 months and is funded. It will cover the salary and on-costs of a clinical researcher up to £43,000 plus a small research support grant of up to £3,000.

The applicant should hold dual medical and dental qualifications and ideally have a National Training Number in OMFS.

Applicants will have a strong publication record. Applications are considered on the basis of the applicant's academic achievements and potential, the scientific merit of the research proposal, and the research environment provided by the sponsoring department.

Deadline for receipt of all forms is 5 pm on Thursday 10 September 2015. Forms are available on the BAOMS and Saving Faces - FSRF websites: www.baoms.org.uk and www.savingfaces.co.uk

Notice to all BAOMS Members

BAOMS

ANNUAL SCIENTIFIC MEETING | 22-24 JULY 2015

Arena and Convention Centre (ACC), Liverpool | Platinum sponsors: DePuy Synthes and Ethicon

Please note:

The ANNUAL GENERAL MEETING

will take place at **1030 on Wednesday 22 July 2015** at the Arena and Convention Centre (ACC), Liverpool in Hall 1 A



Financial grants / support from BAOMS

£120,000 is set aside each year for supporting the Association's charitable aims. Money is available to you, the membership for robust and worthy projects including research.

Allocations for research, training and high value awards are made 6 monthly at Endowments Committee meetings - other funding is available year round. Applications should be well prepared and credible, with clearly defined aims.

There are 4 main funding streams available: 1. Research projects 2. Travel/Training awards 3. Small project initiatives 4. Minor grants for event support

For full details please see BAOMS website at www.baoms.org.uk/Who_We_Are/CouncilSubCommittees/Endowments

Austen T Smith Honorary Treasurer

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Chair's Report

Michael J C Davidson. Chair, BAOMS Council



Sometimes it seems issues do not progress no matter how hard one tries in the NHS, so I often feel these reports have an element of déjà vu.

GDC

Regarding the need for dual registration, risk of double indemnity etc. Patrick Magennis and I are still trying to move forward on these issues. Progress is slow and so far little positive to report. I hope we will be able to get a positive result around unit of revalidation common for GDC and GMC. A letter of understanding for common management and single lead for professional standards between the GDC and GMC is being discussed.

Where we still do not seem to be able to get a favourable outcome is around the practice of oral surgery within a primary care setting. I would urge colleagues who may be working in such an environment to seriously consider staying on the dental register until matters are clarified.

Commissioning

On behalf of the Association I have sat on the working party for the commissioning guide for Oral Surgery and Oral Medicine. I have shared the drafts of the guides with Council. Despite considerable effort and in some areas good work, it is felt the guide is not currently fit for purpose across several major areas. Therefore I have not put my name or that of the Association to recommending the final document.

It may well be that the guide is taken up pre-election across England by dental commissioners; I would encourage you to review the final draft when it is published and consider how it may affect your unit, mainly around dentoalveolar surgery and referral pathways.

ACCEA

The downward pressure on the awarding and renewal of ACCEA

continues. It is likely a round will occur this year to a tight timetable. Those colleagues who plan to either seek a new award or renew one should work on their submission anticipating events. As soon as we get confirmation of a round, we will inform you of the timetable for seeking BAOMS support.

Coding

I know I keep banging on about this but given issues around the commissioning of oral surgery it is vital your clinical activity is given the correct designation. I suggest you find out how your trust assigns your activity (oral surgery v maxillofacial surgery). This coding may be used to decide flow of patients from dental commissioning. As I said before, accurate data and information is a powerful tool in negotiations.

Dental Core Trainees (DCTs)

Working parties in regard to the curriculum and use of situational judgement testing as an appointment tool for DCTs have been set up. OMFS has good representation and the groups are working well. Ian Sharp is leading on much of the curriculum. There is a meeting of stakeholders (7th July Birmingham) to discuss the progress of the curriculum if you are asked to attend please do ,or inform any colleagues who are offering regional representation of your views.

Sub Specialty Interest Groups (SSIGs)

I think these have been a very positive development within the Association and thank all those leading them. In the next year we will see various projects flowing from them, leading I hope, to better clinical pathways and informing clinical outcomes.

Public Relations

BAOMS are starting to work with the PR Office. To help project a positive image of OMFS, as well as inform the public we are looking for news stories to use in the media. If you have good news, local campaigns, positive innovations etc. do not hide your light under a bushel - let us know.

BAOMS Council appoints a professional public relations company

"The PR Office" has been appointed as the retained PR agency for BAOMS, following a competitive tendering process. The PR Office will initially work with BAOMS on profile raising activities such as internal and external stakeholder engagement and media relations. Moving forward it will develop and roll out campaigns to support and raise awareness of the activities and work of BAOMS and its membership.

The development of a team of spokespeople representing across all our specialities is an important part of this process. So far the SSIG leads have all been asked to provide contact details for potential media enquiries. Media training is being organised to enhance the media skills of Council and SSIG leads initially.

The PR Office will also be working with BAOMS to contact Commissioning Care Groups (CCGs) to ensure that they are aware of the work and the challenges OMS is facing. If you would like help or support in this area then we would like to encourage all members to contact The PR Office.

A calendar of key events is currently being put together and plans are already being developed around VE day and Cleft Lip Awareness Week. We hope that these will raise BAOMS' profile both to our key stakeholders and the general public through a range of media. If you have any suggestions or are involved with an event or awareness week, please let The PR Office know.

To contact The PR Office call 0207 284 6969 or BAOMS@theproffice.com asking for Alice Farrow, Kate Turner or Aaron Bass.

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Forthcoming BAOMS meetings

Junior Trainees meeting Date and venue to be advised

Fellows in Training

Wales Millennium Centre, Cardiff 5-6 November 2015

Future BAOMS Annual Scientific Meetings:

22-24 July 2015	ACC, Liverpool (President: James S Brown)
8-10 June 2016	Brighton Centre (President: Peter Brennan)
28-30 June 2017	ICC, Birmingham(President: M Stephen Dover)
June 2018	Durham (President: Ian Martin)

Recent appointments

BAOMS Council has recently appointed Andrew Baker to the role of Honorary Web Editor.

Following an election the new Deputy Junior Trainee and Members' Representative is Mr Jim Higginson and he will work alongside the Junior Trainees and Members' Representative, Catherine Wicks.

Recent deceased

We are sad to report the recent death (March 2015) of Mr John Fagan who was a consultant in the Coventry and Warwick region.

Surgery Prizes 2015

Down Surgical and BAOMS Surgery Prizes

Nominations are invited for the Association's two most prestigious prizes, the BAOMS Surgery Prize 2015 and the Down Surgical Prize 2015. BAOMS Fellows can nominate using the forms which are available in the secure area of the website (in Association Issues). Please note there is no self-nomination for these Prizes. The deadline for nominations is 7 September 2015.

Previous recipients of the awards over the last 12 years:

	Down Surgical Prize	BAOMS Surgery Prize
2003	A E Brown	A Smyth
2004	R P Ward Booth	S R Rogers
2005	A Pogrel	C J Kerawala
2006	B T Evans	N J Baker
2007	B S Avery	P Magennis
2008	D W Patton	P A Brennan
2009	I Hutchison	A Monaghan
2010	not awarded	D Dhariwal
2011	I C Martin	C Newlands
2012	A Sugar	S Parmar
2013	J Shepherd	J McCaul
2014	R T M Woodwards	R Shaw

BAOMS is seeking expressions of interest from Fellows

The following vacancies are available in 2015:

Chair and Deputy Chair of the Communications and Media Sub-Committee

This group is responsible for communications with the public, the media, and fellow professionals. BAOMS has recently appointed a professional PR company called the PR Office to work alongside this committee.

Deputy Chair of Clinical Effectiveness Committee

If you are interested in these positions please email BAOMS office for an outline of the role and further information on how to put your name forward for consideration.

office@baoms.org.uk



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ARENA AND CONVENTION CENTRE

Introduction from James S Brown, BAOMS President 2015

It is an honour and pleasure to invite you to the re-invigorated City of Liverpool for 2015. The theme of this meeting is inevitably reconstruction as the core which reflects my interests, but the intention is to emphasise the common areas of interest which make us all Oral and Maxillofacial Surgeons. Whether we specialise in Deformity, Oncology, Trauma etc, we operate in the same anatomical region and have many areas in which lessons can be learnt and excellence achieved through teamwork and co-operation. In order to achieve this aim of learning from each other there are NO breakout sessions – and so you will know where to go and will not need a map and compass to get around. There are 48 five minute presentations and 20 three minute poster pop-ups in the scientific programme. In addition, we have accepted 200 poster presentations and a large medical exhibition.

The Arena and Convention Centre is on the waterfront next to the Maritime Museum and the Museum of Liverpool. A visit to the Cavern is compulsory! The Annual Dinner is taking place on Thursday 23 July at Liverpool's Anglican Cathedral with an organ recital and choir to entertain us.

General information

Social events

Wednesday 22 July 2015

The awards ceremony will be followed by the President's Reception: 1845 - 2000 (in the exhibition) at Arena and Convention Centre, Liverpool. All registered delegates and exhibitors welcome.

Thursday 23 July 2015

Annual Black Tie Dinner at the Liverpool Anglican Cathedral – 1930 for 2000 to include pre-dinner drink, three course meal with wine/ drinks. Tickets: £70 per person.

Medical Exhibition

The medical exhibition will run alongside the scientific programme. All coffee breaks and daytime catering and will take place in the exhibition area. (Please contact the BAOMS office for further details about the medical exhibition and sponsorship opportunities).

Accommodation

Booking instructions for the various hotels will be available on the BAOMS conference website.

Fresh Reservations are the official accommodation agency and they have negotiated some very competitive rates in the local hotels. The conference hotel will be the Hilton Hotel which is a 5 minute walk from the conference centre.

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