

# Combined Queensland State Conference and Surgical Directors Leadership Forum

## *Seven (st)ages of a surgeon*

12 - 14 July 2019

Sheraton Grand Mirage Gold Coast

Final Program



All the Hospital is a Theatre  
And all the men & women merely players  
The Surgeons in their exits and entrances have several parts,  
At first the student and intern, with shining iPad creeping like snails,  
Unwillingly into the Surgeon's gaze.  
Then the Registrar sighing and fawning on the Consultant's words and rounds.  
Comes the Fellow full of strange oaths juggling to find the path between family, science, honour, job and home.  
Then in full glory comes the young Consultant - seeking the bubble reputation even in the Cannon's mouth.  
Then the Surgeon Director with fair round belly and capon lined - Eyes severe but kind, full of wise saws and  
dubious asides.  
The sixth age shifts to the Examiner and College Councillor. Bespectacled, nostalgic, searching the internet  
papers of yesteryear.  
Then bafflement at the speed of time and the decisions made in that blessed Self-managed fund.



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## WELCOME

Dear Fellows, Trainees and Associates,

It is with great pleasure that we invite you to the Queensland State Conference on behalf of the Royal Australasian College of Surgeons. The conference is being run in conjunction with the Surgical Directors Leadership Forum and will be held at the Sheraton Grand Mirage, Gold Coast, Queensland, Friday 12 to Sunday 14 July 2019.

The theme of the meeting in 2019 is Seven (st)ages of a surgeon. We trust that those who joined us in 2017 at the Pullman Palm Cove Sea Temple Resort & Spa enjoyed their time and will once again be joining us in 2019. For those who were unable to attend our last conference, we encourage you to join us for the weekend and interact with our membership. We look forward to welcoming you to the Combined Queensland State Conference and Surgical Directors Leadership Forum.


Sincerely,



**Professor Deborah Bailey**  
FRACS, Co-Convener



**Professor David Fletcher**  
FRACS, Co-Convener



**Dr Brian McGowan**  
FRACS, Co-Convener

## PROGRAM HIGHLIGHTS

### FRIDAY 12 JULY 2019

- Statewide Surgical Services Forum
- Pre-Meeting Workshops
- RACS Paper Prizes and Neville Davis Prize
- Welcome Reception

### SATURDAY 13 JULY 2019

- Queensland State Conference
- Surgical Directors Leadership Forum
- Conference Dinner

### SUNDAY 14 JULY 2019

- Queensland State Conference
- Surgical Directors Leadership Forum

### CONVENERS

- Professor Deborah Bailey
- Professor David Fletcher
- Dr Brian McGowan
- Dr Emma Secomb
- Dr Liz Hodge

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## RACS SURGICAL DIRECTORS SECTION



**The Surgical Directors Section was established in 2015 to provide a network of peers, professional development opportunities and a forum for discussion on leadership in healthcare settings.**

Membership is open to all Trainees, Fellows and International Medical Graduates who aspire to or hold a leadership position.

The Section offers a regular program at the RACS Annual Scientific Congress and an annual leadership forum, bringing together directors of surgery and heads of departments from across the jurisdictions to discuss a range of leadership themes. This year's forum is focused on leadership to achieve a flexible workforce, developing surgical directors, sustainability in health care and measuring surgical performance.

**New members  
are welcome.**

**For more information, please  
contact the Surgical Directors  
Section Secretariat:**

E: [SurgicalDirectors@surgeons.org](mailto:SurgicalDirectors@surgeons.org)  
T: +61 3 9276 7494

## PRE-MEETING WORKSHOPS

### SUPERVISORS AND TRAINERS FOR SET - SAT SET COURSE

**Friday 12 July 2019**

9:00am - 12:00pm

Lagoon Room

Sheraton Grand Mirage Gold Coast

**Cost:**

Free for Fellows, Trainees or International Medical Graduates within the College

- Complimentary for members
- AUD \$200.00 inc GST for non-members

The Supervisors and Trainers for Surgical Education and Training (SAT SET) course aims to enable supervisors and trainers to effectively fulfil the responsibilities of their important roles, under the new Surgical Education and Training (SET) program. This workshop assists supervisors and trainers to understand their roles and responsibilities, including legal issues around assessment. It explores strategies which focus on the performance improvement of trainees, introducing the concept of work-based training and two work based assessment tools; the Mini-Clinical Evaluation Exercise (Mini CEX) and Directly Observed Procedural Skills (DOPS).

**Key Learning Outcomes:**

- Define the responsibilities of supervisors, trainers and trainees
- Develop awareness of the College's training policies and legal issues
- Compare work-based assessment tools and select appropriate tools for assessing different competencies
- Gain skills in use of assessment tools
- Recognise the importance of feedback following assessment, and barriers to giving effective feedback

**CPD:**

Fellows who participate can claim 1 point per hour (maximum of 3 points) in Category 3 - Maintenance of Knowledge and Skills. Participation in this activity will be populated by the coordinator into your RACS CPD online after the workshop.

**Further Information:**

Register online: <https://tinyurl.com/satsetcourse>

Email: [PDactivities@surgeons.org](mailto:PDactivities@surgeons.org)

Telephone: +61 3 9276 7440

### KEEPING TRAINEES ON TRACK

**Friday 12 July 2019**

1:00pm - 4:00pm

Lagoon Room

Sheraton Grand Mirage Gold Coast

**Cost:**

Free for Fellows, Trainees or International Medical Graduates within the College

- Complimentary for members
- AUD \$200.00 inc GST for non-members

Keeping Trainees on Track (KTOT) has been revised and completely redesigned to provide new content in early detection of trainee difficulty, performance management and holding difficult but necessary conversations. This course is aimed at College Fellows who provide supervision and training SET trainees. During the course, participants will have the opportunity to explore how to set up effective start of term meetings, diagnosing and supporting trainees in four different areas of trainee difficulty, effective principles of delivering negative feedback and how to overcome barriers when holding difficult but necessary conversations.

**Key Learning Outcomes:**

- Recognise four different areas of trainee difficulties
- Recognise how to identify and support trainees in difficulty
- Identify effective principles of holding a difficult but necessary conversation
- Practice delivering a difficult conversation

**CPD:**

Fellows who participate can claim 1 point per hour (maximum of 3 points) in Category 3 - Maintenance of Knowledge and Skills. Participation in this activity will be populated by the coordinator into your RACS CPD online after the workshop.

**Further Information:**

Register online: <https://tinyurl.com/traineesontrack>

Email: [PDactivities@surgeons.org](mailto:PDactivities@surgeons.org)

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tissue thicknesses<sup>4-6</sup>



1. Based on internal test report #2128-194, Comparison of EEA™ circular stapler with Tri-Staple™ technology to EEA™ circular stapler with DST Series™ technology in colocolonic and gastrojejunal anastomoses. Aug. 20, 2015.  
2. Based on internal test report #RE0036707, Pilot: comparison of EEA™ circular stapler with Tri-Staple™ technology to EEA™ circular stapler with DST Series™ technology in an esophago-gastrostomy using a canine model. Feb. 25, 2015.

3. Based on internal test report #2128-097, Evaluation of early wound healing events in gastrojejunostomies and colonic anastomosis using a three row EEA™ stapler in canines. Aug. 7, 2013.

4. Based on internal test report #RE00073061, Tulip formative evaluation summary.

5. Based on internal test report #RE00074556, Tulip and DST firing force comparison report.

6. Based on internal test report #PCG-007, Media absorptency under clamped conditions. Aug. 6, 2012.

7. Based on extrapolation of perfusion studies performed for Endo GIA™ with Tri-Staple™ technology: internal test report #2128-002-2, Final analysis of staple line vascularity using MicroCT. April 27, 2015.

8. Based on internal test report #PCG-30, Comparison of circular staplers: tissue compression profiles as determined by 2-D static axisymmetric finite element analysis (FEA).

9. Based on internal test report #RE00069039, EEA™ circular stapler with Tri-Staple™ technology design verification report. Dec. 2, 2014.

10. Based on internal test report #RE00008030, Tulip benchmark test report.

11. Based on internal test report #2128-053, Ethicon benchmark testing – Signia™ circular reload.

† As compared to two-row circular staplers.

‡ Preclinical results may not correlate with clinical performance in humans.

§ Based on the addition of a third row of staples in the EEA™ circular stapler with Tri-Staple™ technology, as compared to predicate two-row device designs.

Ω Refers to the healing period (generally through day 28) that was evaluated in multiple preclinical (canine) survival studies designed to assess device safety and efficacy.

†† Finite element analysis (FEA) was used to determine the strain profiles of three circular staplers during clamp-up: EEA™ circular stapler with Tri-Staple™ technology, EEA™ stapler with DST Series™ technology and Ethicon Intraluminal Circular Stapler. The EEA™ circular stapler with Tri-Staple™ technology demonstrated a graduated compression profile upon clamping.

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## INVITED SPEAKER BIOGRAPHIES



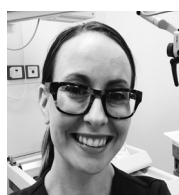
### DEBORAH BAILEY

Deborah Bailey is a graduate of the University of Queensland. She entered practice in Brisbane before commencing the first full time paediatric surgery practice on the Gold Coast, which now covers a tertiary drainage area of one million that extends from Coffs Harbour to Logan. Deborah is commencing her term as the Chair of the Queensland State Committee for 2019. Deborah is an inaugural executive member of the RACS Surgical Directors Section. Previous College roles include Chair of the Paediatric Surgery Education and Training Board, President of ANZ Association of Paediatric Surgeons, and a member of the RACS Professional Standards and Development Board. In 2014 Deborah was appointed Clinical Director for Children's, Women's and Newborn services, Surgical and Procedural Services (SAPS) for Gold Coast Health Services. It is this journey from medical student to surgeon, and the choices that create professionalism and balance in a surgeon's career particularly when facing the Queensland dynamic of distance and regional isolation, that have driven Deborah's interest in education and surgical competence. Themes now explored together in our Queensland State Conference.



### EMMA SECOMB

Emma Secomb is a breast endocrine and general surgeon based on the Sunshine Coast. She gained her Fellowship in 2007 and was the Ramsay Breast Endocrine Fellow in 2008 for Brisbane North. Emma is a passionate surgical educator and has taught Early Management of Severe Trauma (EMST) and ASSET since 2001 and is midway through the Masters of Surgical Education program, though has been stuck there for some time now. Emma has been an elected member of the Queensland State committee since 2014 and prior to this was the younger fellows representative to General Surgeons Australia (GSA). Improving inclusivity and training/working conditions have been a strong motivation to taking on these roles. When not at work she enjoys playing oboe with a range of medical and local orchestras and building Ninjabo LEGO.



### JO-LYN MCKENZIE

Jo-Lyn McKenzie is a SET5 Otolaryngology Head and Neck Surgery Trainee. Her main clinical interest is in comprehensive care of the head and neck cancer patient. She is undertaking Fellowship training in Head and Neck Cancer Surgery. She is engaged with clinical education and mentoring and is a strong advocate for constant personal and professional improvement as a pursuit for advancing ourselves, teams and community.



### RICHARD PERRY

Richard Perry is the Vice President of the Royal Australasian College of Surgeons (RACS) and is a colorectal surgeon and Clinical Director of Intus Digestive and Colorectal Care based in Christchurch, Queenstown and Wanaka, New Zealand. He has been an elected member of RACS Council since 2011, and has served as Chair of the Skills Education Committee, Fellowship Services Committee and the Professional Development and Standards Board. His primary clinical interests are pelvic floor disorders and laparoscopic colorectal surgery. He trained in General Surgery (FRACS) in Christchurch before undertaking fellowships at Creighton University in Omaha Nebraska and at the Mayo Clinic in Minnesota, after which he returned to New Zealand where he helped pioneer laparoscopic colorectal surgery in New Zealand. He has been engaged with the RACS training programs as Chair of the Australian and New Zealand Surgical Skills Education and Training (ASSET) program and as Instructor for the Training in Professional Skills (TIPS) and Foundation Skills for Surgical Educators (FSSE) courses. Mr Perry has a long-term interest in governance, systems and standards, which grew from his founding directorship of The Oxford Clinic Day Hospital in 1996, and Intus, a specialist consulting and endoscopy group. He is a Fellow of the Australian Institute of Company Directors and a Chartered Member of the Institute of Directors in New Zealand.



### MARK SMITHERS

AM, MBBS, FRACS, FRCSEng, FRCSEd. Mark Smithers is the Director of the Upper GI and Soft Tissue Surgical Unit, Princess Alexandra Hospital and the Mayne Professor and Head of the Discipline of Surgery, Faculty of Medicine, University of Queensland. He is the Chair of the Section of Academic Surgery, Royal Australasian College of Surgeons. Other positions include Chairman of the Queensland Melanoma Project, Lead Clinician of the Queensland Melanoma Collaborative, committees for the International Society for Diseases of the Esophagus and the executive of the International Gastric Cancer Association. His clinical and research interests relate to the epidemiology and management of melanoma and oesophago-gastric cancer. He has been a co-investigator on a number of grants related to these interests (NIH, USA, NH&MRC, Cancer Australia) and a principal surgical investigator in a number of phase I, II and III trials relating to the loco-regional treatment of cutaneous melanoma and neoadjuvant therapy for esophago-gastric cancer. He has published extensively and remains actively involved in teaching and research higher degree supervision.



## INVITED SPEAKER BIOGRAPHIES



### RHEA LIANG

Rhea Liang is a general and breast surgeon on the Gold Coast, surgical educationalist, diversity in surgery advocate, and Chair of the Operating With Respect Education Committee.

She is a Care of the Critically Ill Surgical Patient (CCrISP) course and Operating with Respect (OWR) course director, and faculty for the Surgeons as Leaders and Advanced Feedback courses. Until recently she was also a Surgical Teachers Course convenor but is now part of redeveloping it for a rapidly changing educational landscape. The research to be presented at this conference was published in the Lancet in February 2019.



### STEFAN HAJKOWICZ

Dr Stefan Hajkowicz is a senior principal scientist working in the field of strategic foresight at CSIRO. Stefan leads the Data61 Insight Team which is a group of researchers and consultants helping

organisations navigate digital disruption. Stefan's research and consulting work helps companies, governments and communities explore plausible futures and make wise strategic choices. Stefan is a world leading scholar in the field of decision theory and has published seminal works on the use of multi-objective decision support. His research has contrasted structured versus intuitive approaches to decision making. His decision models have guided investments worth hundreds of millions of dollars and have been used by Australia's State and Federal Governments to make critical policy choices. Stefan is widely published in the international research literature and his most recent book titled "Global Megatrends" is available through CSIRO Publishing. Stefan has a doctorate in geography from the University of Queensland and postgraduate qualifications in economics from the University of New England. He is a current and recent member of the OECD and World Economic Forum global strategic foresight community. Dr Hajkowicz is sponsored by Avant Mutual.



### ROXANNE WU

Roxanne Wu was made in Australia (parents met and married here), born in Singapore and raised in Australia since the age of 5. Dr Wu studied at University of Sydney, and trained at Royal Prince

Alfred Hospital which gave Roxanne a taste of tropical surgery by being sent to Rabaul PNG during her Surgical Education and Training (SET) years. In 1987, Dr Wu left a promising career in vascular and transplant surgery to find a better work life balance in Cairns as a general surgeon. Roxanne has helped to set up a good vascular service at Cairns Hospital and is currently the Director of Surgery. Her passions are excellence in surgery and family.



### DAVID FLETCHER

David Fletcher is a general surgeon and holds a number of senior positions at the Royal Australasian College of Surgeons. David is a member of the RACS Council (WA Specialty Elected Councillor), the

inaugural Chair of the Surgical Directors Section and Chair, Professional Development Committee. David is the Lead Surgeon/ Head of Department, General Surgery at Fiona Stanley Hospital, Perth and Clinical Director of Surgery at Fremantle Hospital, Western Australia. David has a strong interest in surgical education, developing leaders and sustainability of health care.



### BRIAN MCGOWAN

Brian McGowan has just completed a two-year tenure as Queensland State Chair for RACS. He qualified in Medicine in Edinburgh in 1979 and following marriage to Julie, a Queensland medical

graduate, emigrated to Brisbane in 1986. Brian has practised as a general surgeon (aka-dinosaur) with an interest in colonoscopy, and has been Director of Surgery at Logan Hospital since 2008 and is about to retire from this position. In recent years his focus has been growing and developing the Logan Division of Surgery and working with the Cognitive Institute on developing a Professional Accountability Program based on the Vanderbilt System. He is also the Senior Clinical Lead for the Logan Future Hospital Program. The themes of this conference encapsulate many of the challenges facing contemporary surgeons and our College.



### JULIAN ARCHER

Julian Archer is the RACS Executive General Manager, Education and part of the College's Executive Leadership Team. Prior to this Julian was a senior clinical academic leader in the United

Kingdom. He worked as a consultant paediatrician in the National Health Service (NHS) and founded the Collaboration for the Advancement of Medical Education Research and Assessment (CAMERA), within the Faculty of Medicine and Dentistry, University of Plymouth where he retains an honorary Chair. Julian was personally funded by the National Institute for Health Research (NIHR) for nearly ten years. He has substantial experience leading clinical education research, designing postgraduate medical curricula and has a strong interest in workplace-based assessment. Julian has held numerous senior advocacy roles in healthcare education and regulation.



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## INVITED SPEAKER BIOGRAPHIES



### ROBERT PADBURY

Rob Padbury is the Director of Surgery and Perioperative Medicine in the Southern Adelaide Local Health Network, SA Health. His predominant clinical practice interest is HPB Surgery and his predominant leadership interest is clinical practice improvement, clinical standardisation and reducing variation with clinical protocols. Rob's research interests are clinical and epidemiological focused, and he has 101 publications. Rob was Chairman, State Surgical Taskforce from inception until April 2015, and the Director, SA Centre of Healthcare Improvement from 2008 to 2013. Rob undertook a review of Tasmanian Surgical Services in 2014 and Western Australian Upper GI Surgery in 2016.



### RICHARD MURRAY

Richard Murray is the Dean of the College of Medicine and Dentistry at James Cook University. His career focus has been in rural and remote medicine, aboriginal health, public health, tropical medicine, health professional education and the healthcare needs of underserved populations. He has a national and international profile in rural medical education and rural medicine and has held a range of leadership positions. Professor Murray is also President of Medical Deans Australia and New Zealand, a past President of the Australian College of Rural and Remote Medicine and a member of the Mackay Hospital and Health Board. Prior to joining James Cook University as Planning Director of the Rural Clinical School in 2005, Professor Murray spent 14 years in the remote Kimberley region of Western Australia, including 12 years as the Medical Director of the Kimberley Aboriginal Medical Services Council, a position in which he had broad-ranging clinical, population health, teaching, research and medical leadership, and management roles. Professor Murray has extensive experience in medical education at program, sectoral leadership and policy levels. He has participated in the national policy arena in rural and remote medicine and health, health professional education and Aboriginal health for over 20 years and has had a key role in many national initiatives, including a 2015 appointment by the Prime Minister to the National Ice Taskforce.



### ERIC LEVI

Eric Levi is an ENT Head and Neck Surgeon in Melbourne at The Royal Children's Hospital, St. Vincent's Hospital and Ear Nose and Throat Victoria. Having completed Fellowships in Canada, Brisbane and Auckland, his subspecialty interest is in sleep, airway and head and neck tumours across the lifespan. Beyond surgery he is interested in the influence of workplace culture on patient care.



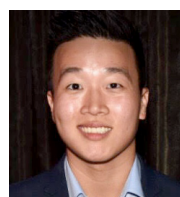
### RUPERT SHERWOOD

Rupert Sherwood is an obstetrician and gynaecologist (O&G) working fulltime as Head of Gynaecology at Sunshine Hospital in Melbourne. He qualified in 1978 from the University of Tasmania and after residency training which included medicine, anaesthesia and obstetrics, he worked for 9 years as a rural GP in Albany, WA. He then trained in O&G at King Edward Memorial Hospital Perth and the Royal Hobart Hospital, attaining FRANZCOG in 1998. After 15 years in private practice in Hobart, Dr Sherwood moved to Melbourne to work as a staff specialist in O&G at Western Health. He has a long involvement with RANZCOG, from being a trainee representative in 1996 through various roles culminating in a term as President from 2010 to 2012. Dr Sherwood was made an Honorary Fellow of the RCOG in 2012. He has maintained a strong interest in both specialist training and clinical governance and has undertaken independent reviews of the O&G services in large and small units throughout Australia. Most recently Dr Sherwood completed a 6-month sabbatical leave during which he undertook a qualitative research project on the governance issues related to the ageing surgeon and supporting transition to retirement for surgeons in Australia. He interviewed 52 expert participants including representatives from hospital management, colleges, the regulatory authorities and MDOS and is currently preparing a paper for publication, in collaboration with co-author Dr Marie Bismark from the University of Melbourne, School of Population and Global Health. He is 63 years old, married to Toni and has 4 adult sons and 6 grandchildren.



### OWEN UNG

Owen Ung is a breast and endocrine surgeon in clinical practice and Professor of Surgery Royal Brisbane and Women's Hospital - University of Queensland Clinical School. He is a Council member for RACS, previous Chair of the Queensland RACS Regional Committee, RACS examiner and surgical representative on the AMA Federal Council. Owen is a committed clinician, researcher and teacher and has obtained extensive administrative and management experience through his various clinical leadership roles. His board positions include; specialist services (medical specialist group), Medical Insurance Group Australia (MIGA) and the Royal Brisbane and Women's Hospital Foundation.



### KEVIN JANG

Kevin Jang is a final-year medical student at James Cook University (JCU). Although born and raised in Sydney, he has never looked back after moving to North Queensland. With a passion for student leadership and a keen interest in surgery, he has been an active member of the JCU Surgical Interest Group (JCUSIG). He is currently the President of AJCUSIG and plays a crucial role in promoting



## INVITED SPEAKER BIOGRAPHIES

surgical interest amongst students. JCUSIG is a student-run body that promotes surgery as a potential career and skills development through educational events, workshops and seminars. They offer guidance to all JCU medical students from Years 1 - 6. Kevin values the importance of Academic Surgery. He has been involved in many research projects and has presented at national conferences. His current research interests include spinal cord injury, neurotrauma and spine surgery.



### CLAIRE BASSINGTHWAIGHTE

Claire is a senior solicitor who has over 15 years of experience in Health Law in Queensland. She has a Bachelor of Commerce and a Bachelor of Law from the University of Queensland and is admitted as a solicitor in the Supreme Court of Queensland as well as the High Court of Australia. Claire is currently the manager of the Disciplinary Law Team of Avant Law, Queensland. Throughout her career, Claire has primarily defended health practitioners, as well as hospitals and their employees; however she has also acted for the Medical Board against practitioners in disciplinary proceedings. This range of work has allowed her to gain a balanced perspective of Health Law in Queensland. In her current role, she leads a team of 11 solicitors who

act for Avant members involved in Coronial Inquests, complaints to the Office of the Health Ombudsman as well as complaints to the Medical Board of Australia. Claire has previously also worked in the Civil Team, defending civil claims against practitioners.



### JOHN WAKEFIELD

John Wakefield, MB CHB MPH (research) FRACGP FACRRM FRACMA, is the Deputy Director General – Clinical Excellence Division, Department of Health Queensland, Adjunct Professor of Public Health – Queensland University of Technology, and Adjunct Professor Griffith University School of Medicine. John graduated as a doctor in 1988 and has served in clinical and management roles in rural, regional and tertiary hospitals in Queensland. After completing a Fellowship under Dr Jim Bagian, at the National Centre for Patient Safety of the VA Health System in the United States, he returned to Queensland in 2004 and established the Queensland Health Patient Safety Centre, which he led until late 2012. In 2011, John was awarded a public service medal for services to patient safety as part of the national Australia Day Awards. Returning to the Department of Health in 2016, John now leads Clinical Excellence Queensland.

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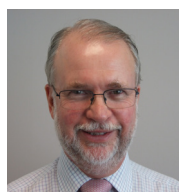


## INVITED SPEAKER BIOGRAPHIES



### GARY NIELSEN

Gary Nielsen is an orthopaedic surgeon based in Brisbane who has been extensively involved in education programs at an undergraduate, post graduate and fellowship level. He is currently Clinical Associate Professor within the Department of Surgery with the University of Queensland. He has been past Deputy Chair and Chair of the Queensland Orthopaedic Training Committee and is the Queensland Lead for the introduction of the new orthopaedic training program into Australia (AOA 21). Dr Nielsen has recently completed a graduate certificate in surgical education through the University of Melbourne. Within Australia Dr Nielsen continues to provide educational workshops to orthopaedic surgeons to improve their understanding of the new orthopaedic training program and to help guide them with the implementation of that program.



### NEIL WETZIG

After graduating from the University of Queensland in 1978, Neil Wetzig completed an intern year in Townsville, increasing his interest in surgery that began as a medical student. Returning to Brisbane in 1979 he commenced surgical training at Princess Alexandra Hospital (PAH). After 18 months in Rockhampton, and 2 years at PAH, he passed the FRACS in 1985. For 2 and a half years he worked as a registrar at the Royal Surrey Hospital in Guildford, UK, returning to Brisbane in 1988 as Senior Lecturer in Surgery at Greenslopes Hospital. In 1989 he was appointed as Consultant General Surgeon at PAH with a special interest in breast and endocrine surgery and he also commenced private practice. He first visited Africa in 2003 and from 2006 led annual multi-disciplinary medical teams to the Democratic Republic of the Congo. Surgical needs in war-torn Congo were so great that Neil intentionally completed his Brisbane public and private practice in 2015 to spend longer in Congo teaching and training surgery. He now lives with his wife, Gwen for 6 months a year in Congo where he is Consultant and Advisor of Surgical Training Programs at HEAL Africa Hospital in Goma. He is a RACS examiner in General Surgery; current member of the RACS Global Health Committee; and Member of the G4 Alliance for Surgery, Anaesthesia, Obstetrics and Trauma.



### PRISCILLA MARTIN

Priscilla Martin is the Director of General Surgery & Trauma Services at the Sunshine Coast University Hospital. She is interested in Upper GI, Hepatobiliary & Trauma surgery. She is the current Chair of the Queensland Training Committee for General Surgery and is a strong supporter of flexible training.

#RACS QLD19



### WASIM AWAL

Wasim Awal is a 3rd Year Medical Student at Griffith University and the President of SurgIA. SurgIA, short for Surgical Interest Association, is a non-for-profit group founded in 2012 with the aim of promoting the profession of surgery and helping aspiring surgeons reach their goals. The club has grown to include over 1500 student and professional members and hosts around 20 events every year. These events include academic seminars, surgical skills workshops, social events and an annual conference. Apart from SurgIA, Wasim is involved in surgical research, currently in the field of orthopaedics, and has presented his research in national and state-wide meetings. He is also an anatomy demonstrator for pre-clinical students at Griffith University. Outside of medicine, Wasim is an avid filmmaker.



### RICHARD TURNER

Richard Turner is Professor of Surgery at the University of Tasmania and a consultant general surgeon at the Royal Hobart Hospital. He is a graduate of the University of Queensland. He completed his specialist training through the Royal Brisbane Hospital in 1995, followed by post-fellowship positions in the UK, France and Townsville. He spent eleven years working at the Cairns Base Hospital, before taking up his current position in Tasmania. He has been a member of the RACS Court of Examiners (General Surgery), as well as the GSSE/CE Committee. He is also a member of the Operating With Respect Education Committee, teaching and directing a number of face-to-face courses each year. His clinical and research interests include pancreatitis, anal neoplasia, acute surgery, surgical audit, and medical education.



### CHRISTINE LAI

Christine Lai is a Senior Staff Specialist in the Division of Surgery at The Queen Elizabeth Hospital. She works on the Breast and Endocrine Surgical Unit as well as General Surgical Clinics and participation on the General Surgical On Call Roster. She is also the Supervisor of General Surgical Training at The Queen Elizabeth Hospital and Calvary Hospital North Adelaide. Christine serves on state and national level committees for the Royal Australasian College of Surgeons. She is the Chair of the Women in Surgery Section and immediate past Chair of the Younger Fellows Committee. Christine is also the first female surgeon from South Australia to be elected to serve as a RACS Councillor, commencing her term in May 2018. Christine maintains an active interest in ultrasound, in particular the application of clinician performed ultrasound. She is one of a handful of general surgeons who has a full Diploma of Diagnostic Ultrasound.



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## INVITED SPEAKER BIOGRAPHIES



### PHILIP TRUSKETT

Phil Truskett is a general surgeon with an interest in Upper GI and HPB Surgery at the Prince of Wales Hospital, Sydney, where he is a senior staff specialist. Phil has taken an active role in both the

Royal Australasian College of Surgeons and General Surgeons Australia. He is a past President of RACS and GSA. As a College Councillor he has served on many committees including Chair of the Board of Surgical Education and Training and Censor in Chief. He has also served as President of the Council of Presidents of Medical Colleges (CPMC). Phil is a patron of the Australian Indigenous Doctors Association (AIDA) and is an advocate for “closing the gap” health-care initiatives. His major interest is in the provision of emergency surgery to our community in our current challenging environment. As a result, he has been involved in the design and assessment of models of care to provide consultant-led timely care. These models of care are now being adopted in Australia and New Zealand. He is a strong advocate of sustainable surgical services, as the provision of patient-centred care in a safe, clinical environment is the benchmark by which we are all judged as professionals and how we should judge one another.



### GRACE BOYD

Grace Boyd is a medical student of the University of Queensland set to graduate with a Doctor of Medicine and concurrent Master of Philosophy at the end of 2020. Instigated by a passion for anatomy

during a dissection course in her Bachelor of Science degree, Grace developed a keen interest in surgery. This interest was fuelled when she became avidly involved in the surgical arm of the UQ Medical Society, Incision UQ. Following her position as Skills Officer, Grace was this year appointed as Chair, and has thus far enjoyed a hugely productive year with her dedicated team. Incision UQ aims to promote the surgical speciality and enhance the ability of, and the surgical opportunities available to, UQ medical students. Of the broad array of events Incision UQ hosts, some of the most popular are the skills workshops, which range from Basic Surgical Skills to Advanced Suturing Workshops. The committee also aims to provide academic seminars, of which the most notable are the Amazing Surgeons Conference and Surgical Specialties Information Evening. The committee is extremely thankful for those who contribute their time to teach surgical skills or to inspire at the seminars, without whom the events would not be possible.



### BARRY O'LOUGHLIN

Barry Stephen O'Loughlin graduated (MB BS Hons 1) from the University of Queensland in 1975. Following training in General Surgery at the Royal Brisbane Hospital he undertook postgraduate

training in the United Kingdom, obtaining Fellowship of the Royal College of Surgeons of England. Returning to Australia in 1985 he was appointed Lecturer in Surgery in the University Department of Surgery. In 1987 he joined the full-time staff of the Royal Brisbane Hospital developing clinical interests in upper gastrointestinal surgery and trauma. He was appointed Director of Surgery in 1994 and completed a Masters in Health Administration (University of New South Wales) in 1999. He is also a Fellow of the American College of Surgeons. He has always maintained strong links with the Royal Australasian College of Surgeons and has been Supervisor of General Surgical Training, a member of the Court of Examiners in General Surgery, Chairman of the Queensland State Committee, and a member of Council. His association with surgical practice in Queensland now extends over almost fifty years.



### SAUMYA CHANANA

Saumya Chanana is a third-year medical student at Bond University. After graduating from St Peter's Girls School in Adelaide, she moved to the Gold Coast. She has been actively involved in various

medical societies at university. She is excited to be President of the Bond University Surgical Society for 2019. The Bond University Surgical Society (BUSS) seeks to create and inspire the surgical leaders of tomorrow, through fostering and enriching the experience of medical students at Bond University. Now entering its seventh year, BUSS continues to promote the specialities of surgery through clinical workshops and careers nights presented by surgeons, whilst also raising funds for health charities in our community. Highlights of this year include the “Day in the Life of a Neuro/Ortho Surgeon” and the annual “Advanced Surgical Skills” workshops.



### PETER HODGSON

Peter Hodgson is a Financial Advisor at Walshs, having worked in the industry since 2013. He specializes in the financial planning needs of doctors in training, as well as consultants in the early stages of

their specialty. Peter provides advice on asset structuring and progression, as well as individualized financial advice to meet his clients' objectives such as buying property, transitioning to private practice, risk advice, superannuation and investment strategies. He holds a Bachelor in Business, Graduate Diploma in Financial Planning, SMSF Advice Accreditation and a Certificate IV in Finance and Mortgage Broking. Peter is currently working towards both his Masters in Financial Planning and Certified Financial Planning designation.



## INVITED SPEAKER BIOGRAPHIES



### STEVE HAMBLETON

Steve Hambleton is an adjunct Professor with the University of Queensland and a general practitioner in Brisbane. He is a former State and Federal President of the Australian Medical Association. He was a member of the Review of the Personally Controlled Electronic Health Record (PCEHR) known as the Royle Review who support the continuing development and implementation of a consistent and effective electronic health record for all Australians. In June 2014, Dr Hambleton was appointed Chairman of the National eHealth Transition Authority and oversaw its transition to the Australian Digital Health Agency in July 2016. Dr Hambleton has served the Agency as Co-Chair of the Clinical Programs including Radiology and Pathology and continues to Co-Chair the Clinical Governance Committee and the Medicines Safety Committee. He was the Deputy Chair of the My Health Record Expansion program which has resulted in over 90 per cent of the Australian Population in having access to a shared electronic health record. Dr Hambleton also serves on the boards of Avant Mutual Group Limited and the newly formed Digital Health Cooperative Research Centre.



### ADELENE HOULTON

Adelene Houlton is a Paediatric Surgery Trainee at the Gold Coast University Hospital. She has previously worked at the Queensland Children's, John Hunter Children's and Westmead Children's Hospitals. With recent experience of a part-time role as well as interruption and return to training, Adelene is a keen advocate for flexible training options in Surgical Education and Training (SET).



### STEWART MCLEOD

Stewart McLeod is a Partner at Walshs bringing a wealth of experience in taxation, financial statements, GST, tax planning, structuring and ATO compliance. Stewart particularly enjoys working with professionals that have or who are about to embark on the next phase in their career and guiding them with regards to the most appropriate structure. Stewart holds a Bachelor of Commerce, Bachelor of Physical Education, Certificate IV in Finance and Mortgage Broking, is a Chartered Taxation Advisor and is a member of the Institute of Chartered Accountants Australia and New Zealand.

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## GENERAL INFORMATION

### VENUE

The Combined Queensland State Conference and Surgical Directors Leadership Forum is being held at The Sheraton Grand Mirage, Gold Coast located at 71 Seaworld Dr, Main Beach QLD 4217.

All scientific sessions will be held in the Grand Ballroom with the industry exhibition being held in the Grand Mirage Terrace.

### REGISTRATION DESK

The registration desk is located in the foyer outside of the Grand Ballroom and Grand Mirage Terrace.

#### Opening Times:

<b>Friday 12 July 2019</b>	3:00pm - 6:00pm
<b>Saturday 13 July 2019</b>	7:30am - 6:00pm
<b>Sunday 14 July 2019</b>	7:30am - 1:00pm

### INDUSTRY EXHIBITION

All lunches, morning and afternoon teas will be served in the exhibition area, located in the Grand Mirage Terrace, at the Sheraton Grand Mirage Gold Coast.

### NAME BADGES

Your name badge is essential for entry into all scientific sessions, the industry exhibition and official functions. It must be worn at all times.

### INTENTION TO PHOTOGRAPH

Please be advised that photographs may be taken during the conference and reproduced by the conference organiser. These photographs may be used for the following purposes:

- Projection onsite
- Reporting on the conference in online and hard copy publications
- Marketing a future conference, including online and hard copy publications

*If you do not wish to be included in a photograph, please advise the photographer.*

### CERTIFICATE OF ATTENDANCE

A certificate of attendance will be emailed after the conference.

### CONTINUING PROFESSIONAL DEVELOPMENT (CPD) PROGRAM

This educational activity has been approved in the College's CPD Program. Fellows who participate can claim one point per hour (maximum 12 points) in Maintenance of Knowledge and Skills towards 2019 CPD totals. CPD points will be automatically updated for all Fellows who have provided their RACS ID.

### CAR PARKING

All guests attending the conference are offered complimentary parking. As you arrive, you are required to take a ticket at the entry gate. Before departing the car park, you will need to visit the front desk to have your ticket validated.

### WIFI

Complimentary WIFI is available. For more information, visit the registration desk.

### WELCOME RECEPTION

#### Friday 12 July 2019

7:00pm - 9:00pm

Grand Mirage Terrace

Sheraton Grand Mirage Gold Coast

Cost: Complimentary

*Celebrate the opening of this important state conference with invited faculty, colleagues and industry.*

### CONFERENCE DINNER

#### Saturday 13 July 2019

7:00pm - 11:00pm

Horizons Room

Sheraton Grand Mirage Gold Coast

Cost: \$145.00 per person

*Note: Tickets are essential. If you do not have a ticket, please visit the registration desk regarding availability.*

### DRESS

**Scientific Sessions:** Business attire or smart casual

**Welcome Reception:** Business attire or smart casual

**Conference Dinner:** Lounge Suit / cocktail attire

### SPECIAL DIETARY REQUIREMENTS

Please note that the venue is responsible for all catering at the meeting and RACS does not inspect or control food preparation areas or attempt to monitor ingredients used. You should contact the venue directly for all special dietary requirements during the meeting, irrespective of whether details have been provided to RACS. If RACS requests information about your dietary requirements for a specific event RACS will endeavour to forward the information provided to the venue (time permitting). RACS will not retain information provided for future events, so you must verify your requirements for each event. Even if information is requested or provided, RACS takes no responsibility for ensuring that the venue acknowledges your dietary requirements or that these requirements can be met. In all cases you must verify for yourself that your dietary requirements have been met and RACS refutes any and all liability for any failure to adequately provide your special dietary requirements or any consequential damage resulting from such failure.

## FRIDAY 12 JULY 2019

8:30am	Statewide Surgical Services Forum - Queensland Health	Surgical Advisory Committee
4:30pm	Queensland RACS Papers Prize	Chair: Dr Raja Sawhney
5:30pm	Neville Davis Prize	Chair: Dr Raja Sawhney

7:00pm	<b>WELCOME RECEPTION</b>	<b>Grand Mirage Terrace, Sheraton Grand Mirage</b>
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## SATURDAY 13 JULY 2019

7:30am	Registration Open
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Session 1	The Medical Student / Intern Years	Chair: Prof Deborah Bailey
8:00am	Welcome and Acknowledgement of Country	Prof Deborah Bailey
8:10am	Global megatrends and implications for healthcare and the practice of surgery	Dr Stefan Hajkowicz (CSIRO)
9:10am	So you want to be a surgeon?	Prof Richard Murray, Kevin Jang, Saumya Chanana, Wasim Awal, Grace Boyd
10:00am	Mentoring and role modelling medical students and the intern years	Prof Mark Smithers
10:30am	Panel Discussion	Dr Stefan Hajkowicz, Prof Richard Murray, Kevin Jang, Saumya Chanana, Wasim Awal, Prof Mark Smithers, Grace Boyd

10:45am	<b>MORNING TEA WITH INDUSTRY</b>
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Session 2	The Registrar Years	Chair: Dr Emma Secomb
11:15am	AOA 21 – competency based training	Dr Gary Nielsen
11:35am	Flexible training – feedback during training, limited working hours and training, planning maternity/paternity leave	Dr Adelene Houlton, Prof Deborah Bailey, Dr Jill O'Donnell, Dr Jo-Lyn McKenzie
12:35pm	Panel Discussion	Dr Gary Nielsen, Dr Adelene Houlton, Prof Deborah Bailey, Dr Jill O'Donnell, Dr Jo-Lyn McKenzie

1:00pm	<b>LUNCH WITH INDUSTRY</b>
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Session 3	The Registrar Years Continue	Chair: Dr Emma Secomb
2:00pm	Burn out – work life balance	Dr Eric Levi
2:20pm	Why women leave surgical training	Dr Rhea Liang
2:35pm	Is resilience a dirty word?	Prof Richard Turner
2:50pm	Panel Discussion	Dr Eric Levi, Dr Rhea Liang, Prof Richard Turner

3:15pm	<b>AFTERNOON TEA WITH INDUSTRY</b>
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Session 4	Fellow and Young Consultant Years	Chair: Prof David Fletcher
3:45pm	Flexible consultant workforce - fiction or fact	Dr Christine Lai
4:05pm	Acute surgery and on call - changing patterns of service	Dr Philip Truskett
4:25pm	Academic pathways within surgical departments	Prof Owen Ung
4:45pm	Panel Discussion	Dr Christine Lai, Dr Philip Truskett, Prof Owen Ung
5:00pm	From pauper to profits: how to manage your financial wellbeing throughout your life stages	Stewart McLeod, Peter Hodgson (Walshs Financial Planning)
5:30pm	Future in digital health	Prof Steve Hambleton (Australian Digital Health Agency)

5:45pm	David Theile Lecture	Dr Barry O'Loughlin
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7:00pm	<b>CONFERENCE DINNER</b>	<b>Horizons Room, Sheraton Grand Mirage</b>
	Award Announcements	Prof Deborah Bailey
	Honoured Guest Speech	Dr Neil Wetzig

## SUNDAY 14 JULY 2019

Session 5	Who is Accountable for Surgical Competency and Professionalism?	Chair: Dr Brian McGowan
8:30am	Can surgical performance be measured?	Prof Julian Archer
8:50am	Accountability – what is the medico-legal view point?	Claire Bassingthwaighe (Avant)
9:20am	What is the College's accountability?	RACS Vice President Dr Richard Perry
9:50am	What is the jurisdiction's accountability?	Dr John Wakefield
10:20am	Panel Discussion	Prof Julian Archer, Claire Bassingthwaighe, Dr Richard Perry, Dr John Wakefield

10:45am	<b>MORNING TEA WITH INDUSTRY</b>
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Session 6	Planning – Department and Succession	Chairs: Prof Robert Padbury and Dr Sanjeev Naidu
11:15am	Sustainability of surgical services	Prof David Fletcher
11:40am	The ageing surgeon	Dr Rupert Sherwood
12:00pm	How do we develop surgical directors?	Dr John Wakefield
12:15pm	Leadership in a regional centre	Dr Roxanne Wu
12:30pm	Panel Discussion	Prof David Fletcher, Dr Rupert Sherwood, Dr John Wakefield, Dr Roxanne Wu, Dr Sanjeev Naidu

1:00pm	<b>LUNCH WITH INDUSTRY</b>
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	Special Lunchtime Presentation	Chair: Prof Deborah Bailey
1:15pm	Africa & international advocacy	Dr Neil Wetzig
1:45pm	Closing statements	Prof Deborah Bailey



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- discharge summaries;
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- prescription and dispense records;
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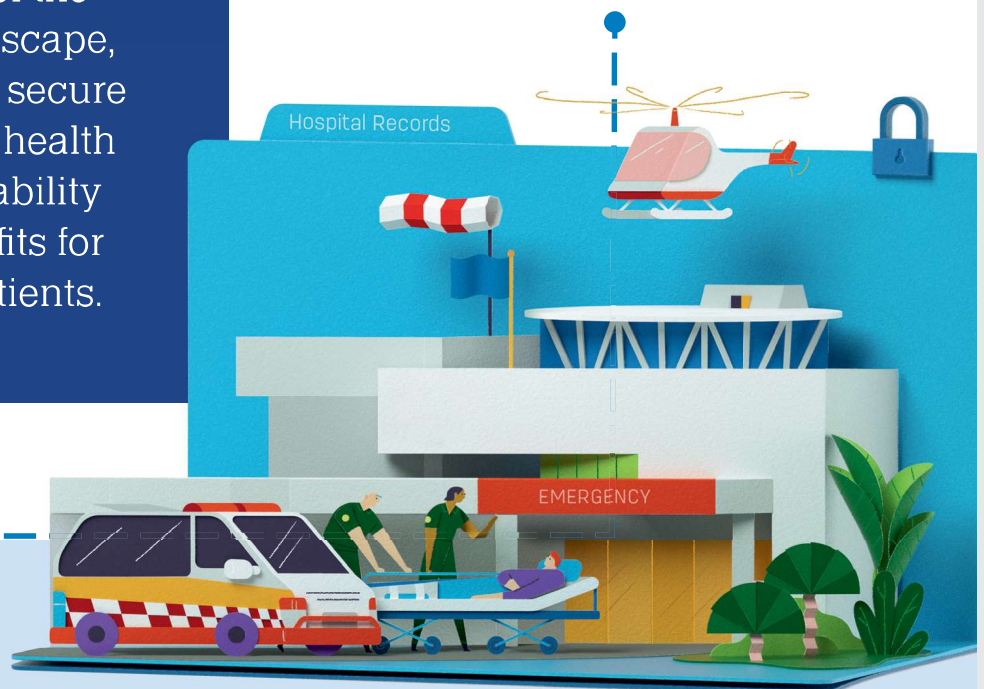




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- avoids unnecessary duplication of pathology and diagnostic imaging tests.

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## NEVILLE DAVIS PRIZE ABSTRACTS

### THE USE OF <sup>68</sup>GA-PSMA PET/CT TO DETERMINE PATTERNS OF DISEASE FOR BIOCHEMICALLY RECURRENT PROSTATE CANCER FOLLOWING PRIMARY RADIOTHERAPY

**Authors:** *Raveenthiran S, Yaxley J, Gianduzzo T, Kua B, MacKean J, McEwan L, Wong DC, Tsang G*

**Hospital/City:** *Wesley Hospital, Auchenflower, QLD*

**Purpose:** Identify patterns of prostate cancer recurrence in relation to post-radiotherapy PSA levels, especially below accepted Phoenix definition of PSA failure (PSA nadir +2).

**Methods:** <sup>68</sup>Gallium – Prostate Specific Membrane Antigen PET/CT (<sup>68</sup>Ga-PSMA PET/CT) scan is increasingly used for staging of recurrent prostate cancer. Early identification of recurrence after radiotherapy is important in considering suitability for early salvage therapy. This was a retrospective review of men between July 2014 - June 2018 who received <sup>68</sup>Ga-PSMA PET/CT scan for elevated PSA following radiotherapy for prostate cancer. Primary outcome

measure was to determine the relationship between pre-scan PSA and the probability of identifying PSMA-avid disease.

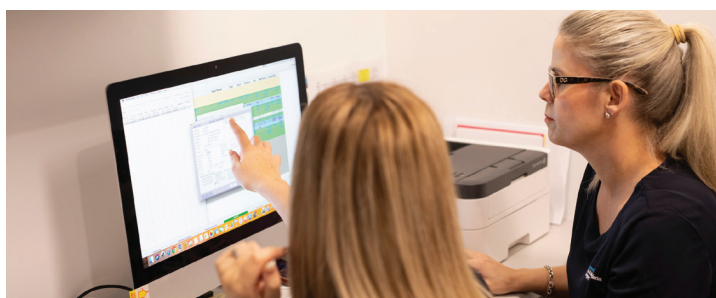
**Results:** 276 men met inclusion criteria. Median PSA was 3.60ng/mL. Overall detection rate for recurrent disease was 86.3%. Local recurrence was most common occurring in 56.9%, with isolated prostate recurrence in 32.6%. 75.3% of men below Phoenix criteria had evidence of recurrent disease, with 52.1% of these men having salvageable disease. The regions surrounding the iliac arteries were the most common areas of nodal metastasis.

**Conclusions:** <sup>68</sup>Ga-PSMA PET/CT identifies recurrent prostate cancer prior to the accepted definition of recurrence. Early identification of local recurrence allows the option of salvage treatments and timely identification of metastases may improve outcomes with prompt initiation of multimodality therapies.



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## NEVILLE DAVIS PRIZE ABSTRACTS

### ASSESSING THE IMPACT OF HOSPITAL-VOLUME AND SERVICE CAPABILITY ON POST-OPERATIVE MORTALITY FOLLOWING COMPLEX UPPER-GASTROINTESTINAL CANCER SURGERY

Authors: Aaditya Narendra, Peter D Baade, Joanne F Aitken, Jonathan Fawcett and B Mark Smithers

**Hospital/City:** University of Queensland, Princess Alexandra Hospital, Cancer Alliance Queensland, Brisbane, Cancer Council Queensland, Brisbane and University of Southern Queensland

**Background:** High hospital-volume and high hospital service capability are reported to improve post-operative mortality following complex surgery. We compare mortality between high and low-volume hospitals performing gastrectomy, oesophagectomy or pancreaticoduodenectomy, stratified by hospital service capability.

**Methods:** All patients undergoing gastrectomy, oesophagectomy and pancreaticoduodenectomy for cancer in Queensland between 2001 and 2015 were obtained from the Queensland Oncology Repository. Hospital service capability was defined using the 2015 Australian Institute of Health and Welfare Hospital peer groupings. Hospitals were grouped into “high-volume ( $\geq 5$  gastrectomies or  $\geq 6$  oesophagectomies or pancreaticoduodenectomies), high-service capability” (HVHS); “low-volume, high-service” (LVHS) and “low-volume, low-service” (LVLS) centres. Multivariate Poisson models were used to compare 30-day and 90-day mortality between hospital groups adjusting for age, sex, socio-economic status, Charlson and ASA scores, chemotherapy, radiotherapy, stage and time-period.

**Results:** For gastrectomy, mortality was lower in hospitals with high-service capability irrespective of resection volume: HVHS [ref]; LVHS [30-day (IRR=1.08, 0.45 - 2.58); 90-day (IRR=1.02, 0.54 - 1.91)]; LVLS hospitals [30-day (IRR=2.70, 95% CI:1.53 - 4.76); 90-day (IRR=1.83, 95% CI:1.18 - 2.84)]. For pancreaticoduodenectomy, mortality was higher in low compared with high-volume hospitals: HVHS [ref]; LVHS [30-day (IRR=2.32, 95% CI:1.07 - 5.03); 90-day (IRR=2.36, 95% CI:1.29 - 4.30)]; LVLS [30-day (IRR=3.92, 95% CI:1.45 - 10.61); 90-day (IRR=3.32, 95% CI:1.64 - 6.71)]. For oesophagectomy, 90-day mortality was higher in low compared with high-volume hospitals: HVHS [ref]; LVHS: [IRR=3.86, 95% CI:1.74 - 8.57]; LVLS: [IRR=3.40, 95% CI:1.16 - 10.00)].

**Conclusion:** For gastrectomy, post-operative mortality is improved with high hospital service capability regardless of resection volume. For oesophagectomy and pancreaticoduodenectomy, high hospital-volume is significantly associated with improved mortality, irrespective of high-service capability.

### “THERANOSTICS” – RADIOIMMUNODETECTION AND RADIOIMMUNOTHERAPY FOR METASTATIC COLORECTAL CANCER TARGETING CDCP1

Authors: Cuda T, Puttick S, Rose S, Hooper J, Thomas P, Riddell A, Clark D, Stevenson A

**Hospital/City:** Royal Brisbane and Women's Hospital, Brisbane, Queensland, St Vincent's Northside Private Hospital, Brisbane, Queensland, Redcliffe Hospital, Redcliffe, Queensland

**Purpose:** The overall survival of patients with metastatic colorectal cancer is dismal. Theranostics uses diagnostic and therapeutic radionuclides conjugated to targeted ligands, known as radioligands, as PET imaging and treatment modalities for metastatic cancers. We have employed a monoclonal antibody (mAb) to a transmembrane glycoprotein overexpressed on colorectal cancer to target metastatic disease. We assessed the radiolabelled mAb as a cancer-specific PET imaging radioligand and a therapeutic radioligand for colorectal cancer in preclinical cancer models.

**Methods:** We assessed the avidity during PET imaging of our Zirconium-89 ( $^{89}\text{Zr}$ )-mAb in detecting colorectal cancer in a range of mouse models. In a therapeutic phase, we assessed tumour response of mice carrying colorectal cancers treated with the therapeutic radioligand Lutetium-177 ( $^{177}\text{Lu}$ )-mAb.

**Results:** During PET imaging,  $^{89}\text{Zr}$ -mAb demonstrated significantly higher avidity than control radioligands with high specificity for colorectal cancer.  $^{177}\text{Lu}$ -mAb was significantly more effective than chemotherapy at reducing tumour growth.  $^{177}\text{Lu}$ -mAb improved the efficacy of chemotherapy thus opening the possibility of using the radioligand concurrently with chemotherapy.

**Conclusion:** Theranostics may offer a new therapy for patients with metastatic colorectal cancer. Our future prospects will work towards eventual clinical trial.



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Craig's expertise in commercial law covers areas of business structuring, intellectual property, contracts advice, business sales and acquisitions, leases and trusts and a raft of organisational matters from HR to corporate governance. Craig takes a pragmatic approach to delivering tailored, fair-priced commercial advice to clients.

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## RACS PAPER PRIZE ABSTRACTS

### VITAMIN D DEFICIENCY IN PROXIMAL FEMUR FRACTURE PATIENTS OF SOUTH-EAST QUEENSLAND

**Authors:** Wasim Awal, Prof Randy Bindra, Nathan Price, Isobel Hymer, Joe Chen, Amanda Sadler

**Hospital/City:** Robina Hospital, Gold Coast  
Queensland

**Purpose:** Our aims were to: (1) Compare the incidence of hypovitaminosis D in South-East Queensland proximal femur fracture (PFF) patients to data globally. (2) Investigate the association between vitamin D level and social/demographic factors, fracture type or femoral cortical thickness.

**Methods:** This is an observational cohort study of patients that presented to a Queensland hospital with a PFF over a 13-month period. Vitamin D levels on admission, fracture type, femoral cortical thickness and the presence of social and demographic factors were

obtained from patient records and x-rays. SPSS was used for statistical analysis.

**Results:** 331 participants with PFFs were included in the analysis. 110 (33.2%) patients were deficient in vitamin D. In past studies, this value ranges from 67-92%. We found no association between vitamin D levels and socioeconomic index, sex, independent or assisted living, or previous fracture history. Vitamin D levels were not correlated with fracture type or cortical thickness.

**Conclusions:** PFF patients from South-East Queensland have a lower incidence of hypovitaminosis D compared to other states and countries. Social and demographic factors, femoral cortical thickness and fracture type do not appear to correlate with vitamin D levels. Thus, vitamin D may not be a major predictor of PFFs.



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## RACS PAPER PRIZE ABSTRACTS

### PATIENT SELECTION FOR PROSTATE BIOPSY USING A MULTIPARAMETRIC MAGNETIC RESONANCE IMAGING (mpMRI) BASED TRIAGE PATHWAY IS FEASIBLE, IMPROVES PROSTATE CANCER DETECTION AND REDUCES BIOPSIES

**Authors:** Peter Donato, Andrew Morton, John Yaxley, Patrick E. Teloken, Geoff Coughlin, Rachel Esler, Nigel Dunglison, Robert A. Gardiner, Matthew J. Roberts

**Institution:** Royal Brisbane & Women's Hospital  
Brisbane, Queensland

**Purpose:** This study sought to describe the feasibility of introducing a prostate mpMRI-based triage pathway including diagnostic performance, cost analysis and applicability to training.

**Methods:** A retrospective observational cohort study was performed of consecutive patients attending a large public tertiary referral centre who were referred for suspicion of prostate cancer (PCa) and underwent mpMRI. Standard clinical histopathological, mpMRI-related and financial parameter were collected for analysis of diagnostic accuracy, biopsy avoidance, logistical (including financial) and operator feasibility.

**Results:** A total of 653 men underwent prostate mpMRI, of which 344 proceeded to biopsy producing a biopsy avoidance rate of 47%. 240 (69.8%) men were diagnosed with PCa, of which 208 (60.5%) were clinically significant (Gleason  $\geq 3+4$ ). Higher PIRADS scores and PSA density were associated with clinically significant disease. The mpMRI triage pathway resulted in an estimated cost saving of AUD \$633,150 or AUD \$970 per patient. The approach was cost effective and demonstrated a high level of performance which was maintained over the study period.

**Conclusion:** Implementation of a mpMRI-based triage pathway into a large public teaching hospital is cost-effective, feasible and leads to high rates of csPCA diagnosis, whilst reducing detection of clinically insignificant PCa and unnecessary biopsies.

### CHIARI I MALFORMATION: AN AUSTRALIAN PAEDIATRIC SURGICAL COHORT

**Authors:** Charles Yates <sup>(1, 2)</sup>, Dr Robert Campbell <sup>(1)</sup>, Dr Martin Wood <sup>(1)</sup>, Dr Raymond Chaseling <sup>(1)</sup>, Dr Gert Tolleson <sup>(1)</sup>, Dr Norman Ma <sup>(1)</sup>

**Institution:** Department of Neurosurgery, Children's Health Queensland, Brisbane, Queensland <sup>(1)</sup>, University of Queensland School of Medicine, Brisbane, Queensland <sup>(2)</sup>

**Purpose:** Chiari I Malformation (CIM) is a pathology marked with variability, making predictable treatment challenging. Paediatric patients are a sub-group with particular challenges. We evaluated all CIM decompressions in a paediatric cohort, aiming to provide evidence to improve surgical management.

**Methodology:** Retrospective chart review was conducted for 65 paediatric CIM patients receiving decompression between 2006 - 2018. Presenting features, procedure, and outcomes were evaluated. Outcomes were assessed using the 16-point Chicago Chiari Outcome Scale (CCOS), the only externally validated outcome scale for CIM surgery.

**Results:** Procedure type was split between dural/ arachnoid manipulation and tonsillar diathermy (54% vs 44.4%), with no significant difference in outcome (CCOS  $13.51 \pm 2.35$  vs  $13.37 \pm 2.62$  respectively). Tonsillar diathermy was associated with more complications (35.5% vs 21.3%). Older age at surgery, and scoliosis, were independently associated with significantly better outcome ( $p < 0.05$ ). Dysphagia was associated with worse outcome ( $p < 0.05$ ). Finally, patients  $< 6$  years were more likely to return to theatre (OR 3.02, 95% CI 1.28 – 7.13,  $p < 0.001$ ).

**Conclusion:** This study finds tonsillar diathermy, a common technique, increases risk of complications, without added benefit in outcome. Furthermore, absence of dysphagia, older patient age, and presence of scoliosis are associated with better outcomes, and therefore support management decision making.

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