From the President’s Desk

I write this incoming President’s report with storm clouds brewing over our prime minister and little sign of a Brexit deal. It is much more promising on the ENT UK front after an excellent annual meeting in Chester where we had a good turnout from members and an array of distinguished speakers. Our academic colleagues were well represented with interesting oral and poster presentations. Importantly we shared the results of the survey of our members and this will underpin our strategy going forwards.

I wish to record my thanks to our outgoing ENT UK President, Brian Bingham, and Tony Narula as demitting Trustee. Both will continue to help ENT UK in various capacities. Our new Executive and Trustee Board took over at the AGM; we shall work together with our members to improve our services. I dedicate my time as President to nurture our younger colleagues and trainees who will surely take our specialty and profession to greater heights. This was evident when I attended national selection and saw the best trainees competing for higher training. At the other end, I was also pleased to see the astounding work that our members do, around the UK and it was a pleasure to support many strong applicants for national ACCEA awards.

We have renewed links with Clinical Otolaryngology, negotiating a reduced online subscription as part of your membership and have also agreed continuing support for our e-learning platform e-lefENT. An improved website is part of the improvements you will notice in the coming months and years. At the recent Trustee Board we agreed to strengthen our patient information and guidelines section, and one of my tasks is to reinforce the position and responsibilities of our regional representatives on the ENT UK Council. BACO 2020 will surely be a highlight next year; we aim to offer registration at a reduced price for members, and it will be managed entirely in-house by the excellent ENT UK team led by Lyndy Pullan, with Professor Gerry O’Donoghue as BACO Master 2020. The news that FRCS International is finally
A big thank you to everyone who took part in the ENT UK Spring Meeting in Chester on 15 March. The day was a great success, with a series of interesting and well-received talks from a variety of speakers, including Stefan Linton, Catarina Pratas, Yixu Wang, Asil Tahir, Mark Hull, Neil Bateman and Alexandra Burton.

Our special thanks go to Professor Brad Welling of Harvard University and to Dr Theresa Frawley, the Royal College of Surgeons of Ireland’s Dean of Nursing. As this year’s Lionel Colledge lecturer, Professor Welling’s reminiscences of more than thirty years’ experience working in the field of ENT surgery were both insightful and entertaining. Later in the day, Dr Frawley’s investigation of how multi-disciplinary working could improve patient care provided the audience with much to think about.

As ever, the day proved a perfect opportunity to honour some of our members for their achievements and invaluable contributions to ENT. Congratulations to David Wright, Musheer Hussein, Tony Narula, Valerie Lund (in absentia) and Richard Ramsden for receiving honorary membership of ENT UK from the outgoing President Brian Bingham. It was a particular pleasure to hear David Wright’s recollections of an escapade in Chester during his national service days in the 1950s!

Congratulation also to our prize winners: Michael Coates, winner of the poster prize, Chang Woo Lee, who won the undergraduate essay prize, and Michael Mather, this year’s Phillip Stell Prize winner for the best oral presentation. They each managed to excel against very impressive competition, and thoroughly deserved their awards.

Of course, the meeting was also the occasion of the Presidential handover ceremony, as Brian Bingham stepped down after two years in office and was succeeded by Nirmal Kumar. We would like to thank Brian for his years of service, and to offer Nirmal hearty congratulations for his elevation to the role.
Our significant announcement this year is the publication of the SFO eBook, a resource aimed specifically at medical students and foundation doctors with content mapped to the 2016 SFO curriculum. It is available to download from the Kindle Store.

SFO membership continues to rise steadily, we now have 289 members versus 200 a year ago ago. Undergraduate ENT societies are continuing to appear around the UK and often organise events with the help of the SFO regional representatives. We continue to support careers fairs and have been involved in at least a dozen around the UK over the last year. This year we also supported the inaugural pre-conference ENT day at ASiT. Nationally we are engaged with both Royal Colleges of Surgeons (England and Edinburgh) in promoting ENT through their respective educational divisions.

We are building up to the Annual SFO Conference, which is on Saturday 12th October 2019 at University Hospital, Birmingham. The format has been tweaked based upon feedback so this year’s theme is Life as an ENT Consultant / Trainee and how to make it! After a morning of lectures, there will be an afternoon of practical skill stations (grommet insertion, tonsil tie, nasendoscopy etc.). Three prizes will also be available (JLO prize for best oral presentation, Grant-Bates Poster Prize, and the People’s Prize voted by delegates). Places will be limited to 80 so please ask any interested delegates to register early via the SFO UK website.

Once again I thank my SFO committee colleagues for their unwavering enthusiasm in promoting ENT to medical students and junior doctors. I also extend this gratitude to the countless number of ENT consultants and trainees around the UK that give up their time, often evenings and weekends, to support local ENT events; we hope these efforts will nurture a future generation of ENT surgeons that will keep our specialty thriving.

Mr. Jayesh Doshi  
Chair, Student and Foundation Doctors in Otolaryngology  

SFO Update  

SFO UK Website  
SFO UK Facebook  
SFO UK Twitter  
SFO UK Instagram
It is a great honour to have been appointed as the new Director of Education for ENT UK in December, and I am enormously grateful to the previous Director of Education, Mr. Andrew Robson, for his support as I have been finding my feet and setting priorities. I plan to develop our core educational mission of supporting the education of all healthcare professionals who are delivering ENT care in the UK.

Having worked in undergraduate surgical education for the last thirteen years as a consultant I have found that with careers evenings, careers fairs and ENT special study modules, a handful of students out of a year group of 300 really want to follow an ENT career. I am always delighted to see many of these keen young medical students now well established in training programmes. However, it is likely that almost half of the students emerging from any medical school will be working in General Practice, some with an extended role in ENT. With this in mind, and in an effort to improve the appropriateness of ENT referrals, I am looking at ways ENT UK can support the CPD of GPs with extended roles in ENT (GPwER). I hope that this will be a win-win situation for all, in particular for the patients who often wait far too long to be seen with straightforward conditions. In order to achieve this, we are looking at formalising access for GP members of ENT UK to appropriately selected materials on the virtual learning platform in collaboration with the RCGP.

Good news - as a membership benefit the cost of the successful adult emergency skills course (ESC) will be reduced substantially for future courses. The skills course team are planning to develop additional resources to support the ESC course for the wider benefit of all ENT surgeons to provide additional CPD resources on the theme of emergency safety which we all require for revalidation.

I am sure that Consultants and trainees alike will all enjoy using the new format of the e-lefENT educational resources which will soon be available with a single sign-on clearly displayed on a mobile device. Huge congratulations to the SFO team who have produced an excellent new eBook for medical students and doctors new to ENT, which is available to purchase from Amazon for use on a kindle or other e-reading device. Please encourage the new members of your team and students to consider purchasing it (details in SFO section).

There is a new series of webinars under development which will be focusing on the management of surgical complications and recordings of previous recordings are available on the members’ area of the website.

I would like to welcome trainee Shilpa Ojha as the new Association of Otolaryngologists in Training (AOT) representative to the Education and Training committee of ENT UK, and look forward to increased collaboration with this group going forwards. I would like to encourage all Specialty doctors to attend the 5th ENT UK SAS Conference in Torbay June 20th - 21st which promises a varied and exciting programme including workshops and talks in a beautiful part of the country.

Please get in touch if you would like to contribute to any of the new educational resource development.
I am pleased to give you my first report as the new Chair of the SAC. I have specific challenges to deal with in my time as Chair. These are the new curriculum, workforce and run through pilot.

**New curriculum**

The new curriculum passed the first hurdle required by the GMC and we are now at the second, higher hurdle, CAG (Curriculum Advisory Group). We are in as the first specialty to be assessed along with Cardiothoracic Surgery. They have reviewed the submission and required clarification in several areas but none of them looked insurmountable.

When this is finally accepted, a significant challenge still lies ahead. There will be a new process to assess trainee progress and there will be a series of regular updates and events that will advise trainers of the key changes. You may have heard from colleagues how the new assessment tool MCR (Multi Consultant Report) is time consuming and unworkable. I agree wholeheartedly that this was the case, but the concerns have been listened to and a simpler tool is being re-piloted.

**Workforce**

Workforce issues are not isolated to ENT. The issues with recruiting paediatricians, GPs, radiologists etc make the headlines. However, we are facing a workforce crisis. We simply have too many Consultant vacancies and are not training sufficient Registrar numbers. The JCST (Joint Committee on Surgical Training) and HEE (Health Education England) have taken this on board, and meetings are planned in June and July 2019 with John Stock of HEE to find solutions to these concerns. We know we have the capacity to train. Similar arguments are being made in Scotland.

**Run Through**

The first cohort of run through trainees will be coming up to their first ARCP and the QA (Quality Assurance) group from JCST will start to gather the necessary data. I would hope we can prove its worth, allowing us control over early years training and programs, and be an effective point of entry for those keen on a career in ENT. I remain concerned regarding the relative lack of ENT teaching, and therefore its attraction as a career, at Medical Schools. I was at the ASiT conference ‘Specialty Village’ and on speaking to medical students heard that some only had one week dedicated ENT teaching as undergraduates. We need to have those responsible for undergraduate teaching addressing this issue.

Additionally, we have recently had National Selection. The process worked well this year and Hull proved a good venue. I would like to take this opportunity to thank all of those that came and helped out this year. I hope you found it worthwhile and will come back. This was Angus Cain’s last year as Lead and he passes the mantle (chain?) on to Charlie Hall. Angus has done an excellent job and I would like to thank him personally for all the hard work over the past years.

Finally, I would like to thank Jeremy Davis for the good work he did as Chair and for leaving the house in good order when he left. I have much to live up to!
Women in ENT Surgery (WENTS) Update

Women in ENT Surgery (WENTS) has had a fantastic few months. In December the Trustees of ENT UK accepted WENTS as a subsection of ENT UK. With the AOT (Association of Otolaryngologists in Training) we’ve been campaigning for reduced ENT UK membership rates during parental leave, and we are delighted to announce that the Executive Committee of ENT UK and the Board of Trustees have agreed.

There will be reduced membership rates available for members on maternity leave, paternity leave, sick leave or on a long-term leave of absence. This is a big step forward in allowing members to keep in touch and up to date while out of clinical practice. Achieving both these results is a massive step in completing our goals set at BACO 2018 for BACO 2020.

On International Women’s Day (8th March 2019) we launched our logo! We held a competition which attracted equal numbers of entries from female and male supporters, which were then put to a public vote. I would like to thank everyone for their brilliant entries and votes.

WENTS has been represented at numerous events: The International Undergraduate and Foundation Surgery Conference (iNUGSC), UCL Women in Surgery Conference, Cambridge Women in Surgery Conference, East of England Undergraduate and Foundation ENT Conference. We have been promoting both being a woman in surgery and a woman in ENT. It is such a privilege to be given the opportunity to inspire, support and guide young people.

The International Undergraduate & Foundation Surgery Conference (iNUGSC)

We have continued our monthly coffee mornings prior to RSM meetings. It is marvellous to catch up with old friends, discuss new concerns and tackle problems as a group in a relaxed setting. Our next will be 8.30am on 3rd May 2019 at Pret a Manger, 5 Vere Street, W1G 0GD.

All are welcome!

To join WENTS please get in touch:

WENTS email
WENTS on Twitter
The year has started well for the BSFPS. In our recent Council meeting it was agreed that we will continue working on new byelaws which will be presented in the next AGM, where we expect a good number of attendees. We aim to improve the structure of our Council and have closer engagement from our members.

The second BSFPS Cadaveric Dissection Course took place on 4th and 5th of March 2019 at Manchester Medical School cadaveric lab, and proved to be a great success. A breadth of facial plastic procedures from rhinoplasty to blepharoplasty and facelift were covered. The course was filled well in advance with 16 dissectors sharing 8 heads. This was a dissection only course thus maximising the time for hands on dissection for delegates. The feedback has been excellent. We have noted that our delegates have asked for more dissection time and hence the next course in 2020 will be run over three days and will be on March 9/10/11. The format and venue remain the same. The course will be advertised by end of May and we encourage an early booking.

We are looking forward to the BSFPS Annual Meeting in Macdonald Burlington Hotel, Birmingham on the 14th June 2019. We have already registered a large number of attendees and places are still available for application on the ENT UK website. We are pleased to have received a considerable number of abstracts for the free papers section. The programme has been very well set up and will appeal to both novice and experienced surgeons. We are privileged to have two well-known international speakers in addition to an esteemed faculty from the UK. Applications are still open on the ENT UK website.
Cochlear Implant Guideline Update

After much consultation, NICE has announced a change in the criteria for Cochlear Implantation in England and Wales. The new criteria will allow treatment of a wider group of adults and children with bilateral severe to profound hearing loss, who do not gain adequate benefit from hearing aids. The new summary guidance, TA566 can be downloaded here.

The key aspects of the recommendations are:

- **Unilateral cochlear implantation** is recommended as an intervention for people with severe to profound deafness who do not receive adequate benefit from acoustic hearing aids.

- Simultaneous bilateral cochlear implantation is recommended for children or adults who are blind.

- Severe to profound deafness is defined as hearing only sounds louder than 80dBHL or greater at two or more of the following frequencies: 0.5, 1, 2, 3, 4 kHz.

- The definition of adequate benefit from hearing aids in adults is defined as 50% or greater on AB words at 70 dBA.

- For children, adequate benefit from hearing aids is defined as speech, language and listening skills appropriate to age, developmental stage and cognitive ability.

- Cochlear implantation should be considered for children and adults only after assessment by a multidisciplinary team. As part of the assessment children and adults should also have had a valid trial of an acoustic hearing aid for at least three months (unless contraindicated or inappropriate).

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I am pleased on behalf of the Trustees of ENT UK to accept the long standing request of the ENT UK Global health committee to provide a free international members category for colleagues living and working in HINARI A countries. This aims to help raise the standard of the quality of care wherever the need is greatest and where educational resources are scarce. ENT UK will monitor the uptake and usage of this member category and update all in 6 months.

Prof, B. Nirmal Kumar
President, ENT UK

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ENT UK

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