

BRITISH ASSOCIATION OF ENDOCRINE AND THYROID SURGEONS

MINUTES OF ANNUAL GENERAL MEETING

Held on Friday, 10th October 2008, in the Hémicycle de la Communauté Urbaine, Jardin du Pharo, Marseille, France

1 Greetings and Apologies for Absence

Present, 45 full members of the Association, including Prof T W J Lennard in the Chair

Apologies, Mr P R Maddox

A minutes silence was held in memory of Prof Sir Robert Shield and Prof Ivan Johnstone (Past-President of the Association)

2 Minutes of the Previous Meeting, held on 13th September, 2007, London

Accepted as an accurate record

3 Matters Arising from the Minutes

None which are not covered by matters later in the agenda

4 President's Report

ASGBI have asked the President for a contribution to their Newsletter giving an update of the Associations activities and news. TWJL has accepted this invitation and will write it, to be used in conjunction as part of this report.

TWJL outlined upcoming courses for trainees, including the BAETS Masterclass to be held in March 2009.

The contribution of members to the Association's audit was thanked and members were reminded of the commitment to audit as a condition of continued membership .

GMC Revalidation – the speciality associations were leading on this within their areas of expertise. It was planned that audit would be a major component of revalidation to allow a contribution for knowledge of outcomes.

Mr R Collins reported that Sir Bruce Keogh (Medical Director of NHS) has reported that outcome data will be the most fundamental information for assessing practice and would be necessary by April 2009.

The President reported that the future direction of the audit would be a major component of the 2009 Annual Meeting.

The President reported that the Association has put forward nominations for both ACCEA and for the civil list.

No further questions were asked from the floor.

5 NICE/IOG Implementation

NICE have given guidance within the last year on intra-operative nerve monitoring during thyroid surgery and on thoracoscopic excision of ectopic parathyroid glands. The President thanked those who had contributed to these guidelines.

6 Financial Statement

The summary of accounts were included in the members packs. These were agreed. No changes would need to be made to the current level of annual subscriptions.

7 Election of New Members

In the last year, 12 new full members have been accepted, 6 new associate members increasing the total to 204 members.

8 Audit

Mr Scott-Coombes gave a presentation regarding the future direction of the audit and what has been achieved so far. There will be a more commercial flavour to the audit. Quarterly reports of limited information will be made available to 3 companies and will be cost-orientated providing information for specific questions. The data will continue to belong to the Association and its members. The completed data for 2008 will be collected by the end of April 2009 for the next report. The future reports will be made more relevant to individuals and their own outcomes. So far, the data on over 13,000 procedures has been collected.

Mr Lansdown requested that data may be made available to the public by institution rather than by, or as well as, by individuals.

Mr Collins reported that Sir Bruce Keogh felt that the data made available to the public does not currently need to be individualised but that there was continuing pressure to do so. He stressed the importance of honesty when submitting data.

Prof Krukowski felt that a true picture could only be obtained by submitting data on complications. He advised caution when publishing institution data as in many hospitals, this would equate to individual's data.

Negotiations were continuing with College Council but those surgeons performing endocrine surgery would need robust outcome data and this could only be achieved by being members of their sub-speciality associations.

9 Courses for Trainees

The dates for the forthcoming BAETS/RCS Masterclass in March 2009, the European Surgical Institute and the Hammersmith Endocrine Course in December 2008 were noted.

10 IAES, September 6th-10th, 2009

Dates of this meeting were circulated. Membership of the International Association of Endocrine Surgeons was encouraged and Prof Wheeler, as a Past-President of the IAES would support a major role of the IAES.

11 BAETS Contribution to ASGBI annual meeting, May 13th-15th, 2009

BAETS was again contributing to the meeting of the ASGBI in various ways. The meeting was trying to remain generic to general surgery and topics relevant to General Surgery were being presented as well as submission of endocrine papers and posters.

12 Venue of Future Meetings

2009 meeting of the BAETS will be held in London. A brief outline of the programme was given. The BJS Lecturer will be Prof Henning Dralle from Halle, Germany. A debate will be held in the afternoon with the BTA regarding the role of routine calcitonin measurement in the assessment of all thyroid nodules. The second half of the combined afternoon will be devoted to establishing guidelines on the management of post-operative hypo-calcaemia. The Annual Dinner will be held in the House of Lords.

It was agreed that the 2010 annual meeting would be held in Birmingham and 2011 in Poitiers.

13 Any Other Business

Mr Zammitt felt that there was a role for surgeons to work in joint specialities such as Breast and Endocrine surgery and that surgeons may only contribute to a part of a particular speciality. Prof Wheeler and Mr Harrison supported this approach and this was being discussed in wider spheres including the International Association. They felt this would be driven by the trainees.

The elections were announced of Mr Sadler as Honorary Secretary and Treasurer of the Association, and Mr Palazzo as member of the Association Council with responsibility for surgical Guidelines.

14 Date and Time of Next AGM

Next meeting, November 19th, 2009, St Thomas' Hospital, London. Time to be confirmed.