



SURG - AHEAD

Newsletter of

Monash University Department of Surgery

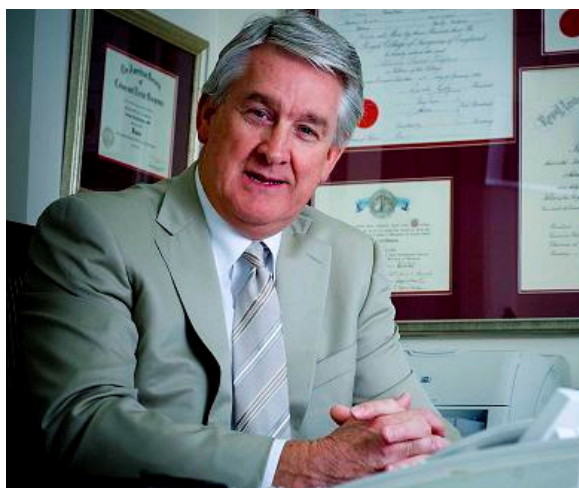
Central Clinical School, Alfred Hospital

Volume 4 Issue 2
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Featuring Monash University Department of Surgery at Cabrini

The Chair of Surgery at Cabrini Hospital was established in 1998, as a first of its kind in the Victorian private medical sector and one of the first in Australia, and as a joint venture between Cabrini Health and Monash University. **Adrian Polglase** was appointed as Professor of Surgery and Chairman of the Cabrini Monash University Department of Surgery with the chair being endowed as the Fröhlich West Chair of Surgery in 2004.

A major role of the department has been to pursue surgical research into diseases of the colon, rectum and anus with a particular interest in cancer.



Head of Department Cabrini

Professor Adrian Polglase MB BS (Hons), MS, FRACS, FRCS (Eng), FRCS Ed, FACS

The department has been principally responsible for establishing the successful under-graduate and post-graduate surgical teaching programs. As part of Cabrini's increasing commitment to under-graduate and post-graduate education the positions of Director of Surgical Education and Director of Medical Education have now been established.

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The Department Of Surgery

Report from

Professor Jeffrey V Rosenfeld

Congratulations to Michael Leung for his new appointment as Honorary Clinical Associate Professor and to Don Esmore for his appointment as Honorary Professor.

I spoke to all the new Residents and Registrars at their Induction at the Alfred Hospital on the 2nd February 2009 to encourage them to undertake surgical research projects during their time at the Alfred and also encourage them to think about undertaking a higher degree such as a Master of Surgery (MS) or Doctor of Medicine Degree (MD) by research.

I have had a number of interns come to me already to ask about whether they should do their research before or after they get into the SET program. This is of course will vary according to the individual but it may be preferable to complete a higher degree once they are in surgical training and if they have done some research, given some presentations and published even without a degree this will strengthen their application to enter surgical training.

We have been contacted by the Monash University Surgical Student Group. These students are keen on embarking on a surgical career when they graduate. I am working with Professor Julian Smith and the Executive of the Monash University Department of Surgery to provide a supportive program to these students.

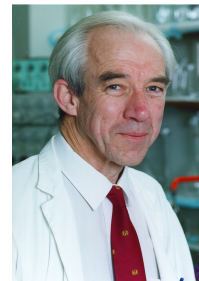


We are already planning to have a hands-on skills morning for them where they can do some knot tying and try out a laparoscopic trainer to see what their eye – hand coordination is like. Discussion with them on the pathway to a surgical career will be done in conjunction with Professor Julian Smith's department at the Monash Medical Centre. You are welcome to be involved with these education programs.

We do have some funds available in the Department of Surgery for research projects undertaken by junior staff. If any of your resident staff are interested in carrying out a project and need some funding they should come and see me and I will see what we can offer.

The Department of Surgery would like to enhance its links and support to all of the surgery departments in the hospital.

Editorial



**Professor
Frank Rosenfeldt**

Research during Surgical Training!

When is the best time to do it ?

With the increasing emphasis on research as a prerequisite for gaining admission to surgical training programs through the SET process there is heightened interest in the appropriate way to acquire research experience. But when should research be undertaken? Should it be as a Medical student through a Bachelor of Medical Science Degree; before surgical training; after admission to the SET program; later in the Surgical Training program or after Surgical Training ?

Over a thirty year experience in research in Australia and some years overseas I have seen many trainees trying to integrate the research experience into surgical training. My conclusion is simple: *early is easier and more successful, later is more difficult and less successful.* Let me give examples. At Monash we have many medical students, (20-30 per year) doing a Bachelor of Medical Science degree which is part of their undergraduate training.

Many of these, perhaps over 30 percent, have an interest in surgery. Generally these students successfully complete their program in a year, obtain a degree (Bachelor of Medical Science), normally publish a paper and make one or more presentations at local, national and even international meetings.

After graduation and before admission into the SET program is a good opportunity to undertake research without the pressure of being in a training program. This option is highly recommended and followed by Dr Peter Chung at the Orthopaedic Research Centre at St Vincent's Hospital. Dr Chung encourages trainees to do their research prior to entering the SET program. He has a highly structured research program with timelines and deadlines for writing of reviews, completing projects and writing a thesis where appropriate.

After admission to the SET program and prior to the major involvement in surgery is another good time for research. At this stage the trainee has less pressure to acquire technical skills and more time to focus on research, however the RACS does not really facilitate this process. Recently we had a trainee (KL) who did one year of a Master of Surgery Program through the Department of Surgery, was very successful in that year obtained a RACS scholarship for the following year, wrote and published a literature review and began his Master of Surgery thesis. However he was accepted into the training program in general surgery and was told that he must immediately cease research and proceed immediately to clinical training.

He had to relinquish his RACS Scholarship, cease his laboratory work program and go to the country to do a variety of surgical jobs well away from the Alfred. With the greatest of difficulty over the next two years he analysed his data, wrote two papers and submitted his thesis. Other examples have been quoted by the members of the MUDS Executive where the College of Surgeons has made it very difficult for trainees to take time off once admitted to the SET program.

Can Research be done later in a training Program ?

This is unusual. Once the trainee has reached senior registrar status, his mentors are keen for him or her to perfect their surgical skills and prepare themselves for the FRACS exams. Few trainees succeed in doing worthwhile research at this stage. After the fellowship, most trainees are looking at going overseas for surgical experience. When they return they then start up their private practice and for personal and financial reasons are unable to take time off to do research.

In conclusion whether a trainee wishes to simply produce research paper or go on to do a Master of Surgery, MD or PhD the difficulty of succeeding increases with increasing years into the surgical training program and the age of the trainee. *Early is easier, later is more difficult.*

Professor Franklin Rosenfeldt

Editor



Continued from page 1

Monash University Department of Surgery at Cabrini

Post-graduate surgical education continues with the ongoing accreditation of Cabrini Health by the Royal Australasian College of Surgeons for advanced surgical training.

The Alan Ahda Evi Selwyn Family Research Scholarship in Clinical Surgery

The 2008 recipient of this research prize is Dr Kaaren Binns, who was awarded this scholarship for her involvement in the research work of the department

Sir Edward Hughes Memorial Clinical Research Prize in Surgery

The Sir Edward Hughes Memorial Clinical Research Prize in Surgery is now in its 11th year. Each year the Research Prize seems to gain more momentum and strength. The Sir Edward Hughes Memorial Clinical Research Prize in Surgery is held annually in October. Surgical trainees who have entered, or intend entering an accredited surgical training program in Australasia, are invited to submit a research project abstract for consideration. From these submissions, 10 finalists are selected to present on the day to the panel of adjudicators. The winner is presented with a commemorative plaque and from the sponsor of the prize Johnson & Johnson Medical a \$6,000 cheque.

Monash University
Department of Surgery Cabrini Staff

Professor Adrian Polglase

MBBS (Hons), MS, FRACS,
FRCS (Eng), FRCS Ed, FACS

Head of Department

Colorectal Surgeon

Mr Stephen Bell

MBBS, FRACS

Senior Lecturer

Colorectal Surgeon

Mr Roger Berry

MBBS, FRACS

Senior Lecturer

Upper GI Hepatobiliary, General Surgeon.

Mr Peter Carne

MBBS, FRACS

Senior Lecturer

Colorectal Surgeon

Mr Martin CK Chin

MBBS, FRACS

Honorary Lecturer

Colorectal Surgeon

Mr Chip Farmer

MBBS (Hons), FRACS

Senior Lecturer

Colorectal Surgeon

Mr Paul McMurrick

MBBS (Hons), FRACS

Senior Lecturer,

Director of Surgical Education

Colorectal Surgeon

Mr Andrew Smith

MB BS, FRACS

Senior Lecturer

Upper Gastro-intestinal
specialist general surgeon,

Mr Roger Wale

MBBS, FRACS

Senior Lecturer

Colorectal and General

Surgeon

A/Professor

Simon Woods

MBBS, FRACS, FCSHK

Honorary Clinical Associate Professor

Medical Director Cabrini Health. Upper G.I General Surgeon.

Honorary Research Fellow

Dr Kaaren Binns

Honorary Clinical Teacher (2008, 2009)

Basic Surgical Trainees**Dr Sheryn Cheah**

Colorectal Pre SET (2009)

Dr Elaine Liew

Upper GI SET 1(2009)

Manager Surgical Research and Projects

Jane McCasker

Clinical Assistant Research Nurse

Dawn Murphy

Helen White (maternity Leave)

Clinical Research**Colorectal Cancer Database**

The Monash University Collaborative Bowel Cancer Data-Base Program is almost complete. This will be a multi centre data collaboration involving Cabrini Health, The Alfred Hospital, Monash Medical Centre, Dandenong Hospital, Box Hill Hospital and Frankston Hospital. This unique, browser data-based colorectal data collection will underpin major collaborative research between the three Monash University teaching hospitals for many years to come.

Cabrini- "A Bowel Cancer Free Zone" Intention to screen for bowel cancer among hospital employees

This study investigated the reasons why employees of Cabrini Health are interested/not interested in screening for bowel cancer. An initial survey found that employees knew a lot about bowel cancer but they were not confident in the ability of the Faecal Occult Blood test to detect cancer. Following information sessions, 150 test kits were given out to staff and 123 have been completed and returned for processing so far. This study has show that bowel cancer screening can be successful in the work place.

Clinical Research

Randomised comparisons of protocols of equipment management and cleaning for rigid sigmoidoscopy

There are currently no adequate guidelines for ensuring the cleanliness and safety of reusable sigmoidoscopy equipment. Our department has instituted a prospective trial comparing outcome and safety with the use of different clinical techniques for reusable elements of sigmoidoscopy and disposable versus reusable air insufflators as well as the use of commercial air filters. This research project is now complete and the manuscript has been submitted for publication.

Optiscan Pilot Study

Our ongoing relationship with Optiscan to assess the emerging confocal technology where the mucosa of the gastrointestinal can be examined in vivo at 1000x magnification continues. The project is currently focusing on the large bowel but in addition application of the technology to early diagnosis of oesophageal cancers is being investigated. The Multicentre trial on the use of mesh to augment hiatal repair is an ongoing prospective collaboration between Cabrini Health and Flinders University/Royal Adelaide hospital comparing suture repair alone of large hiatus hernias, with repairs that compare sutures coupled with either absorbable mesh or non-absorbable mesh.

Management of Anal Fissures

A retrospective comparison of lateral sphincterotomy Vs botulinum toxin injection treatment for chronic anal fissures. This study will be the largest of its type to date.

Mechanisms of metastases in Colorectal Cancer.

This is collaborative research between Cabrini Monash University Department of Surgery and the Ludwig Institute for Cancer Research. Dr Lara Lipton is co supervising the project, which correlates the genetic make up of secondary tumours with their susceptibility to chemotherapy treatment.

Awards and Prizes

D\$ Rosengarten Surgical Trainee Research

Prize 2008 Presentations.

This annual event took place on Saturday 6th December, 2008. We have been fortunate to obtain sponsorship from Johnson & Johnson Medical for a prize of **\$1,000** for the winning project. This year the external adjudicator was Professor Stephen Chan, Western Hospital.



Pictured above : Dr Edwina Moore, External adjudicator Professor Stephen Chan and Dr Tony Goldschlager.



Dr Edwina Moore, Mr Andrew Rosengarten representing Mrs Candice Rosengarten, and Dr Tony Goldschlager.

The award was shared by Dr Tony Goldschlager and Dr Edwina Moore the runner-up being Dr Kareem Marwan.

Rosengarten Surgical Trainee Research Award

A blast from the past: the man behind the Award



Mr Sam Rosengarten

**David Rosengarten
MBBS (Melb) FRACS
Former Chairman of Surgery and
Clinical Support
Head of Vascular Unit
Alfred Hospital
Died Hawaii February 20, 1994
Aged 56**

Born on October 27, 1937 to Bunny and Sylvia Rosengarten, Sam, as he became known, was educated at Grimwade House before moving to Melbourne Grammar Senior School. He matriculated in 1955 with first class honors in physics, chemistry, pure mathematics and applied mathematics and was dux of the school.

Apart from his academic excellence his energy and enthusiasm for extracurricular activities were focused on football and cricket.

He proceeded to Melbourne University with scholarships from the state and commonwealth and a scholarship to trinity college where he became a resident. Once again in addition to his medical studies, he found time for many other activities including a stint as a goalie for one of Melbourne's ice hockey teams.

Two years of residency at the Alfred Hospital in 1962-63 were followed by a year as demonstrator in the Department of Anatomy at Melbourne University, where he obtained his primary Australasian Fellowship. His two years' registrar posts at the repatriation General Hospital and the Alfred saw him obtain his Australasian Fellowship.

He then traveled overseas for future experience. For three years he was based at the Royal Post-graduate Medical School Hospital at Hammersmith after spending three months on the Alfred Hospital Australasian Civil Surgical Team at Ben Hoa in Vietnam.

He returned to the Alfred Hospital as an Assistant General Surgeon and as a Lecturer to the Department of Surgery at Monash University. With typical energy he threw himself into the clinical and academic areas and into undergraduate and post-graduate teaching.

Sam was closely involved in the formation of the Alfred Hospital Vascular unit in 1974, probably the first such specialized unit in Australia. He was appointed its Head in 1989, a position he held until his untimely death on February 20, 1994.

His involvement in Alfred Hospital has been legend. He was concurrently Chairman of the Audit Sub-committee of the division of Surgery, member of the Operating Theatre Executive, member of the VRGM Implementation Committee, member of the Management Executive Committee, member of the Patient Care Review Committee, and member of the Ambulatory Services Management Group.

He previously held positions as member of the Alfred Hospital Ethics Committee, member of the Alfred Hospital Clinical Review Sub-committee, member of the Alfred Hospital Medical Records Sub-committee and membership of the Alfred Hospital Pharmaceutical and Therapeutics Advisory Committee.

He was supervisor of the Surgical Training at the Alfred Hospital, a member of the board of examiners of Primary Examination for the Australasian College of Surgeons, member of the Regional Training Sub-committee of the RACS and Secretary/ Treasurer of the Australian and New Zealand Chapter of the International Society of Cardiovascular Surgery. Space does not permit me to list his membership and involvement in many other professional bodies.

Although it hardly seems possible, in addition he also became an enthusiastic and hard working member of the Rotary : Joining the Toorak branch in 1981, serving on its board from 1984-86, and becoming President in 1985.

So much more could be written about this remarkable man. His great intelligence, enormous enthusiasm, deep compassion, loyalty and above all commitment to his professional and the community have been rarely matched.

BIOGRAPHY



DONALD S. ESMORE A.O. M.B.B.S., F.R.C.S., - EDIN

In 2008 Donald Esmore was appointed as a Honorary professor in the Department of Surgery of Monash University.

Professor Donald Esmore was born in 1949 and raised in Essendon. After secondary schooling at Essendon High School he attended the University of Melbourne, graduating with an MBBS in 1973.

In subsequent years, he held positions ranging from intern to senior resident at the Preston and Northcote Community Hospital, Melbourne at which time he saw surgery as his career.

In 1976 he moved to Sydney in 1976 to commence his surgical training, holding a number of positions in general and specialist surgery over the ensuing five years.

In 1981 he was appointed as the accredited trainee in Cardiothoracic Surgery at St. Vincent's Hospital in Sydney, being mentored by Dr. M. Shanahan and Dr. Victor Chang. In 1983 he went on a fact-finding tour of Transplant Centres in the UK and USA, being invited to return to Cambridge, in 1984 as the Senior Registrar in Cardiothoracic and Transplant surgery, a position he held for 18 months.

In June 1985 he returned to St. Vincent's Hospital, in Sydney as a staff cardiothoracic surgeon, establishing the combined heart/lung transplant programme and at that time developing a fledgling interest in artificial heart technology.

Professor Esmore was appointed as the Director of Heart/Lung Transplant Programme at Alfred in March 1989. His current appointments are the Director of C.J. Officer Brown Cardiothoracic Surgical Unit and Director of the Artificial Heart Programme and the principal international investigator for the Ventrassist left ventricular assist device.

Professor Esmore has had a rewarding and fruitful career. He has a regular commitment to the Undergraduate Teaching Programs for both medicine, and nursing as well as to trainee cardiothoracic surgeons. His professional highlights include the establishment of the combined Heart/Lung Transplant Programme at the Alfred Hospital, Melbourne and being instrumental in the establishment of the international clinical trials of the Australian-designed and built artificial heart the Ventrassist left ventricular assist device, used for the treatment of patients with end-stage heart failure. He has lectured and published extensively on clinical heart and lung transplantation and surgical techniques and the use of Mechanical Circulatory Support Devices for the treatment of heart failure.

In 2002 he was awarded an Order of Australia and in 2003 the Prime Minister's Centenary Medal both for his contributions to cardiothoracic surgery, transplantation and mechanical circulatory support.

Did you know that an adult human heart beats over 100,000 times a day?



Honorary Clinical Associate Professor

In January, 2009 Mr Michael Leung was appointed as a Honorary Clinical Associate Professor in the Department of Surgery. Michael graduated MBBS from the University of Melbourne gaining several honors during his course. He spent 1979 as an intern and 1980 as a JRMO at St Vincent's Hospital before returning to the Anatomy School in 1981 as a Senior Prosector and completing Part 1 FRACS the same year. He returned to St Vincent's Hospital in 1982 as surgical trainee. He was accepted into the Plastic Surgery Training Program in 1984, and continued his training at the Victorian Plastic Surgery Unit, Peter MacCallum Hospital, Royal Children's Hospital and New Zealand's Hutt Hospital in Wellington. He returned to St Vincent's Hospital in 1987 and completed the FRACS in Plastic Surgery. Michael was awarded a Plastic Surgery Fellowship in 1988 to Singapore General Hospital and also to the Kantonsspital Aarau, Switzerland. He returned to Melbourne in 1989 and was appointed plastic surgeon at Bayside Health and Southern Healthcare Network. Michael has been a plastic surgeon at The Alfred Hospital since 1989 and in 2002 Michael was appointed Head of the Plastic Surgery Unit,

His ongoing research activities include the CATNAP Study Calcitonin & anti-neuroleptic trial for Neuroma Amputee patients, and a study investigating perioperative anticoagulation therapy in minor skin surgery. The Plastic Surgery Unit, in conjunction with the Victorian Melanoma Service, is participating in the MSLT II Trial, a multi-centre trial to study the effect of sentinel node biopsy in the management of malignant melanoma. The Unit is also a participating unit in the Innovative Approach to design a new Osseointegrated implant for Transfemoral Amputees with better resistance to implant fractures.

BIOGRAPHY



Mr Michael Leung MBBS, FRACS

Michael's many professional achievements include appointment to the Court of Examiners for Plastic & Reconstructive Surgery since 2004 and as a Senior Examiner from May 2009. He acted as the Convener for the Plastic Surgery Section in the ASC 2004, and was the Scientific Convener for the ASC 2008 in Hong Kong. Michael is also a member of the Surgical Committee of Interplast Australia and undertakes regular trips to perform and teach Plastic Surgery in developing countries.

Michael has been an Honorary Senior Lecturer in the Department of Surgery, Alfred Hospital since 2007 and is involved in a wide range of teaching and training programs for medical students, junior medical staff and allied health professionals, including hands on training sessions, various lectures and presentations.

Did you know ? That the Human Brain Is Too Efficient

Aoccdmrig to a rscheearch at Cmabrigde Uinervtisy, it deosn't mtttaer in waht oredr the ltteers in a wrod are witren, the olny iprmoatnt tihng is taht the frist and lsat ltteer be in the rghit pclae. The rset can be a toatl mses and you can sitll raed it wouthit a porbelm. Tihs is bcuseae the huamn mnid deos not raed ervey lteter by istlef, but the wrod as a wlohe.

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- 30 Florentius Koech, MB ChB, MMed (GSurgery),* Helen M. Ackland, MHSc,†‡ Dinesh K. Varma, Owen D. Williamson, MBBS, GradDipClinEpi, FRACS, FAOrthA,‡ and Gregory M. Malham, BSc, MB ChB, FRACS Nonoperative Management of Type II Odontoid Fractures in the Elderly
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Book Chapter

Rosenfeld JV.
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In: Essentials of terror medicine.
Editors: Shapira S, Hammond J, Cole LA.

We are on the Web [http://
www.med.monash.edu.au/surgery/
alfred/](http://www.med.monash.edu.au/surgery/alfred/)