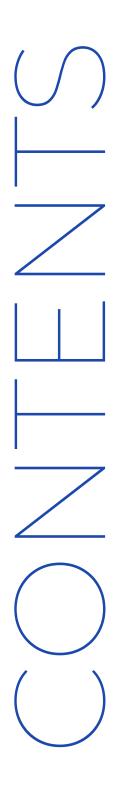




Table of Contents



02 - 04

President Report

05 - 06

Secretary Report

07 - 08

Treasurer Report

09 - 10

NBSR Report

11 - 12

Education Report

13 - 14

Annual Scientific Meeting

Committee Report

15 - 17

IHP Report

18 - 19

Trainee Report

20

Research Report

21 - 22

Patient Safety Committee Report

23

Acknowledgements

PRESIDENT REPORT

James Byrne

BOMSS is the recognised professional body representing those treating people living with severe obesity in the UK and Republic of Ireland. It has been my pleasure and honour to act as president of BOMSS over the last 12 months, and I look forward to seeing as many of you as possible in Harrogate for our Annual Scientific Meeting in June. I am enormously proud of the society and specialty we have collectively and methodically built and grown over the last 20 plus years.

BOMSS' vision is access to safe and effective treatment for people living with severe and complex obesity across the UK and Republic of Ireland. As we approach our Annual Scientific Meeting, we can all reflect on where we collectively are. Whilst there is cause for celebration in many areas, we do also face challenges and I have tried to summarise these below.

Access to treatment

This is our number one challenge. The UK has the greatest prevalence of severe obesity in Europe and we currently perform approximately 4,500 NHS procedures annually, with a further 4-6,000 procedures in the private sector annually. Difficulty accessing NHS treatment and the cost of private surgery in the UK creates a significant unmet need, currently being met by 8,000+ patients travelling abroad every year primarily to Turkey where surgery is usually available at an incredibly low typical cost of £2,500. When faced with the challenges of accessing NHS care including referral into specialist weight management services and waiting lists of 2 years or more, it is easy to see why this might seem like a logical option. France has a similar but less obese population and currently performs circa 45,000 procedures annually.

Whilst many who travel abroad are apparently happy with early outcomes of surgery the UK government has issued a travel warning for those considering surgery in Turkey due to the number of reported deaths, and all of us in clinical practice deal with a steady stream of arising complications such as leakage, anatomical abnormality, untreated hiatal hernia and nutritional/follow up problems.

Bariatric surgical tourism is not in itself new, but what is new is the number of patients and the apparent frequency and pattern of complications. Our challenge is to enable our services to treat our patients.

Engagement with NHS England, Commissioning boards and other stakeholders is key to improving access and we have been working on this with Richard Sloggett who will share in the ASM opening session where we are, our progress to date and proposed next steps. We invite your thoughts and support to help us create an exemplar service that mitigates the need to travel.

PRESIDENT REPORT

Improving our current levels of activity will help to improve access, although for many is extremely challenging. Our adoption of high throughput lists and day case surgery in selected cases together with best practice developed in exemplar centres in the UK and the Netherlands will move the dial, deliver increased volumes and demonstrate what we can achieve with appropriate resource and support. We are developing pathways and resource with colleagues from GIRFT, BADS, and SOBA who will also be speaking at our ASM this year.

Anti Obesity medicines

AOMs are game changing for people living with obesity and those caring for them, including us. The evidence base for indications and outcomes of GLP1- agonists, GIP agonists and newer classes of drugs is astonishing. Provided the NHS can figure out how to deliver these medications, they will profoundly improve the health of the nation and go some way to removing the pervasive stigma of obesity. I sincerely believe that these medications are not a medium or long term threat to obesity surgery and there are as yet many unanswered questions relating to their long term use, the off ramp and other aspects including cost. Currently available drugs are not as effective as surgery for many of the patients we treat, and the benefits of AOMs described have been recognised by us as benefits of surgery for many years.

Research

By-Band-Sleeve is a really powerful evidential tool that will inform decision making for patients, clinical teams, the broader NHS and the evidence base for bariatric surgery. Our next step is to ensure that this evidence is used to support NHS decision makers and commissioning priority setting. You as our members have delivered this study and created this evidence. Our specialty is intensely research active, testing novel interventions and leads a great variety of other important research that will help to shape delivery of care for our patients whilst on their 2 year treatment pathway and importantly after exit back into primary care.

Primary care

The GP Hub on our website is a major achievement and is internationally recognised with a number of professional bodies overseas keen to adopt and edit for their own populations. Building on this we need to continue informing and educating our primary care colleagues about the options and benefits of treatment of severe obesity, both before surgery and then from 2 years post procedure when they return to primary care.

National Bariatric Surgery Registry

Through the NBSR we rigorously document all of our NHS activity and outcomes and through our consultant outcomes publications these data are easily accessible to all. Serious complications arising from bariatric surgery amongst our members are now uncommon and mortality is rare. We currently capture approximately 5,000 self funding bariatric procedures per annum and intend to increase these numbers to closer toward 100% of cases in order to provide assurance to our patients, ourselves and healthcare providers of our activity and outcomes.

PRESIDENT REPORT

National Institute of Clinical Excellence

We have contributed to NICE guidance both through our expert advisors, and also through BOMSS response to NICE guidance when issued in draft form, including Obesity: Identification, assessment and management (CG189), Endoscopic Sleeve Gastroplasty (IPG783), Semaglutide (TA875) and Setmelanotide (ID3947) in the last 12 months.

<u>Association of Upper GI Surgeons</u>

Having secured a final written agreement, our financial separation from AUGIS is now complete. We look forward to working with our AUGIS colleagues in areas of common interest for example training the next generation of OG, HPB and bariatric surgeons. We also need to ensure that both upper GI surgeons and others practising in the field of emergency general surgery are appropriately trained in the assessment of bariatric patients presenting urgently.

Your council are unsung heroes and work hard to deliver all of the above and more, and we are indebted to each and every one of them for the efforts they make on our collective behalf as a charitable act and in their own time. When new or vacant posts arise do please consider applying.

I would particularly like to thank my executive colleagues, Ahmed Ahmed, Kamal Mahawar, Omar Khan and also Vinod Menon as chair of trustees for their support, wise counsel and advice over the last 12 months. I would also like to thank all of our colleagues at EBS who administer the affairs of our society so effectively and efficiently and in particular Kerri Smith who for most of you is your point of contact with BOMSS.

Finally I would like to thank you our members for supporting our society. It is you who make our society what it is and deliver life changing surgery and amazing care to our patients day in and day out. Please feel free to contact us directly via info@bomss.org.

Best wishes,

James Byrne

Jim Byrne

President, BOMSS Council of Management



SECRETARY REPORT

Ahmed Ahmed

It is a pleasure to report to you, our members, and to welcome you to our Annual Scientific Meeting, held for the first time in Harrogate this year. At the time of writing, we have 311 registered attendees and 24 sponsors. I would like to take this opportunity to especially thank our industry partners Boston Scientific, Ethicon, Medtronic and WL Gore for their ongoing support which has allowed our society to flourish.

It has been an exciting last 12 months for BOMSS building further on the foundations of our charity, although enormously challenging times for the NHS battling ongoing industrial action and professional unrest. We are some way off (our vision) of equitable access to safe and effective care for people living with severe and complex obesity across the UK. We are continuing to engage with NICE, the NHS and collaborating with other external bodies so that our and our patients voices are heard. We are immensely grateful to you and colleagues on council for all of the support and work that has been done to enable us to grow and thrive as a professional body.

Our charity is thriving with a total membership of 541, including 184 Consultants, 215 IHPs, 88 trainees, 20 affiliates and 31 students. This level of membership reflects the hard work of council and your President Jim Byrne in particular, and is supported by a superb secretariat at EBS, with Kerri Smith our primary point of contact. We also now have a mailing list of over 1,670 contacts spread all around the world indicating our broad reach.

We have welcomed the following newly elected members to council in the last 12 months:

- Omar Khan Chair of NBSR Committee
- Ken Clare PPI Lead
- Naiara Fernandez-Munoz IHP Nurse Lead
- Emily McBride IHP Psychology Lead
- Vanessa Osborne IHP Dietetic Lead
- Helen Parretti Re-elected as GP Lead
- Alex Miras Medical Physician Lead
- Ahmed Ghanem Trainee Representative
- Andrew Robertson Consultant Surgeon Representative
- Chetan Parmar Educational Lead

I would also like to take this opportunity to thank our demitting council members for all their hard work and contributions:

- Sherif Awad former Educational Lead
- Roxanna Zakeri former Trainee Representative
- Emma Shuttlewood former IHP Psychology Lead
- Sally Abbott former IHP Dietetic Lead

SECRETARY REPORT

In addition to the NBSR, our ASM and educational activity during the year BOMSS is also engaged in other roles:

- Speaking with Department of Health on the risks of bariatric tourism and how to try and reduce the unfortunate complications we all see.
- We are professional stakeholders for NICE guidance for Obesity management and have been involved with a number of NICE consultations including: Setmelanotide, Tirzepatide, obesity clinical assessment and management and endoscopic gastric plication.
- We continually strive to engage with politicians to drive the penetration of bariatric surgery in the UK which sadly remains much lower than other countries in Europe. As such we have engaged with Richard Sloggett, former Special Adviser at the Department of Health and Social Care and founder and programme director of the Future Health Research. We are working on creating key strategies that will appeal to politicians to tackle the UK obesity pandemic and allow us to use all treatments for the benefit of our patients.

Finally we are immensely grateful to you our members for your vote of confidence in your society through your membership and subscription. We have clearly iterated our vision, mission and values and will build on these further over the coming 12 months. All council members welcome your thoughts, ideas and suggestions as to how we continue to support you, our clinical specialty and patients so please feel free to pull us to one side in Harrogate or contact us through Kerri at info@bomss.org.

Ahmed Ahmed

Secretary, BOMSS Council of Management



TREASURER REPORT

Kamal Mahawar

Dear Friends,

This has been another solid year for BOMSS as we look forward to an exciting conference and training day in Harrogate in June. With our financial negotiations with AUGIS amicably concluded, I am pleased to report that we are in a reasonably healthy financial situation.

We made a small profit of £22,249.50 from ASM 2023 and I would like to thank our corporate partners for that. It would simply not be possible to organise our conferences without their help and support. Our membership income for year-end 31/10/23 was £73,172.93.

As you know NBSR relies heavily on contribution from NHS trusts for its viability. With help from Ms Kerri Smith (BOMSS Secretariat), Prof. Chris Pring, and Ms Emma Rose McGlone, we were able to collect £61,500 from NHS trusts for the last round of clinical outcomes publication. Thank you all for your help in encouraging your management to make this contribution. However, very few trusts did not pay and I know Prof. Vinod Menon is thinking of ways to encourage them. Prof. Omar Khan is also looking at other funding streams for the future sustenance and viability of the NBSR.

Prof. Jim Byrne, Julia, and I have been discussing how we can maximise use of idle funds in our bank accounts as well as fully utilise FSCS protection offered by the government. Julia is going to look at some higher interest accounts with different banks to diversify our deposits as well as make a small income through interest.

Our membership numbers have reached a healthy plateau (but still growing steadily) and following are the numbers as of now. (Numbers Courtesy Ms Kerri Smith, BOMSS Secretariat)

Membership Type	Membership numbers 31 st March 2023	Membership numbers 31st March 2024
UK and Ireland Consultant Surgeon	177	183
IHP/Other Bariatric Professional	184	209
Affiliate Membership International (Consultant)	13	11
Non-Clinical Affiliate	10	8
UK and Ireland Post- Graduate Trainee	63	86
Undergraduate Student	17	28
Honorary	1	3
Total:	465	528

TREASURER REPORT

We have also recently concluded a feedback exercise from our membership. Thanks for your engagement with that. It seems generally you are happy with the direction of travel and you've also made some suggestions which have been duly noted and are being looked at by the executives and the council.

Above should give you a rough idea of where we are as a society with regards to finances. However, if you need any more information, please do not hesitate to write to me or ask me at our annual general meeting. Look forward to seeing you all in Harrogate.

Kamal Mahawar

Treasurer, BOMSS Council of Management



NATIONAL BARIATRIC SURGERY REGISTRY (NBSR) COMMITTEE REPORT

Omar Khan - NBSR Committee Chair

This is my first report as Chair of the National Bariatric Surgical Registry (NBSR) so I must start by paying tribute to the achievements of all the previous chairmen in the development of this Registry. Since its inception the NBSR has evolved from an audit tool to an internationally recognised exemplar of excellence in promoting transparency in bariatric surgical outcomes. The credit for this lies with a large number of individuals but I would like in particular to thank my immediate predecessor Kamal Mahawar for his leadership and his development of sub-committees focused on specific areas (whose reports are listed on the next page).

Over the next two years our strategic focus will be on the following areas:

- 1. Private Practice One of the trends seen in the Registry post-pandemic has been a significant increase in proportion of bariatric surgical activity performed in the private sector. Although this data has been recorded on the Registry we have not, to date, produced a Consultant outcome report similar to that seen in the NHS. However given the increasing volume of private sector activity and the fact that this data will be published in some form under the PFIN mandate, we are currently engaging with both PFIN and private hospital providers to use data entered by Consultant to produce a validated and publically available report on private sector bariatric activity.
- 2. NBSR Version 3- Given the rapid changes in bariatric surgical treatment options we are currently undertaking a major exercise to update the data captured in the Registry. The focus of this latest revamp will be to add novel endoscopic procedures (eg endoscopic sleeve gastrectomy) and we are also looking at ways of working with other bodies (eg the National Emergency Bariatric Surgical Audit) in order to be able to present a more comprehensive summary of all aspects of bariatric activities in the UK.

None of this activity would have been possible without the hard work of the individual committee members and I would like to thank all of them for their amazing contribution over the year. Finally I would also like to thank all BOMSS members for inputting and sharing their data allowing us to create a Registry we can all be rightly proud of.

army

Professor Omar Khan Chair, National Bariatric Surgery Registry On behalf of the NBSR Committee



NATIONAL BARIATRIC SURGERY REGISTRY (NBSR) COMMITTEE REPORT



Audit Subcommittee Report Subcommittee Lead - Waleed Al-Khyatt

NBSR is probably the most reliable source of data on Bariatric and Metabolic Surgery (BMS) in the United Kingdom (UK). It is also an excellent data source for auditing practices and outcomes of BMS in the UK. On behalf of the NBSR committee, we are pleased to announce a new policy for audits using NBSR data. Audit proposers will find the following documents useful.

- 1. NBSR Data Policy
- 2. NBSR Data Audit Proposal Form
- 3. NBSR Memorandum of Understanding

<u>Click here</u> to access these documents. Please contact BOMSS Secretariat at <u>info@bomss.org</u> should you need any further information.



CAG Report

External Advisor - Oliver Old

Clinical Outcomes Publication (COP) is an NHS England initiative that aims to publish quality measures at the level of individual consultant, team and unit level. This programme is managed by the Healthcare Quality Improvement Partnership (HQIP). NBSR works with HQIP to ensure our data on outcomes from Bariatric surgery form part of this key publication series. We also submit an annual review to the Confidentiality Advisory Group (CAG) to comply with regulatory requirements for holding patient data. We are in the process of applying for a change in status to allow research to be performed using the NBSR dataset.



Reports Subcommittee Report Subcommittee Lead - Andrew Currie

The Reports subcommittee has been focussed on the delivery of the Annual Consultant Outcomes Publication (COP) since the last ASM. This annual report allows us, uniquely for a national bariatric surgery registry, to place procedure and outcomes information into the public domain. The 21/22 report has been published and we are hopeful that the 22/23 report will be published by the time we meet in Harrogate. Again this year, we have contributed to the new aggregated data IFSO registry to demonstrate how UK bariatric-metabolic surgery compares to our international counterparts. We are also working with other national registries within IFSO to assess the feasibility of randomised trials nested within the registries. We have been able to respond to individual contributors and Trust quality assurance teams to provide timely responses regarding data entry questions and we are always open to questions, suggestions and concerns via info@bomss.org. We have worked with Paul Chesworth and Nadya Isack to look at our the annual outcomes website is presented and they have helped us to make It more accessible. This will ensure that the annual COP website remains a vital resource for people with obesity who can look to the NBSR data when considering place and person for their bariatric-metabolic surgery. We want to again thank you for your excellent engagement with the NBSR this year, as with your valued contribution and data entry we can continue to make the NBSR one of the world's leading bariatric surgery registries.

EDUCATION REPORT

Sherif Awad - Professional Education Lead

This will be my last yearbook entry as my tenure as Professional Educational Lead for BOMSS has come to an end. I will, however, continue in my role as Trustee of BOMSS CIO.

In January 2021 (during COVID), we launched free openly accessible BOMSS Educational Webinars and Journal Clubs. Despite an anti-social 8pm time slot and strong competition from international sports fixtures, homework duties, family dinners and bed time routines, these webinars have enjoyed fantastic support and attendance figures. Since inception 8950 participants have registered for the 33 Journal Clubs and 31 Educational Webinars we have delivered to date (as of end of Feb 24). These webinars were recorded live and (where speakers have given consent) are uploaded on the BOMSS Youtube page (https://www.youtube.com/@bomss5726/featured) for anyone to view.

The monthly Journal Club Webinars (2nd Wednesday at 8pm) discuss relevant up to date publications in the field of Obesity. The Journal Clubs are hosted by multidisciplinary members of different Bariatric Centres around the UK with the aim of showcasing MDT members from different units. Two papers are discussed - an IHP and a surgical/medical paper. Ahmed (BOMSS Trainee Rep) is doing a great job with scheduling these journal clubs. A huge thank you to the units who have participated to date. If you would like your Unit to participate in a Journal Club please email info@bomss.org.

The monthly Educational Webinars (4th Wednesday at 8pm) are delivered by eminent International and National Speakers with a Q&A at the end to allow attendee participation. Again I would like to thank our guest speakers for participating in these high quality Educational Webinars. If you have suggestions on topics or speakers please email info@bomss.org.

BOMSS has endorsed numerous industry-supported and stand-alone bariatric trainee courses with cadaveric, hands-on operating and robotic elements which provide excellent opportunities for our trainees. BOMSS continues to advise on Royal College of Surgeons of England Accredited Bariatric Surgery Training Fellowships in the UK. We are also looking at launching short-term exchange fellowships with International high-volume Bariatric Centres.



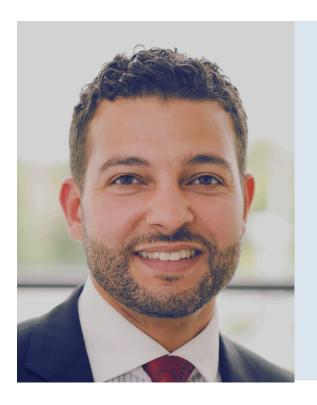
EDUCATION REPORT

I have enjoyed the past 3.5 years immensely and want to thank Council colleagues for their support in running these sessions and Roxanna and Ahmed (BOMSS Trainee Reps) for organising and co-chairing the journal clubs. Thanks also to our expert Speakers and attendees (many of whom were international) for giving up their evenings to participate. These activities have helped raise the profile of BOMSS, enabled CPD at a time when travel to conferences was difficult and helped introduce BOMSS members to bariatric MDTs from England, Wales, Scotland and Ireland, hopefully facilitating networking and collaboration between our Bariatric units. Finally, thanks to our BOMSS Corporate Sponsors and EBS (Matt and Georgia) for their help in delivering such professional content.

I look forward to seeing you at the BOMSS 2024 ASM in Harrogate. If you have any educational ideas you would like BOMSS to support, endorse or advise on please email info@bomss.org.

M.X

Sherif Awad
Professional Educational Lead and Trustee, BOMSS Council of Management
Consultant Upper GI, Obesity and Laparoscopic Surgeon, East Midlands Bariatric and
Metabolic Institute (EMBMI), Royal Derby Hospital, Derby.



ANNUAL SCIENTIFIC MEETING COMMITTEE REPORT

Chetan Parmar - Annual Scientific Meeting Committee Chair

The Annual Scientific Meeting (ASM) chair post was a new position introduced when BOMSS CIO was formed as an independent charity. It was an honour to be elected as the first chair of the new BOMSS CIO.

I took up the role during the challenging time of the covid pandemic. Amid the uncertainty, the council had planned to organise our first ASM. We organised a hybrid meeting at the University of Oxford in 2021 under the Presidency of David Kerrigan, which had a tremendous response thanks to all the delegates. The following year the 2022 ASM was organized in beautiful Brighton which saw an increase in the number of delegates. Every year we have grown from strength to strength. The 2023 ASM in Birmingham had a record number of abstract submissions and registrations and a footfall of over 434 delegates. The strength of the program has been the multidisciplinary topics, relevant to the current scenarios like bariatric medical tourism, day case surgery, pharmacotherapy, endoscopic and robotic surgery to name a few.

Under the vision of Vinod Menon, our relationship with the Obesity and Metabolic Surgery Society of India (OSSI) has become well established and is growing ever stronger. Vinod, James, Dimitri and I visited India for the OSSI ASM and welcomed their members into our ASM. We hope for a similar collaboration from our liaison with ASMBS in the future.

We had the pleasure of strengthening our relationship with the International Federation for the Surgery of Obesity and Metabolic Disorders (IFSO) and have had their presidents Scott Shikora and Gerhard Prager join our meeting. We are also proud of our strong collaborative bonds with international faculties from the USA, Europe and Asia. Training days were organised with support from the local team along with the trainee lead each year. These have been very well received with strong positive feedback. We appreciate the constant support from the industry to make this possible.

The ASM is about teamwork. It was only possible due to the immense support of the IHP council members, especially Sally, Emma and Helen. All council members were supportive and gave valuable input which enriched the program as a whole. Organising the meeting is an expensive affair, and I would like to take this opportunity to thank our corporate partners and sponsors for their faith in our organisation. Also, a shout out to the EBS team including Fran, Jenny and Kerri who were instrumental in running the show.

ANNUAL SCIENTIFIC MEETING COMMITTEE REPORT

Besides the scientific exchange, the ASM has been an excellent opportunity to meet and make friends from around the country, exchange ideas, knowledge and networks. Every year we encouraged representation from Wales, Scotland and Northern Ireland.

I am immensely grateful to all the delegates and faculties for making the ASM a remarkable success over the last 3 years. We look forward to seeing you all in Harrogate for ASM 2024 which looks promising already.

I am pleased to announce that I have been elected as the Professional Educational lead for BOMSS from June 2024. I am looking forward to this opportunity to strengthen our society, form collaborative educational activities and raise awareness for the disease of obesity with the aim of serving our patients.

Please feel free to contact me at the Harrogate meeting or anytime via info@bomss.org.

Chetan Parmar

Annual Scientific Meeting Committee Chair, BOMSS Council of Management



INTEGRATED HEALTH PROFESSIONAL (IHP) REPORT

Vanessa Osborne, Dr Emily McBride, Naiara Fernandez-Munoz, Dr Helen Parretti - IHP Council Members

This has been a year of change for IHP council members as Sally and Emma demitted from council and three new IHP council members have been elected.

First, some messages from Sally and Emma -



It has been an honour to serve in my role as IHP Council Member for the past 3 years. I have really enjoyed being connected to and learning from other dietitians, psychologists, physiotherapists, nurses and physicians working in bariatric surgery from across the UK. I had the privilege to meet many of you at our annual ASM meetings in Oxford, Brighton and Birmingham and looking forward to the meeting in Harrogate, where I will be there "off duty" as a delegate! I am proud that we now have council roles to represent each of the IHP professions from this year, and would like to especially extend a very warm welcome to Vanessa Osborne who has been elected as the IHP Dietetic Representative on council to continue work representing dietitians working in bariatric surgery.



I have thoroughly enjoyed being part of the BOMSS Council of Management for the last three years and am thrilled to be handing over the mantle to Dr Emily McBride who has been elected as IHP Psychological Representative on council. Working with Sally, Helen and all the other fantastically passionate, competent and knowledgeable council members has been one of the highlights of my career so far and provided ample opportunity to extend my professional knowledge and skills. I am incredibly proud of what Helen, Sally and I have achieved over this time and our roles in supporting BOMSS to build a truly multidisciplinary organisation. I have high hopes for the continuation of this great work and look forward to supporting from the sidelines.

INTEGRATED HEALTHCARE PROFESSIONAL (IHP) REPORT

Welcome to our new IHP council members -

Vanessa Osborne - Dietetic Lead

With 11 years clinical experience within weight management and bariatric services, Ness now works as a senior specialist dietitian within the high-volume bariatric unit of Sunderland Royal Hospital.

She currently sits on the British Obesity and Metabolic Surgery Society (BOMSS) council as the IHP Dietetic lead and is a member of The Association for the Study of Obesity. Ness was formerly in the training and education role for the Obesity Specialist Group Committee of the British Dietetic Association, however has now stepped into the bariatric liaison role. She is currently contributing to the Bariatric Surgery chapter of the Manual of Dietetic Practice (7th edition).

Working as a team lead in an integrated multi-disciplinary service, she understands the importance of professional representation and how different disciplines play a key role in optimising safety outcomes and progression within the service. Ness prides herself on communication skills in motivational interviewing and behaviour change, and has a passion for patient-centred care.

Dr Emily McBride - Psychology Lead

Emily is a clinical academic Health Psychologist and Behavioural Scientist passionate about obesity management and prevention. She splits her time between NHS practice as Principal Health Psychologist in Bariatric Surgery at Lewisham Hospital, and academia as a Clinical Lecturer at King's College London. She has research streams underway in psychological aspects of bariatric surgery and obesity prevention and regularly publishes in peer-reviewed journals. She has held policy roles such as for the Department of Health and Social Care and the British Psychological Society.

Naiara Fernandez-Munoz - Nursing Lead

Naiara has worked as a qualified nurse for 15 years, starting her career in Spain and moving to the UK/ NHS in 2012. With 7 years' experience in the North London Obesity Surgery Service, Naiara now works as an Advanced Nurse Practitioner (ANP) in Bariatrics and Upper GI surgery within a high-volume bariatric department in London. She was appointed as a Bariatric Nurse Specialist in 2016 and has upskilled into an independent Nurse Endoscopist and a Non-Medical Prescriber assisting the wider multidisciplinary team within her department. She is also active in academia and has published in peer-reviewed journals.









INTEGRATED HEALTHCARE PROFESSIONAL (IHP) REPORT

BOMSS IHP membership

We are very pleased that IHP membership is expanding and we currently have 215 IHP members within BOMSS.

Training Day & Annual Scientific Meeting (ASM) 2024

Last year 53 IHP abstracts were accepted and 147 IHPs registered for the ASM with 94 IHPs registering for the training day. We hope to see many of our IHP members joining us again for the 2024 training day on the 3rd June followed by the ASM 2024 on 4th-5th June in Harrogate. We sit on the organising committee for the training day to ensure the programme meets the training needs and interests of our BOMSS IHP members.

Journal Club Support

Hopefully many of you have attended the monthly BOMSS journal club, which features one surgical and one IHP focussed paper each month. We have found the discussions around the papers to be really thought provoking for our clinical practice. These are an excellent opportunity for regular CPD for IHPs, shaping our skills in critiquing research which in turn can benefit our clinical practice.

If you are interested in co-chairing a BOMSS journal club this year, please email info@bomss.org or tweet us to express your interest. We would really welcome BOMSS IHP members onto the journal club panel.

BOMSS GP Hub

Following the successful launch of the BOMSS GP Hub which was developed by a working group of IHPs to support GP in managing patients who have had bariatric surgery, we are pleased to say that the webpages have been viewed 32,651 times. The BOMSS post-bariatric surgery nutritional guidance for GPs has been the most visited webpage on the BOMSS website over the last 12 months. These are available here on the <u>BOMSS webpages</u>.

We welcome feedback, suggestions and comments on these developments so please do not hesitate to get in touch via info@bomss.org or reach out to us individually on Twitter!

Vanessa Osborne - IHP Dietetic Lead, BOMSS Council of Management Dr Emily McBride - IHP Psychology Lead, BOMSS Council of Management Naiara Fernandez-Munoz - IHP Nursing Lead, BOMSS Council of Management Dr Helen Parretti - IHP GP Lead, BOMSS Council of Management

TRAINEE REPORT

Ahmed Ghanem - Trainee Representative

This year has been marked by constant engagement in bariatric training, with the BOMSS trainee community experiencing steadfast growth. A highlight was the resounding success of our Surgical Skills Workshop during the BOMSS 2023 ASM Training Day in Birmingham. Thanks to the unwavering support from our esteemed industry sponsors, we were able to offer an array of simulation, dry lab, and wet lab stations, where participants delved into essential techniques such as stapling, suturing, and mastering energy devices. Attendees ranged from final-year medical students to seasoned post-CCT fellows, ensuring that tasks were tailored to meet the diverse skill levels present.

Our collaboration with industry partners and leading UK units has yielded several hands-on training courses aimed at bridging the training gap in bariatric surgery. A standout initiative was the advanced laparoscopic upper GI skills course by Arthrex®, which provided academic lectures and hands-on sessions for senior bariatric trainees. We are working with the industry to restart previous training programs, including the GORE-BOMSS Fellow Programme, the Apollo Endosurgery endoscopic bariatric surgery training day, the J&J Bariatric Training Pathway for senior trainees, and the Medtronic bariatric skills programme for more junior trainees.

Portsmouth's robotic bariatric training program is a runaway success, consistently booked months in advance with their intensive two-day program covering all aspects of laparoscopic bariatric surgery.



TRAINEE REPORT

I'd like to thank you all so much for your feedback and participation in trainee events this year. It has been my absolute privilege and pleasure to represent my peers' education and career needs to the BOMSS Council. I hope you feel that access to bariatric training has improved and that many more have been enthused to pursue a career in this fantastic and ever-developing specialty.

Our collaboration with the Roux Group remains robust, highlighted by an engaging session at the Roux training weekend in March 2024. The session further solidified our influential presence within the Upper GI Surgery trainee community.

Celebrating its fourth year, our BOMSS Journal Club series continues to thrive. Each month, trainees exhibit unwavering enthusiasm in presenting significant recent publications, ensuring trainee representation at every session since January 2021. The series boasts a sizable audience traversing the whole country. If you wish to present a session from your unit, we welcome your participation. Please reach out to us to express your interest.

Last but not least, I'd like to thank Mr. Sherif Awad for his continuous support and enthusiasm in developing and facilitating the teaching events. I look forward to working with Mr. Chetan Parmar to innovate and contribute to the growing success of our initiatives.

Ahmed Ghanem

Ahmed Chanen

Trainee Representative, BOMSS Council of Management

RESEARCH REPORT

Dimitri Pournaras and Roxanna Zakeri - BOMSS Research Team

It has been a great year for the BOMSS research team. Our objective to improve capacity and capability with our IHP colleagues is expanding and following the well established BariDIET research group, the BariPsych group is currently being formed and a research strategy is developed.

We have supported the trainee-led National Emergency Bariatric Surgery Audit which is well under way and many members are contributing data.

International collaborations are also a priority and the relationship with the Obesity Surgery Society of India (OSSI) is a particularly important one. We are working on the first collaborative project across the societies whilst exploring the possibility of multicentre studies with centres involved in both countries.

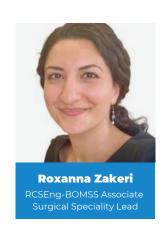
Research in the equality, diversity and inclusion space is another key objective and together with the BOMSS EDI Lead, Miss Aya Musbahi, we are working on delivering this.

Our relationship with the industry is very important as part of the Society's role in innovation in all aspects of obesity care. We are working with industry partners in order to deliver early phase clinical trials.

BOMSS continues to support audits and research led by members. The research team are delighted to be be contacted for support with study design, funding applications, recruitment, and results dissemination. We are on research@bomss.org or please do talk to us at the ASM.

Dimitri Pournaras – RCSEng-BOMSS Surgical Specialty Lead Roxanna Zakeri – RCSEng-BOMSS Associate Surgical Specialty Lead





PATIENT SAFETY COMMITTEE REPORT

Dee Wainwright and Chris Pring - Co-Chairs

Members: Will Hawkins, Omar Khan, Pip Fabb (SOBA representative), Lorraine Albon (physician representative)

This committee is something a fledgling group and it is still exploring its role within BOMSS as a whole. Nonetheless, we have pursued a number of workstreams over the last year:

Structured Judgement Review (SJR) of Mortality

The NBSR Chair notifies the Patient Safety Committee (PSC) of any mortality. The PSC then offers a confidential and anonymised SJR of the mortality, with an emphasis on points of learning from the event.

We have completed 1 SJR and another one is underway. As it stands there are no significant points of learning.

CORESS (Confidential Reporting System in Surgery) Representation

Will Hawkins is a member of the CORESS group (<u>www.coress.org.uk</u>). Surgeons and staff submit confidential reports to CORESS where there may be concern with respect to patient safety, near misses or actual harm. These incidents are discussed, and feedback is offered to the submitting unit, as well as being uploaded to the CORESS website.

BOMSS members should be encouraged to engage in this process and contact Will Hawkins (will.hawkins@nhs.net) or CORESS (via the website or app) directly. Any points of learning are fed back to the PSC.





PATIENT SAFETY COMMITTEE REPORT

Emergency Presentations of Bariatric Surgery Patients to A&E

Having engaged with NCEPOD and then the Royal College of Emergency Medicine, the PSC is in communication with NHS Digital in order to gauge the frequency of presentations of bariatric surgery patients to A&E departments in England. This is separate project to the National Emergency Bariatric Surgery Audit (NEBSA), in that we are seeking to gain access to HES data in order to make this assessment.

Theatre Staff Training

Dee Wainwright is designing a virtual operating theatre course, aimed at the wider theatre team. This will focus on patient safety in the operating theatre, familiarisation with equipment and manual handling. The project is being supported by Ethicon and Medtronic.

National Guidelines on the Perioperative Use of GLP-1 Agonists

Pip Fabb and Dimitri Pournaras are part of a wider working group that is drafting these guidelines and recommendations.

Dee Wainwright - Patient Safety Committee Co-Chair, BOMSS Council of Management Chris Pring - Patient Safety Committee Co-Chair, BOMSS Council of Management

ACKNOWLEDGEMENTS

Corporate Partners 2024

BOMSS would like to thank our corporate partners for their continued support of our activities and events:





Medtronic



Annual Scientific Meeting Sponsors 2024

BOMSS would like to thank the below sponsors for their support of the BOMSS Annual Scientific Meeting 2024:

Allurion Technologies Inc

Arthrex

Bariatric Solutions International

Boston Scientific

Celebrate Vitamins Europe B.V

Elemental Healthcare Ltd

Eli Lilly

Ethicon Johnson and Johnson

Ideal Medical Solutions

Implantica Trading AG

Inomed Health Limited

Intuitive

Karl Storz

Kimal PLC

Kora Healthcare

Lawmed

Medtronic

Merillife

Olympus

Rhythm Pharmaceuticals

Teleflex Medical UK Ltd

THEMIS Clinical Defence Ltd

UK Surgical Ltd

WL Gore



BOMSS YEARBOOK 2024