

The Newsletter of the APA

T-Piece

No. 3 July 2012



The President and Past Presidents of the APA, pictured at the ASM in Birmingham

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From the President

Thank goodness our main annual event does not rely on good weather! The ASM at the Birmingham ICC ran incredibly smoothly thanks to the very hard work of the local team and the conference organisers at the AAGBI. We felt that the split sessions were largely a success and have noted the high level of support for the more general ones which caused us some temporary “capacity” issues. This is being factored into the plans for the 40 year anniversary meeting in Cambridge (June 19-21st 2013). It was really good to see so many colleagues there and since many of you booked relatively late, again all credit to the conference team. I thought the quality of the discussion both in and out of the lecture theatre was excellent. When the rain finally abated we were treated to a trip to Edgbaston’s recently refurbished facilities in lovely routemaster buses, greeted with a genuine BCH fire eater (Norfolk ODPs drink tea not petrol!), champagne, sunshine on the balcony and (later) dancing girls and a comedy surgeon. Thanks go to Barry Lambert for orchestrating all this. Your feedback on the meeting has been looked at and noted (more in this edition page XXX).

Hopefully you will have seen and explored by now the new website which Chris Gildersleve has been working very hard on and which re-launched on schedule in early May. There are still a few unpopulated sections and there may also be links which are still not correct, but it is a huge improvement and we will continue to do more to get functionality and content right. Please be patient, and feel free to suggest/submit ideas for new content and any necessary “weeding”- contact Chris direct or via. apagbiadministration@aagbi.org. Importantly for those of you who were unable to attend the meeting, including the AGM we have placed for the first time an annual report on the website. Meeting



content as well as photographs will also soon be available and will not require passwords to access. As noted in the last newsletter and at the AGM we are seeking both a new lay member (applications by August 1st) and for the first time a non specialist centre “advisor” who will be co-opted to Council. The constituency of the latter is clear (non specialist centres members!), but defining these according to type of hospital and/or job plan of individual applicants is problematic. If you are unsure whether you qualify or want more details of this role please feel free to discuss it with us. We will as always be looking for someone who wants to get involved with the running of the organisation and may well already be involved in regional networks.

In England the Children and Young Peoples Outcomes Forum is about to report on it’s chosen topics for inclusion. We were glad to hear in late June that satisfactory pain relief seems to have made it to the shortlist of chosen areas. This is something we pushed very hard the group to include. We hope that we have also been able with the RCoA to influence the Safe and Sustainable Neurosurgery review in

the area of acute neurosurgery emergencies in the DGH, re-emphasising the “Tanner” report and the team approach to care and the need to put real efforts into streamlining this pathway. Anaesthetists play a vital role here and to date this has been insufficiently recognised.

Just 2 weeks ago I attended the excellent Thames PAG meeting hosted by GOS, along with Simon Courtman (APA national Linkman lead). As you will know there is no central Linkman meeting this year. However please get in touch if you wish Council members to come and speak at your regional group meetings, and we will do our best to be there, speak on relevant topics and we will fund these attendances

Annual Scientific Meeting Birmingham May 2012

The APA Annual Scientific meeting was held at The international Convention Centre in Birmingham from the 10th to 12th of May.

The meeting has undergone a minor revision this year with the introduction of separate streams for generalist and specialist paediatric anaesthetists. The format of the meeting is always fluid and we take the feedback from members very positively and the separation of streams is a result of feedback from previous years.

The Meeting was opened by the president, Dr Kathy Wilkinson, and the lead local organiser, Dr Monica Stokes.

The lectures then separated into the two streams described above and feedback for this was very positive. There was some negative feedback in that a number of people wished they could go to all the lectures, which suggested that we had chosen topics well. There followed lectures on Cardiac Anaesthesia, Current topics, radiology, pain, and a pro con debate discussing competency based training. The two streams then came back to one to hear citations given to new honorary members, (see below) and the Jackson Rees lecture given by Professor Terence Stephenson, (right) the President of the Royal College of Paediatrics and Child Health. He delivered an invigorating and thought provoking speech that was very well received.

The Congress then had a short break before the Annual dinner that was held at the banqueting suite of the Edgbaston Cricket Ground, the meeting being held in Birmingham, this years

dinner had a strong Indian influence where a curry banquet was enjoyed by all.

Day two of the meeting saw one set of lectures, starting off with the presentation of free

papers, the prize for the best free paper was awarded to Dr Chandler from BC Children's Hospital Vancouver with his talk on Emergence Delirium in children. This session was followed by a series of talks concerning the management of trauma in specialist



and District General Hospitals. The meeting concluded with a Free session with audience participation looking at difficult cases and how they should be managed.

As well as the main lecture theatres, there were also Trainee specialist sessions, a session provided by the APA science committee and

workshops to provide instruction on difficult Intravenous access, TIVA, New airway devices and Human factors in Cardiac surgery.

As ever the quality of abstracts remain high, and the number seems to increase year on year with 140 abstract papers submitted for consideration. The

poster prize this year was won by Dr Alyson Calder (Glasgow) for her poster looking at the difficult airway trolley. Council wishes to thank all the local organisers for producing such a splendid and successful conference.



Honorary members

2012



Dr Anna Maria Rollin

Citation delivered by Professor David Hatch.

During my period as the APA's Honorary Secretary from 1979-1985 I received a numbers of applications for membership from anaesthetists whose paediatric practice did not meet the criteria of that time (at least 50% of their practice). One such application came from Dr Maria Rollin, and it fell to me to break the news to her that her application had been rejected. It is ironic, therefore that I have been invited to give this citation in support of her election to honorary membership of the Association to which she was once refused membership. Those of you who know Dr Rollin will realise that she is not the sort of person to be put off by this sort of setback. She later became a co-opted Council member, and is now to become an Honorary member.

Over the last quarter of a century Dr Rollin has become known locally, nationally and internationally for her contributions to improvement in standards of both paediatric and adult anaesthesia, particularly in the general hospital. Locally, at Epsom General hospital, she has been Clinical Director, lead clinician for anaesthesia, chair of the senior

medical staff committee and chair of the paediatric surgery committee. Nationally, she has played a leading role in the development of paediatric anaesthetic services in the UK. Internationally she is known for her chapters, leading articles and editorials in textbooks and journals. She is in constant demand as a speaker at meetings and conferences in the UK and abroad.

Maria was elected to Council of the Association of Anaesthetists in 1990, where her interest in professional standards and safety made her a natural choice as chair of the Association's risk management working party. She was elected Vice-President of the Association from 1994-1996. In 1997 she became a Performance Assessor for the General Medical Council, rapidly progressing to Lead Assessor in 1998, a post which she has now held for fourteen years. She has almost certainly been involved in the assessment of more allegedly poorly performing anaesthetists than any other person. Also in 1997 she became Bernard Johnson Adviser to the Royal College of Anaesthetists, with responsibility for the Overseas Doctors' Training scheme. In 2002 she became an examiner for the Professional and Linguistics Assessment Board (PLAB).

In 2001 she was elected to the College Council, where she served on almost every committee before being elected Senior Vice-President from 2007-2008. She was a driving force behind the guidance on child protection produced jointly with the Royal College of Paediatrics and Child Health and represented the College on the Department of Health's working group on Paediatric Anaesthesia and Emergency Care in the District General Hospital. She has been an active member of the college's Patient Liaison group and a keen supporter of the production of patient information leaflets, including those produced jointly with the APA for children. She was a member of the council of the anaesthetic section of the Royal Society of Medicine from 1987-1990 and President from 2004-2005. She has chaired the anaesthetic sub-committee of the Central Consultants and Specialists Committee of the British Medical Association and was a member of the Department of Health's board on 'New ways of working in anaesthesia' and the joint Anaesthesia expert consultative group with the National Patient Safety Agency. She was President of the British Anaesthesia and Recovery Nurses Association from 2003-2005 a council member of the Preoperative Association. In 2010 she succeeded me as the Royal College's Professional Standards Adviser.

Maria's has been a member of the editorial boards of the British Journal of Anaesthesia and of Anaesthesia, and was for 4 years editor of the Royal College Bulletin. She was one of the main authors of the paediatric section of the Royal College's guidance document on the provision of anaesthetic services.

It is very much to her credit that she soon forgave me for the somewhat inauspicious start to our professional relationship, so that not only have we collaborated on a number of professional projects but also become firm friends. I can think of no more worthy person to become an Honorary member of this Association.

Professor David Hatch FRCA, FRCPC (Hon)



Professor Franz Frei

Citation delivered by Professor Andrew Wolf

Franz Frei Qualified in Medicine from the University of Basel in Switzerland in 1975. He spent the following eight years training in Pediatric Medicine, Intensive Care and Anesthesia, becoming one of the rare breed of physicians who are qualified in paediatrics and anesthesia and intensive care. Indeed he holds board certification in all three of these disciplines. After a final year as a clinical fellow in Pediatric Anesthesia and intensive care at Children's Hospital of Philadelphia, Franz was appointed in 1985 to the staff at University Hospital in Basel working in the areas of paediatric anesthesia, cardiac anesthesia and intensive care. He was appointed as the Chief of Pediatric Anesthesia and Intensive Care at the University Hospital of Basel in 1990, a position he still continues in to this day. He will be officially retiring in June this year after a career of four decades during which time he has greatly influenced and guided the discipline of pediatric anaesthesia both Nationally and Internationally.

Franz has held many positions that have organised and influenced training and research in Pediatric Anaesthesia. Notably he has been President of the Swiss Society of Pediatric anesthesia from 1995 – 1998, President of the Swiss Society of Anesthesia from 2000 to 2001, and been the Swiss representative for Federation of the European Associations of Pediatric Anaesthesia now the ESPA from June 1990 – 1996. Franz has been a huge supporter of the Association of Paediatric Anaesthetists of Great Britain and Ireland in Europe both as a member since 1991 and as an elected officer of the Council as the Overseas representative from 1998 – 2003. During his time as an officer for the APA he was very active within the Council. He had a keen interest to promote paediatric research within the APA and was the instigator of the annual APA research grant which continues through the added impetus of the National Institute of academic anaesthesia and was highly successful in 2011.

Within his department Franz Frei has generated the combination of very high quality clinical anaesthesia and leading edge research. He has published over 60 peer reviewed publication in high quality journals on the themes of respiratory mechanics, the pediatric airway and pharmacology/physiology interactions. Through his influence he has nurtured the research careers of those who have gone through the department in Basel notably Thomas Erb soon to be Head of the Department following Franz's retirement and Professor von Ungen-Sternberg now Head of Department in Perth Australia.

More recently he has applied himself to the task of Developing the new Paediatric Children’s Hospital in Basel, a task which like his other ventures has been approached with his customary combination of enthusiasm, drive and thoroughness. When in the early planning phases Franz visited several new purpose built units with his team including the recently commissioned Childrens Hospital in Bristol to try get the best solutions possible to their new venture. I understand that this is now up running and it will remain as a testament to the efforts put in by Franz and others to try to build a modern child centred hospital that can deliver the best outcomes for the future.

Finally, this occasion could not be passed without mentioning the sterling support that Franz has had from his wife Barbara, who has also been a regular visitor at the APA. We thank you for “lending” him and his time to us. Franz has given a great deal to the profession and discipline of Paediatric Anaesthesia and we wish you both a happy, healthy and long retirement. I gather that this winter was the first occasion an in 37 years that you were not on call over the Christmas period and I am sure that you will look forward to many holidays in the future not on call.



The Top table at the recent annual dinner

Non-specialist Paediatric Anaesthetist Advisor

The APAGBI seeks to maintain representation of paediatric anaesthetists at all levels on Council. It is essential that communication is maintained with occasional as well as full time practitioners in the specialty and those working in non specialist centres, wherein currently the majority of surgery and anaesthesia for children is delivered.

In the event that there is no Elected Director or Special Office Holder ordinarily employed in a non-specialist paediatric hospital (District General/Teaching Hospital with/without in patient paediatric care) then the Council, under Article 8.4 of the Articles of Association, may co-opt and appoint a Non-specialist Paediatric Anaesthetist Advisor.

The term of office of Non-specialist Paediatric Anaesthetist Advisor shall be for two years with the option of further two years extension at the Council's discretion. The position will not give the Non-specialist Paediatric Anaesthetist Advisor the right to vote nor will it give them the right to be a Director of the Company. However the non specialist advisor is eligible to stand for election as a director if an election arises.

If an individual from a Non-specialist Hospital is subsequently elected as an Elected Director or Special Office Holder then the position of Non-specialist Paediatric Anaesthetist Advisor will cease at the end of the current 2 year term. The Council will give notice of the termination to the Non-specialist Paediatric Anaesthetist Advisor affected.

The Non-specialist Paediatric Anaesthetist Advisor will be invited to attend meetings of the Council (normally 3 per year) and provide reports to Council of relevant activities.

They may be asked to be part of relevant committees of Council (in particular Education and training and/or the Meetings committee)

The non specialist advisor will be bound by the same Standards of conduct/Governance arrangements as expected of all Council members, and as outlined in Articles of Association and Standing orders.

Remuneration expenses for travel etc. will be provided and as described within the policy of the APAGBI.

Appointments process

This post is open to all consultant (i.e. full) UK members of APAGBI who are employed in a non specialist (paediatric) hospital.

The post will be advertised *in September* to all UK members via. email and on the website. Further details about the post can be obtained from the Honorary secretary and/or the President.

Applications are particularly welcomed from those whose job plan does not require them to undertake specialist paediatric practice and who are involved in the delivery of Networks for surgery and/or anaesthesia for children in their region. The extent of specialist paediatric anaesthetic practice is outlined in DH England SSNDS v3 2009¹, and may be used as a reference.

Applicants will be asked to submit a short CV which will be scored by a panel of APA Council against fixed criteria.

The decision of the panel will be transmitted to all applicants.

¹ Specialised services National definitions set, (3rd edition), 23 (Specialised services for children)



TIVA for TOTS

Subsequent to the highly successful “TIVA for Tots” meeting in London, the Society for Intravenous Anaesthesia is providing a Paediatric TIVA workshop at its 2012 Annual Scientific Meeting. Full details are at www.Edinburgh2012.org, but in summary:

- The meeting is on Thursday 29th & Friday 30th November, with workshops on Thursday morning.
- The venue is the Royal College of Physicians of Edinburgh, 10mins walk from Waverley Station and the airport bus stop. A 10.30am workshop start time has been chosen to allow delegates to travel to Edinburgh from most parts of the UK on Thursday morning.
- Each of the six workshops, on a variety of topics, has 20 places.
- Tutors for the Paediatric TIVA Workshop will be Drs Oliver Bagshaw, Jon McCormack and Neil Morton.
- Discounted accommodation is available in the nearby George Hotel, the venue for the Conference Dinner on Thursday evening.
- Workshop places are included in the meeting registration fee – register now to guarantee a place. Fees range from £80 for Anaesthetists-in-Training who are Society Members attending one day, to £245 for Consultant & SAS Anaesthetists who are non-members. Drs Alistair Baxter and Ollie Bagshaw will be presenting on Paediatric TIVA in the main meeting, and overseas speakers include Professor Kate Leslie from Melbourne & Professor Steven L Shafer from Stanford, California. Steve will be presenting about the role of Clinical Pharmacology in the trial of Dr Conrad Murray, where he was expert witness.
- Delegates will be eligible for a maximum of 8 CPD points, plus 1½ if attending a workshop.



Society for Pediatric Anesthesia
education • research • patient safety

International Assembly for
PEDIATRIC ANESTHESIA
Safety Knows No Borders

October 10 - 12, 2012 • Marriott Wardman Park Hotel • Washington, DC



Drs Peter Crean, Liam Brennan, Rosalie Campbell and Anthony Chisakuta at the reception for the annual dinner.

National advisor (Scotland)

(To be advertised September 2012)

Background

The rationale for appointing National Advisors, as defined in the Standing Orders (revised 2011), is to ensure robust links between the APA (and its Council) and APA members in each of the four nations of the UK and the Republic of Ireland following changes to Council Elections in 2010 . A National Advisor is appointed only in the absence of an elected Council Member (Director) ordinarily employed in that country. National Advisors have no voting rights and are not Directors of the Company (APAGBI Ltd.).

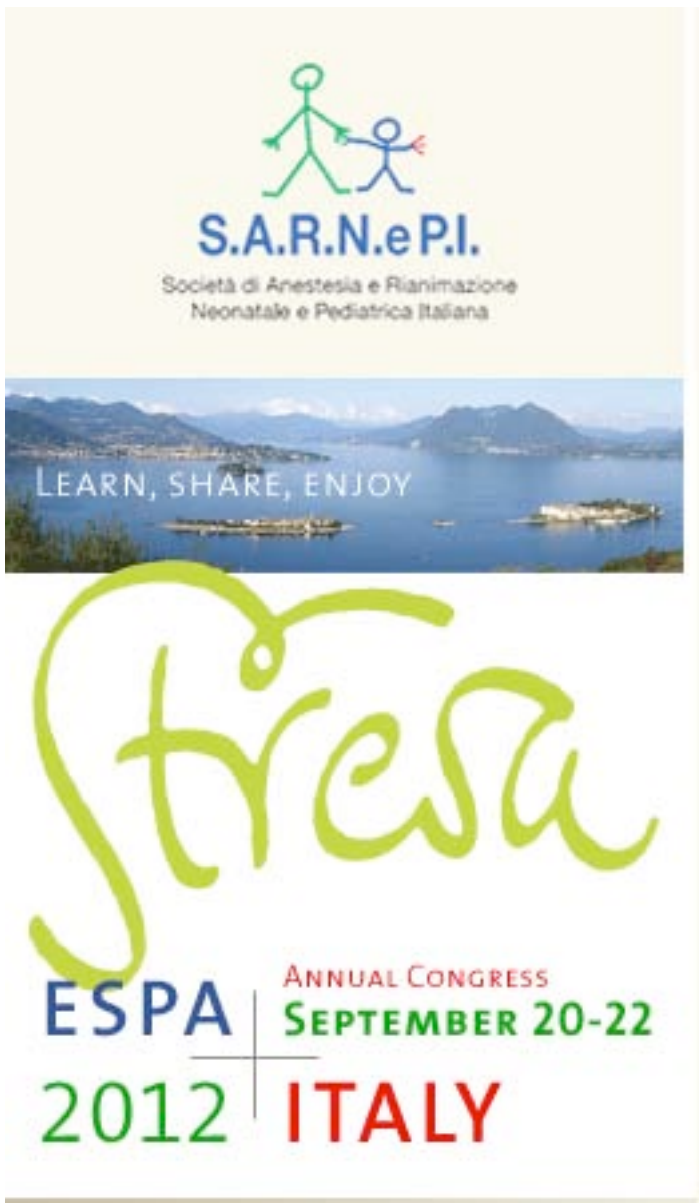
Job description

The National Advisor is a new position within the APA, which is likely to develop over time. The following notes, which are not exhaustive, are for guidance:

- 1. The National Advisor has a key role in promoting close links between APA Members in his / her country and the APA, especially its Council.** This includes:
 - Establishing and developing strong relationships, on behalf of APA Council, with the relevant national network. In support of this, the National Advisor would be expected to develop close links with the APA Linkman Coordinator
 - Disseminating relevant information (for example, published guidance / standards from Departments of Health, Royal Colleges, the APA) to APA Members and advising them on its status within within his / her constituency. Whilst some guidance will clearly not be adopted by all the devolved nations of the UK or the Republic of Ireland, it would be useful to keep colleagues abreast of developments elsewhere
 - Appraising Council on relevant local concerns or developments. This might include alerting Council to the need for specific APA support to members within the constituency. The National Advisors will be expected to provide a brief written report to each of the three Council meeting each year and the Annual General Meeting
- 2. The National Advisor is the nominated representative of APA Council in his / her country**
- 3. From time to time, the National Advisor will be asked to review / comment on documents / similar, by the APA President, Honorary Secretary or other nominated APA Office**
- 4. The National Advisor will be expected to attend at least one Council Meeting per year (but may be required or invited to attend others) and provide a short written report for each Council Meeting.** The Honorary Secretary is responsible for all invitations. Expenses will be reimbursed in line with APA policies

Support for the National Advisor

- 1. The National Representative will be supported in his / her role by the APA Council, especially its President, Honorary Secretary and the Chairs of each of the four APA Committees (Education & Training, Meetings, Professional Standards, Scientific).** Requests for assistance / advice should be made to the Honorary Secretary in the first instance
- 2. With the approval of the Honorary Secretary, the APA Secretariat is able to forward electronic communication, on behalf of the National Advisor, to APA Members within his / her constituency.** Requests should be directed to the Honorary Secretary in the first instance



BCH ODP Ben Law demonstrates his fire-eating skill to welcome guests to the annual dinner.



Dr Monica Stokes and Dr Raju Reddy at the Trade exhibition of the recent ASM

Trainee Report

Alyson Calder, APA Trainee representative.



The Trainee Session at the APA Annual Scientific meeting in Birmingham.

It was nice to see so many of you at the Trainee Session at the ASM in Birmingham. Our session was very well attended and I hope that it provided some useful information to those of you thinking about paediatric anaesthesia fellowships. Lots of you spoke to us at the end of the session to ask for practical advice on setting up fellowships. I'm always happy to help or put you in touch with someone who can. Please email me at alysoncalder@doctors.org.uk. Also, don't forget the Fellowship Database at www.apagbi.org.uk/professionals/trainee-section.

If you are anything like me, you'll be a master procrastinator at exam time. Cleaning the house, practicing the guitar, learning a new language, all seem to take on sudden importance. For this very situation, 'Procrastination Corner' now exists on the exam resources section of the trainee webpage. Anaesthesia related puzzles to help you study? What's not to like? Click on the 'Procrastinate' icon in the FRCA exam Preparation Section of the website. There are also some practice exam questions here and we will be adding to this resource in the months to come. I'd be interested to hear what you think of the website and particularly if you have any requests for content you would like to see there.



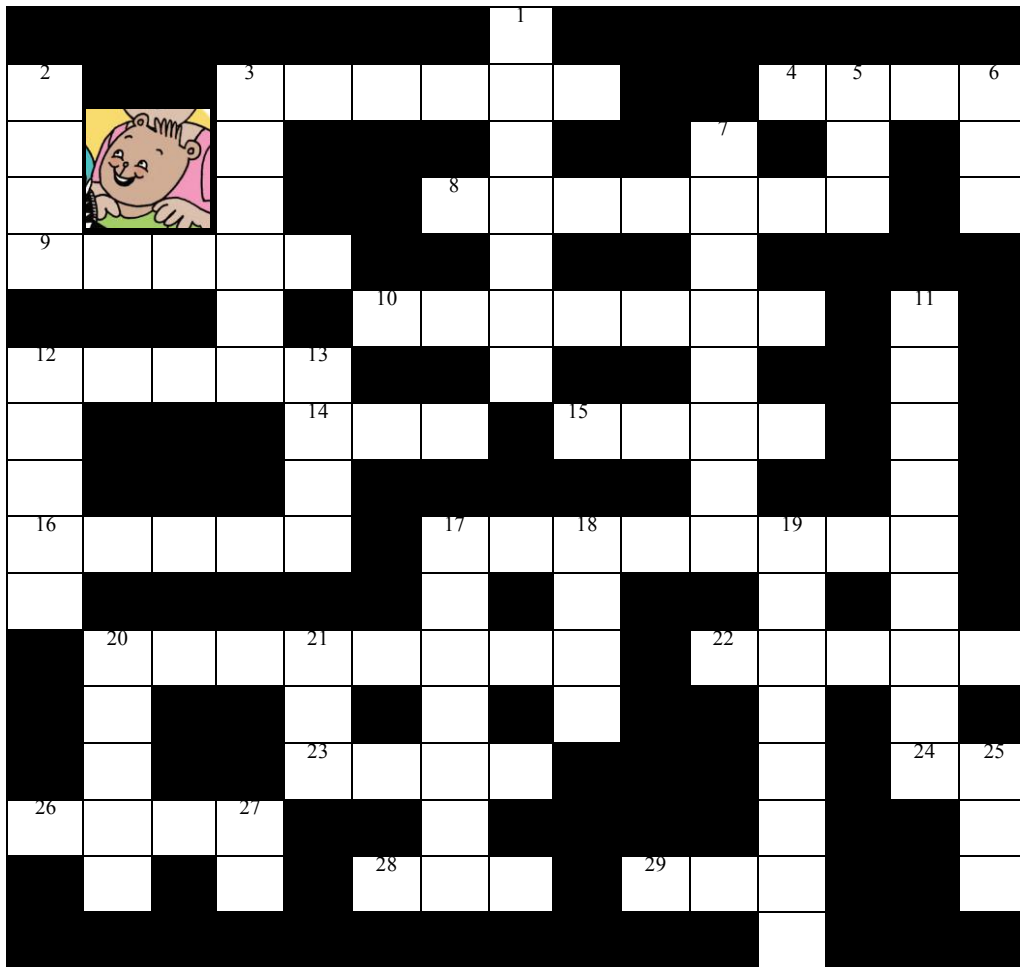
Lastly, there is a paediatric anaesthesia themed crossword in this edition of the newsletter. I'm not sure who was geeky enough to have taken the time to write this, but they probably wear very thick glasses (OK, OK, so it was me).

Alyson Calder

July 2012

APA TRAINEE CROSSWORD

July 2012



Across

- 3** Miss _____, the nursery teacher in Balamory (6)
4 Rees ____ (see picture) (4)
8 _____ - Taussig Shunt, anastomosis of subclavian and pulmonary arteries (7)
9 Prader - ____ syndrome, associated with chronic feeling of hunger (5)
10 Often seen in infants neonates for TOF repair (1,1,1,1,1,1,1)
12 An acrocephalosyndactyly syndrome associated with difficult airways (5)
14 MAP - CPP (1,1,1)
15 Female- only neurodevelopmental syndrome ass. with epilepsy (4)
16 Common anatomical site for IO access (5)
17 X-linked muscular dystrophy (8)
20 and 17 down Syndrome associated with synophrys (8, 2, 5)
22 ____-1- acid glycoprotein levels are lower in neonates, decreasing their ability to bind drugs (5)
23 ____ Syndrome: excess aldosterone production (4)
24 Antibodies to this associated with congenital complete heart block (2)
26 Behavioural disorder which can be treated with stimulants (1,1,1,1)

28 and 29 His omnitrix transforms him into alien creatures (3,3)

Down

- 1** Case originally about need for parental consent to prescribe an OCP (7)
2 These twitch muscle fibres are good for endurance activities (4)
3 Mucopolysaccharoidosis Type 1 (6)
5 Oxygen flow modulator (3)
6 Common cause of bronchiolitis (1,1,1)
7 Causes motor and vocal tics (8)
11 Associated with hemifacial microsomia (9)
12 Coarctation of this vessel is associated with radio-femoral delay (5)
13 Katari and Paedfuser models can be used for this technique (1,1,1,1)
17 See 20 Across
18 See 20 Down
19 Opioid antagonist (8)
20 and 18 down Characterised by a high pitched cry (3,2,4)
21 Condition of premature neonates (abbrev.)(3)
25 Unit of resistance (3)
27 Unidirectional flow of electric charge (1,1)