

## ESMO Clinical Unit Visit Report

### Aintree University Hospital Liverpool, UK

01/06/15 – 12/07/15

### Clinical Unit Visit

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Mentor(s): **Stephen Fenwick**, consultant HB surgeon, HB department, Aintree University Hospital

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It is undeniable that, nowadays, liver surgery has become one of the fastest developing branches of contemporary medicine. As a result, there is vital necessity to obtain as much knowledge and surgical skills as possible in order to perform hepatobiliary operations and procedures. Since I became an oncology surgeon, I have focused my professional interest on abdominal tumours, especially of the hepatopancreato-biliary (HPB) site. Unfortunately, HPB is an unexplored branch of surgery in Ukraine, and the Oncology Center I work for is not an exception. Moreover, there is a scarce benefit to receive special training which is time-consuming and quite costly. However, ESMO who I want to express my sincere gratitude to, provide a great support to every young surgeons to take part in CUV. I was one among others lucky doctors who were awarded by ESMO to take advantage of opportunities of one of the most famous and experienced HB team over the period of six weeks in Aintree University Hospital in a vibrant, amazing historic city – Liverpool, which is famous for its ancient streets, Albert Dock, the Beatles museum, the Cavern Club and other famous museums and landmarks, stunning calm parks and picturesque Mersey River with breathtaking tunnels and lovely ferry.

Between June 1 and July 13, 2015 I was on a steep learning curve in hepatobiliary department of Aintree University Hospital under supervision of splendid surgery team headed by professor Graeme Poston, consultant hepatobiliary surgeon as well as my direct supervisor Mr. Stephen Fenwick consultant HB surgeon, Mr. Hassan Malik, consultant HB surgeon, Carmen Lacasi-Purroy, consultant Anaesthetist, Dr Clare Helen Byrne the Advanced Nurse Practitioner and Louise Jones HPB Clinical Nurse Specialist. The hepatobiliary department is serving a population in excess of three million people of Liverpool, North

Wales, Merseyside and Cheshire, and the Isle of Man. Also, it specialises in providing a supra-regional service that deals with all aspects of benign and malignant diseases involving the liver and biliary tract as well as a supra-regional service for retroperitoneal sarcomas. In addition to this the department supports to hospitals within and beyond our region for major liver emergencies.

My visit was organized faultlessly and thoroughly. Every week was filled with interesting cases and operations. Moreover, the multidisciplinary team meetings (MDT) took place every Monday and Thursday, and ward rounds were provided every morning. Thus I was completely immersed into the busiest and the most interesting atmosphere of HB service. I could attend theatre and observe whole specter of liver surgery: cholecystectomy (laparoscopic and open), fenestration of the liver cysts, staging laparoscopic procedures, huge range of liver resections nonanatomical as well as anatomical, segmentectomies and hemihepatectomies standard and extensive in case of primary liver tumours (HCC and cholangiocarcinoma, gall-bladder cancer), colorectal liver metastases and uveal melanoma liver metastases, NET liver metastases; not only that but retroperitoneal sarcomas as well. Overall, there were 86 different operations all over my six weeks visit: 25 laparoscopic cholecystectomies, 11 segmentectomies, 10 excisions of liver MTS, 2 percutaneous microwave ablations, 3 laparoscopic biopsies of the liver tumours, 2 left hemihepatectomies (HHE) and 1 extended left HHE, 1 right HHE, 1 combined excision of retroperitoneal liposarcoma, other liver procedures (intraop-microwave ablation of liver Mts, staging laparoscopic procedures). I had a great opportunity to observe all of these cases.

As regards to MDT there were many specialist who were directly involved in HB service namely HP team (consultants, fellows, anaesthetists, nurses), radiologists, chemotherapists, thoracic surgeons, colon&rectal surgeons, endoscopists. They consented usually approx. 20-30 cases. I was involved with presenting some of these cases which were followed by MDT decision and treatment strategy. Furthermore, outpatient clinic was provided just after MDT. Due to that I could observe the whole process of counseling of patients by consultants and specialist registrars. It helped me to understand the role, structure and strategy of MDT in treatment of patients with liver tumours and how it has eventually influenced outcomes and results of treatment.

The clinic unit visit gives me a golden opportunity of broaden my knowledge of liver surgery and liver MDT. I obtain invaluable experience observing cutting-age technics performed by experienced surgeons of HP department. I am convinced that it helps me to implement these new approaches at my University and Cancer Center, sharing obtaining knowledge with colleagues, students and patients. Moreover, it has improved my career path now and in the future.

I want to thank whole HB team of Aintree University Hospital for such a cordial welcome, support and patient to me, and for so important and worthwhile experience of liver surgery and treatment strategy of cancer patients. Also I want to thank ESMO for your support and your relentless promotion of professional development among young doctors. I would recommend all young oncologist and surgeons around the world to take advantage of the splendid opportunities provided by ESMO to improve and obtain new knowledge and skills while visiting the most advanced and experienced clinics and hospitals.

*14/07/2015*

*Mykola Zubaryev*

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