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P R O G R E S S
WOMEN IN SURGERY FELLOWSHIP

FELLOWSHIP IN ROBOTIC AND EXENTERATIVE
SURGERY FOR ADVANCED PELVIC CANCER IN
THE ROYAL MARSDEN HOSPITAL, LONDON

MS AILÍN ROGERS, FRCSI

Consultant General & Colorectal Surgeon, Mater Hospital, Dublin, Ireland

YEAR OF AWARD: 2020 | COMMENCEMENT: AUGUST 2020 | CONCLUSION: AUGUST 2021

APRIL 2022

Fellowship in robotic and exenterative surgery for
advanced pelvic cancer in the Royal Marsden Hospital, London

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The **RCSI PROGRESS Women in Surgery Fellowship** is a prestigious bursary awarded by RCSI to promote female participation in surgical training at fellowship level. We hope this will in turn support the acquisition of additional surgical skills and knowledge that will contribute to the advancement of surgical science and practice in the island of Ireland.

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MS AILÍN ROGERS, FRCSI

Ms Rogers graduated from UCD in 2007 and completed MRCS before pursuing a PhD with UCD and Yale university, which she was awarded in 2013. With RCSI, she then completed higher surgical training in general surgery, achieving FRCS in 2019.

She is a strong advocate for women surgeons and female role models, with studies on gender in surgery published in top ranked surgical journals. She sat on the RCSI committee for gender diversity in surgery, leading to the production of the PROGRESS report. She advocates for her peers as the past-president of the Irish surgical training group and has a keen interest in mentorship and career guidance for trainees, having set up an annual career guidance day for aspiring surgeons, and was instrumental in the recent RCSI mentorship working group.

She has postgraduate qualifications in statistics, leadership and healthcare economics, over 50 peer-reviewed publications, three book chapters, has presented nationally and internationally on more than 60 occasions, and has been awarded over €150,000 in grant and prize funding, including the PROGRESS award which supported her expenses in further training in the Royal Marsden Hospital in London, while her husband and two boys supported her at home in Dublin.

She has recently completed fellowship training in robotic colorectal surgery and multivisceral resection for advanced pelvic malignancy in the RMH and returns to Ireland to her family and to commence consultancy in the Mater hospital and Our Lady's Hospital Navan.

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SUMMARY

The RMH is a high volume quaternary referral centre which delivers multidisciplinary cancer care to patients with advanced pelvic malignancies, with particular focus on multivisceral and complex pelvic cancers. The high volume case load allows for intense exposure to open, laparoscopic and robotic techniques.

This unique fellowship focused on the open and robotic approaches to the pelvis, working in the TME, beyond TME and urogynaecological planes. I trained in open and robotic pelvic exenterations, sacrectomies, as well as sentinel and side wall node dissection, RPLND and with the opportunity to operate both with colorectal surgeons, as well as urologists and gynaecologists, in order to train for these multidisciplinary cases at the interface of surgical specialties. I was an active participant in departmental research and the multidisciplinary meetings where I learned key decision making strategies.

In choosing RMH for my fellowship destination, I travelled to London for 12 months, leaving my supportive husband in Dublin to care for our two sons aged 4, and 10 months. The PROGRESS award supported a safe and comfortable accommodation and allowed me to travel back and forth as frequently as possible, ensuring an optimal balance between fellowship and life commitments, and meant that I never had to be in the difficult position of being unable to afford to travel to see my family.

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REPORT

Objectives of Project/Fellowship:

The aim of this fellowship was to gain the invaluable experience operating as primary surgeon on a range of advanced pelvic pathologies in a specialised unit. The additional benefit was access to high-volume robotic surgery, with two dual console Da Vinci Xi robots with simulators, in use 5 days a week. The range of urological and gynaecological surgeries much increased my access to robotic surgery, under the supervision of a team of fellowship trained consultants. Over the year, I was involved with over 400 cancer operations, spending dedicated time gaining proficiency in robotic urological and gynaecology procedures as index cases (prostatectomy, cystectomy, pelvic lymph node dissection, TAH/BSO and sentinel and side wall lymph node dissection). I also learned RPLND and ileal conduit formation – more great skills useful for advanced and recurrent pelvic cancer surgery. This approach of multidisciplinary training is unique, and I really feel it offered me access to training volume, techniques, and a greater assurance of anatomical understanding than purely colorectal training has previously afforded me.

The colorectal unit at RMH offers a high standard of cancer care for a wide variety of CRC, but predominantly advanced cancer. Within the unit, we performed over 40 pelvic exenterations during the year and 5 sacrectomies, with many multivisceral resections. This provided invaluable experience in operating with multiple subspecialties on complex cases, often pushing the boundaries on the resectability of complex tumours, with the benefit of a world class MDT.

Did you achieve these objectives?

During the 12-month fellowship, I was involved with >400 cancer operations, including >120 robotic surgeries, >40 pelvic exenterations, >70 pelvic side wall or sentinel lymph node dissections, >25 ileal conduits, became proficient at robotic urogynaecologic procedures such as ureterolysis, bladder mobilisation, BSO, uterine mobilisation, vaginal vault and bladder neck reconstruction. This provided me with the invaluable operating experience I hoped to achieve and bring forward with me into a busy consultant career.

I also learned many non-operative management skills during the 12-month fellowship which will prove invaluable in my consultant career. The challenges of Covid-19 meant that many teams from other hospitals came to RMH to operate (it was shielded from covid so that cancer surgeries in London could continue), and I had opportunity to work with colorectal surgeons from a variety of institutions. I learned from my RMH colleagues how to navigate and organise the complexities associated with Covid-era surgery. Furthermore, I remained involved in the supervision and training of trainees, management of resources and time, audit activities and had time for self-reflection on performance as well as achieving a work life balance.

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In your opinion, what is the value of your award to:

a. Yourself

This fellowship was undoubtedly the best professional year of my career to date, with the opportunity to hone my technical skills and truly focus on studying the art of surgery. Most importantly, I hugely enjoyed working with the RMH team and others in London. I now hold many new but enduring professional and personal relationships which have already yielded important personal and professional supports to me as I embark on my consultant career. I know that there are a variety of highly skilled professionals that I can seek advice from and collaborate with in the future. The award allowed me to live in a safe and comfortable area near the hospital and to travel to see my family within Covid-19 regulations.

b. The institution in which you worked

I integrated within multiple teams in RMH as the senior fellow, and thankfully my work availability was unaffected by Covid-19, despite my family being in another country. The quality of my Irish surgical training was quickly recognised and I became a highly valued member of the surgical teams early on during my fellowship. Many of the intended fellows at RMH this year were unable to travel to the UK due to C-19 and so I was able to step in in theatre at a much increased rate due to fellow shortages. (This was of course also advantageous for me!). I introduced new ideas and surgical methods from my HST training in Ireland to my teams and enjoyed working with them through the complexities of advanced cancer cases. I worked tirelessly and with great enthusiasm to a high standard throughout the 12-month period, and engaged in departmental research and began collaborations which I hope to maintain in the future.

c. In the future for Irish patients

The skills, maturity and experience I have gained in RMH have undoubtedly made me a better surgeon in my new role in MMUH/OLHN. I now feel I am a competent robotic surgeon and have increased my skillset for managing advanced pelvic cancers substantially, which will be a bonus for my patients. I also have created contacts within quaternary referral centres, whom I know I can pick up the phone to at any time should I wish to refer or seek advice from them in difficult cases. I hope to provide registrar and fellowship training to surgical trainees (both Irish and international), so that they might benefit as I did. I really so much enjoyed the collaborative and multidisciplinary nature of my fellowship, and will endeavour to promote a similar model of fellowship in Ireland.

d. Promoting a career for women in surgery

My goal with this fellowship was to become a successful cancer surgeon in Ireland. I have a long way to go to prove myself in that regard, but I was lucky enough during this year to be appointed and now returning to Ireland to a substantive consultant post in MMUH, and I strongly believe that this fellowship has been part of the reason for that success.

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As I stated in my application for the PROGRESS award, I believe this embodiment of my goal will inspire others to do similarly - I strongly believe in the “you can’t be what you can’t see” adage. I have been lucky enough to be part of a generation of women who have broken the mould in surgical training - I have a stable relationship with two small children and family commitments, and yet achieved academic and clinical success - and this in itself can promote other women to follow the path I have chosen.

This year, I chose to travel away from my husband and two small children to pursue this fellowship. I could not have done it without my incredibly supportive family, but I truly believe that the PROGRESS award made it easier. With so many other issues going on (not least Covid-19), being free from financial worries made the fellowship seem a much easier feat. I knew I could see the family if needed and yet I felt safe and comfortable in London. While it may have seemed like a large personal undertaking, it actually felt quite easy and enjoyable. I was able to immerse myself 100% in work during the week, and focus 100% on family during downtime. This luxury is more difficult to maintain when balancing work and life in the same geographical region, but I learned that it is possible to leave work behind and give family true focus and vice versa. I hope that what I have done this year will inspire more women to do similar, and demonstrate that there are creative ways to balance work and life, with the right supports.

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123 St Stephen's Green, Dublin 2, D02 YN77, Ireland. www.rcsi.com