

# **Grant/Fellowship Report Form**

Fellowship/Grant Holder Name	Michael E. Kelly
Brief biography, including qualification and year of	BA, MB BCh BAO, MCh, FRCSI, PhD  I graduated from Trinity College Dublin in 2010 and
graduation (no more than 100 words)	completed my internship at Tallaght University Hospital. I undertook higher specialist training on the national surgical training scheme in general surgery from 2015-2021, obtaining my Intercollegiate FRCSI with a subspeciality interest in Colorectal Surgery in 2020, and CCST in 2021.
Title of Project/Fellowship	Clinical and Research Fellowship in Advanced Colorectal Malignancy including pelvic exenterative and peritonectomy techniques (and Advanced Robotics)
Year of Award:	2022
Commencement Date:	June 2022
Conclusion Date:	May 2023

## Summary (no more than 250 words)

This high intensity fellowship provided me with a comprhensive training in multiple aspects of the care of patients with advanced colorectal cancer, including multi-visecral pelvic surgery, advanced robotics and peritonectomy. In addition, there was an integrated research aspect to this fellowship, providing great opportunities to drive clinical studies and to develop a collaborative network for future endevours between Ireland and Australia.

Peter MacCallum Cancer Centre is a world leading cancer unit and is Australia's only public hospital solely dedicated to caring for cancer patients. Learning about the operative and operational sides to running and building a dedicated cancer unit was immensely beneficial. The sheer volume of complex surgery covered this year has furnished me with the skills and confidence to take on these advanced surgeries, and has extended my knowledge and skillsets in considering what can be achieved operatively.

Furthermore, I had an opportunity to travel to Syndey to visit another world-renowned unit (Royal Prince Alfred) and to learn from Prof. Michael Solomon (RCSI Graduate) and his team how they have developed and evolved their complex cancer service and clinical trials unit.

#### Grant Report (in the region of but no more than 500 words)

## **Objectives of Project/Fellowship:**

The main goals of this fellowship was to develop my skillsets in the following:

- 1. Pelvic Exenteration Surgery for locally advanced or recurrent pelvic malignancy
- 2. Robotic approaches for advanced colorectal surgery (with equivalency certification)
- 3. Cytoreductive surgical techniques
- 4. Experience in the development of a complex comphrensive cancer with streamlining of cancer services including functional outcome assessment and clinical trials

#### Did you achieve these objectives?

Yes

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

#### (a) Yourself

As a major tertiary referral centre, the complexity of cases seen and operated at Peter Mac was immense. They have considerable experience in pelvic sidewall dissection, vascular and/or bone resection, in setting of locally advanced or recurrent pelvic malignancy. In addition, their dedicated complex cancer MDT provided invaluable insight into patient selection, optimization, and the earlier role of palliative strategies in those with disseminated disease.

Annually, they perform over 150 complex multi-visceral resections, and are increasingly using robotic platforms when appropriate. Peter Mac also haw a great reputation for training international fellows and my experience supports this. My time here has allowed me to gain new technical skills which will be beneficial in the Irish setting.

The experience of travelling overseas and working in a different healthcare system with exposure to novel management strategies is always valuable. To learn how other units have structured their services to facilitate better outcomes especially in the setting of advanced disease has had a major influence on how I would like to build a service.

Finally, from an academic standpoint, this year has helped me in developing prospective research avenues. High-quality international collaborative research is paramount in improving patient care. The global ties that I have made will be highly supportive especially in my earlier consultant years.

## (b) The institution in which you worked

The importance of international fellowship is definitely a two-way street. The Irish experience regarding the use of total neoadjuvant therapy in advanced rectal cancer and watch & wait protocols are better established in clinical practice. Bringing alternatives views and input are of value to recipient centres. In addition, I have contributed to Peter MacCallum's research portfolio by publishing/ assisting in several research endevours. We have also built a research collaborative based on recent international fellows and have several exciting projects underway. This will continue to be the strong foundation for future collaborative works. Finally, the links between Peter MacCallum and Irish Surgical Trainees is now well-established by recent fellows and continued support is needed to maintain this.

### (c) In the future for Irish patients

From a clinical perspective, I have developed surgical techniques to provide benefits to future patients, particularly in the setting of advanced or recurrent rectal cancer. This opportunity has equipped me with invaluable experience in terms of: operative experience, patient selection and optimization, service building and outcome assessments that are vital to provide complex oncological care. My collaborative ties will help facilitate international opinions when needed, all which serve to improve the care we give our patients.

From an academic perspective, my fellowship allowed me to continue my research interests. I firmly believe that patients benefit from being treated in high-volume centres, as this facilitates clinical trial and study recruitment. Strengthening our collaborative links with other international units can drive better patient-specific research, especially regarding quality of life improvement.