



# RCSI

ROYAL COLLEGE OF SURGEONS IN IRELAND

COLÁISTE RÍOGA NA MÁINLEÁ IN ÉIRINN

## Ethicon Grant/Fellowship Report Form

<b>Grant Holder Name</b>	Justin Kelly MD FRCSI.
<b>Brief biography, including qualification and year of graduation (no more than 100 words)</b>	I graduated from my scholarship years from RCSI Dublin in 2004 with an honours degree. After completing the BST, I then pursued a Master's Degree in Surgical Immunology in UCC which was awarded in Dec 2009. I worked as a surgical tutor in NUI Galway and commenced higher surgical training in 2011 with subsequent awarding of CCST. My area of interest is in minimally invasive approaches to colorectal diseases, including robotics and the transanal platform to access the rectum.
<b>Title of Project/Fellowship</b>	Fellowship in Advanced Minimally Invasive Colorectal Surgery.
<b>Year of Award: Commencement Date: Conclusion Date:</b>	2016. July 1 2016. July 7 2017.

### Summary (no more than 250 words)

The Center for Colon & Rectal Surgery, Florida Hospital offers comprehensive treatments and minimally-invasive surgery for a multitude of colorectal disorders, conditions and cancer. The skilled surgeons have brought their knowledge and world-renowned expertise together to ensure that the best care and advanced treatments for colorectal disorders are provided to their patients.

The department is a tertiary referral centre, recognised globally as a leader in minimally invasive rectal cancer management. I worked directly under Dr Matt Albert who invented the transanal platform for access to rectal pathology.

Florida hospital in Orlando is an acute medical facility with 2,247 beds serving as a community hospital for the greater Orlando area, therefore guaranteeing a continuous exposure to both acute anorectal and colonic pathology, which as a fellow, I was responsible for managing daily.

The hallmark of this programme is an emphasis on minimally invasive surgical techniques. The department and its staff are world renowned for their expertise in robotic pelvic/rectal cancer surgery and for having pioneered the transanal platform or so called TAMIS – transanal minimally invasive surgery. By the end of the year I have performed over 950 cases – encompassing 300 anorectal cases, 300 colonoscopies, 350 major resections. This latter group of major resections was for both benign and malignant disease with >95% completed laparoscopically. I was also privileged to visit both Applied Medical and Stryker campuses to witness the production of relevant technology first-hand. I also became a proctor on the invited TaTME courses run by the group / Applied Medical in their training facility here in Orlando every 2 weeks. This was a fantastic fellowship that augmented the skills learned in Ireland.

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

Objectives of Project/Fellowship:

- 1 - Obtain the necessary experience to select and evaluate appropriate patients suitable for TAMIS.
- 2 – Learn the necessary skills required to confidently perform TAMIS and performing transanal TME.
- 3 – Perform high volume advanced laparoscopic colectomy, complex proctology, advanced endoscopic procedures and pelvic robotic colorectal resections.
- 4 – Continue my research interests in colorectal surgery and TAMIS.

It also served as a timely opportunity to see how the mechanics of health care delivery work in another continent and how a group of 6 pure colorectal surgeons manage to cover a massive geographical area covering 10 hospital campuses.

Did you achieve these objectives?

Yes

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

(a) Yourself

This award helped to alleviate some of the travelling expenses involved with relocating to another continent.

(b) The institution in which you worked

- Establishing a monthly colorectal journal club
- Significant research publication and presentation output throughout the year
- Continued collaboration between this hospital network and centres in Ireland

Furthermore, I have been offered a staff position within this hospital, which I am currently finalising the details on.

(c) In the future for Irish patients

If I do choose to eventually relocate to Ireland, I would envisage working as a consultant colorectal surgeon in a university cancer hospital. The skills that I would bring back to this country working in the Irish Health System (in which the current management of rectal cancer continues to evolve) would be the return on this significant investment. Currently, there is only one other fellowship trained Irish surgeon able to competently practice these specific transanal skills in Ireland. Even though this modality of surgery is not a suitable platform for all patients, having it in ones' armamentarium of surgical skills would be exponentially beneficial to Irish patients. This specific set of skills will become *de rigeur* amongst colorectal trainees in the future.