0076 ENHANCING SURGICAL TRAINING USING ENDOSCOPY LIST E-BOOKING SYSTEM
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Aims: The Royal College SAC requires endoscopy accreditation for gastrointestinal surgeons. Trainee work pattern changes make attendance at training lists difficult. This study evaluates the use of endoscopy training lists before and after the introduction of an electronic booking system.

Methods: Training lists were audited for 24 months in 2007/08 and for 4 months in 2010 after the introduction of the e-booking system. Utilisation was calculated as the number of months in 2010 after the introduction of the e-booking system. Utilisation at training lists differed depending on gastrointestinal surgeons. Trainee work pattern changes make attendance on gastrointestinal surgeons. Trainee work pattern changes make attendance difficult.

Results: In 2007/08, 12 trainees performed 677 procedures (1858 points). 47.0% was on training lists. Training lists were 17.7% utilised (95% CI 16.6%-18.8%). In 2010, 10 trainees performed 276 procedures (766 points). 65.0% were on training lists. The lists were 61.0% utilised in 2010 (95% CI 57.6%-64.4%). The most significant improvements were in upper GI and medical training lists.

Conclusions: Significant improvement in training list utilisation was evident after implementation of the e-booking system. Such systems may aid surgical training within modern work patterns.

0077 INVESTIGATION OF PLAasma LYSOZYME AS A PUTATIVE BIOMARKER IN CAROTID ATHEROSCLEROSIS
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Introduction: We have demonstrated a relationship between arterial plasma lysozyme levels and extent of coronary artery disease, identifying lysozyme as an atherosclerotic burden biomarker. This study aimed to determine whether arterial plasma lysozyme is able to distinguish asymptomatic from asymptomatic carotid atherosclerosis.

Method: Arterial (n=54) and venous (n=28) plasma samples were collected from patients pre-carotid endarterectomy for asymptomatic (n=29) and symptomatic (n=25) carotid stenosis. Carotid plaque specimens were obtained (n=8). Venous plasma was collected from individuals without carotid stenosis (n=13). Plasma lysozyme levels were determined by ELISA (Biomedical Technologies, Mass).

Results: There was no significant difference in the sum of carotid stenoses or proportion of patients with known ischaemic heart disease between the asymptomatic and symptomatic groups. Venous plasma lysozyme levels were significantly higher in patients with carotid stenosis than individuals without (mean 5.110g/mL vs. 1.273g/mL, p <0.0001). Arterial plasma lysozyme levels were significantly higher in patients with carotid stenosis than individuals without (mean 5.110g/mL vs. 1.273g/mL, p <0.0001). Arterial plasma lysozyme levels were higher in patients with symptomatic than asymptomatic carotid stenosis (median 10.38g/mL vs. 1.259g/mL, p=0.0161).

Conclusion: The role of lysozyme in carotid atherosclerosis risk stratification warrants further investigation.

0081 BARIATRIC TRAINING IN THE UK IS SORTED!
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Background: Bariatric training has traditionally been at consultant level. Consequently, consultants are still often on their learning curve thus reducing “hands on” training for registrars. A new way of training the next generation is required.

Methods: SORTED (Surgery for Obesity; Registrar Training and Educational Development) was designed by a registrar with industry sponsorship specifically for senior registrars. It is a modular course encompassing all aspects of bariatric surgery, not just the operative procedures.

Module 1 (Hamburg, Germany) - State of the art simulators, porcine procedures with pulsed perfusion liquids and live animal operating. Procedures practiced included band insertion, removal of gastric band, sleeve gastrectomy and Roux-en-Y gastric bypass.

Module 2 (Bristol, UK) - Live links to theatre with supervised hands on experience with gastric banding. Live MDT exposure, radiology tutorials, live patient testimonials and Q&A sessions.

Module 3 (Taunton, UK) - Live links to theatre to observe, banding, bypasses, and revisional VBG to bypass surgery. Delegate presentations covering core curriculum topics, introduction to the National Bariatric Surgery Registry, basics of commissioning.

Summary: The pilot SORTED course was a huge success and is now being rolled out nationally with full endorsement of the Association of Laparoscopic Surgeons.