

The JLO Travelling Fellowship 3rd Report 2001

Visit to Professor Jatin Shah at Memorial Sloan-Kettering Cancer Center (MSKCC), New York and Professor Andrew van Hasselt at the Prince of Wales Hospital, Hong Kong

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New York

I had the privilege of spending time with Professor Jatin Shah's team on the Head and Neck service at America's premier cancer hospital.

Situated on East Side of Midtown Manhattan 'MSK' (as many affectionately call it) is the oldest cancer institution in the United States (and second oldest in the world). The Head and Neck service here has been at the forefront of our battles with cancer. The likes of Hayes-Martin, Frazell and Strong have made significant contributions to cancer surgery over the years. More recently Professor Jatin Shah introduced the classification 'levels' of neck lymph nodes in malignant disease. There are visitors from all over the world such that there is now a 'three visitors only at any one time' rule. During my visit there were two other visitors from India and Paraguay.

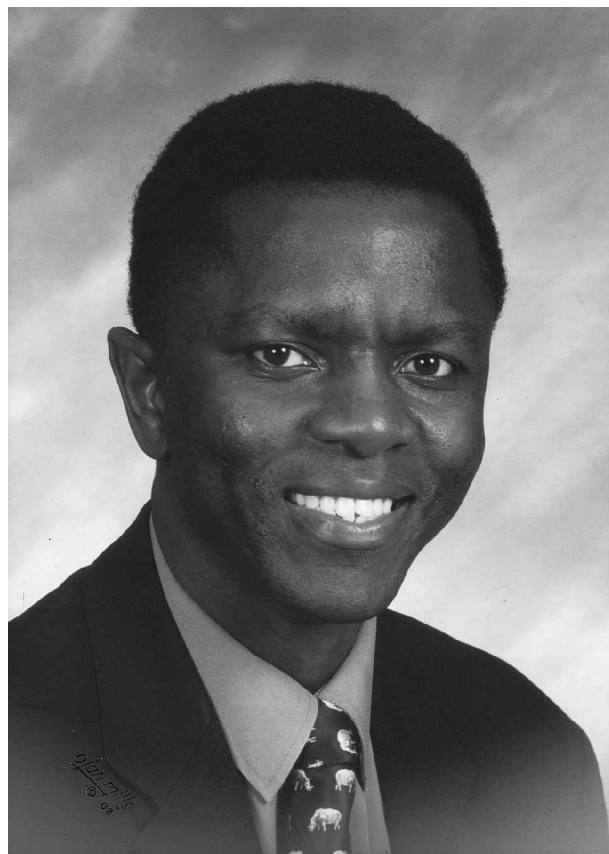
General

The H and N service consists of five attending surgeons (in three firms). Besides Professor Shah, there are Drs Shaha, Krauss, Boyle and Singh. Each firm has a fellow and a resident or Physicians' assistant. Professor Shah's fellow during my visit was Dr Maria Evasovich.

Office

Professor Shah uses three rooms for consultation. Patients are clerked by the cancer specialist nurse or physicians assistant before being seen by Professor Shah or his fellow. Patients undergoing radiotherapy are always seen once by Professor Shah during their treatment. PET imaging is used widely in the investigation/surveillance for recurrence in malignant tumours.

I was impressed how efficient the office set up is. There is a great sense of teamwork by all (clerks, nurses and surgeons) to make the consultation as unintimidating as possible bearing in mind some patients have been referred from afar. The patients certainly value the cordial atmosphere and one patient, a magician, put on a 'mini-show' performing three tricks at the end of one of the morning office hours. During my time there I saw patients referred from all corners of the United States, as well as those from all the other continents (except Africa).



Operating Room

MSKCC has 15 theatres, two or three of which are for the use of the Head and Neck service at any one time. Sessions start as early as 7.45 am and are scheduled to run up to 7 pm. All Head and Neck theatres are fitted with operating camera and television screens so that visitors can follow the intricacies of the operation. MSKCC's Head and Neck service carries out more major cancer resections than any other unit in the USA.

I watched many resections including mandibulotomies for base of tongue cancers and countless neck dissections and parotidectomies. There were a lot of thyroidectomies as thyroid cancer is a significant portion of the workload. I also saw a craniofacial resection and laryngectomies. The department's policy of organ preservation using aggressive chemoradiation for advanced tumours spares many larynxes. Of particular interest to me, I was able to see a



FIG. 2
Professor Jatin Shah and Zvoru Makura.

patient being assessed for suitability for partial laryngeal surgery. Professor Shah stressed the importance of using a full range of Hopkins rod lens endoscopes to delineate the full tumour extent. Free flaps and reconstructions are done by the plastic surgeons.

Ward Rounds

Besides morning ward rounds Professor Shah did a full round whatever time his operating session finished. This was the only time (often after 8 pm) available also for seeing consultations from other services in the hospital.

Video Library

This is an extensive collection covering Head and Neck operations as well as including history of MSKCC. I enjoyed and learnt from the videos I watched. Whilst I was there Professor Shah was making a new video on Radical Neck Dissection.

Academic Meetings

There are weekly Grand Rounds for the entire department of surgery. For the Head and Neck service however, the main meeting was the Thursday morning 'Clinical Conference'. This was a multidisciplinary meeting with pathology, radiology and radiotherapy/oncology. The difficult (management) and often-rare cases would be presented and discussed.

This was followed by the weekly presentation by the guest speaker. Amongst the guest speakers were Dr Peter Constantino of St Luke's-Roosevelt Medical Center who spoke on 'Contemporary cranial base surgery for paranasal sinus malignancies' and Dr Robert Mecklenburg from the National Cancer Institute who spoke on 'Recent advances in reduction of tobacco-related disease'.

In addition there is the excellent (monthly) Thyroid Conference with the Endocrine, Pathology and Nuclear Medicine services.

Thursday evenings were for pizza during the journal club co-ordinated by Dr Shaha. Saturday mornings were teaching sessions with tutorials or lectures given by an Attending surgeon. I thoroughly enjoyed my stay at MSKCC and am grateful to Professor Shah and his team for making me feel at home on their service.

Hong Kong

I was fortunate to be given the opportunity to spend three months in the Division of Otolaryngology, Department of Surgery, Prince of Wales hospital (PWH) as a Visiting Scholar of the Chinese University of Hong Kong (CUHK) under the tutelage of Professor Andrew van Hasselt.

Hong Kong, with a population of 6.7 million, has two medical schools; CUHK in Shatin, up in the New Territories with teaching at the PWH, and another 'across the harbour' at the Queen Mary hospital of the University of Hong Kong on Hong Kong island.

Having registered with the Medical Council of Hong Kong, I was able to fully participate in all the department's activities, academic, clinical (and social). Professor Van Hasselt is chairman of the department of surgery. He is well known for introducing the 'Hong Kong flap' (for discharging mastoid cavities) into otological practice. Professor van Hasselt and Dr Michael Tong perform most of the specialist Otology in the department. Dr Alexander Vlantis and Dr Edward To were the head and neck consultants and Dr John Woo has an interest in rhinology. There were two 'Senior Registrars' and seven medical officers (Registrars), the latter on the four-year training programme leading up to the FRCSEd (Otolaryngology) exam. This 'Part II' serves as the 'exit' exam in Hong Kong.

Ward Rounds

Ward rounds were consultant led and in English. There is a weekly teaching Grand Round on Wednesday involving ENT surgeons and trainees working at two district general hospitals in the PWH 'cluster'.

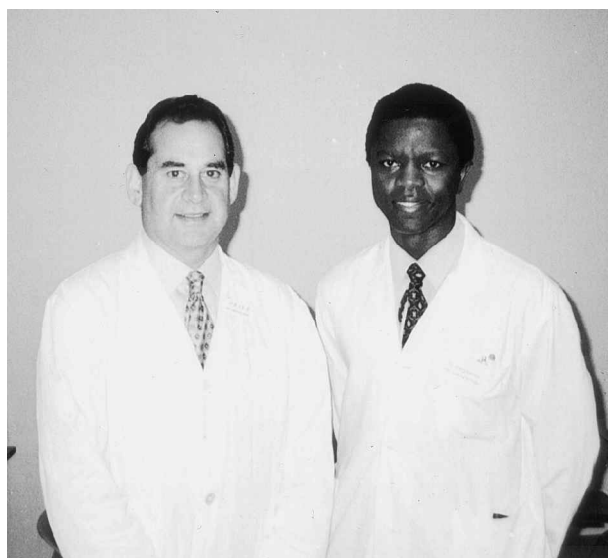


FIG. 3
Professor Andrew van Hasselt and Zvoru Makura.

Journal Club

This was the main academic meeting of the week and incorporates the medical officer teaching programme. Amongst the speakers were Otolaryngology Visiting Professor to CUHK for 2001 Professor Takeshi Kubo from Osaka, Japan. His talks were entitled 'The significance of auditory evoked responses in cochlear implant users' and 'Vestibular function and post operative dizziness in cochlear implant recipients'.

I was honoured to be given the opportunity to give two talks at the Journal Club 'ENT/Head & Neck Surgery in Zimbabwe & Liverpool' and 'Trachinaze filter in laryngotomies'.

Clinical Activities

At the PWH, I spent the bulk of my time concentrating on my areas of interest namely Head and Neck surgery and Otology. Outpatient clinics were held six days a week with a reduced clinic after the surgical grand round on Saturday.

Chronic Ear Clinic

This weekly clinic is for major otological cases. These include microtia and other congenital ears, cochlear implant and acoustic neuroma patients. Those with mastoid cavities are also followed up in this clinic.

H and N Meeting

This weekly multidisciplinary forum discusses management of inpatients. It consists of ENT and plastic surgeons, radiotherapist-oncologists, pathologist and radiologists.

H and N Clinic

This weekly 'combined clinic' involves ENT, plastics and radiotherapist-oncologists.

Medical Student Teaching

Final year medical students spent one and a half weeks in the ENT team. They get an intensive schedule of small group teaching (15–20 tutorials) to supplement their exposure on ward rounds clinics and theatre. I gave tutorials on 'Facial palsy' and 'Tinnitus'.

Theatre

I took part in all of the major Head and Neck resections including radical neck dissections, laryngotomies, and laryngopharyngo-oesophagectomies. During my final week we performed a laryngopharyngo-oesophagectomy and colonic transposition for a man with synchronous tumours in the pyriform fossa and lower oesophagus whose previous gastrectomy precluded a gastric pull-up. Synchronous tumours are common in Hong Kong so all patients undergo an oesophagogastrroduodenoscopy (OGD) prior to treatment.

In otology Professor van Hasselt performed many tympanoplasties, and ossiculoplasties. He demonstrated the principles and practice of the 'Hong Kong flap' to me and I assisted him in many cases including parotid surgery. I watched him excise an osteoma of the ear canal as well.

To my delight I was able to assist Dr Michael Tong in cochlear implantation. This was my first time, as the Mersey region does not have one of the UK's national cochlear implant centres.

I also watched cases of acoustic neuroma excisions and an excision of a glomus tympanicum.

Nasopharyngeal carcinoma

A number of 'nasopharyngectomy and neck dissections' for recurrent nasopharyngeal carcinoma were performed during my time in the department. Generally in Hong Kong, nasopharyngeal carcinoma (NPC) is treated with radiotherapy (sometimes chemoradiation). Surgery is reserved for recurrent disease. Professor van Hasselt is the co-author of the book '*Nasopharyngeal carcinoma*', a copy of which he kindly presented to me.

NPC is 6th on the list of malignancies causing death in Hong Kong. In 1997 there were 1146 new cases and 425 deaths. On diagnosis patients are managed in the H and N clinic. Long term disease-free patients are followed up in the ENT NPC clinic.

Photodynamic therapy conference

I attended the 2001 International Photodynamic Therapy conference held at the Hong Kong Baptist University. Professor van Hasselt presented the PWH's experience with photodynamic therapy in NPC. Amongst the other leading authorities who presented papers was Mr John Carruth, who was acknowledged to be one of the pioneers of photodynamic therapy in head and neck surgery.

This being my first time to this dynamic gateway to the 'Far East', I learnt a lot not only professionally but culturally as well. I was amongst the thousands packed in Times Square, Causeway Bay who cheered in 2002 during the New Year's Eve countdown celebrations. The medical students taught me how to count in Cantonese and I'll never forget the breathtaking view of Victoria harbour. Needless to say, I enjoyed my time in Hong Kong.

Acknowledgements

I would like to thank the Editor and panel of directors of the *JLO* for awarding me this Fellowship.

In addition I am indebted to:

- 1 The British Association of Head and Neck Oncologists for awarding me their annual Travelling Scholarship.
- 2 The TWJ Foundation for giving me a training grant for Otology in Hong Kong
- 3 The Ethicon Foundation Fund Advisory Board (RCS-Edinburgh) for awarding me a travel grant.

I also wish to thank Mr Ray Clarke (my Programme Director) and the Mersey Deanery for granting me the time to take up this Fellowship.

Thanks to Professor Andrew Jones for allowing me to present our work from the University of Liverpool overseas. Finally I am grateful to Mr Tristram Lesser for his useful comments (before I went abroad) about how to make the most of the Fellowship experience.