

TWJ Otolaryngology and Neurotology Fellowship

Auckland, New Zealand - July 2018 to July 2019

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It is a great pleasure to report on my time spent working with the Auckland team as part of this excellent otology and neurotology Fellowship and I must give my sincere thanks to the Trustees and the whole TWJ Foundation for the opportunity to undertake this training.

This Fellowship provides a thorough grounding in all aspects of otology with a real opportunity for the Fellow to expand upon any area of surgery which they are particularly interested in. Supervised by Michel Neeff, Hamish Sillars and Michelle Wong, there is abundant experience and support within the department for the ongoing development and teaching of surgical skills, and the warmth and friendliness of all of the team is a real strength of the department. It is a well-established Fellowship which runs every year, linked to and awarded by the TWJ Foundation in alternate years.

The Fellowship is spread over various sites but with the majority of neurotology surgery and inpatient cases being performed at Auckland City Hospital, which is the largest tertiary referral centre in the area. Other sessions are performed at Greenlane clinical centre, Gillies Hospital, Ascot Hospital and at Starship Children's Hospital. Clinics are provided at the Greenlane clinical centre. A car is essential for the Fellowship, as on most days there is cross site working. There is a clear focus on otology training with other conditions being managed by the other sub-speciality teams.

A typical week consisted of 6-7 theatre sessions and 2-3 clinics. There is a wide range of surgeries performed and I had ample exposure to lateral skull base procedures including middle fossa and translabyrinthine surgery. Of note is that these surgeries are completed entirely by the neurotology team, with little to no involvement of neurosurgery. Advanced otology such as complicated cholesteatoma, revision mastoid surgery and blind sac closure along with endoscopic and laser approaches are commonplace. I had further experience in implant surgery including stapes surgery, cochlear implant surgery and bone bridge insertion. ABI surgeries have been performed within the department in the past. Paediatric otology surgery is undertaken at Starship and regular lists there are a feature of the Fellowship, ranging from more straightforward tympanoplasties to cholesteatoma surgeries. There is a small requirement for teaching and supervision of local trainees during occasional theatre sessions, which I felt was a great opportunity to provide training and gave me some great experience for the supervision of trainees attending my theatre sessions in the UK.

From an educational perspective, there are joint weekly full departmental meetings and involvement with teaching and presentation is expected. There are regular journal club meetings which are thorough and engaging and there is an expectation of some academic work, but this can be tailored to the Fellow's interests. Presentations and attendances at national or international meetings are encouraged and fully supported along with any educational courses the Fellow needs to attend. I had the opportunity to present research at the New Zealand Society of Otolaryngology, Head and Neck Surgery 2018 Annual Scientific Meeting (ORL 2018), attend the New Zealand Society for Balance Dizziness and Vertigo / Neuro-Otology Society of Australia 2018 joint meeting (NZSBDV/NOTSA) and the 69th Annual Scientific Meeting of the Australian Society of Otolaryngology, Head and Neck Surgery (ASOHNS 2019). I have also been fortunate to be able to publish the research undertaken with the department in the New Zealand Medical Journal. In addition to the academic aspects, there is a fully operational temporal bone lab with cadaveric bones for regular practice and the opportunity for the Fellow to be involved in teaching on the regional temporal bone course.

New Zealand clearly has a different healthcare system, with a more diverse mix of public and private providers compared to the UK, and the Fellow is able to gain experience in both of these systems. It is quite thought-provoking and notable that local population socio-economic differences, healthcare needs and endemic disease profiles do mean that conditions which are relatively uncommon in the UK, such as extensive skull base osteomyelitis, are common in New Zealand. Extensive cholesteatoma disease is commonly identified and intracranial complications of middle ear disease are not rare, and exposure to managing these cases has boosted my own confidence and ability to manage these difficult cases in my current role.

Outside of work, New Zealand is an amazing place to live. There are plenty of activities to fill anyone's schedule and whether it's sailing, surfing, diving, swimming in the sea, skiing, trekking or simply sightseeing, there is never a moment with nothing to do. If world-class food and locally produced wine are more appealing, there are many options to choose from and spending a leisurely Sunday touring Waiheke Island is just one of my personal highlights.

I definitely learned a huge amount from the Fellowship and whole heartedly encourage anyone who is interested to apply. I would also like to thank again the TWJ Foundation for the opportunity and to thank Michel, Hamish and Michelle for their invaluable time and effort in hosting the Fellowship. It has been an experience I will never forget, and my only regret is that I could not stay longer!