

TWJ Otology & Auditory Implantation Fellowship Report

Cambridge, UK, 2021-2022

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I am very grateful to the TWJ Foundation for the opportunity to undertake a Major TWJ Fellowship to Cambridge. This was a great opportunity to improve my outpatient and operative skills in complex otology and to learn from established experts in our field.

The otology department at Addenbrooke's now consists of six consultant otologists, two of whom are clinician scientists employed by the University of Cambridge. The workload in the unit covers all aspects of adult and paediatric otology, including implantation, skullbase surgery and spans secondary, tertiary and quaternary work.

There are advantages and disadvantages of undertaking a fellowship in the UK. Whilst the clinical environment was broadly similar to my previous training there were interesting philosophical differences in terms of approach, and particularly of consultant special interests, some of which were areas infrequently encountered during my registrar training, or that were approached in ways I was not familiar with. A good example of this is pulsatile tinnitus, with a specialist neurovenous MDT and an emphasis on the close connection between many cases of pulsatile tinnitus and the potential for cerebral venous outflow obstruction. Other examples of less common pathology include consultant special interests in eustachian tube dysfunction, middle ear myoclonus and various types of auditory implants, including active middle ear implants, of which I'd seen very few during training.

A key emphasis in the fellowship is placed on operative training. All the theatre lists are made up of otology cases, typically from tympanoplasties upwards in terms of scope and scale. There are a large number of relatively complex cases, including primary and revision surgery for cholesteatoma, CSF leaks and both primary and revision surgery for auditory implants. Whilst the number of lists and the number of cases on each list was reduced due to the COVID pandemic I still logged more than 200 cases, the vast majority of them 'major ears'.

The fellowship includes outpatient exposure to a range of otological conditions, including a significant proportion of patients presenting with balance problems as well as access to an

excellent diagnostic vestibular service and vestibular rehabilitation. This has certainly improved my confidence in managing patients presenting with problems like these. The fellows also benefit from a weekly tutorial with Prof Bance, usually focussed around patients presenting to clinic that week.

There is a good culture of keeping up to date with an otology journal club once a month as well as a more general ENT journal club held at monthly departmental governance meetings. This is a good opportunity to discuss the nuances of management in areas that are often technically challenging and to discuss landmark papers in the field that guide clinical management.

A key advantage of working in a university department like Addenbrooke's is the wide variety of research going on within the department and the associated university. This includes a significant benchtop science programme, predominantly focussed on cochlear implants, as well as expertise in psychoacoustics. During my time in Cambridge I worked on cadaveric and benchtop experiments as well as continuing my previous academic interests in evidence synthesis, publishing 10 papers over the year.

Perhaps the most beneficial aspect of the fellowship was the chance to spend a whole year immersed in otology, with the opportunity to discuss cases, ideas and problems with the consultant body, but also with the other fellows. Prior to arriving I was a little concerned that there being a skullbase fellow, a regional otology fellow (a final year East of England Registrar), an international fellow from Singapore and myself would mean spreading opportunities too thinly. However, the chance to discuss cases with others at a similar level but with diverse experiences was one of the highlights of the year and the root of what I hope are lifelong friendships.

Cambridge is a beautiful city, with much more going on than might be expected for its size. It's only 45 minutes to London by train and has plenty of places to eat out as well as opportunities for sports and exercise.

Reflecting on the year, I learned a great deal and enhanced my skills, both operatively and in terms of wider patient management. I have no doubt that the experience has increased my confidence, particularly in the management of more complicated cases, which will benefit my patients in the future.