

Audit team wins big grant for the Society

We are pleased to report that the Vascular Society has been successful in obtaining a grant of £380,000 from the Health Foundation to help us achieve our ambition of reducing the mortality associated with aortic aneurysm surgery to 3.5% by 2013.

The grant application included members of the VSGBI, the VASGBI, the BSIR, the Circulation Foundation and lay and patient representatives. We would like to acknowledge the contribution and assistance of all these groups.

The Health Foundation funds projects through a scheme called "Closing the Gap". Closing the Gap aims to improve the quality of care delivered to patients by bridging the gap between known best practice and the routine delivery of care. The Vascunet report of 2007 identified a clear gap in the mortality from aortic aneurysm surgery in the UK when compared with several other European and non-European countries. In line with the Quality Improvement Framework published earlier this year our project will concentrate on reducing the mortality associated with intervention for aortic aneurysms to a level of 3.5% by 2013.

The methods used will include learning from the best performing centres and assisting all centres in the adoption of processes and protocols which have been shown to reduce mortality. Guideline protocols for aneurysm repair will be produced with the aid of the specialist societies listed above and will incorporate experience from randomised trials, in particular the EVAR trials. In addition there will be a significant contribution to the project from patients and we will concentrate on auditing and improving patient reported outcomes. The project will provide support for all centres, but in particular for those which have high mortality rates, in order to facilitate improvement. This may incorporate a wide range of factors associated with patient care, including not only clinical factors but organisational aspects such as provision of ITU care, management issues, and facilities.

In order to help us achieve this goal the Health Foundation provide an extra £98,000 of funding for training of our staff during the course of the project and they will help us throughout.

This is an exciting development for the Vascular Society and represents a major advance in our role from simply auditing outcomes of our interventions to making a real improvement in these outcomes by encouraging improvements in care.

Tim Lees & David Mitchell



Tim Lees who led the bid on behalf of the Society

New endovascular fellowships

Thanks to the generosity and support of Cook Medical it is now possible for the Vascular Society to offer financial support for 3 brand new endovascular fellowships. These posts will provide further opportunities for trainees in the UK and Ireland to gain valuable endovascular experience in their training programmes.

All centres with Vascular Society members and radiologists prepared to supervisor the training will be eligible to bid to host the fellowships and a call for applications will be circulated this month. Funding up to £60,000 will be available for each post starting after November 2009. Trainees will be able to apply for the posts by national application.

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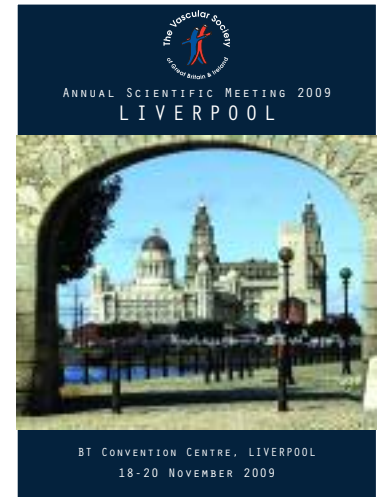
President's Message



I hope as many of you as possible will come to Liverpool to support the AGM. There are many serious issues facing vascular surgery at the present time and the views of Members are paramount to how the senior officers should proceed.

The AGM is an important forum to make your views known, and I would encourage you all to grab a microphone and participate. The quality of the meeting is totally dependent upon the interaction of the participants and speakers. I have been to several conferences recently where involvement from the audience was limited, which leads to boredom and a sterile atmosphere – so audience participation is a must! We have an excellent faculty participating

at the meeting, including some high profile international speakers. The Friday session is of a particularly high standard with talks from Professor Michael Dake, Professor Michel Makaroun, Professor Hazim Safi and the Kinmonth Lecture to be given by Professor Roy Greenberg.

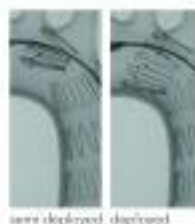


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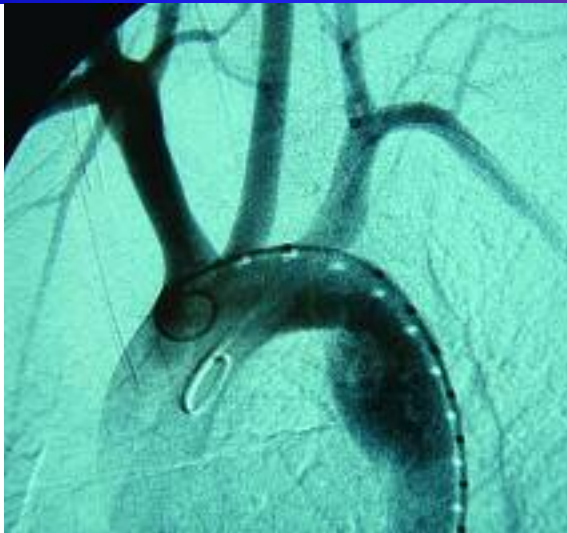
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One of the more pleasant tasks of being President has been to arrange the venues, food and beverages for the meeting, and the Gala Dinner, in particular. This will be held in the Conference Centre. Places are limited so early booking is essential if you want to join what promises to be a fabulous evening. Dress will be lounge suits and the entertainment, which will be in the same hall as the dinner, will comprise music of the Beatles, Motown and Abba!

We have had a very fruitful discourse with the BSIR and BSET and there will be a new endovascular meeting in July 2010 at a fabulous venue (Walton Hall, Staffordshire). The programme organisers are Matt Thompson and Duncan Ettles. There will be preferred papers and invited faculty. It promises to be a very exciting development, and I would urge you to attend.

We continue to strive for specialty status and have had a very valuable meeting with the NHS Employers who fully supported our case. The next stage in the process is a meeting with the Department of Medical Education of England, and hopefully, at the AGM I will have more good news about specialty status.



Should Vascular Surgery Provide the Trauma Surgeons of the Future?

Trauma is a leading cause of death and disability in the UK, and is the only disease with an increasing mortality. As trauma care is regionalised nationally, there will be a need for surgeons with specialist training in trauma surgery to deliver injury care at the major trauma centres. One potential model for delivering the appropriate training is for trauma surgery to become a component of vascular surgery, chosen by those surgeons interested in trauma care. This article discusses the potential benefits of vascular surgery taking 'ownership' of trauma surgery - for a future national trauma system and for vascular surgery itself.

Ultimately it is expected that there will be 20 to 25 major trauma centres across England and Wales; each requiring 6 to 8 surgeons to deliver specialist trauma surgery and co-ordinate multidisciplinary teams. It is unclear where these 140 - 200 trauma surgeons will come from. London is ahead of the regionalisation process with a trauma system designated to start in April 2010. Already the four proposed major trauma centres are struggling to recruit trauma trained consultants to these roles. There is an urgent need to recognise the need for trauma specialist training and to map a pathway for trauma for today's surgical trainees.

The practice of trauma surgery in the UK has diminished as general surgery has waned in favour of specialty surgery. At the same time, changes within both trauma surgery and vascular surgery have occurred which has led to a significant overlap in their skill sets, ethos and knowledge base. Both are multi-cavity specialties operating in the abdomen, chest, and pelvis. Vascular surgeons routinely operate on limb vasculature, the most commonly injured body regions and are comfortable operating in the neck, a common site of penetrating injury. Vascular surgeons stop bleeding and over 40% of all trauma deaths are due to haemorrhage. Trauma surgery is increasingly adopting endovascular approaches to haemorrhage control and vascular repair. Importantly, the skill of rapid decision-making is common in vascular surgery but is being lost from other surgical specialties.

continued overleaf

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Trauma surgeons of the future *continued*

There are also potential attractions for vascular surgery as a specialty. Trauma provides a new, younger patient population and brings a diverse range of open surgical procedures to the dwindling list in vascular surgery. Trauma surgical exposure and techniques bring confidence to difficult or unfamiliar surgical situations such as exsanguinating haemorrhage or thoracic surgery. Both specialties will benefit from a cross-fertilization of techniques, devices and treatment. There are also significant opportunities for research in the fields of ischaemia-reperfusion, vascular biology, coagulation, inflammation, bioengineering and device manufacture.

Of course, not all vascular surgeons will want to do trauma surgery - only a small proportion will wish to super-specialise. Conversely, there must be an accommodation for those surgeons in other surgical specialties who also wish to do trauma. The model for the common provision of trauma and vascular surgery exists in several centres around the world, and one in the UK, and is now regarded as one of the best-practice

models of trauma care. Vascular surgery is well placed to provide a home for a trauma surgery super-specialty. It is time for a conversation (amongst trainees in particular) as to whether the futures of trauma and vascular surgery lie together, and how to train the trauma/vascular surgeons of tomorrow.

Professor Karim Brohi FRCS FRCA

Vascular & Trauma Surgery
Barts and the London School of Medicine & Dentistry
Queen Mary University of London
karim@trauma.org

NHS AAA Screening Programme Update

Six local programmes are now screening patients using the standard operating procedure from the NHS Programme. A further four more will start in the autumn, and potentially nine further local programmes in the spring. Expressions of interests are sought for local programmes wishing to join NAAASP to start screening at the end of 2010. Details about how to apply are available on the NAAASP website (<http://aaa.screening.nhs.uk>), with a closing date of the end of November 2009.

The criteria that are required for local programmes are clearly listed. They include adherence to the Quality Improvement Framework standards for elective AAA surgery recommended by the VSGBI earlier this year.

A number of other issues are currently under discussion in the National Programme including:

- Ensuring the strategic fit of all potential local programmes in each Strategic Health Authority (the key being that screening networks should be allied to clinical networks).
- The optimal method of ultrasound aortic measurement (inner wall to inner wall, or outer wall to outer wall).
- Developing a national training programme for screening technicians.
- Encouraging PCTs who are reluctant to start AAA screening in the current climate.

Jonothan Earnshaw



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MEMBER OF THE
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Obituary

Crawford Jamieson

VSGBI President 1995

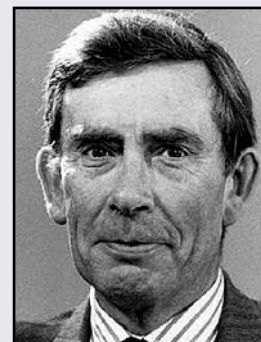
Crawford Jamieson wore his great skill and intellect lightly. When he stepped down as Chief Editor of the British Journal of Surgery he was described in a Leader as a “bon viveur” of surgery. As a raconteur he was second to none and for those fortunate enough to fish and shoot with him, the day’s sport was always followed by a memorable evening. Furthermore, his ability to encourage Sassenachs to dance Scottish reels at his New Years Eve parties was legendary.

This easy going ebullience hid a fierce intellect, and he would graciously pass on new ideas and thoughts to colleagues and trainees. He was a very patient surgical trainer and was always able to find a kind word of encouragement.

He was Senior Lecturer at St Mary’s Hospital before becoming a consultant at St Thomas’ Hospital. He was also a founding

member of the Joint Vascular Research Group, and the friendships within this group stimulated the development of vascular surgery in the United Kingdom.

As Chief Editor he improved the standing of the British Journal of Surgery and was fastidious about both scientific reliability and English usage. He always said that his proudest moment was being made President of the Vascular Society of Great Britain and Ireland – a role he fulfilled with his usual tact and enthusiasm.



Crawford Jamieson

John Wolfe

This year the Council has also recorded the deaths of **Mr Chee Soong** from Belfast City Hospital and **Mr Gordon Stewart** from Ayr. These Members will be remembered at the Society’s Annual Business Meeting on 19th November.

Officer Posts**President for 2011-2012**

Professor Ross Naylor was elected by Council as President for 2011-2012. He will assume the role of Vice-President Elect from November 2009

Honorary Secretary 2010-2014

Mr Michael Wyatt was elected by Council as Honorary Secretary from 2010. He will assume the role of Honorary Secretary Elect from November 2009

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Quality Improvement Framework for Major Amputation Surgery

Following the concept used for aortic aneurysm surgery, we have observed a high mortality rate after amputation surgery in the UK. Although there are only a relatively small number of procedures on the National Vascular Database a mortality rate of over ten percent has been recorded. HES data would suggest that this is even higher nationally and may reach over twenty percent.

Using the same model employed to address the issue of outcomes for AAA, Council has recommended a Quality Improvement Framework for major limb amputation. There will be a stakeholder meeting on 3rd February 2010 at the Royal College of Surgeons after which we will put together a provisional document for widespread consultation. Participants will be invited from the VSGBI, VASGBI, SVN and others. Although places at the stakeholder meeting will be limited, anyone wishing to join in this process should please contact the Secretariat for further information.

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Acute Kidney Injury Audit

The Society will be conducting a national audit of Acute Kidney Injury over the next two and a half years. We have developed an additional page within the National Vascular Database (NVD). The dataset has been developed in collaboration with the Renal Association, The Vascular Anaesthetic Society of GB & Ireland and Intensive care specialists. The Society will lead this project and we are seeing collaboration with our European colleagues and cardiac surgeons.

We have been fortunate to receive external funding to appoint a co-ordinator to help with data collection and analysis, as well as funds to place additional fields within the NVD. These are currently being developed and should be available to view by the AGM in Liverpool. The page will appear as an additional tab within the aortic aneurysm dataset. We will be contacting you about data collection and also to ask you to help in identifying collaborating Intensivists, as some of the data will need to be collected on the ICU. If you have any queries, please contact David Mitchell, Chairman Elect, Audit & Research Committee at david.c.mitchell@nbt.nhs.uk and please come and visit the Vascular Society stand at the AGM.



Vascular Society Lifetime Achievement Awards

This year, the President has introduced Society Lifetime Achievement Awards, to recognise vascular surgeons who have made a valuable contribution to our discipline but who may not have been recognised in any other way. The awards will be presented on the Friday at the AGM and the first recipients will be Mr Malcolm Simms and Mr Brian Heather.

Malcolm Simms

Malcolm Simms qualified from St Georges Hospital London, but spent most of his surgical training in the Midlands becoming a lecturer in the renowned Vascular Surgery Department of Professors Sir Geoffrey Slaney and Frank Ashton.

When he arrived in Selly Oak Hospital as a newly appointed vascular surgeon in 1985 his skills and energies really came to the forefront. It was apparent to everyone working with him at the time that a whole new era of vascular surgery was emerging. His skills, particularly in limb salvage surgery, and commitment to high quality outcomes established Selly Oak as a national and international centre. However, it was his boundless energy,



enthusiasm and compassion for the patients that affected all around him. There are at least 30 consultant vascular surgeons around the world today who were inspired to pursue a career in Vascular Surgery after working with Malcolm.

Despite a punishing clinical workload Malcolm has maintained a strong commitment to high quality, clinically relevant research. Many ideas, for example pre-operative ultrasound assessment prior to distal bypass surgery, replacing angiography, were first suggested by Malcolm often to the disbelief of many others who have now quietly adopted his ideas. Many of those who worked for him will remember the beginning of a new project which always began by reviewing the "file cards" on which Malcolm meticulously (although not always legibly) recorded the details of every procedure he carried out, including the long term outcomes.

Brian Heather

Malcolm has made an enormous contribution in every aspect of the field of Vascular Surgery through out his professional life and truly deserves a Vascular Society Lifetime Achievement Award

Brian Heather was consultant vascular surgeon at Gloucestershire Royal Hospital until his retirement in 2007.

Brian believed strongly in the theoretical advantages of aneurysm screening to prevent premature death from rupture, and rather than wait for evidence, he

got a twenty year start by initiating a community based screening programme for sixty-five year old men. The strategy he used, which legend has it he designed on the back of a cigarette packet with Elaine Shaw, is the basis of the model used by the NHS AAA Screening Programme. Brian was an energetic supportive and an endearing colleague, and his pioneering work has been as fundamental as that done by the scientists who created the evidence base for a screening programme. By the time he retired, the Gloucestershire Aneurysm Screening Programme had been running for sixteen years and the number of ruptured aneurysms seen in Gloucestershire's Hospitals had reduced by two thirds. He is a worthy recipient of a Lifetime Achievement Award.



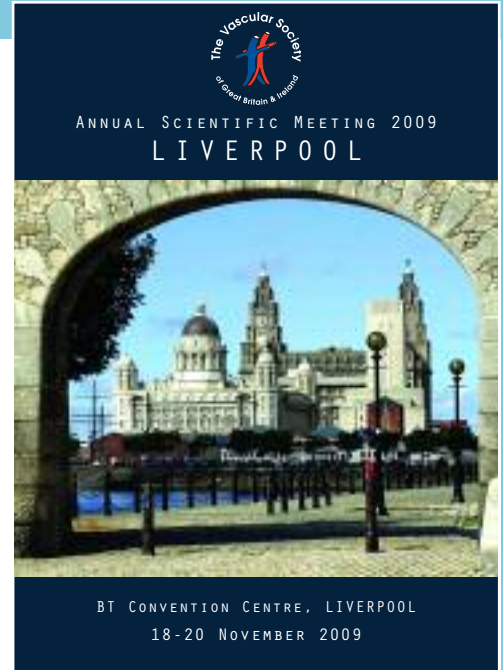
VSGBIAGMLIVERPOOL2009

Registration

On-line registration is available on the Society's AGM website <http://annualmeeting.vascularsociety.org.uk> - please register soon if you have not already done so. The final programme is now available to download from the website.

Annual Dinner

The Society Dinner will be held in the BT Convention Centre on Thursday 19th November. The dinner will be informal, with casino tables and a live band. All Members are encouraged to attend and bring colleagues and guests. Tickets can be booked via the meeting registration form. No tickets will be available for sale at the venue – please book your ticket in advance.



There will be no formal table plan at the Annual Dinner. Tables seat 10 guests. Only tables of 10 can be reserved on receipt of full payment. If a table is not reserved, guests will be required to arrange their own seating at the dinner. *Dress for the dinner is lounge suits.*

Welcome Drinks Reception

A reception will be held on Wednesday 18th November from 6.40-7.30pm in the Conference Centre.

Social Programme

A two hour guided tour of Liverpool, to include the Waterfront, Beatles highlights and Cathedrals, will take place on Thursday 19th November. The cost is £10 and bookings should be made via the registration website.

Hotel Accommodation

Hotel accommodation is still available and details can be found on the AGM website <http://annualmeeting.vascularsociety.org.uk>

Posters

Abstract posters will be displayed in the Upper Galleria at the Conference Centre during the meeting, and will be judged during the Wednesday evening drinks reception. A prize for the two best posters will be awarded.

The advertisement features a large image of a blue mesh catheter being inserted into a blue liquid stream. Text on the right side reads: 'The UnBalloon™ Non-Occlusive Modeling Catheter', 'A Better Answer to Aortic Stent Graft Modeling. Through and Through.' At the bottom left is a small inset image of a stent graft. Text at the bottom right says: 'Introducing The UnBalloon Non-Occlusive Modeling Catheter. Now, model aortic stent grafts without occluding blood flow. Learn more about our history-making products at www.lemaitre.com.' The LeMaitre logo is at the bottom center.

VSGBI AGM LIVERPOOL 2009

Breakfast Symposia

A breakfast symposium will be held on Thursday 19th November at 7am-8am, on The Treatment of Intermittent Claudication.

You do not need to register separately for this symposium as it is included in the meeting registration fee. However, if you are interested in attending, it would be helpful if you could please indicate this on your registration.

Annual Business Meeting

The Business Meeting is scheduled to take place on Thursday 19th November 2009 at 5.30-6.30pm. An agenda and the minutes of last year's meeting are enclosed for Ordinary Members only. Further copies will be available at the meeting. All Ordinary Members are encouraged to attend.

Reports from the Society's Officers can be found in the Society's Yearbook, which is available on the website.

The meeting will commence with matters of Any Other Business. Members are encouraged to advise the Office prior to the AGM if they would like to discuss any particular matters.

Yearbook

The Society has again produced a Yearbook for Members, which will be available for all delegates at the AGM. It will be sent to those Members not attending the AGM following the meeting. The Yearbook, which includes the programme of the meeting and details of abstracts to be presented, is published on the Society website and Members are encouraged to look at this before the meeting. The Society would like to acknowledge the work of Nikki Bramhill from tfm Publishing Ltd for her hard work in the production of the Yearbook.

Honorary Members

Professor Michael Dake and Professor Michel Makaroun will be awarded Honorary Membership of The Vascular Society at the AGM.



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The Circulation Foundation



A new phase 2010-15

The Circulation Foundation has developed a business plan and fundraising strategy to give a clear and agreed sense of purpose and direction over the next five years. The business plan has been based upon a thorough analysis of the context within which the

charity operates, the challenges and opportunities we are likely to face over the next five years and how our resources can be put to best use to achieve our objectives. As there has been no cohesive structure to the charity in the past we have devised a vision, which is our overarching goal and gives us our reason for existing.

To create a world where all people are free from vascular diseases

In order for us to be able to for us to do this we have identified 4 main aims. These aims will provide a framework for our projects over the next 5 years and will enable us to allocate resources and budgets more accurately.

1. To raise awareness of all vascular diseases for public benefit and for those instrumental in its prevention and treatment.

The main problems that the Circulation Foundation face are not only that lack of awareness of vascular diseases amongst the general public, but also that awareness of the Foundation amongst specialist vascular healthcare professionals is also low. It is therefore vital that we raise awareness of the CF and vascular disease with the general public, and with healthcare professionals, to help to change the public attitude to vascular health and raise the profile of the Foundation.

2. To be the first port of call for those seeking easily accessible, high quality information and to provide vital and on-going support for vascular disease sufferers and those who care for them.

The Foundation currently offers 21 patient information leaflets on a wide range of vascular

diseases and has comprehensive patient information on the website along with an “ask the experts” facility. We are currently exploring dedicated patient support groups and setting up a helpline.

3. To fight for accessible quality vascular services for all.

We will continue engaging in parliamentary lobbying and join like-minded organisations which campaign for patient rights.

4. To promote, encourage and facilitate research into all vascular diseases to improve quality of life.

The CF already offers an annual grants programme to fund research into vascular disease. Over the next 5 years, the Foundation will increase its research portfolio to enable large, quality research to be undertaken for the public benefit under the Circulation Foundation banner.

How will we achieve these aims?

We have developed a fundraising strategy which will give the Circulation Foundation realistic and achievable targets to raise funds to support the implementation of the business plan. For detailed information on this, please contact the Foundation office.

The first main project that we will be undertaking will be:

Vascular Disease Awareness Week; 8th – 15th March 2010

The Circulation Foundation will be holding the UK's first dedicated national vascular disease awareness week, focusing on diseases of the lower limb. We will be producing a Vascular Risks Handbook which will be available for patients and healthcare professionals and will include disease specific information, risk factor information, lifestyle and diet tips and a record at the back for patients to note their test results and any other

information. This will encourage patients to take ownership of their treatment and will have information to guide them on the road to vascular health.

We would really appreciate it if you would consider holding awareness-raising or fundraising event in your departments during this week. We will have information packs available.

Circulation Foundation Research Grants 2009

The Foundation received a record number of applications for the awards this year, up 22% on 2008. The standard of applications was very high, and following the selection process we are pleased to announce the following awards:

The **Circulation Foundation Clinical Research Fellowships** of £20,000 to support research in any area of arterial or venous disease either in basic science or in clinical medicine or surgery is awarded to:

The Circulation Foundation

35-43 Lincoln's Inn Fields, London, WC2A 3PE

Tel: 020 7304 4779 Fax: 020 7430 9235 E-mail: info@circulationfoundation.org.ukwww.circulationfoundation.org.uk

Mital Desai, UCL Royal Free, for his research into the development and analysis of new aortic stent grafts based on a nanocomposite polymer.

The Mary Davies Research Fellowship of £25,000 is given to support research activity, in either clinical or basic science research in any area of arterial vascular disease is awarded to:

Robert Ariens, University of Leeds, for his research into the role of thrombin-activatable fibrinolysis inhibitor in abdominal aortic aneurysm (AAA)

Two Endovascular Travel Grants of £5000 were awarded to:

Jonathan Smout, Freeman Hospital, who will complete a year endovascular fellowship at the Sir Charles Gardiner Hospital in Perth, Australia.

Martin Claridge, Selly Oak Hospital, who will complete a year's vascular fellowship at the Gold Coast Hospital, Queensland, Australia.

Society of Vascular Technology (SVT) Grant of £7500, intended either to fund research projects or travel to another centre for educational or research reasons is awarded to:

Mark Black, Manchester Royal Infirmary, for his research into the role of contrast enhanced ultrasound for determining vulnerable patients at risk of stroke.

The Owen Shaw Award of £3,000 is awarded for study related to the rehabilitation of amputees. This is an annual award that has been made possible by the kind donations of the late Mr Owen Shaw and is awarded to:

Natalie Vanicek, University of Hull, for her research into the use of outcome measures in outpatient amputee rehabilitation in the UK

Made it!

Having done our training and acclimatisation it looked like we were not going to get up Mont Blanc because of bad weather, with forecast of thunder and lightning and heavy snow on the day we had planned our attempt. Fortunately, we got a break in the weather and had a beautiful sunny clear day for our attempt on the summit, a day earlier than planned. We went via Mont Blanc de Tacul and Mont Maudit, a long but spectacular route. We could see for hundreds of miles and look down on the summits for miles around. It was exhilarating but exhausting!

I am extremely grateful for all those who have sponsored me and help raise money for the Circulation Foundation. Anyone who has not donated, do not worry you still can via www.justgiving.com/shanemacsweney/

Thank you for your generosity.

Shane MacSweeney

**Virgin London Marathon**

Calling any keen runners! If you have not entered the ballot for next year but would still like to run in the best marathon in the world, read on!

We have been inundated with applications for the Virgin London Marathon 2010. If you would like to run for the Circulation Foundation, please email info@circulationfoundation.org.uk as we have a limited number of Golden Bond places, and we will be deciding on our runners in October. If you have entered into the ballot, and are lucky enough to gain a place, please consider running for the Foundation.

Fore!! Circulation Foundation Golf Day

Following on from the previous success, the Circulation Foundation Charity Golf Day returns on **Friday 25th June 2010** at the award winning Ridding Park in Harrogate, Yorkshire. The day will start with bacon rolls and coffee before tee off time at 11am. Golfers will play in teams of 4, each team will play 18 holes and will find extra challenges along the way to test their driving and putting skills. Prizes will be awarded to the most successful and creative players on the day!

We will be holding a charity dinner in the evening at the Ridding Park Hotel. This will commence at 7pm with a drinks reception in the elegant Drawing Room and Library, followed by a three course dinner with music and entertainment in the splendid Radcliffe Room. The Foundation has a number of rooms reserved at the hotel. These will be offered at a special rate for this event.

If you would like any further information about this event, or would like to register your place for golf and the dinner, please contact info@circulationfoundation.org.uk or phone 020 7304 4779.

And finally.....

The Circulation Foundation relies on the support and guidance of Vascular Society members to enable us to continue its good work. We need your help to grow and develop into an organisation which serves both the public and healthcare professionals, and can hold its own not only within the charity world, but also in society as a whole.

If you would like any information on any of our forthcoming projects or would like to order any patient information leaflets, please contact the office.



The Vascular Society of Great Britain and Ireland

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 Vice-President Elect: **Mr Peter Lamont**
 Honorary Secretary: **Mr Jonathan Earnshaw**
 Honorary Treasurer: **Mr Simon Parvin**
 Chairman, Training & Education Committee:
Professor Cliff Shearman
 Chairman Elect, Training & Education Committee:
Professor Jonathan Beard
 Chairman, Audit & Research Committee:
Mr Tim Lees
 Chairman Elect, Audit & Research Committee:
Mr David Mitchell
 Chief Executive:
Ms Jeanette Robey

Welcome to the following new Members of the Society

Ordinary

Mr Nityanand Arya, Pilgrim Hospital, Lincolnshire

Mr Marco Baroni, York District Hospital

Mr Marek Blaszczynski, Prince Philip Hospital

Mr David G Cooper, Gloucestershire Royal Hospital

Professor Duncan Ettles, Hull Royal Infirmary

Ms Monica Hansrani, James Cook University Hospital

Mr Robert Heintjes, Aberdeen Royal Infirmary

Mr Adrian Locker, West Wales General Hospital

Mr Dynesh Rittoo, Royal Bournemouth Hospital

Lt Col Nigel Tai, Royal London Hospital

Mr Mark Tomlinson, Royal Lancaster infirmary

Mr Leith Williams, Arrowe Park Hospital

Affiliate

Mr Sean Matheiken, Kings College Hospital

Mr Simon Neequaye, Wexham Park Hospital

Mr Usman Jaffer, Luton & Dunstable Hospital

Future Vascular Society meetings

The Society will be holding its Spring Meeting on **Thursday 11th March**. This will take place at the East Midlands Conference Centre on the subject of 'Saving Legs'. Further information regarding this meeting will be available at this year's AGM.

AGM 2010 - Brighton - 24-26 November 2010

AGM 2011 - Edinburgh - 23-25 November 2011

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