



# The Bariatric Surgery Registry Newsletter

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## Greetings!

Welcome to the Eighth Edition of the Bariatric Surgery Registry (BSR) Newsletter. It's been a busy three months for everyone involved in the registry. Participation in the registry continues to grow with enthusiastic interest from bariatric surgeons, their staff and hospitals.

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## HealthScope Agreement Reached

On August 1, Michael Coglein, HealthScope CMO, advised all bariatric surgeons of the agreement between Monash University, the Obesity Surgeons Society (OSSANZ) and HealthScope. As such all HealthScope/ACHA hospitals will soon be able to contribute to the Bariatric Surgery Registry. As part of the ethics process, Principal Researchers/ Investigators (PI) have been suggested for each HealthScope site. PIs are required to submit their CVs for the NEAF.

If you have been asked to be an Investigator for a hospital, please reply to Jenifer Cottrell ([jenifer.cottrell@monash.edu](mailto:jenifer.cottrell@monash.edu)) with your CV in order to hasten the approval process.

The news this month that all Ramsay sites are to come on board was equally well received. Once final approval is obtained at their sites, the Bariatric Surgery Registry will have been approved by all but a small number of remaining sites in Australia.

Again, Principal Investigators will be nominated for all Ramsay sites and asked to respond to Jenifer Cottrell, as soon as possible, and to include their CV for the NEAF.

Governance can be a time consuming process so your cooperation is needed in order to proceed with the submission of procedural data from these sites.

## The Bariatric Surgery Registry GOES WEST

Prof Wendy Brown, Project Manager Dianne Brown, and Customer Relationship Manager Jenifer Cottrell visited Perth in August. A dinner was held to thank all WA

surgeons and staff for their support of the BSR. Many of the best contributors to the registry

come from WA and their outstanding contribution was recognised. Prof Wendy Brown gave a presentation "Bariatric Surgery Registry 2016 Update" which included findings from

the upcoming Annual Report. Prof Jeff Hamdorf was a tremendous help with organising the dinner held



at the University Club of Western Australia.

Everyone invited was treated to a magnificent meal and hopefully walked away feeling very positive not only about their contribution to the registry, but also to the wider bariatric surgery community. The ultimate aim of the Bariatric Surgery Registry is to improve patient outcomes and this is certain to be



achieved with participation and generous support of all bariatric surgeons and their staff.

Dianne and Jenifer also visited a number of surgeons' rooms whilst in Perth, to present the BSR to staff as well as to assist them catching up with submitting Follow Up data. Feedback was received there was a better understanding about the importance of their participation and both surgeons and staff felt much more comfortable with the data process after the visit.

Jenifer Cottrell will head to Tasmania Sept 21-24. Those from the Apple Isle are very welcome to contact her to arrange a time to meet and discuss the registry.

the data we receive, there would be no registry. The Registry is completely dependent on your efforts so we want nothing more than to make this as streamlined as possible.

Registry staff visits and dinners will be planned across Australia in the coming months. Contact Jenifer to let her know what your rooms require (presentations, help getting caught up with data, etc.) so we can plan our visits.

## THANK YOU FOR THE SURVEY RESPONSES

We are very grateful to all the surgeons who took the time to complete our surgeon survey. We will be using these results to improve our data capture systems and continue to develop a relationship with our surgeons and their teams that is as productive and cordial as possible!

## Coming Soon: The FOURTH ANNUAL REPORT of the Bariatric Surgery Registry

The 2016 Annual Report has been completed and gone to press. Findings derived from the data are proving to be very interesting. However, it has heightened our awareness of the need for complete

Table 22 - Treatment of patients with diabetes reported at baseline followed up at 12 months (n=436)

Diabetes treatment	Baseline		12 months	
	n	%	n	%
Diet/exercise	78	18%	28	6%
Non-Insulin (mono) therapy	156	36%	62	14%
Non-Insulin (poly) therapy	51	12%	14	3%
Insulin	99	23%	42	10%
Treatment not stated	52	12%	124	28%
Surgery Alone	NA		166	38%



**The Bariatric Surgery Registry Roadshow... the BSR comes to YOU!!**

**The key to the success of the Bariatric Surgery Registry is the relationship we have with Surgeons and their Staff!!**

Registry staff are not only keen to meet everyone who makes the Registry possible but are just as ready and willing to help when needed. The remarkable commitment to the BSR by surgeons, staff and hospitals is greatly appreciated. Much time has to be set aside to enter data, and this effort is not lost on our staff. Without



submission of all data especially around diabetes treatment. Our data points to a profound effect of bariatric surgery on diabetes treatment, but there is a high proportion of data (28%) that is unknown and can therefore call into question the effect. Your diligence in completing this field on Annual Follow Ups would be greatly appreciated.

Individual Surgeon's Reports should be received by the end of November. Thank you for those submitting any outstanding data, as this will ensure the Registry is as up to date as possible. As the Surgeon Reports are not yet finalised, please submit any outstanding reporting to us as soon as you feasibly can.

***Just a reminder that surgeons are eligible for RACS Continuing Medical Education credit in the Audit Section for participating in the Bariatric Surgery Registry.***

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## **Paperless Office? Enter online with the BSR-i**

The online database known as the Bariatric Surgery Registry Interface (BSR-i) allows participating surgeons and their data collectors the option to enter data directly onto the electronic interface, eliminating the need for hard copy forms. Watch the YouTube Training Video available <https://www.youtube.com/watch?v=vdub6xlpJeY&feature=youtu.be>

Alternatively, a webinar or onsite training can be organised. For information please email [Jenifer.Cottrell@monash.edu](mailto:Jenifer.Cottrell@monash.edu)

**OR...you can enter some of your data on paper forms and other data on spreadsheets – for example, we can send you peri-operative follow up on a spreadsheet rather than on individual blue forms, if you prefer to work this way (and want to save a few trees....) Please contact Jenifer if you'd like to make this change!**

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## **STOP PRESS – MJA Article Published**

The latest edition of the MJA includes a Perspective Piece entitled ***Streamlining ethics review for a multisite quality and safety initiative***. Our clinical lead, Prof Wendy Brown, also features in a podcast on the MJA site where she discusses both the ethics process for the BSR as well as the outcomes we are finding from bariatric surgery – go to <https://www.mja.com.au/multimedia/podcasts> to hear more!

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## **GROWING THE BSR: The Build Phase gains momentum**

The number of consented patients has reached 16,387, while 569 have chosen to Opt Out (3.25%). The number of participating bariatric surgeons has increased to 119 contributing from 70 sites across Australia.



There are 164 hospitals on the BSR database that perform bariatrics. This chart shows Hospitals by state, if it is public/private as well as their current status:

State	Approved Sites		Sites In Progress			Sites Remaining
	Not Contributing	Contributing	H-Scope	Ramsay	Other	
ACT	0	0	1	0	2	1
NSW	9	9	5	11	4	13
NT	0	0	1	0	0	0
QLD	1	14	3	7	3	5
SA	0	8	0	0	1	4
TAS	1	4	0	0	0	0
VIC	2	28	5	4	4	0
WA	3	7	1	1	1	1
<b>Total</b>	<b>16</b>	<b>70</b>	<b>16</b>	<b>23</b>	<b>15</b>	<b>24</b>

Hospital Type	Approved Sites		Sites in Progress	Sites Remaining
	Not Contributing	Contributing		
Public	7	18	8	10
Private	9	52	46	14
<b>Total</b>	<b>16</b>	<b>70</b>	<b>54</b>	<b>24</b>