

The Bariatric Surgery Registry Expresses Sincere Appreciation of Its Major Funders and Sponsors



ETHICON
PART OF THE *Johnson & Johnson* FAMILY OF COMPANIES

Shaping the future of surgery

Johnson & Johnson has committed funding over a 5 year period with a grant to fund the implementation of Patient Reported Outcome Measures (PROMs) into the Bariatric Surgery Registry.



The Registry has also been extremely fortunate to have support from Avant for a 12 month period over 2018 and 2019, focusing on the commencement of PROMs within the Registry.

Johnson & Johnson and Avant are recognised as Platinum Sponsors of the Bariatric Surgery Registry and are acknowledged for their generous support.

Medtronic

Medtronic has been an industry sponsor of the Registry since 2013, annually contributing funds which support the Registry's day-to-day operations and the New Zealand arm of the Bariatric Surgery Registry.



Since 2012, Gore has provided funding for the Bariatric Surgery Registry. Their ongoing contribution helps sustain the operations of the Registry across Australia and New Zealand.

Medtronic and Gore are recognised as Gold Sponsors of the Bariatric Surgery Registry and acknowledged for their unwavering support of the bi-national project.



A New Generation Medical Device Company

Applied Medical was one of the first industry sponsors to support the Bariatric Surgery Registry. Ever since 2011, Applied Medical has continually provided funding to bolster the bi-national Registry.

Applied Medical is recognised as a Silver Sponsor of the Bariatric Surgery Registry and acknowledged for its resolute backing since the Registry commenced.



Australian Government

Department of Health

The Bariatric Surgery Registry is sincerely grateful to the Australian Government's Department of Health for their continued support and announces the successful acquisition of funding for the Bariatric Surgery Registry until September 2022.

Registry Highlights for 2018

- ❖ 50,000th Participant Reached
- ❖ New Zealand Participants Enrolled
- ❖ Continued Commonwealth Funding until 2022
- ❖ Industry Funding Secured
- ❖ Sixth Annual Report Published

Seasons Greetings!!

Sincere wishes for the upcoming holidays are extended to all who support the Bariatric Surgery Registry. Enjoy the festive season!

The Registry will close for the holidays from noon on December 20th 2018 with staff returning on January 2nd 2019. Please note that no staff will be available during the Christmas period.

Registry Participation Improving Your Practice

Taking part in the Bariatric Surgery Registry can influence the administration of surgeons' and gastroenterologists' practices.

The post-operative outcomes of their patients provides the Registry with its most valuable data. The value of this data depends on how complete it is. If follow-up data is not provided, the Registry is unable to fulfill its purpose of demonstrating the safety and effectiveness of bariatric surgery.

Many have suggested that there is the potential for the under-reporting of adverse outcomes. Accurate reporting of outcomes can only be achieved when follow-up data is provided to the Registry in a timely manner, and all data fields addressed.

Many surgeons have authorized their practice staff to complete the follow-up data, which is acceptable, but only when they know that the information is recorded in patients' medical records. The Registry frequently receives feedback from staff who say that this information can be difficult to find and/or time consuming. In order for staff to carry out this duty, surgeons need to ensure the medical

records are complete, easy to read, and easy to follow. Co-morbidities such as diabetes and medications should be kept in a unique part of the record where staff can easily find this vital information.

The Registry encourages active follow-up of bariatric patients, including annual follow-up as commonly recommended. Often patients do not return to see a surgeon because of cost or distance, but regular phone calls are an easy way to stay in touch and show your commitment to their health and well-being for the long-term.

The routine of Registry participation will make for better professionals and practices. It will encourage complete and accurate record taking, vital to the practice of surgery and gastroenterology.

The data within the Registry is for research purposes only and it cannot serve any other purpose. It cannot be relied upon as an accurate source if there is underreporting of adverse events or incomplete data.

Let your participation in the Bariatric Surgery Registry help make you a better health professional and ultimately boost your practice.

Surgeon Reports & Timely Data

Individual surgeon reports will be posted shortly to those surgeons who have contributed sufficient data to the Registry to allow for analysis. The reports are based on operations and follow-ups which took place during the period October 1st 2017-September 30th 2018.

Please note that operations, which occurred prior to October 1st 2017, but were submitted in this period, are NOT included in the reports. Timely submission of all data is essential for up-to-date reporting and ensuring the Registry's data is current as possible.

Furthermore, submitting operation data as soon as feasible means that the Participant Fact Sheets (PFS) can be posted to the bariatric patients sooner rather than later. It has been observed that there are more opt

outs amongst patients who receive a PFS months after their operation in comparison with those who receive it within a month of the procedure.

New Data Elements

The following additions have been added with regard to operation data:

- Single Anastomosis Duodeno-ileostomy (SADI)
- Stomach Intestinal Pylorus-Sparing Surgery (SIPS)
- Endoscopic Sleeve Gastroplasty (ESG)
- Surgical technique: open, laparoscopic, endoscopic, and/or robotic

The window for collecting annual follow-up now includes the period of 3 months before the procedure's anniversary to 3 months after. This will allow for more timely data entry within a 6-month window rather than having to wait for the anniversary date before data can be entered.

Gastroenterologists Invited to Take Part in the Bariatric Surgery Registry

Along with the decision to include the endoscopic sleeve gastroplasty (ESG), has come the inclusion of gastroenterologists in the Registry.

Dr Saraubh Gupta extended an invitation to the Bariatric Surgery Registry to be a part of the Inaugural Bariatric and Metabolic Endoscopy Symposium on 16 November. Invitations to participate and copies of the Sixth Annual Report were included in attendees satchels with Registry managers on hand to discuss the project.

All gastroenterologists are encouraged to contact the Registry to take part in this important health initiative.

Collection of Indigenous/Ethnicity Status

The Bariatric Surgery Registry allows the opportunity to support the measurement and understanding of determinants of obesity and disparities in health outcomes for Aboriginal, Torres Strait Islander peoples, Māori and Pacific Islands peoples.

To achieve this aim, the Registry collects the indigenous (Australia) and/or ethnicity

(New Zealand) status of its participants. Whilst New Zealand is proficient in collecting ethnicity, it has not been as common to collect indigenous status in Australia.

In order to strengthen the data captured, please consider the importance of collecting this information accurately on the data collection forms.

'18 Leading and Valued Contributors



Contributor status is based on the current calendar year. Rates of follow-up and number of operations will be reviewed as at the end of the year.



To be considered a Leading or Valued Contributor, a follow-up completion rate of 75% must be achieved. Leading Contributors must have at least 100

operations in the Registry and an ongoing contribution of at least 30 operations per calendar year. Valued Contributors need to submit at least 30 operations in a calendar year.

For 2019, follow-up rates will be at 80% based on the funding agreement with the Commonwealth Government, ensuring that the Registry maintain an 80% follow-up completion rate.

Linkage with LapBase Available

The Registry can now directly link with LapBase to collect **annual follow-up data** for those surgeons who have subscriptions to the software. [NOTE: Surgeons still need to provide operation and perioperative follow-up data.]

All enquiries about this linkage must go to LapBase directly. For further information contact Wayne at support@lapbase.com

Notice for Principal Investigators

Principal Investigators for the Registry are regularly asked to provide their signatures for annual progress reports, as well as other

ethics and site governance applications. The Registry is now required to submit these online using the Ethics Review Manager (ERM) website.

All Principal Investigators are required to have accounts with ERM in order to provide their signatures. Registry staff will create the accounts but to complete the account set-up, Principal Investigators will be emailed a link to confirm their details.

Going forward, Principal Investigators are asked to please be aware of emails with the sender donotreply@infonetica.net as they will be requiring an action or signature. Registry staff will advise your rooms when such emails are coming.

Welcome to New Database Manager: Srikanth Kommireddy

Srikanth joined the Registry team in August and has hit the ground running looking at how to improve efficiencies within the database. He and his family recently migrated to Melbourne from Denmark where he was a Data Manager with Novo Nordisk.

Having met a number of surgeons at September's ANZMOSS meeting, Srikanth is looking forward to building on those relationships and working towards an effective way of collecting data.

Recognising Star Staff

Nominating employers gave glowing nominations about their staff who do so much to help with Registry data. The latest nominees are listed below. These staff are well known amongst the Registry's staff who fully support their nominations.

Certificates of Outstanding Merit are awarded to

Cheryl Hansen (Mr Chris Hensman)

Fiona Prosser (Mr Chris Hensman)

Melanie Papadopoulos (Mr Arun Dhir)

Contact the Registry to nominate your staff who keep your Registry data up to date. Nominees can also include your hospital data collectors. Upon receiving staff nominations, the Registry reviews the

recent efforts made on behalf of the practice and confers a Certificate for Outstanding Merit to deserving nominees.

Nominations made prior to the next newsletter will be mentioned and all nominees for that period will go into a draw for a \$100 VISA gift card.

2018 ANZMOSS and IFSO (Dubai)

All Melbourne staff and Auckland staff were on hand at the ANZMOSS conference September 6th and 7th. As always, it was wonderful to catch up with so many supporters and put faces to names!

The new logo could be seen wherever you looked with Registry water bottles in everyone's hands.



Thank you to Bunbury surgeon Dr Senarath Werapitiya who said he was advertising the Registry!

Programme Manager Brooke Backman, Customer Relationship Manager Jenifer Cottrell and Data Manager Aileen Heal travelled to Dubai for the IFSO 2018 World Congress 26-29 September, along with Clinical Director Wendy Brown and NZ Clinical Lead Andrew MacCormick. Dr. Roseanne Misajon, from the Cairnmillar Institute, also attended the conference presenting a poster reporting on the patient reported outcome measures (PROMs) study which she has been leading.

Prior to the start of the Congress, they took part in a collaborative meeting 'Bariatric Registries and Their Value' with lead researchers from the bariatric surgery registries of the UK, USA, Netherlands, France, Russia, Sweden, Norway, Austria, Germany, Italy, and Mexico. Prof Jacques Himpens presented the 4th Report of the IFSO Global Registry and Prof John McNeil, Head of School of Public Health and Preventive Medicine at Monash University spoke about the science of registries.

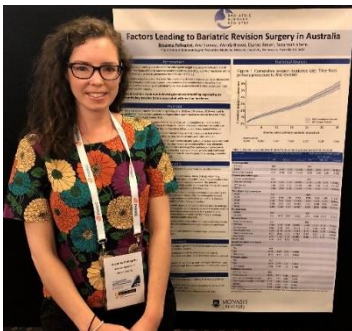
Wendy Brown gave numerous presentations over the course of the conference and Andrew MacCormick took part in a debate with American John Morton about whether there is a role for Centre of Excellence programmes.

In addition, an abstract of the Registry was presented as a short communication by Jenifer Cottrell.

2018 Annual Scientific Meeting of the Australasian Epidemiological Association

Monash University biostatistician, Ms Breanna Pellegrini presented a poster at the AEA Meeting in Perth 23-24 October. She and Dr Arul Earnest have investigated how to model the revision rate of bariatric surgery in Australia. They found the Nelson-Aalen method could be used to estimate the probability of revision surgery. Using this technique, they were able demonstrate a rather low revision rate according to the current Registry data.

Breanna has performed the data analysis for the all of the Registry's reports since 2016.



Coming up in 2019

The Registry has the following plans earmarked for the new year:

1. A new Bariatric Surgery Registry website is coming! The new site will act as a hub of information for surgeons, room staff, participants and industry stakeholders. Development of the website is well underway, with the launch anticipated in the first quarter of 2019.
2. Included with the new website, will be a Patient Portal. This portal will assist in the collection of annual follow up directly from Registry participants.

The Registry will text participants reminding them to submit their own data once it is due. The text will direct them to the portal

where they can enter their weight, diabetes status and whether or not they have had a reoperation.

The portal will assist the collection of annual follow-up data of Registry participants who would otherwise be marked "BSR to Follow-Up," reducing the burden on the Registry's Call Centre as well as limiting the number of Registry participants in the "Lost to Follow Up" cohort.

3. The Registry will showcase its progress at an Engagement Seminar in Melbourne on Friday March 15th 2019. This inaugural event is designed to engage those with an interest in the outcomes of bariatric procedures in Australia and New Zealand.

The seminar is on the Friday before the Melbourne Formula One Grand Prix suiting those who may be coming to the event.



4. The focus on Patient Reported Outcome Measures will commence early in the new year. A Research Fellow, will drive this component of the Registry.

AVANT and Ethicon are generously funding this initiative within the Registry. The Registry is also indebted to Dr. Roseanne Misajon and her team from the Cairnmillar Institute who have been developing PROMs indicators for the Registry over the past 18 months.

5. The Registry is aiming to streamline the access to information from medical records. Over the course of next year, the Registry plans to have discussions with various EMR providers to determine if linkages can be established which will reduce the burden of work whilst increasing the rate of data capture.

The Bariatric Surgery Registry team is focused on the year ahead with the tasks and milestones to be achieved. Updates will be provided in the Registry's newsletters. All stakeholders are most welcome to offer suggestions, ideas or feedback as to the Registry can be improved.

Current Hospital Participation Report for Australian and New Zealand Hospitals where Bariatric Surgery is Provided

State	Approved Sites		Approved (Closed Facility)	Sites in Progress	Ethics/Locality Approvals Yet to Commence	Total
	Not Contributing	Contributing				
NSW/ACT	4	29	1	19	2	53
QLD	6	20	-	4	-	30
SA/NT	-	9	-	4	-	13
TAS	-	5	-	-	-	5
VIC	9	31	1	5	-	46
WA	2	9	-	4	-	15
AUS Total	21	103	2	36	2	164
NZ Total	7	4	-	7	4	22

	Approved Sites		Approved (Other)	Sites in Progress	Sites To Do
	Not Contributing	Contributing			
AUS Private	14	80	2	22	2
AUS Public	7	23	-	14	-
NZ Private	5	3	-	1	3
NZ Public	2	1	-	6	1
Total	28	107	2	43	6

Hospital Participation in Australia		
	Previous Report	November 2018
Hospitals known to do bariatric surgery	158	162
Hospitals with ethics approval	124	124
Contributing	103	103

Hospital Participation in New Zealand	November 2018
Hospitals known to do bariatric surgery	22
Hospitals with ethics approval	6
Contributing	4

Current Report of Surgeon Participation

	At Sites with Ethics Approval		Enlisted but not at site with ethics approval	Not Enlisted		Total**
	Not Contributing	Contributing**		At site with ethics approval	At site yet to get ethics approval	
NSW/ACT	7	32	6	5	2	58
QLD	4	27	3	5	1	40
SA/NT	-	19	1	-	-	20
TAS	1	4	-	-	-	5
VIC	9	59	1	2	-	71
WA	1	27	1	2	-	31
AUS Total	22	8	2	14	3	225
NZ	8	8	2	-	5	23
Total	30	182	14	14	18	248

Surgeon Participation in Australia			At November 2018
	Previous Report	November 2018	Percent of Total # of Bariatric Surgeons at a Site with Ethics Approval
Surgeons known to do bariatric surgery	216	225	(last report %)
All surgeons at sites with ethics approval	206	210	93.3% (95.4%)
Enlisted	196**	208	92.4% (90.7%)
Enlisted and at sites with ethics approval	190	196	87.1% (88.0%)
Contributing	169**	174	77.3% (78.2%)

** Includes retired surgeons

Surgeon Participation in New Zealand		November 2018	Percent of Total # of Bariatric Surgeons at a Site with Ethics Approval
Surgeons known to do bariatric surgery		23	(100%)
All surgeons at sites with ethics approval		16	93.3%
Enlisted		18	78.2 %
Enlisted and at sites with ethics approval		16	69.6 %
Contributing		8	34.8 %

Australian Hospitals with Ethics Approval

Albury-Wodonga Private Hospital
 Ashford Private Hospital
 Austin Hospital
 Baringa Private Hospital
 Belmont District Hospital
 Bethesda Hospital
 Box Hill Hospital
 Brisbane Waters Private Hospital
 Cabrini Hospital Brighton
 Cabrini Hospital Malvern
 Cairns Private Hospital
 Calvary Central District Hospital
 Calvary North Adelaide Hospital
 Calvary Riverina Hospital
 Calvary St Vincent's Hospital
 Calvary Wakefield Hospital
 Campbelltown Private Hospital
 Concord Repatriation General Hospital
 Darwin Private Hospital
 Epworth Eastern Hospital
 Epworth Freemasons Hospital
 Epworth Geelong Hospital
 Epworth Richmond Hospital
 Essendon Private Hospital
 Fiona Stanley Hospital
 Flinders Medical Centre
 Flinders Private Hospital
 Footscray Hospital
 Geelong Private Hospital
 Glen Iris Private
 Glengarry Private Hospital
 Gold Coast Private Hospital
 Gosford Private Hospital
 Gosford Public Hospital
 Greenslopes Private Hospital
 Hamilton Hospital
 Heidelberg Repatriation Hospital
 Hobart Private Hospital
 Hollywood Private Hospital
 Holy Spirit Northside Hospital
 Hospital for Specialist Surgery
 Hurstville Private Hospital
 Ipswich General Hospital
 Jessie McPherson Private Hospital
 John Fawcner Private Hospital
 John Flynn Private Hospital
 John Hunter Hospital
 Joondalup Health Campus
 Kareena Private Hospital
 Kawana Private Hospital
 Knox Private Hospital
 Lake Macquarie Private Hospital
 Latrobe Regional Hospital
 Launceston General Hospital
 Linacre Private Hospital
 Lingard Private Hospital
 Maryvale Private Hospital

Mater Hospital (Brisbane)
 Mater Private Hospital (Brisbane)
 Mater Private Hospital (North Sydney)
 Mater Private Hospital Pimlico
 Mater Private Hospital (Redland)
 Mater Private Hospital (Springfield)
 Mater Private Hospital Rockhampton
 Mildura Base Hospital
 Mildura Private Hospital
 Mitcham Private Hospital
 Monash Medical Centre
 Mount Hospital
 Nambour Selangor Private Hospital
 National Capital Private Hospital
 Nepean Private Hospital
 Newcastle Private Hospital
 Noosa Private Hospital
 North Shore Private Hospital
 North West Private Hospital (Brisbane)
 North West Private Hospital (Burnie)
 Northpark Private Hospital
 Norwest Private Hospital
 Nowra Private Hospital
 Peninsula Private Hospital
 Pindara Private Hospital
 Port Macquarie Private Hospital
 Prince of Wales Private Hospital
 Princess Alexandra Hospital
 Queen Elizabeth Hospital
 Queen Elizabeth II Jubilee Hospital
 Repatriation General Hospital
 Royal Adelaide Hospital
 Royal Brisbane and Women's Hospital
 Royal Hobart Hospital
 Royal North Shore Hospital
 Royal Prince Alfred Hospital
 Shepparton Private Hospital
 Southern Highlands Private Hospital
 St Andrew's War Memorial Hospital
 St Andrew's-Ipswich Private Hospital
 St George Private Hospital
 St John of God Hospital Ballarat
 St John of God Hospital Bendigo
 St John of God Hospital Berwick
 St John of God Hospital Bunbury
 St John of God Hospital Geelong
 St John of God Hospital Geraldton
 St John of God Hospital Mt Lawley
 St John of God Hospital Murdoch
 St John of God Hospital Subiaco
 St John of God Hospital Warrnambool
 St Vincent's Hospital Melbourne
 St Vincent's Private Hospital (Fitzroy)
 Strathfield Private Hospital
 Sunnybank Private Hospital
 Sunshine Coast Private Hospital
 Sunshine Coast University Private Hospital
 Sunshine Hospital

Sydney Adventist Hospital
 Sydney Southwest Private Hospital
 The Alfred Hospital
 The Avenue Private Hospital
 The Valley Private Hospital
 The Wesley Hospital
 Wagga Wagga Rural Referral Hospital
 Waikiki Private Hospital
 Wangaratta Private Hospital
 Warringal Private Hospital
 Waverley Private Hospital
 Western Private Hospital
 Westmead Private Hospital
 Williamstown Hospital

New Zealand Hospitals with Ethics Approval

Middlemore Hospital
 St George's Hospital
 Southern Cross Hospital Christchurch
 Southern Cross Hospital Hamilton
 Southern Cross Hospital North Harbour
 Southern Cross Hospital Wellington_

CONTACT INFORMATION

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**2019 Steering Committee
 Meeting Dates**
 Friday 15 March
 Friday 22 June
 Friday 20 September
 Friday 22 November