

**Preprint of the Editorial  
for the Summer 2013 Edition of the Journal of the ASGBI**

JASGBI 2013, 40 1

David Rew

Director of Communications

Welcome to the Summer 2013 issue of the Journal of the Association. Our mission as ever is to communicate, to inform and to promote debate on matters of mainstream significance in surgery; and to bring light and joy to the lives of surgeons at, beyond and behind the coal face.

The Association exists to represent the interests of its membership, drawn from the practice of Surgery in General and affiliated Subspeciality Groups and Associations. Most members will be signed up to membership of a web of professional bodies, including their Royal College(s); the broad spectrum representative organisations such as the ASGBI; and the subspeciality associations.

Our practice as surgeons is underwritten by the GMC and by the Medical Defence Organisations and Insurers, and the BMA handles representation on employment, pensions and related matters. It is also shaped by the work of the Specialist Advisory Committees (SACs) on matters of training, curriculum and workforce planning, for which the ASGBI is accountable to the GMC for General Surgery. Gareth Griffiths diligently discharges this duty on your and our behalf.

The ASGBI seeks constructive and amicable relationships with all of the subspeciality bodies within its orbit, recognising that we are stronger working together than in parts, and that the voice of surgery is but one voice in the cacophony of medical interests seeking the ear of government.

To this end, the Executive Board of the ASGBI hosts a quarterly meeting of the ASGBI Council at which all affiliated Associations and regional representatives have a seat. We also

work closely with the Royal Colleges and with the Federation of Speciality Surgical Associations (FSSA), within whose Forum we are represented by Professor John MacFie.

The ASGBI is unique among representative Surgical Associations in its incorporation as a Limited Company rather than a Charity. This allows us to debate strategies, to exercise functions and to seek to realise membership benefits which are not possible for Charities.

Our Charitable interests and funds are separately administered through our affiliated Charity, the Surgical Foundation. We are thus able to explore and develop membership benefits such as our expanding Surgical Insurance Scheme (SIS), and a concept which we term Surgical Expert, which would allow us to expand into a range of specialist services, such as revalidation for non-NHS surgeons; Medico-legal advisory services; “trade union” functions for surgeons which are currently subsumed by the BMA, with its representative emphasis on the interests of GPs; and matters arising in private and income generating practice.

Our corporate structure imposes strict disciplines on our financial management, and our ambitions must be balanced by the money in the bank. We are reviewing all aspects of our communication strategy and weighing in the balance the relative costs of paper, including the production and distribution of the Journal, as compared with electronic media, which we expect to use much more widely in future.

We are very grateful to Nick Gair as Chief Executive, and to Mr Hoshang Ghadailly (Hari) and Mr Ash Sepehr for their care and attention with the day to day finances as the Executive Board debates future plans.

And so to the 100<sup>th</sup> Annual Congress of the Association, held in early May in Glasgow. Professors John Primrose, Gordon Carlson and the members of the Scientific and Organising Committees and Teams once again delivered a stellar cast of speakers in cutting edge sessions and parallel meetings of partner Associations. We are delighted to note the success of the now embedded conference of the Association of Trauma and Military Surgeons (ATMS), which we hope will be a model for future partnerships with other subspecialty

associations. Such arrangements preserve and advance the identity of the participating Associations, while realising the economies of scale and professional time which are essential in the modern NHS workplace.

This issue of the Journal seeks to capture and reflect the spirit and themes of the Congress across the breadth of technical and organisational challenges to professional practice, along with a range of articles of more general interest.

We are grateful to our prestigious outside contributors, to Graeme Poston for his experienced perspectives on Commissioning and other matters; and to David Lloyd for an article on that challenge which we all face in the general surgical clinics: the management of demanding patients with chronic groin pain but without a demonstrable hernia.

The Communications brief of the Association now extends far beyond the Journal. We are active in commissioning and publishing a range of pamphlets on contemporary Issues In Professional Practice (IIPPs), for which we are grateful for responsible financial support from a range of generous sponsors.

Nick Markham and his Informatics Team continue to drive the generational shift to the Social Media, and to the on-line and connected world of a sophisticated web site and ground-breaking Apps.

I must offer a personal vote of thanks to Jessica Pether, Communications Officer for the Association. In less than a year in post, Jess has gripped the challenges of a wide-ranging communications portfolio at ASGBI HQ with imagination and attention to detail. Jess is your principal point of contact for editorial and publishing matters.

And finally, I repeat the plea which passes down the editorial generations. Please get involved with the Association, and please contribute articles of interest, of opinion and for constructive debate to the Journal. With the GMC mandating reflective writing and reflective practice upon us, there can be no further excuse for failing to exercise your writing genes in this newsletter, the gentlest of public fora. Bon vacances!