## <u>VaLSA fellowship – Southmead Hospital, 1 – 11 Sept 2020</u> Frances Kent, ST7 Vascular Surgery

VaLSA was very well delivered and comprehensive in covering endovascular and open approaches to peripheral arterial disease. The expert faculty were very approachable. Candidates were encouraged to liaise with faculty to organise a fellowship at their institutions. Through the information shared by VaLSA I organised a two-week fellowship at Southmead Hospital, Bristol.

Professor Hinchliffe and Mr Twine organised a fellowship programme to include a broad range of exposure to the diagnosis and management of CLTI and in particular, diabetic foot disease. I was introduced to all of the surgical and interventional radiology consultants, nurses, podiatrists and nurse specialists and made to feel welcome by all. I attended daily MDTs and was actively involved in complex case discussions. I observed and assisted in intra-inguinal bypasses, percutaneous and hybrid crural angioplasty cases and hybrid aorto-iliac cases. The advantages of hybrid operating were a key learning point from this fellowship.

I was keen to learn about the development of the multi-disciplinary diabetic foot service and learnt a lot about this from discussions with the surgeon involved in establishing the service. The podiatrists and orthopaedic surgeons I met taught me enthusiastically about their approach to management of the diabetic foot. I discussed development and application of diabetic foot guidelines and research in this field, particularly with regard to bedside testing. I observed measurement of toe pressures and transcutaneous oxygen pressure which I hadn't seen before.

Professor Hinchliffe and Mr Twine facilitated meetings with a 'Complex Care' consultant geriatrician, who explained their role in the perioperative management of comorbid peripheral arterial disease patients, and with a Rehabilitation consultant and physiotherapist with an interest in amputees, who highlighted the impact of surgical decision making and technique on amputation rehabilitation.

One of the reflections I had after VaLSA was the importance of the culture and attitude towards distal arterial disease and 'limb salvage'. This fellowship has demonstrated an example of a unit which has a successful diabetic MDT and an enthusiasm from all involved parties for limb salvage, with successful outcomes. This will be very influential on my training and career, and I am very grateful to VaLSA and the department at Southmead for facilitating this fellowship.