

## **Editor's Letter**

Dave Bunting



As we are now emerging from the Covid-19 era, it is time to reflect on the challenges and opportunities that the pandemic has brought. Hospital trusts have had to endure staff sickness/shortages, bed crises and severely reduced operating capacity, all of which have impacted hugely on our day-to-day work. Hospitals have had to find new ways of safely providing surgical care during the ongoing pandemic and day surgery units have played a huge part in restoring our elective and urgent care services to keep up with ongoing demand and deal with the inevitable waiting list backlog that has developed in most specialties. Day surgery units, being naturally separated from inpatient bed facilities and with their own admission and discharge routes are ideally equipped to facilitate so-called 'green', low-Covid risk pathways for patients to be treated without impacting on emergency and inpatient facilities. The importance of securing ring-fenced beds for day case activity has been clearly demonstrated. The drive to reduce inpatient bed occupancy and manage patients on an ambulatory basis promises to build momentum and further push the boundaries of day surgery. The recent BADS Virtual Conference held in March - 'Using Day Surgery to Recover Elective Surgery in the Era of Covid-19' - presented excellent examples of novel practice in day surgery that will change the way we treat many conditions traditionally managed with inpatient surgery across many surgical specialties. In Urology, we have learned how many cases of benign prostatic hypertrophy and ureteric stones can be managed in outpatient and day surgery environments using novel techniques. Similarly, in gynaecology, hysteroscopy and endometrial ablation are being increasingly performed in outpatients and many units are regularly performing procedures such as anterior repair, vaginal hysterectomy, and laparoscopic hysterectomy as a daycase. In orthopaedics, anterior cruciate ligament repair, total knee replacement and total hip replacement are being performed regularly as day surgery in several trusts. Even urgent procedures classically performed with inpatient stays such as laparoscopic cholecystectomy for acute cholecystitis/pancreatitis and open reduction and internal fixation of mandibular/zygomatic fractures are now routinely being performed on an ambulatory basis.

All material presented at the BADS Virtual Conference including video recordings of invited speakers' lectures and oral prize presentations will be available online for registered participants to access free of charge for 3 months following the conference.

In this edition of JODS, three updated 'How I do it' day case guides are presented, including guides on Laparoscopic fundoplication, Vaginal hysterectomy & Vaginal repair and Tonsillectomy. Scientific articles this month include a review of anaesthetic factors that may contribute to overnight stays in anterior cruciate ligament reconstruction and a description of a rare skin cancer treated with serial day surgery attendances.



As usual there are pages dedicated to events of educational interest including the BADS / HCUK Conference on Day Surgery Gynaecology which is due to take place very soon on Thursday  $20^{\text{th}}$  May – there is still time to register for this virtual meeting with a discounted rate of £100 + VAT for trainees and BAD members.

Please keep your submissions to the journal coming in and remember – JODS still offers citable peer-reviewed publication with no author processing fees. Updated author guidelines and submission instructions can be found in this edition of the journal.

Finally, I cannot let this edition pass without highlighting that it is the final edition to be published with BADS led by our President Kim Russon. Kim took on the role at short notice and from the very start has demonstrated a huge commitment to the organisation. BADS is a fantastic organisation with a bright future - credit for which must go to Kim who has led the organisation through huge changes and challenges with regards to the RCS Eng rebuild and the Covid-19 pandemic. As a leader, she has a manner which is diplomatic, considered, non-judgemental and sensitive to individuals - I am not sure whether this is conscious / learned or whether it is just her natural way - but I know that we could all benefit from some of that wisdom. With that said I look forward to reading her final President's letter and would like to personally thank Kim for her devotion and enthusiasm over the past two years.