

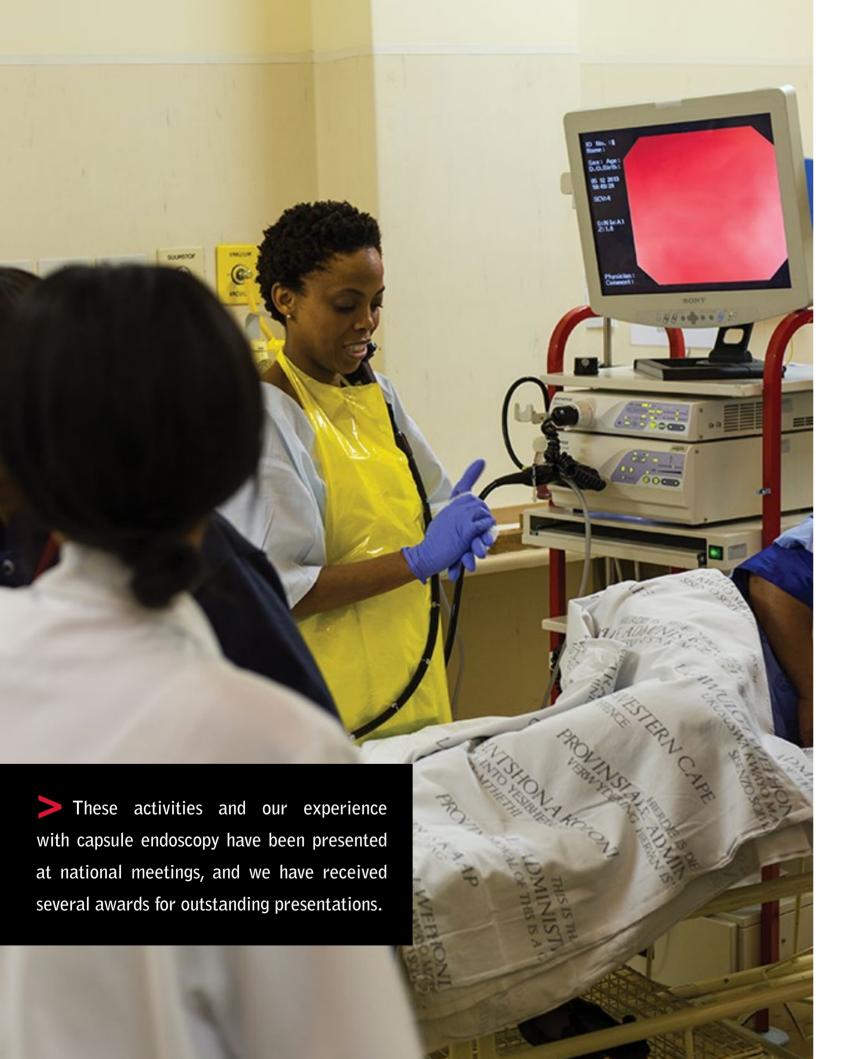


Professor Sandie Thomson Head of Gastroenterology

The success of the Division of Gastroenterology can be attributed to the collective efforts of all of its team members — who work together like the well-oiled parts of a complex machine to achieve impressive results.

fe have a great team and I have plans to make them even greater! Then I want to get sacked as the manager!" jokes head of the division, Professor Sandie Thomson.

But he has reason to be proud of his team. As a surgeon heading up the medical gastroenterology division, his approach may have been considered less conventional. But he has seen to it that many changes were made in the division and that gastroenterology, hepatology and surgical gastroenterology liaisons have been reinforced.



"Some big developments have been the dedicated foregut service to complement its immensely strong hepatobiliary wing. An intestinal failure unit has also been established and these links form a great foundation on which to build," says Professor Thomson.

He says efforts, in conjunction with the Divison of Hepatology, have led to their subspeciality being considered for recognition by the Health Professions Council of South Africa (HPCSA). He mentions the accomplishments of team members, with some staff having developed Endoscopic UltraSound (EUS) to a state-of-the-art level in terms of pancreatic pathology.

"The next phase is developing the service for the luminal upper gastrointestinal (GI) cancers. This will allow us to further develop the endoscopic mucosal resection/dissection service where early cancers staged by EUS can be excised without formal surgical resection."

In keeping with these developments in foregut pathology, the division has revitalised the Helicobacter dyspepsia research work with funding from Society of American Gastrointestinal and Endoscopic Surgeons (SAGES) and another Discovery Foundation award to one of the senior registrars.

New equipment has revitalised key research projects set to make huge improvements to patients' lives. "These activities and our experience with capsule endoscopy have been presented at national meetings, and we have received several awards for outstanding presentations," says Professor Thomson.

On the service side, the team has strengthened its equipment base to include colonoscopes and a donation of three gastroscopes from Storz. This has allowed the expansion of the colonoscopy service. To take the service delivery further forward the physical structure of the unit needs to be



Doctor Neliswa Gogela (senior registrar) in conversation with Professor Sandie Thomson.

redesigned. Concept plans have been formulated and Groote Schuur Hospital's management team has made it an official refurbishment project in the forthcoming year. These plans are integrally related to university faculty support for funding to develop the tele-education hub component. "Moving this project forward is to be one of my main focus areas," says Professor Thomson.

But he notes that he has been concerned about having more of an impact in local communities. "Outreach has been neglected in the past and we have produced, through provincial structures, a document to develop endoscopy services in the metro," he says. "The initial phase of this was the acquisition of equipment for Mitchell's Plain District Hospital and I am delighted to report that this service is up and running."

Despite being the deputy editor of the *South African Journal of Surgery* and an Elected Fellow of the Royal College of Physicians of Edinburgh, Professor Thomson makes time to think ahead. "We have a responsibility to develop gastroenterology in Africa and several projects are under way in this regard."