



The British Fertility Society Winter College 2006

4 – 6 January 2006

Royal College of Obstetricians and Gynaecologists
27 Sussex Place, Regent's Park, London, UK

Programme

PROGRAMME:

WEDNESDAY 4 JANUARY 2006

Embryo Transfer Training Course
Workshop: Designing an IVF Unit

THURSDAY 5 JANUARY 2006

BFS Winter Workshops

FRIDAY 6 JANUARY 2006

Persons Responsible Meeting

Valid for CPD credit

<http://www.fertility.org.uk/meetings/forthcoming.html>



British Fertility Society



Welcome

Dear BFS Members

As you will see, the traditional Winter Meeting has been expanded into a Winter College. It is our intention to rationalise the 12 separate BFS Meetings into two annual Colleges, incorporating training courses, workshops and specialist meetings. In the current financial climate this will significantly reduce travel costs and delegates can choose from the various options available at each College, attending all or parts as they wish. Hopefully, more unit staff will, therefore, be able to register. Units may, possibly, even consider closing completely for the duration of the two Colleges to allow all staff to attend the whole College, thereby obtaining their continuing professional education in two short bursts per annum.

This first British Fertility Society Winter College, at the Royal College of Obstetricians and Gynaecologists, incorporates the Embryo Transfer training course, a workshop on design issues in reproductive medicine units, a series of workshops using last year's very successful format and the Persons Responsible Meeting.

I hope you will enjoy this college – it is a wide-ranging and very stimulating programme with something for everyone whether they provide infertility services at a primary, secondary or tertiary level.

Neil McClure MD FRCOG
Chair BFS Meetings Subcommittee

Meeting Information

The British Fertility Society Winter College 2006 is an exciting new format of BFS Meetings, consisting of several annual BFS meetings running back-to-back over three days, which promises to make a stimulating event that will appeal to all groups.

The first meeting will be the Embryo Transfer Training Course, which will run throughout day one of the Winter College, consisting of a morning of lectures followed by practical workshops. Running parallel to this training course, in the afternoon, will be a workshop addressing the issues of 'Designing an IVF Unit', which will be organised in association with the Royal Institute of British Architects 'Health Clients' Forum.

On day two of the Winter College the annual Winter Workshops will take place beginning with a plenary lecture entitled 'Human Embryology: Why We Need New Legislation' by Dr Ian Gibson MP and followed by two parallel strands of workshops. At the end of the meeting delegates will be asked to reconvene for the summing up and discussion of the main points of each workshop.

The final meeting, on day three of the Winter College, is the Persons Responsible Meeting, which will include a programme of morning lectures followed by an afternoon of workshops.

Date and place

The British Fertility Society Winter College 2006 will take place from Wednesday 4 January to Friday 6 January 2006 at The Royal College of Obstetricians and Gynaecologists, 27 Sussex Place, Regent's Park, London NW1 4RG. Telephone number +44 (0)20 7772 6200.

Venue

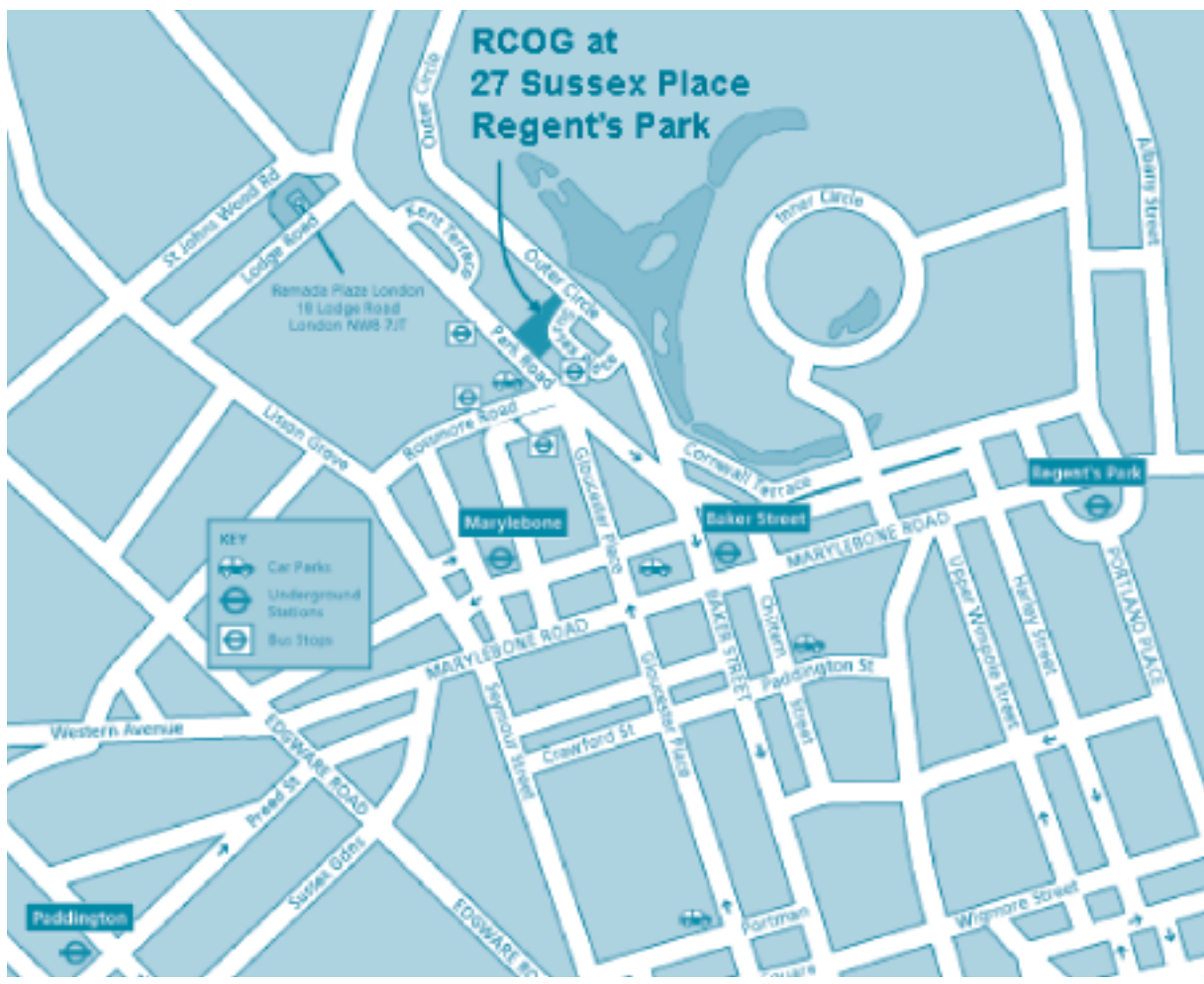
London has an extensive choice of public transportation to help you move around the city including taxi, train and the underground.

Train: Marylebone rail station is 10 minutes walk away and Paddington, Euston, King's Cross and St Pancreas stations are also close by.

Underground: The nearest underground stations is Baker Street (served by the Hammersmith and City, Bakerloo, Circle, Jubilee and Metropolitan lines).

Bus: The area is well served by a number of different buses.

Car: Car parking facilities are available at the NCP Park Road (24 hours) and on the Regent's Park Outer Circle (metered short stay). London congestion charges may apply.



Registration

The registration desk will be open at the following times:

Wednesday 4 January 2006 from 08.30 - 16.30 for people attending the Embryo Transfer Training Course and the Afternoon Workshop: Designing an IVF Unit.

Thursday 5 January and Friday 6 January 2006 from 08.30 - 17.00 for people attending the Winter Workshops and / or the Persons Responsible Meeting.

Registration fees include lunch during the meeting you have registered for and the Informal Drinks Reception on 4 January 2006, but does not include the Conference Dinner on 5 January 2006.

CPD Approval

CPD approval from the Federation of the Royal College of Physicians of the UK has been sought for this meeting. A certificate of attendance for this meeting will be available at the registration desk.

Name badges

Name badges will be provided at the registration desk and must be worn at all times for admission into the scientific sessions.

Commercial Exhibition

The commercial exhibition is to be situated in the Nuffield Hall at the RCOG. The exhibition will be open from 10.00 - 16.00 on Thursday 5 January and 11.00 - 16.00 on Friday 6 January 2006. All tea, coffee and buffet lunches will be served in the Nuffield Hall during Winter Workshops and Persons Responsible Meeting.

Social Events

INFORMAL DRINKS RECEPTION

An informal drinks reception will be held at the Frost and Reed Gallery, 2-4 King Street, London, SW1Y 6QP from 18.00 - 20.00 on Wednesday 4 January 2006. The Frost and Reed Gallery was founded in 1808 and displays impressionist and post-impressionist works as well as 19th and 20th century British, French and sporting paintings. The nearest underground station is the Green Park Station, which is located in Zone 1 on the Piccadilly Line.

CONFERENCE DINNER

The Conference Dinner will take place at the Belgian theme restaurant Belgo Noord, 72 Chalk Farm Road, Chalk Farm, London, NW1 8AN. Tickets cost £35.00 and include drinks and a three-course meal. Transport will be provided to and from the RCOG and the Danubius Hotel Regent's Park (formerly know as the Ramada Plaza). If you decide to make your own way to the dinner the nearest tube station is Chalk Farm in Zone 2 on the Northern Line.

Sponsors / Exhibitors

We are grateful to the following companies for their support at the BFS Winter College 2006:

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Embryo Transfer Training Course

Wednesday 4 January 2006

08.30 - 09.15	Registration and Coffee	EF
09.15 - 09.30	Introduction: House-keeping Issues - Aims of Course and Accreditation Process <i>Helen Kendrew (Bath)</i>	L1&2
09.30 - 10.00	Structure of Cervix, Uterus and Tubes <i>David Walker (Bath)</i>	L1&2
10.00 - 10.30	The Pre-implantation Embryo <i>Karen Turner (Oxford)</i>	L1&2
10.30 - 11.00	Immunology <i>Raj Rai (London)</i>	L1&2
11.00 - 11.30	Coffee	L3
11.30 - 12.00	Preparation for Embryo Transfer: The Embryologist's Perspective <i>Stephanie Gadd (Bath)</i>	L1&2
12.00 - 12.30	Single Embryo Transfer <i>Richard Kennedy (Coventry)</i>	L1&2
12.30 - 13.00	Embryo Transfer Techniques <i>Khaldoun Sharif (Birmingham)</i>	L1&2
13.00 - 14.00	Lunch	L3
14.00 - 16.00	Practical Workshop Sessions: Loading Embryos Embryo Transfer, Straightforward and Difficult Ultrasound Techniques WORKSHOP FACILITATORS: <i>Stephanie Gadd (Bath)</i> <i>Richard Kennedy (Coventry)</i> <i>Stephen Lodge (Smiths-Medical)</i> <i>Khaldoun Sharif (Birmingham)</i> <i>David Walker (Bath)</i>	L6 L4 L1&2
16.00 - 16.30	Tea and Discussion	L1&2
18.00	Informal Drinks Reception Frost and Reed Gallery, 2-4 King Street, London	

Key to Room Locations

EF	RCOG Entrance Foyer
L1&2	Main Room
L3	L3 Schering 3
L4	L4 Sir Jules Thorn
L6	L6 Lindsay Stewart



Designing an IVF Unit

Wednesday 4 January 2006

Meeting Room: Novo Nordisk Suite

- 14.00 **Welcome and Introduction**
Neil McClure (Belfast)
- 14.00 **An Overview of Health Building Design in the
UK and Europe**
Sue Francis (NHS Confederation)
- 14.20 **What Makes for an Efficient Throughput in an
IVF Unit?**
Jane Stewart (Newcastle)
- 14.35 **What Constitutes a Good Embryology
Laboratory Design?**
Rachel Cutting (Sheffield)
- 14.50 **EU Standards for Laboratory Design**
TBC
- 15.05 **Discussion Groups on Quality Design**
Facilitators:
Neil Cadenhead (Llewelyn Davies Architects)
TBC
-



Winter Workshops

Thursday 5 January 2006

08.30 - 09.30	Registration and Coffee	EF
09.30 - 10.30	Plenary Lecture Human Embryology: Why We Need New Legislation <i>Ian Gibson MP (London)</i>	MLT
10.30 - 11.00	Coffee	NH
11.00 - 12.30	Workshop Group 1 GENEROUSLY SUPPORTED BY ORGANON LABORATORIES LTD	
	Running an IUI Service <i>Elizabeth Lenton (Sheffield) & Melanie Davies (London)</i>	CS
	Preventing OHSS <i>Andrew Drakley (Liverpool) & Cathy Turner (London)</i>	L1&2
	Assessing Quality Management in the ART Unit <i>Janet Currie (Oxford) & Gillian Lockwood (Midland Fertility Unit)</i>	NNS
12.30 - 13.30	Lunch and Exhibition	NH
13.30 - 15.00	Workshop Group 2 GENEROUSLY SUPPORTED BY SERONO LIMITED	
	SOP's for Staff Emotional Support <i>Jenny Dunlop (Manchester) & Marie Wren (London)</i>	CS
	In-house Staff Training Accreditation <i>Julie Hinks (Bristol) & Masoud Afnan (Birmingham)</i>	L1&2
	First Line in Ovulation Induction in PCOS Women <i>Gerard Conway (London) & Jonathan Lord (Truro)</i>	NNS
15.00 - 15.30	Tea	NH
15.30 - 17.00	Presentation and Summary of each Workshop	MLT
17.00	Close of Meeting	
20.00	Conference Dinner at Belgo Noord 72 Chalk Farm Road, Chalk Farm, London	

Key to Room Locations

EF	RCOG Entrance Foyer
MLT	Main Lecture Theatre
NH	Nuffield Hall
L1&2	L1&2 Schering
CS	Collegiate Suite
NNS	Novo Nordisk Suite



Meeting for Persons Responsible and Senior Staff of IVF Units

Friday 6 January 2006

08.30 - 09.30	Registration and Coffee	EF
09.30 - 09.35	Welcome and Introduction <i>Richard Kennedy (Coventry)</i>	MLT
09.35 - 10.05	Is There a Gold Standard in IVF Practice? <i>Peter Braude (London)</i>	MLT
10.05 - 11.15	Minimising Risk GENEROUSLY SUPPORTED BY FERRING PHARMACEUTICALS LTD <i>Chair: Richard Kennedy (Coventry)</i> Current Issues for Clinical Practice <i>Stuart Lavery (London)</i> OHSS - Time to Rethink? <i>Anthony Rutherford (Leeds) & Ruth Curson (London)</i> Alerts and their Role in Risk Management <i>Stephanie Sullivan (HFEA)</i>	MLT
11.15 - 11.30	Coffee	NH
11.30 - 12.45	Current Issues for PRs <i>Chair: Jonathan West (Exeter)</i> Development of Nurse Led Services <i>Debbie Barber (Oxford)</i> NICE Implementation <i>William Ledger (Sheffield)</i>	MLT
12.45 - 13.45	Lunch and Exhibition	NH
13.45 - 15.30	PRs' Master Class Workshop 1: Identifying and Dealing with Underperformance <i>Mark Hamilton (Aberdeen) & Fiona Daffern (HFEA)</i> Workshop 2: Establishing Benchmarks in IVF Practice <i>Hossam Abdalla (London)</i> Workshop 3: Training for PRs <i>Trish Davies (London) & Richard Kennedy (Coventry)</i>	L3 CS NNS
15.30 - 15.45	Tea	NH
15.45 - 16.45	EU Directive and Regulation <i>Chair: Neil McClure (Belfast)</i> EU Directive Update <i>Alison Murdoch (Newcastle)</i> Select Committee Report - Will it Effect Change? <i>Angela McNab (London)</i>	MLT
16.45 - 17.00	Discussion and Closing Remarks <i>Neil McClure (Belfast)</i>	MLT

Key to Room Locations

EF	RCOG Entrance Foyer
MLT	Main Lecture Theatre
NH	Nuffield Hall
L3	L3 Schering 3
CS	Collegiate Suite
NNS	Novo Nordisk Suite



Plenary Lecture

PLENARY LECTURE

09.30-10.30 on Tuesday 4 January 2006

Human Embryology: Why We Need New Legislation

Ian Gibson MP (London)

Dr. Gibson will be looking at the current regulatory principles, namely, what is current regulation actually trying to achieve? He will ask whether the HFE Act is actually working and will examine the areas where he feels the Act is being stretched (new technologies, the issue of the welfare of the child, embryo and gamete donation, etc.) and thereby argue his case for the need for new regulation.

Biography: Ian Gibson

Dr. Ian Gibson was born in Scotland and educated at Dumfries Academy. He attended the University of Edinburgh, where he was awarded a BSc and a PhD. After working at the University of Edinburgh, Indiana and Seattle. He later joined the University of East Anglia where he was Dean of the School of Biological Sciences and served as head of a 10 strong research team investigating various forms of cancer. In 2003, the University awarded him an Honorary Professorship.

In 1997, 2001 and in 2005, he was elected as Member of Parliament for Norwich North. He specialises in science and health issues and chairs the All Party Parliamentary Group on Cancer and the All Party Parliamentary Group on Cuba. He is the former chair of both the House of Commons Select Committee on Science and Technology and the Parliamentary and Scientific Committee. He is also co-manager and occasional pivotal defender in the Parliamentary football team. His work in parliament has been recognised by MPs and members of the Lords.

Dr. Gibson has twice won the e-politix award for Health champion and also the backbencher of the year award in 2003.



Workshops

WORKSHOP GROUP 1

11.00-12.30 on Wednesday 5 January 2006

Running an IUI Service

**Elizabeth Lenton (Sheffield) &
Melanie Davies (London)**

Biography: Elizabeth Lenton

A career in reproductive medicine spanning 35 years started in the Department of Obstetrics and Gynaecology, Jessop Hospital for Women, Sheffield as Lecturer for Sheffield University. This was followed by promotion to Senior Lecturer and the simultaneous establishment of an IVF clinic, the Sheffield Fertility Centre in 1987. Liz continued to combine both her academic position and her role as Director and Person Responsible for the IVF clinic until 2001 when she resigned her academic post to run the clinic full time under the auspices of CARE Ltd. Now taking more time to write up much of the research data she has accumulated over the years, she intends to leave the clinic and CARE from 31st December 2005. Already, however, she is finding that her time is at a premium as a whole host of other opportunities present themselves!

With respect to IUI, she has recently published an extensive account of 10 years of stimulated IUI provided by the Sheffield Fertility Centre. This paper details the learning curve associated with patient selection, the role of multiple cycles and, most importantly, how to manage an IUI programme so as to minimize high order multiple pregnancy.

Lenton, E.A. Human Fertility (2004) 7: 253-266

WORKSHOP GROUP 1

11.00-12.30 on Wednesday 5 January 2006

Preventing OHSS

**Andrew Drakley (Liverpool) &
Cathy Turner (London)**

Biography: Andrew Drakley

Andrew Drakeley, MD, MRCOG was educated & trained in Liverpool. After Registrar training in South Africa he subspecialised in Reproductive Medicine in Liverpool and obtained his MD thesis in recurrent pregnancy loss. Currently he is working as a Subspecialist in Reproductive Medicine at the Hewitt Centre for Reproductive Medicine, Liverpool. His interests include randomised trials and evidenced based medicine resulting in improvement in the quality of patient care. He recently completed co-writing the RCOG greentop guideline on the management of OHSS.

Biography: Cathy Turner

Cathy Turner is the Nurse Manager at IVF Hammersmith. She has worked with the infertility team at Hammersmith for nearly 20 years, initially as a Theatre Nurse then as a Scientific and Clinical Research Nurse before being appointed Nurse Manager.

Her clinical interests are co-ordinating the Pre implantation Genetic Diagnosis and Egg donation programmes. She has co-authored publications in Human Reproduction, Pre natal Diagnosis and Haemophilia, as well as posters presented at ESHRE.

She was invited to speak about Reproductive Options for couples with Haemophilia at both National and International Haemophilia Conferences, and has just written a chapter for the Haemophilia Nurses Handbook. She has been on the Serono Insights steering committee for the past three years and is a member of the Senior Infertility Nurses Group and the Royal College of Nursing Fertility Nurses Group.



Workshops

WORKSHOP GROUP 1

11.00-12.30 on Wednesday 5 January 2006

Assessing Quality Management in the ART Unit

**Janet Currie (Oxford) &
Gillian Lockwood (Midland Fertility Unit)**

Biography: Janet Currie

Janet Currie is Quality Manager in the Oxford Fertility Unit. She has been working in the field of assisted reproduction as a nurse for many years and has considerable experience from working in several different fertility units. In December 2003 she was appointed to co-ordinate the introduction of the Quality Management System ISO 9001:2000 to the unit in Oxford. Following Certification in 2004 she is now involved in managing all the processes in place relating to the Quality Management Standards.

Biography: Gillian Lockwood

Dr Gill Lockwood was a late recruit to medicine having originally read Philosophy, Politics and Economics and then worked in the Cabinet Office as a government statistician. Having qualified in medicine from Oxford in 1986, she trained in reproductive medicine and IVF under Prof David Barlow. Her doctoral thesis was in reproductive endocrinology with special reference to Inhibin and Activin. She has maintained an active interest in Applied Ethics, and is a co-opted member of the RCOG Ethics Committee and the British Fertility Society Ethics sub-committee. Since last year she has been a Special Advisor to the Select Committee on Science and Technology which undertook a review of the Human Fertilisation and Embryology Act and Assisted conception. She is Medical Director of Midland Fertility Services in the West Midlands, an independent clinic providing about 850 IVF and ICSI cycles a year to NHS and private patients.

WORKSHOP GROUP 2

13.30-15.00 on Wednesday 5 January 2006

SOP's for Staff Emotional Support

**Jenny Dunlop (Manchester) &
Marie Wren (London)**

Biography: Jenny Dunlop

Jenny Dunlop has been the Senior Infertility Counsellor at St Mary's Hospital Manchester for nearly 10 years. She originally trained as a social worker and taught on different courses at Manchester and Salford University before becoming a counsellor. She also works at Manchester Fertility Services.

She has been the past Chair of BICA, and sat on the NICE Fertility Guideline Group as the Counsellor Representative. She is an Inspector/Advisor for the HFEA.

She has always been very interested in staff support, not only for counsellors but also for all staff who work within the clinic setting. She helped introduce the BICA Multidisciplinary Workshops training clinic staff on the 'Emotional Impact of Infertility on Patients and Staff'. She has recently been one of the co-ordinators and trainers of the new 'Introductory Courses' for new counsellors working in Licensed Clinics.

Biography: Marie Wren

Dr Marie Wren is the Deputy Medical Director at The Lister Fertility Clinic. She became a full time member of the team at The Lister in 1991. Originally qualifying from St Bartholomew's Hospital in 1980, she obtained her MRCOG in 1985 after training posts at UCH, Queen Charlottes and the John Radcliffe. She became involved in assisted conception in 1987, and initially worked as a Research Fellow at King's College Hospital with John Parsons. In 1990 she moved to Guy's Hospital to work with Professor Michael Chapman and helped set up the first IVF unit there. At the Lister she is actively involved in all aspects of the management of patients' infertility as well as coordinating the day to day running of the clinic. For many years she has been interested in the management of poor responders, older patients and women needing oocyte donation, who make up the largest proportion of her patient base. She has always been involved in the training of the junior doctors and nurses who have worked at the Lister.



Workshops

WORKSHOP GROUP 2

13.30-15.00 on Wednesday 5 January 2006

In-house Staff Training Accreditation

Julie Hinks (Bristol) & Masoud Afnan (Birmingham)

Biography: Julie Hinks

Julie is the Nursing Director at the Centre for Reproductive Medicine at the University of Bristol where she has worked for the last 11 years. She is also the Registered Manager for the Healthcare Commission.

The nursing team at the Centre for Reproductive Medicine in Bristol believe strongly in the named nurse system with an extended role whereby following consultation each couple is referred to a nurse who will see them for all their appointments during their treatment cycles. This system also enables the couple, and especially the women to gain extra support if required between cycles from their nurse.

Currently, Julie is the link nurse between the BFS Meetings Subcommittee and the RCN Fertility Nurses Group (FNG) committee as well as being an active member of the Senior Infertility Nurses Group (SING).

Biography: Masoud Afnan

A specialist in fertility services at the Birmingham Women's Hospital. He is a member of the British Fertility Society (BFS) executive committee and current chair of the Standards and Training committee of the BFS. He is an inspector for the HFEA.

His interests include training, selective salpingography and the interface of clinical and basic science research.

WORKSHOP GROUP 2

13.30-15.00 on Wednesday 5 January 2006

First Line Ovulation Induction in the PCOS Women

Gerard Conway (London) & Jonathan Lord (Truro)

Biography: Gerard Conway

Gerard Conway is Consultant Endocrinologist at University College London Hospital. His research interests include polycystic ovary syndrome, Turner's Syndrome, adrenal disorders and intersex conditions.

Biography: Jonathan Lord

Jonathan Lord is a consultant obstetrician and gynaecologist at the Royal Cornwall Hospital / Peninsula Medical School. His main research interests are in PCOS, in particular the effect of fat compartmentalisation and the role of visceral fat in the development of metabolic disorders. He is the lead author of the Cochrane Review on metformin in PCOS, which is due for its next update in 2006.



Persons Responsible Meeting

Welcome and Introduction

Biography: Richard Kennedy

Richard Kennedy is the Consultant Obstetrician and Gynaecologist at University Hospitals Coventry and Warwickshire NHS Trust and Clinical Director of the Centre for Reproductive Medicine where he established the IVF programme in 1990. He was the former secretary of the British Fertility Society and was a member of the RCOG Infertility Guideline Development Group between 1997 and 2000. He is a member of the HFEA Executive Committee and is an HFEA Inspector.

carry out research using human IVF embryos directed towards an understanding of the cellular and molecular mechanisms operating at these early stages of development. The group at King's was the first to generate human embryonic stem cells in the UK and to lodge them with the new UK stem cell bank, and the first internationally to produce a stem cell line containing the common cystic fibrosis gene. He has published widely on the science and ethics of these emerging techniques. He was member of the Human Fertilisation and Embryology Authority from 1999 to 2004, and is now chairman of the Scientific Advisory Committee of the Royal College of Obstetricians and Gynaecologists.

Is There A Gold Standard In IVF Practice?

Course notes: Peter Braude

The use of in vitro assisted reproduction technology is increasing year on year. Concurrent with it are complications, both overt (OHSS, twin pregnancy) and potential (increase in congenital abnormality, prematurity, and errors of fetal programming). Success tends to be measured by clinical pregnancy per egg collection, or livebirth per cycle started, which are convenient measures for press and government 'league tables', and for enhancing a clinic's competitive edge in a highly financially oriented health sector.

However, in the drive not to slip in these tables, the willingness to recognise that the best outcome of any superovulation cycle is a healthy singleton at term whose development into a healthy adult should not have been compromised by the treatment that his/her parents received, is often lost. The toll of multiple pregnancy is clear to all, and one way of reducing this by single embryo transfer holds substantial advantages. But the antecedents for the individual patient are less obvious and create nervousness in the minds of patients desperate to overcome their childlessness, and reluctance from clinicians who fear the consequences of a reduction in their 'league table' position.

Many factors, not only the number of embryos transferred, influence outcome. A standard needs to be agreed that takes into account the particulars of the patient and the quality of the clinic, but holds paramount the health of the child, the informed decisions of the potential parents and equity on behalf of care providers. The profession needs to work together to ensure a level playing field for patients whether they receive their care in private or NHS clinics, to ensure this common goal.

Biography: Peter Braude

Peter Braude is Head of the Department of Women's Health, part of the Division of Reproduction, Endocrinology and Development at King's College London. He directs the Centre for Preimplantation Genetic Diagnosis at Guy's and St Thomas' Hospital, which is the most active and successful of the HFEA licensed programmes in the UK. Whilst in Cambridge he led one of the first groups to be funded by the MRC to

Minimising Risk

Abstract: Anthony Rutherford

Ovarian hyper-stimulation syndrome (OHSS) is the most serious consequence of ovarian stimulation in assisted conception. The overall incidence is between 0.5 to 1%, although in some high-risk groups this may be much higher. OHSS occurs at two specific times: early in response to the priming hCG injection, with a peak around three to four days, and late, which develops around day eleven to twelve after egg collection, in response to a rising hCG in a woman who has conceived. The former is usually time limited, while the latter can persist well into the first trimester.

Many strategies have been developed to reduce the incidence or prevent OHSS and there is wide clinical discordance on how such patients are managed. Clinicians need clear guidance on how this condition can be prevented, and once established, the most effective interventions required to improve outcome.

Prevention is better than cure. The first step is to ensure that super-ovulation regimens are individualised to reflect a sensible balance between the drive to stimulate a reasonable cohort of oocytes and the potential for over response in each patient. Those perceived to be at particular high risk during their cycle should receive appropriate counselling, with acceptance that the treatment may need to be abandoned. OHSS is notoriously unpredictable, and the only true way of prevention is to withhold hCG. If the decision is to proceed to egg collection, a variety of methods have been employed to reduce the risk of OHSS, including coasting, collecting immature oocytes, reducing the dose of hCG, administration of albumen during the egg collection, and using a GnRH agonist to induce an LH surge in antagonist cycles. Withholding embryo transfer prevents late onset OHSS. Once established, treatment is supportive, but should be adapted to respond to the patient's symptoms. Early intervention with drainage of accumulated fluid in third space compartments leads to a more rapid recovery with quicker resolution of symptoms and restoration of normal serum biochemistry. Decision making is crucial, and it is essential that such patients are managed by experienced senior clinicians in a multidisciplinary environment with clear lines of responsibility.

Persons Responsible Meeting

Biography: Anthony Rutherford

Anthony Rutherford started the Reproductive Medicine Unit at Leeds General Infirmary in 1991, and together with Adam Balen has developed one of the largest NHS units in the country. He served seven years as a member and officer of the British Fertility Society (1991 - 1997), and has recently been re elected for a second term. Currently he is Chairman of the Practice and Policy subcommittee. Current research interests include super-ovulation strategies in assisted conception, embryo metabolism, preservation of fertility in the face of cancer, and in-vitro maturation of oocytes.

Abstract: Ruth Curson

Presentation of the case history of a woman who died following ovarian hyperstimulation syndrome

Biography: Ruth Curson

I am an Associate Specialist at the Assisted Conception Unit, King's College Hospital, London. I have been involved in firstly an infertility clinic and since 1986 in the Assisted Conception Unit here. Although I am involved in all areas of treatment and patient care, my particular responsibility in the clinic is the management of the donor insemination service.

Abstract: Stephanie Sullivan

The HFEA exists to ensure that the treatment patients receive is safe and conducted to a high standard. We also regulate research on embryos, making sure it is safe, necessary and ethical. Our role is to inform, protect and improve. One of the ways we do this is by working with centres to manage risk through incident reporting and other risk management processes. By its nature IVF is an error provocative profession but in the UK we have been the pioneers of actively encouraging clinics to report incidents and allow other clinics to learn from them through the dissemination of anonymised ALERTS across the UK sector. This presentation aims to demonstrate the importance of disseminating the learning from reported incidents thereby reducing the opportunity for similar incidents occurring elsewhere and, therefore, helping to improve patient safety.

Biography: Stephanie Sullivan

Stephanie Sullivan began her career as a nurse, mainly in acute specialties, working within the NHS and overseas. After obtaining an MA in Medical Law and Ethics and a Diploma in Risk Management she moved into clinical governance and risk management. Prior to joining the HFEA in 2004, places of work included Imperial College and the Royal Free Hampstead NHS Trust. She has been a member of the Unrelated Live Transplant Regulatory Authority for the last six years and is currently Head of Clinical Governance and Patient Safety.

CURRENT ISSUES FOR PRS

Abstract: Debbie Barber

The development of nurse led services has now become an established element of healthcare provision. This situation reflects changes both in scope of practice for practitioners and pressures of staffing, recruitment and retention in healthcare. Areas of advanced practice for nurses and midwives include: nurse colposcopists, hysteroscopists, endoscopists, CNS in Diabetes and stoma care, and nurse/midwife consultant posts. Government initiatives such as NHS modernisation agenda (DOH 2000a) have led to the reshaping of service provision with nurse led services in order to provide quicker access to primary, secondary and tertiary care and facilitate doctors to meet the growing demands, such as waiting list initiatives and increased day surgery procedures. Flexibility of nurse led clinics help to improve quicker response times and prompt collaborative relationships which impact positively on the integration of care in all sectors.

Within ART, rapid scientific and technical advances have changed the scope of practice into areas such as PGD and stem cell programmes. Nurse prescribing is another facet of advanced practice that is influencing the development of nurse led clinics and autonomous management of patient pathways. Quality management programmes prompted by EU Tissue Banking legislation have also added yet another complex and challenging area to practice for senior nurses. Undertaking an expanded role all practitioners must adhere to the NMC Code of Conduct, which specifies the provision of safe and competent practice. To meet the clinical and theoretical demands of expanded practice any individual must undertake appropriate training to attain clinical competence. For example those performing embryo transfer should provide evidence of competence in ultrasound, manipulation of catheters through the cervix, and adhere to professional guidelines produced by the RCN (RCNDIRECT 2004). Nurses must ensure appropriate levels of supervision and assessment with clinical logbooks and good working knowledge of all procedures. Audit of practice is essential and should include regular feedback from the clinical supervisor.

Developments within the field have now provided nurses with the opportunity to undertake courses such as the BFS training courses, ultrasound courses and nurse prescribing modules to complement their clinical role and provide evidence within their portfolio of levels of competence and professional development.

NMC (2002) Code of Conduct. NMC London
RCN (2004): Performing intra-uterine insemination and embryo transfer. RCN-Fertility Nurse Group, www.rcn.org.uk/direct

Biography: Debbie Barber

Debbie Barber has worked in the Oxford Fertility Unit for 16 years and is involved both in developing clinical



Persons Responsible Meeting

practice for nurses and lecturing at Oxford Brookes University and City University. As chair of the RCN-Fertility Nurse Group she has been fortunate to be involved in the development of guidelines for practice, national consultations and committee work. The nursing role is rapidly developing along with new technologies and it is exciting to help shape the future of nursing practice in this field. A key project that is taking up much of her time is developing the new distance learning course for fertility nurses which will offer all practitioners the opportunity to support their practice with stand alone modules or build up a diploma or degree.

Abstract: William Ledger

Publication of the NICE guidelines entitled 'Fertility, assessment and treatment for people with fertility problems' provided sufficient political pressure to evince the following statement from the Minister for Health, John Reid in February 2004: "As a first step, I want all PCTs, including those who at present provide no IVF, to fund one full cycle for all those eligible. In the longer term I would expect the NHS to make progress towards full implementation of the NICE guidance". The commissioning of the NICE guidelines came about after a previous Minister of Health, Frank Dobson, drew attention to the unfairness of the 'Postcode lottery' of provision of infertility treatments in the UK.

Implementation of the guidelines was planned to put an end to the lottery, with fair and equal provision in all corners of the country. It is a sad fact that the lottery remains alive and well some 18 months after John Reid's promise. Whilst funding for IVF has increased in some areas, it has remained static or even declined in others. There is also a lack of national consensus on eligibility criteria. A recent survey coordinated by Infertility Network UK has clearly shown the disparities that exist between adjacent PCTs in provision to couples with children from previous relationship, or to couples in which the woman is older, or overweight. In addition, some PCTs persist in only funding IVF treatment when the woman reaches a 'cut off' age, often at a point beyond the optimum age for chance of IVF success. Provision of treatment to infertile couples, or rather the lack of it, remains a national scandal, made particularly painful when compared with increases in State provision in most of Western Europe.

New drivers for increased State provision include a move to single embryo transfer for NHS funded IVF patients, and expression of interest and sympathy from the new Public Health Minister, Caroline Flint. However, at the time of writing, the three full cycles of IVF recommended two years ago by NICE remain a distant dream.

Biography: William Ledger

Professor Ledger is the Head of the Centre for Reproductive Medicine and Fertility, The Jessop Wing, Royal Hallamshire Hospital in Sheffield, UK and Professor of Obstetrics and Gynaecology. He is an RCOG accredited subspecialist in Reproductive Medicine

and has special interests in minimal access surgery, endometriosis and polycystic ovarian syndrome. He has published widely on many aspects of the management of infertility and was a member of the RCOG Working Party that recently compiled guidelines on the management of infertility.

PRs' MASTER CLASS

Workshop 1: Identifying and Dealing with Underperformance

Workshop Notes:

Performance Management is 'a process which contributes to the effective management of individuals and teams in order to achieve high levels of organisational performance. As such, it establishes shared understanding about what is to be achieved and an approach to leading and developing people which will ensure that it is achieved' (Armstrong and Baron).

This masterclass, which looks at the wider issues of good performance management as well as strategies to deal with underperformance, will be jointly facilitated by Dr Mark Hamilton, Consultant at the Aberdeen Fertility Centre and Fiona Daffern, Assistant Director Human Resources & Organisational Development at the HFEA.

The workshop objectives are to:

- establish what we mean by performance management
- establish what constitutes underperformance in the setting of IVF/ART/infertility practice
- identify mechanisms for identifying underperformance
- discuss ways of managing or dealing with underperformance
- understand the employment law issues relating to managing underperformance

Following a brief introduction to the topic the work will be through small group discussion and feedback. Participation in the workshop therefore assumes a basic level of understanding of the issues relating to performance and performance management.

Biography: Mark Hamilton

Dr Hamilton is a graduate of the University of Glasgow and his early medical career was based there. His interest in infertility started in the early 1980's and he obtained his MD in 1989 and subspecialist accreditation in reproductive medicine in 1990. He worked for two years in the National University of Singapore and obtained his consultant appointment in Aberdeen in 1990 where he has worked ever since.

He joined the British Fertility Society committee in 1995 and established the Ethics in Infertility series of annual meetings in his capacity as Chair of the Ethics Committee. He established special interest training courses in infertility jointly with the Royal College of Obstetricians & Gynaecologists and was treasurer of the



Persons Responsible Meeting

Society from 2001 - 5. He becomes Chair in 2006. He is an inspector on behalf of the Human Fertilisation and Embryology Authority, and has served on a number of RCOG committees relevant to training and research in reproductive medicine in recent years. He is the RCOG Deanery Advisor in Obstetrics & Gynaecology for the North of Scotland.

He has published widely over the past few years in the field of reproductive medicine and has particular interests in ethics and the clinical management of infertility.

Biography: Fiona Daffern

Fiona is a graduate of Leeds University and completed her postgraduate diploma in Personnel Management in 1991 at the Central Polytechnic of London. This year she has been accepted as a Chartered Fellow of the Chartered Institute of Personnel and Development (CIPD).

Fiona's career in personnel has spanned a variety of roles in the NHS, local government and further education and was appointed to her current role as Assistant Director - Human Resources and Organisational Development at the Human Fertilisation & Embryology Authority, in 2004. The HR team at the HFEA is also providing support to the newly established Human Tissue Authority.

Areas of expertise within the HR function include organisational change, both internal reorganisation and disestablishment and establishment of new organisations, TUPE, employment law, policy development (including performance management), work-life balance, equality and diversity, and cross organisational partnership working, as well as the day to day bread and butter of recruitment and retention, pay and pensions, training and development and staff management.

Workshop 3: Training for PRs

Workshop Notes:

The HFEA is developing its assessment process for Persons Responsible (PRs) to promote leadership, management and good quality care in licensed centres. A training package is being developed to support PRs in understanding their statutory role and ensuring compliance with the regulatory requirements. A risk-based assessment of PRs is being introduced so that attention is targeted at those people and areas where competency needs development. This is intended to increase public confidence in the service and standards at fertility centres and in the regulatory system that ensures these are met.

Biography: Trish Davies

Trish Davies is the Deputy Chief Executive, having joined the HFEA as Director of Regulation in March 2004. Before then, Trish was the Director of Corporate Policy and Communications for the National Care Standards Commission, which she joined at its inception in 2001, from the Department of Health, where she was the project manager for National Minimum Standards during the development of the Care Standards Act 2000.

Her previous career includes two years as an inspector in the Social Services Inspectorate, five years as Head of Inspection in Hertfordshire, setting up and managing a joint unit between the County Council and the Health Authorities and five years as Assistant Regional Director with NCH. Trish is a qualified social worker and has also worked in social work education, staff development and family placement.

EU Directive and Regulation

Abstract: Alison Murdoch

The EU Tissue Bank Directive has been adopted into UK law. It is likely that the body responsible for providing accreditation under the Directive will be the HFEA. The Directive will be implemented by existing legislation from April 2006. Whilst the final details of the Technical Directives are yet to be approved by the EU, there is now a clearer view of the requirements. It is expected that they will be approved between autumn 2006 and autumn 2007.

Any treatment in which cells or tissues are processed before being transferred to the original donor or to anyone else, will be subject to the new regulation. This includes IUI. Any currently unlicensed IUI/GIFT centre will need to demonstrate compliance from April 2007. All Centres will be expected to be compliant with the new regulations at the time of their inspection between April 2007 to 2009 (assuming a two year inspection cycle).

At present the HFEA has a working group, which is translating the requirements of the Directive into an appropriate document against which Centres can be accredited. The principal aim is Quality Management and the implications of this will be explained.

Biography: Alison Murdoch

Alison Murdoch completed her undergraduate medical studies in Edinburgh before moving to the North East to complete her training in Obstetrics and Gynaecology. Her MD Thesis was in Reproductive Medicine and this stimulated an interest in Infertility. At that time IVF was the new treatment and she established a service for the North East in Newcastle. The Newcastle Fertility Centre at Life is now recognised as one of the leading units in the UK. Professor Murdoch is past Chair of the British Fertility Society. She is also an Inspector for the Human Fertilisation and Embryology Authority."

Discussion and Closing Remarks

Biography: Neil McClure

Neil McClure is Professor of Obstetrics and Gynaecology at Queen's University Belfast. He is also Chair of the BFS Meetings Sub-committee and Editor-in-Chief of the Obstetrician and Gynaecologist. His research and clinical interests are largely centred on male infertility and he is a consultant in the Regional Fertility Centre, Belfast.



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