

IN CONVERSATION WITH

Mr Duncan Summerton

Urology News was delighted to recently have a chat with **Duncan Summerton**, Consultant Urological Surgeon in Leicester and new **President of BAUS**.



Duncan with a native wild brown trout caught on a dry fly on the Derbyshire Wye.

Can you tell us a bit about your background and what led to you pursuing a career in urology?

Certainly – I graduated in 1987 from Leicester University, and initially wanted to be an orthopaedic surgeon. I joined the Royal Navy as a Cadet during Medical School. After house jobs, and two years of general duties (being the Medical Officer on frigates from the West Indies to the Falkland Islands and the Antarctic), I did my basic surgical training in the military. The rotation was six months general surgery, six months A&E, six months orthopaedics and then six months of either ENT or urology. I chose urology and had a fantastically busy and enjoyable time. I did lots of operating, saw the scope and range of what urology could offer and this completely changed my career aspirations. Added to which, not long after I started, I went along for a day as an SHO to the BAUS annual meeting in Bournemouth in 1992, and then presented a paper in Harrogate in 1993. I really liked those meetings and the people there – so that was that, really!

I then did a fair bit of general surgery (to

deploy as a military surgeon) and, after a spell as a surgeon in Gibraltar and Belize, trained in the Wessex region, the USA and London. I was appointed as a Consultant in Portsmouth in 2001 and then, on leaving the Royal Navy, moved back to Leicester in 2005 to complete the circle.

Who has inspired you in your career and why?

Almost everyone you work for, and latterly with, and also those who you train, have some facets from which you can learn – good and bad. I have been privileged to work with some fantastic surgeons. To name a couple, Phil Barker for meticulous technique, Pat Malone for patient / parental counselling and superb tissue handling, a few well known UCL surgeons, and all my colleagues in Leicester – past and present – who are great. I think surgery itself, and urology especially, is inspiring and the rewards when it goes well and results in a happy patient are very satisfying and humbling. It makes all the hard work to get to that point worthwhile.

What has been the best piece of advice that you have received in your career and what advice would you offer to those following in your footsteps?

When I was an SHO in general surgery my Senior Registrar at the time, James Campbell, said, “never operate on someone until you have met them before and said hello...” Although this is not always possible in an emergency situation, I still follow this rule in every elective patient I operate upon. It really is important, especially if you are operating on joint waiting lists and / or patients who you might not have met before or listed yourself. Meeting a patient for the very first time after an operation which hasn't gone well or as expected is not a good position to be in.

To those earlier in their career, I would offer the advice that they should try to keep an open mind and be flexible. Some of the best opportunities sometimes arise from serendipity. A plan is good, but try not to plan to the 'nth degree' as this closes down the range of options open to you.

Also, as a trainee, don't think that any surgery is wasted. Even if you are rotating through a speciality that you have no intention of following, or performing a procedure that doesn't count towards your indicative numbers, surgery is surgery and will probably be useful in some way. And the third thing? BAUS is a brilliant organisation so get involved – we are always on the look-out for volunteers and new faces.

How have things changed since you first started working in urology?

In many ways! Subspecialism is now the norm, and this is a good thing, although there are now fewer urologists able to take on a wide range of procedures. Laparoscopy and now robotics have really changed the way we operate. Patient expectation is undoubtedly higher and the input a consultant puts into each patient is so much greater. The increased roles and responsibilities of nurse specialists is also a fantastic development. Training has become much more formalised and structured – which is good – but the hours worked, and thus the experience, of those who are approaching

independent consultant practice is not as great. I think this causes some anxiety amongst our new colleagues and not a small degree of stress.

The amount of paperwork and administration has grown hugely, and whilst audit and accountability are key, I sometimes wonder whether this takes us away from doing what we do best.

What hasn't changed is the positive spirit and humour of those involved in urological care, we should appreciate that as we are very lucky to be able to do what we do.

Congratulations on your recent appointment as BAUS President; what are your plans for your tenure?

Thank you... I am currently occupied with how we are going to provide all the urological care which will be needed with an increasingly elderly population with increasingly complex comorbidity, without an increase in our trainee numbers being allowed. This is combined with the earlier retirement of colleagues because of the new pension rules, and burnout. We still look after patients who do not need operative intervention and that is quite rare in a surgical speciality.

I would also like to strengthen the links between BAUS and other national and

international urological societies (for example, the AUA, USI, USANZ, EAU and SIU).

We have recently welcomed urology trainees as a section of BAUS, and that should be a great benefit to us all. I, or one of the BAUS officers, will be at every regional meeting to listen to the good and the bad and try to help find a solution. I want us also to recognise what brilliant advances have been made in our speciality and to reinforce that we are fortunate to be the best speciality. In 2020 it will be the 75th anniversary of BAUS and we will celebrate this along with the RSM Section of Urology (100 years) and The Urology Foundation (25 years). Watch this space!

What are the major challenges facing urology at the moment and do you see BAUS as central to addressing these?

We do live in a challenging NHS environment and I think BAUS should aim to mitigate against the worst of that. Whilst we cannot completely restructure the NHS, there are things we should and could do to help improve our members day-to-day working environment and thus improve the service we give to our patients. There are problems with the variability of on-call working rotas and support for that, and this is linked to

difficulty recruiting into smaller or remote units. Absolutely, BAUS should be at the very centre of all these matters and I would like to see us as the 'go to' organisation for all matters urological in the UK.

And finally, if you have any spare time, how do you relax?

I don't really get that much spare time, but I do have a very supportive family with three semi grown-up young adults who I enjoy spending time with. I enjoy photography, especially landscape, and travel (which is just as well for the upcoming two years), live music, the countryside, tennis and fly fishing (see photo!). I have a season ticket for Leicester Tigers, sadly not doing too well at present, and enjoy trips to Twickenham. I would, if time permitted, like to learn how to play the guitar beyond the three chords I have currently mastered!



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