As many will know a group of knee surgeons (Steve Bollen, John Fairclough, Fares Haddad, Sean O’Leary, Andrew Price and Tim Spalding) have been working together to try and develop a national registry for knee ligament surgery. This was initiated with the agreement of BASK, BOSTA and the BOA.

One of our main aims was to have a registry where the data was owned by the surgeons who input the data (i.e. independent of any governmental organisation). Having control over the data will ensure that it will only be used in constructive ways to benefit both ourselves and our patients. This has meant gaining the cooperation of several of our industry partners to fund this project. We have now done this and intend to maintain this position in the future.

We have recently gained the mandate / backing of the BASK Executive and they have further supported this initiative by agreeing to financially assist the set-up of the NLR. BASK will be the ‘controlling organisation’ for the NLR and the ‘NLR Steering Group’ will be a sub-committee of the BASK Executive. Those currently on the development group will become involved in the initial steering group with a (BASK appointed) Chairman. In time the members of the steering group will be appointed by open application. In addition there will be a research ‘arm’ of the NLR. The Chairman of the BASK Research Committee will be Chairman of the NLR Research Sub-committee and the committee members to be selected through the BASK Executive (also via open application).

The requirements for and potential benefits of a registry - to patients, surgeons, industry and the NHS - have previously been written about and published. The aims of the NLR will be to ensure quality of surgical performance (accepting the essential role of rehabilitation) when undertaking (anterior cruciate) ligament reconstruction in the UK. It is not a tool to identify low volume surgeons but will be able to set a standard for expected outcome following such surgery, whatever volumes are being done. We would hope that all knee surgeons who undertake such procedures would support this initiative and enter the relevant data for all their patients. It will allow a central point for the collection and comparison of each surgeon’s outcome scores, simple interpretation and representation of these scores and comparison to a national ‘average’. It will not be a mandatory undertaking but we foresee that this will eventually play a key role in appraisal and revalidation for knee ligament surgeons.

The Scandinavian Registries have been established for several years and have provided the framework for the NLR. We are grateful for their cooperation to date. However there are two major issues which are becoming evident in these registries - cost and declining follow up rates.

The short term aim of the NLR is to establish the actual number of procedures we are undertaking in the UK, the demographics of the population we are operating on and how (technically) we are carrying out the surgery. In time the accumulated outcome scores will give an indication as to how we are performing as individual surgeons, compared to a national average and we will also be able to compare our results to those of the Scandinavian (and other) registries. The outcome and performance of the differing types of graft and fixation devices can be compared and this would be an ideal environment for controlled introduction of new techniques and products.

I hope that you will all get behind this project and endure the ‘early development’ days to establish ways and means of accumulating the core data set we require for this to be effective. There will be a help facility available on the Amplitude website and ‘daytime hours’ helpline at Bluespier should there be issues.

If you have any particular issues and / or questions please contact me at sean.oleary1@btinternet.com.

Yours,

Sean O’Leary (Chairman of the National Ligament Registry for BASK)
on behalf of the NLR Development Group

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