

The Importance of High Volume Centres for Endocrine Surgery

Why did you choose to become an endocrine surgeon?

- Endocrine surgery is a unique specialty, in which surgical management often provides a dramatic and immediate impact to a patient's quality of life. I enjoy the delicate and precise technical approach that endocrine operations require, as well as the management of the underlying complex pathophysiology. In experienced hands the procedures are extremely safe and the long-term outcomes excellent. This makes for a highly fulfilling practice!

Why do you choose North Shore Private for your surgical patients?

- North Shore Private Hospital is a high-volume endocrine surgery centre, and manages in excess of 500 patients annually.
- This means that the entire multidisciplinary team that is involved in looking after the patient – from theatre, to recovery, to the ward - work seamlessly together to provide the optimal experience for the patient.
- The importance of this experience cannot be overstated, especially in ensuring early recognition of any deviation from the expected post-operative course. This is one of the key factors ensuring excellent surgical outcomes.

What is a high volume centre?

- A high volume centre performs more than a certain threshold number of cases of a particular procedure per year.
- For thyroid surgery, a centre is considered high volume with a caseload of >100 thyroidectomies per year
- For parathyroid surgery, this is >40 per year and for adrenal surgery >12 per year.

What are the benefits of a high volume centre?

- There is strong evidence that outcomes from high-volume centres are significantly better than those of low volume centres.
- For example, international guidelines recommend that thyroid cancer and autoimmune thyroid disease should only be managed in high-volume centres, as the oncological outcomes are significantly better and the complications rates lower.

- There are similar recommendations for parathyroidectomy and adrenalectomy.
- In addition to surgical outcomes, an important benefit is the experience of the multidisciplinary team. Particularly when dealing with rare conditions or advanced cancer. The North Shore campus is a major quaternary thyroid cancer referral centre in Australia allows patients to access clinical trials, genetic testing and novel therapies for advanced disease.

What is new in the treatment of thyroid cancer?

- There have been major advancements in the treatment of thyroid cancer in the last few years.
- When dealing with advanced disease, the specific genetic signature of the tumour and driver mutations can be assessed. Often this identifies specific targets for systemic therapy, which can be used both before and after surgery. In patients who present with locally advanced disease that is not initially surgically resectable, we have recently developed a streamlined treatment pathway to help patients quickly access targeted therapy. This often facilitates tumour downstaging and subsequent surgical clearance.
- In low-risk disease, progressive de-escalation has characterised the evolution of surgical management. In most cases, the normal half of the thyroid can be preserved, which usually means that patients do not require thyroxine therapy.

What is new in the treatment of hyperparathyroidism?

- A crucial determinant of the success of minimally invasive parathyroid surgery is the localisation imaging. Recently at the North Shore campus we have introduced the ¹⁸F-Fluorocholine PET as a localisation option for patients with primary hyperparathyroidism who have had negative localisation studies with ultrasound, sestamibi scan and 4D CT. In this cohort, the preliminary results have been excellent, with a 71% accurate localisation rate and 100% post-operative biochemical cure rate in localised patients undergoing parathyroidectomy. Successful management of such complex patients relies on effective multidisciplinary work-up and highlights the benefit of being treated at a high-volume centre.



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Dr Alex Papachristos is a General Surgeon, with specialist training in Endocrine Surgery. After completing surgical training in 2019 at The Royal Melbourne Hospital, he undertook subspecialty training in endocrine surgery as the TS Reeve fellow at the prestigious University of Sydney Endocrine Surgery Unit, following which he was invited to join the unit as a consultant. He has expertise in all aspects of thyroid, parathyroid and adrenal surgery, and has a special interest in advanced thyroid cancer management and minimally invasive adrenal surgery, offering both laparoscopic and posterior retroperitoneoscopic approaches.

Alex is appointed at Royal North Shore Hospital and North Shore Private Hospital, as well as Ryde Hospital. Outside the operating theatre, Alex is actively involved in translational research and is currently exploring novel therapeutic options in advanced thyroid cancer.

Interests:

- Minimally invasive surgery
- Thyroid, parathyroid and adrenal surgery

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