

A student surgical society – the Cape Town experience

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Summary

The UCT Surgical Society, Africa's first student surgical society, is a student-managed academic society that promotes undergraduate interest in the field of surgery at the University of Cape Town. With over 700 members in 2009, it is one of the largest student surgical societies in the world. This article describes the origins, aims and objectives of the Society, and outlines a framework that students anywhere may use to create their own academic interest societies.

The UCT Surgical Society is a student-managed academic society that promotes undergraduate interest in the field of surgery at the University of Cape Town. It is Africa's first student surgical society, and with over 700 enrolled members in 2009 has grown to become both one of the largest academic medical student organisations in South Africa and one of the largest student surgical societies in the world. In this article we describe the origins of the Society and its aims and objectives, and most importantly outline a framework that students anywhere may use as a mould for the creation of their own academic interest societies. The first author's personal involvement with the Society during 2008 and 2009 was the stimulus for the article.

The history of the Society

The UCT Surgical Society was formed in late 2006 by six 4th-year medical students at the University of Cape Town, who were inspired by news of the formation of student-run surgical interest groups at numerous medical universities in the UK.^{1,2} These societies, formed as part of an education outreach initiative of the Royal College of Surgeons of England (RCS), hosted regular extra-curricular surgical lectures and clinical activities for their medical students, all with the general aim of increasing undergraduate (and ultimately postgraduate) interest in the study of surgery.³ In its first year of existence, the UCT Society managed to attract approximately 300 members, most of whom were medical students at UCT. In its second year the Society fared less well, with an enrolled membership of 220. In 2009, enrolled membership soared to 711, making the Society the largest academic society at UCT.

Aims and objectives

The UCT Surgical Society holds aims and objectives (Fig. 1) similar to those of the undergraduate societies initiated by the RCS in the UK, and furthers these aims by hosting regular events throughout the academic year.

1. To promote surgical education among students and stimulate interest in the field of surgery
2. To promote a culture of medical and surgical research among students
3. To expose students to leading personalities in the field of surgery
4. To expose students to the latest surgical innovations available both locally and internationally
5. To provide a stimulus for a career in surgery
6. To make contact and create partnership with other surgical societies worldwide

Fig. 1. The aims and objectives of the UCT Surgical Society.

What does the Society do?

Traditionally, the backbone of the UCT Surgical Society has always been the series of monthly evening lectures (Fig. 2) that are presented throughout the academic year by leading local and inter-

2009 lectures:

1. Main academic lecture series:
 - Professor J. E. J. Krige – 'Scalpels and sutures – The history of surgery, from medieval to modern'
 - Professor D. Kahn, Drs Muller, Stupart and Cairncross – 'Women in surgery'
 - Dr K. Adams and Professor G. Louw – 'Plastic surgery and an introduction to face transplantation'
 - Professor D. Benatar – 'The ethics of contested surgeries'
 - Dr R. Verster and Professor G. Louw – 'Surgery for obesity'
 - Professors Fieggen, Sala and Figaji – 'An evening of neurosurgery: Intra-operative neurophysiological monitoring and neuro-endoscopy'
 - Professor M. Veller – 'Endovascular surgery – does it save lives?'
2. Launch of the 'Open Forum' series
 - Dr J. Cowlin – 'The medical practitioner's guide to the business world'

Past topics:

Past lectures have included topics ranging from 'Advances in endoscopic surgery', 'Head and neck ENT surgery', 'Trauma surgery' and 'Cardiac transplantation' to 'The history of vascular surgery' and 'Life as a surgical registrar', and have been presented by speakers including Professors H. van der Walt, J. Fagan, K. Boffard, P. Navsaria and J. Brink, and Drs P. Matley, E. Steyn and W. Koen

Fig. 2. Previous academic lectures presented at the UCT Surgical Society.

national surgical personalities. Since the rise in popularity of the Society during 2009, these lectures have become so increasingly popular that often no lecture theatre at the Medical School can accommodate all in attendance (talks regularly attract 200 - 300 attendees).

The Society has also begun to host an additional tri-monthly lecture series entitled the 'Open Forum' series, where speakers are invited to present broad medically related topics that often do not fit the purely surgical themes of the main academic lecture series (Fig. 2).

In addition to lecture- and presentation-based education, the Society also offers monthly practical surgical skill courses for its members. These courses, offered in partnership with the Department of Surgery at UCT (which has very generously shared its equipment, time and personnel with the Society), are designed as an addition to the standard surgical skills courses offered to all 5th-year medical students at UCT. The courses are centred on excerpts from the official Basic Surgical Skills Course (which is offered across the country by the Colleges of Medicine of South Africa) and are open to all enrolled members. They are divided into two streams, basic and advanced (Fig. 3), and are tutored by members of the Department of Surgery at UCT. These courses have become so popular among the students that bookings are done months in advance!

1. Basic stream: Theatre etiquette, suturing skills
2. Advanced stream: Lymph node dissection, vessel ligation, bowel anastomosis

Fig. 3. Surgical skills courses offered to members of the UCT Surgical Society.

In 2010, the Society aimed to continue with its goal of promoting extra-curricular academic learning among undergraduate medical students. Additions to the Society's academic year included the establishment of regular dissection groups (taught by members of the Department of Anatomy at UCT), the hosting of conference-style events focusing on specific surgical themes, and a programme to further promote research by members. In addition, the Society aims to help form similar medical student societies elsewhere in South Africa and Africa.

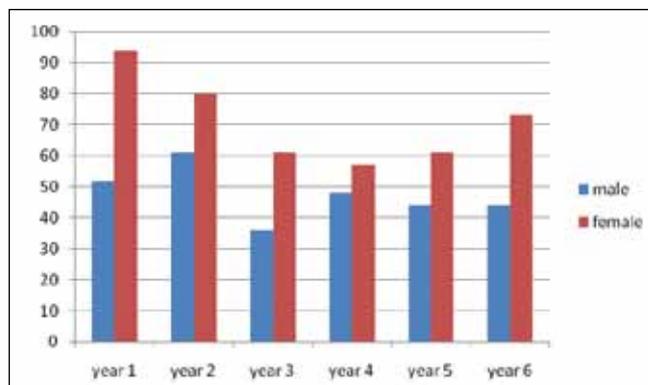


Fig. 4. Gender distribution among members according to academic year of study.

Statistics of the Society

In 2009, the Society compiled its first set of statistics. A questionnaire filled in by 80% of our membership revealed the gender distribution

within the Society (Fig. 4) and our members' surgical interests at an undergraduate level (Fig. 5). In addition, it was found that 64% of all enrolled UCT medical students belonged to the Society.

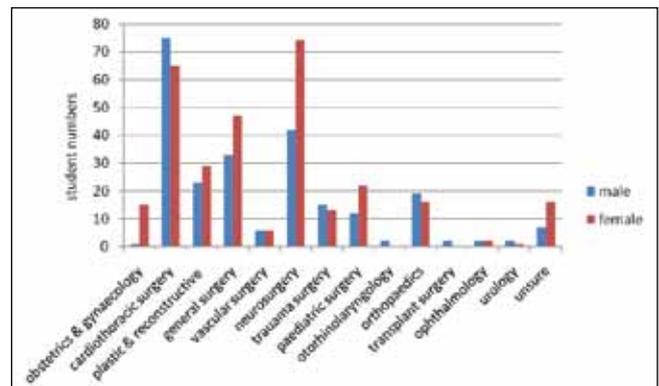


Fig. 5. Bar graph representing the primary area of surgical interest of the Society's membership.

A framework for the creation of student-managed academic interest groups

A student surgical society is an organisation that is easily replicated at any institution: all that is needed is a group of motivated, hard-working students united in their interest in a specific field or topic, and mentorship and guidance from senior faculty.

Before forming an academic interest society, a checklist needs to be evaluated (Fig. 6).

1. Society aims and objectives
2. Target audience
3. Events/other expression of aims and objectives
4. Means of finance
5. Means of advertising
6. Roles within the management team

Fig. 6. Checklist for the formation of an academic student society.

Essential to the formation of a society is the formulation of a set of aims and objectives that will underlie all actions taken by the society. These aims will often be revised as the society develops and matures. It is also important to decide who the target audience will be - will the society cater for medical students alone, or include others?

In addition, a programme of events needs to be developed. It is important that all events be carefully planned well in advance in order to maintain membership interest in the society. Events hosted by the UCT Surgical Society have been described above. As such a society can have a significant impact on its members, we recommend inviting charismatic and inspirational academic personalities. A checklist for the organisation of a society lecture is set out in Fig. 7.

Hosting lectures, debates and courses costs a lot of money, and it is therefore necessary to develop a basic financial plan before launching a society. In Cape Town, we were fortunate to be able to finance our events thanks to generous sponsorships from pharmaceutical and surgical equipment manufacturers. We also raised lesser amounts from our membership contributions. It is strongly recommended that a portfolio or brochure describing the society

1. Decide on a theme or topic
2. Invite potential speakers (based on the recommendations of faculty mentors)
3. Organise venue, snacks and beverages, gift for speakers
4. After the presentation:
 - clean the venue
 - write letters thanking all speakers
 - critically review the event in terms of future improvements

Fig. 7. Checklist for the organisation of an evening lecture.

for prospective sponsors should be designed, specifically highlighting how the sponsor may benefit from donating to the society. The UCT Society even has a coat of arms (Fig. 8).



Fig. 8. The official coat of arms of the UCT Surgical Society, designed in 2009, represents the Society and its unique location at the tip of Africa. It includes aspects adapted from the first coat of arms of Cape Town (when ruled by Governor de Mist during the early 19th century – the three golden annulets), the official colours of the UCT Medical School, and the distinctive outline of Table Mountain soaring above the blue waters of Table Bay. The coat of arms also includes the Latin motto 'Spes Bona' (meaning 'Good Hope') and the eternal book of knowledge, both taken from the official University coat of arms and held up proudly by the guardians of the UCT Surgical Society – our two surgical blades.

Advertising is another important aspect of a society – advertise well, and your events will be well attended (unfortunately, the opposite is also true). In Cape Town, we used a mixture of media to communicate to our members: (i) mobile text messaging (via a 'bulk sms' service); (ii) printed posters posted at Medical School and academic hospitals; and (iii) web-based advertising (the Society has a website (www.surgsoc.org), detailing future lectures). We found the most effective medium to be the mobile phone bulk text message system.

Organising a well-functioning team to lead a society can be a challenging process. We recommend the following leadership system: an executive team, consisting of president, deputy (who both oversee all aspects of the society) and treasurer; and a general team ranging from 5 to 10 members (depending on the size of the society) who rotate their roles and duties (advertising, helping organise events, etc.) throughout the academic year. We successfully implemented this system in Cape Town, and found that its strength lies in the efficient load-sharing of the daily work required to run the society.

As with all new projects, one must be prepared for both success and failure – the latter often providing the stimulus for significant long-term improvements. However, hard work, enthusiasm and constant review of society programmes will ultimately result in a healthy and successful society.

Discussion: Is the UCT Society relevant to undergraduate study?

The Society provides an informal, extra-curricular teaching programme that is proving to be a stimulating adjunct to the medical school curriculum at UCT. This is especially relevant today in light of the reduction of undergraduate teaching time allocated to anatomy and surgery worldwide.^{4,5}

We have not found any studies that examine the possible effects of such a society on undergraduate academic performance. As our Society is still in its infancy, we have no data to this effect. It is also as yet unknown whether such a society truly influences a larger number of students towards a career in surgery. Future investigation is needed to address these questions more precisely.

Conclusion

The UCT Surgical Society has grown tremendously since its formation 3 years ago. We hope that it will continue to provide sterling informal academic education to future generations of members. The experience of being involved in an academic student society is very rewarding and highly recommended, and we hope that our Society's story will inspire the formation of similar groups elsewhere in Africa and the world.

On behalf of the Society, I would like to sincerely thank Professor Delawir Kahn for his constant guidance, inspiration and support. Special mention and thanks are due to Dr Sanju Sobnach, who founded the Society in 2006 and led it throughout its first few years. I would also like to thank the hard-working and motivated committees of 2006 - 2008 and especially 2009; all speakers; Professor Graham Louw (Department of Human Biology, UCT); members of the Department of Surgery (especially Mr Jason Lewis); Professor Marian Jacobs, Dean of the UCT Medical School; the Society's very generous sponsors; and all our members and supporters.

Dr Favara was president of the UCT Surgical Society during 2009 and is currently completing his internship in the Eastern Cape.

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