

About Enteric

Enteric, The Bowel Function Healthcare Technology Cooperative, is one of two pilot HTC's jointly funded by the Department of Health and the Technology Strategy Board with support from the Research Councils and the ABHI. We aim to become the national centre for facilitating innovative technology in the field of disorders of bowel function for the NHS and beyond.

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Peter Blenkinsop joins Steering Committee



After an early career in the biotechnology industries as Divisional Director Operations within Tate and Lyle, Peter joined the NHS as Director of Commissioning for Barking and Havering FHSA in 1992. In 1995 he set up one of the first Business Links. As Chief Executive he successfully developed partnerships between global businesses and SMEs located in his area to increase opportunities for regional procurement. Peter became Director of Business Development for the BBSRC BioEngineering Institute in 1997.

During the next 7 years he expanded the Institute's international business links. In 2004 Peter was appointed Chief Executive of the first NHS Innovation Hub for the East of England based at Papworth Hospital, Cambridge. Over the next 6 years he built a highly successful operation which provided professional support to all NHS employees in the Region, enabling their innovative ideas to be translated into products and services to deliver enhanced benefits to patients, as well as income to the NHS. At the start of 2010 Peter was appointed Deputy Chairman, by which time over 60 NHS Innovations had been commercialised to UK and overseas businesses. In doing this Peter established strong partnerships with many international companies and government bodies.

During the early part of 2010 he was instrumental in bringing several of the Regional NHS Hubs together to form a national alliance, before retiring in May.

National Centre for Bowel Research and Surgical Innovation on the starting blocks

The National Centre is a new initiative by the Academic Surgical Unit at Barts and the London, supported by the charity Bowel & Cancer Research and Enteric. The NCBRSI will concentrate a variety of expertise and knowledge under one roof in order to advance translational research and technological innovation, bringing together clinicians, researchers and industry. Enteric will have a home within the Centre and will provide industrial liaison and outreach functions as well as leading on securing the adoption of proven innovations.

Plans for the Centre are well under way and the site has been approved, with £2 million in grant funding from major supporters already secured. The Centre is expected to open its doors in 2012.

During its first five years of operation, the Centre will focus on research into reducing the need for permanent stoma formation, improving understanding of the causes of constipation and incontinence and identifying biomarkers relevant to bowel cancer; all with a view to achieving considerable improvements in patient care and long-term quality of life.

Enteric Core Team

Clinical Director:
Professor Norman
Williams

*Deputy Clinical
Director:*
Mr Charles Knowles

*Director of
Operations:*
Dr Michael Grahn

*Business
Development
Manager:*
Mr Antonio Quadrucchi

*Administrative
Assistant:*
Ms Sue Taylor

Hosted by Barts &
The London NHS
Trust, Enteric is part
of the NIHR i4i
programme and is
supported by the
Technology Strategy
Board, EPSRC, MRC
and the ABHI

Tell us your story ...

Enteric exists to bring new techniques and technologies for the treatment and management of disorders of bowel function into general use. Through our activities in collaboration with our partners, we aim to improve the quality of life for patients through better products and resources, as well as saving money for the NHS.

The success of new procedures such as APPEAR has been reported in previous newsletters. This sphincter-saving surgical technique removes the need for a colostomy in certain cases. The importance of such innovations is illustrated by the experiences of colostomates themselves. To be faced with a lifelong stoma, and having to use a colostomy bag, often leaves patients devastated, not only because of the practical implications but also a natural embarrassment. One described it as 'horrendous', that he felt 'subhuman', and if there was a smell about he assumed it was him. A normal life seems impossible. Going out anywhere, for instance on holiday, is difficult because of the paraphernalia and facilities necessary to change the bag and manage the colostomy. Overall, patients' quality of life can be severely impaired. Therefore anything that can make their lives easier would be very welcome, and in the longer term, cost-effective. Our work is concerned with tackling these problems both through minimising the need for stomas and improving the technology for stoma management.

In order to continue our work, we need your involvement. **Contact us if:**

- You have a need that is not currently met by existing devices or practices
- You have identified a new or expanded use for an existing technology
- You have an idea that promises to improve treatments or management
- You have a device or diagnostic system in development.

A Strategy for the Future

The Enteric Steering Committee and management team held a very useful meeting early in June to review our progress to date and formulate a strategic plan for the next 18 months. The strategic plan will be structured around supporting the timely completion of the key activities needed to achieve our main objectives.

Among the key objectives identified, Enteric aims to deliver 2-4 commercially viable products that significantly improve both quality of life and healthcare from priority projects such as APPEAR, improved stoma devices and PTNS. A range of clinical partnerships covering all sectors providing healthcare will also be developed with a view to speedy evaluation and introduction to market of new technologies. In particular, Enteric will engage further with providers of frontline services, seeking the contributions of patients and carers as well as clinicians in order to identify unmet needs.