

CURRICULUM VITAE

ADIL ASLAM

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Personal data

Name: Adil Aslam
Nationality: British
Office Telephone No: +441223348162
Cell (preferred): +447730782652
UK General Medical Council number: 3604782 (Full registration, on specialist register for paediatric surgery)
UK Medical Defense Union number: 221187X

Education

POSTGRADUATE EDUCATION

Doctor of Medicine (M.D.) University of Bristol, UK 2000
Research Degree awarded by University of Bristol (Equivalent to PhD)
F.R.C.S. Eng. (Paed Surg) 1998
Fellow of the Royal College of Surgeons of England in Paediatric Surgery (Equivalent to American Boards)
U.S.M.L.E. 1996
United States Medical Licensing Examination
F.R.C.S. (Eng.) 1990
Fellow of the Royal College of Surgeons of England in General Surgery
F.M.G.E.M.S (USA) 1988
Foreign Medical Graduates Examination in Medical Sciences
P.L.A.B. 1987
Professional and Linguistics Assessment Board, UK

MEDICAL EDUCATION

King Edward Medical College, M.B.B.S. 1984
Lahore, Pakistan

Among the top 10 graduates of the class

Professional Experience

CURRENT POST

Clinical Lead, Paediatric Surgery Cambridge University Hospitals Foundation Trust, Cambridge, UK 2020 to present
Departmental lead responsible for development, administration, performance, efficiency, patient safety and governance.

Consultant (Attending) Paediatric Surgeon, Cambridge University Hospitals Foundation Trust, Cambridge, UK 1999 to present
I am interested in minimal invasive gastrointestinal and thoracic surgery, neonatal surgery, and general pediatric surgery. I developed minimal invasive surgery in Cambridge over the last 22 years. I am a faculty member on a number of courses and have chaired sessions in association meetings (BAPS, BAPES, WOFAPS). Cambridge one of the largest university hospitals in the UK, affiliated with the University of

Cambridge. The department comprises 7 attending surgeons, 7 Fellows, 2 residents, and 7 clinical nurse specialists. It serves a tertiary population of 4.5 million.

ADDITIONAL ROLES AND RESPONSIBILITIES

1. Course Director, Stortz/BAPES advanced 3mm laparoscopic course. 2018-present.
This is an advanced course for senior trainees and consultants. We teach advanced techniques of TEF, Diaphragmatic hernia, and lung lobectomy on an animal model.
2. Lead for National Selection interview panel. 2018 to present.
This body manages selection for trainee recruitment in the entire UK as a central body.
3. Regional College Specialty Advisor for the Royal College of Surgeons of England 2018-present.
In this post an advisory and overview responsibility for the specialty in the East of England is required.
4. Member Specialty Advisory Committee in paediatric surgery, Joint Committee for Surgical Training (JCST). 2018 to present.
This body is part of the Royal College of Surgeons of England, and implements surgical training and education standards in the UK.
5. Examiner Final FRCS (Paediatric Surgery), Joint Committee on Intercollegiate Examinations (JCIE). 2017-present.
I examine for the Final FRCS examination which is equivalent to USA Board examination.
6. Examiner, Final MB, University of Cambridge medical school. 2007-present.
7. Executive member, British Association of Paediatric Endoscopic surgeons, 2019-present.
This body represents all the paediatric laparoscopic (endoscopic) surgeons in the UK.

PREVIOUS ADDITIONAL ROLES

1. Member British association of paediatric endoscopic surgeons, Education Committee. 2017-2019
This body is involved in developing curriculum material and courses for UK trainees in pediatric surgery. I am faculty on a number of UK courses mostly in minimal invasive surgery. For instance we have a yearly Stortz and Just Right sponsored 3 mm course for newly appointed consultants and senior trainees.
2. Associate Lecturer University of Cambridge. 2014-2020.
This is a teaching and research role for the University of Cambridge. It involves supervision of laboratory research, supervision of doctorate students, and teaching medical students from University of Cambridge.
3. Member of Specialty Training Committee for the Southeast England Deanery.

2008-2018.

This committee provides annual assessment of all fellows in the London and Southeast England region. It also reviews any training issues in the 11 training programs in the region.

4. Member of National Selection committee for pediatric surgery: 2009-2018.
This committee develops and conducts interviews for all pediatric surgery registrar (fellow) recruitment at a national level. We implement fairness and standardization in the process. I represent London and the Southeast of England.
5. Local program director and assigned educational supervisor for pediatric surgery fellows in the hospital. 2008-2018.
6. Chair, Paediatric surgery forum, Cambridge university hospital. 2011-2015
This is a committee with oversight responsibilities across all specialties that operate on children in the hospital. We monitored implementation of standards of care and audit on behalf of the East of England strategic health authority.
7. Member of the East of England Strategic Health Authority pediatric surgical network. 2009-2015.
This committee is involved with writing clinical standards for surgeons, anesthesiologists, and nurses along with hospital facilities for children having surgery. We developed a standards' questionnaire and audit regional hospital for compliance. We are involved with developing a network to help and support smaller hospitals in the region with children's surgical problems.

Awards

1. Bronze Clinical Excellence Award: 2009-2019
Awarded by the National Advisory Committee on Clinical Excellence Awards on behalf of the British Government to recognize and reward exceptional contribution of NHS (National Health Service) consultants, over and above that normally expected in a job, to the values and goals of the NHS and to patient care and research. About 10% of consultants get an award. It is accompanied by a substantial salary rise.
2. Pump Priming grant Royal College of Surgeons of England. 2001.
Awarded as a new attending to establish a research project in Cambridge
3. Ethicon travelling fellowship: 1999
Awarded for travel to a center outside UK

Previous posts held

1. Clinical Director (Chief) Pediatric Surgery, Cambridge University Hospitals Foundation Trust, Cambridge, UK 2007 to 2014
In this rotating role I built the department from 3 consultants and no registrars to its present strength. I instituted clinical governance, audit and patient risk management with safety processes and protocols. I expanded the role of the department in the hospital and the region. Instituted outreach clinics and operating sessions and represented pediatric surgery in regional bodies and forums.

2. Foreign Fellow (Chief Resident) Pediatric Surgery, Children's National Medical Center, Washington D.C., U. S. A. 10.1.98-8.31.99
I shared the 1:3 on-call rota with 2 other fellows. The post offered wide experience in general pediatric surgery, trauma, ECMO, neonatal and thoracic surgery.

Posts 3-6 were parts of a recognized pediatric surgery 6 year fellowship training program in the Bristol/Birmingham UK training consortium.

3. Specialist Registrar (Fellow), Pediatric Surgery, Birmingham Children's Hospital, Birmingham, UK 11.1.97-9.30.98

4. Specialist Registrar (Fellow), Pediatric Surgery, Bristol Children's Hospital, Bristol, UK 10.1.96-10.31.98

5. Research Fellow & Honorary Tutor in Pediatric Surgery, Dept. of Pediatric Surgery, Bristol Children's Hospital & Dept. of Medicine Labs, Bristol Royal Infirmary, Bristol, UK 11.1.94 –9.30.96

6. Registrar (Fellow) Pediatric Surgery, Bristol Children's Hospital, UK, Bristol, 10.1.92-10.31.94

Posts 7-8 were to meet the requirements for entry into a pediatric surgery fellowship training program

7. S.H.O. (Resident) Neonatology, St. Michael's Hospital, Bristol, UK 8.1.92-9.30.92

8. S.H.O. (Resident) Pediatric Surgery, Bristol Children's, Hospital, Bristol, UK, 2.1.92-7.31.92

Posts 9-13 were general surgery training experience in the UK as fellow and resident.

9. Registrar (Fellow) General Surgery, Poole General Hospital, Poole, UK 1.1.91-12.30.91

10. S.H.O. (Resident) General Surgery, Clatterbridge Hospital, Wirral, UK (Liverpool peri-fellowship rotation) 8.1.90-12.8.90

11. S.H.O. (Resident) General Surgery, Royal Liverpool Hospital, Liverpool, UK (Liverpool peri-fellowship rotation) 9.1.89-8.31.90

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| 12. Senior S.H.O. (Fellow) General Surgery, Kidderminster General Hospital,
Kidderminster, UK | 12.1.88-5.31.89 |
| 13. S.H.O. (Resident) General Surgery/Trauma and Orthopaedics, Kidderminster
General Hospital, Kidderminster, UK (6 months each) | 9.1.87-8.31.88 |
| 14. Registrar (Fellow) Pediatric Surgery Mayo Hospital (Teaching 1600 beds)
Lahore, Pakistan | 2.1.86-2.1.87 |
| 15. S.H.O. (Resident) Pediatric Surgery, Mayo Hospital, | 3.15.85-1.31.86 |
| 16. House Officer (Intern) General Medicine, Mayo Hospital | 6.1.84-11.30.84 |
| 17. House Officer (Intern) General Surgery, Mayo Hospital | 12.1.83-5.31.84 |

Research

I developed a program at the Genomics core lab at Cambridge University to use gene chip technology to look for genetic abnormalities in the colon of children with Hirschsprung's disease. This followed a program where we used biochemical processes to assess the abnormalities in the mucus production in Hirschsprung's disease bowel. This work has been published and presented nationally and internationally. We produced a MD (Doctor of medicine) thesis in 2007. The second MD degree from Cambridge University is in write-up stage.

Thesis supervised

Identification and characterization of mucin abnormalities in the ganglionic bowel of Hirschsprung's disease. Speare RM. University of London 2007.

Bibliography

THESIS

The formation and development of the colonic mucus defensive barrier in normal children and those with Hirschsprung's disease.

Doctor of Medicine, University of Bristol, UK, 2001.

PUBLICATIONS

1. Hosting a virtual conference in paediatric minimally invasive surgery: the experience of the 20th annual meeting of the British Association of Paediatric Endoscopic Surgeons. Alexander L. Macdonald, Pankaj Mishra, Anju Goyal, Helen Carter, Paul Charlesworth, Adil Aslam, Abraham Cherian, Simon Clarke. *Journal of pediatric endoscopic surgery*. In the press. (Received: 23 March 2021 / Revised: 6 April 2021 / Accepted: 9 April 2021).
2. Beware the innocent presentation of a spontaneous perforated Meckel diverticulum: A rare case and review of the literature. Mark McKelvie, Miguel Soares-Oliveira,

- Yuan Wang-Koh, Claire Trayers, and Adil Aslam. *Pediatr Emer Care* 2019;35: 881–883.
3. Cambridge experience with buried bumpers. Goneidy A, Malakounides G, Aslam A. *J Ped Surg*. Feb 2019.
 4. Recent identification of pleuropulmonary blastoma following non-urgent resection of a cystic pulmonary airway malformation. Catriona M Middleton, Louise A Selby, Robert I Ross-Russell and Adil Aslam. *Arch Dis Child* 2018. (Letter).
<https://adc.bmj.com/content/102/9/798.responses>
 5. Beware the innocent presentation of a spontaneous perforated Meckel's diverticulum: a rare case and review of the literature. Mark McKelvie, Miguel Soares-Oliveira, Yuan Wang-Koh, Claire Trayers, Adil Aslam. *Pediatr Emerg Care*. 2018.
 6. Neonatal rectal perforation: A rare complication of congenital anal stenosis. AR Khan, A Saeed, HI Malik, A Aslam. *J Ped Surg Spec* (2014) Vol 8; No. 3.
 7. The benefits and management of gastrostomy in children. M Kazmierski, A Jordan, A Saeed, A Aslam. *Paediatrics and Child Health* **23** (2013) pp. 351-355.
 8. Congenital Lung Lesions: Preoperative Three-Dimensional Reconstructed CT Scan as the Definitive Investigation and Surgical Management. A Saeed, M Kazmierski, A Khan, D McShane, A Gomez, A Aslam. *Eur J Pediatr Surg* 2013;00:1–4.
 9. Identification of novel genes in Hirschsprung's disease pathway using whole genome expression study. A Saeed, L Barreto, S Neogii, A Loos, I Mcfarlane, A Aslam. *J Paed Surg*. Feb 2012. 47(2). 303-307.
 10. Bilateral intercommunicating pulmonary sequestration and microgastria. S Negandaran, N Johal, P Set, Brain, A Aslam, M Samuel. *Ann Thorac Surg*. Dec 2009, 88(6): 2040.
 11. Attraction problem following magnet ingestion. A Saeed, NS Johal, A Aslam, J Brain, RJ Fitzgerald. *Ann R Coll Engl*. July 2009, 91 (5): W10-2.
 12. Pain management for unilateral orchidopexy in children: an effective regimen. A Saeed, AR Khan, V Lee, A Aslam, J Brain, MP Williams, L Brennan, M Samuel. *World J Surgery*. Mar 2009. 33 (3). 603-606.
 13. Early Experience of Pediatric Thoracoscopic Lobectomy in the UK. R Garrett-Cox, G MacKinlay, F Munro, A Aslam. *Journal of Laparoendoscopic & Advanced Surgical Techniques*. June 2008, 18(3): 457-459.
 14. Traumatic abdominal wall hernia: an unusual bicycle handlebar injury. B Mancel, A Aslam. *Pediatric Surgery International*. Dec 2003, 19(11): 746-7.
 15. Histochemical and genetic analysis of colonic mucin glycoproteins in Hirschsprung's disease. A Aslam, RD Spicer, AP Corfield. *J Pediatr Surg* Feb 1999. 34(2): 330-3.

16. The role of MRI scan in the preoperative assessment of anorectal anomalies. Aslam A, Grier D, Duncan AW, Spicer RD. *Pediatric Surgery International*. Nov 1998.14 (1-2): 71-3.
17. Book Chapter: In: Hounsell (ed.). The use of cell and organ culture for the study of secreted mucin. *Methods in molecular biology (series) "Glycoanalysis protocol"*. Corfield AP, Aslam A, Wood S, Singh B, Paraskeva C. The Humana press Inc. Totowa. NJ. 1998.
18. Turnover of radioactive mucin precursors in Hirschsprung disease colon correlates with the development of enterocolitis. Aslam A, Spicer RD, Corfield AP. *J Pediatr Surg*. 33: 103-105. 1998.
19. Children with Hirschsprung disease have an abnormal mucus defensive barrier independent of bowel innervation status. Aslam A, Spicer RD, Corfield AP. *J Pediatr Surg*. 32: 1206-1210. 1997
20. Cecal fecolith: an unusual presentation of caecal septum. Wong C, Aslam A, Noblett HR. *J Pediatr Surg*. 31: 1433-4. 1996.
21. Abdominal wall recurrence after needle biopsy for non-metastatic Wilms tumour. Aslam A, Foot ABM, Spicer RD. *Pediatr Surg Int*. 11: 416-417. 1996.
22. Posterior sagittal rectoplasty for rectal atresia: a definitive approach. Aslam A, Ashworth MT, Spicer RD. *Pediatr Surg Int*. 11: 408-409. 1996.
23. Peroperative ¹²³I-MIBG scan using a sterile probe for staging and resection of neuroblastoma in children. Aslam A, Perkins AC, Spicer RD. *J Pediatr Surg*. 31 (5): 719-720. 1996.
24. Autoamputation of ovarian cyst in an infant. Aslam A, Wong C, Haworth JM, Noblett HR. *J Pediatr Surg*. 30 (11):1609-1610. 1995.
25. Upper gastrointestinal perforation in premature mechanically ventilated infants with oesophageal atresia and tracheo-oesophageal fistula. Aslam A, Frank JD, Noblett HR. *Pediatr Surg Int*. 10 (4): 261-263. 1995.
26. An inexpensive device for the perioperative positioning of pediatric patients. Aslam A, Saunders P, Corbally MT. *J Pediatr Surg*. 29 (3): 381. 1994.

ABSTRACTS

1. The expression of mucin genes in the colonic epithelium of children from newborn to adolescence. Aslam A, Spicer RD, Corfield AP. *Gut*. 41 (*Suppl 3*): A142. 1997.

2. Defunctioning colon causes alterations in the mucus defensive barrier in children. Aslam A, Spicer RD, Corfield AP, Durdy P. *Br J Surg* 83: 1633. 1996.
3. Children with Hirschsprung disease have an abnormal mucosal defensive barrier independent of bowel innervation status. Aslam A, Spicer RD, Corfield AP. *J Pathol* 179: 9A. 1996.
4. The colonic mucus defensive barrier shows alterations after diversion in children which correlate with early histological changes. Aslam A, Spicer RD, Corfield AP, Warren B. *J Pathol* 179: 36A. 1996.
5. Age related development of mucin glycoproteins in the colonic mucus gel layer of children. Aslam A, Spicer RD, Corfield AP. *Gut* 39 Suppl.1:A12. 1996.
6. Radiolabelling characteristics of a paediatric mucosal organ culture model under varying preconditions. Aslam A, Spicer RD, Corfield AP. *Biochem Soc Trans* 25 (1): 6S. 1997.
7. Biochemical analysis of mucin glycoproteins in paediatric colonic mucus. Aslam A, Spicer RD, Corfield AP. *Biochem Soc Trans* 25 (1): 7S. 1997.
8. Biochemical analysis of colonic mucin glycoproteins in children with Hirschsprung disease show disease specific alterations. Aslam A, Spicer RD, Corfield AP. *Biochem Soc Trans* 25 (1): 8S. 1997.
9. Is needle biopsy necessary for non-metastatic Wilms' tumour treated by neo-adjuvant chemotherapy? Aslam A, Spicer RD. *Clinical Oncology* 9: 64. 1997.

PRESENTATIONS AT SCIENTIFIC MEETINGS

1. Genetic and clinical significance of ganglioneuromatosis on rectal biopsy. Jawaid W, Carnaghan H, Li E, Armstrong R, Aslam A. British association of Paediatric Surgeons 65th Annual International congress. Nottingham, July 2019.
2. Rigid Bronchoscopy Is Useful in Detecting Previously Undiscovered Proximal Tracheo-oesophageal Fistulas. Mahendrayogam T, Alford M, Prinzhausen H, Jonas N, Aslam A. Annual Meeting of the American Society of Anesthesiologists. San Francisco USA, October 2018.
3. A novel technique for endoscopic management of Buried Bumper in paediatric PEG tubes. Goneidy A, Malakounides M, Aslam A. British association of Paediatric Surgeons 65th Annual International congress. Liverpool, July 2018.
4. Laparoscopic Heller's myotomy has good anatomical but poor functional results in children. Carnaghan H, Aslam A. British association of Paediatric Surgeons 65th Annual International congress. Liverpool, July 2018.

5. Congenital Pulmonary airways malformation (CPAM) lesions in children: Evolving evidence and management strategies. Haveliwala Z, Saeed A, Aslam A. British association of Paediatric Surgeons 65th Annual International congress. Liverpool, July 2018.
6. The role of urinary tract ultrasound scan in children after a single episode of acute epididymitis. Mohd-Amin A, Saeed A, Burki T, Aslam A, Williams M. British Association of Paediatric Surgeons 63rd Annual International Conference, Amsterdam, July 2016.
7. Early experience with paediatric phrenic nerve pacing for chronic ventilator dependent patients. Saeed A, Morley S, Aslam A. British Association of Paediatric Surgeons 61st Annual International Congress, Edinburgh, July 2014
8. Factors influencing early discharge after paediatric laparoscopic splenectomy. Kazmierski M, Macharia E, Aslam A. British Association of Paediatric Surgeons 61st Annual International Congress, Edinburgh, July 2014
9. Percutaneous endoscopic gastrostomy in medically complex infants. Saeed A, Aslam A. European Paediatric Surgeons' Association 15th Congress, Dublin, Ireland, June 2014.
10. Follow-up in paediatric surgery: trends and way forward. Tan Y, Khan AR, Aslam A. British Association of Paediatric Surgeons 60th Annual International Congress, Bournemouth, June 2013.
11. Upper gastrointestinal series: should it be used for preoperative detection of malrotation prior to gastrostomy and fundoplication? Tan Y, Jones C, Cho A, Smith N, Gomez A, Aslam A. British Association of Paediatric Surgeons 60th Annual International Congress, Bournemouth, June 2013.
12. Consenting parents in paediatric surgery: do we really inform? Pacilli M, Yiu C, Logeswaran T, Aslam A. British Association of Paediatric Surgeons 60th Annual International Congress, Bournemouth, June 2013.
13. Congenital lung lesions: Early postnatal investigation with three-dimensional reconstructed CT scan and surgery is optimal management. Saeed A, Kazmierski M, Khan A, Aslam A. British Association of Paediatric Surgeons 59th Annual International Congress, Rome, June 2012
14. Identification of novel genes in Hirschsprung's disease using whole genome expression study. Saeed A, Neogi SG, Loos A, Barreto L, McFarlane I, Aslam A. British Association of Paediatric Surgeons 58th Annual International Congress, Belfast, Northern Ireland, July 2011.
15. The role of jejunostomy feeding in the management of children with post-fundoplication gastric intolerance. Barreto L, Mouled D, Sharif S, Aslam A. British Association of Paediatric Surgeons 58th Annual International Congress, Belfast, Northern Ireland, July 2011.

16. Outcomes Following Laparoscopic-assisted pull-through Surgery for Hirschsprung's Disease. Barreto L, Clarke A, Sharif S, Aslam A. British Association of Paediatric Endoscopic Surgeons annual congress, Bern, Switzerland. Nov 2010.
17. Ten years experience of pediatric fundoplication. Barreto L, Moualed D, Sharif S, Aslam A. British Association of Paediatric Endoscopic Surgeons annual congress, Berne, Switzerland. Nov 2010.
18. Percutaneous endoscopic gastrostomy (PEG) in medically complex infant: Management strategies. Saeed A, Johal N, Khan AR, Jordan A, Aslam A. British Association of Paediatric Endoscopic surgeons. Nov 2009.
19. The accuracy of electronic operative coding systems for paediatric surgery in a large teaching hospital. Parsons C, Aslam A. British Association of Paediatric Surgeons 56th Annual International Congress, Graz, Austria. June 2009.
20. Congenital lung lesions: early postnatal investigations and surgery is optimal management. Saeed A, Asif M, Khan AR, Aslam A. British Association of paediatric endoscopic surgeons, Nottingham, UK. Nov 2008.
21. Introducing standard protocols optimise management of chronic abdominal pain in children. Khan A, Aslam A. British Association of Paediatric Surgeons 55th Annual International Congress. Salamanca, Spain. July 2008.
22. Outpatient follow-up: The forgotten target. Groves R, Williams M, Aslam A, Samuel M, Brain J. British Association of Paediatric Surgeons 54th Annual International Congress, Edinburgh, July 2007.
23. Characteristics of the bowel mucus in Hirschsprung's disease. Groves R, MacFarlane I, Aslam A. British Association of Paediatric Surgeons 54th Annual International Congress, Edinburgh, July 2007.
24. Role of MRI scan in Anorectal anomalies. Samuel M, Brain J, Aslam A. British Association of Paediatric Surgeons 53rd Annual International Congress, Stockholm, Sweden, July 2006.
25. Early Experience of Pediatric Thoracoscopic Lobectomy in the UK. Garrett-Cox R, MacKinlay G, Munro F, Aslam A. IPEG, Dallas, USA. 2006.
26. The mucus defensive barrier in the pulled through bowel in Hirschsprung's disease shows abnormalities. Groves R, McFarlane I, Aslam A. British Association of Paediatric Surgeons 52nd Annual International Congress, Dublin, Ireland, July 2005.
27. The mucus defensive barrier in Hirschsprung's disease. Aslam A, Spicer RD, Corfield AP. British Association of Paediatric Surgeons 45th Annual International Congress, Bristol, U.K. July 1998.

28. Histochemical and genetic analysis of colonic mucin glycoproteins in Hirschsprung's disease. Aslam A, Spicer RD, Corfield AP. British Association of Paediatric Surgeons 45th Annual International Congress, Bristol, U.K. July 1998.
29. The expression of Trefoil peptides in the colonic epithelium of patients with Hirschsprung's disease. Aslam A, Spicer RD, Corfield AP. British Association of Paediatric Surgeons 45th Annual International Congress, Bristol, U.K. July 1998.
30. Paediatric percutaneous endoscopic gastrostomy. West Midlands Paediatric Club. Aslam A, Buick RG. Hereford, West Midlands, U.K. June 1998.
31. Recent experience with paediatric percutaneous endoscopic gastrostomy (PEG). Aslam A, Buick RG. West Midlands Surgical Society. Birmingham, U.K. May 1998.
32. Changes in the colonic mucus defensive barrier in Hirschsprung's disease. Aslam A. Experimental Research Club. British Association of Paediatric Surgeons 44th Annual International Congress, Istanbul, Turkey, July 1997.
33. Turnover of radioactive mucin precursors in Hirschsprung disease colon correlates with the development of enterocolitis. Aslam A, Spicer RD, Corfield AP. British Association of Paediatric Surgeons 44th Annual International Congress, Istanbul, Turkey, July 1997.
34. Is needle biopsy necessary for non-metastatic Wilms tumour treated by neo-adjuvant chemotherapy?. Aslam A, Spicer RD. United Kingdom Children's Cancer Study Group. Scientific meeting, Liverpool, November 1996.
35. Is needle biopsy necessary for non-metastatic Wilms tumour treated by neo-adjuvant chemotherapy?. Aslam A, Spicer RD. International Society of Paediatric Oncology (SIOP) 26th annual meeting, Vienna, Austria, October 1996.
36. Formation and development of mucin glycoproteins in the colonic mucus gel layer from birth to adolescence. Aslam A, Spicer RD, Corfield AP. Falk Symposium, Frieberg, Germany, October 1996.
37. Age related development of mucin glycoproteins in the colonic mucus gel layer of children. Aslam A, Spicer RD, Corfield AP. British Society of Gastroenterology, Autumn meeting, Manchester, September 1996.
38. Radiolabelling characteristics of a paediatric mucosal organ culture model under varying preconditions. Aslam A, Spicer RD, Corfield AP. Biochemical Society meeting, London, September 1996.
39. Biochemical analysis of colonic mucin glycoproteins in children with Hirschsprung disease shows disease specific alterations. Aslam A, Spicer RD, Corfield AP. Biochemical Society meeting, London, September 1996.

40. Biochemical analysis of mucin glycoproteins in paediatric colonic mucus. Aslam A, Spicer RD, Corfield AP. Biochemical Society meeting, London, September 1996.
41. The role of MRI scan in the preoperative assessment of anorectal anomalies. Aslam A, Grier DJ, Duncan AW, Spicer RD. British Association of Paediatric Surgeons 43rd Annual International Congress, Jersey, Channel Islands. July 1996
42. Should children with appendicitis be managed in a specialist paediatric centre? Aslam A, Phipp LH, McGraw ME, Spicer RD. British Association of Paediatric Surgeons 43rd Annual International Congress, Jersey, Channel Islands. July 1996
43. Staged oesophageal repair for infants with oesophageal atresia and tracheo-oesophageal fistula: an alternate approach. Aslam A, Phipp LH, Marlow N, Noblett HR. British Association of Paediatric Surgeons 43rd Annual International Congress, Jersey, Channel Islands. July 1996.
44. Children with Hirschsprung disease have an abnormal mucosal defensive barrier independent of bowel innervation status. Aslam A, Spicer RD, Corfield AP. Pathological Society of Great Britain and Ireland, Summer meeting, Southampton. July 1996
45. The colonic mucus defensive barrier shows alterations after diversion in children which correlate with early histological changes. Aslam A, Spicer RD, Corfield AP, Warren B. Pathological Society of Great Britain and Ireland, Summer meeting, Southampton. July 1996.
46. Defunctioning colon causes alterations in the mucus defensive barrier in children. Aslam A, Spicer RD, Corfield AP, (Durdy P). Surgical Research Society. Birmingham. June 1996.
47. Should children with appendicitis be managed in a specialist paediatric centre? Aslam A, Phipp LH, McGraw ME, Spicer RD. British Paediatric Association, 68th annual meeting, York. April 1996.
48. Biopsy in non-metastatic Wilms tumour. Spicer RD, Aslam A, Foot ABM. European Society of Paediatric Urology. Toledo, Spain. April 1995.
49. The role of needle biopsy in non-metastatic Wilms tumour. Aslam A, Foot ABM, Spicer RD. International Society of Pediatric Oncology (SIOP) XXVI annual meeting, Paris, France. September 1994.
50. The role of needle biopsy in non-metastatic Wilms tumour. Aslam A, Foot ABM, Spicer RD. British Association of Paediatric Surgeons 41st Annual International Congress, Rotterdam, the Netherlands. July 1994.

51. An audit of patient information at Poole General Hospital. Aslam A, Rowe-Jones DC. Poole-Bournemouth joint surgical registrars meeting, Bournemouth. December 1991. Won 1st prize.
46. The positive predictive value of doppler ankle pressure measurements in critical lower limb ischaemia. Aslam A, Darke SG. Poole-Bournemouth joint surgical registrars meeting, Poole. July 1991.

Recreational activities

Theatre
Golf
Travel