

Dear colleagues, dear SSBe members,

With an annus horribilis behind us and cautiously looking forward to better times we, as SSBe, would like to give you a small overview of the past, present and future of the functioning within the SSBe and more generally the evolution of spinal care in Belgium.

You all receive this newsletter as members of the Spine Society of Belgium.

All members of the Neurosurgical Society (BNS) and all members of the Flemish Orthopaedic Society (BSS) do not need to pay a separate membership fee or take any further steps as they are automatically members through their respective society.

The physical/rehabilitation doctors (RBSPRM) and members of the French-speaking orthopaedic spine association 'groupe du rachis' who wish to remain or become members of the SSBe do have to do so on their own by making a payment of 100 Euros into the SSBe account. Therefore, we would like to invite them to check their membership and payment for 2021 and, if necessary, to arrange for it.

Mail via our [SSBe website](#), or to our administrative co-worker [Ingrid.Machiels](mailto:Ingrid.Machiels@spinesociety.be) (ingrid.machiels@spinesociety.be) is possible to get more detailed info.

The following topics are dealt with in this newsletter:

I/ Election of the new SSBe board on 25/11/2020

II/ First interdisciplinary symposium SSBe on 30/10/2020

III/ Reform of the nomenclature of spinal surgery (2.0) and reform of the nomenclature: consultations and related procedures

IV/ Update on the Spine Tango registration pilot project

V/ Eurospine/EUSSAB activities

I/ Election of new SSBe board 25/11/2020.

At the general assembly, November 25th 2020, the new SSBe board was elected.

The executive committee was composed as follows :

Dr. Davy Hoste (president), Prof. Bart Depreitere (vice president), Dr. Patrick Van Schaeybroeck (secretary), Dr. Johan Van Lerbeirghe (treasurer/international relations), Prof. Everard Munting (international relations), Dr. Thierry Parlevliet (scientific committee), Prof. Virginie Frassel (scientific committee), Dr. Virginie Nguyen (scientific committee), Dr. Diederik Peuskens (scientific committee)

Other board members :

Prof. Michaël Bruneau, Dr. Emmanuel Costa, Dr. Henri-Benjamin Pouleau, Dr. Sabri El Banna, Dr. Serge Troussel, Dr. Dominique Verhulst, Dr. Sarah Bethlen, Prof. Gaëtane Stassijns, Dr. Peter Van Wambeke

I would like to thank Patrick Van Schaeybroeck again for his great commitment and persistent efforts during his presidency.

I would also like to thank the outgoing board members for their commitment and contribution to SSBe.

Colleagues that are interested to become board member can ask their society to delegate them at the next election, or contact us directly.

II/ First interdisciplinary symposium SSBe

Interdisciplinary cooperation is the most important founding pillar of the Spine Society of Belgium.

Through this interdisciplinary cooperation between physical medicine-rehabilitation, neurosurgery and orthopaedic surgery we hope and strive to improve quality in spinal care in our country.

It is my hope that all subdisciplines can be equally and actively involved in the further role the SSBe has to play to meet this goal.

On October 30th 2020, we organised our first interdisciplinary spine symposium (**ID Spine 2020**) in association with the algological societies. For obvious reasons, it was decided to organise an online meeting. We had a total of 194 participants covering neurosurgery, orthopedical surgery, physical medicine and rehabilitation and algology.

The standard has been set to make future meetings an equally valuable event.

In attachment, you can find a brief summary of the webinar including the key conclusions of the presentations (by Patrick Van Schaeybroeck).

III/ Reform of the nomenclature for spinal surgery (2.0) and reform of the nomenclature for consultations and related procedures.

On 18/1/2021 and 3/3/2021 respectively, the first online meetings took place regarding the revision of the nomenclature (spinal surgery) and the revision of the nomenclature (consultations and related procedures).

Although the SSBe was not officially invited 'as such' to these meetings with the NIHDI, a large number of SSBe board members were invited to this new task force through other channels.

In this sense, we can therefore maximally bundle our strengths to defend the efforts that the SSBe has already made since 2014, this in the development of a complete new nomenclature for spine surgery and the associated creation of spine centres with a.o. multidisciplinary consultations. The Royal Decree with the full text and the new nomenclature 14n is ready for approval but has still not been officially published.

Meanwhile, we published a manuscript in the "Artsenkrant" referring to the ongoing legislation process on spine units and multidisciplinary consultations,. We all share the frustration about the slowness of the government work.

However, the fact that in the new focus group the new nomenclature 14n (developed by the SSBe) was used as a foundation and reference for further standardisation was of course encouraging that the work done is nevertheless recognised as a starting point in the ongoing reforms.

At the last online meeting on 3/3/2021, we were also informed that the Royal Decree with the new nomenclature 14n and the text concerning the spine centres had apparently now been forwarded and that an official publication could be expected in the coming months.

So, regardless of the currently started new more global task forces, we can expect an earlier publication of the new spine nomenclature.

The SSBe board is further prepared and highly motivated to take up its responsibility within these two task forces in order to defend the interests of all colleagues, SSBe members.

IV/ An update on the Belgian Pilot Spine Registry (by Bart Depreitere)

Following a troublesome start, including uncertainty about the need for ethical approval, the delay associated with multicentre ethical approval and several technical issues, ... Covid came right after several centres finally had been able to initiate the implementation of our registry.

Although this was unfortunate, it gave us the time to address Sciensano to fix the Health Data patient module and make a fresh start last Fall.

Since then, 10 hospitals are up and running (Thank you Sint-Lucas Gent, CHWAPI, Sint-Augustinus Antwerpen, AZ Groeninge, Sint-Blasius Dendermonde, H.Hart Tienen, Imelda Bonheiden, Saint-Pierre Ottignies, AZ Delta Roeselare and UZLeuven). Some centres directly import data in the Health Data platforms, whereas others capture the data through KWS, HIX or Lynxcare to secondarily transfer csv batches to the central database. These batch transfers still cause some problems, and also the Health Data patient platform (for which we are the pilot project) is still subject to 'child illness' issues.

Nevertheless, to date 1,082 inclusions arrived into the central Health Data database, and there are many more in the cloud (eg. the Lynxcare data has not been successfully transferred yet). The rate of surgeons and physical medicine specialists filling their forms is - let's say - moderate.

Patient response rates are unfortunately much weaker, and this has several reasons. People are over-exposed to questionnaires and digital noise, and PROMs are not normalized in our Belgian culture. However, if in addition technical problems occur on the digital platforms, patients tend not to persevere to get the job done. When the digital platforms work, response rates seem to be reasonable. For instance, in Leuven, response rates are recently increasing to 72% pre-intervention and 60% at 3 months. This is not bad, given mixed experiences with e-PROM response rates in registries worldwide. The preliminary data from the randomized study on patient response rates in Leuven shows that the effect of alerts and reminders is rather low. It seems that motivational speech from the specialists works best.

And hence, it seems that this pilot spine registry so far has been a test of our patience, motivation and perseverance ... Still, we will learn a lot out of it, not in the least what efforts and what support and partners it will take to arrive at a durable Belgian spine registry in the long run.

V/ Eurospine/EUSSAB activities

Since the foundation of SSBe, our society has been an institutional member of Eurospine/EUSSAB.

All SSBe members are therefore automatically affiliated members of Eurospine.

Consequently, the SSBe regularly sends communications and invitations to its members about the various projects and meetings organised by Eurospine/EUSSAB.

For instance, as SSBe members, we benefit from discounted registration fees for Eurospine meetings.

In order to get a better insight into the activities of EUSSAB and to indicate the involvement of the SSBe, a document was prepared by Johan Van Lerbeirghe. You can find this document in attachment.

As you have read, there are many challenges ahead for the SSBe.

It is the strong wish of the SSBe board to continue to do its utmost to promote our objectives at all levels.

The existence of a scientific society, like SSBe, is of course only possible by the grace of all its members.

We therefore hope to be able to count in the future on the continued support of all SSBe members, and by extension of all colleagues interested in spinal pathology.

SSBe membership is therefore to be encouraged among all colleagues involved in the spine centres in Belgium.

Kind regards,

Davy Hoste

President Spine Society of Belgium

On behalf of the executive committee

Bart Depreitere, Patrick Van Schaeybroeck, Johan Van Lerbeirghe, Diederik Peuskens, Thierry Parlevliet, Virginie Fraselle, Virginie Nguyen

