## Michael Ho

Consultant Oral and Maxillofacial Surgery (Maxillofacial/Head and Neck Oncology)
Leeds Teaching Hospitals NHS Trust

Michael Ho is Consultant in Maxillofacial Oncology in Leeds and clinical lead for the BAOMS QOMS national OMFS QI project. He was the BAOMS Reconstruction SSIG Lead (2015-2020).

He has co-edited the Head and Neck section of the first UKNFR (UK National Flap Registry) report and led the development of a classification system of flap reconstruction outcomes in the head and neck. He has engaged in local quality improvement initiatives to screen for preoperative anaemia in elective head and neck surgical patients and is the specialty lead for the PQIP (Perioperative Quality Improvement Project) in Leeds General Infirmary.

His research interests relate to patient-related treatment outcomes in Head and Neck Surgical Oncology, quality improvement and oral lesions with malignant potential. He is a grant coapplicant for the NIHR SAVER (Sodium Valproate in Epigenetic Reprogramming of Oral Epithelial Dysplasia) and has contributed as primary investigator for several NIHR funded clinical trials.

"I have successfully led the development of a national UK Salivary Gland Cancer Registry through my role as the BAOMS QOMS clinical lead. The initiative was recognised and showcased briefly in a recent House of Lords 'Remembering Rare Diseases' event. It has recently been awarded a grant from the SGC UK charitable funds to pump prime its initiative in view of the recent national launch, for which I had given a webinar lecture summarising the current collective evidence for management of this group of patients. In my consultant career to date, I have led a team of junior researchers in the review and publication of the regional outcomes of the treatment of salivary gland cancer in West Yorkshire and was invited by the BAOMS President in 2019 to lead the session on Salivary Gland Cancers in the Annual Scientific Meeting in Birmingham. Due to my BAOMS QOMS role, research involvement and educational/training roles, I am in the unique position of being in contact with colleagues across several specialties nationally through various networks. This will be essential and valuable in engagement and collaboration to widen participation for research initiatives in salivary gland cancer.

I was part of the EORTC COST Oral Dysplasia grant application and have remained a member of the EORTC to ensure that I am up to date with international developments in treatment and research for Head and Neck/Salivary Gland Cancer."