

healthmatters

ESSENTIAL HEALTHCARE NEWS AND INFORMATION AUTUMN 2008 ISSUE NO. 9

inside track!



Easily swallowed PillCam

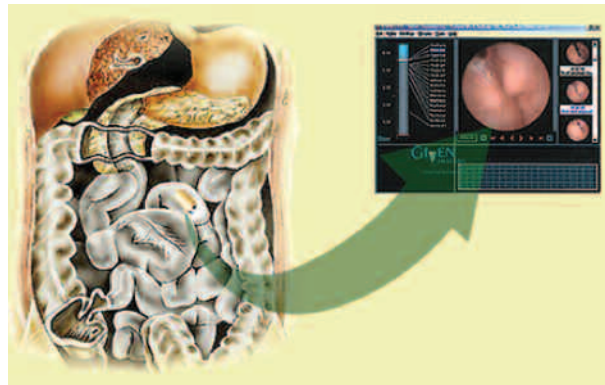
Consultant Gastroenterologist, Dr Sameer Zar is introducing videocapsule endoscopy to the existing gastrointestinal services at St Anthony's. The PillCam videocapsule is an ingestible pill, the size of a large vitamin pill. It is equipped with a miniature video camera that captures colour images from inside the intestines. The procedure is painless, with no exposure to potentially harmful radiation.

Reaches the parts endoscopy doesn't

Videocapsule endoscopy is a relatively new technique used to diagnose disorders of the small intestine – which are otherwise inaccessible by routine endoscopy. Possible disorders include Crohn's disease, small bowel tumours, malabsorption disorders (such as coeliac disease), gut injuries induced by extended use of pain killers, suspected bleeding of the small bowel, chronic abdominal pain, and chronic diarrhoea.

The PillCam videocapsule measures just 11 mm x 26mm and weighs less than 4 grams. It transmits images at a rate of two

NEW VIDEOCAPSULE (PILLCAM) ENDOSCOPY SERVICE LAUNCHED.



Revolutionary intestine image collection, downloaded for computer review and diagnosis

pictures per second, generating more than 50,000 pictures over an 8-hour period. The images are wirelessly transmitted to a portable data recorder that patients wear around the waist. The data is later downloaded and read through a software programme on a computer, for review and diagnosis.

The patient can continue daily activities during the recording procedure – which lasts for about eight hours. The video capsule, which is disposable, is passed naturally with a bowel movement – usually within 24 hours.

To book an appointment with Dr Zar, contact Outpatients on **020 8335 4678** (GP referral required).

We hope you enjoy this copy of 'HEALTH MATTERS'. If you would like to join, or be removed from our mailing list, simply email a request to Philip.Cook@stanthonys.org.uk, or write to the address on the back page.

Please feel free also to advise us of any other friends/relatives you think might like to receive a copy. Thank you for your co-operation.

IMPROVING OUR IMAGE

► Major MRI upgrade, to ensure optimum performance – with patients spending less time in the scanner.



► Turn to page 2

'HEALTH MATTERS' is created, edited and produced by the Marketing Department of St. Anthony's Hospital.

If you have any suggestions, requests, or follow-up details relating to published articles then please e-mail: Philip.Cook@stanthonys.org.uk

improving our image

MAJOR MRI UPGRADE

A major upgrade to our MRI scanner ensures that it remains at the top of the performance range. From its installation in 2000, the General Electric Signa 1.5T scanner has provided clinicians at St. Anthony's with images of great clarity. Recent technological advances, however, now offer further improvement. In particular, neuro, vascular, cardiac and abdominal imaging will all see improvement – with faster scanning, so patients will spend less time in the scanner. The upgrade, which was carried out during the late summer, retains the existing magnet but



Radiographer Emma Nagar attends to patient comfort

incorporates new hardware and software – to bring High Definition technology, with ever-higher levels of accuracy and repeatability.

Taking control of the newly 'supercharged' scanner is Rachel Smith, recently appointed MRI Superintendent. Rachel has wide experience of all imaging modalities and comes to us from St. George's Hospital, Tooting, where she has worked for the past 12 years.

NEW CLINICS AT ST. ANTHONY'S

The following consultants have recently started clinics at St. Anthony's and are able to offer appointments at short notice. Unless otherwise indicated, please book your appointment through the Outpatient Department on 020 8335 4678 / 4679.



Dr Mashkur Khan Consultant Physician & Geriatrician: general medicine, acute medical problems, Parkinson's disease, syncope and blackouts, balance disorder, hypertension and stroke prevention. **Saturday am**

Miss Andrea Sott Consultant Orthopaedic Surgeon: foot and ankle surgery including joint reconstruction, all bone and soft tissue disorders, sports injuries. **Friday am**

Dr Michael Rowlands Consultant Psychiatrist: anxiety disorders, work-related stress, psychological change and alcohol misuse. **Wednesday am**

Dr James Woolley Consultant Psychiatrist: obsessive compulsive disorder, anxiety, depression, schizophrenia, bipolar disorder, and chronic fatigue. **Thursday pm**



High definition imagery from MRI Superintendent Rachel Smith

For computer buffs, the scanner utilises 'blade' computing technology – with each blade consisting of dual 2.6-GHz CPUs, 8Gb of local RAM and dual 73Gb hard drives which are mirrored for data redundancy and reliability. According to the manufacturer, this specification yields the fastest, most reliable and expandable image reconstruction hardware in the industry.

You can find full details of all the consultants and clinic specialities at St Anthony's, by going to our website www.stanthonys.org.uk – or you may enquire on the above telephone numbers.

NEW OPERATION RESTORES SIGHT AFTER AMD

Photograph shows Mr Alfred Graves with his daughter attending a lecture given by Mr Will Ayliffe at St. Anthony's Hospital.



“A dramatic improvement” was the verdict of Alfred Graves, the first patient at St. Anthony's Hospital, Cheam, to receive the pioneering IOL-VIP treatment for Age-related Macular Degeneration (AMD). The leading cause of impaired sight in people over 65, AMD results in loss of central vision, fine details and colour.

Before his operation, 82 year old Mr. Graves, could see very little more than a few feet away. Less than a couple of hours after he came back from the operating theatre he was sitting with his daughter in the courtyard of the hospital restaurant.

“Sitting outside, I saw things I hadn't seen in years,” he enthused, *“there was no discomfort and I could recognise people's faces.”*

Revolutionary new treatment

The revolutionary new treatment was performed at St. Anthony's by consultant ophthalmic surgeon, Mr. Will Ayliffe. **“The treatment is primarily suitable for patients with the dry version of AMD – which affects cells in the retina at the back of the eye, causing loss of central vision”**, says Mr. Ayliffe. **“The new procedure places two lenses in the eye. One lens is concave, placed in the capsule at the front of the eye. The other – a convex lens – sits behind it, in front of the iris. The effect is to create a ‘telescope’, which provides magnification of 1.3 – and, more importantly, by rotating the lenses relative to each other, focuses the image onto a functioning part of the retina.”**

Experience improvement before the operation!

Patients are assessed on a simulator, using software to map the preferred areas of the retina. This allows the patient to experience the potential improvement in vision before the operation. The surgery is usually done under local anaesthetic, as a day-case procedure. Risks are broadly similar to those of cataract surgery. Will Ayliffe advises that the procedure is not suitable for everyone: patients with glaucoma are excluded and certain other groups. Patients with moderate visual loss are most likely to benefit.

balance disorder in older people

By Consultant Physician, Dr Mashkur Khan

Balance is often taken for granted but, in fact, it is a complex sensory and motor integration in the brain which keeps the body running smoothly and automatically. Balance disorder restricts mobility and this in turn can affect independence and quality of life. There is a wide variety of causes, some of which are reversible and some are not – so early specialist assessment is important.

Inner ear problems and subtle changes in the nervous system can affect balance. Poor heart function may also play a part. In order to maintain balance, the human body needs to rely on the musculoskeletal and cardiovascular support systems. It is the capacity of the body to assume the upright posture and maintain balance that keeps us mobile, without any effort.

Disorders of the inner ear can cause patients to have vertigo – and attempts to walk in the dark or eye closure may result in a fall sideways. Benign paroxysmal positional vertigo (BPPV) presents with dizziness and balance disorder.

Patients may have nausea and vomiting but respond to anti-emetics and vestibular sedatives. Viral labyrinthitis can bring an acute onset of



dizziness, but is mostly self-limiting. Other diseases of the inner ear such as Meniere's also cause vertigo, along with other symptoms. Neurological causes of balance disorders include Parkinson's and small vessel disease. The latter can be described as a series of small often unrecognised strokes, typically caused by high blood pressure, diabetes or high cholesterol. For Parkinson's sufferers 'freezing of gait' is a particularly common cause of falls – when the legs are unable to follow the forward motion of the trunk.

Within the musculoskeletal system, spinal stenosis and osteoarthritis of the hips and knees can affect balance. This is often accompanied with pain. Ageing may also bring muscle wasting, which can affect balance.

Medication is frequently a cause of balance disorder, as any drug that affects blood pressure can affect balance. Drugs used in diabetes and after a heart attack, especially beta blockers, have also been implicated. Heart valve disorders can also affect balance.

Clearly there are many potential causes of balance problems in older people, so it is important to investigate and identify the underlying pathology. Early specialist intervention can benefit a large proportion of sufferers.

To book a consultation with Dr Khan, contact Outpatients on 020 8335 4678.

focus on orthopaedics



Dr Hussein & Richard Field

PAIN-FREE HIP REPLACEMENT

In March this year, Consultant Orthopaedic Surgeon, Richard Field was demonstrating the new PER Mini-Hip replacement to Thomas

Poulson; a surgeon visiting from Billund in Denmark. As the operation progressed Mr Field and the anaesthetist, Dr Anwar Hussein, asked Dr Poulson about post-operative pain.

Dr Poulson revealed that his team had been working on a technique that not only gave their patients first rate pain relief but also meant that the patients regained control of their legs faster, needed fewer pain killers and were fit to go home more quickly.

The Danish surgeons were injecting a cocktail of drugs directly into the wound, during surgery. The cocktail contained a long-acting local anaesthetic to block the pain nerves, adrenaline to reduce bleeding and an anti-inflammatory to reduce post-operative swelling.



Pioneering success at St. Anthony's

The first patient to undergo the new procedure at St. Anthony's was Margaret Benson (pictured here) a lady who had come to Mr Field for her left hip replacement two years earlier and had now become aware that her right hip was deteriorating. Rather than limp through her forthcoming Diamond Wedding party,

Mrs Benson had telephoned Mr Field and asked him for an early operation date, so that she would have time to recover, before the party.

The technique worked perfectly and Mrs Benson experienced dramatically less pain than after her first hip replacement calling the difference, "fantastic". She was also back on her feet more quickly and returned home three days earlier than after the first hip replacement.

Since Mrs Benson's operation in March of this year, Mr Field and Dr Hussein have continued to use the new technique for Hip and Knee replacement patients at St. Anthony's – and are hoping to start using the technique for their NHS patients in the near future.

NEW TECHNOLOGY REDUCES BLOOD LOSS IN HIP AND KNEE SURGERY

Mr Gerry Kavanagh, consultant orthopaedic surgeon, explains the new Aquamantis Bipolar Sealer that he uses in hip and knee surgery here at St. Anthony's. The system uses bipolar radio-frequency energy that instigates a biochemical process – to seal up blood vessels in tissue and bone, to prevent blood loss.

"I have been using the Aquamantis system for around six months in both hip and knee surgery," says Mr. Kavanagh. "I'm particularly interested in its role in reducing bleeding post-operatively in

total knee replacement. Post-operative bleeding and swelling in the knee inevitably interfere with the rehabilitation of the patient, causing pain and reduced range of motion. I use the sealer both at the beginning and at the end of the procedure, before closing – and have certainly noticed there to be less bleeding. Less bleeding also means shorter operating times and, consequently, a lower risk of surgical infections and anaesthesia-related complications."

Mr. Kavanagh points out that the physiotherapists at St. Anthony's are also reporting his post-operative patients to be recovering more quickly.

Dr Richard Bogle MB, BS (Hons), BSc (Hons), PhD, MRCP **Consultant Cardiologist**, Epsom and St Helier University Hospitals NHS Trust & St George's Hospital NHS Trust. **Honorary Senior Lecturer** in Cardiology, St George's University of London.

"Dr Bogle graduated from St George's Hospital Medical School as top student of his year – with distinctions in medicine, surgery, clinical pharmacology and therapeutics. After posts in general medicine at Kingston Hospital, he was registrar to the Guy's poisons unit, before being appointed as cardiology registrar in North West Thames in 1999.



He became a member of the Royal College of Physicians in 1999 and was awarded a Department of Health Clinician Science Research Fellowship whilst at Hammersmith Hospital. Dr Bogle has developed a major expertise in management of coronary artery disease, coronary angiography and angioplasty/stenting. He also has a strong interest in hypertension and was previously in charge of the Hammersmith Hospital hypertension clinic. His clinical interests also include heart failure, valvular heart disease, sports cardiology and cardiovascular risk assessment. He is an advisor to the Army on cardiac aspects of fitness for potential recruits.

Dr Bogle's private secretary can be contacted on 020 8296 2782.

gold standard sports clinic



Team GB's outstanding performance in the Beijing Olympics was fine reward for our talented athletes performing at the peak of physical condition. It is with great pride, therefore, to St Anthony's that a clinician practising at the hospital was a key member of the back up team that helped make this possible.



Dr Ian McCurdie, who directs the Sport & Exercise Clinic at St Anthony's, is the Director of Medical Services for The British Olympic Association (BOA). Announcing Ian's appointment to the post in March of this year, BOA Chief Executive, Simon Clegg stated: "Ian's extensive experience working within the sporting medical field will prove invaluable to the organisation and I am confident that Ian can make a tremendous contribution as we seek to deliver British Olympic success, particularly looking forward to London 2012." Events in Beijing have certainly proved Mr. Clegg's confidence to be well founded!

Outstanding performance and capability

For anybody looking for specialist assessment, diagnosis and treatment of sport and exercise-related injury, Dr McCurdie's CV is truly outstanding – and a ringing endorsement of St Anthony's capabilities in this field. Ian has worked as a

Consultant at the Defence Medical Rehab Centre at Headley Wood. He has spent many years working with elite athletes as Medical Officer for the GB Modern Pentathlon team and the British Davis Cup tennis team. He was also a doctor for Team GB at the Sydney 2000 Olympics' preparation camp and at the Athens 2004 Olympic Games.

Dr Mc Curdie combines his BOA role with his private clinics and his continuing work with Chelsea FC and The Royal ballet School. Dr Mc Curdie's Sport & Exercise Medicine Clinic is held at St Anthony's on Thursday mornings.

Call Outpatients for an appointment on 0208 335 4678.

“ I was based in the Olympic Village, along with 420 British athletes and support staff. My role was to prepare and deliver medical support for the team – to help enable every athlete to achieve his or her best performance. This involved not only the treatment of injuries – which were fewer in number than in previous Olympics – but, also, the prevention of illness and the maintenance of the health of the whole team.

Although the hours are long and the stress levels high, the professional satisfaction gained from working in such a privileged role alongside the country's finest sportsmen and women is difficult to beat. **”**

Dr Ian McCurdie

feet first

WHAT IS PODIATRY?

Podiatry is the assessment and treatment of the feet and lower limbs for biomechanical deformities and musculoskeletal injuries. By looking at the way certain joints and muscles function, a podiatrist is able to determine if the way a person is walking or running may be contributing to, or causing their current injury.

Podiatry can be effective in helping to alleviate or relieve the following conditions:

- arch pain
- lower back pain
- plantar fasciitis / heel pain
- iliotibial band / knee pain
- bunions and toe pain
- achilles tendon injuries
- shin splints / overuse injury

New Patient Assessment

The comprehensive New Patient Assessment involves a detailed history appraisal, biomechanical examination, video analysis and diagnosis. This may be followed by the



recommendation, prescription and implementation of orthotic supports.

Temporary and Permanent Insoles/Orthotics

Insoles and Orthotics are foot supports that are placed inside your shoes, to help improve foot function – and, therefore, to try to relieve symptoms.

There are wide ranges of insoles and orthotics available, ranging from over-the-counter insoles to custom-made orthotics. The type of insole that you may need depends on the nature of the problem and what is required to treat the problem.

The Gait Lab at St. Anthony's Hospital

Amanda Thomas and Sophie Roberts B.Sc. (Hons) Podiatry, MChS, SRCh are Podiatrists specialising in Sports Injuries and Biomechanics. They are now running a clinic at St. Anthony's. For more information, telephone: **0870 6093612**, E-mail: Reception@thegaitlab.co.uk or go to www.thegaitlab.co.uk

HEART FELT

New DVD helps our cardiac patients

A new DVD has been produced, to help familiarise patients coming into St. Anthony's for cardiac surgery. First produced as a video, the original film was commissioned ten years ago by St. Anthony's Cardiac Support Group. The script was actually written by cardiac patients, with assistance from the nursing staff on St. George's Ward – with members of the group playing themselves as patients.



The film, an invaluable introduction for new patients, has been updated to reflect the many changes in the hospital and the way in which cardiac surgery is carried out. It is now available in DVD format.

To find out more, contact The Cardiac Support Group on **020 8335 4600**.

NEW WEBSITE FEATURE



It's worth 'bookmarking' or making a favourite of **News & Views** – a new page on our website, where we aim to comment on some of the health issues in the news and also provide details about the latest developments at St. Anthony's.

Visit www.stanthonys.org.uk

EVER POPULAR PUBLIC MEDICAL LECTURES



The Summer series of medical lectures for the general public was very well received – with between 80 and 100 people attending each evening event. Demand for the lecture by Mr Will Ayliffe on cataract surgery and treatment for dry AMD was so oversubscribed that a repeat had to be arranged – when a further 100 people attended.

Topics for 2009 will be **hernia repair, prostate problems and women's health**. Probable dates in April, May and June will be confirmed in the Spring issue of Health Matters and on St. Anthony's website. If you have any suggestions for future lecture topics, please write to Philip Cook at the hospital or email him at philipcook@stanthonys.org.uk