

Robotics in gynaecological operations

DR PETER BARTON-SMITH

The minimally invasive and robotic surgery service aims to provide world-class gynaecological treatment, surgery and training for conditions such as dysfunctional uterine bleeding, uterine fibroids, endometriosis and ovarian cysts by providing conventional laparoscopic and robotic approaches for adnexal surgery, hysterectomy, myomectomy and endometriosis excision. We aim to provide a holistic approach to treatment using non-surgical approaches where appropriate but also to offer high quality state-of-the-art of surgery.

The benefits of robotic surgery over open and conventional laparoscopy are essentially due to enhanced 3D HD vision, greater precision and greatly improved surgeon ergonomics. The resulting benefits include reduced hospital stay and faster return to normal activities, reduced blood loss and need for transfusions, reduced post-operative complications and a reduction in the need for conversion to open surgery.

Abnormal bleeding affects women of many ages from hormonally imbalanced cycles at either end of the age range through to problems caused by endometrial abnormalities, uterine fibroids and ovarian cysts. We aim to offer women a wide range of options including hormonal manipulation, resection of polyps, fibroids and



thickened endometrium and minimally invasive hysterectomy for appropriate cases.

Robotic hysterectomy offers an approach that in comparison to open and conventional laparoscopy is demonstrating less post-operative complications, shorter length of stay, reduced blood loss

and transfusions and reduced risk of conversion to open surgery.

We achieve most of our hysterectomies minimally invasively with very low complication rates and mainly 24-hour hospital stay making this now a true alternative to medical therapies if a

definitive treatment is required.

Pelvic pain affects many women and may be due to conditions such as endometriosis, irritable bowel syndrome, interstitial cystitis, neuropathic pain or psycho-sexual issues. It can cause significant morbidity particularly in terms of career, social life and relationships. Its management is a multidisciplinary problem requiring input from specialties such as gynaecology, urology, gastroenterology, psychology and pain clinics.

Endometriosis affects at least 8% of the population and may result in pain or subfertility. Medical and surgical treatments are employed on an individual case-by-case basis according to a woman's age, symptoms and desire for fertility.

Robotics offers us the ability to achieve greater accuracy in disease clearance and reduce the high risks of morbidity where surgery is required for complex cases.

Fibroids are common and often do not require treatment. They can cause multiple symptoms including menorrhagia, pain, bloating sensation, back pain, constipation and urinary frequency.

Where surgery is required, robotics makes myomectomy technically easier so that more complex cases can safely be performed minimally invasively.

The writer is a Senior Consultant at the Department of Obstetrics & Gynaecology of Singapore General Hospital.

REVISED RX

Earlier ARV therapy can reverse HIV epidemic

New HIV treatment guidelines by the World Health Organisation (WHO) recommend offering antiretroviral therapy (ART) earlier. Recent evidence indicates that earlier ART will help people with HIV to live longer, healthier lives, and substantially reduce the risk of transmitting HIV to others. The move could avert an additional 3 million deaths and prevent 3.5 million more new HIV infections between now and 2025.

The new recommendations encourage all countries to initiate treatment in adults living with HIV when their CD4 cell count falls to 500 cells/mm³ or less — when their immune systems are still strong. The previous WHO recommendation, set in 2010, was to offer treatment at 350 CD4 cells/mm³ or less. 90% of all countries have adopted the 2010 recommendation. A few, such as Algeria, Argentina and Brazil, are already offering treatment at 500 cells/mm³.

The new recommendations also include providing antiretroviral therapy — irrespective of their CD4 count — to all children with HIV under 5 years of age, all pregnant and breastfeeding women with HIV, and to all HIV-positive partners where one partner in the relationship is uninfected. The Organisation continues to recommend that all people with HIV with active tuberculosis or with hepatitis B disease receive antiretroviral therapy.

Another new recommendation is to offer all adults starting to take ART the same daily single fixed-dose combination pill. This combination is easier to take and safer than alternative combinations previously recommended and can be used in adults, pregnant women, adolescents and older children.

The recommended treatment is now a combination of three antiretroviral drugs: Tenofovir and Lamivudine (or Emtricitabine) and Efavirenz, as a single pill, given once daily.

HEALTH bulletin

Meeting micronutrient needs in pregnancy



Good night's sleep protects heart

Seven or more hours' sleep a night boosts the benefits to the heart of a healthy lifestyle, research published in the European Journal of Preventive Cardiology suggests.

Keeping mentally busy tied to less memory loss

People who spend a lot of time reading, writing and otherwise seeking and processing new information lose their thinking and memory skills more slowly as they age, a new study published in journal *Neurology* suggests.

Drink more water, lose more weight!

Dieters who drink more water have greater weight loss, according to a new review of several prior studies published in *The American Journal of Clinical Nutrition*.

Pregnancy is associated with increased nutritional needs due to the physiologic changes of the woman and the metabolic demands of the embryo (fetus). Proper maternal nutrition during pregnancy is thus imperative for the health of both the woman and the offspring.

Maternal malnutrition during pregnancy has been associated with adverse outcomes, including increased risk of maternal and infant mortality as well as low birth weight newborns (<2,500 grams) — a measure that accounts for preterm birth and intrauterine growth restriction of the fetus.

Nutrient deficiencies have also been linked to congenital anomalies and birth defects. In addition, gestational undernutrition has been implicated in increasing the offspring's susceptibility to chronic disease (i.e., type 2 diabetes, hypertension, coronary artery disease, and stroke) in adulthood.

Maternal undernutrition often refers to malnutrition caused by insufficient caloric (energy) intake from carbohydrates, protein and lipids during pregnancy, but micronutrient deficiencies are also a form of undernutrition. Multiple micronutrient deficiencies com-

monly co-exist in pregnant women, especially in less developed nations.

Some of the important micronutrients are — folic acid, calcium, iron, zinc, iodine, magnesium, biotin and vitamin A, B, C, D, E, K etc. Good nutritional status prior to conception is also important for a healthy pregnancy. For instance, folic acid supplementation one month before and one month after conception dramatically reduces the incidence of devastating birth defects called neural tube defects. Thus, folic acid supplementation (at least 400 mcg/day) is recommended for all women preparing for pregnancy and those at risk of being pregnant.

A well-balanced diet throughout pregnancy is necessary to supply the developing embryo/fetus with micronutrients. In addition to folic acid supplementation, iron supplementation is generally needed to meet the increased demands for this mineral during pregnancy. Folic acid-iron supplementation is universally recommended during pregnancy. However, many health care providers recommend that pregnant women take a daily multivitamin/mineral or a daily prenatal supplement that includes folic acid, iron and several other micronutrients to ensure that all micronutrient needs are met.

The write up is compiled by Dr Shahjada Selim, Consultant Endocrinologist, Health and Hope Hospital, Dhaka. Email: selimshahjada@gmail.com Data Source: Linus Pauling Institute



Did you know?

British Asians set lower BMI target

The National Institute for Health and Care Excellence guidance in the UK says the Asian and other ethnic groups must be extra careful about their weight because they are prone to diseases like diabetes, reports BBC.

BMI is a way of seeing if your weight is appropriate for your height. It is calculated by taking your weight (in kilograms) and dividing it by your height (in metres) squared to give you a BMI score.

It means a 5ft 11in (1.8m) Asian man should weigh below 11st 11lb (75kg) and an Asian woman who is 5ft 3in (1.6m) should weigh less than 9st 4lb (59kg).

NEWS IN FRAME



With a call for a concerted effort to address nutrition and food security, The Lancet Series on maternal and child nutrition has been recently launched in Bangladesh. ICDDR,B in collaboration with the National Nutrition Services of the Government of Bangladesh and Save the Children International jointly organised the launching ceremony.



Knowing for better living

5 easy ways may reduce risk of diabetes by about 80%

- Take healthy diet - low in fat, sugar and salt
- Take 20-minute exercise for at least 3 days per week
- Maintain a normal body weight
- Avoid smoking
- Avoid alcohol



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