



QUICK turnaround



Consultant Gynaecologist Mr Tim Duncan talks to Debbie Thorpe, of Spire Norwich Hospital, about recent advances in gynaecological surgery that can help patients recover more quickly and return to their day to day activities.

The thought of needing gynaecological surgery is a daunting experience for most women. Being given a choice often helps patients feel more in control and speeds up their recovery following surgery - which is of paramount importance when all we want is to get back to "normal" as soon as possible.

As surgeons continually strive to refine techniques and improve the experience for their patients, Mr Tim Duncan, Consultant Gynaecologist, answers some questions and explains the benefits of new and exciting advances for patients in our region.

What is keyhole surgery?

"Keyhole surgery, often referred to as laparoscopic surgery, is a technique whereby an operation is performed through small cuts using a camera and specialised instruments."

Which gynaecological problems can keyhole surgery be used to treat?

"Many conditions which cause common gynaecological symptoms such as pelvic pain, discomfort during sex, troublesome periods and infertility can all be very accurately assessed and often treated this way.

"In particular, endometriosis, scar tissue and damage from previous pelvic infections. Also, ovarian cysts (fluid filled swellings) can be removed using keyhole surgery."

You mentioned that there have been some exciting advances in keyhole surgery. Does this include commonly performed operations such as hysterectomy?

"Yes, there have been some significant improvements to the techniques and types of surgery we can offer through the keyhole route. In particular, hysterectomy (removal of the womb) can be performed this

way which offers huge advantages to patients.

"This form of surgery can be highly effective in the treatment of period problems when medication has not been effective, as well as for conditions such as endometriosis, pelvic inflammation and fibroids (enlargement of the uterus). Some cancers affecting women, such as endometrial (cancer of the womb) and cervical cancer, can also be treated in this way."

Recovery time is often far shorter for keyhole surgery compared to an 'open' operation. Is this the same for a keyhole hysterectomy?

"Debbie, you have highlighted one of the major advantages this type of surgery has over conventional operations. The recovery time is much, much quicker. Patients often only need to stay in hospital for 24 hours before they are feeling comfortable enough to go home - previously four to five days was not uncommon.

"What is even more impressive is the rapid overall recovery from the operation, which can be as little as two weeks, after which women often feel well enough to return to work. This compares very favourably with a recovery time of three months if a hysterectomy is performed through a cut on the tummy."

Why do women recover so much quicker after keyhole surgery?

"The main factor which affects the speed of a patient's recovery after an operation is the size of cut needed on the tummy. The bigger the cut the more discomfort and the slower the recovery.

"Since keyhole surgery is performed through tiny cuts (0.5-1cm) much less pain and discomfort is caused which makes for a much quicker recovery. As less pain is experienced, women don't require as much pain relief,



Keyhole surgery is a technique whereby an operation is performed through small cuts using a camera and specialised instruments.

Picture: Getty Images/iStockphoto

which as you know may cause side effects such as sickness, constipation and dizziness."

Patients are often told that surgery is not possible if they are very overweight. Is this the same for keyhole surgery?

"Not entirely. We do know that being overweight carries many health risks and may increase the risk of surgical complications; however, all the advantages that I have mentioned today mean that this type of surgery may be possible in such patients. Clearly, assessments must be made on a patient-by-patient basis.

Gynaecological keyhole surgery sounds very impressive. So, why isn't all gynaecological surgery performed this way?

"While there are numerous advantages to this type of surgery it is not possible in every patient. If patients have severe scarring from previous surgery, or certain medical problems, this type of surgery may not be feasible.

"I always perform a thorough assessment of an individual patient before making a personalised plan of treatment to address their specific needs. This includes whether or not they would benefit from this, or

indeed any other type of surgery."

As a final thought Mr Duncan adds: "Keyhole surgery and in particular keyhole hysterectomy represents a huge step forward in the quality of care we can offer women. I hope this article raises women's awareness of this highly effective approach to the treatment of many common gynaecological conditions."

For further information about gynaecological surgery arrange an appointment with your family doctor or call 01603 813456 to make a private appointment with Mr Tim Duncan and the other partners within The Gynaecology Partnership can be found at www.gynaecologypartnership.co.uk

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ASK THE SPECIALIST

Dr William Crook, Consultant Psychiatrist at Spire Norwich Hospital, considers seasonal SADness.

I have noticed over the last few years that my mood is dramatically different during the winter months. I'm more tired, irritable and sometimes teary. Is this normal or should I be concerned about Seasonal Affective Disorder?

Seasonal Affective Disorder (or SAD as it is commonly known) is a type of depression thought to be linked to reduced exposure to sunlight during the shorter days of the year.

Sunlight can affect some of the brain's chemicals and hormones and one theory is that light stimulates the pineal gland within the brain. With the pineal gland receiving little stimulation by sunlight through the winter, these hormones (which help control our mood and sleep) are disrupted.

Although the symptoms of SAD are temporary, most sufferers start to experience changes in their mood at the start of the autumn, and notice their symptoms worsen as the winter progresses and the amount of sunlight decreases.

These symptoms include low mood, lethargy, poor sleep, lack of sex drive, changes in appetite (increased or decreased intake of food) and as in your case, tearfulness and irritability.

Although the symptoms aren't constant throughout the year, SAD is still a form of depression and therefore can be treated effectively.

You've already noted a pattern in your moods over the winter months, so it is worth seeing your family GP as they will be able to assess whether you are suffering from SAD. Your GP will discuss your mood and feelings in more detail and depending on the severity of your symptoms will be able to advise on the best course of action for you.

Cognitive Behavioural Therapy (or CBT) is an effective therapy which presents the idea that changing the way you think about situations and what you do about them can help you feel better. Several sessions over the winter months may benefit you greatly. Light therapy is also effective.

Light boxes are special lamps that come in a variety of designs and produce a very bright light which helps stimulate the pineal gland. Antidepressants may also help, but your GP will be able to advise which treatment is best once a diagnosis has been made.

Depression is a common condition and is nothing to feel ashamed of. GPs are an excellent place to start if you feel low, regardless of whether the feelings are seasonal or continuous.

For further information arrange an appointment with your family doctor, or call 01603 255614 to make a private appointment with Dr William Crook.

Keep questions brief and send them to Ask the Specialist, Helen Culling, Spire Norwich Hospital, Old Watton Road, Colney, Norwich NR4 7TD. Questions will be handled with discretion and you will remain anonymous. Specialists cannot enter into direct correspondence.



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