Prevention of Hypothermia in Surgical Patients – a technical revolution in U.K. practice

The predominant methods for patient warming in the operating theatre for over a decade have been forced air systems and water mattresses. Some use of electrical mattresses has been made, mostly to augment air warming for cases where there is a higher risk of hypothermia.

A new technology has been introduced in the last few years which now looks like revolutionising clinical practice. There are an increasing number of reports of the more effective warming characteristics provided by the new flexible conductive polymer technology. This extends from neonates weighing only a few kilograms at one end of the scale to long procedures that challenge thermoregulation at the other (e.g. “off-pump” CABG, organ transplantation, burns, vascular and thoracic surgery). Uptake of the new technology is already growing fast, as the very favourable experience of existing users becomes more widely recognised.

In a randomised study of 80 patients undergoing major abdominal or orthopaedic surgery, a system using the flexible polymer technology was compared with the leading air warming system. The results showed that even with the new system at lowest setting (37°C), the performance was comparable or better than the forced-air system at maximum (43°C).

It is standard practice during conventional CABG procedures to use the perfusion system to control patient temperature during the cooling and re-warming phases. This leaves the patient warming system with the relatively simple task of preventing “rebound” at the end of bypass and then maintaining temperature to the end of the procedure. However, the advent of “off-pump” CABG procedures has created a significant challenge in the prevention of hypothermia. Patients benefitting from this technique are frequently arriving in ICU/CCU with significant hypothermia, despite the use of conventional warming therapy throughout surgery. Experience at one of the UK’s foremost cardiac surgery units has shown that patients warmed with the new technology consistently remain normothermic throughout the procedure. Following the success with cardiac patients, similar results have been experienced in major thoracic surgery at the same centre, demonstrating that the new technology can cope with another of the most demanding applications.

In addition to providing improved warming performance, the new systems provide integrated pressure relieving properties that help to prevent pressure sores. Research at North Tees General Hospital demonstrated that the characteristics are better than gel pads or standard operating table mattresses. Clinical practice has also shown that there are considerable advantages in terms of convenience of use. As the technology is re-usable, there is a large saving to be made from the reduction in consumable costs. These benefits provide the potential to warm many more patients, which can lead to huge clinical and financial gains from the reduction in post-operative surgical site infections.

References:
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A new era in surgical glove technology is about to begin
HPC welcomes three new Council members

The Health Professions Council (HPC) is pleased to announce the appointment of three new members of Council. Alan Mount, Stephen Wordsworth and Mary Clarke Glass were appointed by the Privy Council and will be attending their first Council meeting today. The Council meeting is being held to discuss the structure of the HPC Register. Stephen is the Operating Department Practitioner member of Council, Alan is the alternate and Mary has been appointed as the new lay member. Operating department practitioners are the 13th profession to be registered by the HPC, they joined the Register in October 2004.

Mary Clark-Glass was formerly a lecturer in law and broadcaster in Belfast; she has been involved in equality/human rights issues since the 1970’s. Head of the Equal Opportunities Commission for Northern Ireland 1984-92, a Human Rights Commissioner 1984-1990, former member of the probation board for Northern Ireland, she also served as a Commissioner on the Commission for Racial Equality for N. Ireland. Mary is currently a GMC associate, a member of the GDC’s Fitness to Practice Committee and a non-executive director of the Royal Group of Hospitals, Belfast.

Alan Mount is Education Manager/Senior Lecturer in ODP Studies, based within the Faculty of Health at Canterbury Christ Church University College. Alan has a long history within the peri-operative field, both as a practitioner and as an educator. He was appointed in February 2002 to the Association of Operating Department (AODP) Board. He has been involved with the development of the new standards of proficiency, scope of practice and subject benchmarks for ODP in accordance with the transfer to the HPC. More recently he was awarded the Association of Operating Department Fellowship for outstanding service to the ODP profession.

Stephen Wordsworth is a senior lecturer in the Faculty of Health and Community Studies at the University of Central England. He has been a qualified operating department practitioner for 15 years and has been heavily involved in a range of curriculum development initiatives for much of that time. Whilst as a professional body council member for the Association of Operating Department Practitioners (AODP) he has acted as the Deputy Director of Education and chair of the curriculum review development group. Stephen has also acted as a specialist ODP advisor for a number of HE institutions and as recently completed QAA training for Major Review of Healthcare Programmes.

The Council of the HPC is responsible for developing strategies and policies and consists of 26 members (made up of one representative from each of the professions regulated and 13 lay members) 13 alternates, plus a president.

Professor Norma Brook, The President of the Council, said “I am delighted to welcome a new profession to the HPC Register and three new members to Council. I look forward to working alongside Mary, Alan and Stephen in the near future. Council members play a vital role in the success of HPC and the new members have joined us at an exciting and challenging time.”

The Health Professions Council is a new UK-wide regulator, which sets standards for thirteen health professions. The HPC only registers people who meet its standards for their professional skills, behaviour and health.

More information about the Council, including dates of forthcoming meetings, and minutes from meetings, is available on the Council section of the HPC website here: http://www.hpcuk.org/council/index.htm
Scientist criticises Government over its ‘superbug’ strategy

A leading scientist has criticised the Government's attempts to tackle the MRSA 'superbug', saying that proven measures for reducing MRSA infection rates have been overlooked.

In an article in the new edition of Microbiology Today (published 8 February 2005), Dr Mark Enright, from the University of Bath, says that Government's efforts to raise basic standards of hospital hygiene are likely to have a limited effect on MRSA infection rates.

Instead, proven measures, such as isolating patients with MRSA infections, should be adopted if the Government is really serious about bringing the MRSA epidemic in the UK to an end.

However, Dr Enright believes that these measures have been overlooked, despite the scientific evidence that support them, because of the associated increase in costs and potential impact on the controversial topic of waiting lists.

"There ought to be fewer MRSA infections in clean hospitals yet surprisingly there is little scientific evidence for this," said Dr Enright who is an expert on the evolution and epidemiology of MRSA and a Royal Society Research Fellow.

"The UK has the second highest rate of MRSA infection in Europe, yet higher rates are reported in the USA and Japan, countries not generally perceived as having failing hospital hygiene regimes

"Better hand hygiene will have some effect, but only a radical measure, such as isolating all patients with particularly transmissible MRSA strains, would really solve the problem. However this would require a politically unacceptable level of resource and lengthen waiting lists.

"Government policy to import experts from European nations with low incidence of MRSA may seem laudable, but it is not at all clear how personnel who are good at keeping MRSA out of hospitals will respond to the challenge of reducing infections"

In the UK, the emergence and domination of two particular clones of MRSA that are not commonly found elsewhere in the world has coincided with increases in MRSA infection rates. MRSA mainly causes invasive disease following infection of tissues around devices placed in the body, such as venous catheters. These are increasingly used in hospitals, as are drugs which suppress patients' immune systems and enable MRSA to take hold.

"The UK MRSA epidemic may largely be explained by the emergence of particularly transmissible strains of MRSA meeting an increased number of vulnerable hosts. But we simply don't know how MRSA comes into a hospital, colonises staff and patients and then causes serious disease," said Dr Enright.

"There is an unacceptably low amount of government spending on research that would give us a deeper understanding of how the MRSA epidemic started, which may allow us to begin to tackle the problem and prevent future epidemics.

"MRSA is changing rapidly and beside hospital strains with resistance to all antibiotic classes, some types are finding niches in the community, causing disease in healthy young people with no prior hospital exposure.

POCH-100i PROVIDES POINT OF CARE BLOOD COUNTS

Sysmex UK has launched the brand new pocH-100i – a fully automated haematology analyser that has been specifically designed for Point of Care Testing. Based on the same proven red blood cell and platelet detection technology of the high throughput Sysmex diagnostic instruments, this truly innovative analyser provides the same levels of precision and results accuracy and delivers a full blood count (FBC) in just two minutes.

Ideal at the point of care in ITU and A&E departments as well as on the hospital ward, the compact analyser is also suitable for use in GP surgeries, OPD (outpatient) clinics, at remote sites, and at anaesthesiology units alongside other critical monitoring equipment such as blood gas, platelet function analysers and thromboelastometry. As well as common emergency parameters, pocH-100i provides a full 3-part white blood cell (WBC) differential comprising counts for neutrophils, lymphocytes, and a mixed cell population.

With turnaround times for traditional laboratory-based FBC analysis typically between three and eight hours, pocH-100i's rapid results enable clinicians to make critical decisions quickly – saving both time and money and offering an improved patient service. It is simple to use via a touch sensitive screen and requires minimal operator training. 19 parameters can be read from a single 15µl aspiration and reagents are provided in a convenient pack format. Safety is paramount in the design of pocH-100i with closed vial sampling provided as standard, and the pre-dilution function is particularly useful for paediatric sample analysis.

pocH-100i joins the Pentapharm ROTEM thromboelastometry system for whole blood haemostasis, Dade Behring PFA-100 platelet function analyser and Hemosense INRatio INR testing system as part of the rapidly expanding range of point of care products available from Sysmex UK.

For sales enquiries please contact: Tracey Wagstaff, Sysmex UK Ltd, Sysmex House, Garamonde Drive, Wymbush, Milton Keynes, MK8 8DF Tel: 0870 902 9210 Fax: 0870 902 9211 Email: WagstaffT@sysmex.co.uk

For brochures please contact: Joanne Collings, Sysmex UK Ltd, Sysmex House, Garamonde Drive, Wymbush, Milton Keynes, MK8 8DF UK Tel: 0870 902 9210 Fax: 0870 902 9211 Email: sales@sysmex.co.uk Website: www.sysmex.co.uk

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Airport-style centres to take surgery into the community

A new generation of airport-style surgery centres - with a nationwide fleet of mobile operating theatres using ‘docking bays’ – is being planned to help the NHS deliver surgery closer to the community.

London has already been earmarked as one of the earliest areas to benefit, assuming suitable sites can be found close to progressive practices with GPs looking to innovate on behalf of their patients. Between 0.5 to 0.8 of an acre is required, probably in areas with challenging waiting times.

Healthports, built in just six weeks and at no cost to the NHS, will use the latest mobile medical technology to create instant additional day surgery capacity, available right in the heart of local communities.

The men behind the plan are Gary King and Andrew Allen, the two entrepreneurs who developed Vanguard Healthcare the world’s first operator of sophisticated mobile operating theatres. In October, Nuffield Hospitals acquired Vanguard as part of its strategy to move closer to the NHS.

Vanguard is the leading provider to the NHS of mobile operating theatre suites which combine anaesthesia, operating room and three-bay recovery all under one roof. Used by the DoH in its nationwide five-year cataract waiting list project, these units have already delivered over 10,000 cataract operations and 30,000 procedures in total.

With a fleet of 12 mobiles currently in use, the company has invested significant time and money in developing both the clinical hardware and the Healthport concept. The first prototype Healthport opened in Plymouth this summer – now NHS Trusts, GPs and others are being invited to discuss their needs with Vanguard.

“We now have the technology to quickly site a Healthport where it will do most good and begin operations within six weeks”, said Gary King, Director of Strategy: “The part that takes the time and money - building state-of-the-art operating theatres and designing the modular Healthports - has already been done.

He added that thanks to modern technology, the whole process would be transparent to the patient. The theatres are built to the same Department of Health standards that govern static theatres and are equipped with sophisticated medical technology.

“Throughput rates will be very high in the Healthports - without compromising patient safety in any way - because they are physically independent from hospitals.

“The procedures and the beds are ring-fenced - no one else can use the beds or the time in theatre. Patients will turn up and have the operation at the time they were promised, the NHS gets value-for-money and waiting times drop”.

Healthports will be located on main roads and close to patient populations. They will cater for NHS day surgery patients but will also be capable of handling more complex elective surgery if required.

The key to the viability of the network was the development of the mobile operating theatre fleet. Vanguard has invested some £20 million in the fleet to enable the NHS to meet its day surgery targets, wherever they are.

www.vanguardhealthcare.co.uk

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Issue 173 FEBRUARY/MARCH 2005
UCLH NHS TRUST GOES FULLY DIGITAL

TRUST-WIDE WITH AGFA PACS

6th January 2005: The University of College London Hospitals (UCLH) NHS Trust today signed phase two of its contract with Agfa HealthCare, under which Agfa will install its very latest IMPAXTM 4.5 PACS, into the impressive new University College Hospital building and relocate existing systems into recently refurbished buildings.

The Trust is set to open the new £225 million building in April 2005 where all services from the Middlesex Hospital and the old building will be relocated over the subsequent five months. All imaging services in the new building and throughout all hospitals within the Trust will be fully digital and will also involve the implementation of a new electronic patient record system, which will log key patient information, orders and results. Agfa will also implement a PACS solution for vascular imaging in the new building, as well as offering an optional PACS solution to incorporate cardiac imaging at the Heart Hospital.

"IMPAX has transformed practice since its original installation twelve months ago," said Robert Naylor, CEO of UCLH NHS Trust, "its state-of-the-art 'open' system integration is allowing us optimal efficiency within the department. We have also been impressed by Agfa's outstanding commitment to customer service. We are looking forward to enhancing efficiency even further with our upgrade to IMPAX 4.5."

The UCLH NHS Trust is one of the country's largest providers of healthcare services and a centre of excellence contributing to the development of medical technology including medical informatics, research and training. Its hospitals provide acute and surgical services for the local people, commuters and visitors to London as well as highly specialised services to patients referred from all over the country.

Further information contact: Bill Reid Agfa HealthCare Tel: 020 82314900 E-mail: bill.reid@agfa.com Web: www.agfa.com/healthcare

MEDICA and ComPaMED draw the visitors once more

MEDICA and ComPaMED, the two leading medical trade shows organised by Messe Düsseldorf, have proved they can draw the visitors once more. Running for four days (ComPaMED for three), the event plus the accompanying MEDICA congress and German Hospital Congress was able to show excellent results once more.

136,000 trade visitors (2003: 134,700) visited the 36th World Medical Forum to gather information on the latest products, services and techniques for the entire spectrum of in and outpatient care. The share of international visitors once again rose significantly (38%). Higher numbers of visitors came from China, Taiwan, India and Russia as well as from the new EU member states.

Alongside the traditionally high interest in medical technology and electromedicine a growing interest was also seen in disposables, commodities and consumer goods.

MEDICA and ComPaMED offer the best pre-conditions for further growth, especially for innovative, export-oriented suppliers. Indeed, those best able to face the challenges facing the health services of most industrialised nations are those who create a broad international basis for their business," said Werner M. Dornschiedt, Chairman of the Board at Messe Düsseldorf.

John Wilkinson, Director General of the Association of British Healthcare Industries (ABHI), said, ,,MEDICA has been very successful for British companies. They particularly welcomed the visit by the Parliamentary Under Secretary of State for Health Lord Warner, who spent the best part of a day talking to exhibitors and their representatives. Bringing together the government's efforts to facilitate improved trade and development is an extremely important part of the export strategy and MEDICA provided a perfect forum for commercial officers from British Embassies around the world to meet with exhibitors to talk about issues particular to their markets."

A total of 4,300 exhibitors (MEDICA and ComPaMED together) showed that there was news to report from every segment of the market. In medical technology and electro-medicine, visitors saw the latest generation of computer and magnetic resonance tomography units. Another theme was the forthcoming launch of electronic health cards in Germany plus integrated care models for doctors’ surgeries and clinics. Other product highlights at MEDICA 2004 included the first UMTS-based communication unit for consistent and swift transmission of medical data (e.g. from ambulances), new-style bio-chips that classify cancerous tumours or determine the right dose of medicine plus special prostheses which are able to counter phantom pain after an amputation.

The MEDICA Congress was once again presented in a thematically comprehensive manner geared to the many different interests of the individual professional groups attending. Here, the MEDICA Congress, the largest interdisciplinary medical event in Germany, and the biennial congress on clinical chemistry and laboratory diagnostics linked up with the laboratory medicine themes at the fair. Also followed with special interest were the topics of oncology and the aspects of increasing resistance to antibiotics as well as prevention measures in the health field.

Running in parallel to MEDICA, ComPaMED raised its profile as the internationally leading fair for upstream supplies in medical production. The 261 exhibitors (a 40% increase over the previous year) moved into the new Hall 8 for the first time. This was very well received by trade visitors right from the start (9,000 of the 136,000 visitors in total). The trend topic in focus here was the increasing move towards product miniaturisation in medicine. The supplies industry is catering to this trend by developing highly competent and very smart ideas - like those highlighted at the special forum „Micro System Technology in Medicine” that was part of ComPaMED 2004.

Dates for the next MEDICA are 16th – 19th November 2005, with ComPaMED to 18th November 2005. More information can be found on the Internet at www.medica.de and www.compadmed.de
NHS STAFF LEAD THE WAY IN NEW PATIENT MEDICAL INVENTIONS

A report detailing new ideas and inventions generated by the 1.3 million people who work in the National Health Service (NHS) was launched recently.

In the 12 months up to March 2004 NHS Innovations, which is made up of a network of regional innovation centres known as NHS Innovations Hubs, handled almost 500 new ideas brought to them by NHS staff. One hundred new ideas were then selected for further development and the NHS Innovations Hubs helped broker licences for twenty-four of them. Patients are now benefiting from the products in use in the NHS.

The new inventions include:
- Child Imaging Chair - To obtain good quality images during kidney scans it is vital that children keep as still as possible. This special chair ensures children do not move around and accurate images can be obtained. The Imaging Chair was the idea of Rob Beckwith, Medical Physicist at Newcastle-upon-Tyne Hospitals NHS Trust.
- X-Ray needle placement mannequin - This mannequin mimics the human body in the feel and position of internal organs and bones. It is used in training to administer complicated epidural pain relief which involves placing needles into the spine and skull. This idea for this mannequin came from Tim Johnson, Consultant Anaesthetist at Salford Royal Hospitals NHS Trust.
- E-PAQ - An electronic pelvic floor symptoms assessment questionnaire. Some medical conditions can be difficult for patients to discuss freely with their doctor and this can lead to uninformed consultations, poor diagnosis and poor condition management. This electronic patient questionnaire is completed in a private area of the waiting room and the doctor can see a printed analysis before the consultation. The idea for E-PAQ came from Stephen Radley, Consultant Surgeon at Sheffield Teaching Hospitals NHS Foundation Trust.
- Pupilometer - A portable eye measuring device that paramedics can use at accidents sites to measure the size and responsiveness of the pupils of head injury victims. It allows a quick and accurate assessment of the possible extent of their injuries. Pupilometer was the idea of Andy Clark, Senior Medical Technologist at Newcastle-upon-Tyne Hospitals NHS Trust.

Health Minister Lord Warner said: “Our aim is to create an environment in the NHS in which innovation is at the heart of our business. Establishing NHS Innovations Hubs was a major first step in recognising the creative potential that lies within the NHS and enabling staff to get their ideas accepted whilst protecting intellectual property rights.

I am impressed by the work of the Hubs and by the enormous enthusiasm and energy for innovation that exists throughout the NHS among clinicians, scientific and technical staff, managers and others. The NHS is a rich source of excellent ideas that, if tapped, can provide enormous benefits for the NHS, for the inventors, for the patients and for the UK economy.”

Nine NHS Innovations Hubs have been established based on the nine English Regional Development Agencies. Each serve the NHS organisations in their area, helping the NHS Trusts and Primary Care Trusts to develop their understanding of innovation, identify those new ideas which need development, and advise on licensing the best products to the industry. The products can then be accessed by the NHS and other healthcare markets.

Dr Tony Bates, NHS Intellectual Property Advisor and founder of NHS Innovations said: “Until the Hubs were created, an employee with an exciting innovation had nowhere to go. Good ideas leaked out, often going abroad, and any benefits to the inventor, the NHS and UK industry were lost.

The clinician, technician or researcher can come up with discoveries which often have the potential to develop into new products or innovations in service delivery. NHS staff can be at the forefront of invention.”

A copy of the report (NHS Innovations Annual Report 2003/04) can be viewed at: http://www.innovations.nhs.uk/noticeboard/annual-reports.htm
David Coorey appointed as Managing Director of Gambro Hospal

Gambro Hospal Ltd, a wholly owned subsidiary of Gambro AB, has appointed David Coorey as Managing Director. Prior to this David was Sales & Marketing Director for the company, a position he assumed in 2003.

David was born and brought up in Australia where he obtained a Distinction in his Bachelor of Science Degree in Nursing from the University of Sydney. Whilst working in the Australian healthcare system as a Nurse, David obtained a Certificate in Renal Medicine and was a part-time lecturer at Sydney University in the undergraduate Nursing Diploma.

David started his industry career in Sales with Fresenius when he moved to the UK in 1992. This initially covered renal, before he moved to promote Fresenius Kabi’s Enteral nutrition products from 1994.

David then obtained a Post-graduate Diploma in marketing, and quickly moved up the Fresenius Kabi corporate ladder, culminating in his final position of Business Manager for the IV Therapy and Homecare Division. Since joining Gambro Hospal in 2003, the company has enjoyed record sales growth, operational enhancements and high customer satisfaction levels.

Commenting on his promotion at Gambro Hospal, David Coorey said: “Gambro Hospal have an established platform that reinforces Regent Medical’s concern for allergy awareness education and consumer care. They have excelled by substantially increasing one or more of the following criteria:

- Market share
- Revenue growth rates
- Profitability
- Market and technology innovation

Further information contact: Regent Medical
Heidi James, Product Manager Phone:0161 777 2612
E-mail:Heidi.james@regentmedical.com
www.regentmedical.com www.awards.frost.com

Frost & Sullivan confers the 2004 Market Leadership Award on Regent Medical for its Overall Market Leadership in the European Surgical Gloves Marketing

Regent Medical Limited is a leading manufacturer of high quality, technically advanced powder free surgical gloves and skin antisepsis products. Best known for the Biogel® range of gloves and Hibi Antiseptics, Regent Medical Limited provides high quality protection for surgical teams across a wide range of specialties.

Frost & Sullivan believe that Regent Medical’s dedication to their powder free latex segment and their continued innovation of the product is the key to their strong market position.

Regent Medical not only commands respect for its stand on latex allergy issues and dedication to providing the finest quality powder-free surgical gloves but also for the loyalty it inspires in its users.

Regent has capitalised most on the powdered-to-powder-free conversion trend to become market leaders in the United Kingdom and Scandinavia.

Leadership Status

Biogel’s loyal following is an achievement that is much admired by other industry participants. In an industry where price sensitivity is high and increasing, the Biogel range has not only managed to hold its own but also succeeded in creating a strong brand image for itself. This has resulted in Regent Medical cornering 33 per cent of the revenue of the Surgical Gloves market in Western Europe (2003).

A range of variations of the original pioneering powder-free latex glove Biogel, are the part of Regent Medical’s portfolio that have resulted from optimal use of its extensive research facilities and its dedication to being on the forefront of technology.

The Biogel range of products includes; Biogel M for microsurgical procedures, Biogel Super-Sensitive™ for increased sensitivity, Biogel Reveal™ with a puncture indication system, Biogel Skinsense N, Skinsense N Universal and Skinsense PI that are latex free gloves and Biogel D that is a dental procedure glove.

Quality and brand image are hallmarks of the Biogel brand but customer service is not far behind. The launching of latex allergy support packs, workshops on surgeries and surgical education, guidelines and research papers are just some of the beneficial offerings by Regent Medical to the end user.

The introduction of education modules endorsed by the IFPN that eventually lead to a Certificate of Competence is another innovative educational measure that reinforces Regent Medical’s concern for allergy awareness education and consumer care.

Future Focus

Regent Medical has recently decided to implement Information Engineering’s SYSPRO ERP system to help manage its manufacturing and commercial processes as a whole on a limited financial and human resource platform.

Regent Medical is well poised to build on its past successes and to face the challenges of keeping its leadership status. Frost and Sullivan trust that Regent will be successful in doing so based on the acumen, tenacity, focus on quality and performance that one has come to associate with the Biogel brand.

Award Description

The Frost & Sullivan Market Leadership Award is given to the company that has exhibited market share leadership through the implementation of market strategy. The recipient has displayed excellence in all areas of the market leadership process, including the identification of market challenges, drivers and restraints, as well as strategy development and methods of addressing these market dynamics. Furthermore, the Award recipient has continually demonstrated solutions for monitoring market changes and for implementing superior market strategies. By utilising these strategies for success, the company has established itself as the market share leader in its respective industry.

Research Methodology

To choose the recipient of this Award, the analyst's track competitor revenue and market share within the industry. This is achieved through interviews with all market participants and extensive secondary research of proprietary data sources. Finally, the competitors are compared and ranked for relative position. Frost & Sullivan then presents the Award to the company that received the number one industry rank.

Measurement Criteria

In addition to the methodology described above, there are specific criteria used to ascertain final competitor ranking in this industry. The recipient has excelled by substantially increasing one or more of the following criteria:

- Market share
- Revenue growth rates
- Profitability
- Market and technology innovation

MonoLead™ ECG Lead-Wire Set Replaces Multi-Wire Systems

London, 2005 - Dräger Medical UK Ltd (a subsidiary of German-based Dräger Medical AG & Co KGaA) introduces the new MonoLead™ ECG lead-wire set for the Dräger Infinity range of patient monitors. MonoLead™ is a patent-pending, one-wire ECG lead-set solution that directly replaces multi-wire systems. The single, tangle-proof lead set accommodates standard electrodes and electrode placement, while eliminating the tangled clutter that frequently occurs with traditional multi-lead sets.

MonoLead is designed with patented Z-Snap™ zero-insertion force electrode snaps, which connect easily and hold securely, with no pressure or discomfort for your patient. Ideal for both adult and pediatric patients, MonoLead is compatible with all Dräger Medical Infinity® patient monitors.

Additional information is available on the Company’s website at www.draeger-medical.com, or Drager Medical UK Ltd - Tel 01442 213542.

[When responding please quote ‘OTJ’]
Ceramisys team up with University of Sheffield Professor

Biotechnology in South Yorkshire has enormous potential for growth. Recognition of this has lead to the commitment of over £20 million of investment (European Regional Development Funds and Regional Development Agency funding) to develop this sector between 2003-2006. Scientific expertise and major funding opportunities are combining to make the region an attractive location for high growth bioscience businesses.

South Yorkshire’s bioscience cluster is growing rapidly on the strong bioscience research base, with research excellence in tissue engineering and biomaterials, stem cell biology, genomic medicine, drug discovery and environmental biotechnology. Sheffield’s two universities are intrinsically linked to the hospitals and have 300 bioscience and medical researchers between them, producing 200 bioscience graduates a year.

It is this expertise that has led Ceramisys Ltd – a developer and manufacturer of an innovative range of bone substitute materials – to work together with the University of Sheffield’s, Professor Paul Hatton, (Professor of Biomaterials Science at the Centre for Biomaterials and Tissue Engineering) in a three year programme of development.

Together they are exploring routes to market for ceramic tissue engineering scaffolds, and this joint activity is contributing to the development of new teaching materials. To support the ongoing collaboration, Wayne Austin (Managing Director of Ceramisys Ltd) and Professor Hatton have applied for a Biotechnology and Biological Sciences Research Council (BBSRC) CASE award.

The collaboration was initiated by the Knowledge Transfer Partnership (aimed at helping companies by giving them access to technology and expertise which are not otherwise available to them), and this project is managed by BITE CIC (a unique R&D base and Centre for Industrial Collaboration in the field of Biomaterials and Tissue Engineering). The project also explored the potential for manufacture/fabrication of customised implants, bone graft substitutes, porous calcium phosphate scaffolds and novel and therapeutic delivery systems. Professor Paul Hatton commented: “The combination of knowledge transfer funding from HEFCE (Higher Education Funding Council for England) and excellent project management from BITE CIC has resulted in the creation of a sustainable relationship between a local SME and the university which will undoubtedly benefit both parties”.

Ceramisys have two key product lines (orbital implants and bone graft substitutes - all of which are CE Marked) and they are the first UK company to manufacture and CE mark their orbital implants as a UK product. The implants can benefit most people who have had an eye removed; giving a more realistic movement than removable spheres and are a permanent integrated fixture.

Another of Ceramisys’ key products is ReproBone - a resorbable bone replacement product for non-load bearing orthopaedic and maxillofacial reconstruction, as well as being a non-resorbable pure hydroxyapatite equivalent. ReproBone is the natural alternative to bone grafts, in many cases eliminating the need for a second operation site, reducing blood loss and lowering patient morbidity.

Ceramisys have received regulatory approval to market the ReproBone and PermaBone synthetic bone graft substitutes, as well as Orbital Implants throughout Europe, which will allow them to work with partners in the Far East for the products’ eventual worldwide distribution.

Further information contact: Ceramisys Tel: +44 (0)114 283 5981, Fax: +44 (0)114 283 5981, E: enquiries@ceramisys.com www.ceramisys.com

Steve Fletcher Business Link and Wayne Austin Ceramisys Ltd, Pictured holding a ceramic eyeball.

New Customer Services Supervisor at Healthline

Healthline Products Ltd is a major supplier to the UK National Health Service of a wide range of quality-assured latex, vinyl and synthetic gloves. It is also highly customer focused, a process which has been enhanced recently by the appointment of a new Customer Services Supervisor.

Sharon Charles has been appointed to this important position after spending just over one year with Healthline’s Customer Support Team. Such a good impression has Sharon made with the Healthline management and her customers, that she won her promotion on merit, and now heads a team of 3 members.

The position of Customer Services Supervisor is a challenging and varied one. Sharon is literally the lynchpin of Healthline Customer Services activity, and she liaises closely with logistics, suppliers, and with NHS procurement officers. She has the advantage of a customer services background in both the international/hotel and banking industries, and possesses a BTEC qualification in Business Communication. She is continuing her studies through day release on an Institute of Leader Management Course, eventually to become a member of the Institute.

Sharon sees her future very positively. Among her initial objectives is the allocation of particular staff to specific customers to improve relationships between the two. She also wishes to standardise all the departmental procedures and streamline inter-office communications, so that the customer will benefit from a new service orientation.

Healthline Products: Advanced solutions for stringent medical procedures.
New BVMed publication “History and trends of medical technology”; “We are on the brink of a medical technology revolution”

Berlin/Germany. With a new publication entitled “History and trends of medical technology”, BVMed, the German Medical Technology Association, is offering a comprehensive overview on the historical development of medical technology – concluded with a look into the future of the branch. The 28-page colour brochure may be ordered from BVMed free of charge or downloaded at www.bvmed.de/publikationen.

The origins of medical technology go far back in time but have only rarely been researched or systematically analyzed, says the introduction to the brochure. Indeed, at every university there is a chair for the history of medicine. However, medical technologies or medical engineering are not usually addressed here.

With the new publication, BVMed is offering an overview on the historical development of medical technologies with examples of selected products and therapy areas: “woundcare”, “surgical instruments and hospital products”, “examination and operating methods”, “eye”, “bones and joints”, “heart and vessels” and “enteral nutrition”. There is an excursion on “synthetic materials in medicine” and different historical patients’ stories, such as those of Alois Alzheimer, Rudolf Virchow and Johann Sebastian Bach.

At the end of the brochure, there is a comprehensive description of “trends in medical technology”. Examples of medical technologies of the future that have been given particular attention include regenerative medicine or tissue engineering, cell therapies, nanomedicine, minimally invasive surgical technologies, highly-developed biomedical substances, and cross-linking of medical technology devices with hospital systems through information technologies such as telemedicine.

The conclusion of the publication is: “The development of medical technology in the last de¬cades of the 20th century was incredibly dynamic. Synthetic single-use devices, joint replacements, pacemaker technologies or minimally invasive procedures made for a high standard in medical technology care. But despite all these advances, we must realize that we are now on the brink of a medical technology revolution.” However, this also brings up ethical questions. “Above all there must be public debate on how, in the future, medical technology innovations may be made available to all patients as quickly as possible. To enable this, we need a new orientation of the German health service towards a modern and innovative healthcare economy,” BVMed believes.

Members give thumbs up as NATN heads for change

A leading UK organisation for professionals working in theatres, anaesthetics and recovery has announced a programme of change following a ballot of its members. The National Association of Theatre Nurses (NATN) announced the results of the members’ vote following a consultation exercise that showed over 75% of its members being in support of each proposal.

The most obvious change is to the Association’s name. In recognition of its growing membership of Managers, Operating Department Practitioners, Health Care Assistants and Healthcare Support Workers, NATN is set to change its name to the Association for Perioperative Practice (AIPP). This change reflects the growing diversity of the perioperative workforce and the increasing area of the Association’s influence.

NATN’s core business is education demonstrated by its national education programme including its annual Congress in Harrogate and Speciality Conference in London. The education facilities will be augmented with new online facilities concentrating on specialist areas such as decontamination, anaesthetics and research giving those interested in these areas access to up-to-date information and online communities of like-minded individuals.

Non-nurse members will be eligible to vote in the new structure and an ODP place on the Association’s Board will be guaranteed to recognise this growing and important part of the organisation’s membership.

The Association’s regional structure will be boosted through the appointment of key individuals to manage, monitor and evaluate sharing of best practice at a regional level and the employment of an Education Officer to coordinate this work. This new post will be liaising directly with governmental organisations and key partners to ensure the delivery of contemporary and relevant education.

Melanie van Limborgh, NATN Chairman, said: “These changes are designed to keep the Association at the forefront of perioperative practice and to incorporate the diverse workforce in this vast practice area. By our actions we will continue working alongside the modernisation agenda in the NHS and the independent sector fully representing all those who influence perioperative care. Our enhanced educational role and the greater diversity of our membership will ensure that the patient remains at the centre of all we do.”

The new-look Association is to be launched at a meeting of NATN’s members in Hull on 16 April.

Adding much needed moisturising to effective antimicrobial hand cleansing

HIBISCUT can be used as an antiseptic handwash on the ward and for pre-operative surgical hand disinfection and pre and post-operative skin antisepsis. HIBISCRUB - with 4% chlorhexidine gluconate microbicide - has been shown to have a bactericidal effect comparable to 60% n-propanol. However, whereas alcohol based skin disinfectants have little residual activity, HIBISCRUB has an immediate bactericidal effect with sustained antisepsis lasting 6-8 hours, reducing risk of subsequent cross-infection. It has proven clinical efficacy against a wide range of pathogens including MRSA, MSSA, lipophilic viruses and yeasts and fungi.

With a blend of the emollients Macrogol 7 Glycerol Cocoate and Glycerol HibiSCRUB leaves your hands clean, aseptic and conditioned, with no adverse effects.

New HiBiSCRUB is the latest change to the HiBi range that also includes:

- HIBISOL – Antimicrobial handrub, to disinfect hands without washing.
- HIBITANE – Antimicrobial disinfectant, for general antiseptic purposes.
- HIBICET – Antimicrobial disinfectant, with cleansing properties for general antiseptic purposes.

Product enquiries contact: Regent Medical – Heidi James, UK Product Manager Telephone: +44 (0)161 7772612 E-mail: heidi.james@regentmedical.com www.regentantiseptics.com

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Introducing the new Fluid Management System from Melyd Medical

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User-friendly system for raising irrigation bags to the desired height with the minimum of effort. The Lift Assist is activated by simply squeezing a knob. The weight of the fluid bag is reduced by 70%. Extremely simple to use with easy to reach hangers set at 5'6" and can be raised up to 8'6".

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Easy-to-use sterile drape – uses no tape and is compatible with all suction systems.

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Melyd Medical Limited
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www.melydmedical.com
Fukuda Denshi’s portable ultrasound system now has a new 3D-imaging facility

Fukuda Denshi is a leading supplier of advanced patient monitoring and user-configurable clinical information management systems. Among these is the portable, colour Doppler Ultrasound System, the UF-750XT, which now features an optional integrated 3D imaging facility to expand its clinical usefulness.

With its comprehensive, advanced specification, superb digital image quality and competitive price, the FFsonic UF-750XT system from Fukuda Denshi, is becoming well established in UK hospitals.

The software-based signal processing enables highly-sensitive examinations, while the compact, portable and aesthetically ergonomic UF-750XT exhibits a system performance typical of high-end competition. It is equipped with Color, PulseWave and Power Doppler modes. It comes standard with an MO drive for digital data storage and now has a 3D measurement capability with a variety of 3D imaging modes.

The UF-750XT-3DU system enables rapid 3D acquisitions in a variety of display formats. Measurements of any image plane, oblique cuts and freehand scanning are all available. There is an ‘unnecessary area deletion function’ and a zoom facility. The 3D volume rendering system operates with four different modes.

For more information on the Fukuda Denshi UF-750XT-3DU ultrasound system, or for a demonstration, please telephone the company on: 01483 728065.

Brandon Medical Launch Biggest Ever Examination Lighting Range

Brandon Medical are delighted to announce the launch of their latest range of Coolview Examination Lights. With over 100 different versions of the four core models (CVXM, C50, C35 and C20) this is most comprehensive range of examination lighting available on the market, offering a light for virtually any type of examination.

These four core models have each been designed with a different type of examination in mind. The CVXM (see pic) is a super-sized examination light with an extended arm which can reach all around the patient’s couch. The C50 is a more conventional examination light, being suited to a wide variety of examinations and general practice. The C35 offers a unique spot/flood feature which lets the doctor switch between small/large examinations at the touch of a button, whereas the C20 is a low-cost, high-reliability light.

Each of these models can be mounted on a mobile base, wall, rail or ceiling as necessary. A rail-kit can be added to the C50, C35 and C20 models for increased mobility. There are also numerous options for wiring, and an optional Daylight Colour Filter. For a full list of the 100+ models available you can visit the Brandon Medical website on www.brandon-medical.com or call us for a brochure.

Managing Director Graeme Hall explains how Brandon have simplified product selection “we have developed a series of very simple choices for the customer to help select their best lighting for them. You can specify the light head, mounting, wiring and filter options which are right for you, and we can manufacture a product to match.”

Brandon believe they have an examination light for every application – why not test them? Brandon Medical Co Ltd, Holm Well Road, Leeds. LS10 4TQ. Tel: 0113 277 7393. Fax: 0113 272 8844. www.brandon-medical.com
Tyco Healthcare publish an illustrated guide to patient temperature management

Hypothermia affects c. 70% of all surgical patients. It can also lead to myocardial ischaemia, a reduction in the body’s resistance to infection, an increase in oxygen consumption and delays in recovery, which raises costs.

The Critical Care Division of Tyco Healthcare is a leading manufacturer of specialised critical care products including temperature management and monitoring.

Tyco Healthcare realise that there are many ways of managing patient temperature and have developed an illustrated guide to their complete portfolio of temperature management products, which include the Warmtouch® convective air warming device, the Warmflo® Blood and fluid warmer as well as a diverse range of Mon-a-therm temperature sensors and interface cables.

The brochure has been developed to enable customers to tailor their approach to temperature management and offer cost effective solutions in line with the Volume Related Discount Structure now available via NHS Logistics.

The brochure provides pictures of each product mentioned, along with their descriptions and independently verified performance graphs. Instructions for use, ordering information and dimensions and specifications/sizes are also included, alongside a useful list of references.

For your copy of the temperature management brochure from Tyco Healthcare, or for any information on the products mentioned above, please telephone the company on 01329 224306.

Tyco Healthcare: You may not know everything we make, but everything we make is critical.
Concerns over vCJD (so-called ‘human mad-cow disease’) and hospital contamination have highlighted a growing need for single-use surgical disposable suction tubes; the cost-effective alternative to risky re-usable instruments.

Dried blood in a ‘clean’ suction tube

Disposable suction tubes; the cost-effective alternative to risky re-usable instruments.

Professor Collinge, head of the Medical Research Council Prion Unit at St Mary’s Hospital, London, strongly recommends “using disposable surgical instruments for operations that might involve a risk of transmission”.

These concerns over hard to clean surgical instruments led the UK-based Single Use Surgical Ltd develop the widest range of single use fine suction tubes. Trials of the product have received the stamp of approval from practitioners using the suction. Comments included praise for the user-friendly design and the improved suction performance as compared to reusable devices.

Response form the market has been enthusiastic, with good product take-up. Ross Jackson, Sterile Service Manager at Sheffield Teaching Hospital said “This has showed one of our most troubling cleaning problems”. Surgeon feedback from Birmingham Teaching Hospital included “fits hand well giving good tip control” and “better suction than re-usables and fewer blockages”.

For further information contact: Alexandre Georjon  Single Use Surgical
Tel: +44 (0) 1226 732 333 E-mail: export@susl.co.uk
For further information, or a trial please call 01235 547036

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*Model shown: Crystal™ Metal, Macintosh Size 4*
RenPaste epoxy Seamless Modelling Paste, XD 4618, has been used to produce the patterns for the manufacture of a set of large magnetic resonating shrouds. These are used in the latest body scanning equipment being developed by a large PLC.

The patterns were made by Lofting Services, based in Audenshaw, Manchester, who specialise in offering high tech industrial design and tailor-made rapid tooling solutions for manufacturing industries. Materials for the project were manufactured by Huntsman Advanced Materials and supplied by John Burn & Co. The project was completed from concept to finished pattern in just eight weeks.

Lofting Services originally considered two systems for this project – a two-part machine applied paste system in either PU or RenShape epoxy XD 4618 SMP, but found the PU system was inferior in terms of workability and its applicator caused reliability problems with the machine. By contrast the RenPaste epoxy system machine applicator was easy to operate and clean, and the drums supplied provided a larger volume of material applied before having to be changed over.

To make the shroud patterns, Lofting Services’ engineers worked from CAD data to produce MDF hollow armatures of the pattern, clad with a medium density PU foam. The foam was then machine cut back to approximately 20mm undersize, allowing for a 30mm application of RenPaste XD 4618 SMP.

After curing for two days at room temperature, the XD 4618 SMP was machine finished to the exact final dimensions for the pattern.

“The RenShape SMP is an easy material to apply and to machine,” said Dave Fielding, Sales Director at Lofting Services. “It also produces only a low amount of airborne particles when used with our powerful CNC milling centers. This process can offer huge weight savings over conventional tooling materials on large patterns and so ultimately deliver cost savings for our customers as well.

The end result of this project was a seamless model of smooth ergonomic design with a superior finish – and aesthetics were one of the most important features of the project, as patients need to feel reassured when entering a machine with two large and very powerful vertically opposed electron magnets.”

Senior staff working in the National Health Service in Wales lack confidence in the system, new research says. A survey by the Welsh Institute for Health and Social Care said some managers had little faith in Welsh Assembly Government policies on waiting times. But the report warned that comparisons with England could be misleading.

Health Minister Brian Gibbons said the survey of 133 people was “just a snapshot”. It provided useful information to the debate on the health service, but no firm conclusions could be drawn from it, he added.

The conclusions of the survey were based on the views of 133 people - more than 100 of them leaders of the Welsh NHS responsible for the future of health and social care. A total of 250 people were asked to take part in the research, and 53% responded. Those who replied were allowed to remain anonymous, with the aim of encouraging a full and frank public debate on the health service. For instance, two-thirds of those who took part in the survey said they would prefer to trust the NHS in England or Scotland with the care of a loved one.

But 64% would still choose to work in the Welsh NHS. Reasons were not given but it could be because of familiarity with the service or the area, or because the English health service has a reputation for being over-driven with targets and ruthlessly performance managed.

“Lack of confidence’ in Welsh NHS

RenPaste XD 4618 is derived from Huntsman Advanced Materials highly successful SV/ HV 4503 seamless modelling paste. With its enhanced strength, superior surface finish that minimises final hand polishing, and its competitive price pointing, RenPaste XD 4618 is particularly suitable for specialist manufacturing applications.

For further information about the complete Huntsman Advanced Materials range go to: www.huntsman.com and click on advanced materials.

For information about John Burn & Co and their services go to www.johnburn.co.uk or telephone 0121 508 4144

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Sales enquiries should be directed by mail or e-mail to: The Product Support Help Desk Huntsman Advanced Materials (UK) Limited Duxford, Cambridge, CB2 4QA England

Telephone: 01223 466300
Fax: 01223 235499
Email: renshape_europe@huntsman.com

When responding to articles please quote "OTJ"

RenPast® MAKES LIGHT WORK OF BRAIN SCANNER SHROUDS

RenPaste SMP delivers significant weight, time and cost savings on patterns for Magnetic Resonating Shrouds

When responding to articles please quote “OTJ”
New, enhanced, fifth generation, handheld pulse oximeter from Tyco Healthcare

The Critical Care Division of Tyco Healthcare is a leading manufacturer of specialised critical care products, including pulse oximeters with OxiMax® technology. Now the company has launched the OxiMax NPB40, which is an enhanced version of the existing handheld Nellcor NPB-40 oximeter.

The OxiMAX NPB40 handheld pulse oximeter encompasses fifth generation OxiMax technology and is intended for non-invasive spot check measurement of functional arterial oxygen saturation (SpO2) and the pulse rates of adults, paediatric and neonatal patients. It can be used for attended monitoring in hospital, emergency, transport and mobile environments, as well as at home. It is compatible with all OxiMax sensors, and its event data is readable on other OxiMax monitors with the ability to display event data.

Compared to the earlier NPB-40 oximeter, the OxiMAX NPB40 features a 7-button configuration membrane panel, a real-time clock and a bidirectional IrDA capability. It is launched with an LCD display for SpO2 and BPM (beats per minute) readings, together with tactile feedback membrane buttons and a number of LCD indicators. These include alarm silence, pulse search, low battery, motion and print indicators.

The new OxiMAX NPB40 pulse oximeter from Tyco Healthcare is lightweight and very compact (2.95” x 6.20” x 1.50”). It supports a 7-button configuration membrane panel, a real-time clock and a bidirectional IrDA capability. It is launched with an LCD display for SpO2 and BPM (beats per minute) readings, together with tactile feedback membrane buttons and a number of LCD indicators. These include alarm silence, pulse search, low battery, motion and print indicators.

The new OxiMAX NPB40 pulse oximeter encompasses fifth generation OxiMax technology and is intended for non-invasive spot check measurement of functional arterial oxygen saturation (SpO2) and the pulse rates of adults, paediatric and neonatal patients. It can be used for attended monitoring in hospital, emergency, transport and mobile environments, as well as at home. It is compatible with all OxiMax sensors, and its event data is readable on other OxiMax monitors with the ability to display event data.

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The OxiMAX NPB40 is launched with a comprehensive operators manual, available in 19 languages. For information on this new, enhanced handheld pulse oximeter, please telephone the Tyco Healthcare customer care team on 01329 224306.

Tyco Healthcare: You may not know everything we make, but everything we make is critical.

REVIEW PANEL MAKES PROGRESS ON HELPING THE NHS TO FIGHT MRSA

Health Minister, Lord Warner, announced on the 4th February 2005, the third wave of Rapid Review panel decisions on new equipment, materials and other products that can help NHS staff improve hospital cleanliness, hygiene and infection control.

Highlighting the products already approved by the panel and now available to the NHS, Lord Warner said: “In the battle against MRSA we will leave no stone unturned. Lots of claims have been made for all types of products. Thanks to the excellent work of our Review Panel we now know what will definitely work, what will need more testing before being used in the NHS and what has little to offer in relation to MRSA.”

“A silver coated hydrogen catheter with a silver alloy which reduces urinary tract infections has now been placed on the direct supply contract by the Purchasing and Supplies Agency (PASA) and its cost effectiveness is being evaluated. A barrier cream allowing frequent use of gloves and disinfectant hand rubs without allergy or skin damage will now be subject to a formal tender process.

“The HPA panel has looked at fifty nine types of equipment, materials and other products so far and these two have shown benefits that should be available to the NHS. A further ten have potential value and in use trials are now needed in an NHS clinical setting. We will continue to monitor the latest developments in improving hygiene and infection control so we can equip the NHS with the best advice, the latest equipment and the cleverest science in the fight against MRSA.”

The Rapid Review panel was set-up by the Health Protection Agency at the request of the Department of Health to provide a prompt assessment of new equipment, materials and other products or protocols that may be of value to the NHS in improving hospital cleanliness, hygiene and infection control.

The rapid review panel is made up of top UK scientists. It is set to meet again in a months time where it will look at the next wave of potential products that could help fight MRSA.

For a full list of the equipment, materials and other products that have been assessed by the HPA Rapid Review Panel visit: http://www.hpa.org.uk/infections/topics_az/rapid_review/default.htm
Is My Bum Hanging Out in This?

Even a good friend would have to say ‘yes’!

The hospital gown must surely be up there with cardboard drinks cartons in the league of impractical designs? Stranded in a cramped hospital cubicle, anxious and possibly less than agile (you are in hospital after all) you must grapple with an item of clothing that is thoughtfully designed to fasten at the back. With your arms wound behind you head, your fingers fumble awkwardly at two thin strands of tape which you have to, by some stroke of genius, unite together.

Once ‘wearing’ (in the very loosest sense of the word) the gown you must then negotiate packed waiting rooms of onlookers, busy wards or bustling corridors; you’re feeling self conscious, embarrassed and exposed and, yes, your bum is hanging out for all to see.

Medical innovators, Synerception Ltd, felt that the undignified, bare-backed hospital gown was just no longer acceptable.

“Being in hospital is often a stressful time; the indignity of the bare-backed style hospital gown can make patients feel unnecessarily vulnerable and uncomfortable. We wanted to create a discreet, comfortable outfit that would help patients to feel at ease but which was also practical and functional for medical care.”

Their solution? The Surgisuit Patient Dignity Gown; a T-shirt and shorts combo that not only keeps you snugly covered up, but also has some brilliant features woven in. A nifty network of Velcro openings allows doctors to access specific parts of the body whilst the rest of the garment remains safely in place. So, true to its name, the SurgiSuit can guarantee patient dignity even during invasive tests or operations. A full length, wrap-over version is also part of the SurgiSuit range, designed for those whose religion or culture requires them to be completely covered.

SurgiSuit balances the needs of medicine with concerns of the public and looks set to be a popular solution - a classic example of one of those ‘why didn’t someone think of it before?’ success stories.
The Complete Package

The South Quay Travel Club is a refreshing way to make substantial savings on holidays and travel related services. Offering two levels of membership, customers are assured of outstanding value and quality of product and service.

The Operating Theatre Journal (OTJ) has signed up to the travel club giving YOU, its readers, an immediate discount of 2.5% on holidays and charter flights.

Log onto our website, www.sqtclub.co.uk, using the Username: OTJ and Password: Lawrand, and see how much you can save.

PLUS, 2 lucky readers can win FREE upgraded membership for one year, giving access to further savings and benefits. Look on our website for the answer to the following question:

Which membership level gives a minimum discount of 5% on holidays and charter flights?

a) Silver b) Gold c) Platinum

Email your answer, name and contact number to admin@lawrand.com and two names will be selected at random on 25th March 2005.

Health Professions Council election scheme revealed

The Health Professions Council (HPC) recently unveiled the scheme for the election of its new Council to be held over the spring of 2005. Having received Parliamentary approval for the Rules, the scheme will see over 150,000 health professionals from 13 health professions vote for their professional members on Council.

The HPC has been running for four years now (one year in shadow format) and July 8th 2005 will bring to an end the term of office of the current Council. All 40 members of Council, including the 15 alternate professional members will stand down. Those professional members who want to seek re-election will stand along with any other individuals wishing put themselves forward.

People wishing to stand for election as a Council member will need to be nominated by 6 fellow health professionals all of whom must be on the same part of the HPC register. The nomination forms along with further information on the election scheme will be mailed to all 152,500 health professionals on the HPC register in mid February 2005.

The election itself will take place in late April and May 2005. The results will be posted on the HPC website in early June 2005 with the new Council elected for the first time formally on Tuesday July 12th, at Park House in London.

People wishing to stand for election themselves are encouraged to look at the HPC website for information regarding the original consultation on the scheme, feedback received and also the election scheme rules in full. www.hpc-uk.org/election05

For further information, please contact Niamh O’Sullivan, Secretary to the Council on 020 7840 9711 or email niamh.osullivan@hpc-uk.org

JOBS AVAILABLE WITH MEDECINS DU MONDE: (FROM 27 JANUARY 2005)

The jobs below represent our most urgent needs for English-speaking staff to volunteer for our long-term healthcare programmes around the world.

Due to the high level of interest of volunteers wanting to work for us with our tsunami emergency programmes, we are receiving less applications for our long term projects. We are no longer recruiting for the tsunami emergency at present (but this may change).

1. Operating Nurse in Axum, Ethiopia (for our surgery training programme).
   From July 2005 for a minimum of 6/8 weeks.
   Experience in training staff is required.

2. Medical HIV Coordinator in Mekelle, Ethiopia.
   From March 2005 for one year.
   Experience in prescription of ARVs is necessary.

3. General Co-ordinator in Georgia.
   ASAP for 6 months.
   (The current co-ordinator is leading one of our teams in Indonesia).
   Experience required in public health/ team & project management/ tense security environments.

4. Medical co-ordinator in Egypt, ideally female for our reproductive health programme
   (Can be Doctor or Paramedic).
   From March 2005 for 4 months to one year.

5. General HIV coordinator in Burma (can be Doctor or non-Doctor).
   From April 2005 for one year.
   Experience required in the HIV field / managing big programmes and teams/ liaising with various donors/ managing big budget/ fund raising and geo-political analysis.

6. HIV Doctor in Papua.
   From March 2005 for 4-6 months.

   From May 2005 for 4-6 months.

For full job descriptions, please contact us via E-mail: recruitment@medecinsdumonde.co.uk Or by Telephone on 0207 516 9103.

CLIMB THE DIZZY HEIGHTS OF MOUNT KILIMANJARO

Ever wanted to travel further than the local shops? Ever had the desire to push yourself to the limit? Then trek Mount Kilimanjaro - and raise money for a worthy cause.

The British Lung Foundation (BLF) is looking for dynamic, adventurous types ready to take on a BLF place in its Mount Kilimanjaro Trek from 7-16 October 2005.

The highest freestanding mountain in the world, Kilimanjaro is also the highest mountain on the African continent. This trek takes the less-trodden Machame route. We pass through thick forest and moorland en route to the highest peak, Uhuru Peak. This is a challenging trek at altitude, climbing one of the most impressive and well-known mountains in the world.

Anyone who thinks they’re up to the challenge can reserve a place for £199 and must then raise a minimum of £2,600 - in return you’ll have a truly once in a life time experience.

If anyone would like to be part of Team BLF, please contact: 0207 688 5581 or email events@blf-uk.org.
Silver Knight™
Leading the fight against hospital infection

Now available in **eleven** different breathing systems

**Now tested against five HAIs**

The Silver Knight breathing system range from Intersurgical has proven effectiveness in the fight against Methicillin Resistant *Staphylococcus aureus* (MRSA), but also several other Hospital Acquired Infections (HAIs): *Staphylococcus epidermis*, *Pseudomonas aeruginosa*, *Klebsiella pneumoniae* and *Acinetobacter Sp.*

The Silver Knight range uses silver ions to disrupt the normal enzymatic activities of bacteria. Silver Knight functions as a safe, quick and effective catalyst to inactivate pathogenic bacteria and prevent their proliferation.

**More quality, choice and innovation from Intersurgical**

For more information on the Silver Knight range including Test protocol, Questions and Answers and Product Information Sheet visit [www.intersurgical.com/silverknight](http://www.intersurgical.com/silverknight)