

Professor of Surgery
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Dear Mr. Taylor,

Thank you for your letter. The following is a short report covering the points you raise which I hope will be of use to you.

1. Introduction

The infrared contact coagulator is a novel method of producing haemostasis, permitting application of the infrared probe to a relatively large area. Access to difficult points can be made by choosing an appropriate probe and the area dealt with at each application is larger than that possible with conventional diathermy.

2. Patient selection

I have used the probe in cases of liver surgery for trauma to the liver, portal hypertension, shunt procedures and especially in liver transplantation.

3. Patient medical history - as outlined above.

4. Method and materials

The oozing surface is swabbed and the probe applied in contact with the surface and using the self-timing switch so as to prevent charring. The switch is activated by a foot pedal. Alternatively, the probe can be used to coagulate small vessels, for example in the mesentery or hepatic ligaments before these are divided.

5. Coagulation probe used

All available coagulation probes have been used but the straight and right-angled large diameter applicators have been found to be most valuable in my practice.

6. Surgical procedures Detailed above.

2.

7. Duration of coagulation - Controlled by automatic switch.

8. Results

The infrared coagulator produces efficient haemostasis and it achieves this more quickly than conventional methods. It is a useful instrument in cases of portal hypertension where access to the peritoneal connections of the liver is difficult.

9. Success of coagulation compared with other methods

As detailed above.

10. Conclusions

The diathermy probe is an extremely valuable instrument to have available for use in difficult or dangerous surgery, particularly that involving the liver.

Yours sincerely,



Sir Roy Calne

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