TECHNICAL TIPS

Spreading the feet for bilateral surgery

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Bilateral hallux valgus surgery presents difficulties when using a standard operating table. Using a vein board for the feet, we constructed a wider operating field. This enhanced space also allows simultaneous operating by two surgeons or closure of the first foot by an assistant while the surgeon starts the second foot operation, thus decreasing anaesthetic and theatre time. The vein board is compatible with all types of operating tables. The board is positioned at the foot end following patient transfer. No disadvantages of this technique were encountered and the only contra-indication is a stiff hip. We recommend this technique for simultaneous bilateral foot surgery.

Cleaner, dryer and more comfortable: the use of collar-and-cuff foam in neighbour strapping

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Neighbour strapping is used for minor fractures and dislocations of the hand; the injured digit is splinted to its neighbour, with padding between the fingers to ensure alignment and comfort. Surgical gauze is customarily used for padding, but leads to skin maceration when wet. Removal is painful and allows the fracture to move. Collar-and-cuff foam (Fig. 1) provides the ideal solution; cheap, clean, comfortable, and quick-drying, it ensures that personal hygiene will not compromise comfort or fracture stability. We

Figure 1 Collar-and-cuff foam and its application.

found 1 cm² cut from the roll to be the ideal size. We recommend collar-and-cuff is used in the first instance.

Abduction pillow technique

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Psoas and adductor releases are common surgical procedures in the treatment of cerebral palsy. Postoperatively, the patient is positioned in abduction. A number of abduction pillows are avail-

Figure 1 Use of normal pillow in patient abduction.

able commercially. However, a normal pillow placed inside a stockinette with two holes cut out as spaces for the legs can provide a cheap and functional alternative. The additional advantage of this system is the patient is immobilised with the pillow which cannot displace.

Use of a peel-away trocar sheath to assist suprapubic catheter replacement

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Suprapubic catheter replacement, particularly after recent insertion, can be difficult and may be complicated by bladder retraction and loss of the track. We present a simple technique to aid catheter replacement using the peel-away trocar sheath found in most suprapubic catheter sets (Fig. 1). The patient is given prophylactic antibiotics and prepared using sterile technique. The sheath is placed around the existing catheter after removal of the peel-away section (Fig. 2). The sheath is then advanced 2–3 cm into the bladder using lignocaine gel for lubrication. The existing catheter can then be exchanged safely, followed by removal of the sheath.

Figure 1 Typical suprapubic catheter set.

Figure 2 Peel-away trocar sheath.

Positioning for tendo Achilles repair

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The tendo Achilles is prone to rupture in the middle-aged population. The ruptures can be treated surgically or non-operatively and surgical repair has been noted to be a safe option. The risk of re-rupture is less in patients undergoing surgical repair. Surgical repair is usually carried out with the patient lying prone or lateral. The prone position is potentially more demanding for the anaesthetist. We use a position called the 'figure-4 position' as shown in Figure 1. In this position, the patient lies supine with the leg flexed between 60–80° at the knee and placed over the other leg in a figure-4 position. We have operated on over 25 patients using this technique with a posteromedial incision over the tendo Achilles rupture area and have not encountered any difficulties during the procedure.

Figure 1 The figure-4 position for tendo Achilles repair.

The bagpipe irrigation system

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Numerous techniques have been described with which to irrigate wounds. Some designed for use in theatre utilise specifically designed equipment whilst others are improvisations and modifications of equipment designed for other purposes.¹ We have been using one such method, which allows controlled, directed