RafflesHospital

PRESS RELEASE 12 April 2007

Nipping the pain in the butt

A new surgery to treat piles is now available and this new procedure promises to be more affordable and without the side effects associated with the current Gold Standard – the stapler haemorrhoidectomy.

Piles or haemorrhoids affect as many as one in two persons in their lifetime. These range from small first degree piles to troublesome prolapsed piles.

Many methods have been developed to treat bleeding piles. However, recurrence rates remain high. The current Gold Standard is stapler haemorrhoidectomy. Although it is quick to perform and virtually painless, it remains an expensive procedure – costing around S\$5,000.

There are also side effects. Some patients experience a sense of urgency & incomplete emptying up to six months following stapler haemorrhoidectomy.

A new and improved procedure is ligasure haemorrhoidectomy. The ligasure method fuses vessels together to form a seal.

Using the same principle as traditional haemorrhoidectomy, piles are isolated and the feeding vessels are identified. The ligasure vessel sealing device is then applied across these vessels & these are sealed. The ligasure device can seal vessels up to 7 mm in diameter. This ensures that bleeding is stopped completely and there is no blood loss.

The ligasure device has been widely used in the field of Hepato-biliary surgery and laparoscopic surgery. It has just been employed in the treatment of piles. Studies have shown that it is beneficial for haemorrhoidectomy.

Ligasure haemorrhoidectomy takes less than 15 minutes to perform. There is hardly any blood loss and no open wounds.

It is also cheaper than stapler haemorrhoidectomy, costing 10% less than stapler

haemorrhoidectomy.

Ligasure haemorrhoidectomy is ideal for patients who have put off piles surgery for fear of

pain and costs. It is a suitable alternative for many patients who find stapler

haemorrhoidectomy too expensive.

Dr Ng Chin, Consultant General Surgeon at Raffles Hospital, is one of the few doctors in

Singapore who can perform this breakthrough surgery. To date, he has performed more than

a few hundreds ligasure haemorrhoidectomy on his patients.

Said Dr Ng: "As we work on the technique further, we believe the pain, currently tolerable,

could be brought down even more."

You are cordially invited to an interview with Dr Ng Chin, who will introduce the ligasure

haemorrhoidectomy method, as well as discuss treatment options for piles.

Dr Ng Chin set up the Colorectal Surgical service at Changi General Hospital (CGH) and

was Director of the Colorectal Surgical Service there before joining Raffles Hospital. He also

perfected the use of ligasure haemorrhoidectomy during his time in CGH.

You are cordially invited to attend a press conference by Dr Ng Chin on ligasure

haemorrhoidectomy. Dr Ng will discuss the use of ligasure haemorrhoidectomy for

treatment of piles. You will also get to interview a patient who has undergone piles

removal using the ligasure method.

Details of the Press Conference is as follows:

Date: 17 April 2007 (Tuesday)

Time: 10am

Venue: Level 2, Raffles International Patient Centre, Raffles Hospital

For more information and to confirm your attendance, please contact:

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APPENDIX A

Stapler haemorrhoidectomy

This is the current Gold Standard for treatment of piles.

In this procedure, a specially designed circular stapler knife (ETHICON) is used. The stapler cuts a ring of anal mucosa (mucous membrane) with part of the piles but the most important part is the subsequent stapling of the anal canal which "lifts up" the prolapsing mucosa (including the piles). Over a period of a few weeks, fibrotic scar develops under the mucosa and prevents further prolapse and distention of piles.

Several studies have shown that Stapler Haemorrhoidectomy has exactly the same effectiveness as excisional haemorrhoidectomy with one additional great advantage: there is much less post-operative pain. This results in quicker return of the patient to work and normal activities, usually 3-7 days.

In certain cases after stapled haemorrhoidectomy, there can be a sensation of urgency which some patients will find annoying. Other complications that may also occur include bleeding or blood stream infection (sepsis).

If there is no concurrent change in diet and lifestyle there is a 20% chance of recurrence within 5 years.

Ligasure Haemorrhoidectomy

The latest device to be introduced in the treatment of haemorrhoids is the ligasure vessel sealing system which fuses the vessels together into forming a seal.

Ligasure has applications in all kinds of open and laparoscopic surgery and has recently been introduced with encouraging results in haemorrhoid surgery.

Advantages of ligasure haemorrhoidectomy:

- Day surgery procedure
- Fast < 15 minutes
- No blood loss
- No additional haemostasis or stitching required
- Minimal pain
- Quick recovery < 2 weeks
- No wounds to dress
- No collateral damage to surrounding structures
- Reduces recurrence
- No post op bleeding
- Cheaper than stapler haemorrhoidectomy
- No post operative complications e.g. urgency & incomplete emptying

Appendix B

Dr Ng Chin, Consultant General Surgeon, Raffles Hospital

Dr Ng Chin graduated from the Royal College of Surgeons in Ireland in 1991. He obtained his postgraduate fellowship degrees from the College of Surgeons in Edinburgh and Glasgow. He pursued higher skills training at the Royal Brisbane Hospital Australia, under the renowned laparoscopic surgeon Dr Russell Stitz.

He set up the Colorectal Surgical service at Changi General Hospital and was Director of the Colorectal Surgical Service there before joining Raffles Hospital.

In addition to services in General Surgery, Dr Ng's specialty interest is in the field of Colorectal Surgery. He provides the following services:

- Assessment and treatment of abdominal pain, bleeding from the rectum, changes in bowel habit
- Diagnostic, therapeutic and screening colonoscopies
- Colorectal cancer screening
- FOBtest (fecal occult blood test) for early detection of colon cancer
- Stapler haemorrhoidectomy
- Ligasure haemorrhoidectomy
- Examination under anaesthesia
- Treatment of acute and chronic peri-anal infections
- Treatment of fistula-in ano
- Treatment of anal fissures
- Oncologic resection of colon cancers
- Laparoscopic cholecystectomies
- Laparoscopic inquinal hernia repair
- Laparoscopic ventral hernia repair
- Colon stenting for both benign and malignant disease
- Endorectal ultrasound

Dr Ng is a committee member of Society of Colorectal Surgeons, Singapore. He is also a member of the Asean Federation of Colo-Proctology.