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Milestone development in bowel cancer surgery in South Tyneside



In a milestone development, surgeons at South Tyneside District Hospital have achieved a major breakthrough in improving the outcomes for bowel cancer patients, with a patient being able to return home after a single overnight stay.

After close monitoring, grandmother Margaret Gregg, 77, of East Boldon, was able to leave hospital at 6pm on the day after her laparoscopic (keyhole) surgery.

Mr Arun Krishna, lead surgeon for colorectal cancer at South Tyneside NHS Foundation Trust, personally stayed in the hospital until midnight after Mrs Gregg's operation to ensure that her recovery was on course.

He said: "It is truly fantastic to be able to discharge a patient on the first post-operative day. This is a very rare occurrence following major bowel cancer surgery, not only in other surgical centres in the UK but also elsewhere in the world, including the USA. It is particularly remarkable in Margaret's case, given her age, but she is

very fit and active and has a really positive attitude. We were able to offer this only because of the unique package of surgical innovation and pre and post-operative assessment and care that we provide at South Tyneside.”

Mrs Gregg, who was a nurse, said: “The treatment I had was first class throughout and, once I knew I was going to be OK after the surgery, I was more than happy to come home – everybody likes to be in their own bed. Within a couple of days, I went for a little walk and I was soon out cycling again.”

South Tyneside NHS Foundation Trust Chief Executive Ken Bremner said: “Arun and his colleagues have set a new standard, which offers tremendous possibilities in terms of patient experience and satisfaction. I am very proud and grateful for all their hard work and dedication which is enabling us to offer local patients world-class services.”

Mrs Gregg’s case is expected to be just the first of many at South Tyneside District Hospital.

Mr Krishna, who was a Hospital Doctor of the Year winner in The Shields Gazette and Sunderland Echo Health Awards earlier this year, said: “Patient safety has to be our over-riding priority and the key is careful case selection. With our well-co-ordinated teamwork and thorough assessment process, I am confident that, in the future, we can select more patients who will be suitable for having a major bowel resection operation with only an overnight stay. This is wonderful news in terms of our patients’ experience and, by reducing length of stay in hospital in some cases, the Trust will have more money to invest in services and in further improving patient care.”

The latest achievement follows other advances in surgery for South Tyneside bowel cancer patients over the past five years that have led to the average length of stay reducing from 12 days to five days, which is one of the lowest figures in the region and compares favourably nationally.

The surgical team now regularly perform advanced keyhole procedures - carried out at only a few centres in the UK - some of which result in only a single 3cm scar and others no scar at all. Such minimally invasive techniques have a tremendous impact on the recovery of patients after surgery, allowing them to return home and resume their normal activities significantly earlier than if they had conventional surgery.

South Tyneside bowel cancer patients have also benefited from the introduction of STEP - South Tyneside Enhanced Recovery Pathway - a scientifically-proven care package designed to reduce pain, enhance mobility and facilitate early discharge after surgery.

Furthermore, they are given a gold standard test as part of their pre-operative assessment. Cardiopulmonary Exercise Testing (CPEX) was originally used in the training of elite athletes to see whether they were improving their fitness. In the hospital setting, it can help to determine a patient's fitness for surgery.

During the test, the patient exercises on a bike whilst wearing a mask and measurements are taken which provide information about the lungs, heart, muscles and peripheral circulation – the blood flow that reaches the upper and lower extremities of the body and the surface of the skin. Using the exercise bike mimics how the body will react post-surgery. It also provides information on the risks to the patient of having the operation and can identify other disorders or diseases, which may require the anaesthesia for the operation to be modified. Staff, including consultant anaesthetists and operating department practitioners, have been specially trained to take the measurements.

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Photo caption: Mrs Margaret Gregg with the South Tyneside District Hospital team, including Mr Arun Krishna, seated on the right

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