

CASE STUDY Reducing use of Harmonic Scissors

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Problem Statement

I regularly used the harmonic scissors for surgery, this practice has crept in over the years partly by staff opening the device as many surgeons use and partly having the perception that it made parts of the surgery easier

Additionally in the Directorate we have been supplied with disposable ligaclips and I have never really questioned whether there was an alternative

Intervention and Measurement

After engaging with Prof Mahmood Bhutta at the ENTUK Spring meeting in April 22, I felt empowered to make small changes to my own practice and to impress upon others why this was important not only form an environmental perspective but also form a cost perspective

Additionally I looked at 'low cost items' that I was using more frequently following covid, but had not used pre-COVID 19 such as plastic aprons and gloves.

The changes I made were:

1) To significantly reduce the use of the Harmonic scissors:

- I now use only for one particular operation which I may carry out 6 times a year and where I think it has an advantage due to speed and in reducing blood loss due to needing to cut through a large muscle
- A 'finger in the air' assessment might be that I would have used it once a week in a 40 week operative year (allowing for leave, etc.) that would be a saving of £19,320. (We pay £2900 for a box of 6 (incl VAT)). Has it made a difference to the speed of surgery and my outcomes not noticeably. Also, I am exploring the use of bipolar scissors to eliminate my harmonic use completely

2) I have switched from single-use ligaclips to those that are applied with the reusable applicator.

I am not sure of the cost of the applicator but it is not significant. We have 2 small and 2 medium applicators per case and use the small and medium ligaclips in the block

Here the savings are very significant:

- Disposable £56.68 for 10, with the reusable applicator £13.68/11.92 for 12 depending on size
- I would easily use 30 clips in a major H&N operation so a saving of £129 per operation. Probably used for over 50 operations a year £60k saving at least

3) Gloves - I only use for examining the mouth or for dirty wounds now and plastic aprons, maybe for suctioning of a patient and for dirty procedures which does not include fiberoptic nasendoscopy. I practice the 5 points of hand hygiene with washing and gelling my hands as appropriate

Challenges and Enablers

I am not sure I have met any specifically significant ones. I have found myself challenging others. My challenge is getting the buy-in from others who may be less motivated to change.

An enabling factor has been that one of my colleagues has adopted these practices. This helps drive change, and we are looking to involve more colleagues in these efforts.

There has been no push back from theatres who have been pleased to enable the change.