

# VASCULAR, ENDOVASCULAR, & GENERAL SURGERY

H. Charles-Harris, MD & Associates

A Center of Excellence

*A Surgical Newsletter Joining Physicians in Medicine and Surgery*



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*Questions?  
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Contact Us!*

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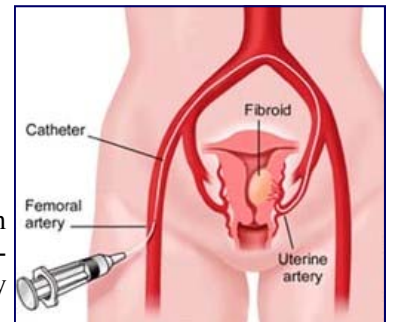
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## *News*

### **New Endovascular Method for Treating Painful Symptomatic Uterine Fibroids Now Offered with State-of-the-Art Technology**

Håkan Charles-Harris, MD, Chief of Surgery at North Shore Medical Center, is one of the few Vascular Surgeons in the United States to perform Uterine Artery Embolization (UAE) for the treatment of Fibroids. This procedure was FDA-approved in 2002 and Dr.

Charles-Harris' extensive vascular expertise gives him profound knowledge in this vascular area thus bringing him to introduce this procedure to his Endovascular repertoire. Under mild sedation and local anesthetic, a catheter is introduced into the femoral artery. The arteries that supply the blood to the uterine fibroid are injected with small particles which block blood supply to the fibroid. While uterine tissue remains unharmed, the fibroid shrinks. The patient experiences positive results including decreased menstrual bleeding, urinary frequency, pelvic pain, and pressure. This outpatient procedure is scheduled at the convenience of the women who have reported high satisfaction following the procedure with excellent results and much reduced need for major surgery such as hysterectomy.



## *A Case Study*

### **Large Abdominal Aortic Aneurysm Treated with Endovascular Stenting**

An 88 year old female patient presented with CAD and hyper-lipidemia, having been a heavy smoker for more than 60 years and known to be poorly compliant with medical treatments. While living at an assisted living facility, after falling and injuring her head, she was admitted for altered mental status and head trauma. Because of the trauma, surgery was consulted. Upon a detailed clinical examination, a pulsatile expansile mass was detected at the level of the umbilicus. A CT scan revealed a 10.5 cm abdominal aortic aneurysm. A more detailed CT Angiogram (CTA) revealed this same 10+ cm mass as well as severe advanced peripheral arterial disease (PAD) with minimal blood flow to the legs (left leg being worse.) This aneurysm was deemed amenable for endovascular stent graft repair. After obtaining appropriate medical and cardiology evaluations and routine pre-operative workup, the patient was scheduled for endovascular stent graft repair. The stent graft repair was done with great difficulty because the large size and the large amount of intra-aneurysmal thrombus, making it extremely technically difficult. After several hours, the procedure was successful, the patient tolerated the procedure very well and had no immediate complications. Of note, the large pulsatile expansile mass in the abdomen was noted to be absent at the conclusion of the procedure. The standard four-view abdominal X-rays showed perfect positioning of the graft and the thirty day protocol-mandated CT scan showed no trace of an endo-leak. *It should be noted that this is one of the largest aneurysms ever stented via endovascular stent repair, and the aneurysm could have ruptured at any moment, causing the patient's demise.*

The patient has subsequently developed gangrene from non-reconstructible PAD and has lost a lower extremity. She is ambulating with crutches, is awaiting her prosthesis and is in good spirits. ~ Dr. Charles-Harris

## Diagnosis in Detail

### Uterine Fibroid Embolization—In the News

The US Secretary of State Condoleezza Rice successfully underwent Uterine Artery Embolization for the treatment of painful fibroids in 2004. At least 25% of women in the United States have clinically symptomatic fibroids. Over 600,000 hysterectomies are performed yearly in this country. This invasive procedure can often be avoided!

### Diagnosing Fibroids

- Heavy, prolonged menstrual periods, unusual monthly bleeding, sometimes clots
- Pelvic pain and pressure
- Pain in the back and legs
- Pain during sexual intercourse
- Bladder pressure leading to a frequent urge to urinate
- Pressure on the bowel leading to constipation and bloating
- Abnormally enlarged abdomen

## Ask the Surgical Coordinator

### How is the primary care physician involved in the pre-op care of patients scheduled for surgery?

Many patients are apprehensive prior to having surgery. By working together with the primary care physician's office, we can help ease those worries and make the experience as smooth as possible. Each patient scheduled for a procedure will receive a package including their treatment plan and date for surgery. In most cases, we will refer your patient back to you for medical clearance. We appreciate that your office:

☑ Fax Pre-Op Labs, including Chest X-Ray & EKG Reports to our office at 305-696-4435 before 3:00PM on the day prior to surgery. It is at this time that we can also address any abnormalities appropriately in preparation for the procedure on the following day.

☑ Fax Authorizations/Referrals to our office at 305-696-4435 before 3:00PM on the day prior to surgery for verification by both our office and the surgical facility.

I'm available if there are any questions or concerns between 8AM and 4PM. My main goal is to make this process an easy one for both the primary care physician's office and our mutual patients. ~ Vivian

### Efficacy of Treatment

On average, 85% to 90% of women who have had the procedure experience significant or total relief of symptoms. The procedure is effective for multiple fibroids and large fibroids. This minimally invasive procedure offers significant advantages over hysterectomy while preserving the uterus.

### Undergoing the Procedure

The procedure is outpatient (going home either the same day or the following morning) and using state-of-the-art equipment, takes between 60-90 minutes. The patient resumes light activities after a few days and the majority of women resume normal activities within one week.

Along with a broad range of endovascular procedures, I am pleased to incorporate my experience in major abdominal surgery, vascular surgery, and minimally invasive procedures to ensure the best outcome for each patient who undergoes Uterine Fibroid Embolization. ~ Dr. Charles-Harris

## Surgeries Performed

- Uterine Fibroid Embolization
- Aortogram with Peripheral Angiograms
- Peripheral & Visceral Arterial Stenting
- Aneurysm Repair & Excision
- Abdominal Aortic Aneurysm
- Carotid Stenosis
- Vena Cava Filter
- Permanent Dialysis Access: AV-Fistula & AV-Graft
- Stomach Cancer & Disorders
- Colorectal Cancer & Disorders
- Breast Cancer & Disorders
- Gallstones & Cholecystitis
- Biliary Cancer & Disorders
- Pancreatic Cancer & Disorders
- Goiters & Thyroid Disorders
- Hernia Repairs
- Appendix Surgery
- Circumcision
- Hemorrhoids
- Anal Fissures & Fistulas
- Various Vascular Access Catheters & Infusion Ports

## Healthy Living - Benefits of Vegetarianism

Did you know? Studies have shown that a Vegetarian Lifestyle decreases the chances for Acute Appendicitis by 50% and Acute Cholecystitis (gallstones) by 30%. In addition, obtaining protein from sources other than meat (beans, legumes, tofu) decreases fat intake which clogs arteries leading to Peripheral Arterial and Cardiac Diseases. ~ Ardith

## Biodegradable Plug For Hernia Repairs

Dr. Charles-Harris has been incorporating the Gore Bio-absorbable Plug into his repairs of inguinal hernias. During the initial few weeks following the repair, the plug successfully dissipates the force of the hernia while the mesh incorporates itself into the body. It's ideal use is for all types of inguinal hernias. The patient recovers comfortably with less pain and excellent results including a significantly decreased chance of recurrence.



Plug



Mesh