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BIOGRAPHY

Ashley is the newly appointed Lead Perfusionist at Mid and South Essex Foundation Trust, where he has worked for the past ten years. He has an extensive career spanning multiple professions and continents. Ashley's primary focus as lead is to create a positive working environment and improve his teams wellbeing.

ABSTRACT

Percutaneous Aspiration Of An Infective Endocarditic Lesion Of The Tricuspid Valve Using The Extracorporeal AngioVac System. A Case Study And Introduction To The Technology From A Clinical Perfusionist's Perspective.

A 78-year-old lady was receiving chemotherapy treatment for breast cancer via a PICC line, when it became infected. This manifested into infective endocarditis of her tricuspid valve, with growth of a significant vegetative lesion that needed to be irradicated.

An 'AngioVac' as it's commonly referred to, is a minimally invasive procedure that negates the need for conventional open-heart surgery. An AngioVac system is a percutaneous aspiration device, which consists of a veno-veno circuit and filter, that can extract thrombus, emboli and vegetations. Using a suction catheter with self-expanding tip and a reinfusion cannula, a centrifugal pump action creates a negative pressure at the tip whilst continuing to circulate the blood. This enables the removal of infected vegetations and other similarly structured materials. The length of hospital stay and post operative recovery are significantly shortened with subsequent financial burden reduced.

More than one thousand cases are performed in the United States each year. However, this case study represents one of the first in the United Kingdom, which was performed at Mid and South







BIOGRAPHY

Mark is a member of the Hospital Liaison Committee for Jehovah's Witnesses. This global network of more than 2000 HLC's endeavours to create an environment of cooperation and understanding between hospitals and patients declining blood transfusion. It maintains a medical library of peer reviewed journals to support hospital services. And has a database of over 100,000 clinicians with experience in performing complex procedures without blood transfusion. Mark has made scores of presentations to clinical teams, has assisted with creating blood refusal policies and is available for consultation at any time. All HLC services are free of charge. In his spare time, he likes cycling and walking and has completed climbing the 214 fells in the Lake District and the national three peaks challenge.

ABSTRACT

Caring For A Patient Who Is A Jehovah's Witness — A Collaborative Approach

For various reasons Hospitals are finding a number of patients who request their treatment without blood transfusion. The majority of those who do so are members of the Jehovah's Witness faith. At times this can create a challenge for the clinical team and the patient. However, with a better understanding of the patients' wishes, a consent process which explores risks benefits and alternatives, even very complex surgeries are possible without transfusion.

The Hospital Liaison Committee has over 40 years of experience in providing support for patients who are Jehovah's Witnesses. Many are unaware that this support is for both patient and the clinical teams. The HLC have access to a medical library of peer reviewed journals on surgeries performed without transfusion as well as a database of over 100,000 surgeons with experience in providing treatment without transfusion. This support can be invaluable in planning surgery when a patient declines transfusion.