

Surgical helmets in Arthroplasty.

A personal journey of protection and progress.

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Dr. Thomas Düsing is a Senior Physician at St. Elizabeth Hospital in Leipzig, in the Department of Orthopedics, Traumatology, and Sports Medicine. He specializes in hip and knee replacement surgery with a focus on robotic-assisted procedures.

With over 20 years of experience as an orthopedic surgeon, I have witnessed the field evolve significantly—both technically and in terms of personal protection.

In the early years of my career, I used standard surgical face masks and protective glasses. Despite every effort, it was impossible to fully shield myself from blood and bone fragments during surgery. So, coming home with patients' blood in my face happened quite frequently. At that time one patient case occurred that profoundly impacted me: a postoperative infection with *Streptococcus oralis*—a bacterium commonly found in the human mouth.

I had to look for an opportunity to minimize two serious risks. The risk for surgical site infections caused by bacteria from my head or breath and the frequent exposure of my face and eyes to potentially infectious materials, carrying the risk of transmission of diseases such as hepatitis C or HIV.

These concerns prompted me to explore more comprehensive protective measures. Dr. Gotthard Knoll and I therefore decided to use T7 surgical helmets in all of our orthopaedic and robotic surgeries because we believe in innovation, improving work conditions and the optimization of OR workflows. T7 brings comfort, staff satisfaction and protection for everyone in the OR.

As we used T7 for hip and knee arthroplasty procedures, soon the helmet became an essential part of the daily practice—not only in elective arthroplasty but also in trauma cases involving larger fractures and sweating. The benefits were immediate and profound. I felt fully protected from exposure to blood and bone

fragments and I could operate with greater confidence, even at closer distance to the surgical field.

I also experienced improved comfort and physical ergonomics, particularly because I could raise the table to suit my posture without fear of compromising sterility or safety.

The integrated light source in the helmet freed me from relying only on fixed OR lights, allowing me to better focus during the procedures. Knowing that I am protected has not only enhanced my concentration during surgery but has also given me peace of mind as a husband and father of three. This is not just about my own safety, it's about responsibility. A responsibility to protect myself, my team, and ultimately, my patients.

Over the past seven years of continuous helmet use, I've watched with interest as innovation in this space has progressed. This model, the Stryker T7, is light, quiet and comfortable to use.

I'm aware that many surgeons still operate without a helmet. I cannot say why. I was fortunate to have early access, frequent use, and the opportunity to educate myself on the literature and common-sense reasoning that supports its value.

While it's difficult to scientifically prove that a surgical helmet prevents infections with absolute certainty, it is logical to assume that reducing contamination of the surgical field by airborne or contact-transferred particles can only help.

I hope this story encourages more surgeons to consider surgical helmets, not only for their patients' safety, but for their own health, their families, and their future.



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DISCOVER T7 SURGICAL HELMET

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stryker

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