No.3/-/April/2024



NGUYEN ĐAO UYEN TRANG, MD, MSC

JOINS THE PSYCHIATRY UNIT - INTERNAL MEDICINE DEPARTMENT AT **FV HOSPITAL**



guyen Dao Uyen Trang, MD, MSc, graduated with a Bachelor's degree in General Medicine from the University of Medicine and Pharmacy in Ho Chi Minh City in 2018. She excelled to become a resident doctor in the psychiatry department in 2019 and obtained her Master's degree in Medicine from the same university in 2021. Furthermore, Dr Uyen Trang actively updates her knowledge through continuous training courses in the field of psychiatry, both domestically and internationally.

Despite her young age, Dr Uyen Trang is deeply concerned about mental health and aims to provide patients with positive treatment solutions to improve their quality of life. She has advised, supported, and accompanied many patients dealing with insomnia-related issues. Additionally, she helps patients cope with stress, anxiety, environmental stimuli, and overcome these challenges on their own.

According to Dr Uyen Trang, mental illness is not as frightening and difficult to treat as many people believe because everyone faces psychological difficulties and challenges in life. The task of a psychiatrist is to assess the patient's condition and determine their origins, including psychiatric disorders, physical illnesses, or a combination of both. Treatment can then be administered through medication, psychotherapy, or referral to mental health counseling specialists or psychologists for specialised treatment if necessary.

Since April 2024, Dr Uyen Trang has officially joined the Psychiatry Unit – Internal $\label{thm:medicine} \mbox{Medicine Department at FV Hospital, specialising in the treatment of disorders such as:}$

- Sleep Disorders
- · Anxiety Disorders
- Depression
- · Obsessive-Compulsive Disorder
- Substance Use Disorders and Related Disorders
- · Bipolar Disorder
- · Geriatric Psychiatry
- Attention Deficit Hyperactivity Disorder (ADHD) treatment for individuals aged 7

Moreover, Dr Uyen Trang is a member of the executive committee of the Insomnia Association, the Vietnam Society of Sleep Medicine, and has presented valuable reports at national psychiatric conferences. She previously worked at Nguyen Tri Phuong Hospital from 2018 to 2023 and is currently involved in teaching at the University of Medicine and Pharmacy at Ho Chi Minh City.



To book an appointment with Nguyen Dao Uyen Trang, MD, MSc - Psychiatry Unit - Internal Medicine Department, FV Hospital, please call: (028) 54 11 33 33 - Ext 1541



NGUYEN THI NGOC BICH

SPECIALIST LEVEL I

TAKES UP THE ACTING HEAD OF THE GENERAL PRACTICE & **FAMILY MEDICINE AND** CHECK-UP AT FV HOSPITAL

ith the trust from the Board of Directors of FV Hospital, starting from 15th April, 2024, Dr Nguyen Thi Ngoc Bich, Specialist Level I, has assumed the position of Acting Head of the General Practice & Family Medicine and Check-up at FV Hospital. Dr Ngoc Bich will be replacing Dr Le Dinh Phuong. With over 16 years of professional experience, Dr Ngoc Bich has consistently demonstrated excellence in her role at the General Practice & Family Medicine Department of FV Hospital and throughout her career.

In her new role, Dr Ngoc Bich will play a key role in connecting the team and developing the General Practice & Family Medicine Department at FV Hospital whilst maintaining the reputable and reliable check-up centre and internal medicine treatment facility in Ho Chi Minh City and the surrounding areas.

Dr Nguyen Thi Ngoc Bich, Specialist Level I, graduated from the University of Medicine, Ho Chi Minh City, Vietnam in 2008 and obtained her Specialisation Degree Level I, Internal Medicine in 2013 from the same institution. Additionally, she has participated in advanced training courses in: Intensive Care, Cho Ray Hospital in 2015; Rehabilitation, Hospital for Rehabilitation and Professional Diseases, Ho Chi Minh City, Vietnam in 2020; Cardiopulmonary resuscitation (CPR), Trung Vuong Hospital, Ho Chi Minh City Vietnam in 2020; Haemodialysis, Nguyen Tri Phuong Hospital in 2022.



Before joining FV, Dr Ngoc Bich had worked at various healthcare facilities, including Internal Medicine Department, District 2 Hospital, HCMC, Vietnam (2009); Intensive Care Department, Cu Chi General Hospital, HCMC, Vietnam (2009-2015); Internal Medicine Department, Viet Phuoc Clinic, HCMC, Vietnam (2013-2015); Intensive Care and Emergency Department, Becamex International Hospital, Binh Duong, Vietnam (2015-2020); Intensive Care and Emergency Department, Hoan My Thu Duc General Hospital, HCMC, Vietnam (2020-2022). In August 2022, Dr Ngoc Bich decided to join the team of senior doctors at the General Practice & Family Medicine Department, FV Hospital.



To book an appointment with Dr Nguyen Thi Ngoc Bich, Specialist Level I - General Practice & Family Medicine and Check-up, FV Hospital, please call: (028) 54 11 33 33 - Ext 1526

Accident & Emergency: (028) 54 11 35 00







Tel: (028) 54 11 33 33

HIÊN TAI & TƯƠNG LAI

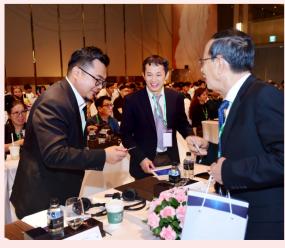
FV HOSPITAL ORGANISED THE FV – CVT CARDIOVASCULAR THERAPEUTICS SYMPOSIUM

TO UPDATE VALUABLE SPECIALTY INFORMATION FOR THE MEDICAL COMMUNITY IN VIETNAM.









n 20th April, 2024, FV Hospital successfully organised the 2nd FV – CVT Cardiovascular Therapeutics Symposium: The Present & Future of Cardiovascular Therapeutics, a noteworthy symposium that attracted the attention of the best cardiologists. This was the second time FV has hosted this symposium, at a large scale in terms of both quality and quantity.

In the first session on "General cardiovascular disease and PCI", leading speakers presented important topics such as: Comprehensive approach for hypertension control (Presented by Prof. Huynh Van Minh, MD, PhD – President of the Vietnam Heart Association (VNHA); Management of cardiovascular disease in patients with diabetes: when and how? The endocrinologist's viewpoint on it (presented by Assoc. Prof. Nguyen Thi Bich Dao, MD, PhD – Vice President of the Vietnam Association of Diabetes & Endocrinology (VADE)); Prevention and treatment of GI bleeding related to antithrombotic drugs (Presented by Assoc. Prof. Tran Thi Khanh Tuong, MD, PhD – Head of the Faculty of Medicine, Pham Ngoc Thach University of Medicine).

During the discussion on "When to use OCT or IVUS during PCI", Ho Minh Tuan, MD, PhD – Head of Cardiology Department, FV Hospital) emphasised the importance of choosing between OCT and IVUS techniques depending on each specific case to provide optimal benefits for patients while also saving costs.

At the end of session 1, Assoc. Prof. Dr Edward T. C. Choke – Senior Consultant Cardiologist, Sengkang General Hospital Singapore presented Atherectomy options for CTLI (Chronic limb-threatening ischemia). This condition refers to chronic, severe blockages in the arteries of the limbs that threaten tissue viability. The techniques presented are novel and have been recently applied in Singapore but are not yet available in Vietnam.

In the second session on "Cardiomyopathy and structural heart disease", Assoc. Prof. Pham Nguyen Vinh – Vice President of the Vietnam Heart Association

(VNHA) presented the diagnosis and treatment of dilated cardiomyophathy. Following that, Dr Nguyen Van Te – Head of Nuclear Medicine, FV Hospital, shared insights on "The role of nuclear myocardial perfusion imaging in ischemia and cardiomyopathies". He also introduced techniques for cardiac imaging using nuclear medicine methods and the practical clinical activities at FV. Additionally, Dr Te provided detailed insights into the diagnosis of cardiac amyloidosis using imaging techniques. Do Nguyen Tin, MD, PhD – Head of Cardio Intervention Centre, Children's Hospital 1, presented "Percutaneous closure of congenital and acquired ventricular septal defects."

Ho Minh Tuan, MD, PhD provided an overview of current and future trends in the treatment of structural heart diseases, emphasising the importance of modern techniques such as TAVI, mitraclip, IVC filters, and alcohol septal ablation for hypertrophic cardiomyopathy, as well as the application of ultrasound imaging techniques as important support information for interventions. Finally, Prof. Asri Bin Said, MD, PhD – Dean of Faculty of Medicine and Health Sciences, University Malaysia Sarawak), presentation was about "Transcatheter Aortic Valve Implantation (TAVI) technique"

The 2nd FV – CVT Cardiovascular Therapeutics Symposium: The Present & Future of Cardiovascular Therapeutics provided the highest quality forum for experts and doctors in the field of cardiology to exchange knowledge, share experiences, to update the latest information. From discussions on diagnosis, screening to advanced treatment methods, the speakers clarified significant advancements and challenges in caring for cardiovascular patients.

The success of this conference reflects FV Hospital's commitment to contributing to the improvement of treatment and healthcare for cardiovascular patients. FV hopes that the information and knowledge shared at the conference will help enhance the capacity of the medical community, thereby maximising benefits for Vietnamese patients.



To book an appointment with Cardiology Department, FV Hospital, please call: (028) 54 11 33 33 - Ext 1165, 1216

FV IMPLEMENTS

RADIOFREQUENCY ABLATION (RFA)

TREATMENT OF THYROID NODULES

t the beginning of 2024, the Thoracic, Vascular & Endovascular Surgery Department at FV Hospital implemented radiofrequency ablation (RFA) for the treatment of benign thyroid nodules. This method is intended for patients with benign thyroid nodules that are enlarged nodules causing aesthetic concerns, or are causing compression on the esophagus or trachea, that causes swallowing difficulties, coughing, discomfort, or hot nodules causing clinically evident hyperthyroidism. This new method provides patients with an alternative treatment option that is less invasive and gentle.

Treating thyroid nodules (goiters) with radiofrequency ablation (RFA) is a highly effective and safe method, used as an alternative to surgical thyroidectomy for patients with small benign nodules who do not wish to have surgical scarring around the neck area.

This method is now being applied worldwide with many outstanding advantages such as:

- Reducing the size of thyroid nodules without leaving scars, with the volume of the nodules decreasing over time.
- Greater safety due to ultrasound guidance, allowing doctors accurately targeting each millimeter of the thyroid nodule using the heat generated by radiofrequency waves.
- Minimally invasive surgery, with little or no pain during and after the procedure.
- Outpatient treatment, allowing patients to return home the same day without the need for hospitalisation.
- Preserving thyroid tissue and without affecting nearby nerves.
- Protecting healthy thyroid tissue, allowing normal function without the need for medication after treatment.
- Short recovery time, with patients able to return to normal activities almost immediately.
- Low complication rates.

According to Luong Ngoc Trung, MD, MSc, Head of the Thoracic, Vascular & Endovascular Surgery

Department at FV Hospital, benign thyroid nodules are usually clinically monitored and do not require intervention. Some enlarged nodules cause compression in the throat area that may necessitate intervention. Traditional open surgery or endoscopic surgery has been considered the basic treatment method for symptomatic nodules. However, the disadvantages of surgery include bleeding, damage to the recurrent laryngeal nerves, postoperative thyroid hormone deficiency, or scarring with open surgery. Therefore, the modern RFA technique has been widely adopted and can overcome some of the drawbacks of surgery.

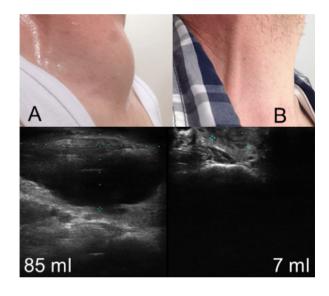
RFA for thyroid nodule ablation is a minimally invasive procedure guided by ultrasound imaging. With ultrasound, doctors can accurately deliver high-frequency waves to ablate (burn) the nodules, leading to their fibrosis (shrinkage), significantly reducing the average volume of the nodules and improving the patient's symptoms. Clinical trials in Italy and South Korea have shown that nodule volume can decrease by 50 to 80% in the first 6 months after RFA, with related thyroid nodule symptoms significantly improved or eliminated.

The duration of the procedure depends on the size of the thyroid nodule, typically lasting about 30 to 60 minutes. Local anaesthesia is administered around the thyroid gland, and then ultrasound precisely determines the position, size, and volume of the thyroid nodule before proceeding to ablate the nodules using high-frequency waves under ultrasound guidance. The ultrasound-guided needle emits radiofrequency energy to destroy the nodules. After the procedure, patients only need to rest for

about 30 minutes before being discharged, allowing them to eat, perform daily activities, and return to work as usual.

In cases where patients have thyroid cysts or mixed nodules, doctors may coordinate or use an absolute ethanol injection method into the cysts to achieve better treatment results. Importantly, there are no absolute contraindications to this method, with only a few considerations for specific cases such as pregnant women, patients with severe cardiovascular diseases, or patients with contralateral vocal cord paralysis.

FV Hospital is committed to updating and utilising the modern and advanced treatment techniques to provide patients with safe, effective, and minimally invasive treatment options, thereby enhancing their quality of life.





To book an appointment with Luong Ngoc Trung, MD, MSc - Head of Thoracic, Vascular & Endovascular Surgery Department, FV Hospital, please contact: (028) 54 11 3333 - Ext 1528



FV SAVES THE LIFE

OF A 17-YEAR-OLD

AMERICAN MAN WITH

A NECK PUNCTURE AFTER

A SEVERE ACCIDENT



To book an appointment with Phan Van Thai, MD, MSc, Specialist Level II - Head of General Surgery Department, FV Hospital, please contact: (028) 54 11 3333 - Ext 1250 atient F.T.G.K, 17 years old (American, residing in Ho Chi Minh City), was involved in a bicycle accident where the handlebar pierced his neck, causing massive bleeding leading to difficulty breathing and dizziness. He was intubated at a nearby medical facility and transferred to FV with significant blood loss and visual disturbance.

Immediately, FV Hospital activated a code red alert and mobilised personnel from various specialties to urgently respond to the patient. Patient F.T.G.K was promptly administered fluids, blood transfusion, vasopressors, underwent CT scans, and concurrently, surgeons prepared for immediate surgery.

Due to the complexity of the case and the patient's critical condition, the medical team at FV convened urgently and agreed on a surgical team comprising surgeons from the General Surgery; Thoracic, Vascular & Endovascular Surgery; Otorhinolaryngology; Gastroenterology & Hepatology; and Anaesthesiology & ICU Departments. Phan Van Thai, MD, MSc, Specialist Level II, Head of the General Surgery Department was the lead surgeon.

The patient's wound extended from the front of the neck with a wide, deep laceration, penetrating into the front of the cervical spine, while also crossing horizontally through the carotid sheath region, where many blood vessels and important nerves are concentrated. The patient had severed several branches of blood vessels originating from the carotid artery and jugular vein, and the wound continued to bleed after the temporary pressure dressing was removed; there was a laceration through the lower part of the pharynx - esophagus, approximately 4cm in length. Blood from the wound flowed through the laceration in the pharynx - esophagus, where part of it was aspirated into the lungs and the rest was swallowed into the stomach while also regurgitating into the throat.

The surgical team promptly ligated/clamped the bleeding vessels and applied pressure to the wound to control bleeding, and sutured



the laceration in the lower part of the pharynx - esophagus. Due to significant blood loss, during the surgery 1,500ml of blood was transfused. The surgical procedures were performed meticulously under the guidance of endoscopic assistance from physicians in the Otorhinolaryngology and Gastroenterology & Hepatology departments.

Looking back on the surgery, Dr Thai identified two major challenges in this treatment. Firstly, any delay could have put the patient at risk of death or serious consequences due to significant blood loss. Therefore, blood transfusion immediately upon receiving the patient and during the surgical procedure was essential. Secondly, the surgery was not straightforward because observing and detecting the wound, as well as suturing the wound, were not easy tasks. The wound was located in a contused and deeply injured area, and without close coordination and smooth endoscopic assistance from the inside, it would have been difficult to locate and accurately suture the wound.

After two hours, the wound had been handled well, and the function was ensured to operate normally. The patient was transferred to the ICU for monitoring. Thanks to the mobilisation of fast-response forces from various specialties, the complex surgery was successful, and the patient was discharged one week later.