No.4-May/ 2024

SPECIALIST LEVEL II

VO ANH KHOA MD, MSc

APPOINTED AS DEPUTY HEAD OF ANAESTHESIOLOGY, INTENSIVE CARE & PAIN MANAGEMENT DEPARTMENT

Starting from 6th May 2024, Dr Vo Anh Khoa officially assumes the position of Deputy Head of Anaesthesiology, Intensive Care & Pain Management Department. Dr Anh Khoa will assist Dr Ly Quoc Thinh in proposing strategic directions and managing activities for the Anaesthesiology, Intensive Care & Pain Management Department.

In his role as Deputy Head, Dr Anh Khoa will continue to develop and maintain the department's activities delivering the highest standards of care in accordance with JCI regulations. With the support of all members of the department contributing to the continuous success and development of the department, as well as providing patients with optimal quality care.

Dr Anh Khoa graduated from the University of Medicine and Pharmacy in Ho Chi Minh City in 2002 and continued his specialty training in emergency and critical care medicine at the University of Nantes, France from 2005 to 2006. He obtained his Master's degree in Medicine in 2011. In 2020, Dr Anh Khoa further received the specialist Level II degree in Anaesthesiology and Intensive Care Medicine from the Vietnam Military Medical Academy.

Dr Anh Khoa is known as one of the most experienced doctors at FV Hospital, specialising in anaesthesiology and intensive care. Prior to joining FV, Dr Anh Khoa worked for 11 years in the Intensive Care and Poison Control Department at People's Hospital 115. During that time, he consistently demonstrated outstanding leadership and supervised doctors in the treatment team.

At FV Hospital, Dr Anh Khoa has consistently performed well, establishing himself as an important member of the FV team. With extensive experience, solid expertise, commitment, and the trust of colleagues, it is hoped that Doctor Anh Khoa will continue to excel in both leadership and professional roles in his new position.





To contact Anaesthesiology, Intensive Care & Pain Management Department, FV Hospital, please call: (028) 54 11 33 33 – Ext 1175

LE NGO GIA THAO MD, MSc

JOINED THE IMAGING DEPARTMENT OF FV HOSPITAL



r Le Ngo Gia Thao graduated from the University of Medicine and Pharmacy in Ho Chi Minh City in 2017 and received a Master of Medicine degree in 2023 from the same university. Dr Gia Thao has actively participated in various fellowships courses in the field of imaging, such as Specialisation in Diagnostic Imaging, Echocardiography, Vascular Ultrasound and Foetal Echocardiography, and Fine Needle Aspiration (FNA) and Biopsy Techniques.

Dr Gia Thao shared that she chose the specialty of imaging after graduating as a general practitioner as she found importance and significance of this field in the diseases diagnosis and treatment. By using imaging techniques such as X-ray, ultrasound, computed tomography (CT), and magnetic resonance imaging (MRI), imaging doctors can analyse the morphology and function of internal body structures, providing crucial

information for disease diagnosis, leading to appropriate treatment selection.

Dr Gia Thao has seven years of experience in general ultrasound, paediatrics, obstetrics and gynaecology, interventional radiology, and diagnostic confidence ultrasound. She worked at Dong Nai General Hospital and various clinics in Ho Chi Minh City and Dong Nai. Dr Gia Thao always prioritises patient care and comfort and continues to update her knowledge and enhancing her professional skills.

Starting in May 2024, Dr Gia Thao officially joined the Imaging Department at FV Hospital, specialising in general diagnostic ultrasound, X-ray, CT, and MRI. In the future, Dr Gia Thao will also take on additional imaging techniques such as interventional ultrasound (thyroid and breast nodules biopsies).



To contact Imaging Department, FV Hospital, please call: (028) 54 11 33 33 – Ext 1201, 2222







TRANSCATHETER AORTIC VALVE

IMPLANTATION (TAVI) for a 67-year-old patient ••••

atient NTT (67 y/o, District 7, Ho Chi Minh City) has regained normal heart rhythm through Transcatheter Aortic Valve Implantation (TAVI) - a new method that does not require open-heart surgery, suitable for elderly patients.

At the beginning of 2024, patient NTT suddenly experienced severe pain after more than 10 years of living with aortic valve stenosis. The pain was piercing from the back straight to the front, feeling as if both shoulders were being squeezed together.

One month after the pain episode, Ho Minh Tuan, MD, PhD, Head of the Cardiology Department at FV Hospital, understood that the patient needed early valve replacement surgery because the aortic valve stenosis had progressed severely, posing a risk of heart failure, causing chest pain, difficulty breathing, fainting, or sudden death. Considering the patient's underlying conditions and fear of surgery, Ho Minh Tuan, MD, PhD recommended the Transcatheter Aortic Valve Implantation (TAVI). This is a safe method, does not require open-chest surgery. It has a high success rate (over 99%), and the durability of 10-15 years for the valve, meaning the patient can live with a healthy heart for 10 to 15 years. If undergoing open-heart surgery, the patient would need 6 months to recover, whereas with the TAVI method, the patient can resume normal activities after just 1 week.

This method was recently implemented at FV Hospital with the assistance of Datuk Dr Rosli Mohd Ali, a cardiac expert from Malaysia. The procedure took about 2 hours, with the doctor replacing the patient's narrowed natural aortic valve using a small catheter to deliver the new valve to the heart through an artery in the thigh. This process was performed under the guidance of cardiac ultrasound and advanced digital subtraction angiography (DSA) imaging systems in Cathlab at FV Hospital.





Dr Ho Minh Tuan stated: "The path of the surgery, if thoroughly evaluated, making the operation very safe. Therefore, preparation and planning are extremely important for a successful TAVI procedure."

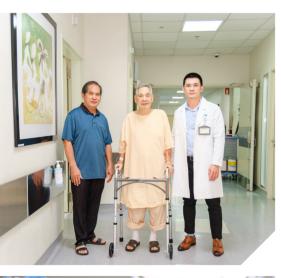
The surgery was successful, and patient NNT recovered quickly with a stable, gentle heart rhythm, no longer heavy and tired as before.

This is a modern technique performed in many countries, including Vietnam. FV is one of the few cardiac centres in Vietnam capable of implementing this advanced technique. FV hopes to provide opportunities to save the lives of many cardiac patients, especially those elderly, with poor health and multiple comorbidities who cannot tolerate open-heart surgery.



To book an appointment with Ho Minh Tuan, MD, PhD - Head of the Cardiology Department, FV Hospital, please call: (028) 54 11 33 33 – Ext 1216, 1165.







n early March 2024, patient HP (102 years old, from Can Tho), suddenly fell and it was diagnosed by local doctors suffered a severe fracture of the right femur neck. The family immediately transferred the patient from Can Tho to FV Hospital for treatment.

Upon examination, Dr Truong Hoang Vinh Khiem (Bone & Joint Centre, FV Hospital), identified the severe fracture of the femur neck would necessitate a hip replacement to help the patient regain mobility.

Due to the patient's advanced age and multiple comorbidities, this made the surgery risky which potentially may lead to heart failure or stroke. To ensure his safety, FV Hospital organised a multidisciplinary consultation to meticulously plan the surgery for the 102-year-old patient. Accordingly, the patient's cardiac condition was well controlled by FV's Cardiology specialists before surgery. Throughout the procedure, the anaesthesiologists closely monitored the patient alongside the surgeons to address any changes in the patient's vital signs. Thanks to this close coordination, FV Hospital confidently performed the major surgery on the 102-year-old patient.

Dr Khiem performed the removal of the fractured femur head and replaced it with an artificial hip joint. Fortunately, due to careful cardiac monitoring and anaesthesia, the surgery proceeded smoothly, with minimal blood loss using the "SuperPath" hip replacement technique.

Post-surgery, the patient received physical therapy to restore function and a safe return to independent activities. The physical therapy also helped the patient effectively manage pain, increase muscle strength, improve posture, enhance mobility, and perform daily tasks independently.

One week after surgery, the patient was discharged and returned for a follow-up appointment after four weeks, reporting the ability to resume his activities as before.

According to Dr Truong Hoang Vinh Khiem, hip fractures are common and increasingly prevalent in older adults. Addressing concerns about surgery for femur neck fractures in older adults, Dr Khiem emphasised: "Femur neck fractures are not the cause of mortality for patients; rather, the risk of death comes from complications associated with prolonged immobility, such as pneumonia or urinary tract infections."



To book an appointment with Vo Trieu Dat, MD, MSc - Obstetrics & Gynaecology Department, FV Hospital, please call:

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tatistics show that uterine fibroids are now a common condition for women of reproductive or perimenopausal age (20-50 years old). They account for 18-20% of gynecological conditions and show a trend towards younger ages. If not detected and treated in time, uterine fibroids can seriously affect women's health, causing chronic pelvic pain, anaemia, compression of surrounding organs, or torsion of submucosal fibroids.

In the Obstetrics & Gynaecology Department at FV Hospital, the recently implemented optimal method for treating and removing submucosal uterine polyps and fibroids in the endometrium is hysteroscopic bipolar resection. This technique utilises a hysteroscope equipped with a camera, light source, and specialised tip instruments that allow the doctor to observe and perform resection of the fibroid mass inside the uterine cavity.

The notable advantages of hysteroscopic uterine fibroid resection include its minimal invasiveness, avoiding the need for uterine incisions or open abdominal surgery, reduced postoperative pain, rapid patient recovery allowing the possibility of discharge from the hospital 2-3 hours after surgery and a return to normal activities and work the next day.

According to Vo Trieu Dat, MD, MSc, Obstetrics & Gynaecology Department at FV Hospital and the main physician responsible for performing this technique "previously, the hysteroscopic

bipolar resection system used a single-pole cutting device that required non-conductive solutions such as 1.5% glycine or sorbitol to distend the uterine cavity. However, when using these solutions, there is a risk of excessive fluid absorption leading to electrolyte disturbances and hyponatremia. Rare cases have been reported to result in pulmonary edema, cerebral edema, typically seen in elderly or patients with heart failure, renal failure, or liver disease." Therefore, the advantages of the hysteroscopic uterine cavity resection system using bipolar resection over single-pole resection are:

- Using of isotonic saline solution (0.9% NaCl) instead of glycine or sorbitol solution, thus minimising the risk of fluid overload
- Reducing the risk of electrical burns at the electrode contact site, reducing the danger for patients with implanted pacemakers.
- Better haemostasis and visualisation of the surgical field as compared with single-pole resection.
- · Shorter surgery time.
- Less tissue damage from deep single-pole electrocautery (3-5 mm) compared to bipolar (0.5-1 mm), thus minimising the risk of uterine adhesion after intervention.

FV Hospital not only emphasises its use of the most up-to-date modern techniques and equipment but also considers individualised factors in treatment. Thus providing patients with safe and effective treatment solutions.



n order to effectively implement the Myopia Control Programme for children aged 3-18, FV has introduced the Myopia Master system to Vietnam, incorporating the most advanced technologies, including Artificial Intelligence (AI). This machine helps predict and analyse the progression of myopia in each child up to the age of 18. Based on these results, doctors can provide appropriate myopia control protocols and monitor the results at each follow-up visit.

Moreover, the Myopia Master measurements can also identify children at high risk of myopia or who are at the pre-myopia stage, even before clinical signs appear it can accurately predict the time when myopia may develop. Controlling myopia in these cases can help prevent or delay the onset of myopia in children, resulting in lower levels of myopia.

 $Currently, FV offers four basic methods for controlling \, myopia:$

- Low-concentration atropine eye drops for pupil dilation.
- Orthokeratology (Ortho-K) contact lenses worn during sleep to reshape the cornea.
- Multifocal glasses.
- Multifocal contact lenses

In addition to the Myopia Master system, FV Hospital is also equipped with other advanced equipment to support myopia control, such as: a modern, precise, and user-friendly system for measuring refraction, even for young children in preschool age; the Pentacam machine, which captures maps of the front and back surfaces of the cornea, assesses corneal curvature, thickness, condition, detects some congenital corneal diseases. Based on results, doctors can select the optimal optical correction method for myopia control and monitor the treatment outcomes of Orthokeratology (Ortho-K) to make the appropriate adjustments.





To book an appointment with Ophthalmology & Refractive Surgery Department, FV Hospital, please call: (028) 54 11 33 33 – Ext 2000