

Dismissing the myths: An analysis of 12,483 procedures. All in a years work for a plastic surgical unit

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Abstract

Plastic surgery is undoubtedly a complex speciality, with a unique diversity. Procedures often transcend the anatomic boundaries which define and limit other specialities. This versatility promotes innovation, but it comes at a cost. Members of the public have very construed ideas of the plastic surgeon, and this is not bettered a great deal by professional colleagues and policy makers. We review a year's work in a busy plastic surgical department to quell these myths. "We restore, repair and make whole those parts which nature has given but which fortune has taken away, not so much that they might delight the eye, but that they may buoy up the spirit" – Tagliocozzi, 1597

INTRODUCTION

Despite the popular misconception, the word plastic in plastic surgery does not mean artificial, but is derived from the ancient Greek word *plastikos*, which means to mold or give form. The term was first used by Desault in 1778 and was popularised by Zeis's book *Handbuch der Plastischen Chirurgie* in 1838. The techniques of plastic surgery date much further back than the coining of its name however. A millennia has passed since the first recorded reports of grafting by the ancient Egyptians in the Ebers papyrus. Around the same time evidence has been found of Hindus following similar practices. The famous work of Sushruta demonstrating the first forehead flap for nasal reconstruction was approximately 600BC. The Roman surgeon Celsus wrote in his *De Medicina* on transplantation of tissues from one place to another. Greek physician Galen when living in Rome gave details of scar excision and repair. It is therefore amazing that even with its roots documented with some of the most influential physicians and surgeons in history, plastic surgery remains misperceived by both the general public and medical profession in regards to its scope and content.

Plastic surgery is undoubtedly a complex speciality, with a unique diversity. Procedures often transcend the anatomic boundaries which define and limit other specialities. This versatility promotes innovation, but it comes at a cost. Members of the public have very construed ideas of the plastic surgeon₁, and this is not bettered a great deal by

professional colleagues₂ and policy makers. With the recent interest in plastic surgery amongst the media and internet, portraying plastic surgeons as 'aestheticians' and 'on the fringe of medicine', we review our year's work in a busy regional plastic surgery unit.

METHOD

All procedures carried out in our department are logged into a computer database (ORAC[®]). The computer records of all surgical procedures carried out from 31st December 2004 – 31st December 2005 were compiled and analysed (n=12483). Procedures were coded according to the BAPS (British Association of Plastic Surgeons) and SAC (Specialist Advisory Committee) guidelines.

RESULTS

Over the 12 month period, the unit performed 12,483 procedures. Only 267 (2.1%) were for purely 'aesthetic' reasons. The majority, 7193 procedures (58%), were involved in wound management (wound debridement, wound exploration and skin grafting etc). A significant proportion of the plastic surgery workload was involved with hand surgery (2172 procedures, 17%) and cancer surgery (2417 procedures, 19%). Burn surgery does not reflect the true input of the burns department, as many treatments are conservative or critical care based. Common procedures performed in regards to hand surgery were congenital hands, Dupuytren's procedures, Rheumatoid arthritis procedures, hand trauma (e.g. tendon repairs, digital nerve repairs,

replantations, and nail bed repairs), nerve repairs and nerve grafting. These results are summarised in table 1 and graph 1.

Figure 1

Graph 1: Summary of procedures performed in the department

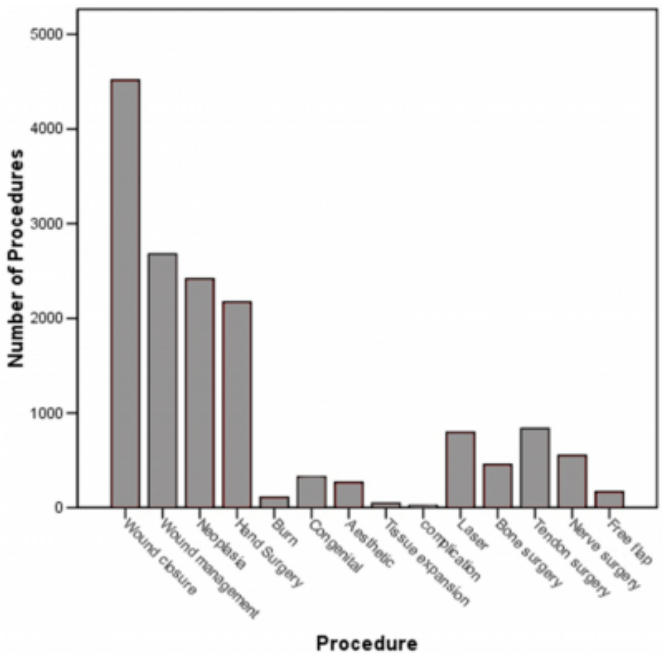


Figure 2

Table 1: Procedures performed

Procedure	Number Performed	Percentage
Wound Closure	4678	35.5
Wound Management	2770	21.0
Neoplasia	2417	18.4
Burn	542	4.1
Hand Surgery	2172	16.5
Aesthetic	257	2.0

DISCUSSION

These results prove that in stark contrast to current perceptions, plastic surgeons are innovative and highly skilled surgeons with a wide diversity of workload, and whom rarely operate for purely ‘aesthetic’ reasons. Plastic surgery has a high media profile but ironically the public are poorly informed about the role plastic surgeons play in some core areas of the speciality including hand surgery and the treatment of neoplasia₁.

As plastic surgeons we feel it is to our benefit to make ourselves available to colleagues for advice and referrals to disseminate the remit of our speciality and involve ourselves in vocational, undergraduate and postgraduate training schemes. We endeavour to make medical colleagues better able to match the needs of their patients to the skills of the appropriate specialist.

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