

Retraction: A handy way to handle hemoclips® in surgeries

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Following investigation of allegations of professional misconduct, the Singapore Medical Council (SMC) has confirmed that the corresponding author, Chua SJ, had provided fictitious names as co-authors of this paper.

In view of the misrepresentation of authorship claims, the *Singapore Medical Journal* fully retracts this paper from its published record.

Poh Kian Keong

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A HANDY WAY TO HANDLE HEMOCLIPS® IN SURGERIES

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Dear Sir,

Hemoclips® are devices used for the purpose of ligating blood vessels to reduce loss of blood. They are widely used in general, cardiothoracic, and plastic and reconstructive surgery,⁽¹⁻⁴⁾ as well as in a wide variety of other disciplines. However, the general small size, light weight and wide variety of shapes of Hemoclips and their loading systems may make it difficult to quickly and efficiently load the clips. Hence, we would like to share an easier Hemoclip loading technique.

The technique begins with the preparation of the adhesive agent from the manufacturer (if the manufacturer does not provide an adhesive agent with the loading system, a hypoallergenic adhesive agent like Mastisol® may be used). The surface of the loading system with the adhesive agent is then adhered to the dorsum of the gloved hand. Subsequently, different varieties of Hemoclips can be arranged neatly on the dorsum of the gloved hand (Fig. 1). The use of the dorsum of the hand in this technique prevents a considerable reduction of hand dexterity and ensures a minimal loss of function, as the movements of one hand can be compensated by the surgeons' opposite hand. This technique can also be applied on the operative assistants' hands, if there is a small surgical field, or at the surgeons' discretion.

The effectiveness and safety of this technique can be seen in our previous study,⁽⁵⁾ which was completed with our attending surgeons, residents and surgical assistants at two participating centres. In this study, it was shown that after a two-hour training session, this technique resulted in a statistically significant decrease in the time of application of the Hemoclips, two weeks after the study initiation. As it also requires less mental effort and workload, this technique could allow surgeons greater cognitive resources for dealing with other demands of surgery.⁽⁶⁾ Furthermore, there were no additional safety issues for the surgical team and patient.

One thing that should be noted is the possibility of the integrity of the glove being compromised during the learning phase (i.e. two weeks) for this technique. However, this was a small and insignificant increase, and can be easily mitigated through the use of a modified glove (i.e. with a thicker dorsum area), an additional glove, or through an extended learning phase (by practising on models).

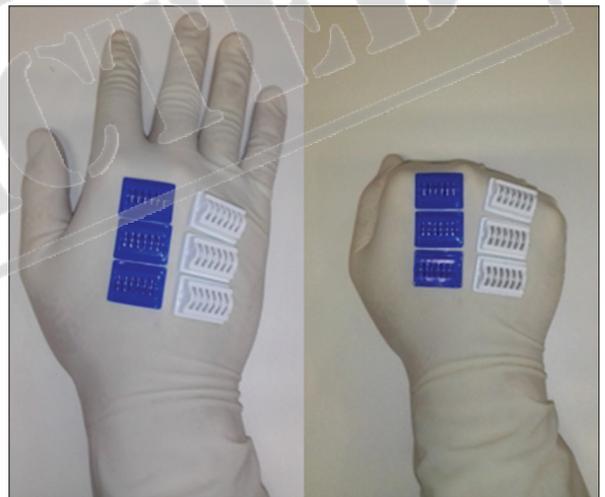


Fig. 1 Photograph shows Hemoclip arrangement on the dorsum of the gloved hand.

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Yours sincerely,

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