

Clinical & Research Internship At King's College Hospital - Dubai



By Rakeeza Mughal under the supervision of Professor William Atiomo and Homero Rivas from MBRU and Dr. Aparna Gumma from King's College Hospital

Interning at King's College Hospital Dubai was truly an eye-opening experience. Owing to the hospitality of the King's staff, I immediately felt at ease and a part of the family. I have gained a much better understanding of the female reproductive system and the possible issues versus solutions offered. For instance, we had a patient present with a Bartholin cyst in significant distress and discomfort- while typical first line solutions often involve medications and non-invasive treatments, Dr. Aparna, a consultant gynecologist at King's and my supervisor, weighed this patient's individual circumstances whilst factoring the overall state of the patient and implications of the cyst on her quality of life and execution of daily activities, to come to the conclusion that a marsupialization surgery was most appropriate. It was interesting to witness the thought process that doctors go through when making decisions in the best interest of the patient.







I also observed a caesarean section, laparoscopic ovarian cystectomy, Merina IUD insertion and multiple ultrasounds and CTGs in labor ward. This spurred my creativity and desire to innovate a concept or product that can improve the patient experience. Having spoken to Professor William Atiomo who inspired me with his amazing invention the Atiomo DyeSeal Uterine Manipulator, I began to look into existing publications on gynecological innovations-that's when I came across Carevix.

Carevix

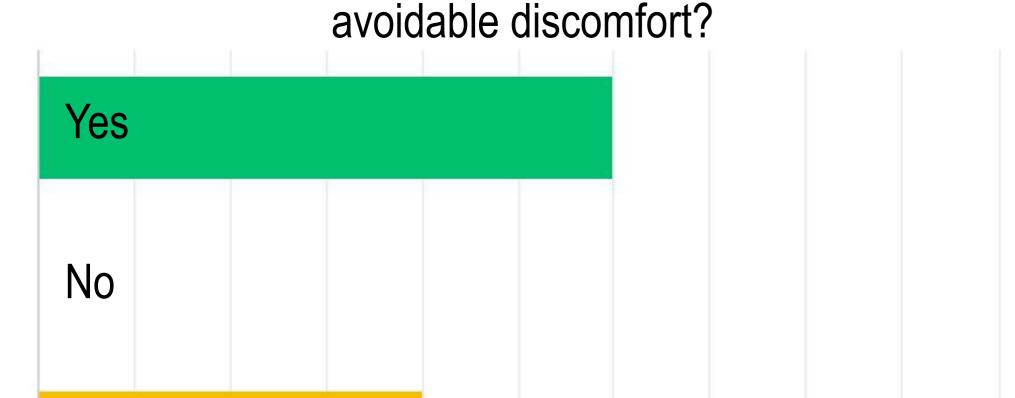
Carevix is a soft-suction medical device designed as a modern and gentler alternative to a cervical tenaculum to stabilise the cervix in all transcervical procedures such as an Intrauterine Device (IUD) insertion. By leveraging suction technology to stabilise the cervix gently, Carevix delivers cervical engagement. A semi-circular anatomical pad is applied onto the delicate tissue during gynaecological procedures including cervical biopsy, colposcopy, IUD insertion, hysteroscopy, dilation and curettage (D & C), endometrial biopsy and ablation. This reduces trauma associated with pain and bleeding.



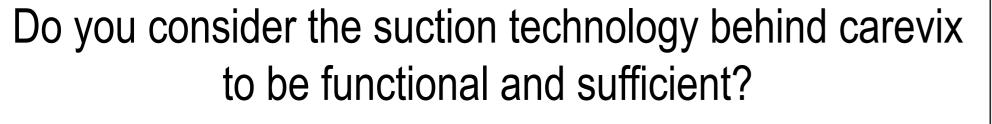


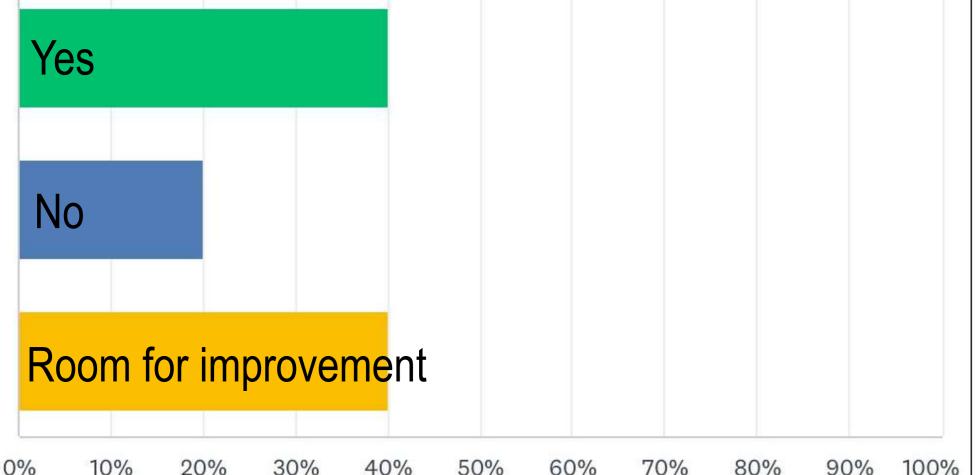
Sometimes

I planned to obtain a consensus on the viability, effectiveness, ease of use and usefulness of the Carevix device amongst the medical professionals in the obstetrics and gynecology department at King's College Hospital Dubai by conducting a survey. These were the results:

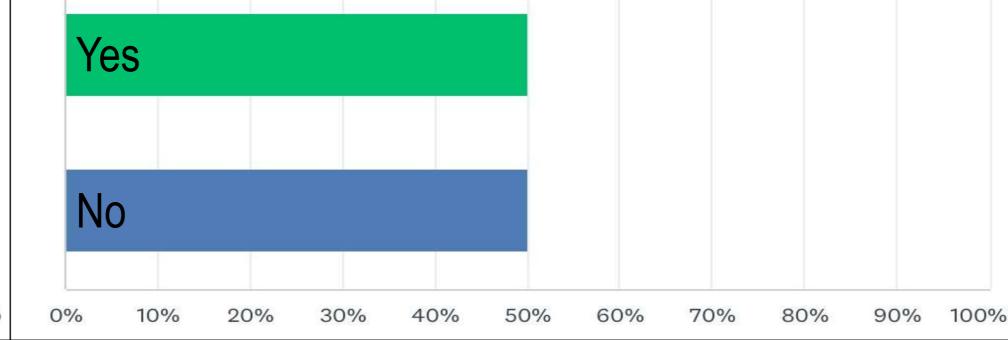


Do you find cervical procedures to cause the patient

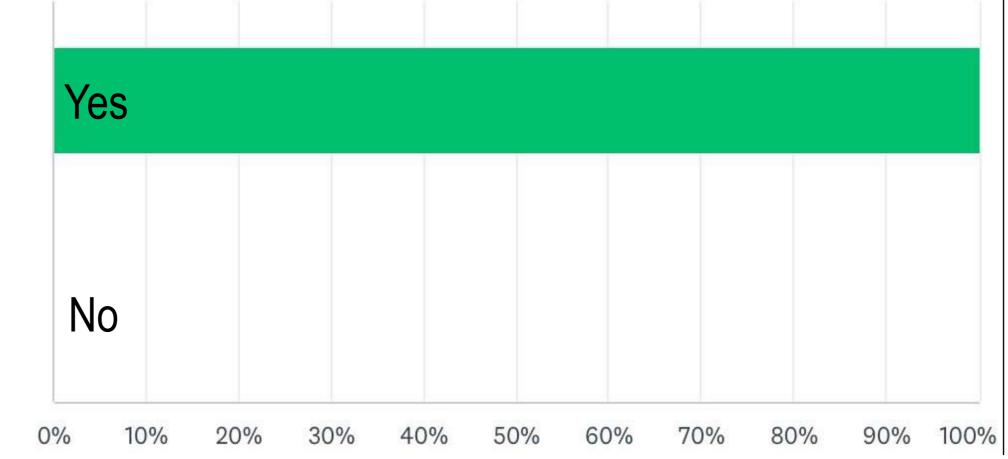




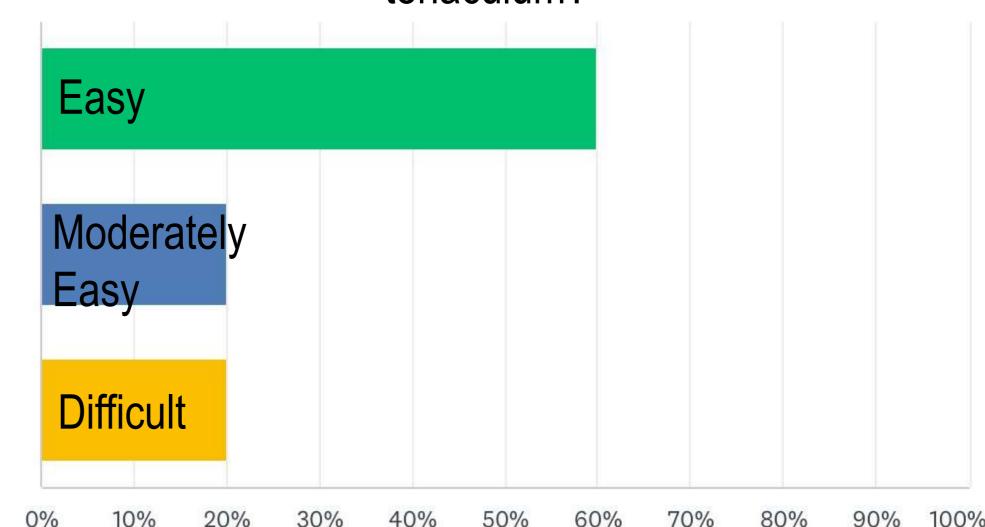
Given the cost of Carevix to be estimated at US \$32 or less per piece, would its ability to meet consumer needs and expectations in terms of quality, utility and effectiveness be sufficient for a high product value to be maintained?



Do you agree that carevix could be a modern alternative to the cervical tenaculum, with an improved patient experience?



How would you rate the ease of use of the cervical tenaculum?



Would the carevix device improve on the practicality of cervical procedures and hence patient experience?

