DISCUSSION

In cases where the surgeon would prefer to resurface a deficient patella because the option of retaining the host would lead to maltracking, we have found this technique to be reliable, versatile and cheap to overcome the otherwise complicated scenario of patella deficiency. It avoids the risk of fracture by reducing the amount of bone that would otherwise be resected for a traditional fixation, and obviates the need for more cumbersome and expensive augmented patella implants, which have a poor track record.[4,5]

CONFLICT OF INTERESTS

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A time and equipment saving tip for difficult urethral catheterisations

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Inability to a pass a urethral catheter is a common scenario in urology. Options include inserting a suprapubic catheter, using an introducer or railroading a catheter over a guidewire inserted via flexible cystoscopy. We describe a novel bedside technique using the atraumatic hydrophilic properties of Terumo (Egham, UK) guidewires. Insert the wire blindly down the urethra until two-thirds has been passed, guaranteeing that it lies in the bladder. Perforate the tip of a Foley catheter with a 16G intravenous cannula and railroad it over the guidewire. This safe technique negates the need for more invasive methods in

The 'two toe' technique for femorofemoral bypass

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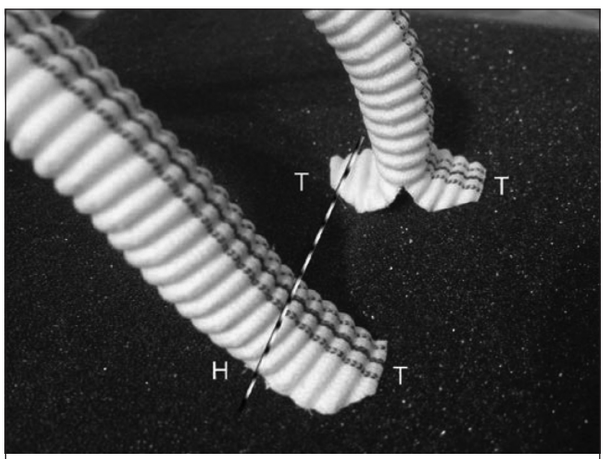
During a femorofemoral bypass, the heel of a dacron graft may be compressed under the inguinal ligament, with the subsequent risk of occlusion. Furthermore, an additional patch may be required to close larger arteriotomies. The following technique addresses both these difficulties without incising the inguinal ligament. The graft is split into two 'toes', instead of a 'heel' and a 'toe'. The inguinal ligament now lies over the superior toe of the graft instead of compressing the heel of the graft. The toes can be lengthened if the arteriotomy is extended into the profunda femoris, avoiding the need for a patch.



T = toe; H = heel

Figure 1 The 'two toe' technique (background) is shown side by side with the conventional 'cobra hood' (foreground). The dotted line represents the inguinal ligament, which compresses the main body of the conventional graft but not the two toe graft