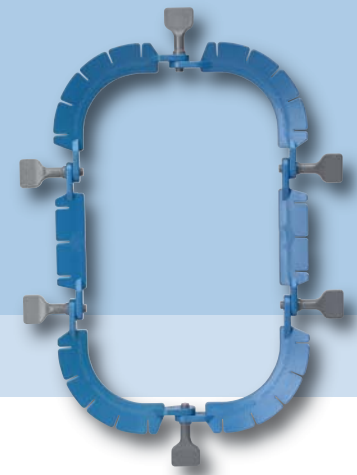


## SURGEON PROFILE:

# Cynthia Kennedy, M.D.

*Experiences with the the Lone Star Retractor System™*



*In this article we will share the experience of Dr. Cynthia Kennedy and her use of the Lone Star Retractor System in her ENT Surgical procedures. Dr. Kennedy comments on this self-retaining retractor system and how it helps simplify surgeries for better outcomes.*



**Dr. Cynthia Kennedy**

*She attended the University of Minnesota Medical School at Minneapolis and did her residency at the University of Minnesota Hospitals, Minneapolis. Dr. Kennedy is a practicing otolaryngologist at Ear, Nose and Throat Associates in Billings, MT. She has been in practice for over 12 years.*

### **What do you spend the most time on in your practice?**

General ENT. Probably 20% Head and Neck cases: thyroidectomies, parathyroid explorations, parotidectomies, neck dissections.

### **What are the demographics of your patient population?**

30% pediatric patients, 30% patients over 60 years old, 30% patients between the ages of 18 - 60 years old.

### **What are the major procedures for which you use the Lone Star?**

Thyroidectomies, parathyroid explorations, parotidectomies, neck dissections.

### **What is your preferred combination of retractor and stays to use and why?**

Now that the Lone Star is available? The Lone Star.

I use the large rectangle (3310G) and for thyroids I usually use 4 double-hooked blunt stays (3384-4) and 2 single-hooked blunt stays (3350-8G)

### **What features of the Lone Star are most important to you for your surgical technique?**

The adaptability of the system. Different shapes of the retractor and the different combinations of the stays adapt to almost any

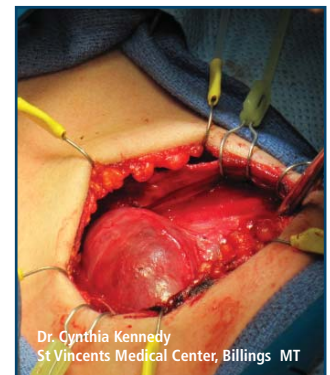
situation. It is also very malleable at the "joints" which allows for "flexion and extension" as well. Plus it holds the skin up, where no other retractor that we use even if someone was holding it holds the skin up consistently. It pulls it up and out so you can get down inside the incision. It widens the surgical field and provides better visualization because it's deeper, if that makes any sense.

### **How does it help you in each of the procedures you mentioned: thyroidectomy, parathyroids, parotids and neck dissections?**

The adaptability of the retractor ring shape is the most helpful to accommodate the various sizes of the surgical fields in each procedure. One less person holding retractors is great. I think it takes the place of another assistant and it has eliminated a third set of hands.

### **What are the anatomical structures of the neck you encounter during thyroid procedures that require retraction?**

Skin, platysma, and the strap muscles. First is skin. The platysma is the underlying muscle right underneath the skin. Then there are the strap muscles. You have to pull the strap muscles to the side and the thyroid is right underneath. The strap muscles are pretty taut, and so they are difficult to retract by hand in addition to pulling the skin up and out. The Lone Star now pulls those strap muscles up and out making it easier. The thyroid is tucked down underneath there.

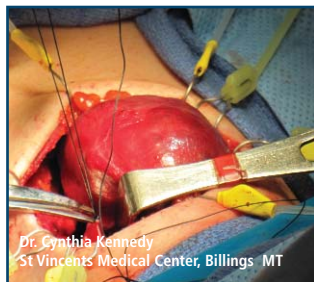


### **What is the most critical step in a thyroid or parathyroid procedure?**

The critical step in these surgeries is finding the recurrent laryngeal nerve(s). If this structure is injured, the result may be vocal cord immobility or paralysis, affecting the patient's vocal quality.

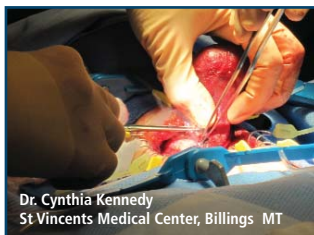
### How does the Lone Star help you during this critical step?

The nerve is deep and medial to the thyroid lobe. The Lone Star Retractor System pulls the platysma and strap muscles up and out so effectively that the proper exposure is obtained.



### What did you use before the Lone Star system was available?

I used "fish hook" retractors that were sharper and shallower than the stays with the Lone Star System. These needed to be clamped to the drapes and did not stay in place well at all. In addition, I would need other retractors, i.e. Army/Navy, goiter.



### How did they compare to the Lone Star?

The combination was still often ineffective. The "fish hooks" would not keep their tension very well. The Lone Star System holds itself in place with constant tension that is adjustable.

### When did you first use the Lone Star Retractor System?

Two years ago.

### If if you were presenting this to another surgeon, what would resonate the most?

Just get it! Seriously, it is great. It makes surgery easier and it is very adaptable.

### Have you seen any patient benefits by using this system?

The Lone Star Retractor System stays create less tissue damage to the skin edges than my previous retractor method.

### Have you seen any staff benefits by using this system?

I feel that the scrub techs spend less time retracting with the Lone Star System in place. I probably feel it frees up their hands to hand other instrument, sutures, etc.

### Are there any other points that you would like to make about the system?

One impressive thing about the Lone Star System, is that my very practical senior partner immediately loved it too and now uses it on all of his Head and Neck cases.

