



Dear Colleague

Gynaecologists at Braemar Hospital combine skills to tackle complex cases...



The combined skill of two of Waikato's leading surgeons in advanced gynaecological care, is offering new hope to women with severe endometriosis.

Dr Tarek Saleh, who came to New Zealand from Cairo in 2004, and Dr Tavaziva Mudzamiri, who emigrated from the UK last year, have joined forces to work in private practice at Braemar Hospital. They are currently the lead laparoscopy surgeons in advanced gynaecological procedures at Waikato Hospital.

say for such cases a team approach is highly beneficial and more efficient. "There is a lot of evidence that a collaborative approach produces better outcomes for the patient, says Dr Saleh. "Our skills complement each other."

Following his medical studies at Cairo University, Dr Saleh arrived in New Zealand in 2004 as a junior house officer in the OG department at Waikato Hospital, then became a consultant after finishing the Royal Australian and New Zealand College training programme for obstetrician/gynaecologists. He completed two years' sub-speciality training in minimally invasive gynaecology and has published research about recurrent cases of endometriosis. He was AGES certified in 2016.

Dr Mudzamiri completed his medical studies in Zimbabwe and did post-graduate studies in the UK in obstetrics and gynaecology, plus advanced training in gynaecology



The two believe their combined skills will offer the best options for complex cases and especially women with Stage 4 endometriosis, where the normal anatomy has been compromised by the presence of large endometriomas (cysts), and severe lesions, and surgery is highly complex. In these cases, the pelvic organs may have become fixed by adhesions, making them immobile or "frozen". Patients may also have considerable scar tissue. The surgeons

oncology. After completing his specialist training, he worked as a consultant in Scotland. He has postgraduate qualifications in healthcare law and ethics and advanced gynaecological endoscopy.

The two specialists say their approach is holistic and the patient is always at the centre of their collegial approach in considering the best options. "The discussions are patient-led. We want to help them achieve what they want and to have the best outcomes possible." They also employ a multidisciplinary approach which could involve a range of other specialists, including the patient's GP and a pain specialist.

The initial approach to treatment may be conservative and involve hormonal treatment or oral contraceptives. "The woman may simply want better control of her periods." But while surgery may not be the preferred or first option for many women with the disease, for others, especially at the extreme stage, re-sectional surgery (the removal of endometriotic implants) will give the best results. Studies have shown seven out of 10 women having that procedure will experience improvement.

"The key to success is to provide the right surgery at the right time for the right patient," says Dr Mudzamiri.

He says successful outcomes are hugely rewarding.

Endometriosis affects one in 10 women of childbearing age; 10-20 per cent of women affected will have severe endometriosis, experiencing symptoms which could include acute pain, heavy bleeding, pain during intercourse and discomfort with bowel movements.

The surgeons say, while there is a heightened awareness of the disease, the condition is often under-diagnosed. Patients who present with

late stage endometriosis may have not been diagnosed at an early stage.

"The most important thing for women to know, is that they don't have to put up with it. They need to seek help." To get the best results, the disease must be treated properly from the outset, they say.

For women whose surgical options have been exhausted, and who are still experiencing pain, the specialists plan to run a chronic pelvic pain outpatients' clinic in the private sector.

Both men chose to take up work in New Zealand for lifestyle and professional reasons. Dr Saleh, whose wife is a GP, has two teenage sons.

He said he fell in love with the country when he arrived for a six-month work placement 14 years ago and stayed on.

Dr Mudzamiri spent six years working as a consultant in Scotland, before moving to New Zealand. He and his wife – a nurse at Waikato DHB – have three young children.



Dr Greg Spark – Deputy Chairman

Dr Tarek Saleh

Qualifications:

MB, BCh, FRANZCOG, AGES certified

Rooms at

Alpha Care Gynaecology at:

- Tui Medical Rototuna
Monday 4.00-8.00pm
- Knox St Clinic,
Corner Knox St & Anglesea St
Monday 12.00pm-4.00pm

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Areas of Specialisation

Advanced laparoscopic surgeon; Surgical and medical treatment of endometriosis and chronic pelvic pain; Total laparoscopic hysterectomy; Medical and surgical treatment of menstrual problems; Treatment of pelvic organ prolapse; Treatment of female urinary incontinence

Specialist Training

FRANZCOG (NZ) 2015
AGES (Australian Gynaecological Endoscopy & Surgery) fellowship 2016

Positions & Memberships

Obstetrics and Gynaecology consultant, Waikato Hospital
Lead laparoscopic surgeon

Dr Tavaziva Mudzamiri

Qualifications:

MBChB (Hons), MRCOG (UK), CCT (UK), FRANZCOG

Rooms at

Alpha Care Gynaecology at:

- Corner Cambridge Road & Masters Avenue, Hillcrest
- Knox St Clinic,
Corner Knox St & Anglesea St
Hamilton

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Areas of Specialisation

Advanced laparoscopic and hysteroscopic surgery; Endometriosis; Menstrual Disorders and Fibroids; Colposcopy; Vulvar diseases

Specialist Training

Specialist Obstetrician and Gynaecologist
Laparoscopic Surgeon

Positions & Memberships

Consultant Obstetrician and Gynaecologist Waikato Hospital
Unit Lead for Gynaecology Oncology Waikato Hospital
Member – British Society of Gynaecological Endoscopy
Member – Australasian Gynaecology and Endoscopy Society
Member- British Society for Colposcopy and Cervical Pathology