

Welcome back ...

... to the third edition of Cutting Edge. Inside, we are pleased to introduce you to some of the new ranges we have been developing under the S Murray brand, as well as providing you updates on the company as a whole.

Against an ever-changing backdrop of framework agreements, NHS Supply Chain, decontamination initiatives and supercentre projects, the NHS landscape has certainly undergone an "interesting" period since the last edition.

During this time, we have worked hard to keep our prices as competitive as possible, holding and even reducing the prices of several key lines over the years. In fact, some products, including many of our self-retaining retractors as well as our dental extraction forceps, are actually cheaper now than they were in 2004.

In awareness of the current economic climate, we have held our pricing for the first three months of 2010. This climate has also seen a sharp decline in the strength of the Pound against the Euro. Whilst the falling exchange rate may well have increased the costs of our raw materials, it has had the positive impact of further increasing the international competitiveness of our finished products.

We are also very pleased to have appointed two new international distributors since the last edition, offering representation in Central America and in Slovenia. We are also in discussions with two new potential distributors in Turkey, another new market for the company.

We are delighted to welcome our new partners and as always, would like to take this opportunity to thank all of our customers and distributors, both UK and international, for your continued and loyal support.

We hope that you will enjoy this latest edition of Cutting Edge and look forward to hearing from you with any suggestions and comments for the future.

A Look Behind the Scenes of our Sheffield Surgical Factory

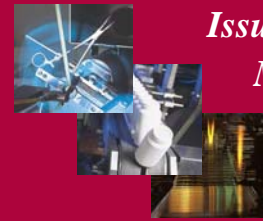
S Murray & Company has over 100 years' experience of manufacturing surgical instruments. In 2003, we moved production to a brand new, purpose-built factory, still in Sheffield – the heart of British surgical instrument manufacture.



Sheffield Factory

In an ideal world, we would love to invite everyone to come and visit our factory: to see at first hand the care and attention which goes into making each and every one of our surgical instruments. As an interim measure, the CD/DVD attached to the right contains a video introduction to our factory. We hope that you will enjoy taking a tour of our factory with us and look forward to welcoming you in person one day.





Autoclave Pouches

We are pleased to introduce a new range of self-seal autoclave and steriliser pouches for steam and ethylene oxide sterilisation.



Manufactured from 2-ply laminate, transparent film and high quality, medical grade paper, simply peel back, fold over and seal – no separate heat sealer is required!

S Murray / SAMCO pouches are manufactured in the UK, in a clean room facility, which is specified to operate at ISO Class 7 (FS 209E Class 10,000) classification, in accordance with International Standard ISO 14644-1:1999.



Supplied in boxes of 200, all pouches are individually marked with indicator arrows for both steam and ethylene oxide sterilisation. Smaller sizes are available in cases of 2,000, larger sizes in cases of 1,000, as per the schedule below:

Code	Size (mm)	Boxes per case
L850/05	60 x 100	10
L850/10	90 x 140	10
L850/15	90 x 200	10
L850/20	90 x 230	10
L850/25	135 x 255	10
L850/30	135 x 360	10
L850/35	190 x 305	5
L850/40	190 x 330	5
L850/45	305 x 381	5

New Range of Extra Long Instruments

In response to changing procedural practice and in particular the recent rise in bariatric surgery*, S Murray & Co can now offer a longer range of instruments than those previously available as standard.

Developed in partnership with our key UK distributors, the instruments in this range are all 300mm long and include the following:

- S3065/10 Gwilliams clamp straight
- S3066/10 Gwilliams clamp curved
- S2145/05 Babcock forceps serrated
- S2135/05 Allis tissue forceps 3/4 teeth
- S2069/10 Foerster sponge holding forceps
- S1124/05 Lahey Cholecystectomy forceps



Instruments shown alongside standard 150mm (6 inch) Spencer Wells

Minimum order quantities do currently apply. However we would be pleased to hear from you to discuss your specific requirements further.

* Bariatric surgery is defined in Wikipedia as being “performed on the stomach and intestine of people who are dangerously obese, for the purpose of losing weight.”



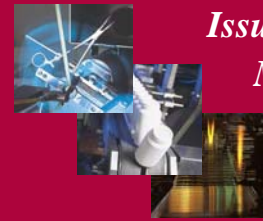
Spackmann Addition to Single-Use Range

We have now introduced the Spackmann Cannula to our single-use range. Sterilised by gamma irradiation, the cannulae are supplied packed and ready for use in boxes of 10. Please note, this item is only currently available to our international customers, due to UK partnership agreements.

We are also looking at expanding our range of single-use suction tubes to accompany our internationally successful Zoellners (code 00ZT/05). Plans include the Frasier, Poole and Yankauer Suction Tubes. Please contact us for further details.



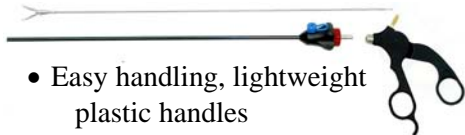
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S Murray Goes Minimally Invasive

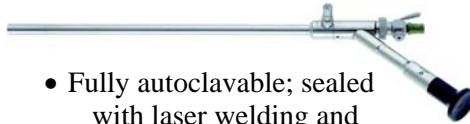
We are pleased to announce the development of an S Murray range of minimally invasive surgical instruments. The initial range will focus on Laparoscopy instruments, some of which are highlighted here. We look forward to working with you to maximise this new opportunity.

Grasping and Cutting Instruments



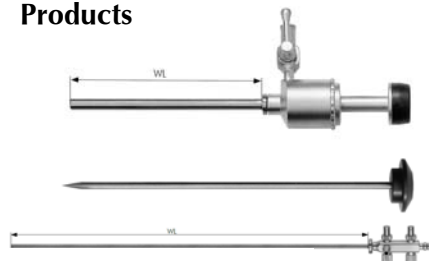
- Easy handling, lightweight plastic handles
- Insulated shafts with 360° rotation, standard length 330mm
- Detachable shaft, handles and working ends for effective reprocessing; with easy reassembly action
- Wide range of instruments available, including: grasping forceps; biopsy forceps; clamps; scissors and needleholders
- Scissors and needleholders available in stainless and Tungsten Carbide

Laparoscopes



- Fully autoclavable; sealed with laser welding and sapphire soldering process
- High performance illumination fibres, with superb optical transmission
- High quality, anti-reflective optical system
- Highly refractive glass for optimal colour rendering
- Precise centring of optical components allows high contrast image at edges as well as centre of image
- HD High Definition models also available

Trocars, Cannulae and Associated Products



DIN Baskets & Container Systems

Another new range for S Murray & Co, sterilisation containers are now available in 1/1, 3/4 and 1/2 DIN sizes. Manufactured from anodised aluminium our containers are lightweight, with excellent drying properties and conform to International DIN Standard 58952.

Optional colour-coded lids and identification labels allow for precise control of instrument trays throughout the sterilisation process.

Please do not hesitate to contact us if you would like further information about this range, or any of the new products highlighted in this edition.



S Murray makes a million – bottles, that is!

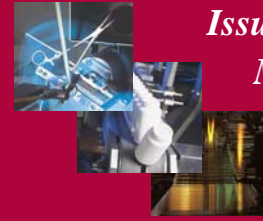
In May 2009, S Murray & Co started a three month trial period of 24 hour plastic blow-moulding production. The result was a breakthrough – with over 1,000,000 bottles manufactured in the first month alone. We are delighted that this level of production has been sustained and are looking to continue to manufacture in this way for the foreseeable future.

In part, this increase has been made possible by the investment in an additional blow-moulding machine in 2008. In part, it has been through increased demand for the company's wide range of products, in particular

those designed for the domestic, industrial, cosmetic and healthcare markets. Of specific note, we are pleased to have produced a range of bottles and foamers designed for use as hand washes and hand sanitisers: a key line of defence in the ever-present fight against MRSA.

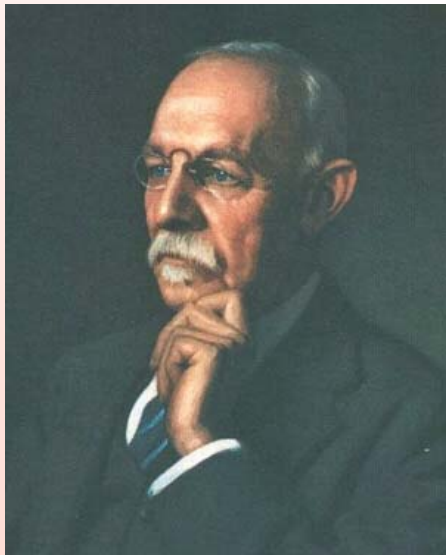
As an extension from this range, we are now able to offer a **non-alcohol-based**, wall-mounted, hospital hand sanitiser for our international partners. We would be pleased to hear from you if you would like to receive more information on this product, or on any of our plastics or laboratory ranges.





Dr William Halstead ... a story of family, drugs and a penchant for gloves!

Perhaps the most common of all surgical instruments used today is the Halstead Mosquito Artery Forcep. In fact, it is difficult to find a procedural tray which does not contain at least one. However, if the Halstead Mosquito may be described as “common”, then that is by no means the accolade which might be levelled of its namesake. A gifted surgeon, heralded by some as “the father of American surgery”¹ and by others as “one of the greatest surgeons of all time”², William Halstead was to leave a legacy which few surgeons will ever surpass. It is all the more extraordinary that this should be achieved by a man who ultimately sacrificed his own health for the pursuit of knowledge and for whom the boundaries between personal, professional and family life became increasingly blurred and intertwined.



Dr William Halstead

Born in New York in 1852, Halstead’s early interest lay more in sport than in studies. Keen on rowing, gymnastics, and baseball, he captained the first reported American 11 player football team in 1870. It was not until his final year at Yale University in 1874 that he generated his passion for surgery, seemingly inspired by Henry Gray’s *Anatomy of the Human Body* (commonly referred to as *Gray’s Anatomy*).

Driven by the desire to study and to learn new techniques, Halstead travelled to Europe in the late 1870s. He was very impressed with the formal medical training which he encountered: a stark contrast to the American model, where most of the surgeons were self-taught. Inspired by this system, he returned to America, passionate to ‘teach others to teach’.³ This dream became a reality after his appointment as first chief of the Department of Surgery at Johns Hopkins Hospital in Baltimore when it opened in May 1889. During his time at the Hospital, and in his capacity as Professor of Surgery after 1892, Halstead is accredited with starting the first formal surgical residential training programme in the United States. Although immortalised by the surgical techniques he pioneered, it was the structure which he brought to the surgical training programme which marks his greatest legacy: not only did many of his students become leading surgeons in their own right, many became eminent professors, eager in turn to teach and inspire the next generation of surgeons.

Whilst his efforts as a teacher are heralded by some as his greatest achievement, Halstead was also a surgical pioneer – unafraid to put his own body on the line to save others; especially when his family were at risk. What better example than when he performed the first ever blood transfusion in 1881? Finding his sister nearly dead from a postnatal haemorrhage, Halstead drew out and injected his own blood into her – saving her life in the process. In the same year, during a visit to his mother in Albany, he performed one of the first operations on gallstones – this time with his mother as the patient. The following year he pioneered the radical mastectomy as a treatment for breast cancer – a procedure established as a Gold Standard by the American Surgical Association in 1898.

What is even more remarkable is that Halstead’s achievements came after a far darker period of his life, during his early years working in New York. In 1884, Halstead learned of the studies into the use of cocaine for local anaesthesia by Carl Koller of Vienna. Using himself as a test subject, he developed an addiction which ultimately resulted in the end of his career in New York. His personality

changed from that of a bold extravert to a diffident, anti-social introvert, with his intoxication increasingly apparent in the work he produced. Finally, after repeated periods of rehabilitation and the move to Baltimore, Halstead mastered his addiction – but at a cost. He had substituted morphine for cocaine, which he continued to use through to his death in 1922. Unknown to the outside world, Halstead “endured a life of controlled addiction ... but without deterioration of self, health or mentality”,⁴ which has led some to question whether there has ever been “a saga of more poignant memories, of more dramatic recoveries, or more magnificent triumphs”⁵.



Halstead in surgery

Amidst the trials and tribulations, the addictions and the pioneering, there is one final accomplishment which cannot go unnoticed. Halstead’s senior scrub nurse, Caroline Hampton, developed dermatitis whilst repeatedly preparing her hands for surgery. In order to protect her hands, Halstead commissioned the Goodyear Rubber Company to make her some close fitting gloves. That they were married six months later would suggest that his new invention had worked! With the fortunate coincidence that patient mortality due to post-operative infections fell significantly as a result – the surgical glove was born and Halstead had left yet another legacy.

Selected references & further information:

- ¹ www.wikipedia.org (including pictures)
- ² & ⁴ *DR Halsted’s Addiction*, Daniel B. Nunn, MD, Vol.6, No.3, March 2006
- ³ *A Brief Sketch of the Medical Career of Dr. William Stewart Halsted*, www.medicalarchives.jhmi.edu
- ⁵ *Sir William Osler and William Stewart Halsted – Two contrasting personalities*, Emile Holman, *Pharos*. 1971;144