

Reconstructive surgery: Restoring shattered lives

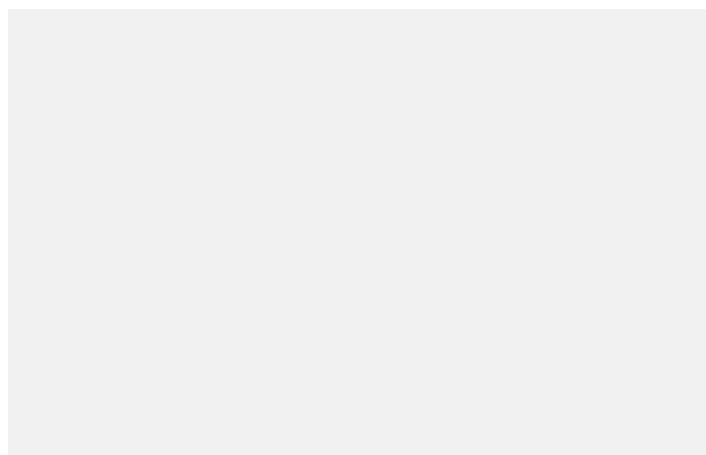
The surgeons at Plastic & Hand all love the variety of work they handle day to day. Their profession of plastic surgery can offer special rewards.

“There’s just nothing like

seeing the face of the parents after you’ve fixed their baby’s cleft lip,” says Dr. David G. Fitz, who’s been with the practice since 1987.

“And it’s just awesome to see the transformation when

you do a breast reduction on a 17-year-old who’s had so much neck and back pain and hasn’t been able to participate in sports. When you meet her for the first time, she is mortified to be

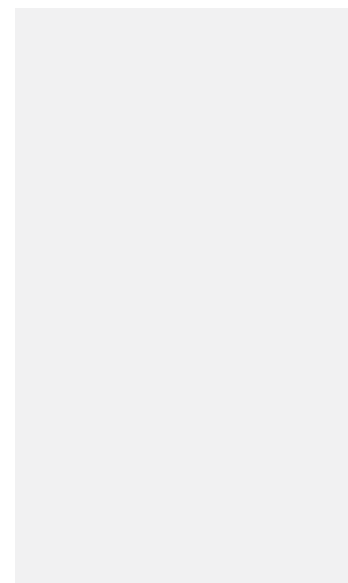
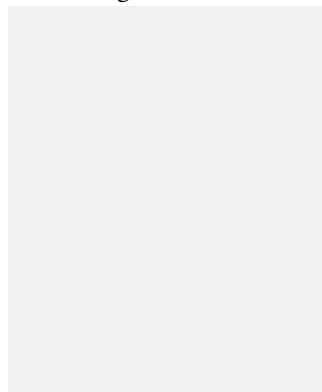


here, and there’s not a lot of eye contact. Six months later, she’ll come back after you’ve fixed her, and she’s looking you eye to eye, with a grin from ear to ear.”

Plastic surgery is also rewarding because of the special relationships that evolve between the doctor and patient.

For example, seeing someone through the long process from breast cancer diagnosis to breast reconstruction surgery can last more than a year. In that time frame, deep bonds can’t help but form, says Dr. Therese K. White, who has been with the practice since 1996.

“It’s such a long relationship,” she says. “You meet these women in a crisis, and you see them through their entire disease process. By the time they get to their reconstruction point, they say, ‘This is the one positive appointment I have.’ We get to know these patients so well and we get to know their families. And that’s incredibly rewarding.”



The ever-evolving nature of the reconstructive surgery field keeps the job intriguing, says Dr. John A. Attwood, who has been with Plastic & Hand for 21 years. Over two-plus decades, Attwood has seen countless changes that have positively affected his work and therefore his patients..

“New products and new equipment have allowed us to do surgery in a much more efficient way,” he says. “Improvements in anesthesia have given us the great ability to do outpatient services,” says Attwood, who initially performed all surgeries at Maine Medical Center.

“Better anesthesia also has shortened patient recovery times, and we have much better pain control now

SURGERY

Continued from Page 10

than when I started.” As a result, most of the cosmetic procedures are performed on an outpatient basis.

Much of a plastic surgeon’s initial reconstructive surgery training – dealing with disastrous wounds and trauma and all parts of the anatomy – serves them well in cosmetic procedures – and vice versa.

Surgeons often make use of plastic surgery techniques during facial skin cancer removal procedures as well, notes Dr. Richard C. Flaherty.

A desire to share their knowledge has prompted the multi-skilled doctors of Plastic & Hand to take turns going on a variety of international plastic surgery missions over the years. (The cooperative nature of their practice also allows for this, since they cover for each other with patients.)