

ly rates, Cohen says.

"I would also like to know how many they did. For me, I would want them to have done 100 minimum."

Cohen says the government figures show a chart review is in order — something she was hoping to do herself when her research was published by ICES.

"I was disappointed that ICES didn't pick this up and run with it," Cohen says of her study, which showed bile duct injury rates of unnamed hospitals.

"We could have gone in and done a chart audit. But I guess it wasn't seen as a priority." (A chart audit would allow researchers to say — with absolute certainty — what the real bile duct injury rates are and who has caused them.)

Wendy Young, who has co-authored studies on the surgery with Cohen, says: "We do know that hospitals have started to monitor it, which they haven't done before. Once there are lawsuits, things will change."

Despite all these injuries, patients so far don't appear to be suing in great numbers.

Dr. Robert Robson, associate secre-

technique with which he was much more experienced."

Gone is not only Miles' health but any hope of having a career or any semblance of a normal life. She has a poverty of words but she got her point across when she testified: "Brain gone, big time."

Judges, a candidate for the post of chief of surgery at Grand River Hospital in Kitchener, still works at St. Mary's Hospital in Kitchener where he has surgical privileges to perform keyhole gallbladder surgery, says Kirk McPherson, lawyer for St. Mary's Hospital.

Miriam Rosin, a 75-year-old Toronto psychologist, has decided not to sue. Rosin had the operation at age 69 from a doctor who said he'd done 50 of the procedures.

"He wasn't a confident person — there was something pathetic about him," Rosin says.

"I took pity on him and I think that's why I let him operate on me. I know I shouldn't think like that, I'm a psychologist."

"When I came to, he said he'd knicked my liver. I was home the next day."

identify and fix it," Hanna notes. "The problem is, a lot of doctors don't know they've injured it."

It's usually the patients, feeling severe pain and jaundice, who realize something is desperately wrong.

Many having keyhole gallbladder surgery are not warned by hospitals of the high rate of bile duct injuries

Last winter, Hanna let me observe the surgery on patient Nina Hall, a schoolteacher in her 40s whose operation had been moved up a month after she experienced a gallstone attack.

"When you have an obstruction, as you would in the gallbladder, the organism contracts very violently to get rid of the stone," explains Hanna.

"As it contracts, the stone becomes impacted in the cystic duct and the gallbladder gets bigger. Eventually, either the stone will give up and go back into the gallbladder or, if it pushes down, it will move down into the common bile duct."

Even though Hall had a gallbladder attack, Hanna decided to do the keyhole gallbladder surgery. But he told Hall he might have to abandon the less invasive surgery during the operation for an open cholecystectomy.

In a hospital lounge, Hanna draws the anatomy of the gallbladder and ducts, trying to show how difficult the operation can be. "My personal opinion is that when it's easy, it's very easy. When it's difficult, it's very difficult," he says.

"See down here," Hanna says, drawing the ducts and liver. "This is where you get into tiger country."

In the operating room, Hanna makes a small incision, which he sticks his fingers into, just above Hall's belly button. "(The gallbladder's) a beauty — it's very inflamed. I can feel it," he says.

On the television monitor, Hall's gallbladder looks like a mass of oozing puss and gummy flesh.

"We have to be careful — it looks like it's going to rupture," says a tense Hanna. "This isn't the case to show you. Everything is so inflamed — that's why it's so hard."

Hanna takes out a needle to compress the inflamed gallbladder, then draws bile out of it. Looking at the monitor, he carefully cuts away the sticky organs from the liver.

Despite his understandable nervousness over the operation, Hanna remains steady and sure, taking his time to isolate the anatomy before making any moves to remove the gallbladder.

He succeeds and removes the gallbladder. He slices it open to reveal the gallstones — two cheesy-looking yellow balls the size of large marbles.



BERNARD WEIL / TORONTO STAR

LAUNCHED LAWSUIT: Bookkeeper Margrit Schneider, 59, launched a lawsuit claiming \$1 million in damages after keyhole surgery

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