

TIME AND SPACE TO TALK ABOUT YOUR CHILD'S ENT PROBLEMS

Dave Albert believes that the best way to find out what is really going on with your child's ENT problems is in a child friendly room which is fun for the child and allows time for a careful in depth discussion.



A videocamera lets everyone see what's going on in Rufus' ears

Imagine a remote control helicopter, a pop-up pirate and a Thomas the Tank Engine train set. Now imagine, if you can, a machine that allows you to actually see your child's eardrums, tonsils, adenoids or voicebox and you find yourself in the office of David Albert, Paediatric Otolaryngologist.

His approach is conservative, starting with advice and medical treatment, followed by review and then, if required, surgical intervention. *"About one in ten of my patients require admission for surgery. Most children's ENT problems can be treated medically in the first instance"*, he says.

If the room maketh the man, then David Albert has been carrying out a relaxed and child-friendly approach to private practice for the past eighteen years at the Portland Hospital, London. The emphasis is, above all else, on a stress-free environment - medicine with the intimidation taken out.

So many common problems are self limiting the skill is in identifying which children really need help and which parents just need reassurance

David Albert has a wealth of experience dealing with both common and rare ENT conditions in children. Nasal obstruction, troublesome tonsils, glue ear and hearing loss are some of the common ailments afflicting David's Portland patients. Patients with hearing loss or sleep disturbance may be struggling at school while frequent ear and throat infections can really affect a child's quality of life.

A full time healthcare assistant helps during the physical examination and then spends time occupying the patient while David talks to the parents. *"This allows me to concentrate on the discussion of options which I think is important"*, David says.

David loves using sketches to explain what is going on and gives a copy to the parents at the end of the consultation.



Watching children play builds confidence and is a great way of assessing their development and social skills

David became fascinated by children's ENT problems in 1984 when he had to deal with a very small newborn baby weighing about 1lb who had breathing difficulties. He went on to study the effects of intubation on the neonatal larynx and the surgery to help these small children. Further training was undertaken at the Hospital for Sick Children, Great Ormond Street, and two fellowships were completed at the Children's Hospital, Cincinnati, where he was head of paediatric ENT research.

David has been making surgical inroads for the past twenty years; performing the first UK based single stage reconstruction of the larynx in 1991 and the first cochlear implant at Great Ormond Street in 1992. He is also credited with the UK development of bipolar diathermy tonsillectomy and suction diathermy adenoidectomy, which reduce both intra-operative blood loss and surgery time.

These are two of the techniques David regularly uses in surgery at the Portland Hospital where he works closely with a specialist paediatric consultant anaesthetist, Dr. Adrian Lloyd-Thomas, who has anaesthetised over 10,000 patients at the Portland alone.

Since establishing the first full time Paediatric ENT practice in the UK in 1991, nearly nine thousand patients have passed through David's safe hands at the Portland.



Examining the larynx of child with a narrowed airway

David says, "As a father I know the sense of responsibility one feels in making the right decision if surgery is indicated" A question he is often asked is what would you do if this was your child?

Smiling, David continues, "I do love my time in theatre. Every patient is different and I love the challenge of finding the right technique for them",

As current president of the British Association of Paediatric Otolaryngologists, David remains at the spearhead of surgical and clinical development in the UK. His current focus is the development of endoscopic and minimally invasive laryngeal surgery and he continues to maintain his role as lead ENT clinician at Great Ormond Street alongside his private practice.

A Mum's View

- Alex was struggling...
- He was miserable from 6 months of age with frequent sore throats, ear infections, high temperatures and buckets of antibiotics!
- I seemed to spend my whole time at the doctors
- His sleep was disturbed (and mine!) and we were both cranky in the morning!
- Alex was better on long term antibiotics but everything returned when the antibiotics stopped
- I remember the long discussion I had with Dave Albert about the pros and cons of surgery
- "taking out his tonsils and adenoids changed his life—and mine!"



GET IN TOUCH.....

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