



TITLE: Fin-Style Stirrups for Patients Undergoing Gynecological or Bowel Procedures in the Lithotomy Position: Clinical Effectiveness and Cost-Effectiveness

DATE: 20 June 2016

RESEARCH QUESTIONS

1. What is the clinical effectiveness of fin-style lithotomy stirrups for patients undergoing gynecological and/or bowel medical or surgical procedures?
2. What is the cost-effectiveness of fin-style lithotomy stirrups for patients undergoing gynecological and/or bowel medical or surgical procedures?

KEY FINDINGS

No relevant literature was identified regarding the clinical or cost effectiveness of fin-style stirrups for patients undergoing gynecological or bowel medical or surgical procedures in the lithotomy position.

METHODS

A limited literature search was conducted on key resources including PubMed, The Cochrane Library, University of York Centre for Reviews and Dissemination (CRD) databases, Canadian and major international health technology agencies, as well as a focused Internet search. No filters were applied to limit the retrieval by study type. Where possible, retrieval was limited to the human population. The search was also limited to English language documents published between January 1, 2006 and June 9, 2016. Internet links were provided, where available.

SELECTION CRITERIA

One reviewer screened citations and selected studies based on the inclusion criteria presented in Table 1.

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Table 1: Selection Criteria

Population	Patients undergoing gynecological and/or bowel medical or surgical procedures (e.g. sigmoid bowel resections, cystoscopy procedures) in the lithotomy position
Intervention	Fin-style lithotomy stirrups (e.g. Yellofin®)
Comparator	Alternate style stirrups (e.g. candy cane-style, knee-crutch, other boot-type)
Outcomes	Q1: Clinical benefits (e.g. patient comfort, lower limb stability during the procedure) and harms (e.g. lower limb nerve injuries, blood clots, bruising) Q2: Cost-effectiveness (e.g. incremental cost per QALY gained)
Study Designs	Health technology assessments, systematic reviews, meta-analyses, randomized controlled trials, non-randomized studies, economic evaluations

QALY = quality-adjusted life year.

RESULTS

No relevant health technology assessments, systematic reviews, meta-analyses, randomized controlled trials, non-randomized studies, or economic analyses were identified regarding the clinical or cost effectiveness of fin-style stirrups for patients undergoing gynecological or bowel medical or surgical procedures in the lithotomy position.

References of potential interest are provided in the appendix.

OVERALL SUMMARY OF FINDINGS

No relevant literature was identified regarding the clinical or cost effectiveness of fin-style stirrups for patients undergoing gynecological or bowel medical or surgical procedures in the lithotomy position; therefore, no summary can be provided.

REFERENCES SUMMARIZED

Health Technology Assessments

No literature identified.

Systematic Reviews and Meta-analyses

No literature identified.

Randomized Controlled Trials

No literature identified.

Non-Randomized Studies

No literature identified.

Economic Evaluations

No literature identified.

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APPENDIX – FURTHER INFORMATION:**Non-Randomized Studies***Fin-Style Stirrups Mentioned in Full Text and Used as Part of Study Procedure*

1. Bugeja S, Andrich DE, Mundy AR. Non-transecting bulbar urethroplasty. *Transl Androl Urol* [Internet]. 2015 Feb [cited 2016 Jun 20];4(1):41-50. Available from: <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC4708276>
[PubMed: PM26816808](#)
2. Tan BK, Kang GC, Tay EH, Por YC. Subunit principle of vulvar reconstruction: algorithm and outcomes. *Arch Plast Surg* [Internet]. 2014 Jul [cited 2016 Jun 20];41(4):379-86. Available from: <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC4113698>
[PubMed: PM25075361](#)
3. Ulm MA, Fleming ND, Rallapali V, Munsell MF, Ramirez PT, Westin SN, et al. Position-related injury is uncommon in robotic gynecologic surgery. *Gynecol Oncol* [Internet]. 2014 Dec [cited 2016 Jun 20];135(3):534-8. Available from: <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC4268144>
[PubMed: PM25449565](#)
4. Rosenblatt PL, Apostolis CA, Hacker MR, DiSciullo A. Laparoscopic supracervical hysterectomy with transcervical morcellation and sacrocervicopexy: initial experience with a novel surgical approach to uterovaginal prolapse. *J Minim Invasive Gynecol* [Internet]. 2012 Nov [cited 2016 Jun 20];19(6):749-55. Available from: <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3693750>
[PubMed: PM23084680](#)
5. Huynh H, Trottier DC, Soto CM, Moloo H, Poulin EC, Mamazza J, et al. Laparoscopic colostomy reversal after a Hartmann procedure: a prospective series, literature review and an argument against laparotomy as the primary approach. *Can J Surg* [Internet]. 2011 Apr [cited 2016 Jun 20];54(2):133-7. Available from: <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3116694>
[PubMed: PM21251422](#)
6. Reed HM. Aesthetic and functional male to female genital and perineal surgery: feminizing vaginoplasty. *Semin Plast Surg* [Internet]. 2011 May [cited 2016 Jun 20];25(2):163-74. Available from: <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3312144>
[PubMed: PM22547974](#)

Healthy Participants

7. Pannucci CJ, Henke PK, Cederna PS, Strachn SM, Brown SL, Moote MJ, et al. The effect of increased hip flexion using stirrups on lower-extremity venous flow: a prospective observational study. *Am J Surg*. 2011 Oct;202(4):427-32. Available from: <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3183348>
[PubMed: PM21788007](#)

Note: Yellofins mentioned in full-text

Evidence-Based Guidelines

8. Committee on Gynecologic Practice. Gynecologic surgery in the obese woman. Committee opinion no. 619. Washington (DC): American Congress of Obstetricians and Gynecologists; 2015 Jan [cited 2016 Jun 20]. Available from: <http://www.acog.org/Resources-And-Publications/Committee-Opinions/Committee-on-Gynecologic-Practice/Gynecologic-Surgery-in-the-Obese-Woman>
Note: Discusses stirrup use in lithotomy position, fin-style not mentioned