

## Letter to the Editor

### **Re: Otological drills**

Dear Sir,

The cost of medicine rises dramatically each day, the newest surgical technological advance carries with it not only benefits to both the patient and the treating physician, but also a higher price.

In our case, we were deeply concerned about the price of drilling systems for ear surgery, which are so high that we can have only one or at the most two sets of the complete systems. With a busy schedule such as ours, we cannot afford to continue paying the highest rates for this type of expensive equipment and its repair. That is why we looked for an alternative to perform the surgical procedures at less cost.

For the past eight to ten years we have been using the Dremel Moto-tool<sup>®</sup> system (Emerson Electric Co., PO Box 1468, Racine, Wisconsin 53401, USA) as a reasonable and cheap alternative. Although it is sold with no surgical indication whatsoever, we found that the machine can be used with its pencil-like, flexible hand shaft (Model 225<sup>°</sup>) which will fit almost all classical and regular burrs using the adaptation of a collet, also sold by the company.

Out of the three models that the company produces we prefer to work with model 395<sup>°</sup> which has almost 30,000 rpm with five different speeds that may also be regulated through a foot pedal, models

275<sup>°</sup> and 285<sup>°</sup> are also useful but carry only 28,000 rpm. The price of the entire systems, model 395<sup>°</sup>, hand shaft, foot pedal and collet cost less than 180 US dollars.

We started experimenting with this system in our temporal bone laboratory on cadaver temporal bones and maxillary sinuses and finally we decided to use it in live surgery.

To the present time, we have performed more than two hundred otolaryngological procedures such as radical and simple mastoidectomies, a few Caldwell-Luc operations and division of the mandible and a calcified thyroid cartilage.

I intend to encourage other departments of otolaryngology in developing countries like Colombia to try this alternative and use it in their temporal bone practice to get acquainted with it and later on use it in surgery, leaving their expensive systems for those cases that call for very refined and expensive technology.

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