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SICOTNEWS

Société Internationale de Chirurgie Orthopédique et de Traumatologie
International Society of Orthopaedic Surgery and Traumatology

Country to Country: United States of America



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SICOT Educational Day 2011 - A New Comprehensive Review Course

Vikas Khanduja

Member of the SICOT Young Surgeons Committee
Consultant Hip and Knee Surgeon, Cambridge, United Kingdom

The Educational Day is a new initiative by the SICOT Young Surgeons Committee and will be launched at the forthcoming SICOT 2011 XXV Triennial World Congress in Prague. This short article discusses the conception, the aims and objectives, and takes a peek into what one can expect from the first Educational Day in Prague next year.

The needs of Orthopaedic residents, fellows and practicing Orthopaedic surgeons around the world are evolving constantly. At the same time, evidence-based knowledge in Orthopaedics is expanding at a very rapid rate. Moreover, all the residents around the world need to take exams at some stage in their career to mark completion of training and/or demonstrate competency. Also, most practicing Orthopaedic surgeons do have to undergo some form of appraisal or revalidation at regular intervals to demonstrate fitness to practice. In both these scenarios, acquiring and updating knowledge in a short span of time is essential. The SICOT Educational Day was conceived with exactly this purpose in mind.

The aim of this day is to provide a comprehensive review course for the residents and an evidence-based update for the practicing surgeons on a specific theme at each SICOT Congress/Conference. The theme is selected in such a way that it is mutually beneficial to the residents in their exams and to the Orthopaedic surgeons in their daily practice. The themes are based on the syllabus of the FRCS (Tr & Orth) exam in the UK and the EBOT exam in Europe as well as the experience with the SICOT Diploma Examination, and will be run in a cycle of five years. The event is planned to be held on the first day of every SICOT meeting and would be reasonably priced for the residents and surgeons in training.

SICOT Diploma Examination

Registration is open for the ninth SICOT Diploma Examination which will take place in Prague, Czech Republic, in September 2011.

The Diploma Examination will consist of a written part and an oral part. The **written part** will be comprised of 100 multiple choice questions based on the Hyperguide and will last two hours. The subjects questioned will be in the following categories: General Orthopaedics, Trauma, Paediatrics, Pathology, Sports Medicine, Hand, Basic Sciences. The **oral part**, also lasting two hours, will be held on the same day. Each candidate will be examined by two examiners in each of the four major subjects:

The theme for the forthcoming Congress in Prague is 'The Hip'. The event will be held at the Prague Congress Centre on 6 September 2011 between 8.30 and 17.30. The day focuses on all the elements of hip surgery right from anatomy and surgical approaches to complex revision hip arthroplasty. The format consists of four to six short lectures in each section followed by ample time for discussion and debate during coffee breaks. Dedicated teachers, a mix of the younger and the older generation, from around the globe have been brought together to lecture on their area of expertise.

So, if you wish to learn, share, debate and discuss ideas and surgical techniques in an exciting environment with a group of international surgeons in one room, the Educational Day in Prague is the place for you. We look forward to seeing you there!

Target audience: Orthopaedic trainees from around the world

Venue: Prague Congress Centre, Prague, Czech Republic

Date: Tuesday, 6 September 2011

Time: 08:30-17:30

Fee: EUR 125 (includes SICOT Associate membership for one year) or EUR 175 (includes SICOT Associate membership for one year and registration fee for the SICOT 2011 XXV Triennial World Congress)

Registration can be done at www.sicot.org/?id_page=391. Places are limited so early registration is recommended.

For more information, please contact the Congress Secretariat at congress@sicot.org.

Adult Orthopaedics and Pathology, Trauma, Paediatrics and Hand, Basic Sciences (30 minutes each).

Candidates must provide their **CV** and a **letter from their Head of Department** specifying that they have had 4 years of medical practice since obtaining their medical degree and that they are actively engaged in an orthopaedic training programme. They must also be **members of SICOT** or in the process of applying for membership at the time of registration.

For more information and to register, please go to www.sicot.org/?id_page=383 or send an e-mail to hq@sicot.org.



SICOT's role in International Networking in Musculoskeletal Health

SICOT joined the recent Global Forum of the Bone and Joint Decade on its 10-year anniversary. This initiative was established by the Chairman and Professor of Orthopaedic Surgery, Lars Lidgren, from the University of Lund, Sweden, and has managed to establish a multidisciplinary global consciousness on musculoskeletal health with the participation of all stakeholders including patients, doctors, academicians, professional societies and politicians. The BJD initiative is recognised by multiple governments and international health organisations, such as NIH, US, EU, UN and WHO, and has managed to focus on the global lack of resources available for musculoskeletal research and patient care. The Decade has defined specific areas for action such as disabilities of the aging population, joint diseases, osteoporosis, back pain and spine conditions, childhood musculoskeletal conditions including trauma, road traffic accidents and trauma care. Although the decade has now ended, it has been decided to continue its mission throughout the next decade. In the United States, the official decade continues for another two years. The trauma care and road traffic accident programme has received official recognition as a task for the next decade. The ongoing BJD initiative is now chaired by Prof Anthony D. Woolf, Royal Cornwall Hospital, England, and a 15-member international steering committee. SICOT is represented in this committee by Prof James Waddell, University of Toronto, Canada.

SICOT missions largely overlap those of the BJD initiative. The major orthopaedic societies are represented and will benefit from this multidisciplinary think tank. It is a major opportunity for these organisations and SICOT in particular to join under the umbrella of the BJD to create resources for their core activities, such as guidelines for trauma care, promotion of cost-effective prevention and treatment, disaster medicine, education centre programmes, and the like.

Yours sincerely,

Cody Bünger
SICOT President



United States of America

John P. Dormans

SICOT National Delegate of the United States

Chief of Orthopaedic Surgery, The Children's Hospital of Philadelphia

Professor of Orthopaedic Surgery, Hospital University of Pennsylvania School of Medicine

Past President, Paediatric Orthopaedic Society of North America

Geography

The United States of America, situated between Canada to the North and Mexico to the South, is comprised of 50 states and spans an area of 9,826,675 km². The population consists of a wide variety of cultures, ethnicities, and religions, making the United States one of the most diverse countries in the world. A 2010 estimate approximates 310 million current residents. While our country does not have an official language, English predominates. The United States also has much in the way of geographic variety, hosting a wide range of terrains from mountains and valleys to deserts, rivers, and lakes. Ecologically, we are home to 17,000 species of vascular plants, 91,000 species of insects, and a wide variety of mammals, birds, and reptiles. Climate varies depending on region and time of year.¹



*The Grand Canyon, located in Arizona
Chensiyan. Grand canyon hermits rest 2010. Digital image. Wikimedia Foundation.
16 March 2010. http://en.wikipedia.org/wiki/File:Grand_canyon_hermits_rest_2010.JPG.
(This image is licensed under the GNU Free Documentation License)*

Health Care System

The current health insurance system of the United States of America is comprised of two types of providers: private and public. Of the Americans covered by health insurance, most receive private health insurance. Public health insurance options are available for seniors, disabled individuals, and low income children and their families. While health insurance aids in affording medical services for many US citizens, at least 15.3% of the population are uninsured (~47 million), and 35% are underinsured (~109 million), or not capable of covering the cost of their medical bills. This has become a significant issue, considering more money per person is spent on health related needs in the United States than any other country.²

With the recent inauguration of President Barack Obama in 2009 came a resolve to reform the current health care system of the United States. Generally, the goals of this reform are to increase access, efficiency, and quality of health insurance while simultaneously decreasing costs. Coverage is expected to expand as a result of mandates requiring individual purchase and employer supply of health insurance. Health insurance companies will also undergo reform: beginning in 2014, they will not be permitted to deny coverage to anyone with a pre-existing condition, including children. An additional 32 million currently uninsured Americans will subsequently be covered as a result of these reforms.²

One of the earliest examples of managed care in the United States originated in 1929. The Baylor Hospital provided health care services to a group of Dallas teachers who contracted with the hospital to develop a plan offering 21 hospitalization days for a fixed payment. This system soon expanded to become one of the largest health care providers in the United States: Blue Cross / Blue Shield. Government tax breaks kept medical coverage relatively inexpensive at this time.³

The health care system then did not resemble current practice until the start of the nation's Second World War in 1940. The combination of decreased labour opportunities and government imposed wage control led to employer based health insurance as a means of attracting more workers. This incentive serves as the earliest example of health insurance offered by an individual's employer. Medical coverage expanded to include millions of additional Americans in 1965 with the initiation of Medicare and Medicaid under the Social Security Act.³



The US Capitol Building, located in Washington D.C.
(Architect of the Capitol. Digital Image. www.aoc.gov/cc/photo-gallery/capitol_views.cfm. 1 November 2010)

The Practice of Orthopaedics in the United States of America The American Academy of Orthopaedic Surgery (AAOS)

The practice of orthopaedics in the United States of America began in the 1850's as a means of correcting the musculoskeletal afflictions associated with tuberculosis infections. The demand for care rose exponentially still a century later with the polio epidemic. Orthopaedics as its own specialty developed in response to the large number of patients requiring musculoskeletal treatment. In 1887, the American Orthopaedic Association (AOA) convened in New York City in the hopes of developing a community of orthopaedists who could establish standards, debate techniques of treatment, and ultimately expand their specialty.⁴

The AOA played a critical role in the development of orthopaedics' largest society today, the American Academy of Orthopaedic Surgery (AAOS). The AAOS originated in 1933 as a non-profit organization based out of Northwestern University in Chicago, Illinois. With the advent of arthroscopic technique and joint replacement, orthopaedics as a specialty flourished. Since its inception, the Academy has grown to include 34,000 surgeons in over 100 countries. AAOS may have undergone significant change since 1933, but its mission has remained the same: to champion the interests of patients and advance the highest quality of musculoskeletal health.⁴



Mount Rushmore in South Dakota
(Franklin, Dean. Mount Rushmore Monument. Digital image. Wikimedia Foundation. 4 June 2003. Web. 19 Oct. 2010. [http://en.wikipedia.org/wiki/File:Dean_Franklin_-_06.04.03_Mount_Rushmore_Monument_\(by-sa\)-3_new.jpg](http://en.wikipedia.org/wiki/File:Dean_Franklin_-_06.04.03_Mount_Rushmore_Monument_(by-sa)-3_new.jpg) (This image is licensed under the Creative Commons Attribution-Share Alike 2.0 Generic license))

The Practice of Orthopaedics in the United States of America Musculoskeletal Conditions

Musculoskeletal conditions are the primary cause of physical disability in the United States. According to the 2005 National Health Interview Survey (NHIS), 107.67 million adults in the United States reported suffering from a musculoskeletal medical condition. Low back pain, chronic joint pain and arthritis were the most common orthopaedic afflictions reported among Americans aged 18 years and older. Within the next 20 years, the incidence of musculoskeletal impairments will increase as the largest segment of the US population ages.⁵

While the increase in occurrence of musculoskeletal injuries and conditions is a cause for concern, musculoskeletal diseases are still not in the top ten conditions funded by research. This is directly related to the low mortality rate of orthopaedic issues as they compare to other health conditions (including circulatory and respiratory issues).⁵

As a means of raising awareness of musculoskeletal conditions and diseases, 2002-2011 was named the United States Bone and Joint Decade (USBJD). This initiative was established to increase awareness of the societal impact of musculoskeletal injuries and disorders, encourage patients to actively participate in decisions relating to their treatment, increase research funding pertaining to preventative activities and treatment, and promote cost-effective means of establishing preventative activities and treatment for these injuries and disorders.⁵

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4. Sherk HH. The Origins of American Orthopaedics. In: Getting it Straight: A History of American Orthopaedics. American Academy of Orthopaedic Surgery. 2008, 17-37.
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Location: North America

Population: 310 million (2010 estimate)

Capital: Washington D.C.

Surface Area (Size of Country):

9,826,675 km²



National Language: No official language; de facto language - English

Number of members in American Academy of Orthopaedic Surgeons (AAOS): 35,730 surgeons

Number of SICOT Members: 337 total - 168 Active members, 1 Candidate member, 1 Associate member, 167 Emeritus members



SICOT Global Network of Electronic Learning (SIGNEL)

Jochen Eulert
SICOT Secretary General

The collection and distribution of knowledge has been a major goal for SICOT for many years. Nowadays this has become easier with the development of IT, which is changing the world. With this in mind, SICOT has created an electronic learning programme:

SICOT Global Network of Electronic Learning = **SIGNEL**

This programme includes:

- a monthly educational “Case of the Month”;
- a monthly “Article of the Month” taken from the SICOT journal “International Orthopaedics”;
- reviewed articles provided for this programme;
- selected oral presentations from SICOT meetings;
- free educational material from the internet;
- free educational material from the industry;
- free educational material from scientific journals, societies, and so on;
- open access to selected electronic publications.

All contributions are categorised, thus allowing the user to find easily what he/she is looking for. It is completely free for all members of SICOT, and partially free during December 2010 for non-members who are on the SICOT e-Newsletter mailing list.

To access SIGNEL, please go to the SICOT website and click on SIGNEL in the main menu. Then insert the keyword or topic you would like to read more about. Simply click on “QUICK SEARCH” and you will be given a list of videos, articles and so on, which can each be selected with a click of the mouse. You can also go to “Advanced Search” for more options. It’s that simple!

The material currently available is only the beginning. From time to time, please have a look to see what has been added.

The SICOT Head Office would also welcome any comments or proposals at hq@sicot.org. We hope you will find this new learning programme useful and practical.

SIGNEL

Sicot Global Network E-Learning

Société Internationale de Chirurgie Orthopédique et Traumatologie
International Society of Orthopaedic Surgery and Traumatology



[-] Quick Search

Author	<input type="text"/>	Category	<input type="button" value="All Categories"/>
Title	<input type="text"/>	Case reports	<input type="button" value="Case reports"/>
		Clinical	<input type="button" value="Clinical"/>
		Experimental	<input type="button" value="Experimental"/>
		Review	<input type="button" value="Review"/>

Region

Adults / Children	<input type="button" value="All Ages"/>	Treatment	<input type="button" value="All Treatments"/>
	<input type="button" value="Adult"/>		<input type="button" value="Arthroscopic"/>
	<input type="button" value="Pediatric"/>		<input type="button" value="MIS"/>
			<input type="button" value="Navigation/robotic"/>
			<input type="button" value="Non-operative"/>

Tissue

Etiology	<input type="button" value="All Regions"/>	Treatment	<input type="button" value="Arthroplasty"/>
	<input type="button" value="Elbow"/>		<input type="button" value="External fixation"/>
	<input type="button" value="Foot/ankle"/>		<input type="button" value="Internal fixation"/>
	<input type="button" value="Hand/wrist"/>		
	<input type="button" value="Hip"/>		

All Tissues

All Etiologies	<input type="button" value="Bone"/>	Treatment	<input type="button" value="Arthroplasty"/>
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All Etiologies

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	<input type="button" value="Degenerative"/>		<input type="button" value="Internal fixation"/>
	<input type="button" value="Iatrogenic"/>		



NUHS/SICOT Trauma Fellowship Award

Hitendra K. Doshi
SICOT National Delegate of Singapore

On 13 September 2010 a new SICOT Fellowship Award blossomed in the Asia Pacific region. A Memorandum of Understanding between SICOT and the Division of Orthopaedic Trauma, National University Hospital, Singapore, created a new window of opportunity.

A formal signing ceremony was held between Prof Jochen Eulert, Secretary General of SICOT, and Prof Joseph Thambiah, Chief of the Division of Orthopaedic Trauma, National University Hospital, Singapore. Prof Jochen Eulert also addressed the consultants and orthopaedic trainees in his informative presentation on Soft Tissue Management in Arthroplasty, followed by a brief presentation on SICOT.

The Orthopaedic Trauma Division of the National University Hospital consists of 5 orthopaedic surgeons. Most complex trauma cases are referred to this division. Routine management consists of pelvic and acetabular trauma, geriatric fracture management, open fracture management and polytrauma. Most surgeries are performed with Minimally Invasive Techniques. With the high volume of open fractures, Ilizarov techniques are commonly used too. Apart from this, a fair volume of arthroplasty and arthroscopy is performed.

This new fellowship will give young surgeons (below the age of 40), who are from the Asia Pacific region and SICOT members,

an opportunity to train in orthopaedic trauma in Singapore for six weeks. The fellowship will be funded with the support of Zimmer Pte. Ltd. which includes an economy return flight ticket, accommodation and daily allowances for the entire duration of the fellowship.

The selection will be made based on the submission of:
 1) a *detailed curriculum vitae*;
 2) a *best published scientific paper*; and
 3) a *letter of recommendation by the supervisor/chief*.

All applications must be made between **1 January and 28 February 2011** and sent to awards@sicot.org. The selected candidate will be notified by 1 May 2011. The candidate is highly encouraged to receive the fellowship award during the annual SICOT meeting. The first fellowship will commence in **May 2012**. An advance selection will provide adequate time for the candidate to prepare for the fellowship. Upon completion of the fellowship, a formal report will be required from the candidate after which an official Fellowship Certificate will be presented.

The blossoming of this fellowship has added fragrance to the existing wide choices of awards available through SICOT. It is an exciting opportunity not to be missed by SICOT members from Asia Pacific.



Prof Eulert signing the agreement with Prof Thambiah and Dr Doshi from the Division of Trauma, National University Hospital, Singapore (the other trauma faculty members are Prof Khong Kok Sun, Dr Fareed Kagda, Dr Diarmuid Murphy)



A memento of appreciation to SICOT by Prof J. Thambiah



SICOT National Delegate of Egypt awarded the State Prize of Appreciation for Medical Sciences

Hatem Said
Assistant Editorial Secretary



Prof Galal Zaki Said

In a ceremony attended by the dignitaries of Egypt, President Mubarak awarded Prof Galal Zaki Said a gold medal for winning the State Prize of Appreciation for his lifetime achievements.

Prof Said is the SICOT National Representative of Egypt and former First Vice President of SICOT. He was President of the 2nd SICOT Annual International Conference held in Cairo in 2003.

He established the Assiut University/SICOT Training Fellowships for African orthopaedic surgeons in February 2002. Through these fellowships, 47 young African orthopaedic surgeons have been trained in his department. SICOT has also acknowledged the Assiut department as a SICOT Education Centre, which is directed by Prof Said.

He founded the orthopaedic and trauma department in Assiut University in 1965. He is senior trustee of the AO Foundation and a member of many orthopaedic associations. He has

several publications in national and international journals and is currently the Chairman of the Standing Scientific Committee for promotion of professors in Egypt.

In addition to his medical career, Prof Said has lifetime voluntary activities. He established a rehabilitation centre for physically disabled boys in Assiut in 1969 and another centre for girls in 1983. In these centres, boarding boys and girls have been receiving medical, physical as well as vocational rehabilitation, until the present day. He also established the Assiut Childhood and Development Association (www.acdaegypt.com) in 1991, which provides comprehensive developmental services in the rural communities in the Assiut Governorate. ACDA has established 150 nurseries and 150 community schools. The association provides care to disabled children in their village, in addition to health and environmental awareness. ACDA is also involved in empowerment of women and child protection programmes. One of its most successful projects includes the micro-credit system for the villagers; this has allowed it to receive national and international recognition and donations.

All these achievements were recognised and led to Prof Said being awarded this prestigious prize.



President Hosny Mubarak of Egypt (left) awarding Prof Galal Zaki Said (right) the State Prize for Medical Sciences





Johns Hopkins University Clinical Observership

Edward G. McFarland

*The Wayne H. Lewis Professor of Orthopaedic and Shoulder Surgery,
Division of Shoulder Surgery
Vice-Chairman, Adult Reconstruction, Johns Hopkins University*



The Johns Hopkins University is happy to announce the availability of a clinical observership and research position at its Division of Shoulder Surgery. It is a one-year position and it is open in 2011.

It is an exciting position designed to give you exposure to a wide variety of clinical conditions of the shoulder and their medical and surgical treatment. You will go to clinic with us and to surgery during the week along with working upon academic endeavours such as reviewing manuscripts, writing research proposals, writing book chapters and pursuing research projects and publications. The goal of the fellowship is to increase your knowledge in these areas but also to produce publications that can advance science and care of our patients. The goal is for you to participate and publish as many papers as possible during the year.

There are several important things you should know about this fellowship. Since it is an observer position you can attend surgery and clinic but cannot examine or treat patients. You can attend surgery in the operating rooms but you cannot scrub. Secondly, this is an unfunded position which means that we pay for only your health insurance. As a result, you are required to provide your own funding from either your university, hospital or privately. You are responsible for your living expenses and lodging.

For further information contact Prof Edward G. McFarland MD at emcfarl1@jhmi.edu or at 10753 Falls Road Suite 215, Lutherville MD, 21093, United States of America.

Location:

10753 Falls Road
Suite 215
Lutherville, MD 21093
United States of America

Description: Clinical research fellowship

Additional information:

- The offering's duration is long-term (one year).
- Accreditation is not offered.
- Attendance certificate awarded by Department of Orthopaedic Surgery.
- No financial support is provided.
- Housing is not provided and low cost housing is not available.
- No exams are required.
- No special licenses are required.
- The following visa is required: Hospital will assist in obtaining Visa.

Sponsoring organization:

Johns Hopkins University
10753 Falls Road
Lutherville, MD 21093
United States of America
Tel.: +1 410 583 2850
Fax: +1 410 583 2855

Notes:

This is a one-year research position which involves observation and clinical research. The applicant would spend the week in observing clinic, surgery and conferences. Every researcher is expected to write several papers for publication. This fellowship exposes you to a wide variety of clinical experiences, but a majority of the exposure will be shoulder problems, open and arthroscopic surgical techniques are utilized. A wide variety of shoulder problems including, rotator cuff disease, arthroplasty, SLAP lesions, and other soft tissue problems are encountered. Some research projects can involve basic science, including dissections and cell biology. A second year in the laboratory is available for qualified applicants.



The dome of Johns Hopkins Hospital



German SICOT Fellowship 2010 - A Fellowship with a Difference

Hitendra K. Doshi
SICOT National Delegate of Singapore

Dr Sujit Tripathy and I were delighted when we heard our names being announced as the top two candidates for the SICOT Diploma Examination held in Pattaya in 2009. We were awarded a fellowship to Germany and we arrived in Frankfurt in May 2010. We were very excited as it was our first time in Germany.

Germany has pioneered many innovations in orthopaedics and has taken lead in various surgical techniques being practiced worldwide. This has always been an inspiration to many young surgeons, which has motivated many to obtain advance training in Germany. However, our experience in Germany had more to offer than we had expected.

We started our journey of experiences in two different places. While I was at Homburg, Saar, with Prof Dr Tim Pohlemann, Dr Tripathy was in Erlangen with Prof Dr Raimund Forst. We were subsequently together at Würzburg with Prof Dr Maximilian Rudert and his inspiring team. After enjoying the pleasant atmospheres in the two cities, we were soon in Berlin with Prof Dr Heino Kienapfel. The historic and bustling city kept us busy and very soon we realised it was our last week. We ended our fellowship at Rummelsberg, Schwarzenbruck, with Dr Wilhelm Baur. It was in the countryside with a promising orthopaedic service.



The two fellows, Drs Sujit Tripathy and Hitendra Doshi

Both of us had an interest in Orthopaedic Trauma and Arthroplasty. However, my subspecialty interest was in Advance Trauma and Pelvic Surgery while Dr Tripathy's interest was mainly in Arthroplasty. It was our first experience in doing orthopaedic rounds in a foreign language. Nevertheless, the X-rays and cases displayed helped us understand the subject matter. Indeed, we all have a common 'Orthopaedic Language'. In the operating rooms, the surgeons took the initiative to explain and teach us with enthusiasm certain special techniques. The surgeons always shared their surgical tips and tricks. We were part of the team as second surgeons and this opportunity and exposure we treasure in our hearts. Besides the clinical exposure, we were overwhelmed with the rich culture in Germany.

We met many foreign fellows training in these hospitals who had learned German within months. This was very special as it inspired me to start learning German too. Our visits to museums, churches, restaurants and various fests during our stay gave us a taste of living in Germany. The history and culture of Germany is amazing. We also made many more friends and it was a great fellowship. It has truly given us an experience with a difference.



Dr Sujit Tripathy, Prof Dr Jochen Eulert, and Dr Hitendra Doshi

SICOT Travelling Fellowships 2011

Every year, SICOT offers three young surgeons three-month fellowships to visit an international medical centre. The aim is to attend and learn at a renowned education centre to improve knowledge and surgical skills. The value of each fellowship is EUR 4,000, which includes travel and accommodation. Don't miss this opportunity and submit your fellowship application before 31 December 2010. More information about these three fellowships can be found at www.sicot.org/?id_page=162.

Prague TWC 2011

Call for Abstracts

The call for abstracts for the SICOT 2011 XXV Triennial World Congress in Prague, Czech Republic, is open on the SICOT website!

Topics

Main topics:	Other topics:
Arthroplasty Research Shoulder Spine Trauma	Biomaterials Clubfoot Endoscopic Spinal Surgery Foot & Ankle Hand Knee Ligament & Cartilage Repair Minimally Invasive Spinal Techniques Natural Disasters Navigation Osteonecrosis Osteoporosis Paediatrics Prosthetics & Orthotics Regenerative Orthopaedics Road Trauma Safety Thromboprophylaxis Tumours

Important Dates

Abstract submission deadline: **15 January 2011**

Notification of abstract acceptance: 1 March 2011

Guidelines

- Only **electronically** submitted abstracts are accepted.
- Abstracts must be written **in English**.
- Abstracts must not exceed **250 words** in length.
- No graphs, tables, photographs, or slide presentations** are accepted.
- A **confirmation e-mail with your abstract number** will be sent to the e-mail address you entered on the first page of the abstract submission process. Make sure you click on "Finish" at the end of the process or you will not receive a confirmation e-mail. Please contact the Congress Secretariat at congress@sicot.org if you do not receive a confirmation and **do not submit the abstract again**.
- The material submitted **must not have been published or presented** at any national or international meeting before this one.

Submission of an abstract implies that the **presenting author will register for and attend** the Congress in Prague to present the abstract either as an oral presentation or as a poster if it is accepted.

The SICOT Congress Scientific Advisory Committee (CSAC) **reserves the right to change the topic and the form of presentation (oral/poster)** of the abstract or to reject it.

IMPORTANT NOTE: The **presenting author** must register and pay the congress registration fee to have his/her abstract included in the Final Programme. The Congress Secretariat will not check if co-authors have registered.

We kindly encourage all presenting authors to register as soon as possible after receiving the confirmation of acceptance. Registration is open at www.sicot.org/?id_page=370. Register before 15 May 2011 and benefit from reduced registration fees!

Please insert your abstract number(s) on the registration form and check that your FAMILY name and GIVEN name(s) have been inserted in the same field and spelled in the same way as on the abstract submission form. For example, if you have inserted "Smith" in the Family Name field on the abstract submission form, please ensure that "Smith" has also been inserted in the Family Name field on the registration form.

To submit an abstract, please go to:
www.sicot.org/?id_page=368

For further information, please contact the Congress Secretariat at congress@sicot.org.

Partner Societies (at 15 November 2010)

SICOT 2011

XXV Triennial World Congress

6-9 September 2011
Prague, Czech Republic



AO Spine



ARTOF (Association for the Rational Treatment of Fractures)



CAOS (Computer Assisted Orthopaedic Surgery)



COA (Chinese Orthopaedic Association)



CSOT (Ceská Společnost pro Ortopedii a Traumatologii - Czech Orthopaedic Society)



DGOU (Deutsche Gesellschaft für Orthopädie und Unfallchirurgie - German Society for Orthopaedics and Traumatology)



EFORT (European Federation of National Associations of Orthopaedics and Traumatology)



ESSKA (European Society of Sports Traumatology, Knee Surgery and Arthroscopy)



ESSSE (European Society for Surgery of the Shoulder and the Elbow)



ICFC (International Clubfoot Congress)



IFPOS (International Federation of Paediatric Orthopaedic Societies)



IHS (International Hip Society)



ISMISS (International Society for Minimal Intervention in Spine Surgery)



SRS (Scoliosis Research Society)



WOC (World Orthopaedic Concern)

More information about Prague TWC 2011 is available on the SICOT website: www.sicot.org

Editorial Department

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Assistant Editorial Secretary: Hatem Said

External Affairs: Linda Ridefjord

Special thanks to Anthony Hall

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