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# SICOTNEWS

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

## Official Inauguration of the SICOT Education Centre in Assiut



Left to right: Prof Cody Bünger, Dr Hatem Said, and Prof Mostafa Kamal

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# What would your diagnosis and therapy be?



Fig. 1

## Case 1

A 50-year-old woman presented after an ankle sprain with pain and swelling of the left foot. Radiographs of the foot in 3 planes were taken and the lateral view showed a rare but typical lesion (Fig. 1).

What is your diagnosis?

- Fracture of the anterior process of the calcaneus?
- Calcaneus secundarius?

To read more, please go to the SICOT website:

[www.sicot.org/?id\\_page=212](http://www.sicot.org/?id_page=212)

### Author:

Dr Volker Ettl  
Department of Orthopaedic Surgery  
University of Würzburg  
König-Ludwig-Haus  
Brettreichstrasse 11  
D-97074 Würzburg  
Germany

## Case 2

A 30-year-old man was presented in the orthopaedic department. He complained of lateral knee pain during walking. Previous surgery consisted of an ACL-reconstruction with autologous bone-patellar tendon-bone graft two years ago. Clinical examination showed a valgus leg alignment, a normal ROM and a stable right knee. The valgus deformity is contract and a slight swelling can be found.

The full leg weight bearing X-ray (Fig. 1) shows lateral osteoarthritis with osteophytes and narrowing of the joint space and the Mikulicz-line (weight-bearing line) running outside the lateral compartment.

What would your therapy be?

- Nonoperative treatment
- Arthroscopy
- Osteotomy
- Unilateral arthroplasty
- Total arthroplasty



Fig. 1

To read more, please go to the SICOT website:

[www.sicot.org/?id\\_page=248](http://www.sicot.org/?id_page=248)

### Author:

Dr Thomas Barthel  
Department of Orthopaedic Surgery  
University of Würzburg  
König-Ludwig-Haus  
Brettreichstrasse 11  
D-97074 Würzburg  
Germany  
[t-barthel.klh@uni-wuerzburg.de](mailto:t-barthel.klh@uni-wuerzburg.de)



## Why subspecialty sections in SICOT?

SICOT is undergoing major changes in accordance with our Strategic Plan which was approved by the International Council in Bangkok during October 2009. We are trying to be more competitive in the orthopaedic world to meet the challenges it presents. Among the new activities we are embarking on is the creation of **subspecialty sections within SICOT**. They should attract the brightest and the best with contemporary knowledge to provide the best education and scientific programmes at our meetings. To succeed we will work in collaboration with our affiliated subspecialty societies such as IFPOS, ARTOF, and others.

SICOT's strength exists in its scientific programmes, their high number of free papers and in its global outreach. We must change part of our identity to capture the focus of both participating surgeons and industrial exhibitors. Young surgeons should feel confident that they will engage in the latest developments in their chosen evolving subspecialty when they attend SICOT meetings. This can be done as we develop subspecialty sections within SICOT, each headed by an internationally respected leader. Members of SICOT with strong subspecialty interest will be asked to record their subspecialty. The members of each subsection shall have their names displayed on the SICOT website and their leaders shall give a report to the International Council at our annual meetings. The subspecialty section representatives will be part of the Congress Scientific Advisory Committee helping to organise topics, sessions and workshops. The Executive Committee will take the initiative and facilitate groups of surgeons to discuss, if they have no opportunity formally to meet, and select a Chairman for the subsection. The surgeons and Chairmen should act as ambassadors for SICOT in the contact with industry and other subspecialty societies. Each section will have its own SICOT Forum for communication.

We recently conducted a survey among the SICOT members which showed that 92% of those who responded had a subspecialty interest. The ranked order of subspecialties was: hip, knee, trauma, spine, sports medicine, general orthopaedics, paediatrics, research, shoulder & elbow, foot & ankle, hand, and oncology.

It is my hope that all SICOT members will join with us in this vital activity, which certainly demands commitment, creativity, and flexibility to reach our new goals.

**Cody Bünger**  
SICOT President



# Switzerland

**Prof Dr Pierre Hoffmeyer**

*Professor of Orthopaedics*

*Chairman of the Department of Orthopaedics, University Hospital of Geneva*

*President, Swiss Orthopaedic Society*

*SICOT National Delegate of Switzerland*

Switzerland lies in the centre of Europe and shares boundaries with France, Italy, Liechtenstein, Austria and Germany. It covers a land area of 41,285 km<sup>2</sup> (or 15,940 square miles). It hosts many lakes, natural and dammed, the largest being Lake Geneva with its 584 km<sup>2</sup> surface. The time zone is Central Europe (GMT +1 hour). The capital is Bern which lies in the geographic centre of Switzerland.

### Population

At the latest national census in 2008, the population was 7.6 million, mainly concentrated in the more urbanised Cantons of Zurich, Bern, Vaud, Saint Gallen, Basel and Geneva.

### Climate

Switzerland is in a transition zone. The west is influenced by the Atlantic Ocean, which brings wind and moisture. In the East the climate is more continental with lower temperatures and less precipitation. As a rule winters are mild on the plateau between -5° and +10°C. Summers can be warm, up to 30°C in some regions.

### Language

There are four official languages: German (65% of the population) in the centre and the east, French (18% pop.) in the west and in the north, Italian in the south (10% pop.) and Romansh, a Rhaeto-Roman dialect, in parts in the South-east.

### History and government

Switzerland, officially named Confoederatio Helvetica (CH), began its existence in 1291 as a league of cantons in the Holy Roman Empire. Fashioned around the nucleus of the three districts of Schwyz, Uri, and Unterwalden, the Swiss Confederation slowly added new cantons. The Federal Constitution of 1874 established a central government while giving large powers of control to each canton. Strict neutrality was the policy in both world wars. Geneva became the seat of the League of Nations in 1919 and later the European headquarters of the United Nations and of a large number of international organisations including the International Red Cross and the WHO. In 2002, Switzerland became the 190th member of the UN. Switzerland has a popularly elected bicameral legislature. The executive is composed of seven ministers elected by the legislature and the presidency, limited to one year, rotates among these seven.



*Lake of Brienz in summer*

### Economy

Switzerland has a highly successful market economy based on international trade and banking. Tourism adds significantly to the economy. Switzerland has a worldwide reputation for the high quality of its export manufactures, which include machinery, chemicals, watches, textiles, precision instruments, and diverse high-tech products.

## THE PRACTICE OF ORTHOPAEDICS IN SWITZERLAND

### The birth of the Swiss Orthopaedic and Traumatology Association

The history of the Swiss society goes back a long way. The beginnings of Orthopaedics in Switzerland start with Jean-André Venel who opened the first dedicated Orthopaedic Hospital in 1780 in Orbe, not far from Lausanne. His aim was to take care of crippled children and Venel developed among other working tools a shoe "sabot de Venel" designed to straighten club feet. This pioneering institution evolved, from 1876, into the Hospice Orthopédique de la Suisse Romande in Lausanne. Other institutions dedicated to Orthopaedics were created throughout the country, in 1883 the Schulthess Clinic and in 1912 the Balgrist Clinic, both in Zurich. In Geneva, the Hôpital Gourgas was built in 1884 and dedicated to osteo-articular tuberculosis. The Santa Anna Klinik in Luzern in 1930 began to take care of orthopaedic patients. Some of these institutions and others evolved into University clinics and centres devoted to orthopaedic surgery and later traumatology.



Winter scene in Davos

In 1929, the Swiss chapter of SICOT was founded. This became the “Free association of Swiss orthopaedists” which was renamed in 1953 the “Association of Swiss Orthopaedists” and became in 1963 formally the Swiss Society of Orthopaedics and more recently the Swiss Society for Orthopaedics and Traumatology (SSOT/SGOT). Today the Swiss Society of Orthopaedics and Traumatology is over 700 members strong, dispersed throughout the regions of Switzerland where four national languages coexist. All Swiss Society meetings are multilingual, speakers using their own mother tongue and expecting to be understood by their listeners.

The Swiss Society has thus grown from its status as a chapter of SICOT into a strong professional and academic organisation.

The goal of the Society is to oversee postgraduate education programmes leading to the orthopaedic specialist diploma. The Society is also responsible for a yearly congress attracting over 1,000 attendees each year and a national day of postgraduate teaching. The Swiss registry for implants is a major project in which the Society has invested much effort and means.

The development of modern orthopaedics and traumatology is strongly linked with Switzerland. Because of a robust precision mechanics industry manufacturers could provide the AO group, founded in 1958 by Maurice E. Müller of SICOT fame, with their innovative implants.



Geneva: churches, banks and watches

### The evolution of the Orthopaedic Specialist

There are 37 orthopaedic services in the 189 Swiss hospitals, of which five are the University Services of Geneva, Lausanne, Bern, Basel and Zurich. The Swiss orthopaedic specialist training programme involves a two-year basic surgical rotation, after which the resident has to pass a general surgery examination in the form of an MCQ. The resident can then embark on four years of orthopaedic and traumatology training. At the end of the training, and provided a surgical log of about 400 operations in all fields of orthopaedic surgery is fulfilled, the resident is a candidate for the qualifying examination. If successful the resident will be recognised as an orthopaedic specialist free to pursue an academic career, work in a regional hospital or enter private practice.



The Jungfrau from Interlaken

A Continuing Medical Education programme is available and a quota of points must be obtained by attending it. All training centres provide a curriculum, freely available on the internet, and used by the residents in training every year.

### Collaborative efforts with other international organisations

The Swiss orthopaedic community interacts actively with SICOT and sends participating delegates for presentations to all major meetings. This interaction with international societies is considered vital to the development of Orthopaedics and Traumatology in Switzerland. The major Swiss training centres accept fellows from all over the world to further education and enhance contacts.

**Population:** 7.6 million

**Location:** Central Europe

**Surface area:** 41,285 km<sup>2</sup>

**Official languages:** German, French, Italian, Romansh

**Major religions:** Catholic/Protestant

**Type of government:** Parliamentary democracy

**No. of orthopaedic surgeons:** 618 active members of the Swiss Orthopaedic Society

**No. of SICOT members:** 1 Distinguished; 12 Active; 14 Emeritus; 1 Associate





### 2009 SICOT German Travelling Fellowship Report: the Koenig-Ludwig-Haus Experience

**Dr Cosmas Onyedika Ihezue**

*Consultant Orthopaedic & Trauma Surgeon, Federal Medical Centre, Owerri  
Senior Lecturer, Department of Surgery, Madonna University, Elele, Nigeria*

I was excited to be selected for the 2009 SICOT German Travelling Fellowship at the Department of Orthopaedics, University of Wuerzburg, in Germany. However, the decision to leave my teeming patient population for three months was not easy both for me and for my hospital. Nevertheless, it later became obvious to me that it was one of the best decisions I have ever made as gains from the Fellowship will have a tremendous and far reaching effect on my orthopaedic practice.

When informed of my selection for the Fellowship, I contacted the SICOT Head Office and Prof Maximilian Rudert, Department Head and Medical Director of the Orthopaedische Klinik at the University of Wuerzburg. I arranged to do my Fellowship between June and August of 2009. I was apprehensive about very cold weather as this was going to be my first time in Europe.

The Orthopaedische Klinik, Koenig-Ludwig-Haus, is a busy hospital with four operating theatre suites. An average of 16 orthopaedic surgeries is performed each day. Only orthopaedic cases are seen and treated in this hospital, which is a referral centre specialising in Arthroplasty of the Hip, Knee, Shoulder and Elbow, Arthroscopy of the Knee and Shoulder, Tumour Endoprostheses and Ankle and Foot Surgery. Trauma cases are sent to the Trauma Department of the University, which is situated in another hospital. This arrangement is different to what we have in my country, Nigeria.

I arrived at the Orthopaedische Klinik, Koenig-Ludwig-Haus, on the morning of 8 June 2009. It is the Teaching Hospital for Orthopaedics and the Centre for Musculoskeletal Research of the University of Wuerzburg. The University was founded in 1402. A few minutes later, I was taken to the Medical Director, Prof Maximilian Rudert, an unassuming gentleman, who was much younger than I had expected. He warmly welcomed me and suggested that I should get myself settled in my apartment and return to see him later in the day. This was done. Upon returning, I was taken to the laundry to pick up my uniforms. He introduced me to Dr Baur who took me round the hospital on a familiarisation tour.



*Dr C.O. Ihezue doing a Total Knee Replacement with Prof M. Rudert*

I began my training at the Hospital on 9 June 2009. For obvious reasons, I was happy to spend most of my working hours in the operating rooms. I assisted in an average of four surgical procedures each day, most of which were varieties of total knee and total hip replacements. As my primary interest is in arthroplasty, I worked with Prof Rudert each time he was operating. Initially, I was the second assistant, but with time I advanced to being the first assistant. While working with Prof Rudert, I saw for the first time a wide range of tumour endoprosthetic procedures, including prosthetic replacement of the proximal femur, distal femur, proximal tibia and femoral shaft. Drs Ulrich Noeth and Barthel were very generous in ensuring that my interest was well protected in making the operation roster. I also had great experience in a variety of shoulder and elbow surgeries working with Prof Frank Gohlke, a renowned shoulder surgeon with great experience in shoulder and elbow total endoprostheses and a wide range of arthroscopic and open shoulder operations. I also had the



*Dr C. Ihezue and Prof M. Rudert at Koenig-Ludwig Haus*

privilege of working with Dr Raab, a dynamic man with vast experience in ankle and foot surgery and Paediatric Orthopaedics, who happens to have a vast experience working in my country. While working with him, I assisted for the first time in a replacement of vertebral bodies and at another time intervertebral disc replacement with endoprostheses. I also worked with Dr Barthel and his team in knee arthroscopic surgeries.

In my first weekend in the hospital I had the great pleasure of meeting Prof Jochen Eulert, the former Head of the Hospital and the current Secretary General of SICOT, while studying at the Hospital Library. He was a friendly and caring person. He discussed with me various aspects of my country as it related to SICOT activities, including the SICOT Education Centre in Nigeria. He also introduced me to a German project working to stop rickets in Nigeria. I was invited to one of their meetings and was excited and appreciative that some people far from Nigeria cared so much about us. This reminded me of how much Germans have also contributed to the programme to eradicate tuberculosis and leprosy in Nigeria.



*Dr Cosmas Ihezio receiving a special present from the SICOT Secretary General, Prof J. Eulert, at Steinberg Schlosse, Wuerzburg, Germany*

Prof Eulert and Prof Rudert organised a dinner in my honour at the Steinberg Schlosse. It was located on what I would describe as the highest point of the city, giving a very extensive bird's eye view of the city of Wuerzburg. This was one of my most exciting experiences in Germany, dining with two of the most erudite Professors of Orthopaedics. Drs Noeth and Steinert who are both international scholars and award winners for their distinguished research on mesenchymal stem cell and gene therapy were there and Dr Martin Ludemann, my first friend in Germany, who had helped me settle in quickly. On this occasion, I received a special present from the able SICOT Secretary General. On another occasion, I had the rare privilege of being driven by Prof Eulert to the city of Rothenberg, an old, very beautiful city famous for its walls and its many other attractions. In Rothenberg I visited interesting historic places such as the ancient St. Jacob's Church containing the Holy Blood Altar. It is believed that a capsule of rock crystal in the gold-plated cross on this altar contains three drops of Christ's blood. We also visited the most remarkable Law Museum in

Germany, which gives a record of over one thousand years of history of the law in Germany. From the Museum I was able to understand why Germans have a great respect for their law, a very important factor that has contributed to making the country one of the most successful and safest nations in the world. At the end of the tour we retired to Prof Eulert's family house for a sumptuous dinner. While in his house I was thrilled to discover that he has a great vision for SICOT and the advancement of Orthopaedic practice in the world. We also discussed the prospects for forming an Alumni Association of SICOT Fellows. I was very excited to watch him call my family in Nigeria reassuring them of my comfort. I remain very grateful for all his care.



*Left to right: Dr M. Ludemann, Prof M. Rudert, Dr C. Ihezio, Prof J. Eulert and Dr U. Noeth at Steinberg Schlosse*

I participated in three scientific conferences on Ankle and Foot Surgery, Tumour Endoprostheses, and Shoulder Arthroplasty and Arthroscopy, respectively, each hosted by the hospital. I gained much knowledge and experience from these courses, despite my poor understanding of the German language.

I wish to express my profound gratitude to the Medical Director, all staff members and management of the Orthopaedische Klinik Koenig-Ludwig-Haus (especially the Medical and Nursing Staff), and that of the University of Wuerzburg as well as SICOT for giving me the opportunity to complete this Fellowship which has added much value to my training and practice as an orthopaedic surgeon. My appreciation also goes to Prof Gohlke and his family especially for hosting me in their family house. I must mention that Maria Wagner, a very experienced theatre nurse, Dr Saeed Mansour, a Libyan orthopaedic surgeon in training at Koenig-Ludwig-Haus, Mrs Annelissa Haut, Secretary to Prof Rudert, and all the staff members of the Information Unit of the hospital were of immense assistance to me during the Fellowship.

I thank my institution, the Federal Medical Centre in Owerri, the apex tertiary health institution in the heartland of Eastern Nigeria, for granting me the opportunity to attend the Fellowship.

Finally, I highly recommend this Fellowship to all young orthopaedic surgeons especially those from developing countries. The experience would surely make them better surgeons. Such Fellows, however, will have a greater benefit if they have some knowledge of the German language as most of the clinical records are in this language.



## Official Inauguration of the SICOT Education Centre in Assiut

**Prof Galal Z. Said**  
SICOT National Delegate of Egypt

The SICOT Education Centre in Assiut was inaugurated on 19 December 2009 by Prof Mostafa Kamal, President of Assiut University; Prof Maher El Assal, Dean of the Faculty of Medicine; Prof Cody Büniger, President of SICOT, and Prof Jochen Eulert, Secretary General of SICOT. The Centre is a continuation of the collaboration between Assiut University and SICOT to further the education and training of surgeons and other relevant health care workers, in orthopaedic surgery and traumatology.

The Department has six operating rooms, in full use six days a week. In the year 2008, 3,384 operations were performed. Orthopaedic trauma cases are received and treated in a separate location of the hospital where there are three operating rooms. During 2008, there were 10,100 admissions to the trauma service, of which 7,500 required surgery. General and specialised outpatient clinics are held six days a week. The outpatient department receives on average 80 cases a day.



*Prof Cody Büniger and Prof Jochen Eulert with the staff of the Orthopaedic Department, Assiut University*

The orthopaedic training programme of Assiut University Hospital includes 14 residents in different years of training: two Egyptian Fellows, three African SICOT Fellows, seven Yemeni, two Jordanian, and one Syrian Fellows. Some Fellows are, in addition to receiving training, preparing for Masters or Doctoral Degrees.

The department was accredited as a training centre for residents in 2004 by Prof Charles Sorbie, former President of SICOT. He applied the same rigour in assessing the programme as used for Accreditation by the Royal College of Physicians and Surgeons of Canada. So far, 39 African Fellows from 11 African countries have been trained in the Department, under the Assiut University/SICOT Training Fellowship Programme, helped by funding from the SICOT Foundation.

The Department of Orthopaedic and Trauma Surgery at Assiut University Hospital is staffed by 14 professors, eight assistant professors, five lecturers and 16 assistant lecturers. Conferences, seminars, postgraduate lectures and workshops are routine activities in the Department. These scientific sessions are regularly attended by the members of staff, trainees, allied staff and orthopaedic surgeons from surrounding areas.



*African Fellows using the computer facilities at the Education Centre*



*Prof Galal Said, Prof Cody Büniger, and Prof Jochen Eulert attending the scientific meeting at the Assiut Education Centre*

The SICOT Education Centre in Assiut occupies a large air-conditioned hall in the centre of the Department. It is equipped with eight computers and a high speed Wi-Fi connection. It has been provided with a well stocked library which includes among its volumes, important orthopaedic journals and textbooks. SICOT will provide the Centre with recently published books, CDs, videotapes, and support visiting teachers who will help to foster orthopaedic and trauma learning. SICOT has already established a Telediagnostic station in the Department.

The SICOT Education Centre is making available, every day, learning facilities for all trainees. Doctors from neighbouring countries are invited to benefit from these facilities.



Prof Essam El Sherif, Head of the Department of Orthopaedic Surgery, Prof Galal Said, Prof Büniger, Prof Mostafa Kamal, President of Assiut University, Prof Eulert, Prof Maher El Assal, Dean of the Faculty of Medicine, after signing the agreement

### Assiut University/SICOT Training Fellowships

These fellowships are co-funded by the Assiut University, SICOT, and the SICOT Foundation. On 19 December 2009, an agreement between the Assiut University and SICOT was formally signed to continue this collaboration. The programme is an initiative of Prof Galal Zaki Said and has been ongoing since February 2002.

Four to eight annual fellowships for a 3 to 6 months' training programme at the Assiut University Teaching Hospital are available for young English-speaking surgeons from Africa. Candidates must be under 40 at the beginning of the fellowship and members of SICOT. The fellowships include:

- free full-board accommodation at the Hospital,
- USD 100 per month for expenses, and
- a round trip economy class air ticket.

Fellows are enrolled in the training programme, attend all scientific activities, and assist in surgery. They have access to, and the possibility to train in, all the subspecialties represented in the department. Permanent training programmes start in March and September.

Applications are welcome throughout the year and should be sent to Prof Galal Zaki Said:

Faculty of Medicine                      Fax: +20 88 2400 435  
 Assiut University                         E-mail: [gzsaid@yahoo.com](mailto:gzsaid@yahoo.com)  
 P.O. Box 110 - Assiut  
 Egypt



### Würzburg/Assiut SICOT Fellowship

During the inauguration of the Education Centre in Assiut an educational agreement was also signed and entered into for a period of four years by the Orthopaedic Department of Würzburg University in Germany, the Orthopaedic Department of Assiut University in Egypt, and SICOT, as part of their educational role.

Under the umbrella of the SICOT educational activities, Würzburg University will provide biannual Fellowships for trainees from Assiut University. The Fellowships will be awarded for a period of six months and will include training in an orthopaedic specialty. Accommodation will be provided for free by Würzburg University, in addition to a monthly allowance of EUR 800 for each fellow. Assiut University will provide the return airfare for the fellows. Candidates must be SICOT members and must have more than three years' experience. They should be graduates or affiliated to Assiut University.

This agreement started in January 2010 and includes a total of eight candidates until the end of 2013.



Assiut University Administrative Building

### SICOT Diploma Examination 2010

The eighth SICOT Diploma Examination will take place in Gothenburg, Sweden, on 31 August 2010, and 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 are in the following categories: General Orthopaedics, Trauma, Paediatrics, Pathology, Sports Medicine, Hand, and 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: Adult Orthopaedics and Pathology (30 minutes), Trauma (30 minutes), Paediatrics and Hand (30 minutes), and Basic Sciences (30 minutes).

The number of places available is limited to 24 and registration only becomes effective once the registration form and payment have been received by the SICOT Head Office.

#### **Please note that candidates must:**

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

Online registration is open on the SICOT website. A **judging panel** will review all applications and reserves the right to refuse any application.

For more information about the SICOT Diploma Examination, please visit the SICOT website ([www.sicot.org](http://www.sicot.org)) or send an e-mail to [hq@sicot.org](mailto:hq@sicot.org).

# Gothenburg AIC 2010 Accommodation

## **Gothia Towers** – Mässans gata 24

**Price per single room:** SEK 1,395/1,695 (approx. EUR 132/160)

**Price per double room:** SEK 1,595/1,895 (approx. EUR 150/179)



A first class hotel in the city centre, adjacent to Svenska Mässan. The hotel has several business rooms for our guests' use equipped with computer, printer and Internet access.

## **Hotel Liseberg Heden** – Sten Sturegatan 1C

**Price per single room:** SEK 1,440 (approx. EUR 136)

**Price per double room:** SEK 1,840 (approx. EUR 174)



A 4-star hotel in the city centre close to Svenska Mässan (approx. 3-minute walk). The hotel is built around three beautiful patios.

## **Elite Park Avenue Hotel** – Kungssportsavenyn 36-38

**Price per single room:** SEK 1,500 (approx. EUR 142)

**Price per double room:** SEK 1,700 (approx. EUR 160)



A modern 4-star hotel located on the city's parade street, Kungssportsavenyn, within walking distance of Svenska Mässan. All rooms are equipped with wireless internet connection.

## **Hotel Lorensberg** – Berzeliigatan 15

**Price per single room:** SEK 1,090 (approx. EUR 103)

**Price per double room:** SEK 1,440 (approx. EUR 136)



Hotel Lorensberg is located in the middle of Gothenburg's cultural and entertainment centre. The Svenska Mässan is within walking distance from the hotel. All rooms are non-smoking rooms and wireless Internet is available in most parts of the hotel.

## **Elite Plaza Hotel** – Västra Hamngatan 3

**Price per single room:** SEK 1,600/1,800 (approx. EUR 151/170)

**Price per double room:** SEK 2,000 (approx. EUR 189)



A 5-star hotel located in a magnificent building from 1889 located in the heart of Gothenburg.

## **Quality Hotel Panorama** – Eklandagatan 51-53

**Price per single room:** SEK 1,395/1,495 (approx. EUR 132/141)

**Price per double room:** SEK 1,595 (approx. EUR 150)



A high standard hotel situated just ten minutes walk from Svenska Mässan. On request, there is a free Guest Express shuttle bus between the hotel and the Svenska Mässan.

### Rica City Hotel – Burggrevogatan 25

**Price per single room:** SEK 995 (approx. EUR 94)

**Price per double room:** SEK 1,195 (approx. EUR 113)



A cosy bed and breakfast hotel located right in the centre of Gothenburg close to the main station.

### Hotel Royal – Drottninggatan 67

**Price per single room:** SEK 1,195 (approx. EUR 113)

**Price per double room:** SEK 1,395 (approx. EUR 132)



The oldest hotel in Gothenburg situated right in the city centre. Svenska Mässan is within a short walking distance from the hotel, approx. 1 km, and with the tram five minutes.

### Scandic Opalen – Engelbrektsgratan 73

**Price per single room:** SEK 1,390/1,590 (approx. EUR 131/150)

**Price per double room:** SEK 1,690 (approx. EUR 160)



A large, modern, newly renovated hotel within walking distance (approx. 300 metres) from Svenska Mässan.

### Scandic Rubinen – Kungsporsavenyn 24

**Price per single room:** SEK 1,490/1,690 (approx. EUR 141/160)

**Price per double room:** SEK 1,790 (approx. EUR 169)



A modern hotel situated in the middle of the city centre on the city's parade street Kungsporsavenyn. It is only a short walk from Svenska Mässan.

### Spar Hotel Gårda – Norra Kustbanegatan 15-17

**Price per single room:** SEK 900 (approx. EUR 85)

**Price per double room:** SEK 1,120 (approx. EUR 106)



The hotel is situated in the outskirts of the city centre. A 20-minute walk away from the hotel you will find Svenska Mässan.

### SGS Apartments (Hostel) – Utlandagatan 24

**Price per single room:** SEK 580 (approx. EUR 55)

**Price per double room:** SEK 580 (approx. EUR 55)



SGS is located within 10 minutes walking distance from the Svenska Mässan. SGS has single rooms and double rooms. All rooms are equipped with shower, WC and TV. You have access to a common kitchen. Linen as well as cleaning included in the price on your departure. All guests have access to a laundry room. Due to the location with many stairs, SGS is unfortunately not able to offer appropriate accommodation to disabled people. This is, however, not a hotel and thus it does not offer any hotel service, which is why the prices are so affordable.

Hostel/Self-catering hotel office hours are:

Monday: from 15:00 to 19:00

Tuesday-Friday: from 12:00 to 15:30

Saturday: CLOSED

Sunday: from 15:00 to 19:00

To book a room, please go to:

[www.sicot.org/?id\\_page=307](http://www.sicot.org/?id_page=307)

For any queries regarding accommodation, please contact

Congrex Sweden AB:

Fax: +46 31 708 60 25

E-mail: [sicot.hotels@congrex.com](mailto:sicot.hotels@congrex.com)

# Seventh SICOT/SIROT Annual International Conference

combined meeting with the Swedish Orthopaedic  
Association (SOF)

31 August - 3 September 2010 - Gothenburg, Sweden



Instructional courses for doctors will be held in English. The courses will be given on Tuesday, 31 August 2010 from 09:00 to 12:00. Course registration must be done in advance. More information will be published shortly on the SICOT website ([www.sicot.org](http://www.sicot.org)).

## 1. Trochanteric Hip Fractures

*Cecilia Rogmark, Malmö; Ricard Miedel, Stockholm (SöS)*  
Why do we so often see failures with this "simple" and common fracture? Emphasis on problem recognition, failure prevention and salvage procedures.  
Presentations and practical sawbone exercises.

## 2. Ankle Fractures

*Per Olov Berntsson, Danderyd; Michael Möller, Gothenburg*  
Why do we so often see failures with this "simple" and common fracture? Emphasis on problem recognition, failure prevention and salvage procedures.  
Presentations and practical sawbone exercises.

## 3. The Elbow Engaging Forearm Fracture

*Lars Adolfsson, Linköping*  
Proximal fractures of the forearm that engage the elbow joint cover a wide spectrum of fractures – from the simple olecranon fracture to the complex fracture dislocation and Monteggia equivalents.  
Presentations and practical sawbone exercises.

## 4. Shoulder Arthroplasty

*Anders Ekelund, Stockholm (St Göran); Mikael Etzner, Varberg*  
A seemingly simple procedure with several pitfalls, and in the fracture setting a demanding procedure.  
Live surgery (Ekelund) (with audience interaction) and thorough discussion.

## 5. ACL-reconstruction using single- or double-bundle technique

*Juri Kartus, Uddevalla (NU); Jon Karlsson, Gothenburg*  
Technical considerations and discussion. A film is specially prepared for this tutorial.

## 6. Arthroscopic procedures in gleno-humeral instability

*Anders Nordqvist, Malmö; Vahid Hamidy, Gothenburg*  
Technical considerations and discussion. A film is specially prepared for this tutorial.

## 7. Cementing Techniques in Hip Arthroplasty

*Tore Dalén, Umeå (NUS)*  
Presentation of technical considerations and present knowledge.  
Presentations and practical sawbone exercises with evaluation.

## 8. Hindfoot Osteotomies

*Martin Ålund, Gothenburg; Bertil Romanus, Gothenburg*  
Hindfoot osteotomies are common in the treatment of hindfoot varus and valgus deformities of different etiologies. The purpose of this instructional course is to present the different indications, the operative planning and the effects of these osteotomies on foot biomechanics.  
Presentations and practical sawbone exercises.

## 9. TEN-nailing in Pediatric Fractures

*Per-Mats Janarv, Stockholm (Astrid Lindgren)*  
Treatment of fractures with TEN-nails with emphasis on technical aspects.  
Presentations and practical sawbone exercises.

## 10. Vertebral Fractures

*Rune Hedlund, Gothenburg*  
Treatment of vertebral fractures with emphasis on posterior reduction and fixation.  
Presentations and practical sawbone exercises.

More information about Gothenburg AIC 2010 is available on the SICOT website: [www.sicot.org](http://www.sicot.org)

## Editorial Department

Editorial Secretary: Prof Dr Syed Awais  
Assistant Editorial Secretary: Dr Hatem Said  
External Affairs: Linda Ridefjord  
Special thanks to Prof Charles Sorbie

Rue Washington 40-b.9, 1050 Brussels, Belgium  
Tel.: +32 2 648 68 23 | Fax: +32 2 649 86 01  
E-mail: [edsecr@sicot.org](mailto:edsecr@sicot.org) | Website: [www.sicot.org](http://www.sicot.org)

