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What are the most appropriate investigations?

A 15-year-old boy (height: 1.90 metre) is presented to the orthopedic department with a one-week history of progressive pain in his left knee. This pain is aggravated by exercise and relieved by rest. The complaints began after an intensive basketball training, no trauma is reported.

After the physical examination has been completed, what are the most appropriate investigations?

- Ultrasound of the left knee
- Plain radiographs
- CT scan of knee and lower limbs
- MRI of the left knee

To read more, please go to the SICOT website (accessible to SICOT members only and login is required):
www.sicot.org/?id_page=338

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What should you look for?

A 19-year-old female with the diagnosis of multiple hereditary exostoses (MHE) is presented to our out-patient clinic with a two-month history of progressive left calf pain. This pain is cramp-like in nature, is aggravated by exercise and relieved by rest. She has no pain at night and, apart from the diagnosis of MHE, has no other significant past medical history.

What specifically should you look for on physical examination?

To read more, please go to the SICOT website (accessible to SICOT members only and login is required):
www.sicot.org/?id_page=326

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Is it always a Baker’s cyst?

A 72-year-old woman is presented to our out-patients clinic with a three-month history of progressive right knee pain. She reports no trauma. This pain is sharp in nature, aggravated by exercise and relieved by rest. The physical examination of the right knee shows no swelling or tenderness on palpation. There is no redness or heat. A little Baker’s cyst is palpable.

What are the most appropriate investigations after the physical examination?

To read more, please go to the SICOT website (accessible to SICOT members only and login is required):
www.sicot.org/?id_page=394

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Universal Challenges in Orthopaedics

Musculoskeletal diseases and disability are a major societal burden worldwide affecting the lives of millions of people both in the developed and developing worlds. Every 30 seconds someone dies in a traffic accident and 20-30 million people worldwide are injured. Road traffic accidents are the leading cause of death and disability of people under the age of 45. Trauma patients need organised triage, damage control and multidisciplinary involvement along with sub-acute total repair. At the same time, the population is aging and osteoporosis is becoming a major health issue resulting in fragility of the bones leading to vertebral fractures and hip fractures. Diseases such as HIV, tuberculosis and cancer are frequent co-morbidities or primary diseases.

Orthopaedics Today

The orthopaedic specialty has developed into a number of subspecialties, which treat the various disabilities regionally and according to underlying conditions. The fact that orthopaedic treatments are now more advanced, less invasive and potentially durable, due to new medico-technological developments, has challenged the education system of orthopaedic surgeons worldwide. The epidemiology of orthopaedics varies immensely among locations, countries, economic developments, and in the presence of wars, conflicts and natural disasters, and calls for international collaboration as indicated by WHO and BJD projects.

The SICOT Initiatives

SICOT, being the only global Orthopaedic Society with members from 113 countries, has had to adapt to the increasing challenges of global violence and financial crises. We realised the vulnerability and limitations of orthopaedic associations based on voluntary membership, work, and also the shortcomings of our national delegates and committees structure. However, based on a number of strategic initiatives approved by the International Council in 2009 and a subsequent SWOT analysis followed by immense enthusiasm and hard work among the SICOT Executive Committee, our members, as well as collaborating societies, we aimed at a strengthened SICOT and a framework for future development:

- Collaboration with National and International Societies on major global problems.
- Introduction of subspecialised SICOT sections, including a research and development section, chaired by leading specialists, to catch the important new developments and advances in treatment.
- Modernisation of the business structure and SICOT membership, with strict budgeting and financial control.
- Inauguration of SICOT Education Centres in Assiut (Egypt) and at MONIKI in Moscow (Russia) with plans for other centres in Nigeria, India and China.
- New SICOT teaching such as electronic learning, fellowships, and the “SICOT meets SICOT” Training Programme.
- Focus on the professional recognition of Orthopaedics and Traumatology by evidence based teaching and debates during our congresses.

The Future Milestones of SICOT

A continuum of adaptation and internal reviews is needed to match the busy and multifaceted functions of SICOT. Our main milestones shall include young surgeons’ education, outreach programmes, international research and development of orthopaedics, and the continuous identification of evidence-based treatment guidelines. As a prerequisite for long-term power, we must have financial balance. It all calls for professionalism, unity, passion, and creativity.

Cody Bünger
SICOT President
SICOT Education Centre in Moscow

Sankaranarayanan A. Saravanan
SICOT member - Moscow Regional Clinical Research Institute, Moscow, Russia

One of the most awaited historical events in Russian Orthopaedics & Traumatology, the official inauguration of the SICOT Education Centre, took place on 28 April 2011 at the M.F. Vladimirskiy Moscow Regional Clinical and Research Institute (MONIKI). It was inaugurated by Prof Onoprienko Gennadiy Alekseevich, Director of MONIKI, Prof Voloshin Victor Parfentievich, Chief Orthopaedist and Traumatologist of the Moscow Region, Prof Cody Bünger, President of SICOT, and Prof Tomas Trč, SICOT Vice President for Europe.

Cody Bünger delivering his speech during the inauguration

Department of Orthopaedics & Traumatology

Founded in 1955, the department is the chief referral centre, with more than 55 affiliated departments in the Moscow region (>3,000 beds). This department is oriented towards and serves almost 8 million people from the Moscow region. It also serves as a guide to more than 400 orthopaedic surgeons in the Moscow region and the Moscow Regional Orthopaedics & Traumatology Society.

In many aspects, our department is the pioneer of Russian Orthopaedics for the reasons mentioned below:

- The first department to conduct extensive research in treatment methods for post-traumatic consequences, micro-circulation of bone and physiological osteosynthesis.
- The first department in former USSR to develop new techniques in the treatment of acetabular fractures.
- The first department in former USSR to apply the system of AO in internal osteosynthesis.
- The first department, in association with Prof Ilizarov, to carry out research in distraction-compression osteosynthesis. Ilizarov himself confirmed the fact later.
- One of the first departments to perform Total Hip Arthroplasty in former USSR.

M.F. Vladimirskiy Moscow Regional Clinical and Research Institute (MONIKI)

MONIKI is one of the oldest (over 235 years old) medical institutions in Russia and the one and only clinical research institute in Russia, having the largest faculty for the postgraduate training of doctors and continuing medical education in 29 different medical and surgical specialties. It is a premier institution of the Moscow Region, where research is conducted on 40 different topics. It is also a postgraduate education centre where approximately 5,000 doctors from different countries (Syria, Pakistan, Lebanon, Iraq, Bangladesh, India, Sri Lanka, and CIS countries) annually undergo continuing medical education courses in 30 different specialties. It is the multi-specialty medical institute of the Moscow region with 1,200 beds and 30 departments, 150,000 patient referrals and 23,000 patients undergoing inpatient treatment annually.

Cody Bünger, Onoprienko Gennadiy Alekseevich, and Sankaranarayanan A. Saravanan

Cody Bünger, Onoprienko Gennadiy Alekseevich, and Sankaranarayanan A. Saravanan
Moscow Regional Orthopaedics & Traumatology Society

Founded in 1963, the Society has more than 400 members and conducts scientific and educational meetings every month of the year, except July and August. Its main aim is to facilitate the sharing and exchange of ideas and opinions of orthopaedic surgeons in the Moscow Region.

School of Orthopaedic Surgery

The School of Orthopaedic Surgery was founded in 2005 in memory of the late Prof O.S. Buachidze. Its main goal is to educate the orthopaedic community in Russia and nearby countries and to ensure that a high level of scientific and technological advancement in our specialty reaches everyone from senior surgeons to young trainees. The School has its own ideology and has already successfully conducted six educational courses. The last two courses were conducted under the auspices of SICOT. The participants are mainly from Russia and the CIS countries.

Prof Voloshin Victor Parfentevich is the President and Dr Sankaranarayanan Arumugam Saravanan is the Coordinator of all courses. There is a technically specialised team conducting educational courses professionally.

Future Goals & Perspectives

- Improve the standard of education by conducting educational courses, master classes and conferences, under the auspices of SICOT.
- Actively participate in all SICOT activities.
- Increase the number of SICOT members from Russia and CIS countries.
- Active representation in the SICOT journal.
- Use our official website www.orthomoniki.ru to promote the SICOT/MONIKI collaboration.
Shanmuganathan Rajasekaran, Chairman of the new SICOT Subspecialty Committee for Spine

The SICOT Subspecialty Committee for Spine has recently been established and we are pleased to announce that its first Chairman will be Dr Shanmuganathan Rajasekaran.

Dr S. Rajasekaran has been closely associated with SICOT for more than a decade and has actively contributed to education by being the Secretary General of WOC International for three years (1999-2002) and then being the President of WOC (World Orthopaedic Concern). During his tenure, he initiated regional training fellowships with funds from the SICOT Foundation and initiated an innovative programme whereby more than 89 surgeons were trained in centres of their choice for a very low cost of approximately USD 400 each. The highlight of this programme was that it was adopted as a very viable low cost, highly effective training method and is being continued in India and other south Asian countries. He also initiated the WOC Prof TKS Travelling Fellowship where three international visiting programmes have been conducted purely by the funds collected by him.

Current Academic Positions

- Chairman, Dept of Orthopaedics, Trauma & Spine Surgery, Ganga Hospital, Coimbatore
- Adjunct Professor, The Tamilnadu Dr MGR Medical University, Chennai
- Member, Planning Board, Bharathiar University, Coimbatore
- Member, Planning and Development Committee, University of Madras, Chennai
- Examiner for Orthopaedic Surgery, National Board of Examinations, New Delhi

Positions in Professional International Bodies

- President, Association of Spine Surgeons of India
- President, ISSLS (International Society for the Study of Lumbar Spine), Canada
- Vice President, Tamilnadu Orthopaedic Association
- President-Elect, Indian Orthopaedic Association
- President-Elect, Computer Assisted Orthopaedic Surgery Association of India
- Past President, World Orthopaedic Concern, United Kingdom
- Chairman, Trauma Section, Asia Pacific Orthopaedic Association, Kuala Lumpur, Malaysia
- President, Association of British Scholars, Coimbatore Chapter, British High Commission New Delhi, India

Other Positions & Achievements

Editorial Board Member: Journal of Orthopaedic Science, Japan; Orthopaedics, Hong Kong; Journal of Bone & Joint Surgery (Indian Edition); SPINE Journal; Asian Spine Journal (ASJ); Deputy Editor; SPINE Journal, USA

Scientific Reviewer: Journal of Bone & Joint Surgery (British); SPINE, USA; Clinical Orthopaedics and Related Research; INJURY


National Awards: 17

Awarded Posters and Papers: 41

Reviewed Scientific Papers: 78; H-index: 13 [by Google Scholar], 9 [by Web of Science]
Welcome Messages

Prof Cody Bunger, SICOT President
The 17th SICOT Trainees’ Meeting is to be held in Russia for the second time. We had a successful experience with the 13th Trainees’ Meeting in St. Petersburg in 2002. Russia has a long tradition of being a highly active country in terms of orthopaedic research. As the capital of the Russian Federation and its scientific centres, Moscow has much to offer our young colleagues. As well as its rich scientific heritage, the rich cultural intrigue of this city will most certainly have their anticipated magical effect on our guests. We look forward to seeing you in Russia!

Prof Sergei Mironov, President of AOTRF
On behalf of the Association of Orthopaedics & Traumatology of the Russian Federation, it is my proud privilege to cordially invite you to participate in the 17th SICOT Trainees’ Meeting. We had been waiting 10 years for this wonderful opportunity to welcome orthopaedic surgeons from all over the world to Russia for the second time. This beneficial decision of SICOT is a great honour for our Society and personally for each Russian orthopaedist. We will do our best to offer you the highest level of meeting, quality education and excellent conference hospitality. Leading experts from around the world will be on hand to present clinical and scientific research findings, answer questions, and share expertise and lively discussion with the participants. A multidisciplinary scientific programme was developed and we are sure that attendees will find the sessions both informative and stimulating. We are looking forward to seeing you, dear friends, in Moscow, capital of Russia, in May.

Prof Nikolay Zagorodniy, SICOT National Delegate of Russia
On behalf of the Local Organising Committee, it is a great pleasure for me to welcome you to the 17th SICOT Trainees’ Meeting. This meeting marks the second SICOT event in Russia within a 10-year period and we are truly proud to hold it. The 17th SICOT Trainees’ Meeting will present a diverse collection of topics in instructional lectures, paper presentations, discussion groups, posters, and technical exhibitions. We would like you to take this opportunity not only to enjoy the remarkable city of Moscow, but also the whole of Russia, with its rich history and friendly people.

Call for Abstracts
Abstracts may be submitted via e-mail to ph@peterlink.ru until 1 March 2012. The winner of the Best Trainee Paper Award will be selected from among all abstracts submitted and will be awarded at the Closing Ceremony of the meeting. The prize is three years’ free SICOT membership.

Programme
Sunday, 13 May
Registration and pick-up of badges & documentation

Monday, 14 May
Registration and pick-up of badges & documentation
Scientific sessions
Opening Ceremony
Welcome Reception (included in fee)

Tuesday, 15 May
Scientific sessions
Closing Ceremony

President’s Dinner (additional EUR 120)

Wednesday, 16 May
Day free of scientific sessions

Organisers
17th SICOT Trainees’ Meeting is organised under the patronage of:
- SICOT
- The Ministry of Health of the Russian Federation
- Moscow Government
- Russian Academy of Medical Science
- Association of Orthopaedists & Traumatologists of the Russian Federation
- Central Research Institute of Traumatology & Orthopaedics n.a. Priorov
- NGO “People and Health”

Fees
Residents/Trainees & SICOT Associate Members: EUR 90
Orthopaedic Surgeons: EUR 220
SICOT Active Members: EUR 190

Exhibition
Please contact the organisers at ph@peterlink.ru for more information.
Visit to Belarus
14-17 June 2011

Belarus was part of the former Soviet Union and became independent in 1991. It has a population of around 10 million, of which 2 million live in the capital, Minsk. My mission, as Chairman of the Young Surgeons Committee (YSC), was to promote SICOT, the YSC and the Prague meeting. I was hosted by very friendly people. I first met Mikhail Gerasimenko, who escorted me through my three-day trip. The first half of days one and two were social, and included a tour of Minsk and the surrounding suburbs. I was impressed by the wide spaces, good roads, and efficient public tram system. People were extremely open and hospitable, and the weather was perfect during my visit, which I was able to make thanks to the SICOT Head Office.

On day one, after the city tour, we proceeded to the Minsk 6th City Hospital, where we had a tour of the department and hospital facilities. Minsk 6th City Hospital is one of the largest orthopaedic and trauma hospitals in Belarus. With 320 dedicated beds, it serves a wide variety of orthopaedic specialties. Everything was very clean and organised at the hospital, and the services seemed to be appropriate for the population. There were no busy roads or hospital corridors, like the ones I am used to seeing back home in Egypt.

Our scientific session was in the afternoon with young and senior members of the Belarusian orthopaedic society. This included two presentations, one about SICOT and the YSC, and another about our experience in arthroscopy and sports medicine in Assiut, Egypt.

On day two, I visited the Republic Hospital, which has 60 orthopaedic consultants and also a building dedicated to Orthopaedics and Trauma, but acts as a referral centre for the whole of Belarus. This is headed by Prof Alexander Beletsky, SICOT National Representative. I saw eight operation rooms with the latest laminar airflow and equipment. The hospital is well designed with a good circulation system. I had a chance to discuss cases with the surgeons and found a high level of expertise and an orthopaedic service dealing with everything, from complex trauma, spine surgery, and paediatrics, to revision arthroplasties.
In the afternoon, there was the trainee educational session, which included two lectures about diagnosis of shoulder problems and the other about femoro-acetabular impingement. These were interactive and included voluntary examinations.

This was followed by a trip to the newly renovated Opera House, where we saw a beautiful ballet show. The day ended with an excellent dinner featuring Belarusian cuisine.

Overall, this trip was a great experience, where I had the opportunity to see Belarus with its interesting history and to have the pleasure of meeting its great orthopaedic surgeons.

Mikhail Gerasimenko
Young Surgeons Committee Member
- Minsk, Belarus

From 14 June to 17 June 2011, we were visited by the Chairman of the SICOT Young Surgeons Committee, Ass Prof Hatem Said, at the invitation of the Belarusian scientific society of orthopaedics and traumatology.

The programme of his stay in Minsk was extremely full and included a fine cultural programme. The main interest was Hatem’s presentations at the scientific session of the society, which were devoted to the activities of the YSC and the upcoming Triennial World Congress in Prague.

The seminar on the second day was targeted at young orthopaedic surgeons and was carried out in an easy, friendly, cognitive and interactive manner.

In my opinion, visits like this not only strengthen friendships and mutual understanding between orthopaedic surgeons from different countries, but also help disseminate knowledge about the advanced techniques of diagnostics and treatment of our patients. This trip had a major role in promoting SICOT in the Russian speaking countries. I hope that it will also stimulate the collaboration between Belarus and SICOT and encourage young Belarusian orthopaedic surgeons to join SICOT.

On behalf of the Belarusian scientific society of orthopaedic surgeons and traumatologists, I wish to express my sincere gratitude to SICOT and Ass Prof Hatem Said for taking the time to visit Belarus with his reports about SICOT and the YSC, and also for his brilliant scientific lectures.
The Egyptian revolution: an eyewitness and an orthopaedic surgeon

Khaled M. Emara
Professor of Orthopaedic Surgery, Ain Shams University - Cairo, Egypt

Egypt before 25 January 2011

For any regime, there are four factors affecting its stability, which determine whether the people in the country would accept the regime or reject it. These four factors are: the economy (income and ability to satisfy material needs), freedom (freedom to express opinion), dignity (foreign relations and respect from other countries, and human rights), and hope (democracy as a means to create one’s own future, education for the young, and finding good jobs). For thirty years, the Egyptian government, under the control of the dictator Hosni Mubarak, his family and a small group of oligarchs, had a very poor performance in all four areas.

In the long term, it led to the discontentment of most of the Egyptian population. However, due to oppression, the Egyptians had no outlet to express their discontentment. The only outlet for so many years was violence either in the form of wars or terrorism, or even violence on the streets and sabotage.

This helped to spread ideas and information between huge numbers of people within a very short period of time.

Communication helped to mobilise millions of Egyptians all around Egypt to demonstrate peacefully, asking for fairness and freedom. This communication system also helped to organise field hospitals in the areas where demonstrations took place and to organise people’s committees everywhere around Egypt to protect homes and public buildings against members of the secret police and thieves. There was no specific leader for this revolution, but the sense of unity and the hope for a better future made the vision very clear in everyone’s eyes.

The Revolution

The turning point that changed the equation was mainly the Tunisian Revolution which showed and proved that people can stand up against injustice and change it, and that Mubarak’s regime was not a destiny written for Egypt to be accepted forever. This gave hope for change and a better life. The other factor was the development in communication, including mobile phones, the internet, and social networks.
As a Doctor

My colleagues and I joined the Revolution from the beginning and took part in the demonstrations. In the first few days we treated casualties at university hospitals near the scene, based on the normal on-call schedule and ambulance transfer system. However, after the escalation of violence, patient transfer and first aid became a very dangerous and difficult task. Therefore, invitations to volunteer and donate were posted on all social networks in order to create a field hospital near each demonstration and in Tahrir Square. Everyone took part according to his or her abilities. We received donations in many forms: blankets, medication, first aid, surgical equipment, even sterilisation units. We treated a wide variety of patients in the orthopaedic sector, ranging from gunshots to fractures and sprains. Our job was to do screening, first aid and stabilise patients until we were able to transfer the more critical ones safely to a nearby hospital.

What’s next?

Now, as after every revolution, there is some sense of instability and uncertainty. Nonetheless, there is also that positive attitude and self-confidence which people were lacking for so many years. There are many factors currently shaping the situation on the ground in Egypt, including the people, the external influence, the remains of the Mubarak regime, and the army.
Welcome Message

Combined 33rd SICOT & 17th PAOA Orthopaedic World Conference
Dubai, United Arab Emirates

27 November - 1 December 2012

Welcome to Dubai, United Arab Emirates, the host city for the 33rd SICOT and 17th PAOA Orthopaedic World Conference. We are working hard to provide a conference that covers the latest advances in orthopaedic and trauma care as well as other exciting events for your entertainment and leisure. Thanks to Dubai’s excellent infrastructure, tourism options and a host of other facilities, this conference makes for an experience that will be extremely rewarding for all attending delegates.

Dubai’s geographical location makes it easily accessible from all over the world. Direct flights are available from every continent. More than 120 airlines connect Dubai to over 200 destinations with most flights from Europe, Asia, the Indian subcontinent and parts of Africa lasting less than six hours. Individuals from more than 130 different nationalities call Dubai home. This has resulted in a city that is cosmopolitan in nature and rich in culture. This coupled with a multitude of ultra-modern and exciting shopping malls - that boast attractions such as an indoor ski-slope and one of the world’s largest aquariums - result in a dining and entertainment experience like no other. As the conference will be hosted towards the end of November, when the weather in the Middle East is at its best, delegates will be able to experience some of the best sporting and leisure facilities in the world. All of these factors culminate in providing a conference that will be extremely memorable for all who attend.

Dr Hashem Al Khatib
Conference President

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