



## e-Newsletter

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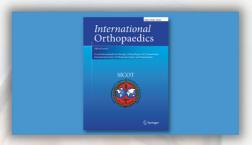


## Join the World Orthopaedic Organisation!

### Find out more about SICOT at www.sicot.org

SICOT, the Société Internationale de Chirurgie Orthopédique et de Traumatologie, is an international non-profit association incorporated under Belgian law. SICOT's mission is to promote the advancement of the science and art of orthopaedics and traumatology at an international level, in particular for the improvement of patient care, and to foster and develop teaching, research and education. It maintains the philosophy that orthopaedic education should be available, accessible and appropriate for surgeons no matter their background, culture or resources. In 2019, SICOT celebrated its 90th birthday!

#### **Benefits of SICOT Membership**



**International Orthopaedics® Journal** 

Stay connected to your profession: receive free of charge the SICOT Journal, International Orthopaedics®, and the SICOT Newsletters.



**SICOT-J Journal** 

SICOT members get a 30% discount when they publish in SICOT-J, a peer reviewed open access journal.



**SICOT Events** 

Benefit from reduced registration rates at SICOT scientific meetings and rub shoulders with the most eminent world specialists.



**Fellowships** 

Take advantage of the SICOT fellowships to further your education and career at international level.



**Awards** 

Become eligible for the SICOT awards granted to surgeons to reward them for their scientific achievement or to help them attend the Congress by supporting them financially.



**Diploma Examination** 

Test your core clinical knowledge and competence and apply for the Diploma Examination.



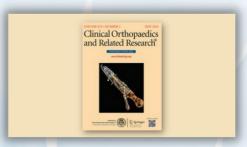
**SICOT PIONEER Videos** 

Gain full access to the wide selection of videos available on our virtual platform, SICOT PIONEER.



OrthoEvidence

Become eligible for a free Premium Account with OrthoEvidence, which is the global source for summarised, high quality orthopaedic research from around the globe.



Clinical Orthopaedics and Related Research® Journal

Get free access to the Clinical Orthopaedics and Related Research® journal.

44th SICOT Orthopaedic World Congress





Combined meeting with the Serbian Orthopaedic Trauma Association



www.sicot.org/belgrade







# Happy New Year!

- The Newsletter Editorial Team
- \* wishes you a peaceful and prosperous 2024!



## **Editorial** Finally Back in Person

Fabio Sciarretta | SICOT Editorial Secretary

The 43rd SICOT Orthopaedic World Congress held on 21-23 November 2023 will remain memorable for several reasons.

After more than three years of mainly virtual and hybrid events, through which SICOT gained enormous popularity being able to have thousands of participants from nearly one hundred countries in the world, it was again gorgeous to have the chance to meet face to face, staying together in person, filling up all the meeting rooms, with more than 3,500 attendees in Cairo, the capital of Egypt. The congress was co-organised with the Egyptian Orthopaedic Association (EOA), whose Executive Board strived to welcome all participants with the world-known hearty Egyptian hospitality.

As only SICOT is able to provide, the scientific programme gave a deep and updated insight into all subspecialties from sports medicine to arthroplasty, from shoulder, hip and knee surgery to paediatrics and infections.

Incredibly, SICOT is each year putting even more efforts in imagining the future of orthopaedics therefore enlarging its already 360-degree offer. Orthopaedic rehabilitation is finally on the frontline and will be representing in future scientific regional and global events as a whole with the surgical sessions. "Advancing science and art of orthopaedics" means nowadays taking care of our patients from the first visit to the end of recovery, including clinical, surgical, motivational, psychological and training skills needed to be offered as a multidisciplinary team including clinicians, surgeons, mental coaches, rehabilitators and trainers. "To foster teaching and education" means nowadays to dedicate the Society's future in building the desire to engage in new education opportunities which translates into intercepting thoughts and motivations of new generations and offering them not just always more space in their specific young surgeons meeting sessions but also

pushing them to become more scientifically active, learning academic writing and peer review in orthopaedics, and pushing them to participate in all our new different e-learning opportunities and in the various hands-on courses organised in the various corners of the world. How proud I have been to be leading the Next-Gen Education Training and Certification ACL V-Train Pilot Project that has had great success and has opened the way to many and many other similar projects!!!

"To foster teaching and education" has to me important significance: to another mostly advocate Inclusion, Diversity and Equality. As SICOT members we all believe and do our best to make orthopaedic education available, accessible and appropriate for surgeons no matter their background, culture or resources, not just in words but in facts too. We have inaugurated our "DIVERSITY SYMPOSIUMS" last year during the Kuala Lumpur Orthopaedic World Congress and we are truly developing partnerships and programmes together with the International Orthopaedic Diversity Alliance (IODA) and the Asia Pacific Orthopaedic Association Women's Advocacy (APOA WAVES) that this year had, with great participation and success, their symposia in Cairo.

The Society is thrilled to have a new SICOT Secretary General, Marc Patterson, from the United Kingdom, and a new SICOT Treasurer, Suresh Sivananthan, from Malaysia, who will be replacing, respectively, James Waddell from Canada and Hatem Said from Egypt. We are all extremely grateful for Dr Waddell and Dr Said's incredible service to our Society.

Our Journals are continuously growing and increasing the volume of papers published, with a high number of contributors from many countries. The Society is enthusiastic to have Marius Scarlat as Editor-in-Chief of International Orthopaedics and Andreas Mavrogenis and Sébastien Lustig as Editors-in-Chief of SICOT-J for the next three years.

We have prestigious journals to which I continue inviting all members from all over the world, together with their juniors, to publish their surgical techniques, reviews and relevant researches.

As for me, I am here to serve as "Your Central Hub of Communication": my projects aim to make all of you more informed and more proactive participants of our precious open-minded and inclusive network, including the newsletter in the SICOT Membership App, enhancing equal

publishing opportunities in orthopaedics, providing articles in various languages, continuing updating and improving the editorial supplies and keeping you constantly updated on SICOT's life, but to do this I need the contribution of each one of you with fresh ideas and suggestions.

We look forward to seeing you in 2024 at the 44th SICOT Orthopaedic World Congress in Belgrade, Serbia!



Marc Patterson New Secretary General



Suresh Visananthan New Treasurer



In-Ho Jeon New First Vice President





# Editorial SICOT 2023: A Resounding Success in Cairo Philippe Hernigou | SICOT President

In the heart of Cairo, where the echoes of history resound through the Egypt of the Pharaohs, the 2023 SICOT Orthopaedic World Congress transcended time and brought together the realms of Orthopaedic History, Science, and Global Practice. The confluence of many young surgeons from around the World in the shadow of the pyramids marked a successful event and a unique journey into the past, present, and future of orthopaedic knowledge, unveiling Ancient Orthopaedics and shaping future orthopaedic Health.

The Scientific Programme organized by Margaret Fok and Khaled Sarraf was shared between Egyptian orthopaedic faculties and faculties from all around the World. The congress featured diverse scientific sessions, including keynote plenary sessions, and specialized lectures, workshops. Topics covered all subspecialties within orthopaedics, such as trauma, arthroplasty, spine surgery, paediatric orthopaedics, sports medicine, and so on. Attendees could showcase their research, participate in dialogues, and obtain professional input. The Educational Day, Young Surgeons sessions, and Subspecialty Day attracted many attendees. At the heart of the conference, the scientific presentations from various corners of the globe were opportunities for attendees to discover new ways to transform their practice and advance patient care. The most recent tools and technology for orthopaedics and pharmaceuticals were on display in the exhibition hall.

By all accounts, the SICOT 2023 Annual Meeting, held on 21–23 November at the InterContinental CityStars Hotel in Cairo with the Egyptian Orthopaedic Association, was a success. Over 3,500 people gathered for four intense days of intense learning, innovation, and teamwork to experience world-class education. Faculty from the Egyptian Orthopaedic Association and SICOT helped create a superb educational programme covering every orthopaedic subspecialty area and including various learning formats. One of the best

things about the SICOT Orthopaedic World Congress is the opportunity to network with colleagues from different subspecialties and around the globe. With over 3,500 participants, the halls were consistently filled to capacity.

SICOT 2023 continued a long tradition of honouring those whose contributions advance the field of orthopaedics, and particularly the Guest Speakers: Vaibhav Bagaria (India), The Man and the Machine: How & Why Robotics is impacting the way we do our Knee Arthroplasties?, Francesco Falez (Italy), THA and spine abnormalities: dual mobility implant?, and Gamal Hosny (Egypt), Limb Reconstruction in War Injuries.

During the Opening Ceremony, the two Presidents, Philippe Herniqou (SICOT President) and Gamal Hosny (Congress President) developed the juxtaposition of ancient and modern perspectives allowing delegates to contemplate the evolution of healthcare and its implications for the future during 4,000 years with presentations that delved into the fascinating realm of ancient orthopaedics in the World and particularly of ancient Egyptian juxtaposition of Medicine. The perspectives with the digitalization in surgery allowed to contemplate the evolution of healthcare and its implications for the future. A key highlight of the Congress was the World Health Organization (WHO) presentation, which provided a global context for the challenges and opportunities facing global health in the 21st century.

The main focus of the SICOT meeting, with the most countries represented in an orthopaedic gathering in the world, is education. Awards and Diplomas at the Orthopaedic World Congress are crucial in recognizing and celebrating outstanding achievements and contributions. One of the best things about the SICOT World Congress is the opportunity to network with colleagues from different subspecialties and around the globe.

Panels of experts or professionals in the respective field typically judged awards. The awards ceremony provided a platform for showcasing and honouring innovations and best practices. These accolades and awards were presented to individuals with exceptional performance in research and scientific presentations. Diplomas Certificates awarded Educational and Achievements and Professional Excellence, recognizing individuals who have excelled at the SICOT Exam.

A particularly unforgettable experience was the

rare opportunity to "converse" with the Royal Mummies at the Egyptian Museum. This encounter with the preserved remains of Ancient Pharaohs provided a tangible link to the past and a deep understanding of the challenges and triumphs of an ancient civilization.

Attending the SICOT Orthopaedic World Congress gives you access to the finest in Professional Excellence, Research, and Education, enabling you to improve your practice meaningfully once you return home. Thus, I hope to see you in Belgrade next year.





# Editorial A Great Congress in Cairo Gamal Hosny | 2023 Congress President

What happened in Cairo on 21–23 November 2023 was a dream come true. The 43rd SICOT World congress was successfully held under the patronage of the Prime Minister of Egypt. The number of participants was about 3,500 including about 1,500 non–Egyptians. I was always thinking about equity of chances. The world population is about 8 billion. The European and North American population is about 800 million which is 10% of the

world population. Therefore, I always wondered why 10% want to teach the 90% everything [in terms of Orthopaedics I mean!]!!! It was not just another successful meeting but a real chance for everybody to learn and teach. It was a good chance to see the ancient Egyptian values: forgiveness, diversity & great respect for people with disabilities. I hope it was a great joy for all of my SICOT friends.





### **Editorial**

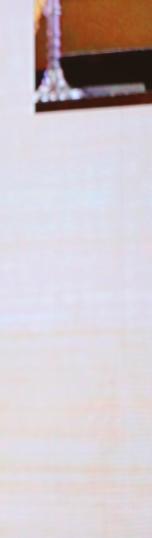
### A Congress Review in Arabic

Hatem Said | Past SICOT Treasurer

عاد مؤتمر SICOT إلى القاهرة في عام 2023، بعد 20 عاما من زيارته الأولى في عام 2003. كان هذا مؤتمرا مثيرا للغاية يعقد بالاشتراك مع الجمعية المصرية لجراحة العظام. شارك أكثر من 3000 طبيب في المؤتمر لجعله ناجحا للغاية على المستوى العلمي والاجتماعي والمالي. كان من المثير رؤية الأطباء من جميع أنحاء العالم يشاركون معرفتهم العلمية ويتفاعلون اجتماعيا ويرون القاهرة الرائعة. أقيم حدث التواصل في متحف الحضارة بعد جولة ليلية خاصة، بتصميمه المذهل والحصول على فرصة لرؤية ملوك وملكات الحضارة المصرية القديمة

The SICOT Congress returned to Cairo in 2023, 20 years after its first visit in 2003. This was a very exciting congress to be held in combination with the Egyptian Orthopaedic Association. Over 3,000 doctors participated in the congress to make it a huge success on a scientific, social and financial level. It was exciting to see doctors from around the world share their scientific knowledge and interact socially and see the wonderful Cairo. The Networking Event was held in the Civilization Museum after a special nightly tour, with its spectacular design and getting a chance to see Kings and Queens of the Ancient Egyptian Civilization.







## Editorial Une vision et reportage de la présence francophone au Congrès de la SICOT 2023

Marius Scarlat | Editor-in-Chief, 10 Journal

Langue officielle de la SICOT depuis 1929, le français a été d'une manière graduelle et subliminale discrètement remplacé par l'anglais.

Cette transition s'est manifestée également au niveau du journal de la société et au niveau des séances de formation. Etant originaire de Paris, ville lumière, où les chirurgiens des années interbelliques se réunissaient à l'Hôtel de Crillon en passant des journées à discuter des dossiers de la science et en faisant des projets qui nous ont permis de devenir une société importante, le congrès se tient actuellement dans des endroits différents de la planète dans des pays des cinq continents, ce qui témoigne du rayonnement international de la société.

La chirurgie française est bien présente à la SICOT avec un président en exercice de cette belle société qui est le Professeur Philippe Hernigou de Paris, épaulé par les nombreux membres français dont la belle présence de l'école lyonnaise (Professeur Sébastien Lustig, Professeur Jacques Caton), de l'école Lilloise (Professeur Federico Canavese) ainsi que d'autres membres importants dont publier leurs noms prendrait la totalité de cette page.

Le congrès annuel de la SICOT a été hébergé cette année après deux années difficiles dues à la pandémie et l'absence du congrès en 2020, par la ville du Caire (Cairo), capitale de la république arabe d'Egypte, une ville impressionnante, spectaculaire et tentaculaire avec ces 25 millions d'habitants, la beauté du fleuve, le Nil, qui traverse le centre-ville, l'ampleur des monuments historiques datant de plusieurs millénaires ainsi que la présence d'hôtels confortables, de centres de conférence, de quartiers modernes.

La conférence fut organisée par la SICOT avec la Société Egyptienne (le Professeur Gamal Hosny) et notre ami membre de plusieurs comités de la SICOT et du board du Journal de la société, Hatem G. Said.

Le congrès du Caire a eu lieu du 21 au 23 novembre 2023 dans le somptueux hôtel InterContinental City Stars du Caire qui hébergeait un centre de conférence capable d'accueillir plus de trois mille chirurgiens, médecins, exposants et représentants... etc.

La qualité des locaux et la qualité de la prestation audio-vidéo de la conférence ont été irréprochables.

Le congrès a eu lieu avec la présence de tous les membres marquants de la SICOT notamment des chirurgiens provenant des cinq continents avec un panel d'experts réunissant des spécialistes en traumatologie ostéoarticulaire (un sujet chaud et important pour la société car beaucoup de jeunes chirurgiens des pays en voie de développement beaucoup plus intéressés sont traumatologie mais également spécialités en pleine dynamique (la chirurgie articulaire par prothèse au niveau des hanches, des genoux, la chirurgie de l'épaule, la chirurgie arthroscopique, la chirurgie ligamentaire, la chirurgie du pied et de la cheville, la chirurgie du rachis. Tout cela étant présenté à la conférence du Caire sous la forme de réunion d'experts, des tables rondes, des sessions de présentation pour les jeunes chirurgiens avec des papiers libres et présentations orales qui étaient maitrisées et coordonnées par des chirurgiens avec plus d'expérience et avec notamment une expérience dans la présentation et les publications.

Les temps de paroles ont été respectés ce qui a permis d'avoir une dynamique saine de cette conférence et d'éviter les longueurs interminables de certaines réunions dont on a de mauvais souvenirs.

Le but de la réunion étant de rassembler le plus de collègues autour de sujets récents et intéressants a été atteint. La conférence de l'invité d'honneur du congrès, le Professeur Francesco Falez de Rome abordait un sujet d'actualité notamment la relation entre la hanche opérée et le rachis afin d'éviter des conflits et des instabilités prothétiques. Cette conférence a été suivie par des centaines de participants dans la salle.

Une autre conférence a été faite par le Professeur Gamal Hosny qui nous a présenté des expériences impressionnantes de l'école égyptienne de traumatologie et de la chirurgie de reconstruction, ce qui nous permet d'apprendre et devoir les énormes quantités d'activités et de travail réalisées dans ce pays, ainsi que la qualité des résultats et la satisfaction des patients.

Une partie sociale a inclus des soirées thématiques notamment une sortie sur le Nil à bord d'un bateau de plaisance. Deuxième soirée importante qui a réuni plus de 500 personnes dans le somptueux décor du Musée des Cultures et des Civilisations du Caire, un musée moderne construit par des architectes célèbres avec une qualité technique impressionnante et qui abrite entre-autre les momies des pharaons des cinquième et sixième dynasties.

Bien entendu le repas fut prévu loin des momies avec une belle organisation et un diner de très bonne qualité. L'eau fraiche et les jus de fruits ont été de mise avec une très bonne hydratation des participants.

J'ai quitté le Caire avec une excellente impression de tout ce qui fut effectivement réalisé par nos collègues avec un excellent cadre, des prestations scientifiques de grande qualité et une hospitalité absolument remarquable.





## **Congress News**

### 44th SICOT Orthopaedic World Congress

Marko Bumbasirevic | 2024 Congress President

On behalf of the International Society of Orthopaedic Surgery & Traumatology (SICOT) and the Serbian Orthopaedic Trauma Association (SOTA), it is our great pleasure to invite you to join us in wonderful Belgrade from 25 to 27 September 2024 for the 44th SICOT Orthopaedic World Congress.

What a great time to visit this lovely white city. The days are long, the sun is warm(ish) and the science is hot. The meeting will see the return of the Sava Congress Centre with a view of Kalemegdan fortress. It is a great place for our congress: spacious and light and just minutes away from both the airport and the city centre. Our Congress Centre has been fully renovated and will be the biggest in eastern Europe at the time the Congress will be held. We are sure that all the expectations of the most demanding SICOT delegates will be met in Belgrade.

For those of you who are new to Belgrade, you will find a beautiful city: open, green, small enough to walk around, situated at the confluence of two rivers and with a colourful and pretty city centre unblemished by skyscrapers. It doesn't take long to understand why Belgrade is home to the 'hospitality people'. Is it the many friendly bars? The way in which striking modern Danish-designed buildings are aligned along the many waterways? Or could it be the oldest park located near Milošev konak? Or is it the new Belgrade waterfront in the middle of the city? Whatever it is, aside from the famous sights and the smiles, you will enjoy a city with some of the best restaurants in the world, as well as many bistros and bars, where almost everyone speaks fluent English.

Altogether a worthy location for the equally wonderful SICOT meeting. With cutting-edge science, inspirational speakers, and unrivalled networking opportunities, you really need to be a part of it.

We look forward to welcoming you!





## Committee Spotlight Navigating the Orthopaedic Fellowship: Experience in Australia

Tamer Kamal

#### Introduction

Orthopaedic fellowships in Australia offer a unique and invaluable opportunity for orthopaedic surgeons to further refine their skills and knowledge in a specialized field of orthopaedics. This review aims to shed light on the experiences gained during MY fellowships in Australia and provide advice on choosing the right fellowship, obtaining AHPRA registration, and understanding what to expect during this IMPORTANT journey.

#### 1. Choosing the right Fellowship

The first step in choosing the right fellowship is identifying your specific area of interest within orthopaedics. Australia offers a wide range of fellowships in subspecialties such as joint replacement, sports medicine, trauma, and spinal surgery, among others. Once you are settled, it's time to do your research and seek advice from mentors, colleagues, and previous fellows to gain insights into the reputation and quality of different programmes.

#### 2. Accessing Fellowship Information

The Australian Orthopaedic Association website offers an extensive list of approved registered fellowships organized by location and subspecialty with contact information and ways to apply.

My advice is to contact fellowship organizers at least 18 months in advance, as the majority of those fellowships are heavily subscribed and sought after. Don't be disheartened by rejection; ask to be contacted if anyone pulls out, as individual circumstances change, and it's common for people to withdraw due to personal or other professional reasons.

#### **AHPRA Registration**

To practice medicine in Australia, you must register

with the Australian Health Practitioner Regulation Agency (AHPRA). Before applying, it's crucial to understand that AHPRA registration can be lengthy and stressful.

One major challenge with AHPRA is their understaffing and dealing with graduates from various countries can be problematic. Most hospitals will provide you with a contact to help you with your registration. Make sure to prepare all necessary documentation, including proof of qualifications, identification, and evidence of English proficiency, as required by AHPRA. Allow ample time for ECFMG credentials verification and document certification. Make sure you have copies of your references, House officer training certificate, and postgraduate credentials. The process might take anywhere from 6 to 18 weeks depending on individual circumstances. Remember, you will still need to apply for a working visa, which is a straightforward process. Many candidates arrive in Australia ready for work, only to find that their AHPRA registration is still pending. Once registered you will need to make sure you apply for private indemnity insurance (you will be able to find various online offers and make sure you speak to them to get the best offer suited for your circumstances) and complete the paperwork for each hospital you will be working in (your bosses will let you know).

#### **Housing and Living Arrangements**

Finding a place to live might be difficult, as there are major housing issues in Australia, and most real estate agents prefer long-term leases. My advice is to contact various agents via email and phone and stay in contact prior to arriving. Organize viewings within the first week of arrival (you might need to book short-term accommodation during the first couple of weeks). Some agents are happy to arrange for virtual viewings or if you have someone to do viewings on your behalf, that would be helpful.

Various forums for fellowship seekers exist on Facebook and other social platforms. For example, check out "Fellowship Life Transplant Services" where you might find various fellows offering housing options or selling their vehicles and furniture prior to returning to their respective countries, or "lease breakers" who need to find someone to take over the rest of their lease.

#### What to Expect During your Fellowship

#### 1. Clinical Exposure

Orthopaedic fellowships in Australia provide unparalleled clinical exposure. Expect to work closely with experienced surgeons, participate in surgeries, and manage patients independently. Most fellowships will have public and private sector components allowing fellows to see a wide variety of cases and complement their training and experience. Many fellowship programmes also include research components, providing a chance to contribute to orthopaedic knowledge and build your academic portfolio.

#### 2. Work-Life balance

While fellowship programmes can be demanding, it is crucial to maintain a healthy work-life balance. Make time for self-care and exploration of the Australian lifestyle. Most mentors will encourage you to explore Australia and are very understanding and supportive of your needs.

#### **My Experience**

I was fortunate enough to land two AOA approved fellowships in foot and ankle surgery in Melbourne

and Sydney respectively. Both fellowships included a mix of public and private hospital exposure while the Melbourne fellowship was more focused on elective foot and ankle service provision with great exposure to new surgical techniques like MIS (Minimally Invasive Surgery), ankle arthroplasty and ankle arthroscopy. I tailored my Sydney fellowship to work in the hub for diabetic foot surgery in New South Wales. This provided me with understanding, needed managing experience and ability to manage complex foot neuropathy and lower limb reconstruction. It allowed me to work closely in the MDT approach to plan and manage those complex cases effectively and efficiently.

In conclusion, orthopaedic fellowships in Australia offer a transformative experience that can shape your career in profound ways. By choosing the right fellowship, successfully obtaining AHPRA registration, and knowing what to expect during your fellowship journey, you can make the most of this opportunity for professional growth and personal enrichment. Remember, the right fellowship is just the beginning of a rewarding career in orthopaedic surgery.

Useful links:

- 1.www.ecfmg.org/psv/
- 2.www.ahpra.gov.au
- 3.www.surgeons.org
- 4.aoa.org.au/orthopaedictraining/fellowshipsheader/aoa-accreditedfellowships
- 5.www.bizcover.com.au/professional-indemnity/
- 6.www.facebook.com/groups/369788716547533



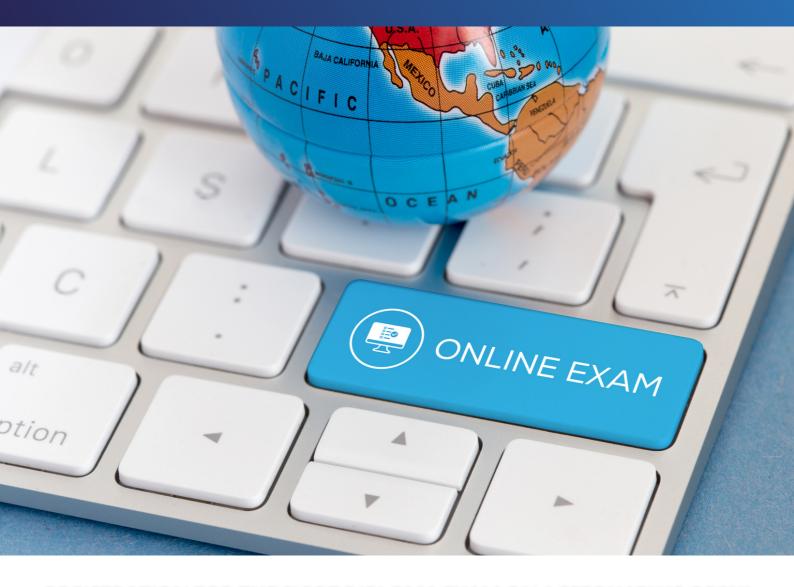
# Committee Spotlight Advocacy Committee Aritz de Leon | Active Member

We are a group of orthopaedic surgeons from around the world, united as part of SICOT, working collaboratively to advance various causes, goals and objectives that are worthy of advocacy and to raise public awareness and outreach.

Our mission is to promote the interests of orthopaedic surgeons and patients, advocate for the significance of orthopaedic care, and influence policies related to musculoskeletal health.

We are actively fostering collaboration with various organizations, societies, and nations to collectively address healthcare challenges.

In summary, an advocacy committee in orthopaedics plays a pivotal role in ensuring the continued advancement of the field, optimal care for patients, and the provision of necessary resources and support to orthopaedic professionals for delivering high-quality medical services.



#### **REGISTRATION FOR THE SICOT DIPLOMA EXAM ON 1 FEBRUARY IS OPEN!**

Part 1 of the Examination, made up of MCQ's, will be delivered virtually via our PIONEER Learning Management System.

#### **Eligibility Requirements:**

The SICOT Diploma Examination is aimed at young orthopaedic surgeons in training. To be eligible, candidates must by 11 January 2024:

- register online here;
- send to <u>exam@sicot.org</u> 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;
- be members of SICOT or in the process of applying for membership at the time of registration and their 2024 membership dues must be paid. For more information about SICOT membership application, please contact <a href="https://doi.org/10.1007/journal.or
- A judging panel will review all applications and reserves the right to refuse any application.

Don't miss your chance to test and demonstrate your clinical knowledge and competence: the exam covers the whole spectrum of Trauma & Orthopaedics.



# SICOT Brainstorming Enhancing Equal Publishing Opportunities in Orthopaedics Mohamed Kamal Abdelhaleem | Active Member

#### Introduction

In the field of orthopaedics, it is crucial to promote diversity and inclusivity by providing equal publishing chances to all authors, including non-English speakers. This article series aims to explore innovative ideas and practical solutions for journals to foster a more inclusive publishing environment. By addressing the challenges faced by non-English speakers and embracing multiculturalism, we can drive meaningful change and uphold our society's mission.

#### **Article 1: Understanding the Challenges**

This article will dive into the existing barriers that non-English speakers encounter when submitting their research to orthopaedic journals. It will explore the language related obstacles, cultural biases, and potential inequalities that may exist in the peer-review process. By raising awareness of these challenges, we can lay the foundation for implementing effective solutions.

#### **Article 2: Establishing Language Support**

This article will discuss strategies for journals to provide comprehensive language support to authors whose first language is not English. It will explore the importance of offering translation services, language editing assistance, and guidelines for non native English speakers. By implementing these measures, journals can help authors overcome language barriers and ensure their research is accurately communicated.

#### **Article 3: Promoting Cultural Diversity**

This article will highlight the significance of embracing cultural diversity in orthopaedic publishing. It will explore the benefits of including diverse perspectives and experiences in research articles, as well as the challenges faced by authors from different cultural backgrounds. Practical

suggestions will be provided on how journals can actively promote and encourage multiculturalism in their publications.

#### **Article 4: Review Process and Evaluation**

This article will focus on improving the review process to eliminate biases and ensure fairness. It will discuss the importance of training reviewers to recognize and appreciate diverse research approaches, methodologies, and cultural nuances. Additionally, practical suggestions will be offered to enhance the evaluation criteria to encompass a broader range of research outputs.

#### Conclusion

By publishing this article series, we aim to initiate a dialogue and provide practical guidance for journals in the orthopaedic field to enhance equal publishing chances for all authors. By embracing diversity, supporting non-English speakers, and fostering a multicultural environment, we can drive a significant change in the field of orthopaedic research.





## SICOT Brainstorming Revolutionizing Orthopaedic Care: The Power of Value Based Health Care

Mohamed Kamal Abdelhaleem | Active Member



#### Value-Based Health Care (VBHC) in Orthopaedics

Value-Based Health Care (VBHC) is revolutionizing the healthcare industry by improving health outcomes and reducing costs. This innovative concept has gained popularity in the field of orthopaedics, where it has several applications that can improve patient outcomes and satisfaction. From patient-reported outcome measures (PROMs) to care pathways and integrated practice units (IPUs), VBHC offers a comprehensive approach to patient care that is based on best practices and clinical guidelines.

#### Patient-Reported Outcome Measures (PROMs)

One of the primary applications of VBHC in orthopaedics is the use of patient-reported outcome measures (PROMs). Orthopaedic providers can identify areas for improvement in patient care by collecting and analyzing PROMs data. They can also tailor treatment plans to meet the unique needs of each patient.

To standardize outcome measurement globally, the International Consortium for Health Outcomes Measurement (ICHOM) developed minimum outcome sets by medical condition, drawing on international registries and provider best practices.

ICHOM has already developed PROMs for 4 musculoskeletal conditions:



Low back pain



**Hand & Wrist Conditions** 



Hip & Knee Osteoarthritis



Inflammatory Arthritis

#### **Care Pathways**

VBHC can also be applied to orthopaedics through the use of care pathways, which are standardized approaches to patient care based on best practices and clinical guidelines. By implementing care pathways, orthopaedic providers can improve the consistency and quality of care, reduce complications and readmissions, and ultimately improve patient outcomes.

#### **Integrated Practice Units (IPUs)**

In orthopaedics, IPUs can be used to treat patients with conditions such as low back pain. An IPU team composed of clinical and nonclinical personnel can work together to provide outpatient, inpatient, and rehabilitative care, as well as supporting services such as nutrition and behavioral health. By integrating patient education, engagement, and follow-up into care, IPUs can offer a full care cycle for low back pain patients. Additionally, outcomes, costs, and processes can be measured using a common platform, and joint accountability is accepted for outcomes and costs. This approach can greatly improve the value of care provided to low back pain patients.

#### **Patient Education and Resources**

Patient education and resources are also important applications of VBHC in orthopaedics. By providing patients with education and resources to manage their conditions, orthopaedic providers can improve patient engagement, reduce the need for follow-up care, and ultimately reduce costs.

In conclusion, Value-Based Health Care (VBHC) offers multiple applications in orthopaedics that can enhance patient outcomes and satisfaction. By implementing patient-reported outcome measures (PROMs), care pathways, integrated practice units (IPUs), and patient education, orthopaedic providers can effectively deliver improved value to their patients and enhance the overall quality of care.





## SICOT Brainstorming Technology-Enabled Regional Trauma Care Networks in the 21st Century

Michael Shenouda

Trauma Networks, built around major trauma centres (MTCs), were set up as a way of ensuring the most severely injured patients receive the best care, at the most appropriate location, usually in specialised hubs equipped to deal with complex polytrauma patients.

Although Trauma Networks have been well established across the world, a lot of their supporting processes were put in place in a different digital era with limited technological capabilities. We have all worked in organisations where legacy processes have stuck around, even as technology has advanced, and these outdated processes have, unfortunately, slowed down the adoption of technologies that can greatly enhance patient care throughout the networks.

#### **Great concept, outdated execution**

The idea of getting 'the right care, at the right place, and at the right time' is as relevant now as ever. In healthcare systems around the world that are grappling with limited resources, this concept takes on even greater importance. Many MTCs are almost at a breaking point as they face a host of challenges, many of which revolve around resource allocation and cross-organisational care coordination.

These challenges arise from the need to ensure smooth collaboration among the many specialties within and between multiple teams at MTCs. The complexity multiplies when you consider the numerous teams and departments in trauma units, planned care hubs, and minor injury units linked to MTCs. These units vary in terms of their capabilities, resources, and the specialist expertise they have on site. They are also spread out geographically, which adds an extra layer of complexity to the coordination of patient care.

And so, even when there's only the slightest doubt, we will always look to transport patients to MTCs at

a very early stage in their treatment journey, where they often remain throughout their care episode. This approach is meant to ensure patients receive the best possible care, but it has placed an unsustainable burden on MTCs, potentially causing patients with the greatest need of specialised care facing delays in accessing it.

#### The landscape has changed

We've seen, in all walks of life, how technology has advanced at an unprecedented rate and scale, certainly much faster than the rate of transformation of healthcare processes. The digital solutions available today have the potential to greatly improve care coordination and facilitate integrated, system-wide delivery of healthcare. Used well, these can lead to improvements in prehospital care, transparency, governance, workforce satisfaction, operational efficiency, and patient engagement and experience.

Importantly, technology can support and enable appropriate care provision and delivery agnostic of location, offloading capacity – where clinically safe to do so – back to regional trauma units, reducing the burden on MTCs. We should be aiming to provide patients with MTC-level care in a regional trauma unit without overwhelming the capacity and resources of the MTC.

#### How can technology enable this?

Within prehospital care, technology plays an important role in equipping paramedics with comprehensive information to make well-informed decisions. We can achieve this by integrating with various data sources, including electronic health records and primary care systems. We can go further by supporting clinical staff with diagnosis-specific guidance and protocols for consistent triage standards. We can provide real-time input from MTC Trauma Leads to paramedics in the field, as well as coordination

with Trauma Leads in regional units to guide patient care to the most suitable facility. Throughout this process, the MTC remains a source of real-time virtual support for these units and, when necessary, secondary transfers can be arranged, all while upholding a high standard of care.

facilitates Moreover, technology crossorganisational collaboration through remote care pathways, which involve asynchronous referrals and remote assessments. We can complement this by streamlining risk assessment, triage, and prioritisation, as well as effective escalation plans. Specialist teams at the MTC can gain complete visibility of all patients across the network who require their expertise. They can then prioritise patients, offer virtual support to local units through virtual ward rounds or virtual multi-disciplinary team meetings, and arrange for the transfer of those in need of ongoing specialised care to the MTC. This approach empowers patients to access remote care services from MTCs at their local trauma units, with shared decision-making involving the local unit, the MTC, and the patient, making the process more patient-centric.

We can enable the optimisation of patient flow by enhancing network visibility and planning, identifying facilities with available and suitable resources and capacity. The aim here is not to compromise patient care by sending patients to a unit without the required expertise or capabilities. Instead, we can take a proactive approach that ensures patients, in an increasingly strained system, get treatment quickly at an appropriate care facility rather than experiencing delays at the MTC.

Repatriation and rehabilitation processes can also be enhanced with technology. We can identify patients who need tailored care plans for discharge from the MTC earlier and more readily, allowing them to be efficiently repatriated to the appropriate trauma unit, and once again relieving pressure on MTCs. Rehabilitation can be enriched through improved therapy visibility across the units, informative patient leaflets and videos, patient-led rehabilitation, and comprehensive monitoring, including Patient-Reported Outcome Measures tracking.

Lastly, we can capture end-to-end, detailed clinical data across the network, which sets the

stage for a comprehensive trauma database at the regional or even national level. This database can be a valuable resource for ongoing audits, research, and policy development.

With a fully technology-enabled Trauma Network, we can deliver MTC-level care at local trauma units efficiently and securely, enhancing care coordination, transparency, and governance, all in a timely manner. This approach ultimately raises the overall quality of trauma care for the greatest number of patients, which is, after all, the primary goal of Trauma Networks.

#### The crucial shift

Our current healthcare processes heavily depend on people, and any disruption in human coordination can cause a ripple effect across the entire system. That's why we need to shift our care models so they rely more on technology, rather than individuals.

This is not to say that clinical staff will stop treating patients or that we aim to automate care aspects to reduce the workforce. Instead, it's about moving the bottleneck away from individuals and towards technology, which can handle a much higher threshold. In the context of Trauma Networks, this approach can lead to optimising resources and capacity at MTCs while still maintaining a commitment to delivering high-quality patient care.

The key here is to harness the right technologies to sustain high-quality patient care for the long term, ensuring that patients receive expert care when and where they need it. Trauma Networks are perfectly positioned to leverage the readily available technology to enhance and support patient care provision, but it's important to note that process transformation is an essential step in unlocking this potential.

In failing to capitalise on the opportunities technology offers, we risk undermining the very essence of Trauma Networks' core objective: ensuring that all injured patients receive the best care at the most appropriate location in the timeliest manner possible. This shift towards technology is about enhancing, not replacing, the vital work of our dedicated healthcare professionals.



Integrating Artificial Intelligence (AI) into medicine is not a novel concept; however, its unprecedented acceleration over the past decade has significantly transformed healthcare landscapes. Currently, AI finds applications in diagnostic imaging, clinical decision support, drug discovery, personalised medicine, and virtual health assistance. These applications, driven by machine learning, neural networks, and natural language processing, offer benefits like improved efficiency, accuracy, and cost-effectiveness in the healthcare delivery (1).

Al is reshaping the landscape of orthopaedics, offering transformative solutions across diagnostics, treatment planning, postoperative care. Incorporating AI has revolutionised diagnostic procedures in diagnostics, offering enhanced accuracy and efficiency. advanced algorithms, Al aids in interpreting radiographic images and detecting anomalies like bone fractures or degenerative changes with increased precision. Moreover, it integrates diverse data sources for a holistic diagnostic perspective. While the promise of speed and precision is immense, challenges such as over-reliance, the potential for false positives/negatives, and the "black box" nature of AI algorithms warrant cautious integration. Balancing human expertise with Al's capabilities is essential to fully harness its potential in orthopaedic diagnostics (2).

Moreover, integrating AI into surgical planning and robotics has ushered in a new era of precision and efficiency. Advanced AI algorithms assist surgeons in preoperative planning by optimising procedural steps, predicting potential complications, and customising interventions based on individual patient anatomy. Additionally, robotic-assisted surgeries, guided by AI, enhance precision, reduce human error, and can lead to shorter recovery times. These advancements, while promising, necessitate rigorous training for orthopaedic surgeons and continuous algorithmic refinement to ensure patient safety and optimal outcomes (3).

The post-operative phase is critical for ensuring optimal patient outcomes, and the advent of AI is significantly enhancing rehabilitation and postoperative care. Al-driven physiotherapy regimes, tailored to individual patient needs, optimise trajectories and consistent recovery ensure progress. Wearable devices equipped with AI algorithms monitor rehabilitation exercises, track recovery metrics in real-time, and provide patient and clinician feedback. While these innovations promise improved recovery and reduced rehabilitation durations, it's imperative to maintain touch, ensuring that technology complements, rather than replaces, the essential patient-clinician relationship (4).





Within the sphere of orthopaedics, the emergence of AI is also markedly influencing the training and education of healthcare professionals. Al-driven simulations and virtual reality platforms offer immersive, orthopaedic trainees hands-on experiences, enabling them to practice complex surgical procedures in a risk-free environment. These tools provide real-time feedback and refine professionals' surgical techniques and decisioncapacities. Moreover, makina AI-enhanced educational software allows for personalised learning pathways, adapting content based on individual progress and areas of weakness (5).

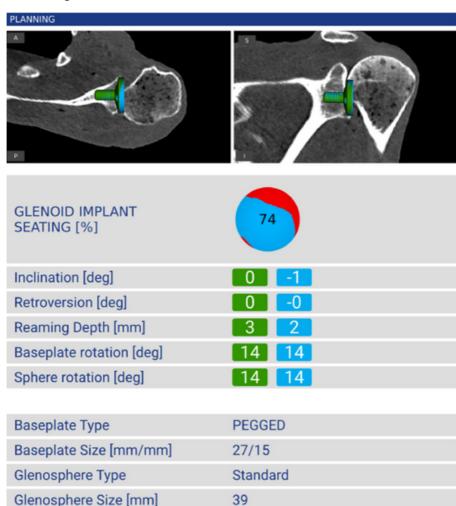
The field of orthopaedics also stands to benefit from predictive analytics. By analysing vast datasets, AI can predict potential complications, patient outcomes, or even the likelihood of future orthopaedic issues based on genetics, lifestyle, and other variables. Such foresight could guide preventative care, potentially averting more severe orthopaedic concerns.

However, the integration of AI into orthopaedics is not without challenges. Ethical considerations around data privacy, potential biases in AI algorithms, and the risk of over-reliance on technology at the cost of human expertise are issues that need addressing. Nonetheless, with a

balanced approach, the symbiosis of AI and orthopaedics heralds a future of enhanced patient care, streamlined procedures, and improved outcomes.

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## Women in Leadership *IODA Charter*

Jennifer Green | Active Member

The International Orthopaedic Diversity Alliance (IODA) is a collaboration established by orthopaedic surgeons in leadership, advocating for the inclusion of women and minorities who are under-represented in orthopaedic surgery. IODA, a not-for-profit organization incorporated in the US with ~1,500 international members and >10,000 social media followers. The Board of Directors represents orthopaedic surgeons and trainees around the globe and the membership includes many national Orthopaedic Association Presidents.

#### The IODA Charter

The IODA Charter is a call to action to commit to diversity in orthopaedics and has been signed by more than 23 international orthopaedic associations. Diverse organisations attract the top talent, are more innovative and make better decisions. The orthopaedic literature increasingly demonstrates that the lack of diversity in orthopaedics contributes to inequity in healthcare delivery. A more diverse orthopaedic workforce is a priority for equity in healthcare.

### The IODA Vision: A global orthopaedic culture in which everyone can thrive

IODA Board Members are promoting diversity globally at many symposia:

- American Academy of Orthopaedic Surgeons (AAOS)
- Argentinian Orthopaedic Association (AAOT)
- Australian Orthopaedic Association
- British Orthopaedic Association
- Canadian Orthopaedic Association
- Danish Orthopaedic Association
- College of Surgeons of East, Central & South Africa (COSECSA)
- EFORT
- Hong Kong College of Orthopaedic Surgeons
- ISAKOS
- Italian Orthopaedic Association (SIOT)
- Philippine Board of Orthopaedics (PBO)
- SICO
- South African Orthopaedic Association
- Tunisian Orthopaedic Association (SOTCOT)

#### IODA's strategy includes:

- DEI education for the orthopaedic community via conference symposia, webinars & IODA's extensive online resources.
- Targeting the leadership of Orthopaedic Associations to establish Diversity Strategies with deliverable outcomes via the IODA Charter.
- Empowering and networking existing orthopaedic diversity organisations.
- Engaging/mentoring/supporting diverse medical students and junior doctors into the field of orthopaedics – via IODA's Mentoring Initiative – a Mentorship Program is currently being developed.
- Promoting diversity across IODA's social media platforms.
- Developing a financially sustainable organisation, exploring grant opportunities and strategic partnerships.
- Providing scholarship opportunities to orthopaedic trainees, surgeons and aspiring medical students who are female or from underrepresented minorities in orthopaedics.





## In Memoriam Erdal Cila

It is with profound sorrow that we announce the passing of a remarkable individual and dedicated orthopaedic surgeon, Prof Erdal Cila. His life was marked by extraordinary achievements, strong family bonds, and significant contributions to the field of orthopaedics.

Born in Burhaniye on 26 September 1958, Prof Cila's journey in the medical world began at Hacettepe University. Notably, he shared this journey with his beloved wife, Prof Ayşenur Cila, a respected radiologist.

Prof Cila's academic journey culminated in his role as a Professor of Orthopaedics and Traumatology at Gazi University. He was not only a dedicated educator but also a prolific writer, making substantial contributions to orthopaedic literature through numerous publications and congress presentations.

A dedicated member of the Société Internationale de Chirurgie Orthopédique et de Traumatologie (SICOT), Prof Cila held various positions, including his role as Turkey's National Representative. His contributions to SICOT were further reflected in his position as Chairman of the Finance Committee.

Beyond his professional accomplishments, Prof. Cila was a loving husband to Prof Ayşenur Cila and a proud father of two daughters. His kindness and warmth touched the lives of those around him, making him not only a distinguished professional but also a beloved family man.

Prof Dr Erdal Cila's passing leaves an irreplaceable void in the field of orthopaedics. His legacy, marked by dedication, compassion, and significant contributions, will continue to inspire and guide future generations.

As we bid farewell to a remarkable soul, we cherish the memory of Prof Dr Erdal Cila, whose influence will forever remain in our hearts and minds.

Rest in peace, dear Prof Cila. Your legacy will endure and your memory will be cherished.

Written by Mahmut Nedim Aytekin SICOT National Representative of Turkiye





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