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**Benefits of SICOT Membership**

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<td>Stay connected to your profession: receive free of charge the SICOT Journal, International Orthopaedics®, and the SICOT Newsletters.</td>
<td>SICOT members get a 30% discount when they publish in SICOT-J, a peer reviewed open access journal.</td>
<td>Benefit from reduced registration rates at SICOT scientific meetings and rub shoulders with the most eminent world specialists.</td>
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<td>Take advantage of the SICOT fellowships to further your education and career at international level.</td>
<td>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.</td>
<td>Test your core clinical knowledge and competence and apply for the Diploma Examination.</td>
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<td>Gain full access to the wide selection of videos available on our virtual platform, SICOT PIONEER.</td>
<td>Become eligible for a free Premium Account with OrthoEvidence, which is the global source for summarised, high quality orthopaedic research from around the globe.</td>
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Dear colleagues, Dear friends, Dear members,

If you are reading this newsletter, it is a good sign! Your interest in SICOT has been indicated.

I have the honour to take over the management of SICOT as President for two years, thanks to the trust you have placed in me to carry out this mission. I have the chance to be the third French President of SICOT after two illustrious surgeons, Ombredanne and Merle-d’Aubigné. The President’s first mission is to consider this function a service, not a reward. SICOT Founders did not establish SICOT to become great but to make a difference by emphasising the service to their members, and it became “Great” due to their service to the Society.

After two problematic years for SICOT, a gradual return to normal allowed us to have the Congress face-to-face this year, in Kuala Lumpur, and I thank very sincerely all who attended the Orthopaedic World Congress this year. For some, it was far and it was expensive, but they were present. The Kuala Lumpur Congress was the first face-to-face Congress since Muscat (Oman) in 2019. The Budapest Congress in 2021 was a success in its hybrid form. However, currently, everywhere in the world, there is a return to normality and face-to-face meetings to the greatest satisfaction of the speakers who can exchange their scientific ideas during sessions and also enjoy the social part of the meeting. The Congress in 2022 was marked by a novelty, the "Subspecialty Day", organised for the first time and supervised by the SICOT Board of Subspecialties (BOSS). I want to thank all the Chairs of the subspecialties who organised the programmes and made it a success in a short time. Our President, Ashok Johari, proposed this organisation, and the success of this 'Day' shows a solid demand for organising face-to-face specialty sessions. This facilitates interactivity, conviviality, and relations between specialists from all over the world.

All the other usual activities of the World Congress returned to normality such as the SICOT exam, the research activities and the education. However, for many SICOT members, it is challenging to understand what all the acronyms stand for and who does what. For members, the "SICOT name" brings together what the profession should represent in the imagination of orthopedists from different countries. They are not wrong, because it is nearly a century-old Society that provides worldwide scientific and professional support to orthopaedic surgeons. Considering that the functions of research, education, the exam and specialties are different, it was helpful to clarify the tasks and specify them. It was therefore created there alongside Education, Research and the Subspecialty Committees grouped under the name of BOSS. It is inevitable that this subdivision was sometimes made artificially and did not necessarily correspond to the reality of organising a congress.

Organising this face-to-face Congress after a certain period of inactivity was not so simple. It could be done thanks to the President of the Congress, Suresh Sivananthan, and the SICOT President, Ashok Johari, with the interactivity of the Secretary General, James Waddell, and Scientific Programme Chair, Margaret Fok. SICOT managed all the problems fairly quickly, considering that the Malaysia COVID restrictions only ended in May, and with the support of the Malaysian Society of Hip and Knee Surgeons. This would not have been possible without the Head Office staff, Linda Rideford, Katia Gnych and Soufian Berrada who, through their complementarity, made this face-to-face meeting a success. The organisation of the scientific programme for 2022 was a little more complicated given the constraints of the number of rooms but it finally adapted to the number of participants.

It is also clear that after the COVID pandemic, an inevitable change occurred in all congresses of orthopaedic surgeons, whatever it may be. There are fewer participants in virtual meetings because...
they have lost interest, but there is also a decrease in attendance of face-to-face meetings. There are several reasons for this phenomenon. Undoubtedly, after the COVID pandemic, surgeons have adapted to a new way of life where travel is less important and attendance at Congresses becomes less necessary for our young colleagues. It is necessary to realise that the platforms for disseminating courses and conferences in universities, hospitals, industry or by other means respond quite well to the environment of the youngest practitioners. They are perfectly in tune with tablets, smartphones or other dematerialised knowledge acquisition. Therefore, a World Congress for young surgeons must be scientific and bring other aspects of professional life, such as the possibility of responding to the various challenges that await orthopaedic surgeons in the future and allowing everyone to flourish. As Marc Patterson pointed out, it is not surprising that those who pass the SICOT exam are interested in the paper diploma they will receive but also in the face-to-face aspect during the Congress and the honorary presentation of their Diploma. Finally, in some areas, young people are more into ceremony and appearance than older people who consider that passing an exam can be purely virtual!

Accreditation, certification of activity, and authorisations are part of the future in each country. These words with a different meaning in each country will be more critical in the future and will be a specific administrative constraint in addition to the surgical activity for all surgeons. No doubt that the goal of a Society is to help members understand things, to try to simplify as much as possible, and to explain so that these constraints can be bearable for each of us. Therefore, the vocation of a global meeting is not only to be an educational or a scientific platform but also a facilitating platform between orthopedists and their environment in research activities, on a regulatory level and in the relationship with the world around us.

One of the other difficulties in the organisation of the Congress is the financial balance in terms of accounts. Industry sponsorship remains a desirable, even necessary, condition for organising certain events. This financial support from Industry was present in Kuala Lumpur, thanks to the activity of our Commercial Agent, Lina Salvati, who made it possible to bring together several manufacturers and to have financial support. However, members need to understand that manufacturers have complained of a certain disaffection for visits to their booth by surgeons during scientific sessions over the years. Industries themselves, if they are still interested in their participation in Congresses, have to deal with regulations and financial restrictions, which lead them to difficult choices. To maintain a partnership with the Industry, SICOT must understand that the organisation and the schedule of the World Congresses such as it is, is not a model for the future. The industry usually asks for a clear vision of the congress dates, which, for the same Society, must always be during the same period so that manufacturers can identify this date as an identity of the Society and plan their budget. Meetings must also be programmed in safe geographical areas with easy access, including many orthopedists, and which can be created from their point of view. In the end, if SICOT wants to continue to benefit from the support of Industry, it will have to adapt because the contributions of members and attendees will not be enough to balance the finances, even with the best wishes of our Treasurer, Hatem Saïd. At some point, the SICOT boat will have to change direction and choose a new compass.

"Smooth seas don’t make skillful sailors", as taught by a proverb from Africa. We have had to learn how to navigate turbulent seas with COVID in recent years. With the help of Vikas Khanduja and Gow Thevendran, SICOT has found alternate (PIONEER) ways to get around hurdles that have stood in our way and, as a result, we are now stronger. Even if SICOT is almost a century-old society, it is not an aging society. SICOT must remain dynamic and modern. For that, it needs the living forces of the young surgeons who have entered the Society with enthusiasm. The "feminisation" of the profession, which is relatively large in some parts of Europe, is more present in the World Congress. However, this year our diversity was reduced with the absence of involvement from a large part of the world, South America, Equatorial Africa, and China.
Nonetheless, our diversity cannot simply be a diversity of people or geographical areas because we are not a political or humanitarian organisation. We are a scientific organisation, and the first role of a scientific organisation is to maintain diversity in the field of specialties. The Congress of SICOT, a generalist congress for all orthopedists, must show cohesion even if one can easily measure that certain specialties have a higher attraction than others. However, the goal of a society is to offer someplace for each specialty. On the scientific level, developing and associating all the specialties is desirable. This is what makes the strength and richness of the Society. SICOT needs to help all the specialties during a congress, particularly those with less representation, which is relatively easy given the quality of the Chairs of each specialty.

Surgeons always look for ways to better care for patients, and we rely on research and our areas of expertise to help us. We simply need to adhere to the law of life in order to make sure that the organisation keeps making a difference. Three complementing actions are required for continued success: we start by expanding on what is effective; second, we put an end to what does not work; third, we innovate and seize fresh prospects.

I had the chance to have an exceptional orthopaedic career as Head of Department during a long period in an orthopaedic and traumatology university centre (one of the largest orthopaedic hospitals in France), succeeding Prof Debeyre and Prof Goutallier. Then, with the Presidency of the French Orthopaedic Society, I was in charge of all the aspects of an orthopaedic society. I have associated this rich orthopaedic course with a wealthy family life (thanks to my wife) with four children and nine grandchildren (aged 6 months to 15 years), which allows a certain youthfulness both in the field of everyday life and in the education of the youngest. For the young who embark on a career in orthopaedic surgery, I can only advise them to be motivated, persevere and, above all, love what they do daily and search for perfection in the details. When you are passionate about your job, going to work every day is a pleasure, and you find the motivation, the perseverance, and the time to work. Together these efforts will make their future look bright.
Two years as President of SICOT is quite a learning experience! SICOT is a huge organisation representing most countries on the globe and formed 94 years back. As the years roll, SICOT goes forward with the weight of its history, traditions and ideas nurtured over the decades. There is always a crossroad between the old and the new, the past and the future. The present stands firmly in between the past and future and is the ground for experimentation. It is the ground for shedding of old ideas, now probably not as useful, and the adoption of new ideas, which lack the certainty of time and experience but have the promise of taking the organisation forward.

SICOT made structural changes to brace itself for the much necessary focus on areas like Education and Research. Thus, were created the Education Academy followed by the Research Academy. The Finance and Governance Councils provided the other pillars of SICOT. All committees of SICOT fell under one or the other academy or council. Left behind were the Specialty Committees which required the creation of BOSS, the Board of Subspecialties. The idea was to give a thrust to specialty education, research and certification of competence. As specialisation becomes a dominant feature of Orthopaedics, this was a much-needed thrust area, as the future lay with the specialties. Whilst still focused on general orthopaedics and trauma, SICOT must cater to the specialties as more and more surgeons today are specialists.

The Constitution of SICOT is as old as SICOT and needs to be ‘updated’ by the Belgian Government and then amended as the membership desires. Changes to the SICOT structure and many aspects of its functioning need to be made in its Constitution to allow SICOT to function as a global organisation with ease and efficiency.
Of the SICOT’s objectives, the closest to our heart is the advancement of the science and art of Orthopaedics and Traumatology. SICOT is fulfilling this in numerous ways. Conferences, courses, digital education via SICOT PIONEER and LMS, specialty education via a Specialty Day and promotion of research are foremost on SICOT’s agenda. Training of young and senior orthopaedic surgeons via fellowships, encouraging research by research education, awards and grants and competency testing via examinations are important for SICOT. Expanding our portfolio of specialties as the time demands is also important for SICOT. Recently we created the Limb Reconstruction and Orthopaedic Rehabilitation Specialties. SICOT publications like International Orthopaedics, SICOT-J and the SICOT Newsletter are the face of SICOT to the world and, though well established, are poised for further growth.

The question now is what for the future? SICOT must strengthen its presence amongst the orthopaedic societies of the world and find its place as the foremost orthopaedic society. Membership which has more or less remained constant needs to be enhanced by different strategies. SICOT must remain relevant as the international source for Education, Training and Research especially in the developing world. We need further development of subspecialties and promotion of research especially SICOT directed research and collaborations. Innovations need to be encouraged by a multidisciplinary approach. We need more presence on patient care issues and thrust on advocacy and disaster management.

The SICOT Strategy Retreat which was held last May gave many recommendations which were arrived at by consensus between the leaders of SICOT. They pave the way forward and should be taken up and implemented.

At the start of this article, I mentioned that two years as President of SICOT is quite a learning experience! Today hierarchies are flat and not vertical as used to be in the olden days. There are of course many pros and cons to this. Because of a great divergence of views on common day to day matters, decisions whilst well-reasoned, take longer and progress seems slower. The digital era creates a lack of human touch, so essential for team functioning and confidence. Common goals and a shared vision should bind us together and remind us of SICOT’s primary purpose as a society for its members and by its members.
Dear Friends and SICOT Members,

I wish to sincerely thank all of you for this role as new SICOT Editorial Secretary.

The first time I came to know SICOT was in the late 1990s, as I was talking with my godfather for over 20 years, Prof Lamberto Perugia, who introduced me to Orthopaedics and taught me most of what I know, transmitting also the belief in always combining professional work with national and international scientific interests and engagements.

The SICOT 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. Orthopaedic knowledge should therefore be global, easily available to everybody, no matter who you are or where you live. This is especially true for SICOT where we do as much as we can to reach out to over 110 countries to provide education and help the professional growth of every single member of our Society, both via webinars and meetings, but, especially in these difficult years of physical and psychological recovery, also with all forms of practical teaching through Cadaver Labs and Hands-on Courses, with a great focus on young colleagues that start dedicating themselves to our lovely profession.

Education in recent years has undergone a great transformation: information and communication technologies have exploded and we have witnessed the boom of interactive learning, through real-life labs and all multimedia and live simulation tools.

New learning styles require new teaching methods, a different evaluation and a striking attention on how, where and when we communicate our words. The actual digital era has given scientific societies the opportunity to improve themselves and become medical educators, offering high quality professional training and certification programmes. SICOT has certainly been very keen on taking this opportunity in various ways. It has developed the Programme for Innovative Orthopaedic Networking, E-learning, Education and Research (PIONEER), improved its presence on the web, created a Learning Management System, pushed Subspecialties’ activities - through the creation of the Board of Subspecialties (BOSS), with specific Specialty Day Sessions during our Orthopaedic World Congress and the study of a new Specialty Certification System - and has fostered women in Orthopaedics also through the International Women’s Day.

And what a great success SICOT has achieved in all these activities! However, this is not enough. Education has changed and is under continuous evolution. We have therefore the need to continue building the desire to engage in new education opportunities.

We need to be global but, at the same time, we need to be regionally present through various meetings and cadaver courses, with specific offers tailored in different languages on different topics and interests under the guidance and the suggestions of our Vice-Presidents, National Delegates and Committees, which need to effectively represent the operating arms of our Executive Committee.

We need also to be open to increasing all new possible interactions, engaging scientists, medical students, physiotherapists, with INCLUSION always being our main paradigm.

As I said in my presentation during the International Council Meeting, I believe the Editorial Secretary has the responsibility to represent the “CENTRAL HUB OF COMMUNICATION”, to help coordinate, organise and advertise the enormous team work we are conducting.
This goal may, in my mind, be accomplished by:

- adapting the education programmes to the different needs of all members from different geographical and socio-economic areas;
- creating new interaction opportunities: new specific Society and Newsletter mobile applications, broader interaction among academies and committees and increased social media positioning;
- developing a continuous, real-time information for all SICOT family members: “News from the Corners of the World”, headed by our active Vice-Presidents, with clinical and surgical relevant updates and different trends of the orthopaedic communities and a “Reader’s Digest Corner”, where everyone can find a summary and a critical analysis of the most recent publications;
- focusing on our Next-Gen Education Training and Certification: through the most innovative virtual training and certifications – such as the ACL PIONEER Training Pilot Project, that I am honoured to chair and on which we are actively working for more than one year – the discussion of clinical cases, a “ticking box” to have immediate help and suggestions from senior members on the treatment of difficult cases and the advertising of job opportunities;

and concluding:

- increasing day by day professional networking: each one of us may improve herself/himself through advanced live and virtual hands-on courses, continuing education updated and innovated programmes, maintenance of high ethical standards, increased and centralised cooperation with national and international societies, but, most of all, through FRIENDSHIP...

A scientific society is for me a precious open-minded and inclusive network of personal beliefs, knowledge, skills and human capabilities and its achievements depend on the capacity to maximise the will of each member to contribute to its growth adding a little brick at a time.

SICOT meetings, webinars, journals and especially the Newsletter represent the way to build this success and increase the global credit, esteem and value of our leading Orthopaedic Society, because institutional success can only come through strong and passionate individual participation and involvement.

Education is a lifelong process made of solid basic training and continuous professional development and achievements, thus the more we will be able, all together, to define the future SICOT Education Portfolio Strategy, including well-defined long-term goals and plans, the more we will be able to communicate and show worldwide the commitment and the effort we have put into it, and the more we will achieve success.

Please remember that the Newsletter and the Editorial Board are here for you: please don’t hesitate to get in touch with us for every idea, suggestion, comment and interest you may have!!!
Our publications (Figure 1) are growing in volume and visibility. We feel that our policy of growing the number of papers published, increasing the internet options and open-access publications pays in the middle and long term.

The SICOT-J open access Journal created by Hatem Said (Egypt) and Jacques Caton (France) entered the major publications list and will have ISI score and Impact Factor calculation starting next year. Two brilliant young Chief-Editors (Andreas Mavrogenis from Greece and Sebastien Lustig from France) are doing a wonderful job raising the number of published papers and the quality. We expect this to grow more after inclusion in the Journal Citations Report.

The SICOT-Network edited by our Editorial Secretary, Fabio Sciarreta (Italy), is very visible and distributed to our members and to an open subscription list of thousands of surgeons worldwide. It is a well-illustrated, pleasant to read and attractive publication that increases our exposure in the Orthopaedic Community worldwide.

SICOT PIONEER is a wonderful creation of our President-Elect Vikas Khanduja (UK) and Gowreeson Thevendran (Singapore). Although not a referenced publication, SICOT PIONEER is more than this. It is a great tool that includes thousands of references and organises regular webinars and teaching. We are working on common projects.

Finally, our flagship Journal “International Orthopaedics” is still growing with an unprecedented volume of downloads and citations and rising Impact Factor. The technical numbers are mentioned in Figure 2.
The Editorial Board is deciding on the strategic directions for the future. One decision was to slightly increase the number of papers published per year as our calculations predicted that it will minimally interfere with the Impact Factor. The acceptance percentage for submitted papers is expected to turn around 15% this year. Another decision was concerning the number of “Spine” papers that will increase in 2023.

A high participation from China carefully encouraged by Wei Chen from Shijiazhuang, and from India (Raju Vaiyshia from Delhi and Ashok Johari from Mumbai contributed to the Journal’s increase in volume and visibility. North America (Cyril Mauffrey and James P. Waddell) as well as South America (Patricia Fucs) contributed equally to the growth. South-East Asia (Gowreeson Thevendran from Singapore and Suresh Sivananathan from Malaysia) contributed to the Publication section during the World Congress.

Transportation slow-down and a reduced number of flights meant that we had to organise live broadcasting via Zoom for all Board members who could not attend. We have done this for two years with good results.

Wishing you a wonderful season and successful work in the months to come. We cordially invite you to read and browse all the SICOT publications.
The Société Internationale de Chirurgie Orthopédique et de Traumatologie (SICOT), also known as the International Society of Orthopaedic Surgery and Traumatology was founded at the Hôtel de Crillon in Paris on 10 October 1929, by 21 prominent orthopaedic surgeons from 12 countries, who came together to form an international orthopaedic society. Its first President was Sir Robert Jones, from the United Kingdom. Since then, SICOT has grown severalfold and presently includes members from all over the world. SICOT’s Orthopaedic World Congress (OWC), along with its diploma examination, is an annual highlight for many orthopaedic surgeons.

How Malaysia won the bid to host SICOT 2022

In 2016, the local SICOT Chapter, with the support of the Malaysian Orthopaedic Association (MOA), at the time spearheaded by Prof Wan Faisham; submitted a bid to host the SICOT OWC. Luck was not in our favour as Canada won then. Determined to put Malaysia on SICOT’s trail map, the local organising committee persevered with another bid during the 2019 OWC held in Montreal. Detailed financial plans and projections had to be meticulously devised and submitted to the SICOT Head Office and Executive Committee for review in order to qualify for proposal presentation to the International Council who then cast the final votes. Dr Sureshan Sivananthan represented Malaysia on SICOT’s trail map, the local organising committee persevered with another bid during the 2019 OWC held in Montreal. Detailed financial plans and projections had to be meticulously devised and submitted to the SICOT Head Office and Executive Committee for review in order to qualify for proposal presentation to the International Council who then cast the final votes. Dr Sureshan Sivananthan represented Malaysia and made an in-person presentation in Oman where we victoriously garnered the most votes. Unwavering support from MOA, Prof Azhar Merican and the Malaysian Society for Hip and Knee Surgeons (MSHKS), along with our local surgeons were crucial in demonstrating local backing for the Orthopaedic World Congress to be hosted in Malaysia.

The challenges

The organising committee of SICOT KL 2022 was faced with many obstacles, the most overt hurdle being the COVID-19 pandemic. At the beginning of 2022, restrictions on international travel were mostly still in place and Malaysia was no exception. Virtual or hybrid meetings were initially contemplated as there was no indication of when borders would re-open. The uncertainty that lingered due to COVID-19 dimmed the prospects of sponsorship arrangements with industry partners. The decision to fully re-open Malaysia’s borders in April could not have come at a better time. The Organising Committee received the green light to form concrete plans and charge at full steam to organise a fully physical, in-person only OWC. Though time was tight and pressures were high, with unfaltering support from local surgeons and societies, SICOT Kuala Lumpur 2022 came to fruition. Besides being profitable, it had a positive impact on all who attended. This accomplishment serves as a fond reminder of what the Malaysian Orthopaedic fraternity is capable of.

Event highlights

Many eager local and international delegates were in attendance. It was a warm atmosphere altogether as surgeons from various countries rekindled camaraderie after the long COVID hiatus while new friendships, industrial networking and academic collaborations were fostered. Highlights of the conference included the expert plenary speakers, thought-provoking keynote sessions, interactive JAM sessions, hands-on workshops, cutting-edge live surgery, the clubfoot workshop and the SICOT diploma exam. The distinguished member award went to Dr Thami Benzakour from Morocco who delivered a gripping and memorable acceptance speech.
JOIN US!

Cairo, Egypt

SICOT

43rd Orthopaedic World Congress
21-23 November 2023
combined meeting with the Egyptian Orthopaedic Association

Abstract submission is open!

SUBMIT

www.sicot.org/cairo
Dear colleagues, Dear friends, Dear members,

On behalf of SICOT and the Egyptian Orthopaedic Association (EOA), I warmly welcome you to the 43rd SICOT Orthopaedic World Congress & 75th EOA Annual Meeting in the beautiful city of Cairo which has always been famous for its heritage and cultural diversity. This is a combined meeting between the EOA, which is one of the oldest orthopaedic associations with more than 7,000 active members, and SICOT, which is the largest orthopaedic society in the world with members from 119 countries speaking over 100 languages.

This Congress will be a great opportunity for orthopaedic surgeons to take advantage of a wealth of knowledge from distinguished speakers from all over the world and discover recent advances in the management of unusual problems in developed nations such as the management of neglected fractures, conflict injuries and congenital deformities diagnosed late. With the current global economic crisis, it will be a good chance to highlight the current methods of management of difficult orthopaedic problems with limited resources.

Egypt was unified around 3100 BC and continues to be a leading economic and cultural influence throughout North Africa. The culture of Egypt has thousands of years of recorded history. Ancient Egypt was among the earliest civilizations in the world. Egyptian values, including forgiveness, tolerance, brotherhood of mankind, great respect for people with disabilities, and equal rights for women, are landmarks in the human history.

Egypt is a land of great diversity, with huge appeal to almost everyone. It is the time to explore the wonders of Egypt: the Great Pyramids and Sphinx, Temple of Karnak, Egyptian Museum, Roman and Greek monuments in Alexandria, Red Sea coast and Sinai.

Welcome to Egypt!
Leaving a digital footprint in SICOT’s educational journey.

www.sicot.org/pioneer
Across 2022 and now 2023, activities and transformations within SICOT’s Education Academy have continued to evolve. The Learning Management System (LMS) Taskforce successfully implemented the first virtual (Part 1) Diploma SICOT exam on 13 August 2022. Work is currently in progress to deliver the first virtual (Part 2) Diploma SICOT exam in 2023, enabling potential exam candidates to secure the SICOT Diploma fully virtually for the first time, should they wish so. There will continue to be a face-to-face Part 2 Diploma SICOT Exam hosted at the Cairo OWC in November 2023 as there has been historically. The latter half of 2023 will also witness the implementation of the pilot Virtual Training – ACL modules on the LMS.

Team Margaret Fok & Khaled Sarraf from the Programme Committee delivered the Scientific Programme for the SICOT Orthopaedic World Congress in 2022. Despite a lot of uncertainties with the COVID pandemic, a face-to-face meeting was hosted in Kuala Lumpur, Malaysia, from 28 to 30 September 2022. After more than two years of limited travelling, with mainly virtual networking, everyone was ready for a meeting in person, where one can learn, exchange ideas, and be inspired. The Programme Committee prepared a 2-day scientific programme, involving 8 concurrent rooms, with 3 plenary speakers, 13 keynote speakers as well as over 300 faculties for this congress. In addition, our long term partnered societies were invited to co-organise 14 symposia with us. SICOT always strives for equality and diversity. With all our efforts, we have achieved better equality and diversity than previous years, with female faculty remaining just under 10%. Overall, the congress was a success, attracting more than 1,200 registrants from all over the world to join not only our scientific programme but also our social networking events. It allowed for knowledge exchange, forging new collaborations as well as strengthening existing networks. Preparations for the Scientific Programme & Specialty Day in Cairo 2023 are now underway so stay tuned for more updates!

At a different sphere of the Education Academy, the Fellowship Committee was merged with the Education Centres Committee to fortify mutual objectives and streamline implementation strategies. An overhaul of the united committee occurred with the new recombinant Fellowship Committee taking all existing members from both committees, for a 2-year transition period. The new elected Chair of the Committee is Vojtech Havlas from the Czech Republic and the Vice-Chairman is Khaled Emara from Egypt. The agenda in 2022 involved the following: set-up of the review and evaluation process for Education and Host Centres was initiated, all centres with SICOT Fellowships to be called a “SICOT Training Centre” in the future. The committee has also implemented a new evaluation process by the fellow after completion of his/her fellowship. The Committee has thusfar received 3 new applications for SICOT Training Centres, 2 were reviewed and approved, 1 is still pending. MOUs for the new fellowships have been published on the SICOT website. A new evaluation system for the fellowship applicants has been developed and implemented; the system focuses on quality, experience and motivation assessment of the fellow by the committee members. The new evaluation system will be activated after a review process in 2023.

Finally, the latter half of 2022 and the rest of 2023 witnessed the birth of regional specialty meetings. This has been a pioneering effort by the Education Academy together with BOSS, the National Delegates and various SICOT KOLs to develop a year-round calendar of high quality, region customised and local host empowered (collaborative) educational events for our members. Historic difficulties with members getting to the OWC to have an educational and networking experience and the long overdue demand for region-specific educational needs will hopefully be met by even more SICOT Regional Specialty Meetings in the years to come.
The SICOT Diploma Examination was set up by Tony Hall nearly twenty years ago to provide orthopaedic trainees from all continents with a Diploma indicating that they had reached an international standard which they could take forward to help with further training and fellowship applications. It has developed over the years and more candidates than ever are applying to take the examination which consists of an MCQ paper (100 questions) and oral sessions in adult and pathology (lower limb and spine), trauma, basic science and children and upper limb. The panel of examiners has expanded and we try to mix and match young and older, experienced and less experienced examiners from across the globe to provide a balanced, fair, unbiased and knowledgeable group who will give the candidate the best chance to show their knowledge and therefore pass the exam. The last face-to-face exam was undertaken at the annual Congress in 2019 in Oman. Since then the worldwide Covid pandemic caused the cancellation of national and international meetings and there was no Congress meeting or Diploma examination in 2020. In 2021, although there was a hybrid Congress meeting in Budapest, it was concluded that it was not practical to hold the Diploma then.
We have been striving to develop and improve the examination, and the Education Academy under Vikas Khanduja and recently Gow Thevendran have worked throughout the Covid pandemic to ready the exam for presentation online. With the introduction of the SICOT Learning Management System overseen by Stratagile, progress was made to prepare the MCQ part of the examination (Part 1). First, a new MCQ question bank was set up with contributions from many SICOT members (especially Khaled Sarraf). Second, with the help of Stratagile, the LMS was programmed to run an online exam. Numerous meetings and mock exams were undertaken and finally in August 2022 the first online SICOT Diploma MCQ examination was held without incident (special thanks to the SICOT Head Office: Linda Ridefjord, Soufian Berrada, and Katia Gnych). The candidates who passed the MCQ then presented themselves for the face-to-face oral examination (Part 2) in Kuala Lumpur in September 2022. We are also looking at holding this oral examination online as well. As part of the preparation for this, one of the four oral exam sessions was held online in the examination hall with the candidate and examiner physically present but communicating online. There was full IT support from Stratagile to make sure that the candidates suffered no discrimination in their exam attempt. Again this project progressed without incident. Candidate feedback was encouraging and the practicality of holding the oral exam online has been tested. Full mock online oral exams are planned for the near future.

We have a roadmap for the future of the SICOT Diploma examination. We will hold regular online SICOT Diploma MCQ exams (Part 1) saving the candidates time and money travelling for this part of the exam and the candidates who pass this MCQ will be eligible to sit for the Oral part of the exam (Part 2). We will be able to hold the online oral exam twice a year in addition to the face-to-face oral exam at the annual congress which will be held in Egypt in the latter part of 2023.

No examination can stand still in the medical profession and we strive to improve the SICOT Diploma every year by repeated review, study of feedback and embracing new ideas. Remember it is not only the candidates who learn from the Diploma. An orthopaedic surgeon never stops learning and I find examining for the Diploma some of the best continuing medical education that I experience each year. I am happy to hear from SICOT members who wish to be considered for the examiner group and I was delighted this year that four previous successful SICOT Diploma candidates had progressed to become Examiners!

The next online SICOT Diploma MCQ exam (Part 1) will be held on 5 May 2023. Registration is open here.
REGISTRATION FOR THE SICOT DIPLOMA EXAM ON 5 MAY 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 14 April 2023:

- register online here;
- send to exam@sicot.org 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 2023 membership dues must be paid. For more information about SICOT membership application, please contact hq@sicot.org.
- 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 is covering the whole spectrum of Trauma & Orthopaedics.
It is an absolute privilege and honour to get appointed as the Chair of the SICOT Research Academy, succeeding Prof Mohit Bhandari to lead the Academy over the next 3 years. SICOT, as a global organisation, has been very successful in leading the international trauma and orthopaedic community. The Society has lived to its objectives of promoting the advancement of the science and art of orthopaedics and traumatology at international level through the improvement of patient care; fostering research and education; facilitating exchange of professional experience and promoting good fellowship among its members. Some objectives, such as education and exchange of international professional experience have been achieved with tremendous success; others, including research objectives require further efforts. This should not come as a surprise because it is far easier to teach the knowledge than to create it. I strongly believe that SICOT is the best positioned organisation to lead the global trauma and orthopaedic research for several reasons:

1. The calibres of its leaders.
2. The vast global reach.
3. The diversity and equality of its members.
4. The IT and administrative infrastructures.
5. The strong financial governance.
7. The long history of organisational growth.
8. The noble objectives that many people around the world can be bound to.

The success of the education programmes including SICOT PIONEER has been an inspirational model of motivating SICOT members to get engaged with education. A similar model of research is possible, but it needs dedication, patience and motivated members who have a passion for research. To enhance research activities within SICOT, I believe that four areas require further development, acronymised as NEWS:

N: Develop a global Network of researchers
E: Educate and Empower the networks
W: Worthwhile domains
S: Secure fundings

Develop a Global Network of Researchers

The advancement in technology and communications have made global research easier than ever. Global collaboration means that even large-scale studies can be completed faster (Figure 1). The findings are more generalisable, and it fulfils the SICOT objectives of experience exchange and fellowship promotion.

The networks will be developed through:

1. Inviting like-minded SICOT members with track records in research.
2. Collaboration with established research organisations such as IHDI, NIHR Global Health Research Unit, ICODE, Cochrane library, OrthoEvidence, etc.
3. Application from orthopaedic surgeons who are interested in getting involved in global research.

The envisaged structure of the SICOT Global Research Network is outlined in Figure 2. Appointing effective continental and national leads is paramount for the success of corresponding geographical areas. Contributors expect to be accredited as authors for their work. Many publishing journals recognise the importance of global research and started accepting a “corporate publication” where thousands of authors can be indexed for a single paper.

Although the COVID-19 pandemic has been a tragic healthcare crisis at every level, it has taught us that we share the same healthcare challenges no matter where we are. This has laid the ground for international collaboration, removal or minimisation of barriers and experience in running worldwide research projects. Challenges remain though and must be calculated and dealt with efficiently.
Figure 1: COVIDsurg 3 study recruited over 140,000 participants in a 3 month-period from over 112 countries, reflecting the power of global research collaboration

Figure 2: The envisaged structure of the SICOT Global Research Networks
Educate and Empower the Networks

It is expected that members of the networks have varying levels of research skills and experience. Continuous education about research methodology, ethics and organisational skills are essential for the effectiveness of the networks and the quality of the research work. This area of research education can be the meeting point between the education programme (SICOT PIONEER) and the research programmes.

The annual SICOT Research awards would probably highlight strong regions, countries, or hospitals within the networks. These strong entities would be rewarded and empowered to contribute more toward the SICOT research strategy and be provided with a better access to the Society resources. However, weak regions or countries would be supported with promotional and uplifting activities to spread a culture of research and critical thinking.

Worthwhile Domains

Research is expensive, requires effort and time; therefore, it is extremely vital that research activities within SICOT are carefully selected, conducted, and funded. While all SICOT members are encouraged to submit their research ideas or projects; these must be scrutinised for the potential impact on clinical practice. The mechanism(s) of selecting the worthwhile research domains or projects would be developed and refined as the network grows.

Secure Fundings

The potential of success of any research project without a proper funding is slim. This is probably the major challenge that the Society would face when promoting research. For this reason, this area is given a special attention in my vision to action plan. The following ideas could be explored further with the SICOT board members:

1. There are many potential funding resources that could be approached in various parts of the world. A comprehensive database of these resources and their eligibility criteria, application forms, and deadline is a good first step. Then, through our global networks of researchers, these organisations are approached to fund relevant research projects.
2. Partnership with industry while minding the conflict of interest.
3. SICOT current research grants.
4. Getting involved with carefully selected research projects that have already secured fundings.
5. Donation and philanthropy.

The above is a summary of the vision to promote research within SICOT. You can be part of this vision, even if you do not have any research skills. We all started from nothing. Although being a SICOT member is strongly encouraged, it is not essential to be part of the SICOT Global Research Network. If you are interested, e-mail your CV and application letter to research@sicot.org.
On 3–4 November 2022, SICOT successfully hosted the Middle Eastern Sports Meeting in the Kingdom of Bahrain, site of the ancient kingdom of Dilmun, situated in a bay on the southwestern coast of the Persian Gulf, which welcomed the world-renowned faculty and the enthusiastic regional and international audience in Manama, its capital, a strikingly relaxed and cosmopolitan modern city.

The meeting intended to discuss how to “Keep your knees healthy fighting early OA advent”. Under the patronage of His Highness Shaikh Nasser Bin Hamad Al Khalifa in collaboration with the Education Academy of SICOT, the facility of King Hamad University Hospital hosted this two-day event organised by the SICOT Sports & Arthroscopy Committee focused on joint preservation for all our patients who wish to save their joints and continue to be active and sporty.

Osteoarthritis is a growing problem and a leading cause of disability and source of societal costs in older adults. It has been recently clearly shown that osteoarthritis is a disease process that continues to evolve despite possible improvements in pain and function. Management must be, therefore, tailored to the presenting individuals, possibly intervening during pre-OA or early-OA stages of the process, when cartilage and meniscal damages have favoured the progressive degenerative impairment of the articular cartilage surfaces. For these reasons, the Scientific Organising Committee scheduled the meeting to give light, in the separate sessions, to the pathological events progressively compromising the different joint structures – menisci, ligaments and cartilage – and determining through malalignment and instabilities to the degenerative turnovers of the knee joint.

Day 1 started off by reviewing the biological, biomechanical and clinical presentation of the recently identified early OA stage of the osteoarthritic degenerative process. Daniel Grande, future President of the International Cartilage Repair and Joint Preservation Society (ICRS), from New York opened the session immersing the participants in a comprehensive review of all the biological changes appearing in the joints during the initial deterioration scenario, then brilliantly completed by the description of biomechanical changes and the clinical cases scenario presented by Steven Amis and John Lane. Fabio Sciarretta, creator of the event, together with Rene Verdonk, Emeritus Professor at Ghent University, then guided the audience through the most comprehensive presentation of meniscal damage and its updated mini-invasive and arthroscopic salvage procedures, giving particular glimpse to ramp and root tears and concluding with the possible substitution of the degenerated tissue with synthetic biodegradable scaffolds made of polyurethane or collagen, which gave rise to vivid and strong debated discussions.

The afternoon podium was shared between cruciate ligaments and articular cartilage treatment updates. Drs DiFelice, McKay, and Butt brought the audience into the depths of the most current proposal on how to save, preserve and repair, through their specific techniques, the ruptured ACL and guide it to regeneration and regrowth.
The keynote cartilage lecture led by Mats Brittberg, from Sweden, together with Lars Petersen of the “autologous chondrocyte implantation” repair technique, opened the cartilage session that followed, including the most advanced autologous repair techniques brilliantly ending in the MSCs show, where Alberto Gobbi and Fabio Sciarretta gave the fascinated audience the best insight on the present and future of these “medicinal cells” withdrawn from bone marrow and adipose tissue.

Day 2 was dedicated to the future. Yes, the future of biology and the future of surgery. The secretome, the exosomes and all the most lit vesicles will certainly represent the regenerative medicine pathways in many clinical settings, just as many innovative techniques will favour the primary repair of ligaments, the resurfacing of cartilage deep defects in the active boomers by mini metal and biologic inlay implants, just as robotics will continue to improve arthroplasty results.

What to add to two brilliant days of great lectures and vivid discussions? The great final with the hands-on workshop. In the meeting rooms on the first floor enthusiastic students, trainees and surgeons had the chance to learn and test their own abilities in what the Meeting President Sciarretta highlighted and defined as the most important tool in the education of orthopaedic next generation. The participants learned the basics of arthroscopy, how to create the tunnels of ACL reconstruction, how to apply the sutures that enable the meniscal repair and how to cover and help cartilage defects by applying natural scaffolds possibly embedded with cells. All the faculty happily dedicated to this passionate practical teaching and will never forget the deep interaction, the passion and the interest showed by all participants.

Thank you King Hamad University... Thank you Kingdom of Bahrain...

As said in the greeting words, this is just the beginning... SICOT will continue to promote the advancement of the science and art of orthopaedics all over the world and will certainly keep organising many other meetings in the years to come!
The Sports Surgery Committee has always been very committed in SICOT events, especially the OWC. The Committee has always been ready to fulfill all the challenges and missions assigned to it. At the recent congress in Kuala Lumpur, the group was flattered by the massive attendance at the sessions, and we enjoyed seeing the enthusiasm of the speakers and the heated audience. We would like to express our gratitude to the Committee and local support, which was immensely helpful in making sure we are comfortable and feel at home, assisting us with a great effort, and aiding us in the last-minute adjustments that can happen at any event, especially one of this magnitude.

We started the journey in Malaysia in the Educational Day room. This was a challenge for us that day, and the session was brilliantly conducted by our Chair, Fabio Sciarretta, and his Vice-chair, Umer Butt. Time was short, but we managed to bring all the main topics of sports knee surgery.

The speakers delivered the current issues related to the themes perfectly, while adding to them with their insights, followed by tips on clinical examinations and surgical techniques, and their takes on the unique cases that they have encountered. Most of the topics discussed were those of a sports surgeon’s bread and butter that prompted interesting interactions. We saw great and fulfilling discussions between the speakers and the delegates during the available sessions.

Many ideas for the upcoming events emerged as the congress progressed. We had a meeting with the presence of a large part of the Committee, and interesting ideas that could interest our future audience and offer great knowledge exchanges materialised. It is always our objective to bring great content and enjoyable experience for the congress attendee.

We truly felt that we were in the right direction to fulfill our objectives in this congress. We could see the increase in interest among the delegates on the presented topics, their keenness to further discuss with us after the lectures on their own experience and their appreciation on the discussions we brought forth.

The committee worked hard to be one step ahead on the treatments. We yearn to share the state-of-the-art techniques that are available for each topic. However, we never forget that the main point is to be able to provide the best intellectual advice and come up with solutions that could facilitate our colleagues from various backgrounds on the patient management. Therefore, the idea of having a team of experienced doctors, mixed with young and brilliant colleagues from the vanguard, in addition to the continental mix, made the group very cohesive and balanced.

During these meetings, everyone’s satisfaction with the content and the massive presence of the delegates was evident. To further improve the interest in the event, we came up with an idea for the next event in Cairo for the Educational Day. We intended to use a theme and expand it. Then, we plan to bring the everyday cases and other interesting topics out of the box to further initiate discussions and spark ideas among the delegates.

One idea that we are working on improving and making available for the next congress is “Virtual
Sports Surgery Committee Team (left to right): James Loh, Teo Seow Hui, Fernando Rosa, Fabio Sciarretta, Umer Butt, Raid Abutalib, Saseendar Shanmugasundaram and Alioune Diouf.

Full house in the Educational Day

Round table about ACL

Challenges in arthroscopic PCLR
- Killer turn
- Graft size - native
- Tibia footprint visualization
- TVI ligament
- Tunnel collision
- Lackity after surgery

James Loh talking about the Arthroscopic Challenges

Sports Surgery Committee after ACL challenges session
Training”. This is indeed another exceptional and interesting challenge brought by the society. For us, we are now in the evolutionary phase of training, and we know this will be its future.

Other than that, the session that both the committee and the delegates have been looking forward to is the return of the cadaver lab session at the next congress. Earlier this year, we brought back the regional cadaver training in Bahrain. We now have a vision of going to Cairo with it in 2023. Those who were present in this year’s congress claimed that cadaver lab sessions are the part that they genuinely love, and it has been a notable opportunity for them to obtain valuable advice on the surgical techniques from the faculties.

Other points that we are studying and would like to make available, in addition to the cadaver lab and the virtual training, are the arthroscopy simulation and dry sessions. Many of the skills and techniques in arthroscopic surgery can be shared to the delegates through this form of training, which makes it possible to be conducted even during congress sessions.

The opportunity to provide our colleagues with intellectual input for their practice and to feel their satisfaction following the sessions is indeed the fulfillment we seek in this event. However, for us, the main pride we took is knowing that the delegates had an enjoyable time and experience this year and could hardly wait for the next event!

See you at the next event!
Among the regions of SICOT, Africa, Near and Middle East (ANME) is the second largest. It consists of 37 countries with a population of 1.642 billion. Despite this fact, its size is not reflected in its presentation, role, or member numbers within SICOT.

The total number of members within ANME is 340, as of September 2022. This gives an average of 9.2 members per country. This is quite a low average considering the population of ANME and considering that most of its countries are included in the list of countries with reduced fees of SICOT. One other problem arising from the reduced numbers is the fact that only 23 out of the 37 countries has a National Delegate (ND) and hence has the right to vote. Related to the same issue of membership, none of the 37 countries has 100 or more members. In other words, none has more than one vote. All these facts reduce our power and vote in SICOT.

I was elected as Vice-President of SICOT for ANME in September 2021. As I was the ND of Saudi Arabia a year before, I had a feeling that we needed to communicate in a more active way, especially since we have the technology to do so. I have created a mailing list as well as a WhatsApp group for the national representatives.

I called for a brainstorming virtual meeting to have an idea of the major needs and concerns of the different countries as well as how we can magnify our role in SICOT. I have relayed our concerns to the now President Elect of SICOT, Vikas Khanduja. The representatives summarised the needs and concerns of the region:

1. We need to increase the number of members, and especially pass 100 members per country.
2. We need to advertise the benefits of SICOT membership to our surgeons, especially the junior ones, in a better way.
3. We need to increase the number of countries with voting rights as well as increase the number of votes per country.
4. We need to have better representation in the educational activities of SICOT.
5. The region needs more fellowships and education centres.
6. The representatives believed that SICOT can do more to support the region and its members by sponsorship programmes especially in research and education.

During the year 2022 we worked together to achieve our goals. We have been successful in achieving the following:

1. We have added 7 countries from our region to the reduced membership dues list.
2. We have increased the regional number of members and National Representatives.
3. We have succeeded in having two of the region’s countries being elected to host the 2023 and 2025 SICOT congresses, Egypt and Lebanon.
4. We have applied for a fellowship centre from Saudi Arabia.
5. We are working on participating in the SICOT PIONEER activities.
6. We are working on a special regional issue of the International Orthopaedics journal.

7. I have arranged a virtual meeting with the Sudanese Orthopaedic Surgeons Association (SOSA) to advertise SICOT and encourage surgeons to become SICOT members. Other similar meetings are planned.
8. I have written to the Saudi Orthopaedic Association (SOA) to increase the joint educational activities.
9. A regional sports SICOT symposia was organised in Bahrain. Other similar symposia are planned in 2023 in Sudan and Lebanon.
10. I have been nominated as a member of the SICOT Foundation Board, and recently as a member of the Officer Nominating Committee of SICOT.

We in the ANME region believe in our capabilities, expertise, and potentials. We will be working during 2023 and 2024 on increasing numbers and passing 100 members per country. We are also looking for an outstanding participation in the upcoming SICOT congresses, especially those hosted by the region. We will organise virtual educational activities in the region and work on the fellowships and education centres.

We are looking forward to seeing our region well presented at the high-ranking administration of SICOT and its presidential line, sooner rather than later.
24th EFORT Congress
Vienna, Austria: 24–26 May 2023

Congress Highlights | Main Theme: Building The Future Of Orthopaedics & Traumatology

- Ageing Motion Analysis And Mobility
- 3D Printing For Patient Specific Implants
- Robotics
- Technological Advances In Diagnostic Equipment
- Biological Implants
- Virtual Learning Experience
- Practical Applications Of Science & Techniques
- Surgical Planning And Simulation
- Patient reported outcome
- Scientific & Clinical Networks

Key dates
Advanced Programme online: 01 April 2023
Late registration deadline: 02 May 2023