

Senior IOS UK Fellowship Report
(12th to 23rd September 2011)

Indian Fellows:

1. Prof Anil Dhal (Maulana Azad Medical College, Delhi)
2. Dr Raju Vaishya (Indraprastha Apollo Hospitals, New Delhi)
3. Dr Avtar Singh (Amandeep Hospital, Amritsar)

We reached London in the morning of 11th September & were received by Mr. Anand Arya at Heathrow airport, who brought us to a London hotel for our stay. In the same evening, we were invited for dinner hosted by Mr. Venu Kavarthapu & his wife at their residence. Mr. Venu briefed us about the fellowship program.

Our fellowship started on 12th morning at the prestigious Guy's hospital (RV & AS) & King's college hospital (AD). Mr. Marcus Bankes showed us 3 hip arthroscopies for FAI & a revision THR in a patient with Sickle Cell disease. Prof Dhal watched an elbow arthroscopy and elbow replacement surgery with Mr. Anand Arya. We were then invited to the academic meeting at King's college, where all 3 fellows presented a paper each:

1. Limbs with vascular trauma : Prof Anil Dhal
2. Treatment of resistant non union of distal femur with megaprosthesis: Dr Raju Vaishya
3. Treatment of diaphyseal non unions of femur leaving the nail in situ with super added plate & bone grafting : Dr Avtar Singh

All the 3 papers were highly appreciated by the faculty members and other staff. This meeting was followed by dinner at the famous and historical Athenaeum club at London.

On 13th September we all stayed in King's college hospital and saw TKR surgery using navigation by Mr. Rajat Verma and Mr. Mike Wilkinson. They showed us the efficacy of use of local infiltration of 'cocktail' of drugs to inhibit post operative pain and thus allowing their patients to be mobilized on the same day of surgery. We also saw ACL reconstruction using artificial ligament.

On 14th morning we left for Dublin to attend BOA meeting, with Mr. Venu, where all the 3 fellows had put up a poster each for presentation. Prof Dhal also presented his podium presentation on "limbs with vascular trauma- Salvage with limited resources" which was appreciated by the chairperson & the delegates. The BOA meeting was a unique experience for us. This was very well organised in a convention centre and was well attended by about 1000 delegates. We also heard a presentation of our president elect, Dr S. Rajasekaran who gave the prestigious Hunterian oration on biomechanical aspects of child hood TB spine and scoliosis. During the conference we were invited to meet the President, Mr. Peter Kay, Mr. Mike Kimmons, CEO of BOA and Prof Joe Dias, President elect of IOA. There was a lengthy discussion about further nurturing the relationship of BOA & IOA in the future.

We returned back to London from Dublin on 15th September night. On 16th September, at King's college hospital we saw a hip arthroscopy (Mr. Venu), use of Taylor's spatial

frame for malunited ankle # (Mr Om Lahoti) and 2 revisions THR (Mr. Patrick & Mr. Venu). At the same time, Prof Dhal was at the RNOH, Stanmore with the Peripheral Nerve Injury Unit where he observed a Common peroneal nerve exploration for a posterior corner knee injury. The nerve was found in continuity (Mr. Michael Fox). He also saw an Oberlin transfer for Brachial Plexus Injury.

After a busy schedule in the week, we were given a weekend off on 17/18 September. We moved to Leicester from London on 18th September & were received & hosted by Mr. RK Pandey.

Leicester has a big Orthopaedic unit with a good Indian representation of about 10 Consultant Orthopaedic Surgeons (out of 35 surgeons in 3 hospitals). It was also interesting to note that in this group there were 4 lady Orthopaedic Surgeons and the work was given to super specialty field to each Surgeon. So there were 4 specialist foot & ankle surgeons, 4 shoulder surgeons etc. All the patients who were posted for surgery needed to come to a Pre Assessment Clinic 2 weeks prior to their surgery date to get all the clinical workup done. We noticed that there was a strict hospital policy of tie tucking and 'bare below the elbow' whilst examining a patient in the ward and in out-patient. There were strict measures to ensure patient safety. All the patients needed to be marked by the operating surgeon and all patients will have a strict check out before surgery in presence of Anesthetist, Surgeon, Nurses etc to ensure that the right patient is being operated on the correct side and for right procedure. Any one present in the OT must be registered with their details and have prior permission. WHO check list was strictly followed.

On our 1st working day in Leicester, we went to Leicester General Hospital, where we saw ultramodern and recently built Orthopaedic OT complex, where in between the OTs there were big glasses which allowed anyone to see through. We saw a patient matched TKR surgery, a revision TKR and a couple of shoulder arthroscopic rotator cuff repairs and subacromial decompression.

On 20th September, we attended the OT list of Prof Joe Dias, the president elect of BOA (the 1st Indian to get this honour), who showed us a wrist arthroscopy, Dupuytren's contracture release & a Trapeziectomy for CMC arthritis of thumb. We also watched a couple of shoulder arthroscopic procedures and a resurfacing arthroplasty of shoulder (Mr. RK Pandey).

On the following day, we were at Glenfield hospital where we saw a couple of foot surgery (TMTJ fusion, Mini Scarf osteotomy for Hallux valgus) and 2 THR (Complex Primary and revision). In the revision hip surgery we observed the use of Oscar bone cement removal from the femoral canal. This device melts the bone cement at 300 degrees locally with Ultrasonic rays and the cement removal is made look very simple. We were also fortunate to visit Leicester bone bank, which one of the biggest bone banks in Europe. They preserve fresh frozen bone at -80 degrees and not only use at their own hospitals in Leicester but also supply to 8 other hospitals across in UK.

Mr. R.K. Pandey drove us all to Birmingham to an Indian Restaurant, for a meeting with Ms Anjali Paul (CEO, Caparo Medical Products). She shared her interest in various healthcare projects, including implant business.

The penultimate day in Leicester was spent at Leicester General hospital, where we spent half day watching a THR, sub talar arthrodesis etc and then spent remaining afternoon visiting a fabulous tourist spot of Foxton Locks which was a beautiful display of canal systems used for transport in pre motor way era in UK.

On the last day of our fellowship we attended Leicester Orthopaedic Research afternoon academic program at Leicester Royal Infirmary. There were 6 presentations of the research work by specialist registrars and 2 guest speeches by Mr. J Scott (Editor of JBJS-Br) and Professor A Carr (Oxford) on "Science & Surgery". This meeting was followed by a dinner at a South Indian restaurant in Leicester City Centre with all the Consultants of Leicester hospitals and the 2 guest speakers of the day.

To sum up, this unique overseas traveling fellowship was very useful for all of us, not only in its academic contents but also allowed us to have an insight into National Health Policy of UK. Our impression of NHS hospitals was that they provide excellent healthcare facilities to every individual of the United Kingdom, free of cost (though there is some waiting time for the routine treatment). We made plenty of new friends and also could also meet some of our old friends. We were looked after very well at all the places and could never miss home during 2 weeks of our visit. Almost every day, we have had Indian dinner hosted by some one or the other. We noticed a positive image of Indian healthcare & professionals amongst UK doctors.

There could be certain improvements which can be made in this fellowship program, by having more academic involvement of the fellows (like discussions, case presentations etc). This will enhance bilateral teaching and experience sharing.