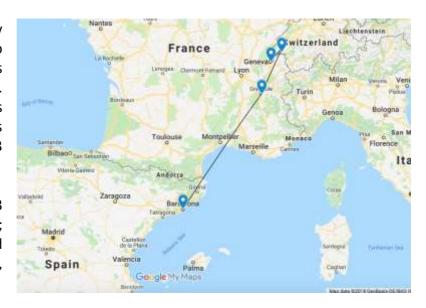
## **EFAS Travelling Fellowship Report 2018**

# Kar Hao Teoh (United Kingdom) Piotr Badylak (Poland)

Both of us were extremely delighted and honoured to be awarded this prestigious travelling fellowship by EFAS. For the first time in its history, the fellowship was extended from 2 weeks to 3 weeks.

We spent a week each in 3 countries (Barcelona, Spain; Grenoble, France; and Lausanne & Geneva, Switzerland).



### Barcelona

The first stop of the fellowship started at Barcelona. Our local host was Dr Jordi Vega (Figure 1). Barcelona is not only famous for its football club and its players but they have many renown F&A surgeons too! Therefore to maximise our experience, Jordi organized an extremely intense programme for us, and we visited several F&A surgeons and centres (Figure 2). The Spanish surgeons work extremely hard. The morning session usually ends around 2-3 pm. They start between 3-4 pm again and usually finishes from any time between 8-10pm. Siesta, we were told, is a myth!



Figure 1. With Jordi Vega, our local host.



Figure 2a) Hospital Quironsalud Barcelona



b) Clínica Mi Tres Torres



c) Hospital Sant Rafael



d) Hospital Universitario MútuaTerrassa

We assisted in 24 operations during this week and were exposed to the full range of F&A pathologies. We both were highly impressed with Dr Jordi Vega's all inside arthroscopic lateral ligament reconstruction with augmentation as he made it look so easy (Figure 3). Dr Rabat, who is an expert in MIS surgery, arranged a few cases to showcase his technique to us e.g. DMMO, percutaneous scarf and akin, percutaneous claw toe correction (Figure 4). He kindly took time to teach us the use of ultrasound in F&A (Figure 5) and arranged for us to spend time with the podologist to see the use of 3D pedograph and pedobarograph in making customized insoles for patients.



<u>Figure 3. All inside arthroscopic</u> <u>brostrum repair</u>



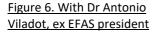
Figure 4. With Dr Eduard Rabat

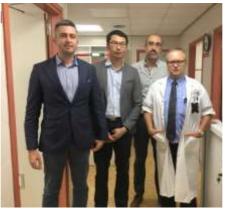


Figure 5. Dr Rabat explaning ultrasound to use on his nurse

We also got to spend time in theatre with the past president of EFAS (2012-2014), Dr Antonio Viladot and it was great to learn from his wealth of experience (Figure 6). Dr Fernando Alvarez, current EFAS council member, hosted us for a day in Hospital Sant Rafael and share with us his great surgical experience (Figure 7). We also spent a day in Terrasa with Dr Josep Torrent, an up and coming F&A surgeon and previous fellow of Dr Rabat & Dr Vega. Terrasa is the 3<sup>rd</sup> biggest city in Catalonia and deals with a lot of major trauma due to its locality (Figure 8).







<u>Figure 7. With Dr Fernando Alvarez,</u> <u>current EFAS council member</u>



Figure 8. With Dr Josep Torrent

Apart from the intense timetable, we found time to buy last minute tickets for the Barcelona - PSV Champions League game at Camp Nou where Messi scored a hat-trick (Figure 9). We are both big fans of football and it was great to soak in the atmosphere of the Camp Nou. Dr Viladot and Dr Vega kindly took us out for some delicious traditional Catalan food at a popular restaurant on the coast of Barcelona during the end of the week. We were very touched by the warmth of all the Spanish surgeons who hosted us. This was a tiring but enriching week.



Figure 9a. At Camp Nou



Figure 9b. Final scoreline



<u>Figure 10. Dinner with Dr Jordi Vega</u> <u>and Dr Antonio Viladot</u>

Week 1	AM	PM/Evening	
Mon	Operating theatre (Hospital QuironSalud)	Operating theatre (Clínica Mi Tres Torres)	
	Jordi Vega & Eduard Rabat	Antonio Viladot	
Tues	Clinic (Clínica Mi Tres Torres)	Operating theatre (Clínica Mi Tres Torres)	
	Jordi Vega	Fernando Alvarez	
Wed	Operating theatre (Hospital QuironSalud)	Operating theatre (MútuaTerrassa)	
	Eduard Rabat	Eduard Rabat	
Thurs	Operating theatre (Hospital Sant Rafael)	Clinic (Hospital QuironSalud)	
	Fernando Alvarez	Eduard Rabat	
Fri	Operating theatre (MútuaTerrassa)	Operating theatre (MútuaTerrassa)	
	Josep Torrent	Josep Torrent	

Table 1. Timetable for Barcelona

### Grenoble



Our next stop was Grenoble with EFAS president elect, Dr Yves Tourne at the Institute of Grenoble Foot and Ankle. He was very organized and we had a full timetable sent to us weeks prior to the fellowship! He helped us arranged accommodation at a local chateau in his village which was a fantastic quaint option and even chauffeured us to the clinics every day. The clinics was based at Centre Ostéo Articulaire des Cèdres while the operating theatres was based at Clinique des Cèdres (Figure 11). This week was roughly a 50:50% mix of clinics and theatre. During the week, we assisted in many operations including the Tourne's lateral ligamentoplasty, percutaneous forefoot surgery, hindfoot correction and TTC fusion for loose ankle prosthesis with massive osteolysis (Figure 12).



Figure 11. The Institute of Grenoble Foot and Ankle



<u>Figure 12. Both of us scrubbed with Yves Tourne; group picture with his Argentinian fellow, Julieta Porta and visiting Australian fellow</u>

There was a scientific presentation by Yves followed by discussion every evening with dinner. Topics were a mixture of what he felt would be useful in our practice and what his clinical and research interests were in. These included scarf osteotomy, 1<sup>st</sup> MTPJ arthrodesis, Chronic ankle instability, Achilles tendinopathy, ankle arthrodesis. He also organized a sawbone workshop for us during one of the afternoon with Arthrex and we had the chance to practice

several procedures we saw during the week and work out for ourselves in vitro whether it was more practical to use screws or step plate for large calcaneal osteotomy displacement. We also had an evening session with in2bones where we got to see first-hand his new ankle arthrodesis plate (Neofuse) with a novel targeting device for a separate long compression screw (Figure 13). We were invited to the regional F&A meeting which occurs every 2 months where difficult cases were discussed. Kar presented a case of his too. We found this meeting very useful and we were not aware that the French had so many cases of isolated Brachymetatarsia!



<u>Figure 13. Pictures of sawbone workshop and one of the many evening presentations we had from Yves Tourne</u>

We also had a session with the physiotherapy department observing the Myolux system in use (Figure 14). Gilles Beraud, his orthotist, and Julieta Porta, his Argentinian fellow, were both very helpful during our stay and we would like to specially thank them for all their help. The week was rounded off with a free Friday climbing up the Bastille for lovely views of the Grenoble city centre and the surrounding mountains (Top picture of Grenoble section). This was followed by dinner at Yves's lovely house where he and his wife, Marie, dined us with delicious traditional home cooked French food, a generous selection of French cheeses, and several amazing French wines (Figure 14). We look forward to being back in Grenoble/Lyon in 2 years' time at the next EFAS congress.



Figure 14. Myolux system, picture with Yves Tourne in his office and the lovely French wine and cheese at this <a href="https://doi.org/10.1007/journal.org/">house</a>

Week 2	AM	PM	Evening
Mon	Clinic	Operating theatre	Scientific discussion
Tues	Operating theatre	Sawbone workshop	Scientific discussion
Wed	Clinic	Operating theatre	Scientific discussion
Thurs	Clinic/Myolux with physio	Clinic	Regional F&A meeting
Friday	Bastille	Grenoble city centre	Dinner at Yves

Table 2. Timetable for Grenoble

#### Lausanne

Prof Xavier Crevoisier hosted us for the last part of the fellowship, along with his other F&A consultant, Dre Katarina Stanekova (Figure 15). We were based in CHUV (Center Hospital Universtaire Vaudois) which is the University hospital in Lausanne. As EFAS started on Thursday, we only spent 3 days there. Lausanne welcomed us with rain and low temperature. But this was made up with the warm and friendly atmosphere from Prof Crevoisier and his team. Again, it was a 50:50% split in clinics and theatres like Grenoble. During our first day, Prof Crevoisier treated us to a nice evening meal in the city centre of Lausanne with his foot and ankle team to welcome us (Figure 16).





Figure 15. With Prof Crevoisier

Figure 16. Dinner with his team

Prof Crevoisier organised a special programme in theatre for us. The ones we found particularly interesting were a corrective subtalar and lisfranc fusion for cavo-valgus foot, revision arthrodesis for a first MTPJ infected non-union which had several attempts in another centre, and a sinus tarsi approach for calcaneal fracture. We really enjoyed the time we spent in clinic with Prof Crevoisier and Dr Stanekova as they were continuously discussing difficult cases with us and asking us what we would do in our practice. This intellectual exchange was very beneficial and promoted thought provoking discussions.

Week 3	AM	PM	Evening
Mon	Clinic	Operating theatre	Dinner with department
Tues	Operating theatre	Operating theatre	
Wed	Clinic	Clinic	EFAS presidential dinner
Thurs - Sat	EFAS congress		

Table 3. Timetable for Switzerland

#### **EFAS** congress

We left Lausanne for Geneva on Wednesday afternoon to attend the EFAS presidential dinner (Figure 17). Marino Delmi, the EFAS president, kindly extended an invitation to both of us. He explained to us about the importance of this fellowship and as a society, EFAS is very passionate to promote education in young F&A surgeons. It was humbling to be able to meet all the council members and previous presidents of the EFAS and network with them. The EFAS congress's theme was State of the Art: Foot and Ankle Surgery. The scientific programme was of very high quality with lectures from esteemed F&A surgeons from all over Europe. We presented our fellowship experience at the General Assembly on Friday lunchtime and we

were finally able to heave a sigh of relief. This has been the longest 3 weeks of our life. We have seen first-hand that EFAS is a fantastic society which combines the different foot and ankle surgery schools in Europe.

The aims of the fellowship were observing and learning first hand, exchanging best practice with host centres and enhance endeavors in a career as a foot and ankle surgeon. We believe this fellowship definitely achieved all these and more. We have learnt new techniques which we plan to try in our own practice. We will be looking for opportunities to collaborate for future research and continue to keep in touch with host surgeons. In fact, all 3 centres said that they would welcomed us back anytime.



Figure 17. With Marino Delmi and Yves Tourne, outgoing and incoming president of EFAS

<u>Figure 18. With Dr Nuno Côrte-Real, EFAS fellowship</u>
<u>Chair</u>

#### **Acknowledgements**

Firstly, we would like to thank EFAS for this wonderful opportunity in our early budding career. We have benefited greatly from this experience and this has definitely broadened our F&A horizon. This fellowship could not happen without the host centres and the surgeons. We are grateful to all of them for organising special programmes for us during our stay. We were really touched by their warm hospitality and we could feel the strong EFAS ethos and spirit throughout these 3 weeks. We feel fully inducted into this special EFAS big family now.

We would like to personally thank Dr Nuno Côrte-Real (Figure 18) and his EFAS fellowship committee for choosing us and for selecting such great centres and host surgeons. It is also important to acknowledge Kristina from EFAS secretariat MCI for her kind help throughout the process and making the fellowship so seamless. Lastly, both of us believe we have the best travelling fellowship so far offered by EFAS because we were able to meet and spend time with the past (Antonio Viladot), outgoing (Marino Delmi) and incoming (Yves Tourne) president of EFAS.

The fellowship has also made us good friends for life. We look forward to attending more EFAS events together in future and support the workings of EFAS in any way we can as we progress through our F&A career.

Thank you. Gracias. Merci.

Disclaimer: We had tried to make this fellowship report succinct but due to our wonderful experience and to do justice to the amount of preparation the host surgeons had put in, this is the best we can do!  $\odot$