NEWS

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SPECIAL THANKS

We would like to sincerely thank our corporate partners and supporters:

THE ALWIN JÄGER FOUNDATION, CHELSEA FOOTBALL CLUB, TORNIER and ZIMMER.

All these organisations generously support our ultimate goal of increasing the quality of life of patients.

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THE ESSKA NEWSLETTER
is a biannual publication of the European Society of Sports Traumatology, Knee Surgery and Arthroscopy.

ESSKA welcomes members to submit suggestions and contribute articles for our Newsletter.

Dear ESSKA Members and Friends,

As I detailed in my KSSTA article (ESSKA from Berlin 1984 to Palma de Mallorca 2016: “from a resident to a President”), I encountered ESSKA at its inception.

In 1984 I was only a young resident, but was already interested in knee surgery, sports traumatology, and arthroscopic surgery. So I attended the first ESSKA Congress in Berlin.

After that, I never missed an ESSKA Congress. At the Palma de Mallorca Congress, 1992, Alfredo Savioune Panni and I received the Theo Van Rems prize for the Best Scientific Paper, which was published in the very first edition of KSSTA. It was a great honour for me.

In 1989 I won the ESSKA-AOSSM travelling fellowship, itself the brainchild of Werner Müller and John Fougain.

Over these years ESSKA has steadily grown under the guidance of its various Presidents and Boards. These have been men of vision increasing the quality of life of patients.

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Over the years, the duties of ESSKA’s President and Board have become increasingly demanding. We’ve come a long long way from those first amateurish efforts of 1983.

My first appointment in ESSKA was as Chairman of the Education Committee, then as Treasurer, and then as Vice-President. And now I have the honour of being President of this prestigious scientific association.

ESSKA’s Amsterdam Congress was an unbelievable success, with 3,374 participants (an increase of 32% over the previous congress) from 84 countries (70 at the previous congress), with over 160 hours of scientific sessions, more than 600 e-posters, and over 900 speakers at the podium, 20 hours of recorded sessions for ESSKA’s Academy, and 568 new ESSKA Members!

But above all, we reached out and made new friendships across the world.

We now have 3,545 members (2510 in Europe, 1033 outside Europe) in 94 countries!

Our Sections and Committees are already hard at work after Amsterdam, developing the science (the books, the symposia, the DVDs, etc...). And I welcome new members of the ESSKA Board: David Dejour, 2nd Vice President; Michael Hantes, Treasurer; Roland Becker, Vice General Secretary, and Mustafa Karahan, ESSKA Academy Coordinator.

Our KSSTA Journal has achieved an impact factor of 2.8, and our new online journal, The Journal of Experimental Orthopaedics (JEO), is ready to roll. I urge you to keep sending in your papers, to support the JEO as you’ve supported KSSTA in the past.

I’d also urge our members to participate in ESSKA’s other ventures (The Academy, The Fellowships, etc.).

And finally, my thanks to all of ESSKA’s previous Presidents and Board members, with whom I’ve had the pleasure to work, and from whom I’ve had the honour to learn. Good luck and “buon lavoro” to my current Board, and to the various Committees and Sections.

I want you all to know that I’m committed to doing my best, my very best, over the next two years — to consolidate the projects that we’ve recently launched and to honour our scientific association.

My best wishes and “ciao” to you all.

Matteo Denti
ESSKA President
THANK YOU TO THE PAST PRESIDENT

On behalf of all at ESSKA we would like to thank President Espregueira-Mendes.

João inherited a society which had been dramatically expanding.

His task was to complete large and important projects: the purchase of KSSTA Journal; the launch of a new online journal, JEO; and the creation of ESSKA's Foundation in Luxembourg which would make our finances secure.

All of this needed a man of political skill and charm and intelligence, and in João ESSKA found the right man, a 'calm hand on the rudder'.

We thank you João, and your 100 year-old Port was really splendid!

IN 2013, WE INVITED ESSKA MEMBERS TO SUBMIT IMAGES FOR OUR FIRST ESSKA PHOTO COMPETITION. TWO PHOTOS WERE SUBMITTED BY PROF. PAU GOLANÓ IN THE OPERATIONAL PROCEDURES CATEGORY, AND THEY WON HIM SECOND PLACE. ALTHOUGH PROF. GOLANÓ WAS ONLY A PHOTOGRAPHER IN HIS SPARE TIME, HIS PICTURES DEMONSTRATE AN UNSURPASSED EYE FOR DETAIL, AND HIS ABILITY TO REVEAL THE HIDDEN BEAUTIES OF THE BODY. PAU GOLANÓ IS GREATLY MISSED, BUT HIS LEGACY WILL SURVIVE. "GOLANÓS" WILL CONTINUE TO APPEAR IN PRESENTATIONS, ALL OVER THE WORLD, AND YOU WILL ALWAYS RECOGNIZE A GOLANÓ WHEN YOU SEE ONE.

Requiescat in pace

Pau Golanó

ACL, footprint anatomy

Lateral collateral ligament of the ankle
2014 AMSTERDAM 16TH ESSKA CONGRESS SUMMARY OF SUCCESS —

ESSKA’s 16th Congress was held in Amsterdam, from 15-17 May 2014. The mere figures are impressive. There were 3,374 participants from all five continents, with more than 80 countries represented. There were 37 free-paper sessions, 866 podium presentations, and 502 posters, 18 Instructional Course Lectures, 14 keynote podium presentations, and 602 posters. There were 37 free-paper sessions, 868 lectures, and 53 symposia.

And there are some only a symposium. After our previous congresses in Oslo 2010 and Geneva 2012, the bar was set high for Amsterdam. Could we match their success?

Amsterdam 2014 was also redolent with innovation. This congress was our first to introduce Live-surgeries on cadavers. The surgical sessions which demonstrated ankle-arthroscopy, arthroscopic shoulder-instability and partial knee-replacement, attracted hundreds of spectators, whilst the demonstration of ACL plus anterolateral ligament reconstruction stimulated an avid debate about such a new and controversial topic.

Amongst the most crowded sessions were the symposium on patellofemoral pathologies, held by Elizabeth Arendt and David Djour. They revealed a renewed and global interest in the patellofemoral joint, as further demonstrated by ESSKA’s Special Issue ‘re-discovering the patellofemoral joint’, also edited by Elizabeth Arendt, David Djour and Stefano Zaffagnini.

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Also innovative were the use of electronic and interactive platforms, employing the latest software, which enabled posters and videos to be presented and refreshed on-demand.

In conclusion, we should accept that, with Amsterdam 2014, our ESSKA Congress has achieved a world standing. Our sister societies were everywhere evident. All the European National Societies, and the most important International Societies such as ISAKOS, APKASS, AOSSM, SLARD and EFOST were enabled to organise their own symposia, upon topics chosen by the congress chairman. In addition, the guest lecturers added a truly international dimension. Instance the Chief of the Beijing Sports Medicine Department, Feng Hua, who described his interesting experience with mini-invasive PLC surgery.

The success of Amsterdam 2014 was also redolent with innovation. This congress was our first to introduce Live-surgeries on cadavers. The surgical sessions which demonstrated ankle-arthroscopy, arthroscopic shoulder-instability and partial knee-replacement, attracted hundreds of spectators, whilst the demonstration of ACL plus anterolateral ligament reconstruction stimulated an avid debate about such a new and controversial topic.

Dear Friends and ESSKA Members,

For the last two years, it has been my great pleasure to lead one of the foremost Societies in Orthopaedic Sports Trauma. I was honored to work with an amazing team, whose efforts enabled my mandate to run smoothly and effectively. Together, we set a strategy, and then we worked together to achieve it. The office team, led by Zhanna Kovalchuk proved itself unbeatable. It has been a laborious time, but we achieved our five goals.

• A New ESSKA Headquarters in Luxembourg
• ESSKA purchase: ESSKA’s journal of clinical science
• JEO creation: ESSKA’s journal of basic science
• ESSKA Academy: our online educational platform
• ESSKA’s Foundation (created under the umbrella of the Luxembourg Foundation)

ESSKA has also grown dramatically: we have doubled our numbers over the last two years. We now have more than 3,000 members, from 85 countries and all five continents, and with 28 European affiliated societies. This has made ESSKA one of the world’s most relevant societies in our field. Our Congress in Amsterdam was attended by more than 3,300 professionals, which also reflects ESSKA’s new status. This was an outstanding event, with one of the finest scientific programmes ever.

I am deeply thankful to everyone who stood by my side. I would like to thank our Congress President Wink van Dyk, and the Chairmen of the Scientific Committee Stefano Zaffagnini, Roland Becker and Gino Kerkhoffs for all the hard work they have shown from the start.

Now it is time to smile, to give thanks, and to wish good luck.

Thank you, my friends!

João Espregueira-Mendes
2012-2014 ESSKA President
What a Wonderful Congress!

Whenever I look back on our Amsterdam Congress, I have a big smile on my face, and feel immensely proud. I also feel very grateful, both as Congress President and as a friend, to all those who contributed. It was something great we achieved together.

The figures themselves are awesome. We brought together 3,374 specialists - an increase of more than 30% - from 84 different countries, and we managed to create the perfect atmosphere for them to mingle and meet, to strengthen old friendships and establish new ones, and to exchange their knowledge. Hundreds of new connections were made, and ESSKA has gained many new friends. And it all felt so right!

As for the programme, there were 900 speakers on the podium, 160 hours of scientific sessions, 600 e-posters. If ESSKA stands for quality, then our Amsterdam Congress has again proved it.

ESSKA itself was represented by an impressive new booth where everybody was welcomed by our Executive Director Zhamma Khoefeldijk and her splendid team. Free books from the ESSKA-Springer library were given to visitors. Also new were the orange-clad AKB ME volunteers, medical students from my own department, for whom no request was too much.

Besides the science, there was also time for exploring the beauties of Amsterdam. Some participants walked while others biked daily to the RAI Conference Centre, savouring the atmosphere of the canals and the gabled houses of Amsterdam’s medieval centre, which is now designated a UNESCO World Heritage. For partners there was a special programme composed. An art historian gave a personalised tour of the famous Rijksmuseum, on the theme Partners in the art of Rembrandt. On Friday there was a one-hour tour, in a classic wooden canal boat from the 1900s, which revealed the secret life of the canals, the famous canals which date from Amsterdam’s Golden Age.

On a purely personal note, I enjoyed another new ESSKA ritual, the Presidents’ Friends Dinner. Hosted by Elisa Espregueira-Mendes and myself, this informal party was held at my former home, in the Scheepvaartmuseum (The Shipping Museum), and one of Amsterdam’s oldest monuments.

One of the main events, however, was the Gala Dinner, held in the Scheepvaartmuseum (Maritime Museum), the 17th century headquarters of the Dutch East India Company. Guests were welcomed at the pier by a traditional Dutch Chauffeiro choir, then proceeded to the old Inner Courtyard, which is now covered by an immense glass roof containing thousands of tiny lights. It was a glorious setting for such an occasion. Because of the friendly spring weather, cocktails were served outside, beside the replica of a wooden East Indies ship, The Amsterdam. The evening started with my favourite Jazz musician Eric Vloeimans – the Dutch-born Eric - who wrote specially for this evening an ‘Orthopaedic composition’, entitled “Loose Bones”. The world première of this mini symphony, was accompanied by arthrosopic videos of surgical lossy bones moving to the rhythm of the music. All six hundred guests rendered him a standing ovation. You can watch his performance on the Ankleplatform website (www.ankleplatform.com).

Then followed another new ritual, the presentation of ESSKARs, the ESSKA Rewards for Service. These are three awards, with which we’ll be honouring members and associated organisations that have made a special contribution to ESSKA. The three categories are: the Most Active Section (or committee), the Most Valuable Society (affiliated or partner), and the Most Dedicated Individual Member of ESSKA.

Nominations were accepted throughout the preceding year, from the extended board, the committees, the sections and other ESSKA notables. Final selection was by secret voting of the Executive Board, and the presentation was a spectacular ‘Oscar-Hollywood’ ceremony in which the last three Nominees of each category were presented to the audience. It was all rather splendid, and most enjoyable.

The finalists for the Most Active Section were ESSKA-AFSAG, the ESSKA Arthroscopy Committee and the ESSKA Hip Society. The winner was ESSKA-AFSAG, and the jury cited their organisation of five open meetings, three consensus meetings, two hands-on cadaver courses and the publication of two books. The jury especially appreciated the various collaborations that ESSKA-AFSAG has formed with ICRS, ASTARO, EFORT, ATSG and with the Amsterdam Ankleplatform.

Finalists for the Most Valuable Society were ASTDOR, AGA and SFA. The winner was SFA, and the award was received by their president Olivier Courage. The jury specifically cited their Strasbourg Course, their collaboration with ESSKA fellowships, and ESSKA’s participation in SFA’s national Congress for the Most Dedicated Individual Member award there were three finalists: Giuseppe Milano, Sebastien Kopf and Pau Golanó. The Award was given to Pau Golanó. The jury cited his valuable contributions to ESSKA congresses, to our KSSTA Journal and to various courses. This international recognition of his talent and his dedication for ESSKA was clearly very important to Pau, and it’s gracious to reflect that he passed away soon afterwards.

The gala programme ended with a superb performance by the Dutch National Ballet widely regarded as one of the world’s best. They performed a beautiful pas de deux by Erik Batte, as choreographed by Hans van Manen, and accompanied live by a concert grand. It was a moving combination of beauty, grace, and music and, for us, specialists, it was also a superb athleticism.

Then followed an enthusiastic after-dinner-dance with a DJ, which ended, or so the rumour goes, sometime after 2 am...
MEMORIES FROM ESSKA’S 16TH CONGRESS
AWARDS GIVEN DURING
THE 16TH ESSKA CONGRESS
IN AMSTERDAM 2014

THEO VAN RENS BEST PAPER AWARD
SPONSORED BY ESSKA PRIZE MONEY: 3,000 EUR
Winner: Gustaaf Reurink (The Netherlands)
Title: “Platelet-rich plasma injections in acute hamstring muscle injuries: A randomised controlled trial”

PORTO INNOVATION IN ARTHROSCOPY AWARD
SPONSORED BY PORTO PRIZE MONEY: 2,500 EUR
Winner: Tatsuo Mae (Japan)
Title: Second-look arthroscopy after anatomic ACL reconstruction: a bone-patellar tendon-bone vs hamstring tendon graft

ALWIN JÄGER BEST VIDEO AWARD
DONATED BY THE ALWIN JÄGER FOUNDATION PRIZE MONEY: 1,500 EUR
Winner: Adrian Wilson (United Kingdom)
Title: Distal Femoral Osteotomy

AWARD FOR BEST PAPER IN LIGAMENT AND BIOMECHANICS
SPONSORED BY SMITH & NEPHEW PRIZE MONEY: 2,000 USD
Winner: Steven Claes (Belgium)
Title: Biomechanics of the Anterolateral Ligament (ALL) of the Knee: The Pivot-Shift Unraveled?

THE NICOLA’S FOUNDATION YOUNG RESEARCHER AWARD (< 40Y)
SPONSORED BY THE NICOLA’S FOUNDATION PRIZE MONEY: 1,000 EUR
Winner: Tijss Duivenvoorden (The Netherlands)
Title: Six-year follow-up of a randomized controlled trial comparing closing-wedge and opening-wedge high tibial osteotomy for medial compartment osteoarthritis of the knee

KSSTA BEST PAPER AWARD
SPONSORED BY ESSKA PRIZE MONEY: 1,000 EUR
Winners: James Oliver Smith (United Kingdom), A.J. Wilson, Neil P. Thomas
Title: Osteotomy around the knee: evolution, principles and results

KSSTA BEST REVIEWER AWARD 2013
Winners: Joerg Jerosch (Germany) and Timo Järvelä (Finland)

KSSTA BEST REVIEWER AWARD
Winners: Joerg Jerosch (Germany) and Timo Järvelä (Finland)

KSSTA BASIC SCIENTIST TRAVEL GRANT
SPONSORED BY KSSTA PRIZE MONEY: 500 EUR EACH FOR 4 SCIENTISTS
Winners: Gustaaf Reurink (The Netherlands), Jonsuke Nakase (Japan), Rachel Frank (USA), and Robi Kelc (Slovenia)

KSSTA BEST POSTER AWARD
SPONSORED BY KSSTA PRIZE MONEY: 500 EUR EACH IN 5 DIFFERENT CATEGORIES
CATEGORY: DEGENERATIVE
Winners: Petra Heisterbeek (The Netherlands), Jon Goosen, Peter van Essen, Gijs van Hellemondt, Koen Defoort, Ate Wymenga
Title: Revision of severe stiff total knee leads to moderate functional improvement, patient satisfaction and residual pain

CATEGORY: SHOULDER
Winners: Patrick Boyer (France), Jean-David Werthel, Alexandre Pelissier, Philippe Loriaut, Philippe Massin, Philippe Valenti
Title: Arthroscopic double-row cuff repair with knot-less suture bridging and autologous conditioned plasma injection: Functional and structural results

CATEGORY: LIGAMENTS
Winners: Piya-on Numpaisal (Taiwan), Hongsen Chiang, Chung-liang Chien, Ching-ehan Jiang, Syeh Chen
Title: Chondrogenic expression of human meniscal cells

CATEGORY: BASIC SCIENCE
Winners: Piya-on Numpaisal (Taiwan), Hongsen Chiang, Chung-liang Chien, Ching-ehan Jiang, Syeh Chen
Title: Chondrogenic expression of human meniscal cells

CATEGORY: SPORT SCIENCE
Winners: Piya-on Numpaisal (Taiwan), Hongsen Chiang, Chung-liang Chien, Ching-ehan Jiang, Syeh Chen
Title: Chondrogenic expression of human meniscal cells

CATEGORY: LIGAMENTS
Winners: Atsuo Nakamae (Japan), Mitsuo Ochi, Nobuo Adachi, Masataka Deie
Title: Platelet-rich plasma in combination with TGF-b antagonist as novel therapeutic option for muscle repair after injury

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ESSKA CONGRESS – AMSTERDAM 2014

ESSKA 2014 AWARD RECIPIENTS

KSSTA Editor in Chief Jon Karlsson, KSSTA
Reviewer of the Year 2014 Timo Järvelä, and KSSTA Deputy Editor in Chief Richard Beker

KSSTA Editor in Chief Jon Karlsson, KSSTA
Reviewer of the Year 2014 Timo Järvelä, and KSSTA Deputy Editor in Chief Richard Beker
ESSKA has just held its 3rd Strategic Meeting, in Forte dei Marmi. Such meetings have become our nexus for progress. Held every two years, and by tradition in the president’s locale, they are intensive affairs, where the entire Board, chairman of committees and Editors of ESSKA journals spend two days with their professional consultants, scrutinizing whether the previous strategic goals have been achieved, and specifying goals for the next period.

The mood of this 3rd meeting was very amenable but by no means complacent. ESSKA has made rapid progress but, it was felt, there was much more to be done. The general feeling was that the next period should be one of consolidation, after the huge expansion of recent years. The specific resolutions were as follows:

• First and foremost, ESSKA needs to make absolutely sure that its present projects — JEO, KSSTA and ESSKA Foundation — are made to work, as well as they possibly can.

• Supporting our journals — making sure that KSSTA continues to rise in the rankings, and that JEO fulfills its promise — will require a further strengthening of the office, to cope with the ever-increasing volume of submissions.

• It was felt that ESSKA’s collaborations are currently under development and which will reach maturity in the coming years.

• The establishment of recommendations and guidelines in the fields of knee surgery, sports traumatology and arthroscopy is in order to raise and harmonise medical standards across Europe. This goal may be reached through ESSKA accredited certification processes which are currently under development and which will be looking to attract new members. With all this in mind, we have created a Membership Committee and given it the powers it needs to keep us on the right track.

Other areas of discussion were ESSKA’s natural leadership in Europe and its role in the establishment of recommendations and guidelines in the fields of knee surgery, sports traumatology and arthroscopy in order to raise and harmonise medical standards across Europe.

In addition to our homepage, we have launched a Facebook page: https://www.facebook.com/pages/Kssta-The-clinical-journal-of-Esska/184344074984472 and a Twitter site: https://twitter.com/KSSTA. These social-media websites keep our readers up to date about our journal, its leading articles (including pictures of the authors), and interesting news about our field and its people. On Facebook we have 416 followers and on Twitter 187.

We proudly announce that our KSSTA App for iPhone and Android is available now.

The link for the iPhone is (through iTunes): https://itunes.apple.com/WebObjects/MZStore.woa/wa/viewSoftware?id=912751345&mt=8


Using the App you will be able to surf through our homepage, accessing its content including the full length articles in case you have an ID and a password for example all ESSKA members have it.

Enjoy!
What features can you expect from ESSKA Academy?

• Navigation – you can navigate easily, using a user-friendly interface, and quickly find what you’re looking for.
• Search filters – there are powerful filters, which intuitively narrow your search, and guide you to specific targets.
• Viewing – you can view webcasts and presentations, using the in-built player, and keep yourself abreast of new developments.
• Downloading – you can download content, using dedicated buttons which instantly save the information for later use.
• Submitting videos for evaluation – you can submit videos, using the specialised evaluation service. This will have them rated as potential material for the ESSKA Academy.

Visit ESSKA Academy and enhance your knowledge-base!

Access the Academy by going to www.esska.org

ESSKA ACADEMY

The ESSKA Academy was officially launched during our Amsterdam Congress. It is an online educational platform — peer-reviewed and free from bias — which will improve our members’ knowledge of sports-related injuries, arthroscopy and degenerative-joint diseases. Various formats are used to demonstrate the current trends and guidelines. The Academy’s official editor is Prof. Mustafa Karahan (Turkey), and the Editorial Board comprises 14 ESSKA members, all of whom are distinguished by their long-standing dedication to ESSKA.

EDITORIAL BOARD MEMBERS ARE:
1. Umut Akgün (Turkey)
2. Björn Barenius (Sweden)
3. Semin Becirbegovic (Bosnia)
4. Steven Claes (Belgium)
5. Riccardo Compagnoni (Italy)
6. Simon Donell (United Kingdom)
7. Karl Eriksson (Sweden)
8. Anastasios Georgoulis (Greece)
9. Timo Järvelä (Finland)
10. Sebastian Kopf (Germany)
11. Nanne Kort (The Netherlands)
12. Peter de Leeuw (The Netherlands)
13. Andre Sarmento (Portugal)
14. Adrian Wilson (United Kingdom)

FUNCTIONS OF THE ESSKA ACADEMY:
The main activity of the Academy will be Submissions from ESSKA Members. These will be peer-reviewed by the Editorial Board, and can be multimedia, for example:

• Surgical technique movies
• Video podcasts

WE ALSO ENVISAGE THE FOLLOWING:
• Archiving the contents of ESSKA’s biennial Congresses, for easy access
• A Podcast Library
• ESSKA Academy lectures, leading to the ESSKA Diploma
• Webcasts
• Guidelines for Sports-related injuries, Arthroscopy and Degenerative-joint diseases
• Online versions of ESSKA Printed material (books and papers), and also DVDs

WE ENVISAGE CLOSE WORKING RELATIONSHIP WITH KSSTA AND JEO and will provide guidance for preparing papers for these two journals.

All ESSKA members are urged to make the Academy a great success, by logging-in via www.esska.org, and then making their own contributions.

Pietro Randelli
EDUCATIONAL SECRETARY

Mustafa Karahan
ESSKA ACADEMY COORDINATOR

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www.esska.org
On October 10th, the ESSKA Foundation Management Committee held its second meeting, in the offices of Fondation de Luxembourg.

The committee comprises João Espregueira-Mendes, ESSKA’s Past President, Matteo Denti, ESSKA’s President, Romain Seil, ESSKA’s 1st Vice President, Mr Roland Krecké, the Former Economy and Sports Minister of Luxembourg as an independent consultant, and Tonika Hirdman, the Director of the Fondation de Luxembourg. Its remit is to oversee our newly established ESSKA Foundation.

The committee was content with progress so far. It re-elected João Espregueira-Mendes as its Chairman, and specified the tasks for the new period, which are:

[a] fundraising for the ESSKA Foundation, so as to provide us with a secure financial reserve,
[b] investment of the funds already available, so as to ensure a good return and
[c] co-ordination with the various EU bodies, to ensure ‘compliance’ and to attract additional funding.

The Foundation funds will be available for ESSKA’s education and prevention programmes.

The Journal of Experimental Orthopaedics (JEO) has published its first articles online

Dear ESSKA members and Friends,

On behalf of ESSKA I’m pleased to announce that our Journal of Experimental Orthopaedics — the official basic science journal of ESSKA — has now published its first online articles (www.jeo-esska.com). These range from exciting reviews, for example on mesenchymal stem cells in meniscal repair, the role of aggrecan in normal and osteoarthritic cartilage, and the clinical results of multilayered biomaterials for osteochondral regeneration, to basic science investigations in the fields of biomechanics, ACL reconstruction, cartilage repair and osteomyelitis.

I am very grateful to the Board of ESSKA, who recognised that there was a need for such a journal — one that could publish basic-science reports about important investigations covering the entire musculo-skeletal system, with a view to translating them into clinical reality. JEO Journal is served by an international Editorial Board of excellent scientists, who cover the entire field of experimental orthopaedics, including cartilage, bone, tendons, ligaments and other musculoskeletal tissues. The members of this Editorial Board, our reviewers and our editorial office staff all work hard to provide a peer-review process that is both decisive and fair to authors, and with a fast turnaround time (the average time from submission to acceptance of a manuscript is 14 days).

We welcome you to submit your own manuscript to the Journal of Experimental Orthopaedics, and hope that you will enjoy JEO’s scientific content!

Please feel free to contact me at editorial@jeo-esska.com

Henning Madry, MD
JEO’s Editor-in-Chief

The ESSKA Foundation was established in 2013 under the aegis of the Fondation de Luxembourg with the aim to raise the level of care and achieving excellence in the field of orthopaedics, especially in sports medicine and degenerative joint disease in Europe, to improve musculoskeletal function and quality of life of patients.

To achieve its mission, the ESSKA Foundation supports ESSKA education and both national and international research projects in the field of orthopaedic and sports medicine and surgery with special emphasis on arthroscopy.

The Board of ESSKA is most appreciative of the support it has received from the Fondation de Luxembourg’s team and look forward to further cooperation in the future.
ESSKA-AFAS is a section of ESSKA, whose aim is to assemble the very best men in sports-related ankle and foot pathology (with a special focus on arthroscopy), and thereby create a genuine corps of European expertise. Having done this, we aim:
• to raise the standards of expertise and knowledge across Europe;
• to educate our members, and provide the means for educating them;
• to insist upon the highest professional standards, both of research and of treatment;
• to support such research, so as to advance the field generally;
• and thereby to provide the best possible care for our patients, whether they be professional sportsmen or mere laymen.

Our Present Board comprises: Niek van Dijk, President (The Netherlands); James Calder, Vice-President (United Kingdom); Milan Handl, Treasurer (Czech Republic); Daniel Haverkamp, General Secretary (The Netherlands); John Kennedy (USA); Hélder Pereira (Portugal); Akos Kynsburg (Austria); and Xavier Martin (Spain).

At ESSKA’s Amsterdam Congress, ESSKA-AFAS won the prize for “the most active” ESSKA Section! We were very happy with this reward and consider it as a stimulus to continue along these lines. Over the period, we organised several meetings, which we combined with consensus meetings. The consensus meeting topics were:
• Lateral Ankle Ligament Injuries in Top Athletes (Warsaw, 2013);
• Diagnosis of Talar OCD (Dublin, 2012);
• Acute Isolated Syndesmotic Injuries (Rome, 2013); and
• Treatment of Talar OCD (Prague, 2014).

ESSKA-AFAS was also involved at several other congresses:
• ICRS Focus Meeting – Foot & Ankle at FIFA Centre (Zurich, 2012);
• IMUKA (Maastricht, 2011); and
• EFORT Congress (London, 2014).

For these congresses we organised specialty-sessions, instructional course-lectures, and were generally active in their programmes.

In Dublin (2012) and Prague (2014) ESSKA-AFAS organised International Congresses on Cartilage Repair of the Ankle, for which we assembled an outstanding international faculty.

The ESSKA-AFAS book on Talar OCD was published in May 2014 (Editors C. N. van Dijk and J. Kennedy). We have also produced other books, in collaboration with ATSG. These include:
• Current Concepts in Orthopaedics: Achilles Tendon Rupture;
• Current Concepts in Orthopaedics: Achilles Tendinopathy;
• Current Concepts in Orthopaedics: Disorders of the Achilles Tendon Insertion.

Instructional ‘hands-on’ courses are an important aspect of ESSKA-AFAS, and over the last two years we’ve organised several Foot and Ankle Arthroscopy Courses:
• Arezzo, in 2013;
• our annual hands-on course in Amsterdam, in collaboration with the Amsterdam Foot and Ankle platform.
We have actively promoted E-learning through www.ankleplatform.com, and we’ve also developed an instructional DVD on Foot and Ankle Arthroscopy. Over the next few years we’ll be maintaining similar and new activities.

We start with our annual meeting (Budapest, 2015), which we’ll combine with a consensus meeting on Chronic Syndesmotic Instability. In June 2015 there’ll be another Amsterdam Foot and Ankle Course. For the first time this will feature a 2-day basic-course and a 2-day advanced-course. A further 2-day hands-on course is planned (Barcelona, 2016). A third International Congress on Cartilage Repair of the Ankle is also being prepared (2016, Lisbon).

An important new venture for ESSKA-AFAS is our collaboration with the Ankle Instability Group, led by Stéphane Guillo. AIG has decided to join forces with us, and is now officially part of ESSKA-AFAS. Since this group has been very active, our own activities will be expanding in this direction. In 2015 there will be a 2-day Ankle Instability Activity (Seoul), which will include a cadaver workshop. There are many other activities being planned by the group for the 2014-2016 period.

After the untimely and saddening death of Prof. Pau Golanó, ESSKA-AFAS has established The Pau Golanó Research Fellowship in his memory. This will be an annual international research fellowship, designed to promote research in the field of foot and ankle. Young orthopaedic researchers are requested to apply (see ESSKA’s website). Each year there’ll be two positions, which will enable researchers to spend three months in one of ESSKA-AFAS’s affiliated surgical centres.

Overall the future of ESSKA-AFAS is bright and exciting! You are cordially invited to join us!
ESSKA Newslettern December 2014

News from ESSKA Sections

ESSKA-EKA Section

The European Knee Associates in ESSKA had a productive 2014. At ESSKA’s Amsterdam Congress, EKA members ran the Arthritic Knee programme, a two-day scientific session with instructional courses, symposia and free papers. ESSKA’s Congress was very successful, with delegates from all over the world, and because of this our sessions were richly attended.

In September there was a “Small Implant Meeting” in Brussels, directed by Emmanuel Thienpont, which ESSKA-EKA attended in strength. All the current applications of partial knee arthroplasty were reviewed and discussed, using an exciting format.

In early October, in New York City, there was a “Transatlantic hip and knee arthroplasty meeting”, which EKA and ICR members attended, as they have for the previous three years. On this occasion European and American experiences on arthroplasty were compared in a relaxed fashion, in a stylish location close to the famous Times Square.

EKA’s 2014 closed meeting has been moved to January 2015 to be held in the famous ski resort of Zermatt in Switzerland. This meeting will be chaired by Drs Christen, Romero and Sussman, and will include a Symposium on Painful TKA. At this closed meeting the four selected EKA Travelling Fellows (Drs. Monk, Cerciello, Luyckx and Van de Groes) will take a break from their journey which includes 9 centres throughout Europe.

EKA’s 2015 will be remembered in ESSKA-EKA annals because of the first World Arthroplasty Meeting, to be held in Paris on 16-18 April, under the direction of Jean-Noel Argenson and Jan Victor from ESSKA-EKA, and Norman Scott and Arlen Hanssen from ICRJ. In combination with the 3rd Best Current Practice in Europe, this congress will build upon the curriculum and meeting format established by ESSKA-EKA in Vienna and Florence. Guest faculty includes 80 of the most renowned hip and knee arthroplasty surgeons. The call for abstracts is open at www.icjr.net/2015paris.

As you know, ESSKA-EKA is a friendly, enthusiastic and welcoming group of surgeons, who are dedicated to Shoulder Pathology. Our group was founded in Milan in November 2007. That first meeting was only attended by ten surgeons, but has since been growing inexorably, because of the increased interest in shoulder pathology. At the moment ESSKA-EKA is one of the most important such groups in the world, and its presence is increasingly being felt inside ESSKA. For example, ESSKA-EKA contributed largely to ESSKA’s Amsterdam Congress, with 3 ICLs, 5 symposia, 3 keynote lectures, 1 debate, 4 case presentations and 1 live surgery.

Our new board (2014-2016) comprises:

Angel Calvo, President (Spain); Roman Brusink, Vice President (Poland); Boris Poberaj, Past President (Slovenia); Ladislav Kouwe, General Secretary (Slovenia); Reduan Mihelic, Treasurer (Croatia); Lennard Funk, Educational Secretary (United Kingdom); Giuseppe Milano, Scientific Secretary (Italy); Markus Schiebel, Scientific Committee (Germany); Christophe Charousset, Scientific Committee (France); Bruno Tousaint, Scientific Committee (France); Nikos Tzanakakis, Scientific Committee (Greece); Ettore taverna, 1st Past President (Italy); Pascal Gleyze, 2nd Past President (France).

We have many projects and activities, both short-term and long-term, for the coming years.

Our most important project has been the creation of an “ESSKA-EKA Academy of Anatomy (Pau Golanó)”. This project was conceived by Prof. Pau Golanó and by Angel Calvo, so as to provide ESSKA with a stable setting where high-quality anatomy could be taught. Unfortunately this project was interrupted by the tragic death of our colleague Prof. Pau Golanó. He was one of my best friends, and an active contributor to all ESSKA-EKA cadaver labs (Barcelona, Warsaw, Ljubljana, Portorose, etc).

The “ESSKA-EKA Academy of Anatomy (Pau Golanó)” was completed in 2014 and is currently being expanded. The Academy is located in the famous ski resort of Zermatt (Switzerland). It is a world-class facility where high-quality anatomy education can be provided in a relaxed, comfortable setting.

Our other major projects include:

- The creation of a “Transatlantic Hip and Knee Arthroplasty Meeting” (THKAM), which will be held in New York City on 16-18 April 2015, under the direction of Jean-Noel Argenson and Jan Victor from ESSKA-EKA, and Norman Scott and Arlen Hanssen from ICRJ. In combination with the 3rd Best Current Practice in Europe, this congress will build upon the curriculum and meeting format established by ESSKA-EKA in Vienna and Florence. Guest faculty includes 80 of the most renowned hip and knee arthroplasty surgeons. The call for abstracts is open at www.icjr.net/2015paris.

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ESSKA-EKA Section

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Pau was clearly irreplaceable, a unique genius, but we shall try and complete the task, so as to honour his memory and his legacy. And we shall incorporate his name into the project, as a means of honouring his memory.
Multi-centric studies are another important task for our section. Instability, Cuff, and Total Shoulder Replacement have already been launched, and they are growing in terms of participants and of case-numbers. The creation of a ‘Uniform Data Form’ (coordinated by Roman our Vice President), which would collect and collate data from ESSKA’s Platform for European Multi-centric Studies, is the next step in our agenda.

Another objective is the creation of an ESSKA-ESA Travelling Fellowship. We think this will be feasible this year.

After 2015, ESSKA-ESA’s biennial event will be held on odd years, and sandwiched between ESSKA’s biennial Congresses. Its official name will be the European Shoulder Arthroscopy Meeting (ESAM), and it will be our official section meeting rather than a local event, and scientific rather than educational. The next ESAM will be in Rome (early October 2015), and will be directed by Giuseppe Milano.

Regarding publications, it will be very difficult to match the quality of Giuseppe Milano’s book. That will be a hard act to follow. But we intend to publish a monograph every year upon a single topic, which includes video techniques and DVD support. These will be made available on the ESSKA Academy.

If you are interested in Shoulder Pathology please join us, and you can enjoy all the benefits of our active and friendly group. All ESSKA members are welcome!

Angel Calvo
ESSKA-ESA PRESIDENT

Ladislav Kovacic
ESSKA-ESA GENERAL SECRETARY

ESSKA-ESA — 11th International Course of Arthroscopic Techniques, Ljubljana, April 2014

Ladislav Kovacic
ESSKA-ESA GENERAL SECRETARY

The International Course of Arthroscopic Techniques in Ljubljana is a traditional event, which is organized by ESSKA-ESA each April. It has become one of the most important educational venues for arthroscopy in Central and Eastern Europe, and attracts participants from many countries. Education is at a very high level.

Participants come to learn knee and shoulder arthroscopy on cadavers, with two pupils working together at each station, under their personal instructor. All faculty members are experienced surgeons, of professional and scientific reputation. For these reasons, the course is usually overbooked.

"“The course was held in our medical faculty in Ljubljana, in their lecture theatres; hence all the lectures were of good quality. Lecturers have, without exception, done an outstanding job on their presentation — not surprisingly, given that they were acknowledged surgeons on their field of work. Although the lectures were great; the best part of the course were the cadaver workshops, we were given precise instructions about arthroscopic techniques and basic manoeuvres, and later on we could also try more complex arthroscopic surgeries. Kindly, besides instructing and guiding, our teachers also gave us a fair share of ‘free hand’ and were very compliable with our needs and requests. I have learned a lot and I will be using this new knowledge in everyday practice. All in all, this course was one of the best I have ever attended and I hope it will be held annually in our city for generations to come.” — M. AMBROZIC (SLOVENIA)

"Whether it is your first time on the course, or you are returning to the meeting, it is an exceptional experience! From great lectures from renowned arthroscopic surgeons to the real thing — doing arthroscopic surgery yourself under the guidance of the senior surgeon. Besides all that, there is making new connections and meeting friends.” — M. OGISIC (SLOVENIA)

"The course offered everything you need to master the basics of arthroscopy. I had the opportunity: calmly to explore joints, learn the operating techniques and some tricks, without fear of harming the ‘patient’. It is useful to find out how to handle the structures, how firm or fragile they are. Everything we have done, was under the supervision of an expert. All of them were also very good teachers. The best practical course I have attended. Thank you.” — B. STABUC (SLOVENIA)

You are invited to our next Arthroscopic Course in April 2015.
We would like to thank everyone who has been involved with the Arthroscopy Committee over the last two years (2014-2016), during the presidency of Kainer Siebold.

The committee’s contribution to ESSKA’s Amsterdam Congress was a great success, both in symposium and ICL lectures. We presented a practical surgical guide on anterior cruciate ligament reconstruction, received from the basic science to the latest surgical developments.

The arthroscopy committee for the next period (2014-2016) comprises:

**— Aims —**

* To delve into our own particular fields of sports traumatology. Our task, if you like, is to delve into useful research that makes use of it — into our own particular fields of Medicine.

* To be fruitful; and to be competent, in any given science. We have in mind EFORT, EORS and ESSKA's European guidelines and a European guidelines for most of the sports traumatology pathologies. A special chapter of the book will deal with Operational Reports, using an electronic format, which could be used by all surgeons to store their operational records, or to contribute to ESSKA’s European multicentric studies.

Our programme will include:

- Preparation for ESSKA’s Barcelona Congress, with another symposium and an interactive ICL lecture.
- An ESSKA book on Meniscus pathology, from basic science to the latest research in meniscal repair or restoration. This will be produced together with the Basic Science Committee (Helder Pereira) and the Cartilage Committee (Gussepe Peretti), and should be ready for the Barcelona Congress in May 2016.
- The Committee will concentrate on very specific points, and either survey or clinically research in the following areas:
  - Meniscus root tear and its treatment in both stable and unstable knees
  - The forgotten ligaments’ and their effect on ACL surgery for restoring the knee to normal kinematics. What have we learned from the past?
  - Clinical evaluation of the patellar shift, scheduled for 2016, from manual testing devices to magnetic devices using Bluetooth
  - ACL registries

**— Thank you all —**
FELLOWSHIP COMMITTEE

ESSKA’s Fellowship programmes are a formative influence for young surgeons, and give them a valuable opportunity to visit ESSKA’s Accredited Teaching Centers in Europe (of which there are now 72). These centres are renowned for their high standards of clinical and scientific excellence. In addition to the 84 existing Fellowship positions (under 13 separate programmes), a new fellowship has been established this year following the death of Prof. Pau Golanó. This is called the ESSKA-AFAS Pau Golanó Research Fellowship, and has two positions each year. For our 2014 fellowship programmes, ESSKA received over 250 applications from 40 different countries. The competition was stiff, and ESSKA congratulates the following successful candidates:

Dr. Sebastian Koff (Germany)
Dr. Nicolas Pujol (France)
Dr. Christiaan Van Bergen (The Netherlands)

The ‘Godfather’ for this Fellowship is ESSKA’s Past President, João Espreguera-Mendes. The group will travel throughout the US and Canada during June and July 2015.

The APPLICATION DEADLINE for THE 2017 PROGRAMME IS 1 JUNE 2016.

Pietro Randelli
Fellowship Committee Chairman

2015 ESSKA-AOSSM DJO TRAVELLING FELLOWSHIP

ESSKA received many applications for this prestigious Fellowship programme. There were many excellent candidates, and from many parts of Europe, with an increasing number of women and Eastern Europeans, and the competition was fierce. ESSKA congratulates the following successful candidates:

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ELBOW AND WRIST COMMITTEE

This Committee began its work during the Amsterdam Congress, with Luigi Pederzini as Chairman and Denise Eygendaal as Vice Chairman.

The active part of the committee comprises Emilio Lopez Vidriero (Spain), Paolo Arrigoni (Italy), Grzegorz Adamczyk (Poland), Mehmet Demirtas (Turkey), Miguel Trigueiros and Nuno Sevivas (Portugal), Alex Van Tongel (Belgium) and Roger Van Riet (Belgium).

Our next two year’s task is to prepare an important book for publication by Springer, under the title “Elbow and Sport”. This will cover various topics regarding anatomy, clinical aspects, radiological evaluation, surgical and conservative treatments and rehabilitative guidelines.

The committee will also be active in presenting videos for the ESSKA Academy video journal.

Another goal will be organising a closed meeting, so as to define a European classification for elbow instability.

Luigi Pederzini
Elbow and Wrist Committee Chairman

CARTILAGE COMMITTEE

The ESSKA Cartilage Committee for the period 2014-2016 will be as follows:

Giuseppe Peretti, Chairman (Italy);
Peter Verdonk, Vice Chairman (Belgium); Dieter Van Assche (Belgium);
Vincenzo Condello (Italy); Giuseppe Filardo (Italy); Pedro Ripoll (Spain);
Francesc Soler (Spain); Peter Angele (Germany); Konrad Slynarski (Poland);
Michael Hirschmann (Switzerland); Ron Arbel (Israel), and Mario Joao Gamaelos (Portugal).

Some activities for 2014-2016 are being planned, but others have already started.

One such is our meeting "Early Osteoarthritis: All-round Biological Solutions". This will be held late May 2015, in the beautiful Palazzo Della Gran Guardia in Verona, very close to the famous Arena. The meeting’s President and host will be Claudio Zorzi, and the Honorary President will be ESSKA’s President Matteo Denti. Vincenzo Condello will be the Programme Chairman, aided by a Programme Committee comprising Giuseppe Peretti, Elizaveta Zeinov, Kon, and Massimo Berruto.

We are also planning events with other Committees: a book on the Meniscus, in conjunction with the Arthroscopy Committee’s energetic Christophe Hule; and a hands-on laboratory course in Milan, together with Helder Pereira, the Basic Science Committee’s chairman.

Finally, the committee intends a boost for ESSKA’s new-born Journal of Experimental Orthopaedics (JEO). Our members will all contribute, and we shall be encouraging other ESSKA members, likewise.

Giuseppe M. Peretti
Cartilage Committee Chairman
SPORS COMMITTEE

The Sports Committee’s composition changed significantly during the Amsterdam Congress.

MEMBERS 2014 - 2016:
Hermand Mayr – Chairman (Austria)
Magnus Forslund – Vice Chairman (Sweden)
Elvir Servien – Past Chairman (France)
Stefano Bella Villa (Italy)
Jan Ekstrand (Sweden)
Lars Ingbergetsen (Norway)
Christian Fink (Austria)
José Henrique Jones (Portugal)
Nicola Lefèvre (France)
Antonio Maestro (Spain)
Jacques Menetrey (Switzerland)
Victor Valderrubaho (Switzerland)
Charly Waibel (Germany)
Andrew Williams (Great Britain)
Stefano Zaffagnini (Italy)

OUR FOCUS FOR THE NEXT TWO YEARS
will be the ‘Prevention of injuries and overuse in sports’, and to this end we are preparing an ESSKA book, to be published by Springer.

This book will cover the following areas:
1. The major causes of sports injury
2. The reasons for overuse injuries
3. General principles for preventing injury
4. General principles for preventing overload-damage
5. Special aspects of prevention for children and adolescents
6. General training aspects for preventing injury
7. Aspects specific to throwing sports (in recreational sport and competitive sport)
8. Aspects specific to soccer
9. Aspects specific to alpine skiing
10. Preventative measures in Sports, and how to implement them

For such a project it is important that our Committee members cooperate with sports’ team physicians, physiotherapists, coaches, sports scientists, and orthotists. We also plan to cooperate with UEFA, FIFA, FIS and other competitive sports associations.

Our book will be presented at the ESSKA’s 2016 Congress. Our closed meetings will take place twice a year. At the ESSKA’s activity, membership, and fellowships. And we shall organize combined domestic-and-U45 ‘crossfire’ scientific symposia, dealing with topics from Regenerative Orthopaedics.

Also, we wish to train our U45 Committee members to be highly active members of ESSKA. We shall try to influence the future of our profession by publishing U45 reports, scientific papers and articles in the ESSKA Newsletter. Our closed meetings will take place twice a year. At the Amsterdam Congress we were planning our second Webinar for SFAs Cadaver Course in Strasbourg, and an open ESSKA U45 Symposium at the Balkan Arthroscopy and Sports Traumatology Congress in October in Sofia, Bulgaria. The next closed U45 Committee meeting will take place at the SFA Congress in Luxembourg, in December 2014, where we shall use the opportunity to visit ESSKA’s Executive Office.

Apart from stimulating scientific activity and collaboration amongst young specialists - those under 45 - we intend to recruit new members, and help to spread specialist knowledge by providing a forum where U45 members can present their own work to their peers. Specifically, we shall encourage U45 members to collaborate electronically. We shall do this by producing an e-mail list of all ESSKA members under 45, by establishing a closed Facebook page for the U45 Committee, and by organising ‘Webinars’ as a means to share our members’ activity, news and ideas.

We shall also organise U45 groups inside Affiliated National Societies, especially in Eastern Europe, and officially visit their National Societies’ meetings to showcase ESSKA’s activity, membership, and fellowships. And we shall organize combined domestic-and-U45 ‘crossfire’ scientific symposia, dealing with topics from Regenerative Orthopaedics.

U45 COMMITTEE

The U45 Committee represents the “new blood” and the future of ESSKA. For the next two years it will comprise twelve members from ten countries; NIKICA DARABOS, President (Croatia); NICOLAS GRAVELEAU, Vice President (France); SEBASTIEN LUSTIG, Past President (France); FRANCESCA VANNINI (Italy); VLADAN STEVANOVIC (Serbia); KATJA TECKLENBURG (Austria); MIKE BAUMS (Germany); BOBBY ANAND (United Kingdom); TOMASLAV SMOLJANOVIC (Croatia); SVEN SCHEFFLER (Germany); PANAGIOTIS HTAIGIOPOULOS (Greece); MIHAI WDREANU (Ireland/Romania).

Message from the Executive Director

Over the last two years the ESSKA office has been expanding to meet our society’s ever growing demands.

It’s been my honour to choose a new team, my own team, and I felt that I’d found a group of talented people, who between them had many different skills.

But choosing is one thing, and seeing them in action is another. Could they cope with something as challenging as ESSKA’s Congress: the sheer workload, the hustle and the confusion of those last few weeks? Could they cope with the stress?

I needn’t have worried. They proved themselves superb, a real ‘dream-team’. They were splendidly efficient, but also modest and cheerful.

I am proud of them and proud to be working with them. And it’s also been a lot of fun, see the photos...

And now, I’d like to wish my splendid team, and all of ESSKA’s members and affiliates, a Happy Christmas and an exciting 2015!

Zhanna Kovačević
ESSKA EXECUTIVE DIRECTOR
THE ESSKA NEWSLETTER WANTS YOUR SCIENTIFIC INPUT...

ESSKA Newsletter regularly includes scientific articles about new techniques, new findings, and original ideas in the orthopaedic field. We encourage all ESSKA residents, fellows, researchers, and orthopaedic surgeons to submit their work for publication. The format is less formal than for a peer-reviewed journal, and originality is very welcome.

We are waiting for your ideas and work!

David Dejmar, Nikkia Darobos
ESSKA Newsletter Editors

RECONSTRUCTION OF PROGRESSIVE CALCIFIC INSERTIONAL AchILLes TENDINOPATHY FOLLOWING ENDOSCOPIC DEBRIDEMENT

MR Carmont 1, 2, K Silbernagl 3, J Karlsson 4
1Princess Royal Hospital, Telford, UK; 2University of Delaware, Delaware, USA and 3 Sahlgrenska Academy, University of Gothenburg, Sweden

INTRODUCTION:

Insertional Achilles tendinopathy may frequently fail to respond to non-surgical treatment modalities, such as eccentric loading exercises[6], the use of heel raises and activity modification. Surgical debridement of the Achilles insertion is an effective way of reducing symptoms, although there are associated risks of wound breakdown and sural nerve injury. In some cases prolonged rehabilitation is required and the outcome can be disappointing[7-10]. Endoscopic debridement of the retrocalcaneal bursa, the retrocalcaneal bursa and the Achilles insertion has been shown to be effective in reducing symptoms[11] and minimizing these complications. A small number of patients have persistent or recurrent symptoms following these procedures and require open tendon disinsertion, extensive debridement and tendon reattachment. A case of chronic insertional calcific tendinopathy treated with adequate endoscopic debridement is reported. The debridement of progressive extensive calcific tendinopathy with previous calcaneoplasty, required Flexor Hallucis Longus transfer and reconstruction of the Achilles tendon.

CASE REPORT:

A 47 years old patient presented with a 12 months history of pain, swelling and dysfunction to the insertion of the Achilles tendon. Hindfoot alignment, ankle dorsi- and plantarflexion, and sub-talar inversion and eversion were normal. Plane radiographs revealed minimal calcification at the Achilles insertion (FIGURE 1).

A three months programme of eccentric loading exercises together with analgesics and NSAIDs did not ease the symptoms. The patient underwent endoscopic debridement of the retrocalcaneal bursa, the Achilles insertion and removal of the postero-superior calcaneal tubercle (FIGURES 2A-C). Visualization of the debridement was performed through an accessory posterolateral portal [12] with a shaver through the standard posterolateral portal. Endoscopic visualization through the accessory posterolateral portal revealed that there was no longer any impingement of the calcaneum on the Achilles insertion (FIGURE 2B).

Surgery was performed in the prone position, using a Cincinnati incision [13]. The insertion of the Achilles tendon was thickened, calcified at the attachment and with tendinosis (FIGURES 2A-C), extending proximally 4 cm from the Achilles insertion (FIGURE 2A). The tendinotic tissue was excised and the calcaneum was debrided, removing calcified tissue to cortical bone including any “pump bumps” (FIGURE 1C). In full plantar flexion, there was a gap between the tendon and the calcaneum so that direct reattachment was not possible and the Achilles insertion had to be reconstructed.

Through the Cincinnati incision, the Flexor Hallucis Longus (FHL) tendon was identified as it passed over the posterior ankle and sub-talar joints. A probe was inserted into the FHL sheath and this was palpated through the sole of the foot. An incision just proximal to the probe enabled the tendon to be identified, released and withdrawn from the sheath (FIGURE 2A). The tendon was then passed through a transverse drill hole in the calcaneum, from medial to lateral (FIGURE 3A), through a tenotomy in the proximal tendon (FIGURE 3A) and then sutured back onto itself with the ankle in full plantar flexion. The FHL tendon was sutured to the Achilles at both ends of the tenotomy and tenodesed using No. 2 Ethibond (Ethicon, Somerville, NJ) (FIGURE 4A). Wound closure was performed using subcutaneous vicryl.

Post-operatively the patient was allowed to fully weight bear with range of motion and strengthening exercises using a removable scotch cast support. Despite this, the patient reported no improvement of symptoms. MRI showed increased tendon thickness at the Achilles insertion (FIGURE 5A) with high intra-tendinous signal. The patient’s symptoms deteriorated despite two cycles of extra-corporal shock-wave therapy so that she reported constant pain during activities of daily living and severe pain on walking. Plain radiographs at one year following endoscopic debridement showed recurrent calcification within the Achilles insertion (FIGURE 6A).

Following endoscopic debridement showing recurrent calcification within the Achilles insertion (FIGURE 6A), a subsequent ESSKA Newsletter Editors, and selected submissions with be published in a subsequent ESSKA Newsletter. SUBMIT TO: Graham Woollvine, ESSKA Communications

IMAGES/CHARTS/GRAPHS:

All submissions will be reviewed by the Newsletter Editors, and selected submissions will be published in a subsequent ESSKA Newsletter.

SUBMISSION DEADLINE: no later than Friday 6 February 2015

Endoscopic view, using the Accessory Postero-Lateral portal of the Achilles insertion during debridement.

Post-operatively the patient was very satisfied with the outcome. The patient had a VISA-A of 34, an AOFAS of 85 and an ATRS of 67 (FIGURE 5B). There was considerable improvement in pain at 6 weeks and at 6 months was very satisfied with the outcome. The patient had a VISA-A of 34, an AOFAS of 85 and an ATRS of 67 (FIGURE 5B). Through the Cincinnati incision, the Flexor Hallucis Longus (FHL) tendon was identified as it passed over the posterior ankle and sub-talar joints. A probe was inserted into the FHL sheath and this was palpated through the sole of the foot. An incision just proximal to the probe enabled the tendon to be identified, released and withdrawn from the sheath (FIGURE 2A). The tendon was then passed through a transverse drill hole in the calcaneum, from medial to lateral (FIGURE 3A), through a tenotomy in the proximal tendon (FIGURE 3A) and then sutured back onto itself with the ankle in full plantar flexion. The FHL tendon was sutured to the Achilles at both ends of the tenotomy and tenodesed using No. 2 Ethibond (Ethicon, Somerville, NJ) (FIGURE 4A). Wound closure was performed using subcutaneous vicryl.

FIGURE 1: Sagittal and coronal MRI images showing thickening at the Achilles insertion and increased signal within the tendon.

FIGURE 2A TO 2D. Post-operative radiographs at 6 weeks (A) and one year (B) following endoscopic debridement showing recurrent calcification within the Achilles insertion.

FIGURE 4A and 4B. Post-operative radiographs at 6 weeks (A) and one year (B) following endoscopic debridement showing recurrent calcification within the Achilles insertion.

FIGURE 6A TO 6C. The tendinotic insertion of the Achilles tendon (A). Pathological tissue extended proximally was from the Achilles insertion (B). The Achilles insertion was reconstructed (C).

FIGURE 7. The completed reconstruction.
DISCUSSION

The most important features of this case are the failure of alleviation and progression of symptoms of insertional Achilles tendinopathy with endoscopic calcaneoplasty despite minimal pre-existing calcification. It has previously been recommended that endoscopic debridement should not be performed for calcific insertional Achilles tendinopathy [9]. Leithead et al. [9] recommended that large calcaneal spurs were not amenable to endoscopic resection but the presence of small spurs was not a contraindication. Calcification of greater than 50% of the width of the calcaneum on the axial radiograph was considered to be significant, although an absolute threshold value has not been determined. In Leithead et al. series, patients receiving open and endoscopic debridement were compared. Ten heels treated endoscopically had mild to moderate intra-tendinous calcification pre-operatively. Functional scores following endoscopic debridement were not significantly better than those after open procedures. There were three poor outcomes, all in the endoscopic group. In Ottmann and McBryde’s series of 30 patients treated with endoscopic debridement, mean scores improved from 62 to 97 post-operatively. One patient had poor outcome and required resection, reattachment and augmentation using the FHL [9].

Jerosch et al. performed endoscopic calcaneoplasty in 81 patients, the majority reported excellent or good outcome. The 3 patients with poor results all had an ossified area on the Achilles insertion and were rejected, using an open procedure with debridement and reattachment [7]. When patients with retrocalcaneal bursitis treated by open debridement were compared with those with calcific tendinosis, significant differences in terms of results were found. Those with calcific tendinosis were older, took twice the time to make an improvement, had lower satisfaction rates, a lower pain score and frequently had shoe wear restrictions. The presence, however, of radiographic recurrence of calcification did not correlate with outcome or symptomatic recurrence [10].

Insertional Achilles tendinopathy is a progressive pathology leading to the degeneration of the Achilles insertion. A common form of tendinopathy may progress and form further calcification despite endoscopic debridement. The use of FHL, harvested distally, allows debridement of the distal Achilles tendon and the calcaneus allowing reconstruction of the insertion.

TRABECULAR METAL CONES IN REVISION TKA

Sebastien PARRATE AND JEAN-NOEL ARGESNON IN BEHALF OF EKA

Institute for Locomotion
Aix-Marseille University, Marseille, France

The goal in revision TKA is to restore patient function, which means restoring a stable, painless and mobile knee. To reach this goal the surgeon will have to manage 3 challenges: 1) Obtain a good stability of the implants; 2) Restore the joint line; and 3) Restore the mechanical axis of the limb. The main limitation to achieve these basic relations is related to bone loss. In fact modern revision TKA systems with stems and knee designs take into account that the surgeon will have to manage 3 challenges: 1) Obtain a good stability of the implants and a adequate press-fit with the maximum contact and load distribution on the bone; 2) Restore the joint line; and 3) Restore the mechanical axis. The main challenge remains to obtain a good stability of the implants despite a significant bone loss.

The problem with bone loss in revision TKA

Two types of bone defects are usually observed in revision TKA: the cranial defects and segmental defects.

Two types of bone defects are usually observed in revision TKA: the cranial defects and segmental defects [6]. Other authors have talked of contained or un-contained defects but the principle remains the same. There are two main factors to be considered: the classification (such as the American Academy of Orthopaedic Surgeons classifications) has been done to exactly categorize the bone loss, which is very important for publications. Practically speaking the bone loss can be categorized as a segmental bone defect that is including or not the insertion of the collateral ligaments or as a cranial defect with preserved cruciate ligaments. The Cranial defect should be re-built to properly support the implant and a cranial defect should be filled to ensure the implants fixation. Therefore, at least a gross assessment of the bone loss is important to respectively anticipate the need of bone reconstruction and second the level of constrain of the revision TKA.

What can we use in 2014 to treat bone loss in revision TKA

Unfortunately, a lot of defects are still managed by adding more PMA-cement in the bone loss, which is obviously not adapted. Morcellized allografts have been and are still widely used for cranial defects and bulked allograft for segmental defect. The limitation of the allografts and particularly for the structural allograft are related to the high rates of failure observed between 5 and 10 years after due to an absence or an improper osteo-integration. Augmentation of the bone stock with a xenograft (autograft, bone morphogenic protein, demineralized bone matrix) or allograft may lead to bone defects. Metal sleeves are interesting to achieve a good primary diaphyseal and metaphyseal stability. But an important drawback of the sleeves is that the fact the construct is not biologically alive or active. That may be a risk factor of infection and/or loosening over the time.

More recently the Trabecular Metal® cones have been introduced as a solution for both cranial and cavitary defects of the femur or of the tibia in revision TKA. The TM® cones are now widely used particularly in the United States to manage bone loss in revision TKA.

Why and how to use the trabecular metal cones

The first reason to use the Trabecular Metal® cones is because the cones can provide the reconstruction of a strong and long lasting metaphyseal support. This strong and long lasting metaphyseal support is a key factor of reconstructing the bone and the other components involved in knee surgery are trying to develop a solution comparable to the Trabecular Metal®. One direction of research for the Trabecular metal is to use the porosity of the material as a carrier. We are actually evaluating the antibiotic-release properties of the tantalum. This property could be very interesting in complex TKA revisions performed for loosening and infection.

REFERENCES


In February 2014, ESSKA welcomed two new national organisations as Affiliated Societies, bringing our total number to 26.

The two new societies are the Association of Orthopaedics, Traumatologists and Rehabilitationists of Armenia (AORTA), and the German Knee Society (Deutsche Kniegesellschaft e.V. – DKG).

ESSKA already has two other German-speaking Affiliated Societies, AGA and GOTS, which have been working very closely with ESSKA for several years now.

ASSOCIATION OF ORTHOPAEDICS, TRAUMATOLOGISTS AND REHABILITATIONISTS OF ARMENIA (AORTA)
www.scko.am

The Association of Orthopaedics, Traumatologists and Rehabilitationists of Armenia (AORTA) was founded in 1991, and succeeds the Organisation of Traumatologists and Orthopaedists, which was established in the 1980s. It is based in the Scientific Centre of Traumatology and Orthopaedics of Armenia.

The main goals of AORTA are to educate and train orthopaedic surgeons, develop educational programmes for residents and fellows, and to certify and control the quality of the work of orthopaedic specialists and orthopaedic departments across Armenia.

AORTA organises training courses for both general and orthopaedic surgeons. Their flagship event is a meeting organised every 4 years, with the participation of international experts and guest speakers.

Six committees have been established, pursuant to AORTA’s goals: Scientific and Publications Committee, Education and Training Committee, Strategy and Development Committee, Ethics Committee, International Committee and Organization Committee.

The Society hopes to unite trauma surgeons, experts in endoprosthetics, sports trauma specialists, sports medicine and academic researchers, and to promote their research and training on injuries and diseases of the knee joint.

The current President is PROF. DR. MED. HERMANN MAYR.

ORTHOPAEDIC TRAUMATOLOGIC SPORTS MEDICINE (GOTS)
www.gots.org

The Society for Orthopaedic Traumatologic Sports Medicine (Gesellschaft für Orthopädisch-Traumatologische Sportmedizin – GOTS) was founded in 1986 by orthopaedic surgeons from Germany, Austria and Switzerland. With more than 1,000 members, GOTS is now an important association of sports orthopaedic specialists and surgeons.

Their most important event, and the main platform for exchanging ideas and knowledge, is the GOTS annual congress, which is held in June.

The central goals of GOTS are:
- linking research and sports medicine
- promoting research, advanced training and the exchange of information
- setting standards for the medical treatment of sports orthopaedic injuries, physical strains and overuse
- promoting young doctors in orthopaedic sports medicine, by comprehensive education and training programmes in Germany, Austria and Switzerland and fellowship programmes in Europe and Asia
- supporting students of medicine and young physiotherapists through their affiliated association “Young Academy”

The current President is PROF. DR. VICTOR VALDERRABANO.

ORTHOPAEDIC AND ARTHROSCOPIC SOCIETY OF CROATIAN MEDICAL ASSOCIATION (CSSTA)

The main focus of CSSTA is to collaborate with ESSKA and other international associations in the education, the scientific and practical professional work of Croatian orthopaedists, sports traumatology specialists, surgeons, radiologists, specialists in rehabilitation, and physical and sports medicine specialists who participate in our multidisciplinary associations. In addition to organising annual meetings and Cadaver Courses at University of Rijeka, CSSTA recently participated in the ESSKA Congress 2014 Symposium in collaboration with GOTS and SFA, and in 2015 will host the International Congress of Sports Traumatology and Arthroscopy.

The goals of AGA are:
- To help and encourage young arthroscopists
- To foster close contact and mutual exchange amongst physicians who practice arthroscopy
- To establish contacts with other societies whose interests coincide or overlap
- To focus on practical issues in arthroscopy
- To promote quality control

AGA’s annual congress, its programme of grants and awards, the journal ’Arthroscopic’ and 14 committees offer a platform for all physicians interested in arthroscopy.

The current President is DR. MED. MATTHIAS FLURY.
See you in Barcelona in 2016!

ESSKA Congress

4 - 7 May 2016

Barcelona, Spain

www.esska-congress.org

ESSKA President
Matteo Denti (Italy)

Congress President
Joan C. Monllau (Spain)

Scientific Chairmen
Roland Becker (Germany)
Gino M. Kerkhoffs (Netherlands)
Pablo E. Gelber (Spain)

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REPORT BY DR. MIHAI VIOREANU (ESSKA FELLOW)

The following day we visited Dr. Matthew Brick in the OR at the Auckland Hospital with Dr. Roe. Justin brought us through a juvenile ACL reconstruction using hamstring tendon autograft. Our questioning in OR was becoming energetic, but Tim patiently discussed all the subtle differences in surgical technique. After an Italian lunch with the rest of the team the academic session followed, with both visitors and hosts giving interesting talks. On Sunday, we were privileged to spend the afternoon at John and Casey’s house. John needed no introduction. He is a living legend of knee surgery. We gathered around him and enjoyed some lifelong lessons in knee surgery and his practical wisdom. With such a Mediterranean group the discussions became intense, and John concluded with a smile: “The ACL is the most talked about 3 cm in the human body, and rids the heart, the knee, the hip and the ankle to the most interesting.”

The second week began with more ACL surgery performed by Prof. Julian Feller, the incoming Godfather for the APFASS travelling group to Europe in May this year. Four ACL reconstructions reaffirmed the value words from the previous day: Time, energy and experience. The impact this trip would have on our future careers. It was an enriching experience for all of us, professionally, culturally and socially. We would recommend this trip to everyone who wants to be a part of DJO Global, the sponsor of the Travelling Fellowship, to ESSKA and APFASS, and to all the people who made this trip possible. We all look forward to hosting the future Travelling Fellows in our centres.

THE COMPLETE ESSKA-APFASS DJO TRAVELLING FELLOWSHIP 2014 REPORT IS AVAILABLE ON THE ESSKA WEBSITE UNDER ESSKA FELLOWSHIPS/FELLOWSHIP REPORTS.

ESSKA would like to thank DJO Global for supporting the scientific segments of this Travelling Fellowship programme.
The time in São Paulo was very well organised, with different activities each day.

On Friday the 6th, we started at the Instituto de Ortopedia e Traumatologia (IOT), which is one of the leading orthopaedic centres in Brazil, with specialized clinics for diseases and injuries of the extremities, spine, hand, as well as children's and sports medicine. The whole centre is a public institution, under the direction of Prof. Tarcisio Barros and Dr. Oliaro Camargo. We were honoured to present our scientific work to the whole department. We were then introduced to the different research facilities of the Orthopaedic Department and had a tour in the hospital, with visits to the Physiotherapy Unit, the Orthopaedics technology unit, the OR and Intensive Care Unit, as well as the remarkable Sports Medicine Unit, which has been declared a FIFA Centre of Excellence. In the evening we were given the opportunity to watch a match between the teams of Brazil and Serbia, in the Estadio do Morumbi, where we felt the Brazilian passion for football.

On Saturday morning we attended a special scientific meeting, organised by the various research units of the Orthopaedic Department. We relished some impressive presentations of different topics of the shoulder and knee joint, as well as sports traumatology, and glimpsed the extent of both basic and clinical research that is undertaken by the department.

On Sunday the 8th, we joined our main host, Prof. André Pedroini. He is kept very busy by his responsibility for coordinating medical care in São Paulo, during the Football World Cup. Nevertheless, he managed a tour in the World Cup Arena of Baetaque, the stadium of the Corinthians’ Sport Club Paulista. We spent Monday with Prof. Arnaldo Hernandez at the Hospital Sirio Libanés, to watch Gullermo Allende perform a closing wedge tibial osteotomy, a PCL reconstruction and an ACL reconstruction. After this stimulating day of surgeries, we had dinner with Dr. Pablo.

The fellows at the Hospital Sirio Libanés with Prof. Arnaldo Hernandez

On Monday we joined a meeting at Dr. Guillermo Bobadilla’s hospital, where we attended sessions of up-coming cases and discussions about surgical techniques and the current literature. We then moved to the OR to watch Guillermo implant a TKA, and then a femoral ostectomy performed by Felippe Martinez, another surgeon at the hospital. In the afternoon we visited the Star Clinic where we watched Dr. Camara do an ACL reconstruction.

The next day, we went to the Università Marista in Merida where we focused on the subvastus access on the knee and the visualisation of the posterior lateral corner with Felipe and Guillermo. In the afternoon — just for a change — we watched Brazil beat Mexico in the World Cup, and then we had a farewell dinner with Felipe.

Back in Cancun we spent Monday with Prof. João Espregueira-Mendes, our Godfather, recovering from his knee surgery. The next day the SLARD Congreso began, with interesting presentations such as the one from Prof. Espregueira-Mendes regarding his ideas involving the TKST — the Porte Knee Testing Device.

The fellows with the Godfather João Espregueira-Mendes

The next day, we shared our wonderful travelling fellowship experience. We thank ESSKA and SLARD for this amazing opportunity, and while we write this report we can still see the warm smiles of all the wonderful people we met!

The ESSKA delegation from left to right: Rainer Sembol, Heidelberg, Germany (ESSKA Associate Editor); Karl Petter Benedetto, Friburgh, Austria (ESSKA Past President); Romains-Vel, Luxembourg (ESSKA 1st Vice President); Jacques Menetrey, Geneva, Switzerland (ESSKA General Secretary); Masahiro Kurosaka, Kobe, Japan (Congress Chairman); Dirk van Dijk, Amsterdam, Netherlands (ESSKA Past President); Jan Kadowa, Gothenburg, Sweden (ESSKA Editor in Chief); Mitoso Ochi, Hiroshima, Japan.

ESSKA was present at the 87th Annual Meeting of the JOA in Kobe Japan

A strong ESSKA delegation was honoured to be invited to this year’s 87th Annual Meeting of the Japanese Orthopaedic Association from 22 to 25 May 2014 in Kobe, Japan, hosted by Kobe University. This year’s congress was chaired by Professor Masahiro Kurosaka, the inventor of the interference screw. The ESSKA representatives gave many lectures on various topics in arthroscopy and orthopaedic sports medicine. The congress was attended by approximately 10,000 delegates. One of the highlights was the guest lecture of Prof. Shinya Yamana, the Japanese Nobel Prize Winner of Medicine in 2012 for the discovery that mature cells can be reprogrammed to become pluripotent.

Prof. João Espregueira-Mendes

The ESSKA was present at the 87th Annual Meeting of the JOA in Kobe Japan

ESSKA is extremely grateful to Prof. Kurosaka and his Japanese friends for their outstanding hospitality.

TUSYAD’s 12th Congress in Izmir, Turkey

The 12th Congress of the Turkish Society of Sports Traumatology, Arthroscopy and Knee Surgery (TUSYAD) was held between 23-27th September 2014 in Izmir, Turkey. The participants’ feedback has been excellent. A total of 190 papers, 64 of which were free papers, were presented in three parallel sessions, and the rest were e-poster presentations. All abstracts will be published in the Orthopaedic Journal of Sports Medicine, the official journal of TUSYAD. The programme also included 13 ICUs, 10 symposia, 7 interactive symposia, 2 debates and 35 lectures (sometimes in three parallel sessions). The participants showed great interest in the ISAKOS, ESSKA, AKPAS, and EPOST lectures, which were being presented for the first time in a TUSYAD Congress. ESSKA Treasurer Michael Hantes was the ESSKA representative. Thanks go to ISAKOS, ESSKA, and EPOST for their scientific support.

Friends from AGA organised their second symposia after 8 years with great success. Simultaneous translation was provided in all halls throughout the congress.

The complete ESSKA-SLARD travel fellowship 2014 report is available on the ESSKA website under ESSKA Fellowships/Fellowship Reports.
ESSKA TALKS ABOUT INSTABILITY AND TANGO
IN BUENOS AIRES, ARGENTINA

The XIII International meeting of the Argentinean Arthroscopy Association was held in Buenos Aires in June 2014. The AAA began in 1986, and now has 1,100 members. Every two years it organises an international meeting in Buenos Aires. This particular meeting was attended by over a thousand. 2014 was the first time ESSKA had been invited. There was a very well attended symposium about “Instability”, with Angel Calvo on shoulder, Nikica Darabos on knee, and both Pablo Gelber and David Dejour on knee. We considered it a great success.

The other international society present was AOSSM, and there were energetic exchanges between AAA, AOSSM and ESSKA, not only about science, but also about tango during our gala dinner.

ESSKA would like to thank Daniel Shillitoe, Claudio Mingo Seluzo, Rodrigo Maestru and the Board for their invitation.

SIGASCOT CONGRESS IN PARMA, ITALY

In the beautiful city of Parma, from September 24th to 26th, more than 700 Italian and foreign Orthopaedists, Sports Traumatologists and Physiotherapists attended the 5th National SIGASCOT Congress.

The congress programme had a very positive response, courtesy the two programme chairs, Andrea Baldini and Giuseppe Milano, and to the lectures they’d commissioned, from Christoph Ergeleit (Switzerland), Wulf Petersen (Germnani), Matteo Denti (Italy), Ian Victar (Belgium), Pietro Randelli (Italy), Mitsu Ochi (Japan), Anastasios D. Georgoulis (Greece), Alessandro Castagna (Italy), Emmanuel Thienpont (Belgium), Claudio Zorzi (Italy), and Bruno Toussaint (France).

The overall meeting was a great success; President Paolo Aдрavantи set the tone with his generous welcome, and the Auditorium Paganini was simply beautiful as a congress venue. The Auditorium itself was originally a sugar mill, which has been completely redesigned by the world-class Italian architect Renzo Piano, and in the basement there’s a fascinating exhibition of more than 40 stands.

We would also like to mention the two ESSKA symposia: “Osteotomies Around the Knee: Case-Based Reasoning and Decision Analysis” and “Tunnel Placement in Anterior Cruciate Ligament Reconstruction: Current Concepts”.

We’d like to thank Jacques Menetrey (Switzerland) and David Dejour (France) for their vigilance on behalf of SIGASCOT. And our gratitude also goes to Pietro Randelli, our new first Vice President, who has been a valuable mediator with ESSKA.

During this Congress SIGASCOT changed its presidency, with Paolo Aдрavantи handing over to Stefano Zaffagnini, who will be in charge as until September 20th, 2016, the date of our 6th National Congress in Florence.

SFA CADAVER COURSE IN STRASBOURG, FRANCE

At the same Congress SIGASCOT changed its presidency, with Paolo Aдрavantи handing over to Stefano Zaffagnini, who will be in charge as until September 20th, 2016, the date of our 6th National Congress in Florence.

SFA invited ESSKA to provide faculty for their Cadaver Course in Strasbourg, so from 29 September to 1 October 2014, four ESSKA U45 Committee members attended — Bobby Anand, Tomislav Smoljanovic, Katja Tecklenburg and Nikica Darabos. Nearly 30 young colleagues from all over the world also participated. It was an amazing assay of shared knowledge and surgical skills, in the arthroscopic approach to knee pathology, perfectly organised by the IRCAD centre in Strasbourg.

ESSKA representatives used the opportunity to present both ESSKA and U45 Committee activities. This has been a successful event for the last several years, and ESSKA and SFA have already confirmed that they will collaborate on the Cadaver Course again in 2015.

5** BSSAST CONGRESS IN SOFIA, BULGARIA

The 5th Balkan Arthroscopy, Sports Traumatology and Knee Surgery Congress took place in Sofia, Bulgaria on 10-12 October 2014. Organisers led by Balkan Congress and Bulgarian Arthroscopy, Sports Surgery and Trauma (BSSAST) Chairman Dr Robert Halvadjian invited many ESSKA members to be involved as faculties in several sessions, showing the tremendous amount of respect that organisations have for ESSKA.

At the same Congress, in a cross-fire session ESSKA U45 Committee representatives Dr Scheffer, Dr Tecklenburg and Dr Darabos with their Bulgarian U45 colleagues Dr Hubenov, Dr Filipov and Dr Bochev presented their talks about biological enhancements in tendons pathology, meniscus and ACL surgery at open ESSKA U45 Symposium “Biologic Factors in Sports Orthopaedic Medicine of the Knee.”

Also, organisers have arranged a competition for the best U45 scientific paper award with the first year ESSKA membership annual fee granted to the winner, thus allowing him to apply for the ESSKA fellowships. The primary goal of the 5th Balkan Arthroscopy, Sports Traumatology and Knee Surgery Meeting was achieved. It included over 200 participants from 15 different countries in the Balkan region, intensively collaborating on a highly scientific and professional level. This event was truly a success and ESSKA found new and valuable members and partners in this part of Europe, again.