IBRA FELLOWSHIP REPORT

John Tawfik MBBS B. Pharm FRACS

Fellowship period: 11/10/2010 to 17/12/2010

Place: Dept of Hand, Plastic and Reconstructive Surgery,

Kantonsspital St Gallen, Switzerland.

Supervisor: Professor J. Grünert

I was very fortunate to spend some time with Professor J. Grünert and his wonderful team at the Kantonsspital, St Gallen. I am an Australian Orthopaedic Surgeon with an interest in hand surgery and my aim was to visit a unit outside of Australia to experience their organisation, surgical acumen and operative techniques.

The working days were well structured. Mondays, Wednesdays and Fridays followed a similar timetable with a morning handover meeting commencing at 0745am. The previous day's Admissions and Emergency cases are discussed and relevant imaging reviewed. Surgery commences at 0800am and is usually a mixture of semi urgent and elective cases. The majority are hand surgery cases, with some plastic and reconstructive cases. At 1400pm the Outpatients Clinic commences where both acute, elective preoperative as well as postoperative patients are reviewed. Tuesday commences at 0740am and the additional 5 minutes are dedicated to the discussion of more difficult cases. During this meeting, a summary of the history and clinical findings along with imaging and laboratory results are presented by one of the juniour doctors and then a discussion focussed on tailoring a management plan for that particular patient is undertaken. There is no outpatients clinic on Tuesdays and theatre time is dedicated to the more prolonged Plastic and Reconstructive cases. Thursday morning is the Professorial ward round where all inpatients are reviewed by the Professor and his team as well as with members of various allied health departments such as hand therapists and nursing staff. This is followed by an outpatients clinic in the morning and a concurrent theatre list.

The exposure to surgery was of course invaluable, but so too was the exposure to the postoperative follow up. To experience both similar and different rehabilitation techniques and philosophies and to experience this in the context of a different culture with its own patient demographics and patient expectations significantly enriched the experience for me.

The most useful and helpful part of the experience for me was the endless opportunity to ask questions of more experienced colleagues. All my questions were welcomed and answered. I cannot imagine how many times the Professor heard me ask "Why?", "Why do you immobilise?", "Why do you use that approach?", "Why

do you prefer this technique?" and "Why do you use that particular implant?" to name just a few questions. One can learn a lot from textbooks and journals but there are certain things that can only be learned through experience and the Professor was always more than happy to share his experience with me. The Professor made me feel comfortable asking him questions regarding his practices.

I had the opportunity to observe and assist in a wide variety of hand surgery cases. The number of hand cases during my fellowship that I was directly involved in was 115. These included two first rib excisions for Thoracic Outlet Syndrome, two transscaphoid perilunate dislocation reconstructions, a Modified Brunelli procedure, four Sauve-Kapandji procedures, a syndactyly release, two total and two partial wrist fusions including an Radio-scapho-lunate fusion as a salvage for post traumatic Radiocarpal arthrosis and the more common hand surgery procedures such as fractures, lacerations, tendon and nailbed repairs, microvascular surgery, ganglions, carpal and cubital tunnel and Dupuytrens disease. I kept a logbook of all cases to help my recall in the future for when I am confronted with similar cases in my own practice.

I was also very fortunate to assist in two PIP joint replacements via a volar approach. This approach has the advantage of early active mobilisation with no limitation of flexion or extension given that the extensor mechanism and central slip are not disrupted during this procedure.

The Professor has an interest in wrist fractures (among many other interests) and the contemporary approach to early fixation and early mobilisation is adopted well in this institution.

There is a biomechanics laboratory which also has an operative microscope. I spent some time in there working on my microvascular skills and techniques on various models.

The Professor encourages attendance at courses and other professional development activities and was also a monumental role model for me personally in teaching me the importance of maintaining interests outside of the field of medicine. One example of a professional development activity that I undertook during this time was attendance at a Symposium focussing on Ulnar nerve neuropathy at the elbow, hosted by the Schulthess clinic in Zurich.

The Professor's contributions to the fields of hand, plastic and reconstructive surgery are astronomical to say the least. I have often quoted his work on distal radius fractures and more recently on mirror therapy in various presentations and to meet him in person was a real honour. What is even more amazing to me was his humility despite his enormous past, present and future achievements.

The Professor and all of his team always made me feel welcome. The Department made an effort to include me and to translate salient points for me during discussions

and procedures. They welcomed me into their work as well as social life, which made this a truly unique experience.

No International Fellowship is complete without a cultural component. St Gallen is a beautiful Canton of Switzerland with amazing scenery, mountains, food and culture. It is near to both the Austrian and German borders, which made it easy to visit both countries. I explored Switzerland, Germany, Austria and Italy during my time and have learned just as much about history, culture, architecture, politics and food as I have about hand surgery. I hope this makes me a better surgeon and a better person when I return home.

I would like to personally and wholeheartedly thank Professor Grünert for his time, patience and wonderful teaching. He has certainly influenced my practice and my life in general. I would also like to thank his team for their support and friendship. Lastly I would like to thank IBRA for the scholarship, which made this truly unique experience possible.