The 2013 Austrian-Swiss-German Traveling Fellowship tour

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The Austrian-Swiss-German (ASG) Traveling Fellowship, initiated in 1978, is considered to be the highest distinction within the German-Speaking Orthopedic Associations. In odd-numbered years, four young consultant surgeons, one each from Austria, and Switzerland and two from Germany visit orthopedic centers in England, Canada and the USA, in a program coordinated by the American (AOA), British (BOA), and Canadian (COA) Orthopedic Associations. Reciprocally in even years one Canadian, one British and two American surgeons tour centers of academic excellence in Austria, Germany and Switzerland. Based on this longstanding tradition, the ASG fellows from the AOA, BOA, COA and Swiss, Austrian and German Orthopedic Societies represent a strong and growing leadership community within their respective countries that has substantially fostered international exchange between the participant nations and aims to promote development and leadership in orthopedics. A large number of former ASG fellows currently occupy department chairmanships of Universities in German-Speaking countries and have important roles within their national Orthopedic community.

Selection is by application to national associations and candidates must be under 45 years old, and possess a significant academic record. The philosophy of the fellowship is to identify, develop, engage and recognize leadership, to stimulate an established consultant practice, to import useful concepts as well as to stimulate an established consultant practice, to import useful concepts as well as to

During the six weeks tour, we visited 14 different academic orthopedic departments in the UK, USA and Canada and attended two national meetings in North America. The main features of each visit were generally academic sessions, wherein we presented our research to the clinical and academic units. We would then either visit the research facilities, laboratories, surgical skills facilities, or go into the operating theatres. Additionally we would often visit local cultural sites and in the evenings we would attend social events or formal dinners where we would meet the faculty.

Commencing on May 27th in the UK, our first stop was London, where Fares Haddad, Professor and Director of the Institute of Sport, Exercise and Health at University Colleges of London (UCL) was our first host. During our three-day stay in London we attended OR sessions with ACL reconstructions, arthroscopic sports medicine cases and periacetabular osteotomies. We recognized that there is a marked difference between the public healthcare system and the straightforwardly organized private sector in Great Britain.

We continued by train to Nottingham and were welcomed by Mr. Angus Wallace, Head of the Division of Orthopedic/Accident Surgery and Mr. Peter James, Consultant Orthopedic Surgeon at Nottingham University Hospital. This locale afforded us the chance to attend several cases of upper extremity trauma at one of the busiest trauma units in England. Additionally, Peter James familiarized us with specific features of contemporary British surgical wards such as an open Nightingale ward, where 24 to 34 beds are in one large room without subdivisions. We also learned that in England the title Minter within the Medical Profession signifies the rank of Surgeon. This anomaly of title is derived from the Barber Surgeons of the Sixteenth and Seventeenth Centuries who practiced surgery but did not have the formal University training of a Physician (who did not cut) and were therefore not recipients of a University degree (Surgeon-trainees were apprenticed). As a result they were called Minter by the public. This societal convention continues today in spite of the fact that a Surgeon is a qualified Physician with a conferred University degree.

On June 3rd, we headed across the Atlantic from Birmingham to Chicago. Terrance Peabody, Chair of the Orthopedic Department of Northwestern University School of Medicine and current president of the AOA was our first host in the US. Terrance Peabody gave us a fantastic architectural and culinary tour through Chicago and we also enjoyed a taste of the famous ribs at the legendary Twin Anchors in the Old Town of the city (Figure 1). We visited our relevant subspecialties for seminars and theatre sessions and we were given an impressive tour through the brand new pediatric hospital. The culture of philanthropy is far more prevalent in the US than in our respective three countries and donations from individuals that may exceeding $150 million are inconceivable in Austria, Switzerland or Germany. The stay in Chicago was concluded with a joint academic session. We cannot overemphasize the value during our stay of the continual attendance of Professor Peabody who introduced and discussed a wide variety of current topics extant in US orthopedics research and practice.

Following a train ride, we arrived in Springfield (Illinois). Here we visited the Southern Illinois University and we were welcomed by our local host Khaled Saleh, Chair of Orthopedic Surgery and his chief residents. We participated in the 2013 E. Shannon Stauffer Visiting Professor event and as no common residents graduation ceremony exists in any of our countries, we enjoyed to watch the tradition of roasting the chief residents’ during their official graduation ceremony. Guided by Keith Gabriel, Head of the Southern Illinois University Pediatric Orthopedics, we also visited the Springfield Abraham Lincoln Presidential Museum where we learned many interesting facets of Abraham Lincoln’s life.

The next stop was Little Rock, Arkansas and the University of Arkansas. Our local hosts Richard Nicholas, chairman of the Department of Orthopedics and Dale Blaster, Pediatric Orthopedic Surgeon along with faculty members and their spouses gave us a warm and personal welcome. On the following day, the whole staff and faculty participated in an academic symposium and we learnt about current scoliosis treatment for children in the US. The remainder of the weekend was reserved for outdoor activities and we also had – from a central European point of view – the unique experience of a gun fire training on a shooting range under the supervision of a former US
Marine. At the beginning of the new week, we spent time in the OR with children’s surgery and total joint replacement. We realized that the actual practice of orthopedics is technically the same in North America and our countries, although we have different attitudes to some issues, e.g. hip resurfacing and metal-on-metal bearing surfaces in THA, which is currently used with greater restraint in Austria, Germany and Switzerland. Visiting the research facilities at the University of Arkansas, we were particularly impressed by the work of the bone biology group at the Center for Orthopedic Research directed by Larry Suva.

The stay in Arkansas ended with a visit to the William J. Clinton Presidential Center before we boarded a plane bound for Denver (Colorado), where our host Evelina Burger, head of the Spine Center at University of Colorado Medical Centre, greeted us at the airport. Here we spent a day in clinics and OR with faculty within our respective areas of sub-specialization. The University of Colorado hosted both the AOA-ASG fellows as well as the fellows of the Japanese Orthopedic Association (AOA – JoA) at the same time on the occasion of the AOA meeting. All traveling fellows participated in a joint symposium at which JoA fellows, ASG fellows and Denver residents and faculty alike gave presentations. On the following three days we then attended the AOA Annual Meeting in Denver. We found the emphasis on training and leadership during the meeting most interesting. Moreover, we had the excellent chance to exchange ideas with several members of the US national associations, catch up with some of the surgeons that we had met on our trip and enjoyed meeting former ASG traveling fellows from the US during the ASG alumni dinner, organized by Richard Iorio, Chief of Adult Reconstructive Surgery at NYU Langone Medical Center and Chief Coordinator of the AOA-ASG fellowship program (Figure 2).

The next stop was Omaha, Nebraska and there we were hosted by Kevin Garvin, Chair of the Department of Orthopedic Surgery at the University of Nebraska and Susan Scherl, Pediatric Orthopedic Surgeon and herself AOA-ASG fellow in 2010. Kevin Garvin and Susan Scherl showed great friendship but also applaudable patience in teaching the basic rules of baseball to us during the annual College World Series baseball tournament in Omaha. On the following Monday morning, we had a most interesting academic exchange with the faculty and residents during the Grand Rounds and we also visited the department’s Orthopedics Biomechanics and Advanced Surgical Technologies Laboratory.

Our next stop - the University of Iowa in Iowa City - was a very impressive unit and a highly integrated academic clinical center. Our local host, Lawrence Marsh, Professor at the Department of Orthopedics and Rehabilitation is also a former ASG Fellow and we had the pleasure to interact with the whole renowned Iowa City faculty during various informal dinners and intense academic exchanges (Figure 3). We were very impressed by the outstanding local orthopedic biomechanics and osteoarthritis research laboratories. Furthermore, we had the chance to acquaint ourselves about the effects of President Obama’s health care bill on the US hospital landscape in general and on orthopedic surgery in particular and it was interesting to follow the debate about the advantages and/or disadvantages of a free market solution to health care in contrast to a publicly funded system amongst our American colleagues.

Next, we headed North to Canada and visited the Canadian Orthopaedics Society Annual Meeting in Winnipeg. We then continued to Hamilton (Ontario) where we were hosted by Michelle Ghert and Mohit Bandari, Directors for Research at the Center for Evidence-Based Orthopedics at McMaster University. We enjoyed a most interesting culinary and cultural tour of the Niagara region followed by a joint academic session that focused on perspectives of evidence-based medicine (EBM) in North America and Europe. Since EBM is becoming ever increasingly important in our respective countries, we were impressed by the stringent approach to clinical orthopedic research as presented by the whole MacOrtho group at McMaster University (Figure 4).

Next, we took a train along the shore of Lake Ontario via Toronto to Kingston, where our local host Dan Borschneke, Chair of Division of Orthopedic Surgery at Queen’s University, familiarized us with the role of orthopedics within the Canadian Health Care System. The following day was filled with a detailed tour through the multidisciplinary Human Mobility Research Centre where a close collaboration between the disciplines of medicine, engineering and computer science was displayed. We enjoyed in-depth discussions concerning topics of modern orthopedics with Canadian residents in the relaxed atmosphere of a combined department dinner/journal club. The Social Highlight in Kingston was a unique 1000 Islands tour on Lake Ontario on the boat of Gavin Woods, Attending Orthopedic Surgeon at

Figure 1. Terry Peabody, acting president of the American Orthopedic Association hosted the ASG fellows during their stay in Chicago, including a stop at the famous Twin Anchors restaurant.

Figure 2. The ASG Fellows with Richard Iorio, Coordinator of the AOA-ASG Fellowship.
Queens University.

For the last two stops of our tour, we headed back to New Orleans. Our local host Raoul Rodriguez, Chairman of the Department of Orthopedics at Tulane University, introduced the unique Creole and Cajun regional cooking on our first night in town. Whilst participating in an academic symposium with a focus on evolving techniques in sports medicine, we were impressed not only by the current standards but also the fees of sports medicine practitioners in the US. Moreover we had the pleasure to once more attend the chief resident’s graduation ceremony with Tulane faculty and the Caldwell Society Alumni.

For the final clinical stop of the tour, Scott Duncan, Chair at the Department of Orthopedic Surgery at the Ochsner Health System, hosted us. During a swamp tour we got closer to Louisiana wildlife; the following day afforded us a most interesting introduction and insight into the world of a private academic, multi-specialty, healthcare delivery system. Again, we had the chance to attend OR cases and for an exchange of ideas during an academic session. We were impressed by the fact, that our host has a dual function both as Chair and member of the hospital management and we felt that this should be a practice that our countries could possibly implement-or at least consider as well.

The ASG traveling fellowship tour 2013 was a trip of profound significance for all of us. We had collectively not anticipated the gracious hospitality that we received and our hosts did everything to ensure that we were well looked after. Hosts, faculty, residents and staff were extremely generous with their time, attention and resources, and we deeply regret that we cannot mention all of them by name. We were extremely grateful for the opportunity to meet many of the academic leaders and outstanding researchers in orthopedic surgery in the UK, USA and Canada. We achieved a much more profound conceptualization of the North American health care system and simultaneously made valuable contacts and friends. Our exposure to these academic centers enabled us to recognize the differences in the financing of medical education and hospitals between our countries. At present, medical school is (apart from a small administration fee of around 100 USD per semester) free of charge in Austria, Germany and Switzerland. Funding of university departments in our countries is mainly based upon national general health insurance and private insurance companies. In comparison to our countries, we felt that our colleagues in the US and Canada are under greater pressure through advertising, surgeon appraisal and competition. However, we also found similarities in our systems. As in North America, coding is the key that is central to recouping costs from our health insurances and accuracy in this particular parameter is paramount. Concurrently measures of quality in orthopedic surgery remain equally important in Northern America as is found in our respective countries.

In the end, we felt that we all face similar problems, with limited funding of health care, maintenance of standards, and support for leadership and academic orthopedics. The ASG fellowship requires sacrifices but is an unparalleled opportunity to promote and improve our profession across the World.

We would like to cordially thank the American Orthopedic Association, the Canadian Orthopedic Association, British Orthopedic Association and our German, Austrian and Swiss national Orthopedic Societies who made the 2013 ASG tour experience possible, exceptional and memorable.