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NEWSLETTER OF THE MALAYSIAN ORTHOPAEDIC ASSOCIATION

FEBRUARY 2006

OFFICE BEARERS 2005/2006

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Mid-Term Message from the President of the Malaysian Orthopaedic Association

by Dr Ruslan Nazaruddin

I am very grateful for this opportunity to pen a mid-term message as the President of the MOA after being elected six months ago. It is indeed an honor to serve the Association as a leader since then. Perhaps it would be appropriate to reflect on what has come before, what is in the offing for our Association in the near future, and maybe I could get some response or feedback on measures to improve the overall service to the members and growth of the Association itself. Before I proceed, I would like to extend my sincere gratitude to all the Council Members for their kind support and assistance to me in discharging my duty as the President. I must say that although it has been rather time consuming to hold the responsibility of being in this post despite my busy daily schedules I really enjoy working with an efficient and jovial secretary such as Miss Y M Kong who keeps reminding me constantly of important meetings or assignments to be completed!

I have so far encountered a few issues during my first half of the presidency.

Proposal to Buy Office Space in the Academy Building

This was discussed at length at the last AGM. Generally, everyone agreed to the idea but the question is how much money do we need to finance the deal and can the Association afford it? I think we should consider the benefits of acquiring it for long-term use. The MOA has been in existence for 38 years and yet till today, we still do not have office space (to call our own...). What will happen in the next 20 years from now? Do we still wish to be in the present situation, comfortably sharing tables, chairs or other amenities with the other associations? Most of us are aware that our belongings have accumulated over the years and we need to store them in a proper place after use, and to avoid unnecessary loss or misplaced items. There is also a crying need for a permanent secretariat or a round table meeting room for our own personal use. Other great advantages to be located in the same premise as the Academy include the opportunity to utilize other common facilities such as a bigger meeting venue/room to hold seminars or other orthopaedic related activities, easy access to the Academy library, etc. This would definitely benefit the younger members in future. Take for example, in the USA, the AAOS have their own building equipped with modern facilities, enabling them to conduct activities such as orthopaedic continuing professional development activities and workshops, large enough to cater for at least 120 persons. Our Association should work towards realizing such a dream one day!

Inevitably, there is a huge obstacle to overcome, which is the price of the office space. As far as we know now, the spaces are over-booked! Almost every medical association/society in the country is trying to take up space in the Academy building, just so to be in the same building as the Academy. However, the Academy has not finalized the price yet although the initial price offered was RM350 per sq. ft.; bearing in mind that there would also be other fees to meet including the maintenance and utility fees as well as the S&P fees. The last letter from the Academy stated that we have to wait for another two to three months before we receive the offer letter (expected to be in January 2006), wherein the details of the other costs would be listed. Until then we will not be able to update our members about the complete and detailed proposals to purchase the said space.

National Specialist Register

The Ministry of Health Malaysia and the Academy of Medicine of Malaysia are working hard on establishing a National Specialist Register. This issue was discussed at a meeting organized by the Council of the College of Surgeons with presidents and representatives of the continued on page 2

surgical bodies in October 2005. It is important to have a National Specialist Register to monitor and update the qualifications and procedures required for a specialist. Most importantly, it is for the benefit and protection of the public.

There are a few hiccups when tabling this issue though. Most of the surgical disciplines wish to have a specific format that can generally be used by all surgical disciplines. Unfortunately, up till now, none of the surgical disciplines has managed to draw up a good format, except for Ophthalmology. All of us were then advised to adopt the Ophthalmology format, appropriately guided by Dr Pall Singh.

The Ministry of Health has already sent out letters of appointment to the Specialty Subcommittees including Orthopaedic Surgery. I earnestly hope this Subcommittee would work hard on the specialist register and the credentialing criteria soon.

Breaking News in the Media

It is undeniably exciting to get good or bad breaking news in the media! It would keep you wanting to hear or see more of the sequels. For example, the historic surgical attempt to separate the head of the conjoined craniopagus Iranian twins (Ladan and Laleh Bijani) in 2003 was so extensively covered by the media in Singapore and abroad, long before it was performed. One of the issues highlighted pertaining to this surgery was the earnest consent from the father to let the twins undergo the surgery by the experts in Singapore. He was very well informed about the success rate and the possible risks of the surgery. Even the patients themselves were matured enough to understand the risks, including death, but they wanted to be separated under all circumstances anyway. Tragically, the twins succumbed to their death during the marathon operation, as the surgery was not as straightforward as anticipated by the team of surgeons and doctors involved. For the family and friends of the twins, they were too distraught by the failure of the operation. For the neurosurgeons, it was another rare surgical experience but nevertheless a learning curve.

Recently there was also another pair of young twins (Pakistani) who made headlines in 2005. The news of the 10-year-old craniopagus twins from Pakistan who would undergo yet another surgical attempt to separate them was published in The Star newspaper on 6 October 2005. It was to take place in Saudi Arabia, by a world-renowned surgeon from USA, who had successfully separated a few pair of conjoined craniopagus twins before. This surgery was going to be fully financed the Saudi royalty. Nevertheless, there was not much news written in the local newspapers regarding this surgery as compared to the previous surgery of the Iranian twins, except on 6 October 2005. Sadly, one of the Pakistani twins did not survive the operation.

The morale of the story is that, it is alright to make headlines in the news about any surgical attempt you are going to do as long as you are completely and fully prepared for the surgery in terms of skills, technicality and management of the possible outcome or rather complications that may arise during or post surgery. Complications do occur; however, we must try to minimize the effects on the patient as much as possible. Best practice is the way to go.

Last but not least, as we usher a fresh new year of 2006, we look forward to have an important event of a combined meeting (MOA and APOA Trauma Section) which would be held in Hilton and Le Meridian Hotels in Kuala Lumpur from 1 - 4 June. It has been quite sometime since the last MOA meeting was conducted in Kuala Lumpur city. The theme is for the coming Meeting is "Restoring Optimal Function". The focus would be on the upper limbs and navigation arthroplasty, and trauma. The Committee Members are working hard to make this event a success and the biggest MOA AGM/ASM ever. I fervently wish that all members would give their full support for the coming Meeting.

36th MOA AGM/Annual Scientific Meeting & 2nd APOA Trauma Section Meeting

- Date ~ 1 to 4 June 2006
- Theme ~ Restoring Optimal Function
- Venue Hilton Kuala Lumpur & Le Meridien Hotels, Stesen Sentral Kuala Lumpur, Malaysia
- Website ~ www.apoatrauma06.org

SECRETARIAT MOA/APOA TRAUMA COMBINED MEETING 19 Jalan Folly Barat, 50480 Kuala Lumpur, Malaysia Tel: (603) 2093 0100, 2093 0200 Fax: (603) 2093 0900

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ASSA PACIFIC DETHOPAEDIC ASSOCIATION

Humanitarian Mission in Lebanon and Syria

Sharaf Ibrahim

Humanitarian Committee, Malaysian Orthopaedic Association, Kuala Lumpur

The Malaysian Orthopaedic Association (MOA) is collaborating with the Palestinian Children's Relief Fund (PCRF) to help with the orthopaedic treatment of Palestinian children. The PCRF (www.pcrf.net) was established in 1992 to provide free medical treatment to Palestinian Children. I was in Beirut and Damascus from 30 August to September 4, 2005. Ms Nuha El Masri, the project manager for the PCRF in Lebanon and Syria, has been extremely helpful in co-coordinating this visit.

We went to Damascus on August 31. Beirut to Damascus was approximately 3 hours by taxi. It was a scenic route as we were using the mountain highway. Malaysians do not need a visa to enter Syria.

In Damascus we were warmly welcomed by Dr Ali, the head of the orthopaedic department and Dr Bashar, the paediatric orthopaedic surgeon in Al Mujtahid Hospital, the largest public hospital in Damascus. There are 8 surgeons and 30 residents in the orthopaedic department. The hospital is undergoing renovation and has about 500 beds. We agreed that the MOA could help by sending a team for scoliosis surgery and shoulder/knee arthroscopic procedures. This would also include lectures tentatively during the spring of 2006.



Al Mujtahid Hospital, Damascus



Operating theater, Al Mujtahid Hospital, Damascus

Damascus is an ancient capital with the Old Quarters dominated by the grand Omayad Mosque and the bustling Suq Hamidiyah.

On September 2, we visited Bait Atfal As Samood kindergarten in Shatila. Bait Atfal As Samood has been supported for many years by the Malaysian Social Research Institute founded by the late Dr Elijah Gordon.



Entrance of Bait Atfal As Samood, Shatila, Beirut

Shatila and Sabra were the sites of the massacre of 2,062 Palestinians and Lebanese by Phanlangist militias supported by the Israeli Defence Forces on September 16, 1982.



Palestinian children in the kindergarten of Bait Atfal As Samood in Shatila



Haifa Hospital, Borj Al Barajneh



We then visited Haifa Hospital in Borj Al Barajneh. This is a small hospital of the Palestinian Red Crescent Society with about 50 beds. Living conditions in the refugee camps are poor with thousands of people

cramped in a small area.

Grocery store, Borj Al Barajneh

How else can you help?

Sponsoring the education or medical treatment of a Palestinian child or a monetary donation is always welcome.

Please contact the Palestinian Children's Relief Fund (<u>www.pcrf.com</u>) or the Malaysian Social Relief Institute (<u>msri@po.jaring.my</u>) for further information.

Future Missions

We are also collaborating with London-based Dr Ang Swee Chai of Medical Aid for Palestine to help in training Palestinian orthopaedic surgeons in Malaysia.

Other future missions may include Darfur in Sudan and Cambodia in collaboration with Mercy Malaysia.

ASEAN AMERICAN TRAVELLING FELLOWSHIP 2005

FELLOWS

Dr Nucki Nursjamsi Hidayat (Indonesia) Dr Pan Kok Long (Malaysia) Dr Francisco Perez Altarejos (Philippines) Dr Ooi Lai Hock (Singapore) Dr Thipachart Punyaratabandhu (Thailand)

I wish to thank the Malaysian Orthopaedic Association for this opportunity to go on this fellowship. It was with some trepidation that I made the decision to go; having to leave family and work for one full month. Despite this continuous concern amidst the constant traveling and grueling schedule, it has been a very good experience in many ways.

The five Asean traveling fellows first met when we landed in Chicago. Though it was the first time that we were seeing each other face to face, we soon gelled together in meeting a sometimes daunting cultural environment. We became very supportive of each other and soon got to know each other very well, including our individual idiosyncrasies.

The next day we were brought to the Zimmer Headquarters at Warsaw, Indiana in an extra long limousine. The large sprawling complex housed the administrative and manufacturing facility in what was coined as the "orthopaedic manufacturing centre of the world". We were pleasantly surprised by the VIP welcome including our names on the electronic signboard and large flags of all the five Asean countries hung up at the entrance lounge! A very efficient guide brought us around and showed us in a stepwise manner, the genesis of a prosthetic joint from the drawing boards until its completion. It was sobering to find out that each prosthesis had its own individual mold and had to undergo a painstaking quality control process.



Our first stop at an academic centre was at Loyola University in Chicago. The Chairman (Head) of the Orthopaedic Department, Dr Terry Light, was a hand surgeon and also the second president elect of the American Orthopaedic Association. Our arrival coincided with the graduation ceremonies of the final year residents and we joined in at the presentation of their theses and the graduation dinner. It was a grand and touching affair as both the faculty and residents presented humorous caricatures of each other in a friendly atmosphere. On the weekend Saturday, = Dr Light brought us round Chicago. My preconceived ideas of a crowded city seething with crime was completely turned around by a beautiful, clean city which we saw. We were shown the Sears Tower and I was kind of proud that the Petronas Twin Towers had overtaken the Sears Tower as the tallest building in the world. The Americans were well aware of that fact too. In the afternoon we went to a baseball game and a body works exhibition at the Museum of Science and Industry; both costly affairs. They were prepared to splash money on us and we were very appreciative of it.



From Chicago, we flew to the University of Wisconsin at Madison. The chairman, Dr Thomas Zdeblick is a well known spine surgeon. He presented to us his series of disc arthroplasy patients. In subsequent visits to other centres the debate on fusion versus arthroplasty would constantly resurface. He had also done more than 300 cases of endoscopic spine surgery but was beginning to move towards minimally invasive surgery using small incisions which reduced the complication rate. The Orthopaedic Department had its own research laboratory which was manned by engineers and scientists who came under the purview of the Chairman of Orthopaedics. As we would later see, all the major centres of orthopaedic excellence would also have a prominent research arm as one of its features. On the second afternoon, the surgeons brought us "tubing" and jet skiing. Tubing simply meant being pulled by a speedboat while clinging on for dear life on a rubber raft.

The next stop was the famous Mayo Clinic at Rochester. It was a huge centre with many building complexes connected to each other via an underground subway (pedestrian) system so that patients would not be exposed during the severely harsh winter months. There were 1200 beds and 40 operating theatres running at full steam. Our host was the well-known musculo-skeletal tumour surgeon, Dr Franklin Sim. Two of us stayed in his house for a night. The centre had a particular commitment to medical education and had, by far the most comprehensive clinical skills and research laboratory (for Orthopaedics). It is not by accident that they have been able to produce such a plethora of world class literature over the years. They worked very hard too. On the second morning, we attended a tumour meeting which started at 7am

(before the doctors started to go to the OT, and clinics). This was attended by residents, surgeons, radiologists and pathologists. A resident would present the history, physical examination and radiological findings and at each step, another resident would comment and venture into the diagnosis and differential diagnosis before the whole audience. Probing questions would be asked. It was like a viva and was good training for the residents.

From Rochester, we traveled west to Denver, Colorado near the Rocky Mountains. Our host was Dr Vic Patel, an Asian-American of Indian origin. He and his American wife, Liza, brought us, over the weekend, to the resort town of Vail in the Rocky Mountains. Vail lies in a high altitude and even in June, we saw a bit of snow. At night the temperature was less than 5 degrees C. We went on a very nice hike on a mountain trail, free of heat and insects.

From a place with temperatures near zero, we went to Phoenix, Arizona, with temperatures soaring to 40 degrees C. This was where the Mayo Clinic at Scottsdale was located. Being an offshoot of the main Mayo Clinic, it was much smaller; with plans to expand considerably over the next 40 years. It was important that one had good air conditioning in the car, house and office. The chairman, Dr Beauchamp was also a tumour surgeon and we had a good discussion of what he was doing. We were shown live surgery of a thigh soft tissue sarcoma in which intraoperative radiotherapy was used.

They had a large, newly built orthopaedic research laboratory well stocked with expensive equipment which was quite devoid of staff. It is interesting to note that the research facility was built first before staff was found to man it and not vice versa. Perhaps this indicated the emphasis they placed on research.

Our final city-stop was at Los Angeles. Here, we were hosted by the University of California at Los Angeles (UCLA) as well as the University of Southern California (USC). Both had large residency programmes (equivalent to our Masters programme).

UCLA had some very strong teams in various sports. As such, their Orthopaedic Sports Subspecialty was also well developed. I watched Dr Sharon Hame, an Orthopaedic Sports surgeon perform two shoulder arthroscopic surgeries and an ACL reconstruction over a morning operative session. On the two nights that we were there, dinner was hosted at the houses of two consultants, one at Beverly Hills and the other at Bel Air.

The University of Southern California has the largest orthopaedic department in the whole of the United States with 37 orthopaedic surgeons and 50 residents spread over five years). It has a large number of trauma subspecialists who "super" specialized in trauma to different regions. (such as shoulder and elbow trauma, hand trauma, etc). Here we had the opportunity of visiting a county hospital where the patients were less well off and often uninsured. Unlike the "private" university hospitals, the county hospital was more like a public Malaysian general hospital. Everyone entering the hospital had to pass through a metal detector screen for hand guns. This was in a poorer district with high gun-shot wound injuries. We saw many patients with septic arthritis, post operative infection (referred from other hospitals) and open fractures on external fixators. The hospital was old and rundown; the wards were crowded; the OTs were small and cramped; the doctors were haggard from overwork; the patients were unkempt; and there was even a housefly hovering over an open wound. But again, we saw that they worked very hard.

Our travels ended at the AOA meeting in Huntington Beach. Many influential orthopaedic surgeons were there, including Dr Ruslan, our MOA president and Dr Miles Dela Rosa, the POA (Philippines) president. The theme was on "leadership" and there were many interesting talks from non-orthopaedic personalities. The most meaningful delivery was a lecture on the leadership qualities of Sir Earnest Shackleton, the pioneer Antarctic explorer who took care of his men when they were lost and stranded and brought them back without a single loss of life.

LESSONS LEARNT

This has been a special experience. It has opened up my view of things; widened my knowledge and increased my understanding. It has helped to show us where we stand, where we can improve and where we can't. In some things, we might never catch up but in many other things, where we thought we have been deficient, we are alright. When we work hard and take pains to treat our patients well, we are able to do a good job too.

Training of the residents is a much more structured than our Masters programme. They take a common national Board exam at the end of their residency and there is a feeling of confidence that they have been "well-trained" when they graduate.

The most productive departments seem to be those where the emphasis is not on recruitment but more on making people stay. The heads of department have independence in making decisions and they play a major role in setting the tone of the department.

The employment of research engineers and related personnel working hand in hand with the surgeons is crucial to progress. On the surface, this seems to be a diversion of funds for much needed clinical work but in the long run, the strength and output of the department is enhanced.

The runaway costs of orthopaedic care was much discussion but had no answers. Perhaps Malaysia/ Asean could show the way and not let it get out of hand in the local context.

There has also been a special bonding amongst the five Asean traveling fellows, a friendship which we hope will last a lifetime. This may indeed be one of the major achievements of this fellowship.

THE 23RD ASEAN JUNIOR TRAVELLING FELLOWSHIP 2005

by Dr Suguna Venkataramulu L G Naidu

REPRESENTATIVES

MALAYSIA
INDONESIA
THAILAND
The PHILIPPINES
VIETNAM
SINGAPORE

Dr Suguna Venkataramulu L G Naidu Dr Taufin Warindra Dr Piyawan Chatuparisute Dr Genaro W F Asis Dr Tran Dang Khoa Dr Lim Mui Hong



The 23rd ASEAN Junior Traveling Fellows 2005 at the RCOST's Annual Meeting in Pattaya.

"Congratulations. You have been selected to represent Malaysia for the 23rd ASEAN Junior Travelling Fellowship 2005. Your travel will be in the following places:

Thailand: 16 October 2005 – 23 October 2005 Malaysia: 23 October 2005 – 30 October 2005 Singapore: 30 October 2005 – 6 November 2005 Indonesia: 6 November 2005 – 13 November 2005 The Philippines: 13 November 2005 – 20 November 2005

"A detailed itinerary will be sent to you in due time." Those were the contents of the first e-mail I received from the Secretariat, Malaysian Orthopaedic Association on 1 August 2005. Subsequently, after a multitude of e-mails on the entire program, I set off for the adventure, I would say, as I would be with five others, total strangers to me, for five weeks!

Sunday, 16 October 2005

"Bangkok revisited," I thought to myself, as flight MH 784 took off the runway heading towards the "City of Angels", "Venice of the East".

I arrived in Bangkok at around noon, and after clearing the usual formalities at the airport, was greeted by a person who brought me to the hotel. The hotel was Siam City Hotel, which I could see was located centrally in Bangkok. I checked-in at 1.30 pm, and had the room all for myself for about an hour, when I met the first of the other five representatives who also was my roommate during the Thailand leg of tour. It was Dr Taufin Warindra, from Indonesia. Both of us chatted for a while, and got ourselves acquainted with one another.

Within the next six hours, I had met another four persons in the hotel lobby, who, together with Taufin, at the end of five weeks would become my traveling buddies. Dr Piyawan Chatuparisute played host in Thailand, and was the first of the four. We fondly called her "Golf".

"Why, are you an ardent golfer?" I asked.

"No. It's just a nickname." Golf answered, looking a bit shy at my question.

Next was Dr Asis, from the Philippines, with Dr Khoa from Vietnam, who I could see were roommates from their familiarity with one another. Dr Asis preferred to be called "Gee". The previous years' fellowships consisted of only five junior orthopods. However, this year, a Vietnamese representative was included because Vietnam was keen to join the ASEAN Orthopaedic Association and this was very well favoured by the other five national associations. Lastly, I met Dr Lim from Singapore.

All of us were eager to know the plan for the first official day in Bangkok. Golf told us that we would be visiting the Siriraj Hospital and then the Grand Palace and the Temple of the Emerald Buddha, also known as Wat Phra Kaew.

Monday, 17 October 2005

We had a very early start the next morning, leaving the hotel at 6.00 am, after a stern warning from Golf, saying that if we did not leave on time, we would be stuck in a massive traffic jam. As the Siriraj Hospital was located on the eastern side of the city, across the Chao Phraya River, we only arrived one hour later. The hospital was huge and certainly not lacking in grandeur. We were greeted and introduced to the orthopaedic department staff, and were invited to join them for the department meeting.

I must say that the hospital took me by surprise with its statistics! It is the largest in South East Asia, with 2500 beds and 77 buildings. They have their own well established bone bank and we were privileged to see it. Apart from that, they also have a museum, which is divided into four sections, the most interesting to me being the Forensic Museum. It had some gruesome exhibits on different forms of homicidal and suicidal acts, which is sadly common in this region.

The hospital is the teaching hospital for the students of the Mahidol University. The history of the hospital is very interesting as well as touching. The library of the hospital was huge, with voluminous books and journals carefully preserved. One part of the library is dedicated exclusively in memory of the founder and his family.

In the afternoon, we were treated to a sumptuous lunch by Assoc Prof Areesak. We then proceeded to the Grand Palace

and Temple of the Emerald Buddha, which has always been heralded as the landmark of Bangkok. It took us a refreshing ferry ride across the Chao Phraya River. To me, it was just magnificent! It was made up of stupas, wats and palaces in a such a huge compound that it took us two hours to complete a quick look! We also visited the Royal Museum which houses the heritage of the Thai kings and queens.

Next on the agenda was something different and unique, I must say. We were treated to a traditional Thai massage, courtesy of the Royal College of Orthopaedic Surgeons of Thailand (RCOST). The massage was rejuvenating after the long day we had had and a good prelude to our dinner, hosted by Prof Banchong.

Tuesday, 18 October 2005

Nakhon Pathom is a town located about one hour away from Bangkok. It still has one of the highest rates of road accidents in Thailand although alternative roads have built to bypass it for those heading south from the capital city. The hospital is located in the town center, and has always been a regional trauma center. We got acquainted with the hospital staff and interacted by way of discussion of cases. After a tour of the hospital, we had lunch with the consultants, having Thai food again, this time, Nakhon Pathom style! After lunch, we visited the famous stupa which was also the largest in Thailand, as well as the king's palace which was his retreat away from the hustle and bustle of the city.

Wednesday, 19 October 2005

The Annual Meeting of The Royal College of Orthopaedic Surgeons of Thailand was held on 19 – 23 October 2005 in Pattaya. We left Bangkok at mid-morning, and journeyed our way to Pattaya on a luxury coach, taking approximately two hours. The convention was held at the Pattaya Exhibition And Convention Hall (PEACH). The congress' registration process was smooth sailing and so was the hotel's reception desk in providing us with the rooms. I am glad to have been given the privilege to join the congress by the RCOST, and would like to thank them for their hospitality. At night, we were delighted to have joined the congress' welcome dinner. We not only enjoyed the large spread, but got to meet some famous orthopaedic authorities from around the globe. In addition, we were also entertained by local Thai dancers and a demonstration of garland weaving.

Thursday, 20 October 2005 – Saturday, 22 October 2005

Over the next three days, we attended the lectures and symposia held during the day. Apart from the informative sessions covering all aspects of orthopaedics and its sub-specialties, we managed to obtain some interesting gifts at the sponsors' booths. One of the more attractive ones was a large capacity thumb drive.

The opening ceremony was held in a grandiose manner, and we, the fellows, were introduced to the large crowd of attendees. We all felt proud to the fact that this fellowship had been an ongoing tradition for the past 23 years and that the ASEAN orthopaedic brotherhood has been bound so strongly.

We attended the official banquet on Thursday, after the congress was declared officially open. The congress banquet was held at the ballroom of the Royal Cliff Beach Hotel, located adjacent to the convention hall. A Filipino trio band entertained us till late night with their rendition of old numbers. We, as a group, had requested for "Guantanamera", which the group cheerfully performed.

The Friday night dinner was an informal one and equally as entertaining. We were served a buffet spread and entertained by local talents.

We checked out the hotel on Saturday afternoon, and rode on Golf's car back to Bangkok. We then spent the rest of our time in Bangkok till our departure the next day to our next destination.

Sunday, 23 October 2005

The six of us arrived at the Kuala Lumpur International Airport in the same flight. We were then driven to the Petaling Jaya Hilton. Now came my turn to take care of the guys and, the girl. If there was a "Top Ten" of leisure activities during our fellowship, then internet surfing using Wi-Fi would be number one. So, naturally I had to guide everyone to the nearest internet café and was lucky enough that there was one opposite the hotel. Not to forget also was the laundry, the number one chore that we had to take care of. This was again, conveniently located at the same place.

We were treated to a lavish buka puasa buffet by our MOA President, Dr Ruslan at The Kuala Lumpur Hilton. I had the opportunity to introduce the fellows to our president as well as enjoy the wide variety of dishes that is truly Malaysian. That night, we all settled in early to get a good rest before the long day ahead of us.

Monday, 24 October 2005

Our visit started with University of Malaya Medical Center (UMMC), followed by HUKM and then the Kuala Lumpur Hospital in the afternoon. We were greeted at UMMC by Prof Dato Sara, Prof Sengupta and entire department of my alma mater. Several cases were discussed upon that morning, followed by the photography session. Dr Chong, a lecturer at the institute, gave us a brief tour of the hospital. We covered the wards and the trauma center during the short time that we had. Our visitors were indeed impressed with the size and state-of-the-art facilities available at the new trauma center.

Prof Masbah welcomed us at the HUKM along with the rest of the department staff. We were given also a brief tour of the hospital, especially the tissue culture research lab, where many of the UKM's research projects are displayed.

Our next visit was to the HKL in the afternoon. I think our guests sensed the different character of HKL, it being our national referral center. The new orthopaedic clinic building seemed to glow amidst the older buildings. We met up with Prof Dev from

UPM who presented us with some souvenirs and gave the fellows the opportunity to acquaint themselves with our local surgeons.

The rest of the day was spent visiting and capturing some splendid shots of the Petronas Twin Towers and KL Tower.

Tuesday, 25 October 2005

The third day in Malaysia was spent traveling to Johor Bahru, where we spent the afternoon visiting the Sultanah Aminah Hospital. Like many of the hospitals in this region, the hospital was loaded with more patients that they could possibly handle. So it did not come as a surprise to the fellows that the extension beds were put up to accommodate extra patients. We met up with Dr Siva, the head of department for dinner at one of the seafood restaurants at the city. Many of the department staff turned up for dinner and we were pleased to have been able to meet them.

As we all knew, the fellowship period this time had fallen in the midst of the Deepavali and Hari Raya seasons. The whole country was in a festive mood ever since we had landed and it was made more apparent at the Puteri Pan Pacific Hotel, Johor Bahru, where we stayed. There was a beautiful "kolam" at the lobby of the hotel, which took some of the fellows who were less familiar with our culture by awe.

Wednesday, 26 October 2005 to Thursday, 27 October 2005

Malacca was our next destination, being a good place to bring our visitors, in view of it being the birthplace of the nation and the site of our national heritage. The journey took about two hours, and we checked in at the Century Mahkota Hotel. Our hospital visit was rather hurried there though. We met the department staff at their afternoon meeting and a few cases were prepared for discussion.

I showed the fellows around the Malacca city area the next day. We, of course, started the tour at the A'Famosa, and then took a walk to Stadthuys. We all could feel a sense of familiarity to our history, as we began probing into it. Taufin knew about Parameswara, and Golf was familiar with Admiral Cheng Ho, and the list goes on. Of course, that was no surprise as we all have history which is common, being so close to one another in this region.

Friday, 29 October 2005 to Saturday, 30 October 2005

Among all the places we visited in Malaysia, I think our guests enjoyed the next place, Putrajaya, the most. The hospital's set-up and appearance was different, and the entire city was so picturesque that they found it alluring. After lunch, we checkedin to the luxurious Putrajaya Marriott Hotel, set on a hill overlooking the city. At the hospital, we were greeted by Dr Jasmeet, the head of department, who gave us an enchanting tour of his workplace. We were showed the technicalities which made the hospital a "second generation paperless hospital", as well as the workforce behind this highly sophisticated system. Our visitors were impressed with the coordination whereby the patients were seen, and attended to with minimal paramedical staff. The hospital was also very beautiful, similar to what we would expect in a privately run medical center.

Due to the festive occasion, we noticed that the lobby had very few people. It was then time to leave, being almost five in the evening. We adjourned to the Putrajaya Square, for a splendid view of the city. Our guests were overwhelmed by the architectural beauty of the Putrajaya City Mosque, the Prime Minister's Office and the Putrajaya Square. We walked around till dusk and settled for dinner at the Putrajaya Clubhouse and watched as the glimmer of lights began to illuminate the administrative capital.

On Saturday, we were free to go shopping or sightseeing. Some of the fellows went to Genting Highlands, and some went shopping in Kuala Lumpur. The MOA had kindly provided transport for the whole week and we indeed used it to our advantage. We were also getting prepared to leave Malaysia the next day, to our third destination, Singapore.

Sunday, 30 October 2005

The six of us arrived in Singapore at different times. We were housed at the Holiday Inn Atrium. Strangely though, the hotel's reception seemed puzzled at our arrival, and took a long time to process our check-in.

We met-up with the SOA officials in the evening at the American Club, an exclusive, no-cellphones club. Dr Ong Leong Boon, together with the other distinguished members of the SOA welcomed us, and we enjoyed ourselves with the wide array of gastronomical delights. All of us made use of the opportunity to get to know one another, and share some laughter on some funny experiences the previous years' fellows had endured during their time.

Monday, 31 October 2005

The Singapore General Hospital (SGH) was the first of all the many hospitals that we visited in Singapore. The tour started with the usual introduction at the department's morning meeting, followed by a presentation by Gee. A tour of the hospital was followed by lunch at the Hyatt Hotel. It was a half day affair at the SGH, and we then had the afternoon for leisure activities, which most of us used to catch up with some sleep. The SGH authorities were also kind to have us for dinner the same day, at the House of Sundanese Food, an eatery that serves delicious Indonesian food.

Tuesday, 1 November 2005

Today is Deepavali. I was a little sad to be away from home, but managed to get into the spirit of the festival at Serangoon Road the night before. We all went to the Sentosa Island Resort and spent the day there. I would like to thank Prof Tan for having us for a Japanese lunch at the island's golf clubhouse.

Wednesday, 2 November 2005

We visited two hospitals on this day. In the morning, we were at the National University Hospital, where Taufin and Golf had presented in the morning. We met up with the department's senior consultants and academicians, and had brunch with

them before the tour of the hospital. We visited the hospital's library, and research lab, which was a highly secured area. Prof Wong then hosted our buffet lunch at a nearby hotel.

Alexandra Hospital is a beautiful, environmentally friendly hospital, located about fifteen minutes away. It was a historical site in Singapore, as the British had built it as an army hospital, and some of the buildings are very old. The outdoor toilet concept was exceptionally different, as with the butterfly park within the hospital compound. Well, need I say more? Yes, I think this place was unique in the true sense of the word, and was added by the very amiable Mr Chin who took us around and gave an interesting tour. One of the extraordinary sites was the tunnel beneath the hospital building, which was connected to the port for transportation of goods during the era of the British rule. This hospital handles mainly trauma cases because of its location near the other big hospitals where the bulk of the orthopaedic patients go.

Thursday, 3 November 2005

It was the first day of Hari Raya, so we went (window) shopping at Orchard Road!

Friday, 4 November 2005

The last of the hospitals we visited was the Tan Tock Seng Hospital. This hospital too had an interesting history behind it. The founder was a Baba descendant from Malacca, who built the original hospital, and it has since progressed to what it is today. It is located in the city center and has its own museum, with a curator who gave us an informative tour. One of the interesting artifacts was a century old piano. Apart from the museum, the rest of the hospital had the usual set-up, with the exception of the robotic food server.

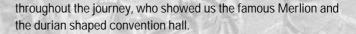
We had dinner at the Hyatt Hotel in the evening, hosted by Prof Lam form Changi Hospital and Prof Wong from the NUH. After a sumptuous meal, Prof Lam, as the president of SOA, handed a plaque and souvenir to each one of us.



The welcome dinner at the American Club

Saturday, 5 November 2005

Today was again leisure day, and we went on a "Duck Tour", an amphibious, Vietnam War left-over vehicle, which can move on wheels as well in water. The journey started at Suntec city, and went around the city's main historical sites, after which it rode on the Singapore River. We were briefed by the guide



The rest of the time was spent in the hotel, till the next day, where we left Singapore for our next place of visit, Surabaya.

Sunday, 6 November 2005

Due to the change in itinerary of the Indonesian leg of tour from Jakarta to Surabaya, we all arrived at different times in Surabaya. However, our host, Taufin and the Dr Soetomo Hospital's personnel took extra efforts to make our stay there the most memorable of all. "Mystical Java", I would like to say, is not an exaggeration, but an understatement to the cultural heritage of this very unique island. Our itinerary in Java would, in the next one week, be a very hectic and fascinating one.

The Hari Raya holidays in Indonesia stretch for one week, and so the next two days in Java were still holidays. We therefore stayed one night in Surabaya, where Taufin took us for a "meal ala Indonesia", having exotic delights like ikan Gurameh on our plate.

Monday, 7 November 2005

It took us about five hours by train from Surabaya to Yogyakarta, the cultural heartland of Java, as well as being the university capital. This city is where two world heritage sites are situated, namely Borobudur and Prambanan. We arrived at about 11.00 am, after which we visited the Prambanan Temple complex, located about half an hour away. It was an awe inspiring sight! Actually, we only visited one temple complex, as the others are scattered around a large area and time was lacking on our side.

At night, we indulged in the Ramayana ballet, an open air show depicting the Javanese version of the famous epic, with the Prambanan temple as a backdrop! Although costly, we opted for the front row seats and enjoyed the show in its entirety, as well as felt the heat from the burning of the hay when Hanuman's tail set off the fire in Ravana's Kingdom.

Tuesday, 8 November 2005

The entire nation was still in the last day of the Raya holidays, Idul Fitri or Hari Lebaran as they called it. We did visit RSU Dr Sardjito in Yogyakarta in the morning, but there were very few staff. This hospital, however, does not have an orthopaedic department and the trauma cases are handled by the surgical team. After a brief visit, we continued our sightseeing tour of Yogyakarta.

The sultan's palace is located in the city center, and its compound encompasses several buildings. We managed to see the royal musical instruments on display and several other exhibits that took about an hour to complete. On the way to the sultan's palace, we stopped by Malioboro for some batik shopping, and after that, to Kotagede, where we visited some shops selling silver crafts and jewellery.

After lunch, we headed an hour westward to the magnificent Borobudur. Its beauty is unsurpassed by any other building that I have ever seen. Its seven tiered levels have numerous stupas with the Ramayana inscriptions on its walls. Unlike most

temples, this temple was an open one, in the sense that it does not house an idol within its walls – the idols are all over it.

We had dinner in Yogyakarta with members of RSU Dr Sardjito. The next day, we would be heading on to Solo and then back to Surabaya.

Wednesday, 9 November 2005

R S Ortopedi Prof Dr R Soehorso was located strategically in Solo (Surakarta), Central Java. In contrast to the previous hospital, this hospital manages orthopaedic cases only. We received a warm and enthusiastic welcome from the whole hospital. Even the hospital's chief administrator was present at the hall, and, along with sophisticated audio-visuals, this hospital made a very good and lasting impression on us. We had several presentations by the fellows and following that, some case discussions. A complete tour of the hospital revealed why it was solely an orthopaedic center. The entire hospital was serving the central Java area, with a myriad of trauma cases and elective cases, and it houses its own prosthetic and orthotic workshop. The rehabilitative physician has a heavy load of patients for management as well as being in-charge of the workshop. The prosthesis and orthosis are custom made to fit the patients using raw materials, all carried out within the workshop's premises. The talented technicians demonstrated how they diligently crafted the prosthesis using wood, aluminium and steel. This would indeed cut the cost of these equipments and make it more affordable for the patients. A lunch hosted by the hospital management was then held at one of the city's exclusive restaurants.

After the hearty lunch, we headed for the Solo railway station, but not before a stop at the Solo batik shops. Solo has a reputation for producing unique batik designs, and as we saw, the batik is also good value for money.

The journey to Surabaya took four hours, less an hour for the Solo-Yogyakarta sector. We arrived in Surabaya at night, just in time for dinner.



The congregation of staff at the hospital in Solo.

Thursday, 10 November 2005

Our day in Surabaya started off with our visit to Dr Soetomo Hospital, which is the teaching hospital for the Airlangga University. After attending the morning meeting, we went to meet the dean of the university. This hospital is the largest in Surabaya, with its own private wing, which we could recognize by its contrasting appearance to the public wing. The private wing was a multi storied building with state-of-the-art amenities and a view overlooking Madura island.

In the afternoon, three of us presented our papers. We then had some rest before being treated for dinner, Thai food in Indonesian style! I must extend my appreciation here to some surgeons who drove four hours after work just to meet us.

Friday, 11 November 2005

There were two more presentations done on this day, in the morning. After these presentations, we were treated for lunch by Prof Bambang. The rest of the day was free, and we could settle our chores, before the action we were to have in the night!

Saturday, 12 November 2005

If there was any one day that outstood the rest in our fellowship, this would be it! Actually, the action I mentioned started the night before, at around 11.30 pm, when Dr Paul, a resident at Dr Soetomo Hospital, arrived at the hotel to pick us up. We then went on a journey that lasted three hours, southwards, up onto the mountains. Although it was three in the morning when we arrived, I was as energetic as ever, and was to witness one of the most spectacular landscapes that I had ever seen. Yes, we were going to see the sunrise at Mount Bromo.

The air was cold there when we arrived and prompted us to have a piping hot cup of coffee at the Mount Pananjakan viewpoint. In the distance, we could see vague shadows of gas vapours from mountains, but only as the sun rose, could we see the beauty of the place. The sunrise was awesome! Mount Semeru was emitting its own gases in the far end and Mount Bromo, in the foreground. After viewing the sunrise, we moved to the foothills of Mount Bromo. The landscape here was like none I had ever seen. The soil was lava soil, and the area had no vegetation at all, explaining the fact that this area has no rainfall throughout the year. Horses were deployed to transport us further up the hill about two kilometers and mine, Kancil, took me to the steps where I had to walk up to the mountain. There where two hundred and fifty steps in all, to the top. From the top, we could view the huge crater emanating gases which made us feel rather intoxicated at times. But the view was exhilarating! After enjoying our time there, we got some breakfast and started our journey back. We left Mount Bromo at 9.00 am, and reached Surabaya, tired but entirely satisfied, at 12.00 pm.

The rest of our time was free for shopping and recuperating after the journey. We then got prepared for our next destination, and the last leg of our tour, the Philippines.

Sunday, 13 November 2005

Our journey was a rather long one, as we had to transit in Singapore, before heading towards Manila. However, it was smooth sailing, and we ended up at our destination, the Westin Philippine Plaza Hotel in the evening. The same night, we met up

with Dr Miles De La Rosa for buffet dinner. We had a brief chat and talked about our experience before retiring for the night.

Monday, 14 November 2005

A sightseeing tour of the Intramuros in Manila was the highlight in the morning. On the way to the Intramuros, we stopped for a while at the Jose Rizal Monument, for some shots. We then went on a horse-cart tour in what was left of the Spanish legacy in Manila. Actually, the walled fort covers an area of 64 hectares and contains within its boundaries some old buildings as well as narrow streets and shops with a bustling traffic as anywhere else in Manila. We started our tour at the Fort Santiago, and saw some chambers and enclosures used by the Japanese to torture POW during the Second World War. The end of Fort Santiago overlooks the Pasig River, a location probably planned by the Spanish to defend any on-coming foreign force by boat. We also passed by the famous San Augustin church, which still stands on its original foundation, without requiring much restoration. The tour of Intramuros took the entire morning to visit. After that, we had lunch before visiting the Philippine General Hospital, located conveniently next to the Robinson's shopping mall. This hospital I could see was old, but well maintained and certainly overwhelmed with patients. We joined the orthopaedic department at their evening meeting, after which, we walked around the hospital. The unique thing I saw was that there was a specialized spine ward.

Tuesday, 15 November 2005

Dr Miles had kindly registered us to participate in the pre-congress bowling tournament. It was held at the Robinson's Plaza Mall, and started at 2.00 pm. The congress tournaments here were serious business! We had to take a sportsmanship oath before the game, and there were many prizes, including one for the person with the largest bowling shoes! We, the fellows, made up the "ASEAN" team, participated wholeheartedly, but failed to win any prize. Nevertheless, we all thoroughly enjoyed the game.

Wednesday, 16 November 2005

The ASEAN Orthopaedic Association (AOA) Congress had officially started in the evening, but the preliminary programs had already begun in the morning. The opening ceremony was indeed done with much pomp and splendour, where the heads of the national orthopaedic associations were introduced one by one. With much enthusiasm, everyone watched the ceremony taking off with a lot of talk on the AOA's history for the past twenty five years, and its achievements. It had brought the orthopods from this region much closer, and able to help one another during any crisis. The much talked about example of such a situation was during the tsunami on 26 December 2004, when we had got together and sent medical services and equipments to the affected areas.

After the opening ceremony, we all adjourned outside the hotel for a while, visiting the exhibition booths and having cocktails. Suddenly, there was this loud sound.... the beginning of a spectacular fireworks display lightening up the sky at the shores of the Manila Bay. The fireworks went on for about fifteen minutes. The fellowship night was held at the main ballroom of the hotel. The buffet dinner was good, but sadly, we, the fellows, were not told that it was an ASEAN fellowship night. After dinner, some of us left the ballroom, only to find out later that we were expected to be there. The only one among us there was Khoa, who incidentally happened to be there with friends from his country.



The presidents of the five founding members of AOA, with the Vietnam Orthopaedic Association's president and the secretary general of AOA, Dr Ong Leong Boon.

Thursday, 17 November 2005

The conference continued into its second day. In the night, the congress banquet was held in the same ballroom, this time with an eight course dinner. After the dinner, there was ballroom dancing, and we had these very talented and pretty girls to guide us in the dance floor. It was a very entertaining night, with good music, both current and retro.

Friday, 18 November 2005

Today was our turn to present our papers at the free paper session. With a little anxiety in the morning, we all started, and I was the first to present. My presentation started on time at 8.00 am, and before we knew it, was all over. The rest of the day was free for us to attend the other lectures. This was also the last day that all of us were together, as Golf was the first to leave for home that evening. She left early because the flights to Bangkok were fully booked on the following days. I myself was also packing, as I would be leaving the next day.

Saturday, 19 November 2005

After the usual breakfast, I was around till noon, when I had to leave. Gee had arranged for a taxi to the airport, and after some goodbyes, left for home. I was a little sad to leave, but eager to get home to see my family.

"This opportunity comes once in a lifetime, and you will never forget these five weeks that you had," said one official during on of our visits. Indeed, I think it is very true. This fellowship has given me friends in five countries simultaneously, and time to mingle with others in a unique way. It has helped the countries involved foster a professional and friendly relationship, and opened my eyes on the strengths and weaknesses of ourselves. Every country I visited was warm and friendly, yet distinctive in its own way.

I would like to conclude with a sincere thanks to the MOA for selecting me for this program, and also the national orthopaedic associations of Thailand, Singapore, Indonesia and the Philippines for their gracious hospitality during my stay in their countries.

MOA APOA TEACHING FELLOWSHIP

by Prof S P Chow

12 - 17 FEBRUARY 2000

The MOA APOA Teaching Fellowship usually lasts for 10 to 14 days. However, because of my busy schedule back in Hong Kong, I had to squeeze all the activities into one week.

On my arrival in the afternoon of Sunday, February 12, 2006, therefore, I was immediately taken to the University Malaya Medical Center to see a few patients scheduled for operation demonstration the next day. All the trainees and Prof Dato Tunku Sara Ahmad was there and we had very lively academic discussion for two hours. Eventually, we chose three patients:-

- A congenital macrodactyly of the thumb and index finger for reduction of size, correction of deformity, and nail reconstruction
- A scaphoid non-union advance collapse SNAC wrist for 4-corner fusion
- A partial cut ulnar nerve for exploration and neurolysis / nerve graft

Next day, the operations went on smoothly and the ulnar nerve had a neurolysis.

On Tuesday, February 14, I met Dr Roohi Ahmad who drove me to the University Kebangsaan Malaysia Medical Centre with a whole day's program of lectures, case discussions, and visits to a very impressive modern hospital. Various topics including the functional anatomy, mycobacterial infection, mangled hands, flexor tendon healing, and distal radius fracture were covered.

I left for Kuching on the same evening and was received by Dr Chuah who met me at the airport. On the next morning, we arrived at the Hospital Umum Sarawak and screened over operation cases and discussed with the trainees on various aspects. The cases scheduled for operation included polydactyly and posterior interosseus nerve palsy. Subsequently, we proceeded to reconstruction for the polydactyly and release of the posterior interosseus nerve. The next day I flew to Kota Kinabalu. On that afternoon, I was taken to the orthopaedic outpatient clinic of Queen Elizabeth Hospital and met Dr Baskaran and his group of orthopaedic surgeons and trainees. Again, we screened through a few possible cases for operation the next day, as well as discussed on some interesting cases at the outpatient clinic. The next morning, we started by presenting my talk on "An appreciation of the Hand" at the CME lecture series. This was followed by performing on a case of release of burnt contracture and skin grafting, and another case of excision of haemangioma and reconstruction of web space.

All the academic activities had been most enjoyable and rewarding for me. I was amazed at the great variety of clinical materials presented. Just as in my previous visits, I was impressed by the knowledge of the trainees. This time, I also had interaction with the orthopaedic nursing staff and was equally impressed with their expertise. The operating theatres were modern, although the ward environment was rather variable. I noted, however, that all hospitals were undergoing some kind of renovation or reconstruction and I am sure that in line with the steady economic development, the new hospitals will be just as impressive as the one at University Kebangsaan Malaysia Medical Centre. In return, I hope that the local surgeons and trainees had benefitted or at least been stimulated by my activities. Already, discussions on further collaboration were started between Hong Kong and Malaysia and I am sure that something will materialize this year.

On the social aspect, all my hosts were gracious. I was shown many different aspects of Malaysian culture. At the end of my stay in Kota Kinabalu, I planned to climb up Mount Kinabalu only to be aborted due to a minor accident. This gives me a good excuse to return!!

ORTHOPAEDIC SUPPLEMENT OF THE MEDICAL JOURNAL OF MALAYSIA

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