



## **EFORT TRAVELLING FELLOWSHIP TO NORWAY 11-16<sup>th</sup> MAY 2009**

**After being encouraged by one of my colleagues, an EFORT Fellow two years previously, I applied and in early 2008 was awarded the 2008 BOA/EFORT Spring Travelling Fellowship to Norway as the guest of the Norwegian Orthopaedic Association.**

The fellowship was based in three centres in Norway with time spent in Bergen, Trondheim and Oslo. The Fellowship brought together eighteen senior trainees and junior consultants from across Europe and one Fellow from Brasil. The Fellowship began with two days based at the Haukeland University Hospital in Bergen. This 1000 bed hospital is one of the five University hospitals of Norway. After a welcome speech from the President of the Norwegian Orthopaedic Association, Hebe Kvernmo the first day was spent with lectures about the Norwegian Arthroplasty and Hip Fracture Registers. In the evening there was a sightseeing tour around Bergen followed by dinner in a restaurant situated in the hills overlooking the town and harbour with spectacular views especially at sunset. The second day began early with the morning trauma meeting followed by a walk through the wards, operating theatres, outpatient clinic and day surgery department. Bergen is one of the two centres in Norway which treats sarcomas and the morning continued with a presentation about sarcoma treatment in Scandinavia including the use of rotationplasty reconstruction for distal femoral tumours and vascularised fibula graft reconstruction following distal tibial tumours. The morning finished with presentations about distal radial fracture treatment. In particular, we were introduced to the principle of continuous dynamic traction using a 'dynawrist' external fixator, which allows wrist mobilisation whilst the fracture is immobilised by the bridging external fixator. After lunch in the doctor's mess we visited the biomechanical laboratories and had demonstrations of various projects including work on bone cement and distal radial plates. The laboratories are situated next to the hospital and the clinicians work very closely with the engineers with good opportunities for trainees to get involved with projects.

Next stop was Trondheim after the end of training in Bergen. The two days at Trondheim were spent at St Olav Hospital. This new hospital has 1090 beds and has both clinical and research areas on-site with a medical school. Whereas Bergen concentrated more on their Registry research Trondheim has a different emphasis. The 'Unique' hip prosthesis was developed in Trondheim. This custom made femoral prosthesis was first implanted in 1995. It is a non-cemented prosthesis, which reduces stress shielding because of its increased proximal size and customised manufacture. After presentations from Professor Benum and Professor Aamodt who developed this prosthesis we were taken to a very impressive operating room to witness live surgery with the custom made hip prosthesis. After further presentations on prosthetic infections including a very interesting lecture on scrapping and sonication for dislodging bacteria from implants we were taken on a sightseeing tour of Trondheim. In the evening one of the Vice Presidents of the Norwegian Orthopaedic Association Professor Ketil Holen invited all the Fellows for dinner at his house and hosted us all extremely well.



The second day in Trondheim began with a visit to the biomechanical labs and demonstrations of hip and knee stimulator studies. The morning continued with several of the local trainees presenting their research projects. We received lectures on the Norwegian A.C.L. registry, which was established in June 2004, prosthetic joint infection, tendon overuse injuries and the use of ultrasonography in the diagnosis and treatment of developmental dysplasia of the hip.

After a short flight to Oslo we were treated to dinner at the Norwegian Opera House. The Opera House was opened in April 2008 and is situated beside the harbour in central Oslo. It provided a fantastic location to have dinner and a memorable evening was enjoyed by all the Fellows and their hosts. Our hotel in Oslo was situated next to the Rikshospitalet so it was an easy walk to the Friday programme. The Rikshospitalet is the National Hospital and serves as a tertiary referral centre, which performs some acute hand surgery and is the only centre for reimplantation but otherwise is a purely elective hospital. The hospital itself again is very new and extremely impressive. The presentations during the morning reflected the subspecialty status of the hospitals with lectures on the vertical expansible prosthetic thoracic rib (VEPTR) and the treatment of sagittal imbalance. There were also presentations on paediatric orthopaedics with the hospital's work on Perthes and cerebral palsy discussed. The morning finished with a visit to the biomechanical and gait laboratory. This was a recurrent theme throughout the week and it was certainly very impressive how closely the orthopaedic surgeons and biomechanical engineers worked together in all three centres that we visited in Norway. The facilities were first class and certainly we could learn from this close integration in the UK, which in my experience does not happen as effectively. We were also able to visit the Ilizarov correctional surgery clinic where the biomechanical engineers reviewed the patients with the orthopaedic surgeons. The afternoon session at the Rikshospitalet was taken up with further presentations on congenital malformations, tendon transfers, forearms fractures and microsurgical grip reconstructions after traumatic amputations. At the end of training we embarked on a sightseeing tour of Oslo, which finished at the flat of Dr Trine Kaastad who hosted all the Fellows for dinner. She had a fantastic flat overlooking the harbour right in the centre of Oslo.

The final full day of the Fellowship was spent at the Olympiatoppen – the Oslo Sports Trauma Research Centre or Norwegian Olympic Centre. Here we were hosted by Professor Lars Engebretsen who organised a full day of presentations with a sports medicine theme. The morning began with an interesting presentation on the effects of NSAID's on healing of tendons and ligaments. We then had presentations on knee ligament surgery, a subject that Professor Engebretsen has done a lot of work on. His work on knee dislocations and posterolateral injuries was particularly interesting. After lunch further presentations covered cartilage research and the Norwegian knee ligament registry. The Norwegian knee ligament registry has a 95% compliance rate – I am not sure we could achieve that in the UK! The Fellowship concluded with a review of current concepts in hip, wrist, elbow and shoulder arthroscopy. After an exhausting but very stimulating day we all boarded a tram and travelled down to the home of Professor Engebretsen who hosted us for another extremely pleasant evening of good food and wine. It was certainly a real privilege to be invited into so many of the Norwegians homes and made the Fellowship a very unique experience. Certainly the hospitality of the Norwegian Orthopaedic Association and its members was

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absolutely fantastic both in organising an excellent academic programme but also ensuring that we all experienced the best of Norwegian hospitality during the evenings! Watching the Norwegian triumph in the Eurovision song contest was a fitting way to end the Fellowship! My week spent in Norway enabled me to see how orthopaedics is practiced in a different country and also get experience in how a different training system works. In addition to learning about Norwegian orthopaedics, the Efort Travelling Fellowship lets you meet colleagues from across Europe who are at a similar stage in their careers, which is invaluable. I would like to thank the Norwegian Orthopaedic Association for organising such an excellent Fellowship and also thank Efort and the BOA for allowing me to be the UK's 2009 Spring Travelling Fellow.

Jon Matthews