

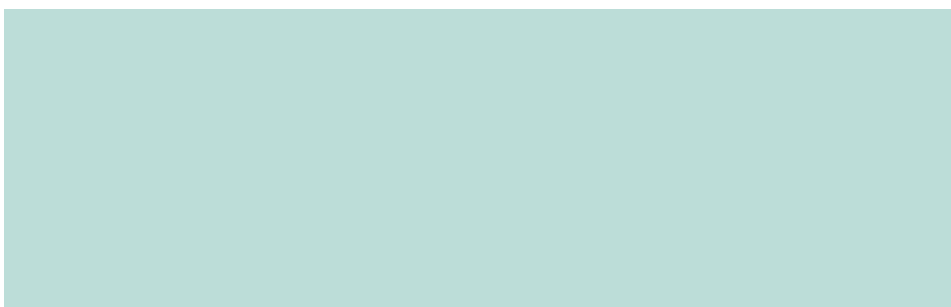
EFORT Annual Report 2012

A year of vital change



Annual Report 2012

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Prof. Dr. Pierre Hoffmeyer



Ass. Prof. Dr. Per Kjaersgaard-Andersen

2012 – a year of vital change as a foundation for the future

This first annual report describes EFORT's activities during the past year. It outlines our journey as we pursue two interconnected goals in the wake of the strategy review which was adopted in January 2012. EFORT will achieve its mission and vision by becoming a reference point in musculoskeletal diseases (MS) and injuries, and by raising awareness of MS topics at the EU and global levels.

To adapt to our ever-changing world, 2012 saw a review of our statutes, which were last amended in 2006. The General Assembly had the last word on three main topics which affect the rhythm in which our organisation operates: terms of office, congress venues, and the location of our Head Office.

In a continuing effort to even out disparities in training, EFORT embarked upon an ambitious plan to set up the European Education Platform. The steering committee convened the key players in O&T science, the delivery of training and the assessment of standards. We are confident that this meeting will provide the blueprint for new alliances and partnership models between speciality experts, national bodies and supranational platforms. This will allow us to highlight the importance of recognised teaching methods, and the provision of excellent care throughout Europe.

The EFORT Academy offers not only interesting learning packages and complimentary registration for the annual congress, but also an alternative means of engaging with a scientific organisation such as EFORT. Experts and budding surgeons alike can expect first-hand knowledge-sharing in both a professional and social context as part of a shared community.

Despite the trend of decreasing attendance figures for international meetings, the EFORT annual congress in Berlin, which had "Trauma" as its theme, showed positive results and a steady increase in participant numbers. The quality of the programme and the many networking opportunities in this multifaceted city proved a major draw.

With this report, we want to show EFORT members, donors and partners how their investment and support have enabled EFORT to consolidate its leadership role in restoring and securing mobility, musculoskeletal health and quality of life.

The work cannot end here, however. The burden of musculoskeletal diseases continues to impact on the practice of our profession, as well as national health systems. A coordinated response from the O&T community is more necessary now than it has ever been.

We look forward to continuing to work successfully alongside our members and partners.

A handwritten signature in black ink, appearing to read 'P. Hoffmeyer', followed by a horizontal line.

Prof. Dr. Pierre Hoffmeyer
EFORT President 2012/2013

A handwritten signature in black ink, appearing to read 'Per Kjaersgaard-Andersen', followed by a horizontal line.

Ass. Prof. Dr. Per Kjaersgaard-Andersen
Secretary General

NATIONAL MEMBER SOCIETIES

Albania	AAOST	Albanian Association of Orthopaedic Surgery and Traumatology
Austria	ÖGO	Austrian Society of Orthopaedics and Orthopaedical Surgery
Belgium	BVOT	Belgian Association of Orthopaedics and Traumatology
Belgium	SORBCOT	Belgian Royal Society of Orthopaedic Surgery and Traumatology
Bosnia and Herzegovina	OTSABH	Orthopaedic and Traumatology Surgeons Association of Bosnia and Herzegovina
Bulgaria	BOTA	Bulgarian Orthopaedics and Traumatology Association
Croatia	COTA/HUOT	Croatian Orthopaedic and Traumatology Association
Croatia	CrOS	Croatian Orthopaedic Society of the Croatian Medical Association
Cyprus	CAOST	Cyprus Association of Orthopaedic Surgery and Traumatology
Czech Republic	CSOT	Czech Society for Orthopaedics and Traumatology
Denmark	DOS	Danish Orthopaedic Society
Estonia	ETOS	Estonian Orthopaedic Society
Finland	SOY-FOA	Finnish Orthopaedic Association
Former Yugoslav Republic of Macedonia	MAOT	Macedonian Association of Orthopaedics and Traumatology
France	SOFcot	French Society of Orthopaedic Surgery and Traumatology
Germany	BVOU	Professional Association of Orthopaedic Surgeons
Germany	DGOOC	German Association of Orthopaedics and Orthopaedic Surgery
Germany	DGU	German Society for Trauma Surgery
Greece	HAOST	Hellenic Association of Orthopaedic Surgery and Traumatology
Hungary	MOT/HOA	Hungarian Orthopaedic Association
Iceland	IBF	Icelandic Orthopaedic Society
Ireland	IOA	Irish Orthopaedic Association
Italy	SIOT	Italian Society of Orthopaedics and Traumatology
Kosovo	KSOTS	Kosovo Society of Orthopaedics and Trauma Surgeons
Latvia	LTOA	Latvian Association of Traumatology and Orthopaedics
Lithuania	LSOT/LOTD	Lithuanian Society of Orthopaedics and Traumatology
Luxembourg	SLOT	Luxembourgian Society of Orthopaedics and Traumatology
Malta	AOTSM	Association of Orthopaedic and Trauma Surgeons of Malta
Montenegro	AMOT	Association of Montenegrin Orthopaedics and Traumatology
Netherlands	NOV	Netherlands Orthopaedic Association
Norway	NOF	Norwegian Orthopaedic Association
Poland	PTOITR	Polish Society of Orthopaedic and Traumatology
Portugal	SPOT	Portuguese Society of Orthopaedics and Traumatology
Romania	SOROT	Romanian Society of Orthopaedics and Traumatology
Russian Federation	AOTRF	Association of Orthopaedists and Traumatologists of the Russian Federation
Serbia	SOTA	Serbian Orthopaedic Trauma Association
Slovakia	SOTS	Slovak Orthopaedic and Traumatologic Society
Slovenia	SOA/ZOSZD	Slovenian Orthopaedic Society
Spain	SECOT	Spanish Orthopaedic and Traumatology Society
Sweden	SOF	Swedish Orthopaedic Association
Switzerland	SGO-SSO	Swiss Society of Orthopaedic Surgery and Traumatology
Turkey	TSOT/TOTBID	Turkish Society of Orthopaedics and Traumatology
Ukraine	UAOST	Ukrainian Association of Orthopaedic Surgeons and Traumatologists
United Kingdom	BOA	British Orthopaedic Association

EUROPEAN SPECIALITY SOCIETIES AND OTHER COLLABORATING ORGANISATIONS

AOSpine	AOSpine
AOTrauma	AOTrauma
ARTOF	Association for the Rational Treatment of Fractures
EBJIS	European Bone and Joint Infection Society
EFAS	European Foot and Ankle Society
EFOST	European Federation of National Associations of Orthopaedic Sports Traumatology
EHS	European Hip Society
EORS	European Orthopaedic Research Society
EPOS	European Paediatric Orthopaedic Society
ERASS	European Rheumatism and Arthritis Surgical Society
ESB	European Society for Biomaterials
ESPA	European Society Pelvis Acetabulum
ESSKA	European Society of Sports Traumatology, Knee Surgery and Arthroscopy
ESTES	European Society for Trauma and Emergency Surgery
EuroSpine	EuroSpine – the Spine Society of Europe
EWAS	European Wrist Arthroscopy Society
EWMA	European Wound Management Association
FESSH	Federation of European Societies for Surgery of the Hand
ISLASS	International Society of Laser and Percutaneous Procedures in Spinal Surgery
ISTF	International Surgical Thrombosis Forum

ASSOCIATE SCIENTIFIC MEMBERS

AAOT	Azerbaijan Association of Orthopaedics and Traumatology
AOTRA	Association of Orthopaedists, Traumatologists and Rehabilitologists of Armenia
APOA	Asia Pacific Orthopaedic Association
BRSMOTOS	Belarus Republic Scientific Medical Society of Trauma and Orthopaedic Surgeons
EOA	Egyptian Orthopaedic Association
IOA	Israeli Orthopaedic Association
JOA	Jordanian Orthopaedic Association
LOA	Lebanese Orthopaedic Association
POTA	Persian Orthopaedic Trauma Association
SOA	Saudi Orthopaedic Association



STRATEGIC REVIEW

EFORT underwent a strategic review which took a three-pronged approach: the overarching strategy, resources and re-location.

Two high-level goals were defined which will help EFORT to achieve its mission and vision:

■ **Become a reference point in MS diseases and injuries**

The role as a reference point focuses on driving scientific agenda, harmonising training and treatment, encouraging knowledge-sharing and exhibiting an unimpeachable level of integrity.

■ **Raising awareness of MS topics at the EU level and across European patient organisations**

EFORT will raise awareness at the EU and national levels through lobbying, advocacy campaigns and close collaboration with national societies.

The methodology was to identify key performance indicators for each field of activity, thereby measuring the success of each single activity by taking into consideration a) financial sustainability and b) the contribution to EFORT's identified goals. By following this path, a gap analysis could be extracted, indicating where EFORT stands today and what activities should be emphasised in the future.

KEY FINDINGS



- As expected, the annual congress is EFORT's flagship activity at present, as it showcases the organisation
- Although educational activities are only marginally profitable, they do contribute to a large extent to EFORT's goals
- More diversified content presented with state-of-the-art technology, aligned both in sequence and time, will generate increased interest and ultimately more income
- Another important topic was the definition of scientific agenda in orthopaedics and traumatology across Europe, both for the annual congress and outside of this platform. The Education Committee plays a central role. A concerted effort across committee work and the general structure is likely to be the way forward, especially where the Education, Publications and Content Steering Group (website & portal activities) committees are concerned

• European activities should follow a structured path. EFORT needs to do further work on the definition on topics that will give more visibility. It is worth thinking about key topics such as partnering within a coalition, and what specific topics/groups should be tackled

• It was concluded that the EBOT exam, as the common result of both set goals (1. Point of reference; 2. Raising awareness), will be promoted and will genuinely influence the drafting of training curricula. The aim is to establish a common standard across the variety of training approaches that currently exist around Europe. In future, there could be preparatory courses for the exam, organised by EFORT.

The current revision of the statutes is aimed at supporting and securing the daily working practices of a modern and professional medical federation within the field of orthopaedics and musculoskeletal traumatology.

— Per Kjaersgaard-Andersen, Secretary General of EFORT



CHANGES TO STATUTES

The General Assembly voted on important changes to the [statutes of EFORT](#). The last revisions to the statutes were made in June 2006 in Geneva.

Substantial revisions to the statutes were presented to and accepted by the last General Assembly. The statutes have been reworked and aligned with the two overarching goals that emerged from the strategy review. This implies a focus on driving forward scientific agenda, harmonising training and treatment, encouraging knowledge-sharing and exhibiting an unimpeachable level of integrity. The latter certainly justifies the creation of the new Ethics Committee, chaired by Professor Jean Puget.

Three main items were put to the vote:

■ The congress venue

The congress venue will be chosen by the Executive Board. The congress has become a very large and complex organisation, and the venues must be chosen on the basis of many factors, such as congress centre size and location, ease of transport and accommodation options for participants. The ordinary members of the Federation are encouraged to submit applications, as proposals from national societies will remain an integral part of the decision process.

■ The terms of office have been changed

The Congress has become annual, so presidential officers will now serve for one year, in line with the Congress cycles. To ensure continuity, a second Vice-President position has been added, so that the members of the Executive Board will each remain in office for four years. This will allow swifter and more effective rotation.

■ Head Office location

The Executive Board is now empowered to determine the actual location of the Head Office, although the General Assembly retains the power to decide the country in which the Head Office will be based.

The Executive Board realises that these transformations are major; the Executive Board is convinced that they are necessary and will contribute to make our Federation more flexible to respond to the changing circumstances of today and tomorrow.

2012 members of the Executive Committee

Prof. Dr. Pierre Hoffmeyer	President	Switzerland
Dr. Manuel Cassiano Neves	Vice President	Portugal
Prof. Dr. Miklós Szendrői	Imm. Past President	Hungary
Mr. Stephen R. Cannon	Treasurer	UK
Ass. Prof. Kjaersgaard-Andersen	Secretary General	Denmark
Prof. Dr. Enric Cáceres Palou	Member at Large	Spain
Prof. Dr. George Macheras	Member at Large	Greece
Prof. Dr. Philippe Neyret	Member at Large	France

Co-opted members:

Mr. John Albert	UK
Prof. Dr. Thierry Bégué	France
Prof. Dr. George Bentley	UK
Prof. Dr. Nikolaus Böhrer	Austria
Dr. Marino Delmi	Switzerland
Prof. Dr. Karsten Dreinhöfer	Germany
Prof. Dr. Klaus-Peter Günther	Germany
Prof. Dr. Norbert Haas	Germany
Prof. Dr. Karl Knahr	Austria
Prof. Dr. Rüdiger Krauspe	Germany
Prof. Dr. Maurilio Marcacci	Italy
Prof. Dr. Jean Puget	France
Prof. Dr. Wolfhart Puhl	Germany
Prof. Dr. Hakki Sur	Turkey
Prof. Dr. Karl-Göran Thorngren	Sweden
Prof. Dr. Dieter Wirtz	Germany



CODE OF ETHICS

An Ethics Committee was set up under the leadership of Professor Jean Puget (Toulouse, France). The members of this committee are Michael Benson (UK), Niki Böhler (Austria), Miklós Szendrői, and Luigi Zagra (Italy). The goal is to raise awareness within EFORT of the ethical constraints imposed by governments, third parties, industry and other partners. The Ethics Committee will also issue guidelines on all aspects of ethical behaviour for orthopaedic surgeons throughout Europe.

Ethics are, by definition, part of our medical profession, since we all took the Hippocratic Oath as soon as we started to practice. The principles were laid down as early as around 2000 BC, in the "Code of Hammurabi". Nowadays, however, this is no longer sufficient, because the practice of medicine has changed. The practice of medicine is no longer the only privileged relationship between a patient and his doctor. Today's practice requires the cooperation between several physicians and costly technical means. Ethical rules must therefore cover all of those in charge of care, directly or indirectly. This fact requires an evolution of the traditional ethical rules, which must be adapted and expanded as the practice of medicine itself evolves. It is therefore important to define objectives for various points.

EFORT'S INTERNATIONAL PRESENCE

EFORT attended many congresses during 2012. The need for training is widely accepted, and EFORT takes a variety of approaches in order to strengthen ties with members and affiliated societies, and to enlarge the global network. EFORT has raised its profile in the following countries with "EFORT Fora", "EFORT Abroad" activities and specially designed campaigns:



- China (Beijing): Annual Meeting of the Chinese Orthopaedic Association (COA)
Guest session: Tribology in total hip arthroplasty
- Cyprus (Nicosia): Annual Meeting of the Cyprus Association of Orthopaedic Surgery & Traumatology (CAOST)
EFORT Forum session: First rax pathology
- Denmark (Copenhagen): SIP (Societal Impact of Pain)
- Egypt (Sharm El Sheikh): First combined EOA & SOA (Egyptian Orthopaedic Association & Saudi Orthopaedic Association) Orthopaedic Meeting
Three 20-minutes talks on topics within total hip replacement
- France (Paris): Annual Meeting of the French Society of Orthopaedic Surgery & Traumatology (SOFOT), *EFORT Forum session: Overuse syndrome*
- Germany (Berlin): Annual Meeting of the German orthopaedic associations (DGOOC/DGU/BVOU)
- Greece (Athens): Annual Meeting of the Hellenic Association of Orthopaedic Surgery and Traumatology (HAOST)
EFORT Forum session: Management of the osteoarthritic knee in the young patient
- India (New Delhi): APAO meeting / Tribology Day
Combined EFORT-EHS guest session
- Italy (Milan): Annual Meeting of the European Hip Society
- Italy (Rome): Annual Meeting of Italian Society of Orthopaedics and Traumatology (SIOT)
EFORT Forum session: Complex proximal humeral fractures
- Kosovo (Prishtina): Annual Meeting of Kosovo Society of Orthopaedics and Trauma Surgeons (KSOTS)
EFORT Forum session: Hip arthroplasty

Governing Board

A new concept to promote excellence in musculoskeletal research and clinical practice.

— Pierre Hoffmeyer, EFORT President 2012/2013



THE EFORT ACADEMY

The [EFORT Academy](#) was launched in Berlin during the EFORT Annual Congress 2012. It is a new concept to support and promote clinical practice and basic musculoskeletal research. The Academy initiates and pilots training and research, and evaluates all of the scientific, educational and publication activities that require EFORT approval. It will also make recommendations on the grants and fellowships awarded by EFORT.

The Academy offers a fellowship affiliation which is open internationally to all surgeons, physicians, researchers and other health care providers in the field of orthopaedics and musculoskeletal trauma. The affiliates of the Academy carry the title "Fellow of the Academy of the European Federation of National Associations of Orthopaedics and Traumatology".

The EFORT Academy's main objective is to sustain the vision of EFORT, to harness and build on the professional capacity of our Federation by driving scientific agenda, harmonising education and treatment, encouraging knowledge-sharing and exhibiting an unimpeachable level of integrity. This peer network, where orthopaedic surgeons and other healthcare leaders meet, strives actively to raise the priority of musculoskeletal diseases and injuries on the European health agenda.

BASIC RESEARCH TASK FORCE

A basic and translational research task force is to be created within EFORT to streamline and promote research. The goal is to identify and recognise individuals and organisations in Europe that are involved in research projects.

The scientific programme at the annual congress could be improved in terms of both quality and teaching by involving the top researchers in Europe in the drafting of our programmes. The [European Orthopaedic Research Society](#) will be involved in this new task force, which will begin by evaluating the abstracts on basic research which have been received for the EFORT annual congress.

In the future, the task force will be asked to draw up a teaching programme, and perhaps also to help and encourage young researchers with the methodology of their research projects.

- Japan (Kyoto): Annual Meeting of the Japanese Orthopaedic Association (JOA)
- Poland (Rzeszow): Annual Meeting of the Polish Society of Orthopaedics and Traumatology (PTOITR)
EFORT Forum session: New techniques and development in orthopaedics and trauma surgery
- Portugal (Algarve): Annual Meeting of the Portuguese Society of Orthopaedics and Traumatology (SPOT)
EFORT Forum session: Degenerative knee. The challenge with young and active patients
- Spain (Malaga): Annual Meeting of the Spanish Orthopaedic and Traumatology Society (SECOT)
- Switzerland (Basel): Annual Meeting of the European Society for Trauma and Emergency Surgery (ESTES)
Guest session: Periprosthetic fractures
- United Arab Emirates (Dubai): Combined 33rd SICOT Et 17th PAOA Orthopaedic World Conference
- USA (San Francisco): AAOS 2012 Annual Meeting



BERLIN IN THE EUROPEAN LIMELIGHT

The [13th EFORT Annual Congress](#) was held in Berlin from 23 to 25 May 2012 and organised in close cooperation with the German Association of Orthopaedics and Orthopaedic Surgery (DGOOC), the Professional Association of Orthopaedic Surgeons and Traumatologists in Germany (BVOU) and the German Society for Trauma Surgery (DGU).

The [Michael Freeman Honorary Lecture](#) was given by Bernard F. Morrey, the outstanding orthopaedic surgeon from the Mayo Clinic (USA), on "The Elbow: Evolution of viable solutions", and the Erwin Morscher Honorary Lecture was delivered by Reinhold Ganz, the master hip surgeon from Bern, with a talk entitled "Anatomical reconstruction of the hip with slipped capital femoral epiphysiolysis justified by pathophysiological findings".

Trauma was selected as the main focus of the 13th EFORT Annual Congress, with several sessions dealing with all aspects of diagnosing and treating trauma of the musculoskeletal system.

Two current international initiatives were among the priority topics in Berlin.

- The "UN Decade of Action for Road Safety", which was covered by a number of presentations on accident prevention and the treatment of injuries and their consequences.
- The "European Year of Active and Healthy Ageing".

The presentations in this area focused mainly on degenerative diseases of the musculoskeletal system. Main priorities included the current state of the art in operative and conservative treatment options, in modern approaches to rehabilitation and pain treatment, in multimodal approaches to back pain therapy and the management of osteoporosis. On the last day of the congress a car crash scenario was set up to show the devastating effects of polytrauma.

China, our guest of honour

Congress delegates wish to continue efforts towards greater openness by inviting a different country each year.

Our first special guest was China. This country is developing extremely fast in the field of orthopaedic surgery, with nearly 40,000 surgeons [...] – Pierre Hoffmeyer, EFORT President 2012/2013

The "EFORT invited Nation Programme" was presented in Berlin in collaboration with the Chinese Orthopaedic Association.

The Congress attracted interest from beyond Europe

More than 7,000 active participants were registered, and in total over 9,000 healthcare professionals (doctors, nurses, students, industry, and press) attended. It is expected that the economic spinoff equals roughly 12,000 people travelling to Berlin for the purpose of the Annual Congress. For the first time since the congress has been held every year, we increased our participant base by almost 8% (from an average of 6,500 to 7,000 this year). Nearly 4,000 abstracts were submitted. The acceptance rate of 46% contributed to the educational value of the different sessions.

Five different techniques were presented with five different experts.



TRAINING COURSES

EFORT's approach to training is structured along three distinct channels: 1) publications for traditional delivery, 2) the Advanced Training Programme (ATP), with a series of postgraduate training courses (lectures and hands-on workshops) taking place every year on specific topics, and 3) the e-resources that are currently developing rapidly in terms of website visibility and presentation.

Instructional Courses and ExMex

Every year, EFORT runs a series of courses that follow either the format of an [Instructional Course](#), or a specialist advanced training forum called [Experts meet Experts](#) (ExMex). The majority of these courses are organised in collaboration with speciality societies and/or national orthopaedic associations. The first ExMex of the year was instigated by the EFORT Trauma Task Force.

■ EFORT ExMex – Periprosthetic Fractures

Barcelona, Spain 16–17 March 2012

Periprosthetic fractures are becoming increasingly prevalent. This is partly due to the steady rise in life expectancy, which means that more people are receiving hip or knee implants. Some periprosthetic fractures occur in older people because they are, for various reasons, more likely to suffer from falls. While bone substance is still elastic in younger people, it is more frequently subject to fracture in older people. These fractures are all the more complicated where artificial joints are involved.

The course presented the first step in the successful treatment of a periprosthetic fracture. It is crucial before starting surgery to know whether the prosthesis is still firmly in place, or whether it has become loose as a result of the fracture. Furthermore, femoral fractures were an important topic on the agenda, because they are the most common fractures in patients with hip or knee joint prostheses. All aspects of the successful management of these fractures were thoroughly discussed. Thirdly and finally, the Forum discussed fractures which are accompanied by infections, and which can also pose serious difficulties in treatment.

■ EFORT ExMex Forum – Hip: Advancing the science and art of hip arthroscopy, primary and revision hip arthroplasty

Athens, Greece, 20–21 April, 2012

This Forum attracted younger, trained orthopaedic surgeons as well as more experienced hip surgeons. Both groups were able to update their knowledge and broaden their skills through exchange with experienced lecturers and other participants.

Femoral and acetabular revisions were an important point of focus during the Forum. Some of the prostheses implanted roughly 10 or 15 years ago are made of materials that led to osteolysis – painful bone lesions resulting from debris at the bearing surfaces. These implants must be removed and replaced. The burning questions for surgeons, however, are how to deal with the bone defects, and what type of revision implants to use.



The target group for the exam is therefore our younger colleagues, our next generation.

A young surgeon must know, and learn the lessons of the past, about bearing surfaces, and special approaches and techniques in femoral or acetabular revision. Special strategies are also needed to manage patient-induced complications, e.g. missing follow-up treatments or seeking treatment up 10 or 15 years after the bone stock has been destroyed. Serious difficulties arise when dealing with these bone defects. The ExMEx Forum discussed and identified possible solutions. Another highlight was classification issues and treatment options in patients with congenital hip disease.

■ EFORT Instructional Course – Five in one: Operating hallux valgus deformities

Geneva, Switzerland, 12-13 October, 2012

This IC was devoted to the management of hallux valgus deformities and state-of-the-art treatment options for arthritis of the ankle. Five live surgeries were done by recognised experts, who shared their surgical skills with the audience. Training through hands-on practice was offered in the three workshops that followed the main sessions.

Five different techniques were presented with five different experts, and the featured surgeons were asked to talk about their technical problems, patients with difficult outcomes, the challenges, and how to resolve them.

EPOS-EFORT BAT

Education is a vital investment in our future. In medicine, it is of essential importance, since quality training is crucial to the degree of public health that can be achieved in the EU. EPOS (the [European Paediatric Orthopaedic Society](#)), in cooperation with EFORT, is implementing an integrated postgraduate training concept and introducing the [EPOS-EFORT BAT](#) courses. The courses are aimed at two different specialist target groups, and take into account the growing need for a reliable, common training standard among surgeons in the same speciality throughout the European Union.

The acronym means "Basic – Advanced – Trauma", summarising the three different types of course offered. The "Basic Course I", "Basic Course II" and "Trauma Course" therefore comprise the core curriculum for children's orthopaedics that is required for the EBOT exam, the annual examination offered by the European Board of Orthopaedics and Traumatology. This exam, open to orthopaedic surgeons from all EU countries, plus Norway and Switzerland, who are already fully certified by their national authority, is not yet officially acknowledged by Brussels. The target group for the exam is therefore our younger colleagues, our "next generation", so to speak. We offer a highly qualified international faculty, an interactive teaching method – including practical workshops – as well as an advance test and a subsequent test with identical questions to check how much has been learned.

■ The first trilogy of courses took place as follows: *Paediatrics Basic Course I, 18-20 May 2011*

Paediatrics Trauma Course, 12-14 October 2011

Paediatrics Basic Course II, 28-30 March 2012

■ The second trilogy of courses began with the *EPOS-EFORT Paediatrics Basic Course I, 12-14 September 2012*

Educational programmes & projects

A welcome stimulus for senior trainees, orthopaedic centres and sponsoring bodies.



THE BJJ / EFORT TRAVELLING FELLOWSHIP

The [Bone & Joint Journal/EFORT Travelling Fellowship](#) (BJJ/EFORT TF) is a new venture, initiated and funded by the British Editorial Society of Bone and Joint Surgery (BESBJS) and supported by the the British Orthopaedic Association (BOA) and the European Federation of National Associations of Orthopaedics and Traumatology (EFORT).

Every year three young orthopaedic surgeons will be selected to spend two weeks visiting orthopaedic centres of excellence in either the UK or mainland Europe, culminating in attendance at either the EFORT or BOA congress. It is envisaged that four centres will be visited. At each centre, the Fellows will learn about the speciality work of that unit, and will participate in clinical conferences and presentations.

- For a senior trainee or a newly-qualified consultant, it will provide an excellent opportunity to broaden clinical experience, to make important professional contacts and to gain experience in presenting their own work and opinions in an international setting.
- For the orthopaedic centres involved, it will provide a welcome stimulus, an opportunity to develop and strengthen ties with surgeons and centres in other countries, and a chance to raise the profile of the unit concerned.
- For the sponsoring bodies it offers a high profile example of their educational and training roles, and an opportunity for Bone & Joint to promote its activities.

The Fellowships will alternate between being UK-based and European mainland-based, starting in 2013 with three UK-based surgeons travelling to four centres in Europe, ending at the EFORT Congress in Istanbul. In the following year (2014), three Fellows from continental Europe will travel to four centres in the UK and attend the 15th EFORT Annual Congress in London, a combined congress with BOA sessions.

Travelling Fellowship programmes:

Two [Travelling Fellowship programmes](#) took place in 2012: one in France from 1 to 7 April (Marseille & Nice) and the other in Spain from 11 to 17 November (Barcelona & Madrid)

The main objectives of these programmes were not only to enhance and unify orthopaedic training, continuing medical education and knowledge transfer, but also to support and create new personal bonds to improve mutual understanding. We thought that an outline of the French programme might give a good insight into the areas on which the programme focuses:

The first working day was dedicated to hip surgery under the direction of Dr. Xavier Flecher and Prof. Jean-Noël Argenson. The highlight of the day was certainly the live surgery, broadcast to a hospital conference room, with interaction between the participants and the surgeon. Among the themes covered were the surgical approach to the hip, with a demonstration of the anterolateral approach in the supine position, bearing materials, sports and total hip arthroplasty, surgery for hip dysplasia including a demonstration of hip arthroscopy, and total hip arthroplasty for the developmental dysplastic hip.





After a long-term fellowship one becomes a better surgeon, a better person, a better EFORT member [...]

— Panagiotis G. Ntagiopoulos

The second day was dedicated to knee arthroplasty surgery under the direction of Dr. Sébastien Parratte and Prof. Jean-Noël Argenson. Again, presentations were combined with live surgery demonstrating unicompartmental and total knee arthroplasty procedures.

Prof. Philippe Neyret took the lead for the scientific programme on the third day, including presentations related to osteotomy around the knee, meniscal and ligament surgery, the treatment of cartilage defects and patellofemoral disease. Prof. Pascal Boileau and colleagues gave a presentation about their extensive experience in shoulder surgery. Among the topics addressed were SLAP lesions and fractures of the proximal humerus. Prof. Christophe Trojani led another live surgical demonstration.

A round-table discussion wrapped up the programme on the final day.

EBOT EXAM

The Fellowship Examination of the [European Board of Orthopaedics and Traumatology](#) (EBOT) was conducted for the first time in 2001. Over the last 12 years, the exam has gained recognition as a high-standard of qualification among the European orthopaedic community.

After a decade, the exam has improved its format to allow candidates to take the written part (section I) of the exam in numerous examining centres throughout Europe. Section I takes place annually in the beginning of June, on the same day and at the same time. The oral examination (section II) is offered in one European location, during the first weekend of October. The structure of the oral examination consists of five stations – Upper limb, Lower limb, Spine, Paediatric Orthopaedics and Basic Science.

Currently, EU citizen and non-EU citizen working in an EU country as well as trainees in their last year of training in a recognised European Training Scheme Programme are eligible to apply for the exam.

Successful candidates will carry the title "Fellow of the European Board of Orthopaedics and Traumatology"

[...] despite the great variation in the way in which orthopaedics is practiced across Europe, the particular features of each association should be preserved.



EUROPEAN CURRICULUM

We are all aware that, as borders are dismantled, labour mobility across Europe has grown. There have been a number of concerns raised about the standard of knowledge of orthopaedic surgeons working in Europe from abroad, and also from some of the developing European countries. EFORT is also conscious that there can be considerable fluctuation in the level of knowledge that is required to proceed to consultant practice, even in well-developed orthopaedic resident programmes. We are also aware that assessment at the end of training varies widely.

For this reason, we believe it would benefit all national associations if we developed what we consider to be the minimum requirements for training in orthopaedics across Europe. Based on these premises, EFORT's role would be to establish a European orthopaedic and traumatology platform which, in collaboration with the national member associations, would develop the basic curriculum for orthopaedics and traumatology within Europe, as well as an examination procedure framework. This curriculum should be structured in a way that could be applied by each national association, bearing in mind that, despite the great variation in the way in which orthopaedics is practiced across Europe, the particular features of each association should be preserved. This requires a broad curriculum that can be applied easily.

The European Board of Orthopaedics and Traumatology (EBOT) has been running an annual exam in English for the past twelve years on behalf of the Orthopaedic Section of the European Union of Medical Specialists (UEMS). Over the past two years, EFORT has also become directly involved in the examination process by taking on most of the administration. The exam is non-mandatory, since residents can choose to take the national exam offered by their own association in their local language. This also leads to broad, country-to-country variation in assessment. The definition of the curriculum for the EBOT exam also needs to be improved. With discrepancies on information on the standards for qualifying as an orthopaedic surgeon, it is difficult for exam candidates to fulfil requirements. It makes sense for residents throughout Europe to undergo the same kind of assessment at the end of training.

Last December, EFORT launched the European Education Platform – EEP, and invited national associations to apply to be part of the process. The idea is to start with a small group, which would establish a framework before expanding representation to as many associations as possible. UEMS, EBOT and the speciality societies must also be involved in the process.

To date, Austria, Croatia, Cyprus, France, Greece, Malta, Poland, Serbia, Slovenia and Turkey have sent in their applications. On the EFORT side, delegates have been nominated from Portugal, the United Kingdom and Germany. UEMS has appointed delegates representing Spain, Denmark, Italy, the Netherlands and Estonia.

EFORT is committed to offering all national associations a European curriculum and a European assessment that satisfies all of their requirements. At a time at which orthopaedic surgeons are in the spotlight owing to a number of political issues and cuts in most healthcare systems in Europe, it is fundamental that they receive the best possible training.



One-stop shop for all things orthopaedic.

EFORTnet

EFORTnet

The extensive survey of portal user needs, conducted in May 2011, drew the views of more than 900 people. We learned that training and science are increasingly delivered through the internet, hence the decision to create one major channel to access knowledge. While congresses and courses remain the primary ways to teach and learn, online approaches further facilitate the harmonisation of training throughout Europe by reaching beyond geographical boundaries. The benchmark study revealed the competing sites in the area of musculoskeletal diseases.

The above initiatives led to the completion of the first phase of the new EFORT websphere definition. The various functionalities, such as search engine optimisation, federated search features, news feed, profile and registration and browse optimisation were part of this development stage, and are encapsulated in the features of EFORTnet.

EFORTnet, the orthopaedic and traumatology platform, fosters knowledge-sharing and capacity-building. With individual communication and networking tools such as personal walls, contact searches and direct messaging between members, EFORTnet strives to become the point of reference and the community platform of preference on orthopaedics.

EFORT and Medical Insights announce partnership: one-stop shop for all things orthopaedic

To maximise the impact of EFORTnet and the future commitment of platform users, EFORT is offering content aggregation via the newly developed "[Insights Orthopedics](#)" app. This application is downloadable from the Apple App Store, and has been designed specifically with healthcare professionals in mind. The news compilation will offer the latest unbiased medical content, delivered through a beautifully designed magazine-like user experience.

European activities

From an idea to a body with voice in Brussels' corridors.

— Wolfhart Puhl, EFORT Past President



European activities are fundamental to EFORT. Indeed, they are the essence of what our Federation stands for, and it is of vital importance that European specialists in musculoskeletal surgery speak with one voice. To cite Wolfhart Puhl: "As the year 2012 has been officially adopted by the EU as the year of "Active Ageing and Solidarity between Generations", EFORT is now strategically placed to work in partnership with the EU institutions and relevant groups to raise the profile of the orthopaedic and trauma profession at the European level, and to demonstrate the role of the profession in helping to reduce the economic and social burden of musculoskeletal conditions on society". For this purpose, EFORT retained a Brussels-based European strategic communications and public affairs consultancy, and dedicated a specific budget to work at the European level.

EFORT is currently engaged in the following initiatives:

- [European Year For Active Ageing and Solidarity between Generations 2012](#)
- [Pilot project for the Innovation Partnership on Active and Healthy Ageing](#)
- [Fit for Work Europe Coalition](#)
- [UDI Ad-Hoc Working Group](#) (Unique Device Identification system for medical devices)
- [Health First Europe](#)
- [EUmusc project](#)

HORIZON 2020

Following the EU workshop organised in October 2012 in collaboration with EULAR, the European Parliament voted in committee (ITRE) to adopt an amended [Horizon 2020](#) proposal which included musculoskeletal diseases. For EFORT and for the orthopaedic research community, this ITRE vote is excellent news, and confirms that the burden of musculoskeletal conditions is recognised throughout the European Union. Once the EU multi-financial framework is adopted and the final version of the text has been agreed with the Council of Ministers, the research calls under Horizon 2020 will include musculoskeletal conditions.

Recently, the European Commission launched a call asking experts from all fields to participate in shaping the agenda of Horizon 2020 by taking part in advisory groups. The groups will encourage dialogue between all levels of government, civil society and business from all EU Member States. In doing so, they will influence the direction of EU research and innovation funding from now until 2020. The expert advisory groups will start their work in spring 2013, to enable them to provide advice in time.

This call represents a unique opportunity to influence Horizon 2020 and to communicate the added value of MSD research projects for all EU citizens. EFORT therefore encouraged members of its national and specialty societies to participate.



EU SCIENTIFIC WORKING GROUP ON METAL-ON-METAL HIP IMPLANTS

The "metal-on-metal" total hip arthroplasty controversy has become a difficult topic, and many orthopaedic surgeons are seeking guidelines to support them in tackling this complex issue. Endorsed by EFORT and chaired by Prof. Klaus-Peter Günther and Prof. Luigi Zagra from the European Hip Society (EHS), the *German Arbeitsgemeinschaft Endoprothetik* (AE) and the *Deutsche Arthrosehilfe Organisation* (DAH) convened a multidisciplinary panel to draw up recommendations. Specialists from all disciplines concerned with clinical outcomes, tribology and basic science came together and produced a consensus paper. Further to its own statement on the issue, EFORT has also posted the guidelines of its national member societies on its website. European orthopaedic and musculoskeletal surgeons can therefore stay up to date on the latest developments. They are welcome to send in opinions and statements of interest to the surgical community.

The European Commission launched a [call for participation](#) in a Scientific Committee on Emerging and Newly Identified Health Risks (SCENIHR). It also issued a call for scientific opinions on the safety of metal-on-metal joint replacements, with a particular focus on hip implants. EFORT members and the European Hip Society responded to this call. The composition of the expert group will hopefully be communicated shortly. EFORT is certainly anxious to exert its influence on decisions on this vital issue, which so affects the health and well-being of our arthroplasty patients. It is also important that the EFORT community weigh in on future regulatory decisions on the use of implants.

MUSCULOSKELETAL HEALTH ALLIANCE

Germany alone has about 115,000 femoral-neck fractures a year. In Europe as a whole, this figure is 600,000. Orthopaedists and rheumatologists are now working together to optimise medical care for these fractures. During the EFORT Annual Congress in Berlin, experts presented interdisciplinary strategies for better treatment of accompanying disorders in these patients, and for improved follow-up care and prevention of further fractures.

These fractures create a financial burden on the health care system in Europe of about 31 billion euros a year. Although great progress has been made in recent years in developing new medications and better surgical techniques, there is still great room for improvement. Areas of particular focus here should be hospital-based perioperative care for accompanying disorders in this large group of patients, and postoperative care, in the prevention of further fractures.

A first draft of new and improved treatment recommendations was discussed in connection with the European Alliance for Musculoskeletal Health. Prof. Dreinhöfer: "Europe's orthopaedists, rheumatologists and patients represented by EFORT and the European League Against Rheumatism, EULAR, are working together for the first time [...]".

There is a close link in the elderly between the conditions treated by orthopaedists and trauma surgeons, and rheumatic diseases. It makes sense to coordinate research and therapeutic approaches based on scientific evidence. That is the purpose of the European Alliance for Musculoskeletal Health: to lend greater support in Brussels to both speciality areas, in negotiating EU funds for important research projects, and in safeguarding patient rights.



Prof. Luigi Zagra (EHS) and Prof. Klaus-Peter Günther (EFORT)



Left to right: Prof. K. Dreinhöfer, Prof. W. Puhl, Prof. D. Wirtz, Mr. N. Beteridge, Prof. P. Hoffmeyer, Dr. Aures, Prof. M. Dougados, Prof. A. Woolf



AUDITOR'S REPORT

NOVISA 

NOVISA RECHNUNGSWESEN
NOVISA ADMINISTRATION
NOVISA STEUERBERATUNG
NOVISA WIRTSCHAFTSPRÜFUNG

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Report of the statutory auditors on the limited statutory examination to the members meeting of the association **EFORT, Rolle**

As statutory auditors, we have examined the financial statements (balance sheet, income statement and notes) of **EFORT** for the year ended **31.12.2012**.

These financial statements are the responsibility of the **Executive Board**. Our responsibility is to perform a limited statutory examination on these financial statements. We confirm that we meet the licensing and independence requirements as stipulated by Swiss law.

We conducted our examination in accordance with the Swiss Standard on the Limited Statutory Examination. This standard requires that we plan and perform a Limited Statutory Examination to identify material misstatements in the financial statements. A limited statutory examination consists primarily of inquiries of company personnel and analytical procedures as well as detailed tests of company documents as considered necessary in the circumstances. However, the testing of operational processes and the internal control system, as well as inquiries and further testing procedures to detect fraud or other legal violations, are not within the scope of this examination.

Based on our limited statutory examination, nothing has come to our attention that causes us to believe that the financial statements do not comply with Swiss law and the association's articles of incorporation.

Zurich, May 14, 2013

NOVISA Wirtschaftsprüfung AG

Andreas Kuhn
lic. oec. HSG et lic. iur.
Licensed audit expert



INCOME STATEMENT

	2011	2012
	CHF	CHF
1 January to 31 December		
Membership fees	161'253	168'639
Education	163'874	79'100
Sales of books	25'818	-
Courses	84'997	298'131
Annual Congress	3'005'162	2'993'334
Publications	59'215	83'057
Net revenues	3'500'319	3'622'261
Personnel	1'212'192	1'204'399
Administration	172'054	327'159
Executive Committee	597'475	339'576
Audit, consulting, legal	25'776	-
Information systems and technologies	297'768	341'293
Marketing & communications	251'225	
Publications	147'349	157'385
Annual congress	912'767	789'129
Postgraduate training programme	54'315	250'244
Public affairs	-	112'364
Education	107'135	160'926
Total operating expenses	3'778'056	3'682'475
<i>Operating income/(loss)</i>	<i>(277'737)</i>	<i>(60'214)</i>
Interest income	54	1'151
Foreign exchange gain/loss	(27'377)	(7'850)
Financial expenses	(27'323)	(6'699)
Financial income/(loss)	(305'060)	(66'913)
Extraordinary income	2'622	9'259
Debitor loss	(2'817)	-
Net Income/(Loss)	(305'255)	(57'654)

BALANCE SHEET

	2011	2012
	CHF	CHF
As at 31 December		
Cash and cash equivalents	711'435	951'760
Accounts receivable	375'287	176'812
Other receivables	927'232	931'455
Prepaid expenses	6'522	6'009
Total current assets	2'020'476	2'066'036
Tenant's guarantee/deposits	14'050	26'060
Inventory, books	36'479	24'416
Refurbishments, Rolle	-	245'181
Equipment	246'000	289'000
<i>Total long-term assets</i>	<i>296'529</i>	<i>584'656</i>
Total assets	2'317'005	2'650'691
Liabilities to bank	-	41'873
Accounts payable	446'212	389'785
Other payables	130'744	317'675
Accrued liabilities (short-dated)	8'000	233'893
Accruals (long-dated)	29'930	23'000
Total current liabilities	614'886	1'006'226
Retained earnings	2'007'373	1'702'118
Net Income/(Loss)	(305'255)	(57'654)
Total capital of the Association	1'702'118	1'644'465
Total liabilities and capital	2'317'005	2'650'691

Prepared by Mr. Stephen R. Cannon, Treasurer
Member of the Executive Committee
May 2013



NOTES *

■ General accounting standards

EFORT (the European Federation of National Associations of Orthopaedics and Traumatology) is constituted as an association in conformity with Swiss law (article 60 et. seq. Swiss Civil Code) and had its legal domicile in Zurich, Switzerland till October 2012. The fiscal year is the same as the calendar year.

The Federation prepares its financial statements in accordance with Swiss GAAP FER. Assets are valued at historical cost. All assets and liabilities denominated in foreign currencies are translated at year-end exchange rates (31 December 2012 = CHF 1.2069/EUR). All exchange rate gains and losses resulting from transactions denominated in foreign currencies are included in the income statement. EFORT opted to register for Swiss value-added tax from 1 January 2011. We settle this quarterly with the EstV Bern, tax no. 769098.

■ Capitalised development costs

At the end of October 2012, the EFORT Head Office (HO) moved out of the Zurich-based Technopark when its lease expired and moved to Rolle in the Lake Geneva region.

After a thorough and careful political and economic analysis, the Executive Board came to the conclusion that the HO should remain in Switzerland. The reasons included economic stability, political neutrality, fiscal advantages, recruitment opportunities and ease of access. A mandate to search for new premises was given to Colliers International and SPG Intercity. The "A One" business centre, situated in Rolle (a town halfway between Geneva and Lausanne) is now the new home of the EFORT Head Office. The town hosts many international organisations and enterprises. The new offices were inaugurated during the Executive Committee meeting in January 2013.

EFORT has no objects under retention of title. It was not made upgrades and release of hidden reserves.

■ Lease commitments 2012

To 31 Dec 2012 there are the following leases:

Rent:

XEROX Finance AG, Kloten

No. 898205, 20 Oct 2008, object: Xerox WorkCentre 7335 (printer), 48 Months

Lease:

GrenkeLeasing AG, Zürich

No. 081002083, 03 Dec 2009, object: Accounting Software Profinance, 48 Months

No. 081001944, 18 Feb 2009, object: Accounting Software Profinance, 48 Months

■ Lease commitments 2013

In the first quarter 2013 following lease was concluded:

UBS Leasing AG, Zürich

No. 1022417, 26 Feb 2013, object: Furniture TDS Cabinets Sliding, 48 Months, amount CHF 164'100.55

No. 1017373, 01 Sept 2010, object: Server, EcoLogic, 36 Months, CHF 11'218

■ Dept owed to pensions fund

To 31 Dec 2012 there is a liability to SwissLife with an amount of CHF 17'285.

■ Risk assessment

The assessment should be carried out by the Executive Board in place.

* abridged version of the financial report



NOTES

A series of horizontal lines for writing notes, starting below the 'NOTES' header and extending to the bottom of the page.

EFORTnet

The Orthopaedics & Traumatology Community Platform

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- Share knowledge and experience with experts
- Use the wealth of scientific resources in an interactive way
- Find all abstracts from the Congress

info Register and access through www.efort.org

ACADEMY

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info More information on www.efort.org/academy



15th EFORT Congress [Patient Safety]

London, UK
4-7 June 2014

Abstract submission
01 August-01 November 2013

Preliminary programme
mid-September 2013

Advanced programme
01 March 2014

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