

Name: Kyriakopoulos Georgios Country of residence: Greece Country of visiting fellowship: Switzerland Name of the host: Dr Christofilopoulos P., Hôpital la Tour Dates of visiting fellowship: 09/01/2018-09/07/2018

EFORT Foundation Visiting Fellowship Report

The EFORT visiting Fellowship at Hôpital la Tour started on January 2018 until July 2018. The average week consisted of operating room sessions, consultations, ward rounds and case discussions. We had one and a half to two and a half days in the Operating Theatres. Usually one day was dedicated to hip arthroplasty primary and straightforward revision cases and the other days involved hip preservation surgery cases and other hip pathology cases, as well as more complex revision cases. Trauma cases were usually operated on the day of presentation after hours or the following morning. The surgical efficiency was such that on a day with primary hip cases , utilising a flip list as many as 8 cases could be done until 5 p.m.

Consultations and follow up visits were performed by Dr Christofilopoulos one and a half to three days per week depending on the workload. The patient would be examined by the fellow or Dr Christofilopoulos and the imaging reviewed. Following the consultation interesting cases would be discussed between the fellow and Dr Christofilopoulos, as well as relevant scientific topics. Finally, ward rounds were performed usually at the end of the day.

Upon arrival I was provided with ample learning material both in form of papers and textbooks in the field of hip surgery and particularly hip preservation surgery, and feedback was readily available as Dr Christofilopoulos was always happy to discuss any relevant matter and provide me with instructions and directions to further reading. Additionally, the knee (Alves/Fritschy) and the shoulder (Ladermann) teams were always keen to educate and provide learning resources and guidance.

I was able to attend two cadaveric courses about hip surgery, one course in minimally invasive hip arthroplasty in Verona, Italy and one in hip arthroscopy in Munich, Germany, which were very helpful in both improving my technical skills and my understanding of hip surgery novelties.

Research opportunities given the volume of hip related pathology in our practice were ample and Dr Christofilopoulos was very supportive of all research initiatives. We have already one review paper being in the publication process and another two papers being on their way. Moreover, with Dr Christofilopoulos' support a prospective all electronic database was set-up, which will ensure the data inflow for future research.

The hosting centre and accommodation were situated in the outskirts of Geneva, with easy access to the city as well as the surrounding area. The airport was a mere 30 minutes away, thus greatly facilitating international travel. The surrounding area is ideal for short excursions and most of the European cities are



within a two-hour reach. However, it was the easygoing nature and hospitality of Dr Christofilopoulos and the team, most notably Drs Bonvin and Alves that created a very welcoming atmosphere and were instrumental in my social integration in Geneva. Geneva in itself, albeit quite expensive, is an international city with a series of sites and activities throughout the year, as well as many opportunities for outdoor activities and sports.

Throughout my fellowship period I was exposed to a great volume of hip and to some extend other great joint surgery in the company of well-trained and very skilled surgeons. From a technical perspective, I was able to acquire new skills in the field of minimally invasive hip surgery and hip arthroscopy, and also pick up tips and tricks in hip revision surgery and hip preservation surgery. Soft tissue operations around the hip mainly abductor pathology and hamstring avulsions were also performed on a regular basis, and technical pearls and pitfalls were readily provided by Dr Christofilopoulos.

From a theoretical point of view, I was able to acquire a great deal of knowledge in the diagnosis and treatment of juvenile and young adult hip pathology, and hip preservation due to both the sheer number of patients seen and the guidance provided. Additionally, I was exposed to a significant number of cases with extraarticular hip pathology such as hip abductor pathology which greatly enhanced the learning experience. As mentioned previously the knee and shoulder teams, were also a great source of knowledge mainly in the fields of knee preservation surgery (high tibial osteotomies, chondral repair) and shoulder pathology.

I have returned to my country of origin (Greece) and I am very keen to implement my newly found knowledge, mainly MIS hip surgery by the anterior approach and hip preservation surgery, probably more surgical dislocations than arthroscopy at the beginning.

In conclusion, the whole experience has been great, allowing for significant improvement both in medical knowledge as well as work approach/ethics and attitude. I arrived at Geneva with many hopes and some reservations, and I have returned with more knowledge, improved surgical technique and attitude and last but not least, what I hope will be a life-time mentor in the face of Dr Christofilopoulos, who has been industrious both in providing knowledge and guidance throughout this period.