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Country of residence: Brazil

Country of visiting fellowship: France Name of the host: Dr Frederic Laude

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EFORT Foundation Visiting Fellowship Report

A fellowship is an experience that every surgeon looks forward to, because propels our education, career and life experience. When I was informed about my fellowship in Paris, with Dr Frédéric Laude as mentor, I was most pleased and enthusiastic. He was one of the lasts pupils of Prof. Emile Letournel, and nowadays he performs total hip replacements (THR) by minimally invasive anterior approach and hip conservative surgeries such hip arthroscopies and periacetabular osteotomies (PAO) with mini-open technique, being one of the most experienced and renowned hip surgeons in France, with international prestige.

1. Description of clinical activities during the fellowship

Mondays and Wednesdays were the operating room (OR) days. We started with 4 or 5 THRs in the morning, and in the afternoon there was a combination between hip arthroscopies and PAOs or revision THRs. The team was very efficient, alternating in 2 operating rooms, which enabled us to perform more surgeries in one day. So when an operation was about to end in one OR, the installation and anaesthesia of the next patient were being prepared in the other OR. I was very welcome by all nurses and anaesthetists who worked with us, as we all know each other by face and name, and I was lucky to make some good friends there. My mentor was very kind and attentive with me, teaching me his way of planning THR, and the art of the minimally invasive anterior approach using the orthopaedic table from Medacta, including some tips and tricks. I participated and assisted with all surgeries from the first day, and I had the opportunity to perform some procedures on selected cases under his supervision. At the end of each OR day, we went to visit the patients we had operated, and watched the THR patients stand up and walk, which reassured them and decreased their risks of thrombophlebitis.





Tuesdays and Thursdays were the outpatient clinic days. We started by visiting the patients operated the day before and giving them the discharge papers, which were prepared by our most efficient and attentive secretary. We then started consultations, where my level of French was sufficient to follow consultations, ask patients some questions directly, and discuss some cases with Dr Laude, without translating to/from English. My mentor has a very good relationship with his patients, and always explained to them the essential information about the surgery, answering their questions, and calling attention to the importance of healthy nutrition. I think that consultations are also an important part of our training, once we learnt the appropriate indications of a specific surgical procedure.

2. Description of scientific activities during the fellowship

I had a fabulous experience, thanks to my mentor and to Medacta, of attending two courses with cadaver lab session as educational activities for anterior minimally invasive surgery (M.O.R.E. AMIS Learning Center and M.O.R.E. AMIS Revision Learning Center). The team and organization were perfect, making them amazing experiences, and propelling me to learn more. During these courses, I was introduced to some well-established hip surgeons from all over Europe, that I was most delighted to meet. I also had the privilege of an exceptional session in an anatomy laboratory to learn the OPA, a very difficult, demanding, yet fascinating procedure.







And about research articles? Preparing, organizing and writing a scientific study requires great time and dedication. I was glad to see that Dr Laude values research and publishing, as we both agreed that learning should never stop, even if we are at the top. We can never be stagnant, and to keep progressing, reading and writing studies is the key. I had the golden opportunity to complete a manuscript under his supervision, with the help of ReSurg, a specialised team of consultants specialised in research on surgery. Our first manuscript was recently concluded and we already started working on two other studies.

3. Description of social aspects of the fellowship

I am really fortunate not only for all the learning experience, but also for being so very welcome in Paris. It is not that easy being alone for a long period away from home and family, and I am most grateful to Dr Laude, his adorable wife, and all his fabulous team (secretary, instrumentist nurses, general nurses, anaesthesiology nurses, anaesthetists and some other orthopaedic surgeons) for being so welcoming and kind to me. I made good friends in Paris, and one in particular introduced me to her welcoming friends outside the clinic and showed me the "soirées" in Paris. I hope to maintain all these friendships forever despite the distance. Besides that, I was in the city that I always dreamt to live in. I fell in love for this city as soon as I arrived there. It is a big and charming city, full of history, culture, with so many beautiful places and attractions to visit and see that you wish that the weekend could last more than 48 hours... the Eiffel Tower, Notre-Dame Cathedral, Champs Elysées, Louvre Museum, Rodin Museum, Luxembourg gardens, Les Invalides, Sacre Coeur, Montmatre...what a wonderful and magic city. And I had the opportunity to see all this covered in snow during winter and adorned with flowers and trees full of green leaves in spring!



Beyond the places, the special welcome of my mentor and his wife made the experience truly unique. Since the beginning, they made a great effort to make my stay pleasant and



enjoyable, helping me find a place to stay (once in Paris it is very hard to find one...). The most outstanding experience that they offered me was the "voltiges" (aerobatics) in his special airplane and a biplane flight over the sea. As a brilliant person, he could not be just a great surgeon, but also a skilful pilot! It was one of the best experiences of my life, for sure... I stay some moments reflecting and focusing in the memories I made there, because they are going to last a life time. I have really great memories of this fellowship.



4. Technical skills that you learnt during the fellowship

- ✓ Minimally invasive anterior approach (Hueter) for THR using the special orthopaedic table of Medacta
- ✓ Minimally invasive anterior approach by bikini incision (especially for women)
- ✓ A different way to plan a THR
- ✓ How to stablish the best choice of neck length during THR surgery
- √ How to manage dysplastic hips in THR using head graft
- ✓ Techniques of revision THR by anterior approach (Hueter)
- ✓ Management of septic THR
- ✓ Management of intra-operatory periprosthetic fracture in THR
- ✓ Periacetabular osteotomy (PAO) in young patients with hip dysplasia by minimally invasive approach
- ✓ Proximal femoral varization osteotomy (in the femoral neck using Hueter approach)
- √ Hip mosaicplasty technique
- ✓ Hip arthroscopy (outside-in technique) as treatment option for femoroacetabular impingement (FAI), hip instability, and endoscopy for tendinitis of psoas after THR

5. Theoretical knowledge that you learnt during the fellowship

- ✓ Advantages of the anterior minimally invasive surgery: a muscle-sparing and inter-nerve approach that minimizes damage to soft tissues, contributing to a faster patient's recovery, short incision, less dislocation rate and shorter hospital stay.
- \checkmark The importance of restoring the adequate offset besides leg length in THR
- ✓ Advantages of using ceramic-on-ceramic as bearing surfaces in THR
- ✓ Advantages of using bone-sparing implants, like short femoral stems in THR
- ✓ Indications and contra-indications of PAO, hip arthroscopy, mosaicplasty
- ✓ How to manage hip pain in young and active patients



6. New knowledge and skills that you can implement in your own practice

Surely I will apply all the new knowledge and skills I got there in my practice, especially the surgical techniques with tips and tricks of the minimally invasive anterior approach with orthopaedic table for THR. In the setting of hip arthroscopy, the outside-in approach will be very useful to hips with hard traction, usually in cases with an important pincer-type FAI. The PAO surgery for hip dysplasia, the hardest one in my opinion, will take some time to implement in my practice, in the beginning I will need to perform it with supervision of another experienced surgeon. Finally, strategies and techniques for acetabular cup and femoral stem revisions surgeries by minimally invasive anterior approach will be gradually performed as I get more experience and confidence.

7. Overall reflective statement over how the fellowship contributed to your professional development

Professionally and personally, this year has been incredible, and it was really hard to leave Paris, the activities and everyone I met there. I feel really fortunate to have had the opportunity to do this fellowship in hip surgery (joint preservation and replacement) with Dr Frederic Laude. This experience exceeded my expectations in the educational, cultural and social aspects. I have been involved in approximately 180 THR, 15 OPA, 40 hip arthroscopies, 15 revision THR, 2 proximal femoral varization osteotomies and 1 hip mosaicplasty. I learned what I really enjoy and what I want to be doing for the rest of my life. All that developed my knowledge and skills, which I will be able to bring back to my country and will help me to improve my practice.

Acknowledgements

"Thanks" is a small word to express all the gratitude I have to EFORT Foundation and Medacta for giving me this incredible and fantastic opportunity to propel my career. I really appreciate all the support and consideration! A special thanks to Sanni Hiltunen who spared no efforts to help me, especially when I had some bureaucratic difficulties.

Finally, a very special thanks to Dr Laude, who helped me every time I needed, for teaching me and for being so patient with me, as well as helping me improve my French. Thank you for being a great mentor and friend, and a plethora of thanks to all the staff of Clinique du Sport Paris V!