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Country of residence:	Italy
Country of visiting fellowship:	Belgium
Name of the host:	ZNA Middelheim – UZ Leuven
Dates of visiting fellowship:	From 01/09/2018 to 18/01/2019

## Report Visiting Fellowship

### Description of clinical activities during the fellowship

My EFORT Visiting fellowship has been divided into two consecutive periods (3 months + 2 months) and into two different hosting centres for the period September 2018 - January 2019. For the first period of three months the hosting centre was the ZNA Middelheim Hospital of Antwerp, under the direction of Dr. P Mertens and for the second period of two months the University Hospital UZ Leuven under the supervision of Prof. H Vandenneucker.

My clinical activity at the Middelheim Hospital of Antwerp was a really great professional experience, mainly focused on hip and knee surgery and consequently on shoulder and trauma.

Every Monday morning a briefing with the orthopaedic staff members, fellows, residents and nurses allowed to interactively evaluate and discuss the clinic cases planned for the week. At the end of the briefing, a presentation with a review of the literature focused on a topic of particular interest was planned. As a member of the orthopaedic staff I had the occasion to present a short communication of our recent research giving the active contribute to the orthopaedic department of the hospital.

During the period of three months (from 1<sup>st</sup> September to 30<sup>th</sup> November) my surgical activity included 308 surgical procedures (hip and knee, shoulder surgery, foot and ankle, arthroscopic surgery and trauma).

Under the supervision of a senior surgeon I personally performed 83 surgical procedures.

The details of the performed procedures are the following: 46 Total Joint Replacement (29 total knee replacement including medial pivot implants, 15 total hip replacement with anterolateral approach, 1 revision of femoro-patellar joint and conversion to total posterior stabilized knee, 1 unicondilar knee arthroplasty), 31 knee arthroscopies, 1 shoulder arthroscopy, 5 trauma procedures (peritrochanteric fracture, hemiarthroplasty, patellar cerclage, ankle fracture, hardware removal).

From December 2018 to January 2019 my activity at UZ Leuven was precisely organized as well with many interesting and complex cases and several surgical procedures. My surgical activity as assistant included 21 total knee replacement, 12 shoulder arthroscopies, 12 total hip replacement (with direct anterior approach), 4 total hip revisions, 3 femoro-patellar joint replacement, 2 total knee revision, 1 latissimum dorsi transfer, 1 reversed shoulder prosthesis revision, 1 reversed shoulder prosthesis, 1 subscapularis repair and 1 Latarjet.



## Description of scientific activities during the fellowship

During the fellowship I participate to three conferences:

- The "Italian Academy Congress" (21-22 September - Catania - Italy) as lecturer of the oral presentation: "the tranexamic acid in ACL reconstruction, a prospective randomized study".
- The "Allievi di Scaglietti Symposium" (13 October - Milan - Italy) as lecturer of the oral presentation: "Outcome of combined lateral extraarticular tenodesis and ACL revision in professional soccer player".
- The Microport Masterclass cadaveric course (12-14 December - Madrid - Spain) focused on Hip Superpath and Medial Pivot Total Knee implants.

Moreover three scientific papers have been submitted to international peer review journals during the period of the fellowship (from retrospective case series to systematic review of the literature) and are now under review.

## Description of social aspects of the fellowship

This period provided an important opportunity for debate, dialogue and exchange with other colleagues and other educations, giving to me the occasion to be part of a team of a different country.

I evaluate really positively the social relationships established during the whole period of this fellowship and the great sense of hospitality received by the entire staff of both hospitals.

I firmly believe that this aspect has to be considered an example of friendship and cordiality that every hosting centre should have with a foreign colleague.

## Technical skills that you learnt during the fellowship

I learnt the indications and the technical application of medial pivot implant designed knee and the technical skills to have a correct ligament balancing trying on my hands and comparing different instruments and different designs of total knee arthroplasties by different companies.

I learnt the pearls and pitfalls of patellar resurfacing on total knee replacement having the occasion to try and compare different designs of patellar implants.

I improved and perfected the reaming and the positioning of the cup in total hip arthroplasty the tips and tricks for screw positioning and I learnt the technique of rasping of short tapered stems.

I improved and perfected the anterolateral hip approach of the hip and the medial parapatellar approach of the knee also in revision cases.

I learned and improved the use of double row, the use of Mason-Allen stitches for rotator cuff repair and the transtendon repair of PASTA lesions.



## **Theoretical knowledge that you learnt during the fellowship**

An overall improvement of theoretical knowledge about arthroplasty (indications, designs, biomechanics, alignment, stability and balancing).

I learned the pearl and pitfalls of direct anterior approach (DAA) in primary total hip replacement.

## **New knowledge and skills that you can implement in your own practice**

Practical skills of different surgical approaches of the hip (direct anterior approach, Superpath, anterolateral approach) and of the knee (sub-vastus, and mid vastus) in both primary and revision surgery has been tried with the real desire to implement them with larger series starting my clinical practice.

## **Overall reflective statement over how the fellowship contributed to your professional development**

Several aspect could contribute to my professional development. First of them the opportunity to have a direct comparison between many surgeons and different surgical techniques, but also between different hospitals (University Hospital and not) and healthcare systems.

The relationships between international colleagues are very important to build up a network that is really useful for further professional collaborations.

The assessment of the internal arrangement and organization of different hospitals of a different country can be useful to identify criticisms and possibly to solve the organization problems that can occur during professional activities.

Finally to see and assist procedure performed by assistants, other fellows and young surgeons is useful to learn pitfalls, mistakes and way of surgical teaching.

I would like to give special thanks to the EFORT and the Microport for this amazing opportunity and professional experience.