BRITISH HIP SOCIETY

Affiliated to the BOA
35 - 43 Lincoln’s Inn Fields, London WC2A 3PN
Tel: 020 7405 6507. Fax: 020 7831 2676

BRITISH HIP SOCIETY
NEWSLETTER
AUTUMN 2007

Officers :

President - Keith Tucker
Immediate Past President – Colin Howie
Vice-President – Peter Kay
Vice President - Elect:- Ian Stockley
Hon. Sec - John Hodgkinson
Treasurer - John Nolan
Editorial Secretary - Peter Howard
Web page Coordinator – Fares Haddad
Member at Large – John Skinner

CLINICAL EXCELLENCE AWARDS

The BHS has reregistered as a body to recommend members of the Society for Clinical Excellence awards. To be a nominating body a society has to have a certain number of members and thankfully the BHS remains large enough to make nominations.

We have now appointed a panel to review applications and to arrange the BHS nominations in ranking order. The panel is 4 members of the Society plus one lay person and will change annually. It will be the President / the member at large / a recent award holder/ a senior member of the BHS and a lay person.

The panel will use the same criteria as the ACCEA ranking the nominations. Please see more information at www.advisorybodies.doh.gov.uk/acceaa/index.htm

Our nominees in the past have not been as successful as we would have hoped. As a nominating society we are allowed to support 6 Bronze/ 3 Silver and 2 Gold nominations.

It is hoped the BHS nomination process will be completed by the end of December 2007. Therefore the officers of the Society would request that anyone seeking support should submit their applications, fully supported by CV and the relevant ACCEA form completed to the Hon Secretary by the 23rd November 2007 [C/O The Hip Centre, Wrightington Hospital, Appleley Bridge, Wigan, Lancs. WN6 9EP] The panel can then consider the applications and prepare citations well before the closing ACCEA date in January 2008.
BUPA Insurance and Orthopaedics

BUPA Insurance has recently sent a letter and a questionnaire to certain selected orthopaedic surgeons (numbers unclear) requesting information about their private practice arrangements. This document is very similar to documents that preceded BUPA’s unsuccessful attempt to create a restricted network of ophthalmic surgeons and hospitals last year. It contains a detailed request for personal, clinical, professional and financial arrangements of surgeons. Independent hospitals have received similar documentation. It is not known exactly which surgeons have been targeted to receive this letter; possibly it has been sent to consultants working in various forms of “Chambers”. It is worthy of note that the covering letter contains the word “quality” three times, the phrase “value for money” twice, the phrase “financial improvements” once and the phrase “affordable prices” once. This RFI (Request for Information) is to be followed by a RFP (not defined but probably means Request for Pricing).

All consultants should be aware of the true nature of these documents as they carry considerable implications for patient choice, consultant independence and for patient care. The ultimate purpose is to break the consultant/patient contract by developing a limited list of preferred providers who would be locked in to some package price arrangement. This was exactly the purpose of the ophthalmology tender which has been resolutely opposed by ophthalmologists throughout the UK. Ophthalmologists saw through the smokescreen of “quality” and whilst each consultant had to make his/her own decision the overwhelming majority rejected these proposals by BUPA.

Ophthalmology is different to orthopaedics as it is a smaller specialty and the BUPA attack was directed mainly at cataract surgery. Orthopaedics is not only bigger it covers multiple procedures and may therefore be more open to challenges about quality, cost-effectiveness and outcomes. These are matters for professional consideration and will be taken seriously. For the moment you should note that if you have, or if you should, receive any such RFI from BUPA that you are not obliged to return this form.

All orthopaedic surgeons should discuss these matters with close colleagues and they may wish to ask their ophthalmic colleagues about their experience. Orthopaedic surgeons may also need to seek information from elsewhere. The questionnaire run by FIPO some months ago is worth reviewing as it did have a very good return and it expresses very clearly the opinions of nearly 1,000 orthopaedic and ENT consultants. This can be viewed at

http://www.fiopo.org.uk/pdfs/FIPO_2006-11.pdf and more background information about these issues can also be seen on the same FIPO website.

All professional bodies have stressed that quality of care and the maintenance of clinical standards are professional matters and should not become the domain of insurance providers who are financial services companies.

LEEDS MEETING : 28th February – 2nd March 2007

Another well attended meeting that was over subscribed, with lots of interesting discussion. The Royal Armouries at Leeds proved to be an excellent venue, with accommodation conveniently situated and a large lecture theatre. In addition, the staff were helpful and amenable and with good humour were able to ‘magic’ sufficient food at the Dinner for the extra people who turned up at the last minute! Long live the atmosphere of camaraderie that exists in the Society!

Thanks are due to Martin Stone and his team for all their hard work in making the meeting run so smoothly.

Johan Witt again organised the Annual Scientific half day meeting. This year it was on the very topical subject of ‘Femoral Neck Impingement’. The meeting was expected to be for a smallish number but approx 70 delegates turned up! This clearly shows how valuable these meetings are perceived to be in the Hip Society – and rightly so. We are very grateful to Johan for the valuable contribution he makes in organising these meetings annually.
Peter Bobak and Richard Grogan organised the Emerging Hip Surgeons Forum. This is now a well established and important opportunity for young surgeons to meet and discuss cases in a reflective and uninhibited environment. As a Society we must ensure that this type of opportunity is maintained for final year trainees and consultants who have been appointed within the previous 5 years.

Almost 200 delegates attended the main meeting and without any sponsorship we were able to balance the books!

Peter Howard, as our Editorial Secretary, was in charge of the selection of presentations from the podium and posters. We had over 200 applications......keep this up for next year!!

The topics in focus at the main meeting were :-

Total Hip Replacement after DDH
Getting Paid for what we do [PBR]
Polyethylene Acetabular Components

Many thanks to the organisers and all speakers for their contributions.

Our Presidential Guest Lecturer was Dan Berry who gave an excellent presentation on the Prevention and treatment of Dislocation after Total Hip Replacement and who contributed extensively throughout the meeting.

Report on Prizes:

Podium Presentation – B.J.Boland ‘Vibration Assisted Femoral Impaction Bone Grafting’
Poster Presentation – RD Ramiah ‘10 year Life Expectancy after Primary total Hip Replacement’
The MacMinn Bursary was awarded to Alistair Hart
American Travelling Fellowships were awarded to Mukesh Hemmady and James Wimhusrt
British Travelling Fellowships were awarded to Tim Board and Gurdeep Singh Biring.

American Travelling Fellowships 2007 : Report Back

Jim Wimhurst and I were selected for the 2007 British Hip Society travelling fellowship to North America in February 07 after a formal interview process at the annual meeting of the society in Leeds.

We started our travel on the 3rd of September from New York to London Ontario (London Health Sciences Centre) in Canada and then along the east coast of USA to Boston (Massachusetts General Hospital), New York (Hospital for Special Surgery) and to Philadelphia (Thomas Jefferson Hospital). In Philadelphia, knife-to-skin was at 6.30 am and by 1.30 pm they had done eight primary joint replacements. Operating simultaneously in two theatres, the joints were opened and closed by two senior trainees and the Consultant implanted the cementless components. Here, we saw for the first time hip replacements being performed through the Smith-Petersen approach.

Then we travelled to Chicago (Central DuPage Hospital and Rush Medical centre) and met one of the big names in revision surgery, Dr Wayne Paprosky. From Chicago we flew to picturesque Vancouver and then along the west coast to warm Los Angeles and Stanford University in San Francisco. We were the guests of the American Hip Society at their closed meeting in Pasadena, Los Angeles from 20-22nd September, which was a great honour and met some big names in arthroplasty-Ranawat, Engh, Harris, Dorr etc.

Over three weeks we met some famous names in the field of arthroplasty over the last three decades and saw some brilliant facilities especially for research, both basic and clinical. The healthcare system in the USA is predominantly private and in Canada it’s similar to the NHS. They start the day very early(5-6am) and their hip replacements, both primary and revision, are all cementless and the only use of cement we saw was during a resurfacing. As of now, the trend in America is to use cross linked polyethylene with large metal heads (36mm) as the bearing surfaces. They use a variety of approaches and the incisions tend
to be small as one would expect. The senior surgeons are wary of hard on hard bearings i.e. metal on metal and ceramic on ceramic-the latter due to problems with squeaking. However, they are quite happy for the new kid on the block to try them out-too old to try ‘new’ bearings or indeed wise from past failures?? Minimally invasive surgery and computer navigation was no longer in wide use. Trabecular metal was the ‘flavour of the month’ for revision surgery.

It was a once in a life time experience and am grateful to the British and American Hip Societies for giving us this opportunity. The hosts were extremely generous and we were very well looked after. It was a great learning experience and I was particularly impressed by their data collection and research facilities some aspects of which I hope to introduce at Wrightington and I am sure Jim is thinking along similar lines.

For a more detailed account of the fellowship, please visit the British Hip Society website where Jim has maintained a diary.

Mukesh Hemmady
Consultant Orthopaedic Surgeon
Wrightington Hospital

British/European Travel Award Report 2007

Dr Michael Leunig worked with Reinhold Ganz for many years prior to taking up a post at the Schulthess Clinic. Being at the forefront of the development in understanding of hip impingement and its treatment he seemed to be one of the most qualified surgeons to visit to learn about this condition. He has a vast experience of surgical hip dislocation and debridement, hip arthroscopy and arthroplasty. During my visit I scrubbed in for all cases, including many surgical hip dislocations and debridements with labral repair, hip arthroscopies and anterior approach total hip replacements. Dr Leunig is very approachable and his English is excellent so communication is not a problem. He is more than happy to discuss any aspect of hip surgery. All the staff at the clinic were welcoming and friendly. There is definitely no substitute for visiting a centre if you want to learn the latest techniques. Dr Leunig demonstrated the modification of the Ganz flip osteotomy that utilized a step-cut osteotomy to improve stability. I certainly was not aware of this modification in technique form reading the literature.

Zurich is a very pleasant city but also very expensive and it was a struggle to find somewhere to stay, so I would recommend booking accommodation early. As expected, the transport ran like a Swiss clock.

I would certainly recommend a visit to the Schulthess Clinic for anyone who is interested in hip impingement surgery.

Tim Broad

TRAVELLING FELLOWSHIPS 2008

American Travelling Fellows - It is the turn of the BHS to host 2 American Travelling Fellows in 2008. This is a 3 week trip and will culminate in their attending the BOA meeting in Liverpool. The normal format is that they spend 2/3 days at 5 or 6 Centres in the UK. The programme for the Fellows needs to be formulated and if you would like to act as a host and would like them to visit your Centre/Unit please contact John Hodgkinson with your proposal : C/O The Hip Centre, Wrightington Hospital, Applely Bridge, Wigan, Lancs. WN6 9EP *.

British/European Travel Awards - applications are invited from senior SpR’s, Hip Fellows and junior Consultants to apply for a £1500 {max} grant towards travel and accommodation to facilitate the visit to an Orthopaedic Centre of their choice in the year 2008. Two awards only will be available in any one year. The closing date is the 31st December 2007. Applications should be sent with a CV and details of the proposal the John Hodgkinson at the address above *. Applicants will be interviewed in Norwich at the Annual British Hip Society Meeting on 1st March 2008. A decision will be made and communicated at the meeting.
NORWICH MEETING : 27TH February 2008 to 29th February CHAIR : Keith Tucker

27th February : Scientific Meeting in the afternoon
– places limited to 20 – BOOK EARLY !!!!

28TH February: Morning – ‘Emerging Surgeons Meeting’ – SpR’s and junior Consultants
Afternoon – Main Meeting commences

29TH February : All day – Main Meeting continues

Local Organiser – Keith Tucker

Call for papers - deadline 23rd November 2007 details for submission on the BHS website www.britishhipsociety.com

John Hodgkinson
Hon Secretary.