



## MINUTES

### DELEGATES' COUNCIL MEETING INTERNATIONAL FEDERATION OF SOCIETIES FOR SURGERY OF THE HAND

12:00pm, Thursday 14th June 2018  
Room Arkaden 4-5, Tivoli Congress Center  
Copenhagen, Denmark

President Zsolt Szabo opened the meeting at 12:05pm and welcomed all participants to Copenhagen. He encouraged all to contribute within today's discussions and requested that Secretary-General Daniel Nagle chair the meeting.

#### 1. Present

Zsolt Szabo (President; Hungary)	Michael Tonkin (Immediate Past President)
Marc Garcia-Elias (President Elect)	David Warwick (Historian)
Daniel Nagle (Secretary-General)	Raja Sabapathy (Member at Large; India)
Goo Hyun Baek (Sec-General Elect; APFSSH)	
Belinda Smith (Administrative Secretary)	
Eduardo Zancolli (Argentina)	Johan Vehof (Netherlands)
Greg Bain (Australia)	Jan Haugstvedt (Norway)
Anne Lejuene (Belgium)	Piotr Czarnecki (Poland)
Milton Pignataro (Brazil)	Alexandru Georgescu (Romania)
Don Lalonde (Canada)	Munstair Choudhury (Singapore)
Sebastian von Unger (Chile)	Roberto Rosales (Spain)
Jin Bo Tang (Chinese-Speaking Association)	Per Hessman (Sweden)
Luis Naquira (Colombia)	Esther Voegelin (Switzerland)
Karsten Kroner (Denmark)	Yu-Te Lin (Taiwan)
Philippe Bellemere (France)	Levent Yalcin (Turkey)
Joerg van Schoonhoven (Germany; Berlin 2019)	David Newington (UK)
Amir Reza Farhoud (Iran)	Peter Amadio (USA - AAHS)
Pierluigi Tos (Italy)	Steven Moran (USA - ASSH)
Hyun Sik Gong (Korea)	
Alberto Perez (South American Federation)	
Maurizio Calcagni (FESSH)	
Frederick Werner (Hand and Wrist Biomechanics International)	
Bill Seitz (Hand and Wrist Biomechanics International)	
Max Haerle (Berlin 2019)	
David Shewring (London 2022)	
Steven Hovius (ICHOM)	

#### 2. Apologies

Paul Binhammer (Canada)  
Lorena Parra (Chile)  
Gero Meyer zu Reckendorf (France)  
Ali Dianat (Iran)  
Leszek Romanowski (Poland)  
David Tan (Singapore)  
Nazim Karalezli (Turkey)

### 3. Confirmation of previous minutes –7<sup>th</sup> September 2017

*Motion: “To accept the minutes as a true record of the 2017 Delegates’ Council Meeting”*

Proposed: Raja Sabapathy

Seconded: Joerg van Schoonhoven

Carried unanimously

### 4. President’s Report

Zsolt Szabo reported on progress so far this triennium:

- The IFSSH continues to function legally as a tax-exempt entity. The ongoing legal and accounting costs to maintain this status have stabilised at a low level, and the Illinois/US fees required to file the mandatory documents are minimal (USD\$10-\$15).
- The IFSSH has a stable financial background. The majority of societies comply with the annual membership dues to provide the IFSSH with regular income. Expenditure is controlled. The total wealth is >US\$1 million. US\$26,000 has been spent on bursaries and grants, despite being a “non-congress year” – the third largest annual amount provided to education in the history of the IFSSH. ☐
- The officers are working to improve the IFSSH functions and relationships. Two ExCo meetings were held in 2017, along with a lot of internal communications. The CES is working on simplifying the educational sponsorship guidelines and searching for new ways to enhance teaching/support. Relations with FESSH have improved and discussions continue to host a common congress in London in 2022.
- New members continue to be admitted (Chinese-Speaking Association brings a large region to the IFSSH) and communication is free to the individuals within the IFSSH member society through the ezine, newsletters and website. The IFSSH is a club of hand surgeons and affiliated members and this communication is all for the benefit of the members.

Zsolt Szabo noted that other aspects could be improved upon, and the IFSSH ExCo wishes to work towards improvement of these:

- The active participation of Delegates is sub-optimal. There is a pleasing number of Delegates at today’s meeting, however there are many societies not represented. Delegates need to ensure active participation year-round, not just at the annual meeting. Communication should be frequent and encouragement of IFSSH activities and sponsorships should be shared with the society members.
- The CES needs to receive higher quality applications. When each society pays dues they should not require a return for their donation, but should be pleased that the wealth is being shared with those who apply for educational sponsorship. The wealthier societies should do as much as possible to support those who wish to apply.
- Young hand surgeons should be involved in the IFSSH. IFSSH Delegates are asked to encourage this demographic to attend IFSSH Congresses, seek educational support and propose ideas to the IFSSH.
- There are regions of the world not represented in the IFSSH, often because the countries within do not have a national hand surgery society. The ExCo has been discussing strategies to include e.g. the Pan-African region.
- Congresses must be affordable to all. This has been discussed with the chairs of Berlin 2019 and London 2022.

- The Pioneer process needs to be efficient and nominees must be worthy of the honour.
- The scientific committee system remains problematic. These were an IFSSH function within the original bylaws, which were written prior to the availability of the internet and online medical libraries. The IFSSH should not promote personal opinions, yet articles on evidence based medicine and systematic reviews are now common in the literature. The IFSSH should not be duplicating work that is now easily performed by individuals, or try to recreate work that is already available. It is not the aim of the IFSSH to create knowledge, but rather to make it available to all who can benefit. Delegates were asked to consider alternatives at an appropriate level of science for the IFSSH's membership.

Zsolt Szabo announced to the Delegates that the ExCo has decided that the IFSSH bylaws should be updated within the next year as there are many areas that could benefit from revisions. For example, if a change is to be made to the Scientific Committee role/process, this would need an alteration to be made to the bylaws. The Berlin 2019 meeting would be an appropriate time to introduce these. Therefore, the proposed bylaws must be distributed 3 months prior (i.e. March 2019) for a vote to occur in Berlin.

All Delegates are asked to consider the current bylaws (available on IFSSH website – [www.ifssh.info](http://www.ifssh.info)) and forward any suggestions to the ExCo by December 1<sup>st</sup> 2018 (via [administration@ifssh.info](mailto:administration@ifssh.info)).

## 5. Secretary-General's Finance Report

A summary of IFSSH finances from 2008-current ([Appendix 1](#)) was provided to Delegates in advance. No questions were forthcoming.

Daniel Nagle advised that the IFSSH holds a treasury of approximately US\$1,000,000. Half of this is with Wells Fargo in a bank account gaining no interest, the other half is invested with Fidelity (via Chris Crenshaw, Advisor, North Carolina). The IFSSH ExCo has a responsibility to keep 3 years worth of working funds available in the bank account. However, at approximately \$100,000/year, this leaves a \$200,000 excess that is not gaining interest. This will be moved to the Fidelity investment account in the near future.

The return on the investment account since 2009 has been 5.25%. The current advisor's fee is 0.25%, which is reasonable. The remaining 5% gain should be put back into educational sponsorship or spent on items in line with the IFSSH aims, with the Delegates' agreement.

Zsolt Szabo advised that one use of funds for educational sponsorship will be raised later in the meeting, when Steven Hovius will be invited to address the Council with a proposal from the International Consortium for Health Outcomes Measurement (ICHOM). In brief, a hand surgery set of outcomes is under development and Steven Hovius will chair this sub-section of ICHOM work. The ExCo has discussed this and agree that a worldwide, inclusive group working on this topic should be supported as current measurement tools are unsatisfactory and being used often inappropriately across a broad range of hand surgery conditions. To date, groups such as FESSH, BSSH, the Dutch Society and smaller organisations have pledged funds to the ICHOM Hand Surgery project – a total of US\$150,000 is needed. The ExCo considered that a symbolic sum of \$10,000 may be appropriate. A financial contribution also allows members to gain access to the

completed work. Following Steve Hovius' presentation, Delegates will be asked for their views on supporting the project and if the IFSSH should provide formal endorsement (in principle and/or financial).

## **6. Committee for Educational Sponsorship (CES) Report**

Daniel Nagle advised Delegates that the composition of the CES was altered following the 2017 San Francisco meeting to allow for consistency between trienniums. The President Elect (currently Marc Garcia-Elias) now chairs the committee of the Secretary-General Elect (Goo Hyun Baek) and Member-at-Large (Raja Sabapathy). He reminded the Delegates that this is the committee that achieves the IFSSH goals and requests for support should be sought from society members. Applications must be for deserving projects as they are assessed in a competitive system.

In 2018 the IFSSH CES, with the ExCo's approval, has supported the following projects:

- *Fellowship assistance - Dr Mohamed Abdelrahman, Sudan*  
Dr Abdelrahman, a Sudanese plastic surgeon, requested financial support from the IFSSH to allow him to undertake a hand surgery fellowship in China. This was endorsed by the Association of Chinese-Speaking Hand Surgeons United to fulfil the criteria of involvement of an IFSSH member nation. The IFSSH provided US\$10,900 to go towards supporting Dr Abdelrahman's travel/living expenses and the purchase of loupes. Dr Abdelrahman has successfully applied for the Shandong fellowship, commencing in August 2018. Reports will be provided throughout his fellowship.
- *Esser Masterclass – Dr Michael Zuidam, Netherlands*  
On behalf of the Rotterdam group that conduct the Esser Masterclass series, Dr Zuidam applied to the IFSSH CES for assistance with the shortfall in their budget for a set of courses (that will continue to be held annually) as well as the establishment of an educational platform so that those who could not participate in the courses could still access the information. The IFSSH provided US\$10,000 but requested that an emphasis be placed on using these funds to reduce the registration fee for those in need of financial assistance. Some of the funding can assist with the educational platform to make their course content more widely available, and discussions are continuing with the CES regarding the best method for the reduction in registration fees.

Two further applications are undergoing review:

- Australian/English mission to Vietnam, request for loupes to leave with Vietnamese surgeons – Dr Richard Lawson, Australia
- Swiss/American request re meeting for outcome measure consensus – Dr Esther Voegelin, Switzerland, and Dr Ronit Wollstein, USA.

The IFSSH Harold Kleinert Visiting Professorship is open for applications. The IFSSH relies on delegates to coordinate these applications. These should involve a relevant education course/congress and an appropriate Professor for the needs of the participants. Supporting a Professor to provide lectures on new technologies in disadvantaged areas is not a worthwhile use of IFSSH funds, so applicants should carefully consider their audience and facilities before applying to the IFSSH.

The guidelines for all methods of IFSSH educational support are available on the website – [www.ifssh.info](http://www.ifssh.info).

## 7. Historian's Report

David Warwick provided his Historian's Report ([Appendix 2](#)). The retrospective archiving work is complete and the focus is now on moving the appropriate documents to the website to be available to the public. Those for IFSSH use only will remain in the current Dropbox archive system.

All Delegates have been asked to provide the IFSSH with an up-to-date history of their society. These will be placed on the new IFSSH website, in combination with *Hand Surgery Worldwide*. The following societies are yet to forward histories:

AASH, Bangladesh, Belgium, Bolivia, Brazil, Bulgaria, Canada, Chile, Czech Republic, Denmark, Dominican Republic, Egypt, Indonesia, Iran, Israel, Italy, Japan, Korea, Kuwait, Lithuania, Malaysia, Mexico Sociedad, Netherlands, New Zealand, Norway, Poland, Portugal, Puerto Rico, Romania. Russia, Singapore, Slovakia, South Africa, Spain, Sweden, Taiwan, Turkey, Uruguay.

These can be forwarded directly to David Warwick or via [administration@ifssh.info](mailto:administration@ifssh.info).

## 8. IFSSH Communications

### ▪ Website update

David Warwick reported that the IFSSH is aware that modern social media must be used to engage with Delegates and society members, as well as the public.

Santhosh Kumar, the IFSSH webmaster, has prepared a new website to replace the current version. This will include all information currently available as well as a large portion of the archives. It will also emphasise the educational component of the IFSSH, with a portal of hand surgery information and the details of IFSSH educational support opportunities. This educational portal will include the existing Scientific Committee reports and links to resources such as the Nottingham evidence based hand surgery website, as well as a "tips and tricks" from a number of hand surgeons on their specialty topics.

A preview of the website was shown to the Delegates.

### ▪ Social media

In recent months, an IFSSH Twitter account - [@IFSSHHand](#) - has been established by David Warwick and two colleagues, Zaf Naqui and Max Horwitz. This now has 105 followers. Delegates were asked to follow this account and share information placed on it. David Warwick and the social media group will tweet news approximately once a week and this will relate to IFSSH activities e.g. Berlin 2019 updates.

David Warwick noted that Instagram is another social media platform that may be of use, particularly popular in South America and with younger audiences. Delegates were asked if any use this service and, with a number of positive replies, David Warwick agreed that an Instagram account should be established by the IFSSH social media group.

### ▪ Ezine

Daniel Nagle delivered the report submitted by Prof Ulrich Mennen, Ezine Editor:

*The last issue of the IFSSH Ezine was published in May 2018 (#30).*

*Since its inception in February 2011, we have published every 3 months (February, May, August, November). All previous issues are on the IFSSH website (ifssh.info).*

*I would like to remind the IFSSH Exco as well as the Delegates and all the Members of the IFSSH and IFSHT Member Societies that the Ezine is their international communication medium. To this end we would like to again encourage contributions which are informative and interesting.*

*Regular contributions from the Exco are also to be expected for all Members to know what is going on with the Societies and Federation to which they contribute financially. I do believe it is the inherent duty and obligation of the Exco to communicate with the paying Membership.*

*I would further like to request a concerted effort by all to use their contacts with the Trade to consider advertising in the Ezine.*

*Finally, any feedback on the quality and/or contents will be appreciated.*

*With sincere regards,*

*Ulrich*

*Ulrich Mennen*

*Editor: IFSSH Ezine*

*Past President: IFSSH*

The Delegates agreed that the ezine was a very worthy component of the IFSSH and passed thanks to Ulrich Mennen.

#### ▪ **Newsletter**

Daniel Nagle informed the Delegates that newsletters continue to be published regularly. Four are written per year and are placed in the JHS (American), JHS (Asian-Pacific) and the IFSSH ezine.

In 2018, the JHS (European) has also agreed to publish these newsletters on their website - [http://journals.sagepub.com/page/jhs/ifssh\\_newsletters](http://journals.sagepub.com/page/jhs/ifssh_newsletters).

## **9. IFSSH Nominating Committee Report, including Pioneers of Hand Surgery**

Michael Tonkin presented a summary of the role of the IFSSH Nominating Committee. This Committee is composed of the Immediate Past President (Michael Tonkin, Chair), prior Past President (Ulrich Mennen), current President (Zsolt Szabo) and Member-at-Large (Raja Sabapathy). It has two main roles: to oversee the ExCo nominations/elections and to assess the Pioneer applications.

#### ▪ **ExCo nominations**

Michael Tonkin explained that, according to the bylaws, the following positions are offered for election at the 2019 Delegates' Council Meeting: President Elect, Secretary-General Elect, Historian (is a 3 year term, can be extended for a second term), and Member-at-Large (is a 3 year term and must step down after this). The bylaws do not specify a deadline for nomination. This can occur from the floor of the Delegates' Council Meeting. The only proviso is that the nominee provides agreement that they will accept the role, prior to a vote (if required). Election occurs following a majority vote of the Delegates' Council.

As discussed in the President's report (refer to Item 4), the bylaws will be revised in 2019. This ExCo nomination system should be refined at the same opportunity. It may be appropriate to make all submission dates (Pioneer nominations, congress host bids, and ExCo nomination deadlines) the same, for ease of administration – e.g. 3 or 6 months prior to the Council meeting. The ExCo, with delegate input, will provide a set of draft bylaws that incorporate this and circulate as required prior to the Berlin Council Meeting.

Zsolt Szabo asked that Delegates consider the nomination system and, while working towards the change in bylaws, come to an informal agreement today that ExCo nominations for consideration at the Berlin 2019 meeting must be submitted to the Nominating Committee (via [administration@ifssh.info](mailto:administration@ifssh.info)) no later than December 17<sup>th</sup>, 2018 (i.e. 6 months prior to the meeting date, and the same date as the Pioneer nomination deadline). This was accepted unanimously.

▪ **Pioneer nominations**

The second responsibility of the Nominating Committee is to coordinate the Pioneer of Hand Surgery honours. Michael Tonkin reminded Delegates that the honour of Pioneer is one associated with exceptional achievement and this system commenced in 1986 (those honoured prior to that posthumously were termed “Giants”).

The Pioneer system is discussed regularly, with concern over the nomination process and the number of Pioneers inducted each triennium. However, the delight seen on the faces of those honoured in Buenos Aires has reinforced the importance of this honour and the ExCo have recommended that this system continue and the title remain. The title of Pioneer is still relevant as those awarded have contributed to the ongoing advancement and refinement of this field.

To ensure this honour is bestowed upon only the most worthy, Delegates were asked to discuss nominations with their society’s executive committee and submit nominations of internationally renowned, exceptional hand surgeons who have conducted their career in an outstanding manner. Those surgeons who make national contributions should instead be honoured by their societies at the national level. These awards are provided by the IFSSH at an international congress and reflect international careers.

Michael Tonkin reminded Delegates of the Pioneer nomination process:

- Nominees must have provided exceptional contribution to hand surgery
- Nominees must be aged 70 or over by 17th June 2019, or deceased
- Society must recommend and include a letter of nomination detailing the reasons and addressing the selection criteria, plus three letters of recommendation from peers; an abbreviated CV of three pages maximum (including date of birth); a photograph; and contact details of the nominee (or family member if deceased).
- Submissions to Nominating Committee via [administration@ifssh.info](mailto:administration@ifssh.info) by 17th December 2018.
- Nominations are assessed by the IFSSH Nominating Committee and decisions forwarded to the nominating society.

A checklist has been prepared and will be placed on the website. This should accompany all submissions. This process has been published in the May 2018 Newsletter and Ezine. The article includes historical content and has an emphasis on nominees having provided exceptional contributions to hand surgery. A further reminder will be placed in future newsletters.

## **10. IFSSH Scientific Committees**

Refer to Item 4: President’s Report

## **11. 14<sup>th</sup> IFSSH Congress - Berlin, 2019**

Joerg van Schoonhoven displayed a summary of the Berlin 2019 Congress ([Appendix 3](#)). He provided an invitation to all Delegates to join the congress, which will be held 17<sup>th</sup>-21<sup>st</sup> June 2019 at Berlin's CityCube. This is a new congress centre, able to hold >5000 participants, centrally located and with a tram stop immediately outside. The official congress hotel will be the Ritz Carlton.

The Berlin Organising Committee is chaired by 4 Congress Presidents - Joerg van Schoonhoven, Max Haerle, Natascha Weihs and Andreas Eisens.

The IFSSH & IFSHT Congress will be joined by FESSH, as they will not host their own regional meeting during 2019. Facilities will be provided to FESSH for their business meetings, diploma examination and instructional courses.

Two combined scientific sessions are being planned with the IFSHT. The full scientific programme is being examined, with 25 main topics identified for inclusion.

The Berlin organisers have written to IFSSH Delegates to ask for speaker suggestions for symposia. Abstract submission for free paper submissions opened in March. Joerg van Schoonhoven appealed to the IFSSH Delegates to communicate with their society members and encourage submissions, as well as communicating directly with the Berlin chairs to provide names of distinguished society members for symposia.

A congress booth is present at the Copenhagen meeting in the exhibit hall. Intercongress, the PCO that will organise the Berlin meeting, are available at the booth to discuss any ideas and provide information.

Joerg van Schoonhoven explained that the Berlin organisers have encountered a hurdle: Under German rules, the organising committee/PCO are not allowed to directly contact individuals unless they sign up directly to receive communication. To date the organisers have been communicating via society delegates with newsletters second monthly, but are unsure if messages are passed on to the individual society members, and some IFSSH Delegates have been uncontactable. Joerg van Schoonhoven stressed that this is an IFSSH congress for IFSSH participants and it needs IFSSH Delegate assistance with the flow of communication.

The IFSSH President and Secretary-General, along with the IFSHT President, will travel to Berlin immediately after this Copenhagen FESSH meeting to undertake the site visit.

## **12. 15<sup>th</sup> IFSSH Congress – London, 2022**

David Shewring joined the Delegates' Council to present an update of the London 2022 Congress ([Appendix 4](#)). He described that the IFSSH, BSSH and FESSH were all supportive of hosting a common congress and discussions of the details have commenced. The FESSH collaboration will include the diploma, Council meeting, educational day and business meetings, amongst other items.

The dates of 27<sup>th</sup> June - 1<sup>st</sup> July 2022 have been booked to allow for refinement when nearer to the congress. The QEII Conference Centre has been booked as the venue. This is central, being located in Westminster.

London is an accessible city with flights and land transportation readily available. Transport within London is frequent and easy to navigate. All museums in the UK are free.



Accommodation in London can be expensive. The timing of the meeting is within the UK summer holidays and student accommodation is being explored as an option for low-cost congress accommodation. Registration costs will also be examined to be as cost-effective as possible.

The BSSH would welcome input in the planning from regional Delegates. If interested, please contact David Shewring.

### **13. 16<sup>th</sup> IFSSH Congress**

Daniel Nagle advised the Delegates' Council that there has been interest to host the 2025 Congress in "the Americas" from the AAHS and AASH (combined application), Brazil and Colombia.

The guidelines specify that: *"The societies which are applicants must submit a formal petition to the Secretary General at least three months ahead of the Council meeting. The same documentation should be sent to each member country delegate and IFSH representative for evaluation at least three months before the Council Meeting."*

It is the society's responsibility to follow these instructions. All Delegate details are available on the IFSSH website. The deadline for distribution of bids is March 25, 2019.

### **14. Business Arising from Executive Committee Meeting**

#### **▪ ICHOM overview**

Steven Hovius joined the Delegates' Council to explain the ICHOM Hand Surgery project – [Appendix 5](#).

ICHOM is an independent organisation. The aim of this project is to compile a minimum set of hand surgery outcome measures that are relevant to particular diagnoses. An international working group has been established for the hand surgery project (approximately two-thirds are surgeons, one-third are therapists). At the end of the ICHOM project, a flyer, reference guide and a outcome set will be available. Those involved (in user groups, as well as financial supporters) will be provided with access to download these documents.

Financial sponsorship has been provided so far by the Xpert Clinic (Netherlands), the British Society, Dutch Society and FESSH. US\$150,000 is required in total.

Delegate questions/comments included:

- the inclusion of culture and language? Steven Hovius described that it is important to establish a minimum set for use worldwide, rather than specific regional/cultural sets that are not comparable. Additional outcome measures can always be added by individuals, but the core set should always be undertaken. The programme will be provided in a number of languages.
- why needed when a number of scoring systems already? ICHOM wishes to introduce a recommended set worldwide to remove the range of outcome measures currently used, many of which are not appropriate for particular conditions, not validated under particular circumstances/languages, and not comparable across practices.
- who owns the data? Ownership of the data remains with the surgeon.

- how can surgeons get involved? The working group has been established. Suggestions regarding the process/sets are welcome and can be forwarded to Steven Hovius (via [administration@ifssh.info](mailto:administration@ifssh.info)) and will be considered during the development of the sets.

Zsolt Szabo asked the Delegates:

- 1) Should this ICHOM Hand Surgery project be endorsed by the IFSSH? Delegates were in unanimous agreement that it should be endorsed.
- 2) Should the IFSSH financially support this project? Delegates were in unanimous agreement that it should be financially supported.
- 3) Would the previously discussed suggestion of US\$10,000 be appropriate? Delegates were in unanimous agreement that \$10,000 be provided to the ICHOM Hand Surgery project.

Steven Hovius thanked the IFSSH Delegates' Council for their endorsement and assistance. He reinforced that the value of this project lies with the number of surgeons/therapists who will use it, and asked that all Delegates endorse this project within their national societies.

## **15. New business**

Nil raised

## **16. Submitted reports – IFSSH Allied Organisations**

The IFSSH Allied Organisations were invited to attend the Delegates' Council Meeting and submit a written report for inclusion in the minutes.

Paco Pinal advised that IPRAS is non-operational as they are immersed in a legal issue.

Reports were submitted by:

- International Federation of Societies for Hand Therapy (IFSHT) – [Appendix 6](#)
- Asia-Pacific Federation of Societies for Surgery of the Hand (APFSSH) – [Appendix 7](#)

## **17. Next meeting of the Delegates' Council**

2019 – IFSSH Congress: June 17-21, Berlin, Germany

Meeting closed 1:40pm



# APPENDIX 1

IFSSH Funds  
30th June 2006 - 30th April 2018

	PERIOD ENDING												
	June 30, 2006	December 31, 2007	December 31, 2008	December 31, 2009	December 31, 2010	December 31, 2011	December 31, 2012	December 31, 2013	December 31, 2014	December 31, 2015	December 31, 2016	December 31, 2017	April 30, 2018
<b>OPENING BALANCE (US\$)</b>													
Wells Fargo #1		178,469.94	207,934.27	271,238.34	320,018.21	378,457.80	403,121.69	383,725.79	437,624.90	416,992.11	347,723.23	440,886.62	516,551.86
Wells Fargo #2			0.00	0.00	0.00	0.00	10,955.75	1,188.75	2,120.75	1,961.75	1,817.75	1,781.75	1,781.75
Fidelity			479,003.40	307,683.67	401,760.92	426,334.49	421,690.43	460,416.18	485,313.05	537,710.27	528,355.15	515,925.87	590,862.79
<b>INCOME (US\$) - Wells Fargo #1</b>													
Membership fees		19,439.00	97,773.42	78,814.42	51,829.92	77,115.02	73,307.91	87,746.85	71,844.21	80,189.37	93,027.46	78,379.17	2866.50
IFSSH Congress		44,919.04	0.00	0.00	100,300.00	0.00	0.00	50,000.00	14,221.57	0.00	89,960.00	106,490.30	0.00
Ezine		0.00	0.00	0.00	0.00	N/A - See Wells Fargo #2				1,635.00	2,600.00	1,300.00	1,000.00
Interest - Wells Fargo Bank		4,122.37	2,009.35	97.10	23.73	55.61	37.13	37.74	13.26	0.00	0.00	0.00	0.00
Merchandise		100.00	0.00	0.00	0.00	0.00	0.00	600.00	0.00	0.00	0.00	0.00	0.00
Misc		4,913.90	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4629.16
<b>Total</b>		<b>73,494.31</b>	<b>99,782.77</b>	<b>78,911.52</b>	<b>152,153.65</b>	<b>77,170.63</b>	<b>73,344.42</b>	<b>138,383.98</b>	<b>87,738.52</b>	<b>82,802.63</b>	<b>184,287.46</b>	<b>185,869.47</b>	<b>8,495.66</b>
<b>INCOME (US\$) - Wells Fargo #2</b>													
Ezine sponsorship		N/A - Opened 2011				17,975.00	0.00	1,088.00	N/A - see Wells Fargo #1				
Misc (Incorrect acct for deposit)		N/A - Opened 2011				9,650.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
<b>Total</b>		<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>27,625.00</b>	<b>0.00</b>	<b>1,088.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>
<b>EXPENDITURE (US\$) - Wells Fargo #1</b>													
IFSSH Congress		7,596.33	0.00	0.00	67,285.90	0.00	5,283.15	17,410.00	40,000.00	54,889.96	5,053.60	7,080.82	1242.00
Executive Expenses		31,375.61	21,457.35	29,762.91	22,975.79	36,104.22	25,096.00	23,667.25	18,230.19	21,926.69	19,879.93	36,218.45	11403.47
Secretariat		Included in Executive Travel/Wages											
Bursaries and Grants		0.00	15,000.00	0.00	2,850.00	15,000.00	40,999.99	15,050.00	19,350.00	35,000.00	9,500.00	26,000.00	0.00
Ezine		0.00	0.00	0.00	0.00	See Wells Fargo #2		6,000.00	12,459.00	11,729.98	11,025.29	22,511.48	19,784.44
Lawyer/Accountant Services		N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	14,123.38	18,571.33	2,435.81	354.00
Bank fees - Wells Fargo Bank		144.14	21.35	368.74	602.37	1213.52	2,086.49	2,107.67	3,132.51	2,412.86	2,129.30	1,674.61	538.87
Misc		4,913.90	0.00	0.00	0.00	189.00	13,274.69	2,046.75	2,297.91	0.00	1490.22	1050.00	1050.00
<b>Total</b>		<b>44,029.98</b>	<b>36,478.70</b>	<b>30,131.65</b>	<b>93,714.06</b>	<b>52,506.74</b>	<b>92,740.32</b>	<b>84,484.87</b>	<b>108,371.31</b>	<b>152,071.51</b>	<b>91,124.07</b>	<b>110,204.23</b>	<b>24,683.83</b>
<b>EXPENDITURE (US\$) - Wells Fargo #2</b>													
Editorial / layout set up fees		N/A - Opened 2011				16,526.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Bank Fees - Wells Fargo Bank		N/A - Opened 2011				143.25	117.00	156.00	159.00	144.00	36.00	0.00	0.00
Misc (Incorrect deposit reversed)		N/A - Opened 2011				0.00	9,650.00	0.00	0.00	0.00	0.00	0.00	0.00
<b>Total</b>		<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>16,669.25</b>	<b>9,767.00</b>	<b>156.00</b>	<b>159.00</b>	<b>144.00</b>	<b>36.00</b>	<b>0.00</b>	<b>0.00</b>
<b>FIDELITY INVESTMENTS (US\$)</b>													
Change in Investment Value				97,368.25	28,599.47	-349.96	43,678.12	30,568.59	58,475.77	-15,744.35	-6,062.87	81,021.51	-6645.03
Advisor Fees				3,291.00	4,026.00	4,294.00	4,703.51	4,985.38	5,189.29	5,353.00	5,366.20	5,418.00	2926.00
Transaction Costs & Charges				Within advisor fee	Within advisor fee	Within advisor fee	Within advisor fee	Within advisor fee	Within advisor fee	93.98	83.53	105.57	11.19
Taxes Withheld				Within advisor fee	Within advisor fee	Within advisor fee	248.86	686.34	889.26	721.71	916.68	561.02	360.51
<b>Total Change</b>				<b>94,077.25</b>	<b>24,573.47</b>	<b>-4,643.96</b>	<b>38,725.75</b>	<b>24,896.87</b>	<b>52,397.22</b>	<b>-21,913.04</b>	<b>-12,429.28</b>	<b>74,936.92</b>	<b>-9,942.73</b>
<b>CLOSING BALANCE (US\$)</b>													
Wells Fargo #1		207,934.27	271,238.34	320,018.21	378,457.80	403,121.69	383,725.79	437,624.90	416,992.11	347,723.23	440,886.62	516,551.86	500,363.69
Wells Fargo #2		0.00	0.00	0.00	0.00	10,955.75	1,188.75	2,120.75	1,961.75	1,817.75	1,781.75	1,781.75	1,781.75
Fidelity Investments		479,003.40	307,683.67	401,760.92	426,334.39	421,690.43	460,416.18	485,313.05	537,710.27	528,355.15	515,925.87	590,862.79	580,920.06
Fidelity % change from previous year		-171,319.73	94,077.25	24,573.47	24,573.47	-4,643.96	38,725.75	24,896.87	52,397.22	-9,355.12	-12,429.28	74,936.92	-9,942.73
Fidelity % change from previous year		-35.77	30.58	6.12	-1.09	9.18	5.41	10.80	-1.74	-2.35	14.52	-1.68	
<b>Total Funds (US\$)</b>	<b>584,252.37</b>	<b>686,937.67</b>	<b>578,922.01</b>	<b>721,779.13</b>	<b>804,792.19</b>	<b>835,767.87</b>	<b>845,330.72</b>	<b>925,058.70</b>	<b>956,664.13</b>	<b>877,896.13</b>	<b>958,594.24</b>	<b>1,109,196.40</b>	<b>1,083,065.50</b>



# IFSSH Historian Report Council Meeting June 2018



## Social Media

- Twitter account [@IFSSHHand](#)
  - Zaf Naqui (Manchester) Max Horwitz (London) David Warwick
  - Weekly additions
- Instagram
  - Do delegates see a demand for Instagram- VOTE PLEASE



## Website

- Much improved front page
- New additions from Historian
  - **Archives** Tab
    - To include all archives on Dropbox
    - Delegates meetings minutes
    - Pioneers Book
    - Hand Surgery Worldwide
    - IFSSH Members History
  - **Education Portal**
    - **Centre for Evidence Based Medicine** (Nottingham)
    - <https://www.jiscmail.ac.uk/HAND-SURGERY-EVIDENCE-UPDATES>
    - Monthly update of all systematic reviews in hand surgery



## Hand Surgery Worldwide on Website

- Difficult to trace permission
  - We have asked Editor
    - no response
  - Now contacted publisher directly
    - No response
- If we get permission put icon on **Archive** page of website



## Updated Histories for website

- I have asked all IFSSH reps and Presidents to contribute
  - Responses from:
    - ASSH, Argentina, Australia, Austria, Belgium, China (ACSU), Colombia, France, Germany, Guatemala, India, Mexico Association, Philippines, Switzerland, Thailand, United Kingdom, Venezuela,
  - Yet to hear from
    - AASH, Bangladesh, Belgium, Bolivia, Brazil, Bulgaria, Canada, Chile, Czech Republic, Denmark, Dominican Republic, Egypt,



- Indonesia, Iran, Israel, Italy, Japan, Korea, Kuwait, Lithuania, Malaysia, Mexico Sociedad, Netherlands, New Zealand, Norway, Poland, Portugal, Puerto Rico, Romania. Russia, Singapore, Slovakia, South Africa, Spain, Sweden, Taiwan, Turkey, Uruguay,
- o Will edit and put on new website once the structure is ready

## IFSSH Ezine

- Historian Report in Ezine August 2018

## IFSSH Archives

- Management of Archive
  - o Articles of interest moved to website
  - o Rest on Dropbox
  - o Data recovery system?

## Requests from Delegates from Historian

- Follow [@IFSSHHand](#)
- Send me any material you would like to distribute by Twitter
  - o National meetings, national achievements etc
  - o [@HandWrist](#) or [davidwarwick@handsurgery.co.uk](mailto:davidwarwick@handsurgery.co.uk)
- Subscribe to Hand Surgery Evidence Updates
- Send me your Society history for inclusion on website
- Send ideas for



David Warwick

## APPENDIX 3



Building Bridges – Together Hand in Hand  
Berlin, Germany | 17-21 June 2019

**INTERNATIONAL SOCIETIES**  
International Federation of Societies for Surgery of the Hand (IFSSH)  
International Federation of Societies for Hand Therapy (IFSHT)

**LOCAL HOST SOCIETIES**  
German Society for Hand Surgery (DGH)  
German Society for Hand Therapy (DAH+TH)

**COMBINED FESSH CONGRESS**  
Federation of European Societies for Surgery of the Hand (FESSH)  
European Federation of Societies for Hand Therapy (EFSHT)

Building Bridges – Together Hand in Hand  
Berlin, Germany | 17-21 June 2019

**„Together Hand in Hand“: the presidential group**

Prof. Jörg van Schoonhoven Industry & General Coordination	Natascha Weihs Coordination Therapists
Prof. Max Haerle Scientific Programme	Prof. Andreas Eisenschek Events & Social Programme

Building Bridges – Together Hand in Hand  
Berlin, Germany | 17-21 June 2019

**„Together Hand in Hand“: PCO Intercongress**

**Denise Schuler**  
Congress & general coordination  
+49 761 69699-242  
denise.schuler@intercongress.de

**Thomas Miltz**  
Industry management  
+49 611 97716-10  
thomas.miltz@intercongress.de

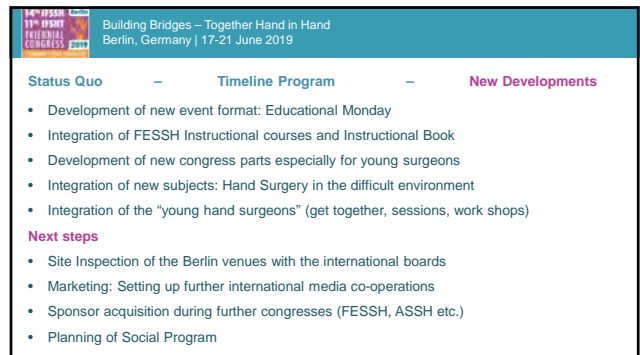
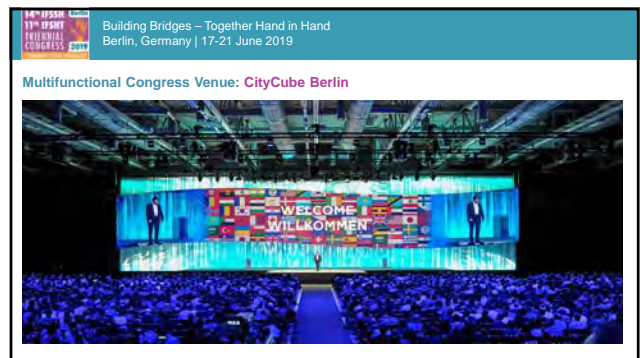
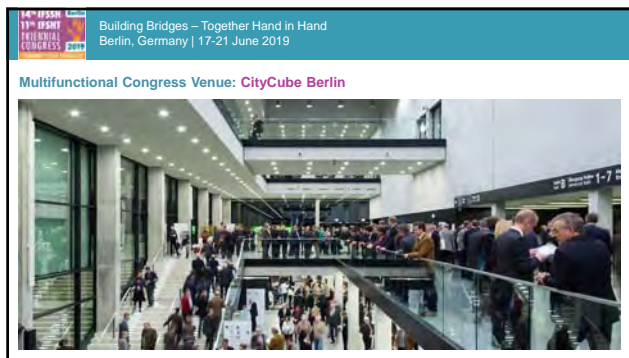
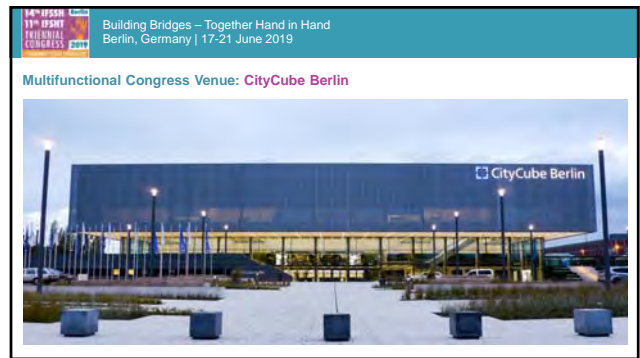
Building Bridges – Together Hand in Hand  
Berlin, Germany | 17-21 June 2019

**Status Quo – Timeline Program – New Developments**

- Arrangement of 25 main Congress topics
- Setting up of Preliminary Program Schedule
- Definition of Congress and Event locations as well as official Congress Hotel
- 2.555 m² Exhibition space, Congress capacity for 5.410 participants, 135 reserved rooms in the Congress Hotel Ritz Carlton, Capacity for 600 participants in the Grand Ballroom of the Ritz Carlton
- Conversations and meetings with potential industry partners and personal acquisition of first official diamond sponsor
- Contacting of 56 societies worldwide for setting up the international Scientific Committee
- Result: around 260 international experts in the Scientific Committee
- Abstract submission started on 1<sup>st</sup> March 2018
- Ongoing additional contact to international experts to set up planned sessions



	Monday, 17 June	Tuesday, 18 June	Wednesday, 19 June	Thursday, 20 June	Friday, 21 June
7:30	Registration	Registration	Registration	Registration	Registration
8:00		Continental Breakfast #FSSH & FFSH	Continental Scientific Sessions	Continental Scientific Sessions	Continental Scientific Sessions
8:30					
9:00		Coffee Break	Coffee Break	Coffee Break	Coffee Break
9:30					
10:00	Subcommittee Meeting	Continental Scientific Sessions	Continental Scientific Sessions	Continental Scientific Sessions	Continental Scientific Sessions
10:30					
11:00		Presidential Address	Continental Scientific Sessions	Continental Scientific Sessions	Continental Scientific Sessions
11:30					
12:00					
12:30					
13:00	Lunch Break	Continental Scientific Sessions	Continental Scientific Sessions	Continental Scientific Sessions	Continental Scientific Sessions
13:30					
14:00					
14:30					
15:00					
15:30					
16:00					
16:30					
17:00					
17:30					
18:00					
18:30					
19:00					
19:30					
20:00					
20:30					
21:00					
21:30					





Building Bridges – Together Hand in Hand  
Berlin, Germany | 17-21 June 2019

### Important Dates

Registration	opened 1 March 2018
Abstract Submission	1 March - 30 September 2018
Preliminary Program	December 2018
Early Bird Registration	until 28 February 2019

Stay up-to-date and sign up for the IFSSH & IFSHT Congress Newsletter on  
[www.ifssh-ifsht2019.com](http://www.ifssh-ifsht2019.com)



Building Bridges – Together Hand in Hand  
Berlin, Germany | 17-21 June 2019

### Important Dates

Registration	opened 1 March 2018
Abstract Submission	1 March - 30 September 2018
Preliminary Program	December 2018
Early Bird Registration	until 28 February 2019

Stay up-to-date and sign up for the IFSSH & IFSHT Congress Newsletter on  
[www.ifssh-ifsht2019.com](http://www.ifssh-ifsht2019.com)



APPENDIX 4





IFSSH & IFSHT 27<sup>th</sup> June – 1<sup>st</sup> July 2022



IFSSH & IFSHT 27<sup>th</sup> June – 1<sup>st</sup> July 2022



IFSSH & IFSHT 27<sup>th</sup> June – 1<sup>st</sup> July 2022



IFSSH & IFSHT 27<sup>th</sup> June – 1<sup>st</sup> July 2022



IFSSH & IFSHT 27<sup>th</sup> June – 1<sup>st</sup> July 2022



IFSSH & IFSHT 27<sup>th</sup> June – 1<sup>st</sup> July 2022



IFSSH & IFSHT 27<sup>th</sup> June – 1<sup>st</sup> July 2022



27<sup>th</sup> June – 1<sup>st</sup> July 2022

QEII Conference Centre Westminster



**BSSH**  
The British Society for the Study of History



## APPENDIX 5



**ICHOM**

---

HWR WORKING GROUP  
Call 1: Thumb Track  
Wednesday 9<sup>th</sup> May 2018

### Agenda

---

- ICHOM
- Review of scope: Survey
- Thumb track
- Methodology
- Outcomes
- Time points
- Next steps

2

### Objectives of the ICHOM Hand and Wrist project

---

**AIM:**

- We seek to balance a **comprehensive** view of measurements for evaluating hand and wrist conditions with a **feasible** recommendation that providers can reliably implement.




**DELIVERABLE:**

- A minimum Hand and Wrist Standard Set which will **enable outcome measurement in routine clinical practice** to:
  - ✓ Improve decision making between providers and patients
  - ✓ Facilitate quality improvement
  - ✓ Allow for benchmarking across organizations

3

**At the conclusion of our work together there will be three documents describing the final Hand and Wrist Conditions Standard Set**

---

Flyer	Reference Guide	Academic Publication
 <ul style="list-style-type: none"> <li>Two-page overview of ICHOM Standard Set and Working Group</li> <li>Flyers are available at <a href="http://www.ichom.org">www.ichom.org</a></li> </ul>	 <ul style="list-style-type: none"> <li>Full detail of Standard Set for institutions interested in collecting</li> <li>Includes measure definitions, coding instructions, and sample questionnaires</li> <li>Reference Guides available at <a href="http://www.ichom.org">www.ichom.org</a></li> </ul>	 <ul style="list-style-type: none"> <li>Peer-reviewed publication</li> <li>Explains process to arrive at Standard Set and motivation for selected measures</li> <li>Click <a href="#">here</a> for example</li> </ul>

**NOTE: All documents will be made freely available to promote global adoption of the Standard Set**

4

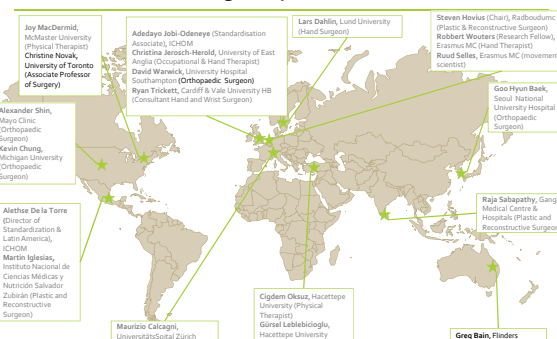
### Sponsors: Hand and Wrist Standard Set

---

<p><b>Hand Surgery</b></p> <p><b>Xpert Clinic</b></p> <p><b>BSSH (British Soc.)</b></p> <p><b>NVVH (Dutch Soc.)</b></p> <p><b>FESSH</b></p> <p><b>IFSSH</b></p> <p><b>National Societies</b></p>	<p><b>Hand Therapy</b></p> <p><b>International</b></p> <p><b>European</b></p> <p><b>American Society</b></p> <p><b>British Society</b></p>
--	--

5

### Welcome to new Working Group members



6

## Framing principles for ICHOM Hand and Wrist Standard Set

- 1 Outcomes are defined around the medical condition, not the specialty or the procedure
- 2 The Standard Set is a "minimum set" focused on the outcomes that matter most to patients
- 3 Patients are directly involved in defining the Standard Set
- 4 Patient-reported outcomes are included in every Standard Set to capture symptom burden, functional status and health-related quality of life
- 5 A "minimum set" of case mix variables is included to facilitate meaningful comparison
- 6 Time points and sources of data collection are clearly defined to ensure comparability of results

ICHOM Working Group

Copyright © 2017 by the International Consortium for Health Outcomes Measurement. All rights reserved. 7

## Agenda

ICHOM

Review of scope: Survey

Thumb track

Methodology

Outcomes

Time points

Next steps

ICHOM Working Group

Copyright © 2017 by the International Consortium for Health Outcomes Measurement. All rights reserved. 8

## Delphi-process: The included list of outcomes and time points will be decided by Working Group vote

We will ask the Working Group to rank each of the proposed outcomes on a scale of 1-9.

The following pass criteria will be used to agree on a minimum Standard Set of the most relevant outcomes.

- For an outcome to be voted for **inclusion**, it has to be ranked between '7' and '9' by at least 80% of respondents.
- For an outcome to be voted for **inconclusive**, it has to be ranked between '4' and '6' or any range without 80% agreement of respondents.
- For an outcome to be voted for **exclusion**, it has to be ranked between '1' and '3' by at least 80% of respondents.

All **inconclusive** outcomes will be entered into a second round of voting.

ICHOM Working Group

Copyright © 2017 by the International Consortium for Health Outcomes Measurement. All rights reserved. 9

## We have reached unanimous consensus on the work philosophy to develop the Hand and Wrist Standard Set\*

Overall Survey  
Response Rate  
82%

100% Working Group members agree with the framing principles

100% Working Group members agree with clustering into tracks and standardising time points

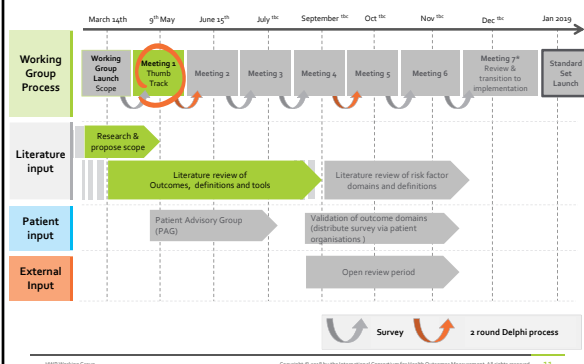
100% Working Group members agree with the proposed scope

\*For detailed results and comments please see the Appendix

ICHOM Working Group

Copyright © 2017 by the International Consortium for Health Outcomes Measurement. All rights reserved. 10

## Process



ICHOM Working Group

Copyright © 2017 by the International Consortium for Health Outcomes Measurement. All rights reserved. 11

## Agenda

ICHOM

Review of scope: Survey

Thumb track

Methodology

Outcomes

Time points

Next steps

ICHOM Working Group

Copyright © 2017 by the International Consortium for Health Outcomes Measurement. All rights reserved. 12

## Literature search

### - Per track

### Define tracks by:



IMMP Working Group

Copyright © used by the International Consortium for Health Outcomes Measurement. All rights reserved. 13

## Define tracks by common expected outcomes

Identifying outcomes per track  
 1) essential for all tracks (core measurement)  
 2) track specific



Hierarchy: how to use tracks e.g. nerve lesion, etc

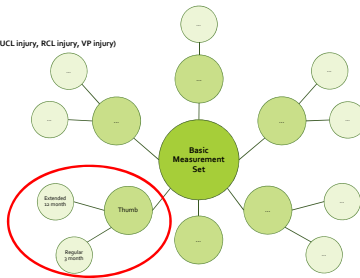
IMMP Working Group

Copyright © used by the International Consortium for Health Outcomes Measurement. All rights reserved. 14

## Track with common expected outcomes - Thumb

### Example Conditions

CMC-1 OA (basal thumb)  
 CMC-1 instability  
 IP-1 OA  
 MCP-1 OA  
 Thumb ligament injury (Skier's thumb / UCL injury, RCL injury, VP injury)  
 Fracture of first metacarpal bone  
 - Bennett fracture  
 - Rolando fracture  
 Fracture of thumb phalanx  
 Flexor tendon rupture/lesion  
 Extensor tendon rupture/lesion  
 Trigger Thumb  
 Etc.



IMMP Working Group

Copyright © used by the International Consortium for Health Outcomes Measurement. All rights reserved. 15

## Example Case #1

**Who:** Mrs Y, 40 y old

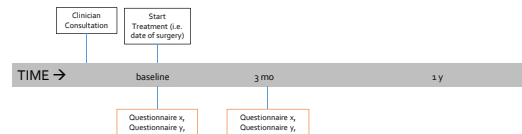
**Diagnosis:** Unilateral trigger thumb

**Treatment:** Steroid injection

**Medical History:** successful contralateral steroid injection for trigger finger

**Other Case-Mix:** blank

i.e. Thumb – Regular track



IMMP Working Group

Copyright © used by the International Consortium for Health Outcomes Measurement. All rights reserved. 16

## Example Case #2

**Who:** Mrs X, 69 y old

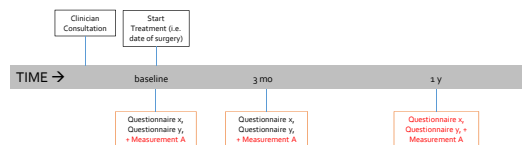
**Diagnosis:** Bilateral thumb base osteoarthritis including STT osteoarthritis

**Treatment:** Trapeziectomy and partial trapezoidectomy with Burton-Pellegrini LRTI

**Medical History:** PIP joint prosthesis, carpal tunnel release, trigger finger release

**Other Case-Mix:** Type 2 Diabetes, high blood pressure

i.e. Thumb – Extended track



Despite being different conditions there are some relevant outcomes that overlap between these two cases – "Core outcomes"

IMMP Working Group

Copyright © used by the International Consortium for Health Outcomes Measurement. All rights reserved. 17

## Methodology to identify outcomes

### 1 Systematic review on outcomes\*

#### Method #1

Search for track name or thumb conditions & outcome/assessment terms

Database: MEDLINE

Search Terms (MeSH)

1. Track name (i.e. Thumb)
2. Thumb conditions (i.e. CMC-1 OA)
3. Outcome/assessment terms (i.e. Patient Outcome Assessment)

Search string: (1 OR 2) AND 3

Search results (published <2017): 1,080 hits

#### Method #2

Search for track name or thumb conditions & outcomes measured in RCTs

Database: MEDLINE

Search Terms (MeSH)

1. Track name (i.e. Thumb)
2. Thumb conditions (i.e. CMC-1 OA)
3. Randomized controlled trial

Search string: (1 OR 2) AND 3

Search results (published <2017): 170 hits

### 2 Manual reference searching

### 3 Expert opinion (Working Group discussion)

\*See appendices for the results of the systematic review. Saturation point was reached after reviewing 200 consecutive abstracts without finding any additional outcome

IMMP Working Group

Copyright © used by the International Consortium for Health Outcomes Measurement. All rights reserved. 18



## Discussion: Do you agree with the prioritization of outcomes?

Outcomes			
FUNCTIONAL	APPEARANCE	PSYCHOSOCIAL	BURDEN OF CARE
Pain	Aesthetics	Health-Related QoL	Complications
Hand function		Depression	Revision
Activities of daily life		Anxiety	Other: Bone Union
Range of motion		Return to work	Costs
Grip & Pinch strength		Satisfaction	
Performance		Reported experience	
		Pain catastrophizing	

■ Essential  
■ Nice to have  
■ Not recommended

Please note that this list is not in any particular order or intended to be exhaustive. The list can be modified based on Working Group recommendations.

Please note tools will be discussed in the next call.

ICHO Working Group

Copyright © 2014 by the International Consortium for Health Outcomes Measurement. All rights reserved. 19

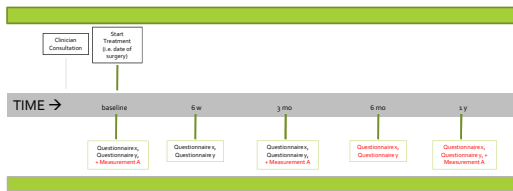
## Agenda

ICHOM  
 Review of scope: Survey  
 Thumb track  
 Methodology  
 Outcomes  
 Time points  
 Next steps

ICHO Working Group

Copyright © 2014 by the International Consortium for Health Outcomes Measurement. All rights reserved. 20

## Example of measurement: time points



Differentiate for:  
 Regular track (i.e. mild conditions)  
 + for extended track (i.e. severe conditions)

ICHO Working Group

Copyright © 2014 by the International Consortium for Health Outcomes Measurement. All rights reserved. 21

## Agenda

ICHOM  
 Review of scope: Survey  
 Thumb track  
 Methodology  
 Outcomes  
 Time points  
 Next steps: other tracks and minimum sets

ICHO Working Group

Copyright © 2014 by the International Consortium for Health Outcomes Measurement. All rights reserved. 22

## What are PREMs and PROMs?

### PROMs & PREMs

Patient Reported Outcome Measures (PROMs)	Patient Reported Experience Measures (PREMs)
Measures impact of an illness or health condition from the patient's perspective	Captures the patient's view of what happened during their healthcare visit (process of healthcare)
Examples: quality of life, symptom severity, functional status, health status	Examples: Communication and trust in staff, cleanliness, timeliness
Used to monitor the progress of a health condition or whether a treatment has been effective by comparing results over time	Used to evaluate and monitor service delivery
Measured from the patient's perspective, usually via questionnaires	
Used together to assess quality of care and services from patient's viewpoint	

In general we do not include PREMs or other experience measures in ICHOM sets, unless there is a strong evidence-based argument for including them. We will discuss this during our WG calls

O'Brien Institute of Public Health, Calgary, 2014. [http://obrieniph.ucalgary.ca/files/iphys-chow\\_wc21\\_chi\\_final.pdf](http://obrieniph.ucalgary.ca/files/iphys-chow_wc21_chi_final.pdf)

ICHO Working Group

Copyright © 2014 by the International Consortium for Health Outcomes Measurement. All rights reserved. 23

## **IFSHT MEMBERSHIP**

- **Full members:** 36, representing more than 9000 hand therapists worldwide.
- **Associate members:** Bangladesh, Mexico, Nepal, Philippines, Qatar, Singapore, Thailand, and United Arab Emirates. New associate members are Singapore and Thailand.
- **Corresponding members:** Bahrain, Barbados, Gaza, Ghana, Iran, Malta, Romania, Saudi Arabia, Sri Lanka and Zimbabwe. New members are Malta and Zimbabwe.

## **COMMUNICATION**

### **Within IFSHT:**

- **Executive committee:**
  - Continue to hold regular Skype-call meetings, and use Teamworks as our virtual office
  - All delegate countries have approved new fee structure, effective January 2020
- **Committee activity:**
  - Education committee: concentrating on updating the apps, journal links, resources sections of the website.
  - Ad Hoc Social Media Committee has posted updates about IFSHT and the Congress in Berlin
  - Translation committee: now translating IFSHT Update into Japanese, as well as Spanish.
- **Delegate communication:**
  - Delegates continue to receive regular updates from the IFSHT Secretary General and vote electronically.

### **With Hand Therapists around the world:**

- **IFSHT Update:** published 4 x annually in the *US* and the *British Journals of Hand Therapy*.
- **IFSHT website ([www.ifsht.org](http://www.ifsht.org)):** Continue to regularly update website with new features and content.
- **IFSHT Hand Therapy Connections E-Newsletter:** 2x per year. Currently, over 2000 subscribers.
- **IFSHT Facebook Page:** remains active
- **IFSHT contribution to IFSSH E-zine:** IFSHT has continued to source and prepare a short clinically relevant article for the IFSSH Ezine.

## **IFSHT AWARDS AND SPONSORSHIP ACTIVITY**

- **Evelyn Mackin Award:** sponsorship of a therapist(s) from a developing country (GNI < \$6000) to attend triennial congress. In 2016, IFSHT fully supported 5 therapists to Congress
- **IFSSH/IFSHT Triennial Congress Participation Award:** guidelines and application forms have been updated. Applications received already from Ghana and Northern Ireland for IFSSH/IFSHT 2019.
- **IFSHT-IFSSH International Hand Therapy Teaching Awards** have been awarded to:
  - Jenny Ball travelled to Nepal with Interplast in May 2018
  - Jane Fedorczyk travelled with Lee Osterman to Rwanda in May 2018
  - Currently seeking instructors to teach in Nepal, Guatemala, Ghana and Sri Lanka
- **Cristina Alegri Award for Innovation in Hand Therapy** will be awarded in 2019. Nominations open.
- **The inaugural IFSHT Lifetime Achievement Award will be awarded in 2019** to honor those who have made a global impact on profession of hand therapy. Nominations open.
- **Dynamometers:** 25 available. In 2018, delivered to: Nepal, Bolivia, Tanzania, Rwanda and Zimbabwe.

**More information available at [IFSHT.org](http://IFSHT.org)**



## APPENDIX 7

### 2018 APFSSH (Asian-Pacific Federation of Societies for Surgery of the Hand) Report

14th June 2018, Goo Hyun Baek

#### 1. Member Societies (13)

Australian Hand Surgery Society  
Bangladesh Society for Surgery of the Hand  
Hong Kong Society for Surgery of the Hand  
Indian Society for Surgery of the Hand  
Indonesian Society for Surgery of the Hand  
Japanese Society for Surgery of the Hand  
Korean Society for Surgery of the Hand  
Malaysian Society for Surgery of the Hand  
New Zealand Society for Surgery of the Hand  
Association of Hand Surgeons for the Philippines  
Singapore Society for Hand Surgery  
Taiwan Society for Surgery of the Hand  
Thai Society for Surgery of the Hand

#### 2. Observer Societies (5)

China Society for Surgery of the Hand  
Myanmar Society for Surgery of the Hand  
Pakistan Society for Surgery of the Hand  
Vietnam Society for Surgery of the Hand  
Sri Lanka Society for Surgery of the Hand

#### 3. APFSSH Executive committee

President: Goo Hyun Baek (Korea)  
President-Elect: Raja Sabapathy (India)  
General Secretary: Tony Berger (Australia)  
General Secretary-Elect: Fuminori Kanaya (Japan)  
Immediate Past President: Yuan-Kun Tu (Taiwan)

#### 4. Official Journal of APFSSH

'The Journal of Hand Surgery Asian-Pacific Volume' since 1996  
Published 4 issues (Mar, June, Sep, Dec)

#### 5. APFSSH Congresses

10<sup>th</sup> APFSSH Congress: Kuala Lumpur, Malaysia (October 2014)  
11<sup>th</sup> APFSSH Congress: Cebu City, Philippines (October 2017)  
Report of 11<sup>th</sup> Congress - [Attachment](#)  
12<sup>th</sup> APFSSH Meeting, Melbourne, Australia (9<sup>th</sup> -11<sup>th</sup> March 2020)

# Report on the 11<sup>th</sup> Asian Pacific Federation of Societies for Surgery of the Hand (APFSSH)

Emmanuel P. Estrella, Nathaniel S. Orillaza, Jr.

*ASTRO Study Group, Institute of Clinical Epidemiology, National Institutes of Health,  
University of the Philippines, Microsurgery Unit, Department of Orthopedics,  
Philippine General Hospital, University of the Philippines, Manila, Philippines*

## INTRODUCTION

The decision for the Philippines to host the 11<sup>th</sup> APFSSH (Asian Pacific Federation of Societies for the Surgery of the Hand) and 7<sup>th</sup> APFSHT (Asian Pacific Federation of Societies for Hand Therapy) was finalized during the delegates' meeting of the 10<sup>th</sup> APFSSH in Malaysia last October 2014. As one of the founding APFSSH societies, the AHSP (Association of Hand Surgeons of the Philippines) has been given the opportunity to host the prestigious APFSSH Congress, with the first APFSSH Congress being held in Perth, Australia last 1997. The APFSSH is usually a biennial congress, however, during the delegates' meeting in Kuala Lumpur, Malaysia last October 2014, the decision of holding it every three years was proposed to avoid conflicts in attendance of the delegates within the same year with the much larger IFSSH (International Federation of Societies for Surgery of the Hand). This will mean that the 14<sup>th</sup> IFSSH will be in Berlin, Germany in 2019 and the 12<sup>th</sup> APFSSH will be in Melbourne, Australia in 2020. By doing so, the two big meetings will not be in the same year and will be an advantage to those who want to attend both meetings.

## The 11<sup>th</sup> APFSSH CONGRESS REPORT

### Congress Theme: Classic. Current. Cutting edge

The theme for the 11<sup>th</sup> APFSSH is "Classic. Current. Cutting Edge." The organizing committee wanted to provide an up-to-date and relevant medical education for all hand surgeons who will attend the congress. The current program's aim was for the attendees to get reacquainted with the classics in hand surgery and keep up with what's current. Of course, it is also paramount to look ahead to what's around the corner in order to know what's cutting edge. By combining the classic, the current and the cutting edge in the program, hand surgeons and hand therapists can continue to provide the best care for the hand and upper extremity.

### Congress Venue and Attendees

The 11<sup>th</sup> APFSSH Congress was held from November 7–10, 2017 in the Radisson Blu Hotel, Cebu City, Philippines. The hotel is around 30 minutes to one hour from the Mactan Cebu International Airport. Radisson Blu Hotel is a five-star hotel with 400 rooms and suites and is conveniently located beside a shopping mall. The FERIA and Urban Table restaurant of the hotel provided on-site dining with an emphasis on Asian and Filipino Cuisine.

The hotel was able to accommodate six (6) simultaneous sessions of the scientific program, where two session halls were combined for the plenary sessions.

The 11<sup>th</sup> Congress of the APFSSH and 7<sup>th</sup> Congress of the APFSHT had a total of 443 registered attendees, coming from 25 countries. There were 224 surgeons, 109 surgical residents and fellows, 80 therapists, 15 students and 15 accompanying persons. Attendees from the

---

Received: Jan. 3, 2018; Revised: Mar. 16, 2018; Accepted: Mar. 25, 2018

Correspondence to: Emmanuel P. Estrella

ASTRO Study Group, Institute of Clinical Epidemiology, National Institutes of Health, University of the Philippines, Manila 1000, Philippines

Tel: +632-5548466, Fax: +632-5218538

E-mail: epestrella@up.edu.ph

Philippines were 129 participants. Among the foreign attendees, Japan had the most number of attendees at 105, followed by Singapore at 34, South Korea and Taiwan at 23 each, and Malaysia at 22.

### The 11<sup>th</sup> APFSSH Congress App

The Organizing Committee was able to utilize a congress app in order to have a paperless congress meeting (Fig. 1). The app can be downloaded as an Android App or iOS app and is available from Google Play and App Store. Abstract book publication was limited to 250 in order to encourage participants to use the congress app. The congress app was announced and was available for download one and a half months prior to the congress almost everything that the attendee would need is available in the app. Supplementary materials, either journal articles or video links, which the speakers were willing to share with the participants were also available (Fig. 2).

### Overview of the Scientific Program

The scientific committee wanted to create a cohesive set of topics in the session talks and plenary talks that compliment each other. At the same time, the distribution of topics for the simultaneous sessions and plenary talks should be of equal interest to the attendees. Greg Bain, (Asia Pacific Wrist Association, president 2017–2019) suggested distributing the topics according to the interests/specialties of the hand surgeon. An example of this is having three simultaneous sessions topics: Microsurgery, Arthroscopy and General Hand Trauma. Since attendees are usually a good mix of plas-

tic surgeons and orthopedic surgeons, microsurgery topics are usually preferred by plastic surgeons over general hand trauma and arthroscopy. At the same time, general orthopedic surgeons will generally prefer hand trauma to microsurgery and arthroscopy. By dividing the topics this way, we can avoid overlapping of topics and have a good distribution of attendees for each topic during the simultaneous sessions.

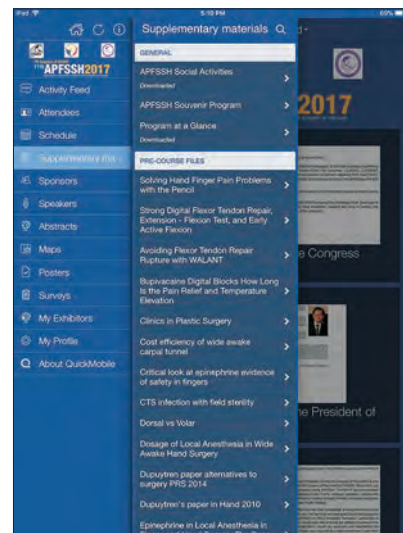
There was a total of two and a half days for scientific sessions, starting at Day 1. There were six simultaneous sessions at any given time for two and a half days and the sessions start at 0800H (this included two sessions of free oral paper or the APWA-Asia Pacific Wrist Association ICL Session, and APFSHT session).

### Tajima Memorial Lecture

One of the highlights of the program of recent APFSSH Congresses is the Tajima Memorial Lecture. The Tajima Memorial Lecture was established in 2004 to recognize the contribution in hand surgery of the Tatsuyama Tajima of Japan, the first APFSSH president. The difficult task of selecting who will deliver the Tajima Memorial Lecture rests on the hands of the current APFSSH President, in this case, Professor Yuan-kun Tu of Taiwan. After careful deliberations, the prestigious Tajima Memorial Lecture was awarded to Professor Emeritus Akio Minami of Hokkaido University, Sapporo, Hokkaido, Japan. The title of the Professor Minami's Lecture was "Modified Sauve-Kapandji Procedure for Distal Radioulnar Joint Disorders" (Fig. 3). Prof Moroe Beppu introduced Professor Minami as the Tajima Me-



**Fig. 1.** The screenshot of the APFSSH 2017 App. This app can be downloaded as an Android or iOS application.



**Fig. 2.** Screenshot of the APFSSH 2017 App with supplementary material uploaded for the participants to download and utilize.



**Fig. 3.** The Tajima Memorial Lecture was awarded to Professor Emeritus Akio Minami of Hokkaido University, Japan. Current APFSSH President Prof Yuan-kun Tu (right) and Congress President Dr. Ida S. Tacata (left) presented the plaque of appreciation to Prof Akio Minami (center) after his lecture.

morial Lecturer. The Tajima Memorial Lecture was held on Day 1, after the first Plenary Session.

### Invited Talks

There were 61 carefully selected faculties from 20 different countries. A great majority of these were from the Asian Pacific Region, which shows how the APFSSH member speakers have evolved through the years. Of the invited speakers, seven were guest speakers (outside the APFSSH member nations), which were considered influential in their subspecialties in Hand Surgery. These were Peter Stern, Thomas Kiefhaber, Marc Garcia-Elias, Diego Fernandez, John Capo, Don Lalonde and Scott Kozin.

A total of 119 talks were delivered by the APFSSH. There were a total of 26 Plenary Talks with topics ranging from: Wrist Bone, Flexor Tendons, Microsurgery/Brachial Plexus, Elbow, and General Topics including Wide Awake Surgery, Burn Hand Surgery and Volunteerism in Hand Surgery. There were 93 Simultaneous Session Talks for the APFSSH. Each Plenary Talk was set for 20 minutes while Session Talks were 15 minutes with a 15-minute open forum after each session (Fig. 4).

There was also four “Meet the Experts” session on Days 2 and 3 to start off the scientific sessions of the day.

### Special Sessions

#### Combined session of the APFSSH and APFSHT

The program also incorporated in one afternoon session a combined session of APFSSH and APFSHT on finger deformities such as Swan Neck and Bouton-



**Fig. 4.** First plenary talk of the Congress by Prof Peter Stern of the USA on Unresolved and Recurrent Carpal Tunnel Syndrome.



**Fig. 5.** One of the “Meet the Experts Session” on Distal Radius Fractures was well-attended and some of the difficult cases of the facilitators and experts were presented and discussed.

niere deformities. This combined session highlighted the anatomy, diagnosis and operative and non-operative treatment of Swan Neck and Boutonniere Deformities of the finger.

#### APWA instructional course lectures

The Asia Pacific Wrist Association or APWA, through the initiative of PC Ho (APWA President 2015–2017) and Jeff Ecker, two half-day sessions were incorporated to the scientific program. The APWA ICL (Instructional Course Lectures) was on the topic of DRUJ (Distal Radio-ulnar Joint). An additional 17 talks ranging from the anatomy to the management and outcomes of various DRUJ pathologies, surgeries and complications were discussed and presented by experts from around the world. An interactive case discussion capped the end of the session.





**Fig. 6.** The Pre-Congress Fellowship Golf Tournament was held on Day 0, Nov. 7 at 7am at the Cebu Golf and Country Club. Among those who participated include Dr. Henry Calleja, Prof and Mrs. Muneaki Abe, Prof Moroe Beppu, Dr. Chan Ping Tak, and Dr. Angel Gozum.



**Fig. 7.** Current APFSSH President Prof Yuan-kun Tu giving the welcome address to the delegates in the Opening Ceremony and Welcome Cocktails on Nov 7 of the 11th APFSSH in Cebu.

### Meet the experts session

The scientific committee also created a “Meet the Experts Session” on Days 2 and 3 before the scientific sessions in the morning (Fig. 5). A total of four (4) “Meet the Experts Sessions” were made: two on Day 2 and another two on Day 3. The four topics in these sessions were carefully selected based on the difficulties and controversies in their management and burden of disease. These topics include: Distal Radius Fractures, Complex Trauma of the Hand, Carpal Instabilities, and Salvage Procedures for Failed or Late Brachial Plexus Injuries. Two experts and two moderators for each session were selected based on their expertise and experience. What



**Fig. 8.** Among the attendees of the Opening Ceremonies and Welcome Cocktails were Marc Garcia-Elias, Goo Hyun Baek and Raja Sabapathy (L-R).



**Fig. 9.** The President's Night on Nov 8 was held at the Circa 1900 restaurant.

is interesting in these sessions is that the controversies were presented and discussed in each session. Pre-selected clinical cases were given to the experts and moderators previously to start the session discussion. Experts and moderators were also requested beforehand to present interesting and controversial cases (if they have) for discussion. The regional differences in the approach and treatment of each case presented offered an informative, interactive discussion among peers and everyone learned from each other. Experiences of the experts in terms of successful outcomes and complications were shared and discussed. It was a great learning experience. Even the “experts” themselves agreed that they learned a lot from these sessions.

### Post Congress: 2<sup>nd</sup> International Course for Adult Brachial Plexus Injuries

The organizers of the 2<sup>nd</sup> International Course for

Adult Brachial Plexus Injuries in Chang Gung Memorial Hospital, Linkou, Taiwan, offered registered delegates of the 11<sup>th</sup> APFSSH a 50% discount on the registration fee. The 2<sup>nd</sup> International Course for Adult Brachial Plexus Injuries was held last November 13–16, 2017.

### Free oral and poster presentations

A total of 272 abstract submissions were received. Initial screening of the abstracts had one outright rejection and two withdrawals. This leaves a total of 269 submissions. Ninety-eight (98) abstracts were selected for oral presentations, while the rest (171) were assigned



**Fig. 10.** Musical Performances during the President's Night by PC Ho on harmonica, Marc Garcia-Elias on guitar and Diego Fernandez on piano.



**Fig. 11.** The Congress Banquet was well attended at the Sta. Maria Ballroom of Radisson Blu Hotel.



**Fig. 12.** The participants were able to participate in some of the Traditional Filipino Folk Dance- The "Tinikling" or Bamboo Pole Dance, including plenary speaker Scott Kozin (lower right).



to poster presentations. Free oral presentations were distributed into 14 sessions of oral presentation at seven minutes each presentation, with an open forum of 10 minutes after each session.

## Social Programs

### Congress tours

Tours in and around Cebu were available for the delegates of the 11<sup>th</sup> APFSSH. Among the most popular tours was swimming with the whale sharks at Oslob Cebu, City Tour and the Kablin Heritage Trail tour. The other popular areas visited by the delegates before and after the congress were Palawan, Boracay Island, and

Bohol. These areas are around 30 minutes to 1 hour by plane from Cebu.

### Pre-congress fellowship golf tournament: Day 0

On Day 0, a fellowship golf tournament was organized by the AHSP for avid golf players. Registration fee was USD 120.00, inclusive of green fee, golf cart, caddy, round trip transportation to and from the Congress Venue, and snacks. Shotgun was at 0630H and even if it was drizzling that morning, a handful of hand surgeons with local doctors were able to enjoy an 18-hole golf game (Fig. 6).



**Fig. 13.** The Congress Banquet had musical performances from Diego Fernandez, PC Ho and Marc Garcia-Elias (upper left) and from current APFSS President Yuan-kun Tu on Violin and PC Ho on harmonica (upper right). Everyone was dancing the night away (lower left and right).

### Opening ceremony and welcome cocktails: Day 0

The opening ceremony and welcome cocktails was supposed to be held at the Events Plaza (Hotel Poolside). However, it rained heavily that day, so it was moved to the Hotel lobby of the Congress Venue at 6 pm. The Congress President, Dr. Ida Tacata welcomed the delegates, with an opening remark from current APFSSH President Yuan-kun Tu (Fig. 7). The affair was attended by around 200 delegates and lasted till 2200H that night including Marc Garcia-Elias, President-elect Goo Hyun Baek and Secretary General Raja Sabapathy (Fig. 8).

### President's night

By tradition, The President's Night is the Congress President's idea of acknowledging and giving thanks to the entire invited faculty and accompanying persons for giving their time and effort to the 11<sup>th</sup> APFSSH Congress. This was held on Day 1 of the Congress. Included in this invitation is the faculty for the therapists' 7<sup>th</sup> APFSHT. The venue for the President's Night was a, Circa 1900 restaurant, a restored ancestral home of one of the prominent families in Cebu City turned into a restaurant, piano bar and function venue (Fig. 9). It has been a favorite destination for people to have a glimpse of colonial Philippines with traditional Filipino dishes to match. A surprise performance of the night was a classical music performance on piano by Diego Fernandez, a guitar performance by Marc Garcia-Elias and harmonica by PC Ho (Fig. 10).

### Banquet night

The organizing committee wanted to encourage attendance to the Banquet Night (Day 2) since it was a great

opportunity for all delegates from different regions of the world to meet and greet the faculty and co-delegates. It is in these instances that friendships and collaborations are made. The organizers decided to waive the fee for the Banquet Night to all registered delegates and accompanying persons. The Banquet Night was started off with speeches from current APFSSH President Yuan-kun Tu, Congress President Ida Tacata and Organizing Chair Emmanuel Estrella. Traditional Filipino dishes were the main course for the evening complimented by traditional folk dancing entertained the delegates for the night (Fig. 11). Audiences were able to participate in a Filipino traditional folk dance or the Tinikling (bamboo pole dance) (Fig. 12). Again, the some of our musically inclined faculty performed to entertain the delegates. This was no less than the current APFSSH President Yuan-kun Tu playing the violin. The other performers were PC Ho on harmonica, Diego Fernandez and Marc Garcia-Elias on vocals, supported by a local band (Fig. 13).

### Summary

The 11<sup>th</sup> APFSSH and 7<sup>th</sup> APFSHT would not have been possible if not for the support and expertise of the Organizing Committee, the Congress Sponsors and the Delegates. The committee has been preparing for the congress as early as 3–4 years prior to the event. The Ways and Means committee provided the needed funds to have a presentable overall congress. The Scientific committee was able to form interesting topics in hand surgery matched by experts from all over the Asia Pacific Region and around the world. The organizing committee of the 11<sup>th</sup> APFSSH would like to thank the Executive Council of the APFSSH for the trust and support that they have given to the AHSP in organizing the 11<sup>th</sup> APFSSH and 7<sup>th</sup> APFSHT (Fig. 14). Lastly, we congratulate the 11<sup>th</sup> APFSSH and 7<sup>th</sup> APFSHT Delegates for making this congress possible (Fig. 15).



**Fig. 14.** Delegates meeting with APFSSH Executive Council (starting from 2<sup>nd</sup> from left, seated): Raja Sabapathy (Secretary General), Moroe Beppu (former APFSSH president), Yuan-kun Tu (current APFSSH President) and Goo Hyun Baek (president-elect APFSSH).



**Fig. 15.** The 11<sup>th</sup> APFSSH and 7<sup>th</sup> APFSHT Delegates' Picture.