

## IFSSH Newsletter

On behalf of the outgoing and incoming Executive Committees I would like to wish a Happy New Year to all hand surgeons and hand therapists of the world!

We cannot start to plan our new year without recapping the wonderful year of 2010. The work of the last three year term, led by IFSSH President Jim Urbaniak and Secretary-General Michael Tonkin, was perfectly completed by an outstanding 11<sup>th</sup> IFSSH triennial Congress in November 2010 in Seoul, South Korea. This was superbly organised by Congress President Moon Sang Chung and a high scientific standard was ensured by Goo Hyun Baek, the Scientific Chairman. These programmes made for an unforgettable event and, along with the financial outcome of the congress, will be difficult for future congresses to equal.

1501 participants, including more than 1300 surgeons, from 61 countries met in Seoul to take part in the Congress. 1429 oral and poster abstracts were presented, covering a wide range of topics. Dr Jesse Jupiter delivered the Swanson Lecture: "Fracture of the distal radius: an historical perspective".

### **Executive Committee:**

During the Seoul Congress new IFSSH officers were elected:

President: Ulrich Mennen  
President-Elect: Michael Tonkin  
Past-President: James Urbaniak  
Secretary General: Zsolt Szabo  
Secretary General Elect: Marc Garcia-Elias  
Historian: Frank Burke  
Member-at-Large (Nominating Committee): Goo Hyun Baek

We thank Arlindo Pardini and Bill Cooney for their contribution to the IFSSH Executive over the past terms.

### **Message from the President, Dr Ulrich Mennen**

'One of the most prominent brachial plexus surgeons, Algimantas Narakas from Switzerland, uttered the following words, after a remarkable career. "If I were not desperate to do better, how would I know what hope is?" He constantly sought ways to improve on his results, even though during his time these results were unrivalled. He challenged himself to better his surgical technique, his patient evaluation, his record keeping, and analyzing of his results. This restless dedication influenced and encouraged a whole generation of hand surgeons to be perpetually uneasy with their efforts.

Such an inquisitive mind and a learning spirit is nourished by us coming together, by cross pollination, by teasing the enquiring mind with challenging thoughts; hence the importance of meetings like these congresses.

In 1980, at the 1st IFSSH Congress in Rotterdam, we as youngsters were in awe, meeting with, and learning from, the giants and pioneers of hand surgery. They were the role

models who inspired us to also achieve the highest level of knowledge, skill and dedication in hand surgery. Our passion was also to become one of this “elite group of masters”.

However, thirty years later and having attended all eleven IFSSH Congresses, I have the perception that the impetus of Hand Surgery has shifted away from the so-called “Hand Surgery Specialists”. This shift seeks to empower health professionals in general in the art and science of maintaining the integrity of the hand.

This is what I would call the ‘changing world of hand surgery’. Our aim as the Hand Surgery Family is not to train surgeons to become “Hand Surgeons” in the first place, but to teach health professionals how to practice basic and good hand surgery.

Although centres of excellence are extremely important to develop and practice better hand surgery, we must not forget that the indigent masses have as much need of medical, surgical and allied health services as those who can afford the best and most modern techniques available. The dilemma becomes more acute if one realizes that it is the poor masses who rely more on their hands than any other group. Manual labour, in its various forms, is all they can offer and when injured and diseased they have no income or back-up insurance. Isn't it ironic that it is mainly these manual workers, who are the producers of goods, the manufacturers of merchandise, and the labourers who build structures. These are the people who produce wealth, for the investor and the country. These are the people who get physically hurt and then lose their jobs, who are unfortunately simply replaced, and who are often, unfairly, seen as disposable.

Interestingly, the word “surgeon” is derived from the Greek word “cheirourgia”. “Cheir” means hand and “Ergon” means work. Therefore hand worker or manual labourer!

Of all time lost due to injuries at the workplace, 70% is attributable to hand and upper limb injuries. It is thus self evident that this fact has serious economic implications for the workman and his country.

The challenge therefore is to bring good quality hand management to these manual workers in an affordable and accessible way. Hand Surgery should therefore in reality become part of Primary Health Care.

In my travels to various parts of our global village I have witnessed remarkable ingenuity in meeting local challenges. At one large hospital hand replantations and micro reattachments were done on a routine basis, and with world standard success rates, using loupes attached to an infusion stand because of a lack of funds for a microscope. In another country, splinting material made from malleable bark which is available in abundance from local trees, is used instead of unaffordable, thermo-plastic material. These are just two examples of the resourcefulness that does not hinder our colleagues in disadvantaged areas to practice a relatively high standard of hand surgery and therapy. I have worked in hospitals where the concepts of “disposable” and “once only” materials are non-existent. So-called disposable gloves, swabs and implants are cleaned, sterilized and used again-and-again. The point is that one does not always need the latest technology to produce good quality hand surgery. Or conversely, the newest equipment does not necessary guarantee acceptable surgical practice.

A number of prominent publications have recently shown that donations, and hand-outs, did not significantly improve the lot and conditions of disadvantaged communities. Some three hundred billion US\$ in aid to Africa over the last fifty years, has unfortunately not shown much improvement in the standard of living. Redundant high tech equipment “pollute” many countries in Africa. These generous gifts have seldom helped to better the quality of healthcare. In fact, the way aid was given often suppressed initiative and innovation. Similarly, intellectual and academic aid can stifle self development, research and progress. What has made a difference however, is the willingness of locals to improve their own circumstances. Appropriate training and education, workshops and practical seminars are the most effective tools for community upliftment. The quest to know more is the key to progress.

In conclusion, I encourage you never to take anything for granted and to be diligent in your efforts to improve your own ability to help your patients.

And secondly, we belong to a family of volunteers. This makes us all equally important. We should encourage each other to interact freely, to communicate and to offer advice to others, thereby strengthening our hand family ties. We should all be leaders and free-thinkers. If this happens, I know that our vision of a vibrant group of mutually, encouraging and supporting members will be realized’

Ulrich Mennen

### **IFSSH Member Nations**

The IFSSH “family” welcomed a new member, the Georgian Hand Surgery Branch of Medical Foundation "Mkurnali". We look forward to having Georgian representatives join us at future Congresses. Interest in membership has been forthcoming from many other societies, including Estonia, Latvia, Ireland, Guatemala and Myanmar and we hope to welcome these societies to IFSSH membership at future meetings.

### **Hand Surgery Worldwide**

A remarkable outcome of the Congress was the presentation of the book Hand Surgery Worldwide: International Reconstruction of a “Beautiful and Ready Instrument of the Mind”, edited by outgoing IFSSH President Jim Urbaniak. Further details regarding this publication are available on the IFSSH website.

### **E-zine**

Ulrich Mennen, IFSSH President, plans to introduce a new electronic magazine (e-zine) of hand surgery to improve communication between IFSSH members and co-workers. We look forward to distributing the first issue of the e-zine in the near future. If you wish to receive this, or have contributions or suggestions, please email [ezine@ifssh.info](mailto:ezine@ifssh.info).

### **IFSSH Congresses:**

At the Delegates’ Council meeting held in Seoul, the hosting rights for the 2016 IFSSH Congress were awarded to Argentina. The regional rotation system of host societies will now take effect, commencing with the bids for the 2019 Congress to come from the European region.

*XIIth IFSSH - IXth IFSSH Congress - New Delhi, India.*  
4<sup>th</sup> - 8<sup>th</sup> March, 2013

*XIIIth IFSSH – Xth IFSSH Congress – Buenos Aires, Argentina*  
2016

### **Future plans**

The IFSSH Executive recognises the importance of effective communication with the national hand societies and wishes to expand financial support to worthy projects. Due to the financial success of the Seoul Congress new horizons have been opened and the leading role of the IFSSH in the world of hand surgery education can be further emphasised. This is possible only with active contributions of the national societies. The Executive would appreciate suggestions, comments and requests. Not only national delegates, but all members of the IFSSH are encouraged to communicate with us.

The Executive have preserved the existing administrative office to ensure communication is optimal, and Belinda Smith will continue to help with the administration of our organisation. Her contact address ([administration@ifssh.info](mailto:administration@ifssh.info)) is available on the web site.

To directly contact the Secretary General simply click on the website or write an email to [secretary@ifssh.info](mailto:secretary@ifssh.info)

As the new Secretary General I will try to do my best and follow the path which was so perfectly constructed by names like Guy Foucher, Jim Urbaniak, Ulrich Mennen and Michael Tonkin. To succeed in this work I need your help and contributions because only together can we continue to build this wonderful palace that is our world of hand surgery.

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