

CONINCTION

JUNE 2022

e-Newsletter



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APOA CONGRESS

Nov 24 – 26, 2022 Manila, Philippines







60 Years of Trailblazing Orthopaedics Through Synergy & Diversity



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Celebrating 60 Years of the Association

President's Message

Shoichi Kokubun



Dear APOA members,

Time flies! Ten months have passed since my inauguration as the President of the APOA in August, 2021. However, the Congress of our Association, scheduled to be held in Manila from November 24 to November 26 this year, still feels a long time away. The Congress celebrates the 60th anniversary since the Association was founded as the Western Pacific Orthopaedic Association (WPOA) composed of 12 countries in the same city: Manila in 1962. The 60th anniversary is very important in East Asian cultures as it completes a full cycle in the zodiac, the sexagenary cycle. Our Association has cycled back to its roots. Taking this opportunity, let's learn its history. Standing on the shoulders of the founders who gathered in an era when traveling abroad was uncommon, we must go forwards and further develop our Association to promote a higher level of orthopaedics in every member country.

The Congress will be run via a full virtual platform. This is based on a deliberate decision that the Organizing Committee made considering that the COVID-19 pandemic remains unresolved. Holding the congress in person, of course, was thought ideal, but we have to accept the reality. Fortunately, modern internet technologies allow speakers and participants to feel actually being on site.

The Congress Committee invites distinguished guests from across the world for instructional

lectures. All Specialty Sections under the APOA, assist the Committee in planning fields symposia regarding their orthopaedics. Speakers in these programs will present not only their expertise but also their innovative ideas. The other important programs are the free paper sessions. In 1975, 47 years ago, 7 years after graduation from medical school. I for the first time presented a free paper overseas in Singapore. The topic was a surgical procedure I developed for quadriceps femoris contracture as a result of myolysis due to intramuscular injection and subsequent fibrosis, which was an object of public concern. I still clearly remember the questions and my answers. As such, free paper presentation is an essential step for young fellows' growth and development as orthopaedic surgeons.

On a separate topic, the APOA Executive Committee, with the help of a lawyer, has recently been drafting the articles necessary in order to apply to the Hong Kong authorities for registration as the APOA Limited with tax exemption. The application process will likely require more than 3 months after the articles' passage at our Special Council Meeting. The timing will be close, but we may be able to celebrate a fresh start of the Association at the forthcoming Congress in Manila.

Shoichi Kokubun, MD, PhD

Professor Emeritus, Tohoku University Sendai APOA President Japan

Making Every Connection Matter

Secretary General's Musing Arif Khan



Dear APOA members,

Greetings from the Secretariat.

I will start by complimenting the Newsletter and website committee, for producing yet another issue of CONNECTION. The whole team deserves admiration. The focus this time is on the 22nd APOA Congress in Manila which is going to be on 24-26th Nov. 2022.

The Manila congress is going to be virtual due to the still ongoing Covid 19 pandemic. The theme of the conference is "EVOLUTION AND PROGRESS OF ORTHOPAEDICS IN APOA".

There are going to be six virtual sessions running at the same time, covering all the subspecialties. At the end of each day, there will be plenary sessions by people who are known for their work in the world.

Registration charges have been kept to the minimum, i.e USD \$85 only; to encourage maximum participation from youngsters. Enough time has been given to free papers, so I am sure my young colleagues will enjoy those sessions.

Apart from the congress, the Education committee in APOA is working hard to complete the data on Post Graduate Education in Orthopaedics and its sub-specialities in APOA countries. Hopefully, we will be able to share this data with you in the congress. This will enable us to find out the strengths and weaknesses in the post-graduate orthopaedic

programs in different countries and so can develop strategies to overcome those weaknesses.

APOA is moving in the direction of getting registration in Hong Kong as APOA Limited by guarantee. If we are successful, we might get a tax exemption in Hong Kong. Also, we will be able to use Credit cards for payments in our academic programs, which at the moment is a problem for some countries. For this purpose, the Executive Committee has tried its best to modify the APOA constitution in such a way to keep its essence intact, yet make it acceptable to Hong Kong authorities. The modified APOA constitution has been sent to all APOA councilors for comments. Hopefully, this task will be completed this year.

APOA is also working to compile the major events in the history of APOA. It's an uphill task but is very important to keep our history intact. Hopefully, very soon you will have it in a book format.

In the end, I am grateful to all members of the Newsletter and website committee who are continuously working to print our newsletter in time and keep the APOA website up to date.

Mohammad Arif Khan APOA Secretary General Pakistan

Expand Your Mind; Change Your World

Editorial Azeta Arif



Dear APOA Members.

Welcome to 'Connection'. The June issue is our special edition dedicated to the Manila Congress which is going to be virtual. The theme of the congress is "EVOLUTION AND PROGRESS OF ORTHOPAEDICS IN APOA".

It is my honour and pleasure to welcome APOA 1st Vice President and Honorary Chair of the Congress Prof. Ellewellyn "LEWY" G. Pasion, and Congress Chair Dr. Frederic Joseph F. Diyco to write for this edition.

This mega event has attracted global leaders to participate and exchange expertise and to launch brilliant new ideas together. The scientific programme will focus on Symposia and Instructional Lectures given by distinguished speakers from across the world. It would, however, be incomplete without your participation, without free paper presentations and E-posters. We encourage all of you to submit abstracts of your work, so that we can put together an exceptional scientific programme.

We would like to extend our sincere invitation to you all, to join us in APOA 2022. We are sure that this scientific extravaganza will advance orthopaedic knowledge and forge new friendships.

Special thanks to Dr Jamal Ashraf, APOA 2nd Vice President, for all his help and guidance. Finally, I would like to thank our diverse & inclusive "Connection Team" for all their hard work in putting together this special issue.

See you all, virtually, at the APOA 2022 Congress

Azeta Arif Chair – Newsletter Committee Indonesia



Asep Santoso Indonesia



Baris Can Kuzuca Turkey



Maria Shelynn Wong Malaysia



Ruba Jamal Saudi Arabia



Raja Bhaskar India



Sarah O'Reilly Australia





APOA 2022 Frederic Joseph F. Diyco



Dear Friends,

The Philippines is honored to host this year's 22nd APOA Congress with the theme "60 Years of Trailblazing Orthopedics Through Diversity and Synergy". As President of the Philippine Orthopedic Association, the national governing body for all board-certified Orthopedic Surgeons in our country, it is with distinct pleasure and pride that I invite all members of the 24-country strong Asia Pacific Orthopedic Association to join us for this event.

As much as we yearned to prepare for a faceto-face meeting, the unpredictability of the pandemic across the region and the world has limited our plans, leading to our commitment to a fully virtual Congress. The past two years have taught us well and having gleaned much knowledge and experience from previous online events, we promise to do our best in order to bring you a three-day program that will be worth your time. The POA is busy collaborating with all APOA Specialty Sections to produce specific, timely and relevant specialty programs from Orthopedic experts in our region. I am sincerely grateful to the leaders of each APOA Specialty Section for their sustained support and attention towards Spread over six to seven this endeavor. dedicated online breakout rooms and broadcasted at the most acceptable time for all concerned, all Specialty Sections will have the opportunity to conduct fruitful meetings and cast learning activities in various formats in

order to keep you glued to your screens. Research Papers will be given ample time and opportunity for presentation, incorporated into Specialty Section sessions specific to each paper's topic. This guarantees rapt attention and appropriate responses for the hard work behind each project.

At the end of each day, we will gather and be treated to plenary sessions from distinguished Orthopedic luminaries who will share a variety of topics and insights, after years of practice and experience. These talks promise to be a wonderful culmination to each days' learnings. We will also be witness to important transitions in APOA leadership during this Congress.

I hope you can all join us on November 24 to 26, 2022, to celebrate the 60th anniversary of the APOA on this 22nd Congress. Registration is open, and the call for abstract submissions has been made. Visit our website at www.apoa2022manila.org. Thank you very much!

Frederic Joseph F. Diyco

President
Philippine Orthopaedic Association
Congress President
22nd APOA Congress

APOA2022









22ND APOA CONGRESS



VIRTUAL CONGRESS

in Manila, Philippines

24-26 NOVEMBER 2022

12:00 NN to 10:00 PM (PH)

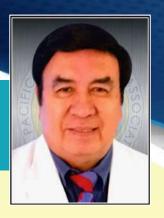
Open for Registration and Abstracts

www.apoa2022manila.org

A Treasure of History

Philippine Orthopaedic Association

Ellewellyn Pasion



HISTORY OF ORTHOPAEDICS

The practice of Orthopedic surgery in the Philippines began after World War 2. In 1948, a group of physicians has formed a society just after they finished their training in the United States and England, and named it the Philippine Orthopaedic Association (POA).

This group of foreign-trained physicians were introduced as the first officers of the POA. They include Jose de los Santos, Rodolfo Gonzales, Ambrosio Tangco, Augusto Besa, Francisco Aguilar, Luis Martinez, Deogracias Tablan and General Basilio Valdez - along with Dr. Jose de los Santos as the first President of the POA.

During that time, there was only one training institution for Orthopaedics in the country - the National Orthopaedic Center (NOH). Dr. Jesus Tamesis has established the first residency training program at the NOH in 1956. Since the NOH was under the Department of Health (DOH), it was the only institution which had a training program for Orthopaedics until 1970.

In June 1971, Dr. Ambrosio Tangco advocated the establishment of the Department of Orthopaedics at the University of the Philippines College of Medicine – Philippine General Hospital (UPCM-PGH). The Board of Regents of the University of the Philippines (UP) passed a resolution qualification exam recognizing Orthopedics department as a separate operating department from the

Department of Surgery. This successful recognition has started the chapter of the first university-based Orthopaedic training program.

THE EVOLUTION OF THE ORTHOPAEDIC SPECIALIST

In 1972, the POA officers organized an independent board to guide the practice of Orthopaedics in the country - the Philippine Board of Orthopaedics (PBO). The PBO was eligible to give accreditation to training institutions that provide high standards of Orthopaedic training. Only physicians who have completed a 9-year doctoral degree program in Medicine and passed the Philippine license examination are qualified to enroll in a 4-year Orthopaedic residency program in any of the accredited training programs.

Under the umbrella of the eligible training



PBO examiners visiting the training center during accreditation





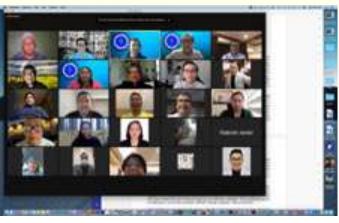
PBO Written Exam 9 (Pre pandemic)

programs, the trainees undergo rotations in different Orthopaedic sub-specialties such as Trauma, Adult Orthopaedics, Spine, Pediatric Orthopaedics, and Hand. Every year, an In-Examination service Training (ITE) conducted by the PBO to assess the knowledge and competency of trainees throughout their years of residency training. After completing the 4-year residency program, the trainee sits for a Diplomate examination consisting of 3 parts: a written part, an oral part, and finally a practical examination part administered by the PBO. successful candidates Only earns the certificate of Diplomates in Orthopaedic surgery. After a year of Orthopaedic practice and fulfillment of all the requirements, they can apply for any of the Fellowship programs held by the Philippine Orthopaedic Association (FPOA).

Under the supervision of the PBO, more Orthopaedic training programs were accredited throughout the years. The number of Orthopaedic graduates started to increase and has overcome the shortage of orthopaedic physicians in the country. By the end of 2021,

a total number 21 Orthopaedic training institutions were established in the entire Philippines. Nine (9) are currently located in Metro Manila while twelve (12) are located in various provinces. All these Orthopaedic institutions undergo yearly accreditation by the PBO, ensuring that high standards of training is maintained.

The establishment of Orthopaedic training programs in the provinces helped to address the uneven geographical distribution of Orthopaedic practitioners in the country. Most graduates of residency programs in the provinces usually choose to practice in their city, or region. In the past, the majority of Orthopaedic program graduates would practice in the metropolitan areas, mostly in the capital city, where the big & recognized medical centers are located. But at the present time, there are well-equipped medical centers in the cities outside of Metro Manila and in the provinces. Despite of all this, there is still shortage of Orthopaedic surgeons, a total of 797 Orthopedic surgeons for the growing Filipino population. There is only Orthopaedic surgeon for every 136.763 Filipinos. Hopefully, the POA and the PBO will



PBO Virtual visit of a training center during the Pandemic



find the ultimate solution to this.

Currently, there are 6 regional chapters of Orthopaedics outside of the National Capital Region (NCR) which are: North and South Luzon chapters, the East and West Visayas chapters, and the North and South Mindanao chapters. Each of these chapters alternate in hosting the mid-year meetings & events of the POA. They have their own set of officers and are responsible for evaluating and maintaining the high standard of quality of Orthopaedic training, service, and research in their representative regions.

Up to date, there are twelve (12) POA Specialty societies. Orthopaedic resident graduates who underwent further post-residency training abroad for a subspecialty of interest has paved the way to form various Specialty societies like arthroplasty, spine, sports & arthroscopy, pediatric Orthopaedics, hand, etc. All these specialty societies hold their own regular meetings and annual conferences, but at the same time, they continue to fully support their mother association - the POA.

As a matter of fact, there are a total of 797 POA Fellows, 62 of whom are women. In fact, the Philippines has the most number of female Orthopaedist in the Asia Pacific region. It is noteworthy to mention that in 2016, Filipino women Orthopaedists organized the Philippine Society of Women Orthopaedic Surgeons, Inc. (PSoWOSI) to promote gender equality in the practice of Orthopaedics in the country. This advocacy goes well with 2022 being declared as the Year of Women.

POA INVOLVEMENT IN REGIONAL ORTHOPAEDICS

The POA has always played an active role in the establishment of regional Orthopaedic associations in the Asia Pacific region. During the 2nd Pan Pacific Rehabilitation Conference in 1962, Philippine delegate Dr. Catalino Jocson invited Orthopaedic surgeons from Japan, Hongkong, Malaysia, South Korea, and South Vietnam to his home and has proposed to them to form an association. Within few months of that meeting, the Western Pacific Orthopaedic Association (WPOA) was established. Prof. Isaharu Miki of Japan was elected as the first President.

From April 2-7, 1970, the 3rd Congress of the WPOA was hosted by the POA in Manila. General Basilio Valdez was elected as the first Filipino President of the WPOA, but unfortunately shortly after his election, General Valdez had suffered from a fatal heart attack and passed away on 26 January 1970.

"Fortunately, in all their adversity, the Philippine Fellows were able to find a man of the hour to step in place of General Valdez... Dr. Francisco Aguilar who accepted the role of President of the WPOA and of the 3rd Congress in Manila." (taken from the writings of Dr. Deogracias Tablan⁺, Honorary Secretary, WPOA, 1973-1992).

In 1987, the POA again hosted the WPOA Congress in Manila during its 25th founding Anniversary.

During the 50th Anniversary Congress of the POA in 1999, WPOA President Prof. Robert Bauze of Australia proposed to rename the WPOA to the APOA during the special WPOA Council Meeting in Manila. In 2000, the WPOA has officially changed its name to the APOA during the Congress in Adelaide. With the new



name, the APOA decided to include all countries in the Asia Pacific region, and accept Federal (country) membership. This made the APOA the largest regional Orthopaedic association in the world, with a total number of 25 countries as members. From a total 1,200 individual members in 1992, the APOA has grown to over 60,000 members in 2021.



WPOA Congress 1989 (L-R) Lewy Pasion (ASEAN OA President), M. Sivananthan (MOA) Deogracias Tablan (WPOA Hon. Secretary] and Chhab Hilmy (WPOA President Elect 1989-1992)

In 1981, through collaborative efforts among the Orthopaedic leaders of the Association of Southeast Asian Nations (ASEAN) countries, the ASEAN Orthopaedic Association (AOA) was established in Manila, with Indonesia, Malaysia, Philippines, Singapore, and Thailand as the founding member countries of the AOA. Dr. Jose M. Pujalte of the Philippines was the founding President of the AOA. Later on in the 2000s, Vietnam, Brunei, Myanmar, and Cambodia have joined as Federal members.

The POA has been actively involved in the activities of these two regional associations -



WPOA Congress 1989: (L-R) Deogracias Tablan (WPOA Hon .Secretary, Kamal Bose (WPOA President 1989-1992), Lewy Pasion (ASEAN OA President) Yeo Cheow Tong (SG Health Minister), and Sim Fook Lam (WPOA Treasurer)

the APOA and the AOA. It strongly established the ties with international Orthopaedic associations like the *Societe Internationale Chirugie Ortopedie et Traumatologie* (SICOT), American Academy of Orthopaedic Surgeons (AAOS), European Federation of Orthopaedics & Traumatology (EFORT), whose annual congresses many Filipino Orthopaedic surgeons attend and participate.

In the end, I would like to thank all the past POA Presidents, all 59 of them, for all their contributions in making the POA what it is today.

The young generation of Filipino Orthopaedic surgeons will continue to cooperate, collaborate and strengthen the ties with our Orthopaedic allies in the Asia Pacific to promote further advancement of Orthopaedics in the region.

Ellewellyn PasionAPOA 1st Vice President
Philippinnes

APOA Foot & Ankle Section



An Ongoing Journey

Rajiv Shah



Foot & Ankle orthopaedics is the most emerging subspecialty aggressively orthopaedics, with every orthopaedic facet under its umbrella. Adult, paediatric and orthopaedics, geriatric arthroscopy and arthroplasty, sports medicine, diabetic foot, and horizons of foot and ankle are everexpanding. Naturally, the Asia-Pacific world has also gone all out toward foot & ankle orthopaedics

Asia pacific Foot & Ankle Council, a section of the Asia Pacific Orthopaedic Association (APOA), was established in 2016 at the



Melbourne **APOA** meeting under Mark Blackney with eleven members. The primary aim for establishing the Foot and Ankle Section was to realize the need for the specialty of Foot and Ankle to grow, be accessible to our population, and be practiced to contemporary standards in the Asia Pacific Council also aims to foster region. partnerships and contacts with societies and surgeons, encourage research, and promote the exchange of ideas within the Asia Pacific Region. The bedrock of a Society is its members, their interactions, and their unified goal of achieving better care for the patients. This is and will always be the guiding principle of the Foot and Ankle Section of APOA.

I was incredibly honored to be bestowed with the chairmanship of the council in 2020. My earnest duty was to take the board forward. Our executive team - comprising twenty motivated member representatives of APOA member countries - is committed to dissipating central actions in a granular mode to every member of APOA.

An interactive website of APOA Foot and Ankle Council (www.apoafootandankle.org) is live now. Members have the unique opportunity to visit the website to access all past academic events carried out by foot and ankle section.

The unprecedented effort of its nature, 'Case of the Fortnight' started by the council, allows learning through masters' experience. Activity is led by enthusiastic council members Prof.





Council Members of the APOA Foot & Ankle section at Gwangju, South Korea, in 2016

Chayanin and Prof. Kwai Ming. Every fortnight, a foot and ankle case is sent by email to forty thousand members of APOA. The platform is also open for every orthopaedician of Asia Pacific countries to contribute.

During the pandemic, education was forced to become virtual. Under the captaincy of Prof. Arvind and Prof. Chua, APOA Foot and Council conducted a virtual 'Principal Foot & Ankle Course' of three days. Leaders across the world educated two hundred plus attendee orthopaedic surgeons from the Asia-Pacific continent.

A dedicated webinar focused on five APOA member countries was conducted under the directorship of Prof. Andri with a central theme of discussing current concepts in foot and ankle trauma. The fact that 400 members attended this webinar shows the enthusiasm & attraction subspecialty has commanded amongst the orthopaedic world.

The success of the main course has stimulated the team APOA Foot & Ankle Council to go ahead with the 'Advanced Foot & Ankle Course' scheduled inn December for

three days. The advanced course is packed with 30 hours of exhaustive interactive learning from twenty-five masters from the world over.

Yes, our journey is on, and the destination is far ahead! Under the auspices of APOA, we hope to encourage orthopaedic surgeons in this region to become members, participate and contribute actively to sharing knowledge to strive to achieve uniformity in the care of patients in the Asia Pacific region. Towards this, we will promote active inclusion of the surgeons in conferences and courses, virtually or in person, free exchange of ideas, and provide different avenues to educate and disseminate current practices in the Foot and Ankle Speciality.

We welcome all Foot and Ankle specialists and interested orthopaedic surgeons to become members of the APOA Foot and Ankle Section and help foster and strengthen this burgeoning community and the specialty.

Rajiv Shah
President
APOA Foot & Ankle Section

In Memoriam

Prof. Ponnampalam Balasubramaniam



Early life and career

Professor Ponnampalam Balasubramaniam was born on 26 October 1929 in Sentul, Kuala Lumpur. He lost his father when he was twelve during the Japanese bombing of Singapore in the Second World War, and his mother later. Nevertheless, he put himself through medical school, graduating from the prestigious Ceylon Medical College in 1955. Love struck the same year when he met the love of his life in Galle, nurse Ratnavali De Silva and married her in 1962 after 7 long years, despite the attitude toward Tamil-Sinhalese mixed marriages at the time.

Tragedy struck again while living and working in Malaysia. He developed radiation cataracts and his wife developed breast cancer. A devoted family man, he moved to Singapore in 1981 at his wife's behest to spend more time with their daughter studying in Singapore, eventually losing his wife in 1983. A father and mother to his 3 children, he then raised them single-handedly while successfully juggling his time as an Orthopaedic Academic and Surgeon.

Career

1958 marked the start of his Orthopedic traineeship in Colombo. Obtaining his FRCS (Eng) in 1965, he started work as a Lecturer in Orthopaedic Surgery at the University of Malaya in Kuala Lumpur in 1966. Having extensive training under notable surgeons

such as Dr Coventry (Mayo Clinic), and Prof Hodgson (Hong Kong), Prof Bala went on to become Professor and Head of Orthopaedic Surgery, University of Malaya in 1978, and quickly developed the sub-specialties of hand, microvascular surgery, paediatrics, spine, trauma and adult reconstruction there.

The family moved to Singapore in 1981 where he was appointed Associate Professor at Singapore University Department of Orthopaedic Surgery. He became full Professor in 1984, Vice Dean of the Faculty of Medicine from 1985 to 1994, and Deputy Chairman of the Medical Board and Director of Medical Affairs from 1991 to 1994. He mentored and published numerous scientific articles during his tenure in Singapore, focusing on tendon healing, hip cartilage and morphology, spine fusion and scoliosis, paediatric elbow osteotomy, shoulder stability as well as the 'Singapore Operation' for peroneal tendons.

Despite 'retiring' in October 1994, he continued as a Professorial Fellow in the Orthopaedic Department followed by an appointment as Professorial Fellow in the Dean's Office, National University of Singapore. Between 2001 -2003 he was the foundation Petronas Chair in Sports Medicine in the University of Malaya.

He was awarded the Singapore National Day Public Administration (Gold) medal in 1991.



The Academy of Medicine Singapore honoured him as the 8th College of Surgeons Lecturer in 2013. As the SOA lecturer in 1994 and as Donald Gunn lecturer in 2003, he was similarly honoured bv the Singapore Orthopaedic Association. His Lecture in 2002 at the 50th Anniversary Celebration of the University Department of Orthopaedics, 20 years ago aptly describes the situation of undergraduate medical education today - He was a true visionary!

recognition of his achievements, the Malaysian Orthopaedic Association has set up an annual P. Balasubramaniam Best Published Translational Medicine (Non-Clinical) Paper the Award and Singapore Orthopaedic Association similarly renamed the Young Investigator's Award as the Balasubramaniam Young Orthopaedic Investigator's Award, both since 2015.

Beyond Malaysia and Singapore, Prof Bala





contributed to the development of Orthopaedic education in Indonesia such as undergraduate training at the Hassanudin University Makasar from 1978 and supported post-graduate training from 2003 through regular visits. He was also one of the founding members of the ASEAN orthopaedic association.

Teacher

It can be said Prof Bala delved into medical teaching with all his heart, mind and strength. As an educator Prof Bala has helped to shape 3 generations of Orthopedic Surgeons, contributing firstly in his role as a Professor of Orthopedic Surgery in the National University Hospital Department of Orthopedic Surgery, and then in his second career as a fount of Orthopedic knowledge, where over the course of 2 decades, batch after batch of Orthopedic trainees would make the pilgrimage to his house to be molded and prepared for the challenges of passing their postgraduate



examinations. A teacher with vast experiences in all the fields of Orthopaedics, he has painstakingly accrued a huge library of interesting or rare cases through his years as a clinician, educator and regional examiner. There is never boredom or mediocrity in his sessions and approach. He was a pioneer in teaching styles and methods, simulating postgraduate styles of examinations such as clinicals. vivas and even the examinations. In practicality, this was meant to ensure everyone overcame the necessary hurdle, but more importantly to make us safe, well informed practitioners with breadth and depth. Prof taught for the love of teaching. He never expected any recognition or reward.

While recognizing the impact of rapidly expanding fields on undergraduate teaching in Orthopaedic surgery, he also cautioned against changing priorities and fragmented training with increasing sub-specialization at the 50th Anniversary celebration of the Department of Orthopaedic Surgery, NUS in 2002.

Mentor

Not all teachers are mentors, but Prof Bala is one and even more, a friend. He did not hesitate to point out the shortcomings of his trainees, but this came from a heart of love and a desire to impart his knowledge skills and attitude to his trainee. His constant guidance extended beyond the training years, as the familiar "Don't worry, I am here" resounded in the memories of many a consultant scaling new challenges in their career. His preoperative planning approach to visualize ourselves doing the actual surgery, from the start, to the end helps to mentally plan for appropriate approaches, resources and



anticipate challenges, an advice that has stood the test of time. Both Prof Wong and Prof Thambiah shared about how he would expect them to have clerked. examined summarized his patients prior to surgery. This summary was not any ordinary summary, it had to be up to Prof Bala's rigorous standards and had to include the trainees' own opinion on what would be the most appropriate surgical plan before they were rewarded with the privilege of performing the surgery. Prof Joseph Thambiah remembers Prof Bala instructing him to draw by hand the vertebrae that he had operated on and colour in the areas that he had removed after every spine surgery. It made him a better surgeon and artist, too! Patient care did not end in the operating theatre for Prof Bala, and he always expected a phone call from the trainee after they had reviewed the patient once the patient had returned to the ward.

Prof Bala was a man driven by principle; he treated his patients the same, whether they be prince or pauper, private or subsidized. A firm believer that the practice of Orthopaedics is



both an Art and a Science, Prof remains a firm advocate of returning to gold standard treatments against new high tech medical management in an era of rapid technological advancements. Nor did he allow financial incentives to cloud his clinical judgement.

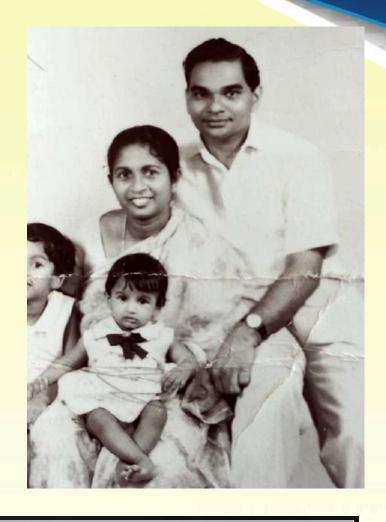
Conclusion

As we mourn the passing of a great surgeon, thinker and educator on March 22, 2022, we would also like to celebrate a life of service and giving. Perhaps one regret would be the lost opportunity for this bright spark to enkindle all the shining stars in Orthopaedics who are and yet to come. Nevertheless, the legacy of Prof P Balasubramaniam will live on forever, in service to our patients, and in duty to generations of students and young doctors looking to us for guidance.

Joyce Koh Suang Bee

Chair
Asia Pacific Orthopaedic Research Society
Singapore

Those we love don't go away, they walk beside us everyday. Unseen, unheard but always near, Still loved, still missed, and held so dear.





#breakthebias



The 'Lady' Resident

Kiyana Mirza



"Why did you take Ortho? Isn't it going to be tough for you? Who will give you a job after this?"

"Is it because you couldn't get another subject? Did someone force you to take it?"

Not sure who in their right mind would pursue orthopaedic surgery as a second choice, but that was never the case with me. It was never the financial prospect, gore, glory, Godcomplex or false sense of superiority that drove me to this decision. While most people find it hard to believe, I wasn't foolish enough to base a major life decision on hypothetical feminist tendencies either.

Yes, I am a woman in orthopaedic surgery; fondly referred to as the 'lady orthopaedic resident'. Though, I think 'orthopaedic resident' sounds just fine.

When I talk to my interns about their subject of choice, I make it abundantly clear to them that postgraduation (regardless of the field) is a



huge commitment filled with its own set of struggles. Choosing your trade, is like choosing a partner – it's a lifelong commitment without the option of divorce, making it all the more important to choose wisely. With that in mind – orthopaedic surgery, was like love at first sight.

Now that statement might lead one to believe that I was a disillusioned teenager watching a romantic comedy fooling herself into thinking I could do orthopaedic surgery for the rest of my life – but that wasn't the case. Like all good things, this too took time and I saw the beauty of the subject beyond the book – the finesse, clinical skill, surgical outcomes and patient satisfaction that made orthopaedic surgery all the more captivating.

So, what was different? Why was it so abnormal for me to be as captivated as my bigger-built, broad-shouldered male colleagues? Needless to say, any relationship (including mine with orthopaedic surgery) has seen the good, the bad and the ugly.

"What are you doing here? Shouldn't you be in the kitchen?"

Naturally', this statement filled the OPD with laughter – all except for me of course, standing there dumbfounded with nothing to say. I knew it was going to be an uphill battle, but I couldn't help but wonder if I was disillusioned into thinking acceptance was something attainable.

From day one, there's been this unspoken





pressure to work harder and prove myself, to show that I belong in the field. It's not something my colleagues or superiors could be blamed for because it's a pressure born from the expectations that I hold of myself as a professional. Moments like these, however, made me feel that no matter what I did or how hard I worked, I'd never be seen equally.

"Have you regretted your decision <u>yet?"</u>

It's been interesting to see how faculty and residents from other departments react to seeing a woman in orthopaedics. Much like an animal in the zoo, there's been a lot of finger-pointing, gasping and astonishment. Though most of their questions seem to stem from a place of genuine curiosity, the interrogation does take an accusatory turn to imply I've done something rather pathological.

"Don't think that you'll get any special treatment."

All residents make mistakes, but I don't think

any of my male colleagues have had to hear this. As flawed as I am, I don't think I've been especially prone to making errors compared to anyone else in training (at least, I hope not!). Criticism for wrong-doings is always a part of the learning experience and I've never thought myself to be an exception to the process. Not everyone needs to be patronised to be successful, and the fact that my superior thought I expected it was all the more hurtful – because I'd never ask for it.

"Women just aren't very good at decision-making under pressure."

"A man may make a good obstetrician, but a woman will never make a good orthopaedic surgeon."

Heavily generalised statements indeed — which at one naïve point in the course even brought me to tears. There have been times where I too, have helped plan surgeries and brainstorm ideas on-table to mitigate problems. Some ideas were good and some weren't, but I do believe I'm now a much better surgeon for it. Moreover, I've yet to meet a gentleman who was completely flawless in his choices. Man or woman — we're all human at the end of the day.

"If you don't regret taking up postgraduation, you're probably not doing it right."

This was told to me as an intern, and it's a statement that I keep coming back to. It's also a statement I strongly disagree with. While the past few years have led to moments of self-doubt, disappointment, emotional exhaustion and my fatigued enthusiasm — I don't regret my commitment to this trade.

The subject has never looked less beautiful.



As exhausting as it is to wait on diversity and acceptance – I take comfort in the fact that I can always find solace in my patients. They're the ones who recognise the hard work and good intention with each dressing and every ward rounds that passes. Their kindness has helped me see beyond moments of cynicism because they have always made my work worth the struggle and I don't doubt they always will.

So, it's not all bad. There are always the handful of senior surgeons who will look at your work objectively, and give you the opportunities you deserve — in research, patient care and the operating theatre.

It's more important to acknowledge that many of the surgeons that made these statements have also taken the time to notice all the hard work and take pride in my achievements. While it's been an uphill battle, their deviation towards being more inclusive is reflected in the way they now treat me and the postgraduates who have followed. It's something truly beautiful and they're the ones that have led me to believe that the future can be hopeful in other institutions as well.

It's the love that we have for orthopaedics that strengthens us as a community, and while

gender has been barrier diversity and inclusiveness - we've only scratched the surface. No matter vou're where from. whether you're a man, woman or transgender, I hope these wise words of Sir John Charnley





help you find that the pleasures of being an orthopaedic surgeon don't discriminate:

"The orthopaedic surgeon's faculties must be adaptable to a wide compass; the delicacy of a neurosurgeon, required in nerve and tendon surgery; the power and accuracy of a sculptor wielding the osteotome and heavy mallet; engineering skill of a fitter, in using precision tools in bone grafting and internal fixation; the indefinable art of closed reduction, in manipulating a fracture with the touch and craft of a bonesetter; pleasure in perfect dissection under a tourniquet, and satisfaction in the carnage of a hindquarter amputation."

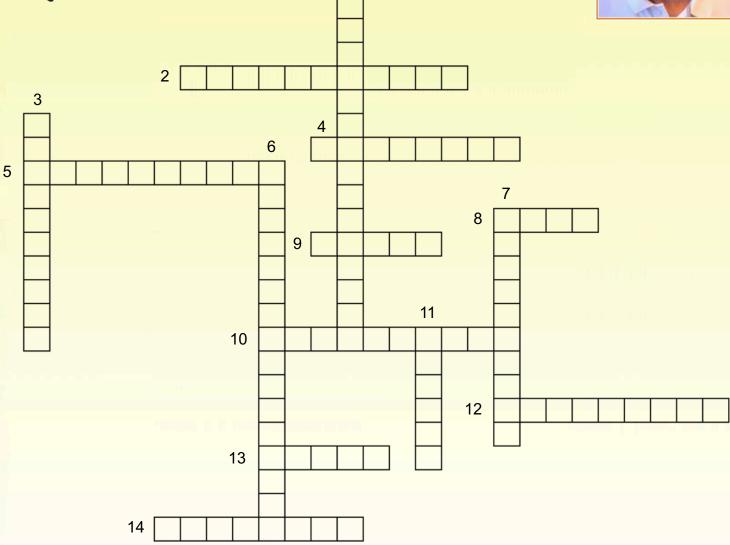
Kiyana MirzaAn Orthopaedic Resident India



Tickle Your Bones

Baris Can Kuzuca





ACROSS

- 2. A syndrome that requires immediate fascial release
- 4. One of the carpal bones in proximal row
- 5. Membrane of Bone
- 8. Association that Connection belongs to
- 9. C1 vertebrae
- 10. Red bone marrow is found in this type of bone
- 12. A muscle found around knee joint
- 13. A small round cell sarcoma that mostly seen in paediatric patients
- 14. A tissue found in knee joint

DOWN

- 1. A type of hip fracture associated with bisphosphonate use
- 3. Final stage treatment of severe necrotic limb
- 6. Nervus of biceps brachii
- 7. A device that is used to visualise joints
- 11. Tubercule on distal radius

For the correct answers: Visit the APOA website

Annual Conferences of APOA Member Countries



66th Annual Congress of the Korean Orthopaedic Association

13 - 15 October, 2022 Seoul, Korea



44th Annual Meeting of the Royal College of Orthopaedic Surgeons of Thailand

21 - 23 October, 2022 Pattava



31st National Turkish Orthopaedics & Traumatology Congress

26 - 30 October, 2022 Antalya, Turkey



82nd Congress of Taiwan Orthopaedic Association

29 – 30 October, 2022 Taipei, Taiwan



82nd ASM of the Australian Orthopaedic Association Combined with NZOA

30 October - 3 November, 2022 Christchurch, New Zealand



42nd Annual Congress of the Hong Kong Orthopaedic Association

5 - 6 November, 2022 Hong Kong



22nd National Congress of Indonesian Orthopaedic Association

9 - 12 November, 2022 Jakarta, Indonesia



35th Pakistan Orthopaedic Association Conference

24 – 27 November, 2022 Islamabad, Pakistan



67th Annual Conference of the Indian Orthopaedic Association

30 November - 3 December, 2022 Amritsar, India



44th ASM of the Singapore Orthopaedic Association

8 - 10 December, 2022 Singapore





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