



**BRITISH FOUNDATION FOR
INTERNATIONAL RECONSTRUCTIVE
SURGERY AND TRAINING**

MARCH BULLETIN

Welcome to the
BFIRST Bulletin.

I hope this edition finds you well and that you enjoy catching up with our news. BFIRST is thriving and there's plenty going on – trips to read about, podcasts to listen to and fundraising activities that everyone can get involved in.

I'm just back from Nepal where I have seen a really positive improvement in professional networking with good relationships developing between the orthopaedic and plastic surgeons. Two years ago, I took an orthopaedic surgeon with me on a trip and we did presentations together to demonstrate the good working relationship that we have and to talk about the benefits for patients when our specialities work together well. This was at the request of the senior Plastic Surgeon who wanted to build bridges with his orthopaedic colleagues. It certainly seems to have helped move things forward in the right direction. Seeing our partners grow as professionals is a huge pleasure and it's a privilege to be involved in mentoring them towards this. As usual, I have also come back brimming with ideas about how to improve the opportunities for training and sense of belonging for our own trainees in the UK as this is something they do really well in Nepal.

Please join us in our fundraising efforts for this important work. We're having a 'No Coffee morning' on 22 April where we challenge people to go without coffee and donate to us what they would have spent on coffee that morning – see further on for more details. Or why not get on your bike and see if you can rise to our Oxford 100 challenge in September?

Sarah Tucker - BFIRST Chair 2020-23



Equipping Surgeons **Globally**, Reconstructing Lives **Locally**

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NEPAL February 2020

Sarah Tucker and Conrad Harrison

Aims

To build bridges between the orthopaedic and plastic surgery fraternities and to provide clinical and surgical training on extremity reconstruction.

The visit this year incorporated both Pokhara and Kathmandu after a scoping visit to Pokhara last year.

Pokhara week 1 Highlights

Suraj is a Nepali Plastic Surgeon who has mainly trained in China. He has clearly grown in confidence and capability since the scoping visit last year.

Supervising him through a complex haemangioma excision in the hand, it was encouraging to see his good surgical skills. The Director of Orthopaedic Surgery at the local government hospital has been very responsive to the suggestion of working more closely with the Plastic Surgeon and has actively invited Suraj to Continuing Medical Education (CME) opportunities to improve networking between the specialities. He arranged an orthopaedic CME event during the visit given over entirely to the subject of plastic surgery input in limb reconstruction.

Who went?

This week the only visitor was Sarah Tucker, Consultant Plastic Surgeon from Oxford

What we did

This visit incorporated two hospitals in Pokhara, Green Pastures which is a small but growing mission hospital and the Western Regional Government Hospital. There were four days of clinical work; a clinic day in which cases were assessed and arranged and three days of operating. On the fifth day there was time for resting before the evening CME conference attended by 30 orthopaedic surgeons from Pokhara.



Lessons learned

Personal friendships between visitors and local surgeons of different specialities built up over the years can provide the leverage to influence the inter-professional relationships between local surgeons

Kathmandu Week 2 Highlights

Last year our goal was to provide training in limb-saving microsurgery techniques, and we were delighted to see that since our previous visit the team had started to perform these complex operations independently.



We worked closely with Dr Shilu, a talented young surgeon who is making history as one of Nepal's first female orthopaedic surgeons. There are currently 400 orthopaedic Surgeons practising in Nepal but only two of these are women!

SUDAN February 2020

Dave Bell, Nik Jagodzinski, Janet Hunter, Sarah Griffiths

Khartoum: Day 1 Monday 3rd February

We arrived around midnight and were met by one of the orthopaedic registrars who provided us with the appropriate forms to fill in and obtained our visas for us (at no cost, thanks to the aforementioned letter). We then were taken in two vehicles to the Coral Hotel. This was situated very close to the bridge to Omdurman and so close to the location of the course. As we were travelling in the early hours close to the presidential palace, we were stopped at a checkpoint, but proceeded without hindrance.

The following morning we convened after breakfast and planned the practical details of the course. We were met at about 1pm and taken to the venue to ensure all was in place. Aliaa hospital was one of the military and private hospitals and the room looked like a boardroom!

The tables were inset with leather and arranged as a horseshoe facing a large TV screen. Each had a couple of heavy armchairs. After rearranging the furniture in a more useful way to face the demonstrator table and the screen we asked for assurances that the tables would be protected with dust sheets and a wooden board so wayward drills and wires wouldn't cause damage. The



audiovisual was excellent, and we were able to project from an iPhone or iPad mounted over the workstation to the main TV and two other smaller screens on the side of the room. Having established that all was in place, we were taken to meet the Director of the hospital who welcomed us, and we were shown the hospital facilities, theatres and therapy suites which were excellent. However this was not the government hospital, but a military and private hospital, with resources to match.

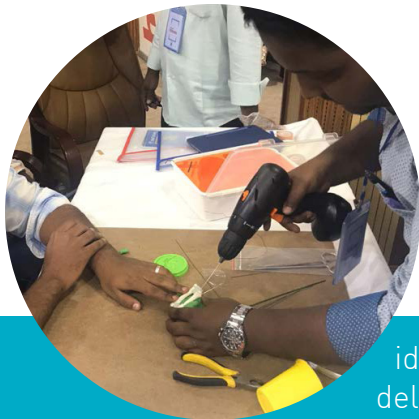
Day 2 Tuesday 4th February

Early start arriving at Aliaa hospital. We were able to set up without difficulty. The desks had been covered with dust sheets and a square of hardboard which eased DB's concerns. The splint pan was switched on without fusing the electrics, and materials for the conservative management section were distributed.



The day was introduced by Dr Samir, chair of the educational committee, and then we got underway. The three lectures were given in the morning as a combined lecture, which flowed well, but the surgical exposures exercise was omitted. This caused a couple of negative comments in the feedback and was a misjudgement on our part.

The afternoon session was led by DB. We had about four delegates to each table, and the



idea was that one delegate would undertake each

exercise after it was demonstrated. Demonstration was sometimes live, sometimes a pre-recorded video. Both were effective, but the videos were shorter. We had asked that delegates were of mixed experience so everyone would gain.

The crossed K wire technique was revealing. They all knew that k wires didn't give axial rotational stability or provide compression over a fracture site, yet often their hand fixations were with a single k wire because this is what they had been told to do. This set the tone for applying theory to practise which is what we had set out to do. DB demonstrated a single hand twist technique for the circlage wires, only to be shown a more effective and efficient way the Sudanese did it using the power drill! Learning went both ways.

The sawbones provided an alternative model on which to practise the tension band technique, giving the candidates the option of doing it small, like a finger joint arthrodesis, or larger with an olecranon fixation. The chicken bone femurs were particularly good for demonstrating the bouquet wire technique, and the wires from Hanson Springs were perfect substitutes for K wires in this exercise (as well as for the external fixator exercise the next day).

Day 3 Wednesday 5th February

DB and NJ returned to Aliaa to continue the hand and wrist fixation course, while SG and JH were taken to Soba hospital to teach about 20 therapists splinting techniques.



The day went well, DB led the first part, and as the Ishiguro technique was also suited to the chicken joint model better than the saw bones, this was added in before the coffee break. This gave the opportunity over coffee to tidy away all the chicken bone material and put out the sawbones for the wrist exercises. NJ led the sawbones wrist session which brought up differences in techniques learnt which allowed discussion of theory and practice.

Clinic Patients

Once the therapists and finished their session with the physiotherapists, we all sat together while a succession of about eight patients were brought for our opinion. It was supposed to be a review of post-traumatic injuries but patients had been sent with a wider range of conditions. Some clinical conditions were outside our immediate expertise, such as obstetric plexus palsy, but even here there were basic steps that could be followed for physiotherapy and splintage as a precursor to operative intervention in the future. We were able to offer advice for the next steps and as the therapists had the splint pan still set up, were able to make some splints immediately, using it as a further teaching opportunity for the therapists.



Read the full report from Sudan at bfirst.org.uk

KEELE SURGICAL SOCIETY

Keele National Orthoplastics Workshop

Shahjahan Aslam | Twitter: @shahjahan_aslam



On Saturday 15th February, Keele Surgical Society hosted the Keele National Orthoplastics Workshop 2020 at the Royal Stoke University Hospital. This event aimed to improve awareness, insight and understanding of orthopaedic and plastic surgery at the medical student and foundation doctor level. In particular the event focused on the teamwork between both specialities in the healthcare system for example in the management of major trauma, open fractures and hand surgery.

After attending the BFIRST/BSSH Overseas Day in September I was inspired to learn about the collaboration between surgeons from these two specialities in supporting and training their colleagues to complete life-changing surgery across the globe. To raise awareness, Keele Surgical Society decided that the keynote talk of this year's event would focus on Orthoplastics overseas.

The event featured group-based teaching workshops focusing on various topics, including internal fixation, external fixation, tendon repair and flap design which were delivered by consultants from our local teaching hospitals. We were delighted to host Mr Jason Wong from the Manchester University Foundation Trust and Mr Rajive Jose from the Hand Unit at Queen Elizabeth Hospital, Birmingham.



Mr Wong delivered an engaging keynote titled 'Orthoplastics Management in LMICs.' This lecture raised awareness of the work BFIRST carries out around the globe, focusing in particular on Mr Wong's and his team's visit to Harare, Zimbabwe. Mr Wong discussed how he and his team operated on a variety of cases including congenital hand surgery, release of burns contractures and an anterolateral free flap reconstruction for an open wrist defect. Mr Wong also showcased the importance of teaching and transferring skills. He explored how visits overseas are a fine balance between operating and teaching in theatre and delivering workshops and lectures to local surgeons

and students. The lecture highlighted to medical students and foundation year doctors the importance of collaborating with surgeons and students overseas and that through sustainability in education and training, we can tackle the challenges faced in Global Surgery.

Keele Surgical Society were delighted to raise £250 for BFIRST from this event. Last semester we also raised £140 from our Christmas Raffle and look forward to featuring BFIRST and fundraising at our future events!



UCL PLASTICS AND ORAL MAXILLOFACIAL CONFERENCE

Janice Yiu | Twitter: @janyonie

UCL Surgical Society held its first Undergraduate Plastics and Oral Maxillofacial Surgical Conference on 7 March 2020. Ms Barbara Jemec (founding chair of BFIRST) and Mr Arpan Tahim have been our plastic surgery and oral maxillofacial surgery patrons for the conference, and they were also judges for the conference essay competition: How can Plastic & Oral Maxillofacial surgeons collaborate in the 21st Century?

The conference commenced with Ms Jemec talking about the story of how Harold Gillies (pioneer of modern plastic surgery) and Charles Valadier (a dentist) worked together in developing new skin graft and mandibular repair techniques to help

injured soldiers during the 1st World War. Many delegates were inspired to hear about the values and goals of global surgery, sustainability of training and educating and respect for cultural differences from Ms Jemec, with many saying that this was the first time they heard about global surgery.



We are most excited to see BFIRST being introduced to delegates who include medical students all round the world including Indonesia and the Czech Republic, qualified dentists and doctors. The importance of collaboration between surgical sub-specialties in the field of reconstructive surgery was further reinforced with open discussions between delegates and speakers, with many left thinking about their future careers not only as surgeons, but also the art of giving and the prospect of getting involved with meaningful charitable organisations like BFIRST.

ZIMBABWE FUNDRAISER

Ralph Murphy, Adam Reid, Olukemi Ayoade - **7 March**

On 7th March 2020, the Bolton Lever Rotary Club hosted a 'Race Night' for the BFIRST Zimbabwe Project at the Bolton (Dunscar) Conservative Club and raised over £1500. The Rotary Club offered a fundraiser following a talk given by Adam Reid in Summer 2019 about the work of BFIRST. The event was facilitated by Ralph Murphy (Plastic Surgery Specialty Registrar in Manchester) and attended by over 120 people including Dr Olukemi Ayoade (current BFIRST Fellow from Lagos, Nigeria). It was a fantastic evening, which for the unaccustomed involves a series of historical horse races on a big screen and invites everyone to place small bets. A hearty Bolton pasty supper was provided which was followed by a raffle.



Adam Reid spoke about the key priorities for BFIRST highlighting the project he is involved with in Zimbabwe, which was well received by the audience.

Manchester's current BFIRST Fellow Olukemi Ayoade from Nigeria struck gold in the raffle.



The event was a great success with humour throughout and thoroughly enjoyed by all who attended.

STUDENT COMMITTEE UPDATE

Terouz Pasha, Eleanor Lumley, Louis Dwyer-Hemmings

We are looking for the new medical student committee for 2020-2021! We will post the application details next week to all our mailing list so if anyone is interested, make sure to be subscribed to the student mailing list to be kept in the loop of the details.

Click here to join the mailing list



GLOBAL SURGTALK

A BFIRST Podcast

BFIRST are delighted to announce the launch of a new podcast – GlobalSurgTalk. In this series, members of the BFIRST Medical Student Committee interview a number of prominent surgeons involved in global surgery where they take a behind the scenes look at the experiences, challenges and triumphs of visiting and local surgeons.



Each episode focuses on a different country that BFIRST has worked with and is around 10-15 minutes long. Episodes can be accessed via iTunes, Spotify, Google Podcasts and all other podcast apps. Our hope is that these discussions will provide an insight into the personal experiences of those involved in global surgery and help improve engagement and raise awareness of the vital work carried out by BFIRST and by surgeons in general in less developed countries across the globe.

Download the GlobalSurgTalk now from Spotify, iTunes or any other podcast app!

Episode One features Dr Faith Muchemwa, one of Zimbabwe's only consultant plastic surgeons who took part in a BFIRST fellowship in 2019. During their discussion, Dr Muchemwa and BFIRST Medical Student Chair, Terouz Pasha discuss the so-called 'brain drain' and how to ensure that local surgeons feel valued as a part of their team while accepting that their actions cannot be controlled should they wish to work abroad. While health workers have the right to go wherever their skills are needed, their home countries are often left struggling with shortages. But is it ethically right to prevent surgeons from leaving their home country and moving to places that offer higher wages and improved living standards?



BFIRST IN CAMBRIDGE

Jasmine Bawa

On Friday 7th February, we welcomed Mr Anthony Barabas to the University of Cambridge Clinical School of Medicine. As the current BFIRST student representative for Cambridge, I was keen for my peers to learn more about BFIRST and the work the brilliant surgeons & trainees do abroad. Mr Barabas kindly agreed to give a short talk on his BFIRST work in Myanmar. This proved to be an insightful talk and gave us much to think about, in particular, how the emphasis of charity work abroad should be on education of the local doctors and sustainability of the local services provided. Thank you to Mr Barabas for giving his time to speak to the Cambridge students - I am certain he inspired some of the students to get involved with BFIRST in the future!

Jasmine Bawa
5th Year Medical Student
University of Cambridge



NO COFFEE MORNING

22 April - Save the date!

Calling all Plastic Surgeons and associated staff!

Please consider joining with us for a fundraising event on 22 April to mark the beginning of the British Association of Plastic Surgery. We are challenging people to go without coffee and donate what they would have spent to BFIRST instead. Or if they can't manage to go without coffee they can pay a fine of twice what they spent on coffee!

See our [recent news post](#) on the BFIRST website for a promotional poster that can be used in your department. Please involve secretaries, nursing staff, therapists and anyone else who is a part of the work of your department.

If you are able to identify willing volunteers to collect cash then please put their details in the text box in the bottom right of the poster and they can then make a payment using the QR code link for the whole amount. Don't forget to tell people to add a note of which department they are donating from – we'll be announcing who managed to raise the most funds at the BAPRAS 2020 Conference in December.

Best wishes
Sarah Tucker
Chair of BFIRST



OXFORD 100

12 September - Save the date!

BFIRST invite you to join Sarah Tucker in the Oxford 100 bike ride - 100 miles through the vale of the White Horse, Salisbury cathedral city, the New Forest, ending at Boscombe Pier in Bournemouth. A beautiful ride along quiet roads.

This is a charity ride to raise money for BFIRST - training and empowering surgeons in the developing world to relieve disability through reconstructive surgery.

Save the date! More details to follow



ASICS 10K RUN London

5 July 2020 -Save the date!

BFIRST have secured 5 places to run in the 2020 London ASICS 10k taking place on Sunday 5th July 2020. Get in touch before Friday 29th November to be in with a chance of getting a place!

You can donate to BFIRST and those who will very kindly be running this 10k via the link below:

<https://uk.virginmoneygiving.com/fund/bfirst10k2020>



GIVE AS YOU LIVE

Give as you Live have made it even easier to raise free funds for BFIRST when shopping online. Thanks to their handy new app, free fundraising is now at your fingertips!

They've packed the brand new iPhone and iPad app with more features than ever before including a fast and intelligent browser search enabling you to shop faster on-the-go.

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