

International ASSH Travelling Fellowship Report 2024

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Introduction

In September 2024, I completed the International ASSH Travelling fellowship. I visited five leading centres of hand surgery in the United States of America. I am currently a Consultant Hand & Wrist Surgeon based at the Royal London Hospital, Barts Health NHS Trust. In the preceding 2 years, I completed several fellowships in hand surgery and completed both the European and British Diplomas in hand surgery. For the latter I was awarded the Vivien Lees Gold Medal for best performance in the exam. I also achieved the best overall score including the externally marked assessments and therefore was conferred the British nomination for the fellowship. The International ASSH Fellowship has been running since 2000 where fellows from IFSSH recognised societies are given the rare opportunity to visit centres of excellence and attend the ASSH Annual meeting. It has been an absolute honour to represent the BSSH and the following report chronicles some of my experiences.

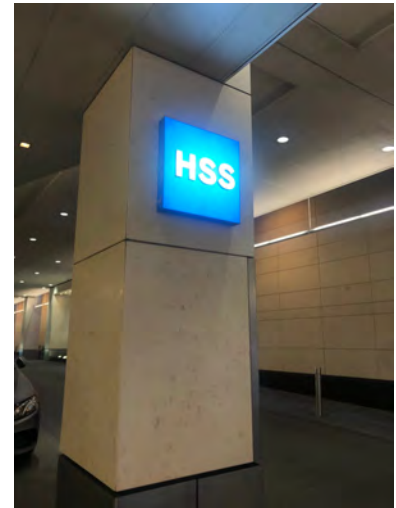


Award of the Vivien Lees Gold Medal with Prof Grainne Bourke – President of the BSSH



Hospital for Special Surgery, New York City, New York

Serendipitously, I met Professor Scott Wolff at the Wrightington Wrist arthroplasty course in the Summer of 2024 where he was presenting his experience of the KinematiX total wrist arthroplasty system. We got talking and he invited me to visit him at Hospital for Special Surgery as I would be in New York before commencement of the official ASSH fellowship. He is the Editor of Greens Operative Hand Surgery and a leader in the fields of peripheral nerve surgery, scapholunate ligament reconstruction and wrist arthroplasty which matches many of my own interests. It was an opportunity and invitation not to be missed.



The Hospital for Special Surgery is located on the East side of Manhattan, New York City. It was founded in 1863 by Dr. James Knight and Dr. Robert M. Hartley as The Hospital of the New York Society for the Relief of the Ruptured and Crippled. It is a leading academic institution with formal affiliations with the Weill Cornell Medical College and Rockefeller University. For the past 14 years, it has been ranked the no.1 for orthopaedics in the USA.

HSS 1st Day

I spent the first day of the visit with Prof. Steve Lee. He is an international expert in brachial plexus surgery and peripheral nerve surgery. I shadowed him in the morning in a busy outpatient clinic. Patients are brought into multiple rooms where they are seen by the medical student, resident, fellow and physicians associate who then present to the attending present. It was interesting to learn that each attending has a personal PA who have worked with them for many years. They remain



a consistent presence in the department and assist with tasks such as note taking, documentation, ordering investigations and scheduling patients. This significantly improved the flow of the clinic. We saw round 60 patients that morning without breaking a sweat and even had time to discuss the greatest British rock and roll bands of all time. The hand and upper extremity centre is located over a single floor. Departmental secretaries, operating room schedulers are based right next door to clinic so organisation of the patient pathway is seamless. Each attending has their own personal office. Prof. Lee's office was full of electric guitars and music memorabilia. He is a passionate musician and regularly performs at gigs. It was great to see patients with him. His bedside manner was excellent. I noticed that each room had QR code linked rehab protocols and information about Prof. Lee's Recovery Shop. This is a website where patients can buy commonly used splints and medications recommended by the department.

*Hospital for Special Surgery –
Kellen Tower*

I was also able to spend some time with Prof. Scott Wolff. We discussed the ANAFAB scapholunate reconstruction which is a procedure I have been performing at home. He has since modified the procedure with smaller carpal bone tunnels at 2.5mm and uses labral tape. We also saw patients who had the KinematiX total wrist arthroplasty which is a mid-carpal implant with preservation of the key dart throwers motion.

In the afternoon, I attended the OR and spent time with Dr. Thalia Chapman who is based both at HSS and at the nearby Memorial Sloan Kettering Cancer Centre and has an interest in upper extremity sarcoma surgery and reconstruction. Her slides on cases she had recently treated were hugely impressive. The operating list was bread and butter hands with a DIPJ arthrodesis and carpal tunnel decompressions. It was interesting to talk to the hand fellows about their experience of training in the USA compared to mines in the UK.

The Recovery Shop by Prof. Steve Lee.



HSS 2nd Day

On the second day, I shadowed Prof. Steve Lee at a dedicated surgical centre. It was a masterclass in nerve surgery. I observed primary and revision carpal tunnel decompression, radial tunnel decompression, revision subcutaneous ulna nerve transposition, Guyons canal decompression and supercharged AIN to ulna nerve transfer. It was great to chat to Prof. Lee during breaks between surgery. He told about the Manus club which is a travelling group comprised of hand surgeon's from across the USA. Surgeons, spouses and children attend a weekend away annually which has been running for many years. The group photos he showed me were the who's who of American hand surgery. What a wonderful idea!



How you move is why we're here – HSS motto

HSS Upper Extremity Team





Prof. Scott Wolff outside the Weill Cornell Medical School

Einstein-Montefiore Children's Hospital, New York City, New York

The first official stop on the ASSH fellowship was the Einstein-Montefiore Children's Hospital located in the Bronx borough of New York City. I was joined by my co-travelling fellow Dr. Sebastian Leixnering who is a consultant based at AUVA - Allgemeine Unfallversicherungsanstalt in Vienna Austria. We were hosted by Prof. Steven Koehler MD, FAAOS, who is an attending physician in Hand, Upper Limb & Microsurgery and Pediatric Orthopedic Surgery and Associate Professor, Orthopedic Surgery at Montefiore-Einstein. His research and clinical interest is brachial plexus injuries, congenital hand differences, nerve transfers, tendon transfers and free tissue transfers. Montefiore-Einstein Medical Centre is an academic unit and is the premier teaching hospital of the Albert Einstein College of Medicine. The Montefiore system is comprised of 14 hospitals and was founded in 1884 among representatives of New York City's synagogues, convened by Dr. Henry Pereira Mendes, to honour Sir Moses Montefiore on his forthcoming one-hundredth birthday.

Einstein-Montefiore 1st Day

We met at 6.30 am in the lobby of the Children's Hospital and were met by one of the orthopaedic residents. The case planned was a contralateral C7 nerve transfer for a flail brachial plexus injury following a motorcycle accident. I had previously spent time at the peripheral nerve injuries unit at Stanmore but had never seen one before and is something which I had only read about in textbooks. It was a fascinating case which lasted 10 hours. Prof. Koehler works with a neurosurgical attending colleague as a dual speciality case which helped immensely so that the case ran smoothly with key steps happening simultaneously and reducing stress when performing critical steps. I was able to assist in the case as it all was all hands-on deck. Highlights were harvesting the entire ulnar nerve on the affected arm and then cutting the contralateral C7 before tunnelling the free ulna nerve graft behind the trachea. It was certainly a high risk, high reward case with very specific indications and only possible in a few select surgeon's hands. It was an epic case to start the fellowship.



Prof. Steve Koehler at Einstein-Montefiore Children's Hospital

In the evening, we were hosted by the Einstein-Montefiore Department of Hand Surgery at the iconic Italian spot called Patricia's in the Bronx.



Faculty Dinner at Patricia's



Einstein-Montefiore 2nd Day

On the second day, we joined the multidisciplinary paediatric brachial plexus clinic. We reviewed new and follow ups with a team of occupational and specialist hand therapists. Each member of the team contributed to their thoughts on the patients progress and functional state setting clear goals and planning future treatments. Prof. Koehler presented his innovative technique for comprehensively re-animating the shoulder in brachial plexus injuries. This technique includes releasing anterior structure's such as pectoralis minor, major and anterior capsule release as well as coracoidectomy, posterior glenoid osteotomy and subscapularis slide. For the deltoid, a bipolar latissimus dorsi muscle transfer for abduction and forward flexion. Levator scapulae transfer to the supraspinatus to assist with initiation of shoulder abduction and for external rotation an ipsilateral lower trapezius muscle transfer is performed. The impressive results were published in the Journal of Shoulder & Elbow Surgery in 2024.



*Faculty at
Montefiore-Einstein*

No visit to the big apple is complete without taking in the sights and scenes in the city that never sleeps. I highly recommend the following – MOMA Museum of Modern Art, a stroll around the beautiful Central Park. Food – Artichoke Pizza and Joes Pizza, Ess-A-Bagel, Los Tacos (be sure to try the Mexican Coke). We were also able to see a baseball game at the famous Yankee Stadium and get a taste of American culture.



*New York Yankees vs Kansas
Royals – Yankee Stadium*

Vanderbilt Health, Nashville, Tennessee

Next I headed south to Nashville, Tennessee to visit Vanderbilt University informally known as Vandy or VU. It was founded in 1873 and named in honour of shipping and railroad magnate Cornelius Vanderbilt who provided the school its initial \$1 million endowment. Vanderbilt is a founding member of the South-eastern Conference. Nashville is often known as Music City and is a major centre of the music industry especially country music in the US.

I was hosted by Prof. Mihir Desai who is Associate Professor at the Department of Orthopaedic Surgery and fellowship director of hand and upper surgery at Vanderbilt Health.

Vanderbilt 1st Day

On the first day, we attended Vanderbilt Surgical Centre at Belle Meade which is a stand-alone centre for ambulatory patients treating both elective and trauma cases. Two theatres ran simultaneously with support from the hand fellow and the physician's associate. Once again, I was struck by how efficient the theatre list ran. We seamlessly went between the OR's. The surgeon completed the operation, dictated the operation note and then the PA would close the wound and dress the wounds. Meanwhile the next OR would be ready with the next patient. There was very little downtime. We were able to complete 15 cases in the morning from carpal tunnel decompressions, cubital tunnel decompressions, quadrangular

space decompression for axillary nerve compression. It was great to see common operations and gain some tips and tricks. For example, when performing a subcutaneous ulnar nerve transfer for cubital tunnel decompression Prof. Desai creates a fat flap which is separate from the skin which prevents tethering and promotes nerve gliding. We had great discussions about treatment of base of thumb arthritis. I observed trapeziectomy with suture suspension using endobutton's from the thumb and index metacarpals to support the thumb. I was able to share my experience of performing thumb arthroplasty using the bipolar Maia thumb CMCJ prosthesis. At the moment thumb arthroplasty has not gained much popularity in the US but it was interesting to hear that implants used in Europe commonly will be entering the US market after FDA approval. Although expensive I do feel that thumb CMCJ arthroplasty is a game changer! I also observed Dr. Doug Weikert perform a volar approach radial shortening osteotomy with a dorsal 3-4 compartment vascularised bone flap for Kienbock's in a young patient. It was interesting to see how the pedicle is raised for the bone flap and then dunked into the dorsal lunate. You need a pretty big hole for the graft to sit properly.

After a day in the OR to headed to Sunda New Asian for a lovely faculty dinner with Dr. Jed Maslow, Dr Doug Weikert, Dr Donald Lee and Prof. Mihir Desai. I was able to present my background and practice in London.



*Vanderbilt Belle Meade Surgical
Centre – Faculty & Fellows*

Vanderbilt 2nd Day

On the second day at Vanderbilt I attended the main campus at Vanderbilt Health. We joined Dr. Chelsea Brown at the Children's Hospital for a paediatric chronic elbow instability case. The LUCL was reconstructed with a hamstrings allograft and secured with a Arthrex biotenodesis screw into the supinator crest and an endobutton into the humerus.

We then able to tour the beautiful, leafy Vanderbilt University Campus.



Vanderbilt University Campus

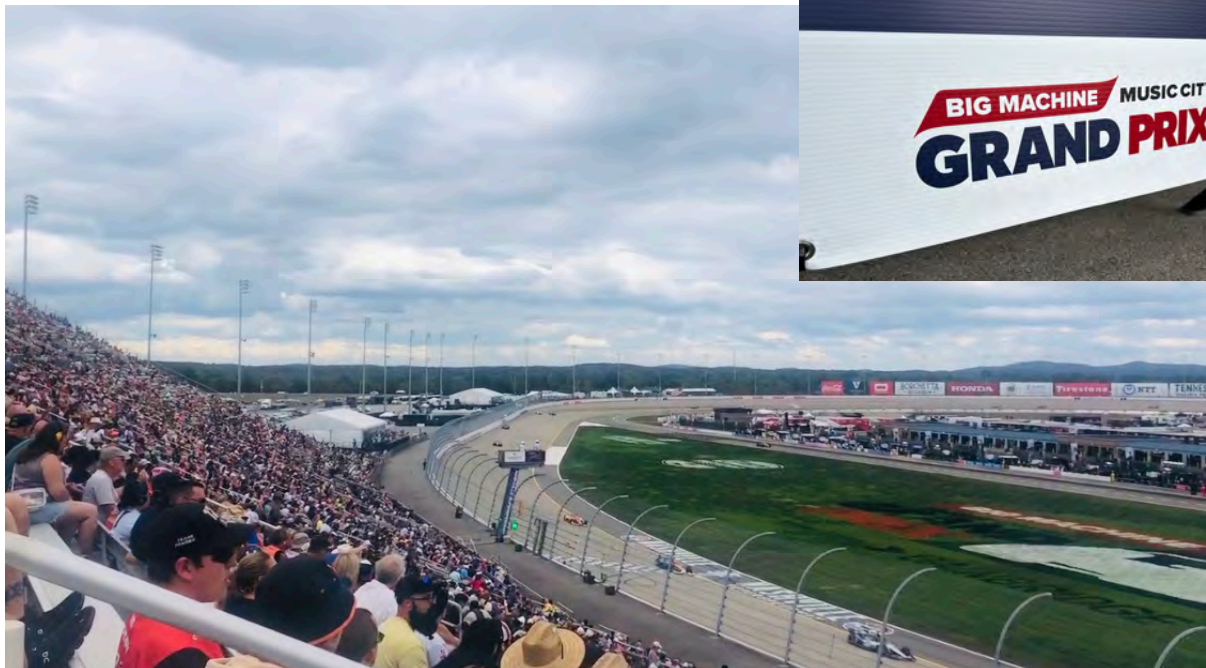


We had some spare time to visit the famous Nashville Broadway which is the spiritual home of country music and honky tonk bars. Well worth a visit. I recommend getting some Nashville hot chicken from Hatty B's and Edley's BBQ for some southern comfort food. In the spirit of tasting American culture we went to the grand finale of the Indycar racing season at the Nashville Superspeedway – let's just say it was a high-octane experience!

Nashville Broadway



Indycar Racing Finale – Nashville Superspeedway



79th ASSH Annual Meeting, Minneapolis, Minnesota

The next stop on the travelling fellowship was the 79th ASSH Annual Meeting in Minneapolis. It was the first American conference that I have attended and I was not disappointed. Prior to commencement of the formal meeting schedule there are a couple of days of educational activity. This ranged from workshops, cadaveric sessions to the resident's flap course and review course. These are pre-booked and carry a fee to attend. The conference was held at the Minneapolis Convention Centre which is over 480,000 Sq. foot in size.

ASSH Day 1

I attended the Skeletal dynamics cadaveric workshop with 20 specimens. There was a live video demonstration of their elbow trauma portfolio and then ample time to practice on your own specimen. I was able to complete a terrible triad elbow reconstruction using the Align radial head replacement and the IJS implant. I was able to practice some elbow approaches which is always useful. An interesting approach which was being taught by the faculty was the combined Kocher and Kaplan approach as described Dr. Jorge Orbay.

ASSH Day 2

On the second day, I attended various pre-planned events including innovation icon talks which are presentations by leaders in surgical technology and implant development. The talk was developed by Professor Luis Scheker who designed and developed the Aptis total DRUJ arthroplasty. It was an absolutely fascinating talk detailing the very first designs of the implants and specific patients who needed DRUJ arthroplasty. It was an inspirational talk on how one man's perseverance and efforts have led to the development of an eloquent solution to a very difficult clinical problem namely the unstable and arthritic DRUJ or instability following salvage DRUJ procedures. Later, in the day I attended an industry forum where I was able to see Prof. Scheker perform a live Aptis DRUJ arthroplasty in a cadaver with a Q&A session led by Prof. Alex Shin from the Mayo Clinic.

The ASSH also had innovative sessions as the Duelling Discord series where surgeons discuss different options for certain conditions such as wrist arthritis. It was great fun to see Prof. Scott Wolff from HSS argue his points for wrist arthroplasty versus Prof. Marc Richard from Duke arguing for wrist fusion. I'm not sure who won but both made compelling cases!

At lunch, I attended the Bunnell Luncheon where I met 17 ASSH international travelling fellows from across the world. It was great to hear presentations from the ASSH Sterling Bunnell Travelling Fellow Dr. Peter C. Rhee from the Mayo Clinic from his experiences from across the globe in his quest to develop his skills in spasticity and tetraplegia surgery. We also heard presentations from the Harold Kleinert Fellow and the Scott Kozin International Hand Surgery Fellow who are selected from non-US countries and low and middle income countries.

*International ASSH Travelling
Fellows 2024*



*Bunnell Luncheon – Faculty &
Fellows*

In the evening, I attended the annual ASSH Hand in Hand Fundraiser at the Fillmore in Minneapolis. This was a wonderful social event with faculty and delegates attending and enjoying live music, food and drinks. It was hugely impressive to see a bunch of hand surgeons put on a great show. Prof. Steve Lee from HSS and Prof. Chuck Goldfarb from WashU led the band – they rocked!



ASSH Hand in Hand Fundraiser at the Fillmore

ASSH Day 3

On the third day, I attended various lectures. There were almost too many interesting talks to hear. Sessions often ran simultaneously which means you must choose 😊. Highlights were the Linscheid-Dobyns Excellence in Wrist: Diagnosis and Treatment of Triangular Fibrocartilage Complex Tears, Unanswered Questions Thumb CMCJ OA in the young patient, Current concepts in the management of scaphoid non-union and current concepts in the treatment of Kienbock's disease. They were all outstanding sessions with panels of experts discussing their experiences. A highlight was Prof. Frederik Verstreken's experience of total scaphoid replacement using a custom 3D printed titanium implant the results of which were recently published in the JHS European volume – fascinating!

I also had the opportunity to visit the industry stands which were excellent. Everything from microsurgical instruments, trauma implants to surgical loupes. It was interesting to visit the Xiapex stand which had an Apple Vision Pro headset to allow you to practice injecting Dupuytren's cords with virtual reality augmentation. Sadly, Xiapex is no longer in the UK but it was great to give it a try.

Me trying the Apple Vision Pro VR headset at the Xiapex stand



ASSH President 2024 – Prof. Steve Moran



It was wonderful to hear Prof. Steve Moran's Presidential address titled "Making Space". He presented a deep dive into how the ASSH carried him through three major stages of his career. It was an inspirational and times emotional talk about how his position now allows him to give back to a field that gave so much to him.

It was also great to hear a fellow Brit Mr. Mike Hayton deliver the International Guest lecture titled "When can I play doc?" It was a brilliant talk about his experience with elite athletes and getting them back to action. It was very well received by the audience indeed. It was great to bump in to the BSSH President Prof. Grainne Bourke who was enjoying the conference too.

Me with Prof. Grainne Bourke President of the BSSH.



In the spirit of continuing my quest to learn about American culture I attended an American College Football Game. The Minnesota Gophers were playing their arch rivals Iowa Hawkeyes – sadly the Gophers lost but it was great to experience the famous tailgate, brass band, cheerleaders and the Minnesota nice.

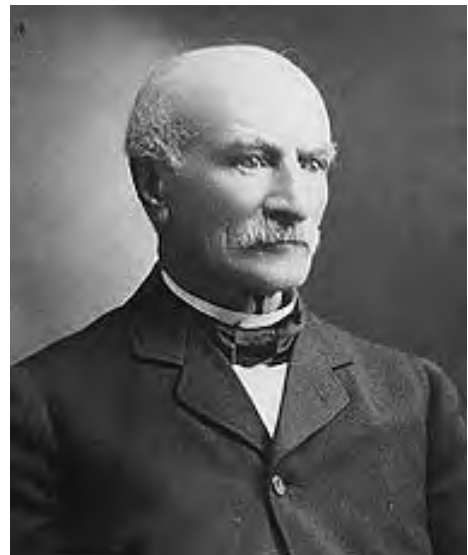


Minnesota Gophers vs Iowa Hawkeyes

Mayo Clinic, Rochester, Minnesota

The next stop was the world-famous Mayo Clinic in Rochester, Minnesota. The Mayo Clinic was founded by William Worrall Mayo M.D. in 1864 who was born near Manchester, England who emigrated to the United States. On January 27, 1864, Mayo advertised in the *Rochester City Post* the opening of a private medical practice "over the Union Drug Store on Third Street" with "all calls answered by day or night". The Mayo Clinic developed further when Both of W. W. Mayo's sons, William James Mayo (1861–1939) and Charles Horace Mayo (1865–1939), who became known as Dr. Will and Dr. Charlie, grew up in Rochester and attended medical school. The hospital is affiliated to the Mayo Clinic Alix School of Medicine. It has been ranked no.1 hospital in the USA for the past 7 years. There is a stellar hand faculty at the Mayo Clinic with many of them leading experts in their sub-specialty interests. This includes Prof. Steve Moran (Incumbent ASSH President, Dr. Sanj Kakar, Dr. Alex Shin, Dr. Peter Rhee, Dr. Allen Bishop, Dr. Brian Carlsen & Dr. Nicholas Pulos.

William Worrall Mayo



The Mayo Clinic logo is comprised of three interlocking shields representing their core commitment to patient care, research and education.

Mayo Clinic Day 1

On the first day, I was invited to the Mayo Clinic Grand Rounds at the beautiful Gonda Building. They regularly host visiting Professors. That morning was Professor Amy Ladd who is the Elsbach-Richards Professor of Surgery at Stanford University. She presented her fascinating research on base of thumb arthritis biomechanics and her innovative arthroplasty designs. It was interesting hear the different perspectives on the surgical treatment of a common condition from different centres in the US.

I then joined Prof. Steve Moran in the OR for the day. He ran two theatres concurrently to be as efficient as possible. Cases included reconstruction of a paediatric hypoplastic thumb using a FDS ring opponensplasty. Another case was a patient who had a GCT of the bone of a metacarpal which underwent excision and allograft reconstruction but then developed AVN of the metacarpal head. He utilised a pyrocarbon hemiarthroplasty to resurface the metacarpal head. I also observed a camptodactyly release in an 18-year-old patient. What struck me at the Mayo Clinic was a scale of resources that were available. For example, there was a team of professional photographers available to take photographs and videos of each operation for the purposes of documenting them in the patients notes and for research. We concluded the day with dinner at CRAVE American kitchen with faculty and the wonderful Mayo hand fellows.

Dinner with Mayo Clinic Hand Faculty & Fellows





Me with Dr. Sanj Kakar (Mayo Clinic) & Kushal Shah (Indian ASSH Travelling Fellow)

Mayo Clinic Day 2

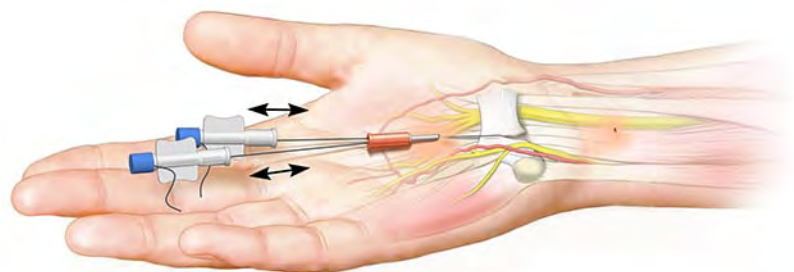
The second day started with the journal club at 7 am at the St Mary's Campus. I was kindly invited to present on research I have completed titled "Lunate prosthetic arthroplasty for the treatment of Kienbock's disease: A systematic review." It was a great honour! We then had presentations from the hand fellows and the progress they had made on their research projects.

Presenting at the Mayo Clinic



I then attended the OR with Dr. Alex Shin who has an interest in brachial plexus and peripheral nerve surgery. I observed him performing an innovative minimally invasive technique for carpal tunnel decompression where a flexible metal thread is passed retrograde from distal to proximal under the transverse carpal ligament using ultrasound guidance then shuttled above the ligament with only two puncture wounds on the surface. The two limbs of the metal thread are held and then pulled distally in a jiggly saw fashion to cut the ligament. He made the technique look simple but it does require an in-depth knowledge anatomical ultrasound appearances of the carpal tunnel and what critical structures that are at risk such as a superficial palmar arch, Berritini anastomosis and the motor branch of the median nerve. I also noticed that there were Physical Medicine & Rehabilitation (PM&R) practitioner's being taught the technique to increase the volume of patients being treated in a multidisciplinary carpal tunnel clinic.

Threaded ultrasound carpal tunnel decompression technique



Other cases that day I observed an A1 pulley reconstruction using a gracilis allograft wrap around the metacarpal neck in a patient with a post traumatic median and ulnar nerve injury and flexor tendon bowstringing as well as two TriMed fragment specific distal radius fixation cases and a subcutaneous ulna nerve transfer for cubital tunnel syndrome. It was a packed day full of tips and tricks and interesting discussions about both common and complex hand conditions.

Mayo Clinic Day 3

On the final morning of the visit I was invited to the weekly faculty meeting where we heard presentations on distal radius rehabilitation from the academic hand therapy department and from two fellows from Finland (Dr. Mikko Raisanen) and Brazil (Dr. Raquel Imaguchi) who were also visiting the Mayo Clinic. Sadly, my time at the Mayo Clinic was up. It's an incredible place to visit and I barely scratched the surface of what great things happen there. I then headed to the tiny Rochester International Airport to fly to my final destination. It's an interesting airport which has a fully private runway and terminal for private jets and VIPs only which reflects the international reputation of the Mayo Clinic.

*Me & the Mayo brothers
outside the Gonda Building –
Mayo Clinic*



Duke University Medical Centre, Durham, North Carolina

The final stop on the fellowship was Duke University Medical Centre in Durham, North Carolina. Duke University is an elite research university and was founded in 1838 as Brown School and had several name changes in its history. In 1924 James B. Duke established the Duke Endowment Fund with a £40 million trust fund which established the current Duke University. It notable for being the birthplace of the first Physician Assistant degree program in the US and Duke University Hospital was completed in 1980. It has an outstanding reputation in college sports and are known as the Duke Devils. The men's basketball team have won the National Collegiate Athletic Association (NCAA) championship in 1991, 1992 and again in 2001, 2010 and 2015 making them one of the most successful in collegiate sports. The basketball student fans are fondly known as the "Cameron Crazies" named after the Cameron Indoor Stadium where the home games are hosted.

We were hosted at Duke by the brilliant Prof. Warren Hammert and Prof. Marc J. Richard. The Duke hand unit has a fantastic reputation and notable alumni and faculty include Prof. James Urbaniak (of the ring avulsion classification fame) and Prof. James Nunley. On a personal note my previous fellowship mentor Dr. Richard Lawson at the Royal North Shore Hospital, Sydney, Australia was previously a fellow here.

Duke Day 1

On this leg of the fellowship I was joined by Dr Rustem Celil representing Turkey and Dr. Marion Muhldorfer-Fodor from Germany. We kicked off the visit at 7am at the Duke Health Centre Arrington for the weekly fellows teaching programme. Prof. Hammert delivered an excellent and evidence packed talk on scaphoid fractures. The Arrington building is a dedicated centre comprising of dedicated clinic and theatre floors. I joined Prof. Hammert in the morning for his clinic. He was supported by his team of fellows, sports physicians and physician's associates. We saw some great cases including a patient with a both bone forearm fracture which was fixed and then went onto a malunion with limited forearm pronation. We discussed the use of 3D planning and custom printed osteotomy jigs to correct the deformity. It was also interesting to discuss common topics such as their preferred technique for taking hand x-rays. In the afternoon, I joined Prof. Richard in the OR where I observed a distal biceps tendon repair using the endobutton and a ORIF of a displaced spiral P1 fracture which was reduced closed and clamped before passing a retrograde intramedullary screw. What was innovative is that a poller screw was inserted from dorsal to volar to increase the fracture stability and to stop wind-sweeping of the screw in the proximal metaphysis of the bone.

Duke Orthopaedics



In the evening, we had a wonderful dinner with faculty and fellows at the Glasshouse Kitchen.

Duke Day 2

On the second day, I again attended the OR and clinic. I observed several Microaire endoscopic carpal tunnel decompressions and a EI to EPL tendon transfer. There was also a high-volume procedure room where procedures such as excision of mucoid cysts, trigger finger releases and open carpal tunnels are performed. Halfway through the day the clinic and OR were halted because of a tornado alert as the powerful Storm Helene tore through North Carolina causing sadly loss of life and damage to property. It was a surreal experience where we were all instructed to stay away from the windows and stay towards the interior of the building. A tornado was apparently spotted at the nearby Duke University Campus. The staff didn't seem to be perturbed by what was going on but I certainly was! Thankfully the storm passed without incident.

Tornado Alert



I storm allowed me some time to wander around the building. I spotted some wonderful paintings and illustrations. They were gifts from graduating fellows from the hand programme to the department.

Fellow illustrations



Duke Fellows & Faculty



I had one day left before I headed home. I decided to visit the Duke University Campus see the beautiful gothic architecture and see the impressive Duke University Chapel. The Sarah Duke botanical gardens is also well worth a visit and gave me time to reflect on my experiences on the trip.

Duke University Campus



Concluding remarks

The International ASSH travelling fellowship was a once in a lifetime experience. In a world of online meetings and accessibility to leading experts remotely through webinars and lectures there is a question about whether travelling fellowships are still relevant in 2024. I would argue that they are absolutely essential. The informal corridor conversations and discussion's over cups of coffee about common and complex conditions of the hand is where I gained the most from the fellowship. It was an rare opportunity to get to know the famous authors we hold in such high regard. So many times, I would bring up a classic paper that a surgeon wrote many years ago and they would say something like "Oh I've changed my mind on that problem and I do things differently now" or conversely that they do the exact same technique now despite advances in technology. I found that the US healthcare system to be resource rich and so many things which are challenging at home aren't much of an issue there. However, this observation should be balanced against those folks there who cannot access healthcare or are unable to afford it. The passion and dedication to hand surgery and desire to achieve excellence was present in abundance everywhere I visited. The camaraderie, collegiality and hospitality was outstanding. The friendships I have made I hope will be enduring and perhaps blossom into collaborations on research and education endeavours in the future. The world is a smaller place. I won't feel like a stranger should I venture to the US for meetings and conferences in the future. It has been an absolute privilege and honour to represent the BSSH on the fellowship and I am forever grateful for their generous support that the fellowship could happen.

K.R. Vaghela
International ASSH Fellow 2024