

# Final Programme

## BOA ANNUAL CONGRESS 2018

### Taking Stock: Planning the Future

25<sup>th</sup> - 28<sup>th</sup> September, ICC Birmingham



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Supporting healthcare professionals

## President's message

Dear Friends and Colleagues,

### ***Welcome to the BOA Congress in Birmingham 2018***

Thank you for joining us at the BOA Congress to help us mark our Centenary year. This year the Congress theme is 'Taking stock: Planning the future'. Both Orthopaedic surgery and surgeons have changed enormously in the passing of the century since 1918, when a group of 12 Orthopaedic surgeons met and formed what was to grow into the British Orthopaedic Association with nearly 5,000 members today. I am honoured to be representing the BOA as President in this celebratory year.



Please make sure to spend some time at our archive exhibit, which highlights some of the groundbreaking achievements of the many brilliant surgeons that have come before us, some of whom are still among us today. I would also like to invite you to sign our commemorative book at the BOA stand, a once in a century commemoration of the presence of our members at the annual meeting. We are hoping everyone attending Congress can add a few lines into the book that we can include in our archive for future generations.

We have some amazing lectures and sessions this year, which you should find interesting and informative. I am delighted to welcome Dr Mathew Varghese from India to deliver my Presidential Guest Lecture. Dr Varghese has specialised in trauma care with an emphasis on reconstructive surgery for trauma and deformities in adult and paediatric patients. He presided over the last polio ward in the world.

We are pleased to welcome the Indian Orthopaedic Association as our guest nation to mark our Centenary year and look forward to their contributions in their session.

We have two King James IV Professorship Lecturers this year. Professor Jon Clasper was Defence Professor of Trauma and Orthopaedics from 2009-2014, and Fergal P Monsell is a Consultant at the Royal Hospital for Children, Bristol since 2005.

Additionally, we have some inspirational speakers for our plenary lectures, including war veteran and author, Mark Ormrod, who will be delivering the Howard Steel Lecture. Professor Hamish Simpson will present the Robert Jones lecture. Professor Romain Seil will deliver the Adrian Henry Lecture and Professor Wayne and Professor Wayne Paprosky from Chicago will be delivering the Charnley Lecture.

Specialist topics including Trauma, Research, the National Joint Registry and many more will cover the remaining sessions in the programme. To mark our Centenary year, we are holding sessions on the History of the BOA and the History of Trauma and Orthopaedics.

We hope you enjoy our Congress in Birmingham this September as we commemorate 100 years of the British Orthopaedic Association and thank you for your contributions to the development of the profession.

**Ananda Nanu**  
**BOA President**

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# BOA Council 2018

## Officers

President	A M Nanu	(Sunderland)
Immediate Past President	I G Winson	(Bristol)
Vice President	P G Turner	(Stockport)
Vice President Elect	D J McBride	(Stoke-on-Trent)
Honorary Treasurer	J A M Skinner	(Hertfordshire)
Honorary Secretary	D M Eastwood	(London)

## Elected Members

S Bendall	(Haywards Heath)	2016 - 2018
K Daly	(London)	2016 - 2018
R C Handley	(Oxford)	2016 - 2018
J A M Skinner	(Hertfordshire)	2016 - 2018
M Bowditch	(Ipswich)	2017 - 2019
L Breakwell	(Sheffield)	2017 - 2019
S L Hodkinson	(Portsmouth)	2017 - 2019
R W Parkinson	(Liverpool)	2017 - 2019
P V Giannoudis	(Leeds)	2018 - 2020
R L Morgan-Jones	(Cardiff)	2018 - 2020
A H R W Simpson	(Edinburgh)	2018 - 2020
D Tennent	(London)	2018 - 2020

## Ex-Officio Members

Chair, British Orthopaedics Directors Society	V Takwale
Chair, Council of Management of the Bone and Joint Journal	T J Wilton
Chair, Education and Revalidation Committee	H Tanaka
Chair, N Ireland Regional Orthopaedic and Trauma Committee	S Henderson
Chair, Patient Liaison Group	TBA
Chair, Research Committee	M Costa
Chair, Scottish Committee for Orthopaedics and Trauma	E R Dunstan
Chair, Specialty Advisory Committee in Trauma and Orthopaedics	M Bowditch
Chair, Training Standards Committee	B Bhowal
Chair, Welsh National Specialist Advisory Group for T&O	S Hemmadi
President, British Orthopaedic Trainees Association	V Bucknall
Representative, Staff and Associate Specialist (SAS)	M Morgan

## Honorary Post

Archivist	I B M Stephen
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## Carousel Presidents

<p><b>AAOS</b> Dr William Maloney</p>	<p><b>AusOA</b> Lawrence Malisano</p>	<p><b>NZOA</b> Mr Richard Street</p>
<p><b>AOA</b> Dr Rick Wright</p>	<p><b>COA</b> Dr John Antoniou</p>	<p><b>SAOA</b> Dr Leon Rajah</p>

## Awards and Prizes

The BOA is delighted to use the Annual Congress as an opportunity to publicise and celebrate the following awards granted by the Association in 2018:

### BOA Honorary Fellows

Mr David Jones  
Mr E Paul Szypryt  
Professor Peter Kay  
Mr Henrik Malchau

### Presidential Merit Award

Lisa Hadfield-Law

### Robert Jones Essay Prize

Lyndon Mason

### Invited Guests

**IOA (Indian) President**

Dr Mandeep Dhillon

**IOA (Irish) President**

Mr David Beverland

**HKOA (Hong Kong) President**

Dr YC Wong

**Immediate Past President of APOA**

Professor David Choon

**Presidents Guest**

Mr Anthony Theodore Cross

**The Royal College of Surgeons of England**

Professor Derek Alderson

**The Royal College of Surgeons of Edinburgh**

Professor Michael Lavelle-Jones

**Hong Kong Young Ambassador**

Dr Chun Hoi Yan

**Immediate Past President of EFORT**

Professor Önder Aydingöz

### Guest Nation

#### IOA President, Dr Professor Mandeep Dhillon

**Mandeep S Dhillon** currently Heads the Department of Orthopaedics, and Physical Medicine & Rehabilitation at the Postgraduate Institute of Medical Education and Research. Mandeep does research in Orthopaedic Surgery, Foot Injuries, Orthobiologics and Sports Medicine.



#### Indian Orthopaedic Association (IOA)

The IOA is one of the largest professional organisations which has more than 13,000 active life members. It is a vibrant organisation which focuses on academics, research and social networking. From the time of its formation in 1955, in these 60 years this organisation has evolved into a strong professional body with many sub-committees and regional committees. It is a constantly growing organisation not only in terms of increasing memberships but also in all other fronts like fellowships, CMEs, orations and sub-specialty meetings.

The history, birth and development of the Indian Orthopaedic Association is very similar to that of the British Orthopaedic Association, probably due to our past association with the United Kingdom. The Silver Jubilee conference at Bombay in 1980 is remembered especially for two developments: the initiation of the CME Programme and the Silver Jubilee Commemoration lecture. Both these have been extremely informative and well appreciated. The IOA has been successfully conducting Instructional Course Lectures, and member fellowships.

Many regional and state chapters in existence in various parts of the country are doing excellent work and contributing in various ways to the continued growth of the parent association. The CME programme each year has been an excellent showcase of the current state of art in Orthopaedics. The aims of the CME are to provide current knowledge to the practicing surgeons, instructional course lectures to post graduate students, and insight into management protocol to the members of the association. Looking at the vast strides taken by our body, there is no doubt that the future is extremely bright.

# General Information

## Registration

The enquiry, online registration and on-site registration desks are located in the main Foyer on Level 4 next to the exhibition hall.

	Registration Opening Times	Exhibition Hall Opening Times
<b>Tuesday 25th September</b>	<b>07:15 - 17:30</b>	<b>07:15 - 17:45</b>
<b>Wednesday 26th September</b>	<b>07:15 - 17:15</b>	<b>07:15 - 17:00</b>
<b>Thursday 27th September</b>	<b>07:15 - 17:30</b>	<b>07:15 - 16:50 (Close of Exhibition)</b>
<b>Friday 28th September</b>	<b>07:15 - 13:30</b>	<b>Exhibition closed</b>

For security purposes and delegate management, delegates must wear their name badge at all times.

**To ensure an accurate record of your attendance, please ensure you scan your badge on arrival each day by a host located at one of the rescan registration desks.**

## Delegate Meeting Packs

**On arrival delegates will receive:**

- Name badge permitting access to all sessions
- Lanyard containing the Pocket Programme
- Delegate bag containing Final Programme, pen and notebook.

## Finding Your Way Around

**The venue - ICC Birmingham**

Level 5a: Executive rooms 7, 8 and 10.

Level 5: Hall 8 and Executive rooms 1 and 2.

Level 4: The Main Auditorium (Hall 1), Exhibition (Hall 3 and Hall 1 Foyer), Hall 5 and Speaker Preview Room (Media Suite)

Level 3: Hall 11A and Hall 11B.

Prayer Room is situated on Level 3.

### Speakers Preview Room

The media suite situated on Level 4 is open daily at the following times:

- Tuesday, 07:15 - 20:30
- Wednesday and Thursday, 07:15 - 18:00
- Friday, 07:15 - 16:00

(If you are presenting, please make sure you upload your presentation in good time before the start of the session.

Where possible, please upload the day before.)

### Poster Display

There are 18 categories of posters within the exhibition area in the Galleria, which will be displayed over three days. We request authors to remove their posters from the exhibition area on Thursday, no later than 16:50. Any posters remaining after this time can be collected from the registration area until 13:00 on Friday, after this time they will be destroyed. Posters by the Clinical Leaders will be displayed on Thursday 27th September only.

## Exhibition

There are 80+ companies within the exhibition area in Hall 3, The Galleria and Hall 1 Foyer. We would encourage all delegates to visit the exhibition stands, especially the BOA stand located in the main Foyer on Level 4.

## Cloakroom

The cloakroom is located in the Mall area near to the entrance.

	Cloakroom Opening Times
<b>Tuesday 25th September</b>	<b>07:15 - 19:30</b>
<b>Wednesday 26th September</b>	<b>07:15 - 18:45</b>
<b>Thursday 27th September</b>	<b>07:15 - 18:30</b>
<b>Friday 28th September</b>	<b>07:15 - 16:30</b>

## Refreshments and Lunches

Tea and coffee will be served to all delegates during the scheduled networking breaks. Lunch is provided for delegates who pre-ordered and paid for their lunch online at the time of registration.

When going for lunch at the lunch stations in Hall 3, you will need your badge which indicates what days you have paid for lunch. Without this you will not be able to collect your food.

## Catering at the ICC

For those who have not pre paid for lunch there is a Starbucks, Strada and WHSmith located on The Mall.

## General Information

### CPD Points and Certificate of Attendance

There will be an opportunity to gain CPD points at the BOA Congress. CPD points are allocated as follows:

Tuesday:	6 points
Wednesday:	6 points
Thursday:	6 points
Friday: *	
Non-Technical Skills - RCSEd:	3 points
TOCS and TOES:	6 points

\*The sessions on the Friday that are relevant to delegates personal development plans, will be eligible to claim one additional CPD point for every hour attended.

The CPD points are stated on the BOA Congress website, delegates will be required to carry out their own self-accreditation.

A certificate of attendance is issued following the Annual Congress on completion of the evaluation form, which is sent via email to each delegate.

**Please Note:** Delegates may request a certificate of attendance up to six months following an Annual Congress, after this time a certificate will not be issued. It is the responsibility of the delegate to make sure they receive their certificate of attendance within the stated time.

### Travel Policy

Delegates are responsible for making their own travel and/or hotel arrangements. The BOA does not assume financial responsibility for penalties or expenses incurred by registrants who must cancel travel arrangements due to course cancellation.

### Declarations of Interest

All those presenting at the BOA Congress will be asked to make their declarations of interest and display it on a slide at the start of their presentation, as discussed and agreed at the BOA AGM in 2015.

### Other Information

The BOA does not accept liability or responsibility for third party exhibitors or their exhibits and does not endorse any of the products, items or processes exhibited.

### In Case of an Emergency

Please note the various fire exits around you in case of an emergency. Listen to all public announcements and make your way carefully to the nearest fire exit if requested to do so.

If first aid is required, please ask a member of staff or venue host for help and assistance.

### BOA Annual Congress App

Enhance your delegate experience through the **official BOA Congress App** by:

- **Planning Ahead** - see programme, session and speaker info and bookmark your sessions in advance
- **Viewing Abstracts** - view the schedule for all podium presentations and access the list of posters
- **Networking** - view delegate list, interact with other attendees, keep in touch
- **Getting Involved** - post your comments, updates and share your experience
- **Meeting the exhibitors** - industry details from exhibitors
- **Keeping up to date** - live notifications for the duration of congress

## Download the Congress App now



**Download the Congress App now** to your smartphones and tablets through the Apple Store and GooglePlay (search for BOA Annual Congress App).

To view the delegate list and connect with other delegates you will be asked to create a profile, please use the email address you registered with to login as you will be sent a verification code.

# BOA Annual General Meeting 2018

The Annual General Meeting of the Association will take place in Hall 5 of the ICC Birmingham, on Thursday 27th September 2018 from 13:00-13:30 under the Chairmanship of Mr Ananda Nanu, BOA President. The agenda is below.

**PROXY NOTICE: A member of the Association who is entitled to attend, speak and vote at the above mentioned meeting is entitled to appoint a proxy to attend and vote instead of him or her. For details please see the note at the foot of this agenda.**

## AGENDA

1. **Membership issues** [see annex 1]
  - a. Deaths
  - b. Resignations
  - c. New members
  - d. Honorary Fellows
2. **Matters arising from 2017 AGM**

None
3. **Elections**
  - a. President: September 2020-2021  
To report the result of the Trustees' ballot:
    - **Mr Robert Handley**
  - b. Council: 2019-2021  
To report the result of the Home Fellows' ballot:
    - **Mr Grey Giddins**
    - **Mr Robert Gregory**
    - **Mr Fergal P Monsell**
    - **Mr Arthur Stephen**
  - c. Additional Trustee to Council: September 2018-2019  
To report the appointment of Ian Winson, Past President, as an additional Trustee for one year in accordance with Article 32 of the Memorandum [see annex 2]
4. **Honorary Treasurer's Report and Financial Statements for 2017**
  - a. Annual Report of Trustees Financial Statements 2017 - see link below:  
<https://www.boa.ac.uk/about-boa/2017-annual-report-accounts/>
  - b. Resolution 1: To reappoint the Auditors for 2019 - Crowe Clark Whitehill
  - c. Resolution 2: To approve the membership subscription rates for 2019 [see annex 2]
5. **Membership Update & BOA Developments**
6. **President's report**
7. **Any other business**
8. **Date of next meeting**

BOA Annual Congress - 10th-13th September 2019; Liverpool  
Under the Chairmanship of Professor Philip Turner.
9. **Future BOA and Allied Meetings**

BOA Annual Congress - 15th-18th September 2020; Birmingham  
Under the Chairmanship of Mr Donald McBride.  
EFORT Congress - 5th-7th June 2019; Lisbon, Portugal

## NOTE

BOA Home Fellows received the AGM notification and proxy form by post in advance of this meeting, explaining the arrangements for appointing a proxy. The BOA must be notified of any proxies at least 72 hours in advance of the meeting. Items for discussion under 'Any other business' should preferably be advised to the Honorary Secretary (Professor Deborah Eastwood) at least 72 hours in advance of the meeting.





# 2019 Annual Scientific Meeting Nottingham

27th February - 1st March



## IMPORTANT DATES:

- 28th Sep - Registration OPEN
- 28th Sep - Abstract submission OPEN
- 30th Nov - Abstract submission CLOSE

**VENUE:** Royal Concert Hall, Nottingham

## TOPICS IN FOCUS:

- Hip preservation surgery update
- Acceptable activities post hip surgery
- 'Follow up' post hip arthroplasty: Who, when, how often and who pays?
- How and by whom should implant choice be determined?
- 15 years of the National Joint Registry
- Peri prosthetic fractures
- Hip revision planning and achieving optimum outcomes

## OTHER FEATURES:

- Academic podium and poster presentations
- Hot Topics in Hip surgery in 2019
- Clinical case discussions
- Non Arthroplasty Hip Register
- ACPA parallel conference
- Educational industry seminars

## Plenary Speakers

**TUESDAY 25<sup>TH</sup> SEPTEMBER - 12:40-13:15**

### HOWARD STEEL LECTURE

**You Can't Spell Disability Without ABILITY...**

**Mark Ormrod**



Mark Ormrod served for ten years as a Royal Marine, in both Iraq and Afghanistan. While on manoeuvres in Helmand Province he was caught in a landmine explosion and lost both legs and one arm. After defying the odds and surviving the explosion, Mark competed in the Invictus Games, in cycling, rowing, swimming and athletics, where he won four medals and was singled out for praise by Prince Harry.

**TUESDAY 25<sup>TH</sup> SEPTEMBER - 16:15-16:45**

### KING JAMES IV PROFESSORSHIP LECTURE

**Some Observations on Limb Reconstruction in Children: Where are we now and where are we going?**

**Fergal P Monsell**



Fergal Patrick Monsell has been a Consultant at the Royal Hospital for Children, Bristol since 2005. His paediatric practice is broad based with a special interest in the management of patients with limb deformity. He has some experience in surgical and prosthetic management of this patient group and leads a multi-disciplinary team. He is also involved in all aspects of paediatric trauma and the treatment of children with cerebral palsy using a spectrum of contemporary techniques. In 2000 he was an ABC travelling fellow, is the immediate Past President of the Limb Reconstruction Society, Member of the Board of the Society for Children's Orthopaedic Surgery and Member of the Education Committee of the BOA.

**WEDNESDAY 26<sup>TH</sup> SEPTEMBER - 12:10-12:40**

### PRESIDENTIAL GUEST LECTURE

**Orthopaedics in an equal world: my journey from knowledge to understanding**

**Dr Mathew Varghese**



Dr Mathew Varghese is a distinguished alumnus of Maulana Azad Medical College, University of Delhi. He is currently the Head of the Department of Orthopaedics, St Stephen's Hospital, Delhi, and served as Director of the hospital 1999-2006. He is an associate faculty at the Transportation Research and Injury Prevention Programme, a WHO collaborating centre, Indian Institute of Technology, Delhi.

He is an expert on injury control, and emergency care of trauma patients. Specialising in reconstructive surgery for Polio patients he runs one of the last remaining Polio wards in the country. With 50,000 children on rolls he also led the largest clubfoot programme in the world.

**WEDNESDAY 26<sup>TH</sup> SEPTEMBER - 13:40-14:10**

### ROBERT JONES LECTURE

**Fighting Every Surgeon's Enemy: Past, Present and Future**

**Professor Hamish Simpson**



Professor Hamish Simpson is Professor of Orthopaedics and Trauma, and Consultant Orthopaedic Surgeon in the Department of Orthopaedic Surgery at the University of Edinburgh, specialising in limb reconstruction, musculoskeletal infection and paediatric deformity. He is president of the Combined Services Orthopaedic Society and an elected BOA council member. He is past chairman of the SCOT and past president of the BLRS, BORS and the Association of Professors of Orthopaedic Surgery.

## Plenary Speakers

**WEDNESDAY 26<sup>TH</sup> SEPTEMBER - 16:20-17:45**

**CHARNLEY LECTURE**

**How characterisation can make what is complicated predictable**

**Professor Wayne Paprosky**



Working as part of the highly regarded Mid-West Orthopaedic Group at Rush University Medical Centre in Chicago USA, Wayne has been at the forefront of lower limb arthroplasty surgery for years. Against the background of his complex clinical practice, Wayne has published extensively, making a huge contribution to the management of primary, complex primary and hip revision surgery, Wayne has become a 'household' name in revision surgery with his development and popularisation of the most widely used, and clinically relevant classifications of bone loss on both the femoral and acetabular side. Wayne has a worldwide reputation as a lecturer and it is a great pleasure that he has accepted our invitation to deliver this prestigious lecture, as part of the British Hip Society sessions, at the BOA centenary meeting.

**THURSDAY 27<sup>TH</sup> SEPTEMBER - 10:30-12:00**

**NAUGHTON DUNN LECTURE**

**Ankles: Why on Earth?**

**Professor C. Niek van Dijk**



Prof. C. Niek van Dijk, MD, PhD is a leading authority for arthroscopic surgery of the ankle. He is the founder of the Amsterdam Foot and Ankle school and currently working in the FIFA Medical Centres of Excellence. Between 2002-2016 he was head of the Orthopaedic Department of the AMC hospital and a professor in orthopaedic surgery at the University of Amsterdam, where he specialised in surgery of the ankle and hindfoot.

**THURSDAY 27<sup>TH</sup> SEPTEMBER - 12:10-12:40**

**KING JAMES IV PROFESSORSHIP LECTURE**

**New Insights in the Mechanisms of Injury from Blast**

**Professor Jon Clasper**



Jon qualified from Glasgow University in 1986 and completed his basic surgical training in the armed forces. His higher surgical training includes a year in the USA, and 3 years at Oxford. From 2009-14 Jon was the Defence Professor of Trauma and Orthopaedics. In 2010 Jon was appointed as a Visiting Professor in Bioengineering at Imperial College London. He is the author of a number of book chapters and of specific papers on trauma and upper limb surgery and has gained doctorates in both Medicine and Philosophy.

**THURSDAY 27<sup>TH</sup> SEPTEMBER - 15:10-16:20**

**ADRIAN HENRY LECTURE**


**Joint efforts to gain knowledge in paediatric ACL injuries**

**Professor Romain Seil**




Professor Seil studied medicine in Luxembourg and Brussels. He works as an orthopaedic surgeon at the Centre Hospitalier de Luxembourg since September 2004 where he is Head of the Department of the musculoskeletal system. His main areas of clinical activity are orthopaedic sports medicine as well as primary and revision knee reconstructive surgery. Professor Seil is fellow of the American Orthopaedic Society for Sports Medicine since 2001 and member of many national and international medical professional societies. He is currently Past President of the European Society of Sports Traumatology, Knee Surgery and Arthroscopy (ESSKA), as well as President of the German-speaking Society in Orthopaedic and Traumatologic Sports Medicine (GOTS).

## Tuesday 25<sup>th</sup> September

Time	HALL Main Auditorium <b>1</b>	HALL <b>5</b>	HALL <b>8</b>	HALL <b>9</b>
07:15	<b>Registration</b>			
08:30 - 10:00	Key areas of current and future orthopaedic research OTS Research	BJ360 BJJ Revalidation	BODS	Keeping CRPS out of your clinic BSSH Revalidation
10:00 - 10:30	Tea and Coffee			
10:30 - 12:00	On call and covering kids OTS Revalidation 1	BJ360 BJJ Revalidation	Developments in metastatic disease, endoprosthesis reconstruction and tumours affecting the upper limb BOOS Revalidation	Hands Free papers
12:10 - 12:30	Relocate to Main Auditorium			
12:10 - 12:30	Presidents Welcome			
12:30 - 12:40	BOA Honorary Fellowship and Presidential Merit Awards			
12:40 - 13:15	Howard Steel Lecture: Mark Ormrod			
13:15 - 14:15	Lunch			
14:15 - 15:45	Current issues in the management of fragility fractures OTS Revalidation 2	Regenerative Medicine: Coming to a clinic near you soon? BORS	Using NJR data responsibly to improve care The National Joint Registry	General/Tumour Free Papers 1
15:45 - 16:15	Tea and Coffee			
16:15 - 16:45	King James IV Professorship Lecture: Fergal P Monsell			
16:45 - 18:00	 <b>100 years of the BOA</b>			
18:00 - 19:30	BOA Welcome Drinks Reception			

## Tuesday 25<sup>th</sup> September

HALL 10	HALL 11A	HALL 11B	HALL 3
<b>Registration</b>			
	Controversies in ACL reconstruction BOSTAA Revalidation		Exhibition
<b>Tea and Coffee</b>			
Scaling up hip fracture quality: Learning from the national collaborative	Controversies in ACL reconstruction BOSTAA Revalidation		Exhibition
<b>Relocate to Main Auditorium</b>			
<b>Presidents Welcome</b>			
<b>BOA Honorary Fellowship and Presidential Merit Awards</b>			
<b>Howard Steel Lecture: Mark Ormrod</b>			
<b>Lunch</b>			
Basic Science Free Papers	Quality Improvement Free Papers		Exhibition
<b>Tea and Coffee</b>			
<b>King James IV Professorship Lecture: Fergal P Monsell</b>			
 <b>100 years of the BOA</b>			
<b>BOA Welcome Drinks Reception</b>			

# Wednesday 26<sup>th</sup> September

Time	HALL Main Auditorium <b>1</b>	HALL <b>5</b>	HALL <b>8</b>	HALL <b>9</b>
07:15	<b>Registration</b>			
08:30 - 10:00	<b>Tricky Decisions</b> OTS Revalidation 3	<b>Hip</b> Free papers	<b>Childrens</b> Free Papers	<b>Best of the Best</b>
10:00 - 10:30	<b>Tea and Coffee</b>			
10:30 - 12:00	<b>Medico-Legal aspects of trauma</b> OTS Revalidation 4	<b>Orthopaedic Research Updates</b> BOA Research Committee	<b>Paediatric Lower limb Trauma Management</b> BSCOS Revalidation	<b>Best of the Best</b>
12:00 - 12:10	<b>Relocate to Main Auditorium</b>			
12:10 - 12:40	<b>Presidential Guest Lecture: Dr Mathew Varghese</b>			
12:40 - 13:40	<b>Lunch</b>			
13:40 - 14:10	<b>Robert Jones Lecture: Professor Hamish Simpson</b>			
14:10 - 14:20	<b>Relocate to Session Rooms</b>			
14:20 - 15:50	<b>Issues in hip surgery: an update on clinical assessment, imaging, surgical approach and commissioning in 2018</b> BHS Revalidation	<b>NHFD annual report update, the WHITE study result and result from the physiotherapy sprint audit</b>	<b>Trauma conundrums: pilon and open fractures</b> BLRS Revalidation <b>BLRS Free Papers</b>	<b>IT'S SHOWTIME!</b> #ActItOut Lights... camera... action! BOTA
15:50 - 16:20	<b>Tea and Coffee</b>			
16:20 - 17:45	<b>Issues in hip surgery: an update on clinical assessment, imaging, surgical approach and commissioning in 2018</b> BHS Revalidation	<b>Trauma</b> Free Papers 1	<b>Research methodology and the key facets that underpin successful publishing</b> BJJ	<b>General Free Papers 2</b>
	<b>Charnley Lecture:</b> Professor Wayne Paprosky			<b>BOA/IOA Exchange Fellowships: What can we offer?</b>
<b>BOA Council Dinner</b>				

## Wednesday 26<sup>th</sup> September

HALL 10	HALL 11A	HALL 11B	HALL 3
<b>Registration</b>			
<b>Current Concepts in Management of fractures in the elderly</b> BIOS Revalidation	<b>Workforce Challenges: How should we use our physicians assistants?</b> Carousel Presidents	<b>Elective Care Restrictions: Impacts, Analysis and Action</b>	<b>Exhibition</b>
<b>Tea and Coffee</b>			
<b>South East Asia</b> WOC UK	<b>Evolution of Computer Assistance in Orthopaedic Surgery</b> CAOS UK	<b>Integrated care pathways for orthopaedics</b> ARMA	<b>Exhibition</b>
<b>Relocate to Main Auditorium</b>			
<b>Presidential Guest Lecture: Dr Mathew Varghese</b>			
<b>Lunch</b>			
<b>Robert Jones Lecture: Professor Hamish Simpson</b>			
<b>Relocate to Session Rooms</b>			
<b>Foot and Ankle Free Papers</b>	<b>Indian Summer: To showcase a different variety of pathologies uncommonly seen in the UK</b> BIOS	<b>The most common types of cyber enabled and operational fraud</b> Fraud Awareness	<b>Exhibition</b>
<b>Tea and Coffee</b>			
<b>An Overarching view of spinal conditions</b> Spine Revalidation 1	<b>Indian Summer: To showcase a different variety of pathologies uncommonly seen in the UK</b> BIOS		<b>Exhibition</b>
<b>BOA Council Dinner</b>			

# Thursday 27<sup>th</sup> September

Time	HALL Main Auditorium <b>1</b>	HALL <b>5</b>	HALL <b>8</b>	HALL <b>9</b>
07:15	<b>Registration</b>			
08:30 - 10:00	<b>Knee Free Papers</b>	<b>Current patient journey: Pre-hospital care through to rehabilitation and repatriation</b> Trauma Networks 1	<b>Ankle arthroscopy and instability</b> BOFAS Revalidation	<b>Innovation, Simulation and Education</b>
10:00 - 10:30	<b>Tea and Coffee</b>			
10:30 - 12:00	<b>Will I list this 50 year old patient for arthroscopy and menisectomy?</b> BASK Revalidation 1	<b>Current patient journey and Updates</b> Trauma Networks 2	<b>Ankle arthroscopy and instability</b> BOFAS  <b>Naughton Dunn Lecture:</b> Professor C. Niek van Dijk	<b>Innovation, Simulation and Education</b>
12:00 - 12:10	<b>Relocate to Main Auditorium</b>			
12:10 - 12:40	<b>King James IV Professorship: Professor Jon Clasper</b>			
12:40 - 13:00	<b>2018 Awards and Medals</b>			
13:00 - 13:30	<b>Lunch</b>	<b>AGM</b>	<b>Lunch</b>	
13:30 - 14:30	<b>Lunch</b>			
14:30 - 15:00	<b>President's Handover</b>			
15:00 - 15:10	<b>Relocate to Session Rooms</b>			
15:10 - 16:20	<b>Adrian Henry Lecture:</b> Professor Romain Seil  <b>Will I list this patient for a knee replacement?</b> BASK Revalidation 2	<b>Tips and tricks in nailing</b> OTS Hot Topics	<b>Spine Instant Updates</b>	<b>Medical Indemnity Premiums: the only way is up?</b> Medico-Legal
16:20 - 16:50	<b>Tea and Coffee</b>			
16:50 - 18:00	<b>Updates in Multidisciplinary Trauma Care</b> British Trauma Society	<b>Trauma Free Papers 2</b>	<b>Spine Free Papers</b>	<b>Medical Indemnity Premiums: the only way is up?</b> Medico-Legal



## Thursday 27<sup>th</sup> September

HALL 10	HALL 11A	HALL 11B	HALL 3
<b>Registration</b>			
<b>Spine Revalidation 2</b>	<b>VTE and NICE: don't shoot the messengers VTE</b>		<b>Exhibition</b>
<b>Tea and Coffee</b>			
<b>An Interactive Spinal session Spine Bootcamp</b>	<b>SAS in Orthopaedics SAS</b>		<b>Exhibition</b>
<b>Relocate to Main Auditorium</b>			
<b>Experiences and lessons learnt from the Manchester bombing Manchester Trauma Team (ATOCP)</b>	<b>King James IV Professorship: Professor Jon Clasper</b>		
	<b>2018 Awards and Medals</b>		
<b>Lunch</b>			
<b>Lunch</b>			
<b>President's Handover</b>			
<b>Relocate to Session Rooms</b>			
<b>Scientific Programme ATOCP</b>	<b>Management of injuries around the clavicle BESS Revalidation</b>		<b>Exhibition</b>
<b>Tea and Coffee</b>			
<b>The big debate: Day case knee replacement is in the patient's best interest ATOCP</b>	<b>Shoulder and Elbow Free Papers</b>		<b>Exhibition</b>

# Friday 28<sup>th</sup> September

Time	HALL Main Auditorium <b>1</b>	HALL <b>5</b>	HALL <b>9</b>	HALL <b>10</b>	HALL <b>11A</b>
07:15	<b>Registration</b>				
08:30 - 10:00	<b>Mandatory Good Clinical (Research) Practice</b> GCP Training	<b>NOTTs RCSEd</b> (Pre-registration only)	<b>Medical Students' Session</b>	<b>TOCs and TOEs</b> (Pre-registration only)	<b>CEC Registration</b>
					<b>Clinical Examination Course (CEC)</b> (Pre-registration only)
10:00 - 10:30	<b>Tea and Coffee</b>				
10:30 - 12:00	<b>Mandatory Good Clinical (Research) Practice</b> GCP Training	<b>NOTTs RCSEd</b> (Pre-registration only)	<b>Medical Students' Session</b>	<b>TOCs and TOEs</b> (Pre-registration only)	<b>Clinical Examination Course (CEC)</b> (Pre-registration only)
12:00 - 13:00	<b>Lunch</b>				
13:00 - 16:00			<b>Medical Students' Session</b>	<b>TOCs and TOEs</b> (Pre-registration only)	<b>Clinical Examination Course (CEC)</b> (Pre-registration only)
<b>Close</b>					

## Session Briefs

### Tuesday 25<sup>th</sup> September

08:30 - 10:00

Hall 1

#### Key areas of current and future orthopaedic research

##### OTS Research

Professor Matt Costa and Alan Johnstone will be co-chairing this year's Orthopaedic Trauma Society Research session. They have put together a great program looking at key areas of current and future orthopaedic research. Mike McKee, the OTS Guest speaker from North America will provide his insight into research lessons from Canada, where the concept of multi centre randomised controlled trials in trauma really began.

08:30 - 10:00

Hall 5

BJ360

##### PBJJ Revalidation

The BJ360 revalidation sessions cover, summarise and discuss all of the key, controversial and just interesting papers over the past year. A lively interactive open format session that aims to update and revalidate both the generalist and specialist in upper limb and lower limb research. Papers will be discussed in sufficient depth, along with supporting or conflicting evidence on clinically relevant topics with the opportunity for discussion and questions..

08:30 - 10:00

Hall 8

#### British Orthopaedic Directors Society (BODS)

Please find further information about this session on the BOA Congress App and the Congress website.

08:30 - 10:00

Hall 9

#### Keeping CRPS out of your clinic

##### BSSH Revalidation

Complex Regional Pain Syndrome is a condition that fills the heart of most orthopaedic surgeons with dread. It can turn a simple injury or operation into a complicated, frustrating, long-term encounter with an unhappy patient with significant ongoing needs. This is made all

the worse by the fact it is a confusing, complicated and misunderstood condition that doesn't respond to the usual orthopaedic approaches!

In this session we will debunk some of the myths of CRPS, will give practical advice of simple pathways that can easily be put in place that can reduce the incidence of CRPS and can identify CRPS early and stop it developing; and finally will tell you who can help you manage the more serious and chronic forms and how you can best access these services.

In short it will help you keep CRPS out of your clinic - can you afford not to attend!

08:30 - 10:00

Hall 11A

#### Controversies in ACL reconstruction

##### BOSTAA Revalidation

This session run by BOSTAA aims to explore the technical and decision-making controversies often associated with ACL reconstruction. Each lecture is delivered by an expert with a special interest in the field.

Issues covered include graft choice, timing of surgery, whether to repair or reconstruct and if to augment the antero-lateral corner. Other frequently debated topics such as what to do in the presence of chondral or meniscal damaged is also explored.

10:30 - 12:00

Hall 1

#### On call and covering kids

##### OTS Revalidation 1

The Orthopaedic Trauma Society is delighted to be providing the trauma content for the annual British Orthopaedic Association once again. These trauma sessions will be held in the main auditorium and are sure to be as popular as ever. We have an excellent trauma program this year - our four OTS trauma revalidation sessions will focus on aspects of paediatric trauma; specific issues around fragility fractures; coping with challenging and tricky decisions in clinic and when on call; and the Medico-Legal aspects surrounding trauma. We have Mike McKee as the OTS guest speaker from North America, who will offer his vast experience relating to fractures of the upper limb. These sessions will be a mixture of instructional lecture and case discussion, with opportunity for the audience to ask questions.

## Session Briefs

### Hall 5

#### BJ360

##### BJJ Revalidation

The BJ360 revalidation sessions cover, summarise and discuss all of the key, controversial and just interesting papers over the past year. A lively interactive open format session that aims to update and revalidate both the generalist and specialist in upper limb and lower limb research. Papers will be discussed in sufficient depth, along with supporting or conflicting evidence on clinically relevant topics with the opportunity for discussion and questions..

10:30 - 12:00

### Hall 8

#### Developments in metastatic disease, endoprosthetic reconstruction and tumours affecting the upper limb

##### BOOS Revalidation

This session is designed for trainees preparing for the FRCS(Orth) exam, but also established consultants who require a refresher / update.

National experts will present the latest developments in metastatic disease, endoprosthetic reconstruction and tumours affecting the upper limb. Subsequently, Professor Jeys will host a quiz.

10:30 - 12:00

### Hall 10

#### Scaling up hip fracture quality: Learning from the national collaborative

Please find further information about this session on the BOA Congress App and the Congress website.

10:30 - 12:00

### Hall 11A

#### Controversies in ACL reconstruction

##### BOSTAA Revalidation

This session run by BOSTAA aims to explore the technical and decision-making controversies often associated with ACL reconstruction. Each lecture is delivered by an expert with a special interest in the field.

Issues covered include graft choice, timing of surgery, whether to repair or reconstruct and whether to

augment the antero-lateral corner. Other frequently debated topics such as what to do in the presence of chondral or meniscal damaged is also explored.

### Hall 1

#### You Can't Spell Disability Without ABILITY...

##### Howard Steel Lecture

Mark Ormrod

14:15 - 15:45

### Hall 1

#### Current issues in the management of fragility fractures

##### OTS Revalidation 2

The Orthopaedic Trauma Society is delighted to be providing the trauma content for the annual British Orthopaedic Association once again. These trauma sessions will be held in the main auditorium and are sure to be as popular as ever. We have an excellent trauma program this year - our four OTS trauma revalidation sessions will focus on aspects of paediatric trauma; specific issues around fragility fractures; coping with challenging and tricky decisions in clinic and when on call; and the medicolegal aspects surrounding trauma. We have Mike McKee as the OTS guest speaker from North America, who will offer his vast experience relating to fractures of the upper limb. These sessions will be a mixture of instructional lecture and case discussion, with opportunity for the audience to ask questions.

14:15 - 15:45

### Hall 5

#### Regenerative Medicine: Coming to a clinic near you soon?

##### BORS

Regenerative medicine offers great promise to solve the challenges of tissue loss and destruction commonly faced in both trauma and elective orthopaedic practice. What is less clear is when we are likely to see these innovations appear in routine clinical practice. In this symposium, we will cover the advances that have been made in this field to date and horizon scan when these techniques will start to become mainstream practice. The session will cover developments in fracture healing and bone defect management, the treatment of degenerative joint disease, and the application of regenerative medicine to

## Session Briefs

tendon and ligament reconstruction. The instructional part of the symposium will be followed by a floor and panel discussion where we invite the audience to pose their questions to the panel of clinical experts in the field of regenerative medicine.

**14:15 - 15:45**

**Hall 8**

### Using NJR data responsibly to improve care

#### The National Joint Registry

Attend this session to better understand how NJR data can be used to improve clinical outcomes. Matthew Porteous will explain how NJR data is used and the process of informing individuals and hospitals of negative variation in performance. The Bristol group will then explain how the data is analysed and adjusted.

Richard Parkinson will discuss the controversial issue of comparing partial and total knee replacements; and Peter Howard will then discuss lessons learnt from the NJR Surgical Performance Committee. Focus will then change to understanding positive clinical variation and how to modify practice to optimize outcomes.

**16:15 - 16:45**

**Hall 1**

### Some Observations on Limb Reconstruction in Children: Where are we now and where are we going?

#### King James IV Professorship Lecture

Fergal P Monsell

**16:45 - 18:00**

**Hall 1**

### 100 Years of the BOA

100 years! A century of ups and downs, great achievements but great challenges, increasing subspecialisation but the need for a holistic approach, necessary (and perhaps sometimes unhelpful) divisions, changing health care systems, more knowledgeable and perhaps more questioning patients, more information, more confusion, better relationships with our allied health professionals and our industry partners. With thanks to Ian Stephen and David Adams - our archives have never been in better order so come and hear from what beginnings our association has grown and where we hope the next century will take us in terms of Caring for Patients and Supporting Surgeons.

## Wednesday 26<sup>th</sup> September

**08:30 - 10:00**

**Hall 1**

### Tricky Decisions

#### OTS Revalidation 3

The Orthopaedic Trauma Society is delighted to be providing the trauma content for the annual British Orthopaedic Association once again. These trauma sessions will be held in the main auditorium and are sure to be as popular as ever. We have an excellent trauma program this year - our four OTS trauma revalidation sessions will focus on aspects of paediatric trauma; specific issues around fragility fractures; coping with challenging and tricky decisions in clinic and when on call; and the Medico-Legal aspects surrounding trauma. We have Mike McKee as the OTS guest speaker from North America, who will offer his vast experience relating to fractures of the upper limb. These sessions will be a mixture of instructional lecture and case discussion, with opportunity for the audience to ask questions.

**08:30 - 10:00**

**Hall 9**

### Best of the Best

The Best of Best session at this years' Congress is an opportunity for trainees to present work at a major meeting that might not have got into one of the mainstream sessions. Each individual training programme in the UK is asked to put forward the winner of the best paper prize from their annual trainees meeting giving us the "best of the best".

The paper must be from clinical work or research carried out whilst in programs and cannot be from a pure 'out of programme' research commitment.

The papers will be judged by the Training Programme Directors from across the UK that attend the session. The result and prize will be presented at the awards and prizes session in the main auditorium (Hall 1). This year the prize has been kindly donated by Hull Deformity Course.

## Session Briefs

**08:30 - 10:00**

**Hall 10**

### **Current Concepts in Management of fractures in the elderly**

#### **BIOS Revalidation**

Fractures of the elderly are a common cause of attendance in A&E departments and GP practices. These fractures pose major challenges, as these patients are often complicated by significant medical problems, poor bone quality, difficulty in tolerating conservative measures of treatment and high risk of failure of internal fixation. These also pose significant financial, emotional and social burden on the NHS and healthcare.

This revalidation session is designed to highlight the latest evidence-based management of fractures of different regions. Speakers will provide concise evidence-based plan of management of these fractures.

The areas are as listed below.

- Anaesthesia in the Elderly
- Wrist
- Shoulders
- Elbow
- Hips and Pelvis
- Foot and Ankle
- Peri prosthetic fractures

**08:30 - 10:00**

**Hall 11A**

### **Workforce Challenges: How should we use our physicians assistants?**

#### **Carousel Presidents**

Despite the reduction in both training numbers and training hours, there is an increasing demand for orthopaedic services. How can the surgeon of today/tomorrow utilise ancillary staff to maximise the efficiency and the quality of the care that the team delivers? Have different countries, different ideas? Are our experiences transferrable? Can we find innovative ways in which to train, work and deliver high quality care?

**08:30 - 10:00**

**Hall 11B**

### **Elective Care Restrictions: Impacts, Analysis and Action**

This BOA Policy session, in collaboration with BOA Patient Liaison Group (PLG) and British Orthopaedic Trainee Association (BOTA), will focus on issues regarding patient access to elective care. The BOA is very concerned about a range of issues, including CCG policies (such as BMI criteria), deteriorating waiting times in all parts of the UK, and winter pressure measures that suspended elective surgery in many areas for extended periods in 2017/18. There will be a particular focus on patient experience and impacts, as well as broader impacts on the wider healthcare team and trainees. The session will examine the findings of the recent BOA member survey and BOA Census of hospitals in England, and discuss the steps that the BOA has been taking. Meanwhile BOTA will present information from their recent survey and consider the trainee perspective.

**10:30 - 12:00**

**Hall 1**

### **Medico-Legal aspects of trauma**

#### **OTS Revalidation 4**

The Orthopaedic Trauma Society is delighted to be providing the trauma content for the annual British Orthopaedic Association once again. These trauma sessions will be held in the main auditorium and are sure to be as popular as ever. We have an excellent trauma program this year - our four OTS trauma revalidation sessions will focus on aspects of paediatric trauma; specific issues around fragility fractures; coping with challenging and tricky decisions in clinic and when on call; and the Medico-Legal aspects surrounding trauma. We have Mike McKee as the OTS guest speaker from North America, who will offer his vast experience relating to fractures of the upper limb. These sessions will be a mixture of instructional lecture and case discussion, with opportunity for the audience to ask questions.

## Session Briefs

10:30 - 12:00

Hall 5

### Orthopaedic Research Updates

#### BOA Research Committee

This session is hosted by the BOA Research Committee and will cover the breadth of trauma and orthopaedic research activities. We will provide the BOA membership with a concise series of updates covering: clinical trials activities supported by the BOA, interpreting trauma and orthopaedic cell therapies in light of the NICE guidelines and the latest in the fight against surgical site infection. We will also offer advice for trainees regarding how they can get involved in trainee research networks and how the broader membership can help to set future research priorities via the James Lind Alliance.

10:30 - 12:00

Hall 8

### Paediatric Lower Limb Trauma Management

#### BSCOS Revalidation

This session will concentrate on paediatric lower limb injuries and involve lectures and case-based discussion, illustrating controversies, traps for the unwary and top management tips.

Learning objectives

- The principles of management of injuries to the paediatric lower limb
- Age related management of fractures
- When to plaster, K-wire, plate, nail or ex-fix.

10:30 - 12:00

Hall 9

### Best of the Best

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The paper must be from clinical work or research carried out whilst in programs and cannot be from a pure 'out of programme' research commitment.

The papers will be judged by the Training Programme Directors from across the UK that attend the session.

The result and prize will be presented at the awards and prizes session in the main auditorium (Hall 1). This year the prize has been kindly donated by Hull Deformity Course.

10:30 - 12:00

Hall 10

### South East Asia

#### WOC UK

This year WOC UK are using their session to showcase their projects in South East Asia.

Saqib Noor, a post-CCT UK trainee, combines experience of work in developing countries with considerable expertise in information technology. He has developed an online logbook system for use by trainees in low resource environments.

Our chairman, Steve Mannion needs no introduction. He has a long and varied experience of working in orthopaedics in austere environments. He presents an intriguing insight into the management of injuries from landmines and unexploded ordnances in South East Asia.

Dalton Boot is our vice chairman, and a stalwart of our organisation. He has in excess of twenty years' experience in helping the fledgling orthopaedic service in Phnom Penh to blossom into its current well established system. He recognised early on that surgeons cannot function as individual agents, and focused his energies on developing the wider surgical team.

Our esteemed guest speaker is the redoubtable Jim Gollogly, founder and CEO of the world-renowned Children's Surgical Centre in Cambodia. The beloved "Dr Jim" is a force of nature, and from very modest beginnings he has transformed the orthopaedic care of children in his adopted country. We are honoured to welcome him to the BOA Congress and eagerly look forward to his talk.

## Session Briefs

**10:30 - 12:00**

**Hall 11A**

### **Evolution of Computer Assistance in Orthopaedic Surgery**

**CAOS UK**

Standard computer assisted positioning of components and checking of alignments remains the mainstay of routine Computer Assisted Orthopaedic Surgery (CAOS). In the Hip, Knee and Spine significant improvements in component positions can be demonstrated. Longer term studies of outcomes and survivorship are beginning to show increased longevity in navigated cases in those Joint Registries that made a commitment from the outset to log navigated cases even using the earliest forms of navigation. Techniques of location and enhanced resection are also now being used in Tumour and other Specialised Surgeries.

What started as simple use of computer generated 'morphed bones' to enhance component positioning and limb alignments at the end of the last century, has steadily been improved by incorporation particularly of dynamic assessments to carry out intra-operative 'fine-tuning' of joint dynamics. Predictive software is now anticipating the nature and the appropriateness of the next surgical step in any particular procedure. Robotics are now routinely being used to enhance the accuracy of component positioning even further. Custom devices are being used to enhance the quality of the final construct even further.

Our four speakers will discuss such techniques in the hip and knee followed by a round table discussion.

**10:30 - 12:00**

**Hall 11B**

### **Integrated care pathways for orthopaedics**

**ARMA**

There is increasing focus on integrated pathways of care in the NHS. What might a good pathway for orthopaedics look like? Could this represent a better approach to managing pressure on NHS resources than rationing through lifestyle criteria? How can services be redesigned to ensure both efficiency and improved patient safety and care?

Peter Kay, National Clinical Director for MSK will give an overview of the national policy picture as it relates to orthopaedics.

Phil Turner will discuss MSK/orthopaedic service in Greater Manchester and how the redesign will increase quality, efficiency and patient care.

**12:10 - 12:40**

**Hall 1**

### **Orthopaedics in an equal world: my journey from knowledge to understanding**

**Presidential Guest Lecture**

Dr Mathew Varghese

**13:40 - 14:10**

**Hall 1**

### **Fighting Every Surgeon's Enemy: Past, Present and Future**

**Robert Jones Lecture**

Professor Hamish Simpson

**14:20 - 15:50**

**Hall 1**

### **Issues in hip surgery: an update on clinical assessment, imaging, surgical approach and commissioning in 2018**

**BHS Revalidation**

This year's session will start by reviewing the clinical assessment of hip pathology, including the assessments of non-arthroplasty hip conditions. We will give an update on new imaging options and modalities. We will discuss more recent developments in pre-operative optimisation, working to reduce the associated risks of hip surgery. From there, we will concentrate on the potential surgical approaches for primary hip surgery, an area of undoubted recent controversy. We hope to provide surgeons with a comprehensive and practical review of the evidence behind the various approaches, allowing surgeons to make evidence based decisions when deciding how best to approach the hip.



## Session Briefs

14:20 - 15:50

Hall 5

### NHFD annual report update, the WHiTE study result and result from the physiotherapy sprint audit

This year's NHFD session at the BOA will provide not only the annual NHFD report update, but also the results of the WHiTE study, as well as outcomes from the physiotherapy sprint audit. There will also be a fantastic run down through the key evidence and papers relating to hip fractures in the last 2 years.

14:20 - 15:50

Hall 8

### Trauma conundrums: pilon and open fractures

#### BLRS Revalidation

Pilon fractures result from either high-energy transfer trauma, rotational (sporting) injuries or after low energy trauma in the elderly population. They account for less than 10% of all tibial fractures, but conversely they are associated with a high incidence of complications, owing to complex fracture patterns, poor bone quality and compromised soft tissue cover. Treatment algorithms are complex and influenced by multiple factors. We present an update of the management of these challenging injuries.

It is well accepted that adequate debridement of the initial injury has a significant impact on the outcomes of open fractures. Techniques for managing bone defects are now widely available, removing the need for caution when removing bone of dubious viability, but it is often difficult to strike the right balance between removing more bone than necessary and leaving behind contaminated material. We discuss the factors to consider during the initial surgical procedure.

There are several techniques for the reconstruction of lost bone, and the most appropriate method will vary according to the amount, type and location of the defect. Recent developments in methods of distraction osteogenesis and microsurgery have significantly improved the options for treatment. We provide an overview of the current concepts involved.

14:20 - 15:50

Hall 9

### IT'S SHOWTIME! #ActItOut Lights... camera... action!

#### BOTA

Have you ever wondered what it would be like to get your trainer in the hot seat and a little hot under the collar? Perhaps as a trainer, you have often wondered what trainees are making all the fuss about?

Come and join the show as our TPDs and trainers step into the shoes of the modern day trainee. As the curtains lift, our trainers will be helping us to explore the tentative line between banter and worrisome workplace behaviours. We all know that communication is an important part of our day-to-day activity, but to what extent do our behaviours really makes a difference?

Through wit and humour, we will unveil using role-play, how what we do and say in the workplace can have effects beyond what you may envisage. Using real scenarios, we turn the tables and lightheadedly explore the depths of the effects that these exchanges can have.

We welcome all trainers and trainees to join in the fun in this entertaining event where trainers and trainees alike are sure to take something away except for an empty box of popcorn.

14:20 - 15:50

Hall 11A

### Indian Summer: A showcase a different variety of pathologies uncommonly seen in the UK

#### BIOS

The Indian summer is a triennial scientific programme organised by the British Indian Orthopaedic Society (BIOS) in collaboration with British Orthopaedic Association.

The aim of this session is to allow orthopaedic surgeons from India, who are specialists in their own fields, to share their knowledge and experience with surgeons in the UK. This session gives an opportunity for eminent Indian surgeons to showcase a different variety of pathologies uncommonly seen in the UK.

BIOS feels privileged to coordinate this session and present this hallowed group of surgeons to the British orthopaedic fraternity. The session is made up of a series of lectures on topics and management styles seen under different and difficult circumstances.

## Session Briefs

**14:20 - 15:50**

**Hall 11B**

### **The most common types of cyber enabled and operational fraud**

#### **Fraud Awareness**

Cyber attacks pose one of the most serious threats to businesses and national economies. Criminals, nation states and others are exploring the speed, convenience and anonymity of the internet to commit a diverse range of criminal activities that knows no borders, either physical or virtual.

This session is aimed, not only at you as a consumer, but also at all levels within your organisation, from the Executives, Treasurers, Senior Leadership Team, System Administrators and Internal Audit through to your operational teams.

Topics to be covered include a review of the most common types of cyber enabled and operational fraud, what this may look like, social engineering which is the technique typically used by fraudsters and of course plenty of practical advice for you and your business.

The speaker has worked for The Royal Bank of Scotland since 2002, in a variety of roles including payments, customer complaints and front line customer service. In her current role as a fraud awareness analyst, she helps clients and customers across the UK understand the fraud and cyber threats they may face and, more importantly, the steps they can take to help protect themselves.

**16:20 - 17:45**

**Hall 1**

### **Issues in hip surgery: an update on clinical assessment, imaging, surgical approach and commissioning in 2018**

#### **BHS Revalidation**

This year's session will start by reviewing the clinical assessment of hip pathology, including the assessments of non-arthroplasty hip conditions. We will give an update on new imaging options and modalities. We will discuss more recent developments in pre-operative optimisation, working to reduce the associated risks of hip surgery. From there, we will concentrate on the potential surgical approaches for primary hip surgery, an area of undoubted recent controversy. We hope to provide surgeons with a comprehensive and practical

review of the evidence behind the various approaches, allowing surgeons to make evidence based decisions when deciding how best to approach the hip.

It is a great delight to welcome Professor Wayne Paprosky as our guest speaker in this year's BHS revalidation session. Wayne hardly needs an introduction to any Orthopaedic audience. His extensive clinical experience and vast array of publications has made him a household name in primary and revision arthroplasty. Wayne has made major contributions in implant design and in the introduction of new technologies and procedures. As such Wayne will be in a position to draw on his own vast experience on the benefits and concerns that surround the choice of surgical approach.

One of the areas in which Wayne's contribution is most recognised, relates to his work in the development of classification systems, on both femoral and acetabular side, in revision surgery. These have allowed surgeons to predict and to characterise the bone loss they are likely to encounter in surgery reliably and to plan accordingly. Alongside this, Wayne's pioneering work on the management of complex acetabular defects and pelvic discontinuity has changed the face of revision hip surgery with material improvements in the clinical outcomes.

It is a great privilege that Wayne has accepted our invitation to deliver the Sir John Charnley Lecture, describing how his work has developed, how he feels the principles he has described are best applied and how they could be developed into the future, for the benefit of our patients.

**16:20 - 17:45**

**Hall 1**

### **How characterisation can make what is complicated predictable**

#### **Charnley Lecture**

Professor Wayne Paprosky

## Session Briefs

16:20 - 17:45

Hall 8

### Research methodology and the key facets that underpin successful publishing

#### BJJ Revalidation

This session will provide an update on research methodology and the key facets that underpin successful publishing and the pitfalls that need to be avoided. There will be presentations on the history of the Bone and Joint Journal and its place in British orthopaedics, including the genesis of the ABC Fellowship. There will be presentations on CME and how journals are still integral to providing that. There will be a group of presentations on various key aspects of research methodology and also on the problems and pitfalls to avoid when setting out to publish research work. This will be a useful session for trainees and consultants interested in research methodology, in the conception and planning of studies, and in the analysis and interpretation of the literature.

16:20 - 17:45

Hall 10

### An Overarching view of spinal conditions

#### Spine Revalidation 1

Spinal revalidation promises to be an excellent series of short talks, from recognised experts, on a combination of critical conditions and common spinal problems.

A series of talks over two sessions will outline current debates, assessment, diagnosis, treatment options, and outcomes for a wide spectrum of spinal pathology.

These sessions will appeal to anyone involved in the care of spinal patients, trainees preparing for their exam, established orthopaedic consultants preparing for revalidation and others looking for a state of the art series of talks on the important areas within spinal surgery at the moment.

Topics covered will include:

- Spinal radiology, what investigations are required and what to look for
- Spinal infections, how to diagnose and treat
- Spinal tumours - the management of metastatic spinal cord compression
- Spinal trauma - modern classification schemes, treatment options and outcomes

- cauda equina - how to assess and manage
- Myelopathy - who needs operated on and who can we observe
- neurological conditions - a summary of those conditions we come across and need to know about!
- painful spine in a child - the common diagnoses, how to assess and manage this critical condition
- the new low back and radicular pain pathway - how it works and the difference it is making

Please come along for an overarching view of spinal conditions from a faculty of experts.

16:20 - 17:45

Hall 11A

### Indian Summer: To showcase a different variety of pathologies uncommonly seen in the UK

#### BIOS

The Indian summer is a triennial scientific programme organised by the British Indian Orthopaedic Society (BIOS) in collaboration with British Orthopaedic Association.

The aim of this session is to allow orthopaedic surgeons from India, who are specialists in their own fields, to share their knowledge and experience with surgeons in the UK. This session gives an opportunity for eminent Indian surgeons to showcase a different variety of pathologies uncommonly seen in the UK.

BIOS feels privileged to coordinate this session and present this hallowed group of surgeons to the British orthopaedic fraternity. The session is made up of a series of lectures on topics and management styles seen under different and difficult circumstances.

## Session Briefs

### Thursday 27<sup>th</sup> September

08:30 - 10:00

Hall 5

#### Current patient journey: Pre-hospital care through to rehabilitation and repatriation

##### Trauma Networks 1

The two trauma network sessions at the 2018 conference will focus on the current patient journey, with updates on pre hospital care through to rehabilitation and repatriation; as well as providing an update on current outcomes and discussions on the next steps for the trauma networks. These two excellent sessions have been organised with collaboration between the BOA Trauma Group and the Orthopaedic Trauma Society. Key areas for discussion will include the challenges around delivery of services within the network, including emphasis on the trauma unit experience not just that of the MTC.

08:30 - 10:00

Hall 8

#### Ankle arthroscopy and instability

##### BOFAS Revalidation

Please join the BOFAS Education Committee for a comprehensive and informative Foot and Ankle Revalidation session covering topics of ankle arthroscopy and instability.

We aim to provide both the evidence-base relating to the subject matter as well as a more practical “how I do it” approach. We anticipate this will be relevant to both the general trauma and orthopaedic surgeon who may encounter these pathologies in patients in the general trauma clinic as well as sub-specialist Foot and Ankle surgeons who are diagnosing and treating patients with these pathologies on a regular basis.

We are joined by an expert multi-disciplinary faculty including Consultant Foot and Ankle Surgeons and an Extended Scope Foot and Ankle physiotherapist who will share their experience and insight on a variety of topics including technical aspects of anterior and posterior ankle arthroscopy and the diagnosis and treatment of ankle instability in which we will be covering the fundamental principles of both conservative and surgical management to include the range of current treatment modalities available. The session will also include talks on associated pathologies, including syndesmosis injury

and the diagnosis and current evidence-based treatment of osteochondral injuries.

The Revalidation session is followed by the Naughton Dunn Lecture, and we are delighted to welcome Professor C. Niek van Dijk from the Netherlands as our invited speaker who will share his extensive experience of foot and ankle surgery with a sure to be entertaining talk entitled “Ankles: Why on Earth?”

08:30 - 10:00

Hall 9

#### Innovation, Simulation and Education

The sessions include free papers on the topics of Innovation, Simulation and Education. Prizes will be awarded for the best free paper and for the best Innovation in Simulation paper. Guest speaker, Uttam Shiralkar will talk about Cognitive Simulation, which is an important tool for any simulation curriculum. We will also have talks on Augmented Reality from Mal Gandhi and Transferability of skills to the operating theatre by Patrick Roberts. Finally, there will be an update of the BOA simulation curriculum from Catherine Kellett.

08:30 - 10:00

Hall 10

#### Spine Revalidation 2

Spinal revalidation promises to be an excellent series of short talks, from recognised experts, on a combination of critical conditions and common spinal problems.

A series of talks over two sessions will outline current debates, assessment, diagnosis, treatment options, and outcomes for a wide spectrum of spinal pathology.

These sessions will appeal to anyone involved in the care of spinal patients, trainees preparing for their exam, established orthopaedic consultants preparing for revalidation and others looking for a state of the art series of talks on the important areas within spinal surgery at the moment.

Topics covered will include:

- Spinal radiology, what investigations are required and what to look for
- Spinal infections, how to diagnose and treat
- Spinal tumours - the management of metastatic spinal cord compression

## Session Briefs

- Spinal trauma - modern classification schemes, treatment options and outcomes
- cauda equina - how to assess and manage
- Myelopathy - who needs operated on and who can we observe
- neurological conditions - a summary of those conditions we come across and need to know about!
- painful spine in a child - the common diagnoses, how to assess and manage this critical condition
- the new low back and radicular pain pathway - how it works and the difference it is making

Please come along for an overarching view of spinal conditions from a faculty of experts.

**08:30 - 10:00**

**Hall 11A**

### **VTE and NICE: don't shoot the messengers**

NICE guidance has just been updated for the prevention of venous thromboembolism. It has far reaching consequences for several areas of our work.

Roger Atkins will Chair a series of presentations from the Orthopaedic team involved in the NICE guidance highlighting how they were generated and new information.

**10:30 - 12:00**

**Hall 1**

### **Will I list this 50 year old patient for arthroscopy and menisectomy?**

#### **BASK Revalidation 1**

The effectiveness of arthroscopic menisectomy has been heavily criticized and many commissioning bodies are now restricting the procedure. This instructional course is to address the evidence surrounding this topic and to present a rational and logical approach to treating patients with degenerate meniscal tears.

**10:30 - 12:00**

**Hall 5**

### **Current patient journey and Updates**

#### **Trauma Networks 2**

The two trauma network sessions at the 2018 conference will focus on the current patient journey, with updates on pre hospital care through to rehabilitation and repatriation; as well as providing an update on current outcomes and discussions on the next steps for the trauma networks. These two excellent sessions have been organised with collaboration between the BOA Trauma Group and the Orthopaedic Trauma Society. Key areas for discussion will include the challenges around delivery of services within the network, including emphasis on the trauma unit experience not just that of the MTC.

**10:30 - 12:00**

**Hall 8**

### **Ankle arthroscopy and instability**

#### **BOFAS**

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We aim to provide both the evidence-base relating to the subject matter as well as a more practical "how I do it" approach. We anticipate this will be relevant to both the general trauma and orthopaedic surgeon who may encounter these pathologies in patients in the general trauma clinic as well as sub-specialist Foot and Ankle surgeons who are diagnosing and treating patients with these pathologies on a regular basis.

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## Session Briefs

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**10:30 - 12:00**

**Hall 8**

**Ankles: Why on Earth?**

**Naughton Dunn Lecture**

Professor C. Niek van Dijk

**10:30 - 12:00**

**Hall 9**

**Innovation, Simulation and Education**

The sessions include free papers on the topics of Innovation, Simulation and Education. Prizes will be awarded for the best free paper and for the best Innovation in Simulation paper. Guest speaker, Uttam Shiralkar will talk about Cognitive Simulation, which is an important tool for any simulation curriculum. We will also have talks on Augmented Reality from Mal Gandhi and Transferability of skills to the operating theatre by Patrick Roberts. Finally, there will be an update of the BOA simulation curriculum from Catherine Kellett.

**10:30 - 12:00**

**Hall 10**

**An Interactive Spinal session**

**Spine Bootcamp**

Spinal bootcamp will work again this year on the highly successful model of small table interactive sessions with experts in the field discussing a wide range of spinal topics.

Groups will look at spinal fracture classification, cauda equina, the management of the dislocated neck, metastatic spinal cord compression, infection, the medical management of the paralysed patient, radiological investigations in the acute spinal patient, the painful spine in a child and ankylosing spondylitis.

Each group will discuss all the topics in a rotational basis with the experts, allowing small group learning.

This is an ideal session for anyone studying for the exam, consultants wishing to update their knowledge and anyone interested in spinal care.

**10:30 - 12:00**

**Hall 11A**

**SAS in Orthopaedics**

**SAS**

The session is aimed at shedding light on SAS in Orthopaedics: Demography, Difficulties, Dreams and possible solutions.

SAS with similar levels of experience and competence work at different levels even in the same Trust.

SAS are side-lined and are doing a small fraction of work they were competently doing before. Wasted labour.

Painful observation of the trend toward major and expensive intervention in management of elective and trauma patients instead of simpler, cheaper procedures with less risks and complications.

Aspirations & Dreams of SAS are Recognition and accountability, Training, Progression, Independent practitioner and having a role in GIRFT.

**12:10-12:40**

**Hall 1**

**New Insights in the Mechanisms of Injury from Blast**

**King James IV Professorship Lecture**

Professor Jon Clasper

**12:10-13:00**

**Hall 10**

**Experiences and lessons learnt from the Manchester bombing Manchester Trauma Team**

**ATOCP**

This session will be run by the therapy team that work across three hospitals as part of the Manchester Major Trauma Collaborative, providing multi-specialty care for patients involved in the Manchester Bombing on 22nd May 2017. Through shared learning and thematic analysis in the aftermath of the bombing, the team have been instrumental in creating patient pathways and influence the Trusts Major Incident Plan in readiness for future events.

## Session Briefs

15:10 - 16:20

Hall 1

**Joint efforts to gain knowledge in paediatric ACL injuries**

**Adrian Henry Lecture**

Romain Seil

15:10 - 16:20

Hall 1

**Will I list this patient for a knee replacement?**

**BASK Revalidation 2**

A significant percentage of patients remain dissatisfied after undergoing knee arthroplasty. Although clinical indications for knee arthroplasty are well understood, decision making in a busy clinic remains a challenge. Many factors may potentially influence outcome and can we make sense of it? Commissioning bodies are putting restrictions on clinical practice and is it acceptable?

15:10 - 16:20

Hall 5

**Tips and tricks in nailing**

**OTS Hot Topics**

The Orthopaedic Trauma Society (OTS) hot topic session will this year provide you with your orthopaedic trauma skills update - a session dedicated to tips and tricks in nailing. All nailing procedures will be covered from Humerus to Hindfoot and more. We have an expert panel of nailers, so do please attend if you would like to pick up some pearls.

15:10 - 16:20

Hall 8

**Spine Instant Updates**

Spinal updates will provide short rapid fire lectures on key spinal topics. These rapid fire lectures will cover the breadth of spinal surgery, focusing on recent developments, key learning points and management issues.

This highly popular format is ideal for anyone involved in spinal care who wishes to update their knowledge on a wide range of topics with rapid fire key learning points.

15:10 - 16:20

Hall 9

**Medical Indemnity Premiums: the only way is up?**

**Medico-Legal**

Insurance premiums for orthopaedic surgeons are rising inexorably. In this session we will learn from leading experts from the indemnity and insurance organisations about why premiums are rising and strategies being pursued to reduce them. We will also learn about the different types of indemnity providers, from traditional mutuals such as the MDU and the newer commercial insurance providers. The minefield of run-off insurance, discretionary cover, losses incurred policies, uninsurable risk (spinal surgery, elite athletes etc) and moving providers will be addressed with plenty of time for questions and debate.

15:10 - 16:20

Hall 10

**Scientific Programme**

**ATOCP**

Seven AHP abstracts have been accepted for podium presentation. Presentations will last for five minutes followed by three minutes for questions. Following the podium presentations a short summary of current orthopaedic related research will be provided by the Chairs of the meeting.

15:10 - 16:20

Hall 11A

**Management of injuries around the clavicle**

**BESS Revalidation**

We aim to provide an overview and update on the management of injuries around the clavicle, including acromioclavicular joint (ACJ) injuries, lateral and midshaft clavicle fractures, sternoclavicular joint (SCJ) and brachial plexus injuries.

Rohit Gupta will give a talk on ACJ injuries and lateral clavicle fractures, including indications for operative management in the acute setting and strategies for delayed reconstruction. The presentation will include the current evidence and novel techniques.

Toby Colegate-Stone will present a review of current evidence for surgical management of midshaft clavicle fractures, including the findings of the recently published

## Session Briefs

CLAVICLE trial. He will also present the experience from King's College Hospital, part of the Major Trauma Centre network, and how their experience can inform practice.

Andrew Richards will cover SCJ injuries, which present a number of challenges ranging from the life-threatening to chronic instability. He will cover initial assessment and indications for operative management and specialist referral. He will also cover brachial plexus injuries, including how to monitor recovery of nerve function, and when to refer to a specialist unit.

In addition, there will be time for a case-based panel discussion, which we hope will provide some interesting discussion and debate amongst the delegates and faculty.

**16:50 - 18:00**

**Hall 1**

### Updates in Multidisciplinary Trauma Care

#### British Trauma Society

A British Trauma Society (BTS) "must attend" trauma validation session packed with 90 minutes of the current multidisciplinary management of complex trauma combined with an update on current treatment of open limb injuries.

Orthopaedic surgeons have most dealings with plastic and vascular surgeons. Lt Col Stansfield, an experienced Consultant Vascular Trauma Surgeon working both for the Military and at the Major Trauma Centre in Leeds will be presenting the current management of vascular injury in trauma using his experience from the military and easily applicable to civilian life. Almost a didactic algorithm is required to manage vascular trauma.

For a considerable period, rib fracture fixation has been debated but now it has an established role in trauma. Miss Jenkins a Consultant Thoracic Surgeon at St George's Hospital in London will present her experience and discuss indications and outcome of rib fracture fixation.

"Fix and flap" method of management of open long bone fractures still remains an ideal but controversial management of these severe injuries. The Leeds unit represented by Mr Matthews, the current British Trauma Society president and Consultant in Major Orthopaedic Trauma will discuss the current state of this line of treatment.

Ample time has been allocated for discussion as often the real messages come out during this time.

**16:50 - 18:00**

**Hall 9**

### Medical Indemnity Premiums: the only way is up?

#### Medico-Legal

Insurance premiums for orthopaedic surgeons are rising inexorably. In this session we will learn from leading experts from the indemnity and insurance organisations about why premiums are rising and strategies being pursued to reduce them. We will also learn about the different types of indemnity providers, from traditional mutuals such as the MDU and the newer commercial insurance providers. The minefield of run-off insurance, discretionary cover, losses incurred policies, uninsurable risk (spinal surgery, elite athletes etc) and moving providers will be addressed with plenty of time for questions and debate.

**16:50 - 18:00**

**Hall 10**

### The big debate: Day case knee replacement is in the patient's best interest

#### ATOCP

The ATOCP debate returns for a third year! Following on from the success from our 1st debate for and against hip precautions after primary total hip replacement and repair or rehab: management of rotator cuff tears we are exploring whether or not day case knee replacements are in the patient's best interest.



## Session Briefs

### Friday 28<sup>th</sup> September

08:30 - 12:00

Hall 1

#### Mandatory Good Clinical (Research) Practice

##### GCP Training

This session will enable delegates to be up to date with all the latest information on the new regulations, particularly regarding Statutory Instruments and European Directives, requirements for informed consent, strategies for assuring adequate delegation and supervision of trial related activities, management of essential documents, and the importance of managing risk mitigation and the audit/inspection process. Focus will be made on studies in the relevant field of the audience rather than just traditionally sponsored CT-IMP studies and as such will include research with Medical Devices. The session uses a blend of trainer input and group discussion to ensure that delegates will be able to:

- Examine key aspects of the Directive's implementation on your clinical research activities
- Challenge and predict how processes will need to alter in line with forthcoming regulatory and legislative changes
- Describe the principles Good Clinical (Research) Practice
- Gain insight into the critical pathways of study management
- Scope roles and responsibilities of the clinical trial process
- Identify key documentation issues involved in the clinical trial process
- Recognise organisational hurdles and plan contingencies for efficient delivery
- Gain awareness of current UK regulations and applicable European guidelines.

08:30 - 12:00

Hall 5

#### NOTTs RCSEd

(Pre-registration only)

**FULLY BOOKED**

There is growing evidence that supports the need for non-technical skills training as well as the understanding and application of Human Factors in complex health care settings to improve work environments, surgical outcomes and patient safety.

Technical skills are, of themselves, inadequate to ensure optimal outcome following surgery.

This interactive session aim is to enable delegates to understand the importance of non-technical skills which underpin good intra-operative performance and how these skills can be observed and rated using a validated assessment tool. It will address the non-technical skills that are the essential cognitive and interpersonal aspects of operative surgery.

These vital skills and understanding complement technical actions, optimise and enhance the performance of individual surgeons and through them, the surgical team. We will also be describing and discussing the relevance of Human Factors/ Ergonomics in surgery as well as examples of its application.

The session will involve the use of video simulated scenarios, interactive lectures and small group discussions to achieve its aim.

## Session Briefs

**08:30 - 16:00**

**Hall 9**

### Medical Students' Session

The British Orthopaedic Association's (BOA) medical student day is aimed at undergraduates and junior doctors. During this session we will deliver insight into life as an orthopaedic surgeon, orthopaedic training pathways and practical workshops. We will also be providing delegates with accurate and up-to-date information on orthopaedic training and applications.

#### Aims

- To gain an understanding regarding a range of new innovations in orthopaedic surgery
- To understand the different types of consultant posts which are possible and the pros and cons of academic careers
- To understand more about a range of orthopaedic techniques

#### Afternoon workshops (on rotation)

Knee surgery and ligament dry bones workshop, team building exercise, hip surgery dry bones workshop, fracture fixation workshop.

**08:30 - 16:00**

**Hall 10**

### TOCS and TOES

The new 2018 T&O curriculum will reflect concerns expressed by many of you about the over refined structure of ISCP: of tick boxes and forms. Our trainees need to learn professional judgement, insight, leadership, and the ability to work with others alongside the operative skills required to be a safe surgeon. The new curriculum should help us do this more effectively. So, we will run a one-day programme on the Friday of Congress to help you make the changes work for you and your trainees. The session will be looking at:

- Engage in relevant aspects of the T&O curriculum
- Maximise opportunities for teaching and assessing in T&O practice
- Make the best use of T&O workplace based assessment tools

- Provide constructive feedback relating to progress in practice
- Identify trainees in difficulty and enlist appropriate help
- Integrate an understanding of the T&O ARCP and examinations process

**09:00 - 16:00**

**Hall 11A**

### Clinical Examination Course

**(Pre-Registration only)**

**FULLY BOOKED**

The BOA Clinical Examination Course was set up 6 years ago with the aim that trainees will attend on an annual basis whereby skills could be learnt at an early stage of training and repetition would result in perfecting a technique and consequently improvement in patient care and examination success.

It is taught by an experienced group of lecturers on clinical examination techniques. The format includes a morning of lectures covering all regions of the body. This is followed in the afternoon by a hands-on session where participants rotate in groups of similar skill level. In these tutorial groups there is a demonstration by an experienced consultant followed by practice in pairs of the techniques learnt.

The feedback in previous years of this format of learning has been exceptional.

## **NJR Soundbites - Short talks at The National Joint Registry (NJR) Stand**

The National Joint Registry is running a series of short presentations during the breaks on our exhibition stand - join us today to hear about what is new as we launch the NJR Annual Report 2018.

### **Programme - across the Congress days there will be NJR soundbite talks on:**

- What's new in the NJR's 2018 Annual Report?
- What is NJR's Data Quality Audit is showing us?
- Web-enabling the patient decision aid for joint replacement
- Where's the value in mixing NJR data with other data sets?
- How can I access my NJR data through NJR's Clinician Feedback tools?
- What's changed in the new 2018 version of Minimum Data Set Collection?
- Considerations regarding knee surgery
- Other new innovations at the NJR

### **Could you be an NJR Regional Clinical Co-ordinator?**

The NJR is currently recruiting regional clinical co-ordinators in some areas across the UK, please join us for the programme below which will answer all your questions on NJR's our work, and you can also find out more at the stand on how you can get involved in this great opportunity.

### **Joint NJR-RCS Clinical Research Fellowship**

The Royal College of Surgeons of England, in partnership with the NJR, is seeking applications for a two-year Joint NJR-RCS Clinical Research Fellowship. Applicants must be a Fellow or a Member of The Royal College of Surgeons of England in a training post, or a trainee who has passed the MCQ papers and who will sit the final parts of the MRCS (Eng) examination.

The proposed project must be based upon NJR data, and aligned with the strategic objectives of the NJR. The project would, at the discretion of the NJR Research Sub-committee, contribute to the internal research portfolio of the NJR and as such the applicants will be required to comply with the NJR requirements on co-branding of all outputs of the research.

**Please join us at the NJR Stand today for our talks and more information on these opportunities**

## Podium Presentations

### Tuesday 25<sup>th</sup> September

**10:30 - 12:00** Hands Free Papers  
Hall 9

**10:30 - 10:35** Defining displacement thresholds for surgical intervention for distal radius fractures - a Delphi study. **800**

*N. Johnson<sup>1</sup>, P. Leighton<sup>2</sup>, D.R.F. delphi study group<sup>1</sup>, C. Pailthorpe<sup>3</sup>, J. Dias<sup>1</sup>*

*<sup>1</sup>University Hospitals of Leicester, Leicester, United Kingdom, <sup>2</sup>University of Nottingham, Nottingham, United Kingdom, <sup>3</sup>Royal Berkshire NHS Foundation Trust, Reading, United Kingdom*

**10:35 - 10:40** Prospective Comparative analysis study between minimal Invasive surgery versus traditional surgical decompression of carpal tunnel syndrome Aim of Study: We evaluate the effectiveness of minimal invasive surgical decompression of Carpal Tunnel Syndrome compare to traditional surgical decompression as treatment method. **596**

*A. Alkhuzai*

*Sulaimani University, Orthopaedic Department, Sulaimaniya, Iraq*

**10:40 - 10:47** Discussion

**10:48 - 10:53** Two Sequence MRI scan: Useful in Early diagnosis of suspected scaphoid fracture and associated injuries. **673**

*V. Rajput, S. Rehman, T. Ashraf, P. Motkur, R. Deshmukh*

*Pilgrim Hospital (United Lincolnshire Hospitals NHS trust), Trauma and Orthopaedics, Boston, United Kingdom*

**10:53 - 10:58** A systematic review of mechanical stabilization by screw fixation without bone grafting in the management of scaphoid non-union in adults. **512**

*L. Elgayar<sup>1</sup>, W. Ben-nafa<sup>2</sup>, S. Dehbozorgi<sup>1</sup>*

*<sup>1</sup>University Hospital of Wales, Trauma and Orthopaedics, Cardiff, United Kingdom, <sup>2</sup>Manchester Foundation Trust, Manchester Royal Infirmary, Manchester, United Kingdom*

**10:58 - 11:03** Delayed Primary Flexor Tendon Repairs: How Late is Too Late? **611**

*R. Hossain<sup>1</sup>, S. Srivastava<sup>2</sup>*

*<sup>1</sup>University Hospitals Coventry and Warwickshire, Plastic Surgery, Coventry, United Kingdom, <sup>2</sup>University hospital Coventry, Plastic Surgery, Coventry, United Kingdom*

**11:03 - 11:10** Discussion

**11:11 - 11:16** A study on patients' satisfaction undergoing awake shoulder surgery. **250**

*R. Taranu, L. Jenner, R. Dhanancheyan, A. Mathews, R. Jeavons*

*North Tees and Hartlepool NHS Trust, Orthopaedics, Stockton-on-Tees, United Kingdom*

## Podium Presentations

**11:16 - 11:21**

**Online consent for upper limb surgical procedures - Is this the way forward. 169**

*C. Hamilton, M. Broadbent, C. Marshall*

*Inverclyde Royal Hospital, Trauma and Orthopaedics, Glasgow, United Kingdom*

**11:21 - 11:28**

**Discussion**

**11:29 - 11:44**

**Early tendon transfer in peripheral nerve injuries - belt and suspenders approach**

*Dr A Dhal*

**11:44 - 11:51**

**Discussion**

**11:52 - 12:00**

**Analysis of different surgical modalities of fracture dislocation of proximal interphalangeal joint of hand.**

*Dr Biswajit Sahu*

*BIOS Senior Fellow, Odisha, India*

**10:30 - 12:00**

**BOSTAA Free Papers**  
Hall 11A

**11:26 - 11:31**

**Taking stock of the highest-quality evidence available for anterior cruciate ligament reconstruction outcomes. 691**

*T.C. Choreño Machain<sup>1</sup>, D.M. Kalaskar<sup>1</sup>, S. Konan<sup>1,2</sup>*

*<sup>1</sup>University College London, Institute of Orthopaedics and Musculoskeletal Science, Division of Surgery and Interventional Science, London, United Kingdom, <sup>2</sup>University College Hospital NHS-Trust (UCLH), London, United Kingdom*

**11:31 - 11:36**

**Development and external validation of a prognostic model for predicting poor outcome in people with acute ankle sprains: the SPRAINED study. 712**

*D. Keene<sup>1</sup>, M. Schlüssel<sup>1</sup>, J. Thompson<sup>1</sup>, D. Hagan<sup>1</sup>, M. Williams<sup>1</sup>, C. Byrne<sup>1</sup>, S. Goodacre<sup>2</sup>, M. Cooke<sup>1</sup>, S. Gwilym<sup>1,3</sup>, P. Hormbrey<sup>3</sup>, J. Bostock<sup>4</sup>, K. Haywood<sup>5</sup>, D. Wilson<sup>3</sup>, G. Collins<sup>1</sup>, S. Lamb<sup>1</sup>*

*<sup>1</sup>University of Oxford, Nuffield Department of Orthopaedics, Rheumatology and Musculoskeletal Sciences, Oxford, United Kingdom, <sup>2</sup>University of Sheffield, School of Health and Related Research, Sheffield, United Kingdom, <sup>3</sup>Oxford University Hospitals Trust NHS FT, Oxford, United Kingdom, <sup>4</sup>PPI representative, United Kingdom, <sup>5</sup>University of Warwick, Warwick Medical School, Coventry, United Kingdom*

**11:36 - 11:41**

**Severe proximal hamstring tendinopathy is characterised by tendon origin tears that can be managed with surgical re-attachment. 183**

*J.R.T. Pietrzak, F.E. Rowan, B. Kayani, F.S. Haddad*

*University College Hospital, Trauma and Orthopaedics, London, United Kingdom*

**11:41 - 11:46**

**All inside reconstruction of the PLC: experience and clinical outcomes. 634**

*A. Riddell, A. Davies*

*Morrison Hospital, Trauma and Orthopaedics, Swansea, United Kingdom*

## Podium Presentations

**11:46 - 11:51**

**Blood-free, clear visualisation in arthroscopic surgery: to inflate or to inject? Results from a prospective, randomised, controlled, double blinded trial. 726**

V. Khanna<sup>1,2</sup>

<sup>1</sup>Sir Ganga Ram Hospital, New Delhi, Sports Medicine, India, <sup>2</sup>Sunshine Hospitals, Arthroplasty, Orthopaedics, Secunderabad, India

**11:51 - 12:00**

**Discussion**

**14:15 - 15:45**

**General / Tumor Free Papers**  
Hall 9

**14:15 - 14:20**

**Risk Factors for Onset Of Delirium After Neck of Femur Fracture Surgery: A Prospective Observational Study. 266**

M. Tahir<sup>1</sup>, S. Malik<sup>2</sup>, U. Ahmed<sup>1</sup>, J. Kozdryk<sup>1</sup>, S.H. Naqvi<sup>2</sup>, A. Malik<sup>2</sup>

<sup>1</sup>Royal Orthopaedic Hospital, Oncology, Birmingham, United Kingdom, <sup>2</sup>Sandwell and City Hospitals NHS Trust, Trauma and Orthopaedics, Birmingham, United Kingdom

**14:20 - 14:25**

**Long term outcomes of salvage total hip arthroplasty for failed osteosynthesis of femoral neck fracture. 437**

K. Syam, N. Lokikere, A. Saraogi, P. Siney, H. Nagai, H. Wynn Jones

Wrightington Hospital, Lancashire, United Kingdom

**14:25 - 14:30**

**Low infection rates with a single dose of antibiotics in primary endoprosthetic replacement for metastatic disease. 582**

M. Kiran, N. Dalal, S. Newbury, G. Kumar, B. Kapoor

Royal Liverpool and Broadgreen University Hospitals NHS Trust, Liverpool, United Kingdom

**14:30 - 14:37**

**Discussion**

**14:38 - 14:43**

**Enhanced Fixation of Distal Femoral Replacements with Hydroxyapatite-Coated Collars in Skeletally Immature Patients. 530**

C. Sahirad<sup>1</sup>, V. Batta<sup>1</sup>, A. Sebag<sup>1</sup>, M. Coathup<sup>1</sup>, R. Pollock<sup>2</sup>, W. Aston<sup>2</sup>, T. Briggs<sup>2</sup>, P. Gikas<sup>2</sup>, G. Blunn<sup>3</sup>

<sup>1</sup>University College London, Institute of Orthopaedics and Musculoskeletal Science, London, United Kingdom, <sup>2</sup>Royal National Orthopaedic Hospital NHS Trust, London, United Kingdom, <sup>3</sup>University of Portsmouth, School of Pharmacy and Biomedical Science, Portsmouth, United Kingdom

**14:43 - 14:48**

**Predicting Survival, Local Recurrence and Metastasis in Leiomyosarcoma of the Extremities and Trunk Wall: A Systematic Review. 050**

S. Kannan<sup>1,2</sup>, K. Rankin<sup>3</sup>, R. Ashford<sup>2</sup>

<sup>1</sup>Health Education England- North East, Orthopaedics, Newcastle, United Kingdom, <sup>2</sup>University Hospitals of Leicester, Orthopaedics, Leicester, United Kingdom, <sup>3</sup>University Of Newcastle, Orthopaedics, Newcastle, United Kingdom

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*M. Bansal<sup>1</sup>, D. Dalil<sup>2,3</sup>, Z. Shah<sup>1</sup>, N. Khandwalla<sup>1</sup>, M.J. Bankes<sup>1</sup>, A. Isaac<sup>3</sup>, M. George<sup>1</sup>*

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*K. Clesham<sup>1</sup>, P. Ryan<sup>2</sup>, C. Murphy<sup>1</sup>*

*<sup>1</sup>Galway University Hospital, Orthopaedic Surgery, Galway, Ireland, <sup>2</sup>Galway University Hospital, Department of Microbiology, Galway, Ireland*

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*C.F. Kellett<sup>1,2</sup>, I. Afzal<sup>1</sup>, H. Alhammadi<sup>1</sup>, R.E. Field<sup>1,2</sup>*

*<sup>1</sup>South West London Elective Orthopaedic Centre, Research Department, Epsom, United Kingdom, <sup>2</sup>St Georges University of London, London, United Kingdom*

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*D. McCormack, A. Gulati, J. Mangwani*

*University Hospitals of Leicester, Leicester, United Kingdom*

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*P. Riddlestone<sup>1,2</sup>, South West Orthopaedic Research Division<sup>1</sup>, A. Toms<sup>1,3</sup>*

*<sup>1</sup>South West Orthopaedic Research Division (SWORD), Exeter, United Kingdom, <sup>2</sup>Torbay and South Devon NHS Foundation Trust, Trauma and Orthopaedics, Torquay, United Kingdom, <sup>3</sup>Royal Devon and Exeter NHS Foundation Trust, Exeter, United Kingdom*

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*C. Thomas, D. Elliott, S. McGovern, D. Downen, S. Green*

*City Hospitals Sunderland, Trauma and Orthopaedics, Sunderland, United Kingdom*

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*H. Sevenoaks<sup>1</sup>, S. Ajwani<sup>1</sup>, I. Hujazi<sup>1</sup>, J. Sergeant<sup>2</sup>, M. Woodruff<sup>1</sup>, J. Barrie<sup>1</sup>, J. Mehta<sup>1</sup>*

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*E. Iliopoulos, T. Voller, N. Hossain, R. Freeman, J. Vernois, S. Bendall*

*Brighton and Sussex University Hospitals NHS Trust, Trauma and Orthopaedics, Brighton, United Kingdom*

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*I. Afzal<sup>1,2</sup>, T. Smoljanović<sup>1</sup>, G. Stafford<sup>1</sup>, R. Twyman<sup>1</sup>, R.E. Field<sup>1</sup>*

*<sup>1</sup>South West London Elective Orthopaedic Centre, London, United Kingdom, <sup>2</sup>Imperial College London, London, United Kingdom*

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*T. Colegate-Stone<sup>1</sup>, L. Gabriel<sup>1</sup>, J. Sinha<sup>1</sup>, P. Li<sup>1</sup>, J. Casey<sup>2</sup>, J. Moxham<sup>2</sup>*

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*A. Wiik<sup>1</sup>, P. Patel<sup>2</sup>, J. Bovis<sup>2</sup>, P. Pastides<sup>2</sup>, A. Hulme<sup>2</sup>, S. Evans<sup>2</sup>, C. Stuart<sup>2</sup>*

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*J. Nadimi, J. McCann, K. Gillespie, J. Craven, J. Yates*

*Warrington Hospital, Trauma and Orthopaedic Surgery, Warrington, United Kingdom*

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*W.D. Harrison<sup>1</sup>, X. Tonge<sup>1</sup>, V. Bhalai<sup>2</sup>*

*<sup>1</sup>Mersey Deanery, Liverpool, United Kingdom, <sup>2</sup>Wirral University Teaching Hospital, Liverpool, United Kingdom*

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*R. Rambani, V. Gibbs*

*United Lincolnshire Hospitals NHS Trust, Boston, United Kingdom*

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*W. Abuzaiter<sup>1,2</sup>, M. Woolfrey<sup>3,4</sup>, C. Bolton<sup>5</sup>, A. Hallan<sup>1</sup>, S. Cartledge<sup>5</sup>, D. Weeratunga<sup>1</sup>*

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*S. Woods<sup>1</sup>, M. Gough<sup>2</sup>*

*<sup>1</sup>Scunthorpe General Hospital, Trauma and Orthopaedics, Scunthorpe, United Kingdom, <sup>2</sup>Health Education England - Yorkshire and the Humber, Surgery, Leeds, United Kingdom*

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*Royal Sussex County Hospital, Brighton, United Kingdom*

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*D.N. Ramoutar<sup>1</sup>, Y. Thakur<sup>2</sup>, V. Batta<sup>3</sup>, P. Seslija<sup>2</sup>, V. Chung<sup>4</sup>, D. Liu<sup>4</sup>, P. Guy<sup>3,4</sup>*

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*G. Pickering, G. Giddins*

*Royal United Hospital Bath NHS Trust, Trauma and Orthopaedics, Bath, United Kingdom*

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*F. Mahmood<sup>1,2</sup>, J. Clarke<sup>2</sup>, P. Riches<sup>1</sup>*

<sup>1</sup>University of Strathclyde, Biomedical Engineering Unit, Glasgow, United Kingdom, <sup>2</sup>Golden Jubilee National Hospital, Department of Orthopaedics, Glasgow, United Kingdom

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*R. Macfarlane<sup>1,2</sup>, M. Klontzas<sup>2</sup>, H. Manolis<sup>3</sup>, E. Tsiridis<sup>4,5</sup>, A. Mantalaris<sup>2</sup>*

<sup>1</sup>Aintree University Hospital, Trauma and Orthopaedics, Liverpool, United Kingdom, <sup>2</sup>Imperial College London, Chemical Engineering, London, United Kingdom, <sup>3</sup>Northwick Park Hospital, London, United Kingdom, <sup>4</sup>Aristotle University Medical School, Academic Department of Trauma and Orthopaedics, Thessaloniki, Greece, <sup>5</sup>Imperial College London, Department of Surgery and Cancer, London, United Kingdom

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*M. Rashid<sup>1</sup>, S. Dakin<sup>1</sup>, S. Snelling<sup>1</sup>, R. De Godoy<sup>2</sup>, P. Alexis-Mouthuy<sup>1</sup>, O. Hakimi<sup>1</sup>, N. Zargar<sup>1</sup>, J. Dudhia<sup>2</sup>, R. Smith<sup>2</sup>, A. Carr<sup>1</sup>*

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*G. Prasad<sup>1</sup>, A. Sinha<sup>2</sup>*

<sup>1</sup>Nottingham University Hospitals NHS Trust, Trauma and Orthopaedic Surgery, Nottingham, United Kingdom, <sup>2</sup>Chesterfield Royal Hospital, Chesterfield, United Kingdom

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*F. Mahmood<sup>1,2</sup>, J. Clarke<sup>2</sup>, P. Riches<sup>1</sup>*

<sup>1</sup>University of Strathclyde, Biomedical Engineering Unit, Glasgow, United Kingdom, <sup>2</sup>Golden Jubilee National Hospital, Department of Orthopaedics, Glasgow, United Kingdom

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*R. Nandra, R. Williams, L. Grover*

*University of Birmingham, Chemical Engineering, Birmingham, United Kingdom*

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*R. MacFarlane<sup>1</sup>, M. Klontzas<sup>1</sup>, M. Heliotis<sup>2</sup>, E. Tsiridis<sup>3</sup>, A. Mantalaris<sup>1</sup>*

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*R.P. Howlin<sup>1,2</sup>, D.H. Dusane<sup>3</sup>, C. Peters<sup>3</sup>, J.J. Webb<sup>1,2</sup>, P.A. Laycock<sup>4</sup>, J.J. Cooper<sup>4</sup>, S.S. Aiken<sup>4</sup>, E. McPherson<sup>5</sup>, J.F. Granger<sup>6</sup>, P. Stoodley<sup>3,6,7</sup>*

*<sup>1</sup>University of Southampton, Southampton NIHR Respiratory Biomedical Research Unit, Southampton, United Kingdom, <sup>2</sup>University of Southampton, Centre for Biological Sciences, Faculty of Natural and Environmental Sciences and Institute for Life Sciences, Southampton, United Kingdom, <sup>3</sup>The Ohio State University, Department of Microbial Infection and Immunity, Columbus, United States, <sup>4</sup>Biocomposites Ltd, Staffordshire, United Kingdom, <sup>5</sup>LA Orthopedic Institute, Los Angeles, United States, <sup>6</sup>The Ohio State University, Department of Orthopaedics, Columbus, United States, <sup>7</sup>University of Southampton, National Centre for Advanced Tribology, Engineering and the Environment, Southampton, United Kingdom*

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*M. Rashid, R. Smith, N. Nagra, K. Wheway, B. Watkins, S. Snelling, S. Dakin, A. Carr*

*University of Oxford, Nuffield Department of Orthopaedics, Rheumatology, and Musculoskeletal Sciences, Oxford, United Kingdom*

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## Wednesday 26<sup>th</sup> September

08:30 - 10:00

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*S.K. Gill, A. Pearce, R.S. Karwal, N.D. Rossiter*

*Basingstoke and North Hampshire Hospital, Orthopaedics, Basingstoke, United Kingdom*

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*P.B. Petersen, H. Kehlet, C.C. Jørgensen, The Lundbeck Foundation Centre for Fast-Track Hip and Knee Replacement Collaborative group*

*Rigshospitalet, Section for Surgical Pathophysiology, Copenhagen, Denmark*

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*H. Macdonald, A. Jones, T. Fleming, R. Gleeson*

*Gloucestershire Hospitals NHS Foundation Trust, Trauma and Orthopaedic Surgery, Gloucester, United Kingdom*

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A.R. Brown, R. Berber, S. Konstantinidou, J. Dent, J.J. Dias

University Hospitals of Leicester, Leicester, United Kingdom

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<sup>1</sup>Royal Devon and Exeter NHS Foundation Trust, Exeter Hip Unit, Exeter, United Kingdom, <sup>2</sup>Derriford Hospital, Trauma and Orthopaedic Surgery, Plymouth, United Kingdom, <sup>3</sup>Derriford Hospital, Plymouth, United Kingdom

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A. Ramasamy, G. Finlayson, R. Moore, A. Ruiz, D. Acton

Altnagelvin Area Hospital, Trauma and Orthopaedics, Londonderry, United Kingdom

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K. Logishetty<sup>1</sup>, R. van Arkel<sup>2</sup>, G.K.C. Ng<sup>2</sup>, S. Muirhead-Allwood<sup>3</sup>, J. Cobb<sup>1</sup>, J. Jeffers<sup>2</sup>

<sup>1</sup>Imperial College London, MSk Lab, London, United Kingdom, <sup>2</sup>Imperial College London, The Biomechanics Research Group, London, United Kingdom, <sup>3</sup>London Hip Unit, London, United Kingdom

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R. Ferguson<sup>1</sup>, J. Broomfield<sup>1</sup>, T. Malak<sup>1</sup>, A. Palmer<sup>1</sup>, S. Fernquest<sup>1</sup>, D. Whitwell<sup>2</sup>, A. Taylor<sup>2</sup>, S. Glyn-Jones<sup>1</sup>

<sup>1</sup>Nuffield Department of Orthopaedics, Rheumatology and Musculoskeletal Sciences, Oxford University, Oxford, United Kingdom, <sup>2</sup>Nuffield Orthopaedic Centre, Oxford University Hospitals NHS Foundation Trust, Oxford, United Kingdom

09:26 - 09:31 **Predictive factors for revision and survivorship analysis of the Corail/Pinnacle 36mm metal-on-metal total hip replacement: A retrospective cohort study. 533**

O. Pearce<sup>1</sup>, B. Bolland<sup>2</sup>, D. Culliford<sup>3</sup>

<sup>1</sup>Musgrove Park Hospital, Taunton, United Kingdom, <sup>2</sup>Musgrove Park Hospital, Bristol, United Kingdom, <sup>3</sup>University of Southampton, NIHR CLAHRC Wessex Data Science Hub, Southampton, United Kingdom

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*N. Clement<sup>1</sup>, K. Merie<sup>2</sup>, M. Bardgett<sup>2</sup>, K. Smith<sup>2</sup>, J. Ramaskandhan<sup>2</sup>, M. Hashmi<sup>2</sup>, J. Holland<sup>2</sup>*  
<sup>1</sup>Royal Infirmary of Edinburgh, Trauma and Orthopaedics, Melrose, United Kingdom, <sup>2</sup>Freeman Hospital, Newcastle, United Kingdom

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*N. Choudhry, G. Chondrogiannis, I. Liew, B. Kapoor, P. Carter*  
 Aintree University Hospital, Trauma and Orthopaedics Department, Liverpool, United Kingdom

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*I. Stockley<sup>1</sup>, S. Panchani<sup>2</sup>*  
<sup>1</sup>Sheffield Teaching Hospital NHS Trust, Northern General Hospital, Sheffield, United Kingdom, <sup>2</sup>Wrightington Hospital, Lower Limb Arthroplasty, Wigan, United Kingdom

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*N. Peterson<sup>1</sup>, D. Metcalfe<sup>2</sup>, M. Wilkinson<sup>3</sup>, D. Perry<sup>4</sup>*  
<sup>1</sup>Alder Hey Children's Hospital, Liverpool, United Kingdom, <sup>2</sup>Oxford University, Oxford, United Kingdom, <sup>3</sup>Sheffield Teaching Hospitals, Sheffield, United Kingdom, <sup>4</sup>University of Liverpool, Liverpool, United Kingdom

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*K.K. Dhital<sup>1</sup>, S.N. Giles<sup>2</sup>, J.A. Fernandes<sup>2</sup>*  
<sup>1</sup>University of Sheffield, Sheffield, United Kingdom, <sup>2</sup>Sheffield Childrens Hospital, Sheffield, United Kingdom

**08:40 - 08:45**     **Disturbance in growth of the femoral neck after lateral entry paediatric femoral nails. 499**  
*T. Yasin, J. Davies, A. Miller, B. Bashabayev, C. Carpenter*  
 University Hospital of Wales, Trauma and Orthopaedics, Cardiff, United Kingdom

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*C. Watkins, N. Hutt, P. Henman*

*Royal Victoria Infirmary, Trauma and Orthopaedics, Newcastle Upon Tyne, United Kingdom*

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*J.W. Lim<sup>1</sup>, D.M. Campbell<sup>2</sup>, B.A. Clift<sup>2</sup>*

*<sup>1</sup>NHS Grampian, Department of Trauma and Orthopaedic, Aberdeen, United Kingdom, <sup>2</sup>NHS Tayside, Department of Trauma and Orthopaedic, Dundee, United Kingdom*

09:03 - 09:08

**Humeral deformity correction, intramedullary stabilisation and complications in severe osteogenesis imperfecta. 746**

*S. Chilbule, A. Qureshi, C. Wagstaff, N. Nicolaou, S. Giles, J. Fernandes*

*Sheffield Childrens Hospital, Trauma and orthopaedics, Sheffield, United Kingdom*

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*A. Glover<sup>1</sup>, N. Wilson<sup>2</sup>, D. Wright<sup>1</sup>, L. James<sup>1</sup>*

*<sup>1</sup>Alder Hey Children's Hospital, Liverpool, United Kingdom, <sup>2</sup>Liverpool, Liverpool, United Kingdom*

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*E.I. Coveney, P.M. Kelly, P.J. Kiely, J. Noel, P.O. O'Toole, J. Kennedy, D. Moore*

*Our Lady's Children's Hospital Crumlin, Trauma and Orthopaedics, Dublin, Ireland*

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*K. Hughes<sup>1</sup>, A. Fontalis<sup>1</sup>, M.P. Nguyen<sup>1</sup>, M. Williamson<sup>1</sup>, A. Yeo<sup>1</sup>, D. Lui<sup>1</sup>, Y. Gelfer<sup>1,2</sup>*

*<sup>1</sup>St. George's Hospital, Paediatric Orthopaedic Department, London, United Kingdom, <sup>2</sup>St. George's University of London, London, United Kingdom*

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*S. Chilbule, B. Kurien, T. Nunn, J. Fernandes*

*Sheffield Childrens Hospital, Trauma and orthopaedics, Sheffield, United Kingdom*

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**Compartment syndrome in children - 11 year experience in tertiary referral university hospital. 603**

*S. Sha, F. Ali, E. Morakis, S. Alshryda*

*Manchester University NHS Trust, Paediatric Orthopaedics, Manchester, United Kingdom*

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*S. Gudipati, A. Lloyd, P. Chikkalur, R. Vadivelu*

*Royal Wolverhampton NHS Trust, Trauma and Orthopaedics, Wolverhampton, United Kingdom*

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**To evaluate functional and radiologic outcome of distraction osteogenesis in patients with infected gap nonunions of tibia. 043**

*A. Singh*

*Russell Hall Hospital, Trauma and Orthopaedics, Dudley, United Kingdom*

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**Genu Recurvatum Can Be Effectively Treated With External Circular Fixator - A Two Centre Retrospective Case Series. 081**

*H.Q. Sheikh<sup>1</sup>, J. McCammon<sup>2</sup>, J. Fernandes<sup>3</sup>, N. Nicolaou<sup>3</sup>, A. Cooper<sup>2</sup>*

*<sup>1</sup>Sheffield Childrens Hospital, Trauma and Orthopaedics, Sheffield, United Kingdom, <sup>2</sup>BC Children's Hospital, Vancouver, Canada, <sup>3</sup>Sheffield Childrens Hospital, Sheffield, United Kingdom*

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**Defining the normal proximal tibio-fibular relationship in children: a simple radiographic measurement. 191**

*A. Abdelhaq, E. Walker, A. Sanghrajka*

*Norfolk and Norwich University Hospitals NHS Trust, Trauma and Orthopaedics, Norwich, United Kingdom*

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*N. Fawcett<sup>1</sup>, J. Dabis<sup>2</sup>, J. Belsey<sup>3</sup>, R. Khakha<sup>4</sup>, S. Yasen<sup>5</sup>, M. Risebury<sup>1</sup>, A. Wilson<sup>6</sup>*

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**Discussion**

## Podium Presentations

**14:20 - 15:50** **Foot and Ankle Free Papers**  
Hall 10

**14:20 - 14:25** **Kinematic Analysis of Combined Suture-Button and Internal Brace Constructs for Ankle Syndesmosis Injuries. 017**

A. Wood<sup>1</sup>, S. Arshad<sup>2</sup>, H. Kim<sup>1</sup>, D. Stewart<sup>3</sup>

<sup>1</sup>John Peter Smith Hospital, Orthopaedic Surgery, Fort Worth, United States, <sup>2</sup>University of North Texas Health Science Center, Anatomy, Fort Worth, United States, <sup>3</sup>Arlington Orthopaedic Associates, Orthopaedic Surgery, Arlington, United States

**14:25 - 14:30** **The Plantar Support of the Navicular Cuneiform Joint - A Major Component of the Medial Longitudinal Arch. 341**

R. Macfarlane<sup>1</sup>, A. Molloy<sup>1</sup>, A. Fisher<sup>2</sup>, L. Fisher<sup>2</sup>, E. Swanton<sup>2</sup>, L. Mason<sup>1</sup>

<sup>1</sup>University Hospital Aintree, Liverpool, United Kingdom, <sup>2</sup>Liverpool University, Liverpool, United Kingdom

**14:30 - 14:35** **The Lateral Lisfranc Ligament - A Structure of Great Importance in Midfoot Injuries. 762**

L. Jayatilaka<sup>1</sup>, A. Fisher<sup>2</sup>, L. Fisher<sup>2</sup>, E. Swanton<sup>1</sup>, A. Molloy<sup>1</sup>, L. Mason<sup>1</sup>

<sup>1</sup>University Hospital Aintree, Liverpool, United Kingdom, <sup>2</sup>Liverpool University, Liverpool, United Kingdom

**14:35 - 14:42** **Discussion**

**14:43 - 14:48** **Is regional ankle block needed in conjunction to General Anaesthesia for first ray surgery? A randomised controlled trial of ultrasound guided ankle block versus blind local infiltration. 136**

R.S. Auja, V.I. Roberts, F.N. Fombon, H.P. Singh, M. Bhatia

University Hospitals of Leicester, Leicester, United Kingdom

**14:48 - 14:53** **Investigation of the stress-strain state of the foot model before and after surgical treatment by different methods. 234**

P. Rakhman, O. Korolkov

Sytenko Institute of Spine and Joint Pathology NAMS Ukraine, Paediatric Orthopaedic department, Kharkiv, Ukraine

**14:53 - 14:58** **Muller-Weiss Disease: A Spectrum of Operative Management. 315**

C.H. Tang<sup>1</sup>, V. Mishra<sup>2</sup>

<sup>1</sup>Hull and East Yorkshire Hospitals, Leeds, United Kingdom, <sup>2</sup>Hull and East Yorkshire Hospitals, Hull, United Kingdom

**14:58 - 15:05** **Discussion**



## Podium Presentations

**15:06 - 15:11**

**Diabetic Foot Preservation - Excellent Outcomes of Diabetic Foot Ulceration and Osteomyelitis Treated with Antibiotic Loaded Stimulan. 364**

*B. Kapur, T. El Gamal, D. Harvey, G. Jackson, S. Platt*

*Wirral University Teaching Hospital, Liverpool, United Kingdom*

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**First metatarsophalangeal joint arthrodesis using an intra-osseous post and lag screw with immediate bearing of weight. 416**

*S. Patel, P. Garg, M.A. Fazal, P.S. Ray*

*Barnet General Hospital, Department of Orthopaedics, Barnet, United Kingdom*

**15:16 - 15:21**

**Outcomes for Open Fasciotomy in Chronic Exertional Compartment Syndrome in a Mixed Patient Group. 505**

*C. Thomson<sup>1</sup>, S. Sirikonda<sup>1</sup>, J. Halshall<sup>2</sup>*

*<sup>1</sup>Royal Liverpool and Broadgreen University Hospitals NHS Trust, Foot and Ankle Department, Liverpool, United Kingdom, <sup>2</sup>Liverpool University, Liverpool, United Kingdom*

**15:21 - 15:28**

**Discussion**

**15:29 - 15:34**

**Results of Ankle Arthrodesis in a regional Foot and Ankle unit a Case Series. 546**

*R. Harding, A. Tong, P. Hodgson*

*University Hospital of Wales, Cardiff, United Kingdom*

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**Compliance With BOAST 12 In A Typical District General Hospital. 555**

*J. Manara, S. Phillips, M. Larsen, C. Mcardle*

*Royal Gwent Hospital, Newport, United Kingdom*

**15:39 - 15:44**

**First MTP joint fusion using cup and cone reamers with cannulated screws: A retrospective study of clinical and cost effectiveness. 051**

*S. Kannan<sup>1,2</sup>, M. Asif<sup>2</sup>, Q. Sultan<sup>3</sup>, B. Maneesh<sup>2</sup>*

*<sup>1</sup>Health Education England North East, Orthopaedics, Newcastle, United Kingdom, <sup>2</sup>University Hospitals of Leicester, Orthopaedics, Leicester, United Kingdom, <sup>3</sup>Royal Victoria Infirmary and Freeman Hospital, Orthopaedics, Newcastle, United Kingdom*

**15:44 - 15:50**

**Discussion**

## Podium Presentations

**16:20 - 17:45** Trauma Free Papers 1  
Hall 5

**16:20 - 16:25** Results of treatment of displaced femoral neck fractures in the elderly by cemented total hip replacement versus dual mobility cup total hip replacement: focus on functional outcome and health related quality of life. **041**

R. Rashed<sup>1</sup>, H. Sevenoaks<sup>1</sup>, A. Shabaan<sup>2</sup>, M. Kasem<sup>3</sup>, T. Elkhadrwe<sup>3</sup>, M. Eldakhakhny<sup>3</sup>, Q. Choudry<sup>1</sup>

<sup>1</sup>Royal Blackburn Hospital, Blackburn, United Kingdom, <sup>2</sup>Alexandria University, Physical Medicine, Alexandria, Egypt, <sup>3</sup>Alexandria University, Alexandria, Egypt

**16:25 - 16:30** Age and Sex specific incidence of hip fractures in the elderly: a 10 year observational study. **455**

E.I. Coveney<sup>1</sup>, D. McKeown<sup>2</sup>, M. Cleary<sup>1</sup>, J.F. Quinlan<sup>3</sup>

<sup>1</sup>University Hospital Waterford, Trauma and Orthopaedics, Waterford City, Ireland, <sup>2</sup>Health Service Executive, Public Health Medicine and Epidemiology, Dublin, Ireland, <sup>3</sup>Tallaght Hospital, Trauma and Orthopaedics, Dublin, Ireland

**16:30 - 16:35** Does Nottingham Hip Fracture Score Predict Mortality in Distal Femoral Fracture Patients? **453**

I. Liew, N. Choudry, S. Kumar, J. Attwood, J. Fountain

Aintree University Hospital, Liverpool, United Kingdom

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**16:43 - 16:48** Use of anticoagulants remains a significant threat to timely hip fracture surgery. **420**

M. Diament<sup>1</sup>, R. Taranu<sup>1</sup>, C. Redclift<sup>1</sup>, P. Williams<sup>1</sup>, A. Tate<sup>1</sup>, F. Wilson<sup>2</sup>, J. Maddox<sup>1</sup>, W. Eardley<sup>1</sup>

<sup>1</sup>James Cook University Hospital, Trauma and Orthopaedics, Middlesbrough, United Kingdom, <sup>2</sup>City Hospitals Sunderland, Sunderland, United Kingdom

**16:48 - 16:53** Is it necessary to stop direct thrombin and factor Xa inhibitor anticoagulation therapy prior to hip fracture surgery? **237**

V. Gibbs, P. Raval, R. Rambani

United Lincolnshire Hospitals NHS Trust, Boston, United Kingdom

**16:53 - 16:58** Should radiation exposure and risk of developing fatal solid tumours in polytrauma patients be an issue of concern? **605**

A. Howard, M. Panteli, P. Giannoudis

Leeds Teaching Hospitals, Academic Unit of Orthopaedic Surgery, Leeds, United Kingdom

**15:58 - 17:05** Discussion

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**17:06 - 17:11**

**The Terrorist Attack (TA) on Manchester - The impact on a Manchester Major Trauma Centre (MTC): Lessons Learned. Part One. 592**

A. Shoaib<sup>1,2</sup>, A. Pillai<sup>1</sup>, M. Ballal<sup>1</sup>, J. Wong<sup>3</sup>, A. Reid<sup>3</sup>, R. Shariff<sup>1</sup>, P. Sardar<sup>1</sup>, A. Ebinisan<sup>1</sup>, C. Butaliu<sup>1</sup>, M. Soufi<sup>1</sup>, W. Ben Nafa<sup>1</sup>, S. Adcock<sup>4</sup>, J. Theaker<sup>4</sup>, L. Sumara<sup>4</sup>, A. Robinson<sup>4</sup>, H. Neary<sup>4</sup>, H. Syed<sup>1</sup>

<sup>1</sup>Manchester University NHS Trust, Orthopaedic Surgery, Manchester, United Kingdom, <sup>2</sup>UKIETR, Manchester, United Kingdom, <sup>3</sup>Manchester University NHS Trust, Plastic Surgery, Manchester, United Kingdom, <sup>4</sup>Manchester University NHS Trust, Physiotherapy, Manchester, United Kingdom

**17:11 - 17:16**

**The Terrorist Attack (TA) on Manchester - The impact on a Manchester Major Trauma Centre (MTC): Lessons learnt. Part Two. 419**

S. Adcock<sup>1</sup>, J. Theaker<sup>1,2</sup>, A. Shoaib<sup>1</sup>, L. Sumara<sup>3</sup>, A. Robinson<sup>4</sup>, H. Neary<sup>1</sup>, M. Soufi<sup>1</sup>, C. Butaliu<sup>1</sup>, J. Wong<sup>3</sup>, A. Reid<sup>3</sup>, R. Shariff<sup>1</sup>, I. Majid<sup>3</sup>, A. Pillai<sup>3</sup>, M. Ballal<sup>3</sup>, W. Ben Nafa<sup>3</sup>

<sup>1</sup>Manchester University NHS Trust, Trauma and Orthopaedic, Manchester, United Kingdom, <sup>2</sup>University of Manchester, Faculty of Biology, Medicine and Health, Manchester, United Kingdom, <sup>3</sup>Manchester University NHS Trust, Wythenshawe Hospital, Manchester, United Kingdom, <sup>4</sup>Manchester University NHS Trust, Royal Manchester Children's Hospital, Manchester, United Kingdom

**17:16 - 17:21**

**Traumatic multiple rib fractures: core quality of life outcomes from a patient's perspective. 540**

J. Claydon<sup>1</sup>, G. Maniatopoulos<sup>2</sup>, L. Robinson<sup>1</sup>, P. Fearon<sup>3</sup>

<sup>1</sup>Newcastle upon Tyne Hospitals NHS FT, Major Trauma Rehabilitation Service, Newcastle, United Kingdom, <sup>2</sup>Newcastle University, Institute of Health and Society, Newcastle, United Kingdom, <sup>3</sup>Newcastle upon Tyne Hospitals NHS FT, Trauma and Orthopaedics, Newcastle, United Kingdom

**17:21 - 17:28**

**Discussion**

**17:29 - 17:34**

**Time to surgery for ankle fractures. Does this affect infection rates? 794**

P. Rai<sup>1</sup>, N. Johnson<sup>1</sup>, K. Almeida<sup>2</sup>, M. Jitendra<sup>1</sup>

<sup>1</sup>University Hospitals Leicester, Trauma and Orthopaedics, Leicester, United Kingdom, <sup>2</sup>University of Leicester, Leicester, United Kingdom

**17:34 - 17:39**

**Value Added CT? Does Scanning In "Simple" Ankle Fractures Change Management? 079**

H.Q. Sheikh, S. Royston, E. Mills, R. Gibson, M. Dennison, J. McGregor-Riley

Sheffield Teaching Hospitals, Sheffield, United Kingdom

**17:39 - 17:44**

**Medial malleolus fixation in unstable ankle fractures: Are we wasting our time? 297**

T. Carter, S. Mackenzie, K. Bell, D. Macdonald, A. Duckworth, T. White

Edinburgh Trauma Unit - Royal Infirmary of Edinburgh, Orthopaedics and Trauma, Edinburgh, United Kingdom

**17:44 - 17:50**

**Discussion**

## Podium Presentations

**16:20 - 17:45** General Free Papers 2  
Hall 9

**16:20 - 16:25** Vitamin D Insufficiency may be linked to lower patient reported outcome measure (PROM) scores following total hip or knee replacement. **675**

R. Morrison<sup>1</sup>, K. Rankin<sup>2</sup>, M. Reed<sup>1</sup>

<sup>1</sup>Northumbria Healthcare Trust, Department of Orthopaedics, Ashington, United Kingdom, <sup>2</sup>Newcastle University, Newcastle, United Kingdom

**16:25 - 16:30** Highest risk period for early revision of Total Hip and Knee Replacement differs. **456**

I. Afzal, R. Twyman, R.E. Field

South West London Elective Orthopaedic Centre, London, United Kingdom

**16:30 - 16:35** Should Systemic Absorption Be A Concern When Using Antibiotic Loaded Calcium Sulphate In The Treatment Of Osteomyelitis. **701**

S. Haque, M. Soufi, S. Jayaraman, A. Shoaib, F. Barzo

Manchester University NHS Foundation Trust, Manchester, United Kingdom

**16:35 - 16:42** Discussion

**16:43 - 16:48** The Antibiofilm activity of Acetic Acid in the Management of Periprosthetic Joint Infection. **094**

S.-T.J. Tsang<sup>1</sup>, P. Gwynne<sup>2</sup>, T. Walsh<sup>3</sup>, M. Gallagher<sup>2</sup>, H. Simpson<sup>1</sup>

<sup>1</sup>University of Edinburgh, Department of Orthopaedic surgery, Edinburgh, United Kingdom, <sup>2</sup>University of Edinburgh, School of Biological Sciences, Edinburgh, United Kingdom, <sup>3</sup>University of Edinburgh, Department of Anaesthesia, Critical Care, and Pain Medicine, Edinburgh, United Kingdom

**16:48 - 16:53** Diagnosing Periprosthetic Joint Infection: An independent, single-centre assessment of the alpha-defensin laboratory test. **422**

M. Diamant, A. Raza, K. Igor, P. Baker, J. Webb, A. Port, S. Jameson

James Cook University Hospital, Trauma and Orthopaedics, Middlesbrough, United Kingdom

**16:53 - 16:58** Clinical Experience of Treating Fungal Periprosthetic Joint Infection in a Specialist Orthopaedic Hospital. **147**

T. Azamgarhi<sup>1</sup>, T. Abdelrahman<sup>2</sup>, K. Maruthainar<sup>2</sup>, S. Palanivel<sup>3</sup>, S. Warren<sup>4</sup>

<sup>1</sup>Royal National Orthopaedic Hospital NHS Trust, Pharmacy, London, United Kingdom, <sup>2</sup>Royal National Orthopaedic Hospital NHS Trust, JRU/Sarcoma, London, United Kingdom, <sup>3</sup>Royal National Orthopaedic Hospital NHS Trust, Stanmore, London, United Kingdom, <sup>4</sup>Royal National Orthopaedic Hospital NHS Trust, Microbiology, London, United Kingdom

**15:58 - 17:05** Discussion

## Podium Presentations

**17:06 - 17:13**    **The use of tourniquet in total knee arthroplasty - a randomised controlled trial.**  
*Dr C H Yan*

**17:13 - 17:16**    **Discussion**

### Thursday 27<sup>th</sup> September

**08:30 - 10:00**    **Knee Free Papers**  
 Hall 1

**08:30 - 08:35**    **A comparison of patient reported outcome measures following total knee replacement with either the Depuy Synthes Attune™ or Depuy Synthes PFCTM total knee replacement systems: A single blinded randomised controlled trial. 444**

*S. Panchani, H. Divecha, R. Lafferty, G. Pavlou, J. Oakley, D. Shaw, H. Wynn Jones, V. Raut, R. Smith, A. Gambhir, T. Board*

*Wrightington Hospital, Lower Limb Arthroplasty, Wigan, United Kingdom*

**08:35 - 08:40**    **Robotic-assisted total knee arthroplasty maintains posterior condylar offset with greater femoral component flexion, smaller component size and better early functional results. 187**

*F. Rowan, J. Pietrzak, M. Donaldson, B. Kayani, F. Haddad*

*UCLH, Orthopaedic Surgery, London, United Kingdom*

**08:40 - 08:45**    **Robotic-arm assisted total knee arthroplasty improves early functional recovery and time to hospital discharge compared to conventional jig-based total knee arthroplasty: A prospective cohort study. 178**

*B. Kayani, S. Konan, J. Tahmassebi, J.R.T. Pietrzak, F.S. Haddad*

*University College Hospital, Trauma and Orthopaedics, London, United Kingdom*

**08:45 - 08:52**    **Discussion**

**08:53 - 08:58**    **Simulated patello-femoral kinematics correlate with patient reported outcomes following total knee arthroplasty. 620**

*J. Twiggs<sup>1,2</sup>, A. Shimmin<sup>3,4</sup>, E. Wakelin<sup>1</sup>, B. Miles<sup>1</sup>*

*<sup>1</sup>360 Knee Systems, Sydney, Australia, <sup>2</sup>University of Sydney, Sydney, Australia, <sup>3</sup>The Avenue Hospital, Melbourne, Australia, <sup>4</sup>Melbourne Orthopaedic Group, Sydney, Australia*

**08:58 - 09:03**    **Mid Flexion Instability: An Intra-Operative Kinematic Study Comparing The Single-Radius And Multi-Radius Total Knee Replacement. 786**

*S. Gudipati, V. Dewan, S. Deshpande*

*Royal Wolverhampton NHS Trust, Trauma and Orthopaedics, Wolverhampton, United Kingdom*

## Podium Presentations

09:03 - 09:08

**Comparison of adductor canal block and IPACK block (Interspace between the Popliteal Artery and the Capsule of the posterior Knee) with adductor canal block alone after total knee arthroplasty: A prospective control trial on pain and knee function in immediate postoperative period. 710**

*D. Daultan<sup>1</sup>, V. Khanna<sup>2</sup>*

*<sup>1</sup>Sunshine Hospitals, Orthopaedics, Navi Mumbai, India, <sup>2</sup>Sunshine Hospitals, Orthopaedics, Hyderabad, India*

09:08 - 09:15

**Discussion**

09:16 - 09:21

**A prospective comparative study between PFO Proximal Fibular Osteotomy plus Stem Cell Therapy of knee joint versus Proximal Fibular Osteotomy alone in treatment protocol of knee joint Osteoarthritis grade II, III. 563**

*A. Alkhuzai*

*Sulaimani University, Orthopaedic Department, Sulaimaniya, Iraq*

09:21 - 09:26

**An age-stratified, propensity matched comparison of total and medial unicompartmental knee replacement. 697**

*J. Kennedy<sup>1</sup>, E. Burn<sup>1</sup>, T. Hamilton<sup>1</sup>, S. Mellon<sup>1</sup>, D. Murray<sup>1,2</sup>*

*<sup>1</sup>University of Oxford, NDORMS, Oxford, United Kingdom, <sup>2</sup>Nuffield Orthopaedic Centre, Oxford University Hospitals NHS Foundation Trust, Oxford, United Kingdom*

09:26 - 09:31

**Is topical vancomycin an option? A randomised controlled trial to determine the safety of topical use of vancomycin powder in preventing post-operative infections in total knee arthroplasty (TKA). 249**

*M. Woolfrey<sup>1,2</sup>, W. Abuzaiter<sup>3,4</sup>, A. Hallan<sup>3,5</sup>, C. Bolton<sup>1</sup>, S. Cartledge<sup>6</sup>, D. Warchuk<sup>7</sup>*

*<sup>1</sup>Brant Community Health Care System, Orthopaedic, Brantford, Canada, <sup>2</sup>McMaster University, Orthopaedic, Hamilton, Canada, <sup>3</sup>Brant Community Health Care System, Pharmacy, Brantford, Canada, <sup>4</sup>University Of Waterloo, Pharmacy, Waterloo, Canada, <sup>5</sup>Hamilton Health Science Center, Pharmacy, Hamilton, Canada, <sup>6</sup>Brant Community Health Care System, Brantford, Canada, <sup>7</sup>Orthopaedic Center, Brantford, Canada*

09:39 - 09:44

**Reconstruction of the ruptured extensor mechanism of the knee using a Polytape: A retrospective outcome study. 515**

*N. jain, N. tawa, D. bhamare, W. hage, M. dawson, S. mannan, M. orr, B. sankar, R. dharmarajan*

*North Cumbria University Hospital, Orthopaedics, Carlisle, United Kingdom*

09:44 - 09:49

**Radiographic evaluation of revised unicompartmental knee replacement in the National Joint Registry. 690**

*J. Kennedy<sup>1</sup>, J. Palan<sup>2</sup>, S. Mellon<sup>1</sup>, H. Pandit<sup>1,3</sup>, D. Murray<sup>1,4</sup>*

*<sup>1</sup>University of Oxford, NDORMS, Oxford, United Kingdom, <sup>2</sup>Nottingham University Hospitals NHS Trust, Nottingham City Hospital, Nottingham, United Kingdom, <sup>3</sup>Leeds Institute of Rheumatic and Musculoskeletal Medicine, Leeds, United Kingdom, <sup>4</sup>Nuffield Orthopaedic Centre, Oxford University Hospitals NHS Foundation Trust, Oxford, United Kingdom*

## Podium Presentations

09:49 - 09:54

**Preoperative Central Sensitisation of Pain in Knee Osteoarthritis Patients Predicts Chronic Postoperative Pain 6 months Following Total Knee Replacement Surgery. A Prospective Functional Brain MRI Study. 111**

*T. Kurien<sup>1</sup>, L. Arendt-Nielsen<sup>2</sup>, K. Petersen<sup>2</sup>, T. Graven-Nielsen<sup>2</sup>, D. Auer<sup>3</sup>, B. Scammell<sup>1</sup>*

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09:54 - 10:00

Discussion

08:30 - 10:00

**Innovation in Simulation Free Papers**  
(Innovation in Simulation Prize)  
Hall 9

08:30 - 08:35

**A mobile app for collecting outcome measures: first user feedback amongst TKA patients. 088**

*E. Davis<sup>1</sup>, A. Kamali<sup>2</sup>, D. De Faoite<sup>2</sup>, B. Hanson<sup>2</sup>, I. McNamara<sup>3</sup>*

*<sup>1</sup>The Royal Orthopaedic Hospital NHS Foundation Trust, Birmingham, United Kingdom, <sup>2</sup>Smith & Nephew, Leamington Spa, United Kingdom, <sup>3</sup>Norfolk and Norwich University Hospital, Norwich, United Kingdom*

08:35 - 08:40

**A randomised control trial of naïve medical students performing a shoulder joint clinical examination; textbook versus seminar versus video. 198**

*P. Brewer<sup>1,2</sup>, M. Racy<sup>1,2</sup>, M. Hampton<sup>1,2</sup>, F. Mushtaq<sup>3</sup>, J. Tomlinson<sup>1,2</sup>, F. Ali<sup>1,4</sup>*

*<sup>1</sup>University of Sheffield, Sheffield, United Kingdom, <sup>2</sup>Northern General Hospital, Trauma and Orthopaedics, Sheffield, United Kingdom, <sup>3</sup>University of Leeds, School of Psychology, Leeds, United Kingdom, <sup>4</sup>Chesterfield Royal Hospital, Trauma and Orthopaedics, Chesterfield, United Kingdom*

08:40 - 08:45

**Current state of undergraduate trauma & orthopaedics training in the UK: A national survey. 812**

*J.C. Zhao<sup>1</sup>, K. Malik-Tabassum<sup>2</sup>, J. Aderinto<sup>3</sup>*

*<sup>1</sup>East Kent University Hospital NHS Foundation Trust, London, United Kingdom, <sup>2</sup>Queen Elizabeth The Queen Mother Hospital, London, United Kingdom, <sup>3</sup>Leeds General Infirmary, Leeds, United Kingdom*

08:45 - 08:52

Discussion

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**Computer-adaptive testing versus traditional patient-reported outcome measures. A systematic review. 087**

*A. Kamali, S. Richmond, D. De Faoite, B. Hanson*

*Smith & Nephew, Leamington Spa, United Kingdom*

## Podium Presentations

08:58 - 09:03

### Factors deterring UK medical graduates from pursuing a career in Trauma & Orthopaedics - Results of a National Survey. 390

K. Malik-Tabassum<sup>1</sup>, J. Zhao<sup>1</sup>, S. Naguleswaran<sup>2</sup>, J. Adreinto<sup>3</sup>

<sup>1</sup>Queen Elizabeth The Queen Mother Hospital, Trauma & Orthopaedics, Margate, United Kingdom, <sup>2</sup>Royal Albert Edward Infirmary, Wigan, United Kingdom, <sup>3</sup>Leeds General Infirmary, Trauma & Orthopaedics, Leeds, United Kingdom

09:03 - 09:08

### The prevalence and effects of on call stepdown on orthopaedic registrar training: The North West trainees perspective. 572

S. Ajwani<sup>1</sup>, N.W.O.R.C. North West Orthopaedic Research Collaborative<sup>1</sup>, L. Baint<sup>1,2</sup>

<sup>1</sup>North West Orthopaedic Research Collaborative, <sup>3</sup> Piccadily Place, Manchester, United Kingdom, <sup>2</sup>The University of Manchester, Academic department of Trauma and Orthopaedic, Manchester, United Kingdom

09:08 - 09:15

### Discussion

10:30 - 12:00

### Innovation in Simulation Free Papers (Simulation Free Paper Prize) Hall 9

10:30 - 10:35

### Propheying the date of discharge preoperatively with a smartphone app: an advantageous amalgamation of technology and statistics. 385

V. Khanna, D. Daultani

Sunshine Hospitals, Arthroplasty, Orthopaedics, Secunderabad, India

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### Cognitive Task Analysis for Total Hip Arthroplasty - Thinking like an Expert Surgeon 98

K. Logishetty<sup>1</sup>, W. Gofton<sup>2</sup>, P. Beale<sup>2</sup>, R. Field<sup>3</sup>, R. Bhattacharyya<sup>1</sup>, C. Gupte<sup>1</sup>, J. Cobb<sup>1</sup>

<sup>1</sup>Imperial College London, MSk Lab, London, United Kingdom, <sup>2</sup>University of Ottawa, Department of Orthopaedics, Ottawa, Canada, <sup>3</sup>St Georges University of London, Department of Orthopaedics, London, United Kingdom

10:40 - 10:47

### Discussion

10:48 - 10:53

### Factors contributing to underrepresentation of women in Trauma & Orthopaedics: Results of a National Survey 777

K. Malik-Tabassum<sup>1</sup>, J. Zhao<sup>1</sup>, S. Naguleswaran<sup>2</sup>, J. Aderinto<sup>3</sup>

<sup>1</sup>Queen Elizabeth The Queen Mother Hospital, Trauma & Orthopaedics, Margate, United Kingdom, <sup>2</sup>Royal Albert Edward Infirmary, Wigan, United Kingdom, <sup>3</sup>Leeds General Infirmary, Trauma & Orthopaedics, Leeds, United Kingdom

10:53 - 10:58

### The role of cognitive simulation in surgical education; the advent of mobile applications 839

C. O'Dowd-Booth, P. Cameron

Brighton & Sussex University Hospitals NHS Trust, Brighton, United Kingdom



## Podium Presentations

**10:58 - 11:03**      **Understanding hip fractures made easy: The kinaesthetic learning device 864**

*C. Lambourn, P. D'Sa, A. Tambe*

*Royal Derby Hospital, Trauma and Orthopaedics, Derby, United Kingdom*

**11:03 - 11:10**      **Discussion**

**16:50 - 18:00**      **Spine Free Papers**  
Hall 5

**16:50 - 16:55**      **Can Spinal Surgery be saved from litigation: A review of all NHS negligence claims 2013-2016 under Getting It Right First Time (GIRFT) 477**

*J. Hardman<sup>1</sup>, J. Machin<sup>2,3,4</sup>, W. Harrison<sup>5</sup>, T.W.R. Briggs<sup>3,4</sup>, M. Hutton<sup>3,4,6</sup>*

*<sup>1</sup>North West Thames Deanery, Orthopaedics, London, United Kingdom, <sup>2</sup>Chesterfield Royal Hospital, Chesterfield, United Kingdom, <sup>3</sup>NHS Improvement, London, United Kingdom, <sup>4</sup>Royal National Orthopaedic Hospital NHS Trust, Stanmore, United Kingdom, <sup>5</sup>Mersey Deanery, Liverpool, United Kingdom, <sup>6</sup>Royal Devon and Exeter NHS Foundation Trust, Exeter, United Kingdom*

**16:55 - 17:00**      **First presentation of adolescent idiopathic scoliosis- growing evidence for school prevention programme. 539**

*J. Herzog<sup>1</sup>, N. Pate<sup>2</sup>, D. Lui<sup>3</sup>, T. Bishop<sup>3</sup>, J. Bernard<sup>3</sup>, D. Chan<sup>2</sup>, O. Stokes<sup>2</sup>*

*<sup>1</sup>Royal National Orthopaedic Hospital, Orthopaedics, London, United Kingdom, <sup>2</sup>Royal Devon and Exeter NHS Foundation Trust, Exeter, United Kingdom, <sup>3</sup>St George's University Hospitals NHS Foundation Trust, London, United Kingdom*

**17:00 - 17:05**      **Predicting the need for surgical intervention in patients with Spondylodiscitis - The Brighton Spondylodiscitis Score (BSDS) 743**

*R. Shafafy<sup>1</sup>, N. Appalanaidu<sup>2</sup>, C. Gee<sup>2</sup>, K. Brogan<sup>2</sup>, S. Karmani<sup>2</sup>, S. Elsayed<sup>2</sup>*

*<sup>1</sup>Brighton and Sussex University Hospitals NHS Trust, Guildford, United Kingdom, <sup>2</sup>Brighton and Sussex University Hospitals NHS Trust, Brighton, United Kingdom*

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**17:13 - 17:18**      **Non spinal scoring systems as predictors of mortality in elderly patients with fractures of the Odontoid peg. 739**

*R. Shafafy<sup>1</sup>, M. Valsamis<sup>2</sup>, J. Luck<sup>3</sup>, R. Dimock<sup>3</sup>, S. Rampersad<sup>2</sup>, W. Kieffer<sup>2</sup>, S. Elsayed<sup>2</sup>*

*<sup>1</sup>Brighton and Sussex University Hospitals NHS Trust, Guildford, United Kingdom, <sup>2</sup>Brighton and Sussex University Hospitals NHS Trust, Brighton, United Kingdom, <sup>3</sup>Royal Surrey County Hospital NHS Foundation Trust, Guildford, United Kingdom*

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*B. Lineham, Z. Abual-Rub, F. Sim, A. Khan*

*Leeds General Infirmary, Leeds, United Kingdom*

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*P. Banerjee<sup>1</sup>, M. Thomas<sup>2</sup>, A. Way<sup>2</sup>*

*<sup>1</sup>St George's Hospital London, Orthopaedics, London, United Kingdom, <sup>2</sup>Frimley Park Hospital, Orthopaedics, Camberley, United Kingdom*

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*D. Hill, H. Marynissen*

*East Lancashire Hospitals NHS Trust, Trauma and Orthopaedic Surgery, Blackburn, United Kingdom*

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*A. Dekker, Z. Borton, M. Espag, T. Cresswell, A. Tambe, D. Clark*

*Royal Derby Hospital, Shoulder and Elbow Surgery, Derby, United Kingdom*

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*Royal Derby Hospital, Derby, United Kingdom*

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*Sherwood Forest Hospitals, Trauma and Orthopaedics, Sutton-in-Ashfield, United Kingdom*

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*M. Almustafa<sup>1</sup>, R. Tansey<sup>1</sup>, P. Patil<sup>1</sup>, A. Rashid<sup>2</sup>, J.J. George-Malal<sup>1</sup>*

*<sup>1</sup>Bedford Hospital NHS Trust, Trauma and Orthopaedics, Bedford, United Kingdom, <sup>2</sup>Bedford Hospital NHS Trust, Department of Anaesthesia, Bedford, United Kingdom*

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*J.J.E. White, E. Ibrahim, M. Morgan, D.I. Clark, T. Cresswell, M.P. Espag, A.A. Tambe  
Royal Derby Hospital, Trauma and Orthopaedic Surgery, Derby, United Kingdom*

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*A.B. Scrimshire, S. Mannan, D. Mackay  
North Cumbria University Hospital, Carlisle, United Kingdom*

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*P. Dacombe<sup>1</sup>, J. Kendall<sup>1</sup>, P. McCann<sup>2</sup>, I. Packham<sup>1</sup>, P. Sarangi<sup>1</sup>, M. Whitehouse<sup>1</sup>, M. Crowther<sup>1</sup>  
<sup>1</sup>Southmead Hospital, Avon Orthopaedic Centre, Bristol, United Kingdom, <sup>2</sup>University Hospitals Bristol NHS Foundation Trust, Department of Trauma and Orthopaedic Surgery, Bristol, United Kingdom*

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*P. Mohanlal<sup>1</sup>, A. Phadke<sup>2</sup>, K. Dhaliwal<sup>2</sup>, A. Gulihar<sup>2</sup>, R. Bawale<sup>2</sup>, M. Bhat<sup>2</sup>, N. Bakti<sup>2</sup>, B. Singh<sup>2</sup>  
<sup>1</sup>Medway Maritime Hospital, Trauma and Orthopaedics, Medway, United Kingdom, <sup>2</sup>Medway Maritime Hospital, Medway, United Kingdom*

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*S. Sonanis<sup>1</sup>, T. Mir<sup>1</sup>, N. Deshmukh<sup>2</sup>, S. Kumar<sup>1</sup>  
<sup>1</sup>Bronglais General Hospital and Hywel Dda University Health Board, Trauma and Orthopaedics, Aberystwyth, United Kingdom, <sup>2</sup>Withybush General Hospital and Hywel Dda University Health Board, Trauma and Orthopaedics, Haverfordwest, United Kingdom*

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*H.Q. Sheikh, A. Aqil, F. Hossain, H. Kapoor  
Leeds Teaching Hospitals, Trauma and Orthopaedics, Leeds, United Kingdom*

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*H. Macdonald<sup>1</sup>, N. Vetharajan<sup>1,2</sup>, P. Kempshall<sup>1</sup>*

*<sup>1</sup>Gloucestershire Hospitals NHS Foundation Trust, Trauma and Orthopaedic Surgery, Gloucester, United Kingdom, <sup>2</sup>Southmead Hospital, Trauma and Orthopaedic Surgery, Bristol, United Kingdom*

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*P. McKeag<sup>1</sup>, B. Hanratty<sup>2</sup>, A. Spence<sup>3</sup>*

*<sup>1</sup>Altnagelvin Area Hospital, Trauma and Orthopaedic, Londonderry, United Kingdom, <sup>2</sup>Altnagelvin Area Hospital, Londonderry, United Kingdom, <sup>3</sup>Royal Victoria Hospital, Belfast, United Kingdom*

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*S.P. Mackenzie<sup>1</sup>, T.H. Carter<sup>1</sup>, J. Jefferies<sup>1</sup>, J. Wilby<sup>2</sup>, J. Keating<sup>1</sup>, A. Duckworth<sup>1</sup>, T. White<sup>1</sup>*

*<sup>1</sup>Edinburgh Orthopaedic Trauma, Edinburgh, United Kingdom, <sup>2</sup>University of Edinburgh, Edinburgh, United Kingdom*

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*A. Hoyle<sup>1</sup>, L. Biant<sup>2,3</sup>*

*<sup>1</sup>Heath Education England North West, Manchester, United Kingdom, <sup>2</sup>Central Manchester University Hospitals, Manchester, United Kingdom, <sup>3</sup>University of Manchester, Manchester, United Kingdom*

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*M. Chowdhry<sup>1,2</sup>, M. Pecheva<sup>1</sup>, R. O'Leary<sup>3</sup>, P. Hull<sup>1</sup>, A. Carrothers<sup>1</sup>, J. Queally<sup>1</sup>*

*<sup>1</sup>Cambridge University Hospitals NHS Foundation Trust, Trauma and Orthopaedics, Cambridge, United Kingdom, <sup>2</sup>Brighton and Sussex University Hospitals NHS Trust, Trauma and Orthopaedics, Brighton, United Kingdom, <sup>3</sup>Cambridge University Hospitals NHS Foundation Trust, Anaesthetics, Cambridge, United Kingdom*

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*M. Fernandez<sup>1,2</sup>, L. Arnel<sup>1</sup>, C. White<sup>3</sup>, M. Costa<sup>1</sup>*

*<sup>1</sup>University of Oxford, Oxford Trauma, Oxford, United Kingdom, <sup>2</sup>University Hospital Coventry and Warwickshire, Coventry, United Kingdom, <sup>3</sup>James Lind Alliance, London, United Kingdom*

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*A. Singh*

*Russell Hall Hospital NHS, Trauma and Orthopaedics, Dudley, United Kingdom*

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*T. Fowler<sup>1</sup>, M. Whitehouse<sup>1,2,3</sup>, A. Riddick<sup>1</sup>, U. Khan<sup>4</sup>, M. Kelly<sup>1</sup>*

*<sup>1</sup>North Bristol NHS Trust, Department of Trauma and Orthopaedic Surgery, Bristol, United Kingdom, <sup>2</sup>University of Bristol, Musculoskeletal Research Unit, Bristol, United Kingdom, <sup>3</sup>National Institute of Health Research Bristol Biomedical Research Centre, Bristol, United Kingdom, <sup>4</sup>North Bristol NHS Trust, Department of Plastic Surgery, Bristol, United Kingdom*

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*H. Saleeb<sup>1</sup>, M. Kumar<sup>2</sup>, P. Andrzejowski<sup>2</sup>, A. Wood<sup>2</sup>*

*<sup>1</sup>Leeds Teaching Hospitals, Trauma and Orthopaedics, Leeds, United Kingdom, <sup>2</sup>Leeds Teaching Hospitals, Leeds, United Kingdom*

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*M. Liddicoat<sup>1</sup>, R. ten Hove<sup>2</sup>, C. Boulton<sup>1</sup>, J. Hannaford<sup>1</sup>, A. Johansen<sup>1</sup>, S. Rajyaguru<sup>1</sup>, R. Wakeman<sup>1</sup>*

*<sup>1</sup>Royal College of Physicians, London, United Kingdom, <sup>2</sup>Chartered Society of Physiotherapy, London, United Kingdom*

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*M. Bateman, S. Osborne, B.E. Smith*

*Derby Teaching Hospitals NHS Foundation Trust, Derby Shoulder Unit, Derby, United Kingdom*

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*C. Jenkins<sup>1</sup>, W. Jackson<sup>2</sup>, N. Bottomley<sup>2</sup>, A. Price<sup>2,3</sup>, D. Murray<sup>2,3</sup>, K. Barker<sup>1</sup>*

*<sup>1</sup>Oxford University Hospitals Trust NHS Foundation Trust, Physiotherapy Research, Oxford, United Kingdom,*

*<sup>2</sup>Oxford University Hospitals Trust NHS Foundation Trust, OxfordD, United Kingdom, <sup>3</sup>University of Oxford, Oxford, United Kingdom*

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*M. Bateman<sup>1</sup>, E. Whitby<sup>2</sup>, S. Kacha<sup>2</sup>, E. Salt<sup>3</sup>*

*<sup>1</sup>Derby Teaching Hospitals NHS Foundation Trust, Derby Shoulder Unit, Derby, United Kingdom, <sup>2</sup>Derby Teaching Hospitals NHS Foundation Trust, Physiotherapy Outpatients, Derby, United Kingdom, <sup>3</sup>Burton Hospitals NHS Foundation Trust, Physiotherapy, Burton on Trent, United Kingdom*

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*S. Critchley<sup>1</sup>, D. Prescott<sup>2</sup>, F. Cowell<sup>3</sup>, D. Brown<sup>4</sup>*

*<sup>1</sup>Royal Liverpool and Broadgreen Univeristy Hospitals NHS Trust/University of Liverpool, Trauma and Orthopaedics/Physiotherapy/School of Health Sciences, Liverpool, United Kingdom, <sup>2</sup>University of Liverpool, Centre for Educational Development and Support, Liverpool, United Kingdom, <sup>3</sup>Royal Liverpool and Broadgreen Univeristy Hospitals NHS Trust/University of Liverpool, Trauma and Orthopaedics/Physiotherapy/School of Health Sciences., Liverpool, United Kingdom, <sup>4</sup>Royal Liverpool and Broadgreen University Hospitals NHS Trust, Trauma and Orthopaedics, Liverpool, United Kingdom*

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*D. Jackson<sup>1</sup>, D.M. Eastwood<sup>2</sup>*

*<sup>1</sup>Great Ormond St Hospital for Children, Physiotherapy, London, United Kingdom, <sup>2</sup>Great Ormond St Hospital for Children, Orthopaedics, London, United Kingdom*

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*L. Silvester*

*St George's University Hospitals NHS Foundation Trust, London, United Kingdom*

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### Friday 28<sup>th</sup> September

**08:30 - 16:00** Medical Students Free Papers  
Hall 9

**08:30 - 08:34** **Optimising the pre-operative consenting process for elective spinal procedures.**

*N. Dowlut<sup>1</sup>, A. Sehmbi<sup>1</sup>, R. Mangatti<sup>2</sup>, F. Sedra<sup>2</sup>*

*<sup>1</sup>Barts and The London School of Medicine & Dentistry, London, United Kingdom, <sup>2</sup>Royal London Hospital, London, United Kingdom*

**08:34 - 08:38** **The association between imaging-based change and knee symptoms 2-years after acute knee injury.**

*G. Menon<sup>1</sup>, A. Chekroud<sup>1</sup>, T.L. Vincent<sup>1</sup>, A. Williams<sup>2</sup>, K.M. Leyland<sup>3</sup>, F.E. Watt<sup>1</sup>*

*<sup>1</sup>Oxford University, Kennedy Institute of Rheumatology, NDORMS, Oxford, United Kingdom, <sup>2</sup>Fortius Clinic, London, United Kingdom, <sup>3</sup>Oxford University, Botnar Research Centre, NDORMS, Oxford, United Kingdom*

**08:38 - 08:42** **What Constitutes a “Material Risk” When Consenting in Acute Orthopaedic Trauma Admissions?**

*A. Davidova<sup>1</sup>, F. Chowdhury<sup>1</sup>, P.S.E. Davies<sup>2</sup>, S. Sripada<sup>2</sup>*

*<sup>1</sup>University of Dundee, Dundee, United Kingdom, <sup>2</sup>Ninewells Hospital, Dundee, United Kingdom*

**08:42 - 08:49** Discussion

**08:50 - 08:54** **Effects of Pulsed Electromagnetic Fields and Super Paramagnetic Iron Oxide Nanoparticles on Osteogenesis.**

*H.F. Koo<sup>1</sup>, A. Sanghan<sup>2</sup>, G. Blunn<sup>2</sup>, M. Coathup<sup>2</sup>*

*<sup>1</sup>University College London, London, United Kingdom, <sup>2</sup>University College London, Institute of Orthopaedics and Musculoskeletal Science, London, United Kingdom*

**08:54 - 08:58** **Does preoperative pain catastrophisation predict patient perceived outcome after primary hip arthroplasty?**

*J. Duckworth, H. Divecha, H. Wynn Jones, T. Board*

*Wrightington Hospital, Trauma and Orthopaedics, Wigan, United Kingdom*

**08:58 - 09:02** **Anabas Testudineus Oil as a Potential Substance to Reduce TNF- $\alpha$  and IL-6 Cytokines in Inflammatory Response in Osteoarthritis-Induced Wistar Rats.**

*A.W. Azlin<sup>1</sup>, A.A. Rahman<sup>1</sup>, R. Meilyani<sup>1</sup>, R. Hidayat<sup>2</sup>*

*<sup>1</sup>Sriwijaya University, Medical, Palembang, Indonesia, <sup>2</sup>Sriwijaya University, Biotechnology, Palembang, Indonesia*

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**09:10 - 09:14**

### **Too Many Views and Too Few Shields: Are Children Being Overexposed to Radiation in the Follow-up of DDH?**

*R. Simpson<sup>1</sup>, P.Y.F. Ip<sup>1</sup>, A. Bridgens<sup>2</sup>, D. Eastwood<sup>2</sup>*

*<sup>1</sup>University College London, UCL Medical School, London, United Kingdom, <sup>2</sup>Great Ormond St Hospital for Children, Orthopaedic and Spinal Surgery Unit, London, United Kingdom*

**09:14 - 09:18**

### **The Learning Curves of a Virtual Reality Hip Arthroscopy.**

*J. Bartlett<sup>1</sup>, J.E. Lawrence<sup>2</sup>, M. Yan<sup>1</sup>, B. Guevel<sup>2</sup>, M.E. Stewart<sup>1</sup>, V. Khanduja<sup>2</sup>*

*<sup>1</sup>University of Cambridge, School of Clinical Medicine, Cambridge, United Kingdom, <sup>2</sup>Addenbrookes Hospital, Department of Trauma and Orthopaedics, Cambridge, United Kingdom*

**09:18 - 09:22**

### **Analysis of the relationship between Vitamin D levels and Infection in Orthopaedic patients.**

*A. Zargarani<sup>1</sup>, A. Trompeter<sup>2</sup>*

*<sup>1</sup>St George's University of London, London, United Kingdom, <sup>2</sup>St George's University Hospitals NHS Foundation Trust, London, United Kingdom*

**09:22 - 09:26**

### **Sleep Disturbance on an acute trauma ward, the third hit of trauma?**

*C.J.G. Goodmaker<sup>1</sup>, P.A. McCarthy<sup>1</sup>, B. Gabbott<sup>2</sup>, C. Hing<sup>2</sup>*

*<sup>1</sup>St. George's, University of London, London, United Kingdom, <sup>2</sup>St George's Hospital, Trauma and Orthopaedics, London, United Kingdom*

**09:26 - 09:33**

**Discussion**





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#### Stream Two

Foot and ankle; shoulder and elbow; hand and wrist; hip and knee, spine and paediatrics.

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Botnar Institute of Orthopaedics, Nuffield Department of Orthopaedics and Rheumatology, Oxford, United Kingdom

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<sup>1</sup>Institute of Naval Medicine, Alverstoke, United Kingdom, <sup>2</sup>Royal Centre for Defence Medicine, Birmingham, United Kingdom,

<sup>3</sup>University of Birmingham, Institute of Applied Health Research, Birmingham, United Kingdom

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<sup>1</sup>University of Glasgow, Centre for Cell Engineering, Glasgow, United Kingdom, <sup>2</sup>Queen Elizabeth University Hospital, Trauma and Orthopaedics, Glasgow, United Kingdom, <sup>3</sup>University of Glasgow, Electron Microscopy Facility School of Life Sciences MVLS, Glasgow, United Kingdom

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<sup>1</sup>Queen Elizabeth The Queen Mother Hospital, Margate, United Kingdom, <sup>2</sup>University of East Anglia, Norwich Medical School, Norwich, United Kingdom, <sup>3</sup>University of East Anglia, School of Biological Sciences, Norwich, United Kingdom

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<sup>1</sup>University of North Texas Health Science Center, Fort Worth, United States, <sup>2</sup>John Peter Smith Hospital, Orthopaedic Surgery, Fort Worth, United States

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<sup>1</sup>Northumbria Healthcare Trust, Department of Orthopaedics, Ashington, United Kingdom, <sup>2</sup>Northumbria Healthcare Trust, Research and Development, North Shields, United Kingdom, <sup>3</sup>South Tees Hospitals NHS Trust, Orthopaedics, Middlesbrough, United Kingdom, <sup>4</sup>York University, Department of Health Sciences, York, United Kingdom, <sup>5</sup>Oxford University, Faculty of Medical Sciences and NDORMS, Oxford, United Kingdom, <sup>6</sup>Newcastle University, Newcastle, United Kingdom

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*Galway University Hospital, Orthopaedic Surgery, Galway, Ireland*

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*<sup>1</sup>Kingston Hospital, Trauma and Orthopaedics, Kingston, United Kingdom, <sup>2</sup>Broomfield Hospital, Mid Essex Hospital Trust, Department of Trauma and Orthopaedics, Chelmsford, United Kingdom, <sup>3</sup>Nuffield Department of Orthopaedics, Rheumatology and Musculoskeletal Sciences, Oxford University, Oxford, United Kingdom, <sup>4</sup>St George's University Hospitals NHS Foundation Trust, London, United Kingdom*

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*Royal Berkshire NHS Foundation Trust, Reading, United Kingdom*

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### **Pathological neck of femur fractures - a five-year review of results. 775**

*T. Carter<sup>1</sup>, D. Doyle<sup>2</sup>, A. Oniscu<sup>2</sup>*

*<sup>1</sup>Royal Infirmary of Edinburgh, Edinburgh, United Kingdom, <sup>2</sup>Royal Infirmary of Edinburgh, Department of Pathology, Edinburgh, United Kingdom*

### **Acral soft tissue sarcomas: a rare and challenging condition. 527**

*B. Dean<sup>1</sup>, H. Branford-White<sup>2</sup>, D. Whitwell<sup>2</sup>, T. Cosker<sup>2</sup>, C. Lucy<sup>2</sup>, P. Critchley<sup>2</sup>, H. Giele<sup>2</sup>, M. Gibbons<sup>2</sup>*

*<sup>1</sup>Nuffield Department of Orthopaedics, Rheumatology and Musculoskeletal Sciences, Oxford University, Oxford, United Kingdom, <sup>2</sup>Nuffield Orthopaedic Centre, Oxford University Hospitals NHS Foundation Trust, Oxford, United Kingdom*

### **Ewing's sarcoma of the scapula: a single centre long-term outcome study. 265**

*M. Tahir, S. Malik, U. Ahmed, M. Sidhu, S. Evans, L. Jeys, S. Abudu*

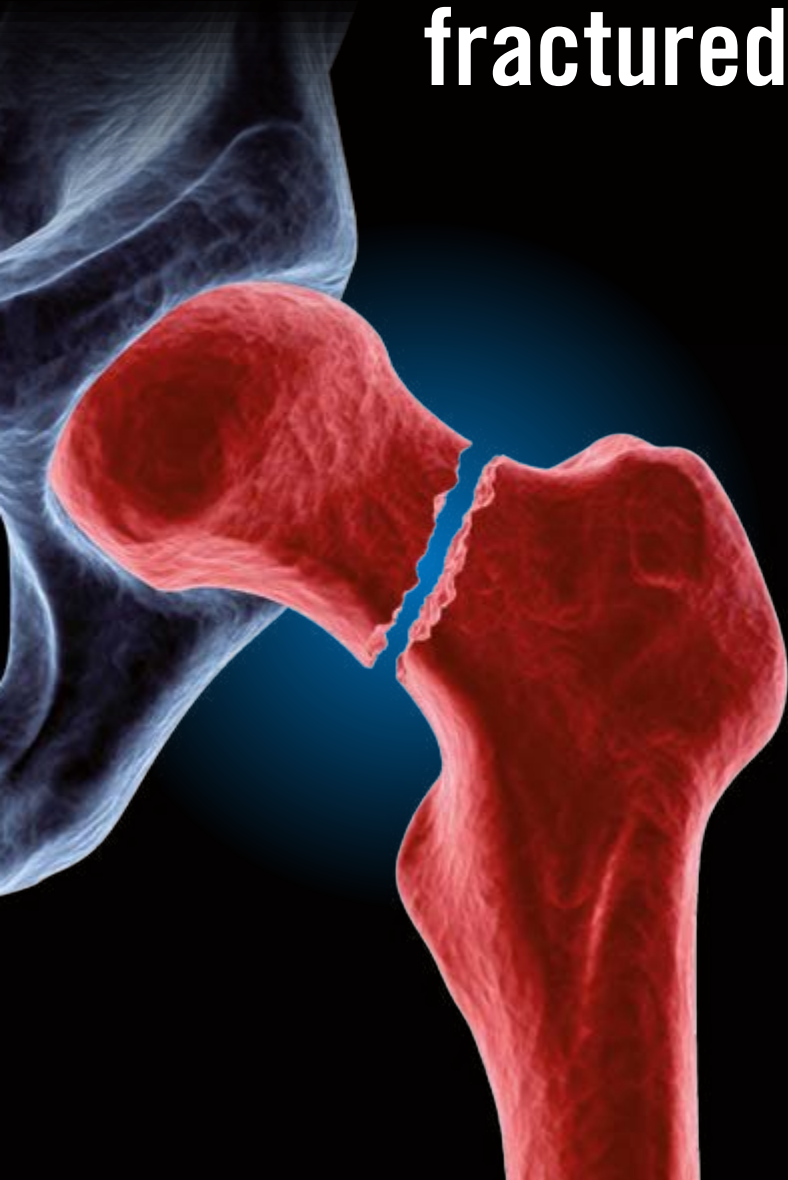
*Royal Orthopaedic Hospital, Oncology, Birmingham, United Kingdom*

### **Reconstruction of defects after resection of diaphyseal and distal tibial tumours by medialisation of fibula: The Huntington's procedure revisited**

*Dr Zile Singh Kunda*

*BIOS Senior Fellow, Rohtak, India*

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\* Sprowson AP et al. Bone Joint J 2016; 98-B: 1534–1541

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## Medical Students' Poster Presentations

### Medical Students

#### **The validity of the Mirels score for predicting impending pathological fractures.**

*E. Howard, K. Shepherd, G. Cribb, P. Cool*

*Robert Jones and Agnes Hunt Hospital, Bone Tumour Unit, Oswestry, United Kingdom*

#### **Testing the Face Validity of a Virtual Reality Hip Arthroscopy Simulator.**

*J. Bartlett<sup>1</sup>, J.E. Lawrence<sup>2</sup>, V. Khanduja<sup>2</sup>*

*<sup>1</sup>University of Cambridge, School of Clinical Medicine, Cambridge, United Kingdom, <sup>2</sup>Addenbrookes Hospital, Department of Trauma and Orthopaedics, Cambridge, United Kingdom*

#### **Patient-reported functional outcomes following fractures of the talus.**

*C. McCann<sup>1</sup>, P. Stirling<sup>2</sup>, S. Mackenzie<sup>2</sup>, J. Maempel<sup>2</sup>, R. Ray<sup>3</sup>, N. Clement<sup>2</sup>, T. White<sup>2</sup>, J. Keating<sup>2</sup>*

*<sup>1</sup>University of Edinburgh, Edinburgh, United Kingdom, <sup>2</sup>Edinburgh Orthopaedic Trauma, Edinburgh, United Kingdom, <sup>3</sup>St George's University Hospitals NHS Foundation Trust, Orthopaedics, London, United Kingdom*

#### **The Potential Effect of Andrographis peniculata and Syzygium polyanthum Combination Extract on GLUT 4 Transporters in Skeletal Muscle of Diabetic-Induced Rats.**

*A.A. Rahman<sup>1</sup>, A.W. Azlin<sup>1</sup>, C. Wahyudi<sup>1</sup>, R. Hidayat<sup>2</sup>*

*<sup>1</sup>Sriwijaya University, Preclinical Medical Student, Palembang, Indonesia, <sup>2</sup>Sriwijaya University, Biotechnology, Palembang, Indonesia*

#### **Specialty Teaching of Orthopaedic Surgery to Medical Undergraduates.**

*A. Poacher<sup>1</sup>, K. Powell<sup>1</sup>, H. Amos<sup>1</sup>, J. Davis<sup>2</sup>, C. Carpenter<sup>2</sup>, F. Monsell<sup>3</sup>*

*<sup>1</sup>Cardiff University, School of Medicine, Cardiff, United Kingdom, <sup>2</sup>Cardiff and Vale University Health Board, Trauma and Pediatric Orthopaedic Surgery, Cardiff, United Kingdom, <sup>3</sup>Bristol Royal Hospital for Children, Bristol, United Kingdom*

#### **Primary lower limb joint replacement and tranexamic acid: an observational cohort study.**

*R. Milne<sup>1</sup>, L. Davies<sup>2</sup>, K. Bainton<sup>3</sup>, P. Lewis<sup>3</sup>*

*<sup>1</sup>Cardiff University, Cardiff, United Kingdom, <sup>2</sup>Public Health Wales NHS Trust, Wales, United Kingdom, <sup>3</sup>Cwm Taf University Health Board NHS Trust, Wales, United Kingdom*

#### **Quantifying material loss in retrieved magnetically controlled intramedullary nails.**

*B. Foong<sup>1</sup>, V.C. Panagiotopoulou<sup>1</sup>, H. Hothi<sup>1</sup>, J. Henckel<sup>2</sup>, P.R. Calder<sup>2</sup>, D.W. Goodier<sup>2</sup>, A.J. Hart<sup>1</sup>*

*<sup>1</sup>University College London, London, United Kingdom, <sup>2</sup>Royal National Orthopaedic Hospital, London, United Kingdom*



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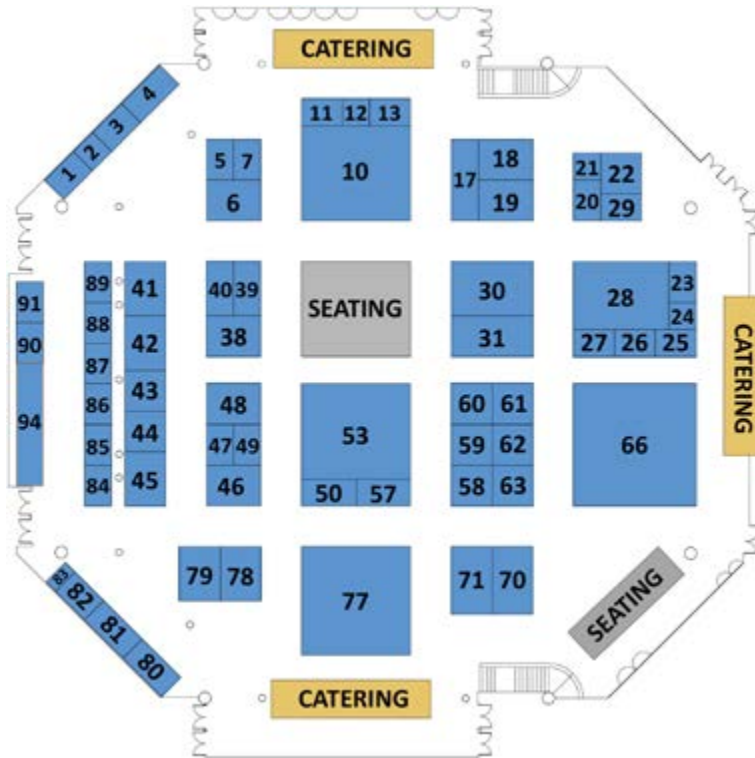
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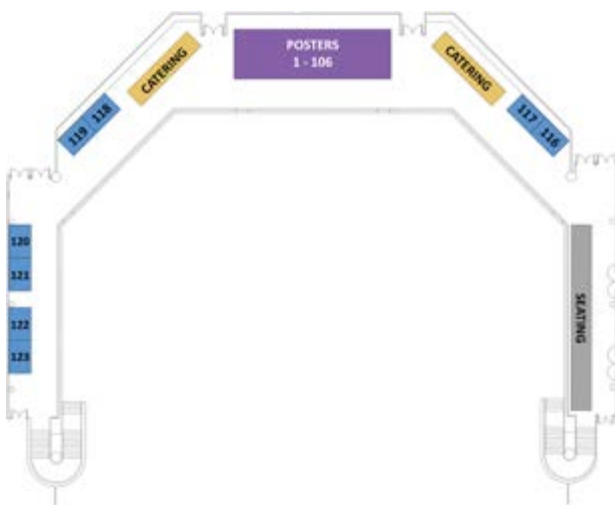
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# Exhibition Floor plans

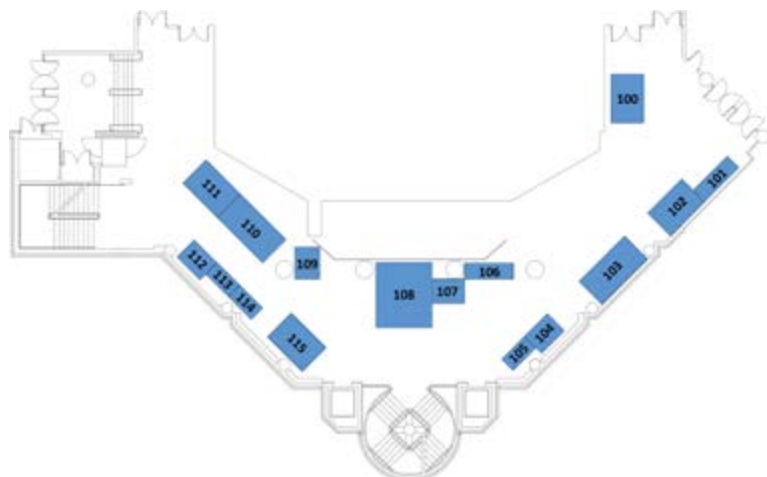
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## Exhibitors

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info.leuven@3dsystems.com  
www.3dsystems.com



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www.adlerortho.com



Adler UK is the subsidiary of Adler Ortho SpA, a privately owned Italian company, specialising in design, manufacture, marketing of orthopaedic implants. Adler were the first orthopaedic company to employ additive layer manufacturing technology in orthopaedics, allowing production of complex 3D shapes, providing an ideal porous structure enhancing biological integration for primary and revision implants. In addition, Adler offers a full custom product service along with DAC; a unique anti-infective hydrogel for proven prevention of biofilm.

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www.liquiband.com



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### AKU Society (86)

01223 322897  
info@akusociety.org  
www.akusociety.org



The AKU Society is a UK patient group offering support to patients diagnosed with a rare genetic disease called Alkaptonuria (AKU). AKU can cause significant damage to the bones, cartilage and tissues of those affected and is characterised by black urine, black spots in the eyes and ears and early onset osteoarthritis. The AKU Society co-ordinates access to an expert clinic: the National AKU Centre.

### Amplitude Clinical Outcomes (85)

0333 014 6363  
info@amplitude-clinical.com  
www.amplitude-clinical.com



Amplitude Clinical Outcomes collects and analyses validated Clinical Outcomes. Our enterprise solution uploads data directly to National PROMs, NJR and many other registries including BSR, NLR, UKKOR, BOFAS. An accredited supplier to NHS Digital and the leading supplier of electronic PROMs to the NHS. Amplitude puts the clinician in control, providing automated case-mix adjustment and the ability to monitor and analyse your own data whilst still complying to registry submissions at no extra effort.

### AOUK (26)

01904 787767  
aouki1@btconnect.com  
www.aouk.org



The AO Foundation is a charitable organisation, which is dedicated to the promotion of excellence in surgery of musculoskeletal trauma. AO UK is the Anglo- Irish section of the foundation and through its education department delivers non-profit making courses in the UK & Ireland to train young surgeons and operating room personnel in the theory and practice of trauma. The membership of AO UK consists of a group of established surgeons and ORPs who freely give their time to teach on the 30 courses that are run by AO UK annually. AO UK also offer research grants and fellowships.

### AXA PPP Healthcare (2)

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specialistevents@axa-ppp.co.uk  
www.axapphealthcare.co.uk



AXA PPP healthcare: you know us as insurers. But we're also passionate about making healthcare better for our members – your patients. Visit us to see how we are securing better health, a better experience and better value care for them by working in partnership with orthopaedic surgeons. Our focus on musculoskeletal health means we can also empower your patients to make good health choices and reduce their health risks, so they stay healthy for longer.

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www.bbraun.co.uk



With over 61,000 employees in 64 countries, B. Braun is one of the world's leading manufacturers of medical devices and pharmaceutical products and services. Through constructive dialog, B. Braun develops high quality product systems and services that are both evolving and progressive and in turn improves people's health around the world. Visit our stand to see the latest innovations in Orthopaedic and Spinal implant technology.

## Exhibitors

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Bespoke Medical Indemnity has a unique understanding of Medical Malpractice Insurance, and the issues that medical professionals have to deal with on a day to day basis. We will always work with you to manage your existing Medical Indemnity policy, help you to select the policy that best meets your specific needs and challenges that you face. With access to all key London Insurance Markets, you can be assured that we can find the right policy at the right cost, specifically for you. For more information, call us on 020 7998 3424 or contact our MD Andy Foley at andy@medmal.co.uk or 07747624080 for an initial discussion.

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www.biocomposites.com



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### Bone & Joint Publishing (BJJ) (91)

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info@boneandjoint.org.uk  
www.online.boneandjoint.org.uk



Bone & Joint Publishing provides a complete and trusted resource for the orthopaedic, trauma and musculoskeletal science communities. Visit us on stand 91 if you have any questions about your print and online subscription to The Bone & Joint Journal and Bone & Joint 360, and collect your free USB drive—available while stocks last.

### British Orthopaedic Association (BOA) (99)

020 7405 6507  
events@boa.ac.uk  
boa.ac.uk



The British Orthopaedic Association (BOA) is the surgical specialty association for trauma and orthopaedics in the UK. We provide national leadership, a unifying focus, and charitable endeavour by Caring for Patients; Supporting Surgeons and Transforming Lives. As a membership organisation we care for patients and support surgeons by focusing on excellence in; Professional Practice, Training and Education and Research. We currently have over 4,800 members; visit our stand for more information about our membership. Don't forget to purchase the BOA merchandise including our exclusive Centenary Parker pen, bookmark and notebooks.

### British Orthopaedic Trainee Association (BOTA) (47)

020 7405 6507  
secretary@bota.org.uk  
www.bota.org.uk



The British Orthopaedic Trainees' Association, BOTA, was set up under the direction of Mr Richard Rawlins in 1987 following a meeting in Oxford when 45 Senior Registrars met at a symposium entitled 'Planning a career in Orthopaedic Surgery'. It subsequently became affiliated to the British Orthopaedic Association. Since its foundation, the membership has increased from the founding 45 to the current level of in the order of over 1000 Specialist Registrars (and recently appointed consultants).

### BSN medical Ltd (13)

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kim.hunt@bsnmedical.com  
www.bsnmedical.co.uk



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### Carestream (17)

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jane.grimsley@carestream.com  
www.carestream.com



Carestream is a worldwide provider of medical imaging systems and IT solutions. On our stand (17) we will be demonstrating the Carestream OnSight 3D Extremity system which uses cone beam CT (CBCT) technology to capture weight-bearing and other types of extremity exams. This compact system provides high-quality, lower-dose 3D imaging studies. This makes it an ideal diagnostic tool for orthopaedic and sports medicine in hospitals, imaging centres and accident & emergency departments.

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c.doerr@ceramtec.de  
www.ceramtec.com



The CeramTec Group is an international leading supplier of advanced ceramics with annual sales of approximately 500 million Euro and 3400 employees in Europe, Asia and America. With a tradition of more than 100 years, CeramTec serves major markets with innovative products, like BIOLOX® delta ceramic for hip and knee components and numerous other applications for the industry.

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birmingham@circlehealth.co.uk  
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Circle Health runs hospitals, rehabilitation and health services in the UK. Founded in 2004, Circle runs healthcare in a new way: putting front-line clinicians, doctors and nurses in charge. By giving them responsibility and freedom, Circle believes they will run more effective, safe and caring services. Circle Birmingham Hospital is currently under construction and will be a state-of-the-art facility that provides an exceptional home for consultants seeking to grow their private practice.

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George.dryburgh@clearsurgical.com  
www.clearsurgical.com



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www.curetis.com



Curetis N.V.'s goal is to become a leading provider of innovative solutions for molecular microbiology diagnostics designed to address the global challenge of diagnosing severe infectious diseases and identifying antibiotic resistances in hospitalized patients. Curetis' Unyvero System is a highly automated molecular diagnostic platform for comprehensive and rapid detection of pathogens and antimicrobial resistance markers in a range of severe infectious disease indications. Unyvero products are marketed in Europe, the Middle East, Asia and the U.S. Through the ARES Technology Platform Curetis offers a comprehensive database on the genetics of antimicrobial resistances, Aresdb, with advanced bioinformatics and artificial intelligence.

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dglsales@clanwilliamgroup.com  
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joanna.barrett@exac.co.uk  
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Exactech exists to improve the quality of life for individuals by maintaining their activity and independence. We do this through innovative ideas, high quality products, education, and commitment to service. Exactech was created in 1985 by an Orthopedic surgeon and has always had a very good understanding of the customers' needs and an end-user's perspective. Its products are designed to meet the challenges faced every day in the operating theatre. Exactech are exhibiting: Kinematch™ Customized PFJ Replacement, Equinoxe™ Platform Shoulder System, GPS Navigation System, InSpace™ Balloon, Optecure™ Bone Graft Substitutes, Accelerate™ PRP.

### Falls and Fragility Fracture Audit Programme (FFFAP) (12)

020 3075 1511  
fffap@rcplondon.ac.uk  
www.rcplondon.ac.uk



The Falls and Fragility Fracture Audit Programme (FFFAP) is a national clinical audit run by the Royal College of Physicians (RCP) designed to audit the care that patients with fragility fractures and inpatient falls receive in hospital and to facilitate quality improvement initiatives. The audit is comprised of the following three workstreams: National Hip Fracture Database (NHFD); Fracture Liaison Service Database (FLS-DB); National Audit of Inpatient Falls (NAIF).

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andrew.hodgson@sjpp.co.uk  
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## idealMed

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www.jri-ltd.com



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## Exhibitors

### Judd Medical Ltd (29)

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sarah.baron@judd-medical.co.uk  
www.judd-medical.co.uk



For over 20 years Judd Medical has been supplying the Healthcare Industry with the finest quality surgical instruments & innovate products for surgery. With our extensive knowledge & experience in the medical field, our products are specifically designed to offer both exceptional quality & value for money. We are proud to be exclusive UK Distributors for Shukla Medical an industry leader in developing truly Universal Orthopaedic Implant Extraction Systems. Visit us on stand 29 for more information and to arrange a demonstration to view these innovative products.

### Kinetec UK (3)

01252 931980  
enquiries@kinetecuk.com  
www.kinetecuk.com



Kinetec® are a market leading supplier of physical rehabilitation products including CPMs, active-passive trainers and cryotherapy devices. Kinetec® will be demonstrating their new, innovative CPM with a range of additional functions including 'spring mode', 'extremity focus mode' and 'dynamic stretch mode'. The controls are easy to use on a tablet device and the patient activity can be easily monitored by the doctor. Also on display will be a new cold compression therapy range.

### Lima Orthopaedics UK (39)

0844 332 0661  
customerservices@lima-uk.co.uk  
www.limacorporate.com



Lima Corporate is a global medical device company providing reconstructive orthopaedic solutions to surgeons helping to improve the quality of life of their patients. Based in Italy, we are committed to the development of innovative products and procedures enabling surgeons to select ideal solutions. Our products include large joint revision, primary implants and extremity solutions including fixation. The 10 year anniversary of Trabecular Titanium positions Lima Corporate as a leading company in 3D printing technology.

### Link Orthopaedics UK Ltd (22)

0131 660 1961  
www.linkorthopaedics.co.uk  
info@linkorthopaedics.co.uk



Founded in 2018 and backed by 70 years of history from a company that was established and has been flourishing since 1948. 2018 marks the first year that LINK have come direct in the UK. From world leading joint solutions to high quality instrumentation, we are continually solving problems to help create a better quality of life for our customers and most importantly for our patients. We strive to make your life better every day.

### Materialise (42)

02380 762500  
uk.medical.sales@materialise.co.uk  
www.materialise.com



Materialise is the backbone of the medical 3D printing industry. With more than 27 years of experience, Materialise has helped to revolutionize patient-specific care and pioneered many of the leading 3D printing applications, including virtual planning tools, 3D-printed anatomical models, and patient-specific surgical guides and implants. Come and discover how Materialise is there to enhance patient care with precise planning and 3D printing solutions.

### Mathys Orthopaedics (84)

08450 580938  
sue.tremlett@mathysmedical.com  
www.mathysmedical.com



WHY BONE PRESERVATION? Solutions such as bone-preserving design, reduction of abrasion by novel technologies and reconstruction of the patient's individual anatomy are addressed with the Bonepreservation System. The Optimys was developed to enable the individual reconstruction of the patient's anatomy. The RM Pressfit Cup provides preservation thanks to elasticity. The quality of medical ceramics today is why the optimum solution Mathys recommends is hard-soft coupling, i.e. Ceramys head and RM Pressfit vitamys. [www.bonepreservation.com](http://www.bonepreservation.com)

### MAVRIC Ltd (113)

Angus.Wallace@MAVRIConline.com



### Medacta UK Ltd (70)

01455 613026  
t.mcculloch@medacta.co.uk  
www.medacta.com



Medacta International is a Swiss company specialising in joint replacement, spine surgery and sports medicine solutions. Founded in 1999 with a vision to create a better patient experience for people needing joint and spine replacement, Medacta is a leader in Hip and Knee Replacement due to AMIS (Anterior Minimally Invasive Surgery) and GMK Sphere along with MyHip, MyKnee, MyShoulder and MySpine (Patient Matched Technology). Innovation, support and medical education are key to the company's success.

## Exhibitors

### Medartis Ltd (38)

01924 476699  
mai.widdowson@medartis.com  
www.medartis.com/index.php



Medartis develops, manufactures and sells titanium screws, plates, surgical instruments and system solutions for fracture fixation. These implants allow for patient rehabilitation after surgical reconstruction of fractures, malunions and deformities or skeletal diseases and their adjacent soft tissues. Medartis is represented worldwide through its subsidiaries and a broad distributor network. Our motto is "Precision in Fixation". The goal of Medartis is to continually improve early functional rehabilitation through our high-quality products and exclusively developed technologies.

### Medical Billing and Collection (100)

01494 763 999  
info@medbc.co.uk  
www.medbc.co.uk



Medical Billing and Collection have over 26 years of experience in providing expertise and assistance to private consultants, groups and clinics for their medical billing needs. This has enabled us to grow, predominantly through referral, to over 1000 practitioners to become the UK's largest medical billing and collection company. MBC client's benefit from: Bad debts of less than 0.5%; Increases in income of up to 25%; Their own dedicated Personal Account Manager.

### The Medical Defence Union (MDU) (49)

0800 716 376  
membership@themdu.com  
www.themdu.com



The MDU is the UK's leading medical defence organisation. We are a not-for-profit organisation wholly dedicated to our members' interests. We offer members expert guidance, personal support and robust defence in addressing medico-legal issues, complaints and claims. Our team is led and staffed by doctors with experience of the pressures and challenges faced in practice. Please visit us on stand 49, where we would be delighted to meet you.

### Medical Management Services (MMS) (41)

0333 321 1477  
hello@med-services.co.uk  
www.med-services.co.uk



Medical Management Services (MMS) is one of the UK's leading financial and administration providers for medical professionals and private practices. Our service range includes: Medical Billing, Clinical Debt Collection, Virtual Practice Management. Our services provide consultants and their practice the flexibility to choose what suits their needs. Collaborating with Medical Management Services provides you with stronger cash flow, reduced bad debt, extended availability for patients and access to medical administration experts. All things needed to make your practice flourish.

### Medical Protection (7)

0800 561 9000  
member.help@medicalprotection.org  
medicalprotection.org



Medical Protection is the world's leading protection organisation for healthcare professionals. We proudly protect and support the professional interests of more than 300,000 members worldwide, providing expert advice and support, together with the right to request assistance with a wide range of legal and ethical problems that arise from professional practice.

### Medtech Search Associates (83)

0161 961 0111  
aled@medtechsearch.co.uk  
www.medtechsearch.co.uk



Medtech Search Associates are an owner managed recruitment consultancy, specialising in the medical devices sector. At Medtech Search Associates we understand that we are only as good as the people and companies that we represent, that's why we only deal with a select number of clients and candidates. This allows our Consultants to develop an unrivalled knowledge and understanding of what they are promoting.

### Medix Cover Ltd (106)

customer@medixcover.co.uk  
medixcover.co.uk



Medix cover has been established by 3 past Association presidents in conjunction with the BOA and the other Specialty Surgical Associations to bring the benefits of grouping surgeons together to negotiate better terms for general insurance policies such as House & Contents, motor etc. We have partnered with AstonLark brokers to assist in developing this scheme and look forward to discussing your needs at this conference.

### The National Joint Registry (NJR) (28)

020 3857 5041  
njr@njr.org.uk  
www.njrcentre.org.uk



The NJR monitors the performance of hip, knee, ankle, elbow and shoulder joint replacements to improve clinical outcomes for the benefit of patients, clinicians and industry. The registry collects high quality data in order to provide robust evidence to support decision-making in regard to patient safety standards in quality of care and cost effectiveness. Now with over 2 million records, it also supports and enables research to maximise the value of the information it holds.

## Exhibitors

### NHS Blood and Transplant (27)

0845 607 6820  
 tscustserv@nhsbt.nhs.uk  
 www.nhsbt.nhs.uk/tissueservices



#### Blood and Transplant

The Tissue Bank in Liverpool is the largest retrieval and storage facility for human tissue in the UK. As part of the NHS we operate as a not-for-profit organisation with patient safety at our core. We are responsible for the entire supply chain, we co-ordinate, recover, process, and bank tissue. Our unique service offers a wide range of tissue for grafting or transplantation in various specialities, we also provide a bespoke service.

### NTL Biologica Ltd (78)

0845 004 6371  
 info@ntlbiologica.com  
 www.ntlbiologica.com



NTL Biologica are pleased to present their unique products for regenerative medicine. We manufacture kits for the harvesting and concentration of bone marrow derived stem cells, which are routinely used for the repair of cartilage defects and labral tears around the hip. These 'procedures in a box' offer repeatable positive outcomes for the patients and offer a 'best practice' technique at competitive market pricing for hospitals and insurers. We welcome you to stand 78.

### ODEP and Beyond Compliance (108)

07884 024939  
 Annette.jackson@supplychain.nh.uk  
 www.odep.org.uk; www.beyondcompliance.org.uk



ODEP is an independent panel of surgeons and non-clinical experts in Orthopaedics. We offer simple and comprehensive implant benchmarking criteria for hips, knees and shoulders. Beyond Compliance is an optional service for orthopaedic companies to support the safe and stepwise introduction of new or modified implantable medical devices. The service collects patient data to provide real-time monitoring of an implant's performance

### Open Medical Ltd (24)

0203 4752955  
 info@openmedical.co.uk  
 www.openmedical.co.uk



Open Medical Ltd, presents eVFC, the Virtual Fracture Clinic turn-key solution developed by orthopaedic surgeons to fully manage end-to-end digital VFC referrals from multiple sites and reduce the cost of the fracture clinic service by at least 25%. Created by the team that developed eTrauma, the market leading T&O system to track, plan, and review high volumes of trauma presentations, admissions, and operations.

### OR3D Ltd (50)

01691 777 774  
 alexis.earl@or3d.co.uk  
 www.or3d.co.uk



OR3D will be demonstrating Dicom-to-Print (D2P), a stand-alone modular software package, designed to address and consolidate all 3D model preparation steps. The software is intended to be used by medical staff for pre-operative surgical planning, allowing for the export of 3D digital models, that can be used by numerous applications. This feeds through into using Geomagic Freeform+ and Haptic devices, a CAD system for producing manufacturable and highly-detailed objects such as prosthesis or medical implants.

### Ortho Consulting Group Ltd (21)

02030 115 574  
 info@orthocg.com  
 www.orthocg.com



Partnering with orthopaedic, spine and medical device companies, we are a team of industry experts specialising in global strategy and building and strengthening sales channels. Ortho Consulting Group offers a holistic consultancy service to advise, support and deliver your expansion strategy, whether that's growing your team or sourcing distributors. Our divisions, orthoexecutive, orthoconnections and hcexecutive all form part of the service, or you can opt to partner directly with the one that suits your needs.

### OrthoD (44)

01451 821 311  
 info@orthod.com  
 www.orthod.com



OrthoD have been bringing innovative answers to clinical questions since 1984. We find these answers by listening to health care professionals and patients. We focus on reconstruction, sports medicine, surgical products and infection control. The company has grown to command a high level of clinical respect amongst leading clinicians, academics and industry leaders within the global Orthopaedic market. That's what working with us is all about... agile thinking in motion.

### Orthopaedic Trauma Society (103)

01476 860759  
 info@orthopaedictrauma.org.uk  
 www.orthopaedictrauma.org.uk



The Orthopaedic Trauma Society is an inclusive body representing the interests of all those treating orthopaedic trauma our aim is to play a key role in maintaining and advancing the standards of orthopaedic trauma in the British isles.

## Exhibitors

### OT SIS (25)

0300 3033531  
info@otsis.co.uk  
www.otsis.co.uk



The Orthopaedic and Trauma Specialists Indemnity Scheme (OTSIS) is a specialty specific professional indemnity scheme. Membership is exclusively for orthopaedic surgeons. OTSIS provides comprehensive cover for clinical negligence claims in your independent sector practice, GMC complaints, NHS disciplinary procedures and other legal problems arising from professional practice, combined with 24-hour expert medico-legal advice and assistance from experienced doctors. OTSIS membership meets the requirements of all independent hospitals.

### Parcus Medical LLC (63)

00 1 941 755 7965  
customerservice@parcusmedical.com  
www.parcusmedical.com



Parcus Medical™ manufactures and distributes implants and instrumentation for soft tissue repair and ligament/tendon fixation. Parcus™ pioneered the use of PEEK CF for Sports Medicine implants and continues to expand its product line for both open and arthroscopic procedures. Decades of experience in design, manufacturing, and packaging, enable us to create comprehensive, minimally invasive solutions from the shoulder to foot. At Parcus, surgical innovation is customer-driven.

### Pentland Medical Ltd (11)

0131 467 5764  
mail@pentlandmedical.co.uk  
www.pentlandmedical.co.uk



Pentland Medical is a UK based company offering a range of unique and patented devices for Operating Theatres and more. Visit us on stand 11 to see our Pre-Anaesthetic Limb (PAL) Sleeve for pre-operative skin preparation leading to a reduction in SSI, manual handling and theatre time. Further, the Hemaclear single-use tourniquet/exsanguination device which exsanguinates 95% of the blood from the limb and gives a larger sterile field with reduced risk of contamination.

### Premium Medical Protection (4)

03451 630053  
m.mclaughlin@premiummedicalprotection.com  
www.premiummedicalprotection.com



Premium Medical Protection, provides bespoke Medical Professional Indemnity Insurance which has comprehensive cover up to £10m limit of liability. Benefits include consent to settle and indefinite run off into retirement, (subject to underwriting). Call 0345 163 0053 or visit our website www.premiummedicalprotection.com Premium Medical Protection - Cover that works for you...

### Q-close (107)

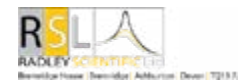
07779601272  
jo.brentnall@qclose.com  
www.qclose.com



We are one of the largest global suture manufacturers with over 20 years' experience in producing high quality wound closure products. Q-close™ offer a comprehensive wound closure range, with a full range of proven absorbable and non-absorbable material polymers and needle types. Our range is designed to meet your needs: wide enough to support clinical need, yet simple enough to enable inventory management and rationalisation.

### Radley Scientific Ltd (112)

01364 653899 Ext.231  
steveyoung@radleyscientific.co.uk  
www.radleyscientific.co.uk



Radley Scientific Ltd was formed in 2016 from the R&D team of SRA Developments Ltd, the creators of Oscar (for Orthosonics Ltd.) and Lotus soft tissue scalpel (now owned by BOWA-electronic GmbH of Germany). We are experts in the design, development, manufacture and supply of ultrasonic devices for the healthcare market. RSL is attending BOA to demonstrate our new ultrasonic device (TORS, Torsional Orthopaedic Revision System) combining the best of Oscar and Lotus.

### Ramsay Health Care UK (110)

020 7847 2877  
marketing@ramsayhealth.co.uk  
www.ramsayhealth.co.uk



People caring for people

Ramsay Health Care was established in Australia in 1964 and has grown to become a global hospital group operating over 220 hospitals and day surgery facilities across six countries. In the UK, Ramsay is one of the leading independent hospital providers, with a network of over 30 facilities providing a comprehensive range of clinical specialties to private, self-insured as well as patients referred by the NHS. Ramsay also provides neurological services through its three neuro-rehabilitation units.

### Rosmetics Aesthetics Ltd (89)

0345 5050601  
info@rosmetics.co.uk  
www.rosmetics.co.uk



Rosmetics is proud to distribute Regen PRP, breaking the vicious cycle of osteoarthritis by intra-articular injections for symptomatic treatment of articular pain and improvement in mobility. A combination of HA with PRP synergistically combines the complementary clinical effects of A-PRP and HA to provide added benefit for OA patients. Platelets are key factors in hard and soft tissue repair mechanisms. They provide essential growth factors, such as FGF, PDGF, TGF-β, EGF, VEGF, which are involved in stem cell migration, differentiation and proliferation, with 25 years of clinical experience proving pain relief and functional improvement lasting 6 to 12 months.

## Exhibitors

### Royal College of Physicians and Surgeons of Glasgow (104)

0141 221 6072  
wemet@rcpsg.ac.uk  
www.rcpsg.ac.uk



Royal College of Physicians and Surgeons of Glasgow is the only Royal College in the UK who welcomes healthcare professionals across the range of medical and surgical specialties. We are also home to dentists, members of the extended dental care team, travel medicine specialists and podiatrists across the UK and worldwide - a truly multidisciplinary organisation working together as one.

### Royal College of Surgeons (RCS) (46)

020 7405 3474  
membership@rcseng.ac.uk  
www.rcseng.ac.uk



The Royal College of Surgeons exists to advance surgical care. We support over 26,000 members in the UK and abroad by improving their skills and knowledge, facilitating research and developing policy and guidance. Visit our stand at BOA 2018 to hear more about what we can do for you, and how we can work together to advance surgical care.

### Royal College of Surgeons of Edinburgh (RCSEd) (58)

0131 527 1600  
mail@rcsed.ac.uk  
www.rcsed.ac.uk



The Royal College of Surgeons of Edinburgh are a modern, thriving, global network of medical professionals. Our membership includes people at every stage of their career, from medical students through to trainees, consultants and those who have retired from practice. With our interest in professional standards, the College's primary role – and the main concern of our Fellows and Members - is to ensure the safety of our patients and provide them with the best possible care.

### Sectra (82)

01279 213 660  
info.ortho@sectra.com  
www.sectra.com/medical

# SECTRA

Knowledge and passion

With more than 20 years of innovation and 1,700 installations worldwide, Sectra is a world-leading provider of IT systems and services for orthopaedics, radiology and other image-intensive departments. Sectra offers a complete set of highly efficient preoperative planning tools both for 2D and 3D images. The latter are especially valuable for planning complex trauma cases. Sectra's solution enables orthopaedic surgeons to increase precision in planning and advance preparation for various scenarios, thereby avoiding stress, saving time and minimizing risk during surgery.

### SEMPRIS (87)

020 8652 9018  
info@sempri.co.uk  
www.sempri.co.uk



SEMPRIS provides some of the most comprehensive indemnity and medico-legal support available from any insurer or Medical Defence Organisation in the UK. As well as protecting against the very specialist risks associated with treating professional sportspeople, our indemnity provides extensive cover with generous limits for all aspects of private medical practice. Developed by doctors for doctors, in response to restrictions and withdrawal of critical elements of cover by the MDOs for doctors treating professional sportspeople.

### SI-BONE UK Ltd (59)

01423 860025  
abailey@si-bone.com  
www.si-bone.com



SI-BONE, Inc. is a leading medical device company that has developed the iFuse Implant System®, a proprietary minimally invasive surgical implant system to fuse the sacroiliac joint. The iFuse Implant™, available since 2009, is the only device for treatment of SI joint dysfunction supported by significant published clinical evidence, including level 1 trials, showing safety, effectiveness and durability, including lasting pain relief.

### Siemens Healthineers (43)

01276 696000  
surgery.gb@siemens.com  
www.healthcare.siemens.co.uk



At Siemens Healthineers, our purpose is to enable healthcare providers to increase value by empowering them on their journey towards expanding precision medicine, transforming care delivery, and improving patient experience, all enabled by digitalising healthcare. An estimated 5 million patients globally everyday benefit from our innovative technologies and services in the areas of diagnostic and therapeutic imaging, laboratory diagnostics and molecular medicine, as well as digital health and enterprise services. We are a leading medical technology company with over 170 years of experience and 18,000 patents globally. With more than 48,000 dedicated colleagues in 75 countries, we will continue to innovate and shape the future of healthcare. For more information and latest product line, please visit [www.healthcare.siemens.co.uk](http://www.healthcare.siemens.co.uk).

### Smith & Nephew (10)

01923 477100  
customer.services.uki@smith-nephew.com  
www.smith-nephew.com



Smith & Nephew is a world leader in joint replacement systems, trauma solutions, sports medicine and wound care. Whether through extending the life and functionality of implants, improving operating room efficiency, promoting faster healing or improving other clinical outcomes, our innovations differentiate us and provide solutions to active patients seeking to regain their quality of life while enhancing economic value for all of our customers.

## Exhibitors

### Standing CT Company (48)

0203 026 0019  
Kirsty.collins@standingct.com  
www.standingct.com



The Standing CT Company is the leading provider of mobile weight-bearing CT scanning in the UK. Our scanners are used at leading institutions including the Royal National Orthopaedic Hospital, Stanmore and The Hospital of St Johns and St Elizabeth in London. Weight bearing CT images enhance the management of foot and ankle problems, with radiation exposure similar to plain radiographs. We have recently introduced the LineUP scanner, which allows weight bearing 3D imaging of both knees. Upper limb 3D imaging is also available.

### Stryker (53)

01635 262400  
enquiries@stryker.com  
www.stryker.com/uk



Stryker is one of the world's leading medical technology companies and, together with our customers, we are driven to make healthcare better. Through CT-based 3D modelling of bone anatomy, surgeons can use the Mako Robotic Arm System to create a personalized surgical plan and identify the implant size, orientation and alignment based on each patient's unique anatomy. Mako enables surgeons to virtually modify the surgical plan intra-operatively and assist in executing bone resections. Mako is robotic arm technology that can be used across the joint replacement spectrum to perform total knee, partial knee and total hip replacements.

### Trifibre Ltd (19)

01162 323166  
info@trifibre.co.uk  
www.trifibre.co.uk



Trifibre Ltd are market leaders in manufacturing innovative packaging solutions with over 35 years of experience and are highly regarded within the industry. As well as being one of the largest casing manufacturers in Europe we are widely known for being a one stop shop providing the complete casing solution. For further information please visit our website [www.trifibre.co.uk](http://www.trifibre.co.uk) and we will provide you with a solution.

### THUASNE (105)

01295 257422  
orders@thuasne.co.uk  
www.thuasne-store.co.uk



Thuasne is a globally recognised creator, manufacturer and distributor of wearable medical devices, including braces, supports and medical garments. The company has been family owned since 1847 and is the market leader in France. We will be showcasing state of the art spinal, knee and ankle bracing.

### VirtaMed (1)

+41 44 500 96 90  
sales@virtamed.com  
www.virtamed.com



VirtaMed is the world leader in high-fidelity virtual reality simulation for training of minimally invasive diagnostic and therapeutic interventions in orthopedics and other medical disciplines. VirtaMed also creates customized simulators for medical associations and medical device companies using original instruments and anatomic models for realistic tactile feedback.

### Wisepress Ltd (94)

020 8715 1812  
bookshop@wisepress.com  
www.wisepress.com



Wisepress.com, Europe's leading conference bookseller, has a complete range of books and journals relevant to the themes of the meeting. Books can be purchased at the stand or, if you would rather not carry them, posted to you – Wisepress will deliver worldwide. In addition to attending 200 conferences per year, Wisepress has a comprehensive medical and scientific bookshop online with great offers.

### World Orthopaedic Concern UK (WOC) (90)

07879 401539  
deepa.bose@uhb.nhs.uk  
www.wocuk.org



World Orthopaedic Concern UK is a charitable society affiliated with the British Orthopaedic Association, and linked to World Orthopaedic Concern International. Our aims are to facilitate orthopaedic training in low/middle income countries (LMICs). We achieve this by: Training local surgeons in LMICs during regular visits to their hospitals; Providing examiners for orthopaedic examinations; Running short focused courses on specific topics; Facilitating long and short term visits by UK surgeons; Facilitating UK trainee fellowships to LMICs.

### Zimmer Biomet UK Ltd (66)

01793 584500  
CustomerServices.UK@zimmerbiomet.com  
www.zimmerbiomet.com



Zimmer Biomet products and solutions help treat patients suffering from disorders of, or injuries to, bones, joints or supporting soft tissues. Together with healthcare professionals, we help millions of people live better lives. Zimmer Biomet offers the most comprehensive portfolio of solutions available in the musculoskeletal healthcare industry, from early intervention treatments to complex surgical procedures. Our total focus on musculoskeletal healthcare gives us a competitive advantage and makes us a leader in delivering value for our customers."



# BOA Annual Congress 2019

*New Horizons*

**SAVE THE DATE**

**10th - 13th SEPTEMBER**

**ACC LIVERPOOL**

**FIND OUT MORE AT [CONGRESS.BOA.AC.UK](http://CONGRESS.BOA.AC.UK)**



BritOrthopaedic

@BritOrthopaedic #BOACC

British Orthopaedic Association

## Conference Listing

### **BTS (British Trauma Society)**

[www.bts-org.co.uk](http://www.bts-org.co.uk)

7-8 November 2018, Manchester

### **BOFAS (British Foot and Ankle Society)**

[www.bofas.org.uk](http://www.bofas.org.uk)

7-9 November 2018, Edinburgh

### **BOTA (British Orthopaedic Trainee Association)**

[www.bota.org.uk](http://www.bota.org.uk)

14-15 November 2018, Newcastle Upon Tyne

### **SBPR (Society for Back Pain Research)**

[www.sbpr.info](http://www.sbpr.info)

15-16 November 2018, Netherlands

### **BSS (British Scoliosis Society)**

[www.britscoliosissoc.org.uk](http://www.britscoliosissoc.org.uk)

28-30 November 2018, Belfast

### **BOSTAA (British Orthopaedic Sports Trauma and Arthroscopy Association)**

[www.bostaa.ac.uk](http://www.bostaa.ac.uk)

5 December 2018, London

### **OTS (Orthopaedic Trauma Society)**

[www.orthopaedictrauma.org.uk](http://www.orthopaedictrauma.org.uk)

10-11 January 2019, London

### **BHS (British Hip Society)**

[www.britishhipsociety.com](http://www.britishhipsociety.com)

27 February-1 March 2019, Nottingham

### **BSCOS (British Society for Children's Orthopaedic Surgery)**

[www.bscos.org.uk](http://www.bscos.org.uk)

7-8 March 2019, Norfolk and Norwich

### **BASK (British Association for Surgery of the Knee)**

[www.baskonline.com](http://www.baskonline.com)

26-27 March 2019, Brighton

### **BASS (British Association of Spinal Surgeons)**

[www.spinesurgeons.ac.uk](http://www.spinesurgeons.ac.uk)

2-5 April 2019, Brighton

### **BSSH (British Society for Surgery of the Hand)**

[www.bssh.ac.uk](http://www.bssh.ac.uk)

25-26 April 2019, Swansea

### **CAOS (Computer Assisted Orthopaedic Surgery (International))**

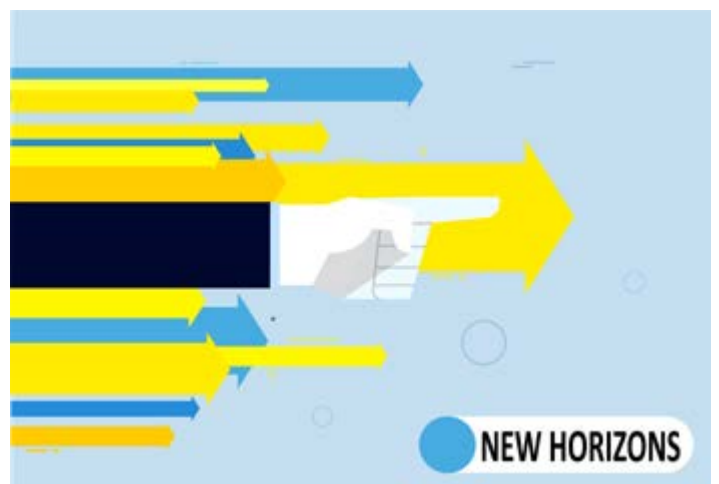
[www.caos-international.org](http://www.caos-international.org)

19-22 June 2019, New York

### **BIOS (British Indian Orthopaedic Society)**

[www.britishindianorthopaedicsociety.org.uk](http://www.britishindianorthopaedicsociety.org.uk)

28-29 June 2019, Leicester



### **BOA (British Orthopaedic Association)**

[www.boa.ac.uk](http://www.boa.ac.uk)

10-13 September 2019, Liverpool



# The power of PATIENT SATISFACTION



## Stability without compromise

REDAPT Revision Hip Solutions are designed to provide long-term biologic fixation in the most difficult of anatomies through porous, anatomic, stable solutions.

Visit us at stand 10 at the BOA.

 **smith&nephew**  
**REDAPT<sup>®</sup>**  
Revision Hip System

Supporting healthcare professionals

[congress.boa.ac.uk](http://congress.boa.ac.uk)



@BritOrthopaedic #BOAAC #BOAcentenaryyear



British Orthopaedic Association



BritOrthopaedic