END OF ORTHOPAEDIC TUMOUR FELLOWSHIP IN THE DEPARTMENT OF ORTHOPAEDICS AND TRAUMATOLOGY, QUEEN MARY HOSPITAL, THE UNIVERSITY OF HONG KONG

A REPORT BY DR. EDWIN MADUAKONAM DIM

Preamble

I first knew about the Queen Mary Hospital a couple of years ago, when I stumbled at an article written by a certain Surgeon in the Department of Surgery of the hospital. The article made a deep impression on me. Although by that time I have never worked outside my country of origin, Nigeria, I had to write down the name of this hospital in my diary as one of the places I would love to work. This was the reason I chose this hospital for a six-week observatory short-term AOTrauma fellowship in 2012. Notwithstanding that the period was short, it gave me the opportunity to appreciate the high-level organisation of Orthopaedic practice into independent subspecialties, with adequate and modern supportive state of the arts technology. This laid the foundation for my subsequent return for a Clinical Fellowship in the Department of Orthopaedics and Traumatology.

The organisation of Orthopaedic practice into subspecialties is yet evolving in my country in general and nonexistent for now in my centre, the University of Uyo Teaching, Uyo, Nigeria. In response to the evolving subspecialisation effort in my country, I chose the familiar terrain of the Queen Mary Hospital, The University of Hong Kong, for an Orthopaedic tumour fellowship. I am in deed grateful to the University of Hong Kong and the Queen Mary Hospital for the opportunity to be here.

Working in the Orthopaedic and Traumatology Department

Upon reporting for duty on April 01, 2016, I was attended to by an administrative staff of Department, prior to meeting with the Division team members comprising Drs Lam Ying Lee, Ho Wai Yip Kenneth and Yau Ching Hin Raymond, in company of some Orthopaedic resident doctors. I must say that these gentlemen were very accommodating and supportive all through my stay with them.

The Orthopaedics and Traumatology department is beautifully organised, with a team of clinical and non clinical staff who work conscientiously to justify the reputation of the department. I saw a people who discharged their responsibilities with a combination of passion and edifying spontaneity. The cordial interpersonal relationship that exists among members of the department is particularly obvious to an outsider. The organisational hierarchy of the department, with a Chief of Service at the top, is very stable resulting in a hitch-free operational efficiency of the administrative, technical and research staff, as well as the clinical staff in not less than eight Orthopaedic divisions.

The department places high premium on training for both medical undergraduates and resident doctors alike. The intricate organisation of services in subspecialties ensures a high quality of resident specialists. This arrangement works together for the benefit of overseas fellows in the department. The academic programmes of the department such as the Journal club meetings, the weekly Wednesday's grand rounds, and the weekly Saturday's inter-hospital meetings were interesting and educative. The pattern of clinical presentations in the grand rounds is different in some parts from how it is done in my centre back home. I have noted this difference, with a view to introducing it in my place. Also very easily noticeable is the fact that the department invests much on the capacity building of its resident doctors' workforce through systematic hands-on programme while in training

in the various divisions of Orthopaedics. The relationship across all cadres of doctors in the department is very cordial leading to increased work output, effective teaching and unhindered learning, in an atmosphere devoid of bitterness and rancour. This is very commendable.

The Tumor Division

The members of staff of the General and Oncology Division were very accommodating all through the period of my stay. The liberal and friendly disposition of everyone in this division, especially of the Division Chief and my supervisor, Dr. Lam Ying Lee, is highly appreciated. This Division has exposed me to the basic principles and practice of Orthopaedic Oncology, different from what I knew on arrival. This also includes knowledge of how I might set up an Orthopaedic Oncology unit in my centre at home. My interest in Orthopaedic tumour research has also been quickened, and I now have an understanding that I can also have an Orthopaedic tumour registry at home to help my research effort. Again, I have come to realise that every patient for Orthopaedic tumour surgery should be taken on his or her personal merits, as no single principle might find a general application to individual patients. I have understood that no two tumour surgeries are the same. Watching and assisting in various operations made me to further understand that success in Orthopaedic tumour specialty depends to a large extent on having a sound working knowledge of other specialties, since any region of the body can indeed be operated upon. This made me to further understand the philosophy of combining the General Orthopaedic and Orthopaedic Oncology units into one Orthopaedic Division. The combination of surgical skills, ethics and stamina by the Division Chief and my supervisor, as well as by other members of the team, is amazing.

There were regular operating sessions by the team in both the Queen Mary Hospital and the Duchess of Kent Children's Hospital. This helped me to see the diverse approaches to the problems of bone and soft tissue tumours. Regular morning and afternoon clinic sessions on the designated days of the week provided the opportunity to cope with the teeming number of patients that require Orthopaedic oncological services. In addition, my supervisor, Dr. Lam Ying Lee, was kind enough to also allow me see what happened in other Orthopaedic teams such as the Joint Division. To this end, I must here now also appreciate Drs Louis Chan, CF Chan, Henry Fu, Raymond Yau, etc, who at one point or the other allowed me into their joint replacement operating sessions.

Research work

Attitude to research in the department is highly commendable. The department is research driven. Within the period of my stay, and with the assistance of my team members, I was able to start and finish one original research work titled "Profile of surgically treated metastatic extremity bone tumours at a University hospital in Hong Kong". This work is already undergoing peer review for publication. It should be noted that there is paucity of literature in Hong Kong on the subject of metastatic bone tumours in general, and extremity metastasis in particular. This work, therefore, is expected to form a template upon which musculoskeletal metastatic diseases can be further documented in Hong Kong. A second research work (a case report) is underway, but finishing touches to it might have to be fine tuned in collaboration with the Division team members after I must have travelled back to Nigeria on the 30th of September, 2016.

The Downside

It may not be easily appreciated how learning and knowledge acquisition can be hampered on account of language difficulties. This was particularly a challenge to me. It was easy to follow in the academic meetings, but not on the bedside and clinics, where the main medium of communication is the local

language between the doctors and the patients on one hand, and sometimes among doctors one the other. This is understandable, but a conscious effort by all relevant parties to carry the non-Chinese fellows along might go a long way to enhancing learning.

Conclusion

It has been a worthy experience for me. I look forward to more of this opportunity. Hong Kong is a land of rich socio-cultural heritage, uncommon landscape and aquatic splendour. The twin institutions of The Hong Kong University and Queen Mary Hospital are epitomes of architectural mastery. I am privileged to be counted among the great minds that work in these places. I use this opportunity to appreciate all staff of the Orthopaedic and Traumatology department, and especially the operating theatre staff of both the Queen Mary Hospital and the Duchess of Kent Children's hospital. I appreciate the nursing staff as well as the administrative staff. In particular, I appreciate the administrative staff who were involved in regular communications with me through e-mails prior to my coming to Hong Kong. They include Carmen Liu, Doris Lau, Catherine Chiu, Kit Wong, etc. They all made my stay worth the while.

I appreciate the great scholars whose experience and service have continued to add to the reputation of this great department. Time and space would not allow me to name everyone, but I pay special tribute to Prof. Kenneth Cheung, Prof. Frankie Leung, Prof. Chiu and Prof. SP Chow. I pay special tribute to all the Division Chiefs for the good works they are doing. I am particularly indebted to my supervisor, Dr. Lam Ying Lee, who graciously accommodated me and extended to me the warm and amiable hand of companionship.

As expected, I have made friends among the staff of the department and beyond, and I will continually keep and cherish this friendship. I shall miss this vibrant department.

Once again, I thank everyone. God bless you all.



Dr. Edwin Maduakonam DIM

Division of General Orthopaedics and Oncology

Department of Orthopaedics and Traumatology

Queen Mary Hospital

The University of Hong Kong.

Dated, this 22nd day of September, 2016.