

Report on ASEAN Orthopaedic Association Outreach Programme, Banjarmasin,
Kalimantan Selatan, Indonesia

Prepared by : Dr Ferdhany bin Muhamad Effendi

8th till 10th November 2013

Volunteers

1. Dr Peter Lee (Singapore)
2. Dr Fareed Kagda (Singapore)
3. Dr. Pariyut Chiarapattanakom (Thailand)
4. Dr. Frederic Diyco (Phillipines)
5. Dr. Andito Wibisono (Indonesia)
6. Dr Avthar Singh (Malaysia)
7. Dr. Ferdhany Effendi (Malaysia)

Local Organising Committee

1. Dr. Husna Dharma Putera
2. Dr. Zairin Noor
3. Dr. Izaak Zolkarnain Akbar
4. Dr. Andreas Siagian
5. Dr. Muhamad Iqbal

Day 1.

Three cases was scheduled for surgery at 3 different hospitals. After discussion with the team of volunteers, it was decided that the volunteers are divided equally (2 for each hospital) to perform the surgery. Me and Dr. Pariyut from Thailand was given the task to operate on a case of atrophic non union of distal femur in a 39 year old Indonesian lady who was 18 months post trauma. The surgery was performed in Rumah Sakit Ratu Zalecha Martapura, which was one hour by car from Banjarmasin. The patient sustained a closed fracture treated with a distal femur condylar plate (Figure 3). Infection have been ruled out and the issue is patient have non union with limb shortening of 3 cm and knee joint contracture

(Figure 2). Preoperative discussion (Figure 1) with the volunteer theme came up with the plan of autologous iliac bone grafting of the non union site KIV replating. Intraoperative finding was fibrous non union at the fracture site with stable fixation. Non union site was curetted and bone grafting was done, with retainment of the plate. Despite the substandard size and environment of the operating theater (Figure 4), the operation went smoothly without any incident. The case of TB spine was given to Dr Peter Lee and Dr Avthar and operation was done at Rumah Sakit Ulin, Banjarmasin, which is the main referral centre for South Kalimantan region. Dr Fareed Kagda and Dr Frederico performed a wound debridement and bone curettage for a case of osteomyelitis of the tibia in Rumah Sakit Palangkaraya which is situated 4 hours away by car. In general, all three operation went well and the goal was achieved as to share experience not only in surgical technique, but to share innovative ideas in substandard situations.

Day 2.

The Symposium scheduled today was officiated by Dr Zairin Noor, the Head of South Kalimantan Branch of the Indonesian Orthopaedic Association. Multiple topics with relevance to the theme of "Orthopaedic Emergencies" were given by all the volunteers involved. The main audience were the orthopaedic residents and also the paramedical staffs. This was subsequently followed by case discussions in which interactive change of ideas and opinions occurred and suggestions were given to the surgeon in charge of the cases.

Day 3.

The day started early at around 5am, when all the volunteers were brought to visit the floating market of Banjarmasin (Figure 6). The trip to the market took 1 hour by boat and along the way we appreciated the houses along the river that still uses river water for their daily activities such as cleaning and washing clothes. The merchants of the market were mainly women on long sampans who sells everything from vegetables, fruits to traditional kueh common to the locals. In the afternoon, all the volunteers said farewell to each other and made their way to the airport for the flight back home.

In summary the programme achieved its goal of sharing surgical technique and experience with the added benefit of appreciating the social and culture of this small town in south Kalimantan Indonesia.



Figure 1. Dinner after Preoperative Discussion



Figure 2. Case 1: Non union distal femur



Figure 3. Radiograph of case 1



Figure 4. Operating theatre in RS Martapur



Figure 5. The Author with the operating staff of RS Martapura



Figure 6. Floating Market of Banjarmasin