

BERITA ORTOPEDIK



A Note from the President

Dear Colleagues

I hope your practice is going well, and that you are enjoying all the wonderful joy and fulfilment that the practice of Orthopaedic Surgery offers to its practitioners.

I would first like to acknowledge the Council of the Malaysian Orthopaedic Association for all their unremunerated hard work. Besides myself, your MOA Council consists of Dr Faris Kamaruddin of Kuching (Immediate Past-President), Assoc Prof Dr Azlina Abas of UM (President-elect), Dato' Dr Badrul Shah Badaruddin of Prince Court KL (Hon Secretary), Dato' Dr Azmi Baharudin of UKM (Hon Treasurer), Datuk Dr Mohd Asri Abd Ghapar of Prince Court (Council member) and Assoc Prof Dr Ng Wuey Min of UM (Council member). Our hard-working Chief Editor of the Malaysian Orthopaedic Journal (and ASEAN Orthopaedic Journal), Prof Dr Saw Aik of UM, is technically an appointed member of Council.

The main Council meets at least 12 times a year at Council meetings, plus at many ad-hoc and planned meetings with subspecialty groups, various fee committees, office staff meetings, and especially to organise the annual MOA ASM/AGM in mid-year.

The next MOA ASM will run from 30 May to 1 June 2014, (pre-conference workshops, etc, on 29 May) at the Le Meridian-Hilton complex at Sentral Kuala Lumpur. The theme of the event is "Standards and Registries", and this upcoming meeting will also incorporate CAOS (Computer Assisted Orthopaedic Surgery). I hope to see all of you there and renew our friendship over academic and social events.



Office Bearers 2013/2014

President:

Dr Gobinder Singh

President-Elect:

Dr. Azlina Abbas

Immediate Past President:

Dr. Faris Kamaruddin

Hon. Secretary:

Dato' Dr. Badrul Shah Badaruddin

Hon. Treasurer:

Dato' Dr. Azmi Baharudin

Council Members:

Datuk Dr. Mohd Asri Abd Ghapar

Dr. Ng Wuey Min



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Members of the Council also represent the MOA at ASEAN and Australian sister orthopaedic association meetings. While the President technically is supposed to attend all these meetings, it has been our tradition that we share out the work and experience within the Council.

Storm Clouds on the Horizon?

All is not however rosy in the orthopaedic medico-political world. Some of the issues that are taking some time and effort to resolve include:



1. Complaints and Malpractice Risks

As our patients become more exposed to media, and sometimes have unrealistic expectations, the number of complaints that are received by the MMC, MOA and even MMA is increasing. Our regulator is of course the MMC, and they have the power of calling for formal disciplinary hearings. They seem, to an outsider, to do this more and more, perhaps to be seen as siding with the complainant rather than the doctors. I feel the MOA must take a role in helping advise our members who are sometimes wrongly called to the MMC.

A secondary issue is that these complaints often lead to litigation, with more and more lawyers taking up cases on a contingency (no win-no fee) basis. Like the regulators, Judges in litigation cases often lean in favour of the litigant who has suffered an adverse outcome, rather than the doctor who has behaved perfectly reasonably, perhaps feeling unconsciously that “insurance will pay, anyway”!

2. Indemnity Insurance Fees

The above has resulted in astronomical indemnity fees. As an orthopaedic “non-spine” surgeon, I paid RM 30,000 to the Medical Protection Society in 2013, compared with about RM 2,000 in 1999 when I started private practice!

It may soon be impossible for orthopaedic surgeons to start private practice with comprehensive indemnity such as from the MPS or similar, and have to opt for cheaper, limited insurance policies, which still expose them to the risk of paying the excess out of pocket and being potentially bankrupted.

A suggestion I have made in the past is that doctors involved in private practice be allowed to collect an appropriate sum from patients above our professional fees, clearly marking this “professional indemnity fee”. I saw this in the bill of a patient of mine who came to see me after surgery in USA.

We doctors as a group need to work out how to limit malpractice claims and awards. We also need to be reminded that “discretion is the greater part of valour”, and being a little more circumspect in what we promise our patients, and the manner we take informed consent, may be important considerations. The days of a surgeon being able to take on any type of surgery are long gone!

A Note from the President (cont...)

3. Private Practice Fees and Fee Schedules

I apologise for going on about private fees to our non-private practice members, but the vast majority of us will end up doing at least some private work, either now, after retiring from public service, or if/when the 1Malaysia Health Insurance Scheme (or whatever it will eventually be called) comes in.

Our fees have not gone up even close to the inflation rate. We Malaysian doctors are unique in having a fee schedule that is fixed by an Act of Law, and we are NOT allowed to charge more than the schedule, no matter what the qualifications, experience or expertise of the surgeon is. In effect, our fees per procedure have gone up by about 10% over the last 12 years! Hence perhaps the pressure a minority of private surgeons feel about doing every case that comes their way, instead of redirecting appropriate cases to others. Poor fees lead to poor practice.

Various committees and groups are working on this, via the College of Surgeons, Academy of Medicine, the Malaysian Medical Association, etc. We hope this will lead to some sense in due course.

As an aside, I was very recently forwarded a letter from a member of the Ministry of Health to an insurance company, saying that we should charge only a single code for a total knee replacement, leading to a surgical fee of RM 2365, rather than the current practice of charging another half code of something like a patellar stabilisation to bring the fee to about RM 3000 or so.

Gobinder Singh, President

gsbones@gmail.com

I have written back officially stating that when I started in private practice in 1999, the going rate for a surgical fee for a TKR was RM 3000, and asking them to amend or withdraw their letter. The same of course applies to hip replacements. I am sure that at the suggested single code fee, very few joint replacements will be done privately, taking into consideration the expertise, risk and potential complications. I would much rather do two or three carpal tunnel releases or ganglion cyst excisions for a higher fee!

4. Other Issues

These include the National Specialist Register (please ensure you have registered), Subspecialty certification, and eventual recertification issues. We will keep you informed.

In conclusion, I would ask my colleagues to support the MOA in our work, and be ready to be a little more “political” in outlook in the future. We welcome issues that affect all to be brought to our attention, and I can help ensure that orthopaedic surgeons can speak with one voice when a reply comes from the MOA officially, representing all our members. Please do consider spending some of your time in bettering the orthopaedic community and stand for election at the next AGM. I would especially welcome more senior colleagues who may be ready to cut back a little from clinical work to stand for Council.

Best regards, and wishing all the very best for 2014!



Message from Ex President - Reminiscing MOA by Dr Robert Penafort, Ex President

Reminiscing

To begin with, I must say that, without exaggeration, its an honour to serve in an titular position in any society or association. Being elected to such a post by your respected peers, is indeed a coveted tribute.

I will in the next few paragraphs attempt to briefly recall the year (as President) that very quickly went by and perhaps pen down some **personal opinions** of where/how the association should head.

A year is too short a time be President of the MOA. Although most past presidents spend a few years in the association prior to that as secretary, treasurer etc, the actual time as president does not give one the adequate time to even begin the task of leaving a mark of your passing through the seat of 'power'. Hence the task that one can perform in the short time, is to firstly, plan and organize the ASM, AGM with as few glitches as possible and secondly, perhaps, performs the duties of President with the dignity and honour that the position deserves.

Senior Travelling Fellowship (STF)

The tradition that the MOA has accepted has been to have the president represent the country for the senior travelling fellowship. For the uninitiated, this is a fellowship of senior orthopods of the ASEAN countries travelling together to 6 ASEAN countries for a period of three to four days in each country. Although it's a relatively short period, it allows one to soak the culture and tradition of our sister nations, and form lifelong relationships with the fellow STFs. A special treat was a personal tour of Hanoi and its suburbs by the President of the Vietnamese Orthopedic Association himself. Unfortunately the Cambodian and Myanmar Orthopedic Associations are still too small to accommodate the visiting fellows.

Travelling

One of the privileges of the term, is the extensive travel across the globe as ambassador of the national association to various association meetings, from Hong Kong to the US to Australia, not to mention the neighbours, Indonesia, Singapore and Thailand. Although this takes up an enormous amount of time, the experience and exposure gained, was certainly worth the sacrifice.

AGM, ASM

Our society has grown at a tremendous pace over the last 15 years and the membership now stands at more than 500 members. Organising the ASM has thus become a great challenge accommodating this large number in addition to the paramedical staff who are now a regular feature at our annual meeting. Finding a venue to house one thousand participants has become a chore, especially since a handful of states have the capacity to accommodate such numbers and the accompanying exhibition booths. Hence the merry go round among a few cities. This growing number however brings huge returns to the association and over the years have led to to our coffers overflowing.

Message from Ex President- Reminiscing MOA (cont...)

Dwindling Interest

What really is the association to the ordinary member? A good measure of the relevance of the MOA, to the ordinary member, is to observe the number of attendees at our annual AGM. Ten years ago approximately 70 members (mostly senior) graced the AGM where one can witness interesting debates on the workings of the MOA and the performance of the exco for the year that had passed. During the last few years, the number has increased to about 75 to 80! This is despite the membership increasing from about 200 to the 600 at present. Each exco has strived to look at ways to become more relevant but the rather short term of the exco/president does not allow any long term plans to be implemented.

Suggestions

1. Past Presidents

There is a wealth of experience in the pool of past presidents (PP) which has little or no role in the present system. Other associations involve these past presidents in a variety of standing committees that have to report to the AGM every year. This allows some degree of continuity in these areas and longer term plans can be implemented in the process. Areas such as **medico-legal issues, fee-schedule, subspeciality training, BSE organising and CME**. (The OGSM even organised a dialogue/teaching of senior and junior judges/magistrates on common contentious issues.) The vast financial resources at our disposal, allows us to move the association beyond the boundaries of the **klang valley** with road shows and CME programmes. Again, these can be organised with senior members of the society without taxing the exco. Kudos to the present president for initiating a discussion with all the past presidents late last year. Hopefully this will bear fruit in the near future.

2. Scholarships

The MOA should disburse small scholarships in a few subspecialties (especially where industry support is limited) on an annual basis. This would benefit more junior members and afford them the opportunity of travel and experience which is otherwise beyond their financial means.

3. Engagement with Government

It is essential that the MOA be the link between the policymakers and the members. Presently all policy decisions are communicated through the MMA, and the Academy. A standing committee of senior (influential) members, could be set up to initiate this dialogue.

4. State committees

Perhaps, in view of our sheer size, it may be the opportune time to have state chapters. The subspeciality groups are very successful, but again, the focus seems to be within the Klang Valley.

Message from Ex President- Reminiscing MOA (cont..)

5. Two year terms

An alternative idea would be to increase the term of the president to two years. This will allow some degree of longer term implementation of policy.

These are the musings of a past president (not past his prime). Hindsight has 20/20 vision. Hence its best to tap these 'perfect visioned' individuals to contribute to the association.

Official Opening of Limbs for Life Protheses Centre



"THE GIFT OF INDEPENDENCE"
LIMBS FOR LIFE



LIMBS FOR LIFE MISSION

Limbs For Life is a welfare project which offers FREE artificial limbs to all Malaysian amputees from poor or under privileged backgrounds regardless of race or religion. There are many unfortunate cases of amputation in Malaysia and prosthetic limbs are beyond the financial means of many of these amputees.

Limbs For Life was initiated to offer an opportunity for amputees from poorer/under-privileged families to live a full, independent and productive life again.

Limbs For Life began with the help of The Prosthesis Foundation of H.R.H. The Princess Mother of Thailand. Through the transfer of technology and The Foundation's know-how of making prosthetic limbs, the first limb by Limbs For Life Protheses Centre was fitted on 27 October 2013. Since October 2013 till January 2014, 12 amputees had been able to walk again without crutches from prosthetic limbs provided by Limbs For Life. The continued sharing of expertise and supply of equipment, tools, prosthetic parts and materials from The Foundation will enable Limbs For Life Protheses Centre to provide sustainable and comprehensive support to amputees in Malaysia.

We believe life is precious and every human being is capable of living up to her/his full potential. Come join us in lending a hand to give our under-privileged Malaysian amputees a chance to overcome their challenges and continue to be a contributing member of our community.

Limbs For Life Project is funded from corporate and public donations and we hope that you will give us your full support.

A gift from you is a gift of hope and independence.



Official Opening of Limbs For Life Protheses Centre
Theme: **"If they can walk, THEY WILL HAVE A BETTER LIFE"**
Sunday, 23 February 2014

Program	
9.00 am	Arrival of invited guests and devotees.
9.15 am	Arrival of Guest of Honour.
9.35 am	Video/Multimedia Presentation
9.40 am	Speech by Bro Lim Ah Boh, President of Bandar Utama Buddhist Society
9.50 am	Speech by Assoc Prof Dr Therdchal Jivacate, Secretary General of The Prosthesis Foundation of H.H. The Princess Mother
10.05 am	Speech by Guest of Honour & Official Opening of Limbs For Life Protheses Centre
10.25 am	Video Presentation on making of Prosthetic Limbs
10.45 am	"The Gift of Independence"
11.10 am	Thank you, Doctors
11.20 am	Viewing of Workshop
11.30 am	Vegetarian Lunch

A welfare project of



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*Report on Singapore Orthopaedic Association
Annual Scientific Meeting*

*By Assoc Prof Dr Azlina Amir Abbas,
President-Elect MOA 2013-2014.*



The 36th Annual Scientific Meeting of the Singapore Orthopaedic Association was held between the 8th and 12th of October 2013. The meeting this year was conducted with the participation of the ASEAN Society for Sports Medicine and Arthroscopy (ASSA) and carried the theme "Arthroscopic Surgery - Exploring New Horizons". Lectures by world-renowned surgeons and sports medicine specialists were well attended by the members as well as by surgeons from the ASEAN and other regions, where the lecture rooms were standing room only. The annual dinner was a fun and interesting affair, where a talk on Vincent Van Gogh was very well-received and appreciated, and the audience were entertained by singing college students and swinging Wing Chun masters. Everyone came away from the meeting (and dinner) happy and enlightened, and looking forward to the next scientific meeting.



AOA Outreach in Mindanao 2013

By Dr. A Saw

The ASEAN Orthopaedic Association Outreach program in Davao involves a one and half day meeting called the Mindanao Summit, and was held on 15th and 16th March 2013. The date was chosen to coincide with the Davao day, a day of festive celebration for all those staying in Davao city and around the South-Eastern edge of Mindanao island.

The meeting was well attended with about 100 participants from the region (Fig 1,2). The topics covered a broad spectrum of common and less common pathologies, but the main focus was on trauma. Dinner symposium at the end of the first meeting day was a great fellowship attended by a few council members of Philippines Orthopaedic Association (POA) like Dr. Edward Wang, Dr Miles Dela Rosa and other senior faculty members (Fig 3).

The second day was equally educational with more lectures on minimally invasive osteosynthesis (MIO). After this half day meeting, the visiting faculty were brought to the famous crocodile farm. Due to rather heavy rain when we arrived at the venue, we decided not to proceed with the open-air tour and lunch in a well-decorated restaurant nearby (Fig 4). We later visited the orthopaedic department and wards of Davao hospital, and discussed the management of a few interesting cases (Fig 5). It was an eye opener for me to see the innovation shown by the local doctors to help children with clubfoot deformities where weekly manipulations and serial castings were needed. The procedures were performed in a beautiful and low cost donated by a charity organization. By managing the children outside the hospital building, the parents do not need to pay the regular registration fee for attending the out-patient clinic. In the evening, Dr Chua organised and feasted on a fruit called Durio Malvaceae (Fig 6).



Participants preparing for the lectures



Outreach Mindanao 2013

This outreach program was a success based on feedback by some of the participants, and comments by other faculty members. I sincerely hope that more regional faculties will be able to participate in future outreach programs so that together we can provide more effective treatment to patients in our region.



Demonstration workshop in progress



Souvenir for faculty members from course chairman Dr. Remo



Outreach Mindanao 2013

A meal together



Visiting Orthopaedic department of Davao General Hospital



Outreach Mindanao 2013



Bamboo hut for performing clubfoot manipulation and serial casting



Dinner with local fruit





*(RCOST) Annual Scientific Meeting
by Dato' Dr Badrul Shah Badaruddin, DPMJ*



I was given the opportunity to represent MOA in the Royal College Of Surgeon Thailand (RCOST) Annual Scientific Meeting in Pattaya, October last year. My wife and I were treated with the usual great Thai hospitality from the moment we stepped out of the airport. The conference was held at the Royal Cliff in Pattaya which houses a large convention centre. Apparently, the Annual RCOST Scientific Meetings are being held in this convention centre every year. The meeting had more than a thousand participants, mainly Thais, but also a few from ASEAN countries. However, I was the only participant from Malaysia. This year's

scientific meeting was on “Current Trends in Orthopaedic”. The presentations were delivered in two languages, English and Thai, but all the slides were in English. Personally, I prefer those in Thais. We enjoyed our stay in Pattaya and I found the official ceremony very memorable. During this ceremony, the new Orthopaedic graduates were “given their scrolls” by their “super seniors” and much respect were demonstrated for each other. The “super seniors” comprises of past presidents, teachers, supervisors and really senior orthopaedic surgeons in the RCOST. One of them, Professor Suthorn,



whom many of us know, was one of the younger looking ‘super seniors’. This is a tradition that the Thais have for a long time and as a foreign delegate, it was a heartfelt sentiment.





*The 33rd Annual Congress of Hong Kong Orthopedic Association (HKOA), 23-24 November 2013
by Dr. Ng Wuey Min*



Hong Kong, a modern city, with its state-of-the-art infrastructure is also facing similar problems as the other developed countries, that is, an ageing society. Therefore, “Defying the ageing spine” was selected as the theme for HKOA ASM in 2013. Most of the lectures presented focused on issues related to the aging population such as degenerated joint diseases, osteoporosis related problems and the approaches in solving the emerging medical conditions.

The Presidential dinner was held in a Chinese restaurant at the convention and exhibition center. The dinner began with a cocktail reception followed by welcome speeches given by the HKOA president and organizing chairman. Two talented orthopedic trainees put up a fascinating musical instrument performance during the dinner.

The highlight of the dinner was the talk given by Professor PC Leung. We were enlightened by his informative talk entitled “The Career Pathway of an Orthopedic Surgeon”. His talk was about alternative pathways of the clinicians after completion of medical training. He explained that these pathways can make a great difference in life style and personality of the public and private surgeons. Apart from the financial gain, the other factors that determine the choice of the surgeon pathways included peer group recognition, clinical skill advancement, breakthrough in research and medical science, self-fulfillment and actualization. Indeed, Professor PC Leung was well known as an inspiring teacher, researcher and clinician in a public university in Hong Kong. After his retirement, he continued to work as a

professor in a private university. At the age of 70, he was appointed as the director and advisor in the Hong Kong Healthcare at the public sector, a rare achievement for an orthopedic surgeon.

The sumptuous dinner served was a classical Chinese cuisine with lots of tossing of wine and liquor. The dinner ended with social interactions and more wine tossing. It was a splendid dinner, where many local and foreign delegates were able to enjoy the food as well as meet and interact with one another.





44th Malaysian Orthopaedic Association AGM/ASM
incorporating 11th CAOS Asia Meeting 2014



Date: 29th May 2014 | **Time:** Tee-off at 12.30pm
Venue: Kuala Lumpur Golf & Country Club (KLGCC) | **Fees:** RM 350 per golfer

For more information, please visit the conference website at <http://moa-home.com/moa2014>

MOA Golf Tournament

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