

# THE ORTHOPAEDIC FORUM

## The 2023 Austrian-Swiss-German Fellowship

S. Kutty, FRCS, and B.H. Mullis, MD, FAOA

**Abstract** The Austrian-Swiss-German Fellowship was set up in 1978 to facilitate a program through which surgeons from the German-speaking countries of Austria, Switzerland, and Germany could visit the United Kingdom, Canada, and the United States of America. In 2023, surgeons Brian Mullis and Satish Kutty, representing the American Orthopaedic Association and the British Orthopaedic Association, respectively, visited centers in Austria, Switzerland, and Germany over the course of 4 weeks. This article describes their journey and experiences.

In 1978, the trio of Franz Endler, Erwin Morscher, and Hans Mau, representing orthopaedic associations in Austria, Switzerland, and Germany, respectively, set up the Austrian-Swiss-German (ASG) Fellowship. The following year, the first group of fellows visited North America and the U.K. A tradition has since followed in which 4 orthopaedic surgeons (2 German, 1 Swiss, and 1 Austrian) visit orthopaedic centers in the U.K., Canada, and the U.S. In 1994, this fellowship gained importance with its inclusion in the Emerging Leaders Program of the American Orthopaedic Association (AOA). In 1998, Stuart L. Weinstein founded the exchange program through the AOA. The exchange initially started with the selection of 2 American surgeons to visit orthopaedic centers in Austria, Switzerland, and Germany, and, over the years, was expanded to include 1 Canadian surgeon and 1 British surgeon. The program culminates with a presentation of the scientific work of the fellows at the congress held in Baden-Baden in April.

In 2019, 2 surgeons were chosen by their respective associations, the AOA and the British Orthopaedic Association (BOA), to be a part of the class of 2020. However, COVID-19 led to a succession of postponements until 2023. The members of this class were Brian Mullis, representing the AOA, and Satish Kutty, representing the BOA. Brian Mullis is a trauma

surgeon from Indianapolis, Indiana, U.S., who specializes in acute trauma and posttraumatic reconstruction. Satish Kutty is a joint reconstruction surgeon from Harlow, Essex, U.K., who specializes in complex primary and revision hip surgery.

For 45 years, the ASG Fellowship has followed a rich tradition of facilitating an international exchange of knowledge between English- and German-speaking countries. This educational event also helps to develop and enhance leadership capabilities, as indicated by the number of former ASG fellows who currently hold a chair or other leadership position in a center of excellence in a German-speaking country. This exchange has fostered not only academic relationships but also friendships, which are often lifelong.

### The Germany Tour

#### Homburg

Our journey started on April 2 when we were met by Prof. Landgraeber and Prof. Orth and took our first trip by car to Homburg. This was a great opportunity for the first of many discussions regarding the differences between the American and British health-care systems and those of our hosts. Our hosts offered subspecialization in all aspects of orthopaedics; however, trauma was managed by a separate department. At

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learned of Prof. Jäger's interest in cartilage restoration and promotion of bone healing and of other projects from his department.

Our second day was at the University of Cologne with Prof. Eysel. This was one of the few stops where we were able to spend time with the trauma department in addition to the orthopaedics department. In Austria, Switzerland, and Germany, the separate departments of trauma and orthopaedics have slowly been merging over the last 10 to 15 years. Cologne was one of the more successful universities with regard to the department merger, according to faculty from both sections. No orthopaedist has a better understanding of the need for the success of this merger than Prof. Eysel, who had been a patient at his own university following a motorcycle collision for which he underwent multiple surgical procedures. (Fortunately, he is doing well now.) We learned that the University of Cologne has an impressive laboratory where they create fractures in cadaveric extremities that are shipped to instructional courses all over the world.

Our third day was spent at the University of Bonn. Our host was Prof. Wirtz, who specializes in arthroplasty and has a high-volume revision arthroplasty practice. We learned that emergency medicine had only recently started to develop in Germany, with emergency departments beginning to be staffed by dedicated emergency medicine physicians, although many departments still use surgeons and hospitalists as the primary providers. We also learned that the University of Bonn has a state-of-the-art facility in which a computed tomography (CT) scanner can be slid right over the patient in the trauma bay to obtain a CT scan without having to move the patient. They also have an operating room located next to the trauma bay within the emergency department itself.

Our fourth day was spent with Prof. Zilkens, who had previously worked at a university but is now in private practice. We learned of the rehabilitation protocols in Germany and that the compensation models actually incentivize the provider to keep the patient in the hospital for as many days as possible. Patients routinely stay in the hospital for 1 to 2 weeks following primary hip or knee arthroplasty. Prof. Zilkens was quite interested to hear how the British and American systems have moved to shorter hospital stays and even, in select circumstances, to outpatient surgery.

### The Switzerland Tour

#### Zürich

We were welcomed into Zürich, Switzerland, by Prof. Romero and taken around the city as it prepared for the end of the winter with the burning of the *Böögg*, a snowman, during Sechseläuten. The next day, we spent time with Prof. Romero at a private hospital and learned of his clinical and research interests (Fig. 2). It was clear to us that robotics was becoming mainstream in total knee arthroplasty.

We visited Balgrist University Hospital the following day with host Prof. Fucantese. After a morning observing various surgical procedures, we spent time with Prof. Snedeker, the head of research at the university. We toured an impressive research facility where, following the "no doors or walls" concept of Google, all offices are open to facilitate discussions and the availability of the researchers to one another and to their students. We found that the students loved this open concept but that many of the faculty members were not as enthusiastic about it. The research facility welcomes commercial researchers in addition to university staff, and the entire building is dedicated to musculoskeletal research in one form or another.



Fig. 2

We are pictured here with Prof. Romero in Zürich. From left to right: Prof. Romero, Satish Kutty, and Brian Mullis.



Fig. 3  
Here we are in Vienna. Pictured from left to right: Prof. Chiari, Satish Kutty, Brian Mullis, and Prof. Windhager.

Our final day was again spent at Balgrist University Hospital with Chief of Orthopaedics Prof. Farshad, Prof. Bouaicha, and Prof. Romero. In the morning, an academic session was held that included a typical indications conference and other talks.

### The Austrian Tour Innsbruck

Our time in Innsbruck was spent with Prof. Arora, Prof. Noggler, and Assoc. Prof. Biedermann. We spent the morning



Fig. 4  
Casino night in Baden-Baden. Pictured from left to right: Prof. Reichel, Mrs. Reichel, Prof. Jäger, Prof. Romero, Mrs. Romero, Prof. Zilkens, Satish Kutty, Brian Mullis, Prof. Stöckl, Prof. Eckardt, and Mr. Eckardt at the conference dinner.

observing a periacetabular osteotomy with Prof. Biedermann. The afternoon was spent touring the research facilities. Prof. Nogler and his team play a key role in research on, and in the international consensus regarding, implant-related infection with respect to biofilm. We had a scientific symposium in which Prof. Arora discussed his department's experience with bilateral hand transplantation. Several other interesting topics were discussed, including those brought up by Assoc. Prof. Krappinger regarding routine primary arthroplasty for geriatric acetabular fractures.

### Vienna

We continued our journey to the capital of Austria, Vienna, which has a rich history of contribution to orthopaedics. We were accompanied by Prof. Chiari and Prof. Funovics, who showed us the various historic sites of Vienna. The city, which has resided on the banks of the mighty Danube since imperial times, has an endearing charm that captivates its visitors. Our scenic tour culminated in dinner with staff and residents at a Viennese *Heuriger*, a traditional restaurant located in a vineyard. The theme of interesting discussions regarding training and education in various health-care systems continued (Fig. 3).

In the morning, we spent time at University Hospital Vienna. We were greeted by Prof. Windhager, the chair of the orthopaedics department. We took part in the routine morning meeting, during which we gave scientific presentations. This was followed by a robust discussion. We then assisted Prof. Windhager in the operating room. Afterward, we toured the hospital with Assoc. Prof. Togel and Dr. Benca, the leads of the research laboratories for cell culture and biomechanics, respec-

tively, which we were also able to visit. The scientists involved in the research then presented on their work in cell biology and biomechanics. Their work on the development of a unique implanted device for amputees was particularly interesting. Later, Prof. Kotz gave us a tour of the Adolf Lorenz Museum, which is dedicated to an icon in Austrian orthopaedics. This gave us an appreciation for the illustrious history surrounding orthopaedics in Vienna.

The second day involved a visit to Orthopaedic Hospital Vienna-Speising. This institution is unique in that it is a stand-alone elective orthopaedic unit that is privately run but involved in providing orthopaedic services to the state. It provides a high volume of elective orthopaedic procedures, similar to what most hospitals in the U.S. and U.K. do with "elective centers." After meeting Prof. Dominkus, who gave us the history surrounding the institution, we spent time in the operating room with both Prof. Dominkus and Dr. Hofstaetter. An excellent discussion followed regarding how this institutional model has been quite successful in providing a high level of health care and output. Dr. Hofstaetter then took us around the research facilities. The current efforts to build a large database were truly impressive. We finished this segment of our trip with a visit to more of the historic sites of Vienna and were privileged to attend a concert by the Vienna Philharmonic.

### Baden-Baden and the South German Orthopaedic Association Conference (VSOU)

We made our way back to Frankfurt and on to Baden-Baden. We had a chance to reconnect with some of our hosts and Prof. Eckardt,

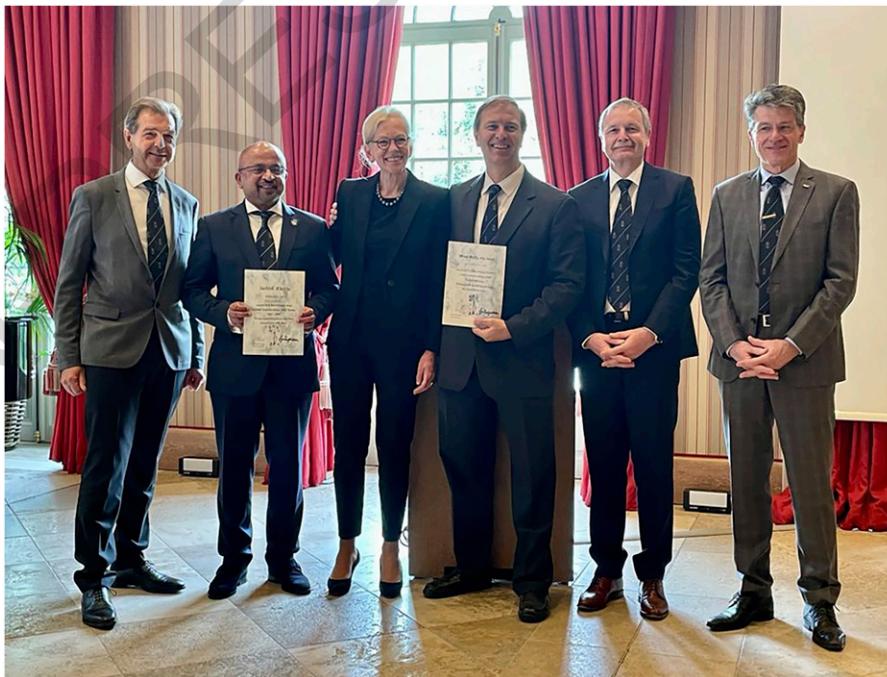


Fig. 5  
Fellowship certificates given at the Asparagus Dinner in Baden-Baden. Pictured from left to right: Prof. Windhager, Satish Kutty, Prof. Eckardt, Brian Mullis, Prof. Reichel, and Prof. Romero.

the secretary of the ASG Fellowship. It was an opportunity to have a tour of historic Baden-Baden and to take part in the festivities of the congress, which included a visit to the casino (Fig. 4). The last day of the congress was the ASG scientific session, during which past and present ASG fellows gave talks. This was followed by the traditional Asparagus Dinner for the ASG fellows at the Brenners Park Hotel (Fig. 5). The past ASG fellows discussed their experiences from the 2019 tour, and we recounted our experiences over the previous 4 weeks. The lunch sadly brought an end to the fellowship.

A question that cropped up routinely among us and our hosts was “What have we learned?” We are at the stage of our careers in which we are set in our practices. However, small changes to improve and to help achieve better outcomes are always welcome. We had the opportunity to talk on a routine basis with opinion leaders in Germany, Switzerland, and Austria. We were very curious about what they were passionate about! The hosts were all ASG fellows at some point in their

careers. They built teams and departments, and each fellow had a vision and valued the thinking and imagination of the individuals whom they had nurtured. Experiencing these different leadership styles and their success was one of the greatest benefits of the fellowship. We will continue to be in contact with the friends that we have made, and we hope to contribute to the ASG Fellowship and to support the next generation in the coming years. It is an investment in the future! ■

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