SLARD-APKASS travelling fellowship report. 1st stop: Querétaro, Mexico March 2nd to March 5th, 2024

All the fellows and godfather gathered together in Mexico City for the first stop because their flights originated from different locations. We spent the first night at a luxurious hotel inside Mexico City airport. On the second day, we took an early flight to Querétaro, the former capital city of Mexico. Dr. Fidel Dobarganes and Dr. Alberto Guevara picked them up at the airport and treated us to a traditional Mexican Sunday brunch in the city center. The "Restaurant 1810" is authentically Mexican, with a wide selection of beverages (see Figure 1). After enjoying some food and drinks, we took a stroll in the city center and visited the "Museo de Arte Sacro," a classical Mexican building. Querétaro is a sunny and vibrant city (see Figure 2) with a growing population, businesses, and medical services.

After settling into the hotel, we had another lunch at "Hacienda los Laureles." There was an abundance of tacos, salsa, tequila, Corona beer, and dessert options (see Figure 3), which made for a delightful first day of the fellowship.

On the second day, we convened at 06:30 AM. Dr. Fidel drove us to Hospital Angeles, which is only 5 minutes away from the hotel (see Figure 4). All six local fellows were waiting for us, and they discussed cases related to patellar instability, early knee osteoarthritis, ACL tears, massive cuff tears, and a bodybuilder with right shoulder instability (see Figure 5). We scrubbed in for two ACL reconstructions with allograft and one MPFL reconstruction on the first day (see Figure 6). Afterward, we visited the doctor's lounge, which featured two tennis courts, a barbecue area, and a free gym!! (see Figure 7), and enjoyed a wonderful lunch at the hospital restaurant with Alberto, Fidel, and their fellows. The evening concluded with a Mexican-Japanese cuisine dinner at "Suzu," at El Campanario. The food quality was certified by our Japanese fellow, Dr. Seikai Toyooka.

On March 5th, we gathered again at 06:30 AM. The local fellows presented several highly ranked paper reviews on RSA vs. aTSA (JBJS), frozen shoulder release (BMC), and TKR vs. UKR (KSSTA) (see Figure 8). APKASS fellows shared their experiences regarding ACL and ALLR, shoulder instability, UKR/TKR, and RSA. After a couple of cups of coffee, we moved to the operating theater to observe an inlay biceps tenodesis, inlay DAS[1], and double row suture bridge technique for a massive rotator cuff tear performed by Dr. Alberto (see Figure 9).

The Querétaro fellowship program concluded with a BBQ dinner attended by all the fellows and doctors at a nearby steakhouse. We expressed their gratitude to Dr. Fidel and Alberto for their hospitality and for sharing their surgical techniques. The quality of education, fellowship training, facilities, and leadership of the team at Hospital Angeles is among the best we have ever seen.

References

 Collin, P. and A. Ladermann, *Dynamic Anterior Stabilization Using the Long Head of the Biceps for Anteroinferior Glenohumeral Instability*. Arthrosc Tech, 2018. 7(1): p. e39-e44.

Figure Legend

Figure 1. Plenty of nice food in "Restaurante 1810".



Figure 2. City tour of Querétaro.



Figure 3. Tacos, tacos, and tacos.



Figure 4. Early birds.





Figure 5. Morning meeting in Hospital Angeles.

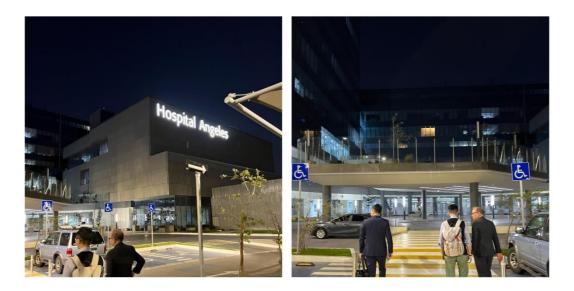


Figure 6. Brand new Hospital Angeles.



Figure 7. The doctor's lounge.



Figure 8. High-quality education.

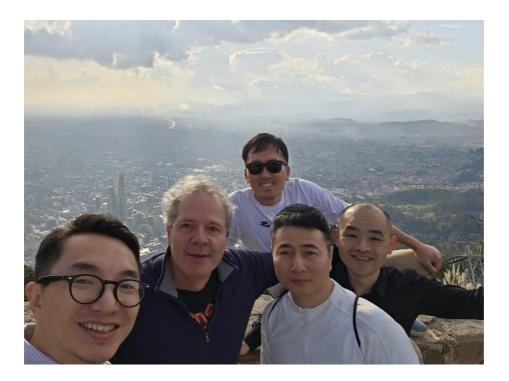


Figure 9. Focused.



APKASS-SLARD Travel Fellowship in Colombia

From Querétaro, Mexico, we went to Bogota, Colombia. Colombia is famous for drugs and guerrillas, and we had the impression that it was a very unsafe place. However, it was much safer than we had expected, and the streets were colorful and lined with sophisticated buildings. My host, Dr. Manuel Mosquera, was very cheerful and friendly. He was always ready to answer kindly to any questions we asked him. He was very open to discuss even private matters with us, which made us feel comfortable. Our host first took us to some tourist attractions. The old town was lined with stores and very lively. At the Gold Museum, we learned how the Chibcha civilization in Colombia was excellent at mining and decorating with gold. At the museum of Fernando Botero, a Colombian artist, we looked around with interest at his unique paintings. His style of painting everything thick and plump is very charming. From Monserrate Hill, which we climbed by cable car, we had a panoramic view of the city of Bogota. It was a bigger city than I had imagined, and the streets were lined up regularly like a grid and very well maintained.



Dr. Manuel Mosquera showed us a very interesting surgery. The arthroscopic Trochleaplasty is an unfamiliar procedure to us, and we observed it with great interest. We also learned that ACL repair, which he showed us, can be a very effective means of repairing the ACL if the indications are good. The Colombian coffee we drank after the surgery was exceptional. I was also very interested in the Colombian medical system. In both cases, we visited day surgery centers, but the doctors work in several hospitals at the same time. There is a big difference between private and public hospitals, and the hospitals that can be visited differ depending on medical insurance.



On a day of our stay, we attended a morning conference of orthopedic surgeons. There we four participants presented our research. Many orthopedic surgeons from all over Bogota gathered early in the morning. The content of the conference was very meaningful, with a great deal of discussion. We are very interested in South American medicine, but we realized that Colombian doctors are interested in our medicine as well. This conference was a great inspiration for both of us.



Bogota ended with live salsa and dancing. I was surprised that a large bottle of tequila was emptied. We had delicious beer and Colombian food every day, and it was a very fulfilling stay. We would like to thank my hosts and fellowship officials for their hospitality.



APKASS SLARD Travel Fellowship in Chile

Our academic journey to Santiago, Chile, was a unique blend of knowledge sharing, learning, and cultural exchange. The trip was filled with numerous academic activities and social engagements that enhanced my understanding of the medical landscape in Chile.

One of the most enlightening experiences was our visit to the UC Christus Hospital under the guidance of Dr. Irarrazaval. Here, we engaged in an in-depth discussion on the complexities of cartilage defects, followed by a surgical demonstration that provided a lively exchange of ideas. This was complemented by a seminar on the



treatment of patella instability, further enriching my understanding of orthopaedic challenges and practices in different regions around the world.

The journey continued with a visit to Dr. Fontbote's Clinica MEDS, a state-of-the-art rehabilitation facility. With over 130 physiotherapists conducting more than 40,000 sessions monthly, the clinic is a shining example of dedicated rehabilitation for various sports injuries. The visit to Clinica MEDS was a testament to the advancements in sports medicine and rehabilitation practices in Santiago.



Another highlight was a seminar on knee instability led by Dr. Figueroa. This event saw the participation of over 100 knee surgeons from across Chile (both in person and virtually). The extensive discussion on the use of lateral extra-articular tenodesis for augmenting ACL injuries was a learning experience. Our APKASS team, represented



by Dr. Dai and Dr. Chiu, presented their opinions and surgical techniques, contributing to the overall discourse.

However, the trip was not all work and no play. Santiago was also the meeting point for the Asia-Pacific travelling fellows and our USA counterparts. We had a memorable time with Dr. Hannafin, Dr. Kremen, Dr. Ellis, and Dr. Athiviraham. Together with our Chilean hosts, we climbed the Andes on a Sunday morning, a thrilling experience that brought us closer to nature and each other.



We were also privileged to be invited to Dr Vaisman's home for lunch, where we savoured authentic Chilean cuisine. After our visits to the hospital, we had the opportunity to take a small hike up Santa Lucia Hill, offering a panoramic view of the city. The proximity of the hill to the UC Christus Hospital made it a convenient and enjoyable excursion. The trip concluded on a high note with a night BBQ at Dr.



Figueroa's home. The camaraderie and shared experiences of the trip made this a perfect ending to our journey.

In conclusion, the Santiago trip was an enriching blend of academic learning, cultural exchange, and networking. The insights gained from this trip will undoubtedly contribute to my professional development and broaden my perspective on global medical practices.

Argentina! And the SLARD meeting

As the final destination of the APKASS-SLARD Traveling Fellowship, Buenos Aires, the capital of Argentina, where we will attend the SLARD Annual Meeting and give presentations at the Traveling Fellows' session, is undoubtedly the most anticipated and exciting place of this visit. Having traveled over twenty thousand kilometers to reach the farthest country on Earth, we are eager to explore this exotic land of passion, homeland of Tango, and football mecca. The capital is full of European charm, with its name meaning "good air," indicating how wonderful the first impression was for the Spanish colonizers. The country is now experiencing drastic social transform and economic ups and downs, which also makes us, coming from the faraway East Asian cultural circle, more interested in getting closer and more personal with this country and its people.

Due to the storm, the flight was delayed by more than four hours, but the first impression upon arrival was the pleasant temperature and the dampness in the air, probably because the storm had just passed. That evening, we couldn't wait to feast on famous Argentina steak and red wine; for the record, one of our fellows Sei alone ate seven substantial steaks, showing his genuine love for beef.

The acronym SLARD stands for the Latin American Society for Arthroscopy, Joint Reconstruction, and Sports Trauma. Established in 1997, SLARD includes more than 20 countries and over 50 regional organizations, covering a vast geographical area



and representing cultural and socio-economic diversity.

The attendees of this congress meeting mainly came from various countries in the Latin American Spanish-speaking region, with nearly a thousand people in total, and major pharmaceutical and medical equipment exhibitors occupied the entire outdoor space of the venue. It was a surprise and delight to see a couple of Chinese sports medicine exhibitors around, reflecting their determination and capability to expand overseas. The venue was located in the sunken conference area of the Hilton Hotel, adjacent to the guest rooms, making it very convenient to come and go. There were four sub-venues and one main venue, with only one English-speaking venue, mainly featuring speakers from Europe and America.

Highlights of the content included debates on returning to sports after anterior cruciate ligament (ACL) surgery and improvements on how to reduce the failure rate after surgery, strategies for multidirectional instability of athletes' shoulders, and the application of new technologies such as biotherapy in the treatment of meniscal, cartilage, and ACL injuries and so on. No wonder, as a people that regards sports as a lifelong pleasure, the focus is always on how to return to life and sports after injuries and treatments.

Our Traveling Fellows' report session took place on the third day of the conference, starting with former traveling Godfather Dr. Gigante's opening report, "Why being a Traveling Fellow?" Although he spoke in Latin, we could discern that he emphasized the significance of the Traveling Fellowship program in cultural immersion, fostering friendships and mutual understanding, as well as academic exchange. This is precisely the purpose of our journey. Next was the American Traveling Godmother, Dr. Hannafin, who from a very unique perspective, told us about a profound yet sometimes imperceptible phenomenon: "How bias affects our judgment and actions." For instance, our own past experiences and knowledge, a



singular and lack of diverse environment, and a lack of interaction with the people we serve, all might contribute to the formation of biases. As the former chair of the AOSSM, and the first woman to hold this position, she informed us that according to an AAOS survey, that 94.2% of orthopedic members are male, and 85.9% are white, which could potentially lead to racial or gender diversity biases. Biases can be unconscious but can affect patient care, student education, and research outcomes. Therefore, it is necessary to always remind ourselves to avoid stereotypical thinking, to reflect on ourselves frequently, and to be open to changes, to different walks of life. Her report was very profound and provocative, for every doctor and medical student. In the following report, Traveling Godfather Dr. Dai gave a presentation on how to treat massive rotator cuff tears with patch graft and all traveling fellows had their presentations at the session.



The conference was a well-arranged one. Firstly, session starts with several keynote speakers, each speaking on a relevant topic, then followed by the moderator introducing several clinical cases, and all keynote speakers engage in a discussion, sharing their experiences and viewpoints. As an international conference, punctuality is also very important. To ensure this, each venue prepares two podiums, making it convenient for the next speaker to wait at another podium while one is speaking, without wasting the time. This punctuality at such a high-end medical conference contrasts sharply with the more casual and less punctual nature of everyday South Americans.



During the brief breaks in the conference, we also took the opportunity to watch Tango performances, dance dramas, and football matches. The huge visual impact comes from the ubiquitous and extremely colorful graffiti on the streets of Argentina, such as in the La Boca district, San Telmo, Plaza de Mayo, etc. The entire city is full of color, and Argentines, or rather South Americans, are very warm and outgoing, fond of conversing and socializing. Elements of sports and arts are everywhere and are an indispensable part of their daily lives.





In summary, this visit lasted 18 days and was attended by four doctors, selected from Mainland China, Hong Kong, Taiwan, and Japan. The countries and cities visited were all central cities, including Querétaro in Mexico, Bogotá in Colombia, Santiago in Chile, and Buenos Aires in Argentina. The hospitals visited were the best private hospitals specializing in sports medicine, attracting the best sports medicine doctors over the countries. According to the local doctors, private hospitals here generally accept commercial insurance, and most items are not covered by national health insurance. This means that only a minority in each country can receive high-level services from private hospitals, with a proportion of about 10%-20%. Economic development in South American countries is also very uneven; Bolivia, Venezuela, Ecuador, Paraguay, and others are relatively weaker, with doctors going to Chile, Mexico, and Colombia every year for further studies and degrees. Large public hospitals in these countries are operated by state investment, mainly focusing on public welfare and inclusiveness, but the efficiency is very low, and the income of medical staff is also very low. Doctors at private hospitals have mostly received good education from western countries, decent dressing, nice English, knowledgeable and skilled at some state-of-arts surgical procedures. Of course, this impression also has the issue of bias, but such visits allow us to see the diversity of the world, the vitality of the South American continent, and its future possibilities.



We are grateful for the valuable opportunities and every moment provided by APKASS and local hosts, and hope that the Traveling Fellows program will benefit more doctors in the Asia-Pacific region. We also send our best wishes to every land we have set foot on and every person we have met.



