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Qu'en est-il des droits d'inscription à la Réunion annuelle?

- **Les membres associés ne payent aucuns droits d'inscription à la Réunion annuelle.**
- L'inscription sera donc gratuite si elle est faite avant la date limite prescrite pour la préinscription. Les droits d'inscription sur place resteront toutefois en vigueur pour toutes les catégories d'adhésion.
- Vous pourrez vous procurer des billets pour les conférences d'enseignement, les ateliers, les activités sociales et les activités du programme des invités au prix indiqué dans la demande d'inscription.

Quels sont les autres avantages de mon adhésion?

- **Communications et accès aux formations**
- Les membres associés bénéficient du **plein accès** au *Bulletin* et à la *Dépêche* de l'ACO, au *Bone & Joint Journal*, à *Bone & Joint 360*, à [www.myorthovidence.com](http://www.myorthovidence.com), aux webdiffusions et au Portail communautaire, **au même titre que les membres actifs**. Ces avantages sont détaillés précédemment.
- **Formations et activités à l'intention des résidents**
- Être membre de l'ACO vous donne accès au Calgary Orthopaedic Review Forum (**CORF**), le cours de préparation et de révision offert aux résidents de cinquième année en vue de l'examen annuel.
- La Réunion annuelle de l'Association canadienne des résidents en orthopédie (**ACRO**) a commodément lieu un jour avant celle de l'ACO, de sorte que les résidents peuvent assister à ces deux manifestations éducatives de premier plan gratuitement.

- **Possibilités de leadership**

- Un nombre croissant de comités de l'ACO réservent des places aux résidents.

#### Membres outre-mer

La cotisation annuelle des membres outre-mer **augmentera légèrement**; elle sera en effet de **350 \$CAN** pour les orthopédistes qui exercent à l'étranger. **Ils doivent aussi payer les droits d'inscription à la Réunion annuelle**, qui demeureront sensiblement les mêmes.

#### Membres à la retraite et affiliés du milieu de la recherche

Les droits et avantages liés à ces deux catégories d'adhésion sont inchangés. **Aucune cotisation annuelle** n'est exigée pour ces catégories de membres, qui doivent néanmoins **continuer de payer les droits d'inscription** à la Réunion annuelle de l'ACO. Les droits d'inscription demeureront sensiblement les mêmes.

Si vous avez des questions sur la nouvelle structure tarifaire applicable aux membres actifs ou souhaitez en savoir davantage sur vos avantages en tant que membre de l'ACO, veuillez communiquer avec Doug Thomson, à [doug@canorth.org](mailto:doug@canorth.org). Sachez que nous espérons continuer d'ajouter de la valeur à votre engagement envers l'ACO.

## Seeking Adventure and Giving Back Getting to Know your COA Global Surgery Committee

**T**he COA Global Surgery (COAGS) initiative brings Canadian orthopaedic surgeons together to share ideas and promote opportunities for providing humanitarian care to vulnerable populations. COAGS invites you to get to know the committee and some of the projects they are proud to support. The spotlight in this issue is on two COAGS Executive members, Dr. Peter O'Brien and Dr. Paul Moroz.

**Dr. Peter O'Brien** is an orthopaedic trauma surgeon and Head of the Division of Orthopaedic Trauma at the Vancouver General and University of British Columbia (UBC) Hospitals. He is an Associate Professor at UBC and serves as Deputy Head of the Department of Orthopaedics. He has served on the Board and multiple committees for both the COA and the Orthopaedic Trauma Association (OTA), as well as being a Past President of the COA. Peter's research includes a number of projects at the Centre for Hip Health and Mobility studying orthopaedic care in low and middle income countries (LMIC), including the sterile drill cover project. Dr. O'Brien has been involved with the Canadian Orthopaedic Trauma Society in adult orthopaedic trauma multi-centre clinical trials and is cur-

rently Co-Principal Investigator for the Canadian Far Cortical Locking Multi-centre Prospective Randomized Trial.

The Uganda Sustainable Trauma Orthopaedic Program (USTOP) emerged in 2006 when Dr. O'Brien joined forces with Dr. Piotr Blachut, recognizing that Uganda suffers one of the highest rates of traumatic injury in the world (largely due to motor vehicle collisions), coupled with very limited human health resources and supplies to manage the overwhelming burden of injury. Given that most injuries occur in young men and women, short-term and permanent disabilities have a ripple effect on families' wellbeing, often forcing young children to work instead of attending school.

The partnership between UBC Faculty of Medicine and Makerere University in Kampala aims to collaboratively and sustainably improve fracture care education for local surgical residents and allied health care workers through workshops, seminars and clinical teaching. The multidisciplinary USTOP team, including Peter, travels to Kampala twice annually since its inception. He describes each trip as challenging and dynamic, offering

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USTOP 2013 team of attending surgeons, residents, nurses and physiotherapists with Ugandan colleagues.

new skills and friendships along the way: "If you like adventure and something that is entirely different, you cannot help but enjoy this type of experience. I have met wonderful people in Uganda, both health-care workers and patients. It is truly a privilege to be associated with the fine group of individuals that make up the team of Canadians travelling to Africa."

When asked what advice he would offer to a colleague just beginning their foray into international outreach, Dr. O'Brien says the key is to avoid imposing first world standards in the developing world, and instead to develop a relationship with local health care providers, offering help in the context of available resources. Staff on the ground require sustained training in Advanced Trauma Life Support protocols for assessment and treatment of polytrauma, therefore commitment to working with a group over a number of years is more effective than a single visit.

If you're wondering whether USTOP is a good fit for your interests, Dr. O'Brien advises that any orthopaedic surgeon, throughout their career trajectory who does trauma or emergency call, will be able to contribute to this project. For more information about USTOP, please visit [ustop.orthopaedics.med.ubc.ca](http://ustop.orthopaedics.med.ubc.ca) or contact Nathan O'Hara at [nathan.ohara@vch.ca](mailto:nathan.ohara@vch.ca) or 604-875-4111 x 66270.



Sister Mary Margaret Ajiko, a general surgeon from Soroti Regional Referral Hospital in northeastern Uganda, participates in a biannual USTOP bioskills course.

**Dr. Paul Moroz** is a paediatric orthopaedic surgeon at the Children's Hospital of Eastern Ontario (CHEO) and Assistant Professor of Surgery at the University of Ottawa. Paul took an interest in global health from the start of his career, working with Canadian Crossroads International during his undergrad, studying breathing problems in Western Arctic children during his Masters in Epidemiology, and spending six months in Nepal during medical school (instead of the forecasted four weeks - long story!). During residency he again worked in Nepal and India, and after his first fellowship, took his entire young family to Bhutan for three months with Orthopedics Overseas, while working in a community hospital in Owen Sound, Ontario.

After a second fellowship in paediatric orthopaedics, Paul and his family moved to Ottawa, where he developed global surgery into one of his major academic interests. He serves on the University of Ottawa Faculty of Medicine's Global Health Advisory Council and is Co-Chair of Global Health at CHEO. He published in the Canadian Journal of Surgery the findings of a 2011 cross-Canada survey identifying barriers to surgical residents participating in international electives. Orthopaedic and general surgery resident respondents were keen to participate in global surgery projects, but perceived barriers included lack of financial support, lack of available organized activities, and fear of using up precious elective time. A full 50% of respondents stated that a residency program promoting international electives would be a positive factor in selecting a program.

Dr. Moroz has spent more than 15 years working periodically overseas with the Canadian Network for International Surgery (CNIS), which is especially active in East Africa, teaching surgical skills to African clinical officers, medical students, and residents. This work has been very fulfilling and Paul believes the CNIS is a great way for Canadian orthopaedic surgeons to get involved in global surgery, especially related to education. For more information about CNIS, please visit [www.cnis.ca](http://www.cnis.ca). For more hands-on operative experience, Dr. Moroz volunteers with Health Volunteer Overseas (HVO - the updated name for

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Orthopedics Overseas) in Bhutan in South Asia. HVO partners with a number of countries all over the world (see their excellent web site at [www.hvousing.org](http://www.hvousing.org)).

He also works as an expert consultant with the World Health Organization Global Initiative for Emergency and Essential Surgical Care (WHO-GIEESC), where he is Vice-Chair of the Committee for Training and Education. This committee is currently working to revise one of the primary basic surgical manuals used in rural developing countries, "Surgical Care at the District Hospital – The WHO Manual".

With respect to research in global surgery, Paul is very involved with Dr. Mohit Bhandari's world-wide research initiative, the International Orthopaedic Multi-centre Study of Fracture Care, ("INORMUS"), a landmark observational cohort study of more than 50,000 patients in low and middle income countries who have sustained fractures and/or dislocations. The goal is to better understand the burden of orthopaedic trauma in the developing world where the impact of orthopaedic injuries on hospital systems have become more recognized, mostly on account of motor vehicle collisions. Paul is the Principal Investigator for the African continent arm of INORMUS where he uses his many contacts in Africa to recruit centers for INORMUS.



*The practice of dung-wrapped fractures still exists in rural Bhutan, Nepal and Northern India among traditional bone-setters.*



*Dr. Paul Moroz treating one of the Holy Reincarnates of the Shabdrun (the child in the baseball cap) from Bhutan for a repeat fracture of his forearm from rough playing, and taking on the unwanted job of explaining to the family that the child needs to settle down.*

Dr. Moroz is interested in expanding opportunities to his orthopaedic colleagues during his work as the Chair of the newly-formed COAGS Committee. COAGS aims to provide a "virtual place" where COA members can learn more about opportunities to get involved in global health, whether it is working in Canada to support global health, with high-level organizations such as the WHO or UN, or at surgical sites in developing countries or disaster zones. COAGS will be a hub for information-sharing, networking and connecting people to the many excellent programs, organizations, and NGO's around the world where surgeons can serve.

COAGS is in its early stages and the Executive welcomes membership feedback regarding the initiative's development. For more information or to reach a COAGS Committee member, please contact Trinity Wittman at [trinity@canorth.org](mailto:trinity@canorth.org) or 514-874-9003 x 2.