**Bursary Report for the British Association of Hand Therapists**

**Chloë Kirk**

**14th IFSSH and 11th IFSHT combined FESSH Congress**

**17th-21st June 2019**

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| **Introduction:** (100 words max; include details of who you are, why you applied for this bursary and your experience of the event)I am a Senior Physiotherapist at the Pulvertaft Hand Centre, Derby and a Senior Rheumatology Clinical Educator in undergraduate medical education. I became an accredited hand therapist and joined the BAHT education committee in 2018.I applied for the bursary as I had been invited to present our centres Extensor tendon rehabilitation audit and our experience of relative motion splinting in the session titled Extensor Tendon Management Zones III-VII of the fingers: Trends, tips, tricks and useful interventions.International congress was insightful and enlightening showcasing current surgical and therapeutic research, evidence, concepts, outcomes, ideas and future directions in practice.  |
| **Topic:**(500 words +/- 10%; this will be uploaded onto the BAHT website and may be included in an e-bulletin. The topic of this report will be agreed in negation with the Director of Bursaries. The report should not contain any comments that are potentially damaging or libellous.)I was fortunate to attend the 14th International Federation of Societies of Surgery of the Hand (IFSSH) and 11th International Federation of Societies for Hand Therapy (IFSHT) combined [Federation of European Societies for Surgery of the Hand](https://www.emedevents.com/organizer-profile/federation-of-european-societies-for-surgery-of-the-hand-fessh)(FESSH) Congress in Berlin in June 2019. This five day conference gave an opportunity to hear from, meet and discuss hand healthcare practice with worldwide surgeon and therapist experts from clinical, research and education backgrounds. There were 4002 Delegates - 65% surgeons, 15% Therapists. The congress had 1,812 abstracts submitted and 1,730 accepted. The format of the congress was podium presentations that were happening concurrently across many topics and themes, this amounted to 1501 presentations (75% free papers, 21% invited speakers, 1% combined sessions). There was also electronic poster presentations to view at any time.The main themes and presentation I attended were covering tendon surgery and rehabilitation, wrist management, complex regional pain syndrome, practical application of research and evidence along with a wide variety of free paper topics.All surgical techniques appear to be improving and the options advancing. Therefore this is allowing for an overall direction for our therapy of move more, move earlier, with less protection. This has been definitely the case with flexor tendon repairs where shorter or lower profile splints are being used, relative motion splinting is being considered and trialled. The balance between promoting the best outcome of full movement with the quickest function and work against the risks of rupture and scar/ healing problems where debated and experience shared.There was a large focus of the need for more evidence and quality of outcome information especially using patient rated outcome measures, function and pain and promoting early return to work. A Therapy session titled ‘Therapy in 20219: Is less more?’ discussed the link of adherence to quality outcomes and patient experience. Creative ways to manage individual patients as well as services in difference world contexts was presented. Learning from therapists who work in less developed hand practice counties gave great insight of how to be innovative, use technology and keep practice affordable. I was honoured to be asked to present alongside an expert panel in a mixed therapy/ surgeon session. It was slightly overwhelming standing on the podium in front of 100s of delegates. I was proud to show even a grass roots therapist leading a small audit, like me, had the opportunity to share their practice and hopefully inspire others to do the same. I presented our units audit that changed practice in extensor tendon repair rehabilitation from early active motion to a relative motion splint regime, demonstrating improved range of movement, strength and return to work outcomes. I also had the opportunity to present 3 patients and our tips and tricky on using relative motion.The importance of learning from clinician discussions, single case studies, audits, to huge research projects alongside building a network of support is my take home message from the congress. All the knowledge I have gained I plan to apply to my practice and I have and will continue to disseminate to my teams, colleagues and students. It’s inspiring to hear of those small successes with a patient due to an innovative approach to the success of whole pathway reorganisation. I encourage any Hand therapist to seek the opportunity to attend international congress, there is one in London in 2022, so start thinking and planning your abstract soon! |