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Rupert Eckersley, Consultant Orthopaedic and Hand and Wrist Surgeon, Chelsea and Westminster Hospital, London
Alistair Reed, ST6 Plastic Surgery Registrar, John Radcliffe Hospital, Oxford
James Dinley, Hand therapist, Ysbyty Cwm Cynon Hospital, South Wales

Building on the success of previous years, the BSSH/BFIRST 2024 co-sponsored ALERT International Hand Trauma Workshop was another resounding success. Experienced visitors Neil Cahoon and Rupert Eckersley were joined by first-timers Alistair Reed and hand therapist, James (Jim) Dinley. The inclusion of Hand Therapy for the first time provided a new opportunity to explain what therapy can achieve pre- and post-surgery.

After settling-in on Monday the team met with senior consultant Dr Abraham over dinner to discuss plans for the weeks including the cadaveric dissection course which would run for a full day for the first time.

Day one of the course saw around 25 plastic and orthopaedic residents, consultants and hand therapists gather at ALERT Hospital for a day of interactive lectures (Fig. 1 and 2) and group discussions on common hand trauma conditions including principles of hand examination, management of extensor and flexor tendon injuries including rehabilitation, compartment syndrome, replantation, mangled hand, and carpal injuries. After lunch and coffee in the hospital grounds, the afternoon kicked off with ALERT consultant, Dr Endale, providing an excellent lecture on soft tissue management of upper limb injuries highlighting the versatility of pedicled flaps including radial forearm, PIA, Becker, lateral arm, groin and abdominal flaps. This was followed by two clinical cases who were awaiting surgery at ALERT Hospital. The first adult with complex hand contractures following previous Panga (Machete) injury to the wrist with median/ulnar nerve injury and multiple tendon injuries, including previously unreconstructed extensor tendons. The second was a young adult with unilateral congenital elbow contracture.

Day two saw the ever-popular cadaveric dissection course take place at a new venue – St. Paul's Hospital (Fig. 3, 4 and 5). Based on feedback from the previous year, the course was extended from a half to a full day. Trainees were split into three groups and consultants Neil Cahoon, Rupert Eckersley and Dr Abraham kicked off with demonstrations covering multiple aspects of hand/upper limb trauma surgery including local (cross finger, thenar, homodigital island, Foucher, Moberg, Quaba), regional flaps (lateral arm, PIA, RFF, Becker), common approaches to the fingers/hand/wrist/distal radius, and brachial plexus exploration. After a team lunch (Fig. 6) and more coffee, the afternoon consisted of supervised dissection, allowing the residents the chance to practice their skills. With a developing microvascular service at ALERT hospital, trainees were also keen to learn how to raise workhorse free-flaps including gracilis and ALT.

Meanwhile, Jim took the opportunity to meet with the hand therapists at ALERT hospital and provided some teaching sessions focusing on tendon repairs, management of fractures,

scar management and splinting. He delivered some joint treatment sessions for several patients, including one adult who presented with multiple flexible tendon and nerve repair. Jim had already established links with the Department ahead of the trip, including sharing protocols used at Swansea Bay Hand Therapy Burns and Plastics unit. Going forward, Jim hopes to maintain links with the therapists at ALERT hospital.

The day ended with a trip to one of the famous Tomoca Coffee shops, and the chance to stock up on beans from the 'home of coffee' (Fig. 7).

After an impromptu walk through an orthodox Christian festival (due to road closures) (Fig. 8) the third and final day included further lectures on adult and paediatric hand fractures, distal radius fractures, peripheral nerve and brachial plexus injuries. With many of residents approaching their final exams, the last part of the course consisted of common clinical cases providing the opportunity to demonstrate and test their understanding. Finally, the course ended with certificates and the opportunity to discuss plans for the next course.

Feedback was received via a printed evaluation forms with additional free text comments by the residents. All presentations scored good or excellent in content, relevance and delivery. The main feedback comments were regarding more availability for cadaveric free dissection by residents as well as more live patients and small group discussions.

As always, we would like to thank our hosts Dr Abraham Gegziabher, Dr Atakiltie Baraki, Dr Endale Kefale and Dr Nardos Tedla for their teaching on the course and kind hospitality as well as the other seniors, residents and hand therapists for their enthusiasm and engagement.

Course Format

Day 1

8.30	REGISTRATION	
9:00	Welcome Remarks an Introduction to the Course	AG/NC
9:10	Principles of Hand Examination	AR
9:30	Management of Flexor Tendon Injuries	NC/JD
10:15	Management of Extensor Tendon Injuries	NC
11:00	Compartment Syndrome/replants/mangled hand	AR
12:00	Soft Tissue Reconstruction in the upper Limb	EK

13:00 – 14:15 **Lunch**

14:15 – 15:30 Scaphoid Fractures & Acute Carpal dislocations RE

15:30 – 17:00 Clinical Patients & Case Discussion all

Day 2

09:00 – 17:00 Cadaveric Dissection at St Paul's Hospital

Day 3

9:00 Management of Hand Fractures NC

10:00 Paediatric Fractures RE

11:00 Principles & Diagnosis of Nerve Injury
Nerve Repair & Grafting NT

12:00 Brachial Plexus Injury **AG**

13:00 – 14:15 **Lunch**

14:15 – 15:30 Distal Radius Fractures local

15:30 – 16:30 Clinical Patients & Case Discussion all

16:30 – 17:00 Feedback and certificates all

AG - Abraham Gegziabher, AR - Alistair Reed, EK – Endale Kefale, JD – James Dinley, NC - Neil Cahoon, RE - Rupert Eckersley, NT – Nardos Tedla

Figures

Figures 1 and 2. Jim Dinley and Neil Cahoon cover flexor tendon rehab and extensor tendon injuries at ALERT Hospital, Addis Ababa, Ethiopia



Figure 3. The view of Addis from the plastic surgery department at St Paul's



Figure 4 and 5. Neil Cahoon and Abraham Gegziabher demonstrating local flaps in the hand and brachial plexus exploration (respectively) at St Paul's



Figure 6. Team lunch and a chance to plan the afternoon plans in the dissection lab



Figure 7. Coffee at Tomoca's and a chance to unwind.



Figure 8. Local festivities en route to ALERT Hospital

