FORTHCOMING MEETINGS AND COURSES

Announcements for this section should be submitted in the correct format, at least 3 months before the required date of publication. This list is provided as a service to readers; inclusion does not imply endorsement by the Journal.

Medical Education and Training in Europe
October 1–2, 1992 – London
Dr M. W. N. Nicholls, Chairman - Organizing Committee, Fellowship of Postgraduate Medicine, 6 St Andrew’s Place, London NW1 4LB, England

ISSCP -- Fifth Annual International Symposium on Custom Prostheses
October 1–3, 1992 – Windsor, UK
Jessie Smart, Department of Biomedical Engineering, Institute of Orthopaedics, Royal National Orthopaedic Hospital Trust, Stanmore, Middlesex HA7 4LP, England

The Nottingham Knee Meeting
October 9–10, 1992 – Nottingham
Mrs Doreen Beesley, The Course Secretary, Harlow Wood Orthopaedic Hospital, Nr. Mansfield, Nottinghamshire NG18 4TH, England

11th Congress of Sports Medicine of the A.Z. St.-Jan
October 16–17, 1992 – Brugge
Sekretariat Sportgeneeskundige Dagen, A.Z. Sint-Jan, Ruddershove 10 - B-8000 Brugge, Belgium

Meeting of the German Speaking Arthroscopy Associations
October 16–17, 1992 – Bern
C/o AKM Congress Service, Clarastrasse 57, Postfach, CH-4005, Basel, Switzerland

Implant Surgery for the Hand, Upper Extremity, and Foot: The Grand Rapids 22nd Annual International Symposium
October 22–24, 1992 – Grand Rapids, Michigan
G. Swanson, MD, Course Coordinator, 1900 Wealthy, S.E. - Suite #290, Grand Rapids, Michigan 49506, USA

Society for Back Pain Research
October 30, 1992 – London, UK
Jacqui Robertshaw, 30 Queen Street, Huddersfield HD1 2SP, England

Inaugural Meeting of the European Paediatric Gait Analysis Group
October 30–31, 1992 – Oswestry
Mrs Erica Wilkinson, Symposium Secretary, The Robert Jones and Agnes Hunt Orthopaedic and District Hospital, Oswestry, Shropshire SY10 7AG, UK

Course on Radiology of Bones and Joints
November 4–6, 1992 – London
Ms Ann Lucas, Postgraduate Secretary, Institute of Orthopaedics, The Middlesex Hospital, Mortimer Street, London W1N 8AA, England

Limb Lengthening with Special Reference to Hip Dysplasia and Club Foot Deformities: 4th Instructional Course
November 4–6, 1992 – London
Ms Claire Stevens, Room E63, Stephenson Building, Children’s Hospital, Western Bank, Sheffield S10 2TH, England

Society for Back Pain Research: Annual General Meeting
November 6, 1992 – London
Mrs J. Reynolds, Society for Back Pain Research, 309 Bawtry Road, Bessacarr, Doncaster DN4 7PA, England

British Cervical Spine Society Meeting
(Abstracts by September 25th, 1992)
November 6–7, 1992 – Cumbria
Mr C. Davis, Consultant Neurosurgeon, Royal Preston Hospital, Sharoe Green Lane, Preston PR2 4HT, England

Satellite Symposium to the 6th Congress of the International Child Neurology Association on ‘State of the Art in Neuro Orthopaedics’
November 6–8, 1992 – Buenos Aires
Dr Gregorio Arendar, Pje. Florencio Balcarce 46, 3rd floor, 1045 - Buenos Aires, Argentina

Conference on Textiles in Medicine and Surgery II
November 10–11, 1992 – Manchester
Further details from CET office: (UK) 061 200 3995

ORTHOCON ’92: 3rd Kovai International Conference on Orthopaedics and Trauma
November 13–15, 1992 – Coimbatore, India
V. Ramesh, Congress Secretariat, ORTHOCON ’92, Kovai Medical Center, Coimbatore, 641014, India

Advances in Practical Arthroscopic Surgery: One Day Course
November 14, 1992 – Droitwich (Wors), UK
Mrs S. Warren, Droitwich Knee Clinic, St Andrews Road, Droitwich, Worcs WR9 8EA, UK

Practical Arthroscopic Surgery: One Day Course
November 15, 1992 – Droitwich (Wors), UK
Mrs S. Warren, Droitwich Knee Clinic, St Andrews Road, Droitwich, Worcs WR9 8EA, UK

Hong Kong Orthopaedic Association: 12th Annual Congress
November 14–15, 1992 – Hong Kong
Dr P. Y. Lau, Consultant Orthopaedic Surgeon, United Christian Hospital, 130 Hip Wo Street, Kowloon, Hong Kong

British Orthopaedic Foot Surgery Society
November 19–20, 1992 – Stanmore, UK
Professor L. Klenerman, University Department of Orthopaedics, Royal Liverpool Hospital, Liverpool L69 3BX, UK
The Torn Anterior Cruciate Ligament and Related Problems
November 19–20, 1992 – Windsor, UK
Mr R. L. Allum, Consultant Orthopaedic Surgeon, Heatherwood Hospital, London Road, Ascot, Berkshire SL5 8AA, England

Pakistan Orthopaedic Association: 7th National Meeting
November 21–22, 1992 – Lahore
Professor Naseer Mahmood Akhtar, ORTH-CON-92, Conference Secretariat, PO Box 760, Lahore, Pakistan

Biomedical Engineering: 7th International Conference
December 2–4, 1992 – Singapore
The Secretary, 7th ICBME, 1992, Department of Orthopaedic Surgery, National University Hospital, 5 Lower Kent Ridge Road, Singapore 0511, Republic of Singapore

XXVIII Congrès de la Société Française de Chirurgie de la Main
December 2–5, 1992 – Montpellier
Michel Merle, 5 Allée des Roches, 5400 Nancy, France

American Academy of Neurological and Orthopaedic Surgery: 16th Annual Convention
December 8–13, 1992 – Las Vegas
Dr Michael R. Rask, 2320 Rancho Drive, Suite 108, Las Vegas, Nevada 89102-4592, USA

The International Society for Simulation Surgery: the Inaugural Congress
December 9–11, 1992 – Tokyo
Dr Hideo Nakajima, General Secretary, The Inaugural Congress of the International Society for Simulation Surgery, Department of Plastic and Reconstructive Surgery, Keio University Hospital, 35 Shianomachi, Shinjukuku, Tokyo 160, Japan

Current Concepts in Joint Replacement
December 17–19, 1992 – Orlando
Dr A. Seth Greenwald, Mt Sinai Medical Center, Department of Orthopaedic Research, One Mt Sinai Drive, Cleveland, Ohio 44106, USA

Association of Spine Surgeons of India, International Update Symposium on 'Spinal Trauma'
December 17–20, 1992 – New Delhi
Professor P. K. Dave, Department of Orthopaedics, All India Institute of Medical Sciences, New Delhi 110 029, India or Dr V. T. Ingalhalikar, Secretary Assi, Aditya Nursing Home, Gokhale Road, Thane (W), Maharashtra 400601, India

Society for Back Pain Research
March 5, 1993 – Manchester, UK
Jacqui Robertshaw, 30 Queen Street, Huddersfield HD1 2SF, England

Instructional Course in Hand Surgery
March 8–13, 1993 – Edinburgh
Edinburgh Postgraduate Board for Medicine, Pfizer Foundation, Hill Square, Edinburgh, Scotland

Management of Patients with Low Back Pain: International Symposium
March 11–13, 1993 – Münster, Germany
Dr W. H. M. Castro, Orthopaedic Department, University of Münster, Albert-Schweitzer-Strasse 33, D-4400 Münster, Germany

First leg of the Combined South African/American Hand Congress
March 15–17, 1993 – Sun City, RSA
Hendrika van der Merwe, Administrative Secretary, SA Society for Surgery of the Hand, PO Box 2721, Bellville, South Africa 7535

German Society for Osteology: 8th Annual Meeting
March 18–20, 1993 – Bonn
Dr Andreas Heuck/Dr Martin Vahliensiek, Radiologische Klinik der Universität, Sigmund-Freud-Strasse 25, D-5300 Bonn 1, Germany

Second leg of the Combined South African/American Hand Congress
March 22–23, 1993 – Cape Town
Hendrika van der Merwe, Administrative Secretary, SA Society for Surgery of the Hand, PO Box 2721, Bellville, South Africa 7535

Japanese Orthopaedic Association: 66th Annual Meeting
(Abstracts by September 10th, 1992)
April 9–11, 1993 – Kobe City
Dr K. Ono, President, Department of Orthopaedic Surgery, Osaka University Medical School, Fukushima 1-1-50, Fukushima-ku, Osaka 553, Japan

Seventh British Knee Instability Course
April 20–23, 1993 – Oswestry
Mrs Erica Wilkinson, Symposium Secretary, The Robert Jones and Agnes Hunt Orthopaedic and District Hospital, Oswestry, Shropshire SY10 7AG, UK

First European Congress of Orthopaedic Surgery
April 21–24, 1993 – Paris
Convergences, 120 avenue Gambetta, 95020 Paris, France

Fifth Annual Symposium on Clinical Disorders of Bone and Mineral Metabolism
May 16–21, 1993 – Detroit
Symposium Organiser: Roberta Silver, Center for Bio-Medical Communication Inc, 80 West Madison Avenue, Dumont, NJ 07628, USA

Third British Course on Revision Surgery
June 3–5, 1993 – Stratford upon Avon
Third British Course on Revision Surgery, 69 Barton Road, Cambridge CB3 9LG, UK

1993

Ninth International Jerusalem Symposium on Sports Medicine
January 11–12, 1993 – Jerusalem
Dr Gideon Mann, Department of Orthopaedics, Unit of Sports Medicine, Hadassah University Hospital, Mount Scopus, Jerusalem 91240, Israel

"Pain in a Changing Society". Australian Pain Society: 14th Annual Scientific Meeting
February 16–19, 1993 – Melbourne
Dianna Crebbin Conferences, PO Box 629, Willoughby, New South Wales 2068, Australia
Eighth Spinal Update Symposium
June 9–11, 1993 – Oswestry
Mrs Erica Wilkinson, Symposium Secretary, The Robert Jones and Agnes Hunt Orthopaedic and District Hospital, Oswestry, Shropshire SY10 7AG, UK

European Rheumatoid Arthritis Surgical Society: 7th Congress
June 9–12, 1993 – Oslo
Dr J. A. Pahle, Organizing Committee, Oslo Sanitetsforening Rheumatism Hospital, Akersbakken 27, N-0172 Oslo, Norway

European Society for Surgery of the Shoulder and the Elbow: 7th Congress
June 10–12, 1993 – Aarhus
Secretariat, Orthopaedic Hospital, Randersvej 1, DK-8200 Aarhus N., Denmark

International Society for the Study of the Lumbar Spine
(Abstracts by November 15th, 1992)
June 15-19, 1993 – Marseille
Dr James Weinstein, Sunnybrook Medical Centre, Room A309, 2075 Bayview Avenue, Toronto, Canada M4N 3M5

Second International Symposium on 3-D Analysis of Human Movement
(Abstracts by February 1st, 1993)
June 30–July 3, 1993 – Paris
Dr Paul Allard, Permanent Secretariat, International Symposium on 3-D Human Movement Analysis, Centre de Recherche, Hôpital Sainte-Justine, 3175 Côte Ste-Catherine, Montréal, Canada H3T 1C5

XVIIIth ILAR Congress of Rheumatology
(Abstracts by November 30th, 1993)
July 4–10, 1993 – Barcelona
Viajes Iberia Congresos, Diagonal 523, 08029 Barcelona, Spain

SICOT Pre-Congress 1993 and the 15th Meeting of the Thai Orthopaedic Association
August 24–26, 1993 – Bangkok
Secretariat Office: Chusakdi Suwansirikul, MD, The Thai Orthopaedic Association, 94/2 Supavadee Tower, 100, Soi Mitanant, Nakornchaisri Road, Dusit, Bangkok 10300, Thailand

SICOT 93 Seoul: 19th World Congress
August 28–September 3, 1993 – Seoul
SICOT 93 Seoul Secretariat. c/o Korea Exhibition Center, KWTC PO Box 4, Seoul 135-650, Korea

British Orthopaedic Association: Autumn Scientific Meeting
September 13–15, 1993 – Torquay
British Orthopaedic Association, 35-43 Lincoln’s Inn Fields, London WC2A 3PN, England

American Academy of Neurological and Orthopaedic Surgery: 17th Annual Convention
December 7–12, 1993 – Las Vegas
Dr Michael R. Rask, 2320 Rancho Drive, Suite 108, Las Vegas, Nevada 89102-4592, USA

Current Concepts in Joint Replacement
December 16–18, 1993 – Orlando
Dr A. Seth Greenwald, Mt Sinai Medical Center, Department of Orthopaedic Research, One Mt Sinai Drive, Cleveland, Ohio 44106, USA

1994

British, Dutch and Scandinavian Orthopaedic Associations: Combined Meeting
April 13–14, 1994 – London
British Orthopaedic Association, 35-43 Lincoln’s Inn Fields, London WC2A 3PN, England

Detailed advertisements for other meetings and courses, and for senior posts in orthopaedics, will be found in the next section of the Journal.
International Medical Course

Advances in children’s orthopaedics

21 – 27 March 1993, Edinburgh

The aim of this course is to review current management of, and to present recent advances in, children’s orthopaedic surgery. It follows the successful courses held in Edinburgh in 1982, 1984, 1986 and 1988. It will be under the direction of Mr M F Macnicol, Consultant Orthopaedic Surgeon, Princess Margaret Rose Orthopaedic Hospital, Edinburgh.

The course is intended for orthopaedic surgeons with an interest in children’s orthopaedics and will incorporate clinical presentations, seminars and practical sessions.

There are vacancies for 30 participants

Course fee: £715; accommodation charge: £475; total fee: £1190

Working sessions will take place at the Princess Margaret Rose Orthopaedic Hospital, and Symposium Hall, Royal College of Surgeons of Edinburgh. Resident participants will be accommodated in single rooms with private bathroom or shower in a city centre hotel.

Further information and application forms are available from your local British Council office or from Courses Department, The British Council, 10 Spring Gardens, London SW1A 2BN

BRITISH SOCIETY FOR SURGERY OF THE HAND

Instructional Course:–

WEDNESDAY 4 NOVEMBER 1992-LONDON

Congenital Hand Deformities

Classification
Mr S L Knight (Leeds)

Anatomy
Professor D A McGrouther (London)

Aims and treatment
Mr P J Smith (London)

Examination and Assessment of the Child
Mr S L Knight (Leeds)

Handling the Parents
Professor D A McGrouther (London)

Thumb Hypoplasia
Mr P J Smith (London)

Syndactyly
Mr S L Watson (Manchester)

Duplication and Other Common Problems
Mr S L Knight (Leeds)

The Problem Wrist

Introduction to the problem of the unstable and chronically painful wrist
Mr J K Stanley (Wrightington)

Biomechanics of the normal and injured wrist
Mr R A Evans (Liverpool)

The interpretations of x-rays of the injured wrist
Mr J J Dias (Leicester)

The special problems of non-union and mal-union of the scaphoid and the SLAC wrist
Mr J J Dias (Leicester)

The principles of the treatment of the complex wrist fracture
Mr J J Dias (Leicester)

Arthroscopy of the wrist
Mr J K Stanley (Wrightington)

Panel discussion and presentation of clinical problems.

For further details, please contact the British Society for Surgery of the Hand, The Royal College of Surgeons, 35-43 Lincoln’s Inn Fields, London WC2A 3PN.

Tel: 071 831 5161/2. Fax: 171 831 4041.

The Role of Imaging in the Management of Spinal Cord Injuries

Tuesday 24th November 1992

This one day course is run jointly by the National Spinal Injuries Centre and the Department of Radiology of Stoke Mandeville Hospital

Course Fee is £85.00 including coffee, lunch and tea

For further information and registration form contact:

Mrs. S. L. Dutton, Secretary to the Department of Medical Education, National Spinal Injuries Centre, Stoke Mandeville Hospital, Aylesbury Bucks. HP21 8AL

Tel: 0296 315858 Fax No: 0296 315268
Midas Rex
Extension Hands-On Workshops
“MODERN DISSECTION TECHNIQUES of BONE, BIOMETALS, BIOCERAMICS, and BIOPLASTICS”
Ortho 700 for Orthopaedic Surgeons

Monterey  
October 8-9-10, 1992  
(Precedes the Western Orthopaedic Association meeting.)
Location/Accommodations: Hyatt Regency Monterey; One Old Golf Course Road; Monterey, CA 93940; 408-647-2000.

Washington, DC  
October 29-30-31, 1992  

Key West  
January 13-14-15, 1993  
Location/Accommodations: Marriott's Casa Marina Resort; 1500 Reynolds Street; Key West, FL 33040; 305-296-3535.

St. Louis  
January 18-19-20, 1993  
Location: PAWS; 3839 Lindell Avenue; St. Louis, MO 63108.  
Accommodations: Hyatt Regency; One Union Station; St. Louis, MO 63108; 314-231-1234.

Park City  
January 27-28-29, 1993  
Location/Accommodations: Resort Center Lodge & Inn; 1415 Lowell Avenue; Park City, UT 84060; 801-649-0800.

San Francisco  
February 12-13-14, 1993 and February 15-16-17, 1993  
(Precedes the American Academy of Orthopaedic Surgeons meeting.)  
Location/Accommodations: Sheraton Palace Hotel; 2 New Montgomery Street; San Francisco, CA 94105; 415-392-8600.

Snowmass  
March 8-9-10, 1993  
Location/Accommodations: Snowmass Conference Center; 76 Elbert Lane; Snowmass Village, CO 81615; 303-923-2000.

Clearwater Beach  
April 7-8-9, 1993  
Location/Accommodations: Sheraton Sand Key Resort, 1160 Gulf Boulevard, Clearwater Beach, FL 34630-2799; 813-595-1611.

Boston  
April 22-23-24, 1993  
Location: World Trade Center Boston; Boston, MA 02210; 617-439-5000.  
Accommodations: Bostonian Hotel; Fanueil Hall Marketplace; Boston, MA 02109; 617-523-3600.

Dallas/Fort Worth, New York City, West Palm Beach, Chicago, Los Angeles, Seattle and St. Louis

Hands-On Workshops are also held regularly at the above permanent teaching facilities. Please call or write for schedule at these locations.

Fees (US$): Surgeon, $965.00; Fellow/Resident, $585.00; All Operating Room Personnel (RN/CT/PA/Other) $250.00.
Enrollment is limited. Please call to reserve space before sending check or arranging travel plans. All enrollments are made through:

MIDAS REX Institute, 2929 Race Street, Fort Worth, TX 76111-4134  
Phone 800-433-7639 or 817-831-2604; FAX 817-834-4835.

SYMPOSIUM OBJECTIVES

I. Surgeons will explore current concepts in orthopaedic surgery through lectures, conferences, and clinical procedures on video. OR personnel will participate in the same activities.

II. Surgeons will participate in hands-on workshops with advanced pneumatic instrumentation so their homework problems will be refined, expedited, and facilitated. OR personnel will participate in hands-on workshops as well as give particular attention to equipment care and maintenance, so that when OR personnel have completed the course, they will have improved competence in OR support.

III. Surgeons who have completed the symposium should be able to apply immediately their amplified skills in the operating room to do their homework per se in the time delineated:

GENERAL*: Amputations, 1 min.  
- Beveling, 30 sec.  
- Decortication, 30 sec.  
- Suture holes, 3-15 sec.  
- Debridement  
- Excisions, 1 min.  
- Tumor excision  
- IMF rod, 1 min.  
- Bone graft, 30-45 sec.  
- Tibia, fibula, iliac, rib  
- Osteotomies, small bones and large bone - chevron, Mitchell, step, opening wedge, closing wedge, dome, etc., 1-3 min.  
- Special procedures  
- Alber, Chiar, Salter.

VIRGIN JOINTS: (Shoulder, Elbow, Wrist, Carpal, Metacarpal, Phalanges, Hip, Knee, Ankle, Tarsal, Metatarsal, Phalanges):  
- Trochanteric femoral neck amputation, 30-45 sec.  
- Acetabular preparation for femur, 1-3 min.  
- Femoral head, 3-15 min.  
- Anchor holes, 30 sec.  
- Unicondylar femoral preparation, 1-2 min.  
- Unicondylar tibial preparation, 1-2 min.  
- Total condylar femoral preparation, 2-5 min.  
- Total condylar tibial preparation, 2-3 min.  
- Ankle prosthesis, 1 min.  
- Polyethylene prosthesis, 1 min.  
- Metacarpal/Phalangeal prosthesis, 1 min.  
- Bunions, 2 min.

JOINT REVISION*: Excision of methylmethacrylate from femur - short length prosthesis, 5-6 min.; extra long prosthesis, 8-15 min.; cemented Austin - Moore type, Sivash, and other fenestrated and shaped stems  
- Excision of polyethylene acetabular cup, 1 min.  
- Transact metal back, 2-5 min.  
- Excision of acetabular methylmethacrylate, 2 min.  
- Excision of tibial component and methylmethacrylate, 2 min.

BIOPLASTICS*: Methylmethacrylate - dissect, excise, shape  
- Polyethylene - abrade in situ, dissect in situ, transect in situ, shape.

BIOMETALS (Superalloys, Titanium alloys, Stainless steels)*:  
- Transact and Ankle in OR, 1-6 min.; in situ, 1-6 min.  
- Drill and pull broken stems, 5-8 min. (no fenestration required)  
- Transect protruded femoral stem, 4-6 min.  
- Steinmann pins amputated, 2-3 min.  
- Free damaged screw heads from plate, 1-2 min.  
- Excise broken screws, 30 sec.

SPINE*: 4-Place laminectomy, 6-7 min.  
- Anterior cervical fusion with osteotomy removal, 6-7 min.  
- Posterior cervical fusions  
- Anterior interbody fusions  
- Posterior interbody fusions, 30 sec.  
- Osteophytes, 30 sec.  
- Harrington rod removals  
- Harrington rod transsection in situ, 2 min.  
- Fusions - posterior and anterior  
- Disc and nerve root problems  
- Unroofing nerves - Taking down old fusions, 1-8 min.

ENDOSCOPIC SURGICAL PROCEDURES OF KNERS*: Partial meniscectomies, 3-5 min.  
- Complete meniscectomies, 5-7 min.  
- Patellar shave, 1-3 min.  
- Arthrotomies, 30 sec.  
- Chondromalacia, 3 min.  
- Tendonoplasty 3-4 min.

*Procedural times refer to the actual time of running the instrument.
Surgeons will be furnished sufficient materials for any special procedure they may envision.
SATURDAY, OCTOBER 31st

Pathomechanical Rotary Deformities of the Lower Extremity

This one day course is designed to give an introduction into Pathomechanics, a branch of Physical Science that deals with static and dynamic forces and their abnormal effect on a human body affected by Neurologic, Muscular and Skeletal disorders. Clear understanding of the progressive nature of Pathomechanical Rotary Deformities will be achieved thus enabling the Physician to approach Pathomechanics of the Lower Extremity as a progressive problem with Lower Extremity Orthotics being a valuable tool that changes as the patient progresses. We can no longer ignore Rotary Deformities or simply fit an Orthosis and treat it as fixed and forever.

Tutor: Jean-Paul Nielsen
Sheffield Moat House
Sheffield
10.00 am — 4.00 pm
Registration 9.30 am
Fee: £35 includes lunch

Further details and registration form please contact:
JENNIE SCOTT — 0742 767776

FELLOWSHIP

ADULT RECONSTRUCTIVE TOTAL JOINT ARTHROPLASTY

Applications are now being accepted for two Fellowship positions in the Department of Orthopaedic Surgery at the University of Pittsburgh School of Medicine.

Two twelve-month fellowships are offered beginning August 1, 1993

For more information, please contact:
Harry E. Rubash, M. D.
Department of Orthopaedic Surgery
3601 Fifth Avenue
Pittsburgh, PA 15213
(412) 687-3900, Ext. 214

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Please contact
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Fax: 062 082 3325
1st EUROPEAN CONGRESS OF ORTHOPAEDICS

Combined Meeting of the Societies of
ORTHOPAEDIC AND TRAUMATOLOGIC SURGERY

PARIS
Palais des Congrès
April 21 - 23
1993

For any further information, please contact the Congress Office:

CONVERGENCES - CECO '93
120, avenue Gambetta
75020 PARIS (France)
Fax: (33-1) 40 31 01 65
An exhaustive analysis of ten years’ progress in the field gives you this well-written, easy-to-read reference to all aspects of arthroscopic surgery. Contents parallel actual practice, with particular emphasis on the knee and with special attention to detailed clinical evaluation.

Thirty-four renowned physicians—pioneers whose contributions to the discipline are overwhelming—offer their knowledge and wisdom for your patients’ gain.

This book is a must-read for orthopaedists. So much critical information on arthroscopic surgery has never been offered in one book before!

- In-depth review of functional joint anatomy
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An outstanding atlas on arthrography of the knee—for the first time ever changes seen on arthrography are compared with those in the joint during arthroscopic surgery
- Identification of extra-articular disorders, including those mimicking intra-articular disorders
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- Performance of the latest arthroscopic maneuvers and surgical procedures
- Classification of disorders in different structures of the knee
- The acutely injured knee, complications of knee surgery and other disorders
- Review of all joints, including anatomy, applications of arthroscopic surgery, step-by-step management of disorders

About 736 Pages.
1,356 Illustrations. 47 Tables.
ART TO TALK ABOUT.

Sergio Tappo, "Selirah riflesso" 1990, © 1990 Sergio Tappo
Art does not only move people’s emotion. There is also a form of art which moves people. The Zweymüller hip prostheses. Artistic and yet assisting nature. Introduced some eleven years ago, it has become Europe’s most implanted cementless hip system.
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Is Easily Adjustable
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CLEXANE Prescribing Information. Presentation: A clear, colourless to pale yellow solution available in single dose prefilled syringes containing either: 1. 20mg enoxaparin in 0.2ml with an anti-Factor Xa activity of 2000IU (with reference to the W.H.O. First International LMW Heparin Reference Standard), or 2. 40mg enoxaparin in 0.4ml with an anti-Factor Xa activity of 4000IU. Indications: 1. The prophylaxis of thromboembolic disorders of venous origin, in particular those which may be associated with orthopaedic or general surgery. 2. The prevention of thrombus formation in the extracorporeal circulation during haemodialysis. Dosage and Administration: Adult Dosage: In patients with a low to moderate risk of thromboembolism, such as in general surgery, the recommended dose of CLEXANE is 20mg (2000IU) once daily by subcutaneous injection. Treatment should be continued for 7 to 10 days or until the risk of thromboembolism has diminished. In patients undergoing surgery, the initial dose should be given approximately 2 hours preoperatively. In patients with a higher risk of venous thromboembolism, such as in orthopaedic surgery, the dose should be increased to 40mg (4000IU) administered once daily by subcutaneous injection with the initial dose being given approximately 12 hours preoperatively. In extracorporeal circulation during haemodialysis, 1mg/kg (100 IU/kg) enoxaparin is introduced into the arterial line of the circuit at the beginning of the dialysis session. The effect of this dose is usually sufficient for a 4 hour session although, if fibrin rings are found, such as after a longer than normal session, a further dose of 500 to 1000 micrograms/kg (50 to 100 IU/kg) may be given. For patients with a high risk of haemorrhage the dose should be reduced to 500 micrograms/kg for double vascular access or 750 micrograms/kg for single vascular access. Do not purge the syringe of air prior to injection. Elderly: No dosage adjustment is necessary in the elderly. Children: Dose not established. Contraindications: In patients with acute bacterial endocarditis, major bleeding disorders, thrombocytopenia in patients with a positive 'in vitro' aggregation test in the presence of enoxaparin, active peptic ulcer, hypersensitivity to enoxaparin, stroke (except if due to systemic emboli) and in other patients with increased risk of haemorrhage. Warning: CLEXANE must not be administered by the intramuscular route. Precautions: CLEXANE should be used with care in patients with hepatic insufficiency, uncontrolled arterial hypertension or a history of gastrointestinal ulceration. As different low molecular weight heparins may not be equivalent, alternative products should not be introduced during a course of treatment. Pregnancy: CLEXANE should not be used during pregnancy unless no safer alternative is found. Lactation: Lactating mothers receiving CLEXANE should be advised to avoid breastfeeding. Adverse reactions: Thrombocytopenia may occur rarely and liver abnormalities, such as changes in transaminase and alkaline phosphatase, are possible during treatment with CLEXANE. Ecchymosis and other haemorrhagic manifestations may occur occasionally. Pharmaceutical Precautions: Do not mix CLEXANE with other injections or infusions. CLEXANE should be stored at room temperature (22±4°C). Product Licence Numbers: PL00120196 (PA00813); 20mg; PL00120197 (PA00814); 40mg Basic NHS cost for box of 10 prefilled syringes: 20mg: £38.40; 40mg: £48.50. © denotes a Registered Trade Mark. Further information available on request from Rhône-Poulec Rorer, St. Leonards' Road, Eastbourne, East Sussex BN21 3YE.
FOR THE HIGHS AND LOWS OF FEMORAL FRACTURES

TWO INNOVATIONS IN FEMORAL FRACTURE TREATMENT

Proximal and distal fractures of the femur have often been difficult to repair. Smith & Nephew Richards has once again come up with new solutions to old problems.

First, the INTRAMEDULLARY HIP SCREW for treating proximal femur fractures. There is a 4° mediolateral bend that matches the normal anatomy, and the design shares many components with existing Smith & Nephew Richards products.

Second, the INTRAMEDULLARY SUPRACONDYLAR NAIL for treating distal fractures. This product provides maximum stability without requiring a large incision.

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This is all there is to it... 100 grams of healing power.

Here's the only bone growth stimulator you can apply and forget! OrthoPak II stays active day and night, continuously treating the nonunion round the clock! And the patient hardly knows it's there! After all, it weighs only 100 grams!

What a relief from the 1 to 2 kilograms the others weigh! At the same time it eliminates battery re-charging, a daily chore that can take up to 10 hours! Instead, OrthoPak II uses disposable power, a convenient carefree routine that takes only minutes!

When next faced with a nonunion, look into Biolectron's OrthoPak II. Write, phone or fax for complete information.

Biolectron, Inc.
Phone (USA): 201-487-1838
Fax (USA): 201-487-5935
...specifically designed for your patient's needs.
The No Compromise Approach to Total Knee Versatility

Some manufacturers seem to think that a "universal" knee system provides all the versatility a surgeon needs. But the fact is, there is more to versatility than offering the option to switch components intraoperatively.

The idea behind universal knee systems is to accommodate those rare cases where you’ve planned for a nonconstrained prosthesis and discover during surgery that you need a more constrained design. But for that small degree of versatility, you make some very significant compromises. A universal knee system uses a single design to cover a broad range of patient indications, so you may be giving up an optimal degree of conformity.

But that isn’t all. You may also be giving up a sufficient range of sizing options, as well as fixation and augmentation options. In essence, you’d be giving up a knee prosthesis that is specifically designed for your patient’s needs. And, in the process, you may be compromising joint kinematics and optimal component wear characteristics.

A Knee Implant For Every Implant Need

But there is a way to get all the versatility you need...without compromise. With the MG II Total Knee System and the Insall/Burstein **II Modular Knee System, you have versatility in every sense of the word. With the new Zimmer Cross-over Instrumentation System, you can easily switch from a nonconstrained to a more constrained prosthesis during surgery. So why compromise?

The Market Leader

The MG II Total Knee System is the number one selling knee system on the market today†. It offers eight different femoral A/P sizes, ten tibial fixation plate sizes in pegged or stemmed designs, four augmented tibial designs, three tibial articular surface designs in five or seven heights, and four patella sizes. You can also choose from fixation surfaces with a PMMA precoat‡, or fiber metal mesh.

The Clinical Leader

The Insall/Burstein II Modular Knee System has a clinical success rate that is unmatched². It offers a posterior stabilized design with choices from among five femoral A/P sizes, nine tibial tray sizes, seven tibial articular surface heights, 12 tibial stem diameters, and five patella sizes.

You can also choose a variety of full or half tibial wedges, and half blocks.

With these two leading total knee systems and the Zimmer Cross-over Instrumentation System, you can take advantage of design specific components.

You’ll also have the flexibility to change to a more constrained prosthesis in those rare cases where unexpected circumstances are revealed during surgery.

This is total knee versatility...without compromise...from Zimmer.

* Insall/Burstein is a trademark of The Hospital for Special Surgery, New York, New York.
† U.S. Patents 4,281,420; 4,336,618; 4,491,987
‡ U.S. Patent No. 4,298,992

Zimmer Ltd.
Dunbeath Rd., Elgin Dr.
Swindon, Wiltshire SN2 6EA
England
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UNILAB SURGIBONE
for Surgical Implant

DOWELS FOR CLOWARD CERVICAL FUSION
Load-bearing cancellous bone dowels free of epiphyseal cartilage and cortical bone. Each bone is compression tested to ensure that it will carry a load well in excess of 250 Kgs. Three-level operations have been performed successfully using Unilab Surgibone.

Sizes available:
- 12.0 mm dia. x 19.0 mm long - Catalog No. 120-100
- 12.5 mm dia. x 19.0 mm long - Catalog No. 125-100
- 14.0 mm dia. x 19.0 mm long - Catalog No. 140-100
- 14.5 mm dia. x 19.0 mm long - Catalog No. 145-100
- 16.0 mm dia. x 19.0 mm long - Catalog No. 160-100

One per package - sterile.

BLOCKS FOR SMITH-ROBINSON CERVICAL FUSION
Load-bearing cancellous bone blocks free of epiphyseal cartilage and cortical bone. Each bone is compression tested to ensure it will carry a load well in excess of 400 Kgs. Three-level operations have been performed successfully using Unilab Surgibone.

Sizes available:
- 20 mm wide x 15 mm long x 8 mm high - Catalog No. 2016-08
- 20 mm wide x 15 mm long x 10 mm high - Catalog No. 2016-10
- 20 mm wide x 15 mm long x 12 mm high - Catalog No. 2016-12

One per package - sterile.

THREADED DOWELS
Load-bearing cancellous bone free of epiphyseal cartilage and cortical bone, threaded for use in the Otero procedure for cervical fusion. Compression tested to ensure that it will carry a load well in excess of 250 Kgs.

Sizes available:
- 12 mm dia. x 16.0 mm long - Catalog No. 120-1ST
- 14 mm dia. x 18.0 mm long - Catalog No. 140-1ST
- 15 mm dia. x 19.0 mm long - Catalog No. 150-1ST

One per package - sterile.

BLOCKS FOR LUMBAR DISK REPLACEMENT
Load-bearing cancellous bone blocks free of epiphyseal cartilage and cortical bone. Each bone is compression tested to insure that it will carry a load well in excess of 600 Kgs. Two or three bones may be used in each level. Three-level operations have been performed successfully using Unilab Surgibone.

Sizes available:
- 30.0 mm long x 10.0 mm wide x 14.0 mm high - Catalog No. 301014
- 30.0 mm long x 10.0 mm wide x 16.0 mm high - Catalog No. 301016
- 30.0 mm long x 10.0 mm wide x 18.0 mm high - Catalog No. 301018
- 30.0 mm long x 10.0 mm wide x 20.0 mm high - Catalog No. 301020
- 30.0 mm long x 10.0 mm wide x 22.0 mm high - Catalog No. 301022

One per package - sterile.

BLOCKS FOR LUMBAR DISK REPLACEMENT
Load-bearing cancellous bone blocks free of epiphyseal cartilage and cortical bone. Each bone is compression tested to insure that it will carry a load well in excess of 600 Kgs. Two bones must be used in each level. (One 15 mm wide bone may be used with one 10 mm bone of same height in same level.)

Sizes available:
- 30.0 mm long x 15.0 mm wide x 14.0 mm high - Catalog No. 301514
- 30.0 mm long x 15.0 mm wide x 16.0 mm high - Catalog No. 301516
- 30.0 mm long x 15.0 mm wide x 18.0 mm high - Catalog No. 301518
- 30.0 mm long x 15.0 mm wide x 20.0 mm high - Catalog No. 301520
- 30.0 mm long x 15.0 mm wide x 22.0 mm high - Catalog No. 301522

One per package - sterile.

SINGLE TAPERED WEDGE
Cancellous non-load bearing bone free of epiphyseal cartilage and cortical bone. Tapered full length (for patella).

Sizes available:
- 55 mm long x 15 mm wide x 25 mm high - Catalog No. 551525
  (15 mm width tapered to 1 mm)

One per package - sterile.

COMPOUND TAPERED WEDGE
Cancellous non-load bearing bone free of epiphyseal cartilage and cortical bone. Multiple tapers for patella.

Sizes available:
- 55 mm long x 10 mm wide x 25 mm high - Catalog No. 5510TPR
- 55 mm long x 13 mm wide x 25 mm high - Catalog No. 5513TPR
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One per package - sterile.

Photos shown actual size

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764 Ramsey Ave., Hillside, N.J. 07205, USA
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No pre-operative preparation of the bone such as soaking is required. The normal operative procedure is followed except that Unilab Surgibone is used in place of autologous or homologous bone. During the post-operative period the process known as “creeping substitution” takes place, leading to formation of host bone, absorption of Unilab Surgibone and fusion.

**CIRCULAR DISK**
A large load-bearing cancellous bone disk free of epiphyseal cartilage and cortical bone for use in any area where a large mass is needed. Primarily for condyle repair.

Size available:
40 mm dia. x 10 mm high - Catalog No. 400-100
One per package - sterile.

**ONLAY GRAFTS**
Cancellous bone one side and cortical bone on the other. Used for splicing or grafting where strength is required.

Sizes available:
120 mm long x 15 mm wide x 6 mm thick - Catalog No. 120-156
100 mm long x 15 mm wide x 6 mm thick - Catalog No. 100-156
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50 mm long x 7 mm wide x 5 mm thick - Catalog No. 050-076
One per package - sterile.

**BLOCKS FOR CAVITY FILLING**
Non-load bearing cancellous blocks free of epiphyseal cartilage or cortical bone for use in filling voids where tumors or cysts have been removed.

Size available:
20 mm wide x 20 mm long x 10 mm high
Three per package - sterile
Catalog No. 2020-10
Catalog No. 2020-01

**TAPERED DISKS**
A large load-bearing cancellous bone free of epiphyseal cartilage and cortical bone for use in Tibia Osteotomy.

Sizes available:
40 mm dia. tapered from 6 mm high to 2 mm high - Catalog No. 400-062
40 mm dia. tapered from 6 mm high to 2 mm high - Catalog No. 400-062
40 mm dia. tapered from 10 mm high to 2 mm high - Catalog No. 400-102
50 mm dia. tapered from 8 mm high to 2 mm high - Catalog No. 500-082
50 mm dia. tapered from 10 mm high to 2 mm high - Catalog No. 500-102
50 mm dia. tapered from 12 mm high to 2 mm high - Catalog No. 500-122
50 mm dia. tapered from 14 mm high to 2 mm high - Catalog No. 500-142
One per package - sterile.

**CUBES (CUT)**
Cancellous non-load bearing bone free of epiphyseal cartilage and cortical bone. Cut, not crushed. For use in filling voids from cysts or tumors.

Size available:
5.0 mm x 5.0 mm x 5.0 mm - 10 gram package (Vol. 30 cc)
Catalog No. 0500-10
Sterile.

**TAPERED PLUG**
Cancellous non-load bearing bone free of epiphyseal cartilage and cortical bone. For filling drilled openings 7 mm or larger.

Size available:
50 mm long tapered 6 mm dia. to 5 mm dia.
Catalog No. 50-0605
One per package - sterile.

For complete product information, contraindications and adverse reactions, contact:
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