Dear Seniors, Colleagues & Friends,

It gives me immense pleasure and satisfaction in presenting to you the progress graph of our department through the year 2007-08.

With 321 beds, making the largest department in a government hospital in Asia, The Department of Orthopaedic Surgery, GGH has made an indelible mark in patient care by bringing high quality orthopaedic care within the common man’s reach. Our combination of expertise with commitment has led to the achievement of better outcomes and improved quality of life for thousands of patients who visit our department each year.

This year we added yet another milestone in our history by starting two specialized ortho spine units entirely to cater the needs of paraplegic patients. Thus patients with spine injuries will now be benefitted by our extended care and we hope to start such specialized units in the other subspecialties as well.

We have so far performed 60 bone transplantations after starting our bone bank. Our live donor bone procurement is in full sail with procurement, processing, irradiation and finally using them in various reconstructive surgeries. Last year we installed ETO sterilization and other processing equipments as well and we hope to attain our goal of self sufficiency in cadaveric bone procurement by this year end.

Our society is a fast changing one technologically and it is our very task to fight obsolescence if we do not want to lag behind. Innovation is the name of the game. We are currently in the process of starting a bioskills laboratory - a hands-on-lab to train the younger generation in the recent advances, as well as with facilities for biomechanical research analysis.

As we move towards the twilight of the bone and joint decade (2000-2010) it is time we concentrate more on satisfying our benefactors - “THE PATIENT” around whom all of this resolves. Next year we will be celebrating our 60th anniversary, marching ahead with our vision to work towards a healthy society.

I am indebted to my parents in heaven who have made it possible for me reach this position in the world today. I pray to God Almighty, to shower his blessings to one and all.

With regards,

Yours Sincerely,

Mayil
DEPARTMENT OF ORTHOPAEDIC SURGERY

HEAD & HEART OF THE DEPARTMENT
Padma Laureate Mayil Vahanan Natarajan
M.S.Orth. (Ma’s) M.Ch.Trauma (L’pool) Ph.D. (Orth.Onco.) D.Sc.

ADDITIONAL PROFESSORS
Dr. K. Anbazhagan, D.Orth. M.S.Orth.
Dr. R.H. Govardhan, D.Orth. M.S.Orth.
Dr. V. Thulasiraman, D.Orth. M.S.Orth.

ASSOCIATE PROFESSORS OF SPINE SURGERY
Dr. R. Subbiah, D.Orth. M.S.Orth.

ASSISTANT PROFESSORS
Dr. R. Selvaraj, D.Orth. M.S.Orth. DNB.Orth.
Dr. V. Mazhavan, D.Orth. M.S.Orth.
Dr. B. Pasupathy, D.Orth. M.S.Orth. DNB.Orth.
Dr. T.R. Ramesh Pandian, M.S.Orth.
Dr. N.B. Thanmaran, D.Orth. DNB.Orth.
Dr. Antony Vimal Raj, M.S.Orth.

TUTORS
Dr. A. Shanmugasundaram, M.S.Orth.
Dr. K. Velmurugan, M.S.Orth. DNB Orth.
Dr. K.P. Manimaran, M.S.Orth.
Dr. S. Karunakaran, M.S.Orth. DNB.Orth.
Dr. Nalli R. Gopinath, D.Orth. DNB.Orth.
Dr. N. Muthalagan, D.Orth.
POST GRADUATE STUDENTS (M.S.Orth.)
Dr. F. Fakhruddin
Dr. R. Sivashanmugam
Dr. B. Balakumar
Dr. P. Chandra Sekaran
Dr. Dhanesh Prasad
Dr. Rajadurai
Dr. P.R. Ramprasad
Dr. I. Geethan
Dr. A.P. Siva Kumar
Dr. S.P. Elangovan
Dr. Navin Balasubramanian
Dr. S. Ashok
Dr. M. Jayakumar
Dr. Mohd. Sameer
Dr. N. Sarath Babu
Dr. Anjan Ramachandranath

POST GRADUATE STUDENTS (D.Orth.)
Dr. M.S. Chidambaram
Dr. K. Jeyakumar
Dr. Bhaskar
Dr. A. Raja
Dr. K. Saravanan
Dr. R. Vijay Anand
Dr. B. Selvan
Dr. S. Manoh
Dr. S. Karthick
Dr. J. Viswanath
Dr. Syed Naser
Dr. Arul Murugan
Dr. Padma Rajan
Dr. P. Suguna Ravi

PHYSIOTHERAPISTS - GRADE 1
Mrs. C. Chandra
Ms. V. Bhuvaneswari
Mr. P. Krishnan
Mrs. N. Vetrimani
Mrs. M.R. Anusuyadevi
Mrs. S. Krishnasamy

PHYSIOTHERAPISTS - GRADE 2
Mr. M. Ganeshram
Mr. E. Kesavan
Mr. R. Neelamegam
Mrs. F. Maria Rita
Mrs. D. Gomathi
Mrs. S. Ravathi
Mr. B. Senthilkumar
Mr. K. Karthikeyan
Mrs. W. Vasanthi
Mr. S. Adam Vinnarasan
Mrs. S.E. Sujatha
Mrs. B. Jayanthi
Mr. T. Rajan
Mr. M. Kumar
Mr. S. John S. Raj

SOCIAL WELFARE OFFICERS
Mr. R. Narayanan, M.A.
Mr. M. Murugan, M.A.

NURSING TUTOR
R. Jeyarani Packiavathi

OP STAFF NURSE
Mrs. Rajalakshmi

OT STAFF NURSE
Mrs. Dhanalakshmi
Mrs. Allis Gandhimathy

JUNIOR ASSISTANT
Mrs. Faiz Jehan Begum

STENOGRAPHER
Mrs. K. Geetha

RECORD CLERK
Mr. Alphonse

PLASTER TECHNICIANS
Mr. Surendra Babu
Mr. Subramani
BRIEF HISTORY OF THE DEPARTMENT

HOW IT ALL BEGAN

The first orthopaedic service in Tamil Nadu was started in Govt. General Hospital in the year 1929 first as an outpatient service and then in the year 1931 inpatient facilities were started. Dr. M.G. Kini was the first person to qualify in orthopaedic surgery in Tamil Nadu, serving in this department between 1929 to 1931. In 1949 a separate orthopaedic department was established. Lt. Col. V.R. Thayumanaswamy was the first professor of orthopaedic surgery.

GROWTH AND EXPANSION

- In 1957, Prof. M. Natarajan took over as professor of orthopaedics and continued till 1976. During his period there was expansion of the department with addition of beds, introduction of post graduate courses in orthopaedics and allied specialities such as Physical Medicine & Rehabilitation.
- Prof. T.K. Shanmuga Sundaram pioneered the starting of the PL 480 scheme for the traumatic paraplegics and the MRC Trial for TB Spine.
- Prof. S. Soundarapandian and Prof. S. Rajagopal have worked hard to bring the paraplegia block.
- After this successive Heads of the Department - Prof. T.S. Xavier, Prof. K. Sriram, Prof. C.T. Alagappan, Prof. K. Annamalai, Prof. M. Subramanian, Prof. K. Chandran, Prof. S.N. Motilal, Prof. R. Dhanapal have worked hard to improve the standard of this department.
- On 1st March, 2005, Prof. Mayil Vahanan Natarajan took over as the Head of the Department.

THE DEPARTMENT - NOW

With current bed strength of 321 beds, the Department of Orthopaedic Surgery, GGH is the “LARGEST” department in a GOVERNMENT HOSPITAL SET UP in the whole of India.

WARDS

Ortho Trauma Ward (Ward 205)

A separate Emergency Trauma Ward for orthopaedic trauma cases is being run by one qualified orthopaedic surgeon and two M.S. Ortho and two D.Ortho post graduates, round the clock, 24 hrs. a day, 365 days a year. On an average, there are about 15 admissions per day in this trauma ward alone, not mentioning the numerous Orthopaedic cases seen in the Surgical Trauma ward. All these patients need closed reduction / minor or major emergency surgeries which are done on day one with zero delay truly establishing the emergency trauma care concept.
Emergency Trauma Theatre
There is a well equipped trauma theatre serving round the clock, with state of the art equipments and facilities with trained staff nurses helping the trauma team to treat open fractures as well as dislocations, as soon as the patients are received.

Intensive Trauma Care Unit (ITCU ward 214)
This ITCU has been commissioned to offer round the clock intensive care to poly trauma patients. This ward has all emergency supportive equipments including ventilator supports and access to all emergency life saving facilities. It is a shining example of effective and emergency trauma care. It is equipped with nurses well trained in the nuances of intensive trauma care.

General Wards
We have 2 separate male wards of 40 beds each, 2 female wards of 40 beds each, paediatric ward with 12 beds and a septic ward with 60 beds. In addition, we have separate post operative wards and intermediate care wards making the total orthopaedic bed strength to 321.

Ortho Spine Ward
A separate male and female ortho spine ward of total bed strength of 26 serves the paraplegic and quadriplegic patients, exclusively.

Elective Operation Theatres
Our department has been allotted 3 state of the art operation theatres with 2 tables each. This has greatly increased the number of surgeries performed by the department thereby drastically reducing the waiting time of the patients for surgery. These theatres have laminar airflow facilities, two C-Arms, centralized suction and air supply which make them suitable for doing modern surgeries like arthroplasty, arthroscopy etc.
SPECIALISED SERVICES

24 hrs. Fracture Services (Unique)
- With a M.S. (ortho) qualified surgeon available on the site (not on call), with two M.S.Ortho PGs, and two Diploma PGs, all 24 hours a day, 365 days a year.

Orthopaedic Oncology
- Limb Salvage for bone tumour by Custom Mega Prosthesis
- Limb Salvage for bone tumour by Allograft
- Major amputations

Reconstructive Orthopaedics
- Limb reconstruction / stabilization after bone loss / infection
- Deformity correction
- Treatment of all types of non-unions

Spinal Surgery
- For cervical, dorsal and lumbar spinal injury & Pott’s spine patients
- Intervertebral disc surgery
- Scoliosis corrective surgeries

Total Joint Replacement
- Uncemented / cemented total / hemi hip replacement
- Total knee replacement
- Surface replacement of hip
- Elbow / shoulder replacement

DETAILS OF BED STRENGTH

<table>
<thead>
<tr>
<th>Unit / Ward</th>
<th>TOWER BLOCK</th>
<th>OLD BLOCK</th>
</tr>
</thead>
<tbody>
<tr>
<td>Prof. MVN</td>
<td>22 3 11 3 12 10 15 76</td>
<td></td>
</tr>
<tr>
<td>Dr. KA</td>
<td>- 2 9 20 11 9 15 68</td>
<td></td>
</tr>
<tr>
<td>Dr. RHG</td>
<td>- 1 9 20 11 8 15 66</td>
<td></td>
</tr>
<tr>
<td>Dr. VTR</td>
<td>18 - 9 - 11 8 15 63</td>
<td></td>
</tr>
<tr>
<td>Dr. RS</td>
<td>- - 1 2 10 - - - 13</td>
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</tr>
<tr>
<td>Dr. NRU</td>
<td>- - 1 2 10 - - - 13</td>
<td></td>
</tr>
<tr>
<td>TOTAL</td>
<td>40 6 2 42 20 40 9 45 35 60 299</td>
<td></td>
</tr>
</tbody>
</table>

Ortho Trauma Ward 205 22
Grand Total 321
I. **OPD (Out Patient Department)**

The number of outpatients attending our orthopaedic department has been increasing over years.

<table>
<thead>
<tr>
<th>MONTH</th>
<th>TOTAL CASES</th>
</tr>
</thead>
<tbody>
<tr>
<td>April 2007</td>
<td>6288</td>
</tr>
<tr>
<td>May</td>
<td>5208</td>
</tr>
<tr>
<td>June</td>
<td>5609</td>
</tr>
<tr>
<td>July</td>
<td>4494</td>
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<tr>
<td>August</td>
<td>4366</td>
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<tr>
<td>September</td>
<td>3489</td>
</tr>
<tr>
<td>October</td>
<td>3036</td>
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<tr>
<td>November</td>
<td>3087</td>
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<tr>
<td>December</td>
<td>3267</td>
</tr>
<tr>
<td>January 2008</td>
<td>3107</td>
</tr>
<tr>
<td>February</td>
<td>2648</td>
</tr>
<tr>
<td>March</td>
<td>3800</td>
</tr>
</tbody>
</table>

**OPD STATISTIC 2007-08**

![Bar chart showing OPD statistics from April 2007 to March 2008](chart.png)
II. OP ADMISSION & TRAUMA WARD ADMISSION
The number of inpatients admitted during the period between April 2007 & March 2008 is tabulated here.

<table>
<thead>
<tr>
<th>Month</th>
<th>OP Admission</th>
<th>Trauma Ward Admission</th>
<th>Total Patients</th>
</tr>
</thead>
<tbody>
<tr>
<td>April 2007</td>
<td>154</td>
<td>540</td>
<td>694</td>
</tr>
<tr>
<td>May</td>
<td>174</td>
<td>580</td>
<td>754</td>
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<tr>
<td>June</td>
<td>176</td>
<td>596</td>
<td>772</td>
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<td>July</td>
<td>173</td>
<td>591</td>
<td>764</td>
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<tr>
<td>August</td>
<td>163</td>
<td>376</td>
<td>539</td>
</tr>
<tr>
<td>September</td>
<td>175</td>
<td>368</td>
<td>543</td>
</tr>
<tr>
<td>October</td>
<td>178</td>
<td>350</td>
<td>528</td>
</tr>
<tr>
<td>November</td>
<td>187</td>
<td>307</td>
<td>494</td>
</tr>
<tr>
<td>December</td>
<td>172</td>
<td>236</td>
<td>408</td>
</tr>
<tr>
<td>January 2008</td>
<td>182</td>
<td>358</td>
<td>540</td>
</tr>
<tr>
<td>February</td>
<td>164</td>
<td>470</td>
<td>534</td>
</tr>
<tr>
<td>March</td>
<td>173</td>
<td>309</td>
<td>482</td>
</tr>
</tbody>
</table>

TOTAL INPATIENT ADMISSION

**OP ADMISSION** ■ **TRAUMA WARD ADMISSION**
### III. ADMISSIONS, DISCHARGES & DEATHS

<table>
<thead>
<tr>
<th>MONTH</th>
<th>Admissions</th>
<th>Discharges</th>
<th>Death</th>
</tr>
</thead>
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<tr>
<td>April 2007</td>
<td>154</td>
<td>476</td>
<td>10</td>
</tr>
<tr>
<td>May</td>
<td>174</td>
<td>588</td>
<td>19</td>
</tr>
<tr>
<td>June</td>
<td>176</td>
<td>549</td>
<td>4</td>
</tr>
<tr>
<td>July</td>
<td>173</td>
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<tr>
<td>August</td>
<td>163</td>
<td>344</td>
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<tr>
<td>September</td>
<td>175</td>
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<tr>
<td>October</td>
<td>178</td>
<td>347</td>
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<tr>
<td>November</td>
<td>187</td>
<td>325</td>
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<tr>
<td>December</td>
<td>172</td>
<td>251</td>
<td>8</td>
</tr>
<tr>
<td>January 2008</td>
<td>182</td>
<td>248</td>
<td>8</td>
</tr>
<tr>
<td>February</td>
<td>164</td>
<td>306</td>
<td>9</td>
</tr>
<tr>
<td>March</td>
<td>173</td>
<td>348</td>
<td>10</td>
</tr>
</tbody>
</table>

---

**ADMISSION, DISCHARGE & DEATH**

![Graph showing admissions, discharges, and deaths over months](chart.png)

- **ADMISSION**
- **DISCHARGE**
- **DEATH**
IV. ORTHOPAEDIC SURGERY - OT STATISTICS

<table>
<thead>
<tr>
<th>Month</th>
<th>Elective (OT)</th>
<th>Emergency (OT)</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>April 2007</td>
<td>208</td>
<td>162</td>
<td>370</td>
</tr>
<tr>
<td>May</td>
<td>189</td>
<td>154</td>
<td>343</td>
</tr>
<tr>
<td>June</td>
<td>251</td>
<td>161</td>
<td>412</td>
</tr>
<tr>
<td>July</td>
<td>231</td>
<td>145</td>
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<td>August</td>
<td>180</td>
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<td>September</td>
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<td>October</td>
<td>174</td>
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<td>December</td>
<td>194</td>
<td>145</td>
<td>239</td>
</tr>
<tr>
<td>January 2008</td>
<td>216</td>
<td>95</td>
<td>311</td>
</tr>
<tr>
<td>February</td>
<td>202</td>
<td>115</td>
<td>317</td>
</tr>
<tr>
<td>March</td>
<td>216</td>
<td>111</td>
<td>327</td>
</tr>
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</table>

THEATRE STATISTICS

<table>
<thead>
<tr>
<th>Month</th>
<th>Elective OT</th>
<th>Emergency OT</th>
</tr>
</thead>
<tbody>
<tr>
<td>APR</td>
<td>208</td>
<td>162</td>
</tr>
<tr>
<td>MAY</td>
<td>189</td>
<td>154</td>
</tr>
<tr>
<td>JUN</td>
<td>251</td>
<td>161</td>
</tr>
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<td>JUL</td>
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<td>145</td>
</tr>
<tr>
<td>AUG</td>
<td>180</td>
<td>134</td>
</tr>
<tr>
<td>SEP</td>
<td>188</td>
<td>76</td>
</tr>
<tr>
<td>OCT</td>
<td>174</td>
<td>84</td>
</tr>
<tr>
<td>NOV</td>
<td>153</td>
<td>105</td>
</tr>
<tr>
<td>DEC</td>
<td>194</td>
<td>145</td>
</tr>
<tr>
<td>JAN</td>
<td>216</td>
<td>95</td>
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<tr>
<td>FEB</td>
<td>202</td>
<td>115</td>
</tr>
<tr>
<td>MAR</td>
<td>216</td>
<td>111</td>
</tr>
</tbody>
</table>

V. AVERAGE ADMISSION AND SURGERIES

<table>
<thead>
<tr>
<th>Category</th>
<th>Per Day</th>
</tr>
</thead>
<tbody>
<tr>
<td>TRAUMA WARD ADMISSION</td>
<td>14</td>
</tr>
<tr>
<td>ELECTIVE ADMISSION</td>
<td>12</td>
</tr>
<tr>
<td>ELECTIVE SURGERIES (Major)</td>
<td>8</td>
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<tr>
<td>EMERGENCY SURGERIES (Major)</td>
<td>5</td>
</tr>
</tbody>
</table>
EVENTS ORGANISED IN THE DEPARTMENT
(1.4.2007 to 31.3.2008)

1. Conducted the National Board of Examinations D.N.B. Ortho Clinical examination on 29.5.2007 and 30.5.2007.

2. Prof. Dr. R. Nanjunda Rao Endowment Oration on Recent Advances in “HIP SURGERY” on 26.6.2007 at Senate Hall of Tamil Nadu Dr. M.G.R. Medical University by Prof. Mayil Vahanan Natarajan.

3. Guest Lecture on ‘Locking Compression Plate (LCP) delivered by Dr. Frank Baudry, Consultant Orthopaedic Surgeon at Polyclinique du pare in Cholet, France on 5th September 2007 (Wednesday).

4. Instructional Course “Hands on Workshop on Kyphoplasty” on 9th September 2007 organised by Chennai Spine Club and inaugurated by Prof. Mayil Vahanan Natarajan on Hands on Workshop on cadavers under the supervision of Ms. Beatrix Meier, Professional Education Manager, Kyphon International.


6. MMC Fracture Fixation Course for the postgraduates conducted on October 6th and 7th 2007. Organising Secretaries Dr. R. Subbiah and Dr. B. Pasupathy.

7. CME on Computer Navigated Knee Anthroplasty on 1st December 2007 (Saturday). Live Demonstration by Prof. Dr. Hanns Peter Scharf, Professor and Chairman of Orthopaedic Surgery and Traumatology, University of Heidelberg, Germany.

   1. Dr. Manish Chadha  2. Dr. A.K. Pal  3. Dr. Abdul Qayyum Khan  4. Dr. Ashish Goyal
   New Delhi  Kolkata  Aligarh  New Delhi

STAFF CHANGES
1. Mrs. Chandra, Physiotherapist Grade-I superannuation on 30.5.2007.
3. Mr. S. Krishnaswamy, Physiotherapist joined as Grade-I Physiotherapist in the place of Tmt. C. Chandra on 11.8.2007.
5. Dr. R. Subbiah promoted and posted as reader in Spine Surgery on 18.7.2007.
6. Dr. K.P. Manimaran joined as Tutor in Orthopaedics on 5.9.2007.
7. Dr. A. Shanmugasundaram joined as Tutor in Orthopaedics on 24.10.2007.
8. Dr. K. Anbalagan’s superannuation on 29.2.2008.
Guest lectures delivered by Prof. R.H. Govardhan from April 2007 to March 2008


3. Faculty AO advanced Course, Chennai – delivered following lectures - Distal radial fractures & non union of tibial fractures.


7. IOACON 2007, Kolkatta, CME lecture on distal radial fractures.

8. IOACON 2007, Kolkatta – Guest lecture on “Tips & Tricks in the surgical management of acetabular fractures”.

9. Dr. K.P. Shrivastava Memorial Oration 2007 at VARANASI, 29th December 2007 on “Paediatric Deformity Corrections”.


Free Papers

1. Fixator assisted deformity correction – Dr. Govardhan, Dr. Sameer - IOACON 2008, Kolkatta.

2. Limb salvage by ilizarov methodology – Dr. Govardhan, Dr. RM. Kannan - IOACON 2007, Kolkatta.
Introduction

We are now at the twilight of the Bone and Joint Decade (BJD), 2000-2010. Musculoskeletal conditions and musculoskeletal science are appearing on national research agendas and in several healthcare initiatives around the world and, as a result, more resources are being channeled into the musculoskeletal field. The launch of the WHO BJD 2000-2010 is a culmination of the efforts put in by numerous experts and visionaries to curb the growing but under recognized menace of the rheumatic-and-musculoskeletal diseases (RMSD).

After having effectively launched several programs to control numerous communicable infectious diseases with a fair measure of success, over the decades, the WHO began to increasingly focus on the non-communicable diseases. Inspired by the success of the Decade of the Brain (1990-2000), which served to raise awareness of the impact of mental disorders and led to significant scientific advances, the BJD was launched in January 2000 in Geneva, Switzerland with a World Health Organization (WHO) conference entitled ‘The Burden of Musculoskeletal Conditions at the Start of the New Millennium’.

It is endorsed by the International League of Associations for Rheumatology (ILAR) and its components in Asia-Pacific (APLAR) and rest of the World. Numerous national organizations, including the Indian Orthopaedic Association and the Indian Rheumatism Association have been listed amongst the organizations supporting the BJD movement. Over 17 Governments have endorsed the WHO BJD project including the Government of India. Five major disorders such as Rheumatoid Arthritis (RA), Osteoarthritis (OA), Osteoporosis, Spinal Disorders and Severe Limb Trauma were given priority.

The WHO-BJD Strategy

The key goal is summed up in its slogan “keep people moving”. The WHO BJD hopes to accomplish the following goals in the current decade:

- raise awareness of the growing burden of RMSD on society.
- promote prevention of RMSD and empower patients through education campaigns.
- advance research in prevention, diagnosis and treatment of RMSD, including rheumatic disorders.
- improve diagnosis and treatment of RMSD.

It is hoped that at the end of the current decade there will be 25% reduction in expected increase in joint destruction by arthritis, osteoporotic fractures, severely injured people and indirect health cost for spinal disorders. Impressive achievements have been made so far and more action-oriented agenda has been framed.

The BJD after 2010

As the decade approaches its final year, the Bone and Joint Decade International Steering Committee arranged to meet in London recently to discuss the continuation of the BJD initiatives after 2010. The result of discussions was a resounding accord to carry on.

The mission of the BJD has been, and will continue to be, promoting musculoskeletal health and science worldwide. These goals will not end when this decade ends; rather, this is an enduring commitment.
PRESENTED PAPERS ON
MADRAS ORTHOPAEDIC SOCIETY MEETINGS

Dr. D.R. Ramprasath  Management of fractures of articular surface of head of femur
                     - A review of 4 cases
Dr. Dhanesh Prasad  Multiple exostosis forearm management
Dr. I. Geethan      A case of bilateral hip disease - interesting for its rarity
Dr. A.R. Baskar     An interesting case for diagnostic
Dr. Chidambaram    Lesion in the hip-diagnosis and management
Dr. Ashok          A case of bone dysplasia for diagnosis and management
Dr. A.N. Sarath Babu Scapulothoracic excursion after partial scapulectomy and reconstruction
Dr. A.R. Baskar     An interesting case for diagnosis
Dr. M. Md. Sameer   An adolescent hip problem
Dr. F. Fakruddin    An interesting anterior exposure for D1-D2 vertebrae - A case report
Dr. Balakumar       Ender’s nailing in compound fractures of long bones in children

BONE BANK UPDATE

The Bone Bank was established in the Government General Hospital on 1st July 2006. It is well equipped with ETO sterilizer, deep freezer, besides other basic infrastructure facilities. The field of activities include motivating potential donors, screening them, obtaining consent, collection, processing and preservation of grafts. Cancellous allografts so obtained are used for filling bone defects in complex fracture surgeries, revision arthroplasty and tumor surgery. Structural allografts imported from Sri Lankan human tissue bank are stored and used for complex bone tumour surgeries. Till date 25 such cadaveric structural allograft surgeries have been performed, 118 live donor grafts have been obtained, 100 of them processed and 60 used in 42 patients. We now have 40 sterilized cancellous allografts in store. Procedures are on line to procure structural cadaveric allografts from voluntary donors to match the demand.

Living Donor Grafts
1. Number of Grafts Obtained
   a) Processed 100
   b) Used 60
   c) Available 40

2. Number of Cancellous allograft surgeries done 32

ORTHO SPINE UNIT

Department of Orthopaedic Surgery in Government General Hospital being a tertiary referral centre caters to spine injury patients from all over Tamil Nadu. To provide optimized and extended care to paraplegic and quadriplegic patients two separate units have been established for specialty ortho spinal work. They have OPDs on Fridays and Saturdays. Spine Injury Patients admitted on these days will be taken over to respective spine units. Each unit has 12 beds and 3 operating tables every week. On an average 32 patients attend spine OPD every day and 8 cases are operated every week. Besides routine spine trauma surgery and disc surgery complex corrective surgeries and spine fusion surgeries are also undertaken.
**OASIS 2007 - MANGALORE**

**FREE PAPERS**

AUGUST 2007

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<th>1.</th>
<th>Osteitis Fibrosa Cystica</th>
<th>Dr. V. Thulasiraman, Dr. Nalli R. Yuvaraj, Dr. R. Subbiah</th>
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**TNOA 2008 - KODAIKANAL**

**FREE PAPERS**

FEB. 2008

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### IOA, CALCUTTA

#### DEC. 2007

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### POSTERS

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ACADEMIC ACTIVITIES IN THE DEPARTMENT

1. The Departmental Library was renewed with addition of new textbooks, International Journals and broadband internet connection facility.

2. Departmental review meeting is being conducted every Saturday where weekly statistics of the department, clinical cases and operative procedures are discussed.

3. A year long teaching schedule to cover the entire curriculum for M.S.Ortho. and D.Ortho. is being followed with a view to complete the academic curriculum in one year along with monthly departmental exams.

4. PG COTE (Continuing Orthopaedic Training Education) is being conducted every month.

5. Ongoing research activities in the department by Post Graduates.
   a) Dr. Geethan - A short term analysis of functional outcome and complications of surface replacement arthroplasty.
   b) Dr. Sivakumar - Management of unstable cervical fractures by lateral mass fixation - An analysis.
   c) Dr. Dhanesh - Role of allograft in spine fusion surgery - An analysis.
   d) Dr. Rajadurai - Management of lumbar spine tuberculosis - An analysis.
   e) Dr. Elango - Acute management of pelvic trauma - An analysis.
   f) Dr. Sarath Babu - Outcome analysis of various methods of stabilization of spondylolisthesis.
   g) Dr. Anjan - Anterior lumbar interbody fusion - An analysis.
   h) Dr. Navin - Management of osteoporotic fractures by locking compression plates - An Analysis.
   i) Dr. Jeyakumar - Management of periarticular fractures by locking compression plates - An Analysis.
   j) Dr. Ashok - Management of humeral fractures by closed interlocking nailing - An Analysis.
Winners don't do different things, they do things differently.

Shiv Khera