



# EUROPEAN ASSOCIATION FOR CRANIO-MAXILLO-FACIAL-SURGERY

## NEWSLETTER – SUMMER 2019

### ***MESSAGE FROM THE PRESIDENT PROF JEAN-PAUL MENINGAUD***



Dear Colleagues and Friends,

The first semester of 2019 was dense with our surgical routines, our miscellaneous teaching and/or research activities and the numerous congresses we all attended. Although this is invigorating it may also be exhausting. Hopefully for most of us refreshing holidays are approaching and an important occasion to rest and to share leisure with our families and friends. It is also a unique time to reflect on what has been achieved, what could be improved, and what should be discarded. A break is often necessary to let new ideas emerge, to change our paradigms and to escape from cause and effect chains.

The ICOMS in Rio de Janeiro was a peak this year. Our Association had an important Guest Society Session and played a significant role during the Congress. Foremost, we had a meeting with the Presidents of the other Regional Societies to reinforce our relationships. The activity of the EACMFS does not limit itself to participating in conventions. We are continuous with our aims to favour medical education throughout Europe and to influence the rest of the world with our standards of quality. We also dedicate time to help trainees make their dreams reality, not only thanks to grants but also through relevant and accessible information. In September 2019 we will have an important Executive and Council meeting in Paris to prepare future education and scientific events.

The preparation of our EACMFS 2020 congress in Paris is well underway. Almost all keynote and symposium speakers have confirmed their commitment. We have not deplored any refusal. Quite the contrary, their acceptance was always very enthusiastic. This fills me with joy as it is not always simple when you come from a remote area or when you have another important meeting which may interfere. We will have breath taking lectures. The social programme is almost set. Now we are working mainly on the Guest Society programmes. This will be the 50th anniversary of our Association and Paris, the old capital city, is getting glammed up to welcome you!

To finish with Virgil, « You get tired of everything, except learning ». Our specialty is so vast that we are sure to never get bored.

I wish you a very pleasant summer!

***Prof Jean-Paul Meningaud***

***President***



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### ADVANCES IN AIRWAY MANAGEMENT FOR HEAD AND NECK SURGERY

**Dr David Garry, MA (Cantab) MB BChir MRCP FRCA FFICM**

**Consultant in Anaesthetics and Intensive Care Medicine**

**Oxford University Hospitals NHS Foundation Trust**



Airway management for head and neck surgery proposes unique challenges for the anaesthetist, such as establishing and maintaining a complicated shared airway, in the context of increasing surgical complexity and increasing patient co-morbidities. Recent and ongoing advances in airway management focus on the outcome that matters most - a safer journey for the patient in the pre-, peri- and post-operative period.

More than 40% of cases reported in NAP4 were associated with disease processes of the upper airway or head and neck. The old adage “proper planning and practice prevents painfully poor performance” (the 7 Ps), is none truer than in airway management in this patient population. Airway checklists and passports are of great value for team planning including non-clinical skills, such as human factors that play a vital role in airway emergencies, where the surgeon and anaesthetist share an often-complicated airway.

High flow nasal oxygen (HFNO) is finding increasing favour in head and neck anaesthesia. It has been shown to vastly increase apnoeic oxygenation time in head and neck patients and can convert a difficult intubation from a hurried process into a more controlled event. HFNO is becoming more prevalent for fibre-optic intubation (both awake and asleep), as it can reduce the risk of hypoxaemia while optimising endoscopic conditions. It is also finding favour for surgical endoscopic procedures where it can provide an unobstructed view of an immobile larynx, while maintaining oxygenation for the duration of surgery.

Video laryngoscopy (VL) is being increasingly used in all areas of anaesthesia, and although it is not currently supported by robust evidence in head and neck cancers, it should be readily available in all clinical areas that care for these patients. The use of a VL with a curved blade can provide a clear image of a glottic view that would otherwise be unobtainable by conventional laryngoscopy.

Head and neck surgery can also present unique challenges for airway safety in the post-operative period. The use of an airway passport can provide a reliable focal point to initiate and document communication and handover with the clinical team providing post-operative care. Airway re-intubation after complex head and neck surgery can present predictable challenges and should be mitigated for. The increasing popularity of staged extubation sets should be considered, as they can help provide a reliable route for both oxygenation and re-intubation in the event of a failed extubation.



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### ***QUEST FOR THE SECOND DEGREE – MY EXPERIENCE!*** **SHOBHIT SAXENA**



“Wow, you guys have my respect.” “I could never go to university again!” “Are you crazy?” Working in oral & maxillofacial surgery (OMFS), my fellow junior trainees and I will have grown accustomed to hearing such declarations from our medical colleagues.

Such is our species: an anomaly in the landscape of medical career ambitions, a curious band of self-selecting, autonomous individuals for whom the worn-out cliché “it’s not the destination, it’s the journey” could not ring any truer.

What a journey it is indeed. My own started in my final year of medical school in 2014, whilst sitting in an OMFS clinic and contemplating one of life’s more mystifying, barely comprehensible structures: the human tooth. I was aware that to enter OMFS specialist training in the United Kingdom, both a medical and dental degree would be required. At first, I desperately tried exploring the simpler alternatives, the paths already well-trodden and ones that would save me a second, (costly) trip into higher education: otolaryngology and plastic surgery. But alas, even the combined allure of tonsils, grommets, hands and burns could not win me over; no other speciality could offer me what OMFS could, I knew.

I was now careful to select one of the few post-graduate Foundation Programmes (otherwise known as: “Baptism by Fire for Junior Doctors”) that would offer me my first, much anticipated experience of working in OMFS. As it happened, my four-month post at the John Radcliffe Hospital in Oxford only further cemented my love of the specialty, and I was now left with the dilemma: shall I go straight into my second degree, or wait until I have completed two years of basic surgical training first? I opted for the former, preferring to go through two years of intensive surgical training and hoping that this momentum would confidently launch me into OMFS speciality training, seamlessly and with no interruptions in between.

I am now in the penultimate year of my graduate-entry dental degree at King’s College London, all the while working as a part-time clinical fellow in OMFS at a Northwest London Hospital. Balancing dental caries, periodontology, exodontia, crowns, bridges and dentures with marriage and the MRCS has been a complicated and yet completely refreshing experience. Also, whilst I am secretly relishing being regarded as the “old, wise man” amongst my undergraduate colleagues and gaining invaluable experience in OMFS through my part-time work, I now realise that the “journey” we take in OMFS is *anything but* cliché. It’s certainly not over yet and I am planning on enjoying every minute.



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### EXPERIENCES OF HUGO OBWEGESER SCHOLARSHIP AWARDEES

#### - Ana Avellaneda, Spain

Visit to Kopfklinik in Heidelberg University Hospital - Professor Dr Jürgen Hofmann

#### - Pedro Gomes de Oliveira, Portugal

Visit to Clinica Alemana, Santiago, Chile – Dr Julio Cifuentes

#### - Gauri Vithlani, UK

Visit to GSR Institute of Craniofacial Surgery, Hyderabad – Prof Gosla Reddy

#### Ana Avellaneda



In 2018, I had the pleasure to spend several weeks at the Kopfklinik in Heidelberg University Hospital thanks to Professor Dr Jürgen Hofmann and the EACMFS.

During my stay I was able to gain experience in Craniofacial surgery, which was my first goal in this first visit. Prof. Dr Hoffmann and his great team offered me the opportunity to attend and assist at many different live surgeries, meetings, patient rounds, and feel integrated as a part of the staff in Mund-Kiefer-Gesicht Chirurgie department.

Prof. Dr Engel contributed to my Craniofacial learning by explaining, showing and allowing me to participate in his surgeries which I cannot even observe at my own host program for training due to the lack of cases received.

Prof. Dr Frier was my mentor in the Oncology-Reconstructive field which I strongly appreciated, and I had the chance to experience several flap lifting and subsequent microsurgery to insert it into the oral cavity. It was a pleasure to share those hours with all the operation room team.

Dr Khüle was a great support and Prof. Dr Freudlsperger opened my mind regarding orthognathic surgery.

I can only be thankful for the period I spent at Heidelberg Kopfklinik and will look forward to visiting them again. Learning was the main goal, but I was delighted by the warm feeling received from the team. I encourage every trainee to apply for this educational opportunity.

Besides the surgical field, such an experience offers many other incentives. The city itself is beautiful, historically relevant and the site is in the centre of Europe. I took the time to get to know Alsace. I am in love with Germany and it is another reason to go back and visit.

I would like to thank Prof. Hoffmann for all the facilities and help given during my stay. I have visited three foreign hospitals during my training program and without a doubt, due to the very warm welcome extended to me, I would certainly repeat a visit to Heidelberg University Hospital. No doubt!

I would also like to thank the European Association (EACMFS) for the privilege of using the award to extend my education. Thank you so much.

## Pedro Gomes de Oliveira



I am a fifth year OMFS trainee doing my residency in Lisbon, Portugal. I was always very interested in orthognathic surgery and specially on its role in the treatment of Obstructive Sleep Apnoea Syndrome patients. With the Hugo Obwegeser Travelling Scholarship I received from EACMFS, I was able to travel all the way to beautiful Chile, precisely to the *Clinica Alemana*, in Santiago, to observe the work of maxillofacial surgeon and orthognathic surgery specialist, Dr Julio Cifuentes.

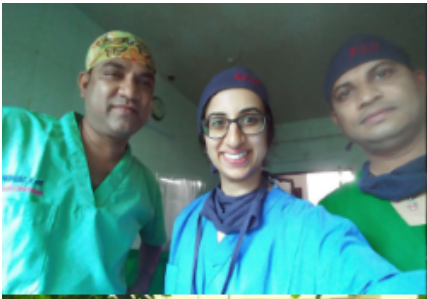
I stayed and studied with him for 4 weeks and received the warmest welcome from Dr Cifuentes and all the staff in *Clinica Alemana* and his office. By observing every treatment step, from first appointments, diagnosis processes and treatment proposals, all the way through long term post-operative patient follow-ups, I was able to interact with a large set of orthognathic surgery patients in a fairly short amount of time. I accompanied him in all his clinical activities and fully understood the importance of working with an efficient multidisciplinary team. I was fortunately allowed to assist on every orthognathic surgery performed during my stay, discussing pearls and pitfalls of his technique. We also discussed the constant-evolving changes in orthognathic surgery technique and treatment planning, especially with the uprising of 3D virtual surgical planning and intra-operative imaging systems.

I was genuinely amazed by the substantial number of Obstructive Sleep Apnoea Syndrome patients that sought his care after failure of the most traditional, first-line therapies. I was able to see first-hand the differences in treatment of this very particular group of patients. Dr Cifuentes and his multi-specialty team have developed an algorithm for patient selection and optimization, which allows him to deliver great results and high rates of clinical success and patient satisfaction.

As a restless traveller, I enjoy the challenges of a new country and I'm constantly looking for the next adventure. Being an amateur surfer and rock climber, I just managed to squeeze into my trip to Chile some of my favourite activities, improving even more this unforgettable experience. My stay in Chile showed me a country full of history, beauty and probably the most welcoming people I have ever came across.

I also take this opportunity to thank everyone at *Clinica Alemana* and particularly Dr Cifuentes for allowing me to learn from his decades of expertise and for doing everything to ensure I had the best possible experience. This was undoubtedly an amazing opportunity for learning and growth, to connect with a highly reputed centre and surgeon and to compare with my own reality, which I will try to improve with this new knowledge. I am convinced I have honoured the purpose of Prof Hugo Obwegeser Scholarship Award and, in some small way, his legacy of never-ending search for improvement and sharing of knowledge.

## Gauri Vithlani



I am grateful to the EACMFS for the Hugo Obwegeser Scholarship, which allowed me to travel to the GSR Institute of Craniofacial Surgery, Hyderabad, Andhra Pradesh, India for six weeks on my medical undergraduate elective.

The GSR Craniofacial Institute was set up in 2000 by the Hyderabad Cleft Society headed by Professor Gosla Reddy, Founder and Director. This Hospital specialises in cleft and craniofacial conditions, with a catchment area of 1000 kilometres enabling access to care for patients from rural districts.

The Hyderabad Cleft Society also provides a foundation for the Cleft School Project, which provides accommodation, education and regular therapy to children treated at the Institute. Whilst visiting the school on several occasions, I was struck by the affectionate and ambitious nature of the children.

At the GSR Craniofacial Institute I participated in clinical activities including outpatient clinics, preoperative patient assessments and operating theatres.

Within the outpatient department I learnt how the initial assessment, treatment planning and follow-up care of patients is undertaken. I participated in the paediatric and pre-anaesthetic assessment of patients. Within the operating theatres I was able to observe and assist with a range of cleft lip and palate operations. This included primary repair of the cleft lip and cleft palate, secondary cleft palate surgery including management of junctional fistulae and velopharyngeal insufficiency, secondary alveolar bone grafting to the cleft maxilla, premaxilla setback, distraction osteogenesis, Le Fort 1 osteotomy for cleft maxilla, and cleft rhinoplasty. Additionally, I assisted with cases of vascular malformations, TMJ ankylosis, cryptotia repair and appreciate the management of craniofacial clefts.

I took the opportunity to participate in the Amrita Asian Craniofacial Congress in Kochi, Kerala, and represented GSR Craniofacial Institute by presenting some of their work on "The soft tissue management of Craniofacial Clefts". This was a good chance to discover more about the field of craniofacial surgery.

This undergraduate elective was a fascinating introduction to cleft and craniofacial surgery and improved my understanding of the scope and remit of these fields. Additionally, I learnt about the healthcare infrastructure in India and how the Institute provides access to care for many distant communities.

I explored the cultural and social aspects of the city, including visiting Chowmahalla palace, Birla Mandir (temple), trekking up Golkonda fort, soaking up the atmosphere at Charminar including the bustling market leading up to this monument, and boating on the Hussein Sagar (lake). My trip to Kerala for the conference was an opportunity to stop by the scenic tea plantations in Munnar, a hill station in the south of India. I thoroughly enjoyed the local cuisine including Hyderabadi Biryani, Haleem, Masala Chai and Pani-Puri.

I was very grateful to the hospitality extended by all the staff at the Institute. Overall this experience was enriching professionally, academically and personally. I would like to thank the EACMFS for their generosity in enabling me to take advantage of this excellent learning opportunity.





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### EXPERIENCES OF PROF JOHN LOWRY CONGRESS SCHOLARSHIP AWARDEES 2018

- Christos Georgiou, Greece
- Mervyn Hutson, Ireland
- Carsten Rendenbach, Germany



#### Christos Georgiou



Undoubtedly, my participation in 24<sup>th</sup> EACMFS Congress last September in Munich was a fascinating scientific experience which enabled me to see how our complex specialty evolves continuously and steadily “Facing the Future”, according to the official motto of the Congress.

The Mondays just before the official start of the biennial EACMFS have been established for us, the young surgeons across Europe, as a kind of a delicious scientific appetizer due to the John Lowry Educational Session and Trainee Business Meeting. In the morning, I had the chance to attend the Stryker Trainee Course for Cranio-Maxillo-Facial Reconstruction: Sawbones workshop for trainees, where we focused on preplanning cutting guides and participated in trainee workgroups for hands-on about mandible reconstruction with fibula. After that, during the Educational Session, renowned experts such as President of the Congress, Klaus Dietrich Wolff, Rui Fernandes and Edward Ellis gave ‘state of the art’ lectures and presentations on microvascular flaps, trauma and oncology reconstruction.

Furthermore, with reference to the main scientific program that commenced on Tuesday 19 September, I was impressed by its broad variety that covered the wide spectrum of our unique medical and dental specialty. Highlighting key points from the main program, I would like to point out the keynote lecture of Dr Eduardo Rodriguez from New York on Facial Reconstruction using free flaps and the Symposium on Surgery of the TMJ, chaired by Dr Andreas Neff.

Moreover, on Wednesday morning I had the pleasure to make my oral presentation in the Hilton Hotel concerning "Palatal necrosis in cocaine abuse. The use of a modified palatal flap vs conventional flap." For this occasion, I would like to thank Professors Tilaveridis, Ioannis and Zouloumis Lambros from Aristotle University of Thessaloniki for their support.

On the last day of the EACMFS Congress, I had the great chance to participate in a very interesting and special all-day symposium for paediatric surgery, organized by AO-CMF. Last but not least, the surprise was the massive participation of oral and maxillofacial surgeons in the official run through Englischer Garten of Munich!

In conclusion, I consider that the overall impact of this event to my educational horizons was important and I have learned new theoretical and practical skills that I plan to use in my practice.

Apart from the scientific and professional part, last year my family had the blessing to welcome our new member, our beloved son who was born only a few days before the official start of the European Congress of EACMFS. Also, on the occasion of my presence in Munich for the EACMFS Congress I had the opportunity to make in the Greek community of the town, a lecture about medical volunteering in orthodox missions of the Africa, which I visited before some years.

## Mervyn Huston



Having attended my first EACMFS meeting in London in 2016, I knew the Munich Conference was going to be a great success. The event caters for all specialisms in the arena of Cranio Maxillofacial surgery ranging from dentoalveolar surgery, through to complex oncological reconstructive surgery. The myriad of symposia, discussion and free paper sessions provided ample opportunity to explore the latest evidence from leading surgeons in their field. As with all conferences, it cannot however be all work and no play, and the packed social schedule provided us all with a warm taste of welcoming Munich culture and opportunity to meet and catch up with friends old and new. It was a privilege to have been awarded the John Lowry scholarship to assist with participation in the conference.

Having graduated in Dentistry, I am currently studying medicine in Trinity College Dublin, in order to pursue a career in Oral and Maxillofacial Surgery. However, this academic year I am undertaking an intercalated MSc course in Translational Oncology – with a special focus on oral cancer. My current interests therefore lie in the field of oral premalignant and malignant conditions. I was fortunate in having been selected to present two oral free papers at the conference, which provided me with great personal satisfaction.

Outside of my studies, I have a keen interest in music and motor mechanics. I play the violin, and though am classically trained, I particularly enjoy traditional Irish music. Additionally, I am currently restoring a 1962 Triumph 350cc motorcycle in my free time. Indeed, many of the fine technical and manual dexterity skills learned in the operating room serve me well in the workshop.

I am very much looking forward to EACMFS Paris 2020!



## Carsten Rendenbach



The Congress in Munich was a great experience with many interesting presentations and numerous opportunities to meet colleagues and friends from many countries and I am very grateful for the EACMFS' support with a John Lowry Congress Scholarship. Particularly, I enjoyed Prof. Swennen's masterclass on orthognathic surgery, Prof. Schliephake's presentation on tissue engineering and discussions with leading experts in the field of my research activities. Prof. Wolff's welcome speech with a focus on supporting the next generation was inspiring and motivated me a lot.

Currently, I am privileged to work in a great team at Charité Berlin under the guidance of Prof. Heiland and with co-promotion of the Berlin Institute of Health (BIH) within a Clinician Scientist Program. I am about to finish both my residency and postdoctoral thesis in 2019 and I will continue with my surgical activity and research projects on magnesium-based fixation systems for maxillofacial indications and the mechano-biology of mandible reconstruction.