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AWARD REPORT

DATE	05/08/2023
MEMBER NAME	Ana Tache
COUNTRY	Doleium
COUNTRY	Belgium
POSITION	Oral and Maxillofacial Specialist
MEMBERSHIP CATEGORY	Active
NAME OF AWARD	
(ie Hugo Obwegeser,	Leibinger
Leibinger etc)	
LOCATION/DATE OF VISIT	Paris
	20 February-5 March
	3 -16 April
NAME OF HEAD OF	Prof. Arnaud Picard
DEPARTMENT OF UNIT VISITED	Chirurgie maxillo faciale et chirurgie plastique pédiatrique-
VISITED	Hôpital Necker-Enfants Malades
LOGBOOK - during visitation, if applicable	
(please add as addendum)	
SPECIFIC EXPERIENCE GAINED:	



My interest in cleft surgery begun as a trainee in Belgium. It is a part of our specialty that requires not only surgical skills, knowledge but creativity and a lot of dedication and patience in dealing with our young patients and parents. As such I started in-depth research to further expand my expertise which finalized with a doctoral thesis in 2022. Following my training I continued as a fellow in the Cleft Team of the University Hospital Basel, Switzerland.

Therefore, I was honored to be awarded the Leibinger prize at the highly renowned center in Paris- Hôpital Necker-Enfants Malades to further pursue my interest. The department of Maxillofacial surgery and pediatric plastic surgery led by Professor Arnaud Picard is a reference center for facial clefts and facial malformations with the highest number of cleft patients treated in the country. Hereby I want to thank EACMFS society and Stryker for making this opportunity possible.

On my first day I had a very warm welcome and I was taken directly to the operating theater. I was positively surprised to discover that most of the days the maxillofacial department runs two OR's simultaneously. I was explained that the medical team includes a majority of maxillofacial surgeons followed by plastic surgeons, dentists, orthodontists, speech therapists, psychologist and dental lab technicians. Together they manage the treatment of patients from birth (or age of diagnosis) to the end of growth (18/21 years).

In summary the primary cleft protocol used by the Paris team is:

- 4-6 months cheilorhinoplasty, soft palate closure -intravelar veloplasty (Sommerlad)
- 18-24 months hard palate closure
- 4-6 year gingivoperioplasty and Alveolar Bone Grafting with iliac bone graft

I had the opportunity to assist in multiple primary cleft surgeries as well as secondary surgeries. Every Monday in one of the operating rooms only patients with velopharyngeal incompetence are surgically treated, cleft and non-cleft patients.

I assisted secondary rhinoplasties, maxillofacial trauma's, lipofilling, secondary lip corrections, commissuroplasty as well as mandibular distraction osteogenesis in hemifacial microsomia patients.

Of course, orthognathic surgery represents one of the last surgeries that the patients underwent, and I had the chance to assist several of them. Cases are virtually planned by the engineers of Materialise using Proplan CMF, a software I am extremely familiar with. The difference between their approach and the one mostly used in Belgium is: in Paris they prefer PSI-guided orthognathic surgery (cutting guides, and 3d printed osteosynthesis plates).

A surprisingly high number of children with extended melanocytic nevi and hamartroma's are



operated every week in the department, type of surgery that I have hardly seen before.

I also had the opportunity to assist in TMJ open surgery cases, meaning ankylosis treatment in pediatric patients.

In the evenings and weekends, I had the chance to walk the streets of the beautiful city and to enjoy the Parisian lifestyle.

OBJECTIVES FOLLOWING VISITATION:

Learn about the surgical cleft lip and palate protocol that Prof. Picard promotes, in order to compare outcomes and improve our own protocol where needed.

Expand my expertise in pediatric plastic surgery.

FEEDBACK

Professor Picard was extremely welcoming, with a great sense of humor and I applaud him for the effort he has made to fight for our discipline and to keep the treatment of cleft patients in our specialty.

His department team embraced me from the beginning of my visit as part of the team. I encourage my colleagues to apply for an educational opportunity in his department and the high number of young women surgeons in his center is encouraging for the future of our surgery field.