

## 1ST FFN GLOBAL CONGRESS: A COMMENTARY

by Colin Currie, Geriatrics Lead Clinician  
UK National Hip Fracture Database

The 1st Global Congress, held in Berlin from 6 to 8 September 2012, marked a very significant advance in the development and impact of the Fragility Fracture Network.

The Congress was indeed truly global, with over 300 participants from different nations and all five continents; and its diverse and rewarding programme of expert symposia and parallel sessions – including workshops, master-classes and submitted papers – covered the entire FFN agenda. Importantly, in its scope and scale the Congress far exceeded last year's inaugural Fragility Fractures Network Expert Meeting – surely an indication that the FFN is an idea whose time has come.

Once again Berlin in autumn proved welcoming, and together Congress Chair Prof Karsten Dreihöfer and FFN President David Marsh set the scene for two and a half days of wide-ranging, sometimes challenging and always informative sessions: most characterised by lively discussion that reflected specialist expertise, the essentially interdisciplinary response to the fragility fracture challenge, and the many differing systems of care within which participants worked.

No brief account of proceedings can do justice to the range and diversity of the mee-

ting, and happily the great majority of its contributors have agreed to make their presentations available on the FFN website, to which members who may wish to study them in detail have free access.

Early sessions provided an overview of pre- and peri-operative fracture assessment and treatment, with views from international experts followed by a series of submitted papers ranging over these topics, and also policy and practice, and fracture prevention. Controversial case sessions provided useful views in common situations – such as hip fracture in the frailest and sickest – where evidence is thin but expertise useful.

One of the real strengths of the FFN became evident in a session addressing developments in the understanding and treatment of osteoporosis. The FFN, by bringing clinicians from orthopaedic surgery and geriatric medicine together with experts in relevant emerging bone science and in the provision of fracture liaison services, is visibly creating a coalition of potentially great influence in advancing fracture care and prevention, and – through being stronger together – creating in more and more nations powerful lobbies that can influence policy too.

That political challenge was explicitly addressed over the course of the second day of Congress, with due recognition of the very diffe-

rent national contexts encountered in such efforts. However, progress made over the last 30 years in the audit of hip fracture care – a uniquely serious, common and costly fragility fracture – was seen as providing potential leverage in promoting political awareness of the wider global epidemic of osteoporotic fractures, with encouraging experience in a few nations, and growing interest in similar developments more widely across the world.

Final sessions covered the important and so far under-recognised topic of post-acute care and rehabilitation of fracture patients, and the challenges of research and education in bone healing, fracture prevention, and clinical research.

Clearly, the Fragility Fracture Network has made immense progress since its inaugural event in 2011. The enthusiasm, commitment and lively interactions evident in the formal sessions of the 2012 Congress and – just as importantly, if not more so – in the coffee breaks, lunch breaks and a thoroughly enjoyable official networking evening over drinks, together provide grounds for optimism about the further progress and increasing impact of the Network in coming years. The 2nd Global Congress, also to be held in Berlin, seems likely to be even better than the 1<sup>st</sup>.

## THE PRESIDENT'S MESSAGE

By David Marsh, President

*FFN in 2017—A 5 Year Strategic Plan*

*The FFN in its present form was established in August 2011 and registered in Zurich, Switzerland. Its first General Assembly in September 2011 adopted the Articles of Association and elected its first Board and Officers. Since then its membership has grown to 288, with a reasonable balance of disciplines and a large number of countries represented in all regions of the world. Its mailing list contains 1,400 contacts. The FFN has held symposia at national and regional meetings in a variety of countries and its mission - to promote globally the optimal multidisciplinary management of the patient with a fragility fracture, including secondary prevention - is now known to many healthcare professionals.*

*The FFN does not aim to compete with other established organisations active in the field of fragility fractures. Rather, in the spirit of its parent the Bone and Joint Decade, it aims to function as a network of activists that catalyses the collaborative efforts of members of those organisations to bring about practical changes in the way fragility fractures are prevented and managed across the world.*

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## FFN JAPAN MEETING — A REVIEW

by Hiroshi Hagino, Member of the FFN Scientific Committee

**On 10 November of this year, more than 100 multidisciplinary medical professionals participated in the FFN-Japan meeting held in Kyoto.**

At the beginning of the meeting, the history of the establishment and purpose of FFN were presented by Professor David Marsh. Following this, three presentations on the current state of fragility fracture treatment from each Asian region were given.

Then, at the sponsored symposium, a liaison nurse from Australia and a geriatrician from Japan had lectures on the current state and future prospectus of their activities. The afternoon session included four lectures on fracture healing related to osteoporosis, rehabilitation for fragility fractures, as well as an AO session lecture.

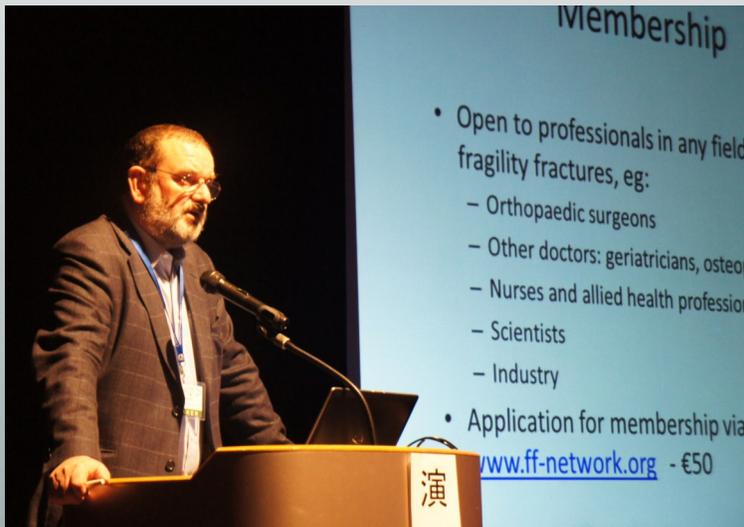
Finally, Professor Marsh gave a presentation on "How to drive policy change?" Subsequently, the FFN and its activities as well as the importance of multidisciplinary management for fragility fractures were fully recognized and reinforced in Japan at this meeting.

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*We know that practical change occurs on a national level; the Network facilitates this by providing a forum for lessons from one country to be applied in another.*

*The strategic goal of the FFN over the next five years is to develop the network to the point where the relevant disciplines are engaged in as many countries as possible. The key relevant disciplines are orthopaedics, geriatrics and rehabilitation, osteoporosis, and nursing. A unique selling point of the FFN is that, compared with other global organisations, it has strong orthopaedic participation, while being quintessentially multidisciplinary. The academic dimension must be fully integrated in the network, including education and basic science. At some point it will be crucial to formally include the patient voice.*

*Our relationship with industrial partners is important since it provides funding and an interface with their own networks; in return, they benefit from the raising of the issue up the healthcare agenda and consequent expansion of the market. We would aim to have ten to twelve industrial partners by 2017, constituted as a Corporate Advisory Council that contributes to strategic direction. This would provide funding sufficient to guarantee financial viability in the long term.*



Prof. David Marsh, President of FFN, at the FFN Japan Meeting



Poster of the FFN Japan Meeting

## BJD-FFN MEETING AND MUSCULOSKELETAL DISEASES AND FRAGILITY FRACTURES (MDFF) 7TH EDITION

by Ghassan Maalouf, Vice Chair of the FFN Scientific Committee

**The seventh edition of the MDFF, held jointly with the Bone and Joint Decade (BJD) and the Fracture Fragility Network (FFN), took place on November 23-25, 2012, at the Bellevue University Medical Center, in Lebanon in what turned out to be a constructive, rich and warm atmosphere bringing together a full audience of Lebanese physicians and a high-level course faculty.**

The opening ceremony, which was held in honour of Lebanese Orthopaedic surgeon Prof. Fernand Dagher, brought together some 150 people. The keynote speakers were Dr. Dia Hassan, President and CEO of the BMUC, Prof. Jean-Pierre Courpied, President of SOFCOT, Prof. Ismat Ghanem, President of the MDFF Scientific Committee, Prof. Roger Jawish, President of the Lebanese Orthopaedics Association, Prof. Charaf Abou Charaf, President of the Lebanese Order of Physicians, and the representative of the Minister of Health, Mr. Ali Hassan Khalil, as well as Prof. Fernand Dagher, who was presented with a commemorative plaque for his lifetime achievements. *Continuation on page 3*



## FFN FACTS & FIGURES

Foundation of FFN: August 18, 2011

Number of members for 2011: 75

Number of members for 2012: 288

Executive Committee: 7

Board: 15

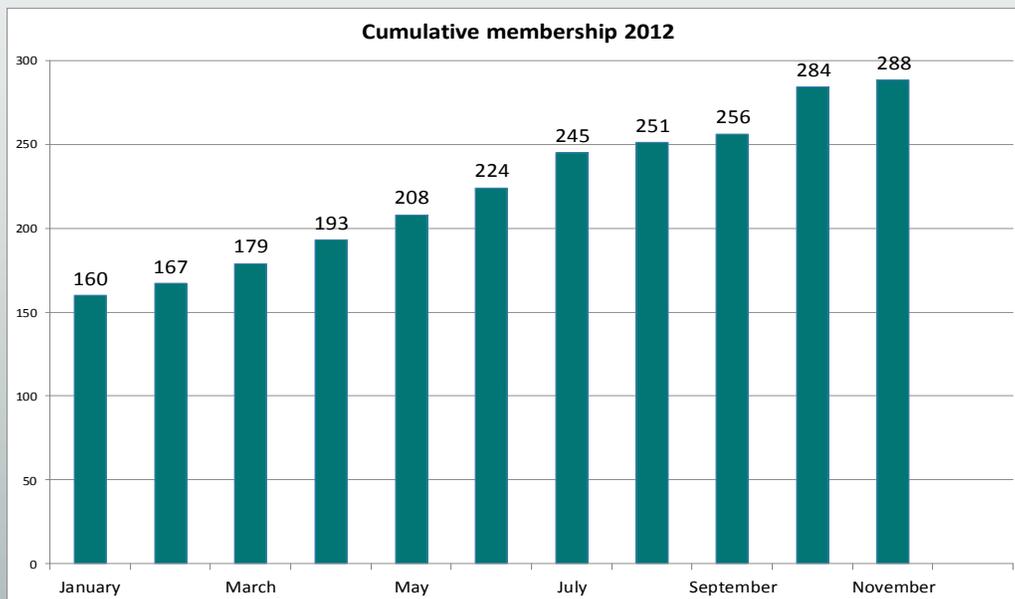
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The course took place over a day and a half, and was attended by some 100 physicians, mainly from Lebanon and some from other countries in the region, with the presence of the main medical and pharmaceutical company representatives in the region.

The speakers were:

Jean-Pierre COURPIED, Professor of Orthopaedic Surgery, Head of the Orthopaedic Department at Cochin Hospital, President of the French Orthopaedics Society SOFCOT

Jean PUGET, Professor of Orthopaedic Surgery, CHU-Rangueil, Toulouse, and Chairman of CRIOAC (Centre de Référence des Infections Ostéo Articulaires Complexes) du Grand Sud Ouest.

Socrates PAPAPOULOS, Professor of Medicine, Leiden University Medical Center, The Netherlands, Board member of the International Osteoporosis Foundation

Serge FERRARI, Associate Professor of Osteoporosis Genetics and Medicine at the Geneva Faculty of Medicine, Medical Associate at the Department of Rehabilitation and Geriatrics of the Geneva University Hospital, and Vice-chair of the council of scientific advisors of the International Osteoporosis Foundation

Heinrich RESCH, Professor of Medicine, Medical University Vienna, Head, Department II Rheumatology/Osteology (St. Vincent Hospital)

Pierre HOFFMEYER, President of EFORT

Samir ELBADAWY, Professor of Rheumatology, Cairo University

Philippe ANRACT, Orthopaedic Oncology Surgery, Cochin University Hospital

Ismat GHANEM, Professor of Orthopaedic Surgery, Paediatric Orthopaedic Surgery, President of the Scientific Committee

Ghassan MAALOUF, Chairman of the Musculoskeletal Department, Bellevue University Medical Center



## 2ND FFN GLOBAL CONGRESS, AUGUST 29-31, 2013 IN BERLIN

by Karsten Dreinhöfer, Congress Chair and David Marsh, President

Dear Colleagues,

Dear Ladies and Gentlemen,

FFN invites you to join the 2nd FFN Global Congress 2013 in Berlin, Germany from 29–31 August 2013. FFN was established in 2011 under the aegis of the Bone and Joint Decade. Its annual meeting is an international congress addressing the full pathway of care for fragility fracture patients. Its themes include perioperative care, surgical treatment, rehabilitation, secondary prevention, research and policy change.

The FFN Global Congress consists of invited international experts, plenary discussions, update sessions and free papers. The congress provides a unique platform to learn about new technical developments, state-of-the-art procedures and interaction with leading Orthopaedic Surgeons, Non-surgical MD's, Nurses and Nurse Practitioners, Scientists, and Allied Health Professionals.

We are looking forward to welcoming you in Berlin in August 2013!

### Updates on

- Peri-operative management
- Fracture management
- Rehabilitation after fracture – functional and social
- Prevention of new fractures
- Research in fragility fractures
- Changing policy

### Tool Kit Sessions

- How to set up a fracture liaison service
- Designing an integrated hip fracture pathway
- Comprehensive rehabilitation order sets

### Additional

- Free papers
- Controversial cases



### Abstract Submission

**Deadline: 31 May 2013**

The Scientific Committee invites authors to submit their abstracts for consideration and inclusion in the programme at [www.ffn-congress.com](http://www.ffn-congress.com). Please note only electronic submission will be accepted. Detailed instructions can be found on the congress homepage.

### Registration

Online registration at [www.ffn-congress.com](http://www.ffn-congress.com) is the most preferred way. Participants are requested to register in advance by completing and submitting the registration form online with appropriate fees.

Visit us on [www.ffn-congress.com](http://www.ffn-congress.com)

## ISSUE 3, DECEMBER, 2012

### 2ND NATIONAL GISOOS CONGRESS

by Umberto Tarantino, Member of the FFN Nominations Committee, President of the GISOOS Congress and Giuseppina Resmini, President of the GISOOS Congress

**From 29 November to 1 December 2012 the 2nd National GISOOS (Gruppo Italiano di Studio in Ortopedia dell'Osteoporosi Severa) Congress was held in Bergamo who continued the cultural enrichment in the field of Orthopaedic and Traumatology in terms of fragility fractures and osteoporosis.**

The National Congress has provided theoretical and practical guidance aimed at optimizing the diagnostic-therapeutic pathway in patients with fragility fractures. The event educational objectives were:

- Stimulate the Orthopaedic specialist to the role of main actor in the management of fragility fractures
- Implement the knowledge of etiopathogenesis and clinic of the most common metabolic bone disease with both primitive and secondary bone fragility
- Identify the main pathways dedicated to fragility fractures
- Document the effectiveness of the integration of surgical and drug therapy
- Suggest new strategies for diagnostic / therapeutic management of fragility fractures.

The conference was also an important opportunity for discussion among orthopaedic specialists, radiologists, endocrinologists, anesthesiologists, physiatrists, geriatricians and general practitioners in the field of bone fragility and osteoporosis.

Guest of honor was Professor David Marsh, Emeritus Professor of Clinical Orthopaedics at University College London and President of Fragility Fracture Network, who held a lecture entitled "Fracture healing in the fragility fractures."

