President’s message

Steven D.K. Ross, MD, Presidential Address, Annual Summer Meeting, Toronto Family, Friends and Colleagues:

I have to admit that I am humbled by the great honor that you have bestowed upon me. The opportunity to lead this great Society is the highlight of my career, and I will do everything in my power to live up to the standards of those who have preceded me. You have a great team working on your behalf. Zan Lofgren and the rest of the staff have made remarkable strides in making our AOFAS efficient and professionally managed. They are the glue that binds this volunteer organization together.

This brings me to the topic of my address to you. I would like to discuss our strategic plan and how each and every one of you is important to carrying out our mission. I know I will hear a few groans when I mention ‘strategic plan’ and I do not plan to bore you to tears with the details, so you all can breathe a sigh of relief.

One of the great things about being involved with this organization is that I occasionally have the time to talk with members about topics that are not directly related to the business of the day. We can discuss our families or the latest books that we have read. One of these conversations was with Charlie Saltzman. We were talking about motivation of volunteer members and he mentioned a book by Robert Putnam entitled, Bowling Alone. It took a while but I finally wandered through all 500 pages and it helped me to organize some of the thoughts that I want to share with you today.

Social capital

First, I want to talk about social capital. L.J. Hanifan wrote in 1916 that social capital referred to “those tangible substances that count for most in the daily lives of people: namely, good will, fellowship, sympathy, and social intercourse among the individuals and families that make up the social unit.” He says, “The community as a whole will benefit by the cooperation of all its parts, while the individual will find in his associations the advantages of the help, the sympathy, and the fellowship of his neighbors.”

For those of you that understand baseball philosophy, Yogi Berra gave a very succinct definition of social capital when he said, “If you don’t go to somebody’s funeral, they won’t come to yours.” Organizational records show that for the first two-thirds of the twentieth-century Americans’ involvement in civic

See President’s message, page 2

David B. Thordarson, MD named new Editor-in-Chief of Foot & Ankle International

On January 1, 2008, David B. Thordarson, MD, will assume his role as the fifth Editor-in-Chief of Foot & Ankle International (FAI). He is spending the latter months of 2007 transitioning to this role and will assume full responsibility by January 1, 2008. In his new role he will work with the associate and managing assistant editors in selecting and editing the content of the journal.

Dr. Thordarson has been an active member of the AOFAS since 1994 including two years as a member of the Board of Directors from 2004-2006. He has chaired the Education Committee, co-chaired the 2006 Advanced Foot and Ankle Course, and will serve as chair of next year’s Advanced Course in May in San Francisco. He has extensive experience in manuscript review including as a consultant reviewer for the American Journal of Bone and Joint Surgery since 1996, a consultant reviewer and associate editor for the Journal of Orthopaedic Trauma since 1998, and a reviewer and subsequently an assistant editor for Foot & Ankle International since 2001.

A full-time academician, Dr. Thordarson is Professor and Vice Chair, Residency Director, in the Department of Orthopaedic Surgery at the University of Southern California in Los Angeles.

AOFAS is excited about Dr. Thordarson’s new role with FAI and his strong feelings about the future of the journal. As he says, "Foot & Ankle International is the premiere foot and ankle publication in the world. Under Dr. Greer Richardson’s leadership, it has improved significantly over the last few years. My plan is to build on that success with a few key focuses. The goal of all future changes of FAI will be to improve its value to the AOFAS membership and increase the level of interest of the readers. High quality clinical papers will remain the cornerstone of the journal.”

Equally enthusiastic about FAI’s new leadership, Dr. Richardson says, “I am very confident that FAI will be in good hands with Dr. David Thordarson at the helm. His conscientious attention to detail and his commitment to producing a quality journal for our specialty will ensure the continued excellence of FAI.”

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President’s message  
continued from page 1

associations of all kinds rose steadily. During the last third of the twentieth century, formal membership in organizations has declined as much as twenty percent. More important, active involvement has collapsed at a much higher rate. Many Americans continue to be members of various organizations but most of us do not give much of our time to the actual work that is required.

Our readiness to help others

Another part of social capital is altruism; our readiness to help others. Social philosopher John Dewey rightly emphasized the distinction between “doing with” and “doing for.” Social capital is enhanced by doing projects with our members, not just doing things for others. We need to develop programs in which we are showing our altruism in helping others while building social capital in our own organization. That can only be done when we are doing these activities with other members. Altruism is an important diagnostic sign of the amount of social capital that an organization possesses. I am so proud of the foresight of our leadership in the development of the OEF and the Vietnam project because this is a classic example of improving the social capital of the organization. I just hope that we can continue to expand this concept, and I encourage each and every one of you to contribute what you can. Your time would be the greatest gift but your money would also be accepted.

It is an interesting fact that people who are involved in community and social networks are more likely to not only volunteer but also to give money. It is also very well established that civic engagement when young is one of the strongest indicators of who will be involved throughout their lives. It is therefore essential that we continue to encourage our youngest members to be active participants, and it is incumbent upon all of us to ensure that they have those opportunities. Our job is to mold our social capital to accomplish our strategic plan (see, I did get back to that!).

I want you to understand that without the development of adequate stocks of social capital our associations don’t work as well, that our individual health and happiness is affected, and that we will be less effective in dealing with society’s decision makers who have such a great impact on each of our lives.

There are well established connections between social connectedness and health and well-being.

Social connectedness

Social connectedness matters to our lives in very profound ways. Sociologist James House concluded after reviewing the scientific literature that the positive contribution to health made by social integration and social support rival in strength the detrimental contributions of well-established biomedical risk factors like cigarette smoking, obesity, elevated blood pressure, and physical inactivity. People who are socially disconnected are between two- and five-times more likely to die from all causes, compared with matched individuals who have close ties with family, friends, and the community. What these studies show us is that social engagement actually has an independent influence on how long we live.

So, how much interaction is enough and is more interaction better? There is good evidence that there is little to be gained in health or happiness when contributing to a volunteer organization more than once a month. So you can breathe a little easier that I will not be asking you for any more than that. I know that there are questions running around in your mind about the benefit of a strong AOFAS with extensive social capital. How can a small organization have an impact on the major issues in health care confronting us all? Here is where I want to digress to discuss how little things can make a big difference.

Malcolm Gladwell, in his book, The Tipping Point, makes the argument that the emergence of any number of mysterious changes that mark everyday life such as fashion trends, the ebb and flow of crime waves, the rise of teenage smoking, or the attitude of families in seeking health care, can be thought of in the way that we think of epidemics. “Ideas and products, and messages and behaviors spread just like viruses do.” The second characteristic of many of these changes is that a small initiating event can have a very large effect. Mr. Gladwell talks about the three laws of epidemics; the law of the few, the stickiness factor, and the power of context. These laws offer us a way of making sense of epidemics and they provide us with direction for how to go about reaching a tipping point that will benefit our community.

The law of the few tells us that the right people at the right time can have a powerful influence on change. Certainly Paul
AOFAS announces 2007 Board of Directors

At the Society’s 2007 Annual Summer Meeting in Toronto, Ontario, Canada, Steven D.K. Ross, MD was installed as President and Robert B. Anderson, MD was elected as President-Elect, both to serve one-year terms. Charles L. Saltzman, MD was elected for a one-year term as Vice President. New Board member Judith F. Baumhauer, MD was elected Secretary for a two-year term.

Other new Board members elected were Brian G. Donley, MD and Terrence M. Philbin, DO, each for two-year Member-at-Large positions.

Continuing Board members are Andrew K. Sands, MD, Treasurer; Lowell H. Gill, MD, Immediate Past President; James W. Brodsky, MD, Past President; Bryan D. Den Hartog, MD, Member-at-Large; and Bruce J. Sangeorzan, MD, Member-at-Large.

With this issue, Judith F. Baumhauer, MD, AOFAS Secretary, assumes the role of Medical Editor of In–Stride.

AOFAS 2007-2008 meetings calendar

Information and registration are available at www.aofas.org unless otherwise indicated. AOFAS Members, please login to register online to receive member rates.

November 30 - December 1, 2007 – REGISTRATION IN PROGRESS
THE ROAD TO NOWHERE: COMPLICATIONS IN FOOT AND ANKLE SURGERY
Finding the Right Path to Surgical Success
Chair: Steven L. Haddad, MD
Astor Crowne Plaza (Canal at Bourbon Street), New Orleans, Louisiana

March 8, 2008 – REGISTRATION IN PROGRESS
SPECIALTY DAY
Chair: Stephen J. Pinney, MD
San Francisco, California
Information and registration overseen by the AAOS: www.aaos.org

April 10-11, 2008 – SAVE THE DATE
MILITARY VISITATION PROGRAM:
CENTER FOR THE INTREPID
Chair: James R. Ficke, MD
Brooke Army Medical Center, Ft. Sam Houston, Texas

May 1-3, 2008 – SAVE THE DATE
ADVANCED FOOT AND ANKLE COURSE
Chair: David B. Thordarson, MD
San Francisco, California

June 25-28, 2008 – SAVE THE DATE
AOFAS 24th ANNUAL SUMMER MEETING and Pre-meeting Course
Chair: Stephen J. Pinney, MD
Marriott Denver City Center, Denver, Colorado

October 2-4, 2008 – SAVE THE DATE
COMPLETE FOOT CARE COURSE
Chair: Christopher P. Chiiodo, MD
Boston, Massachusetts

Watch for new programs in development and additional information at www.aofas.org.

FAI Editor
continued from page 1
Dr. Richardson and the FAI editorial staff at Campbell Clinic in Memphis, Tennessee are completing work on the journal’s November and December issues. As Dr. Thordarson transitions to his new position as Editor-in-Chief, the FAI editorial office is moving to DataTrace Publishing Company in Baltimore, Maryland.

Dr. Thordarson was appointed as the new Editor-in-Chief by the AOFAS Board of Directors following an open search process.

With this issue, Judith F. Baumhauer, MD, AOFAS Secretary, assumes the role of Medical Editor of In–Stride.
New Course on surgical complications to be held in New Orleans

Through a series of didactic lectures and case-based discussions, faculty at the new course entitled “The Road to Nowhere: Complications in Foot and Ankle Surgery - Finding the Right Path to Surgical Success” will explore known and potential complications. The course will be held November 30-December 1 in New Orleans at the Astor Crowne Plaza located in the famed French Quarter.

Expert faculty will begin by discussing both predictable and unpredictable complications from a particular procedure, how to avoid them, and how to manage them should they occur. Panel discussions will enhance attendee education through follow-up debate and faculty views on managing difficult foot and ankle complications.

Serving on the faculty will be:

Steven L. Haddad, MD, Course Chair
Robert B. Anderson, MD
Robert J. Coetzee, MD
Mark E. Easley, MD
John S. Gould, MD
Roger A. Mann, MD
Gregory C. Berlet, MD
William C. McGarvey, MD
Mark E. Easley, MD
Mark S. Myerson, MD

Typical types of cases to be discussed include:

- Hallux Varus: Are Tendon Transfers Really Effective?
- Excess First Ray Resection: How I Manage the Shortened First Ray
- First Metatarsal Osteotomy Malunions: Can They Be Re-Cut?
- Hammertoe Correction: The Short/Floppy Toe: Managing Excessive Bone Resection
- Weil Osteotomy: How to Pop the Bubble on the Floating Toe
- Elevatus, Cock-Up, Varus, and Valgus: The Toe Was Balanced Before I Removed the Sesamoid...
- Recurrent Neuromas: Dorsal vs. Plantar Approach; Bone vs. Soft Tissue Transposition
- Malunion/Nonunion of the Metatarsals: J ones and Others
- Midfoot Malunion: No One Told Me In Situ Fusions Were Bad...
- My Purely Ligamentous Lisfranc Fell Apart...
- Calcaneus Fractures: I Fixed It Without Bohler’s Help. So, What Do I Do With the Painful, Flattened, Arthritic J oint?
- Cavovarus Deformity: The Calcaneal Osteotomy and Dorsiflexion Osteotomy of the 1st Metatarsal Lacked Octane: Did I Miss Something? How Do I Fix Persistent Lateral Overload?
- Posterior Tibial Tendon: Recurrence of Deformity Following Calcaneal Osteotomy and FDL Tendon Transfer: Now What?
- Persistent Lateral Column Pain Following Lateral Column Lengthening: How Can I Bail Myself Out of this One?
- Osteochondritis Dissicans: Failure of Drilling and Microfracture. Why, and Now What?
- Ankle Fractures: The Fibula Was Comminuted, So I Left It Short and Malrotated: Uniplanar vs. Multiplanar Reconstruction
- I Always Believe The Literature, Which Told Me I Didn’t Have To Fix The Syndesmosis: So, What Do I Do Now That the Fibula and Tibia Have Split Up?
- The Triple Is Good, But the Ankle Is Sagging. How Do I Reconstruct the Deltoid Ligament?
- Failure of the Bullet-Proof Modified Bröstrom: Why and What To Do
- The Tendon Ruptured Again Following Primary Repair! I Thought That Never Happened. Tendon Transfers, Augmentation Techniques, and Working With the Old Tendon
- I Was Told the Peroneal My Ankle Arthrodesis is Still in Varus: What Did I Do Wrong, and How Can I Salvage It?
- Tendon Was Repaired, But When I Opened the Ankle, No Tendon Was Present. What to Do Next
- Protocol for Suspicion of Osteomyelitis: What Tests Do I Really Believe? When Is a Debridement a Debridement?

Your Turn

Attendees are urged to share their difficult complications during one of the six Your Turn program segments. Meeting registrants should submit challenging cases (limited to 4-5 slides per case including pre-and-post operative x-rays, if possible) to Judi Northrup at jnorthrup@aofas.org or on a CD no later than November 5 for advance faculty review. Each audience presenter will be given one minute for a short review of their case consisting of up to five PowerPoint slides to be followed by approximately four minutes of faculty discussion. Registrants will be notified of their case time in advance.

For complete program and registration information visit www.aofas.org.

Specialty Day 2008 – San Francisco approaches!

Join your colleagues for the 38th Annual AOFAS Specialty Day, to be held Saturday, March 8, 2008 in conjunction with the American Academy of Orthopaedic Surgeons Annual Meeting in San Francisco. The meeting will take place in the Moscone Convention Center from 7:00am – 5:00pm.

“The program has been designed to include a mix of symposia and select research papers as well as expanded debates and invited speakers - all providing stimulating state-of-the-art information for both the general orthopaedic
surgeon and the orthopaedic foot and ankle specialist,” reports Stephen Pinney, MD, 2008 program chair.

Program topics include:
- Symposia on Hindfoot Fractures and Lesser Toe Deformities
- Debates on the Treatment of End Stage Ankle Arthritis, the Treatment of Stage II Acquired Adult Flatfoot Deformity, the Treatment of Ankle Instability and the Treatment of Recalcitrant Plantar Fasciitis
- Current Concept Reviews on DVT and PE in Foot and Ankle Surgery; and Charcot Arthroplasty

Not to be missed and new to the San Francisco program will be a series of presentations by Masters of our specialty. “We have asked three experienced Masters to tell us what they think will make us better doctors. It is going to be great to hear what they have to tell us,” says Dr. Pinney.

Overall, the program has been designed to allow for more discussion and expanded audience interaction. “This redirection of time from the podium to the floor will hopefully enable time to compare, contrast, challenge and, of course, better understand the topics being presented,” predicts Dr. Pinney.

All AOFAS members are encouraged to remain for the Annual Business Meeting, which has been scheduled in the middle of the day to slightly overlap with the lunch break. This will enable Active Members to be more engaged in the business and decision making of our Society.

To view the complete program and registration information, go to www.aaos.org or www.aofas.org.

AOFAS Specialty Day Reception – you’re invited

Specialty Day will draw to a close with the annual Member Reception on Saturday evening. Watch for details of this event.

CME for 2008 Specialty Day

The American Orthopaedic Foot & Ankle Society is accredited by the Accreditation Council for Continuing Medical Education to sponsor continuing medical education. AOFAS designates this education activity for a maximum of 8.5 AMA PRA Category 1 Credits™.

CME certificates may be obtained after 3:00 pm on March 8, 2008 by visiting the marked kiosks in the Moscone Convention Center or are available online at www.aaos.org following the meeting.

Advanced Foot and Ankle Course to be held in San Francisco

The Advanced Foot and Ankle Course “Reconstruction and Salvage of Complications” will be held May 1-3, 2008 at the Intercontinental Mark Hopkins Hotel in San Francisco, California.

The course, chaired by David B. Thordarson, MD and co-chaired by Keith L. Wapner, MD is designed for the orthopaedic surgeon who has a good working knowledge of problems associated with the management of common as well as complex foot and ankle clinical problems related to trauma, sports injuries and reconstruction procedures. “Cutting edge material in this course will be presented in a case-based format, with faculty interaction a primary goal,” says Program Chair Thordarson. Attendees will be encouraged to bring challenging cases to discuss with faculty during a series of breakout groups.

Program topics will address:
- Posterior tibial tendon dysfunction
  - Medial cuneiform osteotomy
  - Different types of calcaneal osteotomies
  - Current management of stage IV deltoid reconstruction
- Current management of talar OCD lesions
- Current management of Charcot midfoot, hind foot and ankle problems
- Current update on total ankle arthroplasty in the US
- Update on the management of syndesmotic injuries complications (including tight rope fixation)
- How to choose the right bunion osteotomy
- Treatment trends in Achilles’ tendinosis and
- Symposium on the management of complex foot and ankle trauma

Serving on the faculty will be:
David B. Thordarson, MD, Chair
Keith L. Wapner, MD, Co-Chair
Ned Amendola, MD
Robert B. Anderson, MD
Judith F. Baumhauer, MD
James W. Brodsky, MD
J. Chris Coetzee, MD
Michael J. Coughlin, MD
Steven L. Haddad, MD
Jeffrey E. Johnson, MD
Thomas H. Lee, MD
Mark S. Myerson, MD
James A. Nunley, MD
Charles L. Saltzman, MD
Bruce J. Sangeorzan, MD
Lew C. Schon, MD
Alastair Younger, MD

For further course details, the complete program, exhibit opportunities, and registration and venue information, please visit www.aofas.org or phone 800-235-4855 (847-698-4654 outside the U.S.).
Highlights from the 23rd Annual Summer Meeting
July 2007 – Toronto, Ontario, Canada

AOFAS announces 2007 award winners

The AOFAS congratulates this year’s winners of the J. Leonard Goldner Award for Outstanding Basic Science Paper, entitled Contribution of the Flexor Hallucis Longus to Loading of the First Metatarsal and First Metatarso-phalangeal Joint. Awarded at the 2007 AOFAS Annual Summer Meeting in Toronto, it was co-authored by James D. Michelson, MD, Yatin M. Kirane, MBBS, MS, and Neil A. Sharkey, PhD.

The 2007 Roger A. Mann Award for Outstanding Clinical Paper was also awarded at the 2007 AOFAS Annual Summer Meeting, for Comparison of Health Related Quality of Life Between Patients with End Stage Ankle and Hip Arthritis. The study was co-authored by Mark A. Glaizebrook, MSc, PhD, MD, FRCS(C), Timothy R. Daniels, MD, FRCS(C), Alastair Younger, MSc, MD, FRCS, CJ Foote, BSc, Murray J. Penner, MD, FRCS(C), Kevin J. Wing, MD, FRCS(C), Johnny T.C. Lau, MSc, MD, FRCS(C), Ross Leighton, MD, FRCS(C), and Michael Dunbar, PhD, MD, FRCS(C).

E-Poster winners

1st Place — Anatomical Consideration of the Malleolar Groove of the Fibula in Relation to the Peroneal Tendon Subluxation
Tsukasa Kumai, MD, PhD; Yoshinori Takakura, MD; Ichiro Higashiyama, MD; Yasushi Shinohara, MD; Mike Benjamin, PhD

2nd Place — Achilles Tendinopathy in Diabetes Mellitus
Michael S. Pinzur, MD; Fabio Batista, MD; Caio Nery, MD; Augusto Cesar Monteiro, MD; Edmilson Francisco de Souza, MD; Fernando H.Z. Felippe, MD; Mauricio C. Alcantara, MD; Ramon S. Campos, MD

3rd Place — In Situ Arthrodesis for the Sequelae of Os Calcis Fracture
Nicholas Savva, FRCS, Terence Shane Saxby, FRACS

Technique Tip winners

1st Place — Lateral Column Lengthening Using a “Z” Osteotomy of the Calcaneus
Robert A. Vander Griend, MD

2nd Place — A Modified Technique of Local Osteochondral Grafting for ODT
Stefan Rammelt, MD, PhD; Keen Wai Chong; Hans Zwipp

3rd Place — A Simple Method for Ankle Arthrodesis Using Solid Screws
Chris E. Gentchos, MD; Donald R. Bohay, MD; John G. Anderson, MD

SAVE THE DATE
June 25-28, 2008
AOFAS 24th Annual Summer Meeting and Pre-meeting Course
Marriott Denver City Center • Denver, Colorado
More scenes from the 23rd Annual Summer Meeting  
July 2007 - Toronto, Ontario, Canada

Participants in this year’s Kenneth A. Johnson, MD Memorial Golf Tournament rose to the challenge of a driving afternoon storm and playing the famed Legends Course at Lionhead Golf & Country Club, ranked the third toughest course in North America (Golf Digest 2000). The number of teams finishing at the top reflects the competitive level of play and it was a successful event, albeit a little wet at the start.

Congratulations to the following players:

1st Place (-8): George Alliey; Kurtis Hort; Gene Shaffer
2nd Place (-4): Bill Beasley; Neil Green; Kevin Nagamani; Jim Petricek
(Three-Way Tie for 3rd Place)
3rd Place (-2): Jonathan Faux; Steve Ross; Keith Watson
3rd Place (-2): Tim Daniels; Andre Perreault; Vaughn Perruse; Alastair Younger
3rd Place (-2): Peter Maurus; Chris Nicholson; Stormy See; Scott Van Aman
Longest Drive: George Alliey
Closest to Pin: Rob Mihalich
Thoughts from the OEF President

Dr. Thomas H. Lee is the newly appointed President of the Outreach & Education Fund of the AOFAS.

As I look to the year ahead for the AOFAS Outreach & Education Fund (OEF), I’m struck by the community we have built over the last several years. Not unlike the neighborhood I live in or the church I attend, our community of foot and ankle surgeons provides the same comfort and support. At least once a year most of us get together to share common goals, frustrations, and growth. And like at home, we are surrounded by friends and colleagues with whom we can laugh and commiserate.

It is towards this community that I hope to contribute. Just as we all support and contribute to our neighborhoods, schools and places of worship, I hope we will be able to build just as strong of a network through our individual and collective support of the OEF. OEF has been instrumental in providing financial resources for key programs to this neighborhood, such as its Research Grants Program, the Overseas Outreach Project to Vietnam, and the Traveling Fellowship Awards Program.

These programs offer research, education and humanitarian service opportunities to our members that otherwise might be unavailable. I participated in the Overseas Outreach Project to Vietnam in 2006 and remember its impact on me. During this visit, I performed some of the most challenging surgeries of my career. It pushed you to the edge of your comfort zone. Here we have the necessary technological environment, but in Vietnam we were forced to grow within ourselves to meet the different patient needs.

As we launch a new corporate campaign this year, our goal is not only to raise funds to continue the support of programs at their current level, but to assure their growth for future years as well as the expansion into new areas. Our OEF Board of Directors will be working hard with the AOFAS Board of Directors to assure this continued growth with our corporate supporters.

On the member side, only 8% of our membership currently contributes to the OEF. As a result of a focused project last year, I’m happy to say that during the fiscal year just ended (9/1/06 – 8/31/07), over 100 AOFAS members contributed or made pledges to OEF, with over half of these pledges coming from new donors! Our goal is to see 100% of our members support the OEF. It is our fund and AOFAS is our community, filled with friends and teachers.

As we come to the end of this calendar year and start making decisions for our charitable contributions, I hope you will all think about your foot and ankle community. Without my friends in this Society, I think my career would be far less fulfilling for me.

I thank you in advance for your contribution to the OEF as together we continue to support the mission of the AOFAS and its important projects. As stated in the OEF brochure, “Your contribution will make a difference – an essential difference – and your gift will be appreciated and shared by many.”

Thomas H. Lee, MD

OEF Board of Directors updates its governance

The outgoing 2006-07 OEF Board of Directors updated its governance process, board terms and positions, when it adopted new bylaws on Sept. 4. In accord with the new bylaws, the AOFAS Board of Directors appointed Thomas H. Lee, MD as OEF President for a two-year term. Sheldon S. Lin, MD was appointed to a two-year term as a Member-at-Large, and Michael M. Romash, MD was named to a one-year Member-at-Large position. Naomi N. Shields, MD will continue to serve on the Board for an additional year as Past Chair. Judith F. Baumhauer, MD, AOFAS Secretary, will serve as the OEF Secretary, and Andrew K. Sands, MD, AOFAS Treasurer, will continue his position as OEF Treasurer. Other Members-at-Large on the OEF Board by virtue of their AOFAS officer positions are Steven D.K. Ross, MD, Robert B. Anderson, MD, and Charles L. Saltzman, MD.

Reminder! Be an OEF Donor!

As the calendar year draws to a close, there is still time to play an active role in funding the programs of the Outreach & Education Fund. By participating as an OEF donor, many more people will be helped through both current and newly-developing activities. Simply fill out the enclosed Donor Form and fax or mail back to the AOFAS office or login as a member on www.aofas.org and click on Support the Outreach & Education Fund. Your gift to the OEF is fully tax deductible to the extent allowed by law.
OEF funded programs — call for applications: apply now!

AOFAS calls for 2008 Research Grant applications

The AOFAS Research Committee invites applications for 2008 research grants awarded for a period of one year in amounts up to $10,000. The deadline for application submission is December 1, 2007.

“The Research Grants Program provides seed grants and start-up funding for promising foot and ankle projects in both basic science and clinical areas. We would like to see an increase in the number of grant applications received this year, particularly from fellowship programs,” says Sam Flemister, MD, chair of the Research Committee. “Grant applications are blinded by staff and reviewed by the committee on a competitive basis using an NIH-type evaluation process.”

Access to grant funding is an AOFAS membership benefit, and an Active Member, Candidate Member or International Member must serve as either the principal investigator or co-investigator on a study. The principal investigator or co-investigators may not be awarded more than two grants in any four consecutive years. Research Committee members and ad hoc reviewers of grant applications may not apply for grants in the year they review applications.

Funding for the AOFAS Research Grants Program is provided by the AOFAS Outreach & Education Fund (OEF) and the Orthopaedic Research & Education Foundation (OREF).

Apply now to be an AOFAS Traveling Fellow

The AOFAS is now accepting applications for the 2008 Traveling Fellowship Awards Program. The deadline for applications is December 1, 2007.

The Traveling Fellowship Awards Program is open to AOFAS Active, Candidate and International Members who are 40 years old or younger and/or who have been in practice for seven years or less. Up to five applicants will be selected to travel as a group for three weeks next summer to visit leaders in foot and ankle education and research.

One of this year’s Traveling Fellows said, “It makes me think different – not only about orthopaedics, but about life. This experience “was a full immersion in a different top level reality,” said another. See article below for more on this program.

Interested in humanitarian service? Apply now for the Vietnam project

The AOFAS is currently accepting applications for volunteers to participate in the 2008 Overseas Outreach Project to Vietnam. The deadline for applications is December 1, 2007.

This ongoing humanitarian initiative provides free foot and ankle medical care to Vietnamese children and adults with deformities and disabilities. The project has now completed its sixth successful year. The 2008 Vietnam project will occur in May/June and requires a two-week time commitment. Volunteer surgeons pay their own travel costs to Vietnam. In-country expenses are covered by a grant to the AOFAS from the Outreach & Education Fund (OEF).

This service opportunity is unique among orthopaedic organizations. Reflecting on her participation in the Vietnam project, Dr. Ruth Thomas, chair of the Humanitarian Service Committee, says, “I came away with more surgical wisdom and a completely new perspective on world health care.”

Information and application forms for these programs are available on the AOFAS Web site. Simply login as a member on www.aofas.org and click on Outreach & Education Funded Projects.

Congratulations to 2007 AOFAS Research Grant recipients

AOFAS is pleased to announce the recipients of the 2007 AOFAS Research Grants for basic science and clinical research projects on foot and ankle topics:

Mark Glazebrook, MSc, PhD, MD, FRCS(C), Timothy Daniels, MD, FRCS(C), and Alastair Younger, MSc, MD, FRCS, Canadian Orthopaedic Foot and Ankle Society (COFAS) multi-centered randomized case controlled trial on clinical and radiographic outcome of total ankle arthroplasty vs. ankle arthrodesis

Sandra Klein, MD, John Marymount, MD, Kevin Varner, MD and Francis Gannon, MD, The intraosseous innervation of the talar dome: A histologic study

Michael Pinzur, MD and Avinash Patwardhin, PhD, Load transfer in transtibial amputation with distal tibio-fibular bond bridging

Smita Rao, PhD, Benedict DiGiovanni, MD, and Deborah Nawoczenski, PhD, PT, Enhancing conservative management of patients with midfoot arthritis

Stacie Ringleb, PhD and Claude Anderson, MD, Development of a method to quantify subtalar joint instability

Lew Schon, MD, Su-Young Bae, MD, PhD and Stuart Miller, MD, Quantitative and qualitative description: Effects of bone marrow derived growth factors and cytokines on autogenous mesenchymal stem cells of various aspiration sites
Thoughts from the 2007 AOFAS Traveling Fellows

The AOFAS Traveling Fellowship Awards Program, funded by the Society’s Outreach & Education Fund (OEF) through an educational grant from DJO Incorporated, has grown to be an integral part of the educational programs of the AOFAS. This program has offered young surgeons experiences in foot and ankle orthopaedics that otherwise would be unavailable to them. From the comments of the 2007 Traveling Fellows, it’s easy to see that this educational experience for young orthopaedic surgeons is also a significant personal one.

After crossing the Canadian-US border following the AOFAS Annual Summer Meeting in Toronto, the Traveling Fellows began their tour of medical facilities. They were hosted by AOFAS surgeons in Rochester, Boston, New York, Philadelphia, and Baltimore with a weekend sightseeing side trip to Washington, DC.

For the Traveling Fellows, it was a chance to gain both professional and personal knowledge. As Malhar Dave, MD, India, stated, “All the hosts were exemplary in the way they treated us, both professionally and as friends, which I think is difficult to emulate. I learned a great amount during this trip and met a lot of beautiful people. I returned home with wonderful memories.”

Palanisamy Ramesh, FRCS, United Kingdom, spoke of his experience, “It was a wonderful mix of knowledge, technical tips, friendship and of course lots of fun! This trip put me ahead probably by 5 years in my practice. I liked the pre-operative discussion on the cases to be performed, followed by observing those cases. The time spent in theatres and case discussions was most useful.”

For Francesca Vannini, MD, of Italy, the highlight was “the opportunity to meet different groups of foot and ankle orthopaedic surgeons, to see their way of working, and to share different ideas and philosophies.” She continued, “I met good surgeons, had interesting discussions and the opportunity to learn more about potential future international fellowships with specific surgeons.”

“The high academic level the Traveling Fellows experienced at the different educational sites was one of my favorite parts of this fellowship, as well as the warm and generous hospitality received from each of our hosts at the various cities,” said Yousef Salameh, MD, of Israel. “I have been introduced to new, interesting places and a different and effective way to treat patients and conduct surgery in conjunction with high level academics which I was not exposed to before.”

Dr. Salameh said the Traveling Fellowship offered him, “The privilege to be introduced and get to know new friends in the United States and Canada and also my fellowship colleagues from different countries. It would be my honor to have them in Israel as my guests.”

Perhaps Jose A.V. Sanhudo, MD, from Brazil, summed up the feelings taken away from the Fellowship well when he said, “I consider the Traveling Fellowship a wonderful initiative of the AOFAS. It is a huge motivation for young physicians and it demonstrates the concern of the Society about spreading the knowledge around the world, not only inside the United States. The opportunity to travel for free, visiting top medical services and talking to expert surgeons is almost unbelievable for many of us, young foreign doctors. I am very grateful to the AOFAS for this opportunity.”

And AOFAS is very grateful to have this opportunity to offer its young members, both from this country and abroad, to study and learn from its experienced surgeons.

As Judy Baumhauer, MD, steps down as chair of the Traveling Fellowship Awards Committee, she reflected on the personal experiences gained with her partners, Sam Flemister, MD and Ben DiGiovanni, MD, hosting the Traveling Fellows at the University of Rochester School of Medicine for a few days.

“It offered me an opportunity to meet up-and-coming orthopaedic foot and ankle surgeons who will be the future international leaders in our field. Each of the Traveling Fellows was not only bright but a lot of fun! It really was an excellent exchange of ideas. We were interested in the different treatment options discussed and how they are used in other countries.”

As John Campbell, one of the 2007 AOFAS hosts said, “Our attending surgeons and fellows enjoyed the Traveling Fellows’ visit immensely: excellent professional discussions, friendly socializing, exciting new friends. An all-around success!”

The AOFAS is grateful for the contribution from DJO Incorporated to the OEF for support of this program.
President's message

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Revere single-handedly had a huge impact on mobilizing troops at the start of the Revolutionary War. There are three types of people that are required to perpetuate a tipping point: Mavens, Connectors, and Salesmen. Mavens are people that are active collectors of information that has an impact on people’s decisions regarding purchases, behaviors, and interrelationships. Along with this knowledge, they have the social skills to start word-of-mouth epidemics. Connectors are people with a special gift for bringing the world together. These are the type of people who know everyone and are the people that psychologist Stanley Milgram described as those that make possible the concept of six degrees of separation. They tend to know the Mavens of the world and are an essential ingredient to any word-of-mouth epidemic. Finally, Salesmen are those who have the skills to persuade us when we are unconvinced of what we are hearing. They are critical to these epidemics because they convince us that the ideas of the Mavens are correct.

The other concepts of the stickiness factor and power of context are less important for today’s discussion, but you should know that we are powerfully influenced by our surroundings, our immediate context, and the personalities of those around us. The world around us may seem like an immovable place, but it is not. With the slightest push — in just the right place — it can be tipped.

Need for social and professional interaction

Volunteerism in America has waxed and waned from one generation to the next but continues to be the backbone that keeps organizations like the AOFAS functioning. My preference is that we become a vibrant community with social and professional interaction, as well as being influential in societal issues in which we have special insight. But I cannot accomplish this goal on my own; it is only through the collective energy and brain power of our entire community that we can have meaningful impact. Like many of you, I am often tempted to retreat to private pleasures that have become easier for me to accomplish on my own. This is not the solution to our society’s problems, and I refuse to believe that, given the chance, each of you would not be willing to contribute. Please join me in making our AOFAS the model of all professional organizations by going to the Web site and filling out a bio-application form to volunteer. If you are not sure what job you are best qualified for, just write in a list of your interests and let the Committee on Committees get back to you. We have added a new section where you can list your contacts with the decision makers in society. We will search out the Mavens, Connectors, and Salesmen among you!

The AOFAS is my community. I feel connected to this organization and its membership. I have learned how to be a better foot and ankle surgeon from many people. I have made lifetime friendships with people that I greatly respect. I have not contributed as much as I should to the science of our profession but I have used the talents that I have to try to make this organization better. Now I am asking you to do the same.

We have reorganized the AOFAS to expand our influence to as many areas as we can, with the hope of finally becoming the organization to which everyone — government, industry, our medical colleagues, and the public — looks for foot and ankle information as well as care. There are great opportunities for a specialty society such as ours to influence policy that affects our practice lives. This goal of expanded influence will require more of us to be involved with AAOS committees, AMA delegations, FDA advisory panels, as well as influential members of our state and local orthopaedic associations. All this will be networked into a unified strategic plan so that this small organization can have a large impact. We will position our members so that, at the appropriate time, we will be able to create tipping points that will help in fulfilling our mission.

Please become an active participant in our community. You can make this Society an important part of all our lives, and I personally plan to do my best to get to know all of you better. And, I again promise to do my best to fulfill our true potential. Thank you.

Steven D.K. Ross, MD

Patient-education brochures

Sales for the recently-released brochures distributed in sample packets at the 2007 AOFAS Annual Summer Meeting have surpassed initial sales goals. The brochures, The Diabetic Foot, The Adult Foot, and the Ten Points of Proper Shoe Fit, are available to all Active and Candidate Members and include the popular option of imprinted personalized contact information.

The 3½” by 8½” brochures are a perfect take-away item for patients! They contain newly edited information, all new color photographs and medical diagrams, AOFAS color schemes, and new branding on the back panel of each brochure describing the training of AOFAS members.

For your convenience, an order form is enclosed in this issue of In-Stride containing all pertinent pricing and ordering information. To download a form from the AOFAS Web site, members need simply login at www.aofas.org, go to My AOFAS and click on Patient-Education Brochures.

Questions? Please call the AOFAS office at 800-235-4855 or send an e-mail to aofasinfo@aofas.org.
MEMBERSHIP MATTERS

Update your profile for new directory

The 2007 edition of the AOFAS Membership Directory will be printed and mailed in November to all members. Please login to the AOFAS Web site to ensure your Member Profile is accurate.

To facilitate peer contact, e-mail addresses will be included in the printed directory for those who want them added to their listing. Members with an e-mail on file as of September 15 have already been contacted for permission to include it in print. If you add a new e-mail and want it added to the printed directory listing, you must send a written request to the AOFAS Executive Office at aofasinfo@aofas.org by October 19. E-mail addresses are never provided to the public. When making edits to your profile, please remember the following:

- Type using upper and lower case letters (e.g. Wichita Falls) where appropriate
- Check the “primary” box for the work contact information you want the “public” to see
- Change the company or practice name as appropriate if you change your work address
- Be sure you have an e-mail address on file to receive AOFAS communications and e-receipts for meeting registrations and product purchases
- Note that your “mailing address” can be either your work or home address based on your preference
- Add your direct Web site link for the benefit of potential patients

The most up-to-date directory is always available to members on the AOFAS Web site. Members may login to the site to view additional member information including home phone and e-mail for colleagues that have approved those for publication.

Available at all times on the public home page is the Find an Orthopaedic Foot & Ankle MD link where work contact information is provided.

After the initial mailing in November, a small inventory of additional copies of the new directory will be available to members at a cost of $10 each for those who want to keep an extra copy at home, provide to office staff, or maintain at multiple office locations. To purchase an additional copy or for assistance with your Member Profile, write to the AOFAS Executive Office at membership@aofas.org or call 800-235-4855 (847-384-4654 outside the U.S.).

2008 Dues — check your membership level

Dues notices for the 2008 calendar year will be mailed in late 2007 based on your current membership classification. Your category should be accurate so the proper amount can be billed. If your membership category is not current you may be missing out on important benefits such as being listed in the online physician referral directory.

If you are uncertain of your current membership classification or need to elevate your level because you’ve just completed training or have recently been elevated by the AAOS to a new membership category, please contact Lois Bierman, Membership & Marketing Manager, at IBieman@AOFAS.org or 847-384-4382.

The Society will not be increasing fees for the coming year so the annual membership dues rates will remain as follows:

- Active Member - $475
- Active Member/Military - $250 (active duty)
- Candidate Member - $425
- Candidate Member/Military - $250 (active duty)
- International Member - $250
- Fellow Member - $75
- Resident Member - $75

New and elevating members
Approved July 2007

Active Member
Claude Anderson, MD
Solomon Chaim, MD
Nirain D’Souza, MD
Andrew Haskell, MD
Francis Mcguigan, MD
Marc Michaud, MD
Joseph Sizensky, MD

Candidate Member
Rommel Francisco, DO
Eric Giza, MD
Mark Gould, MD
Kenneth Jung, MD
John Keeling, MD
Adrienne Spirit, MD
Cedric Tankson, MD
Scott Van Aman, MD
Kimberly Workman, MD

International Member
Michael Alperson, MD
Mathieu Assal, MD
Ben Beamond, MBBS
Miguel Angel Camara Baeza, MD
Todd Gonthef, MD
Urs Graf, MD

International Member
(continued)
Michael S. Hennessy, MD
Karl-Andre Lalonde, MD
Andrew Molloy, MBChB
Joao Neto, MD
Margy Pohl, MBChB
Fernando Raduan, MD
Panagiotis Symeonidis, MD

Fellow
Oladapo Alade, MD
Ali Alamoudi, MD
D. Scott Biggerstaff, MD
Dominic Carreira, MD
Andrew Ebert, MD
Aron Green, MD
Kay-Kiat Lim, MD
Abhay Patel, MD
Ramon Rodriguez, MD
Meena Shatby, MD
Donald Stewart, MD

Resident
L. Daniel Latt, MD
Brent Ogawa, MD
Alexander Pappas, MD

International Federation of Foot & Ankle Societies
Third Triennial Scientific Meeting
Sauípe, Bahia, Brazil
September 8-20, 2008
Visit www.iffas2008.com.br for complete meeting, registration and travel information, and abstract submission.

Abstract deadline: Jan. 31, 2008