

The First Saudi Orthopedic Association Pediatric Orthopedic Chapter Meeting in Riyadh

Dear Editor,

On March 15, 2018, the newly established pediatric orthopedic chapter, which is part of the Saudi Orthopedic Association organized its first scientific meeting in Riyadh. This meeting was dedicated to discuss a common pediatric orthopedic problem, which carries multiple pending and valuable projects with its own local challenges, namely developmental dysplasia of the hip (DDH). Such a problem-oriented orthopedic meeting is a new modality of meetings that were never conducted before in Saudi Arabia. The main reason behind starting this type of meetings is the availability of enormous local experience in managing such a pathology that is not correlated well with the small number of local publications. This meeting was meant to tackle different aspects of this common problem and stimulate the discussion among the expert attendees and come to a common consensus in dealing with DDH.

The meeting started with several talks discussing DDH from its history to its future and from its diagnosis to its complications' management. It was clearly shown in all the talks that DDH is still having a tremendous amount of debate in all of its aspects. The local perspectives and challenges related to DDH problem, in general, was shared generously by the experts.

After reviewing the knowledge, facts, and debates around DDH during the morning session, a brainstorming group discussion ran in the afternoon to discuss a long-lasting pending project related to DDH in Saudi Arabia. The first and the most important one was the "Saudi National DDH Screening Program." After reviewing the current active international screening programs, which was presented in one of the morning presentations, the group recognized multiple local challenges including the lack of well-trained ultrasound (US) technicians and radiologists who can perform and report the neonatal hip US efficiently. Using pelvis anteroposterior radiograph instead of the hip US in high-risk babies at the age of 3–4 months as a temporary measure was one of the suggestions discussed and gained reasonable acceptance. The other challenging problem was the lack of awareness of DDH among the family physicians and pediatricians who are supposed to be the front-line medical experts evaluating the suspected cases. The group suggested to establish an introductory DDH course that will be directed to the above-mentioned medical front-line to discuss this medical problem and give them the chance of performing the neonatal hip examination in the right way supervised by the experts from the local pediatric orthopedic society. These courses should

target all the regions noted to have high referrals of DDH. Other problems and challenges related to DDH screening program was also discussed, which made the picture clearer and the challenges are more obvious with its practical solutions. A successful screening program would certainly result in much more cases discovered early. This brings the challenge of being able to treat these cases properly through a successful and practical referral system that guarantees early acceptance and treatment of cases in specialized units.

The elements, requirements, and cost of this valuable project still need further discussions, data collection and analysis to come up with a comprehensive and practical proposal to the health authorities in Saudi Arabia (Ministry of Health) to get the acceptance for its implementation and with legal enforcement as it is the current status with the routine and mandatory vaccinations.

Second, the importance of having a national DDH registry was discussed as a valuable data source to plan the medical care and be a valuable nidus for a local DDH related researches. It was suggested to start such a registry in the major medical centers that have a research center attached to it to benefit from their services, which can optimize the benefits from such project. All the attendees agreed that the patient enrolment in the national DDH registry should be as simple as possible to encourage the general hospitals to join the task in the future.

Finally, malpractice related to DDH treatment was discussed. The increased numbers of complications of operative and nonoperative treatments provided by general orthopedic surgeons in local hospitals were behind this part of the discussion. Unfortunately, no clear legal system could be utilized to limit the incidence of such a problem that is why most of the experts suggested to increase the efforts to improve community awareness about DDH and the importance of treating this condition under the care of a specialized pediatric orthopedic surgeon.

The first pediatric orthopedic chapter meeting was an important national meeting that explored the local perspective of a common and challenging clinical problem. We realized that such highly specialized meetings that gather people with similar interests to discuss a specific problem could be the initiative of its solution. Dreams about high standards and comprehensive quality of care provided to DDH children in Saudi Arabia took one forward step to reality after this meeting.

We hope that the thoughts and efforts will collaborate to make it true shortly and turn into actions for the betterment of children of our country.

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Conflicts of interest

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