Delightful food and gorgeous weather.

Not exactly the two impressions I expected to return with from my Traveling Fellowship experience in Denmark. These were pleasant surprises, considering that I come from a Mediterranean country which prides itself on its sunny summers and diverse cuisine. Denmark beat us to both during this particular week.

What I did expect, though, I found in abundance. There was scintillating conversation with my peers from all over Europe. There was the hospitable environment the Danish Orthopaedic Society created, led by Prof. Dr. Per Kjærsgaard-Andersen and Dr. Camilla Ryge and the rented vans. Then there was all the interesting stuff, the operating theaters and the arthroplasty registry and the breathtaking one, the Rigshospitalet.

The fellowship commenced in Århus, which was the northernmost of the cities we were supposed to visit. The welcome dinner served its purpose well, allowing everyone to get to know each other a little bit and start exchanging stories and comparing notes about surgeries and everything related to the residency. At the beginning of the dinner we must have appeared so glamorous that we even attracted an extra fellow – the fellow from Korea – who introduced himself to us just as that before realizing we weren’t the people he was looking for. As Dr. Kjærsgaard-Andersen was going to remark at the end of the week, we were a group by the end of that short three-hour dinner, where there was laughter and the beginnings of friendship.

The experience in Århus was dominated by research, particularly that done by Dr. Søballe and Dr. Bünger. The research labs there were highly sophisticated and complex and spiked a lot of interest, especially because they had their research fellows present us with some of their projects. The rest of the day set the tone for the rest of the fellowship – hospitality and true curiosity.
The staff at Århus University, especially Ole Brink, was interested not only in sharing their knowledge, but also in obtaining our points of view and thoughts on their presentations. The day progressed with discussion and scientific exchange, and a lot of it took place among the fellows whose curiosity about each other’s practices was, and would remain, insatiable.

At the end of the day, Dr. Brink presented us with what was to become the mascot of the fellowship: the Hoptimist, a true Danish souvenir, and a book about Aarhus, which turned out to be the City of Smiles. It certainly lived up to its name.

A word should be put in about our transfers here, because with their practicality and ingenuity, our hosts’ ideas deserve special mention. The transfers were done in rented vans, one driven by Dr. Kjærsgaard-Andersen, the other by Camilla Ryge. Although I’m sure part of the credit goes to Denmark’s topography and highways, the rides were always pleasant, allowed us brief respites from what was a very busy schedule and set the scene for the growth of friendship among all of us. Per and Camilla were invaluable as tour guides, and they were always tireless at the wheel.

At the end of the day, we were invited to Per’s home for dinner, where his family welcomed us. It was perhaps the most pleasant dinner and it began with a tour of their incredible garden. The food was divine, many thanks to his wife who had gone to so much trouble in order to feed thirteen hungry international orthopaedic surgeons, and again, the conversation never once lagged.

The next day was to take place in Vejle Hospital, the best care that you can get in Denmark, according to one of their medical newspapers. It wasn’t hard to believe, because cool, calm professionalism seemed to be infused into every room, every person and every action in that place. It had complete absence of rush, reflecting its nature as an elective procedures center, and impressed us especially when we were allowed to roam the halls of the surgical floor with street clothes, peering through windows at operating theaters and having scrub nurses wave – sterilely, of course – at us.
Two procedures were arranged for us, a hip and a knee arthroplasty. Being one of the cornerstones of the orthopaedic profession, it gave rise to a lively discussion, where everybody had questions about the Danish way, including the Danish registry as presented by Prof. Søren Overgaard and wanted to share their own. Technically, as I know personally how much trouble it is to set up a live transmission surgery, I must praise highly every person who was involved in the execution, in Vejle and then later in Odense, where we were privy to watch a trapeziometacarpal arthroplasty live – a first for myself and I believe many of my co-fellows.

Our first day in Odense concluded with presentations from all fellows about themselves and their countries. Enthusiasm abounded, and often went beyond the eight minutes that had been intended for this purpose by our hosts (and yes, I am guilty too). It was a great idea and started many a conversation, bringing the group yet closer together.

The second day in Odense took place in the Odense University Hospital, which is a major trauma center and one of the few replantation centers in Denmark. As we found the Danish way to be, our hosts here were just as pleasant and interested in us as we were in them. Their
presentations were obviously well-thought out and a lot of time and effort was spent on us, like everywhere else we had been and everywhere else we would go to, and for which we are eternally grateful.

Odense, with its picturesque quality, was the scene for our social program later that day. It was Camilla’s brilliant idea to hire a local guide and have her walk us through the city while telling us the stories that went with it. I’m sure I wasn’t the only one who felt like they were following Hans Christian Andersen’s footsteps through this city, sometimes falling into his fairy tales, and sometimes returning to the reality of the not-so-pleasant life that he led. Our tour concluded in the restaurant Cro’n for a typical Danish dinner. A typical Danish dinner, by the way, as we found out, consists of very good food, friendly service, amazing conversation and a lot of laughs.

The next day found us traveling over the breathtaking Great Belt Bridge to the Copenhagen area. The good weather stayed with us through the road trip as well, breaking out in rain only briefly outside the city. As traffic increased, so did our anticipation and finally we found ourselves in the large medical complex of Herlev Hospital. Renowned for its shoulder and elbow surgery, walking through its halls one couldn’t help but have the feeling that this hospital was large, quite enormous in fact, and functioned like a machine, well-oiled and efficient. Personnel on wheels – scooters and bikes – were what drew our attention the most. What a brilliant idea to navigate long, straight corridors on them.

The sheer size of the hospital was almost intimidating, and the only disadvantage to it was that not all rooms have daylight. Research was yet another big point in that day’s program and gave rise to many interesting discussions. I had early on the realization that while so many things that we do across Europe regarding patient care and surgical technique are the same, there are enough points of disagreement to serve for interesting discussion and in my opinion, this is one of the most important aspects of having a fellowship such as this one.

After the training program, we went down to the harbor for a boat ride along Copenhagen’s canals and shore. It was yet another breathtaking activity, seeing the old and the new, and the newest architectural buildings on display in that gorgeous weather. Our trilingual guide was the
star of the tour, but only because the Little Mermaid was absent, on her visit to Shanghai for an exhibition there. The city remains the perfect picturesque European city in my mind, noble but not cold, proud but welcoming.

On our only free evening that day, a Thursday, we, the fellows, were left on our own devices by our hosts (after making sure everybody had their phone numbers, of course). The late afternoon and early evening had us walking around, exploring downtown and looking for a nice place for drinks after dinner. The fellow from England showed great initiative for this particular bit of exploration, although in the end we didn’t stray very far from the hotel. For dinner we chose a lovely little street café, where the food was, as usual, sumptuous and the atmosphere inviting. We finished the evening in a trendy café-bar downtown, and found our way back to our hotel with joint efforts, no pun intended.

The last day, as if to emphasize the adage of ‘best for last’ had us visiting the Rigshospitalet very close to downtown Copenhagen. It was obvious quickly that this center was a little different from the ones we had visited before. The Rigshospitalet is a highly specialized center, dealing with spinal surgery, pediatric orthopaedics and intensive trauma care. Their staff, busy as they may be normally, took almost a whole day off to accommodate and get to know us. They took us up to their pride and joy – their helipad – right on the seventeenth floor of the hospital, and let us take pictures there, of possibly one of the scenes of the fellowship that will be remembered most clearly. I can’t quite say what was the most breathtaking part of the visit to the helipad; the complexity of it, the modernity, or just the sheer height that we were on.

The presentations of the Rigshospitalet staff reflected yet again their specialization and high level of care. We learned about spinal surgery in Denmark, and the work they did with soldiers returning from Afghanistan. The early afternoon session of Dr. Klaus Hindsø deserves special mention here, because it was striking in its setup. Dr. Hindsø taught us the techniques of deformity correction, and he did it in a remarkable way that made sure all of us understood the principles behind it. I applaud his educational skills and I’m sure all of the fellows agree with me on this point.
Although the Danish system of specialization is not feasible in my country, it raises a good point of discussion. Should an orthopedic surgeon focus on one area, or one type of surgery, or should there be a general approach to orthopedics? It is my personal opinion that residents who do not have the general concept of orthopedic surgery would do worse both as general orthopedists and as specialists. Most of us have used skills acquired in one field on the other during their residency, and the power of creative thinking combined with a wide spectrum of knowledge is what I think makes the excellent surgeon. The excellent surgeon can choose to specialize in one field, but when things get out of hand in surgery, as they are sometimes went to do, he or she will not be stumped.

At the end of the day we had our feedback session. Wherever we went, we were welcomed to such an extent that I’m sure every single one of our group felt very much at home. To see that these surgeons, who have so little time for everything, took time out to spend it with us, share information and converse with us, made me feel proud and humble at the same time. As I have never been on an EFORT Traveling Fellowship before, I cannot quite compare this one with previous ones, but I will go so far as to say that the Danish Orthopaedic Society in general, and especially our hosts in particular – Per, Camilla and Jane – did not just a great job, or a wonderful one. They did the perfect job. Although we did not have enough contact with Danish residents our age, I and others from our group were hard-pressed to find a lot of points to improve when asked at the end of the fellowship. In my humble opinion, this should be the one traveling fellowship that the future ones should be based on.

The last dinner was, as farewells usually are, bittersweet. It gave us a chance to reflect back on the week and reminisce, laugh about the funny moments and say thank you to our tireless hosts. They surprised us – in the one short week that we spent together, they proved that they got to know us quite well. I have no doubt that every one of the fifteen people who brought up our group took away fond memories with them from this week, and that they will be unforgettable.

To conclude, I would like to say, and I believe I speak for everyone, that we are grateful for the chance to get to know each other. We thank
EFORT for creating this fellowship, the Danish Orthopaedic Society for, well, paying for it, and our wonderful, wonderful hosts for having us. We thank the staff of all the hospitals we visited for making us feel welcome, taking time off and being curious about us.

It was one hell of a week.

Mrs. Deniz Olgun, MD
Chief Resident
Department of Orthopedics and Traumatology
Hacettepe University
Sihhiye, Ankara
Turkey