

## St Vincent's SportsMed

Issue no. 1 Autumn 2008

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### The New Team

St Vincent's SportsMed is delighted to announce the expansion of Sports Medicine Services at St Vincent's Clinic.

While already providing an excellent and accessible service to the community, we now have the opportunity to introduce one of the most highly respected specialists in sports medicine.

Dr Scott Burne has commenced consulting at St Vincent's SportsMed. Well known to many, Dr Burne has an exceptional reputation in the field of sport and exercise medicine. With 10 years of experience and a college medal, Dr Burne is currently team doctor to the Australian Women's Basketball team, the OPALS, as well as team doctor to the Western Sydney Razorbacks and the Balmain Rugby League Team.

Dr Burne is very excited about coming to work at St Vincent's SportsMed. 'At St

Vincent's, it's about offering the whole service' he said, 'Patients can be assessed by either our sports physicians or our orthopaedic surgeon. They can then have their MRI or X-rays in the same building and if surgery is required, they have the choice of many specialists within the clinic and the options for surgery include St Vincent's Private, the Day Surgery Unit in St Vincent's Clinic or St Vincent's General Hospital.'

'What's exciting' he said 'is to be working in one of Australia's leading hospitals, with the latest equipment, and with a team of people who have a strong commitment to providing the highest degree of professional service.'



### St Vincent's SportsMed specialises in:

- Arthroscopy
- Sports Medicine
- Knee Ligament Reconstruction
- Shoulder Reconstruction
- Meniscal/Cartilage repairs
- Orthopaedic Trauma

**Go to www.stvincentssportsmed.com.au** for more information Sports Physicians can see all patients at St Vincent's SportsMed at any sporting or exercise level, without a referral.

## **Cartilage Transplantation In The Knee**

Normal joint cartilage is characterized by a smooth surface. Loss of this smooth surface leads to pain, loss of motion, swelling and eventually deformity. This will ultimately result in degenerative osteoarthritis.

Injury to articular cartilage is common following sporting injuries, road accidents and even accidental falls. The injured cartilage produces a very poor healing response due to the lack of blood supply and limited inflammatory reaction, which is required for healing.

While significant advances have been made in the field of prosthetic joint replacement, articular cartilage defects in younger patients (under 50 years of age) remain a problem due to the limited lifespan of these prostheses. There are a number of techniques which attempt to produce regeneration of native articular cartilage, however one of the most promising is Autologous Chondrocyte Implantation (ACI)

The completed process is a two stage procedure.

Stage 1 – Cell Harvest and Assessment of Lesion (Figure 1)





(Figure 1)

(Figure 2)

The first surgery is arthroscopic and is often undertaken to diagnose and initiate treatment for suspected cartilage lesions. At arthroscopy, once a cartilage lesion is identified (see Fig 1 and 2), good cartilage cells are harvested. Approximately 200 mg of cartilage cells are desired. In practical terms, this is effectively, less

cartilage than a "tic-tac". The piece of cartilage is then transferred in highly regulated conditions to the laboratory where the cartilage cells are multiplied in vitro, and preserved. The cells can then be stored until elective re-implantation

### Stage 2 – Re-implantation (Figures 3, 4 and 5)



(Figure 3)

The re-implantation can be performed as soon as the cells have multiplied adequately (as soon as 4 weeks) or can be postponed until a more convenient time is available. An open knee

operation is required for this part of the procedure to adhere the graft. Procedures to improve biomechanics such as cruciate ligament reconstruction, patellofemoral re-alignment or osteotomy can be performed with this surgery. The patient can be discharged home in 2-3 days dependant upon the concomitant procedures.





(Figure 5)

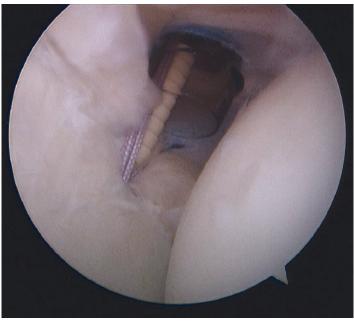
Photos courtesy of GENZYME

## **Keyhole Shoulder Reconstruction**

Arthroscopic reconstructive surgery for traumatic anterior shoulder instability is now producing results that match traditional open techniques.<sup>1</sup>

Shoulder stabilisation surgery, often called a "reconstruction", has traditionally been performed through an open approach at the front of the shoulder with success rates reported around 90-95%. This has however, required a 2-3 day stay in hospital, cutting of tendons to access the injured structures and the pain and risks that are associated with such surgery. Similar results can now be achieved through arthroscopic (keyhole) techniques where the same operative reconstruction can be performed but with less trauma to the shoulder. This means less risks and side effects, a shorter hospital stay, better cosmesis, less postoperative pain and potentially a more rapid functional recovery.

1Bottoni CR, Smith EL, Berkowitz MJ, Towle RB, Moore JH. Arthroscopic versus open shoulder stabilization for recurrent anterior instability: A prospective randomized clinical trial. *Am J Sports Med* 2006;34:1730-1737.



Arthroscopic view demonstrating suture and anchor being placed through a keyhole

## Dr Burne Heads To Beijing



**Dr Scott Burne consults at St Vincents SportsMed every week.** A specialist in all acute and chronic musculoskeletal injuries, he is an accomplished sports physician who will head to the Beijing Olympics later this year as team doctor for the Australian women's basketball team, the OPALS.

Dr Burne has previously looked after the OPALS at the 2004 Olympics in Athens and the 2006 Basketball world championships in Brazil, where the Opals defeated Russia in the finals to take the gold medal and become World Champions.

Congratulations also on his appointment as sports physician to Tennis Australia for NSW Scholarship holders. In this position Dr Burne will care for many junior elite players on the tennis curcuit.

### **News** around the office

### Dr Simon Tan - Orthopaedic Surgeon

Dr Tan traveled to Canada in January to attend an update on orthopaedic trauma and retrieval in the ski fields. An on site avalanche during the conference was a frightening experience and a reminder to all.

In February, Dr Tan was invited to attend the Masters Shoulder Arthroscopic Surgery update in Bangkok, this meeting being attended by prominent shoulder surgeons from around the world.

Well done to Lachlan Tan, Simon's son who recently toured Australia with the Football NSW U8's development team.

#### Dr Angus Bathgate - Sports Physician

Congratulations to the Bathgate family on the arrival of their new baby girl, Amelie. As a Sports Physician, Angus continues to support Easts Rugby club and has increased his consulting sessions at St Vincent's SportsMed in line with the start of the football season.

#### Julie Law - Medical Secretary

Well done to Hannah Law, Julie's daughter who was recently named junior athletics champion and selected to compete in the CGSSSA Athletics carnival. Hannah also received the Babicci award for high achievers in 2007.

## Watch this space

St Vincent's SportsMed will continue to expand this year. We continue to progress with plans to relocate our new and considerably larger sports medicine clinic to level 4 of St Vincent's Clinic. Not only will we be moving, but the addition to the St Vincent's SportMed Team of a highly respected sports surgeon is just around the corner. **Watch this space...** 



# St Vincent's SportsMed is located in St Vincent's Clinic in Darlinghurst, Sydney

The aim of St Vincent's SportsMed is to maintain the highest degree of both professional and ethical standards in the service we provide to our patients. By continuing to uphold the principles of evidence based medicine and by being involved in ongoing research we will provide a secure foundation for surgical excellence. In addition, our strong commitment to customer service will always provide a caring and supportive environment to those in need.

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