
Report of the 2009 ACS Germany Traveling Fellow

by Richard Santucci, MD, FACS

The ACS Germany Traveling Fellowship is awarded every year to an American or Canadian surgeon who will travel to Germany, and to a German surgeon who will travel to North America. The Germany Fellowship awardee attends the German Surgical Society meeting, and travels and lectures at two or more additional medical centers over a two-week period. I was fortunate to be the 2009 Fellow, and this is my report.

The German Surgical Society meeting

The meeting is attended by approximately 8,000 surgeons and affiliated medical personnel and lasts for four days. It is very similar to the international ACS Clinical Congress in terms of tone and composition, though it is smaller than that meeting (see photo, this page). The meeting provides the standard didactic lecture format, as well as some excellent hands-on opportunities for live training in laparoscopy and visceral surgery (see photo, page 41). Most German surgeons speak English exceedingly well, and most equipment companies advertise in English, so it was quite easy to navigate the meeting with limited German-language skills.

One of the major elements of the Fellowship is to attend and speak at the annual meeting (or “Congress,” as it is referred



Just before the opening ceremonies of the 2009 German Surgical Society Congress.

to in Germany) of the 126-year old German Surgical Society (Deutschen Gesellschaft für Chirurgie). The Society is made up of general surgeons and 10 specialty societies including plastic, cardiac, pediatric, neurosurgery, trauma/orthopedics, thoracic, general/visceral, vascular, and a separate cardiac/thoracic/vascular section. You may notice that gynecology and urology are not included in the society (they have their own separate groups)—a fact that initially caused consternation among my German contacts until I was able to convince them that the common ground

of trauma surgery, laparoscopic surgery, and reconstructive surgery that makes up my practice would have much overlap with their meeting agenda, and that all would be fine (and it was).

The German ACS

A crucial aspect of the Congress is attending the ACS German Chapter meeting. The ACS German Chapter has approximately 50 members and is the principal contact organization for the Germany Traveling Fellow. I made a short presentation of my travel plans to the ACS German Chapter and met up with the General



Hands-on surgical training at the 2009 German Surgical Society Congress: using animal viscera to practice open anastomotic techniques.

Secretary of the chapter, Prof. Norbert Senninger, MD, FACS, chairman of surgery and chief of transplantation at Münster University (see photo, page 42). I was pleased to meet a number of German ACS members and to hear that they perceived their ACS application process to be respectful and efficient, and their association with the ACS valuable. Only a fraction of eligible German surgeons become ACS members, and I often saw that members who had worked or trained in the U.S. were perhaps more inclined toward membership for this reason.

This ACS German Chapter also meets during the Clinical Congress annually in the U.S. I would encourage any ACS member to try to attend this German section ACS meeting at any future ACS national meeting (or you may visit any international

ACS section meeting), as a sign of friendship and solidarity for our surgical colleagues worldwide.

At the end of the Congress, I lectured on the subject of Genitourinary Trauma: 21st Century Update for the General Surgeon. This topic was chosen by the German ACS section and me as having the most universal interest for my general surgery audience in Germany (see photo, page 42).

The Germany-to-U.S. Fellow

It was a pleasure to meet Prof. Bjoern Bruecher, MD, PhD, FACS—my German counterpart in the Germany Traveling Fellowship program. He has amassed an impressive curriculum vitae, not the least of which is attainment of full professorship at a tender age. Among his most impressive accomplish-

ments, for me, is the creation of the Theodor Billroth Academy, a German medical academy that trains and nurtures young medical students with an interest in surgery. According to a press release issued by the academy, fewer than 5 percent of German medical students profess an interest in surgery and this academy, which started its first two-week “summer school” for medical students last year, is designed to support those interested few, aggressively and early in their training. The students attend lectures and learn surgical techniques on cadavers. It is cross-pollination of ideas like this that make the ACS Traveling Fellowship programs so useful.

Heidelberg visiting professorship

Traveling Fellows can be assisted in their selection of centers to visit by the ACS German Chapter, or they may make their own arrangements. I have a long history of working with German surgeons, so I was granted my wish to visit my colleagues in Heidelberg and Bremen. The urology department in Heidelberg runs an amazing program, with a level of surgical competence, organization, and resources that is truly impressive. The department is headed by my friend and colleague Prof. Markus Hohenfellner, MD—professor of urology and chair of the department of urology at the Heidelberg University—with whom I co-edited our textbook *Emergencies in Urology*. Heidelberg University is the oldest in Germany, established

in 1386, and it was an exciting place to tour.

Professor Hohenfellner created a robust educational program for my visit. In Germany, surgical visitors are permitted to operate on patients, and I was able to perform several challenging cases which utilized my expertise in reconstructive urology. I performed these surgeries as I usually do, allowing the senior resident to perform the entire case with close direction and control, in order to maximize the value and teaching impact of the experience (see photo, page 43).

The visiting professorship featured nighttime lectures to the department and community urologists, and daytime lectures to the residents. I had the opportunity to give lectures on the following topics: Nonoperative Management of Even High Grade Renal Trauma, Hemostatic Agents in Renal Sparing Surgery, and Simplified and Unified Approach to Urethral Stricture Disease.

A highlight of the trip was a dinner with only the residents and me, where we had a chance to get to know each other and I could learn their personal stories. This allowed an excellent opportunity to advise these young surgeons on patient care and career issues in a “safe” environment away from their overlords, and provide friendly advice when appropriate.

iClinics collaboration

Face-to-face meetings with Professor Hohenfellner allowed us to complete work on our latest international collaborative effort—the first free, high-speed, high-definition surgical



Professor Senninger (left) and Dr. Santucci.



Dr. Santucci's German Surgical Society Congress lecture.

video Web site in the world. Named *iClinics* (<http://www.iclinics.org>), it is a not-for-profit endeavor that allows registered users to upload high-definition surgical videos into a peer-moderated space, and allows any user to view it without the barriers of required registration. Videos feature space for both author and user commentary, very much like Amazon.com allows users to comment on the quality and characteristics of individual products. We believe this Web site can be an excellent source of high-quality surgical videos for surgeons worldwide, and we encourage ACS members to upload their own videos to the site (authors keep the rights to their own videos).

Bremen visiting professorship

I completed my journey with a lovely train trip up the Rhine River Valley to Bremen. Bre-

men is an ancient town in northern Germany set on the river Weser, and situated about 40 miles south of the North Sea. Its center is a UNESCO World Heritage Site, and it is a beautiful place to be a tourist.

My host was “Herr Professor Doktor” Sebastian Melchior of the Klinikum Bremen-Mitte. (Notably, formal German social protocol requires the use of the full title of a professional person’s name, and in the correct order. Professor Melchior and I have been friends since residency, so I have been permitted to call him by his first name, but formal reference should always include the full title, especially in writing or in public. Any university professor of any description must be referred to as “Professor” in Germany, even though in the U.S. one might refer to a physician with a university appointment as simply “Doctor.”)



Performing a complex urethroplasty on an adult patient with urethral stricture after childhood hypospadias repair in the efficient and familiar German operating room, together with a senior resident.

In Bremen I was allowed to lecture on the subject of urethral stricture to the university and community urologists, and I gave a lecture titled 21st Century Overview of Genitourinary Trauma to the urology department at the university clinic. We completed a very challenging surgical case of proximal urethral avulsion after pelvic trauma where the bladder neck had also been ligated closed during previous pelvic exploration for bleeding. In this case, Professor Melchior and I completed the case together (instead of with a resident), as it was very difficult. Professor Melchior is an accomplished cancer and

transplantation surgeon, but his experience with exotic trauma cases is naturally less robust, and we both benefited from each other's perspective during this arduous case. It is interesting to note that chairmen of urology departments in Germany do not specialize in narrow surgical disciplines as much as we do in the U.S., and often they are expert surgeons who regularly operate across several urologic subspecialties.

What the traveling fellowship means

Improving and nurturing international relations in surgery is my main avocation in organized medicine. There are

approximately 194 countries worldwide, encompassing almost 7 billion people. These billions of people in hundreds of countries have much to teach and much to learn. The ACS has a robust international mission that serves to train and educate worldwide, but this mission also allows cross-pollination from foreign experts in the U.S. (an important thing if we are to keep innovating at full speed, and crucial to avoid becoming intellectually insular). I am so grateful to the ACS and the German Surgical Society, and to the many people in Germany and the U.S. whose efforts made my trip possible and who gave me the opportunity to increase friendly and professional ties, as well as to increase the scientific cross-pollination between our two great nations. The ACS can conceivably become the uncontested global brand leader in surgical innovation and education—and while the Germany Traveling Fellowship is only one thread in that planet-wide web, it is only through such programs that this is an achievable goal.

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