
MESSAGE FROM THE PRESIDENT

Why do we become orthopaedic surgeons?

When I meet colleagues I often wonder what attracted them to orthopaedics. There is a surprisingly constant demand for registrar positions in what must be one of the most demanding specialities. Orthopaedics in North America regularly attracts the top academic performers. Final year medical students in Britain enthusiastically present excellent research papers at national congresses. The orthopaedic literature in 2007 was the second largest of all disciplines. For a traditionally masculine speciality, it is becoming surprisingly popular among women. So presumably we can conclude that we are able to read, orthopaedics appeals to the young, and the criteria for success cannot be reduced to biceps size,¹ but that does not explain its popularity.

We are a very diverse group, but some common traits seem to stand out. However controlled we may appear, many of us are physical and competitive, ready for a challenge, and looking for new ones. Most of us are realists; we need to confront problems that are well defined, of practical importance and capable of a physical solution because we delight in our manual skills. Many have an engineering background or related hobby. We are usually meticulous, with a fetish for pre-operative planning, shiny expensive gadgets and good postoperative X-rays. We do not tolerate failure. We are egotists, because without our conviction that we are the best we would not dare to perform surgery on other human beings. We are responsible, because we temper our egotism with judgement of what is in the patient's best interests. And with all those features in common, there is still enough variation in personalities and in orthopaedics to allow each surgeon to find his or her own niche in this enormous subject.

So why orthopaedics? Many of the features listed above are also valid for other forms of surgery, so there must be some other factor. For me it was simple; I wanted to become a surgeon, and the orthopaedic surgeons were the only people who treated me as a person during my internship. In our medical school, orthopaedics has been voted as the best intern rotation for the same reason, despite the work load. My wife may be biased, but she maintains that the only surgeon to marry is an orthopod.² So there you have it; despite our perfectionist tendencies, egos and morbid taste for heavy metal and vivisection, we are essentially practical, likeable people, who treat others with respect and consideration. This is our professional image. May we stay that way.

To all my friends and colleagues, best wishes for the festive season, and the coming year.

1. Interestingly, though, it may relate to ring finger length; if it exceeds that of the index finger it suggests an aggressive personality. An impressive number of ostensibly civilised visiting Orthopaedic Presidents had long ring fingers – even the female of the species. Draw your own conclusions.
2. Not only because we can change a light bulb on the rare occasions we are at home.

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