



# AOFOG YGAA

AOFOG YOUNG GYNAECOLOGIST AWARDEES ASSOCIATION

## NEWS LETTER

www.aofog.org

JANUARY, 2010

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### EDITORIAL

Dearest AOFOG Members,  
Happy New Year,

May 2010 bring Health, Wealth and Prosperity to one and all.

The AOFOG YGAA is going online from this issue and will now come as only e-bulletin available on AOFOG website.

We are looking forwards to an active participation from YGAA's in AOFOG activities. Please come forward and contribute to this bulletin.

Looking forwards to a lot on interaction.

  
**Narendra Malhotra**  
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Dr Narendra Malhotra

**Please contribute to this Bulletin,  
we are going online  
and if we receive regular  
inputs we will have a quarterly  
Online e-bulletin.**

**EDITOR & CHAIRMAN OF YGAA ALUMINI NETWORK OF AOFOG  
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**Dr Narendra Malhotra**

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**FOR PRIVATE CIRCULATION AMONG AOFOG MEMBERS**

We all know the benefits that laparoscopic surgery brings to our patients. Studies consistently show that laparoscopic procedures are associated with less post operative pain, shorter hospital stay and faster return to normal activities. But what about the surgeon? We all know colleagues who have had to have time off work with shoulder, neck or back pain. Laparoscopic surgery involves a more static posture of the neck and trunk with more frequent awkward movements of the upper extremities. Often the surgeon may spend prolonged time with a rotated spine, which may also be curved laterally. Combine this with extension of the cerebral vertebra to view the monitor, a surgeon is bound to suffer pain at some stage in their career. A recent survey of laparoscopic surgeons attending conferences in Canada, Scotland and New Zealand showed that 24% of respondents often suffered from musculoskeletal pain and 52% of them suffered occasionally from neurological symptoms. How do we avoid becoming a victim to the pain of laparoscopic surgery? Here are my top 10 tips.

**Lower the height of the bed:** The bed should be low enough so that your elbows are bent at approximately 45°. This prevents shoulder fatigue and aids surgical dexterity. If the bed does not drop low enough a step may be required but make sure it is wide enough to accommodate foot pedals and feet movements.

**Lateral port placement:** Midline ports force the surgeon to lean over the patient. This causes back and shoulder pain and restricts surgical movement.

**Correct monitor height:** This varies from surgeon to surgeon but most surgeons prefer the monitor to be at eye level.

**Correct monitor position:** The monitor should be positioned caudal to the patient's hip or between the legs. This enables the surgeon to minimise rotation of the spine.

**Stand by the patient's shoulders:** By stepping up towards the patient's head, you can stand at an angle and operate 'in line' with feet and shoulders parallel and forearms at 90 degrees to the line of the shoulders. This minimises spinal rotation.

**The patient's arms should be by her side or across her chest:** This is the cardinal rule. If the arm is on an arm board the surgeon will have to bend the spine laterally to operate.

**Place quivers between the legs:** The closer the quivers are to the line of surgery, the less spinal rotation is required when changing equipment.

**Place foot pedals on the caudal side of the surgeon:** This prevents the need to rotate away from the surgical site to activate the pedals.

**Use hand activated equipment:** Abolishing foot pedals prevents awkward movements of the lower extremities.

**Stand on a rubber mat:** This helps prevent fatigue.

And finally make sure all of the cables run to the equipment from one side of the surgeon. This enables the surgeon the freedom to move away from the patient without tripping. Well, good luck. I hope at least some of these tips will make your operating a more pleasant experience.

**Dr Martin Ritossa Adelaide.**  
Australia.

# The XXII Asian and Oceanic Congress of Obstetrics and Gynecology

SEPTEMBER 23-27, 2011 TAIPEI, TAIWAN



## “ New Frontiers in Women's Health ”

### Topics:

1. General Gynecology
2. Gynecologic Oncology
3. Imaging
4. Perinatology
5. Reproductive Endocrinology
6. Urogynecology
7. Menopause
8. Minimally Invasive Surgery

### Important dates:

1. On-line registration starts from April 1, 2010
2. Second announcement will be published on April 1, 2010
3. Abstract submission deadline: February 28, 2011
4. Early bird registration deadline: April 30, 2011
5. On-line registration deadline: August 31, 2011

**Expect  
over 70 Trade  
Exhibitors and  
500 Posters Display**

### Organizing Secretaries:

C/o Round Table PCO  
10F, No.29, Sec.3, Nanjing E. Rd.,  
Zhongshan District,  
Taipei City 10487, Taiwan  
Tel: +886-2-2508-1825  
Fax: +886-2-2508-3570  
Email: aocog2011@come2meet.com

### Tour Program:

1. Half day Free City Tour for Accompanying Person: 1 tour package with 3 departures
2. Paid Half-Day Tour: 4 tour packages
3. Paid 1-Day Tour: 3 tour packages
4. Paid Post Congress Tour: 2 tour packages

### Organizing Team

Main contact person : Ms. Han CHIANG / ext.117  
Scientific Program : Vicky CHIEN/ ext.118  
Sponsorship/Exhibition : Jojo CHUNG/ ext.112  
Registration/Accommodation : Novia PERNG/ ext.119  
Social Program : Lucy HUANG/ ext.114

Website: [www.aocog2011.org.tw](http://www.aocog2011.org.tw)



With the support of various donors, AOFOG has sponsored many young gynaecologists to attend the Asia Oceania Congress of Obstetrics and Gynaecology with the Young Gynaecologists Award Scheme. The scheme was later renamed as S.S. Ratnam Young Gynaecologists Award scheme in commemoration of Professor S.S. Ratnam who had the foresight to initiate this scheme. We have now built up a critical mass of young gynaecologists to form an active Young Gynaecologists Award Association. The young gynaecologists will be the future leaders of AOFOG as well as the Obstetrics and Gynaecology profession. I am glad to see that some of them have already taken up important positions in their own national societies as well as our Federation. This is a good indicator of the success of our S.S. Ratnam Young Gynaecologists Award Scheme.

I wish all of you a happy and fruitful year in 2010.

**Prof. Pak Chung Ho**  
President AOFOG



AOFOG is now 52 years old and has grown over the years to be a very strong organization because of the working principals laid down by the founding members. These principals are mainly being truthful and righteous in our action at all times and performing their duties for AOFOG without expecting anything in return.

They all worked together as one family with the main objective of taking care of the health and welfare of the women and the newborn children, and the welfare and uplifting the knowledge of the young obstetricians and Gynaecologists of the Asia -pacific region. Many a AOFOG young Gynaecologist of the past have reached high offices in various fields and also within AOFOG.

I wish all YGA's to come forward and get involved in AOFOG activities.

Warmest regards,  
yours always

**C. Anandakumar.**  
President Elect AOFOG.



From 2010, JOGR, the official journal of AOFOG, has come into a new era when the journal is published online only. Our continuous efforts for publishing articles with better quality has pushed Impact Factor of JOGR up to 0.915.

I invite all YGAA members to submit your best manuscripts to JOGR for making it one of the top journals in the world. Manuscripts for original research articles, case reports, review articles and letters to the editor are all welcomed. They are peer reviewed by at least two referees and/or associate editors expert in the field of the submitted paper. Then your articles are fully copy-edited and published online immediately.

This contribution towards our journal must also promote AOFOG activities, that is the duty of YGAA members.

**Takashi Okai**  
Editor-in-Chief, JOGR

Dear YGA's

Greetings,

It is indeed my pleasure to address all the Young Gynaecologist Awardees of Asia and I congratulate Dr. Narendra Malhotra for standing the YGAA bulletin on the website of AOFOG.

Our countries face similar problems hence there is a great need of interaction among our gynaecologists.

I take this opportunity to welcome all of you to India as young observers in a field of your interest.

We can offer you (under this program) home hospitality and placement for observer training course in ultrasound, Laparoscopy, IUI, Infertility and ART.

I would also request senior doctors of AOFOG to offer to host young doctors from India as observers for week to fortnite.

Looking forwards to many interactions and Young Gynaecologists interaction among AOFOG countries.

Regards.

**Dr. Anupam Gupta**