

# Complications and rare cases in orthopaedics

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You become an accomplished surgeon when you successfully manage your own complications. You become an expert by treating many common and also rare cases. We learn this in medical school and then we greatly improve having a first degree encounter with specific cases and complications during residency. We finally understand the full meaning during clinical fellowship or early practice becoming responsible for the results of our actions. Each complication or rare case involves the patient together with one or several surgeons, experts in other specialties such as anesthesiologists, infectiologists, biologists or referring health professionals. The patient and families are dealing with longer hospital stay, stress and danger. Being admitted in a medical institution is quite risky as lethal complications and life-threatening adverse effects were seen between 165 and 200 cases for every 100.000 patients in different countries [1]. We have less lethal complications in orthopaedics as compared to digestive surgery but however, high-volume orthopaedic Departments over the globe are frequently dealing with new pathologies and occurrences that were inexistent fifty years ago such as repeated revision of arthroplasty with severe bone loss, periprosthetic fractures, metallosis, allergy to chemical components in the implants alloy and so many others. Specific functional loss is seen with new implants such as the Reverse Shoulder Arthroplasty or the Reconstruction Implants for tumor. We cope with a world in change that allows rapid information processing and trans-

mission. Patients are more exigent because they get used with reading on the Internet and comparing results or sometimes publicity. The research is moving forward and quality data from clinical trials is published continuously. New treatments come sometimes with adverse reactions that need to be shared and we do this frequently in our Journal [2, 3]. Other communications are related to new implants that would help in rare and difficult cases [4, 5]. We also communicate on conditions that are frequent in some parts of the globe and could help our readership in recognizing or managing such situations [6, 7]. As participants to the scientific life of our community we also try to stimulate our readers and authors to provide reliable information for the patients. We learned from recent papers that the information shared and vulgarized over the Internet may be incomplete or false and therefore we should educate the patients that are coming to see us as specialists [8, 9]. All this make from “International Orthopaedics” a publication that is constantly appreciated by our readers and keeps the pace with the times to come.

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