Four Centers, Four Perspectives – My AGA-SFO Travelling Fellowship 2026

An account of two inspiring weeks in Switzerland and Germany

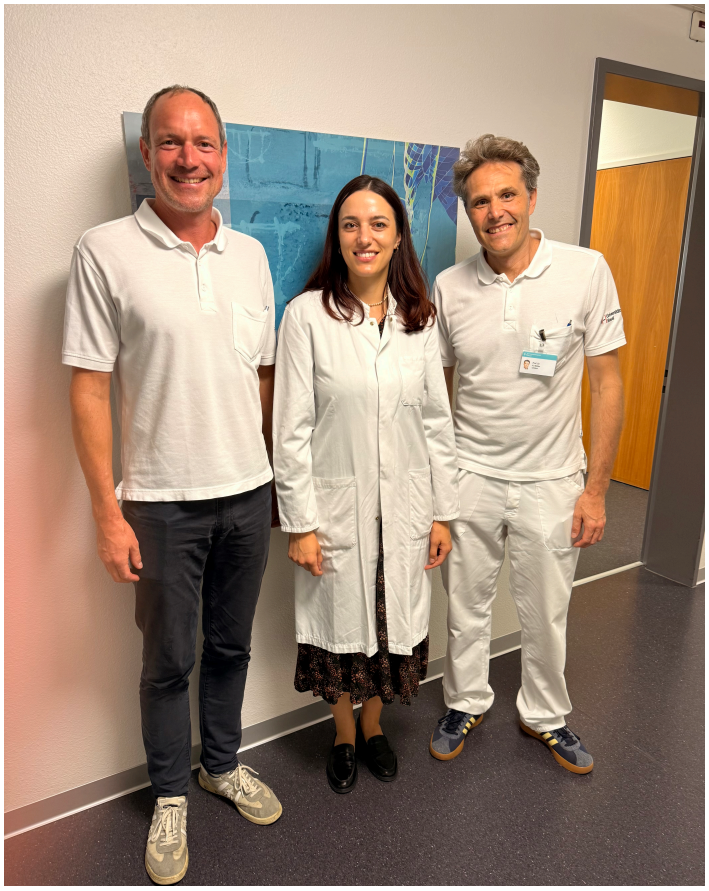
Thanks to a joint fellowship grant from **Swiss Female Orthopaedics (SFO)** and the **Society for Arthroscopy and Joint Surgery (AGA)**, I had the opportunity to visit four different orthopedic and surgical centers in Switzerland and Germany in September 2026. From university hospitals to a welcoming regional hospital and a highly specialized outpatient surgical center, I gained valuable insights into different surgical techniques, organizational structures, and treatment philosophies.

1. Bethesda Hospital, Basel – Organization and Responsibility

My first stop took me to Basel, where I was welcomed by **Prof. Dr. med. Andreas Marc Müller and Prof. Dr. Dirk Mayer**.

I was particularly impressed by the size of the hospital and its efficient organization. The very first Monday morning meeting, during which reviewing the weekend cases alone took more than half an hour, highlighted the substantial clinical workload. Despite the fast pace, the different teams operated largely independently, taking responsibility for their patients and clinical decisions while maintaining a collegial and respectful atmosphere.

One of the surgical highlights was a **reverse shoulder arthroplasty combined with latissimus dorsi and pectoralis major tendon transfers**. Although reverse shoulder arthroplasty aims to restore shoulder mobility, full external and internal rotation cannot always be achieved. Additional tendon transfers may help compensate for these functional limitations. What impressed me most was the remarkable precision, efficiency, and confidence with which this complex procedure was performed.



2. Balgrist University Hospital, Zurich – Precision Through Individualization

At **Balgrist University Hospital**, I was accompanied by **PD Dr. Bettina Hochreiter**. The seamless organization and effortless integration into the daily clinical routine clearly reflected the hospital's extensive experience in hosting fellows.

The clinical pace was equally demanding, although the focus here was primarily on elective orthopedic procedures. I was particularly fascinated by the continuous refinement and individualization of surgical techniques. Performing similar procedures repeatedly provides an opportunity to optimize even the smallest details and progressively improve surgical precision.

One particularly interesting example was a **Latarjet procedure using bioresorbable screws**. These offer an alternative to conventional metal fixation and may help reduce implant-related complications caused by

prominent screw heads or tips, potentially avoiding subsequent hardware removal. For me, this was an excellent example of how innovative materials can contribute to the evolution of well-established surgical techniques.



3. St. Vinzenz Hospital, Pfronten – Versatility and Collegiality

Moving on to Germany offered a new perspective. After several years of clinical training and practice in Switzerland, it was fascinating to discover how similar orthopedic conditions can be treated using different, yet equally well-established techniques. One important observation was that **excellent surgical results do not necessarily depend on expensive implants or materials**, but rather on experience and precise mastery of a surgical technique.

At **St. Vinzenz Hospital in Pfronten**, I received a warm welcome from **PD Dr. Stephanie Geyer and Dr. Christian Schoch**. What struck me most was the genuinely welcoming and family-like atmosphere of the smaller team. Colleagues knew each other personally, supported one another, and maintained an open and friendly working environment.

Their hospitality was particularly memorable: my hosts took the time to show me around the hospital, arranged some pastries from the local bakery, and even accompanied me to the parking lot at the end of the day.

At the same time, I was impressed by the **broad surgical expertise** of the surgeons, who must be proficient not only in specialized procedures but also in managing a wide variety of injuries, ranging from acromioclavicular joint dislocations to pertrochanteric femoral fractures. This combination of surgical versatility and genuine team spirit left a lasting impression.



4. Munich – Efficiency and Evidence-Based Medicine

My fourth stop took me to Munich, where I joined **Prof. Dr. Andreas Lenich** at a specialized outpatient surgical center.

I was particularly impressed by the exceptionally well-coordinated collaboration between anesthesiology, nursing, and the surgical team. Patients were positioned appropriately for their procedures even before induction of anesthesia; in one case, for example, intubation was performed with the patient already in the prone position.

Thanks to these highly structured workflows, **five surgical procedures could be completed before noon**, without any sense of rushing or unnecessary stress. This remarkable efficiency was the result of an experienced team, meticulous organization, and precisely coordinated processes.

Equally valuable was the opportunity to exchange ideas with Prof. Lenich. Despite his busy surgical schedule, he generously took the time to explain his operative techniques, treatment concepts, and the scientific studies supporting his approach. I particularly appreciated his consistent commitment to **evidence-based medicine**.



Final Stop in Innsbruck – Arthroscopy and Professional Exchange

My fellowship concluded with the **AGA-STArt Arthroscopy Course**, followed by the **AGA Congress in Innsbruck**.

Despite my previous experience in arthroscopy, the course provided an excellent opportunity to further refine my practical skills. Afterwards, I enjoyed attending inspiring scientific presentations and reconnecting with colleagues, including several former colleagues whom I unexpectedly met at the congress.



Conclusion – Different Approaches, Shared Goals

These two weeks offered far more than the opportunity to observe interesting surgical procedures. Each center provided a unique perspective: **Basel** demonstrated the importance of clear organizational structures and autonomous teams; **Balgrist** highlighted the continuous refinement of specialized surgical techniques; **Pfronten** emphasized the value of surgical versatility and genuine collegiality; and **Munich** illustrated the potential of efficiently organized, evidence-based surgical care.

My most important takeaway was that **excellent surgery is not defined by a particular technique, implant, or organizational model**. Rather, it is built on experience, precision, collaboration, and a continuous willingness to learn and improve.

I would like to express my sincere gratitude to all my hosts for so generously sharing their time, knowledge, and experience with me.

A special thank you goes to **Swiss Female Orthopaedics (SFO) and AGA** for making this valuable fellowship possible through their joint support. I return from these two weeks with numerous new ideas, fresh professional inspiration, and renewed motivation for my future work in orthopedics and shoulder surgery.

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