

The Trans-Australia tour

BJD Campaign

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As you might know, I have been involved in the BJD campaign and this year our team is on a Trans-Australia tour by bicycle, which was launched in Perth, Western Australia, on August 25, 2009, and arrived in Sydney on October 20. The Royal Adelaide Hospital is one of the hospitals they visited during their journey.

Before you read Mr. Worsman's article, please let me explain to you how I treated Mr. Shinji Kazama, team leader of our tour. Shinji, an adventurer and motor-cyclist, was admitted to my hospital in August, 2004, after having undergone a series of inappropriate treatments at a Japanese hospital. He had non-union, angular deformity and rotation deformity in his tibia. Proximally, 4/5 of his patella had been removed. I corrected all the deformities he had and reconstructed the knee extension mechanism. Six months later, his tibia gained union but unfortunately his knee function has not been fully recovered. Following this is what Mike Worsman, RAH communication officer, has written about their visit for the RHA staff newsletter. During the procedures, he became aware of the importance of trauma surgery and offered to help me, while I tried to establish the first trauma center in Japan as chairman of the steering committee of BJD Japan. Since

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2007, he has been involved in our campaign to prevail the awareness of the importance of locomotive organs and trauma surgery as BJD's International Ambassador. Mr. Worsman has kindly consented to reprint his article in the ISFR newsletter.

Following is Mr. Worsman's report:

'Disabled' Japanese cyclists visit RAH

Imagine you were in a car crash or industrial accident, and whether or not you received the best treatment available was based on pot luck...Well, for these three men this was an all too true reality.

In Japan what ever hospital is 'on call' for trauma cases takes all trauma victims, and it is pot luck whether there is the right specialist there to diagnose the problem and recommend the correct treatment or perform the required surgery. Team leader, Shinji Kazama's experience is an example of what can occur in countries where there is no specific trauma centre. Shinji was and always has been an adventurer, climbing 6800m up Mount Everest and being the first man to ride a motorbike to the North Pole.

Shinji was competing in the 2004 Paris to Dakar Rally when he was hit by a truck that pulled out in front of him, on a road that was closed for the event. The



trauma specialists wanted to amputate. From there he was flown to Paris, where a leading orthopaedic surgeon put him back together. If he could have afforded it, he would have walked out of the hospital without crutches after four months. Without sufficient insurance, however, he was flown back to Japan. Tetsu Tanaka (right) was 19 when he lost control of his motorbike and crashed into a road sign, causing his leg to be amputated from just below the hip. Despite many people looking down on the fact he has a 'disability', Tetsu has been involved in two Paralympic Games for skiing and was offered a spot on Japan's Olympic team as a weight lifter - at his peak benching 183kg. Tetsu is currently a ski and gym instructor and features in many inspiring documentaries in Japan. Masa Yamazaki was working in a car manufacturing plant, when in an industrial accident, he was crushed by a falling object which broke his vertebrae and crushed his spinal cord between v4 and v5, rendering him 'quadriplegic'. After seven years of gruelling rehabilitation and an unforgiving work ethic he and his companions will ride nearly 5000km on their journey from Perth to Sydney.



Shinji Kazama, Masa Yamazaki, Tetsu Tanaka (from left to right)

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‘Disabled’ Japanese cyclists visit RAH Cont’d

Their RAH experience was lead by our local surgeon, Professor Mellick Chehade (also President of the Australasian Orthopaedic Trauma Society), Professor Nick Fazzalari (IMVS), Professor David Findlay and a host of other bone and musculo-skeletal specialists who were able to provide their expert opinion on a range of issue the men were interested in.

The Japanese visitors chose the RAH as an internationally recognised provider of high level trauma care. They sought to gain from our experience and insight as part of their longer term plan to set up trauma centres in Japan. It was recommended that an integrated (clinical/scientific) multidisciplinary approach was crucial and that education of staff and the public was important in achieving good patient outcomes. An orthopaedic surgeon from Japan (representing the World Health Organisation), who is travelling with the group was also present and will be

presenting findings from their Australia-wide trip to delegates from a number of countries, including Japan.

Please visit the site of the tour journal at <<http://bjdcampaign.info/en-30australia.html>><<http://www.asahi.com/car/aus/>>

