



Dear Colleague

what's new at braemar?

As an orthopaedic surgeon, Richard Willoughby has seen people with terrible injuries. He says it is extremely rewarding to help them on the road to recovery.



"The body is amazingly clever in its ability to heal itself. Our job, as orthopaedic surgeons, is to help it (the body) do that. It's extraordinary how the body can be straightened out. All we aim to do to hold bones straight while they heal," he says.

As a case in point, he remembers an accident victim who presented with multiple injuries, including a severely damaged leg. "Basically, he'd left 14cm of his femur (thigh bone) on the road." It took time, he says, but the patient eventually got back on his feet." In another case in Brisbane, an 11-year-old boy had to have 25cm of his tibia removed because of a tumour. "We set about growing him a new one.

We gradually stretched the bone down to create a new tibia." Recently Mr Willoughby received a picture of the boy standing on two legs without a brace. "That was wonderful to see."

Stories like these – plus many other less dramatic recoveries – make his work hugely rewarding, he says.

Richard Willoughby's path to medicine was pretty much pre-ordained. His father is a neurologist in Auckland and his grandfather was a GP (and mayor) in Huntly for many years. There are other medics in his extended family. He said his father never pushed him towards medicine but he was supportive of his choice. "He told me, 'it's a long road, but rewarding'. That's true."

He trained at Auckland Medical School and worked at Auckland hospitals before undertaking four years' orthopaedics training first in Palmerston North and later at Waikato Hospital. In 2007, he took up fellowships at Bristol, England and Brisbane, Australia. He has returned this year to work at Waikato Hospital and Braemar Hospital, where he says he can work at the highest level, with talented people while maintaining a good lifestyle for his young family.

He says he likes the nature of orthopaedic surgery because "often you can define problems and fix them so people can carry on." This is particularly the case in hip replacement, in which he specialises. "If people have a painful hip, you can get them back on their feet and improve their quality of life. You see tangible benefits."

Today he also works in arthroscopy, keyhole surgery using a pencil-sized fibre-optic camera, which allows the surgeon to safely and accurately assess damage to the joint and perform corrective procedures to cartilage, soft tissue and bone problems.

He says new arthroscopic practices have been exciting in treating hip problems in young people. "People present with problems for which there are no easy solutions and, in doing so, challenge us to find effective treatments. This has been especially true with the growth of professional sports."

Previously, if a young person had problems with their hip surgeons did not have much of a solution. "Surgeons have been reluctant to do hip replacements in young people for a number of reasons

that are still true. A young person would typically be told they had arthritis but they would have to wait years for a hip replacement.

“Now some of those people may benefit from a scope into the hip to trim torn cartilage with the hope of relieving pain. Ideally – but this isn’t proven yet – it will also stave off arthritis and prevent having a hip replacement at a young age.”

He says “hip scopes” (arthroscopic hip surgery) are increasingly being used for sports injuries, especially in kicking sports like AFL where a player lifts his hip high and across his body grinding the edge of the socket and pinching the cartilage. “There is a debate to how much you should be doing to put these people back into the area where they will injure themselves again. I don’t have the answer to that.”

Mr Willoughby also specialises in paediatric orthopaedics and is currently the only paediatric orthopaedic surgeon at Waikato Hospital.

He is also researching a new technique

to treat Slipped Upper Femoral Epiphysis (SUFE), a condition of the hip which typically affects adolescents. This is a condition in which the physis (growth plate) of the femur is weak and the epiphysis (head part of the bone) becomes separated from the rest of the bone. Children with the condition experience pain and may be unable to bear weight on the affected leg. When the problem is severe children typically walk with a “Charlie Chaplin” gait in which the feet are turned out. The condition affects two in 10 adolescents in the UK, and is especially prevalent among obese children. SUFE is a particular problem among Polynesian children in the Waikato.

Mr Willoughby began work in this field while he was working at the Royal Children’s Hospital in Brisbane and there are some promising results. He is keen to get the study up and running in New Zealand.

He also wants to throw his weight behind “Joint Effort” a biannual nationwide walk in which people with joint replacements walk a kilometer to raise funds for the Wishbone Trust, an organisation supporting orthopaedic research in New Zealand. The next walk is planned in 2012.

He believes New Zealanders are “incredibly lucky” to have access to high quality medical facilities. “In Brisbane, while I was doing paediatrics – one family drove from Mt Isa for a clinical appointment. It was a 22-hour drive each way.”

He and his wife Pip have bought a section at Tamahere and intend to build there. They have already begun a restoration of the gulley on the section, helped by Pip’s parents who live at Cambridge. When he has time, he plays tennis, water-skis and dives. But these days, he says, life centres around work and the family, including four young children.

“ He says he likes the nature of orthopaedic surgery because often you can define problems and fix them so people can carry on. ”

why choose a braemar hospital?

“Choice and Flexibility”

An ageing population, increasing demands and expectations, and the cost of new technologies provide challenges for both the private and public health sectors.

Medical and technological advancements have increased our ability to treat disease and injury. This has led to a greater expectation as to what should be achieved by the health sector. In the public sector the increase in complex surgery has come at the expense of lower cost surgery such as hernias and varicose veins, and the rationing system of waiting lists has led to these, and more complex procedures, being completed in the private sector.

Private healthcare offers choice and flexibility. It also offers access to some of the best Specialists in a timely manner without the restrictions of a waiting list.

At Braemar patients can be assured of a quality service at competitive rates and the very latest of modern medical technology.

Visit our website for more details: www.braemarhospital.co.nz



Dr Rob Cameron
Chairman

“Quality care costs less
at Braemar hospitals”

www.braemarhospital.co.nz



24 Ohaupo Road, Hamilton
PO Box 972, Waikato Mail Centre 3240
Phone: 07 839 2166 | Fax: 07 834 3944



Knox Street, Hamilton
PO Box 972, Waikato Mail Centre 3240
Phone: 07 858 0760 | Fax: 07 838 0368