



Interview with

## Prof. Mandeep Dhillon

Past President of the Indian Foot and Ankle Society

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Prof. Mandeep Dhillon, Past President of the Indian Foot and Ankle Society (left) speaks with Raphael Boehm, Executive Director DARCO India (right) about Knowledge and Specialization in Foot & Ankle Surgery in India. DARCO is an international group operating worldwide in a leading position with orthopaedic foot and ankle products such as cast boots, walkers, postoperative shoes and offloading boots.

Raphael Boehm (RB): You do have a high reputation as a surgeon and as a foot specialist. And this reputation is not limited to India only. You are also on the board of several societies and among others you are the president of the Indian Foot & Ankle Society. Would you say that there is a trend in India, too, for surgeons to get more specialized in foot & ankle surgery?

Dr. Mandeep Dhillon (MD): At the moment this is something that is the need of the hour. Many doctors and young residents are realizing that specialization is the need of the future, and we are seeing an increasing interest in young trainees and some established surgeons, who are learning the art and science of Foot specific surgery.

RB: The complexity of foot surgery obviously needs to be addressed by continuous studying and training. Would you say that there is an upcoming demand in India to have physicians of all specialties more intensively trained on foot & ankle surgery?

MD: I agree that Foot specific surgery needs continuous upgradation of knowledge. Unfortunately in India we do not have established foot and ankle specific training protocols in established Training centres or Universities. Nevertheless the Indian Foot & Ankle Society has set up training fellowships, conducts multiple Continuing Medical education programs, as well as holding conferences to upgrade knowledge and impart information.

RB: We do see more and more Indian doctors publishing medical book. Last year you published a book about Calcaneus fractures. Do you expect physicians to use books like yours also for their own advanced training?

MD: Issue Focused books and journals are important to give out detailed information on topics that may not be discussed in general orthopaedic books. Advanced training includes a supervised program, but ongoing education and regular updating would come for such books as well as web based protocols that the IFAS has now set into place.

RB: In your book you describe among other topics the availability of new techniques (i.e. MIS) and new implants (i.e. locking plates). Do you see an increase of innovation in medical devices for foot & ankle surgery in India?

MD: Indians are known for local innovations and modifications. Yes I see a lot of potential for innovation for medical devices in India, which would then spread to the region of south east Asia. Many Indian innovations are also helpful for African countries too, as the JESS fixater (modified small indigenous external fixater for the hand and foot) was.

RB: But your book is not only a reference for diagnosis and surgical treatment. You also describe the need of post-operative Therapy. This includes physiotherapy and of course a proper foot wear. Post-operative the golden standard is still a cast in case of fractures. Would you say that nowadays cast-replacements like removable walkers are beneficial in fracture treatment?

MD: I agree that in India the standard of post operative care is still a POP cast; nevertheless the future; we are also realizing that the modern option of removable walkers is better, and may even turn out to be cheaper in the long run.

RB: And how about other indications in foot & ankle surgery, like bunion correction or diabetic feet. Would you say that nowadays off-loading devices are most necessary?

MD: Bunion correction is rare in India but Diabetic foot is a huge problem, as India has a vast population of diabetics, with limited education about foot care both in the patients and the general physicians. Affordable off-loading devices would be a boon for this large population group, and the IFAS is ready to interact with these groups for future education.

RB: Would you agree that a missing, proper foot wear device might result in a delayed healing process or even worse a failure of the result of the surgical intervention?

MD: I agree, that is true. The proper device as well as proper rehabilitation, and protection is as important as properly done surgery.

RB: Where do you see the biggest hurdle in the use of off-loading/stabilization devices:

- > A lack of awareness the existence of such products?
- > A lack of knowledge about the function/benefits of such products?
- > A lack of training on the use of such products?
- > A lack of availability of such products?

MD: All 4 of the above, with a rider that the fourth point should address cost and affordability issues.

RB: Last not least question: imagine you would have just one sentence for an answer to the question: how can the foot & ankle problems of the Indian population better be addressed. What would be your answer?

MD: Continuing education of both the patient and the doctor, coupled with better focused training for surgeons desiring to be foot specialists.

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