

## **Postscript to The History of the European Bone and Joint Infection Society**

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As the new President of our Society, it gives me great pleasure to recommend this paper on the history of the EBJIS. Geert Walenkamp is perhaps the best placed person to write this history as he was present at the beginning, has maintained a strong and active involvement in the Society and is one of only three living Distinguished Members of the EBJIS. He has supported many young surgeons and EBJIS members through the 'learning curve' of understanding bone infection and its management.

It is remarkable that the central goals of our Society were written down in the first letter of invitation from Dr Jacques Evrard in 1981. They have changed little over 36 years. The EBJIS exists primarily to allow those clinicians and scientists who are fascinated by bone and joint infection, to meet and learn from each other.

Prof. Walenkamp correctly notes the large increase in membership of our Society in the last few years. The Society exhibits many of the features of exponential growth only seen in bacterial cultures, with new colonies springing up all around the world! We have over 400 members from 55 countries. It is especially gratifying to welcome members from outside Europe, with 70 members from some 28 non-European countries, including Nepal, Brazil, India, the Philippines, Iran and China. The EBJIS is the largest group dedicated to bone and joint infection and remains open to enthusiasts from all around the world.

The work of the Society has changed and will continue to evolve in the years to come. We have developed an active and expanding group of 'Country Delegates' who work to promote the Society and its goals in their countries. These delegates contribute to the ideas of the Society and form a network of experts. Also, the EBJIS has established a permanent base in Rolle in Switzerland, with the employment of our excellent Society Administrator, Elenida Shkarpa. This office allows a much more coordinated work programme, producing better communication with members and cooperation with other groups and Societies.

In the coming months, we will bring forward a number of new initiatives which will shape the future of the EBJIS. Firstly, we will launch our new 'Forum', which is a web-based platform, allowing members to post anonymised infection cases with imaging, for discussion and advice. This will be a major advantage of membership. It is expected that Country Delegates and Executive Board members will contribute to the discussions, giving the

benefit of their expertise and experience. The Forum will be accessed through the EBJIS website ([www.ebjis.org](http://www.ebjis.org)) and will be password protected for members only.

Secondly, we are beginning to produce a series of documents on important topics within bone and joint infection. We will first publish our work on the principles of management of infected fractures. This document will not be giving detailed advice on the specific surgery or antimicrobial treatment required for any individual fracture, but will give general advice about how cases can be managed. It will give an indication of the level of expertise and facilities required to provide an adequate standard of patient care. We hope that this approach will help members to develop teams and treatment Units around the world, working at a high level and using agreed best practice.

We have invited all our Country Delegates to propose topics for future advice documents, which I hope will be available in the next few years. These topics will gradually build into a library of guidance which can be updated and modified as the science and clinical practice improves over time. We are also aware of various groups of our members who are working on projects within musculoskeletal infection leading to publications of systematic literature reviews or current concepts reviews. We hope to be able to endorse such publications within our website (or through this Journal of Bone and Joint Infection), providing they are of a high scientific standard.

One of the central activities of the EBJIS is the organisation of the annual Conference, which has become an outstanding example of interdisciplinary working. It is interesting to see that in the very first scientific meeting of our Society, in 1982, Sven-Åke Hedström presented on "Teamwork with Infectious Disease Specialists". This continues as an important feature of the meetings, with many different specialty groups contributing to the discussions and expert sessions. We now have around 600 delegates each year, providing over 100 oral presentations and over 200 posters, on every aspect of bone and joint infection. For me, it has been a great experience to learn about the many new advances in diagnostic techniques, surgical reconstruction and antibacterial therapy presented in recent years. Our understanding of the interaction between bone, bacteria and the patient immune system is at a critical and exciting phase.

The history of the EBJIS is now written, but the future remains to be charted. Our next Annual Conference will be in Helsinki on 6<sup>th</sup>-8<sup>th</sup> September 2018 ([www.ebjis2018.org](http://www.ebjis2018.org)). I would encourage all who might wish to be part of our future to join us and enjoy the friendship of our Society.



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