

The history of hand surgery in Germany includes a lot of well-known surgeons, orthopaedists, and anatomists and their publications, including: Josias Weitbrecht (1702–1747) on syndesmologia; Gustav Biedermann Günther (1801–1866) on anatomy of the wrist; Friedrich von Eschmarch (1823–1908) on tourniquet; Richard von Volkmann (1830–1889) on ischaemic contracture; Max Oberst (1849–1925) on finger anaesthesia; August Bier (1861–1949) on Bier block; Otto W. Madelung (1846–1926) on Madelung deformity; Konrad Biesalski (1868–1930) on tendon transposition; Paul Sudeck (1866–1945) on chronic regional pain syndrome; Hermann Krukenberg (1863–1935) on Krukenberg arm; Ferdinand Sauerbruch (1875–1951) on active mobile hand prosthesis; Martin Kirschner (1879–1942) on Kirschner wire; Erich Lexer (1867–1937) on free tendon grafts; and Otto Hilgenfeld (1900–1983) on thumb reconstruction and pollicisation. However, in their time, surgeons worked only parttime in treating the patients with hand problems. In 1959, Dieter Buck-Gramcko (1927–2012) introduced a journal club (Handchirurgischer Literaturzirkel) to exchange copies of articles about hand surgery. Important articles were circulated between the initial 37 members from Austria, Switzerland, and Germany. Out of this international club, Deutschsprachige Arbeitsgemeinschaft für Handchirurgie (DAH) (i.e. German Speaking Association for Hand Surgery) was officially founded on 7 October 1965 during a symposium in Vienna. Founding members were Jörg Böhler, Dieter Buck-Gramcko, Walter Christ, Jürgen Geldmacher, Heinz Georg, Klaus Hellmann, Hanno Millesi, Henry Nigst, Wolfgang Pieper, Wilhelm Schink, Claude Verdan, Albrecht Wilhelm, and Gottlieb Zrubecky. Its members were from different European countries, mainly Austria, Switzerland, and Italy. In 1990, Germany developed its own national society in order to join the newly founded Federation of the European of Societies for Surgery of the Hand (FESSH). This gave birth to the present-day German Society for Hand Surgery (DGH). The founding council members of the DGH were Peter Brüser, Klaus Wilhelm, Alfred Berger, Klaus Henkert, Peter Reill, Christild Wulle, and Rüdiger Neumann. The first presidents were Dieter Buck-Gramcko (1991) and Ulrich Lanz (1993). All members of the national society were automatically members of the DAH until 2004, when DAH had about 600 members, among which 414 were members of the DGH. They decided to separate from the DAH to strengthen the national position inside the surgical societies in Germany. The size of the DGH has grown continuously, presently with 1027 members. Parallel to the DGH, the German Association for Hand Therapy (DAHTH) was

founded in 1995 and currently has 655 members. It has developed its own curriculum and training courses for physiotherapists and occupational therapists to become a hand therapist. The German Society for Hand Surgery organizes an annual congress in different cities with different presidents for each meeting. Since 2006 the annual congress has been combined with the annual meeting of the DAHTH with at least two combined scientific sessions in each meeting. The executive committee of the DGH consists of the president, the president-elect, and the past president. Each of them has a term of 1 year. The secretary general, treasurer, and four-member advisory board have 3-year terms. The council board consists of an additional 29 hand surgeons organizing and representing the 26 committees and delegations of the society. The board and the executive committee members meet twice yearly, once in February and during the annual congress in the autumn. The general member meeting takes place during the annual congress. Two months prior to the meeting, committee activities and relevant information are communicated in an annual newsletter to the members. In 1993 hand surgery was acknowledged a subspecialty in Germany. Since then, to be a hand surgeon requires 3 years of hand surgery training in a recognized center with an oral examination at the medical council. The training and sub-specialization is open for general, orthopaedic, traumatology, and plastic surgeons. Hand surgery in Germany covers the hand, wrist, and forearm. It includes the treatment of all structures and tissues in that region and all surgical techniques including microsurgery, osteosynthesis, and arthroscopy. Hand surgical procedures are covered by the national health insurance and are provided as an outpatient as well as an inpatient service, depending on the nature and extent of surgery. There are only a few completely independent hand surgical clinics in the country, the first being established in Hamburg in 1963. Most hand surgeons are in an orthopaedic-traumatological or plastic surgical unit. In Hamburg, there is one subspecialized unit treating only children, founded by Dieter Buck-Gramcko. The value of hand surgical expertise is appreciated by the workers' compensation insurance companies. Several work-injury related reconstructive procedures, as well as complex hand trauma and amputations, have to be treated in hand centers accredited by the workers compensation insurance companies. Criteria for certification include at least three fully trained hand surgeons, an independent head of the department, a 24-h replantation service every day and hand therapists to ensure coordinated rehabilitation. These criteria are similar to the FESSH criteria to become an accredited European Hand Trauma Centre. Germany now has 32 FESSH accredited Hand Trauma Centres.

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