

Every year approximately 20,000 patients from around the world come to Barcelona for treatment. Our magazine decided to acquaint its readers with the world-renowned centers and international experts that have turned Barcelona into one of the most prestigious cities in the world for medical care. Over several issues our guide to the world of Catalan medicine is Olga Solovieva, General Representative of BMA, the association of Barcelona's top hospitals, and Director of Barcelona Medical Consulting, the company established in order to assist foreign patients and develop international relationships with institutions of other countries.

## DOCTOR RAMON CUGAT

### ALL MY ACHIEVEMENTS WERE MADE THANKS TO MY AMAZING TEACHERS...



Dr. Cugat's waiting room is like a wonderland for star-struck football lovers of all ages and nations; there is no other place you are more likely to meet the world's top football players. Maybe only at the stadium! But there the players are seen from a distance, and here they are actually in the same room, patiently waiting their turn. Dr. Cugat is the expert these "gods" trust with their most precious asset, their knees. There is no higher recognition for an orthopaedic surgeon than that.

OLGA SOLOVIEVA

I met with Dr. Cugat in his office at Hospital Quiron at 11 p.m., the time he had chosen for the interview. With patients still waiting, it is still early in the day for Dr. Cugat. The doctor is a celebrated workaholic. To perform surgeries until 5 a.m. is his daily routine. Four famous football players had already passed through his hands that day, with one more still waiting.

A story often comes to mind... we were once contacted by a patient from Russia who asked for a consultation with Dr. Cugat. It was a VIP patient that only wanted to be treated by this doctor. To fit him in with only a week's notice was almost impossible, but we managed to arrange an appointment, warning him that the Doctor would make time in his schedule after 7 p.m., although nobody could say exactly when that would be. Our patient accepted. He arrived at 7 p.m. and was furious when he was still waiting at 9 p.m., then at 11 p.m. and then was asked to still wait again at 3 a.m. An hour later he was hopping mad but was finally led into the Doctor's office and stayed there until 5 a.m. As he was leaving, he sent a heartfelt thank-you text to our coordinator. The doctor had won him over in the end!

I was lucky today; the Doctor rushed in on time and with the next patient scheduled for 12.30 p.m., we had plenty of time to talk. Humble and down-to-earth, he offered me a comfortable chair, while he sat on a small stool.

**Doctor, you're one of the world's most renowned orthopaedic trauma surgeons. Did you know you wanted to be a surgeon from an early age?**

– My case is quite extraordinary, as I don't come from a medical dynasty...I was going to be a football player and was playing professionally for the FC Barcelona – Junior division. I needed a higher education mostly for my mother's sake,

who wasn't very happy with the idea that her son was going to be a footballer. But there at the club I met an amazing FC Barcelona consultant, Doctor García [who would later become Dr. Cugat's father-in-law!]. He made such an impression on me that I went on to study at the School of Medicine.

**After graduating and presenting a compelling doctoral thesis, you set out to train with the world's leading specialists in the field.**

– I have been extremely lucky with my teachers. After my thesis I moved to the UK to gain surgical experience with the great Mike Roblewski, then I worked closely with the best traumatology groups in Europe, and then I was accepted at Harvard. There, at the Massachusetts General Hospital in Boston, the brilliant Dr. Berthram Zarins, head of Sports Medicine Center, offered me a year-long position in his department. A natural-born surgeon and a man of extraordinary wisdom, Dr. Zarins had become my friend for life. After 1979 I started travelling to the US several times a year to learn from his expertise. The Massachusetts General Hospital is like a second home to me.

**Doctor, I know that you are always travelling and regularly hosting surgical colleagues from across the globe that come to you for clinical training.**

– It's a cornerstone of my profession. You have to constantly evolve, using new breakthroughs and findings to develop your expertise. It is easier now, as most breakthroughs are available online. But nothing can substitute personal experience of learning new surgical techniques and being able to work along-side an outstanding professor. Spanish medicine has been so successful in the past decades mostly thanks to our tradition of going abroad and learning from the best. I'm always on the road between five continents, I travel, teach and learn! My visiting students also come from around the world.



ORTHOPEDICS

**I know that you never refuse if somebody comes to you for training, you are followed by medical professionals from many different countries...**

– Olga, all my achievements were made thanks to my amazing teachers. And the least I can do is to follow their example. It is so rewarding to work with students that soak up my every word with a sparkle in their eyes. I will tell you a beautiful story about my Georgian colleagues. It's a story that still brings tears to my eyes. Many years ago we hosted a group of young doctors from Georgia that came here for training. Back then they were not just poor; by Spanish standards they were beggars. They had no place to live here, so sometimes they would stay with me. I taught them everything I could but never really paid any attention to what they ate until one day I took them to a restaurant. One of the doctors pushed his plate away and refused to even try his food. When I asked him why, he said, "My daughters haven't eaten any-thing today, so I don't have the right to either".

But in spite of everything these guys had the most important thing: an irrepressible urge to learn. Everyone was amazed at their energy: they would follow me tirelessly, taking pictures and carefully writing everything down. On returning to Georgia they worked for some time in a public hospital and soon opened a private practice. They would always come back here to update their skills. In 2002, when I pioneered the growth factor method to treat knee conditions, the Georgians returned again, completed the training, and started to implement this technique at home that same year. Now they are top-notch specialists! And I keep meeting them at world congresses: they are still as eager to learn as I am.

**A focus on training with leading experts and the proper organisation of the entire process is the key factor, isn't it?**

– Exactly! Spain has achieved excellent results in health care due to reasonable and efficient organisation and management. Someone at the hospital must say: We don't need 5-Tesla MRI scanners. And even 3-Tesla scanners aren't really necessary. To be able to treat musculoskeletal disorders (MSDs), a 1.5-Tesla MRI scanner is more than enough. There is no point in

investing huge sums of money in equipment, there are other things to consider, such as smart and precise organisation of the process and excellent specialty training.

**Almost all leading orthopaedic surgeons in Barcelona have completed long-term training at the best American health care centres. Like you, many are honorary members of American scientific societies. Is going to the US for specialty training still fundamental for professional development?**

– Of course! Spaniards have always been a nation of travellers and adventurers. Just look at Columbus! The tradition of completing clinical practice in the best health care centres in the US have made the Spanish doctors some of the best in the world. Today specialists from the US come to us to learn new techniques and methods. When they try hard, students can sometimes sur-pass their masters.

**Doctor, you are always travelling and teaching, I usually bump into you in the halls and surgery ward of Hospital Quiron late at night or in August when most Spanish people are on holiday. When my family gets after me for working late, I tell them that "Dr. Cugat OPERATES on his patients till 5 a.m.!" Please tell me what your schedule is usually like.**

– It's true that I haven't had a holiday in many years, but this year we decided to go away for a week! My schedule is a simple one: I arrive at 9 a.m. and usually leave after midnight. The four days a week I'm in surgery I do that non-stop from the morning till after midnight, sometimes going into early in the morning. On a normal day, my team and I perform anywhere from 10 to 12 surgeries.

**That's impressive!**

– I like my work and I'm passionate about it. Besides, the more extensive my clinical practice is, the more cases I see, the more I can learn! My parents taught me three simple rules: work hard, behave and don't tell lies. I'm just trying to follow them. In recent decades, people here in Europe have relaxed too much and forgotten what it means to work hard. We have to embrace the strong work ethic of Eastern cultures like the Chinese and the Japanese!



**Doctor, I am doing some mental calculations right now...How many people do you treat?**

I see about four to five thousand people every year but that doesn't mean that I operate on all of them. Surgery can very often be avoided. I end up operating only on half of the 100 patients that come to see me convinced that they need surgery.

**If that's true, then you are a rarity for a surgeon! Surgeons are usually too eager to operate!**

– That's true, there is such a flaw in our profession. But a good surgeon must be a good doctor above all. For a doctor to be able to listen and to understand his patient is fundamental. Frequently, an X-ray or an MRI tells us one thing but the patient feels otherwise. In this case the doctor's intuition is pivotal in decision-making, as he has to weigh both the scan results and the patient's physical feelings.

**Are you trying to tell me that if my scan shows a torn meniscus but I barely feel any pain in my knee you would tell me not to get surgery?**

– Exactly, not always but quite often! I came across such a case just a few days ago. I got a call from an old friend of mine from Madrid, he seemed very upset. After an MRI of his knee he was told he needed surgery immediately. Since his overall state of health right now isn't suitable for surgery, I told him, "Okay, come". He got on a plane and came to see me. I looked at the MRI, it showed a torn meniscus but a very specific kind, one you can easily live with. I started to examine him, twisting and bending his leg. "Does it hurt? Does it bother you?" I asked. "No, it doesn't, it just feels uncomfortable in one position". "Then you don't need surgery". And the man was so scared, he just couldn't believe me. "What do you mean I don't need surgery?" I had to throw his MRI scan away in front of him, so he could understand that in his case it wasn't the scan that provided the key information about him, but his senses.

**Great to hear that! But the opposite can also happen, can't it?**

– Of course it can. Sometimes the patient feels great but the

scan results show clearly that an immediate operation is needed. But in traumatology we see very few cases like that. What happens most of the time is that the patient is clearly in pain but the scan shows that everything is perfect! In these cases an emotional connection must be forged so that the patient will be more likely to open up to you, and lead to a more precise understanding of the problem. I regularly treat many professional athletes but also people that have nothing to do with sport. If the former can describe exactly what is troubling them, the latter often can't explain what their concerns really are.

It is crucial to establish a trusting relationship with the patient, make him or her open up to you. Sometimes I have a patient who comes from the country and I can see he feels uneasy, so I just sit next to him and start asking questions, like where he's from. The man tells me he is from the province of Lerida, from a small town called Borges Blanques. And I remember at that moment that this town is famous for an exceptionally good olive oil! And here you see how his face lights up and he begins to tell me his story, and then he speaks about his leg but in a different way, unafraid to mention any insignificant details that are often the most important ones for me!

**Doctor, you are a member of the world's leading scientific societies, a lead investigator for key research programmes. I know that you are one of the pioneers in the use of growth factors in orthopaedic and trauma surgery.**

– Growth factors are a group of molecules that are extracted from the patient's own blood, undergo a special process and are strategically applied to the damaged area to encourage repair and healing. It is one of the greatest discoveries that we currently use in multiple fields of medicine, to treat torn and worn ligaments, cartilages and joints, in aesthetic medicine. In traumatology, growth factors can be used to avoid surgery or to complement it because they accelerate the rehabilitation process. We have now started to use stem cells extracted from bone marrow and adipose tissue to treat damaged cartilage and muscle, which is also very interesting.





ON PHOTO: DOCTOR RAMON CUGAT AND OLGA SOLOVIEVA

**What do you think is the future of orthopaedic surgery and traumatology?**

– I’m sure the future of our discipline ultimately rests with the variety of new biological methods. In my specialty these are the main innovations. It’s so interesting and I would like to be able to dedicate more time to it. When we learn how to stimulate cartilage regeneration and repair via modern biological strategies we will no longer need to place prosthesis. Besides, new biological methods will not only revolutionise orthopaedic surgery, they can be useful for treating neurodegenerative diseases such as sclerosis, Parkinson’s disease, Alzheimer’s, etc. We have yet to witness this.

**Doctor, why did you choose to base yourself out of Hospital Quiron?**

– Well, Quiron is probably the most state-of-the-art private hospital, with the best equipment and surgical teams. I’ve built an amazing team here, since without highly qualified help from rehabilitation specialists and physiotherapists there is not much an orthopaedic surgeon can do.

**Doctor, let’s go back to your patients. It is great that you always talk about your ordinary patients and not about the celebrities that you treat. But the readers would like to know: how did you become the doctor of the world’s elite athletes? Not only FC Barcelona players, but the megastars of Chelsea, Liverpool, Ajax, Manchester, CSKA, and Shakhtar Donetsk all come to see you. For an orthopaedic surgeon, there is no higher recognition than treating football stars who are today’s icons.**

– You just have to be good at what you do and you will gain people’s trust. If the patient mistrusts his doctor, then the doctor isn’t a good one.

**What is the single most valuable piece of advice have you ever received and from whom?**

– There have been quite a few. But the one I value most was

from my father-in-law. He told me, “You have to work as a doctor for as long as you enjoy it. As soon as you wake up in the morning not feeling inspired to go to work, you have to leave. Or your profession itself will push you away”.

**Doctor, you provide treatment for elite athletes, presidents; their health and sometimes lives are in your hands. But in person one can see that you don’t regard yourself as some kind of God, which is often the case.**

– First, all patients are equal for me, and their pain is too. Well, arrogance is a disgusting quality in any person, especially in a surgeon who needs to forever evolve. Secondly, I know all too well that even the most skilled surgeon can only save someone when it is possible. It is God who decides. One should always remember that.

**Doctor, may I ask you a very personal question? Do you believe in God?**

– I do believe in God. I’ll explain; I even believe that God sometimes gets involved in what we do... let me tell you about a recent case, and in my profession I have come across a number of them. Since Monday is my consultation day, our anaesthesiologist (like any normal surgeon, I always work with the same surgical team) works in another hospital on Monday mornings. But one Monday morning a patient was brought in for emergency surgery. We called our anaesthesiologist, he had just finished his morning shift. He was trying to hail a taxi but since he was in the suburbs it wasn’t easy. Finally, a taxi stopped, the driver rolled down his window and asked him where he needed to go. The doctor explained that he needed to get to Barcelona and that it was urgent! The taxi driver refused to take him, as he had also finished his shift and was going in the opposite direction, to get home for lunch. The anaesthesiologist was trying to reason with him that he would be late for an emergency operation. No way, the driver wouldn’t take him. In the end he managed to find another taxi, and arrived at the hospital in time for the operation. As we finished, another emergency patient was wheeled in after a car accident.

**Doctor, I’m getting goose pimples...**

– Our anaesthesiologist bent over him and recognised the taxi driver who had refused to take him earlier, who had been injured in a car crash on the way back from his lunch break. By an unbelievable chain of events he was brought to our hospital. The taxi driver also recognised him. “Is that you, doctor?” Then the anaesthesiologist turned around and said loudly, “Guys, I haven’t had lunch or anything to drink since this morning and it’s so late. I’m leaving for lunch!” The taxi driver moaned...of course, the doctor didn’t go anywhere, the operation started at once. We don’t have to teach anybody a lesson, someone already did. So I’m not tempted to think of myself as something I’m not. God is in Heaven.

**And down here we only have his workers. ■**

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