

## The 25<sup>th</sup> EAES Congress

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The International Congress of the European Association for Endoscopic Surgery (E.A.E.S.) is one of the most representative events concerning minimally invasive and endoscopic surgery worldwide. The 25<sup>th</sup> Congress took place in Frankfurt am Main, between 14 and 17 June 2017. This edition was chaired by Prof. Karl Fuchs and had the full support of the CAMIC (*Chirurgische Arbeitsgemeinschaft für Minimal Invasive Chirurgie*) and of the German Society of Surgery. Other international societies which have officially joined the meeting were represented by: The *Society of American Gastrointestinal and Endoscopic Surgeons (SAGES)*, the *European Society of Coloproctology (ESCP)*, the *International Federation for Obesity Surgery (IFSO)* and the *European Society for the Diseases of the Esophagus*.

The main congress' theme was entitled "Technology and Care for Patients", and the program committee, chaired by Prof. Giovanni Zaninotto, proposed to the participants a very interesting scientific program, including hands on courses, amazing technologies sessions, panels, face to face controversies and unedited videos, as well.

The congress attracted a record number of participants from all over the world including prestigious surgeons and endoscopists who discussed their last achievements in the field of laparoscopic and endoscopic techniques. Moreover, the organizing committee reported the submission of more than 800 abstracts and 290 videos.

The first day of the manifestation, Wednesday 14th of June was dedicated to the CAMIC Academic Masterclass endorsed by EAES regarding laparoscopic and robot assisted upper gastrointestinal oncologic surgery directed by Kaja Ludwig (Germany) and Tobias Keck (Germany). In a parallel session, another Masterclass course regarding the management of gastrointestinal esophageal reflux disease was conducted by Giovanni Zaninotto (UK) and Karl Fuchs (Germany). The third Masterclass which took place on Wednesday was directed by Luigi Boni (Italy), Michele Diana (France),

Abe Fingerhut (France) and subjected the fluorescence guided surgery. In the meantime, Nader Francis (UK) and Stavros Antoniou (Greece) conducted an interactive workshop regarding the rules of elaborating a high-quality research work. The workshop focused on the theme of cohort studies, randomized clinical trials as well as on the principles of network meta-analysis. This year the hands-on courses referred to basic laparoscopic surgical skills (and was conducted by Thomas Carus, Germany), TEM/TEO, TAMIS (conducted by Mario Morino, Italy) and flexible endoscopy (directed by Alberto Arezzo – Italy, Yoav Mintz – Israel and Silvana Perretta – France). In the last congress day, an ultrasound hands on course for surgeons conducted by Calin Tiu (Romania) and Andreas Melzer (Germany/ UK) took place.

Thursday, 15<sup>th</sup> June, the first day of free paper sessions began with the sessions of colo-rectal surgery, chaired by Carlos Moreno Sanz (Spain), Ferdinando Agresta (Italy), Andrei Keidar (Israel) and Wolfram Breithaupt (Germany). The hot points of these sessions concerned the possibility of improving the early postoperative outcomes after colorectal surgery (M. Gachabayov-USA, M. Wierdak – Poland, M. Kobayashi – Japan, Y. Kojima – Japan, A. Bickel – Israel), the benefits of extended mesocolic excisions and lymph node dissection in colonic cancer (Y. Singe – Japan, J. Kim - Korea) and the role of laparoscopic surgery in treating recurrent colorectal cancer (P. Chen – Taiwan, M. Remora – Japan).

In the session regarding the late complications of bariatric surgery which was chaired by Nicola di Lorenzo (Italy) and Rudolph Weiner (Germany) attention was focused on the severe hypoglycemia after Roux en Y Gastric Bypass (C. Copaescu – Romania), on the gastroesophageal reflux after sleeve gastrectomy (S. Attwood – UK), on the mineral loss after bariatric procedures (G. Prager – Austria) as well as on the risk of internal hernia development after Roux en Y gastric bypass (E. Stenberg, Sweden).

An extremely interesting face to face session was the one chaired by Andrei Keidar (Israel) on the theme of the safety and utility of laparoscopic ALPPS (Associating Liver Partition and Portal Vein Ligation) for staged hepatectomies. The combatant of this method, Safi Dorma from France pointed out on the high morbidity and mortality rate during the first weeks after performing the procedure; according to the experience of the French center, the risk of the method significantly surpasses the benefits in both open and laparoscopic technique. Due to this reason,

Domagk considers that the method is controversial and can be rarely used with favorable outcomes. Oppositely to his opinion, the English researchers represented by Long Jiao sustain that the ALPPS procedure is an effective method to treat extended hepatic malignant lesions. Moreover, Jiao pointed out that the most important predictive factor for survival after ALPPS is the moment when resection is performed; this moment should be decided when the remnant liver becomes functional (two weeks after performing the ALPPS) and should not be influenced by the anatomical enlargement of the remnant liver. In the experience reported by Jiao a better outcome was reported when the ALPPS procedure was performed in a minimally invasive manner; in the meantime, the timing (of two weeks between ligation and resection) seems to be associated with the lower rates of post-procedural morbidity.

Other interesting sessions focused on the effectiveness of various surgical techniques of sleeve gastrectomy including standard laparoscopic approach with enhanced view (presented by M. Ozmen, Turkey), robotic approach (presented by R. Vilallonga, Spain), SILS technique (presented by I. Dagher, France) and, probably the most challenging approach, the endoluminal one (the endoscopic sleeve gastropasty presented by G. Lopez Nava, Spain). In the meantime, Martin Kreis (Germany) and Jin-Jung Liang (Taiwan) moderated an unedited video session regarding how far should we go when it comes to the radical oncological resection for colorectal cancer. The session included the papers about the role of D3 lymph node dissection for right colon cancer (presented by D. Ignjatovic, Norway) and about the benefits of extended pelvic lymph node dissection for rectal cancer (A. Lacy, Spain).

New insights about complex laparoscopic hepatic resections were presented in the session chaired by H. Kim (Korea) and B. Edwin (Norway). The papers presented in this session demonstrated the effectiveness of robotic and laparoscopic major liver resections and, in the meantime, destroyed the myth regarding the impossibility of performing central parenchymatous resections in a minimally invasive manner. During this session one of the hottest subjects was presented by Umberto Cillo (Italy) who exposed the possibility of pushing the boundaries of liver resection in cirrhotic patients; the author demonstrated that patients with hepatocarcinomas developed in the context of advanced cirrhotic disease can be safely submitted to liver resection via minimally invasive surgical approach.

In the afternoon, an interesting session was the one of unedited bariatric videos regarding the length of the jejunal limb after gastric bypass (chaired by C. Copăescu, Romania and A. Keidar, Israel) and the main revisional surgical procedures after Roux en Y gastric bypass (moderated by B. Muller-Stich, Germany and C. Moreno Sanz, Spain). The bariatric discussion session was continued by another face to face session regarding sleeve gastrectomy (presented G. Silecchia, Italy) versus gastric plication (presented by M. Fried, Czech Republic). The last topic in this session focused on weight regain after Roux en Y gastric bypass and included the role of revisional surgery (presented by M. Ozmen, Turkey) as well as the effectiveness of alternative conservative procedures (sustained by J. Dargent, France).

The progress of transanal procedures from TEM to ta-TME was intensively debated in a parallel session conducted by L. Swanstrom (USA/France) and K. Fuchs (Germany).

The scientific program of Friday, 16 June was opened by another "How I do it" session conducted by J. Bonjer (The Netherlands) and J. Lefevre (France) and debated the role of extended abdominoperineal resection and pelvic lymph node dissection via laparoscopic versus open technique in rectal cancer.

The discussions in the field of bariatric surgery were continued in the second day of congress in the session chaired by N. Bouvy (The Netherlands) and G. Dapri (Belgium). This time the main topics involved revisional bariatric procedures as well as the metabolic impact of weight loss surgery in animal models and in humans.

In a parallel session focusing on the role of minimally invasive surgery in treating the pancreatic lesions T. Keck from Germany presented the feasibility of distal pancreatic resections while I. Khatkov from Russia reported the new achievements in the field of laparoscopic pancreatoduodenectomy.

In the second day of the Congress an extremely interesting debate regarding advanced rectal cancer and neoadjuvant radiochemotherapy was conducted in a face to face session. The first part of the debate was moderated by M. Morino (Italy) and concerned long course versus short course radiotherapy for locally advanced cervical cancer while the second part of the discussion was moderated by R. Biaggio (South Africa) and focused on the therapeutic approach after completing the neoadjuvant oncologic treatment. While D. Tait from U.K. presented the "wait and see" concept, J. Unman from The Netherlands exposed

the benefits of completing the oncological treatment with a surgical procedure.

One of the most impressive sessions was the one presenting the selected videos for the EAES award. The videos presented in this session exposed the new insights over the trans-oral oral thyroidectomy (reported by a team from Italy), the role of laparoscopic proctectomy with restorative ileal pouch-anal anastomosis for ulcerative colitis (reported by a Spanish team), the benefits of semiprone position and intercostal ports in treating esophageal cancer (reported by the Japanese studies), the therapeutic challenges provided by esophageal stent migration (described by a team from Spain), the challenging case of a patient missing the celiac trunk who was diagnosed with large pancreaticoduodenal arcades aneurysms who was successfully submitted to a robotic revascularization of the hepato-splenic territory as well as the case of a patient submitted to pancreatoduodenectomy en bloc with portal vein resection in which the continuity of the portal vein was reconstructed using parietal peritoneum.

Another hot point of the day was the video session presenting the progresses in minimally invasive pancreatic resections. The session was opened by a Russian team who presented the short term and long-term outcomes of the first case series of totally laparoscopic modified Appleby procedure for pancreatic cancer and was continued by other interesting papers regarding the laparoscopic reconstructive techniques after pancreatoduodenectomy (exposed by the Spanish, Korean and Luxembougese scientists). Other hot points of the session focused on major venous resections during laparoscopic pancreatic procedures (presented by the Russian team), spleen preservation after distal pancreatectomy and laparoscopic Berger procedure for cases with chronic pancreatitis (presented by the Russian team).

In the meantime a consensus conference regarding single incision endoscopic surgery was conducted by N. Bouvy (The Netherlands) and S. Morales Conde (Spain). The consensus focused on the adequate surgical devices as well as on the organ specific particularities; the main debated procedures included single incision cholecystectomies, appendectomies, colorectal resections, splenectomies, adrenalectomies, liver, and pancreatic resections. Other discussed procedures referred to bariatric surgery, upper gastrointestinal pathologies, and hernia repair.

The last day of the congress began under the

auspices of hepato-biliary surgery, session chaired by A. Keidar (Israel) and M. Sahakyan, Norway) and debated the cost effectiveness of the laparoscopic approach for major hepatectomies (the topic being presented by an Italian team) as well as the feasibility of the robotic approach for the posterior liver tumors. Another interesting topic was brought in discussion by N. Mariani (Italy) who compared the effectiveness of laparoscopic liver resections with the outcomes of radio-frequency ablation in cirrhotic patients.

Another hot session of the day focused on the weight variations after bariatric surgery and on the effect of revisional procedures; while the American team represented by B. Schwack compared the outcomes in terms of weight loss after one stage versus two stage gastric band conversion to sleeve gastrectomy, E. Chahine from France analyzed the weight regain after greater curvature plication and compared the long-term outcomes of sleeve versus gastric bypass as salvage procedures. Another paper in this session regarding revisional bariatric procedures was conducted by L. Grasso (Italy) and concerned the cases with failed laparoscopic adjustable banding.

During the whole period of the congress a video marathon was organized in the exhibition area; here all the accepted videos were continuously displayed.

In parallel sessions satellite symposiums regarding the new 3D imaging system and Thunderbeat Type S technology (organized by Olympus), the future tasks of device integration in the operating room (organized by ORNET) and new enhance surgical systems (organized by Transenterix) took place.

The Closing Ceremony which took place Saturday was the moment in which the invitation for the next EAES Congress which will take place next year in London was launched.

This year, the Romanian delegation encountered 51 members of the Romanian Association for Endoscopic Surgery (RAES) who actively involved into the Congress activities and benefited to the high quality EAES event.

Finally, we would like to express our gratitude for the outstanding success of the event, supported by the effort of the EAES Congress organizing team, EAES Board and Committees, who proved to be wonderful hosts in Frankfurt.