

Dutch Adhesion Group - Thursday June 15

New horizons in prevention and treatment of adhesions

Adhesions continue to be a prominent cause of complications for all surgical specialities that frequently operate in the abdomen. In this symposium we will take an inspiring look into new developments in diagnosis, prevention and treatment of adhesions. The Dutch Adhesion Group will award a prize for the best free abstract related to adhesions, submitted to ESSR 2017.

Main topics:

Overview and state-of-the-art of adhesions and surgery
Non-invasive diagnosis of adhesions
Innovative prevention of adhesions
Best abstracts and DAG award

Video's:

Non-invasive diagnosis of adhesions
Elective adhesiolysis, operative technique
Laparoscopic adhesiolysis for small bowel obstruction

www.adhesiepreventie.nl

Friday, June 16

eurzaal

Symposium One day on new strategies in the treatment of colo-rectal liver metastases

08.00-09.00

Registration, coffee and tea.

09.00-09.05

Welcome

T. van Gulik

09.05-10.45

Chair: B. Nordlinger, T. van Gulik

09.05-09.30	Liver resection for CRLM – The gold standard	M. Rees
09.30-09.55	Unresectable CRLM – How is it defined	T. Gruenberger
09.55-10.20	Strategies to increase resectability of CRLM (ALPPS, PVE, RFA)	T. van Gulik
10.20-10.45	Laparoscopic liver resection for CRLM – Where are the limits?	M. Besselink
10.45-11.15	Coffee-break	
11.00-12.55	<i>Chair: T. Ruers, M. Besselink</i>	
11.15-11.40	The margin issue in resected CRLM	P. Tanis
11.40-12.05	Concomitant resection of extra-hepatic disease	R. Adam
12.05-12.30	Systemic therapy – Strategies to convert unresectable into resectable disease	C. Punt
12.30-12.55	Peri-operative chemotherapy – what to do now	B. Nordlinger
12.55-13.45	Lunch	
13.45-15.25	<i>Chair: D. Manas, P. Tanis</i>	
13.45-14.10	Ras mutations – the key to tailored approach	Y. Chun
14.10-14.35	Heat ablative therapies – Where are we standing	T. Ruers
14.35-15.00	Nanoknife treatment of CRLM - The new kid on the block	M. Meijerink
15.00-15.25	Stereotactic body radiation therapy - When does it come in	G. Westerveld
15.25-15.55	Tea-break	
15.55-17.25	<i>Chair: T. Gruenberger, M. Meijerink</i>	
15.55-16.20	SIRT Technical considerations	F. Pardo

16.20-16.45	SIRT for CRLM	D. Manas
16.56-17.10	SIRT and ALPPS	M. Schoen
17.10-17.25	SIRT for induction of parenchymal liver hypertrophy	B. Garlipp
17.25	Closure	
17.30-18.30	Cocktails	

Saturday, June 17

The diabetic foot disease: Non-conventional diagnostic methods for distal ischemia and secondary prevention

Foot ulcers in diabetes form the complication most feared, leading to a major amputation in 15%. About 50% show signs of peripheral arterial insufficiency.

Although according to several reports, amputation can be prevented in a multidisciplinary setting in 50-85%, we are still confronted with an insufficient outcome regarding the amputation rate. One of the reasons is the high recurrence rate within one year, due to insufficient secondary prevention. Also, limited non-invasive vascular diagnostic methods to predict wound healing play an important role.

This symposium highlights several non-conventional diagnostic methods for early signs of recurrent ulcers and for quantification of the blood flow in the foot.