



PRELIMINARY PROGRAMME

(as of September 9, 2014)

Acute surgery

Timing - the key to emergency surgery

Proposed Chairman: Jonathan Tilsed

1. Enhanced recovery pathways: do they work in emergency surgery?
Olle Ljungqvist
2. How to schedule emergency surgery - the Helsinki experience
Ari Leppaniemi
3. Peritonitis and septic shock: is there a role for resuscitative laparotomy?
Abe Fingerhut
4. Second hit surgery: do we need to optimise immunology and physiology first?
Peter Giannoudis
5. When to call 'time' on age and co-morbidity in the emergency setting
Kjetil Soreide

Minimal access therapies in emergency surgery

Proposed Chairman: Jonathan Tilsed

1. The future of NOTES in emergency surgery
Juliane Bingener-Casey
2. Minimally invasive surgery in acute pancreatitis: is it worth the effort?
Hjalmar van Santvoort
3. Bariatric emergencies: how I deal with them
Peter Sedman
4. How to train surgeons for minimally invasive surgery in the emergency setting
Selman Uranues
5. Stenting for large bowel obstruction: a bridge to surgery or a bridge too far?
Jeanin van Hooft

Abdominal Emergencies

1. Update on severe acute pancreatitis: from resuscitation to surgery.
Hjalmar van Santvoort
2. New strategies for the concrete abdomen.
Rifat Latifi
3. Dealing with the consequences of damage control surgery
Andrew Peitzman
4. Complex abdominal wall reconstruction: what to use and how to do it.
Rifat Latifi
5. Optimising nutrition for the critically ill and injured: when, what and how?
Isidro Martinez



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16th European Congress of
Trauma & Emergency Surgery
May 10-12, 2015, Amsterdam - The Netherlands



Acute Care Surgery

Proposed Chairman: Andreas Shamiyeh

Title of Keynote:

Acute care surgery models in Europe: same problem - different solutions.

Hayato Kurihara

Training in emergency surgery

Proposed Chairman: Isidro Martinez

Title of Keynote:

How do we ensure good clinical practice in emergency surgery without randomised controlled trials?

Abe Fingerhut

Acute management of the burn patient

Chairs: Cees van der Vlies/Jyrki Vuola

Acute Mesenteric Ischaemia

Proposed Chairman: Diego Mariani

Title of Keynote:

Acute mesenteric ischaemia - guidelines for best practice

Jonathan Tilsed



Military and Disaster

Keynote:

1. Medical care resilience when under attack. I Ashkenazi, Shimshit, IL
 2. National disaster live Support Courses. A role Model for Europe? James James USA
- Chairs: Bob Dobson / Amir Khorram Manesh

Keynote:

- Chairs: P Fischer, Bonn, Germany / K.J. Ponsen
1. A human face in caring for casualties during civil war.
D. Fuchs, Zefat, IL
 2. Classification and Minimum Standards for Foreign Medical teams in Sudden onset Disasters.
 3. Ian Norton , Australia

Disaster preparedness

- Chairs: B. Hreckovski / R Breederveld
1. Disaster classification: proposal for new system.
M. Bemelman, Tilburg, NL
 2. Lessons learned, Why don't we learn.
B. Hreckovski, Croatia,
 3. Preparedness for Maritime Disasters.
Mauricio Lynn, Miami, USA
 4. Education in Disaster Management: what we need; what we offer
Amir Khorram Manesh , Sweden
 5. Experiences from Syria
NN

Technical support in Military surgery and Disaster care

- Chairs: Stephen Hawking / M. Bemelman
1. What role can Robotics have in Disaster care.
Stephen Hawking, Cambridge, UK
 2. LS3, robot assisting in disaster relief, Boston Dynamics, Massachusetts, USA
 3. Robotics and rehabilitation after IED injuries,
H. Rietman , Enschede, NL
 4. Exoskeleton and advantages for Disaster and Medical relief.
N.N.
 5. Digital field health information system for real time analysis in Disasters
Satchit Balsari, US



Session title tbc

Chairs: A. Wilson / Per Örtengren

1. Experiences from the Military The TCCC Course
M. Tullius Germany
2. Core competencies in disaster management and humanitarian assistance ;
systematic review.
Pier Luigi Ingrassia.
3. In the ideal world how should a hospital be prepared for a CBRN-e Disaster.
A. Wilson, UK
4. Damage Control Surgery for Disasters The DSTC Course
S. Flohe Germany
5. Tactical Casualty care
B. Dobson UK

Military surgery: lessons to learn for civilian circumstances

Chairs: Oscar van Waas/ William Schwab

1. Videos for Damage Control Surgery
P. Fischer Germany
2. Protection of civil hospital during wartime
B. Hreckovski, Croatia
3. Use of a mobile decontamination unit with the Dormant disaster hospital Utrecht
M. de Jong/ NL



Visceral trauma

Trauma management as simple as possible or as complicated as possible

Proposed Chairman: Tina Gaarder, Pal Aksel Naess

Duodenum	Naess
Pancreas	Gaarder
IVC	Velmahos
Liver	Leenen
Mediastinum	Degiannis

Innovations: ups and downs. The youth speaks-up

Proposed Chairman: Stefan Nijs

1. Fogarty Vs Interventional radiology (Buy time in extremis)
Carl Montan
2. Sympathetic nervous system reaction: a simple way to evaluate, application in trauma decisions, limitations
Ali Foroutan
3. Internet and Mobile devices: Educational opportunities
4. Daniel Yeah
5. Grafting Thoracic aortic trauma: long-term complications after (almost) 20-year experience.
Giannis Kakkisis

Session title tbc

Keynote:

Private Trauma Services. The South African example. How can be applied in Europe?
Ken Boffard

Patient in extremis. What we sacrifice to preserve life?

Chairman: Pal Naess or Louis Riddez

1. liver bleeding: ligate proper hepatic artery, portal vein
Demetrios Demetriades
vs
Long term consequences on Liver ischaemia
Denis Castaing
2. Gastrojejunostomy for duodenal injury
Pal Naess
vs
Complication: Bile gastritis
Michael Surgue
3. IVC injury ligation
Elias Degiannis
vs
IVC injury repair
Selman Uranues or Abe Fingerhut



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4. Resect solid organs vs Repair solid organs
5. Resect a clavicle in as subclavian vessel injury dissection vs preserve it
6. Heart injury with vs without pledgets, with vs without extracorporeal circulation

Pancreatic Trauma and Pancreatitis

Coordinator **Sijbrand Hofker**



Skeletal trauma & sports medicine

Hand and wrist: do we operate too often?

- Diagnostics, are two x-rays enough
- Indication, if I have a hammer I see nails everywhere
- Surgical procedures
- Functional outcome

Spine fractures in the elderly: what can we do?

- Epidemiology, where we talking about
- Vertebroplasty, does it work?
- Internal fixation, which way to go

Sports medicine: injuries of the shoulder

- Acromioclavicular instability
- SLAP lesions

Research in Traumasurgery

- Important role for epidemiologists in Trauma surgical research
- Optimal circumstances for multicenter studies .
- Student researchers provide the new generation of traumasurgeons

Trauma registry – does it make sense?

- Traumadatabases; how do they compare
- KISS: keep it smart and simple
- Outcome based registry is the future

New aspects of diagnosing and treating osteomyelitis

- If you want to plan it, scan it! Nuclear imaging for osteomyelitis.
- Effective & selective – antibiotic strategies for the treatment of osteomyelitis.
- Reframing the problem; Surgical treatment of osteomyelitis, the Oxford experience (one step procedures, bonefillers, Ilizarov framing and bone-transport)
- Diamonds are forever; Surgical treatment of osteomyelitis, the Heidelberg experience (Masquelet, Osigraft, diamond concept)

Pelvic trauma

Acute management: first things first

The team approach; become friends with your intervention radiologist

Temporary compression devices; the rope in prehospital management

Surgical approaches: many ways to Rome

Soft tissue infections

- Tissue preserving approach in Necrotizing Fasciitis
- Towards an standardized approach in Necrotizing Fasciitis



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- Vacuum assisted closure after Necrotizing Fasciitis

New techniques in Trauma Surgery

- MIPO techniques in complex fractures
- Masquelet or callus distraction?
- Rib fracture fixation: facts and fiction
- Vacuum assisted closure in the chest after clamshell approach