



Take Home Messages

A. Najmaldin - H. Reusens

08:00-09:00

SESSION I, APPENDICITIS

Chairmen: M.OOMEN (NED), J DE AUGUSTIN (SPA)

09:00-10:30

Session II, Urology I

Chairmen: O. Ergun (TUR), P. Caione (ITA)

11:00-12:00

Session III, UPPER INTESTINE

Chairmen Pini Prato (ITA), A. Saxena (UK)

12.15-13.15

SESSION IV, LOWER GASTRO-INTESTINAL

Chairmen:

Alin Stoica (Romania), Vincenzo Di Benedetto (Italy)

08:00-09:00

SESSION I, APPENDICITIS

Chairmen: M.OOMEN (NED), J DE AUGUSTIN (SPA)



- **In complicated appendicitis (localized or diffuse peritonitis):**
 - don't be afraid to use an (expensive) stapler, if available
 - less postop abscesses, ileus, re-operations, readmissions (?)
- **Laparoscopic appendicectomy = GOLD STANDARD**
- **Transumbilical appendicectomy: back to the beginning**
 - TA - Transumbilical appendicectomy
 - TULAA - Transumbilical laparoscopic-assisted appendicectomy
 - SILA - Single incision laparoscopic appendicectomy
 - TFTA - Trocar-free transumbilical appendicectomy



SILS or OPUS or LESS or SLiPP or ...

- **SPA** - Single-port access
- **SILS** - Single-incision laparoscopic surgery
- **OPUS** - One-port umbilical surgery
- **SIMPLE** - Single-incision multi-port laparo-endoscopic surgery
- **SPS** - Single-port surgery
- **VSUS** - Visibly scarless urological surgery
- **SIL** - Single-incision laparoscopy
- **SPL** - Single-port laparoscopy
- **R-NOTES** - Robotic-assisted natural orifice transumbilical endoscopic surgery
- **U-NOTES** - Umbilical natural orifice transluminal endoscopic surgery
- **LESS** - Laparo-endoscopic single-site surgery
- **SLaPP**- Single laparoscopic port procedure
- **NOTUS**- Natural orifice transumbilical surgery
- **SLiPP**- Single laparoscopic incision and port procedure
- **E-NOTES** - Embryonic natural orifice transumbilical endoscopic surgery

Message to Take Home

Urology session

Brussels, 2018



Azad Najmaldin, Leeds, UK

1st

- All did very good presentations
- Time keeping for laparoscopic surgeons were much better than stone treating surgeons

2nd

- Adrenal gland
- Ureter preservation for catheterisation
- Vascular Hitch in PUJ
- Seminal vesicle cyst
- Varicocele
- Mullerian remnant

Are all good indication for laparoscopic approach

3rd - Urinary stones “ureter or Kidney”

- ESWL
- Percutaneous (PCNL)
- Retrograde rigid or flexible endoscopy

Are excellent approaches

- Laparoscopy (retroperitoneal/trans)
 - Good approach in complicated cases (stones associated with PUJ obst, unable to access from below, lack of expertise or facilities)
 - ? Not good in primary cases

4th - Distal ureter obstruction

- Balloon dilatation remains controversial, but probably is useful in some cases
- Uretrocele – Laser is better than diathermy, but the indication for early treatment in asymptomatic cases remains uncertain
- U-HCG in post/pre orchidopexy remains uncertain

Donate Euros

To
Azad Najmaldin “Sata Run” – December 2018
Supporting disabled children and young adults



11:00-12:00

Session III, UPPER INTESTINE

Chairmen Pini Prato (ITA), A. Saxena (UK)



- **Laparoscopic Heller Myotomy for Achalasia:**
 - consider short-term NG feeding to optimize perioperative nutritional status
- **Laparoscopic Assisted Percutaneous Endoscopic Gastrostomy:**
 - simple trick to stabilize anterior stomach wall with 3 mm grasper
 - + under vision, minimal insufflation, counter traction, assessing tension
- **Ladd's procedure for Intestinal Malrotation:**
 - laparoscopy possible: elective cases, older patients
 - high conversion rate 37,8%
 - postoperative volvulus: open 5,3% vs lap 10,7% (not significant)

12.15-13.15

SESSION IV, LOWER GASTRO-INTESTINAL

Chairmen:

Alin Stoica (Romania), Vincenzo Di Benedetto (Italy)



- **Lap assisted endorectal pull-through for Hirschsprungs:**
 - better continence results with longer cuff (blunt endorectal dissection)
 - shorter laparoscopic dissection of rectum may prevent rectal mucosal prolapse
 - not enough evidence

- **The appendix as a natural foreign body retrieval bag**
 - You remove a healthy and useful part of the bowel... ?
 - Immune system, Mitrofanoff, Antegrade Colonic Enema, ...

THANK YOU TO THE CHAIR(WO)MEN AND ALL SPEAKERS



**September 26th – 28th, 2018
Le Plaza Hotel Brussels, Belgium**

