

DRAFT PROGRAM

NOTES™ (NATURAL ORIFICE TRANSLUMINAL ENDOSCOPIC SURGERY) ADVANCED COURSE

NOVEMBER 11 AND 12 - 2010



CHAIRMAN

MH. Huang

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OBJECTIVES

- To become familiar with flexible endoscopy
- To become familiar with transluminal surgery
- To understand the rationale and challenges of endoscopic transluminal surgery
- To discover the latest and future technological developments
- To provide hands-on sessions to learn endoscopic transluminal surgery through practice on live tissue under experts' tutorials
- To promote research and define guidelines

EDUCATIONAL METHODS

- Interactive theoretical and video sessions between faculty and course participants
- Live and pre-recorded operative demonstrations

FACULTY

Allemann, Pierre - Switzerland
Asakuma, Mitsuhiro - Japan
Bailey, Michael – United Kingdom
Chen, Chien Hua - Taiwan
Dallemagne, Bernard - Belgium
Donatelli, Gianfranco - Italy
Dunkin, Brian – USA
Inoue, Haru – Japan

Kitano, Seigo - Japan
Lee WJ. - Taiwan
Leroy, Joël – France
Pasupathy, Shanker – Singapore
Perretta, Silvana - Italy
Soler, Luc - France
Vix, Michel – France

FRIDAY, NOVEMBER 11 - MORNING

8:30 am Welcome and introduction of the faculty to the participants

8:45 am Lectures

OPTION A AND B

Challenge of NOTES™ : from technical improvement to training and education

Who should perform NOTES™ ? Surgeons or Endoscopists ?

Video-conference with Brian DUNKIN from Houston - USA

Key Challenges:

How to get access to the peritoneal cavity ?

How to close the access site ?

Which orifice ? Single or combined access ? For which procedure ?

With which physiological consequences ?

- Transgastric access
- Transvaginal access
- Transgastric access – 2 endoscopes
- Transvaginal retroperitoneal access
- Transrectal, transcolonic and combined accesses
- Transesophageal access

10.45 am BREAK

11.15 am Live Experimental Surgery from the Laboratory

OPTION A AND B

■ **Transgastric Access**

- Transgastric cholecystectomy

■ **Transesophageal Access**

- Mediastinoscopy - Heller / myotomy

■ **Transvaginal Retroperitoneal Access**

- Nephrectomy

■ **Combined Accesses**

- Transgastric and transrectal sigmoidectomy

■ **Different techniques of gastric closure**

- Endoclips
- T-Tags
- Occluder

12.45 pm Lectures

OPTION A AND B

How to expose, retract, dissect, divide and suture ? Key devices, platforms and future

- New developments in Endoscopic technologies

Robotics and virtual reality in NOTES™: the next step ?

Video-conference from Strasbourg - France

1.30 pm LUNCH

2:30 pm Hands-on training on live tissue**OPTION B**

1. Laparoscopy and stapling of the duodenum (prevention of the bowel distension)
 2. Flexible endoscope : basic principles
 3. Intubating the esophagus and understanding the endoluminal anatomy and landmarks
 4. Gastrotomy using a needle knife – sphincterotome - balloon dilation
 5. Peritoneoscopy – spatial orientation
 6. Experimental model of appendectomy : fallopian tubes dissection and section
 7. Liver biopsy
 8. Transgastric cholecystectomy
 9. Transgastric sigmoid mobilization
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6:00 pm END OF SESSION

08:30 am Hands-on training on live tissue

OPTION B

Free choice of NOTES™ procedures to be performed under expert's tutorial :

- TRANSGASTRIC ACCESS
 - Laparoscopy and stapling of the duodenum (prevention of the bowel distension)
 - Gastrotomy with needle knife – sphincterotome – balloon dilation
 - Transgastric cholecystectomy
 - Transgastric nephrectomy
- TRANSVAGINAL ACCESS
 - Transvaginal peritoneoscopy
 - Transvaginal cholecystectomy
 - Transvaginal nephrectomy

11.00 am BREAK

11.30 am Lectures

OPTION A AND B

**Human applications with NOTES™ and Hybrid NOTES™
Pre-recorded procedures and critical analysis**

- Completely Endoscopic NOTES rectosigmoid resection in human cadaver
- Transgastric and transvaginal cholecystectomy: evolution of the technique
- Transvaginal Sleeve Gastrectomy
- Follow-up of the first NOTES™ cholecystectomies :
 - Transvaginal access
 - Transgastric access
- Transvaginal approach to the spleen

1.15 pm LUNCH

2.15 pm Lectures

OPTION A AND B

Step towards NOTES™ : Single Port Access Surgery: another option to "scarless" abdominal surgery

- Concept and implementation in cholecystectomy
- Potentials of single access surgery for colonic resection
- Single trocar approach for splenectomy
- Single-port sleeve gastrectomy
- Is single access surgery the renaissance of Robotics ?

Closing remarks

04.00 pm END OF THE COURSE

This program may be subject to modifications

