DRAFT PROGRAMME

BILIOPANCREATIC ENDOSCOPIC AND EUS ADVANCED COURSE SEPTEMBER 25TH TO 27TH, 2017 IRCAD – AMÉRICA LATINA



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Past President of Brazilian Society Digestive Endoscopy Brazil

HOSPITAL COORDINATOR

Gilberto Fava

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BACKGROUND

The advanced endoscopic procedures on common bile duct or pancreatic gland represented by ERCP and EUS offer the possibility of treatment for most patients suffering from biliopancreatic disorders. Recent advances and the evolution of endoscopic and/or EUS procedures provide alternative options to relieve the biliopancreatic obstructions. Malignant and benign stenosis, common bile duct gallstones, malignant tumor of the duodenal papilla and pancreatic fluid collections can be treated by ERCP, EUS or both. The interest in developing and improving the therapeutic ERCP and/or EUS among gastroenterologists, endoscopists and surgeons is growing rapidly. Training should be solid and the information must be accurately exposed both from the point of view of indications of these procedures as technical. The opportunities for learning these two techniques are scarce. IRCAD on pioneering way offers a focused course in learning these advanced ERCP and EUS procedures with an experienced faculty, which will perform live procedures and give Hands-on lab, closely following the course participants.

COURSE BRIEFING

The primary aim of training programs, as defined by international gastrointestinal endoscopy societies, is the safety with which their practitioners are able to perform endoscopic examinations and procedures in a safe, fast and adequate manner. The objective evaluation of abilities for the acquisition of training in endoscopic procedures is determined through a minimum amount of examinations through which proficiency is, in theory, achieved. The course is made based on twenty stations in ERCP and EUS therapeutic procedures. All stations are structured under "ex vivo" models that should be prepared by the course directors and their team of faculties. The reality acquired from each scenario reaches an absolutely true simulation of what the attendees would have achieved on human beings. The association of "ex vivo" and virtual simulator models for conventional training can optimize the training and abilities of beginners in the specialty of gastrointestinal endoscopy and optimize the cost-benefit ratio as well.

INVITED FACULTY



CÉSAR VIVIAN LOPES (BRA)
DJALMA ERNESTO COELHO (BRA)
EDVALDO FRAGA MOREIRA (BRA)
ELOY TAGLIERI (BRA)
EVERSON LUIZ DE ALMEIDA ARTIFON (BRA)
GLACIOMAR MACHADO (BRA)
ISMAEL MAGUILNIK (BRA)
JOSÉ CELSO ARDENGH (BRA)

JOSÉ EDUARDO BRUNALDI (BRA)

JULIO CARLOS PEREIRA-LIMA (BRA)

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CARLOS KIYOSHI FURUYA JR (BRA)
RAFAEL KEMP (BRA)
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RAQUEL CANZI ALMADA DE SOUZA (BRA)
RICARDO RANGEL DE PAULA PESSOA (BRA)
SERGIO EIJI MATUGUMA (BRA)

SPENCER CHENG (BRA)

SYLON RIBEIRO DE BRITO JUNIOR (BRA)

TOMAZO FRANZINI (BRA)

VIRIATO JOÃO LEAL DA CUNHA (BRA)

WAGNER COLAIACOVO (BRA)

MARCOS VINICIUS DA SILVA NEY (BRA)

DAVID ZAGALSKY (ARG)

MICHAEL KAHALEH (USA) GUIDO COSTAMAGNA (ITA) JACQUES DEVIÉRE (FRA) MARC BARTHET (FRA) HORST NEUHAUS (GER)

Monday, 25th September 2017

MORNING

07.45 am Registration

08:00 am Welcome - Introduction

G. Costamagna J. C. Ardengh E. Artifon

THEORETICAL SESSION

Chairmen: ?

08:15 am Biliary and Pancreatic Endoscopy - Live cases

12:15 pm Lunch at the institute

01:00 pm Basic Biliary and Pancreatic Endoscopy - Overview

<u>Chairmen: ?</u>

01:00 pm Handling equipment and accessories

01:10 pm Biliopancreatic radiological anatomy and variations01:20 pm Papillary cannulation techniques—tips and tricks

01:00 pm Endoscopic sphicterotomy of the major and minor papilla- techinical aspects

01:40 pm Preoperative assessment of patients undergoing ERCP



01:50 pm When and how to do fistulotomy or precut sphincterotomy

02:00 pm Discussion

02:20 pm Coffee Break

02:40 pm Therapeutic Biliary and Pancreatic Endoscopy – Overview

<u>Chairmen: ?</u>

2:40 pm	Techniques in difficult bile duct stones
2:50 pm	ERCP after gastrointestinal surgery
3:00 pm	Benign and malign bile strictures. Which kind of stent to use?
3:10 pm	Endoscopic Papillectomy
3:20 pm	Spyglass cholangioscopy
3:30 pm	Adverse events-how to treat and prevent?
3:40 pm	Discussion

4:00 pm Basic Biliary and Pancreatic EUS – Injection techniques and FNA – Overview

Chairmen: ?

4:00 pm	EUS radial and sectorial anatomy
4:10 pm	FNA proceeds – Technic and accessories
4:20 pm	EUS-guided celiac plexus neurolysis
4:30 pm	Pancreatic cystic lesions - EUS-guided ablation (15')
4:40 pm	Discussion (15')

5:00 pm Therapeutic Biliary and Pancreatic EUS – EUS – guided and EUS-ERCP hybrid procedures

Chairmen: ?

5:00 pm	Pancreatic fluid collection and necrosis – EUS treatment
5:10 pm	EUS-guided biliary and pancreatic drainage after ERCP failure
5:20 pm	EUS-guided gastrojejunal anastomosis
5:30 pm	EUS-guided gallbladder drainage
5:40 pm	Discussion

06:00 pm End of session



Tuesday, 26th September 2017

8:00 am Biliary and Pancreatic Endoscopy - Live cases

Chairmen: ?

12:15 pm Lunch at the institute

1:00 pm Practice on the laboratory

Chairmen: all faculty

Over in ERCP "ex vivo" models - Positioning and alternative techniques of cannulation, sphincterotomy, papiloplasty, litotripsy (regular and urgent), sampling techniques on ERCP (brushing cytology, bile aspirate and bile duct biopsy), papillectomy, insertion of plastic and self-expandable metallic stents, sweeping stones, Spyglass, fistulotomy and pre-cutting, dilatation of the stenosis.

Over in EUS Models – EUS radial and sectorial scanning anatomy, EUS-guided fine needle aspiration (lymph nodes, pancreatic cystic lesions and pancreatic masses) EUS-guided biliary and pancreatic drainage, EUS-guided celiac plexus neurolisys, EUS-guided injection treatment, EUS-guided gastrojejunal anastomosis

06:00 pm End of session

Wednesday, 27th September 2017

Theoretical sessions

9:00 am **Practice on the laboratory**

10:00-11:30 am Open coffee break

Chairmen: all faculty

Over in ERCP "ex vivo" models - Positioning and alternative techniques of cannulation, sphincterotomy, papiloplasty, litotripsy (regular and urgent), sampling techniques on ERCP (brushing cytology, bile aspirate and bile duct biopsy), papillectomy, insertion of plastic and self-expandable metallic stents, sweeping stones, Spyglass, fistulotomy and pre-cutting, dilatation of the stenosis.



Over in EUS Models – EUS radial and sectorial scanning anatomy, EUS-guided fine needle aspiration (lymph nodes, pancreatic cystic lesions and pancreatic masses) EUS-guided biliary and pancreatic drainage, EUS-guided celiac plexus neurolisys, EUS-guided injection treatment, EUS-guided gastrojejunal anastomosis.

01:00 pm End of the course

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