Metastatic Cancer

program



Hospital Barmherzige Brüder Regensburg and University Hospital Regensburg



Abdominal



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Congress Fee

Both days 175 € Thursday, July 9th 150 € Friday, July 10th 100 €

Registration conditions

General Information

Hospital Barmherzige Brüder Regensburg

PD Dr. Sven A. Lang (sven.lang@ukr.de)

Scientific Leadership

Prof. Dr. Pompiliu Piso

Prof. Dr. Hans J. Schlitt

Congress Secretary

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Congress Management

University Hospital Regensburg

93042 Regensburg, Germany

Congress Venue

Large Auditorium

Prüfeninger Str. 86

93049 Regensburg

Britta Haseneder

University Hospital Regensburg

After your successful registration you will receive an invoice concer-ning your participation fee during the next days by email. Once regi-stered your registration is binding. All payments must be made prior to the conference. Participation fees are due upon receipt of invoice without deduction. Please transfer the invoice amount before the event date. In case of a cancellation the cancellation statement must be in writing. The following processing fees apply: 8-3 working days before the event 50% of participation fee. In case of too late cancel-lation or absence without written cancellation the entire fee will be charged. A substitute participant may be submitted at any time.

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Foto: UKR, Dieter Pirner, www.diegotal.de Stand: März 2015

Dear colleagues,

treatment of metastatic disease is a major problem in patients with gastrointestinal or gynecological malignancies. For a long time, this condition was considered untreatable. However, due to multidisciplinary approaches, this has changed within the last decades. In colorectal cancer, resection has become the standard therapy and resectability of liver lesions has improved due to novel techniques (e.g. in-situ splitting) or strategies (e.g. neoadjuvant therapy). Furthermore, lung metastases from colorectal cancer can be successfully treated by surgical resection and even combined liver and lung resection provides cure in selected patients. For peritoneal metastases cytoreductive surgery (visceral resection and peritonectomy procedures) along with hyperthermic intraperitoneal chemotherapy (HIPEC) and systemic chemotherapy is recommended in the German guideline for the treatment of carcinomatosis originating from colorectal cancer. Following this, new programs for peritonectomy and HIPEC are now being established all over the world.

We would like to invite you to discuss all currently available treatment options and controversial issues in this important field of oncology. For the first time, we have also included the treatment of pulmonary metastases into the program to emphasize the curative opportunities offered for these patients.

Should you be interested in participating, please contact the Congress Management of the University Hospital Regensburg.

Regarding the current status of the program please access our website www.abdominal-metastatic-cancer2015.de.

The organizing team is looking forward to welcome you in Regensburg in July 2015!







Prof. Dr. Hans J. Schlitt



PD Dr. Sven Lang

08:45 - 09:00	Opening <i>Piso</i> Chairman <i>Germer</i>
Session I 09:00 - 09:15	Defining resectability for liver metastases
09:00 - 09:15	Schlitt
09:15 - 09:30	Strategies to increase resectability: neoadjuvant downsizing Gruenberger
09:30 - 09:45	Defining response after neoadjuvant therapy for CRLM Evert
09:45 - 10:00	Role of adjuvant chemotherapy for liver metastases Teufel
10:00 - 10:30	Key note lecture: When and how to treat the colorectal primary in cases with liver metastases Paty
10:30 - 11:00	Discussion
11:00 - 11:30	Coffee break
Session II	Chairman Gruenberger
11:30 - 11:45	How to avoid postoperative liver failure? Pratschke
11:45 - 12:00	Surgical technique – how to dissect liver parenchyma best? Piso
12:00 - 12:15	Complication management and pitfalls in liver surgery Lang H
12:15 - 12:30	Technical approaches to increase resectablilty: 2-stage hepatectomy and PVE Quenet
12:30 - 12:45	Update on in-situ splitting / ALPPS Lang S
12:45 - 13:00	Interventional therapy of colorectal liver metastases Stroszczynski
13:00 - 13:30	Discussion
13:30 - 14:30	Lunch
Session III	Chairman Lang H
14:30 - 15:00	Key note lecture: Intraarterial chemotherapy for liver metastases Paty
15:00 - 15:15	Radiologic imaging for liver and peritoneal metastases Zorger
15:15 - 15:30	Nationwide analysis on detection and treatment of liver metastases in Germany Klinkhammer-Schalke
15:30 - 15:45	Surgery for peritoneal and liver metastases Cecil
15:45 - 16:00	Single centre experience of CRS and HIPEC in elderly - lessons learned Königsrainer
16:00 - 16:30	Coffee break
Session IV	Chairman Glockzin
16:30 - 18:00	Free papers liver and peritoneum à 10 min
	Paper 1 Difficulties in setting up, the first HIPEC Unit, in the North-Eastern Region of Romania Scripcariu
	Paper 2 Pelvic exeterations with Bricker type conduits in the cases of primary recto-sigmoid tumors - is it indicated in patients with isolated liver or peritoneal metastases? Damjanovich
	Paper 3 Combination of HIPEC with simultaneous bilateral HIThOC after cytoreductive surgery Becker
	Paper 4 Predictors of early recurrence after CRS+HIPEC for peri- toneal metastasis of colorectal origin Nissan

Paper 5 - 8

Bavarian evening

Restaurant "Haus Heuport", Domplatz 7, 93047 Regensburg

19:00

Session I	Chairman <i>Lorenz</i>		
09:00 - 09:30	Key note lecture: My 10 golden rules for a successful cytoreduction Sugarbaker		
09:30 - 09:45	Treatment of peritoneal surface malignancy from colorectal origin in Japan - current status and future perspectives Yano		
09:45 - 10:00	Why is the US attitude towards CRS and HIPEC different? Esquivel		
10:00 - 10:15	Starting a PSM programme – recommendations and "no go"s Deraco		
10:15 - 10:30	Present and future studies on HIPEC in France Quenet		
10:30 - 10:45	What was new at the world congress on PSM in Amsterdam, future trends? Verwaal		
10:45 - 11:00	Discussion		
11:00 - 11:30	Coffee break		
Session II	Chairman Antos		
	Surgical technique of CRS and HIPEC. My tips and tricks for -		
11:30 - 11:45	right upper quadrant	Sugarbaker	
11:45 - 12:00	left upper quadrant	Esquivel	
12:00 - 12:15	small pelvis	Paty	
12:15 - 12:30	lower abdomen	Piso	
12:30 - 12:45	HIPEC	Pelz	
12:45 - 13:00	perioperative management	Rau	
13:00 - 13:30	Discussion		
13:30 - 14:30	Lunch		
Session III	Chairman Kalff		
14:30 - 14:15	Systemic chemotherapy for peritoneal metastasis Braess		
15:00 - 15:15	Key Points and Overview of CRS and HIPEC for Colorectal Peritoneal Metastases Cecil		
15:15 - 15:30	Patient outcome and quality of life after CRS and HIPEC Polkowski		
15:30 - 15:45	Pitfalls during the learning curve <i>Unal</i>		
15:45 - 16:00	Discussion		
16:00 - 16:30	Coffee break		
Session IV	Chairman Hofmann		
16:30 - 16:45	Lung metastases of colorectal cancer		
10.30 - 10.43	Surgical intervention for pulmonary metastases from colorectal carcinoma Pfannschmidt		
16:45 - 17:00	Thoracoscopic or Open Surgery for Pulmonary		
	Metastasectomy?		
	Eggeling		
17:00 - 17:15	Lung- und Livermetastases of Colorectal Cancer: A contraindication for pulmonary metastasectomy?		
	Schirren		
17:15 - 17:30	Is mediastinal lymphadenectomy during pulmonary metastasectomy of colorectal cancer necessary? Szöke		
17:30 - 17:45	Alternative for metastasectomy: Radiofrequency ablation and Stereotactic Body Radiation Therapy (SBRT)? Schneider		
17:45 - 18:00	Discussion		
18:00	Closing remarks and End of meeting		