

VIIIth World Congress of the ISDE

September 5-8, 2001, Sao Paulo, Brazil

I have great pleasure in personally inviting you to participate in the VIIIth World Congress of the ISDE, which will be held in Sao Paulo, Brazil from September 5 to 8, 2001. This meeting is particularly historic in the life of the ISDE because it will be the first in the new millennium.

The Congress will offer participants many activities:

- 1 Scientific
- 2 Touristic
- 3 Sporting
- 4 Social
- 5 Cultural
- 6 Shopping

As in the past, the VIIIth ISDE World Congress will have a comprehensive scientific program covering the most recent advancements and trends in all branches of the specialties related to the esophagus, including pathophysiology, pharmacology, pathology, endoscopy, imaging and laboratory diagnostic methods, clinical approaches, conventional and minimally invasive endoscopic surgery, chemotherapy and radiotherapy.

Renowned authorities in many of these fields will make presentations.

The scientific meetings have been organized to give all participants the opportunity to present free papers, videos and posters, in addition to lec-



Congress President, Professor Henrique W. Pinotti, Professor & Chairman, Department of Surgery, University of Sao Paulo, Brazil

tures in the theater and the instructional video rooms.

The 2001 ISDE Congress presents an excellent opportunity to update your knowledge and travel with your family. After the Congress you may wish to visit other exotic local regions such as the central western swamps known as 'The Pantanal of Matogrosso', the Amazon jungle or the beautiful beaches of the Brazilian coast. ☺

WORLD CONGRESS DEADLINES:

Submission of abstracts: January 31, 2001

Registration at normal rate: January 31, 2001

Video/film duplicate: April 30, 2001

For further information, visit the Congress homepage
at: www.esophagus2001.com.br

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The International Society for
Diseases of the Esophagus

SECRETARIAT

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During the 38th World Congress of Surgery held by the International Society of Surgery from 15 to 20 August 1999 in Vienna, 13 scientific sessions were organized by the ISDE: 7 free paper sessions, 2 symposia, 2 luncheon panels, 1 plenary session and 1 video session.

The topics of the free paper sessions were gastroesophageal reflux disease, neoadjuvant treatment of squamous cell carcinoma of the esophagus, basic research of esophageal carcinoma and adenocarcinoma. The symposia focused on either Barrett's cancer, in particular the marker of malignant degeneration,

and its surgical consequences or new aspects in the surgical treatment of reflux disease. During the session on Barrett's cancer, H.J. Stein from Germany discussed the extent and composition of reflux, M. Pera from Spain focused on the

special problems of the ultrashort Barrett's esophagus and N. Altorki from the USA talked about its surgical consequences. During the plenary session, titled 'What's New in Treatment of Squamous Cell Carcinoma of the Esophagus', T. Lerut from Belgium talked about new prognostic factors and J. Izbicki from Germany about the problem of microinvolvement of lymph nodes. The indications and limits of transmediastinal video-assisted esophagectomy were addressed by A. Peracchia from Italy. From Japan, H. Watanabe talked about extensive surgical resec-

tion and H. Udagawa about pre- and postoperative adjuvant treatment.

On 10 December 1999, in Mainz, a symposium of the Surgical Working Party (Oncology) of the German Society of Surgery focused on the topic 'If Esophageal Surgery should be performed in Centers: Pro and Contra'. Discussion centered around the current results from high-volume institutions compared with low-volume institutions. Several reports from the USA, Denmark and UK have shown that high-volume institutions have a lower mortality, better management of complications, better 5-year survival and lower costs per case. However, the number of esophagectomies per year that is related to these good results, and which should be considered as 'high volume', differs from 6 to 50, so the question remains whether or not only special high-volume centers should be certified for such complex surgical procedures as esophagectomy. □

North America

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Interest in benign diseases and cancer of the esophagus remains high in North America. There were many presentations at the recent American College of Surgeons meeting regarding the esophagus, including a panel discussion on the management of esophageal motor abnormalities and a postgraduate course for general thoracic surgery, which included sessions on esophageal perforation, diverticular disease,

techniques of resection, management of Barrett's esophagus, and multidisciplinary management of esophageal cancer.

At the Southern Thoracic Surgical Association meeting in November 1999, presentations were made on VATS myotomy for achalasia by physicians from Georgetown University and on esophageal reconstruction for complex benign disease by physicians from the Mayo Clinic.

Presentations were made at the Society of Thoracic Surgeons meeting in January 1999, on outcomes of stenting for esophageal cancer and minimally invasive techniques for esophagectomy, both presented by physicians from the

University of Pittsburgh and the University of California at Davis, as well as quality of life outcomes after esophagectomy presented by physicians from the Mayo Clinic. Developments in esophageal oncology practice and in esophageal surgery in general were discussed at the postgraduate course during this meeting.

Multi-institutional trials have recently been instituted by the American College of Surgeons Oncology Group, which may provide important information for the management of esophageal cancer in the next several years. These trials include utility of PET in staging of patients with potentially operable carcinoma of the thoracic esophagus, and additional trials focused on the esophagus are currently being planned. □