

4th ISSA INTERNATIONAL

HANDS-ON INTENSIVE MASTER IN BASIC AND ADVANCED LAPAROSCOPIC SURGICAL ANATOMY OF THE FEMALE PELVIS AND TECHNIQUES

IN COLLABORATION WITH **AAGL**

COURSE PRESIDENTS:
MARCELLO CECCARONI
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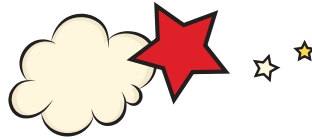
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VERONA, ITALY
3rd - 6th June, 2024

Preliminary Program

COURSE VENUE
ICLO Teaching and Research Center, San Francesco di Sales
Via Evangelista Torricelli 15/A, Verona



Dear Friends,

we invite you to join us at the "4th ISSA International, Hands-On Intensive Master in Basic and Advanced Laparoscopic Surgical Anatomy of the Female Pelvis and Techniques" a Hybrid Live and Digital Event in collaboration with the AAGL (Elevating Gynecologic Surgery).

We are delighted to welcome you in the beautiful city of Verona, in the north-eastern part of Italy, lying on the borders of the beautiful Lake Garda.

Verona is one of the most outstanding cities in the world, with more of two thousand years of history. Considered as the "city of love", it is the place where William Shakespeare set his masterpiece "Romeo and Juliet". This little gem of a city of art and history shines for the presence of many beautiful ancient monuments and buildings, among which the Arena, a roman coliseum hosting a very famous summer Opera festival. The neck of the city is covered by a scarf of beautiful hills and valleys overcrowded by grapevine trees, defining the famous wine area called "Valpolicella", producing some of the finest type of wines known all over the world, such as the Amarone, Ripasso, Valpolicella and Recioto. This four-days hands-on intensive course is addressed to pelvic surgeons interested in enjoying the cadaveric model to deepen their knowledge in surgical anatomy, which is traditionally the golden rule of the ISSA School. The course is designed for gynecologists, general surgeons, urologists and pelvic surgeons who perform basic, intermediate and difficult laparoscopic surgery. It will provide a step-by-step surgical approach to the pelvic viscera and to the different surgically-treatable diseases affecting them, with a particular focus on benign disease, deep infiltrating endometriosis and gynecologic malignancies. A common distortion and infiltration of the pelvic organs may be encountered not only in gynecological cancer and deep infiltrating endometriosis, but also in simple procedures and the only safe way to restore anatomy and achieve radicality is to follow simple anatomical rules.

Each day, live-surgery sessions will alternate with cadaveric hands-on dissections.

Your "spectator" part of the course will be a sparkling mix of: theoretical presentations and keynote lectures brought by an international faculty of stakeholders and key-opinion leaders, keynote cadaveric dissections held by Dr. Marcello Ceccaroni and Dr. Shailesh Puntambekar, live-surgeries broadcasted online and to the congress Venue from the "IRCCS Sacro Cuore Don Calabria Hospital" operating rooms and performed by Dr. Ceccaroni, Dr. Puntambekar and other Masters of surgery, together with their assistants with the help of a multi-disciplinary team.

For the "live-surgery" sessions, which will be casted every day, a large set of surgical operations for different pathologies will be shown, from the simple laparoscopic hysterectomy to the "Pune Technique" radical hysterectomy and the "Negrar Method" for eradication of deep infiltrating endometriosis

with parametrial and rectal resection.

Particular focus will be put on the correct employment of the nerve-sparing principles both, in oncologic and benign disease, and on the correct use of energy and techniques.

In fact, all the dissections will be performed under the eye of a "neurogynecologic" approach.

The theoretical lessons will firstly focus on anatomical principles and then on the single pathologies and their surgical treatment options with wide use of surgical movies.

In addition, a real room and a Webspaces will be available for pre-recorded and on-demand surgical videos from real Masters of surgery from all over the world and a permanent "Continuous Video Session".

The keynote cadaveric dissections will introduce and give you a "syllabus" for the following hands-on dissection, showing how to find out and dissect the pelvic spaces on these peculiar and very realistic specimens. Your "actor" part of the course, which will be performed with the help of the Faculty tutors, will provide a hands-on tutorial on cadaveric specimens, using laparoscopic instrumentation and the most advanced 3D and 4K HD technologies.

Main learning objectives will be: to recognize the anatomical landmarks and major pelvic structures pertinent to gynecologic laparoscopy and retroperitoneal dissection, to apply laparoscopic surgical techniques to enter and expose the avascular spaces of the pelvis, parametrial ligaments, nerves and pelvic vascular system and their relations with the ureter and intraperitoneal structures, to illustrate the step-by-step dissection of the pelvic viscera and pelvic-nerves related to the different gynecological procedures and nerve-sparing techniques for gynecologic cancers and endometriosis surgery.

The last day of the course will provide a cadaveric hands-on masterclass on laparoscopic suturing techniques, introduced by theoretical and video lessons showing the basic principles of endoscopic suturing and knotting. A pelvic trainer session will follow, where the candidates will be guided by the tutors in suturing simple (i.e. vaginal cuff, myometrial defect after myomectomy) and complex (i.e. vesical and ureteral resections and injuries, bowel vascular injuries) wounds on the cadaveric specimens. A social dinner in a fascinating venue will be offered to all of the in-person participants, in order to give a taste of the Italian food, history and lifestyle, in order to come back to our good old habits. We look forward to sharing this inspiring, memorable and highly educational artistic, musical, anatomical and surgical experience with you!

We wait for you and remember: If you love someone bring them to Verona!

Marcello Ceccaroni
Course Director, ISSA President

Shailesh P. Puntambekar
Course Director, ISSA International
Honorary President

Linda Michels
Executive Director

Gaby Moawad
Honorary President



Presidents

Course Presidents

Marcello **Ceccaroni** | Italy
Shailesh Padmakar **Puntambekar** | India

Honorary President

Gaby **Moawad** | Usa

Executive Director

Linda **Michels** | Usa

Tentative list of Faculty

Mara **Albanese** | Italy
Silvia **Baggio** | Italy
Pere N. **Barri Soldevila** | Spain
Giuliano **Barugola** | Italy
Elisa **Bertocchi** | Italy
Francesco **Bruni** | Italy
Giuseppe **Caleffi** | Italy
Tommaso **Capezzuoli** | Italy
Paolo **Casadio** | Italy
Matteo **Ceccarello** | Italy
Vito **Chiantera** | Italy
Gianmarco **D'Ancona** | Italy
Paola **De Mitri** | Italy
Alessandra **Di Giovanni** | Italy
Humberto **Dionisi** | Argentina
Jon Ivar **Einarsson** | Iceland
Enrico **Facci** | Italy
Luca **Garriboli** | Italy
Sandesh **Kade** | India
Mohamed **Mabrouk** | UK
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Maria **Manzone** | Italy
Gaia **Masini** | Italy
Alberto **Mattei** | Italy

Liselotte **Mettler** | Germany
Maria Teresa **Mirandola** | Italy
Giuseppe **Mirenda** | Italy
Shanti **Mohling** | USA
Josefina M. **Morandy Azocar** | Venezuela
Simone **Orlandi** | Italy
Marie Fidela **Paraiso** | USA
Seema **Puntambekar** | India
Andrea **Puppo** | Italy
Lorenzo **Rettore** | Italy
Umberto Leone **Roberti Maggiore** | Italy
Horace **Roman** | France
Roberto **Rossini** | Italy
Giovanni **Roviglione** | Italy
Giacomo **Ruffo** | Italy
Anna **Stepniewska** | Italy
Waleed **Tawfik** | Egypt
Milind **Telang** | India
Carlo **Tricolore** | Italy
Prakash **Trivedi** | India
Andrea **Vidali** | USA
Giulia **Vittori Antisari** | Italy
Sonja **Vujosevic** | Italy
Carlotta **Zorzi** | Italy

Video-Library Faculty

Mauricio **Abrão** | Brazil
Pere N. **Barri Soldevila** | Spain
Roberto **Berretta** | Italy
Francesco **Bruni** | Italy
Paolo **Casadio** | Italy
Matteo **Ceccarello** | Italy
Marcello **Ceccaroni** | Italy
Sarah **Choi** | Australia
Danny **Chou** | Australia
Stefano **Cosma** | Italy
Claudio **Crispi Jr** | Brazil
Javier **De Santiago Garcia** | Spain
Humberto **Dionisi** | Argentina
Jon Ivar **Einarsson** | Iceland
Luiz Flávio **Fernandes** | Brazil
Simone **Ferrero** | Italy
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Gaby **Moawad** | USA
Shanti **Mohling** | USA
Farr **Nezhat** | USA
Marie Fidela **Paraiso** | USA
Fernando C. **Paredes Chavez** | Mexico
Matilde **Quaranta** | Argentina
Giovanni **Roviglione** | Italy
Luca **Savelli** | Italy

Shadi **Seraji** | USA
Anna **Stepniewska** | Italy
Prakash **Trivedi** | India
Paolo **Vercellini** | Italy
Attila **Vereczkey** | Hungary

Monday June 3rd

08.30 Course presentation and Welcome

THEORETICAL SESSION

09.00 The bricks in the wall: abdominal wall anatomy for minimally-invasive accesses

09.30 KEYNOTE LECTURE

How to become a sailor and not a pirate: cartography of retroperitoneal anatomy for a safe laparoscopic navigation

10.00 LIVE-SURGERY SESSION

From IRCCS SACRO CUORE DON CALABRIA HOSPITAL, NERAR DI VALPOLICELLA, ITALY

From MALZONI MEDICAL CENTER, AVELLINO, ITALY

13.00 Lunch

THEORETICAL SESSION

14.00 How to make it easy and easier: laparoscopic surgical anatomy and different strategies of hysterectomy in easy settings: when anatomy and ergonomics count

14.25 How to make it easy and easier: laparoscopic surgical anatomy and different strategies of hysterectomy in challenging settings: when anatomy and ergonomics count

14.50 From the bottom to the top: laparoscopic surgical anatomy of trans-anal colorectal surgery for deep endometriosis

15.15 Deep diving in the pelvic retroperitoneal seas: laparoscopic surgical anatomy of pelvic lymphadenectomy

15.40 Diving and sailing along the big vessels: laparoscopic surgical anatomy of para-aortic lymphadenectomy

16.05 The front doors: surgical anatomy of the anterior compartment in deep endometriosis surgery: urinary tract surgery means parametrial surgery

16.30 The back doors: surgical anatomy of the posterior compartment for gynecological procedures (rectum, Douglas pouch, recto-vaginal septum, utero-sacral and parametrial ligaments, posterior broad ligaments): digging under the surface to find landmarks according to the nerve-sparing technique. The "Negrar Method"

16.55 "Retroperitoneum is your best friend": how can anatomy help the surgeon in preventing complications

17.20 KEYNOTE LECTURE

"How to unfreeze a frozen body": how anatomy can help in different surgical approaches to visceral and somatic nerves, retroperitoneum and upper abdomen for radical and ultra-radical procedures

18.00 KEYNOTE LECTURE

The journey of parametrial surgery: from radical hysterectomy to uterine transplant

18.40 Discussion, adjourn and conclusion

19.00 Course faculty meeting

Tuesday June 4th

THEORETICAL SESSION

08.30 Enemy, false-friend or friend? Laparoscopic surgical anatomy and different strategies for tackling the ureter in radical pelvic surgery

09.00 "With a little help from my friends": how anatomy can help in managing complications

LIVE-SURGERY SESSION

From IRCCS SACRO CUORE DON CALABRIA HOSPITAL, NEGRAR DI VALPOLICELLA, ITALY

13.00 Lunch

14.00 **SURGICAL VIDEO LIBRARY SESSION (Satellite Room)**

17.30

14.00 Dissection templates highlights and chairs' recommendations

14.00 **DEATH FOR LIFE MARATHON: HANDS-ON CADAVERIC DISSECTION (Dissection Room)**

DISSECTION TOPICS

TOPOGRAPHIC AND SURGICAL ANATOMY OF THE ANTERIOR ABDOMINAL WALL

Vessels, muscles and sheaths, nerves, laparotomic and laparoscopic accesses

TOPOGRAPHIC AND SURGICAL ANATOMY OF THE UPPER ABDOMEN

Supramesocolic space: embryologic tips, diaphragm, liver, gallbladder, pancreas, spleen, blood and lymphatic vessels, nerves, sheaths, spaces, connectives, retroperitoneum. Surgical anatomy of diaphragm and of hepatic ligaments and segments.

Left and right bowel mobilization for colo-rectal radical surgery

TOPOGRAPHIC AND SURGICAL ANATOMY OF THE LOWER ABDOMEN

Infra-mesocolic space: embryologic tips, kidneys, adrenal glands, ureters, small bowel, colon-rectum, blood and lymphatic vessels, nerves, sheaths, spaces, connectives, retroperitoneum

Radical abdominal and bowel surgery

LEARNING OBJECTIVES

- Pneumoperitoneum induction and trocar placement with different accesses techniques (Veress needle, umbilical access, Palmer access, open laparoscopy, visual trocar, direct access)
- Anterior abdominal wall complication prevention and fixing
- Upper abdomen exploration and visceral topography
- Upper abdomen adhesiolysis
- Laparoscopic adhesiolysis, partial cecum and sigmoid mobilization
- Accurate wide abdomino-pelvic inspection (such as in oncological diagnostic procedures)

Tuesday June 4th

- Accurate description of the abdomino-pelvic anatomy (ligaments, organs, viscera, peritoneal folds, etc.)
- Cutting of the round ligament
- Opening of the lateral paravesical space (pvs), identification of the landmarks (pelvic floor, umbilical artery and ligament, obturator artery, vein and nerve, ischio-pubic branch, pelvic floor, etc.)
- Opening of the medial paravesical space (pvs), identification of the landmarks (vesico-uterine ligaments, bladder pillars, bladder, etc.)
- Opening of the medial pararectal space and identification of all of the landmarks
- Opening of the lateral pararectal space and identification of all of the landmarks
- Isolation and identification of the meso-ureter, following its course up to the ureteral tunnel
- Isolation and identification of the uterine artery and its relationships with the ureter
- Isolation and identification of Cardinal ligament and lateral parametrium
- Opening of the ilio-lumbar space and description of all of the landmarks (psoas muscle, genito-femoral nerve, lumbo-sacral trunk, external iliac vessels, etc.)
- Isolation and skeletonization of hypogastric artery and its branches
- Tips and tricks for a safe identification and ligation of hypogastric artery
- Opening of the retropubic Retzius' space, mobilization of the bladder and identification of all of the landmarks
- Isolation and identification of anterior parametrium and vesico-uterine ligaments
- Opening of the retrorectal and pre-sacral space and identification of all of the landmarks
- Identification and description of hypogastric nerves and visceral innervation
- Isolation and identification of posterior parametrium, recto-vaginal ligaments and rectal wings
- Full mobilization of the cecum and of the sigmoid with identification of all the landmarks
- Intestinal mobilization, liver and spleen mobilization, Cattell-Valdoni, Mattox, Jinnai and Kocher manoeuvres
- Isolation and skeletonization of right IP ligament up to its confluence in Cava (accurate dissection and skeletonization of the vessels: very good training even for beginners)
- Isolation and skeletonization of left IP ligament up to its confluence in the left renal vein (accurate dissection and skeletonization of the vessels: very good training even for beginners)
- Surgical anatomy of appendectomy
- Surgical anatomy of cholecystectomy
- Surgical anatomy of adnexal surgery: ovarian cysts approaches, tubal surgery, salpingo-oophorectomy
- Surgical anatomy for simple hysterectomy
- Surgical anatomy for large uteri hysterectomy

17.30

Discussion, adjourn and conclusion

Wednesday June 5th

THEORETICAL SESSION

- 08.30** Using retroperitoneal ligation of uterine artery in difficult situations in benign surgery
- 08.50** I'll tell you a secret: tips and tricks for a safe and anatomical laparoscopic myomectomy
- 09.10** I'll tell you a secret: tips and tricks for a safe and anatomical promonto-fixation and surgery for pelvic floor defects

LIVE-SURGERY SESSION

From IRCCS SACRO CUORE DON CALABRIA HOSPITAL, NERAR DI VALPOLICELLA, ITALY

13.00 Lunch

SURGICAL VIDEO LIBRARY SESSION (Satellite Room)

14.00

18.00

DEATH FOR LIFE MARATHON: HANDS-ON CADAVERIC DISSECTION (Dissection Room)

14.00

18.00

DISSECTION TOPICS

ANATOMY AND SURGICAL TECHNIQUES IN PELVIC RADICAL AND ULTRA-RADICAL SURGERY

Deep infiltrating endometriosis, cervical cancer, endometrial cancer, ovarian cancer, colo-rectal cancer (different types of radical hysterectomy, radical oophorectomy according to Hudson and Delle Piane, pelvicotomy), inguinal Anatomy, anatomy of the Scarpa's triangle

NERVE-SPARING LAPAROSCOPIC PELVIC SURGICAL PROCEDURES AND TECHNIQUES

Nerve-sparing radical hysterectomy, nerve sparing rectal resection for deep endometriosis

LEARNING OBJECTIVES

- Surgical anatomy of ureter for endometriosis eradication
- Surgical anatomy of pelvic vessels
- Surgical anatomy of the bladder in endometriosis surgery
- Inferior mesenteric vessels ligation
- Splenectomy and spleno-pancreatectomy
- Adrenalectomy
- Intestinal lesion repairing
- Colo-rectal nerve-sparing resection
- Vascular suturing techniques, artery and vein anastomosis techniques, graft anastomosis technique
- Parametrial preparation according to different types of radical hysterectomy
- Ureteral and bladder resection
- Surgical approaches for ovarian, endometrial and cervical cancer

Wednesday June 5th

- Inguinal lymphadenectomy
- Sacral promontorium exposition
- Hypogastric vessels ligation
- Uterine artery ligation and different steps for hysterectomy according to different classes of radicality
- Obturator nerve isolation and iatrogenic lesion repairing
- Infracolic omentectomy with identification of all the landmarks
- Gastrocolic omentectomy with identification of all the landmarks
- Diaphragmatic exposition and liver mobilization
- Diaphragmatic stripping, resection and suturing
- Hepatic surgery techniques
- Tips and tricks for approaching the visceral and somatic nerves in the pelvis
- Tips and tricks for a nerve-sparing radical pelvic surgery
- Pelvic lymphadenectomy with medial approach (accurate dissection and skeletonization of the vessels: very good training even for beginners)
- Pelvic lymphadenectomy with lateral approach
- Pre-sacral lymphadenectomy with identification of all the landmarks
- Para-caval and pre-caval lymphadenectomy
- Intercavo-aortic lymphadenectomy
- Para-aortic and pre-aortic lymphadenectomy
- Uretero-neocystostomy
- Nephrectomy
- Anterior pelvectomy
- Posterior pelvectomy
- Total pelvectomy

18.00 Discussion, adjourn and conclusion

20.00 Social Dinner

Thursday June 6th

THEORETICAL SESSION

08.30

VIDEO PRESENTATION

Basic and advanced suturing techniques in different surgical settings: how to make it easier

09.30

Suturing lectures and video sessions

09.30

LIVE-SURGERY SESSION

From IRCCS SACRO CUORE DON CALABRIA HOSPITAL, NEGRAR DI VALPOLICELLA, ITALY

13.00

Lunch

LUNCHEON SESSION

KEYNOTE LECTURE

Neuropelveology: a new ground breaking area in medicine

14.00

18.30

SURGICAL VIDEO LIBRARY SESSION (Satellite Room)

14.00

18.30

HANDS-ON LAPAROSCOPIC SUTURING MASTERCLASS

- Pelvic trainer: stitching and knotting on models

VIDEO SESSION

- How to load the needle
- Running sutures
- Intracorporeal knotting techniques
- Knotting alternative techniques
- Rules & tips for the extracorporeal technique

14.00

18.30

DEATH FOR LIFE MARATHON: HANDS-ON SUTURING MASTERCLASS ON CADAVERIC SPECIMENS (Dissection Room)

TOPICS AND LEARNING OBJECTIVES

- Needle mounting and holding
- The choice of different sutures
- Intra-corporeal knotting techniques
- Extracorporeal knotting
- Vaginal suturing for hysterectomy
- Vaginal suturing after vaginal resection
- Uterine suturing for myomectomy
- Bladder suturing after bladder injuries
- Bladder suturing after bladder resection

Thursday June 6th

- Intestinal suturing after intestinal injuries
- Intestinal suturing after bowel shaving
- Vascular suturing after vascular injuries
- Diaphragmatic suturing after resection

18.30

Discussion, adjourn and conclusion

Verona, Italy

Bordering the river Adige, Verona is located on a hill in the heart of the province: one of the most important art cities in Italy and rich in a thousand-year-old history, Verona lies in the myth of Shakespeare's masterpiece.

Verona has been declared UNESCO World Heritage Site thanks to its intact urban layout and architecture which encompass different traditions and cultures of the past centuries: it is well-worth discovering its heritage, ranging from Roman and medieval ruins to Venetian and Austrian remains alternating with ancient palaces, squares, bridges and marvellous churches.

Verona hosts "Juliet house", a 16th-century building which, along with the Arena, is among its most famous attractions, though each alley and square has a fascinating history that originates in distant times.

As for as the amount quality and preservation of Roman antiquites, Verona is second only to Rome.

The Arena is the most famous symbol of the Roman period, a must-see for tourists from all over the world. Verona's majestic amphitheatre is a bright jewel which still produces emotions.

Castelvecchio, built on the shores of the Adige, is the largest medieval civilian building in Verona.

Nowadays, it houses the Museum of Ancient and Modern Art, boasting several noteworthy works of art belonging to the international Gothic and Renaissance.

"When he shall die, take him and cut him out in little stars, and he will make the face of heaven so fine that all the world will be in love with night".
(Shakespeare, Romeo and Juliet)



The Course Venue in Verona

The ICLO Training Center in Verona is fitted with six surgical suites of different sizes, comprising a total of 42 workstations. All suites are ideal for both teaching and surgical practice, each one of them being equipped with a changing room and a small conference room with direct access to the workstations.

Every workstation comes with a built-in video-camera to record training sessions and/or to project them, both within the room and, if desired, in other suites - as well as in the main room.

The staging of these suites and their deployment, as well as every other space in the ICLO Center, are instead for all medical field professionals, ranging from a single doctor to scientific societies, from doctors' associations to the healthcare industry. They are conceived to develop training and teaching projects and also to (confidentially/private) elicit testing of new techniques and/or technologies in the surgical field.

Conference Room

The Center hosts one main conference room that can host up to 90 people, providing great comfort to the entire audience. The room is equipped with the latest sound/video system and a control panel that allows users to activate bidirectional connections with each of the six surgical suites. This is meant to enable full interactivity between the different sites of the facility.

The IT staff will be present in the conference room at all times in order to provide assistance before, during and after each course/presentation. An interpreter's booth is also available.

How to get to Verona



The A4 Brescia-Padua motorway runs through the province of Verona, serving the city with the exits named Verona East and Verona South. Verona is also intersected by the A22 Modena-Brennero motorway. The access to the city centre and the circulation of vehicles is restricted to set times and special categories vehicles: it is a limited traffic zone (ZTL), equipped with electronic entry points to control the access of unauthorized vehicles.

Tourist coaches are required to show an entry ticket before entering the city (ZTL Bus) which only entitles them to drop off and pick up passengers.



The city's main railway station is Verona Porta Nuova, an important railway junction that offers several opportunities for those who wish to reach Verona by train. Another station is Verona Porta Vescovo, in the eastern part of the city. From Porta Nuova station, the city centre can be easily reached in 15-20 minutes on foot, or using public transportation, departing just outside the station.

The Valerio Catullo Airport is located 10 kilometers from the city centre. It is connected to the A4 (Sommacampagna exit) and A22 (Verona Nord exit) motorways. It offers direct flights to all the main Italian and international airports. It also offers connections to the city centre: shuttle service to and from Catullo Airport - Verona Porta Nuova station.





INFORMATION

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HONORARY PRESIDENT:

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