



European Society for Trauma and Emergency Surgery (ESTES)

Association sans but lucratif (ASBL)

www.estesonline.org

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Message from the Past President

The ESTES Brand

One thing that the past year has brought home to me is that ESTES is unique. It is a European society that encompasses the range of surgical activity from emergency surgery right through to elements of elective orthopaedics and in so doing, provides an integrated approach for the trauma and acute care surgical patient. ESTES could perhaps use the slogan “We are there for you when things go wrong”—if it did not sound too much as if it should belong to an insurance company or group of lawyers.

But that is only part of the picture. Wouldn't life be easier if you only had clearly defined emergency surgery or orthopaedic problems to deal with? You could have two separate societies—one that dealt with trauma and the other that dealt with emergency surgery. That was, of course, the situation ten years ago before the merger of EATES and ETS. Fortunately the founding fathers of ESTES had the foresight to realise that the world of trauma and emergency surgery is not simply black and white with everything neatly packaged and labelled, but that, particularly in Europe, it is a kaleidoscope of colours—always varying in intensity and definition depending on where you are. They recognised that to provide the best care to the trauma or emergency surgical patient we need to blend those boundaries, work towards common goals and help each other solve common problems.

The trauma or emergency surgery patient does not come neatly packaged. Injury and inflammatory mediators do not respect tissue boundaries or anatomical compartments. The reality of what trauma and emergency surgeons deal with in everyday practice is a continuum from skeletal trauma through visceral trauma to non-trauma emergency surgery.

Trauma and emergency surgery is not simply elective surgery performed out of hours. Like elective surgery, it requires a sound practical knowledge of anatomy and pathology, but what makes trauma and emergency surgery different is the importance of understanding physiology. Being able to correct the abnormalities that follow the systemic inflammatory response resulting from trauma, inflammation, sepsis or a combination of all three is vital for the care of the trauma and emergency surgical patient. If unchecked, this deranged physiology will lead to organ failure and death irrespective of the quality of operative surgical skills. Surgical critical care is therefore a fundamental part of trauma and emergency surgery and its importance is recognised by ESTES.

Trauma and emergency surgeons also deal with polytrauma both in civilian and military practice. Pre-hospital emergency care, both for the individual patient and the mass casualty incident, is an essential component of that. Such care can take

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place in a range of environments from the reasonably well-controlled to the austere or frankly hostile. ESTES is the only international society that caters for all these situations.

Providing an integrated approach for the trauma and acute care surgical patient is what ESTES does and this is what makes ESTES unique. This integration is achieved through active sections devoted to Emergency Surgery, Visceral Trauma, Skeletal Trauma and Sports Medicine, Polytrauma and Disaster and Military Surgery—all underpinned by an active Congress and educational programme. Courses on point of care ultrasound, management of mass casualty incidents and polytrauma developed under the umbrella of ESTES have been held throughout Europe for many years.

It is not just the patient that does not come neatly packaged, neither does the organisation of trauma and emergency surgical care in Europe. The European Union way of doing things is principally by directive rather than legislation. In essence a destination is set and it is left up to groups (countries in the case of the EU) to decide how they reach it. There is nothing new in this. It is the way that healthcare has evolved, particularly in relation to trauma and emergency surgery, for at least 200 years. As a result we have a patchwork of different systems throughout Europe ranging from the dedicated trauma or emergency general surgeon to the reluctant sub-specialist whose only commitment to trauma or emergency surgery is when on-call. ESTES is the specialist society for all who deal with trauma or emergency surgery.

About 20% of European countries have a highly specialised model for the provision of unscheduled surgical care. In this arrangement skeletal trauma is dealt with by orthopaedic surgeons, the acute abdomen and abdominal visceral emergencies by general surgeons (with the exception of urological problems that are dealt with by urologists), vascular injury by vascular surgeons, chest problems by cardiothoracic surgeons, head injuries by neurosurgeons, burns and significant soft tissue injuries by plastic surgeons, and intensive care by intensivists (members of a sub-specialty of anaesthesiology). This multidisciplinary approach can only work well if someone takes ownership of the patient and has sufficient knowledge of all the specialties involved to be able to lead and co-ordinate care. The only place where anyone can keep up to date with developments in the whole field of trauma and emergency surgery is ESTES.

In most of the remaining countries the organisation of emergency and trauma care is unique: no two countries have an identical system. ESTES is the only international society to support the needs of all those systems and facilitate their development.

We face the prospect of profound political change over the next 5 years. Will the European Union implode or emerge better and stronger? Whatever happens, we

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should continue to work together, sharing knowledge, experience and opportunities. We should build on the things we have in common and try to help each other to discover solutions to our common problems. If we do that we will ensure that in 10 years' time ESTES is even better and stronger than it is today.

I have had a wonderful year at the helm of this great society. I know that this would not have been possible without the help and support of the Executive Board, the active members of the Sections and the Society. I am particularly grateful for the work of Pol Rommens, who has just stepped down from the Board after 10 years of continuous service, and the efforts of Bogdan Diaconescu and Mircea Beuran without whom the fabulous Bucharest Congress would not have happened. I am confident that ESTES will continue to grow under the presidency of Marius Keel and wish him well for the coming year. It has been an honour and a privilege to serve you.

Thank you

Jonathan Tilsed
Past President
European Society for Trauma and Emergency Surgery

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Dear colleagues,

After *ECTES 2017* in Bucharest, Romania, we are now looking forward to *ECTES 2018* in Valencia, Spain, which will take place from May, 6–8, 2018.

Important dates to remember	
Monday, August 28, 2017 Start abstract submission	Friday, December 15, 2017 Notification of abstract acceptance
Friday, October 20, 2017 Deadline for abstract submission	Friday, February 16, 2018 Deadline for early bird registration fee, registration cancellation
Monday, November 27, 2017 Start online registration	Friday, April 20, 2018 End of regular fee
Sunday, May 6 – Tuesday, May 8, 2018 19 th European Congress of Trauma & Emergency Surgery	

The **abstract submission** starts on **Monday, August 28, 2017**.

All necessary information regarding topics and submission details can be found on the website: www.estesonline.org

A **Preliminary Scientific Programme** (including keynote speakers and first session details) will be available online by September 2017.

Sincerely,

The ECTES 2018 Organising Team
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Announcements

Upcoming related congresses & courses

8th World Congress of the Abdominal Compartment Society

Banff, Alberta, Canada

June 15–18, 2017

MUSEC – Modular UltraSound ESTES Course

Torremolinos, Spain

June 21, 2017

MUSEC – Modular UltraSound ESTES Course

Milton Keynes, United Kingdom

September 17, 2017

Workshop on Visceral Trauma – Definitive Surgery for Trauma Care

Graz, Austria

September 25–26, 2017

53. Jahrestagung der ÖGU

Salzburg, Austria

October 5–7, 2017

MUSEC – Modular UltraSound ESTES Course

Ourense, Spain

October 7, 2017

VI International Congress of the Polish Emergency Medicine Society

Lublin, Poland

October 18–21, 2017

DKOU 2017

Berlin, Germany

October 24–27, 2017

<http://2017.dkou.org/>

More congresses and courses to be found in the **ESTES events calendar** at

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