



# European Society for Trauma and Emergency Surgery (ESTES)

*Association sans but lucratif (ASBL)*

[www.estesonline.org](http://www.estesonline.org)

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## Message from the Editor-in-Chief of the European Journal of Trauma and Emergency Surgery

### ESTES goes International

Dear colleagues and friends,

The 4th World Trauma Congress in September 2018 in San Diego, CA, was an outstanding and successful event bringing all providers of trauma care together. Raul Coimbra leading the World Coalition for Trauma Care (WCTC) and Michael Rotondo presiding over the American Association for the Surgery of Trauma (AAST) enthusiastically organized that very fruitful and constructive meeting. Our Society, ESTES, was very present during numerous important sessions (e.g., master surgeons lecture, international sessions, trauma and emergency surgery, coagulation) with many active members over the days of the congress. It was clear that ESTES is recognized as representing Trauma and Emergency Care in Europe!



Fig. 1 World Coalition For Trauma Care

During the Board Meeting of the WCTC, the following future World Trauma Congress Meetings were set: Brisbane 2020 and Tokyo 2022. In addition, it is planned to work out a newsletter of the world coalition for trauma care, similar to ESTES NEWS to keep all trauma societies of the world informed and in the same boat.

In this respect it seems of interest that ESTES has members from 80 countries from all over the world and that ESTES meetings are attended by participants from over 60 nations every year. Moreover, members from all over the world are engaged in ESTES and their sections. Thus, we should further combine our efforts to advance trauma care and emergency surgery in Europe and stay in close contact with our international colleagues.

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The opening of ESTES from Europe to the world is also well reflected by the contributions and readership of the *European Journal of Trauma and Emergency Surgery* (EJTES). As indicated in the graph regarding the full-text downloads of the papers downloaded from the journal in 2017: 65% of the full-article downloads are from outside Europe—strong proof of our international recognition. Similarly, we received 61% of manuscripts from outside Europe in 2017 (cp. Fig. 2)

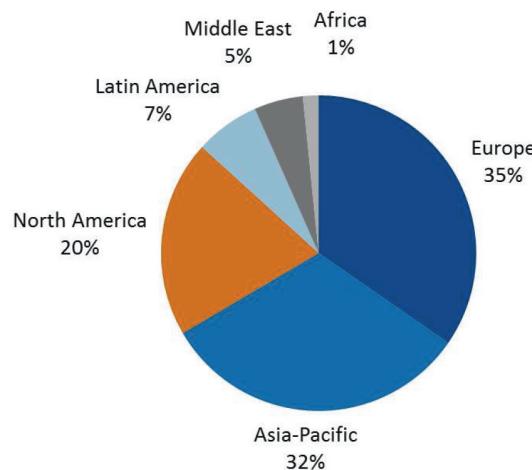


Fig. 2 EJTES fulltext downloads by geography (2017)

Although EJTES clearly has its *radix* and basis in Europe, we might as a consequence successively expand the editorial board by including more scientists and clinicians from over the world. The high—even varying—quality of trauma care in Europe as published in large parts in the journal is well received in many countries of the world. This might be of particular interest in countries with a high trauma load due to the local social, geographical circumstances. On the other hand, the readers of the EJTES will benefit from all approaches and experiences in trauma care and emergency surgery from other countries of the world, in part with much higher cases.

Lastly, I would like to take the opportunity to thank all members, who have contributed to the development of EJTES this year. In particular, and on behalf of my Co-Editors I would like to thank all authors for their qualified submissions, the Editorial Board and external reviewers for their ongoing engagement, knowing these tasks are mostly additional work during evenings and on weekends! In this line, I would like to encourage you to visit the EJTES homepage at Springer ([www.ejtes.springer.de](http://www.ejtes.springer.de)) where you can subscribe to the table of content alert to receive an e-mail as soon as a new issue is published online and to let me know your ideas or concepts for future Focus On topics.

I wish you all Merry Christmas and a healthy Happy New Year 2019

With best regards,  
 Prof. Dr. Ingo Marzi

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### Report of ESTES Congress Grant Winner Ernesto Barzola



Dear colleagues,

I am grateful for an excellent opportunity to visit the ESTES Congress 2018 that you kindly provided me. I obtained a very enriching experience during the above event, where the most outstanding internationally renowned experts shared their scientific and clinical achievements regarding trauma and emergency surgery.

I would also like to express my gratitude to the ECTES committee for selecting me as an ESTES travel grant winner.

On the first day, I attended a session dedicated to the prioritization strategy in the field of trauma management, during which Dr. Turegano presented the most effective pathway approaches that are to be applied in a patient with trauma. In his lecture, Dr. Demetriades demonstrated the indications for endovascular treatment in cases of the torso injuries such as blunt trauma of thoracic aorta, iliac and renal arteries. Dr. Puyana highlighted the differences between the penetrating and blunt trauma not only in the treatment aspect, but also with regard to the prehospital management. He also structured and presented the preventive measures that are to be applied to avoid the detrimental consequences of the above conditions.

Another session that I attended was focused on the management of the open abdomen; the chairman there was Dr. Leppäniemi. I was impressed by the data provided by the leading experts regarding various important topics such as complex reconstruction of the abdominal wall, the management of enterocutaneous fistulas and the optimization of the dynamic abdominal closure management. The use of negative pressure therapies, the surgical management of compartment syndrome and the technical considerations for the abdominal cavity closing were also discussed.

The keynote speech was given by Dr. Uranus and its main focus was the role of laparoscopy in trauma. Although there is not enough evidence for the wide application of the above technology in prospective randomized studies, it might be indicated in certain cases, for example, to reveal the presence of free intra-abdominal fluid where no evidence of solid organ injury on the control CT was found. Laparoscopy was also stated to be useful in cases of closed trauma with suspicion of intestinal injury, the penetrating trauma in stable patients, possible diaphragmatic laceration in an effort to avoid laparotomy.

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Another topic that called my attention was training in emergency trauma surgery and the need to look for alternatives to existing methods to provide more comprehensive education. In the point, I totally share the opinion of Dr. Marius Keel: "For acute care and trauma surgery you should be a generalist and for complex elective and definitive care you should be a specialist". Various important issues were discussed aiming to elaborate an adequate model in the acute care surgery, protocols, mentoring, training courses, and certification. The impact that a creation of the acute care surgery units could have was also delineated given the prevalence of surgical pathologies reaching up to 40% in the population. Its potential effect on the reduction of morbidity and mortality, the shortening of hospital stay may strongly contribute to the cost-effective management of any healthcare system.

It was very interesting to participate in the case scenario sessions face to face with the expert board. There the complex cases of severe trauma were discussed, and for me, it was one of the most valuable sources of experience. I hope this format of meeting will be also reproduced in the future congresses.

Other topics in which I was interested were dedicated to the use of ultrasound as a diagnostic tool in trauma and emergency surgery, for this reason I attended the **I**-Consensus meeting on ultrasound application in acute surgical diseases. The first issue discussed there was the use of ultrasound in acute diverticulitis with a sensitivity and specificity up to 90%. In the end of a session, according to the POCUS panel, the following consensus was reached: the use of ultrasound plays an important role in the diagnosis of uncomplicated acute diverticulitis with a high grade of recommendation. The role of ultrasound in the diagnostics of acute appendicitis and acute cholecystitis was also advocated, as well as the application of this tool in the treatment of shock.

I participated in the congress with two poster presentations. The first one was entitled "Management of perforated tumor of ileum with respect of oncological principles"; it was a case report of a perforated GIST tumor of the ileum. My principal purpose was to highlight the important role of the emergency surgeon in the above case, since a complete extirpation of the tumor with an adequate surgical margin strongly affects the prognosis of patient considering the fact that perforation of a lesion had been proved to be a factor of poor prognosis. Regarding this, an adjuvant treatment with imatinib was decided to be mandatory.

The next report I presented was a poster presentation of a rare pathology case, namely gallbladder volvulus, when a thorough consideration of the surgical technique and the respect of critical view of safety are of utmost importance to avoid the bile duct injuries.

I would like to conclude that ECTES 2018 was a very insightful event with a high scientific level since within it I was able to enrich my knowledge in trauma and emergency surgery that will undoubtedly have a positive impact on the care of my patients.

Finally, I would like to reiterate my acknowledgement to the whole organizing committee of the 19th ECTES.

Sincerely,  
Ernesto Barzola

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### DO YOU ALSO WANT TO BE CONGRESS GRANT WINNER?

Are you going to attend the 20th European Congress of Trauma and Emergency Surgery taking place in Prague, Czech Republic (May 5–7, 2018)?

Would you like to win a travel grant of EUR 1,000?

Do you fulfill the criteria?

If your answer to all questions above is „Yes“, seize this chance and apply now!

The prerequisites are:

- Age below 35 (date of congress is decisive)
- Specialist or Specialist-in-Training in Trauma and Emergency Surgery
- Submission and presentation of an accepted abstract
- Documented scientific activities
- Submission of the required documents (letter of intent, CV, list of publications, letter of recommendation)
- Short written report about the congress after the event
- Individual member of ESTES or intention to become an individual member of ESTES

The application form can be downloaded on the ESTES website (Education) after notification of accepted abstracts has been sent out.

To apply for a grant, please return the filled-out application form and all required documents to the ESTES Administrative Office: [office@estesonline.org](mailto:office@estesonline.org)

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### **Award to Sten Lennquist by the Regional Government of Madeira Island, Portugal**

Prof. Sten Lennquist, one of the founders of ESTES, was recognized by the Regional Government of Madeira Island, Portugal, for his contribution to the organization of the response to disaster and catastrophe situations.



This distinction was the initiative of the current Secretary of Health, Pedro Ramos, surgeon and ESTES member.

The ceremony was held on 17 October and was attended by the representatives of the Portuguese institutional members of ESTES, SPC and ALTEC-LATES, respectively João Pimentel and Carlos Mesquita, also President Elect of ESTES.



Prof. Sten Lennquist with Miguel Albuquerque, the President of the Regional Government of Madeira Island.

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## Announcements

### Upcoming related congresses & courses

#### **MRMI Basic International Course**

February 21–23, 2019  
Monaco

#### **MRMI Basic Course**

March 13–15, 2019  
Stockholm, Sweden

#### **MRMI Instructor Course**

March 12–15, 2019  
Stockholm, Sweden

#### **Emergency Surgery Course (ESC)**

March 18–19, 2019  
Graz, Austria

#### **Workshop on Visceral Trauma—Definitive Surgery**

September 16–17, 2019  
Graz, Austria

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