

NEWSLETTER

THE EUROPEAN SOCIETY OF THORACIC SURGERY

March
2000



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Members will receive the following:

1. European Journal of Cardio-Thoracic Surgery, published by Elsevier
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5. Reduced conference fees at the annual ESTS meeting
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NOTES FROM THE EDITOR'S DESK

There have been several exciting developments since the last Newsletter, the most significant of which have been the moves towards closer ties between the European Association for Cardio-Thoracic Surgery and the European Society of Thoracic Surgeons. For some time now there has been great concern that the annual conferences of the two societies have been held less than a month apart. Furthermore, quite a few members of the ESTS were already members of the EACTS. There was a growing feeling that the two annual meetings could be held in the same venue as a back- to- back meeting, or as a joint meeting. Preliminary discussions at the ESTS Council were followed by an approach to the EACTS Council to explore a possible collaborative solution to this. Discussions between members of both Councils took place in November, and a mandate has been reached to work out the detailed arrangements for such a joint congress in Lisbon in 2001. This will be a joint meeting and not a back-to-back one. The congress will not involve a greater number of days as the proceedings will be increased by the addition of an extra parallel session to the standard format that the EACTS normally adopts. This will result in a considerable increase in the Thoracic sessions compared to the programme that each Society has put on in the past. Further information will be forthcoming in the next issue of the Newsletter.

Whilst on the matter of annual conferences, the 7th Conference on Thoracic Surgery held in Nancy in 1999 was a great success, but the Local Organizing Committee has reported a deficit which has been made good by a donation from the Lorraine Regional government and the rest by the ESTS.

The 8th Conference on Thoracic Surgery is to be held at the Commonwealth Institute in London in November 2000. Knowing the popular attractions that London has to offer, we hope that the attendance on this occasion will result in a profit to the Society. A separate announcement for the London Conference appears elsewhere in the Newsletter.

It has been a noticeable feature of some of the past annual conferences that a percentage of the selected papers are

not presented by their respective authors who fail to show up. This is a serious matter as it deprives others of an opportunity to present their work to the Society. The Council has discussed this matter and has decided that failing to show up will incur an automatic penalty of being black-listed for two consecutive years. A letter will be sent by the secretary to the first author, with a copy to the head of department.

The second major subject of collaboration that has occurred recently between the EACTS and the ESTS has been the formation of the Young Thoracic Surgeons Group chaired by Dr. Klepetko. This group will take on the task of seeing European Thoracic Surgery into the twenty-first century. Any young thoracic surgeon who wants to be involved in the activities of the group should contact Dr. Klepetko directly or through the secretariat.

The Editorial Office of the European Journal of Cardio-Thoracic Surgery is currently reviewing all the papers that were received after the Nancy meeting. Prospective authors of papers at the London conference are requested to study the guidelines to authors printed in each issue of the journal and to conform to these strictly if they hope to have their manuscripts accepted. At the London conference there will be an Editorial Desk adjacent to the Secretariat and authors of selected papers are requested to submit their manuscripts to the Editor on the day of presentation or before.

The figures for paid-up membership are currently causing some concern to the Council in general and the treasurer in particular. When the Society entered into a contract with Elsevier for collaboration with the EJCTS it was expected that the membership would be in the region of 400 based on numbers subscribing in Slovenia. This figure has not been realized since. The Society is committed to purchasing the said number of issues each month, and unless our paid-up membership reaches this figure the finances of the Society are at risk. May I take this opportunity to urge all the National Regents to seek new members and to approach members of allied industry for corporate membership. The continuing success of the Society depends on a thriving paid-up membership.

8Th European Conference Of General Thoracic Surgery London, 1-3 November 2000

The Local Organising Committee has been greatly encouraged by the excellent response we have had to the First Announcement of the "London 2000" Conference. Many members and potential members of the ESTS have already returned pre-registration forms expressing their intention to attend this year's conference.

As most of you already know, the venue for the 2000 conference will be the Commonwealth Institute, an internationally renowned conference centre in Kensington, at the heart of London. It is ideally situated for transport, shopping (for those who have time!), museums, art galleries and, of course, hotels.

The 2nd Announcement is in the final stages and will be sent to you very shortly. It will contain all the relevant information you need regarding the time table for Abstracts, both by mail and electronic submission, an outline of the scientific programme, details of accommodation and registration forms.

The deadline for submission will be at the end of May. There is little time and we expect a large number of submissions. So please start preparing your papers immediately! The second announcement will be the final notification for abstracts.

Ahead of your copy of the 2nd Announcement I would just like to take this opportunity to remind you all of a few particular points that we feel you be interested in regarding this years conference.

The Scientific Programme as always will be the main focus of the conference. The plenary session on the first afternoon is to be designated the "Presidential Plenary Session". This will feature the papers selected by the scientific committee as the best oral presentations. This year we are very pleased to announce the added incentive of the Brompton Prize, which will be awarded, to the best presentation during the Presidential Symposium and carries a financial award of 1000 Euros.

The next two days will each start with a Sponsored Educational Symposium, followed by presentations along the same theme. The Thursday Symposium will be based on the subject "The Interface between Volume Reduction Surgery and Transplantation" and we are very pleased to confirm that Dr Joel Cooper will be coming over from America as one of our international speakers. The Friday symposium will discuss "Pre-invasive Changes in the Airway and Oesophagus: Molecular Biology, Detection and Prospect for Treatment" and again the session will include internationally renowned speakers. There will be ample opportunity to present scientific data with parallel sessions running in the Auditorium and the Breakout out room on both the Thursday and the Friday. The 2nd Announcement will contain the time table for the submission of abstracts. This year we will be accepting electronic submission via CTSNET. We hope as many of you as possible will take advantage of this facility to submit electronically via the web page. Authors may indicate their preference for oral, poster or video presentation. However, to ensure a cohesive programme the final decision on the format of the presentation will be made by the scientific committee. We are expecting a large number of high quality papers, spurred on by the financial incentive and kudos of the Brompton Prize. The scientific committee will try to include as many presentations as possible to ensure that the conference is an educational and enlightening experience for all the participants. So please prepare and submit your abstracts as early as possible.

The conference again will be accompanied by a large exhibition and the stands are being taken up by some of the major names in the area of thoracic surgery, of course, we hope that it will be an integral part of the Conference proceedings. All the delegates are free to attend the Exhibition and view the latest innovations in the field. If any potential exhibitor is interested in obtaining a stand they should contact the Conference Secretariat at the address below as soon as possible.

London is known as one of the most exciting capital cities in Europe and a renowned cultural centre. Our Social programme will reflect that, and give ample opportunities for our members and accompanying persons to see London

and explore informally. The Opening ceremony and Welcome reception will take place on the first evening of the conference following the Presidential symposium. All registered delegates and accompanying persons are free to attend to meet friends in an informal atmosphere.

Those of you who attended Nancy will remember the excellent Gala Dinner that we all enjoyed. That will be hard to beat. However, we have decided on a truly unique venue for this year's Dinner, to be held on the Thursday evening. The Organising Committee has gone somewhat "overboard" and we hope you will join them! The Dinner will be held on London's newest river cruiser, the 184 feet long "Symphony". This floating glass palace will allow you to see the sights of London whilst cruising along the Thames, enjoying dinner and chatting with friends. From the comfort of this glass-roofed vessel you will be able to see the Houses of Parliament, Big Ben and St Paul's Cathedral illuminated against the night sky. After dinner those who feel energetic can enjoy a dance as we ease under Tower Bridge on our return to Embankment pier. There is no better way to see London than from the River.

The social committee consists of the wives of the Organising Committee. They will try to ensure that accompanying guests will have an enjoyable and entertaining visit to London. There will be a Hospitality Area within the Commonwealth Institute throughout the Conference. Here the accompanying guests will have the opportunity to relax and enjoy some refreshments whilst delegates are in sessions. We hope they will meet here, and make use of this area to network and decide their daily activities. The Social committee ladies will be on hand to give local advice on travel plans and itineraries. There are some activities planned including Walking Tours with knowledgeable professional guides and a visit to the famous reconstruction of Shakespeare's Globe theatre. However, we know most of you will just want to walk around London and make your own plans.

Many people have expressed concern that accommodation in London might prove expensive. We are delighted that CASIL have been able to secure rooms at over a dozen hotels, with prices that are suitable for all budgets. The

hotels range from 2 Star up to 5 Star and are all within a 15 to 20 minute stroll from the Institute. Such bargains will soon be snapped-up, so we would encourage you all to submit your registration forms as soon as possible to avoid missing out on your hotel preference.

The members of the organising committees and members of the Council of the European Society Thoracic Surgeons very much look forward to meeting you in London this November. If you have any queries please do not hesitate to contact the Conference organisers, CASIL, or the Executive secretariat. Their contact details are given below.

Peter Goldstraw, Chairman,

On behalf of the Local Organising Committee and the ESTS

8th European Conference on General Thoracic Surgery

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THORACIC SURGERY: ITS DEVELOPMENT AND ROLE TODAY AND FOR THE FUTURE

Prof. Ingolf Vogt-Moykopf, MD

Thoracic surgery has existed as long as medicine and surgery in their medieval forms. If we take a look back at the second half of the nineteenth century when rapid strides were made in surgical progress through the two major catastrophies haunting mankind, wars and epidemics of tuberculosis, we see the names of great surgeons linked with the developments of surgical procedures. These men did not work alone but were supported by numerous colleagues in harnessing the bright ideas into practical techniques. Drainage of empyema and wedge resections were widely practised during the latter years of the nineteenth century., to be followed by major lung resections such as pneumonectomies and lobectomies as soon as endotracheal anaesthesia had been evolved after the initial forays into the negative pressure chamber and the positive pressure chamber in the early years of the twentieth century. During the years of the World Wars progress in all peacetime surgery became stagnant. From about 1947 the first reports on bronchial and tracheal surgery began to appear, followed closely by conservative parenchymal (sleeve) resections. This meant that the quality of life of the tuberculous patient could be preserved without having to resort to gross loss of functional pulmonary tissue. With the increasing proportion of oncological pulmonary surgery, it was now possible to avoid pneumonectomy and to resort to multiple conservative resections for metastases.

Pulmonary and pleural tuberculosis initiated the evolution of surgery of the chest wall and pleura. Centres began to develop in Europe specialising in the management of tuberculosis, and located in surroundings conducive to healthy living. This meant that these centres were far removed from busy city hospitals and university based hospitals. Research and scientific progress was slow in these centres because of this detachment from universities. With the advent of antibiotics and anti-tuberculous drugs the need for tuberculosis surgery began to recede, leading

to closures of the majority of these specialised centres. Beginning in the fifties and continuing into the later years, specialties began to develop both in medicine and surgery, e.g. cardiology, angiology and gastro-enterology. These new disciplines arose parallel with surgical ones, co-operating closely with each other. Such developments were however in the university based hospitals, leaving pulmonology and thoracic surgery isolated.

It was a logical step from there that cardiology and cardiac surgery should branch away from pulmonary surgery and make rapid progress with the increasing demands of the general public. Young and emerging surgeons were drawn away from thoracic surgery towards cardio-vascular surgery. Specialised techniques were being lost to the world, techniques that are increasingly required in the context of modern immunosuppressive diseases as well as chronic infective diseases in the developing world. In the eighties there has been a resurgence of the interest in thoracic surgical procedures amongst internists, radiologists and trauma surgeons. The rapid advances in endoscopic technology and immunology, have opened up new fields such as video-assisted thoracic surgery, lung volume reduction surgery and transplantation.

These increasing demands of thoracic surgery have to be voiced openly in the corridors of power by a representative body.

This need was recognised late in the eighties, culminating in the formation of the European Society of Thoracic Surgeons. The Society held its first International Conference in Heidelberg in November 1993, the eighth such Conference being scheduled to be held in November 2000 in London.

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Figure 1: The inaugural Conference on Thoracic Surgery was held in Heidelberg in November 1993. The photograph shows some of the founding members.



Figure 2: Photograph shows some of the large number of delegates who attended the Gala Dinner in Nancy in October 1999. The venue was the Lorraine Council Hall in Stanislas Square.