

INTERNATIONAL CONFERENCE FECAL INCONTINENCE AND OBSTRUCTED DEFECATION re-Congress Courses: lagnostics in Pelvic Floor Disorders lanagement of Anal Fistulas Igh Resolution Anoscopy in diagnosis of AIN and Anal Cancer erianal Crohn's Disease

Rome, October 11-13, 2020

# PRELIMINARY PROGRAM

# October 12, 2020

8.00-8.10 Welcome and Introduction

## 8.10 - 9.20 Session 1

# **FI Epidemiology and Diagnosis**

- Epidemiology and diagnosis of FI
- How to measure the FI severity?
- Double fecal/urinary incontinence: condition for a MDT

#### Discussion

# 9.20 - 12.10 Session 2

# FI Treatment (1) - From Conservative Management to Nerve Stimulation

- Conservative management of FI: when primary approach? When supportive treatment?
- Pelvic floor rehabilitation in FI: principles and indications
- The agony of sphincteroplasty: is it justified to abandon it?
- How to avoid a failure of sphincteroplasty

#### Coffee break

- · Sacral nerve stimulation in FI: the best indications today
- Different ways of nerve stimulation for FI: are they equally effective than SNS?
- News in the pelvic floor nerve stimulation

#### Discussion

# 12.10 - 12.40

# **Best Oral Presentations (part 1)**

- Selected Oral Presentation 1.1
- Selected Oral Presentation 1.2
- Selected Oral Presentation 1.3

Lunch

## 13.30 - 14.00

#### Lecture:

Status-of-art of FI treatment: progression or regression?

# 14.00 - 16.45 Session 3

# FI Treatment (2) - Low and High Severity FI and Special Conditions

- When FI treatment can be easier and when more challenging?
- SphinKeeper: a safe procedure with great potentials
- Severe FI: are we raising our hands today?
- Current efficacy of different options in treating FI
- FI in treating perianal fistulas
- FI after anterior resection of the rectum
- Prevention of LARS: Is TaTME better than traditional low anterior resection?
- Illusions and delusions for patients with FI
- Future in the management of FI

Discussion

## 16.45 - 17.15

# **Best Oral Presentations (part 2)**

- Selected Oral Presentation 2.1
- Selected Oral Presentation 2.2
- Selected Oral Presentation 2.3

## 17.15 - 18.00 Consultant corner 1

**Therapeutic integration in FI** 

## October 13, 2020

## 8.15 - 10.30 Session 4

# **ODS Epidemiology and Diagnosis**

- How pelvic floor anatomy can influence management of disorders
- Clinical assessment and classification of patients with ODS: is it only a matter of experience?
- ODS symptoms and anatomical abnormalities: which first? Modern answers to an old question
- FLuro, MRI and Echo defecography: can their use and interpretation templates for ODS be standardized?
- Radiologic prognostic factors in the assessment of ODS
- ODS: a "double-meaning" syndrome
- Severity scores and QoL assessment: how can they influence the ODS management?

Discussion

Coffee break

#### 11.00 - 11.30

#### Lecture:

ODS management: A "holistic" approach to an "all-in-one" condition

## 11.30 - 15.00 Session 5

# **ODS Treatment (1) - Different Approaches to Choose**

- Conservative management of ODS: when and how?
- Milestones and pitfalls of surgical approach to ODS
- Transvaginal approach to rectocele: why, when and how?
- I would prefer transanal approach: why, when and how?
- I would prefer abdominal approach: why, when and how?

Lunch

- Use of meshes in treating ODS
- Pros and contras in open, laparoscopic, robotic abdominal surgery
- POPS ± Transanal Mucosal Rectopexy: strengths and results
- Management of pelvic organ prolapse: MDT does it better! Is it true? When applicable?

Discussion

#### 15.00 - 15.45 Consultant corner 2

Management of FI-ODS Coexistence

# 15.45 - 17.15 Session 6

# ODS Treatment (2) – Prevention and Management of Complications and Outcome Predictive Factors

- Complications of abdominal approach to ODS: how to avoid and how to eliminate?
- Complications of transanal approach to ODS: how to avoid and how to eliminate?
- How much do complications affect the choice of ODS treatment?
- Positive and negative predictive factors of therapeutic success
- Investigation and management of the patient with persistent ODS after surgery

Discussion

## 17.30 Closure

#### FACULTY

1. ABBAS M.A. - U.A.E. 2. ADAMINA M. - Switzerland 3. BIONDO S. - Spain 4. BORDEIANOU L. - USA 5. BRESLER L. - France 6. CAMPAGNA G. - Italy 7. CHRISTENSEN P. - Denmark 8. D'HOORE A. - Belgium 9. DIOMEDE F. - Italy 10. ERCOLI A. - Italy 11. ESPIN E. - Spain 12. FALLETTO E. - Italy **13. FAUCHERON J.L. - France** 14. GAGLIARDI G. - USA 15. GIANFREDA V. - Italy 16. HAHNLOSER D. - Switzerland 17. ISBERT C. - Germany **18. JONES O. - UK** 19. KNOWLES C. - UK 20. LEHUR P.A. - France 21. LINDSEY I. - UK 22. LUNDBY L. - Denmark 23. MATZEL K. - Germany 24. MUNOZ-DUYOS A. - Spain 25. MURPHY M. - USA 26. NALDINI G. - Italy 27. O'CONNELL P.R. - Ireland 28. PARELLO A. - Italy 29. PERSIANI R. - Italy 30. RATTO C. - Italy 31. SCHERER R. - Germany 32. SICA G. - Italy 33. SILERI P. - Italy 34. SOLIGO M. - Italy 35. SPINELLI A. - Italy 36. TSARKOV P. - Russia 37. TULINA I. - Russia 38. VISCARDI A. - Italy **39. WARUSAVITARNE J. - UK** 40. YAMANA T. - Japan