

SURGERY AND TRANSPLANTATION

July 22-23, 2019 | Brussels, Belgium

SURGERY CONGRESS 2019



SCIENTIFIC TRACKS & ABSTRACTS DAY 1



DAY 1 SESSIONS JULY 22, 2019

Plastic Surgery | Pediatric Surgery | Oncology and Surgery | General Surgery | ENT Surgery | Abdominal Surgery | Trauma Surgery | Transplantation | Oncology

SESSION CHAIR

Walid Odeh German Board in Oral Implantology, Germany

SESSION INTRODUCTION

Title:	Difficult cases and their clinical solution
	Walid Odeh, German Board in Oral Implantology, Germany
Title:	Curative medical treatment for acute appendicitis without surgical appendicectomy
	Diaa Eddin Mustafa Jaber, Jordan University Hospital, Jordan
Title:	Induction of hypometabolism as a strategy to minimize renal ischemia and to enhance transplant tolerance
	Thambi Dorai, New York Medical College, USA
Title:	Evaluation of type I tympanoplasty in children in upper Egypt
	Essam Ali Abo El-Magd, Aswan University, Egypt
Title:	Hepatic artery pseudoaneurysm, bronchobiliary fistula in a patient with liver trauma
	Jha Prabhat, Alka Hospital Private Limited, Nepal
Title:	Impact of nutrition on complications after abdominal surgery
	Bharathi Akula, Jaslok Hospital and Research Center, India
Title:	Establishing a trauma registry: Quality assurance for trauma care
	Krongdai Unhasuta, Bangkok Dusit Medical Services Public CO. Ltd, Thailand
Title:	GH-method: Methodology of math-physical medicine
	Gerald C Hsu, EclaireMD Foundation, USA
Title:	Hypertension Risk from Iron Brake Particulate Matter
	William J Rowe, University of Toledo Medical Center, USA



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Walid Odeh, Adv Surg Res 2019, Volume 3

DIFFICULT CASES AND THEIR CLINICAL SOLUTION

Walid Odeh

German Board in Oral Implantology, Jordan

A uthor believe that an orthodontist is not only a specialist dentist; he must have knowledge and interesting in art as dentistry is not about teeth treatment but also aesthetic of the face to be a successful orthodontist because science has no end. In some clinical cases in our daily practice we might face bone deficiency to replace missing teeth with dental implants instead of doing second surgery and bone augmentation we can be more conservative depending on orthodontic means such as extrusion of hopeless teeth in other cases we can use mini implants to adjust complicated orthodontic cases and surgical cases such as skeletal open bite or interocclussal space deficiency. This lecture is for Implantologist, Orthodontist and General practitioner. In this lecture he will talk about clinical cases to show the interrelation between ortho, implant and aesthetic dentistry and aesthetic medicine (Botox and Filler) solving clinical cases with no surgery. It's for specialist dentist and general practitioner. Cases in the lecture will cover extrusion of hopeless anterior centrals to correct bone level before replacing them with dental implant instead of bone augmentation; to gain more interocclussal space by intrusion of opposite posterior teeth; to correct skeletal open bite by using mini implant instead of orthognathic surgery; using mini implant to align tilted teeth to provide space for implant or bridge and some cases about gum smile treatment by mini implant and Botox beside some cases about aesthetic dentistry.

BIOGRAPHY

Walid Odeh has completed his BDS from Nisantas Ozal Yuksek Okulu, Marmara University, Turkey. Beside that he has a Master's degree in Orthodontics from Baghdad University. He is a Fellow of ICCDE (International College of Dental Education). He is a member of International Congress of Oral Implantologist (ICOI) ; American Academy of Implant Dentistry (AAID); Austrian, Turkish Jordanian and Egyptian Implant Association; European Esthetic Association; World Federation of Orthodontics (WFO); Arab Orthodontic Society (AOS) ; German Implant Association (DGZI); American Dental Association (ADA) and; American Academy of Aesthetic Medicine (AAAM). He is treating so many cases of TMJ disorder and gummy smile by Botox, besides participating in many international conferences as a Lecturer in many countries like USA, Germany, Jordan, Taiwan, Hong Kong and many Arab countries.

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Diaa Eddin Mustafa Jaber et al., Adv Surg Res 2019, Volume 3

CURATIVE MEDICAL TREATMENT FOR ACUTE APPENDICITIS WITHOUT SURGICAL APPENDICECTOMY (JABER MANEUVER)

Diaa Eddin Mustafa Jaber and Mustafa Jaber

Jordan University Hospital, Jordan

Clinical & Pathological Evaluation: Acute abdomen with a mixture of modern radiographic images, diagnostic laboratory investigations and clinical observation such as (McBurney's triangle manifestations with rebound tenderness). All these signs suggest firmly acute appendicitis with mucosal viral or bacterial infection within the narrow lumen of appendix leading to luminal obstruction and this leads to increase the mucosal secretions and inflammatory exudates which increase the intraluminal pressure obstructed lymphatic drainage. Edema and mucosal ulceration develop with bacterial transudation to the submucosa. Resolution may occur at this point either spontaneously or in response to antibiotics.

Progressive Complications: The condition may progress, further distention of the appendix may cause venous obstruction leading to ischemia of appendicular wall and this leads to more bacterial invasion in muscularis propria and submucosa producing acute appendicitis. Ischemic necrosis of appendix may produce gangrenous appendicitis with free bacterial contamination of the peritoneal cavity and greater omentum and other complications such as peritonitis, appendicular abscess, gangrenous appendicitis with perforation etc. Etiology (Predisposing factors) obstruction of the appendiceal orifice by faecolith (Composed of fecal material, calcium, phosphate, bacteria and epithelial debris). Rarely a foreign body is incorporated in faecolith such as grapes, apple, chili, orange, sesame and or guava seeds etc. Fibrosis, parasites (Particularly oxyuris vermicularis) and carcinoma of the caecum.

Traditional Treatment: Till now appendectomy is the first line treatment of appendicitis as all medical references claims.

Conclusion: In the last 10 years, following a deep understanding of the onset of appendicitis and the whole process of complications, author tried certain steps of treatment (Jaber Maneuver) for about 300 patients and a all of them resolve in his private clinic without any surgical intervention with a 100% ratio of success (Males and females of different ages).

BIOGRAPHY

Diaa Eddin Mustafa Jaber practiced medicine as a general practitioner since 1976, he was born in Palestine on 1947 and graduated from the faculty of medicine– Cairo University on 1975 with MBBCh Degree in medicine and became a consultant in modern medicine on 1985. He holds many certificates of completion in training programs by the Jordanian Medical Council (JMC) and foreign medical establishments in seven different topics. He has over than 28 researches and discoveries in medicine about Alopecia totalis, autism, deaf-mutes, cerebral palsy, atrophy and demyelination, scleroderma, hormonal deficiency (AMH), infantile uterus, pinpoint ext., ovarian cysts and fibroids treatment without surgery, elevated testes treatment without surgery. He attended and participated as a speaker in some medical international congresses like Cleveland clinic foundation about minimally invasive valve surgery, the 1st Mediterranean Congress of sexual dysfunction in Cairo, In XV World Congress of Sexology in Paris and Heart beat international program for international accurate ECG with modern communication methods and value-added programs of dermatology (VAPs –D) Pfizer in Egypt.

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Thambi Dorai et al., Adv Surg Res 2019, Volume 3

INDUCTION OF HYPOMETABOLISM AS A STRATEGY TO MINIMIZE RENAL ISCHEMIA AND TO ENHANCE TRANSPLANT TOLERANCE

Thambi Dorai, Bobby Alexander, Andrew Fishman and Michael Grasso

New York Medical College, USA

or many mammals, survival during winter months is a formidable challenge because of severe cold environ-F mental temperatures and very limited food availability. As part of their survival strategy, hibernating animals (i.e. bears, ground squirrels) endure winter by hibernating. Hibernation is an altered physiological state which is marked by a characteristic lowering of body temperature and extreme metabolic rate depression. During this period, their heart rate and blood flow may decrease to 1/30 and their oxygen consumption to 1/100 of their respective euthermic levels. Even though these physiological parameters mimic conditions of ischemia, their organs, particularly their brain, heart, liver and kidneys do not show any detrimental effects of severely reduced blood flow when these animals come out of hibernation. These adaptation as well as pre-conditioning mechanisms has been the subject of intense studies in recent years. Several novel strategies to induce a hibernation-like state in non-hibernator model systems like mice have been reported. Author investigated the pre-conditioning effect of administering 5'-Adenosyl Monophosphate (5'-AMP) to mice to create a state of hypometabolism. This hibernation-like state is used to study its protective effect on a subsequent renal ischemic episode. The results show that inducing a hypometabolic state in non-hibernators such as mice can be used as a novel strategy to reduce the severity of renal ischemic damage as measured by several accepted parameters. Perfecting this technique of creating a hibernation-like state in higher animals and in man may pave the way to increase the warm ischemia time in renal reconstruction and transplantation surgeries while at the same time preserving global renal function.

BIOGRAPHY

Thambi Dorai is currently working as a Research Professor at the Urology, Biochemistry and Molecular Biology Departments of the New York Medical College, New York. Research interests include molecular mechanisms of urological malignancies such as prostate, kidney and bladder cancers and the role metabolism plays in cancer progression and metastasis and cancer specific signaling pathways. Other research projects include the metabolic pathways that are deranged in sepsis, renal ischemia and metabolic manipulation strategies to enhance transplantation tolerance by educating macrophages and reducing their inflammatory signaling. Such molecular approaches would be beneficial in renal and other reconstruction surgeries in the future.

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Essam Ali Abo El-Magd et al., Adv Surg Res 2019, Volume 3

EVALUATION OF TYPE 1 TYMPANOPLASTY IN CHILDREN IN UPPER EGYPT

Essam Ali Abo El-Magd and Karema M Sobhy

Aswan University Hospital, Egypt

Objective: This study was undertaken to evaluate the surgical outcome of type 1 tympanoplasty in selected cases of children with tympanic membrane perforation and assess factors influencing their outcome.

Subjects & Methods: The study includes a total of 82 children of age group 7 to 14 years who underwent type 1 tympanoplasty in Aswan University hospital during January 2014 to August 2016 after approval from Aswan Faculty of Medicine Ethics Committee. The patients were divided into two groups, group I of 30 cases aged from 7 to 10 years and group II of 52 cases aged from 11 to 14. Patients with cholestatoma, ossicular chain pathology, previous tympanic surgery or Eustachian tube pathology were excluded from the study.

Results: In their study the overall success rate was 66 cases out of total of 82 cases (80%). The success rate was higher in group I (83.3%) than in group II (78.8%) but the difference was not statistically significant. In terms of prognostic factors, they observed a statistically significant association between the presence of a discharging ear and a poor outcome (P<0.001), also there was significant association between duration of discharge and poor results (P<0.01).

Conclusions: The age of the patients, size and site of perforation, prior adenoidectomy or adenotonsillectomy, do not significantly influence the post-operative outcome. Although tympanoplasty is less successful in bilateral perforation, but this is not of significant value.

BIOGRAPHY

Essam Ali Abo-El Magd is an expert in ENT surgery. After completion of his MBBCH Degree, he completed his Master Degree in Otolaryngology and MD in Otolaryngology. Now he is working as an Assistant Professor of Otolaryngology at Aswan University, Egypt.

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Jha Prabhat et al., Adv Surg Res 2019, Volume 3

HEPATIC ARTERY PSEUDOANEURYSM, BRONCHOBILIARY FISTULA IN A PATIENT WITH LIVER TRAUMA

Jha Prabhat, Joshi Bijendra Dhoj and Jha Binit Kumar

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Background: Bronchobiliary fistula and hepatic artery pseudoaneurysm are rare complications of hepatic trauma. There are isolated case reports for both pseudoaneurysm and bronchobiliary fistula following hepatic trauma but there aren't reports of both conditions developing in a single patient.

Case presentation: This case describes an 18 year old Hindu male who developed right hepatic artery pseudoaneurysm and bronchobiliary fistula following blunt abdominal trauma. Patient was managed with exploratory laparotomy followed by coil embolization and endoscopic retrograde cholangiopancreatography stenting respectively.

Conclusion: Rare complications of liver trauma include pseudoaneurysm and bronchobiliary fistula. These complications can rarely co-exist in a single patient.

BIOGRAPHY

Jha Prabhat is a Consultant General Surgeon currently working In Kathmandu, Nepal. He completed his education in Nepal and wants to develop the surgical field further in the country.

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Bharathi Akula et al., Adv Surg Res 2019, Volume 3

IMPACT OF NUTRITION ON COMPLICATIONS AFTER ABDOMINAL SURGERY

Bharathi Akula, Sanjay Nagral and Nilesh

Jaslok Hospital and Research Centre, India

The WHO cites malnutrition as the greatest single threat to the world's public health. Malnutrition was found to be more rampant among the complicated cases dealt within the GI surgery unit in Jaslok hospital, Mumbai and the patients were definitely found to have a higher complication rate. This study was undertaken to assess the effect of pre-operative nutritional status on the post-operative complications. All patients that were operated in the department during May 2013-May 2015, a total of 130 patients were included in the study. The parameters assessed were Body mass index, tissue skin fold thickness, mid arm circumference, absolute lymphocyte count, serum albumin, subjective global assessment. It was found that on an average 26.5% patients were malnourished. The incidence of complications was 33% (n=43). Chi-square test was used to analyse the data. It was found that absolute lymphocyte count, subjective global assessment and serum albumin were significantly related with the post-operative complication (p <0.05). There was a significant increase in the risk of complications amongst the malnourished.

BIOGRAPHY

Bharathi Akula is a trained as general surgeon and has specialised in surgical gastroenterology from Mumbai, India. She has a special interest and upper GI and hepatobiliary surgery. She is currently working in the United Kingdom to further her experience in surgical gastroenterology.

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Krongdai Unhasuta et al., Adv Surg Res 2019, Volume 3

ESTABLISHING A TRAUMA REGISTRY: QUALITY ASSURANCE FOR TRAUMA CARE

Krongdai Unhasuta, Wittaya Chartbunchachai, Trin Charumilind and **Suthorn Bavonratanavech** Bangkok Dusit Medical Services Public CO. Ltd, Thailand

Trauma Registry (TRs) represents an integral role in the assessment of trauma care quality. It is the standardize database containing multiple variables which are utilized to monitor trauma care process. Bangkok Dusit Medical Service Public Company (BDMS) have major business in providing medical care which has 47 private hospitals in their network. One of the important policies of BDMS is providing excellent trauma care by establishing Trauma Centre of Excellence in 10 hospitals. Trauma Registry (TRs) is one of the key components in the strategic plans. Database in BDMS TRs can provide data to analyse for 16 trauma key performances indicators focus on process of care from pre-hospital till discharge proposed by Royal College of Surgeon of Thailand. The design of TRs software program based not only on providing adequate data for utilization but also providing the systems which ease data input, data extract and report. The software program was right now implementing in all Trauma Centre of Excellent and network hospitals and the data from TRs could well be extracted for monitoring process of trauma care in every centre.

BIOGRAPHY

Krongdai Unhasuta has completed her Post-Doctoral studies in Trauma Care from Colorado, Denver University, USA. She is the Chairman of Trauma Nurse Society, Thailand and work as BDMS Trauma Network Program Manager who monitor standard of trauma care of 43 private hospitals in Thailand. She has over 40 publications.

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William J Rowe, Adv Surg Res 2019, Volume 3

HYPERTENSION RISK FROM IRON BRAKE PARTICULATE MATTER

William J Rowe

University of Toledo Medical Center, USA

O f 12 moon walkers, James Irwin on day after return from Apollo 15 mission, showed extraordinary bicycle (B) stress test (ST) hypertension (275/125) after three minutes exercise; supervising >5000 maximum treadmill ST, author never witnessed ST-blood pressure approaching this level. Symptom-limited maximum B stress test showed "Cyanotic fingernails"; possibly venous blood trapped peripherally, supporting author's "Apollo 15 Space Syndrome," postulating that severe fingertip pain during space walks, triggered by plasma fluid, trapped distally; mechanism could be related to endothelial dysfunction, providing "Silent ischemia" warning. Neil Armstrong returned to Earth with severe diastolic hypertension (160/135), consistent with ischemic left ventricular dysfunction; 50mm increase in comparison with resting BP 110/85mm/Hg. With the inhalation of lunar dust, brought into habitat on space suit, with high lunar iron (I) this dust inhalation, along with reduced (R) space flight transferrin, R antioxidant, calcium (Ca) blocker- magnesium, conducive to severe oxidative stress, Ca overload with potential endothelial injuries. Using moon walker studies as example, my recent editorials show that iron dust, released from brakes, with over 90% of brakes made of iron, is a major hypertension factor and may also contribute to myocardial infarctions.

BIOGRAPHY

William J Rowe is a board certified specialist in Internal Medicine. He received his MD at the University of Cincinnati and was in private practice in Toledo, Ohio for 34 years. During that time he supervised over 5000 symptom-limited maximum hospital based treadmill stress tests. He studied three world class extraordinary endurance athletes and published their exercise related magnesium deficiencies. This triggered a 20 year pursuit of the cardiovascular complications of space flight.

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DAY 2 SESSIONS JULY 23, 2019

Neurosurgery | Orthopedic Surgery | Oncology and Surgery | Poe-Operative Care and Anesthesiology | Organ Transplantation | General Surgery | ENT Surgery | Abdominal Surgery | Trauma Surgery | Transplantation | Oncology

SESSION CHAIR

<mark>Jalal N</mark> Tianjin University, China

SESSION INTRODUCTION

Title:	Newly discovered way of the function of cardio-vascular System and the latest theory of the development of cardio-vascular diseases
	VA Mikhaylov, Eternity Medicine Institute, Dubai
Title:	Trans abdominal sonography of the small and large intestines
	Vikas Leelavati Balasaheb Jadhav, Dr DY Patil University, India
Title:	Achieving enteral autonomy in short gut secondary to omental cyst causing midgut volvulus
	Vikrant K, Leicester Royal Infirmary, UK
Title:	Vertigo- An overview
	Debashis Acharya, Primary Health Care Corporation, Qatar



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V A Mikhaylov, Adv Surg Res 2019, Volume 3

NEWLY DISCOVERED WAY OF THE FUNCTION OF CARDIO-VASCULAR SYSTEM AND THE LATEST THEORY OF THE DEVELOPMENT OF CARDIOVASCULAR DISEASES

V A Mikhaylov

Eternity Medicine Institute Dubai, UAE

The main role in transportation of blood to the capillary bed is played by the artery, the power of the heart is only 0, 49-0, 027 % of the power needed to transport blood to the capillary bed. The vascular pump is regulated by the frequency of contractions of the heart muscle and is tightly synchronized with the work of the heart. The rapid spread of the pulse wave causes a suction effect. Following the reduction of the vessel wall, the blood is just drawn from the aorta and large arteries to the smaller vessels down to the capillary bed. Systematic irregularities in the vascular pump are the starting point in the development of diseases of the cardiovascular system. These illnesses may be both local and systemic, depending on the size and the location of pathological changes in the vascular wall.

BIOGRAPHY

V A Mikhaylov has Professional experience from 1976 to 1982, he has finished the Ryazan Medical Institute named after I P Pavlov. He was Senior Research Fellow at Department of Surgery of the biliary tract and parenchymal organs; he was nominated as the conducting scientific employer 1994, Department of Surgery of the oesophagus and stomach. He was the Head of Moscow Scientific-Practical Center of laser Medicine during 1997–2000; General Director of Scientific medical laser Center, Moscow during 2000–2006; Private practices on family medicine in Moscow since 2006 and he worked as a Physician Contract with Eternity Medicine Institute, Dubai since 2013.

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Vikas Leelavati Balasaheb Jadhav, Adv Surg Res 2019, Volume 3

TRANSABDOMINAL SONOGRAPHY OF THE STOMACH AND DUODENUM

Vikas Leelavati Balasaheb Jadhav

Dr DY Patil University, India

Transabdominal sonography of the stomach and duodenum can reveal following diseases like Gastritis, duodenitis and acid gastritis. An Ulcer, whether it is superficial, deep with risk of impending perforation, perforated, sealed perforation, chronic ulcer and post-healing fibrosis and structure, polyps and diverticulum, benign intra-mural tumours, intra-mural haematoma. Duodenal outlet obstruction due to annular pancreas, gastro duodenal ascariasis, pancreatic or biliary stents, foreign body, necrotizing gastro-duodenitis, tuberculosis, lesions of ampulla of vater like prolapsed, benign and infiltrating mass lesions. Neoplastic lesion is usually a segment involvement and shows irregularly thickened, hypoechoic and aperistaltic wall with loss of normal layering pattern. It is usually a solitary stricture and has eccentric irregular luminal narrowing. It shows loss of normal gut signature. Enlargement of the involved segment seen, shouldering effect at the ends of stricture is most common feature. Enlarged lymphnodes around may be seen. Primary arising from wall itself and secondary are invasion from peri-ampullary malignancy or distant metastasis. All these cases are compared and proved with gold standards like surgery and endoscopy. Some extra efforts taken during all routine or emergent ultrasonography examinations can be an effective non-invasive method to diagnose primarily hitherto unsuspected benign and malignant gastro intestinal tract lesions, so should be the investigation of choice.

BIOGRAPHY

Vikas Leelavati Balasaheb Jadhav has completed his Post Graduation in Radiology in 1994. He has 23 years of experience in the field of Gastro-Intestinal Tract Ultrasound and Diagnostic as well Therapeutic Interventional Sonography. He is the Pioneer of Gastro-Intestinal Tract Sonography, especially Gastro-Duodenal Sonography. He has delivered many Guest Lectures in Indian as well International Conferences in nearly 27 countries as an Invited Guest Faculty, since March 2000. He is a Consultant Radiologist and the Specialist in Conventional as well Unconventional Gastro-Intestinal Tract Ultrasound and Diagnostic as well Therapeutic Interventional Sonologist in Pune, India.

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Vikrant K et al., Adv Surg Res 2019, Volume 3

ACHIEVING ENTERAL AUTONOMY IN SHORT GUT SECONDARY TO OMENTAL CYST CAUSING MIDGUT VOLVULUS

Vikrant K, Balgopal Eradi and Anne Willmott

Leicester Royal Infirmary, UK

Four year boy was referred with an acute surgical abdomen without bilious vomiting. He had a background of chronic intermittent abdominal and back pain. On presentation he was shocked with distended and tender abdomen and went for an urgent laparotomy. Intraoperatively, he was found to have complete midgut volvulus around a congenital omental cyst. He underwent clip and drop laparotomy, followed by staged bowel resection and ended with 40cms of small bowel. A tube jejunosotmy was performed which was occluded progressively to achieve bowel dilatation (All the stages of the surgery were documented with photographs). He had an intensive rehabilitation jointly with gastroenterology and this was followed by serial transverse enteroplasty. He recovered well and came off parenteral nutrition achieving eneteral autonomy. He underwent cholecystectomy due to gall stones. Currently he is doing very well and has maintained he enteral autonomy. More and more children with short bowel syndrome are surviving now. There is a 50% probability of reaching enteral autonomy with 40cm of an intestinal remnant and 10% with shorter 10cm of small bowel. The best results are seen in neonates as it is observed that bowel growth tends to correlate with their overall growth and development. In our case the boy was four year old when he lost the bowel and still managed to achieve enteral autonomy which is rare.

BIOGRAPHY

Vikrant K is paediatric surgeon with training in adult general surgery. He has over 20 international publications. He has special interest in Paediatric GI surgery. Currently he is working in the NHS to further his experience.

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Debashis Acharya, Adv Surg Res 2019, Volume 3

VERTIGO- AN OVERVIEW

Debashis Acharya

Primary Health Care Corporation (PHCC), Qatar

Statement of the Problem: Provides an overview of vertigo and its management. It is useful for students of vertigo and clinicians managing vertigo. It introduces clinicians to a systematic approach of assessing dizzy patients. Vertigo is a very difficult subject to master. The cornerstone of managing a dizzy patient is first and foremost a good history. This is followed by appropriate examination and investigations. The general practitioner is the first expert to be involved in the management of dizzy patient followed by specialists in particular Otorhinolaryngologists, Audio vestibular Medicine Specialists and Neurologists and finally, allied healthcare personnel. The key concepts in assessing, diagnosing and managing common vestibular disorders are briefly described. Differential diagnosis of vertigo along with certain characteristic traits is mentioned. Etiology and pathophysiology of associated symptoms of dizziness are discussed. Importance of timing and triggering factors are highlighted. Discussion on balance and gait along with role of nystagmus in differentiating central from peripheral vertigo is done. Usage of certain specific drugs including special role of Betahistidine is mentioned. Vertigo from peripheral vestibular diseases normally improves within two to three months from a number of processes known as cerebral compensation. Here vestibular rehabilitation exercises play a very crucial part in management of a dizzy patient. Special vestibular investigations like ENG/VNG is computer based and runs a battery of tests which assess the occulomotor function of the affected patient. Video head impulse test (VHIT) and Vestibular Evoked Myogenic Potentials (VEMP) are done for diagnosing vestibular neuritis. The role of traditional Caloric testing and EcochG which is a variant of BSERA cannot be undermined in a dizzy patient. Newer methods to assess balance like Dynamic posturography, Rotatary chair are computer driven tests for analysing vision, proprioception and vestibular function. These are useful to detect malingering. Finally, summary and conclusions are drawn upon.

BIOGRAPHY

Debashis Acharya is passionate about Otorhinolaryngology (ENT) and completing 25 years in the field including his training period at Delhi, India. He is an ex-Indian Army Medical Corps officer (Lieutenant Colonel) served as ENT Specialist in the forces for approximately 12 years till 2008 when he left the services.

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