

XVIth Workshop Advanced Thyroid Cancer

Locally Advanced Thyroid Cancer

Differentiated Thyroid Cancer (DCT) is the most common endocrine cancer and occurs in 5% of thyroid nodules.

For reasons not fully explained its incidence is increasing although its prognosis is excellent, with a long-term disease-free survival of about 90% at 20 years.

Papillary Thyroid Carcinoma (PTC) is the most frequent cancer affecting the thyroid gland, it spreads through the lymphatic system and it can be detected in regional lymph nodes in up to 80-90% .

Neck Ultrasound study has been shown to be a useful tool to preoperatively stage Thyroid Cancer, as well as to diagnose and monitor recurrences.

Total Thyroidectomy is the best approach to Thyroid Cancer; CND and MRND should be done in all cases in which lymph node involvement is evident or highly suspicious. Although controversial, prophylactic neck dissection is also suggested.

The systematic use of ultrasound and new technologies (Harmonic scalpel, intraoperative PTH assay, RLN intraoperative monitoring, etc.) allow us to perform Thyroidectomy and Neck dissection in a safe way with a low morbidity rate.

Organizers:

- Endocrine Surgery Unit and Johnson & Johnson Medical.
- Dr. P. Moreno, Chief of the Endocrine Surgery Unit (Course Director).
- Dr. JM. Francos (Consultant).
- Dr A. García Barrasa (Consultant).



Ethicon Endo-Surgery
Professional Education
Paseo de las Doce Estrellas, 5-7,
Campo de las Naciones, 28042, Madrid, España

Tel +34 917 22 82 62
Fax +34 917 22 83 41
IberiaprofEd@its.jnj.com

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XVIth Workshop Advanced Thyroid Cancer
Hospital Universitari de Bellvitge
Oct 7-9 th 2013

 **Bellvitge**
Hospital Universitari

XVIth Workshop Advanced Thyroid Cancer

Introduction:

It is my pleasure to invite you to participate in a new edition of "Workshop on Locally Advanced Thyroid Cancer".

Objectives:

1. To review the surgical anatomy of the neck with special emphasis on the "hot points" of neck dissection.

Dissection:

2. Upgrade our criteria in:

- Use and predictive value of ioPTH.
- Preoperative stage in DTC.
- Indications, technical aspects and types of Neck Dissection.
- Follow-up of DTC patients.
- Therapeutic options in recurrent DTC.
- Surgical approach to the inferior laryngeal nerve (RLN).

Attendance at "live" surgical sessions where at least 2 cases of locally advanced PTC are operated on. Standard surgical approach consists on Total Thyroidectomy (TT), central neck dissection (CND) and Modified radical neck dissection (MRND). The number of attendees is limited to 4 in order to guarantee a higher quality of teaching.

A new edition of the course will be held every 3 or 4 months. Cases may vary depending on preoperative stage and intraoperative findings for every specific case.

Aimed at: Staff with activity in Endocrine Surgery Units or interest in it.

Interested: Contact the sales manager of Ethicon.

Accreditation (CME)

Accreditation: 5.7 credits. 21h 45min duration course.

Team Members:

Dr. J.M. Gómez Sáez (Endocrinology and Nutrition).
Dr. R. Mast (Radiologist).
Dr. I Fernandez (Neurophysiologist).
Dr. F. Martín (Otorhinolaryngology).
Dr. I. Català (Cytologist).

Day 1

16:00 - 16:15

Welcome

(Dr. C. Bartolomé, Director Médico from HUB)
Course Presentation (Dr. P. Moreno).

16:15 - 17:00

Surgical Anatomy of the neck. Rationale for CND and MRND. (Dr. P. Moreno).

17:00 - 17:30

Cytological patterns in Thyroid Cancer. The Bethesda Classification System (Dr.).

17:30 - 18:00

Preoperative Ultrasound Staging in DTC. (Dr. R Mast).

18:00 - 18:15

Case 1 Presentation (Dr. García).

18:15 - 18:30

Live ultrasound Staging of Case 1 (Dr. R. Mast).

18:30 - 19:00

Intraoperative PTH assay. Intraoperative and postoperative managing Criteria. (Dr. J.M. Francos).

19:00 - 19:30

"Intraoperative Neuromonitoring of Laryngeal Nerves". (Dr I Fernández).

Day 2

08:30 - 15:30

Case 1: PTC and lateral lymph nodes

Surgical. Session 1:TT+ bilateral CND + unilateral MRND.

15:30 - 16:15

Lunch.

16:15 - 16:45

Discussion of the case. Video session.

16:45 - 17:30

Approach to DTC: "The state of the art". (Dr. J.M. Gómez Saez).

17:30 - 18:15

Technological bases of cutting and coagulation devices (Daniel Fernandez).

18:15 - 18:30

Case 2 Presentation (Dr. García).

18:30 - 19:15

Live ultrasound Staging of Case 1 (Dr. R.Mast).

19:15 - 19:45

Surgical Approach to recurrent DTC. Laryngeal Nerve Surgery. (Dr. P. Moreno, Dr. J. Martín).

Day 3

08:00 - 08:30

Case 1: Clinical round.

08:30 - 15:30

Case 2: PTC and lateral lymph nodes
Surgical Session 2:TT+ bilateral CND + unilateral MRND.

15:30 - 16:00

Lunch.

16:00

Closure (Dr P Moreno).



Description:

Hospital Universitari de Bellvitge (HUB) is a tertiary teaching Hospital belonging to the Catalan Institute of Health (ICS), a public company with their own legal personality and functional and management autonomy, that provides comprehensive services of hospital and primary assistance through all Catalonia. It was opened in 1972, and its geographical location is the District of Bellvitge, in the municipality of L'Hospitalet de Llobregat. It is part of the Territorial Metropolitan South Management of ICS, maximum organ of management and coordination of the group of centers, services and health institutions of the ICS Hospital de Llobregat, el Baix Llobregat, el Alt Penedès and el Garraf.