

Complex ABDOMINAL WALL REPAIR (AWR) in emergency settings and acute patient management

Web Workshop

April 23, 2024



Abdominal wall surgery has nowadays become a surgical subspecialty in the elective setting. By the way, the real world faces an increasing amount of abdominal wall reconstruction issues in the emergency setting due to the widespread use of damage control strategies (including open abdomen) for both traumatic injuries as well as for septic or ischemic abdominal diseases.

The acute critical patient represents a major challenge due to its physiologic derangements and the technical difficulties in managing local infection, loss of substance or direct damage to the soft tissues. Moreover, most acute patients still receive their primary cure in non-specialized contexts, where abdominal wall problems may receive limited attention due to sub-optimal specific experience together with a perceived “benignity” of the disease, despite its objective impact in term of disabilities, socio-economic losses and impairment in quality of life.

Abdominal wall reconstruction in the emergency settings requires a mindset shift aimed at preserving patients’ safety in an acute phase dominated by life-threatening injuries and diseases while preventing significant abdominal wall impairment. Indeed, these patients range through the whole spectrum from fully active individuals to severely fragile ones who likely would not tolerate an early failure or a delayed definitive treatment. These patients should have the chance to receive a safe and, ideally, “definitive” reconstruction of the abdominal wall in the acute phase or, at least, early in the post-acute treatment pathway. New devices and new materials may significantly contribute in improving reconstruction techniques as well as wide spreading this cultural paradigm shift. Additionally, ongoing education and training for healthcare professionals in this field are crucial for maintaining a high level of awareness and proficiency in addressing these challenges.

Gabriele Sganga



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AGENDA

14.30 **Introduction to acute and post-acute patient management in abdominal wall reconstruction**
Gabriele Sganga

Moderators: *Oswaldo Chiara, Gabriele Sganga*

14.45 **Clinical Case I**
Gabriele Bormolini

15.05 **Long-term absorbable biosynthetic mesh in emergency setting: real world data and guidelines**
Michele Carlucci

15.25 Q&A Session

15.45 **Clinical Case II**
Stefano Cioffi

16.05 **Infection control in emergency setting: the patient pathway and the management of abdominal wall repair in acute patients**
Stefania Cimbanassi

16.25 Q&A Session

16.45 **Clinical Case III**
Valerio Cozza

17.05 **Ventral Hernia Prevention in acute patient: Real word data collection proposal**
Antonio La Greca

17.25 Q&A Session

17.45 **Take home message & Workshop Complete**
Oswaldo Chiara, Gabriele Sganga



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FACULTY

- Gaia Altieri - Fondazione Policlinico Universitario Agostino Gemelli IRCCS
- Gabriele Bormolini - IRCCS Ospedale San Raffaele
- Michele Carlucci - IRCCS Ospedale San Raffaele
- Osvaldo Chiara - AIMS Academy, Milano
- Stefania Cimbanassi - ASST Grande Ospedale Metropolitano Niguarda
- Stefano Cioffi - ASST Grande Ospedale Metropolitano Niguarda
- Valerio Cozza - Fondazione Policlinico Universitario Agostino Gemelli IRCCS
- Antonio La Greca - Fondazione Policlinico Universitario Agostino Gemelli IRCCS
- Gabriele Sganga - Fondazione Policlinico Universitario Agostino Gemelli IRCCS



WEB WORKSHOP

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[Click Here](#)

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