

Keynote Forum



International Conference on Clinical Surgery and Transplantation

December 03, 2021 | Webinar



Christopher Satur

University Hospital of North Staffordshire, UK

Do Categorised Values Maximal Oxygen Uptake Discriminate Patterns of Exercise Dysfunction of Pectus Excavatum?

Patients with Pectus Excavatum commonly report symptoms of compromised exercise function, yet cardiopulmonary function tests (CPET) fail to demonstrate a pathophysiological cause. As a result, patients in England are refused surgical treatment. We have examined whether categorised values of maximal oxygen consumption and other CPET parameters enable definition of exercise dysfunction. Results demonstrate that the analysis of categorised maximal oxygen consumption demonstrate that > 50% of patients with Pectus Excavatum experience compromised exercise function and >80% experiencing ventilatory dysfunction. Ventilatory dysfunction appears to be the primary cause of compromised cardiovascular function. Categorised data revealed that surgical treatment reduces exercise dysfunction by 40%, increasing the incidence of those with normal function by 90%. In conclusion use of CPET and pulmonary function tests require use of normal referenced and subgroup analysis to define physiological disturbances. This may improve access of patients with pectus to surgical treatment.

Biography

Satur is a Consultant Cardiothoracic in UK with a broad interest in the management of patients with malignant and benign thoracic diseases and major thoracic trauma. I have developed protocols for the investigation of the exercise dysfunction caused by Pectus Excavatum and carinatum determine. This group of patients have been disadvantaged by the view that their problems are largely cosmetic, and reports of exercise dysfunction are unfounded. We are choosing to use this to redesign study protocols for evaluation of this group of patients, with the aim of facilitating improved treatment options for them.

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Scientific Tracks & Abstracts



Sessions on

Orthopedics | Midwifery | Women's health

Session Introduction

Title: **Idiopathic Osteonecrosis of The Femoral Head: A CASE REPORT**

Massimo Piracci, Saudi German Hospital, UAE

Title: **Bacteria: Back pain, leg pain and Modic sign-a surgical multicentre comparative study**

Peter Fritzell, Futurum Academy, Sweden

Title: **Orbital Trauma Management - Nurturing past understanding with 21st century ideas**

Manish Anand, Meenakshi Ammal Dental College, India

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Idiopathic Osteonecrosis of The Femoral Head: A CASE REPORT

Massimo Piracci

Saudi German Hospital, UAE

The case report we present concerns a 65-year-old male patient with idiopathic osteonecrosis of the left femoral head. After repeated cycles without the significant success of physiotherapy treatments, due to the worsening of the painful symptoms in the left coxo-femoral site with increasing functional limitation, it was decided to proceed with decompression surgery of the femoral head using a cannulated biological screw which due to its intrinsic structural characteristics, allowed the simultaneous application in the neck and femoral head of PRP growth factors prepared at the time of surgery. The clinical picture surprisingly regressed in a very short time with a complete functional recovery in the absence of significant pain. The MRI examination performed before the treatment in place, compared with a similar examination after 5 months, shows sub-total remission of the signal affecting the trabecular structure of the cephalic portion of the femur in line with the clinical picture just reported.

Biography

Massimo Piracci Phd is a Consultant Orthopedic Surgeon, HOD Orthopedic and Sport Medicine Department, Saudi German Hospital, Dubai UAE.

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Bacteria: Back pain, leg pain and Modic sign-a surgical multicentre comparative study

Peter Fritzell

Futurum Academy, Sweden

Purpose: To compare bacterial findings in pain-generating degenerated discs in adults operated on for lumbar disc herniation (LDH), and mostly also suffering from low back pain (LBP), with findings in adolescent patients with non-degenerated non-pain-generating discs operated on for scoliosis, and to evaluate associations with Modic signs on magnetic resonance imaging (MRI). *Cutibacterium acnes* (*Propionibacterium acnes*) has been found in painful degenerated discs, why it has been suggested treating patients with LDH/LBP with antibiotics. As multidrug-resistant bacteria are a worldwide concern, new indications for using antibiotics should be based on solid scientific evidence.

Methods: Between 2015 and 2017, 40 adults with LDH/LBP (median age 43, IQR 33-49) and 20 control patients with scoliosis (median age 17, IQR 15-20) underwent surgery at seven Swedish hospitals. Samples were cultured from skin, surgical wound, discs and vertebrae

Results: No bacterial growth was found in 6/40 (15%) LDH patients, compared with 3/20 (15%) scoliosis patients. Most positive samples in both groups were isolated from the skin and then from subcutis or deep within the wound. Of the four disc and vertebral samples from each of the 60 patients, 235/240 (98%) were DNA negative by bacterial PCR. A single species, *C. acnes*, was found exclusively in the disc/vertebra from one patient in each group. In the LDH group, 29/40 (72%) patients had at least one sample with growth of *C. acnes*, compared to 14/20 (70%) in the scoliosis group. Bacterial findings and Modic changes were not associated.

Conclusions: *Cutibacterium acnes* found in discs and vertebrae during surgery for disc herniation in adults with degenerated discs may be caused by contamination, as findings in this group were similar to findings in a control group of young patients with scoliosis and non-degenerated discs. Furthermore, such findings were almost always combined with bacterial findings on the skin and/or in the wound. There was no association between preoperative Modic changes and bacterial findings. Antibiotic treatment of lumbar disc herniation with sciatica and/or low back pain, without signs of clinical discitis/spondylitis, should be seriously questioned. These slides can be retrieved under Electronic Supplementary Material.

Biography

Peter Fritzell is working at Futurum Academy, Sweden. His research interests are Orthopedics, Surgery and Pain Management.

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Orbital trauma management - Nurturing past understanding with 21-st century ideas

Manish Anand

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Orbital fractures account for a significant portion of traumatic facial injuries. The management of these fractures is often challenging due to the impact that they can have on vision. Acute treatment involves a thorough clinical examination and management of concomitant ocular injuries. The clinical and radiographic findings for each individual patient must then be analysed for the need for surgical intervention. Deformity and vision impairment can occur from these injuries, and while surgery is intended to prevent these problems, it can also create them. Therefore, surgical approach and implant selection should be carefully considered. Accurate anatomic reconstruction requires complete assessment of fracture margins and proper implant contouring and positioning. The implementation of new technologies for implant shaping and intraoperative assessment of reconstruction will hopefully lead to improved patient outcomes. Not all orbital fractures require operative repair. However, bony disruption can cause enophthalmos, hypothalamus, tele canthus, epiphora, cerebrospinal fluid leaks, orbital hematoma, and even blindness to name a few. Timing of operative repair as well as reconstructive method is dictated by the patient's individual presentation. Successful fracture management requires a detailed understanding of the anatomy and pathophysiology to ensure restoration of the patients' preoperative state. Orbital trauma encompasses a wide variety of mechanisms of injury and resulting fracture patterns. A variety of surgical approaches to the orbit exist as has been discussed allowing the surgeon access to all area of interest. Regardless of the fracture complexity, the principles of atraumatic technique, anatomic reduction, and stable fixation apply in all cases.

Biography

Manish Anand, a passionate surgeon and has a broad interest in Oral and Maxillofacial surgery. He received a master in oral and Maxillofacial degree from India and have been awarded a Diploma in Primary care dentistry from the Royal College of Surgeons, Ireland. He is an associate member of the Royal College of Faculty of Dentistry from Edinburgh. He has five prestigious publications in international journals and currently pursuing Masters of Business Administration from Australia. An enthusiast surgeon who believes in bringing the best of the patients. He understands disease from every perspective and tries to solve complex issues multidimensionally.

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Accepted Abstracts



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Bull Horn and Bull Fighting Injuries

Antonio Reguera-Teba

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Objectives: Improving knowledge on the epidemiology and analysing the prognostic factors of severity for injuries caused by fighting bulls in Spain, Portugal and southern France.

Methods: Observational retrospective study including 1239 patients with a reported history of bull horn injuries between January 2012 and November 2019 in Spain, Portugal or southern France. A multiple logistic regression test was used to analyse the prognostic factors of severity and mortality rate of these lesions.

Results: The mean accident rate was 9.13% and the mortality rate was 0.48%. The most frequent mechanism of trauma was goring, and the commonest locations of the lesions were thigh and groin. Vascular lesion was found in 20% of thigh/groin gorings. Prognostic factors of severity were vascular lesion, head trauma, fracture, goring injuries and age of the animal. The most reliable prognostic factors of mortality were vascular lesion and goring in the back.

Conclusion: Lesions caused by fighting bulls are common in the bullfighting events held in Spain, Portugal and southern France. Although the mortality rate is low, there is a higher morbidity rate, which is conditioned by vascular lesion. All medical teams should include a surgeon experienced in vascular surgery and an anaesthesiologist.

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Role of CRTH2 in Eosinophil Infiltration of Recurrent Nasal Polyps

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Background: Chronic rhinosinusitis with nasal polyps (CRSwNP) is a difficult-to-treat disease that is often characterized by recurrent nasal polyp (NP) growth even following surgical removal, but the mechanisms that underlie the pathogenesis of polyp recurrence are still not clear.

Objectives: The aim of this study was to investigate the expression of chemoattractant receptor-homologous molecule expressed on Th2 cells (CRTH2) receptor on eosinophils of patients with nasal polyps and the role it plays in eosinophil infiltration and nasal polyp recurrent.

Methods: mRNA was extracted from recurrent nasal polyp, nasal polyps, control group and evaluated for expression of CRTH2. Immunofluorescence staining was performed to confirm the expression of CRTH2 protein. CRTH2 expression on peripheral blood eosinophils was quantified by flow cytometry as being side scatterhigh, CD16-, Siglec8+ and CRTH2+.

Results: Gene expression analysis revealed that nasal polyps display increased level of CRTH2 compared with control samples, with the highest expression showed in the recurrent nasal polyps. Immunofluorescence confirmed the higher expression of CRTH2 on eosinophils of recurrent nasal polys, which correlated with the number of tissue eosinophils. Peripheral blood eosinophils from recurrent nasal polyps displayed higher expression of CRTH2 which is confirmed by flow cytometry.

Conclusion: The PGD2-CRTH2 pathway may play an important role in eosinophil infiltration in nasal polyps, which may play an important role in nasal polyp recurrence. These results open channels for therapeutic modalities targeting CRTH2 molecules in recurrent nasal polyps.

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Demodectic Acariasis - the main provider of modern allergy

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The article provides a brief overview of mites that can cause disease in humans. The largest review is given for dust mites, the number of which in species and quantity increased in the human acarofauna throughout the 20th century. The fastest, literally exponential increase in the number of these mites in the second half of the XX century, when in parallel there was also an exponential growth in the incidence of allergy in people. Morbidity statistics / according to the data of many countries and WHO for the second half of the 20th and early 21st centuries / systemic, skin, oncological and a number of other diseases of people also indicated a rapid growth.

Over the past 48 years we have studied etiopathogenesis, clinical manifestations in over 43 thousand patients, and also developed methods of bloodless diagnostics and etiopathogenetic treatment of mainly allergies and allergic dermatoses, as well as isolated patients with a number of other modern systemic diseases. Research results indicate the presence of a pandemic of demodectic acariasis in the population at the present time.

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