General Information

Overview and Objectives

This scientific program is designed to provide surgeons with an in-depth and up-to-date knowledge relative to surgery







Dr. Michael Spencer Program Co-Chair

for diseases of the colon, rectum, and anus with emphasis on patient care, teaching, and research. Presentation formats include podium presentations followed by audience questions and critiques, panel discussions, walk-around poster presentations and discussions, video presentations, and symposia focusing on specific state-of-the-art diagnostic and treatment modalities. The purpose of all sessions is to improve the quality of care of patients with diseases of the colon and rectum.

At the conclusion of this conference, participants should be able to understand:

- The technique of endoanal ultrasound and its potential application in fecal incontinence and anorectal cancer.
- The technical steps of laparoscopic colectomy and the current status of laparoscopic procedures for diseases of the colon and rectum, focusing on cancer.
- The indications and technique of transanal endoscopic microsurgery (TEM).
- Utility of establishing pelvic floor centers as well as commonly encountered obstacles in their development.
- Current concepts in patient safety issues such as the management of postoperative ileus, the prevention of deep venous thrombosis, reprocessing of surgical instruments, establishing centers of excellence.

- New methods in wound management and troubleshooting stoma-related problems, especially dermatologic conditions, and treatment of the difficult perineal wound.
- Advanced endoscopic techniques for polypectomy and colonic stenting.
- New techniques in gastrointestinal imaging such as CT colography and capsule endoscopy.
- Retirement-related issues such as assets and how to survive in the 21st Century.
- Legal issues surrounding the recognition and treatment of genetically acquired diseases that place patients at high risk for colorectal cancer.
- How to maintain certification.
- The impact of the 80-hour work week on surgical education and training.
- Current concepts in surgical ethics.
- The results of surgery for colon and rectal cancer including the role of chemoradiation and surgical technique on functional outcomes and quality of life.
- The role of local excision for rectal cancer.
- New diagnostic and treatment modalities for anal fistulas.
- Results of transvaginal and transanal surgery for rectocele as well as results of ongoing intestinal studies of the STARR procedure for obstruction defection.

Goals

The goals of these CME programs are to improve the prevention, diagnosis and treatment of patients with diseases and disorders affecting the colon and rectum; and improve the quality of patient care by maintaining, developing and enhancing the knowledge, skills, professional performance and multidisciplinary relationships necessary to provide services for patients, the public and the profession.

Target Audience

The program is intended for the education of colon and rectal surgeons as well as general surgeons and others involved in the treatment of diseases affecting the colon and rectum.

Accreditation

The American Society of Colon and Rectal Surgeons (ASCRS) is accredited by the Accreditation Council for Continuing Medical Education to provide continuing medical education for physicians. The American Society of Colon and Rectal Surgeons takes responsibility for the content, quality, and scientific integrity of this CME activity.

Continuing Medical Education Credit

The ASCRS designates this continuing medical education activity for a maximum of 51 credit hours in Category 1 of the Physician's Recognition Award of the American Medical Association. Each physician should claim only those hours of credit that he/she actually spent in the educational activity.

CALL FOR ABSTRACTS 2006 CONVENTION

June 3-8, 2006

Sheraton Seattle Hotel & Towers, Seattle, Washington
On-line submission ONLY, effective September 15, 2005
www.fascrs.org

DEADLINE for receipt of abstracts:

December 1, 2005

General Information

Disclosure

Each speaker has been requested to complete a faculty disclosure statement. Disclosure will be made at the time of presentation as well as included in the Final Program.

Social Events

The **Welcome Reception** Sunday, May 1, 7:00 – 10:00pm (complimentary). Hors d'oeuvres, cocktails and entertainment. The Welcome Reception will be held at Constitution Center and transportation will be provided. *The Research Foundation will join forces with ASCRS to welcome all at this reception.*

The **Annual Dinner Dance** Tuesday, May 3. Reception, 7:00 pm. Dinner 8:00 pm. Tickets are included in the registration fees for ASCRS members. Non-members may purchase tickets for \$75.

Accommodations and Attractions

The Marriott Philadelphia Downtown Hotel is the headquarters hotel and will house the entire meeting including all scientific sessions and exhibits. The hotel is within walking distance of America's most historic square mile, including Independence Hall and the Liberty Bell. Convenient to Franklin Institute, National Constitution Center,

Philadelphia Museum of Art, Rodin Museum, Betsy Ross House, U.S. Mint, Penn's Landing, shopping and fine dining. The Marriott is located 8 miles from the Philadelphia International Airport. The hotel features several restaurants and lounges, a health club, indoor swimming pool, room service and a business center. The average daily temperature in May ranges from a low of 50° and a high of 70°.

Hotel reservations may be made with the Marriott Philadelphia Downtown via the internet, phone, fax or by using the hotel housing form.

For best availability, make your reservation via the internet at www.fascrs.org. You may also make reservations by calling (800) 266-9432 or by FAX (215) 625-6101. If paying by check, mail the housing form to: Marriott Philadelphia Downtown, 1201 Market Street, Philadelphia, PA 19107 – Attn: Reservations.

The deadline for reservations is Friday, April, 8, 2005.

Hotel reservations / rate availability are not guaranteed after the room block is full or after April 8, 2005. Please register early – only a limited number of rooms are available.

Air Fare Discounts

ASCRS has arranged with United for special discounts on airfares to Philadelphia. Save up to 15% when your tickets are purchased at least 30 days in advance. Travel must take place between April 25 – May 10, 2005 and some restrictions may apply.

To book your reservation, call ASCRS's official travel agency, Uniglobe Preferred Travel, at 1-800-626-0359 and after the prompt dial "0" (M-F 8:30 am – 5:30 pm CST). If you prefer, you may:

- Book your travel online at www.uniglobepreferred.com. Scroll down and click on Rapid-Rez icon. When the registration page comes up, click on the "Sign Me Up" icon. Fill in the required information and you are ready to book. Please record your ID and your Password for future use. Discount fares are automatically displayed on this site and booking on this site will have a reduced agency service fee of \$20.
- Call United's toll-free number, 1-800-521-4041. Mention the ASCRS Meeting ID Code, 557QO, to qualify for discount fares.

Child Care Services

While ASCRS does not recommend any particular child care agency, following is the agency that the Marriott uses:

Your Other Hand (215) 790-0990

Spouse/Guest Program

Please review the following and indicate your choices on the registration form.

- A. Annual Reception, 7:00 8:00 pm, Tuesday, May 3
- B. Annual Dinner Dance, 8:00 11:00 pm, Tuesday, May 3
- C. Welcome Reception, 7:00 10:00 pm, Sunday, May 1, hors d' oeuvres, cocktails, entertainment.
- D. **Hospitality Suite**, 7:30 10:30 am, Sunday thru Wednesday Includes continental breakfast .
- E. Admission to all scientific sessions and the exhibit area.

Package #1 (\$100 U.S.) Includes items A thru E.

Package #2 (\$55 U.S.) Includes items C thru E only.

The KIDS KORNER

KIDS KORNER is back!!! Just sign up your KIDS on the registration form. [There will be no on-site registration for this program] All interested KIDS (16 and under) are welcome. Lots of fun activities planned. KIDS KORNER will be open Monday – Wednesday, 10:00 am – Noon. One parent must be present during KIDS KORNER. Our creator and organizer, Mrs. Lisa Bruce has done an outstanding job in creating projects your KIDS will remember for years to come.

Endorectal Ultrasound Course Hands-On Lab

7:15 am – 5:15 pm • Fee: \$255 • Limit 80 • Registration Required • Lunch included (No refunds after April 17)

Over the past several years, the value of endorectal ultrasonography in the evaluation of both benign and malignant anorectal disease has been soundly established. Hence, it is important to the specialty of colon and rectal surgery that colorectal surgeons develop hands-on expertise in the use of this diagnostic modality by learning its applications and interpretations and applying it in their practices. The objective of this course is to provide the colorectal surgeon with education and training in the basic use of ultrasound with a focused education in applied ultrasound for colorectal disease.

Course Director: Charles O. Finne, MD, Minneapolis, MN

- Indications and Rationale for Rectal/Anal Ultrasound Sharon G. Gregorcyk, MD, *Dallas*, *TX*
- Physics of Medical Ultrasound Charles O. Finne, MD, Minneapolis, MN
- Technique and Image Interpretation Anders Mellgren, MD, *Minneapolis*, *MN*
- Normal Ultrasound Anatomy Theodore J. Saclarides, MD, *Chicago*, *IL*
- Evaluation of Fistula/Abscess Sharon G. Gregorcyk, MD, *Dallas*, *TX*
- Evaluation of Incontinence Theodore J. Saclarides, MD, *Chicago*, *IL*
- Preoperative Staging of Rectal Cancer David E. Beck, MD, New Orleans, LA
- Post-op Follow-up and Biopsy Technique Charles O. Finne, MD, Minneapolis, MN
- Panel Discussion
- New Technologies and Equipment Linda Osborn, B&K Representative

- 3-D Ultrasound for Rectal Cancer David Schaffzin, MD, New York, NY
- Following the Tract in 3-D: Fistula Enlightenment Charles Tsang, MD, Singapore, Singapore
- Pitfalls in Ultrasound Interpretation Why and How We Make Mistakes in Cancer Staging Julio Garcia-Aguilar, MD, San Francisco, CA
- The Large Rectal Villous Adenoma Ultrasonic Considerations Anders Mellgren, MD, Minneapolis, MN
- Video Presentation Charles O. Finne, MD, Minneapolis, MN Anders Mellgren, MD, Minneapolis, MN

Hands-On Lab

- Station 1 3-D Equipment Operation and Interpretation David Schaffzin, MD and Charles Tsang, MD
- Station 2 Rectal Ultrasound Sharon G. Gregorcyk, MD
- Station 3 Anal Ultrasound Anders Mellgren, MD
- Station 4 US Guided Biopsy Julio Garcia-Aguilar, MD

Assistance from: Linda Jensen, RN, Minneapolis, MN

Objectives: Upon completion of the interactive program, participants should be able to: a) discuss the basics of ultrasound principles and physics; b) outline the indications for endorectal ultrasound in colorectal disease; c) describe the normal ultrasound anatomy of the anus, rectal wall, and surrounding structures; d) describe the technique and image interpretation of endorectal and endoanal ultrasound examinations for rectal cancer staging, evaluation of anal incontinence and fistula/abscess; and e) describe the technique of ultrasound guided needle biopsy of extrarectal pathology.

Participants may present the certificate of attendance for this course to the appropriate credentialing authority as documentation of his or her education and training. This course meets the criteria for Level 2 of the AMA's criteria for documenting achievement in new procedures/skills and will verify that the physician attended and completed the course. Award of Level 2 certificate requires a passing score on the written examination.

ASCRS designates this continuing medical education activity for 8.5 credit hours in Category 1 of the Physician's Recognition Award of the American Medical Association.

New for 2005

Laparoscopic Skills and Ultrasound Course

8:00 am - 4:00 pm • Fee: \$495 • Limit 24 • Registration Required • Lunch included (No refunds after April 17)

This *New* laparoscopic course is offered for surgeons with limited laparoscopic experience. This course will expose surgeons to essential skills such as port placement, vascular isolation and division and bowel division through didactic and laboratory experience. The laboratory session will utilize a live porcine model. Theory and technique of laparoscopic ultrasound assessment of the liver will also be included in the course.

The course will emphasize:

- Instruction and practice in laparoscopic skills which are necessary to successfully perform complex laparoscopic surgery:
 - Port placement
 - Vascular isolation and division
 - Bowel division
 - Hand port placement
 - Intra-corporeal anastomosis

■ Instruction and practice in laparoscopic ultrasound evaluation of the liver, especially assessment for metastatic disease.

Course Director: Deborah Nagle, MD, Philadelphia, PA Advisor: Peter Marcello, MD, Burlington, MA

Faculty:

- C. Neal Ellis, MD, Mobile, AL
- Steve Fassler, MD, Abingdon, PA
- Soo Kim, MD, Philadelphia, PA

- Kirk Ludwig, MD, Durham, NC
- William Timmerman, MD, Richmond, VA
- Mark Whiteford, MD, Portland, OR

Objectives: At the conclusion of this course, participants should be able to: a) know and demonstrate multiple methods to safely access the peritoneal cavity for laparoscopic surgery; b) know and demonstrate technique of vascular isolation and division, bowel isolation and division; c) understand and demonstrate laparoscopic ultrasonic assessment of the liver

ASCRS designates this continuing medical education activity for 7 credit hours in Category 1 of the Physician's Recognition Award of the American Medical Association.

Location: Drexel University College of Medicine 245 North 15th Street New College Building 16th Floor Minimally Invasive Center Philadelphia, PA

Transportation will be provided

Repeated by Popular Demand

Hand Assisted Laparoscopic Intestinal Surgery Workshop

8:30 am - 5:30 pm • Fee: \$595 • Limit 30 • Registration Required • Lunch included (No refunds after April 17)

This one-day course is designed for surgeons familiar with laparoscopic techniques who wish to expand their skills to laparoscopic intestinal surgery. It will feature lectures, interactive video presentations, and nearly one full day of surgical practice on a **cadaver** in the lab.

The course will emphasize:

- Intestinal anatomy as it relates to laparoscopic resection
- Oncologic principles of laparoscopic intestinal resection
- Bowel mobilization and devascularization

- Extracorporeal and intracorporeal anastomoses
- Stoma creation
- Hand access laparoscopic technique

Advisor: Peter Marcello, MD, Burlington, MA

Course Directors: Howard Ross, MD, Philadelphia, PA and David Larson, MD, Rochester, MN

Faculty:

- Jeffrey Cohen, MD, Hartford, CT
- James Fleshman, MD, St. Louis, MO
- Alan Herline, MD, Nashville, TN
- Peter Marcello, MD, Burlington, MA
- Matthew Mutch, MD, St. Louis, MO

- Thomas Read, MD, Pittsburgh, PA
- David Rivadeneira, MD, Stony Brook, NY
- Clifford Simmang, MD, Dallas, TX
- Toyooki Sonoda, MD, New York, NY
- Eric Weiss, MD, Weston, FL

Objectives: At the conclusion of this course, participants should be able to: a) recognize the basic principles of laparoscopic intestinal surgery including laparoscopic bowel resection, creation of stomas, suturing of enterotomies, and creation of intestinal anastomoses; b) review intestinal anatomy as it relates to laparoscopy and apply laparoscopic techniques for hemostasis and soft tissue dissection to intestinal surgery; and c) recognize the principles in laparoscopic colorectal surgery for both benign and malignant disease.

ASCRS designates this continuing medical education activity for 8 credit hours in Category 1 of the Physician's Recognition Award of the American Medical Association.

Location: University of Pennsylvania Medical School 3400 Spruce Street Philadelphia, Pennsylvania Room: Flyers/76ers Surgery Theatre Ground Level – White

Transportation will be provided

Transanal Endoscopic Microsurgery Expanding the Role of Local Excision

A minimally invasive technique for excision of rectal tumors

Didactic Session Only • Noon – 1:30 pm • Fee: \$50 • Limit 75 • Registration Required • Lunch included Didactic & Lab Sessions • Noon – 4:30 pm • Fee: \$500 • Limit 20 • Registration Required • Lunch included (No refunds after April 17)

Didactic lectures will include the history and development of TEM, preoperative assessment, indications for TEM in benign and malignant lesions, getting started, surgical technique, complications, and results. The hands-on portion will include training on bovine intestine progressing from an open trainer to a closed trainer with only endoscopic visualization. Participants will learn techniques for exposure, full and partial thickness rectal excisions, and suture closure of rectal defects.

The course will emphasize:

- Introduction/History of TEM
- Indications and Preop Evaluation
- Instrumentation Set-up and Patient Positioning
- Operative Technique
- Explanation of Lab and Video
- Hands-on Wet Lab

Course Director: Peter Cataldo, MD, Burlington, VT

Faculty:

- Gerhard F. Buess, MD, Tubingen, Germany
- John Marks, MD, Philadelphia, PA

- Bruce A. Orkin, MD, Washington, DC
- Lee E. Smith, MD, Washington, DC

Objectives: At the conclusion of this course, participants should be able to: a) understand the indications, risks, and benefits of TEM; b) understand patient selection for TEM in benign and malignant disease; c) understand the technique of TEM.

Didactic Only: ASCRS designates this continuing medical education activity for 1.5 credit hours in Category 1 of the Physician's Recognition Award of the American Medical Association.

Full Course: ASCRS designates this continuing medical education activity for 4.5 credit hours in Category 1 of the Physician's Recognition Award of the American Medical Association

Breakfast Symposium

Laparoscopy for Cancer

An ASCRS and SAGES Program
6:30 – 9:30 am • Complimentary Continental Breakfast

The goal of this course is to provide a thorough and complete discussion of the issues, methods, and results of minimally invasive colorectal resection for cancer. Specifically, the indications and controversial issues surrounding the use of minimally invasive methods in the setting of colorectal malignancies will be discussed and both the short and long term oncologic and non-oncologic results will be presented, including the latest results of the various prospective and randomized colon cancer trials. Much of this course will be devoted to presentation and discussion of the surgical techniques and approaches to minimally invasive colorectal resection. The different means of carrying out each component of a resection (flexure mobilization, devascularization, specimen removal and anastomosis) will be reviewed with a heavy reliance on the use of brief video clips. Both laparoscopic-assisted and hand-assisted methods will be discussed. Finally, the special problems and challenges associated with minimally invasive rectal resection as well as the results, to date, will be reviewed.

Course Directors: ASCRS – Richard L. Whelan, MD, New York, NY SAGES – Tonia Young Fadok, MD, Scottsdale, AZ

Session 1. Colon Cancer: Issues and Results

- The Issues
 Tonia Young Fadok, MD,
 Scottsdale, AZ
- Review of Long Term Oncologic Results Heidi Nelson, MD, Rochester, MN
- Short Term Results
 John Marks, MD, Wynnewood, PA
- Long Term Non-oncologic Complications Conor Delaney, MD, Cleveland, OH
- Immunologic and Oncologic Basic Science Talk Larry Whelan, MD, New York, NY
- Discussion

Session 2. Technique

- Laparoscopic-assisted vs Hand-assisted Methods Peter Marcello, MD, Burlington, MA
- Flexure Takedown
 Jeffrey Cohen, MD, Hartford, CT
- **Devascularization**Clifford Simmang, MD, *Dallas*, *TX*
- Specimen Removal and Anastomosis Tracey Arnell, MD, New York, NY
- **■** Discussion

Session 3. Rectal Cancer

- Specific Issues Unique to Rectal Cancer Steven Wexner, MD, Weston, FL
- Clinical Results to Date
 James Fleshman, MD, St. Louis, MO
- Basic Minimally Invasive Techniques and Approaches to Rectal Cancer Jeff Milsom, MD, New York, NY

Objectives: At the conclusion of this program, participants should be able to: a) understand the latest intermediate and long term results from the ongoing randomized open vs laparoscopic-assisted cancer colectomy trials worldwide; b) understand the short term results and the non-oncologic long term results of laparoscopic colectomy (rate of hernia formation and bowel obstruction); c) understand the latest methods and all aspects of laparoscopic-assisted resection—specifically, the laparoscopic approaches to bowel mobilization (both lateral to medial and medial to lateral), devascularization, resection, and anastomosis; d) understand the controversial topic of minimally invasive rectal cancer resection; and e) understand the difficulties posed by sphincter saving rectal cancer resection

ASCRS designates this continuing medical education activity for 3 credit hours in Category 1 of the Physician's Recognition Award of the American Medical Association

Symposium

The Pelvic Floor: Focus on Multidisciplinary Evaluation

9:30 - 11:30 am

This symposium focuses on the evaluation of pelvic floor disorders such as incontinence, defecation disorders, and prolapse. Speakers will discuss setting up a multidisciplinary pelvic floor clinic, use of standard evaluation techniques (manometry, EMG, ultrasound, defecography and other imaging techniques) to direct therapy with an emphasis on using innovative surgical procedures (artificial bowel sphincter, injectable bulking agents, radiofrequency, sacral nerve stimulation, Starr procedure) for incontinence and defecation disorders. Working with other specialists, both in and out of the operating room, will be discussed. A panel discussion will feature case presentations.

Course Directors: Susan Parker, MD, Minneapolis, MN and Patrick Ronan O'Connell, MD, Dublin, Ireland

- Setting Up a Pelvic Floor Center: Pitfalls, Billing and Structure Susan Parker, MD, Minneapolis, MN
- Fecal Incontinence: Optimal Use of the Pelvic Floor Center to Evaluate and Treat Patrick Ronan O'Connell, MD, Dublin, Ireland
- Defecation Disorders: Optimal Use of the Pelvic Floor Center to Evaluate and Treat Anders Mellgren, MD, Minneapolis, MN
- Operating with other Specialties: How, When and Why G. Willy Davila, MD, Weston, FL
- Evaluating with other Specialties: The Colorectal Patient with Urinary Incontinence Peggy Norton, MD, Salt Lake City, UT
- Stump the Pelvic Floor Experts: Panel Discussion with Case Presentations Moderator: Susan Parker, MD

Objectives: At the completion of this symposium, the participant should be able to: a) recognize the pitfalls of setting up a pelvic floor center including billing issues; b) understand the benefits and limitations of a multidisciplinary approach to pelvic floor disorders; and c) select appropriate patients for innovative surgical treatments available for incontinence and defecation disorders.

ASCRS designates this continuing medical education activity for 2 credit hours in Category 1 of the Physician's Recognition Award of the American Medical Association

Luncheon Symposium

Patient Safety in Colon and Rectal Surgery

11:30 am - 1:30 pm • Lunch Included

Centers of Excellence are commonly described in academic or community hospital centers. Parameters for designation have not been standardized. They may relate to shortened length of stay and reduced readmission rates, reduced postoperative complications, lower mortality rates, research and training programs, specialty care with specified disease management programs, higher clinical volume, higher nurse to patient ratios, and lower costs for care. Participants will learn techniques for measuring these outcomes and how these outcomes relate to defining a Center of Excellence.

Methods of perioperative prophylaxis will be discussed with the risks of such treatment. Breakthrough deep vein thrombosis or pulmonary embolism in the prophylaxed patient will be discussed with a management plan for the clinician.

The physiologic mechanism of Ileus will be presented, along with evidence as to whether it is a protective feature or it needs to be prevented. The methods of prevention, including intra-abdominal techniques, use of nasogastric tube, early feeding, and medications will be debated. Postoperative treatment of prolonged ileus will be discussed with regard to medical options.

Failure of surgical instruments to properly function have been attributed to postoperative complications, i.e. suture line dehiscence, bleeding, and abscess formation. The practice of "reprocessing surgical instruments" will be discussed with its potential association with these complications. The participant will understand which instruments have the potential to be reprocessed and what questions to ask about reprocessing that will help to contribute to patient safety.

Moderator: Lester Rosen, MD, Allentown, PA

- Perioperative Prevention or Treatment of Deep Vein Thrombosis and Pulmonary Embolism Mark Cipolle, MD, Allentown, PA
- Criteria for Centers of Excellence Thomas Read, MD, Pittsburgh, PA

- Prevention or Treatment of Postoperative Ileus Richard Billingham, MD, Seattle, WA
- Reprocessing of Operative Equipment Robert Barnett, MD, *Topeka*, KS

Objectives: At the conclusion of this session, participants should be able to: 1) understand the incidence of deep vein thrombosis and pulmonary embolism following Colon and Rectal Surgery; 2) develop techniques for measuring outcomes and how these outcomes relate to defining a Center of Excellence; 3) understand the physiologic mechanism of Ileus; 4) understand which instruments have the potential to be reprocessed and what questions to ask about reprocessing that will help to contribute to patient safety.

ASCRS designates this continuing medical education activity for 2 credit hours in Category 1 of the Physician's Recognition Award of the American Medical Association

Core Subject Update

1:30 - 4:30 pm

The Core Subject Update – one of the highlights of the meeting – was developed by ABCRS and ASCRS to assist in the educational and recertification process of colon and rectal surgeons. Questions developed from the material presented at this meeting are included in the ABCRS's recertification data bank.

Moderator: Elisa Birnbaum, St. Louis, MO

- **Hemorrhoids**Peter Cataldo, MD, *Burlington*, VT
- Benign and Malignant Anal Tumors Matthew Mutch, MD, St. Louis, MO
- Functional Bowel Disorders
 Michael Snyder, MD, Houston, TX

- Perioperative Management
 Kristen Bass Wilkins, MD, Edison, N7
- Ulcerative Colitis
 Debra Ford, MD, Washington, DC
- Diverticulitis
 Janice Rafferty, MD, Cincinnati, OH

Objectives: At the conclusion of this session, participants should be able to: a) understand the pathophysiology and etiology of hemorrhoidal disease; understand the office and operative management of symptomatic hemorrhoids; b) understand the diagnosis of benign and malignant anal tumors; and understand the treatment of benign and malignant anal tumors; c) understand the diagnosis and treatment of IBS; and understand the diagnosis and treatment of functional constipation; d) understand preoperative risk stratification strategies; and implement perioperative management strategies to reduce perioperative risks and reduce postoperative length of stay; e) understand the etiology theories and pathophysiology of chronic ulcerative colitis; and review the medical and surgical management of chronic ulcerative colitis; f) understand the algorithms for diagnosis and treatment of simple and complicated diverticulits; and describe principles of surgical treatment of diverticulitis

ASCRS designates this continuing medical education activity for 3 credit hours in Category 1 of the Physician's Recognition Award of the American Medical Association

Symposium

Complicated Wound and Stoma Management

4:30 - 6:30 pm

This symposium will enhance the knowledge of participants of complex wounds and stoma specifically increasing familiarity with stoma devices and appliances. New techniques for wound care and management will be discussed. Participants will learn of the availability and participation of Enterostomal Therapists in the management of complex wounds.

Course Director: Ian Lavery, MD, Cleveland, OH

- Introducation
 Ian Lavery, MD, Cleveland, OH
- Surgical Principles in Stoma Construction Ian Lavery, MD
- Troubleshooting Stoma related Problems and Treating Dermatologic Conditions Paula Erwin-Toth, MSN, RN CETN, Cleveland OH
- Principles in the Management of Complicated Wounds TBD
- Adjuncts to Wound Healing: A review of various commercially available products Marc Brand, MD, Chicago, IL
- **■** Panel Discussion

Objectives: At the conclusion of this symposium, participants should be able to: a) List peristomal skin complications and review their treatment; b) discuss the importance of stoma siting; c) demonstrate stoma siting techniques and methods of construction; d) discuss the factors that may lead to incisional complications; e) identify the decision making process for leaving an incision open vs. closed; f) review new technologies that offer microbial barriers for use on open or closed incisions, i.e. silver dressing.

ASCRS designates this continuing medical education activity for 2 credit hours in Category 1 of the Physician's Recognition Award of the American Medical Association.

Welcome Reception

7:00 – 10:00 pm Constitution Center

(transportation provided)

Complimentary hors d'oeuvres and cocktails.

Monday, May 2

Residents' Breakfast



7:00 – 8:00 am
Colon and Rectal Surgery:
The Future Can't Be Brighter

David Schoetz, MD

Chairman Emeritus, Department of Colon and Rectal Surgery Chairman, Department of Medical Education

Labey Clinic, Burlington, MA
Professor of Surgery, Tufts University
School of Medical, Boston, MA
Complimentary Continental Breakfast
Residents only • Registration required

"Meet the Professor" Breakfasts

6:45 – 7:45 am

Limit: 25 per breakfast • Fee: \$35

Continental Breakfast • Registration required

Registrants are encouraged to bring problems and questions to this informal discussion. Please register early and indicate your 1st and 2nd choice on the Physicians' Registration Form. All rooms are on the Exhibit Level.

Code Subject/Discussants

- M-1 Anal Intrepithelia Neoplasia
 Drs. Lester Gottesman, Mark Welton
- M-2 Laparoscopy for Cancer Drs. Karim Alavi, Heidi Nelson
- M-3 Extended Pelvic Resection for Advanced Disease Drs. Robert Beart, Julio Garcia-Aguilar
- M-4 Functional Issues Following Proctectomy
 Drs. Clifford Ko, Robin McLeod
- M-5 The Difficult Perineal Wound Drs. Jose Cintron, Jose Guillem
- M-6 Pitfalls of Private Practice
 Drs. Patrick Brillant, Steven Stryker

8:00 am

Welcome and Opening Announcements

8:30 am

Rectal Cancer - 1

S₁

S2

■ Preoperative Radiotherapy – Are There Long-term Benefits? A Follow-up of the Swedish Rectal Cancer Trial

Folkesson, J., Birgisson, H., Pahlman, L., Cedermark, B., Glimelius, B., Gunnarsson, U., Uppsala, Sweden and Stockholm, Sweden

■ The Impact of Adjuvant Radiotherapy on Sexual Dysfunction in Male Patients Undergoing Resection for Rectal Cancer

Heriot A. Telekis P. Negry P. Ferrie, V. Lavary

Heriot, A., Tekkis, P., Neary, P., Fazio, V., Lavery, I., Cleveland, OH and London, UK

- Does Timing of Pelvic Radiotherapy Affect Long Term Function and Quality of Life after Coloanal Anastomosis for Distal Rectal Cancers? S3 Hassan, I., Larson, D., Gaw, J., Cima, R., Chua, H., Hahnloser, D., Stulak, J., O'Byrne, M., Larson, D., Pemberton, J., Wolff, B., Rochester, MN and Jacksonville, FL
- Complete Tumor Regression Following Chemo-radiotherapy for Rectal Tumors – Is Conservative Management with Active Surveillance Appropriate? S⁴ Pokala, N., Delaney, C., Prok, A., Dvoretsky, P., Fazio, V., Lavery, I., Cleveland, OH
- Straight Coloanal vs. Colonic J Pouch vs. Transverse Coloplasty for RectalReconstruction after Low Anterior Resection: A Systematic Review S5 Brown, C., Fenech, D., McLeod, R., Toronto, ON, Canada
- Long-term Outcome of Local Excision for EarlyRectal Cancer S6 Goldberg, J., Parker, S., Rothenberger, D., Madoff, R., Finne, C., Goldberg, S., Garcia-Aguilar, J., Mellgren, A., Minneapolis, MN and San Francisco, CA
- Outcome of Radical Surgery Following Local Excision for Rectal Cancer with Poor Prognostic Features
 Gagliardi, G., Newton, T., Bailey, H., Houston, TX

Harry E. Bacon Lectureship



9:40 – 10:10 am

New Systemic Therapy
for Colorectal Cancer

Michael J. O'Connell, MD

Director, Allegheny General Hospital
Cancer Center and Chair, Division of
Medical Oncology, Pittsburgh, PA
Professor of Human Oncology,
Drexel University College of Medicine

Monday, May 2

S8

S11

10:50	am		

Rectal Cancer – 2

- MRI Accurately Predicts the CRM Status of Rectal Cancer in a Multicentre, Multidisciplinary European
 - Daniels, I., MERCURY Study Group, Basingstoke, UK
- Demographic Differences Contribute to Disparities in Outcomes between Low and High Volume Centers in Patients Undergoing Surgery for Rectal Cancer Savatta, S., Melton, G., Schrag, D., Arons, R., Wong, D., Temple, L., New York, NY
- Phenotypic Factors can Predict the Risk of Proctectomy after Total Colectomy and Ileorectal Anastomosis for Patients with Familial Adenomatous Polyposis -A Multifactorial Model **S10** Tekkis, P., Heriot, A., Gallagher, M., Nicholls, R., Fazio, V., Phillips, R., Church, J., London, UK and Cleveland, OH
- Sacral Resection for Colorectal Cancer: **Analysis of Morbidity and Treatment Results** Melton, G., Paty, P., Boland, P., Healey, J., Savatta, S., Casas-Ganem, J., Guillem, J., Weiser, M., Cohen, A., Minsky, B., Wong, D., Temple, L., New York, NY and Lexington, KY
- Outcome of the Perineal Wound after Abdominal **Perineal Resection for Anal Cancer S12** Kwaan, M., Christian, C., Shellito, P., Breen, E., Zinner, M., Bleday, R., Boston, MA
- **■** Extent of Surgical Resection does not Affect Disease Outcome: 20-Year Analysis of Changing Treatment Strategies for Anorectal Melanoma **S13** Yeh, J., Shia, J., Hwu, W., Busam, K., Paty, P., Guillem, J., Coit, D., Wong, W., Weiser, M., New York, NY and Houston,
- Loss of IGF-2 Genomic Imprinting on Circulating IGF-2 and Cell Proliferation among Patients with **S14** Colorectal Neoplasia Zhao, R., Berho, M., Daniel, N., Nogueras, J., Ramos, A., Sands, D., Weiss, E., Wexner, S., Giardiello, F., Cruz-Correa, M., Weston, FL and Baltimore, MD

Presidential Address



12:00 - 12:30 pm Latch On to the Affirmative: Don't Mess with Mister in Between Bruce G. Wolff, MD Professor of Surgery, Mayo Medical School Consultant, Colon & Rectal Surgery

Mayo Clinic, Rochester, MN

12:30 pm

- **■** Lunch Break
- Poster Walk-Arounds Box lunches will be available in the exhibit hall (Fee: \$35 – Registration required for lunches)

1:30 pm

Colorectal Cancer

- A Patient's Race/Ethnicity does not Explain the Underuse of Appropriate Adjuvant Therapy in **Colorectal Cancer S15** Ko, C., Sekeris, E., McGory, M., Zingmond, D., Los Angeles, CA
- The Benefits of Counseling in Families Likely to Have HNPCC, and Why the Families Do Not Get It **S16** Church, J., Fay, S., Shenal, J., Cleveland, OH
- Outcome of Intensive Follow-up after Curative Surgery for Colorectal Cancer: A Retrospective Study by the Japanese Study Group on Postsurgical Surveillance of Colorectal Cancer **S17** Kobayashi, H., Mochizuki, H., Sugihara, K., Morita, T., Kotake, K., Kameoka, S., Takahashi, K., Teramoto, T., Hase, K., Ohya, M., Maeda, K., Hirai, T., Kameyama, M., Shirouzu, K., Muto, T., Tokyo, Japan
- Malignancies of the Appendix: **Beyond Case Series Reports S18** Kang, H. O'Connell, J., Maggard, M., Ko, C., Seoul, South Korea and Los Angeles, CA
- Is a Formal Cancer Resection Necessary for Patients with Benign Colorectal Polyps Who Come to Surgery? **S19** Balik, E., Feingold, D., Arnell, T., Ansari, P., Boulay, C., Forde, K., Huang, E., Nihalani, A., Belizon, A., Whelan, R., New York, NY
- Multivariate Analysis of Predictive Factors for Early Postoperative Death after Surgery in Patients with Colorectal Cancer and Synchronous **S20 Unresectable Liver Metastases** Panis, Y., Vibert, E., Alves, A., Pocard, M., Valleur, P., Paris, France
- Clinical Outcomes of Patients with Large Bowel **Obstruction Treated with Endoluminal Stenting S21** Sanz, C., Caliendo, F., Chinn, B., Gilder, M., Notaro, J., Oliver, G., Wilkins, K., Salvati, E., Eisenstat, T., Edison, NJ and Livingston, NJ

Monday, May 2

Norman Nigro Research Lectureship



2:45 – 3:15 pm
Impact of the 80-Hour
Work Week
Debra DaRosa, PhD
Professor of Surgery,
Vice Chair of Education
Northwestern University Medical School
Department of Surgery, Chicago, IL

5:30 – 6:30 pm Poster Walk-Arounds

Relax and enjoy a glass of wine while you talk to poster authors. This is an opportunity to pose questions and engage in discussions with the authors and other attendees in an informal setting. Wine and cheese will be served. Authors are required to be at their poster.

3:15 – 4:00 pm

■ Refreshment Break in Exhibit Hall

4:00 pm

Improving Patient Outcomes

- Economic Burden and Risk Factors Associated with ICD-9 Coded Postoperative Ileus:
 Results from US Hospital Data during 2002 Senagore, A., Delaney, C., Wang, P., Saunders, W., Matuszewski, K., Moss, B., Bell, T., Fort, J., Cleveland, OH, Charlotte, NC, Oak Brook, IL, Exton, PA and RTP, NC
- Post-operative Morbidity Associated with Laparotomy:
 Results from a Pooled Analysis of Three Randomized
 Controlled Trials of Alvimopan in the Management
 of POI S23
 Delaney, C., Wolff, B., Viscusi, E., Senagore, A., Du, W.,
 Techner, L., Wallin, B., Cleveland, OH, Rochester, NY,
 Philadelphia, PA and Exton, PA
- A Systematic Cochrane Review of Prophylactic Antibiotics in Elective Colon & Rectal Surgery Nelson, R., Glenny, A., Song, F., Chicago, IL and Manchester, UK
- Prospective Randomized, Double-blind,
 Placebo-controlled Study of Pre- and Postoperative
 Administration of Valdecoxib, a COX-2-specific
 Inhibitor, as Opioid-sparing Analgesia in Patients
 Undergoing Major Colorectal Resections
 Sim, R.. Cheong, D., Tan, J., Singapore, Singapore
- Intra-operative Fluid Optimisation Improves
 Outcome after Elective Colorectal Surgery
 Noblett, S., Snowden, C., Hainsworth, P., Horgan, A.,
 Newcastle Upon Tyne, UK
- Thirteen years of Colorectal Surgery in the Commonwealth of Pennsylvania: Do Trends Show a Change in Outcome? Paonessa, N., Rosen, L., Wasser, T., Allentown, PA
- Defining Best Practices for Rectal Cancer:
 A Prospective, Population-based Analysis
 Hyman, N., Cataldo, P., Healey, C., Osler, T., Burlington, VT

"Meet	the	Professor"	Breakfasts
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6:45	_	7:45	an
6:45	-	7:45	an

Limit: 25 per breakfast • Fee: \$35

Continental Breakfast • Registration required

Registrants are encouraged to bring problems and questions to this informal discussion. Please register early and indicate your first and second choice on the Physicians' Registration Form.

Code Subject/Discussants

- T-1 Diverticular Disease:

 Are the Indications for Surgery Changing?

 Drs. Neil Hyman and Michael Spencer
- T-2 Surgical Management of Obstructed Defecation Drs. Tracy Hull and Susan Parker
- T-3 Laparoscopy for IBD

 Drs. Juan Nogueras and Tonia Young-Fadok
- T-4 Anal Condyloma
 Drs. Bard Cosman and Petar Vukasin
- T-5 High Fistulas: Flap or Fibrin Glue Drs. Herand Abcarian and Neal Ellis
- T-6 Remicaide and Fistulizing Crohn's Disease Drs. Stephen Gorfine and Scott Strong

8:00 am

Benign Disease

- Sacral Nerve Stimulation in Fecal Incontinence S29
 Rasmussen, O., Ronholt, C., Michelsen, H., Sorensen, M.,
 Christiansen, J., Laurberg, S., Buntzen, S., Copenhagen,
 Denmark, Aarhus, Denmark and Herley, Denmark
- Sacral Neuromodulation in Patients with Fecal Incontinence: A Randomized Controlled Study on Efficacy and Quality of Life

 Tjandra, J., Lim, J., Green, C., Melbourne, Australia
- Impact of Referral of Patients with Pelvic Floor Related Colorectal Diagnoses to a Multispecialty Pelvic Floor Clinic Hammond, K., Ellis, C., Memphis, TN and Mobile, AL
- Predicting the Risk of Anastomotic Failure:

 Development of a Simple and Accurate Scoring

 System

 Attard, J., Buie, W., MacLean, A., al-Mohammadi, S.,

 Calgary, AB, Canada
- Routine Contrast Imaging of Low Pelvic Anastomosis before Defunctioning Ileostomy Closure:
 Is it Necessary?
 Kalady, M., Mantyh, C., Ludwig, K., Durham, NC
- Management of Recurrent Rectal Prolapse: Surgical Approach Influences Outcome Steele, S., Goetz, L., Minami, S., Goldberg, S., Karulf, R., Madoff, R., Mellgren, A., Parker, S., Minneapolis, MN

- Panniculectomy in Morbidly Obese Patients Undergoing Rectosigmoid Resection. A Surgical Strategy S35 Chaudhry, V., Marecik, S., Prasad, L., Abcarian, H., Chicago, IL and Park Ridge, IL
- Bowel Sounds, Flatus, and Bowel Movement Do Not Correlate with Tolerance of Oral Intake Following Major Abdominal Surgery: A Prospective Study Brozovich, M., Read, T., Andujar, J., Janosky, J., Caushaj, P., Pittsburgh, PA
- Obesity Is a Risk Factor in the Management of Patients with Acute Diverticulitis Essani, R., Ault, G., Beart, R., Vukasin, P., Kaiser, A., Los Angeles, CA
- Validation of a Desmoid Tumor Staging System:
 Is it a Clinically Helpful Way of Separating Patients
 with Intraabdominal FAP-Associated Desmoid
 Disease by Prognosis and Tumor Behaviour?
 Church, J., Lynch, A., Cleveland, OH
- Evolving Practice Patterns in Colon and RectalSurgery Schoetz, D., Burlington, MA

Parviz Kamangar Humanities in Surgery Lectureship



10:30 – 11:00 am

Futility and Advance Directives in 2005: Don't Ask – Don't Tell?

Peter Angelos, MD, PhD

Associate Professor of Surgery

Director, Section of Endocrine Surgery

Northwestern University

Chicago, IL

11:00 am

Inflammatory Bowel Disease

- Adverse Outcomes Relate to Operative Experience Following Ileal Pouch Anal Anastomosis

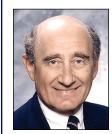
 Tekkis, P., Fazio, V., Remzi, F., Heriot, A., Merlino, J., Lavery, I., Senagore, A., Delaney, C., Strong, S., Hull, T., Church, J., Cleveland, OH
- A Prospective, Multivariate Analysis of Perioperative Clinical Factors Associated with Acute or Chronic Pouchitis After Ileal-Pouch Anal Anastomosis
 Ognibene, S., Chelly, M., Fleshner, P., Los Angeles, CA
- Mucosal Dysplasia in Ileal Pelvic Pouches
 After Restorative Proctocolectomy
 S42
 Nilubol, N., Scherl, E., Bub, D., Gorfine, S., Marion, J.,
 Harris, M., Kornbluth, A., Lichtiger, S., Rubin, P., George, J.,
 Chapman, M., Harpaz, N., Present, D., Tejero, C., Bodian, C.,
 Bauer, J., New York, NY

■ Sexual Function in Women After Ileal Pouch-Anal Anastomosis Goetz, L., Madoff, R., Baxter, N., Mellgren, A., San Francisco, CA and Minneapolis, MN	S43
■ Short and Long Term Outcomes of a 'Fast-track' Postoperative Care Pathway for Ileoanal Pouch Surgery Kariv, Y., Delaney, C., Senagore, A., Church, J., Ravas, J., Fazio, V., Cleveland, OH	S44
■ Crohn's Colitis: Does the Incidence of Dysplasia or Cancer Support an Aggressive Approach to Colonoscopic Surveillance? Maykel, J., Hagerman, G., Mellgren, A., Baxter, N., Alavi, Rossi, H., Rothenberger, D., Madoff, R., Minneapolis, M.	

Rossi, H., Rothenberger, D., Madoff, R., Minneapolis, MN Increased Presence of NOD2 Mutations in Patients Undergoing Ileocolectomy for Crohn's Disease S46 Poritz, L., Galka, E., Zhang, W., Thompson, J., Boyer, M.,

■ Laparoscopic-Assisted Ileocolic Resection for Crohn's –Is the Extent of Resection Compromised? S47 Edden, Y., Harris, M., Sher-Afgan, K., Ciardullo, J., Bub, D., Gorfine, S., Bauer, J., New York, NY

Memorial Lectureship honoring Eugene S. Sullivan MD



12:20 – 12:40 pm
Perineal Approaches for Rectal
Procidentia: What is the Data?

Stanley Goldberg, MD, FACS, HonFRACS(Aust), HonFRCS(Eng), HonAFC(Fr), HonFRCPS(Glasg), HonRSM(Eng), HonFPCS(Phil), HonFRCS(Edin) Clinical Professor of Surgery Division of Colon and Rectal Surgery University of Minnesota Minneapolis, MN

Luncheon Symposium

Koltun, W., Hershey, PA

Advanced Endoscopy and GI Imaging

12:40 - 2:30 pm

This symposium will discuss: Colonoscopy, Colorectal Stent, CT Colonography, and Capsule Endoscopy. Effective techniques in colonoscopy and polypectomy, including tattooing and submucosal injection; participants will learn when and how to deploy the stents in colorectal obstruction; participants will learn about where we are now regarding CT colonography. Will it replace colonoscopy in screening colorectal cancers? When can it be performed without bowel preparation? Colorectal surgeons have limited exposure to Capsule Endoscopy but it is important that we be informed of this new technology.

Course Director: Santhat Nivatvongs, MD, Rochester, MN

- Effective Techniques in Colonoscopy and Polypectomy, including Tattooing and Submucosal Injection Santhat Nivatvongs, MD, Rochester, MN
- When and How to Deploy the Stents in Colorectal Obstruction Brian Sweeney, MD, Minneapolis, MN

- CT Colonography Robert MacCarty, MD, Rochester, MN
- Capsule Endoscopy Scott Ketover, MD, Minneapolis, MN

Objectives: At the conclusion of this session, participants should be able to: a) understand the safe and accurate techniques in performing colonoscopy and removal of polyps; b) understand how and when to use Stents in colorectal obstruction; c) evaluate the rapid advances in CT Colonography; and d) understand the indications, contraindications and the usefulness of Capsule Endoscopy.

ASCRS designates this continuing medical education activity for 1.75 credit hours in Category 1 of the Physician's Recognition Award of the American Medical Association.

Socioeconomic Update

Surgical Practice Management: Tools for Financial Success

2:30 – 6:45 pm • Fee: \$120 • Registration Required • Residents and Additional Office Staff \$50 (No refunds after April 17)

This program will provide a primer in understanding the revenue cycle, improving practice efficiencies, and the role of e-practice enhancements. We will also cover developing a practice budget, and contract analysis. The program will also highlight the importance of denial tracking, contract compliance, payer mix analysis as well as situational strategic service line or payer initiatives. (Time permitting, there will be an update on Pay4Play and the other options)

Course Director: David A. Margolin, MD, New Orleans, LA

Topics Include:

- Revenue Cycle and its Importance in Your Practice
- **■** Benchmarks and Financial Performance
- Contract Analysis for Specialists and Negotiating Strategies
- Service Line Cost Analysis / E&M Comparative Analysis
- **Tools in the Information Age** (time permitting)

Presenters:

Frank Opelka, MD

Co-Founder: Surgical Practice Management, LLC Vice Chief of Surgery, Finance Chief of Surgery, Beth Israel Deaconess Medical Center Boston, Massachusetts

■ Blair Keagy, MD FACS

George Johnson Distinguished Professor of Surgery Chief, Division of Vascular Surgery University of North Carolina Chapel Hill, North Carolina

■ David Margolin, MD

Staff Surgeon Ochsner Clinic Foundation New Orleans, LA

Objectives: At the conclusion of this session, participants should be able to: a) understand components of the revenue cycle; b) understand excel tools that will analyze their practice; c) perform a contract analysis and negotiation skill development; and d) set a strategic financial plan for the next year.

ASCRS designates this continuing medical education activity for 4 credit hours in Category 1 of the Physician's Recognition Award of the American Medical Association

Research Forum

2:30-5:00 pm

This Forum will highlight the works of young researchers, such as residents in surgery and colon and rectal surgery. It is a forum for new ideas, works in progress and completed projects. Ten papers will be presented with a three minute discussion by an invited discussant immediately followed by three minutes of discussion from the floor.

, ,			
Cyclin D1 and p27 Dependent GI Cell Cycle Arrest no Significant Apoptosis are Associated with Lycopo Induced Inhibition of Growth of WiDR Human Co Cancer Cells	ene	■ Hyaluronan Increases Colon Carcinoma Cell Growth in Vivo C. Wilson, M. Wheeler, J. McCarthy, K. Bullard, Minneapolis, MN	RF 6
D. Debnath, I. Brown, S. Heys, F. Thies, A. Schofield, <i>Aberdeen</i> , <i>UK</i>		■ Inhibition of Sympathetic Pathways Improves Postoperative Ileus in the Upper and Lower	
Induction of Humoral Immune Responses in Color Cancer Patients with a Dendritic Cell Vaccine E. Valsdottir, R. Barth, Jr., <i>Lebanon</i> , <i>NH</i>	ectal RF 2	Gastrointestinal Tract T. Takahashi, H. Fukuda, D. Tsuchida, C. Mantyh, T. Pappas, K. Ludwig, <i>Durham</i> , <i>NC</i>	RF 7
Genotypic Alterations Associated with HPP1 Overexpression in Colon Cancer D. Shibata, L. Zhang, F. Sato, J. Yin, K. Cai, S. Meltzer, Tampa, FL and Baltimore, MD	RF 3	Microarray-based Identification of Matrix Metalloproteinase-9 Upregulation Following Laparotomy Relative to CO2 Pneumoperitoneum in a Murine Model	RF 8
Molecular Biological Characteristics of Colorectal Polyps in Young Patients D. Koh, M. Luchtefeld, D. Kim, H. Attal, T. Monroe, Grand Rapids, MI	RF 4	 P. Sylla, I. Kirman, S. Jain, R. Whelan, New York, NY Invariant Chain (CD74) Expression in Human Colorectal Cancer Varies with Tumor Microsatellite Instability 	RF 9
Prediction of Liver Metastasis after Curative Colord Cancer Surgery by Using DNA Array Analysis O. Takata, Y. Kawamura, F. Konishi, J. Sasaki, T. Kai, Y. Miyakura, H. Nagai, T. Tsukamoto, Saitama, Japan	ectal RF 5	 H. Ni, X. Deng, J. Faria, Montreal, Canada New Paradigm in Understanding the Etiology of an Experimental Model of Ulcerative Colitis E. Chan, N. Li, D. Reynolds, E. Zakaria, R. Garrison, 	r RF 10

Objectives: Upon completion of this session, participants should be able to: 1) have a better understanding of the biology of the effect and mechanism of action of antioxidant lycopene, a common constituent of tomato, on a common cancer cell line; 2) comprehend the concept of dentritic vaccines and their potential application as adjuvant treatment for metastatic colorectal cancer patients; 3) discuss the effects of HPP1 overexpression on global gene expression; 4) be aware of the potential yield of MSI testing in young patients presenting with colorectal polyps, with or without a family history of colorectal polyps and cancer; be made aware of MLH1 promoter hypermethylation as a possible step in the colorectal carcinogenesis pathway; the incidence of this hypermethylation and MMR gene expression in young patients with colorectal polyps is presented; 5) predict metachronous liver metastasis for adjuvant therapy and follow up by using cDNA array; 6) understand the role that pericellular hyaluronan plays in promoting colon carcinoma cell growth in an animal model; 7) understand how sympathetic neural pathways are in part responsible for post-operative ileus; 8) understand the application of microarray technology to surgical research and learn about the effects of different surgical modalities on T cells; 9) understand CD74 expression patterns in human colorectal cancer; understand how CD74 expression in colorectal cancer may affect patient outcome; and 10) identify differences of the colonic microcirculation between normal colon and 5% dextran sodium sulfate colitis (an experimental rodent model of ulcerative colitis).

Louisville, KY

ASCRS designates this continuing medical education activity for 2.5 credit hours in Category 1 of the Physician's Recognition Award of the American Medical Association.

New for 2005

General Surgery Residents' Forum

3:30- 5:00 pm

The ASCRS is proud to sponsor the *General Surgery Residents' Forum* for the first time this year. The goal of this Forum is for General Surgery residents to have increased experience and participation in the ASCRS academic process. Six superb papers have been selected this year for this inaugural event. Each paper will be presented by a general surgery resident. A second general surgery resident has been asked to review and critique the paper as part of the discussion. The abstracts cover a variety of colorectal topics and are being presented by residents from all across North America.

- Combination Propofol/Ketamine is a Safe and Efficient
 Anesthetic Approach to Anorectal Surgery
 M. Sun, J. Canete, J. Friel, S. Singla, C. Paterson,
 T. Counihan, Worcester, MA
- Preoperative Anal Manometry Predicts Outcome
 Following Perineal Proctectomy for Full Rectal
 Prolapse GS 2
 S. Glasgow, E. Birnbaum, I. Kodner, J. Fleshman, D. Dietz,
 St. Louis, MO
- Effect of Chemoradiation on Functional Results and Quality of Life in Patients Undergoing Low Anterior Resection for Rectal Cancer GS 3
 S. MacKenzie, A. MacLean, W. Buie, J. Heine, Calgary, AB, Canada
- Coloanal Anastomotic Integrity after Total Mesorectal Excision is not Compromised by Preoperative Chemoradiation for Rectal Cancer GS 4
 M. Kalady, M. Onaitis, C. Mantyh, D. Tyler, K. Ludwig, Durham, NC
- Surgical Treatment and Outcome of Patients
 Undergoing Resection of Ileocolic Crohn's Disease: A
 Transatlantic Comparison between American and
 German Centers

 F. Rocha, F. Thermann, E. Matros, E. Breen, H. Dralle, R.
 Bleday, Boston, MA and Halle, Germany
- Identification of Predictive Factors for Perioperative Blood Transfusion in Colorectal Resection Patients GS 6 J. Kim, V. Konyalian, P. Christenson, M. Dixon, R. Huynh, Z. Murrel, R. Mittel, S. Bhaheetharan, E. Kim, M. Stamos, R. Kumar, Torrance, CA and Orange, CA

Objectives: Upon completion of this session, participants should be able to: 1) assess the safety and efficacy of current anesthetic regimens for prone position anorectal surgery; 2) understand the possible predictive value of anal manometry prior to proctectomy for rectal prolapse; 3) understand the effects of neoadjuvant and adjuvant chemoradiation on post operative functional results and quality of life following mesorectal excision for rectal cancer; 4) analyze the effects of preoperative chemoradiation on anastomotic leak rates following total mesorectal excision and coloanal anastomosis for rectal cancer; 5) appreciate different surgical practices and outcomes in resection of ileocolic Crohn's disease between US and European teaching hospitals; 6) understand that patients with higher number of comorbidity, preoperative hematocrit less than 30, and age greater than 65 are at higher risk for requiring perioperative blood transfusion while undergoing colorectal surgery and should be considered for autologous blood transfusion and erythropoietin.

ASCRS designates this continuing education activity for 2 credit hours in Category 1 of the Physician's Recognition Award of the American Medical Association.

Retirement Workshop

Preparing for Life After Practice

3:30- 5:00 pm

This symposium is designed to honor the important contributions the senior members of our Society make and outline activities to keep them involved with the Society and its programs. We hope this presentation will provide useful information for members preparing for retirement and provide meaningful discussion as to how the Society could continue to benefit from their talents as it seeks out new ways to promote its mission and the disease its membership treats.

Course Director: J. Byron Gathright, MD, New Orleans, LA

- Introduction
 J. Byron Gathright, MD, New Orleans, LA
- Successful Aging for Life After Practice Proven Insider Tips to go the Distance Edward Creagan, MD, Professor of Medical Oncology Mayo Clinic, *Rochester*, MN
- Financial Tips
 Community Counseling Services, *Chicago*, *IL*
- Panel Discussion
 Moderator: J. Byron Gathright, MD
 Panelists: Drs. Ernestine Hambrick, Bertram Portin and Theodore Schrock

Objectives: At the conclusion of this session, participants should be able to: a) facilitate ongoing relationships for senior members of the Society; and b) explore opportunities for members to remain active with the society and other organizations caring for the diseases of the colon and rectum.

ASCRS designates this continuing education activity for 1.5 credit hours in Category 1 of the Physician's Recognition Award of the American Medical Association.

5:00 – 6:00 pm Residents Reception

Open to general surgery residents and program directors.

7:00 – 11:00 pm

Annual Reception
and Dinner Dance

Wednesday, May 4

Breakfast Symposium

The Medico-Legal Implications of Caring for Patients and Families with Hereditary Colorectal Cancer Syndromes

7:00 - 8:30 am • Registration Required • Fee: \$35

Participants will be made aware of the challenging legal and ethical issues in caring for patients and families with a syndrome of hereditary colorectal cancer. They will learn the appropriate advice to give and actions to take in matters of notifying relatives and counseling patients. Participants will learn the pitfalls in genetic testing and the likelihood of genetic discrimination.

Course Director: James Church, MD, Cleveland, OH

- **Introduction**James Church, MD, *Cleveland*, *OH*
- The Patients' and Counselors' Point of View Peggy Conrad, MS, CGC, San Francisco, CA
- The Doctor's Point of View Henry T. Lynch, MD, Omaha, NE

- The Lawyer's Point of View Patrick M. Lynch, JD, MD, Houston, TX
- **■** Case Presentations
- **■** Questions from the Audience

Objectives: At the conclusion of this program, participants should be able to: a) understand the challenging legal and ethical issues in caring for patients and families with a syndrome of hereditary colorectal cancer; b) learn the appropriate advice to give and actions to take in matters of notifying relatives and counseling patients; c) understand the pitfalls in genetic testing and the likelihood of genetic discrimination

ASCRS designates this continuing medical education activity for 1.5 credit hours in Category 1 of the Physician's Recognition Award of the American Medical Association.

Wednesday, May 4

Topic: Anal Disease – I	
■ Recent Smoking is a Risk Factor for Anal Abscess and Fistula Cosman, B., Devaraj, B., San Diego, CA	S48
■ Anal Fissure-fistula – a Single Institution's Experience Feingold, D., Azarani, T., Balik, E., Forde, K., Arnell, T., Whelan, R., New York, NY	S49
■ Role of Anorectal Fistuloscopy in Evaluating Complex Anorectal Fistulas Johnson, E., Gaw, J., Armstrong, D., Atlanta, GA	S50
■ Efficacy of Biodegradable 'Collagen Plug' vs Fibrin Glue in Closure of Anorectal Fistulas Johnson, E., Gaw, J., Armstrong, D., Atlanta, GA	S51
■ Fecal Incontinence in Middle-aged Women: Who is at Risk? Varma, M., Wassyl-Fyr, C., Thom, D., Van Den Eeden, S Brown, J., San Francisco, CA and Oakland, CA	S52
■ Anal Sphincter Injuries at Childbirth: A Randomized Study Comparing Urgent and Delayed Repair Nordenstam, I., Zetterstroem, I., Lopez, A., Johansson, C.	S5 3

Anzen, B., Parker, S., Mellgren, A., Stockholm, Sweden

■ Benefits of Injectable Silicone Biomaterial for Fecal

is Sustained at 12 Months - a Randomized Trial

Incontinence due to Internal Sphincter Dysfunction

Tjandra, J., Lim, J., Hiscock, R., Royal Parade, Parkville,

and Minneapolis, MN

Australia and Melbourne, Australia

8:30 am

Anal Disease – 2

- Outcomes after Transanal Repair of Rectoceles
 Hammond, K., Ellis, C., Memphis, TN and Mobile, AL
- Clinical and Physiological Outcomes After
 Transvaginal Rectocele Repair
 Yamana, T., Shinjuku-ku, Tokyo, Japan
- Stapled Trans-Anal Rectal Resection (S.T.A.R.R.) for Rectal Prolapse and Rectocele in Women.
 A Two-years Experience with > 6 Months Follow Up S57 Lenisa, L., Rusconi, A., Mascheroni, L., Andreoli, M., Megevand, J., Milano, Italy
- A Short-term Assessment of the Efficacy of the STARR
 Procedure for Obstructed Defecation Syndrome S58
 Senagore, A., Gallagher, J., Hull, T., Ferrera, A., Cleveland,
 OH and Orlando, FL

Maintenance of Certification



11:15 – 11:45 am
This is Your Livelihood:
Maintenance of Certification –
Current Status
James Fleshman, MD
Professor of Surgery
Section of Colon & Rectal Surgery
Washington University Medical Center
St. Louis, MO

11:45 - 1:00 pm

■ Lunch Break

S54

ASCRS Annual Business Meeting and State of the Society Address

Complimentary Lunch will be provided to ASCRS members attending the Business Meeting

and

Complimentary Lunch in Exhibit Hall

Wednesday, May 4

1:00 pm	
Laparoscopy / Colonoscopy	
■ Does Endoscopic Stenting of Obstructing Colon Cancers Promote Dissemination of Tumour Cells? Maruthachalam, K., Lash, G., Shenton, B., Horgan, A., Newcastle upon Tyne, UK	S59
■ The Secret Agenda of Hyperplastic Polyps Church, J., Cleveland, OH	S60
Colonoscopy in the Elderly: Know When to Say When? Duncan, J., Sweeney, W., St. Paul, MN	S61
■ Laparoscopic vs Open Colectomy: Postoperative Morbidity, Long-Term Complications and Quality of Life in Randomized Trial Braga, M., Vignali, A., Frasson, M., Zuliani, W., Civelli, V. Di Carlo, V., Milan, Italy	S62
■ Morbidity Following Laparoscopic-Assisted vs. Open Colectomy: Results from a Multicenter Prospective Randomized Trial Stocchi, L., Nelson, H., Sargent, D., Larson, D., Fleshma: Stryker, S., Hellinger, M., Young-Fadok, T., Stauffer, J., Thorson, A., Oommen, S., Rochester, MN, St. Louis, MC Chicago, IL, Miami, FL, Scottsdale, AZ, San Antonio, TX Omaha, NE, and Concord, CA),
■ The Influence of Severity of Adhesions (AD) and Magnitude of Prior Surgery (PS) on Outcome of Major Laparoscopic (Lx) Colorectal Surgery Kariv, Y., Delaney, C., Hammel, J., Senagore, A., Cleveland, OH	S64
■ Conversion does not Adversely Affect Oncologic Outcomes after Laparoscopic Colectomy for Colon Cancer: Results From a Multicenter Prospective Randomized Trial Young-Fadok, T., Sargent, D., Nelson, H., Fleshman, J., COST Study Group, Scottsdale, AZ, Rochester, MN and St. Louis, MO	S65
■ Laparoscopic (LAP) vs. Hand-assisted Laparoscopic (HAL) Sigmoidectomy for Diverticulitis Lee, S., Yoo, J., Dujovny, N., Sonoda, T., Milsom, J., New York, NY	S66
■ Laparoscopic Total Colectomy: How Should We do it? Boushey, R., Marcello, P., Rusin, L., Roberts, P., Murray, J Coller, J., Schoetz, D., Burlington, MA	S67
■ A Comparison of Laparoscopic vs. Open Radical Sphincter Preserving Surgery for Distal Rectal Cancer Following Neoadjuvant Therapy Marks, J., Annamaneni, R., Curran, T., Schwarcz, S., Marks, G., Wynnewood, PA	S68
■ Predictors and Outcome of Readmission After Laparoscopic Colorectal Surgery O'Brien D. Senagore A. Merlino I. Brady K. Delaney	S69

Cleveland, OH

The Ernestine Hambrick Lectureship



3:30 – 4:00 pm

Current Management of Colorectal
Cancer Liver Metastasis

Margaret Kemeny, MD

Director, Cancer Center for Excellence
Queens Hospital Cancer Center
Jamaica, New York

Panel Discussion

4:00– 4:40 pm Stump the Professor

(Difficult Cases Presented)

Moderator: Thomas Read, MD, Pittsburgh, PA

Panelists:

Wayne Ambroze, MD, H. Randolph Bailey, MD, Richard Billingham, MD and David Schoetz, MD

Thursday, May 5

8:00 am

The Impact Paper for 2004 and "The Greatest Hits"

Resident/Fellow Presentations

9:00 am

ASCRS International Fellowship Winner

■ Transsacrococcygeal Rectal Approach

Cesar Canessa, MD

Assistant Professor, Department of Surgery Hospital de Clínicas, Universidad de la República Montevideo, Uruguay

9:10 am

ASCRS International Fellowship Winner

■ Aspirin, Plavix and Warfarin: Are They Predictors for the Early Diagnosis and the Prognosis of Colonic Carcinoma?

Boris Kirshtein, MD

Department Surgery A Soroka University Hospital Beer Sheva, Israel 9:20 am

British Traveling Fellow Presentation

■ Experimental Model of Fistula-in-ano Gordon Buchanan, MBBS, MSc, FRCS

St. Thomas Hospital London, England

9:30 am

Mark Killingback Prize Winner

■ Prospective Manometric Assessment of the Effects of Botulimum Toxin on the Internal Anal Sphincter Resting Pressure and its Correlation to the Healing of the Chronic Anal Fissure

Michelle Thornton, MD

St. George Hospital New South Wales, Australia

9:40 am

Award Presentation

10:15 am

Video Presentations

12:30 pm Annual Meeting Adjourns

Poster Display Hours: 10:15 am, Monday through 4:00 pm, Wednesday (during Exhibit Hall hours)

Poster Walk Arounds with Authors Present:

Monday, 12:30 - 1:30 pm • Optional Box lunches available \$35

(See registration form)

Monday, 5:30 - 6:30 pm • Complimentary Wine & Cheese Reception

Anal Disease

- P1 Transanal Haemorrhoidal Dearterialisation: Low-Pain Surgery for the Treatment of Haemorrhoids Dal Monte, P., Tagariello, C., Sarago, M., Mwangemi, C., Bologna, Italy
- P2 The Long Term Efficacy of Intra Anal Collagen Injections in Patients with Passive Faecal Leakage Lim, M., Stojkovic, S., Sagar, P., Burke, D., Finan, P. Leeds, Yorkshire, UK
- P3 The Evolving Treatment of Anal Fissures: A Single Institution's 10-year Experience with 235 Patients Pesce, C., Brand, M., Saclarides, T., Chicago, IL
- P4 A Randomized, Controlled Trial of Topical
 Nitroglycerin vs. Internal Sphincterotomy for Chronic
 Anal Fissure Results of a Survey of 6 Year Follow Up
 Brown, C., Dubreuil, D., Santoro, L., Liu, M., O'Connor,
 B., McLeod, R., Toronto, ON, Canada and Quebec City,
 OC. Canada
- P5 Open or Closed Lateral Internal Sphincterotomy? Short and Complete is the Answer. An Endosonographic Evaluation Garcia-Granero, E., Sanahuja, A., Garcia, S., Esclapez, P., Espi, A., Flor, B., Garcia-Armengol, J., Minguez, M., Lledo, S., Valencia, Spain
- P6 Simple Harmonic Scalpel Hemorrhoidectomy is aSafe and Rapid Alternative to Conventional Hemorrhoidectomy
 Haveran, L., Sun, M., Paterson, C., Counihan, T., Worcester, MA
- P7 Anography for the Localization of the Internal Opening Associated with Fistula in Ano Friedlich, M., Seppala, R., Ottawa, ON, Canada
- P8 Electrophysiologic Findings in Patients with Combined Fecal and Urinary Incontinence Pera, M., Lacima, G., Gonzalez-Argente, X., Valls-Sole, J., Puig-Clota, M., Espuna, M., Barcelona, Spain
- P9 Long-term Clinical Results of Biofeedback for Fecal Incontinence Pera, M., Lacima, G., Amador, A., Escaramis, G., Ascaso, C., Barcelona, Spain
- P10 Implantation of Ethylene-vinyl-alcohol Copolymer into the Anal Intersphincteric Plane for Management of Fecal Incontinence: a Pilot Study
 Farmer, K., Rieger, N., Bell, S., Hewett, P., Malvern, Australia and Adelaide, Australia

- P11 Hemorrhoidopexy Staple Height Impacts Return to Work Plocek, M., Kondylis, L., Duhan-Floyd, N., Reilly, J., Kondylis, P., Erie, PA
- P12 Proctectomy and Coloanal Sleeve Anastomosis (Parks' Operation) in the Treatment of Radiationinduced Rectovaginal Fistula Associated with Severe Surrounding Tissue Damage Pak-art, R., Vajrabukka, T., Bangkok, Thailand
- P13 Impact of PET Scanning on Staging and Follow-up of Anal Squamous Cell Carcinoma
 Iagaru, A., Nagle, D., Henry, D., Jacobstein, J., Philadelphia, PA
- P14 Quality of Life (QoL) and Morbidity after Permanent Sacral Nerve Stimulation for Faecal Incontinence: A Prospective Study Hahnloser, D., Hetzer, F., Fruehauf, H., Fried, M., Clavien, P., Demartines, N., Zurich, Switzerland
- P15 Does Drainage of the Deep Postanal Space Improve Outcome after Transanal Advancement Flap Repair for a High-Transsphincteric Fistula with Horse-shoe Extension? Gosselink, M., Mitalas, L., Zimmerman, D., Schouten, W., Rotterdam, Netherlands
- P16 Success of Episioproctotomy for RectoVaginal Fistula Bartus, C., Hull, T., Bast, J., Floruta, C., Merlino, J., Lopez, R., Cleveland, OH
- P17 The Comparison of Sinus Excision and Excision with Marsupialization Techniques for the Treatment of Limited Pilonidal Disease: A Prospective Randomized Study

 Kement, M., Oncel, M., Kurt, N., Istanbul, Turkey
- P18 Anorecto-perineo-vaginal X-flap Reconstruction with Sphincteroplasty for Post-obstetrical-injury Cloaca-like Deformity with Fecal Incontinence Wasserberg, N., Nunoo-Mensah, J., Kaiser, A., Los Angeles, CA
- P19 Use of Standarized Prophylactic Antibiotic Regimen (SPAR) Decreases Acticon® Neosphincter Complications Parker, S., Nogueras, J., Kaiser, A., Gregorcyk, S., Varma, M., Bailey, H., Minneapolis, MN, Weston, FL, Los Angeles, CA, Dallas, TX, San Francisco, CA and Houston, TX
- P20 Patient Satisfaction following Transanal Rectocele Repair by Longitudinal Plication of The Anterior Rectal Muscularis Tang, D., Khanduja, K., Columbus, OH

Posters will be on display from 10:15 am, Monday — 4:00 pm, Wednesday during Exhibit Hours

- P21 Rectal Volume Tolerability in Patients with Faecal Incontinence Treated with Sacral Nerve Stimulation Michelsen, H., Krogh, K., Laurberg, S., Buntzen, S., Aarhus, Denmark
- P22 Sacral Neuromodulation Could Interfere on Rectal Sensation in Fecal Incontinence Patients Recovering Rectal Discrimination and Emptying Ratto, C., Parello, A., Doglietto, G., Rome, Italy
- P23 Is Constipation in Middle-aged Women as Common as We Think?

 Varma, M., Wassel-Fyr, C., Thom, D., Van Den Eeden, S., Brown, J., San Francisco, CA and Oakland, CA
- P24 Findings on Dynamic Magnetic Resonance Defecography in Patients with Obstructed Defecation Winston, J., Arnold, M., Columbus, OH
- P25 Womens Bowel Habits: The Real Story Zutshi, M., Hull, T., Bast, J., Hammel, J., Cleveland, OH

Benign Disease

- P26 Serotonin may be Involved in the Pathophysiology of Diverticular Disease Banerjee, S., Moorhead, J., Cooper, D., Akbar, N., Leather, A., Rennie, J., Papagrigoriadis, S., London, UK
- P27 Evaluation of Surgical Outcomes for the Treatment of Complicated Diverticular Disease – A Prospective National Study Senapati, A., Tekkis, P., London, UK
- P28 To Bridge or Not to Bridge Is the Routine Use of an Ileostomy Rod Indicated? Macdonald, A., Speirs, M., Robertson, I., Hughes, D., Donnelly, L., Airdrie, UK
- P29 Malone Antegrade Colonic Enema (MACE): An Alternative to Resection in Severe Defection Disorders Poirier, M., Fanciullo, D., Nelson, R., Chicago, IL
- P30 Diverting Loop Ileostomy Are We Adding Significant Cumulative Morbidity to Coloanal or Ileoanal Anastomosis Perez, R., Habr-Gama, A., Seid, V., Linhares, M., Sousa Jr., A., Arazawa, S., Jacob, C., Kiss, D., Gama-Rodrigues, J., Sao Paulo, Brazil
- P31 Morbi-mortality after Hartmann's Procedure for Diverticular Peritonitis

 Dumont, F., Duval, H., Vibert, E., Manaouil, D.,
 Mauvais, F., De Fresnoy, H., Katsahian, S., Chatelain, D.,
 Yzet, T., Dupont, H., Verhaeghe, P., Regimbeau, J.,
 Amiens, France, Laon, France, Beauvais, France and
 Paris, France

Colon Cancer

- P32 Serrated Colonic Polyps are Precusors to Early Adenocarinomas with Microsatellite Instability Murphy, M., Goldstein, N., Wasvary, H., Royal Oak, MI
- P33 The Significance of Inadvertent Splenectomy During Colectomy McGory, M., Sekeris, E., Zingmond, D., Ko, C., Los Angeles, CA
- P34 Impact of Technical Factors on Outcome of Restorative Proctocolectomy for Familial Adenomatous Poylposis Tekkis, P., Heriot, A., Von-Roon, A., Truvolon, S., Cornaglia, S., Darzi, A., Phillips, R., Nicholls, R., London, UK
- P35 Expression of RhoA in Colorectal Cancers Baek, M., Shin, E., Park, N., Jang, Y., Kim, J., Song, O., Cheonan, South Korea
- P36 The Appropriate Extent of Lymphadenectomy for T1 Colorectal Cancer
 Asahara, F., Hasegawa, H., Nishibori, H., Ishii, Y., Yamauchi, T., Nitori, N., Okabayashi, K., Kitajima, M., Tokyo, Japan
- P37 Salvage or Stoma after Chemo Radiotherapy for Anal Cancer: Probability, Predictors, and Outcome Heriot, A., Oncel, M., Tekkis P., Neary, P., Remzi F., Fazio, V., Lavery, I., Cleveland, OH
- P38 Impact of Urinary Tract Involvement by Locally Recurrent Colorectal Cancer on Postoperative Survival Capiendo, L., Kaiser, A., Ault, G., Vukasin, P., Beart, Jr., R., Los Angeles, CA
- P39 Loss of Genomic Imprinting of IGF2 is Significantly
 Associated with Increased Circulating Insulin Growth
 Factor 2 Levels in Colorectal Cancer Patients
 Zhao, R., Cruz-Correa, M., Berho, M., Sands, D., Weiss, E.,
 Nogueras, J., Wexner, S., Feinberg, A., Giardiello, F.,
 Weston, FL and Baltimore, MD
- P40 The Effect of 1997 American Cancer Society Colorectal Cancer Screening Guidelines on the Diagnoses of Initial Cases of Colorectal Cancer Nguyen, D., Ko, K., Dedhia, R., Brand, M., Saclarides, T., Chicago, IL
- P42 Endoanal Ultrasound is of High Value in Staging, Restaging and Follow Up of Anal Canal Tumors Ratto, C., Manfrida, S., Parello, A., Bavasso, A., Leoni, C., Valentini, V., Doglietto, G., Rome, Italy
- P43 Validating the Family History Score in Amsterdam Positive Families Enhances its Use in the General Population Church, J., McGannon, E., Patrick, D., Cleveland, OH
- P44 Prognostic Significance of Circumferential Resection Margin following Total Mesorectal Excision in Rectal Cancer Baik, S., Kim, N., Lee, K., Sohn, S., Cho, C., Seoul, South Korea

Posters will be on display from 10:15 am, Monday — 4:00 pm, Wednesday during Exhibit Hours

- P45 Neutropenic Enterocolitis: Is There a Role for the Surgeon? Hedayati, N., Reynolds, H., Cleveland, OH
- P46 Perineal Wound Breakdown in Patients Receiving Neoadjuvant Chemoradiation and Abdominoperineal Resection: An Argument for Immediate Myocutaneous Flap Reconstruction at the Time of APR? Migaly, J., Efron, J., Oviedo, M., Vernava, A., Weiss, E., Nogueras, J., Sands, D., Wexner, S., Weston, FL
- P47 Impact of PET/CT on the Accurate Evaluation of Primary Colorectal Cancer
 Park, I., Kim, H., Yu, C., Ryu, J., Yeo, J., Kim, J., Seoul, South Korea
- P48 Late Adverse Effects of Short Course Preoperative Radiotherapy in Rectal Cancer Pollack, J., Holm, T., Holmstrom, B., Cedermark, B., Mellgren, A., Stockholm, Sweden and Minneapolis, MN
- P49 The English Multidisciplinary Team and Total Mesorectal Excision (MDT-TME) Development Programme: Improving National Outcome in Rectal Cancer
 Jessop, J., Daniels, I., National MDT-TME Steering Committee, Basingstoke, UK
- P50 Minimally Invasive Pouch Surgery Predisposes to Desmoid Tumor Formation in Patients with Familial Adenomatous Polyposis (FAP) Vogel, J., Church, J., LaGuardia, L., Cleveland, OH
- P51 Anorectal Disease after Radiotherapy for Urological or Gynecological Cancer
 Jongen, J., Bock, J., Eberstein, A., Peleikis, H., Pfister, K., Kiel, Germany and Regensburg, Germany
- P52 The Assessment of the Current N1-N2 Substaging in Stage III Colorectal Cancer Patients
 Jeong, G., Lee, R., Kim, K., Chung, S., Park, E.,
 Seoul, South Korea
- P53 Anorectal Disease in Patients with Leukemia or Malignant Lymphoma Jongen, J., Bock, J., Eberstein, A., Pfister, K., Kiel, Germany and Regensburg, Germany
- P54 Primary Adenocarcinoma of the Anal Canal: Experience with a Multimodality Approach Adusumilli, S., Chaudhry, V., Bastawrous, A., Prasad, L., Abcarian, H., Chicago, IL
- P55 Colorectal Cancer in Patients Age 40-49 Herzig, D., Snyder, M., Bailey, H., Houston, TX

Inflammatory Bowel Disease

- P56 The Clinical Course of Crohn's Disease Following Ileal Pouch Anal Anastomosis Davis, B., Schoetz, Jr., D., Roberts, P., Marcello, P., Coller, J., Murray, J., Rusin, L., Burlington, MA
- P57 Ileal Pouch-anal Anastomosis (IPAA) for Chronic Ulcerative Colitis (CUC). Durability and Outcome Over 20 Years
 Hahnloser, D., Pemberton, J., Wolff, B., Larson, D., Dozois, R., Zurich, Switzerland and Rochester, MN
- P58 Peristomal Pyoderma Gangrenosum: Clinical Features and Response to Infliximab Therapy George, B., Brown, P., Perrin, A., Travis, S., Mortensen, N., Oxford, UK
- P59 Risk Factors for Intra-abdominal Sepsis After a
 First Ileocecal Resection for Crohns Disease.

 A Multivariate Analysis in 161 Consecutive Patients
 Panis, Y., Alves, A., Bouhnik, Y., Pocard, M.,
 Lavergne-Slove, A. Vicaut, E., Valleur, P., Paris, France
- P60 Management of Peristoma Pyoderma Gangrenosum Poritz, L., Lebo, M., Bobb, A., Ardell, C., Koltun, W., Hershey, PA
- P61 Short Term Outcome of Kock Pouch Revision After Delayed Nipple Valve Failure Bub, D., Schluender, S., Gorfine, S., Harris, M., Bauer J., New York, NY
- P62 Ileal-anal J Pouch is Indicated for Patients with Indeterminate Colitis Vrees, M., Nogueras, J., Weiss, E., Sands, D., Efron, J., Vernava, A., Wexner, S., Weston, FL
- P63 Laparoscopic Approach for Complicated Diverticulitis Rotholtz, N., Bun, M., Lencinas, S., Malizia, P., Mezzadri, N., Buenos Aires, Argentina
- P64 Do Patients with Crohn Disease Really Have More Anastomotic Complications? Hazzan, D., Bauer, J., Steinhagen, R., Eckstein, J., Harris, M., Bub, D., Gorfine, S., New York, NY
- P65 Patterns of Care for the Surgical Management of Ulcerative Colitis
 Ricciardi, R., Town, R., Virnig, B., Rothenberger, D., Baxter, N., Minneapolis, MN
- Quantification of Differences Between
 Primary and Redo Pouch Surgery
 Gorgun, E., Manilich, E., Yu, H., Yang, J., Remzi, F., Fazio,
 V., Cleveland, OH and Iowa City, IA
- P67 Prospective Evaluation of Topical 10% Metronidazole in Treatment of Symptomatic Anorectal Crohns
 Disease: Long Term Follow-up
 Gaw, J., Johnson, E., Armstrong, D., Atlanta, GA
- P68 Improved Outcome Due to Increased Experience and Individualized Management of Leaks following Ileal Pouch-Anal Anastomosis (IPAA) Raval, M., Schnitzler, M., O'Connor, B., Macrae, H., Cohen, Z., Gryfe, R., McLeod, R., Toronto, ON, Canada

Posters will be on display from 10:15 am, Monday — 4:00 pm, Wednesday during Exhibit Hours

- P69 Long-Term Effects of Cyclosporin A (CsA) on Morbidity after Colectomy for Ulcerative Colitis (UC): A Word of Caution Ognibene, S., Mehdizadeh, S., Shaye, O., Fleshner, P., Los Angeles, CA
- P70 Laparoscopic vs Open Ileocolic Resection for Crohn's Disease: A Case-matched Series Gaw, J., Larson, D., Nelson, H., Dozois, E., Larson, D., Rochester, MN and Atlanta, GA

Laparoscopy / Colonoscopy

- P71 Predicting and Stratifying Risk of Conversion for Laparoscopic Colorectal Procedures Using a Prospective Database and a Multivariable Analysis Hassan, I., Larson, D., Cima, R., Dozois, E., Young-Fadok, T., O'Byrne, M., Larson, D., Nelson, H., Rochester, MN and Scottsdale, AZ
- P72 Visualization and Video Review: Teaching Laparoscopic Restorative Proctocolectomy (LPC) in the 80-hour Workweek Ross, H., Christian, D., Morris, J., Philadelphia, PA
- P73 A Prospective Double-blinded Study Comparing Fentanyl to Meperidine during Moderate Sedation for Colonosocopy Silverman, R., Barkel, D., Wasvary, H., Klein, S., McIntosh, H., Royal Oak, MI
- P74 Endoscopic Polypectomy and Surveillance is Adequate for Almost All Colorectal Adenomas Containing High-Grade Dysplasia or Intramucosal Adenocarcinoma Vogel, J., Church, J., Cleveland, OH
- P75 Findings of Diagnostic Colonoscopy in 1169 Patients Age 40-49
 Herzig, D., Tsikitis, L., Akerman, P., Providence, RI
- P76 Evaluation of Colonoscopy for Colorectal Cancer:
 A Prospective Multi-centre Study
 Purkayastha, S., Tekkis, P., Darzi, A., Radford, A., Smith, J.,
 Thompson, M., Stamatakis, J., London, UK
- P77 Does Intraoperative CO2 Colonoscopy During Colorectal Surgery Impact on Surgical Treatment Yoo, J., Dujovny, N., Lee, S., Sonoda, T., Trencheva, K, Milsom, J., New York, NY
- P78 Comparable Abdominal Wall Trauma, Pathology, and Short Term Results Found in Randomized Trial Comparing Hybrid Laparoscopic/open Method and Hand-assisted Laparoscopic Technique for Sphinctersaving Proctectomy for Rectal Neoplasms Dujovny, N., Nihalani, A., Cekic, V., Balik, E., Berizon, A., Ansari, P., Boulay, C., Huang, E., Forde, K., Arnell, T., Feingold, D., Whelan, R., New York, NY
- P79 Predictive Factors and Consequences of Conversion during Laparoscopic Colorectal Surgery Dujovny, N., Yoo, J., Sisko, Z., Trencheva, K., Lee, S., Sonoda, T., Michelassi, F., Milsom, J., New York, NY
- P80 Mid-term and Short-term Surgical Outcome of Laparoscopic Surgery for Rectal and Rectosigmoidal Cancer Hasegawa, H., Nishibori, H., Ishii, Y., Yamauchi, T., Kitajima, M., Tokyo, Japan

- P81 Laparoscopic Compared to Open Two-stage Restorative Proctocolectomy Winslow, E., Mutch, M., Birnbaum, E., Kodner, I., Fleshman, J., St. Louis, MO
- P82 Laparoscopic-assisted High Anterior Resection: Intra-corporeal Anastomosis vs Open Anastomosis – A Case-controlled Comparison Tjandra, J., Chan, M., Melbourne, Australia
- P83 Laparoscopic vs Conventional Subtotal Colectomy for Acute or Severe Colitis Complicating Inflammatory Bowel Disease: A Case-control Study in 82 Patients Panis, Y., Marceau, C., Alves, A., Bouhnik, Y., Lavergne-Slove, A., Valleur, P., Paris, France
- P84 Laparoscopic versus Conventional Ileal Pouch-anal Anastomosis. A Case-control Study in 80 Patients Panis,Y., Taleb, P., Alves, A., Bouhnik, Y., Marceau, C., Valleur, P., Paris, France
- P85 Laparoscopic Colectomy using Cancer Principles is Appropriate for Colonoscopically Unresectable Adenomas of the Colon
 Loungnarath, R., Mutch, M., Birnbaum, E., Yan, Y., Fry, R., Read, T., Kodner, I., Dietz, D., Fleshman, J., Montreal, QC, Canada, St. Louis, MO, Pittsburgh, PA and Philadelphia, PA
- P86 Multivariate Analysis of Predictive Factors for Conversion in 69 Consecutive Patients Undergoing Laparoscopic Ileocecal Resection for Crohns Disease Panis, Y., Alves, A., Bouhnik, Y., Marceau, C., Lavergne-Slove, A. Valleur, P., Paris, France
- P87 Prospective Study of Ambulation after Open and Laparoscopic Colorectal Resection Feingold, D., Sahellarios, N., Balik, E., Cekic, V., Arnell, T., Forde, K., Nihlalani, A., Ansari, P. Whelan, R., New York, NY
- P88 Laparoscopic versus Open Right Hemicolectomy for Neoplasia Olson, M., Celebrezze, Jr, J., Read, T., Fortunato, R., Jones, S., Medich, D., Caushaj, P., Pittsburgh, PA
- P89 The Impact of the Means of Access on the Short-term Outcome after Hartmann Reversal Haughn, C., Pol, H., Rossi, S., Ju, B., Young, J., Bergamaschi, R., Pittsburgh, PA
- P90 Evaluation of Short-term Outcomes of Laparoscopic Surgery for Colorectal Cancer in Patients Older than Age 80 Compared to Younger Patients Sonoda, T., Trencheva, K., Sisko, Z., Dujovny, N., Yoo, J., Lee, S., Milsom, J., New York, NY

Outcomes / Research

- P91 Intravenous Lidocaine Decreases Postoperative Ileus and Shortens Hospital Stay in Elective Bowel Surgery Isho, M., Harvey, K., Bruni, M., Pacifici, D., Little, L., Dosch, M., Robinson, R., Pontiac, MI
- P92 The Intraperitoneal Administration of Lovastatin Decreases Postoperative Adhesion Formation in a Rat Model Aarons, C., Cohen, P., Gower, A., Reed, K., Stucchi, A., Becker, J., Boston, MA

Posters will be on display from 10:15 am, Monday — 4:00 pm, Wednesday during Exhibit Hours

- P93 Surgical Autonomic Denervation Results in Altered Colonic Motility Lee, W., Takahashi, T., Mantyh, C., Pappas, T., Ludwig, K., Durham, NC
- P94 Genome-wide Copy Number Analysis for Genetic Alterations Involved in Liver Metastasis of Colorectal Cancer Revealed the Involvement of Cyclin D3 Tanami, H., Imoto, I., Inazawa, J., Sugihara, K., Tokyo, Japan and Saitama, Japan
- P95 Publication Rates from the Annual Meeting of the American Society of Colon and Rectal Surgeons McCue, J., Baxter, N., Rothenberger, D., Ricciardi, R., Minneapolis, MN
- P96 A Nouvelle Staining Technique Improves the Yield Lymph Node Processing in Colorectal Cancer Specimens Nunoo-Mensah, J., Low, J., Perricone, V., Joglekar, V., Nasmyth, D., Barrow-in-Furness, Cumbria, UK
- P97 Female Sexual Function and Sexuality after Colorectal Surgery: a Multicenter Prospective Evaluation Dasilva, G., Hull, T., Roberts, P., Ruiz, D., Daniel, N., Ramos, A., Bena, J., Nogueras, J., Weiss, E., Sands, D., Wexner, S., Weston, FL, Cleveland, OH and Burlington, MA
- P98 Is There a Better Way to Perform Stapled Colorectal Anastomosis? Clinical Experience Using a Computer Powered Surgical Stapling Device Cohen, S., Atlanta, GA
- P99 Experimental Perianal and Anal Canal Photodynamic Therapy with 5- Aminolevulinic Acid Abbasakoor, F., Woodhams, J., Farooqui, N., Novelli, M., Bown, S., Boulos, P., London, UK

Rectal Cancer

- P100 MRI Predicts Surgical Resection Margin Status in Patients with Rectal Cancer: Results from the MERCURY Study Daniels, I., MERCURY Study Group, Basingstoke, UK
- P101 Simultaneous Proctectomy and Hepatic Resection is Safe for Metastatic Rectal Cancer Barabouti, D., Fong, Y., Landmann, R., Paty, P., Guillem, J., Weiser, M., Temple, L., Wong, W., New York, NY
- P102 Preoperative High Dose Rate Endorectal
 Brachytherapy (HDREBT) for Locally Advanced
 Operable Rectal Cancer
 Richard, C., Belliveau, P., LaTulippe, J., Stein, B., Parent, J.,
 Emond, C., Compton, C., Portelance, L., Vuong, T.,
 Montreal, QC, Canada
- P103 Micrometastasis in Distal Rectal Cancer following Chemoradiation Therapy – Are We Missing Metastatic Lymph Nodes after Neoadjuvant Treatment? Perez, R., Habr-Gama, A., Arazawa, S., Rawet, V., Siqueira, S., Bocchinni, S., Baptista, R., Kiss, D., Gama-Rodrigues, J., Sao Paulo, Brazil
- P104 Novel Biomarkers in Colorectal Cancer Suggett, N., Hamilton, E., Ward, D., Wakelam, M., Johnson, P., Ismail, T., Birmingham, UK

- P105 High Spatial Resolution MRI Predicts Tumour Spread in Patients with Rectal Cancer – Results from the MERCURY Study Daniels, I., MERCURY Study Group, Basingstoke, UK
- P106 Long-term Evaluation of Quality of Life and Faecal Continence following Curative Surgery for Rectal Cancer
 Pucciarelli, S., Toppan, P., Serpentini, S., Del Bianco, P., Urso, E., De Salvo, G., Maretto, I., Nitti, D., Lise, M., Padova, Italy
- P107 Relationship between Pathological T Stage and Nodal Metastases following Preoperative Chemoradiotherapy for Pre-treatment Stage T3N0 Rectal Cancer Pucciarelli, S., De Paoli, A., Friso, M., Canzonieri, V., Pasetto, L., Mescoli, C., Sigon, R., Urso, E., Nitti, D., Lise, M., Padova, Italy and Aviano, Italy
- P108 Effects of Short-term Preoperative Chemoradiation on Regional Lymph Nodes in Patients with Rectal Cancer Miyoshi, M., Hashiguchi, Y., Ueno, H., Kobayashi, H., Mochizuki, H., Tokorozawa, Saitama, Japan
- P109 Serum CEA as a Predictor for Response to Preoperative Chemoradiation for Rectal Adenocarcinoma Park, Y., Baek, S., Lee, K., Kim, N., Cho, C., Sohn, S., Seoul, South Korea
- P110 Preoperative Chemoradiation for Rectal Cancer Causes Prolonged Pudendal Nerve Terminal Motor Latency Tjandra, J., Lim, J., Hiscock, R., Chao, M., Gibbs, P., Royal Parade, Parkville, Australia and Melbourne, Australia
- P111 Is Endoanal Ultrasonography Useful to Select Patients with uT3 Rectal Cancer for Adjuvant Therapy?
 Garcia-Granero, E., Esclapez, P., Flor, B., Cervantes, A., Ivorra, P., Navarro, S., Espi, A., Garcia-Armengol, J., Millan, M., Lledo, S., Valencia, Spain
- P112 Photodiagnosis of Anal Intraepithelial Neoplasia Abbasakoor, F., Novelli, M., Bown, S., Boulos, P., London, UK
- P113 Local Recurrence in TME Surgery without Preoperative Chemoradiation. Is the Circumferential Resection Margin Involvement an Important Prognostic Factor? Garcia-Granero, E., Flor Jr, B., Esclapez, P., Cervantes, A., Navarros, S., Espi, A., Garcia-Armengol, J., Garcia-Botello, S., Millan, M., Munoz, E., Lledo, S., Valencia, Spain
- P114 Can Endorectal Ultrasound (ERUS) Correctly Determine Nodal Stage in Patients Considered for Local Excision? Landmann, R., Wong, W., Hoepfl, J., Shia, J., Paty, P., Guillem, J., Temple, L., Weiser, M., New York, NY
- P115 The Outcome of Low Rectal Cancers in a Multi-centre, Multidisciplinary European Study (MERCURY Study) Daniels, I., MERCURY Study Group, Basingstoke, UK

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