

New Techniques and Challenges in Minimally Invasive Surgeries; Highlights of 12th International Congress of Minimally Invasive Surgeries and Techniques (MISTIC 2016-Tehran)

Mohammad Kermansaravi,^{1,4} Mohsen Pazouki,² Sattar Darabi,³ and Foolad Eghbali³

¹MD, Scientific Manager of MISTIC2016 Congress, Minimally Invasive Surgery Research Center, Iran University of Medical Sciences, Tehran, IR Iran

²Executive Director of MISTIC 2016 Congress, Minimally Invasive Surgery Research Center, Iran University of Medical Sciences, Tehran, IR Iran

³MD, Minimally Invasive Surgery Research Center, Iran University of Medical Sciences, Tehran, IR Iran

⁴Corresponding author: Mohammad Kermansaravi, MD, Scientific Manager of MISTIC2016 Congress, Minimally Invasive Surgery Research Center, Iran University of Medical Sciences, Tehran, IR Iran. E-mail: mkermansaravi@yahoo.com

Received 2016 December 24; Revised 2017 January 17; Accepted 2017 January 21.

Keywords: Techniques, Minimally Invasive Surgeries

Dear editor,

Nowadays advancement in all field of surgery, especially in minimally invasive surgery (MIS) has been occurred dramatically. An important part of this progression is due to the exchange of new information and innovations in the international congress, according to high-grade recommendations and high-level evidences by experienced surgeons based on valuable guidelines, including SAGES guidelines (1).

The benefits of MIS is becoming increasingly apparent that the procedure leads to better outcomes, shorter hospitalization, faster recovery, more accurate than the open method and finally better preserving the body's physiology (2).

12th international congress of minimally invasive surgeries and techniques was held in Iran, Tehran, Razi international congress hall, from 9 to 11 November 2016 in the presence of expert MIS surgeons and other specialist from Iran and other countries. Professor Mohammad Farhadi and Abdolreza Pazouki were presented as president of the Congress and scientific secretary of the congress respectively.

Totally 119 submitted articles in abstract form were received through the MISTIC-2016 congress website and 103 (86.5%) of them were accepted that 80 (77.7%) articles considered as oral presentation and 23 (22.3%) articles accepted for poster presentation. Seven workshops were held, including Medical ethics, Laparoscopic sleeve gastrectomy, Laparoscopic colorectal surgery, Laparoscopic hernia repair, Laparoscopic liver surgery and intra-operative ultrasonography, minimally invasive plastic and reconstructive surgery and Nutritional support after bariatric surgery.

A total of 207 presentations and 7 panels were held on various subjects in MIS by invited speakers from Iran and

other countries, including Professor Amjad Parvaiz from UK, Professor Biijan Ghavami from Switzerland, Professor Reza Kianmanesh from France, Professor Hamid Abbasi and Professor Kiarash Aramesh from USA.

Target audience includes general surgeons, MIS and bariatric surgeons, vascular surgeons, cardiovascular surgeons, neurosurgeons, orthopedic surgeons, plastic surgeons, colorectal surgeons, gynecologists, urologists, pediatric surgeons, thoracic surgeons, anesthesiologists, sport medicine specialists, nutritionists and nurses.

Also the congress was attended by 301 participants from Iran and other countries such as China, Iraq, United Arab Emirates, Turkey and Afghanistan.

In order to train critical factors for safe laparoscopic cholecystectomy, based on SAGES expert Delphi consensus, eight live surgery was performed by expert MIS surgeons (3). Given the importance of MIS in metabolic and bariatric surgery, as well as new innovations and rapid changes in this field and new recommendations of International Federation for the surgery of obesity (IFSO), a main part of the congress was devoted to this field (4).

Our aim in organizing this congress, was the exchange of knowledge and new techniques in MIS surgery field and we believe that holding such congresses can be effective in the advancement of surgical science worldwide.

Also we hope that the next session of congress in 2018, to be held in Tehran, more efficient.

References

1. Lerner HP. SAGES guidelines for the introduction of new technology and techniques. *Surg Endosc.* 2014;**28**(8):2255-6. doi: 10.1007/s00464-014-3641-4. [PubMed: 24969851].
2. Pazouki A. Minimally Invasive Surgical Sciences: A New Scientific Opportunity for All Scientists. *J Minimal Invas Surg Sci.* 2012;**1**(1):9-10. doi: 10.5812/jmiss.2976.

3. Pucher PH, Brunt LM, Fanelli RD, Asbun HJ, Aggarwal R. SAGES expert Delphi consensus: critical factors for safe surgical practice in laparoscopic cholecystectomy. *Surg Endosc*. 2015;**29**(11):3074-85. doi: [10.1007/s00464-015-4079-z](https://doi.org/10.1007/s00464-015-4079-z). [PubMed: [25669635](https://pubmed.ncbi.nlm.nih.gov/25669635/)].
4. Mahawar KK, Borg CM, Agarwal S, Riebeiro R, De Luca M, Small PK. Criteria for Inclusion of Newer Bariatric and Metabolic Procedures into the Mainstream: a Survey of 396 Bariatric Surgeons. *Obes Surg*. 2016:1-8.