## THE SHOW MUST 60 ON

ASIAN ROBOTIC CAMP FOR COLORECTAL SURGEONS

# ARCCS 2021

DECEMBER 9-10 [THU-FRI], 2021

## INVITATION

#### **Dear Colleagues and Friends**

We wish you safe and healthy during the pandemic.

As you know, we have been organizing a robotic camp for Asian colorectal surgeons every year since 2013, and the upcoming gathering will be our 10th anniversary. But COVID-19 has changed everything around us. We waited until the last minute, hoping for a chance to get back to normal. Despite our efforts to overcome this global catastrophe, we have made the bittersweet decision to hold this event virtually again, just like last year. To our disappointment, we reduced the meeting to a two-day schedule instead of the usual three-day schedule. So, we'd like to schedule our 10th anniversary next year and call this year's conference v.9.1. Nevertheless, colleagues and friends, "The Show Must Go On!". On behalf of our team, I would like to invite you to ARCCS v.9.1 from December 9 to 10, 2021, with thanks and apologies for the hasty notice.

However, we do believe eminent experts from all around the world will enrich the programs with informative lectures, great videos and hot discussions over treatment of colorectal cancer. I am looking forward to your active participation.

Best wishes,
Gyuseog Choi
Director of ARCCS

## **PROGRAM**

### DAY 1, December 9 (THUR)

07:50-08:00	Opening Ceremony & Overview of virtual ARCCS meeting		
08:00-10:30	Session I. For the best treatment for rectal cancer patients: Surgery		
	Recent anatomical issues in rectal cancer surgery		
	Global trends in taTME		
	Robotic versus taTME in oncologic and functional outcomes		
	Useful transanal approaches in difficult cases		
	For better outcomes of ISR: abdomen first or transanal first?		
	I converted from Lap taTME to Robotic TME		
09:15-09:47	Video Show I : ISR		
	Lap. TATA		
	taTME		
	Robotic ISR (Xi)		
	Robotic ISR (SP)		
09:50-10:30	Case Discussion		
	Case #1: Locally far advanced rectal cancer (T4b)		
	Case #2 : Presumed difficult TME : big tumor in obese, male patient		
10:30-12:10	Session II. For the best treatment for rectal cancer patients: Chemoradiotherapy		
	Short course CCRT with consolidation chemo for advanced rectal cancer		
	Recent update of TNT for advanced rectal cancer		
	Traetment options for advanced rectal cancer with synchronous liver mets		
	When we can omit chemoradiation for advanced rectal cancer		
11:30-12:10	Case Discussion		
	Case #1 : Advanced lower rectal cancer (T4b)		
	Case #2 : Rectal cancer with liver mets		
12:10-13:20	Session III. Tips and Tricks for Disasters		
	taTME – what plane am I In?		
	Collateral Damage During "Routine" Colorectal Surgery		
	Complex parastomal hernias, Is a task for the colorectal surgeons?		
	Laparoscopic surgery for Colon cancer obstruction		
	Discussion		
13:20-14:50	Session IV. Hard Nut to Crack: Anastomotic complications after rectal surgery		
	Preventive strategies of anastomotic complications		
	Early detection of anastomotic leakage		
	Optimal treatment for complicated anastomosis after rectal cancer surgery		
	Functional outcomes of patients undergoing successful redo surgery after failed pimary anasto mosis for rectal cancer		
	Title Robotic Anterior Resection with Perfusion Assessment: The Green and Gold Standard?		
14:20-14:50	Case Discussion		
	Case #1: Non-symptomatic leak in patients with stoma		
	Case #2: Chronic presacral sinus		

14:50-17:00	Session V. Watch and Wait	
	When can we defer surgery?	
	Surveillance and Salvage during W&W	
	How to justify CCRT for T2 cancer expecting co	CR?
	Role of surgical resection of tumor for good resp	ponders
15:40-17:00	Case Discussion	
	Case #1 : The Patient is So Young: Is This Dang	erous?
	Who Should Be Considered for a Watch-and-Wa	ait Approach?
	Case #2: Looks Good, But Does Not Feel Perfe	et.
	How Can MR Imaging Help in Assessment of T	umor Response?
	Case #3: We Are So Close to a Complete Response	onse. Can We Get There?
	How to Get to a Complete Response and Can W Complete Response?	e Get From a Near-Complete Response to a
	Case #4: The Tumor Looks Like It Has Regrow	n. Now What?
	Reasonable Plans for Watch-and-Wait and What	If There is Tumor Regrowth?
16:20-17:00	Discussion	
17:00-17:30	Special Session I.	
	NGS (Next Generation of Surgery)	Jacques Marescaux (IRCAD, France)

## DAY 2, December 10 (FRI)

08:00-09:40	Session VI. Da vinci SP colorectal surgery
	Advantages and disadvantages of SP
	SP for colon cancer
	SP TAMIS and taTME
	Clinical application of SP to multiorgan resection
	Safe Introduction of New technologies and technieques in minimally invasive colorectal surgery
09:00-09:40	Discussion
09:50-12:40	Session VII. With LPND
	Global trends in the management of mLPN
	How to get confident in LPND
	Selection criteria of LPND
	I prefer to Lap
	I prefer to open
	Clinical outcomes of LPND; Are there any benefits?

11:15-11:55	Video Show III : LPND
	Lap. LPND
	taLPND
	LPND using Xi system
	LPND using SP system
11:55-12:40	Case Discussion
	Case #1: Borderline-sized LPN (4-6mm) in advanced rectal cancer
	Case #2: responded LPN after chemoradiation
12:40-13:10	Special Session II.
	Next Vision of JSES (Japanese Society of Endoscopic Surgery)
	Yoshiharu Sakai (Osaka Red Cross Hospital, Japan)
13:10-13:30	Break
13:30-15:30	Session VIII. For the best treatment for colon cancer patients
	Adjuvant chemotherapy in Geriatric colon cancer patients
	Rt. Branch or middle colic? Appropriate vascular ligation for proximal T-colon cancer
	Artificial Intelligence based real-time fluorescence for laparoscopic colorectal surgery
	Benefits of NACT than ACT for colon cancer
	Laparoscopic resection for T4 tumors
	D2 or D3 lymph node dissection for Rt. Colon cancer
	Re-do cytoreductive surgery for peritoneal metastasis: Is it worthwhile?
14:54-15:30	Discussion
15:30-16:40	Video Show IV : Colon surgery
	Lap. RHC
	Lap. single-port RHC
	Suprapubic Robotic RHC (Xi)
	Lap. LHC
16101640	Suprapubic Robotic SP LHC
16:10-16:40	Discussion
16:40-17:40	Video Show II: TME
	Lap TME with articulating instruments
	taTME
	Robotic TME (Xi)
	Robotic TME (SP)
17:10-17:40	Discussion