European Society of Anaesthesiology

ESA

Munich Germany

Euroanaesthesia 2007

Annual Meeting of the European Society of Anaesthesiology

9-12 June

Symposia

Refresher Courses

Workshops

Industrial Symposia

& Exhibition

Abstract Presentations

Deadline

abstracts:

December 15th 2006

Online submission

www.euroanesthesia.org

CME Accreditation

EACCME - UEMS

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Announcement

Welcome to Bavaria

Venue:

INTERNATIONALES CONGRESS-CENTER MÜNCHEN ICM

Invitation from the President

Dear Colleagues,

It gives me great pleasure to invite you to join us at the next Euroanaesthesia meeting, which will take place in Munich, Germany, 9-12th June 2007. This will be the third Annual Meeting of the European Society of Anaesthesiology since the amalgamation of the three European Societies on 1st January 2005. Euroanaesthesia 2005 in Vienna was the first congress of this new organisation, following the successful combined meetings of the European Society of Anaesthesiologists, the European Academy of Anaesthesiology and CENSA, which started in Nice in 2002. This was followed by an equally successful Euroanaesthesia meeting in Madrid in 2006.

For Euroanaesthesia 2007, the Scientific Program Committee and its Chairman, Professor Jennie Hunter, have again designed an attractive and diverse scientific programme. Keynote lectures by internationally renowned experts, together with symposia and workshops, will provide the latest information and developments in research, complemented by refresher courses, presenting the 'State of the Art' in clinical practice. Both basic science and clinical research are important pillars supporting continuous improvement in the practice of anaesthesiology and patient care. At the meeting, you will have the chance to exchange your knowledge with the speakers at first hand, to discuss interesting questions and to enlarge your network of personal contacts. In addition, Euroanaesthesia offers young researchers from all over the world a platform to present their own research and to be part of scientific competition in the international world of anaesthesia.

The world's leading companies involved in research and development in anaesthesiology will demonstrate their new products and innovations during the Trade Exhibition. We are pleased to invite both our industrial partners and those companies, who have supported the ESA and the Euroanaesthesia meetings so generously in the past, together with those exhibiting for the first time, to join us.

Munich will be the host city for Euroanaesthesia 2007. Munich with its more than 1,3 million inhabitants is located in the centre of Bavaria in the foreland of the Alps. It is a dynamic cosmopolitan city with important political, economical and cultural activities. Munich can satisfy every taste: you can visit one of the famous museums, go shopping, meet with friends and colleagues in one of the numerous restaurants, bars, or beer gardens to taste an international exquisite cuisine or the typical Bavarian meals and beers,. The congress venue is the International Congress Center Munich (ICM) located at the area of the former Munich airport. From downtown Munich it is easily accessible by subway, bus, or car and represents a modern and excellent congress facility.

We are extremely grateful for the support of the German Society of Anaesthesiology and Intensive Care medicine and, in particular for the collaboration of the national organising committee chaired by Prof. Hugo Van Aken in the preparation of Euroanaesthesia 2007.

It is a great pleasure for me to welcome you all to Munich for Euroanaesthesia 2007, which will be an outstanding event for European anaesthesiology. You will experience new highlights in clinical practice, research, and educational activities in anaesthesiology, intensive care and emergency medicine, as well as in pain therapy. Please join us in Munich and benefit from the exchange of ideas and experience with colleagues from many different countries, while at the same time sampling the sights and tastes of this wonderful city.

Peter Simpson
President, ESA

ESA EXECUTIVE

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www.euroanesthesia.org

To obtain all information and consult the detailed scientific programme of Euroanaesthesia 2007, please visit our website: www.euroanesthesia.org

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Welcome to Munich

The German metropolis

Munich, the Bavarian state capital, third largest city in Germany with a population of 1.3 million, is an economic hub and leisure centre, a fountain for the joy of life, a focal point of art and culture, and a crossroad of history and modern times. It is also known for its active scientific community.

The metropolis on the Isar River combines rich Bavarian tradition and broad-minded openness, deep-rooted customs and dynamic innovation, sovereign composure and pulsating energy.

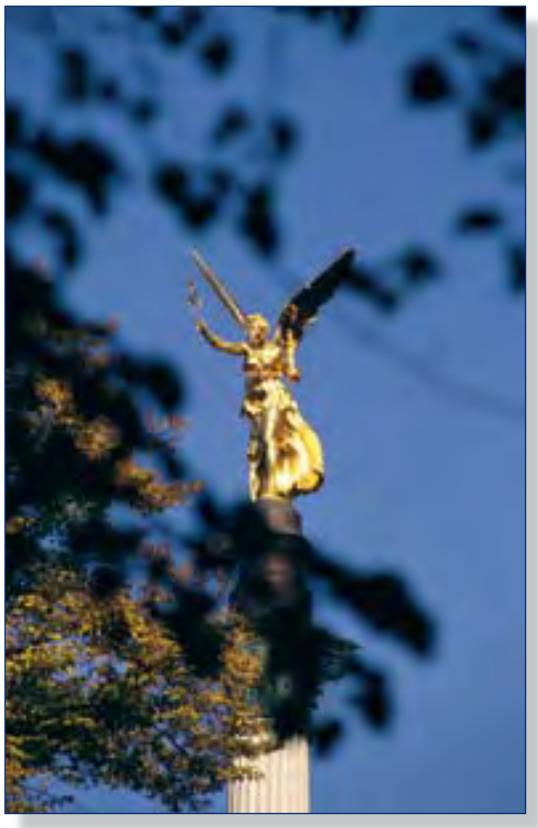
Munich is an architectural synthesis of the arts, encompassing impressive examples of buildings from various epochs of style, from Gothic through Renaissance to Art Nouveau and Art Deco. Modern accents are set by the glass and steel constructions of contemporary architecture, such as the Olympic tent roof and the high-rise buildings of corporate headquarters.

Easy to get around

Munich International Airport offers flight connections to more than 68 countries worldwide. With a travelling time of just 40 minutes, it is only a short connection away from the city centre. High-speed train services to all major cities, and many European capitals, provide comfortable travel to and from Munich. In addition, there is an extensive network of regional trains and subways that covers the entire metropolitan area.

Science and medicine with tradition and future

Ever since King Ludwig I reorganised Munich's University in 1826, the Bavarian capital ranks among the first in the hierarchy of medicine and science. Outstanding researchers in the 19th and 20th century include Max von Pettenkofer (1818–1901), who detected creatinin and whose name became synonymous with hygiene, and Emil Kraepelin (1858–1926), whose systematisation of psychiatric diseases has remained influential to this day. His colleague Alois Alzheimer (1864–1915) was the first to describe the disease of the cerebral cortex that was later named after him.



Ferdinand von Sauerbruch (1875–1951), a pioneer in thoracic surgery, worked in Munich, as did Erich Lexer (1867–1937), a celebrated precursor of transplantation and reconstructive surgery. The paediatrician Richard Drachter (1883–1936) was the author of the first comprehensive

textbook on surgical treatments of children's diseases. His colleague, the paediatrician Alfred Wiskott (1898–1978), is remembered for his first description of what later became known as the Wiskott-Aldrich syndrome.

Following World War II, medicine and science quickly recovered in Munich. Stimulated by the appointment of the Nobel laureate Adolf Butenandt (1903–1995), who discovered several steroid hormones, as director of the Institute of Physiological Chemistry in 1953, the Max- Planck Institute for Biochemistry was moved to Munich.

Feodor Lynen (1911–1979), the "architect of biochemistry", worked in Munich from 1947. He recognised the enzymatic steps of the fatty acid oxidation cycle and the pathway of cholesterol biosynthesis. In 1964 he was awarded the Nobel Prize in physiology and medicine.

Rudolf Zenker (1903–1984) performed the first successful operation in Germany with a heart-lung machine in 1958.

It is to his credit that Munich became an internationally renowned centre of cardiac surgery and, in 1969, the first city in Germany where a heart transplant was performed.

In 1967, a second university clinic, attached to the Technical University, was established in Munich. Ever since, its emphasis has been to serve as a link between medicine and modern technology.

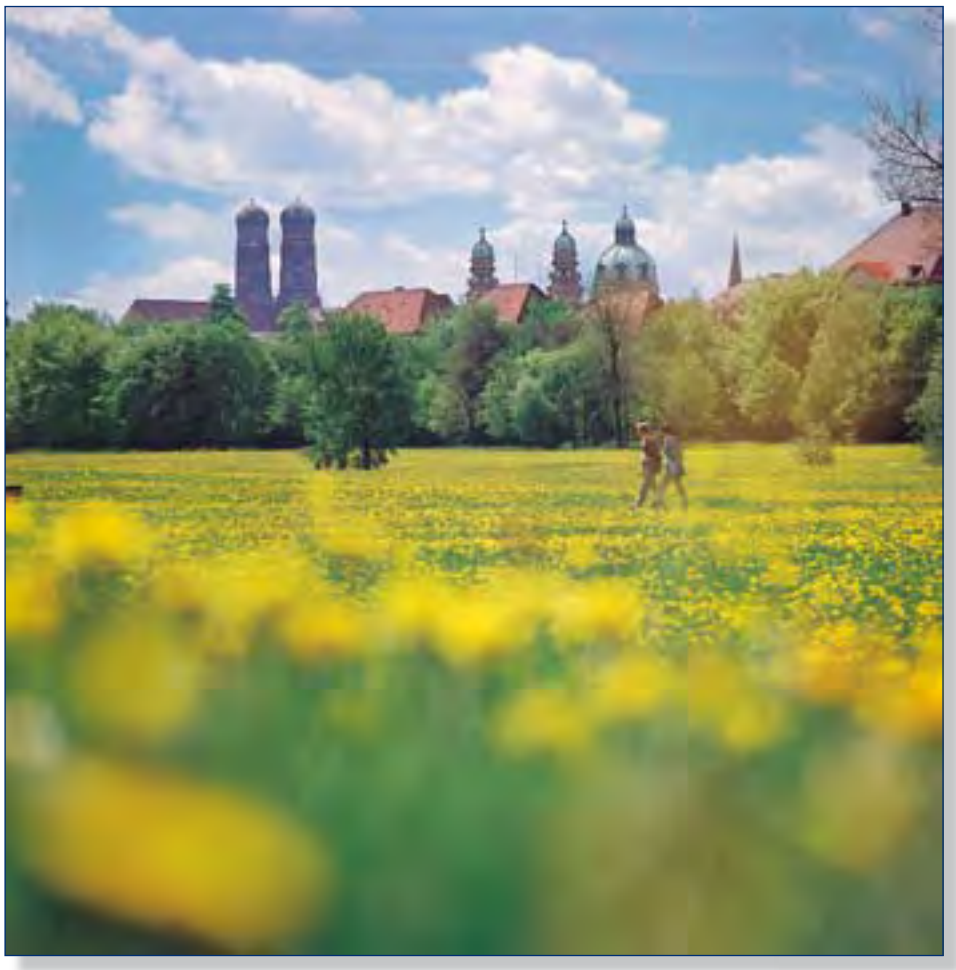
(Data compiled by the Institute of the History of Medicine, Munich University, 2006)

A place of indulgence

You will be overwhelmed by the opulent offerings of more than 200 galleries, museums and collections. Unique masterpieces can be admired at the Old, New and Modern Pinakothek art galleries.

More than 5,000 restaurants serving traditional Bavarian cooking and haute cuisine ensure culinary delight. The Schrannenhalle, an open marketplace in the immediate vicinity of the Viktualienmarkt, is definitely worth a visit.

Shopping enthusiasts from near and far encounter almost unlimited possibilities during their sprees, with shops offering haute couture designs and folkloric clothing through to arts, crafts and culinary specialities. A true paradise.



The "Fünf Höfe" (five courtyards), located within an ancient hollowed-out building, consists of a shopping and leisure complex with shops, restaurants and cafés as well as the exhibition rooms of the Hypo-Kulturstiftung.

A suburban oasis and beyond The world's largest city park is simply called the "English Garden". This is a leisure oasis featuring splendid trees and lush meadows, meandering brooks, monuments and pavilions with the famous Chinese Tower rising above the park, which is surrounded by a beer garden that can seat 7,000. Within this 900-acre park you will find three other beer gardens, Seehaus, Hirschau and Aumeister.

The "fairytale castles" of King Ludwig II (Neuschwanstein, Linderhof, Herrenchiemsee), the churches and castles of art-historical eminence (Ettal Monastery, Wieskirche Church), the lakes (Starnberger See, Ammersee, Tegernsee) and Germany's highest peak, the Zugspitze, are well-known as places where you can explore the attractive historical sites and enjoy Bavaria in its true, natural beauty.

Programme by field of interest

Subcommittee 1 Chairman: *Andrew Fairley Smith*

1RC1	Pitfalls in evidence-based medicine
1RC2	Shared decision-making
1S1	The role of the law in maintaining quality
1S2	Myths and evidence in anaesthesia and intensive care
1S3	Patient involvement and satisfaction
1W1	Evidence into practice in critical care: the Cochrane Anaesthesia Review Group
1W2	Training to improve quality in anaesthesia

Subcommittee 2 Chairman: *Jan Jakobsson*

2RC1	Airway management and ventilation in day surgery
2RC2	Risk stratification: PONV and rational use of anti-emetics in day surgery
2S1	Assessment of preoperative risks and optimisation
2S2	Intraoperative analgesia in day surgery: the basics and the new
2S3	Coagulation and other complications in day surgery
2W1	How can we optimise the use of well-known drugs in day surgery?
2W2	Anaesthetic technique for open hernia repair: is there a "best practice"?

Subcommittee 3 Chairman: *Andreas Hoeft*

3RC1	Emerging Technologies for anaesthesiologists
3RC2	Perioperative Laboratory Monitoring
3S1	Standards of monitoring in the perioperative setting
3S2	Electronic Anaesthesia Records in the OR: Can we justify the expense?
3S3	Goals and Monitoring End Points in Anaesthesia & Intensive Care
3W1	Monitoring of Anaesthetics
3W2	OR - Management: Why, How & Who

Subcommittee 4 Chairman: *Wolfgang Schlack*

4Expert1	Pharmacological Reduction in Perioperative Myocardial Infarction
4RC1	Prevention and treatment of embolic complications in the perioperative setting
4RC2	Rational perioperative use of inotropes and vasodilators
4S1	Important cardiovascular risk factors in anaesthesia
4S2	The cardiac risk patient - what is new?
4W1	Do we have an impact on outcome after heart surgery?
4W2	Brain monitoring for carotid surgery

Subcommittee 5 Chairman: *Jaume Canet*

5RC1	Assessment of respiratory function
5RC2	Anaesthesia in smokers
5S1	Risk associated with mechanical ventilation and tracheal intubation
5S2	Management of perioperative hypoxaemia
5W1	The respiratory disabled patient: case discussion
5W2	How to manage obstructive sleep apnoea

Subcommittee 6 Chairman: *Donat R. Spahn*

6RC1	European recommendations on the use of recombinant factor VIIa as an adjunctive treatment for massive bleeding
6RC2	Transfusion-related acute lung injury: incidence/prevalence and treatment
6S1	Perioperative management of patients with coronary stents
6S2	Tolerance of Anaemia
6W1	Management of the severely injured
6W2	Cost of blood transfusions

Subcommittee 7 Chairman: *Basil F. Matta*

7RC1	Paediatric Head Trauma
7RC2	Intracerebral Haemorrhage: Pathophysiology and Treatment
7S1	Drugs and Techniques in Neuroanaesthesia and Neuro-Intensive Care
7W1	Burr hole and intraparenchymal catheter placement for ICP monitoring by intensive care physicians: a debate
7W2	DVT prophylaxis, anticoagulants and neurosurgery

Subcommittee 8 Chairman: *Bernadette Th. Veering*

8RC1	Central neural blockade in elderly patients with cardiovascular and pulmonary diseases
8RC2	Education in regional anaesthesia: new tools
8S1	Ultrasound in regional anaesthesia
8S2	Peripheral nerve block catheter technique
8S3	Bupivacaine, ropivacaine, levobupivacaine - are they different?
8W1	Regional techniques in trauma and emergencies
8W2	Spinal anaesthesia

Subcommittee 9 Chairman: *Claude Meistelman*

9RC1	Cellular signalling mediating anaesthetic actions on the brain
9RC2	Clinically relevant drug interactions in anaesthesia and intensive care medicine
9RC3	From acute to chronic postoperative pain: the pharmacological rationale and therapeutic perspectives
9S1	Allergy in anaesthesia
9S2	New drugs in the perioperative period
9S3	Residual Paralysis
9W1	Dexmedetomidine
9W2	TCI for ICU sedation

Subcommittee 10 Chairman: *George Meakin*

10RC1	Morbidity in Paediatric Anaesthesia: a long way to go?
10RC2	Sevoflurane in paediatrics: is it all gold?
10S1	Ventilation strategies
10S2	Paediatric respiratory problems
10S3	Postoperative pain management
10W1	Ultrasound guided blocks
10W2	Caudal vs nerve blocks for lower limb surgery

RC	REFRESHER COURSE	S	SYMPOSIUM	W	WORKSHOP

Subcommittee 11 Chairman: *Giorgio Capogna*

11RC1	Effects on the baby of maternal analgesia and anaesthesia
11RC2	Transplacental transfer of anaesthetic drugs
11S1	Pharmacogenetics (Joint session with ESA subcommittee 3)
11S2	The pregnant patient in the ICU
11S3	Pharmacodynamics of regional analgesia in labour
11W1	Thromboembolism in pregnancy
11W2	Recombinant Factor VII in obstetric anaesthesia

Subcommittee 12 Chairman: *Gernot Marx*

12RC1	The kidney in sepsis
12RC2	How to titrate fluid loading and vasopressor in septic shock
12RC3	Selective Digestive Decontamination
12RC4	Postoperative pneumonia
12S1	The microcirculation
12S2	Therapy of sepsis: the basics
12S3	Traumatic Brain Injury (TBI) (Joint symposium of Subcommittees 7 & 12)
12S4	Organ dysfunction in sepsis
12S5	Therapy of sepsis
12S6	Mechanical ventilation: an update
12W1	Filling the tank with resuscitation fluids
12W2	Recent advances in haemodynamic monitoring

Subcommittee 13 Chairman: *Bernd Böttiger*

13RC1	Cardiopulmonary resuscitation – From science to survival
13RC2	Factors influencing outcome after prehospital emergencies – A European perspective
13S1	Trauma resuscitation
13S2	Recent advantages and "hot topics" in emergency medicine – a review of 2006 and 2007
13S3	Important but forgotten conditions in emergency medicine
13W1	Prehospital thrombolysis in acute myocardial infarction. An interactive session with a voting system
13W2	Do we need Medical Emergency Teams (MET) in our hospitals? An interactive session with a voting system

Subcommittee 14 Chairman: *Mervyn Maze*

14RC1	Pre-Emptive Analgesia
14RC2	Postoperative Analgesia and Patient Outcome
14S1	Plasticity and Surgical Pain
14S2	Customising Pain Relief in the Post-genomic era
14S3	Non-Pharmacological Interventional Techniques for Pain
14W1	Use of Alpha-2 agonists for Pain Control
14W2	Post-Viral Neuropathic Pain

Subcommittee 15 Chairman: *Hugo Van Aken*

15RC1	Electronic resources to support learning
15RC2	The anaesthesiologist as reflected in the media
15S1	Genomics and Anaesthesia
15S2	Education and Training in Anaesthesiology
15S3	How to teach TEE in anaesthesiology
15W1	The European Diploma of Anaesthesiology and Intensive Care Medicine

Subcommittee 16 Chairman: *Sadek Beloucif*

16Expert1	How I manage an impaired physician
16RC1	Ethics and Pain: Beyond its control
16RC2	Medical Professionalism in Anesthesia and Critical Care
16S1	Communication and Consent in Anaesthesiology and Critical Care
16S2	Ethical implications of major catastrophes
16S3	New Ethical developments for the Anaesthesiologist in Transplantation medicine

Subcommittee 17 Chairman: *Marcus Rall*

17RC1	Incident Reporting Systems to enhance Patient Safety
17RC2	Achieving Ultrasafe Health Care - what barriers have to be addressed?
17S1	Improving patient safety - a systematic approach
17S2	What do you need to know about patient safety? How can it be learned ? The new European Patient Safety Course (EPSC) ?
17S3	Simulation to improve patient safety
17W1	Management of critical events: "Live" simulated critical incidents with interactive audience participation (anonymous voting system). The audience decides what is done next in the live enacted cases!
17W2	Management of critical events: "Live" simulated critical incidents with interactive audience participation (anonymous voting system). The audience decides what is done next in the live enacted cases!
17W3	Lessons learned from Incident Reporting Systems - from single cases to continuous improvement

EAMS

EAMSRC1	Laryngoscopy: past, present and future
EAMSRC2	The role of jet ventilation in airway management
EAMSS1	Paediatric Airway Management
EAMSS2	Morbidity and Death in Anaesthesia and Emergency Medicine with Reference to Airway Management
EAMSS3	Visualising techniques
EAMSS4	Training in Airway Management

Others

NYSSAS1	Quality of Care and Efficiency in the Perioperative arena
ESAW1	How to get an ESA research grant (workshop organized by the ESA Research Subcommittee)
GuestS1	German contributions to anaesthesia
IARSS1	Clinical Trials - are they leading us forward?
ISMGS1	The news in Medical Gas Therapy
NASCS1	Non-physician anaesthesia: a case of needs must - or a rational use of doctors?