



Dr. Antonio Torres
President of IFSO

Dear Members of IFSO, Dear Colleagues, Dear Friends,

It is my privilege to present you an update of IFSO's activities over the last months after the October Newsletter.

First of all, I would like to inform you that after a very delicate process and some negotiations, IFSO Executive Board approved, last December, the renewal of the contract with Springer in terms of continuing as our organ of expression, that means the Official Journal of the International Federation for the Surgery of Obesity and metabolic disorders (IFSO). In this new stage, Dr. Scott Shikora, from the North-American Chapter, will be the Editor in Chief, and there will be three Advisory Editors representing the other three Chapters: Dr. Michel Suter from the European Chapter, Dr. Ricardo Cohen from the Latin-American Chapter and Dr. Paul O'Brien from the Asian-Pacific Chapter. I wish all them all a very important success in their new commitment.

As you can appreciate in the present issue Dr. Rubino presents an updating of the International Diabetes Federation (IDF) Statement, where we can have the last approaches to Metabolic Surgery. This updating is accompanied by the paper published by Dr. Walter Pories in *Obesity Surgery* dealing with this subject. In my opinion, one of the most important duties of IFSO is to establish a close relationship with others colleagues (internists, endocrinologists and diabetologists) which are taking care of the same patients as we, as surgeons, are. To have some new Guidelines on this issue in the near future would be very worthwhile.

Regarding the activities developed by the different Committees, it is remarkable to comment that they are working on several initiatives. The Bylaws Committee is focused on writing a Manual of Policies and Procedures. The New Technologies Committee is dealing with organizing some training strategies to be implemented in the several international congresses and meetings we will have in the near future. The Position Statements and the Metabolic Committees are developing a new program for building up new Centers of Excellence, strategies related with Metabolic Surgery, especially within the Asian-Pacific Chapter. The Communication Committee is supervising all the scientific events that are asking for IFSO endorsement. The Corporate Committee is committed with exploring the chance of having an IFSO Foundation. The Strategic Planning Committee is developing the new ways of exploring the future of our Federation. The Financial Committee is planning the implementation of the next Scholarship announcement. The Scientific Committee is now helping to organize all the scientific activities of the Delhi Congress.

Up to March 2012, our Federation has 51 National Societies and one affiliated body, representing 53 countries and including 7.260 members. It means a 20 % increase compared to August 2010.

This month the European Chapter will organize the **V European Chapter-Meeting**, which will be held in **Barcelona (Spain) on April 26-28**, in conjunction with the Spanish Bariatric Surgery Association (SECO) Annual Congress. Another official IFSO meeting will be the **V North American Chapter Meeting**, in conjunction with the 29th ASMBS Annual Meeting, which will be held in **San Diego (California, USA) on June 17-22**. IFSO will co-sponsor the International Travel Award Program, which will be handed in during an International Reception.

New Delhi will host our **Annual XVII World Congress on September 11-15, 2012**. Dr. Pradeep Chowbey and all the local organizing committee are preparing a very exciting program on both, scientific and social, sections.

From here, I would like to invite of all you to attend these events.

With regard to the cooperation with other societies and activities IFSO is continuously endorsing and participating in many meetings all over the world. In this way, the IFSO-European Chapter is developing a very attractive and promising initiative in conjunction with the European Association for the Study of Obesity (EASO). After the first Joint Meeting, which was held in Munich (Germany) last December 2011, 5-6, they are planning to announce a second Joint Meeting late December 2012 or early 2013.

Finally, I would like to remind all of you again that IFSO's whole organization is at your disposal.

We have to work together to go after our main goal: the optimization of the treatment of all obese patients.

Antonio Torres, MD, FACS

IFSO President 2011-2012



www.ifso.com

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IFSO'S NUMBERS

Welcome to:

The Dominican society for the surgery of metabolic and bariatric surgery

Sociedad Dominicana de Cirugía Metabólica y Bariátrica
(SODOCÍMEB)

www.ifso.com

-
- **51** ADHERING BODIES
 - **1** AFFILIATED BODY
 - **7.260** MEMBERS
 - **1.402** OBESITY SURGERY SUBSCRIBERS
 - **307** SOARD SUBSCRIBERS





Chapters' Reports

European Chapter NEWS



Rudolf Weiner
President of the
European Chapter

At the moment the Chapter has **27 Adhering bodies** and **1 Affiliated body** with almost **1.700 members**.

The President elect of the Chapter is Prof. Yuri Yashkov, President of the Society of Bariatric Surgeons of Russia, who will officially become President in Barcelona on April 27th 2012, during the General Council meeting.

The next congress of the Chapter will take place in **Barcelona on April 26-28, 2012**. The President of the congress will be Dr. Joan Pujol (see page 5) .

The IFSO-EC meeting in **2014** will be held in **Bruxelles**, Belgium.

The General Council in Barcelona will vote to choose the next President elect and the location of the IFSO- EC meeting which will be held in **2016**. The two competing cities are: **Moscow** and **Stockholm**.

This is the schedule of the two meetings in Barcelona:

- **General Council Friday April 27 16.30—17.30**
Two delegates designated by each society are entitled to attend
- **General Assembly Friday April 27 17.30—18.00** Plenary Room
All the individual members of the Chapters are entitled to attend

The General Assembly will be informed about the decisions taken by the Executive Council and General Council.

NEWS from the Societies

EGYPT—Finally the Egyptian Society for Bariatric Surgery's web site is being finalized and launched to improve contact with surgeons nationwide and facilitate membership and enrolment in the society www.esbsegypt.com The 7th annual conference of the society was held on February 23rd 2012, 47 surgeons attended the 2 sessions of the conference. The first Hands On bariatric surgery course will be held in November 2012 .

Prof. Dr. Rudolf A. Weiner

President EU-Chapter IFSO 2010-2012



Executive Council of the European Chapter, Saafelden, Austria, 12th March 2012

(from the left) Rudolf Weiner, Martin Fried, Karl Miller, Nicola Scopinaro, Antonio Torres (invited guest), Joan Pujol, Yuri Yashkov



Chapters' Reports

European Chapter NEWS



Dr. Joan Pujol

President of 5th
IFSO-EC Congress

It is a great honor and pleasure for the IFSO-European Chapter and the Spanish Society for Metabolic and Bariatric Surgery (SECO) to invite you all to the **V Congress of the International Federation for the Surgery of Obesity and Metabolic Disorders, European Chapter (IFSO-EC)**, which will be held in Barcelona.

The 2004 symposium in Prague was the first European Bariatric Surgery Meeting. Two years later, the Lyon meeting made the European chapter an official reality and it reached full maturity with the subsequent congresses in Capri and Lausanne.

Obesity is one of today's most blatantly visible public health problems. **An escalating global epidemic of overweight and obesity – "globesity" – is affecting many parts of the world.** If immediate action is not taken, millions will suffer from an array of serious health disorders. The drastic increase of diabetes mellitus worldwide is strongly related to the globesity.

Obesity is affecting all ages and socioeconomic groups and threatening to overwhelm both developed and developing countries. The financial crisis in Europe influences the countries in different manner. Nevertheless **the current economic crisis is having no effect whatsoever on the number of operations being carried out. Obesity surgery is the only effective strategy to treat severely obese patients**

So now, it's time for innovation and evolution. The world of Bariatric surgery is changing with amazing speed and those who are immersed in this exciting field will appreciate a quality, advanced update. **New technologies, new approaches, robotic surgery, endoluminal techniques, metabolic surgery, latest results and other main topics will be analyzed in detail and discussed with some of the world's leading experts.**

Researchers, academics and professional colleagues in the field of bariatric and metabolic surgery will find in this **5th IFSO-EC Congress in Barcelona** a contact forum to meet, exchange ideas and discuss their own experiences and achievements.



Definitely, **one of the main topics will be Metabolic Surgery and the fact that Bariatric Surgery** is not only recommended for obese patients but for also other metabolic pathologies such as diabetes type 2.

It has been clearly demonstrated that Metabolic Surgery is effective for the treatment of diabetes type 2 and that therefore the results being obtained makes us consider this option for treatment in patients less overweight but who are suffering metabolic pathologies or disorders such as diabetes, cholesterol, etc...The new insights currently being gained by studying surgical interventions for diabetes are the most profound in the field of metabolic surgery.



Chapters' Reports

European Chapter NEWS

Medical training is essential when it comes to updating our knowledge of the advances made in the field of bariatric surgery. To this end, there will be live surgery sessions during the congress. Likewise, the organizing committee of the congress offers the possibility of taking part in different post graduate courses.

During the Barcelona congress you will be provided **with round tables, lectures, posters and video sessions, pros and cons debates, consensus panels and a highly professional exhibition of important companies which specialize in the field of bariatric surgery.**

Barcelona is at the leading edge of fashion, architecture, cuisine and style. As well as providing the vibrant backdrop of a cosmopolitan city with historic buildings, the famous architecture of Gaudí, whose principal works are recognized by UNESCO as world heritage sites, museums and numerous restaurants, Barcelona enjoys glorious beaches and easy access to coastal villages. Its location on the shores of the Mediterranean means that it enjoys a warm, welcoming climate and pleasant temperatures all year round.

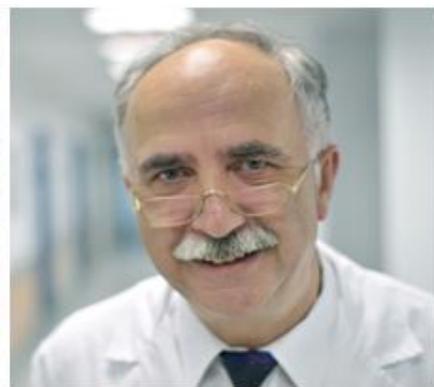
In addition, Barcelona has a long-standing tradition in the organization of events, ranking amongst the leading congress cities in Europe.

It will give us great pleasure to extend a warm welcome to all those attending this International Congress, who will be our guests in the city. We trust their stay will be both enjoyable and profitable for their work.

See you all in Barcelona !



Dr. Joan Pujol
President of the 5th IFSO-EC Congress



Prof. Rudolf Weiner
President EU-Chapter IFSO

Barcelona '12
April, 26 - 28, 2012

5th Congress of the International Federation for the Surgery of Obesity and Metabolic Disorders European Chapter (IFSO-EC)

1st Iberian Congress on Bariatric and Metabolic Surgery, (Spanish and Portuguese spoken)

Join us and be part of IFSO-EC 2012!
www.ifsobcn2012.com



Asia Pacific Chapter NEWS



Pradeep Chowbey

President of the APC

The IFSO Asia Pacific Chapter (IFSO-APC) membership continues to grow with the **Asia Pacific Metabolic and Bariatric Surgery Society (APMBSS)** coming in as a "member society" of IFSO-APC. As there are a number of countries with smaller societies, who are ineligible to become a member of IFSO-APC in their own right, this is the perfect chance for them to come under the 'umbrella' of APMBSS and therefore be represented at a higher level. However, IFSO-APC will be encouraging these countries to form their own societies so they are independent entities. Talks will be on-going and members will be kept advised on the progress.

At the 2nd IFSO-APC Congress which was held in Japan in February 2011, it was identified that IFSO-APC could play a mentoring role in generating awareness of bariatric surgery in a number of countries. As a result of this a **Professional Education & Training Committee** was formed to investigate how different societies can be assisted through mentoring and attending Workshops. Since that time, discussions have been taking place on how that can be achieved and currently members of the Committee are liaising with surgeons from Thailand in relation to organising a training workshop in (possibly in Bangkok) using wet cadavers. This issue will be discussed at the next IFSO-APC Executive Committee meeting and we hope these workshops will be held soon.

We are delighted to announce that the **IFSO-APC 3rd Congress** will be held in Kaohsiung, Taiwan from **12th to 14th April 2013**. At this stage it is proposed that Taiwan will be co-hosting the Congress with a Chinese Society, with an afternoon session dedicated to that Society which would be presented in Mandarin. It is hoped that this session can be held with simultaneous translation.

Pradeep Chowbey

President of the APC



The Emirates Obesity and Metabolic Surgery Interest Group has run the bariatric part of the **Asia Middle East Surgery Conference** which was held in **Dubai between 13-17 March 2012** and directed by Dr. Faruq Badiuddin. This was the first annual meeting of EOMSIG since its inception that was so well attended.

The bariatric program was chaired by Dr. Fawaz Torab, endorsed by IFSO, and included two Hand-on live animal workshops, one on Single Incision Laparoscopic Surgery and a two day workshop on Bariatric Surgery. Most popular were the two master classes on topics of widespread interest "Sleeve Gastrectomy" and "Leaks after Bariatric Surgery" in addition to two days plenary program covering all aspects related to bariatric and metabolic surgery. The program was enriched with expert opinions from many prominent people in the field like Karl Miller, Michel Gagner, and Pradeep Chowbey in addition to local experts from the group. The meeting has received a very positive feedback from speakers and delegates alike.



Dr. Faruq Badiuddin and Dr. Fawaz Torab



Prof. Pradeep Chowbey



Asia Pacific Chapter NEWS

24th Annual Scientific Conference of the Obesity Surgery Society of Australia and New Zealand



Bariatric Surgery – more than an operation 11–13 April 2012 Darwin Convention Centre



Lilian Kow

APC Representative

I am delighted to announce that the Obesity Surgery Society of Australia & New Zealand (OSSANZ) **24th Annual Conference** will be held in **Darwin** from **11th to 13th April 2012**.

The Conference theme 'Bariatric Surgery - more than an operation' will incorporate a multidisciplinary approach to obesity surgery and will explore not only the basic science of obesity but current trends, approaches and issues facing bariatric surgeons and allied health.

Our Key Note Speakers include the following:

Professor Phillip R Schauer who is Chief of Minimally Invasive General Surgery, Director of the Cleveland Clinic Bariatric and Metabolic Institute and Professor of Surgery at the Cleveland Clinic Lerner College of Medicine of Case Western Reserve University. His research interests include the pathophysiology of obesity and related diseases and outcomes of laparoscopic management of obesity.

Professor Michael Cowley who is the head of the Monash Obesity and Diabetes Institute. He is an internationally recognised physiologist with a strong focus on developing drugs to treat obesity, diabetes and metabolic disorders.

Associate Professor David Dunstan is a VicHealth Public Health Research Fellow and is the Head of the Physical Activity laboratory in the Division of Metabolism and Obesity at the Baker IDI Heart and Diabetes Institute. His research focuses on the role of physical activity and sedentary behaviour in the prevention and management of chronic diseases.

For more information go to www.ossanzconference.com.au or email ossanz@ossanzconference.com.au

Lilian Kow

President & Chair of OSSANZ



North American Chapter NEWS



Bruce Wolfe

President of the
North American
Chapter

The American Society for Metabolic and Bariatric Surgery (ASMBS) has concluded its relationship with the Surgical Review Corporation for the purpose of managing the ASMBS Centers of Excellence certification program. ASMBS has announced plans to combine the respective national bariatric surgery accreditation programs of the ASMBS and the American College of Surgeons (ACS) into a single program to achieve one national accreditation standard for bariatric surgery centers in the U.S.

The full announcement can be accessed at: <http://www.prnewswire.com/news-releases/unified-national-accreditation-program-for-bariatric-surgery-centers-announced-by-american-college-of-surgeons-and-american-society-for-metabolic-and-bariatric-surgery-142089913.html>

The goals of the program include establishment of consistent accreditation standards, promotion of quality improvement, and return value to patients, surgeons and other program participants. The details will be available as the program evolves over the next few months. The unified accreditation and quality improvement program will be extended to international centers later in 2012 after the new outcomes-based accreditation standards have been established.

Make plans now to attend the **29th Annual Meeting of the ASMBS** in beautiful San Diego California, **June 12-17, 2012**. New courses and symposiums will provide you with the latest in techniques, research and an opportunity to network with peers from around the world. Visit www.2012.asmbs.org for full course and plenary session details and registration information.

Bruce Wolfe,

President of the North American Chapter

29th ANNUAL MEETING
American Society for Metabolic & Bariatric Surgery | June 17 - 22, 2012 | San Diego, CA

Save The Date

Don't miss the 2012 ASMBS Annual Meeting!
San Diego, CA June 17 -22, 2012

Call For Abstracts
Deadline is October 31, 2011

Exhibitors Prospectus
Available Online October 2011

Preliminary Program
Available Online January 2012

ASMBS



Latin American Chapter NEWS



Carlos Casalnuovo

President of the Latin American Chapter

At the Latin American Chapter we are working hard on our objectives, on the following topics:

A detailed **"Latin American Registry for the Surgery of Obesity" (RELACO)** formed by the region's countries.

Therefore we have invited all Bariatric Surgeons of Latin America together with their multidisciplinary teams to be part of this registry. In order to do so it is necessary to have all the information we have requested in a form that will soon be incorporated into the Latin American Chapter website, www.ifsolatinoamericano.com

The information that will be included in the Latin American database is important not only for IFSO but also for all Bariatric Colleagues; for an active participation in upcoming National Courses and Congresses in Latin American and Worldwide; to participate in Cooperative Studies; internships in different credited Bariatric Surgery services specially in Latin America and the rest of the world; to improve communications and make them more fluid. Our "Inclusive System" proposal for all Bariatric Surgery teams in each country, will allow them to be represented in the Latin American Chapter and in IFSO, and also to foster the growth of the Latin American Chapter inside IFSO.

Inclusion of Bariatric Psychologists and Bariatric Nutritionists from local Bariatric Societies of IFSO's dependent countries.

These specialties teams should belong to their local Bariatric Societies and therefore to IFSO.

In order to follow the bariatric team multidisciplinary work criteria, and being IFSO a multidisciplinary society with its Allied Health Professionals' committee, we believe that integrating psychologists and nutritionists is a priority. If they are enlisted in each of IFSO's local societies in each country and consequently in IFSO itself they would be under this International Federation umbrella with the aim of supporting their members in all aspects related directly to their profession, therefore giving greater scope to the team work involved in the improvement of severe obese patient's treatment.

This item has been discussed in the General Assembly of the Latin American Chapter of IFSO in Cartagena, Colombia, and was approved unanimously.

Encourage all Latin American countries to become IFSO members, if they do not have any national Bariatric Societies or if they have their own societies but are not yet IFSO members.

Up to date 1 Bariatric Society from North America (Mexico), 4 Bariatric Societies from Central America and Caribe (Panama, Guatemala, Costa Rica and Dominican Republic) and 9 societies from South America (Argentina, Bolivia, Brazil, Chile, Colombia, Ecuador, Paraguay, Peru and Venezuela) are IFSO members. Total **14 societies**.

Structure of the Executive Board of LAC, similar to IFSO to have similar parameters without losing the autonomy.

- **Executive Board**

President 2 years, President Elect 2 years, Secretary - Treasurer 4 years, Junior Past President 2 years, Senior Past President 2 years, Administrative Professional Advisory Council (Consejo Asesor Administrativo Profesional) (CAAP), **Coordinator:** Ex President (rotation), **Members:** Ex President, **Advisors:** Every professional that would be useful for the development of LAC.

- **General Council**

President of each Society of LAC. There shall be such committees as it deems necessary the Executive Board with Members of the Societies belonging to the LAC.

- **Administrative Secretary**



Latin American Chapter NEWS

Upcoming Meetings

Possibility of increasing the number of our Congresses allowing them to be annual. The exception is when the World Congress takes place in one of our Latin American countries. The evolution of bariatric surgery and advances in technology applied to surgery requires us to make these meetings more often than before, as an important contribution to the surgeons who are getting started with multidisciplinary teams. Our Bylaws permits it. In this way we can begin working in advance, and LAC has to be very active in helping those countries, and not as spectator.

Peru, Cuzco 2013 (confirmed)
Argentina, Buenos Aires 2014
Guatemala, Guatemala 2015

It has been discussed in the Executive Board of IFSO the possibility to expand the number of members. The LAC proposed to have one more member for each Chapter. After long discussions we demonstrated the need and desirability to hear other voices and that the chapters are more represented. The Presidents of the Societies of LAC, and members of the Administrative Professional Advisory Council, will send a list of 5 names suggestions, to the Executive Board to be elected as 2nd member. This will increase the Latin American presence to allow a further growth of the region.

Website update to include information on the Latin American Bariatric Societies, Scientific Meetings and future Congresses, etc.

We can complete the **full lists of member of all Societies**.

This way we have the data of our members, and is the first step before a more detailed as the RELACO (described above), we know the difficulties that exist at the intersection of information and in making the proposal, but the idea continues.

Our desire is to inform all through our website, redesigning the site with more news. The project started, we did a contract with a Web-Master, but we have financial difficulties, in fact we are discussing with the Presidents of the 14 IFSO Societies and with IFSO the possibility to financially support the LAC. This way the Chapter can develop and grow with its Societies as it deserves.

Project Database Registry operations

The Societies of LAC countries should collect data on the operations of its members based on forms that we will send through the web. The LAC will process them and we could obtain valuable data by country. It is an arduous and very ambitious task, but with the efforts of all of us we can begin.

LAC is open for suggestions from all the members of the Societies of Latin American Chapter!!

If we continue with these points, we develop our projects to let the Chapter and its member societies grow.

We need the cooperation and help of all of you!!

Prof. Carlos Casalnuovo, MD,FACS

Presidente IFSO LAC



2012_IFSO World Annual Meeting

INDIA



Pradeep Chowbey

President of the Congress

President Elect of IFSO

President of the APC

XVII World IFSO Congress

11_15 September, 2012 New Delhi, India www.ifso2012.com

Prof. Pradeep Chowbey was elected President of the Asia Pacific Metabolic & Bariatric Surgery Society (APMBSS) during the 6th International Congress of APMBSS held at Singapore, 21-23 October 2010.

The **XVII World Congress IFSO 2012** will be held on **11 – 15 September 2012** in **New Delhi, India** in association with the Obesity & Metabolic Surgery Society of India (OSSI) and the Asia Pacific Metabolic & Bariatric Surgery Society (APMBSS). The Congress will be hosted by Prof. Pradeep Chowbey, Congress President, President-APMBSS, President Elect-IFSO (APC), Past President-OSSI and Director - Max Institute of Minimal Access, Metabolic & Bariatric Surgery, Max Super Speciality Hospital, Saket New Delhi, India.

Abstract Submission & Early Registration deadline: April 15, 2012



2013_IFSO World Annual Meeting

TURKEY



Mustafa Taskin

President of the XVIII IFSO Congress



Dear colleagues,

We are glad time passes so fast that less than one and a half year is left for the **18th Congress of IFSO** that will be held in Istanbul which is the only city that connects Europe and Asia and forms Eurasia. We are working with our team for preparing a unique, vast and exciting scientific and social program for an unforgettable IFSO congress.

I am happy to inform you about the preparation process and activities of the IFSO 2013 Congress as below.

Posters created in numerous versions both in English and Turkish. They will be hanged in many parts of the conferences and the universities till the congress.

The official congress web page www.ifso2013.org is ready to be launched just after the IFSO2012 in India, both in English and Turkish languages. Congress program will be announced in India.

On behalf of the Turkish Obesity Surgery Society and IFSO 2013 organizing committee, we have participated intensively to the IFSO 2011 World Congress which was held in Hamburg between 31 August and 3 September 2011. Prof Taskin submitted 7 posters and chaired 1 session during IFSO World 2011 Congress. We have also promoted IFSO 2013 with a booth in the exhibition area.

The Turkish Obesity Surgery Society has hosted the 3rd National Congress of Morbid Obesity and Metabolic Surgery, on September 21 - 24, 2011 at



Prof. Taskin has chaired a bariatric surgery session in the 18th European Congress on Obesity (ECO 2011) which was held in Istanbul on 25-28th of May 2011.

Mardan Palace Hotel in Antalya with international participation.

Main topics of Obesity Surgery were discussed by conferences, symposia, panels, and live broadcast from operation room.

Furthermore, state of the art lectures were presented by talented and precious authors from United States and Europe such as: Andrew T. Austin, Henry Buchwald and Jane Buchwald.



We have exhibited in the exhibition area of ECO 2011 and promoted IFSO 2013 to more than 2000 participants and exhibitors.



2013_IFSO World Annual Meeting

On behalf of the Turkish Obesity Surgery Society we are proudly happy to announce that we have completed the national congress with the excellence in scientific and social activities.

This national congress has been a pioneer activity for us to promote the IFSO 2013 World congress for local authorities.

The Turkish Obesity Surgery Society has been organizing Obesity Surgery courses in many Turkish Universities and continuing promoting activities of the 2013 IFSO World Congress.



FUTURE ACTIVITIES

The Turkish Obesity Surgery society will organize a Regional Conference on 22 – 24 June 2012 in Konya, Turkey.

This regional conference will accommodate live broadcasts with precious surgeons from Europe. Prof. Taskin and the organizing committee will be attending the 5th IFSO-EC Congress in Barcelona.

We will be exhibiting during the Barcelona meeting and looking forward to meet you there!

The most crowded Turkish participation is foreseen for the XVII World Congress in India to be able to promote IFSO 2013.

We will be exhibiting in India and we are planning some surprises for the participants.

WE ARE LOOKING FORWARD TO SEEING YOU IN ISTANBUL!

Prof. Mustafa Taskin

XVIII World Congress President



2014_IFSO World Annual Meeting

CANADA



Michel Gagner

President of the IXX
IFSO Congress

IXX World IFSO Congress

26_30 August, 2014 - Montreal, Canada

<http://www.congresmtl.com/Communications/IFSO2014/IFSO2014.pdf>

montréal

19th World Congress
of IFSO

Montréal, Canada
2014



2015_IFSO World Annual Meeting

AUSTRIA

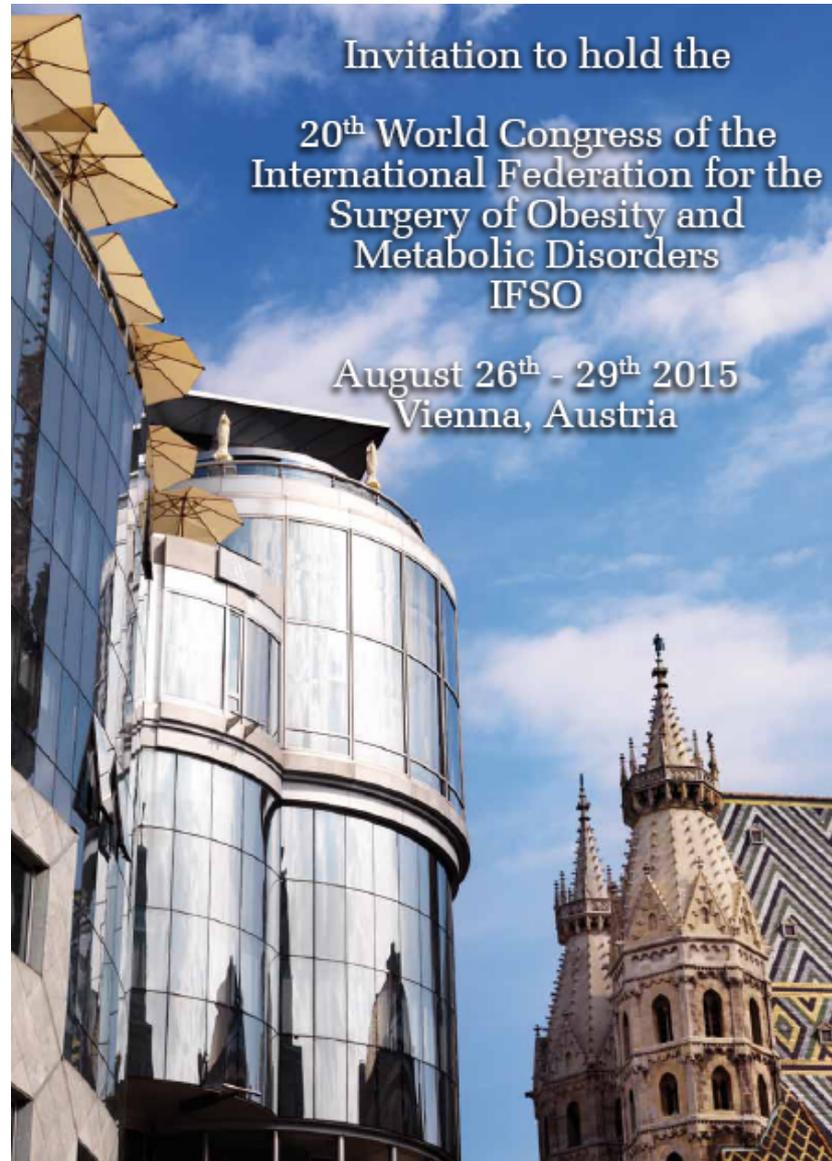


Karl Miller

President of the
XX IFSO Congress

XX World IFSO Congress

26_29 August, 2015 - Vienna, Austria



2015_IFSO World Congress

The General Council in Hamburg, on August 30 2011, has decided that the XX World Congress in 2015 will be held in Vienna, Austria.





2012 Endorsed Congresses



Obesity Surgery Society
of Australia & New Zealand

24th Annual Scientific Conference
of the Obesity Surgery Society of
Australia and New Zealand
(OSSANZ)
11-13 April, 2012 Darwin,
Australia

www.ossanzconference.com.au

24th Annual Scientific Conference of the Obesity Surgery Society of Australia and New Zealand



Bariatric Surgery – more than an operation 11-13 April 2012 Darwin Convention Centre



SICOB-SIO National Congress
18-20 April, 2012 Abano Terme (PD),
Italy

www.sicob.org



2nd International NONINVA Symposium
Non Invasive Bariatric Techniques
20-21 April, 2012 Lyon, France
www.noninva-obesity.com



5th IFSO EUROPEAN CHAPTER
MEETING
and 1^o congreso Iberico de Cirugía Ba-
riátrica y Metabólica (SECO-SPCO)

26-28 April, 2012 Barcelona, Spain

www.ifsobcn2012.com

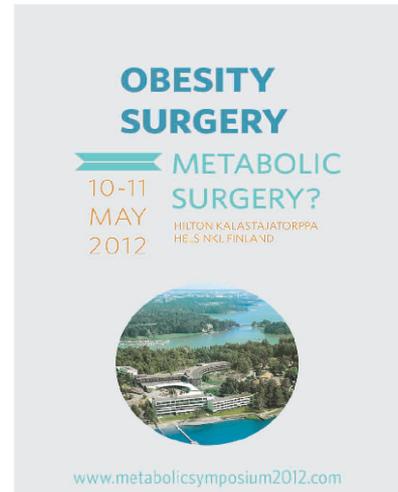




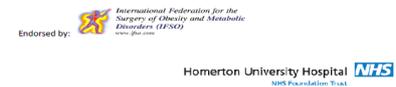
2012 Endorsed Congresses

FOTEG meeting "Metabolic surgery?"
10-11 May 2012, Helsinki, Finland

www.metabolicsymposium2012.com



2nd Homerton Bariatric Symposium
Homerton University Hospital, London (UK)
21-22 May, 2012



Middle East Bariatric Surgery Course
(Sleeve Gastrectomy—Gastric Banding)
University of Sharjah, Sharjah (United Arab Emirates), May 2012



COURSE AGENDA – DAY 1

- 08.00 Meeting at the hotel reception
- 08.15 Departure from hotel to Sharjah Surgical Institute
- 9.00 – 12.00 **Conference room** Faculty: Prof. Miller
 - Patient Selection & preparation for Gastric Sleeve
 - Patient positioning & DR set-up for Gastric sleeve
 - Anatomy & surgical technique in Gastric sleeve
 - Patient Selection & preparation for RNY
 - Patient positioning & DR set-up for RNY
 - Anatomy & surgical techniques in RNY:
 - Antecolic or retro-colic technique?
 - End to end or side to side Gastro jejunostomy?
 - Roux limb length
- 12.00-13.00 **Lunch Break**
- 13.00 – 16.00 **Experimental Laboratory (Dry Lab)**
 - Product Overview**
 - Harmonic Ace
 - Xcel – Bladeless trocar 15mm
 - SAGB VC
 - GoldFinger, velocity
- Suturing and Knotting Techniques on pelvi trainers:
 - Endoloop-technique
 - Extracorporeal knotting technique
 - Intracorporeal knotting technique
- Virtual reality training: eye hand coordination & Basic Skills
Q&A and Wrap-up



2012 Endorsed Congresses



International Congress on Metabolic and Bariatric Surgery and Related Diseases and the IV International Symposium, a multidisciplinary approach

August 2012, Buenos Aires, Argentina
www.saco.org.ar

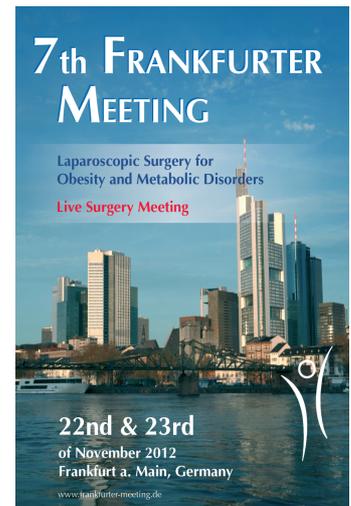


5th Ukrainian Conference "Surgical treatment of obesity and related metabolic disorders"

Yalta (Crimea), September 2012
www.obesitysurgery.org.ua



7th FRANKFURT MEETING "Laparoscopic Surgery for Obesity and Metabolic disorders"
22-23 November 2012, Frankfurt, Germany
www.frankfurter-meeting.de





The IDF Statement



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SURGICAL TREATMENT OF TYPE 2 DIABETES: THE IDF POSITION STATEMENT

There is growing evidence that in severely obese individuals bariatric surgery can also cause dramatic improvement of type 2 diabetes. Bariatric surgery can have a number of other health benefits including improvement of hypertension, dyslipidaemia, sleep apnoea, quality of life and overall survival.

In spite of the potential gains, bariatric/metabolic surgery remains largely underutilized, with less than 1-2% of eligible patients undergoing such form of treatment.

The **International Diabetes Federation, (IDF)** an umbrella organization representing over 200 national diabetes societies recognized the urgent need for international guidance in this rapidly developing area of care. The IDF appointed an expert group, chaired by Professors Paul Zimmet, George Alberti, John Dixon and Francesco Rubino and including leading international diabetes experts, surgeons, internists, and health economists. The group, which included several distinguished IFSO members and represented all continents of the World, drafted a document that was formally issued as an official Position Statement of the IDF on the role of surgery in the treatment and prevention of type 2 diabetes in obese people.

While recommendations and position statements on the role of bariatric surgery exist, the IDF Position Statement is, in many ways, the most authoritative endorsement in the history of this surgical discipline. The statement has been published and co-published by many medical and surgical Journals, including a summary in the Lancet in the summer of 2011.

In particular, the IDF position statement recommends that surgery should be:

- an accepted option in people who have type 2 diabetes and a BMI of 35 kg/m² or more
- considered as an alternative treatment option in patients with a BMI of 30–35 kg/m² when diabetes cannot be adequately controlled by optimal medical therapies, especially in the presence of other major cardiovascular disease risk factors.

The statement also recommends consideration of surgery early as an option for eligible patients rather than being held back as a last resort, given that almost all severely obese patients are unsuccessful in their long-term weight loss efforts and earlier intervention increases the likelihood of diabetes remission.

In addition to appropriate peri-operative assessment and care, bariatric surgery for type 2 diabetes requires lifelong follow up for postoperative and diabetes monitoring, multidisciplinary care and measurement of diabetes outcomes using criteria consistent with IDF recommendations.

The full document is published in Diabetic Medicine (**Diabet Med.** 2011 Jun; 28(6):628-42) and a booklet of the Position Statement is distributed by the IDF and may be available upon request (www.idf.org).

IFSO members should be aware of the IDF position statement and circulate and discuss it with physicians colleagues and endocrinologists in their centers to raise awareness of diabetes surgery.

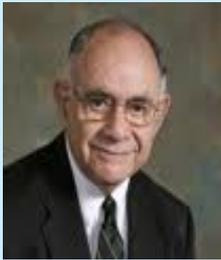
IFSO members could use the IDF Statement to promote initiatives in their regions for the development and promulgation of national guidelines for bariatric surgery in people with obese type 2 diabetes.

The IDF Position Statement is the most authoritative recognition of the merits of bariatric surgery by a non-surgical organization. It is at the same time, a unique opportunity to advance the field and raise standards of surgical treatment of obesity and diabetes.

Francesco Rubino, MD



The IDF Statement



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The IDF Statement: A Big and Long-Awaited Step for Our Diabetic Patients

Step by step. Science moves slowly; much more slowly than most people realize. Even though Alexis Carrel developed vascular surgery between 1901 and 1910, performed a coronary artery bypass graft on a dog, and won the Nobel Prize in 1912 [1], the first repair of an aortic aneurysm in a patient was not performed at the Strong Memorial Hospital until 1960. Similarly, even though Kelling performed his first laparoscopic procedure in dogs in 1902 [2], Jacabeus performed laparoscopy on humans in 1910 [3], and in 1985 Semmpublished over 1,000 papers on the technology [4], Eddie Joe Reddick still encountered massive criticism when he introduced laparoscopic cholecystectomy in 1991 [5].

Similarly, the development of the surgical treatment for type 2 diabetes (T2DM) has progressed deliberately, often to our frustration. Our surprising observation in 1980 [6] that the gastric bypass was followed by full remission of T2DM has also taken three decades to reach acceptance even though it is our nation's most expensive disease and even though the current approaches, i.e., diets, exercise, behavioural modification, and drugs have proven to be woefully disappointing. The motto of the American Diabetic Association, "living with diabetes" sums up the hopelessness of this devastating illness.

Over the last three decades, surgeons have achieved what was previously deemed impossible, the full, durable, and safe remission of T2DM. It is now possible to "live without diabetes". Even so, skepticism by our colleagues, our patients and the carriers has been so pervasive that less than 1% of the patients who could benefit from metabolic surgery have access.

Accordingly, the decision by the International Diabetes Federation (IDF), available at the pre-publication site <http://www.asmb.org/download/IDF-Position-Statement-Bariatric-Surgery.pdf>, is an important and courageous step: "bariatric surgery... can be considered an effective, safe and cost effective treatment for people with T2DM and obesity not achieving recommended treatment targets with medical therapies, especially in the presence of other major comorbidities." This step was not taken lightly; the document is superbly documented and referenced. The organizers of the conference, the authors of the statement, and all the patients who participated in the clinical trials deserve our deep gratitude. Please read it several times and send copies to your colleagues; it is a most useful summary.

No commentary, especially an invited commentary, would be complete without suggestions. Accordingly, during the next phase of the development of bariatric surgery, let me offer the following comments:

- The term "metabolic surgery" should be favoured over the current "bariatric surgery". Our primary goal is not weight loss but improved metabolic health.

-We surgeons need to standardize our metabolic operations. A gastric bypass performed by one surgeon may differ sharply from the one completed by his colleague in the next room. Differences in (1) the size of the gastric pouch, (2) presence or absence of a Fobi band, (3) size and construction of the gastrojejunostomy, (4) length of the biliopancreatic limb, (5) length of the alimentary limb, (6) construction of the jejunojunction, (7) presence or absence of a drain, (8) laparoscopic vs. open approach, (9) ante- vs. retrocolic construction, and (10) closures of the mesenteric defects produce 1,024 variations in the procedure. Accordingly, especially in major centers with large practices, the adoption of uniform standards would assure not only better comparisons of the operations but also lead to improved outcomes. I am not recommending one national standard, only suggesting that some surgeons agree to collaborate in the design of operations that they will perform unless an unusual finding dictates otherwise. However, unless we standardize, we will not be able to address some intriguing metabolic puzzles, such as does a gastric sleeve resemble a band or a bypass, and why Scopinaro's operation in lean individuals does not lead to more weight loss [7].

- The body mass index (BMI = Kg/m²) is a vital metric for epidemiology but inappropriate to determine whether a patient should or should not have an operation. It discriminates against Asians, African-Americans, older patients, and males. It totally fails to allow for fitness: one of our study patients was a chap, 5'8" (1.73 m) who weighed 308 lbs (140 Kg) with a BMI of 47.0—easily a candidate for metabolic surgery by any carrier's standard—yet, he was the fastest running back at East Carolina University. New guidelines are needed that consider the comorbidities along with the BMI in the development of guidelines for metabolic surgery [8].

- In the next version of the document it might be useful to provide diagrams of the metabolic operations since many of our colleagues (and indeed our residents) are too often not certain of the anatomy. It also provides an approach to compare the outcomes of operations (Fig. 1).

-As noted in the document, access to metabolic surgery is denied to those who need it most. A vigorous program of education for physicians, nurses, politicians, and the public are needed. The non-profit foundations and the professional societies should make such initiatives a priority. The denial of metabolic surgery by Medicaid of North Carolina for over a year is shameful—and poor economics as well.

In summary, the statement by the IDF is most welcome and timely. Let us do our best to distribute it as widely as possible.

Walter J. Pories, MD

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The Journals

Obesity Surgery



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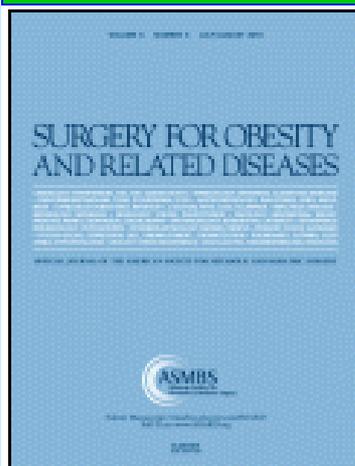


Reduced *Obesity Surgery* Group Subscription Rates for IFSO Member Societies

The **International Federation for the Surgery of Obesity and metabolic disorders (IFSO)** encourages all IFSO Member Societies to take advantage of the reduced subscription rate to ***Obesity Surgery***, IFSO's official journal. The benefits of subscribing to the journal through IFSO include:

- A full year's subscription (12 printed issues + Book of abstracts of IFSO Annual World Meeting + online version) at the special rate of only USD \$80,00 (instead of 211,00 \$)

Surgery of Obesity and Related Diseases (SOARD)



Becoming a member of IFSO you can subscribe **SOARD (6 issues)** at the discounted rate

of **USD \$92,00**



IFSO Endorsement

If you think your meeting fulfils the below mentioned requirements please send your endorsement requests to secretariat@ifso.com together with a PDF file of the Course' scientific program.

IFSO-Communication Committee will carefully review the concepts and objectives of the course as well as the faculty, the structure and content of the course. Endorsement does not in any way offer credentialing or grant approval to the participant regarding future skills or outcomes.

Individual Endorsement

- Course must be directed or coordinated by an IFSO member, or have as its primary faculty, at least one IFSO member
- Endorsed Courses should offer CME credits (if not, an explanation must be provided)
- Course Director must ensure that disclosure of conflict of interest are enforced
- Reduced course fee must be granted to IFSO Members

The fee for individual course endorsement is **120,00 US\$**

Institutional Endorsement

- More than two (2) courses must be held per year at the same physical institution
- Course must be directed or coordinated by an IFSO member, or have as its primary faculty, at least one IFSO member
- All brochures and faculty lists must be submitted to the IFSO-CC for annual review
- The center must be equipped with adequate facilities
- Endorsed Courses should offer CME credits (if not, an explanation must be provided).
- Course Director must ensure that disclosure of conflict of interest are enforced
- Reduced course fee must be granted to IFSO Members

The fee for institutional course endorsement is **360,00 US\$** per year

Benefits:

1. Endorsed Courses will be:
 - listed on IFSO's Website on the Endorsed meetings page
 - included in IFSO's E-newsletters
 - mailed to IFSO Members
2. The Course Director may include IFSO's Endorsement statement and IFSO Logo on promotional brochures and course materials.

After the approval of the Communication Committee, you will receive from our Secretariat further instructions about the payment of the endorsement fee.



HOW TO JOIN IFSO

2012 FEES

IFSO Membership: **20,00\$ (only for non surgeons)**

IFSO Membership + *Obesity Surgery*: **100,00\$**

IFSO Membership + *Obesity Surgery* + SOARD: **192,00\$**

Individual Membership

Only members who live in Countries where there is no National Society for the Surgery of Obesity can apply to become "Individual affiliated members", writing to the Secretariat and asking for the application form.

Payment can be made either by bank transfer or credit card/Paypal on www.ifso.com (with a surplus fee of 4%)

Membership through the National Society

All national societies must send the list of their members (using the "Model list" provided by the Secretariat).

Payment from the society must be made by bank transfer, after receiving the receipt by the Secretariat.

The reduced subscription rate of **USD \$80,00** to the Springer Journal **Obesity Surgery** is only one of the many benefits of IFSO membership. Further benefits include:

- An official IFSO Certificate of Membership
- Subscription to the Elsevier journal **SOARD** at a discounted rate of **US \$92,00**.
- Use of the website to advertise National Society activities
- Links to National Society websites on IFSO's website
- Reduced entrance fees to International and Regional meetings
- Membership in a professional global network
- Regular E-newsletters
- Listing in the surgeon's registry on IFSO's website

For details on how your National Society for the Surgery of Obesity can become a member of IFSO, for Individual membership requests and for any other information feel free to contact:

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