

Interview with Prof. Steven Wexner: fluorescence imaging and TaTME applied in colorectal surgery

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Expert's brief introduction

Prof. Steven Wexner is the Director of the Digestive Disease Center and has been on Staff at Cleveland Clinic Florida since 1988. He has been the Chairman of the Department of Colorectal Surgery since 1993. Dr. Wexner was Chief of Staff from 1997–2008, Chief Academic Officer from 2008–2012, and Chairman of the Division of Research and Education from 1995–2012. Dr. Wexner holds many academic appointments, such as Affiliate Professor at Florida Atlantic University; Clinical Professor at Florida International University; Affiliate Professor of Surgery at the University of South Florida, Tampa, Florida.

Editor's note

On Feb. 18, 2017, the Digestive Disease Institute Week (DDI Week) sponsored by Cleveland Clinic annually successfully ended, after a 5-day scientific and compact agenda. The event took place in Boca Raton, a beautiful city located in Palm Beach County, Florida, USA. With a history of 28 years' development, promotion and efforts, it has been a prestigious excellent meeting in digestive disease, enjoying a rather high reputation in China as well. The meeting is dedicated to providing comprehensive in-depth, detailed overview of new, controversial, challenging, and provocative themes, advances, innovations and inspirations in digestive disease.

For AME Publishing Company, it was an honor to receive an invitation from the committee to attend and witness the various events going on within the meeting. We have broadcast the meeting via various academic platforms, to extend its highlights to world experts who were unable to be onsite. Details on meeting highlights could refer to the following link, <http://atm.amegroups.com/article/view/13905/html>.

International meetings are always excellent opportunities for us to meet, communicate and interact with our editorial board members, guest-editors, authors, reviewers, readers,



Figure 1 Sketch of interview. Prof. Steven Wexner (left) and Dr. Jun Chen (right).

speakers and attendees. During the meeting, we were able to conduct brief interviews with some of the renowned speakers, to share their presentations and perspectives on hot topics in their fields.

We are honored to have an interview with the meeting director, Prof. Steven D. Wexner (*Figure 1*), a world-renowned expert, Director, Colorectal Surgery Digestive Disease & Surgery Institute, Cleveland Clinic Florida, The interview was conducted by Dr. Jun Chen from the Fifth People's Hospital of Shanghai, Fudan University, who is a fellow in Cleveland Clinic Florida.

As the director of the DDI Week meeting, Prof. Wexner introduced that most popular highlights of this meeting are separately fluorescent guidance and transanal surgery, together with sections about teamwork metal conditioning, metal preparation surgery and the new choices on how to increase patients' safety. What's more, it was available in the AIS Channel so that the surgeons from China even all over the world could watch the meeting online.

In his speech, when talking about the main indications of fluorescent imaging using in colorectal surgery, Prof. Wexner referred that the only FDA approved indication now in USA is bowel perfusion, which is very helpful in the surgical practices. The main factor taken into consideration

before using fluorescent imaging should be the location of the anastomosis instead of the location of tumor.

As for the progress of Transanal Total Mesorectal Excision (TaTME), Prof. Wexner considered that it's a very promising surgery with largely applied and studied currently for malignant tumor in Europe and USA. But the fact is that most surgeons are not quite familiar with the anatomic plane, and the techniques for performing surgery are still not mature enough.

At the end of the interview, when asked about how to improve the shortcome of Chinese doctors in formal influence clinical studies, Prof. Wexner suggested that the best way is to learn from someone outstanding around you.

Interview questions

- ❖ In terms of fluorescent imaging, what are the main indications in the field of colorectal surgery?
- ❖ In your clinic, you routinely use it. Are there any other factors you have to take into consideration before using fluorescent imaging? About the location of the tumor, which location do you prefer to use, or was it used on all locations and colorectal surgeries, no matter rectal cancer, colon cancer or IBD surgeries?
- ❖ Could you help to introduce the progress of TaTME and

its future?

- ❖ What do you think of the completely TaTME and the hybrid TaTME? There was a lecture from Dr. Marks and he introduced Total TaTME about mobilization of the splenic flexure, ligation of IMA from the bottom. What do you think of this technique?
- ❖ In some presentations, TaTME was introduced just being used in rectal cancer less than 10 cm from the anal verge. What are your suggestions?
- ❖ What are the highlights of the meeting?
- ❖ What's your suggestion on performing formal influence clinical studies?

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Footnote

Conflicts of Interest: The authors have no conflicts of interest to declare.

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