AIMS AND FORMAT

The first annual Brussels/Genval upper extremity symposium, held in May 1992, was on Advances in Hand and Wrist Biomechanics. Since that meeting, the Château du Lac at Genval has hosted each spring the Brussels/Genval International Symposium, on a specific topic involving the upper limb. In 2001, the theme was Objective Assessment of Hand/Upper Extremity Function and Outcome, involving over 100 participants from 20 different countries. The primary goals of the Brussels/Genval annual upper extremity symposium, gathering together in a first-class resort close to Brussels experts from different disciplines (the previous symposia had been attended by orthopedic, plastic and general surgeons, physiotherapists, rheumatologists, anesthesiologists, pain specialists, radiologists, nuclear medicine scientists, pathologists, engineers, basic scientists), are to promote the exchange of ideas, to establish guidelines on a consensual basis, and to foster collaborative investigations among various specialists.

The organizers invite you today to participate in the tenth anniversary symposium, on Advances in Minimally Invasive Hand/Upper Extremity Surgery. In the last decades, endoscopic, robotic and minimally invasive techniques have revolutionized all types of surgeries (non-open-chest cardiac surgery, coelioscopic interventions, abdominal or retroperitoneal organs, including the spine, image-guided neurosurgery, interventional radiology, arthroscopy and percutaneous osteosynthesis in orthopaedic surgery, endoscopic harvest of flaps in plastic surgery, etc.), decreasing the morbidity and the duration of hospitalization. The population of our countries awaits such expertise from our surgical facilities, not realizing the costs, technical difficulties and dangers involved in such procedures. Many minimally invasive techniques are presently well established and performed on the upper extremity, but some remain controversial. As examples, the present indications of the arthroscopic techniques in shoulder instability and cuff tears and in frozen shoulder are still debated. The types of implants (design, bioabsorbability) inserted for shoulder arthroscopic stabilization are also a matter of discussion. Arthroscopic arthrosis of the elbow is currently performed in some centers, but the long-term results are not well established and, even in experienced hands, the technique remains potentially dangerous. Wrist arthroscopy allows excellent visualization of ligamentous and tendinous structures and osteophytes, and the diagnosis can also be made by other techniques (i.e., CT-arthrography or MRI) and the actual arthroscopic treatment possibilities of such lesions are limited in wrist arthroscopy is also limited in wrist arthroscopy. Whether approach to the mid-carpal joint can be reached and detection of associated soft-tissue injuries is the same as the technique of the comminuted fractures. Usually, a better and more effective wrist arthroscopy is possible. However, it involves that joint congruencies and the actual arthroscopic treatment possibilities of such lesions are limited in wrist arthroscopy and some displaced intraarticular fractures of the distal radial, with reduction of joint incongruencies and the actual arthroscopic treatment possibilities of such lesions are limited in wrist arthroscopy is possible. However, it involves that joint congruencies and the actual arthroscopic treatment possibilities of such lesions are limited in wrist arthroscopy is possible. However, it involves that joint congruencies and the actual arthroscopic treatment possibilities of such lesions are limited in wrist arthroscopy is possible. However, it involves that joint congruencies and the actual arthroscopic treatment possibilities of such lesions are limited in wrist arthroscopy is possible. However, it involves that joint congruencies and the actual arthroscopic treatment possibilities of such lesions are limited in wrist arthroscopy is possible. However, it involves that joint congruencies and the actual arthroscopic treatment possibilities of such lesions are limited in wrist arthroscopy.

Besides these well-established techniques, whose indications remain to be precisely determined on a consensual basis, many new minimally invasive procedures are proposed. In recent years, for example, videothoracoscopy using ultrasonic equipment has been used to perform upper extremity sympathectomy for hyperhidrosis or algodystrophy. Endoscopic harvest of vein, arterial or nerve grafts is now possible, as well as endoscopic dissection of fascial or muscular flaps or of soft-tissue tumors, although most indications are not in the upper extremity. Endoscopic or percutaneous treatment of lateral epicondylalgia or of retrolateral bursitis has been reported. Endoscopic techniques have been proposed for neurolysis at other locations than for the carpal tunnel (elbow cubital tunnel) and for forearm fasciotomy. Arthroscopy has been performed to remove the radial head or the first carpal row or to investigate small wrist and hand joints. New refinements of arthroscopic techniques (installation, portal, instrumentation) are proposed each year. Miniature flexible endoscopes may be used in the future, i.e., for flexor tendon surgery. Image-guided surgery is used in selected bone tumors. Endoscopic techniques have been used to perform axillary lymphadenectomy in breast cancer patients. Ultrasoundographically-assisted surgery has been proposed in the upper extremity. These new techniques will be presented at the symposium, technical solutions outlined, and their future indications in our surgical armamentarium discussed. New ideas will be discussed as well, and close cooperation between bioengineers and surgeons promoted.

Minimally invasive techniques allow many procedures to be performed on an ambulatory basis. Much progress has been made in recent years in organization of outpatient surgery facilities and in control of postoperative pain. Training of young surgeons in the demanding endoscopic techniques is difficult, and virtual reality devices have been developed for educational purposes. These issues will be discussed as well.

SPECIFIC AIMS

- To summarize the current techniques, advantages, complications and indications of minimally invasive surgery of the upper extremity, including cost-benefit evaluations
- To discuss the problems of teaching surgical skills of demanding techniques
- To review new surgical techniques, implants, devices and ongoing clinical, ergonomic and basic research
- To evaluate new developments, potential indications, legal issues and possible collaborative investigations with basic researchers, bioengineers and industry
- To determine the most appropriate methods for objective assessment of the results of the new techniques
- To formulate on these bases recommendations to the medical community
- To discuss unresolved problems and potential solutions based on current clinical, biomechanics and biomaterials knowledge
- To explore future directions of investigation

INTERNATIONAL FACULTY

- Andrianne Y. (Brussels, Belgium)
- Barbier O. (Brussels, Belgium)
- Burny F. (Brussels, Belgium)
- Cappello M. (Brussels, Belgium)
- De Sourrouille L. (Reims, Belgium)
- Declercq G. (Doussainville, Belgium)
- Delacour P. (Brussels, Belgium)
- Delicieux C. (Brussels, Belgium)
- Deleu F. (Brussels, Belgium)
- Denabert S. (Liège, Belgium)
- Hoang Ph. (Brussels, Belgium)
- Huskin J. P. (Liège, Belgium)
- Jantes C. (Düsseldorf, Germany)
- Kempf J.-F. (Strasbourg, France)
- Ledoux F. (Brussels, Belgium)
- Loefer J. F. (Lübeck, Germany)
- Mathis G. (Paris, France)
- Minola R. (Milan, Italy)
- Moermans J.-P. (Brussels, Belgium)
- Münzs J. F. (Brussels, Belgium)
- O’Riordan S. (Richmond, Minnesota, USA)
- Ponsik A. (Brussels, Belgium)
- Schurand F. (Brussels, Belgium)
- Van Hollick C. (Brussels, Belgium)
- Willems S. (Liège, Belgium)
### Program

#### Thursday, April 18, 2002

16.00-19.30  Registration

#### Friday, April 19, 2002

07.30-08.30  Registration - Coffee and croissants

08.30-10.40  **Session 1 : An Introduction to Hand/Upper Extremity Minimally Invasive Surgery**
  (Moderators: J.P. Huskin, Y. Andrianne)

  08.30  Opening Address
  F. Schuind (Brussels, Belgium)

  08.40  The ABA
  J.P. Huskin (Liège, Belgium)

  08.50  History of Arthroscopy
  Ph. Delincé (Brussels, Belgium)

  09.00  Current and New Techniques in Arthroscopy: Diagnosis, Shaving, Arthrolysis, Shrinkage, Reinsertion Techniques
  Ph. Delincé (Brussels, Belgium)

  09.15  Discussion

  10.00  Role of Arthroscopy in Advanced Osteo-Arthritis of the Shoulder
  S.W. O’Driscoll (Rochester, Minnesota, USA)

  10.15  Discussion

  10.40  Coffee-break and Visit of the Commercial Exhibition

11.00-12.20  **Session 2 : Shoulder Arthroscopic and Endoscopic Procedures (1)**
  (Moderators: J.F. Kempf, S. Willems)

  11.00  Arthroscopic Treatment of Anterior Shoulder Instability
  J.F. Kempf (Strasbourg, France)

  11.15  Arthroscopic Shoulder Stabilization
  G. Declercq (Deurne, Belgium)

  11.30  Arthroscopic Treatment of Shoulder Instability with “No Bankart Lesion”. Technique and Results.
  R. Minola (Milan, Italy)

  11.45  Discussion

  12.00  Role of Arthroscopy in Advanced Osteo-Arthritis of the Shoulder
  S.W. O’Driscoll (Rochester, Minnesota, USA)

12.20  Lunch, Health Break and Visit of the Commercial Exhibition

13.40-16.05  **Session 3 : Shoulder Arthroscopic and Endoscopic Procedures (2)**
  (Moderators: R. Minola, G. Declercq)

  13.40  Arthroscopic Subacromial Decompression and Acromio-Clavicular Joint Resection
  G. Declercq (Deurne, Belgium)

  13.55  The Value of Arthroscopy in the Treatment of Subacromial Entrapment
  Ph. Schiepers, P. Pauwels, W. Penders, B. Brandelet, Ph. Putz (Brussels, Belgium)

  14.05  Rotator Cuff Lesions in the Elderly
  F. Mulpas, A. Potaznik (Brussels, Belgium)

  14.20  Discussion

  14.45  Arthroscopic Cuff Debridement in the Large Tear, is it an Alternative?
  J.F. Loehr (Lübeck, Germany)

  14.50  Arthroscopic Cuff Repair : Techniques and Results
  R. Minola (Milan, Italy)

15.00  Discussion

15.10  Arthroscopic Surgery of Rotator Cuff Tears
  J.F. Kempf (Strasbourg, France)
Saturday, April 20, 2002

10.00-09.50  
**Session 7 : Wrist and Hand Arthroscopy**  
(Moderators : C. Jantea, L. De Smet)

08.00  
Endoscopic Resection of Ganglions of the Wrist  
Ch. Mathoulin, A. Hoyos (Paris, France)

08.15  
Discussion

08.20  
Arthroscopic Repair of Ulnar Sided TFCC Avulsions: Technique and Results  
H. Van Ransbeeck, P. Milants, L. De Smet (Leuven, Belgium)

08.35  
Arthroscopic Reinsertion of the Triangular Fibrocartilage Complex  
J.P. Moermans (Brussels, Belgium)

10.50  
Discussion

11.00  
Results of Arthroscopic Synovectomy of the Wrist  
H.G. Tünerhoff, P. Haussmann (Baden-Baden, Germany)

11.15  
Discussion

11.20  
Osteosynthesis of Humeral Neck Fracture by Prong Plate  
Y. Yamano, H. Nakamura, H. Hotani (Osaka, Japan)

11.30  
Discussion

11.45  
Fixation of Proximal Humeral Fractures with the Targon PH Nail  
A. Ewert, G. Gradl, Ph. Gierer, Th. Mittmeier (Rostock, Germany)

11.55  
Discussion

12.00  
Hand and Wrist External Fixation  
F. Schuind, F. Burny (Brussels, Belgium)

12.15  
Discussion

12.20  
Intramedullary Percutaneous Fixation and Closed Reduction for Treatment of Metacarpal Fractures  
A. Pagliei, F. Fanfani, A. Tulli, F. Catalano (Roma, Italy)

12.30  
Discussion

12.45  
Treatment of Unstable PIP-Fracture Dislocation with the Pins and Rubber External Fixator  
L. De Smet (Leuven, Belgium)

12.55  
Discussion

13.00  
Endoscopic Harvest of Sural Nerve with the VasoView® System  
C. Van Holder, M. Remmelinck, J. Van Geertruyden, S. de Fontaine, F. Schuind (Brussels, Belgium)

13.10  
Discussion

13.20  
Thoracoscopic Sympathectomy  
M. Cappello (Brussels, Belgium)

13.30  
Discussion

13.45  
Thoracoscopic Sympathectomy  
M. Cappello (Brussels, Belgium)

13.50  
Discussion

14.00  
Thoracoscopic Sympathectomy  
M. Cappello (Brussels, Belgium)

14.05  
Discussion

14.10  
Thoracoscopic Sympathectomy  
M. Cappello (Brussels, Belgium)

14.20  
Discussion

14.25  
Thoracoscopic Sympathectomy  
M. Cappello (Brussels, Belgium)

14.30  
Discussion

14.35  
Thoracoscopic Sympathectomy  
M. Cappello (Brussels, Belgium)

14.45  
Discussion

14.50  
Thoracoscopic Sympathectomy  
M. Cappello (Brussels, Belgium)

15.00  
Discussion

15.10  
Thoracoscopic Sympathectomy  
M. Cappello (Brussels, Belgium)

15.20  
Discussion

15.30  
Thoracoscopic Sympathectomy  
M. Cappello (Brussels, Belgium)

15.40  
Discussion

15.50  
Thoracoscopic Sympathectomy  
M. Cappello (Brussels, Belgium)
Congress Information

Venue
Château du Lac, avenue du Lac, 87
B-1332 Genval, Belgium
Tel.: + 32 2 655 71 11 - Fax + 32 2 655 74 44
E-mail : seminars.cdl@martins-hotels.com

Language
English.

Information for Presenters
The allocated time of presentation should be strictly respected (10 min. for most free papers).

The standard presentation format is by computer. The audiovisual projection system in the meeting room will include a Personal Computer (PC) along with PowerPoint 97 or 2000 for Windows and a standard CD-ROM drive. Single slide projection or overhead projection are also available, but not recommended. Request to use any equipment other than this must be arranged at the presenter’s expense.

Each presenter should check with the technician 20 min. before the session, and introduce himself to the moderators of the session. The technician will be available in the meeting room from 07.00 on both congress days.

Accommodation
At the quiet and beautiful ‘Château du Lac’, 15 km outside Brussels. Sports facilities (tennis, golf practice, swimming pool) will be available during leisure time.

Free access available at the ‘John Harris Fitness Centre” for participants accommodated at the Château. When contacting the hotel, please state that you are attending the “Minimally Invasive Surgery Symposium” to receive the reduced rate for the dates April 18 through April 21.

Indicative rate : SINGLE 477 € – included : 3 nights bed and breakfast, Château du Lac or Manoir du Lac (same location), access to sports facilities.

Address : Château du Lac, avenue du Lac, 87
B-1332 Genval, Belgium
Tel. + 32 2 655 71 11 - Fax + 32 2 655 74 44
E-mail : seminars.cdl@martins-hotels.com

Continuing Medical Education Credit
A certificate will be provided to interested participants.
Social Program

On April 19, the participants are invited to attend, after the scientific sessions, a traditional cocktail in the Château du Lac. On April 20, before the banquet, a visit of the Belgian Museum of Radiology is organized. It is a completely different kind of museum! It has been set up by volunteers within the radiology department of the Queen Astrid Military Hospital in Brussels. The visitors are surrounded by reminders of a century of discoveries, brilliant inventions and great efforts for the health service. The museum is recognized and supported by the whole scientific community. Valuable objects of the radiology patrimony are collected in an open hall that also sketches the future to visitors by providing information concerning the new technologies of medical imaging. A special exhibit "The living bone" is at the time of the congress organized. The visit will be led by Dr. R. Van Tiggelem, Curator, and is followed by a cocktail in the museum. A fine banquet is then organized in a famous restaurant close to Brussels. Participants will be driven to Brussels and back to Genval (around 23.30) in a luxury coach. Please join us!

Upon request, paying excursion may be organized during the congress for accompanying persons.

Prof. and Mrs Wilhelm Conrad Röntgen (1845-1923).

REGISTRATION FEES

<table>
<thead>
<tr>
<th>Date</th>
<th>Fee</th>
<th>Notes</th>
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<tbody>
<tr>
<td>Before Dec. 1, 2001</td>
<td>370 €</td>
<td>(1)</td>
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<tr>
<td>After Dec. 1, 2001</td>
<td>420 €</td>
<td>(1)</td>
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<tr>
<td>Resident/Student/Physiotherapist/Nurse</td>
<td>200 €</td>
<td>(2)</td>
</tr>
<tr>
<td>Optional : Banquet (April 20)</td>
<td>70 €</td>
<td>(3)</td>
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(1) Fees include meeting attendance, book of abstracts, lunches, welcome reception on April 19, and transport by coach from and to the airport on April 18 and April 21. Not included: hotel accommodation, meals except 2 lunches, access to sport facilities. Acknowledgement of registration and receipt of fees will be sent soon after the registration form and full payment are received. Upon request, a letter of invitation will be sent. Payments should be made free of all bank charges and commissions. A 4% commission will be added to all payments made by credit card. Invoices will be expressed in EURO (€). The organizers cannot be held responsible for any personal injury, loss, damage, accident to private property, or additional expenses incurred as a result of delays or changes in air, rail, sea, road or other services, strikes, sickness, weather, war, sports and other causes. Luggage is at owners risk throughout unless insured. The symposium is organized by the ‘Groupe pour l’Etude du Membre Supérieur’, ASBL, Brussels.

(2) Please include a certificate signed by head of department.

(3) Included: coach transport Genval-restaurant and return, Belgian Museum of Radiology visit, and dinner in a typical Belgian restaurant.

Bank : Fortis banque, 808 route de Lennik, B-1070 Brussels, Belgium on account 001-2343991-62 (GEMS).

CANCELLATION

In the event of cancellation, a full refund (less € 100 as a handling fee) of the registration fees may be obtained provided that written notification is received by December 15, 2001. A 50% refund will be made for cancellations received by January 15, 2002. No refunds will be made thereafter.

Registration Desk

The registration desk will be open at the Château du Lac during the following hours:

April 18 : 16.00-19.30
April 19 : 07.30-17.00
April 20 : 07.30-17.00

Certificate of Attendance

Available at the registration desk. Upon request, a letter of invitation will be sent.

Weather

The weather should be sunny with pleasant temperatures. Rain is always possible!

Congress Secretariat :

F. Schuind, M.D., Ph.D.
Dept. of Orthopaedics
Erasmus University Hospital
Route de Lennik 808,
B-1070 Brussels
Tel. + 32 2 555 68 44 - 555 36 91
Fax + 32 2 520 35 56
E-mail : fschuind@ulb.ac.be

REGISTRATION FORM

To be filled in and returned as soon as possible

Name ...............................................................
First name ......................................................
Specialty ...........................................................
Title ..............................................................
Institution .........................................................
Address ............................................................
City ........................ Country ............... Zip .........
Phone ............................................................
Fax .............................................................
E-mail ...........................................................

Arrival date ......................... Departure date ............

Special requests (diets, etc.) ................................

Please fill in below as appropriate.

☒ I will participate in the Minimally Invasive Surgery Symposium (please note that participation will be considered only after payment of the registration fees; the number of participants is limited; if some participants cannot be accepted, the fees will be reimbursed at no charge).

☒ I would like to attend the banquet and Belgian Museum of Radiology visit of April 20 (€70).

☒ Please send me more preliminary programs.

☒ My registration fees are paid as follows:

☒ Enclosed check

☒ Money order to Belgian account GEMS 001-2343991-62

☒ Credit card (Euro/Master, Visa)

Card type : ..........................................................
Card account number : .................................
Cardholders’ name : ........................................
Expiration date (mo./yr.) : ...............................

SIGNATURE DATE

V