

Welcome Message

Dear Friends,

Greetings! It is indeed a great privilege and honor to welcome you to our 22nd Annual Conference of the Egyptian Society of Colon & Rectal Surgeons 2021. We are happy to share with you the scientific program planned for this year. we have a distinguished faculty from Egypt, Middle East, Europe, and USA. There will be a lot of clinical cases and discussions together with the updates in various colorectal surgery topics. We encourage all of you to share in the discussion and to exchange your personal experience.

The program is accredited by the European association of medical education by 15 European CME. In Cairo You can have easy access to wonderful touristic places Pharaonic, Coptic, Islamic and modern. Just 60 minutes away, you can see the pyramids and Egyptian museum. The river Nile is not far and it will be nice if you can have a chance to spend some time over there. We seize this opportunity to thank all of you for your contribution in this meeting. Looking forward for more cooperation.

CONFERENCE CHAIRMAN

Prof. Khaled Madbouly

CONFERENCE GENERAL SECRETARY

Prof. Mohamed Abou Elkhair

Conference Executive Board

Conference President

Prof. Khaled Madbouly

ESCRS President

Conference Secretary General

Prof. Mohamed Abou Elkhair

ESCRS Secretary General

Scientific Committee

"In Alphabetical Order"

Ahmed Farag

Alaa Radwan

Ali El Shiwy

Assem El Thani

Khaled Safwat

Mohamed Nada

Tarek Youssef

Wael Khafagy

Waleed Omar

Waleed Thabet

Magdy Mahmoud Emam

Organizing Committee

"In Alphabetical Order"

Abd Rabbo Mashhour

Ahmed Ali

Ali Zidan

Essam fakhry Obied

Hossam El fiki

Hussien Fakhry

John kamal

Mohamed Abo El Khir

Mohamed Raslan

Mohamed Yehia

Mostafa shalaby

Radwan Abdel Sabbour

General Information

Accreditation:

"The 22nd Annual Conference of the Egyptian Society of Colon and Rectal Surgeons, Cairo, Egypt, 29/08/2021-02/09/2021 has been accredited by the European Accreditation Council for Continuing Medical Education

(EACCME®) with **15** European CME credits (ECMEC®s). Each medical specialist should claim only those hours of credit that he/she actually spent in the educational activity"



its (ECMEC®s). Each medical specialist should claim only those hours of credit that he/she actually spent in the educational activity.

Certificates

Certificate of attendance will be delivered starting Thursday 02 September 18:00 at the registration desk after filling the evaluation form.

Or claim it online through www.escrs-eg.org 10 days after the event.

General Information

Badge

All types of badges give access to all scientific sessions, exhibition and food & beverage areas.

For security reasons, access to scientific sessions will not be granted if a session room is full.

Badges must be used at all times within the conference areas.

Bag Delivery

Get your congress bag from the registration desk while receiving the registration material.

Coffee & Refreshments

Drinks, refreshments and snacks are served during the Coffee Break times as below:

Date	Coffee Break Timings
Wednesday 01 September	15:00 - 15:30
Thursday 02 September	14:45 - 15:25

Language

The official language of the ESCRS 2021 is English. All lectures and presentations will be held in English.

General Information

Lunch Breaks

Lunch will be served as follow:

Date	Lunch Timings
Wednesday 01 September	18:45-19:45
Thursday 02 September	18:20-19:00

Opening Ceremony

Opening ceremony will be held in the Plenary room, on Wednesday 01 August 2021 – Hilton Heliopolis, Pearl Ballroom at 14:00 .

Registration Desks

Registration desks are available at the entrance of conference area. See floor Plan

Working hours:

Date	From	To
Wednesday 28 August	11:00	17:30
Thursday 29 August	08:30	17:00
Friday 30 August	08:30	16:00

Website:

<http://www.esccrs-eg.org/>

Currencies and Banks

The EGP, Egyptian Pound is the official currency of the Arab Republic of Egypt.

1 USD = 15.70 EGP (Average)

General Information

Electricity

The electricity supply in Egypt is 220 Volt, 50 Hz.

Emergency procedures and Numbers

In case of any medical emergency, please refer back to the registration desk:

Police, 122

Ambulance, 123

ICOM

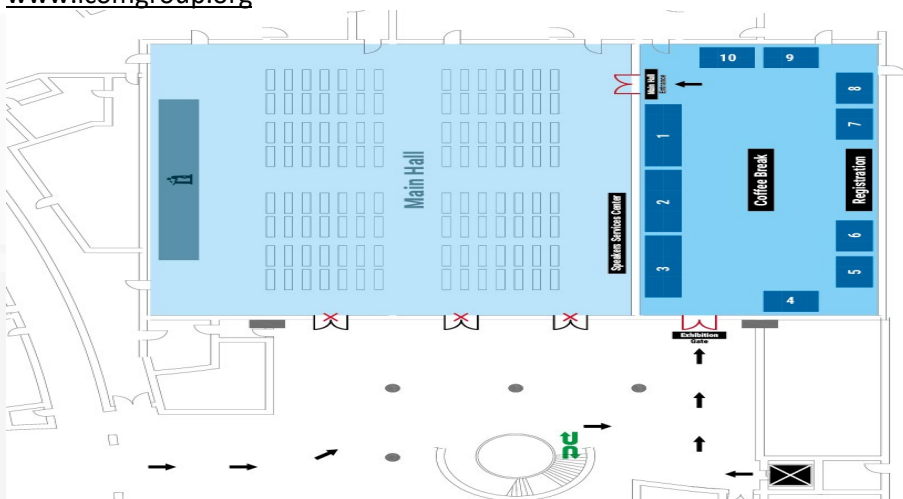
ICOM is the ESCRS 2021 official PCO

A professional, well-trained team is dedicated to ensuring ESCRS 2021 is a success

ICOM team is available to serve you, providing further information and clarity where needed.

Don't hesitate to discuss your thoughts, ideas and needs with the team at any time.

www.icomgroup.org



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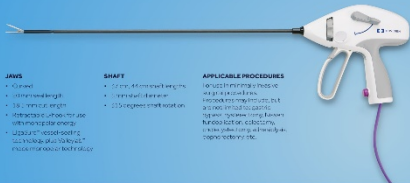
- Plus, it seals vessels fast — in 1 to 4 seconds¹ in most surgical situations when used with the Valleylab™ FT10 energy platform.



- Q-wafer
- 1.2mm seed length
- 38.1mm cut length
- Retractable wheel for use with monopolar energy
- Ligasure® vessel-sealing technology plus Staley® monopolar electrosurgical technology

- 32 mm, 46 mm shaft lengths
- 5 mm shaft diameter
- 115 degrees shaft rotation

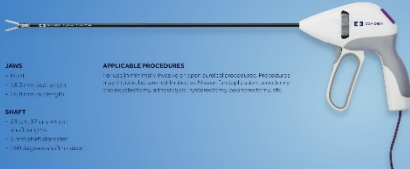
I usually trim minimally, but we've changed our pruning habits. Here, buds may be lost, but are not likely to be pasted together by excessive growth. I always fundeelect on, collect my, and my. I am glad I have not a good economy, etc.



LF1823, LF1837, LF1844
Hand and foot activated



- 24 in.
 - 18.2 mm seal length
 - 16.8 mm seal length
- SHAFT**
- 28 in., 37 in., 44 in. shaft lengths
 - 1.5 mm shaft diameter

[illegible]

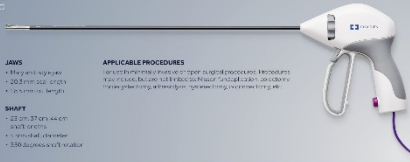
- 0.6 mm
 - 20.6 mm total length
 - 10.6 mm tail length
- LENGTH**
1.60 cm

or left in open surgical procedures. Microducts may neck off, but do not tend to be closed surgically, unlike the adult duct and breast cancer. This behavior also occurs with the PNF procedures in adults. Thus, to remove a duct neck dissection, partial or complete ligation must be completed prior to removal of vessels. lymphatics are dissected under a 4x magnifying lens and identified. Finally, no further dissection is required, no vessels, lymphatics, or ducts.



- Mayan's size: 100 cm
- 20.3 mm scale length
- 1.6 mm scale height

For all but minimally invasive or open surgical procedures, procedures may include, but are not limited to, Nasal Endoscopy, so that you may be performing, with a physician, or performing, with a physician, or:



- Curved
 - 17.2 mm total length
 - 1.82 mm axial angle
- LENGTH**
1.82 mm

The device is also indicated for open-cell procedures in acute myocardial infarction and in some chronic myocardial infarction and for blocking of leg and arm thrombotic vessels, symptomatic and asymptomatic, 2–3 mm away from an extended thrombotic site, such as a central line catheter and postoperative per-



LS1020, LS1037
Hand and foot activated



- 27 mm shaft length
 - 20 mm shaft depth
- SHAFT**
- 26 mm, 37 mm shaft length
 - 10 mm shaft diameter
 - 15.6 kg pressure ball weight

These compounds include hydrocarbons, alcohols, aldehydes, ketones, amines, nitriles, carboxylic acids, amides, and phenols. They are also used in the synthesis of polymers, dyes, and pharmaceuticals. The following table lists some common organic compounds and their uses:



- 30 mm case length
 - 34 mm cut length
- SHAFT**
- 18 mm shaft length

including histone acetyltransferases, histone deacetylases, histone methyltransferases, histone demethylases, histone kinases, histone phosphatases, ubiquitin-proteasome system, etc.



Catalog Number	Description	Quantity
LF5637 (37 cm)	LigaSure® Retractable L-Hook Instruments	6/case
LF5644 (44 cm)		
LF2823 (23 cm)	LigaSure® 5 mm Blunt Tip Instruments with Nano-Coating	6/case
LF1837 (37 cm)		
LF3844 (44 cm)		
LF2923 (23 cm)	LigaSure® Maryland Jaw Instruments with Nano-Coating	6/case
LF1937 (37 cm)		
LF3944 (44 cm)		
LS1020 (20 cm)	LigaSure Atlas® Instruments	6/case
LS1037 (37 cm)		
LF2019	LigaSure® Exact Dissector with Nano-Coating	6/case
LF4418	LigaSure Impact® Instrument with Nano-Coating	6/case
LF3212A	LigaSure® Small Jaw Instrument	6/case

All products listed are compatible with the Valleylab™ FT10 energy platform.

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Further Together

Audiovisual Instructions

Dear Speaker,

You will soon be presenting at Colon & Rectal Surgeons Conference and we want this experience to go as smoothly as possible for you. On the behalf of The Egyptian Group of Colon & Rectal Surgeons conference, ICOM will manage the audiovisual center and provide you with assistance before, during and after your presentation.

- * Please make sure that you received your personal program (by e-mail), we also advise that you check the final program available online.
- * All speakers and case presenters are required to submit their presentations at the audiovisual center.
- * Please make sure that you keep a copy of your presentation for backup.

For Case Presentations

All case presentations should be submitted at least 24 hours prior to the session

Submitting your Presentation

- All presentations should be entirely in English.
- Microsoft Power Point, Apple Keynote and Prezi presentations are supported.
- Please submit your presentation on Flash Memory or CD/DVD.
- Please make sure that the presentation contains all media and video files included in your presentation.
- It's not allowed to use your personal laptop.
- Presentations should be submitted to the audiovisual center at least one hour before the start of your session to be able to prepare it.

Inside the Hall

- Please arrive at the Congress main hall 10 minutes prior to the beginning of your session.
- Thank you for abiding by the allocated duration of your presentation.
- A computerized countdown timer will be displayed on screen and will automatically close the presentation once the time is finished

International Speakers

(In alphabetical order)

Prof. Gianluca Pellino – Italy

Gianluca Pellino has an M.D. degree. He is PhD in Traslational Medicine at the Università della Campania "Luigi Vanvitelli", Naples, Italy . He served as 2017 European Coloproctology Fellow at University Hospital "La Fe", Valencia, Spain. Dr Pellino has studied medicine at the Medical University of Naples and graduated in 2008. He completed the Residency in General Surgery in 2016 and received the ESCP 6-month Fellowship 2016 (Colorectal Surgery, Royal Marsden Hospital, London). He is a Fellow of the European Board of Surgery (FEBS) in coloproctology upon completing the exam of the European Board of Surgical Qualification (EBSQ-c) in 2018. In 2018 he received the status of International Fellow of the American Society of Colorectal Surgeons (FASCRS). In 2020 he has received the Fellowship of the American College of Surgeons (FACS). He serves as member of the Communication Committee of the ESCP and SICCR. He is co-chair of EuroSurg, National co-Lead for GlobalSurg 3, and local PI of several multicentric studies. He is vice-chair of ItSurg Collaborative



Prof. Luai Ashari – KSA

Chair, Scientific Committee of Colorectal Surgery
Fellowship at Saudi Commission for Health
Specialties (SCFHS)
Arabia Saudita



International Speakers

(In alphabetical order)

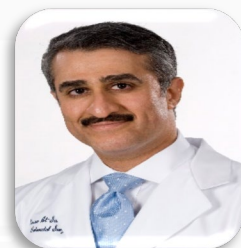
Prof. Mohamed Imran – UK

Muhammad Imran Aslam, senior colorectal trainee in East Midland Healthcare Workforce Deanery and honorary clinical lecturer at the University of Leicester, United Kingdom, is the course director for the ESCP pre-conference workshop the operative techniques for the prevention and repair of parastomal hernia (PSH) in Nice this September. This course ran very successfully at last year's ESCP annual conference and is already sold out this year



Prof. Nasser Al-Sanea - KSA

Prof. Nasser Al-Sanea is the Head Section of Colon & Rectal Surgery at King Faisal Specialist Hospital & Research Center in Riyadh, Saudi Arabia. He is also the President of the Saudi Society of Colon & Rectal Surgery, the Chairman of the Saudi Fellowship in Colon & Rectal Surgery and the Editor-in-Chief of the World Journal of Colorectal Surgery and the Annals of Saudi Medicine. He has numerous publications in the field of colorectal cancer genomics, hereditary colorectal diseases, novel surgical techniques in the treatment of colorectal cancer and anal fistulae



International Speakers

(In alphabetical order)

Prof. Samar El Haomoud – KSA

Samar Alhomoud is consultant colorectal surgeon at King Faisal Specialist Hospital and Research Center, one of the first Saudi female in colorectal surgery. She is also director of the general surgery residency training program. Honorary Visiting Consultant Surgeon at St. Mark' Hospital in the United Kingdom. Member of The Ethics Committee at International Agency for Research on Cancer (IARC) the specialized cancer agency of the WHO. Executive member of Gulf Center for Cancer Control and Prevention, (GCCCP). Regional Editor for The Gulf Journal of Oncology. Regional expert in the field of Colorectal cancer screening & prevention and was involved in drafting several national, international & WHO Regional policy statements and recommendations. She has several publications in the field of colorectal cancer including genetic & screening



Prof. Sherief Shawki – USA

Prof. Sherief Shawki is Consultant colorectal surgery, Mayo Clinic Rochester, Minnesota



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Medtronic

Further, Together



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Shaping
the future
of surgery

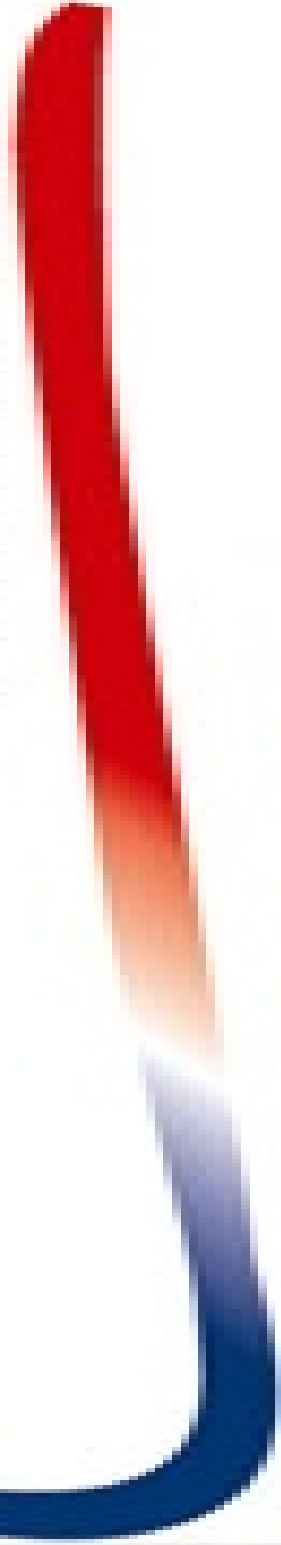


BAIRD

has joined BD

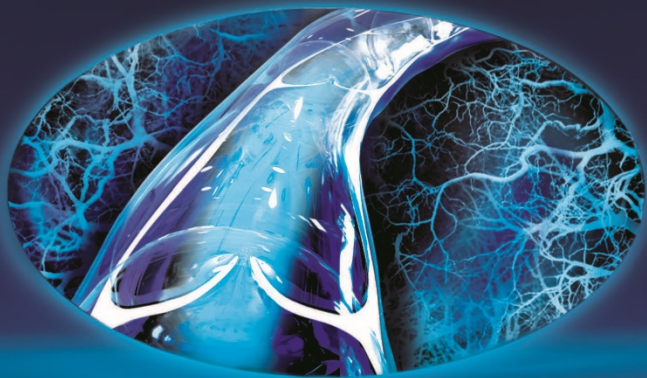
CLEAXANE®

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Micronized Purified Flavonoid Fraction



A unique anti-inflammatory
and venoprotective actions^{1,2}

Treatment of chronic venous insufficiency
Treatment of hemorrhoids

COMPOSITION*: Micronized, purified flavonoid fraction 500 mg: 450 mg diosmin; 50 mg flavonoids expressed as hesperidine. **INDICATIONS***: Treatment of organic and idiopathic chronic venous insufficiency of the lower limbs with the following symptoms: heavy legs; pain; nocturnal cramps. Treatment of acute hemorrhoidal attacks. **DOSAGE AND ADMINISTRATION***: In venous disease: 2 tablets daily. In acute hemorrhoidal attacks: the dosage can be increased to up to 6 tablets daily. **CONTRAINDICATIONS***: Hypersensitivity to the active substance or to any of the excipients. **WARNINGS***: The administration of this product for the symptomatic treatment of acute hemorrhoids does not preclude treatment for other anal conditions. If symptoms do not subside promptly, a proctological examination should be performed and the treatment should be reviewed. **INTERACTIONS***: None. **FERTILITY***: **PREGNANCY / LACTATION***: Treatment should be avoided. **DRIVE & USE MACHINES***: **UNDESIRABLE EFFECTS***: *Common*: diarrhoea, dyspepsia, nausea, vomiting. *Rare*: dizziness, headache, malaise, rash, pruritus, urticaria. *Uncommon*: colitis. *Frequency not known*: abdominal pain, isolated face, lip, eyelid oedema. Exceptionally Quincke's oedema. **OVERDOSE***: **PROPERTIES***: Vascular protector and venotonic. Daflon 500 mg acts on the return vascular system: it reduces venous distensibility and venous stasis; in the microcirculation, it normalizes capillary permeability and reinforces capillary resistance. **PRESENTATION***: Pack of 30 film-coated tablets of Daflon 500 mg. Pack of 60 film-coated tablets of Daflon 500 mg.

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* For complete information, please refer to the Summary of Product Characteristics for your country.

**The illustration represents a vein and its valve

1 - Pascarella L et al. Mechanisms in experimental venous valve failure and their modifications by Daflon 500 mg. *Eur J Vasc Endovasc Surg* 2008;25:102-110. 2 - Nicolaidis A et al. Management of chronic venous disorders of the lower limbs: guidelines according to scientific evidence. *Int Angiol* 2014;33(2):126-139.



DAY 01

13:00 - 14:00	Decision Making in Anal Surgery	Day 1
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Chairpersons (in alphabetical order)

Khaled Safwat
Mohamed Mazloun
Mohamed Nada

13:00 - 13:15	Traumatic sphincter injury: when to repair and how to improve long term outcome? <i>Waleed Omar</i> <i>Egypt</i>
13:15 - 13:30	Anoplasty for anal stricture: how to choose the best procedure for your patient <i>Essam Fakhery Ebied</i> <i>Egypt</i>
13:30 - 13:45	I Have Hemorrhoids! – Treatment of Grade 3 Hemorrhoids <i>Radwan Abdel Sabour</i> <i>Egypt</i>
13:45 - 14:00	Discussion

14:00 - 14:30	Opening ceremony	Day 1
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Conference President

Prof. Khaled Madbouly

Past President

Prof. Ahmed Farag

Vice President

Prof. Waleed Omar

Conference Secretary General

Prof. Mohamed Abou Elkhair

14:30 - 14:45	Presidential Address	Day 1
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Chairperson

Ahmed Farag

14:30 - 14:45

Opportunities arise in the middle of the crisis

Khaled Madbouly

Egypt

14:45

-

15:00

In the Middle of COVID Crisis

**Day
1**

Chairpersons (in alphabetical order)

| Mohamed Nada

**14:45 - 15:00 Ta TME Vs. Robotic proctomy in rectal cancer:
Cairo university experience.**

Ahmed Farag

Egypt

15:00

-

15:30

Coffee Break

**Day
1**

15:30 - 16:30	Colorectal Cancer Treatment	Day 1
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Chairpersons (in alphabetical order)

Khaled Madbouly
Waleed Omar

- | | |
|----------------------|---|
| 15:30 - 15:45 | TaTME. From bottom to Top: is there any difference in anatomy and anastomotic techniques
<i>Sherief Shawky</i> <i>USA</i> |
| 15:45 - 16:00 | What to do for a parastomal hernia after APR Diagnosis and Management
<i>Mohamed Imran</i> <i>UK</i> |
| 16:00 - 16:15 | Complete mesocolic excision in colon cancer: a valuable procedure or just a new fashion?
<i>Nasser El-Sanea</i> <i>KSA</i> |
| 16:15 - 16:30 | Discussion |

16:30 - 17:15	Panel Discussions	Day 1
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Moderator

Khaled Madbouly

16:30 - 17:15 Management of Low Anterior Resection Syndrome

Ahmed Farag

Egypt

Mohamed Nada

Egypt

Hossam Elfeki

Egypt

17:15 - 18:15	IBD and Diverticular Disease	Day 1
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Chairpersons (in alphabetical order)

Abd Rabbo Mashhour

Magdy Mahmoud

Tarek Youssef

17:15 - 17:30 Diagnosis and management of anal crohn's disease

Luai Ashari

KSA

17:30 - 17:45 Surgical Management of Recurrent Uncomplicated Diverticular Disease

Mohamed Nada

Egypt

17:45 - 18:00 women in colorectal surgery

Samar Alhomoud

KSA

18:00 - 18:15 Discussion

18:15 - 18:45	Servier Symposium	Day 1
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18:15-18:45 Hemorrhoids. A new complete disease management strategy

Marco Adel

Egypt



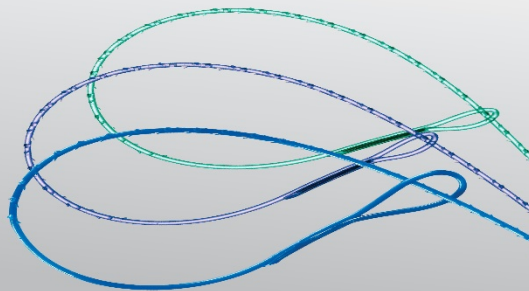
18:45 - 19:45	Lunch	Day 1
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A COMPLETE WOUND CLOSURE PRODUCT PORTFOLIO

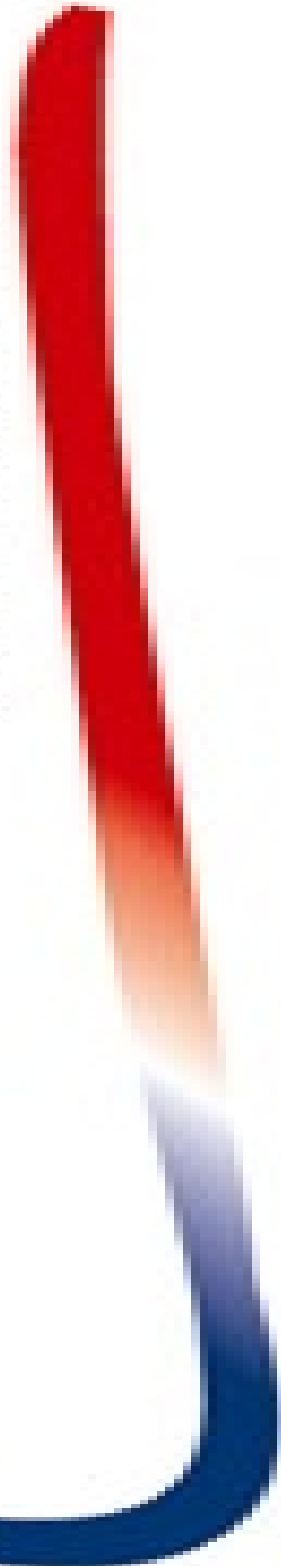


Family of Wound Closure Products.



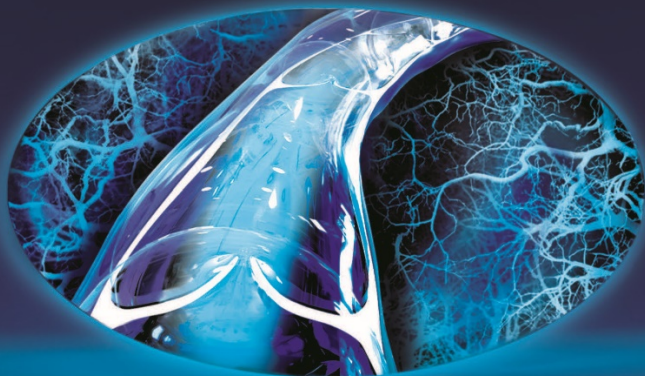
CLEAXANE®

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Micronized Purified Flavonoid Fraction



A unique anti-inflammatory
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Treatment of chronic venous insufficiency Treatment of hemorrhoids

COMPOSITION*: Micronized, purified flavonoid fraction 500 mg; 450 mg diosmin; 50 mg flavonoids expressed as hesperidine. **INDICATIONS*:** Treatment of organic and idiopathic chronic venous insufficiency of the lower limbs with the following symptoms: heavy legs; pain; nocturnal cramps. Treatment of acute hemorrhoidal attacks. **DOSAGE AND ADMINISTRATION*:** In venous disease: 2 tablets daily. In acute hemorrhoidal attacks: the dosage can be increased to up to 6 tablets daily. **CONTRAINDICATIONS*:** Hypersensitivity to the active substance or to any of the excipients. **WARNINGS*:** The administration of this product for the symptomatic treatment of acute hemorrhoids does not preclude treatment for other anal conditions. If symptoms do not subside promptly, a proctological examination should be performed and the treatment should be reviewed. **INTERACTIONS*:** None. **FERTILITY* PREGNANCY / LACTATION*:** Treatment should be avoided. **DRIVE & USE MACHINES*:** **UNDESIRABLE EFFECTS*:** Common: diarrhoea, dyspepsia, nausea, vomiting. Rare: dizziness, headache, malaise, rash, pruritus, urticaria. **Uncommon:** colitis. **Frequency not known:** abdominal pain, isolated face, lip, eyelid oedema. Exceptionally Quincke's oedema. **OVERDOSE* PROPERTIES*:** Vascular protector and venotonic. Daflon 500 mg acts on the return vascular system: it reduces venous distensibility and venous stasis, in the microcirculation, it normalizes capillary permeability and reinforces capillary resistance. **PRESENTATION*:** Pack of 30 film-coated tablets of Daflon 500 mg. Pack of 60 film-coated tablets of Daflon 500 mg.

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The background of the image features a close-up of ancient Egyptian hieroglyphs carved into a stone surface. The hieroglyphs are arranged in vertical columns and include various symbols such as birds, lotus flowers, and geometric shapes. A large, semi-transparent yellow circle is centered over the image, containing the text "DAY 02". The overall color palette is warm, dominated by the golden-yellow tones of the stone and the circle, with some darker, muted colors visible in the lower-left corner.

DAY 02

12:30 - 13:00	SANOFI Symposium	Day 2
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12:30-13:00 VTE prophylaxis in cancer patients

Khaled Madbouly

Egypt



13:00 - 13:45	Paradigm Shifts in Neoadjuvant Treatment of Rectal Cancer	Day 2
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Chairpersons (in alphabetical order)

Hussien Fakhry

Mohamed Abou El Khir

13:00 - 13:15 From Short course to long course to Total neoadjuvant

Azza Darwish

Egypt

13:15 - 13:30 Wait and watch after complete clinical response in rectal cancer

Waleed Thabet

Egypt

13:30 - 13:45 Discussion

13:45 - 14:45	Controversies in Colorectal Cancer	Day 2
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Chairpersons (in alphabetical order)

Mohamed Raslan
Sabry Badr
Waleed Thabet

13:45 - 14:00	Protective ileostomy in all cases or only in selected cases? <i>Mohamed Abou El Khir</i> <i>Egypt</i>
14:00 - 14:15	Extent of Surgery in Lynch Syndrome: limited resection or take out the whole thing? <i>Abd Rabbo Mashhour</i> <i>Egypt</i>
14:15 - 14:30	D2 versus D3 lymphadenectomy in colorectal cancer <i>Ahmed Sakr</i> <i>Egypt</i>
14:30 - 14:45	Advances in Endoscopic Management of Colonic Dysplastic Lesions <i>Hany Shehab</i> <i>Egypt</i>

14:45 - 15:25	Coffee Break	Day 2
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15:25 - 16:05	Video session	Day 2
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Chairpersons (in alphabetical order)

Ahmed A Raouf
Alaa Radwan
Ibrahim Zayat

15:25 - 15:33	Submucossal dissection of colonic poylps <i>Ahmed Madkour</i> <i>Egypt</i>
15:33 - 15:41	Filac lazer in Anal Fistula <i>Mohamed Nada</i> <i>Egypt</i>
15:41 - 15:49	Colonic ischemia due to ligation of Arc of Riolan <i>Khaled Madbouly</i> <i>Egypt</i>
15:49 - 15:57	LHP:what we learned so far <i>Essam Fakhery Ebied</i> <i>Egypt</i>
15:57 - 16:05	Lap LAR with ICG guidance <i>Ahmed Ali</i> <i>Egypt</i>

16:05 -	Pelvic Floor Problems: New Hope or Lost Battle?	Day
17:00		2

Chairpersons (in alphabetical order)

Ahmed Farag
Emad Salah
Essam Fakhery Ebied

16:05 - 16:20	Workup and Surgical Option for Chronic Constipation and Obstructive Defecation – Has the Evaluation and Care Pathway Changed? <i>Gianluca Pellino</i> <i>Italy</i>
16:20 - 16:35	Ventral Rectopexy – When and Why? <i>Tarek Youssef</i> <i>Egypt</i>
16:35 - 16:50	Neuromodulation: is there any new <i>Mostafa Shalaby</i> <i>Egypt</i>
16:50 - 17:00	Discussion

17:00 -	Abstract Session	Day 2
18:20		

Chairpersons (in alphabetical order)

Ali Zidan
Assem El Thani
Mohamed Yehia

17:00 - 17:06	Short Term Outcome Of laparoscopic Total mesorectal Excision In Patients with anorectal carcinoma <i>Baher Atef</i> <i>Egypt</i>
17:06 - 17:08	Discussion
17:08 - 17:14	Laparoscopic Ventral Mesh Rectopexy Versus Transvaginal Posterior Colporrhaphy in Management of Anterior Rectocele <i>Mahmoud Abdelnaby</i> <i>Egypt</i>
17:14 - 17:16	Discussion
17:16 - 17:22	Sinus laser closure (SiLaC) versus Limberg flap in management of pilonidal disease: A short term non-randomized comparative prospective study <i>Mohammed Ezzat Algazar</i> <i>Egypt</i>
17:22 - 17:24	Discussion

- | | |
|----------------------|---|
| 17:24 - 17:30 | Sinus Laser Therapy (SiLaT) versus Sinus Lay Open in the management of Sacrococcygeal Pilonidal Disease
<i>Journal: Colorectal Disease</i>
<i>Mohamed Arnouse</i> <i>Egypt</i> |
| 17:30 - 17:32 | Discussion |
| 17:32 - 17:38 | Complete Mesocolic Excision And Central Vascular Ligation In Colon Cancer Surgery, Feasibility And Outcome
<i>Mohamed Ibrahim</i> <i>Egypt</i> |
| 17:38 - 17:40 | Discussion |
| 17:40 - 17:46 | Partial Division of Puborectalis Muscle with Lateral Internal Sphincterotomy: A Novel Surgical Technique for Management of Anal Hypertonia-Associated Anismus
<i>Mohammad Fathy</i> <i>Egypt</i> |
| 17:46 - 17:48 | Discussion |
| 17:48 - 17:54 | Clinical & pathological presentation of colorectal cancer among young Sudanese adults in Khartoum state hospital from 2021-2021
<i>Nanci Mohamed</i> <i>Sudan</i> |
| 17:54 - 17:56 | Discussion |
| 17:56 - 18:02 | Surgical Outcome of Anterior Resection with or without Stoma for Patients with Rectal Cancer, At Soba University Hospital From January 2014 to January 2021
<i>Omer El Faroug Salim</i> <i>Egypt</i> |
| 18:02 - 18:04 | Discussion |

- 18:04 - 18:10** **Environmental risk factors and plasma concentration of lead and copper in colorectal cancer patients in Alexandria**
Soha Mohamed *Egypt*
- 18:10 - 18:12** **Discussion**
- 18:12 - 18:18** **Vertical versus horizontal plication of the rectovaginal septum in transperineal repair of Rectocele**
Ahmed Elsayed *Egypt*
- 18:18 - 18:20** **Discussion**

18:20 - 19:20	Lunch	Day 2
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