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Application for an "upper Gastrointestinal surgery UEMS MJC" in connection with:

UEMS Surgery section and UEMS Thoracic Surgery.

The purpose of this application is to apply for the establishment of an UEMS MJC with participation of the two sections,

The MJC will be the formal UEMS Body that will house the work that has been already done (curriculum, statutes, syllabus, ETRs, exam) with the intention of expanding even further. It is the intention as stated in the statutes that the leadership positions will rotate between Upper GI Colleagues that lead the field in both Sections.

The partners from each division are:

Professors Toni Lerut, Philippe Nafteux - Thoracic Surgery Section

Professors Lars Bo Svendsen, Magnus Nilsson - Surgery section.

Rationale

Surgery is rapidly changing as the general surgeon no longer is able to fulfil adequately all the elaborated functions evolving in the different specialities: f.ex. minimal invasive surgery are increasing in popularity, now even as robotic surgery, highly specialized operative areas such as rectum surgery, liver, pancreatic and ex. breast surgery has been centralized in order for the centers and the surgeons to get sufficient volume in order to strengthen quality and competence.

Esophageal and stomach surgery has previously been performed and is still in some countries performed in many smaller surgical units performing only a few procedures per year. The oncological results of this kind of more extensive surgery have improved survival and thus a process where centralizing upper GI surgery (esophagus and stomach) has been in place in most countries in Europe.

Concerning esophageal and gastro-oesophageal junction surgery the resectional process is overlapping two specialities (thoracic surgery and general surgery), thus demanding knowledge from both specialities in the operative process. Furthermore, many of the diseases in the two organs are shared among surgical and

internal gastroenterologist and thoracic surgeons doing minimal invasive procedures such as endoscopy and thoracoscopy/laparoscopy.

A survey has been performed among thoracic surgeons from different EU countries revealed that in thoracic surgical units about half (in 15 out of 27 member states) indicated upper GI surgery being a substantial part of their activities. Esophageal surgery is thus still performed in a broad variety of settings in Europe. In many countries by general surgeons and when centralized as a joint venture between thoracic surgeons and gastrointestinal surgeons or in separate thoracic or gastrointestinal setting.

At the time the UEMS Surgery section founded the ECS (later upper GI Surgery) division in 2015 a collaboration with the thoracic section was established concerning setting up European training requirements and curriculum for candidates who wanted to be board certified in ECS (read: upper GI surgery) rather than having two separate boards, one from each section

By working together after a set of common guidelines surgical training requirements and training centers can be established, likewise the already established common European qualifying examination.

In the thoracic section a working group of upper GI Surgery has been established and the two working groups will in the future have the same structure as well as the same statutes, curriculum, eligibility requirements and a common EBSQ. The communal EBSQ has been established three years ago with the latest examination in April 2021.

By having established two working groups, one from each section our goal is to work together under equal terms in training Upper GI surgeons to a high uniform European standard and competence. Contact with the European Society of Diseases of Esophagus (ESDE) educational committee has been established.

We hope this thus fulfils the requirements in the general council for establishing the MJC from the working groups of each of the sections.

Prof. Lars Bo Svendsen

Chair, Upper GI Working Group

UEMS Surgery

Prof. Toni Lerut

Chair, Upper GI working Group

UEMS Thoracic Surgery