

# ABSTRACTS OF THE INTERNATIONAL SYMPOSIUM OF PAEDIATRIC SURGERY

國際小兒外科學術討論會  
論文摘要



中國 天津

TIANJIN CHINA

1984.10.25-29



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# SCIENTIFIC PROGRAM OF ISPS

October 26-29, 1984

Tianjin, China

October 26 (Friday) a.m.

Registration

October 26 (Friday) p.m. 2:00

Opening Ceremony

Open speech by Professor Zhang Jin-zhe, M.D.

Paper presentation 2:40-5:10

Moderator

|                      |             |        |
|----------------------|-------------|--------|
| D.M. Hays, M.D.      | Los Angeles | U.S.A. |
| James Lister, M.D.   | Liverpool   | U.K.   |
| Fumihiko Ikoma, M.D. | Hyogo       | Japan  |
| Ken Kimura, M.D.     | Kobe        | Japan  |
| She Ya-xion, M.D.    | Shanghai    | China  |
| Tong Er-chang, M.D.  | Wuhan       | China  |

## 1. PEDIATRIC SURGERY IN CHINA (25 min.)

Zhang Jin-zhe, M.D. President. Section of Pediatric Surgery, C.M.A. Beijing, China

## 2. CONJOINED TWINS, PLANNING THE SEPARATION (15 min.)

Alan Morgan, M.D. Seattle, U.S.A.

## 3. A PROCEDURE OF COVERING AND REDUCTION WITH SILASTIC SHEET REINFORCED WITH TEFLON MESH FOR GIANT INTACT OMPHALOCELE (15 min.)

Toshio Nakajo, M.D. Tokyo, Japan

## 4. MANAGEMENT OF HIGH ENTEROSTOMIES IN NEONATES, INFANTS AND CHILDREN (15 min.)

J. Hirsig, M.D. Zürich, Switzerland

5. ANESTHESIA FOR SURGICAL REPAIR OF CONGENITAL HEART DEFECTS (15 min.)

Sait Tarhan, M.D. Rochester, U.S.A.

6. PEDIATRIC CARDIAC SURGERIES AT CRITICAL STAGE (15 min.)

Kiyosi Tatemichi, M.D. Kobe, Japan

7. COMBINED TRADITIONAL CHINESE AND MORDERN MEDICINE TREATMENT OF CONGENITAL MEGACOLON (15 min.)

Wang Guo, M.D. Wuhan, China

8. DIGITAL REIMPLANTATION IN CHILDREN (15 min.)

Cheng Guo-liang, Qingdao, China

October 27 (Saturday) a.m.

Moderator

Thomas M. Holder, M.D. Kansas City U.S.A.

R.K. Gandhi, M.D. Bombay India

Lee Zheng, M.D. Shenyang China

Han Mao-tang, M.D. Tianjin China

8:00-10:30

1. THE MANAGEMENT OF SOFT TISSUE SARCOMAS IN CHILDREN AND YOUNG ADULSTS (25 min.)

D.M. Hays, M.D. Los Angeles, U.S.A.

2. TRACHEOBRONCHIAL SURGERY IN CHILDREN (25 min.)

Ken Kimura, M.D. Kobe, Japan

3. CANCER IN CHILDREN - THE GAIN OF MULTIMEDAL THERAPY (25 min.)

R.K. Gandhi, M.D. Bombay, India

Break (15 min.)

4. SURGICAL STRATEGIES IN THE DIVERSE MANAGEMENT OF ATYPICAL LIVER TUMORS IN CHILDREN (15 min.)

B. Kehrer, M.D. Berne, Switzerland

5. INTENSIVE CHEMOTHERAPY IN PEDIATRIC SURGICAL MALIGNANT TUMORS WITH THE SUPPORT OF ABMT AND TPN (15 min.)

Seishichi Yokayama, M.D. Kanagawa, Japan

6. THE STUDY OF EXPERIMENTAL DIAGNOSIS IN HIRSCHPRUNG'S DISEASE (15 min.)

She Ya-xiong, M.D. Shanghai, China

7. TREATMENT OF ENTIRE COLON AGANGLIOSIS (15 min.)

Ito, Takahiro, M.D. Nagoya, Japan

8. PEDIATRIC MALIGNANT SOLID TUMOR (15 min.)

Akira Nakagawara, M.D. Fukuoka, Japan

11:00-12:00 Round table discussion:

Pediatric malignant tumors

Training and education

October 27 (Saturday) p.m.

2:00-4:00 Visit Tianjin Children's Hospital

October 28 (Sunday) a.m.

Moderator

Lucian L. Leape, M.D. Boston U.S.A.

Lai Beng-yao, M.D. Canton China

Huang Cheng-ru, M.D. Beijing China

Xue Xuan-ying, M.D. Tianjin China

8:00-11:00

1. ANTENATAL SCREENING FOR CONGENITAL ANOMALIES:  
PEDIATRIC SURGICAL INDICATIONS (25 min.)

James Lister, M.D. Liverpool, U.K.

2. ESOPHAGEAL ATRESIA AND TRACHEOESOPHAGEAL FISTULA -  
THE INFLUENCE OF ASSOCIATED ANOMALIES ON IMMEDIATE  
AND LONG TERM SURVIVAL (25 min.)

Thomas M. Holder, M.D. Kansas City, U.S.A.

Break (10 min.)

3. THE JEJUNAL GRAFT FOR ESOPHAGEAL REPLACEMENT IN  
INFANTS AND CHILDREN (15 min.)

Ryoji Ohi, M.D. Sendai, Japan

4. THE APPLICATION OF CT-SCANNING FOR THE DIAGNOSIS OF  
ANORECTAL MALFORMATIONS (15 min.)

Hiromichi Ikawa, M.D. Tokyo, Japan

5. ANATOMY OF THE PELVIC IN CONGENITAL ANORECTAL  
MALFORMATIONS: AN AUTOPSY STUDY (15 min.)

Lee Zheng, M.D. Shenyang, China

6. RECONSTRUCTION OF ANAL SPHINCTER WITH SMOOTH MUSCLE  
OF COLON - ANIMAL EXPERIMENT AND CLINICAL EXPERIMENT  
(15 min.)

Chang Xue-heng, Jinan, China

7. POSTOPERATIVE MECHANICAL INTESTINAL OBSTRUCTION: NEW  
CONCEPT OF PATHOGENESIS AND CONSERVATIVE TREATMENT  
(15 min.)

J. Hirsig, M.D. Zürich, Switzerland

8. NEW OPERATIVE TECHNIQUE FOR HIGH TYPE ANORECTAL  
MALFORMATIONS (15 min.)

Jotaro Yokoyama, M.D. Tokyo, Japan

9. FREE AUTOGENOUS SKELETAL MUSCLES TRANSPLANTATION  
ANIMAL EXPERIMENTS AND REPORT OF FIVE CASES (15 min.)

Liu Gui-lin, Beijing, China

10. THE EFFECT OF PRESSURE MASSAGE FOR TREATING BILIARY  
ASCARIASIS AS SHOWN ULTRA-SONOGRAPHY (15 min.)

Xue Xuan-ying, M.D. Tianjin, China

Break (10 min.)

11:00-12:00 Round table discussion:

Neonatal surgery, pediatric urology

Biliary tract problem

October 28 (Sunday) p.m.

Moderator

|                      |           |        |
|----------------------|-----------|--------|
| S. Tarhan, M.D.      | Rochester | U.S.A. |
| Earle L. Wrenn, M.D. | Memphis   | U.S.A. |
| Jin Bai-xiong, M.D.  | Shanghai  | China  |
| Zhang Xue-heng, M.D. | Jinan     | China  |

2:00-5:00

1. PRE AND POST-OPERATIVE OESOPHAGEAL DISMOTILITY IN PEDIATRIC GASTROESOPHAGEAL REFLUX (25 min.)

J.A. Tovar, M.D. San Sebastian, Spain

2. REFLUX ESOPHAGITIS IN CHILDREN (25 min.)

Lucian L. Leape, M.D. Boston, U.S.A.

3. SURGICAL MANAGEMENT OF GASTRO ESOPHAGEAL REFLUX AND ITS COMPLICATIONS IN INFANCY AND CHILDHOOD (15 min.)

Han Mao-tang, M.D. Tianjin, China

Break (10 min.)

4. GASTROINTESTINAL PERFORATION IN THE NEWBORN (15 min.)

Eitoku Arima, M.D. Kagoshima, Japan

5. GASTROINTESTINAL MUCOSAL STRIPPING FOR VARIOUS SURGICAL PROBLEMS (15 min.)

Earle L. Wrenn, M.D. Memphis, U.S.A.

6. SURGICAL TREATMENT FOR NECROTIZING ENTEROCOLITIS (15 min.)

Toshio Nakajo, M.D. Tokyo, Japan

7. PRENATAL DIAGNOSIS AS AN AID OF NEONATAL SURGERY  
(15 min.)

Haruo Ohkawa, M.D. Tsukuba, Japan

8. MACROPHAGE'S ERYTHROPHAGOCYTOSIS IN HEMOLYTIC ANEMIA  
AND SPLENECTOMY IN CHILDREN (15 min.)

Eitoku Arima, M.D. Kagoshima, Japan

9. MANAGEMENT OF PERFORATED PERITONITIS IN THE NEWBORN  
(15 min.)

N. Yamada, M.D. Nagoya, Japan

October 29 (Monday) a.m.

Moderator

|                         |               |             |
|-------------------------|---------------|-------------|
| Morio Kasai, M.D.       | Sendai        | Japan       |
| J.A. Tovar, M.D.        | San Sebastian | Spain       |
| J. Hirsig, M.D.         | Zürich        | Switzerland |
| Walton, K.T. Shim, M.D. | Honolulu      | U.S.A.      |
| Zhang Jin-zhe, M.D.     | Beijing       | China       |

8:00-11:30

1. THE POSTOPERATIVE MANAGEMENT OF BILIARY ATRESIA  
PATIENTS (25 min.)

Morio Kasai, M.D. Sendai, Japan

2. POSTERIO URETHRAL VALVE-PROBLEMS IN MANAGEMENT (25 min.)

S.S. Deshmukh, M.D. Bombay, India

3. BILATERAL DIAPHRAGMATIC EVENTRATION (25 min.)

Walton, K.T. Shim, M.D. Honolulu, U.S.A.

4. ENDOSCOPICAL EXAMINATION AND SURGERY IN PEDIATRIC  
UROLOGY (25 min.)

Fumihiko Ikoma, M.D. Hyogo, Japan

Break (10 min.)

5. MODIFIED HEPATIC PORTAL ENTEROSTOMY FOR BILIARY ATRESIA (15 min.)  
Ito, Takahiro, M.D. Nagoya, Japan
  6. PRIMARY SCLEROSING CHOLANGITIS IN CHILDREN (15 min.)  
Lee Zhen-dung, M.D. Hebei, China
  7. THE OPERATION OF CHOICE FOR CHOLEDOCHAL DILATATION (15 min.)  
H. Ohkawa, M.D. Tsukuba, Japan
  8. SURGICAL TREATMENT FOR PROSTATIC UTRICLE IN PATIENTS WITH HYPOSPADIAS AND ESTIMATION OF THEIR HORMONAL ENVIRONMENT (15 min.)  
Hiroki Shima, M.D. Hyogo, Japan
  9. URETHRAL LESIONS DUE TO COWPER'S GLAND DUCTS DILATATION IN CHILDREN (15 min.)  
J.A. Tovar, M.D. San Sebastian, Spain
  10. RENAL TRANSPLANTATION IN PEDIATRIC PATIENTS (15 min.)  
Hideari Ihara, M.D. Hyogo, Japan
  11. CONGENITAL ANTERIOR URETHRA VALVES (15 min.)  
Huang Cheng-ru, M.D. Beijing, China
  12. BLADDER MUCOSA FLAP URETHROPLASTY FOR HYPOSPADIAS REPAIR IN CHILDREN: REPORT OF 165 CASES (15 min.)  
Lai Bing-yao, M.D. Canton, China
- 11:50-12:20 Closing Ceremony

## OPEN SPEECH

### THE TIANJIN INTERNATIONAL SYMPOSIUM OF PEDIATRIC SURGERY

October 26 - 29, 1984

Professor Zhang Jin-zhe, M.D.

It is indeed, a great honor that we have here such an international academic gathering, and have with us some 30 pediatric surgeons of world reputation, who came from six countries, and some 100 evident Chinese scholars in this field, who came from all parts of China. One of the international scientific projects sponsored by the CAST and CMA, this symposium is the first of its kind in the history of China's pediatric surgery.

China is a developing country, and pediatric surgery is an entirely new field in her medical science. 1949 witnessed the founding of the People's Republic of China. Since then, great progress has been made in her science and technology though not without ups and downs. But in the mid-sixties, there came a terrible time in this country, which made her backward at least 10 years or even more behind, if judged by the developments in the world. Besides, China has a large population of children, about 300 millions under the age of 14, who are extremely short of specific pediatric and pediatric surgical cares quantitatively as well as qualitatively. In contrast, pediatric surgery in many foreign countries has advanced so rapidly in the past 20 years. Look around the world, there have been so many glorious achievements in this

field, but there is still more to be done, which poses a challenge to us all. We, in China in particular, feel it an extraordinarily urgent task to have more international academic exchanges, to get to know more about the latest developments in this field, and in a word, to learn more from our foreign colleagues. This symposium is of course to serve this purpose. This is a beginning, and in my view, a good beginning. We hope and are confident it will be a great success, it will be of great benefit to all its participants, and that it will contribute substantially to the convocation of our next and subsequent meetings. We also hope that, there will be more such international academic gatherings to be held in this country. There is an old saying in China, "Scholars promote friendship by promoting academic exchanges." I am sure this symposium is a good example.

Now, allow me, on behalf of my Chinese colleagues here and all the Chinese pediatric surgeons, to express our warmest welcome to all of our foreign colleagues. Thank you for your presence, which has greatly honored this symposium. We are also grateful to all those who have made invaluable efforts in sponsoring this symposium and making it a reality. Let us work hard, with one mind and one heart, to bring the pediatric surgery to a new high for the welfare of the children all over the world.

Cordial thanks!

## 开 幕 词

### 天津国际小凡外科讨论会

1984年10月26~29日

张金哲教授

今天，30位国际著名小凡外科专家，80位我国各地高级凡外同道，共聚天津，切磋学术，堪称空前盛举，谨致衷心庆贺。中国科协及中华医学会虽多次举办国际活动，但在中国小凡外科史上尚属第一次。

中国是发展中国家，凡外科又系新兴专业。49年解放以来，我国科学技术蓬勃发展，虽有起伏，但各行各业均得长足跃进。60年代中期以后十年，政治危机，百业俱废，使小凡外科落后于世界又岂只十年。中国有三亿儿童，儿科及凡外各业，论质论量，均感极度不足。窃喜此二十年来国际上小凡外科得到飞速发展。然而总观世界，尽管成绩辉煌，本专业中仍有很多问题亟待解决，成为我等共同面临之挑战。因此，特别在中国，迫切需要国际交流，以求及时了解最新发展，及时向国外同道学习。本讨论会即为一良好开端。我们深愿并确信会议将圆满成功。凡与会者均将收益，并为今后会议的召开做出贡献，愿更多类似国际活动在我国举行。古人云：“君子以文会友”此之谓也。

请允许我代表与会同行及全国小凡外科医师向外国同道表示热烈欢迎。感谢光临为大会增色。谨向大会支持者赞助者及具体工作者致以衷心感谢。让我们一心一德，共同做好凡外科工作，提到更高水平，为世界儿童造福。 谢谢！

## PEDIATRIC SURGERY IN CHINA

Zhang Jin-zhe, M.D.

Beijing Children's Hospital, Beijing, PRO China

Before 1949, there was no specific pediatric surgeon in China although there were a few reports of operations upon children. In the early 1950s, following the building-up of children's hospitals and pediatric department on several medical colleges for training specific pediatricians in many major cities of China, departments or specialties of pediatric surgery began to be established. Short training courses (usually one year) of pediatric surgery were conducted in Beijing and Shanghai in 1957 after the publication of the first Chinese textbook of Pediatric Surgery, and thence pediatric surgery developed rapidly in many cities of this country. At the 6th Congress of Chinese Society of Pediatrics held in Beijing, 1964, Pediatric Surgery Section was officially organized, and a bi-monthly Journal of Pediatric Surgery in Chinese was issued in Wuhan, Hubei Province, China.

During the "Cultural Revolution" of China, 1966-1976, pediatric surgery as well as all other academic works was interrupted until the 7th Congress of Pediatrics held in Guilin of Guangxi Province, 1978.

The first Congress of Pediatric Surgery was held in Harbin in June, 1980. Society of Pediatric Surgeons was set up, and the Chinese Journal of Pediatric Surgery as a Quaterly was published in Wuhan there-after.

At present in China, there are about 1,200 pediatric surgeons in 110 pediatric surgery departments or clinics. They have been grouped into four areas namely: Northwest, Northeast, Southwest and Southeast of China. In every area, people have their regional annual meetings and editorial meetings for their responsible issue of the Journal. The 2nd Congress of Pediatric Surgery was held in Jinan of Shandong Province in March 1984. There were nearly 300 participants and about 200 papers were presented. The next Congress will be held in 1987, and the Chinese Journal of Pediatric Surgery will be issued every two month in 1985.

Pediatric surgery in China as an entirely new speciality has only been 30 years. Owing to carrying out the nationwide family planning, only one child in each family, pediatric surgery as well as other children welfare developed and advanced rapidly, although the interference of the "Cultural Revolution" has made it backward for at least ten years. According to the informations from the Congress in Jinan in March, 1984 and just recent communications, a short note can be listed as following.

1. Fetal surgery is so far practically nil in China inspite of some intra-uterine diagnosis clinic having been starting.

2. Neonatal surgery as a speciality in pediatric surgery has been established in several centers. Almost all the common neonatal operations can be performed there with acceptable results. However, most parents prefer either healthy

or death rather than disability or multi-staged surgery, and this makes the general mortality higher. Besides, the neonatal intensive care including respiratory resuscitation, hyperalimentation and temperature-moisture control is still not up-to-date. This is also responsible for the higher mortality rate of gastro-intestinal anomalies which is generally about 50%. The mortality rate of atresia of esophagus with esophagotracheal fistula has dropped down to about 10% in Beijing Children's Hospital after the use of respiratory monitoring and ventilator, while on the other hand, diaphragmatic hernia came in with intubation and a suspected or proved biliary atresia are usually given up by the parents.

3. Common emergencies including trauma, infections and acute abdomen are still the main works of pediatric surgery in China.

- 1) Appendicitis with different type of pathology has been treated differently by mostly early appendectomy, antibiotics with or without surgery, or combined treatment with Western and Chinese traditional medicine according to the specific indications. Reports of big series over 5,000 cases without a single death appeared not infrequently.
- 2) Intestinal obstruction, particularly due to intra-peritoneal adhesions, has its encouraging cure rate even in very bad strangulation with shock. Peritoneal puncture in suspected cases, if positive, immediate exploration and a simple exteriorization of the