

Dr. Matteo Donadon: the status of hepatic resection in Italy

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Dr. Matteo Donadon (*Figure 1*) MD, PhD, is a general surgeon and adjunct professor of surgery at the Humanitas University, Humanitas Research Hospital IRCCS in Milan, Italy. He received his medical degree and completed the residency in general surgery at the University of Milan. He earned his PhD in hepatobiliary oncology at the University of Sacred Heart in Rome, Italy. He previously served as a research fellow at the Department of Surgical Oncology at the University of Texas MD Anderson Cancer Center, Houston, Texas. His clinical activity is dedicated to the liver and biliary surgery. Dr. Donadon's research interests are focused on the various aspects of liver and biliary surgery, including translational research.

During the 2015 American College of Surgeons (ACS) Clinical Congress in Chicago, we were honored to invite Dr. Donadon for an interview to talk about the status of hepatic resection in Italy. Please enjoy my video interview with him (*Figure 2*).

HBSN: *Could you give a brief introduction of the status of hepatic resection in Italy?*

Dr. Donadon: In Italy, there are various institutions, such as academic hospitals, cancer centers and general community hospitals, where liver surgery is performed with excellent results. What's more, not only the liver surgeons, but also the medical oncologist, liver specialists, radiologist, researchers and etc. are dedicated to improving the outcomes of liver surgery in those institutions. The multidisciplinary cooperation is very crucial.

HBSN: *Over these years, have you witnessed any progress in the hepatic resection? In your opinion, which one is the most influenced?*

Dr. Donadon: From the technology standpoint, many new devices and new technological products are continually introduced to the clinical practice with the aim to make operations safe and proficient. For instance, I am thinking about the navigation technology, which allows the fusion of the preoperative and intraoperative images.



Figure 1 Dr. Matteo Donadon.



Figure 2 Dr. Donadon: the status of hepatic resection in Italy (1). Available online: <http://www.asvide.com/articles/956>

With this technology, the fusion is available on some ultrasound machines, which means that it is possible to merge the preoperative CT or MRI scan with the real-time intraoperative ultrasound imaging. It would be helpful for the surgeons to understand the site and extension of the liver diseases in terms of anatomy. For instance, the navigation technology may be applied in those patients with disappeared colorectal liver metastases after neoadjuvant chemotherapy.

From the clinical standpoint, I think that one of the most important progresses is the multidisciplinary cooperation. With the aim to offer an individual therapeutic plan, medical oncologists, radiation oncologists, liver specialists, radiologists and etc. discuss the condition of the patients weekly. It is a shared, modern and efficient measure for individual therapy.

HBSN: *With all the experience you have, what are the key factors to perform a successful hepatic resection?*

Dr. Donadon: Many factors influenced the outcome of hepatic resection. I would like to put forward two points. One is the mentorship. Generally speaking, in surgery mentorship is very important. Usually, the more complex the surgery is, the closer mentorship is required. Another one is definitively the knowledge of intraoperative ultrasound, which could be used to stage the diseases, to verify the anatomy and also to guide the resection.

HBSN: *What are the common indications for hepatic resection? Which one has the best prognosis?*

Dr. Donadon: The common indications for hepatic resection include the primary hepatic malignancy, such as hepatocellular carcinoma and cholangiocarcinoma, and the secondary hepatic malignancy, such as the most common one, colorectal liver metastases. There are also other types of primary and secondary liver tumors, which can be operated but with limited indications. In general the prognosis of hepatic resection depends on the size of the resection and the tumor-related factors. Generally speaking, the more advanced the tumors are, the more grim the prognosis is.

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HBSN: *What makes you become enthusiastic about being a surgeon?*

Dr. Donadon: Being a surgeon means working to make people understand their diseases, their diagnoses, and their therapies. Surgery is still the cornerstone of the treatments of numerous tumors. Operating on such people means giving the patients a chance of cure. That is why I become more enthusiastic on surgery than on anything else.

HBSN: *Thank you!*

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Footnote

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1. Zhou S. Dr. Donadon: the status of hepatic resection in Italy. *Asvide* 2016;3:200. Available online: <http://www.asvide.com/articles/956>

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