

Prof. Robert Cerfolio: we can always do better

Received: 27 October 2017; Accepted: 10 November 2017; Published: 25 November 2017.

doi: 10.21037/jovs.2017.11.05

View this article at: <http://dx.doi.org/10.21037/jovs.2017.11.05>

From Oct 20th to 21st, 2017, the 4th International VATS Symposium was successfully held in the Royal College of Physicians, London, UK. Gathering numerous well-known experts worldwide, the symposium focused on many hot topics of thoracic surgery, including the principles for advanced minimally invasive thoracic surgery (MITS), advanced techniques in Lobectomy, Robotic Surgery, future of MITS, etc., providing an enjoyable and significant feast for all the participants.

During the symposium, Prof. Robert Cerfolio from New York University Langone Health Center, has brought two excellent speeches, earning quite a lot applause from the audience. Among them, Prof. Cerfolio has shown his great passion for Robotic Surgery when having the debate about “Robotic Surgery is better than VATS” with Prof. Joel Dunning. Seizing this great opportunity, the Editorial Office of *Journal of Visualized Surgery (JOVS)* has performed a short interview with Prof. Cerfolio (*Figure 1*), sharing with us his love and precious view for the Robotic Surgery.

During the interview, Prof. Cerfolio showed his great passion and confidence at the mere mention of robotic surgery. Similar to his personality, robotic surgery is getting better all the time to improve surgeon’s practice so as to get patients getting better care. Robot is highly evolutionary and always getting better, which is one of the important reasons that robot fascinates him.

For the debate “Whether Robotic Surgery is better than VATS”, Prof. Cerfolio is on the pro side and prefers robot. At the meantime, he also emphasized one question for consideration of choice—is there value for the patients? In turn, the value is mainly subject to the patients, surgeons and safety.

With people’s more and more realization of value of robot, nowadays more and more people are learning and using it. For the future, Prof. Cerfolio thinks positively that this tendency is going to be quadruple and the next five years is gonging to be more and more. The cost will



Figure 1 Picture with Prof. Robert Cerfolio.

also come down due to the competition and standardization. Some procedures that are not for Robot will go away and the surgery chosen for robot will be increased and thus, the advantage and value of robot in cases that are well chosen for robot will be increased.

Speaking of factors that hinder the development of robotic surgery, except the cost, Prof. Cerfolio told another factor at this point is training. He also shared the focus when he trains young surgeons—getting simulation better (like, to print out every single and check to see if doing right so as to improve). As head of the AATS Robotic Program, Prof. Cerfolio spends most of his time on educating if not operating. He runs many education programs, like running a master’s course of 500 level course at least four times a year, doing grand fellowship which through AATS they’re taking all 25 robotic posters from USA and rolling out them for the residents to measuring it so as to train the attendants much better. People can also sign up, email and to watch the surgery online. “Lots of education opportunity”, said Prof. Cerfolio.

As master in the Robotic Surgery, Prof. Cerfolio himself did not believe in the name of “Master” and honestly told he’s just experienced with numerous



Figure 2 Interview video: Prof. Robert Cerfolio: we can always do better (1).

Available online: <http://www.asvide.com/articles/1832>

operations. *“The day that a master thinks he’s a master is the day when he’s not. So the day when a master thinks he can’t get better is the day when someone is better than him. We can always do better.”* Prof. Cerfolio believes that there’s a huge opportunity to get better and will not limit his skill in current status. *“We’ll continue to get better, we’ll drive our time now, drive our cost down, teach better, improve both VATS and Robots because the patients deserve it”*, he said. With empathy to the patients, Prof. Cerfolio works hard to improve his skill as well as the healthcare for all patients.

Not only the precious view of robotic surgery, Prof. Cerfolio also happily shared with us his love for baseball and would like to be a baseball player if not surgeons! For more details, please check on the video (Figure 2).

Expert introduction

As director of Perlmutter Cancer Center’s Lung Cancer Center and chief of clinical thoracic surgery, Prof. Robert Cerfolio treats patients who have lung cancer and esophageal cancer and provides surgical treatment to manage abnormalities of the chest outside the heart.

Inspired to pursue medicine by his father, a urologist, Prof. Cerfolio has now performed more than 17,000 thoracic surgeries. His robotic surgical techniques, which have improved survival rates and reduced complications, have been adopted by experts across the country and around the world.

Prof. Cerfolio’s practice centers around the patient

experience, innovating ways to care for people and improve treatment outcomes and recovery times. Working with a wide array of experts, including nutritionists, chemotherapy specialists, radiation oncologists, surgical oncologists, and psychosocial and spiritual care teams, Prof. Cerfolio strives to treat each patient as a whole person, rather than a part or a condition.

In addition to patient care, Prof. Cerfolio performs research to improve clinical outcomes and patient experience at hospitals. He has published more than 150 original peer-reviewed articles and 40 book chapters and previously served as the president of the Southern Thoracic Surgical Association. His first book, *Super Performing at Work and at Home: The Athleticism of Surgery and Life*, was published in 2014.

Interview questions

- ❖ Today you have a debate with Prof. Joel Dunning about “Whether Robotic Surgery is better than VATS”. Here between Robotic Surgery and VATS, which is your preference?
- ❖ In which condition will you choose the VATS?
- ❖ What’s in Robotic Surgery that fascinates you so much to keep moving forward all the time?
- ❖ Compared to the last few years, what do you think about the current application status of Robotic Surgery?
- ❖ Do you think cost is the only factor that hinders its development?
- ❖ Speaking of training, what would be your focus when train the young surgeons?
- ❖ What are the common mistakes you think young surgeons will make?
- ❖ Would you share with us some education programs that you’re doing?
- ❖ As you’re already a master now, do you still expect to do any breakthrough in this field?
- ❖ Today Dr. Jones is going to share a topic about “Will there be a role for thoracic surgeon in ten years”. Here would you share your idea about this topic?
- ❖ What would you do if you were not a surgeon?
- ❖ With the tight schedule in the work, what would you do to update yourself?

Acknowledgements

None.

Footnote

Conflicts of Interest: The author has no conflicts of interest to declare.

doi: 10.21037/jovs.2017.11.05

Cite this article as: Gao S. Prof. Robert Cerfolio: we can always do better. J Vis Surg 2017;3:173.

References

1. Gao S. Interview video: Prof. Robert Cerfolio: we can always do better. *Asvide* 2017;4:513. Available online: <http://www.asvide.com/articles/1832>

(Senior Editor: Skylar Gao, JOVS, jovs@amepc.org)