Dr. Emmanuel Martinod: I like to challenge difficult things

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Editor's note

The 6th Oriental Congress of Thoracic Surgery (OCTS) was successfully held in the Shanghai Exhibition Center from Sep. 19 to Sep. 21, 2019. As one of the Oriental Brand Series of Shanghai Medical Association, the congress has gathered many well-known thoracic surgeons at home and abroad, including experienced thoracic surgeons from many Chinese hospitals and members from the Society of Thoracic Surgeons (STS), European Association for Cardio-Thoracic Surgery (EACTS) and European Society of Thoracic Surgeons (ESTS). Focusing on the latest advancement in thoracic surgery and research, the congress has provided a significant chance for speakers and audiences for sharing and discussion, with wish for benefiting the patients. The AME editorial team was with great honor to invite Dr. Emmanuel Martinod to conduct a brief interview during the meeting (*Figure 1*).

Expert introduction

Dr. Emmanuel Martinod (*Figure 2*) is Full Professor of Thoracic and Cardiovascular Surgery at Assistance Publique Hôpitaux de Paris, University Paris 13 (2006–currently). He is the Head of the Thoracic and Vascular Surgery Unit, Assistance Publique Hôpitaux de Paris, Hôpitaux Universitaires Paris Seine Saint Denis (HUPSSD), Avicenne Hospital, SMBH School of Medicine, Sorbonne Paris Cité, Paris 13 University, Bobigny, France (2012–currently). He is the Head of the Pôle Activités Cancérologiques Spécialisées (2017–currently).

He was appointed Assistance Publique 23 Hôpitaux de Paris (APHP) medical counsel in the court cases of thoracic and cardiovascular surgery (2017–currently). He is vicedean of SMBH School of Medicine, Paris 13 University (2018–currently) and co-director of the National Master of Surgical Science, France. He was elected as a member of administrative council of The Alain Carpentier Foundation (2019). He is a member of the French Thoracic and Cardiovascular Surgery Society (SFCTCV) (2006–currently) and the president of the French Association "Génération Thorax" (2007–currently). He is a member of the EACTS,



Figure 1 Dr. Emmanuel Martinod.

the World Association for Bronchology and Interventional Pulmonology (WABIP) and the Groupe d'Endoscopie de Langue Française (GELF). He also received the Prix Galien for Medical Innovation, France (2018) just after the *JAMA* publication reporting the first human applications (n=13) of this innovative approach to airway transplantation.

Interview (Figure 3)

SHC: Could you briefly introduce yourself and tell us about your education and work experience?

Dr. Martinod: I am a French thoracic and cardiovascular surgeon and professor in this specialty and I am the head of my department at Assistance Publique Hôpitaux de Paris, University Paris and I am involved in tracheal replacement program since 1997 with some experimental and clinical development.

SHC: Your innovative approach to airway transplantation is a breakthrough in the field. Are there any studies going on to further enhance and optimize tissue engineering of the airways? Is there any other progress that you and your team has found?

Dr. Martinod: Since the last publication in *JAMA*, we have seven more patients operated with this technique and today we have major projects in France. We have 26 centers to develop more clinical projects and to accelerate *de novo* cartilage



Figure 2 Dr. Emmanuel Martinod and the AME editor.



Figure 3 Interview with Prof. Emmanuel Martinod: I like to challenge difficult things (1).

Available online: http://www.asvide.com/watch/33008

regeneration on aortic matrices and we are working now with major scientist in Paris who specialize in cartilage generation and immunology. The goal of our project is to potentialize cartilage regeneration on aortic matrices as I said before.

SHC: What do you think is the future research direction in the field of Tracheal replacement and reconstruction?

Dr. Martinod: We have some major projects, but I think in the future the solution could be *ex-vivo* tissue engineering in bioreactors. Because we have the human body has a natural bioreactor, but in the future it could be some other options.

SHC: Tracheal replacement and reconstruction is a difficult surgery. Why do you choose this as your research area?

Dr. Martinod: Because I always prefer difficult things in life and in surgery. My mentor, the famous cardiac surgeon Alain Carpentier said to me, "*you have to work on unsolved problems not the solved problems.*" In fact, tracheal replacement using stented aortic matrices is a big challenge because this is a surgical and biological challenge. I have been working on this topic for 22 years.

SHC: What is your advice to young surgeons who would like to engage in this field?

Dr. Martinod: They should believe in their dreams and always continue their projects even if they're facing criticism. This is very important.

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Footnote

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