12th World Conference

Cancers of the Esophagus
From normal mucosa to tumor
Translating knowledge into cure

Paris, August 27-30, 2013
UNESCO Headquarters

Scientific Program

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Brice Gayet (Paris)
George Triadafilopoulos (Stanford)

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www.oeso.org
Foreword by Irina Bokova, Director-General of UNESCO for the Brochure for the 12th World Conference of OESO
April 2013

I am very pleased that the 12th World Conference of OESO (the World Organization for Specialized Studies on Diseases of the Esophagus), will be held at UNESCO in Paris, between 27-30 August 2013, under UNESCO’s patronage. Co-organized with the UNESCO International Basic Sciences Programme, this exceptional four-day event focuses on the topic of cancers of the esophagus, under the theme: From Normal Mucosa to Tumour – Translating Knowledge into Cure.

This cooperation draws on wide common ground. UNESCO’s International Basic Sciences Programme works to stimulate intergovernmental cooperation and strengthen national capacities in basic sciences research and education, while OESO is an international, multi-disciplinary organization that brings together experts from all disciplines, all interested in the esophagus. Our partnership has included the creation of a Chair in telemedicine, focusing on distance learning in gastroenterology, based at the University of Geneva.

The 12th World Conference takes a multi-disciplinary approach, with a special focus on genetics. Epigenetics and all epidemiological, clinical and therapeutic aspects of cancers of the esophagus will be explored by the world’s most renowned specialists, representing prominent health organizations. In this context, I am pleased with the involvement of the Human Variome Project, a non-governmental organization with a focus on human genetics or genomics, which has consultative status with UNESCO.

The Conference is the result of wide-ranging cooperation – including the World Health Organization, the International Agency for Research on Cancer, along with the Académie Nationale de Chirurgie (France), the National Cancer Institute (USA), the MD Anderson Cancer Center (USA), the Memorial Sloan-Kettering Cancer Center (USA), the University of Michigan (USA), the Central Scientific Research Institute of Gastroenterology of Moscow (Russian Federation), the Deutsches Krebs Forschung Zenter (Germany), the N.N. Blokhin Russian Cancer Research Center (Russian Federation), and the Tokyo Cancer Centre (Japan).

This list speaks to the global reach of the Conference and its significance in the scientific world. I am pleased that the proceedings of the Conference will be published in a special volume of the Annals of the New York Academy of Sciences, to widen dissemination of scientific information and contribute to building knowledge in the multi-faceted domain of cancers of the upper digestive tract.

I wish to thank all partners and participants for their commitment. It is a pleasure to single out Professor Robert Giuli, the founder and Director of OESO, and his team, for taking forward this initiative with UNESCO.
OESO 12th World Conference

Cancers of the Esophagus
From normal mucosa to tumor
Translating knowledge into cure
Paris, August 27-30, 2013

Congress Presidents
Richard G.H. COTTON (Melbourne)
Brice GAYET (Paris)
George TRIADAFILOPOULOS (Stanford)
Welcome

Fellow Scientists and Colleagues,

It is with great pleasure that I make these few introductory comments on the occasion of this exceptional event, the 12th World Conference of OESO, which will focus on the topic of: **Cancers of the esophagus – From normal mucosa to tumor – Translating knowledge into cure.**

The efforts of Professor Robert GIULI, Director of OESO, Ms Michèle Liegeon, and the Organizing Team including my colleagues Mr Casimiro Vizzini and Mr Alex DaSilva of the International Basic Sciences Programme (IBSP), have to be acknowledged. Without their commitment and hard work this Conference would not be a reality and I would like to extend my personal thanks to them.

This event comes at a time when the challenges that face society and for which scientists must find answers, is being dealt with in an interdisciplinary manner. Today’s modern medicine integrates IT, engineering and other disciplines in innovative approaches unthinkable just a few decades ago. OESO is an international organization which portrays this multi-disciplinarity. It brings together dedicated professionals from various disciplines in a common effort to address one serious issue affecting human health. Within UNESCO, the IBSP puts particular emphasis on the development of innovative and interdisciplinary programmes. In this regard, we welcome the unique collaboration that has been established between OESO and UNESCO in particular through the UNESCO Chair in Telemedicine.

We also welcome the participation in this conference of the Human Variome Project (HVP), here represented by its Scientific Director Professor Richard Cotton who is one of the copresidents of this event. The HVP is a global programme in formal relations with UNESCO and which encapsulates this concept of the interdisciplinary approach to medical research and international cooperation for the benefits of human health.

The IBSP is also firmly committed to supporting Member States of UNESCO in strengthening human and institutional capacity for research in the basic sciences. In relation to this Conference, the IBSP has a strong role to play in contributing to the Global agenda of research for health. With our sister agency, the WHO, a multi-disciplinary UNESCO team worked in the co-organization of the Bamako 2008 Global Ministerial Forum on Research for Health. It is obvious that coordinated and joint action at the global level is required to face and manage health challenges. This includes the sharing of research findings, technological advances and the funding of fundamental scientific endeavour.

Maciej J. Nalecz

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Welcome

Dear Friends and Colleagues,

Welcome to the 12th OESO World Conference! It has been my honour to be a Co-President of this prestigious meeting. This year, there will be an emphasis on genetic analysis and documentation, which is becoming more critical and widespread in the field of cancer. Speakers will be from the most prominent countries and institutes worldwide such as National Cancer Institute (Bethesda, USA), Hutchinson Centre (Seattle, USA), Memorial Sloan Kettering Cancer Center (New York, USA), MD Anderson Cancer Center (Houston, USA), Vanderbilt, EBI, and Centers from China, Japan, and India. I hope that through this meeting, especially through Symposium 2 (on data collection and genetic library) and Grand Forum 2 (on Human Variome Project) which I have the pleasure of organizing and chairing, more documentation in the esophageal cancer field would be catalysed.

All the best,

Professor Richard G.H. Cotton,
AM PhD DSc FRCPA (Hon.)
Welcome

Dear Colleagues, Dear Friends,

It is with great excitement that I welcome you to the 12th Conference of OESO, “Cancers of the esophagus: From normal mucosa to tumor: translating knowledge into cure”. This monumental international meeting was specifically designed to address the complexities in the understanding and management of esophageal cancer, with an emphasis on a multidisciplinary scientific and clinical approach.

In 2013, esophageal cancer will claim the lives of 15,210 people in the United States out of an estimated 17,990 who will be newly diagnosed with the disease. Worldwide, 482,300 new esophageal cancer cases and 406,800 deaths occurred in 2008. For most of the 20th century, squamous cell cancer comprised the vast majority of esophageal cancers. Over the past 30 years however, the frequency of adenocarcinoma of the esophagus, esophago-gastric junction and gastric cardia has increased dramatically in Western countries, reflecting an increasing prevalence of gastro-esophageal reflux disease (GERD) that affects 10-20% of the Western world’s population, and the ever increasing burden of obesity.

For this extraordinary event in Paris we have recruited the world’s experts from diverse fields and disciplines to discuss esophageal cancer genetics, biology, clinical presentation, imaging, staging, and medical, oncologic and surgical aspects of therapy and palliation.

The presenters are not only the major thought clinical leaders in the world specializing in gastroenterology, pathology, radiology, esophageal surgery, oncology, radiation therapy, nutrition and palliative medicine but also basic, and translational researchers in esophageal cancer biology and genetics. As such, the meeting is poised to appeal to scientists, gastroenterologists, surgeons, oncologists, radiologists, pathologists, trainees and allied health personnel.

The joint participation and sponsorship of the International Agency for Research in Cancer (IARC), the World Health Organization (WHO), the Académie Nationale de Chirurgie, and many of the world’s cancer centers is an unparalleled event not to be missed. The format is similar to previous OESO conferences, where a series of specific questions are addressed in a comprehensive and logical sequence and there are ample of opportunities for discussion among participants. The result will be an encyclopedic coverage of esophageal cancer as a research and clinical topic and will serve as the foundation from which future developments will evolve over the years to come.

It is my privilege, along with Professors Giuli, Cotton and Gayet, as well as the heads of the organizing committee, Professors Hawk and Van Cutsem, to serve in the organization of such an unprecedented event.

George Triadafilopoulos

President, 12th OESO World Conference
Clinical Professor of Medicine
Division of Gastroenterology and Hepatology
Stanford University School of Medicine
Stanford, CA, USA
Dear Colleagues and Friends,

It is an incredible honor for me to be one of the Presidents of the 12th world congress organized by OESO.

This congress will remain remarkable, thanks to the energy of the program committees under the direction of my long standing friend Robert Giuli, and the capacity of OESO to bring together so many experts to organize a multi-disciplinary forum on a single subject, this time, “Cancers of the Esophagus”. This 12th World congress will receive, I should say, as usual, teams from the five continents to provide a scientific meeting with many of the main leaders of esophagology whom your juniors will be able to meet.

Paris, one of the most wonderful cities of the world and greets tourists with all its beauty. The UNESCO Headquarters, located near the Eiffel Tower, are very close to everything you may want to see or visit.

Please believe me and don’t miss the Gala Evening (Thursday 29) for an amazing event at the Château de Chantilly, an exceptional historical place with one of my favorite French formal gardens, featuring extensive parterres and water works, laid out principally by André Le Nôtre for the Prince de Condé. The Château also hosted a James Bond movie “A View to a Kill”, nothing to do with the Gala!

I am proud and delighted to welcome you in Paris from 27 to 30 of August!
Welcome

Dear Colleagues,

Welcome to this 12th World Congress of the International Organization for Statistical Studies on Diseases of the Esophagus, now famous worldwide as the OESO. This now biannual event provides a unique forum for both clinicians and scientists to present their work and to learn about the latest developments in esophagology. In no way does this meeting compete with the activities of any national or international gastroenterological or surgical society. Instead, the best material usually scattered in the international scene competes for presentation at this elective forum of clinicians and scientists. We hope to have been the catalyst for many people belonging to different disciplines who share a common interest, that is the esophagus.

As customary, the World OESO Congresses are planned to provide each time a thorough analysis of a specific topic in esophageal disease. This 12th World Congress of OESO is entirely devoted to the Cancers of the Esophagus. Being esophageal neoplasia the eighth most common cancer worldwide, with 484,000 new cases diagnosed in 2008, the choice is a timely one.

Despite the enormous advances in science and medical technology in recent times, our knowledge of the pathophysiology and treatment of neoplasia is far from complete and, for the patients at least, the myths that surround cancer remain intact. Cancer remains the “bogy man” of medicine even in the third millennium, and the very mention of the word strikes mortal fear in patients and their families in a way not generally seen with any other disease.

The increasing incidence of esophageal adenocarcinoma and a greater understanding of its underlying biology provide opportunities to devise treatment strategies that maximize survival and minimize morbidity. Recent investigations have indeed allowed new insights into the risk factors as well as molecular biology of this challenging disease to be gained. Rational use of available endoscopic procedures, surgery, radio-chemotherapy as well as targeted chemotherapy requires a comprehensive and multimodal approach. Within this framework specific sessions will be devoted to translational research, new diagnostic methodologies and advancements in both medical and surgical therapy, including nutrition.

Upon review of the final scientific program, you – no doubt – will agree that this year the OESO Congress assembles – under the auspices of the World Health Organization (WHO) and the International Agency for Research on Cancer (IARC) – a clinical and scientific educational program of the highest quality, with faculty of international acclaim. Its core is represented by the successful formula, with questions and answers, originally developed by Robert Giuli but exciting symposia and topic fora will complete the scientific information that will be disseminated during these four days.

World renown experts in several different disciplines will answer the specific questions and leading scientists will present you an in depth review of the different topics. Moreover, as customary, a Post-graduate Course on Techniques & Tips in Esophageal Practice will precede the Conference and will be extremely useful to both young and established “esophagologists”.

Carmelo Scarpignato
OESO General Secretary
Professor of Pharmacology & Therapeutics
Associate Professor of Gastroenterology
School of Medicine & Dentistry
University of Parma, Italy
Because of its major impact and its high educational formula this Congress represents a unique opportunity to update your knowledge in the rapidly evolving field of esophagology. We hope to have the chance of gathering established and young investigators from all over the World in what we feel will be a stimulating experience. We also hope it may encourage friendship, mutual knowledge and cooperation going beyond the limits of the meeting itself.

On behalf of the OESO Executive Board, I welcome you all to a most impressive scientific and social event. The weather in Paris is at its best at the end of August and you will have also the opportunity to visit the “ville lumière” and its beautiful environs. We are confident you will never forget this unique venue and will remember the meeting as a rewording and fruitful experience.

Have a good meeting and a pleasant stay in Paris!

Carmelo SCARPIGNATO,
MD, DSc, PharmD (h.c.), MPH, FRCP (London), FCP, FACG
And here is the 12th Conference of OESO!
For the 12th time, and after only several months since the close of the 11th, a scientific program is being drawn up to propose yet another demonstration of the original OESO methodology:

• one, single subject,
• examined in all the different angles of multi-disciplinarity,
• an uninterrupted succession of pinpointed questions,
• concise, five minute responses,

This 12th Congress will be the one of the continuity expected of the OESO procedure.

It will, as well, be the one of a deliberate return to the theme that was chosen for our very first congress:

**Cancers of the esophagus**

June 1984 – August 2013: almost 30 years after, a new assessment of the theme:
Way back then, where were Genetics, where were Epigenetics, where was gene targeted therapy, and what we call, in the 21st Century, “Intelligent Medicine”?

That is why, this time, the OESO Conference is organized in the framework of the International Basic Sciences Program of the UNESCO, in cooperation with Dr Maciej Nalecz, Director and Executive Secretary.

• The Basic Sciences will thus be present in force with,
heading the program, the Human Variome Project, along with the strategies for the prevention of cancer and its recurrences.

• The clinical sciences will also, as before, be at the forefront with their recent advancements in the fields of epidemiology, nutrition, endoscopy, and minimvasive surgery.

It is a unique, far reaching, global view that will be offered.

And that is thanks to the involvement of the other Organizations which will mark this event with their, also outstanding, joint participation: the International Agency for Research on Cancer, and the World Health Organization with the UNESCO, the *Académie Nationale de Chirurgie*, and several of the most highly reputed cancer centers in the world: the National Cancer Institute in Bethesda, The MD Anderson Cancer in Houston, the Memorial Sloan Kettering Cancer Center in New York, the Institut National du Cancer in Paris, the Institut Mutualiste Montsouris in Paris, the University of Michigan in Ann Arbor, the University of Washington, the Deutsches Krebsforschung Zentrum in Heidelberg, the National Cancer Institute in Tokyo, the Central Scientific Research Institute of Gastroenterology and the N.N. Blokhin Russian Cancer Research Center in Moscow.

The post-graduate course that will open the program will be followed by a rare Invited Lecture, given by Mr Andrew Lo, a distinguished Professor at the MIT in Cambridge, Massachusetts, who will provide a talk with a provocative title “How financial engineering can cure cancer”. It will be followed by a panel discussion bringing together representatives from the UNESCO, the WHO, the IARC, and other experts from the major cancer centers involved in the program.

The exchange, at such a level, promises to be of exceptional interest.
The program that follows is an overall perspective of the four day conference. It will allow a glimpse at the diversity of the issues to be discussed in a profusion of specific domains, as summed up in the sub-title of the Conference: “From normal mucosa to tumor – The prospects of a translational approach”.

And, this time, we faced an exceptionally heavy additional challenge to meet: to draw up the entire program in less than 11 months...

My heartiest thanks go to those, in the prestigious Centers and Universities associated in the co-organization of the conference, who took of their time and energy to help me make it happen:

- The three leading, world renowned figures from three different parts of the world who joined forces to preside over the congress and testify to its multi-disciplinarity:
  - Richard G. Cotton, Scientific Director of the Human Variome Project, University of Melbourne,
  - Brice Gayet, Professor of Surgery, Paris Medical School,
  - George Triadafilopoulos, Professor of Gastroenterology and Endoscopy, Stanford University.

- The Organizing Committee headed by Ernest Hawk and Eric Van Cutsem, made up of leading experts from different parts of the world who lent their experience to the task of building this scientific program and of selecting those speakers most qualified to bring the congress to the highest possible level.

- And all those speakers, all contacted late by obvious necessity, who accepted to come and play the difficult game to answer a pithy question and to make a synthesis of their experience in a very limited time slot.

Teams from the five continents have already confirmed their participation.

The scientific program that follows could make of these dates, 

27 – 30 August 2013, in Paris, a milestone in the field of cancers of the esophagus.

The knowledge emanating from the 38 sessions will be widely disseminated following the Conference:

- The entirety of the content of the sessions (70 hours) will be captured and recorded in a DVD-Rom,
- And OESO is proud to confirm its continued collaboration with the New York Academy of Sciences which will publish the content of the Conference in a prestigious volume with simultaneous posting on PubMed.

Be onboard with us, Be ready to actively take part in the scheduled discussions,
- don’t miss out on seeing your colleagues again in the well known OESO tradition,
- making new acquaintances with others whom today you don’t know,
- and providing your Fellows with a unique opportunity to be in the midst of a rare assembly of experts:

OESO Paris 2013,
See you there!

Robert Giuli, MD, FACS
The OESO Charter

for the members of the Board of Trustees

Each of the specialists from all the 18 disciplines represented in the OESO contributed to build up this Organization which rapidly acquired its reputation of excellence in the international scientific community.

In becoming a member of the Board of Trustees, I accepted to adhere to the original idea at the basis of the conception of the OESO, and to allow my personal scientific reputation to uphold this distinctive society which has steadily continued, since 1978, to successfully serve the advancement of the discipline of esophagology.

I approved the aims as defined in the Bylaws of the OESO.

As an expert in my field, I shall continue to foster the founding spirit and the aims of the OESO, and I shall strive to broaden the reach of its achievements amongst the national and international bodies to which I belong.

In general terms, as a member of the Board of Trustees of the OESO, I consider myself as vested with the responsibility to represent a part of what this multi-disciplinary Organization signifies, and to contribute to maintain its scientific credibility and its reputation of excellence.

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About OESO

OESO is a scientific Organization created in 1978 for a multi-disciplinary learned activity devoted to esophagology.

➔ An international assembly of world’s leading specialists from 19 disciplines, all interested in one, single organ: the esophagus.
➔ 14,000 corresponding members from 85 countries.
➔ A unique, long standing joint endeavor, continuously renewed and without equal.
➔ A world reference in the domain of esophagology.
➔ A comprehensive book on ONE, single subject, representing a further step in the OESO evolutionary Encyclopedia of Esophagology, released following each Conference.
➔ Organization and federation of multi-disciplinary multi-center studies
➔ Lending of modern technology to provide high level, regularly updated CME.

See www.oeso.org ➔ About OESO

The OESO Foundation

The OESO Foundation is the arm of OESO for CME.

➔ The OESO Foundation renders tangible, and directly useful in daily practice by use of new technologies of communication, the very specific achievement of OESO’s network of excellence bringing together, in 18 disciplines, prominent representatives of Gastroenterology from the world over
➔ OESO and the OESO Foundation undertake their scientific activities under the auspices of UNESCO
➔ A Resolution in favor of OESO has been officially approved in 1999, at the time of the General Conference of the 187 member States
➔ In 2005, UNESCO awarded a Chair for distance learning to the OESO Foundation for the setting up of a worldwide inter-university network and the development of its program of CME, in close cooperation with the Department of Medical Informatics at the University of Geneva.


The Biennial Conferences

➔ World Congresses every 2 years, each bringing together about a thousand delegates from 60 to 70 countries, each dealing with ONE topic in esophagology dissected into hundreds of sharp questions, according to the original, specific OESO format.
➔ Have become a worldwide platform for personal and scientific exchange.
➔ Offer high standard education and scientific program and is the best place to learn about the latest advances in the fields of inter-disciplinary gastroenterology.
OESO 12th World Conference
Cancers of the Esophagus
*From normal mucosa to tumor*
*Translating knowledge into cure*
Paris, August 27-30, 2013

70 hours of presentations
on the single topic of the Conference
in addition, Posters pertaining to any subject
dealing with the upper digestive tract.

Accreditations

Following the approval from the UEMS (European Union of Medical Specialists), the EACCME (European Accreditation Council for Continuing Medical Education) has granted **18 European CME Credits** to 12th OESO World Conference.

The AMA has an agreement of mutual recognition with the UEMS. All physicians participating in the OESO Congress can be awarded AMA PRA category1 credit™ for their participation.
The Institutions, and potential speakers below are currently being contacted. Some sessions are already completed, thanks to the Chairs in charge of their organization. Others, typed in smaller characters, are still in the making. Parts of this program are therefore still subject to speakers’ acceptance, and to expected modifications proposed by the members of the Organizing Committee, or by all those who wish to provide their personal input to the Conference.

This Conference is organized in cooperation with:

UNESCO
United Nations Educational, Scientific and Cultural Organization

IARC
International Agency for Research on Cancer

WHO
World Health Organization

Académie Nationale Française de Chirurgie
Deutsches Krebsforschung Zentrum, Heidelberg
Institut Mutualiste Montsouris, Paris
MD Anderson Cancer Center, Houston
Memorial Sloan Kettering Cancer Center, New York
National Cancer Institute, Bethesda
National Cancer Research Institute, Tokyo
N.N. Blokhin Russian Cancer Research, Moscow
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This program is endorsed by

International Agency for Research on Cancer

World Health Organization

Académie Nationale de Chirurgie

General features of the program

The four day Conference will comprise:
• 6 Grand Fora
• 6 Plenary Sessions
• 12 Symposia
• 6 Topic Fora
• 1 Poster Oral Session
• 1 Video Session
• 5 Special Sessions

The different subjects have been divided up so as to avoid overlapping and conflicts of scientific interest.

Generalities
• A two hour “Grand Forum” will be organized at the beginning of each morning and afternoon, with no other Session running at the same time, so that all participants in the Conference can attend.
• All the other sessions (Plenary, Symposia, Topic Fora, Special Sessions) will be of the same duration, morning and afternoon, that is 1 hour 45 minutes.
• Each will be led by two Chair persons with, in most of them, the input of a Discussant (Moderator).
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### Program at a glance

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**Special Session 1**<br>N.N. Blokhin Russian Cancer Research Center Moscow

**Special Session 2**<br>Neurophysiology of the esophagus

**Special Session 3**<br>Central Scientific Research Institute of Gastroenterology Moscow

**Video Session**<br>Innovations in endoscopic esophageal interventions

**Special Session 4**<br>Selected Posters<br>Oral presentation

**Special Session 5**<br>Pharmacology of the esophagus

**Plenary Session 6**<br>Chemo-Radiotherapy<br>Future directions—Personalized Medicine

**Topic Forum 1**<br>Diet and esophageal disease

**Topic Forum 2**<br>Benign lesions and cancer

**Topic Forum 3**<br>Adenocarcinomas/GE junction<br>Specific sites of origin

**Topic Forum 4**<br>Regenerative medicine

**Topic Forum 5**<br>The role of immune system in cancer

**Topic Forum 6**<br>Evidence-based decision making

**Closing Session**<br>Gleam of Hope
Post-Graduate Course

8:30 – 10:45 am – Room IV
Roger P. Tatum
George Triadafilopoulos
Peter C. Wu

“Techniques & tips in esophageal practice – Minimally invasive surgery”

............... 

11:00 am – 12:45 pm – Room IV
David G. Beer
Christian Partensky

“Approaches for translational research in esophageal diseases”
3:00 – 5:00 pm – Room I

Live from MIT: **Special Opening Lecture**

Dr Andrew L. LO  
Professor of Financial Engineering  
Massachusetts Institute of Technology, Cambridge – MA

“How financial engineering can cure cancer”

Interactive debate to follow from the UNESCO  
MIT – UNESCO – WHO – Medical & Financial experts

5:30 pm – Room I

**Opening Ceremony**  
*at the UNESCO Headquarters*
Post-Graduate Course

Tuesday, August 27, 2013
Room IV

8:30 – 10:45 am

Techniques & tips in esophageal practice – Minimally invasive surgery

Chairs: Roger P. Tatum (Seattle) – George Triadafilopoulos (Stanford) – Peter C. Wu (Seattle)

Endoscopic Management

8:30  •  Endoscopic Ultrasound primer. R. Davila (Hershey)
8:40  •  New endoscopic imaging modalities. H. Mashimo (Boston)
8:50  •  Endoscopic stricture management. K.S. Dua (Milwaukee)
9:00 – 9:15  Questions

Multimodality Therapy

9:15  •  Nutritional management of the esophageal cancer patient. S. Paski (Seattle)
9:25  •  Clinical trial update. S. Cassivi (Rochester, MN)
9:35  •  Pathologic staging of the “complete” responder. M. Upton (Seattle)
9:45 – 10:00  Questions

Surgical Management

10:00  •  Transhiatal esophagectomy – How I do it. M. Schiesser (Zurich)
10:10  •  Minimally invasive esophagectomy – How I do it. L.L. Swanström (Portland)
10:20 – 10:45  Questions
11:00 am – 12:45 pm

Approaches for translational research in esophageal diseases

Chairs: David G. Beer (Ann Arbor) – Christian Partensky (Lyons)

- Genetics and Epigenetics in esophageal diseases: approaches for translational research. C. Partensky (Lyons)
- Essentials of tissue collection and utilization for genomic and proteomic-based studies. D.G. Beer (Ann Arbor)
- Ex vivo analyses of Barrett’s esophagus. G. Triadafilopoulos (Stanford)
- Ex vivo and in vivo imaging of Barrett’s esophagus for early cancer detection. T.D. Wang (Ann Arbor)
- Experimental models for Barrett’s esophagus and esophageal adenocarcinoma. M.K. Gibson (Cleveland)
- Utilizing biomarkers for assessing Barrett’s-associated adenocarcinoma progression. A. Maitra (Baltimore)
How Financial Engineering Can Cure Cancer

Andrew W. Lo (Professor of Financial Engineering, MIT, Cambridge, MA)

As our understanding of the science of disease has progressed, biomedical innovation has become more risky, lengthy, and expensive. These characteristics have the perverse effect of discouraging private-sector funding just when such funding is needed most.

One solution to this conundrum is to apply new financing methods such as portfolio theory and securitization to de-risk large portfolios of basic biomedical research and translational medical projects.

Such “megafunds” may require tens of billions of dollars to achieve sufficient risk reduction, but at those levels of funding, average risk-adjusted returns to investors become more attractive because of the increased likelihood of success.

The scale of megafunds will also allow for debt financing, which is currently unavailable to most biotech startups and venture capitalists because of their high levels of risk. Debt markets are considerably larger and more patient than private or public equity markets, hence such financing can support longer-term innovation and truly transformative research.

Panel:

- Dr. Daniel Lopez Acuna (Adviser to the Director General, WHO)
- Mrs Isabelle Waschsmuth (Knowledge Management and Sharing Evidence Informed Policy Network, WHO)
- Dr. Christopher Wild (Director, International Agency for Research on Cancer (IARC))
- Dr. Maciej J. Nalecz (Director, Executive Secretary, International Basic Sciences Program (IBSP))
- Dr. Edward Trimble (Director, NCI Center for Global Health – Dr. Fabien Calvo, Director, Institut National du Cancer (INCA) – Dr. Ernest T. Hawk (Vice President Division of Cancer Prevention & Population Sciences, MD Anderson Cancer Center) – Dr. Lopa Mishra (Chair Department Gastroenterology & Nutrition, MD Anderson Cancer Center)
- Dr. David G. Beer (University of Michigan) – Dr. Stephen J. Sontag (University of Chicago)
- Dr. George Triadafilopoulos (Stanford University, CA)

Moderator: Nicolas P. Giuliani
Opening Session

Setting the stage – Robert Giuli

Congress President – George Triadafilopoulos

UNESCO – Maciez Nalecz

World Health Organization (WHO) – Daniel Lopez Acuna

International Agency For Research on Cancer (IARC – WHO) – Christopher P. Wild

National Cancer Institute – National Health Institute – Edward Trimble

MD Anderson Cancer Center – Ernest T Hawk

University of Leuven – Eric van Custem

N.N. Blokhin Russian Cancer Research center, Moscow – M.I. Davydov

OESO

General Secretary: – C. Scarpignato

Past Presidents: – Stephen J. Sontag

– Henry D. Appelman

Congress Presidents: – Richard G. Cotton

– Brice Gayet

Guest of Honor – Jacques Périsat

Domaine de Chantilly – Frédéric Nancel

Opening – M. Nalecz

Musical performance – Kouban
Grand Fora
Room I

Grand Fora (2 hours): Dedicated to broad subjects, at which time certain topics will be put forward and introduced for thought, following a brief "key note".
Coping with esophageal cancer: the approaches worldwide

International Panel:
Christopher P. Wild (IARC-WHO Lyons) – Edward Trimble (NCI Bethesda) – Ernest T. Hawk (MD Anderson Houston)

Key note introduction: Esophageal cancer across the Globe in 2013. Christopher P. Wild (Director, IARC Lyons)

Regional variations (State of the problem in population – Etiology/causes – Opportunities/actions in prevention and treatment – Expected outcomes over the next 5-10 years)
Moderator: F. Bray (IARC-WHO Lyons)

- Africa
  - Kenya
    V. Sewram (Durban)
  - North America
    M. Krasna (Neptune)
  - South America
    R.B. Fagundes (Rio Grande)
- Australia
  T. Leong (Melbourne)
- China
  You-Lin Qiao (Beijing)
- Europe
  J. Martinek (Prague)
- India
  B.C. Das (Delhi)
- Japan
  T. Kawano (Tokyo)
- Middle East
  A. Kayasseh (Dubai)

Key note lecture: The Future:
Opportunities to reduce the burden of Barrett’s esophagus and esophageal cancer. Ernest T. Hawk (Houston)

Open Discussion: (Panelists, Audience). Edward Trimble (NIH, Bethesda)
Grand Forum 2

Wednesday, August 28, 2013
2:00 – 4:00 pm
Room I

The Human Variome project

Chairs: Richard G.H. Cotton (Melbourne) – Mauno Vihinen (Lund)
Discussant: Maciej Nalecz (UNESCO)

**Key Note:** What is the Human Variome Project? R.G.H. Cotton (Melbourne)

- How is data collected? F. Calvo (Paris)
- How is clinical and genetic data used? Alisa Goldstein (Bethesda)
- How do we describe clinical phenotype? Annet W. Sollie (Gröningen)
- What standards are needed and why? M. Vihinen (Lund)
- How can NCI collaborate with HVP? Daniela Seminara (NCI, Bethesda)
- How can HVP be globalised and funded? M. Nalecz (UNESCO)
**Energetics and cancer**
Trans-disciplinary Research on Energetics and Cancer (TREC program)

Chairs: **Dean J. Mikami** (Columbus) – **Kenric M. Murayama** (Philadelphia)
Discussant: **W. Scott Melvin** (Columbus)

Upon completion of this activity, participants should be able to:
- Understand the relationship between energy metabolism and cancer (Energetics)
- Define the relationship between morbid obesity and cancer risk
- Define techniques for real time diagnosis of esophageal pathology

- Relationship between energy excess and esophageal AC development. **Laura Kresty** (Milwaukee)
- Confocal microscopy in the cancer patient. **Sabrena Noria** (Columbus)
- Treatment of Barrett’s esophagus and GERD in the morbid obese patient. **W.S. Melvin** (Columbus)
- Bariatric surgery: managing the energy imbalance. **K.M. Murayama** (Philadelphia)
- Confocal microscopy in the workup of the bariatric patient. **D.J. Mikami** (Columbus)
- The PERSEE project: envisioning the future of surgery. **B. Gayet** (Paris)
Infection and cancer

Chairs: Hala El-Zimaity (Toronto) – Bhudev C. Das (New Delhi)
Discussant: Shan Rajendra (Sydney)

- What is the role of HPV in esophageal cancer? S. Rajendra (Sydney)
- How does HPV exert its oncogenic potential? Bin Wang (Sydney)
- How strong is the association between HPV and esophageal squamous cell carcinoma? R. Vajpeyi (Toronto)
- Is there a role for HPV vaccines in esophageal cancer control? B.C. Das (New Delhi)
- What is H. Pylori role in cardiac carcinoma? Hala El-Zimaity (Toronto)
- Does H. Pylori eradication increase esophageal cancer incidence? Gail Darling (Toronto)
- Does H. Pylori genotype influence esophageal cancer? Hala El-Zimaity (Toronto)
- Does EBV infection have a role in esophageal cancer? Sara Hafezi Bakhtiari (Toronto)
- What is the relationship between HIV infection and esophageal epithelial malignancies? A. Barbour (Brisbane)
- Does bacterial infections influence mucin expression and cancer risk? Cathy S. Streutker (Toronto)
- Is there a role for esophageal bacterial biota in the incidence of esophageal disease? S. Al-Haddad (Toronto)
- Would probiotics control the rising incidence of esophageal cancer? Geneviève Soucy (Montreal)
- Are criteria measuring response in esophageal cancer appropriate? B. Brücher (Richmond)
Grand Forum 5

Friday, August 30, 2013
8:30 – 10:30 am
Room I

Staging – Classification
Chairs: David H. Ilson (MSKCC, New-York) – Michio Hongo (Sendai)

Session 1:
The New AJCC Staging and Classification, the World perspective, and Molecular Classification

- The New AJCC Classification of Esophageal Cancer. S. Cassivi (Rochester, MN)
- The WHO Classification. R. Lambert (Lyons)
- The Japanese classification. H. Udagawa (Tokyo)
- Molecular classification of esophageal and GEJ cancer. P. Swanson (Seattle)

9:00 – 9:15  **Key Note Address:** Esophageal and GEJ cancer: implication of staging, restaging and treatment effect. N.P. Rizk (New York)

9:15 – 9:25  **Panel Discussion**

9:25 – 9:40  **Key Note Address:** The impact of novel imaging on staging and response assessment
M. Sosef (Utrecht)

Session 2:
East meets West: The management of squamous cancer of the esophagus

- Management of esophageal cancer: the Asian perspective. T. Kawano (Tokyo)
- Management of esophageal cancer: the Western perspective. J.M. Collard (Brussels)
  Karin A. Goodman (New York)

Panel discussion with a case review
Personalized Medicine
Strategies for cancer prevention

Chairs: Ernest T. Hawk (MD Anderson, Houston) – Edward Trimble (NCI, Bethesda)
Discussant: Leonid B. Lazebnik (Moscow)

**Key Note:** Can molecularly-based strategies improve esophageal cancer-related outcomes in at-risk populations? E.T. Hawk (Houston)

- Access to molecular testing and targeted therapies in France. F. Calvo (INCA, Paris)

**Which agents are most promising for the clinic now?**
- Aspirin, Esomeprazole, Barrett’s/adenoca, phase 3 internat, clinical trials.
- Selenium, NSAIDs, China-based trials, SCCA. P.R. Taylor (Bethesda)
- COXIBs, PPIs, phase 2 trials, Barrett’s/adenoca. G. Triadafilopoulos (Stanford)
- Dietary modification. A. Umar (Bethesda)
- Eflornithine-based combinations. N.S. Buttar (Rochester, MN)
- Statins in the chemoprevention and treatment of esophageal cancer – Data from observational cohort studies. L. Alexandre (Norfolk)

**Which populations are in need of, or might benefit from, preventive strategies?**
- Barrett’s/adenoca. Yvonne Romero (Rochester, MN)
- Global. C.C. Abnet (Bethesda)
- Asian/Global. You-lin Qiao (Beijing)

**How might we identify the most promising targets/agents going forward?**
- Preclinical systems, new targets/agents, preclinical testing. N.S. Buttar (Rochester, MN)
- Genomic/epigenomic analyses. A. Umar (Bethesda)
- Biomarkers, potential targets in BE/adenoca. Daniela Kandioler (Vienna)
Plenary Sessions

Room I

**Plenary sessions (1 hour 45 minutes):** According to the original, specific OESO format, most will allow to address 15 five minute Questions, with a 30 minute discussion. Their subjects should be of interest to all attendees, whatever their specialty.
Plenary Session 1

Wednesday, August 28, 2013
11:00 am - 12:45 pm
Room I

Translational research networks on Barrett’s esophagus

Chairs: David G. Beer (Ann Arbor) – Reza Shaker (Milwaukee)
Discussant: Asad Umar (NCI Bethesda)

- Research directions of Clinical and Translational Science Institute of Southeast Wisconsin.
  R. Shaker (Milwaukee)
- The BETRnet Program: a NCI effort for Translational Research. Ellen Richmond (Bethesda)
- BETRnet: multispectral imaging for early cancer detection in Barrett’s esophagus. T.D. Wang (Ann Arbor)
- Genetic Instability and esophageal cancer. Xifeng Wu (Houston)
Plenary Session 2

Wednesday, August 28, 2013
4:30 – 6:15 pm
Room I

Comparative genomic analysis of esophageal cancers – Gene targeted therapy

Chairs: Zdenko Herceg (IARC-WHO, Lyons) – Toshikazu Ushijima (Cancer Research Institute, Tokyo)
Discussant: Luis Felipe Ribeiro Pinto (Rio de Janeiro)

15 crucial questions to be addressed in the Session:

- How large inborn susceptibility and environmental exposure influence development of esophageal adenocarcinomas and squamous cell carcinomas? L.F. Ribeiro Pinto (Rio de Janeiro)
- GWAS: what are the gene loci associated with susceptibility to esophageal cancer? Ming-Shiang Wu (Taipeh)
- Etiology: how alcohol, smoking, inflammation and other environmental risk factors influence esophageal cancer development and progression? L.F. Ribeiro Pinto (Rio de Janeiro)
- Molecular mechanisms: what are the key molecular pathways genetically and epigenetically deregulated in esophageal cancer? T. Ushijima (Tokyo)
- Etiology and molecular biology: is there a genetic and epigenetic signature in esophageal tumors associated with main risk factors and clinical outcome? T. Ushijima (Tokyo)
- Genomics: genome of tumors: is a comprehensive mutation portrait available for esophageal cancer? If any, what was revealed? Z. Herceg (Lyons)
- Genomics and epigenomics: do we know genetic and epigenetic drivers in esophageal cancer? Z. Herceg (Lyons)
- Epigenomics: are histone modifiers frequently deregulated in esophageal cancer? Z. Herceg (Lyons)
- Epigenomics: can microRNA expression profiles be used as biomarkers in esophageal cancer? Ming-Shiang Wu (Taipeh)
- Premalignant lesions: Can early premalignant lesion or field defect be detected by genetic or epigenetic changes? Ming-Shiang Wu (Taipeh)
- Therapy: Do we have promising target genes or pathways for therapy of esophageal cancer? W. El Rifai (Nashville)
- Therapy: Do we know predictive markers for therapeutics? T. Ushijima (Tokyo)
- Metastasis and recurrence: Can we predict patients who suffer from metastasis and/or recurrence? W. El Rifai (Nashville)
- Metastasis and recurrence: Do we know gene critical for metastasis and/or recurrence? W. El Rifai (Nashville)
- Do we know molecular background for patients with cancers of multiple organs in addition to the esophagus? L.F. Ribeiro Pinto (Rio de Janeiro)


* 20 minutes
Plenary Session 3
Thursday, August 29, 2013
11:00 am – 12:45 pm
Room I

Endoscopy for diagnosis and treatment

Chairs: Thierry Ponchon (Lyons) – George Triadafilopoulos (Stanford)
Discussant: Marta L. Davila (MD Anderson, Houston)

- Screening of Barrett’s esophagus with capsule ou transnasal endoscopy (including cryo-balloon).
  R. Shaker (Milwaukee)
- Endoscopic recognition and classification of Barrett’s esophagus using the Prague system.
  C. Kusano (Tokyo)
- Cellvizio as a tool to recognize and treat dysplasia. H.C. Wolfsen (Jacksonville)
- Narrow Band Imaging in Barrett’s esophagus and dysplasia. S.B. Wani (Aurora)
- Optical coherence tomography in the assessment of subsquamous Barrett’s metaplasia.
  H. Mashimo (Boston)
- HALO in treatment of Barrett’s esophagus without dysplasia. C.J. Lightdale (New York)
- HALO for dysplastic Barrett’s esophagus. I. Prasad (Rochester, MN)
- Endoscopic mucosal resection for high-grade dysplasia in Barrett’s esophagus. S. Komanduri (Chicago)
- Cryotherapy for Barrett’s esophagus with and without dysplasia. S.J. Sontag (Chicago)
- Endoscopic tools to recognize squamous cell dysplasia. Vani J. Konda (Chicago)
- HALO in the treatment of squamous dysplasia. J. Akiyama (Stanford)
- Endoscopic submucosal dissection for early esophageal cancer. I. Prasad (Rochester, MN)
- Endoscopic Ultra Sound staging of esophageal cancer. Raquel Davila (Hershey)
- Endoscopy post-esophagectomy. Marta L. Davila (Houston)
- Stents for malignant dysphagia. K.S. Dua (Milwaukee)
Plenary Session 4

Thursday, August 29, 2013
4:30 – 6:15 pm
Room I

Surgical treatments
(Cardia excluded)

Chairs: Brice Gayet (Paris) – Richard Van Hillegersberg (Utrecht)
Discussant: Peter Van Rossum (Utrecht)

• How do GEJ tumors differ from esophageal and gastric cancer? R. van Hillegersberg (Utrecht)
• Does site of tumor, GEJ or cardia, make any difference? Dhanpat Jain (New Haven, CT)
• Minimally invasive surgery for esophageal resection. Evidence-based or experience-based surgery?
  T. Perniceni (Paris)
• What is the best position for thoracoscopic resection?
  – Prone position. L. Bonavina (Milan)
  – Left lateral position. S. Putambekar (Pune)
• Is there still a place for open esophagectomy? D. Van der Peet (Amsterdam)
• What are the advantages of robot esophagectomy? J. Ruurda (Utrecht)
• What should the pathologist report in the resected specimen? R. Langer (Bern)
  – R0 resection definition
  – Lymphnode involvement and location
  – Response to neoadjuvant therapy
  – Genetic markers
• What is the significance of the meso-esophagus? M. Cuesta (Amsterdam)
• SCC: What are the advantages of esophagectomy compared to definitive chemo-radiotherapy?
  V.N. Felix (Sao Paulo)
• What are the disadvantages of neo-adjuvant therapy? P. Pattyh (Ghent)
• What is the best location for esophago-gastrostomy? M. Krasna (Neptune)
• Laparoscopically-assisted esophagectomy for cancer: the MIRO trial. R. Flamein (Clermont-Ferrand)
• Long-term quality of life in patients following esophagectomy. M. Lewis (Norfolk)
Plenary Session 5

Friday, August 30, 2013
11:00 am – 12:45 pm
Room I

Complications of interventional endoscopy – esophageal surgery

Chairs: Roger P. Tatum (Seattle) – Kenneth K. Wang (Rochester, MN)
Discussant: Marc Barthet (Marseilles)

Key note: Esophageal complete disruption: Is endoscopic management possible?* M. Barthet (Marseilles)

- Should the over the scope clip be the first line device in management of esophageal perforations?
  K.K. Wang (Rochester, MN)
- Should esophageal stents be used in most acute esophageal perforations involving tumors?
- Which are the situations where endoscopic clips are preferred for esophageal perforations?
  H.C. Wolfsen (Jacksonville)
- Should esophageal stents be placed in tracheo-esophageal fistulas caused by endo-bronchial stents?
  T. Ponchon (Lyons)
- In anastomotic leaks after esophagectomy and gastric pull up, should endoscopic closure be attempted?
  Marta L. Davila (Houston)
- Mediastinal drainage of abscess under EUS guidance or NOTES approach: a real treatment?
  M. Barthet (Marseilles)
- How do we manage the patient who develops high-grade dysplasia after having undergone Nissen fundoplication?
  R. P. Tatum (Seattle)
- What is the optimal approach to manage cervical anastomotic leak after esophagectomy?
  J.M. Collard (Brussels)
- What is the optimal approach to manage thoracic esophageal leak after esophagectomy?
  Katie Nason (Pittsburgh)
- What is the best way to manage the patient with an unsuspected positive microscopic margin after esophageal resection?
  P.C. Wu (Seattle)
- How should we manage chylous leak after esophagectomy?
  L. Bonavina (Milan)
- Endoscopic management of anastomotic fistula or leakage of the esophagus?
  M. Barthet (Marseilles)
- How should we evaluate and treat postoperative hoarseness after esophagectomy?
  I.F. Herrmann (Munich)
- “Trajectory of Care” for the patient with esophageal cancer.
  S. Cassivi (Rochester, MN)

* 10 minutes
Plenary Session 6

Friday, August 30, 2013
11:00 am – 12:45 pm
Room IX

Chemo-Radiotherapy – Future directions – Towards personalized medicine

Chairs: Paul M. Schneider (Zurich) – Eric Van Cutsem (Leuven)
Discussant: Daniela Kandioler (Vienna)

- Transatlantic comparison of strategies
  - TNCD (Thesaurus National de Cancérologie Digestive)*.
    - L. Bedenne (Dijon)
    - Florence Huguet (Paris)
    - C. Louvet (Paris)
  - NCCN (National Comprehensive Cancer Network)*.
    - A.C. Chang (Ann Arbor)
    - D.H. Ilson (New York)

- The CROSS trial and its implications in the West.* E. Van Cutsem (Leuven)
- Biomarker driven approaches in esophageal cancer. Daniela Kandioler (Vienna)
- Place of c- MET. D.H. Ilson (New York)
- Mechanisms of chemo-resistance. A.C. Chang (Ann Arbor)

Discussion
- Radiation therapy*. Karin A. Goodman (New York)
  - IMRT (Intensity modulated Radiotherapy)
  - 3D conformal Radiotherapy
  - Brachytherapy
- Proton therapy. Karin A. Goodman (New York)
- Combined modality therapy. T. Leong (Melbourne)
- Targeted chemotherapy of metastatic esophageal cancer. Huiqin Guo (Beijing)

Evaluation of response
- PET-CT and endoscopic biopsies in the evaluation of response to neoadjuvant-chemoradiation therapy. P. van Rossum (Utrecht)
- Future potential of MRI in response assessment. P. van Rossum (Utrecht)
- Predictive biomarkers and genetic profiling in esophageal cancer. Sheila K. Krishnadath (Amsterdam)
- Esophageal stent as bridge to surgery for locally advanced esophageal cancer receiving neo-adjuvant therapy. K.S. Dua (Milwaukee)

Discussion

* 10 minutes
Symposia
Room XI and Room XII

Symposia (1 hour 45 minutes): Their format as well as the time slot left for discussion will be determined by the Chairs and the Discussant in charge of the session.
Symposium 1

Wednesday, August 28, 2013
11:00 am – 12:45 pm
Room XI

Molecular epidemiology of esophageal cancer

Chairs: Stephen J. Sontag (Chicago) – Kiron M. Das (New Brunswick)
Discussant: Lopa Mishra (MD Anderson, Houston)

- Integrating Genomics with Genetic models to target esophageal cancer. Lopa Mishra (Houston)
- Is carcinogenesis in Barrett’s esophagus a clonal evolution? K.M. Das (New Brunswick)
- Molecular Markers: “predictive” vs. “prognostic” vs. “signaling”. What is the difference? Joanna Gibson (New Haven)
- Research funding should be considered only if the biomarkers demonstrate a high potential for clinical relevance: Yes or No! I. Parker (Cape Town)
- Research funding should be considered even if the biomarkers have yet to demonstrate potential for clinical relevance. Yes or No! T.E. Godfrey (Boston)
- The absolutely perfect biomarker for early detection of esophageal cancer: How would it affect morbidity and mortality? H. Mashimo (Boston)
- The absolutely perfect biomarker for treatment of esophageal cancer: How would it affect morbidity and mortality? W. El-Rifai (Nashville)
- Will we ever succeed? Putting it all together. S.J. Sontag (Chicago)
Symposium 2

Wednesday, August 28, 2013
11:00 am – 12:45 pm
Room XII

Upper third of the esophagus and pharyngeal cancers

Chairs: Nikki Johnston (Milwaukee) – Jochen Hess (DKFZ, Heidelberg)
Discussant: Jonathan Bock (Milwaukee)

• LPR as a risk factor for laryngeal cancer – Role of pepsin in laryngo-pharyngeal neoplasia. Nikki Johnston (Milwaukee)
• DNA methylome signatures in the pathogenesis and stratification of oropharyngeal squamous cell cancer patients. J. Hess (Heidelberg)
• Natural fruit and vegetable compounds for the prevention and treatment of pharyngeal and esophageal cancers. J. Bock (Milwaukee)
• Evaluating cranberry constituents as inhibitors of esophageal adenocarcinoma utilizing in-vitro assay and in-vivo models. Laura Kresty (Milwaukee)
• Trans-oral robotic surgery (TORS) in pharyngeal cancer. C. Simon (Lausanne)
• Response evaluation in head and neck cancer. A. Dietz (Leipzig)
Symposium 3

Wednesday, August 28, 2013
4:30 – 6:15 pm
Room XI

Cancer stem cells

Chairs: Xiaoxin (Luke) Chen (Durham) – Jianwen Que (Rochester, NY)

• Esophageal epithelial stem cell. P.H. Jones (Cambridge, UK)
• Stem cells, cancer and the esophagus. W.A. Phillips (Melbourne)
• Basal progenitor cells as the cell-of-origin for esophageal squamous cell carcinoma. Jianwen Que (Rochester, NY)
Symposium 4

Wednesday, August 28, 2013
4:30 – 6:15 pm
Room XII

Collection of data – Genetic Library

Chairs: Richard G. Cotton (Melbourne) – Alex Boussioutas (Melbourne)
Discussant: Mehnaz Shafi (MD Anderson, Houston)
Secretary:

- How was the Cancer Genome Atlas developed and how is it being used? A. Boussioutas (Melbourne)
- How was COSMIC developed and how is it being used? D.G. Beer (Ann Arbor)
- How useful is tumour analysis? A. Barbour (Brisbane)
- How is the UK Barretts Registry run and used? Christine Caygill (London)
- What databases and systems are based at NCI? Daniela Seminara (Bethesda)
- How is the Mayo Clinic Esophageal Adenocarcinoma and Barrett’s Esophagus (EABE) Registry curated and how is it used? Yvonne Romero (Rochester, MN)
- What is the role of p53 database in cancer? Daniela Kandioler (Vienna)
- How will genetic data from the Linxian Cancer Prevention Study prevent cancer? C.C. Abnet (Bethesda)
- What software is available for curation of variation databases? M. Vihinen (Lund)
- What is the value of association studies in Barretts? Yvonne Romero (Rochester, MN)
- Overview of genetic predisposition to cancer. Sylviane Olschwang (Marseilles)
- What is the role of epigenetics in cancer? N.S. Buttar (Rochester, MN)
- What is ideal way of coordinating collection and analysis of genomic data? Xifeng Wu (Houston)
Symposium 5

Thursday, August 29, 2013
11:00 am – 12:45 pm
Room XI

Environmental factors and squamous cell carcinoma

Chairs: Edward Trimble (NCI, Bethesda) – Christian C. Abnet (NCI, Bethesda)
Discussant: Michio Hongo (Sendai)

Overview: East-West differences in rates and causes. S. Dawsey (Bethesda)
• Polycyclic aromatic hydrocarbons. S. Dawsey (Bethesda)
• Hot liquids. P.R. Taylor (Bethesda)
• Maté. R. Fagundes (Santa Maria)
• Oral health. C.C. Abnet (Bethesda)
• Mycotoxins and medicinal plants. V. Sewram (Durban)
• Human Papilloma Virus. P.R. Taylor (Bethesda)
Symposium 6

Thursday, August 29, 2013
11:00 am – 12:45 pm
Room XII

Superficial / early cancers

Chairs: Lee L. Swanström (Portland) – Haruhiro Inoue (Yokohama)
Discussant: Alejandro Nieponice (Buenos Aires)

- When does Barretts go from dysplasia to early cancer? M. Lisovsky (Lebanon)
- What is the role of Nissen fundoplication after Barrett’s ablation? A. Badaloni (Buenos Aires)
- Will confocal microscopy or high definition EUS be the future diagnostic tool for very early esophageal cancers? T.D. Wang (Rochester, MN)
- Is CT or PET/CT worthwhile ordering for early cancers? P. Pokieser (Vienna)
- Is ablation the best method of treating early esophageal cancers? H. Inoue (Yokohama)
- Tubular widespread ESD in the esophagus with high dose steroid stricture prevention. J. Hochberger (Strasbourg)
- What is the optimal follow-up schedule after ablation of HGD/intramucosal cancers? H. Udagawa (Tokyo)
- Is there a role for chemo and/or radiation in very early cancers? D.H. Ilson (New York)
- What role might NOTES play in early esophageal cancer? Katie Nason (Pittsburgh)
- China’s national early detection and early treatment program. Guiqi Wang (Beijing)
Symposium 7

Thursday, August 29, 2013
4:30 – 6:15 pm
Room XI

Molecular dissection of Barrett’s metaplasia and EAC
Pathology correlation

Chairs: Robert D. Odze (Boston) – Navtej S. Buttar (Mayo Clinic, Rochester)
Discussant: Wayne A. Phillips (Melbourne)

- Defining esophageal cancer genomic alterations. W.A. Phillips (Melbourne)
- Oncogenic Linage survival in Barrett’s esophagus. D.G. Beer (Ann Arbor)
- MiRNA in BE. A. Bansal (Kansas City)
- Epigenetic and Transcriptional Regulation in BE and EAC. N.S. Buttar (Rochester, MN)
- Metaplasia and EAC – Role of Micro Satellite Instability. Melissa Upton (Seattle)
- Use of histologic and serum DCLK 1 expression for progression of BE to EAC. K.J. Vega (Oklahoma City)
- Stromal response to systemic derangements in BE. I. Prasad (Rochester, MN)
- Oxidative stress in Barrett’s tumorigenesis. W. El-Rifai (Nashville)
- Epithelial - Mesenchymal interactions in BE. M.K. Gibson (Cleveland)
- Morphogens in BE. Sheila K. Krishnadath (Amsterdam)
- In vivo modeling of Barrett’s esophagus. L.X. Chen (Durham)
- In-vitro models of Barrett’s metaplasia and carcinogenesis. K.M. Das (New Brunswick)
- Is there a role for MGMT (Methyl Guanine Methyl Transferase) biomarker in the management of esophageal adenocarcinoma? M. Lisovsky (Lebanon)
Symposium 8

Thursday, August 29, 2013
4:30 – 6:15 pm
Room XII

High Technology Assessment (HTA)
Global Forum for medical devices

Chairs: Charles J. Lightdale (New York) – Adriana Velazquez Berumen (WHO, Geneva)
Discussant: Thomas D. Wang (Ann Arbor, MN)

Key Note: Approaches to “Virtual Pathology”. C.J. Lightdale (New York)

• Guidance for socially-targeted rationale – Needs for populations. Adriana Velazquez-Berumen (Geneva)
• Confocal laser endomicroscopy for Barrett’s esophagus. Vani J. Konda (Chicago)
• The Use of FISH (Fluorescence In Situ Hybridization) to detect dysplasia and adenocarcinoma in patient’s with BE. K.C. Halling (Rochester, MN)
• The “intelligent endoscopic Atlas” for Barrett’s esophagus. F. Lacombe (Paris)
• Quantifying eosinophils using three-dimensional volumetric images with Multiphoton Fluorescence Microscopy. T.D. Wang (Ann Arbor, MN)
• Novel imaging technologies to detect early sub-epithelial changes for evaluation of chemo-preventive agents. Laura Kresty (Milwaukee)
• Magnetic imaging technology (CT + MRI). P. Pokieser (Vienna)
• Innovations in EMR. S. Komanduri (Chicago)
• Cost-effectiveness of optical endomicroscopy vs high definition white light endoscopy alone in BE patients referred for suspicious lesions. H.C. Wolfsen (Jacksonville)
Symposium 9

Friday, August 30, 2013
11:00 am – 12:45 pm
Room XI

Esophageal stenting

Chairs: Kulwinder S. Dua (Milwaukee) – Frédéric Mal (Paris)
Discussant: Russel White (Bomet-Kenya)

- Nutritional support during chemo-radiation of esophageal cancer: NG tube, G tube or stents? M. Goenka (Kolkata)
- When esophageal stents should be used for palliation of malignant dysphagia? A. Kayasseh (Dubai)
- How to choose an esophageal stent? K.S. Dua (Milwaukee)
- Stenting the cervical esophagus. M. Goenka (Kolkata)
- When should esophageal stents not be used? F. Mal (Paris)
- Esophageal perforation, leak or fistula: clip, suture, glue, stent, or surgery? E.G.H. de Moura (Sao Paulo)
- Esophageal stents prior to surgery. R. White (Bomet-Kenya)
- Esophageal stenting in a resource-constrained setting. R. White (Bomet-Kenya)
- Role of stents for treating refractory benign esophageal strictures. K.S. Dua (Milwaukee)
- Are there any advantages in using removable stents or biodegradable stents? F. Mal (Paris)
- Are there any advantages of using radioactive/drug eluting stents? E.G.H. de Moura (Sao Paulo)
- How to manage acute complications of esophageal stenting? K.S. Dua (Milwaukee)
- What’s new in esophageal stenting? A. Kayasseh (Dubai)
Symposium 10

Friday, August 30, 2013
11:00 am – 12:45 pm
Room XII

Familial clustering and genetic susceptibility of esophageal cancer

Chairs: Alisa Goldstein (Bethesda) – Philip R. Taylor (NCI, Bethesda)

Esophageal adenocarcinoma (EAC):
- Discovery of high risk genes in families. W.A. Phillips (Melbourne)
- Genome-wide Association Study of Barrett’s. Yvonne Romero (Rochester, MN)
- Genome-wide Association Study of EAC. M.K. Gibson (Cleveland)

Esophageal squamous cell cancer (ESCC):
- Familial ESCC. P.R. Taylor (Bethesda)
- Discovery of high risk genes in families. Alisa Goldstein (Bethesda)
- Genome-wide Association Study of ESCC. C.C. Abnet (Bethesda)
Symposium 11
Friday, August 30, 2013
4:30 – 6:15 pm
Room XI

Prediction of progression to cancer

Chairs: Robert H. Riddell (Toronto) – Iqbal Parker (Cape Town)
Discussant: Henry D. Appelman (Ann Arbor)

- Identification of genes driving esophageal adenocarcinoma. M.K. Gibson (Cleveland)
- Identification of susceptibility loci. M.K. Gibson (Cleveland)
- Can LG glandular dysplasia give rise directly to invasive Ca? V. Villanacci (Brescia)
- Aneuploidy as a predictor of dysplasia – Is it really practical? X. Sagaert (Leuven)
- Tumor markers for use in personalized medicine. P.E. Swanson (Seattle)
- Is P53 immunoreactive glandular dysplasia at higher risk than nonimmunoreactive mucosa for developing progression? H.D. Appelman (Ann Arbor)
- Does racemase immunoreactivity predict increased risk of carcinoma. R.H. Riddell (Toronto)
- Do lectins have a role in the progression to adenocarcinoma. P.E. Swanson (Seattle)
- Comparison of predictive epigenetic markers for Squamous and Adenocarcinoma.
  Z. Herceg (Lyons)
- Is there a standardized grading system for tumor regression in Squamous and in Adenocarcinoma? X. Sagaert (Leuven)
- Mutational spectra of Barrett’s esophagus and adenocarcinoma. I. Parker (Cape Town)
- Significance of post neo-adjuvant therapy residual endocrine cells and mucin pools.
  Dhanpat Jain (New Haven, CT)
- Are there molecular markers of patients presenting complete response to neoadjuvant chemo-radiotherapy? L.P. Ribeiro Pinto (Rio de Janeiro)
- Can LG squamous dysplasia/IEN give rise directly to invasive Ca? V. Villanacci (Brescia)
- Methylated CDKN 2A and CDA in patients with dysplasia. T. Ushijima (Tokyo)
- Are HPV and nonHPV squamous dysplasias/IEN at the same risk of subsequent invasion?
  Rhonda K. Yantiss (New York)
Symposium 12
Friday, August 30, 2013
4:30 – 6:15 pm
Room XII

Pre-Treatment resuscitation
The role of the nurse in clinical trials on esophageal cancer

Chairs: René Lambert (IARC-WHO, Lyons) – Ellen Richmond (NCI, Bethesda)

• Role of the clinical trials nurse in Barrett’s esophagus trial – Accrual and study implementation. Ellen Richmond (Bethesda)
• Role of endoscopy nurse during endoscopic resection of esophageal cancer. B. Gayet (Paris)
• Role of endoscopy nurse during treatment of a Barrett with radiofrequency. T. Ponchon (Lyons)
• Role of the nurse in preparation to stenting of stenosis in esophageal cancer. Marta L. Davila (Houston)
• Role of endoscopy nurse during placement of an esophageal stent. E.G.H. de Moura (Sao Paulo)
• Role of the nurse in preparation of trans-hiatal resection of esophageal cancer without thoracotomy and left neck incision. R. Lambert (Lyons)
Topic Fora

Room IV

**Topic Fora (1 hour 45 minutes):** Their format as well as the time slot left for discussion will be determined by the Chairs and the Discussant in charge of the session.
Topic Forum 1

Wednesday, August 28, 2013
11:00 am – 12:45 pm
Room IV

Diet and esophageal disease

Chairs: Brian C. Jacobson (Boston) – Philip R. Taylor (NCI, Bethesda)

Barrett’s esophagus and Adenocarcinoma:
• Macronutrients, dietary patterns and risk of BE and EAC. B.C. Jacobson (Boston)
• Micronutrients, trace elements and risk of BE and EAC. P.A. van der Brandt (Maastricht)
• Iron and risk of BE and EAC. C.C. Abnet (Bethesda)
• Questions and “Next steps in research”.

Esophageal Squamous Cell carcinoma:
• Vitamins (A, B, C, and D) and ESCC. P.R. Taylor (Bethesda)
• Minerals (Zn, Se) and ESCC. You-Lin Qiao (Beijing)
• Questions and “Next steps in research”.

Nutritional assessment and cancer prevention:
• The EPIC-Norfolk study using nutrient information from 7-day food diaries. A. Hart (Norfolk)
• Food-based approaches for esophageal cancer prevention. Laura Kresty (Milwaukee)
• Questions and “Next steps in research”.
Benign lesions of the esophagus – Lesions precursor of cancer

Chairs: G. Triadafilopoulos (Stanford) – Asbjørn M. Drewes (Aalborg)
Discussant: Christian Lottrup (Aalborg)

- Pediatric surgical conditions associated with esophageal cancer. S. Teich (Columbus)
- Can bile acids induce malignant transformation in the esophagus? Katerina Dvorak (Tucson)
- Lymphocytic esophagitis: an emerging condition? C.A. Rubio (Stockholm)
- Eosinophilic esophagitis and overlap syndromes – Is there be a potential risk for malignant transformation?
  Anne L. Krarup (Gothenburg)
- Is Barrett’s esophagus a premalignant condition? F. Hvid-Jensen (Aalborg)
- Achalasia and pseudo-achalasia esophagus: relationship with cancer and mechanism?
  G. Triadafilopoulos (Stanford)
- Medical treatment for pre-malignant conditions of the esophagus: which and how?
  C. Scarpignato (Parma)
- When should endoscopical procedures be used to treat premalignant condition of the esophagus?
  G. Triadafilopoulos (Stanford)
Adenocarcinomas slightly above, slightly below and within the gastroesophageal junction: what are their specific sites of origin, and how can we tell?

Chairs: Henry D. Appelman (Ann Arbor) – Robert H. Riddell (Toronto)

- Are there differences between carcinomas arising in all these areas?
  a. By clinical features? A. Chang (Ann Arbor)
  b. By gross feature? J. Gibson (New Haven)
  c. Histologically? X. Sagaert (Leuven)
  d. By immunohistochemistry? Melissa Upton (Seattle)
- How does the endoscopist tell? J. Inadomi (Seattle)
- How does the surgeon tell? Gail E. Darling (Toronto)
- How does the pathologist tell?
  a. From biopsies? G. Soucy (Montreal)
  b. From EMR specimens? A. Grin (Toronto)
  c. From resection specimens. Dhanpat Jain (New Haven)
  d. From resection specimens following neoadjuvant therapy? R. Langer (Bern)
- What are the possible precursors of adenocarcinomas in the region of the cardia.
  a. Helicobacter. Hala El-Zimaity (Toronto)
  b. Intestinal metaplasia limited to the cardia. V. Villanacci (Brescia)
  c. Foveolar mucosa. Rhonda K. Yantiss (New York)
  d. Esophageal pyloric gland adenomas. Monica Tripathi (Toronto)
  e. Pancreatic metaplasia. S. Al-Haddad (Toronto)
- Is there any reason to make these distinctions in site of origin?
  a. Therapeutically. A. Chang (Ann Arbor)
  b. Prognostically. R. Langer (Bern)
  c. Her2 immunoreactivity. Cathy S. Streutker (Toronto)
  d. Response to Herceptin. Gail E. Darling (Toronto)
Regenerative Medicine

Chairs: Khalil Bitar (Winston Salem) – Buddy D. Ratner (Seattle)
Discussant: Gerardo Nardone (Naples)

- Normal and disordered regeneration in Barrett’s esophagus. G. Nardone (Naples)
- Tubular esophageal tissue construct bioengineered from isolated esophageal circular smooth muscle cells. Repopulation of decellularized tubular GI tract with smooth muscle cells. K. Bitar (Winston Salem)
- What is the role of the submucosal glands and ducts in regenerating esophageal. C.A. Rubio (Stockholm)
- What is the role of the macrophage in healing and regeneration? mucosal lining? B.D. Ratner (U. Washington)
- What is the role of autophagy in esophageal cancer development? Katerina Dvorak (Tucson)
- Extra cellular matrix scaffolds in surgery for cancer (with film). A. Nieponice (Buenos Aires)
The role of immune system in cancer

Chairs: Sheila K. Krishnadath (Amsterdam) – Navtej S. Buttar (Rochester, MN)
Discussant: S. Calpe (Amsterdam)

- Is there a role of Micro RNA in the immune response of esophageal cancer? L. Mari (Amsterdam)
- Is there a specific immune response that drives metaplasia and cancer in the esophagus and are there models for studying these events?* K.M. Das (New Brunswick)
- Which animal reflux-inflammation models are there for BE and EAC?* Daniele Straub (Amsterdam)
- Are there specific cytokines involved in metaplasia-dysplasia-cancer sequence of the esophagus? Katerina Dvorak (Tucson)
- Are there compounds that enhance the immune response in esophageal cancer patients? L. Mari (Amsterdam)
- Is there an association between obesity, the immune system, and esophageal adenocarcinoma? D. Compare (Naples)
- Are there signaling pathways that can be targeted with immunotherapies?* S. Calpe (Amsterdam)

* 10 minute reply
Evidence-based decision making in esophageal cancer

Chairs: John M. Inadomi (Seattle) – Helen H. Wang (Boston)
Discussant: Melissa Upton (Seattle)

• What are the levels of evidence? Helen H. Wang (Boston)
• How is screening for esophageal squamous cell carcinoma performed in China?* S. Dawsey (NCI, Bethesda)
• Can endo-cytoscopy replace biopsy histology for squamous cell carcinoma?* Y. Kumagai (Saitama)
• Does the incidence of adenocarcinoma justify surveillance in individuals who have gastro-esophageal reflux disease or Barrett’s esophagus?* J.M. Inadomi (Seattle)
• Which patients with Barrett’s esophagus should undergo endoscopic therapy?* J. M. Inadomi (Seattle)
• Is there evidence to favor endoscopic treatment or surgery in early esophageal cancer?* S. B. Wani (Aurora)
• What are the current non endoscopic options for early detection and treatment of esophageal squamous cell carcinoma and its precursor lesions?* S. Dawsey (Bethesda)
• Is there a minimum number of lymph nodes from resected specimens required for accurate staging of the esophageal carcinoma?* R.M. Najarian (Boston)
• What is the clinical significance of post-therapy pathologic stage in patients with esophageal adenocarcinoma following preoperative chemo-radiation? Helen H. Wang (Boston)
• What is the clinical significance of post-therapy pathologic stage in patients with esophageal squamous cell carcinoma following preoperative chemo-radiation?* Yin-Kai Chao (Taiwan)
• Can stimulation of salivary and esophageal secretion of protective factors help to prevent RE, BE & adenocarcinoma sequelae in patients with gastro-esophageal reflux disease?* J. Sarosiek (El Paso)

* 10 minutes
Special Sessions
Room IX and Room II

Special Sessions (1 hour 45 minutes): Their format as well as the time slot left for discussion will be determined by the Chairs and the Discussant in charge of the session.
Special Session 1

Wednesday, August 28, 2013
11:00 am – 12:45 pm
Room IX

The N.N. Blokhin Russian Cancer Research Center, Moscow

Chairs: Mikhail I. Davydov (Moscow) – Boris E. Polotskiy (Moscow)
Discussant: Ivan S. Stilidi (Moscow)

- Up-to-date technologies in surgery of thoracic esophagus. M.I. Davydov (Moscow)
- Surgery of simultaneous cancer of esophagus and stomach. M.M. Davydov (Moscow)
- The choice for operational approach in surgery of cardio-esophageal crossing. I.N. Turkin (Moscow)
- Novel view on diagnostic of Barret’s esophagus. Y.P. Kuvshinov (Moscow)
- Experimental basis for new approaches to medicinal treatment of cancer of the esophagus. Tatiana A Bogush (Moscow)
- Prognostic value of molecular markers expression in esophageal squamous cell carcinoma. Vera V. Delektorskaya (Moscow)
- Pre-operative chemotherapy in treatment of cancer of the esophagus. A.A. Tryakin (Moscow)
Special Session 2

Wednesday, August 28, 2013
11:00 am – 12:45 pm
Room II

Neurophysiology of the esophagus, from receptor to the central nervous system

Chairs: Christina Brock (Aalborg) – Ashley Blackshaw (London)
Discussant: Hans Gregersen (Chongqing)

- Methods and characteristics of esophageal afferents in animal studies. A. Blackshaw (London)
- Methods and characteristics of esophageal afferents in humans. A.M. Drewes (Aalborg)
- Pitfalls in characterization of mechano-sensitive afferents. H. Gregersen (Chongqing)
- What do we know about sensitization of esophageal afferents from human studies? A.D. Farmer (London)
- Can assessment of the autonomic nervous system be used to explain esophageal symptoms?
  C. Botha (London)
- What can evoked brain potentials be used for in the esophagus? A.M. Drewes (Aalborg)
- How can brain imaging methods be used to understand the esophagus-brain axis?
  R. Shaker (Milwaukee)
- Can brain source modeling be used to understand the esophagus-brain axis? J.B. Frekjær (Aalborg)
- How can descending inhibition be measured in animal and human studies? Christina Brock (Aalborg)
The Central Scientific Research Institute of Gastroenterology (Moscow)

Chair: Igor E. Khatkov (Moscow)
Discussant: Dimitri S. Bordin (Moscow)

- Diagnostic and treatment of Barrett’s esophagus. P.L. Shcherbakov (Moscow)
- The alginate test as a diagnostic criteria of GERD. D.S. Bordin (Moscow)
- Reflux esophagitis in patients after gastrectomy. O.S. Vasnev (Moscow)
- Opportunities of laparoscopic-thoracoscopic access in the performance of simultaneous esophageal replacement with stomach. I.E. Khatkov (Moscow)
Video Session

Wednesday, August 28, 2013
4:30 – 6:15 pm
Room II

Innovations in endoscopic esophageal interventions

Chairs: Brice Gayet (Paris) – Haruhiro Inoue (Yokohama)

- Endoscopic surgery and new imaging. B. Gayet (Paris)
  - 3D imaging
  - ICG and Infrared camera
  - Amplification of reality
- Interventional endoscopy: the next steps.
  - Per Oral Endoscopy Myotomy (POEM). H. Inoue (Yokohama)
  - Endoscopic digestive anastomosis and esophageal reconstruction: a challenge or an utopy?
    M. Barthet (Marseilles)
Special Session 4
Thursday, August 29, 2013
11:00 am – 12:45 pm
Room IX

Posters – Oral presentation

Chairs: Thomas Gouge (New York) – Paul M Schneider (Zurich)
Panel: L. Chen (Durham) – M. Lisovsky (Lebanon) – A. Kayasseh (Dubai) – H. Mashimo (Boston)

The program of this session will be determined on Wednesday, August 28 following the selection by the Jury.

The names of the Authors of the Posters selected for oral presentation will be posted at the “Secretariat Desk” on Wednesday, August 28 at 4:00 pm.

Don’t forget to drop off your slides at the Slides Center.
Special Session 5

Thursday, August 29, 2013
4:30 – 6:15 pm
Room IX

Pharmacology of the esophagus beyond PPIs

Chairs: Anne Estrup Olesen (Aalborg) – Anne L. Krarup (Gothenburg)
Discussant: Carmelo Scarpignato (Parma)

- Can local formulations of drugs be effective on the esophageal mucosa? Anne Estrup Olesen (Aalborg)
- What is the effect of opioids on esophagus? Christina Brock (Aalborg)
- Can capsaicin reduce symptoms in the GI tract? J. Hammer (Vienna)
- Can antagonists on the receptor level (PX2 and TRPV1) be used to treat GORD? Anne L. Krarup (Gothenburg)
- Can new drugs such as Linaclotide be used in the treatment of esophageal pain? A.L. Blackshaw (London)
- How do we use Baclofen in treatment of GERD? F. Moawad (Bethesda)
- Is there a role for ketamine and other alternative treatments in esophageal disorders? A.M. Drewes (Aalborg)
- Can antidepressive drugs be used to treat functional esophageal pain? F. Moawad (Bethesda)
- Can the electroencephalographic “fingerprint” be used to predict the effect of pharmacological treatment? Anne Brokjær (Aalborg)
- Bile acids and drugs used to potentially dampen their harmful effects in esophageal diseases. Katerina Dvorak (Tucson)
Closing Session

Friday, August 30, 2013
6:30 – 7:00 pm
Room IV

Gleam of Hope

Chairs: Brice Gayet (Paris)
       Richard G.H. Cotton (Melbourne)
       George Triadafilopoulos (Stanford)

Adresses: Roger P. Tatum (Seattle)
          Melissa Upton (Seattle)
          Robert Giuli (Paris)
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General Information

The registration desk will open on 27th August and stay open all through the Congress from 7.30 am to 6.15 pm

Congress Venue
UNESCO’s Headquarters is located in the heart of Paris
125, Avenue de Suffren – 75007 Paris
(This is the only entrance to attend the congress).

Very important
Please note that, for security reasons, every participant is required to walk through a metal detector at the entrance. Therefore, it is recommended to arrive at least 40 minutes ahead of time.

Scientific Program
The scientific program is available on http://www.oeso.org/detailed-program

Slide Center
Opening hours are the following:
• August 26: 4.00 pm – 6.00 pm
• August 27: 7.00 am – 5.15 pm
• August 28: 7.00 am – 5.15 pm
• August 29: 7.00 am – 5.15 pm
• August 30: 7.00 am – 4.00 pm

It is essential for the smooth running of the sessions that all speakers hand in their Power Point presentations on time. Slides must therefore be handed into the Slide Center in advance, even the day before the session, but at the very latest one hour before.

The Official O.S. of the Congress is Microsoft Windows:
Speakers with Macintosh presentations should hand in their slides at least half a day before the Session.

Poster area (Hall Miro)
The poster exhibition will be open on Tuesday, August 27 from 8:30 am
• Poster set-up: Tuesday, August 27, from 8:30 am to 5:00 pm
• Poster removal must be completed on Friday August 30 before 6:30 pm

Poster and Video presentations
In addition to the traditional poster exhibit, a computer “stream presentation” will be shown in a special room: this consists of a computer display of up to 5 power point slides prepared by the author(s) to complete a poster with pertinent details or instructive commentaries. Throughout the Congress, the Poster Jury as well as the attendees, will have access, at any time, to the stream presentation of any poster on the program.
**General Information**

**Twelve Posters will be selected by the Jury**, to be given in an oral presentation (5 min. + 5 min. discussion) during a **Plenary Session** scheduled for **Thursday, August 29, 2013 (11:00 am – 12:45 pm)**. The authors of the chosen abstracts will be asked to bring the corresponding slides to the Slide Center on Thursday, August 29 before 9.00 am.

**Best Poster Award**
The Best Poster will be announced on **August 29** during the Congress and will be awarded by the OESO Organizing Committee during the **Gala Dinner on August 29 at the Grandes Ecuries de Chantilly**.

**Certificate of attendance**
All registered participants will receive a certificate of attendance at the end of the congress.

**Lunches**
On 28, 29 and 30 August light lunches will be served free of charge in Foyer Monaco to all registered participants wearing congress badges.

**Exhibition area**
Opening hours are the following:

- **August 27**: 8.30 am – 5.00 pm
- **August 28**: 8.30 am – 6.30 pm
- **August 29**: 8.30 am – 5.00 pm
- **August 30**: 8.30 am – 5.00 pm

**Official language**: English

**Getting to UNESCO**
UNESCO does not offer parking facilities. We therefore recommend using public transportation which functions very well.

- **By Metro**: The closest stations are: Ségur, Cambronne and Ecole Militaire.
- **By Bus**: Buses which pass near UNESCO are: N° 28, 80, 87 and 92.
- **By Taxis**: There is a taxi stand at the place de Fontenoy.
  - Taxi numbers: +33(0)1 45 66 00 00, +33(0)1 49 36 10 10, +33(0)1 47 34 00 00, 01 45 85 85 85
  - Taxi airport: 0825 16 66 66
  - The taxi from UNESCO to Paris-CDG will cost you approximately 60 to 80 Euros.

**Gala Dinner – 29 August at 8.30 pm**
Grand Ecuries de Chantilly – Rondpoint des Lions 60500 Chantilly
Evening dress preferred.
Buses will leave UNESCO at 7:15 pm sharp.
Social Program

Opening Ceremony

Tuesday, August 27, 2013
5:30 pm
AT THE UNESCO HEADQUARTERS
Gala Evening
Grandes Ecuries de Chantilly

Thursday, August 29, 2013
8.30 pm

Evening dress preferred
Buses will leave the UNESCO at 7:15 pm sharp

A glittering dinner, An equestrian show.

The OESO Jubilee

Poster Award

One presenter will be selected as “Poster Award Winner”, and will be honored at the Gala evening where he/she will be invited with an accompanying person.
Accompanying Persons Program

August 27-30, 2013

Two Fairly Short Strolls
(Registrations limited to 15 persons)

The Registration fee for Accompanying Persons includes also:

• The Opening Ceremony at the UNESCO Headquarters
  Tuesday, August 27, 2013 at 5.30 pm

• Paris Museum Pass
  which allows you to visit as many times as you like, and without having to queue, more than 60 museums and monuments in Paris. Your Museum Pass is valid for 2 consecutive days.

• Paris City tour – Two Fairly Short Strolls
  The «Grand Century» on the Ile Saint Louis
  In central Paris and just a stone’s throw from Notre Dame Cathedral is Saint Louis Island. Raised artificially from Seine-level islets in the 17th century, it is a very early example of planned urban development. It was built, for example, according to a strict, Manhattan-like grid plan: north-south streets meeting at right angles with the central east-west Rue St-Louis en l’Ile.

But it is far from a geometrical bore, boasting for instance many elegant 17th century hôtels particuliers (townhouses), which you can discover on this stroll. Just a few examples:
• At the Island’s “prow” stands the Centaur’s House. In the early 1900s it became a literary/artistic legend because a monthly salon welcomed there such notable creators as Pablo Picasso, Guillaume Apollinaire and Jean Giraudoux.
• The huge (for Paris) Hôtel Chenizot, was the Paris Archbishops’ residence in the 19th century.
• The Hôtel Lambert was once inhabited by Voltaire and later became a vibrant 19th century center of Polish culture frequented by such luminaries as Frederic Chopin (who played there for elegant parties) and Marie Curie (née Sklodowska), who lived nearby and was the first woman named Professor at the Sorbonne and winner of two Nobel Prizes.
• The Hôtel de Lauzun, home of 19th century poets Théophile Gautier and Charles Baudelaire, the latter sleeping there in “a sort of sculpted coffin.” More recently, the île was inhabited by French President Georges Pompidou and American novelist James (From Here to Eternity) Jones, whose homes you can see on this stroll.

> Date: Wednesday, August 28, 2013
  Departure: at 2:30 pm
  Meeting Point: Congress Venue UNESCO Headquarters:
  125 Avenue de Suffren, in front of “Tourist Information Desk” in the Foyer Monaco.

The Huchette Neighborhood
At the northern (bottom) end of the Latin Quarter is a neighborhood where tiny Medieval streets contrast with such 19th century urban projects as the Place Saint Michel and the broad and busy Rue Saint Jacques (the latter was originally the Roman north-south cardo maximus thoroughfare).

The stroll through this neighborhood begins on the Rue Gît le Coeur (Here Lies the Heart Street), a name whose real origin is not romantic but… gastronomic! (No, not indigestion, as you will discover.) Along the way, you can discover the town-house of Anne the Duchess of Etampes, mistress of Renaissance King François the First (whose salamander symbol still caps a street door) and known as “the most beautiful of the learned and the most learned of the beautiful”, and the site of a cabaret frequented by 19th century poet Charles Baudelaire and his “Black Venus” mistress Jeanne Duval.

In and around the Rue de La Huchette (“Little Hutch Street” named for a shop sign) are a number of very old and often humorous bas relief retailers’ symbols, designed to strike the imagination – and remain in the memory – of passer-by potential clients at a time when almost all Parisians were illiterate. One example, a pun which still makes people laugh: a swan craning its neck around a cross. The French words for “swan” and “sign” rhyme – so this shop was named (ha ha) “At the Sign of the Cross.”

At the end of Rue de La Huchette is the Caveau (“cave”) of the same name, a literally underground jazz club that helped bring Dixieland music to Paris in the 1950s.

After a look at other features, including what is probably the oldest tree in Paris (brought here around 1601 from… America), the stroll ends on Logging Street at one of the few remaining half-timbered houses in Paris, dating from the 16th or perhaps even 15th century.

> Date: Thursday, August 29, 2013
  Departure: at 9:30 am
  Meeting Point: Congress Venue UNESCO Headquarters:
  125 Avenue de Suffren in front of “Tourist Information Desk” in the Foyer Monaco
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