

The Day Surgery is starting to take off in Italy

**Day Surgery....I go in get surgery and go back home!
Prof. Campanelli explains:**

The public health can save money, the patients are happier because of the shorter waiting lists and less discomfort.

All this without reducing safety.

Day Surgery: What is it?

The increasing need of **improving medical care and the economy in medical services** has led to the adoption of new technical and organizational models that can help achieving both objectives.

The Day Surgery (daytime hospitalization or one night hospitalization at most) **descendant of the already well-established Day Hospital**, represents the latest most innovative project in terms of surgical activity.

Indeed, Ambulatory Surgery and Day Surgery represent a real revolution in the hospital system, in the medical expertise, in the productivity of the medical-administrative system and in the quality of patients' care.

All surgical specialties can include part of their surgical procedures in the Day Surgery system; it goes from General Surgery to ophthalmology, to pediatrics, to plastic surgery, to orthopedics and so on. In General Surgery, proctologic, phlebologic, mammary pathologies and especially abdominal wall hernias, are among those surgical procedures that can be often treated in the Day Surgery Unit.

Last frontier in General Surgery and other specialties is the **laparoscopic surgery**: gall bladder stones, appendix, uterine fibroids, ovarian cysts and in general all the benign pathologies can take advantage from this mini-invasive surgical procedure that in some cases require 24 hours hospitalization. Also very interesting are the possibilities for arthroscopy in the orthopedics field or for the operative endoscopy in the urology field.

What does a Day Surgery structure need?

For an organized facility with an independent operative surgical unit it is necessary:

A computerized admission area, an operating area, nursing and medication area, rooms for the doctors' visits with a filing area, patients' admission rooms.

In terms of technological and structural requirements are also necessary: independent generators, medical gas equipment inside the operating rooms and inside the patients' rooms (oxygen, etc.)

emergency equipment (cardiomonitor, defibrillator, ect.) refrigerators (for medicines and blood material) , heating, air conditioners and humidifiers.

In order to have an extra efficient unit it is also necessary: furniture, equipment, medicines, prosthesis and whatever is needed for the different therapies, for the diagnosis and monitoring during the pre-intra and post operative phase.

An occidental phenomenon

With the increasing of the people average age, with the change of pathologies and their evolution, as it is happening in industrialized countries, it is predictable that different health care services other than the ordinary hospitalization will increase, services such as home care or ambulatory surgery or day surgery, especially necessary to give priority to those patients who in more serious health conditions who needs to be hospitalized.

“Lombardia and Umbria were the first ones followed by Puglia, Veneto and Emilia Romagna to take in consideration the possibility of overnight stay, up to 24 hours hospitalization limit, without simply naming it “daily” like most of the other regions did”, said Giampiero Campanelli, Full Professor of Surgery at the **Insubria University in Varese**, who practices his profession in Milan, and who is also **Secretary General of the European Hernia Society**.

In fact, even a delicate and apparently critical surgical procedure like the removal of a breast tumor can be done in 24 hours, perhaps **without the necessity to stay in the hospital overnight**, probably helping the patient dealing with such an agonizing pathology like breast cancer.

Professor Campanelli President Elect of the Ambulatory and Day Surgery Society, is among the authors of the ministerial guidelines on day surgery and he is the founder and president of the Day Surgery Foundation Onlus. Author of nearly 200 publications, is among the top experts in surgery of the abdominal wall hernias, he is invited speaker of the American Hernia Society, of the American College of Surgeons and of the Asia Pacific Hernia Society.

www.ernia.net

CURRICULUM VIATAE PROFESSOR GIAMPIERO CAMPANELLI (SHORT VERSION)

Giampiero Campanelli, Roma 3 August 1960, enrolled at the first years of the course of degree in Medicine and Surgery, at the University of Naples in the year 1979/80. Graduate at 24 years during the VI° years of course the 24 July 1985, with 110/110 honours, and noteworthy from the Examination Commission. Specialist the 6 November 1999 with a dissertation about «Treatment of hepatic metastasis from colon-rectum» with 70/70 and honours, University of Milan.

Associate Professor of Surgery - General Surgery - University of Milan since 1 November 2002.

Professor at the Postgraduate School in General Surgery at the University for the Studies of Milan.

Full Professor of Surgery – University of Study of Insubria – Varese since 12 July 2006

Chief of General Surgery II - Operative Unit of Day and week Surgery department of surgical Science University of Insubria – Multimedical Hospital – Castellanza (VA).

Member of the Italian Society of Surgery.

General Secretary of Italian Society of Ambulatory Surgery and Day-Surgery (SICADS) . (1995-), President Elect from Nov. 2008.

Past President of Italian Society of Young Surgeons (1996-2000)

Assistant Secretary of International Association of Surgeons and Gastroenterologists (2001-2003).

General Secretary of European Hernia Society. (2003-)

Member of the Board of the Italian Society Pathology and Gastroenterology (S.I.P.A.D). (2003-)

Member of the Ministerial Commission for the Day Surgery.

Member of the Regional Commission for the Day Surgery.

Representative Member of the Italian Society of Surgery by the Ministerial Commission of the Agency for the Regional Sanitary Services, in the area of Italian Association for Day-surgery, on the project : valuation of the indications for organizing day-surgery procedures.

April 1993, Professor of Surgery honoris causa at the University of Costanza (Romania).

Latest Congresses as Invited Speaker

267) Relatore: "Classification of Inguinal & Ventral Hernia".

Sessione: "Anatomy and Classification".

3rd International Congress of the Asia-Pacific Hernia Society

Singapore 25-27 Ottobre, 2007.

268) Relatore: "Sutureless open hernia repair".

Sessione: Open Inguinal Hernia Repair.

3rd International Congress of the Asia-Pacific Hernia Society

Singapore 25-27 Ottobre, 2007.

269) Moderatore: "Open Ventral Hernia Repair: Techniques".

3rd International Congress of the Asia-Pacific Hernia Society

Singapore 25-27 Ottobre, 2007.

270) Relatore : "Incisional Hernia with real loss of substance".

Sessione: "Incisional Hernia".

International Meeting "Biomaterials in Abdominal Wall Surgery"

Madrid 22-24 November 2007

271) Relatore: "Recurrent Hiatal Hernia in Patient with a serious Pulmonary situation"

Sessione: "Surgery of Hiatal Hernia".

International Meeting "Biomaterials in Abdominal Wall Surgery"

Madrid 22-24 November 2007

275) Relatore: "European Classification of Inguinal Hernia".

Sessione: "History, Anatomy, Socieconomics & Politics".

AHS Hernia Update 2008

Scottsdale, AZ 12-16 Marzo 2008.

276) Moderatore: "Inguino-Femoral and Pelvic Hernia".

AHS Hernia Update 2008 AHS

Scottsdale, AZ 12-16 Marzo 2008.

277) Relatore: "Pre-peritoneal sutureless Polysoft Repair".

Sessione: "Inguinal Hernia Repairs-How I do it".

AHS Hernia Update 2008

Scottsdale, AZ 12-16 Marzo 2008.

278) Relatore: "Mesh fixation in open hernia repair".

Sessione "Improving the standard in abdominal hernia repair".

Peer to Peer Meeting

Istanbul 19 Aprile 2008.

281) Relatore "Technique and findings during open repair of Sportmen hernias".

Sessione: "Sportmen Hernia: Laparoscopic vs open".

EHS 30 Congress.

Siviglia, 7-10 Maggio 2008.

- 282) Relatore “Non surgical and surgical management of pain after inguinal hernia repair: Therapeutic algorithm”.
 Sessione: “Pain after inguinal hernia repair”.
 EHS 30 Congress
 Siviglia, 7-10 Maggio 2008.
- 283) Chairman “Atraumatic mesh fixation as a challenge”. Baxter Symposium.
 Sessione: Tisseel as versatile mesh fixation technique in hernia repair.
 EHS 30 Congress
 Siviglia, 7-10 Maggio 2008.
- 284) Moderatore “How to fix a mesh in open and laparoscopic surgery”.
 EHS 30 Congress
 Siviglia, 7-10 Maggio 2008.
- 285) Relatore “Classification”.
 Sessione: “European guidelines for treatment of Inguinal Hernia: Conclusion and Recommendations”.
 EHS 30 Congress
 Siviglia, 7-10 Maggio 2008.
- 286) Chairman “Pre-peritoneal repair: several approaches for an improved patient confort”.
 Bard Symposium.
 EHS 30 Congress
 Siviglia, 7-10 Maggio 2008.
- 287) Realtore “Combined general and plastic surgical approach of large ventral hernia: the role of abdominoplasty”.
 Sessione: Techniques for ventral hernias.
 EHS 30 Congress
 Siviglia, 7-10 Maggio 2008.
- 292) “Classification of groin hernia”
 Biennial International Congress of the Australasian Hernia Society
 Thredbo NSW Australia, 11-13 Luglio 2008.
- 293) Chairman “Complications: Open Inguinal Hernia”
 Biennial International Congress of the Australasian Hernia Society
 Thredbo NSW Australia, 11-13 Luglio 2008.
- 296) Moderatore “EHS classification for ventral and incisional hernias”
 EHS Board Meeting “Consensus meeting on classification of ventral and incisional hernias”
 Gent Belgio, 2-4 Ottobre 2008.
- 306) Relatore “Local Anaesthesia”
 Sessione: Anaesthesia: Local vs. regional/general
 Hernia Rotterdam Interactive Congress on hernia (RICH) 2008
 Rotterdam, 14 Novembre 2008.
- 307) Relatore “The newest trends in hernia surgery and the EHS classification”
 Sessione: Plenary Session
 3rd Slovenian hernia Symposium and Workshop with international participation
 Gradec – Slovenia, 20-22 Novembre 2008.
- 308) Moderatore “Free Topics”
 3rd Slovenian hernia Symposium and Workshop with international participation
 Gradec – Slovenia, 20-22 Novembre 2008.
- 309) Member of Workshop: “Ernioplastica inguinale secondo Trabucco”
 3rd Slovenian hernia Symposium and Workshop with international participation
 Gradec – Slovenia, 20-22 Novembre 2008.

American hernia Society 2007 gave him high recognition for his scientific and surgical work.

Member of Workshop: Guidelines Treatment Inguinal Hernia Repair in Adults. Amsterdam April 2007

Editorial Board “Hernia”

Editorial Board “Hepatogastroenterology”

Reviewer “Medical Science Monitor”

Reviewer “World Journal of Emergency Surgery”

Consultant Clinical Advisors, LLC New York.

Consultant Cline Davis & Mann New York.

Member of Advisory Board on the Trial International “LAPSIS” 2004

Principal Investigator on the Trial International “TI.ME.LI ” 2004

Over 4500 surgical procedure performed in General Surgery.

Authors of 227 publications