

Dr. Sebastien Gilbert: more evidence is need for the promotion of uniportal VATS in North America

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The 5th Asian Single Port VATS Symposium (ASPVS) was held with the great support from the Shanghai Pulmonary Hospital, in Shanghai, China from March 17 to March 18, 2017. The number of the international speakers invited to this meeting reached up to 50, and all were together to discuss the latest update on the single port VATS.

International meetings are always great chances for us to step up strategic dialogues and consultations to deepen understanding, expend common ground and promote cooperation with our editorial board members, guest-editors, authors, reviewers, readers, speakers and attendees. During the meeting, we were able to conduct brief interviews with some of the renowned speakers, to share their perspectives on hot topics in specific fields.

Here we were honored to have an interview with Dr. Sebastien Gilbert (*Figure 1*), Chief of Division of Thoracic Surgery, Associate Professor of Surgery, Clinician Investigator of Ottawa Hospital Research Institute, Publications.

Interview with Dr. Sebastien Gilbert

In the symposium, Dr. Sebastien Gilbert addressed a speech on the current status of uniportal VATS in North America which mainly presented the results of a survey of North American thoracic surgeons to further study the future possibility of this approach. The survey was carried out amongst General Thoracic Surgical Club members and Dr. Gilbert's professional connections. Ninety-nine surgeons responded. Unsurprisingly, it turned out that only very few surgeons used this approach, moreover, some surgeons expressed concerns with regard to increased intraoperative risks related to the approach (e.g., control of bleeding). The majority of surgeons stated that they would like to see more comparative evidence pitting uniportal VATS to multiport VATS in order to convince themselves to make a change to their practice. The responders also thought that



Figure 1 Dr. Sebastien Gilbert.

more focused conferences with simulation/skills labs and observation of life cases were needed.

When asked to give some advice for the young surgeons who would perform the uniportal VATS in the future, Dr. Gilbert insisted that young surgeons should be open-minded to the new approach, attend focused conferences on the topic, and seek out experts for advice and possible proctorship opportunities. Since it's first time for Dr. Gilbert to attend ASPVS, he thought it was a highly specialized conference in thoracic surgery and felt pleased to make contacts and exchange ideas with recognized experts or progressive thinkers from all over the world.

In the end of the interview, Dr. Gilbert told us what impressed him most were the quality of the international speakers invited, how it was organized and the excellent presentations and surgical videos. What's more, he also shared with us the story why he became a surgeon.

Interview questions

- (I) Would you like to introduce yourself briefly?
- (II) In this meeting you had an excellent presentation on “current status of uniportal VATS in North America”. Could you like to share some main points to our readers?
- (III) When did you perform your first uniportal VATS, and how was that?
- (IV) Do you have any advice for the younger surgeons who perform the uniportal VATS?
- (V) It's your first time to attend the ASPVS, what you do think was the highlight of the meeting?

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- (VI) Why did you become a surgeon?

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Footnote

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