

**“CAROL DAVILA” UNIVERSITY OF MEDICINE AND
PHARMACY, BUCHAREST, ROMANIA**

DOCTORAL SCHOOL

DOMAIN OF STUDY MEDICINE

**ONCOLOGICAL SURGERY AND PALLIATIVE
CARE, FOR A BETTER QUALITY OF LIFE OF
THE ONCOLOGICAL PATIENT**

**ABSTRACT OF THE HABILITATION
THESIS**

CANDIDATE:

Assoc. Prof. Dr. Simion Laurențiu, M.D., Ph.D.

“CAROL DAVILA” UNIVERSITY OF MEDICINE AND PHARMACY, BUCHAREST, ROMANIA

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Abstract

The thesis I present briefly in the following lines has an extremely precise purpose, namely to convince that the work submitted so far by the undersigned is both a proof of ability and a starting point for the next stage of my career, that of guiding doctoral theses. The effort to synthesize over a decade of activity in a thesis structured logically on about 100 pages, a thesis that is at the same time convincing, is condensed in this short presentation.

The first chapter of the thesis, the most consistent in volume, addresses the scientific achievements, recorded in the period after the defence of the doctoral thesis. An objective in compiling this chapter was to highlight the main concerns, related to cancer surgery, on the one hand and palliative care, on the other hand, the important link of these two areas being the issues related to the quality of life for the cancer patient. In order to achieve this first objective, selecting from the articles published in the last decade, I outlined two subfields related to oncological surgery, namely breast and colorectal cancer, as well as the most relevant aspects related to palliative care. As I intended, the quality of life of the cancer patient is present as a concern in all these published articles, whether I refer to the prophylactic or curative treatment of cancer, or palliative care, whose importance increases progressively as the cancer worsens.

A first subchapter is dedicated to the principles of modern treatment in oncology, with a double objective: curative treatment and quality of life for the patient. General notions related to the quality of medical services, monitoring the quality of the medical act, as well as the concept of integrated quality management, adapted to the health field, are presented in this subchapter.

Then the subchapter dedicated to the integration of palliative care in complex oncological treatment contains a concise presentation of palliation, the need for tumour board in assessing the confirmed cancer patient and the evolution over time of palliative care needs, as cancer progresses, emphasizing of the holistic approach that only palliative medicine takes.

A short subchapter, dedicated to the application of management principles in oncological surgery, shows how the concept of quality, initially developed for industrial fields, can be successfully adapted and applied in medical services: total quality management.

The subchapter dedicated to surgical treatment in breast cancer is composed of 3 parts, dedicated both to the current surgical treatment of breast cancer and to ensuring a better quality of life for patients:

1. Breast oncology surgery - current approach.
2. The importance of preserving the sensitive nerves during axillary lymphadenectomy.

3. Postmastectomy breast reconstruction as the last step of a curative oncological treatment, for the addition of quality of life: principles and results.

A consistent subchapter, structured in 5 parts, is then addressed to colorectal cancer, from the perspective of its prophylaxis, curative treatment (without neglecting the quality of life of operated patients) or how palliative surgery can be useful in advanced stages of the disease:

1. Prophylaxis of colorectal cancer by endoscopic polypectomy.
2. Therapeutic approach to difficult colorectal polyps.
3. Polyposis and colorectal cancer.
4. Low anterior rectal resection - in terms of the patient's quality of life.
5. Management of intestinal occlusion in advanced abdominal neoplasms.

Palliative care for cancer patients is the last subchapter of scientific achievements, consisting of two parts:

1. Pain management in cancer patients with advanced disease. The use of methadone as a first-line opioid in moderate and severe pain.
2. Nutrition in oncology and palliation, between desideratum and reality.

A brief observation related to these 10 published articles, which compose the part dedicated to scientific achievements, must be made here: 6 of them have been published in *Chirurgia* journal, which emphasizes the affiliation of the undersigned to the Romanian surgical school.

The second chapter of the thesis is focused on professional and academic achievements. The evolution of the professional career is presented in summary, followed by a short description of the doctoral thesis, which represents the landmark from which begins the evaluation of the entire activity that is the subject of this habilitation thesis.

The master's program in health management, which I followed after defending the doctoral thesis, is also presented in a subchapter, this being in fact the starting point for a whole series of subsequent activities in the field of quality in health.

The subchapter dedicated to research projects summarizes each of the 4 important projects, also carried out after the defence of the doctoral thesis:

1. „Overcoming disparities in access to quality basic palliative care in the community”.
2. „Developing and piloting an integrated palliative care curriculum for oncology residents in Romania”.
3. „Improving the services provided in the field of haematology and paediatric oncology in Romania, through the acquisition of goods, services and specialized works”.
4. „Support and training for a modern, anticipatory and preventive management of human resources in enterprises with activity in the field of health – SANform”.

The second chapter of the thesis, dedicated to professional and academic achievements, ends with the subchapter allocated to the directions of consolidation of teaching activity, meaning involvement as a lecturer in the national training program for the certificate of complementary studies in cancer surgery, respectively as a lecturer in the national preparation program for the certificate of complementary studies in palliative care.

The third and last chapter of the thesis refers to the future, so the fact that it is the shortest of the 3 big chapters should not surprise. Career development plans, professionally, scientifically and academically, with the two components:

1. scientific activity and its transposition into publications,
2. professional and academic activity,

represents a projection towards the future. After a careful analysis of the activity of the last decade, completed with a snapshot of the present, this final chapter of the thesis opens a door to the future, where white pages are waiting to be written in the book of life.

I hope that everything I have learned over a quarter of a century of my career will help me to promote the values of teamwork, to continue to gain the support of colleagues, to succeed in motivating them and to help them develop professionally, to work together with pleasure.

I want to be able to transfer to the students, residents, trainees and future PhD students the lessons I have learned so far, based on open communication with them, respect, collaboration and mutual support. The success of this approach I am convinced will bring me a satisfaction comparable to that which, fortunately for me, I have always felt, as a surgeon, in the operating room!