A Sublime Innovator

Professor Steven D. Wexner

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TEVE WEXNER, Director of the Digestive Disease Center at Cleveland Clinic Florida and Chairman of the Department of Colorectal Surgery, is famed as the first surgeon in North America to popularise the colonic J-pouch for rectal cancer patients, and the ileal J-pouch for ulcerative colitis and familial adenomatous polyposis patients. Furthermore, his time spent improving surgical techniques has resulted in the establishment of the double-stapling technique, the gold standard for J-pouches, preventing patients from requiring permanent ileostomy. We had the pleasure of meeting and interviewing Prof Wexner at this year's International Colorectal Disease Symposium where we learned about his reasons for hosting the meeting in Jerusalem and the work he performs.

INTRODUCTION

When the International Colorectal Disease Symposium first launched in the 1990s, Prof Wexner broke the established formula of inviting only faculty from specific countries: specifically the USA, UK, Australia, and Scandinavia, where English is a first language or widely spoken. Having perceived the vast potential to learn from an extended international base, invitations were extended to individuals in various parts of the world to be included in the faculty. As a result of Prof Wexner's inclusivity, these colleagues abroad felt galvanised to attend the symposium bestowing the meeting a reputation where one feels respected and welcomed. When questioned why these meetings have gained such popularity, he stated that by extending his invitation out for people to participate a sense of collegiality was established, a necessity for any successful event.

A CHANGE IN SCENERY

For the past 30 years, the International Colorectal Disease Symposium was hosted by the Department of Colorectal Surgery at Cleveland Clinic Florida. In 2012, the Department of Colorectal Surgery at

the Cleveland Clinic Ohio, who hosted the Rupert B. Turnbull MD Symposium, joined to make it a collective meeting moving forward. Following 2019's symposium, a joint decision was made to reconsider the structure and future of the event. Prof Wexner had been in Jerusalem that year as a guest of the Israeli Surgical Association. After talking to the many esteemed Israeli alumni whom he had trained in the past, the decision was made to work with the Israeli Surgical Association and the Israel Society of Colon and Rectal Surgery to host and sponsor a Cleveland Clinic Florida Israeli alumni international colorectal disease meeting. When we asked Prof Wexner what he regarded as the highlight of the meeting, he revealed that even though robotics was the overarching theme of the congress, there was a heavy emphasis on cost-effective robotics and how to optimise patient care. As a big advocate of providing education that doesn't require expensive equipment, he was delighted to see that the congress content was translatable for lower- and middle-income countries. He also elucidated that another reason for picking Israel as the venue was that many individuals in that region of the world, who require education, are unable to travel to America or western Europe where the majority of

congresses are held. Therefore, it was pivotal to make it accessible to those countries. Additionally, Prof Wexner had raised funds from friends which were then converted to scholarships enabling more individuals to have access, showcasing his inclusivity and passion for making education available to all. Next year's International Colorectal Disease Symposium will take place in Florida in conjunction with Cleveland Clinic Ohio as usual, but because of the phenomenal success of the Israeli event it has been decided that on even numbered years the symposium will be held elsewhere in the world. Testament to the massive footprint of the Cleveland Clinic, over half a dozen cities have already offered to accommodate future meetings.

NATIONAL ACCREDITATION PROGRAM FOR RECTAL CANCER (NAPRC)

Prof Wexner is one of the co-founders of the National Accreditation Program for Rectal Cancer (NAPRC), which was founded to tackle the differences between patient outcomes in the USA and Europe. The outcomes for rectal cancer have been proven to depend on how and in which setting the operation is performed, by whom, and where. Furthermore, evidence shows that surgeons who perform numerous rectal cancer surgeries are able to get clear margins and will have better patient outcomes (lower rates of recurrence and higher rate of survival) compared to surgeons who do it infrequently, alone, and without a multidisciplinary team. For years, outcomes for rectal cancer patients in Europe have been significantly better than for those in the USA attributable to their use of multidisciplinary teams to make treatment decisions. During his run as president-elect of the American Society of Colorectal Surgeons (ASCRS), Prof Wexner was prompted by the president at the time to establish similar outcomes in the country, something that had been tried previously by one of his mentors yet failed. To avoid similar outcomes, Prof Wexner approached the challenge with a different tactic and created a working group that spent 4 years gathering data from the National Cancer

Database (NCDB) which was then collated into literature illuminating that outcomes in the USA were tremendously variable and far inferior to those in Europe. As a member of the Commision on Cancer (CoC) of the American College of Surgeons he presented the evidence and a proposal to create the NAPRC. This was followed by 3 years of creating a standards manual, beta testing at six different sites, and revising the manual. In 2017, the NAPRC started accepting accreditation application. Accreditation requires previous CoC accreditation, an on-site visit, and records demonstrating that NAPRC standards have been in place for at least 1 year. As of now, 20 programmes have been accredited by the NAPRC including the Cleveland Clinic Rectal Cancer Program, and the Cleveland Clinic Weston Rectal Cancer Program, and 60 more have requested accreditation. These efforts will surely lead to improved and uniform patient outcomes across the USA.

IT ALL COMES DOWN TO THE PATIENTS

As a student of David G. Jagelman, one of the world's most respected colorectal surgeons and previous chief of surgery at Cleveland Clinic Florida, Prof Wexner inherited his love for always being there for patients. According to Prof Wexner, "It all comes down to patients." Taking care of them is one of his greatest pleasures. The gratification that comes with the job of saving or improving someone's life and seeing patients ultimately do better is a driving force to continue improving. Furthermore, the teaching aspect of educating others to obtain similar outcomes and experience the same gratification: teaching them how to handle suboptimal/adverse outcomes and minimise the damage to patients as well as the surgeons is one of his main passions. When asked what are some of the biggest challenges facing researchers and clinicians who are just starting in the field of colorectal disease, he responded that these are interwoven and include burnout, lack of job satisfaction, and work hours. His advice was to try and remember why you are doing this, which is to do the best you can for every single patient every single day. Importantly, as stated by the internationally distinguished surgeon: "Don't get discouraged!"

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