



Co-convenors: Dr Susanne Hass (Denmark) and Dr Peter Wysocki (Australia)

Venue: Adina Apartment Hotel - Captain Room, Amerika Pl. 7, 2100 Copenhagen, DENMARK

Details: 2 December 2023 (9am – 5pm)

Cost: EUR 150 / US 160

9AM : Welcome

Introduction (Wysocki)
 Patient perspective (Boyd)
 Patient decision-making (Lee)
 Patient Reported Outcomes (Haas)
 Patient preparation (Öndeş)
 Merged data analysis (TBA)
 Comparison of Guidelines (Ojo)
 Umbilical Pilonidal Sinus (Isik)

10:50AM : How I Do It session

modified Lord-Millar (Andersson)
 Video-assisted ablation (Milone)
 Cleft Lift (Immerman)
 Modified Limberg Flap (Kaplan)
 Phenolization (Kayaalp)
 Edge of anus wounds (Immerman)
 Discussion

1:20PM : Selected Topics

Pilonidal treatment algorithm (Senapati)
 Flap overview (Wysocki)
 The Data Mounts! (Shrager)
 Fat cell transplantation (Haas)
 Paediatric Pilonidal Sinus (Rosen)
 Hidradenitis Suppurativa (Jemec)
 Pilonidal Sinus pathology (Kanat)
 Pilonidal Sinus carcinoma (Safadi)

3:30PM : Updates

Pilonidal classification (Tezel)
 ORTEM trial (Doherty)
 PITSTOP (Brown)

Free paper presentations
 Conclusion and wrap up

RACS CPD / CME Points in Maintenance of Knowledge and Skills – TBA

Register online using PayPal <http://www.pilonidal.com.au/conferences>

Email Credit Card Authorization to office@pilonidal.com.au

PRE-CONFERENCE DINNER

Date: Friday 1st December 2023.

Venue: [Sopromenaden](#) - traditional, Danish restaurant

Lake promenade, [Sortedam Dossering 103, DK-2100 Copenhagen](#)



Payment: USD 65 / EURO 65 / 470dkk / AUD105



Fixed menu (no changes are possible):

Starter: lobster soup with sour cream and chives

Main course: Whole roasted veal fillet with small fried potatoes, seasonal vegetables and veal sauce

Dessert: Chocolate tart with ice cream

Drink: one beer or wine or soft drink

RSVP: [19th November 2023](#)



Credit Card Authorization

International Pilonidal Society

ABN: 8212 4337 493

APPLICANT'S INFORMATION

LAST NAME

FIRST NAME

MIDDLE NAME:

COMPANY NAME:

E-MAIL ADDRESS:

CREDIT CARD INFORMATION

NAME AS IT APPEARS ON CREDIT CARD:

STREET ADDRESS:

APT / UNIT / P.O. BOX

CITY

STATE

ZIP

TOTAL AMOUNT DUE:

EUR 150 / AUD 235 / USD 160

PAYMENT AUTHORIZATION

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