



Curriculum Vitae Europass

Personal Information

First name(s) / Surname(s)

Gerardo Mangiante

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Nationality

Italy

Date of birth

18/03/52

Sex

male

Occupation

Abdominal surgery, surgical nutrition

Work experience

Researcher University of Verona

Date

In charge as responsible of Surgical Nutrition from 2010

Occupation or position held

University Researcher

Main activities and responsibilities

Name and address of employer

Verona University

Type of business or sector

Abdominal Surgery

Education and training

Specialist: General Surgery (1981)

Endocrine Surgery (1984)

Physiopathology and Therapy of Pain (1989)

Date

1981: Portal hypertension ; experience on Warren" operation (thesis)

1984 : Pancreatic neuroendocrine tumors (thesis)

1989 : Autoptic reasearches on splancnic nerves and their influence on pain onset of pancreatic carcinoma d surgical resolution (thesis)

Title of qualification awarded

General surgery specialist
Endocrine Surgery specialist
Physiopathology and Therapy of Pain specialist
Autoptic experience demonstrated exactly location of splachnic ganglia and surgical default of their eradication. Classic description of max anatomist, eg Testut, were wrong.

Personal experience and researches on surgical nutrition both artificial and natural. I settled original and new approaches to nutrition on surgical patients and treatment of many surgical diseases, especially chronic on colon and acute on pancreas. Today, adherence to fast track surgery concepts (these I knew on 2000 directly from Kehlet) can reduce hospital of patients also on major surgery such as esophageal resection, without damage on patients outcome. We obtained as well reduction of hospital infection by hospital stay reduction and enteral nutrition. Today, appendectomy hospitalization is one day, and for video assisted cholecistectomy, whilst esophagectomy got 7 day of hospital stay. 4 days for gastric resections and 7 days for esophageal resections, these are great results for abdominal and thoracic surgery with enormous sparing of social money.

Administration of fibers to colonic resection improves the strenght of anastomoses and reduce hospital stay of human patients, rat anastomoses are without leakage at 300 mm/ Hg !

Our results justify fast dimission of patients submitted to colonic resections and, mainly, without postsurgical complications.

Main professional competency

Liver and Pancreatic Surgery, Surgical Nutrition, Fast Track Surgery

Name and type of organisation providing education and training

2000, July Leicester, UK attendance to Surgery Ward for Nutrition on Surgery
2007 from April to the end of May Attendance to King's College, London for liver surgery and liver trasplants
2012 : Washington attendance to AWR and presentation of 2 posters

Level in national or international classification

Personal skills and competences

Mother tongue(s)

Italian

Other language(s)

Self-assessment
European level ()*

English
Lingua

Understanding		Speaking		Writing					
Listening		Reading		Spoken interaction		Listening		Reading	
	good		good		good		good		good

(*) [Quadro comune europeo di riferimento per le lingue](#)

Social skills and competences

Organisational skills and competences	<p>1994: main secretary International Congress on Hepato-bilio-pancreatic Epato-Bilio-Pancreatic Surgery September 1994</p> <p>Meetings for Verona University on Borgo Roma Hospital 1997 Surgical nutrition S Bengmark 1999, December: Klatksyn tumor, Surgery P.Neuhaus 1999: December S. Bengmark Surgical nutrition 2000 ; June Liver Metastases Metastasi epatiche H.Bismuth 2003 : June Fast Track Surgery O.Ljunqvist, 2005 : Severe Pancreatitis (by C.Bassi, C.Dervenis, R.Andersson,C. Luzzani C, G.Mangiante)</p> <p>Meetings in Borgo Trento Hospital from 2010 8 Meetings on Surgical Nutrition 2 Meetings on Advaced Dressings 2 Meetings on Repair of Abdominal Hernias 1: Repair on Hiatal Hernia 2 Weekly Meetings for Upper Digestive Surgery, on Processing New Protocols on Diagnosis and Therapeutic Pathways on Oncologic Diseases All with high burden of credits In charge for Surgical Nutrition on Esophageal and Gastric Surgery and for Up-to-date on Surgical Reseachers from 2010 Institute of Gastric and Esophageal Surgery, University of Verona</p>
Technical skills and competences	Epato-biliary-pancreatic surgery Surgical nutrition, Incisional hernias repair, abdominal septic syndromes
Computer skills and competences	
Artisitic skills and competences	Drawnings on Surgical and Anatomical Books
Other skills and competences	
Driving licence(s)	B
Additional information	<p>Nicoli N, Casaril A, Abu Hilal M, Mangiante G, Marchiori L, Ciola M, Invernizzi L, Campagnaro T, Mansueto Gc A case of rapid intrahepatic dissemination of hepatocellular carcinoma after radiofrequency thermal ablation.eto G. Am J Surg. 2004 Aug;188(2):165-7</p> <p>Bassi C, Butturini G, Salvia R, Mangiante G, Falconi M, Pederzoli P: Aspects on Antibiotics on Acute Pancreatitis: Time for Reconsiderations ? : in Controversies in Pancreatology, 313 – 321. Ed-Permert J, Herrington M, Adrian T., Carlsson Ed, Stockholm, 2003</p> <p>G.Mangiante, G. Colucci. Bengmark’s self-propelling nose-jejunal tube: a useful device for uninterrupted enteral nutrition. 98-100, 116 Deutche Gesellschaft fur Chirurgie, Monaco, 1999</p> <p>GL Mangiante, Sterzi E, Gelio S, de Manzoni G. Useful Administration of Lipid Mixture to Liver Resected and Pancreatitis Patiens, 128: PP270, ESPEN Congress, Nice, 2010</p> <p>G. Mangiante, V. Passeri, G. deManzoni : Experience on Complex Incisional Hernia Treatment in Septic Patients. Hernia (Abs Book)S200-201,Milano 2015</p>

Attachments |

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"Code concerning the protection of personal data (optional)"

Signature |