

# Professional Master's Degree

## Digestive System Oncology

Endorsed by:





## Professional Master's Degree Digestive System Oncology

- » Modality: online
- » Duration: 12 months
- » Certificate: TECH Technological University
- » Dedication: 16h/week
- » Schedule: at your own pace
- » Exams: online

Website: [www.techtute.com/us/medicine/professional-master-degree/master-digestive-system-oncology](http://www.techtute.com/us/medicine/professional-master-degree/master-digestive-system-oncology)

# Index

01

Introduction

---

*p. 4*

02

Objectives

---

*p. 8*

03

Skills

---

*p. 14*

04

Course Management

---

*p. 18*

05

Structure and Content

---

*p. 30*

06

Methodology

---

*p. 36*

07

Certificate

---

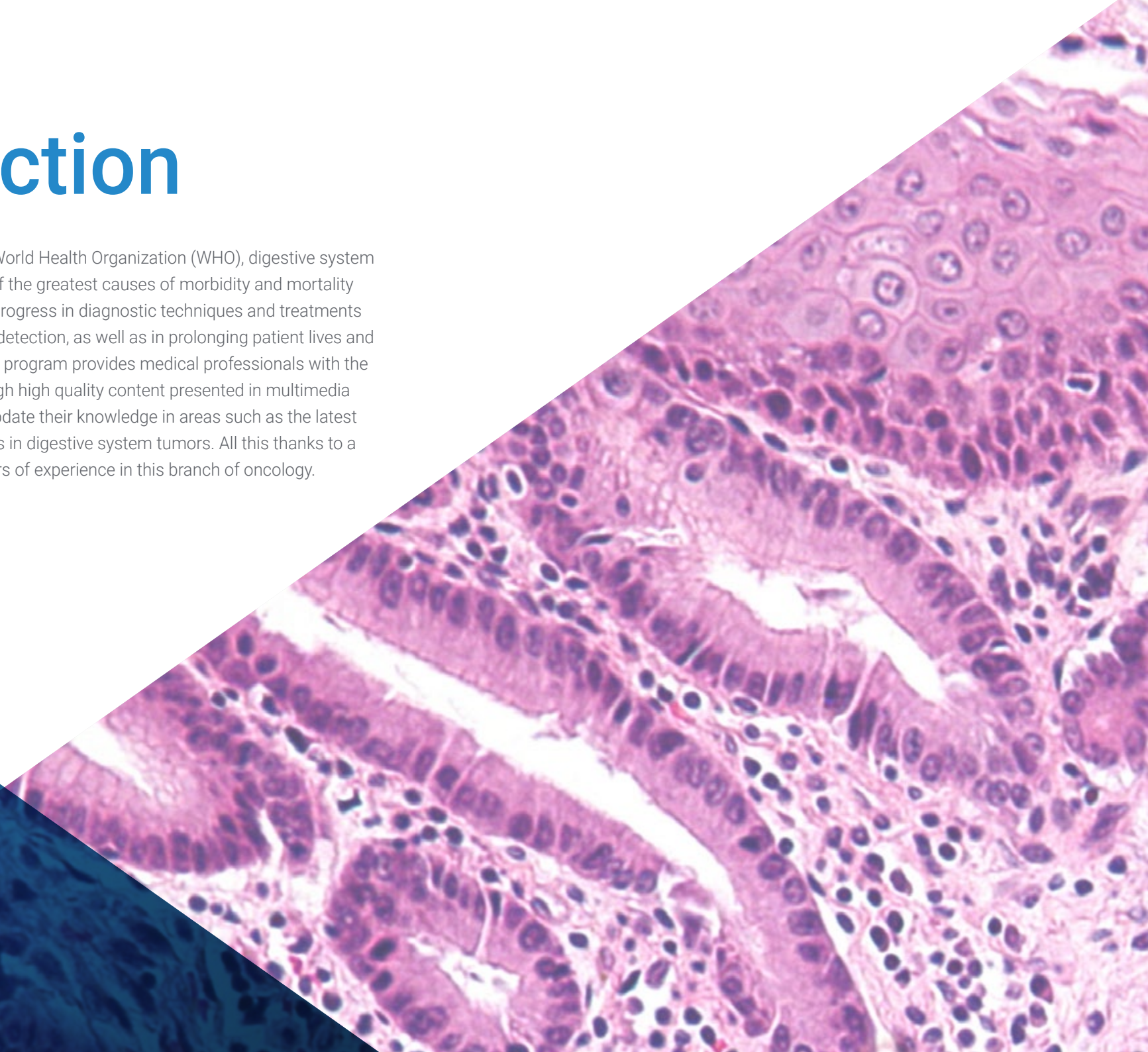
*p. 44*

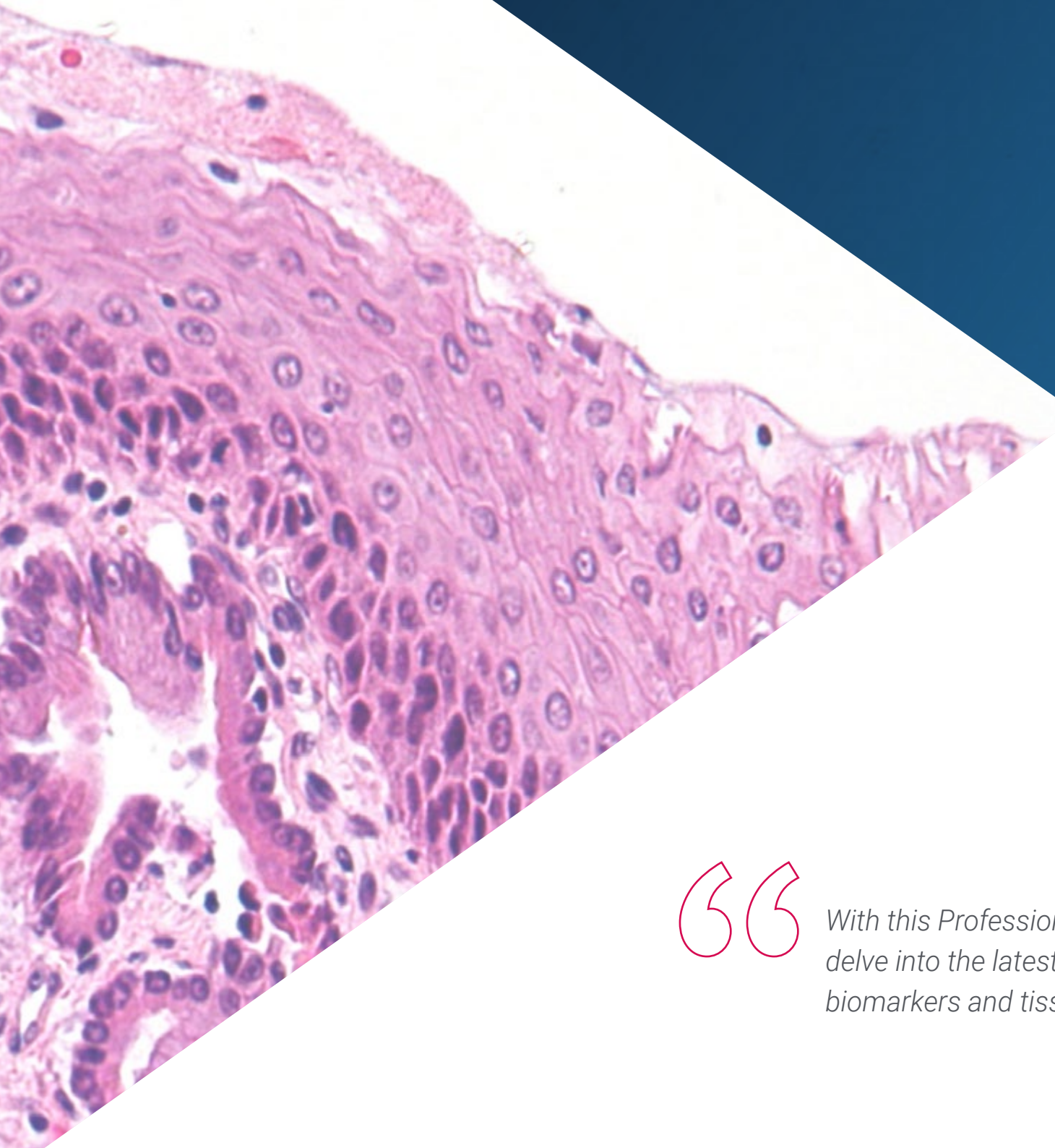


# 01

# Introduction

According to data provided by the World Health Organization (WHO), digestive system tumors continue to represent one of the greatest causes of morbidity and mortality in the world. However, continuous progress in diagnostic techniques and treatments has led to an improvement in early detection, as well as in prolonging patient lives and general wellbeing. This 100% online program provides medical professionals with the latest knowledge in the field. Through high quality content presented in multimedia format, physicians will be able to update their knowledge in areas such as the latest diagnostic and therapeutic methods in digestive system tumors. All this thanks to a specialized teaching team with years of experience in this branch of oncology.





“

*With this Professional Master's Degree you will delve into the latest scientific findings in circulating biomarkers and tissue molecular markers”*



The life expectancy of patients with digestive system tumors has increased considerably in recent years. But where this improvement has been most noticeable is in colon tumors. Early detection, more efficient surgery and more precise treatment have been the main reasons for this progress. However, the complexity involved in managing these tumors is a challenge for medical professionals, who must keep pace with advances in surgical techniques, molecular biology and radiotherapy therapies.

This Professional Master's Degree has been designed in response to the need for doctors to keep up to date, and is taught by a multidisciplinary teaching staff with experience in dealing with oncology patients. The program follows a syllabus that takes a theoretical-practical approach to the knowledge of new standards, the introduction of new treatments and the ability to recognize cases where it is necessary to cooperate with more complex care centers.

A program where students have at their disposal innovative educational material consisting of video summaries, detailed videos, interactive summaries so they can study molecular biology and translational oncology, digestive tract tumors, pancreatic cancer, biliary tract tumors and hepatocarcinoma in depth over the course of 12 months. What is more, the program includes practical case simulations that will prove helpful to professionals who wish to become aware of real situations and how to intervene based on the experience and knowledge of our teaching team.

TECH offers an excellent opportunity for specialists who seek to obtain quality education compatible with their work and personal responsibilities. Students only need an electronic device (computer, tablet or cell phone) to access the entire syllabus on the virtual platform. There is no need for attendance or sessions with fixed schedules, physicians can connect whenever it suits them. This flexibility is provided so that students can update their knowledge with the most agile and convenient methodology.

This **Professional Master's Degree in Digestive System Oncology** contains the most complete and up-to-date scientific program on the market. The most important features include:

- ◆ Diagnostic-therapeutic developments in the assessment, diagnosis, and intervention in Digestive System Oncology
- ◆ Contains practical exercises where the self-evaluation process can be carried out to improve learning
- ◆ Iconography of clinical and diagnostic imaging tests
- ◆ An algorithm-based interactive learning system for decision-making in the clinical situations presented throughout the course
- ◆ With special emphasis on evidence-based medicine and research methodologies in Digestive System Oncology
- ◆ All of this will be complemented by theoretical lessons, questions to the expert, debate forums on controversial topics, and individual reflection assignments
- ◆ Content that is accessible from any fixed or portable device with an Internet connection



*A high-level education designed so that professionals like you can balance their professional practice with their academic updating”*

“

*The library of multimedia resources will provide contextual and situated study where learning will be much more effective”*

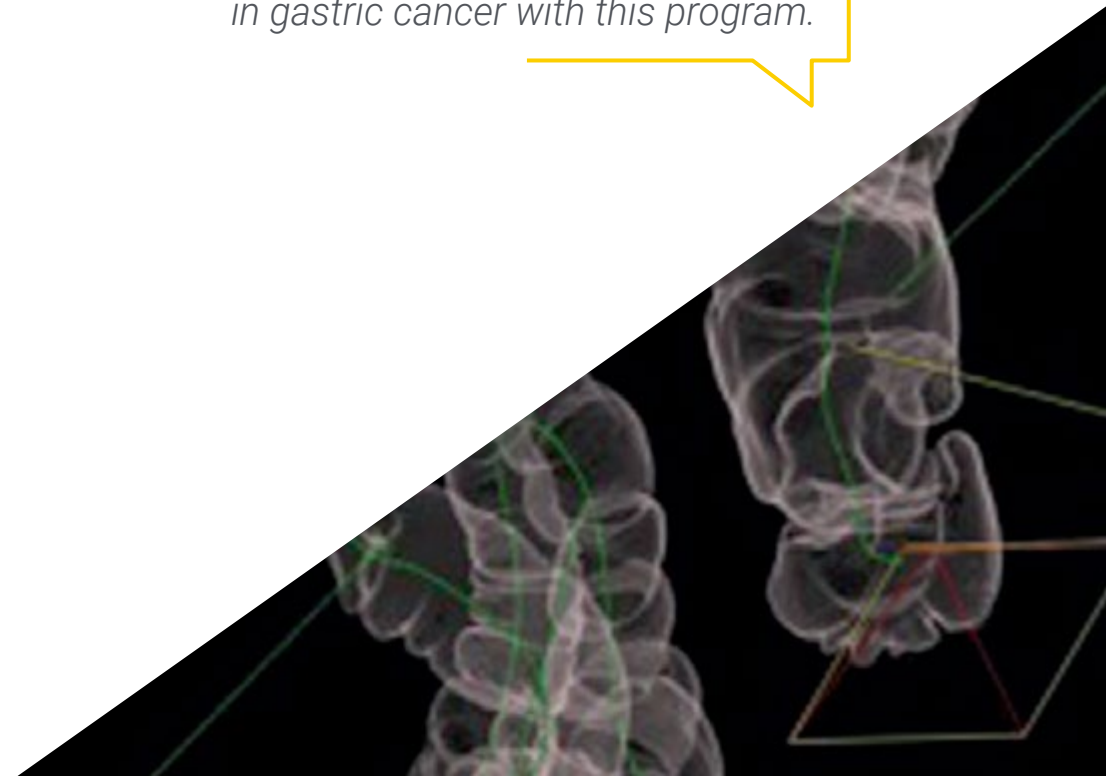
The program's teaching staff includes professionals from the sector who contribute their work experience to this training program, as well as renowned specialists from leading societies and prestigious universities.

The multimedia content, developed with the latest educational technology, will provide the professional with situated and contextual learning, i.e., a simulated environment that will provide immersive specialization programmed to learn in real situations.

This program is designed around Problem-Based Learning, whereby the professional must try to solve the different professional practice situations that arise throughout the program. For this purpose, the student will be assisted by an innovative interactive video system created by renowned and experienced experts.

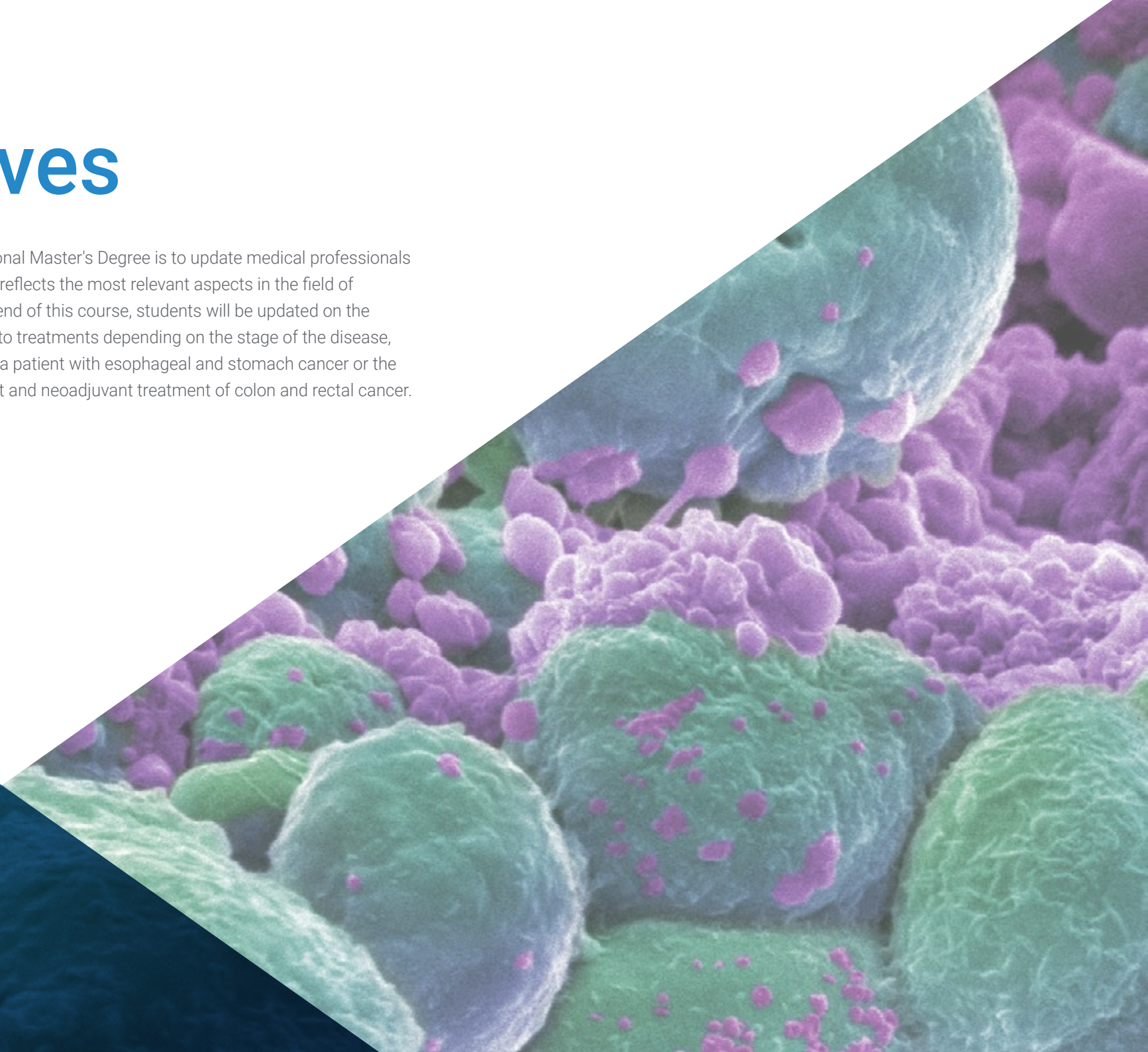
*Delve into new scientific findings on the role of the immune response in digestive cancer control with this Professional Master's Degree.*

*Delve into the most effective approach to neoadjuvant and adjuvant treatment in gastric cancer with this program.*



# 02 Objectives

The main objective of this Professional Master's Degree is to update medical professionals through multimedia content, which reflects the most relevant aspects in the field of Digestive System Oncology. At the end of this course, students will be updated on the different patient immune response to treatments depending on the stage of the disease, the most appropriate treatment for a patient with esophageal and stomach cancer or the expansion of knowledge of adjuvant and neoadjuvant treatment of colon and rectal cancer.





“

*A program that will allow you to delve into the usefulness, novelties and performance of PET/CT with F18-FDG in diagnosis”*



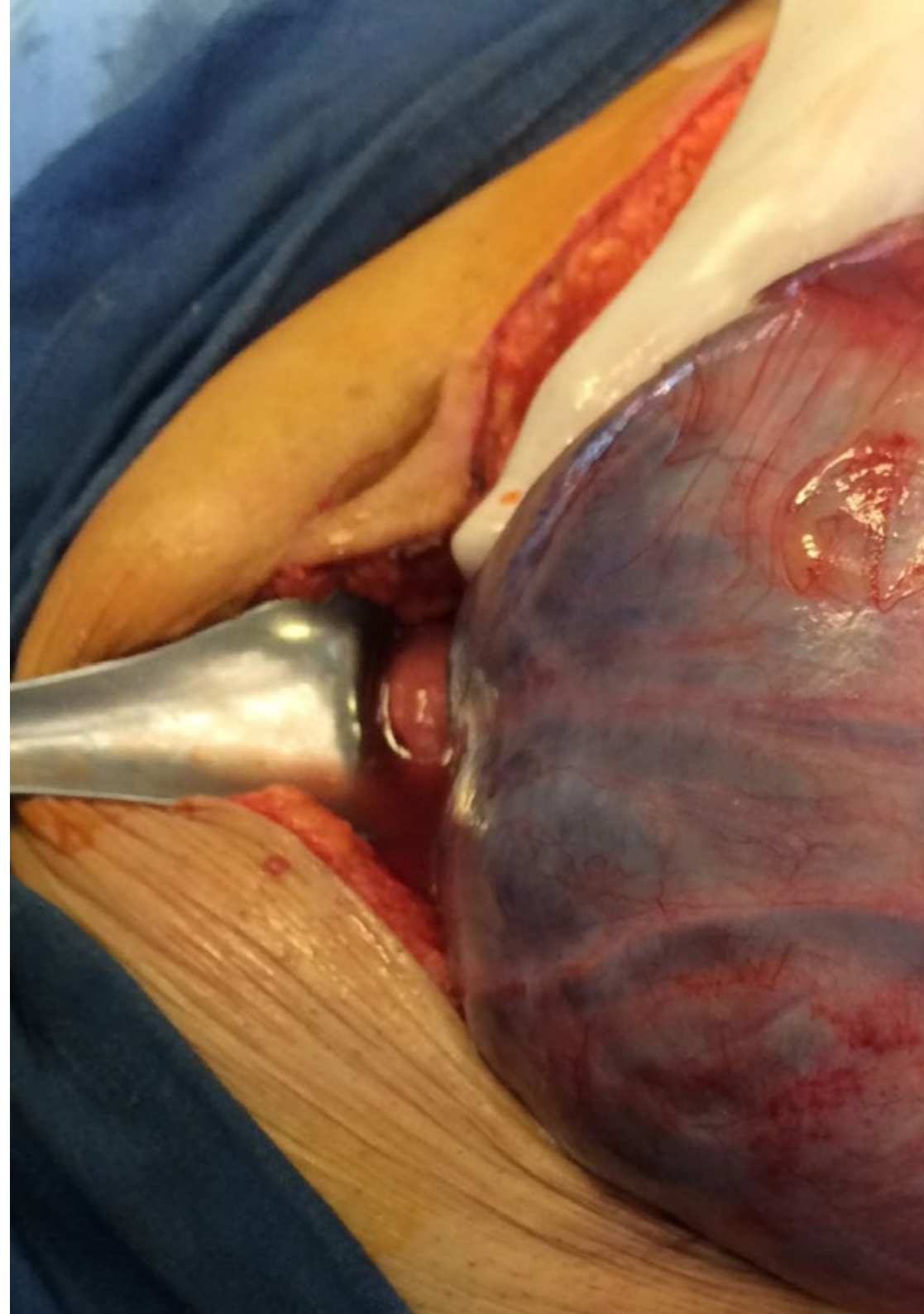
## General Objectives

---

- Create a global and up-to-date vision of Digestive System Oncology and all its aspects, allowing students to acquire useful knowledge and, at the same time, generate interest in expanding information and discovering its application in daily practice
- Provide and expand knowledge on immunotherapy, as an example of a clear scientific advance in translational research, and one of the most promising lines of research in cancer treatment
- Discuss the current landscape of stomach cancer immunotherapy, combinations in clinical development, strategies for dose selection and trial design, clinical pharmacology, and regulatory considerations



*You will get to update your knowledge more easily thanks to multimedia resources that you can access 24 hours a day”*







## Specific Objectives

---

### Module 1. Molecular Biology and Translational Oncology

- ◆ Update knowledge in the molecular biology of cancer, especially in relation to the concept of genetic heterogeneity
- ◆ Expand knowledge on microenvironment reprogramming in digestive tumors, the role of the immune response in cancer control, circulating biomarkers and tissue molecular markers

### Module 2. Upper Gastrointestinal Tract Tumors

- ◆ Review the performance and usefulness of each of the tests used in the diagnosis of esophageal and gastric tumors
- ◆ Describe the usefulness and performance of PET/CT with F18-FDG in the diagnosis, staging, treatment control and monitoring of esophageal tumors
- ◆ Describe the evolution of surgical techniques up to minimally invasive and robotic surgery that allow complex interventions to be performed with small incisions, preserving tissues as much as possible, accelerating recovery and providing less discomfort
- ◆ Update knowledge on adjuvant and neoadjuvant management of esophageal and gastric cancer
- ◆ Know the National Registry of Advanced Gastric Cancer (AGAMENON)
- ◆ Develop appropriate treatment plans for patients with esophageal and gastric cancer that has progressed after initial treatment
- ◆ Determine the positioning of antiangiogenic agents to treat stomach cancer





### Module 3. Lower Gastrointestinal Tract Tumors

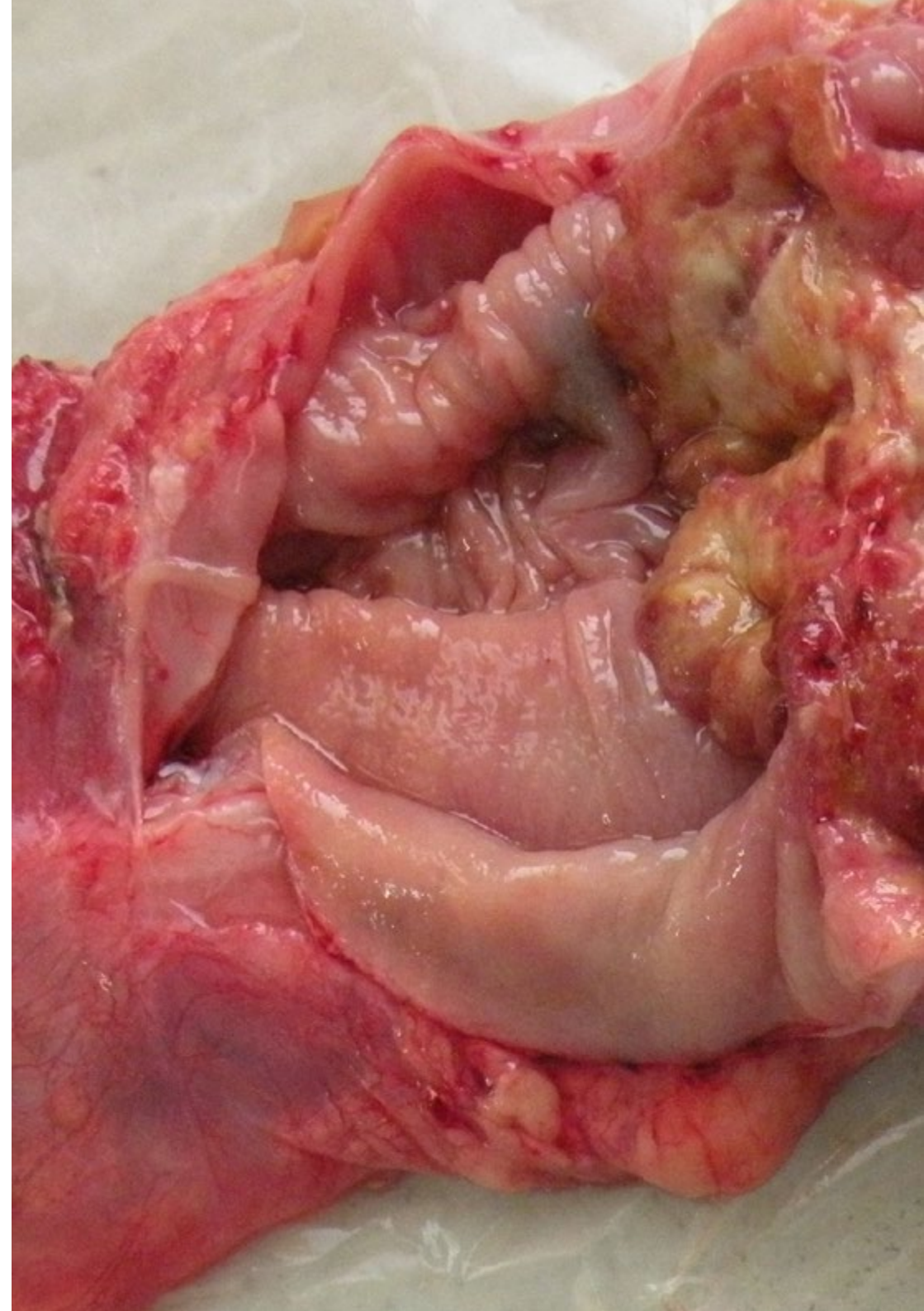
- ♦ Know the screening program for colon and rectal cancer and estimate the population susceptible to be screened in Spain and by autonomous community
- ♦ Analyze the effectiveness of different tests proposed for colon and rectal cancer screening
- ♦ Update knowledge on the molecular biology of colon cancer and its impact on classification and treatment

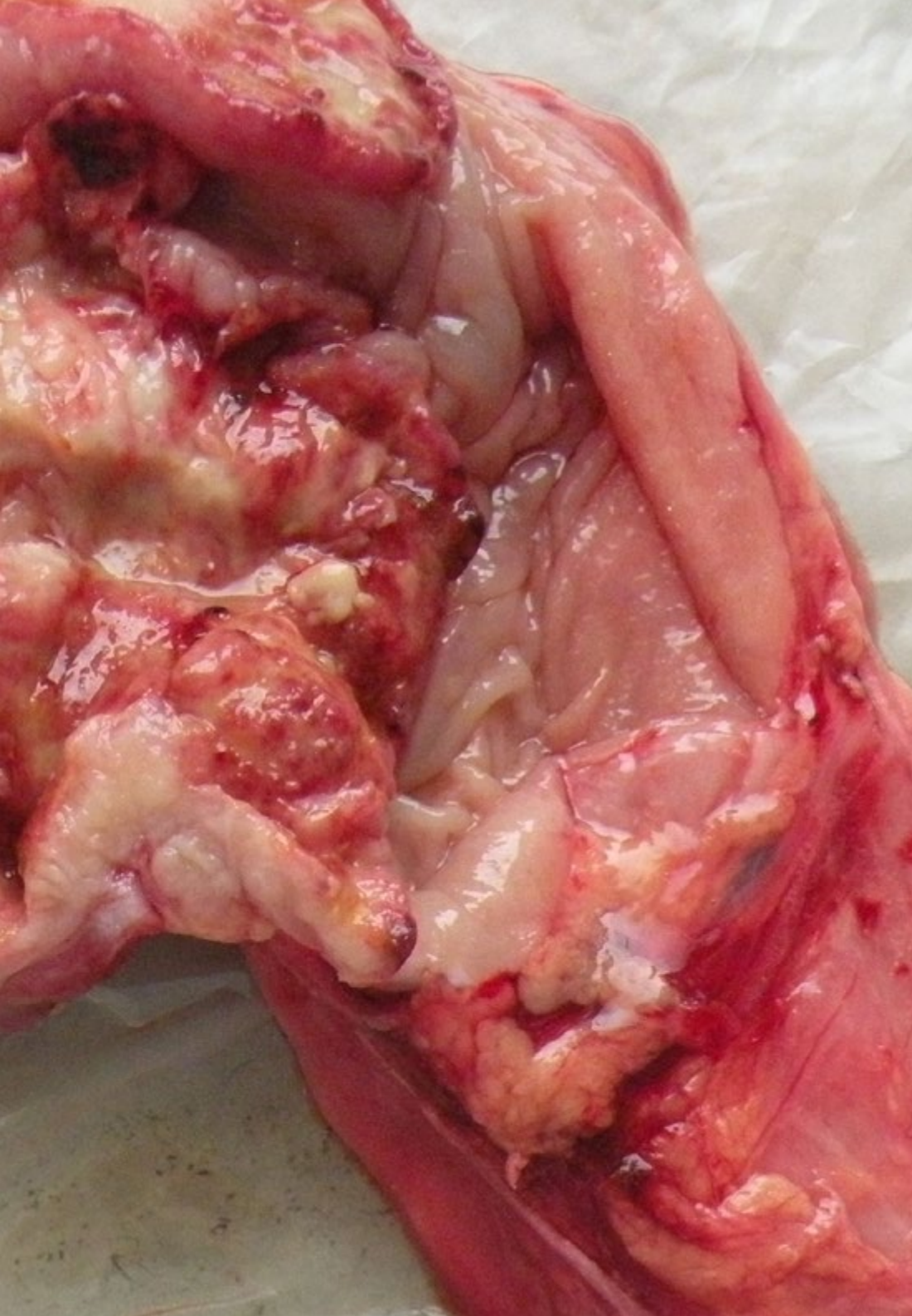
### Module 4. Other Digestive System Tumors

- ♦ Learn the new therapeutic arsenal used to manage the main comorbidities of patients with digestive tumors
- ♦ Know the therapeutic objectives in order to avoid poor control, therapeutic interactions or overtreatment

### Module 5. Pancreatic Cancer, Biliary Tract Tumors and Hepatocarcinoma

- ♦ Define the epidemiology, risk factors and diagnosis of pancreatic cancer and hepatocarcinoma and their value in clinical practice
- ♦ Delve into the imaging tests for the diagnosis and staging of pancreas cancer Discuss the multidisciplinary management of pancreatic, biliary tract and hepatocarcinoma cancer and future treatment options
- ♦ Discuss the role of surgery for pancreatic, biliary tract and hepatocarcinoma cancers
- ♦ Update treatment of advanced pancreatic, biliary tract and hepatocarcinoma cancer





### **Module 6. Collaboration in the Management of Oncology Patients**

- ◆ Assess the impact of age on patient prognosis and treatment outcomes
- ◆ Raise awareness as to how excellent care must be continuous and move toward integrated care models including other specialists, particularly in primary care
- ◆ Explain the Enhanced Support Care strategy, developed by the Christie NHS Trust, to better adapt patient care to the changing landscape of cancer

### **Module 7. From Clinical Management to Networking**

- ◆ Describe the advantages of the collaborative world that will help to network and improve clinical management
- ◆ Describe the vision of the emergency physician and how the detection of frequenters is a sign that can help improve the organizational model
- ◆ Explain the different online platforms available that can help us to follow up patients and create a professional network
- ◆ Learn the basics of decision support systems that facilitate decision making in complex contexts



# 03 Skills

The case studies provided by the professors on the program will be very useful in enhancing the competencies and skills of those who enroll in the program. Thanks to them, students will incorporate an approach to real tumor or cancer patient situations in their different stages, the diagnostic techniques used and the latest scientific advances in recent years in both the detection and the approach to the disease.







“

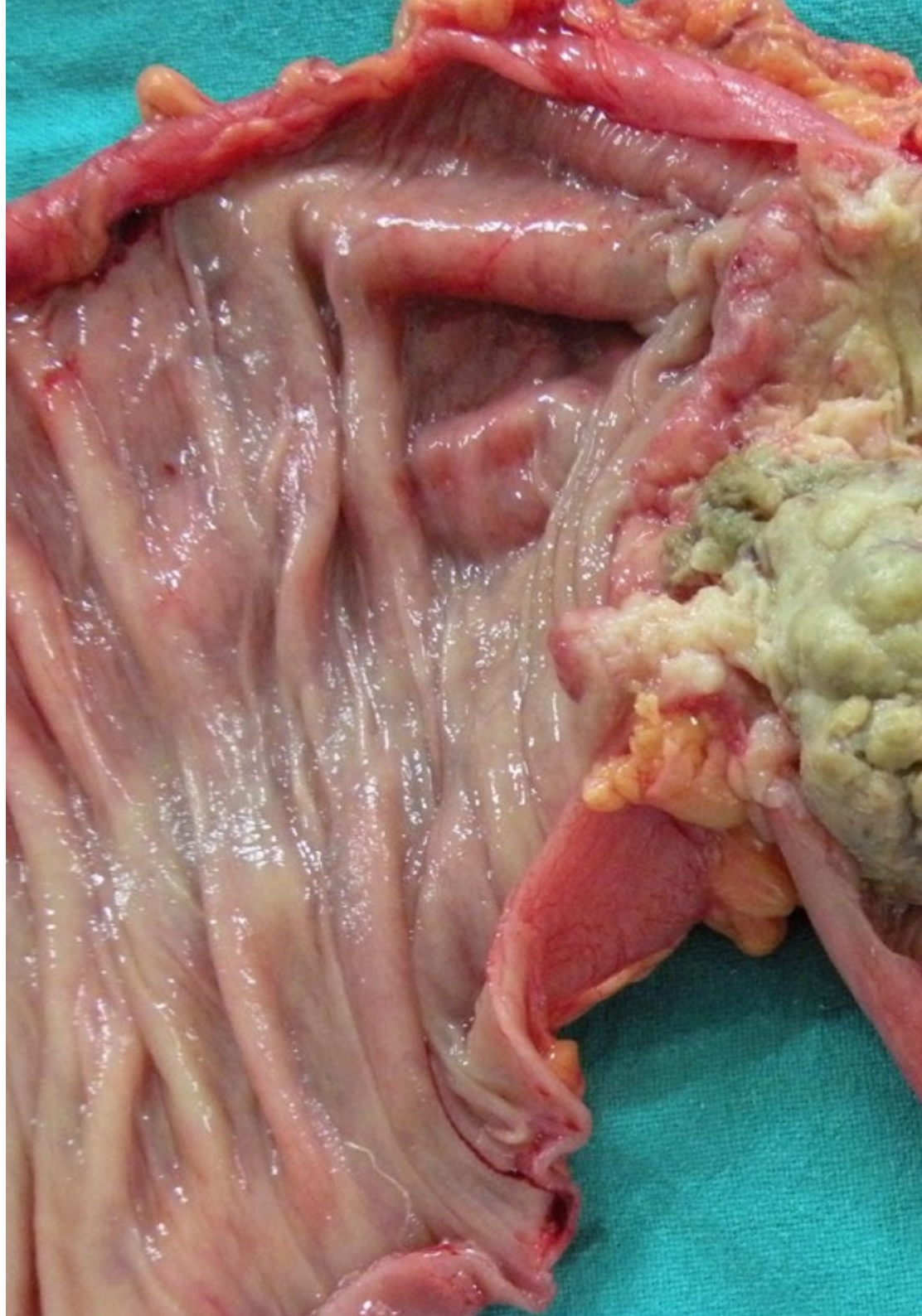
*The simulations of practical cases provided by the teaching team will be very useful in your daily clinical practice”*



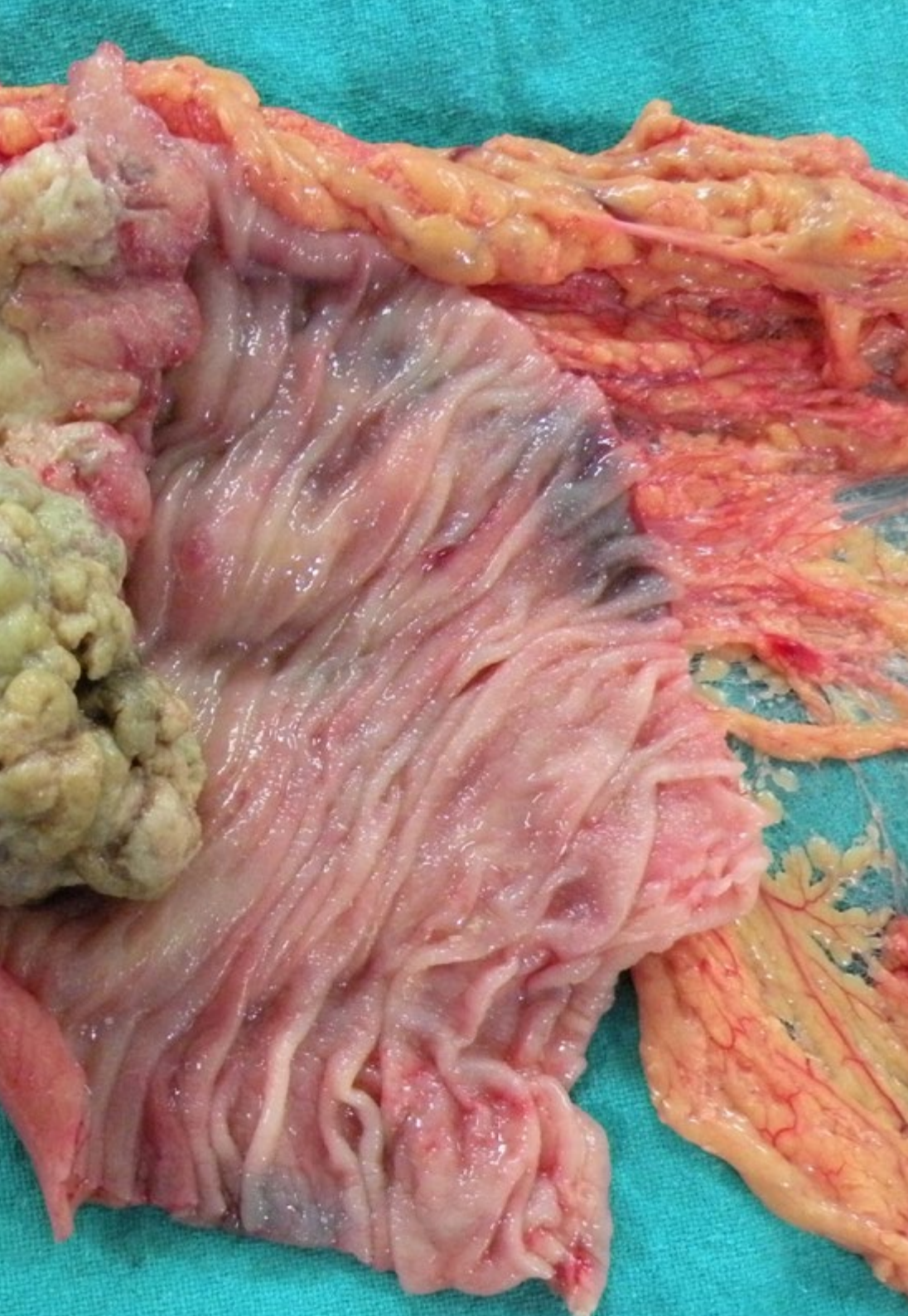
## General Skills

---

- ♦ Possess and understand knowledge that provides a basis or opportunity to be original in the development and/or application of ideas, often in a research context
- ♦ Apply acquired knowledge and problem-solving skills in new or unfamiliar environments within broader (or multidisciplinary) contexts related to their area of study
- ♦ Integrate knowledge and face the complexity of making judgments based on incomplete or limited information, including reflections on the social and ethical responsibilities linked to the application of their knowledge and judgments
- ♦ Know how to communicate conclusions, knowledge, and supporting arguments to specialized and non-specialized audiences in a clear and unambiguous way
- ♦ Broaden learning skills that will enable further studying in a largely self-directed or autonomous manner







## Specific Skills

---

- Discuss the multiple controversies that currently arise in the treatment of colorectal cancer, such as Laparoscopic vs. Learn robotics, total mesorectum excision or liver metastases management
- Update knowledge on adjuvant and neoadjuvant treatment of colon and rectum cancer
- Master the latest advances in translational research with practical implications in cancer management
- Know the advances in personalized management of colon cancer based on the growing understanding of molecular biology
- Identify the recent incorporation of immunotherapy in the management of colon cancer and how it will change the diagnostic and therapeutic approach



*Enhance your competencies in the diagnostic and therapeutic approach to the colon and rectal cancer patient*



# 04

# Course Management

TECH is committed to offering its students the best quality education possible. To this end, it rigorously selects the teaching staff that integrates each of its programs. The extensive professional background and high qualifications are key elements for their inclusion on the programs. For this reason, professionals who takes this Professional Master's Degree will have a specialized teaching staff that has poured its knowledge into the syllabus and will attend to any doubts that may arise regarding the syllabus.





“

*TECH offers you a teaching team specialized in Digestive System Oncology to keep you up to date with the progress in this area”*



## Management



### Dr. Oruezábal Moreno, Mauro Javier

- ◆ Head of the medical Oncology Service at La Paz University Hospital since 2017
- ◆ PhD in Medicine from the Complutense University of Madrid
- ◆ Master's Degree in Bioinformatics and Biostatistics UOC-UB
- ◆ Master's Degree in Bioinformatics Analysis, Pablo de Olavide University
- ◆ Research Fellow at University of Southampton
- ◆ Member of the Spanish Society of Medical Oncology and the Spanish Group of Digestive Tumors (TTD)
- ◆ Specialist in Medical Oncology, University Hospital San Carlos of Madrid
- ◆ Degree in Medicine and Surgery, Navarra University



### Dr. Esteban López-Jamar, José Miguel

- ◆ Head of the Endoscopy Unit, San Carlos University Clinical Hospital, Madrid
- ◆ PhD in Medicine and Surgery, Complutense University of Madrid, Outstanding Cum Laude Qualification
- ◆ Training at the AMC in Amsterdam, Paoli Calmettes Institute in Marseille and at the Horst-Schmidt-Kliniken in Wiesbaden (Germany)
- ◆ Member of the SEPD, ACAD, SEED and ESGE
- ◆ Honorary Member of the Cuban Society of Gastroenterology
- ◆ Professor and member of the Scientific Advisory Committee of the University Specialization Course in Endoscopic Ultrasonography of the UOC
- ◆ Specialist (MIR) in Digestive System, University Hospital San Carlos of Madrid



### **Dr. Loinaz Seguro, Carmelo**

- ♦ Chief of Section of General and Digestive System Surgery, Doce de Octubre University Hospital
- ♦ PhD in Medicine and Surgery from the Complutense University of Madrid
- ♦ Associate Professor in the Health Sciences Department
- ♦ Head of the General Surgery Unit, Alcorcón University Hospital, Madrid
- ♦ Member of the Spanish Association of Surgeons, Spanish Society of Parenteral and Enteral Nutrition, American College of Surgeons, Spanish Society of Transplantation, Spanish Society of Liver Transplantation, European Society of Organ Transplantation, The Transplantation Society (and IRTA section, Intestinal Rehabilitation and Transplant Association), IASGO (International Society of Surgeons, Gastroenterologists and Oncologists), ISDE (International Society of Diseases of the Esophagus)
- ♦ Master's Degree in Medical and Clinical Management, UNED and School of Health - Carlos III Institute
- ♦ Coordinator of Humanitarian Collaboration Group, AEC
- ♦ Health Cooperation Committee, Surgery Department, UCM
- ♦ Degree in Medicine and Surgery, Navarra University

## **Professors**

### **Dr. Abradelo, Manuel**

- ♦ HBP Surgery and Transplantation Service, Queen Elizabeth Hospital

### **Dr. Adeva Alfonso, Jorge**

- ♦ Department of Medical Oncology, 12 de Octubre University Hospital, Madrid

### **Dr. Agustí, Enrique Esteban**

- ♦ General and Digestive Surgery Service, Torrejón University Hospital, Madrid

### **Dr. Alonso Casado, Oscar**

- ♦ General Surgery Service, M.D. Anderson Hospital Madrid

### **Dr. Álvarez Delgado, Alberto**

- ♦ Gastroenterology Service, University Hospital of Salamanca



**Dr. Astudillo González, Aurora**

- ♦ Anatomic Pathology Service
- ♦ Associate Professor at the University of Oviedo linked to the Central University Hospital of Asturias
- ♦ Scientific Director of the Principality of Asturias Biobank

**Dr. Barturren Barroso, Ángel**

- ♦ Head of the Endoscopy Service, Cruces University Hospital Vizcaya

**Dr. Bertomeu García, Agustín**

- ♦ Esophago-Gastric Surgery Section, General Surgery Department, Getafe University Hospital, Madrid

**Dr. Betés Ibáñez, Maite**

- ♦ Gastroenterology Service, Navarra University Clinic

**Dr. Boan García, José Francisco**

- ♦ Head of the Molecular Imaging Unit, Ruber International Hospital, Madrid

**Dr. Botella Romero, Francisco**

- ♦ Head of Endocrinology and Nutrition Service
- ♦ Albacete Integrated Health Care Management System

**Dr. Burón Fernández, María del Rosario**

- ♦ Internal Medicine Department, Infanta Cristina University Hospital

**Dr. Cabrer Gonzalez, Miguel Luis**

- ♦ Head of IT, Hospital Universitario Son Espases Palma de Mallorca

**Dr. Cacho Lavín, Diego**

- ♦ Medical Oncology Service, Marqués de Valdecilla University Hospital

**Dr. Carmona Bayonas, Alberto**

- ♦ Medical Oncology Service, Morales Meseguer University Hospital, Murcia

**D. Carrillo, Esteban**

- ♦ Antares Consulting

**Dr. Chicas Sett, Rodolfo**

- ♦ Department of Radiation Oncology, Las Palmas Dr. Negrin University Hospital

**Dr. Cruz Santamaría, Dulce M.**

- ♦ Gastroenterology Service, University Hospital San Carlos, Madrid

**Dr. Custodio Carretero, Ana**

- ♦ Gastrointestinal and Neuroendocrine Tumors Unit, Department of Medical Oncology, La Paz University Hospital, IdiPAZ

**Dr. De Lacy, Antonio**

- ♦ Head of the General Surgery Service, Barcelona Clinical Hospital

**Dr. Del Cerro Peñalver, Elia**

- ♦ Head of the Radiation Oncology Department, QuirónSalud Hospital, Madrid

**Dr. Del Valle, Emilio**

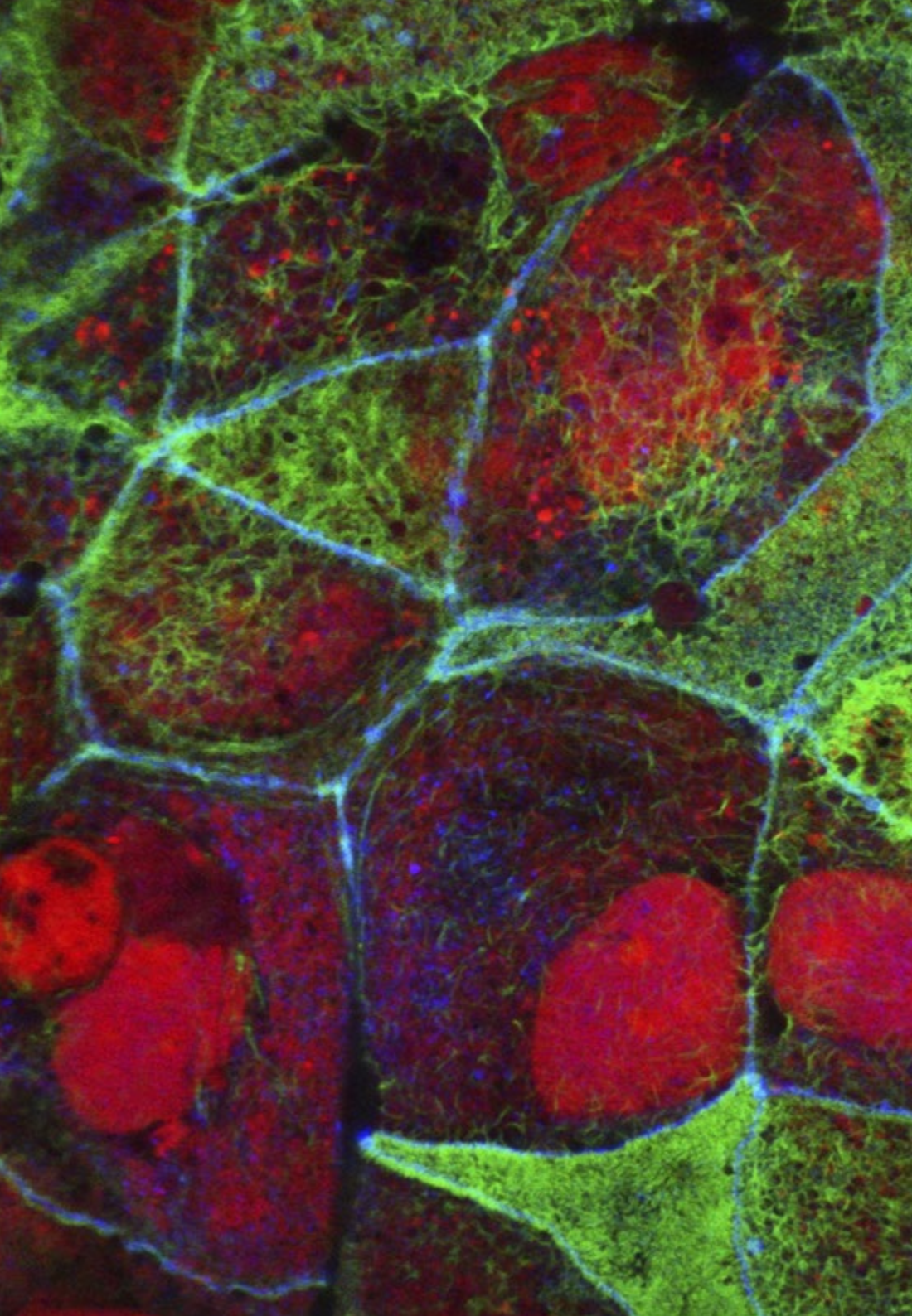
- ♦ Head of the General Surgery Service, Gregorio Marañón University Hospital, Madrid

**Dr. Díaz Beveridge, Roberto**

- ♦ Medical Oncology Service, La Fe Polytechnic University Hospital

**Dr. Díaz Gavela, Ana A.**

- ♦ Radiation Oncology Service, QuirónSalud Hospital, Madrid



**Dr. Díaz Pérez, José Ángel**

- ◆ Endocrinology and Nutrition Service, University Hospital San Carlos, Madrid

**Dr. Díez del Val, Ismael**

- ◆ Head of Esophago-gastric and Bariatric Surgery Section, Basurto University Hospital, Bilbao
- ◆ ACS Esophago-gastric surgery coordinator, 2019 to present
- ◆ Expert in Emerging Viruses from SECO
- ◆ ACS Esophago-Gastric Surgery Coordinator
- ◆ Member of the Board of Directors of SECO

**Dr. Dos Santos Castro, Leonaldson**

- ◆ General Surgery at INCA (Instituto Nacional de Câncer), Rio de Janeiro

**Dr. Fabregat Prous, Joan**

- ◆ Head of the General Surgery Section, Bellvitge university Hospital

**Dr. Fernández Cebrián, José María**

- ◆ Head of the General Surgery Service, Alcorcón Foundation University Hospital, Madrid

**Dr. Figueroa, Angelica**

- ◆ Specialist at the Institute of Biomedical Research, A Coruña, INIBIC
- ◆ Research Group Leader, Epithelial Plasticity and Metástasis

**Dr. Fondevila Campo, Constantino**

- ◆ General and Digestive Surgery Service, Clinical Hospital Barcelona

**Dr. Galindo, Pablo**

- ◆ General Surgery Service, Torrejón University Hospital, Madrid



**Dr. García Baquero, María Teresa**

- ♦ Regional Coordinator of Palliative Care in the Community of Madrid

**Dr. García-Sesma, Álvaro**

- ♦ HBP Surgery and Abdominal Organ Transplant Unit, General Surgery Department, Doce de Octubre University Hospital, Madrid

**Dr. González Bayón, Luis**

- ♦ General Surgery Service, Gregorio Marañón University Hospital, Madrid

**Dr. González-Haba Ruiz, Mariano**

- ♦ Gastroenterology Service, University Hospital San Carlos, Madrid

**Dr. Gornals Soler, Joan**

- ♦ Head of the Endoscopy Service, Bellvitge University Hospital Barcelona

**Dr. Hernández García-Gallardo, Diego**

- ♦ Esophago-gastric Surgery Unit General Surgery, Digestive System and Abdominal Organ Transplant Service, Doce de Octubre University Hospital, Madrid

**Dr. Herráiz Bayod, Maite**

- ♦ Physician in the Gastroenterology Service
- ♦ Head of the Unit of Prevention and High Risk of Digestive Tumors, Clínica Universitaria de Navarra

**Dr. Ibáñez Aguirre, Javier**

- ♦ Head of the General Surgery Service, Galdakao Hospital, Vizcaya

**Dr. Jiménez Rodríguez, Rosa María**

- ♦ Coloproctology Surgery Service, Memorial Sloan Kettering Cancer Center, New York, NY



**Dr. Jiménez-Fonseca, Paula**

- ♦ Medical Oncology Service, Central de Asturias University Hospital

**Dr. Lacasta Muñoa, Adelaida**

- ♦ Medical Oncology Service, Donostia University Hospital

**Dr. Laquente Saez, Berta**

- ♦ Medical Oncology Service, Catalan Institute of Oncology

**Dr. Lara Jiménez, Pedro Carlos**

- ♦ Director of the Canary Islands Cancer Institute
- ♦ Head of the Department of Oncological Radiology, University Hospital Doctor Negrín, Las Palmas de Gran Canaria
- ♦ Professor of Clinical Oncology, University of Las Palmas de Gran Canaria
- ♦ President of the Spanish Society of Radiotherapy and Oncology (SEOR)
- ♦ Secretary of the Spanish Society of Clinical Oncology (SEOC)

**Dr. Lariño Noia, José**

- ♦ Assistant Physician in the Gastroenterology Service, Clinical Hospital of Santiago of Compostela

**Dr. León Díaz, Francisco Javier**

- ♦ Physician in the General Surgery Service, Carlos Haya Regional Hospital, Malaga

**Dr. Limón Mirón, María Luisa**

- ♦ Physician in the Medical Oncology Service, Virgen del Rocío Hospital University Hospital, Seville

**Dr. López Baena, José Ángel**

- ♦ Physician in the General Surgery Service, Gregorio Marañón University Hospital, Madrid

**Dr. López Guerrero, José Antonio**

- ♦ Physician in the Medical Oncology Service, Valencian Institute of Oncology

**Dr. López López, Carlos**

- ♦ Physician in the Medical Oncology Service, Marqués de Valdecilla University Hospital

**Dr. López López, Rafael**

- ♦ Head of the Medical Oncology Department, Complejo Hospitalario Universitaria de Santiago de Compostela
- ♦ Physician in the Translational Medical Oncology Group, Instituto de Investigación Sanitaria

**Dr. Maldonado, Antonio**

- ♦ Head of the Nuclear Medicine and Molecular Imaging Unit, Quironsalud University Hospital, Madrid

**Dr. Manrique, Alejandro**

- ♦ Physician in HBP Surgery and Abdominal Transplant in the Department of General Surgery, Digestive System and Abdominal Organ Transplantation, Doce de Octubre University Hospital, Madrid

**Dr. Maroto Castellanos, Maite**

- ♦ Physician in the Gastroenterology Department, Rey Juan Carlos University Hospital, Madrid

**Dr. Martínez Ares, David**

- ♦ Head of Gastroenterology Service, Galician Institute of Digestive Diseases

**Dr. Martínez de Castro, Eva**

- ♦ Medical Oncology Service, Marqués de Valdecilla University Hospital



**Dr. Martínez Iglesias, Olaia**

- ♦ Specialist at the Institute of Biomedical Research, A Coruña, INIBIC
- ♦ Research Group Leader, Epithelial Plasticity and Metástasis

**Dr. Martínez Isla, Alberto**

- ♦ Physician at Northwick Park-St. Marks Hospitals London, United Kingdom

**Dr. Martínez Trufero, Javier**

- ♦ Medical Oncology Service, Miguel Servet University Hospital

**Dr. Mejías Estévez, Manuel**

- ♦ UGC Oncology and Palliative Care, Jerez Hospital

**Dr. Méndez Fernández, Ramiro**

- ♦ Radiodiagnostics Service, Clinical University Hospital San Carlos, Madrid

**Dr. Méndez Montero, José Vicente**

- ♦ Physician in the Interventional Vascular Radiology Unit, Clinical University Hospital San Carlos, Madrid

**Dr. Mendoza Hernández, Juan Luis**

- ♦ Physician in the Gastroenterology Department, San Carlos University Hospital, Madrid

**Dr. Navarro Fos, Samuel**

- ♦ Professor of Pathological Anatomy, University of Valencia

**Dr. Olivas Varela, José Ángel**

- ♦ Deputy Director, Department of Information Technologies and Systems, Higher School of Computer Science, University of Castilla La Mancha

**Dr. Ortiz Fernández-Sordo, Jacobo**

- ♦ Gastroenterology Department Nottingham University Hospital

**Dr. Paramio Gonzalez, Jesús**

- ♦ Physician at the Molecular Oncology Unit, CIEMAT, 12 de Octubre Research Institute, Madrid

**Dr. Pardo Sánchez, Fernando**

- ♦ Physician in the General Surgery Service, Clínica Universitaria de Navarra

**Dr. Parra Blanco, Adolfo**

- ♦ Gastroenterology Department Nottingham University Hospital

**Dr. Pazo Cid, Roberto A.**

- ♦ Physician in the Medical Oncology Service, Miguel Servet de Zaragoza University Hospital

**Dr. Pera Román, Miguel**

- ♦ Head of the Coloproctology Service, Del Mar University Hospital, Barcelona

**Dr. Perdices Ramírez, Javier**

- ♦ eHealth Director at Artica Telemedicina - CMC Group

**Dr. Perea García, José**

- ♦ General Surgery Service, Jiménez Díaz Foundation, Madrid

**Dr. Perez Martínez, David**

- ♦ Head of Neurology Service, University Hospital 12 de Octubre, Madrid

**Dr. Pérez Roldan, Francisco**

- ♦ Gastroenterology Service, La Mancha Centro Hospital Complex, Alcázar de San Juan

**Dr. Pérez Romasanta, Luis A.**

- ♦ Head of the Radiation Oncology Department, University Hospital of Salamanca

**Dr. Pericay Pijaume, Carles**

- ♦ Physician in the Medical Oncology Service, Sabadell Hospital, Parc Tauli

**Dr. Poves Prim, Ignasi**

- ♦ Physician in the General Surgery Service, Del Mar University Hospital, Barcelona

**Dr. Puente Muñoz, Ana Isabel**

- ♦ Physician of the Clinical Neurophysiology Service, Red Cross Hospital, Madrid

**Dr. Ramírez Merino, Natalia**

- ♦ Physician of the Oncology Service, IMO Madrid Group

**Dr. Ramírez, José Manuel**

- ♦ Specialist in the Colorectal Surgery Unit, Hospital Clínico Universitario de Zaragoza

**Dr. Ramos Zabala, Felipe**

- ♦ Physician in the Gastroenterology Service, Hospital Universitario Monte Príncipe, Madrid

**Dr. Ramos, Emilio**

- ♦ Head of the General Surgery Section, Bellvitge university Hospital, Barcelona

**Dr. Repiso Ortega, Alejandro**

- ♦ Specialist of the Gastroenterology Service, Virgen de la Salud Hospital Complex, Toledo

**Dr. Richart Aznar, Paula**

- ♦ Specialist in the Medical Oncology Service, Hospital Universitari i Politecnic La Fe Valencia

**Dr. Rodríguez Rodríguez, Javier**

- ♦ Specialist in the Medical Oncology Service, Clínica Universitaria de Navarra

**Dr. Roiz Andino, Honan**

- ♦ Physician in the Emergency Department, Hospital Universitario Príncipe de Asturias, Alcalá de Henares

**Dr. Rojas Marcos Rodríguez, Jorge**

- ♦ Specialist in the Internal Medicine Department, Rey Juan Carlos University Hospital

**Dr. Rotellar Sastre, Fernando**

- ♦ Specialist in the General Surgery Service, Clínica Universitaria de Navarra

**Dr. Rueda Fernández, Daniel**

- ♦ Specialist in the Research Unit, 12 de Octubre University Hospital, Madrid

**Dr. Ruiz Casado, Ana Isabel**

- ♦ Physician in the Medical Oncology Service, Puerta de Hierro University Hospital, Madrid

**Dr. Sabater Ortí, Luis**

- ♦ Specialist in the General Surgery Unit, Hospital Clínico Universitario de Valencia

**Dr. Sabino Álvarez, Araceli**

- ♦ Physician in the Medical Oncology Service, Puerta del Mar University Hospital Cadiz



**Dr. Salas Salas, Barbara**

- ♦ Specialist in the Department of Radiation Oncology, Las Palmas Dr. Negrin University Hospital

**Dr. Sánchez Pernaute, Andrés**

- ♦ Head of the General Surgery Section, San Carlos Clinical University Hospital, Madrid

**Dr. Santoyo, Julio**

- ♦ Head of General Surgery Service, Carlos Haya Regional Hospital, Malaga

**Dr. Segura Huerta, Ángel Agustín**

- ♦ Physician in the Medical Oncology Service, La Fe Polytechnic University Hospital, Valencia

**Dr. Senosiain Lalastra, Carla**

- ♦ Specialist in the Gastroenterology Service, Ramón y Cajal Hospital, Madrid

**Dr. Serrablo, Alejandro**

- ♦ Specialist in the General Surgery Unit, Lozano Blesa Hospital, Zaragoza

**Dr. Valdivieso López, Andrés**

- ♦ Chief of General and Digestive Surgery Section, Cruces University Hospital, Vizcaya

**Dr. Valladares Ayerbes, Manuel**

- ♦ UGC Medical Oncology, Hospital Universitario Virgen del Rocío IBIS, Sevilla

**Dr. Vázquez Romero, Manuel**

- ♦ Specialist in the Gastroenterology Service, University Hospital San Carlos, Madrid

**Dr. Vega, Vicente**

- ♦ Specialist in the General Surgery Unit, Hospital Clínico Universitario de Puerto Real, Cadiz





**Dr. Velastegui Ordoñez, Alejandro**

- ♦ Physician in the Medical Oncology Service, Rey Juan Carlos University Hospital, Madrid

**Dr. Vera García, Ruth**

- ♦ Specialist in the Medical Oncology Service, Hospital Universitario de Navarra

**Dr. Vicente Martín, Cristina**

- ♦ Specialist in Internal Medicine Service Palliative Care Unit, Rey Juan Carlos University Hospital, Madrid

**Dr. Vicente, Emilio**

- ♦ Director of the General Surgery Service, Sanchinarro-CIOCC University Hospital, Madrid

**Dr. Vila Costas, Juan**

- ♦ Head of the Endoscopy Service, Navarra University Hospital

**Dr. Viloría Jiménez, Aurora**

- ♦ Palliative Care Unit in the Geriatrics Service

**Dr. Weber Sánchez, Alejandro**

- ♦ Professor in the Bioethics Department, Anáhuac University, Naucalpan de Juárez, México

**Dr. Yebra Yebra, Miguel**

- ♦ Specialist in the Internal Medicine Department, Rey Juan Carlos University Hospital



# 05

## Structure and Content

The *Relearning* system, which TECH uses in all its programs, allows professionals to progress in a much more dynamic and natural way over the course of this program. Furthermore, it is a method that favors the reduction of study time so common to other methodologies. Thanks to this, physicians will update their knowledge of advances in molecular biology, oncology and clinical management much more quickly. Likewise, being able to access this content 24 hours a day gives students greater freedom to distribute the 1,500 teaching hours the program includes.



“

*A university education that will allow you to further develop your knowledge in palliative care patient management and the Enhanced Supportive Care integration model”*

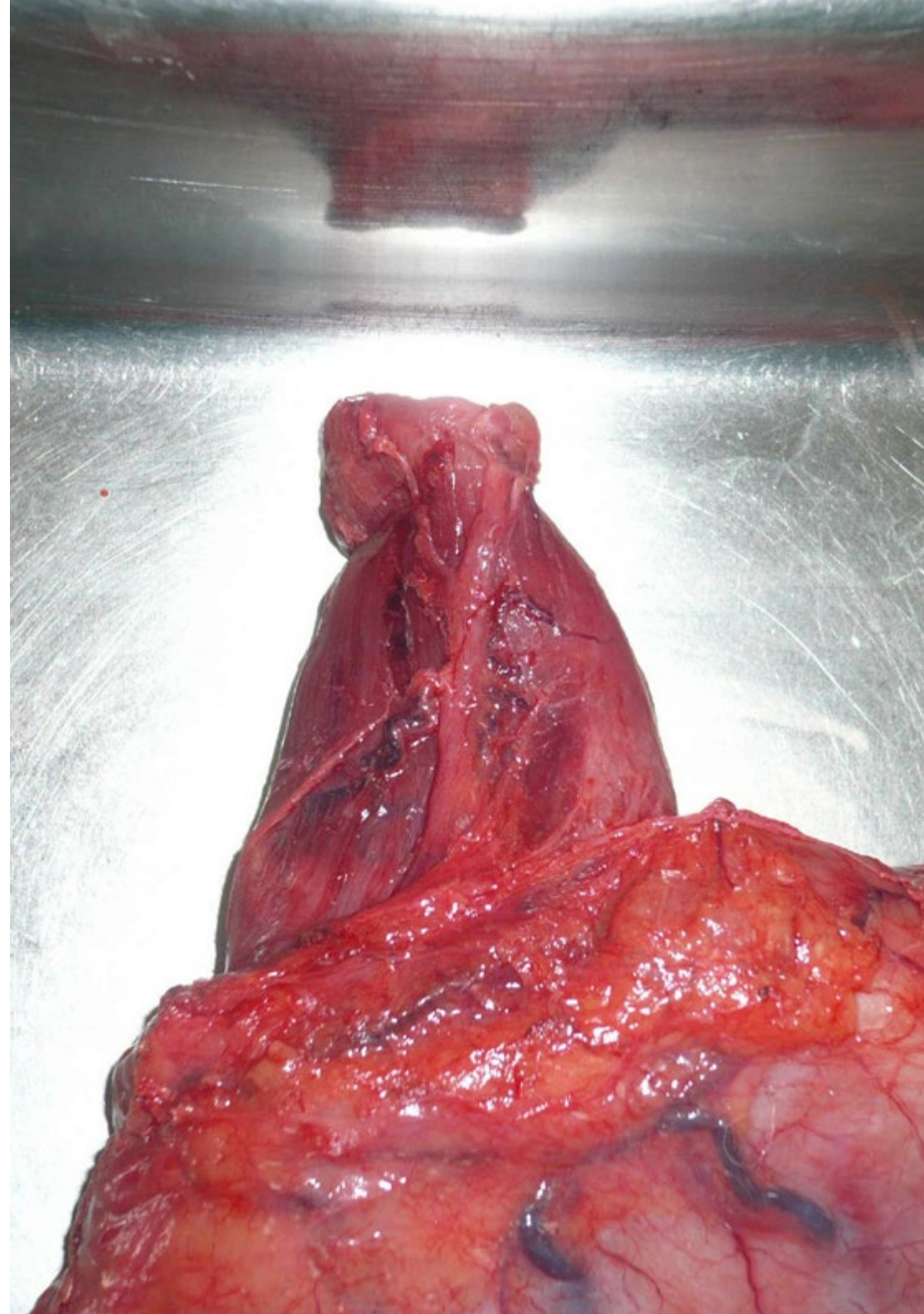


## Module 1. Molecular Biology and Translational Oncology

- 1.1. Molecular Mechanisms of Cancer
- 1.2. Tumor Immunology: Basis of Cancer Immunotherapy
- 1.3. Role of the Biobank in Clinical Research
- 1.4. Understanding the New Technology: Next Generation Sequence (NGS) in Clinical Practice
- 1.5. Liquid Biopsies: A Trend or the Future?
- 1.6. Update on Molecular Markers for Treatment Decisions in Gastrointestinal Malignancies
- 1.7. Do Molecular and Immunological Classifications Have Clinical Implications Today?

## Module 2. Upper Gastrointestinal Tract Tumors

- 2.1. Esophageal Cancer
  - 2.1.1. Differences between Squamous Carcinoma and Esophagus Adenocarcinoma
  - 2.1.2. Endoscopic Aspects of Esophageal Cancer: Diagnosis and Staging
  - 2.1.3. Clinical Impact of 18F-FDG PET/CT in the Therapeutic Management of Patients with Esophageal Cancer
  - 2.1.4. Endoscopic Treatment of Superficial Esophageal Neoplasms
  - 2.1.5. Conventional Surgical Approach to Esophageal Carcinoma
  - 2.1.6. Minimally Invasive and Robotic Surgery of Esophageal Cancer
  - 2.1.7. Evolution in Neoadjuvant and Adjuvant Treatment of Esophageal Cancer
  - 2.1.8. Management of Metastatic Esophageal Cancer
- 2.2. Gastric Cancer
  - 2.2.1. Diagnosis and Staging of Gastric Adenocarcinoma
  - 2.2.2. Minimally Invasive and Robotic Surgery of Gastric Cancer
  - 2.2.3. Lymphadenectomy Extension in Gastric Cancer
  - 2.2.4. Neoadjuvant and Adjuvant Treatment in Gastric Cancer: What Is the Optimal Approach?
  - 2.2.5. First-Line Treatment of HER2-Negative Metastatic Gastric Cancer
  - 2.2.6. Second-Line Treatment of HER2-Negative Metastatic Gastric Cancer
  - 2.2.7. Metastatic Gastric Cancer: Impact of Drugs Targeting the HER2 Pathway
  - 2.2.8. Metastatic Gastric Cancer: Impact of Immune Checkpoint Inhibitors





**Module 3. Lower Gastrointestinal Tract Tumors**

- 3.1. Colon and Rectum Cancer
  - 3.1.1. Colorectal Cancer: Epidemiology, Etiology and Incidence
  - 3.1.2. Molecular Mechanisms Involved in the Invasion and Metastasis Process in Digestive Tumors
  - 3.1.3. Molecular Classification of Colon Cancer: New Perspectives
  - 3.1.4. Biomarkers in Colorectal Cancer
  - 3.1.5. Early Detection Program for Colon and Rectum Cancer
  - 3.1.6. Familial Forms of Colorectal Cancer (Polyposis-Associated and Non-Polyposis-Associated)
  - 3.1.7. Cancer Associated with Chronic Inflammatory Bowel Diseases and Treatments Received
  - 3.1.8. Diagnosis and Endoscopic Management of Polyps and Advanced Lesions
  - 3.1.9. Clinical Impact of FDG-PET/CT in the Staging of Colorectal Cancer
  - 3.1.10. Role of Endoscopic Ultrasonography (EUS) and Magnetic Resonance Imaging (MRI) in the Staging of Rectal Cancer
  - 3.1.11. Laparoscopic vs. Robotic Surgery in Colon Cancer
  - 3.1.12. Surgical Management of Familial Non-Polyposis Colon Cancer
  - 3.1.13. Surgery for Familial Adenomatous Polyposis
  - 3.1.14. Current Adjuvant Treatment of Colon Cancer and Proposals for the Future in the Adjuvant Treatment of Colon Cancer
  - 3.1.15. Total Mesorectal Excision: Open, Laparoscopic and Robotic
  - 3.1.16. Transanal Approach to Rectal Tumors
  - 3.1.17. Neoadjuvant Treatment in Rectal Cancer
  - 3.1.18. Postoperative Treatment after Neoadjuvant and Radical Surgery
  - 3.1.19. Observe and Wait for Low Rectal Cancers after Neoadjuvant Therapy with Complete Clinical Response
  - 3.1.20. Invasive Pelvic Tumors: Pelvic Exenteration
  - 3.1.21. Therapeutic Advances in Colon and Rectal Cancer: Improving Patient Survival Day by Day
  - 3.1.22. What Is the Best Treatment Option After Second Line Therapy in Advanced Colorectal Cancer?
  - 3.1.23. Acquired Resistance to EGFR Antibodies: How to Manage
  - 3.1.24. Immunotherapy in Metastatic Colorectal Cancer
  - 3.1.25. Rectal Cancer with Synchronous and Resectable Liver Metastases
  - 3.1.26. Management of Colorectal Cancer Liver Metastases
  - 3.1.27. Total Mesocolon Excision: When? How? Why?
  - 3.1.28. Role of Endoscopy in the Management of Advanced Colorectal Cancer

**Module 4. Other Digestive Tract Tumors**

- 4.1. Appendicular Tumors
  - 4.1.1. Appendicular Tumors: Surgical Implications
- 4.2. Peritoneal Carcinomatosis
  - 4.2.1. Peritoneal Carcinomatosis: Surgical Treatment and Postoperative Intraperitoneal Chemotherapy
- 4.3. Anal Cancer
  - 4.3.1. Treatment of Localized Anal Cancer
  - 4.3.2. Treatment of Locally Advanced Cancer
  - 4.3.3. Treatment of Radiation Therapy in Colon Cancer
  - 4.3.4. Treatment of Metastatic Anal Cancer
- 4.4. Neuroendocrine Tumors
  - 4.4.1. Neuroendocrine Tumors of the Small Intestine
  - 4.4.2. Neuroendocrine Tumors of the Pancreas
  - 4.4.3. Surgical Treatment of Non-Functioning Neuroendocrine Pancreas Tumors
  - 4.4.4. Surgical Treatment of Gastrinoma
  - 4.4.5. Surgical Treatment of Insulinoma
  - 4.4.6. Pancreas Endocrine Tumors Surgery: Glucagonoma, Vipoma
  - 4.4.7. Overview of Systemic Treatment of Metastatic Neuroendocrine Tumors in the Pancreatic Gastroenteropancreatic Tract
- 4.5. GIST
  - 4.5.1. Biology, Diagnosis and Management of Gastrointestinal Stromal Tumors (GIST)
  - 4.5.2. The Role of 18F-FDG PET/CT in GI Stromal Tumors
  - 4.5.3. Surgical Treatment of Gastrointestinal Stromal Tumors (GIST)
  - 4.5.4. GIST as a Model of Translational Research: 15 Years of Experience
- 4.6. Lymphomas
  - 4.6.1. Gastric MALT Lymphoma
  - 4.6.2. Lymphomas in Other Digestive Regions

## Module 5. Pancreatic Cancer, Biliary Tract Tumors and Hepatocarcinoma

- 5.1. Pancreatic Cancer
  - 5.1.1. Epidemiology, Risk Factors and Diagnosis of Pancreatic Cancer
  - 5.1.2. Use of Endoscopic Retrograde Cholangiopancreatography (ERCP) in Patients with Pancreatic Masses and Biliary Tract Obstruction
  - 5.1.3. Use of Endoscopic Ultrasonography (EUS) in Pancreatic Cancer Patients or Pancreatic Masses
  - 5.1.4. Endosonographic Cholangiopancreatography (CEPEUS) in Pancreatic Masses and Biliary Tract Obstruction
  - 5.1.5. Diagnostic Modalities for Defining Pancreatic Cancer Resectability (CT, EUS, MRI)
  - 5.1.6. Clinical Impact of PET/CT with 18F-FDG in the Therapeutic Management of Patients with Pancreas Cancer
  - 5.1.7. Borderline Resectable Pancreatic Cancer
  - 5.1.8. Laparoscopic Distal Pancreatectomy: Indications and Technique
  - 5.1.9. Cephalic Pylorus-Preserving Duodenopancreatectomy vs. Whipple in Pancreatic Cancer
  - 5.1.10. Surgical Treatment of Ampulomas
  - 5.1.11. Adjuvant and Neoadjuvant Chemotherapy Treatment for Pancreatic Cancer
  - 5.1.12. Adjuvant and Neoadjuvant Radiotherapy Treatment for Pancreatic Cancer
  - 5.1.13. Advances in the Treatment of Patients with Metastatic Pancreatic Cancer
  - 5.1.14. Screening for Familial and Hereditary Pancreatic Cancer
  - 5.1.15. Cystic Lesions of the Pancreas of Neoplastic Origin
  - 5.1.16. Surgery for Cystic Tumors of the Pancreas
- 5.2. Cholangiocarcinoma and Gallbladder Cancer
  - 5.2.1. Epidemiology, Risk Factors and Diagnosis of Cholangiocarcinoma and Gallbladder Cancer
  - 5.2.2. What to Do with Cholangiocarcinoma
  - 5.2.3. Advances in the Treatment of Patients with Metastatic Cholangiocarcinoma and Gallbladder Cancer

- 5.3. Hepatocellular Carcinoma
  - 5.3.1. Epidemiology, Risk Factors and Diagnoses for Hepatocellular Carcinoma
  - 5.3.2. Staging and Treatment of Hepatocellular Carcinoma
  - 5.3.3. Resective Treatment vs. Liver Transplantation in Hepatocellular Carcinoma
  - 5.3.4. Locally Advanced Disease with Vascular Involvement Local Therapy vs. Systemic Therapy
  - 5.3.5. Drainage of Malignant Biliary Obstruction by Interventional Radiology
  - 5.3.6. First and Second Line of Systemic Therapy in Hepatocellular Carcinoma
  - 5.3.7. Recurrence of Hepatocellular Carcinoma after Transplantation

## Module 6. Collaboration in the Management of Oncology Patients

- 6.1. Palliative Management
  - 6.1.1. The Palliative Care Consultant in the Multidisciplinary Team: "Planning Treatments"
  - 6.1.2. A Model of Integration with Oncology: Enhanced Supportive Care
  - 6.1.3. Informed Consent: Are We Really Informing Our Patients?
  - 6.1.4. Palliative Management of Symptoms in Gastrointestinal Tumors
  - 6.1.5. Palliative Endoscopic Treatments
  - 6.1.6. Palliative Surgical Treatment
- 6.2. Emergencies and Comorbidities
  - 6.2.1. Why do Patients with Gastrointestinal Tumors Attend the Emergency Department and How Can Outcomes Be Improved?
  - 6.2.2. Infectious Comorbidity Management
  - 6.2.3. Cardiovascular Comorbidity Management
  - 6.2.4. Neurologic Comorbidity Management
  - 6.2.5. Endocrinological Comorbidity Management
  - 6.2.6. Nutritional Comorbidity Management
  - 6.2.7. Gastrointestinal Tumors in the Elderly
  - 6.2.8. Outpatient Care of Patients with Digestive System Oncology Pathology

## Module 7. From Clinical Management to Networking

- 7.1. Clinical Management in Digestive Tumor Units
  - 7.1.1. Principles of Clinical Management
  - 7.1.2. Intensified Recovery Programs in Colon Surgery
  - 7.1.3. Members, Functions and Decision-Making in Multidisciplinary Teams
- 7.2. Improving Networking
  - 7.2.1. Technological Platforms for Patient Monitoring and Control
  - 7.2.2. The Collaborative Online World
  - 7.2.3. Decision Support Systems in Oncology Based on Artificial Intelligence

“An online program that will introduce you to the latest advances in networking and technology platforms for patient monitoring”





06

# Methodology

This academic program offers students a different way of learning. Our methodology uses a cyclical learning approach: **Relearning**.

This teaching system is used, for example, in the most prestigious medical schools in the world, and major publications such as the **New England Journal of Medicine** have considered it to be one of the most effective.



“

*Discover Relearning, a system that abandons conventional linear learning, to take you through cyclical teaching systems: a way of learning that has proven to be extremely effective, especially in subjects that require memorization"*

## At TECH we use the Case Method

What should a professional do in a given situation? Throughout the program, students will face multiple simulated clinical cases, based on real patients, in which they will have to do research, establish hypotheses, and ultimately resolve the situation. There is an abundance of scientific evidence on the effectiveness of the method. Specialists learn better, faster, and more sustainably over time.

*With TECH you will experience a way of learning that is shaking the foundations of traditional universities around the world.*



According to Dr. Gérvas, the clinical case is the annotated presentation of a patient, or group of patients, which becomes a "case", an example or model that illustrates some peculiar clinical component, either because of its teaching power or because of its uniqueness or rarity. It is essential that the case is based on current professional life, trying to recreate the real conditions in the physician's professional practice.



“

*Did you know that this method was developed in 1912, at Harvard, for law students? The case method consisted of presenting students with real-life, complex situations for them to make decisions and justify their decisions on how to solve them. In 1924, Harvard adopted it as a standard teaching method”*

The effectiveness of the method is justified by four fundamental achievements:

1. Students who follow this method not only achieve the assimilation of concepts, but also a development of their mental capacity, through exercises that evaluate real situations and the application of knowledge.
2. Learning is solidly translated into practical skills that allow the student to better integrate into the real world.
3. Ideas and concepts are understood more efficiently, given that the example situations are based on real-life.
4. Students like to feel that the effort they put into their studies is worthwhile. This then translates into a greater interest in learning and more time dedicated to working on the course.



## Relearning Methodology

At TECH we enhance the case method with the best 100% online teaching methodology available: Relearning.

This university is the first in the world to combine the study of clinical cases with a 100% online learning system based on repetition, combining a minimum of 8 different elements in each lesson, a real revolution with respect to the mere study and analysis of cases.

*Professionals will learn through real cases and by resolving complex situations in simulated learning environments. These simulations are developed using state-of-the-art software to facilitate immersive learning.*



At the forefront of world teaching, the Relearning method has managed to improve the overall satisfaction levels of professionals who complete their studies, with respect to the quality indicators of the best online university (Columbia University).

With this methodology, more than 250,000 physicians have been trained with unprecedented success in all clinical specialties regardless of surgical load. Our pedagogical methodology is developed in a highly competitive environment, with a university student body with a strong socioeconomic profile and an average age of 43.5 years old.

*Relearning will allow you to learn with less effort and better performance, involving you more in your specialization, developing a critical mindset, defending arguments, and contrasting opinions: a direct equation to success.*

In our program, learning is not a linear process, but rather a spiral (learn, unlearn, forget, and re-learn). Therefore, we combine each of these elements concentrically.

The overall score obtained by TECH's learning system is 8.01, according to the highest international standards.





This program offers the best educational material, prepared with professionals in mind:



#### Study Material

All teaching material is produced by the specialists who teach the course, specifically for the course, so that the teaching content is highly specific and precise.

These contents are then applied to the audiovisual format, to create the TECH online working method. All this, with the latest techniques that offer high quality pieces in each and every one of the materials that are made available to the student.



#### Surgical Techniques and Procedures on Video

TECH introduces students to the latest techniques, the latest educational advances and to the forefront of current medical techniques. All of this in direct contact with students and explained in detail so as to aid their assimilation and understanding. And best of all, you can watch the videos as many times as you like.



#### Interactive Summaries

The TECH team presents the contents attractively and dynamically in multimedia lessons that include audio, videos, images, diagrams, and concept maps in order to reinforce knowledge.

This exclusive educational system for presenting multimedia content was awarded by Microsoft as a "European Success Story".



#### Additional Reading

Recent articles, consensus documents and international guidelines, among others. In TECH's virtual library, students will have access to everything they need to complete their course.





#### Expert-Led Case Studies and Case Analysis

Effective learning ought to be contextual. Therefore, TECH presents real cases in which the expert will guide students, focusing on and solving the different situations: a clear and direct way to achieve the highest degree of understanding.



#### Testing & Retesting

We periodically evaluate and re-evaluate students' knowledge throughout the program, through assessment and self-assessment activities and exercises, so that they can see how they are achieving their goals.



#### Classes

There is scientific evidence on the usefulness of learning by observing experts. The system known as Learning from an Expert strengthens knowledge and memory, and generates confidence in future difficult decisions.



#### Quick Action Guides

TECH offers the most relevant contents of the course in the form of worksheets or quick action guides. A synthetic, practical, and effective way to help students progress in their learning.



# 07 Certificate

The Professional Master's Degree in Digestive System Oncology guarantees students, in addition to the most rigorous and updated education, access to a Professional Master's Degree issued by TECH Technological University.





“

*Successfully complete this program  
and receive your university degree  
without travel or laborious paperwork”*

This **Professional Master's Degree in Digestive System Oncology** contains the most complete and up-to-date scientific program on the market.

After the student has passed the assessments, they will receive their corresponding **Professional Master's Degree** issued by **TECH Technological University** via tracked delivery\*.

The diploma issued by **TECH Technological University** will reflect the qualification obtained in the Professional Master's Degree, and meets the requirements commonly demanded by labor exchanges, competitive examinations, and professional career evaluation committees.

Title: **Professional Master's Degree in Digestive System Oncology**  
 Official N° of hours: **1,500 h.**

Endorsed by: GETTHI



\*Apostille Convention. In the event that the student wishes to have their paper diploma issued with an apostille, TECH EDUCATION will make the necessary arrangements to obtain it, at an additional cost.

future

health confidence people

education information tutors

guarantee accreditation teaching

institutions technology learning

community commitment

personalized service innovation

knowledge present quality

online training

development languages

virtual classroom

**tech** technological  
university

## Professional Master's Degree Digestive System Oncology

- » Modality: online
- » Duration: 12 months
- » Certificate: TECH Technological University
- » Dedication: 16h/week
- » Schedule: at your own pace
- » Exams: online



# Professional Master's Degree

## Digestive System Oncology

Endorsed by:

