

**TO PROFESSOR ROSEN MADJOV, MD, DSc
CHAIRMAN OF THE SCIENTIFIC JURY JURY
APPOINTED BY ORDER № R-109-196/16.04.2025
OF PROFESSOR DIMITAR RAIKOV, MD, DSc
RECTOR OF THE MEDICAL UNIVERSITY
"PROF. DR. PARASKEV STOYANOV" – VARNA**

REVIEW

By prof. Dimitar Ivanov Bulanov, MD, PhD

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Regarding: *Contest for the Academic Position of Professor in the Scientific Specialty "Surgery", Professional Field 7.1 "Medicine", Area of Higher Education 7 "Health and Sports" – one position, 0.5 full-time equivalent, for the needs of the Department of Abdominal Surgery, Department of Surgical Diseases, Faculty of Medicine, Medical University "Prof. Dr. Paraskev Stoyanov" – Varna, as announced in State Gazette No. 15/21.02.2025.*

One candidate has been admitted to participate in the competition – Assoc. Prof. Plamen Milchev Chernopolski, MD, DSc, a surgeon and lecturer at the Department of Surgery, Faculty of Medicine, Medical University "Prof. Dr. Paraskev Stoyanov" – Varna.

The documents submitted by Assoc. Prof. Plamen Chernopolski, MD, DSc, for participation in the competition are complete and in accordance with the applicable regulatory framework in the country.

The deadlines and procedures for conducting the competition have been duly observed, in compliance with the Law on the Development of the Academic Staff in the Republic of Bulgaria, its Implementing Regulations, and the Regulations for the Development of the Academic Staff at the Medical University "Prof. Dr. Paraskev Stoyanov" – Varna.

This review is based on Order №R-109-196/16.04.2025 issued by Professor Dimitar Raikov, MD, DSc, Rector of the Medical University "Prof. Dr. Paraskev Stoyanov" – Varna, by which I was appointed as a member of the Academic Jury, and on Minutes №1/30.04.2025 from the first meeting of the Jury, during which I was elected as a reviewer.

I. Brief Professional and Biographical Information

Assoc. Prof. Plamen Chernopolski was born in 1980. In 2005, he graduated with highest honors in Medicine from the Medical University "Prof. Dr. Paraskev Stoyanov" – Varna.

His entire professional and academic career has been closely linked to the Department of Surgery at the Medical University "Prof. Dr. Paraskev Stoyanov" – Varna and the Second Clinic of Surgery at University Hospital "St. Marina" PLC, Varna. His academic path began in 2008, when Dr. Chernopolski was appointed as a part-time assistant at the Department of Surgery. In 2009, following a successful competitive examination, he was appointed as a full-time assistant at the same department, and in 2011 he obtained a specialty in Surgery.

Thanks to his strong motivation and the qualities he demonstrates as a surgeon, educator, and researcher, the candidate in this competition has progressed relatively quickly by Bulgarian academic standards through all stages of academic development. Between 2013 and 2015, he was a full-time doctoral student in the Department of Surgery. In 2015, he successfully defended his dissertation entitled "*Palliative Interventions in Malignant Jaundice*", earning the educational and scientific degree *Doctor (PhD)* in the doctoral program *General Surgery*.

In 2016, he was appointed Assoc. Prof. of Surgery in the Department of Surgery, Faculty of Medicine, at the Medical University "Prof. Dr. Paraskev Stoyanov" – Varna.

Since November 2023, Assoc. Prof. Chernopolski has held the highly responsible position of Head of the Second Clinic of Surgery at University Hospital "St. Marina" – Varna, which serves as a clinical training base for medical students in the Department of Surgery.

In 2024, he successfully defended a doctoral dissertation entitled "*Intra-abdominal Abscesses*" and was awarded the scientific degree *Doctor of Medical Sciences*.

Since March 2024, he has served as Head of the Abdominal Surgery Teaching Division, Department of Surgery, Faculty of Medicine, Medical University "Prof. Dr. Paraskev Stoyanov" – Varna.

II. Postgraduate qualifications, courses and specializations

The professional trajectory of Assoc. Prof. Plamen Chernopolski is marked by a consistent and determined pursuit of continuous professional development and mastery of new surgical skills, evident from the very beginning of his surgical and academic career. He has undertaken numerous specializations both in Bulgaria and abroad in various fields of abdominal surgery. Among the many courses and postgraduate training programs he has completed, the following are particularly noteworthy: Hilar Cholangiocarcinoma and Gallbladder Cancer, Sofia (2012); Chirurgia Generale e del Pancreas – Istituto del Pancreas, Verona, Italy (2017); Laparoscopic Suturing Course, Herceghalom, Hungary (2017); 11th European Digestive Surgery (EDS) Postgraduate Course, Budapest, Hungary (2017); Postgraduate Teaching Programme, 26th UEG Week, Vienna, Austria (2018); Basic Laparoscopic Skills Course, Vienna, Austria (2018); Half-Day Hands-on Course on TEO/TEM, Vienna, Austria (2018);

ESSO-EYSAC Hands-on Course on Liver Surgery, Innsbruck, Austria (2019); Klinikum StadtSoest, Clinic for General, Visceral, and Endocrine Surgery, Germany (2019); Colorectal Surgery, Beaujon Hospital, France (2020); ESSO Webinar: Basics in Liver Surgery – From Theory to Practice (Online, 2021); Regional Approach in the Treatment of Chronic Venous Disease, Belgrade, Serbia (2021); Acquired certification in Diagnostic Upper and Lower Gastrointestinal Endoscopy (2022); Acquired certification in Conventional Abdominal Ultrasound in Gastroenterology and Superficial Structures; Global Surgeon Summit – 3rd Convention of Surgery, Meril Academy, Gujarat, India (2023); IASGO Pre-Congress Course: IOUS and Ablations in Liver Tumors, Verona, Italy (2023); Core Skills in Laparoscopic Surgery, Surgical Skills Centre, Ninewells Hospital, Dundee, Scotland (2024); THD Endo-Anal, Endo-Rectal & Pelvic Floor Ultrasound Course Webinar, Rome (2024); New Perspectives in Hepatobiliary and Pancreatic Surgery – Advanced Course, IRCAD, Strasbourg (2024); Balkans GI Summit in Hepatobiliary & Gastric Cancers, Zagreb (2024); Emergency Surgery Course (ESC), Graz, Austria (2025).

Assoc. Prof. Plamen Chernopolski is an active member of the Bulgarian Medical Association, the Union of Medical Specialists in Bulgaria, the Bulgarian Surgical Society, the European Society of Endoscopic Surgery, European Digestive Surgery, and the International Association of Surgeons, Gastroenterologists, and Oncologists.

III. Research Activity, Scientific Output, and Contributions

A very positive impression is made by the structured and transparent manner in which the candidate has presented his scientific work and scientometric data. Assoc. Prof. Plamen Chernopolski has accurately and systematically outlined the scientific publications subject to review within this procedure, while also providing detailed information regarding all relevant scientometric indicators. These include those used in support of his PhD dissertation, his competition for the academic position of „Associate Professor“, as well as those submitted during the procedure for the award of the scientific degree „Doctor of Medical Sciences“.

In total, the number of full-text scientific publications submitted by Assoc. Prof. Chernopolski for the purposes of the current competition amounts to 42. Ten of these publications (designated as B4) have been published in journals that are referenced and indexed in internationally recognized scientific databases, in accordance with Appendix 1 (“Minimum Scientometric Requirements of MU–Varna”) of the Regulations for the Development of Academic Staff at the Medical University – Varna, in the field of higher education Area 7 “Health and Sports”, Professional Field 7.1 “Medicine.” These publications are properly formatted and submitted as part of the „*Extended Habilitation Reference Report*“.

Thirteen of the remaining publications submitted for review are indexed in major international databases (Scopus/Web of Science), and the remaining nineteen have been published in non-indexed but peer-reviewed scientific journals.

Evaluation of the „Extended Habilitation Report“ and contributions in the scientific publications

The bibliography used in the preparation of the articles forming the extended habilitation report is extensive and includes a total of 194 sources, distributed as follows for each article: B4.1–13; B4.2–41; B4.3–21; B4.4–15; B4.5–8; B4.6–11; B4.7–23; B4.8–31; B4.9–20; and B4.10–11.

The analyzed articles present the candidate's current research pursuits, with eight published within the last two years, demonstrating his direct involvement in the studies, where he is first author in 30% and second author in 70% of the publications. All provided publications contain original developments, and in four articles (40%) a literature review of the investigated problem is included (Nos. 2, 4, 7, 9).

The submitted "*Extended Habilitation Report*" encompasses three main areas:

✓ Rare Cases in Abdominal Pathology (B4.1, 2, 3, 4, 8, 10).

A rare case of Felinosis of the spleen is presented in a patient operated on for a splenic abscess, with histological results confirming the etiology as *B. burgdorferi*. This represents a scientific and practical contribution due to the rare pathology described (B4.1). Three cases of Frantz tumor are presented—personal experience and analysis of the global literature concerning this exceptionally rare pancreatic neoplasm—with formulated treatment recommendations for this pathology (B4.2). The clinical course of disease, surgical tactics, and extent of operative interventions were analyzed in a group of four patients with a history of melanoma, diagnosed and treated for small bowel ileus and/or gastrointestinal bleeding (B4.3). A case study in abdominal pathology—abdominal actinomycosis—is presented, along with a proposed diagnostic and therapeutic algorithm. Differential diagnostic aspects of imaging studies in an infiltrative intra-abdominal mass with unusual aggressiveness and heterogeneous contrast enhancement are analyzed in the context of a clinical picture dominated by an inflammatory clinical-laboratory syndrome (B4.4). A substantial series of patients—19 women and 13 men—with neuroendocrine tumors of various organ localizations (colon, stomach, pancreas, adrenal glands, rectum, small intestines), including metastatic stages, treated at the Second Clinic of Surgery between 2010 and 2022, is analyzed. The surgical tactics, strategy, and extent of intervention for each localization, relative to tumor differentiation grade and T-category, are examined, emphasizing the potential and advantages of minimally invasive surgical methods and the importance of an interdisciplinary approach in the overall diagnostic and therapeutic strategy for these cases (B4.8). In a separate scientific study, a rare clinical case of ileus due to incarceration of a bowel loop in the anterior abdominal wall at the site of a recent laparoscopic intervention (trocar hernia) is presented. A large number of literature sources are reviewed, and conclusions with applied significance regarding the operative-technical risks in performing trocar incisions are drawn (B4.10).

✓ Intra-abdominal Abscesses. A cohort of 26 patients with liver abscesses treated

at the Second Clinic of Surgery at UMHAT “St. Marina” – Varna was examined. The comparative capabilities of imaging modalities and the significance of ultrasonography in determining the feasibility of percutaneous treatment were characterized. Drainage techniques under imaging guidance are presented, including percutaneous drainage, surgical drainage, and drainage via ERCP. The importance of early diagnosis as a decisive factor in the treatment of these patients and the surgical approach is discussed, with a diagnostic and therapeutic algorithm proposed for this pathology type (B4.5). A detailed analysis of the socio-economic and clinical aspects of antibiotic treatment for intra-abdominal abscesses was conducted, including an assessment of the effectiveness of initial (empirical) antibiotic therapy. The conclusions have contributory and practical value, as a diagnostic and therapeutic algorithm is outlined that reduces the negative effects and risks associated with the empirical initiation of antibiotic treatment in this severe surgical pathology (B4.6).

✓ **Postcholecystectomy Syndrome.** Diagnostic and therapeutic strategies and treatment methods for patients with postcholecystectomy syndrome are presented, highlighting their role in optimizing outcomes and reducing complications and mortality in these patients. The significance of surgical treatment outcomes for cholelithiasis is examined from the perspective of general practitioners, including possibilities for patient follow-up, analysis of diagnostic data, and interdisciplinary collaboration in primary healthcare settings (B4.7, 9).

The publications encompassed by the submitted “*Extended Habilitation Report*” are predominantly of a practical and applied nature (B4.1, 2, 3, 4, 5, 6, 7, 8, 9, 10). Some present innovative approaches within their respective fields (B4.5, 6, 7, 8, 9), while others can be regarded as publications with theoretical contributions containing original results published for the first time in Bulgaria (B4.1, 2, 3, 4, 10).

The main research directions of Assoc. Prof. Chernoposki, D.M.Sc., outlining contributions beyond those included in the submitted “*Extended Habilitation Report*,” can be categorized within the following areas of surgical pathology:

✓ **Gastrointestinal Stromal Tumors (GIST).** Retrospective and prospective studies involving large patient cohorts with this tumor type, treated during different time frames—2003 to 2014 (41 patients) and 2003 to 2017 (59 patients) are presented. These works analyze various aspects of tumor classification, diagnostic features, and the surgical tactics and strategies employed in managing this rare tumor pathology. The significance of key clinical and morphological factors influencing the therapeutic process, which determine the prognosis of the disease, is thoroughly examined (G7.6, G7.8).

✓ **Diseases of the Hepatobiliary System.** Rare cases of hemorrhagic cholecystitis identified intraoperatively in the context of gallbladder cancer are presented. A literature review is conducted with emphasis on the clinical presentation and physical findings, alongside an analysis of various risk factors such as biliary neoplasms, systemic diseases, coagulopathies, and others (G7.1). A series of 69 patients with iatrogenic injuries sustained during laparoscopic cholecystectomy, treated between 2001 and 2021 is examined. These patients underwent

reconstructive biliary tract surgeries. The studies provide a detailed analysis of the operative and technical specifics of these severe intraoperative injuries, the postoperative period, and long-term outcomes. The importance of an anatomical approach, precise surgical technique, the surgeon's learning curve, and adequate instrumentation are emphasized as fundamental for preventing iatrogenic injuries during gallbladder and biliary tract operations, as well as the critical timing of surgical correction in cases of intra- and postoperative complications (G7.10). In a series of 47 cases, the focus is on a severe postoperative complication postoperative pyogenic liver abscess in patients treated over a 15-year period (2001–2016). The causes of such complications are analyzed, highlighting the role of biliary strictures, risks associated with insufficient blood perfusion of biliodigestive anastomoses, microbial contamination of bile, the extent of liver resections, among others. A practically useful treatment algorithm is proposed, which includes percutaneous or surgical drainage combined with antibiotic therapy (G8.3). A series of 26 patients is studied concerning the diagnosis and treatment of biliodigestive fistulas and biliary ileus. The main etiological factors and causes of biliodigestive fistula formation - cholestasis combined with a destructive inflammatory process are systematized. Preoperative diagnostic approaches are analyzed. The significance of an individualized approach to the choice of surgical technique, based on the etiology, localization of the fistula, and the degree of organ involvement, is demonstrated (G8.4). An analysis of a large series of 121 patients operated on for hepatic echinococcosis is presented, with emphasis on one of the most severe postoperative complications postoperative biliary fistula. The clinical significance of the morphological characteristics of the echinococcal cyst, and methods for intraoperative assessment of the cyst capsule aimed at detecting open biliary ducts or the risk of their injury during different surgical techniques, are investigated (G8.7). In a series of 36 patients, experience with a minimally invasive approach to the treatment of pyogenic liver abscess is presented (2001–2017), with patients treated exclusively by minimally invasive methods. The applied surgical techniques percutaneous drainage, percutaneous aspiration, and laparoscopic drainage are analyzed and recommended as the first-choice safe therapeutic approach in these cases, as they contribute to reducing the number of open abdominal surgeries and, consequently, postoperative complications and hospital stays (G8.8).

✓ **Diseases of the Small and Large Intestine.** A series of 31 patients with diverticulitis complicated by abscess was studied. Demographic data, clinical course, and disease severity were analyzed, along with surgical outcomes such as time to intervention, restoration of bowel passage, nutrition, length of hospitalization, complications, reoperations, and mortality. Diverticulitis was classified as complicated or uncomplicated based on history, severity of clinical symptoms, and imaging findings. Although there is consensus regarding very mild and very severe forms of diverticulitis, treatment of moderate cases often lacks evidence-based guidelines and relies on intuitive judgment and subjective recommendations (G7.4, G8.14). A retrospective analysis was performed on the clinical characteristics, diagnostic and therapeutic procedures, and outcomes of 676 patients with malignant colorectal obstruction treated over 20 years. Risk factors associated with the development of complications and poor

prognosis were systematized. Results of surgical treatment of 506 patients who underwent radical bowel resection were analyzed, while 32 patients received conservative treatment. A surgical treatment algorithm was proposed based on tumor location, intraoperative disease stage, presence of obstructive symptoms, patient age, comorbidities, nutritional status, and other factors (G7.5). Scientific works (G7.9, G7.11) present experience in the diagnosis and treatment of 59 adult cases of intestinal intussusception - a rare condition that differs significantly in etiology from pediatric cases. The etiology of the obstructive condition and types of surgical interventions are analyzed. Studies on small bowel tumors are reported in works G7.13 and G8.12. A series of 23 patients over 14 years is included. The histological tumor types, diagnostic algorithm in the context of atypical clinical presentation, and the positive role of computed tomography (CT) and magnetic resonance imaging (MRI) are analyzed. These imaging methods significantly improve tumor verification and support surgical intervention, which remains the only radical treatment option. A contributory study of 26 patients with intestinal fistulas (G8.6) is presented, analyzing etiology, classification, diagnostic process, management depending on volume and type of secretion, and types of surgical treatment. Scientific works G8.15 and G8.16 analyze 46 patients with peri-appendiceal abscess and propose a treatment algorithm focusing on "source control" and "effective antimicrobial therapy."

✓ **Herniology.** The study encompasses a large series of patients with postoperative hernias (G8.9) - a total of 281 cases, including recurrent postoperative hernias (G8.10) - 38 cases, the treatment of which remains a challenge for every surgeon. The clinical presentation, etiological factors, comorbidities, assessment of the abdominal wall tissues and their reconstructive potential, indications and risks associated with the use of synthetic meshes, as well as the surgical and technical aspects of reconstructive procedures, have been thoroughly analyzed. The comprehensive analysis leads to conclusions with practical significance aimed at improving surgical outcomes and enhancing patients quality of life.

✓ **Other Topics.** The socio-economic aspects of antimicrobial treatment in intra-abdominal abscesses have been critically examined. A comprehensive assessment of the burden on healthcare resources associated with the diagnostic and therapeutic process has been carried out, with particular attention to the use of empirical antimicrobial therapy, which leads to a substantial increase in treatment costs. In response, a diagnostic and therapeutic algorithm has been proposed to optimize clinical management of this condition (B.4.5). Drawing on extensive clinical experience in the treatment of soft tissue sarcomas located in the retroperitoneal space (51 cases), prognostic factors have been identified that contribute to improved surgical outcomes in both primary and recurrent retroperitoneal sarcomas (G7.12). Also of notable contribution is the candidate's involvement in the development of consensus statements in key areas of surgery with a strong practical orientation. These include: "*Indications for Surgical Treatment of Acute Pancreatitis*" (G8.17), "*Primary, Secondary, and Tertiary Peritonitis – Definition, Classification, Specific Clinical Features, and Treatment*" (G8.18), and "*Source*"

Control in Peritonitis” (G8.19). These publications serve as practical guides for surgeons, presenting both a historical overview and the most current developments in the classification of these conditions, as well as diagnostic and therapeutic strategies. The content addresses conservative management, shock control, early identification and elimination of the source of peritonitis, and comprehensive control of the septic focus. Furthermore, detailed attention is given to surgical-technical aspects, the type and extent of resection and drainage techniques, the role of minimally invasive procedures, optimal timing of surgical intervention, risk factors, complications, and their prevention and management.

Assoc. Prof. Chernopolski has been an active participant in the organization and implementation of national surgical scientific events and a regular contributor to major international surgical forums, presenting both oral communications and posters since the very beginning of his professional career. His academic engagement in this area includes participation in a total of 50 scientific forums, 13 of which were held abroad. In reviewing the materials submitted as part of the competition procedure, and according to the “Report on Similarity of Scientific Publications” provided by the Publishing Department of the Medical University “Prof. Dr. Paraskev Stoyanov” – Varna (Ref. № 010-2025/20.03.2025), no evidence of similarity or duplication in the scientific publications was identified.

IV. Teaching and methodological activity

Assoc. Prof. Chernopolski is an active lecturer in the discipline of *Surgery*, with over 15 years of teaching experience. He delivers lectures and conducts practical training sessions in surgery for both Bulgarian and English-speaking medical students, and he is actively involved in the supervision of the pre-graduation clinical internship in surgery. The attached reports indicate a very high teaching workload - a total of 1,656 academic hours over the past four academic years, with his annual in-class teaching commitment exceeding 350 hours, compared to the required minimum of 99 academic hours set by the higher education institution. In parallel, Assoc. Prof. Chernopolski serves as a doctoral supervisor in the PhD program in Surgery. He has supervised one doctoral student to successful dissertation defense (Dr. Hristo Nikov, 2023), and is currently supervising three full-time PhD candidates (Dr. Vyara Grigorova, Dr. Nikolay Nikolov, and Dr. Filip Gabarski), all of whom are in the process of developing their dissertations.

V. Scientometric Indicators

The analysis of the submitted materials and the attestation report evaluating Assoc. Prof. Chernopolski’s scientific and teaching activity in accordance with the minimum national requirements under Art. 2b, para. 2, 3, and 5 of the Law on the Development of Academic Staff in the Republic of Bulgaria, as well as the specific requirements outlined in Appendix 1. of the Regulations for the Development of Academic Staff at the Medical University “Prof. Dr.

Paraskev Stoyanov” – Varna, for Field 7 Healthcare and Sports, Professional Area 7.1 Medicine, confirms a total score of **1,025.54 points (significantly exceeding the minimum required 550 points)** These points are distributed across the respective groups as follows:

Group “A”–Indicator1: = **50 points** (minimum required - 50 points)
Group “B” – Indicator 4: = **255 points** (minimum required - 100 points)
Group “Г”:
- Indicator 7 = 272 points
- Indicator 8 = 103.5 points
Total for Group “Г” = **375.54 points** (minimum required - 200 points)

Group “Д”:
- Indicator 11 = 170 points
- Indicator 12 = 25 points
Total for Group “Д” = **195 points** (minimum required - 100 points)

Group “Е”:
- Indicator 13 = 40 points
- Indicator 14 = 40 points
- Indicator 15 = 40 points
- Indicator 22 = 30 points
Total for Group “Е” = **150 points** (minimum required - 100 points)

Total score = **1,025.54 points** (minimum required - 550 points)

Conclusion

Assoc. Prof. Dr. Plamen Chernopolski, MD, PhD, is a surgeon at a well- established and estimable university surgical clinic and department, with longstanding traditions in clinical care, education, and research. He is a well-developed, responsible, and highly competent medical surgeon, a respected specialist within the surgical community, who has consistently progressed through all stages of the academic career path of a clinical educator. The professional development of Assoc. Prof. Dr. Plamen Chernopolski, MD, PhD, along with the supporting evidence of his research and teaching activities, demonstrates a clear upward trajectory, reflecting both his personal and professional qualities.

My comprehensive assessment of Assoc. Prof. Dr. Chernopolski within the context of this academic competition is highly positive. I am convinced that he fully meets and significantly exceeds the requirements set forth in the Law on the Development of Academic Staff in the Republic of Bulgaria, its implementing regulations, and the Regulations for the

Development of Academic Staff at the Medical University "Prof. Dr. Paraskev Stoyanov" – Varna, for holding the academic position of „Professor“ in the professional field of Medicine.

I will confidently vote „YES“ for awarding the academic position of „**Professor**“ in the specialty „Surgery“ to Assoc. Prof. Plamen Milchev Chernopolski, MD, PhD, for the needs of the Department of Surgical Diseases, Faculty of Medicine, at the Medical University "Prof. Dr. Paraskev Stoyanov" – Varna.

Заличено на основание чл. 5,
§1, б. „В“ от Регламент (ЕС)
2016/679

Respectfully,

Prof. Dimitar Iv. Bulanov, MD; PhD

Sofia

16.06. 2025