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# Science Takes Centre Stage in Buenos Aires Join us for the 36th Congress of the SIU

Not only does the SIU 2016 programme cover a breadth of topics, but these are presented in a variety of innovative session formats to ensure that programming is informative, dynamic, and interactive. Selected sessions will be translated into Spanish.

The programme has something for everyone—including, but not limited to: Master Classes covering enhanced recovery in urology and pathological classifications in oncology, Shifting Sands on systemic therapies vs immunotherapy and new technologies in stone disease, Debates on focal therapy in prostate cancer and mesh, Global Perspectives on reconstructive surgery, Surgical Tips on male incontinence and female urology, Surgical Demonstrations on laparoscopic urology and robotic cystectomy, Parallel Plenaries *Continued on page 3* 

# SIU Around the World EAU 2016, Munich, Germany

Joint Session of the European Association of Urology and The Société Internationale d'Urologie

The joint session of the EAU and the SIU was organized by SIU President, Dr. S. Naito (Japan) and the Director of the European School of Urology, Dr. J. Palou (Spain), on March 11, 2016, during the EAU Congress in Munich. The theme of the session was "Optimal Diagnosis and Management of Non-Muscle Invasive Bladder Cancer (NMIBC) and Localized Renal Tumors." Dr. J.A. Witjes (The Netherlands) joined the NMIBC session as moderator. Dr. J. de la Rosette (The Netherlands) presented the significance of narrow band imaging and photodynamic diagnosis in improving diagnosis and treatment outcomes for NMIBC. Dr. T.R.W. Herrmann (Germany) introduced the technique of transurethral en-block resection of NMIBC, and emphasized its significance for accurate pathological T staging. Dr. P. Gontero (Italy) reviewed prognostic factors and criteria that indicate the need for aggressive treatment for patients with high-grade T1 bladder cancer.

Continued on page 4

# Message from the Publications Chair



Shin Egawa, MD

I am writing this column at the beginning of April. As you may know, April in Japan is the season of cherry blossoms. Along with the first visit of springtime, cherries start blooming everywhere.

By nature, cherry flowers are gorgeous and we can see them in many parts of the

world. In Japan, from time immemorial, they have been especially prized. However, the peak of blooming lasts for only about a week. One day, they start blooming, and the flowers fall apart in a week. The fleetingness of this beauty reminds us of how fragile life is, and resonates deeply with the Japanese people.



While the cherries bloom, people have parties under the branches filled with flowers. They enjoy drinking, dancing, singing and talking. In Japan, cherry blossoms are viewed as special and significant.

I hope each of you enjoy the current season, from wherever you may be reading this!

During SIU 2016 in Buenos Aires, a large joint session involving seven Asian countries is planned.

We are considering the theme "Asian Urology: Understanding Its Diversity". Alongside, there will also be symposia focused on Urology in Africa and the Middle East. Attempting to understand the different cultural backgrounds of different countries and regions of the world adds complexity to scientific sessions and makes for a more dynamic programme. Such understanding surely contributes to the improvement of urological care worldwide, which is the goal of our Society.





### SIU Publications Committee Chairman

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# Editor's Note

### Dear Readers,

Upon browsing through this June edition of the newsletter, you will see that SIU has been busy during the first half of 2016! Indeed, from SIU-endorsed events, participation in urological congresses around the world, developing new and state-of-theart content for our eLearning platform and planning our upcoming congress in Buenos Aires, there is never a quiet moment! Stay connected with us and share your own news by following us on Twitter at SIU\_Urology, or adding us on Facebook (SIUUrologyIntl).

### Don't Miss!

- Details on the SIU 2016 Scientific Programme, including the SIU's second Nursing Symposium!
- Profiles and testimonials from SIU scholars and last year's SIU-UMN Leo Fung Fellow.
- Highlights from the recent SIU-endorsed events
- Upcoming content on SIU Academy

We hope you will enjoy this issue. Do you have an event or article you want to share with SIU Members? Let us know! All contributions and questions/comments regarding the current issue can be directed to <u>editor@siu-urology.org</u>. We'd love to hear from you.

Anna Johansen editor@siu-urology.org

Submission deadline for next issue: 5 PM EST, June 11, 2016

# Science Takes Centre Stage in Buenos Aires



Margit Fisch, Germany SIU Scientific Programme Co-Chair

Gopal Badlani, United States SIU Scientific Programme Co-Chair

covering molecular medicine, overdiagnosis and overtreatment and frontiers in imagining. The SIU is also honored to welcome esteemed guest speakers from the American Urological Association, Confederacion Americana de Urologia, European Association of Urology, Pan-African Urological Surgeons' Association, Sociedad Argentina de Urologia, and the Urological Association of Asia.

For early risers, make sure you reserve your spot at one of the morning Instructional Courses. These intimate sessions allow for more audience participation and interaction with faculty and provide real tips and tricks for dealing with some of the most important issues in urology, including management of priapism, testosterone replacement therapy, complications of PCNL, and surviving prostate cancer.

# About Buenos Aires...

- While Buenos Aires is known as the "Paris of South America" for its stunning architecture, cosmopolitan atmosphere, shops featuring the latest fashions, and cosy cafes & bistros, its vibrant culture—music, dancing, cuisine—sets it apart from anywhere you've ever been before.
- The Universidad de Buenos Aires (UBA) was founded in 1821 and is the largest institution of higher education in the country, a nation with a 98% literacy rate.
- Avenida 9 de Julio is the widest street in the world at 140 meters wide and 12 lanes of traffic. It typically takes at least 2 traffic light rotations to cross.
- The city of Buenos Aires has 48 districts called "barrios", which include La Boca, Palermo, Recoleta, Caballito, San Cristobal and Puerto Madero, to name a few.

# **REGISTER EARLY AND SAVE UP TO 200 EUROS!**

Early registration deadline is **June 13, 2016**. Missed it? Don't despair, you can still benefit from reduced rates until August 29.

Register and Book your hotel before June 13, 2016 and you will automatically be entered to win one of the following prizes:

Grand Prize: Complimentary registration and housing 1st Prize: Complimentary hotel stay 2nd Prize: Complimentary registration 3rd Prize: 50% off registration



Selected sessions will be transmitted live and made available on-demand via SIU's official online congress platform, *SIU@U*.

continued from page 1

# **Surgical Masters Day**

On Friday, October 21, be the first to view new, uncut footage of state-of-theart BPH surgeries from experts around the world, moderated by Profs Mostafa Elhilali (Canada) and Petrisor Geavlete (Romania).

For full programme details, visit the Congress section of our website, www.siu-urology.org

# 2nd Nurses' Educational Symposium

Stay up-to-date with advancements in urological nursing around the world, including important topics such as:

- Prostate Cancer: Diagnosis and Implications for Management
- The Aging Urology Patient: Implications for Nursing Practice
- Male and Female Incontinence
- Conservative Management of Stone Disease
- Let's not Forget the Operating Suite: Access to Equipment
- Pediatric Urology: Transition from Child to Adult
- Urinary Diversion: What Happens When All Else Fails?
- Nursing Solutions in Challenging Cases

The symposium will offer translation from English to Spanish. Nurses benefit from reduced registration rates that include access to all scientific sessions.





SIU Member since 2002.

# MY SIU IS..

"a truly international organization that treats its international members with special consideration. My main reason for attending SIU [Congresses] is to learn from senior colleagues and to network... SIU has increased my knowledge base and improved my skills."

### What is YOUR SIU? Let us know at

a <u>communications@siu-urology.org</u>

# SIU Around the World

# EAU 2016, Munich, Germany continued from page 1



Seiji Naito

During the localized renal tumor session, Dr. N. Clarke (United Kingdom) joined as moderator. Dr. U. Capitanio (Milan, Italy) presented current and future perspectives of kidney biopsies for the preferred management of small renal tumors. Dr. R. A. Rendon (Canada), Dr. O. Rodriguez Faba (Spain) and Dr. I. S. Gill (United States) presented optimal indications, techniques, oncological/functional outcomes and limitations of active surveillance, cryoablation and robot-assisted partial nephrectomy, respectively, as minimally invasive treatments for localized renal tumors.

The room remained near capacity throughout the entire programme, and fruitful discussions took

place among experts from both societies and the attendees. This joint session provided a valuable opportunity to deepen the understanding of updated techniques and concepts for the diagnosis and treatment of NMIBC and localized renal tumors, and to foster collegiality and collaboration between both societies.

# **SIU Lecture at EAU**



**Badrinath Konety** 

SIU Vice President, Dr. Badrinath Konety presented a state-of-the-art lecture at EAU 2016 on Nonurothelial bladder cancer.



SIU Booth at EAU 2016



Members of SIU Executive with EAU General Secretary (Left to right: Badrinath Konety, Simon Tanguay, Christopher Chapple, Seiji Naito, Patrick Coloby)

A short description of the lecture is below: Non-urothelial bladder cancer comprises approximately 5% of all bladder neoplasms in general. Most common non urothelial tumours include squamous cell carcinoma and adenocarcinoma. This presentation will discuss management of the various non-urothelial forms of bladder cancer and touch upon the distinction between pure non-urothelial tumours and histologic variants of urothelial bladder cancer which may have different biologic behavior and respond to different treatment approaches.

# Did you see us at AUA and CIE?



Rafael Sanchez Salas

We hope we had the chance to meet with you at the American Urological Association Annual Meeting in San Diego, May 6–10! Dr. Rafael Sanchez Salas presented the SIU Lecture "Image guided therapy for Prostate Cancer: Quo vadis?" on Tuesday, May 10 at 0800.

SIU also had a presence at the annual Challenges in Endourology meeting in Paris, May 29–31. For more information this event and how you can access webcasts of this event, see page 8 of this issue!

### Visit us at UAA 2016! July 20–24

### Booth: 8

Are you headed to Singapore for the 14th Urological Association of Asia Congress, held in conjunction with UROFAIR 2016, Urology Residents' Course 2016 and the 30th Anniversary of the Sinagpore Urological Association? The congress takes place at the Suntec Singapore Convention and Exhibition Centre. For more information, visit www.uaacongress2016.sg

# SIU Endorsed Events Reports 7th International Meeting on Reconstructive Urology (IMORU)





Margit Fisch Course Director, IMORU VII SIU Scientific Programme Co-Chair

Following a three-year tradition, the 7th International Meeting on Reconstructive Urology (IMORU) took place at the University Medical Center Hamburg-Eppendorf, Hamburg, Germany, March 7-9, 2016. The IMORU was organzied by Prof. Margit Fisch. As in previous years, parallel live-surgeries from three operation theaters were performed to give the opportunity to observe the experts and discuss their techniques. More than 240 physicians from 42 countries participated in this event. The faculty consisted of internationally-respected experts with a strong reputation in the field of reconstructive urology. The operative focus was three-fold: 1) surgical management of complications after prostate surgery as urinary incontinence or anastomotic stricture after radical prostatectomy for which procedures such as artificial urinary sphincter implantation and reanastomosis of bladder neck stricture were demonstrated: 2) urethral reconstruction: internationally-known surgeons showed their tips and tricks during reconstruction of penile, bulbar and posterior strictures, such as buccal mucosal urethroplasty, complex urethral reconstruction of distal strictures after failed hypospadia repair and MESH graft urethroplasty for panurethral strictures; 3) techniques on reconstruction of the external male genitalia and surgeries in the field of pediatric urology with focus on hypospadias repair. In addition, corporoplasty in patients with Peyronie's disease and implantations of penile prosthesis were performed. For the first time, three centers renowned for Da-Vinci assisted reconstructive surgery (Aalst, Los Angeles and Dallas) provided direct transmission into the lecture hall on all three days and demonstrated their techniques for intracorporal urinary diversion, ureteral implantation and pyeloplasty. Poster presentations as well as state-of-the-art lectures enabled participants to discuss their experiences with colleagues. In cooperation with the Société Internationale d'Urologie, selected parts of numerous surgeries were streamed live on SIU Academy, Over 120 participants registered to view this event via SIU Academy. The next IMORU will be held in 2019.

# 5th Symposium "Urology Live"



Guido Kamphuis Faculty, 5th Symposium "Urology Live"

On Thursday, January 28, the 5th Urology Live event was held in Amsterdam, consisting of moderated live surgeries made possible by a collaboration between the city's two academic urology departments. This year was the first Urology Live event to be transmitted live via SIU Academy.

This year's focus was on endourology, and a wide variety of endourologic procedures were performed. All cases were prepared and introduced by Maaike Boute, a Resident from Amsterdam and endourology Fellow Michele Catellani from Milan. After a nice overview of testosterone deficiency and treatment strategies by Dr. Andreas Meissner, Prof. Jean de la Rosette and Dr. Joyce Baard, the first procedure began—a transurethral bladder tumour resection. In the meantime, Prof. Thomas Herrmann from Germany, prepared the second patient who also presented with macroscopic hematuria in follow up of a prostate carcinoma.

The third patient—undergoing a follow-up cystoscopy and bilateral ureterorenoscopy by Dr. Guido Kamphuis, assisted by Dr. Vitor Cavadas proved to be an interesting case for discussion amongst the panel composed by Prof. Pilar Laguna, Dr. Patricia Zondervan and Dr. Jakko Nieuwenhuizen.

The fourth patient was prepared for a combined ureterorenoscopy performed by Dr. Cavadas and mini percutaneous nephrolithotomy performed by Prof. Herrmann. The program continued with an interesting state-of-the-art lecture by Prof. Eric Meuleman on erectile dysfunction, while the fifth patient with extensive comorbidities and asymptomatic stones was prepared in the OR by Dr. Baard and Dr. Kamphuis.

Prof. Herrmann demonstrated a bipolar enucleation of the prostate in a man with LUTS due to obstruction by a forty gram prostate. Next, Dr. Martijn de Bruin from the Department of Biomedical Engineering gave a comprehensive presentation about new technological developments to improve optic diagnostics.

The last ureterorenoscopy of the day was performed by Dr. Cavadas, and Prof. de la Rosette performed the last procedure—a green light laser vaporization of the prostate—assisted by Dr. Baard.

With the help of the SIU and sponsors, the latest developments in endourology were shared with many urologists around the globe. The expert faculty involved will soon participate in another LIVE surgery event: SIU eGrand Rounds in Endourology (see page 7 of this issue).

If you weren't able to join for the live broadcast of this session, the event webcasts will soon be available on SIU Academy. •

# Urologists Can, and Should, Lead a Men's Health Social Movement –A Canadian Perspective



S. Larry Goldenberg CM, OBC, MD, FRCSC, FACS

Stephen Jarislowski Professor of Urologic Sciences Mohammed Mohseni Chair in Men's Health University of British Columbia 6th floor, 2775 Laurel Street, Vancouver, BC V5Z1M9

The statistics of Men's and Boys' Health are alarming. Males account for over 80% of spinal cord injuries, 82% of alcohol related deaths and 80% of successful suicides. Men are more likely to die from heart disease and diabetic complications, 29% more likely to be diagnosed with cancer and less likely to visit their doctor. On average, men live 4 to 6 years less than women, a life expectancy gap that has always been taken for granted rather than explained and addressed.

Many of the risk factors which lead to chronic illness remain highest among men and in 2013, an estimated 53% of Canadian men carried excess weight, 41% were inactive, 20% smoked tobacco and 12% consumed alcohol at levels that are considered to be hazardous or harmful. The total economic burden attributable to these four risk factors in Canadian males aged 30-64 is estimated at \$22.8 (95% Cl. \$19.5 - \$25.9) billion in 2013. or 27% higher than females in the same age group (\$16.7 billion, 95% CI, \$13.8 - \$19.6). Modeling a modest 1% annual relative reduction each year through to 2036 would reduce the projected annual economic burden in 2036 from \$26.9 to \$22.4 billion, with a cumulative cost avoidance between 2013 and 2036 of \$50.7 billion. And while these dollar costs are high, the effects on men's families and communities are even more significant when physically or mentally unwell men disappear from everyday life long before they die. Sadly, widows account for 45% of all Canadian women aged 65 and over.

Fortunately the past decade has seen society recognize the need to make men's health a distinct and important issue. In Canada, the Canadian Men's Health Foundation (CMHF), working with men's health 'Champions', and a wide variety of health organizations, politicians, unions, sports teams and corporations, is determined to motivate Canadian men, "one by one", to think about their health while they are still relatively healthy. The CMHF is opening the conversation on men's health and inspiring men to make the changes in their attitudes and behavior that will ultimately impact on their health and longevity.

Men must be encouraged in an individually directed way to take control of their health the way they endeavour to take control of everything else. The message to men is clear: health is gained or lost because of small daily decisions we make that add up over time. But the means of communicating to men will depend on their innate receptivity and this has to take place through "precision messaging", a communication strategy long used in the retail world.

The CMHF has created a website—www. DontChangeMuch.ca— which provides simple tips to help men get started down this path. CMHF has developed the first online tool to help men assess their health and their risk for some of the most common men's health issues in less than 10 minutes of online time. This "You Check.ca" tool is free, is anonymous and 100% confidential. It provides a customized report and offers lifestyle advice to help a man modify his own particular, reversible risk factors.

Urologists have an opportunity TODAY to be the leaders and advocates for men's health and to steer a globally expanding men's health movement. As a common "male portal" into the health system, urology can assume an expanded role in Male health issues from pediatrics to geriatrics. Many urologic problems have common etiologic factors with other diseases: bladder cancer and smoking; erectile dysfunction and cardiovascular disease; hypogonadism and metabolic syndrome; aging and osteoporosis; kidney stones and CVD/ DASH diet; BPH, Chronic Pelvic Pain, E.D., F.S.D. incontinence, prostate cancer, stone disease, UTI are all impacted by obesity; and prostate cancer has been linked to diet, obesity, smoking, alcohol and physical inactivity! As an advocate for general men's health, the urologist can help their patients attain better overall health. It has been recognized that smokers newly diagnosed with bladder cancer were almost five times as likely to quit compared to smokers in the general population, and the advice of the urologist and the bladder cancer diagnosis were the top two reasons cited for quitting. A brief smoking cessation intervention can more than double the odds (OR 2.31, p = 0.038) of patients attempting to quit smoking!

Urologists DO NOT have to treat non-urologic disease – just make patients aware and be the "Captain of the ship" with simple advice and direction about general preventive health, personal risk factors, environmental issues, healthy lifestyle modifications, general screening issues, and proactive recognition of symptoms. (or just steer them to a website such as dontchangemuch.ca). Urologists and Urology associations should be the clearinghouse for educational materials and for awareness of health issues at all stages of male life and should collaborate widely in organizing and disseminating standards of care, best practices, research efforts and educational teams.

Building on the expertise we currently have, urologists can become global leaders and develop a strong model of men's healthcare delivery, risk awareness, outreach, public and professional education, and research. We need to work with our institutions and government leaders to coordinate a system that will better understand men's attitude toward health, invest in male-sensitive approaches to health care provision, initiate health care education early on in life for boys and young men in schools and diverse communities, and develop coordinated health and social policies based on the best available standards of care to promote men's and boys' health. In Canada, CMHF believes that a new social movement. like seatbelts or recycling. will decrease the extent of men's health problems without adding another dollar, doctor, or hospital to the health care system.

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# What's New at SIU Academy

# Live eGrand Rounds in Endourology

Save the date for the next eGrand Rounds in Endourology to be transmitted live on SIU Academy

## MARK YOUR CALENDAR

The live events are scheduled from 0800-1630 Central European Time (GMT+2) Thursday, June 9, 2016 Thursday, June 30, 2016 Thursday, September 1, 2016 Thursday, October 6, 2016 Thursday, December 8, 2016

### Live surgeries will be chosen from the following:

- Ureteroscopic lithotripsy (URS): Stone and upper tract urothelial carcinoma (UTUC)
- Percutaneous nephrolithotomy (PCNL): mini/combined
- Transurethral resection of bladder tumour (TURBT): Storz professional imaging enhancement system (SPIEs)/en bloc resection
- Transurethral resection of the prostate (TURP): enucleation/resection/ Holmium

Planned lectures will focus on several topics: URS, PCNL, BPH, lasers in endourology, enhanced endoscopy, TURBT, surgical treatment, and treatment of urothelial tumours.

This educational activity was made possible by an unrestricted educational grant by SIU's Corporate Sponsor, Karl Storz.





# Take the newly accredited CME courses on SIU Academy and earn eLearning credits

AIM for NMIBC: Advanced Imaging Modalities for Non-Muscle Invasive Bladder Cancer

Learn about five new imaging techniques and their role in the diagnosis and management of NMIBC.

This case study is accredited by the European Accreditation Council for Continuing Medical Education (EACCME) for **1 European CME credit** (ECMEC).

# Faculty

Theo M. de Reijke, The Netherlands (Chair) Ashish M. Kamat, United States Badrinath R. Konety, United States Rafael Sanchez-Salas, France Arnulf Stenzl, Germany

This educational activity was made possible by an unrestricted educational grant by SIU's Corporate Sponsor, Karl Storz.

# What's New at SIU Academy

# **STREAM** of **mLUTS**: **SIU TR**aining program on **E**valuation **A**nd **M**anagement of **M**ale **LUTS**

# Module 1: Man with LUTS Module 2: Man with LUTS with risk of progression

Modules 1 and 2 focus on the multifactorial etiology of LUTS, screening challenges, management, treatment of men with co-existing LUTS and sexual dysfunction or other comorbidities, and appropriate follow-up. Each module is highly interactive and includes a series of videos that follow a patient from diagnosis to treatment.

Each module is is accredited by the European Accreditation Council for Continuing Medical Education (EACCME) for **1 European CME credit (ECMEC)**.

## Faculty Module 1

# Module 2

Stavros Gravas, Greece (Chair) Marco Blanker, The Netherlands Walter Ingarozza, Italy Jon Rees, United Kingdom Stavros Gravas, Greece (Chair) Mauro Gacci, Italy Jaspreet Sandhu, United States

All contents of this educational activity have been developed by the faculty appointed by SIU. This educational activity has been funded by SIU's Corporate Sponsor, GSK.

# SIU Endorsed Events

# **Recent SIU-endorsed Events Transmitted Live**

### Urologic Reconstructive Surgery Course

A practical course organized by Prof. Jean de la Rosette (the Netherlands) and Dr. Paulo Príncipe (Portugal), on minimally invasive techniques (laparoscopic and endourologic surgery) performed by surgeons with vast expertise in the field. The lectures and the live surgeries covered topics such as complications after radical prostatectomy, redo vesico-urethral anastomosis, penile implant surgery, implantation of inflatable penile prosthesis, management of pelvic fracture urethral injury, complications after pelvic surgery in female patients, vesico-vaginal fistula, prolapse, incontinence and LUTS and much more.

### 5th Symposium "Urology Live"

Organized by Profs. Jean de la Rosette and Eric Meuleman (The Netherlands), the Symposium included state-of-the-art live surgeries such as combined PCNL and RIRS, UTUC treated by RIRS, ISIRIS and Lithovue demos, mini-PCNL, TURBT "en bloc", XPS greenlight laser treatment, and bipolar transurethral prostate enucleation.

Free for SIU members and SIU Academy users for more information visit www.siu-urology.org/academy

### IMORU VII – 7th International Meeting on Reconstructive Urology

Margit Fisch (Germany) and a panel of international surgeons composed of Daniela Andrich (UK), Guido Barbagli (Italy), Sanjay Kulkarni (India), Allen Morey (USA) and Richard Santucci (USA), put together an outstanding 2-day meeting on reconstructive surgery to provide attendees with tips and tricks on reconstructive urological procedures.

The lectures and live surgeries covered the following topics:

- Reconstruction of penile, bulbar and posterior strictures
- Hypospadias repair in children and adults
- Reconstruction of the external male genitalia
- Corporoplasty in patients with Peyronie's disease
- Implantations of penile prosthesis
- Complications after prostate surgery such as incontinence, urethra-rectal fistula or anastomotic stricture after radical prostatectomy

For a brief report on the Urology Live and IMORU events, see page 5 of this issue.

# **Upcoming SIU-endorsed Events**

### 6th International Meeting on Challenges in Endourology May 29–31, 2016 Paris, France A highly educational program full of innovation, knowledge exchange, and valu-

able networking.

# 9th International Symposium on Focal Therapy and Imaging in Prostate and Kidney Cancer

June 23–25, 2016

Washington Duke Inn Hotel, Durham, North Carolina, United States A joint approach focusing on key issues and the latest developments in focal therapy.

### 2nd ESD (Experts in Stone Disease) Regional Meeting

August 5–7, 2016

Queensland, Australia

Bringing combined expertise in stone disease to the doorstep of urologists in developing nations.



# SIU Scholarship and Joint Fellowship Reports

# **FSIU Training Scholarships**

The Foundation of the Société Internationale d'Urologie scholarship programme for young urologists (less than 10 years since MD qualification) is one of the cornerstones of our educational mission. The programme involves training in a recognized institute located in the candidate's geographical area. There are also a number of opportunities for training abroad as a visiting scholar in an observational role.

For more information: www.siu-urology.org/foundation



Dr. Nazim Uddin Md. Arif Scholarship awarded: 2015 Training Centre: Singapore General Hospital

### Biography

Dr. Nazim Uddin Md. Arif was born December 30, 1970 in Chittagong, Bangladesh. He graduated from the Institute of Applied Health Sciences, University

of Chittagong in 1996. He did his Master in Surgery (Urology) in 2006 from Sindh Institute of Urology and Transplantation (SIUT) under Karachi University. Following this, he worked at Apollo Hospitals Dhaka until 2013. He joined Uttara Adhunik Medical College & Hospital, Bangladesh in 2013 as Assistant Professor in the Department of Urology. He is the co-author of 8 scientific publications and has presented several scientific papers at national and international conferences. He received training in endourology and transplant urology in India and Kuwait.

### **Excerpt from Report**

From the start of my training, I would come to the hospital early in the morning to join morning rounds, followed by clinical activities, out-patient clinics, evaluation of patients in the out-patient department (OPD), and operation theatre. During my tenure, I observed 235 surgeries and assisted 102 surgeries, such as: flexible ureterorenoscopy (URS), retrograde intrarenal surgery (RIRS), laser lithotripsy (LL), ultrasound and fluoroscopy guided percutaneous nephrolithotomy (PCNL), open cystectomy and urinary diversion (ileal loop conduit/orthotopic neobladder), laparoscopic simple nephrectomy, laparoscopic donor nephrectomy, laparoscopic radical nephrectomy, laparoscopic radical nephrectomy, graft nephrectomy, renal transplantation, robot assisted laparoscopic partial nephrectomy, robot assisted laparoscopic pyeloplasty, robot assisted laparoscopic radical prostatectomy, mid urethral sling procedure, urethroplast, and vasicovaginal fistula repair.

I tried to dedicate most of my time to learning operative surgical techniques. My main focus was on surgical techniques of PCNL, flexible URS, RIRS, LL, laparoscopic nephrectomy, and mid urethral sling procedure for stress urinary incontinence. I received good hands-on training in ultrasound-guided and fluoroscopy-guided puncture of kidney, different techniques of flexible URS, RIRS, LL, mid-urethral sling procedure, and renal transplantation. In the beginning of my medical career I assisted in a significant number of laparoscopic basic general surgical procedures like laparoscopic cholecystectomy; however, I did not receive exposure to laparoscopic urology. Thus, [the scholarship training] was a great opportunity to receive exposure to laparoscopic urology as, at the SGH Urology Centre, a good number of minimally invasive urological procedures are being done. I went to the laparoscopic simulation lab regularly, and I attended one workshop on laparoscopic partial nephrectomy with waterjet. I tried to assist on the maximum numbers of laparoscopic cases during my training period. I received significant exposure to cases in female urology and had good hands-on training in mid-urethral sling procedure for stress urinary incontinence. I observed a good numbers of modern robotic urological surgeries.

I am thankful to Dr. NG Lay Gaut (Head of the Department and Senior Consultant) for her kind help and guidance. I express my deepest respect and gratitude to Dr. Nor Azhari Mohd Bin Zam and Dr. Henry Ho Sun Sien, who were the main mentor of my training, truly speaking without their help, it could not be possible for me to learn that much. I acknowledge the help and cooperation of Dr. Lee Fang Jann, Dr. Sim Soon Phang Allen and all doctors of SGH Urology Centre. I am grateful to executive of SIU Central Office Ms. Isabel Kolodny and secretary SGH urology centre Ms. Angie See Beng Guek for their kind help. Last but not the least I acknowledge the extreme support and sacrifice of my parents, wife and son.



### Dr. Charles Mabedi

Scholarship awarded: 2015 Training Center: Kilimanjaro Christian Medical Centre

### **Biography**

Dr. Charles Mabedi, M.B.,B.S. was born on December 27, 1985, in Lilongwe, Malawi. He graduated as a medical doctor from the University of Malawi's College

of Medicine in 2009. His passion for urology and his desire to improve urology services in Malawi, led him to join a five-year urology residency program in 2011. He has coauthored 12 publications, and presented at scientific meetings. Currently, he is a final year urology trainee under the College of Surgeons of East, Central and Southern Africa (COSECSA), due to graduate at the end of 2016. As a young urologist, his main focus will be on patient care, training and clinical research.

### **Excerpt from Report**

I have just completed my six month (Aug 2015 to Jan 2016) fellowship at the ASEA-COSECSA institute of Urology at Kilimanjaro Christian medical centre (KCMC), Moshi, Tanzania. KCMC is located at the foot of Mount Kilimanjaro, the highest peak in Africa. KCMC is a regional referral centre for 11 million people, with a 450 bed capacity. The institute of urology has a 40 bed capacity with 2 senior specialists, and trainees, mostly from east Africa.

During my six-month fellowship, I was exposed to many academic activities. These included daily ward rounds, weekly teaching seminars, clinical conferences, outpatient clinics, minor theatre/day case procedures, and major theatre procedures.

I have gaining a lot of skills at this training centre. These include:

• Patient workup and preoperative evaluation

Continued on page 10

- Open surgery skills in general urology, oncology, paediatric, reconstructive urology
- Endoscopic surgery: I can now confidently do a urethrocystoscopy, TURBT, TURBx, TURP, TUIP, BNI, DVU among many others
- Postop management and follow up of different conditions
- Leadership and organizational skills (while on call and in lecturing undergraduate students)

There is a gap in upper tract endourology and minimally invasive treatment of urolithiasis. Hopefully, in the future the centre will be able to do more PCNLs, ureteroscopy, and ECSWL. There is also a gap in laparoscopic surgery, a discipline that is currently trending in urology globally. Despite these challenges, the KCMC offers an excellent environment for training urologists, and I would strongly recommend it for upcoming fellows.

I am close to completing my general urology specialist training. Soon I will graduate as a urologist under the College of Surgeons of East, Central and Southern Africa (COSECSA). When I return to Malawi, I plan focus on three keys areas: provision of clinical care, training of upcoming urologists, and research.

Special thanks to SIU for this opportunity; I am so grateful. To my instructors, Dr. Frank Bright,

Dr. Jasper Mbwambo and Prof. Mteta, I am who I have become because of their support and patience when I needed it most. I also benefited a lot from my fellow trainees, nurses and the whole staff of the urology institute.

# **International Pediatric Fellowship**

The University of Minnesota Foundation (UMF) and the Société Internationale d'Urologie (SIU) have established an international pediatric fellowship to be held at the University of Minnesota (UMN). The training is provided through the Pediatric Urology service at the University of Minnesota Masonic Children's Hospital.

For more information: www.siu-urology.org/society/fellowships



Dr. Rufus Wale Ojewola Received Fellowship: 2015

### Biography

Dr. Rufus Wale Ojewola was born on December 21, 1973. He studied Medicine and Surgery at Obafemi Awolowo University, Ile-Ife, Nigeria and obtained his MBChB degree in April 2001. He underwent in-

ternship training at Wesley Guild Hospital, OAUTHC, Ilesha from April 2001 to March 2002 and residency training in urology at the Lagos University Teaching Hospital (LUTH), Lagos, Nigeria between July 2005 and May 2011. He obtained fellowships of the West African College of Surgeons (FWACS) and Medical College of Surgeons of Nigeria (FMCS), both in urology, in May 2011. He is presently employed as a consultant urological surgeon at LUTH and a Lecturer at the College of Medicine of the University of Lagos, Nigeria. Presently, he has authored 24 publications in both local and international journals and has presented seven scientific papers at local and international conferences.

### **Excerpt from Report**

The UMN Masonic Children Hospital has twenty ORs, which are ever busy for different interesting adult and pediatric cases. The summary of the activities in the unit/centre include: Operating sessions on Mondays, Operation sessions/Clinic on Tuesdays, departmental meetings comprising of grand round presentations, mortality and morbidity, and Journal Club meetings on Wednesdays. Thursdays are clinic days, while Fridays are designated for operating theatre sessions. There are also monthly professorial lectures.

The pediatric urology operating sessions are interesting with various levels of activities; at least, not very busy with mainly minor, intermediate and major, as well as a few complex cases. The distribution of cases was similar to ours at home, but the management approach differs significantly based on available infrastructures and expertise. Unlike my practice of pediatric urology back at home, which is mainly open surgery, I witnessed the important roles of endoscopy and laparoscopy in pediatric urology. I participated in almost all pediatric urology cases that took place while at the centre. Altogether I observed about a hundred different pediatric urology procedures within the three-month fellowship. During this period, while many of the open techniques were similar to what I was used to, I learned some new or alternative ways of carrying out some of these procedures, which I found very useful. Endoscopic procedures in children were particularly interesting to me, as we do not have pediatric endoscopes in my centre. While at the centre, I watched with amazement the surgical expertise of the pediatric urologists in open, endoscopic and laparoscopic procedures. My experience with laparoscopy at the centre has made me develop a profound interest in uro-laparoscopy more than ever before. I realized that there were very few procedures that could not be accomplished laparoscopically and endoscopically, other than reconstructive urology cases. The experience/expertise of these surgeons is highly impressive and commendable.

In addition to my exposure in pediatric urology, the pediatric urologists I worked with were considerate and understanding in allowing me to visit other units in the department with interesting cases during some of their clinic sessions. I joined many adult endoscopic procedures (including TURP, green laser prostatectomy, ureteroscopy, etc.), robotic surgeries (radical nephrectomy, radical prostatectomy, etc.), and reconstructive surgeries (buccal mucosa ure-throplasty, bladder reconstruction, etc.). The vast experience of the urologists at the centre, as well as high patient load offered me a panoramic perspective of urologic practice. It was a scintillating experience watching the surgical wizard-ry of these great surgeons of international repute.

The centre also has an excellent simulation centre called SIM-PORTAL. I spent quality time here practising laparoscopy, ureteroscopy and green laser prostatectomy techniques amongst others. This became my routine for Wednesdays after the weekly academic meetings in the morning. The staff at the centre was extremely welcoming and supportive and gave me unhindered access to the facility throughout my stay.

My report would be incomplete without acknowledging the people who have made my stay fulfilling. I must first thank Prof. Badrinath Konety, Professor and Chair of the Department of Urology, UMN. He is very friendly and readily available for any form of assistance all throughout my stay. The pediatric urologists I spent most of my time with, Dr. Lars Cisek and Dr. Jane Lewis, were simply fantastic. Many thanks to Dr. Rob Sweet, Dr. Sean Elliot and Dr. Christopher Warlick who allowed and integrated me into their units during the times I joined them for procedures. Special thanks to other faculties and the resident doctors who were equally helpful and contributed significantly to the overall success of my program, especially Dr. Travis Moncrief and Dr. John Schomburg, who I worked with directly in the pediatric urology unit. I thank all the administrative staff of the department and the hospital for their co-operation, particularly Chrissy Reding and Steffane Ramnaryan. Again, special thanks to Dr. Jane Lewis who personally dropped me off at the airport on my departure day and waited patiently till I checked in before leaving, to be sure all is well with my return trip.

Finally, I will forever be grateful to the family of Leo-Fung who sponsored my trip to the United States and I do hope that this dream of assisting aspiring young urologists, especially from developing nations, will be kept alive for future generations.

# Featured New SIU Members



Esmée Liem The Netherlands



Arman Ashot Tsaturyan Armenia

Name: Esmée Liem

Location: Amsterdam, The Netherlands Position: Trainee, Academic Medical Center

After obtaining my medical degree at the Erasmus University in Rotterdam, I started last year with my clinical/research training program in urology in the Academic Medical Center in Amsterdam. My PhD research program focuses on new modalities for bladder cancer diagnosis, under supervision of Dr. de Reijke, Prof. Laguna, and Prof. de la Rosette. My clinical interests are in bladder cancer diagnosis and treatment.

The Société Internationale d'Urologie (SIU) is a worldwide association for clinicians and researchers, and provides a great, easily accessible platform, that provides the opportunity to connect with other members and prominent figures in urology from all over the world. In my first year I already had the great opportunity to become familiar with SIU Academy. This is a unique e-learning portal and provides very interesting lectures and videos. Members have the opportunity to view live surgeries, teaching modules, and webcasts that feature the latest research outcomes. The annual SIU congress provides the opportunity to present your work in the field of urology. It is a great setting to stay up-to-date with new research outcomes, and to meet experts in the field for collaboration in clinical practice and research. I look forward to attending the annual meeting in the near future, and meeting other members. It would be a great honour if, in the upcoming years, I will be able to present my work at one of the meetings.

Name: Arman Ashot Tsaturyan, MD, MPH Location: Yerevan, Armenia Position(s): Resident, Armenia Republican Medical Center

In June 2013, I graduated from Yerevan State Medical University (YSMU) and American University of Armenia receiving MD and MPH degrees simultaneously. While doing my residency in urology, I was selected to receive DAAD scholarship to study in the field of my interest. Currently, within the scope of this scholarship, I am doing a scientific and clinical fellowship at the Department of Urology at the University Hospital of Heidleberg.

Becoming a well-qualified physician, especially in developing countries is very difficult given the quickly developing field of medicine. Thus, one should continuously seek for self-developing opportunities. Over the last two years I have done several short clinical fellowships and observerships at hospitals in Belgium and Germany. It is where I particularly understood the need for cooperation with my international colleagues and to learn their best practices. Société Internationale d'Urologie (SIU), being one of the biggest international societies, makes it possible to become a part of the world medicine, gain access to the latest urological research and create networking opportunities with worldwide famous specialists.

SIU brings together urologists from all over the world to exchange their knowledge and experience. In particular it enables cooperation between developed and developing countries, which in fact is very important, since physicians from developing countries are the ones who lack the information and possibilities. Moreover, SIU provides scholarship for young urologists, thus contributing in the sustainable development of qualified specialists in the field. I am very glad to be a member of this great platform and I am sure that the contribution of SIU in my future career will be even more fruitful.

# WE ARE SIU



WEBRING UROLOGISTS TOGETHER

# SIU Foundation Looks to Expand its Board



# **Response to Growing Need for Urological Training**

In 1998, the SIU created its Foundation (FSIU) to grant educational scholarships, provide teaching fellowships, and to support programmes that advance urological education in the developing world.

The work of the FSIU has never been as important as it is at the present time, with the world facing an unprecedented health crisis. The true burden of urological disease in developing countries remains almost a guess, and the limited availability of statistics through the World Health Organization is alarming. What we do know, is that the need for our help continues to increase. As a result, SIU is ever more motivated to increase the work it engages in and the activities it supports.

Like most organizations, SIU's ability to take on larger commitments is determined by resources.

At this juncture—and as a first step in expanding FSIU operations—it was decided during a recent strategic planning meeting that the FSIU Board should increase its size and appoint public members. The goal is to include members that have diverse backgrounds with unique abilities and

FSIU believes in a just world, where every patient has access to a well-trained surgeon—no matter where they live—and every surgeon receives access to quality medical training and the appropriate tools and conditions to care for their patients. perspectives, thereby creating a strong leadership team that will help FSIU increase its visibility and resources.

With a robust structure in place, FSIU hopes to be able to increase the number of scholarships that are awarded each year, as well as help build self-sustaining centres in the world's poorest regions through education, surgical workshops and training, and by providing and assisting in the provision of medical equipment and supplies—both alone and through different partnerships.

As an SIU member, get involved by donating, volunteering your time, or by helping us to raise funds and awareness for the FSIU. Contact Susie Petrusa (susie.petrusa@siu-urology.com) to share your ideas.

## Donate today at: WWW.fsiu.org



SELECTED SESSIONS WITH SPANISH TRANSLATION

**36th Congress of the Société Internationale d'Urologie** *Hilton Buenos Aires* October 20–23, 2016

Featuring the SIU-ICUD Joint Consultation on Urologic Management of the Spinal Cord Injured Patient and the 2nd SIU Nurses' Educational Symposium

# Why You Should Attend

- SIU represents a close-knit community of international urologists, and the Congress features world experts presenting the latest and most relevant advancements in urology that YOU need to know about.
- Buenos Aires, known as the "Paris of Latin America", is a vibrant, cosmoplitan, and stylish metropolis.
  - The condensed format of SIU Congresses gives you a one-of-a-kind opportunity for more high-quality interactions with leaders in urology.

Early Registration Deadline: **June 13**, 2016



www.siu-urology.org

