Broadened horizons are guaranteed benefits of every SIU Annual Congress, and this year’s meeting was no exception. The stunning metropolis of Seoul beckoned, and the urology community answered the call in great numbers. So many made the journey to the ultramodern Seoul Dragon City hotel-plex, a venue that befits this city and offered us a truly unique Congress experience. We would be remiss if we did not thank all of our delegates, faculty and industry partners for joining us and showing an amazing commitment to the advancement of urology and science. What’s more, we’re thrilled about our virtual platform SIU@U as it provided, for the fifth consecutive year, free online access to a wide variety of sessions so that anyone, anywhere in the world could benefit from the top-notch education on offer.

As an international society, the SIU places a large importance on diversity and balanced viewpoints, and Day 1 of the Congress delivered this in spades. Several national urological societies from all corners of the globe hosted parallel sessions. It was a packed house for the Joint SIU-ICUD Consultation on Congenital Lifelong Urology, chaired by Drs. Dan Wood and Hadley Wood. The lively and interactive discussions with the audience at the end of each committee presentation were enlightening. The eGrand Rounds on Stone Disease and BPO also took place on Thursday it was a full day and as usual, it did not disappoint. For those that missed it, we highly recommend viewing the session, complete with live and semi-live surgeries, on SIU@U. We kicked off the session with uTalks, opened by Dr. Joyce Baard from the Netherlands, and concluded with the Masters in Disasters interactive discussion based on cases presented by Prof. Jean de la Rosette. At the end of the day, the Opening Ceremony gave everyone a chance to connect and let loose. During this year’s Award Ceremony, we presented the inaugural SIU-Mostafa M. Elhilali Award to Dr. J. Curtis Nickel. Dr. Elhilali’s family was in attendance for this touching tribute to Dr. Elhilali and his tireless work in urological education around the world. Dr. Nickel spoke eloquently about his dear friend and colleague and shared with the audience Dr. Elhilali’s last words to him before he passed away. The reception continued with an explosion of Korean culture: we were treated to traditional Korean...
Cytoreductive nephrectomy is performed as the standard of care for metastatic renal cell carcinoma if the patients are tolerant to the operation. However, this is not based on any evidence in the molecular-targeted therapy era at present. Indeed, there was evidence in the cytokine era when interferon was the treatment of choice (Flanigan et al: NEJM 345, 1655-9 2001; Mickisch et al: Lancet 358, 996-70). Cytoreductive nephrectomy contributed to the overall survival of patients.

A striking paper was released in NEJM 2018 (Mejean A et al) by a group of French researchers and clinicians. In this paper, a randomized prospective study called CARMENA demonstrated that immediate sunitinib treatment without nephrectomy is not inferior to the cytoreductive nephrectomy followed by sunitinib through prospective randomized trial. This conclusion may change our ordinary practices.

A total of 450 patients were enrolled. The median overall survival of the sunitinib group was 18.4 months, versus 13.9 months in the nephrectomy-sunitinib group. This is in contrast to the retrospective cohort studies (Heng DY et al: Eur Urol. 66. 704-10, 2014). Caveats are that the study cohort includes a 1:1 ratio of intermediate- and poor-risk group patients. This is not the ordinary cohort that we have (Tanaka N et al: Eur. Urology Focus 2.303-309, 2016). Usually, the ratio of favorable, intermediate, and poor is about 1:2:1. High volume and poor risk groups are the dominant patients included in the study. Low volume and “favorable” intermediate groups (it seems few were included in this study) might have up-front cytoreductive nephrectomy not included in this study. It should be noted that the nephrectomy-sunitinib group had a higher ratio of T3/T4 than sunitinib alone group: 70.1% vs 51.0%.

Indeed, nephrectomy was eventually performed in the sunitinib alone group in 38 patients. The need for nephrectomy is exaggerated in low volume and “favorable” intermediate group as salvage or consolidation therapies in consideration of the good prognosis in the long follow-up period. I think we still need up-front cytoreductive nephrectomy for metastatic renal cell carcinoma. But at least, based on this paper, we do not perform on poor risk patients with various comorbidities.
Around the World and Back Again  Continued from page 1

Ogounu drum performances, musical interludes, and an exhilarating taekwondo demonstration. The smiles on peoples’ faces after this celebration remained for the duration of the Congress!

The Plenary on Day 2 was heavily-attended and brought together some of the brightest minds in the field, capped off with the state-of-the-art lecture, Advances in Robotic Surgery in 2018, by Dr. KH Rha from South Korea. The MRI-TRUS Fusion Hands-On Course chaired by Drs. Peter Black and Christof Kastner proved popular as ever as well as the standing-room only Instructional Course on Medical Treatment of CRPC. The day closed with the Sanofi-sponsored symposium Metastatic Prostate Cancer: What Have We Learned About Optimizing Survival. But Day 2 wasn’t all work and no play, many people took advantage of the Innovators Mixer that evening, and found great networking in the cool and unusual Sky Kingdom on the 31st floor of Seoul Dragon City. The views were simply stunning, and slightly terrifying with a glass floor for those who dared to walk on it!

Despite the wet weather on Day 3, nothing could dampen the SIU spirit: the sessions on October 6 had everyone buzzing, from the 4th Global Nurses’ Educational Symposium chaired by Kay Talbot, to the packed Plenary, Master Classes, and beyond. This is also the day that the much awaited uChallenge showdown took place — congratulations to our new champion, Pratikkumar Shah, from India. The prestigious President’s Banquet was held at the end of the day, marking a change in SIU leadership. We celebrated outgoing SIU President Dr. Badrinath Konety’s achievements over the past year, and officially welcomed Dr. Simon Tanguay as the new President of the society. We wish him the best of luck!

More learning ensued on Day 4 in Seoul. Plenary 3 on new robotic devices in urology surgery was well-attended. Our latest offering, Complications – This Is How I Manage It: Audience-Submitted Cases, was a resounding success. This interactive session featured pre-selected cases from audience members and provided great tips for the prevention and management of complications during surgery. Interactive components like this one, as well as Q&A sessions at the end of various sessions, resulted in highly relevant and tailored educational moments. We continue to look for new ways to increase and enhance audience participation at future SIU Congresses.

All good things must come to an end, but we remain very grateful for the time we shared with the SIU community, whose members are among the most passionate, talented, and supportive people in the world. We look forward to connecting with all of you again in October 2019, when our global journey brings us to Athens, Greece.

Best Affordable New Technologies in Urology Contest Winners

Eight finalists, eight low-cost technologies and devices designed to help those in developing countries. All participants in the contest did a fantastic job of creating innovative solutions for real problems. The jury faced a tough decision, and in the end, awarded four prizes to the following people:

- Mohammed Al-Ameedee, Iraq: Laparoscopic Ureteric Stent Guider
- Arvind Ganpule, India: Chicken Carcass Model for Training in Laparoscopic Urologic Procedures
- Ganesh P. Sankarapandian, India: Light When There Is No Light

Congratulations to the winners! If you have an innovative idea that could be readily implemented in underprivileged nations, stay tuned for updates on how you can enter the contest in 2019.
It is my pleasure to participate in the uCARE pilot study. This type of study is important for sharing our personal experiences, work, ideas, and results with colleagues in different centres worldwide. The participation process progressed very smoothly and without obstacles; even the institutional review board (IRB) was simple, and crucial to start such a study. These kinds of studies have many advantages, among which improving health professional knowledge and patient care are the most important.

uCARE offers a unique opportunity for urologists in Saudi Arabia to collaborate with colleagues from all over the world and conduct high-quality research activities. It represents an ideal platform that includes many Saudi urologists who have excellent clinical knowledge, skills, and patient volume, but lack the formal urology research network and infrastructure with other urologists who do have this access.

In their own words: Spotlight on uCARE pilot study investigators

We live in an age where communication has no boundaries. Compared to the past, information can now be obtained very easily. Urological clinical research studies are now conducted on a global scale. Without a doubt, worldwide collaborative research partnerships provide mutual advantages for all parties. Using data exclusively from our own department is not as meaningful; as when this information is added to a collaborative study, making our data combined with more information more meaningful and more valuable.

It is exciting for me to see the experts that succeeded in the clinical trials, which included the largest number of urological patients, is now designing a global clinical research: the uCARE pilot study. uCARE aims to connect urologists and patients with clinical studies and registries conducted around the world. It is a privilege to be the first centre involved in this huge project’s first pilot project and register the first patient.

As always, the SIU Central Office has a very dedicated administration and staff: the registration of the first case was processed in real time with a user-friendly data management system, which made the entire process easier.

Let me first thank you for inviting me to take part in this study. The practice of urology in my city of Mombasa, Kenya, has changed dramatically during the last five years. Before then, upper-tract endourology procedures were nonexistent. With newer urologists training abroad, we now have two urologists performing these procedures.

Buying equipment is the biggest challenge for us, as the scopes are expensive and most of us have initially invested in our own equipment.

The reason for joining uCARE is that urolithiasis is a common problem in our setting. As we carry out quite a few of these procedures, it was a good opportunity for me to take part in a study to improve the quality of care we offer our patients.

During the IRB submission, the obstacle I faced was that I work in a private hospital and not a teaching institution. Thus, the procedure for approval is slightly different and the final approval has to come from the board of management, which was duly sought and given.

The advantage of participating in this study is to understand the global practice in stenting. The indications, types of stents, and the duration of stenting vary in different centres. While the indications in most cases are similar, in our setting, the types of stent used, the duration, as well as the settings in which the stents are removed are guided by many factors, which are not clinical in nature. (e.g. finance, insurance, location of residence, equipment in hospitals, and qualified personnel).

Currently, only two hospitals have invested in equipment for endourology and both are in private settings. Taking part in the uCARE study will enable me to see what the current global trends are and help put them into practice in my current set-up.

It is my pleasure to participate in the uCARE pilot study.

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Dr. Selçuk Güven
Istanbul Medipol University, Department of Urology, Turkey

Prof. Dr. Murtadha Almusafer
Department of Urology and Basrah Health Directorate, Basrah Teaching Hospital, University of Basrah College of Medicine, Iraq

Dr. Sundeep Chavda
Pandya Memorial Hospital, Mombasa, Kenya

Dr. Raed Azhar
Urology Department, Faculty of Medicine, King Abdulaziz University, Jeddah, Saudi Arabia

Dr. Raed Azhar
Urology Department, Faculty of Medicine, King Abdulaziz University, Jeddah, Saudi Arabia

UCARE: Many hands make light work

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Continued on page 6
This will help them overcome the issues of poor data collection procedures and lack of international comparability, and allow them to be included in well-developed, focused international collaborative groups with established, audited central study protocols.

The concept of international collaborative research represents a new concept for many urology researchers in Saudi Arabia. Recruiting busy urologists, coordinating their efforts, and trying to curb dropout rates are some of the major challenges. Ethical approval for international collaborative research represents another challenge locally. uCARE facilitated this issue by supplying a copy of the study protocol and a generic informed-consent template that can be adapted to local standards.

In Saudi Arabia, stone disease is very common, but little is known about its true incidence, treatment modalities, practice pattern, and comparability with international centres. Urologists in Saudi Arabia receive their postgraduate urology training either locally or abroad. This study represents an excellent opportunity to shed some light on the current local practice patterns compared to international ones.

In addition to these clinical objectives, this pilot study represents a good opportunity to test the waters and study the preparedness of the local centres to conduct multi-institutional international studies; in addition to being a good exercise for urologists, IRB offices at their respective hospitals can help them define the obstacles in their system and how to overcome them.

For the 5th consecutive year

SIU@U has brought select sessions and exclusive initiatives to urologists all over the world.

Access the Congress sessions and watch highlights of activities, as well as exclusive interviews with delegates until December 31, 2018.

REGISTRATION is free
so don’t miss the chance to be part of the conversation!
www.siu-urology.org/siuatu

About the uCARE Pilot Study

The pilot study entitled “Ureteral Stenting After Ureteroscopy for Stone Treatment, a Global Perspective on Indications and Outcomes” is a prospective, observational, international, multicentre registry study. The primary objective of this study is to assess current indications of postoperative ureteral stenting after ureteroscopy for urinary stone treatment.

As of October 22, 2018, we currently have 440 patient inclusions from 26 centres that have received IRB approval, and a few more centres will start data collection soon. This study involves 88 centres in 22 countries across six continents.

For more information about uCARE and this pilot study, contact Christine Albino at christine.albino@siu-urology.org.
An interview with Idorenyin Cletus Akpayak—SIU Academy Top User of 2017

How did you hear about SIU Academy?
I knew about the SIU Academy right from its inception from e-mails sent to me by the SIU. But I started accessing its content consistently when I became an SIU member in 2014.

How has SIU Academy been useful to you?
I have learned a lot from experts in different fields of urology. The educational materials help to fine tune my skills in different aspects of urological surgery. Tips and tricks relating to challenging urological procedures are explained in a simplified manner.

What do you like about the portal? What do you think are its best features?
I like that the contents of the SIU Academy are of high quality, and that new materials are uploaded frequently. My favorite SIU Academy content revolves around the SIU Grand Rounds.

What is your favorite type of program offered on SIU Academy?
I love the SIU Grand Rounds because I’m able to absorb quintessential lessons and watch different techniques in endourology being demonstrated. Prof. de la Rosette and company are great teachers!

Any other comments?
I remain very grateful to SIU for creating this unique e-learning platform. Through this and other educational initiatives, the SIU has helped me offer improved urological care to my patients.

The SIU Academy Governance Committee is proud to acknowledge the contributions of all the experts who help develop exceptional educational activities for SIU Academy. This year, 10 outstanding SIU Academy contributors received the following awards during the 38th Congress of the SIU in Seoul, South Korea.

SIU Academy Awards 2017 Winners

Outstanding ePoster
Second Look Transurethral Resection of Bladder Tumor: Is It Necessary in All T1 and/or High Grade Tumors?
By Mohsen Ayati (Iran) – Award presented by Faysal Yafi (United States) and accepted on behalf of Dr. Ayati by Dr. Jack Zuckerman.

Outstanding Expert Review
Challenges in Endoscopic Management of Lower-Pole Calyceal Stones
By Ravindra Sabnis (India) – Award presented by Peter Black (Canada).

Outstanding eSeries
Imaging in Renal Mass: Diagnostic and Local Staging
By Pilar Laguna (Turkey) – Award presented by Jack Zuckerman (United States)

Outstanding Educational Video
A Simplified Technique of Percutaneous Puncture without Moving the C-arm in the Split Leg Modified Lateral Position
By Mohammed Lezrek (Morocco) – Award presented by Kurt McCammon (United States)

Outstanding Video Webcast
SURGERY II - PCNL
By Jean de la Rosette (Turkey), Vitor Cavadas (Portugal), Ranan DasGupta (United Kingdom), Palle Oster (Denmark), and Daniel Adolfo Perez Fentes (Spain) – Award presented by Stavros Gravas (Greece)

SIU Academy Top User of 2017
Idorenyin Cletus Akpayak (Nigeria) – Award presented by Reynaldo Gomez and it was accepted on behalf of Dr. Akpayak by Dr. Jack Zuckerman.
Evolution of Treatment Pathways in the Advanced Prostate Cancer Continuum

Through a case-based approach, our international faculty give their expert insights on the latest results of the LATITUDE and STAMPEDE clinical trials in patients with advanced PCa.

Faculty: Chair:
Karim Fizazi, MD, PhD, France
Christopher Evans, MD, FACS, United States
Nicholas James, MD, PhD, United Kingdom

This program is accredited by the European Accreditation Council for Continuing Medical Education (EACCME).

Myths and Realities of Penile Implant Infection

This eSeries presentation provides background information on implant infections and presents various strategies to prevent infections based on clinical knowledge.

By: Tobias S. Kohler, United States

These programmes were supported by SIU Corporate Sponsor, Janssen Oncology

Management of Complex Ureteric Strictures with the DETOUR™ Ureteral Bypass

This eSeries presentation features the Detour™ ureteral bypass for long-term palliative treatment of ureteral obstructions.

By: Ioannis Kartalas Goumas, Italy

These programmes were supported by SIU Corporate Sponsor, Coloplast

SAVE-THE-DATES!

When: January 22, 2019
Where: Prince of Wales Hospital, Hong Kong, China
Course Directors: Prof. Anthony Ng (China) and Prof. Jean de la Rosette (Turkey)

This program is made possible by SIU’s Corporate Sponsor, Olympus

When: January 31, 2019
Where: Hospital de Santo António, Porto, Portugal
Course Directors: Dr. Vitor Cavadas (Portugal) and Prof. Jean de la Rosette (Turkey)

This program is made possible by SIU’s Corporate Sponsor, Karl Storz

B2B – Minimally Invasive Surgery Course: Adrenal and Kidney

When: February 1–2, 2019
Where: Porto, Portugal

Now Available

Shining a Light on Blue Light Cystoscopy with Hexvix®/Cysview®: What You Need to Know

This multi-modular program offers real-world tips and tricks from experts, delivers comprehensive discussions concerning management of NMIBC, and imparts valuable knowledge, particularly how Hexvix®/Cysview® integrates into the evaluation, diagnosis, surveillance, and follow-up of patients with NMIBC.

Faculty: Chair:
Badrinath Konety, MD, FACS, MBA-BCAN United States
Sia Daneshmand, MD, United States
Per-Uno Malmström, MD, PhD, Sweden

This educational activity was supported by an educational grant from GlaxoSmithKline

STREAM of mLUTS: SIU TRaining program on Evaluation And Management of Male LUTS

STREAM of mLUTS is a comprehensive learning program on the prevalence, diagnosis and management of LUTS—from behavioral therapy to surgical intervention.

• Module 1: LUTS background
• Module 2: Man with LUTS with risk of progression
• Module 3: Man with storage symptoms/OAB and BPO (treatment-naïve)
• Module 4: Man with voiding symptoms under medical treatment who requires surgical management

Module 4 is the last of the series and is now available. It is accredited by the European Accreditation Council for Continuing Medical Education (EACCME) for 1 European CME credit (ECMEC).

Faculty: Chair:
Stavros Gravas, Greece
Committee:
Mauro Gacci, Italy
Jaspreet Sandhu, United States

This educational activity is supported by an educational grant from GlaxoSmithKline

www.siu-urology.org
For a third consecutive year, the Chinese Urological Association (CUA) and the Société Internationale d’Urologie (SIU) jointly organized a training course in Endourology at the Zhangjiang Olympus Training Center in Shanghai in early August. This training course embodies an important part of the SIU’s UroTechnology Training programme, and illustrates the strong commitment from the CUA to increase its international development and cooperation together with the SIU. This training program would also not be possible without the strong support and partnership of the Olympus Corporation.

This year’s course included renowned faculty from both organizations, involving doctors Jean de la Rosette, Stavros Gravas, Pilar Laguna, Masatoshi Eto, Xiaofeng Gao, Bo Yang and Ling Li. Moreover, 25 trainees participated and were selected from all over China.

Prior to the hands-on training session, different thematic presentations were given.

Dr de la Rosette gave a lecture on how to perform TURBt. An endoresection of a bladder tumor does not only hold diagnostic value, but also has a therapeutic aspect. How can one best resect a tumor, what are the different steps to resect a tumor, and what is needed to improve the quality of the surgery? The cornerstone for this is not only good equipment, but also good training. The importance of this aspect was also underlined in the elegant training models that were available. An animated discussion followed regarding the position of the recently introduced ‘en bloc’ resection. At present, there are still many questions as well as limitations regarding this new approach and more studies are needed to clarify the possible benefit.

The second presentation was given by Dr Stavros Gravas. He talked about the rapidly increasing number of minimally invasive surgeries for male LUTS. In his opinion, TURP is being challenged by many other treatment modalities, including laser treatments. However, the safety and long-term outcomes of all these surgical treatments require further research.

The third lecturer was provided by endourologist Xiaofeng Gao, renowned for performing PCNL under full ultrasound guidance. In his presentation, he explained the renal anatomy, the working mechanism of transabdominal ultrasound followed by specific equipment details, puncture mechanism and dilation methods. During the hands-on training afternoon session, he elegantly demonstrated how to perform this approach on a model.

In follow-up Dr Bo Yang shared many of his vast experiences in avoiding and handling complications from laparoscopic surgeries, demonstrating that prevention can be put in place only if one is aware how a complication occurs.

Doctor Ling Li concluded the lectures with a state-of-the-art presentation on tips and tricks in ureteroscopy. The trainees quickly grasped the essence of how to use and handle flexible ureteroscopes.

In the afternoon sessions, the faculty joined the trainees in the laboratory for hands-on sessions to learn how to perform a standard flexible ureteroscopy, PCNL and laparoscopy. With such simulation models becoming increasingly important in training, the CUA and the SIU are proudly collaborating and to create up-to-date training courses.
Report: B2B meeting Georgia

Emrah Yuruk, MD
Associate Professor of Urology
University of Health Sciences, Bagcilar Hospital, Istanbul, Turkey

The 8th Eurasian Uro-oncology Congress (EUA18) was held in Tbilisi, Georgia from June 28 to July 1. The biggest urological event of the region was a great success with almost 600 international attendees from 25 countries and over 130 international faculty strengthening the roots of collaboration for uro-oncologists. This year, the Georgian Urological Association was the main partner of Eurasian Uro-oncological Association and along with the SIU, the Congress was supported fully by the EAU, the Turkish Society of Medical Oncology, and the Turkish Association of Urology. EUA18 was also granted 23 European CME credits (ECMEC) by the European Accreditation Council for Continuing Medical Education (EACCME).

The meeting featured education and training, which included several workshops focusing on laparoscopy training, research, mpMRI, and prostate. The uro-oncological surgeries were presented with a special session called “As-Live” during EUA18. While the clinical governance, knowledge, attitudes, and practices in the region were discussed in the Regional Societies session, the latest clinical advancements in urological malignancies were outlined during the Uro-oncology 2018 highlights and Young Uro-oncologists sessions. The unique “Disasters of Masters” session was of great interest to speakers and participants as well.

One of the goals of the Congress was to discuss recent developments in their entirety. To address this cutting edge research, translational medicine informed a large part of the program. Appropriately, the B2B (Bench to Bedside) Renal Cancer Meeting was held during the meeting in collaboration with the SIU. Badrinat Konety (Minneapolis), Simon Tanguay (Montreal), Jean de la Rosette (Amsterdam), Makarand Khochikar (Miraj), Pilar Laguna (Amsterdam) and Jose Karam (Houston) highlighted the most recent developments in uro-oncological diseases.

Friends of Georgia, the biannual meeting organized by the Georgian Urological Association and Israel Urological Association was also conducted simultaneously with the Congress. All aspects of the diagnosis and treatment of uro-oncological diseases were covered by the best urologists, medical and radiation oncologists, nuclear medicine specialists, and radiologists not only from the region but also from Europe, Asia and the U.S. during the “Perspectives” multidisciplinary sessions. The meeting featured education and training, which included several workshops focusing on laparoscopy training, research, mpMRI, and prostate. The uro-oncological surgeries were presented with a special session called “As-Live” during EUA18.

For further information, please contact us at: central.office@siu-urology.org

Calling All Young Urologists and Residents

Has it been less than 10 years since you obtained your MD?

Are you interested in acquiring practical knowledge in urology?

As a cornerstone of its educational mission, the SIU provides two types of scholarships for young urologists.

The first scholarship offers training in a recognized center in the candidate’s geographical area. The second grants the visiting scholar an observational role in an SIU-accredited Training Center.

Both scholarships are valued at US$5000 for a 6-month period or US$2500 for a 3-month period.

To apply, visit our website at https://www.siu-urology.org/society/training-scholarships and submit the completed application form, a detailed CV, a letter of intent, and a letter from the SIU-accredited institution where you wish to conduct your scholarship.

Don’t miss out on this career-enhancing opportunity!

Submission deadline: March 31st, 2019

For further information, please contact us at: central.office@siu-urology.org
Women in Urology

Advice for Aspiring Female Urologists
From a Urology Pioneer

Dr. Jean McDonald describes her experience as part of our Women in Urology series.

I am a Jamaican born consultant urologist. After completing my undergraduate medical training at the University of the West Indies in Kingston, Jamaica, I moved to the United Kingdom where I passed the exams and was made a Fellow of the Royal College of Surgeons in Edinburgh. I completed urological training in London and was appointed a consultant urologist at the North Middlesex University Hospital in 1995.

For over 20 years I was the only female urologist of Afro-Caribbean descent practicing in the UK and the only Black female urological surgeon in the UK.

I still work as a Consultant urologist at the North Middlesex University Hospital and practice privately in rooms in Harley Street. Though I spend most of my time in the UK, I travel frequently to Africa and the Caribbean where I am involved in running workshops and training young urologists from developing nations.

Early in my career I faced a number of challenges, particularly with being stereotyped as a black woman. The thinking was that I should not have been practicing medicine but rather better suited for home-making. I was often referred to as a nurse when making rounds with my team, and many men were alarmed at the thought of being treated by a female urologist. I vividly recall hearing from a female colleague in Jamaica how a waiting room full of men quickly cleared down to one patient after the rest noted that the consultant urologist was a woman. The only patient left was in a wheelchair.

Not only did I face challenges from the patients but at times encountered resistance by my male colleagues. Like most surgical specialties, urology is male dominated. These challenges, however, encouraged me to work harder and smarter, particularly in my earlier years, and I believe this has moulded me into the urologist I am today.

The field of urology has come a long way since then and women are now more common in modern urology. There is definitely a niche for female urologists to treat women with general urological pathologies who are keen to see a female, whether for personal or religious reasons. The blossoming field of urogynecology is heavily female-based and provides the opportunity to treat female-based urological complaints. Paediatric urology may appeal to the more maternal instincts of a female urologist as well.

I also treat a significant cohort of men who still feel more comfortable opening up to a female urologist about sensitive genitourinary complaints such as erectile dysfunction. Certain anxieties and fears are allayed once these male patients encounter a gentle female demeanor.

Presently in Jamaica, a country with a population of approximately 3 million people, there are 23 practicing urologists of which 6 are women. These women have overcome similar challenges to hold positions in subspecialist areas such as urogynecology and senior academic and research positions.

For other women interested in a career in urology, I suggest working hard and pursuing your passion. Though some of the initial challenges still exist, the playing field is becoming more level as both patients and colleagues are more welcoming to the face of a female urologist. Do not get put off from pursuing this exciting and ever-transforming career, as the scope for women in this field continues to expand and evolve.

**Featured New SIU Member**

Name: Eliécer Ortega Vega
Location: Panama
Position: Resident Physician of Urology, Hermanos Ameijeiras Hospital, University of Medical Sciences of Havana.

My name is Eliécer Ortega Vega and I was born in La Villa de Los Santos, a small city in the central region of Panama, a beautiful country in Central America of 4 million inhabitants famous for its cultural and ethnic diversity and the Panama Canal. I started my urological training in September 2015 at the Hermanos Ameijeiras Hospital in the city of Havana, which is a 3-level institution and a national reference center in various areas of urology where numerous clinical investigations are carried out in the areas of uro-oncology, andrology and endourology, through the national center for the treatment of urinary lithiasis. In November 2017, I attended the national congress of the Cuban Society of Urology, where I discovered that the SIU is the best Society for young urologists since it offers opportunities for professional development in various areas and provides tools to improve urological practice. The inclusive and international nature of the SIU is unparalleled.

As a trainee member of the SIU, I feel honored and committed to form part in the overall progress of the Society, and I appreciate the clinical research, transmission of knowledge, and the diversity of opportunities offered by the SIU to all urologists in training.
Dear Colleagues,

It is our pleasure to invite you to Athens, Greece October 17–20, 2019 for four days of discovery, learning and networking. Along with our committee of international experts, we have been working hard to design a high-yield programme well-suited to meet your educational needs.

Here’s a sneak peek at some of what is being planned:

- Joint sessions with our colleagues from Genitourinary Reconstructive Surgeons, the Society of Urologic Oncology along with the EAU Section of Oncological Urology, the International Continence Society, and the Society of Urologic Robotic Surgery.

- Master classes on topics such as PET Imaging in Urologic Cancer, Male Infertility, Chronic Pelvic Pain, Urological Complications of Renal Transplant, and more!


- Sure-fire crowd pleasers, such as debates on controversies in bladder cancer and oligometastatic prostate cancer, interactive sessions on urolithiasis management and complications and male voiding dysfunction, and expert lectures on clinical trials for the practicing urologist and endourology around the world.

- 5th SIU Global Nurses’ Educational Symposium

- Full day of regional and subspecialty society symposia

Full details will be available on the SIU website www.siu-urology.org in January 2019. We encourage you to mark your calendars and start planning to join us in Athens.

SIU Congresses would not be possible without the contributions of knowledge and research by our abstract presenters. Make sure to submit your latest research and discoveries online! Submit your abstract starting early 2019—the submission deadline is April 1, 2019.

We look forward to another exciting SIU Congress in 2019!

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What to expect from SIU 2019 in Greece

Christopher Evans
United States
SIU 2019 Scientific Programme Co-Chair

Rajeev Kumar
India
SIU 2019 Scientific Programme Co-Chair

Abstract submission deadline: April 1, 2019