Urethral stricture disease has been known to mankind for 5000 years. In the UK, incidence of stricture increases from 10/100000 at age 25 to 100/100000 after 65. The aetiology in western countries is idiopathic, iatrogenic, failed hypospadias and trauma, whereas in developing countries, it is trauma, instrumentation, Lichen sclerosus, infection and failed hypospadias.

There are different ways of managing a stricture. Dilation for urethral stricture has been described in ancient India and Egypt. We all know the aphorism “Dilation rarely cures a stricture”. Repeated dilation may cause pain, fever and bleeding. Therefore, dilations followed by intermittent self-catheterisation are reserved for patients unfit for surgery, those who refuse definitive surgery, and after multiple failed urethroplasties. Long-term success rate of dilation and internal urethrotomy was thought to be low at ~40–60%, but is actually even lower than what was quoted in the past. Recent literature suggests success of around 9%. The success rate of a third direct vision internal urethrotomy (DVIU) is zero percent. Additional options for management of urethral stricture include urethral stents, which play only a limited role today. As a last resort, the patient is offered urinary diversion, like perineal urethrostomy.

The preferred option for definitive treatment is urethroplasty. Hamilton Russell performed anastomotic urethroplasty in 1915 for the first time. The aim of urethroplasty is to offer patients normal voiding and freedom from instrumentation.

Continued on page 3
Message from the Publications Chair

Dear Colleagues,

Thank you for reading this September issue of the SIU Newsletter. We appreciate your readership and have an exciting new announcement for your regarding the status of the SIU Newsletter. After careful consideration, the SIU Board of Directors has decided to re-envision the current format of the Newsletter and recreate this concept as part of the SIU’s website, resulting in a blog-style newsfeed on the Society landing page: www.siu-urology.org

The new format will allow for real-time content updates and additional opportunities for member contributions. This feature will also increase our ability to engage with members and colleagues and help ensure that we can remain a dynamic and responsive society. We invite you to get in touch with us and share your feedback on the SIU News feature of the website and suggestions for other ways that we could contribute to the valuable discourse of international urology. We are excited to embark on this new activity and look forward to sharing this with you.

Dr. Mototsugu Oya

Editor’s Note

Making Valuable Digital Connections a Priority

Dear Readers,

Thanks to our supporters, great relationships have been forged and great times lie ahead! We’re able to expand our reach through collaboration, with allies – something to be proud of in our age of increasingly divisive world relations. Read about our initiatives around the world, and an update on the far-reaching uCARE program, in these pages. Also be sure to read our cover story featuring Dr. Sanjay Kulkarni’s insightful views on the attractiveness of urethral reconstruction – truly fascinating material. Yet another highlight of the September Newsletter is the beloved Women in Urology feature, which this month features not one, but two truly inspiring perspectives on gender in our profession and how we can pave an inclusive path forward.

SIU 2019 in Athens promises to be the highlight of our stellar year, and we have plenty of pre-event coverage for you. This includes scientific programme details as well as a word from the programme co-chairs Chris Evans and Rajeev Kumar. Be inspired by the cutting-edge knowledge and networking we have in store for you and start planning your participation!

As you have read above in the Publication Chair’s message, the SIU Newsletter will soon shift to a more dynamic, web-based medium to provide you with a richer experience. It’s certainly not the end of the road for your favourite content. On the contrary, we’ll have more space for additional features and for your submissions as well. Be a part of our Newsletter revamp and share your medical, scientific, academic, or community-based story with us! Send your content to communications@siu-urology.org

See you next time, online!
Cure is possible in patients with trauma to bulbar and posterior urethra. Excision of scar and end-to-end anastomosis of a normal urethra offers cure rates of more than 90%. Bulbar urethral trauma is comparatively rare and typically results from a straddle injury. However, posterior urethral trauma due to road traffic accidents is common in developing countries. Anastomotic urethroplasty in expert hands provides excellent long-term success.

For long and non-traumatic strictures of the anterior urethra, the aim is to create a stable urethra of normal calibre. In 1950, Johanson published the popular two-stage urethroplasty. It is still useful for complex urethral strictures, especially in the penile urethra. Later, Quartey and McAninch introduced single-stage penile fascio-cutaneous flaps for augmentation. Today, genital skin flaps are used rarely, only for complex cases in which the bed for the graft is not suitable. In 1996, Barbagli published dorsal onlay oral mucosa urethroplasty. In the same year, McAninch published ventral buccal mucosa graft urethroplasty. In 2001, Asopa published dorsal inlay technique and in 2009, Kulkarni published one-sided dissection penile inversion technique for penile and pan-urethral strictures. Oral mucosa grafts have now become a mainstay of augmentation urethroplasty around the world. The success rate of augmentation urethroplasty is around 85%.

The spectrum of urethral stricture also includes complex conditions which require urethroplasty in specialized centers. These include:

1. Fractured pelvis and ruptured urethra with urethrovaginal fistula in girls.
2. Double transection of the urethra due to pelvic fracture urethral injury to bladder neck-prostate and bulbo-membranous junction.
3. Bulbar urethral necrosis after failed posterior urethroplasty that may require pedicled prepuceal tube. Enterourethroplasty is used after total loss of urethra as a last resort.
5. Urethro-rectal fistulas after trauma and prostate cancer treatment

Urethroplasty is an attractive choice of treatment for urethral stricture in most patients. It offers patients efficient voiding and freedom from instrumentation. Various definitive elegant reconstructive approaches are available to reconstructive surgeons. We need to train dedicated surgeons to create Centers of Excellence in Urethral Reconstruction in major cities around the world.

References:

In June 2018, uCARE proudly announced the launch of the pilot study entitled, *Ureteral Stenting After Ureteroscopy for Stone Management: A Global Perspective on Indications and Outcomes.* This pilot study is a prospective, observational, multicenter longitudinal cohort study. The study officially closed in the summer of 2019. This research initiative has been an enormous success thanks to the efforts of all participating centres and principal investigators (Table 1).

The exit strategy after ureteroscopy for stone treatment is an ongoing matter of debate. We know that postoperative stenting increases patients’ morbidity postoperatively. Though existing guidelines on urolithiasis state that routine stenting following uncomplicated procedures is not indicated, in daily practice urologists frequently place a stent after ureterorenoscopy. The aim of this study is to assess current real-life global practices of postoperative ureteral stenting after ureteroscopy for stone treatment.

At the time of this article, a total of 2,337 patients from 49 different institutions across 15 countries worldwide were included. Our top 10 countries with the highest number of patient inclusions are Turkey, China, Malaysia, Taiwan, Indonesia, India, Romania, Iran, Kenya, and Saudi Arabia.

The outcomes of this study will not only provide insights into current global practices on postoperative stenting after ureteroscopy, but also aid in improving personalized patient care after ureteroscopic stone treatment.

Furthermore, this pilot study has provided an instructive setting to prepare our team for upcoming uCARE studies by allowing us to explore and optimize ways of communication with the different centers worldwide, to evaluate the different study sites, and to optimize our data management system.

We would like to sincerely thank everybody who has helped us with this great achievement. We are pleased to invite you to our uCARE session during our Annual SIU meeting in Athens on October 17th from 09:00 to 11:00 where we will present the study data.

### Table 1 Participating Centres

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<th>Institute</th>
<th>Country</th>
<th>Principal Investigator</th>
<th>Co-Principal Investigator(s)</th>
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<td>Guohua Zeng</td>
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<td>Lei Cui</td>
<td>Wei Guan</td>
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Table 1 Participating Centres, Cont’d

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Dear Friends,

We are weeks away from SIU’s 39th Congress, taking place in Athens from October 17-20. Based on the feedback of members, congress attendees and a committee of global experts, we have put together a state-of-the-art scientific programme that is set to tackle some of the hottest topics in urology today. We are very grateful to the faculty members who have each taken time out of their busy research and practice schedules to join us in Greece and share their expertise with attendees.

Athens is easily accessible via almost any means of transportation, so if you haven’t already made plans, there is still time. Browse the comprehensive programme and register online via siu-urology.org

We can’t wait to meet you there!

One of the highlights for many Congress attendees is meeting/networking with colleagues from around the world. The Congress Scientific Programme Committee always strives for diversity in topics, and speakers ensure that the needs of our members are well-represented. However, the SIU is committed to improving the representation of its diverse membership, and as such, has formed an official Scientific Council.

The Council consists of representatives from SIU National Society Group Members and will serve to advise the programme committee on topics, speakers, unperceived educational needs and other concerns pertinent to their particular region. This additional level of consultation and collaboration will serve to further strengthen the SIU’s role as an international society dedicated to bringing urologists together through education, research and philanthropy. The first official meeting of SIU’s Scientific Council will take place in Athens, and we look forward to working with our partners and colleagues from around the world to advance urology worldwide through SIU Congresses.

Christopher P. Evans
Rajeev Kumar

SIU’s scientific programme features energetic session formats covering a variety of subject areas. Interactive sessions, video-based sessions, and live surgery will be just a few of the highlights that attendees can look forward to, including coverage of the following topics:

- Uro-oncology
- Trauma and Reconstruction
- Robotics and Laparoscopic Surgery
- Incontinence and Voiding Dysfunction
- Pediatric Urology
- Stones and Endourology
- BPH
- Updates on Research and Scientific Review
- Transplantation
- And more…

Can’t make it to Athens?

Make sure to register for our virtual congress platform

SIU: @U

Registration is free.
Subscribe to SIU’s email list so that you don’t miss any updates!
Questions? Contact us at communications@siu-urology.org
NOW AVAILABLE ON SIU ACADEMY

CME ACCREDITED ACTIVITIES

The Evolution of Treatment for RCC: Is Combination Immunotherapy-Targeted Therapy the New Standard?

This CME accredited activity will provide updates on tumour immunology, biomarkers of response to immunotherapy, clinical outcomes, and management of immune-related adverse events in patients with renal cell carcinoma (RCC).

FACULTY
Chair
Thomas Powles
United Kingdom

Scientific Committee
Laurence Albiges
France
Jürgen E. Gschwend
Germany

Applications of Immunotherapy in Bladder Cancer

This patient case-study will focus on applications of immunotherapy in bladder cancer. The goal of the programme is to increase the urologist’s ability to leverage the most recent therapies in advanced bladder cancer treatment (immune checkpoint inhibitors) to improve clinical outcomes and patients’ quality of life.

FACULTY
Chair
Michiel van der Heijden
The Netherlands

Scientific Committee
Axel Merseburger
Germany
Srikala Sridhar
Canada

Androgen Receptor Pathway Inhibitors: The Next Generation

This eSeries provides up-to-date information on the two novel androgen pathway inhibitors. The recently approved apalutamide and the investigational agent darolutamide (ODM-201, BAY-1841788) have been developed in an effort to address the unmet need for better outcomes and tolerability.

By: Kurt Miller, Germany

NEW EDUCATIONAL VIDEOS

The Role of Thromboprophylaxis in Urological Cancers

In this programme, Canadian experts Bobby Shayegan and Philippe D. Violette discuss the new EAU guidelines on thromboprophylaxis in urological surgery.

FACULTY
Chair
Philippe D. Violette
Bobby Shayegan
Canada
Canada

These educational activities have been funded by SIU Corporate Sponsor
Emerging Landscape in the Treatment of Advanced PCA

In this programme, Bertrand Tombal (Belgium), Frederic Pouliot (Canada), and Bobby Shayegan (Canada) offer insights on treatment sequence strategies, with a focus on individualizing treatment in patients with advanced PCa. This programme utilizes case-based examples, incorporating a discussion of key clinical trial results, evidence-based guidelines and consensus recommendations.

FACULTY
Moderator
Bobby Shayegan
Canada

Panel of Experts
Bertrand Tombal
Belgium
Frédéric Pouliot
Canada

Ask the Experts: Intermittent Androgen Deprivation Therapy: For Whom, When and How?

In this Ask-the-Experts programme, our top-tier Canadian experts explore how IADT is influenced by:
- PSA level thresholds
- Co-morbidities
- Metastatic status
- Concurrent therapies
- And many more important factors

FACULTY
Moderator
Neil Fleshner
Canada

Panel of Experts
Laurence Klotz
Canada
Fred Saad
Canada

These educational activities have been funded by SIU Corporate Sponsor

COMING SOON!

Webcasts will soon be available for SIU’s August 9 eGrand Rounds, held in conjunction with Changhai Hospital in Shanghai.

This event featured expert surgeons and panelists, performing and discussing ureteroscopic lithotripsy (URS) for a 1–2 cm stone, mini percutaneous nephrolithotomy (PCNL), transurethral resection of bladder tumor (TURBT) “en bloc”, and lap partial nephrectomy.

Join us in Istanbul for the SIU eGrand Rounds on Stone Disease on September 4, broadcast from Istanbul Medipol University.

Led by Dr. Jean de la Rosette, these experienced surgeons will tackle challenging cases involving URS for a large stone (Esteban Emiliani, Spain), MIP-M (Daniel Perez Fentes, Spain), BITUEP (Thomas Herrmann, Switzerland), and TURBT “en bloc” (Josep Gaya Sopena, Spain). Local experts including Selcuk Guven, Pilar Laguna, Omer Levent Tuncay, Ahmet Muslumanoglu, Yigit Akin, Murat Can Kiremit, Tzevat Tefik, and Bulent Erkurt will moderate in the OR and serve as expert panelists.

This activity was supported by SIU Corporate Sponsor

2018 SIU Academy Awards

Headed to Athens next month? Join us for the 2018 SIU Academy Awards presentation to outstanding faculty for contributing some of the most-watched and impactful content on the platform.

Congratulations to the Winners!

Outstanding ePoster
Abnormal Dartos Fascia in Buried Penis: Evidence from Histopathology
Widi Atmoko, Indonesia

Outstanding Expert Review
Surgical Management of Pelvic Fracture Urethral Injuries
Sanjay Kulkarni, India and Gerald Jordan, United States

Outstanding eSeries
Myths and Realities of Penile Implant Infection
Tobias S. Köhler, United States

Outstanding Educational Video
Bipolar Button Transurethral Enucleation of Prostate in Benign Prostate Hypertrophy Treatment: A New Surgical Technique
Gabriella Mirabile, Italy

Outstanding Video Webcast - SIU Congress Lisbon 2017
Complications of Urethral Stricture Reconstruction and Complex Strictures
Anthony Mundy, United Kingdom; Daniela Andrich, United Kingdom, Margit Fisch, Germany, and Sanjay Kulkarni, India

This activity was supported by SIU Corporate Sponsor

www.siu-urology.org
CALL FOR VIDEOS – LIBRARY OF GOLD STANDARDS

*Last Call*

SIU Academy is pleased to invite submissions for its Library of Gold Standards on the topics of Reproductive & Sexual Health and Renal Cell Carcinoma (partial + radical nephrectomy).

Review the list of selection criteria available on the SIU Academy homepage and submit your video. Videos can be submitted from September 1 to 14, 2019. Videos submitted outside this period or videos that don’t meet the selection criteria will not be considered.

Join us in Athens for a Special Live Surgery Event held as part of the SIU 2019 Congress

**Thursday, October 17**

0730–1500

Covering:
- Oncology/Robotics
- Reconstructive Surgery: 3 Piece Penile prosthesis, PFUDD, Bulbar Urethroplasty
- Endourology Upper Tract
- Endourology Lower Tract


Women in Urology

A passionate journey: female urologist Siska Van Bruwaene shares her story

I often wake up thinking I must have the absolute best job in the world. I work with a dream team of six urologists in a large non-academic center in Kortrijk, Belgium. I focus on the quite distinct combination of prostate cancer and female urology. It still feels like Christmas to wake up to an operating schedule of robotic procedures, but I wouldn’t want to miss out on the satisfaction of curing a woman’s stress incontinence with a simple (though currently controversial) vaginal tape. We have three motivated residents with whom I enjoy chasing the latest exciting publication and writing the occasional paper. I love giving presentations, mainly to force myself to stay up-to-date, and I adore the large group of friends that I have established worldwide over the course of attending many conferences.

I completed my residency training at the University of Leuven and got offered the dream opportunity of a robotic fellowship in Melbourne, Australia. The passion for this wonderful job, and the essence of the urologist I’ve become, were shaped by several mentors who crossed my path. Some had magical hands and taught me that surgery is a work of art. Others brought an almost obsessive structure and made me pay attention to the tiniest steps of each procedure. Plenty of them convinced me the most important decisions in your career are made in the bar while having a beer. Being exposed to the scientific thirst for the latest updates in prostate cancer or the mesh saga made me feel part of a somewhat nerdy but very exciting hobby club.

Having praised the point that I’ve reached as well as the road to get there, there have nonetheless been moments of doubt and even regret. The working hours are long, the intensity of an apprenticeship to a craft that involves cutting into living humans is significant, and the difference between the 9 – 5 jobs of ‘normal’ people compared to mine is sometimes overwhelming. One of my first mentors made me promise to never let my job be the only thing in my life. This turned out to be more challenging than expected. But over the years my supervisors and now colleagues all lovingly accepted my passion for travel, adventure and music festivals. I’ve had my first complications as a consultant and experienced the sleepless nights thinking about what I could have done differently as well as the “second victim” feelings of guilt, shame and anxiety. In all this, having the blessing of dedicated, warm-hearted colleagues is of crucial importance.

Being a woman in this job has never struck me as extraordinary. I guess I’ve been lucky to train and work in a country that’s quite advanced on gender equality. The women I’ve met in urology are all tough cookies who know what they want and are prepared to fight for it. Many have children and seem to miraculously combine their jobs with motherhood. I have at least an equal amount of male urology friends who suffer from not being around enough to see their kids. The work-life balance question is not a female right anymore but a modern societal phenomenon that will drive further change. My advice for women considering a career in urology is to realize it’s a long and often passionate journey which determines large parts of your life. To me this adventure is worth it and I believe each person will be able to shape it into something that fits.
SIU activities around the globe have not slowed down in this second half of 2019.

June was a busy month for SIU Lecturers! Drs. Jean de la Rosette (SIU General Secretary), Paolo Gontero and Laurence Klotz (SIU Chair, Office of Research), presented an SIU session on Prostate Cancer during the Polish Urological Association (PTU) meeting June 12-15. At the same time, SIU’s Vice-President, Dr. Reynaldo Gomez was presenting on behalf of the SIU in Tehran during the Iranian Urological Association meeting.

The following week saw an SIU-Endorsed Event, the Challenges in Endourology Meeting in Berlin, where the SIU was once again represented by Dr. Laurence Klotz. At the end of the month, Dr. Patrick Coloby, a Past President of the Society presented the SIU Lecture during the 16th Annual Arab Association of Urology meeting in Casablanca.

Over the summer months, SIU also had a presence at the Society of Peruvian Urology (SPU) in Cusco (Dr. Simon Tanguay), the Urological Association of Asia meeting (Dr. Sanjay Kulkarni), and the Taiwanese Urological Association meeting in Taichung (Dr. Sudhir Rawal).

Many more activities are planned for the duration of 2019, including:

October
- Oman Urological Society Meeting in Muscat, Oman (Drs. Badrinath Konety, United States and Makarand Khochikar, India)
- Indonesian Urological Association Meeting in Banjarmasin, Indonesia (Kurt McCammon, United States)
- Central Asian Congress of Urology Meeting in Almaty, Kazakhstan (Dr. Jean de la Rosette, Turkey)

November
- Chinese Urological Association Meeting (Dr. Jean de la Rosette, Turkey)
- Caribbean Urological Association Meeting in Jamaica (Dr. Kurt McCammon, United States)
- Hong Kong Urological Association Meeting (Dr. Simon Tanguay, Canada)

We invite you to check your meeting programmes and follow SIU’s social media accounts to find out about SIU lectures coming to a urology conference near you!

As the president of the Jordanian Association of Urological Surgeons (JAUS), it gives me great pleasure to commence our collaboration with the Société Internationale d’Urologie (SIU) as of 2019.

Such collaboration will allow us to share the knowledge and expertise with each other that will reflect positively on our patients, providing them with the highest standard of care.

In addition, this will open up new horizons for our future generations for various types of learning opportunities through different SIU modules, which will help them continue the legacy of learning, development and advancement in this field of medicine.

We hope that this collaboration will bring great benefits for everyone and for the betterment of medicine as a whole.

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Society News: National Society Delegates and News from the Global Philanthropic Committee

As SIU Membership has grown sharply over the past 5 years, the Society’s Board of Directors has searched for new ways to engage its incredibly diverse membership. As part of this mandate, SIU is working closely with urological associations from across the globe with the aim to provide each country active representation within the SIU. This collaboration also serves to ensure that the SIU continues to develop relevant and timely educational and research programmes for its members.

To facilitate this change, there has been an update to SIU’s organizational structure. Now, each National Society who is a Group Member of the SIU is invited to select a National Society Delegate and a National Society Deputy Delegate who will become part of the SIU’s Committee of National Society Delegates. National Society Delegates will act as a liaison between their society and the SIU to ensure that a diversity of viewpoints, priorities and opinions are heard by SIU Leadership and committees. The first meeting of this group will take place during the SIU Congress in Athens. The SIU is excited to begin this new chapter of increased collaboration and exchange with colleagues around the world!

If you are part of a National Society that is an SIU Group Member, contact us at Jimmy.hong@siu-urology.org to find out who your national society delegate is and how you reach them as your SIU representative.

Global Philanthropic Committee

The Global Philanthropic Committee (GPC) is a partnership between the American Urological Association (AUA), European Urology Association (EAU), International Continence Society (ICS) and the Société Internationale d’Urologie (SIU), with the goal of supporting proposals for worthy projects to improve urologic care throughout the world. The GPC allows organizations to pool their resources to fund larger scale philanthropic projects as a collaborative effort.

Below you will find a report provided courtesy of ICS on a recent project supported by the GPC, the ICS Fistula Course held in Sudan last December.

Over 12–14th December 2018 ICS hosted the 7th Workshop for Surgical Repair of Vaginal Fistula and Urinary Incontinence. This was held at the Ministry of Health, Khartoum State in Sudan.

The course received generous support from the Global Philanthropic Fund. The ICS has a long and successful history of running fistula surgical training with an emphasis on training doctors who work in the developing world. A need was identified to host a course in Sudan where this training would be particularly beneficial due to the lack of resources and limited availability of qualified surgeons.

The Masterclass allowed over 20 delegates to receive theoretical and practical hands-on surgical training on repairs to vaginal fistulas. The course was held over 3 days: one half-day of education and 2-and-a-half of live surgery. The trainees acted as assistants to the trainers in all surgeries in order to acquire practical hands-on training and gain real-life experience in all steps, starting from the decision process of the treatment strategy, the approach and the technique. Interpositional flaps were discussed and applied practically including martius flaps, peritoneal flaps and fibrin glue.

The most important goal of the training program is the evaluation and repair of complicated and recurrent cases, which represent a fundamental problem for both the patients and surgeons. The scope of the training included the different techniques of urethral reconstruction and the treatment of associated urinary incontinence.

The workshop was open to all international delegates with a focus on including trainees and residents and those working in developing and resource-constrained countries. A full multi-disciplinary team taught various surgical techniques on local patients. ICS speakers covered the following topics:

- Aspects of the Problem
- Anatomical Consideration and Surgical Principles
- Classification of VVF
- Surgical Repair of VVF
- Complications of Surgery and Surgical Tips
- Fibrin Glue
- Postoperative care and patients follow up.

The delegates provided very positive evaluation comments following the event, noting that the core aims and learning objectives of the event were achieved. There was unanimous agreement that the training would maintain and improve the standard of care for the delegates’ patients.

In December 2019 ICS plans to host the 8th Workshop for Surgical Repair of Vaginal Fistula and Urinary Incontinence. This will be at the same venue in Sudan. Please check the ICS website for further updates to come.

To view a video presentation and photo album from the course please visit this link: www.ics.org/news/954

Delegates and faculty enjoyed a productive three days of education and training

Sherif Mourad demonstrating the surgical repair of a vaginal fistula
I was first introduced to the Société Internationale d’Urologie (SIU) during my residency at McGill in Montréal, Canada, where I had the privilege of being mentored by the late Dr. Mostafa Elhilali, as well as the current President of the SIU Dr. Simon Tanguay. The educational content provided by SIU Academy are valuable tools to a urology trainee. I also had the opportunity to work with SIU board member Dr. Kurt McCammon at Eastern Virginia Medical School in Norfolk, VA during my fellowship in reconstructive urology. In fellowship, I was able to participate in multiple international surgical missions alongside Dr. McCammon, through volunteer organisations supported in part by the SIU. The SIU’s philanthropy has not only aided in providing urologic care directly to patients, but also supports international medical education and not-for-profit technological advancements in urology. The SIU annual meetings are a true display of international collaboration, transfer of knowledge, and friendship, and it will be a great pleasure to join many other SIU members in Athens this coming fall. As a newly appointed academic urologist – specializing in reconstructive urology and laser BPH surgery at the McGill University Health Center – and new member of the SIU, I am looking forward to a lifelong partnership with the SIU.
Astellas is committed to turning innovative science into medical solutions that bring value and hope to patients worldwide. Every day, we work together to address unmet medical needs and help people living with cancer, overactive bladder, heart disease and transplants, among other conditions. We remain dedicated to meeting patients’ needs, and our support for them will never waver.

At Astellas, we’re focused on making changing tomorrow a reality.