**Aims and objectives of this session**

The stone is not the disease! Unraveling the epidemiology and pathomechanisms of renal stone formation should be the aim of stone research. A thorough understanding of why crystals are retained is necessary to improve preventive concepts.

Poster viewing of 20 minutes. Presentations will take place on stage. Standard presentations are 2 minutes in length, followed by 2 minutes for discussion.
8
Calcium oxalate stone formation: Microstructural evaluation of Randall plaque and the plaque/stone interface
By: Wendt-Nordahl G.1, Sethmann I.2, Enzmann F.3, Simon L.3, Knoll T.1, Klehe H.-J.2
Institutes: 1Klinikum Sindelfingen-Böblingen, Dept. of Urology, Sindelfingen, Germany, 2Technical University Darmstadt, Institut für Angewandte Geowissenschaften, Darmstadt, Germany, 3University Mainz, Institut für Geowissenschaften, Mainz, Germany

9
Association between polymorphisms in osteopontin gene (SPP1) and first episode calcium oxalate urolithiasis
By: Safarinejad M.R.
Institutes: Clinical Center for Urological Disease Diagnosis and Private Clinic Specialized In Urological and An, Dept. of Urology, Tehran, Iran

10
The association between the gene polymorphisms in the calcium-sensing receptor and calcium nephrolithiasis in Jiangxi Gannan area
By: Guoxi Z., Qingming Z., Xiaofeng Z., Quanliang L., Yijun X., Gengqing W., Xiaoning W., Bo J.
Institutes: Institute of Urology, Gannan Medical University, Dept. of Urology, First Affiliated Hospital of Gannan Medical University, Ganzhou, China

11
Characterizing the association between toll-like receptor types and nephrolithiasis with renal inflammation in an animal model
By: Ölçücü M.T.1, Teke K.1, Yalcin S.1, Olcucuoglu E.2, Caner V.5, Turk N.S.4, Tuncay O.L.3
Institutes: Agri State Hospital, Dept. of Urology, Agri, Turkey, 2Türkiye Yüksek İhtisas Education and Research Hospital, Dept. of Urology, Ankara, Turkey, 3Pamukkale University School of Medicine, Dept. of Urology, Denizli, Turkey, 4Pamukkale University School of Medicine, Dept. of Pathology, Denizli, Turkey, 5Pamukkale University School of Medicine, Dept. of Genetics, Denizli, Turkey

12
A study on the role of SLC26A6 in urolithiasis
Institutes: Tongji Hospital of Tongji Medical College, Huazhong University of Science and Technology, Dept. of Urology, Wuhan, China

13
Optimal management of cystine stone formers: 21-year retrospective follow-up study
By: Moore S.1, Somani B.1, Cook P.2
Institutes: University Hospital Southampton, Dept. of Urology, Southampton, United Kingdom, 2University Hospital Southampton, Dept. of Biochemical Pathology, Southampton, United Kingdom

14
Adherence of cystinuric patients to medical prevention treatment and its impact on clinical outcomes
By: Young G.2, Kampanitais S.1, Stasinou T.2, Bourdoumis A.3, Chow K.2
Institutes: Southend University Hospital, Dept. of Urology, Southend on Sea, United Kingdom, 2University Hospital of South Manchester, Dept. of Urology, Manchester, United Kingdom, 3Pennine Acute Hospitals NHS Trust, Dept. of Urology, Manchester, United Kingdom

15
Environmental melamine exposure increase renal tubular injury in patients with calcium urolithiasis: The possible mechanism of melamine associated urolithiasis formation
Institutes: Kaohsiung Medical University Hospital, Kaohsiung Medical University, PingTung Hospital, Dept. of Urology, Kaohsiung, Taiwan, 2Kaohsiung Medical University, Dept. of Public Health, College of Health Sciences, Kaohsiung, Taiwan, 3Kaohsiung Medical University, Graduate Institute of Medicine, Kaohsiung, Taiwan, 4Kaohsiung Medical University Hospital,
16

Withdrawn
By:
Institutes:
Aims and objectives of this session
The aim of this session is to evaluate outcomes of treatments in high risk and oligo-metastatic prostate cancer.

Poster viewing of 20 minutes. Presentations will take place on stage. Standard presentations are 2 minutes in length, followed by 2 minutes for discussion.

17
**Attempted nerve sparing in high risk prostate cancer: Does it have an impact on oncological and functional outcomes? A retrospective long-term single center study**

**By:** Furrer M.A.¹, Gross T.¹, Nguyen D.P.¹, Boxler S.¹, Genitsch V.², Burkhard F.¹, Thalmann G.¹

**Institutes:** University Hospital Bern, Dept. of Urology, Bern, Switzerland, ²University Hospital Bern, Institute of Pathology, Bern, Switzerland

18
**Impact of preoperative risk on metastatic progression and cancer specific death in patients with adverse pathology at radical prostatectomy**

**By:** Boehm K.¹, Leyh-Bannurah S-R.², Rosenbaum C.², Budäus L.³, Graefen M.³, Haferkamp A.¹, Tilki D.³

**Institutes:** University Medical Center, Johannes Gutenberg University, Dept. of Urology and Pediatric Urology, Mainz, Germany, ²University Medical Center, Dept. of Urology, Hamburg, Germany, ³University Medical Center, Martin-Clinic, Hamburg, Germany

19
**Low rate of positive surgical margins are not associated with improved biochemical recurrence in high-risk prostate cancer patients**

**By:** Srougi V.¹, Sanchez-Salas R.¹, Secin F.², Baghdadi M.¹, Nunes-Silva I.¹, Garcia-Barreras S.¹, Rembeyo G.¹, Rozet F.³, Galiano M.¹, Barret E.¹, Cathelineau X.¹

**Institutes:** Institut Montsouris, Dept. of Urology, Paris, France, ²CEMIC and San Lazaro Foundation, Dept. of Urology, Buenos Aires, Argentina

20
**Association between type 2 diabetes and curative treatment in men with intermediate and high risk localised prostate cancer**

**By:** Crawley D.¹, Garmo H.¹, Rudman S.², Stattin P.³, Zethelius B.⁴, Holmberg L.¹, Adolfsson J.⁴, Van Hemelrijck M.¹

**Institutes:** King's College London, Dept. of Cancer Epidemiology, London, United Kingdom, ²Guy's and St Thomas NHS Foundation Trust, Dept. of Medical Oncology, London, United Kingdom, ³Uppsala University, Dept. of Surgical Sciences, Uppsala, Sweden, ⁴Karolinska Institute, Dept. of Clinical Science, Intervention and Technology, Stockholm, Sweden

21
**Improved recurrence-free survival in locally advanced prostate cancer after robot-assisted radical prostatectomy with 3D-cancer mapping constructed by MRI/US fusion biopsy**

**By:** Kamoi K., Okihara K., Hongo F., Naitoh Y., Iwata A., Kanazawa M., Ushijima S., Ukimura O.

**Institutes:** Kyoto Prefectural University of Medicine, Dept. of Urology, Kyoto, Japan

22
**Assessing the 20-year outcomes of radical prostatectomy for high risk prostate cancer: Results from a large, multi-institutional series**

**By:** Bianchi M.¹, Colicchia M.², Gandaglia G.², Munegato S.⁴, Fossati N.², Bandini M.², Stabile A.²,
Oncological and functional outcomes after RP for high or very high-risk prostate cancer – Cytoreductive radical prostatectomy (cRP) is feasible in men with hormone-naive, metastatic prostate cancer (mPCA)

**Institutes:** Magna Graecia University, Dept. of Urology, Catanzaro, Italy; Vita-Salute University San Raffaele, Dept. of Urology, Milan, Italy; Mayo Clinic, Dept. of Urology, Rochester, United States of America; Molinette Hospital, Dept. of Urology, Turin, Italy; University Hospitals Leuven, Dept. of Urology, Leuven, Belgium; University Hospital of Bern, Dept. of Urology, Bern, Switzerland

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Freedom from androgen deprivation and radiotherapy therapy after upfront minimally invasive surgery for high-risk prostate cancer

**By:** Servián Vives P., Patel A., Winkler M.

**Institutes:** Imperial College Nhs Trust, Dept. of Urology, London, United Kingdom

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Survival associated with radical prostatectomy versus radiotherapy for high-risk prostate cancer: A contemporary, nationwide observational analysis

**By:** Jindal T., Dalela D., Karabon P., Vetterlein M., Seisen T., Trinh Q.-D., Jeong W., Menon M., Abdollah F.

**Institutes:** Henry Ford Hospital, Dept. of Urology, Detroit, United States of America

---

Impact of additional radiation and/or androgen deprivation therapy on functional outcomes after radical prostatectomy

**By:** Tennstedt P., Adam M., Tilki D., Steuber T., Haese A., Salomon G., Petersen C., Huland H., Graefen M., Huber W., Schlommm T.

**Institutes:** University Medical Center Eppendorf, Martini-Klinik, Hamburg, Germany; University of Tübingen, Dept. of Urology, Tübingen, Germany; University Medical Center Eppendorf, Dept. of Radiooncology, Hamburg, Germany; European Molecular Biology Laboratory (EMBL), Genome Biology Unit, Hamburg, Germany

---

Extended pelvic lymph node dissection for intermediate-high risk prostate cancer: Frequency and distribution of nodal metastases

**By:** Roscigno M., Nicolai M., Naspro R., Pellucchi F., Cornaghi L.B., Angiolilli D., Chinaglia D., Da Pozzo L.F.

**Institutes:** ASST Papa Giovanni XXIII, Dept. of Urology, Bergamo, Italy; ASST Papa Giovanni XXIII, Dept. of Pathology, Bergamo, Italy

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Predictors of early cancer specific and other cause mortality in high risk prostate cancer patients after radical prostatectomy: Results from a large, multi-institutional analysis

**By:** Bianchi M., Gandaglia G., Fossati N., Dell’Oglio P., Joniau S., Colicchia M., Munegato S., Bandini M., Spahn M., Scattoni V., Gontero P., Karnes J., Montorsi F., Briganti A.

**Institutes:** Vita-Salute University San Raffaele; Magna Graecia University, Dept. of Urology, Milan, Italy; University Hospital of Leuven, Dept. of Urology, Leuven, Belgium; Mayo Clinic, Dept. of Urology, Rochester, United States of America; University of Turin, Dept. of Urology, Turin, Italy; Vita-Salute University San Raffaele, Dept. of Urology, Milan, Italy; Mayo Clinic, Dept. of Urology, Rochester, United States

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Cytoreductive radical prostatectomy (cRP) is feasible in men with hormone-naive, metastatic prostate cancer (mPCA)

**By:** Heidenreich A., Briganti A., Karnes J., Fossati N., Gandaglia G., Montorsi F., Suardi N., Colicchia M., Shariat S., Pfister D.

**Institutes:** Uniklinik Köln, Dept. of Urology, Cologne, Germany; Vita Salute San Raffaele University, Urological Research Institute, Milan, Italy; Mayo Clinic, Dept. of Urology, Rochester, United States
Robot assisted radical prostatectomy in patients with oligometastatic prostate cancer
By: Jang W.S.¹, Heo J.E.¹, Oh K.T.¹, Kim M.S.¹, Kang D.H.¹, Jeong W.S.¹, Ham W.S.¹, Kim Y.S.², Cho I.R.³, Choi Y.D.¹

Institutes: Yonsei University College of Medicine, Dept. of Urology and Urological Science Institute, Seoul, South Korea, National Health Insurance Corporation Ilsan Hospital, Dept. of Urology and Urological Science Institute, Goyang, South Korea, Inje University College of Medicine, Dept. of Urology and Urological Science Institute, Gimhae, South Korea

Observation of preliminary clinical effect and analysis of perioperative complications of radical prostatectomy for patients with oligo-metastatic prostate cancer
By: Li G., Dai B., Ye D.

Institutes: Fudan University Shanghai Cancer Center, Dept. of Urology, Shanghai, China
## Joint Session of the European Association of Urology (EAU) and the Confederación Americana de Urología (CAU)

**Urology beyond Europe**

**Location:** Room London, North Hall (Level 1)

**Chairs:** J. Gutierrez, Winston Salem (US)
J. Palou, Barcelona (ES)

<table>
<thead>
<tr>
<th>Time</th>
<th>Session</th>
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<tbody>
<tr>
<td>09:30 - 09:35</td>
<td><strong>Welcome and introduction</strong></td>
</tr>
<tr>
<td></td>
<td>J. Gutierrez, Winston Salem (US)</td>
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<td></td>
<td>J. Palou, Barcelona (ES)</td>
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<tr>
<td>09:55 - 10:15</td>
<td><strong>Focal therapy for prostate cancer, is it ready for prime time?</strong></td>
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<td>R.E. Sanchez-Salas, Paris (FR)</td>
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<tr>
<td>09:35 - 09:55</td>
<td><strong>High risk localised prostate cancer, radical prostatectomy versus radiotherapy</strong></td>
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<td></td>
<td>A. Briganti, Milan (IT)</td>
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<tr>
<td>10:15 - 10:35</td>
<td><strong>Active surveillance for prostate cancer, whom and how?</strong></td>
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<td>C.H. Bangma, Rotterdam (NL)</td>
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<tr>
<td>10:35 - 10:55</td>
<td><strong>Cytoreductive nephrectomy in kidney cancer, is still important?</strong></td>
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<td>P.F.A. Mulders, Nijmegen (NL)</td>
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<tr>
<td>10:55 - 11:15</td>
<td><strong>Has robotic surgery made a real difference in cystectomy?</strong></td>
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<td>O. Castillo, Santiago (CL)</td>
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<td>11:15 - 11:35</td>
<td><strong>Upper tract tumour conservative management: New insights</strong></td>
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<td>A. Breda, Barcelona (ES)</td>
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<tr>
<td>11:35 - 11:55</td>
<td><strong>Testosterone controversy, current guidelines</strong></td>
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<td>M. Sotomayor de Zavaleta, Mexico (MX)</td>
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<td>11:55 - 12:15</td>
<td><strong>Male LUTS: Which pills for what?</strong></td>
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<td>M.J. Drake, Bristol (GB)</td>
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<td>12:15 - 12:35</td>
<td><strong>Overactive Bladder: Differential diagnosis for appropriate management</strong></td>
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<td>J. Angulo Cuesta, Madrid (ES)</td>
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<tr>
<td>12:35 - 12:55</td>
<td><strong>Complex stone cases, guidelines base discussion</strong></td>
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<tr>
<td>12:35 - 12:55</td>
<td><strong>Presenter:</strong></td>
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<td>J. Gutierrez, Winston Salem (US)</td>
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<tr>
<td>12:35 - 12:55</td>
<td><strong>Discussants:</strong></td>
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<td>N. Bernardo, Buenos Aires (AR)</td>
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<td>M. Cepeda, Valladolid (ES)</td>
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<tr>
<td>12:55 - 13:00</td>
<td><strong>EAU Información a Pacientes</strong></td>
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<td>J.L. Vásquez Mendoza, Copenhagen (DK)</td>
</tr>
</tbody>
</table>
Joint Session of the European Association of Urology (EAU) and World Chinese Urologists (CUA/TUA)

**Location:** Room 7, Capital suite (level 3)

**Chairs:** T.L. Lin, Taipei (TW)
F. Montorsi, Milan (IT)
Y-H. Sun, Shanghai (CN)

**Aims and objectives of this session**
To promote the scientific exchange and collaboration between Chinese and European urologists in order to provide better care for urological patients.

**09:30 - 09:35**
**Welcome and introduction**
T.L. Lin, Taipei (TW)
F. Montorsi, Milan (IT)
Y-H. Sun, Shanghai (CN)

**09:35 - 09:45**
**EAU patient information - Chinese translation**
T. Bach, Hamburg (DE)

**09:45 - 10:20**
**Management of renal stones**

**Moderators:**
O. Traxer, Paris (FR)
K-H. Tsui, Taipei (TW)
Z-Q. Ye, Wuhan (CN)

**09:45 - 09:55**
**Innovative concepts in percutaneous nephrolithotomy: Lessons learned from 1200 cases**
C-H. Shen, Chiayi (TW)

**09:55 - 10:05**
**Complications after RIRS**
L. Villa, Milan (IT)

**10:05 - 10:15**
**Super-Mini PCNL for the treatment of renal stone**
G-H. Zeng, Guangzhou (CN)

**10:15 - 10:20**
**Discussion**

**10:20 - 10:55**
**Uro-oncology**

**Moderators:**
S. Shariat, Vienna (AT)
W-J. Wu, Kaohsiung (TW)
L-P. Xie, Hangzhou (CN)

**10:20 - 10:30**
**The emergence of common actionable targets for cancer metastasis evolution: Precision medicine in urological cancer**
T.L. Cha, Taipei (TW)
<table>
<thead>
<tr>
<th>Time</th>
<th>Session</th>
<th>Speakers</th>
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<tbody>
<tr>
<td>10:30 - 10:40</td>
<td>Genomic architecture and evolution of clear cell renal cell carcinomas defined by multiregion</td>
<td>M. Gerlinger, London (GB)</td>
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<td></td>
<td>sequencing</td>
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<td>10:40 - 10:50</td>
<td>2017: Updates in China prostate cancer consortium</td>
<td>X.U. Gao, Shanghai (CN)</td>
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<tr>
<td>10:50 - 10:55</td>
<td>Discussion</td>
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<tr>
<td>10:55 - 11:35</td>
<td>Endourology</td>
<td>X. Gao, Guangzhou (CN)</td>
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<td>E. Liatsikos, Patras (GR)</td>
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<td>C.T. Wu, Keelung (TW)</td>
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<tr>
<td>10:55 - 11:05</td>
<td>Laparoendoscopic Single-Site (LESS) retroperitoneal approach for nephroureterectomy</td>
<td>E.Y-H. Huang, Taipei (TW)</td>
</tr>
<tr>
<td>11:05 - 11:15</td>
<td>Retroperitoneal versus anterior approach in kidney cancer: When and why</td>
<td>G. Carrieri, Foggia (IT)</td>
</tr>
<tr>
<td>11:15 - 11:25</td>
<td>Sun's Tip Flexible Ureteroscope in the application of upper urinary tract surgeries</td>
<td>G.S. Yang, Shanghai (CN)</td>
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<td>11:25 - 11:35</td>
<td>Discussion</td>
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<tr>
<td>11:35 - 12:15</td>
<td>Urothelial cancer/Renal cancer</td>
<td>A. Alcaraz, Barcelona (ES)</td>
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<td>Y.S. Pu, Taipei (TW)</td>
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<td>J. Zheng, Shanghai (CN)</td>
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<td>11:45 - 11:55</td>
<td>Renal biopsy: More dogma belied</td>
<td>U. Capitanio, Milan (IT)</td>
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<tr>
<td>11:55 - 12:05</td>
<td>2017: Updates in upper urothelial cancer in China</td>
<td>L-Q. Zhou, Beijing (CN)</td>
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<td>12:05 - 12:15</td>
<td>Discussion</td>
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<td>12:15 - 12:55</td>
<td>Functional urology</td>
<td>Y.C. Chuang, Kaohsiung (TW)</td>
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<td>M. Lazzeri, Florence (IT)</td>
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<td>K-X. Xu, Beijing (CN)</td>
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<td>Time</td>
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<td>Author(s)</td>
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<tr>
<td>12:15 - 12:25</td>
<td>Urinating in the standing position: A feasible alternative for women with knee osteoarthritis or detrusor underactivity</td>
<td>C.L. Chou, Taichung (TW)</td>
</tr>
<tr>
<td>12:25 - 12:35</td>
<td>Intradetrusor onabotulinumtoxinA injections: The best technique</td>
<td>T.M. Kessler, Zurich (CH)</td>
</tr>
<tr>
<td>12:35 - 12:45</td>
<td>Transperineal bulbo-prostatic anastomosis in patients with simple traumatic posterior urethral strictures: A 15-year retrospective study from a referral urethral center</td>
<td>F. Qiang, Shanghai (CN)</td>
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<tr>
<td>12:45 - 12:55</td>
<td>Discussion</td>
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**Conclusion**

T.L. Lin, Taipei (TW)
F. Montorsi, Milan (IT)
Y-H. Sun, Shanghai (CN)
Aims and objectives of this session

ESO Observatories are high level sessions organised during major international congresses with the aim of providing the audience with updated and unbiased information on a given topic. An ESO Observatory lasts about 1 hour and half and concentrates on a forecast given by a panel of experts of what is expected to happen in their own field in the coming 12 months. The Panel includes distinguished clinicians and scientists and a patient advocate.

The forecast by each panelist is given in the form of a concise, take-home messages with a 7 minute presentation followed by 3 minutes of discussion. The forecast will be discussed by the panel.

10:00 - 10:05
Introduction
H. Van Poppel, Leuven (BE)
R. Valdagni, Milan (IT)

10:05 - 10:15
The researcher’s perspective
N. Zaffaroni, Milan (IT)

10:15 - 10:25
The urologist’s perspective on surgery
D. Tilki, Hamburg (DE)

10:25 - 10:35
The urologist’s perspective on active surveillance
S. Joniau, Leuven (BE)

10:35 - 10:45
The imaging specialist’s perspective on MRI
C. Moore, London (GB)

10:45 - 10:55
The pathologist’s perspective
T. Van der Kwast, Toronto (CA)

10:55 - 11:05
The radiation oncologist’s perspective
M. Bolla, Grenoble (FR)

11:05 - 11:15
The medical oncologist’s perspective
M. De Santis, Coventry (GB)
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<tr>
<th>Time</th>
<th>Session Title</th>
<th>Speaker</th>
<th>Location</th>
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<tbody>
<tr>
<td>11:15 - 11:25</td>
<td>The imaging specialist's perspective on PSMA</td>
<td>U. Haberkorn, Heidelberg (DE)</td>
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<tr>
<td>11:25 - 11:35</td>
<td>The patient's perspective</td>
<td>L. Denis, Antwerp (BE)</td>
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<tr>
<td>11:35 - 11:45</td>
<td>Discussion and take home messages</td>
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Special session of the Prostate Cancer Prevention Group

Location: Room Stockholm, North Hall (Level 1)

Chairs: J. Cuzick, London (GB)
        A. Stenzl, Tübingen (DE)
        M. Wirth, Dresden (DE)

Aims and objectives of this session
Focus on how best to identify individuals for active surveillance and what the follow up protocols should be

10:00 - 10:05
Welcome and introduction
J. Cuzick, London (GB)
A. Stenzl, Tübingen (DE)
M. Wirth, Dresden (DE)

10:05 - 11:00
Early detection
Moderator: J. Cuzick, London (GB)

10:05 - 10:20
ProtecT
F.C. Hamdy, Oxford (GB)

10:20 - 10:35
ERSPC
J. Hugosson, Göteborg (SE)

10:35 - 10:50
PLCO
H. Parnes, Bethesda (US)

10:50 - 11:00
Question and answers

11:00 - 12:50
Risk factors and biomarkers for screening and triage
Moderator: A. Stenzl, Tübingen (DE)

11:00 - 11:15
Familial and genetic factors: New SNPs and panels
R.A. Eeles, London (GB)

11:15 - 11:30
Dietary and lifestyle factors
T. Key, Oxford (GB)

11:30 - 11:45
The role of miRNA in oncogenesis and progression
M. Wirth, Dresden (DE)

11:45 - 11:55
Questions and answers (risk factors)
<table>
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<th>Time</th>
<th>Session Title</th>
<th>Speaker</th>
<th>Location</th>
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</thead>
<tbody>
<tr>
<td>11:55 - 12:10</td>
<td>Blood and urine-based biomarkers</td>
<td>J.A. Schalken</td>
<td>Nijmegen NL</td>
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<tr>
<td>12:25 - 12:40</td>
<td>Imaging-based biomarkers: mpMRI</td>
<td>P. Albers</td>
<td>Düsseldorf DE</td>
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<tr>
<td>12:40 - 12:50</td>
<td>Questions and answers (Biomarkers)</td>
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<td>12:50 - 13:20</td>
<td>Break</td>
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<tr>
<td>13:20 - 13:35</td>
<td>Observation or active surveillance or curative treatment: What do PIVOT data tell us?</td>
<td>T.J. Wilt</td>
<td>Minneapolis US</td>
</tr>
<tr>
<td>13:35 - 13:50</td>
<td>Observation or active surveillance or curative treatment: What do SPCG-4 data tell us?</td>
<td>A. Bill-Axelson</td>
<td>Uppsala SE</td>
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<tr>
<td>13:50 - 14:05</td>
<td>Prospective validation of active surveillance: PRIAS</td>
<td>C.H. Bangma</td>
<td>Rotterdam NL</td>
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<tr>
<td>14:05 - 14:15</td>
<td>Questions and answers (Management of low risk cancer)</td>
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<tr>
<td>14:15 - 14:30</td>
<td>5-α Reductase inhibitors: Do they prevent only low-grade disease and increase high-grade disease?</td>
<td>C.G. Roehrborn</td>
<td>Dallas US</td>
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<tr>
<td>14:30 - 14:40</td>
<td>Aspirin</td>
<td>M. Thorat</td>
<td>London GB</td>
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<tr>
<td>14:40 - 14:50</td>
<td>Nutraceuticals</td>
<td>V. Fradet</td>
<td>Quebec CA</td>
</tr>
<tr>
<td>14:50 - 15:00</td>
<td>Questions and answers (Preventive therapy)</td>
<td></td>
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</tr>
<tr>
<td>15:00 - 16:00</td>
<td>Consensus panel discussion</td>
<td>Moderator: J. Cuzick</td>
<td>London GB</td>
</tr>
</tbody>
</table>
Joint Session of the European Association of Urology (EAU) and the Arab Association of Urology (AAU)

Urology beyond Europe

**Friday, 24 March**
**10:30 - 13:00**

**Location:** Room Munich, North Hall (Level 1)

**Chairs:**
H. Abol-Enein, Mansoura (EG)
Y. Farahat, Tanta (EG)
M. Wirth, Dresden (DE)

**Aims and objectives of this session**
After this session the audience will have gained knowledge about some hot topics that touch upon clinical practice. Topics include how to treat stress incontinence in females without the need to implant a synthetic material and how to make a successful implantation of a penile prosthesis. Management of small renal masses will be outlined, and a presentation will examine if locally advanced prostate cancer has become a curable disease. Postprostatectomy incontinence needs to be verified. The audience will learn how posterior urethroplasty is performed successfully, how organ-sparing strategy is getting wider acceptance and finally how the ileum can be used in reconstructive urological procedures.

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**10:30 - 10:40**

**Welcome and introduction**
I. Bani-Hani, Amman (JO)
M. Wirth, Dresden (DE)

**10:40 - 11:20**

**Session I: Andrology and female urology**

**10:40 - 11:00**

**Stress urinary incontinence: I treat it without synthetic materials**
C.R. Chapple, Sheffield (GB)

**11:00 - 11:20**

**Penile prosthesis: How I do it to be successful**
A. Shamsodini Takhtei, Doha (QA)

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**11:20 - 12:05**

**Session II: Reconstructive urology**

**11:20 - 11:35**

**Use of ileum in urology**
H. Abol-Enein, Mansoura (EG)

**11:35 - 11:50**

**Posterior urethroplasty: How I do it**
A.W. El-Kassaby, El Rehab City (EG)

**11:50 - 12:05**

**Postprostatectomy incontinence: How to avoid and how to manage**
D.M. Castro Díaz, La Laguna Santa Cruz Tenerife (ES)

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**12:05 - 12:50**

**Session III: Oncology**

**12:05 - 12:20**

**Management of small renal mass**
P.F.A. Mulders, Nijmegen (NL)

**12:20 - 12:35**

**Organ sparing surgeries (kidney, ureter, bladder)**
<table>
<thead>
<tr>
<th>Time</th>
<th>Session Content</th>
</tr>
</thead>
<tbody>
<tr>
<td>12:35 - 12:50</td>
<td>Locally advanced prostate cancer is a treatable disease&lt;br&gt;M. Wirth, Dresden (DE)</td>
</tr>
<tr>
<td>12:50 - 13:00</td>
<td>Discussion and closure</td>
</tr>
</tbody>
</table>
Joint Session of the European Association of Urology (EAU) and the Pan-African Urological Surgeons Association (PAUSA)

Urology beyond Europe

**Location:** Room 9, Capital suite (level 3)

**Chairs:**
- I. Khalaf, Nasr City (EG)
- S.D. Mante, Accra (GH)
- L. Marconi, Coimbra (PT)

**Aims and objectives of this session**
- Diagnosis and management of small renal masses (EAU Guidelines)
- Diagnosis and management of advanced renal masses (EAU Guidelines)
- Morbidity management of neglected tropical diseases
- Improving cancer outcomes and survivorship
- Scope of endourology in Kenya and its challenges

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**10:30 - 10:50**

**State-of-the-art lecture:** Small renal masses: The need for preoperative biopsy?

I. Khalaf, Nasr City (EG)

**Discussion**

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**10:50 - 10:55**

**Discussion**

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**10:55 - 11:15**

**Management of small renal masses - EAU Guidelines position**

L. Marconi, Coimbra (PT)

**Discussion**

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**11:15 - 11:20**

**Discussion**

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**11:20 - 11:40**

**Management of advanced renal cancer – What the EAU Guidelines say**

A. Bex, Amsterdam (NL)

**Discussion**

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**11:40 - 11:45**

**Discussion**

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**11:45 - 12:05**

**Cancer and survivorship – Improving outcomes beyond surgery**

S. MacLennan, Aberdeen (GB)

**Discussion**

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**12:05 - 12:10**

**Discussion**

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**12:10 - 12:30**

**African filariasis morbidity project: New tools for scaling up hydrocelectomy in endemic countries**

S.D. Mante, Accra (GH)

**Discussion**

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**12:30 - 12:35**

**Discussion**

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**12:35 - 12:55**

**Epidemiology and Genetics of Prostate Cancer in Sub-Saharan Africa: Are our registries sufficient?**

S. Mutambirwa, Pretoria (ZA)
Joint Session of the European Association of Urology (EAU) and the Pakistan Association of Urological Surgeons (PAUS)

Urology beyond Europe

**Location:** Room 4, Capital suite (level 3)

**Chairs:** I. Korneyev, St. Petersburg (RU)
M. Sheriff, Gillingham, Kent (GB)

**Aims and objectives of this session**
In this session EAU & PAUS will collaboratively endeavour to provide an overview of the latest developments in two important areas of Urological practice. The aim is to discuss ethical challenges and latest technical advances in renal transplantation and management of prostate cancer, which is increasing in Pakistan.

10:30 - 10:35

**Welcome and introduction**
M. Ahmad, Rahimyar Khan (PK)
C.R. Chapple, Sheffield (GB)

10:35 - 11:40

**Renal transplantation**

**Moderators:**
A. Mahmood, Rawalpindi (PK)
J.D. Olsburgh, London (GB)

10:35 - 10:45

**Technological advances in renal transplantation**
J.D. Olsburgh, London (GB)

10:45 - 10:55

**Donor nephrectomy: Transition to laparoscopy in Pakistan**
R. Mohsin, Karachi (PK)

10:55 - 11:05

**Current immunosuppressive regimens in renal transplantation**
F. Diekmann, Barcelona (ES)

11:05 - 11:25

**Ethical challenges in organ transplantation: Where are we in Pakistan?**
S.A. Naqvi

11:15 - 11:25

**State-of-the-art lecture:** Postgraduate urological training in Pakistan & Europe: What can we learn from each other?
M.S. Khan, Orpington (GB)

11:25 - 11:40

**Discussion**

11:40 - 12:25

**Prostate cancer**

**Moderators:**
S. Akhter, Islamabad (PK)
F. Montorsi, Milan (IT)

11:40 - 11:55

**Management of prostate cancer: Update**
11:55 - 12:10

F. Montorsi, Milan (IT)

**Prostate cancer in Pakistan: Challenges in the management of an emerging problem**
F. Abbas, Karachi (PK)

12:10 - 12:25

Discussion

12:25 - 12:55

Joint EAU-PAUS case discussion

**Panel:**
M.N. Syed, Karachi (PK)
F. Montorsi, Milan (IT)
Q. Zia, Chaklala Rawalpindi (PK)

12:25 - 12:40

Case 1

12:40 - 12:55

Case 2

12:55 - 13:00

**Conclusion**
M.S. Khan, Orpington (GB)
I. Korneyev, St. Petersburg (RU)
### Aims and objectives of this session
As every year, this session is a very important opportunity aimed at bringing together experts from the EAU and Maghreb countries, exchanging and enriching our knowledge around a very interesting and contemporary scientific programme.

<table>
<thead>
<tr>
<th>Time</th>
<th>Event</th>
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<tbody>
<tr>
<td>10:30 - 10:35</td>
<td>Welcome and introduction</td>
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<tr>
<td>10:35 - 11:00</td>
<td>BPH</td>
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<td>10:35 - 10:50</td>
<td>TURP: Is the gold standard treatment of benign prostatic obstruction free of complications?</td>
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<td>10:50 - 11:00</td>
<td>Is laser prostatectomy ready to prime time in BPH surgery?</td>
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<tr>
<td>11:00 - 11:30</td>
<td>Bladder cancer</td>
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<td>11:00 - 11:15</td>
<td>When to switch for a cystectomy in MNIBC?</td>
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<tr>
<td>11:15 - 11:30</td>
<td>Lymphadenectomy in the treatment of invasive bladder tumour: Technique, extent and oncological value</td>
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<tr>
<td>11:30 - 12:00</td>
<td>Stones</td>
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<td>11:30 - 11:45</td>
<td>Epidemiology of urinary stones in Maghreb countries</td>
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<tr>
<td>11:45 - 12:00</td>
<td>Will flexible ureteroscopy replace PCNL?</td>
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<tr>
<td>12:00 - 12:30</td>
<td>Kidney cancer</td>
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<tr>
<td>12:00 - 12:15</td>
<td>Which are my limits for a partial nephrectomy in a kidney tumour?</td>
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<tr>
<td>Time</td>
<td>Session</td>
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<tr>
<td>12:15 - 12:30</td>
<td><strong>The role of percutaneous biopsy in the management of renal tumours</strong></td>
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<td>A. Volpe, Novara (IT)</td>
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<td>12:30 - 12:55</td>
<td><strong>OAB male LUTS</strong></td>
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<td>12:30 - 12:40</td>
<td><strong>Current management of OAB</strong></td>
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<td>A. Bouzouita, Ariana Supérieure (TN)</td>
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<tr>
<td>12:40 - 12:55</td>
<td><strong>What to do if my BPH patient maintains bothersome storage LUTS</strong></td>
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<td>T. Antunes Lopes, Porto (PT)</td>
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<tr>
<td>12:55 - 13:00</td>
<td><strong>Conclusions</strong></td>
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<tr>
<td></td>
<td>F. Cruz, Porto (PT)</td>
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<td>H.A. El Alj, Rabat (MA)</td>
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</table>
### Joint Session of the European Association of Urology (EAU) and the Federation of ASEAN Urological Associations (FAUA)

**Urology beyond Europe**

**Friday, 24 March**
**10:30 - 13:00**

**Location:** Room 14, Capital suite (level 3)

**Chairs:** C.C.M. Lei, Kuching (MY)
J.W. Thüroff, Mannheim (DE)

**Aims and objectives of this session**
This session represents the best from FAUA (Federation of ASEAN Urological Associations), which was first formed in Kuala Lumpur in 1993. The ASEAN community is very diverse, with many areas under-served but with top of the range technology and expertise in the capital cities. The EAU-FAUA session is an excellent forum for ASEAN to collaborate not only with EAU but the rest of the world!

<table>
<thead>
<tr>
<th>Time</th>
<th>Session</th>
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<tbody>
<tr>
<td>10:30 - 10:35</td>
<td><strong>Welcome and introduction by chairs</strong></td>
</tr>
<tr>
<td>10:35 - 10:45</td>
<td><strong>Intraoperative tele-conferencing and tele-referral with smartphones: Evolution and current application in the Philippines</strong>&lt;br&gt;E.V. Arada III, Metro Manila (PH)</td>
</tr>
<tr>
<td>10:45 - 10:55</td>
<td><strong>First 100 cases of robotic cystectomy: Hospital Kuala Lumpur, Malaysia</strong>&lt;br&gt;M. Sundram, Petaling Jaya (MY)</td>
</tr>
<tr>
<td>10:55 - 11:05</td>
<td><strong>Choice of urinary diversion after radical cystectomies</strong>&lt;br&gt;V.L. Chuyen, Ho Chi Minh City (VN)</td>
</tr>
<tr>
<td>11:05 - 11:20</td>
<td><strong>EAU Lecture: Continent urinary diversion: What lessons have we Learned?</strong>&lt;br&gt;J.W. Thüroff, Mannheim (DE)</td>
</tr>
<tr>
<td>11:20 - 11:25</td>
<td><strong>Discussion</strong></td>
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<tr>
<td>11:25 - 11:35</td>
<td><strong>Contemporary management of elusive genitourinary tuberculosis: Asian perspective</strong>&lt;br&gt;T. Lwin, Yangon (MM)</td>
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<tr>
<td>11:35 - 11:45</td>
<td><strong>RIRS to treat large kidney stones</strong>&lt;br&gt;E. Chotikawanich, Khonkaen (TH)</td>
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<tr>
<td>11:45 - 11:55</td>
<td><strong>Pyeloplasty for UPJ obstruction, laparoscopy or robotic assisted</strong>&lt;br&gt;H.D. Ngo, Ho Chi Min City (VN)</td>
</tr>
<tr>
<td>11:55 - 12:05</td>
<td><strong>Urethral stricture in a 100 million motorcycles-country: A multicentre study</strong>&lt;br&gt;K. Adi, Bandung (ID)</td>
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<tr>
<td>12:05 - 12:10</td>
<td><strong>Discussion</strong></td>
</tr>
<tr>
<td>12:10 - 12:20</td>
<td><strong>EAU lecture: Surgery for high risk and oligometastastic prostate cancer</strong>&lt;br&gt;M. Wirth, Dresden (DE)</td>
</tr>
</tbody>
</table>
12:20 - 12:30  Updates on metastatic prostate cancer treatment and their utility in Asia
E. Chiong, Singapore (SG)

12:30 - 12:45  Prostate health index for prostate cancer detection and aggressiveness in Asian patients with the 4.0 to 10.0 ng/mL range
B. Lojanapiwat, Chiang Mai (TH)

12:45 - 12:55  Discussion

12:55 - 13:00  Closing remarks by chairs
# Extracorporeal shock wave lithotripsy

**Location:** Room Milan, North Hall (Level 1)

**Chairs:** K.H. Andreassen, Frederiksberg (DK)
R. Cleveland, Boston (US)

## Aims and objectives of this session

ESWL was the method of first choice in stone treatment for two decades. Endourology has now taken this role of many indications. However, the idea of (almost) no-touch stone disintegration is convincing and new technological developments may turn back the clock.

Poster viewing of 20 minutes. Presentations will take place on stage. Standard presentations are 2 minutes in length, followed by 2 minutes for discussion.

<table>
<thead>
<tr>
<th>Number</th>
<th>Title</th>
<th>By</th>
<th>Institutes</th>
</tr>
</thead>
<tbody>
<tr>
<td>32</td>
<td>CT texture analysis of ex vivo renal stones predicts ease of fragmentation with shock wave lithotripsy</td>
<td>Devlies W., Cui H., Ravenscroft S., Heers H., Freidin A., Cleveland R., Turney B.</td>
<td>University of Oxford, Oxford Stone Group, Oxford, United Kingdom, KU Leuven, Faculty of Medicine, Leuven, Belgium, University of Oxford, Medical Sciences Division, Oxford, United Kingdom, Philipps-Universität Marburg, Dept. of Urology and Paediatric Urology, Marburg, Germany, University of Oxford, Kennedy Institute of Rheumatology, Oxford, United Kingdom</td>
</tr>
<tr>
<td>33</td>
<td>Predictive factors of the outcome of extracorporeal shockwave lithotripsy in the treatment of upper urinary tract stones: Evidence from a prospective study</td>
<td>Quaresima L., Pretore E., Moroni L., Galosi A.B.</td>
<td>Polytechnic University of The Marche Region, Dept. of Urology, Ancona, Italy</td>
</tr>
<tr>
<td>34</td>
<td>Prediction for success rate of shock wave lithotripsy using mean stone density-stone heterogeneity index ratio calculating Hounsfield unit on non-contrast computed tomography</td>
<td>Jeong W.S., Kang D.H., Cho K.S., Ham W.S., Choi Y.D., Lee J.Y.</td>
<td>Severance Hospital, Urological Science Institute, Yonsei University College of Medicine, Dept. of Urology, Seoul, South Korea</td>
</tr>
<tr>
<td>35</td>
<td>Ultrasonography is not inferior to fluoroscopy to guide extracorporeal shock waves during treatment of renal and upper ureteric calculi: A randomized prospective cohort study</td>
<td>Van Besien J., Uvin P., Merckx L.</td>
<td>AZ Sint Lucas Ghent, Dept. of Urology, Ghent, Belgium</td>
</tr>
<tr>
<td>36</td>
<td>Pretreatment with low energy shockwaves and a 3-minute pause reduces markers of renal injury in patients undergoing extracorporeal shockwave lithotripsy</td>
<td>Ilyas R., Young G., Chow K.</td>
<td>University Hospital of South Manchester NHS Foundation Trust, Dept. of Urology, Manchester, United Kingdom</td>
</tr>
<tr>
<td>37</td>
<td>Ultraslow high power SWL versus slow power ramping SWL in stones with high attenuation value</td>
<td>Al-Dessoukey A., Abdallah M., Sayed O., Abdallah R., Moussa A., Zayed A., Elmarakby A., Massoud A.</td>
<td>Beni Suef University, Dept. of Urology, Cairo, Egypt, Theodor Bilharz research institute, Dept. of Urology, Giza, Egypt</td>
</tr>
<tr>
<td>38</td>
<td>Dual shockwave and using high-flow oxygen administration by nasal cannula (HFONC) may</td>
<td></td>
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</tbody>
</table>
improve lithotripsy results
By: Gatkin M., Sopotov A., Raikin I.
Institutes: Zdorovie Center, Dept. of Urology, Barnaul, Russia

Ureteral stenting can be a negative predictor for successful outcome following shock wave lithotripsy in patients with ureteral stones
Institutes: Severance Hospital, Urological Science Institute, Yonsei University College of Medicine, Dept. of Urology, Seoul, South Korea

Adjuvant alpha blockers to extracorporeal shock wave lithotripsy: A randomized controlled trial
Institutes: Grenoble University Hospital, Dept. of Urology, Grenoble Cedex 9, France

Medical expulsive therapy following SWL in ureteral calculi: An effective approach for the improvement of health-related quality of life
By: Eryildirim B., Sahin C., Tuncer M., Sabuncu K., Tarhan F., Sarica K.
Institutes: Dr. Lutfi Kirdar Training and Research Hospital, Dept. of Urology, Istanbul, Turkey

Does previous stone surgery affect the outcome of SWL treatment in adults with kidney stones?
By: Gültekin M.H.1, Turegun F.A.1, Ozkan B.2, Tansu N.1, Kendigelen P.3, Erozenci A.1, Onal B.1
Institutes: 1Cerrahpasa Medical Faculty, Dept. of Urology, Istanbul, Turkey, 2Acibadem University, Dept. of Urology, Istanbul, Turkey, 3Cerrahpasa Medical Faculty, Dept. of Anesthesiology, Istanbul, Turkey

Does shockwave lithotripsy impair urine pH? Results of the prospective Swiss Kidney Stone Cohort register
By: Skuginna V.1, Mohebbi N.2, Fuster D.1, Kim M-J.3, Wagner C.2, Wuerzner G.4, Dhayat N.2, Bonny O.5, Roth B.1
Institutes: 1University Hospital Bern, Dept. of Urology and Nephrology, Bern, Switzerland, 2University Hospital Zürich, Dept. of Urology and Nephrology, Zürich, Switzerland, 3University Hospital Basel, Dept. of Urology and Nephrology, Basel, Switzerland, 4University Hospital Geneva, Dept. of Urology and Nephrology, Geneva, Switzerland, 5University Hospital Lausanne, Dept. of Urology and Nephrology, Lausanne, Switzerland

Extracorporeal shock-wave lithotripsy (ESWL) for renal stones is associated with decreased kidney function after long term follow-up
By: Fankhauser C.1, Grogg J.1, Holenstein A.1, Zhong Q.2, Steurer J.3, Hermanns T.1, Sulser T.1, Poyet C.1
Institutes: 1University Hospital of Zurich, Dept. of Urology, Zurich, Switzerland, 2University Hospital of Zurich, Dept. of Pathology, Molecular Pathology, Zurich, Switzerland, 3University Hospital of Zurich, Horten Centre for Patient Oriented Research and Knowledge Transfer, Zurich, Switzerland

Extracorporeal shock wave lithotripsy (ESWL) monotherapy in children; predictors of successful outcome
By: Alsagheer G., Abdel-Kader M., Hasan A., Mohamed O., Atef F., Mahmoud O., Abolyosr A.
Institutes: South Valley University, Dept. of Urology, Qena, Egypt

Urinary tract infections raise risk for renal hematoma after shock-wave lithotripsy
By: Schregel C., John H., Keller I., Randazzo M.
Institutes: Kantonsspital Winterthur, Dept. of Urology, Winterthur, Switzerland
Aims and objectives of this session
This session focuses mainly on different indications for and techniques of robot-assisted laparoscopic surgery. Robotic partial nephrectomy is close to becoming the standard. Adrenalectomy, one of the first and best indications for standard laparoscopy, is increasingly performed by means of robot-assisted surgery—including partial adrenalectomy and the transdiaphragmatic approach—and this session will show the advantages. Caval thrombus due to RCC is one of the few indications where open surgery remains indispensable; the technique will be presented.

All presentations have a maximum length of 8 minutes, followed by 4 minutes of discussion.

V01
Robotic nephroureterectomy without undocking or patient repositioning: Surgical technique
By: Hugues G., Pillot P., Delpech P.O., Bernard de S., Charles T., Celhay O.
Institutes: Poitiers University Hospital, Dept. of Urology, Poitiers, France

V02
Da Vinci Xi robot-assisted adrenalectomy for masses larger than 4 cm: Experience from a single high volume centre
By: Buffi N.¹, Lughezzani G.², Lista G.², Maffei D.², Pescechera R.², Benetti A.¹, Pasini L.¹, Zandegiacomo S.¹, Forni G.¹, Lazzeri M.¹, Casale P.¹, Saita A.¹, Hurle R.¹, Bozzini G.², Taverna G.³, Guazzoni G.⁴
Institutes: ¹Humanitas University, Dept. of Urology, Milan, Italy, ²Istituto clinico Humanitas, IRCCS, Dept. of Urology, Milan, Italy, ³Humanitas Mater Domini, Dept. of Urology, Castellanza, Italy, ⁴Istituto Clinico Humanitas, IRCCS, Humanitas University, Dept. of Urology, Castellanza, Italy

V03
Robot-assisted laparoscopic partial adrenalectomy for aldosterone-producing adenomas
By: Spahn M., Metzger T., Boxler S., Thalmann G.
Institutes: Inselspital - Universitätsklinik Bern, Dept. of Urology, Bern, Switzerland

V04
Robotic-assisted thoracoscopic transdiaphragmatic adrenalectomy (RATTA) for metastatic renal cell carcinoma
By: Russell C.¹, Salami S.¹, Lebastchi A.¹, Lagisetty K.², Hafez K.¹, Reddy R.¹, Weizer A.¹
Institutes: ¹University of Michigan, Dept. of Urology, Ann Arbor, United States of America, ²University of Michigan, Dept. of Surgery, Ann Arbor, United States of America

V05
A simplified approach of robotic partial nephrectomy
Institutes: CHU Rennes, Dept. of Urology, Rennes, France

V06
Clampless robot-assisted laparoscopic partial nephrectomy for large renal masses
By: Brassetti A.¹, Del Vecchio G.², Emiliozzi P.², Martini M.², Pansadoro A.², Scarpone P.², Pansadoro V.²
Institutes: ¹Sant’andrea Hospital, Dept. of Urology, Rome, Italy, ²Laparoscopic and Oncological Urology Centre, “Pio IX” Hospital, Fondazione Vincenzo Pansadoro, Dept. of Urology, Rome, Italy
Transmesocolic laparoscopic partial nephrectomy for RCC in a horseshoe kidney

By: Kochkin A.¹, Gallyamov E.², Martov A.³, Sevryukov F.¹, Knutov A.¹, Sergeev V.³, Novikov A.⁴

Institutes: ¹Urological Center of Russian Railways Hospital, Dept. of Urology, Nizhny Novgorod, Russia, ²Aleksandr Evdokimov Moscow State University of Medicine and Dentistry, Dept. of Urology, Moscow, Russia, ³Avetik Burnazian Federal Scientific Medical Biophysical Center FMBA, Dept. of Urology, Moscow, Russia, ⁴Medical Center of Bank of Russia, Dept. of Urology, Moscow, Russia
Treatment of advanced prostate cancer - if, when and what?
Poster Session 04

**Location:** Room Amsterdam, North Hall (Level 1)

**Chairs:**
- S. Bracarda, Arezzo (IT)
- P. Cornford, Liverpool (GB)
- A.S. Merseburger, Lübeck (DE)

**Aims and objectives of this session**
Data about new and established approaches for systemic treatment of prostate cancer and management of nodal disease will be presented. Differential indication of hormone ablation versus other forms of systemic treatments will be discussed together with long-term effects of androgen deprivation therapy.

Poster viewing of 20 minutes. Presentations will take place on stage. Standard presentations are 2 minutes in length, followed by 2 minutes for discussion.

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**Improved survival in patients diagnosed with metastatic prostate cancer – a nationwide analysis**
By: Helgstrand J.T.¹, Klemann N.¹, Toft B.², Vainer B.², Brooks J.³, Iversen P.¹, Røder M.¹

**Institutes:**
- Copenhagen University Hospital, Rigshospitalet, Copenhagen Prostate Cancer Center, Dept. of Urology, Copenhagen, Denmark,
- Copenhagen University Hospital, Rigshospitalet, Dept. of Pathology, Copenhagen, Denmark,
- Stanford University Hospital, Dept. of Urology, Stanford, United States of America

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**49**

**Testing the external validity of ProtecT trial results in North American men with clinically localized prostate cancer (PCa)**
By: Abdollah F.¹, Nocera L.¹, Sood A.¹, Dalela D.¹, Karabon P.¹, Rogers C.¹, Peabody J.¹, Briganti A.², Montorsi F.³, Menon M.¹

**Institutes:**
- Henry Ford Hospital / Health System, Dept. of Urology, Detroit, United States of America,
- IRCCS San Raffaele, Dept. of Urology, Milan, Italy

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**50**

**What is the optimal post-operative management of men with lymph node recurrent prostate cancer after salvage lymph node dissection? Results from a large, multi-institutional series**
By: Briganti A.¹, Fossati N.¹, Saadé N.¹, Bandini M.¹, Colicchia M.², Barnes J.R.³, Haidl F.³, Pfister D.³, Heidenreich A.³, Herlemann A.³, Gratzke C.³, Stief C.³, Battaglia A.³, Everaets W.⁴, Joniau S.⁴, Van Poppel H.⁴, Aksémov A.V.⁴, Osmonov D.K.⁵, Jünemann K.P.⁵, Abreu A.D.⁶, Almeida F.⁶, Fay C.⁶, Mottrie A.M.⁶, Montorsi F.¹

**Institutes:**
- Vita-Salute University San Raffaele, Dept. of Urology, Milan, Italy,
- University Hospitals Leuven, Dept. of Development and Regeneration, Leuven, Belgium,
- University of Southern California, USC Institute of Urology, Los Angeles, United States of America,
- University Hospitals Leuven, Dept. of Development and Regeneration, Leuven, Belgium,
- OLV Ziekenhuis Aalst, Dept. of Urology, Melle, Belgium,
- Mayo Clinic, Dept. of Urology, Rochester, United States of America,
- University of Cologne, Dept. of Urology, Cologne, Germany,
- University Hospital Schleswig Holstein, Dept. of Urology and Pediatric Urology, Campus Kiel, Germany,
- Ludwig-Maximilians-University, Dept. of Urology, Munich, Germany

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**Salvage lymph node dissection in nodal recurrent prostate cancer is not devoid of complications: Results from a single tertiary referral center**
By: Dell'Oglio P.¹, Gandaglia G.¹, Stabile A.¹, Fossati N.¹, Bianchi M.², Bravi C.³, Zaffuto E.³, Bandini M.¹, Fallara G.¹, Gallina A.¹, Saadé N.², Rigatti P.³, Montorsi F.¹, Briganti A.¹

**Institutes:**
- Vita-Salute University San Raffaele, Dept. of Urology, Milan, Italy,
- Magna Graecia University, Dept. of Urology, Catanzaro, Italy,
- Advanced Urotechnology Center, Scientific Institute “Istituto Auxologico Italiano”, Dept. of Urology, Milan, Italy
Phase III study of intermittent monotherapy versus continuous combined androgen deprivation
By: Calais Da Silva Junior F.1, Calais Da Silva Senior F.1, Gonçalves F.2, Kliment J.3, Santos A.4, Pastidis S.5, Queimadelos A.6, Robertson C.7
Institutes: 1CHLC - Hospital de São José, Dept. of Urology, Lisbon, Portugal, 2CUIMED A Saint Michal Hospital, Dept. of Urology, Bratislava, Slovakia, 3Jesenius School of Medicine, Dept. of Urology, Martin, Slovakia, 4Hospital De Braga, Dept. of Urology, Braga, Portugal, 5Amalia Fleming Hospital, Dept. of Urology, Athens, Greece, 6Policlinica La Rosaleda, Dept. of Urology, Santiago Compostela, Spain, 7University of Strathclyde, Dept. of Urology, Glasgow, United Kingdom

Chemical castration decreased the risk of dementia in patients with prostate cancer - from 13368 patients, Taiwan National Health Insurance Research Database
By: Hong J., Liao C., Huang C., Lu Y.
Institutes: National Taiwan University Hospital, Dept. of Urology, Taipei, Taiwan

Testosterone recovery after long time androgen deprivation therapy: The role of duration of deprivation in combination with other predictive factors
By: Estrada-Domínguez F.1, Borque Fernando A.1, Esteban L.2, Gil Sanz M.J.3, Sanz Saíz G.4
Institutes: 1Hospital Universitario Miguel Servet, Dept. of Urology, Zaragoza, Spain, 2Hospital Universitario "Miguel Servet" (IIS Aragón), Dept. of Urology, Zaragoza, Spain, 3Universidad De Zaragoza, Escuela Universitaria Politécnica De La Almunia, Zaragoza, Spain, 4Hospital Universitario Miguel Servet, Dept. of Urology, Zaragoza, Spain, 5Universidad De Zaragoza, Dept. of Statistical Methods, Zaragoza, Spain

Survival following primary androgen deprivation therapy or watchful waiting among older men with localized prostate cancer
By: Seikkula H.1, Boström P.2, Rantanen M.3, Pitkäniemi J.3, Malila N.3, Kaipia A.4
Institutes: 1Central Hospital of Central Ostrobothnia, Dept. of Urology, Kokkola, Finland, 2Turku University Hospital, Dept. of Urology, Turku, Finland, 3Finnish Cancer Registry, Institute For Statistical and Epidemiological Cancer Research, Helsinki, Finland, 4Satakunta Hospital District, Dept. of Urology, Pori, Finland

Does prostate cancer represent the main cause of death in all node positive prostate cancer patients? The impact of competing causes of mortality according to tumor characteristics and recurrence status
By: Dell’Oglio P.1, Zaffuto E.1, Stabile A.1, Gandaglia G.1, Colichchia M.2, Fossati N.1, Capitanio U.1, Dehò F.1, Colombo R.1, Bertini R.1, Montorsì F.1, Karnes J.2, Briganti A.1
Institutes: 1Vita-Salute University San Raffaele, Dept. of Urology, Milan, Italy, 2Mayo Clinic, Dept. of Urology, Rochester, United States of America

Radium-223 (Ra-223) in sequence or in concurrent use with abiraterone acetate (AA) or enzalutamide (E) in metastatic castration resistant prostate cancer (mCRPC) patients treated in an international early access program (iEAP)
By: Saad F.1, Heinrich D.2, Gillessen S.3, O’Sullivan J.4, Carles J.5, Wirth M.6, Miller K.7, Huang L.8, Seger M.9, Nilsson S.10, Heidenreich A.11
Institutes: 1University of Montreal Hospital Center, Dept. of GU Oncology, Montréal, Canada, 2Akershus University Hospital, Dept. of Oncology, Lørenskog, Norway, 3Kantonsspital St Gallen, Dept. of Oncology, St Gallen, Switzerland, 4The Northern Ireland Cancer Centre, Dept. of Radiation Oncology, Belfast, United Kingdom, 5Vall D’ Hebron University Hospital, Dept. of Medical Oncology, Barcelona, Spain, 6University Hospital Carl-Gustav Carus, Dept. of Urology, Dresden, Germany, 7Charité University Medicine Berlin, Dept. of Urology, Berlin, Germany, 8Pharmaceutical Division of Bayer, Dept. of Statistics, Whippney, United States of America, 9Pharmaceutical Division of Bayer, Dept. of Global Medical Affairs, Whippney, United States of America, 10Karolinska University Hospital, Dept. of Oncology, Stockholm, Sweden, 11University Hospital Cologne, Dept. of Urology, Cologne, Germany

The importance of imaging studies to monitor treatment with novel AR-targeted agents in metastatic castration resistant prostate cancer (mCRPC)
59

Does nadir testosterone at the end of long term androgen deprivation therapy predict outcomes in high risk prostate cancer? Data from a phase III trial

By: Nabid A.\textsuperscript{1}, Garant M-P.\textsuperscript{2}, Martin A-G.\textsuperscript{3}, Souhami L.\textsuperscript{4}, Duclos M.\textsuperscript{4}, Bahary J-P.\textsuperscript{5}, Lemaire C.\textsuperscript{6}, Vass S.\textsuperscript{7}, Archambault R.\textsuperscript{8}, Vincent F.\textsuperscript{9}, Bahoric B.\textsuperscript{10}

Institutes: Centre Hospitalier Universitaire de Sherbrooke, Dept. of Radio-Oncology, Sherbrooke, Canada, \textsuperscript{2}Centre Hospitalier Universitaire de Sherbrooke, Biostatistical Services, Sherbrooke, Canada, \textsuperscript{3}Centre Hospitalier Universitaire de Québec, Dept. of Radio-Oncology, Québec, Canada, \textsuperscript{4}Centre Universitaire de Santé McGill, Dept. of Radio-Oncology, Montréal, Canada, \textsuperscript{5}Hôpital Maisonneuve-Rosemont, Dept. of Radio-Oncology, Montréal, Canada, \textsuperscript{6}Centre de Santé et Services Sociaux de Chicoutimi, Dept. of Radio-Oncology, Chicoutimi, Canada, \textsuperscript{7}Hôpital De Gatineau, Dept. of Radio-Oncology, Gatineau, Canada, \textsuperscript{8}Centre Hospitalier Régional de Trois-Rivières, Dept. of Radio-Oncology, Trois-Rivières, Canada, \textsuperscript{9}Centre Hospitalier Régional de Rimouski, Dept. of Radio-Oncology, Rimouski, Canada, \textsuperscript{10}Hôtel Général Juif de Montréal, Dept. of Radio-Oncology, Montréal, Canada

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Semi-ecologic, nationwide, population-based study of GnRH agonists, orchiectomy and risk of cardiovascular disease

By: Stattin P.\textsuperscript{1}, Thomsen F.B.\textsuperscript{2}, Sandin F.\textsuperscript{3}, Garmo H.\textsuperscript{4}, Ahlgren G.\textsuperscript{5}, Lissbrant I.F.\textsuperscript{6}, Van Hemelrijck M.\textsuperscript{4}, Adolfsson J.\textsuperscript{7}, Robinson D.\textsuperscript{8}

Institutes: \textsuperscript{1}Uppsala University Hospital, Dept. of Surgical Sciences, Uppsala, Sweden, \textsuperscript{2}Rigshospitalet, University of Copenhagen, Copenhagen Prostate Cancer Center, Dept. of Urology, Copenhagen, Denmark, \textsuperscript{3}Uppsala University Hospital, Regional Cancer Centre Uppsala Örebro, Uppsala, Sweden, \textsuperscript{4}King’s College London, School of Medicine, Dept. of Cancer Studies, Cancer Epidemiology Group, London, United Kingdom, \textsuperscript{5}SUS Malmö, Dept. of Urology, Malmö, Sweden, \textsuperscript{6}University of Gothenburg, Dept. of Oncology, Gothenburg, Sweden, \textsuperscript{7}Karolinska Institutet, CLINTEC-Dept, Stockholm, Sweden, \textsuperscript{8}Umeå University Hospital, Dept. of Surgical and Perioperative Sciences, Umeå, Sweden

12:00 - 12:10

Advanced prostate cancer - A wide range of treatment options and challenges

A.S. Merseburger, Lübeck (DE)
New technologies in minimally invasive techniques and new imaging techniques
Poster Session 05

Location: Room Berlin, North Hall (Level 1)

Chairs: T. Ahlering, Orange (US)
H. Fukushima, Tokyo (JP)
F. Greco, Crotone (IT)

Aims and objectives of this session
To assess the horizon for new technologies for minimally invasive treatments and intraoperative imaging

Poster viewing of 20 minutes. Presentations will take place on stage. Standard presentations are 2 minutes in length, followed by 2 minutes for discussion.

61 Prognostic value of vibrational infrared micro-imaging spectroscopy in renal clear cell adenocarcinoma with a metastasis predictive algorithm in a big data spectral model
By: El-Bakri A.1, Vuiblet V.1, Nguyen Q.1, Eymard J-C.3, Larré S.2, Piot O.1
Institutes: Médian Biophotonique Et Technologies Pour La Santé, Université De Reims Champagne-Ardenne, Urca Umr Cnrs 7369 Medyc, Reims, France, Robert Debré Teaching Hospital, Dept. of Urology, Reims, France, Institut Jean Godinot, Dept. of Oncology, Reims, France

62 Initial assessment of clinical feasibility, safety and efficacy of NanoKnife irreversible electroproporation (IRE) in the focal treatment of localized renal cell carcinoma (RCC) with delayed interval tumor resection (IRENE trial)
Institutes: University Magdeburg, Dept. of Urology, Magdeburg, Germany, University Magdeburg, Dept. of Radiology, Magdeburg, Germany, University Magdeburg, Dept. of Pathology, Magdeburg, Germany, Sana Medical Center, Dept. of Pathology, Offenbach, Germany

63 Novel three-dimensional bone ‘mapping’ software can help assess progression of osseous prostate cancer metastases from routine CT
By: Thurtle D.1, Treece G.2, Barrett T.3, Gnanapragasam V.1
Institutes: University of Cambridge, Dept. of Urology, Cambridge, United Kingdom, University of Cambridge, Dept. of Engineering, Cambridge, United Kingdom, University of Cambridge, Dept. of Radiology, Cambridge, United Kingdom

64 Percutaneous unroofing-less invasive approach for renal cyst management
By: Hu J., Yu X., Wang S., Ye Z.
Institutes: Tongji Hospital, Tongji Medical College, Huazhong University Of Science And Technology, Dept. of Urology, Wuhan, China

65 Transurethral en bloc resection of bladder tumor with a dual channelized flexible cystoscope using an Impact Shooter: Preliminary results in human cadavers embalmed by Thiel’s model
By: Morizane S.1, Maeda T.2, Nishikawa R.1, Honda M.1, Ikebuchi Y.3, Matsumoto K.3, Ueki M.4, Masumori N.2, Fujimiya M.5, Takenaka A.1
Institutes: Tottori University, Faculty of Medicine, Dept. of Urology, Yonago, Japan, Sapporo Medical University School of Medicine, Dept. of Urology, Sapporo, Japan, Tottori University, Faculty of Medicine, Dept. of Gastroenterology, Yonago, Japan, Tottori University Hospital, Center for Promoting Next-Generation Highly Advanced Medicine, Yonago, Japan, Sapporo Medical University School of Medicine, Dept. of Anatomy, Sapporo, Japan
3D prostate MRI reconstruction for cognitive robot assisted radical prostatectomy: Is it able to reduce the positive surgical margin rate?
By: Porpiglia F., Manfredi M., Checcucci E., Mele F., Bertolo R., De Luca S., Garrou D., Cattaneo G., Amparore D., Fiori C.
Institutes: San Luigi Hospital, Dept. of Urology, Turin, Italy

Evaluation of ex-vivo and in-vivo biomarkers in different stages of prostatic cancer
By: Theil G., Schietinger C., Kersten K., Schumann A., Fornara P.
Institutes: Clinic of Urology and Kidney Transplantation Center, Dept. of Martin-Luther University, Halle/Saale, Germany

Hypothermic nerve-sparing radical prostatectomy facilitates earlier recovery of potency at one year
By: Ko Y-H., Skarecky D., Huynh L., Ahlering T.
Institutes: University of California, Irvine, Dept. of Urology, Orange, United States of America

Novel ex vivo endoscopic near infrared fluorescence imaging method using pHLIP®/ICG in patients undergoing radical cystectomy for urothelial carcinoma of the bladder
By: Brito J., Golijanin B., Tran T., Moshnikova A., Gershanin B., Engelman D., Reshetnyak Y., Andreev O., Amin A., Golijanin D.
Institutes: Rhode Island Hospital and The Miriam Hospital, Dept. of Urology, Providence, United States of America, University of Rhode Island, Dept. of Physics, Kingston, United States of America, Yale University, Molecular Biophysics and Biochemistry, New Haven, United States of America, Rhode Island Hospital and The Miriam Hospital, Dept. of Pathology, Providence, United States of America

Application of the radio-guided occult lesion localization (ROLL) technique for renal lumpectomy (RE-ROLL): From the laboratory to the patient
Institutes: La Fe, University and Polytechnic Hospital, Dept. of Urology, Valencia, Spain, La Fe, University and Polytechnic Hospital, Dept. of Nuclear Medicine, Valencia, Spain

Mini-laparoendoscopic single-site partial nephrectomy with early unclamped technique for renal tumors with intermediate PADUA score (IDEAL phase 2a)
By: Greco F., Alba S., Bottone F., Mohammed N., Kawan F., Mirone V., Fornara P.
Institutes: Martin-Luther University, Dept. of Urology, Halle Saale, Germany, Romolo Hospital, Dept. of Urology, Rocca Di Neto, Italy, Federico II University, Dept. of Urology, Naples, Italy

Thulium laser vapo-enucleation of the prostate according to the mushroom technique: Preliminary results
By: Kara N., Codas Duarte R., Fassy Fehri H.
Institutes: Hôpital Édouard-Herriot, Dept. of Urology, Lyon, France

Utility of diffusion-weighted magnetic resonance imaging of testes in azoospermia: Correlation between apparent diffusion coefficient and histological patterns of spermatogenesis
By: Han B.H., Park S.B., Choe J.H., Seo J.T., Chun Y.K.
Institutes: Cheil General Hospital, Dankook University College Of Medicine, Dept. of Radiology, Seoul, South Korea, Chung-Ang University College of Medicine, Dept. of Radiology, Seoul, South Korea
Korea, 3Cheil General Hospital, Dankook University College Of Medicine, Dept. of Urology, Seoul, South Korea, 4Cheil General Hospital, Dankook University College of Medicine, Dept. of Urology, Seoul, South Korea, 5Cheil General Hospital, Dankook University College of Medicine, Dept. of Pathology, Seoul, South Korea
EAU Patient Information Project: Setting standards in cooperation and care

Special session

**Location:** Room 1, Capital suite (level 3)

**Chair:** T. Bach, Hamburg (DE)

**Aims and objectives of this session**

**Aim:**
- To promote knowledge about the project to a wide audience
- To highlight the cooperative character and worldwide expansion
- To encourage usage of EAU patient information by patients and doctors
- To disseminate the information of our guidelines to our patients through the doctors and patient groups

**Target group:**
Urologists, patient groups, national societies and nurses.

12:15 - 12:20
**Welcome and introduction**
T. Bach, Hamburg (DE)

12:20 - 12:30
**The society's perspective – What can EAU Patient Information do for you, why do we need to translate GL for patients?**
C.R. Chapple, Sheffield (GB)

12:30 - 12:40
**The resident's/doctor's perspective: How I use EAU Patient Information to get my patients informed**
G. Patruno, Rome (IT)

12:40 - 12:50
**The patients' perspective: What a patient fears and needs**
A. Winterbottom, Chinnor (GB)

12:50 - 13:00
**The nurse's perspective: Things patients do not ask or do not dare to ask their doctors**
C.N. Tillier, Amsterdam (NL)

13:00 - 13:10
**The international view: Why is it important to have patient information in the native language**
C. Llorente, Madrid (ES)

13:10 - 13:20
**The future of EAU patient information in daily practice: Demonstration of “The Patient Information App”**
T. Bach, Hamburg (DE)

13:20 - 13:25
**Discussion**

13:25 - 13:30
**Conclusion**
T. Bach, Hamburg (DE)
Infectious challenges of urology

Poster Session 06

Location: Room Milan, North Hall (Level 1)

Chairs: R. Bartoletti, Pisa (IT)
        B. Köves, Budapest (HU)
        P. Tenke, Budapest (HU)

Aims and objectives of this session
This session presents the latest information for the care of your patients.

Poster viewing of 20 minutes. Presentations will take place on stage. Standard presentations are 2 minutes in length, followed by 2 minutes for discussion.

75 Morbidity and mortality outcomes in urosepsis compared according to new sepsis definitions: A prospective multinational observational study – systemic inflammatory response syndrome protects its value
By: Tandoğdu Z.¹, Koves B.², Cai T.³, Platz A.⁴, Wagenlehner F.⁴, Bjerklund Johansen T.E.⁵
Institutes: Oslo University, Institute of Clinical Medicine, Oslo, Norway, ²South Pest Teaching Hospital, Dept. of Urology, Budapest, Hungary, ³Santa Chiara Hospital, Dept. of Urology, Trento, Italy, ⁴Universitätsklinikum Gießen und Marburg GmbH, Pediatric Urology and Andrology, Giessen, Germany, ⁵Oslo University, Dept. of Urology and Institute of Clinical Medicine, Oslo, Norway

76 Risk factors for mortality in patients with urosepsis
By: Fukunaga A., Kawakita M.
Institutes: Kobe City Medical Center General Hospital, Dept. of Urology, Kobe, Japan

77 The comparison of MDR and ESBL patterns among causative pathogens of UTI in hospitalized patients in two different ICUs in Loghman Hospital
By: Pooya M.¹, Saleh M.¹, Mir-Marashi F.¹, Bouzari S.¹, Mardani M.²
Institutes: Pasteur Institute of Iran, Dept. of Molecular Biology, Tehran, Iran, ²Shahid Beheshti University of Medical Sciences, Loghman Hakim Hospital, Tehran, Iran

78 A novel predictive tool for Asian Fournier's gangrene: 40 cases and 15-year-experience of a tertiary center
By: Lin Y.-H.¹, Lu Y.-C.², Hong J.-H.², Liao C.-H.¹, Huang K.-H.², Huang C.-Y.², Liu S.-P.², Pu Y.-S.²
Institutes: ¹Cardinal Tien Hospital, Division of Urology, Dept. of Surgery, New Taipei City, Taiwan, ²National Taiwan University Hospital, Dept. of Urology, Taipei, Taiwan

79 Identification of distant subcutaneous spreading of Fournier's gangrene by intraoperative ultrasound
By: Cantoro D.¹, Galosi A.B.¹, Maselli G.¹, Sbrollini G.¹, Fulvi P.¹, Dell'Atti L.²
Institutes: ¹Università Politecnica Delle Marche - Ospedali Riuniti di Ancona, Dept. of Urology, Ancona, Italy, ²Ospedale S. Anna, Dept. of Urology, Ferrara, Italy

80 Five-year prospective study evaluating healthcare-associated infections (HAIs) in a urology ward: Risk factors, microbiological characteristics and resistance patterns
Institutes: Hospital Universitario 12 de Octubre, Dept. of Urology, Madrid, Spain

81 Quick SOFA score might be inadequate as initial sepsis screening system in UTI patients
Institutes: Yamagata University, School of Medicine, Dept. of Urology, Yamagata City, Japan

Detecting bacterial resistance in urine at the point of care via a custom tailored LAMP panel
By: Fritzenwanker M., Imirzalioglu C., Wagenlehner F., Chakraborty T., Schwengers O., Blom J.
Institutes: Justus-Liebig-Universität, Institut Für Medizinische Mikrobiologie, Giessen, Germany

Establishment of a 3D organotypic urothelial cell culture model as infection model system for BK polyomavirus – viral lifecycle and identification of new therapeutic targets
By: Schneidewind L., Knerr-Rupp K., Feld P., Janssen M., Keiser M., Smola S.
Institutes: University of The Saarland Medical Center, University of The Saarland, Dept. of Virology, Homburg, Germany, University of The Saarland Medical Center, University of The Saarland, Dept. of Urology and Paediatric Urology, Homburg, Germany, University Medicine Greifswald, Dept. of Pharmacology, Greifswald, Germany

Antimicrobial resistance patterns and risk factors for ciprofloxacin in Enterococcus faecalis isolates from expressed prostatic secretions of patients with chronic bacterial prostatitis
By: Lee G., Seo Y., Song J.
Institutes: Dankook University Medical College, Dept. of Urology, Cheonan, South Korea, Yonsei University Wonju College of Medicine, Dept. of Urology, Wonju, South Korea

Withdrawn
By:
Institutes:

Prostatic secretion microbiota and chronic bacterial prostatitis symptoms or signs: Is there a connection?
By: Kogan M.I., Naboka J., Gudima I., Ibishev H.
Institutes: Rostov State Medical University, Dept. of Urology, Rostov-on-Don, Russia, Rostov State Medical University, Dept. of Microbiology, Rostov-on-Don, Russia

Does micropattern (sharklet) on urinary catheter surface reduce urinary tract infections? Results from phase I randomized open label interventional trial
Institutes: Jahn Ferenc Dél-pesti Kórház, Dept. of Urology, Budapest, Hungary, Corden International, Dept. of Microbiology, Budapest, Hungary, University of Technology and Economics, BME, Budapest, Hungary

How to overcome gram-positive bacterial identification in matrix-assisted laser desorption/ionization time-of-flight mass spectrometry for complicated urinary tract infection-causative bacteria?
By: Shigemura K., Kitagawa K., Yamamichi F., Nakano Y., Tokimatsu I., Fujisawa M.
Institutes: Kobe University Graduate School of Medicine, Dept. of Urology, Kobe, Japan, Kobe University Graduate School of Medicine, Dept. of Internal Related, Kobe, Japan, Hyogo Prefectural Amagasaki General Medical Center, Dept. of Urology, Amagasaki, Japan, Kobe University Hospital, Infection Control Team, Kobe, Japan

The adherence to European Association of Urology guidelines on urological infection in a tertiary referral hospital is the right way for increasing the antimicrobial stewardship among general practitioners
Institutes: Santa Chiara Hospital, Dept. of Urology, Trento, Italy, Santa Maria Annunziata Hospital,
Sexually Transmitted Disease Centre, Florence, Italy, University of Naples, Federico II, Dept. of Urology, Naples, Italy, Santa Chiara Hospital, Dept. of Gynaecology and Obstetrics, Trento, Italy, Santa Chiara Hospital, Department of Microbiology, Trento, Italy, University of Pisa, Dept. of Urology, Pisa, Italy, Universitätsklinikum Giessen und Marburg GmbH, Justus-Liebig-Universität, Klinik und Poliklinik für Urologie, Kinderurologie und Andrologie, Giessen, Germany, University of Oslo, Dept. of Urology, Oslo, Norway
Challenging retroperitoneal surgery

Video Session 02

Friday, 24 March
12:30 - 14:00

Location: Room Paris, North Hall (Level 1)
Chairs: C.-C. Abbou, Vincennes (FR)
M.C. Ferriero, Rome (IT)
R.J.A. Van Moorselaar, Amsterdam (NL)

Aims and objectives of this session
This session offers video presentations of challenging cases involving retroperitoneal surgery.

All presentations have a maximum length of 8 minutes, followed by 4 minutes of discussion.

V09 First laparoscopic kidney transplantation in Turkey
By: Özden E., Yakupoglu Y.K., Oner S., Dilek M., Bostanci Y., Sarikaya S.
Institutes: Ondokuz Mayis University, Dept. of Urology, Samsun, Turkey, Ondokuz Mayis University, Dept. of Nephrology, Samsun, Turkey

V10 Laparoscopic radical left nephrectomy with inferior vena cava thrombectomy: Step-by-step
By: Bogomolov O., Shkolnik M., Belov A., Rutkin I., Andabekov T., Sidorova S.
Institutes: FSBI Russian Research Centre For Radiology and Surgical Technologies, Dept. of Urology, Saint-Petersburg, Russia, FSBI Russian Research Centre For Radiology and Surgical Technologies, Dept. of Surgery, Saint-Petersburg, Russia

V11 Ex vivo repair and autotransplantation for complex renal artery aneurysms
By: Bouye S., Rizk J., Azzaoui R., Flamand V.
Institutes: Lille University Hospital, Dept. of Urology, Lille, France, Lille University Hospital, Dept. of Vascular Surgery, Lille, France

V12 Robotic assisted kidney auto-transplantation in a porcine skill training model
By: Tiong H.-Y., Goh B., Tan L., Chiong E., Vathsala A.
Institutes: National University Hospital, Dept. of Urology, Singapore, Singapore, National University Hospital, National Center For Organ Transplantation, Singapore, Singapore

V13 New surgical technique of renal artery control during nephrectomy with tumor thrombus removal
By: Lesovoy V., Shchukin D., Garagaty I., Polyakov M., Khareba G.
Institutes: Kharkiv National Medical University, Dept. of Urology, Nephrology and Andrology, Kharkiv, Ukraine

V14 Laparoscopic inter-aorto-caval lymph-node dissection for RCC
By: Bass R., Sidi A., Tsivian A.
Institutes: Wolfson M. C., Dept. of Urologic Surgery, Holon, Israel

V15 Robotic en-bloc radical nephrectomy and retro-caval lymphadenectomy
By: Percot M., Allenet C., Michiels C., Deslandes M., Queruel V., Capon G., Pasticier G., Bensadoun H., Ferriere J.-M., Bernhard J.-C.
Institutes: University Hospital Center, Dept. of Urology, Bordeaux, France

V16 Post-chemotherapy retroperitoneal lymph node dissection (PC-RPLND) nerve sparing left side
By: Lusch A., Albers P.
Institutes: Düsseldorf University, Dept. of Urology, Düsseldorf, Germany
Epigenetics and novel signaling pathways in prostate carcinogenesis

Poster Session 07

Location: Room Amsterdam, North Hall (Level 1)

Chairs: C.P. Evans, Sacramento (US)
        G. Jenster, Rotterdam (NL)
        S. Perner, Luebeck (DE)

Aims and objectives of this session

Invasion and metastasis in prostate cancer are regulated by different signaling molecules. In this session, the pathway of Wnt/beta-catenin and its interaction with other signaling cascades in prostate tumorigenesis and progression will be highlighted. In addition, novel findings about regulation of the key transcription factor ERG will be presented.

Poster viewing of 20 minutes. Presentations will take place on stage. Standard presentations are 2 minutes in length, followed by 2 minutes for discussion. Extended presentations (*) are 3 minutes in length, followed by 3 minutes for discussion.

90 The prostate cancer-bone environment causes upregulation of the pentose phosphate pathway
By: Whitburn J.¹, Rao S.², Tabata S.³, Hirayama A.⁴, Soga T.⁵, Hamdy F.¹, Edwards C.¹
Institutes: ¹University of Oxford, Nuffield Dept. of Surgical Sciences, Oxford, United Kingdom, ²Keio University, Institute for Advanced Biosciences, Tsuruoka, Japan

91 A novel epigenetic crosstalk between ERG and EZH2 leads to prostate cancer progression
By: Zoma M.¹, Curti L.¹, Shinde D.³, Mitra A.¹, Albino D.¹, Rossi S.¹, Civenni G.¹, Losa M.¹, Thalmann G.², Chiorino G.³, Catapano C.V.¹, Carbone G.M.¹
Institutes: ¹IOR Institute of Oncology Research, Tumor Biology and Experimental Therapeutic, Bellinzona, Switzerland, ²University of Bern, Inselspital, Dept. of Urology, Bern, Switzerland, ³Fondo Edo Tempia, Laboratory of Cancer Genomics, Biella, Italy

92 Stage-specific embryonal antigen 4 expressing human prostate stem cells have enhanced regenerative potential in vivo
By: Höfner T.¹, Klein C.², Eisen C.², Rigo-Watermeier T.², Haferkamp A.¹, Sprič M.²
Institutes: ¹University Hospital Mainz, Dept. of Urology, Mainz, Germany, ²Heidelberg Institute for Stem Cell Technology and Experimental Medicine, HI-STEM GGmbH, Heidelberg, Germany

93 Cell surface GRP78 activation by anti-GRP78 autoantibodies confers prostate tumour growth via tissue factor activation
By: Al-Hashimi A., Hoogenes J., Shayegan B., Austin R.
Institutes: McMaster University, Dept. of Medicine, Hamilton, Canada

94 MALT1 is a downstream gene of WNT/β-catenin inducing cell proliferation and invasion potential via the upregulation of NFκB activity in human prostate carcinoma cells
By: Juang H.-H.¹, Tsui K.-H.²
Institutes: ¹Chang Gung University, Dept. of Anatomy, Tao-yuan, Kwei-shan, Taiwan, ²Chang Gung Memorial Hospital, Dept. of Urology, Tao-yuan, Kwei-shan, Taiwan

95 SE-cadherin stimulates integrin-mediated chemotaxis in prostate cancer
By: Tsaur I.¹, Maxeiner S.², Rutz J.², Thomas C.¹, Jüngel E.¹, Haferkamp A.¹, Blaheta R.A.²
Institutes: ¹University Medicine Mainz, Dept. of Urology and Pediatric Urology, Mainz, Germany, ²University Hospital Frankfurt, Dept. of Urology and Pediatric Urology, Frankfurt, Germany

*96 Compartmentalized δ-catenin driven by genomic rearrangement in prostate cancer dictates
Expression of checkpoint receptors in tumor-infiltrated T-cells of renal cell and prostate carcinomas

By: Bedke J.¹, Zelha H.², Hennenlotter J.¹, Zettl M.³, Rammensee H-G.², Stenzl A.¹, Gouttefangeas C.²

Institutes: University of Tübingen, Dept. of Urology, Tübingen, Germany, ²University of Tübingen, Dept. of Immunology, Tübingen, Germany, ³Boehringer Ingelheim RCV GmgH & CoKG, NBE Discovery, Vienna, Austria

Evaluation of systematic alterations in the proteome by androgen receptor stimulation and blockade in prostate cancer

By: Molokwu C.¹, Kristensen A.², Zhang F.³, Saxena N.³, Shresta R.⁴, Bell R.⁴, Hach F.⁴, Collins C.⁵, Sorensen P.⁶, Gleave M.⁸

Institutes: ¹Bradford Royal Infirmary, Dept. of Urology, Bradford, United Kingdom, ²British Columbia Cancer Research Centre, Proteomics Unit, Vancouver, Canada, ³Vancouver Prostate Centre, Tumour Biology Group, Vancouver, Canada, ⁴Vancouver Prostate Centre, Bioinformatics Group, Vancouver, Canada, ⁵University of British Columbia, Dept. of Urological Sciences, Vancouver, Canada, ⁶University of British Columbia, Dept. of Pathology & Laboratory Medicine, Vancouver, Canada

Description of the dimerization surface for the ligand-binding domain of the androgen receptor and its role in transcriptional control by agonists and antagonists

By: Claessens F.¹, Nadal M.², Prekovic S.¹, Gallastegui N.³, Helsen C.¹, Abella M.², Zielinska K.², Gay M.³, Vilaseca M.³, Taules M.³, Houthsmuller A.³, Van Royen M.³, Fuentes-Prior P.², Estebanez-Perpina E.²

Institutes: ¹KU Leuven, Molecular Endocrinology Laboratory, Leuven, Belgium, ²Institute of Biomedicine of The University of Barcelona, Dept. of Biochemistry and Molecular Biomedicine, Barcelona, Spain, ³Parc Cientific De Barcelona, Mass Spectrometry Core Facility, Barcelona, Spain, ⁴Centres Científics I Tecnologics, Unitat De Citometra, Barcelona, Spain, ⁵Erasmus MC, Dept. of Pathology, Rotterdam, The Netherlands

Bone morphogenetic protein-6 and retinoblastoma expression: An inverse relationship in prostate cancer progression?

By: McCormick K.¹, Leiblich A.¹, Stevens D.¹, Alves C.¹, Fan S-J.¹, Carr K.¹, Morris J.¹, Harris A.², Wilson C.¹, Hamdy F.³, Goberdhan D.¹

Institutes: ¹University of Oxford, Dept. of Physiology, Anatomy and Genetics, Oxford, United Kingdom, ²University of Oxford, The Weatherall Institute of Molecular Medicine, John Radcliffe Hospital, Oxford, United Kingdom, ³University of Oxford, Nuffield Department of Surgical Sciences, John Radcliffe Hospital, Oxford, United Kingdom

Expression of stromal elements of prostatic adenocarcinoma in different Gleason grades

By: Osorio C., Gallo C., Costa W., Sampaio F.

Institutes: State University of Rio de Janeiro, Urogenital Research Unit, Rio de Janeiro, Brazil

Induction of neuroendocrine differentiation in prostate cancer cells by Dovitinib (TKI-258) and associated therapeutic implications


Institutes: Icahn School of Medicine at Mount Sinai, Dept. of Urology, New York, United States of America
13:49 - 13:56

Epigenetics in prostate cancer
G. Jenster, Rotterdam (NL)
How do LUTS function and grow?

**Poster Session 08**

**Location:** Room Berlin, North Hall (Level 1)

**Chairs:**
- C. Gratzke, Munich (DE)
- R. Hamid, London (GB)
- D.K. Kim, Seoul (KR)

**Aims and objectives of this session**
This session discusses the basic insights into LUT functioning.

Poster viewing of 20 minutes. Presentations will take place on stage. Standard presentations are 2 minutes in length, followed by 2 minutes for discussion.

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**Depletion of peripheral serotonin synthesis induces benign prostatic growth in mice: More evidence for the new neuroendocrine theory in BPH etiology**

*By:* Mota P.M., Carvalho-Dias E., Miranda A., Martinho O., Nogueira-Silva C., Alenina N., Bader M., Autorino R., Lima E., Correa-Pinto J.

*Institutes:* Surgical Sciences Research Domain, Life and Health Sciences Research Institute, ICVS/3B’s - PT Gover, Dept. of CUF Urology and Service of Urology - Hospital of Braga, Braga, Portugal; Life and Health Sciences Research Institute, ICVS/3B’s - PT Government Associate Laboratory, The Oli, Surgical Sciences Research Domain, Braga, Portugal; Surgical Sciences Research Domain, Life and Health Sciences Research Institute, ICVS/3B’s - PT Gover, Dept. of Obstetrics and Gynecology, Braga, Portugal; Max Delbrück Center For Molecular Medicine, Robert-Rössle-Str. 10, Berlin 13125, Germany; Berlin Institute of Health, Berlin, Germany; Surgical Sciences Research Domain, Life and Health Sciences Research Institute, ICVS/3B’s - PT Gover, Dept. of Pediatric Surgery - Hospital of Braga, Braga, Portugal

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**Impacts of apolipoprotein A-1 and alpha-fetoprotein on the development of benign prostatic hyperplasia and lower urinary tract symptoms: Results from a high-volume health check-up database**


*Institutes:* Gangnam Severance Hospital, Yonsei University Health System, Dept. of Urology, Seoul, South Korea

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**Impairment of autophagy is associated with obesity and inflammation in patients with benign prostatic hyperplasia and lower urinary tract symptoms**

*By:* De Nunzio C., Giglio S., Cirombella R., Mallel G., Nacchia A., Lombardo R., Presicce F., Tubaro A., Vecchione A.

*Institutes:* Sant’ Andrea Hospital - Sapienza University, Dept. of Urology, Rome, Italy; Sant’ Andrea Hospital - Sapienza University, Dept. of Molecular Pathology, Rome, Italy

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**Myogenic tone is significantly increased in benign prostatic hyperplasia and can be attenuated by sildenafil and tamsulosin, with outcome associated to patient age and prostate volume**


*Institutes:* Monash University, Dept. of Anatomy and Developmental Biology, Clayton, Australia; Monash University, Drug Discovery Biology, Parkville, Australia; TissuePath, Dept. of Pathology, Melbourne, Australia; Monash University, Dept. of Surgery, Melbourne, Australia; Monash University, Dept. of Surgery, Melbourne, Australia; Justus-Liebig-University, Institute of Anatomy and Cell Biology, Giessen, Germany; Monash University, Dept. of Drug Discovery Biology, Parkville, Australia
Detection of Rac activity and inhibition of smooth muscle contraction by EHT1864 in the human trigone: Expanding the role of Rac GTPase in the lower urinary tract outflow region
By: Wang Y., Gratzecke C., Rut B., Yu Q., Strittmatter F., Herlemann A., Rut B., Stief C., Hennenberg M.
Institutes: LMU Munich, Dept. of Urology, Munich, Germany

Inhibition of prostate smooth muscle contraction by the LIM kinase inhibitor, SR-7826: A new anticontractile strategy and implications for a role of LIM kinases in the control of prostate smooth muscle tone
By: Yu Q., Gratzecke C., Wang Y., Rut B., Herlemann A., Strittmatter F., Stief C., Hennenberg M.
Institutes: LMU-Klinikum der Universität München, Dept. of Urology, Munich, Germany

The anticontractile inhibitor, secinH3 inhibits ARF6, but not Rac or RhoA GTPase activities in the human prostate: A new role for ARF6 in smooth muscle contraction?
Institutes: LMU Munich, Dept. of Urology, Munich, Germany

The oxidants/antioxidants balance in patients with benign prostatic hyperplasia before and after the treatment with dutasteride
By: Ene C.V.¹, Nicolae I.², Ene C.D.³, Geavlete B.⁴, Geavlete P.⁴, Georgescu S.⁴
Institutes: St John Hospital Bucharest, Dept. of Urology, Bucharest, Romania, ²Clinical Hospital of Tropical and Infectious Diseases “Victor Babes”, Dept. of Research, Bucharest, Romania, ³Clinical Hospital of Nephrology “Cora Davila”, Dept. of Nephrology, Bucharest, Romania, ⁴Clinical Hospital of Tropical and Infectious Diseases “Victor Babes”, Dept. of Dermato-Venerology, Bucharest, Romania

Restraint stress induces nocturia in mice
By: Ihara T., Mitsui T., Nakamura Y., Imai Y., Kira S., Nakagomi H., Sawada N., Nakao A., Takeda M.
Institutes: University of Yamanashi, Dept. of Urology, Yamanashi, Japan, ²University of Yamanashi, Dept. of Immunology, Yamanashi, Japan

The vitamin D analogue BXL-628 improves contraction development ex vivo in bladders of aged mice
By: Hohnen R.¹, Rademakers K.², Den Hartog G.², Meriaux C.¹, Van Koeveringe G.²
Institutes: ¹Maastricht University, Dept. of Neuroscience, Maastricht, The Netherlands, ²Maastricht University Medical Center, Dept. of Urology, Maastricht, The Netherlands, ³Maastricht University, Dept. of Pharmacology and Toxicology, Maastricht, The Netherlands

Effects of litoxetine on urethral pressure and detrusor overactivity in anesthetized female rats
By: Mee M.¹, Guérard M.¹, Palea S.³, Gamé X.², Lluel P.¹
Institutes: ¹Urosphere, Dept. of Pharmacology, Toulouse, France, ²CHU Rangueil, Dept. of Urology, Toulouse, France, ³Palea Pharma & Biotech Consulting, Toulouse, France

Effects of the receptor antagonist picotamide on endothelin-1-, -2- and -3-induced contractions in human prostate smooth muscle
By: Hennenberg M., Tamalunas A., Strittmatter F., Stief C., Gratzecke C.
Institutes: LMU Munich, Dept. of Urology, Munich, Germany

Two microRNA clusters may determine the biological functions of microRNA-regulated pathways in underactive bladder
By: Hashemi Gheinani A., Burkhard F., Monasteryskaya K.
Institutes: Urology Research Laboratory, Dept. of Clinical Research, Bern, Switzerland, ²University Hospital Bern, Dept. of Urology, Bern, Switzerland

Detrusor bioengineering using compressed collagen, adipose-derived stem cells and smooth muscle cells
By: Smolar J., Horst M., Eberli D.
Institutes: 1 University Hospital Zurich, Dept. of Urology, Zürich, Switzerland, 2 University Children's Hospital, Dept. of Pediatric Urology, Zürich, Switzerland
Aims and objectives of this session
To understand where TCC molecular diagnostics is heading. Ready for prime time or more hype than hope?

Poster viewing of 20 minutes. Presentations will take place on stage. Standard presentations are 2 minutes in length, followed by 2 minutes for discussion.

Validation of a mRNA-based urine test for bladder cancer detection in patients with hematuria

Institutes: 1Radboudumc, Dept. of Urology, Nijmegen, The Netherlands, 2University of Nebraska Medical Center, Departments of Pathology/Microbiology, Pediatrics and Orthopaedic Surgery, Omaha, United States of America, 3Sacred Heart Hospital, Molecular Laboratory, Pensacola, United States of America, 4Pathology Inc., Clinical Laboratory, Torrance, United States of America, 5Moffitt Cancer Center, Genitourinary Oncology and Oncologic Sciences, Tampa, United States of America, 6University of Texas Southwestern, Dept. of Urology, Dallas, United States of America, 7University of Michigan Hospital, Dept. of Urology, Ann Arbor, United States of America, 8G. Kenneth Jansz MPC, Private Practice, Burlington, Canada, 9University of Tübingen, Dept. of Urology, Tübingen, Germany, 10Geisinger Health System, Dept. of Urology, Danville, United States of America, 11Urological Surgeons of Long Island, PLLC, Private Practice, Garden City, United States of America, 12Regional Urology, Private Practice, Shreveport, United States of America, 13Urology of Virginia, Private Practice, Virginia Beach, United States of America, 14Kansas City Urology Care, Private Practice, Overland Park, United States of America, 15Skyline Urology, Private Practice, Torrance, United States of America, 16UroPartners, Private Practice, Melrose Park, United States of America, 17Idaho Urologic Institute, Private Practice, Meridian, United States of America, 18Virginia Urology, Private Practice, Richmond, United States of America, 19Skyline Urology, Private Practice, Sherman Oaks, United States of America, 20Five Valleys Urology, Private Practice, Missoula, United States of America, 21Adult and Pediatric Urology & Urogynecology, Private Practice, Omaha, United States of America, 22Wichita Urology Group, Private Practice, Wichita, United States of America

Does smoking influence the performance of urine markers in the diagnosis of urothelial carcinoma?
By: Schnürer S., Hennenlotter J., Dockter K., Rausch S., Stenzl A., Todenhöfer T.
Institutes: Eberhard-Karls-University, Dept. of Urology, Tübingen, Germany

Performance characteristics of a mRNA-based urine test for the detection of bladder cancer recurrence

Institutes: Radboudumc, Dept. of Urology, Nijmegen, The Netherlands, 2University of Nebraska Medical Center, Dept. of Pathology/Microbiology, Pediatrics and Orthopaedic Surgery, Omaha, United States of America, 3Geisinger Health System, Dept. of Urology, Danville, United States of America, 4Sacred Heart Hospital, Molecular Laboratory, Pensacola, United States of America, 5Pathology Inc., Clinical Laboratory, Torrance, United States of America, 6Moffitt Cancer Center, Genitourinary Oncology and Oncologic Sciences, Tampa, United States of America, 7University of Michigan Hospital, Dept. of Urology, Ann Arbor, United States of America, 8G. Kenneth Jansz MPC, Private Practice, Burlington, Canada, 9University of Tübingen, Dept. of Urology, Tübingen, Germany, 10Geisinger Health System, Dept. of Urology, Danville, United States of America, 11Urological Surgeons of Long Island, PLLC, Private Practice, Garden City, United States of America, 12Regional Urology, Private Practice, Shreveport, United States of America, 13Urology of Virginia, Private Practice, Virginia Beach, United States of America, 14Kansas City Urology Care, Private Practice, Overland Park, United States of America, 15Skyline Urology, Private Practice, Torrance, United States of America, 16UroPartners, Private Practice, Melrose Park, United States of America, 17Idaho Urologic Institute, Private Practice, Meridian, United States of America, 18Virginia Urology, Private Practice, Richmond, United States of America, 19Skyline Urology, Private Practice, Sherman Oaks, United States of America, 20Five Valleys Urology, Private Practice, Missoula, United States of America, 21Adult and Pediatric Urology & Urogynecology, Private Practice, Omaha, United States of America, 22Wichita Urology Group, Private Practice, Wichita, United States of America
By: Kara N.¹, Descotes F.², Decaussin Petrucci M.², Piaton E.², Geiguer F.², Rodriguez-Lafrasse C.², Terrier J.E.¹, Lopez J.², Ruffion A.¹

Institutes: Centre Hospitalier Lyon-Sud, Dept. of Urology, Pierre-Bénite, France, ²Centre Hospitalier Lyon-Sud, Dept. of Molecular Biology and Biochemistry, Pierre-Bénite, France

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Multiplex proximity extension assay of 425 candidate biomarkers in the sera of bladder cancer patients: Correlation with stage and outcome

By: Ward D.¹, Gordon N.¹, Abbotts B.², James N.³, Zeegers M.⁴, Cheng K.K.⁵, Bryan R.¹

Institutes: University of Birmingham, Institute of Cancer and Genomic Sciences, Birmingham, United Kingdom, ²University of Birmingham, Institute Of Cancer And Genomic Sciences, Birmingham, United Kingdom, ³University of Warwick, Clinical Trials Unit, Warwick, United Kingdom, ⁴University of Maastricht, Dept. of Complex Genetics, Birmingham, United Kingdom, ⁵University of Birmingham, School of Health and Population Sciences, Birmingham, United Kingdom

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Non-invasive diagnosis and monitoring of bladder cancer utilizing high-throughput genome sequencing on urine sediment


Institutes: Sun Yat-Sen Memorial Hospital, Dept. of Urology, Guangzhou, China

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Method of detecting bladder cancer by optical analysis of bodily fluids

By: Rabah D.

Institutes: College of Medicine, King Saud University, Dept. of Surgery, Riyadh, Saudi Arabia

124

Urethral wash cytology accuracy in the diagnosis of asymptomatic urethral recurrence after radical cystectomy for urethelial bladder cancer

By: Manica M.¹, Naspro R.¹, Pellucchi F.¹, Rocchini L.¹, Roscigno M.¹, Chinaglia D.², Da Pozzo L.F.¹

Institutes: Papa Giovanni Xxiii Hospital, Dept. of Urology, Bergamo, Italy, ²Papa Giovanni Xxiii Hospital, Dept. of Pathology, Bergamo, Italy

125

Diagnosis and prediction of recurrent bladder cancer by urinary DNA methylation analysis: Multicenter prospective study

By: Shindo T.¹, Shimizu T.¹, Nishiyama N.¹, Niinuma T.², Kitajima H.², Kai M.², Shinkai N.¹, Itoh N.³, Tanaka T.¹, Suzuki H.², Masumori N.¹

Institutes: Sapporo Medical University School of Medicine, Dept. of Urology, Sapporo, Japan, ²Sapporo Medical University School of Medicine, Dept. of Molecular Biology, Sapporo, Japan, ³NTT East Corporation Sapporo Hospital, Dept. of Urology, Sapporo, Japan

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Urine-based diagnostics of bladder tumours through volatile organic compounds: A pilot study comparing two detection systems
127 Effect of contemporary health screening not focused on bladder cancer on diagnosis of bladder urothelial carcinoma
Institutes: Samsung Medical Center, Sungkyunkwan University School of Medicine, Dept. of Urology, Seoul, South Korea

128 Molecular tumour grading and classification of non muscle invasive bladder cancer based on whole transcriptome analysis
By: Zlotta A.R. 1, Shen J. 2, Noon A. 3, Jiang H. 4, Kuk C. 1, Ni R. 5, Sukhu B. 5, Chan K. 2, Erlich A. 1, Roupret M. 6, Seisen T. 8, Comparat E. 7, Sweet J. 8, Kulkarni G.S. 9, Fleshner N.E. 9, Azad A. 5, Van Der Kwast T.H. 8, Wrana J.L. 2
Institutes: Mount Sinai Hospital, Dept. of Surgery (urology), Toronto, Canada, 2Mount Sinai Hospital, Lunenfeld-Tanenbaum Research Institute, Toronto, Canada, 3University of Sheffield, Dept. of Urology, Sheffield, United Kingdom, 4University Health Network, Dept. of Statistics, Toronto, Canada, 5Mount Sinai Hospital, Dept. of Pathology and Laboratory Medicine, Toronto, Canada, 6Groupe Hospitalier La Pitié-Salpêtrière, Université Pierre Et Marie Curie, Dept. of Urology, Paris, France, 7Groupe Hospitalier La Pitié-Salpêtrière, Université Pierre Et Marie Curie, Dept. of Pathology, Paris, France, 8Toronto General Hospital, University Health Network, Dept. of Pathology, Toronto, Canada, 9Princess Margaret Cancer Centre, University Health Network, Dept. of Surgical Oncology, Urology, Toronto, Canada

129 Significance of serum n-glycan profiling as a diagnostic biomarker in urothelial carcinoma
By: Oikawa M. 1, Hatakeyama S. 1, Yoneyama T. 2, Tobisawa Y. 3, Narita T. 4, Yamamoto H. 1, Hashimoto Y. 1, Koie T. 1, Narita S. 4, Sasaki A. 4, Tsuchiya N. 4, Habuchi T. 1, Takahashi I. 4, Nakaji S. 4, Ohyama C. 1
Institutes: Hirosaki University Graduate School of Medicine, Dept. of Urology, Hirosaki, Japan, 2Hirosaki University Graduate School of Medicine, Dept. of Advanced Transplant and Regenerative Medicine, Hirosaki, Japan, 3Akita University Graduate School of Medicine, Dept. of Urology, Akita, Japan, 4Tsugaru General Hospital, Dept. of Urology, Tsugaru, Japan, 5Yamagata University Graduate School of Medicine, Dept. of Urology, Yamagata, Japan, 6Hirosaki University School of Medicine, Dept. of Social Medicine, Hirosaki, Japan

130 Concurrent bladder tumours in patients undergoing photodynamic diagnostic ureterorenoscopy: How many lesions are missed under white light?
By: Zreik A. 1, Kata S.G. 2, Ahmad S. 2, Chlost P.L. 3, Aboumarzouk O.M 1
Institutes: 1Queen Elizabeth University Hospital, Dept. of Urology, Glasgow, United Kingdom, 2Ninewells Hospital, Dept. of Urology, Dundee, United Kingdom, 3Jagiellonian University, Dept. of Urology, Cracow, Poland

13:49 - 13:56 Last word on the last rite
P. Black, Vancouver (CA)
Aims and objectives of this session
The attendees will get an update on active surveillance and management of renal cell carcinoma in Van Hippel Lindau disease, discussed in the following case presentation. Next, the current place of surgery in oligometastatic prostate cancer will be highlighted. The second part of the session will address the difficulties encountered in the management of overactive bladder and interstitial cystitis, also supported by a vivid case discussion. Finally, challenges in urolithiasis management and stone surgery are presented and solved.

13:15 - 13:20
Welcome and introduction
J.H. Hong, Seoul (KR)
H. Van Poppel, Leuven (BE)

13:20 - 14:05
Session I: Renal cell carcinoma
Moderators: C-S. Kim, Seoul (KR)
H. Van Poppel, Leuven (BE)

13:20 - 13:35
Active surveillance of renal cell carcinoma: European experience
A. Volpe, Novara (IT)

13:35 - 13:50
Management of renal cell carcinoma in patients with von Hippel-Lindau disease
D.D. Kwon, Gwangju (KR)

13:50 - 14:05
Case discussion
Case presenter: S.H. Choi, Daegu (KR)
Panel: T. Klatte, Wien (AT)
D.D. Kwon, Gwangju (KR)
H.S. Park, Seoul (KR)
A. Volpe, Novara (IT)

14:05 - 14:20
Role of surgery for oligometastatic prostate cancer
Moderators: J.H. Hong, Seoul (KR)
H. Van Poppel, Leuven (BE)

14:05 - 14:20
14:20 - 15:05  
Session II: Advanced management of functional bladder disease

**Moderators:**  
J-N.L. Cornu, Rouen (FR)  
J.C. Kim, Bucheon (KR)

14:20 - 14:35  
Update on bladder pain syndrome/interstitial cystitis  
M. Cervigni, Rome (IT)

14:35 - 14:50  
Botox injection for idiopathic overactive bladder symptoms  
J.H. Bae, Seoul (KR)

14:50 - 15:05  
Case discussion

14:50 - 15:05  
**Case presenter:**  
H. Yoon, Seoul (KR)

14:50 - 15:05  
**Panel:**  
J.H. Bae, Seoul (KR)  
M. Cervigni, Rome (IT)  
D.K. Kim, Daejeon (KR)  
F. Van Der Aa, Leuven (BE)

15:05 - 15:40  
Session III: Urolithiasis

**Moderators:**  
K. Sarica, Istanbul (TR)  
I.Y. Seo, Iksan-shi (KR)

15:05 - 15:20  
How to manage urolithiasis in challenging cases  
O. Wiseman, Cambridge (GB)

15:20 - 15:35  
Perioperative changes in renal function during renal stone surgery  
S.Y. Cho, Seoul (KR)

15:35 - 15:40  
Discussion

15:40 - 15:45  
Closing remarks  
J.H. Hong, Seoul (KR)  
H. Van Poppel, Leuven (BE)
## Joint Session of the European Association of Urology (EAU) and the Société Internationale d’Urologie (SIU)

**Urology beyond Europe**

**Location:** Room Munich, North Hall (Level 1)

**Chairs:** P. Coloby, Cergy Pontoise (FR)  
A. Stenzl, Tübingen (DE)

### Aims and objectives of this session
To introduce and discuss around the world: management of pelvic stone with ureteropelvic obstruction, the updated prevention and treatment of penile cancer and the updated treatment of BPH.

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<th>Time</th>
<th>Event</th>
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| 13:15 - 13:20| Welcome and introduction  
P. Coloby, Cergy Pontoise (FR)  
A. Stenzl, Tübingen (DE) |
| 13:20 - 14:05| Urolithiasis  
**Moderator:** O. Traxer, Paris (FR) |
| 13:20 - 13:30| New technology development  
O. Traxer, Paris (FR) |
| 13:30 - 14:05| Round table discussion: Management of pelvic stone with ureteropelvic obstruction |
| 13:30 - 14:05| **Panel:**  
N. Bernardo, Buenos Aires (AR)  
M.R. Desai, Naidad (IN)  
R. El Khoury, Beirut (LB)  
O. Traxer, Paris (FR) |
| 13:30 - 13:35| Clinical case  
O. Traxer, Paris (FR) |
| 13:35 - 13:43| PCNL  
M.R. Desai, Naidad (IN) |
| 13:43 - 13:51| FURS  
N. Bernardo, Buenos Aires (AR) |
| 13:51 - 13:59| Laparoscopy  
R. El Khoury, Beirut (LB) |
| 13:59 - 14:05| Discussion  
O. Traxer, Paris (FR) |
| 14:05 - 14:50| Penile cancer |

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**Scientific Programme**
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<th>Time</th>
<th>Session</th>
<th>Speaker/Location</th>
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<td>14:05 - 14:20</td>
<td>Risk factors and prevention</td>
<td>N. Lawrentschuk, Collingwood Victoria (AU)</td>
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<tr>
<td>14:20 - 14:35</td>
<td>Lymph node Imaging and surgical treatment</td>
<td>O. Hakenberg, Rostock (DE)</td>
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<td>14:35 - 14:50</td>
<td>New development in the treatment of localised penile cancer</td>
<td>E. Solsona, Valencia (ES)</td>
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<td>14:50 - 15:35</td>
<td>BPH</td>
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<td>14:50 - 15:05</td>
<td>Holistic approach to BPH for individualised and personalised care</td>
<td>K.T. Foo, Singapore (SG)</td>
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<tr>
<td>15:05 - 15:20</td>
<td>New development in non surgical treatment</td>
<td>S. Gravas, Larissa (GR)</td>
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<td>15:20 - 15:35</td>
<td>Medical treatment and cardiovascular disease</td>
<td>A.J. Wein, Philadelphia (US)</td>
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<td>15:35 - 15:45</td>
<td>Take home messages</td>
<td>P. Coloby, Cergy Pontoise (FR)</td>
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<td>A. Stenzl, Tübingen (DE)</td>
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**Joint Session of the European Association of Urology (EAU) and the Japanese Urological Association (JUA)**

**Urology beyond Europe**

**Friday, 24 March**

**13:15 - 15:45**

**Location:** Room 7, Capital suite (level 3)

**Chairs:** C.R. Chapple, Sheffield (GB)
S. Egawa, Tokyo (JP)

**Aims and objectives of this session**
To discuss debatable issues in urological practice through case discussions

13:15 - 13:20

**Welcome and introduction**

C.R. Chapple, Sheffield (GB)
S. Egawa, Tokyo (JP)

13:20 - 14:05

**Prostate Cancer**

**Moderators:** S. Horie, Tokyo (JP)
D.J. Rosario, Sheffield (GB)

13:20 - 13:40

**Extending the use of androgen receptor targeted drugs in men with nmCRPC**

**Yes**

T. Kimura, Tokyo (JP)

**No**

A. Briganti, Milan (IT)

13:40 - 14:05

**Panel discussion on clinical cases: What is your choice of treatment?**

**Panel:**
D.J. Rosario, Sheffield (GB)
S. Maruyama, Sapporo (JP)
Y. Matsui, Kyoto (JP)
H.G. Van Der Poel, Amsterdam (NL)

14:05 - 14:50

**Renal cell carcinoma**

**Moderators:** M.J. Ribal, Barcelona (ES)
Y. Tomita, Niigata (JP)

14:05 - 14:25

**Second line treatment for metastatic or unresectable RCC with nivolumab**

**Yes**

B. Mellado, Barcelona (ES)
14:15 - 14:25
No
M. Takahashi, Tokushima (JP)

14:25 - 14:50
Panel discussion on clinical cases: How to approach this situation?

Panel:
B. Mellado, Barcelona (ES)
A.S. Merseburger, Lübeck (DE)
M.J. Ribal, Barcelona (ES)
R. Takata, Morioka (JP)
R. Tanimoto, Okayama (JP)
Y. Tomita, Niigata (JP)

14:50 - 15:35
Underactive bladder/Detrusor underactivity

Moderators: C.R. Chapple, Sheffield (GB)
N. Sekido, Tokyo (JP)

14:50 - 15:00
Animal model of underactive bladder/ detrusor underactivity
N. Sekido, Tokyo (JP)

15:00 - 15:10
Current definition and emerging therapy of underactive bladder/detrusor underactivity
C.R. Chapple, Sheffield (GB)

15:10 - 15:35
Panel discussion on clinical cases: How do you treat this patient? Differences in approach to underactive bladder

Panel:
Y. Matsukawa, Nagoya (JP)
T. Mitsui, Sapporo (JP)
M. Oelke, Hanover (DE)
G. Van Koeveringe, Maastricht (NL)

15:35 - 15:45
Conclusion
M. Fujisawa, Kobe (JP)
S. Egawa, Tokyo (JP)
# Joint Session of the European Association of Urology (EAU) and the Urological Society of India (USI)

**Urology beyond Europe**

| Location: | Room 9, Capital suite (level 3) |
| Chairs: | D.M. Castro Díaz, La Laguna Santa Cruz Tenerife (ES)  
P.N. Dogra, New Delhi (IN) |

**Aims and objectives of this session**
The contents of this EAU-USI joint session will provide an update on those current hot topics from the perspective of both societies. Recognised experts working in India and Europe will openly discuss recent developments in Peyronie’s disease, Microbiome and LUTS, Minimally invasive management of BPH, Bladder cancer, Prostate cancer and the use of meshes for Reconstructive Urology.

<table>
<thead>
<tr>
<th>Time</th>
<th>Session Title</th>
<th>Speakers</th>
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</table>
| 13:15 - 13:20 | Welcome and introduction                          | D.M. Castro Diaz, La Laguna Santa Cruz Tenerife (ES)  
P.N. Dogra, New Delhi (IN) |
R. Sood, New Delhi (IN)  
European perspective  
I. Moncada, Madrid (ES)  
Discussion |
| 13:45 - 14:05 | Etiopathogenesis of LUTS: Current update          | Contemporary views  
S. Rawal, Delhi (IN)  
Role of microbiome in the development of LUTS  
J.P.F.A. Heesakkers, Nijmegen (NL) |
| 14:05 - 14:30 | Minimally invasive therapy for BPH: What is the current gold standard? | Indian perspective  
S. Basu, Kolkata (IN)  
European perspective  
M. Oelke, Hanover (DE)  
Discussion |
<table>
<thead>
<tr>
<th>Time</th>
<th>Topic</th>
<th>Perspective</th>
<th>Speaker/City</th>
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<tbody>
<tr>
<td>14:30 - 14:55</td>
<td>Current approach to prostate cancer castration resistance</td>
<td>Indian perspective</td>
<td>S.K. Raghunath, Bangalore (IN)</td>
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<td>14:30 - 14:40</td>
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<td>Indian perspective</td>
<td>P. Cornford, Liverpool (GB)</td>
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<td>14:40 - 14:50</td>
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<td>European perspective</td>
<td>M. Babjuk, Prague 5 (CZ)</td>
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<td>14:50 - 14:55</td>
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<td>Discussion</td>
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<tr>
<td>14:55 - 15:20</td>
<td>Timing of radical cystectomy in NMIBC</td>
<td>Indian perspective</td>
<td>P.N. Dogra, New Delhi (IN)</td>
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<td>15:05 - 15:15</td>
<td></td>
<td>European perspective</td>
<td>M. Babjuk, Prague 5 (CZ)</td>
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<tr>
<td>15:15 - 15:20</td>
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<td>Discussion</td>
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<td>15:20 - 15:40</td>
<td>What, why, when, whom and how on the use of meshes for reconstructive urology</td>
<td>European perspective</td>
<td>D.M. Castro Diaz, La Laguna Santa Cruz Tenerife (ES)</td>
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<tr>
<td>15:40 - 15:45</td>
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<td>Discussion and conclusion</td>
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</table>
Joint Session of the European Association of Urology (EAU) and the Iranian Urological Association (IUA)

Urology beyond Europe

**Location:** Room 4, Capital suite (level 3)

**Chairs:**
- B. Djavan, Vienna (AT)
- G. Pourmand, Tehran (IR)

13:15 - 13:20
**Welcome by chair**

13:20 - 13:50
**Urinary stone**

13:20 - 13:35
**Case Presenter**
M.H. Khorrami, Tehran (IR)

13:35 - 14:05
**Renal Transplantation**

13:35 - 14:05
**Case Presenter**
M. Ayati, Tehran (IR)

13:50 - 14:35
**EAU Lecture**
E. Liatsikos, Patras (GR)

13:50 - 14:05
**IUA Lecture**
G. Pourmand, Tehran (IR)

14:05 - 14:20
**EAU Lecture**
G. Janetschek, Salzburg (AT)

14:20 - 14:35
**IUA Lecture**
M.R. Nowroozi, Tehran (IR)

14:35 - 15:05
**EAU Lecture**
N. Sofikitis, Ioannina (GR)

15:05 - 15:15
**Discussion and closing remarks**
Joint Meeting of the European Association of Urology (EAU) and the
Caucasus/Central Asian countries

Urology beyond Europe

Friday, 24 March
13:15 - 15:45

Location: Room 11, Capital suite (level 3)
Chairs: V.G. Mirone, Naples (IT)
        N. Turmanidze, Tbilisi (GE)

13:15 - 13:20
Welcome and introduction by chairs

13:20 - 14:25
Urolithiasis
Moderator: A. Chkhotua, Tbilisi (GE)

13:20 - 13:35
The diagnostic workup of frequent stone formers
K. Sarica, Istanbul (TR)

13:35 - 13:50
Sandwich technique
T. Knoll, Sindelfingen (DE)

13:50 - 14:05
Complications of endoscopic procedures on urolithiasis
B. Ayubov, Tashkent (UZ)
F. Akilov, Tashkent (UZ)
S. Giyasov, Tashkent (UZ)

14:05 - 14:20
Percutaneous nephroscopic surgery: Using tranexamic acid to prevent intraoperative bleeding
Y. Iskakov, Astana (KZ)
G. Khairli, Astana (KZ)
T. Muratov, Astana (KZ)

14:20 - 14:25
Discussion

14:25 - 15:00
Prostate cancer
Moderator: F. Akilov, Tashkent (UZ)

14:25 - 14:40
Modern trends in surgical treatment of prostate cancer: The progressive shift from open to lap to robot
P. Verze, Naples (IT)

14:40 - 14:55
The outcome of nerve-sparing robotic radical prostatectomy with full pelvic anatomy preservation
A.M. Grabsky, Yerevan (AM)
M. Mosoyan, St. Petersburg (RU)

14:55 - 15:00
Discussion
<table>
<thead>
<tr>
<th>Time</th>
<th>Session</th>
<th>Presenters</th>
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<tr>
<td>15:00 - 15:30</td>
<td>Urethral strictures</td>
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<td><strong>Moderator:</strong> S.M. Javad-Zada, Baku (AZ)</td>
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<tr>
<td>15:00 - 15:15</td>
<td>Workup of urethral stricture patients</td>
<td>N. Turmanidze, Tbilisi (GE)</td>
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<td>Z. Tchanturaia, Tbilisi (GE)</td>
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<tr>
<td>15:15 - 15:30</td>
<td>Surgical treatment of urethral strictures</td>
<td>E. Palminteri, Arezzo (IT)</td>
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<tr>
<td>15:30 - 15:45</td>
<td>Closing remarks</td>
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</table>
Aims and objectives of this session
The Young Academic Urologists (YAU) is a group of talented and already renowned European young urologists. We aim to promote high-quality studies in order to provide strong evidence for the best urological practice. In this session, both scientific and educational context will be discussed among the members of YAU and the leaders of European Urology.

13:15 - 13:25
YAU after 5 years: YAU’s perspective
M.S. Silay, Istanbul (TR)

13:25 - 13:35
YAU after 5 years: EAU Executive’s perspective
F. Montorsi, Milan (IT)

13:35 - 13:45
Overview of the non-oncology group’s achievements
P. Verze, Naples (IT)

13:45 - 13:55
Overview of the oncology group’s achievements
E. Xylinas, Paris (FR)

13:55 - 14:00
Awards of the YAU: Best paper published in 2016 by a YAU group and Best poster presented at EAU 2017 by a YAU group

14:00 - 14:30
Key studies of the year

14:00 - 14:10
Robot versus open RP trial

14:00 - 14:10
Presenter
T.A.T. Marcelissen, Maastricht (NL)

14:00 - 14:10
Discussant
A. De La Taille, Créteil (FR)

14:10 - 14:20
ESWL vs URS for renal lithiasis

14:10 - 14:20
Presenter
P. Kallidonis, Patras (GR)

14:10 - 14:20
Discussant
O. Traxer, Paris (FR)

14:20 - 14:30
PROTECT trial
14:20 - 14:30  
**Presenter**  
G. Gandaglia, Milan (IT)

14:20 - 14:30  
**Discussant**  
F.C. Hamdy, Oxford (GB)

14:30 - 14:45  
**Establishing a professional career at a European level: Motivational talk by Crystal Matula Award Winner**  
A. Briganti, Milan (IT)

14:45 - 15:30  
**Challenge the expert session: YAU versus key opinion leaders**

**Moderators:**  
S.D. Brookman-May, Munich (DE)  
G. Ploussard, Toulouse (FR)  
E. Xylinas, Paris (FR)

14:45 - 15:00  
**Adjuvant therapy for high-risk RCC**

**Pro**  
I. Ouzaid, Paris Cedex 18 (FR)

14:53 - 15:00  
**Con**  
A. Bex, Amsterdam (NL)

15:00 - 15:15  
**Adjuvant radiation therapy for prostate cancer**

**Pro**  
P. Ost, Ghent (BE)

15:08 - 15:15  
**Con**  
A. Heidenreich, Cologne (DE)

15:15 - 15:30  
**Adjuvant chemotherapy for bladder cancer**

**Pro**  
R. Seiler, Bern (CH)

15:23 - 15:30  
**Con**  
L.A. Kluth, Hamburg (DE)

15:30 - 16:00  
**YAU meets sections: How to improve the collaboration?**

**Moderators:**  
T.A.T. Marcelissen, Maastricht (NL)  
F. Sanguedolce, London (GB)

15:30 - 15:40  
**Urological imaging**  
J. Walz, Marseille (FR)

15:40 - 15:50  
**Urological research**  
K. Junker, Homburg (DE)
15:50 - 16:00

Transplantation
E. Lledó García, Madrid (ES)
Clinical aspects of infections in urology
Poster Session 10

Location: Room Milan, North Hall (Level 1)

Chairs: F. Bruyere, Tours (FR)
T. Cai, Trento (IT)
F.M.E. Wagenlehner, Giessen (DE)

Aims and objectives of this session
Presentation of clinical infectious aspects in urology patients

Poster viewing of 20 minutes. Presentations will take place on stage. Standard presentations are 2 minutes in length, followed by 2 minutes for discussion.

Guidelines for the treatment of urinary tract infections
F.M.E. Wagenlehner, Giessen (DE)

Risk factors in urosepsis associated with time to recovery: A prospective multinational observational study
By: Tandoğdu Z.¹, Koves B.², Cai T.³, Platz A.⁴, Bjerklund Johansen T.E.⁵, Wagenlehner F.⁶
Institutes: ¹Oslo University, Institute of Clinical Medicine, Oslo, Norway, ²South Pest Teaching Hospital, Dept. of Urology, Budapest, Hungary, ³Santa Chiara Hospital, Dept. of Urology, Trento, Italy, ⁴Universitätsklinikum Gießen und Marburg GmbH, Dept. of Children Urology and Andrology, Giessen, Germany, ⁵Oslo University, Dept. of Urology, Oslo, Norway, ⁶Universitätsklinikum Gießen und Marburg GmbH - Standort Gießen, Dept. of Children Urology and Andrology, Giessen, Germany

Cirpofloxacin infusion versus 3rd generation cephalosporin as a surgical prophylaxis for percutaneous nephrolithotomy: Randomized study
By: Omar M.K.M., El Sheirf E., El Shazly M., Sultan S.
Institutes: Menoufia University, Dept. of Urology, Shibin El Kom, Egypt

Targeted antibiotic prophylaxis can prevent febrile urinary tract infection after removal of ureteral stents in radical cystectomy patients with intestinal urinary diversion
By: Nasu Y.¹, Murata T.¹, Sugimoto M.², Takamoto A.², Ono N.³
Institutes: ¹Okayama Rosai Hospital, Dept. of Urology, Okayama, Japan, ²Okayama University Hospital, Dept. of Urology, Okayama, Japan, ³Kochi Health Sciences Center, Dept. of Urology, Kochi, Japan

Efficacy and safety of different dosages of phosphomycin as antimicrobial prophylaxis in transrectal biopsy of the prostate: A pilot study
By: D’Elia C.¹, Emanuela T.¹, Ladurner C.¹, Saleh O.², Cai T.³, Palermo S.¹, Tischler T.¹, Spoladore G.⁴, Mian P.³, Pycha A.¹
Institutes: ¹Bolzano General Hospital, Dept. of Urology, Bolzano, Italy, ²University of Florence, Dept. of Urology, Florence, Italy, ³Santa Chiara Hospital, Dept. of Urology, Trento, Italy, ⁴Bolzano General Hospital, Dept. of Infectious Diseases, Bolzano, Italy

Rectal culture-guided targeted antimicrobial prophylaxis significantly reduces the incidence of post-operative infectious complications in men at high risk for infections submitted to transrectal ultrasound prostate biopsy - results of a cross-sectional study
By: Boeri L.¹, Fontana M.¹, Gallioli A.¹, Zanetti S.P.¹, Catellani M.², De Lorenzis E.¹, Palmisano F.¹, Longo F.², Montanari E.¹
Institutes: ¹Fondazione IRCCS Ca’ Granda - Ospedale Maggiore Policlinico, Dept. of Urology, Milan, Italy, ²Istituto Europeo Di Oncologia, Dept. of Urology, Milan, Italy
136 Transurethral resection of the prostate: Are we following the guidelines? Outcomes from the Global Prevalence of Infections in Urology (GPIU) side study 2006-2009
By: Köves B.¹, Tandogdu Z.², Cai T.³, Bogenhard F.⁴, Tenke P.⁵, Wullt B.⁶, Naber K.⁶, Bartoletti R.⁷, Cek M.⁷, Kulchavenya E.⁸, Perpeanova T.¹⁰, Pilat Z.¹¹, Bjerkland Johansen T-E.¹², Wagenlehner F.¹¹
Institutes: Jahn Ferenc South Pest Teaching Hospital, Dept. of Urology, Budapest, Hungary, ²Newcastle University, Northern Institute for Cancer Research, Newcastle upon Tyne, United Kingdom, ³Santa Chiara Regional Hospital, Dept. of Urology, Trento, Italy, ⁴Technische Hochschule Mittelhessen, Dept. of Bioinformatics, Giessen, Germany, ⁵Lund University, Dept. of Microbiology, Immunology and Glycobiology, Lund, Sweden, ⁶Technical University of Munich, Dept. of Urology, Munich, Germany, ⁷University of Florence, Dept. of Urology, Edirne, Turkey, ⁸TB Research Institute, Novosibirsk, Russia, ⁹S.R. Urology Institute, Moscow, Russia, ¹⁰Justus-Liebig-University, Dept. of Urology, Paediatric Urology and Andrology, Giessen, Germany, ¹¹Oslo University, Dept. of Urology, Oslo, Norway

137 Therapeutic effect of indoleamine 2,3-dioxygenase inhibitor in epididymitis
By: Ohira S.¹, Hara R.¹, Tone S.², Kin S.¹, Shimizu S.¹, Fukumoto K.¹, Fujii T.¹, Miyaji Y.¹, Nagai A.¹
Institutes: Kawasaki Medical School, Dept. of Urology, Kurashiki City, Japan, ²Graduate School of Tokyo Denki University, Dept. of Life Science and Engineering, Hatoyama-Cho, Japan

138 Canephron N reduced immune cell recruitment in experimental cystitis
By: Nausch B.¹, Rohrl J.¹, Koebeler A.², Harler U.³, Joannidis M.³, Werz O.², Kunstle G.¹
Institutes: Bionorica SE, Preclinical R&D, Neumarkt, Germany, ²Friedrich-Schiller-University Jena, Institute of Pharmacy, Jena, Germany, ³Medical University of Innsbruck, Intensive Care and Emergency Medicine Department, Innsbruck, Austria

139 Alternative therapy for acute uncomplicated cystitis
By: Kulchavenya E., Shevchenko S., Brizhatyuk E.
Institutes: Novosibirsk Research TB Institute, Dept. of Urogenital, Novosibirsk, Russia

140 First experience in the United Kingdom with the novel sublingual vaccine Uromune® in the treatment of women with recurrent urinary tract infections
By: Yang B.¹, Foley S.²
Institutes: ¹Royal Berkshire Hospital, Dept. of Urology, Reading, United Kingdom, ²Royal Berkshire Hospital Reading UK, Dept. of Urology, Reading, United Kingdom

141 The reduction of Escherichia coli resistance against ciprofloxacin is a microbiological parameter for asymptomatic bacteriuria predicting: Results from a cross-sectional study
By: Cai T.¹, Mazzoli S.², Meacci F.², Tiscione D.¹, Malossini G.¹, Bartoletti R.³
Institutes: ¹Santa Chiara Hospital, Dept. of Urology, Trento, Italy, ²Santa Maria Annunziata Hospital, Sexually Transmitted Disease Centre, Florence, Italy, ³University of Pisa, Dept. of Urology, Pisa, Italy

142 Efficacy of antibiotic prophylaxis and cleaning/disinfection devices in flexible cystoscopy to prevent positive urinary culture after procedure
By: Martinez Rodriguez R.H.¹, Felip E.², Arroz Fabregas M.¹, Juventeny N.², Ibarz Servio L.¹
Institutes: ¹Hospital Universitari Germans Trias i Pujol, Dept. of Urology, Badalona, Spain, ²Hospital Universitari Germans Trias i Pujol, Dept. of Urology Nurse, Badalona, Spain

143 A retrospective study of immunotherapy treatment with Uro-Vaxom® (OM-89) for prophylaxis of recurrent urinary tract infections
By: Brodie A., Jour I., Charlotte F., Hanbury D.
Institutes: Lister Hospital, Dept. of Urology, Stevenage, United Kingdom

144 Adhesive siliconmicropillar arrays for bacteria capture: A method for rapid antibiotic susceptibility testing
By: Leonard H.², Halachmi S.¹, Ofer N.¹, Ben Dov N.², Segal E.²
Institutes: 1 Bnai-Zion Medical Center, Dept. of Urology, Haifa, Israel, 2 Technion Israeli Institute of Technology, Dept. of Biotechnology and Food Engineering, Haifa, Israel
## Options in intracorporeal neobladder reconstruction

**Video Session 03**

**Location:** Room Paris, North Hall (Level 1)

**Chairs:**
- J.W. Collins, Stockholm (SE)
- F. D'Hondt, Aalst (BE)
- H.S.S. Ho, Singapore (SG)

### Aims and objectives of this session

Intracorporeal reconstructive surgery is challenging. The aims and objectives of this session are to present different approaches to intracorporeal neobladder reconstruction. Different centres of excellence will present their standardised approach and we will discuss the potential advantages (and disadvantages) from these different techniques and examine the current evidence.

All presentations have a maximum length of 8 minutes, followed by 4 minutes of discussion.

### Presentations

#### V17
**Laparoscopic robot-assisted intracorporeal modified Studer orthotopic neobladder following radical cystectomy**
By: John H., Padevit C., Horton K., Hosseini A., Wiklund P.
Institutes: Kantonsspital Winterthur, Dept. of Urology, Winterthur, Switzerland, Karolinska Institutet, Dept. of Urology, Stockholm, Sweden

#### V18
**Laparoscopic radical cystectomy with intracorporeal heterotopic urinary diversion in a female patient with solitary kidney**
By: Nosov A., Reva S., Berkut M., Petrov S.
Institutes: N.N.Petrov Research Institute of Oncology, Dept. of Oncourology, Saint-Petersburg, Russia

#### V20
**Long term follow up and outcome of a new technique of ureteroileal anastomosis: Tube in tube technique**
By: Singh A., Bansal P., Chatterjee S., Rawal S.
Institutes: Rajiv Gandhi Cancer Hospital & Research Center, Dept. of Urology, Delhi, India

#### V21
**Laparoscopic intracorporeal orthotopic ileal neobladder with double afferent isoperistaltic limbs**
By: Xing N.
Institutes: Beijing Chao-Yang Hospital, Capital Medical University, Dept. of Urology, Beijing, China

#### V22
**Robot-assisted radical cystectomy with totally intracorporeal orthotopic ileal neobladder: Preliminary experience**
Institutes: University of Florence, Dept. of Urology, Florence, Italy

#### V23
**Laparoscopic heterotopic and orthotopic intracorporeal urinary diversion: Reporting our experience**
Institutes: Sapienza University of Rome, Dept. of Medico-Surgical Sciences and Biotechnologies, Urology Unit, Latina, Italy

#### V24
**Robotic intracorporeal Padua ileal bladder: Surgical technique, perioperative, oncologic and functional outcomes**
Prostate cancer progression, epithelial to mesenchymal transition and nuclear receptors
Poster Session 11

Location: Room Amsterdam, North Hall (Level 1)
Chairs: A. Bjartell, Malmö (SE)  
G. Carbone, Bellinzona (CH)  
M. Puhr, Innsbruck (AT)

Aims and objectives of this session
Cellular events during prostate cancer progression are controlled by transcription factors, miRNA, and nuclear receptors. Several contributions highlight the role of miRNA in different prostate cell types and show causal relationships with prostate cancer progression and stemness. These novel regulatory networks will be discussed in the session.

Poster viewing of 20 minutes. Presentations will take place on stage. Standard presentations are 2 minutes in length, followed by 2 minutes for discussion. Extended presentations (+) are 3 minutes in length, followed by 3 minutes for discussion.

*145
Functional high-throughput screening and expression analysis identify microRNAs sharing the AAGUGC seed sequence as key regulators of epithelial-mesenchymal transition in prostate cancer
By: Rao S.1, Howarth A.2, Kratschmer P.1, Snaith A.1, Haire A.1, Yapp C.1, Ebner D.2, Hamdy F.1, Edwards C.1
Institutes: 1University of Oxford, Nuffield Dept. of Surgical Sciences, Oxford, United Kingdom, 2University of Oxford, Nuffield Dept. of Medicine, Oxford, United Kingdom

*146
MicroRNA-424 promotes STAT3 activation and prostate cancer progression
By: Dallavalle C.1, Albino D.1, Civenni G.1, Merulla J.1, Mello-Grand M.2, Ostano P.2, Losa M.1, Thalmann G.3, Chiorino G.2, Cataparco C.1, Carbone G.1
Institutes: 1IOR Institute of Oncology Research, Tumor Biology and Experimental Therapeutic, Bellinzona, Switzerland, 2Fondo Edo Tempia, Laboratory of Cancer Genomics, Biella, Italy, 3University of Bern, Inselspielt, Dept. of Urology, Bern, Switzerland

147
Characterization and personalized treatment response in primary and metastatic prostate canceroids
By: Karkampouna S.1, La Manna F.2, Zoni E.1, Beimers L.3, Kloen P.4, Wetterwald A.1, Grosjean J.1, Klima I.1, Cecchini M.1, Spahn M.3, Thalmann G.3, Kruithof-De Julio M.1
Institutes: 1Urology Research Laboratory, Dept. of Clinical Research, Bern, Switzerland, 2Leiden University Medical Center, Dept. of Urology, Leiden, The Netherlands, 3Slotervaart Medical Centre, Dept. of Orthopaedic Surgery, Amsterdam, The Netherlands, 4Academic Medical Centre, Dept. of Orthopaedic Trauma Surgery, Amsterdam, The Netherlands, 5University Hospital Bern, Dept. of Urology, Bern, Switzerland

148
MCAM supports the aggressive phenotype in human prostate cancer
By: Zoni E.1, Astrologo L.1, Melsen J.2, Klima I.1, Grosjean J.1, Van Der Pluim G.2, Cecchini M.1, Kruithof-De Julio M.1, Thalmann G.3
Institutes: 1Urology Research Laboratory, Dept. of Clinical Research, Bern, Switzerland, 2Leiden University Medical Center, Urology Research Laboratory, Leiden, The Netherlands, 3University Hospital Bern, Dept. of Urology, Bern, Switzerland

149
Epigenetic mechanisms and therapeutic opportunities in metastatic castration resistant prostate cancer
EMT status within M1 diagnostic prostate biopsies correlate with stem like phenotype and loss of AR signalling

By: Hiew K.¹, Bokobza S.², Hart C.³, Elliott T.⁴, Smith N.⁵, Brown M.⁶, Clarke N.⁷

Institutes: ¹Salford Royal NHS Foundation Trust, Dept. of Urology, Salford, United Kingdom, ²AstraZeneca, R&D, Oncology IMed, Macclesfield, United Kingdom, ³The University of Manchester, Genito Urinary Cancer Research Group, Division of Molecular & Clinical Cancer Sciences, Faculty of Biology, Medicine and Health, Manchester, United Kingdom, ⁴Christie Hospital NHS Foundation Trust, Dept. of Oncology, Manchester, United Kingdom, ⁵Christie Hospital NHS Foundation Trust, Dept. of Urology, Manchester, United Kingdom

Steroid hormone receptors are differently expressed in prostate cancer depending on Gleason grade and presence of disease recurrence

By: Gevaert T.¹, Vandenbroeck T.¹, Van Poppel H.¹, Claessens F.², Salmon I.³, Rorive S.³, Decaestecker C.⁴, Van Eycke Y.⁵, De Ridder D.⁴, Joniau S.¹

Institutes: ¹UZ Leuven, Dept. of Urology, Leuven, Belgium, ²KU Leuven, Dept. of Molecular and Cellular Medicine, Leuven, Belgium, ³Université Libre de Bruxelles, Dept. of Pathology, Brussels, Belgium, ⁴Université Libre de Bruxelles, DIAPath - Center for Microscopy and Molecular Imaging, Gosselies, Belgium

Characterizing androgen receptor blockade- and metabolic stress-induced tunneling nanotube formation supporting stress adaptivity in prostate cancer

By: Kretschmer A.¹, Zhang F.¹, Tse C.¹, Leachman L.¹, Gleave A.¹, Somasekharan S.P.¹, Sorensen P.², Gleave M.¹

Institutes: ¹Vancouver Prostate Centre, Dept. of Urologic Sciences, Vancouver, Canada, ²BC Cancer Research Centre, Dept. of Pathology, Vancouver, Canada

Neoadjuvant hormonal therapies induce the expression of AR transcript variants

By: Tammela T.¹, Kallio H.², Annala M.², Brofeldt A.², Hieta R.², Kivinummi K.², Nykter M.², Lilja H.², Bova G.², Visakorpi T.²

Institutes: ¹Tampere University Hospital, Dept. of Surgery, Tampere, Finland, ²University of Tampere, Biomeditech, Tampere, Finland

Galectin-3 is involved in the progression of castration-resistant prostate cancer through the regulation of tumor invasion, angiogenesis and androgen receptor signaling

By: Fukumori T.¹, Dondoo T-O.¹, Daizumoto K.², Fukawa T.², Yamamoto Y.², Yamaguchi K.², Takahashi M.², Kanayama H-O.²

Institutes: ¹Tokushima University, Dept. Of Urology,Tokushima, Japan, ²Tokushima University, Dept. of Urology, Tokushima, Japan

Effect and mechanism of TR4 nuclear receptor on invasion of CD133+ prostate cancer cells

By: Shan Y.X.

Institutes: Second Affiliated Hospital Of Soochow University, Suzhou, China, Dept. of Urology, Suzhou, China

Semaphorin/plexin signalling promotes trafficking of glucocorticoid receptor and androgen receptor to the nucleus

By: Magali Williamson M.

Institutes: Kings College London, Randall Division, London, United Kingdom
Epithelial to mesenchymal transition in prostate cancer
G. Carbone, Bellinzona (CH)
Aims and objectives of this session

Neurological diseases can cause considerable urological problems. In this session recent advances are discussed.

Poster viewing of 20 minutes. Presentations will take place on stage. Standard presentations are 2 minutes in length, followed by 2 minutes for discussion. Extended presentations (*) are 3 minutes in length, followed by 3 minutes for discussion.

157
The use of mirabegron in the treatment of overactive bladder in patients affected by Parkinson's disease
By: Gubbiotti M., Rossi De Vermandois J., Turco M., Giannantoni A.
Institutes: University of Perugia, Dept. of Surgical and Biomedical Sciences, Perugia, Italy

158
Comparison of intradetrusor injections of botulinum toxin A in adult patients with spina bifida and in patients with spinal cord injury: A multicenter study
By: Peyronnet B.¹, Hascoet J.¹, Roumiguie M.², Castel-Lacanal E.³, Marque P.³, Manunta A.¹, Game X.²
Institutes: ¹CHU Rennes, Dept. of Urology, Rennes, France, ²CHU Toulouse, Dept. of Urology, Toulouse, France, ³CHU Toulouse, Dept. of Physical Medicine and Rehabilitation, Toulouse, France

159
Clinical profile of amyotrophic lateral sclerosis patients with lower urinary tract symptoms and neurogenic bladder: A cross-sectional study
By: Arlandis S.¹, Vázquez-Costa J.F.², Martinez-Cuenca E.¹, Hervás D.³, Sevilla T.², Broseta Rico E.¹
Institutes: ¹La Fe, University and Polytechnic Hospital, Dept. of Urology, Valencia, Spain, ²La Fe, University and Polytechnic Hospital, Dept. of Neurology, Valencia, Spain, ³Instituto De Investigación Sanitaria La Fe, Dept. of Biostatistics, Valencia, Spain

*160
Frontal lobe function correlates with one-year incidence of urinary incontinence in elderly with Alzheimer disease
By: Yoshida M.¹, Sugimoto T.², Ono R.³, Murata S.³, Saji N.², Niida S.⁴, Toba K.², Sakurai T.²
Institutes: ¹National Center For Geriatrics and Gerontology, Dept. of Urology, Obu, Japan, ²National Center For Geriatrics and Gerontology, Center For Comprehensive Care and Research On Memory Disorders, Obu, Japan, ³Kobe University, Graduate School of Health Sciences, Dept. of Community Health Sciences, Kobe, Japan, ⁴National Center For Geriatrics and Gerontology, Medical Genome Center, Obu, Japan

161
Feasibility, morbidity and functional results of robotic supratrigonal cystectomy with augmentation ileocystoplasty
Institutes: Nantes University Hospital, Dept. of Urology, Nantes, France

162
Intra detrusor injections of botulinum toxin type A in children with spina bifida: A multicenter study
By: Hascoet J.¹, Forin V.², Baron M.³, Capon G.⁴, Prudhomme T.⁵, Allenet C.⁴, Tournier S.², Maurin
163 Comparison between different dosages of intradetrusor botulinum toxin to treat neurogenic detrusor overactivity
By: Spinelli M., Guerrero C., Citeri M., Zanollo L., Tamarelle B., Rizzolo L.
Institutes: Hospital Niguarda Milano, Alberto Zanollo Center, Spinal Cord, Milan, Italy

164 Long-term outcome of adenosine A2A receptor antagonist on lower urinary tract symptoms in male Parkinson's disease patients
By: Kitta T., Yabe I., Kanno T., Ouchi M., Moriya K., Takahashi I., Matsushima M., Sasaki H., Shinozaka N.
Institutes: Hokkaido University School of Medicine, Dept. of Urology, Sapporo, Japan, Hokkaido University School of Medicine, Dept. of Neurology, Sapporo, Japan

165 Can we avoid bladder augmentation in case of failure of a first intradetrusor botulinum toxin injections in patients with spinal dysraphism?
Institutes: CHU Rennes, Dept. of Urology, Rennes, France, Tenon Hospital, Dept. of Neurourology, Paris, France, Clinique Saint-Augustin, Dept. of Neurourology, Bordeaux, France, CHU Lausanne, Dept. of Neurourology, Lausanne, France, Raymond Poincaré Hospital, Dept. of Neurourology, Garches, France, CHU Bordeaux, Dept. of Urology, Bordeaux, France, CHU Toulouse, Dept. of Urology, Toulouse, France, CHU Nantes, Dept. of Urology, Nantes, France, CHU Marseille, Dept. of Urology, Marseille, France, CHU Lille, Dept. of Urology, Lille, France, CHU Tours, Dept. of Urology, Tours, France, CHU Rouen, Dept. of Urology, Rouen, France, CHU Strasbourg, Dept. of Urology, Strasbourg, France, CHU Rennes, Dept. of Physical Medicine and Rehabilitation, Rennes, France, Pitié Salpêtrière Hospital, Dept. of Urology, Paris, France

166 Combined treatment of DDAVP and mirabegron represents an effective treatment of neurogenic detrusor overactivity in patients with multiple sclerosis
By: Zachariou A., Filiponi M., Dimitriadis F., Takenaka A., Sofikitis N.
Institutes: Ioannina University School of Medicine, Dept. of Urology, Ioannina, Greece, Elpis Hospital, Dept. of Urology, Volos, Greece, Tottori University School of Medicine, Dept. of Urology, Tottori, Japan

167 Detrusor acontractility after acute spinal cord injury: Myth or reality
By: Bywater M., Tornic J., Mehnert U., Kessler T.
Institutes: University Hospital Balgrist, Dept. of Neuro Urology, Zürich, Switzerland

168 High EDSS can predict risk for upper urinary tract damage in patients with multiple sclerosis
By: Schneider M.P., Ineichen B., Hagenbuch N., Linnebank M., Kessler T.
Institutes: University Hospital Zürich, Dept. of Neuro-Urology, Zürich, Switzerland, Biostatistics and Prevention Institute, Dept. of Biostatistics, Zürich, Switzerland, University Hospital Zürich, Dept. of Neurology, Zürich, Switzerland, Balgrist University Hospital, Dept. of Neuro-Urology, Zürich, Switzerland

169 Influence of botulinum toxin type A on urodynamic parameters and sexual function in men with...
neurogenic detrusor overactivity

By: Sivkov A.\textsuperscript{1}, Romikh V.\textsuperscript{2}, Panteleev V.\textsuperscript{2}, Zakharchenko A.\textsuperscript{2}, Arkhireev A.\textsuperscript{2}, Apolikhin O.\textsuperscript{1}, Kaprin A.\textsuperscript{3}

Institutes: \textsuperscript{1}Research Institute of Urology and Interventional Radiology N.a. Lopatkin - Branch of Fsbi Nmrrc, Moscow, Russia, \textsuperscript{2}Research Institute of Urology and Interventional Radiology N.a. Lopatkin - Branch of Fsbi Nmrrc, Neurourology and Urodynamics, Moscow, Russia, \textsuperscript{3}Fsbi Nmrrc, Moscow, Russia
Perioperative chemotherapy and advanced disease - increasing experience and new aspects

Poster Session 13

Location: Room Vienna, North Hall (Level 1)

Chairs: P. Patel, Birmingham (GB)
C.N. Sternberg, Rome (IT)
J.A. Witjes, Nijmegen (NL)

Aims and objectives of this session
This session will highlight new data on systemic perioperative therapy and advanced bladder cancer, including chemotherapy, immunotherapy and prediction of outcome.

Poster viewing of 20 minutes. Presentations will take place on stage. Standard presentations are 2 minutes in length, followed by 2 minutes for discussion. Extended presentations (*) are 3 minutes in length, followed by 3 minutes for discussion.

170

Pembrolizumab produces clinically meaningful responses as first-line therapy in cisplatin-ineligible advanced urothelial cancer: Results from subgroup analyses of KEYNOTE-052

Institutes: 1Barts Cancer Institute, Queen Mary University of London, Dept. of Experimental Cancer Medicine, London, United Kingdom, 2Dana-Farber Cancer Institute, Dept. of Genitourinary Oncology, Boston, United States of America, 3Hospital Universitario 12 De Octubre, Dept. of Medicine, Madrid, Spain, 4The University of Chicago Medical Centre, Dept. of Medicine, Chicago, United States of America, 5Cleveland Clinic, Dept. of Hematology and Oncology, Cleveland, United States of America, 6Oregon Health & Science University, Dept. of Oncology, Portland, United States of America, 7Fox Chase Cancer Center, Dept. of Hematology and Oncology, Philadelphia, United States of America, 8Johns Hopkins University Sidney Kimmel Comprehensive Cancer Center, Dept. of Oncology and Urology, Baltimore, United States of America, 9Perlmutter Cancer Center, NYU Langone Medical Center, Dept. of Medicine, New York, United States of America, 10Merck & Co., Inc., Dept. of Clinical Oncology, Kenilworth, United States of America, 11Memorial Sloan Kettering Cancer Center, Dept. of Medical Oncology, New York, United States of America, 12Erasmus MC Cancer Institute, Dept. of Urology and Oncology, Rotterdam, The Netherlands

171

Updated meta-analysis (MA) of salvage therapy for metastatic urothelial cancer (mUC): Comparing outcomes of immunotherapy (IT) vs. single agent and doublet chemotherapy (CT)
By: Necchi A. 1, Raggi D. 1, Sonpavde G. 2, Giannatempo P. 3, Mariani L. 4, Galsky M. 5, Bellmunt J. 6, Miceli R. 7

Institutes: 1Fondazione IRCCS - Istituto Nazionale Dei Tumori, Dept. of Medical Oncology, Milan, Italy, 2UAB Comprehensive Cancer Center, Dept. of Medical Oncology & Hematology, Birmingham, United States of America, 3Fondazione IRCCS Istituto Nazionale Dei Tumori, Dept. of Medical Oncology, Milan, Italy, 4Fondazione IRCCS Istituto Nazionale Dei Tumori, Clinical Epidemiology and Trials Organization Unit, Milan, Italy, 5Mount Sinai School of Medicine, Tisch Cancer Institute, Dept. of Medical Oncology, New York, United States of America, 6Dana-Farber Cancer Institute and Harvard Medical School, Dept. of Medical Oncology, Boston, United States of America

172

Adjuvant chemotherapy vs. observation following radical cystectomy for pT3-4 and/or pN+ urothelial carcinoma of the bladder previously treated with neoadjuvant chemotherapy
By: Seisen T. 1, Jamzadeh A. 2, Vetterlein M. 1, Von Landenberg N. 1, Gild P. 1, Menon M. 2, Rouprêt M. 3, Sun M. 1, Choueiri T. 4, Bellmunt J. 6, Trinh Q.-D. 1

Institutes: Brigham and Women’s Hospital, Harvard Medical School, Division of Urologic Surgery and Center For Surgery and Public Health, Boston, United States of America, 2Henry Ford Health
Comparative effectiveness of selective adjuvant versus systematic neoadjuvant chemotherapy-based strategy for muscle-invasive urothelial carcinoma of the bladder

By: Seisen T.1, Sonpavde G.2, Kachroo N.3, Lipsitz S.4, Leow J.1, Menon M.3, Gild P.1, Von Landenberg N.1, Roupret M.3, Kibel A.1, Sun M.1, Pal S.5, Bellmunt J.1, Choueiri T.1, Trinh Q.-D.1

Institutes: Brigham and Women's Hospital, Harvard Medical School, Division of Urological Surgery and Center For Surgery and Public Health, Boston, United States of America, University of Alabama At Birmingham, Division of Hematology-Oncology, Department of Medicine, Birmingham, United States of America, Henry Ford Health System, VUI Center for Outcomes Research, Analytics and Evaluation, Vattikuti Urology Institute, Detroit, United States of America, Brigham and Women's Hospital, Harvard Medical School and Harvard T.H. Chan School of Public Health, Center for Surgery and Public Health, Boston, United States of America, Pitié-Salpêtrière, APHP, University of Paris VI, Dept. of Urology, Paris, France, City of Hope Comprehensive Cancer Center, Dept. of Medical Oncology & Experimental Therapeutics, Duarte, United States of America, Dana Farber Cancer Institute, Dept. of Medical Oncology, Boston, United States of America

Neoadjuvant sorafenib, gemcitabine, and cisplatin (SGC) for muscle-invasive urothelial bladder cancer (MIUBC): Final results and translational findings of an open-label, single-arm, phase 2 study

By: Necchi A.1, Lo Vullo S.2, Raggi D.1, Giannatempo P.1, Nicolai N.2, Piva L.2, Biasoni D.2, Catanzano M.3, Torelli T.3, Stagni S.3, Calareso G.4, Togliardi E.5, Colecchia M.6, Busico A.6, Perrone F.6, Pennati M.1, Zaffaroni N.2, Mariani L.3, Salvioni R.3

Institutes: Fondazione IRCCS - Istituto Nazionale Dei Tumori, Dept. of Medical Oncology, Milan, Italy, Fondazione IRCSS - Istituto Nazionale Dei Tumori, Clinical Epidemiology and Trials Organization Unit, Milan, Italy, Fondazione IRCCS - Istituto Nazionale Dei Tumori, Dept. of Urology, Milan, Italy, Fondazione IRCCS - Istituto Nazionale Dei Tumori, Dept. of Radiology, Milan, Italy, Fondazione IRCCS - Istituto Nazionale Dei Tumori, Pharmacy Unit, Milan, Italy, Fondazione IRCCS - Istituto Nazionale Dei Tumori, Dept. of Pathology, Milan, Italy, Fondazione IRCCS - Istituto Nazionale Dei Tumori, Dept. of Experimental Oncology and Molecular Medicine, Milan, Italy

Is neoadjuvant chemotherapy beneficial before radical cystectomy? Examining the external validity of the SWOG-8710 trial

By: Hanna N.1, Trinh Q.-D.1, Sammon J.2, Seisen T.1, Vetterlein M.1, Moreira R.1, Preston M.1, Lipsitz S.1, Bellmunt J.3, Menon M.2, Choueiri T.3, Abdollah F.2

Institutes: Brigham and Women's Hospital, Harvard Medical School, Dept. of Urology, Boston, United States of America, Henry Ford Hospital, Dept. of Urology, Detroit, United States of America, Dana-Farber Cancer Institute, Dept. of Medical Oncology, Boston, United States of America

An inconvenient truth: Difference between patient-reported and doctor-reported outcomes in advanced urothelial carcinoma

By: Hamano I.1, Hatakeyama S.1, Narita T.1, Fukushi K.1, Yamamoto H.1, Soma O.1, Matsumoto T.1, Tobisawa Y.1, Yoneyma T.2, Imai A.1, Yoneyma T.1, Hashimoto Y.2, Koie T.1, Ohyama C.1

Institutes: Hirosaki University School of Medicine, Dept. of Urology, Hirosaki, Japan, Hirosaki University School of Medicine, Dept. of Advanced Transplant and Regenerative Medicine, Hirosaki, Japan

Survival benefit of neoadjuvant chemotherapy for muscle invasive bladder cancer in elderly patients

By: Hamano I.1, Hatakeyama S.1, Oikawa M.1, Narita T.1, Hagiwara K.1, Tanaka T.1, Noro D.1, Yuki T.1, Yamamoto H.1, Yoneyma T.2, Imai A.1, Yoneyma T.1, Hashimoto Y.2, Koie T.1, Ohyama C.1

Institutes: Hirosaki University School of Medicine, Dept. of Urology, Hirosaki, Japan, Hirosaki University School of Medicine, Dept. of Advanced Transplant and Regenerative Medicine, Hirosaki, Japan
The pathological and clinical response of the luminal and basal subtypes of muscle-invasive bladder cancer to neoadjuvant cisplatin-based chemotherapy and radical cystectomy depend on the immunohistochemical classification system
By: Zhang R.¹, Chen H.¹, Xia J.², Shi O.³, Cao M.¹, Jin D.¹, Li C.⁴, Zhuang G.⁵, Liu Q.², Xue W.¹, Radvanyi F.⁶, Allory Y.⁷, Huang Y.¹

Institutes: ¹Shanghai Renji Hospital, Dept. of Urology, Shanghai, China, ²Shanghai Renji Hospital, Dept. of Pathology, Shanghai, China, ³Shanghai Jiao Tong University School of Medicine, Dept. of Epidemiology and Statistics, Shanghai, China, ⁴Chinese Academy of Sciences, Chinese Academy of Sciences Protein Science Core Facility Center, Institute of Biophysics, Beijing, China, ⁵Renji-Med X Clinical Stem Cell Research Center, Renji Hospital, State Key Laboratory of Oncogenes and Related Genes, Shanghai, China, ⁶Institut Curie, CNRS, UMR 144, Paris, France, ⁷AP-HP, Hôpitaux Universitaires Henri-Mondor, Dept. of Pathology, Créteil, France

Impact of adjuvant chemotherapy in patients with pT3NanyM0 upper tract urothelial cancer following radical nephroureterectomy
By: Song W.¹, Choi Y.H.¹, Chung H.W.¹, Lee C.U.¹, Na J.P.¹, Choi S.M.², Sung H.H.¹, Jeon H.G.¹, Jeong B.C.¹, Seo S.I.¹, Jeon S.H.¹, Choi H.Y.¹, Lee H.M.¹

Institutes: ¹Samsung Medical Center, Sungkyunkwan University School of Medicine, Dept. of Urology, Seoul, South Korea, ²Gyeongsang National University Hospital, Dept. of Urology, Jinju, South Korea

Multimodal bladder preservation technique for muscle invasive bladder cancer: Results from a prospective trial
By: Inamoto T.¹, Takahara K.², Ibuki N.², Takai T.², Uchimoto T.³, Saito K.², Tanda N.², Yoshikawa Y.², Minami K.², Hirano H.², Nomí H.², Azuma H.², Yamamoto K.², Shinbo T.², Yamamoto K.², Narumi Y.²

Institutes: ¹Osaka Medical College, Osaka, Japan, ²Osaka Medical College, Dept. of Urology, Osaka, Japan, ³Osaka Medical College Mishima-Minami Hospital, Dept. of Urology, Osaka, Japan, ⁴Osaka Medical College, Dept. of Radiology, Osaka, Japan

Aspects on perioperative chemotherapy
C.N. Sternberg, Rome (IT)
EAU Opening Ceremony

Location: eURO Auditorium (Level 0)

Friday, 24 March
18:00 - 19:30

Opening addresses
C.R. Chapple, Sheffield (GB)

Announcement of the new EAU Honorary Members

Presentation of the EAU Willy Gregoir Medal 2017

Presentation of the EAU Frans Debruyne Life Time Achievement Award 2017

Presentation of the EAU Crystal Matula Award 2017

Presentation of the EAU Hans Marberger Award 2017

Presentation of the EAU Innovators in Urology Award 2017

Presentation of the EAU Prostate Cancer Research Award 2017
Welcome by the EAU Secretary General

Approval minutes General Assembly of 12 March 2016, Munich, Germany

General report by the EAU Secretary General
C.R. Chapple, Sheffield (GB)

Report by the EAU Treasurer
M. Wirth, Dresden (DE)

Specific reports on the EAU Offices by the EAU Executive

Approval of the amendments of the EAU Bylaws

Election of Adjunct Secretary General – Clinical Practice
J.O.R. Sonksen, Herlev (DK)

Report by the Secretary General on the EAU Membership Office: Approval new EAU members

Report by the Secretary General on the EAU Membership Office: Approval new Honorary members

Other business: Report of the chairman of the EAU Research Foundation (EAURF)
P.F.A. Mulders, Nijmegen (NL)

Other business: Introduction of the new chairman of the EAURF
A. Bjartell, Malmö (SE)

Announcement of the 33rd Annual EAU Congress in Copenhagen, 16-20 March 2018
### 'Sleepless nights': Would you do the same again?

**Plenary Session 01**

**Location:** eURO Auditorium (Level 0)

**Chairs:**
- T. S. O'Brien, London (GB)
- B. Leigh, London (GB)

#### Aims and objectives of this session

To explore controversies in Renal cancer management through the prism of the law court. If events didn't go to plan, would the decisions you made stand up to scrutiny by a lawyer? Expert urological surgeons will discuss the evidence for why they managed the case in the way they did; they will then be cross examined by legal counsel.

During the plenary sessions, French and Spanish translation will be provided. Please collect your headset in the session room prior to the start of the session and return it after the session.

Meet the speakers of the plenary session:
Delegates are able to meet the speakers of the plenary session immediately at the end of the session in the foyer of the eURO Auditorium (Level 0). Do not miss this opportunity to meet and greet the speakers and to consult them for any questions you may have.

<table>
<thead>
<tr>
<th>Time</th>
<th>Case presentation</th>
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<tbody>
<tr>
<td>08:30 - 09:00</td>
<td>3 cm mass in a 70 year old</td>
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<tr>
<td>08:30 - 08:32</td>
<td><strong>Case presenter</strong></td>
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<tr>
<td></td>
<td>T. S. O'Brien, London (GB)</td>
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<tr>
<td>08:32 - 08:42</td>
<td><strong>Urologist in the dock</strong></td>
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<td>A. Bex, Amsterdam (NL)</td>
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<tr>
<td>08:42 - 08:52</td>
<td><strong>Cross examination</strong></td>
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<td></td>
<td>B. Leigh, London (GB)</td>
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<tr>
<td>08:52 - 09:00</td>
<td><strong>Discussion</strong></td>
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<thead>
<tr>
<th>Time</th>
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<tbody>
<tr>
<td>09:00 - 09:30</td>
<td>4.5 cm mass in a 50 year old</td>
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<tr>
<td>09:00 - 09:02</td>
<td><strong>Case presenter</strong></td>
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<tr>
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<td>T. S. O'Brien, London (GB)</td>
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<tr>
<td>09:02 - 09:12</td>
<td><strong>Urologist in the dock</strong></td>
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<td>C.K. Bensalah, Rennes (FR)</td>
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<td>09:12 - 09:22</td>
<td><strong>Cross examination</strong></td>
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<td>B. Leigh, London (GB)</td>
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<tr>
<td>09:22 - 09:30</td>
<td><strong>Discussion</strong></td>
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<tr>
<th>Time</th>
<th>Case presentation</th>
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<tbody>
<tr>
<td>09:30 - 10:00</td>
<td>12 cm mass with lung metastases</td>
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</tbody>
</table>
09:30 - 09:32  
**Case presenter**  
T.S. O'Brien, London (GB)

09:32 - 09:42  
**Urologist in the dock**  
V. Matveev, Moscow (RU)

09:42 - 09:52  
**Cross examination**  
B. Leigh, London (GB)

09:52 - 10:00  
**Discussion**
Hot topics in andrology

Plenary Session 02

Location: Room Copenhagen, North Hall (Level 1)

Chairs: F. Montorsi, Milan (IT)
H. Van Poppel, Leuven (BE)

Aims and objectives of this session
The aim of this session is to give the urologist insight into gold standards, controversies, and future developments within andrology. This plenary session will include state-of-the-art lectures from key opinion leaders in the field of andrology and will focus on the management of patients with erectile dysfunction, premature ejaculation, male infertility, and hypogonadism.

During the plenary sessions, French and Spanish translation will be provided. Please collect your headset in the session room prior to the start of the session and return it after the session.

Meet the speakers of the plenary session:
Delegates are able to meet the speakers of the plenary session immediately at the end of the session in the foyer of the Room Copenhagen (North Hall, Level 1). Do not miss this opportunity to meet and greet the speakers and to consult them for any questions you may have.

08:30 - 08:45
State-of-the-art lecture Testosterone therapy in men with prostate cancer
P.B. Ostergren, Copenhagen (DK)

08:45 - 09:00
State-of-the-art lecture Scrotal pain: The optimal treatment algorithm
Y. Reisman, Amstelveen (NL)

09:00 - 09:15
State-of-the-art lecture Penile implants in Peyronie’s disease and priapism: When and how?
D.J. Ralph, London (GB)

09:15 - 09:30
State-of-the-art lecture From impaired testicular development to poor male reproductive function
U.N. Joensen, Copenhagen (DK)

09:30 - 09:45
State-of-the-art lecture Is every man fertile?
M. Shabbir, London (GB)

09:45 - 10:00
State-of-the-art lecture Male contraception: Where are we going?
F. Fusco, Napoli (IT)
Special session of the EAU History Office

Aims and objectives of this session
This session is divided in two parts. The first part deals with the evolution of British Urology, presenting interesting highlights of the long history of Urology in the United Kingdom. The second part will discuss some important aspects of Urology in Nazi-occupied Europe.

08:30 - 08:35
Welcome and introduction
P.E. Van Kerrebroeck, Maastricht (NL)
P.M. Thompson, London (GB)

08:35 - 10:35
The evolution of British urology
Moderators:
P.M. Thompson, London (GB)
P.E. Van Kerrebroeck, Maastricht (NL)

08:35 - 08:55
From stonecutters to science: The early days in the evolution in British urology
P. Kumar, Coventry (GB)

08:55 - 10:15
Sir Henry Thompson, the first British urologist
P.M. Thompson, London (GB)

09:15 - 09:35
St Peters Hospital, the first urology Hospital
P. Worth, Broxbourne (GB)

09:35 - 09:55
Peter Freyer, the first leader of British urology
M. Dinneen, London (GB)

09:55 - 10:15
Terrence Millin, his impact on British urology
J.C. Goddard, Leicester (GB)

10:15 - 10:35
The role of the RSM and BAUS in the development of British urology
R. Kirby, London (GB)

10:35 - 11:30
Research Project: Urology under the Swastika
Moderators:
D. Schultheiss, Giessen (DE)
P.E. Van Kerrebroeck, Maastricht (NL)

10:35 - 11:05
Urology under the Swastika: A global issue
D. Schultheiss, Giessen (DE)

11:05 - 11:30
Urology under the Swastika: The British perspective
P. Weindling, Oxford (GB)
ESU/ESFFU Hands-on Training Course in OnabotulinumtoxinA administration for OAB
HOT15

Location: Room Europe, Exhibition Hall (Level 1)

Chair: H. Hashim, Bristol (GB)

Aims and objectives of this session
Botulinum toxin type A administration in Urology has become common practice over the last two decades. Following the completion of Phase 3 registration trials in OAB, OnabotulinumtoxinA received marketing approval for this indication and now has a standardised injection paradigm. This course is procedure-focused, and will teach attendees the practicalities of OnabotulinumtoxinA administration through short lectures, videos and hands-on demonstrations using bladder models. Attendees will learn how to reconstitute the product and see different types of equipment available.

Target audience: For all participants with an interest in OnabotulinumtoxinA administration for OAB

R. Inman, Sheffield (GB)
M.S. Rahnama'i, Heerlen (NL)
A. Sahai, London (GB)
ESU/ERUS Hands-on Training Course in Robotic surgery - intro
HOT21

<table>
<thead>
<tr>
<th>Saturday, 25 March</th>
<th>09:30 - 11:00</th>
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<tbody>
<tr>
<td>Location:</td>
<td>Room Asia, Exhibition Hall (Level 1)</td>
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<tr>
<td>Chair:</td>
<td>M. Naudin, Hyon (BE)</td>
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**Aims and objectives of this session**
The European School of Urology (ESU) and the EAU Robotic Urology Section (ERUS) offer an intensive Hands-on Training course. We will provide training using simulators. The main aims of this 90 minutes course are:
- improving the participants' control-skills and hand-eye-coordination, as well as an objective benchmarking of console performance and an introduction into standardized surgical steps in robot-assisted procedures.

**Aims and objectives**
Improve your robotic surgery skills in the following areas:
- Endowrist manipulation
- Camera Control
- 3rd Arm Control
- Needle Placement and Driving
- Suturing and Knot Tying

A.E. Canda, Ankara (TR)
ESU/ESFFU Hands-on Training Course in Urodynamics
HOT05

**Location:** Room North America, Exhibition Hall (Level 1)

**Chair:** G. Van Koeveringe, Maastricht (NL)

**Aims and objectives of this session**
This course aims to provide a practical course offering an interactive “hands-on” environment for doctors, nurses and technicians to improve their skills in urodynamics.

**Course description:**
- Plenary Session: How to perform CMG, VCMG, AmbCMG, UPP and RLPP
- Station 1: Urodynamics: The principles of pressure and flow measurements. The limitation and advantages of each approach, potential artefacts and their mitigations will also be discussed.
- Station 2: Male case studies: Characteristic traces of filling voiding and voiding phase traces as well as fluoroscopy images of outlet obstruction.
- Station 3: Female case studies: Characteristic filling, voiding and voiding phase traces as well as fluoroscopy images of outlet obstruction and with emphasis on the assessment of stress urinary incontinence.
- Station 4: Neuropathic case studies: Special considerations of performing urodynamics in this cohort as well as characteristic traces and images will be discussed.

**Target audience:** For all participants with an interest in Urodynamics

E. Finazzi Agrò, Rome (IT)
R. Kirschner-Hermanns, Aachen (DE)
T. Mckinney, Fort Lauderdale (US)
U. Mehnert, Zurich (CH)
P.F.W.M. Rosier, Nijmegen (NL)
E. Solomon, London (GB)
ESU/ESUT Hands-on Training Course in Thulium laser for vaporesection and Holmium laser for laser lithotripsy

HOT39

Location: Room Africa, Exhibition Hall (Level 1)

Chair: G. Muto, Roma (IT)

Aims and objectives of this session
Aims and objectives for the Vaporesection and Vaporization of BPH training:
• The trainee will understand the tissue vaporization effect by the Thulium 2 micron continuous wave laser, the limited depth of tissue damage and how to vaporize and to perform a cut in tissue.
• The trainee is challenged to introduce the laser resectoscope into the artificial organ of the training device, maneuver the resectoscope in the artificial prostatic urethra and manage to vaporize and cut tissue samples.

Aims and objectives for Holmium laser lithotripsy:
• the fragmentation effect on artificial stones by the Holmium laser at different laser settings and the importance of the fibre position with respect to the stone,
• the handling of rigid and flexible ureterorenoscopes,
• importance and influence of the irrigation management.

H-O. Teichmann, Kathlenburg Lindau (DE)
M. Oelke, Hanover (DE)
J-T. Klein, Ulm (DE)
ESU/ESUT Hands-on Training Course in Basic laparoscopy

Location: Room South America, Exhibition Hall (Level 1)

Saturday, 25 March 09:45 - 10:45

Aims and objectives of this session
• You will improve your laparoscopic skills such as depth perception and bimanual dexterity

Course description:
In this course basic laparoscopic and suturing skills can be learned and trained. Psychomotor skills such as depth perception and bimanual dexterity are trained by the validated exercises of the European Basic Laparoscopic Urological Skills (E-BLUS) training programme. Experienced laparoscopist-tutors will guide you to master such basic laparoscopy skills as instrument handling, pattern cutting and intracorporal suturing. This course can be used as an additional training to prepare for the E-BLUS examination. Finally, all remaining questions can be answered and discussed with all tutors including the demonstration of tips and tricks.

Target audience: Urologists with a basic level in laparoscopy

F. Greco, Crotone (IT)
G. Hellawell, London (GB)
P. Kallidonis, Patras (GR)
L. Osório, Porto (PT)
G. Pini, Milano (IT)
T. Tokas, Hall In Tirol (AT)
D. Veneziano, Reggio Calabria (RC) (IT)
B.S.E.P. Van Cleynenbreugel, Leuven (BE)
Kidney transplant and urological cancer
Meeting of the EAU Section of Transplantation Urology (ESTU) in cooperation with the EAU Section of Oncological Urology (ESOU)

Saturday, 25 March
10:00 - 14:00

Location: Room Berlin, North Hall (Level 1)
Chairs: M. Brausi, Modena (IT)
E. Lledó García, Madrid (ES)

Aims and objectives of this session
Malignancy has become one of the three major causes of death after transplantation in the past decade and is thus increasingly important in all organ transplant programs. The objective of this session is to update real incidence and therapeutic aspects of urological cancers in both candidates and kidney transplant receptors.

10:00 - 10:05 Welcome and introduction
M. Brausi, Modena (IT)
E. Lledó García, Madrid (ES)

10:05 - 10:40 Prostate cancer in donors and KT candidates

Moderator: P. Ditonno, Bari (IT)

10:05 - 10:15 Screening of prostate cancer in donors: When?
A. Chkhotua, Tbilisi (GE)

10:15 - 10:25 The receptor: Time to wait after the diagnosis and treatment. Any place for observational management?
J.D.J.M. Branchereau, Nantes (FR)

10:25 - 10:35 Main surgical considerations in pre-transplant treatment of prostate cancer
A. Breda, Barcelona (ES)

10:35 - 10:40 Conclusions

10:40 - 11:15 Prostate cancer in KT receptors

Moderator: F.J. Burgos Revilla, Madrid (ES)

10:40 - 10:50 PSA screening in KT recipients
A.J. Figueiredo, Coimbra (PT)

10:50 - 11:00 Main surgical considerations in radical prostatectomy in KT receptors
X.P.C. Tillou, Caen (FR)

11:00 - 11:10 Role of focal therapy in KT receptors
J.I. Martinez Salamanca, Madrid (ES)

11:10 - 11:15 Conclusions
### EAU London 2017

<table>
<thead>
<tr>
<th>Time</th>
<th>Topic</th>
<th>Moderator</th>
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<tbody>
<tr>
<td>11:15 - 11:35</td>
<td>Oligometastatic prostate cancer in ESRD and KT patients</td>
<td>C. Hernández Fernández, Madrid (ES)</td>
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<td>M. Brausi, Modena (IT)</td>
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<td>11:35 - 11:55</td>
<td>Key technical aspects in the surgical approach of big retroperitoneal masses with vascular invasion</td>
<td>F.J. González Garcia, Madrid (ES)</td>
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<td>G. Ciancio, Miami (US)</td>
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<td>11:55 - 12:05</td>
<td>Special considerations in immunosuppressive protocols in KT patients with urological tumours</td>
<td>F. Kleinclauss, Besançon (FR)</td>
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<td>K. Budde, Berlin (DE)</td>
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<tr>
<td>12:05 - 12:30</td>
<td>Renal cancer</td>
<td>J.D. Olsburgh, London (GB)</td>
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<td>12:05 - 12:15</td>
<td>How to deal with the small tumour in kidney donors?</td>
<td>M. Musquera Felip, Barcelona (ES)</td>
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<td>12:15 - 12:25</td>
<td>Management of kidney graft tumours in KT recipients: Sparing treatment versus radical surgery - Key aspects and indications</td>
<td>V. Hevia Palacios, Madrid (ES)</td>
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<td>12:25 - 12:30</td>
<td>Conclusions</td>
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<td>12:30 - 13:05</td>
<td>Urothelial cancer</td>
<td>J.A. Witjes, Nijmegen (NL)</td>
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<td>12:30 - 12:40</td>
<td>An algorithm of management of non-muscle invasive urothelial cancer in kidney transplant receptors</td>
<td>O. Rodriguez Faba, Barcelona (ES)</td>
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<tr>
<td>12:40 - 12:50</td>
<td>Management of muscle invasive urothelial cancer in kidney transplant receptors: Key aspects</td>
<td>J. Palou, Barcelona (ES)</td>
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<td>12:50 - 13:00</td>
<td>ESRD patient with history of urothelial cancer: Criteria to access the transplant waiting-list</td>
<td>R. Boissier, Marseille (FR)</td>
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<tr>
<td>13:00 - 13:05</td>
<td>Conclusions</td>
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</table>
| 13:05 - 13:20 | Presentation of the collaboration project for international specialisation in kidney transplant: ESTU-EAU and Jackson Memorial Hospital (Miami, USA)  
G. Guerra, Miami (US)  
E. Lledó García, Madrid (ES) |
| 13:20 - 13:30 | ESTU Research Grant Delivery Act                                      |
|             | E. Lledó García, Madrid (ES)                                           |
| 13:30 - 13:40 | Presentation of the Renal Transplant Textbook (ESTU-EAU)              |
|             | A.J. Figueiredo, Coimbra (PT)                                          |
|             | E. Lledó García, Madrid (ES)                                           |
| 13:40 - 13:50 | René Küss Lecture: De novo functional renal graft carcinomas - Are they a different entity |
|             | X.P.C. Tillou, Caen (FR)                                               |
| 13:50 - 13:55 | Rene Küss Award 2017                                                  |
|             | E. Lledó García, Madrid (ES)                                           |
| 13:55 - 14:00 | Conclusions                                                           |
|             | M. Brausi, Modena (IT)                                                |
|             | E. Lledó García, Madrid (ES)                                           |
Aims and objectives of this session
Infections have acute and chronic sequelae. In the acute phase, antibiotic resistance is one of the major problems in patient care. The spectrum ranges from benign localised infections to life-threatening sepsis with organ dysfunction.
In chronic infections there is a significant overlap between infections and andrological diseases, which will be addressed in this ESAU/ESIU joint meeting. In addition, selected andrological urology topics concerning the fields of erectile dysfunction and male infertility, will be discussed. Furthermore, recent news from andrology and EAU guidelines updates from urogenital infections will be presented.
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<tr>
<th>Time</th>
<th>Session</th>
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<tbody>
<tr>
<td>11:30 - 12:20</td>
<td>Male infertility and sexual dysfunction</td>
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<td>Moderators: R. Bartoletti, Pisa (IT)</td>
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<td>A. Giwercman, Malmö (SE)</td>
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<td>11:30 - 11:45</td>
<td>The immunological basis of Peyronie's disease</td>
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<td>D.J. Ralph, London (GB)</td>
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<td>11:45 - 12:00</td>
<td>Is there a cause-effect mechanism between varicocele and male infertility?</td>
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<td>F. Fusco, Napoli (IT)</td>
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<td>12:00 - 12:15</td>
<td>Sexual dysfunction in male cancer survivors: The role of surgical treatment</td>
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<td>A. Kadioglu, Istanbul (TR)</td>
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<td>12:15 - 12:20</td>
<td>Discussion</td>
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<td>12:20 - 13:15</td>
<td>Urosepsis and its consequences</td>
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<td>Moderators: T. Perepanova, Moscow (RU)</td>
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<td>A. Salonia, Milan (IT)</td>
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<tr>
<td>12:20 - 12:35</td>
<td>Epidemiology of urosepsis</td>
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<td>Z. Tandoğdu, Newcastle Upon Tyne (GB)</td>
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<td>12:35 - 12:50</td>
<td>Definition and pathophysiology of sepsis/urosepsis</td>
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<td>S.E. Geerlings, Amsterdam (NL)</td>
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<td>12:50 - 13:05</td>
<td>Current management of urosepsis</td>
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<td>F. Bruyere, Tours (FR)</td>
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<td>13:05 - 13:15</td>
<td>Discussion</td>
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<td>13:15 - 13:35</td>
<td>Recent news from andrology (snapshots)</td>
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<td>Moderators: S.S. Minhas, London (GB)</td>
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<td>P. Tenke, Budapest (HU)</td>
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<tr>
<td>13:15 - 13:25</td>
<td>Infertility</td>
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<td>P. Verze, Naples (IT)</td>
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<td>13:25 - 13:35</td>
<td>Erectile dysfunction and penile surgery</td>
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<td>Z. Kopa, Budapest (HU)</td>
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<td>Moderators: G. Bonkat, Basel (CH)</td>
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<td>M. Dinkelman-Smit, Breda (NL)</td>
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<tr>
<td>13:35 - 13:45</td>
<td>Current management of urethritis</td>
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</tbody>
</table>
13:45 - 13:55  
**Antibiotic prophylaxis in prostate biopsy**  
T. Cai, Trento (IT)  

13:55 - 14:00  
**Closing remarks**  
N. Sofikitis, Ioannina (GR)  
F.M.E. Wagenlehner, Giessen (DE)
ESU Hands-on Training Course in Non-technical skills
HOT31

Location: Hands-on Training Area, Exhibition Hall (Level 1)

Chairs: K. Ahmed, London (GB)
J.W. Brewin, Salisbury (GB)

Aims and objectives of this session
This course aims to introduce the concept of non-technical skills and provide an interactive “hands-on” environment to practicing urologists and residents-in-training, in the hope of improving and raising self-awareness for everyday operating room practice.

Course description:
The operating room is a complex and highly stressful environment that requires interaction between a large team to achieve successful outcomes for the patient. This requires not only effective procedure-specific technical skills, but also additionally a range of non-technical skills. The importance of non-technical skills is often overlooked but they are unfortunately a major cause of surgical error. Like technical skills, which are acquired over many years of practice and training, non-technical skills are not innate traits and must also be developed through training and experience. This course will serve to introduce practicing urologists to the concept of non-technical skills using an interactive full immersion simulation environment, developed by Kneebone et al. (Imperial College London), whilst undertaking common scenarios in urolithiasis. Participants will be evaluated by experts in surgical education and provided individual feedback with view for further self-improvement.

Supporting faculty:
H. Aya, London (GB)
A. Aydin, London (GB)
O. Brunckhorst, London (GB)
F. Dar, London (GB)
M. Husnain Iqbal, London (GB)
J. Moody, London (GB)
N. Raison, London (GB)

Target audience:
All urological surgeons and residents in training
From formation to removal: A comprehensive update of stone disease from different aspects

Meeting of the EAU Section of Urolithiasis (EULIS) in cooperation with the EAU Section of Uro-Technology (ESUT)

| Location: | Room Copenhagen, North Hall (Level 1) |
| Chair:    | K. Sarica, Istanbul (TR) |

**Aims and objectives of this session**

Modern management of stone disease has changed significantly, particularly in the last two decades, due to the rapid technological developments. A complete evaluation, appropriate preparation and close follow-up of every case has become more important in an attempt to bring patients to a stone-free status with minimal complications.

Minimally invasive procedures have gained more importance than ever but application of these procedures must proceed in a standardised manner, following an appropriate training program which will enable residents to shorten the learning curves. Moreover, the impact of stone disease itself (as well as the procedures performed) on the quality of life of patients, should be kept in mind during follow-up as well as management of particularly recurrent and complex cases.

Thus, in this EULIS session, in addition to taking a close look at recent developments (particularly on the pathophysiology and epidemiology of stone disease), we will try to focus on the importance of new treatment modalities and their possible effects on the changing concepts in both medical and surgical management of urolithiasis. This will be done largely with video presentations as presented by the experts in this specific field of urology.

<table>
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<tr>
<th>Time</th>
<th>Session</th>
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<tbody>
<tr>
<td>10:15</td>
<td>Welcome and introduction</td>
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<tr>
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<td>K. Sarica, Istanbul (TR)</td>
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<td>10:20</td>
<td>Etiopathogenesis and epidemiology of stone disease: An update</td>
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<td><strong>Moderators:</strong> D.J. Kok, Rotterdam (NL)</td>
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<td>J.M. Reis Santos, Lisbon (PT)</td>
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<td>R.J. Unwin, London (GB)</td>
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<tr>
<td>10:20</td>
<td>Etiopathogenesis of stone formation: An update in the era of endourological advancements</td>
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<td>H-G. Tiselius, Stockholm (SE)</td>
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<td>10:35</td>
<td>Epidemiology of stone disease: What has changed in the last 25 years?</td>
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<td>W. Robertson, Oxford (GB)</td>
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<td>10:50</td>
<td>The importance and quality of stone analysis in Europe</td>
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<td>R. Siener, Bonn (DE)</td>
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<td>11:05</td>
<td>Discussion</td>
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<td>11:15</td>
<td>Panel discussion: Nightmare cases in endourology</td>
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<td><strong>Moderator:</strong> T. Knoll, Sindelfingen (DE)</td>
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11:15 - 12:00  
**Panel:**  
S. Lahme, Pforzheim (DE)  
P.J.S. Osther, Fredericia (DK)  
A. Skolarikos, Athens (GR)

12:00 - 12:40  
**Video Session: Management of impacted upper ureteral stones - Which technique and why?**

**Moderators:**  
E. Montanari, Milan (IT)  
A. Papatsoris, Marousi - Athens (GR)  
O. Traxer, Paris (FR)

12:00 - 12:10  
**Antegrade percutaneous approach**  
A. Hoznek, Creteil (FR)

12:10 - 12:20  
**Semi-rigid and/or flexible URS**  
P.A. Geavlete, Bucharest (RO)

12:20 - 12:30  
**Laparoscopic ureterolithotomy**  
G. Wendt-Nordahl, Sindelfingen (DE)

12:30 - 12:40  
**Discussion**

12:40 - 12:45  
*“One more thing” - The EAU Patient Information App on urinary stones*  
T. Bach, Hamburg (DE)

12:45 - 13:15  
**Controversial issues in stone management**

**Moderators:**  
A.Y. Muslumanoglu, Istanbul (TR)  
I. Saltirov, Sofia (BG)  
M. Straub, Munich (DE)

12:45 - 12:55  
**The new anticoagulants in endourology: How do they allow a safe intervention?**  
H.-M. Fritsche, Regensburg (DE)

12:55 - 13:05  
**Cost-effectiveness of endourologic management of stones**  
W.L. Strohmaier, Coburg (DE)

13:05 - 13:15  
**Management of stent related problems**  
A. Trinchieri, Lecco (IT)

13:15 - 14:00  
**Training, assessment and follow-up in stone disease**

**Moderators:**  
K.H. Andreassen, Frederiksberg (DK)  
A. Szendrői, Budapest (HU)

13:15 - 13:30  
**Learning curves for urolithiasis surgery - What do we know so far?**  
K. Ahmed, London (GB)

13:30 - 13:45  
**Development of a master questionnaire for stone disease**  
T. Bach, Hamburg (DE)
How should we follow the patients after endourological management?
G. Gambaro, Rome (IT)

New treatment modalities and their impact on our current approaches

Moderators:
C.M. Scoffone, Torino (IT)
C. Türk, Vienna (AT)
G-H. Zeng, Guangzhou (CN)

Micro URS
J. Galan Llopis, Alicante (ES)

Robotic FURS
K. Sarica, Istanbul (TR)

Disposable URS
N.N-P. Buchholz, Dubai (AE)

Miniaturisation in PNL: How did it affect our approaches in stone treatment?
S. Al-Hayek, Cambridge (GB)

Announcements and final remarks
K. Sarica, Istanbul (TR)
**Critical review of robotic surgery in uro-oncology**

Meeting of the EAU Section of Oncological Urology (ESOU) in cooperation with the EAU Robotic Urology Section (ERUS) and with the ESSO, ESTRO, EUOG, EORTC GUCG and SUO

**Location:** Room Madrid, North Hall (Level 1)

**Chairs:**
- M. Brausi, Modena (IT)
- C-H. Rochat, Geneva (CH)

**Aims and objectives of this session**

This year ESOU and ERUS have decided to organize a joint meeting during the Annual EAU Congress. The main goals are to discuss in a very objective way the actuarial role of robotic surgery compared to standard approaches. The meeting will be characterised by debates between two experienced and well-known surgeons who will describe the surgical techniques that underlie the pros and contras of each technique. The topics that will be discussed are prostate cancer, radical prostatectomy, bladder cancer, radical cystectomy, renal cancer and partial nephrectomy. Outcomes, patients’ quality of life and costs of each procedure will be elucidated and discussed. The interaction with the audience will be prioritised. A final summary will conclude the session.

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<thead>
<tr>
<th>Time</th>
<th>Session</th>
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<td>10:15</td>
<td>The European Society of Surgical Oncology (ESSO)</td>
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<td>10:15</td>
<td>Lymphadenectomy in uro-oncological pelvic surgery</td>
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<td>10:35</td>
<td>F. Lista Mateos, Madrid (ES)</td>
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<td>10:40</td>
<td>Discussion</td>
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<td>10:40</td>
<td>The European Organisation for Research and Treatment of Cancer Genito-Urinary Cancer Group (EORTC GUCG)</td>
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<td>10:40</td>
<td>The role of surgery in metastatic renal cancer</td>
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<td>11:00</td>
<td>A. Bex, Amsterdam (NL)</td>
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<td>11:05</td>
<td>Discussion</td>
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<td>11:05</td>
<td>The European SocieTy for Radiotherapy &amp; Oncology (ESTRO)</td>
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<td>11:05</td>
<td>Bladder sparing procedures for muscle invasive bladder cancer: A real advancement?</td>
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<td>A. Kiltie, Oxford (GB)</td>
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<td>Discussion</td>
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<td>11:30</td>
<td>The European Uro-Oncology Group (EUOG)</td>
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<td>11:30</td>
<td>Circulating tumour cells in prostate cancer: A marker?</td>
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<td>S. Osanto, Leiden (NL)</td>
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<td>11:50 - 11:55</td>
<td>Discussion</td>
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<td>P. Walsh, Baltimore (US)</td>
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<td>12:15 - 12:35</td>
<td>Society for Urologic Oncology (SUO)</td>
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<td>12:15 - 12:35</td>
<td>The argument for surgical management of high risk prostate cancer</td>
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<td>C.P. Evans, Sacramento (US)</td>
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<td>12:35 - 14:45</td>
<td>Critical review of robotic surgery in URO-Oncology: ESOU-ERUS</td>
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<td>perspectives</td>
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<td>12:35 - 13:10</td>
<td>Debate on prostate cancer surgery: Radical prostatectomy should be</td>
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<td>performed with robot</td>
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<td>12:35 - 12:50</td>
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<td>H.G. Van Der Poel, Amsterdam (NL)</td>
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<td>S. Joniau, Leuven (BE)</td>
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<td>13:05 - 13:10</td>
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<td>13:10 - 13:45</td>
<td>Debate on bladder cancer surgery: Open radical cystectomy is still</td>
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<td>M. Brausi, Modena (IT)</td>
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<td>13:25 - 13:40</td>
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<td>N.P. Wiklund, Stockholm (SE)</td>
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<td>13:40 - 13:45</td>
<td>Discussion</td>
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<td>13:45 - 14:20</td>
<td>Debate on kidney cancer: Partial nephrectomy/tumour enucleation is</td>
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<td>better done by robot</td>
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<td>A. Larcher, Milan (IT)</td>
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<td>14:00 - 14:15</td>
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<td>H. Van Poppel, Leuven (BE)</td>
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<td>14:15 - 14:20</td>
<td>Discussion</td>
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<td>14:20 - 14:40</td>
<td>Quality of life after robotic, lap and open surgery: Real different?</td>
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<td>M. Graefen, Hamburg (DE)</td>
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<td>Time</td>
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<tr>
<td>14:35 - 14:40</td>
<td>Discussion</td>
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<tr>
<td>14:40 - 14:45</td>
<td>Closing remarks</td>
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</tbody>
</table>
Aims and objectives of this session
The main aim of this session is to introduce ESRU, to present our projects and to announce our upcoming activities. ESRU is one of the most active working groups within the EAU and there are lots of issues to present during YUORDay Sessions. Also there will be specific presentations about YUO, YAU, EUSP, EBU and ESU. The lectures were especially designed for resident education. During YUORDay, there will be the Campbell Quiz and also awards. We invite all the residents and urologists to attend this fruitful program and join us to be informed about recent issues.

10:15 - 10:20
Introduction
S. Sarikaya, Ankara (TR)
J.P.M. Sedelaar, Nijmegen (NL)

10:20 - 11:00
What residents need to know about the EAU organisation
Moderators:
P. Panayotopoulos, Angers (FR)
A. Ürkmez, Istanbul (TR)

10:20 - 10:30
European Board of Urology (EBU)
J.D. Nawrocki, Brighton (GB)

10:30 - 10:40
European School of Urology (ESU)
J. Palou, Barcelona (ES)

10:40 - 10:50
Young Academics Urologist (YAU)
M.S. Silay, Istanbul (TR)

10:50 - 11:00
EAU Patient Information Project
M. Sochaj, Gorzow Wielkopolski (PL)

11:00 - 12:30
European Urology Scholarship Programme (EUSP)
Moderators:
V.G. Mirone, Naples (IT)
J.P.M. Sedelaar, Nijmegen (NL)

11:00 - 11:10
From resident to president: Developing a successful career
J.P.M. Sedelaar, Nijmegen (NL)

11:10 - 11:20
A great research opportunity for young urologists
M.J. Ribal, Barcelona (ES)
<table>
<thead>
<tr>
<th>Time</th>
<th>Session</th>
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<tbody>
<tr>
<td>11:20 - 11:30</td>
<td>Discussion</td>
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</tbody>
</table>
| 11:30 - 11:40 | How to write a successful European Urology Scholarship Programme (EUSP) application  
|               | J.A. Schalken, Nijmegen (NL)                                           |
| 11:40 - 11:50 | Experience of an Urology Scholarship Programme (EUSP) scholar          
|               | F. Castiglione, Cologno Monzese (IT)                                    |
| 11:50 - 12:00 | Discussion                                                              |
| 12:00 - 12:15 | Everything you always wanted to know about the European Urology Scholarship Programme (EUSP) (but were afraid to ask)  
|               | G. Patruno, Rome (IT)                                                   |
| 12:15 - 12:30 | Best Scholar Award Winner                                               
|               | V.G. Mirone, Naples (IT)                                                
|               | S. Joniau, Leuven (BE)                                                  |
| 12:30 - 13:15 | Simulation and training                                                 
|               | Moderators: P.B. Ostergren, Copenhagen (DK)                            
|               | M.E. Rodríguez Socarrás, Vigo (ES)                                     |
| 12:30 - 12:45 | Anatomy learning in urology                                             
|               | F. Dal Moro, Padova (IT)                                                |
| 12:45 - 13:00 | Simulation and new technologies                                          
|               | D. Veneziano, Reggio Calabria (RC) (IT)                                 |
| 13:00 - 13:15 | Future of training/residency in urology                                 
|               | L. Martínez-Piñeiro, Madrid (ES)                                        |
| 13:15 - 14:35 | Surgery: Tips and tricks                                                
|               | Moderators: D. Duijvesz, Rotterdam (NL)                                
|               | J.L. Vásquez Mendoza, Copenhagen (DK)                                  |
| 13:15 - 13:35 | En bloc transurethral resection of the bladder                          
|               | B. Malavaud, Toulouse (FR)                                              |
| 13:35 - 13:55 | Vesicoureteral reflux                                                   
|               | M.S. Silay, Istanbul (TR)                                               |
| 13:55 - 14:15 | How to handle iatrogenic lesions                                        
|               | V. Ficarra, Udine (IT)                                                  |
| 14:15 - 14:35 | Penile curvature                                                        
|               | D.J. Ralph, London (GB)                                                 |
| 14:35 - 15:15 | Translational medicine: From basics to clinical practice               |

Scientific Programme
14:35 - 14:55
**Epigenetic based prostate cancer markers: How far are we?**
J. Angulo Cuesta, Madrid (ES)

14:55 - 15:15
**Translating new erectile dysfunction therapies**
M. Albersen, Leuven (BE)

15:15 - 15:45
**Building up a career in urology**

15:15 - 15:25
**How to become a robotic surgeon?**
A. Mottrie, Aalst (BE)

15:25 - 15:35
**How to become an endourologist?**
O. Traxer, Paris (FR)

15:35 - 15:45
**How to grow big in urology?**
F.M.J. Debruyne, Arnhem (NL)

15:45 - 16:30
**Pros and cons: Controversies in urology**

15:45 - 16:00
**Partial nephrectomy in T2 tumours: Where is the limit?**
A.J. Figueiredo, Coimbra (PT)

16:00 - 16:15
**Immediate radical cystectomy for high-risk non-muscle invasive bladder cancer**
E. Xylinas, Paris (FR)

16:15 - 16:30
**MUS versus Colpo/AFS**
R. Hamid, London (GB)

16:30 - 17:00
**Campbell Quiz Challenge**

17:00 - 17:15
**Prizes and awards**
Biomarkers and tumour heterogeneity: Friends or enemies for differential therapy?

Joint meeting of the EAU Section of Urological Pathology (ESUP) and the EAU Section of Urological Research (ESUR)

Saturday, 25 March
10:15 - 14:00

Location: Room Paris, North Hall (Level 1)

Chairs: K. Junker, Homburg (DE)
R. Montironi, Ancona (IT)

Aims and objectives of this session
Major advances have been made in understanding the mechanisms of primary and acquired resistance to current agents in urogenital cancer, as well as in the identification and validation of relevant molecular targets. The integration of clinic-pathologic data with emerging techniques of molecular profiling-based treatment will represent the future of personalised therapeutic approach for urogenital cancer.

10:15 - 10:20 Welcome and introduction
K. Junker, Homburg (DE)

10:20 - 10:50 Biomarkers: Introduction
Moderators: L. Kiemeney, Nijmegen (NL)
R. Montironi, Ancona (IT)

10:20 - 10:35 Biomarkers: Definition, requirements, pitfalls
L. Kiemeney, Nijmegen (NL)

10:35 - 10:50 Best biomarkers in body fluids: CTC's, free DNA/RNA or exosomes?
S. Riethdorf, Hamburg (DE)

10:50 - 11:40 Bladder cancer
Moderators: M. Knowles, Leeds (GB)
A. Lopez-Beltran, Lisbon (PT)
A. Vlahou, Athens (GR)

10:50 - 11:00 Histopathological subtypes: Prognostic relevance
A. Lopez-Beltran, Lisbon (PT)

11:00 - 11:10 Basal/luminal signature: Identification of aggressive subtypes
Y. Allory, Creteil (FR)

11:10 - 11:20 Non-muscle invasive cancer: BCG therapy prediction
A.M. Kamat, Houston (US)

11:20 - 11:30 Muscle-invasive cancer: Can we predict the response to systematic therapy?
T. Powles, London (GB)

11:30 - 11:40 Introduction of new markers to clinical guidelines and practice: Requirements and roadmap
B.W.G. Van Rhijn, Amsterdam (NL)
<table>
<thead>
<tr>
<th>Time</th>
<th>Topic</th>
<th>Modera tors</th>
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<tbody>
<tr>
<td>11:40 - 12:30</td>
<td>Kidney cancer</td>
<td>Y. Allory, Creteil (FR)</td>
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<td>V. Ficarra, Udine (IT)</td>
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<td>H. Moch, Zurich (CH)</td>
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<td>11:40 - 11:50</td>
<td>Relevance of histopathological subtypes: Which are the bad guys?</td>
<td>H. Moch, Zurich (CH)</td>
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<tr>
<td>11:50 - 12:00</td>
<td>Prognostic markers: Ready to use?</td>
<td>K. Junker, Homburg (DE)</td>
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<td>12:00 - 12:10</td>
<td>Predictive markers</td>
<td>E. Oosterwijk, Nijmegen (NL)</td>
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<td>12:20 - 12:30</td>
<td>Heterogeneity: The urologist's view</td>
<td>V. Ficarra, Udine (IT)</td>
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<td>12:30 - 13:00</td>
<td>Penile and testicular cancer</td>
<td>G. Netto, Baltimore (US)</td>
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<td>S. Horenblas, Amsterdam (NL)</td>
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<td>12:30 - 12:40</td>
<td>Biomarkers for testicular cancer: What we have and what we need</td>
<td>L. Looijenga, Rotterdam (NL)</td>
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<tr>
<td>12:40 - 12:50</td>
<td>The new 2016 WHO classification of penile cancer</td>
<td>M. Colecchia, Milan (IT)</td>
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<tr>
<td>12:50 - 13:00</td>
<td>Penile cancer: What we need and what we have - The urologist's view</td>
<td>S. Horenblas, Amsterdam (NL)</td>
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<tr>
<td>13:00 - 13:50</td>
<td>Prostate cancer</td>
<td>H.Y. Leung, Glasgow (GB)</td>
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<td>R. Montironi, Ancona (IT)</td>
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<td>G. Van Der Pluijm, Leiden (NL)</td>
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<td>13:00 - 13:10</td>
<td>Implementation of the new 'prostate cancer grading system'</td>
<td>R. Montironi, Ancona (IT)</td>
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<td>13:20 - 13:30</td>
<td>Tumour heterogeneity: The urologist's view</td>
<td>A. Bjartell, Malmö (SE)</td>
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<td>Time</td>
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<td>13:50</td>
<td>Conclusion</td>
<td>R. Montironi, Ancona (IT)</td>
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To be confirmed
How to manage metastatic castration-resistant prostate cancer in an office setting

Meeting of the EAU Section of Urologists in Office (ESUO)

Saturday, 25 March
10:15 - 13:15

Location: Room Amsterdam, North Hall (Level 1)

Chairs: P-A. Abrahamsson, Malmö (SE)
        H. Brenneis, Pirmasens (DE)
        H. Haas, Heppenheim (DE)

Aims and objectives of this session
Do patients with mHR prostate cancer have to be treated exclusively in the hospital? This session aims to show that a safe and effective treatment is possible in an office setting too. Two experienced office urologists discuss cases together with a clinical specialist and the audience. This represents the first session of the newly formed EAU Section of Urologists in Office (ESUO). Based on previous experience with such expert courses at national meetings, the ESUO wants to demonstrate the value of such workshops on an European level.

10:15 - 13:15

Expert: P-A. Abrahamsson, Malmö (SE)
Revisiting management of LUTS in neurogenic and non-neurogenic patients

Meeting of the EAU Section of Female and Functional Urology (ESFFU)

Saturday, 25 March
10:15 - 14:00

Location: Room Vienna, North Hall (Level 1)
Chair: F. Cruz, Porto (PT)

Aims and objectives of this session
LUTS are highly prevalent in both genders above 40 years of age. In the western population more than 70% of males and females report at least one lower urinary tract symptom and half is considerably bothered by them.

LUTS are even more common among patients with neurogenic bladder dysfunctions, in whom bladder control assumes one of the most important objectives necessary to improve quality of life. The last decade witnessed the introduction of new forms of treatment for LUTS, either in neurogenic and non-neurogenic patients, the outcomes of which need now critical revaluation.

10:15 - 10:20 Welcome and introduction
F. Cruz, Porto (PT)

10:20 - 11:35 Management of common neuro-urological problems

Moderators: D.J.M.K. De Ridder, Leuven (BE)
H. Madersbacher, Innsbruck (AT)

10:20 - 10:35 LUTS in MS patients
E. Chartier-Kastler, Paris (FR)

10:35 - 10:50 LUTS in Parkinson's disease male
K-D. Sievert, Salzburg (AT)

10:50 - 11:05 LUTS in CVA patients
S. Arlandis Guzman, Valencia (ES)

11:05 - 11:20 LUTS in Alzheimer disease
M. Lazzeri, Florence (IT)

11:20 - 11:35 Discussion of clinical cases

D.J.M.K. De Ridder, Leuven (BE)
H. Madersbacher, Innsbruck (AT)

11:35 - 11:55 State-of-the-art lecture: Spinal cord regeneration and axon re-growth. Which options tested in the bench progressed into clinical trials?
T.M. Kessler, Zurich (CH)

11:55 - 12:15 ICS lecture: Underactive bladder: A clinical problem or a new research field?
E. Kocjanic, Chicago (US)
<table>
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<tr>
<th>Time</th>
<th>Session</th>
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<tr>
<td>12:15 - 12:30</td>
<td>Prize winner 5th international neuro-urology meeting</td>
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<tr>
<td>12:15 - 12:20</td>
<td>Introduction</td>
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<td>T.M. Kessler, Zurich (CH)</td>
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<td>12:20 - 12:30</td>
<td>Anti-Nogo-A antibodies as a potential causal treatment for neurogenic lower urinary tract dysfunction after spinal cord injury</td>
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<td>M.P. Schneider, Zürich (CH)</td>
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### LUTS

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<th>Time</th>
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<tr>
<td>12:30 - 14:00</td>
<td>LUTS</td>
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<td>Moderators:</td>
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<td></td>
<td>F.C. Burkhard, Berne (CH)</td>
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<td>S. Charalampous, Limassol (CY)</td>
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<td>12:30 - 12:45</td>
<td>What works and what does not work in the management of nocturia?</td>
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<td>K. Everaert, Ghent (BE)</td>
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<td>12:45 - 13:00</td>
<td>What is new in the management of BPS/IC?</td>
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<td>P.D. Santos de Oliveira, Porto (PT)</td>
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<tr>
<td>13:00 - 13:15</td>
<td>Do alpha-blockers relief benign prostatic obstruction or are they only good for LUTS improvement?</td>
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<td>Y. Igawa, Tokyo (JP)</td>
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<td>13:15 - 13:30</td>
<td>How I solve the early and late complications of Mid Urethral Slings (MUS)?</td>
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<td>T. Tarcan, Istanbul (TR)</td>
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<td>13:30 - 13:45</td>
<td>What does the evidence tell us about the use of urodynamics in females with SUI?</td>
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<td>E. Costantini, Perugia (IT)</td>
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<td>13:45 - 14:00</td>
<td>Urgency incontinence: Are all treatment options equally effective?</td>
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<td>H. Hashim, Bristol (GB)</td>
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<td>14:00 - 14:00</td>
<td>Closure of the meeting</td>
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<td>F. Cruz, Porto (PT)</td>
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# How to get the most out of prostate cancer imaging

Meeting of the EAU Section of Urological Imaging (ESUI) in cooperation with the EAU Section of Urological Research (ESUR) and the European Society of Nuclear Medicine (EANM)

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<thead>
<tr>
<th>Date</th>
<th>Time</th>
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<tr>
<td>Saturday, 25 March</td>
<td>10:15 - 14:00</td>
<td>Room London, North Hall (Level 1)</td>
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<td>Chair: J. Walz, Marseille (FR)</td>
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**Aims and objectives of this session**

The 2017 meeting of the ESUI addresses the hottest topic in urological imaging, that of prostate cancer imaging. The aim of the session is to provide an extensive and critical overview on the evolutions and developments in the different imaging tools available, such as multiparametric MRI and ultrasound-based imaging techniques. Important and essential issues such as standardisation and quality control as well as practical problems will be addressed. Moreover, current controversies will be explored and debated in point and counterpoint sessions followed by interactive discussions. Detailed knowledge of the performance and limitations of new imaging technologies seems mandatory when using them effectively and beneficially in clinical practice. At the end, the EAU prostate cancer guidelines will give their point of view on how imaging can be integrated into clinical practice without over stressing limited resources.

During the session, the prize giving ceremony for the 2017 ESUI vision award will be held, followed by the presentation of the awarded study. The aim of the ESUI Vision Award is to highlight the most innovative imaging study published during the last year in urology.

**Scientific Programme**

10:15 - 10:20

**Introduction**

J. Walz, Marseille (FR)

10:20 - 11:40

**Prostate cancer detection**

**Moderators:**
- B.M. Carey, Leeds (GB)
- B.A. Hadaschik, Essen (DE)
- T. Loch, Flensburg (DE)

10:20 - 10:28

**Controversies in prostate cancer detection - Multiparametric MRI is a must**

J.J. Futterer, Nijmegen (NL)

10:28 - 10:36

**Controversies in prostate cancer detection - Biparametric MRI is enough**

P.A. Pinto, Bethesda (US)

10:36 - 10:40

**Discussion**

10:40 - 10:48

**Alternatives to MRI: Where are we with ultrasound based imaging?**

G. Salomon, Hamburg (DE)

10:48 - 10:52

**Discussion**

10:52 - 11:00

**Lessons learned from mammography: The way to certification**

F. Gilbert, Cambridge (GB)

11:00 - 11:04

**Discussion**
11:04 - 11:12  To fuse or not to fuse: Is software fusion mandatory?  
C. Kastner, Cambridge (GB)

11:12 - 11:16  Discussion

11:16 - 11:24  Multiparametric ultrasound: Reality or fiction?  
H. Wijkstra, Amsterdam (NL)

11:24 - 11:28  Discussion

11:28 - 11:36  PI-RADS 3 lesion: Biopsy or not?  
V. Scattoni, Milano (IT)

11:36 - 11:40  Discussion

11:40 - 11:48  Controversies: What helps more to characterise the disease? - Imaging  
T. Maurer, Munich (DE)

11:48 - 11:56  Controversies: What helps more to characterise the disease? - Biomarkers and gen profiling  
G. Jenster, Rotterdam (NL)

11:56 - 12:00  Discussion

12:00 - 12:08  How to define ‘significant’ disease on targeted biopsy  
H.U. Ahmed, London (GB)

12:08 - 12:12  Discussion

12:12 - 12:20  PSMA at initial staging  
J. Bomanji, London (GB)

12:20 - 12:24  Discussion

12:24 - 12:32  EANM lecture: Is choline PET outdated?  
S. Fanti, Bologna (IT)

12:32 - 12:36  Discussion

12:36 - 12:46  ESUI Vision Award 2017
12:36 - 12:43

A Prospective Comparative Study of Color Doppler Ultrasound with Twinkling and Noncontrast Computerized Tomography for the Evaluation of Acute Renal Colic
B. Ali-El-Dein, Mansoura (EG)

12:43 - 12:46

Discussion

12:46 - 13:55

Active surveillance and curative treatment: Get the most out of imaging

Moderators:
M. Ritter, Mannheim (DE)
A. Villers, Lille (FR)
J. Walz, Marseille (FR)

12:46 - 12:54

Controversies - Focal therapy and the concept of the index lesion: Sense
J.J.M.C.H. De La Rosette, Amsterdam (NL)

12:54 - 13:02

Controversies - Focal therapy and the concept of the index lesion: Nonsense
A. Briganti, Milan (IT)

13:02 - 13:06

Discussion

13:06 - 13:14

When and how to include MRI into active surveillance protocols?
C.H. Bangma, Rotterdam (NL)

13:14 - 13:18

Discussion

13:18 - 13:26

Does imaging improve safety and efficacy of primary and salvage radiotherapy?
P. Ost, Ghent (BE)

13:26 - 13:30

Discussion

13:30 - 13:38

Does imaging improve surgery?
M. Graefen, Hamburg (DE)

13:38 - 13:42

Discussion

13:42 - 13:50

The EAU Guidelines Office point of view: How to get the most out of limited resources in prostate cancer imaging?
N. Mottet, Saint-Étienne (FR)

13:50 - 13:55

Discussion

13:55 - 14:00

Summary
J. Walz, Marseille (FR)
Advancements in genito-urinary reconstruction
Meeting of the EAU Section of Genito-Urinary Reconstructive Surgeons (ESGURS)

Saturday, 25 March
10:15 - 15:45

Location: Room Munich, North Hall (Level 1)
Chair: R. Djinovic, Belgrade (RS)

Aims and objectives of this session
Uro-Genital Reconstructive Surgery is still evolving through the world and did not achieve standard approach in treatment. During our Section Meeting we will try to present newest advancement by the top experts and to cover all fields of reconstructive urology – upper and lower tract, urethral, genital surgery, sex reassignment, incontinence, penile implant, but also to share experience in latest breakthrough – penile transplant. We hope that the program we made will be equally interesting to both beginners to learn basic techniques and experts to broaden their knowledge.

10:15 - 10:20
Welcome and introduction
R. Djinovic, Belgrade (RS)

10:20 - 10:50
Uro-genital congenital anomalies: Tips and tricks
Moderators: E. Kocjancic, Chicago (US)
I. Moncada, Madrid (ES)

10:20 - 10:30
Crippled penis post hypospadias: What can we do?
D.E. Andrich, Kingston upon Thames (GB)

10:30 - 10:40
Epispadias-extrophy complex in males: Genital and urinary tract reconstruction
R. Djinovic, Belgrade (RS)

10:40 - 11:00
Vaginal prolapse and pregnancy in extrophy patients
D.N. Wood, London (GB)

10:50 - 11:30
Anterior urethra reconstruction
Moderators: L. Martínez-Piñeiro, Madrid (ES)
O. Shenfeld, Jerusalem (IL)

10:50 - 11:00
BXO (Balanitis Xerotica Obliterans): Treatment of urethral stricture and external genitalia
E. Palminteri, Arezzo (IT)

11:00 - 11:10
Two-stage buccal mucosa urethroplasty: Reliable solution for pendular urethra strictures
A. Zhivov, Moscow (RU)

11:10 - 11:20
Urethral diverticula/fistula
M. Fisch, Hamburg (DE)

11:20 - 11:30
Bulbar urethroplasty: Where are we in 2017?
L. Martínez-Piñeiro, Madrid (ES)
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<tr>
<th>Time</th>
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<tbody>
<tr>
<td>11:30 - 12:10</td>
<td>Posterior urethra reconstruction&lt;br&gt;&lt;br&gt;<strong>Moderators:</strong> D.E. Andrich, Kingston upon Thames (GB) R. Dahlem, Hamburg (DE)</td>
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<tr>
<td>11:30 - 11:40</td>
<td>Post TURP membranous urethra stricture: Sphincter-preserving technique&lt;br&gt;R. Gomez, Santiago (CL)</td>
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<td>11:50 - 12:00</td>
<td>New generation urethral and ureteral stents: The best solution for the worst scenarios?&lt;br&gt;O.R. Sedigh, Torino (IT)</td>
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<tr>
<td>12:00 - 12:10</td>
<td>Recto-urethral fistula after radiotherapy for prostate cancer&lt;br&gt;L. Gómez Pérez, San Juan De Alicante (ES)</td>
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<tr>
<td>12:10 - 12:45</td>
<td>Penile transplant: Genito-urinary trauma/Penile cancer&lt;br&gt;&lt;br&gt;<strong>Moderators:</strong> R. Djinovic, Belgrade (RS) I. Moncada, Madrid (ES) D.J. Ralph, London (GB) L. Schechter, Morton Grove, IL (US)</td>
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<tr>
<td>12:10 - 12:20</td>
<td>Penile transplant: Evolution of vascularised composite&lt;br&gt;B. Bojovic, Boston (US)</td>
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<td>12:20 - 12:25</td>
<td>Discussion</td>
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<tr>
<td>12:25 - 12:35</td>
<td>Battlefield injuries: Reconstructing of the blast injured perineum&lt;br&gt;P. Anderson, Dorridge (GB)</td>
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<tr>
<td>12:35 - 12:45</td>
<td>Pelvic fracture with bladder neck/posterior urethra injuries&lt;br&gt;A.R. Mundy, London (GB)</td>
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<tr>
<td>12:45 - 13:25</td>
<td>Upper tract reconstruction&lt;br&gt;&lt;br&gt;<strong>Moderators:</strong> S. Deger, Ostfildern (DE) M. Gallucci, Rome (IT)</td>
</tr>
<tr>
<td>12:45 - 12:55</td>
<td>Intra-corporeal urinary diversions: Technique, outcomes and robotic management of late complications&lt;br&gt;G. Simone, Rome (IT)</td>
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<tr>
<td>12:55 - 13:05</td>
<td>Robotic/laparoscopic ureteral reimplantation versus open ureteral reimplantation&lt;br&gt;M.S. Silay, Istanbul (TR)</td>
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<td>13:05 - 13:15</td>
<td>Continent urinary diversion for severe bladder dysfunction&lt;br&gt;M.A.B. Fahmy, Cairo (EG)</td>
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<td>13:15 - 13:25</td>
<td>Neobladder complications: How to solve them?&lt;br&gt;V. Pansadoro, Rome (IT)</td>
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<td>Time</td>
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<td>13:25 - 14:05</td>
<td>Transgender surgery</td>
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<td>after primary surgery</td>
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<td>13:35 - 13:45</td>
<td>The use of ileum in case of neovaginal</td>
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<td>stenosis: Functional outcome</td>
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<td>13:45 - 13:55</td>
<td>F2M – Radial forearm flap total</td>
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<td>phalloplasty: Plastic surgeon’s point</td>
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<td>of view</td>
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<td>13:55 - 14:05</td>
<td>Management of neo-urethral</td>
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<td>complications after total phalloplasty</td>
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<td>14:05 - 14:55</td>
<td>Penile implant surgery</td>
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<td>14:05 - 14:15</td>
<td>Real penile enlargement with</td>
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<td>penile implant</td>
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<td>14:15 - 14:25</td>
<td>Glans necrosis post penile prosthesis:</td>
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<td></td>
<td>What to do?</td>
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<tr>
<td>14:25 - 14:35</td>
<td>Prosthesis infection: Remove it or</td>
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<tr>
<td></td>
<td>not?</td>
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<tr>
<td>14:35 - 14:45</td>
<td>Penile implant: Reservoir problems</td>
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<tr>
<td>14:45 - 14:55</td>
<td>Penile implant in unusual cases:</td>
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<td>How to place it properly</td>
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<td>14:55 - 15:25</td>
<td>Peyronies surgery: Tips and tricks</td>
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<td>fail so often?</td>
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<td>15:05 - 15:15</td>
<td>Peyronies treatment: Tunical</td>
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<td>expansion with implant without</td>
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<td>grafting</td>
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<td>versus grafting</td>
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</tbody>
</table>

Moderators:  I. Moncada, Madrid (ES)
             J.N. Tomada Marques, Porto (PT)

15:25 - 15:35  Comparison of AUS: Advantages and disadvantages
T.S. Pottek, Hamburg (DE)

15:35 - 15:45  Post-prostatectomy incontinence with bulbar/panurethral stricture with: How to treat?
R. Dahlem, Hamburg (DE)
Technology at its best
Meeting of the EAU Section of Uro-Technology (ESUT), in cooperation with the EAU Robotic Urology Section (ERUS) and the EAU Section of Urolithiasis (EULIS)

Saturday, 25 March
10:30 - 17:45

Location: eURO Auditorium (Level 0)
Chair: E. Liatsikos, Patras (GR)

Aims and objectives of this session
Following a more than 10-year tradition of live-surgery sessions, the EAU Section of Uro-Technology (ESUT) presents an ambitious programme focusing on novel techniques in percutaneous, endourological, laparoscopic and robotic-assisted procedures. This year, we want to focus on novel technology improving the performance of video-assisted surgery and diagnostics in all fields of Endourology. This session is conducted in collaboration with the EAU Robotic Urology Section (ERUS) and the EAU Section of Urolithiasis (EULIS). In the laparoscopic and robot-assisted cases, we will focus on the developments of imaging as well as new instruments and devices (laser), improving the ergonomics of laparoscopy and endourology. The latest digital developments for flexible endoscopy of the upper urinary tract for diagnosis and treatment of tumours and calculi are demonstrated.

ESUT faculty consists of internationally well-known experts serving as surgeons and moderators. The different surgical procedures will be transmitted from Guy’s Hospital in London in high definition and 3D quality. Traditionally, the format of ESUT Live Surgery will allow all delegates to directly communicate with the surgeons to ask questions and to discuss every aspect of the procedure. Moreover, the ESUT session will be available online.

10:30 - 17:45
Live broadcasts from Guy’s Hospital, London (UK)

Coordinators at eURO Auditorium
A. Breda, Barcelona (ES)
A.J. Gross, Hamburg (DE)

Coordinator at Guy’s Hospital, London (UK)
B.J. Challacombe, London (GB)

Patient Advocates
C.T. Brown, London (GB)
M. Brown, Ardross (AU)
R. Catterwell, London (GB)
A. Fernando, London (GB)
J.M. Glass, London (GB)
M.S. Khan, London (GB)
S. Malde, London (GB)
K. Thomas, London (GB)
R. Thurairaja, London (GB)
P.W. Lam, London (GB)

Endourology coordinator
M. Bultitude, London (GB)

Laparoscopic and robotic coordinator
P. Cathcart, London (GB)

10:30 - 10:35
Welcome and introduction
<table>
<thead>
<tr>
<th>Time</th>
<th>Session</th>
<th>Speakers</th>
</tr>
</thead>
<tbody>
<tr>
<td>10:35 - 10:40</td>
<td>Ethics of Live-Surgery: Cases from last year</td>
<td>M. Straub, Munich (DE)</td>
</tr>
</tbody>
</table>
|           |                                  | A. Breda, Barcelona (ES)                           
|           |                                  | R.E. Sanchez-Salas, Paris (FR)                     
|           |                                  | P. Tenke, Budapest (HU)                            
|           |                                  | P.J. Zondervan, Amsterdam (NL)                     |
| 10:40 - 11:00 | 3D-4K Nerve sparing extraperitoneal radical prostatectomy | J-U. Stolzenburg, Leipzig (DE)                    |
| 11:00 - 11:20 | Robotic neurosafe radical prostatectomy | A. Haese, Hamburg (DE)                            |
| 11:20 - 11:40 | Robotic radical cystectomy using Da Vinci Si | N.P. Wiklund, Stockholm (SE)                      |
| 11:40 - 11:50 | Bipolar bladder tumour resection with PDD | J. Rassweiler, Heilbronn (DE)                     |
| 11:50 - 12:05 | MIP: A novel concept of PCNL  | M. Bultitude, London (GB)                          
|           |                                  | H. Ratan, Nottingham (GB)                          |
| 12:05 - 12:20 | Supine Endoscopic Combined Intrarenal Surgery (ECIRS) | S.J. Gordon, Epsom, Surrey (GB)                   
|           |                                  | B. Somani, Southampton (GB)                        |
| 12:20 - 14:05 | Live-Surgery Part II           | A.E. Canda, Ankara (TR)                            
|           |                                  | T. Knoll, Sindelfingen (DE)                        
|           |                                  | F. Montorsi, Milan (IT)                            
|           |                                  | A. Skolarikos, Athens (GR)                         
|           |                                  | D. Veneziano, Reggio Calabria (RC) (IT)            |
| 12:20 - 12:30 | Pre-recorded video: Upper tract TCC | A. Breda, Barcelona (ES)                           |
| 12:30 - 12:40 | Pre-recorded video: FURS tumour NBI | M. Brehmer, Stockholm (SE)                        
<p>|           |                                  | O. Traxer, Paris (FR)                              |
| 12:40 - 12:50 | Pre-recorded video: En-Bloc resection of bladder tumour with HD-PDD | A. Karl, Munich (DE)                              |
| 12:50 - 13:00 | Pre-recorded video: Bipolar enucleation of prostate | T.R.W. Herrmann, Hanover (DE)                     |</p>
<table>
<thead>
<tr>
<th>Time</th>
<th>Session</th>
<th>Speaker and Location</th>
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<tbody>
<tr>
<td>13:00 - 13:10</td>
<td>Pre-recorded video: Electromagnetic guided percutaneous puncture</td>
<td>E.A. Rodrigues De Lima, Braga (PT)</td>
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<tr>
<td>13:10 - 13:30</td>
<td>Robotic partial nephrectomy using Da Vinci XI</td>
<td>A. Mottrie, Aalst (BE)</td>
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<tr>
<td>13:30 - 13:50</td>
<td>3D-4K Laparoscopic partial nephrectomy</td>
<td>A. Alcaraz, Barcelona (ES)</td>
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<td>13:50 - 14:05</td>
<td>Prone percutaneous nephrolithotripsy</td>
<td>E. Liatsikos, Patras (GR)</td>
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<td>14:05 - 15:55</td>
<td>Live-Surgery Part III</td>
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<td>Moderators:</td>
<td>A. Bachmann, Basel (CH)</td>
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<td>P. Dasgupta, London (GB)</td>
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<td>F. Gomez Sancha, Madrid (ES)</td>
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<td>A.S. Gözen, Heilbronn (DE)</td>
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<td>P. Nyirády, Budapest (HU)</td>
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<td>B. Turna, Izmir (TR)</td>
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<td>14:05 - 14:25</td>
<td>Robotic neobladder reconstruction</td>
<td>J. Kelly, London (GB)</td>
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<td>14:25 - 14:40</td>
<td>Holmium prostate enucleation</td>
<td>R. Popert, London (GB)</td>
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<td>14:40 - 14:55</td>
<td>Single-use flexible ureteroscopic lithotripsy</td>
<td>O. Wiseman, Cambridge (GB)</td>
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<td>14:55 - 15:05</td>
<td>Pre-recorded video: Bipolar enucleation of the prostate</td>
<td>T. Bach, Hamburg (DE)</td>
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<td>15:05 - 15:15</td>
<td>Pre-recorded video: 50W Holmium prostate enucleation</td>
<td>C.M. Scoffone, Torino (IT)</td>
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<tr>
<td>15:15 - 15:25</td>
<td>Pre-recorded video: NBI-assisted resection of bladder tumour</td>
<td>B. Malavaud, Toulouse (FR)</td>
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<td>J.U. Kempter, Leipzig (DE)</td>
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<td>15:35 - 15:55</td>
<td>Pre-recorded video: ICG-guided laparoscopic partial nephrectomy</td>
<td>F. Porpiglia, Turin (IT)</td>
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<td>15:55 - 17:45</td>
<td>Live-Surgery Part IV</td>
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<td>Moderators:</td>
<td>T. Bach, Hamburg (DE)</td>
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<td>A.Y. Muslumanoglu, Istanbul (TR)</td>
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<td>P.J.S. Oster, Fredericia (DK)</td>
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<td>A. Papatsoris, Marousi - Athens (GR)</td>
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<td>K. Sarica, Istanbul (TR)</td>
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<td>O. Traxer, Paris (FR)</td>
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</tbody>
</table>
Flexible ureteroscopic lithotripsy with Boa Vision
C.C. Seitz, Vienna (AT)

Digital flexible ureteroscopic lithotripsy
L. Ajayi, London (GB)

Pre-recorded video: Robotic renal transplantation
M. Stöckle, Homburg (DE)

Pre-recorded video: Flexible URS (FURS) using digital Cobra
M. Straub, Munich (DE)

Pre-recorded video: Holmium prostate vaporisation
T. Larner, Brighton (GB)

Pre-recorded video: Prostate enucleation using low energy pulsed thulium laser with preservation of ejaculation
J.B. Roche, Bordeaux (FR)

Pre-recorded video: Aquablation
N. Barber, Camberley (GB)

Pre-recorded video: Thulium prostate enucleation
G. Muto, Roma (IT)

Pre-recorded video: Urolift under local anesthesia
T.A. McNicholas, Herts (GB)

Pre-recorded video: Isiris Single use stent removal system
J. Baard, Amsterdam (NL)
How to write the introduction and methods
ESU Course 1

Saturday, 25 March
11:00 - 13:00

Location: Room 10, Capital suite (level 3)
Chairs: J.W.F. Catto, Sheffield (GB)
        J.W.F. Catto, Sheffield (GB)

Aims and objectives of this session
Aims and objectives
To understand how to construct a well written Introduction and Methods section to your manuscript. To work through examples of good and bad practice, and to understand key points when writing. To get insight from editors about what they expect to see and what they look for.
– To understand what makes good introduction
– To understand what makes a good methods section
– To understand about systematic reviews and meta-analysis
– To learn from experienced editors.

11:00 - 13:00
How to write an introduction
G. Novara, Padova (IT)

11:00 - 13:00
Group working I

11:00 - 13:00
Examples of good and bad introductions

11:00 - 13:00
How to write the methods section
C. Gratzke, Munich (DE)

11:00 - 13:00
Where to get the introduction data from

11:00 - 13:00
Suggestions for own papers & draft own introduction

11:00 - 13:00
Present findings to audience

11:00 - 13:00
Key features for a systematic review
M.G.K. Cumberbatch, Sheffield (GB)

11:00 - 13:00
What to look for in the statistics section
C. Gratzke, Munich (DE)

11:00 - 13:00
Group working II

11:00 - 13:00
Present findings to audience

11:00 - 13:00
Examples of good and bad methods
11:00 - 13:00  Suggestions for own papers

11:00 - 13:00  Create own methods and tables
Paediatric urology for the adult urologist 1
ESU Course 2

Saturday, 25 March
11:00 - 14:00

Location: Room 11, Capital suite (level 3)
Chair: J.M. Nijman, Groningen (NL)

Aims and objectives of this session
Many children with congenital anomalies will present to the adult urologist with long-term sequellae. It is important to know what has been done in terms of surgical procedures so that the adult urologist knows what he can do in the future. It is also important to know how the urological follow-up of these patients should be done. The most common pediatric conditions will be reviewed, while long-term complications will be explored by short interactive case presentations.

• Many children born with hydronephrosis may not require surgical intervention, but need close follow-up until after puberty
• Penile and urethral reconstruction, such as hypospadias may have serious implications for transurethral procedures in the future
• The clinical presentation of congenital anomalies of the urinary tract is changing but some of these may still present in the adult patient
• Obstructive uropathy and VUR are not always surgical anomalies, but may be functional in nature: the treatment modalities and long-term outcomes depend on the pathophysiology

11:00 - 14:00
Prenatal hydronephrosis / prenatal intervention and postnatal management
J.M. Nijman, Groningen (NL)

11:00 - 14:00
Vesico-ureteral reflux: Longterm outcome and complications
S. Tekgül, Ankara (TR)

11:00 - 14:00
Obstructive uropathy: Megaureter, posterior urethral valves and the valve bladder: A life-long dilemma
D.N. Wood, London (GB)

11:00 - 14:00
Discussion
Aims and objectives of this session
This course about the technique of robotic assisted prostatectomy responds to several educational objectives:

• Description step by step of the surgical procedure:
  – Patient’s position and placement of the trocars (different options)
  – Trans-peritoneal or extra-peritoneal approach
  – Treatment of the bladder neck
  – Dissection of neurovascular bundles
  – Apical approach
  – Technique of vesico-urethral anastomosis

• Technical alternatives:

• Description of the procedure in particular situations:
  – Preservation of the seminal vesicles
  – Situation of a voluminous prostate with median lobe: procedure after prostate surgery (TURP, adenomectomy)
  – Remedial prostatectomy

• Surgical and immediate postoperative complications

• Summary of functional and oncological results based on the last publications.

This course’s objective is to allow interaction between the participants and the teachers interactively.
technique
P.-T. Piéchaud, Bordeaux (FR)

11:00 - 14:00
Operative and postoperative complications
P. Dasgupta, London (GB)

11:00 - 14:00
Oncological and functional results
W. Artibani, Verona (IT)

11:00 - 14:00
Conclusion
P.-T. Piéchaud, Bordeaux (FR)
Aims and objectives of this session
To teach all about the adrenal gland minimal invasive approach; starting with the correct indications for surgery and preoperative medical preparation. The different approaches and new equipment will be shown including special instructions. The operations will be given step by step in high quality videos in detail with tips and tricks. The complication videos and intraoperative management will be discussed interactively with the experts.
ESU/ESUT Hands-on Training Course in Basic laparoscopy
HOT02

**Location:** Room South America, Exhibition Hall (Level 1)

**Saturday, 25 March**
11:00 - 12:00

**Aims and objectives of this session**
- You will improve your laparoscopic skills such as depth perception and bimanual dexterity

**Course description:**
In this course basic laparoscopic and suturing skills can be learned and trained. Psychomotor skills such as depth perception and bimanual dexterity are trained by the validated exercises of the European Basic Laparoscopic Urological Skills (E-BLUS) training programme. Experienced laparoscopist-tutors will guide you to master such basic laparoscopy skills as instrument handling, pattern cutting and intracorporal suturing. This course can be used as an additional training to prepare for the E-BLUS examination. Finally, all remaining questions can be answered and discussed with all tutors including the demonstration of tips and tricks.

**Target audience:** Urologists with a basic level in laparoscopy

**To be confirmed**
- F. Greco, Crotone (IT)
- G. Hellawell, London (GB)
- P. Macek, Prague (CZ)
- G. Pini, Milano (IT)
- T. Tokas, Hall In Tirol (AT)
### Personalised social media workshop for beginners

**WS01**

**Saturday, 25 March**  
**11:00 - 11:30**

**Location:**  
Social Media Helpdesk, Boulevard (level 1)

**Chair:**  
H. Borgmann, Mainz (DE)
ESU/ESFFU Hands-on Training Course in OnabotulinumtoxinA administration for OAB
HOT16

Saturday, 25 March
11:30 - 13:00

Location: Room Europe, Exhibition Hall (Level 1)
Chair: H. Hashim, Bristol (GB)

Aims and objectives of this session
Botulinum toxin type A administration in Urology has become common practice over the last two decades. Following the completion of Phase 3 registration trials in OAB, OnabotulinumtoxinA received marketing approval for this indication and now has a standardised injection paradigm. This course is procedure-focused, and will teach attendees the practicalities of OnabotulinumtoxinA administration through short lectures, videos and hands-on demonstrations using bladder models. Attendees will learn how to reconstitute the product and see different types of equipment available.

Target audience: For all participants with an interest in OnabotulinumtoxinA administration for OAB

R. Inman, Sheffield (GB)
M.S. Rahnama'i, Heerlen (NL)
A. Garcia Mora, Mexico City (MX)
ESU/ERUS Hands-on Training Course in Robotic surgery - intro
HOT22

Saturday, 25 March
11:30 - 13:00

Location: Room Asia, Exhibition Hall (Level 1)

Chair: M. Naudin, Hyon (BE)

Aims and objectives of this session
The European School of Urology (ESU) and the EAU Robotic Urology Section (ERUS) offer an intensive Hands-on Training course. We will provide training using simulators. The main aims of this 90 minutes course are:
- improving the participants’ control-skills and hand-eye-coordination, as well as an objective benchmarking of console performance and an introduction into standardized surgical steps in robot-assisted procedures.

Aims and objectives
Improve your robotic surgery skills in the following areas:
- Endowrist manipulation
- Camera Control
- 3rd Arm Control
- Needle Placement and Driving
- Suturing and Knot Tying

D. Moon, Edgecliff (AU)
ESU/ESUT Hands-on Training Course in Thulium laser for vaporesection and Holmium laser for laser lithotripsy
HOT40

Location: Room Africa, Exhibition Hall (Level 1)
Chair: P. Krombach, Luxembourg (LU)

Aims and objectives of this session

Aims and objectives for the Vaporesection and Vaporization of BPH training:
• The trainee will understand the tissue vaporization effect by the Thulium 2 micron continuous wave laser, the limited depth of tissue damage and how to vaporize and perform a cut in tissue.
• The trainee is challenged to introduce the laser resectoscope into the artificial organ of the training device, maneuver the resectoscope in the artificial prostatic urethra and manage to vaporize and cut tissue samples.

Aims and objectives for Holmium laser lithotripsy:
• the fragmentation effect on artificial stones by the Holmium laser at different laser settings and the importance of the fibre position with respect to the stone,
• the handling of rigid and flexible ureterorenoscopes,
• importance and influence of the irrigation management.

H-O. Teichmann, Kathlenburg Lindau (DE)
M. Oelke, Hanover (DE)
A. Secker, Münster (DE)
J-T. Klein, Ulm (DE)
C. Netsch, Hamburg (DE)
### Personalised social media workshop for beginners

**WS02**

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<thead>
<tr>
<th>Location:</th>
<th>Social Media Helpdesk, Boulevard (level 1)</th>
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<tr>
<td>Chair:</td>
<td>H. Borgmann, Mainz (DE)</td>
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**Saturday, 25 March**  
**11:30 - 12:00**
# EAU Research Foundation Meeting

**Special session**

<table>
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<tr>
<th>Time</th>
<th>Session</th>
<th>Speaker</th>
<th>Location</th>
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<tbody>
<tr>
<td>12:00 - 12:10</td>
<td>Welcome</td>
<td>P.F.A. Mulders, Nijmegen (NL)</td>
<td>Room 9, Capital suite (level 3)</td>
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<tr>
<td>12:10 - 12:25</td>
<td>Lecture by EAU career track fellow Castration-resistant PC: Causal mechanisms and novel therapeutic targets after androgen receptor blockade failure</td>
<td>A. Aytes, Barcelona (ES)</td>
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<tr>
<td>12:25 - 12:40</td>
<td>Active surveillance of patients with incidental small renal masses. EAU Research Foundation project 'EASE'</td>
<td>A. Volpe, Novara (IT)</td>
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<td>12:40 - 12:55</td>
<td>The role of image guidance in the diagnosis of PCa. EAU Research Foundation project 'PRECISION'</td>
<td>V. Kasivisvanathan, London (GB)</td>
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<tr>
<td>12:55 - 13:10</td>
<td>Designing, conducting and communicating 'Investigator Initiated Research' at the EAU Research Foundation</td>
<td>W.P.J. Witjes, Arnhem (NL)</td>
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<tr>
<td>13:40 - 13:55</td>
<td>Patient selection for adjuvant treatment of high risk NMIBC. EAU Research Foundation project 'NIMBUS'</td>
<td>M. Colombel, Lyon (FR)</td>
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<tr>
<td>13:55 - 14:10</td>
<td>Adjuvant treatment of MIBC: Results and lessons learned from the MAGNOLIA study. EAU Research Foundation project 'MAGNOLIA'</td>
<td>P.F.A. Mulders, Nijmegen (NL)</td>
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<tr>
<td>14:10 - 14:15</td>
<td>Closing remarks</td>
<td>P.F.A. Mulders, Nijmegen (NL)</td>
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**Aims and objectives of this session**

Introducing the EAU Research Foundation and its activities to the urological research community.

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**Scientific Programme**

EAU London 2017
How to proceed with hematuria
ESU Course 3

Aims and objectives of this session
Hematuria is one of the most common indications for urologic evaluation, and is recognized as a sign of potentially important illness. Therefore, knowledge of the differential diagnosis, principles of evaluation, and strategies for management of hematuria is critical. This course is designed for the practicing urologist, to provide a guidelines-based and case-oriented approach to the evaluation and management of hematuria.

After attending the course, participants will:
• Understand guideline recommendations for initial evaluation of asymptomatic microscopic hematuria
• Describe existing data regarding hematuria screening
• Recognize intravesical treatment regimens and associated side effect profiles for hemorrhagic cystitis
• Create strategies for treating refractory hemorrhagic cystitis, upper urinary tract, and prostate-related bleeding

12:00 - 14:00
Course introduction and background to hematuria
S. Boorjian, Rochester (US)

12:00 - 14:00
Review of microscopic hematuria
H. Mostafid, Guildford (GB)

12:00 - 14:00
AUA guidelines (and beyond) on microscopic hematuria
S. Boorjian, Rochester (US)

12:00 - 14:00
Cases and questions focusing on microhematuria
S. Boorjian, Rochester (US)
H. Mostafid, Guildford (GB)

12:00 - 14:00
Evaluation and management of gross hematuria and hemorrhagic cystitis
S. Boorjian, Rochester (US)
H. Mostafid, Guildford (GB)

12:00 - 14:00
Prostate/Urethral/Upper urinary tract bleeding
H. Mostafid, Guildford (GB)

12:00 - 14:00
Cases and questions focusing on gross hematuria
S. Boorjian, Rochester (US)
H. Mostafid, Guildford (GB)
Surgery for renal cancer beyond minimally invasive approaches: Opportunities and limits
ESU Course 5

**Location:** Room 15, Capital suite (level 3)

**Chair:** M. Kuczyk, Hanover (DE)

**Aims and objectives of this session**
Addressing patients with locally advanced renal cell cancer with / without intraval tumour thrombosis usually not being considered candidates for laparoscopy, the current course presents tips and tricks for the surgical management of these cases. In addition, the indication for and the potential clinical value of metastasectomy, cytoreductive nephrectomy and lymph node dissection in the aforementioned clinical situation is revisited.
- Tips and tricks for the surgical management of locally advanced renal cancer with / without intracaval tumor thrombosis
- What is the indication for and the value of metastasectomy in renal cancer patients?
- Can we define the ideal candidate for cytoreductive nephrectomy?
- Is there any value of a more extended lymph node dissection during nephrectomy?

**12:00 - 14:00**

**The role of metastasectomy in metastatic renal cancer**
M. Kuczyk, Hanover (DE)

**The role of cytoreductive nephrectomy in metastatic renal cancer**
M. Kuczyk, Hanover (DE)

**Tips and tricks for the surgical management of patients with advanced renal cell cancer not suitable for a minimally invasive approach**
A. Bex, Amsterdam (NL)

**The surgical strategy for the management of renal cancer with intracaval thrombosis**
A. Bex, Amsterdam (NL)

**The role of lymphadenectomy during the surgical treatment of RCC patients**
M. Kuczyk, Hanover (DE)
| **Location:** | Social Media Helpdesk, Boulevard (level 1) |
| **Chair:**    | H. Borgmann, Mainz (DE)                |

**Personalised social media workshop for beginners**

**WS03**

**Saturday, 25 March**

**12:00 - 12:30**
ESU/ESUT Hands-on Training Course in Basic laparoscopy

HOT03

Saturday, 25 March 12:15 - 13:15

Location: Room South America, Exhibition Hall (Level 1)

Chair: B.S.E.P. Van Cleynenbreugel, Leuven (BE)

Aims and objectives of this session
- You will improve your laparoscopic skills such as depth perception and bimanual dexterity

Course description:
In this course basic laparoscopic and suturing skills can be learned and trained. Psychomotor skills such as depth perception and bimanual dexterity are trained by the validated exercises of the European Basic Laparoscopic Urological Skills (E-BLUS) training programme. Experienced laparoscopist-tutors will guide you to master such basic laparoscopy skills as instrument handling, pattern cutting and intracorporal suturing. This course can be used as an additional training to prepare for the E-BLUS examination. Finally, all remaining questions can be answered and discussed with all tutors including the demonstration of tips and tricks.

Target audience: Urologists with a basic level in laparoscopy

E. Emiliani, Barcelona (ES)
G. Hellawell, London (GB)
P. Macek, Prague (CZ)
B. Petrut, Cluj Napoca (RO)
T. Tokas, Hall In Tirol (AT)
L. Tunc, Ankara (TR)
Personalised social media workshop for beginners
WS04

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<thead>
<tr>
<th>Date</th>
<th>Social Media Helpdesk, Boulevard (level 1)</th>
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<td>Location</td>
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<tr>
<td>Chair</td>
<td>H. Borgmann, Mainz (DE)</td>
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<tr>
<td>Saturday, 25 March 12:30 - 13:00</td>
<td>Social Media Helpdesk, Boulevard (level 1)</td>
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<td>Chair</td>
<td>H. Borgmann, Mainz (DE)</td>
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ESU/ESFFU Hands-on Training Course in Urodynamics
HOT06

Location: Room North America, Exhibition Hall (Level 1)

Chair: G. Van Koeve rage, Maastricht (NL)

Aims and objectives of this session
This course aims to provide a practical course offering an interactive “hands-on” environment for doctors, nurses and technicians to improve their skills in urodynamics.

Course description:
Plenary Session How to perform CMG, VCMG, AmbCMG, UPP and RLPP
Station 1 Urodynamics: The principles of pressure and flow measurements. The limitation and advantages of each approach, potential artefacts and their mitigations will also be discussed.
Station 2 Male case studies: Characteristic traces of filling voiding and voiding phase traces as well as fluoroscopy images of outlet obstruction.
Station 3 Female case studies: Characteristic filling, voiding and voiding phase traces as well as fluoroscopy images of outlet obstruction and with emphasis on the assessment of stress urinary incontinence.
Station 4 Neuropathic case studies: Special considerations of performing urodynamics in this cohort as well as characteristic traces and images will be discussed.

Target audience: For all participants with an interest in Urodynamics

E. Finazzi Agrò, Rome (IT)
R. Kirschner-Hermanns, Aachen (DE)
T. Mckinney, Fort Lauderdale (US)
U. Mehnert, Zurich (CH)
P.F.W.M. Rosier, Nijmegen (NL)
E. Solomon, London (GB)
ESU/ESFFU Hands-on Training Course in OnabotulinumtoxinA administration for OAB

HOT17

**Location:** Room Europe, Exhibition Hall (Level 1)

**Chair:** A. Sahai, London (GB)

**Aims and objectives of this session**
Botulinum toxin type A administration in Urology has become common practice over the last two decades. Following the completion of Phase 3 registration trials in OAB, OnabotulinumtoxinA received marketing approval for this indication and now has a standardised injection paradigm. This course is procedure-focused, and will teach attendees the practicalities of OnabotulinumtoxinA administration through short lectures, videos and hands-on demonstrations using bladder models. Attendees will learn how to reconstitute the product and see different types of equipment available.

**Target audience:** For all participants with an interest in OnabotulinumtoxinA administration for OAB

A. Garcia Mora, Mexico City (MX)
R. Hamid, London (GB)
M.S. Rahnama'i, Heerlen (NL)
ESU/ERUS Hands-on Training Course in Robotic surgery - intro
HOT23

Saturday, 25 March
13:30 - 15:00

Location: Room Asia, Exhibition Hall (Level 1)
Chair: J.S. Schraml, Usti Nad Labem (CZ)

Aims and objectives of this session
The European School of Urology (ESU) and the EAU Robotic Urology Section (ERUS) offer an intensive Hands-on Training course. We will provide training using simulators. The main aims of this 90 minutes course are:
- Improving the participants' control-skills and hand-eye-coordination, as well as an objective benchmarking of console performance and an introduction into standardized surgical steps in robot-assisted procedures.

Aims and objectives
- Improve your robotic surgery skills in the following areas:
  - Endowrist manipulation
  - Camera Control
  - 3rd Arm Control
  - Needle Placement and Driving
  - Suturing and Knot Tying

A. Ploumidis, Athens (GR)
ESU/ESUT Hands-on Training Course in Thulium laser for vaporesection and Holmium laser for laser lithotripsy

**Location:** Room Africa, Exhibition Hall (Level 1)

**Chair:** J. Rassweiler, Heilbronn (DE)

**Aims and objectives of this session**

- The trainee will understand the tissue vaporization effect by the Thulium laser, the limited depth of tissue damage and how to perform a cut in tissue.
- The trainee also may cut the sample tissue by cold knife for visual inspection of the tissue damage zone.
- The trainee is challenged to introduce the laser resectoscope into the artificial organ, maneuver the resectoscope in the artificial prostatic urethra and to vaporize and cut tissue samples.

**Course description**

This hands on training course is to introduce the trainee into the laser tissue interaction of the Thulium 2 micron continuous wave laser with the use of two different training stations. In the first workstation the trainee will try the laser on cadaver tissue submersed in water. The second setting resembles the Thulium Laser Vaporesection of Prostate.

H-O. Teichmann, Kathlenburg Lindau (DE)
C. Netsch, Hamburg (DE)
P. Kallidonis, Patras (GR)
P. Krombach, Luxembourg (LU)
M. Oelke, Hanover (DE)
M. Ritter, Mannheim (DE)
ESU Hands-on Training Course in Non-technical skills
HOT32

**Location:** Hands-on Training Area, Exhibition Hall (Level 1)

**Chairs:**
K. Ahmed, London (GB)
J.W. Brewin, Salisbury (GB)

**Aims and objectives of this session**
This course aims to introduce the concept of non-technical skills and provide an interactive “hands-on” environment to practicing urologists and residents-in-training, in the hope of improving and raising self-awareness for everyday operating room practice.

**Course description:**
The operating room is a complex and highly stressful environment that requires interaction between a large team to achieve successful outcomes for the patient. This requires not only effective procedure-specific technical skills, but also additionally a range of non-technical skills. The importance of non-technical skills is often overlooked but they are unfortunately a major cause of surgical error. Like technical skills, which are acquired over many years of practice and training, non-technical skills are not innate traits and must also be developed through training and experience. This course will serve to introduce practicing urologists to the concept of non-technical skills using an interactive full immersio simulation environment, developed by Kneebone et al. (Imperial College London), whilst undertaking common scenarios in urolithiasis. Participants will be evaluated by experts in surgical education and provided individual feedback with view for further self-improvement.

**Supporting faculty:**
H. Aya, London (GB)
A. Aydin, London (GB)
O. Brunckhorst, London (GB)
F. Dar, London (GB)
M. Husnain Iqbal, London (GB)
J. Moody, London (GB)
N. Raison, London (GB)

**Target audience:**
All urological surgeons and residents in training
### Aims and objectives of this session

To present novel techniques and technical features of minimally-invasive partial nephrectomy. Laparoscopic partial nephrectomy approaches to minimize kidney damage while maintaining oncological safety are current reality.

All presentations have a maximum length of 8 minutes, followed by 4 minutes of discussion.

<table>
<thead>
<tr>
<th>V25</th>
<th>Preliminary kidney parenchymal ligation to achieve trifecta in zero-ischemia laparoscopic partial nephrectomy</th>
</tr>
</thead>
<tbody>
<tr>
<td>By:</td>
<td>Komai Y., Gotohda N., Sakai Y., Ito M.</td>
</tr>
<tr>
<td>Institutes:</td>
<td>National Cancer Center Hospital East, Dept. of Urology, Chiba, Japan, National Cancer Center Hospital East, Dept. of Hepatobiliary and Pancreatic Surgery, Chiba, Japan</td>
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<thead>
<tr>
<th>V26</th>
<th>Zero-ischemia minimally invasive partial nephrectomy in T2a renal tumor</th>
</tr>
</thead>
<tbody>
<tr>
<td>By:</td>
<td>Cano Velasco, Subirá Ríos, Ramón Botella, Moralejo Gárate, Barbas Bernados, Buen Chomón, Hernández Fernández</td>
</tr>
<tr>
<td>Institutes:</td>
<td>Hospital Universitario Gregorio Marañón, Dept. of Urology, Madrid, Spain, Hospital Universitario Gregorio Marañón, Dept. of Radio Diagnosis, Madrid, Spain</td>
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</tbody>
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<thead>
<tr>
<th>V27</th>
<th>Off-clamp laparoscopic partial nephrectomy for hilar renal cell carcinoma: Surgical description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Institutes:</td>
<td>Sapienza University of Rome, Dept. of Medico-Surgical Sciences and Biotechnologies, Urology Unit, Latina, Italy, Hospital Vittorio Emanuele, Dept. of Urology, Catania, Italy</td>
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<thead>
<tr>
<th>V29</th>
<th>Selective clamping of tertiary arterial branch during laparoscopic partial nephrectomy thanks to 3D reconstruction of the vascular pedicle</th>
</tr>
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<tbody>
<tr>
<td>By:</td>
<td>Varca V., Benelli A., Gregori A.</td>
</tr>
<tr>
<td>Institutes:</td>
<td>Ospedale Salvini, Dept. of Urology, Garbagnate Milanese, Italy</td>
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<thead>
<tr>
<th>V30</th>
<th>Kidney mobilization and rotation during laparoscopic partial nephrectomy for access to dorsal and/or upper pole tumors</th>
</tr>
</thead>
<tbody>
<tr>
<td>By:</td>
<td>Macek P., Novak K., Pesl M.</td>
</tr>
<tr>
<td>Institutes:</td>
<td>General University Hospital and Medical Faculty of Charles University In Prague, Dept. of Urology, Prague, Czech Republic</td>
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<thead>
<tr>
<th>V31</th>
<th>Laparoscopic extraperitoneal renal tumor enucleation (LERTE) with renal hypotension on demand for endophitic masses</th>
</tr>
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<tbody>
<tr>
<td>By:</td>
<td>Cochetti G., Barillaro F., D'Amico F., Boni A., Pohja S., Mearini E.</td>
</tr>
<tr>
<td>Institutes:</td>
<td>University of Perugia, Dept. of Surgical and Biomedical Sciences, Division of Urological, Andrological Surgery and Minimally-Invasive Techniques, Perugia, Italy</td>
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<tr>
<th>V32</th>
<th>Laparoscopic partial nephrectomy for a small renal mass on an allograft kidney</th>
</tr>
</thead>
<tbody>
<tr>
<td>By:</td>
<td>Ozden E., Oner S., Yakupoglu Y.K., Bostanci Y., Yilmaz A.F., Sarikaya S.</td>
</tr>
</tbody>
</table>
Institutes: Ondokuz Mayis University, Dept. of Urology, Samsun, Turkey
Finding and applying the best technology to treat BPO

Poster Session 14

Location: Room Amsterdam, North Hall (Level 1)

Chairs: A. Bachmann, Basel (CH)
L. Carmignani, Milan (IT)
G.Y. Robert, Bordeaux CEDEX (FR)

Aims and objectives of this session
Invasive, including minimally invasive treatment modalities will be discussed.

Poster viewing of 20 minutes. Presentations will take place on stage. Standard presentations are 2 minutes in length, followed by 2 minutes for discussion. Extended presentations (*) are 3 minutes in length, followed by 3 minutes for discussion.

181 Comparative effectiveness of transurethral resection techniques for benign prostatic hyperplasia – analysis of an all payer in patient discharge database
By: Meyer C.,1 Von Landenberg N.,1 Friedlander D.,1 Eswara J.,1 Menon M.,2 Chun F.,3 Fisch M.,3 Sun M.,3 Chung S.,3 Trinh Q.-D.1
Institutes: Brigham and Women's Hospital, Harvard Medical School, Division of Urological Surgery and Center For Surgery and Public Health, Boston, United States of America,2 Henry Ford Health System, VUI Center For Outcomes Research, Analytics and Evaluation, Vattikutti Urology Institute, Detroit, United States of America,3 University Medical Center Hamburg-Eppendorf, Dept. of Urology, Hamburg, Germany, Stanford Medical Center, Dept. of Urology, Stanford, United States of America

182 Greenlight laser (XPS) 180W photoselective vaporization (PVP) vs. plasma kinetic vaporization of the prostate (PKVP) for treatment of small to moderate sized benign prostatic hyperplasia. A randomized controlled trial
Institutes: Urology and Nephrology Center, Dept. of Urology, Mansoura, Egypt

183 Outcomes of open versus robotic simple prostatectomy for benign prostatic hypertrophy in the United States
By: Leow J.,2 Mills G.,3 Chang S.,4 Von Landenberg N.,4 Gild P.,4 Trinh Q.D.,4 Sammon J.,1
Institutes: Maine Medical Center, Division of Urology, Portland, United States of America,2 Brigham and Women’s Hospital, Division of Urology, Center For Surgery and Public Health, Boston, United States of America,3 Maine Medical Partners, Dept. of Urology, South Portland, United States of America,4 Brigham and Women’s Hospital, Division of Urology, Boston, United States of America

184 TUR-P for large prostates using a pressure-controlled suprapubic suction device - a comparative study on long-term results in prostates smaller vs. bigger than 70cc
Institutes: Faculty of Medicine, University of Freiburg, Germany, Clinic for Urology, Freiburg, Germany

185 Vaporize, anatomically vaporize or enucleate the prostate? The flexible use of the GreenLight Laser
By: Cindolo L.,1 Ruggera L.,2 Destefanis P.,3 Dadone C.,4 Schips L.,1 Marchioni M.,5 Ferrari G.6
Institutes: Asl Abruzzo 02, Dept. of Urology, Chieti, Italy,2 Santa Maria Degli Angeli Hospital, Dept. of Urology, Pordenone, Italy,3 Azienda Ospedaliera Città Della Salute E Della Scienza Di Torino – Sede Molinette, Dept. of Urology, Turin, Italy, Santa Croce E Carle Hospital, Dept. of Urology, Cuneo, Italy,5 SS. Annunziata Hospital G.D’Annunzio University of Chieti, Dept. of Urology, Chieti, Italy,6
5-year outcome following pure bipolar plasma vaporization of the prostate: Results from a prospective 3D ultrasound volumetry study
By: Kranzbühler B., Gross O., Fankhauser C., Wettstein M., Grossmann N., Keller E., Eberli D., Sulser T., Poyet C., Hermanns T.
Institutes: University Hospital Zurich, Dept. of Urology, Zurich, Switzerland

A prospective study in 506 patients about the safety of omitting AB-prophylaxis in TURP in patients without pre-operative bacteriuria/catheter
By: Baten E., Orye C., Cartuyvels R., Van Renterghem K.
Institutes: Jessa Ziekenhuis, Dept. of Urology, Hasselt, Belgium, UZ Leuven, Dept. of Urology, Leuven, Belgium, Jessa Ziekenhuis, Dept. of Microbiology, Hasselt, Belgium

Learning curves and perioperative outcomes after endoscopic enucleation of the prostate: A comparison between GreenLight 532-nm and holmium lasers
By: Peyronnet B., Robert G., Comat V., Roupret M., Gomez-Sancha F., Cornu J-N., Misrai V.
Institutes: University of Rennes, Dept. of Urology, Rennes, France, University of Bordeaux, Dept. of Urology, Bordeaux, France, Pitie Salpetriere Hospital, Dept. of Urology, Paris, France, Clinica CEMTRO, Dept. of Urology, Madrid, Spain, University of Rouen, Dept. of Urology, Rouen, France, Clinique Pasteur, Dept. of Urology, Toulouse, France

Incidental prostate cancer (pT1a-pT1b) detection at BPH surgery in the modern era - are we modifying the detection rate?
By: Capogrosso P., Capitanio U., Ventimiglia E., Cazzaniga W., Pederzoli F., Boeri L., Oreggia D., Moretti D., Briganti A., Cathelineau X., Montorsi F., Salonia A.
Institutes: IRCCS San Raffaele Hospital/ University Vita-Salute San Raffaele, Division of Oncology, Unit of Urology, Milan, Italy, IRCCS Cà Granda, Hospital Maggiore Policlinico, Dept. of Urology, Milan, Italy, Institut Mutualiste Montsouris, Dept. of Urology, Paris, France

Holmium laser enucleation of the prostate: A single centre case series of 1000 patients with 13 years of follow-up
By: Whiting D., Penev B., Cynk M.
Institutes: Maidstone and Tunbridge Wells Nhs Trust, Dept. of Urology, Maidstone, United Kingdom

50 Watt HoLEP: How efficiently can a low power holmium laser enucleate prostates?
By: Khan F., Saleemi M., Barras B., Taneja S., Alam A., Mohammed A., Nunney I.
Institutes: Luton and Dunstable Hospital NHS Foundation Trust, Dept. of Urology, Luton, United Kingdom, Norwich Medical School, University of East Anglia, Dept. of Medical Statistics, Norwich, United Kingdom

Long term (5 year) results from the largest, prospective, randomized, controlled study of the minimally invasive prostate urethral lift (PUL)
Institutes: UT Southwestern Medical School, Dept. of Urology, Dallas, United States of America, Western Urological Clinic, Dept. of Urology, Salt Lake City, United States of America, Carolina Urologic Research Center, Dept. of Urology, Myrtle Beach, United States of America, Jonathan Giddens Medicine Professional Corporation, Dept. of Urology, Brampton, Canada, Austin Health, Dept. of Urology, Heidelberg, Australia, Urology Associates of Denver, Dept. of Urology, Englewood, United States of America, Advanced Urology Institute, Dept. of Urology, Daytona Beach, United States of America, Southern Illinois University, Dept. of Urology, Springfield, United States of America, Illawarra Urology, Dept. of Urology, Figtree, Australia, Weill Cornell Medical Center, Dept. of Urology, New York, United States of America, Urology Associates of Silicon Valley, Dept. of Urology, San Jose, United States of America, Urology Centre, Dept. of Urology, Port Macquarie, Australia, Genesis Research LLC, Dept. of Urology, San Diego, United States of America, Chesapeake Urology Research Associates, Dept. of Urology, Baltimore, United States of America
Robot-assisted simple prostatectomy (RASP) step by step procedure and results
Institutes: Onze-Lieve-Vrouw Hospital, Dept. of Urology, Aalst, Belgium
Receptors and targets in functional urology

Poster Session 15

**Location:** Room Berlin, North Hall (Level 1)

**Chairs:** C. Cruz, Porto (PT)
D. Daly, Lancashire (GB)
K. Monastyrskaya, Bern (CH)

**Aims and objectives of this session**
The search for new pharmacological targets continues. Receptors and new mechanisms are being discussed in this session.

Poster viewing of 20 minutes. Presentations will take place on stage. Standard presentations are 2 minutes in length, followed by 2 minutes for discussion. Extended presentations (*) are 3 minutes in length, followed by 3 minutes for discussion.

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**Estradiol releasing hydrogel as a proangiogenic substitute for fat flaps used in urogenital reconstruction**  
*By:* Eke G.², Mangir N.¹, Hasirci N.³, Chapple C.⁴, Hasirci V.⁵, Macneil S.¹  
*Institutes:* Kroto Research Institute, Dept. of Materials Science and Engineering, Sheffield, United Kingdom, ¹Middle East Technical University (METU), Dept. of Biotechnology & BIOMATEN, METU Center of Excellence In Biomaterials and Tissue Engineering, Ankara, Turkey, ²METU, Dept. of Biotechnology, Chemistry & BIOMATEN, METU Center of Excellence In Biomaterials and Tissue Engineering, Ankara, Turkey, ³Royal Hallamshire Hospital, Dept. of Urology, Sheffield, United Kingdom, ⁴METU, Dept. of Biotechnology, Biological Sciences & BIOMATEN, METU Center of Excellence In Biomaterials and Tissue Engineering, Ankara, Turkey

194

**9-Phenanthrol modifies rat bladder function independent of TRPM4**  
*By:* Deruyver Y.¹, Uvin P.¹, Pinto S.², Van Ranst N.², Franken J.¹, Gevaert T.¹, Everaerts W.¹, Voets T.², De Ridder D.¹, Vennekens R.²  
*Institutes:* KU Leuven, Laboratory of Experimental Urology, Leuven, Belgium, ¹KU Leuven, Laboratory of Ion Channel Research, Leuven, Belgium

195

**Supraspinal effects of dopamine uptake inhibitor on the micturition reflex in rats**  
*By:* Honda M.¹, Yoshimura N.², Kimura Y.¹, Kawamoto B.¹, Tsounapi P.¹, Hikita K.¹, Shimizu S.³, Shimizu T.³, Saito M.³, Chancellor M.³, Takenaka A.¹  
*Institutes:* Tottori University Faculty of Medicine, Dept. of Urology, Yonago, Japan, ¹University of Pittsburgh, Dept. of Urology, Pittsburgh, United States of America, ²Kochi Medical School, Dept. of Pharmacology, Nankoku, Japan, ³William Beaumont Hospital, Dept. of Urology, Royal Oak, United States of America

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**Role of supraspinal and spinal group III metabotropic glutamate receptor in micturition reflex in urethane-anesthetized rats**  
*By:* Honda M.¹, Kimura Y.¹, Kawamoto B.¹, Tsounapi P.¹, Hikita K.¹, Saito M.², Takenaka A.¹  
*Institutes:* Tottori University Faculty of Medicine, Dept. of Urology, Yonago, Japan, ¹Kochi Medical School, Dept. of Pharmacology, Nankoku, Japan

197

**KPR-2579, a novel TRPM8 antagonist, inhibits hyperactivity of the primary bladder afferent nerves induced by acetic acid in rats**  
*By:* Aizawa N.¹, Fujimori Y.², Kobayashi J.², Nakanishi O.², Hirasea H.², Homma Y.³, Igawa Y.¹  
*Institutes:* The University of Tokyo Graduate School of Medicine, Dept. of Continenence Medicine, Tokyo, Japan, ¹Kissei Pharmaceutical Co., Ltd., Discovery Research R&D, Azumino, Japan, ²The University of Tokyo Graduate School of Medicine, Dept. of Urology, Tokyo, Japan
198 Does TRP channel play a role in cooling-induced contraction of human detrusor smooth muscle?
By: Kajioka S., Maki T., Lee K., Takahashi R., Ito M.
Institutes: Kyushu University, Dept. of Urology, Fukuoka, Japan

199 Novel three-mRNA and three-miRNA signatures accurately identify urodynamically-defined bladder phenotypes and correspond to functional improvement after deobstruction
By: Moltzahn F. 1, Burkhard F. 2, Hashemi Gheinani A. 3, Koeck I. 2, Monastyrskaya K. 2
Institutes: 1University Hospital Bern, Dept. of Urology, Bern, Switzerland, 2Urology Research Laboratory, Dept. of Clinical Research, Bern, Switzerland

200 Withdrawn
By:
Institutes:

201 The water avoidance stress induces bladder pain due to a prolonged adrenergic (alpha1A) stimulation of the bladder
By: Matos R. 1, Serrão P. 2, Rodrigues L. 3, Birder L.A. 4, Cruz F. 5, Charrua A. 6
Institutes: 1Faculty of Medicine of University of Porto, Dept. of Biomedical Science, Porto, Portugal, 2University of Porto, Dept. of Pharmacology & Therapeutics and MedinUP, Porto, Portugal, 3University of Southern California, Dept. of Urology and Obstetrics and Gynecology, Los Angeles, United States of America, 4University of Pittsburgh School of Medicine, Dept. of Medicine and Pharmacology-Chemical Biology, Pittsburgh, United States of America, 5University of Porto and CHSJ, Dept. of Biomedical Science and I3S-IBMC, Porto, Portugal, 6University of Porto, Dept. of Biomedical Science and I3S-IBMC, Porto, Portugal

202 Validation of TNF-α as the top upstream regulator of bladder remodelling during outlet obstruction-induced lower urinary tract dysfunction
By: Koeck I. 1, Hashemi Gheinani A. 1, Burkhard F. 2, Monastyrskaya K. 2
Institutes: 1Urology Research Laboratory, Dept. of Clinical Research, Bern, Switzerland, 2University Hospital Bern, Dept. of Urology, Bern, Switzerland

203 Morphological and functional restoration comparison between a novel bilayer chitosan and bladder acellular matrix graft as scaffolds in a rat bladder augmentation model
By: Xiao D. 1, Wang Q. 2, Zhang M. 1, Zhou Z. 1, Lu M. 1
Institutes: 1Renji Hospital, Dept. of Urology and Andrology, Shanghai, China, 2Shanghai 9th People’s Hospital, Dept. of Urology, Shanghai, China

204 Effects of litoxetine on acetic acid-induced detrusor overactivity and striated anal sphincter functions in rabbits: Comparison with duloxetine
By: Pérez-Martínez F. 2, Lluel P. 1, Palea S. 3, Vela-Navarrete R. 2
Institutes: 1Urosphere, Dept of Pharmacology, Toulouse, France, 2Universidad Autónoma De Madrid, Dept. of Urology, Madrid, Spain, 3Palea Pharma & Biotech Consulting, Toulouse, France

205 The stem cell growth factor receptor KIT is not expressed on interstitial cells in bladder
By: Gevaert T. 1, Vanstreesels E. 2, Daelemans D. 3, Everaerts W. 1, Van Der Aa F. 1, Pintelon I. 3, Timmermans J-P. 1, Roskams T. 5, Steiner C. 5, Neuhaus J. 4, De Ridder D. 1
Institutes: 1UZ Leuven, Dept. of Urology, Leuven, Belgium, 2KU Leuven, Rega Institute For Medical Research, Leuven, Belgium, 3University of Antwerp, Dept. of Veterinary Sciences, Antwerp, Belgium, 4KU Leuven, Dept. of Pathology, Leuven, Belgium, 5University of Leipzig, Klinik Und Poliklinik Für Urologie, Leipzig, Germany
Ongoing prospective trials

Saturday, 25 March
14:15 - 15:45

Location: Room Vienna, North Hall (Level 1)

Chairs: J. Bellmunt, Barcelona (ES)
M. Retz, Munich (DE)
S. Shariat, Vienna (AT)

Aims and objectives of this session

To show what is currently going on in oncologic urology and other fields in urology regarding multicentre prospective randomized studies.

Poster viewing of 20 minutes. Presentations will take place on stage. Standard presentations are 2 minutes in length, followed by 2 minutes for discussion.

14:38 - 14:48

Overview on systematic reviews/meta analysis
S. Shariat, Vienna (AT)

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A phase 3 randomized, double-blind, placebo-controlled trial of ODM-201 vs. placebo in combination with standard androgen deprivation therapy and docetaxel in patients with metastatic hormone-sensitive prostate cancer (ARASENS)

By: Smith M.1, Saad F.2, Hussain M.3, Sternberg C.4, Fizazi K.5, Crawford D.6, Yamada K.7, Kappeler C.8, Kuss I.9, Tombal B.9

Institutes: Massachusetts General Hospital Cancer Center and Harvard Medical School, Dept. of Urologic Oncology, Boston, United States of America, University of Montreal, University of Montreal Hospital Center/CRCHUM, Montreal, Canada, Northwestern University Feinberg School of Medicine, Dept. of Hematology/Oncology, Chicago, United States of America, San Camillo and Forlanini Hospitals, Dept. of Medical Oncology, Rome, Italy, Gustave Roussy, University of Paris Sud, Cancer Medicine, Villejuif, France, University of Colorado, Dept. of Urologic Oncology, Aurora, United States of America, Bayer Pharmaceuticals, Dept. of Oncology, Whippany, United States of America, Bayer Pharma AG, Dept. of Oncology, Berlin, Germany, Cancer Centre, Catholic University of Louvain (UCL), Dept. of Urology, Brussels, Belgium

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Prostate cancer intra-tumoral heterogeneity: Correlation between clinical parameters, mpMRI and biomarkers


Institutes: University College London, Dept. of Surgery and Interventional Science, London, United Kingdom, University College London, UCL Centre For Molecular Intervention, London, United Kingdom, University College London, UCL Centre For Medical Imaging, London, United Kingdom, University College London, Dept. of Surgery and Interventional Science, London, United Kingdom, Cancer Research UK, Translational Cancer Therapeutics Laboratory, London, United Kingdom, University College London, Cancer Institute, London, United Kingdom, Institute Of Cancer Research, Centre For Evolution and Cancer, London, United Kingdom, University College London, Dept. of Research Pathology, London, United Kingdom, University College London, UCL Centre For Medical Image Computing, London, United Kingdom, Institute of Cancer Research, Dept. of Clinical Studies, London, United Kingdom

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KEYNOTE-365: Phase 1b/2 trial of pembrolizumab combination therapy for metastatic castration-resistant prostate cancer (mCRPC)

By: Yu E.Y.2, Wu H.1, Schloss C.1

Institutes: Merck & Co., Inc., Dept. of Clinical Oncology, Kenilworth, United States of America, Seattle Cancer Care Alliance, Dept. of Medicine, Seattle, United States of America
Multi-institutional validation and assessment of training modalities in robotic surgery (the MARS project)
By: Raison N.1, Ahmed K.1, Aydin A.2, Van Der Poel H.3, Mottrie A.4, Dasgupta P.2
Institutes: King’s College London, Mrc Centre For Transplantation, London, United Kingdom, 2
King’s College London, MRC Centre For Transplantation, London, United Kingdom, 3
Netherlands Cancer Institute, Dept. of Urology, Amsterdam, The Netherlands, 4
OLV Clinic, Dept. of Urology, Aalst, Belgium

The effects of the human fetal estrogen estetrol (E4) in healthy men to estimate its potential use for the treatment of prostate cancer
By: Dutman E., Zimmerman Y., Coelingh-Bennink H.
Institutes: Pantarhei Oncology BV, Zeist, The Netherlands

PURE01: An open label, single-arm, phase 2 study of the anti-programmed death (PD)-1 monoclonal antibody (moAb) pembrolizumab for neoadjuvant therapy of muscle-invasive urothelial bladder carcinoma (miUBC)
By: Necchi A.1, Mariani L.2, Anichini A.3, Giannatempo P.1, Raggi D.1, Togliardini E.4, Calareso G.5, Nicolai N.6, Crippa F.7, Biondi D.6, Torelli T.5, Catanzaro M.6, Stagni S.5, Piva L.6, Salvioni R.6
Institutes: Fondazione IRCCS - Istituto Nazionale Dei Tumori, Dept. of Medical Oncology, Milan, Italy, 1Fondazione IRCCS - Istituto Nazionale Dei Tumori, Clinical Epidemiology and Trials Organization Unit, Milan, Italy, 2Fondazione IRCCS - Istituto Nazionale Dei Tumori, Human Tumors Immunobiology Unit, Milan, Italy, 3Fondazione IRCCS - Istituto Nazionale Dei Tumori, Dept. of Pharmacy Unit, Milan, Italy, 4Fondazione IRCCS - Istituto Nazionale Dei Tumori, Dept. of Radiology, Milan, Italy, 5Fondazione IRCCS - Istituto Nazionale Dei Tumori, Dept. of Urology, Milan, Italy, 6Fondazione IRCCS - Istituto Nazionale Dei Tumori, Nuclear Medicine and PET Unit, Milan, Italy

iMvigor010, a phase III study of adjuvant atezolizumab vs observation in patients (pts) with muscle-invasive urothelial carcinoma (UC)
By: Gschwend J.1, Bellmunt J.2, Castellano D.3, Daneshmand S.4, Hussain M.5, Nishiyama H.6, Powles T.7, Degaonkar V.8, Nguyen Duc A.9, Culiné S.10
Institutes: Technical University of Munich, Dept. of Urology, Munich, Germany, 1Bladder Cancer Center, Dana-Farber/Brigham and Women’s Cancer Center, Harvard Medical School, Boston, United States of America, 2Hospital Universitario 12 De Octubre, Dept. of Oncology, Madrid, Spain, 3University of Southern California, Dept. of Oncology, Los Angeles, United States of America, 4Northwestern University, Dept. of Oncology, Chicago, United States of America, 5University of Tsukuba, Dept. of Oncology, Ibaraki, Japan, 6Barts Cancer Institute, Queen Mary University of London, London, United Kingdom, 7Genentech, Inc., Dept. of Oncology, South San Francisco, United States of America, 8Roche, Dept. of Oncology, Basel, Switzerland, 9Hôpital Saint-Louis, Dept. of Oncology, Paris, France

Phase 3 randomized trial of intravenous mannitol versus placebo prior to renal ischemia during partial nephrectomy: Impact on renal functional outcomes
Institutes: Memorial Sloan Kettering Cancer Center, Dept. of Urology, New York, United States of America

A phase 2 trial of lenvatinib in combination with everolimus in patients with advanced or metastatic non-clear cell renal cell carcinoma
By: Hutson T.1, Xing D.2, Dutcus C.3, Raig M.4, Fishman M.4
Institutes: Texas Oncology, Dallas, United States of America, 1Eisai, Woodcliff Lake, United States of America, 2Eisai, OBG, Woodcliff Lake, United States of America, 3H. Lee Moffitt, Cancer and Research Center, Tampa, United States of America

A national, prospective, non-interventional study (NIS) of nivolumab (BMS-936558) in patients with advanced renal cell carcinoma after prior therapy
By: Grimm M-O., Grünewald V., Bedke J.
APACHE: An open label, randomized, phase 2 study of the anti-Programmed Death-Ligand 1 (PD-L1) Durvalumab (D, MEDI4736), alone or in combination with Tremelimumab (T), in patients (pts) with advanced germ cell tumors (GCT)

By: Necchi A.¹, Mariani L.², Anichini A.³, Giannatempo P.¹, Raggi D.¹, Togliardi E.⁴, Calareso G.⁵, Nicolai N.⁶, Crippa F.⁷, Salvioni R.⁸

Institutes: Fondazione IRCCS - Istituto Nazionale Dei Tumori, Dept. of Medical Oncology, Milan, Italy, Fondazione IRCCS - Istituto Nazionale Dei Tumori, Clinical Epidemiology and Trials Organization Unit, Milan, Italy, Fondazione IRCCS - Istituto Nazionale Dei Tumori, Human Tumors Immunobiology Unit, Milan, Italy, Fondazione IRCCS - Istituto Nazionale Dei Tumori, Pharmacy Unit, Milan, Italy, Fondazione IRCCS - Istituto Nazionale Dei Tumori, Dept. of Radiology, Milan, Italy, Fondazione IRCCS - Istituto Nazionale Dei Tumori, Dept. of Urology, Milan, Italy, Fondazione IRCCS - Istituto Nazionale Dei Tumori, Nuclear Medicine and PET Unit, Milan, Italy

An effective and acceptable cleaning method for re-use of catheters for intermittent catheterisation (IC)

By: Wilks S.¹, Morris N.², Delgado D.², Prieto J.¹, Moore K.³, Macaulay M.⁴, Fader M.¹

Institutes: University of Southampton, Dept. of Health Sciences, Southampton, United Kingdom, Bristol Urological Institute, Dept. of Learning and Research, Bristol, United Kingdom, University of Alberta, Faculty of Nursing, Alberta, Canada, University College London, Conti...
Aims and objectives of this session

Ureteroscopy has become the workhorse in stone management. A huge number of different scopes and disposables are available – which are really needed and why?

Poster viewing of 20 minutes. Presentations will take place on stage. Standard presentations are 2 minutes in length, followed by 2 minutes for discussion.

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Ultra-low X-ray exposure during flexible ureteroscopy in nephrolithiasis patients – how far can we go?

By: Hein S.¹, Schoenthaler M.¹, Wilhelm K.¹, Schoeb D.S.¹, Schlager D.¹, Adams F.¹, Vach W.², Miernik A.¹

Institutes: ¹Medical Centre - University of Freiburg, Dept. of Urology - Division of Urotechnology, Freiburg, Germany, ²University of Freiburg, Centre For Medical Biometry and Medical Informatics, Freiburg, Germany

219

Which flexible ureteroscopes (digital vs optical) can easily reach the difficult lower pole calyces and have better end-tip deflection?

By: Dragoș L.B.¹, Buttice S.², Sener E.T.³, Proietti S.⁴, Ploumidis A.⁵, Iacoboaie C.⁶, Doizi S.⁶, Berg J.⁶, Somani B.⁷, Traxer O.⁶

Institutes: ¹Spitalul Clinic Județean de Urgență 'Pius Branzeu' Timișoara, Dept. of Urology, Timișoara, Romania, ²Università Degli Studi Di Messina, Dept. of Urology, Messina, Italy, ³Marmara University, Dept. of Urology, İstanbul, Turkey, ⁴Ospedale San Raffaele, Dept. of Urology, Milan, Italy, ⁵Athens Medical Center, Dept. of Urology, Athens, Greece, ⁶Hopital Tenon, Université Pierre Et Marie Curie - Paris VI, Dept. of Urology, Paris, France, ⁷University Hospital Southampton NHS Trust, Dept. of Urology, Southampton, United Kingdom

220

A comparison of the effects of ureteroscopy and micro ureteroscopy on renal vascularization and intrapelvic pressure

By: Caballero-Romeu J-P.¹, Galán-Llopis J.-A.², Soria F.³, Morcillo-Martín E.³, Caballero-Pérez P.⁴, De La Cruz-Conty J.-E.³, Romero-Maroto J.³

Institutes: ¹Fisabio-Isabial, Dept. of Urology, Alicante, Spain, ²University Hospital of Vinalopó, Dept. of Urology, Alicante, Spain, ³Jesús Usón Minimally Invasive Surgery Center, Endoscopy Unit, Cáceres, Spain, ⁴University of Alicante, Dept. of Community Nursing, Preventive Medicine and Public Health and History, Alicante, Spain, ⁵University Clinical Hospital of San Juan, Dept. of Urology, Alicante, Spain

221

Predictive factors of insertion failure of ureteral access sheath for flexible ureteroscopy: A study about 594 procedures

By: Forzini T.¹, Lecuelle D.¹, Alezra E.¹, Becquart N.¹, Haraux E.², Saint F.¹, De Sousa P.¹

Institutes: ¹Amiens University Hospital, Dept. of Urology and Transplantation, Amiens, France, ²Amiens University Hospital, Dept. of Pediatric Surgery, Amiens, France

222

Comparison of Holmium laser fibers: Evaluation of fiber durability and flexibility

By: Haddad M.¹, Berthe L.², Doizi S.³, Traxer O.¹

Institutes: ¹Sorbonne Universités, Upmc Univ Paris 06, Ap-Hp, Grc N°20, Groupe De Recherche
Impact of the curve diameter and laser setting on laser fiber fracture
By: Haddad M.1, Emiliani E.1, Doizi S.1, Rouchausse Y.2, Coste F.2, Berthe L.2, Traxer O.1
Institutes: 1Tenon Hospital, Dept. of Urology, Paris, France, 2Ecole Nationale Des Arts Et Metiers, PIMM Laboratory, Paris, France

How to perform the dusting technique for calcium oxalate stones during Ho:YAG lithotripsy
By: Lee J.W.1, Park J.2, Cho M.C.2, Jeong H.2, Son H.2, Cho S.Y.2, Oh J.K.3
Institutes: 1Dongguk University Ilsan Hospital, Dept. of Urology, Goyang, South Korea, 2Seoul Metropolitan Government-Seoul National University Boramae Medical Center, Dept. of Urology, Seoul, South Korea, 3Gachon University Gil Medical Center, Gachon University College of Medicine, Dept. of Urology, Incheon, South Korea

Laser vaporization of urinary stones during retrograde intrarenal surgery (RIRS) is associated with the bacteria spread into the irrigation fluid but not with bacteraemia
By: Cai T.1, Tiscione D.1, Meacci F.2, Mazzoli S.2, Lanzafame P.3, Malossini G.1, Bartoletti R.4
Institutes: 1Santa Chiara Hospital, Dept. of Urology, Trento, Italy, 2Santa Maria Annunziata Hospital, Sexually Transmitted Disease Centre, Florence, Italy, 3Santa Chiara Hospital, Dept. of Microbiology, Trento, Italy, 4University of Pisa, Dept. of Urology, Pisa, Italy

Comparison between the possibilities of holmium and thulium laser in lithotripsy in vitro
By: Glybochko P.1, Altschuler G.2, Vinarov A.1, Rapoport L.1, Enikeev M.1, Grigoriev N.1, Enikeev D.1, Sorokin N.1, Dymov A.1, Sukhanov R.1, Taratkin M.1, Zamyatina V.3
Institutes: 1First Moscow State Medical University of I.M. Sechenov, Research Institute of Urophrology and Reproductive Health, Moscow, Russia, 2IPG Medical, Dept. of Photonics, Oxford, United States of America, 3NTO IRE-Polus, Dept. of Photonics, Moscow, Russia

Evaluation of the New Moses technology of Holmium laser lithotripsy: Initial clinical experience
By: Ibrahim A., Carrier S., Andonian S., Elhilali M.
Institutes: McGill University Health Center, Dept. of Urology, Montreal, Canada

Withdrawn
By:
Institutes:

Viability and biocompatibility of an adhesive system for intrarenal embedding and endoscopic removal of small residual fragments in minimally-invasive stone treatment in an in vivo pig model
By: Hein S.1, Schoenthaler M.1, Schoebs D.S.1, Grunwald I.2, Richter K.-2, Brandmann M.2, Haberstroh J.3, Bronsert P.4, Wetterauer U.5, Miernik A.1
Institutes: 1Medical Centre - University of Freiburg, Dept. of Urology - Division of Urotechnology, Freiburg, Germany, 2Fraunhofer Institute For Manufacturing Technology and Advanced Materials IFAM, Bremen, Germany, Dept. of Adhesive Bonding Technology and Surfaces, Bremen, Germany, 3Medical Centre - University of Freiburg, Dept. of Experimental Surgery, CEMT-FR, Freiburg, Germany, 4Medical Centre - University of Freiburg, Institute of Pathology, Freiburg, Germany, 5Medical Centre - University of Freiburg, Dept. of Urology, Freiburg, Germany

Development and validation of a novel abrasion-based method to assess biofilms on ureteral stents
By: Buhmann M.3, Abt D.1, Altenried S.2, Betschart P.1, Zumstein V.1, Schmid H.-P.1, Maniura-Weber K.2, Ren Q.2
Institutes: 1Kantonsspital St. Gallen, Dept. of Urology, St. Gallen, Switzerland, 2Swiss Federal Laboratories For Materials Science and Technology, Dept. of Materials Meet Life, Laboratory for Biointerfaces, St. Gallen, Switzerland, 3Swiss Federal Laboratories for Materials Science and Technology, Dept. of Materials Meet Life, Laboratory for Biointerfaces, St. Gallen, Switzerland
A Likert analysis about double J stent related urinary symptoms assessed by the Ureteric Stent Symptoms Questionnaire (USSQ) after semirigid and flexible ureteroscopy (RIRS)
By: Bosio A., Alessandria E., Peretti D., Dalmasso E., Destefanis P., Passera R., Gontero P.
Institutes: Città Della Salute E Della Scienza Di Torino - Molinette Hospital, Dept. of Urology, Turin, Italy

Initial experience with Allium™ & Uventa™ stent for the management of ureteric strictures and leak
By: Suntharasivam T., Samuel M., Thomas D., Rix D., Haslam P., William R., Shaw M., Rogers A.
Institutes: 1Freeman Hospital, Dept. of Urology, Newcastle upon Tyne, United Kingdom, 2Freeman Hospital, Dept. of Radiology, Newcastle upon Tyne, United Kingdom

Intestinal colonization resistance is associated with hyperoxaluria in the patients with recurrent pyelonephritis
By: Stepanova N., Stashevska N., Driyanska V., Kolesnyk M.
Institutes: State Institution Institute of Nephrology of The National Academy of Medical Sciences, Dept. of Nephrology, Kyiv, Ukraine
### Aims and objectives of this session

The session is aimed at addressing the multi-variable risk assessment to optimize the use of screening and early detection strategies in prostate cancer.

Poster viewing of 20 minutes. Presentations will take place on stage. Standard presentations are 2 minutes in length, followed by 2 minutes for discussion. Extended presentations (*) are 3 minutes in length, followed by 3 minutes for discussion.

<table>
<thead>
<tr>
<th>Poster Number</th>
<th>Title</th>
<th>Authors</th>
<th>Institutes</th>
<th>Location</th>
</tr>
</thead>
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<tr>
<td>234</td>
<td>An evaluation of a selective prostate cancer screening program using family history as a supplementary tool to PSA: Results from the ProtecT trial</td>
<td>Johnston T., Lamb A., Vowler S., Xiong T., Moore A., Holding P., Davis M., Lane A., Donovan J., Hamdy F., Neal D.</td>
<td>University of Cambridge, Academic Urology Group, Cambridge, United Kingdom, Cancer Research UK Cambridge Institute, Li Ka Shing Centre, Cambridge, United Kingdom, University of Oxford, Nuffield Dept. of Surgical Sciences, Oxford, United Kingdom, University of Bristol, School of Social and Community Medicine, Bristol, United Kingdom, University of Oxford, Nuffield Department of Surgical Sciences, Oxford, United Kingdom</td>
<td>Room Stockholm, North Hall (Level 1)</td>
</tr>
<tr>
<td>235</td>
<td>At what age should a PSA-based screening program start? 20-year results from the Göteborg randomized population-based prostate cancer screening study</td>
<td>Carlsson S., Arnsrud Godtman R., Holmberg E., Lilja H., Månsson M., Stranne J., Hugosson J.</td>
<td>Memorial Sloan Kettering Cancer Center, Dept. of Urology, New York, United States of America, Sahlgrenska Academy, Dept. of Urology, Gothenburg, Sweden, Sahlgrenska Academy, Dept. of Oncology, Gothenburg, Sweden, Memorial Sloan Kettering Cancer Center, Dept. of Surgery, Malmö, Sweden</td>
<td>Room Stockholm, North Hall (Level 1)</td>
</tr>
<tr>
<td>236</td>
<td>Malignancies in male BRCA mutation carriers – results from a prospectively screened cohort of patients enrolled to a dedicated male BRCA clinic</td>
<td>Margel D., Mano R., Benjaminov O., Kedar I., Ozalvo R., Sela S., Ber Y., Daniel J.</td>
<td>Rabin Medical Center, Dept. of Urology, Petah Tikva, Israel, Rabin Medical Center, Dept. of Imaging, Petah Tikva, Israel, Rabin Medical Center, The Raphael Recanati Genetics Institute, Petah Tikva, Israel</td>
<td>Room Stockholm, North Hall (Level 1)</td>
</tr>
<tr>
<td>237</td>
<td>Is further screening of Asian men with low baseline prostate-specific antigen levels (≤ 1.0 ng/ml) worthwhile?</td>
<td>Urata S., Kitagawa Y., Mizokami A.</td>
<td>Kanazawa University, Dept. of Urology, Kanazawa, Japan</td>
<td>Room Stockholm, North Hall (Level 1)</td>
</tr>
</tbody>
</table>
and Center For Surgery and Public Health, Boston, United States of America, Brigham and Women's Hospital, Center for Surgery and Public Health, Boston, United States of America, Uniformed Services University Of The Health Sciences, Dept. Of Surgery, Bethesda, United States of America, Dana-Farber Cancer Institute And Brigham And Women's Hospital, Dept. Of Medical Oncology, Boston, United States of America, Dana-Farber Cancer Institute, Dept. Of Medical Oncology, Boston, United States of America, University Medical Center Hamburg-Eppendorf, Dept. of Urology, Hamburg, Germany, Henry Ford Health System, VUI Center For Outcomes Research, Analytics and Evaluation, Vattikut Urology Institute, Detroit, United States of America, Uniformed Services University Of The Health Sciences, Dept. Of Preventive Medicine And Biostatistics, Bethesda, United States of America

239 Prostate Cancer Screening In High Risk Families: Should PSA Testing Be Performed Yearly In First Degree Relatives With Baseline PSA ≤ 1ng/ml?
By: Callerot P.,1 Moineau M.-P.,1 Cussenot I.,1,2 Baschet F.,3 L'Her J.,1 Doucet L.,1 Cancel-Tassin G.,3 Cormier L.,1 Mangin P.,3 Cussenot O.,3 Fournier G.,1 Valeri A.1
Institutes: Brest University Hospital, Dept. Of Urology, Brest, France, Brest University Hospital, Nuclear Medicine Laboratory, Brest, France, Tenon University Hospital, CeRePP (Centre De Recherche Sur Les Pathologies Prostatiques), Paris, France, Dijon University Hospital, Dept. Of Urology, Dijon, France, Tenon University Hospital, Dept. Of Urology, Paris, France

240 Risk Of Prostate-Cancer Death At 20 Years Stratified By Midlife PSA And A Panel Of Four Kallikrein Markers From A Representative Cohort Of 11,506 Healthy Unscreened Men Aged 45-74
By: Sjoberg D.D.,1 Vickers A.J.,2 Assel M.,2 Dahlin A.,1 Carlsson S.,1 Poon B.Y.,1 Ulmert D.,1 Lilja H.G.1
Institutes: Memorial Sloan Kettering Cancer Center, Dept. Of Urology, New York, United States Of America, Memorial Sloan Kettering Cancer Center, Dept. Of Biostatistics, New York, United States Of America, Lund University, Clinical Microbiology, Malmo, Sweden

241 Inclusion Of MpMRI Into The European Randomized Study Of Screening For Prostate Cancer (ERSPC) Risk Calculator: A New Proposal To Improve The Accuracy Of Prostate Cancer Detection
By: Dell'Oglio P.,1 Stabile A.,1 Gandaglia G.,1 Brembilla G.,2 Maga T.,1 Cristel G.,2 Kinzikeeva E.,1 Losa A.,1 Esposito A.,2 Cardone G.,2 De Cobelli F.,2 Del Maschio A.,2 Gaboardi F.,1 Montorsi F.,1 Briganti A.1
Institutes: Vita-Salute University San Raffaele, Dept. Of Urology, Milan, Italy, Vita-Salute University San Raffaele, Dept. Of Radiology, Milan, Italy

242 Head-To-Head Comparison Of Commonly Used International Prostate Cancer Risk Calculators For Prostate Biopsy
By: Pereira-Azevedo N.,1 Verbeek J.,1 Nieboer D.,2 Steyerberg E.,2 Roobol M.1

243 Outcomes Of PSA-Based Prostate Cancer Screening Among Men Using NonSteroidal Anti-Inflammatory Drugs
By: Murtola T.,1 Vettenranta A.,2 Talala K.,3 Taari K.,4 Stenman U.-H.,3 Tammela T.,1 Auvinen A.6
Institutes: Tampere University Hospital, Dept. Of Urology, Tampere, Finland, University Of Tampere, School Of Medicine, Tampere, Finland, Finnish Cancer Registry, Dept. Of Research, Helsinki, Finland, Helsinki University, School Of Medicine, Helsinki, Finland, Helsinki University Hospital, Dept. Of Biochemistry, Helsinki, Finland, University Of Tampere, School Of Health Sciences, Tampere, Finland

244 Decreasing Screening Efficacy With Increasing Age: Results From A Population-Based Screening Trial - Swiss ERSPC (Aarau)
By: Prazue L.,1 Wyler S.,1 Möltgen T.,1 Huber A.,2 Grobholz R.,3 Manka L.,4 Recker F.,1 Kwiatkowski M.1
Institutes: Cantonal Hospital Aarau, Dept. Of Urology, Aarau, Switzerland, Cantonal Hospital Aarau, Dept. Of Laboratory Medicine, Aarau, Switzerland, Cantonal Hospital Aarau, Dept. Of Pathology, Aarau, Switzerland, Academic Hospital Braunschweig, Dept. Of Urology, Braunschweig, Germany
Stage distribution of prostate cancer at a tertiary care oncology centre in India - reflections of an unscreened population
By: Prakash G.¹, Bakshi G.¹, Shinde R.², Bhamre R.², Murthy V.³, Rent E.⁴, Pal M.¹, Mahantshetty U.³, Menon S.⁵
Institutes: ¹Tata Memorial Hospital, Dept. of Surgical Oncology(urooncology), Mumbai, India, ²Tata Memorial Hospital, Dept. of Surgical Oncology, Mumbai, India, ³Tata Memorial Hospital, Dept. of Radiation Oncology, Mumbai, India, ⁴AJ Shetty Hospital, Dept. of Surgical Oncology, Mangalore, India, ⁵Tata Memorial Hospital, Dept. of Surgical Pathology, Mumbai, India

The diverse genomic landscape of low-risk prostate cancer
By: Cooperberg M.¹, Erho N.², Chan J.³, Feng F.³, Cowan J.³, Simko J.³, Ong K.², Alshalalfa M.⁴, Kolisnik T.², Margrave J.², Aranes M.², Du Plessis M.², Buerki C.⁴, Zhao S.², Tenggara I.³, Davicioni E.², Carroll P.³
Institutes: ¹University of California, Dept. of Urology, San Francisco, United States of America, ²GenomeDx, San Diego, United States of America, ³UCSF, Dept. of Urology, San Francisco, United States of America, ⁴GenomeDx, San Diego, United States of America

A positive digital rectal examination (DRE) does not predict prostate cancer in 45 yr old men - results from the German risk-adapted PCA Screening Trial (PROBASE)
By: Arsov C.¹, Becker N.², Herkommer K.², Gschwend J.³, Imkamp F.⁴, Kuczyk M.⁴, Hadaschik B.⁵, Hohenfellner M.⁵, Siener R.⁶, Kristiansen G.⁷, Antoch G.⁸, Albers P.¹
Institutes: ¹University of Düsseldorf, Dept. of Urology, Düsseldorf, Germany, ²German Cancer Research Center Heidelberg, Division of Cancer Epidemiology (C020), Heidelberg, Germany, ³Technische Universitaet Muenchen, Dept. of Urology, Munich, Germany, ⁴Hanover Medical School, Dept. of Urology, Hanover, Germany, ⁵University of Heidelberg, Dept. of Urology, Heidelberg, Germany, ⁶University of Bonn, Dept. of Urology, Bonn, Germany, ⁷University of Bonn, Dept. of Pathology, Bonn, Germany, ⁸University of Düsseldorf, Dept. of Diagnostic and Interventional Radiology, Düsseldorf, Germany
Men's sexual health: Focus on ED, LiSWT and testosterone replacement therapy

Poster Session 19

Location: Room 7, Capital suite (level 3)

Chairs:
- A. Salonia, Milan (IT)
- E.C. Serefoglu, Ankara (TR)
- R. Tal, Haifa (IL)

Aims and objectives of this session
This session will provide the audience with the most recent clinical evidence from short-term randomized trials regarding low-intensity shockwave therapy (LiSWT) for erectile dysfunction. Additionally, the session will focus on testosterone replacement therapy.

Poster viewing of 20 minutes. Presentations will take place on stage. Standard presentations are 2 minutes in length, followed by 2 minutes for discussion. Extended presentations (+) are 3 minutes in length, followed by 3 minutes for discussion.

248 Virtual cavernoscopy – a unique modality for visualizing cavernosal arteries independent of blood flow
By: Izumi K., Shiozaki K., Miyake T., Sasaki Y., Kishimoto T., Yamanaka M., Kawanishi Y.
Institutes: Takamatsu Red Cross Hospital, Dept. of Urology, Takamatsu, Japan

249 The role of chitosan membranes application on the neurovascular bundles during robot-assisted radical prostatectomy: Preliminary results of a phase II study
By: Porpiglia F., Bertolo R., De Cillis S., Manfredi M., Mele F., Amparore D., Garrou D., Checcucci E., Cattaneo G., Fiori C.
Institutes: San Luigi Hospital, Dept. of Urology, Turin, Italy

250 Role of low-intensity shock wave therapy in the treatment of refractory erectile dysfunction: A prospective randomized controlled trial
By: Zewin T.S., El-Assmy A., Harraz A., Mosbah A., Bazeed M., Sheir K.
Institutes: Urology and Nephrology Center, Mansoura University, Dept. of Urology, Mansoura, Egypt

251 Role of penile low intensity shock wave therapy in the treatment of refractory erectile dysfunction: A prospective, randomized, placebo-controlled study
By: Vinay J., Moreno D., Vives A., Rajmil O., Ruiz-Castane E., Sanchez-Curbelo J.
Institutes: Fundació Puigvert, Dept. of Andrology, Barcelona, Spain

252 Low intensity shock wave treatment (LiSWT) improves erectile function in a session-dependent manner: Results of a randomized trial comparing two treatment protocols
By: Kalyvianakis D., Mykoniatis I., Memnos D., Hatzichristou D.
Institutes: Aristotle University of Thessaloniki, Dept. of Urology, Thessaloniki, Greece

253 Association between erectile dysfunction, testosterone levels and prediction of 10-year cardiovascular mortality
By: Kratiras Z., Makarounis K., Ioakimidis N., Spapis V., Kapogiannis F., Angelis A., Sidiropoulos D., Vlachopoulos C., Tousoulis D., Fasoulakis C.
Institutes: Hippokration General Hospital Athens, Dept. of Urology, Athens, Greece

254 Which patients with non-symptomatic late onset hypogonadism are suitable for testosterone replacement therapy?
By:
255

Deterioration of chronotropic responses and heart rate recovery indices in men with erectile dysfunction

By: Küçükdurmaz F., Acar G., Resim S.

Institutes: Kahramanmaras Sütçü İmam Üniversitesi, Dept. of Urology, Kahramanmaras, Turkey, *Kahramanmaras Sütçü İmam Üniversitesi, Dept. of Cardiology, Kahramanmaras, Turkey

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Adverse effects of testosterone replacement therapy for men, a matched cohort study


Institutes: Brigham and Women's Hospital, Harvard Medical School, Division of Urological Surgery and Center For Surgery and Public Health, Boston, United States of America, Brigham and Women's Hospital, Center For Surgery and Public Health, Boston, United States of America, Brigham and Women's Hospital, Harvard Medical School, Division of Urologic Surgery and Center For Surgery and Public Health, Boston, United States of America, Uniformed Services University of The Health Sciences, Dept. of Surgery, Bethesda, United States of America, Uniformed Services University of The Health Sciences, Dept. of Surgery, Detroit, United States of America, Marienhospital Herne, Ruhr University Bochum, Dept. of Urology, Herne, Germany

257

Acceptance and safety of axillary testosterone gel (Axiron®) in patients with symptomatic hypogonadism

By: Probst K.A., Groenewold F., Janssen M., Stöckle M., Siemer S.

Institutes: Saarland University Medical Center, Dept. of Urology, Homburg, Germany

258

Does calculated free testosterone overcome total testosterone in protecting from sexual symptoms impairment? Findings of a cross-sectional study

By: Boeri L., Capogrosso P., Ventimiglia E., Cazzaniga W., Pederzoli F., Oreggia D., Moretti D., Montanari E., Gaboardi F., Mirone V., Montorsi F., Salonia A.

Institutes: IRccs Fondazione Ca' Granda - Ospedale Maggiore Policlinico, Dept. Of Urology, Milan, Italy, IRCCS San Raffaele Hospital/University Vita-Salute San Raffaele, Division of Oncology/Unit of Urology; URI, Milan, Italy, IRCCS San Raffaele Hospital, Division of Oncology/Unit of Urology; URI, Milan, Italy, University of Naples Federico II, Dept. of Urology, Naples, Italy

259

Efficacy of tadalafil for treating chronic prostatitis/chronic pelvic pain syndrome in patients without erectile dysfunction

By: Park H.J., Park N.C., Moon D.G., Kim T.N., Nam J.K., Park S.W.

Institutes: Busan National University Hospital, Dept. of Urology, Busan, South Korea, Busan National University Yangsan Hospital, Dept. of Urology, Yangsan, South Korea

260

A survey on Korean urologists practice pattern in surgical management of premature ejaculation


Institutes: Korea University Guro Hospital, Dept. of Urology, Seoul, South Korea

Summary

A. Salonia, Milan (IT)
ESU/ESUT Hands-on Training Course in Basic laparoscopy
HOT04

Saturday, 25 March
14:15 - 15:15

Location: Room South America, Exhibition Hall (Level 1)

Aims and objectives of this session
• You will improve your laparoscopic skills such as depth perception and bimanual dexterity

Course description:
In this course basic laparoscopic and suturing skills can be learned and trained. Psychomotor skills such as depth perception and bimanual dexterity are trained by the validated exercises of the European Basic Laparoscopic Urological Skills (E-BLUS) training programme. Experienced laparoscopist-tutors will guide you to master such basic laparoscopy skills as instrument handling, pattern cutting and intracorporal suturing. This course can be used as an additional training to prepare for the E-BLUS examination. Finally, all remaining questions can be answered and discussed with all tutors including the demonstration of tips and tricks.

Target audience: Urologists with a basic level in laparoscopy

C.S. Biyani, Leeds (GB)
G. Hellawell, London (GB)
B. Petrut, Cluj Napoca (RO)
G. Pini, Milano (IT)
T.M. Ribeiro De Oliveira, Alges (PT)
L. Tunc, Ankara (TR)
B.S.E.P. Van Cleynenbreugel, Leuven (BE)
P.J. Zondervan, Amsterdam (NL)
Aims and objectives of this session

- Prostate cancer presents a global public. While the ERSPC has showed a reduction in prostate cancer mortality, the potential for negative effects from over-diagnosis and treatment cannot be ignored. This is why the evidence for and against prostate cancer screening remains controversial.
- Today's challenges include the age when to start screening, screening intervals and the optimal use of “intelligent screening” which would incorporate many factors other than PSA such as Family history, Ethnicity and Genetic factors.
- Active surveillance is now widely accepted as a management strategy for low risk prostate cancer with definitive treatment used if there is evidence that the patient is at increased risk for disease progression. Multiple studies consistently found a low rate of progression to metastatic disease or death from prostate cancer with active surveillance; in addition, the majority of patients did not require definitive therapy.
- Clinical and pathological factors influencing the risk of disease progression in patients with low risk prostate cancer under active surveillance, surveillance strategy, role of repeat biopsy, inclusion criteria, use of MRI will be discussed.

14:30 - 17:30

Screening
J. Hugosson, Göteborg (SE)

14:30 - 17:30

Active surveillance
A.R. Zlotta, Toronto (CA)
Advanced course on urethral stricture surgery
ESU Course 8

Location: Room 11, Capital suite (level 3)
Chair: R. Inman, Sheffield (GB)

Aims and objectives of this session
To update on latest advances and evidence for treatment for male urethral stricture disease including
- Investigations and assessment
- Minimally invasive and endoscopic treatment
- Urethroplasty for anterior urethral strictures (Penile and bulbar strictures)
- Surgery for posterior urethral strictures (Pelvic fracture injuries)
The course will consist of lectures, reviews of the evidence regarding treatment of strictures and interactive case discussions to illustrate decision making.

14:30 - 17:30
Introduction
R. Inman, Sheffield (GB)

14:30 - 17:30
Basic principles, anatomy and minimally invasive management of urethral stricture disease
P. Nyirády, Budapest (HU)

14:30 - 17:30
Management of anterior urethral stricture disease
R. Inman, Sheffield (GB)

14:30 - 17:30
Urethroplasty for posterior urethral injuries
L. Martinez-Piñeiro, Madrid (ES)

14:30 - 17:30
Female strictures
R. Inman, Sheffield (GB)

14:30 - 17:30
Interesting cases and final questions
R. Inman, Sheffield (GB)
L. Martinez-Piñeiro, Madrid (ES)
P. Nyirády, Budapest (HU)
Management of BPO: From medical to surgical treatment, including setbacks and operative solutions (SOS)

ESU Course 9

Aims and objectives of this session
• To help delegates understand the principles and evidence behind the assessment and medical management of a BPO patient.
• To summarise / review the evidence base for electro surgery and lasers for surgical management of BPO.
• To help delegates understand the factors that influence the patient’s and surgeon’s choice of treatment modalities
• Setbacks and Operative Solutions (SOS): Tips and Tricks to improve outcomes and avoid complications.

Scientific Programme
Aims and objectives of this session
In many parts of Europe, open retropubic radical prostatectomy is still the gold standard for treating localised prostate cancer. The competition with radiotherapy and novel techniques like cryosurgery and HIFU, should encourage urologists to optimally perform the surgical resection.
This teaching course is a must for the elder resident and the younger urologist but well trained urologists who do not treat many patients with localised prostate cancer, will benefit.
Aims and objectives of this session
Trauma is a leading cause of death and morbidity in civilian populations. All Urologists will have to manage trauma patients and need to understand basic principles. The EAU Guidelines Group prepare guidelines in order to assist in the management of urological trauma and these principles will be followed for the specific organ systems and in the context of polytrauma.
• Urological trauma is usually associated with other injuries. The role of the urologist in polytrauma is important to understand.
• Modern diagnostic imaging and interventional radiology techniques has resulted in a greater understanding of organ injury and treatment
• Increasing use is made of non-operative or delayed surgical intervention with a resulting higher rate of organ preservation.
• Minimising long term morbidity is an important role for injuries that are usually not life threatening.

14:30 - 17:30
Introduction
N.D. Kitrey, Ramat Gan (IL)

14:30 - 17:30
General trauma considerations
D.M. Sharma, London (GB)

14:30 - 17:30
Renal trauma
N.D. Kitrey, Ramat Gan (IL)

14:30 - 17:30
Ureteral trauma
D.M. Sharma, London (GB)

14:30 - 17:30
Bladder trauma
N.D. Kitrey, Ramat Gan (IL)

14:30 - 17:30
Urethral trauma
D.M. Sharma, London (GB)

14:30 - 17:30
Genital trauma
N.D. Kitrey, Ramat Gan (IL)
Aims and objectives of this session
This course gives practical information about prolapse management by urologists. From anatomy to mesh implant, the recent revival of native tissue repairs and the management of complications. Also laparoscopic and robotic approaches will be evaluated.

14:30 - 17:30
Introduction
D.J.M.K. De Ridder, Leuven (BE)

14:30 - 17:30
Vaginal surgical anatomy for urologists
E. Kocjancic, Chicago (US)

14:30 - 17:30
Investigations and imaging for POP
D.J.M.K. De Ridder, Leuven (BE)

14:30 - 17:30
Vaginal Native tissue repair
D.J.M.K. De Ridder, Leuven (BE)

14:30 - 17:30
Vaginal Mesh repair
E. Kocjancic, Chicago (US)

14:30 - 17:30
Open/laparoscopic/robotic repair
H. Hashim, Bristol (GB)

14:30 - 17:30
Classification and Management of complications & case discussion
H. Hashim, Bristol (GB)
E. Kocjancic, Chicago (US)
How to write results and discussion
ESU Course 13

Location: Room 17, Capital suite (level 3)
Chair: J.W.F. Catto, Sheffield (GB)

Aims and objectives of this session
To understand how to write the Results and Discussion sections of a scientific paper. To understand how to present your data to its best potential. To work through examples of good and bad practice. To understand key points when writing. To get insight from editors about what they expect to see and what they look for.

– To understand what makes good Results section and how best to present your data.
– To understand what makes a good Discussion
– To learn from experienced editors.

14:30 - 16:30
Welcome
J.W.F. Catto, Sheffield (GB)

14:30 - 17:30
How to write the results chapter
S. Boorjian, Rochester (US)

14:30 - 17:30
Choosing and presenting your statistical analyses
M. Assel

14:30 - 16:30
Group working I

14:30 - 16:30
Present findings to audience

14:30 - 16:30
Examples of good and bad results

14:30 - 16:30
Writing the discussion section
J.-N.L. Cornu, Rouen (FR)

14:30 - 16:30
Suggestions for own papers

14:30 - 16:30
Examples of graphs – which are appropriate and best

14:30 - 17:30
What the editor looks when reviewing the results and discussion
S. Boorjian, Rochester (US)

14:30 - 16:30
Group working II

14:30 - 16:30
Examples of good and bad discussions

14:30 - 16:30
How to interpret the literature
<table>
<thead>
<tr>
<th>Time</th>
<th>Session</th>
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<tbody>
<tr>
<td>14:30 - 16:30</td>
<td>Suggestions for own papers</td>
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<tr>
<td>14:30 - 16:30</td>
<td>What next?</td>
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<tr>
<td>14:30 - 16:30</td>
<td>Questions and answers</td>
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ESU/ESFFU Hands-on Training Course in OnabotulinumtoxinA administration for OAB

**Location:** Room Europe, Exhibition Hall (Level 1)

**Chair:** M. Belal, Birmingham (GB)

**Aims and objectives of this session**
Botulinum toxin type A administration in Urology has become common practice over the last two decades. Following the completion of Phase 3 registration trials in OAB, OnabotulinumtoxinA received marketing approval for this indication and now has a standardised injection paradigm. This course is procedure-focused, and will teach attendees the practicalities of OnabotulinumtoxinA administration through short lectures, videos and hands-on demonstrations using bladder models. Attendees will learn how to reconstitute the product and see different types of equipment available.

**Target audience:** For all participants with an interest in OnabotulinumtoxinA administration for OAB

E. Chartier-Kastler, Paris (FR)
A. Garcia Mora, Mexico City (MX)
M.S. Rahnama'i, Heerlen (NL)
ESU/ERUS Hands-on Training Course in Robotic surgery - advanced virtual robotic procedural training

HOT24

Saturday, 25 March
15:30 - 17:00

Location: Room Asia, Exhibition Hall (Level 1)
Chair: J.S. Schraml, Usti Nad Labem (CZ)

Aims and objectives of this session
• You will improve your laparoscopic skills such as advanced suturing and emergency vessel repair.

Course description
This course is dedicated to intermediate laparoscopic skills, with main focus on suturing techniques. Intermediate skills have been selected with an experts' survey, between the most important tasks to achieve before approaching full laparoscopic procedures. Experienced laparoscopic-tutors selected by ESU and ESUT will guide you to master special knot-tying techniques, laparoscopic anastomoses and even a Major Vessel Injury repair. Tips and tricks can be answered and discussed with all tutors during the session. The intermediate laparoscopic training sessions require a full mastery of basic skills: for this reason, E-BLUS certification is required for subscription.

Target audience: Urologist with an E-BLUS certificate that want to learn more about laparoscopy

A. Ploumidis, Athens (GR)
ESU/ESUT Hands-on Training Course in Thulium laser for vaporesection and Holmium laser for laser lithotripsy

**Location:** Room Africa, Exhibition Hall (Level 1)

**Aims and objectives of this session**

Aims and objectives for the Vaporesection and Vaporization of BPH training:
- The trainee will understand the tissue vaporization effect by the Thulium 2 micron continuous wave laser, the limited depth of tissue damage and how to vaporize and to perform a cut in tissue.
- The trainee is challenged to introduce the laser resectoscope into the artificial organ of the training device, maneuver the resectoscope in the artificial prostatic urethra and manage to vaporize and cut tissue samples.

Aims and objectives for Holmium laser lithotripsy:
- the fragmentation effect on artificial stones by the Holmium laser at different laser settings and the importance of the fibre position with respect to the stone,
- the handling of rigid and flexible ureterorenoscopes,
- importance and influence of the irrigation management.

H-O. Teichmann, Kathlenburg Lindau (DE)
A. Secker, Münster (DE)
A. Miernik, Freiburg (DE)
M. Oelke, Hanover (DE)
ESU/ESUT Hands-on Training Course in Intermediate laparoscopy
HOT37

Saturday, 25 March
15:45 - 16:45

Location: Room South America, Exhibition Hall (Level 1)
Chair: P. Macek, Prague (CZ)

Aims and objectives of this session
- You will improve your laparoscopic skills such as advanced suturing and emergency vessel repair.

Course description:
This course is dedicated to intermediate laparoscopic skills, with main focus on suturing techniques. Intermediate skills have been selected with an experts’ survey, between the most important tasks to achieve before approaching full laparoscopic procedures. Experienced laparoscopic-tutors selected by ESU and ESUT will guide you to master special knot-tying techniques, laparoscopic anastomoses and even a Major Vessel Injury repair. Tips and tricks can be answered and discussed with all tutors during the session. The intermediate laparoscopic training sessions require a full mastery of basic skills: for this reason, E-BLUS certification is required for subscription.

Target audience: Urologist with an E-BLUS certificate that want to learn more about laparoscopy

F. Greco, Crotone (IT)
B. Petrut, Cluj Napoca (RO)
G. Pini, Milano (IT)
B.S.E.P. Van Cleynenbreugel, Leuven (BE)
A. Skolarikos, Athens (GR)
**Aims and objectives of this session**

To understand how to optimize perioperative outcomes in cystectomy.

Poster viewing of 20 minutes. Presentations will take place on stage. Standard presentations are 2 minutes in length, followed by 2 minutes for discussion.

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**Postoperative psoas muscle loss and nutritional deterioration after radical cystectomy for patients with invasive bladder cancer**

*By: Miyake M.¹, Morizawa Y.¹, Hori S.¹, Marugami N.², Shimada K.³, Gotoh D.³, Tatsumi Y.¹, Nakai Y.¹, Anai S.¹, Tanaka N.¹, Fujimoto K.¹*

*Institutes:* Nara Medical University, Dept. of Urology, Nara, Japan, ²Nara Medical University, Dept. of Radiology, Nara, Japan, ³Nara City Hospital, Dept. of Pathology, Nara, Japan

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**Robot-assisted laparoscopic cystectomy vs. open mini-laparotomy cystectomy: Evaluation of anti-inflammatory potential of CO2-pneumoperitoneum in a randomized porcine study**

*By: Kingo P.S.¹, Rasmussen T.M.¹, Jakobsen L.K.¹, Palmfeldt J.², Borre M.¹, Nørregaard R.², Jensen J.B.¹*

*Institutes:* ¹Aarhus University Hospital, Skejby, Dept. of Urology, Aarhus N, Denmark, ²Aarhus University Hospital, Skejby, Dept. of Clinical Medicine, Aarhus N, Denmark

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Withdrawn

*By:*

*Institutes:*

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**20-gene expression signature to predict lymph node positive disease at radical cystectomy for muscle-invasive bladder cancer: Not validated**

*By: Van Kessel K.¹, Van De Werken H.², Lukrin L.¹, Ziel–Van Der Made A.¹, Zwarthoff E.¹, Boormans J.³*

*Institutes:* Erasmus MC, Dept. of Pathology, Rotterdam, The Netherlands, ²Erasmus MC, Cancer Computational Biology Center (CCBC), Rotterdam, The Netherlands, ³Erasmus MC, Dept. of Urology, Rotterdam, The Netherlands

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**The use of antibiotic prophylaxis in patients undergoing radical cystectomy for bladder cancer**

*By: Haider M.¹, Mayr R.¹, Fritsche H.-M.¹, Ladurner C.², Pycha A.², Compløj E.², Lemire F.³, Lacombe L.³, Fradet Y.³, Lodde M.³*

*Institutes:* ¹University of Regensburg, Dept. of Urology, Regensburg, Germany, ²General Hospital of Bolzano, Dept. of Urology, Bolzano, Italy, ³Laval University, Dept. of Urology, Quebec, Canada

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**Can radical cystectomy be performed safely in the metastatic setting? Location of metastatic bladder cancer as a determinant of in-hospital mortality**

*By: Zaffuto E.¹, Moschini M.², Leyh-Bannurah S-R.², Gazdovich S.³, Dell'Oglio P.¹, Pompe R.², Shariat S.⁴, Montorsi F.², Briganti A.¹, Saad F.², Karakiewicz P.³*

*Institutes:* ¹IRCCS Ospedale San Raffaele, Division of Oncology/Unit of Urology; URI, Milan, Italy, ²Prostate Cancer Center Hamburg-Eppendorf, Martini-Clinic, Hamburg, Germany, ³University of Montreal Health Center, Cancer Prognostics and Health Outcomes Unit, Montreal, Canada, ⁴Medical University of Vienna, Dept. of Urology, Vienna, Austria, ⁵University of Montreal Health
Increasing use of incontinent urinary diversion: A total population analysis of radical cystectomies in Germany from 2006 to 2013
By: Groeben C., Koch R., Baunacke M., Wirth M., Huber J.
Institutes: TU Dresden, Medical Faculty Carl Gustav Carus, Dept. of Urology, Dresden, Germany; TU Dresden, Medical Faculty Carl Gustav Carus, Dept. of Medical Statistics and Biometry, Dresden, Germany

Incidence and risk factors for venous thromboembolism after transurethral resection of bladder tumor: A population-based analysis
Institutes: IRCCS Ospedale San Raffaele, Dept. of Oncology and Urology, Milan, Italy; Prostate Cancer Center Hamburg-Eppendorf, Martini-Clinic, Hamburg, Germany; University of Montreal Health Center, Cancer Prognostics and Health Outcomes Unit, Montreal, Canada; Medical University of Vienna, Dept. of Urology, Vienna, Austria; University of Montreal Health Center, Dept. of Cancer Prognostics and Health Outcomes, Montreal, Canada

Diarrhea as a limiting factor of quality of life after radical cystectomy: Results from a cross-sectional study evaluating long-term bowel issues in bladder cancer patients
By: Hupe M.C., Vahlensieck W., Hennig M., Ozimek T., Struck J., Tezval H., Merseburger A., Kuczyk M., Kramer M.
Institutes: University Hospital Schleswig-Holstein, Campus Luebeck, Dept. of Urology, Luebeck, Germany; Kurpark-Klinik, Dept. of Urology, Bad Nauheim, Germany; Hanover Medical School, Dept. of Urology, Hanover, Germany

Low psoas muscle volume indicates long hospitalization after radical cystectomy
By: Kawahara T., Saitoh Y., Miyoshi Y., Uemura H.
Institutes: Yokohama City University Medical Center, Dept. of Urology and Renal Transplantation, Yokohama, Japan

Efficacy of long acting sandostatin on reducing mucus production in patients with ileal neobladder
By: Khorrami M.H.
Institutes: Isfahan University of Medical Sciences, Dept. of Urology, Isfahan, Iran

Pure histological variants are associated with poor survival at radical cystectomy in patients with bladder cancer
Institutes: IRCCS Ospedale San Raffaele, Dept. of Urology, Milan, Italy; Magna Graecia University of Catanzaro, Dept. of Urology, Catanzaro, Italy; Luzerner Kantonsspital, Dept. of Urology, Lucerne, Switzerland; Medical University of Vienna, Dept. of Urology, Vienna, Austria

Comparative effectiveness of trimodal therapy versus radical cystectomy for localized muscle-invasive urothelial carcinoma of the bladder
Institutes: Brigham and Women’s Hospital, Harvard Medical School, Division of Urological Surgery
17:19 - 17:26

Summary
P. Anderson, Melbourne (AU)
Aims and objectives of this session
This poster session presents complex conditions in reconstructive patient care.

Poster viewing of 20 minutes. Presentations will take place on stage. Standard presentations are 2 minutes in length, followed by 2 minutes for discussion.

275
Open repair of bladder neck contractures (BNC) with or without adjuvant radiotherapy – our experience in 42 patients
By: Ivaz S., Bugeja S., Frost A., Dragova M., Andrich D., Mundy A.
Institutes: UCLH NHS Foundation Trust, Dept. of Urology, London, United Kingdom

276
The T-plasty as a modified YV-plasty for the treatment of highly recurrent bladder neck stenosis: High success and patient satisfaction rates
By: Rosenbaum C., Reiss P., Engel O., Kluth L., Fisch M., Dahlem R.
Institutes: Universitätsklinikum Hamburg-Eppendorf, Dept. of Urology, Hamburg, Germany

277
The effect of radiotherapy on the outcome of the repair of urorectal fistulae
By: Ivaz S., Frost A., Dragova M., Bugeja S., Andrich D., Mundy A.
Institutes: UCLH NHS Foundation Trust, Dept. of Reconstructive Urology, London, United Kingdom

278
The longer-term results of non-transecting bulbar urethroplasty
By: Frost A., Ivaz S., Bugeja S., Dragova M., Andrich D., Mundy A.
Institutes: UCLH NHS Foundation Trust, Dept. of Reconstructive Urology, London, United Kingdom

279
Comparative assessment of postoperative erectile function and quality of life in male one-stage onlay vs. inlay buccal mucosal graft urethroplasty
Institutes: University Medical Center Hamburg-Eppendorf, Dept. of Urology, Hamburg, Germany

280
Re-do urethroplasty after unsuccessful urethral reconstruction with buccal mucosa graft
By: Pandey A., Borisenkov M., Barta-Kelemen A., Keller H.
Institutes: Sana Klinikum Hof GmbH, Dept. of Urology, Hof, Germany

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Characteristics and predictors of complications after urethroplasty: Effect of operative duration, length of stay, and use of tissue transfer
By: Lacy J., Dugan A., Gupta S.
Institutes: University of Kentucky, Dept. of Urology, Lexington, United States of America, University of Tennessee, Dept. of Urology, Knoxville, United States of America, University of Kentucky, Dept. of Surgery, Lexington, United States of America

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UREThRAL Stricture Score can predict surgical outcome of urethral reconstruction in patients with anterior urethral stricture
Institutes: Toho University Faculty Of Medicine, Dept. of Urology, Ohta, Japan
Surgical outcomes of primary and recurrent female urethral diverticula
By: Ko K.J.¹, Chung H.W.¹, Lee C.U.¹, Na J.P.¹, Sung H.H.¹, Choi S.M.², Lee K-S.¹
Institutes:¹Samsung Medical Center, Sungkyunkwan University School of Medicine, Dept. of Urology, Seoul, South Korea, ²Gyeongsang National University H, Dept. of Urology, Jinju, South Korea

Midterm follow up of patients performed fold-back perineoscrotal flap plus penile inversion vaginoplasty for male-to-female gender reassignment surgery
By: Tavakkoli Tabassi K., Ghoreifi A., Hosseini E., Eghtesadi M., Moradian S.
Institutes:Mashhad University of Medical Sciences, Dept. of Urology, Mashhad, Iran

Evaluation of success rate, functional outcome, comorbidity and quality of life in patients with one-stage ventral onlay buccal mucosa graft urethroplasty for urethral stricture disease after radiotherapy using a validated patient-reported outcome measure (PROM)
By: Körner-Riffard K., Gild P., Vetterlein M., Rosenbaum C., Loewe C., Dahlem R., Fisch M., Kluth L.
Institutes:University Medical Center Hamburg-Eppendorf, Dept. of Urology, Hamburg, Germany

Prospective patient-centred evaluation of urethroplasty using a patient reported outcome measure
By: Chawla A.¹, Kapadia A.², Hegde P.²
Institutes:¹Kasturba Medical College, Manipal University, Dept. of Urology and Renal Transplant, Manipal, India, ²Kasturba Medical College Hospital, Dept. of Urology, Manipal, India

De novo penile deviation after urethroplasty with oral mucosa: A relevant problem?
By: Pandey A., Raita C., Beier J.
Institutes:Sana Klinikum Hof GmbH, Dept. of Urology, Hof, Germany

Evaluation of the single-incision system to treat pelvic organ prolapse: Follow-up from 24 to 96 months of first 178 patients
By: Castroviejo Royo F.¹, Martinez-Sagara Oceja J.M.¹, Conde Redondo C.¹, Rodríguez Toves L.A.¹, Gonzalez TejerO C.², Marina García Tuñón C.², Tapia Herrero A.¹, García Viña A.¹, Poza Del Val M.¹, Miralles Ayuso S.¹
Institutes:¹Rio Hortega University Hospital, Dept. of Urology, Valladolid, Spain, ²Rio Hortega University Hospital, Dept. of Gynecology, Valladolid, Spain

Collagen cell carrier for urethral reconstructive surgery: First results of a long-term minipig model
By: Aufderklamm S.¹, Kelp A.¹, Maurer S.¹, Gustafsson L.¹, Busch S.², Vaegler M.², Stenzl A.¹, Sievert K-D.¹, Amend B.¹
Institutes:¹Eberhard Karls University Tübingen, Dept. of Urology, Tübingen, Germany, ²Viscofan, BioEngineering, Weinheim, Germany, ³University Clinic Charité, Experimental and Clinical Research Center (ECRC), Berlin, Germany
Evolving trends in prostate cancer surgery

Video Session 05

Saturday, 25 March
16:00 - 17:30

Location: Room Paris, North Hall (Level 1)

Chairs: W.L.M. Everaerts, Kessel-Lo (BE)
R. Gaston, Bordeaux (FR)
F. Gómez Veiga, Salamanca (ES)

Aims and objectives of this session

In this video session the evolving trends in surgery for prostate cancer will be discussed. The objectives are to demonstrate the advances of minimally invasive surgery in the functional and oncological outcomes of prostate cancer surgery.

All presentations have a maximum length of 8 minutes, followed by 4 minutes of discussion.

V33

Anatomical extended pelvic lymph node dissection
By: Branger N. 1, Mortier P. 1, Koskas Y. 1, Thomassin-Piana J. 2, Salem N. 3, Gravis G. 4, Pignot G. 1, Walz J. 1
Institutes: 1Institut Paoli Calmettes, Dept. of Urology, Marseille, France, 2Institut Paoli Calmettes, Dept. of Pathology, Marseille, France, 3Institut Paoli Calmettes, Dept. of Radiation Oncology, Marseille, France, 4Institut Paoli Calmettes, Dept. of Oncology, Marseille, France

V34

P.L.E.A.T.-preventing lymphocele ensuring absorption transperitoneally: A novel technique
By: Dal Moro F., Zattoni F.
Institutes: University of Padua, Dept. of Surgery, Oncology and Gastroenterology - Urology, Padua, Italy

V35

Retzius-sparing robot-assisted radical prostatectomy is safe for patients with prior transurethral prostate surgery
By: Kim L.H., Santok G.D., Abdel Raheem A., Chang K., Lum T., Rha K.H.
Institutes: Yonsei University College Of Medicine, Dept. of Urology, Seoul, South Korea

V36

The role of bed assistant during robot assisted radical prostatectomy: The effect of learning curve on peri-operative variables
By: Albo G., Rocco B., De Lorenzo E., Gallioli A., Boeri L., Palmisano F., Montanari E.
Institutes: IRCCS Cà Granda Ospedale Maggiore Policlinico, Dept. of Urology, Milan, Italy

V37

Single-port laparoscopic radical prostatectomy
By: Vattovani V. 1, Luciani L. 2, Chiodini S. 2, Puglisi M. 3, Mattevi D. 3, Tamanini I. 4, Malossini G. 2
Institutes: 1Santa Chiara Hospital, Trento, Italy, 2Trento, Italy, 3Santa Chiara Hospital, Trento, Italy, 4Dept. of Urology, Trento, Italy, 5Verona University, Dept. of Urology, Verona, Italy

V38

Single-port robotic assisted radical prostatectomy is feasible and safe
By: Gaboardi F., Grillo M., Pini G., Smelzo S., Passaretti G., Rosso M., Kinzikeeva E., Saitta G., Suardi N.
Institutes: San Raffaele Turro Hospital, Dept. of Urology, Milan, Italy

V39

Combining antegrade and retrograde dissection during salvage robotic radical prostatectomy
By: Ferriero M., Simone G., Mastroianni R., Tuderti G., Misuraca L., Minisola F., Guaghanone S., Gallucci M.
Institutes: Regina Elena National Cancer Institute, Dept. of Urology, Rome, Italy
Radical prostatectomy after vascular targeted photodynamic therapy Tookad® Soluble: Feasability, short and long term results


Institutes: Hospital Center Lyon Sud, Dept. of Urology, Lyon, France, Hospital Center, Dept. of Urology, Angers, France, Centre Hospitalier Lyon Sud, Dept. of Urology, Lyon, France, Hospital Center, Dept. of Urology, Besançon, France, Hospital Center, Dept. of Urology, Leuven, Belgium, Antoni Van Leeuwenhoek Hospital, Dept. of Urology, Amsterdam, The Netherlands, Spire Portsmouth Hospital, Dept. of Urology, Hamburg, Germany, Hospital Center, Dept. of Urology, Valencia, Spain, Hospital Center, Dept. of Urology, Sevilla, Spain, Clinique Atlantis, Dept. of Urology, Nantes, France, Centre Hospitalier, Dept. of Urology, Nantes, France, Institut Mutualiste Montsouris, Dept. of Urology, Paris, France, Institut STEBA, Dept. of Urology, Paris, France
Outcome in minimally invasive surgery for BPO

Poster Session 22

Location: Room Amsterdam, North Hall (Level 1)

Chairs: T. Hermanns, Zürich (CH)
        J.Y. Park, Gangneung (KR)
        C.G. Roehrborn, Dallas (US)

Aims and objectives of this session
The outcomes in minimally invasive surgery for BPO will be discussed from the perspective of complications.

Poster viewing of 20 minutes. Presentations will take place on stage. Standard presentations are 2 minutes in length, followed by 2 minutes for discussion.

296

Thulium vapoenucleation of the prostate versus holmium laser enucleation of the prostate for the treatment of benign prostatic obstruction: 6-month safety and efficacy results of a prospective randomized trial
By: Netsch C.¹, Becker B.¹, Tiburtius C.¹, Moritz C.¹, Venneri Becci A.¹, Herrmann T.², Gross A.¹
Institutes: ¹Asklepios Klinik Barmbek, Dept. of Urology, Hamburg, Germany, ²MHH Medical School of Hanover, Dept. of Urology, Hanover, Germany

290

Treatment failure and perioperative complications after GreenLight laser vaporisation of the prostate
By: Calandriello M., Abbinante M., De Giorgi G., Giannarini G., Crestani A., Ficarra V.
Institutes: Academic Medical Centre Hospital Santa Maria Della Misericordia, Dept. of Urology, Udine, Italy

291

Postoperative dysuria after high- and low-power en-bloc no-touch HoLEP
By: Cracco C.M., Ingrosso M., Russo N., Scoffone C.M.
Institutes: Ospedale Cottolengo, Dept. of Urology, Turin, Italy

300

Low-power versus high-power en-bloc no-touch HoLEP: Comparing feasibility, safety and efficacy
By: Cracco C.M., Ingrosso M., Russo N., Scoffone C.M.
Institutes: Ospedale Cottolengo, Dept. of Urology, Turin, Italy

292

One-fourth of patients may report impairment of erectile function after holmium laser enucleation of the prostate (HoLEP)
By: Marquette T., Comat V., Capon G., Pasticier G., Bernhard J., Bensadoun H., Ferriere J., Robert G.
Institutes: CHU bordeaux, Dept. of Urology, Bordeaux, France

293

Can preoperative detrusor underactivity have an impact on surgical outcomes of laser prostatectomy: Comparison in serial 3-year follow-up outcomes between 120-W lithium triborate photoselective vaporization of the prostate (PVP) and holmium laser enucleation of the prostate (HoLEP)
By: Ahn C.H.², Park J.¹, Sun D.Y.², Cho S.Y.¹, Baik S.², Chun S.J.⁴, You K.H.⁵, Cho M.C.¹, Park K.², Jeong H.¹, Kim S.W.², Paick J-S.², Son H.¹
Institutes: ¹Boramae Medical Center, Dept. of Urology, Seoul, South Korea, ²Seoul National University, Dept. of Urology, Seoul, South Korea, ³Chosun University School of Medicine, Dept. of Urology, Gwangju, South Korea, ⁴Gwangju Verteerans Hospital, Dept. of Urology, Gwangju, South Korea, ⁵Gwanmyeong Sungae Hospital, Dept. of Urology, Gwanmyeong, South Korea
Results of laser Greenlight® 180-W XPS vaporization for benign prostatic obstruction in patients with antithrombotic therapy or platelet aggregation inhibitors: A multicentric study

By: Lefevre M.1, Huet R.1, Lebdai S.2, Ouzaid I.3, Fontenil A.2, Gerbaud F.3, Ravery V.3, Azzouzi A-R.2, Peyronnet B.1, Bensalah K.1, Verhoest G.1, Vincendeau S.1, Mathieu R.1

Institutes: Rennes University Hospital, Dept. of Urology, Rennes, France, University Hospital of Angers, Dept. of Urology, Angers, France, Bichat-Claude Bernard Hospital, Dept. of Urology, Paris, France

Photoselective vaporization of the prostate with Greenlight laser XPS 180W, Green laser enucleation of the prostate and open prostatectomy for benign prostatic obstruction: A comparative analysis of perioperative and short term results

By: Huet R.1, Vincendeau S.1, Sebe P.2, Peyronnet B.1, Guillé F.1, Colau A.2, Verhoest G.1, Bensalah K.1, Guillonneau B.2, Mathieu R.1

Institutes: CHU Rennes, Dept. of Urology, Rennes, France, Les Diaconesses Croix St Simon Hospital, Dept. of Urology, Paris, France

Holmium laser enucleation of the prostate (HoLEP) does not prevent from all bleeding complications in patients on anti-coagulant therapy

By: Comat V., Marquette T., Capon G., Bernhard J-C., Pasticiac G., Bensadoun H., Ferrière J-M., Robert G.

Institutes: Chu Bordeaux, Dept. of Urologie, Bordeaux, France

Thulium laser prostate enucleation in refractory urinary retention: Operative and functional outcomes in a large cohort of patients

By: Carmignani L.1, Pastore A.2, Picozzi S.1, Vizziello D.1, Finkelberg E.1, Ratti D.1, Schirinzi M1, Saccà A.1, Pisano F1, Maruccia S.3

Institutes: San Donato Hospital Milan, Dept. of Urology, Milan, Italy, Sapienza University of Rome, Urology Division, Latina, Italy, Papa Giovanni XXIII, Dept. of Urology, Bergamo, Italy, Città Della Salute E Della Scienza, Dept. of Urology, Turin, Italy, Istituti Clinici Zucchi, Dept. of Urology, Monza, Italy

Prospective randomized study comparing monopolar with bipolar transurethral resection of prostate on a large cohort of patients with benign prostatic obstruction: Long term outcomes


Institutes: Sapienza University of Rome, Dept. of Medico Surgical Sciences and Biotechnologies, Latina, Italy

Convective radiofrequency water vapor energy ablation effectively treats lower urinary tract symptoms due to benign prostatic enlargement regardless of obesity while preserving erectile and ejaculatory function: Results of a multicenter, randomized, controlled trial

By: Gupta N., Köhler T., McVary K.

Institutes: Southern Illinois University, Dept. of Urology, Springfield, United States of America

Suprapubic catheter insertion: What is the harm?

By: Donaldson J., Murray I., Janjua K., Mitchell I.

Institutes: Victoria Hospital, Dept. of Urology, Kirkcaldy, United Kingdom

Complications in minimally invasive surgery for LUTS

C.G. Roehrborn, Dallas (US)
Basic science in functional urology: Where do we stand?

Poster Session 23

Saturday, 25 March
16:00 - 17:30

Location: Room Berlin, North Hall (Level 1)

Chairs: D. Eberli, Zürich (CH)
        S. Poletajew, Warszawa Wesola (PL)

Aims and objectives of this session
Cell-based therapy, genetics, receptors and channels...the story continues.

Poster viewing of 20 minutes. Presentations will take place on stage. Standard presentations are 2 minutes in length, followed by 2 minutes for discussion. Extended presentations (*) are 3 minutes in length, followed by 3 minutes for discussion.

303
The inhibitory effect of neuropeptide Y Y1 receptor agonist on micturition reflex in rats
By: Honda M.1, Yoshimura N.2, Kimiura Y.1, Kawamoto B.1, Tsounapi P.1, Hikita K.1, Shimizu S.3, Shimizu T.3, Saito M.3, Chancellor M.4, Takenaka A.1
Institutes: 1Tottori University Faculty of Medicine, Dept. of Urology, Yonago, Japan, 2University of Pittsburgh, Dept. of Urology, Pittsburgh, United States of America, 3Kochi Medical School, Dept. of Pharmacology, Nankoku, Japan, 4William Beaumont Hospital, Dept. of Urology, Royal Oak, United States of America

304
Development of neurogenic detrusor overactivity is prevented by early bladder afferent desensitization in spinal cord injured rats
By: Oliveira R.1, Coelho A.1, Cruz F.2, Cruz C.1
Institutes: 1Faculty of Medicine, University of Porto, Institute For Innovation and Health Research, Dept. of Biomedicine, Translational NeuroUrology Group, Porto, Portugal, 2Hospital São João, Porto, Institute For Innovation and Health Research, Translational NeuroUrology Group, Porto, Portugal

305
Effects of neurotrophins and bladder tissue on neurite outgrowth in cultured mouse pelvic ganglia
By: Zhu B.1, Ekman M.1, Zeng J.3, Swärd K.1, Uvelius B.3
Institutes: 1Lund University, Dept. of Experimental Medical Science, Lund, Sweden, 2The Sixth Affiliated Hospital of Guangzhou Medical University, Dept. of Urology, Qingyuan, China, 3Lund University, Dept. of Urology, Clinical Sciences, Lund, Sweden

306
Corresponding microRNA and mRNA expression profiles in a mouse model of bladder outlet obstruction and human patients’ biopsies
By: Monastyrskaya K.1, Köck I.2, Vasquez E.3, Hashemi Gheinani A.2, Baumgartner U.4, Sack B.3, Lukianov S.3, Burkhard F.1, Adam R.3
Institutes: 1University Hospital Bern, Dept. of Urology, Bern, Switzerland, 2Urology Research Laboratory, Dept. of Clinical Research, Bern, Switzerland, 3Urological Diseases Research Center, Boston Children’s Hospital, Boston, United States of America, 4Institute of Pathology, Dept. of Molecular Pathology, Bern, Switzerland

307
Imaging human skeletal muscle regeneration after stem cell application for sphincter reconstruction using diffusion tensor imaging (DTI) and magnetisation transfer (MT) measurements
By: Keller D.1, Eberhardt C.2, Rottmar M.2, Haralampieva D.1, Sulser T.1, Boss A.2, Eberli D.1
Institutes: 1University Hospital Zurich, Dept. of Urology, Zürich, Switzerland, 2University Hospital Zurich, Institute for Diagnostic and Interventional Radiology, Zürich, Switzerland

308
In vivo evaluation of the effectiveness of an innovative technology for the recovery of erectile
dysfunction after radical prostatectomy
By: Skoufias S.¹, Adamakis I.¹, Levis P.¹, Stergiopoulos N.², Araujo Fraga Da Silva R.², Papaioannou T.G.³, Constantinitides C.¹
Institutes: Laiko Hospital, Dept. of Urology, Goudi - Athens, Greece, ²Ecole Polytechnique Federale De Lausanne, Institute of Bioengineering, Lausanne, Switzerland, ³Hippokration Hospital, Biomedical Engineering Unit, First Dept. of Cardiology, Athens, Greece

Serotonin paraneuronal cells in the urethral epithelium of human and rodents: Expression and function
By: Coelho A.², Oliveira R.², Cavaleiro H.², Cruz C.D.², Cruz F.¹
Institutes: Hospital S. Joao, IBMC and I3S, University of Porto, Dept. of Urology, Porto, Portugal, ²Faculty of Medicine, IBMC and I3S, University of Porto, Dept. of Biomedicine, Porto, Portugal

Expression of programmed death ligand 1 in interstitial cystitis patients is correlated with bladder pain degree and hydrodistension outcome
By: Chen Y., Yu W., Yang Y., Fan Y., Wu S., Jin J.
Institutes: Peking University First Hospital, Dept. of Urology, Beijing, China

Understanding the role of stem cells in urinary bladder regeneration - a preclinical study in a large animal model
By: Pokrywczynska M.¹, Jundzill A.¹, Buhl M.¹, Balcerczyk D.¹, Rasmus M.¹, Warda K.¹, Buchholz L.¹, Kowalski F.¹, Kwieciński P.², Drewa T.¹
Institutes: Nicolaus Copernicus University in Torun, Ludwik Rydygier Medical College, Dept. of Regenerative Medicine, Bydgoszcz, Poland, ²Vetlab, Brudzew, Poland

Effects of cell transport medium, temperature, period, density and container type for retention of therapeutic potency of mesenchymal stem cells
Institutes: Kyungpook National University Medical Center, Dept. of Urology, Daegu, South Korea

Urinary bladder regenerate by recruiting developmental hedgehog signaling pathway
By: Pokrywczynska M., Jundzill A., Warda K., Rasmus M., Buchholz L., Kowalski F., Drewa T.
Institutes: Nicolaus Copernicus University in Torun, Ludwik Rydygier Medical College, Dept. of Regenerative Medicine, Bydgoszcz, Poland

Uncovering links between metabolic syndrome and lower urinary tract symptoms suggestive of BPH at molecular level: First evidence for an involvement of the ghrelin system
Institutes: LMU Munich, Dept. of Urology, Munich, Germany

Pathophysiological roles of TRPA1 channel in lipopolysaccharide (LPS)-induced bladder inflammatory nociception and hypersensitivity in mice
By: Kamei J.¹, Aizawa N.¹, Nakagawa T.², Kaneko S.³, Homma Y.⁴, Igawa Y.¹
Institutes: The University of Tokyo Graduate School of Medicine, Dept. of Continence Medicine, Tokyo, Japan, ²Kyoto University Hospital, Dept. of Pharmacy, Kyoto, Japan, ³Kyoto University, Graduate School of Pharmaceutical Sciences, Dept. of Molecular Pharmacology, Kyoto, Japan, ⁴The University of Tokyo Graduate School of Medicine, Dept. of Urology, Tokyo, Japan

The neurotransmitters in the periaqueductal grey matter, involved in bladder function
By: Zare A.¹, Jahanshahi A.², Rahnama’i M.S.¹, Celine M.², Van Koeveringe G.¹
Institutes: Maastricht UMC+, Dept. of Urology, Maastricht, The Netherlands, ²Maastricht University, Dept. of Neuroscience, Maastricht, The Netherlands
Aims and objectives of this session

Tumours of the adrenal gland are a heterogeneous group of lesions that arise from either the adrenal cortex or the medulla. These tumours are extremely rare and exhibit an average annual age-adjusted incidence of 0.29 cases per 100,000 individuals. They include several subtypes of lesions that can be either malignant or benign. Some of these tumours are functional and produce hormonal and metabolic syndromes that can lead to their discovery. Other adrenal tumours (up to 50% of tumours, depending on the histologic subtype) are silent and are only discovered when they attain a large size and produce localised abdominal symptoms or metastases. However, the discovery of adrenal incidentalomas is becoming increasingly frequent due to the widespread use of abdominal ultrasonography, computed tomography and magnetic resonance imaging.

Most of these tumours are sporadic, and their aetiology remains unknown. However, several syndromes have been associated with an increased risk of adrenal tumours, and the underlying molecular defects of these syndromes have advanced our understanding of the molecular pathways involved in the tumourigenesis of adrenal tumours. The aim of this session is to focus on the most recent studies examining differences in the incidence, prognosis, work-up, and modern surgical management of different subtypes of adrenal tumours.

Poster viewing of 20 minutes. Presentations will take place on stage. Standard presentations are 2 minutes in length, followed by 2 minutes for discussion. Extended presentations (*) are 3 minutes in length, followed by 3 minutes for discussion.

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Adrenal vein sampling vs. CT scan to determine treatment in primary aldosteronism: An outcome-based randomised diagnostic trial


Institutes: 1University Medical Center Nijmegen, Dept. of Urology, Nijmegen, The Netherlands, 2University Medical Center Nijmegen, Dept. of Internal Medicine, Nijmegen, The Netherlands, 3Institute of Cardiology, Dept. of Hypertension, Warsaw, Poland, 4University Medical Center Nijmegen, Dept. of Radiology, Nijmegen, The Netherlands, 5University Medical Center Nijmegen, Dept. of Health Evidence, Nijmegen, The Netherlands, 6University Medical Center Utrecht, Dept. of Vascular Medicine, Utrecht, The Netherlands, 7University Medical Center Groningen, Dept. of Endocrinology, Groningen, The Netherlands, 8Erasmus Medical Center, Dept. of Internal Medicine, Rotterdam, The Netherlands, 9Academic Medical Center, Dept. of Internal and Vascular Medicine, Amsterdam, The Netherlands, 10University Medical Center Nijmegen, Dept. of Laboratory Medicine, Nijmegen, The Netherlands, 11Institute of Cardiology, Dept. of Interventional Cardiology and Angiology, Warsaw, Poland

**318**

Longitudinal evaluation of health related quality of life following laparoscopic adrenalectomy: Impact of adrenalectomy on cortisol-producing adenoma

Programmed death-ligand 1 expression in pheochromocytoma
By: Yasuhiro H., Tanaka T., Imai A., Hatakeyama S., Yoneyama T., Koie T., Ohyama C.
Institutes: Hiroaki University Graduate School of Medicine, Dept. of Urology, Hiroaki, Japan

Visualization of aldosterone-related steroids on adrenal frozen sections
By: Nishimoto K., Higashi T., Nishikawa T., Seki T., Oyama M., Kosaka T., Oya M., Suematsu M., Sugiura Y.
Institutes: Saitama Medical University International Medical Center, Dept. of Uro-Oncology, Hidaka, Japan, 2Tokyo University of Science, Dept. of Faculty of Pharmaceutical Sciences, Noda, Japan, 3Yokohama Rosai Hospital, Endocrinology & Diabetes Center, Yokohama, Japan, 4California University of Science and Medicine, School of Medicine, Dept. of Medical Education, Colton, United States of America, 5Keio University School of Medicine, Dept. of Biochemistry, Shinjuku, Japan, 6Keio University School of Medicine, Dept. of Urology, Shinjuku, Japan

Ten minutes rapid measurement of aldosterone and active renin concentration may change the diagnosis and treatment of primary aldosteronism
By: Satoh F., Morimoto R., Ono Y., Tezuka Y., Omata K., Nezu M., Iwakura Y., Igarashi Y., Kudo M., Arao Y., Ito S.
Institutes: Tohoku University Graduate School Of Medicine, Division Of Clinical Hypertension, Endocrinology & Metabolism, Sendai, Japan, 2Tohoku University Hospital, Division of Nephrology, Endocrinology and Vascular Medicine, Sendai, Japan, 3Tohoku University Hospital, Dept. of Urology, Sendai, Japan, 4Tohoku University Graduate School of Medicine, Division of Clinical Hypertension, Endocrinology & Metabolism, Sendai, Japan

Prognosis of patients with malignant adrenal pheochromocytomas: A conditional probability analysis
By: Wenjun X., Zhu Y., Ye D.
Institutes: Fudan University Shanghai Cancer Center, Dept. of Urology, Shanghai, China

Partial laparoscopic adrenalectomy as a method of surgical management of adrenal tumors
By: Knei evili N., Milas I., Kulić T., Penezlić L., El Saleh A., Bašak Kosman I., Kaštelan Z.
Institutes: University Hospital Zagreb, Dept. of Urology, Zagreb, Croatia, 2University Hospital Zagreb, Dept. of Anesthesiology, Zagreb, Croatia

Predictive factors of hypertension persistence after adrenalectomy in Conn adenoma
By: Prudhomme T., Becquart N., Cordonnier C., Duly Bouhanick B., Bennet A., Thoulouzan M., Soulié M., Saint F., Huyghe E.
Institutes: CHU Rangueil, Dept. of Urology, Toulouse, France, 2CHU D’Amiens, Dept. of Urology, Amiens, France, 3CHU Rangueil, Dept. of Arterial Hypertension, Toulouse, France, 4CHU Larrey, Dept. of Endocrinology, Toulouse, France

Comparative study of laparoscopic (216 cases) and robotic (40 cases) posterior retroperitoneal anatomical adrenalectomy
Institutes: The First Affiliated Hospital of Nanchang University, Dept. of Urology, Nanchang, China

Outcomes of adrenalectomy for adrenal metastasis of renal cell carcinoma in the era of adrenal-sparing radical nephrectomy: A multicenter study
Institutes: CHU Rennes, Dept. of Urology, Rennes, France, 2CHU Brest, Dept. of Urology, Brest, France, 3CHU Amiens, Dept. of Urology, Amiens, France, 4CHU Toulouse, Dept. of Urology, Toulouse, France, 5CHU Tours, Dept. of Urology, Tours, France, 6CHU Rouen, Dept. of Urology, Rouen, France, 7CHU Orleans, Dept. of Urology, Orleans, France, 8CH Orleans, Dept. of Urology, Orleans, France, 9CH Toulouse, Dept. of Urology, Toulouse, France
Summary
To be confirmed
Aims and objectives of this session
Retrograde intrarenal stone surgery became easier with the availability of new technologies. Have we reached 100% stone-free rate?

Poster viewing of 20 minutes. Presentations will take place on stage. Standard presentations are 2 minutes in length, followed by 2 minutes for discussion.

328
To determine the frequency of stone free rates in patients undergoing ureterorenoscopy using S.T.O.N.E score
By: Younis M.A., Khan N., Ather M.H.
Institutes: Aga Khan University Hospital, Dept. of Surgery, Karachi, Pakistan

329
ScorDiS-RIRS: A proposal for a new scoring system to predict difficult retrograde intra-renal surgery for renal stones
By: Dal Moro F., Beltrami P., Mandato F.G., Bettin L., Iafrate M., Ruggera L., Zattoni F.
Institutes: University of Padua, Dept. of Surgery, Oncology and Gastroenterology - Urology, Padua, Italy

330
External validation of Imamura nomogram as preoperative predictive system for semi-rigid ureterolithotripsy outcomes
By: De Nunzio C.1, Bellangino M.1, Voglino O.A.1, Baldassarri V.1, Presicce F.1, Pignatelli M.2, Tema G.1, Berardi E.2, Cremona A.2, Tubaro A.1
Institutes: 1Sant’ Andrea Hospital - Sapienza University, Dept. of Urology, Rome, Italy, 2Sant’ Andrea Hospital - Sapienza University, Dept. of Radiology, Rome, Italy

331
Tailoring antibiotic prophylaxis for ureteroscopic procedures based on local resistance profiles may lead to reduced rates of infections and urosepsis
Institutes: Rambam Health Care Campus, Technion Faculty of Medicine, Dept. of Urology, Haifa, Israel

332
Impact of preoperative β-adrenergic antagonists on ureteral access sheath insertion force and the upper limit of force to avoid ureteral mucosal injury: A randomized-controlled study
By: Koo K.C.1, Lee D.H.2, Yoon J.H.2, Park N.-C.2, Lee K.S.1, Kim D.K.1, Kim J.C.1, Oh K.T.1, Heo J.E.1, Cho K.S.1, Hong C.H.1, Chung B.H.1
Institutes: 1Yonsei University College of Medicine, Dept. of Urology, Seoul, South Korea, 2Yonsei University, School of Mechanical Engineering, Seoul, South Korea, 3Pusan National University Hospital, Pusan National University College of Medicine, Dept. of Urology, Pusan, South Korea

333
Preoperative ureteral wall thickness predicts the presence of impacted stone in patients with ureteral stone undergoing ureteroscopic lithotripsy
By: Takashi Y.1, Inoue T.2, Murota T.2, Kinoshita H.2, Matsuda T.2
Institutes: 1Kansai Medical University, Dept. of Urology and Andrology, Hirakata, Japan, 2Kansai Medical University, Dept. of Urology and Andrology, Osaka, Japan
Use of post-ureteroscopy lesion scale for the evaluation of ureteral damage: Does it need a learning curve?
Institutes: Fisabio-Isabial, Dept. of Urology, Alicante, Spain, University Hospital of Vinalopó, Dept. of Urology, Alicante, Spain, Jesús Usón Minimally Invasive Surgery Centre - Endoscopy Unit, Dept. of Urology, Cáceres, Spain, University of Alicante, Dept. of Community Nursing, Preventive Medicine and Public Health and History, Alicante, Spain, University Clinical Hospital of San Juan, Dept. of Urology, Alicante, Spain

Preliminary results of a prospective randomized trial of safety guidewire use in ureteroscopic stone surgery: To use or not to use
By: Tanidir Y., Bahadir S., Sener T.E., Sulukaya M., Sekerci C.A., Tinay I., Simsek F.
Institutes: Marmara University School of Medicine, Dept. of Urology, Istanbul, Turkey

Lithiasic size estimation according to the image technique
Institutes: Virgen Del Rocio University Hospital. Seville Biomedicine Institute (Ibis), Dept. of Urology and Nephrology., Seville, Spain

Effects of flexible ureteroscopy on renal blood flow
By: Şener T.E., Bin Hamri S., Sever I.H., Ozdemir B., Tanidir Y., Traxer O.
Institutes: Marmara University School of Medicine, Dept. of Urology, Istanbul, Turkey, King Abdulaziz National Guard Hospital, Dept. of Urology, Riyadh, Saudi Arabia, Marmara University School of Medicine, Dept. of Radiology, Istanbul, Turkey, Pierre & Marie Curie University, Tenon University Hospital, Dept. of Urology, Paris, France

Secondary signs on preoperative CT as predictive factors of febrile urinary tract infection
Institutes: Kyungpook National University School of Medicine, Dept. of Urology, Daegu, South Korea

A prospective, observational study to investigate change of separate renal function in patients who underwent minimally invasive renal stone surgery according to the preoperative differential renal function
By: Choo M.S., Ryu K.H., Park J., Cho M.C., Son H., Jeong H., Cho S.Y.
Institutes: Hallym University Dongtan Sacred Heart Hospital, Dept. of Urology, hwaseong-si, South Korea, SMG-SNU Boramae Medical Center, Dept. of Urology, seoul, South Korea, Gwangmyeong Sungea Hospital, Dept. of Urology, Gwangmyeong-city, South Korea

Endoscopic recognition of kidney lithiasis: Validation of first intra-operative imaging
By: Estrade V., Benmeziani R., Jour I., Daudon M., Traxer O.
Institutes: Centre Hospitalier d’Angoulême, Dept. of Urology, angouleme, France, Lister Hospital, Dept. of Urology, Stevenage, United Kingdom, Hopitaux Universitaires Est Parisien Tenon, Multidisciplinary Functional Explorations, Paris, France, Hopitaux Universitaires Est Parisien Tenon, Dept. of Urology, Paris, France

Retrograde intrarenal surgery in the elderly: Is it feasible and safe?
By: Berardinelli F., De Francesco P., Marchioni M., Proietti S., Hennessey D., Dalpiaz O., Cracco C., Soffone C., Giusti G., Cindolo L., Schips L.
Institutes: S. Pio Da Pietrelcina Hospital, Dept. of Urology, Vasto, Italy, University of Porto, Faculty of Psychology and Educational Sciences, Porto, Portugal, Urological Research Institute, ICRCS Ospedale San Raffaele, Ville Turro Division, Dept. of Urology, Milan, Italy, Austin Health, Dept. of Urology, Melbourne, Australia, Medizinische Universität Graz, Urologische Klinik, Graz, Austria, Ospedale Cottolengo, Dept. of Urology, Turin, Italy
Secondary intervention due to symptomatic ureteral stones is not necessary in the majority of patients after previous stenting

By: Stojkova E., Moltzahn F., Burkhard F., Thalmann G., Roth B.

Institutes: University Hospital Bern, Dept. of Urology, Bern, Switzerland

Expanding the limits of the use of the Avicenna Roboflex URS-robot: Update of the clinical results of the European Avicenna Roboflex Group

By: Klein J-T.1, Fiedler M.2, Charlampogianis N.2, Rieker P.2, Sätzler N.2, Scheitlin W.2, Kabakci S.3, Sağlam R.4, Rassweiler J.2

Institutes: 1Universitätsklinikum Ulm, Dept. of Urology and Pediatric Urology, Ulm, Germany, 2SLK-Klinikum GmbH, Dept. of Urology, Heilbronn, Germany, 3Elmed, Medical Department, Ankara, Turkey, 4Medicana International, Dept. of Urology, Ankara, Turkey
Novel methods to improve detection and outcomes of prostate cancer

**Poster Session 26**

**Location:** Room Stockholm, North Hall (Level 1)

**Chairs:** A. Rannikko, Helsinki (FI)
P. Stattin, Uppsala (SE)
L-P. Xie, Hangzhou (CN)

**Aims and objectives of this session**

The aim of this session is to provide an update on novel approach to improve detection and outcomes of prostate cancer.

Poster viewing of 20 minutes. Presentations will take place on stage. Standard presentations are 2 minutes in length, followed by 2 minutes for discussion. Extended presentations (*) are 3 minutes in length, followed by 3 minutes for discussion.

### 344

**Repeat prostate-specific antigen tests before prostate biopsy: A decreasing in PSA values is associated with a reduced risk of cancer and particularly high grade cancer**

**By:** De Nunzio C., Lombardo R., Presicce F., Deroma M., Tema G., Cancrini F., Tubaro A.

**Institutes:** Sant' Andrea Hospital - Sapienza University, Dept. of Urology, Rome, Italy

### 345

**Atorvastatin before prostatectomy and prostate cancer - a randomized, double-blind, placebo controlled clinical trial**

**By:** Murtola T., Riikonen J., Syväälä H., Tolonen T., Koskimäki J., Pakarainen T., Kaipia A., Isotalo T., Kujala P., Tammela T.

**Institutes:** Tampere University Hospital, Dept. of Urology, Tampere, Finland, University of Tampere, School of Medicine, Tampere, Finland, Fimlab Laboratories, Dept. of Pathology, Tampere, Finland, Satakunta Central Hospital, Dept. of Urology, Pori, Finland, Päijät-Häme Central Hospital, Dept. of Urology, Lahti, Finland

### 346

**The effect of metformin use and the incidence of prostate cancer in type 2 diabetes mellitus patients: A nationwide population-based study**


**Institutes:** Chungbuk National University, Dept. of Urology, Cheongju, South Korea, Chungbuk National University Hospital, Office of Public Health, Cheongju, South Korea, College of Medicine, Chungbuk National University, Dept. of Preventive Medicine, Cheongju, South Korea, National Police Hospital, Dept. of Urology, Seoul, South Korea, Chungbuk National University College of Medicine, Dept. of Urology, Cheongju, South Korea, Kyungpook National University Medical Center, Dept. of Urology, Daegu, South Korea

### 347

**An automated-microcapillary electrophoresis-based immunoassay system may improve diagnostic accuracy of prostate cancer and be a good indicator of biopsy Gleason score**

**By:** Ishikawa T., Yoneyama T., Tobisawa Y., Hatakeyama S., Kurosawa T., Nakamura K., Koie T., Hashimoto Y., Ohyama C.

**Institutes:** Hirosaki University Graduate School of Medicine, Dept. of Urology, Hirosaki, Japan, Wako Pure Chemical Industries, Ltd., Diagnostics Research Laboratories, Amagasaki, Japan

### 348

**Association between single nucleotide polymorphisms, gene expression and prostate cancer risk at the moment of diagnosis**


**Institutes:** Complejo Hospitalario Universitario Granada, Dept. of Urology, Granada, Spain, Pfizer-
Clinical usefulness of eight novel monoclonal antibodies against prostate-specific antigen (PSA) to differentiate prostate cancer and benign prostate hyperplasia. Measurement of different PSA molecular forms with specific immunoassays

By: Navarro S.1, Royo M.2, Martos L.2, Vera Donoso C.D.3, Martinez-Sarmiento M.1, Alapont J.M.1, Ramon L.A.1, Oto J.1, España F.3, Medina-Badenes P.2

Institutes: La Fe, University and Polytechnic Hospital, Dept. of Urology, Valencia, Spain, 2Instituto de Investigación Sanitaria La Fe, Grupo De Hemostasia, Trombosis, Arteriosclerosis Y Biología Vascular, Valencia, Spain

Defining a cohort of men who may not require repeat prostate biopsy based on PCA3 and MRI: The double negative effect

By: Perlis N.1, Al-Kasab T.1, Ahmad A.1, Goldberg E.1, Fadak K.1, Sayyid R.1, Finelli A.1, Kulkarni G.1, Hamilton R.1, Zlotta A.2, Fleschner N.1

Institutes: 1University of Toronto, University Health Network, Dept. of Surgical Oncology, Division of Urology, Toronto, Canada, 2University of Toronto, University Health Network and Sinai Health System, Dept. of Surgical Oncology, Division of Urology, Toronto, Canada

Circulating tumor cells as a marker of bone metastases in patients with high-risk prostate cancer

By: Ciełkikowski W.A.1, Ida A.1, Habr M.1, Budnja J.2, Il wierczewska M.2, Jankowiak A.2, Zabel M.2, Antczak A.1

Institutes: Poznań University of Medical Sciences, Dept. of Urology, Poznań, Poland, 2Poznań University of Medical Sciences, Dept. of Histology and Embryology, Poznań, Poland

Clinical validation of a 17-gene genomic prostate score (GPS) assay as a predictor of distant metastases in men with prostate cancer (PCa) treated with radical prostatectomy (RP) in a community setting

By: Van Den Eeden S.1, Zhang N.4, Shan J.1, Quesenberry C.1, Han J.2, Tsiatis A.3, Lu R.4, Lawrence J.5, Febbo P.5, Presti J.5

Institutes: 1Kaiser Permanente Northern California, Dept. of Research, Oakland, United States of America, 2Kaiser Oakland Medical Center, Dept. of Pathology, Oakland, United States of America, 3Genomic Health, Dept. of Pathology, Redwood City, United States of America, 4Genomic Health, Dept. of Biostatistics, Redwood City, United States of America, 5Genomic Health, Medical Department, Redwood City, United States of America, 6Kaiser Oakland Medical Center, Dept. of Urology, Oakland, United States of America

Serum miRNA-supported transrectal MRI-ultrasound fusion-guided biopsy of the prostate enhances tumor prediction and classification

By: Keck B., Wach S., Pöllmann J., Jansen T., Taubert H., Wullich B.

Institutes: University Hospital Erlangen, Dept. of Urology, Erlangen, Germany

The influence of physical activity on prostate cancer diagnosis: A multicenter biopsy cohort analysis

By: De Nunzio C.1, Cindolo L.2, Sourotoulidis P.3, Toutziaris C.4, Gacci M.5, Presicce F.1, Cancrini F.1, Schips L.3, Seri S.5, Tubaro A.1

Institutes: 1Sant'Andrea Hospital - Sapienza University, Dept. of Urology, Rome, Italy, 2Padre Pio Da Pietrelcina Hospital, Dept. of Urology, Vasto, Italy, 3General Hospital of Veria, Dept. of Urology, Veria, Greece, 4Aristotle University of Thessaloniki, Dept. of Urology, Thessaloniki, Greece, 5Careggi Hospital, Dept. of Urology, Florence, Italy

Mutation of duffy antigen receptor for chemokines (DARC) as an indicator of prostate cancer severity in Afro-Caribbean men

By: Galustian C.1, Rani A.1, Cahill F.2, Santaolalla A.2, Gillett C.3, Lombardelli C.3, Rosekilly J.3, Sakellariou C.1, George G.3, Papaevangelou E.1, Smith R.4, Smolarek D.4, Van Hemelrijk M.2, Dasgupta P.4

Institutes: Kings College London, Innate Immunity, MRC Centre for Transplantation, London,
Germline mutations in the Kallikrein 6 region and predisposition for aggressive prostate cancer


Institutes: 1Mount Sinai Hospital, Dept. of Surgery (urology), Toronto, Canada, 2Mount Sinai Hospital, Lunenfeld-Tanenbaum Research Institute, Toronto, Canada, 3Cantonal Hospital Aarau, Dept. of Urology, Aarau, Switzerland, 4Ontario Institute For Cancer Research, Informatics & Biocomputing Program, Toronto, Canada, 5Princess Margaret Hospital, University Health Network, Dept. of Surgical Oncology, Urology, Toronto, Canada, 6Mount Sinai Hospital, Dept. of Surgery and Urology, Toronto, Canada, 7Memorial University, Craig L. Dobbin Genetics Research Centre, Discipline of Genetics, Faculty of Medicine, St. John’s, Canada, 8Mount Sinai Hospital, Dept. of Surgery, Urology, Toronto, Canada, 9Mount Sinai Hospital, Dept. of Pathology and Laboratory Medicine, Toronto, Canada, 10Princess Margaret Hospital, University Health Network, Ontario Cancer Institute, Toronto, Canada, 11Toronto General Hospital, University Health Network, Dept. of Pathology, Toronto, Canada

Summary

A. Rannikko, Helsinki (FI)
## New therapeutic approaches in RCC

### Poster Session 27

**Location:** Room Munich, North Hall (Level 1)

**Chairs:**
- U. Capitanio, Milan (IT)
- A. Fernando, London (GB)
- T. Klatte, Wien (AT)

**Aims and objectives of this session**
To demonstrate various types of new therapeutic approaches in renal tumours.

Poster viewing of 20 minutes. Presentations will take place on stage. Standard presentations are 2 minutes in length, followed by 2 minutes for discussion.

### 357 Proposal and validation of a dynamic criterion for patient inclusion in kidney cancer active surveillance protocols


**Institutes:** Ircs Ospedale San Raffaele, Urological Research Institute, Division of Oncology, Unit of Urology, Milan, Italy,

### 358 The natural history of observed large renal masses

**By:** Touma N., Leslie R., Ho L., Siemens R., Menard A.

**Institutes:** Queen's University, Dept. of Urology, Kingston, Canada,

### 359 Renal warm ischemia time and glomerular loss: An experimental study in a pig model

**By:** Damasceno-Ferreira J., Abreu L., Bechara G., Costa W., Pereira-Sampaio M., Sampaio F., De Souza D.

**Institutes:** Rio de Janeiro State University, Urogenital Research Unit, Rio de Janeiro, Brazil

### 360 Renal function after selective internal radiation therapy (SIRT) with yttrium-90 (Y-90) resin microspheres in patients with primary renal cell carcinoma (RCC): The RESIRT study

**By:** Aslan P., Clark W., Patel M., Vass J., Cade D., De Silva S. J., De Souza P.

**Institutes:** Waratah Private Hospital, Dept. of Urology, Hurstville, Australia,

### 361 Better nephron sparing option for patients with cT1 stage renal masses: Comparison of open, laparoscopic partial nephrectomy and radiofrequency ablation

**By:** Alekseev B., Kalpinskiv A., Nyushko K., Vorobiev N., Taraki H., Muhomedyarova A., Sundui Y., Kaprin A.

**Institutes:** National Medical Research Radiological Center, Dept. of Oncourology, Moscow, Russia

### 362 Percutaneous ablation of small renal tumours: A multi-centre experience

**By:** Yeap S.H.A., Yeow S.Y., Lohan R., Pua U., Teo C., Png K.S.

**Institutes:** Khoo Teck Puat Hospital, Tan Tock Seng Hospital, Dept. of Urology, Singapore,

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**Scientific Programme**

**EAU London 2017**

197
Minimally invasive conservative treatment of localized renal tumors: A single center experience on percutaneous ablations and robot-assisted partial nephrectomy
By: Grassano Y., Cornelis F., Grenier N., Michiels C., Capon G., Bensadoun H., Robert G., Ferriere J-M., Bernhard J-C.
Institutes: Groupe hospitalier Pellegrin, Dept. of Urology, Bordeaux, France, Groupe hospitalier Pellegrin, Dept. of Radiology, Bordeaux, France

Laparoscopic versus percutaneous cryoablation for T1 renal masses: An Italian multicentric study
By: De Concilio B., Cicero C., Zeccolini G., Lagana F., Balestrieri L., Casarrubia G., Zattoni F., Merlo F., Siracusano S., Celia A.
Institutes: San Bassiano Hospital, Dept. of Urology, Bassano del Grappa, Italy, San Bassiano Hospital, Dept. of Radiology, Bassano del Grappa, Italy, Dolo Hospital, Dept. of Urology, Dolo, Italy, C.R.O. Aviano Hospital, Dept. of Oncology, Aviano, Italy, Padova University Hospital, Dept. of Radiology, Padua, Italy, Padova University Hospital, Dept. of Urology, Padua, Italy, Mestre Hospital, Dept. of Urology, Mestre, Italy, Verona University Hospital, Dept. of Urology, Verona, Italy

Microwave ablation versus radiofrequency ablation for small renal lesions; a comparison of efficacy and safety
By: Evans R., Abusanade O., Thwaini A., Keane J., Loan W.
Institutes: Belfast City Hospital, Dept. of Urology, Belfast, United Kingdom

CO2 laser dissection (COLD) knife robotic partial nephrectomy for solid renal pseudotumors in a porcine model: Idea, development, exploration, assessment, long-term monitoring (IDEAL) stage 0 study
By: Alruwaily A., Rohde J., Garneys L., Palapattu G., Ghani K.
Institutes: University of Michigan, Dept. of Urology, Ann Arbor, United States of America, Intuitive Surgical, Atlanta, United States of America

Histopathologic analysis of tumor bed after in vitro tumor enucleation on radical nephrectomy specimen
By: Lu Q., Ji C., Zhao X., Guo S., Liu G., Zhang S., Li X., Gan W., Guo H.
Institutes: Nanjing Drum Tower Hospital, The Affiliated Hospital of Nanjing University Medical School, Dept. of Urology, Nanjing, China, Nanjing Medical University, School of Public Health, Nanjing, China

Combined robot-assisted salvage partial nephrectomy and cryotherapy after radiofrequency failure on a solitary kidney
By: Michiels C., Grenier N., Grassano Y., Cornelis F., Capon G., Vuong N-S., Susperregui J., Robert G., Pasticier G., Bensadoun H., Ferriere J-M., Bernhard J-C.
Institutes: Bordeaux University Hospital, Dept. of Urology, Bordeaux, France, Bordeaux University Hospital, Dept. of Radiology, Bordeaux, France

Summary
A. Fernando, London (GB)
Men's sexual health: Focus on treatment of erectile dysfunction and Peyronie's disease
Poster Session 28
Saturday, 25 March
16:00 - 17:30

Location: Room 7, Capital suite (level 3)
Chairs: M.M. Fode, Herlev (DK)
D. Hatzichristou, Thessaloniki (GR)
J. Romero-Otero, Madrid (ES)

Aims and objectives of this session
This session will provide the audience with the most recent clinical evidence on the treatment of erectile dysfunction and Peyronie's disease. The main aim is to leave the audience with ideas which can be implemented in everyday clinical practice.

Poster viewing of 20 minutes. Presentations will take place on stage. Standard presentations are 2 minutes in length, followed by 2 minutes for discussion. Extended presentations (+) are 3 minutes in length, followed by 3 minutes for discussion.

368
Safety and potential effect of a single intracavernous injection of autologous adipose-derived regenerative cells in patients with erectile dysfunction following radical prostatectomy: 12-month follow-up
Institutes: Odense University Hospital, Dept. of Urology, Odense, Denmark

369
A pilot study on the safety and feasibility of VL#FIA3-30 - a newly developed topical agent for treating erectile dysfunction
By: Appel B., Massarwa O., Gruenwald I.
Institutes: Rambam Health Care Campus, Dept. of Urology, Haifa, Israel

370
Multicenter investigation of the microorganisms involved in penile prosthesis infection: An analysis of the efficacy of the AUA and EAU guidelines for penile prosthesis prophylaxis
Institutes: Dartmouth-Hitchcock Medical Center, Dept. of Urology, Lebanon, United States of America

Scientific Programme
Penile prosthesis implantation preserves and may increase penile size irrespective of implant type

Institutes: King's College Hospital, Dept. of Urology, London, United Kingdom, Elaj Medical Centers, Dept. of Urology, Jeddah, Saudi Arabia, Benha University, Dept. of Urology, Benha, Egypt, King Khaled Hospital, Dept. of Urology, Tabouk, Saudi Arabia, Elaj Medical Centers, Dept. of Urology, Madina, Saudi Arabia, Zagazig University, Dept. of Urology, Zagazig, Egypt, King Saud University, Dept. of Urology, Riyadh, Saudi Arabia, Memorial Sloan Kettering Cancer Center, Sexual and Reproductive Medicine, New York, United States of America

Distal corporal anchoring stitch, a technique to address distal corporal crossovers and impending lateral extrusions of a penile prosthesis
By: Busetto G.M., Antonini G., Del Giudice F., De Berardinis E., Perito P.

Institutes: Sapienza Rome University, Dept. of Urology, Rome, Italy, Coral Gable Hospital, Dept. of Urology, Miami, United States of America

The role of the tachosil and SIS as grafts after inflatable penile prosthesis implantation and plaque incision: Surgical and functional outcomes in a single center prospective comparative study
By: Falcone M., Timpano M., Cerutti C., Omid S., Sibona M., Gillo A., Oderda M., Cocci A., Gontero P., Rolle L.

Institutes: University of Turin, Dept. of Urology, Turin, Italy, Ospedale Parini, Dept. of Urology, Aosta, Italy, University of Florence, Dept. of Urology, Florence, Italy

Small intestinal submucosa graft in the treatment of Peyronie’s disease: Long term patient-reported outcomes and satisfaction
By: Ribeiro Morgado L.A., Ribeiro Morgado M., Pacheco-Figueiredo L., Tomada N., Cruz F.

Institutes: Centro Hospitalar São João, Dept. of Urology, Porto, Portugal, Faculdade de Medicina da Universidade do Porto, Dept. of Renal, Infectious and Urologic Diseases, Porto, Portugal

Surgical correction of Peyronie’s disease via tunica albuginea plication - long term follow up
By: Seveso M., Melegari S., Bozzini G., Defrancesco O., Boni P., Mandressi A., Buffi N., Guazzoni G.F., Taverna G.

Institutes: Humanitas Mater Domini, Dept. of Urology, Castellanza, Italy, Humanitas Research Hospital, Dept. of Urology, Rozzano, Italy

Safety and effectiveness of collagenase clostridium histolyticum (CCH) (Xiapex®) in the treatment of Peyronie’s disease using a new shortened protocol

Institutes: University College London Hospital, Dept. of Andrology, London, United Kingdom

Intraltesional verapamil versus ialuronic acid for the treatment of Peyronie's disease: A randomized single-blind study
By: Favilla V., Russo G.L., Zucchi A., Siracusa G., Privitera S., Cimino S., Madonia M., Cai T.
Cavallini G.\textsuperscript{5}, Liguori G.\textsuperscript{6}, Silvani M.\textsuperscript{7}, Dachille G.\textsuperscript{8}, Franco G.\textsuperscript{9}, Verze P.\textsuperscript{10}, Palmieri A.\textsuperscript{10}, Mirone V.\textsuperscript{10}, Morgia G.\textsuperscript{1}

**Institutes:** University of Catania, Dept. of Surgery, Catania, Italy, \textsuperscript{2}University of Perugia, Dept. of Urology, Perugia, Italy, \textsuperscript{3}University of Sassari, Dept. of Urology, Sassari, Italy, \textsuperscript{4}Santa Chiara Regional Hospital, Dept. of Urology, Trento, Italy, \textsuperscript{5}Outpatient Clinic of Ferrara, Medicitalia Andrology Section, Ferrara, Italy, \textsuperscript{6}Urology Unit, Cattinara Hospital, Trieste, Italy, \textsuperscript{7}Hospital Degli Infermi, Dept. of Urology, Biella, Italy, \textsuperscript{8}San Giacomo Hospital, Dept. of Urology, Monopoli, Italy, \textsuperscript{9}University La Sapienza, Dept. of Urology, Rome, Italy, \textsuperscript{10}University of Naples, Federico II, Dept. of Urology, Naples, Italy

**Summary**

M.M. Fode, Herlev (DK)

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**Daily tadalafil therapy: A new treatment option for Peyronie’s disease?**

By: Park H.J.\textsuperscript{1}, Park N.C.\textsuperscript{1}, Kim T.N.\textsuperscript{1}, Nam J.K.\textsuperscript{1}, Moon D.G.\textsuperscript{2}

**Institutes:** Pusan National University Hospital, Dept. of Urology, Busan, South Korea, \textsuperscript{2}Korea University Hospital, Dept. of Urology, Seoul, South Korea

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**Penile enlargement with the Elist silicone implant: Safety and efficiency after 500 operations**

By: Elist J.J.\textsuperscript{2}, Lemperle H.G.\textsuperscript{1}

**Institutes:** University of California, Dept. of Plastic Surgery, San Diego, United States of America, \textsuperscript{2}Beverly Hills, Urology practice, Los Angeles, United States of America
ESU/ESUT Hands-on Training Course in Intermediate laparoscopy
HOT38

Location: Room South America, Exhibition Hall (Level 1)
Chair: D. Veneziano, Reggio Calabria (RC) (IT)

Aims and objectives of this session
- You will improve your laparoscopic skills such as advanced suturing and emergency vessel repair.

Course description:
This course is dedicated to intermediate laparoscopic skills, with main focus on suturing techniques. Intermediate skills have been selected with an experts’ survey, between the most important tasks to achieve before approaching full laparoscopic procedures. Experienced laparoscopic-tutors selected by ESU and ESUT will guide you to master special knot-tying techniques, laparoscopic anastomoses and even a Major Vessel Injury repair. Tips and tricks can be answered and discussed with all tutors during the session. The intermediate laparoscopic training sessions require a full mastery of basic skills: for this reason, E-BLUS certification is required for subscription.

Target audience: Urologist with an E-BLUS certificate that want to learn more about laparoscopy

P. Macek, Prague (CZ)
B. Petrut, Cluj Napoca (RO)
G. Pini, Milano (IT)
B.S.E.P. Van Cleynenbreugel, Leuven (BE)
A. Skolarikos, Athens (GR)
EAU Consensus Highlights

Location: eURO Auditorium (Level 0)
Chairs: J. Palou, Barcelona (ES)
         M. Rouprêt, Paris (FR)

07:30 - 07:40  EAU Consensus update Testosterone supplements in urological practice
               V.G. Mirone, Naples (IT)

07:40 - 07:50  EAU Consensus update Imaging of prostate cancer: Is MRI now the gold standard? Are targeted biopsies essential?
               J. Walz, Marseille (FR)

07:50 - 08:00  EAU Consensus update Focal therapy of prostate cancer: Moving beyond the rhetoric
               H.G. Van Der Poel, Amsterdam (NL)
Redefining and optimising contemporary bladder cancer care

Plenary Session 03

Sunday, 26 March
08:00 - 10:30

Location: eURO Auditorium (Level 0)

Chairs: J. Palou, Barcelona (ES)
M. Rouprêt, Paris (FR)

Aims and objectives of this session
Bladder cancer is a frequently occurring disease with a high mortality rate despite optimal treatment. This session will highlight the proper management of non-muscle invasive bladder cancer, including ongoing debate about conservative management in T1 tumour or the rhythm of follow-up in low grade tumour. Additionally the therapeutic impact of the extent of lymphadenectomy during radical cystectomy will be stated. Potential indications and contraindications, such as comorbidity, are related to treatment choice. The implementation of fast-track programs of rehabilitation to enhance postsurgical recovery after cystectomy and the quality of life after urinary diversion will be discussed.

During the plenary sessions, French and Spanish translation will be provided. Please collect your headset in the session room prior to the start of the session and return it after the session.

Meet the speakers of the plenary session:
Delegates are able to meet the speakers of the plenary session immediately at the end of the session in the foyer of the eURO Auditorium (Level 0). Do not miss this opportunity to meet and greet the speakers and to consult them for any questions you may have.

08:00 - 09:00

Case discussion Perfect management of T1 bladder cancer

Moderator: G.N. Thalmann, Berne (CH)

08:00 - 08:04

Case presentation
G.N. Thalmann, Berne (CH)

08:04 - 08:18

Perfect transurethral resection
M. Babjuk, Prague 5 (CZ)

08:18 - 08:32

Perfect pathology report
R. Montironi, Ancona (IT)

08:32 - 08:46

Adjuvant treatment
J.A. Witjes, Nijmegen (NL)

08:46 - 09:00

Perfect decision re cystectomy
A.M. Kamat, Houston (US)

09:00 - 09:30

Debate Do we need a follow-up in low grade bladder tumour after 12 months?

Moderator: M. Brausi, Modena (IT)

09:00 - 09:15

Yes (EAU Guidelines)
M. Burger, Regensburg (DE)
<table>
<thead>
<tr>
<th>Time</th>
<th>Event</th>
<th>Speaker</th>
<th>Location</th>
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<tr>
<td>09:15 - 09:30</td>
<td>No (NICE Guidelines)</td>
<td>H. Mostafid, Guildford (GB)</td>
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<tr>
<td>09:30 - 10:00</td>
<td><strong>State-of-the-art lecture</strong> <em>The evidence for the extent of lymphadenectomy in TCC</em></td>
<td>J.E. Gschwend, München (DE)</td>
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<td>09:45 - 10:00</td>
<td><strong>Discussant</strong></td>
<td>S. Lerner, Houston (US)</td>
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<tr>
<td>10:00 - 10:15</td>
<td><strong>State-of-the-art lecture</strong> <em>Enhanced Recovery After Surgery (ERAS) for bladder cancer: Non-surgical options to improve outcomes of cystectomy</em></td>
<td>J.W.F. Catto, Sheffield (GB)</td>
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<td>10:15 - 10:30</td>
<td><strong>State-of-the-art lecture</strong> <em>What determines QoL after urinary diversion and how to measure it?</em></td>
<td>W. Artibani, Verona (IT)</td>
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Benign Prostatic Enlargement (BPE): Evaluation, drugs, surgery or new interventional treatment

Plenary Session 04

Location: Room Copenhagen, North Hall (Level 1)

Chairs: C.R. Chapple, Sheffield (GB)
P. Radziszewski, Warsaw (PL)

Aims and objectives of this session
The clinical scene for benign prostatic enlargement diagnosis and treatment is changing rapidly. The old paradigms regarding who should get drugs and who should be operated are no longer valid. During the session participants will be updated with modern patophysiological concepts of BPE. This will be followed by a debate on urodynamics and a vigorous case discussion on dilemmas related to treatment choice accordingly to the prostate size. New emerging techniques will be discussed and the session will be concluded with drug management of LUTS and BPE as well as with unresolved diagnostic and therapeutic problems. The session aims not only to deliver the new knowledge, but also to stimulate discussion.

During this session participants are expected to learn about BPE patophysiology, diagnostics, pharmacological and surgical treatment. The session should stimulate exchange of experience and growth of new ideas.

During the plenary sessions, French and Spanish translation will be provided. Please collect your headset in the session room prior to the start of the session and return it after the session.

Meet the speakers of the plenary session:
Delegates are able to meet the speakers of the plenary session immediately at the end of the session in the foyer of the Room Copenhagen (North Hall, Level 1). Do not miss this opportunity to meet and greet the speakers and to consult them for any questions you may have.

08:00 - 08:15
State-of-the-art lecture Inflammation in BPE: Does it change the treatment?
M. Gacci, Florence (IT)

08:15 - 08:45
Debate Is there still a role for urodynamics in BPE in 2017?

Moderator: H. Woo, Sydney (AU)

Pro
M. Oelke, Hanover (DE)

Con
N. Thiruchelvam, Cambridge (GB)

08:45 - 09:15
Case discussion LUTS due to BPE: When to operate and when to avoid surgery

08:45 - 09:15
Case presenter and moderator
A. Tubaro, Rome (IT)
EAU London 2017

08:45 - 08:55  Case related to: Small prostate dilemmas

08:55 - 09:05  Case related to: Very large prostate and storage LUTS

09:05 - 09:15  Case related to: Very large prostate and voiding LUTS

08:45 - 09:15  Discussants
   A. De La Taille, Créteil (FR)
   M. Speakman, Taunton (GB)

09:15 - 09:30  State-of-the-art lecture  Guidelines and emerging technologies
   S. Gravas, Larissa (GR)

09:30 - 10:00  Debate  Emerging techniques in surgery: Light, electricity or water?
   Moderator: C. Gratzke, Munich (DE)

09:30 - 09:40  Introduction
   C. Gratzke, Munich (DE)

09:30 - 09:40  Electricity
   T.R.W. Herrmann, Hanover (DE)

09:40 - 09:50  Light
   C.M. Scoffone, Torino (IT)

09:50 - 10:00  Water
   N. Barber, Camberley (GB)

10:00 - 10:15  State-of-the-art lecture  Contemporary management of voiding symptoms following surgery for bladder outlet obstruction
   K. Everaert, Ghent (BE)

10:15 - 10:30  American Urological Association (AUA) lecture  LUTS and BPE: Unresolved diagnostic and therapeutic issues
   C.G. Roehrborn, Dallas (US)
Office management of male sexual dysfunction
ESU Course 14

Sunday, 26 March
08:30 - 11:30

Location: Room 10, Capital suite (level 3)
Chair: C. Stief, Munich (DE)

Aims and objectives of this session
The course is aimed at providing practical advice on how to diagnose and treat a patient with Premature ejaculation or ED. It will allow
• An up-to-date understanding of the aetiology of ED and EP
• An adequate work up enabling an individually adopted regimen
• Currently available treatment options as topical and oral drugs, testosterone and devices
• Post-prostatectomy ED with various approaches

08:30 - 11:30
Introduction
C. Stief, Munich (DE)

08:30 - 11:30
Diagnostics - What is necessary?
I. Eardley, Leeds (GB)

08:30 - 11:30
Testosterone replacement
C. Stief, Munich (DE)

08:30 - 11:30
Oral therapy for ED
I. Eardley, Leeds (GB)

08:30 - 11:30
Therapy of ED when pills fail
D.J. Ralph

08:30 - 11:30
Medical therapy for premature ejaculation
I. Eardley, Leeds (GB)

08:30 - 11:30
Surgical topics: Penile implants, priapism, Peyronie’s
D.J. Ralph

08:30 - 11:30
What to do after radical prostatectomy?
C. Stief, Munich (DE)
Update on stone disease
ESU Course 15

Location: Room 11, Capital suite (level 3)
Chair: A. Patel, London (GB)

Aims and objectives of this session
The previously devastating burden of urinary tract urolithiasis has been reduced by modern stone therapy. Complex branched stones are rare, and therapy has moved largely to the outpatient setting. Nevertheless, successful management requires competence in all aspects of stone management. After a brief review of new developments in present treatment strategies, these will be further explored by interactive case presentations.

• Stone disease aetiology is multi-factorial, relating in large part to genetics, diet (salt, calorie and protein intake), hydration status factors and ageing.
• The clinical presentation is changing with a growing base of elderly and obese patient cohorts in developed nations.
• Today’s challenge is employing the ideal initial and salvage approaches for specific situations – individuals, including judicious selection of prevention strategies.
• Patients should be given choices and counselled about the risk benefits and potential outcomes of all appropriate reasonable approaches.

08:30 - 11:30
Introduction
A. Patel, London (GB)

08:30 - 11:30
Medical aspects of urinary stones
M. Straub, Munich (DE)

08:30 - 11:30
SWL
M. Straub, Munich (DE)

08:30 - 11:30
Uretero-Renoscropy
A. Breda, Barcelona (ES)

08:30 - 11:30
Percutaneous nephrolithotomy and questions and answers
A. Patel, London (GB)

08:30 - 11:30
Interactive case discussion
A. Patel, London (GB)
Focal treatment in prostate cancer
ESU Course 16

Sunday, 26 March
08:30 - 11:30

Location: Room 12, Capital suite (level 3)
Chairs: E. Barret, Paris (FR)
        E. Barret, Paris (FR)

Aims and objectives of this session
Focal treatment is about eradicating the cancer lesion within the prostate while preserving genitourinary function. This interactive course offers delegates
• understanding of the rationale for focal treatment and patient selection criteria
• update on principles, outcome and side effects of focal technologies
• a thorough discussion of biopsy strategies and imaging in diagnostic work-up and follow-up
• information about existing registries

As men with prostate cancer are getting younger the side effects of whole gland treatment are getting more important. With several new technologies available a significant development of focal treatment is expected in the coming years.

08:30 - 11:30
Selection criteria for FT

08:30 - 11:30
Patient and disease characteristics
J.P.M. Sedelaar, Nijmegen (NL)

08:30 - 11:30
Prostate biopsy modalities
A. Govorov, Moscow (RU)

08:30 - 11:30
Focal therapy modalities

08:30 - 11:30
Treatment options
J.P.M. Sedelaar, Nijmegen (NL)

08:30 - 11:30
Energy sources (technical aspects - videos)

08:30 - 11:30
Cryotherapy
A. Govorov, Moscow (RU)

08:30 - 11:30
HIFU
E. Barret, Paris (FR)

08:30 - 11:30
Brachytherapy
A. Govorov, Moscow (RU)

08:30 - 11:30
Others (laser ablation, irreversible electroporation, radiofrequency)
E. Barret, Paris (FR)

08:30 - 11:30
Follow up

08:30 - 11:30
Tools for post focal treatment evaluation
<table>
<thead>
<tr>
<th>Time</th>
<th>Session Title</th>
<th>Presenter Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>08:30 - 11:30</td>
<td>Oncological and functional outcomes</td>
<td>A. Govorov, Moscow (RU)</td>
</tr>
<tr>
<td>08:30 - 11:30</td>
<td>Definition of failure and failure management</td>
<td>E. Barret, Paris (FR)</td>
</tr>
<tr>
<td>08:30 - 11:30</td>
<td>Clinical cases</td>
<td></td>
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</tbody>
</table>
### Aims and objectives of this session
Having attended the course, the attendee should:
- Understand the basic physical principles referable to urodynamics
- Be able to assess the quality of a urodynamic trace
- Recognise common artefacts and know how to correct them
- Know the indications for urodynamic studies in men, women and neurological patients.

#### Scientific Programme

<table>
<thead>
<tr>
<th>Time</th>
<th>Session</th>
</tr>
</thead>
<tbody>
<tr>
<td>08:30 - 11:30</td>
<td><strong>Urodynamics: Philosophy, scientific basis and technique</strong> P. Abrams, Bristol (GB)</td>
</tr>
<tr>
<td>08:30 - 11:30</td>
<td><strong>Urodynamics in neurourology</strong> J.L.H.R. Bosch, Utrecht (NL)</td>
</tr>
<tr>
<td>08:30 - 11:30</td>
<td><strong>Urodynamics in female urology</strong> P. Abrams, Bristol (GB)</td>
</tr>
<tr>
<td>08:30 - 11:30</td>
<td><strong>Urodynamics in men</strong> J.L.H.R. Bosch, Utrecht (NL)</td>
</tr>
</tbody>
</table>
Aims and objectives of this session
Minimally invasive surgery has steadily improved over the last years. Today one can approach with confidence new, difficult and challenging situations. The course is structured to evaluate and explore the increasing indications and possible complications of Laparoscopic and Robotic kidney surgery. This course will focus upon common and uncommon complications and how to manage and prevent them. In addition, special situations such as single port inguinal approach, zero ischemia time, cava thrombus, accidental splenectomy and living donor nephrectomy will be presented.
Chronic pelvic pain in men and women
ESU Course 19

Sunday, 26 March
08:30 - 11:30

Location: Room 16, Capital suite (level 3)
Chair: D.S. Engeler, St. Gallen (CH)

Aims and objectives of this session
The urologist is often dealing with patients having Chronic Pelvic Pain. This course will offer the urologist practical guidance in treating these patients. In the case discussion the participants will have the opportunity to help outlining the problem. In the lectures theoretical knowledge will be translated into daily guidelines for diagnostics and treatment of patients with pelvic pain.
At the end of this course the participant will
• Know the basic principles of treating patients with chronic pelvic pain.
• Know how to rule out well known causes.
• Have knowledge of the myofascial and psychological aspects.
• Be able to refer patients at the right time to the right team.

08:30 - 11:30
Chronic pelvic pain, the basics: Mechanisms and terminology

08:30 - 11:30
Chronic pelvic pain in men: Case presentation and discussion
D.S. Engeler, St. Gallen (CH)

08:30 - 11:30
Chronic pelvic pain in men: Practical guidelines on diagnostics and treatment
D.S. Engeler, St. Gallen (CH)

08:30 - 11:30
Chronic pelvic pain in women: Case presentation and discussion

08:30 - 11:30
Chronic pelvic pain in women: Practical guidelines on diagnostics and treatment

08:30 - 11:30
The interdisciplinary approach: Team members and organisation
D.S. Engeler, St. Gallen (CH)
# Surgical anatomy

**ESU Course 20**

**Location:** Room 17, Capital suite (level 3)

**Chair:** J-U. Stolzenburg, Leipzig (DE)

## Aims and objectives of this session

This course addresses comprehensively important anatomical considerations for open and minimally invasive radical prostatectomy and partial nephrectomy. Key technical aspects such as access, port placement, robotic docking and each step of the procedures will be discussed. Additionally interfascial and intrafascial of nerve-sparing surgery will be discussed. In partial nephrectomy the focus is on pedicle control, tumour excision, how to achieve adequate haemostasis and how to shorten ischemia time.

### Scientific Programme

<table>
<thead>
<tr>
<th>Time</th>
<th>Session</th>
</tr>
</thead>
<tbody>
<tr>
<td>08:30 - 11:30</td>
<td><strong>Introduction</strong> J-U. Stolzenburg, Leipzig (DE)</td>
</tr>
<tr>
<td>08:30 - 11:30</td>
<td><strong>Pelvic and surgical anatomy for laparoscopic/robotic radical prostatectomy (RPE)</strong></td>
</tr>
<tr>
<td></td>
<td>H.A.R. Qazi</td>
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<td>J-U. Stolzenburg, Leipzig (DE)</td>
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<tr>
<td>08:30 - 11:30</td>
<td><strong>Surgical anatomy for laparoscopic/robotic assisted radical cystectomy</strong></td>
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<tr>
<td></td>
<td>J. Cresswell, Middlesbrough (GB)</td>
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<tr>
<td>08:30 - 11:30</td>
<td><strong>Port placement and robot docking-principles for pelvic laparoscopy</strong></td>
</tr>
<tr>
<td></td>
<td>J. Cresswell, Middlesbrough (GB)</td>
</tr>
<tr>
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<td>H.A.R. Qazi</td>
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<tr>
<td></td>
<td>J-U. Stolzenburg, Leipzig (DE)</td>
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<tr>
<td>08:30 - 11:30</td>
<td><strong>Prostate, bladder and urethral sphincter anatomy. How to preserve urinary continence</strong></td>
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<td>J. Cresswell, Middlesbrough (GB)</td>
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<td>H.A.R. Qazi</td>
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<td>J-U. Stolzenburg, Leipzig (DE)</td>
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<tr>
<td>08:30 - 11:30</td>
<td><strong>Surgical anatomy for nerve sparing surgery</strong></td>
</tr>
<tr>
<td></td>
<td>J. Cresswell, Middlesbrough (GB)</td>
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<tr>
<td></td>
<td>J-U. Stolzenburg, Leipzig (DE)</td>
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<tr>
<td>08:30 - 11:30</td>
<td><strong>Boundaries and technique of pelvic lymph node dissection for radical prostatectomy</strong></td>
</tr>
<tr>
<td></td>
<td>(standard, extended PLNA, risk stratified access) and radical cystectomy</td>
</tr>
<tr>
<td></td>
<td>J. Cresswell, Middlesbrough (GB)</td>
</tr>
<tr>
<td></td>
<td>H.A.R. Qazi</td>
</tr>
<tr>
<td>08:30 - 11:30</td>
<td><strong>Summary and take home messages</strong></td>
</tr>
<tr>
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<td>J. Cresswell, Middlesbrough (GB)</td>
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<tr>
<td>08:30 - 11:30</td>
<td><strong>Quiz</strong></td>
</tr>
<tr>
<td></td>
<td>H.A.R. Qazi</td>
</tr>
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<td></td>
<td>J-U. Stolzenburg, Leipzig (DE)</td>
</tr>
</tbody>
</table>
ESU/ESUT/EULIS Hands-on Training Course in Ureterorenoscopy
HOT43

Location: Room Europe, Exhibition Hall (Level 1)
Chair: B. Somani, Southampton (GB)

Aims and objectives of this session
- At the end of the course, the participants will be able to perform rigid and flexible ureteroscopy in the models
- The participants will be able to interact with tutors and gain valuable insights into the tips and tricks of basic and advanced ureteroscopy.

Course description:
Ureteroscopy is an essential tool in the management of stone disease for all Endourologists. This course will provide hands-on-training with tutor guided practical tips and tricks of doing ureteroscopy. Participants will get a chance to perform Semirigid and Flexible ureteroscopy in the models with a chance to navigate the pelvicalyceal system, stone manipulation and extraction.

J. Patterson, Sheffield (GB)
G.M. Kamphuis, Amsterdam (NL)
A. Ploumidis, Athens (GR)
S. Proietti, Milan (IT)
M. Özsoy, Vienna (AT)
B.M. Schoensee, Potsdam (DE)
ESU/ERUS Hands-on Training Course in Robotic surgery - intro
HOT25

**Location:** Room Asia, Exhibition Hall (Level 1)

**Chair:** M. Naudin, Hyon (BE)

**Aims and objectives of this session**
The European School of Urology (ESU) and the EAU Robotic Urology Section (ERUS) offer an intensive Hands-on Training course. We will provide training using simulators. The main aims of this 90 minutes course are:
- improving the participants' control-skills and hand-eye-coordination, as well as an objective benchmarking
- of console performance and an introduction into standardized surgical steps in robot-assisted procedures.

**Aims and objectives**
Improve your robotic surgery skills in the following areas:
- Endowrist manipulation
- Camera Control
- 3rd Arm Control
- Needle Placement and Driving
- Suturing and Knot Tying

N. Fossati, Milan (IT)
ESU/ESFFU Hands-on Training Course in Sacral neuromodulation procedure standardization

HOT19

Sunday, 26 March
09:30 - 11:00

Location: Room Africa, Exhibition Hall (Level 1)

Chair: H. Hashim, Bristol (GB)

Aims and objectives of this session
A practical hands-on workshop that will allow the participants to practice on models the different steps of performing sacral neuromodulation including primary percutaneous nerve evaluation, tined lead and battery implantation and programming and also troubleshooting.

Aims and objectives
- Understand the indications for SNM
- Be able to perform the different steps of the procedure in a standardized format
- Be able to troubleshoot problems with SNM

Target audience: Doctors, Nurses, technicians and clinical scientists who have little or no knowledge of sacral neuromodulation.

M. Belal, Birmingham (GB)
E. Chartier-Kastler, Paris (FR)
S. De Wachter, Nijlen (BE)
T.M. Kessler, Zurich (CH)
S. Musco, Florence (IT)
L. Thomas, Bristol (GB)
**Aims and objectives of this session**

The European training in basic laparoscopic urological skills (E-BLUS) is a programme offered to residents and urologists who want to improve the basic skills in laparoscopy. It is a unique opportunity to train with international experts in laparoscopy. The E-BLUS programme includes:

- Hands-on Training (HOT) courses of different levels carried out under the guidance of experienced tutors
- A set of training-box exercises developed and validated by the Dutch project Training in Urology (TiU) to train basic skills needed in urological laparoscopy
- E-BLUS examination and certification
- An online theoretical course

F. Greco, Crotone (IT)
P. Macek, Prague (CZ)
T. Tokas, Hall In Tirol (AT)
L. Tunc, Ankara (TR)
D. Veneziano, Reggio Calabria (RC) (IT)
C. Wagner, Gronau (DE)
ESU/ESUT/ESUI Hands-on Training Course in MRI Fusion biopsy
HOT29

**Location:** Room North America, Exhibition Hall (Level 1)

**Chair:** L. Budäus, Hamburg (DE)

**Aims and objectives of this session**
At the end of the course, the participants understand the advantages, handling and limitations of MRI Ultrasound fusion biopsies.

**Course description**
MRI is increasingly used in patients undergoing prostate biopsies. Different MRI Ultrasound fusion devices allow integrating the MRI information into the daily clinical workflow. The course will provide an overview on MRI reading, technical basics and different prostate biopsy approaches. Technical considerations, the transrectal or transperineal approach will be critically reviewed and discussed. During the second half of the course, the participants are able to try out 5 different Fusion biopsy machines in small groups, changing every 10 min.

**Target audience:** Urologists, interested in the diagnostic ability of MRI use for transrectal and perineal prostate biopsies

S. Boxler, Berne (CH)
H. Cash, Berlin (DE)
C. Kastner, Cambridge (GB)
S. Kruck, Tübingen (DE)
P. Mozer, Paris (FR)
F. Zatura, Olomovc (CZ)
J.P. Radtke, Heidelberg (DE)
ESU Hands-on Training Course in Non-technical skills

HOT33

Location: Hands-on Training Area, Exhibition Hall (Level 1)

Chairs: K. Ahmed, London (GB)
M. Shabbir, Wembley Middlesex (GB)

Aims and objectives of this session
This course aims to introduce the concept of non-technical skills and provide an interactive “hands-on” environment to practicing urologists and residents-in-training, in the hope of improving and raising self-awareness for everyday operating room practice.

Course description:
The operating room is a complex and highly stressful environment that requires interaction between a large team to achieve successful outcomes for the patient. This requires not only effective procedure-specific technical skills, but also additionally a range of non-technical skills. The importance of non-technical skills is often overlooked but they are unfortunately a major cause of surgical error. Like technical skills, which are acquired over many years of practice and training, non-technical skills are not innate traits and must also be developed through training and experience. This course will serve to introduce practicing urologists to the concept of non-technical skills using an interactive full immersion simulation environment, developed by Kneebone et al. (Imperial College London), whilst undertaking common scenarios in urolithiasis. Participants will be evaluated by experts in surgical education and provided individual feedback with view for further self-improvement.

Supporting faculty:
H. Aya, London (GB)
A. Aydin, London (GB)
O. Brunckhorst, London (GB)
F. Dar, London (GB)
M. Husnain Iqbal, London (GB)
J. Moody, London (GB)
N. Raison, London (GB)

Target audience:
All urological surgeons and residents in training
Aims and objectives of this session
This session deals with some more acute urological traumatic issues. The first is a classic and will deal with the moment of reconstruction of posterior urethral injuries. The debate highlights when it is imperative to insert a suprapubic catheter in the acute phase of a pelvic fracture related urethral injury. In addition, it will discuss when suprapubic catheter is preferred above or can be considered as alternative to direct realignment. The state-of-the-art lectures deal with possible reconstruction after Fournier’s gangrene and after penile cancer.

10:30 - 11:10
Debate Acute management of a posterior urethral injury after pelvic fracture

10:30 - 10:50
Direct alignment
F. Campos Juanatey, Santander (ES)

10:50 - 11:10
Suprapubic catheter first
N. Lumen, Ghent (BE)

11:10 - 11:30
State-of-the-art lecture Fournier's gangrene: Treatment and surgical reconstruction
A. Kadioglu, Istanbul (TR)

11:30 - 11:50
State-of-the-art lecture Penile reconstruction after trauma and cancer
N. Broer, Munich (DE)

11:50 - 12:00
Associated abstract presentation

279
Comparative assessment of postoperative erectile function and quality of life in male one-stage onlay vs. inlay buccal mucosal graft urethroplasty
Institutes: University Medical Center Hamburg-Eppendorf, Dept. of Urology, Hamburg, Germany
Aims and objectives of this session
Salvage prostatectomy is technically more difficult than primary prostatectomy, and the complication rate is higher. The videos demonstrate that it can be performed by either open surgery or robot-assisted laparoscopy. The advantages and disadvantages of either technique will be discussed.

EPLND - the gold standard - has a false negative rate of at least 10%. This rate can by decreased by super extended PLND, but the price is decreased specificity, longer operative time, and possibly a higher complication rate. The solution may be targeted PLND such as sentinel PLND which allows to increase specificity, sensitivity and accuracy. Two different concepts of sentinel PLND will be presented.
<table>
<thead>
<tr>
<th>Time</th>
<th>Event</th>
<th>Presenter</th>
<th>Discussant</th>
</tr>
</thead>
<tbody>
<tr>
<td>11:35 - 11:55</td>
<td>Extended lymph node dissection</td>
<td>N. Fossati, Milan (IT)</td>
<td>H.G. Van Der Poel, Amsterdam (NL)</td>
</tr>
<tr>
<td>11:55 - 12:00</td>
<td>Discussion</td>
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</tbody>
</table>
Aims and objectives of this session
Individualized therapy in prostate cancer should be based on our knowledge about overexpressed oncogenes. The session will highlight importance of the transcription factor ERG and cytokines which may be targeted in experimental models and in clinical settings. Furthermore, the speakers will address issues related to scientific background of radiation therapy in prostate cancer.

10:30 - 10:50  
**State-of-the-art lecture**  
How to select prostate cancer patients for radiation therapy?  
A. Dubrovska, Dresden (DE)

10:50 - 11:10  
**State-of-the-art lecture**  
Personalised approach to antagonising ERG in prostate cancer  
G. Carbone, Bellinzona (CH)

11:10 - 11:30  
**State-of-the-art lecture**  
Individualisation of anti-cytokine treatment in prostate cancer  
A. Bjartell, Malmö (SE)

11:30 - 11:45  
**Panel discussion**  
Using translational research to optimise treatment for patients with prostate cancer  
Panel:  
A. Bjartell, Malmö (SE)  
G. Carbone, Bellinzona (CH)  
A. Dubrovska, Dresden (DE)

11:45 - 12:00  
**Associated abstract presentations**

754  
**Systems pharmacology and quantitative proteomics for developing targeted triple therapy**  
Institutes: University College Dublin, Systems Biology Ireland, Dublin, Ireland,  
Memorial Sloan-Kettering Cancer Center, Weill Cornell Graduate School of Medical Sciences, New York City, United States of America,  
ETH Zurich, Institute of Molecular Systems Biology, Zurich, Switzerland,  
Dana-Farber Cancer Institute, CBio Center At Dana-Farber, Boston, United States of America

747  
**Targeting enzalutamide-resistant prostate cancer using the novel androgen receptor inhibitor ODM-201**  
By: Borgmann H., Ozistanbullu D., Beraldi E., Dalal K., Fazli L., Gleave M.  
Institutes: Vancouver Prostate Centre, Dept. of Urology, Vancouver, Canada

State-of-the-art lecture
# OAB: What matters in diagnosis and treatment

**Thematic Session 04**

**Sunday, 26 March**

**10:30 - 12:00**

**Location:** Room Amsterdam, North Hall (Level 1)

**Chairs:**
- J-N.L. Cornu, Rouen (FR)
- F. Cruz, Porto (PT)

**Aims and objectives of this session**

OAB is a common symptom complex that includes urgency, frequency, nocturia and urgency incontinence. Despite the fact that it is highly prevalent in both genders, its cause is still unclear. Tests that may help clinicians to identify the origin of OAB symptoms are still uncertain but need to be explored if the more specific treatments are to be discovered and prescribed. The bother caused by OAB symptoms is crucial for planning a correct management of the condition and this may call for the use of patient-reported outcomes.

<table>
<thead>
<tr>
<th>Time</th>
<th>Session Description</th>
<th>Speaker &amp; Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>10:30 - 10:45</td>
<td><strong>State-of-the-art lecture</strong> Multiple comorbidity and OAB: What matters to patients and GP’s?</td>
<td>J-N.L. Cornu, Rouen (FR)</td>
</tr>
<tr>
<td>10:45 - 11:00</td>
<td><strong>State-of-the-art lecture</strong> Which urodynamic parameters correlate with OAB severity?</td>
<td>M.J. Drake, Bristol (GB)</td>
</tr>
<tr>
<td>11:00 - 11:15</td>
<td><strong>State-of-the-art lecture</strong> Biomarkers for OAB</td>
<td>K. Monastyrskaya, Bern (CH)</td>
</tr>
<tr>
<td>11:15 - 11:45</td>
<td>Outcomes for medical treatment in OAB</td>
<td></td>
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<tr>
<td>11:15 - 11:17</td>
<td><strong>Introduction: OAB - What will make your treatment a success or failure?</strong></td>
<td>J-N.L. Cornu, Rouen (FR)</td>
</tr>
<tr>
<td>11:17 - 11:31</td>
<td><strong>OAB: What outcomes are important?</strong></td>
<td>K. Rademakers, Maastricht (NL)</td>
</tr>
<tr>
<td>11:31 - 11:45</td>
<td><strong>Patient Reported Outcome Measures (PROMs) in OAB: What are we measuring?</strong></td>
<td>C. Kelleher, London (GB)</td>
</tr>
<tr>
<td>11:45 - 12:00</td>
<td><strong>State-of-the-art lecture</strong> Innovation in neuromodulation</td>
<td>S. Elneil, London (GB)</td>
</tr>
</tbody>
</table>
Adrenal disorders
Thematic Session 05

Location: Room Berlin, North Hall (Level 1)
Chair: J.P.F.A. Heesakkers, Nijmegen (NL)

Aims and objectives of this session
Adrenal surgery is not that common in urological practice. Is it done for endocrine pathologies but also for malignant indications. Experts in the field will share their experience on diagnostics, indications and assessment of the adrenal glands. To boost the interest in adrenal surgery a high quality submitted abstract was selected that will be presented by a young colleague.

10:30 - 10:50
State-of-the-art lecture Adrenal cortical carcinoma
F. Porpiglia, Turin (IT)

10:50 - 11:10
State-of-the-art lecture Management of adrenal incidentalomas
W. Arlt, Birmingham (GB)

11:10 - 11:30
State-of-the-art lecture Indications for partial adrenalectomy
A.S. Gözen, Heilbronn (DE)

11:30 - 11:50
State-of-the-art lecture Open, laparoscopic or robotic treatment of adrenal tumours?
H. Langenhuijsen, Nijmegen (NL)

11:50 - 12:00
Associated abstract presentation

Adrenal vein sampling vs. CT scan to determine treatment in primary aldosteronism: An outcome-based randomised diagnostic trial

Institutes: ¹University Medical Center Nijmegen, Dept. of Urology, Nijmegen, The Netherlands, ²University Medical Center Nijmegen, Dept. of Internal Medicine, Nijmegen, The Netherlands, ³Institute of Cardiology, Dept. of Hypertension, Warsaw, Poland, ⁴University Medical Center Nijmegen, Dept. of Radiology, Nijmegen, The Netherlands, ⁵University Medical Center Nijmegen, Dept. of Health Evidence, Nijmegen, The Netherlands, ⁶University Medical Center Utrecht, Dept. of Vascular Medicine, Utrecht, The Netherlands, ⁷University Medical Center Groningen, Dept. of Endocrinology, Groningen, The Netherlands, ⁸Erasmus Medical Center, Dept. of Internal Medicine, Rotterdam, The Netherlands, ⁹Academic Medical Center, Dept. of Internal and Vascular Medicine, Amsterdam, The Netherlands, ¹⁰University Medical Center Nijmegen, Dept. of Laboratory Medicine, Nijmegen, The Netherlands, ¹¹Institute of Cardiology, Dept. of Interventional Cardiology and Angiology, Warsaw, Poland

State-of-the-art lecture
Aims and objectives of this session
This session deals with new immunotherapeutical approaches at renal and bladder cancer. For renal cancer, insights on the mechanisms of action, the efficacy of these treatment modalities in comparison with established TKI therapy for different indications including the application within a sequential setting should be delivered. For bladder cancer, it should become obvious to what extent and for which indications immunotherapeutic approaches can be expected to replace conventional approaches at the treatment of metastatic disease.

10:30 - 10:40
State-of-the-art lecture Immunotherapy - Impact from oncologist’s point of view
To be confirmed

10:40 - 10:50
State-of-the-art lecture Immunotherapy - Impact from surgeon’s point of view
F-C.E. Von Rundstedt, Jena (DE)

10:50 - 11:00
State-of-the-art lecture Immunotherapy - Open questions and trials
L. Albiges, Villejuif (FR)

11:00 - 11:10
Discussion

11:10 - 12:00
Urothelial cancer

11:10 - 11:25
State-of-the-art lecture Biomarkers for treatment selection
S. Shariat, Vienna (AT)

11:25 - 11:40
State-of-the-art lecture Is there still a role for chemotherapy?
A. Bamias, Athens (GR)

11:40 - 11:55
State-of-the-art lecture How will immunotherapy change the treatment paradigm?
R. Jones, Glasgow (GB)

11:55 - 12:00
Discussion
Paediatric urology
Thematic Session 07

Sunday, 26 March
10:30 - 12:00

Location: Room London, North Hall (Level 1)
Chairs: G. Bogaert, Leuven (BE)
W.F.J. Feitz, Nijmegen (NL)

Aims and objectives of this session
This year’s session on paediatric urology will give you the latest update in the field and lifelong care developments for patients with congenital urological anomalies.

10:30 - 10:45
State-of-the-art lecture Dartos and androgens in congenital penile malformations
A-F. Spinoit, Gent (BE)

10:45 - 11:00
State-of-the-art lecture Recent advances in the surgical treatment of pediatric stone disease
M.S. Silay, Istanbul (TR)

11:00 - 11:15
State-of-the-art lecture Varicocele aspects in children and adolescence
G. Bogaert, Leuven (BE)

11:15 - 11:30
State-of-the-art lecture Functional assessment and challenges of revision surgery following surgery in childhood
J.M. Nijman, Groningen (NL)

11:30 - 11:45
State-of-the-art lecture The quest for normality - Thoughts on congenital urological anomalies and how we manage patient expectations
D.N. Wood, London (GB)

11:45 - 12:00
State-of-the-art lecture Long-term outcome of pediatric urology anomalies and future prospects
S. Tekgül, Ankara (TR)
**Challenges in urinary tract reconstruction**  
Thematic Session 08

**Location:** Room Stockholm, North Hall (Level 1)

**Chairs:** H. Botto, Suresnes (FR)  
K.G.W. Månsson, Lund (SE)

**Aims and objectives of this session**  
This session will analyse the causes of some problems seen after urinary diversion and suggest techniques how to solve them. Pros and cons of some methods for diversion will be discussed.

<table>
<thead>
<tr>
<th>Time</th>
<th>Event</th>
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</table>
| 10:30 - 10:45 | **State-of-the-art lecture** Management of idiopathic retroperitoneal fibrosis  
A. Fernando, London (GB) |
| 10:45 - 11:15 | **Case discussion** Tips and tricks for stomal hernia             |
| 10:45 - 10:55 | **How to avoid**  
M. Gallucci, Rome (IT) |
| 10:55 - 11:15 | **How to fix**  
J.P. Bedke, Tübingen (DE) |
| 11:15 - 11:30 | **State-of-the-art lecture** Catheterisable stoma in adults: Facts and fiction  
E. Chartier-Kastler, Paris (FR) |
| 11:30 - 12:00 | **Debate** Cutaneous ureterostomy                                  |
| 11:30 - 11:45 | **This is a good technique and should be used**  
A. Pycha, Bolzano (IT) |
| 11:45 - 12:00 | **This is a complication-filled technique and we should think about something else**  
C. Llorente, Madrid (ES) |
## Individualised treatment for prostate cancer

### Thematic Session 09

**Location:** Room Munich, North Hall (Level 1)

**Chairs:**
- C.H. Bangma, Rotterdam (NL)
- J. N'Dow, Aberdeen (GB)

### Aims and objectives of this session

In low-risk prostate cancer various factors may influence the decisions to commit to active surveillance or not. In this session we aim to illustrate the relative contribution of imaging and biomarkers to identify the best individuals to follow an AS protocol. The audience will be able to decide themselves if it is useful, and when, to introduce new diagnostic modalities, or not to start AS at all for a single patient.

### Scientific Programme

<table>
<thead>
<tr>
<th>Time</th>
<th>Event</th>
<th>Speaker(s)</th>
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<tbody>
<tr>
<td>10:30 - 10:45</td>
<td><strong>State-of-the-art lecture</strong> Comorbidity assessment and clinical patient profiles in decision making</td>
<td>P. Mongiat-Artus, Paris (FR)</td>
</tr>
<tr>
<td>10:45 - 11:15</td>
<td><strong>Case discussion</strong> Can MRI replace the use of repeat biopsy in active surveillance?</td>
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<tr>
<td>10:45 - 10:55</td>
<td><strong>Case presenter</strong></td>
<td>M. Valerio, London (GB)</td>
</tr>
<tr>
<td>10:55 - 11:05</td>
<td><strong>Pro</strong></td>
<td>C. Moore, London (GB)</td>
</tr>
<tr>
<td>11:05 - 11:15</td>
<td><strong>Con</strong></td>
<td>G. Giannarini, Udine (IT)</td>
</tr>
<tr>
<td>11:15 - 11:30</td>
<td><strong>State-of-the-art lecture</strong> Using biomarkers in the era of MRI</td>
<td>Y. Fradet, Quebec (CA)</td>
</tr>
<tr>
<td>11:30 - 11:45</td>
<td><strong>State-of-the-art lecture</strong> Genetic markers: Worth the effort and the cost?</td>
<td>P.J. Boström, Turku (FI)</td>
</tr>
<tr>
<td>11:45 - 12:00</td>
<td><strong>Conclusions</strong></td>
<td></td>
</tr>
</tbody>
</table>
# Surgery-in-Motion-School Session

**European Urology session**

**Sunday, 26 March**

**10:45 - 12:45**

**Location:** Room Copenhagen, North Hall (Level 1)

**Chair:** A. Mottrie, Aalst (BE)

<table>
<thead>
<tr>
<th>Time</th>
<th>Session</th>
<th>Speakers</th>
</tr>
</thead>
</table>
| 10:45 - 11:15 | Male cystectomy       | J.W.F. Catto, Sheffield (GB)
|           |                       | A. Mottrie, Aalst (BE)                           |
|           |                       | J. Palou, Barcelona (ES)                        |
|           |                       | N.P. Wiklund, Stockholm (SE)                    |
| 11:15 - 11:45 | Female cystectomy    | J.W.F. Catto, Sheffield (GB)
|           |                       | A. Mottrie, Aalst (BE)                           |
|           |                       | J. Palou, Barcelona (ES)                        |
|           |                       | N.P. Wiklund, Stockholm (SE)                    |
| 11:45 - 12:15 | Ileal conduit         | J.W.F. Catto, Sheffield (GB)
|           |                       | A. Mottrie, Aalst (BE)                           |
|           |                       | J. Palou, Barcelona (ES)                        |
|           |                       | N.P. Wiklund, Stockholm (SE)                    |
| 12:15 - 12:45 | Neobladder            | J.W.F. Catto, Sheffield (GB)
|           |                       | A. Mottrie, Aalst (BE)                           |
|           |                       | J. Palou, Barcelona (ES)                        |
|           |                       | N.P. Wiklund, Stockholm (SE)                    |
E-BLUS Exam
HOT10

Location: Room South America, Exhibition Hall (Level 1)

Aims and objectives of this session
The European training in basic laparoscopic urological skills (E-BLUS) is a programme offered to residents and urologists who want to improve the basic skills in laparoscopy. It is a unique opportunity to train with international experts in laparoscopy. The E-BLUS programme includes:

- Hands-on Training (HOT) courses of different levels carried out under the guidance of experienced tutors
- A set of training-box exercises developed and validated by the Dutch project Training in Urology (TiU) to train basic skills needed in urological laparoscopy
- E-BLUS examination and certification
- An online theoretical course

F. Greco, Crotone (IT)
T. Kalogeropoulos, Athens (GR)
T. Tokas, Hall In Tirol (AT)
L. Tunc, Ankara (TR)
D. Veneziano, Reggio Calabria (RC) (IT)
C. Wagner, Gronau (DE)
Personalised social media workshop for beginners

WS05

Sunday, 26 March
11:00 - 11:30

Location: Social Media Helpdesk, Boulevard (level 1)

Chair: J. Gómez Rivas, Madrid (ES)
### Posters & Videos: The Prize Winners

**Location:** e-Poster Area, North Hall (Level 1)

**Sunday, 26 March 11:00 - 12:00**

<table>
<thead>
<tr>
<th>Time</th>
<th>Event</th>
<th>Details</th>
</tr>
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<tbody>
<tr>
<td>11:00 - 11:10</td>
<td>2nd Prize Best Abstract Non-Oncology: Development and validation of a high-throughput, cell-based assay for anti-myofibroblast activity in Peyronie’s disease</td>
<td>M.M. Ilg, Chelmsford (GB)</td>
</tr>
<tr>
<td>11:10 - 11:20</td>
<td>1st Prize Best Abstract Oncology: Muscle invasive bladder cancer: A single sample patient assay to predict molecular subtypes and benefit of neoadjuvant chemotherapy</td>
<td>R. Seiler, Bern (CH)</td>
</tr>
<tr>
<td>11:20 - 11:33</td>
<td>3rd Prize Best Video: Application of chitosan membranes on the neurovascular bundles after robot-assisted radical prostatectomy: Preliminary results of a phase ii study</td>
<td>F. Porpiglia, Turin (IT)</td>
</tr>
<tr>
<td>11:33 - 11:46</td>
<td>2nd Prize Best Video: Robot assisted radical nephrectomy and inferior vena cava thrombectomy: Surgical technique, perioperative and oncologic outcomes</td>
<td>G. Simone, Rome (IT)</td>
</tr>
</tbody>
</table>
ESU/ESUT/EULIS Hands-on Training Course in Ureterorenoscopy

HOT44

Location: Room Europe, Exhibition Hall (Level 1)
Chair: B. Somani, Southampton (GB)

Aims and objectives of this session
• At the end of the course, the participants will be able to perform rigid and flexible ureteroscopy in the models
• The participants will be able to interact with tutors and gain valuable insights into the tips and tricks of basic and advanced ureteroscopy.

Course description:
Ureteroscopy is an essential tool in the management of stone disease for all Endourologists. This course will provide hands-on-training with tutor guided practical tips and tricks of doing ureteroscopy. Participants will get a chance to perform Semirigid and Flexible ureteroscopy in the models with a chance to navigate the pelvicalyceal system, stone manipulation and extraction.

J. Patterson, Sheffield (GB)
J.P. Caballero Romeu, Alicante (ES)
G.M. Kamphuis, Amsterdam (NL)
N. Macchione, Milano (IT)
A. Ploumidis, Athens (GR)
S. Proietti, Milan (IT)
ESU/ERUS Hands-on Training Course in Robotic surgery - intro

HOT26

Sunday, 26 March
11:30 - 13:00

Location: Room Asia, Exhibition Hall (Level 1)

Chair: W.M. Brinkman, Rotterdam (NL)

Aims and objectives of this session
The European School of Urology (ESU) and the EAU Robotic Urology Section (ERUS) offer an intensive Hands-on Training course. We will provide training using simulators. The main aims of this 90 minutes course are:
- improving the participants' control-skills and hand-eye-coordination, as well as an objective benchmarking of console performance and an introduction into standardized surgical steps in robot-assisted procedures.

Aims and objectives
- Improve your robotic surgery skills in the following areas:
  - Endowrist manipulation
  - Camera Control
  - 3rd Arm Control
  - Needle Placement and Driving
  - Suturing and Knot Tying

H. Zecha, Stuttgart (DE)
ESU/ESFFU Hands-on Training Course in Sacral neuromodulation procedure standardization

HOT20

**Location:** Room Africa, Exhibition Hall (Level 1)

**Chair:** H. Hashim, Bristol (GB)

**Sunday, 26 March**

**11:30 - 13:00**

**Aims and objectives of this session**

A practical hands-on workshop that will allow the participants to practice on models the different steps of performing sacral neuromodulation including primary percutaneous nerve evaluation, tined lead and battery implantation and programming and also troubleshooting.

**Aims and objectives**

- Understand the indications for SNM
- Be able to perform the different steps of the procedure in a standardized format
- Be able to troubleshoot problems with SNM

**Target audience:** Doctors, Nurses, technicians and clinical scientists who have little or no knowledge of sacral neuromodulation.

M. Belal, Birmingham (GB)
S. De Wachter, Nijlen (BE)
T.M. Kessler, Zurich (CH)
S. Musco, Florence (IT)
K-D. Sievert, Salzburg (AT)
L. Thomas, Bristol (GB)
Personalised social media workshop for beginners

WS06

Sunday, 26 March
11:30 - 12:00

Location: Social Media Helpdesk, Boulevard (level 1)
Chair: J. Gómez Rivas, Madrid (ES)
Aims and objectives of this session

Social Media (SoMe) is drastically changing our society. It is not only shaping our personal lives, but it is influencing professional environments, also in the medical field. This advanced social media course is for healthcare professionals who are already active in social media but would like to take it to the next level. The course will cover the following topics:

• Source for scientific research
• Dissemination of content
• Measurement and Analytics – Impact Factor
• Reputation Management
• Guidelines in using social media
• Interaction with patients

11:45 - 14:15
Introduction
J.W.F. Catto, Sheffield (GB)

11:45 - 14:15
Source for scientific research
S. Loeb, New York (US)

11:45 - 14:15
Dissemination of content
S. Loeb, New York (US)

11:45 - 14:15
Measurement and analytics – Impact factor
H. Borgmann, Mainz (DE)

11:45 - 14:15
Reputation management
M.R. Cooperberg, San Francisco (US)

11:45 - 14:15
Guidelines in social media
I. Van Oort, Nijmegen (NL)

11:45 - 14:15
Interaction with patients
I. Van Oort, Nijmegen (NL)

11:45 - 14:15
Discussion
What has changed in the non-oncology guidelines
ESU Course 21

Aims and objectives of this session
At the end of this course, participants should be able to:
• Explain how the recommendations of Guidelines are formulated
• Understand how Guidelines are updated and the importance and limitations of scope search
• Highlight the changes and the gaps of the different guidelines discussed at the course

12:00 - 14:00
Phrasing the 2017 recommendations
A. Tubaro, Rome (IT)

12:00 - 14:00
Updating the guidelines
S. Gravas, Larissa (GR)

12:00 - 14:00
Highlights and changes in the incontinence guidelines
A. Tubaro, Rome (IT)

12:00 - 14:00
Highlights and changes in the mLUTS guidelines
S. Gravas, Larissa (GR)

12:00 - 14:00
Highlights and changes in the infections guidelines
G. Bonkat, Basel (CH)

12:00 - 14:00
Interactive discussion
UTUC: Diagnosis and management
ESU Course 22

**Location:** Room 11, Capital suite (level 3)

**Chair:** S. Shariat, Vienna (AT)

**Aims and objectives of this session**
This course will address contemporary concepts and controversies in UTUC such as:
- Accurate staging and its role in clinical decision making/risk stratification
- Risks, benefits, and side effects of current and novel therapeutic approaches including endoscopic and minimal-invasive surgery
- Optimal management of the bladder cuff as well as indication and extent of lymphadenectomy
- Systemic therapy for high-risk and metastatic patients

12:00 - 14:00
**Epidemiology, diagnosis, evaluation**
M. Rouprêt, Paris (FR)

12:00 - 14:00
**Prognostic and predictive factors, pathology**
S. Shariat, Vienna (AT)

12:00 - 14:00
**Treatment of low risk cancer (high grade Ta, T1 and CIS)**
M. Rouprêt, Paris (FR)

12:00 - 14:00
**Treatment of localized high risk (invasive) and metastatic cancer**
S. Shariat, Vienna (AT)
Laparoscopy for beginners
ESU Course 23

Sunday, 26 March
12:00 - 14:00

Location: Room 12, Capital suite (level 3)
Chair: X. Cathelineau, Paris (FR)

Aims and objectives of this session
With the large widespread of mini-invasive surgery, improving knowledge of practical aspects of laparoscopy is mandatory.
Knowledge of:
- Indications and contra-indications of laparoscopic approach
- How to choose and use the instrumentation, in order to optimize the procedure and minimize adverse effects
- Air insufflations parameters and optimal access in laparoscopic urology
- How to prevent, recognize and manage complications
This course aims to provide all this knowledge in an interactive and practical way (video clip, open discussion), in order to assist beginners in laparoscopy shortening their learning curve and optimizing the success of their laparoscopic procedures.
- Laparoscopic surgery: For which patients and which procedures?
- Masterize the armentarium
- Tips and tricks to optimize the procedure
- New potential and future evolutions

12:00 - 14:00

Indications for laparoscopy
B.S.E.P. Van Cleynenbreugel, Wolfsdonk (BE)

12:00 - 14:00

Instrumentation and haemostatis
X. Cathelineau, Paris (FR)

12:00 - 14:00

Peritoneal access and effects of pneumoperitoneum
B.S.E.P. Van Cleynenbreugel, Wolfsdonk (BE)

12:00 - 14:00

Avoiding complications
X. Cathelineau, Paris (FR)
## Basic surgical and endourological skills

**ESU Course 24**

**Sunday, 26 March**
**12:00 - 14:00**

**Location:** Room 14, Capital suite (level 3)

**Chair:** R.E. Sanchez-Salas, Paris (FR)

**Aims and objectives of this session**

The course is designed to apply basic surgical knowledge and principles in the initial development of urological training. It aims to provide learners with valuable basic skills in developing a safe and methodological approach to application of surgical knowledge.

- To familiarize oneself with all the basic surgical and endourological procedures.
- To understand the importance of previous medical history, anatomy and surgical technique for basic Urological procedures.
- To review indications, technical details and possible complications and management in basic surgical and endourological procedures.

### 12:00 - 14:00

**Physical examination of the genitourinary tract**

P. Verze, Naples (IT)  
R.E. Sanchez-Salas, Paris (FR)

**Penile surgery**

P. Verze, Naples (IT)

**Scrotal surgery**

R.E. Sanchez-Salas, Paris (FR)

**Basic endoscopic procedures (urethral catheterization, cystoscopy, nephrostomy)**

P. Verze, Naples (IT)  
R.E. Sanchez-Salas, Paris (FR)
Testicular cancer
ESU Course 25

Sunday, 26 March
12:00 - 14:00

**Location:** Room 15, Capital suite (level 3)

**Chair:** P. Albers, Düsseldorf (DE)

**Aims and objectives of this session**
The ESU Course on Testicular Cancer will cover all important issues in the diagnosis and treatment of patients with germ cell cancer. There will be time for discussion during and after the presentations. Case reports will be discussed to highlight special situations of controversy. In addition, short video clips will be presented to demonstrate surgical techniques in retroperitoneal residual tumour resection.

In brief, following items will be presented and discussed:
- EAU Guideline recommended staging procedures and classifications like IGCCCG
- Stage-by-stage treatment of low stage disease including TIN
- Chemotherapy and indication of post chemotherapy surgery according to EAU guidelines
- Recommended follow-up investigations, long-term toxicities, 2nd malignancies

12:00 - 14:00
**Testis cancer - early stages**
N.W. Clarke, Manchester (GB)

12:00 - 14:00
**Testis cancer - case discussion**
N.W. Clarke, Manchester (GB)

12:00 - 14:00
**Testis cancer - advanced stages**
P. Albers, Düsseldorf (DE)

12:00 - 14:00
**Testis cancer - case discussion**
P. Albers, Düsseldorf (DE)
Aims and objectives of this session
MIBC is a multifaceted entity where one size no longer fits all, supporting the development of personalized and, in selected cases, organ-preserving strategies.
Are the advances in imaging, molecular biology, conservative surgery, medical oncology and radiotherapy strong enough to shift the current pre-eminence of the ablative approach toward a more integrated and conservative perspective? If yes, what are the ideal candidates?
• One size does not fit all and urologists are central to the development of personalized treatment in MIBC
• Patients selection is critical and based on advances in imaging, resection techniques and pathology
• Organ preservation is feasible in a significant proportion of patients
• Radical cystectomy and pre-emptive chemotherapy are essential to optimize results in aggressive conditions.

12:00 - 14:00
Introduction
B. Malavaud, Toulouse (FR)

12:00 - 14:00
Cystectomy in the management of bladder invasive and locally-advanced bladder cancer
M. Burger, Regensburg (DE)

12:00 - 14:00
Case discussion on cystectomy in the management of bladder-invasive and locally-advanced bladder cancer
B. Malavaud, Toulouse (FR)

12:00 - 14:00
Bladder-sparing approaches to muscle invasive bladder cancer
M. Burger, Regensburg (DE)

12:00 - 14:00
Case discussion on bladder sparing approaches to muscle invasive bladder cancer
B. Malavaud, Toulouse (FR)

12:00 - 14:00
Cytotoxic chemotherapy in bladder cancer: Neoadjuvant and adjuvant setting and treatment of metastatic disease
B. Malavaud, Toulouse (FR)
Evaluation of risk in comorbidity in onco-urology
ESU Course 27

Aims and objectives of this session
Senior adults represent a growing population with specific problems. Individual life expectancy is a key decision driver . . . provided it is approachable.

The key points to be covered are the following

• Age by itself is usually irrelevant, unlike comorbidities
• Survival predictive factor exist, combined in practical tools
• Reliable screening tools for geriatrician referral exist
• A multidisciplinary program with geriatricians is key

12:00 - 14:00 Introduction: Who we are, objectives
N. Mottet, Saint-Étienne (FR)

12:00 - 14:00 Senior adults: A growing population
S. O’Hanlon

12:00 - 14:00 Senior adults are undertreated
N. Mottet, Saint-Étienne (FR)

12:00 - 14:00 Age is not a key factor regarding major surgery (muscle-invasive bladder experience)
N. Mottet, Saint-Étienne (FR)

12:00 - 14:00 Clinical cases (to set the scene): Evaluation of comorbidities in practice / individual life expectancy
N. Mottet, Saint-Étienne (FR)
S. O’Hanlon

12:00 - 14:00 How to evaluate individual life expectancy in practice
S. O’Hanlon

12:00 - 14:00 How to evaluate individual comorbidities in practice
S. O’Hanlon

12:00 - 14:00 An example of the added value of a dedicated program and its prerequisites / what to do in real life
S. O’Hanlon

12:00 - 14:00 Conclusion
N. Mottet, Saint-Étienne (FR)
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<thead>
<tr>
<th><strong>Location:</strong></th>
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<tr>
<td><strong>Chair:</strong></td>
<td>J. Gómez Rivas, Madrid (ES)</td>
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</table>

**Personalised social media workshop for beginners**

**WS07**

**Sunday, 26 March**

**12:00 - 12:30**
Aims and objectives of this session
This session will be divided into two parts. During the first part, we will see several communications concerning fusion biopsies, through different methods. Then, we will go further with videos concerning focal treatment of prostate cancer. In the Second part will show the videos and reward the authors for the 3 best videos presented during the congress. Don't miss these amazing video communications that will be exclusively presented during this award session.

All presentations have a maximum length of 8 minutes, followed by 4 minutes of discussion.

V41 MRI/US fusion transperineal prostate biopsies under local anesthesia
By: Bianco F.¹, Debruyne F.², Martinez-Ballesteros C.³, Lozano-Kaplun S.¹, Cedeno J.³, Kaufman A.¹, Carballido J.³, Scher J.¹, Martinez-Salamanca J.³
Institutes: ¹Urological Research Network, Dept. of Urology, Miami, United States of America, ²Andros Institute, Dept. of Urology, Arnhem, The Netherlands, ³Universidad Autonoma Madrid, Dept. of Urology, Madrid, Spain

V42 Robotic MRI/US fusion transperineal biopsy using the iSR’obot Mona Lisa: Technique, safety and accuracy
By: Patel A.¹, Servian P.¹, Winkler M.¹, Tiong L.C.², Yuen J.², Ho H.³, Chen K.³, Kruck S.⁴, Grummet J.⁵
Institutes: ¹Imperial Healthcare NHS Trust, Dept. of Urology, London, United Kingdom, ²Ziocom Group, Singapore, Singapore, ³Singapore General Hospital, Dept. of Urology, Singapore, Singapore, ⁴University Hospital Tübingen, Dept. of Urology, Tübingen, Germany, ⁵Monash University, Dept. of Urology, Melbourne, Australia

V43 Single setting 3D MRI-US guided frozen section and focal cryoablation of the index lesion: Proof of principle and initial series
By: Lugnani F.¹, Misuraca L.¹, Ferrero M.¹, Panebianco V.², Del Monte M.², Sentinelli S.³, Gallucci M.¹, Simone G.¹
Institutes: ¹Regina Elena National Cancer Institute, Dept. of Urology, Rome, Italy, ²Sapienza University of Rome, Dept. of Radiology, Rome, Italy, ³Regina Elena National Cancer Institute, Dept. of Pathology, Rome, Italy

V44 Focal therapy with HIFU FocalOne device with MRI target fusion biopsy by KOELIS
By: Potiron E., Nevoux P., Rousseau T., Le Goguic G., Lacoste J.
Institutes: Clinique Urologique Nantes Atlantis, Nantes, France

V45 Multiparametric magnetic resonance imaging in fusion with transrectal ultrasound fusion biopsy with the BioJet™ System for the detection of clinically significant prostate cancer. Technical details and initial results
By: Russo A.¹, Kinzikeeva E.¹, Maga T.¹, Losa A.¹, Pini G.¹, Cardone G.², Salonia A.³, Montorsì F.², Briganti A.², Suardi N.¹, Gaboardi F.¹
Institutes: ¹Ospedale San Raffaele Turro, Dept. of Urology, Milan, Italy, ²Ospedale San Raffaele, Milan, Italy
**V46**

MRI/US fusion office-based targeted cryoablation with local anesthesia

**By:** Bianco F., Lozano-Kaplun S., Cedeno J., Barashi N., Scher J., Kaufman A., Lopez A., Nicholson M.

**Institutes:** Urological Research Network, Dept. of Urology, Miami Lakes, United States of America

**V47**

Application of chitosan membranes on the neurovascular bundles after robot-assisted radical prostatectomy: Preliminary results of a phase II study

**By:** Porpiglia F., Bertolo R., Checcucci E., Manfredi M., De Cillis S., Aimar R., Geuna S., Fiori C.

**Institutes:** 1San Luigi Hospital, Dept. of Urology, Turin, Italy, 2San Luigi Hospital, Neuroscience Institute Cavalieri Ottolenghi, Turin, Italy

**V48**

Robot assisted radical nephrectomy and inferior vena cava thrombectomy: Surgical technique, perioperative and oncologic outcomes

**By:** Simone G., Misuraca L., Hatcher D., Ferriero M., Minisola F., Tuderti G., Guaglianone S., De Castro Abreu A.L., Aron M., Desai M., Gill I.S., Gallucci M.

**Institutes:** 1Regina Elena National Cancer Institute, Dept. of Urology, Rome, Italy, 2Keck School of Medicine, University of Southern California, Dept. of Urology, Los Angeles, United States of America

**V49**

Trimodal (18) F-choline-PET/mpMRI/TRUS targeted prostate biopsies: First clinical experience

**By:** Bonnal J-L., Marien A., Rock A., El Maadarani K., Francois C., Delebarre A., Berssard D., Mauroy B., Gosset P., Blaire T.

**Institutes:** 1Hopital Saint Philibert, Dept. of Urology, Lomme, France, 2Hopital Saint Philibert, Dept. of Radiology, Lomme, France, 3Hopital Saint Vincent, Dept. of Pathology, Lille, France, 4Hopital Saint Philibert, Dept. of Nuclear Medicine, Lomme, France
Modern tools and new evidence in staging of urothelial carcinomas
Poster Session 29

**Location:** Room Madrid, North Hall (Level 1)

**Chairs:**
- M.J. Ribal, Barcelona (ES)
- D.J. Rosario, Sheffield (GB)
- T. Seisen, Paris (FR)

**Aims and objectives of this session**
The proper diagnostic pathway, including demands for pathology and imaging, is an ongoing debate in bladder cancers.

Non-muscle invasive papillary tumours confined to the mucosa and invading the lamina propria are classified as stage Ta and T1, respectively, according to the Tumour, Node, Metastasis (TNM) classification system. Flat, high-grade tumours that are confined to the mucosa are classified as CIS (Tis). New molecular biology techniques and clinical experience can pinpoint the highly malignant potential of selected CIS and T1 lesions. In muscle invasive bladder cancer both computed tomography (CT) and magnetic resonance imaging (MRI) may be used to detect T3b or higher disease. However, assessment of lymph node metastases with CT or MRI based on size and morphology has its limitations. This session aims to highlight new insights in the work-up of these tumors.

Poster viewing of 20 minutes. Presentations will take place on stage. Standard presentations are 2 minutes in length, followed by 2 minutes for discussion.

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### Prognostic impact of a 12-gene progression score in non-muscle invasive bladder cancer: A prospective multicenter validation study

**By:** Dyrskjøt L.¹, Reinert T.², Algaba F.³, Christensen E.², Nieboer D.⁴, Hermann G.⁵, Morgensen K.⁶, Marquez M.⁷, Segersten U.⁷, Hoyer S.⁷, Ulhøj B.⁷, Hartmann A.⁹, Stöhr R.¹⁰, Nawroth R.¹¹, Beukers W.¹², Schwamborn K.¹², Tulic C.¹³, Simic T.¹⁴, Junker K.¹⁵, Harving N.¹⁶, Petersen A.C.¹⁷, Jensen J.B.¹⁸, Keck B.¹⁹, Horstmann M.¹, Maurer T.¹⁹, Steyerberg E.²⁰, Zwarthoff E.²⁰, Real F.²¹, Malats N.²¹, Malmström P-U.², Ørntoft T.F.²

**Institutes:**
- ¹Friedrich Schiller University of Jena, Dept. of Urology, Jena, Germany,
- ²Aarhus University Hospital, Dept. of Molecular Medicine, Aarhus, Denmark,
- ³University Autonoma De Barcelona, Section of Pathology, Fundacio Puigvert, Barcelona, Spain,
- ⁴Erasmus MC, Dept. of Public Health, Rotterdam, The Netherlands,
- ⁵Frederiksberg Hospital, Dept. of Urology, Frederiksberg, Denmark,
- ⁶Spanish National Cancer Research Centre, CNIO, Madrid, Spain,
- ⁷Uppsala University, Dept. of Surgical Sciences, Uppsala, Sweden,
- ⁸University of Aarhus, Dept. of Pathology, Aarhus, Denmark,
- ⁹University Hospital of Erlangen, Dept. of Pathology, Erlangen-Nürnberg, Germany,
- ¹⁰University Hospital Erlangen, Dept. of Urology, Erlangen, Germany,
- ¹¹Klinikum Rechts Der Isar, Technical University of Munich, Dept. of Urology, Munich, Germany,
- ¹²Klinikum Rechts Der Isar, Technical University of Munich, Dept. of Pathology, Munich, Germany,
- ¹³Faculty of Medicine, University of Belgrade, Dept. of Urology, Belgrade, Serbia,
- ¹⁴Faculty of Medicine, University of Belgrade, Institute of Medical and Clinical Biochemistry, Belgrade, Serbia,
- ¹⁵Saarland University, Dept. of Urology, Homburg, Germany,
- ¹⁶Aalborg University Hospital, Dept. of Urology, Aalborg, Denmark,
- ¹⁷Aalborg University Hospital, Dept. of Pathology, Aalborg, Denmark,
- ¹⁸Aarhus University Hospital, Dept. of Urology, Aarhus, Denmark,
- ¹⁹Klinikum Rechts Der Isar, Technical University of Munich, Dept. of Urology, Munich, Germany,
- ²⁰Erasmus MC, Dept. of Pathology, Rotterdam, The Netherlands,
- ²¹Universitat Pompeu Fabra, Dept. of Experimental Science, Barcelona, Spain

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### 11C-acetate PET-MRI in bladder cancer staging

**By:** Salminen A.¹, Jambor I.², Merisaari H.³, Ettala O.¹, Virtanen J.², Koskinen I.⁴, Veskimäe E.⁵, Saarinen J.⁶, Minn H.⁶, Kemppainen J.⁶, Boström P.²

**Institutes:**
- ¹Turku University Hospital, Dept. of Urology, Turku, Finland,
- ²Turku University Hospital,
Metric sub-stage according to micro and extensive lamina propria invasion improves prognostics in T1 bladder cancer

By: Franssen Van De Putte E.1, Van Der Kwast T.2, Bertz S.3, Denzinger S.4, Manach Q.5, Compérat E.6, Boormans J.1, Jewett M.8, Stoehr R.3, Zlotta A.9, Hendriks A.1, Rouprêt M.5, Otto W.4, Burger M.4, Hartmann A.2, Van Rijn B.1

Institutes: Netherlands Cancer Institute - Antoni van Leeuwenhoek Hospital, Dept. of Urology, Amsterdam, The Netherlands, 2University of Toronto, Princess Margaret Cancer Center, Dept. of Pathology, Toronto, Canada, 3University of Erlangen, Dept. of Pathology, Erlangen, Germany, 4University of Regensburg, Caritas Krankenhaus St. Joseph, Dept. of Urology, Regensburg, Germany, 5Hôpital Universitaire Pitié-Salpêtrière, Dept. of Urology, Paris, France, 6Hôpital Universitaire Pitié-Salpêtrière, Dept. of Pathology, Paris, France, 7Erasmus Medical Center, Dept. of Urology, Rotterdam, The Netherlands, 8University of Toronto, Princess Margaret Cancer Center, Dept. of Surgery (Urology), Toronto, Canada, 9University of Toronto, Mount Sinai Hospital, Dept. of Surgery (Urology), Toronto, Canada

A panel of micro-RNA signature as a tool for predicting survival of patients with urothelial carcinoma of the bladder


Institutes: Osaka Medical College, Osaka, Japan, 2Osaka Medical College, Dept. of Urology, Osaka, Japan

Using the EORTC risk tables & the CUETO scoring model for predicting recurrence and progression in non-muscle invasive bladder cancer: A local single centre experience

By: Lee S.L., Lim S.K., Ng K.K., Ng F.C.

Institutes: Changi General Hospital, Dept. of Urology, Singapore, Singapore

Using liquid biopsy to assess the genomic landscape of metastatic urothelial carcinoma

By: Todenhöfer T.1, Van der Kerkhove G.2, Struss W.2, Annala M.2, Beja K.2, Eigel B.2, Mischinger J.1, Stenzl A.1, Black P.2, Wyatt A.2

Institutes: Eberhard-Karls-University, Dept. of Urology, Tübingen, Germany, 2University of British Columbia, Vancouver Prostate Centre, Vancouver, Canada

Comparison between the diagnostic accuracies of 18F-fluorodeoxyglucose (FDG) positron emission tomography (PET)/computed tomography (CT) and morphological imaging in recurrent urothelial carcinomas: A retrospective, multi-center study


Institutes: University of Padua, Dept. of Surgery, Oncology and Gastroenterology, Padua, Italy, 2University of Udine, Dept. of Experimental and Clinical Medical Sciences, Udine, Italy, 3Ospedale San Raffaele, Division of Oncology, Unit of Urology, Milan, Italy, 4Mayo Clinic, Dept. of Urology, Rochester, United States of America, 5Sant’Orsola-Malpighi Hospital, Dept. of Nuclear Medicine, Bologna, Italy, 6IRCCS Ospedale San Raffaele, Dept. of Nuclear Medicine, Milan, Italy, 7Mayo Clinic, Dept. of Nuclear Medicine, Rochester, United States of America, 8University Hospital of Ferrara, Dept. of Diagnostic Imaging E Laboratory Medicine, Ferrara, Italy, 9University Hospital of Ferrara, Nuclear Medicine Unit, Diagnostic Imaging E Laboratory Medicine Department, Ferrara, Italy, 10Sant’Orsola-Malpighi Hospital, Dept. of Urology, Bologna, Italy, 11Veneto Institute of Oncology IOV – IRCCS, Nuclear Medicine and Molecular Imaging Unit, Padua, Italy, 12University of Padua, Dept. of Surgery, Oncology, and Gastroenterology, Padua, Italy

Prognostic impact of immunohistochemical classification of bladder cancer according to luminal (Uroplakin III) and basal (Cytokeratin 5/6) markers
Validation of preoperative thrombocytosis as adverse prognostic factor in advanced bladder cancer (BCa) after radical cystectomy (RC)

By: Foerster B.¹, Moschini M.¹, AbuFaraj M.², Soria F.¹, Lotan Y.³, Karakiewicz P.³, Briganti A.⁴, Babjuk M.⁵, Rink M.⁶, Kluth L.⁶, John H.⁷, Shariat S.¹

Institutes: Medical University of Vienna, Dept. of Urology, Vienna, Austria, ²University of Texas Southwestern Medical Center, Dept. of Urology, Dallas, United States of America, ³University of Montreal, Dept. of Urology, Montreal, Canada, ⁴Urological Research Institute, Vita-Salute San Raffaele Scientific Institute, Dept. of Urology, Milan, Italy, ⁵Faculty Hospital Motol, Second Faculty of Medicine, Charles University In Praha, Dept. of Urology, Prague, Czech Republic, ⁶University Medical Center Hamburg-Eppendorf, Dept. of Urology, Hamburg, Germany, ⁷Kantonsspital Winterthur, Dept. of Urology, Winterthur, Switzerland

Preoperative hemoglobin to platelet ratio as a predictor of survival after radical cystectomy due to bladder cancer, synergic effect of anemia and thrombocytosis

By: La Croce G.¹, Moschini M.¹, Dell'Oglio P.¹, Nini A.¹, Bandini M.¹, Capogrosso P.¹, Ventimiglia E.¹, Sanchez-Salas R.², Salonia A.¹, Briganti A.¹, Montorsi F.¹, Gallina A.¹, Colombo R.¹

Institutes: IRCCS Ospedale San Raffaele, Dept. of Urology, Milan, Italy, ²L’Institut Mutualiste Montsouris, Dept. of Urology, Paris, France

Tumor regression grading after neoadjuvant chemotherapy in bladder cancer: Validation in an independent cohort

By: Seiler R.¹, Oo H.Z.², Todenhöfer T.², Fazli L.², Daugaard M.², Black P.²

Institutes: Universitätsspital Bern, Universitätsklinik für Urologie, Bern, Switzerland, ²University of British Columbia, Dept. of Urologic Sciences, Vancouver, Canada

Potential utility of apparent diffusion coefficient (ADC) value as a biomarker to predict the difference between T1G3 non-muscle invasive bladder cancer (NMIBC) and muscle invasive bladder cancer (MIBC)

By: Masaaki F.¹, Sakamoto S.², Sekita N.¹, Sato H.¹, Kono H.¹, Takeuchi N.², Suzuki H.², Mikami K.¹, Ichikawa T.²

Institutes: Chibken Saiseikai Narashino Hospital, Dept. of Urology, Narashino, Japan, ²Chiba University, Dept. of Urology, Chiba, Japan, ³Toho University Medical Center, Sakra Hospital, Dept. of Urology, Sakura, Japan, ⁴Chibken Saiseikai Narashino Hospital, Dept. of Urology, Sakura, Japan

The effects of 18F-FDG PET/CT on the management and prognosis of patients with bladder cancer (BCa) and upper urinary tract urothelial carcinoma (UTUC)

By: Zattoni F.¹, Briganti A.², Colicchia M.², Castellucci P.², Ficarra V.², Karnes R.J.², Fallanca F.², Lowe V.², Massari F.², Gallina A.², Bartolomei M.², Picchio M.², Ippolito C.², Schiavina R.²,², Zattoni F.², Evangelista L.²

Institutes: University of Padua, Dept. of Surgery, Oncology, and Gastroenterology, Padua, Italy, ²URI, IRCCS Ospedale San Raffaele, Division of Oncology, Unit of Urology, Milan, Italy, ³Mayo Clinic, Dept. of Urology, Rochester, United States of America, ⁴Sant’Orsola-Malpighi Hospital, Dept. of Nuclear Medicine, Bologna, Italy, ⁵University of Udine, Dept. of Experimental and Clinical Medical Sciences, Udine, Italy, ⁶IRCCS Ospedale San Raffaele, Milan, Italy, Dept. of Nuclear Medicine, Milan, Italy, ⁷Mayo Clinic, Dept. of Nuclear Medicine, Rochester, United States of America, ⁸S. Orsola-Malpighi Hospital, Dept. of Medical Oncology, Bologna, Italy, ⁹University Hospital of Ferrara, Dept. of Diagnostic Imaging E Laboratory Medicine, Ferrara, Italy, ¹⁰University- Hospital of Ferrara, Dept. of Surgery, Ferrara, Italy, ¹¹Sant’Orsola-Malpighi Hospital, Dept. of Urology, Bologna, Italy, ¹²Veneto Institute of Oncology IOV – IRCSS, Nuclear Medicine and Molecular Imaging Unit, Padua, Italy

Summary
D.J. Rosario, Sheffield (GB)
**Aims and objectives of this session**
The aims and objectives of this session are to achieve new data on pathophysiology of non-neurogenic LUTS, with a special focus on metabolic syndrome as new target for behavioural treatments of LUTS, including diet and lifestyle.

Poster viewing of 20 minutes. Presentations will take place on stage. Standard presentations are 2 minutes in length, followed by 2 minutes for discussion. Extended presentations (+) are 3 minutes in length, followed by 3 minutes for discussion.

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**Poster 393**

*The prevalence and progression of lower urinary tract symptoms in an ageing population – results from the European Randomized study of Screening for Prostate Cancer (Rotterdam)*

By: Venderbos L.\(^1\), Bangma C., Roobol M.

Institutes: Erasmus MC, Dept. of Urology, Rotterdam, The Netherlands

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**Poster 394**

*Management of LUTS in men in a nationwide cohort with 10 years follow-up: Lessons from clinical practice*

By: Cornu J.-N.\(^1\), Vicaut E.\(^2\), Portal J.-J.\(^2\), Gabbas M.\(^3\), Tupper P.\(^3\), Doizi S.\(^4\), Lukacs B.\(^4\)

Institutes: \(^1\)CHU de Rouen - Hôpital Charles Nicolle, Dept. of Urology, Rouen, France, \(^2\)Fernand Widal Hospital, Dept. of Biostatistics and Clinical Research, Paris, France, \(^3\)National Health Insurance, Data Management, Paris, France, \(^4\)Tenon Hospital, Dept. of Urology, Paris, France

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**Poster 395**

*Who is likely to be safe on conservative management for LUTS-BPH?*

By: Rosier P.

Institutes: UMC Utrecht, Dept. of Urology, Utrecht, The Netherlands

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**Poster 396**

*Development of an electronic bladder diary app for smartphone: A pilot study*

By: Mateu Arrom L.\(^1\), Peri L.\(^2\), Franco A.\(^2\), López-Fando L.\(^3\), Alcaraz A.\(^2\)

Institutes: \(^1\)Hospital Clinic Barcelona - Hospital Plató, Dept. of Urology, Barcelona, Spain, \(^2\)Hospital Clinic Barcelona, Dept. of Urology, Barcelona, Spain, \(^3\)Hospital Ramón Y Cajal, Dept. of Urology, Madrid, Spain

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**Poster 397**

*Analysis of the relationship between benign prostatic hyperplasia/lower urinary tract symptoms and total serum testosterone level*

By: De Nunzio C., Presicce F., Lombardo R., Tema G., Bellangino M., Cancrini F., Nacchia A., Tubaro A.

Institutes: Sant’ Andrea Hospital - Sapienza University, Dept. of Urology, Rome, Italy

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**Poster 398**

*Metabolic syndrome and smoking are associated with an increased risk of nocturia in male patients with benign prostatic enlargement*


Institutes: Sant’ Andrea Hospital - Sapienza University, Dept. of Urology, Rome, Italy

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**Poster 399**

*Effect of restricted salt intake on nocturia*

By:
Effect of weight reduction in lower urinary tract symptoms among men who underwent bariatric surgery
Institutes: Prince of Wales Hospital, The Chinese University of Hong Kong, Dept. of Surgery, Hong Kong, Hong Kong

Patients with nocturnal polyuria presented a different night-time and daytime bladder capacity: Implication for nocturia
By: Presicce F., De Nunzio C., Puccini F., Melchionna A., Lombardo R., Tubaro A.
Institutes: Sant’ Andrea Hospital - Sapienza University, Dept. of Urology, Rome, Italy

Urgency is a conclusive target for nocturia in male patients with lower urinary tract symptoms: Results from a multicenter prospective study
By: Kiuchi H., Ueda N., Soda T., Fukuhara S., Takao T., Tsujimura A., Miyagawa Y., Nonomura N.
Institutes: Osaka University, Dept. of Urology, Suita, Japan

Lower urinary tract symptoms in patients with Parkinson’s disease in a prospective study: Symptoms, urodynamics and considerations
By: Chunsong J., Cui X., Yan H., Wang Q., Li J., Cui B., Chen X., Ou T.
Institutes: Xuanwu Hospital Capital Medical University, Dept. of Urology, Beijing, China

Thyroid hormones and benign prostatic hyperplasia
By: Lee J-H.
Institutes: National Police Hospital, Dept. of Urology, Seoul, South Korea

The association between lower urinary tract symptoms and cardiovascular risk factors in men
By: Yee C-H., Yip S-Y., Teoh J.Y-C., Chiu P.K-F., Chan C-K., Chan E.S-Y., Hou S-M., Ng C-F.
Institutes: Prince of Wales Hospital, The Chinese University of Hong Kong, Dept. of Surgery, Hong Kong, Hong Kong
# Tailored stone treatment

**Poster Session 31**

| Location: | Room Paris, North Hall (Level 1) |
| Chairs: | E. Montanari, Milan (IT)  
 P.J.S. Osther, Fredericia (DK)  
 A. Petřík, Ceske Budejovice (CZ) |

**Aims and objectives of this session**

ESWL, ureteroscopy, percutaneous nephrolithotomy or even laparoscopy? A tailored, individualized treatment plan should be the aim, although all modalities can be used for most stones.

Poster viewing of 20 minutes. Presentations will take place on stage. Standard presentations are 2 minutes in length, followed by 2 minutes for discussion.

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<table>
<thead>
<tr>
<th>Presentation</th>
<th>Title</th>
<th>Authors</th>
<th>Institutes</th>
</tr>
</thead>
<tbody>
<tr>
<td>407</td>
<td>Asymptomatic renal stones: Long term follow up from a tertiary hospital</td>
<td>By: Darrad M., Agyei M., Yallappa S., Subramonian K.</td>
<td>Queen Elizabeth Hospital, Dept. of Urology, Birmingham, United Kingdom</td>
</tr>
<tr>
<td>408</td>
<td>Follow-up care after ED visits for kidney stones — a missed opportunity</td>
<td>By: Hollingsworth J., Yan P.L., Hollenbeck B.K., Ghani K.R.</td>
<td>University of Michigan, Dept. of Urology, Ann Arbor, United States of America</td>
</tr>
<tr>
<td>409</td>
<td>Acute renal colic, urinary tract infection and leucocytosis – is there any relationship? A prospective trial</td>
<td>By: Schnabel M.J., Rosenhammer B., Fritsche H.-M.</td>
<td>Caritas Krankenhaus St. Josef, University of Regensburg, Dept. of Urology, Regensburg, Germany</td>
</tr>
<tr>
<td>410</td>
<td>A multi-centre cohort study evaluating the role of inflammatory markers in patient’s presenting with acute ureteric colic (MIMIC)</td>
<td>By: Shah T.¹, O’Keefe A.², Gao C.¹, Manning T.¹, Peacocke A.¹, Cashman S.¹, Shakir T.¹, Nambiar A.¹, Lamb B.¹, Cumberbatch M.¹, Pickard R.², Erotocritou P.², Smith D.², Kasivisvanathan V.¹</td>
<td>British Urology Researchers in Surgical Training, Dept. of Urology, London, United Kingdom, University College London, Dept. of Statistical Science, London, United Kingdom, Newcastle University, Dept. of Urology, Newcastle, United Kingdom, Whittington Hospital, Dept. of Urology, London, United Kingdom, University College London Hospital, Dept. of Urology, London, United Kingdom</td>
</tr>
<tr>
<td>411</td>
<td>Oral dissolution therapy (ODT) for lucent renal calculi; can we predict the outcome?</td>
<td>By: Elsawy A., Fleshal A., El-Nahas A., Abdel-Basset M., Farag H., Shokeir A.</td>
<td>Mansoura University, Dept. of Urology, Mansoura, Egypt</td>
</tr>
<tr>
<td>412</td>
<td>Day-case ureteroscopy (DC-URS) for stone disease: Outcomes from an university hospital</td>
<td>By: Ghosh A.¹, Oliver R.¹, Way C.², White L.², Somani B.¹</td>
<td>University Hospital Southampton NHS FT, Dept. of Urology, Southampton, United Kingdom, University Hospital Southampton NHS FT, Dept. of Anaesthesiology, Southampton, United Kingdom</td>
</tr>
<tr>
<td>413</td>
<td>Comparison of success and complication rates between extracorporeal shock wave lithotripsy (ESWL) and flexible ureterorenoscopy (URS) for untreated renal calculi</td>
<td>By:</td>
<td></td>
</tr>
</tbody>
</table>
414 Ureteroscopy in pregnant women with complicated colic pain: A two center–matched retrospective study
Institutes: Marmara University School of Medicine, Dept. of Urology, Istanbul, Turkey, 2University of Messina, Dept. of Human Pathology, Section of Urology, Messina, Italy, 3University of Messina, Unit of Gynecology and Obstetrics, Department of Human Pathology In Adulthood and Childhood “G. Barresi”, Messina, Italy, 4Asklepios Hospital Barmbek, Dept. of Urology, Hamburg, Germany

415 Comparison of three surgical modalities for 20–25mm size lower pole stones: Retrograde intrarenal surgery (RIRS) vs mini-percutaneous nephrolithotomy (MPCNL) vs. percutaneous nephrolithotomy (PCNL), which is preferred?
By: Choi J.Y., Ko Y.H., Song P.H., Moon K.H., Jung H.C.
Institutes: Yeungnam University College of Medicine, Dept. of Urology, Daegu, South Korea

416 Retrograde intrarenal surgery and micro-percutaneous nephrolithotomy for renal lithiasis smaller than 2 cm
By: Cepeda M., Amón J.H., Mainez J.A., De La Cruz B., Rodríguez V., Poza M., Alonso D., Martínez-Sagarra J.M.
Institutes: Río Hortega University Hospital, Dept. of Urology, Valladolid, Spain

417 Transperitoneal laparoscopic ureterolithotomy vs. percutaneous antegrade ureteroscopy in the treatment of large proximal ureteral calculi: A prospective randomized comparative study
By: El Harrech Y., Abaka N., Ghoundale O., Touiti D.
Institutes: Military Hospital Avicenne, Dept. of Urology, Marrakech, Morocco

418 Retroperitoneal laparoscopic ureterolithotomy versus semi rigid URS with laser lithotripsy in management of upper ureteric stone 2 cm or more: A prospective comparative study
Institutes: Zagazig University Hospital, Dept. of Urology, Zagazig, Egypt

419 Transperitoneal laparoscopic pyelolithotomy versus retrograde intrarenal surgery for treatment of renal pelvis stones in horseshoe kidneys: A prospective randomized study
By: Fawzi A.M., Sakr A., Eliwa A., Omran M., Youssef M., Desoky E., Seleen M.
Institutes: Zagazig University, Dept. of Urology, Zagazig, Egypt

420 Live surgical demonstrations do not compromise patients safety: Results from a 5 year experience in 151 urinary stone cases
By: Zanetti S.P.1, Legemate J.2, Kamphuis G.2, Baard J.2, Montanari E.1, Traxer O.2, De La Rosette J.2
Institutes: 1Fondazione Ircss Ca’ Granda Ospedale Maggiore Policlinico, Dept. of Urology, Milan, Italy, 2AMC Academic Hospital, Dept. of Urology, Amsterdam, The Netherlands, 3Hôpital Tenon, Dept. of Urology, Paris, France

421 The usefulness of limited field low-dose noncontrast computerized tomography for monitoring ureteral stones
By: Cho D.S.1, Kim S.I.2, Kim S.J.2
Institutes: Bundang Jesaeng General Hospital, Dept. of Urology, Seongnam, South Korea, 2Ajou University School of Medicine, Dept. of Urology, Suwon, South Korea

423 What are the benefits and harms of ureteroscopy (URS) compared with shock-wave lithotripsy
(SWL) in the treatment of upper ureteral stones: A systematic review

By: Drake T.1, Grivas N.2, Dabestani S.3, Knoll T.4, Lamm T.B.5, Maclennan S.6, Aleš A.7, Skolarikos A.8, Straub M.9, Türk C.10, Yuhong Yuan C.11, Sarica K.12

Institutes: 1Royal Bournemouth Hospital, Dept. of Urology, Bournemouth, United Kingdom, 2Hatzikosta General Hospital, Dept. of Urology, Ioannina, Greece, 3Skåne University Hospital, Dept. of Urology, Malmö, Sweden, 4Sindelfingen-Böblingen Medical Center, University of Tübingen, Dept. of Urology, Sindelfingen, Germany, 5University of Aberdeen, Aberdeen Royal Infirmary, Dept. of Urology, Aberdeen, United Kingdom, 6University of Aberdeen, Academic Urology Unit, Aberdeen, United Kingdom, 7Region Hospital, Dept. of Urology, České Budějovice, First Faculty of Medicine, Charles University, Dept. of Urology, Prague, Czech Republic, 8Sismanoglio Hospital, Athens Medical School, Second Dept. of Urology, Athens, Greece, 9Technical University Munich, Dept. of Urology, Munich, Germany, 10Urologische Praxis und Steinzentrum, Vienna, Austria, 11McMaster University, Dept. of Medicine, Division of Gastroenterology, Hamilton, Canada, 12Dr. Lutfi Kirdar Kartal Research and Training Hospital, Dept. of Urology, Istanbul, Turkey
## Pelvic pain and bladder pain syndrome

**Poster Session 32**

**Location:** Room Amsterdam, North Hall (Level 1)

**Chairs:**
- A. Apostolidis, Thessaloniki (GR)
- R. Dmochowski, Nashville (US)
- A. Giannantoni, Perugia (IT)

### Aims and objectives of this session

Pain has a serious impact on the quality of life of patients with bladder pain syndromes. Where do we stand?

Poster viewing of 20 minutes. Presentations will take place on stage. Standard presentations are 2 minutes in length, followed by 2 minutes for discussion.

<table>
<thead>
<tr>
<th>Presentation Number</th>
<th>Title</th>
<th>Author(s)</th>
<th>Institute(s)</th>
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<tbody>
<tr>
<td>424</td>
<td>Efficacy of botulinum toxin A for the treatment of interstitial cystitis to improve quality of life: A systematic review</td>
<td>Ochoa Vargas D.C., Garcia Perdomo H.A.</td>
<td>Hospital Universitari Germans Trias i Pujol, Dept. of Urology, Barcelona, Spain, Universidad Del Valle, Dept. of Urology, Cali, Colombia</td>
</tr>
<tr>
<td>425</td>
<td>Quetiapine fumarate extended release in the treatment of bladder painful syndrome with nonurological associated conditions: An exploratory study</td>
<td>Giannantoni A., Gubbiotti M., Rossi De Vermandois J.A., Turco M., Quadrini F., Salvini E.</td>
<td>University of Perugia, Dept. of Surgical and Biomedical Sciences, Urology and Andrology Section, Perugia, Italy</td>
</tr>
<tr>
<td>426</td>
<td>Increased mRNA expression of transient receptor potential channels in the urothelium of patients with interstitial cystitis: Possible biomarker</td>
<td>Mitsui T., Tsuchiya S., Sawada N., Ihara T., Kira S., Nakagomi H., Takeda M.</td>
<td>University of Yamanashi, Dept. of Urology, Chuo-City, Japan</td>
</tr>
<tr>
<td>427</td>
<td>Efficacy of treatment with Hyaluril in females with urethral syndrome: A prospective analysis comparing naive patients with subjects who experienced previous ineffective treatments</td>
<td>Palleschi G., Carbone A., Leto A., Fuschi A., Salhi Y., Velotti G., Pajoncini C., Nallo S., Pastore A.L.</td>
<td>Sapienza University of Rome, Dept. of Medicosurgical Sciences and Biotechnologies, Urology Unit, Latina, Italy</td>
</tr>
<tr>
<td>428</td>
<td>Comparison of intravesical chondroitin sulfate and combined hyaluronic acid/chondroitin sulfate for interstitial cystitis/bladder pain syndrome</td>
<td>Arslan B., Onuk O., Ozkan A., Eroglu A., Cetin B., Hazar A.I., Aydin M.</td>
<td>Gop Taksim Training and Research Hospital, Dept. of Urology, Istanbul, Turkey, Yeniyüzyil University, Dept. of Urology, Istanbul, Turkey</td>
</tr>
<tr>
<td>429</td>
<td>Multidisciplinary self-management telecare system may improve quality of life in patients with interstitial cystitis/bladder pain syndrome (IC/BPS) – a randomized controlled study</td>
<td>Lee M-H., Wu H-C., Chen W-C.</td>
<td>Feng-Yuan Hospital, Dept. of Urology, Taichung, Taiwan</td>
</tr>
<tr>
<td>431</td>
<td>Long term outcome following bladder neck artificial urinary sphincter implantation</td>
<td>Bugeja S., Ivaz S., Frost A., Dragova M., Andrich D.E., Mundy A.R.</td>
<td></td>
</tr>
</tbody>
</table>
The role of depression on the risk of urinary incontinence in women: A pooled analysis of RCT and cohorts
By: Chang Xu X., Tong-Zu L.
Institutes: Wuhan University Zhongnan Hospital, Dept. of Urology, Wuhan, China

High serum concentration of estradiol may be a risk factor of prostate volume
By: Ding X., Jun Q., Yu W.
Institutes: Xinhua Hospital Affiliated To Shanghai Jiaotong University School Of Medicine, Dept. of Urology, Shanghai, China

Effects of perioperative complications on favorable outcomes after primary artificial urinary sphincter implantation: Results from a European multi-centre study
Institutes: LMU-Klinikum der Universität München, Dept. of Urology, Munich, Germany, 2University Hospital Mainz, Dept. of Urology, Mainz, Germany, 3University Hospital Frankfurt, Dept. of Urology, Frankfurt, Germany, 4St. Bernward Hospital, Dept. of Urology, Hildesheim, Germany, 5University Hospital Bonn, Dept. of Urology, Bonn, Germany, 6Asklepios Hospital West Hamburg, Dept. of Urology, Hamburg, Germany, 7Helios Hospital Duisburg, Dept. of Urology, Duisburg, Germany, 8Hospital Lüneburg, Dept. of Urology, Lüneburg, Germany, 9Hospital Göttlicher Heiland, Dept. of Urology, Vienna, Austria, 10Hospital Weinviertel, Dept. of Urology, Korneuburg, Austria, 11St. Barbara Hospital, Dept. of Urology, Hagen, Germany, 12Evangelic Hospital Bielefeld, Dept. of Urology, Bielefeld, Germany, 13University Hospital Münster, Dept. of Urology, Münster, Germany, 14University Hospital Kiel, Dept. of Urology, Kiel, Germany, 15Catholic Hospital St. Johann Nepomuk, Dept. of Urology, Erfurt, Germany, 16Diakonie Hospital Stuttgart, Dept. of Urology, Stuttgart, Germany, 17University Hospital Heidelberg, Dept. of Urology, Heidelberg, Germany, 18Diakonie Hospital Schwäbisch Hall, Dept. of Urology, Schwäbisch Hall, Germany

Laparoscopic sacrocolpopexy in advanced age women: Influence of age in surgical and perioperative outcomes
Institutes: Hospital Universitario Ramón y Cajal, Dept. of Urology, Madrid, Spain

Visual prostatic symptom score provides better correlation with urinary flow studies compared with international prostatic symptom score in males from low and high sociocultural status
By: Torres-Anquiano J.R.1, Kocjancic E.2, Maldonado-Alcaraz E.3, Moreno-Palacios J.1, León-Mar R.1, López-Sámano V.A.1, Montoya-Martínez G.1, Torres-Mercado L.O.1, Serrano-Brambilla E.A.1
Institutes: Hospital De Especialidades Del Centro Médico Nacional Siglo Xxi, Dept. of Urology, Mexico City, Mexico, 2University of Illinois At Chicago, Dept. of Urology, Chicago, United States of America

Spatially resolved Raman spectroscopy using conventional cystoscopy optics: Proof-of-principle
By: Miernik A.1, Wilhelm K.1, Hein S.1, Schoenthaler M.1, Lemke N.2, Kuehn M.3, Wetterauer U.3, Roth M.3, Moralejo B.4, Schmaelzlin E.4
Institutes: Universitätsklinikum Freiburg, Dept. of Urology, Freiburg, Germany, 2Schoelly Fibreoptics GmbH, Advanced Technologies, Denzlingen, Germany, 3University of Potsdam, Institute of Physics and Astronomy, Potsdam, Germany, 4Leibniz-Institut For Astrophysics Potsdam (AIP), Multiplex Raman Spectroscopy, Potsdam, Germany

Evaluation of penile compression devices for physiological impact and user acceptability
By: Lemmens J.1, Broadbridge J.1, Macaulay M.2, Bader D.1, Fader M.1
Institutes: University of Southampton, Faculty of Health Sciences, Southampton, United Kingdom,
**Aims and objectives of this session**
The aim of the session is to provide the audience with up-to-date knowledge on onco-infertility and outcomes of surgical sperm retrieval, vasoepididymostomy and varicocelectomy. In addition, cross-sectional data on male infertility related to hypogonadism and insulin resistance will be presented.

Poster viewing of 20 minutes. Presentations will take place on stage. Standard presentations are 2 minutes in length, followed by 2 minutes for discussion.

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**Prevalence and characteristics of infertile men reporting previous cancer history**
By: Cazzaniga W.1, Capogrosso P.1, Pederzoli F.1, Ventimiglia E.1, Boeri L.2, Frego N.3, Alfano M.3, Dehò F.3, Gaboardi F.3, Mirone V.4, Montorsi F.1, Salonia A.1

**Institutes:** IRCCS San Raffaele Hospital/University Vita-Salute San Raffaele, Division of Oncology, Unit of Urology, Milan, Italy, 2IRCCS Ca Granda, Hospital Maggiore Policlinico, Dept. of Urology, Milan, Italy, 3IRCCS San Raffaele Hospital, Division of Oncology, Unit of Urology, Milan, Italy, 4University of Naples Federico II, Dept. of Urology, Naples, Italy

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**Preserving fertility in patients with testicular tumours: Result from a monocentric observational study**
By: Gadda F.1, Palmisano F.1, Paffoni A.2, Serino A.1, Ferrari S.2, Boeri L.1, Spinelli M.G.1, Serrago M.1, De Lorenzis E.1, Dell’Orto P.G.1, Montanari E.1

**Institutes:** Fondazione IRCCS Ca’ Granda Ospedale Maggiore Policlinico, Dept. of Urology, Clinical Sciences and Community, Milan, Italy, 2Fondazione IRCCS Ca’ Granda Ospedale Maggiore Policlinico, Infertility Center, Milan, Italy

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**Infertility due to non obstructive azoospermia (NOA): What’s the chance of take home baby?**
By: Conca Baenas M.A.1, Marzullo Zuchett L.1, Rogel Bertó R.1, Luján Marco S.1, Boronat Tormo F.1, Santamaría Navarro C.2, Pellicer Martínez A.3

**Institutes:** La Fe, University and Polytechnic Hospital, Dept. of Urology, Valencia, Spain, 2Polytechnic University os Valencia (UPV), Applied Mathematics Institute, Valencia, Spain, 3Valencian Institute of Infertility (IVI), Valencia, Spain

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**The combined trifocal and microsurgical testicular sperm extraction enhances retrieval rate in low-chance retrieval nonobstructive azoospermia**
By: Ishida M., Falcone M., Timpano M., Ceruti C., Sedigh O., Preto M., Sibona M., Gontero P., Frey B., Rolle L.

**Institutes:** Città Della Salute e Della Scienza, University of Turin, Dept. of Urology, Turin, Italy

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**Microdissection TESE (mTESE) outcomes following orchidopexy for intra-abdominal and inguinal testicles in adults**
By: Christodoulidou M.1, Ziada M.1, Parham A.1, Williamson E.1, Freeman A.2, Kelly J.D.1, Dawas K.1, Muneer A.1

**Institutes:** University College Hospitals London, Dept. of Urology, London, United Kingdom, 2University College Hospitals London, Dept. of Pathology, London, United Kingdom

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**Salvage mTESE after previous failed mTESE: Results and predictors for success**
The feasibility of repeat microdissection testicular sperm extraction less than 6 months for patients with non-obstructive azoospermia testes
By: Tai M-C., Huang W., Lin A., Chen K.
Institutes: Taipei Veterans General Hospital, Dept. of Urology, Taipei City, Taiwan

Men with insulin resistance are at increased risk of azoospermia: Results from a cross-sectional study
By: Cazzaniga W.1, Ventimiglia E.1, Capogrosso P.2, Pederzoli F.1, Frego N.1, Boeri L.3, Alfano M.4, Dehò F.4, Gaboardi F.4, Mirone V.5, Piemonti L.6, Montorsi F.7, Salonia A.7
Institutes: 1IRCCS San Raffaele Hospital/University Vita-Salute San Raffaele, Division of Oncology, Unit of Urology, Milan, Italy, 2IRCCS San Raffaele Hospital/University Vita-Salute San Raffaele, Division of Oncology, Unit of Urology of Urology; URI, Milan, Italy, 3IRCCS Cà Granda, Hospital Maggiore Policlinico, Dept. of Urology, Milan, Italy, 4IRCCS San Raffaele Hospital, Division of Oncology, Unit of Urology, Milan, Italy, 5University of Naples Federico II, Dept. of Urology, Naples, Italy, 6IRCCS San Raffaele Scientific Institute, Diabetes Research Institute, Milan, Italy, 7IRCCS San Raffaele Hospital/ University Vita-Salute San Raffaele, Division of Oncology, Unit of Urology, Milan, Italy

Primary, secondary, and compensated hypogonadism: A novel risk stratification for infertile men
By: Ventimiglia E.1, Capogrosso P.1, Boeri L.2, Cazzaniga W.1, Pederzoli F.1, Frego N.1, Oreggia D.1, Dehò F.3, Gaboardi F.3, Mirone V.4, Montorsi F.1, Salonia A.1
Institutes: 1IRCCS San Raffaele Hospital/University Vita-Salute San Raffaele, Division of Oncology, Unit of Urology, Milan, Italy, 2IRCCS San Raffaele Hospital, Division of Oncology, Unit of Urology, Milan, Italy, 3IRCCS Cà Granda, Hospital Maggiore Policlinico, Dept. of Urology, Milan, Italy, 4University of Naples Federico II, Dept. of Urology, Naples, Italy

Pregnancy and live birth rates of microsurgical vasoepididymostomy for azoospermic patients with epididymal obstruction in the era of intracytoplasmic sperm injection and possible factors affecting the outcomes
By: Peng J., Zhang Z., Yuan Y., Cui W., Tang Y.
Institutes: Peking University First Hospital, Andrology Center, Beijing, China

Embolization of clinical varicocele: Long term effects on semen quality, complication rates and satisfaction
By: Freire M.J.1, Sousa A.P.2, Sousa L.1, Ramalho-Santos J.3, Parada B.1, Almeida-Santos T.2, Figueiredo A.1
Institutes: 1Coimbra Hospital and University Centre, Dept. of Urology and Renal Transplantation, Coimbra, Portugal, 2Coimbra Hospital and University Centre, Dept. of Reproductive Medicine, Coimbra, Portugal, 3University of Coimbra, Centre For Neuroscience and Cell Biology, Coimbra, Portugal

Effect of antioxidant supplementation on sperm parameters in oligo-astheno-teratozoospermia, with and without varicocele: A double blind place controlled (DBPC) study
By: Busetto G.M.1, Virmani A.2, Antonini G.3, Ragonesi G.1, Del Giudice F.1, Gentile V.1, De Berardinis E.1
Institutes: 1Sapienza Rome University, Dept. of Urology, Rome, Italy, 2Sigma-Tau HealthScience, Dept. of Nutraceuticals, Utrecht, The Netherlands

Summary
To be confirmed
Benign but difficult - the surgical management of ureteric obstruction
Poster Session 34

**Location:** Room Vienna, North Hall (Level 1)

**Chairs:** O. Apolikhin, Moscow (RU)  
M. Bultitude, London (GB)  
J. Galan Llopis, Elche (ES)

**Aims and objectives of this session**
This session aims to explore a range of challenging diseases and scenarios in upper urinary tract obstruction

Poster viewing of 20 minutes. Presentations will take place on stage. Standard presentations are 2 minutes in length, followed by 2 minutes for discussion.

12:35 - 12:38

**Introduction**
C. Gratzke, Munich (DE)

462

**Endometriosis – urinary tract involvement and predictive factors for major surgery**
By: Freire M.J., Dinis P.J., Medeiros R., Sousa L., Águas F., Figueiredo A.

**Institutes:** Coimbra Hospital and Universitary Centre, Dept. of Urology and Renal Transplantation, Coimbra, Portugal, Coimbra Hospital and Universitary Centre, Dept. of Gynaecology, Coimbra, Portugal

452

**Long term outcome of ureterolysis and omental wrapping for idiopathic retroperitoneal fibrosis**

**Institutes:** Urology and Nephrology Center, Dept. of Urology, Mansoura, Egypt

453

**Surgical management for radiation induced distal ureteral obstruction**

**Institutes:** N.Lopatkin Scientific Research Institute of Urology and Interventional Radiology, Dept. of Reconstructive Urology, Moscow, Russia

454

**Laparoscopic ureteroneocystostomy for deep infiltrating ureteral endometriosis: Outcomes of 138 consecutive cases from a third level national referral centre**
By: Caleffi G., Molinari A., Ceccarello M., Scarperi S., Ballario R., Pastorello M., Ceccaroni M., Cavalleri S.

**Institutes:** Sacred Heart Hospital, Dept. of Urology, Negrar, Italy, Sacred Heart Hospital, Dept. of Obstetrics and Gynaecology, Negrar, Italy

455

**Long-term results of 116 ureteral substitutions with ileum and appendix**
By: Komyakov B., V. Guliev B.

**Institutes:** North-West State Medical University, Dept. of Urology, Saint-Petersburg, Russia

456

**Ureterolysis in the treatment of ureteric obstruction from retroperitoneal fibrosis (RPF) - treatment of first choice or last resort?**
By: Fernando A., Pattison J., Horsfield C., D'Cruz D., O'Brien T.

**Institutes:** Guy’s and St Thomas’ NHS Foundation Trust, Dept. of Urology, London, United Kingdom, Guy’s and St Thomas’ NHS Foundation Trust, Dept. of Nephrology, London, United Kingdom, Guy’s and St Thomas’ NHS Foundation Trust, Dept. of Histopathology, London, United Kingdom, Guy’s and St Thomas’ NHS Foundation Trust, Dept. of Immunology, London, United Kingdom
457

Ureter stricture rate after robot-assisted radical cystectomy with a totally intracorporeal urinary diversion

By: Hosseini A.¹, Dey L.¹, Ebbing J.², Adding C.¹, Laurin O.¹, Collins J.¹, Wiklund P.¹

Institutes: Karolinska University Hospital, Dept. of Urology, Stockholm, Sweden, University Hospital Basel, Dept. of Urology, Basel, Switzerland

458

An alternative technique for treating long mid-ureteral strictures and defects

By: Palermo S.M., Trenti E., D’Elia C., Comploj E., Ladurner C., Huqi D., Mian C., Schuster H., Pycha A.

Institutes: General Hospital of Bolzano, Dept. of Urology, Bolzano, Italy

459

Outcomes following first-line endourological management of ureteroenteric anastomotic strictures after urinary diversion: A single-center study

By: Gomez F., Thomas A., Sempels M., Nechifor V., Hubert C., Leruth J., Waltregny D.

Institutes: CHU Liège, Dept. of Urology, Liege, Belgium

460

Long-term outcome and complications after ileal ureter replacement – a contemporary high-volume single-center experience


Institutes: Technical University Dresden, Dept. of Urology, Dresden, Germany

461

Can we improve them? Experience in the management of relatively poorly functioning obstructed kidneys

By: Johnstone C.¹, Gkentzis A.², Kimuli M.², Cartledge J.², Biyani C.²

Institutes: Royal Liverpool Hospital, Dept. of Urology, Liverpool, United Kingdom, St James Hospital, Dept. of Urology, Liverpool, United Kingdom

463

Upper urinary tract decompression using ileal ureter replacement (IUR) in comparison to endouroteral thermoexpandable stent [Memokath 051]

By: Akbarov I., Al-Mahmid M., Pfister D., Zugor V., Tok A., Heidenreich A.

Institutes: University Hospital of Cologne, Dept. of Urology, Uro-Oncology and Robotic Surgery, Cologne, Germany

464

Laparoscopic versus open pyeloplasty in overweight and obese patients

By: Mohammed N.¹, Zarzour M.², Gadelmoula M.², Mühlstädt S.², Kawan F.², Schumman A.², Göllert C.², Fornara P.²

Institutes: UKH Universitätsklinikum Halle (Saale), Halle Saale, Germany, UKH Universitätsklinikum Halle (Saale), Halle Saale, Germany

465

Evaluation of urinary neutrophil gelatinase-associated lipocalin as a biomarker in pediatric and adult patients with ureteropelvic junction obstruction

By: Talibzade F., Kaya C., Sahin B., Tanidir Y., Sekerci O.A., Akbal C., Simsek F.

Institutes: Marmara University School of Medicine, Dept. of Urology, Istanbul, Turkey
**Paediatric urology 1**
Poster Session 35

**Location:** Room London, North Hall (Level 1)

**Chairs:** J.M. Nijman, Groningen (NL)  
S. Tekgül, Ankara (TR)  
D.N. Wood, London (GB)

**Aims and objectives of this session**
Paediatric Urology 1 session will update you on the latest insights and new aspects in the care for your paediatric patients.

Poster viewing of 20 minutes. Presentations will take place on stage. Standard presentations are 2 minutes in length, followed by 2 minutes for discussion.

<table>
<thead>
<tr>
<th>Poster Number</th>
<th>Title</th>
<th>Authors</th>
<th>Institutes</th>
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<tr>
<td>466</td>
<td>Early one stage Passerini-Glazel feminizing genitoplasty for congenital adrenal hyperplasia: What happens at puberty?</td>
<td>Lesma A.¹, Montorsi F.²</td>
<td>IRCCS Ospedale San Raff, Dept. of Urology, Milan, Italy, University Vita-Salute San Raffaele, I, Dept. of Urology, Milan, Italy</td>
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<tr>
<td>467</td>
<td>Renal cyst evolution in childhood: A contemporary observational study</td>
<td>Rediger C., Wayne C., Reddy D., Ksara S., Keays M., Guerra L., Leonard M.</td>
<td>Children's Hospital of Eastern Ontario, Dept. of Surgery - Division of Urology, Ottawa, Canada</td>
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<tr>
<td>468</td>
<td>Paediatric kidney transplantation: A single-centre experience of 16 years</td>
<td>Bañuelos Marco B.¹, Koch T-M.², Friedersdorf F.¹, Goranova I.¹, Lingnau A.¹</td>
<td>Charité - Universitätsmedizin Berlin, Dept. of Urology, Berlin, Germany, Charité - Universitätsmedizin Berlin, Dept. of Paediatric Nephrology, Berlin, Germany</td>
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<tr>
<td>469</td>
<td>The impact of donor age, HLA matching and panel reactivity antibodies in pediatric kidney transplant</td>
<td>Bañuelos Marco B.¹, Koch T-M.², Friedersdorf F.¹, Goranova I.¹, Lingnau A.¹</td>
<td>Charité - Universitätsmedizin Berlin, Dept. of Urology, Berlin, Germany, Charité - Universitätsmedizin Berlin, Dept. of Paediatric Nephrology, Berlin, Germany</td>
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<tr>
<td>470</td>
<td>Adult follow up of major dysfunctional voiding in children</td>
<td>Sandri S.</td>
<td>Hospital G. Fornaroli, Dept. of Urology, Magenta, Italy</td>
</tr>
<tr>
<td>471</td>
<td>Long term outcome of augmentation cystoplasty in pediatric population with refractory bladder dysfunction: 12 years follow up experience in a single center</td>
<td>Mehmood S.¹, Vallasciani S.², Alshammari A.³, Almathami A.², Alhazmi H.⁴, Altaweel W.¹</td>
<td>King Faisal Specialist Hospital and Research Center, Dept. of Urology, Riyadh, Saudi Arabia, King Faisal Specialist Hospital and Research Center, Dept. of Urology – Pediatric Urology Division, Riyadh, Saudi Arabia, King Abdulaziz Medical City King Fahad National Guard Hospital, Dept. of Surgery - Pediatric Urology Division, Riyadh, Saudi Arabia, King Khalid University Hospital, King Saud University, Dept. of Surgery - Pediatric Urology Division, Riyadh, Saudi Arabia</td>
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<tr>
<td>472</td>
<td>Evaluation of urologic problems in anorectal malformations and effect of anorectoplasty on lower urinary tract function</td>
<td></td>
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</tbody>
</table>
Pelvic osteotomy in the newborn classic bladder exstrophy closure: Complications and outcomes
By: Sullivan B.1, Friedlander D.2, Di Carlo H.2, Sponseller P.1, Gearhart J.2
Institutes: Johns Hopkins, Division of Pediatric Orthopaedics, Baltimore, United States of America, "Johns Hopkins, Jeffs Division of Pediatric Urology, Baltimore, United States of America

Bladder exstrophy: Which quality of life? About 15 cases
By: Ben Ahmed Y., Landolsi M., Chibani I., Charieg A., Nouira F., Jouini R., Jlidi S.
Institutes: Children Hospital Bachir Hamza, Dept. of Pediatric Sugery, Tunis, Tunisia

The value of urinary BDNF levels on assessment of the botulinum toxin type A treatment for neurogenic detrusor overactivity in children with myelodysplasia
By: Sekerci C.A.1, Tanidir Y.2, Top T.2, Basok B.I.3, Isman F.4, Simsek F.1, Akbal C.1, Tarcan T.1
Institutes: Marmara University School of Medicine, Dept. of Urology and Pediatric Urology, Istanbul, Turkey, "Marmara University School of Medicine, Dept. of Urology, Istanbul, Turkey, "Tepecik Training and Research Hospital, Dept. of Biochemistry, Izmir, Turkey, "Medeniyet University School of Medicine, Dept. of Biochemistry, Istanbul, Turkey

SNM in children: The best response in congenital and acquired neurogenic bladder
Institutes: Paediatric Hospital Bambino Gesù, Dept. of Robotic Surgery and Urodynamic Unit of Robotic Surgery and Urodynamic Unit, Rome, Italy, "AMC University Hospital, Dept. of Urology and Department of Biomedical Engineering and Physics, Amsterdam, The Netherlands, "Paediatric Hospital Bambino Gesù, Dept. of Robotic Surgery and Urodynamic Unit of Robotic Surgery and Urodynamic Unit, Rome, Italy

Histological features of the testicular nubbin in the vanishing testis: Is surgical exploration necessary?
Institutes: Keimyung University Scholl of Medicine, Dept. of Urology, Daegu, South Korea

Variation of dysgenetic gonads and tumor risk in patients with 45,X/46,XY mosaicism
By: Matsumoto F., Okusa T., Matsuyama S., Matsui F., Yazawa K.
Institutes: Osaka Medical Center & Research Institut, Dept. of Urology, Osaka, Japan

Current preferences in primary hypospadias repair: Results of a web-based survey from the Pediatric Section from the European Association of Urology (EAU) Young Academic Urologists (YAU)
By: Spinoit A-F.1, Silay M.S.2, Radford A.3, Hoebeke P.1, Haid B.4
Institutes: "Universitair ziekenhuis Gent, Dept. of Urology, Ghent, Belgium, "Medeniyet Göztepe Eïitim University, Dept. of Urology, Istanbul, Turkey, "Leeds Children’s Hospital, NHS, Dept. of Pediatric Urology, Leeds, United Kingdom, "Sisters of The Charity Clinic, Dept. of Pediatric Urology, Linz, Austria
**Aims and objectives of this session**

Use of validated prostate cancer biomarkers is important for selection of patients who risk developing aggressive disease and also for monitoring castration therapy resistance. Novel approaches to analyze markers in multifocal prostate cancer will be presented.

Poster viewing of 20 minutes. Presentations will take place on stage. Standard presentations are 2 minutes in length, followed by 2 minutes for discussion. Extended presentations (+) are 3 minutes in length, followed by 3 minutes for discussion.

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**Germline mutations in ATM and BRCA1/2 distinguish risk for lethal and indolent prostate cancer and are associated with early age at death**

*By: Na R.¹, Zheng S.L.², Han M.³, Yu H.², Jiang D.², Shah S.², Ewing C.³, Zhang L.³, Novakovic K.⁴, Petkewicz J.², Gulukota K.⁶, Helseth D.³, Quinn M.², Humphries E.³, Wiley K.³, Isaacs S.⁺, Wu Y.¹, Liu X.², Zhang N.¹, Wang C-H.², Khadekar J.², Hulick P.², Cheviron D.⁶, Cooney K.⁷, Shen Z.³, Partin A.³, Carter H.B.³, Carducci M.⁶, Eisenberger M.⁶, Denmeade S.⁶, McGuire M.⁴, Walsh P.³, Helfand B.⁴, Brendler C.⁴, Ding Q.¹, Xu J.², Isaacs W.³*

**Institutes:** ¹Huashan Hospital, Fudan University, Dept. of Urology, Shanghai, China, ²NorthShore University HealthSystem, Program for Personalized Cancer Care, Evanston, United States of America, ³Johns Hopkins University School of Medicine, Dept. of Urology and The James Buchanan Brady Urologic Institute, Baltimore, United States of America, ⁴NorthShore University HealthSystem, Dept. of Surgery, Evanston, United States of America, ⁵NorthShore University HealthSystem, Center for Molecular Medicine, Evanston, United States of America, ⁶NorthShore University HealthSystem, Dept. of Medicine, Evanston, United States of America, ⁷University of Utah, Dept. of Internal Medicine, Salt Lake City, United States of America, ⁸Johns Hopkins Medical Institutions, Sidney Kimmel Comprehensive Cancer Center, Baltimore, United States of America

---

**Comprehensive molecular dissection of multi-focal prostate cancer and concomitant lymph node metastasis: Implications for tissue based prognostic biomarkers**

*By: Salami S.¹, Hovelson D.², Mathieu R.³, Kaplan J.², Susani M.³, Rioux-Leclercq N.⁵, Shariat S.³, Tomlins S.², Palapattu G.¹*

**Institutes:** ¹University of Michigan, Dept. of Urology, Ann Arbor, United States of America, ²University of Michigan, Dept. of Pathology, Ann Arbor, United States of America, ³Medical University Vienna, Dept. of Urology, Vienna, Austria, ⁴Medical University Vienna, Dept. of Pathology, Vienna, Austria, ⁵Rennes University Hospital, Dept. of Pathology, Rennes, France

---

**A genomic analysis of metastases-prone localized prostate cancer in a European high-risk population**

*By: Van Den Broeck T.¹, Gevaert T.¹, Prekovic S.², Ong K.³, Tosco L.¹, Moris L.², Smeets E.², Lehrer J.³, Haddad Z.³, Helsen C.², Margrave J.³, Van Poppel H.¹, Everaerts W.¹, Erho N.³, Buerki C.³, Davicieni E.³, Joniau S.¹, Claessens F.²*

**Institutes:** ¹UZ Leuven, Dept. of Urology, Leuven, Belgium, ²KU Leuven, Laboratory of Molecular Endocrinology, Leuven, Belgium, ³GenomeDx, GenomeDx Biosciences, Vancouver, Canada

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**Analysing circulating tumour cells with epithelial and mesenchymal features for prostate cancer prognosis**

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**Scientific Programme**
Decipher test impacts decision-making among patients considering adjuvant and salvage treatment following radical prostatectomy: Interim results from the multicenter prospective PRO-IMPACT study


Institutes: University of Washington, Seattle Cancer Care Alliance, Seattle, United States of America, 2GenomeDX Biosciences, Clinical Development, Vancouver, Canada, 3GenomeDX Biosciences, Dept. of Biostatistics, Vancouver, Canada, 4Emmes Canada, Dept. of Biostatistics, Burnaby, Canada, 5The Urology Center of Colorado, Dept. of Urology, Colorado, United States of America, 6Spectrum Health Medical Group, Dept. of Urology, Grand Rapids, United States of America, 7Virginia Urology, Dept. of Urology, Richmond, United States of America, 8Fox Chase Cancer Center, Surgical Oncology, Philadelphia, United States of America, 9Lakeland Regional Cancer Center, Dept. of Urology, Lakeland, United States of America, 10Nova Southeastern University, Urological Research Network, Miami, United States of America, 11Delaware Valley Urology, LLC, Dept. of Urology, Voorhees, United States of America, 12Alaska Clinical Research Center, Dept. of Urology, Anchorage, United States of America, 13Brigham and Womens Hospital, Dept. of Urology, Boston, United States of America, 14Cedars-Sinai Medical Center, Dept. of Urology, Los Angeles, United States of America, 15University of Utah, Huntsman Cancer Institute, Salt Lake City, United States of America, 16University of Miami, Miller School of Medicine, Miami, United States of America, 17University of Colorado, Anschutz Medical Campus, Aurora, United States of America, 18University of Vermont Medical Center, Dept. of Urology, Burlington, United States of America, 19Lancaster Urology, Dept. of Urology, Lancaster, United States of America, 20Thomas Jefferson University, Sidney Kimmel Medical College, Philadelphia, United States of America, 21Carolina Urology Partners, Dept. of Urology, Gastonia, United States of America, 22GenomeDX Biosciences, Bioinformatics, San Diego, United States of America, 23UT Southwester Medical Center, Dept. of Urology, Dallas, United States of America

The occurrence and therapeutic consequences of androgen receptor copy number gain in prostate cancer patients using Droplet Digital PCR

By: Buelsens S.1, Claeyts T.1, Kumps C.1, Dhondt B.1, Poelaert F.1, Nurten Y.2, Vynck M.3, Thas O.3, Ost P.4, Vandesompele J.2, Lumen N.1

Institutes: Ghent University Hospital, Dept. of Urology, Ghent, Belgium, 2Ghent University, Dept. of Pediatrics and Medical Genetics, Ghent, Belgium, 3Ghent University, Dept. of Mathematical Modelling, Statistics and Bio-Informatics, Ghent, Belgium, 4Ghent University Hospital, Dept. of Radiation Oncology, Ghent, Belgium

Identification of a CTC-based prognostic signature in mCRPC driven by Aurora Kinase A and Wnt signaling

By: Morgan T.1, Singhal U.1, Wang Y.1, Henderson J.1, Niknafs Y.2, Qiao Y.2, Taichman R.3, Zaslavsky A.1, Feng F.4, Palapattu G.1, Chinnaiyan A.2, Tomlins S.2

Institutes: University of Michigan, Dept. of Urology, Ann Arbor, United States of America, 2University of Michigan, Dept. of Pathology, Ann Arbor, United States of America, 3University Of Michigan, School of Dentistry, Ann Arbor, United States of America, 4University of California San Francisco, Dept. of Radiation Oncology, San Francisco, United States of America

Delineation of human prostate cancer evolution identifies chromothripsis as a polyclonal event selecting for FKBP4 driven castration resistance
Cell free DNA methylation markers as predictors of treatment response and prognosis for castration-resistant prostate cancer

By: Hendriks R.\textsuperscript{1}, Dijkstra S.\textsuperscript{1}, Smit F.\textsuperscript{2}, Vandersmissen J.\textsuperscript{2}, Van De Voorde H.\textsuperscript{2}, Mulders P.\textsuperscript{1}, Van Oort I.\textsuperscript{1}, Van Criekinge W.\textsuperscript{3}, Schalken J.\textsuperscript{1}

Institutes: Radboudumc, Dept. of Urology, Nijmegen, The Netherlands, \textsuperscript{2}MDxHealth, Dept. of Research and Development, Irvine, United States of America, \textsuperscript{3}Ghent University, Dept. of Statistics and Bio-Informatics, Ghent, Belgium

Expression of neuropilin 2 as predictor for tumour-related death in patients with prostate cancer

By: Borkowetz A.\textsuperscript{1}, Toma M.\textsuperscript{2}, Füssel S.\textsuperscript{1}, Erdmann K.\textsuperscript{1}, Hoenscheid P.\textsuperscript{2}, Froehner M.\textsuperscript{1}, Muders M.\textsuperscript{2}, Wirth M.\textsuperscript{1}

Institutes: TU Dresden, Dept. of Urology, Dresden, Germany, \textsuperscript{2}TU Dresden, Dept. of Pathology, Dresden, Germany

Calcium signaling remodeling as a predictive factor of systemic recurrence after radical prostatectomy

By: Perrouin Verbe M.A.\textsuperscript{1}, Talagas M.\textsuperscript{2}, Garlantezec R.\textsuperscript{3}, Schoentgen N.\textsuperscript{4}, Uguen A.\textsuperscript{2}, Doucet L.\textsuperscript{2}, Rosec S.\textsuperscript{5}, Nicot M.C.\textsuperscript{2}, Gobin E.\textsuperscript{2}, Marcorelles P.\textsuperscript{2}, Fournier G.\textsuperscript{4}, Valeri A.\textsuperscript{4}, Mignen O.\textsuperscript{6}

Institutes: Pitié Salpêtrière Academic Hospital, Dept. of Urology, Paris, France, \textsuperscript{2}Brest University Hospital, Dept. of Pathology, Brest, France, \textsuperscript{3}University Rennes 1, INSERM U1085-IRSET, Rennes, France, \textsuperscript{4}Brest University Hospital, Dept. of Urology, Brest, France, \textsuperscript{5}Brest University Hospital, INSERM U 1412, Centre D'Investigation Clinique, Brest, France, \textsuperscript{6}University of Brest, INSERM U 1078, Brest, France

Circulating tumor cells in prostate cancer

H.G. Lilja, New York (US)
Prostate cancer: Impact of MRI on biopsies

**Poster Session 37**

**Sunday, 26 March**

**Location:** Room Munich, North Hall (Level 1)

**Chairs:** C. Arsov, Düsseldorf (DE)  
O. Rouviere, Lyon, Cedex (FR)  
J. Walz, Marseille (FR)

**Aims and objectives of this session**

This session will highlight the optimal use of MRI for the stratification of men undergoing prostate biopsies.

Poster viewing of 20 minutes. Presentations will take place on stage. Standard presentations are 2 minutes in length, followed by 2 minutes for discussion. Extended presentations (*) are 3 minutes in length, followed by 3 minutes for discussion.

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*493*

**Clinical outcome following a low-suspicious multiparametric prostate MRI or benign MRI-targeted biopsies for prostate cancer detection: A 3-year follow-up study of men with prior negative transrectal ultrasound guided biopsies**

By: Boesen L.¹, Nørgaard N.¹, Legager V.², Thomsen H.²

**Institutes:** ¹Herlev University Hospital, Dept. of Urology, Herlev, Denmark, ²Herlev University Hospital, Dept. of Radiology, Herlev, Denmark

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494

**Multi-parametric magnetic resonance imaging combined with prostate-specific antigen velocity can predict the probability of prostate cancer in patients after initial negative biopsy**

By: Song G., Huang C., Ji G., Zhou L.

**Institutes:** Peking University First Hospital, Dept. of Urology, Beijing, China

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495

**Evaluation of negative predictive value of multiparametric MRI for prostate cancer: Retrospective analysis after 5 years of clinical experience**

By: Barchetti G.¹, Del Monte M.¹, Salvo V.¹, Grompone M.¹, Sciarra A.², Panebianco V.¹

**Institutes:** ¹Sapienza University of Rome, Dept. of Radiology, Rome, Italy, ²Sapienza University of Rome, Dept. of Urology, Rome, Italy

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496

**PSA-density based patient selection for MRI-targeted prostate biopsy could reduce unnecessary biopsy procedures in men on active surveillance for low-grade prostate cancer**

By: Alberts A.¹, Roobol M.¹, Drost F.-J.², Van Leenders G.³, Bokhorst L.¹, Bangma C.¹, Schoots I.²

**Institutes:** ¹Erasmus MC, Dept. of Urology, Rotterdam, The Netherlands, ²Erasmus MC, Dept. of Radiology, Rotterdam, The Netherlands, ³Erasmus MC, Dept. of Pathology, Rotterdam, The Netherlands

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*497*

**Improving accuracy of prostate cancer risk prediction in prostate biopsy naive patients with suspicious PSA and/or digital rectal examination through implementation of multiparametric MRI obtained parameters**

By: Musch M.¹, Roggenbuck U.², Malik-Patsalis A.B.³, Lehmann N.², Ebel T.⁴, Koch J.-A.³, Krege S.¹, Kroepfl D.¹

**Institutes:** ¹Kliniken Essen-Mitte, Dept. of Urology, Paediatric Urology and Urologic Oncology, Essen, Germany, ²University of Duisburg-Essen, Institute For Medical Informatics, Biometry and Epidemiology, Essen, Germany, ³Kliniken Essen-Mitte, Dept. of Diagnostic and Interventional Radiology, Essen, Germany, ⁴Zentrum Für Pathologie Essen-Mitte, Centre For Pathology, Essen, Germany

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498

**Combined clinical parameters and multiparametric MRI for advanced risk modeling of prostate...**
cancer - patient-tailored risk stratification can reduce unnecessary biopsies


Institutes: University Hospital Heidelberg, Dept. of Urology, Heidelberg, Germany, German Cancer Research Center, Dept. of Radiology, Heidelberg, Germany, University Hospital Düsseldorf, Dept. of Interventional and Diagnostic Radiology, Düsseldorf, Germany, Paracelsus University Nürnberg, Dept. of Urology, Nürnberg, Germany, University Medicine Mainz, Dept. of Pathology, Mainz, Germany, University of Heidelberg, Dept. of Pathology, Heidelberg, Germany

Added value of pre-biopsy prostate multiparametric MRI in biopsy-naive patients: Preliminary results of the MRI-FIRST trial


A randomized controlled trial to assess and compare the outcomes of AI-US-CT guided biopsy, transrectal ultrasound guided 12-core systematic biopsy, and mpMRI assisted 12-core systematic biopsy


Institutes: 1st Affiliated Hospital, College of Medicine, Zhejiang University, Dept. of Urology, Hangzhou, China

Value of magnetic resonance imaging in population-based prostate cancer screening: Comparison of 3 biopsy strategies in the 5th screening round of the ERSPC Rotterdam

By: Alberts A., Schoots I., Droste F-J., Bokhorst L., Van Leenders G., Dwarkasing R., Barentsz J., Schröder F., Bangma C., Roobol M.

Institutes: Erasmus MC, Dept. of Urology, Rotterdam, The Netherlands, Erasmus MC, Dept. of Radiology, Rotterdam, The Netherlands, Erasmus MC, Dept. of Pathology, Rotterdam, The Netherlands, Radboud MC, Dept. of Radiology, Nijmegen, The Netherlands
502
A prospective randomized study comparing standard prostate biopsy and a new diagnostic path with MRI and fusion biopsy: Results after two years
Institutes: San Luigi Hospital, Dept. of Urology, Turin, Italy

503
Focal therapy with HIFU FocalOne device with MRI target fusion biopsy by KOELIS
By: Potiron E., Nevoux P., Rousseau T., Le Goguic G., Lacoste J.
Institutes: Clinique Urologique Nantes Atlantis, Nantes, France

504
Transcriptome wide analysis of MRI-targeted biopsy and matching surgical specimens from high-risk prostate cancer patients treated with radical prostatectomy
By: Hadaschik B.¹, Takha M.², Radtke J.P.¹, Bonekamp D.³, Du Plessis M.², Buerki C.², Erho N.², Ong K.², Davicioni E.²
Institutes: ¹University of Heidelberg, Medical Faculty Heidelberg, Dept. of Urology, Heidelberg, Germany, ²GenomeDx Biosciences Inc., Research and Development, Vancouver, Canada, ³German Cancer Research Center, Dept. of Radiology, Heidelberg, Germany

505
Prostate MRI for predicting capsular invasion prior to robot-assisted radical prostatectomy. Lesson learned after 400 cases
Institutes: San Luigi Hospital, Dept. of Urology, Turin, Italy

506
Concordance between biopsy and radical prostatectomy Gleason score: Evaluation of determinants in a large-scale study of patients undergoing RALP in Belgium
By: Soenens C.¹, Ameye F.¹, De Kuyper P.¹, De Coster G.², Van Damme N.², Vandervorst L.², Quackels T.³, Roumequère T.³, Joniau S.⁴, Van Cleynenbreugel B.⁴
Institutes: ¹Az Maria Middelares, Dept. of Urology, Ghent, Belgium, ²Belgian Cancer Registry, Belgian Cancer Registry, Brussels, Belgium, ³Erasmus Hospital, Dept. of Urology, Brussels, Belgium, ⁴Uiversity Hospital of Leuven, Dept. of Urology, Leuven, Belgium

507
Does the inclusion of non-index lesions at biopsy improve our ability to predict adverse pathologic outcomes at radical prostatectomy? Implications for targeted plus systematic biopsy schemes
By: Gandaglia G.¹, Bandini M.¹, Dell’Oglio P.¹, Fossati N.¹, Pellegrino F.¹, Fallara G.¹, Zaffuto E.¹, Bravi C.A.¹, Nocera L.¹, Damiano R.², Freschi M.³, Montironi R.⁴, Montorsi F.⁴, Briganti A.¹
Institutes: ¹Vita-Salute University San Raffaele, Dept. of Urology, Milan, Italy, ²Magna Graecia University, Dept. of Urology, Catanzano, Italy, ³Vita–Salute University San Raffaele, Dept. of Pathology, Milan, Italy, ⁴Polytechnic University of The Marche Region, Section of Pathological Anatomy, Ancona, Italy
**History of urology**

**Poster Session 38**

**Location:** Room 7, Capital suite (level 3)

**Chairs:**
- D. Schultheiss, Giessen (DE)
- P.M. Thompson, London (GB)
- P.E. Van Kerrebroeck, Maastricht (NL)

**Aims and objectives of this session**

This session presents several different topics from the long history of urology. Poster viewing of 20 minutes. Presentations will take place on stage. Standard presentations are 2 minutes in length, followed by 2 minutes for discussion.

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<th>Poster Number</th>
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<th>Institutes</th>
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<td>507</td>
<td>Bilbao's Republican urologists: Persecuted by Franco's regime after the Spanish Civil War</td>
<td>Angulo J.1, Guimon J.2, Gondra J.3, Pérez-Yarza G.4, Ercoreka A.3</td>
<td>Hospital Universitario de Getafe, Dept. of Urology, Getafe, Spain, Universidad Del Pais Vasco, Dept. of Psychiatry, Bilbao, Spain, Universidad Del Pais Vasco, Museum of History of Medicine, Bilbao, Spain, Universidad Del Pais Vasco, Dept. of Physiology, Bilbao, Spain</td>
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<tr>
<td>508</td>
<td>Correspondence of Dr Joaquin Albarran and Spanish Prime Minister Antonio Maura (1907-1908): An inside into the renal stone disease of Maura's wife Constancia Gamazo, and into Spanish and European Urology of the time</td>
<td>Fariña-Pérez L.A.1, Fernández-Arias M.2</td>
<td>Hospital Povisa, Dept. of Urology, Vigo, Spain, History Office, University of Medical Sciences and Cuban Society of History of Medicine, Havana, Cuba</td>
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<tr>
<td>509</td>
<td>Joaquin Albarrán (1860-1912) – his impact for the national cultures of remembrance within urology</td>
<td>Halling T.2, Moll F.1, Hansson N.2, Krischel M.2, Fangerau H.2</td>
<td>Cologne Medical Center, Dept. of Urology, Cologne, Germany, Heinrich Heine University Düsseldorf, Institute for The History, Theory and Ethics of Medicine, Düsseldorf, Germany</td>
</tr>
<tr>
<td>510</td>
<td>Reynaldo dos Santos (1880-1970), a great master of urology, abdominal imaging and history of art, made links between Portuguese and Spanish urology in the first half of the 20th century</td>
<td>Fariña-Pérez L.A.1, Cunha T.2</td>
<td>Hospital Povisa, Dept. of Urology, Vigo, Spain, House-Museum Reynaldo dos Santos, Parede-Cascais, Portugal</td>
</tr>
<tr>
<td>511</td>
<td>Lithotomia Douglassiana; the book, the operation and the fight</td>
<td>Goddard J.1</td>
<td>University Hospitals of Leicester NHS Trust, Dept. of Urology, Leicester, United Kingdom</td>
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<tr>
<td>512</td>
<td>Carl Posner (1854-1928): Pioneer of urology and sexology</td>
<td>Krischel M.2, Moll F.1, Fangerau H.1</td>
<td>Heinrich Heine University Düsseldorf, Dept. of The History, Philosophy, and Ethics of Medicine, Düsseldorf, Germany</td>
</tr>
<tr>
<td>513</td>
<td>Recent discovery of phallic depictions in prehistoric cave art in Asia minor</td>
<td>Verit A.1</td>
<td>FSM Hospital, Urology, Istanbul, Turkey</td>
</tr>
</tbody>
</table>
Phallic representations in pre-Columbian Central and South America
By: Angulo J.¹, Figueroa C.²
Institutes:¹Hospital Universitario de Getafe, Dept. of Urology, Getafe, Spain, ²Urologia Integral, Dept. of Urology, Ciudad De Guatemala, Guatemala

Penile phimosis as cause of male infertility: The case of Louis XVI
By: Stamatiou K.³, Bitsakos G.¹
Institutes: University of Athens, Dept. of History, Athens, Greece, ³Tzaneio Hospital, Dept. of Urology, Piraeus, Greece

A tribute to the life and accomplishments of a true Yorkshireman: Leslie Norman Pyrah
By: Khan F., Kimuli M., Biyani C.S., Cartledge J.
Institutes: St James University Hospital, Dept. of Urology, Leeds, United Kingdom

Constantine Dimopoulos: The renovator of Greek urology
By: Poulakou-Rebelakou E.¹, Tsiamis C.², Karamanou M.¹, Rempelakos A.³, Chrisofos M.⁴
Institutes: Athens University, Medical School, Dept. History of Medicine, Athens, Greece, ²Athens University, Medical School, Dept. Microbiology, Athens, Greece, ³Bioclinic of Athens, Athens, Greece, ⁴Athens University, Medical School, Dept. of Urology, Athens, Greece

Godfather of modern renal surgery; a Novick
By: Sogaolu O., Calleary J.
Institutes: Pennine Acute Trust, Dept. of Urology, Manchester, United Kingdom
Best Posters from the Regional Meetings

**Location:** Room 9, Capital suite (level 3)

**Chairs:**
- B. Djavan, Vienna (AT)
- J. Rassweiler, Heilbronn (DE)

**Aims and objectives of this session**
This poster session includes the top poster which have been presented during the three different Regional Meetings 2016. Based on this, the delegates will be able to learn on a single spot all about interesting new scientific developments in Baltic, Central and South-eastern Europe. We are aiming to discuss each poster intensively counting on the active participation of the audience.

12:15 - 12:19
**RM01:** Validation of risk nomogram to predict lymph node invasion in prostate cancer patients undergoing lymph node dissection
D. Milonas, Kaunas (LT)

12:19 - 12:23
**RM02:** Diagnostic thresholds for detecting inflammation in prostate-specific material – method standardization and proposed optimal cut-off points
P. Korrovits, Tallinn (EE)

12:23 - 12:27
**RM03:** Long-term functional outcomes of nephron sparing surgery for renal masses in the solitary kidney
L. Suslov, Minsk (BY)

12:27 - 12:31
**RM04:** Transition of NMIBC grading system from 1973 to 2004 WHO classification in Tartu 2010-2013
R. Ots, Tartu (EE)

12:31 - 12:35
**RM05:** Complications and its treatment after midurethral sling implantation using retropubic and transobturator route for the treatment of female stress urinary incontinence
M. Barisiene, Vilnius (LT)

12:35 - 12:39
**RM06:** Are small renal masses always harmless and large ones threatening?
M. Jakubovskis, Riga (LV)

12:39 - 12:43
**RM07:** Resurfacing and reconstruction of the glans penis after partial penile amputation - initial experience and cosmetic results
O. Ivanovski, Skopje (MK)

12:43 - 12:47
**RM08:** Complications of en-block resection of bladder tumors with bipolar hook cutting electrode
S. Hawlina, Ljubljana (SI)

12:47 - 12:51
**RM09:** Detrusor After-Contraction (DAC): Urodynamic and clinical characteristics and associations
K.V. Mytilekas, Thessaloniki (GR)

12:51 - 12:55
**RM10:** Does a standardized algorithm for managing patients post-robotic-assisted radical prostatectomy improve recovery? Experience with the Optimized Surgical Journey
S. Yaiesh
RM11: Histopathologic and molecular comparative analyses of intravesical aurora kinase A inhibitor with bacillus Calmette-Guerin in precursor lesions of non-muscle invasive bladder cancer in vivo model: Preliminary results
A.K. Uslubas, Kocaeli (TR)

RM12: Robotic (Avicenna) flexible ureteroscopy in renal stones
B. Geavlete, Bucharest (RO)

RM13: Are we ready for the watchful waiting and focal therapy in treatment of prostate cancer? Analysis of histological material after radical prostatectomy
F. Kowalski, Bydgoszcz (PL)

RM14: Risk of malignancy in complex cystic renal masses (Bosniak category III-IV)
C. Mirvald, Bucuresti (RO)

RM15: Genomic aspects regarding prostate cancer aggressiveness
B. Cheorpeaca, Bucharest (RO)

RM16: Cell surface phenotype of the bladder tumors using ultrasensitive flow cytometry – a feasibility study
K. Otavová, Prague (CZ)

RM17: Laparoscopic repair of ileal conduit parastomal hernia using the modified Sugarbaker technique (video)
D. Garcia Rojo, Barcelona (ES)
E-BLUS Exam

Location: Room South America, Exhibition Hall (Level 1)

Aims and objectives of this session
The European training in basic laparoscopic urological skills (E-BLUS) is a programme offered to residents and urologists who want to improve the basic skills in laparoscopy. It is a unique opportunity to train with international experts in laparoscopy. The E-BLUS programme includes:

- Hands-on Training (HOT) courses of different levels carried out under the guidance of experienced tutors
- A set of training-box exercises developed and validated by the Dutch project Training in Urology (TiU) to train basic skills needed in urological laparoscopy
- E-BLUS examination and certification
- An online theoretical course

K. Ahmed, London (GB)
T. Kalogeropoulos, Athens (GR)
S. Barmoshe, Brussels (BE)
G. Pini, Milano (IT)
T. Tokas, Hall In Tirol (AT)
D. Veneziano, Reggio Calabria (RC) (IT)
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<tr>
<th>Location:</th>
<th>Social Media Helpdesk, Boulevard (level 1)</th>
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<td>Chair:</td>
<td>J. Gómez Rivas, Madrid (ES)</td>
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**Personalised social media workshop for beginners**

**WS08**

**Sunday, 26 March**

**12:30 - 13:00**
ESU/ERUS Hands-on Training Course in Robotic surgery - intro

**HOT27**

**Location:** Room Asia, Exhibition Hall (Level 1)

**Chair:** D. Moon, Edgecliff (AU)

**Sunday, 26 March**
**13:30 - 15:00**

Aims and objectives of this session
The European School of Urology (ESU) and the EAU Robotic Urology Section (ERUS) offer an intensive Hands-on Training course. We will provide training using simulators. The main aims of this 90 minutes course are:
- improving the participants’ control-skills and hand-eye-coordination, as well as an objective benchmarking of console performance
- and an introduction into standardized surgical steps in robot-assisted procedures.

Aims and objectives
- Improve your robotic surgery skills in the following areas:
  - Endowrist manipulation
  - Camera Control
  - 3rd Arm Control
  - Needle Placement and Driving
  - Suturing and Knot Tying

H. Zecha, Stuttgart (DE)
Aims and objectives of this session
This session aims to view the latest on surgical management of complex stone by RIRS and PCNL with particular attention to the indications, the percutaneous access technique and the techniques of lithotripsy. New technologies are important to develop without forgetting the main aims: safety and efficacy of the procedures.

All presentations have a maximum length of 8 minutes, followed by 4 minutes of discussion.

V50
Asyncronous bilateral PCNL in horseshoe kidney with high stone burden: Review of demanding aspects
By: Agudelo J.A., Arias E., Chirinos J., Ktech N., Urdaneta L., Riveros M., Bustamante J.
Institutes: Hospital Coromoto De Maracaibo, Dept. of Urology, Maracaibo, Venezuela, Hospital Universitario De Maracaibo, Dept. of Urology, Maracaibo, Venezuela

V51
Dusting utilizing suction technique (DUST) for percutaneous nephrolithotomy: Use of a dedicated laser handpiece to treat a staghorn stone
By: Ghani K.R., Roberts W.W.
Institutes: University of Michigan, Dept. of Urology, Ann Arbor, United States of America

V52
PCNL at home
Institutes: Complejo Hospitalario Universitario De Vigo, Dept. of Urology, Vigo, Spain, Complejo Hospitalario Universitario De Vigo, Dept. of Ophthalmology, Vigo, Spain

V53
Use of metallic double J stent in a child with retroperitoneal fibrosis: Initial case report
By: Patruno G., Collura G., Mele E., Innocenzi M., Capozza N., Gerocarni Nappo S.
Institutes: Policlinico Tor Vergata Roma, Dept. of Urology, Rome, Italy, ‘Bambino Gesu’ Children’s Hospital, IRCCS, Dept. of Urology, Rome, Italy

V54
Intraoperative stone free status using Dyna CT Artis Zeego in complex retrograde intrarenal surgeries
Institutes: Clinica las Condes S.A., Dept. of Urology, Santiago, Chile

V55
Hydroxyadenine urolithiasis presenting as anuria in 9 month old female: Diagnostic and therapeutic dilemma
By: Malpani A., Ganpule A., Sabnis R., Desai M.
Institutes: Muljibhai Patel Urological Hospital, Dept. of Urology, Nadiad, India

V56
New experience with robotic flexible ureteroscopy in renal stones (report of 200 cases)
By: Geavlete P.A., Saglam R., Georgescu D., Multescu R., Miriciulescu V., Kabakci A.S.
Geavlete B.¹
Institutes: ¹Sanador Hospital, Dept. of Urology, Bucharest, Romania, ²Medicana International Hospital, Dept. of Urology, Ankara, Turkey, ³Saint John Clinical Hospital, Dept. of Urology, Bucharest, Romania, ⁴Hacettepe University, Dept. of Bioengineering, Ankara, Turkey

V57

Hybrid technique to determine the site of skin puncture, angle and depth of puncture in fluoroscopically guided percutaneous renal puncture in prone position
By: Sharma G.¹, Sharma A.²
Institutes: ¹Chitale Clinic Pvt. Ltd., Dept. of Urology, Solapur, India, ²Chitale Clinic Pvt. Ltd., Dept. of Radiology, Solapur, India
## Robotic surgery in urology

**Special Session - Live surgery**

**Sunday, 26 March**

**14:00 - 17:00**

**Location:** Room Copenhagen, North Hall (Level 1)

**Moderators:**
- P. Dasgupta, London (GB)
- J-U. Stolzenburg, Leipzig (DE)
- N.P. Wiklund, Stockholm (SE)

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<th>Time</th>
<th>Event</th>
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| 14:00 - 15:30 | Live 3DHD da Vinci Si © with Firefly™ Fluorescence Imaging Partial Nephrectomy  
B.J. Challacombe, London (GB) |
| 15:30 - 17:00 | Live 3DHD da Vinci Xi © Nephro ureterectomy and Integrated Table Motion  
A. Mottrie, Aalst (BE) |
Experimental approaches in personalised medicine in urothelium tumours

Poster Session 39

Sunday, 26 March
14:00 - 15:30

Location: Room Madrid, North Hall (Level 1)

Chairs: F. Deho, Milan (IT)
M. Knowles, Leeds (GB)
M. Sanchez-Carbayo, Vitoria-Gasteiz (ES)

Aims and objectives of this session
The course of bladder cancer could be affected by many factors. In order to predict the course of the disease, it is important to analyze multiple parameters. Studies presented in this session will focus also on exosomes and miRNA.

Poster viewing of 20 minutes. Presentations will take place on stage. Standard presentations are 2 minutes in length, followed by 2 minutes for discussion. Extended presentations (+) are 3 minutes in length, followed by 3 minutes for discussion.

*519 Tumor-associated exosomes of urothelial bladder cancer cells affect tumor-promoting processes in normal bladder fibroblasts and support tumorigenesis
By: Baumgart S.1, Heinzelmann J.1, Krause E.2, Stöckle M.1, Stampe Ostenfeld M.3, Junker K.1
Institutes: 1Saarland University Medical Center, Dept. of Urology, Homburg, Germany, 2Saarland University Medical Center, Dept. of Physiology, Homburg, Germany, 3University Hospital Aarhus, Dept. of Molecular Medicine, Aarhus, Denmark

520 Cancer-associated fibroblasts secreted exosomal miR-146a promotes bladder cancer progression
By: Zhuang J.1, Shen L.2, Yan J.2, Guo H.1
Institutes: 1Nanjing University Medical School Affiliated Nanjing Drum Tower Hospital, Dept. of Urology, Nanjing, China, 2MOE Key Laboratory of Model Animals For Disease Study, Model Animal Research Center, Dept. of Tumor Biology, Nanjing, China

521 Genomic landscape of upper urinary tract urothelial carcinoma
By: Fujii Y.1, Sato Y.1, Suzuki H.2, Shiozawa Y.2, Yoshizato T.2, Yoshida K.2, Shiraishi Y.2, Nakagawa T.1, Kume H.1, Nishimatsu H.1, Okane T.5, Sanada M.6, Makishima H.2, Miyano S.3, Ogawa S.2, Homma Y.1
Institutes: 1The University Of Tokyo Hospital, Dept. of Urology, Bunkyo, Japan, 2Graduate School of Medicine Kyoto University, Dept. of Pathology and Tumor Biology, Kyoto, Japan, 3Institute of Medical Science The University of Tokyo, Laboratory of DNA Information Analysis, Human Genome Center, Minato, Japan, 4The Fraternity Memorial Hospital, Dept. of Urology, Sumida, Japan, 5Toranomon Hospital, Dept. of Urology, Minato, Japan, 6Nagoya Medical Center, Advanced Diagnosis, Clinical Reserach Center, Nagoya, Japan

*522 Molecular subtype classification of advanced bladder cancer and matched lymph-node metastases by integrative immunohistochemistry, gene expression, and mutation analyses
By: Sjödahl G.1, Eriksson P.2, Lövgren K.2, Liedberg F.1, Höglund M.2
Institutes: 1Translational Medicine, Dept. of Urologic Research, Lund, Sweden, 2Clinical Sciences, Dept. of Oncology and Pathology, Lund, Sweden

523 Withdrawn
By: 
Institutes: 

524 Urine based DNA methylation biomarkers for monitoring bladder cancer
By: Van Der Heijden A.2, Mengual L.1, Ingelmo-Torres M.1, Lozano J.3, Van Rijt-Van De Westerlo C.4,
Utilization of next-generation sequencing techniques to investigate markers for chemosensitivity in bladder cancer patients treated with neoadjuvant chemotherapy prior to radical cystectomy
By: Boström P.1, Fey V.2, Kaikkonen E.3, Lamminen T.1, Lairinen A.1, Mirtti T.1, Koskinen I.5, Salminen A.1, Taimen P.6, Schleutker J.3
Institutes: 1Turku University Hospital, Dept. of Urology, Turku, Finland, 2University of Turku, Institution of Biotechnology, Turku, Finland, 3Turku University, Dept. of Medical Biochemistry and Genetics, Turku, Finland, 4Helsinki University Hospital and Finnish Institute For Molecular Medicine, University of Helsinki, Dept. of Pathology (HUSLAB), Helsinki, Finland, 5Helsinki University Hospital, Dept. of Urology, Helsinki, Finland, 6Turku University Hospital, Dept. of Pathology, Turku, Finland

Bladder cancer-secreted extracellular vesicles destroy vascular endothelial barriers
By: Yoneyama M.S.1, Hatakeyama S.2, Funyu T.3, Tsuboi S.1, Ohyama C.2
Institutes: 1Oyokyo Kidney Research Institute, Dept. of Cancer Immunology and Cell Biology, Hirosaki, Japan, 2Hirosaki University Graduate School of Medicine, Dept. of Urology, Hirosaki, Japan, 3Oyokyo Kidney Research Institute, Dept. of Urology, Hirosaki, Japan

KRT5 and KRT20 expression predicts recurrence and progression of stage pT1 non-muscle-invasive bladder cancer (NMIBC)
By: Breyer J.1, Wirtz R.2, Denzinger S.1, Erben P.3, Kriegmair M.3, Stoehr R.4, Eckstein M.4, Burger M.1, Otto W.1, Hartmann A.4
Institutes: 1University of Regensburg, Dept. of Urology, Regensburg, Germany, 2Stratifyer Molecular Pathology GmbH, Cologne, Germany, 3University Hospital Mannheim, Dept. of Urology, Mannheim, Germany, 4University of Erlangen-Nuremberg, Institute of Pathology, Erlangen, Germany

Cell-free DNA from urine samples – a valuable source for bladder cancer biomarkers?
By: Salomo K., Moritz S., Füssel S., Wirth M.
Institutes: Universitätsklinikum Carl Gustav Carus, Dept. of Urology, Dresden Johannstadt Nord, Germany

Withdrawn
By: 
Institutes:

Her2 alterations in muscle-invasive bladder cancer: There is more than protein expression in patient selection for targeted therapy
Institutes: 1Universitätsspital Bern, Universitätsklinik für Urologie, Bern, Switzerland, 2University of Bern, Dept. of Urology, Bern, Switzerland, 3University of British Columbia, Dept. of Urologic Sciences, Vancouver, Canada, 4University Hospital of Southampton, Dept. of Urology, Hampshire, United Kingdom, 5University of Bern, Institute of Pathology, Bern, Switzerland, 6Hiroshima University, Dept. of Urology, Hiroshima, Japan, 7GenomeDx, Biosciences, Vancouver, Canada

Molecular subtypes urothelial cancer
M. Sanchez-Carbayo, Vitoria–Gasteiz (ES)
Aims and objectives of this session
The objectives of this session is to understand how new pharmacologic research will impact on our understanding of LUTS and learn to use this knowledge to improve our management of storage and voiding LUTS associated with benign prostatic hyperplasia, overactive bladder and other causes of LUTS.

Poster viewing of 20 minutes. Presentations will take place on stage. Standard presentations are 2 minutes in length, followed by 2 minutes for discussion. Extended presentations (*) are 3 minutes in length, followed by 3 minutes for discussion.

*531 Impact of 5-alpha reductase inhibitors for treatment of benign prostatic hyperplasia on erectile dysfunction, treated depression, gynecomastia, and breast cancer: A real world 20 year observational study
By: Hagberg K.W.¹, Divan H.A.², Persson R.², Fang S.C.³, Jick S.S.², Nickel J.C.¹
Institutes: ¹Queen’s University, Dept. of Urology, Kingston, Canada, ²Boston University School of Public Health, Boston Collaborative Drug Surveillance Program, Lexington, United States of America, ³New England Research Institutes, NERI, Watertown, United States of America

532 Phosphodiesterase inhibitors for BPH-LUTS: Is the benefit worth it?
By: Pattanaik S.¹, Mavuduru R.², Panda A.³, Mathew J.⁴, Aggarwal M.⁵, Singh S.², Mandal A.²
Institutes: ¹Postgraduate Institute of Medical Education and Research, Dept. of Pharmacology, Chandigarh, India, ²Postgraduate Institute of Medical Education and Research, Dept. of Urology, Chandigarh, India, ³CMC, Dept. of Urology, Vellore, India, ⁴Postgraduate Institute of Medical Education and Research, Dept. of Pediatrics, Chandigarh, India, ⁵NMC Specialty Hospital, Dept. of Urology, Abudhabi, United Arab Emirates

*533 Antimuscarinic use in the elderly: A poisoned apple?
By: Meyer C.¹, Pucheril D.², Karabon P.², Gild P.¹, Von Landenberg N.¹, Atiemo H.², Menon M.², Chugtai B.³, Fisch M.⁴, Chun F.⁴, Trinh Q-D.¹
Institutes: ¹Brigham and Women’s Hospital, Harvard Medical School, Division of Urological Surgery and Center For, Division of Urologic Surgery and Center For Surgery and Public Health, Boston, United States of America, ²Henry Ford Health System, VUI Center for Outcomes Research, Analytics and Evaluation, Vattikut Urology Institute, Detroit, United States of America, ³Weill Cornell Medical College/New York Presbyterian Hospital, Dept. of Urology, New York, United States of America, ⁴University Medical Center Hamburg-Eppendorf, Dept. of Urology, Hamburg, Germany

534 A 52-week randomized comparative study of a triple therapy (tamsulosin, dutasteride, and imidafenacin) versus a dual therapy (tamsulosin and dutasteride) in benign prostatic hyperplasia patients with overactive bladder (DiReCT Study)
By: Yamanishi T.¹, Asakura H.², Seki N.³, Tokunaga S.⁴
Institutes: ¹Dokkyo Medical University, Dept. of Urology, Tochigi, Japan, ²Saitama Medical University Hospital, Dept. of Urology, Saitama, Japan, ³Kyushu Central Hospital, Dept. of Urology, Fukuoka, Japan, ⁴Kyushu University Hospital, Medical Information Center, Fukuoka, Japan
Comparison between tadalafil 5 mg vs. Serenoa repens/selenium/lycopene for the treatment of benign prostatic lower urinary tract symptoms secondary to benign prostatic hyperplasia. A phase IV, randomized, multicenter, non-inferiority clinical study. SPRITE study
By: Morgia G.1, Vespa G.2, Reale G.1, Di Mauro M.1, Pareo R.3, Voce S.4, Madonia M.5, Fedelini P.6, Veneziano P.7, Carini M.8, Salvia G.9, Santaniello F.10, Ginepri A.11, Bitelli M.12, Terrone C.13, Gentile M.14, Giannantoni A.15, Blefari F.16, Beatrici V.17, Polledro P.18, La Rosa P.19, Arnone S.20, Santelli G.21, Russo G.I.1
Institutes: 1University of Catania, Urology Section, Dept. of Surgery, Catania, Italy, 2University of Tor Vergata, Dept. of Urology, Rome, Italy, 3Hospital Nuovo Regina Margherita Roma, Dept. of Urology, Rome, Italy, 4Ravenna Hospital, Dept. of Urology, Ravenna, Italy, 5University of Sassari, Dept. of Urology, Sassari, Italy, 6Cardarelli Hospital, Dept. of Urology, Naples, Italy, 7Riuniti Hospital, Dept. of Urology, Reggio Calabria, Italy, 8University of Firenze, Dept. of Urology, Florence, Italy, 9ASP Acireale, Dept. of Urology, Acireale, Italy, 10Riuniti Hospital, Dept. of Urology, Ancona, Italy, 11Figlie Di San Camillo Hospital, Dept. of Urology, Rome, Italy, 12Frascati Hospital, Dept. of Urology, Frascati, Italy, 13University of Piemonte Orientale, Dept. of Urology, Novara, Italy, 14Avellino Hospital, Dept. of Urology, Avellino, Italy, 15University of Perugia, Dept. of Urology, Perugia, Italy, 16Hospital of Prato, Dept. of Urology, Prato, Italy, 17S. Croce Hospital, Dept. of Urology, Ancona, Italy, 18SS. Annunziata Di Savigniano Hospital, Dept. of Urology, Cuneo, Italy, 19Garibaldi Hospital, Dept. of Urology, Catania, Italy, 20Lugo of Romagna Hospital, Dept. of Urology, Ravenna, Italy, 21Lucca Hospital, Dept. of Urology, Lucca, Italy

A randomized, open-label, multicenter study evaluating efficacy of switch from dutasteride to tadalafil in benign prostatic hyperplasia patient with lower urinary tract symptoms (D-to-T trial)
By: Matsumoto T.1, Hatakeyama S.1, Yoshikawa K.2, Fukui K.3, Yanagisawa T.4, Kawaguchi T.2, Imai A.1, Yoneyama T.1, Hashimoto Y.1, Koie T.1, Saito H.5, Yamaya K.6, Funyu T.6, Ohyama C.1
Institutes: 1Hirosaki University Graduate School of Medicine, Dept. of Urology, Hirosaki, Japan, 2Mutsu General Hospital, Dept. of Urology, Mutsu, Japan, 3Fukui Urology Clinic, Dept. of Urology, Aomori, Japan, 4Aomori Rosai Hospital, Dept. of Urology, Hachinohe, Japan, 5Aomori Prefectural Central Hospital, Dept. of Urology, Aomori, Japan, 6Oyokyo Kidney Research Institute, Dept. of Urology, Hirosaki, Japan

Impact of Vesomni™ on quality of life of men with lower urinary tract symptoms associated with benign prostatic hyperplasia in routine clinical practice: Interim results from the EUROPA study
By: Rees J.1, Arbe E.2, Rosa Arias J.3, Skoumal R.3, Walters C.4, Yavuz Y.5, De Wachter S.6
Institutes: 1Tyntesfield Medical Group, Brockway Medical Centre, Nailsea, United Kingdom, 2Hospital “Santiago Apóstol”, Dept. of Urology, Miranda De Ebro, Spain, 3Urocenrum Brno, Dept. of Urology, Brno, Czech Republic, 4Astellas Pharma Europe Ltd, Medical and Clinical Operations, Chertsey, United Kingdom, 5Astellas Pharma Global Development, Dept. of Data Sciences, Leiden, The Netherlands, 6University Hospital Antwerpen, University Antwerpen, Dept. of Urology, Edegem, Belgium, 7Astellas Pharma Europe Ltd, Dept. of Medical Affairs, Chertsey, United Kingdom

Post-operative continuous use of antimuscarinics in BPH patients with storage symptoms requiring antimuscarinics before surgery – a nationwide population-based study
Institutes: Taipei Veterans General Hospital, Dept. of Urology, Taipei, Taiwan

A multicenter real-life study of the efficacy of an alpha-blocker with or without anticholinergic agent (imidafenacini) treatment in patients with lower urinary tract symptoms/benign prostatic hyperplasia and storage symptoms
By: Cho S.1, Hoon C.1, Park J.Y.1, Bae J.H.1, Lee K.W.2, Yoo T.K.3, Sin D.G.4, Kim S.W.5, Kim Y.H.2
Institutes: 1Korea University Anam Hospital, Dept. of Urology, Ansan, South Korea, 2Bucheon Hospital, Soonchunhyang University, Dept. of Urology, Bucheon, South Korea, 3ULIji University Nowon Hospital, Dept. of Urology, Seoul, South Korea, 4Busan University Hospital, Dept. of Urology, Busan, South Korea, 5Seoul University Hospital, Dept. of Urology, Seoul, South Korea

Testosterone therapy (TTH) improves urinary function and reduces major adverse cardiovascular events (MACE) in hypogonadal men with type 2 diabetes (T2DM) treated up to 8 years in comparison to an untreated control group
By: Haider A.1, Haider K.1, Doros G.2, Traish A.2
The effect of non-steroidal anti-inflammatory drugs on risk of benign prostatic hyperplasia
By: Murtola T.¹, Nygård L.², Talala K.³, Taari K.⁴, Tammela T.¹, Auvinen A.⁵
Institutes: ¹Tampere University Hospital, Dept. of Urology, Tampere, Finland, ²University of Tampere, School of Medicine, Tampere, Finland, ³Finnish Cancer Registry, Dept. of Research, Helsinki, Finland, ⁴Helsinki University Hospital, Dept. of Urology, Helsinki, Finland, ⁵University of Tampere, School of Health Sciences, Tampere, Finland

The effect of statins on the risk of receiving transurethral resection of prostate in the outpatients of genitourinary clinic - a study by applying nation-wide population based database
By: Lin C-C.¹, Chung H.J.¹, Lin A.T.L.¹, Huang Y.H.¹, Chen T.Z.²
Institutes: ¹Taipei Veterans General Hospital, Dept. of Urology, Taipei, Taiwan, ²Taipei Veterans General Hospital, Dept. of Family Medicine, Taipei, Taiwan

The comparison in the efficacy of the two combination therapies with an anticholinergic agent and an α1-blocker versus a β3-adrenoceptor agonist and an α1-blocker for patients with benign prostatic enlargement complicated by overactive bladder: A randomized, prospective trial using a urodynamic study
By: Matsukawa Y., Matsuo K., Majima T., Narita H., Kato M., Yamamoto T., Gotoh M.
Institutes: Nagoya University Graduate School of Medicine, Dept. of Urology, Nagoya, Japan
Percutaneous nephrolithotomy
Poster Session 41

**Location:** Room Paris, North Hall (Level 1)

**Chairs:**
- T. Bach, Hamburg (DE)
- M.R. Desai, Naidad (IN)
- G. Giusti, Basiglio (IT)

**Aims and objectives of this session**
PCNL seems to be on the rise again, after two decades of ESWL and URS. The evolution of techniques and instruments have optimized the outcome and minimalized the morbidity.

Poster viewing of 20 minutes. Presentations will take place on stage. Standard presentations are 2 minutes in length, followed by 2 minutes for discussion.

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**545**
**Value of CROES, S.T.O.N.E nomograms and Guy’s stone score as preoperative predictive system for percutaneous nephrolithotomy (PCNL) outcomes**
**By:** De Nunzio C., Bellangino M., Voglino O.A., Baldassarri V., Pignatelli M., Berardi E., Tema G., Cremona A., Tubaro A.
**Institutes:** Sant’Andrea Hospital - Sapienza University, Dept. of Urology, Rome, Italy, Sant’Andrea Hospital - Sapienza University, Dept. of Radiology, Rome, Italy

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**546**
**External validation and comparison of the scoring systems (S.T.O.N.E, GUY, CROES, S-ReSC) for predicting percutaneous nephrolithotomy outcomes: A single center experience with 506 cases**
**By:** Yarımoglu S., Bozkurt I.H., Aydogdu O., Yonguc T., Gunlusoy B., Eker A., Degirmenci T.
**Institutes:** Izmir Bozyaka Training and Research Hospital, Dept. of Urology, Izmir, Turkey

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**547**
**Can Guy’s and S.T.O.N.E. scores predict the outcome of percutaneous nephrolithotomy in children?**
**By:** Elshal A., El-Nahas A., Shoma A., Elsawy A., Abouelkheir R., El-Kenawy M., Nabeeh M., Shokeir A.
**Institutes:** Mansoura University, Dept. of Urology, Mansoura, Egypt

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**548**
**Preoperative predictors of infection complications in PCNL surgery. A prospective study**
**By:** Ordaz Jurado D.D.G., Lorenzo L., Budia A., López-Acón D., Bahilo P., Pérez Ardavin J., Trassierra M., Boronat F.
**Institutes:** La Fe, Universitary and Polytechnic Hospital, Dept. of Urology, Valencia, Spain

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**549**
**Validation of automated kidney stone volumetry in low dose computed tomography**
**By:** Wilhelm K., Hein S., Schlager D., Adams F., Miernik A., Schoenthaler M., Hesse A., Neubauer J.
**Institutes:** Faculty of Medicine and Medical Center - University of Freiburg, Center For Surgery Department of Urology, Freiburg, Germany, University of Bonn, Department of Urology, Division of Experimental Urology, Bonn, Germany, Faculty of Medicine and Medical Center - University of Freiburg, Department of Radiology, Freiburg, Germany

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**550**
**Safety and efficacy of percutaneous nephrolithotripsy (PNL) in supine versus prone position: A randomized controlled trial**
**By:** Abouelgreed A., Elgendy M., Abdelaal M., Shebl S., Sabry K., Ibrahim S.
**Institutes:** Gulf Medical University, Dept. of Urology, Ajman, United Arab Emirates, Alazhar University, Dept. of Urology, Cairo, Egypt

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**551**
**Papillary versus non papillary puncture in percutaneous nephrolithotomy: A prospective**
randomized trial
By: Kallidonis P., Kyriazis I., Kotsiris D., Ntasiotis P., Koutava A., Panagopoulos V., Kamal W., Liatsikos E.
Institutes: University of Patras University Hospital, Dept. of Urology, Patra, Greece

Supra-costal access for percutaneous nephrolithotomy in modified supine position: Feasibility, safety and efficacy
By: El Harrech Y.1, Zaini R.2, Ghoundal O.1, Touiti D.1
Institutes: Military Hospital Avicenne, Dept. of Urology, Marrakech, Morocco, 3Military Hospital, Dept. of Urology, Guelmim, Morocco

Stereotactic two access micro percutaneous nephrolithotomy: In vivo pig model experience
By: Telli O.1, Hajiyev P.1, Bagci U.2, Soygur T.1, Burgu B.1
Institutes: 1Ankara University School of Medicine, Dept. of Pediatric Urology, Ankara, Turkey, 2Ankara University School of Medicine, Dept. of Urology, Ankara, Turkey

In vitro assessment of the hydrodynamic clearance of stone fragments and dust in percutaneous nephrolithotomy instruments
By: Mager R.1, Balzeriet C.2, Herrmann T.2, Nagele U.4, Haferkamp A.1, Schilling D.5
Institutes: University Medical Center Mainz, Dept. of Urology, Mainz, Germany, 2ExperTeach GmbH, Dept. of Physics, Dietzenbach, Germany, 3Hanover Medical School, Dept. of Urology and Urologic Oncology, Hanover, Germany, 4General Hospital Hall, Dept. of Urology and Andrology, Hall in Tyrol, Austria, 5Isarkliniken Munich, Dept. of Urology, Munich, Germany

A comparison among PCNL, miniperc and ultraminiperc for lower calyceal stones between 1 and 2 cm: A multicenter experience
By: Maruccia S.1, Sanguedolce F.2, Casellato S.1, Dal Piaz O.3, Montanari E.4, Pummer K.3, Verze P.6, Mironi V.5, Taverna G.5, Romero Otero J.7, Bozzini G.6
Institutes: Istituti Clinici Zucchi, Dept. of Urology, Monza, Italy, 2Northampton General Hospital, Dept. of Urology, London, United Kingdom, 3Graz General Hospital, Dept. of Urology, Graz, Austria, 4Ospedale Policlinico, Dept. of Urology, Milan, Italy, 5Universita Federico II, Dept. of urology, Naples, Italy, 6Humanitas Mater Domini, Dept. of Urology, Castellanza, Italy, 7Hospital 12 De Octubre, Dept. of Urology, Madrid, Spain

Outcome of mini versus standard percutaneous nephrolithotomy for renal stones
By: Elmarakbi A.2, Ghoneima W.1, Elsheemy M.1, Ibrahim H.3, Habib E.1, Khadgi S.4, Shrestha S.4, Al-Kandari A.5
Institutes: Cairo University, Dept. of Urology, Cairo, Egypt, 2Bani Swaif University, Dept. of Urology, Bani Swaif, Egypt, 3Fayoum University, Dept. of Urology, Fayoum, Egypt, 4Vayodah and Venus International Hospitals, Dept. of Urology, Kathmandu, Nepal, 5Kuwait University, Dept. of Surgery and Urology, Kuwait, Kuwait

A prospective, randomized trial evaluating the efficacy of two different hemostatic sealant in tubeless percutaneous nephrolithotomy
By: Kim S.H.2, Yoon B.I.3, Choi Y.S.1, Kim K-S.1, Lee K-W.1, Choi S.W.1, Bae W.J.1, Ha U-S.1, Lee J-Y.1, Kim S-W.1, Hong S-H.1, Cho H.J.1
Institutes: The Catholic University of Korea, Seoul St. Mary’s Hospital, Dept. of Urology, Seoul, South Korea, 2The Catholic University of Korea, St. Paul’s Hospital, Dept. of Urology, Seoul, South Korea, 3Catholic Kwandong University, International St. Mary’s Hospital, Dept. of Urology, Incheon, South Korea

A prospective randomized controlled study of instantly phase-II tubeless percutaneous nephrolithotomy
By: Folin L., Xiaofeng Z., Rihai X., Yuanhu Y., Genqng W., Xiaoning W., Guoxi Z., Dazhi L.
Institutes: First Affiliated Hospital of Gannan Medical University, Dept. of Urology, Ganzhou, China

CT-controlled stone-free-rate after minimal-invasive percutaneous nephrolitholapaxy (MIP) in correlation with instrument-size

Scientific Programme
Percutaneous nephrolithotomy in patients with spina bifida and spinal injury: A comparative analysis of over 4000 patients, from a national registry


Institutes: Royal Free Hospital, Dept. of Urology, London, United Kingdom, 2British Association of Urological Surgeons, Dept. of Audit and Data, London, United Kingdom, 3Addenbrooke's Hospital, Dept. of Urology, Cambridge, United Kingdom, 4Norfolk and Norwich University Hospital, Dept. of Urology, Norwich, United Kingdom, 5Guy's and St Thomas' NHS Foundation Trust, Dept. of Urology, Norwich, United Kingdom
Aims and objectives of this session
OAB and nocturia remain important clinical challenges in an aging population. What are the new developments?

Poster viewing of 20 minutes. Presentations will take place on stage. Standard presentations are 2 minutes in length, followed by 2 minutes for discussion. Extended presentations (*) are 3 minutes in length, followed by 3 minutes for discussion.

561 Development of TANGO: A novel screening tool to identify co-existing causes of nocturia
By: Bower W.¹, Rose G.², Whishaw D.³, Ervin C.³, Khan F.², Goldin J.⁴
Institutes: Melbourne Health, Dept. of Rehabilitation and Sub-Acute Community Services, Parkville, Australia, Melborne Health, Dept. of Rehabilitation Services, Parkville, Australia, Melbourne Health, Dept. of Sub-Acute Community Services, Parkville, Australia, Melbourne Health, Dept. of Respiratory and Sleep Medicine, Parkville, Australia, Melbourne Health, Dept. of Aged Care Services and Urology, Parkville, Australia

562 Effects of imidafenacin on urine production, voided volume, and hours of undisturbed sleep in overactive bladder patients with nocturnal polyuria – post hoc analysis of two clinical trials
By: Yokoyama O.¹, Takeda M.², Gotoh M.³, Yoshida M.⁴, Kakizaki H.⁵, Takahashi S.⁶, Masumori N.⁷
Institutes: University of Fukui, Dept. of Urology, Fukui, Japan, University of Yamanashi, Dept. of Urology, Yamanashi, Japan, Nagoya University Graduate School of Medicine, Dept. of Urology, Nagoya, Japan, National Center For Geriatrics and Gerontology, Dept. of Urology, Obu, Japan, Asahikawa Medical University, Dept. of Renal and Urologic Surgery, Asahikawa, Japan, Nihon University School of Medicine, Dept. of Urology, Tokyo, Japan, Sapporo Medical University School of Medicine, Dept. of Urology, Sapporo, Japan

563 Influence of urinary calcium excretion on urinary symptoms such as nocturia
By: Tomohiro M.
Institutes: Nagasaki University, School of Medicine, Dept. of Urology, Nagasaki, Japan

564 Disruption of adaptation in bladder capacity for urine production rate during night time in aged men with nocturia: Analysis of the data of frequency volume chart
By: Kira S., Mitsui T., Miyamoto T., Ihara T., Nakagomi H., Sawada N., Takeda M.
Institutes: University of Yamanashi, Dept. of Urology, Chuo, Japan

565 Overnight ambulatory urodynamics findings in patients with nocturia and/or nocturnal enuresis
By: Solomon E., Eccleston H., Duffy M., Malde S., Pakzad M., Hamid R., Greenwell T., Ockrim J.
Institutes: University College Hospital London, Dept. of Urology, London, United Kingdom

*566 Reduction of nocturia in patients treated with C-PAP for obstructive sleep apnea syndrome
By: Degalliers S.¹, De Vries P.¹, Ewoldt T.², Rahnama i S.²
Institutes: Zuyderland Medical Center Heerlen, Dept. of Urology, Heerlen, The Netherlands, Maastricht University, Dept. of Urology, Maastricht, The Netherlands

567 Association between age and low risk of clean intermittent catheterisation with
onabotulinumtoxinA in overactive bladder patients with accompanying improvements in urinary symptoms and quality of life
By: Drake M. 1, Everaert K. 2, Rovner E. 3, Dmochowski R. 4, Ginsberg D. 5, Radomski S. 6, Nitti V. 7, Aboushwareb T. 8, Chang C-T. 9, Chapple C.R. 10
Institutes: 1Bristol Urological Institute, Dept. of Urology, Bristol, United Kingdom, 2Ghent University Hospital, Dept. of Uro-Gynaecology, Ghent, Belgium, 3Medical University of South Carolina, Dept. of Urology, Charleston, United States of America, 4Vanderbilt University Medical Center, Dept. of Urologic Surgery, Nashville, United States of America, 5USC Institute of Urology, Dept. of Urology, Los Angeles, United States of America, 6University of Toronto, Dept. of Urology, Toronto, Canada, 7New York University, Dept. of Urology, New York, United States of America, 8Allergan Plc, Dept. of Urology, Irvine, California, United States of America, 9Allergan Plc, Dept. of Statistics, Bridgewater, United States of America, 10The Royal Hallamshire Hospital, Sheffield Teaching Hospitals, NHS Foundation Trust, Dept. of Urology, Sheffield, United Kingdom

Randomised crossover-controlled evaluation of simultaneous-bilateral transcutaneous electrostimulation of nervus tibialis posterior during urodynamics
By: Fritsche H-M., Girtner F., Huber T., Mayr R., Burger M.
Institutes: University of Regensburg, Dept. of Urology, Regensburg, Germany

Development of an overactive bladder assessment tool: A potential alternative to the bladder diary
By: Kelleher C. 1, Chapple C. 2, Johnson N. 3, Payne C. 4, Homma Y. 5, Hakimi Z. 6, Siddiqui E. 7, Kopp Z. 3, Evans C. 3
Institutes: 1Guy’s and St Thomas’ Hospitals, Dept. of Obstetrics and Gynecology, London, United Kingdom, 2Sheffield University, Dept. of Urology Research, Sheffield, United Kingdom, 3Endpoint Outcomes, Dept. of Outcomes Research, Boston, United States of America, 4Vista Urology & Pelvic Pain Partners, Dept. of Urology, San Jose, United States of America, 5University of Tokyo, Dept. of Urology, Tokyo, Japan, 6Astellas, Dept. of Medical Affairs, Leiden, The Netherlands, 7Astellas Pharma Europe Ltd, Dept. of Medical Affairs, Chertsey, United Kingdom

Long-term comparison of adherence to drug therapy in 1,917 patients with overactive bladder
By: Keishi K., Kanao K., Morinaga S., Muramatsu H., Saiki H., Kobayashi I., Nishikawa G., Kato Y., Watanabe M., Nakamura K., Sumitomo M.
Institutes: Aichi Medical University, Dept. of Urology, Nagakute, Japan

Three-months results of implant driven tibial nerve stimulation for the treatment of overactive bladder syndrome
By: Van Breda J., Martens F., Tromp J., Heesackers J.
Institutes: Radboud University Medical Center, Dept. of Urology, Nijmegen, The Netherlands

New novel chronic tibial neuromodulation (CTNM) treatment option for OAB significantly improves urgency (UI)/urge urinary incontinence (UUI) and normalizes sleep patterns: Initial results
By: Sievert K-D. 1, Milinovic L. 2, Foditsch E. 3, Dewachter S. 4, Knupfer S. 3, Kozomara M. 2, Roggenkemp A. 2, Kessler T. 3
Institutes: 1Paracelsus Private Medical University of Salzburg, Dept. of Scitrecs, Salzburg, Austria, 2SALK, Dept. of Urology, Salzburg, Austria, 3Balgrist, Dept. of Neuro-Urology, Zurich, Switzerland, 4University of Antwerp, Dept. of Urology, Antwerp, Belgium

Do patients with OAB experience different bladder sensations?
By: Herrewegh A., Vrijens D., Marcellissen T., Van Koeveringe G.
Institutes: Maastricht Universitair Medisch Centrum+, Dept. of Urology, Maastricht, The Netherlands

Affective symptoms and quality of life in patients with voiding or storage dysfunction - results before and after sacral neuromodulation
By: Jairam R., Drossaerts J., Schilders I., Vrijens D., Van Koeveringe G., Van Kerrebroeck P.
Institutes: Maastricht UMC+, Dept. of Urology, Maastricht, The Netherlands
Infertility: Basic to clinical
Poster Session 43

Sunday, 26 March
14:00 - 15:30

Location: Room Berlin, North Hall (Level 1)

Chairs: G.R. Dohle, Rotterdam (NL)
Z. Kopa, Budapest (HU)
P. Verze, Naples (IT)

Aims and objectives of this session
This session will introduce the audience to the newest pre-clinical and clinical developments in male factor infertility.

Poster viewing of 20 minutes. Presentations will take place on stage. Standard presentations are 2 minutes in length, followed by 2 minutes for discussion. Extended presentations (*) are 3 minutes in length, followed by 3 minutes for discussion.

575

Single nucleotide polymorphisms within the novel testis-specific Haspin gene encoding a serine/threonine protein kinase in human male infertility
By: Miyagawa Y. 1, Soda T. 1, Ueda N. 1, Fukuhara S. 1, Kiuchi H. 1, Tsujimura A. 2, Tanaka H. 3, Nonomura N. 1
Institutes: 1Osaka University Graduate School of Medicine, Dept. of Urology, Suita, Japan, 2Juntendo University Urayasu Hospital, Dept. of Urology, Urayasu, Japan, 3Nagasaki International University, Faculty of Pharmaceutical Sciences, Sasebo, Japan

576

Withdrawn
By:
Institutes:

577

Therapeutic effect of RIPK1 inhibitor in testicular ischemia-reperfusion
By: Ohira S. 1, Hara R. 1, Tone S. 2, Nagai A. 1
Institutes: 1Kawasaki Medical School, Dept. of Urology, Kurashiki City, Japan, 2Graduate School of Tokyo Denki University, Dept. of Life Science and Engineering, Hatoyama-Chō, Japan

*578

Formation of the human sperm reservoir and its major players
By: Bour S. 1, Paschold R. 1, Alba-Alejandre I. 2, Becker A. 1, Stief C. 1, Koelle S. 3, Trottmann M. 1
Institutes: 1University of Munich, Dept. of Urology, Munich, Germany, 2University of Munich, Dept. of Gynecology, Munich, Germany, 3University College Dublin, Dept. of Developmental Biology, Dublin, Ireland

579

Effect of electromagnetic wave from cellular phone on the spermatogenesis: Development of an experimental model
Institutes: Seoul National University Bundang Hospital, Dept. of Urology, Seongnam, South Korea

580

Effects of smoking on the glycoaclix of human spermatozoa
By: Paschold R., Bour S., Becker A., Stief C., Trottmann M.
Institutes: Ludwig-Maximilians-University Munich, Dept. of Urology, Munich, Germany

581

Oxidative stress alterations in the epididymis and testis in a nicotine-exposed rat model
By: Tsounapi P. 1, Honda M. 1, Dimitriadis F. 2, Shimizu S. 3, Kawamoto B. 1, Kimura Y. 1, Hikita K. 1, Saito M. 1, Sofikitis N. 2, Takenaka A. 1
Institutes: 1
582

Heavy cigarette smoking is the most detrimental factor for sperm DNA fragmentation – results of a cross-sectional study in primary infertile men
By: Boeri L.\textsuperscript{1}, Pederzoli F.\textsuperscript{2}, Ventimiglia E.\textsuperscript{2}, Capogrosso P.\textsuperscript{2}, Cazzaniga W.\textsuperscript{2}, Frego N.\textsuperscript{2}, Oreggia D.\textsuperscript{2}, Scano R.\textsuperscript{2}, Montanari E.\textsuperscript{3}, Gaboardi F.\textsuperscript{3}, Montorsi F.\textsuperscript{2}, Salonia A.\textsuperscript{3}

Institutes: \textsuperscript{1}IRCCS Fondazione Ca’ Granda - Ospedale Maggiore Policlinico, Dept. of Urology, Milan, Italy, \textsuperscript{2}IRCCS San Raffaele Hospital/ University Vita-Salute San Raffaele, Division of Oncology, Unit of Urology, Milan, Italy, \textsuperscript{3}IRCCS San Raffaele Hospital, Division of Oncology, Unit of Urology, Milan, Italy

583

Clinical and experimental studies suggest a novel cause of male infertility: Deficiency in expression of sperm phospholipase Cζ
By: Dimitriadis F.\textsuperscript{1}, Tsounapi P.\textsuperscript{2}, Vlachopoulou E.\textsuperscript{3}, Matthaiou I.\textsuperscript{3}, Zachariou A.\textsuperscript{3}, Giannakis J.\textsuperscript{3}, Takenaka A.\textsuperscript{2}, Sofikitis N.\textsuperscript{3}

Institutes: \textsuperscript{1}Aristotle University, Dept. of Urology, Thessaloniki, Greece, \textsuperscript{2}Tottori University, Dept. of Urology, Yonago, Japan, \textsuperscript{3}Ioannina University, Dept. of Urology, Ioannina, Greece

584

The evolving profile of comorbidities in infertile men: Results from a 10-years follow-up cohort study
By: Ventimiglia E.\textsuperscript{1}, Cazzaniga W.\textsuperscript{1}, Pederzoli F.\textsuperscript{1}, Frego N.\textsuperscript{1}, Chierigo F.\textsuperscript{1}, Capogrosso P.\textsuperscript{1}, Boeri L.\textsuperscript{2}, Alfano M.\textsuperscript{3}, Scano R.\textsuperscript{3}, Mirone V.\textsuperscript{4}, Montorsi F.\textsuperscript{1}, Salonia A.\textsuperscript{1}

Institutes: \textsuperscript{1}IRCCS San Raffaele Hospital/ University Vita-Salute San Raffaele, Dept. of Oncology and Urology; URI, Milan, Italy, \textsuperscript{2}IRCCS Ca’ Granda Hospital Maggiori Policlinico, Dept. of Urology, Milan, Italy, \textsuperscript{3}IRCCS San Raffaele Hospital, Dept. of Oncology and Urology; URI, Milan, Italy, \textsuperscript{4}University of Naples Federico II, Dept. of Urology, Naples, Italy

585

Male infertility is a risk for depression and low self-esteem: Prospective, case-control, clinical study
By: Basar M.M.\textsuperscript{2}, Kendirci M.\textsuperscript{1}, Alkan E.\textsuperscript{2}, Semiz A.\textsuperscript{2}, Sirin H.\textsuperscript{3}, Balbay D.\textsuperscript{2}

Institutes: \textsuperscript{1}Istinye University, Faculty of Medicine, Liv Hospital Ulus, Dept. of Urology, Istanbul, Turkey, \textsuperscript{2}Memorial Sisli Hospital, Dept. of Urology, Istanbul, Turkey, \textsuperscript{3}Arnavutköy State Hospital, Dept. of Urology, Istanbul, Turkey

586

Male infertility is associated with altered treatment course of men with cancer
By: Eminaga O.\textsuperscript{1}, Shufeng L.\textsuperscript{2}, Brooks J.\textsuperscript{2}, Eisenberg M.\textsuperscript{2}

Institutes: \textsuperscript{1}University Hospital of Cologne, Dept. of Urology, Cologne, Germany, \textsuperscript{2}Stanford University, School of Medicine, Stanford, United States of America

587

How realistic is endoscopic vasectomy? An ex-vivo study on feasibility and certainty of endoluminal occlusion of porcine vas deferens
By: Schlager D.\textsuperscript{1}, Maas J.M.\textsuperscript{1}, Spittau B.\textsuperscript{2}, Leiber C.\textsuperscript{1}, Wetterauer U.\textsuperscript{1}, Diemer T.\textsuperscript{3}, Weidner W.\textsuperscript{3}, Schönthaler M.\textsuperscript{1}, Miernik A.\textsuperscript{1}

Institutes: \textsuperscript{1}University Medical Center Freiburg, Dept. of Urology, Freiburg, Germany, \textsuperscript{2}University Medical Center Freiburg, Dept. of Anatomy, Freiburg, Germany, \textsuperscript{3}University Hospital Giessen, Dept. of Urology, Pediatric Urology and Andrology, Giessen, Germany

15:17 - 15:24

Summary
Z. Kopa, Budapest (HU)
Improving recovery and reducing complication rate after urological surgery

Poster Session 44

**Location:** Room Vienna, North Hall (Level 1)

**Chairs:** J. Bjerggaard Jensen, Aarhus N (DK)
           I. Korneyev, St. Petersburg (RU)

**Aims and objectives of this session**

This session presents the recent advances and evidence about enhanced recovery after surgery programs, as well as new data regarding perioperative care in patients undergoing major urological surgery.

Poster viewing of 20 minutes. Presentations will take place on stage. Standard presentations are 2 minutes in length, followed by 2 minutes for discussion.

**14:19 - 14:23**

**Introduction**

J. Bjerggaard Jensen, Aarhus N (DK)

**588**

Enhanced recovery enhances reduction of length of stay in patients treated with robotic assisted radical cystectomy with intracorporeal urinary diversion

By: Tan W.S.,¹ Lamb B.,¹ Tan M-Y.,² Sridhar A.,² Mohammed A.,² Baker H.,² Briggs T.,² Tan M.⁴, Kelly J.¹

Institutes:¹University College London, Dept. of Surgery and Interventional Sceince, London, United Kingdom, ²University College London Hospitals, Dept. of Urology, London, United Kingdom, ³University of Glasgow, School of Medicine, London, United Kingdom, ⁴University College London Hospitals, Dept. of Anaesthesia and Perioperative Medicine, London, United Kingdom

**589**

The application of ERAS pathways to radical cystectomy: Outcomes from 482 consecutive cases

By: Pang K.,¹ Groves R.,² Noon A.,¹ Catto J.¹

Institutes:¹University of Sheffield, Dept. of Oncology and Academic Urology Unit, Sheffield, United Kingdom, ²Royal Hallamshire Hospital, Dept. of Anaesthesia, Sheffield, United Kingdom

**590**

A prospective randomized single-centre trial evaluating an ERAS protocol versus a standard protocol for patients treated with radical cystectomy and urinary diversion for bladder cancer

By: Frees S., Aning J., Black P., Struss W., Bell R., Gleave M., So A.

Institutes: Vancouver Prostate Centre, Dept. of Urology, Vancouver, Canada

**591**

Factors influencing the length of hospital stay after robotic radical cystectomy; is 4 days hospital stay feasible?


Institutes: The Royal Surrey County Hospital, Dept. of Urology, Guildford, United Kingdom

**592**

Enhanced recovery protocol after radical cystectomy is safe and accelerates bowel function recovery compared to standard perioperative care

By: Palumbo V.,² Giannarini G.,¹ Lami V.,² Rossanese M.,¹ Crestani A.,¹ Ficarra V.³

Institutes:¹Academic Medical Centre Hospital Santa Maria Della Misericordia, Dept. of Urology, Udine, Italy, ²University of Padua, Dept. of Urology, Padua, Italy

**593**

Enhanced recovery after radical cystectomy – results of the first 18 months after implementation of a full ERAS program using the EIAS database

By: Müller S., Lilleaasen G., Davami J., Axcrona K.

Institutes: Akershus Universitetssykehus, Dept. of Urology, Lørenskog, Norway
Validation of the Clavien-Dindo grading system in urology by the EAU guidelines ad hoc panel
By: Mitropoulos D.², Bjerggaard Jensen J.¹, Artibani W.³, Biyani C.S.⁴, Rouprêt M.⁵, Truss M.⁶
Institutes:¹ Aarhus University Hospital, Dept. of Urology, Aarhus, Denmark, ²University of Athens Medical School, Dept. of Urology, Athens, Greece, ³University of Verona, Dept. of Surgery, Verona, Italy, ⁴St. James’s University Hospital, Dept. of Urology, Leeds, United Kingdom, ⁵Pitié-Salpêtrière Hospital, AP-HP, Academic Dept. of Urology, Paris, France, ⁶Klinikum Dortmund GmbH, Dept. of Urology, Dortmund, Germany

Spinal analgesia versus intravenous opioid for robot-assisted radical prostatectomy: A retrospective analysis of 200 cases
By: Kim L.¹, Brammer K.¹, Jay A.¹, Kasivisvanathan R.², Cahill D.¹
Institutes:¹ Royal Marsden Hospital Nhs, Dept. of Urology, London, United Kingdom, ²Royal Marsden Hospital Nhs, Dept. of Anaesthesia, London, United Kingdom

Procedure-specific risks of thrombosis and bleeding in urological cancer surgery: Systematic reviews and meta-analyses
Institutes:¹ University of Helsinki, Dept. of Urology and Public Health, Helsinki, Finland, ²McMaster University, Michael G. DeGroote National Pain Center, Hamilton, Canada, ³University of Toronto, School of Medicine, Toronto, Canada, ⁴Woodstock General Hospital, Dept. of Surgery, Division of Urology, Woodstock, Canada, ⁵University of Padua, Dept. of Surgical, Oncological, and Gastroenterological Sciences, Urology Clinic, Padua, Italy, ⁶Imperial College London, Dept. of Epidemiology and Biostatistics, London, United Kingdom, ⁷ASST Papa Giovanni XXIII, Dept. of Urology, Bergamo, Italy, ⁸University of Toronto, Dept. of Medicine, Toronto, Canada, ⁹McMaster University, Dept. of Clinical Epidemiology and Biostatistics, Hamilton, Canada, ¹⁰Kaiser Permanente Southern California, Dept. of Research and Evaluation, Pasadena, United States of America, ¹¹University of Oslo, Institute of Clinical Medicine, Oslo, Norway, ¹²McMaster University, Dept. of Medicine, Hamilton, Canada

NOACs in urology: The surgeon’s guide to perioperative management
By: Rahim S.¹, Datta S.¹, Wood M.², Maan Z.¹
Institutes:¹ Colchester Hospital University Nhs Foundation Trust, Dept. of Urology, Colchester, United Kingdom, ²Colchester Hospital University Nhs Foundation Trust, Dept. of Haematology, Colchester, United Kingdom

Prediction of postoperative complications after radical nephrectomy, based on patient comorbidity preoperatively
By: Fragkiadis E., Alamanis C., Mitropoulos D., Constantinides C.A.
Institutes: Laiko Hospital, Urology, Zografo-Athens, Greece

The feasibility of day case robotic-assisted laparoscopic prostatectomy
By: Coomer W.¹, Jefferies M.¹, Ravi J.¹, Colmsee M.², Tozer J.², Carter A.¹, Wilson J.¹
Institutes:¹ The Royal Gwent Hospital, Dept. of Urology, Newport, United Kingdom, ²The Royal Gwent Hospital, Dept. of Anaesthetics, Newport, United Kingdom

Summary
J. Bjerggaard Jensen, Aarhus N (DK)
Paediatric urology 2
Poster Session 45

Sunday, 26 March
14:00 - 15:30

Location: Room London, North Hall (Level 1)

Chairs: B. Boillot, Biviers (FR)
M.S. Silay, Istanbul (TR)
R. Sood, New Delhi (IN)

Aims and objectives of this session
Paediatric urology 2 involves new aspects in penile and testicular aspects as well as special items of care for children.

Poster viewing of 20 minutes. Presentations will take place on stage. Standard presentations are 2 minutes in length, followed by 2 minutes for discussion.

601 Effects of sex hormones during the prenatal period on behavioral sexual dimorphism in school-aged children
By: Mitsui T.¹, Araki A.², Miyashita C.², Ito S.², Kitta T.³, Moriya K.³, Cho K.⁴, Morioka K.⁴, Takeda M.¹, Shinohara N.³, Kishi R.³, Nonomura K.³
Institutes: University of Yamanashi, Dept. of Urology, Chuo-City, Japan, ²Hokkaido University, Center for Environmental and Health Sciences, Sapporo, Japan, ³Hokkaido University, Dept. of Urology, Sapporo, Japan, ⁴Hokkaido University, Dept. of OB-GYN, Sapporo, Japan

602 Prune belly syndrome. Is penile structures similar to normal fetuses?
By: Gallo C., Costa W., Favorito L., Sampaio F.
Institutes: State University of Rio de Janeiro, Urogenital Research Unit, Rio de Janeiro, Brazil

603 The incidence of isolated penile torsion in North India: A study of 5,018 male neonates
By: Bhat M.¹, Bhat A.², Kumar V.³, Bhat A.³, Goyal S.³
Institutes: ¹M.G. Medical College Jaipur, Dept. of Urology, Jaipur, India, ²Dr. S.N. Medical College Jodhpur, Dept. of Urology, Jodhpur, India, ³S.P. Medical College Bikaner, Dept. of Surgery, Bikaner, India

604 The prevalence and clinical features of spinal dysraphism in children with hypospadias
Institutes: Chung-Ang University Hospital, Dept. of Urology, Seoul, South Korea

605 Our modifications in Glassberg–Duckette technique to prevent fistula and stricture at proximal anastomosis of inner prepuceal flap tube and urethra in severe hypospadias
By: Bhat A.¹, Bhat M.², Tomar V.S.³, Singh V.³, Bhat A.⁴, Goyal S.³
Institutes: ¹Dr. S.N.Medical College Jodhpur, Dept. of Urology, Jodhpur, India, ²M. G. Medical College Jaipur, Dept. of Surgery, Jaipur, India, ³Dr. S.N Medical College Jodhpur, Dept. of Urology, Jodhpur, India, ⁴S.P. Medical College Bikaner, Dept. of Surgery, Bikaner, India

606 TIPU in concealed hypospadias/megameatus intact prepuce
By: Bhat A.², Bhat M.¹, Upadhayay R.⁴, Bhat A.³, Goyal S.²
Institutes: ¹M.G. College Jaipur, Dept. of Surgery, Bikaner, India, ²Dr. S.N. Medical College Jodhpur, Dept. of Urology, Jodhpur, India, ³S.P. Medical College Bikaner, Dept. of Surgery, Bikaner, India, ⁴S.P. Medical College Bikaner, Dept. of Urology, Bikaner, India

607 Incidence of undescended testes in preterm labor and factors associated with spontaneous descent
By:
608 The impact of early orchiopexy on undescended testes: Analysis of testicular growth rate ratio
By: Tseng C-S., Huang K-H., Pu Y-S., Chiang I-N.
Institutes: National Taiwan University, Dept. of Urology, Taipei, Taiwan

609 Cause of late orchiopexy surgery in tertiary care center
Institutes: King Faisal Specialist Hospital and Research Center, Dept. of Urology - Pediatric Urology Division, Riyadh, Saudi Arabia, King Abdulaziz Medical City King Fahad National Guard Hospital, Dept. of Surgery - Pediatric Urology Division, Riyadh, Saudi Arabia, King Khalid University Hospital, King Saud University, Dept. of Surgery - Pediatric Urology Division, Riyadh, Saudi Arabia

610 Is diagnostic laparoscopy justified for the initial management of unilateral non-palpable testis?
By: Matsuyama S., Matsumoto F., Matsui F., Yazawa K., Okusa T.
Institutes: Osaka Medical Center & Research Institut, Dept. of Urology, Osaka, Japan

611 Other than duration of symptoms, is there a predictive factor for testicular viability following testicular torsion in children?
By: Song P.H., Choi J.Y., Ko Y.H., Moon K.H., Jung H.C.
Institutes: Yeungnam University, College of Medicine, Dept. of Urology, Daegu, South Korea

612 Evaluating the effect of the testis fixation is performed through the epididymo-testicular junction on inflammation, oxidative stress and spermatogenesis parameters in rats
By: Elbir F., Kalkan S., Silay M.S.
Institutes: Midyat State Hospital, Dept. of Urology, Mardin, Turkey, Bezmialem Vakif University, Dept. of Urology, Istanbul, Turkey, Medeniyet University, Dept. of Pediatric Urology, Istanbul, Turkey

613 The activity and discussion points of #Circumcision through Twitter; a microblogging platform
By: Ucar T., Culpan M., Caskurlu T., Silay M.S.
Institutes: Medeniyet Universitesi Goztepe Egitim Arastirma Hastanesi, Dept. of Urology, Istanbul, Turkey

614 Complications of male circumcision over 10 years: Single center experience
Institutes: Zagazig University Hospital, Dept. of Urology, Zagazig, Egypt

615 Transitional care practice amongst paediatric urologists and surgeons in the UK
By: Faure Walker N., Smuelders N., Wood D., Couchman A.
Institutes: Kingston Hospital, Dept. of Urology, Kingston upon Thames, United Kingdom, Great Ormond Street Hospital For Children, Dept. of Urology, London, United Kingdom, University College London Hospital, Dept. of Urology, London, United Kingdom
Prostate cancer biomarkers: Technical advances and clinical implications
Poster Session 46

Sunday, 26 March
14:00 - 15:30

Location: Room Stockholm, North Hall (Level 1)

Chairs: M.G.K. Cumberbatch, Sheffield (GB)
S. Füssel, Dresden Johannstadt Nord (DE)
K.A. Tasken, Oslo (NO)

Aims and objectives of this session
Investigations on circulating tumor cells have been widely used in prostate cancer biomarker studies. Further improvements in biomarker assessment include application of MRI. New technical tools will be presented in the session.

Poster viewing of 20 minutes. Presentations will take place on stage. Standard presentations are 2 minutes in length, followed by 2 minutes for discussion. Extended presentations (+) are 3 minutes in length, followed by 3 minutes for discussion.

616
Molecular characterization of magnetic resonance imaging visible and invisible prostate cancer: Biological insights and therapeutic implications
By: Salami S.¹, Hoelvson D.², Udager A.², Lee M.¹, Curci N.¹, Kaplan J.², George A.¹, Davenport M.³, Tomlins S.², Palapattu G.¹
Institutes: University of Michigan, Dept. of Urology, Ann Arbor, United States of America,¹ University of Michigan, Dept. of Pathology, Ann Arbor, United States of America,² University of Michigan, Dept. of Radiology, Ann Arbor, United States of America

617
A combination of new protein biomarkers reduces unneeded prostate biopsies and improves the detection of prostate cancer: Findings of a recent study
By: Steuber T.¹, Tennstedt P.¹, Macagno A.², Golding B.², Schiess R.², Gillessen S.³
Institutes: Universitätsklinikum Hamburg-Eppendorf, Martini-Clinic, Prostate Cancer Center, Hamburg, Germany,² Proteomedix, Dept. of Biotechnology, Schieren, Switzerland,³ Cantonal Hospital St. Gallen, Dept. of Oncology, St. Gallen, Switzerland

618
Ex vivo metabolic fingerprinting identifies biomarkers predictive of prostate cancer recurrence
By: Braadland P.R.¹, Giskeødegård G.², Guldvik I.J.³, Sandmark E.², Bertilsson H.⁴, Euceda L.², Hansen A.², Grytli H.H.², Katz B.², Svindland A.², Berge V.², Erí L.M.², Nygård S.³, Batthen T.², Tasken K.A.¹, Tessem M-B.²
Institutes: Oslo University Hospital and University of Oslo, Institute of Cancer Research and Institute of Clinical Medicine, Oslo, Norway,¹ Norwegian University of Science and Technology (NTNU), Dept. of Circulation and Medical Imaging, Trondheim, Norway,² Oslo University Hospital, Institute of Cancer Research, Oslo, Norway,³ St.Olav’s Hospital and Norwegian University of Science and Technology (NTNU), Dept. of Urology and Dept. of Circulation and Medical Imaging, Trondheim, Norway,⁴ Oslo University Hospital, Dept. of Pathology, Oslo, Norway,⁵ Oslo University Hospital, Dept. of Urology, Oslo, Norway,⁶ Oslo University Hospital, Institute of Informatics, Oslo, Norway

619
Incidence rates and cancer control outcomes of contemporary primary neuroendocrine prostate cancer: Analysis of SEER database
By: Zaffuto E.¹, Zanaty M.², Bondarenko H.D.², Pompe R.³, Dell'Oglio P.¹, Gandaglia G.¹, Fossati N.¹, Stabile A.¹, Zorn K.C.⁴, Montorsi F.⁵, Briganti A.¹, Karakiewicz P.I.²
Institutes: IRCCS Ospedale San Raffaele, Dept. of Oncology and Urology, URI, Milan, Italy,² University of Montreal Health Center, Cancer Prognostics and Health Outcomes Unit, Montreal, Canada,³ Prostate Cancer Center Hamburg-Eppendorf, Martini-Clinic, Hamburg, Germany,⁴ University of Montreal Health Center, Dept. of Surgery, Section of Urology, Montreal, Canada
620

Identification of tumour-specific biomarkers associated with serum lactate dehydrogenase levels for predicting clinical responses to docetaxel chemotherapy in mCRPC
By: Hiew K.¹, Hart C.A.², Bokobza S.³, Elliott T.⁴, Smith N.³, Brown M.², Clarke N.⁵
Institutes: ¹Salford Royal NHS Foundation Trust, Dept. of Urology, Salford, United Kingdom, ²The University of Manchester, Genito Urinary Cancer Research Group, Manchester, United Kingdom, ³AstraZeneca, R&D, Oncology IMed, Macclesfield, United Kingdom, ⁴Christie Hospital NHS Foundation Trust, Dept. of Oncology, Manchester, United Kingdom, ⁵Christie Hospital NHS Foundation Trust, Dept. of Urology, Manchester, United Kingdom

Elevated preoperative neutrophil–lymphocyte ratio predicts upgrading at radical prostatectomy
By: Özsöv M.¹, Moschini M.¹, Fajkovic H.¹, Soria F.¹, Seitz C.¹, Klatte T.¹, Kilian G.¹, Briganti A.², Karakiewicz P.², Roupret M.², Kramer G.¹, Shariat S.¹
Institutes: ¹Medical University of Vienna, Dept. of Urology, Vienna, Austria, ²Vita-Salute University, San Raffaele Scientific Institute, Urological Research Institute, Milan, Italy, ³University of Montreal, Health Centre, Cancer Prognostics and Health Outcomes Unit, Montreal, Canada, ⁴Pitié-Salpêtrière Hospital, Dept. of Urology, Paris, France

Perioperative search for circulating tumor cells in patients undergoing prostate brachytherapy for clinically nonmetastatic prostate cancer
By: Tsumura H.¹, Satoh T.¹, Tabata K-I.¹, Ishiyama H.², Takenaka K.², Sekiguchi A.², Kitano M.², Hayakawa K.², Iwamura M.¹
Institutes: ¹Kitasato University School of Medicine, Dept. of Urology, Sagamihara, Japan, ²Kitasato University School of Medicine, Dept. of Radiology and Radiation Oncology, Sagamihara, Japan

Purification of urinary extracellular vesicles for uro-oncological biomarker studies using an iodixanol (Optiprep®) density gradient
By: Dhondt B.¹, Vergaufen G.², Van Deun J.², Geeurickx E.², Claeyts T.², Poelaert F.¹, Buelens S.¹, Hendrix A.², De Wever O.², Lumen N.¹
Institutes: ¹Universitair Ziekenhuis Gent, Dept. of Urology, Ghent, Belgium, ²Universitair Ziekenhuis Gent, Dept. of Radiation Oncology and Experimental Cancer Research, Ghent, Belgium

Prostate cancer genomics: Identification of prognostic markers from the bone marrow
By: Bier S.¹, Hennenlotter J.¹, Haerle U.², Karpatsi E.¹, Stenzl A.¹, Todenhoefer T.¹, Schmees C.²
Institutes: ¹Eberhard-Karls-University Tuebingen, Dept. of Urology, Tübingen, Germany, ²Natural and Medical Sciences Institute, Dept. of Tumor Biology, Tübingen, Germany

Increased CCR4-positive regulatory T cells in biopsy specimens of poor prognostic prostate cancer
By: Watanabe M.¹, Kanao K.¹, Suzuki S.², Muramatsu H.¹, Morinaga S.¹, Kajikawa K.¹, Kobayashi I.¹, Nishikawa G.¹, Kato Y.², Nakamura K.¹, Yoshikawa K.², Ueda R.², Sumitomo M.³
Institutes: ¹Aichi Medical University, Dept. of Urology, Nagakute, Japan, ²Aichi Medical University, Dept. of Tumor Immunology, Nagakute, Japan, ³Aichi Medical University, Division of Advanced Research Promotion, Nagakute, Japan

Identification and validation of a novel blood-based biomarker of aggressive prostate cancer
By: Guldvik I.J.¹, Grytli H.², Zuber V.³, Thiede B.⁴, Saatcioglu F.⁴, Gislefoss R.⁵, Kvåle R.⁵, George A.⁶, Gnanapragasam V.⁷, Grönberg H.⁸, Wiklund F.⁹, Neal D.⁹, Mills I.¹⁰, Taskén K. A.¹
Institutes: ¹Oslo University Hospital/Centre For Molecular Medicine Norway, Dept. of Prostate Cancer, Oslo, Norway, ²Oslo University Hospital, Dept. of Urology, Oslo, Norway, ³Centre For Molecular Medicine (Norway), University of Oslo and Oslo University Hospital, Dept. of Prostate Cancer, Oslo, Norway, ⁴University of Oslo, Dept. of Biosciences, Oslo, Norway, ⁵Oslo University Hospital, Dept. of Cancer Registry of Norway, Oslo, Norway, ⁶University of Cambridge, Dept. of Surgery, Cambridge, United Kingdom, ⁷University of Cambridge, Translational Prostate Cancer Group, Cambridge, United Kingdom, ⁸Karolinska Institute, Dept. of Medical Epidemiology and Biostatistics, Stockholm, Sweden, ⁹University of Oxford, Dept. of Surgical Sciences, Oxford, United Kingdom, ¹⁰Queen’s University Belfast/Centre For Molecular Medicine Norway, Dept. of Prostate Cancer UK/Movember Centre of Excellence For Prostate Cancer Research, Centre For Cancer
New protein biomarkers in prostate cancer
S. Füssel, Dresden Johannstadt Nord (DE)
Prostate biopsy: Improving safety, quality and efficacy
Poster Session 47

Sunday, 26 March
14:00 - 15:30

Location: Room Munich, North Hall (Level 1)
Chairs: S. Kruck, Tübingen (DE)
V. Fradet, Quebec (CA)
R.F. Van Velthoven, Brussels (BE)

Aims and objectives of this session
This session will evaluate, interactively discuss and critique recent submitted evidence about prostate cancer biopsy techniques and protocols. An emphasis will be placed on innovative techniques as approaches to increase procedural safety and diagnostic accuracy, and patient experience.

Poster viewing of 20 minutes. Presentations will take place on stage. Standard presentations are 2 minutes in length, followed by 2 minutes for discussion.

627
Comparison of patient experience after transperineal template prostate biopsy with prior transrectal ultrasound guided prostate biopsy
By: Bhatt N., Haroon U., Akram M., Drumm J., Flood H., Giri S.
Institutes: University Hospital Limerick, Dept. of Urology, Limerick, Ireland

628
Complications following extended transperineal template mapping MRI/TRUS fusion biopsy of the prostate – initial experience from 421 procedures
By: Gross O., Kaufmann B., Mortezavi A., Maerzendorfer O., Sulser T., Eberli D.
Institutes: University Hospital Zurich, Dept. of Urology, Zürich, Switzerland

629
Absence of learning curve impact may let MRI-TRUS fusion guided biopsy up for early diagnosis of prostate cancer
By: Lista G.1, Lughezzani G.1, Lazzeri M.1, Bini V.2, Hurle R.1, Buffi N.1, Cardone P.1, Casale P.1, Pasini L.1, Zangediagomico Dezorzi S.1, Peschechera R.1, Bozzini G.2, Maffei D.4, Guazzoni G.4
Institutes: 1Istituto Clinico Humanitas, Irccs, Dept. of Urology, Milan, Italy, Università Degli Studi Di Perugia, Dept. of Medicine, Perugia, Italy, 3Humanitas Mater Domini, Dept. of Urology, Varese, Italy, 4Istituto Clinico Humanitas, Irccs, Humanitas University, Dept. of Urology, Milan, Italy

630
Prospective comparison of a 1.5T fast magnetic resonance imaging (MRI) protocol and the 3T multi-parametric MRI ESUR protocol as triage test for men with an elevated PSA
By: Vannieuwenhove S.2, Thiry S.1, Annet L.2, Butoescu V.1, Lecouvet F.2, Tombal B.1
Institutes: 1Cliniques Universitaires Saints-Luc, Dept. of Urology, Brussels, Belgium, 2Cliniques Universitaires Saint-Luc, Dept. of Radiology, Brussels, Belgium

631
Antimicrobial lubricant reduces rectal bacteria at transrectal prostate biopsy. Results from a large prospective randomized trial
By: Salomon G.2, Prues S.2, Saul J.2, Budäus L.2, Tilki D.2, Graefen M.2, Haferkamp A.1, Boehm K.1
Institutes: 1University Medical Center, Johannes Gutenberg University, Dept. of Urology and Pediatric Urology, Mainz, Germany, 2University Medical Center, Martini-Clinic, Hamburg, Germany

632
Rectal swab cultures and targeted prophylactic antimicrobial regimes do not reduce the risk of sepsis following transrectal prostate biopsy
By: Mulhem W., Hadjipavlou M., Eragat M., Kenny C., Cooke A., Hammadeh M.
Institutes: Queen Elizabeth Hospital, Woolwich, Dept. of Urology, London, United Kingdom

633
A prospective randomized trial of povidone-iodine suppository before transrectal ultrasound
**EAU London 2017**

**Guided prostate biopsy**
**By:** Lee I.J., Lee S., Lee S.E., Chung Y.S., Song B.D., Hong S.K., Lee H., Kim T.J.
**Institutes:** Seoul National University Bundang Hospital, Dept. of Urology, Seongnam-Si, South Korea

**Prevalence and significance of fluoroquinolone-resistant bacteria carriage in patients undergoing trans rectal ultra-sonography prostate biopsy**
**By:** Pourmand G.¹, Hasanzadeh A.², Pourmand M.R.², Alizadeh A.³
**Institutes:** ¹Tehran University of Medical Sciences, Urology Research Center, Tehran, Iran, ²Tehran University of Medical Sciences, Dept. of Pathobiology, Tehran, Iran, ³Tehran University of Medical Sciences, Dept. of Epidemiology and Biostatistics, Tehran, Iran

**Cribiform pattern is highly predictive factor of biochemical recurrence in positive surgical margin patients**
**Institutes:** Pusan National University Hospital, Dept. of Urology, Busan, South Korea

**Role of dynamic contrast-enhanced (DCE) sequences in mpMRI prostate cancer diagnosis evaluated by 5 radiology residents**
**By:** Calleris G.¹, Marra G.¹, Oderda M.¹, Giglio J.², Misischi F.², Cimpoesu P.², Gentile F.², Bergamasco L.³, Molinaro L.³, Frea B.³, Faletti R.³, Fonio P.³, Gontero P.¹
**Institutes:** ¹University of Turin, Dept. of Surgical Sciences, Urology, Turin, Italy, ²University of Turin, Dept. of Surgical Sciences, Radiology Unit, Turin, Italy, ³University of Turin, Dept. of Surgical Sciences, Turin, Italy, ⁴University of Turin, Dept. of Medical Sciences, Pathology Unit, Turin, Italy

**Diagnostic performance of multiparametric MRI in prostate cancer: Per core analysis of three prospective ultrasound/MRI fusion biopsy datasets**
**By:** Ferriero M.¹, Giacobbe A.², Papalia R.², Collura D.², Altobelli E.³, Mastroianni R.³, Tuderti G.¹, Minisola F.¹, Misuraca L.¹, Guaglianone S.¹, Muto G.², Gallucci M.¹, Simone G.¹
**Institutes:** ¹Regina Elena National Cancer Institute, Dept. of Urology, Rome, Italy, ²San Giovanni Bosco Hospital, Dept. of Urology, Turin, Italy, ³Campus Bio-Medico University, Dept. of Urology, Rome, Italy

**Robotic MRI/US fusion transperineal biopsy using the iSR’obot Mona Lisa: Technique, safety and accuracy**
**By:** Patel A.¹, Servian P.¹, Winkler M.¹, Tiong L.C.², Yuen J.³, Ho H.³, Chen K.³, Kruck S.⁴, Grummet J.⁵
**Institutes:** ¹Imperial Healthcare NHS Trust, Dept. of Urology, London, United Kingdom, ²Ziocom Group, Singapore, Singapore, ³Singapore General Hospital, Dept. of Urology, Singapore, Singapore, ⁴University Hospital Tübingen, Dept. of Urology, Tübingen, Germany, ⁵Monash University, Dept. of Urology, Melbourne, Australia
Predictive and prognostic factors in RCC

Poster Session 48

Sunday, 26 March
14:00 - 15:30

Location: Room 7, Capital suite (level 3)

Chairs: A. Mattei, Luzern (CH)
M. Oya, Tokyo (JP)
B. Peyronnet, Rennes (FR)

Aims and objectives of this session
To discuss various predictive and prognostic factors in RCC.

Poster viewing of 20 minutes. Presentations will take place on stage. Standard presentations are 2 minutes in length, followed by 2 minutes for discussion.

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Predictive factor of lymph node metastases in patients with non-metastatic renal cell carcinoma; multi-center study
Institutes: 1Incheon St. Mary's Hospital, College of Medicine, The Catholic University of Korea, Seoul, Korea., Dept. of Urology, Incheon, South Korea, 2St. Paul's Hospital, College of Medicine, The Catholic University of Korea, Seoul, Korea., Dept. of Urology, Seoul, South Korea, 3Bucheon St. Mary's Hospital, College of Medicine, The Catholic University of Korea, Bucheon, Korea., Dept. of Urology, Bucheon, South Korea, 4Seoul National University College of Medicine, Seoul, Korea, Dept. of Urology, Seoul, South Korea, 5Chungbuk National University College of Medicine, Cheongju, Korea, Dept. of Urology, Cheongju, South Korea, 6Korea University School of Medicine, Seoul, Korea, Dept. of Urology, Seoul, South Korea, 7Seoul National University Bundang Hospital, Seongnam, Korea, Dept. of Urology, Seongnam, South Korea, 8College of Medicine, The Catholic University of Korea, Seoul, Korea, Dept. of Urology, Seoul, South Korea

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Long-term assessment of mortality patterns after surgical treatment for non-metastatic kidney cancer: A competing risk analysis
By: Larcher A.1, Muttin F.1, Nini A.1, Trevisani F.1, Ripa F.1, Cianflone F.1, Carenzi C.1, Dell'Oglio P.1, Rigatti P.2, Dehó F.1, Montorsì F.1, Capitanio U.1, Bertini R.1
Institutes: 1IRCCS Ospedale San Raffaele, Urological Research Institute, Division of Oncology, Unit of Urology, Milan, Italy, 2Scientific Institute Istituto Auxologico Italiano, Department of Urology, Advanced Urotechnology Center, Milan, Italy

642
External validation of the Mayo Clinic Stage, Size, Grade, and Necrosis score in patients with renal cell carcinoma and venous tumor thrombus
Institutes: 1Emory University School of Medicine, Dept. of Urology, Atlanta, United States of America, 2University of California, Dept. of Epidemiology and Biostatistics, San Francisco, United States of America, 3University Vita-Salute, Dept. of Urology, Milan, Italy, 4Universidad Autónoma De Madrid, Dept. of Urology, Madrid, Spain, 5University of Miami, Dept. of Urology, Miami, United States of America, 6University of Southern California, Dept. of Urology, Los Angeles, United States of America, 7University of California-Davis, Dept. of Urology, Sacramento, United States of America, 8University of Turin, Dept. of Urology, Turin, Italy, 9University of Frankfurt, Dept. of Urology, Frankfurt, Germany, 10University of Heidelberg, Dept. of Urology, Heidelberg, Germany, 11New York University School of Medicine, Dept. of Urology, New York, United States of America, 12
The prevalence of renal cancer detected by abdominal ultrasonography in asymptomatic individuals: A systematic review and meta-analysis to inform the case for a screening study

**By:** Rossi S., Hsu R., Blick C., Goh V., Hanbury D., Nathan P., Nicol D., Fleming S., Sweeting M., Watson C., Wilson E., Stewart G.

**Institutes:** Addenbrooke’s Hospital, Dept. of Urology, Cambridge, United Kingdom, Royal Berkshire Hospital, Dept. of Urology, Reading, United Kingdom, Guy’s & St Thomas’ Hospitals NHS Trust, Dept. of Radiology, London, United Kingdom, Lister Hospital, Dept. of Urology, Stevenage, United Kingdom, Mount Vernon Cancer Centre, Dept. of Oncology, Northwood, United Kingdom, Royal Marsden Hospital, Dept. of Urology, London, United Kingdom, Ninewells Hospital, Centre for Forensic and Legal Medicine, Dundee, United Kingdom, University of Cambridge, Dept. of Public Health and Primary Care, Cambridge, United Kingdom, National Cancer Research Institute, Renal and Bladder Cancer Clinical Studies Group, London, United Kingdom, University of Cambridge, Cambridge Centre for Health Services Research, Cambridge, United Kingdom

Predictive and prognostic effect of inflammatory lymphadenopathies in renal cell carcinoma


**Institutes:** IRCCS Ospedale San Raffaele, Urological Research Institute, Dept. of Oncology and Urology, Milan, Italy, IRCCS Ospedale San Raffaele, Dept. of Radiology, Milan, Italy, Humanitas Clinical and Research Centre, Dept. of Urology, Milan, Italy

Prognostic significance of Fuhrman grade and age for cancer-specific and overall survival in patients with papillary renal cell carcinoma: Results of an international multi-institutional study on 2189 patients


**Institutes:** University Hospital Mainz, Dept. of Urology, Mainz, Germany, University Hospital Barcelona, Dept. of Urology, Barcelona, Spain, Medical University of Vienna, Dept. of Urology, Vienna, Austria, Instituto Nacional De Cancerologia, Dept. of Urology, Mexico, Mexico, Carl-Thiem–Klinikum Cottbus, Dept. of Urology, Cottbus, Germany, Vita-Salute San Raffaele University, Dept. of Urology, Milan, Italy, University of Muenster Medical Center, Dept. of Urology, Muenster, Germany, Hospital Bad Saarow, Dept. of Urology, Bad Saarow, Germany, Julius–Maximilians–University Medical Centre of Würzburg, Dept. of Urology, Würzburg, Germany, University Hospital Mannheim, Dept. of Urology, Mannheim, Germany, University Hospital Heidelberg, Dept. of Urology, Heidelberg, Germany, University Hospital Carl Gustav Carus, Dept. of Urology, Dresden, Germany, Fundeni Clinical Institute, Centre of Urological Surgery, Dialysis and Renal Transplantation, Bucharest, Romania, Charles University In Pilsen, Dept. of Urology, Pilsen, Czech Republic, Medical University Graz, Dept. of Urology, Graz, Austria, Klinikum St. Elisabeth Straubing, Dept. of Urology, Straubing, Germany, Ludwig–Maximilians–University, Dept. of Urology, Munich, Germany

Outcome of papillary versus clear cell renal cell carcinoma varies significantly in non-metastatic disease

**By:** Wagener N., Edelmann D., Benner A., Huck N., Hutterer G., Zigeuner R., Borgmann H., Haferkamp A., Pahernik S., Wolff I., Krabbe L-M., Herrmann E., Vergho D., Mirvald C., Surcel
Non-metastatic renal cell carcinoma follow-up, recurrences and outcomes – a RECUR database analysis

By: Dabestani S.¹, Beisland C.², Gudmundsson E.³, Stewart G.⁴, Lam T.⁵, Gietzmann W.⁶, Zakikhani P.⁶, Marconi L.⁷, Williams S.⁸, Powles T.⁹, Van Werkhoven E.⁹, Meijer R.P.¹², Ljungberg B.¹¹, Bex A.¹⁰

Institutes: Lund University, Dept. of Clinical Sciences, Malmö, Sweden, ²Haukeland University Hospital, Dept. of Urology, Bergen, Norway, ³Landspitali University Hospital, Dept. of Urology, Reykjavik, Iceland, ⁴University of Cambridge, Academic Urology Group, Cambridge, United Kingdom, ⁵University of Aberdeen, Academic Urology Unit, Aberdeen, United Kingdom, ⁶Aberdeen Royal Infirmary, Dept. of Urology, Aberdeen, United Kingdom, ⁷Coimbra University Hospital, Dept. of Urology, Coimbra, Portugal, ⁸Queen Mary University of London, Barts Cancer Institute, London, United Kingdom, ⁹The Netherlands Cancer Institute, Dept. of Bioinformatics and Statistics, Amsterdam, The Netherlands, ¹⁰The Netherlands Cancer Institute, Division of Surgical Oncology, Department of Urology, Amsterdam, The Netherlands, ¹¹Umeå University, Dept. of Surgical and Perioperative Sciences, Umeå, Sweden, ¹²University Medical Center Utrecht, Dept. of Urology, Utrecht, The Netherlands, ¹³University of Edinburgh, Dept. of Urology, Edinburgh, United Kingdom

Contemporary incidence and epidemiologic trends of brain metastases at renal cell carcinoma diagnosis

By: Gild P.¹, Von Landenberg N.¹, Sun M.¹, Develasco G.², Brastianos P.³, Menon M.⁴, Fisch M.⁵, Chun F.⁵, Nguyen P.⁵, Trinh Q-D.⁵, Choueiri T.²

Institutes: Brigham and Women’s Hospital, Center For Surgery and Public Health and Division of Urologic Surgery, Boston, United States of America, ¹Dana-Farber Cancer Institute, Dept. of Medical Oncology, Boston, United States of America, ²Dana-Farber Cancer Institute, Dept. of Cancer Biology, Boston, United States of America, ³Henry Ford Hospital, VUH Center For Outcomes Research, Analytics and Evaluation, Vattikuti Urology Institute, Detroit, United States of America, ⁴University Medical Center Hamburg-Eppendorf, Dept. of Urology, Hamburg, Germany, ⁵Dana-Farber Cancer Institute and Brigham and Women’s Hospital, Dept. of Medical Oncology, Boston, United States of America

Utilization and outcomes of T2 partial nephrectomy: A US population based analysis of the national cancer database

By: Hamilton Z., Fero K., Bloch A., Field C., Han D., Derweesh I.

Institutes: Moores Cancer Center, Dept. of Urology, La Jolla, United States of America

Contact with renal sinus is a significant risk factor for metastasis in pT1 clear cell renal cell
carcinoma
By: Izumi K.¹, Saito K.¹, Nakayama T.¹, Fukuda S.², Fukushima H.³, Uehara S.⁴, Koga F.³, Yonese J.⁴, Kageyama Y.², Kihara K.⁵, Fujii Y.⁵
Institutes: ¹Tokyo Medical And Dental Graduate School, Dept. of Urology, Tokyo, Japan, ²Saitama Cancer Center, Dept. of Urology, Saitama, Japan, ³Tokyo Metropolitan Cancer and Infectious Diseases Center Komagome Hospital, Dept. of Urology, Tokyo, Japan, ⁴Cancer Institute Hospital, Dept. of Urology, Tokyo, Japan, ⁵Tokyo Medical and Dental Graduate School, Dept. of Urology, Tokyo, Japan

Utility of chest x-ray in follow-up of pT1 renal cell carcinoma
By: Rizzo M.¹, Umari P.¹, Pavan N.¹, Liguori G.¹, Verzotti E.¹, Cancellieri L.¹, Mottrie A.², Minervini A.³, Trombetta C.³
Institutes: ¹Cattinara Hospital; University of Trieste, Dept. of Urology, Trieste, Italy, ²Onze-Lieve-Vrouzewziekenhuis, Dept. of Urology, Aalst, Belgium, ³University Hospital Careggi, Dept. of Urology, Florence, Italy

Organ confined renal cell carcinoma - are the current guidelines sufficient?
By: Frees S.¹, Kamal M.¹, Nestler S.², Bidnur S.¹, Neisius A.¹, Jaeger W.¹, Thomas C.¹, Thüroff J.⁴, Roos F.¹
Institutes: ¹University Medical Center, Dept. of Urology, Mainz, Germany, ²Hochtaunus Hospital Bad Homburg, Dept. of Urology, Bad Homburg, Germany, ³Vancouver Prostate Center, Dept. of Urology, Vancouver, Canada, ⁴University Medical Center, Dept. of Urology, Mannheim, Germany

Impact of hospital volume and surgeon volume on robot-assisted partial nephrectomy results: A multicenter study
By: Tondut L.¹, Peyronnet B.¹, Bernhard J-C.², Vaessen C.³, Doumerc N.⁴, Sebe P.⁵, Pradere B.⁶, Guillonneau B.⁷, Nouhaud F.X.⁷, Brichart N.⁸, Alimi Q.¹, Beauval J-B.⁴, Rammal A.⁹, De La Taille A.¹⁰, Baumert H.¹¹, Group S.¹², Bruyere F.⁵, Roupret M.³, Mejean A.¹³, Bensalah K.¹

Hospital activity and costs following partial nephrectomy: A comparison of surgical modalities using UK data
By: Camp C.¹, O'Hara J.¹, Hughes D.¹, Adshead J.²
Institutes: ¹Hcd Economics, Dept. of Economics, Daresbury, United Kingdom, ²Hertfordshire and Bedfordshire Urological Cancer Centre, Lister Hospital, Dept. of Urology, Stevenage, United Kingdom

Scientific Programme
**ESU/ESUT Hands-on Training Course in Transurethral therapy of LUTS - Bipolar TURP**

**HOT45**

**Location:** Room Europe, Exhibition Hall (Level 1)

**Chair:** S.M. Haensel, Rotterdam (NL)

**Aims and objectives of this session**

- The participants will be able to interact with tutors and gain valuable insights into the tips and tricks of Bipolar TURP

**Course description:**

The European School of Urology (ESU) and the EAU Section of Uro-Technology (ESUT) offer an intensive hands-on training course with different models focusing on the endoscopic management of LUTS. The delegates will be taken through a sequential programme of Bipolar TURP using normal endoscopic instruments in different models. A video demonstrating the different steps and tasks of the procedures will be presented and afterwards the delegates will be instructed according to their level of experience in small teams at the models. Finally, all remaining questions can be answered and discussed with all tutors including the demonstration of tips and tricks.

**Target audience:** Beneficial for novice and experienced surgeons wishing to learn more about the procedure

V. Eret, Plzeň (CZ)
M.C. Klitsch, Vienna (AT)
C.M. Cracco, Torino (IT)
Aims and objectives of this session
At the end of the course, the participants understand the advantages, handling and limitations of MRI Ultrasound fusion biopsies.

Course description
MRI is increasingly used in patients undergoing prostate biopsies. Different MRI Ultrasound fusion devices allow integrating the MRI information into the daily clinical workflow. The course will provide an overview on MRI reading, technical basics and different prostate biopsy approaches. Technical considerations, the transrectal or transperineal approach will be critically reviewed and discussed. During the second half of the course, the participants are able to try out 5 different Fusion biopsy machines in small groups, changing every 10 min.

Target audience: Urologists, interested in the diagnostic ability of MRI use for transrectal and perineal prostate biopsies

S. Boxler, Berne (CH)
H. Cash, Berlin (DE)
J.P. Radtke, Heidelberg (DE)
A. Rannikko, Helsinki (FI)
M. Winkler, Richmond (GB)
F. Zatura, Olomovc (CZ)
ESU Hands-on Training Course in Non-technical skills
HOT34

Location: Hands-on Training Area, Exhibition Hall (Level 1)

Chairs: K. Ahmed, London (GB)
M. Shabbir, Wembley Middlesex (GB)

Aims and objectives of this session
This course aims to introduce the concept of non-technical skills and provide an interactive “hands-on” environment to practicing urologists and residents-in-training, in the hope of improving and raising self-awareness for everyday operating room practice.

Course description:
The operating room is a complex and highly stressful environment that requires interaction between a large team to achieve successful outcomes for the patient. This requires not only effective procedure-specific technical skills, but also additionally a range of non-technical skills. The importance of non-technical skills is often overlooked but they are unfortunately a major cause of surgical error. Like technical skills, which are acquired over many years of practice and training, non-technical skills are not innate traits and must also be developed through training and experience. This course will serve to introduce practicing urologists to the concept of non-technical skills using an interactive full immersion simulation environment, developed by Kneebone et al. (Imperial College London), whilst undertaking common scenarios in urolithiasis. Participants will be evaluated by experts in surgical education and provided individual feedback with view for further self-improvement.

Supporting faculty:
H. Aya, London (GB)
A. Aydin, London (GB)
O. Brunckhorst, London (GB)
F. Dar, London (GB)
M. Husnain Iqbal, London (GB)
J. Moody, London (GB)
N. Raison, London (GB)

Target audience:
All urological surgeons and residents in training
Aims and objectives of this session
The European training in basic laparoscopic urological skills (E-BLUS) is a programme offered to residents and urologists who want to improve the basic skills in laparoscopy. It is a unique opportunity to train with international experts in laparoscopy. The E-BLUS programme includes:

- Hands-on Training (HOT) courses of different levels carried out under the guidance of experienced tutors
- A set of training-box exercises developed and validated by the Dutch project Training in Urology (TiU) to train basic skills needed in urological laparoscopy
- E-BLUS examination and certification
- An online theoretical course

K. Ahmed, London (GB)
T. Kalogeropoulos, Athens (GR)
H. Langenhuijsen, Nijmegen (NL)
P. Macek, Prague (CZ)
S. Barmoshe, Brussels (BE)
G. Pini, Milano (IT)
Advanced course on upper tract laparoscopy (kidney, UPJ, adrenal and stones)
ESU Course 28

Sunday, 26 March
14:30 - 17:30

Location: Room 10, Capital suite (level 3)
Chair: G. Janetschek, Salzburg (AT)

Aims and objectives of this session
Surgery of the kidney and adrenal gland by means of laparoscopy is standard of care.
Approach: Transperitoneal, retroperitoneoscopy, posterior approach, direct approach through the mesentery of the colon. Each has specific advantages.
Procedures: Virtually all ablative procedures concerning the adrenal, kidney and ureter, but also reconstruction. Rarely but effectively stone surgery.
Presentation: Power-point, interactive, videos, analysis of complications.

- For surgery of the kidney and adrenal, the da Vinci robot is often overkill. Therefore standard laparoscopy should be mastered in addition.
- Choice of the perfect approach makes the respective surgery easier and safer.
- Standard laparoscopy is greatly facilitated by 3D vision.
- When mastering both laparoscopic surgical skills and the surgical concept of the respective procedure complications can either be avoided or managed appropriately.

14:30 - 17:30
Approach: Transperitoneal, retroperitoneoscopy
G. Janetschek, Salzburg (AT)

14:30 - 17:30
Nephrectomy, nephroureterectomy
A. Alcaraz, Barcelona (ES)

14:30 - 17:30
Pyeloplasty: Indication – technique – problems
H. Baumert, Paris (FR)

14:30 - 17:30
Stone surgery
A. Alcaraz, Barcelona (ES)

14:30 - 17:30
Adrenalectomy: Total and partial
H. Baumert, Paris (FR)

14:30 - 17:30
Complication management
G. Janetschek, Salzburg (AT)

14:30 - 17:30
Questions and discussion
A. Alcaraz, Barcelona (ES)
H. Baumert, Paris (FR)
G. Janetschek, Salzburg (AT)
Aims and objectives of this session
The aims and objectives of this course is to provide a complete overview of instruments, endoscopes, indications, technique and special tips and tricks concerning Retrograde IntraRenal Surgery (RIRS) using flexible ureterorenoscopes and Holmium YAG lasers. At the end the participants will know the equipment and the technique to perform flexible ureterorenoscopy in the best conditions.
• To learn about equipment
• To learn about technique and indications
• To learn how to use an Holmium Laser
• To learn tips and tricks for special circumstances

Welcome message and introduction of the course
O. Traxer, Paris (FR)

Instrumentation: Endoscopes
O. Traxer, Paris (FR)

Instrumentation: Laser and lithotripsy devices
M. Grasso, New York (US)

Instrumentation: Disposable (wires, retrieving devices, UAS, irrigation devices and others)
P.J.S. Osther, Fredericia (DK)

Technique: Stones
O. Traxer, Paris (FR)

Technique: Urothelial tumours and strictures
M. Grasso, New York (US)

Tips and tricks and special circumstances
O. Traxer, Paris (FR)

Indications (guidelines) and clinical cases
P.J.S. Osther, Fredericia (DK)

Conclusions
O. Traxer, Paris (FR)
Penile diseases
ESU Course 30

Sunday, 26 March
14:30 - 17:30

Location: Room 12, Capital suite (level 3)
Chair: S.S. Minhas, London (GB)

Aims and objectives of this session
This novel course will give a state of the art update on the variety of penile diseases that Urologists will encounter in everyday clinical practice. The faculty consists of a group of internationally renowned experts in this field.
A spectrum of pathologies can affect the penis including benign disorders to cancers. There will be particular focus on interactive case based discussions highlighting the pit falls and controversies in management of penile diseases;

• The aetiology, diagnosis and medical management of the common penile diseases including inflammatory conditions of the penis.
• The medical and surgical management of HPV, BXO and pre-malignant conditions of the penis.
• The medical and surgical management of Peyronie's disease
• The course will also deal with the surgical management of these diseases including the surgical indications and surgical techniques used in penile reconstructive surgery.
• The management of penile carcinoma including the aetiopathogenesis, techniques/outcome of organ sparing surgery and surgical management of advanced disease including lymphadenectomy will be discussed.

14:30 - 17:30
Peyronie's disease
S.S. Minhas, London (GB)

14:30 - 17:30
Penile dermatology for the urologist
D. Hawkins

14:30 - 17:30
Surgical management of penile diseases
S.S. Minhas, London (GB)

14:30 - 17:30
HPV, premalignant lesions and penile cancer
S.S. Minhas, London (GB)

14:30 - 17:30
Management of penile cancer and lymph nodes
C. Protzel, Rostock (DE)
Aims and objectives of this session
The decision process towards surgery/active surveillance or radiation is a constantly evolving matter that requires a multitude of various information and inputs. In localised disease old habits have been jeopardised and surgical management seems to be fused with active surveillance in an increasing number of patients with good prognosticators. This course will summarise the decision process and indications for patients with clinically localised disease and help select the optimal treatment based on most recent oncological and functional data.

In locally advanced disease, growing evidence supports the notion of radical surgery to improve outcome. US and European data endorse this policy in a selected group of patients. New radiation protocols and strategies combined with hormone therapy offer as much adequate alternatives. In the second part of this course, controversies regarding the optimal management of locally advanced prostate cancer patients will be discussed and clear recommendations made to facilitate patient counselling and treatment.
Aims and objectives of this session
Clinicians involved in the care of female patients should know vaginal surgery. A specific goal of the faculty is to employ scientific principles, published information and clinical experience to describe and position newly developed techniques in current management of urinary incontinence. Special attention will be given to new techniques that use synthetics tapes in SUI surgery. This course will also cover the management of complications of surgery for stress incontinence and mesh complications. Treatment of recurrent urinary incontinence and incontinence with mixed symptoms also will be under discussion. Management of vesicovaginal fistulas, urethral diverticulae and some rare conditions will be shown both during podium and video presentations. An interactive course means active participation by the audience and participants are encouraged to prepare and present interesting and challenging clinical cases for consultation by the faculty. After this course, participants should know how to apply the newest technique in patients with stress incontinence, urethral loss and iatrogenic injuries of lower urinary tract. This course will facilitate the decision making process for those who are just starting their careers and for advanced surgeons.

14:30 - 17:30
Introduction: Female Urology – improving functional outcome
D. Pushkar, Moscow (RU)

14:30 - 17:30
Stress urinary incontinence – approaching patients' expectations
T. J. Greenwell, London (GB)

14:30 - 17:30
Obstructive slings: What to do?
D. Pushkar, Moscow (RU)
K-D. Sievert, Salzburg (AT)

14:30 - 17:30
Autologous sling in 2016
T. J. Greenwell, London (GB)

14:30 - 17:30
Management of mesh complications
T. J. Greenwell, London (GB)
D. Pushkar, Moscow (RU)
K-D. Sievert, Salzburg (AT)

14:30 - 17:30
Urethral diverticulae surgery – tips and tricks
T. J. Greenwell, London (GB)

14:30 - 17:30
Urethral loss in females
D. Pushkar, Moscow (RU)

14:30 - 17:30
Vesico-vaginal fistulae repair from simple to complicated
D. Pushkar, Moscow (RU)

14:30 - 17:30
New slings for SUI – do you need one?
T. J. Greenwell, London (GB)
K-D. Sievert, Salzburg (AT)
Conclusions
Prostate cancer imaging: When and how to use it
ESU Course 33

Location: Room 16, Capital suite (level 3)
Chair: J. Walz, Marseille (FR)

Aims and objectives of this session
Recently new imaging technologies have been developed to improve the diagnosis and management of prostate cancer. These are multiparametric MRI, choline PET and new ultrasound based technologies.
The course’s aim is to provide:
• An overview on the currently available imaging tools for prostate cancer
• Practical information about their use
• A critical assessment of their clinical performance and their limitations.

14:30 - 17:30
Introduction and objective of course
J. Walz, Marseille (FR)

14:30 - 17:30
Diagnosis of prostate cancer:

14:30 - 17:30
Standardization, acquisition and reporting of multiparametric MRI
B.M. Carey, Leeds (GB)

14:30 - 17:30
Reading of a prostate MRI and use of MRI for diagnosis of prostate cancer
B.M. Carey, Leeds (GB)

14:30 - 17:30
MRI guided biopsy and image fusion (mp MRI and Ultrasound)
J. Walz, Marseille (FR)

14:30 - 17:30
What are possible alternatives to multiparametric MRI?
J. Walz, Marseille (FR)

14:30 - 17:30
Staging of prostate cancer:

14:30 - 17:30
Staging with CT, MRI and bone scintigraphy
G. Villeirs, Ghent (BE)

14:30 - 17:30
MRI in local staging of prostate cancer
G. Villeirs, Ghent (BE)

14:30 - 17:30
Recurrent disease:

14:30 - 17:30
Use of PET in the management of prostate cancer (initial staging and recurrence)
J. Walz, Marseille (FR)

14:30 - 17:30
MRI in detection of locally recurrent prostate cancer
G. Villeirs, Ghent (BE)

14:30 - 17:30
When to do imaging of the prostate? Case discussion and current practical questions
EAU London 2017

B.M. Carey, Leeds (GB)
G. Villeirs, Ghent (BE)
J. Walz, Marseille (FR)

14:30 - 17:30 Closure and evaluation
Nerve-sparing cystectomy and orthotopic bladder substitution - Surgical tricks and management of complications

ESU Course 34

**Location:** Room 17, Capital suite (level 3)

**Chair:** A. Stenzl, Tübingen (DE)

**Aims and objectives of this session**

This course has over many years dealt with the technique of urethra- and nerve-sparing cystectomy and subsequent orthotopic bladder substitution in male and female patients. It will deal with indications, technique, possible complications and their prevention. Urologists with a vast experience in cystectomy and urinary diversion will present technical tips using videoclips, results in the literature as well as own data.

- Technique of nerve-sparing cystectomy
- Optimization of sphincter preservation for optimal continence results
- Technical tips and tricks in orthotopic neobladder surgery
- What to observe in male and female patients

14:30 - 17:30

**Preoperative investigations and selection of patients for orthotopic bladder substitution**

J.E. Gschwend, München (DE)

14:30 - 17:30

**Arguments for nerve-sparing cystectomy with orthotopic bladder substitution**

A. Stenzl, Tuebingen (DE)

14:30 - 17:30

**How to do a nerve-sparing cystectomy in male patients**

H. Abol-Enein, Mansoura (EG)

14:30 - 17:30

**Surgical tricks to avoid complications with orthotopic bladder substitution**

J.E. Gschwend, München (DE)

14:30 - 17:30

**Video on how to obtain good functional results in female patients**

A. Stenzl, Tuebingen (DE)

14:30 - 17:30

**Tips and Tricks: Male/female orthotopic urinary diversion**

H. Abol-Enein, Mansoura (EG)

14:30 - 17:30

**How to treat complications during follow-up**

J.E. Gschwend, München (DE)
ESU/ERUS Hands-on Training Course in Robotic surgery - advanced virtual robotic procedural training

HOT28

**Location:** Room Asia, Exhibition Hall (Level 1)

**Chair:** C. Wagner, Gronau (DE)

**Sunday, 26 March**

**15:30 - 17:00**

**Aims and objectives of this session**

- You will improve your laparoscopic skills such as advanced suturing and emergency vessel repair.

**Course description**

This course is dedicated to intermediate laparoscopic skills, with main focus on suturing techniques. Intermediate skills have been selected with an experts' survey, between the most important tasks to achieve before approaching full laparoscopic procedures. Experienced laparoscopic-tutors selected by ESU and ESUT will guide you to master special knot-tying techniques, laparoscopic anastomoses and even a Major Vessel Injury repair. Tips and tricks can be answered and discussed with all tutors during the session. The intermediate laparoscopic training sessions require a full mastery of basic skills: for this reason, E-BLUS certification is required for subscription.

**Target audience:** Urologist with an E-BLUS certificate that want to learn more about laparoscopy

A.E. Canda, Ankara (TR)
Aims and objectives of this session

The European training in basic laparoscopic urological skills (E-BLUS) is a programme offered to residents and urologists who want to improve the basic skills in laparoscopy. It is a unique opportunity to train with international experts in laparoscopy. The E-BLUS programme includes:

- Hands-on Training (HOT) courses of different levels carried out under the guidance of experienced tutors
- A set of training-box exercises developed and validated by the Dutch project Training in Urology (TiU) to train basic skills needed in urological laparoscopy
- E-BLUS examination and certification
- An online theoretical course

K. Ahmed, London (GB)
C.S. Biyani, Leeds (GB)
T. Kalogeropoulos, Athens (GR)
H. Langenhuijsen, Nijmegen (NL)
S. Barmoshe, Brussels (BE)
G. Pini, Milano (IT)
Improving outcomes in minimally invasive partial nephrectomy
Video Session 08

Sunday, 26 March
15:45 - 17:15

Location: eURO Auditorium (Level 0)
Chairs: To be confirmed
N. Barber, Camberley (GB)
C. Llorente, Madrid (ES)

Aims and objectives of this session
This session will feature up-to-date reports and demonstrations of advances and variation in techniques employed in performing partial nephrectomy that aim to improve the trifecta of outcome – that is, warm ischaemia time, blood loss and rate of positive margins

All presentations have a maximum length of 8 minutes, followed by 4 minutes of discussion.

V58
Purely off-clamp robotic partial nephrectomy
By: Simone G., Misuraca L., Tuderti G., Minisola F., Ferriero M., Romeo G., Costantini M., Guaglianone S., Gallucci M.
Institutes: Regina Elena National Cancer Institute, Dept. of Urology, Rome, Italy

V59
3D live surgical guidance for robot-assisted tumorectomy under superselective clamping
By: Vuong N-S., Michiels C., Cornelis F., Grassano Y., Allenet C., Parentic G., Robert G., Capon G., Bensadoun H., Ferrière J-M., Bernhard J-C.
Institutes: Bordeaux University Hospital, Dept. of Urology and Kidney Transplant, Bordeaux, France

V60
Image guidance during robot-assisted partial nephrectomy: Results from a high volume centre
By: De Groote R.1, De Naeyer G.1, Fossati N.2, Umari P.3, Heinze A.4, Goossens M.5, De Coninck V.6, Schatteman P.1, D’Hondt F.1, Mottrie A.1
Institutes: OLV Ziekenhuis Aalst-Asse-Ninove, Dept. of Urology, Aalst, Belgium; 2URI; IRCCS Ospedale San Raffaele, Dept. of Oncology / Unit of Urology, Milan, Italy; 3University of Trieste, Ospedali Riuniti Di Trieste, Dept. of Urology, Trieste, Italy; 4Hospital Regional De Alta Especialidad De La Peninsula De Yucatat, Dept. of Urology, Merida, Mexico

V61
Robotic assisted laparoscopic tumor enucleation with artery hypothermic perfusion combined with neoadjuvant target therapy for a multifocal solitary kidney cancer
By: Zhao X., Guo H.
Institutes: Nanjing Drum Tower Hospital, Medical School of Nanjing University, Dept. of Urology, Nanjing, China

V62
Zero-ischemia partial nephrectomy using near-infrared fluorescence: Examples of complex tumors
Institutes: CHU de Grenoble, Dept. of Urology, Grenoble, France

V63
Salvage robot-assisted tumorectomy on a solitary kidney after cryoablation failure
By: Allenet C.1, Cornelis F.2, Michiels C.1, Deslandes M.3, Rouffilange J.1, Capon G.1, Robert G.1, Pasticier G.1, Bensadoun H.1, Grenier N.1, Ferriere J-M.1, Bernhard J-C.1
Institutes: CHU Bordeaux, Dept. of Urology, Bordeaux, France; 2CHU Bordeaux, Dept. of Radiology, Bordeaux, France

V64
Combined robot-assisted salvage partial nephrectomy and cryotherapy after radiofrequency failure on a solitary kidney
By: Michiels C., Grenier N., Grassano Y., Cornelis F., Capon G., Vuong N-S., Susperregui J., Robert G., Pasticier G., Bensadoun H., Ferriere J-M., Bernhard J-C.

Institutes: Bordeaux University Hospital, Dept. of Urology, Bordeaux, France, Bordeaux University Hospital, Dept. of Radiology, Bordeaux, France

Robot assisted partial nephrectomy in a horse-shoe kidney with selective clamping guided by firefly fluorescence imaging

By: Volpe A., Billia M., Bondonno G., Zacchero M., De Angelis P., Romani M.L., Terrone C.

Institutes: Maggiore Della Carita Hospital - University of Eastern Piedmont, Dept. of Urology, Novara, Italy, IRCCS Policlinico San Martino - University of Genoa, Dept. of Urology, Genova, Italy
Non-muscle invasive bladder cancer: New standards in endoscopic management and adjuvant instillations

Poster Session 49

Location: Room Madrid, North Hall (Level 1)

Chairs: M. Babjuk, Prague 5 (CZ)
M. Brausi, Modena (IT)
M. Burger, Regensburg (DE)

Aims and objectives of this session
Non-muscle invasive bladder cancer (NMIBC) comprises a heterogeneous group in which tumour number, size, grade and pathological stage (pT) are important prognostic factors related to the risk of recurrence, progression and survival. Transurethral resection of bladder tumour (TURBT) is the reference treatment of NMIBC. The accepted standard for “correct” TURBT is complete macroscopic tumour clearance with specimens of the tumour base and resection border sent separately. A key feature of the pathology report is the presence and/or invasion of lamina propria or muscularis propria, the latter being dependent upon the presence of detrusor muscle (DM) in the TURBT specimens. It is now well established that a “correct” TURBT positively influences recurrence and progression. This session aims to provide an overview of new techniques available to improve the quality of TURBT and the deliverance of adjuvant bladder instillations.

Poster viewing of 20 minutes. Presentations will take place on stage. Standard presentations are 2 minutes in length, followed by 2 minutes for discussion.

Active surveillance for non-muscle invasive bladder cancer (NMIBC): Result from bladder cancer Italian active surveillance (BIAS) project
By: Hurle R.1, Lazzeri M.1, Saita A.1, Forni G.1, Buffi N.1, Casale P.1, Lughezzani G.1, Peschechera R.1, Pasini L.1, Zandegiacomo S.1, Benetti A.1, Lista G.1, Maffei D.1, Cardone P.1, Colombo P.2, Guazzoni G.1
Institutes: 1Istituto Clinico Humanitas, Dept. of Urology, Rozzano, Italy, 2Istituto Clinico Humanitas, Dept. of Pathology, Rozzano, Italy

Can the use of narrow-band imaging (NBI) reduce persistent bladder cancer rate during white-light classic trans-urethral resection of tumor (WLcTURBT)? A preliminary single-center experience in a large case series
By: Giulianelli R.2, Falavolti C.1, Gentile B.C.2, Mirabile G.2, Tariciotti P.2, Alanesi L.2, Buscarini M.3
Institutes: Villa Betania Hospital, Rome, Italy, 2Villa Claudia Clinic, Dept. of Urology, Rome, Italy, 3University Campus Bio-Medico, Dept. of Urology, Rome, Italy

Monopolar versus bipolar transurethral resection for primary non-muscle invasive bladder cancer
By: Liem E.1, McCormack M.2, Chan E.3, Matsui Y.4, Geavlete P.5, Choi Y.6, De Reijke T.1, Farahat Y.7, Inman B.8, De La Rosette J.1, Naito S.9
Institutes: 1Academic Medical Center, Dept. of Urology, Amsterdam, The Netherlands, 2Centre Hospitalier De L’Universite De Montreal, Dept. of Urology, Montreal, Canada, 3Chinese University of Hong Kong, HKSAR, Dept. of Surgery, Hong Kong, China, 4Kyoto University, Dept. of Urology, Kyoto, Japan, 5Saint John Emergency Clinical Hospital, Dept. of Urology, Bucharest, Romania, 6Yonsei University College of Medicine, Dept. of Urology, Seoul, South Korea, 7Sheikh Khalifa General Hospital, Dept. of Urology, Umm Al Quwain, United Arab Emirates, 8Duke University Medical Center, Dept. of Urology, Durham, United States of America, 9Harasanshin Hospital, Dept. of Urology, Fukuoka, Japan

Scientific Programme
Transurethral en-bloc hydrodissection for non-muscle invasive bladder cancer: Results of a randomized controlled trial
By: Gakis G.1, Karl A.2, Bertz S.3, Burger M.4, Fritsche H-M.4, Hartmann A.3, Jokisch F.2, Kempenstetten C.5, Miller K.6, Mundhenk J.6, Schneevoigt B-S.2, Schubert T.1, Schwentner C.6, Wullich B.7, Stenzl A.1
Institutes: Eberhard-Karls University, Dept. of Urology, Tübingen, Germany, Ludwig-Maximilians University, Dept. of Urology, Munich, Germany, Friedrich-Alexander University, Dept. of Pathology, Erlangen, Germany, Caritas St. Joseph’s Hospital, University of Regensburg, Dept. of Urology, Regensburg, Germany, Charite, University Medicine Berlin, Dept. of Urology, Berlin, Germany, Diakonie-Klinikum, Dept. of Urology, Stuttgart, Germany, Friedrich-Alexander University, Dept. of Urology, Erlangen, Germany

Withdrawn

Bladder endoscopic dissection of NMIBC procures better specimens for pathology than standard TURBT - the pathologists’ perspective
By: Daniel G.1, Quintyn-Rant M-L.1, Briere T.2, Roumiguié M.2, Malavaud B.2
Institutes: Institut Universitaire Du Cancer, Dept. of Pathology, Toulouse, France, Institut Universitaire Du Cancer, Dept. of Urology, Toulouse, France

Simultaneous transurethral resection of high grade bladder tumor and benign prostatic hyperplasia (BPH): Oncological safety
By: Sionov B.V., Khunovich D., Benjamin S., Sidi A.A., Tsivian A.
Institutes: E. Wolfson M.C. and The Sackler Faculty of Medicine Tel-Aviv University, Dept. of Urologic Surgery, Holon, Israel

Safety and tolerability analysis of hyperthermic intravesical mitomycin to mitomycin alone in HIVEC I and HIVEC II: An interim analysis of 307 patients
By: Tan W.S.1, Palou J.2, Kelly J.1
Institutes: University College Hospitals London, Dept. of Surgery and Interventional Sciences, London, United Kingdom, Universitat Autònoma De Barcelona - Fundació Puigvert, Dept. of Urology, Barcelona, Spain

Optimal diagnostic performance of photodynamic diagnosis (PDD) and Storz Professional Image Enhancement System (SPIES) is independent from surgeon experience
Institutes: University of Turin, Città Della Salute E Della Scienza Di Torino, Dept. of Surgical Sciences, Division of Urology, Turin, Italy

Recurrence and progression according to stage at re-TUR in t1g3 bladder cancer patients treated with BCG: Not as bad as previously thought
Institutes: Fundació Puigvert, Dept. of Urology, Barcelona, Spain, A.O. Città Della Salute E Della Scienza, University of Turin, Dept. of Urology, Turin, Italy, University Hospitals Leuven, Dept. of Urology, Leuven, Belgium, Paolo Giaccone General Hospital, Dept. of Urology, Palermo, Italy, John Radcliffe Hospital, University of Oxford, Dept. of Surgical Science, Oxford, United Kingdom, Policlinico Tor Vergata-Università of Rome, Dept of Urology, Rome, Italy, Netherlands Cancer Institute – Antoni Van Leeuwenhoek Hospital, Dept of Urology, Amsterdam, The Netherlands, Radboud University Nijmegen Medical Centre, Dept of Urology, Nijmegen, The Netherlands, Universit A Vita-Salute. Ospedale S. Raffaele, Dept of Urology, Milan, Italy, Motol Hospital, University of Praha, Dept of Urology, Prague, Czech Republic, Cademic Hospital, Uppsala University, Dept of Urology, Uppsala, Sweden, Centre Hospitalier Universitaire La Mil Etrier, University of Poitiers, Dept of Urology, Poitiers, France, Genetic and Molecular Epidemiology
Radiofrequency-induced thermo-chemotherapy effect plus mitomycin versus a second course of bacillus Calmette-Guérin (BCG) or institutional standard in patients with recurrence of non-muscle invasive bladder cancer following induction or maintenance BCG therapy (HYMN): A phase III, open-label, randomised controlled trial

By: Tan W.S.¹, Buckley L.², Devall A.², Loubière L.², Pope A.², Feneley M.³, Cresswell J.⁴, Issa R.⁵, Mostafid H.⁶, Madaan S.⁷, Bhatt R.⁸, McGrath J.⁹, Sangar V.¹⁰, Griffiths L.¹¹, Page T.¹², Hodgson D.¹³, Datta S.¹⁴, Bilingham L.², Kelly J.¹

Institutes: University College London, Division of Surgery and Interventional Science, London, United Kingdom, University of Birmingham, Cancer Research UK Clinical Trials Unit, Birmingham, United Kingdom, University College London Hospitals, Dept. of Urology, London, United Kingdom, James Cook University Hospital, Dept. of Urology, Middlesbrough, United Kingdom, St George's Hospital, Dept. of Urology, London, United Kingdom, Basingstoke and North Hampshire Hospital, Dept. of Urology, London, United Kingdom, Darent Valley Hospital, Dept. of Urology, Dartford, United Kingdom, Queen Elizabeth Hospital, Dept. of Urology, Birmingham, United Kingdom, Royal Devon and Exeter Hospital, Dept. of Urology, Exeter, United Kingdom, Withington Hospital, Dept. of Urology, Manchester, United Kingdom, Leicester General Hospital, Dept. of Urology, Leicester, United Kingdom, Freeman Hospital, Dept. of Urology, Newcastle, United Kingdom, Queen Alexandra Hospital, Dept. of Urology, Portsmouth, United Kingdom, University Hospital of Wales, Dept. of Urology, Cardiff, United Kingdom

5-year outcomes of RITE thermochemotherapy for BCG unresponsive high risk non muscle invasive bladder cancer

By: Ayres B., Sri D., Perry M., Issa R.

Institutes: St George's Hospital, Dept. of Urology, London, United Kingdom

Comparison of pain, quality of life, lower urinary tract symptoms and sexual function between flexible and rigid cystoscopy in follow-up male patients with non muscle invasive bladder cancer: A randomized controlled cross section single blind study

By: Üçer O., Temeltaş G., Yüksel M.B., Gümüş B., Müezzinoğlu T.

Institutes: Celal Bayar University, Faculty of Medicine, Dept. of Urology, Manisa, Turkey

Guidelines update

M. Babjuk, Prague 5 (CZ)
**Location:** Room Milan, North Hall (Level 1)

**Chairs:** J.L.H.R. Bosch, Utrecht (NL)
G.N. Thalmann, Berne (CH)
A. Wagg, Edmonton (CA)

**Aims and objectives of this session**
To explore the prevalence of urological disorders in the elderly and to evaluate the effect of various urological treatments in older people.

Poster viewing of 20 minutes. Presentations will take place on stage. Standard presentations are 2 minutes in length, followed by 2 minutes for discussion. Extended presentations (*) are 3 minutes in length, followed by 3 minutes for discussion.

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**668**

**The aging effect on the detrusor muscle serotonergic contraction in rats**

By: Takanashi A., Sakai-Saitou A., Hattori T., Katano Y., Ishihata A.

**Institutes:** Juntendo University, Faculty of Health Care and Nursing, Urayasu, Japan, Yamagata University, Dept. of Theoretical Nursing and Pathophysiology, Yamagata, Japan, Asahi Kasei Pharma Corporation, Dept. of Medical Affairs, Tokyo, Japan

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**669**

**Impact of lower urinary tract symptoms on mortality: A 15-year follow-up of Tampere Aging Male Urologic Study (TAMUS)**


**Institutes:** Päijät-Häme Central Hospital, Dept. of Surgery, Lahti, Finland, Central Finland Central Hospital, Dept. of Surgery, Jyväskylä, Finland, Turku University Hospital, Dept. of Urology, Turku, Finland, Tampere University Hospital, Dept. of Urology, Tampere, Finland, University of Tampere, School of Health Sciences, Tampere, Finland

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**670**

**Management of lower urinary tract symptoms associated with benign prostatic hyperplasia in elderly patients with a new diagnostic, therapeutic and care pathway**


**Institutes:** Sapienza University of Rome, Dept. of Medico Surgical Sciences and Biotechnologies, Latina, Italy

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**671**

**Recurrent urinary retention: Establishment of a multidisciplinary team board to improve alternative technics to the indwelling urinary catheter**

By: Rambaud C., Gonfrin S., Arlaud C., Demonchy E., Guerin O., Durand M.

**Institutes:** University Hospital of Nice, Dept. of Geriatrics, Nice, France, University Hospital of Nice, Dept. of Infectiology, Nice, France, University Hospital of Nice, Dept. of Urology, Nice, France

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**672**

**Geriatric assessment can predict outcomes of endoscopic surgery for benign prostatic hyperplasia in elderly patients**


**Institutes:** Chu Angers, Dept. of Urology, Angers, France, Angers, France, CH Du Haut Anjou, Dept. of Geriatric Medicine, Chateau Gontier, France

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**673**

**Pathophysiology of nocturnal lower urinary tract symptoms in older patients with urinary incontinence - a major role for nocturnal sodium excretion**

By: Denys M-A., Decalf V., Kumps C., Petrovic M., Goessaert A-S., Everaert K.

**Institutes:** Universitair ziekenhuis Gent, Dept. of Urology, Ghent, Belgium, Universitair ziekenhuis
674

**Psychological distress in patients undergoing surgery for urological cancer: A prospective single centre cross-sectional study**

*By:* Pastore A.L.¹, Maruccia S.², Bou Mir A.³, Palleschi G.¹, Carbone A.¹, Camps Bellonch N.³, Palou J.⁴

*Institutes:* ¹Sapienza University of Rome, Dept. of Medico Surgical Sciences and Biotechnologies, Latina, Italy, ²IRCCS Policlinico San Donato, Dept. of Urology, Milan, Italy, ³Fundació Puigvert, Dept. of Urology, Psychology Unit, Barcelona, Spain, ⁴Fundació Puigvert, Dept. of Urology, Barcelona, Spain

675

**Gait speed is a useful tool to evaluate frailty in urological cancer patients**

*By:* Hatakeyama S., Narita T., Hagiwara K., Tanaka T., Noro D., Oikawa M., Tanaka Y., Imai A., Yoneyama T., Hashimoto Y., Koie T., Ohyama C.

*Institutes:* Hirosaki University Graduate School of Medicine, Dept. of Urology, Hirosaki, Japan

676

**Old patient, bad outcome? Prospective evaluation of preoperative assessments as predictors of outcome and functional recovery after major urologic tumour surgery. First results of a prospective single centre study**

*By:* Kahlmeyer A.¹, Losensky W.¹, Brammertz L.¹, Taubert H.¹, Wach S.¹, Keck B.¹, Ritt M.², Gassmann KG.², Wullich B.¹

*Institutes:* ¹University of Erlangen-Nürnberg, Dept. of Urology, Erlangen, Germany, ²Geriatrics Centre Erlangen, Dept. of Internal Medicine III (Medicine of Ageing), Erlangen, Germany

677

**Aging risk of impaired ADL (activities of daily living) after nephrectomy and nephroureterectomy for malignancy among elderly including the aged over 80: Assessment based on 39649 cases**

*By:* Sugihara T.¹, Yasunaga H.², Matui H.², Kinoshita Y.¹, Minami T.¹, Yamada Y.¹, Ishikawa A.¹, Fujimura T.¹, Fushimi K.², Homma Y.²

*Institutes:* ¹Japanese Red Cross Medical Center, Dept. of Urology, Tokyo, Japan, ²The University of Tokyo, Dept. of Clinical Epidemiology and Health Economics, Tokyo, Japan, ³The University of Tokyo, Dept. of Urology, Tokyo, Japan, ⁴Tokyo Medical and Dental University, Dept. of Health Care Informatics, Tokyo, Japan

678

**The role of G8 screening tool in the assessment of surgical outcome of elderly patients (≥ 75 y.o.) with kidney tumours: A pilot study**

*By:* Silvestri T., Pavan N., Chiapparrone G., Vedovo F., Di Cosmo G., Liguori G.

*Institutes:* University of Trieste, Dept. of Urology, Trieste, Italy

679

**A competing risks analysis for suicidal death in patients with bladder cancer: A 40+ year population-level analysis**

*By:* Klaassen Z., Goldberg H., Chandrasekar T., Hamilton R.J., Fleshner N.E., Kulkarni G.S.

*Institutes:* University of Toronto, Princess Margaret Cancer Centre, Division of Urology, Toronto, Canada

17:00 - 17:07

**Summary**

A. Wagg, Edmonton (CA)
Aims and objectives of this session
The aim of this session is to update delegates on the management and long-term outcomes of urological trauma and emergencies.

Poster viewing of 20 minutes. Presentations will take place on stage. Standard presentations are 2 minutes in length, followed by 2 minutes for discussion. Extended presentations (*) are 3 minutes in length, followed by 3 minutes for discussion.

680 Blunt renal trauma with rupture of the urinary tract: Are there still indications for endoscopic management?
Institutes: Grenoble Teaching Hospital, Dept. of Urology, Grenoble, France

681 Contemporary management of penetrating renal injuries: 11 year experience from two urban major trauma centres
By: Hadjipavlou M.1, Grouse E.2, Gray R.3, Brown C.3, Sharma D.2
Institutes: 1St George's University Hospital, Dept. of Urology, London, United Kingdom, 2St George's Hospital, Dept. of Urology, London, United Kingdom, 3King's College Hospital, Dept. of Urology, London, United Kingdom

682 Long-term complications after renal traumas: Results of a national multicentric study
Institutes: 1CHU Lyon Sud, Dept. of Urology, Lyon, France, 2CHU Rennes, Dept. of Urology, Rennes, France, 3CHU Grenoble, Dept. of Urology, Grenoble, France, 4CHU Eduard Herriot, Dept. of Urology, Lyon, France, 5CHU Hôpital Européen Georges Pompidou, Dept. of Urology, Paris, France, 6CHU Tours, Dept. of Urology, Tours, France, 7CHU Lille, Dept. of Urology, Lille, France, 8CHU Orleans, Dept. of Urology, Orleans, France, 9CHU Kremlin Bicetre, Dept. of Urology, Paris, France, 10CHU Clermont Ferrand, Dept. of Urology, Clermont Ferrand, France, 11CHU Strasbourg, Dept. of Urology, Strasbourg, France, 12CHU Angers, Dept. of Urology, Angers, France, 13CHU Amiens, Dept. of Urology, Amiens, France, 14CHU Rouen, Dept. of Urology, Rouen, France, 15CHU Toulouse, Dept. of Urology, Toulouse, France, 16CHU Caen, Dept. of Urology, Caen, France, 17CHU Nantes, Dept. of Urology, Nantes, France, 18CHU Montpellier, Dept. of Urology, Montpellier, France

683 Renal trauma - what has changed in the past decade
Institutes: Coimbra Hospital and University Centre, Dept. of Urology and Renal Transplantation, Coimbra, Portugal

684 Surgical management of iatrogenic ureteral injuries due to gynecological and/or radiological complications
By: Hinev A.1, Ivanov S.I.2, Kosev P.A.1, Kovachev E.G.2
685

Preventing urethral trauma from inadvertent inflation of catheter balloon in the urethra during catheterization: Evaluation of a novel safety syringe after correlating trauma with urethral distension and catheter balloon pressure

By: Davis N. ¹, Mooney R. ², Cunnane C. ³, Cunnane E. ³, Thornhill J. ¹, Walsh M. ³

Institutes: Tallaght Hospital, Dept. of Urology, Dublin, Ireland, ²CABER, Dept. of Biomedical Engineering, Limerick, Ireland, ³CABER, Dept. of Biomedical Engineering, Limerick, Ireland

686

Long-term outcome after urethral rupture: A comparison of different treatment modalities

By: Furrer M.A., Paerli M., Thalmann G., Roth B.

Institutes: University Hospital Bern, Dept. of Urology, Bern, Switzerland

687

Clinical risk factors for non salvageable testis in pediatric and adult testicular torsion patients

By: Indradiputra I.M.U., Daryanto B., Seputra K.P., Satyagraha P., Nurhadi P.

Institutes: Medical Faculty Brawijaya University - Saiful Anwar Hospital, Department of Urology, Malang, Indonesia

688

Blunt scrotal trauma in adults: A multi-institution experience evaluating the American Association for the Surgery of Trauma organ injury grading scale about 107 cases

By: Sataa S. ², Khouni H. ¹, Bouma R. ¹, Nawfel B.R. ³

Institutes: Internal Security Forces Hospital La Marsa, Dept. of Surgery-Urology, La Marsa, Tunisia, ¹Taher Maamouri University Hospital of Nabeul, Dept. of Surgery-Urology, Nabeul, Tunisia, ³Military Hospital, Dept. of Urology, Tunis, Tunisia

689

Antithrombotic agents and haematuria: A systematic review

By: Bhatt N., Davis N., Flynn R., Mcdermott T., Thomas A., Manecksha R.

Institutes: Adelaide and Meath Hospital, Dept. of Urology, Dublin, Ireland

690

Pelvic fracture urethral injury – the nature of the causative injury correlates strongly with surgical treatment and outcome

By: Bugeja S., Izaz S., Frost A., Dragova M., Andrich D., Mundy A.

Institutes: University College Hospitals London, Dept. of Reconstructive Urology, London, United Kingdom

691

Sex related penile fracture associated with urethral rupture: A retrospective multicentric study

By: Quaresima L. ¹, Gentile G. ², Franceschelli A. ³, Rolle L. ⁴, Divenuto L. ⁵, Rizzo M. ⁶, Boschian R. ⁷, Timpano M. ⁸, Tiroli M. ⁹, Galosi A.B. ¹⁰, Liguori G. ¹¹, Vitarelli A. ¹², Frea B. ¹³, Colombo F. ¹⁴

Institutes: Polytechnic University of The Marche Region, Dept. of Urology, Ancona, Italy, ²University of Bologna, S. Orsola-Malpighi Hospital, Dept. of Urology, Bologna, Italy, ³Azienda Ospedaliero-Universitaria Di Bologna, Dept. of Andrology, Bologna, Italy, ⁴University of Turin, Città Della Salute E Della Scienza, Dept. of Urology, Turin, Italy, ⁵University of Bari, Dept. of Urology, Bari, Italy, ⁶University of Trieste, Dept. of Urology, Trieste, Italy

691

Detachment of corpora cavernosa during anastomotic bulboprostatic reconstruction after pelvic trauma

By: Martinez-Piñeiro L. ¹, Rios E. ², Sánchez J. ², Diez J. ², López-Tello J. ², Alvarez M. ¹

Institutes: ¹La Paz University Hospital, Dept. of Urology, Madrid, Spain, ²Infanta Sofía University Hospital, Dept. of Urology, Madrid, Spain

17:04 - 17:11

Summary

L. Martinez-Piñeiro, Madrid (ES)
Aims and objectives of this session
Despite considerable efforts in preserving continence after radical prostatectomy, PPI remains an important challenge.

Poster viewing of 20 minutes. Presentations will take place on stage. Standard presentations are 2 minutes in length, followed by 2 minutes for discussion. Extended presentations (*) are 3 minutes in length, followed by 3 minutes for discussion.

*692 Previous incontinence surgery and surgical volume predict social continence and surgical revision: Results of a large multi-institutional study
Institutes: University Hospitals Leuven, Dept. of Urology, Leuven, Belgium, 2Urological Research Institute, IRCCS Ospedale San Raffaele, Division of Oncology, Unit of Urology, Milan, Italy, 3Azienda Ospedaliera Universitaria Città Della Salute E Della Scienza, Ospedale Molinette, Universit, Dept. of Urology, Turin, Italy, 4Spire Bristol Hospital, Dept. of Urology, Bristol, United Kingdom, 5Spire Cambridge Lea Hospital, Dept. of Urology, Cambridge, United Kingdom, 6Helsinki University Central Hospital and University of Helsinki, Dept. of Urology, Helsinki, Finland, 7University Hospital of Basel, Dept. of Urology, Basel, Switzerland, 8Hospital Ruber Internacional, Hospital Universitario Puerta De Hierro-Majadahonda, Dept. of Urology, Madrid, Spain, 9Humanitas Mater Domini, Dept. of Urology, Milan, Italy, 10Ludwig-Maximilian University, Dept. of Urology, Munich, Germany, 11Radboud University Nijmegen MC, Dept. of Urology, Nijmegen, The Netherlands, 12Ospedale Maggiore della Carità Di Novara, Dept. of Urology, Novara, Italy, 13NewYork-Presbyterian/Weill Cornell Medical Center, Dept. of Urology, New York, United States of America, 14CHU De Reims, Dept. of Urology, Reims, France, 15Azienda Ospedaliera Sant’Andrea, Dept. of Urology, Rome, Italy, 16CHU Charles Nicolle, Dept. of Urology, Paris, France, 17UNI-Klinikum Hamburg-Eppendorf Hamburg-Eppendorf Klinik Für Urologie, Dept. of Urology, Hamburg, Germany, 18Angers University Hospital, Dept. of Urology, Angers, France

Causes and outcomes of AMS 800 ablation
By: Haillot O., Monleon L.
Institutes: CHRU de Tours, Hôpital Bretonneau, Dept. of Urology, Tours, France

Preliminary outcomes of the European multicentre experience with the ZSI 375™ artificial urinary sphincter for treatment of stress urinary incontinence in men
Institutes: Vivantes Klinikum Am Urban, Dept. of Reconstructive Urology and Gender incongruence, Berlin, Germany, 2Regional Specialistic Hospital, Dept. of Urology, Pulawy, Poland, 3Collegium Medicum of The Jagiellonian University, Dept. of Urology, Krakow, Poland, 4District Specialistic Hospital, Dept. of Urology, Lodz, Poland, 5Urology Practice, Dept. of Urology, Galdorf, Germany, 6Klinikum Mittelbaden, Dept. of Urology, Baden-Baden, Germany, 7Foggia, Dept. of Urology, Foggia, Italy, 8Umberto I Hospital, Dept. of Urology, Rome, Italy
695 Use of surgery for post radical prostatectomy urinary incontinence. Nationwide, population-based, study
By: Ventimiglia E.¹, Folkvaljon Y.², Akre O.³, Bratt O.⁴, Carlsson S.⁵, Johansson E.⁶, Peeker R.⁷, Volz D.⁸, Stattin P.⁹
Institutes: ¹IRCCS Ospedale San Raffaele, Dept. of Oncology and Urology; URI, Milan, Italy, ²Regional Cancer Centre Uppsala/Örebro, Department of Surgical Sciences, Uppsala, Sweden, ³Karolinska Institutet, Dept. of Urology, Stockholm, Sweden, ⁴Cambridge University Hospitals, Dept. of Urology/CamPARI Clinic, Cambridge, United Kingdom, ⁵Karolinska Institutet, Dept. of Molecular Medicine and Surgery, Section of Urology, Stockholm, Sweden, ⁶Uppsala University, Dept. of Surgical Sciences, Uppsala, Sweden, ⁷Sahlgrenska University Hospital, Dept. of Urology; Institute For Clinical Sciences, Gothenburg, Sweden

696 Long-term outcomes after AMS 800 artificial urinary sphincter implantation in men with stress urinary incontinence: Review of 150 patients
By: Sandri S., D'Urbano F.
Institutes: Hospital G. Fornaroli, Dept. of Urology, Magenta, Italy

697 Quantitative assessment of nerve preservation improves the prediction of membranous urethral length on continence outcome after robot-assisted radical prostatectomy
By: Grivas N.¹, Van Der Roest R.¹, Schouten D.², Cavicchioli F.³, Artibani W.³, Heijmink S.², Schoots I.², Van Der Poel H.²
Institutes: ¹Netherlands Cancer Institute - Antoni van Leeuwenhoek Hospital, Dept. of Urology, Amsterdam, The Netherlands, ²Netherlands Cancer Institute - Antoni van Leeuwenhoek Hospital, Dept. of Radiology, Amsterdam, The Netherlands, ³Aoui Verona, Dept. of Urology, Verona, Italy

698 MRI usefulness for prediction of urinary continence after radical prostatectomy
By: Amoros-Torres A.², Durán-Rivera A.¹, Juan J.¹, Escudero E.², Nuño De La Rosa I.³, Ramos De Campos M.¹
Institutes: ¹Valencia University General Hospital, Dept. of Urology, Valencia, Spain, ²Vinalopo University Hospital, Dept. of Urology, Elche, Spain, ³Elda General Hospital, Dept. of Urology, Elda, Spain

699 Medium-term outcomes after transobturator sling placement for male post-prostatectomy urinary incontinence using a titanised mesh with De Leval technique
By: Sacco E., Bientinesi R., Gandi C., Vaccarella L., Racioppi M., Pinto F., Totaro A., Palermo G., Bassi P.
Institutes: Agostino Gemelli Hospital Foundation, Catholic University, Dept. of Urology, Rome, Italy

700 Early postoperative urinary retention as a prognostic factor for continence outcomes after insertion of transobturator sling for male stress urinary incontinence
By: Chung A., Zuckerman J., Suarez O., McCammon K.
Institutes: Eastern Virginia Medical School, Dept. of Urology, Norfolk, United States of America

701 Efficiency and complications of the AMS AdVance™ Male Sling System for the treatment of male stress urinary incontinence: One prospective multicentric study
By: Ye H.¹, Tonoli-Catez H.¹, M Bauer R.², De Ridder D.³, Haab F.⁴, Chauveau P.⁵, Arano P.⁶, Haillot O.⁷, Fassi-Fehri H.¹
Institutes: ¹Hopital Edouard Herriot, Dept. of Urology, Lyon, France, ²Ludwig-Maximilians-University, Dept. of Urology, Munich, Germany, ³UZ Gasthuisberg, Dept. of Urology, Leuven, Belgium, ⁴Institution Tenon Hospital, Dept. of Urology, Paris, France, ⁵Clinique Jules Verne, Dept. of Urology, Nantes, France, ⁶Fundacion Puigvert, Dept. of Urodynamic, Barcelona, Spain, ⁷Hospital Bretonneau, Dept. of Urology, Tours, France

702 ATOMS system for treatment of postprostatectomy urinary incontinence: A prospective single centre experience
By: Dalpiaz O., Strini K., Ehrlich G., Pummer K., Primus G.
Institutes: LKH-Univ. Klinikum Graz, Dept. of Urology, Graz, Austria
Mid-term follow up of the AdVance XP sling in the treatment of post-prostatectomy stress urinary incontinence – first 4-year results from a prospective multicenter trial

By: Grabbert M.¹, Kretschmer A.¹, Klehr B.¹, Gozzi C.², Rehder P.³, May F.⁴, Homberg R.⁵, Gebhartl P.⁶, Stief C.G.¹, Bauer R.M.¹

Institutes: ¹Ludwig-Maximilians-University Munich (LMU), Dept. of Urology, Munich, Germany, ²Marienklinik Bozen, Dept. of Urology, Bolzano, Italy, ³Medical University Innsbruck, Dept. of Urology, Innsbruck, Austria, ⁴Klinikum Dachau, Dept. of Urology, Dachau, Germany, ⁵St. Barbara Klinik Hamm, Dept. of Urology, Hamm, Germany, ⁶Klinikum Voecklabruck, Dept. of Urology, Voecklabruck, Austria

Overactive bladder after artificial urinary sphincter implantation

By: Son H.S., Gamo M.B., Heo J.E., Oh K.T., Kim J.H.

Institutes: Yonsei University College of Medicine, Dept. of Urology, Seoul, South Korea

ProACT™ device implantation after male sling failure for post-prostatectomy urinary incontinence: A monocentric experience

By: Baron M.G., Delcourt C., Nouhaud F-X., Pfister C., Grise P., Cornu J-N.

Institutes: Rouen University Hospital, Dept. of Urology, Rouen, France
Aims and objectives of this session
This session will update organ-sparing surgery in penile cancer from large series. In addition, guideline adherence and quality of care issues will be discussed.

Poster viewing of 20 minutes. Presentations will take place on stage. Standard presentations are 2 minutes in length, followed by 2 minutes for discussion.

706
The adherence to the EAU Guidelines on penile cancer treatment could influence the survival: Multicenter, retrospective study
By: Cindolo L.1, Bada M.1, Nyirady P.2, Varga J.2, Ditonno P.3, Boccasile S.3, Battaglia M.3, Chiodini P.4, Berardinelli F.1, De Nunzio C.5, Tema G.5, Veccia A.6, Antonelli A.6, Simeone C.7, Puliatti S.7, Micali S.7, Schips L.1
Institutes: 1ASL Abruzzo 2, Dept. of Urology, Chieti, Italy, 2Budapest Hospital, Dept. of Urology, Budapest, Hungary, 3University of Bari, Dept. of Emergency and Organ Transplantation, Bari, Italy, 4Second University of Naples, Medical Statistics Unit, Naples, Italy, 5S. Andrea Hospital, Dept. of Urology, Rome, Italy, 6Spedali Civili, Dept. of Urology, Brescia, Italy, 7University of Modena and Reggio Emilia, Dept. of Urology, Baggiovara, Italy

707
Is the incidence of penile carcinoma in situ increasing in England and the rest of Europe?
By: Rodney S.1, Arya M.2, Muneer A.3
Institutes: 1University College London, Dept. of Interventional Science, London, United Kingdom, 2University College London Hospital, Dept. of Urology, London, United Kingdom, 3University College London Hospital, Dept. of Urology, London, United Kingdom

708
The genomic profiling of penile carcinoma: DNA copy number aberrations and validation of candidate driver genes
By: La Touche S.1, Lemetre C.2, Lambros M.3, Stankiewicz E.1, Ng C.2, Weigelt B.2, Rajab R.4, Tinwell B.4, Corbishley C.4, Watkin N.5, Berney D.1, Reis-Filho J.2
Institutes: 1Barts Cancer Institute, Dept. of Molecular Oncology, London, United Kingdom, 2Memorial Sloan Kettering Cancer Centre, Dept. of Pathology, New York, United States of America, 3Institute of Cancer Research, Dept. of Molecular Pathology, London, United Kingdom, 4St George's Hospital, Dept. of Pathology, London, United Kingdom, 5St Georges Hospital, Dept. of Urology, London, United Kingdom

709
PIK3CA copy number aberration and activation of the PI3K-AKT-mTOR pathway in evolving disease states of penile cancer
By: Adimoney A.1, Stankiewicz E.1, Nicholson S.2, Hall E.3, Kudahetti S.1, Rajab R.4, Corbishley C.4, Lu Y.-J.1, Bahl A.3, Watkin N.6, Berney D.1
Institutes: 1Barts Cancer Institute, Centre for Molecular Oncology, London, United Kingdom, 2Imperial College Healthcare NHS Trust, Dept. of Medical Oncology, London, United Kingdom, 3The Institute of Cancer Research, Clinical Trials & Statistics Unit, London, United Kingdom, 4St George's Hospital, Dept. of Histopathology, London, United Kingdom, 5Bristol Haematology and Oncology Centre, Dept. of Clinical Oncology, Bristol, United Kingdom, 6St George's Hospital, Dept. of Urology, London, United Kingdom
A critical comparative analysis of operative complication and oncological outcome between robot assisted video endoscopic inguinal lymph node dissection and open inguinal lymph node dissection
By: Singh A., Shah S., Bansal P., Chatterjee S., Rawal S.
Institutes: Rajiv Gandhi Cancer Hospital & Research Center, Dept. of Urology, Delhi, India

Thulium laser treatment of early stage penile cancer: Initial results and functional outcomes
Institutes: European Institute of Oncology, Dept. of Urology, Milan, Italy

Predictive factors for local recurrence after glansectomy and neoglans reconstruction for penile squamous cell carcinoma
By: Albersen M.1, Parnham A.2, Sahdev V.2, Christodoulidou M.2, Nigam R.2, Freeman A.2, Jameson C.2, Minhas S.2, Ralph D.2, Malone P.2, Muneer A.2
Institutes: 1UZ Leuven, Dept. of Urology, Leuven, Belgium, 2University College London Hospitals, Dept. of Urology, London, United Kingdom

The significance of close surgical margins in organ sparing surgery for penile squamous cell cancer
By: Sri D., Sujenthiran A., Lam W., Corbishley C., Yap T., Sharma D., Ayres B., Watkin N.
Institutes: St Georges Hospital, Dept. of Urology, London, United Kingdom

Prediction of postoperative complications after inguinal lymphadenectomy for penile cancer using a novel classification tool
By: Zhu Y.1, Gu W-J.1, Spiess P.2, Ye D-W.1
Institutes: 1Fudan University Shanghai Cancer Center, Dept. of Urology, Shanghai, China, 2H. Lee Moffitt Cancer Center, Dept. of Surgery, Tampa, United States of America

Is sarcopenia a useful prognostic indicator in patients with squamous cell carcinoma of the penis?
By: Christodoulidou M.1, Attipa C.2, Burden S.3, Ramachandran N.4, Gibson D.5, Mitra A.6, Lal S.6, Nigam R.7, Malone P.7, Richards T.8, Muneer A.7
Institutes: 1University College Hospitals London, Dept. of Urology, London, United Kingdom, 2University College London, London, United Kingdom, 3University of Manchester, Dept. of Dietetics, London, United Kingdom, 4University College London Hospital, Dept. of Radiology, London, United Kingdom, 5University College London Hospital, Dept. of Oncology, London, United Kingdom, 6University of Manchester, Dept. of Gastroenterology, London, United Kingdom, 7University College London Hospital, Dept. of Urology, London, United Kingdom, 8University College London, Division of Surgery and Interventional Radiology, London, United Kingdom

Histopathologic and prognostic correlations regarding human papillomavirus (HPV) infection in penile squamous cell carcinomas (SCC) considering the novel 2016 WHO classification
By: Hölters S.1, Khalmurzaev O.2, Ueberdieck S.1, Loertzer H.3, Pfuhl T.3, Pryalukhin A.4, Hartmann A.5, Janssen M.1, Loertzer H.6, Wunderlich H.7, Hauschild E.8, Bohle R.M.9, Smola S.2, Stöckle M.1, Matveev V.2, Junker K.1
Institutes: 1Saarland University, Dept. of Urology and Paediatric Urology, Homburg, Germany, 2N.N. Blokhin Cancer Research Center, Dept. of Urology, Moscow, Russia, 3Saarland University, Institute of Virology, Homburg, Germany, 4Saarland University, Institute of Pathology, Homburg, Germany, 5Erlangen University, Institute of Pathology, Erlangen, Germany, 6Westpfalz-Klinikum GmbH, Dept. of Urology, Kaiserslautern, Germany, 7St Georg Klinikum, Dept. of Urology and Paediatric Urology, Blankenheim, Germany, 8Helios Clinics, Dept. of Urology, Blankenheim, Germany

Does residual penile intraepithelial neoplasia (PeIN) require adjuvant chemotherapy after surgical excision?
By: Ziada M., Parnham A., Christodoulidou M., Freeman A., Bunker C., Muneer A.
Institutes: University College London Hospital, Dept. of Urology, London, United Kingdom

Dacomitinib (Daco) induction therapy for locally-advanced (LA) or metastatic penile squamous
cell carcinoma (PSCC): An open label, single-arm, phase 2 study
By: Necchi A.¹, Lo Vullo S.², Raggi D.¹, Giannatempo P.¹, Nicolai N.³, Piva L.³, Biasoni D.³, Catanzaro M.³, Torelli T.³, Stagni S.³, Calareso G.⁴, Togliardi E.⁵, Colecchia M.⁶, Busico A.⁴, Perrone F.⁴, Gloghini A.⁴, Sonpavde G.⁶, Mariani L.⁷, Salvioni R.⁸

Institutes: Fondazione IRCCS - Istituto Nazionale Dei Tumori, Dept. of Medical Oncology, Milan, Italy, ²Fondazione IRCCS - Istituto Nazionale Dei Tumori, Clinical Epidemiology and Trials Organization Unit, Milan, Italy, ³Fondazione IRCCS - Istituto Nazionale Dei Tumori, Dept. of Urology, Milan, Italy, ⁴Fondazione IRCCS - Istituto Nazionale Dei Tumori, Dept. of Radiology, Milan, Italy, ⁵Fondazione IRCCS - Istituto Nazionale Dei Tumori, Pharmacy Unit, Milan, Italy, ⁶UAB Comprehensive Cancer Center, Medical Oncology & Hematology, Birmingham, United States of America, ⁷Fondazione IRCCS Istituto Nazionale Dei Tumori, Clinical Epidemiology and Trials Organization Unit, Milan, Italy, ⁸Fondazione IRCCS Istituto Nazionale Dei Tumori, Dept. of Urology, Milan, Italy

V90

Saphenous-sparing laparoscopic inguinal lymphadenectomy
By: Chiapparrone G.¹, Rapisarda S.², De Concilio B.³, Zeccolini G.³, Trombetta C.¹, Celia A.³

Institutes: University of Trieste, Dept. of Urology, Trieste, Italy, ²University of Catania, Dept. of Urology, Catania, Italy, ³San Bassiano Hospital, Dept. of Urology, Bassano del Grappa, Italy
Improving standards through education and training
Poster Session 54

Location: Room Vienna, North Hall (Level 1)

Chairs: V.G. Mirone, Naples (IT)
        D. Mitropoulos, Athens (GR)
        J. Kranz, Eschweiler (DE)

Aims and objectives of this session
This session explores new ideas for improving standard of care through innovative education and training methods.

Poster viewing of 20 minutes. Presentations will take place on stage. Standard presentations are 2 minutes in length, followed by 2 minutes for discussion.

719 Is your career hurting you? The ergonomic consequences of surgery in 701 urologists worldwide
By: Chung A.1, Overbey D.2, Sawyer M.3, Steinberg S.3, Williams D.4, Lloyd G.3
Institutes: 1University of Sydney and Concord Repatriation General Hospital, Dept. of Urology, Concord, Australia, 2University of Colorado School of Medicine, Dept. of Surgery, Denver, United States of America, 3University of Colorado School of Medicine and Veterans Administration Denver, Dept. of Urology, Denver, United States of America, 4University of Wisconsin School of Medicine, Dept. of Urology, Madison, United States of America

720 Development of the novel endoscopic stone treatment step 1 (EST s1) assessment curriculum: EULIS, ESUT, YAUWP and ESU training research group collaboration
By: Veneziano D.1, Ahmed K.2, Van Cleynenbreugel B.3, Goezen A.4, Breda A.5, Palou J.5, Sarica K.6, Liatsikos E.7, Sanguedolce F.8, Somani B.9
Institutes: 1University of Minho, School of Health Sciences, Braga, Italy, 2Guy's Hospital, Dept. of Urology, London, United Kingdom, 3University Hospital, Dept. of Urology, Leuven, Belgium, 4SLK Kliniken, Dept. of Urology, Heilbronn, Germany, 5Fundacio Puigvert, Dept. of Urology, Barcelona, Spain, 6Dr. Lutfi Kirdar R & T Hospital, Dept. of Urology, Istanbul, Turkey, 7University of Patras, Dept. of Urology, Patras, Greece, 8King’s College Hospital, Dept. of Urology, London, United Kingdom, 9University Hospital Southampton, Dept. of Urology, Southampton, United Kingdom

721 Consent in urology: Are we doing it right?
By: Khan S.2, Ganta S.2, Khastgir J.1
Institutes: 1Morriston Hospital, Dept. of Urology, Swansea, United Kingdom, 2Walsall Manor Hospital, Dept. of Urology, Walsall, United Kingdom

722 Urology teaching and exposure in foundation training and medical school: Is it enough?
By: Luk A.C.O.1, McConnell T.2
Institutes: 1Manchester Royal Infirmary, Dept. of Urology, Manchester, United Kingdom, 2Furness General Hospital, Dept. of Urology, Barrow-in-Furness, United Kingdom

723 Validation of the European SIMULATE ureterorenoscopy training curriculum
By: Aydin A.1, Ahmed K.1, Abe T.1, Raison N.1, Kunit T.2, Brunckhorst O.1, Ross T.1, Wood T.1, Al-Jabir A.1, Iqbal M.1, Aya H.1, Brewin J.3, McCrindle C.4, McCabe J.5, Rukin N.6, Patterson J.5, Marsh H.6, Dasgupta R.8, Samsuddin A.9, Khan A.10, Sievert K-D.2, Khan M.S.1, Dasgupta P.1
Institutes: 1King’s College London, Mrc Centre for Transplantation, London, United Kingdom, 2Paracelsus Medizinische Privatuniversität, Dept. of Urology, London, United Kingdom, 3Salisbury NHS Foundation Trust, Dept. of Urology, Salisbury, United Kingdom, 4NHS Forth Valley, Dept. of Urology, Glasgow, United Kingdom, 5St. Helens and Knowsley Teaching Hospitals, Dept. of Urology, Liverpool, United Kingdom, 6The Royal Wolverhampton NHS Trsut, Dept. of Urology,
Measuring the impact on new surgical residents of undertaking a simulated ward round to test non-technical skills
By: Mufti U.¹, Rajpal S.², Myatt A.³, Biyani C.S.¹, Jain S.¹
Institutes: ¹St James’ University Hospital, Leeds Teaching Hospitals NHS Trust, Dept. of Urology, Leeds, United Kingdom, ²Bradford Royal Infirmary, Bradford Teaching Hospitals NHS Foundation Trust, Dept. of Urology, Bradford, United Kingdom, ³Castle Hill Hospital, Hull and East Yorkshire Hospitals NHS Trust, Dept. of Urology, Hull, United Kingdom

Development and validation of a 3D-printed bladder model for laparoscopic and robot-simulated urethrovesical anastomosis training for radical prostatectomy
By: Guo Y.¹, Hoogenes J.¹, Wong N.¹, Kim K.¹, Quanz M.², Shayegan B.¹, Matsumoto E.¹
Institutes: ¹Mcmaster University, Dept. of Surgery/urology, Hamilton, Canada, ²University of Western Ontario, Dept. of Surgery, London, Canada

Incidence, cost, complications and clinical outcomes of iatrogenic urethral catheterization injuries: A prospective multi-institutional study
By: Davis N.¹, Quinlan M.², Bhatt N.², Browne C.¹, MacCraith E.¹, Manecksha R.², Walsh M.³, Thornhill J.², Mulvin D.¹
Institutes: ¹St Vincent’s University Hospital, Dept. of Urology, Co Dublin, Ireland, ²Tallaght Hospital, Dept. of Urology, Co Dublin, Ireland, ³CABER, Dept. of Biomedical Engineering, Co Dublin, Ireland

New media for educating urology residents: A comparative interview study in Canada and Germany
By: Salem J.¹, Borgmann H.², Macneily A.³, Boehm K.², Schmid M.⁴, Groeben C.⁵, Baunacke M.⁵, Huber J.⁵
Institutes: ¹University Hospital Cologne, Dept. of Urology, Cologne, Germany, ²University Hospital Mainz, Dept. of Urology, Mainz, Germany, ³Vancouver General Hospital/University of British Columbia, Dept. of Urology, Vancouver, Canada, ⁴University Hospital Göttingen, Dept. of Urology, Göttingen, Germany, ⁵TU Dresden, Dept. of Urology, Dresden, Germany

What do young adults know about the risk of urological disease in smokers?
By: Fordyce W.¹, Birch B.²
Institutes: ¹University of Southampton, Faculty of Medicine, Southampton, United Kingdom, ²University Hospital Southampton, Dept. of Urology, Southampton, United Kingdom

Newsworthiness versus scientific impact: Are the most highly cited urology papers the most widely disseminated in the media?
By: O’Connor E.¹, Nason G.², O’Kelly F.³, Manecksha R.⁴, Loeb S.⁵
Institutes: ¹St Vincent’s Hospital, Dept. of Urology, Dublin, Ireland, ²Mater Misericordiae University Hospital, Dept. of Urology, Dublin, Ireland, ³Our Lady’s Childrens’ Hospital Crumlin, Dept. of Urology, Dublin, Ireland, ⁴St James’s Hospital, Dept. of Urology, Dublin, Ireland, ⁵Laura & Isaac Perlmutter Cancer Center, Dept. of Urology and Population Health, New York, United States of America
**Paediatric urology 3**
Poster Session 55

**Location:** Room London, North Hall (Level 1)

**Chairs:** G. Bogaert, Leuven (BE)  
K. Sarica, Istanbul (TR)  
O. Telli, Ankara (TR)

**Aims and objectives of this session**
Paediatric urology update on paediatric stone management, obstruction and reconstructions.

Poster viewing of 20 minutes. Presentations will take place on stage. Standard presentations are 2 minutes in length, followed by 2 minutes for discussion.

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**731**

**Prenatal urinary tract anomalies leading to termination of pregnancy**
By: Neheman A.¹, Verhovsky G.¹, Kaplan G.², Maymon R.², Zisman A.¹

**Institutes:**¹ Assaf Harofeh Medical Center, Dept. of Urology, Zrifin, Israel, ²Assaf Harofeh Medical Center, Dept. of Obstetric and Gynaecology, Zrifin, Israel

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**732**

**Predictive factors for obstruction in severe uretero-pelvic junction obstruction like prenatal/postnatal USGs - prospective study**
By: Takvani A., Malaviya P.

**Institutes:**Takvani Kidney Hospital, Dept. of Urology, Junagadh, India

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**733**

**Predictive value of cortical transit time on MAG3 for the need of surgery in antenatally detected unilateral hydronephrosis due to ureteropelvic junction stenosis**

**Institutes:**Kyungpook National University School of Medicine, Dept. of Urology, Daegu, South Korea

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**734**

**Laparoscopic transposition of lower-pole crossing vessels: Long-term follow-up of 33 patients at puberty**
By: Madec F-X.¹, Faraj S.¹, Villemagne T.², Fourcade L.³, Lardy H.², Leclair M-D.⁴

**Institutes:**¹Children University Hospital, Nantes, Dept. of Paediatric Surgery and Urology, Nantes, France, ²Children University Hospital, Tours, Dept. of Paediatric Surgery, Tours, France, ³Children University Hospital, Limoges, Dept. of Paediatric Surgery, Limoges, France, ⁴Children University Hospital, Nantes, Dept. of Pediatric Surgery and Urology, Nantes, France

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**735**

**Metaphylaxis of uric acid nephrolithiasis in children: Continuous versus on-demand oral potassium citrate**
By: Abdel Aziz Elderwy A.¹, Safwat A.¹, Shahat A.¹, Almontaser H.², Hammouda H.¹

**Institutes:**¹Assiut University, Dept. of Urology, Assiut, Egypt, ²Assiut University, Dept. of Pediatrics, Assiut, Egypt

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**736**

**Comparison of intermediate and low frequency shock wave lithotripsy for pediatric kidney stone**
By: Onur O., Kiliçarslan H., Mert A., Kordan Y.

**Institutes:**Uludag University, Dept. of Urology, Bursa, Turkey

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**737**

**Comparison the results of 16 to 20 F percutaneous access dilatation of mini-PCNL in pediatric patients**
By: Baydilli N., Akinsal E.C., Sönmez G., Demirici D.
Institutes: Erciyes University Faculty of Medicine, Dept. of Urology, Kayseri, Turkey
Aims and objectives of this session
Recent research has revealed several novel targets in prostate cancer. However, a single therapy approach will likely not be efficient in improving patient survival. For this reason, systemic pharmacology approaches have been developed in order to provide a scientific basis for novel therapies. The session will also address key issues of drug delivery in prostate cancer.

Poster viewing of 20 minutes. Presentations will take place on stage. Standard presentations are 2 minutes in length, followed by 2 minutes for discussion. Extended presentations (*) are 3 minutes in length, followed by 3 minutes for discussion.

16:08 - 16:18
New approaches to overcome endocrine therapy resistance in prostate cancer
P. Sooriakumaran, London (GB)

*746 Identification and characterization of selective androgen receptor degraders (SARDs) for the treatment of enzalutamide unresponsive and/or resistant prostate cancer
Institutes: 1Gtx Inc, Dept. of Prostate Cancer, Memphis, United States of America, 2University of Tennessee Health Science Center, Dept. of Medicine, Memphis, United States of America, 3University of Tennessee Health Science Center, Dept. of Pharmaceutical Sciences, Memphis, United States of America, 4School of Medicine, Institute of Medical Sciences, Aberdeen, United Kingdom, 5St. Jude's Children's Research Hospital, Dept. of Structural Biology, Memphis, United States of America, 6University of Tennessee Health Science Center, Pharmaceutical Sciences, Memphis, United States of America

747 Targeting enzalutamide-resistant prostate cancer using the novel androgen receptor inhibitor ODM-201
By: Borgmann H., Ozistanbullu D., Beraldi E., Dalal K., Fazli L., Gleave M.
Institutes: Vancouver Prostate Centre, Dept. of Urology, Vancouver, Canada

748 Targeting androgen receptor variants by niclosamide overcomes resistance to abiraterone and enzalutamide
By: Liu C., Lou W., Pan C-X., Evans C., Gao A.
Institutes: University of California Davis, Dept. of Urology, Sacramento, United States of America

749 The STAT3 inhibitor galiellalactone prevents prostate cancer cell induced generation of myeloid derived suppressor cells from monocytes ex vivo
By: Hellsten R.1, Leandersson K.2, Johansson M.3, Bjarret A.1
Institutes: 1Division of Urological Cancers, Dept. of Translational Medicine, Lund University, Malmö, Sweden, 2Cancer Immunology, Dept. of Translational Medicine, Lund University, Malmö, Sweden, 3Glatcione Pharma AB, Helsingborg, Sweden

750 The multi-kinase inhibitor EC-70124 delivers a double-hit to prostate cancer stem cells interfering with both STAT3 and NF-kB signaling
Dopamine hydrochloride relative nanoparticles in the treatment of prostate cancer
By: Zhang C., Zhao X., Lin T., Guo H.
Institutes: Nanjing Drum Tower Hospital, Dept. of Urology, Nanjing, China

ALK1Fc suppresses tumor growth by impairing proliferation of human prostate cancer cells in vitro and in vivo
By: Astrologo L.1, Zoni E.1, Karkampouna S.1, Gray P.2, Klima I.1, Goumans M.J.2, Hawinkels L.2, Van Der Pluijm G.3, Ten Dijke P.2, Spahn M.4, Thalmann G.4, Kruitchof-De Julio M.1
Institutes: Urology Research Laboratory, Dept. of Clinical Research, Bern, Switzerland, 2Leiden University Medical Center, Dept. of Molecular Cell Biology, Leiden, The Netherlands, 3Leiden University Medical Center, Dept. of Surgery, Leiden, The Netherlands, 4University Hospital Bern, Dept. of Urology, Bern, Switzerland

A tale of tails: A novel approach to immunotherapy of prostate cancer
By: Galustian C.1, Smolarek D.1, Sakellariou C.1, Elhage O.1, Smith R.1, Dasgupta P.2
Institutes: Kings College London, Dept. of Innate Immunity, London, United Kingdom, 2Kings College London, Dept. of Innate Immunity and the Urology Centre, London, United Kingdom

Systems pharmacology and quantitative proteomics for developing targeted triple therapy
By: Ebhardt H.A.1, Root A.2, Beizaei A.1, Liu Y.3, Gauthier N.4, Sander C.4, Aebersold R.3
Institutes: University College Dublin, Systems Biology Ireland, Dublin, Ireland, 2Memorial Sloan-Kettering Cancer Center, Weill Cornell Graduate School of Medical Sciences, New York City, United States of America, 3ETH Zurich, Institute of Molecular Systems Biology, Zurich, Switzerland, 4Dana-Farber Cancer Institute, CBio Center At Dana-Farber, Boston, United States of America

Transdermal delivery of leuprolide acetate with chitosan microneedles: A promising tool for androgen deprivation therapy
By: Tsai Y-S.1, Chen M-Y.2, Lan S-K.3, Tsai H-T.4, Chen M-C.5, Tzai T-S.6
Institutes: National Cheng Kung University Hospital, Dept. of Urology, Tainan, Taiwan, 2Madou SinLau Hospital, Dept. of Urology, Tainan, Taiwan, 3Dalin Tzu-Chi Hospital, Dept. of Urology, Tainan, Taiwan, 4National Cheng-Kung University Hospital, Dept. of Urology, Tainan, Taiwan, 5National Cheng-Kung University, Dept. of Chemical Engineering, Tainan, Taiwan, 6Tainan An-Nan Hospital, Dept. of Urology, Tainan, Taiwan

Co-treatment with L-methadone increases the efficacy of cytostatic drugs in prostate cancer cells
By: Stadlbauer B.1, Kozian D.2, Stief C.1, Buchner A.1
Institutes: Ludwig-Maximilians-University Munich, Dept. of Urology, Munich, Germany, 2Sanofi-Aventis GmbH, Research Department, Frankfurt, Germany

SEMA3C drives cancer growth and treatment resistance via cognate ligand-independent activation of multiple receptor tyrosine kinases
By: Takeuchi A.1, Masaki S.1, Peacock J.2, Eto M.1, Martin E G.2, Ong C.2
Institutes: Graduate School of Medical Sciences, Kyushu University, Dept. of Urology, Fukuoka, Japan, 2University of British Columbia, Vancouver Prostate Centre, Vancouver, Canada
## Prostate cancer: Is the future focal?

**Poster Session 57**

**Sunday, 26 March**

**15:45 - 17:15**

**Location:** Room Munich, North Hall (Level 1)

**Chairs:**
- E. Barret, Paris (FR)
- B. Hollenbeck, Ann Arbor (US)
- M. Valerio, Lausanne (CH)

**Aims and objectives of this session**

The aim of this session is to update delegates on the use of focal therapy and non-whole gland treatments.

Poster viewing of 20 minutes. Presentations will take place on stage. Standard presentations are 2 minutes in length, followed by 2 minutes for discussion. Extended presentations (*) are 3 minutes in length, followed by 3 minutes for discussion.

<table>
<thead>
<tr>
<th>758</th>
<th>Intra-prostatic injection of PRX302 to focally ablate clinically significant prostate cancer: An open label, phase 2a study</th>
</tr>
</thead>
<tbody>
<tr>
<td>Institutes:</td>
<td>University College London, Division of Surgery and Interventional Sciences, London, United Kingdom, Sophiris, Sophiris Bio Corporation, California, United States of America, University College London Hospital, Dept. of Histopathology, London, United Kingdom, University College London Hospital, Dept. of Radiology, London, United Kingdom</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>759</th>
<th>Impact of the use of N2O for general anesthesia during high intensity focused ultrasound (HIFU) for the treatment of localized prostate cancer</th>
</tr>
</thead>
<tbody>
<tr>
<td>By:</td>
<td>Potiron E., Lacoste J., Le Goguic G., Rousseau T., Nevoux P.</td>
</tr>
<tr>
<td>Institutes:</td>
<td>Clinique Urologique Nantes Atlantis, Dept. of, Saint Herblain, France, Clinique Urologique Nantes Atlantis, Dept. of, Saint Herblain, France</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>760</th>
<th>Prospective comparative analysis of oncologic and functional outcomes between focal therapy and robotic radical prostatectomy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Institutes:</td>
<td>Institut Mutualiste Montsouris, Dept. of Urology, Paris, France, Memorial Sloan Kettering, Dept. of Urology, New York, United States of America, CEMIC, Dept. of Urology, Buenos Aires, Argentina</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>761</th>
<th>A phase III study comparing partial prostate ablation versus radical prostatectomy (PART) in intermediate risk prostate cancer – initial data from the feasibility study</th>
</tr>
</thead>
<tbody>
<tr>
<td>Institutes:</td>
<td>Oxford University - Churchill Hospital, Dept. of Urology, Oxford, United Kingdom, University of Bristol, Dept. of Social and Community Medicine, Bristol, United Kingdom, University Hospital Southampton NHS Foundation Trust, Dept. of Urology, Southampton, United Kingdom, Sheffield Teaching Hospitals, Dept. of Urology, Sheffield, United Kingdom, Basingstoke and North Hampshire Hospital, Dept. of Urology, Basingstoke, United Kingdom, University College London Hospital, Dept. of Urology, London, United Kingdom</td>
</tr>
</tbody>
</table>

| 762 | First repeated biopsy represents the most informative predictor of progression-free survival at 3 |
years follow-up in patients included in an active surveillance protocol for low-risk prostate cancer


Institutes: Vita-Salute University San Raffaele, Dept. of Urology, Milan, Italy, 2Federico II University, Dept. of Urology, Naples, Italy, 3Vita-Salute University San Raffaele, Dept. of Pathology, Milan, Italy, 4Magna Graecia University, Dept. of Urology, Catanzaro, Italy

A nomogram for prediction of local cancer recurrence after primary prostate cryoablation


Institutes: Cleveland Clinic Foundation, Glickman Urological and Kidney Institute, Cleveland, United States of America, 2Duke Cancer Institute, Dept. of Urology, Durham, United States of America, 3The Johns Hopkins Medical Institutions, Dept. of Urology, Baltimore, United States of America, 4Eastern Virginia Medical School, Dept. of Urology, Virginia, United States of America, 5UC San Diego Health System, Dept. of Urology, San Diego, United States of America, 6Global Robotics Institute, Dept. of Urology, Celebration, United States of America

MRI-guided transurethral ultrasound ablation in patients with localized prostate cancer: 24-month outcomes of a prospective phase I clinical trial


Institutes: Western University, Dept. of Urology, London, Canada, 2Beaumont Heath System, Department of Urology, Dept. of Urology and Radiology, Royal Oak, United States of America, 3German Cancer Research Center (DKFZ), Dept. of Urology and Radiology, Heidelberg, Germany, 4Profound Medical Inc., Dept. of Engineering, Toronto, Canada

Withdrawn

By:

Institutes:

Neoadjuvant hormonal therapy for patients with low risk prostate cancer stimulates lymphvessel invasion and shorten biochemical recurrence-free survival periods

By: Miyata Y., Mochizuki Y., Shida Y., Matsuo T., Hakariya T., Ohba K., Furusato B., Fukuoka J., Sakai H.

Institutes: Nagasaki University Graduate School of Biomedical Sciences, Dept. of Urology, Nagasaki, Japan, 2Nagasaki University Hospital, Dept. of Pathology, Nagasaki, Japan

Salvage prostate cryoablation in older men


Institutes: Cleveland Clinic Foundation, Glickman Urological and Kidney Institute, Cleveland, United States of America, 2UC San Diego Health System, Dept. of Urology, San Diego, California, United States of America, 3The Johns Hopkins Medical Institution, Dept. of Urology, Baltimore, United States of America, 4Eastern Virginia Medical School, Dept. of Urology, Virginia, United States of America, 5Global Robotics Institute, Dept. of Urology, Celebration, United States of America

*Current national trends in the management of locally advanced prostate cancer with radical therapies: Results from the English National Prostate Cancer Audit

By: Sujenthiran A., Nossiter J., Charman S., Aggarwal A., Cathcart P., Payne H., Clarke N., Van Der Meulen J.

Institutes: Royal College of Surgeons, Clinical Effectiveness Unit, London, United Kingdom, 2Guy's and St Thomas' NHS Foundation Trust, Dept. of Urology, London, United Kingdom, 3University College London Hospitals, Dept. of Oncology, London, United Kingdom, 4The Christie and Salford Royal NHS Foundation Trusts, Dept. of Urology, London, United Kingdom
MRI/US fusion office-based targeted cryoablation with local anesthesia
Institutes: Urological Research Network, Dept. of Urology, Miami Lakes, United States of America

Summary
E. Barret, Paris (FR)
Renal cell carcinoma treatment: The search for the right strategy
Poster Session 58

Sunday, 26 March
15:45 - 17:15

Location: Room 7, Capital suite (level 3)
Chairs: S. Fernández-Pello Montes, Gijón (ES)
F. Porpiglia, Turin (IT)
I. Sinescu, Bucharest (RO)

Aims and objectives of this session
To discuss various aspects which impact the indication for RCC therapy.

Poster viewing of 20 minutes. Presentations will take place on stage. Standard presentations are 2 minutes in length, followed by 2 minutes for discussion.

769 Modified 5-item frailty index is associated with increased healthcare resource utilization following elective minimally invasive radical nephrectomy
By: Xia L., Taylor B., Guzzo T.
Institutes: University of Pennsylvania, Perelman School of Medicine, Division of Urology, Dept. of Surgery, Philadelphia, United States of America

770 Is a preoperative low ejection fraction a risk factor for complications and impaired survival in renal cancer patients who undergo surgery? Results from a propensity-score matching with non cardiopathic counterparts
Institutes: IRCCS San Raffaele, Dept. of Urology, Division of Oncology/Unit of Urology, URI, Milan, Italy, IRCCS San Raffaele, Dept. of Cardiology, Milan, Italy

771 The ability of three comorbity indeces to predict postosperative mortality in renal cell carcinoma patients: The impending need of a new disease-specific index
Institutes: IRCCS Ospedale San Raffaele, Urological Research Institute, Dept. of Oncology and Urology, Milan, Italy

772 Should partial nephrectomy be considered an imperative indication in stage II chronic kidney disease?
Institutes: Moores Cancer Center, Dept. of Urology, La Jolla, United States of America, 2Spectrum Health, Dept. of Urology, Grand Rapids, United States of America, 3San Raffaele Scientific Institute, Dept. of Urology, Milan, Italy

773 Tumor size is associated with compensatory hypertrophy in the contralateral kidney before and after radical nephrectomy in patients with renal cell carcinoma
By: Park B.H., Bae S.R., Lee Y.S., Kang S.H., Han C.H.
Institutes: Uijeongbu St. Mary's Hospital, Dept. of Urology, Uijeongbu-Si, South Korea

774 Clinical application of calculated split renal volume using computed tomography-based renal volumetry after partial nephrectomy: Correlation with 99mTc-DMSA renal scan data
By: Lee C.H., Ku J.Y., Ha H.K.
Institutes: Pusan National University Hospital, Dept. of Urology, Busan, South Korea
775

Functional data as assessed by renal scintigraphy and volumetric assessment on CT-scan prior and after partial nephrectomy. Is there a correlation?
By: Porpiglia F.1, Bertolo R.1, Amparore D.1, Piramide F.1, Checcucci E.1, Angusti T.2, Barrera M.3, Sardo D.1, Velti A.3, Mele F.1, Fiori C.1
Institutes: San Luigi Hospital, Dept. of Urology, Turin, Italy, 2San Luigi Hospital, Dept. of Nuclear Medicine, Turin, Italy, 3San Luigi Hospital, Dept. of Radiology, Turin, Italy

776

Characterisation of solid renal tumours with magnetic resonance elastography (MRE) at 3T: Integrating biomechanical, morphological and functional assessment
By: Prezzi D.1, Neji R.2, Stirling J.1, Jeljeli S.1, Verma H.3, O’Brien T.4, Challacombe B.4, Fernando A.4, Chandra A.4, Sinkus R.5, Goh V.1
Institutes: King's College London, Dept. of Cancer Imaging, London, United Kingdom, 2Siemens Healthineers, Dept. of MR Research Collaborations, Frimley, United Kingdom, 3Guy’s and St Thomas’ NHS Foundation Trust, Dept. of Radiology, London, United Kingdom, 4Guy’s and St Thomas’ NHS Foundation Trust, Dept. of Urology, London, United Kingdom, 5King’s College London, Dept. of Biomedical Engineering, London, United Kingdom, 6Guy’s and St Thomas’ NHS Foundation Trust, Dept. of Pathology, London, United Kingdom

777

Discrimination of malignant and benign kidney tissue with 1064 nm dispersive Raman spectroscopy
By: Haifler M.1, Pence I.2, Ristau B.3, Greenberg R.1, Chen D.1, Smaldone M.1, Kutikov A.1, Viterbo R.1, Uzzo R.1, Zisman A.2, Mahadeven-Jensen A.2, Patil C.4
Institutes: Fox Chase Cancer Center, Dept. of Urology, Philadelphia, United States of America, 2Vanderbilt University, Dept. of Biomedical Engineering, Nashville, United States of America, 3Assaf Harofe Medical Center, Dept. of Urology, Be’er Ya’akov, Israel, 4Temple University, Dept. of Biomedical Engineering, Philadelphia, United States of America

778

Topographic distribution of sentinel lymph nodes in patients with renal tumours
By: Kuusk T.1, Grivas N.1, Donswik M.2, Prevoo W.1, Horenblad S.1, Bex A.1
Institutes: Netherlands Cancer Institute, Dept. of Urology, Amsterdam, The Netherlands, 2Netherlands Cancer Institute, Dept. of Nuclear Medicine, Amsterdam, The Netherlands, 3Netherlands Cancer Institute, Dept. of Radiology, Amsterdam, The Netherlands

779

The effect of anatomical location of retroperitoneal lymph node metastases on cancer specific survival in patients with clear cell renal cell carcinoma
By: Nini A.1, Larcher A.1, Terrone C.2, Volpe A.2, Muttin F.1, Ripa F.1, Regis F.2, Lucianò R.3, Briganti A.1, Bertini R.1, Montorsi F.1, Capitanio U.1
Institutes: IRCCS San Raffaele, Dept. of Urology, Division of Oncology, Milan, Italy, 2University Hospital Maggiore Della Carità, University of Piemonte Orientale, Dept. of Urology, Novara, Italy, 3IRCCS San Raffaele, Dept. of Pathology, Milan, Italy

780

Lymph node dissection is not associated with increased 30-day complications among patients undergoing radical nephrectomy for renal cell carcinoma: A propensity-score based analysis
By: Gershman B.1, Moreira D.2, Thompson R.H.3, Boorjian S.3, Lohse C.4, Costello B.5, Cheville J.6, Leibovich B.3
Institutes: Rhode Island Hospital And The Miriam Hospital, Dept. of Urology, Providence, United States of America, 2University of Illinois, Dept. of Urology, Chicago, United States of America, 3Mayo Clinic, Dept. of Urology, Rochester, United States of America, 4Mayo Clinic, Health Sciences Research, Rochester, United States of America, 5Mayo Clinic, Dept. of Oncology, Rochester, United States of America, 6Mayo Clinic, Dept. of Pathology, Rochester, United States of America

V14

Laparoscopic inter-aorto-caval lymph-node dissection for RCC
By: Bass R., Sidi A., Tsivian A.
Institutes: E. Wolfson M. C., Dept. of Urologic Surgery, Holon, Israel
**EBU Session: Postgraduate training and education in European urology**

**Special session**

**Sunday, 26 March**  
15:45 - 16:45

**Location:** Room 9, Capital suite (level 3)  
**Chairs:** A.J. Figueiredo, Coimbra (PT)  
A. Papatsoris, Marousi - Athens (GR)

**Aims and objectives of this session**  
The common purpose of all urologists is the best care for the patient. The EBU in collaboration with the EAU and national urological organisations is concerned with the standards of training and education for urologists of the present and the future. The aim of this session is to explore current and future needs.

<table>
<thead>
<tr>
<th>Time</th>
<th>Event</th>
<th>Speaker(s)</th>
</tr>
</thead>
</table>
| 15:45 - 15:50 | **Introduction: The European Board of Urology and its role**   | A.J. Figueiredo, Coimbra (PT)  
A. Papatsoris, Marousi - Athens (GR) |
| 15:50 - 16:00 | **Standards for teaching and teachers in urology** | J.D. Nawrocki, Brighton (GB) |
| 16:00 - 16:10 | **Competence-based training and revalidation** | A. Antoniewicz, Warsaw (PL) |
| 16:10 - 16:20 | **Continuing medical education and professional development** | K.A. German, Birkirkara (MT) |
| 16:20 - 16:30 | **The Young Academic Urologist’s (YAU) perspectives in training** | M.S. Silay, Istanbul (TR) |
| 16:30 - 16:40 | **Discussion** | |
| 16:40 - 16:45 | **Conclusion** | A.J. Figueiredo, Coimbra (PT)  
A. Papatsoris, Marousi - Athens (GR) |
ESU/ESUT Hands-on Training Course in Transurethral therapy of LUTS - Bipolar TURP

**Location:** Room Europe, Exhibition Hall (Level 1)

**Chair:** S.M. Haensel, Rotterdam (NL)

**Aims and objectives of this session**

- The participants will be able to interact with tutors and gain valuable insights into the tips and tricks of Bipolar TURP

**Course description:**

The European School of Urology (ESU) and the EAU Section of Uro-Technology (ESUT) offer an intensive hands-on training course with different models focussing on the endoscopic management of LUTS. The delegates will be taken through a sequential programme of Bipolar TURP using normal endoscopic instruments in different models. A video demonstrating the different steps and tasks of the procedures will be presented and afterwards the delegates will be instructed according to their level of experience in small teams at the models. Finally, all remaining questions can be answered and discussed with all tutors including the demonstration of tips and tricks.

**Target audience:** Beneficial for novice and experienced surgeons wishing to learn the more about the procedure

V. Eret, Plzeň (CZ)
M.C. Klitsch, Vienna (AT)
C.M. Cracco, Torino (IT)
Aims and objectives of this session
The European training in basic laparoscopic urological skills (E-BLUS) is a programme offered to residents and urologists who want to improve the basic skills in laparoscopy. It is a unique opportunity to train with international experts in laparoscopy. The E-BLUS programme includes:

- Hands-on Training (HOT) courses of different levels carried out under the guidance of experienced tutors
- A set of training-box exercises developed and validated by the Dutch project Training in Urology (TiU) to train basic skills needed in urological laparoscopy
- E-BLUS examination and certification
- An online theoretical course

K. Ahmed, London (GB)
C.S. Biyani, Leeds (GB)
T. Kalogeropoulos, Athens (GR)
S. Barmoshe, Brussels (BE)
G. Pini, Milano (IT)
O. Rodriguez Faba, Barcelona (ES)
Management of prostate cancer

Plenary Session 05

Location: eURO Auditorium (Level 0)
Chairs: A. Briganti, Milan (IT)
M. Wirth, Dresden (DE)

Aims and objectives of this session
The aim of this session is to discuss and debate about the role of screening, early detection and optimal treatment of localised prostate cancer. The role of screening based on the most updated results of prospective randomised studies will be debate and different PSA-based approaches will be discussed. In addition, strengths and limits of prostate MRI in improving our ability to detect of clinically significant prostate cancer will be covered. Finally, the optimal management of localised prostate cancer including local treatment and active surveillance will be discussed.

During the plenary sessions, French and Spanish translation will be provided. Please collect your headset in the session room prior to the start of the session and return it after the session.

Meet the speakers of the plenary session:
Delegates are able to meet the speakers of the plenary session immediately at the end of the session in the foyer of the eURO Auditorium (Level 0). Do not miss this opportunity to meet and greet the speakers and to consult them for any questions you may have.

07:30 - 08:00
Debate Prostate cancer screening: Time to change recommendations for PSA testing?
Yes
J. Hugosson, Göteborg (SE)
No
R.L. Grubb III, St. Louis (US)

08:00 - 08:30
Debate MRI prior to biopsy – Results from the PROMIS trial
Presenter
H.U. Ahmed, London (GB)
Discussant
J. Walz, Marseille (FR)

08:30 - 09:00
Debate Should we change our strategy in primary prostate biopsy?
mpMRI targeted biopsies are sufficient
P.A. Pinto, Bethesda (US)
Systematic biopsy is essential
G. Ploussard, Toulouse (FR)

09:00 - 09:25
Debate Lessons from the ProtecT trial
<table>
<thead>
<tr>
<th>Time</th>
<th>Event</th>
</tr>
</thead>
<tbody>
<tr>
<td>09:00 - 09:15</td>
<td><strong>Presenter</strong> F.C. Hamdy, Oxford (GB)</td>
</tr>
<tr>
<td>09:15 - 09:25</td>
<td><strong>Discussant: Putting ProtecT into context</strong> N. Mottet, Saint-Étienne (FR)</td>
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<tr>
<td>09:25 - 09:55</td>
<td><strong>Debate</strong> Active surveillance for Gleason 3+4 prostate cancer</td>
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<td><strong>Moderator:</strong> A. Rannikko, Helsinki (FI)</td>
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<tr>
<td>09:25 - 09:40</td>
<td><strong>Pro (US)</strong> M.R. Cooperberg, San Francisco (US)</td>
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<tr>
<td>09:40 - 09:55</td>
<td><strong>Con (EU)</strong> M. Graefen, Hamburg (DE)</td>
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<tr>
<td>09:55 - 10:15</td>
<td><strong>State-of-the-art lecture</strong> Hereditary prostate cancer</td>
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<td>P. Walsh, Baltimore (US)</td>
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<tr>
<td>10:15 - 10:25</td>
<td><strong>Late breaking news</strong> The impact of dutasteride/tamsulosin combination therapy on sexual function in sexually active men with benign prostatic hyperplasia</td>
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<td></td>
<td>C.G. Roehrborn, Dallas (US)</td>
</tr>
<tr>
<td>10:25 - 10:30</td>
<td><strong>Discussant:</strong> M. Gacci, Florence (IT)</td>
</tr>
</tbody>
</table>
EAU Consensus Highlights and Late Breaking News

Monday, 27 March
07:30 - 08:00

Location: Room Copenhagen, North Hall (Level 1)
Chairs: F.C. Burkhard, Berne (CH)

07:30 - 07:40
EAU Consensus update Should we be using mesh for treatment of stress urinary incontinence and pelvic organ prolapse in 2017?
D.M. Castro Díaz, La Laguna Santa Cruz Tenerife (ES)

07:40 - 07:52
Late breaking news ProtecT Update: Pathological features of patients with clinical progression
R. Bryant, Oxford (GB)

07:52 - 08:00
Discussant:
C. Stief, Munich (DE)
**Functional urology**

**Plenary Session 06**

**Location:** Room Copenhagen, North Hall (Level 1)

**Chairs:** F.C. Burkhard, Berne (CH)
D.J.M.K. De Ridder, Leuven (BE)

**Aims and objectives of this session**
Selected functional urology topics will be presented. The current state of the art on the role of the urothelium, the management of MS and BPS, the role of ISD and the EAU standpoint in the use of meshes for prolapse will be discussed.

During the plenary sessions, French and Spanish translation will be provided. Please collect your headset in the session room prior to the start of the session and return it after the session.

Meet the speakers of the plenary session:
Delegates are able to meet the speakers of the plenary session immediately at the end of the session in the foyer of the Room Copenhagen (North Hall, Level 1). Do not miss this opportunity to meet and greet the speakers and to consult them for any questions you may have.

<table>
<thead>
<tr>
<th>Time</th>
<th>Event Description</th>
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<tbody>
<tr>
<td>08:00 - 08:15</td>
<td><strong>State-of-the-art lecture</strong> Urothelium - The bladder's brain? W.L.M. Everaerts, Leuven (BE)</td>
</tr>
<tr>
<td>08:15 - 09:00</td>
<td><strong>Case discussion</strong> How to manage complex neuro-urological patients?</td>
</tr>
<tr>
<td>08:15 - 08:22</td>
<td><strong>Case presenter</strong> F. Van Der Aa, Leuven (BE)</td>
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<tr>
<td>08:22 - 08:32</td>
<td><strong>Dementia</strong> J.N. Panicker, London (GB)</td>
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<tr>
<td>08:32 - 08:42</td>
<td><strong>Multiple sclerosis</strong> B. Dybowski, Warsaw (PL)</td>
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<tr>
<td>08:42 - 08:52</td>
<td><strong>Stroke</strong> P. Denys, Garches (FR)</td>
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<tr>
<td>08:52 - 09:00</td>
<td><strong>Discussion</strong></td>
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<tr>
<td>09:00 - 09:30</td>
<td><strong>Case discussion</strong> Have new technologies superceded standard TURP?</td>
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<tr>
<td>09:00 - 09:15</td>
<td><strong>Case presenter</strong> A. Giannantoni, Perugia (IT)</td>
</tr>
<tr>
<td>09:15 - 09:30</td>
<td><strong>Discussant</strong> J-N.L. Cornu, Rouen (FR)</td>
</tr>
</tbody>
</table>
09:30 - 09:45  
**State-of-the-art lecture** EAU standpoint on meshes  
T. Tarcan, Istanbul (TR)

09:45 - 10:15  
**Debate** Intrinsic sphincter deficiency: Is it worth diagnosing?

09:45 - 10:00  
**Pro**  
N.I. Osman, Sheffield (GB)

10:00 - 10:15  
**Con**  
G. Van Koeveringe, Maastricht (NL)

10:15 - 10:30  
**Société Internationale d’Urologie (SIU) lecture** Complications after treatment of prostate cancer: How bladder function influences therapy and outcome  
M. Fisch, Hamburg (DE)
Leadership and the EAU
Special session

Location: Room 9, Capital suite (level 3)
Chair: J.P.M. Sedelaar, Nijmegen (NL)

Monday, 27 March
08:30 - 11:30

08:30 - 08:45
Welcome
J.P.M. Sedelaar, Nijmegen (NL)

08:45 - 09:45
Personal behaviour and leadership
Moderator: H. Rijksen, Maarsbergen (NL)
What are my leadership styles?
What are the preferences?
Can I flex my style?
Am I effective?

09:45 - 10:15
Insights in your organisational patterns and symptoms
Moderator: J. Zijlstra, Maarsbergen (NL)
Do we recognise our system?
Should I intervene?
What is my role as a leader?

10:15 - 11:00
Ambidexterity
Moderator: H. Rijksen, Maarsbergen (NL)
Management and leadership
The difference between leadership and management

On the floor and on the balcony

10:45 - 11:30
Adaptive challenges

10:45 - 11:30
Moderator:
J. Zijlstra, Maarsbergen (NL)

Theory adaptive leadership

When is it an adaptive challenge?

Why do we need a technical fix?

Am I effective?
Aims and objectives of this session
This course provides state-of-the-art information on urological aspects of diagnosis and therapy of modern reproductive medicine. Diagnostic procedures should be standardised and coordinated in a timely fashion for both partners, focusing on the possible urological, hormonal and genetic causes of male infertility. In terms of therapy, this course will provide updated information on evidence based data and will discuss the importance of varicoceles in male infertility. We will show microsurgical techniques on video and explain why proper training and skills perfection is key to successful case management. A successful IVF/ICSI outcome depends upon the use of state-of-the-art techniques for sperm retrieval and sperm preparation. We will also provide information on genetic aspects and stress the responsibility of the urologist as an adviser and gatekeeper for the treatment of the infertile couple.

08:30 - 11:30 Diagnostic work-up, medical treatment
A. Salonia, Milan (IT)

08:30 - 11:30 Pathophysiology, diagnosis and treatment of varicocele
W. Aulitzky, Vienna (AT)

08:30 - 11:30 Microsurgical refertilisation
W. Aulitzky, Vienna (AT)

08:30 - 11:30 Sperm retrieval techniques and genetic aspects of IVF/ICSI
A. Salonia, Milan (IT)
Ultrasound in urology
ESU Course 36

Location: Room 11, Capital suite (level 3)
Chair: T. Loch, Flensburg (DE)

Aims and objectives of this session
Ultrasound is the basic imaging tool of the urologist and almost all urologists are using ultrasound in daily practice. Despite this, training and teaching of urological ultrasound is not provided in a satisfactory manner. The aim of the course is to provide the technical basics and standards for the use of ultrasound in urology. After the course the delegate should know the ideal settings for reliable and informative urological ultrasound as well as the normal and pathological findings.

• Covering urological organs: kidney, ureter, bladder, testis and penis
• Standard patient positioning
• Best choice of transducers and settings
• Standard operating procedures (SOP)
• Normal, benign and malignant pathologic findings
• Interventional and intraoperative ultrasound.

08:30 - 11:30
Technical basics and new technologies
T. Loch, Flensburg (DE)

08:30 - 11:30
Standardisation, tuning, acquisition and reporting of ultrasound exams
M. Ritter, Mannheim (DE)

08:30 - 11:30
Ultrasound of the kidney and ureter
M. Ritter, Mannheim (DE)

08:30 - 11:30
Ultrasound of the bladder
T. Loch, Flensburg (DE)

08:30 - 11:30
Ultrasound of the testis
T. Loch, Flensburg (DE)

08:30 - 11:30
Ultrasound of the penis
M. Ritter, Mannheim (DE)
**Aims and objectives of this session**

This course was updated significantly in 2016 (more cases, other subjects and more interaction) which was evaluated in a very positive way by the participants. Therefore, we chose to keep the course unchanged in 2017.

After discussing diagnostic opportunities of NMIBC, we will spent considerable time on the technique of TUR, including tips, potential problems, en bloc resection, TUR in difficult situations and TUR with enhanced imaging. We will illustrate this with video’s and discuss pitfalls with the audience.

Additional risk adapted intravesical treatment including new modalities, including limitations of these recommendations, will be discussed next.

After that, we will discuss daily problems with regard to complications during and after intravesical therapy and how to prevent and treat that.

Finally a topic that remains a clinical problem remains on the program: how to deal with abnormal cytology including locations outside the bladder.

Since we try to keep the course as practical in interactive as possible, with case discussions, videos, feedback and time for Q&A, we might not cover all topics as we experienced in 2016 in Munich. However, the lively discussions and interaction was highly appreciated.

In the end we hope that attendees will have updated their guideline knowledge, but also know what (not) to do in exceptional or complicated cases, and what alternatives could be.

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**Scientific Programme**

**Monday, 27 March**

**08:30 - 11:30**

**Introduction**

J.A. Witjes, Nijmegen (NL)

**Diagnosis, markers and innovations**

J. Palou, Barcelona (ES)

**TUR technique: Tips and tricks, problems and bloc resection, TUR at difficult places, Re-TUR: Enhanced imaging (including many video’s)**

M. Babjuk, Prague (CZ)

**Risk groups and guideline treatment: What is clearly established**

J.A. Witjes, Nijmegen (NL)

**Comments on guideline treatment including BCG shortage and new treatment modalities**

M. Babjuk, Prague (CZ)

**Complications of intravesical therapy**

J.A. Witjes, Nijmegen (NL)

**How to deal with abnormal cytology including locations outside the bladder (UUT and urethra) and its limitations**

J. Palou, Barcelona (ES)
Percutaneous nephrolithotripsy (PCNL)

ESU Course 38

Monday, 27 March
08:30 - 11:30

Location: Room 14, Capital suite (level 3)
Chair: E. Liatsikos, Patras (GR)

Aims and objectives of this session
Aim of this course is to describe in detail the surgical techniques of all available treatment options in percutaneous surgery of renal stones. In addition, to tips and tricks aiming into improving the efficacy of the operation, the most common complications associated with the procedure will be reviewed focusing on their prevention and proper management.

Objectives
• Describe the basic percutaneous nephrolithotripsy techniques
• Provide tips to improve the efficacy of the operation
• Provide evidence on the comparison of percutaneous with ureteroscopic and extracorporeal treatment options; Which approach for which stone.
• Describe associate complications including their management

08:30 - 11:30
Guidelines on stone treatment
T. Knoll, Sindelfingen (DE)

08:30 - 11:30
PCNL instrumentation – Suite organisation, wires, dilators and lithotriptors
C.M. Scoffone, Torino (IT)

08:30 - 11:30
From Skin to Stone: Step-by-Step access using only fluoroscopy (Prone position)
E. Liatsikos, Patras (GR)

08:30 - 11:30
From Skin to Stone: Step-by-Step access using US and fluoroscopy (Supine position)
C.M. Scoffone, Torino (IT)

08:30 - 11:30
MiniPerc - Indications, equipment and technique
T. Knoll, Sindelfingen (DE)

08:30 - 11:30
Tips and tricks in PCNL
E. Liatsikos, Patras (GR)

08:30 - 11:30
Round table: Complications of PCNL: Diagnosis, management, prevention
T. Knoll, Sindelfingen (DE)
E. Liatsikos, Patras (GR)
C.M. Scoffone, Torino (IT)
Small renal masses: From concepts to tips and tricks in daily management
ESU Course 39

Monday, 27 March
08:30 - 11:30

Location: Room 15, Capital suite (level 3)
Chair: P. Gontero, Turin (IT)

Aims and objectives of this session
- The course aims to address the multiplicity of treatment options for small renal masses.
- Essential concepts to guide the clinical decision making process will be interactively discussed with the help of clinical cases.
- Practical tips for a safe and effective treatment delivery will be provided on the current standard of ablative therapies and minimally invasive surgery.
- Attendees should become familiar on when and how to propose active surveillance in their daily clinical practice.

08:30 - 11:30

Introduction
P. Gontero, Turin (IT)

08:30 - 11:30

Active surveillance and discussion of clinical cases
P. Gontero, Turin (IT)

08:30 - 11:30

Ablative therapies: Which technique and why?
J.J.M.C.H. De La Rosette, Amsterdam (NL)

08:30 - 11:30

Minimally invasive surgery in SRMs: How to safely do it when you get started
F. Keeley, Bristol (GB)

08:30 - 11:30

Indications for surgery vs ablative therapies
P. Gontero, Turin (IT)

08:30 - 11:30

Clinical case discussion
J.J.M.C.H. De La Rosette, Amsterdam (NL)
P. Gontero, Turin (IT)
F. Keeley, Bristol (GB)
Updated renal, bladder and prostate cancer guidelines 2017: What has changed?

ESU Course 40

Monday, 27 March
08:30 - 11:30

Location: Room 17, Capital suite (level 3)

Chair: A. Volpe, Novara (IT)

Aims and objectives of this session
During the course recent practice changing alterations in the guidelines will be discussed. Based on the clinical recommendations the highlights of the guidelines one prostate, renal and bladder cancer as changed in the 2016 updates will be presented and illustrated by clinical cases. A basic knowledge of the guidelines information is assumed for participating trainees.

08:30 - 11:30
Introduction
A. Volpe, Novara (IT)

08:30 - 11:30
Update renal cancer: Localized
A. Volpe

08:30 - 11:30
Discussion

08:30 - 11:30
Update renal cancer: Metastasized
A. Volpe

08:30 - 11:30
Discussion

08:30 - 11:30
Update bladder cancer: Non-muscle invasive
B.W.G. Van Rhijn, Amsterdam (NL)

08:30 - 11:30
Discussion

08:30 - 11:30
Update bladder cancer: Muscle invasive
B.W.G. Van Rhijn, Badhoevedorp (NL)

08:30 - 11:30
Discussion

08:30 - 11:30
Update prostate cancer: Localized
R.J.A. Van Moorselaar, Amsterdam (NL)

08:30 - 11:30
Discussion

08:30 - 11:30
Update prostate cancer: Metastasized
R.J.A. Van Moorselaar, Amsterdam (NL)
ESU/ESUT Hands-on Training Course in Basic Laparoscopy

**Location:** Room Europe, Exhibition Hall (Level 1)

**Aims and objectives of this session**
- You will improve your laparoscopic skills such as depth perception and bimanual dexterity

**Course description:**
In this course basic laparoscopic and suturing skills can be learned and trained. Psychomotor skills such as depth perception and bimanual dexterity are trained by the validated exercises of the European Basic Laparoscopic Urological Skills (E-BLUS) training programme. Experienced laparoscopist-tutors will guide you to master such basic laparoscopy skills as instrument handling, pattern cutting and intracorporal suturing. This course can be used as an additional training to prepare for the E-BLUS examination. Finally, all remaining questions can be answered and discussed with all tutors including the demonstration of tips and tricks.

**Target audience:** Urologists with a basic level in laparoscopy

A.S. Gözen, Heilbronn (DE)
G. Pini, Milano (IT)
O. Rodriguez Faba, Barcelona (ES)
R.E. Sanchez-Salas, Paris (FR)
To be confirmed
C. Wagner, Gronau (DE)
ESU/ESFFU Hands-on Training Course in Urodynamics

HOT07

Monday, 27 March
09:30 - 12:30

Location: Room South America, Exhibition Hall (Level 1)

Chair: H. Hashim, Bristol (GB)

Aims and objectives of this session
At the end of the workshop delegates should feel more confident in their practice of urodynamics.

Course description:
This course aims to provide a practical course offering an interactive “hands-on” environment for doctors, nurses and technicians to improve their skills in urodynamics, with an emphasis on practical aspects including equipment used, interpretation of traces, quality control and trouble-shooting. The use of recorded tests, access to equipment and small groups means that individual problems can be addressed. All the speakers are involved in similar “hands-on” courses, which have run successfully in the United Kingdom and abroad. The small group format has been shown to work well in addressing individual needs. Access to teaching aids and equipment will simulate the clinical scenario as much as possible within the constraints of the conference setting.

Target audience: For all participants with an interest in Urodynamics

A. Gammie, Bristol (GB)
A. Garcia Mora, Mexico City (MX)
L. Thomas, Bristol (GB)
ESU Hands-on Training Course in Non-technical skills
HOT35

Location: Hands-on Training Area, Exhibition Hall (Level 1)

Chairs: K. Ahmed, London (GB)
M.S. Khan, Orpington (GB)

Aims and objectives of this session
This course aims to introduce the concept of non-technical skills and provide an interactive “hands-on” environment to practicing urologists and residents-in-training, in the hope of improving and raising self-awareness for everyday operating room practice.

Course description:
The operating room is a complex and highly stressful environment that requires interaction between a large team to achieve successful outcomes for the patient. This requires not only effective procedure-specific technical skills, but also additionally a range of non-technical skills. The importance of non-technical skills is often overlooked but they are unfortunately a major cause of surgical error. Like technical skills, which are acquired over many years of practice and training, non-technical skills are not innate traits and must also be developed through training and experience. This course will serve to introduce practicing urologists to the concept of non-technical skills using an interactive full immersion simulation environment, developed by Kneebone et al. (Imperial College London), whilst undertaking common scenarios in urolithiasis. Participants will be evaluated by experts in surgical education and provided individual feedback with view for further self-improvement.

Supporting faculty:
H. Aya, London (GB)
A. Aydin, London (GB)
O. Brunckhorst, London (GB)
F. Dar, London (GB)
M. Husnain Iqbal, London (GB)
J. Moody, London (GB)
N. Raison, London (GB)

Target audience:
All urological surgeons and residents in training
Lymph node surgery in uro-oncology: Semi-Live
Thematic Session 10

Location: Room Madrid, North Hall (Level 1)
Chair: M. Hohenfellner, Heidelberg (DE)

Aims and objectives of this session

10:30 - 12:00
Panel of commentators
J.E. Gschwend, München (DE)
R. Reiter, Los Angeles (US)
N. Suardi, Milan (IT)

10:30 - 10:50
Video presentation Radio-guided PSMA lymph node dissection in prostate cancer
T. Maurer, Munich (DE)

10:50 - 11:00
Panel discussion

11:00 - 11:20
Video presentation Endoscopic inguinal lymph node dissection in penile cancer
C. Schwentner, Stuttgart (DE)

11:20 - 11:30
Panel discussion

11:30 - 11:50
Video presentation Extended lymph node dissection in bladder cancer
S. Lerner, Houston (US)

11:50 - 12:00
Panel discussion
Complications: Radical cystectomy
Thematic Session 11

Location: Room Milan, North Hall (Level 1)
Chair: J. Rassweiler, Heilbronn (DE)

Aims and objectives of this session
Radical cystectomy with urinary diversion is one of the most challenging procedures in urology independent from the approach (open, laparoscopic, robot-assisted). We have subdivided this session discussing the most frequent complications, focussing on specific techniques, and emphasizing the role of optimise perioperative management presented by an experienced faculty. There will be room for discussion and interaction.

10:30 - 10:45
How I solve Vascular injuries
M.S. Michel, Mannheim (DE)

10:45 - 11:00
How I solve Intestinal injuries
P. Chlosta, Cracow (PL)

11:00 - 11:15
How I solve Extravasation
M. Fiedler, Heilbronn (DE)

11:15 - 11:30
How I solve Specific problems of robotic radical cystectomy
N.P. Wiklund, Stockholm (SE)

11:30 - 11:45
How I solve Optimal perioperative management
P.Y. Wüthrich, Berne (CH)

11:45 - 12:00
How I solve Specific problems of female neo-bladder
J.P. Bedke, Tübingen (DE)
### Male hypogonadism - What role for Testosterone Replacement Therapy (TRT)?

**Thematic Session 12**

**Location:** Room Paris, North Hall (Level 1)

**Chairs:** F.M.J. Debruyne, Arnhem (NL)
V.G. Mirone, Naples (IT)

<table>
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<tr>
<th>Time</th>
<th>Session</th>
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<tbody>
<tr>
<td>10:30 - 10:45</td>
<td><strong>Case presentation</strong>&lt;br&gt;F.M.J. Debruyne, Arnhem (NL)</td>
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<td>10:45 - 11:00</td>
<td><strong>The urologist as primary gatekeeper of men's health</strong>&lt;br&gt;N. Sofikitis, Ioannina (GR)</td>
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<tr>
<td>11:00 - 11:15</td>
<td><strong>Urological implications of male hypogonadism</strong>&lt;br&gt;G.R. Dohle, Rotterdam (NL)</td>
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<td>11:15 - 11:30</td>
<td><strong>The role of the urologist in TRT</strong>&lt;br&gt;A. Salonia, Milan (IT)</td>
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<td>11:30 - 11:45</td>
<td><strong>ReproUnion: Strategic partnership between EAU and the European Union</strong>&lt;br&gt;J.O.R. Sonksen, Herlev (DK)</td>
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<tr>
<td>11:45 - 12:00</td>
<td><strong>Panel discussion</strong>&lt;br&gt;Panel: F.M.J. Debruyne, Arnhem (NL)&lt;br&gt;G.R. Dohle, Rotterdam (NL)&lt;br&gt;V.G. Mirone, Naples (IT)&lt;br&gt;A. Salonia, Milan (IT)&lt;br&gt;N. Sofikitis, Ioannina (GR)&lt;br&gt;J.O.R. Sonksen, Herlev (DK)</td>
</tr>
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</table>
MRI in prostate cancer: Optimising interpretation by urologists and radiologists

Thematic Session 15

Monday, 27 March
10:30 - 12:00

Location: Room Amsterdam, North Hall (Level 1)

Chairs: H. Thoeny, Berne (CH)
A. Villers, Lille (FR)

Aims and objectives of this session
Prostate MRI is more and more frequently present in our patient evaluation for prostate cancer diagnosis, staging and treatment planning. As urologists we need to be confident in reading mpMRI, based on images and report from radiologists. This session will cover the PIRADS 2.0 scoring in clinical practice, the use of MRI guidance for prostate biopsy, and what to expect from your radiologist to get best mpMRI interpretation.

10:30 - 10:45 European Society of Urogenital Radiology (ESUR) lecture PI-RADS in clinical practice including differential diagnoses in prostate imaging
H. Thoeny, Berne (CH)

10:45 - 11:15 Reading and interpreting mpMRI: PIRADS 2.0

10:45 - 11:00 Presenter
M. de Rooij, Nijmegen (NL)

11:00 - 11:15 Discussant: Is PIRADS 2.0 standardised enough?
T. Polascik, Durham (US)

11:15 - 11:30 State-of-the-art lecture What do urologists need to know about mpMRI targeted biopsy?
S. Boxler, Bern (CH)

11:30 - 11:45 State-of-the-art lecture Levels of competence in mpMRI reporting
P. Puech, Lille (FR)

11:45 - 11:50 Associated video presentation

V44 Focal therapy with HIFU FocalOne device with MRI target fusion biopsy by KOELIS
By: Potiron E., Nevoux P., Rousseau T., Le Goguc G., Lacoste J.
Institutes: Clinique Urologique Nantes Atlantis, Nantes, France

11:50 - 12:00 Discussion
Rare and complex urogenital diseases and conditions

Thematic Session 14

**Location:** Room Berlin, North Hall (Level 1)

**Chairs:**
- M. Battye, Sheffield (GB)
- W.F.J. Feitz, Nijmegen (NL)
- M. Fisch, Hamburg (DE)

**Aims and objectives of this session**
Rare and complex urogenital diseases and conditions will give an update of the new European Reference Network (ERN) policy and programs. The EAU ERN structure, developments and patient participation will be discussed.

**Scientific Programme**

10:30 - 10:45  
**State-of-the-art lecture** Implementation of European Reference Networks  
E. Terol, Brussels (BE)

10:45 - 11:00  
**State-of-the-art lecture** European Reference Network for rare and complex urogenital diseases and conditions: eUROGEN  
M. Battye, Sheffield (GB)

11:00 - 11:15  
**State-of-the-art lecture** Rare uro-recto-genital anomalies  
I. De Blauw, Nijmegen (NL)

11:15 - 11:30  
**State-of-the-art lecture** Functional urogenital conditions and specialised surgery  
M. Fisch, Hamburg (DE)

11:30 - 11:45  
**State-of-the-art lecture** Rare urogenital tumors  
V. Sangar, Manchester (GB)

11:45 - 11:53  
**State-of-the-art lecture** Placing patients at the heart of European Reference Networks  
M. Bolz-Johnson, Brussels (BE)

11:53 - 12:00  
**State-of-the-art lecture** ERN-challenges and next steps from the patient representative’s perspective  
D. Aminoff, Rome (IT)
Kidney transplant and reconstructive surgery

Thematic Session 13

Monday, 27 March  
10:30 - 12:00

Location: Room Vienna, North Hall (Level 1)

Chairs: P. Kyzlasov, Moscow (RU)  
E. Lledó García, Madrid (ES)

Aims and objectives of this session

I hope that our Session will be useful for practicing urologists. We will see new approaches to therapy, interesting clinical cases and ways how to solve them. And, above all, we would like to see new scientists who can develop our direction.

10:30 - 10:50  
**Video presentation**  
Robotic kidney transplantation with transvaginal graft insertion

A. Alcaraz, Barcelona (ES)

10:50 - 11:00  
Panel of commentators  
To be confirmed

A. Breda, Barcelona (ES)  
J.D. Olsburgh, London (GB)

11:00 - 11:20  
**Video presentation**  
Endoscopic resolution of surgical challenges after kidney transplantation

F.J. Burgos Revilla, Madrid (ES)

11:20 - 11:30  
Panel of commentators

A. Chkhotua, Tbilisi (GE)  
A.J. Figueiredo, Coimbra (PT)  
M.J. Ribal, Barcelona (ES)

11:30 - 11:50  
**Video presentation**  
Special technical considerations in penile prosthesis implant in the kidney transplant candidate/recipient

R. Djinovic, Belgrade (RS)

11:50 - 12:00  
Panel of commentators

P. Ditonno, Bari (IT)  
I. Moncada, Madrid (ES)  
J.N. Tomada Marques, Porto (PT)
Killer bacteria and viruses in urology
Thematic Session 16

Monday, 27 March
10:30 - 12:00

Location: Room London, North Hall (Level 1)
Chairs: T.E. Bjerklund Johansen, Oslo (NO)
F.M.E. Wagenlehner, Giessen (DE)

Aims and objectives of this session
Infections have ever since accompanied mankind. It is only 80 years since infections have become successfully treatable diseases, by the development of effective anti-infective strategies.
In antibacterial treatment this success is going to be lost, by the increasing threat of antimicrobial resistance. This thematic session will focus on the current problems and evidence in treating infectious diseases in urology.

10:30 - 10:45
State-of-the-art lecture How can microbiome affect the urinary tract?
T.E. Bjerklund Johansen, Stavern (NO)

10:45 - 11:00
State-of-the-art lecture Management strategies for urogenital tuberculosis
E. Kulchavenya, Novosibirsk (RU)

11:00 - 11:15
State-of-the-art lecture HPV vaccination in adolescents
N. Martinez-Alier, London (GB)

11:15 - 11:30
State-of-the-art lecture Antibiotic stewardship
T. Cai, Trento (IT)

11:30 - 11:45
State-of-the-art lecture Current trends in the management of urosepsis
Z. Tandoğdu, Newcastle Upon Tyne (GB)

11:45 - 12:00
Associated abstract presentations

82
Detecting bacterial resistance in urine at the point of care via a custom tailored LAMP panel
By: Fritzenwanker M. ¹, Imirzalioglu C. ¹, Wagenlehner F. ², Chakraborty T. ¹, Schwengers O. ³, Blom J. ³
Institutes: ¹Justus-Liebig-Universität, Institut Für Medizinische Mikrobiologie, Giessen, Germany,
²Justus-Liebig-Universität, Klinik Für Urologie, Kinderurologie Und Andrologie, Giessen, Germany,
³Justus-Liebig-Universität, Dept. of Bioinformatics and Systems Biology, Giessen, Germany

State-of-the-art lecture

144
Adhesive siliconmicropillar arrays for bacteria capture: A method for rapid antibiotic susceptibility testing
By: Leonard H. ², Halachmi S. ¹, Ofer N. ¹, Ben Dov N. ², Segal E. ²
Institutes: ¹Bnai-Zion Medical Center, Dept. of Urology, Haifa, Israel, ²Technion Israeli Institute of
State-of-the-art lecture
Controversies in metastatic prostate cancer
Thematic Session 17

Location: Room Stockholm, North Hall (Level 1)
Chair: M-O. Grimm, Jena (DE)

Aims and objectives of this session
This session will summarise most recent developments in castration sensitive and castration resistant metastatic prostate cancer. In particular, surgical resection of oligometastatic disease, new biomarkers and targets are to be discussed as part of individualised patient care. Furthermore, the upcoming role of immunotherapy in prostate cancer will be presented.

10:30 - 10:50 Debate Is there a role for local treatment of oligometastatic disease?
10:30 - 10:40 Yes
M. Spahn, Berne (CH)
10:40 - 10:50 No
B. Tombal, Brussels (BE)

10:50 - 11:05 State-of-the-art lecture EAU Guidelines on mCRPC - An update
P. Cornford, Liverpool (GB)

11:05 - 11:07 Introduction Society for Urologic Oncology (SUO)
C.R. Chapple, Sheffield (GB)

11:07 - 11:20 Society for Urologic Oncology (SUO) lecture Current and future biomarkers in castration resistant prostate cancer
C.P. Evans, Sacramento (US)

11:20 - 11:35 State-of-the-art lecture Next generation targets for individualised treatment
J. De Bono, Sutton (GB)

11:35 - 12:00 State-of-the-art lecture Update on immunotherapy - Revival of the fittest?
K. Fizazi, Villejuif (FR)

11:50 - 12:00 Associated abstract presentation
748 Targeting androgen receptor variants by niclosamide overcomes resistance to abiraterone and enzalutamide
By: Liu C., Lou W., Pan C-X., Evans C., Gao A
Institutes: University of California Davis, Dept. of Urology, Sacramento, United States of America
## Robotic assisted radical prostatectomy - Semi-Live Masterclass

**Thematic Session 18**

**Location:** Room Munich, North Hall (Level 1)

**Chair:** P. Albers, Düsseldorf (DE)

### Aims and objectives of this session

The new format of semi-live surgical video presentations allows to compare and discuss different surgical techniques of robot-assisted radical prostatectomies. State-of-the-art surgeons are challenged by other state-of-the art surgeons on an exquisite international level. Aim of this session is to practically demonstrate pros and cons of a personally preferred surgical technique to allow the auditorium to make up its own mind regarding special surgical tips and tricks.

### State-of-the-art lecture

**V90**

**Saphenous-sparing laparoscopic inguinal lymphadenectomy**

By: Chiapparrone G., Rapisarda S., De Concilio B., Zeccolini G., Trombetta C., Celia A.

**Institutes:**
1. University of Trieste, Dept. of Urology, Trieste, Italy,
2. University of Catania, Dept. of Urology, Catania, Italy,
3. San Bassiano Hospital, Dept. of Urology, Bassano del Grappa, Italy

**Aims and objectives of this session**

State-of-the-art lecture

### Video presentation

**10:36 - 10:56**

**Conventional nerve-sparing robot assisted radical prostatectomy**

A. Mottrie, Aalst (BE)

**Aims and objectives of this session**

The aim is to show the ORSI technique of antegrade nerve sparing during RARP. According to the preoperative data, the right plane of dissection can be chosen in an oncological safe way. This video-based presentation will show tips & tricks.

### Panel discussion

**10:56 - 11:04**

### Video presentation

**11:04 - 11:24**

**Retzius-sparing robot assisted radical prostatectomy**

A. Bocciardi, Milan (IT)

**Aims and objectives of this session**

Retzius-sparing robotic prostatectomy has been developed in 2010. Since then, more than 1100 cases have been performed in Milan and several hundreds in other centers worldwide. The aim of this presentation are to provide a step-by-step guide to this kind of approach highlighting the functional advantages of the technique.

### Panel discussion

**11:24 - 11:32**

### Video presentation

**11:32 - 11:52**

**Management of inguinal hernias during robot assisted radical prostatectomy**

A.E. Canda, Ankara (TR)

**Aims and objectives of this session**
This presentation focuses on repair of inguinal hernias during robotic radical prostatectomy (RARP). Types of inguinal hernias, diagnosis, indications and contraindications for repair at the time of the RARP procedure, types and use of mesh materials during repair, preoperative and postoperative precautions will be discussed.

11:52 - 12:00
Panel discussion

10:30 - 12:00
Panel of commentators
M.R. Cooperberg, San Francisco (US)
R. Rabenalt, Düsseldorf (DE)
K.H. Rha, Seoul (KR)
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<th>Location:</th>
<th>Social Media Helpdesk, Boulevard (level 1)</th>
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<tr>
<td>Chair:</td>
<td>K.A.O. Tikkinen, Helsinki (FI)</td>
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</table>
### Posters & Videos: The Prize Winners

**Location:** e-Poster Area, North Hall (Level 1)

**Chair:** A. Stenzl, Tübingen (DE)

<table>
<thead>
<tr>
<th>Time</th>
<th>Prize Category</th>
<th>Title</th>
<th>Author(s)</th>
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<tbody>
<tr>
<td>11:00 - 11:10</td>
<td>3rd Prize Best Abstract Oncology</td>
<td>'11C-Choline versus 68ga-PSMA PET/CT scan for the detection of nodal recurrence from prostate cancer: Results from a large, multi-institutional salvage lymph node dissection series'</td>
<td>N. Fossati, Milan (IT)</td>
</tr>
<tr>
<td>11:20 - 11:30</td>
<td>1st Prize Best Abstract Non-Oncology</td>
<td>'Adrenal vein sampling vs. CT scan to determine treatment in primary aldosteronism: An outcome-based randomised diagnostic trial'</td>
<td>T. Dekkers, Nijmegen (NL)</td>
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<tr>
<td>11:30 - 11:43</td>
<td>1st Prize Best Video</td>
<td>'Trimodal (18) F-choline-PET/mpMRI/TRUS targeted prostate biopsies: First clinical experience'</td>
<td>J-L. Bonnal, Bachy (FR)</td>
</tr>
</tbody>
</table>
ESU/ESUT Hands-on Training Course in Basic laparoscopy
HOT48

**Location:** Room Europe, Exhibition Hall (Level 1)

**Monday, 27 March**
11:30 - 12:30

Aims and objectives of this session
• You will improve your laparoscopic skills such as depth perception and bimanual dexterity

Course description:
In this course basic laparoscopic and suturing skills can be learned and trained. Psychomotor skills such as depth perception and bimanual dexterity are trained by the validated exercises of the European Basic Laparoscopic Urological Skills (E-BLUS) training programme. Experienced laparoscopist-tutors will guide you to master such basic laparoscopy skills as instrument handling, pattern cutting and intracorporeal suturing. This course can be used as an additional training to prepare for the E-BLUS examination. Finally, all remaining questions can be answered and discussed with all tutors including the demonstration of tips and tricks.

Target audience: Urologists with a basic level in laparoscopy

A.S. Gözen, Heilbronn (DE)
G. Pini, Milano (IT)
O. Rodriguez Faba, Barcelona (ES)
R.E. Sanchez-Salas, Paris (FR)
S. Barmoshe, Brussels (BE)
C. Wagner, Gronau (DE)
<table>
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<tr>
<th>Location:</th>
<th>Social Media Helpdesk, Boulevard (level 1)</th>
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<tr>
<td>Chair:</td>
<td>K.A.O. Tikkinen, Helsinki (FI)</td>
</tr>
<tr>
<td>Monday, 27 March</td>
<td>11:30 - 12:00</td>
</tr>
</tbody>
</table>

Aims and objectives of this session
• To review mechanisms of continence in men and mechanisms of post surgical incontinence in men
• To analyse symptoms and to indicate conservative treatment
• To be able to select one surgical treatment, referring to literature and guidelines
• To learn about long term follow-up of each surgical technique and to be able to deliver the best and objective information to patients

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<th>Time</th>
<th>Session</th>
<th>Speaker</th>
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<tr>
<td>12:00 - 14:00</td>
<td><strong>Introduction</strong></td>
<td>E. Chartier-Kastler, Paris (FR)</td>
<td></td>
</tr>
<tr>
<td>12:00 - 14:00</td>
<td><strong>Aetiology</strong></td>
<td>F. Van Der Aa, Leuven (BE)</td>
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<tr>
<td>12:00 - 14:00</td>
<td><strong>Workout of post-surgical incontinence</strong></td>
<td>E. Chartier-Kastler, Paris (FR)</td>
<td></td>
</tr>
<tr>
<td>12:00 - 14:00</td>
<td><strong>Conservative treatment for post-surgical incontinence</strong></td>
<td>F. Van Der Aa, Leuven (BE)</td>
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</tr>
<tr>
<td>12:00 - 14:00</td>
<td><strong>Postsurgical LUTS</strong></td>
<td>F. Van Der Aa, Leuven (BE)</td>
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<tr>
<td>12:00 - 14:00</td>
<td><strong>Surgical treatment for post-surgical incontinence</strong></td>
<td>E. Chartier-Kastler, Paris (FR)</td>
<td></td>
</tr>
</tbody>
</table>
Prostate biopsy - tips and tricks
ESU Course 42

Location: Room 11, Capital suite (level 3)
Chair: P. Hammerer, Braunschweig (DE)

Aims and objectives of this session
• Provide an update on recent imaging techniques like TRUS, Elastography, Histoscanning, multiparametric magnetic resonance imaging (mpMRI) and nuclear imaging techniques for prostate cancer diagnosis.
• Explain standard reporting systems for ultrasound and mpMRI like PI-RADS
• Discuss different prostate biopsy techniques
• Tips and Tricks to reduce morbidity of prostate biopsies

12:00 - 14:00
Indications for TRUS and biopsy
P. Hammerer, Braunschweig (DE)

12:00 - 14:00
Practical aspects of TRUS and TRUS-guided biopsies
P. Hammerer, Braunschweig (DE)

12:00 - 14:00
Indications for rebiopsy
V. Scattoni, Milano (IT)

12:00 - 14:00
Update on new technical developments
V. Scattoni, Milano (IT)
General neuro-urology

ESU Course 43

Monday, 27 March
12:00 - 15:00

Location: Room 12, Capital suite (level 3)
Chair: F. Cruz, Porto (PT)

Aims and objectives of this session
The course aims at introducing the basic principles of the diagnostic work-up and of the management of the most common neurological micturition dysfunctions to urologists and residents. The early identification of common neurological micturition dysfunctions will contribute to increase the longevity and the quality of life of neurological patients.

The main aims are:
• To refresh the terminology and the specific methods of investigation in Neuro-Urology
• To review the most important urodynamics patterns found in patients with neurogenic micturition dysfunction
• To analyse the pharmacological and surgical options available for the management of the neuro-urological patient
• To update the indications of botulinum toxin type A in the management of the neuro-urological patient.

12:00 - 15:00
Introduction
F. Cruz, Porto (PT)

12:00 - 15:00
Diagnostics
M. J. Drake, Bristol (GB)

12:00 - 15:00
Therapy
F. Cruz, Porto (PT)

12:00 - 15:00
Case discussions
Renal transplantation: Technical aspects, diagnosis and management of early and late urological complications

**ESU Course 44**

**Monday, 27 March**

**12:00 - 14:00**

**Location:** Room 14, Capital suite (level 3)

**Chair:** F.J. Burgos Revilla, Madrid (ES)

**Aims and objectives of this session**

Renal transplant is an essential part of Urology. The aims of the course are:
- To show surgical techniques of organ procurement in deceased and living donation settings
- To establish the basic principles for evaluation of candidates to donation and recipients of kidney graft
- To show the different approaches and surgical details of kidney transplant in conventional and complex recipients
- To review the algorithms for diagnosis and treatment of medical and surgical complications after kidney transplantation

**12:00 - 14:00**

**Selection and urological preparation of transplant recipients; surgical aspects of nephrectomy in living and deceased donor**

A.J. Figueiredo, Coimbra (PT)

**12:00 - 14:00**

**Laparoscopic living donor nephrectomy: Technical aspects and controversies**

F.J. Burgos Revilla, Madrid (ES)

**12:00 - 14:00**

**Avoiding complications by proper techniques of renal transplantation; tricks and tips**

A.J. Figueiredo, Coimbra (PT)

**12:00 - 14:00**

**How to diagnose and manage postoperative and long-term complications following renal transplantation**

F.J. Burgos Revilla, Madrid (ES)
Oligometastatic prostate cancer
ESU Course 45

Monday, 27 March
12:00 - 14:00

Location: Room 15, Capital suite (level 3)
Chair: R.J. Karnes, Rochester (US)

Aims and objectives of this session
– Provide an introduction to working definition(s), background, and biology of oligometastatic prostate cancer
– Update the current molecular imaging to provide such a diagnosis
– Review the potential roles of surgery and/or radiation as metastasis directed therapy
– Understand opportunities and challenges in individualizing care of the oligometastatic prostate cancer patient

12:00 - 14:00
Introductions; Oligometastatic prostate cancer as a diagnosis
R.J. Karnes, Rochester (US)

12:00 - 14:00
Surgery for recurrent nodal metastasis with updates on molecular/PET imaging
A. Briganti, Milan (IT)

12:00 - 14:00
Radiation in oligometastatic prostate cancer (primary and recurrent) and clinical trial updates
P. Ost, Ghent (BE)

12:00 - 14:00
Surgery of primary oligometastatic prostate cancer (N1/M1)
R.J. Karnes, Rochester (US)

12:00 - 14:00
Further cases (case illustrations throughout)
A. Briganti, Milan (IT)
R.J. Karnes, Rochester (US)
P. Ost, Ghent (BE)

12:00 - 14:00
Questions audience
ESU/ESUI Hands-on Training Course in Urological ultrasound (abdominal ultrasound)

HOT50

Monday, 27 March
12:00 - 13:30

Location: Room North America, Exhibition Hall (Level 1)

Chair: T. Loch, Flensburg (DE)

Aims and objectives of this session
Ultrasound is an essential instrument in the management of urological patients, both in the diagnostic phase and during follow-up after treatment. It is also an evolving technology with increasing performance and is becoming cheaper, more available and user friendly. The knowledge and the use of this method should be part of the standard knowledge and armentarium of each urologist. This hands-on-course aims to provide urologists with the necessary baseline training to implement ultrasound as a routine diagnostic tool in daily practice. It will provide basic information by short and concise lectures followed by extensive practical exercise.

A.B. Galosi, Fermo (IT)
M. Ritter, Mannheim (DE)
C.B. Maccagnano, como (IT)
Personalised social media workshop for beginners

WS11

**Monday, 27 March**
12:00 - 12:30

**Location:** Social Media Helpdesk, Boulevard (level 1)

**Chair:** K.A.O. Tikkinen, Helsinki (FI)
Competing technologies in BPO surgery

Location: eURO Auditorium (Level 0)

Chairs: T.R.W. Herrmann, Hanover (DE)
        G. Muir, Dorking (GB)
        A.L. Pastore, Rome (IT)

Aims and objectives of this session
To view competing and new technologies in LUTS surgery – comparing techniques and philosophies of tissue removal with final outcomes in mind.

All presentations have a maximum length of 8 minutes, followed by 4 minutes of discussion.

V66
The evolution of Green laser (532-nm) techniques in the treatment of benign prostatic obstruction: Not only for PVP
By: Rijo E.¹, Lorente J.A.¹, Bielsa O.¹, Gomez-Sancha F.²
Institutes: Hospital Quiron Barcelona, Dept. of Urology, Barcelona, Spain, ²ICUA, Clinica CEMTRO, Dept. of Urology, Madrid, Spain

V67
Transurethral anatomical endoscopic enucleation of the prostate using diode laser versus bipolar: Surgery technique with 12-month outcomes in a double-centre randomised controlled trial
By: Liu C., Zou Z., Xu A., Chen B.
Institutes: Zhujiang Hospital of Southern Medical University, Dept. of Urology, Guangzhou, China

V68
Holmium laser enucleation of the prostate with real-time intraoperative transrectal ultrasound navigation, initial experience
By: Abdeev R.¹, Andrianov A.², Alekseev O.³, Apolikhin O.⁴, Kaprin A.⁵
Institutes: Scientific and Research Institute of Urology Named After N.A.Lopatkin, Dept. of Consultation and diagnosis, Moscow, Russia, ²Scientific Research Institute of Urology Named After N.A.Lopatkin, Dept. of Oncourology, Moscow, Russia, ³National Medical Research Radiological Centre of The Ministry of Health of The Russian Federation, M, Dept. of Oncourology, Moscow, Russia, ⁴Scientific and Research Institute of Urology Named After N.A. Lopatkin, Dept. of Urology, Moscow, Russia, ⁵National Medical Research Radiological Centre of The Ministry of Health of The Russian Federation, M, Dept. of Oncourology, Moscow, Russia

V69
Robot-assisted simple prostatectomy (RASP) step by step procedure and results
Institutes: Onze-Lieve-Vrouw Hospital, Dept. of Urology, Aalst, Belgium

V70
Thulium laser enucleation of the prostate with en bloc technique (ThuLEP en bloc)
By: Dymov A.¹, Glybochko P.¹, Alyaev Y.¹, Vinarov A.¹, Altshuler G.², Zamyatina V.², Rapoport L.¹, Sorokin N.¹, Sukhanov R.¹, Enikeev D.¹, Lekarev V.¹, Proskura A.¹, Davydov D.¹, Hamraev O.¹
Institutes: ¹I.m.sechenov First Moscow State Medical University, Dept. of Urology, Moscow, Russia, ²IPG Medical, Boston, United States of America, ³IRE-Polus, Fryazino, Russia

V71
Laparoscopic simple prostatectomy for large volume benign prostatic hyperplasia (≥ 120 mL)
By: Pastore A.L.¹, Palleschi G.¹, Al Salhi Y.¹, Leto A.¹, Fuschi A.¹, Velotti G.¹, Carbone A.¹, Celia A.²
Institutes: Sapienza University of Rome, Dept. of Medico-Surgical Sciences and Biotechnologies, Urology Unit, Latina, Italy, ²San Bassiano Hospital, Dept. of Urology, Bassano del Grappa, Italy
Holmium laser enucleation of the prostate by an en-bloc and bladder neck preserved technique
By: Meng X.
Institutes: The First Affiliated Hospital of Nanjing Medical University, Dept. of Urology, Nanjing, China

Thulium laser enucleation of the prostate (ThuLEP): First results, efficacy, and complications
By: Glybochko P.\textsuperscript{1}, Altshuler G.\textsuperscript{2}, Vinarov A.\textsuperscript{1}, Rapoport L.\textsuperscript{1}, Enikeev M.\textsuperscript{1}, Enikeev D.\textsuperscript{1}, Sorokin N.\textsuperscript{1}, Dymov A.\textsuperscript{1}, Khamraev O.\textsuperscript{1}, Sukhanov R.\textsuperscript{1}, Taratkin M.\textsuperscript{1}, Zamyatina V.\textsuperscript{3}
Institutes: First Moscow State Medical University of I.M. Sechenov, Research Institute of Uro nephrology and Reproductive Health, Moscow, Russia, \textsuperscript{2}IPG Medical, Photonics, Oxford, United States of America, \textsuperscript{3}NTO IRE-Polus, Dept. of Photonics, Moscow, Russia
Partial nephrectomy: Improving outcomes

Poster Session 59

Location: Room Copenhagen, North Hall (Level 1)

Chairs: P. Chlosta, Cracow (PL)
        A. Minervini, Florence (IT)
        A. Mottrie, Aalst (BE)

Aims and objectives of this session
To discuss how to improve outcomes of partial nephrectomy.

Poster viewing of 20 minutes. Presentations will take place on stage. Standard presentations are 2 minutes in length, followed by 2 minutes for discussion. Extended presentations (+) are 3 minutes in length, followed by 3 minutes for discussion.

781

Perioperative morbidity of open versus minimally invasive partial nephrectomy: A contemporary analysis of the National Surgical Quality Improvement Program (NSQIP)

By: Pereira J.1, Renzulli J.1, Pareek G.1, Moreira D.2, Golijanin D.1, Gershman B.1

Institutes: Rhode Island Hospital And The Miriam Hospital, Dept. of Urology, Providence, United States of America, 2University of Illinois At Chicago, Dept. of Urology, Chicago, United States of America

782

Comparison of robot-assisted and open surgery partial nephrectomy: An observational prospective study on pathologic and early functional outcomes

By: Larcher A.1, Capitanio U.1, Fossati N.1, De Naeyer G.2, De Groote R.2, Umani P.2, Trevisani F.2, Guazzoni G.3, Salonia A.1, Briganti A.1, Bertini R.1, Montorsi F.1, Mottrie A.2

Institutes: IRCCS Ospedale San Raffaele, Urological Research Institute, Dept. of Oncology and Urology, Milan, Italy, 2Onze Lieve Vrouw Hospital, Dept. of Urology, Aalst, Belgium, 3Humanitas Clinical and Research Centre, Dept. of Urology, Milan, Italy

783

Perioperative morbidity of clamp vs off-clamp robotic partial nephrectomy: Preliminary results from a multicentre randomized clinical trial (the CLOCK study)

By: Antonelli A.1, Cindolo L.2, Sandri M.3, Furlan M.1, Veccia A.1, Palumbo C.1, Simeone C.1, Sessa F.4, Facchiano D.4, Serri S.4, De Concilio B.5, Zecchini G.5, Celia A.6, Ingrosso M.2, Giommini V.6, Annino F.6, Pizzuti V.7, Nucciotti R.1, Dandrea M.8, Angelo P.9, Minervini A.4

Institutes: Spedali Civili Hospital of Brescia, Dept. of Urology, Brescia, Italy, 2San Pio Da Pietrelcina Hospital, Dept. of Urology, Vasto, Italy, 3University of Brescia, Data Methods and Systems Statistical Laboratory, Brescia, Italy, 4Careggi Hospital, Dept. of Urology, Florence, Italy, 5San Bassiano Hospital, Dept. of Urology, Bassano del Grappa, Italy, 6San Donato Hospital, Dept. of Urology, Arezzo, Italy, 7Misericordia Hospital, Dept. of Urology, Grosseto, Italy, 8Policlinico Di Abano, Dept. of Urology, Abano Terme, Italy

784

Acute kidney injury after clampless partial nephrectomy: Incidence, predictors, and its low impact on intermediate-term renal function


Institutes: Tokyo Medical and Dental University Graduate School, Dept. of Urology, Tokyo, Japan

785

On-clamp versus off-clamp partial nephrectomy: Propensity score matched comparison of long term functional outcomes

By: Simone G.1, Capitanio U.2, Larcher A.2, Ferriero M.3, Misuraca L.1, Tuderti G.1, Romeo G.1, Minisola F.1, Guaglione S.1, Mattin F.2, Nini A.2, Trevisani F.2, Montorsi F.2, Bertini R.2, Gallucci M.1

Institutes: Regina Elena National Cancer Institute, Dept. of Urology, Rome, Italy, 2San Raffaele
In the quest for better functional outcome after partial nephrectomy: Can comorbidities outweigh age?


Institutes: Yonsei University College Of Medicine, Dept. of Urology, Seoul, South Korea

Factors influencing renal volume and renal function after minimally-invasive partial nephrectomy. Preliminary results of a prospective study

By: Porpiglia F., Bertolo R., Ampareo D., Piramide F., Checchucci E., Manfredi M., Angusti T., Sardo D., Veltri A., Fiori C.

Institutes: San Luigi Hospital, Dept. of Urology, Turin, Italy, San Luigi Hospital, Dept. of Nuclear Medicine, Turin, Italy, San Luigi Hospital, Dept. of Radiology, Turin, Italy

Parenchyma volume and renal function after different types of nephron-sparing minimally invasive surgery in patients with renal cell carcinoma

By: Reva S., Nosov A., Lushina P., Berkut M., Petrov S.

Institutes: N.N.Petrov Research Institute of Oncology, Dept. of Oncourology, Saint-Petersburg, Russia

Comparisons of surgical outcomes between resection and the enucleation technique in robot assisted laparoscopic partial nephrectomy for renal tumors according to the surface-intermediate-base margin score

By: Toshio T., Kondo T., Iizaka J., Tachihana H., Ishida H., Tanabe K.

Institutes: Tokyo Women’s Medical University, Dept. of Urology, Tokyo, Japan

The role for frozen section analysis during partial nephrectomy: Outcomes after ten years of FU

By: Maruccia S., Seveso M., Casellato S., Provenzano M., Buffi N., Taverna G., Guazzoni G., Bozzini G.

Institutes: Istituti Clinici Zucchi, Dept. of Urology, Monza, Italy, Humanitas Mater Domini, Dept. of Urology, Castellanza, Italy, Humanitas University, Dept. of Urology, Rozzano, Italy, Humanitas Research Hospital, Dept. of Urology, Rozzano, Italy

Predictors of local recurrence after partial nephrectomy: Results from two-years follow up of a prospective multicentre study (RECORd 1 project)


Institutes: Aou Careggi, Dept. of Urology, Florence, Italy, University of Padua, Dept. of Surgery, Padua, Italy, University of Brescia, Dept. of Urology, Brescia, Italy, University of Turin - San Luigi Gonzaga Hospital, Dept. of Urology, Turin, Italy, University of Modena and Reggio Emilia, Dept. of Urology, Modena, Italy, University of Naples Federico II, Dept. of Neurosciences, Science of Reproduction and Odontostomatolgy, Naples, Italy, University of Catania, Dept. of Urology, Catania, Italy, University of Bologna, Dept. of Urology, Bologna, Italy, University of Eastern Piedmont, Dept. of Urology, Novara, Italy

Modified robot assisted simple enucleation with single layer suture technique versus laparoscopic enucleation in localized renal tumors

By: Zhao X., Lu Q., Liu G., Xu L., Zhang G., Li X., Gan W., Guo H.

Institutes: Nanjing Drum Tower Hospital, Medical School of Nanjing University, Dept. of Urology, Nanjing, China

Purely off-clamp robotic partial nephrectomy

By: Simone G., Misuraca L., Tuderti G., Minisola F., Ferriero M., Romeo G., Costantini M., Guaglianone S., Gallucci M.
Institutes: Regina Elena National Cancer Institute, Dept. of Urology, Rome, Italy
Active surveillance for low-risk prostate cancer: What do we still need to know?

**Poster Session 60**

**Location:** Room Madrid, North Hall (Level 1)

**Chairs:**
- A.R. Azzouzi, Angers (FR)
- M.R. Cooperberg, San Francisco (US)
- N. Suardi, Milan (IT)

**Aims and objectives of this session**
The aim of this session is to highlight lights and shadows of active surveillance and how to improve current protocols.

Poster viewing of 20 minutes. Presentations will take place on stage. Standard presentations are 2 minutes in length, followed by 2 minutes for discussion. Extended presentations (*) are 3 minutes in length, followed by 3 minutes for discussion.

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**793**

The spatial distribution of positive cores predicts outcomes of active surveillance in very low risk prostate cancer patients

*By:* Erickson A.¹, Vasarainen H.², Mirtti T.³, Rannikko A.²

*Institutes:* University of Helsinki, University of Helsinki, Institute for Molecular Medicine Finland, Helsinki, Finland, ²University of Helsinki, Dept. of Urology, Helsinki, Finland, ³University of Helsinki, Institute for Molecular Medicine Finland, Dept. of Pathology, Helsinki, Finland

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**794**

Variation in the use of active surveillance for low-risk prostate cancer

*By:* Löppenberg B.¹, Friedlander D.¹, Tam A.¹, Von Landenberg N.¹, Gild P.¹, Leow J.², Krasnova A.¹, Kibel A.¹, Noldus J.³, Menon M.⁴, Sun M.¹, Trinh Q-D.¹

*Institutes:* Brigham and Women’s Hospital, Division of Urologic Surgery and Center For Surgery and Public Health, Boston, United States of America, ²Tan Tock Seng Hospital, Dept. of Urology, Singapore, Singapore, ³Marien Hospital Herne, Ruhr-University Bochum, Dept. of Urology, Herne, Germany, ⁴Henry Ford Health System, VUI Center for Outcomes Research, Analytics and Evaluation, Vattikuti Urology Institute, Detroit, United States of America

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**795**

PTEN status in diagnostic biopsies predicts active surveillance rebiopsy Gleason upgrade, treatment change and adverse surgical histopathological findings

*By:* Erickson A.¹, Lokman U.², Vasarainen H.², Mirtti T.³, Rannikko A.²

*Institutes:* University of Helsinki, Institute for Molecular Medicine Finland, Helsinki, Finland, ²University of Helsinki, Dept. of Urology, Helsinki, Finland, ³University of Helsinki, Dept. of Pathology, Institute for Molecular Medicine Finland, Helsinki, Finland

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**796**

Risk-based selection for active surveillance: Results of the Movember Foundation’s Global Action Plan prostate cancer active surveillance (GAP3) initiative

*By:* Nieboer D.¹, Steyerberg E.¹, Bruinisma S.², Bangma C.², Roobol M.²

*Institutes:* Erasmus MC, Dept. of Public Health, Rotterdam, The Netherlands, ²Erasmus MC, Dept. of Urology, Rotterdam, The Netherlands

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**797**

Pathological findings at radical prostatectomy after initial active surveillance in low-risk prostate cancer patients. Did we miss the chance to cure?

*By:* Suardi N.¹, Luzzago S.¹, Dell’Oglio P.¹, Fossati N.¹, Gandaglia G.¹, Zaffuto E.¹, Gaboardi F.¹, Doglioni C.², Freschi M.², Scattoni V.¹, Stabile A.¹, Montorsi F.¹, Briganti A.¹

*Institutes:* ¹Vita-Salute University San Raffaele, Dept. of Urology, Milan, Italy, ²Vita-Salute University San Raffaele, Dept. of Pathology, Milan, Italy

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**798**

Outcomes after deferred radical prostatectomy for men initially managed with active surveillance
Compliance of prostate cancer patients on active surveillance to protocol criteria: The experience of a large mono-institutional population
By: Badenchini F.¹, Palorini F.¹, Alvisi M.F.¹, Marenghi C.¹, Tulli Baldoin E.¹, Nicolai N.², Salvioni R.², Catanzaro M.², Stagni S.², Tesone A.², Torelli T.², Villa S.², Bedini N.², Avuzzi B.², Morino S.², Colecchia M.³, Messina A.², Bellardita L.¹, Magnani T.², Rancati T.², Valdagni R.²
Institutes: Fondazione IRCCS Istituto Nazionale Tumori, Prostate Cancer Program, Milan, Italy, Fondazione IRCCS Istituto Nazionale Tumori, Dept. of Urology, Milan, Italy, Fondazione IRCCS Istituto Nazionale Tumori, Dept. of Radiation Oncology, Milan, Italy, Fondazione IRCCS Istituto Nazionale Tumori, Dept. of Urology, Milan, Italy, Fondazione IRCCS Istituto Nazionale Tumori, Dept. of Radiation Oncology, Milan, Italy, Fondazione IRCCS Istituto Nazionale Tumori, Dept. of Urology, Milan, Italy, Università Degli Studi Di Milano & Fondazione IRCCS Istituto Nazionale Tumori, Dept. of Hematology and Hemato-Oncology & Prostate Cancer Program & Radiation Oncology, Milan, Italy

Variation in prostate cancer care at commission on cancer designated facilities
By: Lüppenberg B.¹, Sood A.², Deepansh D.², Karaborn P.³, Sammon J.⁴, Vetterlein M.⁵, Noldus J.¹, Peabody J.², Trinh Q-D.⁶, Menon M.², Abdollah F.²
Institutes: Ruhr-University Bochum, Marien Hospital Herne, Dept. of Urology, Herne, Germany, Center For Outcomes Research, Analytics and Evaluation, Vattikuti Urology Institute, Henry Ford Hosp, Dept. of Urology, Detroit, United States of America, Henry Ford Hospital, Dept. of Public Health Sciences, Detroit, United States of America, Maine Medical Center, Division of Urology & Center For Outcomes Research, Portland, United States of America, University Medical Center Hamburg-Eppendorf, Dept. of Urology, Hamburg, United States of America, Center For Surgery and Public Health, Brigham and Women’s Hospital, Division of Urology, Boston, United States of America

Multiparametric MRI represents an added value but not a substitute of follow-up biopsies in patients on active surveillance for low-risk prostate cancer
By: Luzzago S.¹, Suardi N.¹, Dell’Oglio P.¹, Cardone G.², Gandaglia G.¹, Esposito A.², De Cobelli F.², Cristel G.², Kinzikeeva E.¹, Freschi M.³, Gaboardi F.¹, Del Maschio A.², Montorsi F.², Briganti A.¹
Institutes: Vita-Salute University San Raffaele, Dept. of Urology, Milan, Italy, Vita-Salute University San Raffaele, Dept. of Radiology, Milan, Italy, Vita-Salute University San Raffaele, Dept. of Pathology, Milan, Italy

Introducing mpMRI into contemporary UK active surveillance for localised prostate cancer
By: Bryant R.¹, Yang B.¹, Philippou Y.¹, Lam K.¹, Obiakor M.¹, Ayers J.B.¹, Gleeson F.¹, Macpherson R.², Verrill C.², Roberts I.³, Leslie T.³, Crew J.³, Sooriakumaran P.¹, Hamdy F.³, Brewster S.³
Institutes: Oxford University Hospitals Nhs Foundation Trust, Dept. of Urology, Oxford, United Kingdom, Oxford University Hospitals Nhs Foundation Trust, Dept. of Radiology, Oxford, United Kingdom, Oxford University Hospitals Nhs Foundation Trust, Dept. of Pathology, Oxford, United Kingdom

MRI as a follow up tool in active surveillance – results from an MRI–defined active surveillance cohort (387 men, median 5 year follow up)
By: Retter A.¹, Giganti F.¹, Kirkham A.¹, Allen C.¹, Punwani S.¹, Emberton M.², Moore C.²
Institutes: University College London Hospital, Dept. of Radiology, London, United Kingdom, University College London Hospital, Dept. of Urology, London, United Kingdom

Metastases and death after 15 year of follow-up in men with screen-detected low-risk prostate cancer treated with protocol based active surveillance, radical prostatectomy or radiotherapy
By: Verbeek J., Drost F-J., Bangma C., Roobol M.
Institutes: Erasmus MC, Dept. of Urology, Rotterdam, The Netherlands
13:30 - 13:37

Summary
To be confirmed
Aims and objectives of this session
To evaluate radiotherapy and brachytherapy protocols and oncological and functional results.

Poster viewing of 20 minutes. Presentations will take place on stage. Standard presentations are 2 minutes in length, followed by 2 minutes for discussion. Extended presentations (*) are 3 minutes in length, followed by 3 minutes for discussion.

805 Optimization of assessment tool for lower urinary symptom flare in patients with localized prostate cancer treated with iodine-125 implant brachytherapy
By: Miyake M.1, Tanaka N.1, Asakawa I.2, Hori S.1, Morizawa Y.1, Tatsumi Y.1, Nakai Y.1, Anai S.1, Hasegawa M.2, Konishi N.1, Fujimoto K.1
Institutes: 1Nara Medical University, Dept. of Urology, Nara, Japan, 2Nara Medical University, Dept. of Radiation Oncology, Nara, Japan

806 Impact of ISUP new grading system on prognostic prediction in clinical stage T3 prostate cancer undergoing high-dose-rate brachytherapy
By: Tsumura H.1, Satoh T.1, Tabata K-I.1, Ishiyama H.2, Ikeda M.1, Kurosaka S.1, Fujita T.1, Hayakawa K.1, Iwamura M.1
Institutes: 1Kitasato University School of Medicine, Dept. of Urology, Sagamihara, Japan, 2Kitasato University School of Medicine, Dept. of Radiology and Radiation Oncology, Sagamihara, Japan

807 Ten year outcomes of real time “4D” brachytherapy in prostates up to 100cc
By: Rea A.1, Rogers P.2, Jones A.1
Institutes: 1Royal Berkshire Hospital, Dept. of Urology, Reading, United Kingdom, 2Royal Berkshire Hospital, Dept. of Oncology, Reading, United Kingdom

808 Long-term outcomes of permanent prostate brachytherapy
By: Stone N.1, Stock R.2
Institutes: 1The Icahn School Of Medicine At Mount Sinai, Dept. of Urology, New York, United States of America, 2The Icahn School Of Medicine At Mount Sinai, Dept. of Radiation Oncology, New York, United States of America

809 Outcomes of treatment for localized prostate cancer in a single institution; comparison of radical prostatectomy vs radiation therapy -Propensity Score Matching Analysis-
By: Hayashi N.1, Yokomizo Y.1, Kimito O.1, Makiyama K.1, Kondo K.1, Nakaigawa N.1, Yao M.1, Taguri M.2, Sugiuira M.3, Ito E.3, Takano S.3, Mukai A.3
Institutes: 1Yokohama City University School of Medicine, Dept. of Urology, Yokohama, Japan, 2Yokohama City University School of Medicine, Dept. of Biostatistics, Yokohama, Japan, 3Yokohama City University School of Medicine, Dept. of Radiology, Yokohama, Japan

810 Oncological outcomes of prostate cancer treated by radical prostatectomy versus radiotherapy: A multi–center study using propensity-matched and competing risk regression analyses
Institutes: 1Yokohama City University School of Medicine, Dept. of Urology, Yokohama, Japan, 2Yokohama City University School of Medicine, Dept. of Biostatistics, Yokohama, Japan, 3Yokohama City University School of Medicine, Dept. of Radiology, Yokohama, Japan
**Institutes:** Yonsei University College of Medicine, Gangnam Severance Hospital, Dept. of Urology, Seoul, South Korea, Hallym University College of Medicine, Dept. of Urology, Chunchun, South Korea, Yonsei University College of Medicine, Shinchon Severance Hospital, Dept. of Urology, Seoul, South Korea, Inje University College of Medicine, Dept. of Urology, Busan, South Korea, Ajou University College of Medicine, Dept. of Urology, Suwon, South Korea, Hallym University Chunchun Sacred Heart Hospital, Hallym University College of Medicine, Dept. of Urology, Chunchun, South Korea

811

**The hybrid method can cover an extensive area of planning target volume compared with the conventional method in prostate cancer patients who undergo low-dose-rate brachytherapy**

*By:* Tanaka N.1, Asakawa I.2, Nakai Y.1, Miyake M.1, Anai S.1, Fujii T.3, Hasegawa M.2, Konishi N.3, Fujimoto K.1

**Institutes:** Nara Medical University, Dept. of Urology, Kashihara, Japan, Nara Medical University, Dept. of Radiation Oncology, Kashihara, Japan, Nara Medical University, Dept. of Pathology, Kashihara, Japan

812

**Combined androgen deprivation and radiation versus either modality alone or observation after radical prostatectomy in patients with pathologic node-positive prostate cancer: Analysis of a national hospital cancer registry database**

*By:* Zareba P., Eastham J., Scardino P., Touijer K.

**Institutes:** Memorial Sloan Kettering Cancer Center, Dept. of Surgery and Urology, New York, United States of America

813

**What is the impact of diabetes mellitus on radiation induced proctitis after radical radiotherapy for adenocarcinoma prostate?**

*By:* Paterson C.1, Alashkham A.4, Hubbard S.2, Nabi G.3

**Institutes:** Ninewells Hospital, Dept. of Urology, Dundee, United Kingdom, University of Dundee, School of The Environment, Dundee, United Kingdom, University of Dundee, Dept. of Urology, Dundee, United Kingdom, University of Edinburgh, Centre for Human Anatomy, Edinburgh, United Kingdom

814

**Nationwide multicenter retrospective study on high-dose-rate brachytherapy as monotherapy for prostate cancer**

*By:* Komiya A.1, Yoshioka Y.3, Kotsuma T.3, Kariya M.4, Konishi K.5, Nonomura N.6, Fujiuchi Y.7, Kitamura H.7

**Institutes:** Chiba University Graduate School of Medicine, Dept. of Urology, Chiba, Japan, Osaka University Graduate School of Medicine, Dept. of Radiation Oncology, Osaka, Japan, Osaka National Hospital, Dept. of Radiation Oncology, Osaka, Japan, Kochi University Graduate School of Medicine, Dept. of Radiation Oncology, Osaka, Japan, Osaka Medical Center for Cancer and Cardiovascular Diseases, Dept. of Radiation Oncology, Osaka, Japan, Osaka University Graduate School of Medicine, Dept. of Urology, Osaka, Japan, Graduate School of Medicine and Pharmaceutical Sciences For Research, University of Toyama, Dept. of Urology, Toyama, Japan

815

**Ex vivo H2AX assay in prostate cancer patient-derived tumour samples reveals substantial differences in intrinsic radiation sensitivity**

*By:* Neumann E.1, De Colle C.2, Müller A-C.2, Yaromina A.3, Hennenlotter J.1, Stenzl A.1, Scharpf M.4, Fend F.4, Ricardi U.5, Baumann M.6, Zips D.2, Menegakis A.2

**Institutes:** Eberhard Karls University Tübingen, Dept. of Urology, Tübingen, Germany, Eberhard Karls University Tübingen, Dept. of Radiooncology, Tübingen, Germany, Maastricht University Medical Centre, Dept. of Radiation Oncology, Maastricht, The Netherlands, Eberhard Karls University Tübingen, Dept. of Pathology, Tübingen, Germany, University of Turin, Dept. of Radiation Oncology (Maastro), Turin, Italy, Faculty of Medicine and University Hospital Carl Gustav Carus, Dept. of Radiation Oncology, Dresden, Germany

816

**Pre-radiotherapy, (robot-assisted) laparoscopic sentinel node dissection and its impact on recurrence and progression of prostate cancer**

*By:* Grivas N.1, Wit E.1, Pos F.2, De Jong J.3, Vegt E.4, Bex A.1, Hendricksen K.1, Horenblas S.1, KleinJan G.5, Van Rhijn B.1, Van Der Poel H.1

*816*
Current technique on radiation therapy
A. Bossi, Villejuif (FR)
Aims and objectives of this session
To look at the current role of multimedia technology on various aspects of urological practice.

e-Poster presentations will take place on stage. Standard presentations are 2 minutes in length, followed by 2 minutes for discussion.

12:38 - 12:53
The vanishing of printed journals
P. Dasgupta, London (GB)

12:53 - 13:08
The power of Twitter
S. Loeb, New York (US)

817
Mobile PSA - a novel tool for prostate cancer follow-up
By: Bergroth R., Matikainen M., Rannikko A.
Institutes: Helsinki University Hospital and Helsinki University, Dept. of Urology, Helsinki, Finland

818
Developing HIGH-TECH bladder and bowel diary in innovative clinical informatics
By: Kitta T.1, Ouchi M.1, Kanno Y.1, Moriya K.1, Yamamoto T.2, Shinohara N.1
Institutes:1 Hokkaido University School of Medicine, Dept. of Urology, Sapporo, Japan, 2Hokkaido University, Dept. of Laboratory of Information Media Environment, Sapporo, Japan

819
Electronic assistant in multi-disciplinary practice: A promising tool toward improved healthcare delivery
By: Zgheib J.1, Mottrie A.2, El Hajj I.2, El Salibi N.4, El Khoury F.1
Institutes:1 University of Balamand, Dept. of Surgery and Urology, Beirut, Lebanon, 2OLV Robotic Surgery Institute, ORSI Academy, Melle, Belgium, 3Saint George Hospital University Medical Center, Dept. of General Surgery, Beirut, Lebanon, 4American University of Beirut, Dept. of Epidemiology and Population Health, Beirut, Lebanon

820
Using social media and mobile technology for epidemic research of prostate cancer risk factors in Chinese population
By: Qin X., Dai B., Zhu Y., Ye D.
Institutes: Fudan University Shanghai Cancer Center, Dept. of Urology, Shanghai, China

821
Mapping the landscape of urology: A new media based cross-sectional analysis of public versus academic interest
By: Salem J.1, Borgmann H.2, Baunacke M.3, Boehm K.2, Groeben C.3, Schmid M.4, Siegel F.5, Huber J.3
Institutes:1 University Hospital Cologne, Dept. of Urology, Cologne, Germany, 2University Hospital Mainz, Dept. of Urology, Mainz, Germany, 3TU Dresden, Dept. of Urology, Dresden, Germany, 4University Hospital Göttingen, Dept. of Urology, Göttingen, Germany, 5University Medical Center Mannheim, Dept. of Urology, Mannheim, Germany

822
Quantitative analysis of innovation in urology
By: Bhatt N.R.1, Dalton D.M.2, Davis N.F.1, McDermott T.1, Flynn R.J.1, Thomas A.Z.1, Manecksha R.P.1
Consultant outcome publication: Surgeons’ opinions of a new mandatory health policy
By: Williams M., Cotterill N., Drake M., Keeley F.
Institutes: Bristol Urology Institute, Dept. of Urology, Bristol, United Kingdom

Use of digital media in daily clinical practice among urology residents
By: Salem J., Borgmann H., Macneily A., Boehm K., Schmid M., Groeben C., Baunacke M., Huber J.
Institutes: University Hospital Mainz, Dept. of Urology, Mainz, Germany, Lowell General Hospital, Dept. of Radiation Medicine, Lowell, United States of America, University of Sheffield, Academic Urology Unit, Sheffield, United Kingdom, University of Minnesota, Dept. of Urology, Minneapolis, United States of America, Fox Chase Cancer Center, Division of Urologic Oncology, Philadelphia, United States of America

What is #urology tweeting about? Strategic assessment of Twitter communication in urology
By: Borgmann H., Katz M., Catto J., Weight C., Kutikov A.
Institutes: University Hospital Mainz, Dept. of Urology, Mainz, Germany, Lowell General Hospital, Dept. of Radiation Medicine, Lowell, United States of America, University of Sheffield, Academic Urology Unit, Sheffield, United Kingdom, University of Minnesota, Dept. of Urology, Minneapolis, United States of America, Fox Chase Cancer Center, Division of Urologic Oncology, Philadelphia, United States of America

Twitter is emerging as a big data tool and an essential source of information in urologic oncology and biomedical research
By: El-Bakri A., Larré S.
Institutes: Robert Debré Teaching Hospital, Dept. of Urology, Reims, France

Web promotion of da Vinci robotic prostatectomy exhibits varying sexual health information
By: Matsushita K., Endo F., Shimbo M., Hattori K.
Institutes: St. Lukes International Hospital, Dept. of Urology, Tokyo, Japan

Whatsapp messenger as a tool for the multidisciplinary management in everyday clinical practice
Institutes: University of Palermo, Dept. of Urology, Palermo, Italy, “Macchiarella” Clinic, Dept. of Radiation Oncology, Palermo, Italy, ARNAS Civico Hospital, Dept. of Radiation Oncology, Palermo, Italy, ARNAS Civico Hospital, Dept. of Medical Oncology, Palermo, Italy, “Buccheri-La Ferla” Hospital, Dept. of Medical Oncology, Palermo, Italy, Fondazione Istituto G. Giguë, Dept. of Medical Oncology, Cefalù, Italy, University of Palermo, Dept. of Medical Oncology, Palermo, Italy, University of Palermo, Clinical Epidemiology and Cancer Registry, Palermo, Italy, A.S.P. 209, Dept. of Urology, Trapani, Italy, “Buccheri-La Ferla” Hospital, Dept. of Urology, Palermo, Italy

Utilization of Facebook, Twitter, YouTube and Instagram in the prostate cancer community
Institutes: University Hospital Luebeck, Dept. of Urology, Luebeck, Germany, University Hospital Cologne, Dept. of Urology, Cologne, Germany, University Hospital Mannheim, Dept. of Urology, Mannheim, Germany, University Hospital Mainz, Dept. of Urology, Mainz, Germany
Aims and objectives of this session
Overexpression of peptide growth factors and their receptors have been reported in urothelium cancer. In addition, mutations in growth factor receptors occur and are associated with outcome of the disease. The session will focus on regulation of intracellular signalling, modification of gene expression and possibilities to improve specific targeting in urothelial tumors.

Poster viewing of 20 minutes. Presentations will take place on stage. Standard presentations are 2 minutes in length, followed by 2 minutes for discussion. Extended presentations (+) are 3 minutes in length, followed by 3 minutes for discussion.

841
Panobinostat and ixazomib inhibit bladder cancer growth synergistically by increasing histone acetylation and inducing endoplasmic reticulum stress
By: Sato A., Isono M., Asano T., Okubo K., Asano T.
Institutes: National Defense Medical College, Dept. of Urology, Tokorozawa, Japan

*830
Role of the crosstalk between tumor cells, vascular endothelium and the coagulation cascade for the invasion of urothelial bladder carcinoma
By: John A., Schneider S., Gorzelanny C., Bolenz C.
Institutes: University Hospital Ulm, Dept. of Urology, Ulm, Germany, University Hospital Hamburg, Dept. of Dermatology, Hamburg, Germany, Experimental Dermatology, Dept. of Dermatology, Mannheim, Germany

831
Highly sensitive and specific novel biomarkers for the diagnosis of transitional bladder carcinoma
Institutes: Pusan National University Hospital, Dept. of Urology, Busan, South Korea, National University of Singapore, Dept. of Urology, Singapore, Singapore

833
Lopinavir synergizes with ritonavir to induce bladder cancer apoptosis by causing histone acetylation and endoplasmic reticulum stress
By: Sato A., Okubo K., Asano T., Isono M., Asano T.
Institutes: National Defense Medical College, Dept. of Urology, Tokorozawa, Japan

834
Overexpression of PTP4A3 is associated with metastasis and unfavorable prognosis in urothelial carcinoma
By: Yeh H-C., Wu W-J., Li C-C., Huang C-N., Ke H-L., Li W-M., Lee H-Y., Li C-F.
Institutes: Kaohsiung Municipal Ta-Tung Hospital, Kaohsiung Medical University, Dept. of Urology, Kaohsiung, Taiwan, Kaohsiung Medical University Hospital, Kaohsiung Medical University, Dept. of Urology, Kaohsiung, Taiwan, Chi Mei Medical Center, Dept. of Pathology, Tainan, Taiwan

835
Kaempferol modulates DNA methylation and up-regulates the expression of DAXX in bladder cancer
By: Qiu W., Lin J., Zhu Y., Zhang J., Tian Y.
Institutes: Beijing Friendship Hospital, Capital Medical University, Dept. of Urology, Beijing, China
The activity of intravesical hyaluronic acid and chondroitin sulfate administration on urothelial gene expression. Preliminary results on the epidermal growth factor receptor and fibronectin gene expression evaluated in bladder washings of patients affected by non muscle-invasive bladder cancer

By: Serretta V.¹, Di Maida F.¹, Scalici Gesolfo C.¹, Cangemi A.², Perez A.², Russo A.², Simonato A.¹

Institutes: University of Palermo, Dept. of Urology, Palermo, Italy, ²University of Palermo, Dept. of Medical Oncology, Palermo, Italy

Frequency of subtypes in high grade urothelial carcinoma of the urinary bladder

By: Scavuzzo A.¹, Jimenez Rios M.A.¹, Silva Morera C.², Pena L.², Moncada G.², Mendoza J.³, Cantu De Leon D.³, Perez Montiel D.²

Institutes: ¹Instituto Nacional De Cancerologia, Dept. of Urology, Mexico City, Mexico, ²Instituto Nacional De Cancerologia, Dept. of Pathology, Mexico City, Mexico, ³Instituto Nacional De Cancerologia, Dept. of Clinical Research, Mexico City, Mexico

Withdrawn

Long noncoding RNA H19 regulates survivin expression in bladder cancer as sponge of miR-138-5p

By: Yang R¹, Qu S.², Liang H.², Chen X.², Zhang C.², Guo H.¹

Institutes: ¹The Affiliated Drum Tower Hospital Of Nanjing University, School Of Medicine, Dept. of Urology, Nanjing, China, ²Nanjing University, Dept. of Biological Science, Nanjing, China

M2 muscarinic receptors inhibit cell proliferation and migration in urothelial bladder cancer cells


Institutes: Sapienza University of Rome, Dept. of Medico-Surgical Sciences and Biotechnologies, Urology Unit, Latina, Italy

Alterations in growth factor receptors in bladder cancer

E. Zwarthoff, Rotterdam (NL)
New therapeutic approaches in targeted therapy for renal cell carcinoma
Poster Session 64

Monday, 27 March
12:15 - 13:45

Location: Room Berlin, North Hall (Level 1)

Chairs: N. Kröger, Greifswald (DE)
A. Necchi, Milan (IT)
G. Stewart, Cambridge (GB)

Aims and objectives of this session
To discuss new therapeutic approaches based on basic research results.

Poster viewing of 20 minutes. Presentations will take place on stage. Standard presentations are 2 minutes in length, followed by 2 minutes for discussion.

842 Impact of intratumoral heterogeneity of renal cancer on drug response and development of resistance in patient derived xenografts
By: Bedke J.¹, Flechsig S.², Hennenlotter J.¹, Wulf-Goldenberg A.², Jandrig A.³, Schostak M.³, Becker M.², Fichtner I.², Zeisig R.², Hoffmann J.², Schmees C.², Stenzl A.¹
Institutes: ¹University of Tübingen, Dept. of Urology, Tübingen, Germany, ²EPO GmbH, Berlin-Buch, Berlin, Germany, ³University of Magdeburg, Dept. of Urology, Magdeburg, Germany, ⁴Natural and Medical Sciences Institute, Dept. of Molecular Biology, Reutlingen, Germany

843 Pathological and prognostic significance of densities of CD57+ (natural killer cells), CD68+ (macrophage), and mast cells in renal cell carcinoma tissues
By: Mochizuki Y., Miyata Y., Yasuda T., Nakamura Y., Matsuo T., Oba K., Sakai H.
Institutes: Nagasaki University Hospital, Dept. of Urology and Renal Transplantation, Nagasaki, Japan

844 A microplate co-culture assay allows individualised compound efficacy testing in patients derived 3D tumour spheroids and autologous immune cells
By: Bedke J.¹, Bodenhöfer M.², Harland N.¹, Hennenlotter J.¹, Anderle N.², Schmees C.², Stenzl A.¹
Institutes: ¹University of Tübingen, Dept. of Urology, Tübingen, Germany, ²University of Magdeburg, Dept. of Urology, Magdeburg, Germany, ³Natural and Medical Sciences Institute At The University of Tübingen, Dept. of Molecular Biology, Reutlingen, Germany

845 Enhanced RCC cell killing with natural killer cells generated from CD34+ hematopoietic progenitor cells combined with mAb cG250
By: Oosterwijk-Wakka J.¹, Cany J.², Sabata Pérez H.¹, Dolstra H.², Mulders P.³, Oosterwijk E.¹
Institutes: ¹Radboudumc, Dept. of Urology, Nijmegen, The Netherlands, ²Radboudumc, Dept. of Hematology, Nijmegen, The Netherlands

846 Orthotopic sunitinib resistant renal cell carcinoma xenograft mouse model
By: Frees S., Moskalev I., Raven P., D’Costa N., Tan Z., Struss W., Chavez-Munoz C., So A.
Institutes: The Vancouver Prostate Centre, Dept. of Urology, Vancouver, Canada

847 Inhibition of semaphorin 3C augments the anti-cancer effect of sunitinib in renal cancer
By: Dejima T.¹, Takeuchi A.¹, Eto M.¹, Naito S.¹, Gleave M.², Ong C.²
Institutes: ¹Kyushu University, Dept. of Urology, Fukuoka, Japan, ²The Vancouver Prostate Centre, Dept. of Urologic Sciences, Vancouver, Canada

848 Expression pattern of immune checkpoint-associated molecules in radical nephrectomy specimens as a prognostic predictor in patients with metastatic renal cell carcinoma treated with tyrosine kinase inhibitors
By: 
Targeting heat-shock protein 27 enhances sensitivity to sorafenib treatment in renal cancer in vitro and in vivo
By: Frees S.¹, Chavez-Munoz C.¹, Zhou B.¹, Raven P.¹, Fazli L.¹, Chi K.¹, Lawson K.², Finelli A.², Gleave M.¹, So A.¹
Institutes: ¹The Vancouver Prostate Centre, Dept. of Urology, Vancouver, Canada, ²University of Toronto, Dept. of Surgical Oncology, Toronto, Canada

Withdrawn
By:
Institutes:

Panobinostat interacts with nelfinavir to inhibit renal cancer growth by causing endoplasmic reticulum stress
By: Okubo K., Sato A., Asano T., Isono M., Asano T.
Institutes: National Defense Medical College, Dept. of Urology, Tokorozawa, Japan

Improving the efficacy of proteasome inhibitors in the treatment of renal cell carcinoma
By: Abt D.¹, Kraus M.², Bader J.², Besse A.², Schmid H.-P.¹, Engeler D.S.¹, Driessen C.², Besse L.²
Institutes: ¹Kantonsspital St. Gallen, Dept. of Urology, St. Gallen, Switzerland, ²Kantonsspital St. Gallen, Dept. of Medical Oncology and Hematology, St. Gallen, Switzerland

Ritonavir, a potent inhibitor of P-glycoprotein, enhances the anticancer effects of romidepsin in renal cancer cells
By: Sato A., Asano T., Okubo K., Isono M., Asano T.
Institutes: National Defense Medical College, Dept. of Urology, Tokorozawa, Japan

Transcriptomic-metabolomic profiling revealed that fatty acid oxidation-induced stress causes cancer Cachexia
By: Fukawa T.¹, Yan-Jiang B.C.⁴, Kanayama H.-O.², Teh B.T.³, Shyh-Chang N.⁴
Institutes: ¹Tokushima University Graduated School, Dept. of Urology, Tokushima, Japan, ²Tokushima University Graduated School, Dept. Of Urology, Tokushima, Japan, ³National Cancer Centre Singapore, Laboratory of Cancer Epigenome, Singapore, Singapore, ⁴Genome Institute of Singapore, Agency For Science Technology and Research, Singapore, Singapore

Summary
G. Stewart, Cambridge (GB)
Aims and objectives of this session
Primary and secondary SUI treatments will be reviewed.

Poster viewing of 20 minutes. Presentations will take place on stage. Standard presentations are 2 minutes in length, followed by 2 minutes for discussion. Extended presentations (*) are 3 minutes in length, followed by 3 minutes for discussion.

855 Which one stands longer? 20 years experience in retropubic sub-urethral sling surgery for female stress urinary incontinence: Comparison between autologous fascia and prolene mesh
Institutes: Taipei Veterans General Hospital, Dept. of Urology, Taipei, Taiwan

856 Preventing early voiding problems after midurethral sling placement: Should we sleep on it?
By: Bergman A. 2, Vrooman O. 1, Van Balken M. 1
Institutes: Rijnstate Ziekenhuis, Dept. of Urology, Arnhem, The Netherlands, Rijnstate Ziekenhuis, Dept. of Gynaecology, Arnhem, The Netherlands

857 Management of urodynamic stress urinary incontinence in urethral diverticulum
By: Barratt R., Spilotros M., Malde S., Pakzad M., Hamid R., Ockrim J., Greenwell T.
Institutes: University College London Hospital, Dept. of Urology, London, United Kingdom

858 Comparative assessment of the efficiency of surgical methods of recurrent urinary incontinence
Institutes: Moscow State University of Medicine and Dentistry Named After A.I. Evdokimov, Dept. of Urology, Moscow, Russia

859 Artificial urinary sphincter (AMS800) implantation in women: Rare indications and acceptable complications rate
By: Sayed Ahmed K., Kaftan B., Olianas R.
Institutes: Luneburg Hospital, Dept. of Urology, Lüneburg, Germany

860 Robot-assisted artificial urinary sphincter implantation in female patients: A multicenter study
Institutes: CHU Rennes, Dept. of Urology, Rennes, France, CHU Bordeaux, Dept. of Urology, Bordeaux, France, CHU Le Mans, France, CHU Limoges, Dept. of Urology, Limoges, France

861 Artificial urinary sphincter implantation in women with stress urinary incontinence: Preliminary comparison of the robot-assisted and open approaches
By: Peyronnet B. 1, Vincendeau S. 1, Tondut L. 1, Alimi Q. 1, Hascoet J. 1, Freton L. 1, Senal N. 2, Kerdraon J. 2, Bensalah K. 1, Manunta A. 1
**Effect of bariatric surgery on urinary and fecal incontinence: Prospective analysis and one year follow up**

By: Ait Said K.¹, Leroux Y.², Menahem B.², Doerfler A.², Alves A.², Tillou X.¹

**Institutes:** CHU de Caen, Dept. of Urology and Transplantation, Caen, France, ²CHU de Caen, Dept. of Abdominal Surgery, Caen, France

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**Five-years follow-up of tension-free vaginal tape (TVT) versus rectus sheath sling for surgical treatment of female stress urinary incontinence: A comparative study**

By: Abou Hashem S.¹, Mohamed Mostafa M.¹, Elbrombely W.²

**Institutes:** Zagazig University Hospital, Dept. of Urology, Zagazig, Egypt, ²Zagazig University Hospital, Dept. of Obstetrics and Gynecology, Zagazig, Egypt

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**Three-month primary efficacy and six-month treatment arm results from the SUCCESS study of an intravesical balloon to treat female stress urinary incontinence (SUI)**

By: Rovner E.¹, Jacoby K.², Kalota S.², Snyder J.A.³, Cline K.⁵, Robertson K.⁸, Rardin C.⁷, Kahan R.⁸, Green L.⁹, Elser D.¹⁰, Zuckerman J.¹¹, Mc Cammon K.¹¹

**Institutes:** Medical University of South Carolina, Dept. of Urology, Charleston, United States of America, ²Integrity Medical Research, Dept. of Urology, Mountlake Terrance, United States of America, ³Urological Associates of Southern Arizona, Dept. of Urology, Tucson, United States of America, ⁴Genitourinary Surgical Consultants, Dept. of Urology, Denver, United States of America, ⁵Regional Urology Associates, Dept. of Urology, Shreveport, United States of America, ⁶Chesapeake Urology Associates, Dept. of Urology, Shreveport, United States of America, ⁷Woman and Infants Hospital, Dept of Urogynecology, Providence, United States of America, ⁸WomanCare, Dept of Urogynecology, Arlington Heights, United States of America, ⁹Virginia Women’s Center, Dept. of Urology, Richmond, United States of America, ¹⁰Women’s Health Institute of Illinois, Dept of Urogynecology, Oak Lawn, United States of America, ¹¹Urology of Virginia, Dept. of Urology, Virginia Beach, United States of America

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**Effectiveness of adjustable slings (Remeex system™) in women with stress urinary incontinence due to intrinsic sphincter deficiency**

By: Plata M.¹, Robledo D.¹, Bravo-Balado A.¹, Castaño J.C.⁴, Osorio C.², Salazar M.³, Velásquez J.³, Trujillo C.¹, Caicedo J.¹, Cataño J.¹

**Institutes:** Hospital Universitario Fundación Santa Fe De Bogotá, Dept. of Urology, Bogotá, Colombia, ²Clínica Confamiliar De Risaralda, Dept. of Urogynecology, Pereira, Colombia, ³Fundación Oftalmológica De Santander Clínica Carlos Ardila Lülle, FOSCAL, Dept. of Urology, Bucaramanga, Colombia, ⁴Clínica Universitaria CES, Dept. of Urology, Medellín, Colombia, ⁵Clínica Medellín and Universidad CES, Dept. of Urología, Medellín, Colombia

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**Transurethral injections of polyacrylamide hydrogel (Bulkamid®) for treatment of female stress urinary incontinence (SUI) in DGH settings**

By: Hamed A.H., Bekarma H., Rewhorn M., Nair B.

**Institutes:** University Hospital of Ayr, Dept. of Urology, Ayr, United Kingdom

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**The autologous fascia mid-urethral 'sling on a string', a viable and effective alternative to synthetic tape surgery**

By: Hillary C., Osman N., Inman R., Mangera A., Chapple C.

**Institutes:** Royal Hallamshire Hospital, Dept. of Reconstructive Urology, Sheffield, United Kingdom

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**ACT sphincteric prosthesis results in women over the age of 80 years old with a past history of radiotherapy treatment**


**Institutes:** CHU Rennes, Dept. of Urology, Rennes, France
Innovations in staging of prostate cancer

Poster Session 66

**Location:** Room London, North Hall (Level 1)

**Chairs:** N. Fossati, Milan (IT)  
M. Lardas, Nea Smirni-Athens (GR)  
J. Hugosson, Göteborg (SE)

**Aims and objectives of this session**
This session will examine Innovations in prostate cancer staging, prognostic groups and lymph node identification.

Poster viewing of 20 minutes. Presentations will take place on stage. Standard presentations are 2 minutes in length, followed by 2 minutes for discussion. Extended presentations (*) are 3 minutes in length, followed by 3 minutes for discussion.

**869 11C-choline versus 68Ga-PSMA PET/CT scan for the detection of nodal recurrence from prostate cancer: Results from a large, multi-institutional salvage lymph node dissection series**

*By:* Fossati N.¹, Briganti A.¹, Gandaglia G.¹, Suardi N.¹, Colicchia M.², Kames J.², Haidl F.³, Porres D.³, Pfister D.³, Heidenreich A.³, Herlemann A.⁴, Gratzke C.⁴, Stief C.⁴, Battaglia A.⁵, Everaerts W.⁶, Joniau S.⁶, Van Poppel H.⁶, Aksenov A.⁶, Osmonov D.K.⁶, Abreu A.D.L.⁶, Almeida F.⁸, Fay C.⁷, Gill I., Mottrie A.M.⁹, Montorsi F.¹

*Institutes:* Vita-Salute University San Raffaele, Dept. of Urology, Milan, Italy, ²Mayo Clinic, Dept. of Urology, Rochester, Minnesota, United States of America, ³University of Cologne, Dept. of Urology, Cologne, Germany, ⁴Ludwig-Maximilians-University Munich, Dept. of Urology, Munich, Germany, ⁵University Hospitals Leuven, Urology, Dept of Development and Regeneration, Leuven, Belgium, ⁶University Hospital Schleswig Holstein, Dept. of Urology and Pediatric Urology, Campus Kiel, Germany, ⁷Catherine & Joseph Aresty Department of Urology, Keck School of Medicine, University of Southern Cal, USC Institute of Urology, Los Angeles, California, United States of America, ⁸Phoenix Imaging Center, Dept. of Urology, Phoenix, Arizona, United States of America, ⁹OLV Ziekenhuis Aalst, Belgium ORSI Academy, Dept of Urology, Melle, Belgium

**870 Introducing PSMA-Bone-PET-Index for quantitative assessment of osseous tumor burden in prostate cancer**

*By:* Bieth M.², Krönke M.², Maurer T.¹, Tauber R.¹, Dahlbender M.¹, Retz M.¹, Gschwend J.¹, Nekolla S.², Menze B.², Eiber M.², Schweiger M.²

*Institutes:* Klinikum rechts der Isar der Technischen Universität München, Dept. of Urology, Munich, Germany, ²Klinikum rechts der Isar der Technischen Universität München, Dept. of Nuclear Medicine, Munich, Germany

**871 Performance of 111In-PSMA-ligand radioguided surgery for identification of lymph node metastases: Correlation of tracer uptake and histopathology based on 310 single lymph nodes separated from lymphadenectomies in prostate cancer patients**

*By:* Schaal K.¹, Mix M.², Stoykow C.², Bartholomä M.², Drendel V.³, Mäcke H.², Gourni E.², Wetterauer U.¹, Schultz-Seemann W.¹, Meyer P.T.², Jilg C.A.³

*Institutes:* Medical Center, University of Freiburg, Faculty of Medicine, Dept. of Urology, Freiburg, Germany, ²Medical Center, University of Freiburg, Faculty of Medicine, Dept. of Nuclear Medicine, Freiburg, Germany, ³Medical Center, University of Freiburg, Faculty of Medicine, Institute for Pathology, Freiburg, Germany

**872 Prospective comparison of molecular and histopathologic detection of lymph node metastases in prostate cancer patients undergoing radical prostatectomy with extended pelvic lymph node dissection: Prediction of biochemical recurrence**
By: Heck M.¹, Retz M.¹, Bandur M.¹, Souchay M.¹, Vitzthum E.¹, Weirich G.², Schuster T.³, Autenrieth M.¹, Kübler H.¹, Maurer T.¹, Thalgott M.¹, Herkommer K.¹, Gschwend J.¹, Nawroth R.¹

Institutes: ¹Klinikum Rechts Der Isar, Technical University of Munich (TUM), Dept. of Urology, Munich, Germany, ²Klinikum Rechts Der Isar, Technical University of Munich (TUM), Dept. of Pathology, Munich, Germany, ³McGill University, Dept. of Family Medicine, Montreal, Canada
Rare... but important diseases
Poster Session 67

Location: Room Stockholm, North Hall (Level 1)

Chairs: K. Ghani, Ann Arbor (US)
G. Pourmand, Tehran (IR)
K. Thomas, London (GB)

Aims and objectives of this session
This session examines a variety of rare and difficult urological diseases.

Poster viewing of 20 minutes. Presentations will take place on stage. Standard presentations are 2 minutes in length, followed by 2 minutes for discussion. Extended presentations (*) are 3 minutes in length, followed by 3 minutes for discussion.

*882

Shorter telomere length increases age-related risk of kidney cancer in von Hippel-Lindau disease
Institutes: Peking University, Institute of Urology, Dept. of Urology, Beijing, China

883

Integrated analysis of microRNA and mRNA expression profiles in tuberous sclerosis complex angiomyolipoma
By: Yi C., Li H., Zhang Y.
Institutes: Peking Union Medical College Hospital, Dept. of Urology, Beijing, China

884

Nephron-sparing surgery for renal angiomyolipomas with high nephrometry scores
By: Huang T.H., Chang Y-H., Chung H-J., Lin A.T-L.
Institutes: Taipei Veterans General Hospital, Dept. of Urology, Taipei City, Taiwan

*885

Understanding a new clinical entity - a prospective study of patients with immunoglobulin G4-related retroperitoneal fibrosis (IgG4-RPF) in a specialist RPF service
By: Fernando A.1, Pattison J.2, D’Cruz D.3, O’Brien T.1
Institutes: 1Guy’s and St Thomas’ NHS Foundation Trust, Dept. of Urology, London, United Kingdom, 2Guy’s and St Thomas’ NHS Foundation Trust, Dept. of Nephrology, London, United Kingdom, 3Guy’s and St Thomas’ NHS Foundation Trust, Dept. of Immunology, London, United Kingdom

886

Clinicopathologic features and survival outcomes of primary renal sarcoma: A 20-year experience and the largest cohort study from Taiwan
Institutes: National Taiwan University Hospital, Dept. of Urology, Taipei, Taiwan

887

Male urinary status, fertility and sexuality in complex exstrophy epispadias: A descriptive study
By: Reynaud N.1, Charvier K.2, Ruffion A.3, Mouriquand P.4, Morel-Journel N.3, Courtois F.5, Terrier J-E.3
Institutes: 1University Hospital of Saint-Etienne, Dept. of Urology, Saint-Etienne, France, 2Henry Gabrielle Hospital, University Hospital of Lyon, Dept. of Neuro Perinéale and Sexology Rehabilitation, Lyon, France, 3South Lyon Hospital, University Hospital of Lyon, Dept. of Urology, Lyon, France, 4Woman Mother Child Hospital, University Hospital of Lyon, Dept. of Urogenital Surgery, Visceral, Thoracic, Newborn and Transplantation, Lyon, France, 5University of Québec, Dept. of Sexology, Montréal, Canada

888

HIPEC with cytoreductive surgery can cure patients with limited peritoneal carcinomatosis from adenocarcinoma of the urachus
Encapsulating peritoneal sclerosis, a serious complication of peritoneal dialysis
By: Pourmand G.1, Alatab S.1, Najafi I.2, Hosseini M.3, Ahmadbeigi N.4
Institutes: 1Tehran University of Medical Sciences, Urology Research Center, Tehran, Iran, 2Tehran University of Medical Sciences, Shariati Hospital, Nephrology Research Center, Tehran, Iran, 3Tehran University of Medical Sciences, School of Public Health, Tehran, Iran, 4Tehran University of Medical Sciences, Digestive Disease Research Institute, Liver and Pancreatobiliary Diseases Research Center, Tehran, Iran

Female sexual function after intravesical therapy in patients with interstitial cystitis/bladder pain syndrome
By: Arslan B.1, Cilesiz N.C.1, Onuk O.2, Cetin B.1, Yazıcı G.1, Hazar A.I.1, Aydin M.1
Institutes: 1Gop Taksim Training and Research Hospital, Dept. of Urology, Istanbul, Turkey, 2Yeniyüzyıl University, Dept. of Urology, Istanbul, Turkey

Effect of Brimapitide on acute and chronic cystitis model induced by cyclophosphamide in conscious rats
By: Abadie C.1, Chabot S.2, Augé C.2, Deloche C.1, Lluel P.2, Combette J-M.1
Institutes: 1Solid Drug Development, Geneva, Switzerland, 2UROsphere, Toulouse, France

Withdrawn
By:
Institutes:

Time-dependent changes in urine markers in patients with interstitial cystitis
By: Furuta A.1, Yamamoto T.2, Koike Y.1, Suzuki Y.3, Gotoh M.2, Egawa S.1, Yoshimura N.4
Institutes: 1Jikei University School of Medicine, Dept. of Urology, Tokyo, Japan, 2Nagoya University Graduate School of Medicine, Dept. of Urology, Nagoya, Japan, 3Tokyo Metropolitan Rehabilitation Hospital, Dept. of Urology, Tokyo, Japan, 4University of Pittsburgh School of Medicine, Dept. of Urology, Pittsburgh, United States of America

The natural history of Leydig cell testicular tumours: An analysis of the National Cancer Registry in Ireland
By: Nason G., Redmond E., Considine S., Izzeldin S., Sweeney P.
Institutes: Mercy University Hospital, Dept. of Urology, Cork, Ireland
**Aims and objectives of this session**

This session is designed to optimise oncological outcomes.

Poster viewing of 20 minutes. Presentations will take place on stage. Standard presentations are 2 minutes in length, followed by 2 minutes for discussion.

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**Clinical and outcome characteristics of the cancer genome atlas (TCGA) bladder cancer cohort: Is it representative?**

**By:** Seiler R., Black P., Thalmann G., Stenzl A., Todenhöfer T.

**Institutes:** Universitätsspital Bern, Universitätsklinik für Urologie, Bern, Switzerland, University of British Columbia, Dept. of Urologic Sciences, Vancouver, Canada, University of Bern, Dept. of Urology, Bern, Switzerland, University Hospital, Eberhard-Karls-University, Dept. of Urology, Tübingen, Germany

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**Does associated CIS with MIBC impact on neoadjuvant chemotherapy? Results of an International consortium**


**Institutes:** Lister Hospital Stevenage, Division of Robotic Urology, Department of Urology, Stevenage, United Kingdom, Glickman Urological and Kidney Institute and Taussig Cancer Center, Cleveland Clinic, Cleveland, United States of America, Division of Robotic Surgery, Dept. of Urology, Stevenage, United Kingdom, Freeman Hospital, Dept. of Urology, Newcastle, United Kingdom, University of British Columbia, Dept. of Urologic Sciences, Vancouver, Canada, Cleveland Clinic, Glickman Urological and Kidney Institute and Taussig Cancer Center, Cleveland, United States of America, H. Lee Moffitt Cancer Center and Research Institute, Dept. of Genitourinary Oncology, Tampa, United States of America, University of Southern California, USC/Norris Comprehensive Cancer Center, Institute of Urology, Los Angeles, United States of America, The Netherlands Cancer Institute-Antoni van Leeuwenhoek Hospital, Dept. of Urology, Amsterdam, The Netherlands, MD Anderson Cancer Center, Dept. of Urology, Houston, United States of America, University of Texas Southwestern Medical Center, Dept. of Urology, Dallas, United States of America, University of Oklahoma College of Medicine, Dept. of Urology, Oklahoma City, United States of America, University of Alberta, Edmonton, Alberta, Canada, The James Buchanan Brady Urological Institute, The Johns Hopkins School of Medicine, Dept. of Urology, Baltimore, United States of America, University of Kansas Medical Center, Dept. of Urology, Kansas City, United States of America, University of Michigan Health System, Dept. of Urology, Ann Arbor, United States of America, Division of Oncology, University of Washington School of Medicine and Fred Hutchinson Cancer Research, Dept. of Medicine, Seattle, United States of America, Well Cornell Medical College, Presbyterian Hospital, Dept. of Urology, New York, United States of America, Exeter Surgical Health Services Research Unit, Royal Devon and Exeter NHS Trust, Dept. of Surgery, Exeter, United Kingdom, McGill University Health Center, Dept. of Medicine.
Bladder-sparing protocol consisting of low-dose chemoradiotherapy and consolidative partial cystectomy against muscle-invasive bladder cancer: A comparison of oncological outcomes between primary and progressive diseases


Institutes: Tokyo Medical and Dental University Graduate School, Dept. of Urology, Tokyo, Japan

The B4GALT1 expression is prognostic and predictive for postoperative adjuvant chemotherapy benefit in patients with muscle-invasive bladder cancer


Institutes: Fudan University Shanghai Cancer Center, Dept. of Urology, Shanghai, China, Zhongshan Hospital, Fudan University, Dept. of Urology, Shanghai, China, School of Basic Medical Sciences, Fudan University, Biochemistry and Molecular Biology, Shanghai, China

Pattern of positive node metastases in patients treated with extended and super extended pelvic lymph node dissection and radical cystectomy due to bladder cancer


Institutes: IRCSS Ospedale San Raffaele, Dept. of Urology, Milan, Italy, Magna Graecia University of Catanzaro, Dept. of Urology, Catanzaro, Italy, Klinik Für Urologie, Luzerner Kantonsspital, Dept. of Urology, Lucerne, Switzerland, Medical University of Vienna, Dept. of Urology, Vienna, Austria

Circling tumor cells do not correspond with clinicopathological characteristics of muscle-invasive bladder cancer patients undergoing radical cystectomy: Interim results of the CirGuidance study


Muscle invasive bladder cancer: A single sample patient assay to predict molecular subtypes and benefit of neoadjuvant chemotherapy


Institutes: Universitätsklinikum, University of North Carolina at Chapel Hill, Lineberger Comprehensive Cancer Center,
Preoperative double-J stenting increases the risk of upper urinary tract (UUT) recurrence after radical cystectomy
By: Kiss B.1, Furrer M-A.1, Wuethrich P.2, Burkhard F.1, Thalmann G.1, Roth B.1
Institutes: 1University Hospital Bern, Dept. of Urology, Bern, Switzerland, 2University Hospital Bern, Dept. of Anesthesiology, Bern, Switzerland

Impact of perioperative transfusion of red blood cells and fresh frozen plasma on recurrence-free survival of patients after radical cystectomy for bladder cancer
Institutes: University Hospital of Tübingen, Dept. of Urology, Tübingen, Germany

Fate of patients undergoing pulmonary metastasectomy for metastatic urothelial carcinoma
By: Hoshi S.1, Fukui I.2, Kageyama Y.3, Kawashima K.4, Narita S.5, Ono K.6, Numahata K.1, Sato M.8, Morozumi K.8, Kuromoto A.8, Ozawa M.8, Hoshi K.7, Bilim V.7, Sasagawa I.7
Institutes: 1Yamagata Prefectural Central Hospital, Dept. of Urology, Yamagata, Japan, 2Cancer Institute Hospital, Dept. of Urology, Tokyo, Japan, 3Saitama Prefectural Cancer Center, Dept. of Urology, Saitama, Japan, 4Tochigi Prefectural Cancer Center, Dept. of Urology, Tochigi, Japan, 5Akita University Hospital, Dept. of Urology, Akita, Japan, 6Ishinomaki Redcross Hospital, Dept. of Urology, Ishinomaki, Japan, 7Yamagata Tokushykai Hospital, Dept. of Urology, Yamagata, Japan, 8Yamagata Prefectural Central Hospital, Dept. of Urology, Yamagata, Japan

Characterization of genomic aberrations of circulating, cell-free DNA in bladder cancer patients treated with radical cystectomy using multiplex ligation-dependent probe amplification: A new and efficient profiling method
By: Soave A.1, Chun F.1, Rink M.1, Weisbach L.1, Maurer V.1, Gild P.1, Steinbach B.2, Fisch M.1, Pantel K.2, Schwarzenbach H.2
Institutes: University Medical Center Hamburg-Eppendorf, Dept. of Urology, Hamburg, Germany, 2University Medical Center Hamburg-Eppendorf, Dept. of Tumor Biology, Hamburg, Germany

Perioperative allogeneic blood transfusion does not adversely impact survival after radical cystectomy for urinary bladder cancer – a competing-risks analysis from a multi-institutional European series
By: Gild P.1, Vetterlein M.1, Kluth L.A.1, Gierth M.2, Fritsche H-M.2, Burger M.2, Protzel C.3, Hakenberg O.3, Von Landenberg N.4, Roghmann F.4, Noldus J.4, Nuhn P.5, Rink M.1, Chun F.1, May M.6, Fisch M.1, Aziz A.1
Institutes: 1Universitätsklinikum Hamburg-Eppendorf, Dept. of Urology, Hamburg, Germany, 2Caritas St. Josef Medical Center, University of Regensburg, Dept. of Urology, Regensburg, Germany, 3University of Rostock, Dept. of Urology, Rostock, Germany, 4Marien Hospital Herne, Ruhr-University Bochum, Dept. of Urology, Herne, Germany, 5University Hospital Mannheim, Dept. of Urology, Mannheim, Germany, 6St. Elisabeth Medical Center Straubing, Dept. of Urology, Straubing, Germany

A propensity score analysis of radical cystectomy versus bladder-sparing trimodal therapy in the setting of a multidisciplinary bladder cancer clinic
By: Kulkarni G.1, Hermanns T.1, Wei Y.1, Bhindi B.1, Satkunasivam R.1, Athanasopoulos P.1, Bostrom P.1, Kuk C.1, Li K.1, Templeton A.2, Sridhar S.3, Van Der Kwast T.4, Chung P.5, Bristow R.5, Milosevic M.5, Warde P.5, Fleschner N.6, Jewett M.6, Bashir S.7, Zlotta A.8
Institutes: 1Princess Margaret Cancer Centre, University Health Network, Dept. of Surgery, Toronto, Canada, 2Mount Sinai Hospital, Dept. of Surgery, Toronto, Canada, 3Princess Margaret Cancer
Outcome of patients undergoing radical cystectomy for urothelial cell carcinoma of the bladder with evidence of distant metastases. Results of a single center study
Institutes: LMU-Klinikum der Universität München, Dept. of Urology, Munich, Germany

The accuracy of sequential urethral frozen sections and its impact on urethral recurrence after radical cystectomy
Institutes: University Hospital of Tübingen, Dept. of Urology, Tübingen, Germany
Personalised social media workshop for beginners

WS12

Monday, 27 March
12:30 - 13:00

Location: Social Media Helpdesk, Boulevard (level 1)

Chair: K.A.O. Tikkinen, Helsinki (FI)
ESU/ESFFU Hands-on Training Course in Urodynamics
HOT08

Location: Room South America, Exhibition Hall (Level 1)
Chair: H. Hashim, Bristol (GB)

Aims and objectives of this session
At the end of the workshop delegates should feel more confident in their practice of urodynamics.

Course description:
This course aims to provide a practical course offering an interactive “hands-on” environment for doctors, nurses and technicians to improve their skills in urodynamics, with an emphasis on practical aspects including equipment used, interpretation of traces, quality control and trouble-shooting. The use of recorded tests, access to equipment and small groups means that individual problems can be addressed. All the speakers are involved in similar “hands-on” courses, which have run successfully in the United Kingdom and abroad. The small group format has been shown to work well in addressing individual needs. Access to teaching aids and equipment will simulate the clinical scenario as much as possible within the constraints of the conference setting.

Target audience: For all participants with an interest in Urodynamics

M. Belal, Birmingham (GB)
A. Gammie, Bristol (GB)
A. Garcia Mora, Mexico City (MX)
L. Thomas, Bristol (GB)
**Minimally invasive reconstructive surgery**

**Video Session 10**

**Location:** eURO Auditorium (Level 0)

**Chairs:**
- S.A. Ahyai, Göttingen (DE)
- G. Al Edwan, Amman (JO)
- P-T. Piéchaud, Bordeaux (FR)

**Aims and objectives of this session**
This session will demonstrate reconstructive procedures with novel approaches that either look promising because they still obey the principles of classic reconstructive urology or because they show convincing data with follow up and evidence.

All presentations have a maximum length of 8 minutes, followed by 4 minutes of discussion.

### V74
**Laparoscopic management of congenital, acquired and iatrogenic diseases of the upper urinary tract**
*By:* Fuschi A., Al Salhi Y., Leto A., Velotti G., Palleschi G., Pastore A.L., Carbone A.
*Institutes:* Sapienza University of Rome, Dept. of Medico-Surgical Sciences and Biotechnologies, Urology Unit, Latina, Italy

### V75
**Minilaparoendoscopic single-site (MILESS) pyeloplasty: The best compromise between surgeon’s ergonomy and patient’s cosmesis (IDEAL phase 2a)**
*By:* Greco F., Pini G., Alba S., Altieri V., Verze P., Mironov V.
*Institutes:* 1 Romolo Hospital, Dept. of Urology, Rocca di Neto, Italy, 2 Federico II University, Dept. of Urology, Naples, Italy, 3 Uroclinic, Minimally Invasive Robotic Center, Stockholm, Sweden

### V76
**Robotic ureteral reimplantation for uretero-enteric anastomotic strictures in different urinary diversions**
*Institutes:* 1 Regina Elena National Cancer Institute, Dept. of Urology, Rome, Italy, 2 Keck School of Medicine, University of Southern California, USC Institute of Urology, Los Angeles, United States of America, 3 Methodist Hospital, Dept. of Urology, Houston, United States of America

### V77
**Laparoscopic ureteral substitution with cecal appendix**
*By:* Cavalli A., Hota T., Slongo L., Ketzer Krebs R., Gouveia D., Souza V.
*Institutes:* 1 Hospital de clinicas, Federal University of Parana, Dept. of Urology, Paraná, Brazil, 2 University Federal of Parana, Dept. of Urology, Curitiba, Brazil, 3 Hospital Nossa Senhora Das Graças, Dept. of Urology, Curitiba, Brazil

### V78
**Robotic ureterolysis for ureteric obstruction from retroperitoneal fibrosis (RPF)**
*By:* Fernando A., Challacombe B., O’Brien T.
*Institutes:* Guy’s and St Thomas’ NHS Foundation Trust, Dept. of Urology, London, United Kingdom

### V79
**Left-sided ureteroplasty with appendix**
*By:* Popov S., Orlov I., Vyazovtsev P., Galliamov E., Novikov A., Sergeev V.
*Institutes:* 1 City Hospital Saint Luka / No18, Dept. of Urology, Saint Petersburg, Russia, 2 Civil Aviation Hospital, Dept. of Urology, Moscow, Russia, 3 Central Bank Medical Center, Dept. of Urology, Moscow, Russia, 4 Moscow Oncological City Hospital #62, Dept. of Urology, Moscow, Russia
V80  Robot-assisted implantation of artificial urinary sphincter in women: Standardization of the surgical technique  
By: Peyronnet B., Vincendeau S., Pradere B., Tondut L., Alimi Q., Freton L., Hascoet J., Bensalah K., Manunta A.  
Institutes: CHU Rennes, Dept. of Urology, Rennes, France

V81  The novel technique of pelvic organ prolapse treatment: Apical sling and subfascial colporrhaphy  
By: Shkarupa D., Pisarev A., Zaytseva A., Shapovalova E., Kubin N.  
Institutes: University Clinic of Saint Petersburg State University, Dept. of Urology, Saint-Petersburg, Russia
Aims and objectives of this session
To discuss different surgical aspects of nephrectomy for advanced RCC.

Poster viewing of 20 minutes. Presentations will take place on stage. Standard presentations are 2 minutes in length, followed by 2 minutes for discussion.

910 Renal tumor management in Scandinavia: A multi-institutional survey
By: Nisen H.¹, Jarvinen P.¹, Lund L.², Ljungberg B³, Kromann-Andersen B.⁴, Gudmundsson E.⁵, Sundqvist P.⁶, Fovaeus M.⁷, Nilsen F.⁸, Beisland C.⁹
Institutes: HUCH Helsinki University Central Hospital, Dept. of Urology, Helsinki, Finland, Odense University Hospital, Dept. of Urology, Odense, Denmark, Umeå University, Dept. of Surgical and Perioperative Sciences, Umeå, Sweden, Herlev University Hospital, Dept. of Urology, Copenhagen, Denmark, Landspitali, Dept. of Urology, Reykjavik, Iceland, Örebro University Hospital, Dept. of Urology, Örebro, Sweden, Sahlgrenska University Hospital, Dept. of Urology, Gothenburg, Sweden, Akershus University Hospital, Dept. of Urology, Oslo, Norway, Haukeland University Hospital, Dept. of Urology, Bergen, Norway

911 Multicenter analysis of oncologic and renal functional outcomes of radical and partial nephrectomy in stage II renal cell carcinoma
By: Hamilton Z.¹, Correa A.², Larcher A.⁴, Khene Z.³, Fero K.¹, Han D.¹, Bloch A.¹, Field C.¹, Peyronnet B.³, Capitanio U.⁴, Montorsi F.⁴, Uzzo R.², Derweesh I.¹
Institutes: Moores Cancer Center, Dept. of Urology, La Jolla, United States of America, Fox Chase Cancer Center, Dept. of Urology, Philadelphia, United States of America, University of Rennes, Dept. of Urology, Rennes, France, San Raffaele Scientific Institute, Dept. of Urology, Milan, Italy

912 Partial versus radical nephrectomy in patients with renal cell carcinoma and renal or caval thrombus: Oncological and functional outcomes from an individual matched cohort analysis
By: Marra G.¹, Gontero P.¹, Brattoli M.¹, Filippini C.², Linares Espinos E.³, Capitanio U.⁴, Montorsi F.⁴, Daneshmand S.⁶, Huang W.C.⁷, Martínez-Salamanca J.I.⁸, McKiernan J.M.⁹, Scherr D.S.¹⁰, Zigeuner R.¹¹, Libertino J.A.¹²
Institutes: San Giovanni Battista Hospital, Dept. of Urology, Turin, Italy, San Giovanni Battista Hospital, Dept. of Urology, Turin, Italy, Hospital Universitario Puerta De Hierro-Madrid, Dept. of Urology, Madrid, Spain, San Raffaele Hospital, Dept. of Urology, Milan, Italy, Lahey Clinic, Dept. of Urology, Burlington, United States of America, USC/Norris Comprehensive Cancer Center, Dept. of Urology, Los Angeles, United States of America, University School of Medicine, Dept. of Urology, New York, United States of America, Hospital Universitario Puerta de Hierro-Majadahonda, Universidad Autónoma de Madrid, Dept. of Urology, Madrid, Spain, Columbia University College of Physicians and Surgeons, Dept. of Urology, New York, United States of America, Weill Cornell Medical Center, Dept. of Urology, New York, United States of America, Medical University of Graz, Dept. of Urology, Graz, Austria

913 Comparison of different surgical approaches for the management of renal cell carcinoma invading the renal vein
By: Hanna N., Ingham M., Seisen T., Chang S.
Institutes: Brigham and Women’s Hospital, Dept. of Urology, Boston, United States of America
Robot assisted radical nephrectomy and inferior vena cava thrombectomy: Surgical technique, perioperative and oncologic outcomes
By: Simone G.¹, Hatcher D.², Ferriero M.¹, Minisola F.¹, Misuraca L.¹, Tuderti G.¹, Guaglianone S.¹, De Castro Abreu A.L.², Aron M.², Desai M.², Gill I.S.², Gallucci M.¹
Institutes: Regina Elena National Cancer Institute, Dept. of Urology, Rome, Italy, ²Keck School of Medicine, University of Southern California, Institute of Urology, Los Angeles, United States of America

Robotic versus open inferior Vena cava (IVC) tumor thrombectomy: The initial comparison
By: Chopra S., Loh-Doyle J., Cai J., Daneshman S., Djaladat H., Desai M., Gallucci M., Gill I.S.
Institutes: Usc Institute of Urology, Dept. of Urology, Los Angeles, United States of America

Comparison between laparoendoscopic single site nephrectomy and conventional laparoscopic nephrectomy: A randomized control single institution experience
Institutes: Cairo University, Dept. of Urology, Cairo, Egypt

Impact of intraoperative blood transfusions on survival after surgery for renal cell carcinoma
Institutes: RCCS Ospedale San Raffaele, Urological Research Institute, Unit of Urology, Division of Oncology, Milan, Italy

The efficacy of neoadjuvant targeted therapy in treatment of localized RCC
By: Voylenko O., Vitruk I., Stakhovskyi O., Kononenko O., Pikul M., Stakhovsky E.
Institutes: National Cancer Institute, Dept. of Plastic and Reconstructive Oncological Urology, Kiev, Ukraine

Clinical benefit of presurgical axitinib therapy in renal cell carcinoma patients with thrombus extending to inferior vena cava
Institutes: Hirosaki University Graduate School of Medicine, Dept. of Urology, Hirosaki, Japan

Phase II study of axitinib for downstaging cT2a to cT1 renal tumors for allowing partial nephrectomy (AXIPAN)
By: Lebacle C.¹, Bernhard J.C.², Bensalah K.³, Baumert H.⁴, Lang H.⁵, Jacqmin D.⁶, Duclos B.⁶, Ravaud A.⁷, Laguerre B.⁷, Albige L.⁸, Arnoux A.⁹, Escudier B.⁹, Patard J.J.¹⁰
Institutes: Bicêtre University Hospital, Dept. of Urology, Le Kremlin-Bicêtre, France, ²Pellegrin Hospital, Dept. of Urology, Bordeaux, France, ³Pontchaillou University Hospital, Dept. of Urology, Rennes, France, ⁴Saint-Joseph Hospital, Dept. of Urology, Paris, France, ⁵Hôpitaux Universitaires De Strasbourg, Nouvel Hôpital Civil, Dept. of Urology, Strasbourg, France, ⁶Hôpitaux Universitaires De Strasbourg, Hôpital Hautepierre, Dept. of Oncology, Strasbourg, France, ⁷Saint-André Hospital, University Hospital, CHU Bordeaux, Dept. of Medical Oncology, Bordeaux, France, ⁸Eugène Marquis Center, Dept. of Oncology, Rennes, France, ⁹Gustave Roussy Université Paris–Saclay, Dept. of Medicine, Villejuif, France, ¹⁰Bicetre University Hospital, Dept. of Statistics, Le Kremlin-Bicêtre, France

Meta-analysis of upfront VEGF targeted therapy prior to nephrectomy in metastatic clear cell renal cancer
By: Szabados B.¹, Gomez De Liano Lista A.¹, Wimalasingham A.¹, De Bruijn R.², Haanen J.³, Blank C.³, Hall P.⁴, Staehler M.⁵, Chowdhury S.⁶, Hopkins T.⁷, Powles T.⁷, Bex A.²
Institutes: ¹Barts Health Nhs Trust St Bartholomew’s Hospital, Dept. of Oncology, London, United Kingdom, ²The Netherlands Cancer Institute, Dept. of Urology, Amsterdam, The Netherlands, ³The Netherlands Cancer Institute, Dept. of Oncology, Amsterdam, The Netherlands, ⁴Barts Health NHS Trust St Bartholomew’s Hospital, Dept. of Oncology, London, United Kingdom, ⁵Guy’s, King’s and St Thomas’ Hospitals, Dept. of Oncology, London, United Kingdom, ⁶University Hospital Munich-
S-TRAC adjuvant sunitinib phase 3 trial in patients with high risk renal cell carcinoma: Subgroups analyses by risk factors


Institutes: ¹University Hospital of Munich, Dept. of Urology, Munich, Germany, ²Bicêtre Hospital, Paris-Saclay University, Dept. of Urology, Le Kremlin Bicêtre, France, ³Ronald Reagan UCLA Medical Center, Dept. of Urology, Los Angeles, Ca, United States of America, ⁴Bordeaux University Hospital, Dept. of Medical Oncology, Bordeaux, France, ⁵Memorial Sloan Kettering Cancer Center, Dept. of Oncology, New York, United States of America, ⁶University of Surrey, Dept. of Clinical and Experimental Medicine, Surrey, United Kingdom, ⁷Duke Cancer Center, Dept. of Oncology, Durham, United States of America, ⁸Taipei Veterans General Hospital, Dept. of Urology, Taipei, Taiwan, ⁹Institut Gustave Roussy, Dept. of Medical Oncology, Villejuif, France, ¹⁰Aarhus University Hospital, Dept. of Oncology, Aarhus, Denmark, ¹¹Charité Universitätsmedizin Berlin, Dept. of Urology, Berlin, Germany, ¹²Azienda Ospedaliera Di Rilievo Nazionale A. Cardarelli, Dept. of Oncology and Urology, Naples, Italy, ¹³Centre Eugene Marquis, Dept. of Medical Oncology, Rennes, France, ¹⁴Klinika Onkologii Oddzial Chemioterapii, Dept. of Oncology, Poznan, Poland, ¹⁵Slovak Medical University In Bratislava, Dept. of Urology, Bratislava, Slovakia, ¹⁶Pfizer S.r.L, Dept. of Oncology, Milan, Italy, ¹⁷Pfizer Inc, Dept. of Oncology, La Jolla, United States of America, ¹⁸Pfizer Inc, Dept. of Oncology, New York, United States of America, ¹⁹Spire Roding Hospital, Dept. of Urology, London, United Kingdom

Summary

M.C. Mir Maresma, Cleveland (US)
Complications and functional outcomes after radical prostatectomy

Poster Session 70

**Location:** Room Madrid, North Hall (Level 1)

**Chairs:** M. Graefen, Hamburg (DE)
G. Ploussard, Toulouse (FR)
K.H. Rha, Seoul (KR)

**Aims and objectives of this session**
The aim of this session is to evaluate perioperative complications and functional outcomes after radical prostatectomy.

Poster viewing of 20 minutes. Presentations will take place on stage. Standard presentations are 2 minutes in length, followed by 2 minutes for discussion.

923

**Pre-discharge predictors of readmissions and post-discharge complications in robot-assisted radical prostatectomy**
By: Xia L., Taylor B., Guzzo T.
Institutes: University of Pennsylvania Perelman School Of Medicine, Division of Urology, Dept. of Surgery, Philadelphia, United States of America

924

**Impact of metabolic syndrome on robotic assisted radical prostatectomy outcomes: Stratification by number of metabolic risk factors**
By: Bonet Puntí X., Ogaya G., Woodlief T., Hernández-Cardona E., Ganapathi H., Rogers T., Dinatale R., Coelho R., Rocco B., Patel V.
Institutes: Global Robotics Institute, Florida Hospital - Celebration Health, Dept. of Urology, Celebration, United States of America

925

**Detailed analysis of the impact of robotic-assisted radical prostatectomy on lower urinary tract symptoms**
By: Mackenzie K.¹, Fabricius M.², McColl E.², Johnson M.¹, Soomro N.¹, Harding C.¹, Aning J.¹
Institutes: Newcastle upon Tyne Hospitals Nhs Foundation Trust, Dept. of Urology, Newcastle upon Tyne, United Kingdom, ²University of Newcastle, Institute of Health and Society, Newcastle upon Tyne, United Kingdom

926

**Predictors of continence after Retzius-sparing robot-assisted radical prostatectomy**
Institutes: Yonsei University College of Medicine, Dept. of Urology, Seoul, South Korea

927

**Risk stratification model for post-operative urinary continence based on pre-operative patient’s factors and preservation of the neurovascular bundles during robot-assisted radical prostatectomy**
By: Morizane S., Yumioka T., Yamaguchi N., Iwamoto H., Masago T., Hikita K., Honda M., Takenaka A.
Institutes: Faculty of Medicine, Tottori University, Dept. of Urology, Yonago, Japan

928

**Association between early urinary continence and erectile function recovery after robot-assisted radical prostatectomy: Development of a novel postoperative risk score to optimize patient counseling and follow-up**
By: Gandaglia G.¹, Suardi N.¹, Gallina A.¹, Dell'Oglio P.¹, Fossati N.¹, Cucchiara V.¹, Moschini M.¹, Bandini M.¹, Zaffuto E.¹, Salonia A.¹, Gaboardi F.¹, Damiano R.², Mirone V.², Montorsi F.², Briganti A.¹
Institutes: ¹Vita-Salute University San Raffaele, Dept. of Urology, Milan, Italy, ²University of Naples
929 Comparison of the limited and extended lymphadenectomy during robot-assisted radical prostatectomy for prostate cancer: Does the extended lymphadenectomy affect the complications? By: Morizane S.1, Fukasawa S.2, Komaru A.2, Inokuchi J.3, Eto M.3, Shimbo M.4, Hattori K.4, Kawano Y.5, Noma H.6, Takenaka A.1 Institutes: Faculty of Medicine, Tottori University, Dept. of Urology, Yonago, Japan, 2Chiba Cancer Center, Dept. of Urology, Chiba, Japan, 3Graduate School of Medical Sciences, Kyushu University, Dept. of Urology, Fukuoka, Japan, 4St. Luke’s International Hospital, Dept. of Urology, Tokyo, Japan, 5Faculty of Life Sciences, Kumamoto University, Dept. of Urology, Kumamoto, Japan, 6The Institute of Statistical Mathematics, Dept. of Data Science, Tokyo, Japan

930 Contemporary complications after radical prostatectomy By: Pompe R.S.1, Beyer B.1, Gild P.1, Karakiewicz P.2, Leyh-Bannurah S-R.1, Schlomm T.1, Steuber T.1, Huland H.1, Graefen M.1, Tilki D.1 Institutes: Universitätsklinikum Hamburg-Eppendorf, Dept. of Urology, Hamburg, Germany, 2University of Montreal Health Center, Cancer Prognostics and Health Outcomes Unit, Montreal, Canada


932 Return to work following robot assisted laparoscopic- and open retropubic radical prostatectomy: A single center cohort study to compare duration of sick leave By: Beyer B., Von Mechow S., Tennstedt P., Graefen M. Institutes: Universitätsklinikum Hamburg-Eppendorf, Martini-Clinic, Prostate Cancer Center, Hamburg, Germany

933 Outcomes of preventive vs delayed ligation of dorsal vascular complex during RARP: Preliminary results of a randomized trial By: Palumbo C., Antonelli A., Mittino I., Francavilla S., Lattarulo M., Sodano M., Furlan M., Peroni A., Simeone C. Institutes: ASST Spedali Civili Hospital of Brescia, Dept. of Urology, Brescia, Italy

934 Adjustable transobturator male system with pre-attached scrotal port for the treatment of male stress urinary incontinence By: Angulo J.1, Arance I.1, Esquinas C.1, Dorado J.F.2, Marcelino J.3, Martins F.3 Institutes: Hospital Universitario de Getafe, Dept. of Urology, Getafe, Spain, 2Pertica, Dept. of Statistics, Getafe, Spain, 3Hospital De Santa Maria, Dept. of Urology, Lisbon, Portugal

935 Incidence, risk factors, management and complications of rectal injuries during radical prostatectomy By: Mandel P.1, Linnemannstöns A.2, Chun F.3, Schlomm T.1, Rosenbaum C.1, Ludwig T.3, Dahlem R.3, Fisch M.3, Graefen M.3, Salomon G.2, Huland H.2, Tilki D.1, Steuber T.1 Institutes: University Hospital Hamburg-Eppendorf, Martini-Klinik Prostate Cancer Center; Department of Urology, Hamburg, Germany, 2University Hospital Hamburg-Eppendorf, Martini-Klinik Prostate Cancer Center, Hamburg, Germany, 3University Hospital Hamburg-Eppendorf, Dept. of Urology, Hamburg, Germany

936 Withdrawn By: Institutes:

937 Long term complications and quality of life after pure versus robot-assisted laparoscopic
prostatectomy: Results of a prospective randomised controlled trial
Institutes: 1 San Luigi Hospital, Dept. of Urology, Turin, Italy, 2 San Giovanni Battista Hospital, Dept. of Nuclear Medicine, Turin, Italy
Survivorship in prostate cancer: "It's all about patients"

Poster Session 71

Monday, 27 March
14:00 - 15:30

Location: Room Milan, North Hall (Level 1)

Chairs: R. Kirby, London (GB)
S. MacLennan, Aberdeen (GB)
B. Tombal, Brussels (BE)

Aims and objectives of this session
To assess the patient's perspective and expectation during treatment and follow-up.

Poster viewing of 20 minutes. Presentations will take place on stage. Standard presentations are 2 minutes in length, followed by 2 minutes for discussion. Extended presentations (*) are 3 minutes in length, followed by 3 minutes for discussion.

*938

Prostate cancer-specific anxiety in long-term survivors after radical prostatectomy
By: Meissner V.H.¹, Dinkel A.², Marten-Mittag B.², Gschwend J.¹, Herkommer K.¹
Institutes: Klinikum Rechts Der Isar, Technical University of Munich, Dept. of Urology, Munich, Germany, Klinikum Rechts Der Isar, Technical University of Munich, Dept. of Psychosomatic Medicine and Psychotherapy, Munich, Germany

*939

Patients' perspectives on the risks of localized prostate cancer treatments prior to making the treatment decision
By: Van Stam M-A.¹, Van Der Poel H.², Aaronson N.³, Horenblas S.², Tillier C.², Bosch J.⁴
Institutes: University Medical Center Utrecht, Dept. of Urology, Utrecht, The Netherlands, NKI-AvL, Dept. of Urology, Amsterdam, The Netherlands, NKI-AvL, Division of Psychosocial Research & Epidemiology, Amsterdam, The Netherlands, Umc Utrecht, Dept. of Urology, Utrecht, The Netherlands

940

Elderly prostate cancer patients in the Netherlands have a worse prognosis than younger patients: A population-based study
By: Vernooij R.¹, Van Oort I.², De Reijke T.³, Aben K.¹
Institutes: Netherlands Comprehensive Cancer Organisation, Dept. of Research, Utrecht, The Netherlands, Radboud University Medical Centre, Dept. of Urology, Nijmegen, The Netherlands, Academic Medical Centre, Dept. of Urology, Amsterdam, The Netherlands

941

A multimodal supportive care intervention in men and their partners/carers affected by metastatic prostate cancer: A randomised controlled feasibility study
By: Paterson C., Primeau C., Nabi G.
Institutes: Ninewells Hospital, Dept. of Urology, Dundee, United Kingdom

942

Perioperative patient education improves long-term satisfaction rates of low-risk prostate cancer patients after radical prostatectomy
Institutes: LMU-Klinikum der Universität München, Dept. of Urology, Munich, Germany

943

Impact of the perception of relationship cohesion (dyadic adjustment) on the quality of life (QoL) of patients with prostate cancer (PCa) receiving gonadotropin-releasing hormone (GnRH) agonist therapy
By: Droupy S.¹, Pello-Leprince-Ringuet N.², Perrot V.², Descazeaud A.³
Institutes: Chu Carémeau, Dept. of Urology Andrology, Nimes, France, Ipsen Pharma, Dept. of Urology, Boulogne-Billancourt, France, University Hospital, Dept. of Urology, Limoges, France
944 Impact of implementing a goal directed holistic needs clinic on quality of life after robotic radical prostatectomy
By: Calleja E., Ferguson J., Aning J.
Institutes: Freeman Hospital, Dept. of Urology, Newcastle upon Tyne, United Kingdom

945 Why has he changed so much? Exploring cognitive impairments in prostate cancer survivors on ADT using virtual reality testing
By: Green J.¹, Mills R.², Holland A.³, Davies M.³, Edginton T.⁴, Jansari A.⁵
Institutes: Whipps Cross University Hospital, Dept. of Urology, London, United Kingdom, ¹UEL, Dept. of Psychology, London, United Kingdom, ²Goldsmiths, Dept. of Psychology, London, United Kingdom, ³University of Westminster, Dept. of Psychology, London, United Kingdom, ⁴Goldsmith, Dept. of Psychology, London, United Kingdom

946 Psychosocial interventions to improve the quality of life for men with prostate cancer: A Bayesian network meta-analysis of 31 randomised controlled trials
By: Shi Q., Xiang T., Liangren L., Zhenhua L., Lu Y., Qiang W.
Institutes: West China Hospital - Sichuan University, Dept. of Urology, Chengdu, China

947 Safety and benefits of group based exercise in daily clinical practice for men with prostate cancer undergoing androgen deprivation therapy
By: Ostergren P.B.¹, Ragle A-M.², Jakobsen H.¹, Klausen T.W.³, Vinther A.², Sønksen J.¹
Institutes: Herlev and Gentofte University Hospital, Dept. of Urology, Herlev, Denmark, ²Herlev and Gentofte University Hospital, Dept. of Rehabilitation, Herlev, Denmark, ³Herlev and Gentofte University Hospital, Dept. of Haematology, Herlev, Denmark

948 How do changes in erectile functioning affect self-esteem in older men with localized prostate cancer?
By: Hilger C., Burkert S., Kendel F.
Institutes: Charité - Universitätsmedizin Berlin, Dept. of Medical Psychology, Berlin, Germany

949 Estimation of outcomes of artificial urinary sphincter implantation - a multicenter prospective observational study
By: Kaiho Y.¹, Masuda H.², Takei M.³, Hirayama T.⁴, Mitsui T.⁵, Yokoyama M.², Kawamorita N.¹, Nakagawa H.¹, Iwamura M.⁴, Shinohara N.⁵, Arai Y.¹
Institutes: ¹Tohoku University Graduate School of Medicine, Dept. of Urology, Sendai, Japan, ²Tokyo Medical and Dental University, Dept. of Urology, Tokyo, Japan, ³Harasanshin Hospital, Dept. of Urology, Fukuoka, Japan, ⁴Kitasato University School of Medicine, Dept. of Urology, Kanagawa, Japan, ⁵Hokkaido University Graduate School of Medicine, Dept. of Renal and Genitourinary Surgery, Sapporo, Japan

15:15 - 15:22 Personal perspective
R. Kirby, London (GB)
**Management of recurrence after local treatment**

**Poster Session 72**

**Location:** Room Paris, North Hall (Level 1)

**Chairs:**
- S. Joniau, Leuven (BE)
- N. Mottet, Saint-Étienne (FR)
- K. Touijer, New York (US)

**Aims and objectives of this session**

To evaluate the imaging and markers for recurrence and adjuvant or salvage treatments results.

Poster viewing of 20 minutes. Presentations will take place on stage. Standard presentations are 2 minutes in length, followed by 2 minutes for discussion. Extended presentations (*) are 3 minutes in length, followed by 3 minutes for discussion.

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**950**

**External validation of a TCP model predicting PSA relapse after post-prostatectomy radiotherapy**

**By:** Broggi S.², Galla A.³, Saracino B.⁴, Faiella A.⁴, *Fossati N.*⁵, Gabriele D.³, Maggio A.³, Sanguineti G.⁴, Di Muzio N.¹, Briganti A.¹, Cozzarini C.¹, Fiorino C.²

**Institutes:** San Raffaele Scientific Institute, Dept. of Radiotherapy, Milan, Italy,² San Raffaele Scientific Institute, Dept. of Medical Physics, Milan, Italy,¹ Candiole Cancer Institute - FPO, IRCCS, Dept. of Radiotherapy, Candiole, Italy,³ Regina Elena National Cancer Institute, Dept. of Radiotherapy, Rome, Italy,⁴ San Raffaele Scientific Institute, Dept. of Urology, Milan, Italy

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**951**

**Genomic classifier augments the role of pathological features in identifying optimal candidates for adjuvant radiation therapy in patients with prostate cancer: Development and internal validation of a multivariable prognostic model**

**By:** Dalela D.¹, Santiago-Jimenez M.², Yousefi K.², Karnes J.³, Ross A.⁴, Den R.⁵, Freedland S.⁶, Schaeffer E.⁶, Dicker A.⁷, Menon M.¹, Briganti A.⁸, Abdollah F.¹

**Institutes:** Henry Ford Health System, Vattikuti Urology Institute, Detroit, United States of America, GenomeDx Biosciences, GenomeDx Biosciences, Vancouver, Canada, Mayo Clinic, Dept. of Urology, Rochester, United States of America, Mayo Clinic, Dept. of Radiation Oncology, Phoenix, United States of America, Samuel Oschin Comprehensive Cancer Center, Cedars-Sinai Medical Center, Dept. of Surgery, Division of Urology, Los Angeles, United States of America, Northwestern University, Feinberg School of Medicine, Dept. of Urology, Chicago, United States of America, Vita Salute San Raffaele Hospital, Dept. of Urology, Milan, Italy

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**952**

**Natural history of patients treated with salvage radiation therapy for rising PSA after radical prostatectomy: A long-term survival analysis**

**By:** Briganti A.¹, Fossati N.¹, Karnes J.², Boorjian S.², Colichia M.², Bossi A.³, Cozzarini C.⁴, Fiorino C.⁴, Noris Chiorda B.⁴, Dell'Oglio P.¹, Gandaglia G.¹, Wiegel T.¹, Shariat S.³, Goldner G.⁷, Joniau S.⁸, Battaglia A.⁹, Haustermans K.⁹, De Meerleer G.⁹, Fonteyne V.¹⁰, Ost P.¹⁰, Van Poppel H.⁸, Montorsi F.¹

**Institutes:** Vita-Salute University San Raffaele, Dept. of Urology, Milan, Italy,² Mayo Clinic, Dept. of Urology, Rochester, United States of America,³ Gustave Roussy Institute, Dept. of Radiation Oncology, Villejuif, France,⁴ Vita-Salute University San Raffaele, Dept. of Radiosurgery, Milan, Italy,⁵ University Hospital Ulm, Dept. of Radiation Oncology, Ulm, Germany,⁶ Medical University of Vienna, Dept. of Urology, Vienna, Austria,⁷ Medical University of Vienna, Dept. of Radiation Oncology, Vienna, Austria,⁸ University Hospitals Leuven, Dept. of Urology, Leuven, Belgium,⁹ University Hospitals Leuven, Dept. of Radiotherapy, Leuven, Belgium,¹⁰ Ghent University Hospital, Dept. of Radiotherapy, Ghent, Belgium
Identifying the optimal candidate for salvage lymph node dissection for nodal recurrence of prostate cancer: Results from a large, multi-institutional analysis


Institutes: Vita-Salute University San Raffaele, Dept. of Urology, Milan, Italy, Mayo Clinic, Dept. of Urology, Rochester, Minnesota, United States of America, Phoenix Imaging Center, Dept. of Urology, Phoenix, Arizona, United States of America, Department of Urology and Pediatric Urology, University Hospital Schleswig Holstein, Campus Kiel, Dept. of Urology, Kiel, Germany, University Hospitals Leuven, Dept. of Urology, Leuven, Belgium, Keck School of Medicine, University of Southern California, USC Institute of Urology, Catherine & Joseph Aresty Department of Urology, Los Angeles, California, United States of America, Ludwig-Maximilians-University, Dept. of Urology, Munich, Germany, University of Cologne, Dept. of Urology, Cologne, Germany, University Hospital Schleswig Holstein, Campus Kiel, Dept. of Urology and Pediatric Urology, Kiel, Germany, OLV Ziekenhuis Aalst, Belgium ORSI Academy, Dept. of Urology, Melle, Belgium

Selection criteria for surveillance in patients with biochemical recurrence after radical prostatectomy


Institutes: Cancer Institute Hospital, Japanese Foundation for Cancer Research, Dept. of Urology, Koto-Ku, Japan

Adjuvant versus early salvage radiation therapy in node positive prostate cancer patients: A long term survival analysis


Institutes: Vita-Salute University San Raffaele, Dept. of Urology, Milan, Italy, Mayo Clinic, Dept. of Urology, Rochester, Minnesota, United States of America, Gustave Roussy Institute, Dept. of Radiation Oncology, Villejuif, France, Vita-Salute University San Raffaele, Dept. of Radiotherapy, Milan, Italy, University Hospital Ulm, Dept. of Radiation Oncology, Ulm, Germany, Medical University of Vienna, Dept. of Urology, Vienna, Austria, Medical University of Vienna, Dept. of Radiation Oncology, Vienna, Austria, University Hospitals Leuven, Dept. of Urology, Leuven, Belgium, University Hospitals Leuven, Dept. of Radiotherapy, Leuven, Belgium, Ghent University Hospital, Dept. of Radiotherapy, Ghent, Belgium

Salvage external beam radiation therapy (EBRT) for local recurrence after high intensity focused ultrasound (HIFU) failure versus salvage HIFU for local recurrence after EBRT failure: A long term analysis


Institutes: Hospices Civils De Lyon, Dept. of Urology and Transplantation, Lyon, France, Inserm, U1032, LabTau, Lyon, France, Laboratoire d’Ecolegie Alpine, Grenoble, France, Centre Antoine Lacassagne, Dept. of Biostatistics, Nice, France, Pellegrin Hospital, Dept. of Urology and Transplantation, Bordeaux, France, Edouard Herriot Hospital, Dept. of Pathology, Lyon, France, Edouard Herriot Hospital, Dept. of Radiology, Lyon, France

Predictive factors of positive 68Ga-PSMA PET/CT in patients with PSA recurrence following radical prostatectomy

By: Tosco L., Joniau S., Witters M., Battaglia A., Cromphout L., Goffin K., Gheyens O., Deroose C., Oven R., Van Laere K.

Institutes: Uz Leuven - Campus Gasthuisberg, Dept. of Urology, Leuven, Belgium, Uz Leuven - Campus Gasthuisberg, Dept. of Nuclear Imaging, Leuven, Belgium
Clinical impact of 68Ga-PSMA PET/CT in prostate cancer patients with rising PSA after treatment with curative intent: Preliminary analysis of a multidisciplinary approach
By: Albisinni S.1, Artigas C.2, Aoun F.1, Biaou I.1, Gil T.3, Hawaux E.1, Limani K.1, Otte F.X.4, Peltier A.1, Sideris S.3, Sirtaine N.5, Flamen P.2, Van Velthoven R.1
Institutes: 1Institut Jules Bordet, Dept. of Urology, Brussels, Belgium, 2Institut Jules Bordet, Dept. of Nuclear Medicine, Brussels, Belgium, 3Institut Jules Bordet, Dept. of Oncology, Brussels, Belgium, 4Institut Jules Bordet, Dept. of Radiotherapy, Brussels, Belgium, 5Institut Jules Bordet, Dept. of Pathology, Brussels, Belgium

68Ga-PSMA PET/CT improves biochemical response after salvage lymph node dissection for nodal recurrence in prostate cancer patients
By: Herlemann A.1, Kretschmer A.1, Buchner A.1, Karl A.1, Tritschler S.1, El-Malazi L.1, Wenter V.2, Ilhan H.2, Bartenstein P.2, Stief C.1, Gratzeke C.1
Institutes: Ludwig-Maximilians-University Munich, Dept. of Urology, Munich, Germany, 2Ludwig-Maximilians-University Munich, Dept. of Nuclear Medicine, Munich, Germany

The comparison of prognoses between radiotherapy and radical prostatectomy in patients with high risk localized or locally advanced prostate cancer treated with neoadjuvant hormonal therapy
By: Joung J.Y.1, Kim S.H.1, Seo H.K.1, Chung J.1, Cho K.H.2, Park W.S.3, Lee K.H.1
Institutes: National Cancer Center, Dept. of Genitourinary Cancer Branch, Goyang, South Korea, 2National Cancer Center, Proton Therapy Center, Dept. of Radiation Oncology, Goyang, South Korea, 3National Cancer Center, Dept. of Pathology, Goyang, South Korea

Stereotactic radiotherapy for bone and nodal oligometastases: Patterns of relapse in a prospective clinical trial
By: Siva S.2, Udovicich C.1, Shaw M.2, Violet J.2, Chander S.2, Bressel M.3, Goad J.1, Lawrentschuck N.1, Foroudi F.1, Murphy D.1
Institutes: 1Peter Maccallum Cancer Centre, Dept. of Urology, Melbourne, Australia, 2Peter Maccallum Cancer Centre, Dept. of Radiation Oncology, Melbourne, Australia, 3Peter Maccallum Cancer Centre, Dept. of Biostatistics and Clinical Trials, Melbourne, Australia

Assessing the risk of early and late toxicity of post-prostatectomy radiation therapy: A long-term multi-institutional analysis
Institutes: 1Vita-Salute University San Raffaele, Dept. of Urology, Milan, Italy, 2Mayo Clinic, Dept. of Urology, Rochester, United States of America, 3Gustave Roussy Institute, Dept. of Urology, Villejuif, France, 4Vita-Salute University San Raffaele, Dept. of Radiotherapy, Milan, Italy, 5Vita-Salute University San Raffaele, Dept. of Oncology and Urology, Milan, Italy, 6University Hospital Ulm, Dept. of Radiation Oncology, Ulm, Germany, 7Medical University of Vienna, Dept. of Oncology and Urology, Vienna, Austria, 8Medical University of Vienna, Dept. of Radiation Oncology, Vienna, Austria, 9University Hospitals Leuven, Dept. of Urology, Leuven, Belgium, 10University Hospitals Leuven, Dept. of Radiotherapy, Leuven, Belgium, 11Ghent University Hospital, Dept. of Radiotherapy, Ghent, Belgium
Aims and objectives of this session

Not all patients respond to BCG therapy for urothelium tumours. Immunological mechanisms relevant to a possible improvement of BCG treatment will be discussed in this session. In addition, novel functions of growth factors which are highly expressed in bladder cancer will be presented.

Poster viewing of 20 minutes. Presentations will take place on stage. Standard presentations are 2 minutes in length, followed by 2 minutes for discussion. Extended presentations (*) are 3 minutes in length, followed by 3 minutes for discussion.

964 Immune responsiveness to tuberculin in vitro may predict clinical outcome of intravesical BCG immunotherapy in bladder cancer
By: Jallad S.¹, Thomas D.², Thomas P.³, Newport M.⁴, Kern F.⁴
Institutes: Brighton and Sussex Medical School, Dept. of Urology, Brighton, United Kingdom,² Brighton and Sussex Medical School, Division of Medicine, Brighton, United Kingdom,² Brighton and Sussex University Hospitals, Dept. of Urology, Brighton, United Kingdom,³ Brighton and Sussex University Hospitals, Division of Medicine, Brighton, United Kingdom

Institutes: Nara Medical University, Dept. of Urology, Kashihara, Japan

966 Natural killer cell-based adoptive immunotherapy eradicates and drives differentiation of chemoresistant bladder cancer stem-like cells
By: Ferreira-Teixeira M.¹, Parada B.², Paiva-Oliveira D.², Alves V.³, Sousa V.⁴, Chijioke O.⁵, Münz C.⁶, Reis F.⁶, Rodrigues-Santos P.⁷, Gomes C.⁶
Institutes: Coimbra University Hospital (CHUC), Urology and Renal Transplantation, Coimbra, Portugal,² University of Coimbra - Faculty of Medicine, Institute For Biomedical Imaging and Life Sciences (IBILI), Coimbra, Portugal,³ University of Coimbra - Faculty of Medicine, Institute of Immunology, Coimbra, Portugal,⁴ University of Coimbra - Faculty of Medicine, Institute of Anatomical and Molecular Pathology, Coimbra, Portugal,⁵ University of Zurich, Viral Immunobiology, Institute of Experimental Immunology, Zurich, Switzerland,⁶ University of Coimbra - Faculty of Medicine, Laboratory of Pharmacology and Experimental Therapeutics, Institute For Biomedical Imaging and Life Sciences (IBILI), Coimbra, Portugal,⁷ University of Coimbra - Center For Neurosciences and Cell Biology (CNC), Immunology and Oncology Laboratory, Coimbra, Portugal

967 Double positive IFNγ/IL17 CD4+ lymphocytes play a pathogenic role in bladder cancer
By: Ariafar A.¹, Faghih Z.², Zeighami S.¹, Sarkarian M.¹, Abtahi S.², Ghaderi A.²
Institutes: Shiraz University of Medical Sciences, Urology-Oncology Research Center, Dept of Urology, Shiraz, Iran,² Shiraz Institute for Cancer Research, Dept. of Immunology, Shiraz, Iran

968 IFN alpha modulates the response to BCG immunotherapy in bladder cancer patients with specific
CTLA4 and CD28 single nucleotide polymorphisms
By: Esuvaranathan K., Rahmat J., Tham S.M., Lim Y.K., Sng J.H., Raman L., Ma Z.M., Chan Y.H., Tsang W.C., Chiong E., Mahendran R.
Institutes: National University Singapore, Dept of Urology, Singapore, Singapore

Inhibition of LIM-SH3 domain protein 1 (LASP1) augments the anti-cancer effect of cisplatin in bladder cancer
By: Dejima T.1, Takeuchi A.1, Shiota M.1, Black P.2, Eto M.1, Naito S.1, Gleave M.2, Ong C.2
Institutes: Kyusyu University, Dept. of Urology, Fukuoka, Japan, 2The Vancouver Prostate Centre, Dept. of Urologic Sciences, University of British Columbia, Vancouver, Canada

HGF-MET-MMP and VEGF-C signaling as a potential target for invasive bladder cancer therapy
By: Shintani T., Daizumoto K., Fukawa T., Nakatsuji H., Fukumori T., Takahashi M., Kanayama H.
Institutes: Institute of Biomedical Sciences, Tokushima University Graduate School, Dept. of Urology, Tokushima, Japan

The novel checkpoint kinase 1 inhibitor MK-8776 strongly sensitizes bladder cancer cells to gemcitabine
By: Isono M.1, Sato A.1, Asano T.1, Okubo K.1, Hoffmann M.2, Schulz W.2, Asano T.1
Institutes: National Defense Medical College, Dept. of Urology, Tokorozawa, Japan, 2Heinrich Heine University, Dept. of Urology, Düsseldorf, Germany

T-DM1, a novel HER2 antibody-cytotoxic drug conjugate, has anti-metastatic potential and is a promising targeted therapy for bladder cancer with HER2 IHC score 2+/3+
By: Hayashi T.1, Oo H.2, Jäger W.2, Kobatake K.1, Goriki A.2, Seiler R.2, Todenhöfer T.2, Li N.2, Fazli L.2, Matsubara A.1, Black P.2
Institutes: Hiroshima University, Dept. of Urology, Hiroshima, Japan, 2Vancouver Prostate Centre, Dept. of Urology, Vancouver, Canada

Pathological significance and prognostic roles of c-Fes expression in bladder cancer differ depending on the grade
By: Asai A., Miyata Y., Yasuda T., Nakamura Y., Matsuo T., Ohba K., Sakai H.
Institutes: Nagasaki University Graduate School of Biomedical Sciences, Dept. of Urology, Nagasaki, Japan

Reduced expressions of 4N1K-peptide derived from thrombospondin-2 is associated with malignant aggressiveness and prognosis in bladder cancer
By: Mochizuki Y.1, Miyata Y.1, Yasuda T.1, Nakamura Y.1, Matsuo T.1, Ohba K.1, Furusato B.2, Fukuoka J.1, Sakai H.1
Institutes: Nagasaki University Graduate School of Biomedical Sciences, Dept. of Urology, Nagasaki, Japan, 2Nagasaki University Hospital, Dept. of Pathology, Nagasaki, Japan

Compound A inhibits urothelial tumorigenesis via both glucocorticoid receptor and androgen receptor pathways
By: Ide H.1, Inoue S.3, Zheng Y.2, Kashiwagi E.4, Kawahara T.5, Miyamoto H.1
Institutes: University of Rochester, Dept. of Pathology, Urology and Oncology, Rochester, United States of America, 2Johns Hopkins University, Dept. of Pathology and Urology, Baltimore, United States of America, 3University of Rochester, Dept. of Pathology and Oncology, Rochester, United States of America, 4Kyushu University, Dept. of Urology, Fukuoka, Japan, 5Yokohama City University Medical Center, Dept. of Urology and Renal Transplantation, Yokohama, Japan

New targets in urothelial cancer
Y. Allory, Creteil (FR)

15:13 - 15:20
**Oncogenes, tumour suppressor genes and molecular markers in renal cell carcinoma**

**Poster Session 74**

**Location:** Room Berlin, North Hall (Level 1)

**Chairs:** A. Bex, Amsterdam (NL)  
K. Junker, Homburg (DE)  
M. Uemura, Toyonaka Osaka (JP)

**Aims and objectives of this session**
To discuss the molecular biology of renal tumors

Poster viewing of 20 minutes. Presentations will take place on stage. Standard presentations are 2 minutes in length, followed by 2 minutes for discussion.

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**976**

**PD-L1 expression in Xp11.2 translocation renal cell carcinoma: Indicator of tumor aggressiveness**

**By:** Qu Y-Y., Chang K., Dai B., Zhu Y., Zhang H-L., Ye D-W.

**Institutes:** Fudan University Shanghai Cancer Center, Dept. of Urology, Shanghai, China

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**977**

**Risk assessment for ccRCC patients based on alterations in specific chromosomal regions**


**Institutes:** Saarland University Medical Center, Dept. of Urology and Pediatric Urology, Homburg/Saar, Germany, Saarland University Medical Center, Institute of Medical Biometry, Epidemiology and Medical Informatics, Homburg/Saar, Germany, University Hospital Erlangen, Institute of Pathology, Homburg/Saar, Germany, University Hospital Erlangen, Dept. of Urology, Homburg/Saar, Germany

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**978**

**Overexpression of miR-27a-3p is an independent prognostic factor for recurrence in clear cell renal cell carcinoma**

**By:** Uemura M., Nakata W., Kawashima A., Ujike T., Nagahara A., Fujita K., Nonomura N.

**Institutes:** Osaka University Graduate School of Medicine, Dept. of Urology, Suita, Osaka, Japan

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**979**

**Validation and target identification of metastasis-associated miRNAs as prognostic markers in clear cell renal cell cancer**


**Institutes:** Saarland University, Dept. of Urology and Pediatric Urology, Homburg, Germany, University of The Saarland, Experimental and Clinical Pharmacology and Toxicology, Homburg, Germany, University Hospital of Saarland, Institute of Pathology, Homburg, Germany

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**980**

**Long noncoding RNA BX357664 regulates cell proliferation and epithelial-to-mesenchymal transition via inhibiting TGF-beta 1/p38/HSP27 signaling in renal cell carcinoma**

**By:** Zengjun W., Liu Y., Qian J., Li X., Chen W., Xu A., Zhao K., Hua Y., Huang Z., Zhang J., Liang C., Su S., V P., Shao P., Li J., Qin C.

**Institutes:** The First Affiliated Hospital of Nanjing Medical University, Dept. of Urology, Nanjing, China

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**981**

**The activation of mTOR independent autophagy in kidney carcinoma cells by the upregulation of miR501-5p occurs through the decrease of mitochondrial calcium uptake**

**By:** Dell’Atti L., De Stephanis L., Patergiani S., Galosi A.B., Ippolito C., Pinton P., Aguiari G.

**Institutes:** University Hospital “St. Anna”, Dept. of Urology, Ferrara, Italy, University of Ferrara,
982

Functional variants in the low-density lipoprotein receptor gene are associated with clear cell renal cell carcinoma susceptibility
Institutes: The Affiliated Hospital of Qingdao University, Dept. of Urology, Qingdao, China, 2Fudan University Shanghai Cancer Center, Cancer Institute, Shanghai, China, 3Fudan University Shanghai Center, Dept. of Urology, Shanghai, China

983

Tumor suppressor versus oncogenic role of the new N-hydrolase DNPH1 in kidney and prostate cancers
By: Danilin S.1, Amiable C.2, Coquard C.1, Kaminski P-A.2, Paoletti J.2, Rothhut S.1, Hamaidi I.3, Lindner V.4, Lang H.5, Pochet S.2, Massfelder T.1
Institutes: Inserm U1113, Team 3, Dept. of Cellular Signalisation and Communication In Kidney and Prostate Cancers, Strasbourg, France, 2Pasteur Institute, Biocatalyse and Chemistry Unit, Paris, France, 3Inserm U1113, Team 3, Cellular Signalisation and Communication In Kidney and Prostate Cancers, Strasbourg, France, 4Strasbourg University Hospital, Dept. of Pathology, Strasbourg, France, 5Strasbourg University Hospital, Dept. of Urology, Strasbourg, France

984

Epigenetic inactivation of HOXA11 as a novel functional tumor suppressor for renal cell carcinoma
Institutes: Peking University First Hospital, Dept. of Urology, Beijing, China

985

Systematic expression analysis of the mitochondrial complex III subunits identifies UQCRC1 as biomarker in clear cell renal cell carcinoma
By: Ellinger J.1, Gromes A.1, Poss M.1, Brüggemann M.1, Schmidtmann D.1, Ellinger N.2, Tolkach Y.3, Dietrich D.1, Kristiansen G.2, Müller S.C.1
Institutes: Universitätssklinikum Bonn, Dept. of Urology, Bonn, Germany, 2Universitätsklinikum Bonn, Dept. of Anesthesia and Intensive Care, Bonn, Germany, 3Universitätsklinikum Bonn, Dept. of Pathology, Bonn, Germany

986

LOXL2 status correlates with tumor stage and regulates integrin levels to promote tumor progression in ccRCC
By: Uemura M.1, Hase H.2, Kawashima A.1, Ujike T.1, Nagahara A.1, Fujita K.1, Tsujikawa K.2, Nonomura N.1
Institutes: Osaka University Graduate School of Medicine, Dept. of Urology, Suita, Osaka, Japan, 2Osaka University Graduate School of Pharmaceutical Sciences, Laboratory of Molecular and Cellular Physiology, Suita, Osaka, Japan

987

Validation of BRCA1 associated protein-1 (BAP-1) as an adverse prognostic factor and investigations into the impact of BAP1 loss on the vascular endothelial growth factor (VEGF) pathway in clear cell renal cell carcinoma (ccRCC)
Institutes: Ernst-Moritz-Arndt University Greifswald, Klinik und Poliklinik für Urologie, Greifswald, Germany, 2Ernst-Moritz-Arndt University Greifswald, Institute of Medical Biochemistry and Molecular Medicine, Greifswald, Germany, 3University of Texas Southwestern Medical Center, Dept. of Pathology, Dallas, United States of America, 4David Geffen School of Medicine, University of California–Los Angeles, Dept. of Pathology and Laboratory Medicine, Los Angeles, United States of America, 5David Geffen School of Medicine At The University of California Los Angeles, The Institute of Urologic Oncology, Department of Urology, Los Angeles, United States of America, 6University of Texas Southwestern Medical Center, Dept. of Internal Medicine, Dallas, United States of America

988

Targeting Lim1 oncogene has a therapeutic potential in advanced human renal cell carcinoma
By: Hamaidi I.1, Danilin S.2, Dormoy V.3, Rothhut S.1, Coquard C.1, Barthelmebs M.1, Béraud C.6,
Receptor activator of NFκB (RANK)-mediated induction of metastatic spread and association with poor prognosis in renal cell carcinoma

By: Steven A.¹, Kroeger N.², Leisz S.¹, Fussek S.², Nowroozizadeh B.³, Huang J.³, Brandstetter D.⁴, Dougall B.⁴, Burchardt M.², Belldegrun A.⁵, Seliger B.⁵, Pantuck A.⁶

Institutes: Martin Luther University Halle/wittenberg, Medical Immunology At, Halle, Germany,² Ernst-Moritz-Arndt University, Dept. of Urology, Greifswald, Germany,³David Geffen School of Medicine At The University of California, Dept. of Pathology and Laboratory Medicine, Los Angeles, United States of America,⁴Amgen Inc., Dept. of Hematology and Oncology Research, Seattle, United States of America,⁵David Geffen School of Medicine At The University of California, Los Angeles, Institute of Urologic Oncology, Dept. of Urology, Los Angeles, United States of America,⁶Martin Luther University Halle/wittenberg, Medical Immunology At, Halle, Unknown
Pelvic floor reconstruction and pelvic organ prolapse
Poster Session 75

Location: Room Vienna, North Hall (Level 1)
Chairs: W. Artibani, Verona (IT)
E. Costantini, Perugia (IT)
T. Tarcan, Istanbul (TR)

Aims and objectives of this session
The treatment of POP and of mesh complications is a hot topic at this time. Also other reconstructive procedures such as fistula treatment have made progress.

Poster viewing of 20 minutes. Presentations will take place on stage. Standard presentations are 2 minutes in length, followed by 2 minutes for discussion.

14:23 - 14:33
EAU position paper on mesh and tapes
W. Artibani, Verona (IT)

The longterm functional outcomes of vesico-vaginal fistula repair
By: Grewal M., Beardmore-Gary A., Pakzad M., Hamid R., Ockrim J., Greenwell T.
Institutes: University College London Hospital, Dept. of Urology, London, United Kingdom

Laparoscopic repair of female genitourinary fistulae: Single-center single-surgeon experience
By: Abdel-Karim A., Aboelfotoh A., Elsalmy S.
Institutes: Alexandria University, Dept. of Urology, Alexandria, Egypt

Comparison of autologous pubovaginal sling, abdominal sacrocolpopexy and laparoscopic sacrocolpopexy in the management of symptomatic pelvic organ prolapse
By: Cormio L., Mancini V., Liuizi G., D’Altiglia N., Carrieri G.
Institutes: Urology and Renal Transplant Unit, Dept. of Uro-Nephrology, University of Foggia, Ospedali Riuniti, Foggia, Italy

Removal of synthetic tapes and meshes: Surgical indications and outcomes
By: Ismail S., Chartier-Kastler E., Bitker M-O., Rouprêt M., Phé V.
Institutes: Pitié-Salpêtrière Academic Hospital, Dept. of Urology, Paris, France

Urethrovaginal fistula repair: Long-term outcomes
By: Herschorn S.
Institutes: Sunnybrook Health Sciences Centre, Dept. of Surgery and Urology, Toronto, Canada

Laparoscopic versus robotic assisted sacrocolpopexy: A randomized, controlled trial
Institutes: University of Perugia, Dept. of Urology, Perugia, Italy, University of Bari, Dept. of Urology, Bari, Italy

Laparoscopic sacrocolpopexy in treatment of pelvic organ prolapse: Learning curve analysis
By: Carracedo Calvo D., Lopéz-Fando Lavalle L., Sánchez Gallego M.D., Jimenez Cidre M.A., Gómez De Vicente J.M., Burgos Revilla F.J.
Institutes: Ramón Y Cajal Universitary Hospital, Dept. of Urology, Madrid, Spain

Abdominal vs laparoscopic sacrocolpopexy a subanalysis of a randomized controlled trial
Laparoscopic sacrocolpopexy for pelvic organ prolapse: Surgical technique and outcomes
By: Nucciotti R.¹, Costantini F.M.¹, Mengoni F.¹, Vigiani F.¹, Braglia A.¹, Cattarino S.², Pizzuti V.¹
Institutes: Misericordia Hospital, Dept. of Urology, Grosseto, Italy, ²University Sapienza, Dept. of Urology, Rome, Italy

Changes in vesico-sphincter function after surgery for pelvic organ prolapse
By: Giannantoni A., Salvini E., Rossi De Vermandois J., Turco M., Pietropaolo A., Gubbiotti M.
Institutes: University of Perugia, Dept. of Surgical and Biomedical Sciences, Urology and Andrology Section, Perugia, Italy

Combined MUS and anterior colporrhaphy vs. MUS alone in the treatment of SUI, randomized controlled trial
By: Taha D-E., Wadie B., El-Hefnawy A., Gaballah M.
Institutes: Urology and Nephrology Center, Dept. of Urology, Mansoura, Egypt

The value of repair of asymptomatic grade 2 pelvic organ prolapse during mid urethral sling surgery for stress urinary incontinence
By: Morsy S.¹, Hussein H.¹, Abdel Aziz A.¹, Habib E.¹, Abdel Azim D.², Hassan S.², Hussein E.², Abdel Azim M.¹
Institutes: ¹Cairo University, Dept. of Urology, Cairo, Egypt, ²Cairo University, Dept. of Gynecology and Obstetrics, Cairo, Egypt

Different approaches for management of female pelvic floor dysfunction: A randomized study of 53 cases
Institutes: Cairo University, Dept. of Urology, Giza, Egypt
Kidney transplantation: All about the graft and donation

Poster Session 76

Location: Room London, North Hall (Level 1)
Chairs: A. Alcaraz, Barcelona (ES)  
M. Stöckle, Homburg (DE)  
C. Terrone, Turin (IT)

Aims and objectives of this session
This session covers different aspects on kidney donation and grafts including:
- donor and kidney selection
- development and treatment of tumors in the graft
- experience with non-heartbeating donors

Poster viewing of 20 minutes. Presentations will take place on stage. Standard presentations are 2 minutes in length, followed by 2 minutes for discussion. Extended presentations (*) are 3 minutes in length, followed by 3 minutes for discussion.

1003

Role of polyomavirus BK in the carcinogenesis of urothelial and renal tumours in kidney transplant recipients

By: Poletti F.¹, Borgogna C.², Billia M.³, Zaccher M.³, Boldorini R.³, Cantaluppi V.⁴, Gariglio M.², Volpe A.¹

Institutes: University of Eastern Piedmont, Dept. of Urology, Novara, Italy, ²University of Eastern Piedmont, Virology Unit, Novara, Italy, ³University of Eastern Piedmont, Dept. of Pathology, Novara, Italy, ⁴University of Eastern Piedmont, Dept. of Nephrology and Renal Transplantation, Novara, Italy

*1004

De novo functional renal graft carcinomas: Are they a different entity ?


Urothelial carcinoma after kidney transplant: A heterogeneous entity in terms of diagnosis, treatments and oncological outcomes
Institutes: Hospital Universitario Ramón y Cajal, Dept. of Urology IRYCIS, Madrid, Spain

Our experience in the management of prostate cancer in renal transplant recipients
Institutes: Bellvitge University Hospital, Dept. of Urology, Barcelona, Spain

Effectiveness and safety of minimally invasive laparoscopic living donor nephrectomy in comparison with standard laparoscopic living donor nephrectomy
By: Abdelwahhab M., Ghoneima W., El Shenoufy A., Morsi H., Abo El Fettouh H., El Gammal M.
Institutes: Cairo University Hospitals, Dept. of Urology, Cairo, Egypt

Impact of an additional trocar on clinical outcome, inflammatory cytokines, and cosmetic satisfaction in laparoendoscopic single-site donor nephrectomy
By: Saito M., Inoue T., Narita S., Tsuruta H., Maeno A., Satoh S., Habuchi T.
Institutes: Akita University School of Medicine, Dept. of Urology, Akita, Japan, Akita University School of Medicine, Center For Kidney Disease and Transplantation, Akita, Japan

Visceral obesity in living kidney Asian donors significantly impacts on renal function after donor nephrectomy
Institutes: University College Dublin, UCD School of Medicine and Medical Sciences, Dublin, Ireland, National University Hospital, Dept. of Medicine, University Medicine Cluster, Singapore, National University Hospital, Dept. of Urology, University Medicine Cluster, Singapore, National University Hospital, Dept. of Urology, University Surgical Cluster, Singapore, National University Hospital, Dept. of Diagnostic Radiology, Singapore

Local sildenafil accelerate renal regeneration after ischemia/reperfusion injury in canine model
By: Zahran M., Barakat N., Khater S., Awadalla A., Fakhreldin I., Mosbah A., Nabeel A., Shokeir A.
Institutes: Urology and Nephrology Center, Dept. of Urology, Mansoura, Egypt, Urology and Nephrology Center, Dept. of Pathology, Mansoura, Egypt

Impact of renal graft volume in the renal function of patients who undergo kidney transplantation
By: Ordones F., Kawano P., Guerra R., Yamamoto H., Modelli De Andrade L., Amaro J.L.
Institutes: Royal Adelaide Hospital, Dept. of Urology, Adelaide, Australia, Botucatu Medical School - Sao Paulo State University, Dept. of Urology, Botucatu, Brazil, Botucatu Medical School - Sao Paulo State University - UNESP, Dept. of Urology, Botucatu, Brazil, Botucatu Medical School - Sao Paulo State University - UNESP, Dept. of Nephrology, Botucatu, Brazil

Choosing the larger kidney on CT volumetry – a study on the early post-donation kidney function of living donors
By: Lynnette R., Goh Y., Tai B.C., Raman L., Vathsala A., Tiong H.Y.
Institutes: National University Health System, Dept. of Urology, Singapore, Singapore, National University of Singapore, Dept. of Public Health, Singapore, Singapore, National University Health System, Dept. of Nephrology, Singapore

Kidney transplantation from uncontrolled donation after circulatory death (IIa): Organ procurement and renal harvested over a ten year period
Initial experience and results in kidney transplants in controlled asystolia donors in a single institution

By: Calaf Perisé O.¹, Areal Calama J.¹, González Satué C.¹, Juega Mariño J.², Pérez Mir M.², Ibarz Servio L.¹

Institutes: ¹Hospital Universitari Germans Trias i Pujol, Dept. of Urology, Badalona, Spain, ²Hospital Universitari Germans Trias i Pujol, Dept. of Nephrology, Badalona, Spain

Implementation of a donation and transplantation after controlled cardiac death (CCD) program in a Spanish university hospital. Results on renal graft and recipient survival

By: Trilla Herrera E.¹, Sandiumenge A.², Lorente D.¹, Moreso F.³, Perelló M.³, Mazo C.⁴, Chamoun B.³, Ruiz-Rodriguez J.C.⁴, Gracia R.M.⁴, Espinel E.³, Pont T.², Morote J.¹

Institutes: ¹Hospital Universitari Vall d`Hebron, Dept. of Urology, Barcelona, Spain, ²Hospital Universitari Vall d`Hebron, Dept. of Trasplant Coordination, Barcelona, Spain, ³Hospital Universitari Vall d`Hebron, Dept. of Nephrology, Barcelona, Spain, ⁴Hospital Universitari Vall d`Hebron, Dept. of Intensive Care, Barcelona, Spain
Aims and objectives of this session
Urethral strictures are a major problem for our patients and new updates will be presented.

Poster viewing of 20 minutes. Presentations will take place on stage. Standard presentations are 2 minutes in length, followed by 2 minutes for discussion.

1016
Delayed anastomotic urethroplasty in children and adolescence with pelvic fracture urethral injury (PFUI): Experiences in two centers of reconstructive urethral surgery in Indonesia
By: Satyagraha P., Adi K., Daryanto B., Seputra P., Indradiputra I.M.U., Agil A.
Institutes: Saiful Anwar General Hospital, Dept. of Urology, Malang, Indonesia, Hasan Sadikin General Hospital, Dept. of Urology, Bandung, Indonesia

1017
Pelvic fracture injuries of the female urethra
By: Ivaz S., Frost A., Bugeja S., Dragova M., Andrich D., Mundy A.
Institutes: UCLH NHS Foundation Trust, Dept. of Urology, London, United Kingdom

1018
The early and midterm outcomes of ventral only buccal mucosal graft substitution urethroplasty for female urethral stricture
By: Mukhtar B., Spilotros M., Fairbanks J., Pakzad M., Hamid R., Ockrim J., Greenwell T.
Institutes: University College London Hospital, Dept. of Urology, London, United Kingdom

1019
Female urethral reconstruction: Etiology and outcomes
By: Kasyan G., Diakov V., Pushkar D.
Institutes: Moscow State University of Medicine and Dentistry, Dept. of Urology, Moscow, Russia, Moscow State University of Medicine and Dentistry, Dept. of Urology, Moscow, Russia

1020
Correlation of MRI features of urethral diverticulum and stress urinary incontinence
By: Seth J., Naaseri S., Solomon E., Pakzad M., Hamid R., Ockrim J., Greenwell T.
Institutes: University College London Hospital NHS Trust, Dept. of Urology, London, United Kingdom, University College London Hospital NHS Trust, Dept. of Uro-Radiology, London, United Kingdom

1021
Re-operative abdomino-perineal reconstructive surgery
By: Frost A., Ivaz S., Bugeja S., Dragova M., Andrich D., Mundy A.
Institutes: University College Hospitals London, Dept. of Reconstructive Urology, London, United Kingdom

1022
Predictive factors of Sachse endoscopic urethrotomy failure
By: Soligo M., Franchini G., Morlacco A., Zattoni F., Dal Moro F., Beltrami P., Calpista A., Zattoni F.
Institutes: Università di Padova - Azienda Ospedaliera, Dept. of Urology, Padua, Italy

1023
Sclerosis and severe fibrosis as a predictive factor for restriction after bulbar urethroplasty
By: Olsen Ekerhult T., Lindqvist K., Grenabo L., Käbjörn C., Peek R.
Institutes: Sahlgrenska University Hospital, Dept. of Urology, Gothenburg, Sweden, Sahlgrenska
**Effect of patient and surgical characteristics on treatment failure in 491 one-stage ventral onlay buccal mucosal graft urethroplasties**

By: Vetterlein M., Rosenbaum C., Gild P., Meyer C., Loewe C., Ludwig T., Chun F., Engel O., Dahlem R., Fisch M., Kluth L.

**Institutes:** University Medical Center Hamburg-Eppendorf, Dept. of Urology, Hamburg, Germany

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**The effect of closure versus non-closure of the buccal mucosa donor site during substitution urethroplasty on oral pain and morbidity: Final findings of a randomized controlled trial**


**Institutes:** University Medical Center Hamburg-Eppendorf, Dept. of Urology, Hamburg, Germany, University Medical Center Hamburg-Eppendorf, Medical Biometry and Epidemiology, Hamburg, Germany, University Medical Center Goettingen, Dept. of Urology, Goettingen, Germany

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**Development of improved tissue engineered buccal mucosa for treatment of urethral strictures**

By: Şimşek A., Bullock A., Roman S., Chapple C., MacNeil S.

**Institutes:** University of Sheffield/Royal Hallamshire Hospital, Dept. of Female and Reconstructive Urology/Materials Science & Engineering, Sheffield, United Kingdom, University of Sheffield, Dept. of Materials Science & Engineering, Sheffield, United Kingdom, Royal Hallamshire Hospital, Dept. of Female and Reconstructive Urology/Materials Science & Engineering, Sheffield, United Kingdom

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**Off the shelf tissue-engineered material for urethral reconstruction**


**Institutes:** University Malaya, Dept. of Surgery, Kuala Lumpur, Malaysia, Centre Hospitalier Universitaire Vaudois, Dept. of Pediatrics, Lausanne, Switzerland, Ecole Polytechnique Fédérale de Lausanne, Institute of Bioengineering, Lausanne, Switzerland, University Malaya, Dept. of Orthopedic, Kuala Lumpur, Malaysia, University of Chicago, Institute for Molecular Engineering, Chicago, United States of America, Ecole Polytechnique Fédérale De Lausanne, Institute of Bioengineering, Lausanne, Switzerland

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**Outcomes of hypospadias retrieval surgery in adults, after failed childhood hypospadias surgical repair**

By: Aldamanhori R., Inman R., Chapple C.

**Institutes:** Sheffield Teaching Hospital, Dept. of Urology, Sheffield, United Kingdom

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**Smoking and stricture recurrence after one stage bulbar urethroplasty – results from a large contemporary cohort**

By: Meyer C., Vetterlein M., Loewe C., Chun F., Dahlem R., Fisch M., Kluth L.

**Institutes:** University Medical Center Hamburg-Eppendorf, Dept. of Urology, Hamburg, Germany

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**The positive impact of subspecialist training in urethral reconstruction**

By: Adi K., Chee J.

**Institutes:** Hasan Sadikin Hospital, Dept. of Urology, Bandung, Indonesia, Murac Health, Dept. of Urology, Melbourne, Australia
Aims and objectives of this session
The rise in clinical awareness about upper tract urothelial carcinomas (UTUCs) is in part due to the significant technological improvement in endoscopes used to examine the upper urinary tract. The development of small calibre, fibre-optic flexible digital ureteroscopes has expanded the management options for UTUC. Advances in distal-tip deflection and scope durability, combined with improved laser technology, have enhanced the role of flexible ureteroscopy from a diagnostic to a therapeutic procedure. No longer can radical nephroureterectomy (RNU) be considered the ‘gold standard’ treatment for all UTUCs. The challenge is to identify pre-operatively which patients and tumours would be more appropriately managed in a conservative manner via endoscopic techniques and laser ablation or segmental ureterectomy in certain cases. Based on the available evidence UTUC patients with contralateral normal kidney can be classified at time of diagnosis as having “low-risk UTUC” or “high-risk UTUC”. Patients with low-risk disease should be offered (as default) endoscopic management with laser ablation and topical MMC or BCG as an option. The aim of this session is to review available data to better select UTUC suitable for kidney-sparing treatment.

Poster viewing of 20 minutes. Presentations will take place on stage. Standard presentations are 2 minutes in length, followed by 2 minutes for discussion. Extended presentations (+) are 3 minutes in length, followed by 3 minutes for discussion.
1034
Is ureteroscopy essential prior to nephroureterectomy for upper tract transitional cell carcinoma?
By: Veeratterapillay R., Thompson E., Shakoor R., Gandiya T., Rogers A., Thomas D.
Institutes: Freeman Hospital, Dept. of Urology, Newcastle upon Tyne, United Kingdom

1035
Diagnostic ureteroscopy for upper tract urothelial carcinoma is independently associated with intravesical recurrence after radical nephroureterectomy
By: Li X-S., Zhou L., Su X., Liu P., Fang D.
Institutes: Peking University First Hospital, Dept. of Urology, Beijing, China

1036
Fluorescence in situ hybridization for upper urinary tract urothelial carcinoma - an important diagnostic tool in clinical practice
Institutes: Saarland University Medical Center, Dept. of Urology, Homburg, Germany

1037
Thulium laser treatment of upper urinary tract transitional cell carcinoma
By: Maruccia S.², Saredi G.², Parma P.ª, Casellato S.ª, Rozzini G.¹
Institutes: Humanitas Mater Domini, Dept. of Urology, Castellanza, Italy, ²Istituti Clinici Zucchi, Dept. of Urology, Monza, Italy, ³Ospedale Varese, Dept. of Urology, Varese, Italy, ⁴Ospedale Mantova, Dept. of Urology, Mantova, Italy

1038
CT urography understages, and URS with biopsy undergrades upper tract urothelial carcinoma in the preoperative evaluation before nephroureterectomy
By: Almas B.¹, Loe A.¹, Reisæter L.², Halvorsen O.J.³, Beisland C.¹
Institutes: Haukeland University Hospital, Dept. of Urology, Bergen, Norway, ²Haukeland University Hospital, Dept. of Radiology, Bergen, Norway, ³Haukeland University Hospital, Dept. of Pathology, Bergen, Norway

1039
Positive predictive value of CT urography for upper tract urothelial carcinoma diagnosis using diagnostic ureteroscopy as the reference standard
By: Mintz I.¹, Reshetnyak O.¹, Kabha M.¹, Chang C.T.², Sophie B.³, Diego M.³, Mabjeesh N.¹, Matzkin H.¹, Liao J.², Sofer M.¹
Institutes: Tel Aviv Sourasky Medical Center, Tel-Aviv University, Dept. of Urology, Tel-Aviv, Israel, ²Stanford Health Care, Stanford University, Dept. of Urology, Stanford, United States of America, ³Tel Aviv Sourasky Medical Center, Tel-Aviv University, Dept. of Radiology, Tel-Aviv, Israel

*1040
Results of second line topical therapy for upper tract urothelial carcinoma (UTUC)
Institutes: University of Texas Md Anderson Cancer Center, Dept. of Urology, Houston, United States of America

1041
Clinical application of 18F-fluorodeoxyglucose positron emission tomography/computed tomography in upper tract urothelial carcinoma
By: Lu C.C.¹, Yen R.F.¹, Huang C.Y.², Tsai Y.C.³, Pu Y.S.²
Institutes: National Taiwan University Hospital, Dept. of Nuclear Medicine, Taipei, Taiwan, ²National Taiwan University Hospital, Dept. of Urology, Taipei, Taiwan, ³National Taiwan University Hospital, Dept. of Oncology, Taipei, Taiwan

1042
A systematic review of the impact of pre-operative diagnostic ureteroscopy on bladder recurrence after nephroureterectomy for upper tract transitional cell carcinoma
By: Birks T., Jenkins J., Davenport K.
Institutes: Cheltenham General Hospital, Dept. of Urology, Cheltenham, United Kingdom

1043
Statin use and prognosis of the upper tract urothelial carcinoma in a Finnish population-based cohort
By: Hurskainen H.², Kotsar A.³, Tammela T.¹, Murtola T.¹
Institutes: ¹Tampere University Hospital, Dept. of Urology, Tampere, Finland, ²University of Tampere, School of Medicine, Tampere, Finland, ³Tarto University Hospital, Dept. of Urology, Tarto, Estonia
Location: Room Europe, Exhibition Hall (Level 1)

Aims and objectives of this session
The European training in basic laparoscopic urological skills (E-BLUS) is a programme offered to residents and urologists who want to improve the basic skills in laparoscopy. It is a unique opportunity to train with international experts in laparoscopy. The E-BLUS programme includes:

- Hands-on Training (HOT) courses of different levels carried out under the guidance of experienced tutors
- A set of training-box exercises developed and validated by the Dutch project Training in Urology (TiU) to train basic skills needed in urological laparoscopy
- E-BLUS examination and certification
- An online theoretical course

D. Veneziano, Minneapolis (US)
P. Macek, Prague (CZ)
O. Rodriguez Faba, Barcelona (ES)
A.S. Gözen, Heilbronn (DE)
ESU Hands-on Training Course in Non-technical skills

Monday, 27 March
14:00 - 16:00

Location: Hands-on Training Area, Exhibition Hall (Level 1)

Chairs: K. Ahmed, London (GB)
M.S. Khan, Orpington (GB)

Aims and objectives of this session
This course aims to introduce the concept of non-technical skills and provide an interactive “hands-on” environment to practicing urologists and residents-in-training, in the hope of improving and raising self-awareness for everyday operating room practice.

Course description:
The operating room is a complex and highly stressful environment that requires interaction between a large team to achieve successful outcomes for the patient. This requires not only effective procedure-specific technical skills, but also additionally a range of non-technical skills. The importance of non-technical skills is often overlooked but they are unfortunately a major cause of surgical error. Like technical skills, which are acquired over many years of practice and training, non-technical skills are not innate traits and must also be developed through training and experience. This course will serve to introduce practicing urologists to the concept of non-technical skills using an interactive full immersion simulation environment, developed by Kneebone et al. (Imperial College London), whilst undertaking common scenarios in urolithiasis. Participants will be evaluated by experts in surgical education and provided individual feedback with view for further self-improvement.

Supporting faculty:
H. Aya, London (GB)
A. Aydin, London (GB)
O. Brunckhorst, London (GB)
F. Dar, London (GB)
M. Husnain Iqbal, London (GB)
J. Moody, London (GB)
N. Raison, London (GB)

Target audience:
All urological surgeons and residents in training
Laparoscopic and robot-assisted laparoscopic radical cystectomy
ESU Course 46

Aims and objectives of this session
The course is video based. The steps in the surgical treatment of muscle invasive bladder cancer by conventional laparoscopy and robot-assisted technique will be described. The surgical technique to perform male and female cystectomy, lymph node dissection, urinary diversion with extracorporeal and intracorporeal technique, conduits as well as orthotopic neobladders, will be shown. Indications, contraindications, outcomes and handling of complications will be discussed.

- The surgical steps in nerve sparing and non-nerve sparing male cystectomy
- The surgical steps in female cystectomy with and without organ sparing technique
- The surgical steps in lymph node dissection during cystectomy
- The technique in urinary diversion, conduit and neobladder, with intra and extracorporeal technique
- Indications, outcomes and complications after minimally invasive cystectomy
- The handling of the most common complications after minimally invasive cystectomy

14:30 - 17:30
Laparoscopic cystectomy in males (video-based teaching)

14:30 - 17:30
Conventional laparoscopy
R.F. Van Velthoven, Brussels (BE)

14:30 - 17:30
Robot-assisted technique with nerve sparing technique
N.P. Wiklund, Stockholm (SE)

14:30 - 17:30
Laparoscopic cystectomy in Females (video based teaching)

14:30 - 17:30
Conventional cystectomy
J. Rassweiler, Heilbronn (DE)

14:30 - 17:30
Robot-assisted cystectomy with organ preservation
N.P. Wiklund, Stockholm (SE)

14:30 - 17:30
Laparoscopic lymph node dissection (video-based teaching)
J. Rassweiler, Heilbronn (DE)

14:30 - 17:30
Laparoscopic urinary diversion (video-based teaching)

14:30 - 17:30
Intracorporeal urinary diversion
R.F. Van Velthoven, Brussels (BE)

14:30 - 17:30
Intracorporeal urinary diversion
N.P. Wiklund, Stockholm (SE)

14:30 - 17:30
Extracorporeal urinary diversion
J. Rassweiler, Heilbronn (DE)
### Challenge the expert: Controversies in laparoscopic and robotic cystectomy

#### Oncological outcomes in laparoscopic cystectomy - Challenger
R.F. Van Velthoven, Brussels (BE)

#### Oncological outcomes in laparoscopic cystectomy - Pro
N.P. Wiklund, Stockholm (SE)

#### Complications and functional outcomes in laparoscopic cystectomy - challenger
J. Rassweiler, Heilbronn (DE)

#### Complications and functional outcomes in laparoscopic cystectomy - Pro
N.P. Wiklund, Stockholm (SE)
### Aims and objectives of this session
This course will cover all principal indications for robotic surgery of the upper urinary tract. The standard techniques will be explained on a video-based fashion and will be followed by discussing advanced cases as well as troubleshooting and complication management. On top of that, technical innovations and new applications will be discussed as well. Don’t miss this course, a must for all robotic surgeons!
- Videobased step-by-step approach
- Standard techniques
- Complex cases
- Troubleshooting and complication management
- Technical innovations: What's new in robotics?

<table>
<thead>
<tr>
<th>Time</th>
<th>Session</th>
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<tbody>
<tr>
<td>14:30 - 17:30</td>
<td><strong>Introduction</strong>&lt;br&gt;A. Mottrie, Aalst (BE)</td>
</tr>
<tr>
<td>14:30 - 17:30</td>
<td><strong>Patient positioning, trocar positioning, trans- and retroperitoneal access in renal robotic surgery</strong>&lt;br&gt;B.J. Challacombe, London (GB)</td>
</tr>
<tr>
<td>14:30 - 17:30</td>
<td><strong>Robotic pyeloplasty: Multichannel or single technique</strong>&lt;br&gt;N. Buffi, Milan (IT)</td>
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<tr>
<td>14:30 - 17:30</td>
<td><strong>Renal surgery: Nephrectomy and nephroureterectomy: How I do it</strong>&lt;br&gt;B.J. Challacombe, London (GB)</td>
</tr>
<tr>
<td>14:30 - 17:30</td>
<td><strong>Partial nephrectomy I: Step I: Isolation of renal hilum; Step II: Mobilisation of the kidney; Step III: Clamping of renal pedicle: Different techniques</strong>&lt;br&gt;N. Buffi, Milan (IT)</td>
</tr>
<tr>
<td>14:30 - 17:30</td>
<td><strong>Partial nephrectomy II: Step IV: Different tumour resection techniques</strong>&lt;br&gt;A. Mottrie, Aalst (BE)</td>
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<tr>
<td>14:30 - 17:30</td>
<td><strong>Partial nephrectomy III: Step V: Different renorraphy techniques</strong>&lt;br&gt;B.J. Challacombe, London (GB)</td>
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<tr>
<td>14:30 - 17:30</td>
<td><strong>Partial nephrectomy IV: Special &amp; difficult indications</strong>&lt;br&gt;A. Mottrie, Aalst (BE)</td>
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<tr>
<td>14:30 - 17:30</td>
<td><strong>Partial nephrectomy V: Complication management and new tools</strong>&lt;br&gt;A. Mottrie, Aalst (BE)</td>
</tr>
<tr>
<td>14:30 - 17:30</td>
<td><strong>Wrap up and conclusions</strong>&lt;br&gt;B.J. Challacombe, London (GB)</td>
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</table>
Aims and objectives of this session
The primary aim of this course is to provide participants with the core skills needed to provide an evidence-based solution to clinical problems that may arise in everyday urological practice. These skills include understanding the precise nature of the clinical problem, asking the appropriate question in order to address it, having the ability to identify, collate, synthesise, interpret and summarise the best available evidence in a transparent, systematic and reproducible manner and being able to reliability assess its quality in order to inform and guide clinical practice.
• Understand the fundamentals of evidence-based medicine
• Learn how to construct a structured and answerable clinical question to solve a clinical problem (i.e. PICO approach) and understand the basic strategies to search for evidence in the literature
• Understand the processes involved in undertaking a systematic review, learn how to critically appraise a study and understand the basic principles of the GRADE approach
• Learn how to perform a meta-analysis

14:30 - 17:30  Disorders of sex development
C. Radmayr, Innsbruck (AT)

14:30 - 17:30  Congenital malformations of the external genitalia: What do we need to know regarding sexual function and fertility in adolescence and adulthood?
G. Bogaert, Leuven (BE)

14:30 - 17:30  Urinary incontinence from childhood into adolescence
G. Mosiello, Rome (IT)

14:30 - 17:30  Discussion
Metastatic prostate cancer
ESU Course 50

Location: Room 15, Capital suite (level 3)
Chair: K. Pummer, Graz (AT)

Aims and objectives of this session
The three lectures of ESU course 48 will provide comprehensive state-of-the-art information about currently available therapies for hormone-naïve and castration resistant prostate cancer, such as various forms of primary androgen deprivation, immunotherapy, chemotherapy, and therapies approved for CRPC. After the course, attendees should be able to adequately treat patients with metastatic prostate cancer at all disease stages.

14:30 - 17:30
Treatment of castration-sensitive metastatic prostate cancer
K. Miller, Berlin (DE)

14:30 - 17:30
What is the role of chemotherapy and immunotherapy in patients with CRPC?
G. Mickisch, Bremen (DE)

14:30 - 17:30
Treatment of mCRPC – sequence or combination?
K. Pummer, Graz (AT)

14:30 - 17:30
Case discussion
G. Mickisch, Bremen (DE)
K. Miller, Berlin (DE)
K. Pummer, Graz (AT)
Dealing with the challenge of infection in urology

ESU Course 52

Monday, 27 March
14:30 - 17:30

Location: Room 17, Capital suite (level 3)
Chair: F.M.E. Wagenlehner, Giessen (DE)

Aims and objectives of this session
This ESU course on infection diseases provides a broad, up to date coverage of the most important and recent problems of infectious diseases in urology. Antimicrobial resistance is one of the biggest worldwide challenges in medicine and gains increasing importance in urology. The management of infections in general and of urogenital tract infections especially, has been compromised by this rapid and continuous increase of antimicrobial resistance. Basic biologic principles and strategies to treat urogenital tract infections from benign infections to life threatening infections will be discussed in this workshop:

• Classification of UTI and surgical field contamination categories as a basis for treatment and prophylaxis
• Diagnosis, treatment and prophylaxis strategies of urogenital tract infections
• Uncomplicated and recurrent cystitis
• Complicated urinary tract infections
• Urosepsis and Fournier gangrene
• Male genital tract infections

14:30 - 17:30
Introduction
F.M.E. Wagenlehner, Giessen (DE)

14:30 - 17:30
Classification of UTI and surgical field contamination categories as a basis for treatment and prophylaxis
Z. Tandoğdu, Newcastle Upon Tyne (GB)

14:30 - 17:30
Low grade and recurrent UTI
F.M.E. Wagenlehner, Giessen (DE)

14:30 - 17:30
Male genital infections: Prostatitis, epididymitis and urethritis
B. Köves, Budapest (HU)

14:30 - 17:30
Hospital acquired UTI and antibiotic resistance
Z. Tandoğdu, Newcastle Upon Tyne (GB)

14:30 - 17:30
Perioperative prophylaxis with special focus on prostate biopsies, stone surgery and prosthesis implantation
B. Köves, Budapest (HU)

14:30 - 17:30
Sepsis and Fournier’s gangrene
F.M.E. Wagenlehner, Giessen (DE)
ESU/ESUI Hands-on Training Course in Urological ultrasound (abdominal ultrasound)
HOT51

Location: Room North America, Exhibition Hall (Level 1)
Chair: V. Scattoni, Milano (IT)

Aims and objectives of this session
Ultrasound is an essential instrument in the management of urological patients, both in the diagnostic phase and during follow-up after treatment. It is also an evolving technology with increasing performance and is becoming cheaper, more available and user friendly. The knowledge and the use of this method should be part of the standard knowledge and armamentarium of each urologist.

This hands-on-course aims to provide urologists with the necessary baseline training to implement ultrasound as a routine diagnostic tool in daily practice. It will provide basic information by short and concise lectures followed by extensive practical exercise.

P. Martino, Bari (IT)
G. Salomon, Hamburg (DE)
J. Walz, Marseille (FR)
**Video and imaging urodynamics**

**ESU Course 48**

**Location:** Room 12, Capital suite (level 3)

**Chair:** G. Van Koeveringe, Maastricht (NL)

**Aims and objectives of this session**
This course aims to convey the additional value of the combination of imaging techniques with a urodynamic investigation. In addition to Radiological imaging, also other imaging techniques such as ultrasound will be discussed. The logistic requirements, equipment, preparation and personnel will be pointed out. The interpretation of the acquired data and trouble shooting tips and tricks will be explained by speakers experienced in the field of functional and neurourology.

M. Oelke, Hanover (DE)

<table>
<thead>
<tr>
<th>Time</th>
<th>Session</th>
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<tbody>
<tr>
<td>15:30 - 17:30</td>
<td>Context and indications:</td>
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<tr>
<td>15:30 - 17:30</td>
<td>• What additional information does imaging bring?</td>
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<tr>
<td>15:30 - 17:30</td>
<td>• Who will benefit from video / imaging urodynamics</td>
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<tr>
<td>15:30 - 17:30</td>
<td>• Personnel requirements</td>
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<tr>
<td>G. Van Koeveringe, Maastricht (NL)</td>
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<tr>
<td>15:30 - 17:30</td>
<td>Technical aspects</td>
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<tr>
<td>15:30 - 17:30</td>
<td>• Setting up a unit</td>
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<td>15:30 - 17:30</td>
<td>• How to do a video urodynamic test</td>
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<tr>
<td>15:30 - 17:30</td>
<td>• What imaging modalities may be combined with urodynamics</td>
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<td>15:30 - 17:30</td>
<td>• What should be stored and how</td>
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<td>M. Oelke, Hanover (DE)</td>
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<td>15:30 - 17:30</td>
<td>Interpretation</td>
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<td>15:30 - 17:30</td>
<td>• Real time interpretation of cases</td>
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<td>M. Oelke, Hanover (DE)</td>
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<td>G. Van Koeveringe, Maastricht (NL)</td>
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<tr>
<td>15:30 - 17:30</td>
<td>• Troubleshooting of cases</td>
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<tr>
<td>M. Oelke, Hanover (DE)</td>
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</table>
Take home messages
M. Oelke, Hanover (DE)
G. Van Koeveringel, Maastricht (NL)
How will immunotherapy change the multidisciplinary management of urothelial bladder cancer?

ESU Course 51

**Monday, 27 March**
**15:30 - 17:30**

**Location:** Room 16, Capital suite (level 3)

**Chairs:**
A. Necchi, Milan (IT)
J.P. Bedke, Tübingen (DE)

**Aims and objectives of this session**

Early results from immunotherapy trials in the salvage setting of advanced/metastatic urothelial bladder cancer (UBC) paved the way of a revolutionary road in the treatment of this disease.

Atezolizumab, an anti-programmed cell death ligand-1 (PD-L1) antibody, was recently granted conditional approval by the U.S. Food and Drug Administration (FDA) for the treatment of advanced or metastatic UBC after platinum chemotherapy (IMvigor 210 study).

Pembrolizumab, an anti-PD-1 antibody, has just demonstrated, for the first time in this disease, overall survival advantage compared to active therapy in a phase 3, multicenter, randomized trial (Keynote-045 study) of salvage therapy.

Other immune checkpoint inhibitors have been positively investigated, and a myriad of clinical trials are being developed in UBC worldwide in different clinical settings, including the non-muscle invasive disease.

Consequently, urologists are asked to understand the background of immunotherapy in UBC, the achievable results and side effects, and to know which are the ongoing and future therapeutic options for their patients, provided either inside or outside of clinical trials.

In brief, the aims will be the following:

• To provide urologists with the state-of-the-art with the use of immune-checkpoint inhibitors in UBC.

• To provide urologists with the next clinical trials in the setting of non-muscle invasive and muscle invasive metastatic disease, and in the perioperative setting (before or after surgery).

• To provide an overview of the immunological background of the mode of action of checkpoint inhibitors in bladder carcinoma

• To discuss the optimal clinical management of patients receiving immune checkpoint inhibitor treatment, including side effects.

15:30 - 17:30

State of the art of immune checkpoint inhibitors in urothelial bladder cancer – advanced disease
A. Necchi, Milan (IT)

15:30 - 17:30

State of the art of immune checkpoint inhibitors in urothelial bladder cancer – early stages
J.P. Bedke, Tübingen (DE)

15:30 - 17:30

Ongoing clinicals trials in the EU and future developments
J.P. Bedke, Tübingen (DE)
A. Necchi, Milan (IT)

15:30 - 17:30

Case discussion 1: When should we consider immune-checkpoint inhibitors in UBC treatment
J.P. Bedke, Tübingen (DE)
A. Necchi, Milan (IT)

15:30 - 17:30

Case discussion 2: How to manage treatment with immune-checkpoint inhibitors in UBC
J.P. Bedke, Tübingen (DE)
A. Necchi, Milan (IT)
## Advanced reconstructive surgery

**Video Session 11**

**Location:** eURO Auditorium (Level 0)  
**Chairs:** V. Ferrara, Marche (IT)  
C. Imbimbo, Naples (IT)  
F. Van Der Aa, Leuven (BE)

### Aims and objectives of this session

Reconstructive surgery is one of the most complex surgeries. Every case is a real challenge because it is not always easy to predict clinical situations. Often there isn’t a standard technique and the surgeon must combine various techniques, as we shall see in this video session which brings us an up-to-date on the latest knowledge and practices in this field.

All presentations have a maximum length of 8 minutes, followed by 4 minutes of discussion.

<table>
<thead>
<tr>
<th>Session</th>
<th>Title</th>
<th>By:</th>
<th>Institutes</th>
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</thead>
<tbody>
<tr>
<td>V82</td>
<td><strong>Redo bulbo-prostatic anastomotic (BPA) urethroplasty for recurrent pelvic fracture-related urethral strictures</strong></td>
<td>Fes Ascanio E.¹, Bugeja S.², Ivaz S.³, Frost A.³, Campos F.⁴, Andrich D.³, Mundy A.³</td>
<td>Hospital Can Misses, Dept. of Urology, Eivissa, Spain, St Luke's Hospital, Dept. of Urology, San Luka, Malta, University College London Hospitals, Dept. of Urology, London, United Kingdom, Marques De Valdecilla University Hospital, Dept. of Urology, Santander, Spain</td>
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<tr>
<td>V83</td>
<td><strong>Urethral centralisation after partial penectomy</strong></td>
<td>Parnham A.¹, Albersen M.², Kranz J.³, Sahdev V.¹, Ziada M.¹, Nigam R.¹, Muneer A.¹, Malone P.¹</td>
<td>University College London Hospitals, Dept. of Andrology, London, United Kingdom, University Hospitals Leuven, Dept. of Urology, Leuven, Belgium, St. Antonius Hospital, Dept. of Urology, Eschweiler, Germany</td>
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<tr>
<td>V84</td>
<td><strong>Detachment of corpora cavernosa during anastomotic bulboprostatic reconstruction after pelvic trauma</strong></td>
<td>Martínez-Piñeiro L.¹, Ríos E.², Sánchez J.², Diez J.², López-Tello J², Alvarez M.¹</td>
<td>La Paz University Hospital, Dept. of Urology, Madrid, Spain, Infanta Sofia University Hospital, Dept. of Urology, Madrid, Spain</td>
</tr>
<tr>
<td>V87</td>
<td><strong>Suture-free sealing of tunical defect with collagen fleece after partial plaque excision in Peyronie’s disease: Long-term outcomes of the sealing technique</strong></td>
<td>Hatzichristodoulou G.¹, Fiechtner S.¹, Gschwend J.¹, Kübler H.¹, Lahme S.²</td>
<td>Technical University of Munich, Dept. of Urology, Munich, Germany, Siloah St. Trudpert Hospital, Dept. of Urology, Pforzheim, Germany</td>
</tr>
<tr>
<td>V88</td>
<td><strong>Corporoplasty using bovine pericardium graft in Peyronie’s disease</strong></td>
<td>Ruiz-Hernandez M.¹, Fraile-Poblador A.², Donis-Canet F.¹, Martínez-Salamanca J.I.³, Martínez-Arcos L.M.¹, Sanz-Mayayo E.¹, Rodríguez-Patrón R.¹, Burgos-Revilla F.J.¹</td>
<td>Hospital Universitario Ramón y Cajal, Dept. of Urology, Madrid, Spain, Hospital Universitario Ramón y Cajal and Centro de Urología Médico-Quirúrgico CUMQ-LYX, Dept. of Urology</td>
</tr>
</tbody>
</table>
One-stage preputial island tubularized flap repair for cripple hypospadias in adults. A step-by-step technique

By: Ploumidis A.¹, Pappas A.¹, Lumen N.², Hoebeke P.², Spinoit A-F.²

Institutes: Athens Medical Center, Dept. of Urology, Athens, Greece, ²Ghent University Hospital, Dept. of Urology, Ghent, Belgium
Challenges in minimally invasive partial nephrectomy

Poster Session 79

Monday, 27 March
15:45 - 17:15

Location: Room Copenhagen, North Hall (Level 1)

Chairs: M. Gallucci, Rome (IT)
G. Novara, Padova (IT)

Aims and objectives of this session
Exchange of experiences with challenging minimally invasive partial nephrectomies.

Poster viewing of 20 minutes. Presentations will take place on stage. Standard presentations are 2 minutes in length, followed by 2 minutes for discussion.

1051

Perioperative outcomes between open and robot-assisted partial nephrectomy for cystic masses: An international multicentric study
By: Pradere B.1, Peyronnet B.2, Delporte G.3, Manach Q.4, Khene Z.2, Riszk J.3, Moulin M.7, Benoit T.9, Brichart N.8, Beaupé J.B.5, Bex A.8, Roupret M.4, Bensalah K.2, Bruyère F.9

Institutes: 1CHRU de Tours, Hôpital Bretonneau, Dept. of Urology, Tours, France, 2CHU Rennes, Dept. of Urology, Rennes, France, 3CHRU Lille, Dept. of Urology, Lille, France, 4Hôpital Pitié-Salpêtrière, Dept. of Urology, Paris, France, 5CHU Toulouse, Dept. of Urology, Toulouse, France, 6CHR Orléans, Dept. of Urology, Orléans, France, 7CHU Dijon, Dept. of Urology, Dijon, France, 8Netherlands Cancer Institute, Dept. of Urology, Amsterdam, The Netherlands, 9CHRU Tours, Dept. of Urology, Tours, France

1044

MIC and Trifecta in robot-assisted partial nephrectomy in highly complex tumors – similar results in comparison with tumors of low and intermediate complexity

Institutes: 1University of Rostock, Dept. of Urology, Rostock, Germany, 2St. Antonius Hospital, Prostate Center Northwest, Dept. of Urology, Pediatric Urology and Urologic Oncology, Gronau, Germany, 3Missionsärztlche Klinik, Dept. of Urology, Wuerzburg, Germany, 4Augusta-Kranken-Anstalt, Dept. of Urology, Bochum, Germany

1046

Histopathological analysis of peritumoral pseudocapsule infiltration and surgical margin status after enucleative robot-assisted partial nephrectomy (RAPN) for malignant renal tumors
By: Campi R.1, Mari A.1, Sessa F.1, Tellini R.1, Rudi X.1, Sforza S.1, Vanacore D.1, Tuccio A.1, Serri S.1, Carini M.1, Rasppolini M.R.5, Minervini A.1

Institutes: 1Aou Careggi, Dept. of Urology, Florence, Italy, 2Aou Careggi, Dept. of Pathology, Florence, Italy

1047

Adherent perinephric fat in Asian patients: Predictors, and impact on perioperative outcomes of partial nephrectomy

Institutes: Tokyo Medical and Dental University Graduate School, Dept. of Urology, Tokyo, Japan

1048

Robotic-assisted partial nephrectomy for hilar and non-hilar tumours: Perioperative outcomes

Institutes: Taipei Veterans General Hospital, Dept. of Urology, Taipei City, Taiwan

1049

Is retro the way forward? Retroperitoneal robotic-assisted partial nephrectomy: Single institution experience
By: Hussain M., Oakley J., Muller G., Emara A., Barber N.

Institutes: Frimley Park Hospital, Dept. of Urology, Surrey, United Kingdom
Comparison of laparoscopic and robotic partial nephrectomy beyond the learning curve
By: Alimi Q.1, Peyronnet B.1, Sebe J-F.2, Coté J-F.3, Kammerer-Jacquet S-F.4, Khene Z.1, Verhoest G.1, Guillonneau B.5, Bensalah K.1
Institutes: CHU Pontchaillou Teaching Hospital, Dept. of Urology, Rennes, France, 2Diaconesses Croix St Simon Hospital, Dept. of Urology, Paris, France, 3CHU Tenon Teaching Hospital, Dept. of Pathology, Paris, France, 4CHU Pontchaillou Teaching Hospital, Dept. of Pathology, Rennes, France, 5Diaconesses Croix Saint Simon Hospital, Dept. of Urology, Paris, France

Robot-assisted partial nephrectomy for complex cases (Padua score ≥ 10): Results from a multicenter experience at three high-volume centers
By: Luquezzani G.1, Buffi N.1, Lista G.1, Maffei D.1, Forni G.1, Larcher A.2, Fossati N.2, Lazzeri M.1, Casale P.1, Saita A.1, Hurle R.1, Guazzoni G.1, Porter J.3, Mottrie A.2
Institutes: Istituto Clinico Humanitas, IRCCS, Dept. of Urology, Milan, Italy, 2OLV Vattikuti Robotic Center, Dept. of Urology, Aalst, Belgium, 3Swedish Medical Center, Dept. of Urology, Seattle, United States of America

Intraoperative dual-modality imaging in clear cell renal cell carcinoma using Indium-111-DOTA-girentuximab-IRDye800CW
By: Hekman M.1, Rijpkema M.2, Oosterwijk E.3, Langenhuijzen H.3, Boerman O.2, Oyen W.2, Mulders P.3
Institutes: Radboudumc, Dept. of Urology and Dept. of Radiology & Nuclear Medicine, Nijmegen, The Netherlands, 2Radboudumc, Dept. of Radiology & Nuclear Medicine, Nijmegen, The Netherlands, 3Radboudumc, Dept. of Urology, Nijmegen, The Netherlands

3D versus 2D laparoscopic partial nephrectomy: Feasibility and advantages
By: Varca V., Benelli A., Gregori A.
Institutes: G. Salvini Hospital, Dept. of Urology, Milan, Italy

Intraoperative dual-modality imaging in clear cell renal cell carcinoma using Indium-111-DOTA-girentuximab-IRDye800CW
By: Hekman M.1, Rijpkema M.2, Oosterwijk E.3, Langenhuijzen H.3, Boerman O.2, Oyen W.2, Mulders P.3
Institutes: Radboudumc, Dept. of Urology and Dept. of Radiology & Nuclear Medicine, Nijmegen, The Netherlands, 2Radboudumc, Dept. of Radiology & Nuclear Medicine, Nijmegen, The Netherlands, 3Radboudumc, Dept. of Urology, Nijmegen, The Netherlands

Partial nephrectomy in the treatment of renal tumors with concomitant venous tumor thrombosis (VTT) of renal vein branches: Retrospective, multi-center analysis of perioperative, functional, and oncologic outcomes
Institutes: University of Padua and University of Udine, Dept. of Surgery, Oncology, and Gastroenterology - Urology Clinic, University of Padua - Department of Experimental and Clinical Medical Sciences - Urologic Clinic, University of Udine, Padua, Italy, 2Mayo Clinic, Dept. of Urology, Rochester, Mn, United States of America, 3URI, IRCCS Ospedale San Raffaele, Division of Oncology, Unit of Urology, Milan, Italy, 4University of Udine, Italy, Dept. of Experimental and Clinical Medical Sciences - Urologic Clinic, Udine, Italy, 5Fox Chase Cancer Center, Temple University Health System, Division of Urologic Oncology, Department of Surgical Oncology, Philadelphia, Pa, United States of America, 6College of Human Medicine, Michigan State University, Division of Urology, Spectrum Health, Grand Rapids, United States of America, 7Mayo Clinic, Dept. of Urology, Rochester, United States of America, 8Fox Chase Cancer Center, Temple University Health System, Division of Urologic Oncology, Department of Surgical Oncology, Philadelphia, United States of America, 9University of Padua, Dept. of Urology, Division of Urologic Oncology, Department of Surgical Oncology, Philadelphia, United States of America, 10Peter MacCallum Cancer Centre, Epworth Healthcare, University of Melbourne, Division of Cancer Surgery, Melbourne, Australia, 11University Hospitals Leuven, Dept. of Urology and Radiation Oncology, Leuven, Belgium, 12University of Missouri, Dept. of Surgery-Urology Division, Columbia, United States of America, 13Memorial Sloan Kettering Cancer Center, Urology Service, New York, United States of America, 14University of Padua, Dept. of Surgery, Oncology, and Gastroenterology - Urology Clinic, University of Padua - Department of Experimental and Clinical Medical Sciences, University of Padua, Dept. of Urology, Ospedale San Raffaele, Division of Urology, Milan, Italy, 15Onze Lieve Vrouwziekenhuis Hospital, Dept. of Urology, Aalst, Belgium

Simple enucleation for selected renal tumours ≥7 cm
By: Lu Q.1, Zhao X.1, Ji C.1, Guo S.2, Liu G.1, Zhang S.1, Li X.1, Gan W.1, Guo H.1
Institutes: Nanjing Drum Tower Hospital, The Affiliated Hospital of Nanjing University Medical
17:00 - 17:07

Summary
M. Gallucci, Rome (IT)
Improving prostate cancer staging and outcomes after radical prostatectomy

**Poster Session 80**

**Monday, 27 March**

**15:45 - 17:15**

**Location:** Room Madrid, North Hall (Level 1)

**Chairs:**
- G. Gandaglia, Milan (IT)
- D. Murphy, Melbourne (AU)
- G. Palapattu, Ann Arbor (US)

**Aims and objectives of this session**

The aim of this session is to discuss on how to improve prostate cancer staging and outcomes after surgery.

Poster viewing of 20 minutes. Presentations will take place on stage. Standard presentations are 2 minutes in length, followed by 2 minutes for discussion.

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1057

**Lymphadenectomy trends in Gleason 7 prostate cancer: A population-based study**  
By: Chandrasekar T., Goldberg H., Klaassen Z., Hamilton R., Fleshner N., Kulkarni G.  
Institutes: University Health Network, Division of Urology, Dept. of Surgical Oncology, Toronto, Canada

1058

**Population-based analysis: Changes in the natural history of low risk localized prostate cancer**  
By: Helgstrand J.T.¹, Klemann N.¹, Toft B.G.², Vainer B.³, Røder M.¹, Iversen P.¹, Brasso K.¹  
Institutes: ¹Copenhagen University Hospital, Rigshospitalet, Copenhagen Prostate Cancer Center, Dept. of Urology, Copenhagen, Denmark, ²Copenhagen University Hospital, Rigshospitalet, Dept. of Pathology, Copenhagen, Denmark

1059

**Non-prostate cancer mortality following radical prostatectomy or radiotherapy in men with localized and locally advanced prostate cancer: An analysis using propensity score matching**  
By: Kim S.I.¹, Kim S.J.¹, Choo S.H.², Cho D.S.²  
Institutes: ¹Ajou University School of Medicine, Dept. of Urology, Suwon, South Korea, ²Bundang Jesaeng Hospital, Dept. of Urology, Seongnam, South Korea

1060

**Oncologic long-term outcome in patients with pathologic Gleason 3+3 score at radical prostatectomy**  
By: Mandel P.¹, Graefen M.², Pompe R.², Chun F.³, Salomon G.², Huland H.², Tilki D.¹  
Institutes: ¹University Hospital Hamburg-Eppendorf, Martini-Clinic Prostate Cancer Center, Department of Urology, Hamburg, Germany, ²University Hospital Hamburg-Eppendorf, Martini-Clinic Prostate Cancer Center, Hamburg, Germany, ³University Hospital Hamburg-Eppendorf, Dept. of Urology, Hamburg, Germany

1061

**Preoperative characteristics of the P.R.O.S.T.A.T.E. scores: A novel predictive tool for the risk of positive surgical margin after radical prostatectomy**  
By: Xu B., Luo C., Zhang Q., Jin J.  
Institutes: Peking University First Hospital, Dept. of Urology, Beijing, China

1062

**Cost effectiveness comparison between neoadjuvant chemo-hormonal therapy and extended lymph node dissection in patients with high-risk prostate cancer**  
By: Hagiwara K.¹, Hatakeyama S.¹, Tobisawa Y.¹, Yoneyama T.¹, Imai A.¹, Yoneyama T.¹, Hashimoto Y.¹, Koie T.¹, Tsuchiya N.², Habuchi T.², Arai Y.³, Ohyama C.¹  
Institutes: ¹Hirosaki University Graduate School of Medicine, Dept. of Urology, Hirosaki, Japan, ²Yamagata University, Faculty of Medicine, Dept. of Urology, Yamagata, Japan,³Akita University Graduate School of Medicine, Dept. of Urology, Akita, Japan, ⁴Tohoku University Graduate School of Medicine, Dept. of Urology, Sendai, Japan
Retrograde perfusion sphinterometry to evaluate efficacy of autologous 6-branch suburethral sling to properly restore sphincteric apparatus during robotic assisted radical prostatectomy (RALP)

By: Cestari A., Lolli C., Ghezzi M., Sangalli M., Zanoni M., Fabbri F., Sozzi F., Zanni G., Dell'Acqua V., Rigatti P.

Institutes: Istituto Auxologico Italiano, Dept. of Urology, Milan, Italy

Transurethral catheter removal on postoperative day 2 after robot-assisted laparoscopic radical prostatectomy: A feasibility study from a single high-volume referral centre


Institutes: San Giovanni Addolorata Hospital, Dept. of Urology, Rome, Italy

Visibility of characterized periprostatic nerve distributions for nerve-sparing radical prostatectomy


Institutes: Paracelsus Private Medical University of Salzburg, Dept. of Urology and Andrology, Salzburg, Austria, University of Tübingen, Dept. of Urology, Tübingen, Germany, Swiss Paraplegic Center, Dept. of Neuro-Urology, Nottwil, Switzerland, SALK, Dept. of Urology, Salzburg, Austria, Aarhus University, Dept. of Clinical Medicine, Aarhus, Denmark

Oncological and functional outcome after radical prostatectomy in men ≤45 years of age


Institutes: University Hospital Hamburg-Eppendorf, Martini-Klinik Prostate Cancer Center; Dept. of Urology, Hamburg, Germany

A randomized control trial on the impact of regional hypothermia: Ad hoc analysis on short term recovery of sexual function after robot-assisted radical prostatectomy (RARP)

By: Ko Y-H., Osann K., Skarecky D., Morales B., Ahlering T.

Institutes: University of California, Irvine, Dept. of Urology, Orange, United States of America, Yonsei University, Dept. of Urology, Yeoungnam, South Korea, University of California, Irvine, Dept. of Medicine, Orange, United States of America

The prognostic role of sentinel node dissection on biochemical recurrence-free survival rate of prostate cancer patients after robot-assisted radical prostatectomy

By: Grivas N., Wit E., Bex A., Hendricksen K., Horenblas S., Kleinjan G., Van Rhijn B., Veg E., Van Der Poel H.

Institutes: Netherlands Cancer Institute, Dept. of Urology, Amsterdam, The Netherlands, Netherlands Cancer Institute, Dept. of Nuclear Medicine, Amsterdam, The Netherlands

Fluorescence supported lymph node dissection in robot-assisted radical prostatectomy – a prospective randomized clinical trial


Institutes: University of Rostock, Dept. of Urology, Rostock, Germany, St. Antonius Hospital, Prostate Center Northwest, Dept. of Urology, Pediatric Urology and Urologic Oncology, Gronau, Germany

Summary

D. Murphy, Melbourne (AU)
Primary treatment of prostate cancer: Balancing benefits and side effects
Poster Session 81

**Location:** Room Milan, North Hall (Level 1)

**Chairs:** G.M. Ahlgren, Malmö (SE)
G. Giannarini, Udine (IT)
R.C.N. Van Den Bergh, Amsterdam (NL)

**Aims and objectives of this session**
The aim of this session is to discuss on oncological and functional outcomes on primary treatments for prostate cancer.

Poster viewing of 20 minutes. Presentations will take place on stage. Standard presentations are 2 minutes in length, followed by 2 minutes for discussion.

1070

**The BAUS radical prostatectomy audit 2014/2015 – an update on current practice and outcomes by centre and surgeon case volume**
By: Khadhouri S.¹, Miller C.¹, McNeill A.², Hounsme L.³, Fowler S.⁴, McGrath J.¹
Institutes: Royal Devon and Exeter Hospital, Dept. of Urology, Exeter, United Kingdom, ²Western General Hospital, Dept. of Urology, Edinburgh, United Kingdom, ³Public Health England, Dept. of Public Health, London, United Kingdom, ⁴BAUS, Dept. of Surgery, London, United Kingdom

1071

**Efficacy of local treatment in prostate cancer patients with clinically pelvic lymph node-positive disease at initial diagnosis**
By: Seisen T.¹, Vetterlein M.¹, Karabon P.¹, Jindal T.¹, Sood A.¹, Nocera L.¹, Nguyen P.², Choueiri T.², Trinh Q-D.³, Menon M.¹, Abdollah F.¹
Institutes: ¹Henri Ford Hospital, Dept. of Urology, Detroit, United States of America, ²Brigham and Women Hospital, Dept. of Radiation Oncology, Boston, United States of America, ³Dana Farber Cancer Institute, Dept. of Genito-Urinary Medical Oncology, Boston, United States of America, ⁴Brigham and Women’s Hospital, Dept. of Urology, Boston, United States of America

1072

**Oncological and functional outcomes of laparoscopic versus robot-assisted radical prostatectomy: Five years results of a prospective randomised controlled trial**
By: Porpiglia F.¹, Fiori C.¹, Bertolo R.¹, Manfredi M.¹, Mele F.¹, Garrou D.¹, Cattaneo G.¹, De Luca S.¹, Passera R.², Scarpa R.M.¹
Institutes: ¹San Luigi Hospital, Dept. of Urology, Turin, Italy, ²San Giovanni Battista Hospital, Dept. of Nuclear Medicine, Turin, Italy

1073

**Contemporary extended pelvic lymph node dissection for prostate cancer in the UK – an analysis of national practice**
By: Calleja E., Fowler S., McGrath J., Sooriakumaran P., Aning J.
Institutes: ¹BAUS Section of Oncology, British Association of Urological Surgeons, London, United Kingdom

1075

**More extensive lymph node dissection at radical prostatectomy is associated with improved outcomes after salvage radiotherapy for rising PSA after surgery: A long-term, multi-institutional analysis**
By: Fossati N.¹, Karnes R.J.², Colicchia M.², Bossi A.³, Cozzarini C.⁴, Fiorino C.⁴, Noris Chiorda B.⁴, Gandaglia G.¹, Dell'Oglio P.¹, Wiegel T.⁵, Shariat S.⁶, Goldner G.⁷, Joniau S.⁸, Battaglia A.⁸, Haustermans K.⁹, De Meerleer G.⁹, Fonteyne V.¹⁰, Ost P.¹⁰, Van Poppel H.¹⁰, Montorsi F.¹, Briganti A.¹, Boorjian S.A.²
Institutes: ¹Vita-Salute University San Raffaele, Dept. of Urology, Milan, Italy, ²Mayo Clinic, Dept. of Urology, Rochester, United States of America, ³Gustave Roussy Institute, Dept. of Radiation
Applicability of Briganti nomogram: Is it an absolute requirement before lymph node dissection in intermediate-risk prostate cancer? Assessment of the external applicability
By: Pradere B., Roumigué M., Sanson S., Gas J., Patard P.M., Huyghe E., Rischmann P., Gamé X., Thoulozan M., Doumerc N., Soulé M., Beauval J.B.
Institutes: CHU Toulouse, Dept. of Urology, Toulouse, France

Obesity was associated with improved metastases-free survival after surgery in 13,667 prostate cancer patients
Institutes: University Medical Center Eppendorf, Martini-Klinik, Hamburg, Germany, University Medical Center Eppendorf, Department of Urology, Hamburg, Germany, Academic Hospital Braunschweig, Department of Urology, Braunschweig, Germany

Functional outcomes and complications of a multicentre series of open versus robot-assisted salvage radical prostatectomy
Institutes: San Giovanni Battista Hospital, Dept. of Urology, Turin, Italy, Pasini Hospital, Dept. of Radiotherapy, Aosta, Italy, San Giovanni Battista Hospital, Dept. of Statistics, Turin, Italy, Institut Mutualiste Montsouris, Dept. of Urology, Paris, France, Guy’s Hospital, Dept. of Urology, London, United Kingdom, North Bristol NHS Foundation Trust, Dept. of Urology, Bristol, United Kingdom, Fundació Puigvert, Dept. of Urology, Barcelona, Spain, Leuven University Hospitals, Dept. of Urology, Leuven, Belgium, Clinique Saint Augustin, Dept. of Urology, Bordeaux, France, CHU Mondor, Dept. of Urology, Créteil, France, Pitié Salpêtrière Hospital- University Paris 6, Dept. of Urology, Paris, France, Institut Jules Bordet, Université Libre De Bruxelles, Dept. of Urology, Brussels, Belgium, Mayo Clinic, Dept. of Urology, Rochester, United States of America, OLV Hospital, Dept. of Urology, Aalst, Belgium, Vanderbilt University, Medical Center North, Dept. of Urology, Nashville, United States of America, Netherlands Cancer Institute, Dept. of Urology, Amsterdam, The Netherlands, Martini Klinik, Dept. of Urology, Hamburg, Germany

Impact of type of radical prostatectomy on outcomes reported by men with prostate cancer 18 months post-diagnosis: Results from the English National Prostate Cancer Audit (NPCA)
By: Nossiter J., Sujenthiran A., Charman S., Cathcart P., Aggarwal A., Payne H., Clarke N., Van Der Meulen J.
Institutes: Royal College Of Surgeons Of England, Dept.t of Clinical Effectiveness, London, United Kingdom, Royal College Of Surgeons Of England, Dept. of Clinical Effectiveness, London, United Kingdom, London School of Hygiene and Tropical Medicine, Dept. of Health Services Research & Policy, London, United Kingdom, Guy’s and St Thomas’ Hospital, NHS Foundation Trust, London,
1080

Functional results of PROPENLAP: Prospective multicentric study comparing open and minimally invasive radical prostatectomy

By: Salomon L.\(^1\), Bastuji-Garin S.\(^2\), Soulie M.\(^3\), Devonec M.\(^4\), Boutin E.\(^5\), Mandron E.\(^6\), Benoit G.\(^7\), Richman P.\(^8\), Mottet N.\(^9\), Gasman D.\(^9\), Irani J.\(^10\), Zerbib M.\(^11\), Vaessen C.\(^12\), Dore B.\(^10\), Lebret T.\(^13\), Colombel M.\(^4\), Lechevallier E.\(^14\), Gregoire L.\(^15\), Allory Y.\(^5\), Abbou C-C.\(^1\)

Institutes: CHU Henri Mondor, Dept. of Urology, Créteil, France, \(^2\)CHU Henri Mondor, Santé Publique, Créteil, France, \(^3\)Hôpital De Toulouse, Dept. of Urology, Toulouse, France, \(^4\)Hôpital De Lyon, Dept. of Urology, Lyon, France, \(^5\)CHU Henri Mondor, Anapath, Créteil, France, \(^6\)HEGP, Dept. of Urology, Paris, France, \(^7\)Hôpital Bicêtre, Dept. of Urology, Kremlin Bicêtre, France, \(^8\)Hôpital De Saint Etienne, Dept. of Urology, Saint Etienne, France, \(^9\)Clinique De Longjumeau, Dept. of Urology, Longjumeau, France, \(^10\)Hôpital De Poitiers, Dept. of Urology, Poitiers, France, \(^11\)Hôpital Cochin, Dept. of Urology, Paris, France, \(^12\)CHU Pitié Salpêtrière, Dept. of Urology, Paris, France, \(^13\)Hôpital Foch, Dept. of Urology, Suresnes, France, \(^14\)Hôpital De Marseille, Dept. of Urology, Marseille, France, \(^15\)CHU Henri Mondor, CIC, Créteil, France

1081

Randomized study evaluating postoperative outcomes in patients with complex anastomosis during da Vinci prostatectomy

By: Pushkar D., Kolontarev K., Govorov A., Rasner P.

Institutes: Moscow State Medical Stomatological University, Hospital 50, Dept. of Urology, Moscow, Russia

1082

Surgical expertise is the major determinant of decreased complication rates in contemporary patients treated with robot-assisted radical prostatectomy

By: Dell'Oglio P.\(^1\), Stabile A.\(^1\), Zaffuto E.\(^1\), Gandaglia G.\(^1\), Fossati N.\(^1\), Bandini M.\(^1\), Moschini M.\(^1\), Fallara G.\(^1\), Dehò F.\(^1\), Guazzoni G.\(^2\), Gallina A.\(^1\), Suardi N.\(^1\), Gaboardi F.\(^1\), Montorsi F.\(^1\), Briganti A.\(^1\)

Institutes: Vita-Salute University San Raffaele, Dept. of Urology, Milan, Italy, \(^2\)Humanitas Clinical and Research Center, Dept. of Urology, Milan, Italy

1083

Characterization of the "one-pad patient" at long-term follow-up after radical prostatectomy

By: Löppenberg B., Müller G., Bach P., Von Bodman C., Brock M., Roghmann F., Noldus J., Palisaar J.

Institutes: Ruhr-University Bochum, Marien Hospital Herne, Dept. of Urology, Herne, Germany
Testicular cancer - new approaches in surgery and systemic treatment

Poster Session 82

**Location:** Room Paris, North Hall (Level 1)

**Chairs:**
- M. Jewett, Toronto (CA)
- D.L. Nicol, London (GB)
- N. Nicolai, Milan (IT)

**Aims and objectives of this session**
This session will update the audience with new indications and outcome results from surgical approaches together with new systemic treatment options for patients with advanced germ cell cancer. In addition, quality of care issues will be discussed based on large registries.

Poster viewing of 20 minutes. Presentations will take place on stage. Standard presentations are 2 minutes in length, followed by 2 minutes for discussion. Extended presentations (+) are 3 minutes in length, followed by 3 minutes for discussion.

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1084

**Non-guideline concordant treatment of testicular cancer**
*By: Paffenholz P., Pfister D., Heidenreich A.*

**Institutes:** University Hospital Cologne, Dept. of Urology, Cologne, Germany

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1085

**Testicular cancer in patients with learning disabilities in England from 2001-2015: A national cohort study**
*By: Afshar M.², Jackson-Spence F.¹, De Santis M.³, Tanner J-R.¹, Evison F.⁵, James N.³, Selby P.⁶, Patel P.⁷*

**Institutes:** University of Birmingham, Medical School, Birmingham, United Kingdom, ²St George's University Hospitals NHS Foundation Trust, Dept. of Urological Oncology, London, United Kingdom, ³University of Warwick, Cancer Research Unit, Coventry, United Kingdom, ⁴University Hospitals Birmingham NHS Foundation Trust, Dept. of Oncology, Birmingham, United Kingdom, ⁵University Hospitals Birmingham NHS Foundation Trust, Dept. of Informatics, Birmingham, United Kingdom, ⁶University of Leeds, Leeds Institute of Cancer & Pathology, Leeds, United Kingdom, ⁷University of Birmingham, School of Cancer Sciences, Birmingham, United Kingdom

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1086

**Reliability of frozen section examination in a large cohort of testicular masses: What did we learn?**
*By: Vartolomei M.D.¹, Matei D.V.², Renne G.³, Tringali V.M.², Ferro M.², Bianchi R.², Russo A.², Cozzi G.², De Cobelli O.⁴*

**Institutes:** University of Medicine and Pharmacy, Targu Mures, Romania and European Institute of Oncology, Dept. of Cell and Molecular Biology and Dept. of Urology, Milan, Italy, ²European Institute of Oncology, Dept. of Urology, Milan, Italy, ³European Institute of Oncology and University of Milan, Dept. of Urology, Milan, Italy

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1087

**Diagnostic value of frozen section examination (FSE) during inguinal exploration in patients with inconclusive testicular lesions**
*By: Hankhauser C.¹, Beyer J.², Roth L.¹, Sulser T.¹, Bode K-P.², Moch H.³, Hermanns T.¹*

**Institutes:** University Hospital Zurich, University of Zurich, Dept. of Urology, Zurich, Switzerland, ²University Hospital Zurich, University of Zurich, Dept. of Oncology, Zurich, Switzerland, ³University Hospital Zurich, University of Zurich, Dept. of Pathology and Molecular Pathology, Zurich, Switzerland

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1088

**Safety of testicular prosthesis insertion at the time of radical orchiectomy for testis cancer in patients undergoing adjuvant therapies**
*By: Musi G.¹, Cozzi G.¹, Bianchi R.¹, Mistretta F.A.¹, Tringali V.M.L.¹, Jereczeck B.A.², Nolé F.³, De*
Laparoscopic retroperitoneal lymph-node dissection (L-RPLND) is not only a staging procedure in stage I non-seminomatous germ-cell testicular tumors (NSGCTT): Mature data from a referral centre

By: Nicolai N.¹, Tarabelloni N.², Catanzaro M.¹, Gasperoni F.², Stagni S.¹, Torelli T.¹, Tesone A.¹, Kungulli A.¹, Necchi A.³, Giannatempo P.³, Raggi D.³, Colecchia M.⁴, Salvioni R.¹, Piva L.¹, Pizzocaro G.⁴, Biasoni D.¹

Institutes: Fondazione Ircss Istituto Nazionale Tumori, Dept. of Urology, Milan, Italy, ²Mox-Politecnico Di Milano, Dept. of Mathematics, Milan, Italy, ³Fondazione Ircss Istituto Nazionale Tumori, Dept. of Medical Oncology, Milan, Italy, ⁴Fondazione Ircss Istituto Nazionale Tumori, Dept. of Pathology, Milan, Italy, ⁵Fondazione Ircss Istituto Nazionale Tumori, Emeritus, Milan, Italy

Primary retroperitoneal lymph node dissection (RPLND) in Stage II A/B seminoma patients without adjuvant treatment: A phase II trial (PRIMETEST)

By: Lusch A., Gerbaulet L., Winter C., Albers P.

Institutes: Düsseldorf University, Dept. of Urology, Düsseldorf, Germany

Surgical resection of residual tumours after adjuvant chemotherapy of germ cell (GC) tumour

By: Gonzalez F.¹, Bossavy J-P.¹, Otl P.², Quintyn–Rant M-L.³, Roumigué M.⁴, Chevreau C.⁵, Malavaud B.⁴

Institutes: Chu Toulouse Rangueil, Dept. of Vascular Surgery, Toulouse, France, ²Chu Toulouse Rangueil, Dept. of Radiology, Toulouse, France, ³Institut Universitaire Du Cancer, Dept. of Pathology, Toulouse, France, ⁴Institut Universitaire Du Cancer, Dept. of Urology, Toulouse, France, ⁵Institut Universitaire Du Cancer, Dept. of Medical Oncology, Toulouse, France

Complications and adjunctive surgical procedures in post-chemotherapy retroperitoneal lymph node dissection (PC-RPLND) to define a tertial referral center

By: Lusch A., Gerbaulet L., Winter C., Albers P.

Institutes: Düsseldorf University, Dept. of Urology, Düsseldorf, Germany

Bone metastases in germ cell tumors: Surgical management and outcomes

By: Nini A.¹, Konieczny M.², Winter C.³, Lusch A.³, Krauspe R.², Albers P.³

Institutes: ¹IRCCS Ospedale San Raffaele, Dept. of Urology, Milan, Italy, ²University Hospital Düsseldorf, Heinrich-Heine University Medical Faculty, Dept. of Orthopedic Surgery, Düsseldorf, Germany, ³University Hospital Düsseldorf, Heinrich-Heine University Medical Faculty, Dept. of Urology, Düsseldorf, Germany

Retinal toxicity after cisplatin-based chemotherapy in patients with testicular cancer

By: Gild P.¹, Vetterlein M.¹, Dieckmann K.P.², Matthes C.³, Wagner W.², Ludwig T.¹, Meyer C.¹, Soave A.¹, Dulz S.³, Asselborn N.³, Oechsle K.⁴, Bokemeyer C.⁴, Becker A.¹, Fisch M.¹, Hartmann M.¹, Chun F.¹, Kluth L.A.¹

Institutes: ¹University Medical Center Hamburg-Eppendorf, Dept. of Urology, Hamburg, Germany, ²Albertinen Hospital, Dept. of Urology, Hamburg, Germany, ³Bundeswehr Medical Center Hamburg, Dept. of Urology, Hamburg, Germany, ⁴University Medical Center Hamburg-Eppendorf, Dept. of Ophthalmology, Hamburg, Germany, ⁵University Medical Center Hamburg-Eppendorf, Dept. of Medical Oncology, Hamburg, Germany

The features and management of late relapse of non-seminomatous germ cell tumours

By: Jay A., Aldiwani M., Wijayarathna S., Huddart R., Mayer E., Nicol D.

Institutes: Royal Marsden Hospital, Dept. of Urology, Chelsea, United Kingdom

Incidence of secondary malignancies (SM) in patients (pts) with germ cell tumors (GCT) who received high-dose chemotherapy (HDCT): A retrospective study from the European Society for Blood and Marrow Transplantation (EBMT) database
Pazopanib (PZP) in germ cell tumors (GCT) after chemotherapy (CT) failure: Final results of the open label, single-group, phase 2 Pazotest trial

By: Necchi A. ¹, Lo Vullo S. ², Giannatempo P. ³, Raggi D. ¹, Calareso G. ⁴, Togliardi E. ⁵, Crippa F. ⁶, Pennati M. ⁷, Zaffaroni N. ⁸, Perrone F. ⁹, Colecchia M. ⁶, Nicolai N. ⁸, Mariani L. ², Salvioni R. ⁸

Institutes: Fondazione IRCCS - Istituto Nazionale Dei Tumori, Dept. of Medical Oncology, Milan, Italy, Fondazione IRCCS Policlinico San Matteo, Dept. of Medical Oncology, Pavia, Italy, EBMT Study Offices, Paris, France, Fondazione IRCCS Istituto Nazionale Dei Tumori, Dept. of Medical Oncology, Milan, Italy, Hospital of Ravenna, Dept. of Hematology, Ravenna, Italy

Final comments

N. Nicolai, Milan (IT)
**Top-notch new technologies for tissues and bacterial cultures: New wireless diagnostics and new techniques in training**

**Poster Session 83**

**Monday, 27 March**

**15:45 - 17:15**

**Location:** Room Amsterdam, North Hall (Level 1)

**Chairs:**
- T.E. Bjerklund Johansen, Oslo (NO)
- Y.S. Kyung, Seoul (KR)
- E. Liatsikos, Patras (GR)

**Aims and objectives of this session**
To identify new technologies for training, diagnosing infections and wireless diagnostics for urological applications.

Poster viewing of 20 minutes. Presentations will take place on stage. Standard presentations are 2 minutes in length, followed by 2 minutes for discussion.

<table>
<thead>
<tr>
<th>Poster Number</th>
<th>Title</th>
<th>Authors</th>
<th>Institutes</th>
</tr>
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<tbody>
<tr>
<td>1098</td>
<td>Dynamic imaging of urine flow at bladder neck during voiding by wireless capsule endoscopes in vivo</td>
<td>Yamamoto T. 1, Mizuno H. 1, Soh S. 2, Funanshi Y. 1, Matsukawa Y. 1, Nakamura M. 2, Gotoh M. 1</td>
<td>Nagoya University Graduate School of Medicine, Dept. of Urology, Nagoya, Japan, Dokkyo Medical University, Dept. of Urology, Koshigaya, Japan, Nagoya University Graduate School of Medicine, Dept. of Gastroenterology, Nagoya, Japan</td>
</tr>
<tr>
<td>1099</td>
<td>Wireless micro-robots for endoscopic applications in urology</td>
<td>Adams F. 1, Qiu T. 2, Mark A. 2, Melke K. 2, Palagi S. 2, Miernik A. 1, Fischer P. 2</td>
<td>University Hospital Freiburg, Dept. of Urology, Freiburg, Germany, Max Planck Institute For Intelligent Systems, Micro Nano and Molecular Systems, Stuttgart, Germany</td>
</tr>
<tr>
<td>1100</td>
<td>Measures of pelvic floor strength by age and parity using the Elvie device</td>
<td>Coggins J. 1, Cartwright R. 2, Bergmann J. 3</td>
<td>Chiaro Technology Ltd., Data Science Department, London, United Kingdom, Imperial College London, Faculty of Medicine, School of Public Health, London, United Kingdom, University of Oxford, Institute of Biomedical Engineering, Oxford, United Kingdom</td>
</tr>
<tr>
<td>1101</td>
<td>Experimental study on establishing tissue engineered bionic urethra by cell sheet technology and labeled by ultrasmall super-paramagnetic iron oxide (USPIO) for full-thickness urethral reconstruction</td>
<td>Fu Q., Zhou S.</td>
<td>Shanghai Sixth People's Hospital, Dept. of Urology, Shanghai, China</td>
</tr>
<tr>
<td>1102</td>
<td>Modifying the surface chemistry of biomaterials designed for surgical treatment of stress urinary incontinence to reduce bacterial adhesion</td>
<td>Roman S. 1, Mangir N. 1, Chapple C. 2, McArthur S.L. 3, MacNeil S. 1</td>
<td>University of Sheffield, Dept. of Material Science and Engineering, Sheffield, United Kingdom, Royal Hallamshire Hospital, Dept. of Urology, Sheffield, United Kingdom, Swinburne University of Thechnology, Biointerface Engineering Group and Polymer Nanointerface Engineering Group, Melbourne, Australia</td>
</tr>
<tr>
<td>1103</td>
<td>Surface acoustic waves prevent bacterial colonization in indwelling urinary catheters</td>
<td>Rosenblum J. 1, Markowitz S. 2, Goldstein M. 3</td>
<td>Shaarei Zedek Medical Center, Dept. of Urology, Bet Shemesh, Israel, Shaarei Zedek Medical Center, Dept of Urology, Bet Shemesh, Israel, Private Practice, Dept. of Urology, Bet...</td>
</tr>
</tbody>
</table>
Photodynamic therapy's use in reduction in vitro of prevalent bacteria in Fournier’s gangrene
By: Pereira N., Feitosa L., Navarro R., Kozusni-Andreani D., Carvalho N.
Institutes: Unicastro, Dept. of Biomedical Engineering, São Paulo, Brazil

Analysis of errors in 3D printing phantoms for partial nephrectomy
By: Kyung Y.S.¹, Choi S.Y.³, Kim G.B.², Song H.K.², Kim H.², You D.², Jeong I.G.³, Homg J.H.³, Kim N.², Kim C-S.³
Institutes: University of Ulsan College of Medicine, Asan Medical Center, Dept. of Health Screening and Promotion Center, Seoul, South Korea, ¹University of Ulsan College of Medicine, Asan Medical Center, Dept. of Biomedical Engineering Research Center, Seoul, South Korea, ³University of Ulsan College of Medicine, Asan Medical Center, Dept. of Urology, Seoul, South Korea

Feasibility and safety of augmented reality-assisted urological surgery
By: Rodríguez Socarrás M.E.¹, Tortolero Blanco L.², Salem J.³, Tsaur I.⁴, Gomez-Rivas J.⁵, Barret E.⁶, Borgmann H.⁷
Institutes: Universitat Hospital Alvaro Cunqueiro, Dept. of Urology, Vigo, Spain, ²University Hospital Vinalopo, Dept. of Urology, Elche, Spain, ³University Hospital Cologne, Dept. of Urology, Cologne, Germany, ⁴University Hospital Mainz, Dept. of Urology, Mainz, Germany, ⁵University Hospital La Paz, Dept. of Urology, Madrid, Spain, ⁶Institut Montsouris, Université Paris-Descartes, Dept. of Urology, Paris, France

Video analysis of skill and technique (VAST): Machine learning to assess the technical skill of surgeons performing robotic prostatectomy
By: Ghani K.¹, Liu Y.², Law H.², He D.², Miller D.¹, Montie J.¹, Deng J.²
Institutes: University of Michigan, Dept. of Urology, Ann Arbor, United States of America, ²University of Michigan, Dept. of Computer Science & Engineering, Ann Arbor, United States of America

During endoscopic surgery, eye fatigue in surgeons can be reduced by wearing polarized lens glasses
By: Iwabuchi T., Kawano Y., Narumi S., Oiwa Y., Ottomo T., Yokoyama H., Noda Y., Ishikawa S., Watanabe H., Uetani M., Yamamoto R., Hriu K., Minowada S.
Institutes: Tokyo Nephro Urology Center, Yamato Hospital, Dept. of Urology, Tokyo, Japan

Folic acid-conjugated AuAg nanoparticles combined surface enhanced Raman spectroscopy for rapid detection of bladder cancers in urine
By: Chuang T.Y.¹, Chiu Y.C.¹, Yang Y.T.², Lin C.H.², Liao M.Y.³, Huang C.C.³
Institutes: ¹Taipei City Hospital, Zhongxiao Branch, Dept. of Urology, Taipei, Taiwan, ²National Pingtung University, Dept. of Chemistry, Pingtung, Taiwan, ³Center For Micro/Nano Science and Technology and Advanced Optoelectronic Technology Center, National, Dept. of Photonics, Tainan, Taiwan, ⁴National Cheng Kung University, Medical Laboratory Science and Biotechnology, Tainan, Taiwan

Summary
E. Liatsikos, Patras (GR)
Basic science in sexual medicine: Pathophysiology and new treatment options
Poster Session 84

**Location:** Room Berlin, North Hall (Level 1)

**Chairs:**
M. Albersen, Leuven (BE)
F. Castiglione, Milan (IT)
L. Lund, Odense (DK)

**Aims and objectives of this session**
This session will provide the audience with latest news regarding pathophysiological mechanisms behind erectile dysfunction. Furthermore, evidence from in vitro and animal studies on possible new treatment options for erectile dysfunction, Peyronies disease and hypogonadism will be presented. The audience will walk away with an idea of the future direction in the world of andrology.

Poster viewing of 20 minutes. Presentations will take place on stage. Standard presentations are 2 minutes in length, followed by 2 minutes for discussion. Extended presentations (*) are 3 minutes in length, followed by 3 minutes for discussion.

1110

**Functional brain imaging shows a correlation between distended seminal vesicles and specific brain activity in young men**
By: Weisstanner C.², Wapp M.², Schmitt M.³, Puig S.⁴, Mordasini L.⁵, Wiest R.², Thalmann G.³, Birkhäuser F.¹

**Institutes:**¹ Hirslanden Klinik St. Anna, Dept. of Urology St. Anna, Luzern, Switzerland, ²University Hospital Bern, Dept. of Diagnostic and Interventional Neuroradiology, Bern, Switzerland, ³University Hospital Bern, Dept. of Urology, Bern, Switzerland, ⁴University Hospital Bern, Dept. of Diagnostic, Pediatric and Interventional Radiology, Bern, Switzerland, ⁵Luzerner Kantonsspital, Dept. of Urology, Luzern, Switzerland

1111

**Immune modulation with etanercept on hypogonadism induced by hyperprolactinemic status**
By: Huang W.¹, Wang Z-L.², Yang L-Y.³, Chen H-H.², Lin H-H.², Tsai Y-T.²

**Institutes:**¹ National Yang-Ming University Taipei Veterans General Hospital, Dept. of Urology and Physiology, Taipei, Taiwan, ²National Yang-Ming University, Dept. of Physiology, Taipei, Taiwan, ³National Yang-Ming University, Taipei Veterans General Hospital, Dept. of Pediatrics, Taipei, Taiwan

1112

**Development and validation of a phenotypic high-throughput, cell-based assay for anti-myofibroblast activity in Peyronie’s disease**
By: Ilg M.M.¹, Mateus M.¹, Stebbeds W.², Ameyaw B.², Raheem A.³, Spilotos M.³, Capece M.³, Parnham A.³, Garaffa G.³, Christopher N.³, Muneer A.³, Cellek S.¹, Ralph D.³

**Institutes:**¹ Anglia Ruskin University, Faculty of Medical Science, Chelmsford, United Kingdom, ²Cranfield University, Cranfield Health, Bedfordshire, United Kingdom, ³University College London Hospital, Dept. of Andrology, London, United Kingdom

1113

**Androgen receptor (AR) gene (CAG)n and (GGN)n length polymorphisms and symptoms in young males with long-lasting adverse effects after finasteride use against androgenic alopecia**
By: Chiriacò G.¹, Caucci S.², Cecchin E.², Toffoli G.³, Xodo S.⁴, Stinco G.⁵, Trombetta C.¹

**Institutes:**¹ Azienda Ospedaliero Universitaria di Trieste, Dept. of Urology, Trieste, Italy, ²University of Udine, Dept. of Medical and Biological Sciences, Udine, Italy, ³CRO Aviano National Cancer Institute, Experimental and Clinical Pharmacology Unit, Aviano, Italy, ⁴University Hospital Santa Maria Della Misericordia, University of Udine, Udine, Italy, ⁵University Hospital Santa Maria Della Misericordia, Dept. of Dermatology, Udine, Italy
The efficacy of human testicular stromal cell and neuronal precursor cell in a mouse model of cavernous nerve injury
By: Choi K.H.¹, Ki B.S.², Lee S.R.¹, Hong Y.K.¹, Park D.S.¹, Lee D.R.²
Institutes: ¹CHA University, Dept. of Urology, Seongnam, South Korea, ²CHA University, Dept. of Biomedical Science, College of Life Science, Seongnam, South Korea

Erectile dysfunction (ED) secondary to radical prostatectomy is associated with selective down-regulation of nitrergic innervation in human cavernosal tissue
By: Martínez-Salamanca J.I.¹, Martínez-Salamanca E.², La Fuente J.², Pepe-Cardoso A.², Louro N.², Carballido J.A.¹, Angulo J.²
Institutes: ¹Hospital Universitario Puerta de Hierro-Majadahonda, Dept. of Urology, Majadahonda, Spain, ²Hospital Universitario Ramón Y Cajal, IRYCIS, Madrid, Spain

Restoration of erectile function with intracavernous injections of smooth muscle progenitor cells after bilateral cavernous nerve injury in rats
By: Chiang B.J.¹, Liao C-H.¹, Chiang H-S.², Wu Y-N.²
Institutes: ¹Cardinal Tien Hospital, Dept. of Urology, New Taipei City, Taiwan, ²Fu-Jen Catholic University, Dept. of Urology, New Taipei City, Taiwan

Additive pro-erectile effect of low intensity-shockwave therapy (Li-ESWT) delivered by Aries® combined with sildenafil in spontaneously hypertensive rats (SHR)
By: Assaly-Kaddoum R.², Giuliano F.¹, Compagnie S.², Bernabé J.², Behr-Roussel D.²
Institutes: ¹Université De Versailles Saint-Quentin-En-Yvelines, AP-HP Raymond Poincaré Hospital-Dept. of Neurological Rehabilitation, Garches, France, ²Université De Versailles Saint-Quentin-En-Yvelines, Pelvipharm, Montigny-Le-Bretonneux, France

Resveratrol restores erectile function in irradiated rats: Role on SIRT-1 and nNOS protein expressions
By: Şener T.E.¹, Tavukcu H.H.², Atasoy B.M.³, Cevik O.⁴, Kaya O.T.⁵, Cetinel S.⁶, Degerli A.³, Tinay I.¹, Sener G.⁵
Institutes: ¹Marmara University School of Medicine, Dept. of Urology, Istanbul, Turkey, ²Istanbul Bilim University, Istanbul Florence Nightingale Hospital, Dept. of Urology, Istanbul, Turkey, ³Marmara University, School of Medicine, Dept. of Radiation Oncology, Istanbul, Turkey, ⁴Cumhuriyet University, School of Pharmacy, Dept. of Biochemistry, Sivas, Turkey, ⁵Marmara University, School of Pharmacy, Dept. of Pharmacology, Istanbul, Turkey, ⁶Marmara University, School of Medicine, Dept. of Histology & Embryology, Istanbul, Turkey

Role of PI3K/AKT in the erectile dysfunction from metabolic syndrome rats
Institutes: Tongji Hospital of Tongji Medical College, Huazhong University of Science and Technology, Dept. of Urology, Wuhan, China

Activation of Nrf2 improves endothelial function in corpus cavernosum from aged rats and in corpus cavernosum and penile arteries from ED patients
By: Martínez-Salamanca J.I.¹, El Assar M.², Fernández A.², Sánchez-Ferrer A.², Fraile A.³, Rodríguez-Mañas L.⁴, Carballido J.A.¹, Angulo J.²
Institutes: ¹Hospital Universitario Puerta de Hierro-Majadahonda, Dept. of Urology, Majadahonda, Spain, ²Hospital Universitario Ramón Y Cajal, IRYCIS, Madrid, Spain, ³Hospital Universitario Ramón Y Cajal, Dept. of Urology, Madrid, Spain, ⁴Hospital Universitario De Getafe, Dept. of Geriatrics, Madrid, Spain

Preserved erectile function in the hyperhomocysteinaemia transgenic rat harboring human tissue kallikrein 1
Institutes: Tongji Hospital, Tongji Medical College, Huazhong University of Science and Technology, Dept. of Urology, Wuhan, China

Scientific Programme
Innovations in urodynamics and diagnostics
Poster Session 85

**Location:** Room Vienna, North Hall (Level 1)

**Chairs:** H. Hashim, Bristol (GB)
P.F.W.M. Rosier, Utrecht (NL)
A. Tubaro, Rome (IT)

**Aims and objectives of this session**
Advances and innovations in urodynamics and LUTD diagnosis are highlighted in this session.

Poster viewing of 20 minutes. Presentations will take place on stage. Standard presentations are 2 minutes in length, followed by 2 minutes for discussion.

1122
Prospective simultaneous comparison of fluid filled versus air filled pressure systems during clinical cystometry
By: Rosier P.
Institutes: UMC Utrecht, Dept. of Urology, Utrecht, The Netherlands

1123
Comparing a novel hand held device (Peritron+) to standard urodynamics in measuring intravesical pressure
By: Radomski S.¹, Ruzhynsky V.¹, Bitzos S.², Goping I.²
Institutes: ¹Toronto Western Hospital, University Health Network, Dept. of Urology, Toronto, Canada, ²Laborie Medical Technologies Canada ULC, Clinical Research, Mississauga, Canada

1125
Does videourodynamic classification depend on patient positioning in patients with stress urinary incontinence?
By: Ecclestone H., Solomon E., Pakzad M., Hamid R., Wood D., Greenwell T., Ockrim J.
Institutes: University College Hospital London, Dept. of Urology, London, United Kingdom

1126
Validation of the TOTO Flowsky® uroflowmetry device
By: Tsang W.C.¹, Raman L.², Wai Z.², Guo H.², Consigliere D.², Chiong E.²
Institutes: ¹NUHS National University Health System, Dept. of Urology, Singapore, Singapore, ²National University Health System, Dept. of Urology, Singapore, Singapore

1127
Routine enema before urodynamics has no impact on the quality of abdominal pressure curves: Results of a prospective controlled study
By: Peyronnet B.¹, Rigole H.², Damphousse M.², Senal N.², Brochard C.³, Manunta A.¹, Kerdraon J.², Tondut L.¹, Alimi Q.¹, Hascoet J.¹, Siproudhis L.², Bonan I.²
Institutes: ¹CHU Rennes, Dept. of Urology, Rennes, France, ²CHU Rennes, Dept. of Physical Medicine and Rehabilitation, Rennes, France, ³CHU Rennes, Dept. of Urology, Maastricht, The Netherlands

1128
Brain areas involved in urinary urge sensation using 7 Tesla functional magnetic resonance imaging of the human brain
By: Rahnama'i M.S.¹, Van Den Hurk J.², Drossaerts J.³, Koeveringe G.³
Institutes: ¹Maastricht UMC+, Dept. Urology, Maastricht, The Netherlands, ²Scannexus, Scannexus, Maastricht, The Netherlands, ³Maastricht UMC+, Dept. of Urology, Maastricht, The Netherlands

1129
Concordance of urodynamic definitions of female bladder outlet obstruction
By: Solomon E., Yasmin H., Duffy M., Malde S., Ockrim J., Greenwell T.
Institutes: University College London Hospital, Dept. of Urology, London, United Kingdom
A wearable biosensor for the bladder: Study of awake bladder urodynamics in large animal model
By: Soebadi M.A.¹, Bakula M.², Weydts T.², Van Der Aa F.³, Puers R.², De Ridder D.³
Institutes: ¹Universitas Airlangga, Dept. of Urology, Surabaya, Indonesia, ²KU Leuven, ESAT-MICAS, Leuven, Belgium, ³KU Leuven, Dept. of Development and Regeneration, Leuven, Belgium

Anterior pelvic prolapse evaluation by dynamic MRI and ultrasound. Clinical correlation with Pop-q staging system
Institutes: Hospital General Universitario, Dept. of Urology, Valencia, Spain

Comparison of neurogenic lower urinary tract dysfunctions in open vs. closed spinal dysraphism: Results observed in a prospective cohort of 395 patients
By: Peyronnet B.¹, Brochard C.², Hascoet J.¹, Jezequel M.³, Menard H.³, Senal N.⁴, Bonan I.⁴, Siproudhis L.², Kerdraon J.⁴, Game X.³, Manunta A.¹

Neurogenic detrusor overactivity leak-point pressure (NDO-LPP), urodynamic findings and vesicoureteral reflux in patients with spinal cord injury (SCI)
By: Topazio L.¹, Amato I.¹, Iacovelli V.¹, Miano R.¹, D'Amico A.², Vespasiani G.¹, Finazzi Agrò E.¹
Institutes: ¹Policlinico Tor Vergata Roma, Dept. of Experimental Medicine and Surgery, Rome, Italy, ²Fondazione Santa Lucia, Neuro-Urology, Rome, Italy

Development of new and non-invasive diagnostic markers on urothelial cells in voided urine for the lower urinary tract symptoms/lower urinary tract dysfunction
By: Shimura H.¹, Ihara T.¹, Mochizuki T.¹, Imai Y.¹, Kira S.¹, Nakagomi H.¹, Sawada N.¹, Mitsui T.¹, Takeda M.¹, Miyamoto T.²
Institutes: ¹University of Yamanashi, Dept. of Urology, Chuo-City, Japan, ²Fujiyoshida Municipal Medical Center, Dept. of Urology, Fujiyoshida-City, Japan
**How to optimize kidney transplantation**

**Poster Session 86**

**Monday, 27 March**
**15:45 - 17:15**

**Location:** Room London, North Hall (Level 1)

**Chairs:**
- A.J. Figueiredo, Coimbra (PT)
- E. Lledó García, Madrid (ES)
- J.D. Olsburgh, London (GB)

**Aims and objectives of this session**
To discuss surgical results of kidney transplantation including robot-assisted kidney transplantation.

**Poster viewing of 20 minutes.** Presentations will take place on stage. Standard presentations are 2 minutes in length, followed by 2 minutes for discussion. Extended presentations (*) are 3 minutes in length, followed by 3 minutes for discussion.

*1136

**Robot assisted kidney transplantation: A centres first experiences**
**By:** Tugcu V.¹, Sahin S.¹, Atar F.A.¹, Yavuzsan A.H.¹, Eksi M.¹, Sener N.C.², Akbay F.G.², Apaydın S.²

**Institutes:** Bakırköy Dr. Sadi Konuk Training and Research Hospital, Dept. of Urology, Istanbul, Turkey, ¹Bakırköy Dr. Sadi Konuk Training and Research Hospital, Dept. of Nephrology, Istanbul, Turkey, ²Adana Numune Training and Research Hospital, Dept. of Urology, Adana, Turkey

1138

**Robotic kidney transplantation: European one-year data**
**By:** Breda A.¹, Territo A.¹, Gausa L.¹, Decaestecker K.², Stöckle M.³, Fornara P.⁴, Olsburgh J.⁵, Siena G.⁶, Doumerc N.⁷

**Institutes:** Fundació Puigvert, Dept. of Urology, Barcelona, Spain, ²Ghent University Hospital, Dept. of Urology, Ghent, Belgium, ³University Saarland, Dept. of Urology, Homburg, Germany, ⁴University Hospital Halle (Saale), Dept. of Urology, Halle, Germany, ⁵Guy’s Hospital, Dept. of Renal Transplantation and Pathology, London, United Kingdom, ⁶University of Florence, Careggi Hospital, Dept. of Urology, Florence, Italy, ⁷University Hospital of Rangueil, Dept of Urology and Renal Transplantation, Toulouse, France

1140

**Renal graft implantation on vascular prothesis: A large multicenter study**
**By:** Nedelec M., Glemain P., Chowaniec Y., Gueudry P., Robine E., Madec F.X., Lefèvre M., Rigaud J., Karam G., Branchereau J.

**Institutes:** CHU Nantes, Dept. of Urology, Nantes, France

1141

**Long term follow up of patients performed enterocystoplasty and ureterocystoplasty before kidney transplantation: A single center experience**
**By:** Mahdavi Zafarghandi M.R., Tavakkoli M., Ghoreifi A., Mahdavi Zafarghandi M.

**Institutes:** Mashhad University of Medical Sciences, Dept. of Urology, Mashhad, Iran

1142

**Kidney transplantation in patients with bladder augmentation: Long term outcomes**
**By:** Yamaçake K., Piovesan A., Falci R., Messi G., Kanashiro H., Antonopoulos I., Nahas W.

**Institutes:** University of Sao Paulo, Dept. of Urology, Sao Paulo, Brazil

1143

**Safety of dual kidney transplantation compared to single kidney transplantation from expanded criteria donors: A single center cohort of 39 recipients**
**By:** Mendel L., Yandza T., Albano L., Jourdan J., Quintens H., Tibo B., Durand M., Amiel J., Chevallier D.

**Institutes:** University Hospital of Nice, Dept. of Urology, Nice, France, ²University Hospital of Nice, Dept. of Nephrology, Nice, France
Kidney transplantation with grafts from old donors: Is there a difference in term of complications and survival outcomes?
By: Medina Polo J.¹, Sopeña-Sutil R.¹, Benítez-Sala R.¹, De La Rosa-Kehrmann F.¹, Paamplona-Casamayor M.¹, Rodríguez-Antolín A.¹, Duarte-Ojeda J.M.¹, Tejido-Sánchez A.¹, Villacampa-Aubá F.¹, Alonso-Isa M.¹, Justo-Quintas J.¹, Gil-Moradillo J.¹, Andrés-Belmonte A.², Passas-Martínez J.B.¹
Institutes: Hospital Universitario 12 de Octubre, Dept. of Urology, Madrid, Spain, ²Hospital Universitario 12 de Octubre, Dept. of Nephrology-Transplant Coordination, Madrid, Spain

Does nighttime renal graft increases the risk of post-operative complications?
Institutes: University Hospital of Nice, Dept. of Nice, Nice, France

Comparison of DCE-MRI renography, SPECT renography and endogenous creatinine clearance rate in kidney transplant recipients
By: Tao J., Tan R., Han Z., Ju X., Zhou W., Zhang Y., Gu M.
Institutes: The First Affiliated Hospital of Nanjing Medical University, Dept. of Urology, Nanjing, China

Robotic renal transplant with more than one year follow up: Preliminary results
By: Bruyere F.¹, Brichart N.¹, Boutin J.M.¹, Pradere B.¹, Faivre D’Arcier B.¹, Buchler M.²
Institutes: ¹CHRU De Tours - Hôpital Bretonneau, Dept. of Urology, Tours, France, ²CHU Toulouse, Dept. of Nephrology, Tours, France

Feasibility and perioperative outcomes of robot-assisted renal transplantation: An initial experience
By: Pradere B.¹, Lesourd M.¹, Roumiguié M.¹, Beauval J.B.¹, Binhaazaa M.¹, Rischmann P.¹, Soulié M.¹, Kamar N.², GAME X.¹, Sallusto F.¹, Doumerc N.¹
Institutes: ¹CHU Toulouse, Dept. of Urology, Toulouse, France, ²CHU Toulouse, Dept. of Nephrology, Toulouse, France

Renal transplantation in obese recipients: Could robot-assisted surgery become a real alternative?
By: Pradere B.¹, Lesourd M.², Beauval J.B.², Roumiguié M.², Binhaazaa M.², Rischmann P.², Soulié M.², Gamé X.², Sallusto F.², Doumerc N.²
Institutes: ¹Chu Toulouse, Dept. of Urology, Toulouse, France, ²CHU Toulouse, Dept. of Urology, Toulouse, France

First laparoscopic kidney transplantation in Turkey
By: Özden E.¹, Yakupoglu Y.K.¹, Oner S.¹, Dilek M.³, Bostancı Y.¹, Sarıkaya S.¹
Institutes: ¹Ondokuz Mayis University, Dept. of Urology, Samsun, Turkey, ²Ondokuz Mayis University, Dept. of Nephrology, Samsun, Turkey
Aims and objectives of this session
To assess the functional results of various bladder reconstruction techniques.

Poster viewing of 20 minutes. Presentations will take place on stage. Standard presentations are 2 minutes in length, followed by 2 minutes for discussion.

1147 Ureteric injury is rarer than previously reported in association with developed world vesico-vaginal fistulae
Institutes: University College London Hospital, Dept. of Urology, London, United Kingdom

1148 Attempted nerve sparing has a lifelong impact on urinary continence in patients with an orthotopic bladder substitute
By: Furrer M.A., Gross T., Thalmann G., Studer U., Nguyen D.
Institutes: University Hospital Bern, Dept. of Urology, Bern, Switzerland

1149 Functional outcomes after radical cystectomy with ileal neobladder
Institutes: Ruhr-University Bochum, Marien-Hospital Herne, Herne, Germany, Brigham and Women's Hospital, Harvard Medical School, Boston, United States of America, Ruhr-University Bochum, Marien-Hospital Herne, Dept. of Urology, Herne, Germany

1150 Functional outcomes of Turin pouch: A novel ileocecal cutaneous continent urinary diversion
By: Muto G., Altobelli E., Mastroianni R., Giacobbe A., Castelli E., Papalia R.
Institutes: Campus Bio-Medico University, Dept. of Urology, Rome, Italy, San Giovanni Bosco Hospital, Dept. of Urology, Turin, Italy

1151 Is the rectosigmoid-pouch (Mainz-Pouch-II) still a valid option for children and adolescents?
By: Huck N.E., Ewald S., Neisius A., Thüroff J., Stein R.
Institutes: UMM Universitätsmedizin Mannheim, Dept of Urology, Mannheim, Germany, Universitätsmedizin Mainz, Dept of Urology, Mainz, Germany, UMM Universitätsmedizin Mannheim, Zentrum für Kinder- und Jugendurologie, Mannheim, Germany

1152 Continent ileovesicostomy after bladder neck closure as salvage procedure for intractable incontinence
By: Kranz J., Anheuser P., Rausch S., Fechner G., Braun M., Müller S., Steffens J., Kälble T.
Institutes: St.-Antonius-Hospital Eschweiler, Dept. of Urology and Pediatric Urology, Eschweiler, Germany, Albertinen Krankenhaus, Dept. of Urology, Hamburg, Germany, Universitätsklinikum...
Tübingen, Dept. of Urology, Tübingen, Germany, Fachartzentrum Euskirchen, Dept. of Urology, Euskirchen, Germany, Klinikum Leverkusen, Dept. of Urology, Leverkusen, Germany, Universitätsklinikum Bonn, Clinic and Polyclinic for Urology and Pediatric Urology, Bonn, Germany, Klinikum Fulda, Dept. of Urology and Pediatric Urology, Fulda, Germany

1153

**Pregnancy after urinary diversion at young ages: Risks and outcome**

By: Huck N.F.¹, Schweizerhof S.², Honeck P.¹, Neisius A.², Thüroff J.¹, Stein R.³

Institutes: UMM Universitätsmedizin Mannheim, Klinik für Urologie, Mannheim, Germany, Universitätsmedizin Mainz, Klinik für Urologie, Mainz, Germany, UMM Universitätsmedizin Mannheim, Zentrum Für Kinder- Und Jugendurologie, Mannheim, Germany

1154

**Managing pregnancy in those who have undergone complex urological reconstruction**

By: Rajendran S.¹, Sihra N.¹, O’Brien P.², Wood D.¹

Institutes: University College London Hospital, Dept. of Urology, London, United Kingdom, University College London Hospital, Dept. of Obstetrics and Gynaecology, London, United Kingdom

1155

**Does the use of recreational ketamine pose a challenge on bladder reconstruction?**

By: Sihra N., Rajendran S., Ockrim J., Wood D.

Institutes: University College London Hospital, Dept. of Urology, London, United Kingdom

1156

**A step toward scarless surgery: Robot-assisted laparoendoscopic single-site versus mini-laparoscopic pyeloplasty**


Institutes: San Luigi Hospital, Dept. of Urology, Turin, Italy

1157

**Chemical ablation of the bladder urothelium and intestinal de-epithelialization and its effect on mucous secretion in augmentation cystoplasty: An experimental study**

By: Abou Hashem S.

Institutes: Zagazig University Hospital, Dept. of Urology, Zagazig, Egypt

V81

**The novel technique of pelvic organ prolapse treatment: Apical sling and subfascial colporrhaphy**

By: Shkarupa D., Pisarev A., Zaytseva A., Shapovalova E., Kubin N.

Institutes: University Clinic of Saint Petersburg State University, Dept. of Urology, Saint-Petersburg, Russia

17:02 - 17:09

**Summary**

E. Chartier-Kastler, Paris (FR)
Upper urinary tract tumor: Outcomes after radical surgery & peri-operative chemotherapy

Poster Session 88

Location: Room Munich, North Hall (Level 1)
Chairs: S. Lerner, Houston (US)
         E. Xylinas, Paris (FR)

Aims and objectives of this session
To date, radical surgery represents the only potentially curable therapeutic intervention for patients with urothelial carcinoma of the upper tract (UTUC). Although the role of lymphadenectomy in these tumors has not yet been clarified, recent evidence has shown that in patients with locally advanced tumors, it improves staging and consequently could help in selecting patients for adjuvant chemotherapy. UTUC and bladder carcinomas, are considered to be relatively chemosensitive. In fact, most of the data regarding the clinical efficacy of chemotherapy in the neoadjuvant and adjuvant settings are based on outcomes from the treatment of bladder UC. Contrary to what has been demonstrated for bladder cancer, there have been no convincing reported effects of neoadjuvant chemotherapy for UTUCs. Adjuvant chemotherapy achieves a remission rate of up to 50% but has minimal impact on survival. Systemic recurrences are common in this disease, however, and it is therefore reasonable to consider perioperative chemotherapy in an effort to decrease a patient’s risk of recurrence. The aim of this session is to discuss modern outcomes after radical nephroureterectomy and perioperative chemotherapy.

Poster viewing of 20 minutes. Presentations will take place on stage. Standard presentations are 2 minutes in length, followed by 2 minutes for discussion. Extended presentations (*) are 3 minutes in length, followed by 3 minutes for discussion.

1158 Effectiveness of adjuvant chemotherapy after radical nephroureterectomy for locally advanced and/or positive regional lymph node upper tract urothelial carcinoma
By: Seisen T.¹, Krasnow R.², Bellmunt J.³, Roupert M.¹, Leow J.¹, Lipsitz S.¹, Vetterlein M.¹, Preston M.¹, Hanna N.¹, Kibel A.¹, Sun M.¹, Choueiri T.², Trinh Q-D.¹, Chang S.L.¹
Institutes: ¹Brigham and Women Hospital, Dept. of Urology, Boston, United States of America,
²Dana Farber Cancer Institute, Dept. of Genito Urinary Medical Oncology, Boston, United States of America,
³Hôpitaux Universitaires La Pitié-Salpêtrière, Dept. of Urology, Paris, France

1159 Integrated comprehensive genomic characterization of upper tract urothelial carcinoma (UTUC)
By: Moss T.², Qi Y.², Xi L.², Peng B.², Mosqueda M.², Guo C.², Ittman M.², Wheeler D.², Matin S.², Lerner S.¹
Institutes: ¹Baylor College of Medicine, Scott Dept. of Urology, Houston, United States of America,
²Baylor College of Medicine, Human Genome Sequencing Center, Houston, United States of America,
³MD Anderson Cancer Center, Dept. of Bioinformatics and Computational Biology, Houston, United States of America,
⁴MD Anderson Cancer Center, Dept. of Pathology, Houston, United States of America,
⁵MD Anderson Cancer Center, Institute for Personalized Cancer Therapy, Houston, United States of America,
⁶MD Anderson Cancer Center, Dept. of Radiation Oncology, Houston, United States of America

1160 Perioperative chemotherapy does not improve disease free survival in upper tract urothelial carcinoma: A population based analysis
By: Goldberg H., Klaassen Z., Chandrasekar T., Hamilton R., Kulkarni G., Fleshner N.
Institutes: Princess Margaret Hospital, Division of Urology, Department of Surgical Oncology, Toronto, Canada
Association of PD-L1 expression with cancer-specific survival in upper tract urothelial carcinoma
By: Zhang B.1, Yu W.1, Feng X-R.2, Zhao Z.1, Fan Y.1, Meng Y-S.1, Hu S.1, Cui Y.1, He Q.1, Zhang H.3, Li D.3, Zhou L-Q.1, He Z-S.1, Jin J.1, Han W-K.1
Institutes: 1Peking University First Hospital, Dept. of Urology, Beijing, China, 2Peking University First Hospital, Dept. of Geriatrics, Beijing, China, 3Peking University First Hospital, Dept. of Pathology, Beijing, China

Comparing oncological outcomes of laparoscopic versus open nephroureterectomy for the treatment of upper tract urothelial carcinoma: A propensity match analysis
By: Moschini M.1, Seisen T.2, Roupret M.3, Foerster B.1, Abufaraj M.1, Colin P.3, De La Taille A.4, Peyronnet B.5, Bensalah K.5, Herout R.6, Wirth M.P.6, Novotny V.6, Chlosta P.7, Bianchi M.8, Briganti A.9, Romeo G.10, Simone G.10, Gallucci M.10, Matsumoto K.11, Karakiewicz P.12, Shariat S.1
Institutes: 1Medical University of Vienna, Dept. of Urology, Vienna, Austria, 2Pitié-Salpêtrière, Assistance-Publique Hôpitaux De Paris, Dept. of Urology, Paris, France, 3Hôpital Privé De La Louvière, Générale De Santé, Dept. of Urology, Lille, France, 4Hospital Mondor, Dept. of Urology, Creteil, France, 5CHU Rennes, Dept. of Urology, Rennes, France, 6Technische Universität Dresden, Dept. of Urology, Dresden, Germany, 7Jagiellonian University, Dept. of Urology, Krakow, Germany, 8Urological Research Institute, Vita-Salute University, San Raffaele Scientific, Dept. of Urology, Milan, Italy, 9Urological Research Institute, Vita-Salute University, San Raffaele Scientific, Dept. of Urology, Milan, Italy, 10Regina Elena National Cancer Institute, Dept. of Urology, Rome, Italy, 11Kitasato University School of Medicine, Dept. of Urology, Kanagawa, Japan, 12University of Montreal, Dept. of Urology, Montreal, Canada

Prognostic impact of primary tumor location in advanced urothelial tract cancer (UCC); a pooled analysis of EORTC 30924, 30986, and 30987 trials
By: Moschini M.2, Shariat S.3, Roupret M.4, De Santis M.5, Bellmunt J.6, Sternberg C.7, Tombal B.1, Collette L.8
Institutes: 1Cliniques Universitaires Saint-Luc, Dept. of Urology, Brussels, Belgium, 2Vita Salute San Raffaele, Dept. of Urology, Milan, Italy, 3Medical University Vienna, Dept. of Urology, Vienna, Austria, 4Hôpital Pitié-Salpêtrière, Dept. of Urology, Paris, France, 5University of Warwick, Cancer Research Center, Coventry, United Kingdom, 6Dana-Farber Cancer Institute, Dept. of Medical Oncology, Harvard, United States of America, 7San Camillo and Forlanini Hospitals, Dept. of Medical Oncology, Rome, Italy, 8EORTC, Dept. of Statistics, Brussels, Belgium

Trends of lymphadenectomy in upper tract urothelial carcinoma patients treated with radical nephroureterectomy: The impact of surgical technique
By: Moschini M.1, Seisen T.2, Roupret M.3, Colin P.3, De La Taille A.4, Peyronnet B.5, Bensalah K.5, Foerster B.1, Herout R.6, Abufaraj M.1, Wirth M.P.6, Novotny V.6, Chlosta P.7, Bandini M.8, Briganti A.9, Simone G.9, Gallucci M.9, Romeo G.9, Matsumoto K.10, Karakiewicz P.11, Shariat S.1
Institutes: 1Medical University of Vienna, Dept. of Urology, Vienna, Austria, 2Pitié-Salpêtrière, Assistance-Publique Hôpitaux De Paris, Dept. of Urology, Paris, France, 3Hôpital Privé De La Louvière, Générale De Santé, Dept. of Urology, Lille, France, 4Hospital Mondor, Dept. of Urology, Creteil, France, 5CHU Rennes, Dept. of Urology, Rennes, France, 6Technische Universität Dresden, Dept. of Urology, Dresden, Germany, 7Jagiellonian University, Dept. of Urology, Krakow, Poland, 8Vita-Salute University, San Raffaele Scientific, Dept. of Urology, Milan, Italy, 9Regina Elena National Cancer Institute, Dept. of Urology, Rome, Italy, 10Kitasato University School of Medicine, Dept. of Urology, Kanagawa, Japan, 11University of Montreal, Dept. of Urology, Montreal, Canada

Clinical benefit of platinum-based neoadjuvant chemotherapy for locally advanced upper tract urothelial carcinoma
By: Hatakeyama S., Hosogoe S., Kusaka A., Hamano I., Imai A., Yoneyama T., Hashimoto Y., Koie T., Ohyama C.
Institutes: Hiroshima University Graduate School of Medicine, Dept. of Urology, Hiroshima, Japan

Significance of butyrylcholinesterase before chemotherapy as an independent predictor of overall survival in patients with advanced upper-tract urothelial cancer
By: Yoneyama T., Oikawa M., Hagiwara K., Toshikazu T., Narita T., Imanishi K., Yoneyama T., Mori
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1000 retroperitoneoscopic procedures of the upper urinary tract: Analysis of complications
Institutes: CHU Henri Mondor, Dept. of Urology, Créteil, France

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Comparative effectiveness of different surgical approaches for nephro-uretrectomy for the treatment of upper tract urothelial carcinoma
By: Hanna N., Ingham M., Seisen T., Chang S.
Institutes: Brigham and Women’s Hospital, Harvard Medical School, Dept. of Urology, Boston, Canada

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Impact of adjuvant chemotherapy in high-risk patients with upper tract urothelial carcinoma treated with radical nephroureterectomy: A multi-institutional retrospective study
By: Ikeda M., Matsumoto K., Hirayama T., Kobuchi D., Murakami Y., Matsuda D., Okuno N., Utsumomiya T., Taoka Y., Irie A., Iwamura M.
Institutes: 1Kitasato University School of Medicine, Dept. of Urology, Kanagawa, Japan, 2Kitasato University Medical Center, Dept. of Urology, Saitama, Japan, 3Kanagawa Prefectural Federation of Agricultural Cooperatives For Health and Welfare Sagamihara Kyodo, Dept. of Urology, Kanagawa, Japan, 4Higashiymamoto Hospital, Dept. of Urology, Tokyo, Japan, 5National Hospital Organization Sagamihara Hospital, Dept. of Urology, Kanagawa, Japan, 6Kitasato University Kitasato Institute Hospital, Dept. of Urology, Tokyo, Japan

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Ability of early ureteral ligation to prevent intravesical recurrence after radical nephroureterectomy for upper urinary tract urothelial carcinoma: A prospective single-arm multicenter clinical trial
Institutes: 1Tohoku University Graduate School Of Medicine, Dept. of Urology, Sendai, Japan, 2Japan Community Health Care Organization Sendai Hospital, Dept. of Urology, Sendai, Japan, 3Sendai City Hospital, Dept. of Urology, Sendai, Japan, 4Osaka Citizen Hospital, Dept. of Urology, Osaka, Japan, 5Yamagata Prefectural Central Hospital, Dept. of Urology, Yamagata, Japan, 6Kesennuma City Hospital, Dept. of Urology, Kesennuma, Japan, 7Miyagi Cancer Center, Dept. of Urology, Natori, Japan, 8Hachinohe City Hospital, Dept. of Urology, Hachinohe, Japan, 9Tohoku Rosai Hospital, Dept. of Urology, Sendai, Japan, 10Sendai Medical Center, Dept. of Urology, Sendai, Japan, 11Senenrihu Hospital, Dept. of Urology, Rifu, Japan, 12Oguchi Central Hospital, Dept. of Urology, Yuzawa, Japan, 13Japanese Red Cross Sendai Hospital, Dept. of Urology, Sendai, Japan, 14Shirakawa Kosei General Hospital, Dept. of Urology, Shirakawa, Japan, 15Iwate Prefectural Iwai Hospital, Dept. of Urology, Ichinoseki, Japan

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Robotic radical nephroureterectomy is associated with poorer oncological outcomes than open and laparoscopic radical nephroureterectomy
Institutes: 1CHU Rennes, Dept. of Urology, Rennes, France, 2OH Orleans, Dept. of Urology, Orleans, France, 3CHU Tours, Dept. of Urology, Tours, France, 4Pitié Salpêtrière Hospital, Dept. of Urology, Paris, France, 5CHU Lille, Dept. of Urology, Lille, France, 6Pitié Salpêtrière Hospital, Dept. of Urology, Paris, France
# Stones

**Plenary Session 07**

**Tuesday, 28 March**  
08:00 - 13:15

**Location:** eURO Auditorium (Level 0)

**Chairs:**  
T. Knoll, Sindelfingen (DE)  
A. Stenzl, Tübingen (DE)

## Aims and objectives of this session

This plenary covers all aspects of urinary stone disease, from epidemiology and pathogenesis to the whole range of interventions. Well-known experts in the field will present what is state-of-the-art and discuss what is on the horizon.

During the plenary sessions, French and Spanish translation will be provided. Please collect your headset in the session room prior to the start of the session and return it after the session.

### 08:00 - 08:15

**State-of-the-art lecture**  
The Swiss kidney stone cohort: Unraveling the cause of renal stones  
B. Roth, Berne (CH)

### 08:15 - 08:30

**State-of-the-art lecture**  
Stones and cardiovascular disease: More than a coincidence?  
R.J. Unwin, London (GB)

### 08:30 - 09:00

**Debate**  
The patient in pain: How to approach the ureteral stone?  
**Moderator:** T. Knoll, Sindelfingen (DE)

- **Emergency ESWL**  
  S. Picozzi, Milan (IT)

- **Emergency URS**  
  J. Galan Llopis, Alicante (ES)

- **Alpha-blockers**  
  T.B. Lam, Aberdeen (GB)

- **Stenting**  
  A.J. Gross, Hamburg (DE)

### 09:00 - 09:15

**Confederación Americana de Urología (CAU) lecture**  
Percutaneous nephrolithotomy in high-volume centers: All lessons learnt?  
J. Gutierrez, Winston Salem (US)

### 09:15 - 09:45

**Debate**  
Small asymptomatic renal stones: Treat or observe?
Moderator: O. Traxer, Paris (FR)

09:15 - 09:25
Treat
M. Monga, Cleveland (US)

09:25 - 09:35
Observe
A. Miernik, Freiburg (DE)

09:35 - 09:45
Discussion

09:45 - 10:00
Urological Association of Asia (UAA) lecture Complex stone cases
M.S. Agrawal, Agra (IN)

10:00 - 10:45
Case discussion Complex cases made simple
Moderator: K. Sarica, Istanbul (TR)

10:00 - 10:45
Case presenter and challenger
P.J.S. Osther, Fredericia (DK)

10:00 - 10:45
Discussants:
M.R. Desai, Naidad (IN)
G. Giusti, Milan (IT)
S. Lahme, Pforzheim (DE)
E. Liatsikos, Patras (GR)
B.W. Turney, Oxford (GB)

10:45 - 11:15
State-of-the-art lectures Urolithiasis 2017: New technology, same old difficulties?

10:45 - 10:52
ESWL
G.G. Tailly, Brasschaat (BE)

10:53 - 11:00
Mini and micro-PNL
U. Nagele, Hall in Tirol (AT)

11:01 - 11:08
Robotic URS
J-T. Klein

11:08 - 11:15
Lasers
P.M. Kronenberg, Lisbon (PT)

11:15 - 13:15
Souvenir session By the EAU Scientific Committee

11:15 - 11:25
Benign prostatic disease
P. Radziszewski, Warsaw (PL)

11:25 - 11:35
Prostate cancer: Early detection and screening
C.H. Bangma, Rotterdam (NL)

11:35 - 11:45
Prostate cancer: Localised and advanced disease
P. Albers, Düsseldorf (DE)

11:45 - 11:55

**Urothelial cancer**
M. Rouprêt, Paris (FR)

11:55 - 12:05

**Renal cancer and transplantation**
M-O. Grimm, Jena (DE)

12:05 - 12:15

**Systemic therapy in GU cancer**
M. De Santis, Coventry (GB)

12:15 - 12:25

**Basic science**
Z. Culig, Innsbruck (AT)

12:25 - 12:35

**Andrology**
J.O.R. Sonksen, Herlev (DK)

12:35 - 12:45

**Paediatric urology & rare diseases**
W.F.J. Feitz, Nijmegen (NL)

12:45 - 12:55

**Imaging in urology**
A. Villers, Lille (FR)

12:55 - 13:05

**Functional urology**
J.P.F.A. Heesakkers, Nijmegen (NL)

13:05 - 13:15

**Urolithiasis and endourology**
T. Knoll, Sindelfingen (DE)