Why do we form stones and how can we prevent them?

**Poster Session 01**

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

**Chairs:**
- G. Gambaro, Rome (IT)
- A. Rodgers, Cape Town (ZA)
- A. Skolarikos, Athens (GR)

**Aims and objectives of this presentation**

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.

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1. **Geographical and prevalence trends in urolithiasis in England: A ten-year review**
   - By: Ni Raghallaigh H., Ellis D., Symes A.
   - **Institutes:** Brighton & Sussex University Hospitals NHS Trust, Dept. of Urology, Brighton, United Kingdom

2. **24-hour urine parameters and body mass index in a large cohort of high risk renal stone formers patients**
   - By: Esperto F., Marangella M., Miano R., Trinchieri A.
   - **Institutes:** Sapienza University, Sant’andrea Hospital, Dept. of Urology, Rome, Italy, Mauritan’s Order Hospital, Dept. of Nephrology, Turin, Italy, Policlinico Tor Vergata Foundation, University of Rome Tor Vergata, Dept. of Urology, Rome, Italy, Lecco’s Hospital, Dept. of Urology, Lecco, Italy

3. **Twelve-hour overnight urine as a new tool to assess the urinary crystallization risk: Preliminary results**
   - By: Casasayas Carles P., Rodriguez Garcia N., Rodriguez A., Saez-Torres C., Gutierrez-Sanz-Gadea C., Grases F.
   - **Institutes:** Hospital Son Llatzer, Dept. of Urology, Palma De Mallorca, Spain, Universitat De Les Illes Balears, Laboratory of Kidney Stone Research. University Institute of Health Science Research (IUNICS-IdISPa), Palma De Mallorca, Spain

4. **Hyperuricemia or uric-acid stone; which increase the risk of renal function deterioration**
   - **Institutes:** Hirosaki University Graduate School of Medicine, Dept. of Urology, Hirosaki, Japan

5. **Urolithiasis is an independent risk factor for fracture: A nation-wide population-based and with an 8-year follow-up study**
   - **Institutes:** Taipei Veterans General Hospital, Dept. of Urology, Taipei, Taiwan, Taipei Veterans General Hospital, Dept. of Family Medicine, Taipei, Taiwan

6. **Seeking explanations for the pathogenesis of kidney stones in studies of a relatively stone-free race group**
   - By: Rodgers A.
   - **Institutes:** University of Cape Town, Dept. of Chemistry, Cape Town, South Africa

7. **Endoscopic description of renal papillary abnormalities in stone disease by flexible ureteroscopy:**

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**Scientific Programme**
A proposed classification of severity and type
By: Almeras C.1, Daudon M.2, Ploussard G.3, Gautier J.R.3, Salin A.3, Traxer O.4, Meria P.5
Institutes: Clinique Saint Jean Languedoc, Dept. of Urology, Toulouse, France, 2Tenon Hospital, Dept. of Functional Explorations, Paris, France, 3Clinique Saint Jean Languedoc, Dept of Urology, Toulouse, France, 4Tenon Hospital, Dept of Urology, Paris, France, 5Saint Louis Hospital, Dept of Urology, Paris, France

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, Klebe H.-J.2
Institutes: Klinikum Sindelfingen-Böblingen, Dept. of Urology, Sindelfingen, Germany, 2Technical University Darmstadt, Institut für Angewandte Geowissenschaften, Darmstadt, Germany, 3University Mainz, Institut für Geowissenschaften, Mainz, Germany

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

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

Characterizing the association between toll-like receptor types and nephrolithiasis with renal inflammation in an animal model
By: Ölçücü M.T.1, Teke K.2, Yalcın S.2, Olcucuoglu E.1, Caner V.6, Türk N.S.5, Tuncay O.L.4
Institutes: Agri State Hospital, Dept. of Urology, Agri, Turkey, 2Agri State Hospital, Dept. of Urology, Agri, Turkey, 3Türkiye Yuksek Ihtisas Education and Research Hospital, Dept. of Urology, Ankara, Turkey, 4Pamukkale University School of Medicine, Dept. of Urology, Denizli, Turkey, 5Pamukkale University School of Medicine, Dept. of Pathology, Denizli, Turkey, 6Pamukkale University School of Medicine, Dept. of Genetics, Denizli, Turkey

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

Adherence of cystinuric patients to medical prevention treatment and its impact on clinical outcomes
By: Young G.2, Kampantais S.1, Stasinou T.2, Bourdoumis A.3, Chow K.2
Institutes: 1Southend 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

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/Pingtung, 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, Division of Nephrology, Dept. of Internal Medicine, Kaohsiung, Taiwan, 5Kaohsiung Medical University Hospital, Kaohsiung Medical University, Dept. of Urology, Kaohsiung, Taiwan, 6Kaohsiung Municipal Hsiao-Kang Hospital, Dept. of Urology, Kaohsiung, Taiwan, 7Kaohsiung
Aims and objectives of this presentation
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.

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

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Impact of preoperative risk on metastatic progression and cancer specific death in patients with adverse pathology at radical prostatectomy
Institutes: University Medical Center, Johannes Gutenberg University, Dept. of Urology and Pediatric Urology, Mainz, Germany, University Medical Center, Dept. of Urology, Hamburg, Germany, University Medical Center, Martini-Clinic, Hamburg, Germany

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Low rate of positive surgical margins are not associated with improved the biochemical recurrence in high-risk prostate cancer patients
By: Srougi V., Sanchez-Salas R., Secin F., Baghdadi M., Nunes-Silva I., Garcia-Barreras S., Rembeyo G., Rozet F., Galiano M., Barret E., Cathelineau X.
Institutes: Institut Montsouris, Dept. of Urology, Paris, France, CEMIC and San Lazaro Foundation, Dept. of Urology, Buenos Aires, Argentina

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Association between type 2 diabetes and curative treatment in men with intermediate and high risk localised prostate cancer
By: Crawley D., Garmo H., Rudman S., Stattin P., Zethelius B., Holmberg L., Adolfsson J., Van Hemelrijck M.
Institutes: King's College London, Dept. of Cancer Epidemiology, London, United Kingdom, Guy's and St Thomas NHS Foundation Trust, Dept. of Medical Oncology, London, United Kingdom, Uppsala University, Dept. of Surgical Sciences, Uppsala, Sweden, Karolinska Institute, Dept. of Clinical Science, Intervention and Technology, Stockholm, Sweden

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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., Colicchia M., Gandaglia G., Munegato S., Fossati N., Bandini M., Stabile A.
Oncological and functional outcomes after RP for high or very high-risk prostate cancer – Predictors of early cancer specific and other cause mortality in high risk prostate cancer patients

Cytoreductive radical prostatectomy (cRP) is feasible in men with hormone-naive, metastatic prostate cancer (mPCA). By: Heidenreich A.¹, Briganti A.², Karnes J.³, Fossati N.¹, Dell’oglio P.², Suardi N.², Gronchi A.¹, Goncalves G.¹, Joniau S.³, Spahn M.⁶, Montorsi F.³, Briganti A.²

Institutes: ¹Uniklinik Köln, Dept. of Urology, Cologne, Germany, ²Vita Salute San Raffaele University, Urological Research Institute, Milan, Italy, ³Mayo Clinic, Dept. of Urology, Rochester, United States of America, ⁴University Hospital of Leuven, Dept. of Urology, Leuven, Belgium, ⁵University of Turin, Dept. of Urology, Turin, Italy, ⁶University Medical Center Eppendorf, Martini-Klinik, Hamburg, Germany

Impact of additional radiation and/or androgen deprivation therapy on functional outcomes after radical prostatectomy: Results from a large, multi-institutional analysis

By: Bianchi M.¹, Angiolilli D.¹, Cornaghi L.B.¹, Fujii H.², Fossati N.², Gandaglia G.², Jindal T.³, Joniau S.³, Menon M., Abdollah F.

Institutes: ¹ASST Papa Giovanni XXIII, Dept. of Urology, Bergamo, Italy, ²ASST Papa Giovanni XXIII, Dept. of Pathology, Bergamo, Italy, ³University of Turin, Dept. of Urology, Turin, Italy

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

By: Roscigno M.¹, Da Pozzo L.F.¹, Da Pozzo L.F.¹

Institutes: ¹ASST Papa Giovanni XXIII, Dept. of Urology, Bergamo, Italy, ²ASST Papa Giovanni XXIII, Dept. of Pathology, Bergamo, Italy
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**

**Friday, 24 March**

**09:30 - 13:00**

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

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

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<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>&lt;br&gt;J. Gutierrez, Winston Salem (US)&lt;br&gt;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>&lt;br&gt;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>&lt;br&gt;A. Briganti, Milan (IT)</td>
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<td>10:15 - 10:35</td>
<td><strong>Active surveillance for prostate cancer, whom and how?</strong>&lt;br&gt;C.H. Bangma, Rotterdam (NL)</td>
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<td>10:35 - 10:55</td>
<td><strong>Cytoreductive nephrectomy in kidney cancer, is still important?</strong>&lt;br&gt;P.F.A. Mulders, Nijmegen (NL)</td>
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<td>10:55 - 11:15</td>
<td><strong>Has robotic surgery made a real difference in cystectomy?</strong>&lt;br&gt;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>&lt;br&gt;A. Breda, Barcelona (ES)</td>
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<td>11:35 - 11:55</td>
<td><strong>Testosterone controversy, current guidelines</strong>&lt;br&gt;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>&lt;br&gt;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>&lt;br&gt;J. Angulo Cuesta, Madrid (ES)</td>
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<td>12:35 - 12:55</td>
<td><strong>Complex stone cases, guidelines base discussion</strong></td>
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<td>12:35 - 12:55</td>
<td><strong>Presenter:</strong>&lt;br&gt;J. Gutierrez, Winston Salem (US)</td>
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<td>12:35 - 12:55</td>
<td><strong>Discussants:</strong>&lt;br&gt;N. Bernardo, Buenos Aires (AR)&lt;br&gt;M. Cepeda, Valladolid (ES)</td>
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<td>12:55 - 13:00</td>
<td><strong>EAU Información a Pacientes</strong>&lt;br&gt;J.L. Vásquez, Copenhagen (DK)</td>
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<td>09:30 - 09:35</td>
<td>Welcome and introduction</td>
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<td>09:35 - 09:45</td>
<td>EAU patient information - Chinese translation</td>
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<td>09:45 - 10:15</td>
<td>Management of renal stones</td>
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<td>09:45 - 09:55</td>
<td>Innovative concepts in percutaneous nephrolithotomy: Lessons learned from 1200 cases</td>
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<td>09:55 - 10:05</td>
<td>Complications after RIRS</td>
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<td>10:05 - 10:15</td>
<td>Super-Mini PCNL for the treatment of renal stone</td>
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<td>10:15 - 10:20</td>
<td>Discussion</td>
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<td>10:20 - 10:55</td>
<td>Uro-oncology</td>
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<td>10:20 - 10:30</td>
<td>The emergence of common actionable targets for cancer metastasis evolution: Precision medicine in urological cancer</td>
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<td>10:30 - 10:40</td>
<td>Genomic architecture and evolution of clear cell renal cell carcinomas defined by multiregion sequencing</td>
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<td>10:40 - 10:50</td>
<td>2017: Updates in China prostate cancer consortium</td>
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<td>10:50 - 10:55</td>
<td>Discussion</td>
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<td>10:55 - 11:35</td>
<td>Endourology</td>
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<td>Moderators:</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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<td>10:55 - 11:05</td>
<td>Laparoendoscopic Single-Site (LESS) retroperitoneal approach for nephroureterectomy</td>
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<td>11:05 - 11:15</td>
<td>Retroperitoneal versus anterior approach in kidney cancer: When and why</td>
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<td>11:15 - 11:25</td>
<td>Sun's Tip Flexible Ureteroscope in the application of upper urinary tract surgeries</td>
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<td>11:25 - 11:35</td>
<td>Discussion</td>
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<td>11:35 - 12:15</td>
<td>Urothelial cancer/Renal cancer</td>
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<td>Moderators:</td>
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<td>A. Alcaraz, Barcelona (ES)</td>
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<td>Y.S. Pu, Taipei (TW)</td>
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<td>11:35 - 11:45</td>
<td>2017: Updates on aristolochic acid carcinogenesis</td>
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<td>11:45 - 11:55</td>
<td>Renal biopsy: More dogma belied</td>
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<td>11:55 - 12:05</td>
<td>2017: Updates in Upper Urothelial Cancer in China</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>
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<td>Moderators:</td>
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<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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12:15 - 12:25  
**Urinating in the standing position: A feasible alternative for women with knee osteoarthritis or detrusor underactivity**  
C.L. Chou, Taichung (TW)

12:25 - 12:35  
**Intradetrusor onabotulinumtoxinA injections: The best technique**  
T.M. Kessler, Zurich (CH)

12:35 - 12:45  
**Transperineal bulbo-prostatic anastomosis in patients with simple traumatic posterior urethral strictures: A 15 years retrospective study from a referral urethral center**  
F. Qiang, Shanghai (CN)

12:45 - 12:55  
**Discussion**

12:55 - 13:00  
**Conclusion**  
T.L. Lin, Taipei (TW)  
F. Montorsi, Milan (IT)  
Y-H. Sun, Shanghai (CN)
# 4th ESO Prostate Cancer Observatory: Innovation and care in the next 12 months

**Special session**

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

**Chairs:** H. Van Poppel, Leuven (BE)  
R. Valdagni, Milan (IT)

## Aims and objectives of this presentation

ESO Observatories are high level sessions organized 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 take-home concise message with a 7 minute presentation followed by 3 minutes of discussion. The forecast will be discussed by the panel.

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<thead>
<tr>
<th>Time</th>
<th>Session Title</th>
<th>Speaker(s)</th>
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</table>
| 10:00 - 10:05 | **Introduction**                                     | H. Van Poppel, Leuven (BE)  
R. Valdagni, Milan (IT) |
<p>| 10:05 - 10:15 | <strong>The researcher’s perspective</strong>                    | N. Zaffaroni, Milan (IT)   |
| 10:15 - 10:25 | <strong>The urologist’s perspective on surgery</strong>           | D. Tilki, Hamburg (DE)     |
| 10:25 - 10:35 | <strong>The urologist’s perspective on active surveillance</strong> | S. Joniau, Leuven (BE)     |
| 10:35 - 10:45 | <strong>The imaging specialist’s perspective on MRI</strong>     | C. Moore, London (GB)      |
| 10:45 - 10:55 | <strong>The pathologist’s perspective</strong>                   | T. Van der Kwast, Toronto (CA) |
| 10:55 - 11:05 | <strong>The radiation oncologist’s perspective</strong>          | M. Bolla, Grenoble (FR)    |
| 11:05 - 11:15 | <strong>The medical oncologist’s perspective</strong>            | M. De Santis, Coventry (GB) |</p>
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<thead>
<tr>
<th>Time</th>
<th>Session Title</th>
<th>Speaker(s)</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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<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: To be confirmed
        A. Stenzl, Tübingen (DE)
        M. Wirth, Dresden (DE)

Aims and objectives of this presentation
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
To be confirmed
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
To be confirmed

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)
11:55 - 12:10
Blood and urine based biomarkers
J.A. Schalken, Nijmegen (NL)

12:10 - 12:25
Tissue-based biomarkers: CCP
J. Cuzick, London (GB)

12:25 - 12:40
Imaging-based biomarkers: mpMRI
P. Albers, Düsseldorf (DE)

12:40 - 12:50
Questions and answers (Biomarkers)

12:50 - 13:20
Break

13:20 - 15:00
Management of low-risk cancer and preventive therapy

Moderator: M. Wirth, Dresden (DE)

13:20 - 13:35
Observation or active surveillance or curative treatment: What do PIVOT data tell us?
To be confirmed

13:35 - 13:50
Observation or active surveillance or curative treatment: What do SPCG-4 data tell us?
To be confirmed

13:50 - 14:05
Prospective validation of active surveillance: PRIAS
C.H. Bangma, Rotterdam (NL)

14:05 - 14:15
Questions and answers (Management of low risk cancer)

14:15 - 14:30
5-α reductase inhibitors: Do they prevent only low-grade disease and increase high-grade disease?
C.G. Roehrborn, Dallas (US)

14:30 - 14:40
Aspirin
M. Thorat, London (GB)

14:40 - 14:50
Nutraceuticals
V. Fradet, Quebec (CA)

14:50 - 15:00
Questions and answers (Preventive therapy)

15:00 - 16:00
Consensus panel discussion

Moderator: J. Cuzick, London (GB)
Joint Session of the European Association of Urology (EAU) and the Arab Association of Urology (AAU)

**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 presentation
After this session the audience will gain the knowledge about some hot topics touching the clinical practice. How to treat stress incontinence in females without the need to implant a synthetic material and how to make the successful implantation of a penile prosthesis. Management of small renal mass needs to be outlined. Locally advanced prostate cancer became a curable disease; post prostatectomy incontinence need to be verified. How posterior urethroplasty is performed successfully. Organ sparing strategy is getting wider acceptance and lastly the use of ileum in reconstructive urological procedure.

<table>
<thead>
<tr>
<th>Time</th>
<th>Session I: Andrology and female urology</th>
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| 10:30 - 10:40 | Welcome and introduction
To be confirmed
M. Wirth, Dresden (DE) |

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<tr>
<th>Time</th>
<th>Session II: Reconstructive urology</th>
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</table>
| 10:40 - 11:20 | 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 - Waab (QA) |

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<tr>
<th>Time</th>
<th>Session III: Oncology</th>
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| 11:20 - 12:05 | Use of ileum in urology
H. Abol-Enein, Mansoura (EG) |
| 11:35 - 12:05 | Postoperative urethroplasty: How I do it
To be confirmed |
| 12:05 - 12:50 | Management of small renal mass
P.F.A. Mulders, Nijmegen (NL) |
| 12:20 - 12:35 | Organ sparing surgeries (kidney, ureter, bladder)
K. Al Othman, Riyadh (SA) |
12:35 - 12:50  Locally advanced prostate cancer is a treatable disease
M. Wirth, Dresden (DE)

12:50 - 13:00  Discussion and closure
**Joint Session of the European Association of Urology (EAU) and the Maghreb Union Countries**

**Urology beyond Europe**

**Friday, 24 March**

**10:30 - 13:00**

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

**Chairs:**
- A. Belaidi, Boufarik Blida (DZ)
- A. Bouker, Tunis (TN)
- F. Cruz, Porto (PT)
- H.A. El Alj, Rabat (MA)

**Aims and objectives of this presentation**

As every year, this session is a very important opportunity which is aimed at meeting between experts EAU and Maghreb countries, for exchanging and enriching our knowledge around a very interesting scientific program of actuality.  

Thanks a lot for the invitation.  
Thank you for the organizers.  
Dr. Abdelkader. Belaidi (Algerie)

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<tr>
<th>Time</th>
<th>Session</th>
<th>Presenters</th>
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<tr>
<td>10:30 - 10:35</td>
<td>Welcome and introduction</td>
<td>F. Cruz, Porto (PT) H.A. El Alj, Rabat (MA)</td>
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<tr>
<td>10:35 - 11:00</td>
<td>BPH</td>
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<tr>
<td>10:35 - 10:50</td>
<td>TURP: Is the gold standard treatment of benign prostatic obstruction free of complications?</td>
<td>C. Djeffal, Annaba (DZ)</td>
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<tr>
<td>10:50 - 11:00</td>
<td>Is laser prostatectomy ready to prime time in BPH surgery?</td>
<td>C. Llorente, Madrid (ES)</td>
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<tr>
<td>11:00 - 11:30</td>
<td>Bladder cancer</td>
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<tr>
<td>11:00 - 11:15</td>
<td>When to switch for a cystectomy in MNIBC?</td>
<td>M. Marzouk, Rabat (MA)</td>
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<td>11:15 - 11:30</td>
<td>Lymphadenectomy in the treatment of invasive bladder tumour: Technique, extent, and oncological value</td>
<td>M. Babjuk, Prague 5 (CZ)</td>
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<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>
<td>K. Atallah, Tunis (TN)</td>
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<td>11:45 - 12:00</td>
<td>Will flexible ureteroscopy replace PCNL?</td>
<td>O. Traxer, Paris (FR)</td>
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<td>Time</td>
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<tr>
<td>12:00 - 12:30</td>
<td>Kidney cancer</td>
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<td>12:00 - 12:15</td>
<td>Which are my limits for a partial nephrectomy in a kidney tumour?</td>
<td>M. Lezrek, Meknes (MA)</td>
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<tr>
<td>12:15 - 12:30</td>
<td>The role of percutaneous biopsy in the management of renal tumours</td>
<td>A. Volpe, Novara (IT)</td>
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<td>12:30 - 12:55</td>
<td>OAB male LUTS</td>
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<td>12:30 - 12:40</td>
<td>Current management of OAB</td>
<td>To be confirmed</td>
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<tr>
<td>12:40 - 12:55</td>
<td>What to do if my BPH patient maintains bothersome storage LUTS</td>
<td>T. Antunes Lopes, Porto (PT)</td>
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<tr>
<td>12:55 - 13:00</td>
<td>Conclusions</td>
<td>F. Cruz, Porto (PT)</td>
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<td>To be confirmed</td>
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Joint Session of the European Association of Urology (EAU) and the Pakistan Association of Urological Surgeons (PAUS)

Urology beyond Europe

Location: Room 11, Capital suite (level 3)

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

Aims and objectives of this presentation
In this session EAU & PAUS will collaboratively endeavour to provide an overview of the latest developments in these 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
A. Mumtaz, Rahimyar Khan (PK)
C.R. Chapple, Sheffield (GB)

10:35 - 11:25
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
To be confirmed

10:55 - 11:05
Current immunosuppressive regimens in renal transplantation
J.M. Campistol, Barcelona (ES)

11:05 - 11:25
Ethical challenges in organ transplantation: Where are we in Pakistan?
A. Rizvi, Karachi (PK)

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: To be confirmed
F. Montorsi, Milan (IT)

11:40 - 11:55
Management of prostate cancer: Update
<table>
<thead>
<tr>
<th>Time</th>
<th>Event</th>
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</table>
| 11:55 - 12:10 | **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**                                   |
| 12:25 - 12:55 | **Panel:**  
H. Ather, Karachi (PK)  
F. Montorsi, Milan (IT)  
Z. Qamar, Rawalpindi (PK) |
| 12:25 - 12:40 | **Case 1**                                                            |
| 12:40 - 12:55 | **Case 2**                                                            |
| 12:55 - 13:00 | **Conclusion**  
To be confirmed  
I. Korneyev, St. Petersburg (RU) |
**Aims and objectives of this presentation**

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!

**Scientific Programme**

**Friday, 24 March**

**10:30 - 13:00**

**Welcome and introduction by chairs**

**10:35 - 10:45**

**Intraoperative tele-conferencing and tele-referral with smartphones: Evolution and current application in the Philippines**

E.A. Arada III, Metro Manila (PH)

**10:45 - 10:55**

**First 100 cases of robotic cystectomy: Hospital Kuala Lumpur, Malaysia**

M. Sundram, Petaling Jaya (MY)

**10:55 - 11:05**

**Choice of urinary diversion after radical cystectomies**

V.L. Chuyen, Ho Chi Minh City (VN)

**11:05 - 11:20**

**EAU Lecture: Continent urinary diversion: What lessons have we Learned?**

J.W. Thüroff, Mannheim (DE)

**11:20 - 11:25**

**Discussion**

**11:25 - 11:35**

**Contemporary management of elusive genitourinary tuberculosis: Asian perspective**

T. Lwin, Yangon (MM)

**11:35 - 11:45**

**RIRS to treat large kidney stones**

E. Chotikawanich, Khonkaen (TH)

**11:45 - 11:55**

**Pyeloplasty for UPJ obstruction, laparoscopy or robotic assisted**

H.D. Ngo, Ho Chi Min City (VN)

**11:55 - 12:05**

**Urethral stricture in a 100 million motorcycles-country: A multicentre study**

K. Adi, Bandung (ID)

**12:05 - 12:10**

**Discussion**

**12:10 - 12:20**

**EAU lecture: Surgery for high risk and oligometastatic prostate cancer**

M. Wirth, Dresden (DE)
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<th>Time</th>
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<tr>
<td>12:20 - 12:30</td>
<td>Updates on metastatic prostate cancer treatment and their utility in Asia</td>
<td>E. Chiong, Singapore (SG)</td>
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<td>12:30 - 12:45</td>
<td>Prostate health index for prostate cancer detection and aggressiveness in Asian patients with the 4.0 to 10.0 ng/mL range</td>
<td>B. Lojanapiwat, Chiang Mai (TH)</td>
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<tr>
<td>12:45 - 12:55</td>
<td>Discussion</td>
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<tr>
<td>12:55 - 13:00</td>
<td>Closing remarks by chairs</td>
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Extracorporeal shock wave lithotripsy

Poster Session 03

Friday, 24 March
10:45 - 12:15

Location: Room Milan, North Hall (Level 1)

Chairs: To be confirmed
To be confirmed
To be confirmed

Aims and objectives of this presentation
ESWL has been 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.

32 CT texture analysis of ex vivo renal stones predicts ease of fragmentation with shock wave lithotripsy
By: Devlies W.¹, Cui H.¹, Ravenscroft S.³, Heers H.⁴, Freidin A.⁵, Cleveland R.⁶, Turney B.¹
Institutes: University of Oxford, Oxford Stone Group, Oxford, United Kingdom, ¹KU Leuven, Faculty of Medicine, Leuven, Belgium, ³University of Oxford, Medical Sciences Division, Oxford, United Kingdom, ⁴Philipps-Universität Marburg, Dept. of Urology and Paediatric Urology, Marburg, Germany, ⁵University of Oxford, Kennedy Institute of Rheumatology, Oxford, United Kingdom

33 Predictive factors of the outcome of extracorporeal shockwave lithotripsy in the treatment of upper urinary tract stones: Evidence from a prospective study
By: Quaresima L., Pretore E., Moroni L., Galosi A.B.
Institutes: Polytechnic University of The Marche Region, Dept. of Urology, Ancona, Italy

34 Prediction for success rate of shock wave lithotripsy using mean stone density-stone heterogeneity index ratio calculating Hounsfield unit on non-contrast computed tomography
Institutes: Severance Hospital, Urological Science Institute, Yonsei University College of Medicine, Dept. of Urology, Seoul, South Korea

35 Ultrasonography is not inferior to fluoroscopy to guide extracorporeal shock waves during treatment of renal and upper ureteric calculi: A randomized prospective cohort study
By: Van Besien J., Uvin P., Merckx L.
Institutes: AZ Sint Lucas Ghent, Dept. of Urology, Ghent, Belgium

36 Pretreatment with low energy shockwaves and a 3-minute pause reduces markers of renal injury in patients undergoing extracorporeal shockwave lithotripsy
By: Ilyas R., Young G., Chow K.
Institutes: University Hospital of South Manchester NHS Foundation Trust, Dept. of Urology, Manchester, United Kingdom

37 Ultraslow High Power SWL, versus slow power ramping SWL in stones with high attenuation value
By: Al-Dessoukey A., Abdallah M., Sayed O., Abdallah R., Moussa A., Massoud A.
Institutes: Beni Suef University, Dept. of Urology, Cairo, Egypt

38 Dual shockwave and using high-flow oxygen administration by nasal cannula (HFONC) may improve lithotripsy results
By:
39

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

40

Impact of pretreatment hydronephrosis on the success rate of shock wave lithotripsy in patients with ureteral calculi

By: Chang K.D., Lee J.Y., Ham W.S., Kang D.H., Cho K.S.

Institutes: Severance Hospital, Urological Science Institute, Yonsei University College of Medicine, Dept. of Urology, Seoul, South Korea

41

Adjuvant alpha blockers to extracorporeal shock wave lithotripsy: A randomized controlled trial


Institutes: Grenoble University Hospital, Dept. of Urology, Grenoble Cedex 9, France

43

Does previous stone surgery affect the outcome of SWL treatment in adults with kidney stones?

By: Gültekin M.H., Turegun F.A., Ozkan B., Tansu N., Kendigelen P., Erozenci A., Onal B.

Institutes: 1Cerrahpasa Medical Faculty, Dept. of Urology, Istanbul, Turkey, 2Acibadem University, Dept. of Urology, Istanbul, Turkey, 3Cerrahpasa Medical Faculty, Dept. of Anesthesiology, Istanbul, Turkey

44

Does shockwave lithotripsy impair urine pH? Results of the prospective Swiss Kidney Stone Cohort register

By: Skuginna V., Mohebbi N., Fuster D., Kim M-J., Wagner C., Wuerzner G., Dhayat N., Bonny O., Roth B.

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

45

Extracorporeal shock-wave lithotripsy (ESWL) for renal stones is associated with decreased kidney function after long term follow-up


Institutes: 1University Hospital of Zurich, Dept. of Urology, Zurich, Switzerland, 2University Hospital of Zurich, Dept. of Pathology of Molecular Pathology, Zurich, Switzerland, 3University Hospital of Zurich, Horten Centre for Patient Oriented Research and Knowledge Transfer, Zurich, Switzerland

46

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

47

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
Renal and adrenal complex surgery

Video Session 01

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

**Chairs:** To be confirmed
G. Janetschek, Salzburg (AT)
M. Musquera Felip, Barcelona (ES)

**Aims and objectives of this presentation**
This session focuses mainly on different indications for and techniques of robot assisted laparoscopic surgery. Robotic partial nephrectomy is close to become 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 is 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: Huques G., Pillot P., Delpech P.O., Bernardeau 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
Institutes: Humanitas University, Dept. of Urology, Milan, Italy, Istituto clinico Humanitas, IRCCS, Dept. of Urology, Milan, Italy, Istituto 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 - Universitatsspital Bern, Dept. of Urology, Bern, Switzerland

**V04**
Robotic-assisted thoracoscopic transdiaphragmatic adrenalectomy (RATTA) for metastatic renal cell carcinoma
By: Russell C., Salami S., Lebastchi A., Lagisetty K., Hafez K., Reddy R., Weizer A.
Institutes: University of Michigan, Dept. of Urology, Ann Arbor, United States of America, University 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., Del Vecchio G., Emiliozzi P., Martinu M., Pansadoro A., Scarpone P., Pansadoro V.
Institutes: Santi'andrea Hospital, Dept. of Urology, Rome, Italy, Laparoscopic 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
Aims and objectives of this presentation
Data about new and available 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.
52

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 Michael Hospital, Dept. of Urology, Bratislava, Slovakia, ³Jesseniun Schooll 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 Strachclyde, Dept. of Urology, Glasgow, United Kingdom

53

Chemical castration decreased the risk of dementia in patient 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

54

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

55

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

56

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, Colicchia M.², Fossati N.¹, Capitanio U.¹, Dehò F.¹, Colombo R.¹, Bertini R.¹, Montorsi F.¹, Karnes J.³, Briganti A.¹
Institutes: ¹Vita-Salute University San Raffaele, Dept. of Urology, Milan, Italy, ²Mayo Clinic, Dept. of Urology, Rochester, United States of America, ³Mayo Clinic, Dept. of Urology, Rochester, Mn, United States of America

57

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.², Huang L.⁷, Seger M.⁸, Nilsson S.⁹, Heidenreich A.¹¹
Institutes: ¹University of Montreal Hospital Center, Dept. of GU Oncology, Montréal, Canada, ²Akershus University Hospital, Dept. of Oncology, Lørenskog, Norway, ³Kantonssipital 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, Whipppany, United States of America, ⁹Pharmaceutical Division of Bayer, Dept. of Global Medical Affairs, Whipppany, United States of America, ¹⁰Karolinska University Hospital, Dept. of Oncology, Stockholm, Sweden, ¹¹University Hospital Cologne, Dept. of Urology, Cologne, Germany

58

The importance of imaging studies to monitor treatment with novel AR-targeted agents in...
metastatic castration resistant prostate cancer (mCRPC)
By: Heidegger I., Kohl T., Pfister D., Friederike H., Paffenholz P., Heidenreich A.
Institutes: Uniklinik Köln, Dept. of Urology, Köln, Germany

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
Institutes: Centre Hospitalier Universitaire De Sherbrooke, Dept. of Radio-Oncology, Sherbrooke, Canada, Centre Hospitalier Universitaire De Sherbrooke, Biostatistical Services, Sherbrooke, Canada, Centre Hospitalier Universitaire De Quebec, Dept. of Radio-Oncology, Quebec, Canada, Centre Universitaire De Sainte McGill, Dept. of Radio-Oncology, Montreal, Canada, Centre Hospitalier Universitaire De Montreal, Dept. of Radio-Oncology, Montreal, Canada, Hôpital Maisonneuve-Rosemont, Dept. of Radio-Oncology, Montreal, Canada, Centre De Santé Et Services Sociaux De Chicoutimi, Dept. of Radio-Oncology, Chicoutimi, Canada, Hôpital De Gatineau, Dept. of Radio-Oncology, Gatineau, Canada, Centre Hospitalier Regional De Trois-Rivieres, Dept. of Radio-Oncology, Trois-Rivieres, Canada, Centre Hospitalier Regional De Rimouski, Dept. of Radio-Oncology, Rimouski, Canada, Hôpital Général Juif de Montréal, Dept. of Radio-Oncology, Montreal, Canada

60

Semi-ecologic, nationwide, population-based study of GnRH agonists, orchiectomy and risk of cardiovascular disease
Institutes: Uppsala University Hospital, Dept. of Surgical Sciences, Uppsala, Sweden, Rigshospitalet, University of Copenhagen, Copenhagen Prostate Cancer Center, Dept. of Urology, Copenhagen, Denmark, Uppsala University Hospital, Regional Cancer Centre Uppsala Örebro, Uppsala, Sweden, King's College London, School of Medicine, Dept. of Cancer Studies, Cancer Epidemiology Group, London, United Kingdom, SUS Malmö, Dept. of Urology, Malmö, Sweden, University of Gothenburg, Dept. of Oncology, Gothenburg, Sweden, Karolinska Institutet, CLINTEC-Dept, Stockholm, Sweden, 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 minimal invasive techniques and new imaging techniques

Poster Session 05

Friday, 24 March
10:45 - 12:15

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 presentation
To assess the horizon for new technologies for minimal 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, 2 Robert Debré Teaching Hospital, Dept. of Urology, Reims, France, 3 Institut Jean Godinot, Dept. of Oncology, Reims, France

62

Initial assessment of clinical feasibility, safety and efficacy of NanoKnife irreversible electroporation (IRE) in the focal treatment of localized renal cell carcinoma (RCC) with delayed interval tumor resection (IRENE trial)


Institutes:1 University Magdeburg, Dept. of Urology, Magdeburg, Germany, 2 University Magdeburg, Dept. of Radiology, Magdeburg, Germany, 3 University Magdeburg, Dept. of Pathology, Magdeburg, Germany, 4 University Magdeburg, Dept. of Surgery, Magdeburg, Germany, 5 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:1 University of Cambridge, Dept. of Urology, Cambridge, United Kingdom, 2 University of Cambridge, Dept. of Engineering, Cambridge, United Kingdom, 3 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: 1 Tottori University, Faculty of Medicine, Dept. of Urology, Yonago, Japan, 2 Sapporo Medical University School of Medicine, Dept. of Urology, Sapporo, Japan, 3 Tottori University, Faculty of Medicine, Dept. of Gastroenterology, Yonago, Japan, 4 Tottori University Hospital, Center for Promoting Next-Generation Highly Advanced Medicine, Yonago, Japan, 5 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.1, Golijanin B.1, Tran T.1, Moshnikova A.2, Gershman B.1, Engelman D.3, Reshetnyak Y.2, Andreev O.2, Amin A.4, Golijanin D.1
Institutes: Rhode Island Hospital and The Miriam Hospital, Dept. of Urology, Providence, United States of America, 2University of Rhode Island, Dept. of Physics, Kingston, United States of America, 3Yale University, Molecular Biophysics and Biochemistry, New Haven, United States of America, 4Rhode 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
By: Vera Donoso C.D.1, Betancourt-Hernandez J.1, Martinez-Sarmiento M.1, Monserrat-Monfort J.J.1, Avargues-Pardo A.1, Vera-Pinto V.2, Sopena-Novales P.2, Torres-Espallardo I.2, Bello-Jarque P.2, Boronat-Tormo F.1
Institutes: La Fe, University and Polytechnic Hospital, Dept. of Urology, Valencia, Spain, 2La 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.1, Alba S.2, Bottone F.2, Mohammed N.1, Kawan F.1, Mirone V.3, Fornara P.1
Institutes: Martin-Luther University, Dept. of Urology, Halle Saale, Germany, 2Romolo Hospital, Dept. of Urology, Rocca Di Neto, Italy, 3Federico 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.1, Park S.B.2, Choe J.H.3, Seo J.T.4, Chun Y.K.5
Institutes: Cheil General Hospital, Dankook University College Of Medicine, Dept. of Radiology, Seoul, South Korea, 2Chung-Ang University College of Medicine, Dept. of Radiology, Seoul, South 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 presentation
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 GL 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 residents/doctors 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 nurses 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)

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 presentation**
Infectious aspects in Urology 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.

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**75**

**Morbidity and mortality outcomes in urosepsis compared according to new sepsis definitions: A prospective multinational observational study – systemic inflammatory response syndrome protects is 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

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**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

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**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.², 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

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**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:* Cardinal Tien Hospital, Division of Urology, Dept. of Surgery, New Taipei City, Taiwan, ²National Taiwan University Hospital, Dept. of Urology, Taipei, Taiwan

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**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

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**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

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**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.\(^1\)

**Institutes:** Justus-Liebig-Universität, Institut Für Medizinische Mikrobiologie, Giessen, Germany, Justus-Liebig-Universität, Klinik Für Urologie, Kinderurologie Und Andrologie, Giessen, Germany

**83**

**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.\(^1\), Knerr-Rupp K.\(^1\), Feld P.\(^1\), Janssen M.\(^2\), Keiser M.\(^3\), Smola S.\(^1\)

**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

**84**

**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.\(^1\), Seo Y.\(^1\), Song J.\(^2\)

**Institutes:** Dankook University Medical College, Dept. of Urology, Cheonan, South Korea, Yonsei University Wonju College of Medicine, Dept. of Urology, Wonju, South Korea

**85**

**Withdrawn**

By:

**Institutes:**

**86**

**Prostatic secretion microbiota and chronic bacterial prostatitis symptoms or signs: Is there a connection?**

By: Kogan M.I.\(^1\), Naboka J.\(^2\), Gudima I.\(^2\), Ibishev H.\(^1\)

**Institutes:** Rostov State Medical University, Dept. of Urology, Rostov-On-Don, Russia, Rostov State Medical University, Dept. of Microbiology, Rostov-On-Don, Russia

**87**

**Does micropattern (sharklet) on urinary catheter surface reduce urinary tract infections? Results from phase I randomized open label interventional trial**

By: Magyar A.\(^1\), Arthanareeswaran V.K.A.\(^1\), Soos L.\(^1\), Nagy K.\(^1\), Dobák A.\(^2\), Szilágyi I.M.\(^3\), Justh N.\(^3\), Chandra A.R.\(^1\), Köves B.\(^1\), Tenke P.\(^1\)

**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

**88**

**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.\(^1\), Kitagawa K.\(^2\), Yamamichi F.\(^3\), Nakano Y.\(^1\), Tokimatsu I.\(^4\), Fujisawa M.\(^1\)

**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

**89**

**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**

By: Cai T.\(^1\), Mazzoli S.\(^2\), Verze P.\(^3\), Migno S.\(^4\), Tiscione D.\(^1\), Luciani L.\(^1\), Lanzafame P.\(^5\), Eccher C.\(^1\), Malossini G.\(^1\), Bartoletti R.\(^5\), Mironi V.\(^2\), Wagenlehner F.\(^7\), Bjerklund Johansen T.\(^6\)

**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, Universita”tsklinikum Giessen Und Marburg GmbH, Justus-Liebig-Universitats, Giessen, Klinik Und Poliklinik Fu¨r Urologie, Kinderurologie Und Andrologie, Giessen, Germany, University of Oslo, Dept. of Urology, Oslo, Norway
Aims and objectives of this presentation

The aim during the session would be to conduct the scientific discussions smoothly, and effective leadership.

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., Garagatiy 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., Robert 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
Aims and objectives of this presentation
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.

The prostate cancer–bone environment causes upregulation of the pentose phosphate pathway
By: Whitburn J.1, Rao S.1, Tabata S.2, Hirayama A.2, Soga T.2, 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

A novel epigenetic crosstalk between ERG and EZH2 leads to prostate cancer progression
By: Zoma M.1, Curti L.1, Shinde D.1, Mitra A.1, Albino D.1, Rossi S.1, Civenni G.1, Losa M.1, Thalmann G.1, 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

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, Sprick 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

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

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.1
Institutes: 1Chang Gung University, Dept. of Anatomy, Tao-yuan, Kwei-shan, Taiwan, 2Chang Gung Memorial Hospital, Dept. of Urology, Tao-yuan, Kwei-shan, Taiwan

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, 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

Compartmentalized β-catenin driven by genomic rearrangement in prostate cancer dictates growth factor dependent, intratumoral cell fate and behavior
*97

Expression of checkpoint receptors in tumor-infiltrated T-cells of renal cell and prostate carcinomas

By: Bedke J.¹, Zelba 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

*98

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, Shrestha R.⁴, Bell R.⁴, Hach F.⁴, Collins C.⁵, Sorensen P.⁶, Gleave M.⁵

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

*99

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.², Helsen C.¹, Abella M.², Zielinska K.², Gay M.³, Vilaseca M.³, Taules M.³, Houtsmuller A.⁴, Van Royen M.⁵, 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 Cientifics I Tecnologics, Unitat De Citometra, Barcelona, Spain, ⁵Erasmus MC, Dept. of Pathology, Rotterdam, The Netherlands

*100

Bone morphogenic 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.², 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

*101

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

*102

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

Poster Session 08

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

**Chairs:** C. Gratzke, Munich (DE)  
R. Hamid, London (GB)

**Aims and objectives of this presentation**
Basic insight in the LUT functioning will be discussed during 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.

*103 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.\(^1\), Carvalho-Dias E.\(^1\), Miranda A.\(^2\), Martinho O.\(^2\), Nogueira-Silva C.\(^3\), Alenina N.\(^4\), Bader M.\(^4\), Autorino R.\(^1\), Lima E.\(^1\), Correia-Pinto J.\(^5\)

**Institutes:** Surgical Sciences Research Domain, Life and Health Sciences Research Institute, ICVS/3B’s - PT Gover, Dept. of Urology and Service of Urology - Hospital of Braga, Braga, Portugal, \(^2\)Life and Health Sciences Research Institute, ICVS/3B’s - PT Government Associate Laboratory, The Cli, Surgical Sciences Research Domain, Braga, Portugal, \(^3\)Surgical Sciences Research Domain, Life and Health Sciences Research Institute, ICVS/3B’s - PT Gover, Dept. of Obstetrics and Gynecology, Braga, Portugal, \(^4\)Max Delbrück Center For Molecular Medicine, Robert-Rössle-Str. 10, Berlin 13125, Germany, Berlin Institute of Health, Berlin, Germany, \(^5\)Surgical Sciences Research Domain, Life and Health Sciences Research Institute, ICVS/3B’s - PT Gover, Dept. of Pediatric Surgery - Hospital of Braga, Braga, Portugal

*104 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*  
**By:** Lee K.S., Kim D.K., Koo K.C., Heo J.E., Oh K.T., Chung B.H.

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

*105 Impairment of autophagy is associated with obesity and inflammation in patients with benign prostatic hyperplasia and lower urinary tract symptoms*  
**By:** De Nunzio C.\(^1\), Giglio S.\(^2\), Ciombella R.\(^2\), Malle G.\(^2\), Nacchia A.\(^1\), Lombardo R.\(^1\), Presicce F.\(^1\), Tubaro A.\(^1\), Vecchione A.\(^2\)

**Institutes:** \(^1\)Sant’ Andrea Hospital - Sapienza University, Dept. of Urology, Rome, Italy, \(^2\)Sant’ Andrea Hospital - Sapienza University, Dept. of Molecular Pathology, Rome, Italy

*106 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*  
**By:** Lee S.\(^1\), Chakrabarty B.\(^2\), Papargiris M.\(^1\), Ryan A.\(^2\), Frydenberg M.\(^4\), Lawrentschuk N.\(^5\), Middendorff R.\(^6\), Risbridger G.\(^1\), Ellem S.\(^1\), Exintaris B.\(^7\)

**Institutes:** \(^1\)Monash University, Dept. of Anatomy and Developmental Biology, Clayton, Australia, \(^2\)Monash University, Drug Discovery Biology, Parkville, Australia, \(^3\)TissuePath, Dept. of Pathology, Melbourne, Australia, \(^4\)Monash University, Dept. of Surgery, Melbourne, Australia, \(^5\)Monash University, Dept. of Surgery, Melbourne, Australia, \(^6\)Justus-Liebig-University, Institute of Anatomy and Cell Biology, Giessen, Germany, \(^7\)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., Gratzke C., Rutz B., Yu Q., Strittmatter F., Herlemann A., Rutz B., Stief C., Hennenberg M.
Institutes: LMU Munich, Dept. of Urology, München, 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
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.1, Georgescu S.4
Institutes: 1St 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 “Carol 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.1, Mitsui T.1, Nakamura Y.2, Imai Y.1, Kira S.1, Nakagomi H.1, Sawada N.1, Nakao A.2, Takeda M.1
Institutes: 1University 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.3, 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: Méen M.1, Guérard M.1, Gamé X.2, Lluel P.1
Institutes: Urosphere, Dept. of Pharmacology, Toulouse, France, 2CHU Rangueil, Dept. of Urology, 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., Gratzke 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.1, Burkhard F.2, Monastyrskaya K.2
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.1, Horst M.2, Eberli D.1
Institutes: ¹University Hospital Zurich, Dept. of Urology, Zürich, Switzerland, ²University Children’s Hospital, Dept. of Pediatric Urology, Zürich, Switzerland
Validation of a mRNA-based urine test for bladder cancer detection in patients with hematuria


Institutes: ¹Radboudumc, 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, Urology, Dallas, United States of America, ⁷University of Michigan Hospital, Urology, Ann Arbor, United States of America, ⁸G. Kenneth Jansz MPC, Private Practice, Burlington, Canada, ⁹University of Tuebingen, Urology, Tuebingen, Germany, ¹⁰Geisinger Health System, 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

Non invasive prediction of recurrences in bladder cancer by detecting TERT promoter mutations in urine
By: Kara N.1, Descotes F.2, Decaussin Petrucci M.2, Piaton E.2, Geiguer F.2, Rodriguez-Lafrasse C.2, Terrier J.E.3, Lopez J.2, Ruffion A.3
Institutes:1 Centre Hospitalier Lyon-Sud, Dept. of Urology, Pierre-bénite, France, 2Centre Hospitalier Lyon-Sud, Dept. of Molecular Biology and Biochemistry, Pierre-Bénite, France, 3Centre Hospitalier Lyon-Sud, Dept. of Urology, Pierre-Bénite, France

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:1 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

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

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

Urethral wash cytology accuracy in the diagnosis of asymptomatic urethral recurrence after radical cystectomy for urothelial 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:1 Papa Giovanni Xxiii Hospital, Dept. of Urology, Bergamo, Italy, 2Papa Giovanni Xxiii Hospital, Dept. of Pathology, Bergamo, Italy

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:1 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

Urine-based diagnostics of bladder tumours through volatile organic compounds: A pilot study comparing two detection systems
**Molecular tumour grading and classification of non muscle invasive bladder cancer based on whole transcriptome analysis**

*By: Heers H.¹, Gut J.¹, Hegele A.¹, Hofmann R.¹, Boeselt T.², Hattesohl A.², Baumbach J.³, Koczulla A.R.²*

*Institutes:* ¹Philipps-Universität Marburg, Dept. of Urology and Paediatric Urology, Marburg, Germany, ²Philipps-Universität Marburg, Dept. of Pneumology, Marburg, Germany, ³Reutlingen University, Dept. of Applied Chemistry, Reutlingen, Germany

**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.¹, Yamamoto H.¹, Hashimoto Y.², Koie T.¹, Narita S.³, Sasaki A.², Tsuchiya N.², Habuchi T.¹, Takahashi I.³, Nakaji S.³, Ohyama C.¹*

*Institutes:* ¹Hirosaki 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

**Concurrent bladder tumours in patients undergoing photodynamic diagnostic ureterorenoscopy: How many lesions are missed under white light?**

*By: Zreik A.¹, Kata S.G², Ahmad S.², Chlosta P.L³, Aboumarzouk O.M¹*

*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

**Last word on the last rite**

P. Black, Vancouver (CA)
<table>
<thead>
<tr>
<th>Time</th>
<th>Session</th>
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<tbody>
<tr>
<td>13:15 - 13:20</td>
<td>Welcome by chairmen</td>
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<tr>
<td>13:20 - 14:05</td>
<td>Renal Transplantation</td>
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<td>13:20 - 13:35</td>
<td>Case Presenter</td>
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<td>To be confirmed</td>
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<tr>
<td>13:35 - 13:50</td>
<td>IUA Lecture</td>
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<td>G. Pourmand, Tehran (IR)</td>
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<td>13:50 - 14:05</td>
<td>EAU Lecture</td>
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<td>G. Janetschek, Salzburg (AT)</td>
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<tr>
<td>14:05 - 14:50</td>
<td>Urinary stone</td>
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<td>14:05 - 14:20</td>
<td>Case Presenter</td>
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<td>To be confirmed</td>
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<td>14:20 - 14:35</td>
<td>IUA Lecture</td>
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<td>A. Basiri, Tehran (IR)</td>
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<td>14:35 - 14:50</td>
<td>EAU Lecture</td>
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<td>14:50 - 15:35</td>
<td>Infertility</td>
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<td>14:50 - 15:05</td>
<td>Case Presenter</td>
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<td>S.J. Hosseini, Tehran (IR)</td>
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<td>15:05 - 15:20</td>
<td>IUA Lecture</td>
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<td>14:20 - 15:35</td>
<td>EAU Lecture</td>
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<td></td>
<td>N. Sofikitis, Ioannina (GR)</td>
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<tr>
<td>15:35 - 15:45</td>
<td>Discussion and closing remarks</td>
</tr>
</tbody>
</table>
Location: Room Munich, North Hall (Level 1)

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

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

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
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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<thead>
<tr>
<th>Time</th>
<th>Session Title</th>
<th>Speaker(s)</th>
</tr>
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<tbody>
<tr>
<td>14:05 - 14:20</td>
<td>Risk factors and prevention</td>
<td>To be confirmed</td>
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<tr>
<td>14:20 - 14:35</td>
<td>Lymph node Imaging and surgical treatment</td>
<td>To be confirmed</td>
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<tr>
<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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<tr>
<td>14:50 - 15:35</td>
<td>BPH</td>
<td>S. Gravas, Larissa (GR)</td>
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<tr>
<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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<tr>
<td>15:20 - 15:35</td>
<td>Pharmacology of the lower urinary tract: What to observe in the medical treatment of lower urinary tract dysfunction</td>
<td>To be confirmed</td>
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<tr>
<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>
</tr>
</tbody>
</table>
Aims and objectives of this presentation
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:
D.J. Rosario, Sheffield (GB)
S. Horie, Tokyo (JP)

13:20 - 13:40
Extending the use of androgen receptor targeted drugs in men with nmCRPC

13:20 - 13:30
Yes
T. Kimura, Tokyo (JP)

13:30 - 13:40
No
A. Briganti, Milan (IT)

13:40 - 14:05
Panel discussion on clinical cases: What is your choice of treatment?

13:40 - 14:05
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

14:05 - 14:15
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?

14:25 - 14:50
Panel:
B. Mellado, Barcelona (ES)
A.S. Merseburger, Lübeck (DE)
M.J. Ribal, Barcelona (ES)
R. Takata, Morioka (JP)
To be confirmed
Y. Tomita, Niigata (JP)
H.G. Van Der Poel, Amsterdam (NL)

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

15:10 - 15:35
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)
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 presentation**
The contents of this EAU-USI joint session will provide an update on those current hot topics from the perspective of both societies. Recognized 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 Reconstructive Urology.

<table>
<thead>
<tr>
<th>Time</th>
<th>Session Title</th>
<th>Indian Perspective</th>
<th>European Perspective</th>
<th>Discussion</th>
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<tbody>
<tr>
<td>13:15 - 13:20</td>
<td>Welcome and introduction</td>
<td>D.M. Castro Díaz, La Laguna Santa Cruz Tenerife (ES)</td>
<td>P.N. Dogra, New Delhi (IN)</td>
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<tr>
<td>13:20 - 13:45</td>
<td>Current trends in the management of Peyronie's disease</td>
<td>To be confirmed</td>
<td>I. Moncada, Madrid (ES)</td>
<td>Discussion</td>
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<tr>
<td>13:45 - 14:05</td>
<td>Etiopathogenesis of LUTS: Current update</td>
<td>To be confirmed</td>
<td>J.P.F.A. Heesakkers, Nijmegen (NL)</td>
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<td>14:05 - 14:30</td>
<td>Minimally invasive therapy for BPH: What is the current gold standard?</td>
<td>S. Basu, Kolkata (IN)</td>
<td>M. Oelke, Hanover (DE)</td>
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</tr>
</tbody>
</table>
### Current approach to prostate cancer castration resistance

**14:30 - 14:40**
- **Indian perspective**  
  S.K. Raghunath, Bangalore (IN)

**14:40 - 14:50**
- **European perspective**  
  P. Cornford, Liverpool (GB)

**14:50 - 14:55**
- **Discussion**

### Timing of radical cystectomy in NMIBC

**14:55 - 15:20**
- **Indian perspective**  
  P.N. Dogra, New Delhi (IN)

**15:05 - 15:15**
- **European perspective**  
  M. Babjuk, Prague 5 (CZ)

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

### What, why, when, whom and how on the use of meshes for reconstructive urology

**15:20 - 15:40**
- **Indian perspective**  
  S. Raina, Mumbai (IN)

**15:30 - 15:40**
- **European perspective**  
  D.M. Castro Díaz, La Laguna Santa Cruz Tenerife (ES)

**15:40 - 15:45**
- **Discussion and conclusion**
# Aims and objectives of this presentation

The attendants 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 actual place of surgery in oligometastatic prostate cancer will be highlighted. The second part of the session will treat with 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.

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<tr>
<th>Time</th>
<th>Event</th>
<th>Presenter(s)</th>
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<tr>
<td>13:15 - 13:20</td>
<td>Welcome and introduction</td>
<td>To be confirmed</td>
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<td></td>
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<td>H. Van Poppel, Leuven (BE)</td>
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<tr>
<td>13:20 - 14:05</td>
<td>Session I: Renal cell carcinoma</td>
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<td></td>
<td>Moderators:</td>
<td>C-S. Kim, Seoul (KR)</td>
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<td>H. Van Poppel, Leuven (BE)</td>
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<td>13:50 - 14:05</td>
<td>Case discussion</td>
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<td>13:50 - 14:05</td>
<td>Case presenter:</td>
<td>S.H. Choi, Daegu (KR)</td>
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<td>13:50 - 14:05</td>
<td>Panel:</td>
<td>T. Klatte, Wien (AT)</td>
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<td>A. Volpe, Novara (IT)</td>
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<tr>
<td>14:05 - 14:20</td>
<td>Role of surgery for oligometastatic prostate cancer</td>
<td>To be confirmed</td>
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<td>Moderators:</td>
<td>J.H. Hong, Seoul (KR)</td>
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<td>H. Van Poppel, Leuven (BE)</td>
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</tbody>
</table>
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

To be confirmed  
H. Van Poppel, Leuven (BE)
**Location:** Room 11, Capital suite (level 3)

**Chairs:** To be confirmed

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<td>Welcome and introduction by chairs</td>
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<td>13:20 - 13:25</td>
<td><strong>Urolithiasis</strong></td>
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<tr>
<td>Moderator:</td>
<td>A. Chkhotua, Tbilisi (GE)</td>
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<tr>
<td>13:20 - 13:35</td>
<td>The diagnostic workup of frequent stone formers</td>
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<td>K. Sarica, Istanbul (TR)</td>
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<td>13:35 - 13:50</td>
<td><strong>Sandwich technique</strong></td>
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<td>T. Knoll, Sindelfingen (DE)</td>
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<td>13:50 - 14:05</td>
<td>Complications of endoscopic procedures on urolithiasis</td>
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<td>B. Ayubov, Tashkent (UZ)</td>
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<td>S. Giyasov, Tashkent (UZ)</td>
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<tr>
<td>14:05 - 14:20</td>
<td>Percutaneous nephroscopic surgery: Using tranexamic acid to prevent intraoperative bleeding</td>
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<td>Y. Iskakov, Astana (KZ)</td>
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<tr>
<td>14:20 - 14:25</td>
<td>Discussion</td>
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<tr>
<td>14:25 - 15:00</td>
<td><strong>Prostate cancer</strong></td>
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<td>Moderator:</td>
<td>To be confirmed</td>
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<td>14:25 - 14:40</td>
<td>Modern trends in surgical treatment of prostate cancer: The progressive shift from open to lap to robot</td>
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<td>P. Verze, Naples (IT)</td>
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<td>14:40 - 14:55</td>
<td>The outcome of nerve-sparing robotic radical prostatectomy with full pelvic anatomy preservation</td>
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<td>A.M. Grabsky, Yerevan (AM)</td>
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<td>M. Mosoyan, St. Petersburg (RU)</td>
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<td>14:55 - 15:00</td>
<td>Discussion</td>
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<tr>
<td>15:00 - 15:35</td>
<td>Urethral strictures</td>
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<td>15:00 - 15:15</td>
<td><strong>Workup of urethral stricture patients</strong> To be confirmed</td>
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<td>Z. Tchanturaia, Tbilisi (GE)</td>
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<tr>
<td>15:15 - 15:30</td>
<td><strong>Surgical treatment of urethral strictures</strong> To be confirmed</td>
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<td>15:30 - 15:45</td>
<td>Closing remarks</td>
</tr>
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</table>
# Meeting of the Young Academic Urologists (YAU)

**Special session**

**Friday, 24 March**
**13:15 - 16:00**

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

**Chairs:** To be confirmed
M.S. Silay, Istanbul (TR)

**Aims and objectives of this presentation**
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.

<table>
<thead>
<tr>
<th>Time</th>
<th>Session</th>
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| 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**
To be confirmed |
| 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) |
<p>| 14:20 - 14:30 | <strong>PROTECT trial</strong> |</p>
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<tr>
<th>Time</th>
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<tr>
<td>14:20 - 14:30</td>
<td><strong>Presenter</strong></td>
<td>G. Gandaglia, Milan (IT)</td>
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<td>14:20 - 14:30</td>
<td><strong>Discussant</strong></td>
<td>F.C. Hamdy, Oxford (GB)</td>
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<td>14:30 - 14:45</td>
<td><strong>Establishing a professional career at a European level: Motivational talk by Crystal Matula Award Winner</strong></td>
<td>To be confirmed</td>
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<td>14:45 - 15:30</td>
<td><strong>Challenge the expert session: YAU versus key opinion leaders</strong></td>
<td><strong>Moderators:</strong> S.D. Brookman-May, Munich (DE)</td>
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<td>G. Ploussard, Toulouse (FR)</td>
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<td>E. Xylinas, Paris (FR)</td>
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<td>14:45 - 15:00</td>
<td><strong>Adjuvant therapy for high-risk RCC</strong></td>
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<td>14:45 - 14:52</td>
<td>Pro</td>
<td>I. Ouzaid, Paris Cedex 18 (FR)</td>
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<td>14:53 - 15:00</td>
<td>Con</td>
<td>A. Bex, Amsterdam (NL)</td>
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<tr>
<td>15:00 - 15:15</td>
<td><strong>Adjuvant radiation therapy for prostate cancer</strong></td>
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<td>15:00 - 15:07</td>
<td>Pro</td>
<td>P. Ost, Ghent (BE)</td>
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<td>15:08 - 15:15</td>
<td>Con</td>
<td>A. Heidenreich, Cologne (DE)</td>
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<tr>
<td>15:15 - 15:30</td>
<td><strong>Adjuvant chemotherapy for bladder cancer</strong></td>
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<td>15:15 - 15:22</td>
<td>Pro</td>
<td>R. Seiler, Bern (CH)</td>
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<tr>
<td>15:23 - 15:30</td>
<td>Con</td>
<td>To be confirmed</td>
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<tr>
<td>15:30 - 16:00</td>
<td><strong>YAU meets sections: How to improve the collaboration?</strong></td>
<td><strong>Moderators:</strong> T.A.T. Marcelissen, Maastricht (NL)</td>
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<td>F. Sanguedolce, London (GB)</td>
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<tr>
<td>15:30 - 15:40</td>
<td><strong>Urological imaging</strong></td>
<td>J. Walz, Marseille (FR)</td>
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<tr>
<td>15:40 - 15:50</td>
<td><strong>Urological research</strong></td>
<td>K. Junker, Homburg (DE)</td>
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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 presentation
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.

14:38 - 14:48

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.3, Saleh O.2, Cai T.3, Palermo S.1, Tischler T.1, Spoladore G.4, Mian P.5, 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.3, Zanetti S.P.1, Catellani M.2, De Lorenzis E.1, Palmisano F.1, Longo F.1, Montanari E.1
Institutes: Fondazione IRCCS Ca’ Granda – Ospedale Maggiore Policlinico, Dept. of Urology, Milan, Italy, 1Istituto Europeo Di Oncologia, Dept. of Urology, Milan, Italy
Transurethral resection of the prostate: Are we following the guidelines? Outcomes from the global prevalence of infections in urology (GPIU) side study 2006-2009
Institutes: Jahn Ferenc South Pest Teaching Hospital, Dept. of Urology, Budapest, Hungary,2 Newcastle University, Northern Institute For Cancer Research, Newcastle Upon Tyne, United Kingdom,3 Santa Chiara Regional Hospital, Dept. of Urology, Trento, Italy,4 Technische Hochschule Mittelhessen, Dept. of Bioinformatics, Giessen, Germany,5 Lund University, Dept. of Microbiology, Immunology and Glycobiology, Lund, Sweden,6 Technical University of Munich, Dept. of Urology, Munich, Germany,7 University of Florence, Dept. of Urology, Edirne, Turkey,8 TB Research Institute, Novosibirsk, Russia,9 S.R. Urology Institute, Moscow, Russia,10 Justus-Liebig-University, Dept. of Urology, Paediatric Urology and Andrology, Giessen, Germany,11 Oslo University, Dept. of Urology, Oslo, Norway

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,1 Graduate School of Tokyo Denki University, Dept. of Life Science and Engineering, Hatoyama-Cho, Japan

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

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

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: Santa Chiara Hospital, Dept. of Urology, Trento, Italy,2 Santa Maria Annunziata Hospital, Sexually Transmitted Disease Centre, Florence, Italy,3 University of Pisa, Dept. of Urology, Pisa, Italy

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

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
Options in intracorporeal neobladder reconstruction

Aims and objectives of this presentation
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 examining the current evidence.

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

**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

**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
**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 presentation**

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 relationship 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.

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**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, Catapano 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, Inselspital, 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.⁵, Thalmann G.⁵, Kruthof-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 Plujim G.², Cecchini M.¹, Kruthof-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.⁶, Joniau S.⁷
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, Bruxelles, Belgium, ⁴Université Libre De Bruxelles, DIPath - 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

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)
Evolving knowledge in neuro-urology
Poster Session 12

Location: Room Berlin, North Hall (Level 1)

Chairs: S. Charalampous, Limassol (CY)
T.M. Kessler, Zurich (CH)
T.L.C. Kuo, Singapore (SG)

Aims and objectives of this presentation
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.², 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.⁶, Tournier S.², Maurin
**163**

Comparison between different dosages of intradetrusor botulinum toxin to treat neurogenic detrusor overactivity

*By:* Spinelli M., Guerr C., Citer M., Zanollo L., Tamarel B., Rizzato L.
*Institutes:* Hospital Niguarda Milan, Alberto Zanollo Center, Spinal Unit, 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. 1, Yabe I. 2, Kanno T. 1, Ouchi M. 1, Moriya K. 1, Takahashi I. 2, Matsushima M. 2, Sasaki H. 2, Shinohara N. 1
*Institutes:* Hokkaido University School of Medicine, Dept. of Urology, Sapporo, Japan, 2Hokkaido 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, 2Tenon Hospital, Dept. of Neurourology, Paris, France, 3Clinique Saint-Augustin, Dept. of Neurourology, Bordeaux, France, 4CHU Lausanne, Dept. of Neurourology, Lausanne, France, 5Raymond Poincaré Hospital, Dept. of Neurourology, Garches, France, 6CHU Bordeaux, Dept. of Urology, Bordeaux, France, 7CHU Toulouse, Dept. of Urology, Toulouse, France, 8CHU Nantes, Dept. of Urology, Nantes, France, 9CHU Marseille, Dept. of Urology, Marseille, France, 10CHU Lille, Dept. of Urology, Lille, France, 11CHU Tours, Dept. of Urology, Tours, France, 12CHU Rouen, Dept. of Urology, Rouen, France, 13CHU Strasbourg, Dept. of Urology, Strasbourg, France, 14CHU Rennes, Dept. of Physical Medicine and Rehabilitation, Rennes, France, 15Pitié 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. 1, Filiponi M. 5, Dimitriadis F. 3, Takenaka A. 3, Sofikitis N. 1
*Institutes:* Ioannina University School of Medicine, Dept. of Urology, Ioannina, Greece, 2Elpis Hospital, Dept. of Urology, Volos, Greece, 3Tottori 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. 1, Ineichen B. 1, Hagenbuch N. 3, Linnebank M. 3, Kessler T. 4
*Institutes:* University Hospital of Zürich, Dept. of Neuro-Urology, Zürich, Switzerland, 2Biostatistics and Prevention Institute, Dept. of Biostatistics, Zürich, Switzerland, 3University Hospital Zürich, Dept. of Neurology, Zürich, Switzerland, 4Balgrist 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.¹, Romikh V.², Panteleev V.², Zakharchenko A.², Arkhireev A.², Apolikhin O.¹, Kaprin A.³

Institutes: ¹Research Institute of Urology and Interventional Radiology N.a. Lopatkin - Branch of Fsbi Nmrrc, Moscow, Russia, ²Research Institute of Urology and Interventional Radiology N.a. Lopatkin - Branch of Fsbi Nmrrc, Neurourology and Urodynamics, Moscow, Russia, ³Fsbi 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 presentation**
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.

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*170

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

By: Powles T.1, Bellmunt J.2, Castellano D.3, O'donnell P.4, Grivas P.5, Vuky J.6, Pimlack E.7, Hahn N.8, Balar A.9, Pang L.10, Savage M.10, Perini R.10, Keefe S.10, Bajorin D.11, De Wit R.12

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

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**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.4, Bellmunt J.6, Miceli R.4

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

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**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.4, Trinh Q.-D.1

**Institutes:**
1. 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...
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, Roupét M.5, Kibel A.3, 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 Hematologic-Oncology, Department of Medicine, Birmingham, United States of America, University of Washington, Department of Medicine, Seattle, United States of America, City of Hope Comprehensive Cancer Center, 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


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, Dept. of Urology, Milan, Italy, Fondazione IRCCS - Istituto Nazionale Dei Tumori, Dept. of Radiation Oncology, 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.3, 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, Fukushima K.1, Yamamoto H.1, Soma O.1, Matsumoto T.1, Tobisawa Y.1, Yoneyama T.2, Imai A.1, Yoneyama 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, Yoneyama T.2, Imai A.1, Yoneyama 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
Institutes:Samsung Medical Center, Sungkyunkwan University School of Medicine, Dept. of Urology, Seoul, 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, Nomii 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)
'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 presentation**
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>Event</th>
<th>Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>08:30 - 09:00</td>
<td>Case presentation 3 cm mass in a 70 year old</td>
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</tbody>
</table>
**Case presenter**
T.S. O'Brien, London (GB)  
**Urologist in the dock**
A. Bex, Amsterdam (NL)  
**Cross examination**
B. Leigh, London (GB)  
**Discussion** |
| 09:00 - 09:30 | Case presentation 4.5 cm mass in a 50 year old |  
**Case presenter**
T.S. O'Brien, London (GB)  
**Urologist in the dock**
C.K. Bensalah, Rennes (FR)  
**Cross examination**
B. Leigh, London (GB)  
**Discussion** |
| 09:30 - 10:00 | Case presentation 12 cm mass with lung metastases |  
**Case presenter**
T.S. O'Brien, London (GB)  
**Urologist in the dock**
C.K. Bensalah, Rennes (FR)  
**Cross examination**
B. Leigh, London (GB)  
**Discussion** |
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**
Aims and objectives of this presentation
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
S. Kliesch, Münster (DE)

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 History office

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

**Chair:** P.E. Van Kerrebroeck, Maastricht (NL)

### Aims and objectives of this presentation
This session is divided into 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 during the Nazi time.

<table>
<thead>
<tr>
<th>Time</th>
<th>Session Title</th>
<th>Speaker(s)</th>
</tr>
</thead>
<tbody>
<tr>
<td>08:30</td>
<td>Welcome and introduction</td>
<td>P.E. Van Kerrebroeck, Maastricht (NL)</td>
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<tr>
<td></td>
<td></td>
<td>P.M. Thompson, London (GB)</td>
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<tr>
<td>08:30-10:30</td>
<td>The evolution of British urology</td>
<td>P.M. Thompson, London (GB)</td>
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<tr>
<td></td>
<td></td>
<td>P.E. Van Kerrebroeck, Maastricht (NL)</td>
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<tr>
<td>08:35</td>
<td>From stonecutters to science: The early days in the evolution in British urology</td>
<td>P. Kumar, Coventry (GB)</td>
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<tr>
<td>08:55</td>
<td>Sir Henry Thompson, the first British urologist</td>
<td>P.M. Thompson, London (GB)</td>
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<tr>
<td>09:15</td>
<td>St Peters Hospital, the first Urology Hospital</td>
<td>P. Worth, London (GB)</td>
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<tr>
<td>09:35</td>
<td>Peter Freyer, the First Leader of British urology</td>
<td>To be confirmed</td>
</tr>
<tr>
<td>09:55</td>
<td>Terence Millin, his impact on British urology</td>
<td>J.C. Goddard, Leicester (GB)</td>
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<tr>
<td>10:15</td>
<td>The role of the RSM and BAUS in the development of British urology</td>
<td>R. Kirby, London (GB)</td>
</tr>
<tr>
<td>10:35-11:30</td>
<td>Research Project: Urology under the Swastika</td>
<td>D. Schultheiss, Giessen (DE)</td>
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<td>P.E. Van Kerrebroeck, Maastricht (NL)</td>
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<tr>
<td>10:35</td>
<td>Urology under the Swastika: A global issue</td>
<td>D. Schultheiss, Giessen (DE)</td>
</tr>
<tr>
<td>11:05</td>
<td>Urology under the Swastika: The British perspective</td>
<td>To be confirmed</td>
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**Scientific Programme**

EAU London 2017 75
ESU/ESFFU Hands-on Training course in OnabotulinumtoxinA administration for OAB

HOT15

Saturday, 25 March
09:30 - 11:00

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

Aims and objectives of this presentation
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.

R. Inman, Sheffield (GB)
M.S. Rahnama'i, Heerlen (NL)
A. Sahai, London (GB)
ESU/ESFFU Hands-on Training in Urodynamics
HOT05

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

Chair: G. Van Koeveringe, Maastricht (NL)

Aims and objectives of this presentation
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.

Programme:
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 floroscopy images of outlet obstruction
Station 3 Female case studies: characteristic filling voiding and voiding phase traces as well as floroscopy 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

E. Finazzi Agrò, Rome (IT)
R. Kirschner-Hermanns, Aachen (DE)
T. Mckinney, Fort Lauderdale (US)
To be confirmed
P.F.W.M. Rosier, Nijmegen (NL)
To be confirmed
ESU/ESUT Hands-on Training in Basic laparoscopic skills

**HOT01**

<table>
<thead>
<tr>
<th>Location:</th>
<th>Room South America, Exhibition Hall (Level 1)</th>
</tr>
</thead>
</table>

**Saturday, 25 March**

**09:45 - 10:45**

**Aims and objectives of this presentation**

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.
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 presentation
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 therapeutically 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?
G. Karam, 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 recipients
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 recipients
X.P.C. Tillou, Caen (FR)

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

11:10 - 11:15
Conclusions
<table>
<thead>
<tr>
<th>Time</th>
<th>Topic</th>
<th>Moderator</th>
</tr>
</thead>
<tbody>
<tr>
<td>11:15 - 11:35</td>
<td>Oligometastatic prostate cancer in ESRD and KT patients</td>
<td><strong>Moderator:</strong> C. Hernández Fernández, Madrid (ES)</td>
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<td>M. Brausi, Modena (IT)</td>
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<tr>
<td>11:35 - 11:55</td>
<td>Key technical aspects in the surgical approach of big retroperitoneal masses with vascular invasion</td>
<td><strong>Moderator:</strong> F.J. González Garcia, Madrid (ES)</td>
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<td>G. Ciancio, Miami (US)</td>
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<tr>
<td>11:55 - 12:05</td>
<td>Special considerations in immunosuppressive protocols in KT patients with urological tumours</td>
<td><strong>Moderator:</strong> F. Kleinclauss, Besançon (FR)</td>
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<td>K. Budde, Berlin (DE)</td>
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<td>12:05 - 12:30</td>
<td>Renal cancer</td>
<td><strong>Moderator:</strong> J.D. Olsburgh, London (GB)</td>
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<tr>
<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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<tr>
<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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<tr>
<td>12:25 - 12:30</td>
<td>Conclusions</td>
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<tr>
<td>12:30 - 13:05</td>
<td>Urothelial cancer</td>
<td><strong>Moderator:</strong> A. Alcaraz, Barcelona (ES)</td>
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<tr>
<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 recipients: Key aspects</td>
<td>J. Palou, Barcelona (ES)</td>
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<tr>
<td>12:50 - 13:00</td>
<td>ESRD patient with history of urothelial cancer: Criteria to access the transplant waiting-list</td>
<td>R.J.M.J. Boissier, Marseille (FR)</td>
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<tr>
<td>13:05 - 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)  
G. Ciancio, Miami (US)  
E. Lledó García, Madrid (ES) |
A.J. Figueiredo, Coimbra (PT)  
E. Lledó García, Madrid (ES)  
To be confirmed |
| 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) |
New challenges in urogenital infections and andrological urology
Joint meeting of the EAU Section of Andrological Urology (ESAU) and the EAU Section of Infections in Urology (ESIU)

Saturday, 25 March
10:00 - 14:00

Location: Room Stockholm, North Hall (Level 1)
Chairs: N. Sofikitis, Ioannina (GR)
F.M.E. Wagenlehner, Giessen (DE)

Aims and objectives of this presentation
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 symposium. 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.

10:00 - 10:05
Welcome and introduction
N. Sofikitis, Ioannina (GR)
F.M.E. Wagenlehner, Giessen (DE)

10:05 - 10:20
An ESAU-EAA lecture
Moderators: S. Kliesch, Münster (DE)
F.M.E. Wagenlehner, Giessen (DE)

10:05 - 10:20
Male accessory genital gland infections and infertility
To be confirmed

10:20 - 11:30
Urogenital infections: Pathogenesis and mechanisms responsible for andrological consequences
Moderators: T.E. Bjerkland Johansen, Stavern (NO)
G.R. Dohle, Rotterdam (NL)

10:20 - 10:35
Epididym-orchitis and obstruction (functional and anatomical)
A. Pilatz, Gießen (DE)

10:35 - 10:50
Seminal pathway obstruction: Parameters influencing the urologist’s decision for reconstructive surgery or Assisted Reproductive Technology (ART)
T. Diemer, Giessen (DE)

10:50 - 11:05
The role of microorganisms in urogenital pain syndromes
V. Smelov, Lyon (FR)

11:05 - 11:20
Connective links between LUTS and erectile dysfunction: Biological factors and epidemiological observations
C. Bettocchi, Bari (IT)

11:20 - 11:30
Discussion
<table>
<thead>
<tr>
<th>Time</th>
<th>Session</th>
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</thead>
<tbody>
<tr>
<td>11:30 - 12:20</td>
<td>Male infertility and sexual dysfunction</td>
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<tr>
<td></td>
<td><strong>Moderators:</strong> R. Bartoletti, Pisa (IT)</td>
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<td></td>
<td>A. Giwercman, Malmö (SE)</td>
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<tr>
<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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<tr>
<td>12:20 - 13:15</td>
<td>Urosepsis and its consequences</td>
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<td><strong>Moderators:</strong> 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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<tr>
<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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<tr>
<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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<tr>
<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><strong>Moderators:</strong> S.S. Minhas, London (GB)</td>
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<td>P. Tenke, Budapest (HU)</td>
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<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><strong>Moderators:</strong> G. Bonkat, Basel (CH)</td>
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<td>M. Dinkelman-Smit, Breda (NL)</td>
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<td>13:35 - 13:45</td>
<td>Current management of urethritis</td>
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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)
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)

Saturday, 25 March
10:15 - 14:45

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

Aims and objectives of this presentation
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.

Minimal 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 the 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.

10:15 - 10:20
Welcome and introduction
K. Sarica, Istanbul (TR)

10:20 - 11:15
Etiolopathogenesis and epidemiology of stone disease: An update

Moderators: D.J. Kok, Rotterdam (NL)
J.M. Reis Santos, Lisbon (PT)
R.J. Unwin, London (GB)

10:20 - 10:35
Etiopathogenesis of stone formation: An update in the era of endourological advancements
H-G. Tiselius, Stockholm (SE)

10:35 - 10:50
Epidemiology of stone disease: What has changed in the last 25 years?
W.G. Robertson, Over, Cambridge (GB)

10:50 - 11:05
The importance and quality of stone analysis in Europe
R. Siener, Bonn (DE)

11:05 - 11:15
Discussion

11:15 - 12:00
Panel discussion: Nightmare cases in endourology

Moderator: T. Knoll, Sindelfingen (DE)
<table>
<thead>
<tr>
<th>Time</th>
<th>Session</th>
<th>Panel/Moderators</th>
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</table>
| 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? | 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                                | A.Y. Muslumanoglu, Istanbul (TR)  
I. Saltirov, Sofia (BG)  
M. Straub, Munich (DE) |
| 12:45 - 12:55| The new anticoagulants in endourology: Do they let us for a safe intervention? | H-M. Fritsche, Regensburg (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                     | K.H. Andreassen, Frederiksberg (DK)  
C.C. Seitz, Vienna (AT)  
A. Szendrői, Budapest (HU) |
<p>| 13:30 - 13:45| Development of a master questionnaire for stone disease                 |                                                                                 |</p>
<table>
<thead>
<tr>
<th>Time</th>
<th>Session Topic</th>
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<tr>
<td>13:45 - 14:00</td>
<td>How should we follow the patients after endourological management?</td>
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<td>G. Gambaro, Rome (IT)</td>
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<td>14:00 - 14:40</td>
<td>New treatment modalities and their impact on our current approaches</td>
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<td><strong>Moderators:</strong> C.M. Scoffone, Turin (IT)</td>
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<td>C. Türk, Vienna (AT)</td>
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<td>G-H. Zeng, Guangzhou (CN)</td>
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<td>14:00 - 14:10</td>
<td>Micro URS</td>
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<td>J. Galan Llopis, Alicante (ES)</td>
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<td>14:10 - 14:20</td>
<td>Robotic FURS</td>
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<td>K. Sarica, Istanbul (TR)</td>
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<td>14:20 - 14:30</td>
<td>Disposable URS</td>
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<td>N.N-P. Buchholz, Dubai (AE)</td>
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<td>14:30 - 14:40</td>
<td>Miniaturisation in PNL: How did it affect our approaches in stone treatment?</td>
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<td>S. Hayek, Cambridge (GB)</td>
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<td>14:40 - 14:45</td>
<td>Announcements and final remarks</td>
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<td>K. Sarica, Istanbul (TR)</td>
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### 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 and SUO

<table>
<thead>
<tr>
<th>Date</th>
<th>Time</th>
<th>Location</th>
<th>Chairs</th>
<th>Presentations</th>
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<tbody>
<tr>
<td>Saturday, 25 March</td>
<td>10:15 - 14:45</td>
<td>Room Madrid, North Hall (Level 1)</td>
<td>M. Brausi, Modena (IT)</td>
<td><strong>The European Society of Surgical Oncology (ESSO)</strong></td>
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<td></td>
<td>10:15 - 10:40</td>
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<td>Lymphadenectomy in uro-oncological pelvic surgery</td>
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<td>F. Lista Mateos, Madrid (ES)</td>
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<td>10:35 - 10:40</td>
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<td>Discussion</td>
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<td>10:40 - 11:00</td>
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<td>The role of surgery in metastatic renal cancer</td>
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<td>A. Bex, Amsterdam (NL)</td>
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<td>11:00 - 11:05</td>
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<td>Discussion</td>
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<td><strong>The European Society for Radiotherapy &amp; Oncology (ESTRO)</strong></td>
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<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><strong>The European Uro-Oncology Group (EUOG)</strong></td>
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<td>11:30 - 11:50</td>
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<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>
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<td>Discussion</td>
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<td>11:55 - 12:15</td>
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<td><strong>Patrick Walsh Lecture: What’s new at Hopkins - AS, PSMA scans, AR-V7</strong></td>
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<td>P.C. Walsh, Baltimore, MD (US)</td>
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<td>12:15 - 12:35</td>
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<td><strong>Society for Urologic Oncology (SUO)</strong></td>
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<td>12:15 - 12:35</td>
<td>The argument for surgical management of high risk prostate cancer</td>
<td>C.P. Evans, Sacramento (US)</td>
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<td>12:35 - 12:50</td>
<td>Debate on prostate cancer surgery: Radical prostatectomy should be performed with robot</td>
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<tr>
<td>12:35 - 12:50</td>
<td>Pro: Radical prostatectomy should be performed with robot</td>
<td>H.G. Van Der Poel, Amsterdam (NL)</td>
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<tr>
<td>12:50 - 13:05</td>
<td>Con: Radical prostatectomy should be performed with robot</td>
<td>S. Joniau, Leuven (BE)</td>
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<td>13:05 - 13:10</td>
<td>Discussion</td>
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<tr>
<td>13:10 - 13:45</td>
<td>Debate on bladder cancer surgery: Open radical cystectomy is still the way</td>
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<td>13:10 - 13:25</td>
<td>Pro: Open radical cystectomy is still the way</td>
<td>M. Brausi, Modena (IT)</td>
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<td>13:25 - 13:40</td>
<td>Con: Open radical cystectomy is still the way</td>
<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 better done by robot</td>
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<td>13:45 - 14:00</td>
<td>Pro: Partial nephrectomy/tumour enucleation is better done by robot</td>
<td>A. Larcher, Milan (IT)</td>
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<td>14:00 - 14:15</td>
<td>Con: Partial nephrectomy/tumour enucleation is better done by robot</td>
<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 - 14:35</td>
<td>Quality of life after robotic, lap and open surgery: Real different?</td>
<td>W. Artibani, Verona (IT)</td>
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<td>14:35 - 14:40</td>
<td>Discussion</td>
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<td>14:40 - 14:45</td>
<td>Closure by chairs</td>
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</table>
Aims and objectives of this presentation

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 Campbell Quiz and also awards. We are waiting all the residents and urologists to attend this fruitful program and join us to be informed about recent issues.

S. Sarikaya, Ankara (TR)
J.P.M. Sedelaar, Nijmegen (NL)

10:20 - 11:00
What residents need to know about the EAU organization

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)

11:20 - 11:30
Discussion

11:30 - 11:40
How to write a successful European Urology Scholarship Programme (EUSP) application
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**  
To be confirmed

13:15 - 14:35  
**Surgery: Tips and tricks**

**Moderators:**  
D. Duijvesz, Rotterdam (NL)  
J.L. Vásquez, 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**

**Moderators:**  
G. Patruno, Rome (IT)  
S. Sarikaya, Ankara (TR)
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**

**Moderators:**  
S. Boret  
F. Esperto, Rome (IT)

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)

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

**Moderators:**  
M. Stepanchenko, Chernivtsi (UA)  
Z. Zotter, Budapest (HU)

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**

**Moderators:**  
J. Gómez Rivas, Madrid (ES)  
M. Waterschoot, Sinaai (BE)  
M.J. Ribal, Barcelona (ES)

17:00 - 17:15  
**Prizes and awards**

**Moderator:**  
S. Sarikaya, Ankara (TR)
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 presentation
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?
K. Pantel, 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?
To be confirmed

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>Moderators</th>
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<tbody>
<tr>
<td>11:40 - 12:30</td>
<td>Kidney cancer</td>
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<td>Relevance of histopathological subtypes: Which</td>
<td>H. Moch, Zurich (CH)</td>
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<td>are the bad guys?</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>12:10 - 12:20</td>
<td>Genetic heterogeneity: What is relevant</td>
<td>S. Turajlic, London (GB)</td>
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<td>concerning marker development?</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>
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<td>Biomarkers for testicular cancer: What we have</td>
<td>L. Looijenga, Rotterdam (NL)</td>
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<td>and what we need</td>
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<td>12:40 - 12:50</td>
<td>The new 2016 WHO classification of penile</td>
<td>M. Colecchia, Milan (IT)</td>
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<td>12:50 - 13:00</td>
<td>Penile cancer: What we need and what we have -</td>
<td>S. Horenblas, Amsterdam (NL)</td>
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<td>The urologist’s view</td>
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<td>13:00 - 13:50</td>
<td>Prostate cancer</td>
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<td>Implementation of the new ‘prostate cancer</td>
<td>R. Montironi, Ancona (IT)</td>
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<td>13:10 - 13:20</td>
<td>Tumour heterogeneity: The evolutionary history</td>
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<td>13:20 - 13:30</td>
<td>Tumour heterogeneity: The urologist’s view</td>
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<td>13:30 - 13:40</td>
<td>Predictive markers in prostate cancer: Tissue</td>
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</tbody>
</table>
13:50 - 14:00  Conclusion
R. Montironi, Ancona (IT)
How to manage metastatic castration-resistant prostate cancer in an office setting

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

Location: Room Amsterdam, North Hall (Level 1)

Chairs: H. Brenneis, Pirmasens (DE)
        H. Haas, Heppenheim (DE)

Aims and objectives of this presentation
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.

Expert: To be confirmed
Revisiting management of LUTS in neurogenic and non-neurogenic patients

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

Aims and objectives of this presentation
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. 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. Kocjancic, Chicago (US)
**EAU London 2017**

**12:15 - 12:30**  
**Prize winner 5th international neuro-urology meeting**

**12:15 - 12:20**  
**Introduction**  
T.M. Kessler, Zurich (CH)

**12:20 - 12:30**  
**Lecture of prize winner**

---

**12:30 - 14:00**  
**LUTS**

**Moderators:**  
F.C. Burkhard, Berne (CH)  
S. Charalampous, Limassol (CY)

**12:30 - 12:45**  
**What works and what does not work in the management of nocturia?**  
K. Everaert, Ghent (BE)

**12:45 - 13:00**  
**What is new in the management of BPS/IC?**  
P. Dinis Oliveira, Porto (PT)

**13:00 - 13:15**  
**Do alpha-blockers relief benign prostatic obstruction or are they only good for LUTS improvement?**  
Y. Igawa, Tokyo (JP)

**13:15 - 13:30**  
**How I solve the early and late complications of Mid Urethral Slings (MUS)?**  
T. Tarcan, Istanbul (TR)

**13:30 - 13:45**  
**What does the evidence tell us about the use of urodynamics in females with SUI?**  
E. Costantini, Perugia (IT)

**13:45 - 14:00**  
**Urgency incontinence: Are all treatment options equally effective?**  
H. Hashim, Bristol (GB)

---

**14:00 - 14:00**  
**Closure of the meeting**  
F. Cruz, Porto (PT)
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)

Saturday, 25 March
10:15 - 14:00

Location: Room London, North Hall (Level 1)
Chair: J. Walz, Marseille (FR)

Aims and objectives of this presentation
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 standardization 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.

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, Heidelberg (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
To be confirmed

10:36 - 10:40
Discussion

10:40 - 10:48
Alternatives to MRI: Where are we with ultrasound based imaging?
To be confirmed

10:48 - 10:52
Discussion

10:52 - 11:00
Lessons learned from mammography: The way to certification
To be confirmed

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, Milan (IT)

11:36 - 11:40  
Discussion

11:40 - 12:36  
**Staging of prostate cancer**

**Moderators:**  
L. Budäus, Hamburg (DE)  
T. Maurer, Munich (DE)  
R. Schiavina, Bologna (IT)

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**  
To be confirmed

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**
12:43 - 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 presentation

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?**

To be confirmed

### 10:30 - 10:40

**Epispadais-extrophy complex in males: Genital and urinary tract reconstruction**

R. Djinovic, Belgrade (RS)

### 10:40 - 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?**

To be confirmed
<table>
<thead>
<tr>
<th>Time</th>
<th>Session</th>
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<tbody>
<tr>
<td>11:30 - 12:10</td>
<td><strong>Poster urethra reconstruction</strong></td>
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<td><strong>Moderators:</strong> R. Dahlem, Hamburg (DE)</td>
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<td>11:30 - 11:40</td>
<td><strong>Post TURP membranous urethra stricture: Sphincter-preserving technique</strong></td>
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<td>R. Gomez, Santiago (CL)</td>
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<td>11:40 - 11:50</td>
<td><strong>Delayed urethroplasty after failed realignment in the treatment of pelvic fracture related injuries: Easier or not?</strong></td>
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<td>N. Lumen, Ghent (BE)</td>
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<td>11:50 - 12:00</td>
<td><strong>New generation urethral and ureteral stents: The best solution for the worst scenarios?</strong></td>
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<td>O.R. Sedigh, Torino (IT)</td>
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<td>12:00 - 12:10</td>
<td><strong>Recto-urethral fistula after radiotherapy for prostate cancer</strong></td>
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<td>L. Gómez Pérez, San Juan De Alicante (ES)</td>
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<td>12:10 - 12:45</td>
<td><strong>Penile transplant: Genito-urinary trauma/Penile cancer</strong></td>
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<td><strong>Moderators:</strong> R. Djinovic, Belgrade (RS)</td>
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<td>D.J. Ralph, Chesham (GB)</td>
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<td>L. Schechter, Morton Grove, IL (US)</td>
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<td>12:10 - 12:20</td>
<td><strong>Penile transplant: Evolution of vascularized composite</strong></td>
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<tr>
<td>12:20 - 12:25</td>
<td><strong>Discussion</strong></td>
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<td>12:25 - 12:35</td>
<td><strong>Battlefield injuries: Reconstructing of the blast injured perineum</strong></td>
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<td>P. Anderson, Dorridge (GB)</td>
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<td>12:35 - 12:45</td>
<td><strong>Pelvic fracture with bladder neck/posterior urethra injuries</strong></td>
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<td>A.R. Mundy, London (GB)</td>
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<td>12:45 - 13:25</td>
<td><strong>Upper tract reconstruction</strong></td>
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<td><strong>Moderators:</strong> S. Deger, Ostfildern (DE)</td>
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<td>M. Gallucci, Rome (IT)</td>
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<td>12:45 - 12:55</td>
<td><strong>Intra-corporeal urinary diversions: Technique, outcomes and robotic management of late complications</strong></td>
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<td>G. Simone, Rome (IT)</td>
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<td>12:55 - 13:05</td>
<td><strong>Robotic/laparoscopic ureteral reimplantation versus open ureteral reimplantation</strong></td>
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<td>M.S. Silay, Istanbul (TR)</td>
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<td>13:05 - 13:15</td>
<td>** Continent urinary diversion for severe bladder dysfunction**</td>
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<td>M.A.B. Fahmy, Cairo (EG)</td>
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<td>13:15 - 13:25</td>
<td><strong>Neobladder complications: How to solve them?</strong></td>
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<td>V. Pansadoro, Rome (IT)</td>
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<td>13:55 - 14:05</td>
<td>Management of neo-urethral complications after total phalloplasty</td>
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<td>14:05 - 14:15</td>
<td>Penile implant surgery</td>
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<td>14:45 - 14:55</td>
<td>Penile implant in unusual cases: How to place it properly?</td>
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<td>Time</td>
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N. Tomada, Porto (PT)                                 |
| 15:25 - 15:35 | Comparison of AUS: Advantages and disadvantages                               | T.S. Pottek, 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 presentation
Following a more than 10-year tradition of Live-surgery sessions, the EAU-Section of Uro-Technology (ESUT) presents an ambitious programme focussing 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 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 on-line.

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
To be confirmed
M. Brown, Ardross (AU)
To be confirmed
J.M. Glass, Ealing (GB)
To be confirmed
S. Malde, Uxbridge (GB)
R. Thurairaja, Harpenden (GB)

Endourology coordinator
M. Bultitude, London (GB)

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

10:30 - 10:35
Welcome and introduction
E. Liatsikos, Patras (GR)
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<tr>
<th>Time</th>
<th>Session</th>
<th>Details</th>
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<tbody>
<tr>
<td>10:35 - 10:40</td>
<td>Ethics of Live-Surgery: Cases from last year</td>
<td>M. Straub, Munich (DE)</td>
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<td>10:40 - 12:20</td>
<td>Live-Surgery Part I</td>
<td><strong>Moderators:</strong> C. Anderson, London (GB)</td>
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<td>A. Breda, Barcelona (ES)</td>
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<td>R.E. Sanchez-Salas, Paris (FR)</td>
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<td>P. Tenke, Budapest (HU)</td>
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<td>P.J. Zondervan, Amsterdam (NL)</td>
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<td>10:40 - 11:00</td>
<td>3D-4K Nerve sparing extraperitoneal radical prostatectomy</td>
<td>J-U. Stolzenburg, Leipzig (DE)</td>
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<td>11:00 - 11:20</td>
<td>Robotic neurosafe radical prostatectomy</td>
<td>A. Haese, Hamburg (DE)</td>
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<td>11:20 - 11:40</td>
<td>Robotic radical cystectomy using Da Vinci Si</td>
<td>N.P. Wiklund, Stockholm (SE)</td>
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<td>11:40 - 11:50</td>
<td>Bipolar bladder tumour resection with PDD</td>
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<td>11:50 - 12:05</td>
<td>MIP: A novel concept of PCNL</td>
<td>M. Bultitude, London (GB)</td>
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<td>H. Ratan, Nottingham (GB)</td>
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<td>12:05 - 12:20</td>
<td>Supine Endoscopic Combined Intrarenal Surgery (ECIRS)</td>
<td>S.J. Gordon, Brighton (GB)</td>
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<td>B.K. Somani, Southampton (GB)</td>
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<td>12:20 - 14:05</td>
<td>Live-Surgery Part II</td>
<td><strong>Moderators:</strong> A.E. Canda, Ankara (TR)</td>
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<td>T. Knoll, Sindelfingen (DE)</td>
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<td>F. Montorsi, Milan (IT)</td>
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<td>D. Veneziano, Reggio Calabria (RC) (IT)</td>
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<td>12:20 - 12:30</td>
<td>Pre-recorded video: Upper tract TCC</td>
<td>A. Breda, Barcelona (ES)</td>
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<td>12:30 - 12:40</td>
<td>Pre-recorded video: FURS tumour NBI</td>
<td>M. Brehmer, Aarhus N (DK)</td>
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<td>12:40 - 12:50</td>
<td>Pre-recorded video: En-Bloc resection of bladder tumour with HD-PDD</td>
<td>A. Karl, Munich (DE)</td>
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<td>12:50 - 13:00</td>
<td>Pre-recorded video: Bipolar enucleation of prostate</td>
<td>T.R.W. Herrmann, Hannover (DE)</td>
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<td>13:00 - 13:10</td>
<td>Pre-recorded video: Electromagnetic guided percutaneous puncture</td>
<td>E.A.R. Lima, Braga (PT)</td>
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</table>
13:10 - 13:30  
**Robotic partial nephrectomy using Da Vinci XI**  
A. Mottrie, Aalst (BE)

13:30 - 13:50  
**3D-4K Laparoscopic partial nephrectomy**  
A. Alcaraz, Barcelona (ES)

13:50 - 14:05  
**Prone percutaneous nephrolithotripsy**  
E. Liatsikos, Patras (GR)

14:05 - 15:55  
**Live-Surgery Part III**

**Moderators:** To be confirmed  
- P. Dasgupta, London (GB)  
- F. Gomez Sancha, Madrid (ES)  
- N. Peter, Budapest (HU)  
- B. Turna, Izmir (TR)

14:05 - 14:25  
**Robotic neobladder reconstruction**  
J. Kelly, London (GB)

14:25 - 14:40  
**Holmium prostate enucleation**  
To be confirmed

14:40 - 14:55  
**Single use flexible ureteroscopic lithotripsy**  
O. Wiseman, Cambridge (GB)

14:55 - 15:05  
**Pre-recorded video: Bipolar enucleation of the prostate**  
T. Bach, Hamburg (DE)

15:05 - 15:15  
**Pre-recorded video: 50W Holmium prostate enucleation**  
C.M. Scoffone, Turin (IT)

15:15 - 15:25  
**Pre-recorded video: NBI-assisted resection of bladder tumour**  
B. Malavaud, Toulouse (FR)

15:25 - 15:35  
**Pre-recorded video: Monopolar prostate enucleation**  
To be confirmed

15:35 - 15:55  
**ICG-guided laparoscopic partial nephrectomy**  
F. Porpiglia, Turin (IT)

15:55 - 17:45  
**Live-Surgery Part IV**

**Moderators:**  
- T. Bach, Hamburg (DE)  
- A.Y. Muslumanoglu, Istanbul (TR)  
- P.J.S. Oster, Fredericia (DK)  
- A. Papatsoris, Marousi - Athens (GR)  
- K. Sarica, Istanbul (TR)  
- O. Traxer, Paris (FR)

15:55 - 16:10  
**Flexible ureteroscopic lithotripsy with Boa Vision**  
C.C. Seitz, Vienna (AT)

16:10 - 16:25  
**Digital flexible ureteroscopic lithotripsy**
16:25 - 16:35  
**Pre-recorded video: Robotic renal transplantation**  
L. Ajayi, London (GB)

16:35 - 16:45  
**Pre-recorded video: Flexible URS (FURS) using digital Cobra**  
M. Stöckle, Homburg (DE)

16:45 - 16:55  
**Pre-recorded video: Holmium prostate vaporisation**  
M. Straub, Munich (DE)

16:55 - 17:05  
**Pre-recorded video: Prostate enucleation using low energy pulsed thulium laser with preservation of ejaculation**  
J. Roche, Bordeaux (FR)

17:05 - 17:15  
**Pre-recorded video: Aquablation**  
To be confirmed

17:15 - 17:25  
**Pre-recorded video: Thulium prostate enucleation**  
G. Muto, Roma (IT)

17:25 - 17:35  
**Pre-recorded video: Urolift under local anesthesia**  
T.A. McNicholas, Herts (GB)

17:35 - 17:45  
**Pre-recorded video: Isiris Single use stent removal system**  
To be confirmed
### How to write an introduction and material and methods

**ESU Course 01**

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<thead>
<tr>
<th>Location:</th>
<th>Room 10, Capital suite (level 3)</th>
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<tr>
<td>Chair:</td>
<td>To be confirmed</td>
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</table>

**Saturday, 25 March**

11:00 - 13:00
Aims and objectives of this presentation

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 post natal management
J.M. Nijman, Groningen (NL)

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

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

Discussion
### Robot-assisted laparoscopic prostatectomy

**ESU Course 04**

<table>
<thead>
<tr>
<th>Time</th>
<th>Session</th>
<th>Speakers</th>
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</thead>
<tbody>
<tr>
<td>11:00 - 14:00</td>
<td><strong>Introduction</strong></td>
<td>P-T. Piéchaud, Bordeaux (FR)</td>
</tr>
<tr>
<td>11:00 - 14:00</td>
<td><strong>General principles of robotic radical prostatectomy</strong></td>
<td>W. Artibani, Verona (IT)</td>
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<td></td>
<td>P. Dasgupta, London (GB)</td>
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<tr>
<td>11:00 - 14:00</td>
<td><strong>Anatomical and oncological supports of radical prostatectomy</strong></td>
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<tr>
<td>11:00 - 14:00</td>
<td><strong>Bladder neck preservation: Useful? Dangerous?</strong></td>
<td>P-T. Piéchaud, Bordeaux (FR)</td>
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<tr>
<td>11:00 - 14:00</td>
<td><strong>Neurovascular bundle dissection: Anatomical reminders of the peri prostatic fascia and space of dissection</strong></td>
<td>P. Dasgupta, London (GB)</td>
</tr>
<tr>
<td>11:00 - 14:00</td>
<td><strong>Tips and tricks around vesico uretral anastomosis (Rocco, anterior suspension...)</strong></td>
<td>W. Artibani, Verona (IT)</td>
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<tr>
<td>11:00 - 14:00</td>
<td><strong>Step by step operative procedure; How I do it</strong></td>
<td>W. Artibani, Verona (IT)</td>
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<td>P. Dasgupta, London (GB)</td>
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<td>P-T. Piéchaud, Bordeaux (FR)</td>
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<tr>
<td>11:00 - 14:00</td>
<td><strong>Questions from participants about operative protocols</strong></td>
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<tr>
<td>11:00 - 14:00</td>
<td><strong>Lymphadenectomy</strong></td>
<td>W. Artibani, Verona (IT)</td>
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<td>11:00 - 14:00</td>
<td><strong>Specific situations</strong></td>
<td>P-T. Piéchaud, Bordeaux (FR)</td>
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<td>11:00 - 14:00</td>
<td><strong>Postoperative complications</strong></td>
<td>P. Dasgupta, London (GB)</td>
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<tr>
<td>11:00 - 14:00</td>
<td><strong>Anatomical and functional results</strong></td>
<td>W. Artibani, Verona (IT)</td>
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<tr>
<td>11:00 - 14:00</td>
<td><strong>Conclusion</strong></td>
<td>P-T. Piéchaud, Bordeaux (FR)</td>
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</tbody>
</table>
# Adrenalectomy

**ESU Course 06**

**Saturday, 25 March**
**11:00 - 14:00**

**Location:** Room 16, Capital suite (level 3)

**Chair:** A.S. Gözen, Heilbronn (DE)

**Aims and objectives of this presentation**
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.

<table>
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<tr>
<th>Time</th>
<th>Session</th>
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<tbody>
<tr>
<td>11:00 - 14:00</td>
<td><strong>Indications and patient preparation (medical and surgical)</strong></td>
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<tr>
<td></td>
<td>H. Langenhuijsen, Nijmegen (NL)</td>
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<tr>
<td>11:00 - 14:00</td>
<td><strong>Surgical anatomy</strong></td>
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<td>F. Porpiglia, Turin (IT)</td>
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<tr>
<td>11:00 - 14:00</td>
<td><strong>How I do it; step by step operative procedure, technical tips and tricks</strong></td>
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<tr>
<td>11:00 - 14:00</td>
<td><strong>Transperitoneal</strong></td>
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<td>H. Langenhuijsen, Nijmegen (NL)</td>
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<td>11:00 - 14:00</td>
<td><strong>Retroperitoneal and prone</strong></td>
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<td>A.S. Gözen, Heilbronn (DE)</td>
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<tr>
<td>11:00 - 14:00</td>
<td><strong>Mini-laparoscopic</strong></td>
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<td>F. Porpiglia, Turin (IT)</td>
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<tr>
<td>11:00 - 14:00</td>
<td><strong>Complications and management</strong></td>
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<td></td>
<td>A.S. Gözen, Heilbronn (DE)</td>
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<tr>
<td>11:00 - 14:00</td>
<td><strong>Discussion and interaction</strong></td>
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<tr>
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<td>A.S. Gözen, Heilbronn (DE)</td>
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<td></td>
<td>H. Langenhuijsen, Nijmegen (NL)</td>
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<tr>
<td></td>
<td>F. Porpiglia, Turin (IT)</td>
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<tr>
<td>Location:</td>
<td>Room South America, Exhibition Hall (Level 1)</td>
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**Aims and objectives of this presentation**

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.
ESU/ESFFU Hands-on Training course in OnabotulinumtoxinA administration for OAB
HOT16

**Location:** Room Europe, Exhibition Hall (Level 1)

**Chair:** H. Hashim, Bristol (GB)

**Aims and objectives of this presentation**

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.

R. Inman, Sheffield (GB)
M.S. Rahnama'i, Heerlen (NL)
A. Sahai, London (GB)
Saturday, 25 March
12:00 - 14:15

Location: Room 9, Capital suite (level 3)
Chair: P.F.A. Mulders, Nijmegen (NL)

Aims and objectives of this presentation
Introduction of EAU research foundation and its activity in the urology research community

12:00 - 12:10  
Welcome  
P.F.A. Mulders, Nijmegen (NL)

12:10 - 12:25  
Lecture by EAU career track fellow Castration resistant PC: Causal mechanisms and novel therapeutic targets after androgen receptor blockade failure  
A. Aytes, Barcelona (ES)

12:25 - 12:40  
Active surveillance of patients with incidental small renal masses. EAU Research Foundation project ´EASE´  
A. Volpe, Novara (IT)

12:40 - 12:55  
The role of image guidance in the diagnosis of PCa. EAU Research Foundation project ´PRECISION´  
V. Kasivisvanathan, London (GB)

12:55 - 13:25  
Designing, conducting and communicating ´Investigator Initiated Research´ at the EAU Research Foundation.  
W.P.J. Witjes, Arnhem (NL)

13:10 - 13:25  
Selection of male patients for minimal invasive therapy of stress urinary incontinence. EAU Research Foundation project ´SATURN´  
R. Hamid, London (GB)

13:25 - 13:40  
The continuing challenge of antibiotic resistance in Urinary Tract Infections. EAU Research Foundation project ´GPIU/SERPENS´  
T.E. Bjerklund Johansen, Stavern (NO)

13:40 - 13:55  
Patient selection for adjuvant treatment of high risk NMIBC. EAU Research Foundation project ´NIMBUS´  
M. Colombel, Lyon (FR)

13:55 - 14:10  
Adjuvant treatment of MIBC: Results and lessons learned from the MAGNOLIA study. EAU Research Foundation project ´MAGNOLIA´  
P.F.A. Mulders, Nijmegen (NL)

14:10 - 14:15  
Closure and farewell  
P.F.A. Mulders, Nijmegen (NL)
How to proceed with hematuria
ESU Course 03

| Location: | Room 12, Capital suite (level 3) |
| Chair: | S. Boorjian, Rochester (US) |

**Aims and objectives of this presentation**
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 05

Location: Room 15, Capital suite (level 3)
Chair: M. Kuczyk, Hanover (DE)

Aims and objectives of this presentation
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)

12:00 - 14:00
The role of cytoreductive nephrectomy in metastatic renal cancer
M. Kuczyk, Hanover (DE)

12:00 - 14:00
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)

12:00 - 14:00
The surgical strategy for the management of renal cancer with intracaval thrombosis
A. Bex, Amsterdam (NL)

12:00 - 14:00
The role of lymphadenectomy during the surgical treatment of RCC patients
M. Kuczyk, Hanover (DE)
ESU/ESUT Hands-on Training in Basic laparoscopic skills
HOT03

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

Aims and objectives of this presentation
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.
**ESU/ESFFU Hands-on Training in Urodynamics**

**HOT06**

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

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

**Saturday, 25 March**  
**13:00 - 16:00**

**Aims and objectives of this presentation**
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.

**Programme:**
- **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

E. Finazzi Agrò, Rome (IT)  
R. Kirschner-Hermanns, Aachen (DE)  
T. Mckinney, Fort Lauderdale (US)  
To be confirmed  
P.F.W.M. Rosier, Nijmegen (NL)  
To be confirmed
ESU/ESFFU Hands-on Training course in OnabotulinumtoxinA administration for OAB

HOT17

**Location:** Room Europe, Exhibition Hall (Level 1)

**Chair:** To be confirmed

Aims and objectives of this presentation
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.

A. Garcia Mora, Mexico City (MX)
R. Hamid, London (GB)
M.S. Rahnama'i, Heerlen (NL)
**Aims and objectives of this presentation**

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.

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**Preliminary kidney parenchymal ligation to achieve trifecta in zero-ischemia laparoscopic partial nephrectomy**

By: Komai Y.¹, Gotohda N.², Sakai Y.¹, Ito M.¹

Institutes: ¹National Cancer Center Hospital East, Dept. of Urology, Chiba, Japan, ²National Cancer Center Hospital East, Dept. of Hepatobiliary and Pancreatic Surgery, Chiba, Japan

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**Off-clamp laparoscopic partial nephrectomy for hilar renal cell carcinoma: Surgical description**

By: Al Salhi Y.¹, Fuschi A.¹, Velotti G.¹, Leto A.¹, Pastore A.L.¹, Palleschi G.¹, Carbone A.¹, Falsaperla M.²

Institutes: ¹Sapienza University of Rome, Dept. of Medico-Surgical Sciences and Biotechnologies, Urology Unit, Latina, Italy, ²Hospital Vittorio Emanuele, Dept. of Urology, Catania, Italy

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**Selective calmping of terziary arterial branch during laparoscopic partial nephrectomy thanks to 3d reconstruction of the vascular pedicle**

By: Varca V., Benelli A., Gregori A.

Institutes: Ospedale Salvini, Dept. of Urology, Garbagnate Milanese, Italy

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**Kidney mobilization and rotation during laparoscopic partial nephrectomy for access to dorsal and/or upper pole tumors**

By: Macek P., Novak K., Pesl M.

Institutes: General University Hospital and Medical Faculty of Charles University In Prague, Dept. of Urology, Prague, Czech Republic

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**Laparoscopic extraperitoneal renal tumor enucleation (LERTE) with renal hypotension on demand for endophitic masses**

By: Cochetti G., Barillaro F., D’amico F., Boni A., Pohja S., Mearini E.

Institutes: University of Perugia, Dept. of Surgical and Biomedical Sciences, Division of Urological Andrological Surgery and Minimally-Invasive Techniques, Perugia, Italy

---

**Laparoscopic partial nephrecyomy for a small renal mass on an allograft kidney**

By: Ozden E., Oner S., Yakupoglu Y.K., Bostanci Y., Yilmaz A.F., Sarikaya S.

Institutes: Ondokuz Mayis University, Dept. of Urology, Samsun, Turkey
Aims and objectives of this presentation
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., Gild P., Von Landenberg N., Friedlander D., Esware J., Menon M., Chun F., Fisch M., Sun M., Chung B., Chang S., Trinh Q.
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, Henry Ford Health System, VUI Center For Outcomes Research, Analytics and Evaluation, Vattikuti Urology Institute, Detroit, United States of America, 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, Elmansoura, Egypt

*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., Ruggera L., Destefanis P., Dadone C., Schips L., Marchioni M., Ferrari G.
Institutes: Asl Abruzzo 02, Dept. of Urology, Chieti, Italy, Azienda Ospedaliera Città della Salute E della Scienza Di Torino – Sede Molinette, Dept. of Urology, Torino, Italy, Azienda Ospedaliera Città della Salute E della Scienza Di Torino - Sede Cuneo, Dept. of Urology, Cuneo, Italy, SS. Annunziata Hospital G.D'Annunzio University of Chieti, Dept. of Urology, Chieti, Italy, Hesperia Hospital, Dept. of Urology, Modena, Italy

*186 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., Eberl 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.¹, Orye C.², Cartuyvels R.³, Van Renterghem K.¹
Institutes: ¹Jessa Ziekenhuis, Dept. of Urology, Hasselt, Belgium, ²UZLeuven, Dept. of Urology, Leuven, Belgium, ³Jessa 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.¹, Robert G.², Comat V.², Roupret M.³, Gomez-Sancha F.⁴, Cornu J-N.⁵, Misrai V.⁶
Institutes: ¹University of Rennes, Dept. of Urology, Rennes, France, ²University of Bordeaux, Dept. of Urology, Bordeaux, France, ³Pitié Salpêtrière Hospital, Dept. of Urology, Paris, France, ⁴CUA - Clinica CEMTRO, Dept. of Urology, Madrid, Spain, ⁵University of Rouen, Dept. of Urology, Rouen, France, ⁶Clinique 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.¹, Capitanio U.¹, Ventimiglia E.¹, Cazzaniga W.¹, Pederzoli F.¹, Boeri L.², Oreggia D.¹, Moretti D.¹, Briganti A.², Cathelineau X.², Montorsi F.³, Salonia A.¹
Institutes: ¹IRCCS 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, ³Institut 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.¹, Saleemi M.¹, Barras B.¹, Tanjea S.¹, Alam A.¹, Mohammed A.¹, Nunney I.²
Institutes: ¹Luton and Dunstable Hospital NHS Foundation Trust, Dept. of Urology, Luton, United Kingdom, ²Norwich 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 prostatic urethral lift (PUL)
By: Roehrborn C.¹, Gange S.², Shore N.³, Giddens J.⁴, Bolton D.³, Cowan B.³, Cantwell A.⁷, Mcvary K.⁸, Chin P.⁸, Te A.¹⁰, Gholami S.¹¹, Rashid P.¹², Moseley W.¹³, Tutrone R.¹⁴, Freedman S.¹⁵, Incze P.¹⁶, Coffield K.¹⁷, Borges F.¹⁸, Rukstalis D.¹⁹
Institutes: ¹UT Southwestern Medical School, Dept. of Urology, Dallas, United States of America, ²Western Urological Clinic, Dept. of Urology, Salt Lake City, United States of America, ³Carolina Urologic Research Center, Dept. of Urology, Myrtle Beach, United States of America, ⁴Jonathan Giddens Medicine Professional Corporation, Dept. of Urology, Brampton, Canada, ⁵Austin Health, Dept. of Urology, Heidelberg, Australia, ⁶Urology Associates of Denver, Dept. of Urology, Englewood, United States of America, ⁷Advanced Urology Institute, Dept. of Urology, Daytona Beach, United States of America, ⁸Southern Illinois University, Dept. of Urology, Springfield, United States of America, ⁹Illawarra Urology, Dept. of Urology, Figtree, Australia, ¹⁰Weill Cornell Medical Center, Dept. of Urology, New York, United States of America, ¹¹Urology Associates of Silicon Valley, Dept. of Urology, San Jose, United States of America, ¹²Urology Centre, Dept. of Urology, Port Macquarie, Australia, ¹³Genesis Research LLC, Dept. of Urology, San Diego, United States of America, ¹⁴Chesapeake Urology Research Associates, Dept. of Urology, Baltimore, United States of America, ¹⁵Sheldon J. Freedman, M.D., Ltd., Dept. of Urology, Las Vegas, United States of America, ¹⁶The Fe/Male Health Centres, Dept. of Urology, Oakville, Canada, ¹⁷Scott and White Healthcare, Dept. of Urology, Temple, United States of America, ¹⁸Pinellas Urology Inc., Dept. of Urology, St. Petersburg, United States of America, ¹⁹Wake Forest Baptist Health, Dept. of Urology, Winston Salem, United States of America

15:30 - 15:38
Associated video presentation Robot-assisted simple prostatectomy (RASP) step by step
procedure and results
P. Umari, Duino-Aurisina (TS) (IT)
**Receptors and targets in functional urology**

**Poster Session 15**

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

**Chairs:** C. Cruz, Porto (PT)  
DM Daly, Lancashire (GB)  
K. Monastyrska, Bern (CH)

**Aims and objectives of this presentation**

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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**193**

**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: ¹Kroto Research Institute, Dept. of Materials Science and Engineering, Sheffield, United Kingdom, ²Middle East Technical University (METU), Dept. of Biotechnology & BIOMATEN, METU Center of Excellence In Biomaterials and Tissue Engineering, Ankara, Turkey, ³METU, Dept. of Biotechnology, Chemistry & BIOMATEN, METU Center of Excellence In Biomaterials and Tissue Engineering, Ankara, Turkey, ⁴Royal Hallamshire Hospital, Dept. of Urology, Sheffield, United Kingdom, ⁵METU, Dept. of Biotechnology, Biological Sciences & BIOMATEN, METU Center of Excellence In Biomaterials and Tissue Engineering, Ankara, Turkey

Associated video presentation

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**194**

**9-Phenanthrol modifies rat bladder function independent of TRPM4**

By: Deruyver Y.¹, Uvin P.¹, Pinto S², Van Ranst N.², Franken J.², Gevaert T.¹, Everaerts W.¹, Voets T.², De Ridder D.¹, Vennekens R.²

Institutes: ¹KU Leuven, Laboratory of Experimental Urology, Leuven, Belgium, ²KU Leuven, Laboratory of Ion Channel Research, Leuven, Belgium

Associated video presentation

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**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.², 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

Associated video presentation

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**196**

**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: ¹Tottori University Faculty of Medicine, Dept. of Urology, Yonago, Japan, ²Kochi Medical School, Dept. of Pharmacology, Nankoku, Japan
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, Hirasawa H.², Homma Y.³, Igawa Y.¹
Institutes: ¹The University of Tokyo Graduate School of Medicine, Dept. of Continence Medicine, Tokyo, Japan, ²Kissei Pharmaceutical Co., Ltd., Discovery Research R&D, Azumino, Japan, ³The University of Tokyo Graduate School of Medicine, Dept. of Urology, Tokyo, Japan

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

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.¹, Hashemi Gheinani A.², Koeck I.², Monastyrskaya K.²
Institutes: ¹University Hospital Bern, Dept. of Urology, Bern, Switzerland, ²Urology Research Laboratory, Dept. of Clinical Research, Bern, Switzerland

Inflamomsome is an important mediator of chronic bladder inflammation in spontaneously hypertensive rats
By: Mizoguchi S., Mori K., Sato F., Hiromitsu M.
Institutes: Oita University, Dept. of Urology, Yuhu, Japan

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

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

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
Associated video presentation

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**Effects of litoxetine on acetic acid-induced detrusor overactivity and striated anal sphincter functions in rabbits: Comparison with duloxetine**

By: Pérez-Martínez F., Lluel P., Vela-Navarrete R.

Institutes: 1 Urosphere, Dept of Pharmacology, Toulouse, France, 2 Universidad Autónoma De Madrid, Dept. of Urology, Madrid, Spain

Associated video presentation

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**The stem cell growth factor receptor KIT is not expressed on interstitial cells in bladder**

By: Gevaert T., Vanstreels E., Daelemans D., Everaerts W., Van Der Aa F., Pintelon I., Timmermans J-P., Roskams T., Steiner C., Neuhaus J., De Ridder D.

Institutes: 1 UZ Leuven, Dept. of Urology, Leuven, Belgium, 2 KU Leuven, Rega Institute For Medical Research, Leuven, Belgium, 3 University of Antwerp, Dept. of Veterinary Sciences, Antwerp, Belgium, 4 KU Leuven, Dept. of Pathology, Leuven, Belgium, 5 University of Leipzig, Klinik Und Poliklinik Für Urologie, Leipzig, Germany

Associated video presentation
Ongoing prospective trials
Poster Session 16

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 presentation
To show what is currently going on in oncologic urology and other fields in urology regarding multi center 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)

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

Prostate cancer intra-tumoral heterogeneity: Correlation between clinical parameters, mpMRI and biomarkers
Institutes: University College London, Dept. of Surgery and Interventional Science - 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

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., Ahmed K., Aydin A., Van Der Poel H., Mottrie A., Dasgupta P.
Institutes: King's College London, MRC Centre For Transplantation, London, United Kingdom, Netherlands Cancer Institute, Dept. of Urology, Amsterdam, The Netherlands, 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., Mariani L., Anichini A., Giannatempo P., Raggi D., Togliandi E., Calareso G., Nicolai N., Crippa F., Biasoni D., Torelli T., Catanzaro M., Stagni S., Piva L., Salvioni R.
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, Dept. of 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

**IMvigor010, a Phase III study of adjuvant atezolizumab vs observation in patients (pts) with muscle-invasive urothelial carcinoma (UC)**
By: Gschwend J., Bellmunt J., Castellano D., Daneshmand S., Giannatempo P., Raggi D., Togliandi E., Calareso G., Nicolai N., Crippa F., Biasoni D., Torelli T., Catanzaro M., Stagni S., Piva L., Salvioni R.
Institutes: Technical University of Munich, Dept. of Urology, München, Germany, Bladder Cancer Center, Dana-Farber/Brigham and Women's Cancer Center, Harvard Medical School, Boston, United States of America, Hospital Universitario 12 De Octubre, Dept. of Oncology, Madrid, Spain, University of Southern California, Dept. of Oncology, Los Angeles, United States of America, Northwestern University, Dept. of Oncology, Chicago, United States of America, University of Tsukuba, Dept. of Oncology, Ibaraki, Japan, Barts Cancer Institute, Queen Mary University of London, London, United Kingdom, Genentech, Inc., Dept. of Oncology, South San Francisco, United States of America, Roche, Dept. of Oncology, Basel, Switzerland, Hôpital 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., Xing D., Dutcus C., Baig M., Fishman M.
Institutes: Texas Oncology, Dallas, United States of America, Eisai, Woodcliff Lake, United States of America, 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., Grünwald V., Bedke J.
Institutes: Jena University Hospital, Dept. of Urology, Jena, Germany
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.\textsuperscript{1}, Mariani L.\textsuperscript{2}, Anichini A.\textsuperscript{3}, Giannatempo P.\textsuperscript{1}, Raggi D.\textsuperscript{1}, Togliardi E.\textsuperscript{4}, Calareso G.\textsuperscript{5}, Nicolai N.\textsuperscript{6}, Crippa F.\textsuperscript{7}, Salvioni R.\textsuperscript{6}

Institutes: Fondazione IRCCS - Istituto Nazionale Dei Tumori, Dept. of Medical Oncology, Milan, Italy,\textsuperscript{1} Fondazione IRCCS - Istituto Nazionale Dei Tumori, Clinical Epidemiology and Trials Organization Unit, Milan, Italy,\textsuperscript{2} Fondazione IRCCS - Istituto Nazionale Dei Tumori, Human Tumors Immunobiology Unit, Milan, Italy,\textsuperscript{3} Fondazione IRCCS - Istituto Nazionale Dei Tumori, Pharmacy Unit, Milan, Italy,\textsuperscript{4} Fondazione IRCCS - Istituto Nazionale Dei Tumori, Dept. of Radiology, Milan, Italy,\textsuperscript{5} Fondazione IRCCS - Istituto Nazionale Dei Tumori, Dept. of Urology, Milan, Italy,\textsuperscript{6} 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.\textsuperscript{1}, Morris N.\textsuperscript{2}, Delgado D.\textsuperscript{2}, Prieto J.\textsuperscript{1}, Moore K.\textsuperscript{3}, Macaulay M.\textsuperscript{4}, Fader M.\textsuperscript{1}

Institutes: University of Southampton, Dept. of Health Sciences, Southampton, United Kingdom,\textsuperscript{1} Bristol Urological Institute, Dept. of Learning and Research, Bristol, United Kingdom,\textsuperscript{2} University of Alberta, Faculty of Nursing, Alberta, Canada,\textsuperscript{3} University College London, Continence & Skin Technology Group, London, United Kingdom

Summary

J. Bellmunt
Ureteroscopy: Tools and techniques

Saturday, 25 March
14:15 - 15:45

Location: Room London, North Hall (Level 1)
Chairs: Y. Farahat, Dubai (AE)  
B. Geavlete, Bucharest (RO)  
Y-H. Sun, Shanghai (CN)

Aims and objectives of this presentation
Ureteroscopy has become the working horse 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: Dragó L.B.1, Buttice S.2, Sener E.T.3, Proietti S.4, Ploumidis A.5, Iacoboaeie C.6, Doizi S.5, Berg J.6, Somani B.7, Traxer O.6
Institutes: 1Spitalul Clinic Judeţean de Urgenţă 'Pius Branzeu' Timişoara, Dept. of Urology, Timisoara, Romania, 2Università Degli Studi Di Messina, Dept. of Urology, Messina, Italy, 3Marmara University, Dept. of Urology, Istanbul, Turkey, 4Ospedale San Raffaele, Dept. of Urology, Milan, Italy, 5Athens Medical Center, Dept. of Urology, Athens, Greece, 6Hôpital 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
Institutes: 1Fisabio-Isabial, Dept. of Urology, Alicante, Spain, 2Universitary 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., Lecuelle D., Alezra E., Becquart N., Saint F., De Sousa P.
Institutes: Amiens University Hospital, Dept. of Urology and Transplantation, Amiens, France

*222
Comparison of Holmium laser fibers: Evaluation of fiber durability and flexibility
By: Haddad M.1, Berthe L.2, Doizi S.1, Traxer O.1
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: Tenon Hospital, Dept. of Urology, Paris, France, Ecole 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: Dongguk University Ilsan Hospital, Dept. of Urology, Goyang, South Korea, Seoul Metropolitan Government-Seoul National University Boramae Medical Center, Dept. of Urology, Seoul, South Korea, Gachon 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.³, Bartoletti R.⁴
Institutes: Santa Chiara Hospital, Dept. of Urology, Trento, Italy, Santa Maria Annunziata Hospital, Sexually Transmitted Disease Centre, Florence, Italy, Santa Chiara Hospital, Dept. of Microbiology, Trento, Italy, University of Pisa, Dept. of Urology, Pisa, Italy

Comparison between the possibilities of Holmium and Thulium Laser in Lithotripsy in vitro
By: Glybochko P.¹, Altshuler G.², Vinarov A.³, Rapoport L.¹, Enikeev M.¹, Grigoriev N.¹, Enikeev D.¹, Sorokin N.¹, Dymov A.¹, Sukhanov R.¹, Zamyatina V.³
Institutes: First Moscow State Medical University of I.M. Sechenov, Research Institute of Uropehrology and Reproductive Health, Moscow, Russia, IPG Medical, Dept. of Photonics, Oxford, United States of America, NTO 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

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, Schoeb D.S.¹, Grunwald I.², Richter K.², Brandmann M.², Haberstroh J.³, Bronsert P.³, Miernik A.¹
Institutes: Medical Centre - University of Freiburg, Dept. of Urology - Division of Urotechnology, Freiburg, Germany, Fraunhofer Institute For Manufacturing Technology and Advanced Materials IFAM, Bremen, Germany, Dept. of Adhesive Bonding Technology and Surfaces, Bremen, Germany, Medical Centre - University of Freiburg, Dept. of Experimental Surgery, CEMT-FR, Freiburg, Germany, Medical Centre - University of Freiburg, Institute of Pathology, Freiburg, Germany, Medical 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.³, Maniura-Weber K.², Ren Q.²
Institutes: Kantonsspital St. Gallen, Dept. of Urology, St. Gallen, Switzerland, Swiss Federal Laboratories For Materials Science and Technology, Dept. of Materials Meet Life, Laboratory for Biointerfaces, St. Gallen, Switzerland, Swiss 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. 1, Samuel M 1, Thomas D 1, Rix D 1, Haslam P 2, William R. 1, Shaw M. 1, Rogers A. 1
Institutes: 1 Freeman Hospital, Dept. of Urology, Newcastle Upon Tyne, United Kingdom, 2 Freeman 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
Screening and early detection of prostate cancer: PSA and beyond
Poster Session 18

Location: Room Stockholm, North Hall (Level 1)

Chairs: F. Abdollah, Detroit (US)
        F.C. Hamdy, Oxford (GB)
        M.J. Roobol, Rotterdam (NL)

Aims and objectives of this presentation
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.

*234 An evaluation of a selective prostate cancer screening program using family history as a supplementary screening tool to PSA: Results from the ProtecT trial
By: Johnston T.1, Lamb A.1, Vowler S.2, Xiong T.1, Moore A.1, Holding P.3, Herbert P.1, Davis M.4, Lane A.4, Donovan J.4, Hamdy F.5, Neal D.1
Institutes: University of Cambridge, Academic Urology Group, Cambridge, United Kingdom, 2 Cancer Research UK Cambridge Institute, Li Ka Shing Centre, Cambridge, United Kingdom, 3 University of Oxford, Nuffield Dept. of Surgical Sciences, Oxford, United Kingdom, 4University of Bristol, School of Social and Community Medicine, Bristol, United Kingdom, 5University of Oxford, Nuffield Department of Surgical Sciences, Oxford, United Kingdom

*235 At what age should a PSA-based screening program start? 20-year results from the Göteborg randomized population-based prostate cancer screening study
By: Carlsson S.1, Arnsrud Godtman R.2, Holmberg E.3, Lilja H.4, Månsson M.2, Stranne J.2, Hugosson J.2
Institutes: Memorial Sloan Kettering Cancer Center, Dept. of Urology, New York, United States of America, 2 Sahlgrenska Academy, Dept. of Urology, Gothenburg, Sweden, 3 Sahlgrenska Academy, Dept. of Oncology, Gothenburg, Sweden, 4 Memorial Sloan Kettering Cancer Center, Dept. of Surgery, Malmö, Sweden

*236 Malignancies in male BRCA mutation carriers – results from a prospectively screened cohort of patients enrolled to a dedicated male BRCA clinic
By: Margel D.1, Mano R.1, Benjaminov O.2, Kedar I.3, Ozalvo R.1, Sela S.1, Ber Y.1, Daniel J.1
Institutes: Rabin Medical Center, Dept. of Urology, Petah Tikva, Israel, 2 Rabin Medical Center, Dept. of Imaging, Petah Tikva, Israel, 3 Rabin Medical Center, The Raphael Recanati Genetics Institute, Petah Tikva, Israel

*237 Is further screening of Asian men with low baseline prostate-specific antigen levels (≤1.0 ng/ml) worthwhile?
By: Urata S., Kitagawa Y., Mizokami A.
Institutes: Kanazawa University, Dept. of Urology, Kanazawa, Japan

*238 The use of prostate-specific antigen screening in purchased versus direct care settings: Data from the TRICARE military database
By: Gild P.1, Von Landenberg N.1, Cole A.1, Jiang W.2, Lipsitz S.2, Learm P.3, Sun M.1, Choueiri T.4, Nguyen P.4, Chun F.6, Fisch M.6, Kibel A.1, Menon M.1, Sammon J.7, Koehlmoss T.8, Haider A.2, Trinh Q-D.1
Institutes: Brigham and Women’s Hospital, Harvard Medical School, Division of Urological Surgery
Prostate cancer screening in high risk families: Should PSA testing be performed yearly in first degree relatives with baseline PSA ≥1 ng/ml?
By: Callerot P.1, Moineau M-P.2, Cussonet I.3, Baschet F.3, L’ Her J.1, Doucet L.1, Cancel-Tassin G.3, Cormier L.4, Mangin P.3, Cussonet O.5, Fournier G.1, Valeri A.1
Institutes: 1Brest University Hospital, Dept. of Urology, Brest, France, 2Brest University Hospital, Nuclear Medecine Laboratory, Brest, France, 3Tenon University Hospital, CeRePP (Centre De Recherche Sur Les Pathologies Prostatiques), Paris, France, 4Dijon University Hospital, Dept. of Urology, Dijon, France, 5Tenon University Hospital, Dept. of Urology, Paris, France

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.2, Vickers A.J.2, Assel M.2, Dahlin A2, Carlsson S.1, Poon B.Y.2, Ulmert D.1, Lilja H.G.1
Institutes: 1Memorial Sloan Kettering Cancer Center, Dept. of Urology, New York, United States of America, 2Memorial Sloan Kettering Cancer Center, Dept. of Biostatistics, New York, United States of America, 3Lund University, Clinical Microbiology, Malmo, Sweden

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.1, Kinzikeeva E.1, Losa A.1, Esposito A.2, Cardone G.2, De Cobelli F.3, Del Maschio A.2, Gabardi F.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 Radiology, Milan, Italy

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
Institutes: 1Erasmus MC, Dept. of Urology, Rotterdam, The Netherlands, 2Erasmus MC, Dept. of Public Health, Rotterdam, The Netherlands

Outcomes of PSA-based prostate cancer screening among men using non-steroidal anti-inflammatory drugs
By: Murtola T.1, Vettenranta A.2, Talala K.3, Taari K.4, Stenman U.-H.5, Tammela T.1, Auvinen A.6
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, School of Medicine, Helsinki, Finland, 5Helsinki University Hospital, Dept. of Biochemistry, Helsinki, Finland, 6University of Tampere, School of Health Sciences, Tampere, Finland

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.2, Manka L.4, Recker F.1, Kwiatkowski M.1
Institutes: 1Cantonal Hospital Aarau, Dept. of Urology, Aarau, Switzerland, 2Cantonal Hospital Aarau, Dept. of Laboratory Medicine, Aarau, Switzerland, 3Cantonal Hospital Aarau, Dept. of Pathology, Aarau, Switzerland, 4Academic 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 M², Kolisnik T.², Margrave J.², Aranes M.², Du Plessis M.², Buerki C², Zhao S.², Tenggara I.², 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

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.³, Gschwend J.³, Imkamp F.⁴, Kuczyk M.⁵, Hadaschik B.⁶, Hohenfellner M.⁶, Siener R.⁷, Kristiansen G.⁷, Antoch G.⁷, 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 Universität München, 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

Saturday, 25 March
14:15 - 15:45

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 presentation
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. In addition, 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., Checcucci E., Cattaneo G., Fiori C.
Institutes: San Luigi Hospital, Dept. of Urology, Turin, Italy

*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., Memmos 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.¹, Makarounis K.¹, Ioakimidis N.², Spapis V.¹, Kapogiannis F.³, Angelis A.², Sidiropoulos D.¹, Vlachopoulos C.², Tousoulis D.², Fasoulakis C.¹
Institutes: Hippokration General Hospital Athens, Dept. of Urology, Athens, Greece, Hippokration General Hospital Athens, Medical School, University of Athens, Dept. of Cardiology, Athens, Greece

*254 Which patients with non-symptomatic late onset hypogonadism are suitable for testosterone replacement therapy?
By: Park H.J.¹, Park N.C.¹, Nam J.K.¹, Kim T.N.¹, Moon D.G.²
Institutes: Pusan National University Hospital, Dept. of Urology, Busan, South Korea, Korean University Hospital, Dept. of Urology, Seoul, South Korea

*256 Adverse effects of testosterone replacement therapy for men, a matched cohort study
By:
**Acceptance and safety of axillary testosterone gel (Axiron®) in patients with symptomatic hypogonadism**

By: Probst K.A., Groenewold F., Janssen M., Stoeckle M., Siemer S.

Institutes: Saarland University Medical Center, Dept. of Urology, Homburg, Germany

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**Does calculated free testosterone overcome total testosterone in protecting from sexual symptoms impairment? Findings of a cross-sectional study**

By: Boeri L.¹, Capogrosso P.², Ventimiglia E.², Cazzaniga W.², Pederzoli F.², Oreggia D.², Frego N.², Moretti D.², Montanari E.¹, Gaboardi F.², Mirone V.¹, Montorsi F.², Salonia A.²

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

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**Efficacy of tadalafil for treating chronic prostatitis/chronic pelvic pain syndrome in patients without erectile dysfunction**

By: Park H.J.¹, Park N.C.¹, Moon D.G.², Kim T.N.³, Nam J.K.³, Park S.W.³

Institutes: Busan National University Hospital, Dept. of Urology, Busan, South Korea, Korea University Hospital, Dept. of Urology, Seoul, South Korea, Busan National University Yangsan Hospital, Dept. of Urology, Yangsan, South Korea

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**A survey on Korean urologists practice pattern in surgical management of premature ejaculation**


Institutes: Korea University Guro Hospital, Dept. of Urology, Seoul, South Korea

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**Summary**

A. Salonia, Milan (IT)
ESU/ESUT Hands-on Training in Basic laparoscopic skills
HOT04

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

Aims and objectives of this presentation
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.
Aims and objectives of this presentation

• 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.
Advanced course on urethral stricture surgery
ESU Course 08

**Location:** Room 11, Capital suite (level 3)

**Chair:** R. Inman, Sheffield (GB)

**Aims and objectives of this presentation**
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.

**Scientific Programme**

**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. Martínez-Piñeiro, San Sebastián de los Reyes (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. Martínez-Piñeiro, San Sebastián de los Reyes (ES)
P. Nyirády, Budapest (HU)
# Management of BPO: From medical to surgical treatment

**ESU Course 09**

**Saturday, 25 March**

**14:30 - 17:30**

- **Location:** Room 12, Capital suite (level 3)
- **Chair:** V.A.C. Ramani, Manchester (GB)

**Aims and objectives of this presentation**
- 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.
- Tips and Tricks to improve outcomes and avoid complications.
- To help delegates understand the factors that influence the patient’s and surgeon’s choice of treatment modalities

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<thead>
<tr>
<th>Time</th>
<th>Session Title</th>
<th>Presenter(s)</th>
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<tr>
<td>14:30 - 17:30</td>
<td><strong>Introduction/scene setting BPO 2016</strong></td>
<td>V.A.C. Ramani, Manchester (GB)</td>
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<tr>
<td>14:30 - 17:30</td>
<td><strong>Assessment and medical management</strong></td>
<td>V.A.C. Ramani, Manchester (GB)</td>
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<tr>
<td>14:30 - 17:30</td>
<td><strong>Surgical management ~ Electrosurgery</strong></td>
<td>T.R.W. Herrmann, Hannover (DE)</td>
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<tr>
<td>14:30 - 17:30</td>
<td><strong>Surgical management ~ Lasers and less invasive options</strong></td>
<td>S.A. Ahyai, Göttingen (DE)</td>
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<tr>
<td>14:30 - 17:30</td>
<td><strong>Case presentations</strong></td>
<td>S.A. Ahyai, Göttingen (DE) T.R.W. Herrmann, Hannover (DE)</td>
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## Retropubic radical prostatectomy – Tips, tricks and pitfalls

**ESU Course 10**

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

**Chair:** H. Van Poppel, Leuven (BE)

### Aims and objectives of this presentation

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.

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<tr>
<th>Time</th>
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<tr>
<td>14:30 - 17:30</td>
<td><strong>Introduction</strong></td>
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<tr>
<td></td>
<td>H. Van Poppel, Leuven (BE)</td>
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<td>14:30 - 17:30</td>
<td><strong>Surgical anatomy</strong></td>
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<td>O.W. Hakenberg, Rostock (DE)</td>
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<td>14:30 - 17:30</td>
<td><strong>Step by step radical retropubic prostatectomy</strong></td>
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<td>H. Van Poppel, Leuven (BE)</td>
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<tr>
<td>14:30 - 17:30</td>
<td><strong>Tips, tricks and pitfalls</strong></td>
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<td></td>
<td>O.W. Hakenberg, Rostock (DE)</td>
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<td>14:30 - 17:30</td>
<td><strong>Treatment of complications</strong></td>
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<td>H. Van Poppel, Leuven (BE)</td>
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<tr>
<td>14:30 - 17:30</td>
<td><strong>Discussion and interaction</strong></td>
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Urinary tract and genital trauma
ESU Course 11

Saturday, 25 March
14:30 - 17:30

Location: Room 15, Capital suite (level 3)
Chair: N.D. Kitrey, Ramat Gan (IL)

Aims and objectives of this presentation
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
D.M. Sharma, London (GB)

14:30 - 17:30
General trauma considerations
D.M. Sharma, London (GB)

14:30 - 17:30
Blunt and penetrating renal trauma
N.D. Kitrey, Ramat Gan (IL)

14:30 - 17:30
Ureteric injuries – diagnosis and treatment
D.M. Sharma, London (GB)

14:30 - 17:30
Bulbar and bulbomembranous urethral trauma
N.D. Kitrey, Ramat Gan (IL)

14:30 - 17:30
Bladder, penile and testicular trauma
D.M. Sharma, London (GB)

14:30 - 17:30
Case presentations
D.M. Sharma, London (GB)
N.D. Kitrey, Ramat Gan (IL)
**Aims and objectives of this presentation**
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.

**Scientific Programme**

**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)
ESU/ESFFU Hands-on Training course in OnabotulinumtoxinA administration for OAB

HOT18

Saturday, 25 March
15:30 - 17:00

Location: Room Europe, Exhibition Hall (Level 1)

Chair: To be confirmed

Aims and objectives of this presentation
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.

E. Chartier-Kastler, Paris (FR)
A. Garcia Mora, Mexico City (MX)
M.S. Rahnama'i, Heerlen (NL)
BLEXIT - best perioperative outcomes from cystectomy

Poster Session 20

Saturday, 25 March
16:00 - 17:30

Location: Room Copenhagen, North Hall (Level 1)

Chairs: P. Anderson, Melbourne (AU)
P. Gontero, Turin (IT)
J. McGrath, Exeter (GB)

Aims and objectives of this presentation
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.

*261 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.1, Tatsumi Y.1, Nakai Y.1, Anai S.1, Tanaka N.1, Fujimoto K.1
Institutes: 1Nara Medical University, Dept. of Urology, Nara, Japan, 2Nara Medical University, Dept. of Radiology, Nara, Japan, 3Nara City Hospital, Dept. of Pathology, Nara, Japan

*262 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.1, 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

*263 Can pre-operative functional status (FS) or gait velocity (GV) replace cardiopulmonary exercise testing (CPET) as an independent predictor of survival and complications following radical cystectomy (RC)?
By: Nair R., Downs C., Parsons B., Fynmore T., Omar K., Thurairaja R., Khan M.S.
Institutes: Guy's and St Thomas' NHS Foundation Trust, Dept. of Urology, London, United Kingdom

*264 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, Lurkin I.1, Ziel – Van Der Made A.1, Zwarthoff E.1, Boormans J.3
Institutes: 1Erasmus 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

*265 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, Comploj 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, Québec, Canada

*266 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.1, Leyh-Bannurah S-R.2, Gazdovich S.3, Dell'Oglio P.1, Pompe R.2, Shariat S.4, Montorsi F.1, Briganti A.1, Saad F.5, Karakiewicz P.3
Institutes: IRCCS Ospedale San Raffaele, Division of Oncology/Unit of Urology; URI, Milan, Italy
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., Wahlenfleck W., Hennig M., Ozimek T., Struck J., Tezval H., Merseburger A., Kuczzyk M., Kramer M.

Institutes: University Hospital Schleswig-Holstein, Campus Luebeck, Dept. of Urology, Luebeck, Germany, Kurpark-Klinik, Dept. of Urology, Bad Nauheim, Germany, Hannover Medical School, Dept. of Urology, Hannover, 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

The BAUS radical cystectomy audit 2014/2015 - an update on current practice and an analysis of the effect of centre and surgeon case volume

By: Khadhouri S., Miller C., Cresswell J., Rowe E., Fowler S., Hounslye L., Mcgrath J.S.

Institutes: Royal Devon and Exeter Hospital, Dept. of Urology, Exeter, United Kingdom, South Tees NHS Trust, Dept. of Urology, Middlesbrough, United Kingdom, North Bristol NHS Trust, Dept. of Urology, Bristol, United Kingdom, BAUS, Dept. of Surgery, London, United Kingdom, Public Health England, Dept. of Public Health, London, United Kingdom

Pure but not mixed histological variants are associated with poor survival at radical cystectomy in bladder cancer patients


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 and Center For Surgery and Public Health, Boston, United States of America, Brigham and
Women's Hospital, Harvard Medical School, Division of Urological Surgery and Center For, Boston, United States of America,  
\(^1\)Henry Ford Health System, VUI Center For Outcomes Research, Analytics and Evaluation, Vattikuti Urology Institute, Detroit, United States of America,  
\(^2\)Pitié-Salpêtrière, APHP, University Paris VI, Dept. of Urology, Paris, France,  
\(^3\)Dana Farber Cancer Institute, Dept. of Medical Oncology, Boston, United States of America,  
\(^4\)Brigham and Women's Hospital, Harvard Medical School, Dept. of Radiation Oncology, Boston, United States of America
Complex conditions for urogenital reconstructions

Poster Session 21

Saturday, 25 March
16:00 - 17:30

Location: Room Madrid, North Hall (Level 1)
Chairs: R. Djinovic, Belgrade (RS)
N. Watkin, London (GB)

Aims and objectives of this presentation
Complex conditions in reconstructive patient care is 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.

*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’s 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

*281 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

*282 URETHRAL Stricture Score can predict surgical outcome of urethral reconstruction in patients with anterior urethral stricture
**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:** Toho University Faculty Of Medicine, Dept. of Urology, Ohta, Japan

**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., Loewe C., Dahlem R., Fisch M., Kluth L.  
**Institutes:** University Medical Center Hamburg-Eppendorf, Dept. of Urology, Hamburg, Germany

**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, Garcia Viña A.¹, Poza Del Val M.¹, Miralles Ayuso S.¹  
**Institutes:** Rio Hortega University Hospital, Dept. of Urology, Valladolid, Spain, ²Rio Hortega University Hospital, Dept. of Gynecology, Valladolid, Spain
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)

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 Padova, Dept. of Surgery, Oncology and Gastroenterology - Urology, Padova, Italy

*V38

Single-port robotic assisted radical prostatectomy is feasible and safe

By: Gaboardi F., Grillo M., Giovannalberto P., 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., Guaglianone S., Gallucci M.

Institutes: Regina Elena National Cancer Institute, Dept. of Urology, Rome, Italy

*V40

Radical prostatectomy after vascular targeted photodynamic therapy Tookad® Soluble: Feasability, short and long term results


Institutes: 1Hôpital Center Lyon Sud, Dept. of Urology, Lyon, France, 2Hospital Center, Dept. of Urology, Angers, France, 3Centre Hospitalier Lyon Sud, Dept. of Urology, Lyon, France, 4Hospital Center, Dept. of Urology, Besançon, France, 5Hospital Center, Dept. of Urology, Leuven, Belgium, 6Antoni Van Leeuwenhoek Hospital, Dept. of Urology, Amsterdam, The Netherlands, 7Spire Portsmouth Hospital, Dept. of Urology, Hamburg, Germany, 8Hospital Center, Dept. of Urology, Valencia, Spain, 9Hospital Center, Dept. of Urology, Sevilla, Spain, 10Clinique Atlantis, Dept. of Urology, Nantes, France, 11Centre Hospitalier, Dept. of Urology, Nantes, France, 12Institut Mutualiste Montsouris, Dept. of Urology, Paris, France, 13Institut 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 presentation
The results from the complications perspective 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.

*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, Torino, 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., Pastieric 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)
Institutes: Boramae 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 Viterans Hospital, Dept. of Urology, Gwangju, South Korea, 5Gwanmyeong Gungae Hospital, Dept. of Urology, Gwanmyeong, South Korea

*294
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, Ledbal S.2, Ouzaid I.3, Fontenil A.2, Gerbaud F.3, Ravery V.3, Azzouzi A-R.3, Peyronnet B.1, Bensalah K.1, Verhoest G.1, Vincenideau S.1, Mathieu R.1
Institutes: Rennes University Hospital, Dept. of Urology, Rennes, France, 2University Hospital of Angers, Dept. of Urology, Angers, France, 3Bichat-Claude Bernard Hospital, Dept. of Urology, Paris, France

*295
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, Vincenideau S.1, Sebe P.2, Peyronnet B.1, Guillé P.1, Colau A.2, Verhoest G.1, Bensalah K.1, Guillonneau B.2, Mathieu R.1
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., Becker B., Tiburtius C., Moritz C., Venneri Becci A., Herrmann T., Gross A.
Institutes: Asklepios Klinik Barmbek, Dept. of Urology, Hamburg, Germany, MHH Medical School of Hanover, Dept. of Urology, Hannover, Germany

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., Pastier G., Bensadoun H., Ferrière J-M., Robert G.
Institutes: Chu Bordeaux, Dept. of Urologie, Bordeaux, France

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

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, Torino, 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 presentation
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. 2, Swärd K. 3, Uvelius B. 4
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. 3, Vasquez E. 3, Hashemi Gheinani A. 2, Baumgartner U. 4, Sack B. 3, Lukianov S. 1, Burkhardt 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
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, Constantinides C.1
Institutes: Laiko Hospital, Dept. of Urology, Goudi - Athens, Greece, 2Ecole Polytechnique Federale De Lausanne, Institute of Bioengineering, Lausanne, Switzerland

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, Tworkiewicz J.3, Kwiecinski P.2, Drewa T.3
Institutes: Nicolaus Copernicus University, Dept. of Regenerative Medicine, Bydgoszcz, Poland, 2Vetlab, Brudzew, Poland, 3Nicolaus Copernicus University, Dept. of Regenerative Medicine, Bydgoszcz, 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
Institutes: Nicolaus Copernicus University, 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 A.1, Nanakage T.2, Kaneko S.2, Homma Y.4, Igawa Y.1
Institutes: 1The 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, Toyko, Japan

The neurotransmitters in the periaqueductal grey matter, involved in bladder function
By: Zare A.2, Jahanshahi A.2, Rahnama’i M.S.1, Celine M.2, Van Koeveringe G.1
Institutes: 1Maastricht UMC+, Dept. of Urology, Maastricht, The Netherlands, 2Maastricht University, Dept. of Neuroscience, Maastricht, The Netherlands
**Aims and objectives of this presentation**

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

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**Longitudinal evaluation of health related quality of life following laparoscopic adrenalectomy: Impact of adrenalectomy on cortisol-producing adenoma**


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Nutlin-3a as a novel anticancer agent for adrenocortical carcinoma with CTNNB1 mutation
By: Feng C., Chen S.
Institutes: Huashan Hospital Fudan University, Dept. of Urology, Shanghai, China

Programmed death-ligand 1 expression in pheochromocytoma
By: Yasuhiro H., Tanaka T., Imai A., Hatakeyama S., Yoneyama T., Koie T., Ohyama C.
Institutes: Hiroshima University Graduate School of Medicine, Dept. of Urology, Hiroshima, 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, Tokyo University of Science, Dept. of Pharmaceutical Sciences, Noda, Japan, Yokohama Rosai Hospital, Endocrinology & Diabetes Center, Yokohama, Japan, California University of Science and Medicine, School of Medicine, Dept. of Medical Education, Colton, United States of America, Keio University School of Medicine, Dept. of Biochemistry, Shinjuku, Japan, Keio 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
Institutes: Tohoku University Graduate School Of Medicine, Division Of Clinical Hypertension, Endocrinology & Metabolism, Sendai, Japan, Tohoku University Hospital, Division of Nephrology, Endocrinology and Vascular Medicine, Sendai, Japan, Tohoku University Hospital, Dept. of Urology, Sendai, Japan, Tohoku 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: Knežević N., Milas I., Kuliš T., Penezić L., El Saleh A., Bačak Kocman I., Kaštelan Z.
Institutes: University Hospital Zagreb, Dept. of Urology, Zagreb, Croatia, University 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, CHU D'Amiens, Dept. of Urology, Amiens, France, CHU Rangueil, Dept. of Arterial Hypertension, Toulouse, France, CHU 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, CHU Brest, Dept. of Urology, Brest,
17:13 - 17:20

**Summary**

To be confirmed
Aims and objectives of this presentation
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.

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., Borso C., Iafrate M., Ruggera L., Zattoni F.
Institutes: University of Padova, Dept. of Surgery, Oncology and Gastroenterology - Urology, Padova, Italy

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: Sant’ Andrea Hospital - Sapienza University, Dept. of Urology, Rome, Italy, 2Sant’ Andrea Hospital - Sapienza University, Dept. of Radiology, Rome, Italy

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

Impact of preoperative α-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.3, Yoon J.H.2, Park N.-C.2, Lee K.S.1, Kim D.K.1, Kim J.C.3, Oh K.T.1, Heo J.E.1, Cho K.S.1, Hong C.H.1, Chung B.H.1
Institutes: Yonsei 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

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: Kansai 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?
By: Polo Hernández R.1, Caballero Romeu J.P.1, Galán Llopis J.A.2, Soria F.3, Caballero Pérez P.4, Morcillo Martín E.3, De La Cruz Conty J.3, Garcés Valverde M.1, Romero Maroto J.5
Institutes: Fisabio-Isabial, Dept. of Urology, Alicante, Spain, 3University Hospital of Vinalopó,
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 Rocío 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, 3King Abdulaziz National Guard Hospital, Dept. of Urology, Riyadh, Saudi Arabia, 4Marmara University School of Medicine, Dept. of Radiology, Istanbul, Turkey, 5Pierre & 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, 2SMG-SNU Boramae Medical Center, Dept. of Urology, Seoul, South Korea, 3Gwangmyeong Sungae 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, 2Lister Hospital, Dept. of Urology, Stevenage, United Kingdom, 3Hopitaux Universitaires Est Parisien Tenon, Multidisciplinary Functional Explorations, Paris, France, 4Hopitaux 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., Scoffone C., Giusti G., Cindolo L., Schips L.
Institutes: S. Pio Da Pietrelcina Hospital, Dept. of Urology, Vasto, Italy, 2University of Porto, Faculty of Psychology and Educational Sciences, Porto, Portugal, 3Urological Research Institute, IRCCS Ospedale San Raffaele, Ville Turro Division, Dept. of Urology, Milan, Italy, 4Austen Health, Dept. of Urology, Melbourne, Australia, 5Medizinische Universität Graz, Urologische Klinik, Graz, Austria, 6Ospedale Cottolengo, Dept. of Urology, Torino, 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
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 presentation**
The aim of this session is to 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.¹, Riikonen J.¹, Syvälä H.², Tolonen T.³, Koskimäki J.¹, Pakarainen T.¹, Kaipia A.⁴, Isotalo T.⁵, Kujala P.³, Tammela T.¹
Institutes: Tampere University Hospital, Dept. of Urology, Tampere, Finland, ²University of Tampere, School of Medicine, Tampere, Finland, ³Fimlab Laboratories, Dept. of Pathology, Tampere, Finland, ⁴Satakunta Central Hospital, Dept. of Urology, Pori, Finland, ⁵Päijät-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: ¹Chungbuk National University, Dept. of Urology, Cheongju, South Korea, ²Chungbuk National University Hospital, Office of Public Health, Cheongju, South Korea, ³College of Medicine, Chungbuk National University, Dept. of Preventive Medicine, Cheongju, South Korea, ⁴National Police Hospital, Dept. of Urology, Seoul, South Korea, ⁵Chungbuk National University College of Medicine, Dept. of Urology, Cheongju, South Korea, ⁶Kyungpook 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.¹, Yoneyama T.³, Tobisawa Y.¹, Hatakeyama S.¹, Kurosawa T.², Nakamura K.², Koie T.¹, Hashimoto Y.¹, Ohyama C.¹
Institutes: ¹Hirosaki University Graduate School of Medicine, Dept. of Urology, Hirosaki, Japan, ²Wako 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
By: Puche Sanz I.¹, Robles-Fernández I.², Pascual-Geler M.¹, Martinez-Gonzalez L.², Lorente J.A.², Cómo Arlo J.M.², Álvarez-Cubero M.J.²
Institutes: ¹Complejo Hospitalario Universitario Granada, Dept. of Urology, Granada, Spain, ²Pfizer-
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


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.1, Fleschner N.1

Institutes: University 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: Cieślikowski W.A.2, Ida A.1, Habr M.1, Budnja J.2, Ii wierczewska M.3, 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.3, Quesenberry C.1, Han J.2, Tsiatis A.3, Lu R.4, Lawrence J.3, Febbo P.3, Presti J.3

Institutes: Kaiser 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., Kahlmeyer A., 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, Sountoulidis P.3, Toutziaris C.4, Gacci M.3, Presiecc F.1, Cancrini F.3, Schips L.2, Seni S.3, Tubaro A.1

Institutes: Sant’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

Germline mutations in the Kallikrein 6 region and predisposition for aggressive prostate cancer


Institutes: Mount Sinai Hospital, Dept. of Surgery (urology), Toronto, Canada, 2Mount Sinai
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)
T. Klatte, Wien (AT)

Aims and objectives of this presentation
To demonstrate various types of new therapeutic approaches in 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.

*357 Proposal and validation of a dynamic criterion for patient inclusion in kidney cancer active surveillance protocols
By: Larcher A.1, Muttin F.1, Ripa F.1, Stabile A.1, Trevisani F.1, Nini A.1, La Croce G.1, Carenzi C.1, Mottrie A.2, Salonia A.1, Briganti A.1, Montorsi F.1, Bertini R.1, Capitanio U.1
Institutes: IRccs Ospedale San Raffaele, Urological Research Institute, Division of Oncology, Unit of Urology, Milan, Italy, 1Onze Lieve Vrouw Hospital, Dept. of Urology, Aalst, Belgium

*358 The natural history of observed large renal masses
By: Touma N.1, Leslie R.1, Ho L.1, Siemens R.1, Menard A.2
Institutes: Queen’s University, Dept. of Urology, Kingston, Canada, 1Queen’s University, Dept. of Radiology, 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.1, Clark W.2, Patel M.3, Vass J.4, Cade D.5, De Silva S. J.6, De Souza P.7
Institutes: Waratah Private Hospital, Dept. of Urology, Hurstville, Australia, 2St George Hospital, Dept. Of Urology, Sydney, Australia, 3Westmead Hospital, Dept. Of Urology, Westmead, Australia, 4Royal North Shore Hospital, Sydney and Macquarie University Hospital, North Ryde, Australia, 5Sirtex Medical Ltd, Sydney, Australia, 6Sutherland Hospitai, Sydney, Australia, 7Western Sydney University, School of Medicine, Sydney, Australia

*361 Better nephron sparing option for patients with cT1 stage renal masses: Comparison of open, laparoscopic partial nephrectomy and radiofrequency ablation
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.1, Yeow S.Y.1, Lohan R.2, Pua U.3, Teo C.4, Png K.S.5
Institutes: Khoo Teck Puat Hospital, Tan Tock Seng Hospital, Dept. of Urology, Singapore, 1Khoo Teck Puat Hospital, Dept. of Radiology, Singapore, Singapore, 2Tan Tock Seng Hospital, Dept. of Radiology, Singapore, Singapore, 3Khoo Teck Puat Hospital, Dept. of Urology, Singapore, Singapore, 4Tan Tock Seng Hospital, Dept. of Urology, Singapore, Singapore
Minimally invasive conservative treatment of localized renal tumors: A single center experience on percutaneous ablations and robot-assisted partial nephrectomy
By: Grassano Y.1, Cornelis F.2, Grenier N.2, Michiels C.1, Capon G.1, Bensadoun H.1, Pasticier G.1, Robert G.1, Ferriere J-M.1, Bernhard J-C.1
Institutes: 1Groupe hospitalier Pellegrin, Dept. of Urology, Bordeaux, France, 2Groupe hospitalier Pellegrin, Dept. of Radiology, Bordeaux, France

Laparoscopic versus percutaneous cryoablation for T1 renal masses: An Italian multicentric study
By: De Concilio B.1, Cicero C.2, Zeccolini G.3, Laganà F.3, Balestrieri L.4, Casarrubia G.5, Zattoni F.6, Merlo F.7, Siracusano S.8, Celia A.1
Institutes: 1San Bassiano Hospital, Dept. of Urology, Bassano del Grappa, Italy, 2San Bassiano Hospital, Dept. of Radiology, Bassano del Grappa, Italy, 3Dolo Hospital, Dept. of Urology, Dolo, Italy, 4C.R.O. Aviano Hospital, Dept. of Oncology, Aviano, Italy, 5Padova University Hospital, Dept. of Radiology, Padua, Italy, 6Padova University Hospital, Dept. of Urology, Padua, Italy, 7Mestre Hospital, Dept. of Urology, Mestre, Italy, 8Verona 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.1, Rohde J.2, Garneys L.2, Palapattu G.1, Ghani K.1
Institutes: 1University of Michigan, Dept. of Urology, Ann Arbor, United States of America, 2Intuitive Surgical, Atlanta, United States of America

Histopathologic analysis of tumor bed after in vitro tumor enucleation on radical nephrectomy specimen
By: Lu Q.1, Ji C.1, Zhao X.1, Guo S.2, Liu G.1, Zhang S.1, Li X.1, Gan W.1, Guo H.1
Institutes: 1Nanjing Drum Tower Hospital, The Affiliated Hospital of Nanjing University Medical School, Dept. of Urology, Nanjing, China, 2Nanjing Medical University, School of Public Health, Nanjing, China

17:07 - 17:15
Associated video presentation Combined robot-assisted salvage partial nephrectomy and cryotherapy after radiofrequency failure on a solitary kidney
C. Michiels, Bordeaux (FR)

17:15 - 17:22
Summary
To be confirmed
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. Fode, Herlev (DK)
        D.G. Hatzichristou, Thessaloniki (GR)
        J. Romero-Otero, Madrid (ES)

Aims and objectives of this presentation
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 the 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
By: Haahr M.¹, Jensen C.H.², Sørensen J.A.³, Sheikh S.P.⁴, Lund L.¹
Institutes: ¹Odense University Hospital, Dept. of Urology, Odense, Denmark, ²Odense University Hospital, Dept. of Clinical Biochemistry and Pharmacology, Odense, Denmark, ³Odense University Hospital, Dept. of Plastic Surgery, Odense, Denmark, ⁴Odense University Hospital, Dept. of Clinical Biochemistry and Pharmacology, 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
Penile prosthesis implantation preserves and may increase penile size irrespective of implant type

By: Giona S.¹, Habous M.², Abdelwahab O.³, Laban O.⁴, Mahmoud S.³, Nassar M.⁵, Tealab A.⁶, Binsaleh S.⁷, Mulhall J.⁸, Muir G.⁹

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.¹, Antonini G.¹, Del Giudice F.¹, De Berardinis E.¹, Perito P.²

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.¹, Timpano M.¹, Ceruti C.¹, Omid S.¹, Sibona M.¹, Gillo A.², Oderda M.¹, Coccia A.³, Gontero P.¹, Rolle L.¹

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.¹, Ribeiro Morgado M.², Pacheco-Figueiredo L.¹, Tomada N.¹, Cruz F.¹

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

Safety and effectiveness of collagenase clostridium histolyticum (CCH) (Xiape®) in the treatment of peyronie’s disease using a new shortened protocol


Institutes: University College London Hospital, Dept. of Andrology, London, United Kingdom

Intralesional verapamil versus ialuronic acid for the treatment of Peyronie’s disease: A randomized single-blinded study

By: Favilla V.¹, Russo G. L.¹, Zucchi A.², Siracusa G.³, Privitera S.¹, Cimino S.¹, Madonia M.³, Cai T.⁴, Cavallini G.⁵, Liguori G.⁵, Silvani M.⁵, Dachille G.⁶, Franco G.⁷, Verze P.¹⁰, Palmieri A.¹⁰, Mirone V.¹⁰, Morgia G.¹

Institutes: University of Catania, Urology Section, Dept. of Surgery, Catania, Italy, University of Perugia, Dept. of Urology, Perugia, Italy, University of Sassari, Dept. of Urology, Sassari, Italy, Santa Chiara Regional Hospital, Dept. of Urology, Trento, Italy, Outpatient Clinic of Ferrara, Medicitalia Andrology Section, Ferrara, Italy, Urology Unit, Cattinara Hospital, Trieste, Italy
Daily tadalafil therapy: A new treatment option for Peyronie’s disease?
By: Park H.J.¹, Park N.C.¹, Kim T.N.¹, Nam J.K.¹, Moon D.G.²
Institutes: Pusan National University Hospital, Dept. of Urology, Busan, South Korea, ²Korea University Hospital, Dept. of Urology, Seoul, South Korea

Penile enlargement with the Elist silicone implant: Safety and efficiency after 500 operations
By: Elist J.J.², Lemperle H.G.¹
Institutes: University of California, Dept. of Plastic Surgery, San Diego, United States of America, ²Beverly Hills, Urology practice, Los Angeles, United States of America

Summary
M. Fode, Herlev (DK)
Redefining and optimising contemporary bladder cancer care

Plenary session 03

Sunday, 26 March
07:30 - 10:30

Location: eURO Auditorium (Level 0)

Chairs: J. Palou, Barcelona (ES)
M. Rouprêt, Paris (FR)

Aims and objectives of this presentation
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 tumor or the rhythm of follow-up in low grade tumor. 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.

07:30 - 08:00
EAU Consensus highlights

08:00 - 09:00
Case discussion Perfect management of T1 bladder cancer
Moderator: G.N. Thalmann, Bern (CH)

08:00 - 08:04
Case presentation
G.N. Thalmann, Bern (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)
<table>
<thead>
<tr>
<th>Time</th>
<th>Event Description</th>
<th>Presenter</th>
<th>Location</th>
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<tbody>
<tr>
<td>09:00 - 09:15</td>
<td>Yes (EAU Guidelines)</td>
<td>M. Burger, Regensburg (DE)</td>
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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>State-of-the-art lecture The evidence for the extent of lymphadenectomy in TCC</td>
<td>J.E. Gschwend, München (DE)</td>
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<tr>
<td>09:30 - 09:45</td>
<td>Presenter</td>
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<tr>
<td>09:45 - 10:00</td>
<td>Discussant</td>
<td>S. Lerner, Houston (US)</td>
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<tr>
<td>10:00 - 10:15</td>
<td>State-of-the-art lecture Enhanced Recovery After Surgery (ERAS) for bladder cancer: Non-surgical options to improve outcomes of cystectomy</td>
<td>J.W.F. Catto, Sheffield (GB)</td>
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<td>10:15 - 10:30</td>
<td>State-of-the-art lecture What determines QoL after urinary diversion and how to measure it?</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

Sunday, 26 March
08:00 - 10:30

Location: Room Copenhagen, North Hall (Level 1)

Chairs: C.R. Chapple, Sheffield (GB)
P. Radziszewski, Warsaw (PL)

Aims and objectives of this presentation
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 according 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.

Objectives
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  

Case presenter and moderator
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
Electricity
T.R.W. Herrmann, Hannover (DE)

09:40 - 09:50
Light
C.M. Scoffone, Turin (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

Location: Room 10, Capital suite (level 3)
Chair: C. Stief, Munich (DE)

Aims and objectives of this presentation
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

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)
Aims and objectives of this presentation
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-Renoscopy
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

Location: Room 12, Capital suite (level 3)
Chair: E. Barret, Paris (FR)

Aims and objectives of this presentation
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.

A. Govorov, Moscow (RU)
J.P.M. Sedelaar, Nijmegen (NL)
**Aims and objectives of this presentation**
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.
### Advanced course on laparoscopic nephrectomy

**ESU Course 18**

**Sunday, 26 March**
**08:30 - 11:30**

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

**Chair:** V. Pansadoro, Rome (IT)

**Aims and objectives of this presentation**
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.

<table>
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<th>Time</th>
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<tr>
<td>08:30 - 11:30</td>
<td>Introduction</td>
<td>R. Bollens, Lomme (FR) V. Pansadoro, Rome (IT)</td>
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<tr>
<td>08:30 - 11:30</td>
<td>Transperitoneal approach</td>
<td>V. Pansadoro, Rome (IT)</td>
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<tr>
<td>08:30 - 11:30</td>
<td>Retroperitoneal approach</td>
<td>R. Bollens, Lomme (FR) V. Pansadoro, Rome (IT)</td>
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<tr>
<td>08:30 - 11:30</td>
<td>Single port inguinal approach</td>
<td>R. Bollens, Lomme (FR)</td>
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<tr>
<td>08:30 - 11:30</td>
<td>Intraoperative complications</td>
<td>R. Bollens, Lomme (FR) V. Pansadoro, Rome (IT)</td>
</tr>
<tr>
<td>08:30 - 11:30</td>
<td>Difficult nephrectomies</td>
<td>R. Bollens, Lomme (FR)</td>
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<tr>
<td>08:30 - 11:30</td>
<td>Partial nephrectomy</td>
<td>R. Bollens, Lomme (FR) V. Pansadoro, Rome (IT)</td>
</tr>
<tr>
<td>08:30 - 11:30</td>
<td>Special cases</td>
<td>R. Bollens, Lomme (FR) V. Pansadoro, Rome (IT)</td>
</tr>
</tbody>
</table>
**Aims and objectives of this presentation**

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.

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**08:30 - 11:30**

- **Chronic pelvic pain, the basics: Mechanisms and terminology**
  E.J. Messelink, Groningen (NL)

- **Chronic pelvic pain in men: Case presentation and discussion**
  D.S. Engeler, St. Gallen (CH)

- **Chronic pelvic pain in men: Practical guidelines on diagnostics and treatment**
  D.S. Engeler, St. Gallen (CH)

- **Chronic pelvic pain in women: Case presentation and discussion**
  E.J. Messelink, Groningen (NL)

- **Chronic pelvic pain in women: Practical guidelines on diagnostics and treatment**
  E.J. Messelink, Groningen (NL)

- **The interdisciplinary approach: Team members and organisation**
  D.S. Engeler, St. Gallen (CH)
  E.J. Messelink, Groningen (NL)
Aims and objectives of this presentation
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.

J-U. Stolzenburg, Leipzig (DE)

08:30 - 11:30
Surgical anatomy for laparoscopic/robotic assisted radical cystectomy
J. Cresswell, Middlesbrough (GB)

08:30 - 11:30
Port placement and robot docking-principles for pelvic laparoscopy
J. Cresswell, Middlesbrough (GB)
To be confirmed

08:30 - 11:30
Prostate, bladder and urethral sphincter anatomy. How to preserve urinary continence
J. Cresswell, Middlesbrough (GB)
To be confirmed

08:30 - 11:30
Surgical anatomy for nerve sparing surgery
J. Cresswell, Middlesbrough (GB)

08:30 - 11:30
Boundaries and technique of pelvic lymph node dissection for radical prostatectomy (standard, extended PLNA, risk stratified access) and radical cystectomy
J. Cresswell, Middlesbrough (GB)

08:30 - 11:30
Summary and take home messages
J. Cresswell, Middlesbrough (GB)

08:30 - 11:30
Quiz
To be confirmed
### Aims and objectives of this presentation

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
Aims and objectives of this presentation

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
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

*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
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 be 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>Session</th>
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<tbody>
<tr>
<td>11:35 - 11:55</td>
<td>Extended lymph node dissection</td>
</tr>
<tr>
<td><strong>Presenter</strong></td>
<td>N. Fossati, Milan (IT)</td>
</tr>
<tr>
<td><strong>Discussant</strong></td>
<td>H.G. Van Der Poel, Amsterdam (NL)</td>
</tr>
<tr>
<td>11:55 - 12:00</td>
<td>Discussion</td>
</tr>
</tbody>
</table>

**Extended lymph node dissection**

**Presenter**
N. Fossati, Milan (IT)

**Discussant**
H.G. Van Der Poel, Amsterdam (NL)
**Aims and objectives of this presentation**
This session deals with some 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
To be confirmed

11:30 - 11:50

**State-of-the-art lecture** Penile reconstruction after trauma and cancer
M. Ninkovic, Munich (DE)

11:50 - 12:00

**Associated abstract presentation**

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

**State-of-the-art lecture**
Aims and objectives of this presentation
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 cause by OAB symptoms is crucial for planning a correct management of the condition and this may call for the use of patient reported outcomes.
Adrenal disorders
Thematic session 05

Sunday, 26 March
10:30 - 12:00

Location: Room Berlin, North Hall (Level 1)

Chairs: To be confirmed
J.P.F.A. Heesakkers, Nijmegen (NL)

Aims and objectives of this presentation
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
To be confirmed

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
Immuno-oncology: Changing treatment paradigms in renal and urothelial cancer

Location: Room Vienna, North Hall (Level 1)
Chairs: M. De Santis, Coventry (GB)
M. Kuczyk, Hanover (DE)

Aims and objectives of this presentation
This session deals with new immunotherapeutical approaches at renal and bladder cancer. For renal cancer, insights 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
J. Larkin, London (GB)

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)

10:40 - 10:50
State-of-the-art lecture Immunotherapy - Impact from surgeon's point of view
F-C.E. Von Rundstedt, Jena (DE)

11:40 - 11:55
State-of-the-art lecture How will immunotherapy change the treatment paradigm?
R. Jones, Glasgow (GB)

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

11:55 - 12:00
Discussion
Paediatric urology

Thematic session 07

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

**Chairs:** G. Bogaert, Leuven (BE)
            W.F.J. Feitz, Nijmegen (NL)

**Aims and objectives of this presentation**
Paediatric Urology 2017 session will give you the latest update in the field of pediatric urology and lifelong care developments for patients with congenital urological anomalies.

<table>
<thead>
<tr>
<th>Time</th>
<th>Event</th>
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</thead>
</table>
| 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

Sunday, 26 March
10:30 - 12:00

Location: Room Stockholm, North Hall (Level 1)
Chairs: H. Botto, Suresnes (FR)
K.G.W. Månsson, Lund (SE)

Aims and objectives of this presentation
This session will analyze 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.

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 presentation**

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>Presenter/Location</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>
<td>M. Valerio, London (GB)</td>
</tr>
<tr>
<td></td>
<td><strong>Case presenter</strong></td>
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<tr>
<td>10:55 - 11:05</td>
<td>Pro</td>
<td>C. Moore, London (GB)</td>
</tr>
<tr>
<td>11:05 - 11:15</td>
<td>Con</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>
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## Surgery-in-Motion-School Session

*European Urology session*

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

**Sunday, 26 March**
**10:45 - 12:45**

<table>
<thead>
<tr>
<th>Time</th>
<th>Session</th>
<th>Speakers</th>
</tr>
</thead>
</table>
| 10:45 - 11:15 | Male cystectomy       | N.P. Wiklund, Stockholm (SE)  
J.W.F. Catto, Sheffield (GB)  
A. Mottrie, Aalst (BE)  
J. Palou, Barcelona (ES) |
| 11:15 - 11:45 | Female cystectomy     | N.P. Wiklund, Stockholm (SE)  
J.W.F. Catto, Sheffield (GB)  
A. Mottrie, Aalst (BE)  
J. Palou, Barcelona (ES) |
| 11:45 - 12:15 | Ileal conduit         | N.P. Wiklund, Stockholm (SE)  
J.W.F. Catto, Sheffield (GB)  
A. Mottrie, Aalst (BE)  
J. Palou, Barcelona (ES) |
| 12:15 - 12:45 | Neobladder            | N.P. Wiklund, Stockholm (SE)  
J.W.F. Catto, Sheffield (GB)  
A. Mottrie, Aalst (BE)  
J. Palou, Barcelona (ES) |
Aims and objectives of this presentation
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
What has changed in the non-oncology guidelines

ESU Course 21

Sunday, 26 March
12:00 - 14:00

Location: Room 10, Capital suite (level 3)

Chair: S. Gravas, Larissa (GR)

Aims and objectives of this presentation
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
- Review the clinical problems and the academic questions that clinical research tried to address in the Guidelines
- Be familiar with the strength of the evidence of the current Guidelines and the aspects that still need to be researched
- Highlight the changes and the gaps of the different guidelines discussed at the course
- Apply knowledge gained in this course to develop an evidence-based practice in the management of patients

A. Tubaro, Rome (IT)
G. Bonkat, Basel (CH)
UTUC: Diagnosis and management
ESU Course 22

Location: Room 11, Capital suite (level 3)
Chair: S. Shariat, Vienna (AT)

Aims and objectives of this presentation
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

Location: Room 12, Capital suite (level 3)
Chair: X. Cathelineau, Paris (FR)

Aims and objectives of this presentation
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

Location: Room 14, Capital suite (level 3)
Chair: L. Henningsohn, Stockholm (SE)

Aims and objectives of this presentation
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
L. Henningsohn, Stockholm (SE)
R.E. Sanchez-Salas, Paris (FR)

12:00 - 14:00
Penile surgery
L. Henningsohn, Stockholm (SE)

12:00 - 14:00
Scrotal surgery
R.E. Sanchez-Salas, Paris (FR)

12:00 - 14:00
Basic endoscopic procedures (urethral catheterization, cystoscopy, nephrostomy)
L. Henningsohn, Stockholm (SE)
R.E. Sanchez-Salas, Paris (FR)
Aims and objectives of this presentation
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 tumor resection.

In brief, following items will be presented and discussed:
• EAU Guideline recommended staging procedures an 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 presentation
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.
Evaluation of risk in comorbidity in onco-urology
ESU Course 27

Location: Room 17, Capital suite (level 3)
Chair: N. Mottet, Saint-Étienne (FR)

Aims and objectives of this presentation
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)
Aims and objectives of this presentation

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, we 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.⁴, Cedeno J.³, Kaufman A.⁴, Carballido J.³, Scher J.⁴, Martinez-Salamanca J.³  
**Institutes:** Urological Research Network, Dept. of Urology, Miami Lakes, United States of America, ²Andros Institute, Dept. of Urology, Netherlands, The Netherlands, ³Universidad Autonoma Madrid, Dept. of Urology, Madrid, Spain, ⁴Urological Research Network, Dept. of Urology, Miami, United States of America

*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, Ferriero M.¹, Panebianco V.², Del Monte M.², Sentinelli S.², Gallucci M.¹, Simone G.¹  
**Institutes:** Regina 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.², Montorsi F.³, Briganti A.³, Suardi N.¹, Gaboridi F.¹  
**Institutes:** Ospedale San Raffaele Turro, Dept. of Urology, Milan, Italy, ²Ospedale San Raffaele Turro, Dept. of Radiology, Milan, Italy, ³Urological Research Institute, IRCCS Ospedale San Raffaele, Division of Oncology, Unit of Urology, 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
Robot assisted radical nephrectomy and inferior vena cava thrombectomy: Surgical technique, perioperative and oncologic outcomes


Institutes: Regina Elena National Cancer Institute, Dept. of Urology, Rome, Italy, Keck School of Medicine, University of Southern California, Dept. of Urology, Los Angeles, United States of America

Trimodal (18) F-choline-PET/mpMRI/TRUS targeted prostate biopsies: First clinical experience


Institutes: Hopital Saint Philibert, Dept. of Urology, Lomme, France, Hopital Saint Philibert, Dept. of Radiology, Lomme, France, Hopital Saint Vincent, Dept. of Pathology, Lille, France, Hopital Saint Philibert, Dept. of Nuclear Medicine, Lomme, France
Modern tools and new evidence in staging of urothelial carcinomas
Poster Session 29

Sunday, 26 March
12:15 - 13:45

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 presentation
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.

Prognostic impact of a 12-gene progression score in non-muscle invasive bladder cancer: A prospective multicenter validation study
By: Dyrskjot L.², Reinert T.², Algaba F.³, Christensen E.², Nieboer D.¹, Hermann G.², Morgensen K.², Marquez M.², Segersten U.³, Hoyer S.², Ulhøj B.², Hartmann A.⁹, Stöhr R.², Wach S.¹, Nawroth R.¹, Beukers W.², Schwamborn K.¹², Tölic C.¹³, Simic T.¹⁴, Junker K.¹⁵, Harving N.¹⁶, Petersen A.C.¹⁷, Jensen J.B.¹⁸, Keck B.¹⁰, Horstmann M.¹, Maurer T.¹⁹, Steyerberg E.², 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, ⁹Hospital University 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

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, Sairanen J.², Minn H.⁶, Kemppainen J.², Boström P.¹
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: Fransen Van De Putte E.1, Van Der Kwast T.2, Bertz S.3, Denzinger S.4, Manach Q.5, Compérat E.6, Boormans J.7, Hewitt M.8, Stoehr R.9, Zlotta A.9, Hendriksen K.1, Roup prêt M.9, Otto W.9, Burger M.9, Hartmann A.9, Van Rhijn B.9

Institutes: 1Netherlands Cancer Institute - Anton 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 Padova, Dept. of Clinical Physiology, Nuclear Medicine and PET Imaging, Turku, Finland

A panel of micro-RNA signature as a tool for predicting survival of patients with urothelial carcinoma of the bladder


Institutes: 1Osaka 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, Vandekeerkhove G.2, Struss W.2, Annala M.2, Beja K.2, Eigl B.2, Mischinger J.1, Stenzl A.1, Black P.2, Wyatt A.2

Institutes: 1Eberhard-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: 1University of Padua, Dept. of Surgery, Oncology and Gastroenterology, Padova, 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 (BCCA) after radical cystectomy (RC)

By: Foerster B., 1 Moschini M., 1 Abufaraj M., 1 Soria F., 1 Lotan Y., 2 Karakiewicz P., 3 Briganti A., 4 Babjuk M., 5 Rink M., 5 Kluth L., 5 John H., 1 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 University, San Raffaele Scientific Institute, Dept. of Urology, Milan, Italy, 5Faculty Hospital Motol, Second Faculty of Medicine, Charles University Prague, 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., Oo H.Z., Todenhöfer T., Fazli L., Daugaard M., Black P.

Institutes: University of British Columbia, Dept. of Urologic Sciences, Vancouver, Canada

ADC value as a predictive marker for regional lymphnode metastasis of bladder cancer

By: Masaaki F., 1 Sakamoto S., 2 Sekita N., 1 Sato H., 1 Nishikawa R., 1 Takeuchi N., 2 Suzuki H., 3 Mikami K., 4 Ichikawa T., 2

Institutes: Chibaken Saiseikai Narashino Hospital, Dept. of Urology, Narashino, Japan, 2Chiba University, Dept. of Urology, Chiba, Japan, 3Toho University Medical Center, Sakura Hospital, Dept. of Urology, Sakura, Japan, 4Chibaken 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., 4 Ficarra V., 5 Karnes R., 2 Fallanca F., 6 Lowe V., 7 Massari F., 2 Gallina A., 2 Bartolomei M., 3 Picchio M., 2 Ippolito C., 10 Schiavina R., 11, Zattoni F., 12 Evangelista L.

Institutes: University of Padua, Dept. of Surgery, Oncology, and Gastroenterology, Padova, Italy, 2URI, IRCCS Ospedale San Raffaele, Division of Oncology, Unit of Urology, Milan, Italy, 3Mayo Clinic, Dept. of Urology, Rochester, Mn, 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, Mn, 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, 12University of Padua, Dept. of Surgery, Oncology, and Gastroenterology, Padua, Italy, 13Veneto Institute of Oncology IOV – IRCCS, Nuclear Medicine and Molecular Imaging Unit, Padua, Italy

Summary

D.J. Rosario, Sheffield (GB)
Insights into epidemiology and pathophysiology of LUTS
Poster Session 30

Sunday, 26 March
12:15 - 13:45

Location: Room Milan, North Hall (Level 1)

Chairs:
C. De Nunzio, Rome (IT)
M. Gacci, Florence (IT)
T. Matsuo, Nagasaki (JP)

Aims and objectives of this presentation
The aims and objectives of this session is 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.

*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., Bangma C., Roobol M.
Institutes: Erasmus MC, Dept. of Urology, Rotterdam, The Netherlands

*394 Management of LUTS in men in a nationwide cohort with 10 years follow-up: Lessons from clinical practice
By: Cornu J-N.L.¹, Vicaut E.², Portal J-J.², Gabbas M.³, Tuppin P.³, Doizi S.³, Lukacs B.⁴
Institutes: ¹CHU de Rouen - Hôpital Charles Nicolle, Dept. of Urology, Rouen, France, ²Fernand Widal Hospital, Dept. of Biostatistics and Clinical Research, Paris, France, ³National Health Insurance, Data Management, Paris, France, ⁴Tenon Hospital, Dept. of Urology, Paris, France

*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

*396 Development of an electronic bladder diary app for smart-phone: A pilot study
By: Mateu Arrom L.¹, Peri L.², Franco A.², López-Fando L.³, Alcaraz A.²
Institutes: ¹Hospital Clínic Barcelona - Hospital Plató, Dept. of Urology, Barcelona, Spain, ²Hospital Clinic Barcelona, Dept. of Urology, Barcelona, Spain, ³Hospital Ramón Y Cajal, Dept. of Urology, Madrid, Spain

*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

*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

*399 Effect of restricted salt intake on nocturia
By:
Tomohiro M., Nakamura Y., Yasuda T., Ohba K., Miyata Y., Sakai H.
Institutes: Nagasaki University School of Medicine, Dept. of Urology, Nagasaki, Japan

*400

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

*401

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

*402

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 Univesity, Dept. of Urology, Suita, Japan

*403

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

*404

Studying the effect of Diabetes Mellitus type 2 on prostate related parameters: A prospective single institutional study
By: Elabbady A., Hashad M.M.E., Kotb A., Ghanem A.
Institutes: University of Alexandria, Dept. of Urology, Alexandria, Egypt

*405

Thyroid hormones and benign prostatic hyperplasia
By: Lee J-H.
Institutes: National Police Hospital, Dept. of Urology, Seoul, South Korea

*406

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. Osthø, Fredericia (DK)
A. Petřík, České Budějovice (CZ)

Aims and objectives of this presentation
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.

*407
Asymptomatic renal stones: long term follow up from a tertiary hospital
By: Darrad M., Agyei M., Yallappa S., Subramonian K.
Institutes: Queen Elizabeth Hospital, Dept. of Urology, Birmingham, United Kingdom

*408
Follow-up care after ED visits for kidney stones — a missed opportunity
By: Hollingsworth J., Yan P.L., Hollenbeck B.K., Ghani K.R.
Institutes: University of Michigan, Dept. of Urology, Ann Arbor, United States of America

*409
Acute renal colic, urinary tract infection and leucocytosis – Is there any relationship? A prospective trial
By: Schnabel M.J., Rosenhammer B., Fritsche H.-M.
Institutes: Caritas Krankenhaus St. Josef, University of Regensburg, Dept. of Urology, Regensburg, Germany

*410
A multi-centre cohort study evaluating the role of inflammatory markers in patient’s presenting with acute ureteric colic (MIMIC)
Institutes: British Urology Researchers In Surgical Training (BURST) Research Collaborative, 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

*411
Oral dissolution therapy (ODT) for lucent renal calculi; can we predict the outcome?
By: Elsawy A., Flehal A., El-Nahas A., Abdel-Basset M., Farag H., Shokeir A.
Institutes: Mansoura University, Dept. of Urology, Mansoura, Egypt

*412
Day-case ureteroscopy (DC-URS) for stone disease: Outcomes from an university hospital
By: Ghosh A., Oliver R., Way C., White L., Somani B.
Institutes: University Hospital Southampton NHS FT, Dept. of Urology, Southampton, United Kingdom, University Hospital Southampton NHS FT, Dept. of Anaesthesiology, Southampton, United Kingdom

*413
Comparison of success and complication rates between extracorporeal shock wave lithotripsy (ESWL) and flexible ureterorenoscopy (URS) for untreated renal calculi
By: 

Scientific Programme
**414**

**Ureteroscopy in pregnant women with complicated colic pain: A two center-matched retrospective study**

*By: Butticè S., Şener T.E., Laganà A.S., Vitale S.G., Netsch C., Pappalardo R., Magno C.*

*Institutes:* 1Marmara 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., Mainex J.A., De La Cruz B., Rodríguez V., Poza M., Alonso D., Martínez-Sagarra J.M.*

*Institutes:* Rio 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**

**Transperitoneal laparoscopic pyelolithotomy versus retrograde intrarenal surgery for treatment of renal pelvis stones in horseshoe kidneys: A prospective randomized study**


*Institutes:* Zagazig University Hospital, Dept. of Urology, Zagazig, Egypt

**419**

**Live surgical demonstrations do not compromise patients safety: Results from a 5 year experience in 151 urinary stone cases**

*By: Zanetti S.P., Legemate J., Kamphuis G., Baard J., Montanari E., Traxer O., De La Rosette J.*

*Institutes:* Fondazione Ircs 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., Kim S.I., Kim S.J.*

*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.

Institutes: Royal Bournemouth Hospital, Dept. of Urology, Bournemouth, United Kingdom
Pelvic pain and bladder pain syndrome

Poster Session 32

Sunday, 26 March
12:15 - 13:45

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 presentation
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.

*424 Efficacy of botulinum toxin A for the treatment of interstitial cystitis to improve quality of life: A systematic review
By: Ochoa Vargas D.C. ¹, Garcia Perdomo H.A. ²
Institutes: Hospital Universitari Germans Trias i Pujol, Dept. of Urology, Barcelona, Spain, ² Universidad Del Valle, Dept. of Urology, Cali, Colombia

*425 Quetiapine fumarate extended release in the treatment of bladder painful syndrome with nonurological associated conditions: An exploratory study
Institutes: University of Perugia, Dept. of Surgical and Biomedical Sciences, Urology and Andrology Section, Perugia, Italy

*426 Increased mRNA expression of transient receptor potential channels in the urothelium of patients with interstitial cystitis: Possible biomarker
By: Mitsui T., Tsuchiya S., Sawada N., Ihara T., Kira S., Nakagomi H., Takeda M.
Institutes: University of Yamanashi, Dept. of Urology, Chuo-City, Japan

*427 Efficacy of treatment with Hyaluril in females with urethral syndrome: A prospective analysis comparing naïve patients with subjects who experienced previous ineffective treatments
Institutes: Sapienza University of Rome, Dept. of Medico Surgical Sciences and Biotechnologies, Urology Unit, Latina, Italy

*428 Comparison of intravesical chondroitin sulfate and combined hyaluronic acid/chondroitin sulfate for interstitial cystitis/bladder pain syndrome
By: Arslan B. ¹, Onuk O. ², Ozkan A. ³, Eroglu A. ¹, Hazar A.I. ¹, Aydin M. ¹
Institutes: Gop Taksim Training and Research Hospital, Dept. of Urology, Istanbul, Turkey, ² Yeniyüzyil University, Dept. of Urology, Istanbul, Turkey

*429 Multidisciplinary self-management telecare system may improve quality of life in patients with interstitial cystitis/bladder pain syndrome (IC/BPS) – A Randomized Controlled Study
By: Lee M-H., Wu H-C., Chen W-C.
Institutes: Feng-Yuan Hospital, Dept. of Urology, Taichung, Taiwan

*431 Long term outcome following bladder neck artificial urinary sphincter implantation
By: Bugeia S., Ivaz S., Frost A., Dragova M., Andrich D.E, Mundy A.R
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
By: Kretschmer A.¹, Hüsch T.², Thomesen F.³, Kronlachner D.⁴, Obaje A.⁵, Anding R.⁶, Pottek T.⁶, Rose A.⁷, Olianas R.⁸, Friedl A.⁹, Hübner W.¹⁰, Homberg R.¹¹, Pfitzenmaier J.¹², Queissert F.¹³, Naumann C.M.¹⁴, Schweiger J.¹⁵, Wotzka C.¹⁶, Nyarangi-Dix J.¹⁷, Hofmann T.¹⁸, Buchner A.¹, Haferkamp A.², Bauer R.M.¹
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, Halle, Austria, ¹¹St. Barbara Hospital, Dept. of Urology, Hamm, 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.⁴, León-Mar R.⁵, López-Sámano V.A.⁶, Montoya-Martinez G.⁷, Torres-Mercado L.O.⁸, Serrano-Brambila E.A.⁹
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.², Wetterauer U.², 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 presentation**

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 long, 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.¹, Alfano M.³, Dehò F.¹, Gabardi F.², 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, IRCCS Ca Granda, Hospital Maggiore Policlinico, Dept. of Urology, Milan, Italy, IRCCS San Raffaele Hospital, Division of Oncology, Unit of Urology, Milan, Italy, University 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, Fondazione 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., Marzullo Zuchett L., Rogel Bertó R., Luján Marco S., Boronat Tormo F.

**Institutes:** La Fe, Universitary and Polytechnic Hospital, Dept. of Urology, 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., Frea B., Rolle L.

**Institutes:** Città Della Salute E Della Scienza, University of Torino, Dept. of Urology, Torino, 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, Parnham 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, University College Hospitals London, Dept. of Pathology, London, United Kingdom

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**Salvage mTESE after previous failed mTESE: Results and predictors for success**

**By:** Moubasher A., Kalejaiye O., Raheem A.A., Chiriaco G., Capece M., Sangstar P., Christopher N., Muneer A., Garaffa G., Ralph D.
*445

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

*446

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.⁵, Gaboardi F.⁶, Mirone V.⁷, Piemonti L.⁸, Montorsi F.⁹, 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/University Vita-Salute San Raffaele, Division of Oncology, Unit of Urologyof 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

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Primary, secondary, and compensated hypogonadism: A novel risk stratification for infertile men
By: Ventimiglia E.¹, Capogrosso P.², Boeri L.², Cazzaniga W.¹, Pederzoli F.¹, Frego N.¹, Oreggia D.¹, Dehò F.¹, Gaboardi F.², Mirone V.³, 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

*448

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

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Withdrawn
By: Peking University First Hospital, Andrology Center, Beijing, China

*450

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.³, Almeida-Santos T.², Figueiredo A.¹
Institutes: ¹Coimbra Hospital and Universitary Centre, Dept. of Urology and Renal Transplantation, Coimbra, Portugal, ²Coimbra Hospital and Universitary Centre, Dept. of Reproductive Medicine, Coimbra, Portugal, ³University of Coimbra, Centre For Neuroscience and Cell Biology, Coimbra, Portugal

*451

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.¹, 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

13:30 - 13:37

Summary
N. Sofikitis, Ioannina (GR)
Benign but difficult - the surgical management of ureteric obstruction

Poster Session 34

Sunday, 26 March
12:15 - 13:45

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 presentation
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.

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Endometriosis – urinary tract involvement and predictive factors for major surgery
By: Freire M.J.¹, Dinis P.J.¹, Medeiros R.², Sousa L.¹, Águas F.², Figueiredo A.¹
Institutes: ¹Coimbra Hospital and Universitary Centre, Dept. of Urology and Renal Transplantation, Coimbra, Portugal, ²Coimbra 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.¹, Molinari A.¹, Ceccarello M.², Scarperi S.², Ballario R.¹, Pastorello M.¹, Ceccaroni M.², Cavalleri S.¹
Institutes: ¹Sacred Heart Hospital, Dept. of Urology, Negrar, Italy, ²Sacred Heart Hospital, Dept. of Obstetrics and Gynaecology, Negrar, Italy

*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: ¹Karolinska University Hospital, Dept. of Urology, Stockholm, Sweden, ²University 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, ²St James Hospital, Dept. of Urology, Liverpool, United Kingdom

*463

Upper urinary tract decompression using ileal ureter replacement (IUR) in comparison to endoureteral thermoexpandable Stent [Memokath 051]
By: Akbarov I., Al-Mahmid M., Pfister D., Heidenreich A.

Institutes: University Hospital of Cologne, Dept. of Urology, Uro-Oncology and Robot Assisted Surgery, Cologne, 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 C.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 presentation**
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.

*466

**Early one stage passerini-glazel feminizing genitoplasty for congenital adrenal hyperplasia: What happens at puberty?**

By: Lesma A.¹, Montorsi F.²

**Institutes:** ¹IRCCS Ospedale San Raff, Dept. of Urology, Milan, Italy, ²University Vita-Salute San Raffaele, I, Dept. of Urology, Milan, Italy

*467

**Renal cyst evolution in childhood: A contemporary observational study**

By: Rediger C., Wayne C., Reddy D., Ksara S., Keays M., Guerra L., Leonard M.

**Institutes:** Children's Hospital of Eastern Ontario, Dept. of Surgery - Division of Urology, Ottawa, Canada

*468

**Paediatric kidney transplantation: A single-centre experience of 16 years**

By: Bañuelos Marco B.¹, Koch T-M.², Friedersdorff F.¹, Goranova I.¹, Lingnau A.¹

**Institutes:** ¹Charité - Universitätsmedizin Berlin, Dept. of Urology, Berlin, Germany, ²Charité - Universitätsmedizin Berlin, Dept. of Paediatric Nephrology, Berlin, Germany

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**The impact of donor age, HLA matching and panel reactivity antibodies in pediatric kidney transplant**

By: Bañuelos Marco B.¹, Koch T-M.², Friedersdorff F.¹, Goranova I.¹, Lingnau A.¹

**Institutes:** ¹Charité - Universitätsmedizin Berlin, Dept. of Urology, Berlin, Germany, ²Charité - Universitätsmedizin Berlin, Dept. of Pediatric Nephrology, Berlin, Germany

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**Adult follow up of major dysfunctional voiding in children**

By: Sandri S.

**Institutes:** Hospital G. Fornaroli, Dept. of Urology, Magenta, Italy

*472

**Evaluation of urologic problems in anorectal malformations and effect of anorectoplasty on lower urinary tract function**

By: Abou Hashem S.¹, Mostafa S.²

**Institutes:** ¹Zagazig University Hospital, Zagazig, Egypt, ²Zagazig University Hospital, Dept. of Pathology, Zagazig, Egypt

*473

**Pelvic osteotomy in the newborn classic bladder extrophy closure: Complications and outcomes**

By: Sullivan B.¹, Friedlander D.², Di Carlo H.², Sponseller P.¹, Gearhart J.²

**Institutes:** ¹Johns Hopkins, Division of Pediatric Orthopaedics, Baltimore, United States of America, ²Johns Hopkins, Jeffs Division of Pediatric Urology, Baltimore, United States of America
**Primary closure of bladder exstrophy in children above 1 month, is it important to do bilateral osteotomies? A pilot study**

By: Aboul Ela M. Nabil W., Ghoneima W.E., Abdelwahhab M., Shouman A., Shokry A., El Sheemy M., El Ghoniemy M., Badawy H.

Institutes: Kasr Al Ainy Hospital Cairo University, Dept. of Pediatric Urology, Cairo, Egypt

**Bladder exstrophy: Which quality of life? About 15 cases**

By: Ben Ahmed Y., Landolsi M., Chibani I., Charieq A., Nouriya F., Jouini R., Jlidi S.

Institutes: Children Hospital Bachir Hamza, Dept. of Pediatric Surgery, 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, Taniidir Y.², Top T.², Basok B.I.³, Isman F.⁴, Simsek F.¹, Akbal C.¹, Tarcan T.¹

Institutes: ¹Marmara University School of Medicine, Dept. of Urology and Pediatric Urology, Istanbul, Turkey, ²Marmara University School of Medicine, Dept. of Urology, Istanbul, Turkey, ³Tepecik Training and Research Hospital, Dept. of Biochemistry, Izmir, Turkey, ⁴Medeniyet University School of Medicine, Dept. of Biochemistry, Istanbul, Turkey

**SNM in children: The best response in congenital and acquired neurogenic bladder**

By: Lopes Mendes A.L.¹, Jansen I.², Zaccara A.M.³, Capitanucci M.L.³, De Gennaro M.³, Mosiello G.³

Institutes: ¹Paediatric Hospital Bambino Gesù, Dept. of Robotic Surgery and Urodynamic Unit, Rome, Italy, ²AMC University Hospital, Dept. of Urology and Department of Biomedical Engineering and Physics, Amsterdam, The Netherlands, ³Paediatric 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., Matsu 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, Hoebke P.¹, Haid B.⁴

Institutes: ¹Universitair ziekenhuis Gent, Dept. of Urology, Gent, Belgium, ²Medeniyet Göztepe Elitım University, Dept. of Urology, Istanbul, Turkey, ³Leeds Children’s Hospital, NHS, Dept. of Pediatric Urology, Leeds, United Kingdom, ⁴Sisters of The Charity Clinic, Dept. of Pediatric Urology, Linz, Austria
Aims and objectives of this presentation
Use of validated prostate cancer biomarkers is important for selection of patients who are on risk to develop 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
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

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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.4, 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

*483

A genomic analysis of metastases-prone localized prostate cancer in a European, high-risk population
Institutes: 1UZ Leuven, Dept. of Urology, Leuven, Belgium, 2KU Leuven, Laboratory of Molecular Endocrinology, Leuven, Belgium, 3GenomeDx, GenomeDx Biosciences, Vancouver, Canada

*484

Analysing circulating tumour cells with epithelial and mesenchymal features for prostate cancer prognosis
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: 1University 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, Canada, 23UT Southwestern 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: Buelens S. 1, Claeyts T. 1, Kumps C. 1, Poelaert F. 1, Dhondt B. 1, Vandesompele J. 2, Nurnet Y. 2, Vysocki M. 3, Thas O. 3, Lumen N. 1

Institutes: 1Ghent University Hospital, Dept. of Urology, Gent, Belgium, 2Ghent University, Dept. of Pediatrics and Medical Genetics, Gent, Belgium, 3Ghent University, Dept. of Mathematical Modelling, Statistics and Bio-Informatics, Gent, 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: 1University 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

By: Gasperon J. 2, Quintavalle C. 3, Müller D. 1, Lorber T. 2, Juskevicius D. 2, Lenkiewicz E. 3, Zellweger T. 4, Barrett M. 5, Bubendorf L. 5, Ruiz C. 5, Rentsch C. 1
**Cell free DNA methylation markers as predictors of treatment response and prognosis for castration-resistant prostate cancer**

* By: Hendriks R.¹, Dijkstra S.¹, Smit F.², Vandersmissen J.², Van De Voorde H.², Mulders P.¹, Van Oort I.¹, Van Criekinge W.³, Schalken J.¹

**Institutes:** ¹Radboudumc, Dept. of Urology, Nijmegen, The Netherlands, ²MDxHealth, Dept. of Research and Development, Irvine, United States of America, ³Ghent 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.¹, Toma M.², Fuessel S.¹, Erdmann K.¹, Hoenscheid P.², Froehner M.¹, Muders M.², Wirth M.¹

**Institutes:** ¹TU Dresden, Dept. of Urology, Dresden, Germany, ²TU Dresden, Dept. of Pathology, Dresden, Germany

**Calcium signaling remodeling as a predictive factor of systemic recurrence after radical prostatectomy**

* By: Perrouin Verbe M.A.¹, Talagas M.², Garlantezec R.³, Schoentgen N.⁴, Uguen A.², Doucet L.², Rosec S.³, Nicot M.C.², Gobin E.², Marcorelles P.², Fournier G.⁴, Valeri A.⁴, Mignen O.⁵

**Institutes:** ¹Pitié Salpêtrière Academic Hospital, Dept. of Urology, Paris, France, ²Brest University Hospital, Dept. of Pathology, Brest, France, ³University Rennes 1, INSERM U1085-IRSET, Rennes, France, ⁴Brest University Hospital, Dept. of Urology, Brest, France, ⁵Brest University Hospital, INSERM U 1412, Centre D’Investigation Clinique, Brest, France, ⁶University of Brest, INSERM U 1078, Brest, France

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**Circulating tumor cells in prostate cancer**

To be confirmed
Prostate cancer: Impact of MRI on biopsies
Poster Session 37

Aims and objectives of this presentation
This session will highlight the optimal use of MRI for the stratification of men undergoing prostatic 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.

*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, Løgager V.², Thomsen H.²
Institutes: ¹Herlev University Hospital, Dept. of Urology, Herlev, Denmark, ²Herlev University Hospital, Dept. of Radiology, Herlev, Denmark

*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

*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

*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.³, Bangma C.³, 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

*497 Improving accuracy of prostate cancer risk prediction in prostate biopsy naïve 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

*498 Combined clinical parameters and multiparametric MRI for advanced risk modeling of prostate
cancer -patient-tailored risk stratification can reduce unnecessary biopsies
By: Radtke J. P. 1, Bonekamp D. 2, Kesch C. 1, Freitag M. 2, Alt C. 3, Celik K. 1, Distler F. 5, Roth W. 5, Wieczorek K. 6, Duensing S. 1, Roethke M. 2, Teber D. 1, Schlemmer H-P. 2, Hohenfellner M. 1, Hadischik B. 1
Institutes: University Hospital Heidelberg, Dept. of Urology, Heidelberg, Germany, 2German Cancer Research Center, Dept. of Radiology, Heidelberg, Germany, 3University Hospital Düsseldorf, Dept. of Interventional and Diagnostic Radiology, Düsseldorf, Germany, 4Paracelsus University Nürnberg, Dept. of Urology, Nürnberg, Germany, 5University Medicine Mainz, Dept. of Pathology, Mainz, Germany, 6University of Heidelberg, Dept. of Pathology, Heidelberg, Germany

Added value of pre-biopsy prostate multiparametric MRI in biopsy-naïve 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. 1, Schoots I. 2, Drost F.-J. 2, Bokhorst L. 1, Van Leenders G. 3, Dwarkasing R. 2, Barentsz J. 4, Schröder F. 1, Bangma C. 1, Roobol M. 1
Institutes: Erasmus MC, Dept. of Urology, Rotterdam, The Netherlands, 2Erasmus MC, Dept. of Radiology, Rotterdam, The Netherlands, 3Erasmus MC, Dept. of Pathology, Rotterdam, The Netherlands, 4Radboud MC, Dept. of Radiology, Nijmegen, The Netherlands
**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

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**13:22 - 13:30**

Associated video presentation  
**Focal therapy with HIFU FocalOne device with MRI target fusion biopsy by KOELIS**

To be confirmed

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**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.², Du Plessis M.², Buerki C.², Erho N.², Ong K.², Daviccion E.²

**Institutes:** University 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

Associated video presentation

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**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

Associated video presentation

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**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, Roumeguère T.³, Joniau S.⁴, Van Cleynenbreugel B.⁴

**Institutes:** ¹Az Maria Middelares, Dept. of Urology, Gent, Belgium, ²Belgian Cancer Registry, Belgian Cancer Registry, Brussels, Belgium, ³Erasmus Hospital, Dept. of Urology, Brussels, Belgium, ⁴University Hospital of Leuven, Dept. of Urology, Leuven, Belgium

Associated video presentation

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**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.³, Montorsi F.³, Briganti A.¹

**Institutes:** ¹Vita-Salute University San Raffaele, Dept. of Urology, Milan, Italy, ²Magna Graecia University, Dept. of Urology, Catanzaro, Italy, ³Vita–Salute University San Raffaele, Dept. of Pathology, Milan, Italy, ⁴Polytechnic University of The Marche Region, Section of Pathological Anatomy, Ancona, Italy

Associated video presentation
Aims and objectives of this presentation
This session presents several aspects of the 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.

*507 Bilbao republican urologists prosecuted by Franco's regimen after Spanish Civil War
By: Angulo J.1, Guimon J.2, Gondra J.3, Pérez-Varza G.4, Ercoreka A.5
Institutes: 1Hospital Universitario de Getafe, Dept. of Urology, Getafe, Spain, 2Universidad Del Pais Vasco, Dept. of Psychiatry, Bilbao, Spain, 3Universidad Del Pais Vasco, Museum of History of Medicine, Bilbao, Spain, 4Universidad Del Pais Vasco, Dept. of Physiology, Bilbao, Spain

*508 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
By: Fariña-Pérez L.A.1, Fernández-Arias M.2
Institutes: 1Hospital Povisa, Dept. of Urology, Vigo, Spain, 2History Office, University of Medical Sciences and Cuban Society of History of Medicine, Havana, Cuba

*510 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
By: Fariña-Pérez L.A.1, Cunha T.2
Institutes: 1Hospital Povisa, Dept. of Urology, Vigo, Spain, 2House-Museum Reynaldo dos Santos, Parede-Cascais, Portugal

*511 Lithotomia Douglassiana; the book, the operation and the fight
By: Goddard J.
Institutes: University Hospitals of Leicester NHS Trust, Dept. of Urology, Leicester, United Kingdom

*512 Carl Posner (1854-1928): Pioneer of urology and sexology
By: Krischel M., Moll F., Fangerau H.
Institutes: Heinrich Heine University Düsseldorf, Dept. of The History, Philosophy, and Ethics of Medicine, Düsseldorf, Germany
Recent discovery of phallic depictions in prehistoric cave art in Asia minor
By: Verit A.
Institutes: Fsm Hospital, Urology, Istanbul, Turkey
Associated video presentation

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
Associated video presentation

Withdrawn
By:
Institutes:
Associated video presentation

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
Associated video presentation

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: ¹Athens 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
Associated video presentation

Godfather of modern renal surgery; a Novick
By: Sogaolu O., Calleary J.
Institutes: Pennine Acute Trust, Dept. of Urology, Manchester, United Kingdom
Associated video presentation
Best Posters Regional Meetings

Location: Room 9, Capital suite (level 3)
Chairs: B. Djavan, Vienna (AT)  
J. Rassweiler, Heilbronn (DE)

Aims and objectives of this presentation
This poster session includes the top poster which have been presented during the three different Regional Meetings 2016. Base 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.

12:18 - 12:18
RM01: Validation of risk nomogram to predict lymph node invasion in prostate cancer patients undergoing lymph node dissection  
D. Milonas, Kaunas (LT)

12:18 - 12:18
RM03: Long-term functional outcomes of nephron sparing surgery for renal masses in the solitary kidney  
L. Suslov, Minsk (BY)

12:18 - 12:18
RM04: Transition of NMIBC grading system from 1973 to 2004 WHO classification in Tartu 2010-2013  
R. Ots, Tartu (EE)

12:18 - 12:18
RM06: Are small renal masses always harmless and large ones threatening?  
M. Jakubovskis, Riga (LV)

12:18 - 12:18
RM08: Resurfacing and reconstruction of the glans penis after partial penile amputation - initial experience and cosmetic results  
O. Ivanovski, Skopje (MK)

12:18 - 12:18
RM09: Complications of en-block resection of bladder tumors with bipolar hook cutting electrode  
S. Hawlina, Ljubljana (SI)

12:18 - 12:18
RM12: 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  
K. Teke, Kocaeli (TR)

12:18 - 12:18
RM13: Robotic (Avicenna) flexible ureteroscopy in renal stones  
B. Geavlete, Bucharest (RO)

12:18 - 12:18
RM14: 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)

12:18 - 12:18
RM15: Risk of malignancy in complex cystic renal masses (Bosniak category III-IV)  
C. Mirvald, Bucuresti (RO)

12:18 - 12:18
RM16: Genomic aspects regarding prostate cancer aggressiveness
B. Cheorpeaca, Bucharest (RO)

12:18 - 12:18

RM19: Laparoscopic repair of ileal conduit parastomal hernia using the modified Sugarbaker technique (video)
D. Garcia Rojo, Barcelona (ES)
Aims and objectives of this presentation
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
Aims and objectives of this presentation
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 to forget 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

Asynchronous bilateral PCNL in horseshoe kidney with high stone burden: Review of demanding aspects
By: Agudelo J.A.¹, Arias E.¹, Chirinos J.¹, Ktech N.¹, Urdaneta L.², Riveros M.², Bustamante J.²
Institutes: Hospital Coromoto De Maracaibo, Dept. of Urology, Maracaibo, Venezuela, ²Hospital 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
By: Carballo Quintá M.¹, López García S.¹, Castro Iglesias M.¹, Rivas Dangel G.², Almúster Domínguez S.¹, Rodríguez Socarrás M.E.¹, Montero Fabuena R.¹, Pérez Schoch M.¹, López Diez E.¹, Ojea Calvo A.¹
Institutes: Complejo Hospitalario Universitario De Vigo, Dept. of Urology, Vigo, Spain, ²Complejo Hospitalario Universitario De Vigo, Dept. of Ophtalmology, Vigo, Spain

*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.¹, Saglam R.², Georgescu D.³, Multescu R.³, Mirculescu V.³, Kabakci A.S.⁴, Geavlete B.⁵
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
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., Sharma A.

Institutes: 1Chitale Clinic Pvt. Ltd., Dept. of Urology, Solapur, India, 2Chitale Clinic Pvt. Ltd., Dept. of Radiology, Solapur, India
Robotic surgery in urology
3DHD Live surgery

Location: Room Copenhagen, North Hall (Level 1)

Sunday, 26 March
14:00 - 17:00

Moderators: P. Dasgupta, London (GB)
J-U. Stolzenburg, Leipzig (DE)
N.P. Wiklund, Stockholm (SE)

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
C. Vaessen, Paris Cedex 13 (FR)
Experimental approaches in personalized medicine in urothelium tumors
Poster Session 39

Location: Room Madrid, North Hall (Level 1)

Chairs: To be confirmed
M. Knowles, Leeds (GB)
M. Sanchez-Carbayo, Vitoria-Gasteiz (ES)

Aims and objectives of this presentation
Natural course of bladder cancer could be affected by many factors. In order to predict 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, Heinzellman J.1, Krause E.2, Stoeckle M.1, Stampe Ostenfeld M.3, Junker K.1
Institutes: Saarland 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, Shiraiishi Y.2, Nakagawa T.1, Kume H.1, Nishimatsu H.2, Okane Y.3, Sanada M.4, 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 Reserarch 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 Oncologic Research, Lund, Sweden, 2Clinical Sciences, Dept. of Oncology and Pathology, Lund, Sweden

*524 Urine based DNA methylation biomarkers for monitoring bladder cancer
By: Van Der Heijden A.7, Mengual L.1, Ingelmo-Torres M.1, Lozano J.3, Van Rijt-Van De Westerlo C.4, Santos P.1, Geavlete B.3, Moldoveanu C.1, Ene C.3, Dinney C.6, Czerniak B.7, Schalken J.4, Kiemeney L.8, Ribal M.1, Witjes J.2, Alcaraz A.1
Institutes: 1Hospital Clinic, IDIBAPS, Dept. of Urology, Barcelona, Spain, 2Radboudumc, Dept. of Urology, Nijmegen, The Netherlands, 3Hospital Clinic, CIBERehd, IDIBAPS, Barcelona, Spain, 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, Laitinen A.1, Mirtti T.4, Koskinen I.5, Salminen A.1, Taimen P.6, Schleutker J.3

Institutes: 1Turku University Hospital, Dept. of Urology, Turku, Finland, 2University of Turku, Institute 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

SMYD3 drives IGF-1R-AKT pathway activation in bladder cancer


Institutes: 1Shandong University, School of Nursing, Jinan, China, 2Shandong University Qilu Hospital, Dept. of Urology, Jinan, China

Her2 alterations in muscle-invasive bladder cancer: There is more than protein expression in patient selection for targeted therapy

By: Kiss B.2, Wyatt A.1, Douglas J.3, Skuginna V.2, Mo F.1, Anderson S.1, Rotzer D.2, Fleischmann A.4, Genitsch V.4, Hayashi T.5, Neuenschwander M.4, Bücki C.6, Davicioni E.6, Collins C.1, Thalhammer G.2, Black P.1, Seiler R.1

Institutes: 1University of British Columbia, Dept. of Urologic Sciences, Vancouver, Canada, 2University of Bern, Dept. of Urology, Bern, Switzerland, 3University Hospital of Southampton, Dept. of Urology, Hampshire, United Kingdom, 4University of Bern, Institute of Pathology, Bern, Switzerland, 5Hiroshima University, Dept. of Urology, Hiroshima, Japan, 6GenomeDx, Biosciences, Vancouver, Canada

15:15 - 15:25

Molecular subtypes urothelial cancer

M. Sanchez-Carbayo, Vitoria-Gasteiz (ES)
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
Institutes: Queen’s University, Dept. of Urology, Kingston, Canada, Boston University School of Public Health, Boston Collaborative Drug Surveillance Program, Lexington, United States of America, New England Research Institutes, Watertown, United States of America

Phosphodiesterase inhibitors for BPH-LUTS: Is the benefit worth?
By: Pattanaik S., Mavuduru R., Panda A., Mathew J., Aggarwal M., Singh S., Mandal A.
Institutes: Postgraduate Institute of Medical Education and Research, Dept. of Pharmacology, Chandigarh, India, Postgraduate Institute of Medical Education and Research, Dept. of Urology, Chandigarh, India, CMC, Dept. of Urology, Vellore, India, Postgraduate Institute of Medical Education and Research, Dept. of Pediatrics, Chandigarh, India, NMC Specialty Hospital, Dept. of Urology, Abu Dhabi, United Arab Emirates

Antimuscarinic use in the elderly: A poisoned apple?
By: Meyer C., Pucheril D., Karabon P., Gild P., Von Landenberg N., Atiemo H., Menon M., Chughtai B., Fisch M., Chun F., Trinh Q-D.
Institutes: Brigham 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, Henry Ford Health System, VUI Center for Outcomes Research, Analytics and Evaluation, Vattikuti Urology Institute, Detroit, United States of America, Weil Cornell Medical College/New York Presbyterian Hospital, Dept. of Urology, New York, United States of America, University Medical Center Hamburg-Eppendorf, Dept. of Urology, Hamburg, Germany

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., Asakura H., Seki N., Tokunaga S.
Institutes: Dokkyo Medical University, Dept. of Urology, Tochigi, Japan, Saitama Medical University Hospital, Dept. of Urology, Saitama, Japan, Kyushu Central Hospital, Dept. of Urology, Fukuoka, Japan, Kyushu 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
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.2, Yanagisawa T.2, Kawaguchi T.2, Imai A.1, Yoneyama T.1, Hashimoto Y.1, Koie T.1, Saito H.5, Yamaya K.3, Funyu T.5, Ohyama C.1

Institutes: Hirosaki 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, 6Oyoky 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.1, Rosa Arias J.2, Skoumal R.4, Walters C.4, Yavuz Y.4, De Wachter S.6

Institutes: 1Tyntesfield Medical Group, Brockway Medical Centre, Nailsea, United Kingdom, 2Hospital “Santiago Apóstol”, Dept. Of Urology, Miranda De Ebro, Spain, 3Urocentrum Brno, Dept. Of Urology, Brno, Czech Republic, 4Astellas Pharma Europe Ltd, Medical and Clinical Operations, Chertsy, 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, Chertsy, United Kingdom

Post-operative continuous use of antimuscarinics in BPH patients with storage symptoms requiring antimuscarinics before surgery – A nationwide population-based study


Institutes: 1Taipei Veterans General Hospital, Dept. Of Urology, Taipei, Taiwan

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.3

Institutes: 1Private Urology Practice, Dept. Of Urology, Bremerhaven, Germany, 2Boston University School of Public Health, Dept. Of Epidemiology and Statistics, Boston, United States Of America, 3Boston University School Of Medicine, Dept. Of Urology And Biochemistry, Boston, United States Of America

The effect of non-steroidal anti-inflammatory drugs on risk of benign prostatic hyperplasia

By: Murtola T.1, Nygård L.1, Talala K.3, Taari K.2, 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 presentation**

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.,1 Bellangino M.,1 Voglino O.A.,1 Baldassarri V.,1 Pignatelli M.,2 Berardi E.,2 Tema G.,1 Cremona A.,2 Tubaro A.1

**Institutes:** SANT’ANDREA Hospital - Sapienza University, Dept. of Urology, Rome, Italy, 2SANT’ANDREA Hospital - Sapienza University, Dept. of Radiology, Rome, Italy

**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:** Yarimoglu S., Bozkurt I.H., Aydogdu O., Yonguc T., Gunlusoy B., Degirmenci T.

**Institutes:** Izmir Bozyaka Training and Research Hospital, Dept. of Urology, Izmir, Turkey

**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., Nabeel M., Shokeir A.

**Institutes:** Mansoura University, Dept. of Urology, Mansoura, Egypt

**548**

**Preoperative predictors of infection complications in PCNL surgery. A prospective study**

**By:** Ordaz Jurado D.D.G., Lorenzo L., Budia A., Lópeza-Acón D., Bahilo P., Trassierra M., Boronat F.

**Institutes:** LA FE, Universitary and Polytechnic Hospital, Dept. of Urology, Valencia, Spain

**549**

**Validation of automated kidney stone volumetry in low dose computed tomography**

**By:** Wilhelm K.1, Hein S.1, Schlager D.1, Adams F.1, Miernik A.1, Schoenthaler M.1, Hesse A.2, Neubauer J.3

**Institutes:** Faculty of Medicine and Medical Center - University of Freiburg, Center For Surgery Department of Urology, Freiburg, Germany, 2University of Bonn, Department of Urology, Division of Experimental Urology, Bonn, Germany, 3Faculty of Medicine and Medical Center - University of Freiburg, Department of Radiology, Freiburg, Germany

**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, Egypt, 2Alazhar University, Dept. of Urology, Cairo, Egypt

**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

*552

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: ¹Military Hospital Avicenne, Dept. of Urology, Marrakech, Morocco, ²Military Hospital, Dept. of Urology, Guelmim, Morocco

*554

In vitro assessment of the hydrodynamic clearance of stone fragments and dust in percutaneous nephrolithotomy instruments
By: Mager R.¹, Balzereit C.², Herrmann T.³, Nagele U.⁴, Haferkamp A.¹, Schilling D.⁵
Institutes: ¹University Medical Center Mainz, Dept. of Urology, Mainz, Germany, ²ExperTeach GmbH, Dept. of Physics, Dietzenbach, Germany, ³Hannover Medical School, Dept. of Urology and Urologic Oncology, Hannover, Germany, ⁴General Hospital Hall, Dept. of Urology and Andrology, Hall in Tyrol, Austria, ⁵Isarkliniken Munich, Dept. of Urology, Munich, Germany

*556

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.⁵, Al-Kandari A.⁶
Institutes: ¹Cairo 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

*559

CT-controlled stone-free-rate after minimal-invasive percutaneous nephrolitholapaxy (MIP) in correlation with instrument-size
By: Schachtner J.R.¹, Tokas T.¹, Kitzbichler G.¹, Habicher G.¹, Herrmann T.², Nagele U.¹
Institutes: ¹Landeskrankenhaus Hall, Dept. of Urology and Andrology, Hall in Tirol, Austria, ²Hannover Medical School (MHH), Urology and Urooncology, Hannover, Germany
OAB and nocturia

Poster Session 42

Sunday, 26 March
14:00 - 15:30

Location: Room Amsterdam, North Hall (Level 1)

Chairs: M. J. Drake, Bristol (GB)
        M. Oelke, Hanover (DE)
        A. J. Wein, Philadelphia (US)

Aims and objectives of this presentation
OAB and nocturne remain important clinical challenges in an aging population. What is new?

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.⁵, Ervin C.³, Khan F.², Goldin J.⁴
Institutes: ¹Melbourne Health, Dept. of Rehabilitation and Sub-Acute Community Services, Parkville, Australia, ²Melbourne Health, Dept. of Rehabilitation Services, Parkville, Australia, ³Melbourne Health, Dept. of Sub-Acute Community Services, Parkville, Australia, ⁴Melbourne Health, Dept. of Respiratory and Sleep Medicine, Parkville, Australia, ⁵Melbourne 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: ¹University of Fukui, Dept. of Urology, Fukui, Japan, ²University of Yamanashi, Dept. of Urology, Yamanashi, Japan, ³Nagoya University Graduate School of Medicine, Dept. of Urology, Nagoya, Japan, ⁴National Center For Geriatrics and Gerontology, Dept. of Urology, Obu, Japan, ⁵Asahikawa Medical University Medical, Dept. of Renal and Urologic Surgery, Asahikawa, Japan, ⁶Nihon University School of Medicine, Dept. of Urology, Tokyo, Japan, ⁷Sapporo 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., Ecclestone 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 S.²
Institutes: ¹Zuyderland Medical Center Heerlen, Dept. of Urology, Heerlen, The Netherlands, ²Maastricht 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 corresponding improvements in urinary

Scientific Programme
**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

*568

**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

*569

**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.⁸, Evans C.⁹

**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

*570

**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

*571

**Three-months results of implant driven tibial nerve stimulation for the treatment of overactive bladder syndrome**

By: Van Breda J., Martens F., Tromp J., Heesakkers J.

**Institutes:** Radboud University Medical Center, Dept. of Urology, Nijmegen, The Netherlands

*572

**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.⁵, Kozomara M.⁶, Roggenkemp A.⁷, Kessler T.⁸

**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 Antwerpen, Dept. of Urology, Antwerpen, Belgium

*573

**Do patients with OAB experience different bladder sensations?**

By: Herrewegh A., Vrijens D., Marcelissen T., Van Koeveeringe G.

**Institutes:** Maastricht Universitair Medisch Centrum+, Dept. of Urology, Maastricht, The Netherlands

*574

**Affective symptoms and quality of life in patients with voiding or storage dysfunction -results before and after sacral neuromodulation**

By: Jairam R., Dossaerts J., Schilders I., Vrijens D., Van Koeveeringe G., Van Kerrebroeck P.

**Institutes:** Maastricht UMC+, Dept. of Urology, Maastricht, The Netherlands
**Aims and objectives of this presentation**
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., Soda T., Ueda N., Fujihara S., Kiuchi H., Tsujimura A., Tanaka H., Nonomura N.  
Institutes: Osaka University Graduate School of Medicine, Dept. of Urology, Suita, Japan, Juntendo University Urayasu Hospital, Dept. of Urology, Urayasu, Japan, Nagasaki International University, Faculty of Pharmaceutical Sciences, Sasebo, Japan

*576*  
**Does detection of DDX4 mRNA in cell free seminal plasma represents a reliable non-invasive germ cell marker in patients with non-obstructive azoospermia?**  
By: Abdallah W., Hashad D., Abdelmaksoud R., Hashad M.M.E.  
Institutes: University of Alexandria, Dept. of Urology, Alexandria, Egypt, University of Alexandria, Dept. of Dermatology, Venereology and Andrology, Alexandria, Egypt, University of Alexandria, Dept. of Clinical Pathology, Alexandria, Egypt

*577*  
**Therapeutic effect of RIPK1 inhibitor in testicular ischemia-reperfusion**  
By: Ohira S., Hara R., Tone S., Nagai A.  
Institutes: Kawasaki Medical School, Dept. of Urology, Kurashiki City, Japan, Graduate School of Tokyo Denki University, Dept. of Life Science and Engineering, Hatoyama-Cho, Japan

*578*  
**Formation of the human sperm reservoir and its major players**  
By: Bour S., Paschold R., Alba-Alejandre I., Becker A., Stief C., Koelle S., Trottmann M.  
Institutes: University of Munich, Dept. of Urology, Munich, Germany, University of Munich, Dept. of Gynecology, Munich, Germany, University 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 glycochalix 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**
**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.1, Pederzoli F.2, Ventimiglia E.2, Capogrosso P.2, Cazzaniga W.2, Frego N.2, Oreggia D.2, Scano R.2, Montanari E.1, Gaboardi F.3, Montorsi F.2, Salonia A.2

Institutes: 1IRCCS Fondazione Ca' Granda - Ospedale Maggiore Policlinico, Dept. of Urology, Milan, Italy, 2IRCCS San Raffaele Hospital/ University Vita-Salute San Raffaele, Division of Oncology, Unit of Urology, Milan, Italy, 3IRCCS San Raffaele Hospital, Division of Oncology, Unit of Urology, Milan, Italy

**Clinical and experimental studies suggest a novel cause of male infertility: Deficiency in expression of sperm phospholipase Cζ**


Institutes: 1Aristotle University, Dept. of Urology, Thessaloniki, Greece, 2Tottori University, Dept. of Urology, Yonago, Japan, 3Ioannina University, Dept. of Urology, Ioannina, Greece

**The evolving profile of comorbidities in infertile men: Results from a 10-years follow-up cohort study**

By: Ventimiglia E.1, Cazzaniga W.1, Pederzoli F.1, Frego N.1, Chierigo F.1, Capogrosso P.1, Boeri L.2, Alfano M.3, Scano R.3, Mirone V.4, Montorsi F.1, Salonia A.1

Institutes: 1IRCCS San Raffaele Hospital/ University Vita-Salute San Raffaele, Dept. of Oncology and Urology; URI, Milan, Italy, 2IRCCS Ca' Granda Hospital Maggiore Policlinico, Dept. of Urology, Milan, Italy, 3IRCCS San Raffaele Hospital, Dept. of Oncology and Urology; URI, Milan, Italy, 4University of Naples Federico II, Dept. of Urology, Naples, Italy

**Male infertility is a risk for depression and low self-esteem: Prospective, case-control, clinical study**

By: Basar M.M.2, Kendirci M.1, Alkan E.2, Semiz A.2, Sirin H.3, Balbay D.2

Institutes: 1Istinye University, Faculty of Medicine, Liv Hospital Ulus, Dept. of Urology, Istanbul, Turkey, 2Memorial Sisli Hospital, Dept. of Urology, Istanbul, Turkey, 3Arnavutköy State Hospital, Dept. of Urology, Istanbul, Turkey

**Male infertility is associated with altered treatment course of men with cancer**

By: Eminaga O.1, Shufeng L.2, Brooks J.2, Eisenberg M.2

Institutes: 1University Hospital of Cologne, Dept. of Urology, Cologne, Germany, 2Stanford University, School of Medicine, Stanford, United States of America

**How realistic is endoscopic vasectomy? An ex-vivo study on feasibility and certainty of endoluminal occlusion of porcine vas deferens**

By: Schlager D.1, Maas J.M.1, Spittau B.2, Leiber C.1, Wetterauer U.1, Diemer T.3, Weidner W.3, Schönhalder M.1, Miernik A.1

Institutes: 1University Medical Center Freiburg, Dept. of Urology, Freiburg, Germany, 2University Medical Center Freiburg, Dept. of Anatomy, Freiburg, Germany, 3University Hospital Giessen, Dept. of Urology, Pediatric Urology and Andrology, Giessen, Germany

**Summary**

Z. Kopa, Budapest (HU)
Aims and objectives of this presentation
This session presents the recent advances and evidence about enhanced recovery after surgery programs, as well as new data regarding peri-operative 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.

*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.\(^1\), Sridhar A.\(^2\), Mohammed A.\(^2\), Baker H.\(^2\), Briggs T.\(^2\), Tan M.\(^4\), Kelly J.\(^1\)
Institutes: University College London, Dept. of Surgery and Interventional Science, London, United Kingdom, \(^2\)University College London Hospitals, Dept. of Urology, London, United Kingdom, \(^3\)University of Glasgow, School of Medicine, London, United Kingdom, \(^4\)University 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: University of Sheffield, Dept. of Oncology and Academic Urology Unit, Sheffield, United Kingdom, \(^2\)Royal 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.\(^1\)
Institutes: Academic Medical Centre Hospital Santa Maria Della Misericordia, Dept. of Urology, Udine, Italy, \(^2\)University 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

*594 Validation of the Clavien-Dindo grading system in urology by the EAU guidelines ad hoc panel
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: Royal Marsden Hospital NHS, Dept. of Urology, London, United Kingdom, \(^2\)Royal Marsden Hospital NHS, Dept. of Anaesthesia, London, United Kingdom

Can pre-operative gait velocity (GV) replace cardiopulmonary exercise testing (CPET) as an independent predictor of survival and complications following radical cystectomy (RC)?
By: Fynmore T\(^1\), Abdulnassir L.\(^1\), Parsons B.\(^2\), Nair R.\(^2\), Khan S.\(^2\), Thurairaja R.\(^2\)
Institutes: Guy's & St Thomas NHS Foundation Trust, Dept. of Urology and Physiotherapy, London, United Kingdom, \(^2\)Guy's & St Thomas NHS Foundation Trust, Dept. of Urology, London, United Kingdom

Procedure-specific risks of thrombosis and bleeding in urological cancer surgery: Systematic reviews and meta-analyses
By: Tikkinen K.\(^1\), Craigie S.\(^2\), Agarwal A.\(^3\), Violette P.\(^4\), Novara G.\(^5\), Cartwright R.\(^6\), Naspro R.\(^7\), Siemieniuk R.\(^8\), Ali B.\(^9\), Eryuzlu L.\(^9\), Geraci J.\(^9\), Winkup J.\(^9\), Yoo D.\(^9\), Gould M.\(^10\), Sandset P.\(^11\), Guyatt G.\(^12\)
Institutes: University of Helsinki, Dept. of Urology and Public Health, Helsinki, Finland, \(^2\)McMaster University, Michael G. DeGroote National Pain Center, Hamilton, Canada, \(^3\)University of Toronto, School of Medicine, Toronto, Canada, \(^4\)Woodstock General Hospital, Dept. of Surgery, Division of Urology, Woodstock, Canada, \(^5\)University of Padua, Dept. of Surgical, Oncological, and Gastroenterological Sciences, Urology Clinic, Padua, Italy, \(^6\)Imperial College London, Dept. of Epidemiology and Biostatistics, London, United Kingdom, \(^7\)ASST Papa Giovanni XXIII, Dept. of Urology, Bergamo, Italy, \(^8\)University of Toronto, Dept. of Medicine, Toronto, Canada, \(^9\)McMaster University, Dept. of Clinical Epidemiology and Biostatistics, Hamilton, Canada, \(^10\)Kaiser Permanente Southern California, Dept. of Research and Evaluation, Pasadena, United States of America, \(^11\)University of Oslo, Institute of Clinical Medicine, Oslo, Norway, \(^12\)McMaster 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: Colchester Hospital University NHS Foundation Trust, Dept. of Urology, Colchester, United Kingdom, \(^2\)Colchester Hospital University NHS Foundation Trust, Dept. of Haematology, Colchester, United Kingdom

Prediction of postoperative complications after radical nephrectomy, based on patient comorbidity preoperatively
By: Fragiadis E., Alamanis C., Mitropoulos D., Constantinides C.A.
Institutes: Laiko Hospital, Urology, Zografou-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: The Royal Gwent Hospital, Dept. of Urology, Newport, United Kingdom, \(^2\)The Royal Gwent Hospital, Dept. of Anaesthetics, Newport, United Kingdom

15:15 - 15:22
Summary
To be confirmed
Paediatric urology 2
Poster Session 45

| Location: Room London, North Hall (Level 1) |
| Chairs: To be confirmed |
| M.S. Silay, Istanbul (TR) |
| To be confirmed |

Aims and objectives of this presentation
Paediatric urology 3 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: M.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, ⁴S.P. Medical College Bikaner, Dept. of Urology, 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 prepuical flap tube and urethra in severe hypospadias |
| By: Bhat A.¹, Bhat M.², Tomar V.S.³, Singh V.³, Bhat A.³, Goyal S.³ |
| Institutes: Dr. 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.¹, Bhat M.¹, Upadhayay R.², Bhat A.², Goyal S.² |
| Institutes: M.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: |
Institutes: Chonnam National University Medical School, Dept. of Urology, Gwangju, South Korea

*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

*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 Institute, 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

*613

The activity and discussion points of #Circumcision through Twitter; a microblogging platform
By: Ucar T., Çulpan 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
By: Sakr A., Omran M., Fawzi A., Youssef K., Desoky E., Elkady E., Seleem A., Elgalaly H., Elsayed E., Khalil S.
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.1, Smelders N.2, Wood D.3, Couchman A.1
Institutes: 1Kingston Hospital, Dept. of Urology, Kingston Upon Thames, United Kingdom, 2Great Ormond Street Hospital For Children, Dept. of Urology, London, United Kingdom, 3University College London Hospital, Dept. of Urology, London, United Kingdom
**Aims and objectives of this presentation**
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.

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**Molecular characterization of magnetic resonance imaging visible and invisible prostate cancer: Biological insights and therapeutic implications**

*By: Salami S.¹, Hovelson D.², Udager A.², Lee M.¹, Curci N.³, 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,² University of Michigan, Dept. of Pathology, Ann Arbor, United States of America,³University of Michigan, Dept. of Radiology, Ann Arbor, United States of America

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**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,³Cantonal Hospital St. Gallen, Dept. of Oncology, St. Gallen, Switzerland

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**Ex vivo metabolic fingerprinting identifies biomarkers predictive of prostate cancer recurrence**

*By: Braadland P.R.¹, Giskeødegård G.², Guldvik I.J.³, Sandsmark E.², Bertilsson H.², Euceda L.², Hansen A.², Grytli H.H.², Katz B.³, Svindland A.³, Berge V.³, Eric L.M.³, 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,²Norwegian University of Science and Technology (NTNU), Dep. of Circulation and Medical Imaging, Trondheim, Norway,³Oslo University Hospital, Institute of Cancer Research, Oslo, Norway,⁴St. Olav’s Hospital and Norwegian University of Science and Technology (NTNU), Dep. of Urology and Dep. of Circulation and Medical Imaging, Trondheim, Norway,⁵Oslo University Hospital, Dept. of Pathology, Oslo, Norway,⁶Oslo University Hospital, Dept. of Urology, Oslo, Norway,⁷Oslo University Hospital, Institute of Informatics, Oslo, Norway

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**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.², Dell'oglio P.¹, Gandaglia G.¹, Fossati N.¹, Stabile A.¹, Zorn K.C.², Montorsi F.¹, 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,²Prostate Cancer Center Hamburg-Eppendorf, Martini-Clinic, Hamburg, Germany,³University of Montreal Health Center, Dept. of Surgery, Section of Urology, Montreal, Canada
Identification of tumour specific biomarkers associated to serum lactate dehydrogenase levels for predicting clinical responses to docetaxel chemotherapy in mCRPC
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.1,2, Roupret M.4, 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: Tsunuma 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 (OptiprepTM) density gradient
By: Dhondt B.1, Claeyts T.1, Poelaert F.1, Buelens S.1, Vergauwen G.2, Van Deun J.2, Geurickx E.2, Hendrix A.2, De Wever O.2, Lumen N.1
Institutes: 1Universitair Ziekenhuis Gent, Dept. of Urology, Gent, Belgium, 2Universitair Ziekenhuis Gent, Dept. of Radiation Oncology and Experimental Cancer Research, Gent, 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.1, 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
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/Movement 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)
R. Montironi, Ancona (IT)
R.F. Van Velthoven, Brussels (BE)

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., Murer T., 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
Institutes: Istituto Clinico Humanitas, Ircs, Dept. of Urology, Milan, Italy, Università Degli Studi Di Perugia, Dept. of Medicine, Perugia, Italy, Humanitas Mater Domini, Dept. of Urology, Varese, Italy, Istituto Clinico Humanitas, Ircs, 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., Thiry S., Annet L., Butoescu V., Lecouvet F., Tombal B.
Institutes: Cliniques Universitaires Saint-Luc, Dept. of Urology, Brussels, Belgium, Cliniques 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., Prues S., Saul J., Budäus L., Tilki D., Graefen M., Haferkamp A., Boehm K.
Institutes: University Medical Center, Johannes Gutenberg University, Dept. of Urology and Pediatric Urology, Mainz, Germany, University Medical Center, Martinis-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 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

Cribriform 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.⁴, Frei B.¹, Faletti R.², Fonio P.², Gontero P.¹
Institutes: University 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

Cost-effectiveness analysis of magnetic resonance imaging-ultrasound fusion biopsy versus systematic transrectal ultrasound-guided biopsy in diagnosing prostate cancer
By: Ingham M., Mossanen M., Wang Y., Chang S.
Institutes: Brigham and Women’s Hospital, Harvard Medical School, Dept. of Urology, Boston, United States of America

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: Regina 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

Withdrawn

Associated video presentation Robotic MRI/US fusion transperineal biopsy using the iSR’obot Mona Lisa: Technique, safety and accuracy
A. Patel, London (GB)
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, Lucerne (CH)
M. Oya, Tokyo (JP)
B. Peyronnet, Rennes (FR)

Aims and objectives of this presentation
To discuss various predictive and prognostic factors.

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

*640

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

Associated video presentation

*641

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, Carenzani C.1, Dell’oglio P.1, Rigatti P.2, Dehó F.1, Montorsi 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

Associated video presentation

*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
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:** Rosati S.1, Hsu R.1, Hcks C.2, Goh V.3, Hanbury D.4, Nathan P.1, Nicolo D.5, Fleming S.5, Sweeting M.6, Watson C.7, Wilson E.10, Stewart G.1

**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 Centre for Health Services Research, Cambridge, United Kingdom

**Associated video presentation**

Predictive and prognostic effect of inflammatory lymphadenopathies in renal cell carcinoma

**By:** Pecoraro A.1, Larcher A.1, Nini A.1, Muttin F.1, Stabile A.1, Di Trapani E.1, Carenezi C.1, Tesvisani F.1, De Cobelli F.2, Gaboardi F.1, Guazzoni G.3, Briganti A.1, Montorsi F.1, Bertini R.1, Capitanio U.1

**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

**Associated video presentation**

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...
Outcome of papillary versus clear cell renal cell carcinoma varies significantly in non-metastatic disease


Institutes: ¹Mannheim Medical Center, University Hospital, Germany, Dept. of Urology, Mannheim, Germany, ²German Cancer Research Center, Heidelberg, Germany, Dept. of Biostatistics, Heidelberg, Germany, ³Medical University of Graz, Austria, Dept. of Urology, Graz, Austria, ⁴University Medical Center, University of Mainz, Germany, Dept. of Urology, Mainz, Germany, ⁵Klinikum Nuernberg, University Hospital Paracelsus University, Nuernberg, Germany, Dept. of Urology, Nuernberg, Germany, ⁶Carl-Thiem-Klinickum Cottbus, Germany, Dept. of Urology, Cottbus, Germany, ⁷University of Muenster Medical Center, Muenster, Germany, Dept. of Urology, Muenster, Germany, ⁸Julius-Maximilians-University Medical Center Wuerzburg, Germany, Dept. of Urology, Wuerzburg, Germany, ⁹Fundeni Clinical Institute, Bucharest, Romania, Center of Urological Surgery, Dialysis and Renal Transplantation, Bucharest, Romania, ¹⁰Hospital Clinic, University of Barcelona, Spain, Dept. of Urology, Barcelona, Spain, ¹¹HELIOS Hospital, Bad Saarow, Germany, Dept. of Urology, Bad Saarow, Germany, ¹²Faculty Hospital Plzen and Faculty of Medicine Plzen, Charles University, Prague, Czech Republic, Dept. of Urology, Prague, Czech Republic, ¹³Instituto Nacional De Cancerologia (INCan), Mexico City, Mexico, Dept. of Urology, Mexico City, Mexico, ¹⁴San Raffaele Scientific Institute, Milan, Italy, Unit of Urology and Division of Experimental Oncology, Urological Research Institute (URI), Milan, Italy, ¹⁵Medical University of Vienna, Austria, Dept. of Urology, Vienna, Austria, ¹⁶University Hospital Carl Gustav Carus, Technical University of Dresden, Germany, Dept. of Urology, Dresden, Germany, ¹⁷San Pio Da Pietrelcina Hospital, Vasto, Italy, Dept. of Urology, Vasto, Italy, ¹⁸St. Elisabeth-Hospital Straubing, Germany, Dept. of Urology, Straubing, Germany, ¹⁹Ludwig–Maximilians-University, Munich, Germany, Dept. of Urology, Munich, Germany

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, Powles T.⁷, Van Werkhoven E.⁸, Meijer R.P.⁹, Ljungberg B.¹⁰, Bex A.¹⁰

Institutes: ¹Lund 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

Contemporary incidence and epidemiologic trends of brain metastases at renal cell carcinoma diagnosis
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

Associated video presentation

Contact with renal sinus is a significant risk factor for metastasis in pT1 clear cell renal cell carcinoma


Institutes: Tokyo Medical and Dental Graduate School, Dept. of Urology, Tokyo, Japan, Saitama Cancer Center, Dept. of Urology, Saitama, Japan, Tokyo Metropolitan Cancer and Infectious Diseases Center Komagome Hospital, Dept. of Urology, Tokyo, Japan, Cancer Institute Hospital, Dept. of Urology, Tokyo, Japan, Tokyo Medical and Dental Graduate School, Dept. of Urology, Tokyo, Japan

Associated video presentation

Utility of chest x-ray in follow-up of pT1 renal cell carcinoma


Institutes: Cattinara Hospital; University of Trieste, Dept. of Urology, Trieste, Italy, Onze-Lieve-Vrouweziekenhuis, Dept. of Urology, Aalst, Belgium, University Hospital Careggi, Dept. of Urology, Florence, Italy

Associated video presentation

Organ confined renal cell carcinoma - are the current guidelines sufficient?

By: Frees S., Kamal M., Nestler S., Bidnur S., Levisen A., Jaeger W., Thomas C., Thueroff J., Roos F.

Institutes: University Medical Center, Dept. of Urology, Mainz, Germany, Hochtaunus Hospital Bad Homburg, Dept. of Urology, Bad Homburg, Germany, Vancouver Prostate Center, Dept. of Urology, Vancouver, Canada, University Medical Center, Dept. of Urology, Mannheim, Germany

Associated video presentation

Hospital activity and costs following partial nephrectomy: A comparison of surgical modalities using UK data

By: Camp C., O'hara J., Hughes D., Adshead J.

Institutes: Hcd Economics, Dept. of Economics, Daresbury, United Kingdom, Hertfordshire and Bedfordshire Urological Cancer Centre, Lister Hospital, Dept. of Urology, Stevenage, United Kingdom

Associated video presentation

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Aims and objectives of this presentation
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
Aims and objectives of this presentation

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.

Scientific Programme
Flexible ureterorenoscopy and retrograde intrarenal surgery: Instrumentation, technique, tips and tricks, indications

ESU Course 29

Sunday, 26 March
14:30 - 17:30

Location: Room 11, Capital suite (level 3)

Chair: O. Traxer, Paris (FR)

Aims and objectives of this presentation
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

14:30 - 17:30 Welcome message and introduction of the course
O. Traxer, Paris (FR)

14:30 - 17:30 Instrumentation: Endoscopes
O. Traxer, Paris (FR)

14:30 - 17:30 Instrumentation: Laser and lithotripsy devices
M. Grasso, New York (US)

14:30 - 17:30 Instrumentation: Disposable (wires, retrieving devices, UAS, irrigation devices and others)
P.J.S. Osther, Fredericia (DK)

14:30 - 17:30 Technique: Stones
O. Traxer, Paris (FR)

14:30 - 17:30 Technique: Urothelial tumours and strictures
M. Grasso, New York (US)

14:30 - 17:30 Tips and tricks and special circumstances
O. Traxer, Paris (FR)

14:30 - 17:30 Indications (guidelines) and clinical cases
P.J.S. Osther, Fredericia (DK)

14:30 - 17:30 Conclusions
O. Traxer, Paris (FR)
**Penile diseases**  
ESU Course 30  

**Location:** Room 12, Capital suite (level 3)  
**Chair:** S.S. Minhas, London (GB)  

**Aims and objectives of this presentation**  
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 pitfalls 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.

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<tr>
<th>Time</th>
<th>Session</th>
<th>Speaker</th>
<th>Location</th>
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<tbody>
<tr>
<td>14:30 - 17:30</td>
<td><strong>Peyronie's disease</strong></td>
<td>S.S. Minhas, London (GB)</td>
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<tr>
<td>14:30 - 17:30</td>
<td><strong>Penile dermatology for the urologist</strong></td>
<td>C. Bunker, London (GB)</td>
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<tr>
<td>14:30 - 17:30</td>
<td><strong>Surgical management of penile diseases</strong></td>
<td>S.S. Minhas, London (GB)</td>
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<tr>
<td>14:30 - 17:30</td>
<td><strong>HPV, Premalignant lesions and penile cancer</strong></td>
<td>S.S. Minhas, London (GB)</td>
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<tr>
<td>14:30 - 17:30</td>
<td><strong>Management of penile cancer and lymph nodes</strong></td>
<td>C. Protzel, Rostock (DE)</td>
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</tbody>
</table>
Surgery or radiotherapy for localised and locally advanced prostate cancer

ESU Course 31

Sunday, 26 March
14:30 - 17:30

Location: Room 14, Capital suite (level 3)
Chair: B. Djavan, Vienna (AT)

Aims and objectives of this presentation
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.

14:30 - 17:30
Localised prostate cancer

14:30 - 17:30
Introduction
B. Djavan, Vienna (AT)

14:30 - 17:30
Treatment options and strategies in localised prostate cancer
B. Djavan, Vienna (AT)

14:30 - 17:30
How and when to use nomograms and networks
R.J.A. Van Moorselaar, Amsterdam (NL)

14:30 - 17:30
Oncology results of radiation therapy
A. Henry, Leeds (GB)

14:30 - 17:30
Oncological and functional results of radical prostatectomy
B. Djavan, Vienna (AT)

14:30 - 17:30
Advanced prostate cancer

14:30 - 17:30
Radiotherapy with or without hormonal treatment in advanced PCA
A. Henry, Leeds (GB)

14:30 - 17:30
Adjuvant therapies following radical prostatectomy: What is the standard and what is new?
R.J.A. Van Moorselaar, Amsterdam (NL)

14:30 - 17:30
Results of radical prostatectomy for T3 disease
B. Djavan, Vienna (AT)

14:30 - 17:30
Take home messages
B. Djavan, Vienna (AT)
**Aims and objectives of this presentation**
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.

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<th>Time</th>
<th>Session</th>
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<tr>
<td>14:30 - 17:30</td>
<td><strong>Introduction: Female Urology – improving functional outcome</strong></td>
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<tr>
<td></td>
<td>D. Pushkar, Moscow (RU)</td>
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<td>14:30 - 17:30</td>
<td><strong>Stress urinary incontinence – approaching patient’s expectations</strong></td>
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<td>T.J. Greenwell, London (GB)</td>
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<td>14:30 - 17:30</td>
<td><strong>Obstructive slings: What to do?</strong></td>
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<td>D. Pushkar, Moscow (RU)</td>
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<td>K-D. Sievert, Salzburg (AT)</td>
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<td>14:30 - 17:30</td>
<td><strong>Autologous sling in 2016</strong></td>
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<td>T.J. Greenwell, London (GB)</td>
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<td>14:30 - 17:30</td>
<td><strong>Management of mesh complications</strong></td>
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<td>T.J. Greenwell, London (GB)</td>
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<td>D. Pushkar, Moscow (RU)</td>
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<td>K-D. Sievert, Salzburg (AT)</td>
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<tr>
<td>14:30 - 17:30</td>
<td><strong>Urethral diverticulae surgery – tips and tricks</strong></td>
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<td>T.J. Greenwell, London (GB)</td>
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<td>14:30 - 17:30</td>
<td><strong>Urethral loss in females</strong></td>
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<td>D. Pushkar, Moscow (RU)</td>
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<td>14:30 - 17:30</td>
<td><strong>Vesico-vaginal fistulae repair from simple to complicated</strong></td>
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<td>D. Pushkar, Moscow (RU)</td>
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<td>14:30 - 17:30</td>
<td><strong>New slings for SUI – do you need one?</strong></td>
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<td>T.J. Greenwell, London (GB)</td>
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<td>K-D. Sievert, Salzburg (AT)</td>
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</table>
14:30 - 17:30  Adjournment
**Aims and objectives of this presentation**
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.

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<tr>
<th>Time</th>
<th>Session</th>
<th>Speaker/Site</th>
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<tbody>
<tr>
<td>14:30 - 17:30</td>
<td><strong>Introduction and objective of course</strong></td>
<td>J. Walz, Marseille (FR)</td>
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<tr>
<td>14:30 - 17:30</td>
<td><strong>Diagnosis of prostate cancer:</strong></td>
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<tr>
<td>14:30 - 17:30</td>
<td><strong>Standardization, acquisition and reporting of multiparametric MRI</strong></td>
<td>B.M. Carey, Leeds (GB)</td>
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<td>14:30 - 17:30</td>
<td><strong>Reading of a prostate MRI and use of MRI for diagnosis of prostate cancer</strong></td>
<td>B.M. Carey, Leeds (GB)</td>
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<tr>
<td>14:30 - 17:30</td>
<td><strong>MRI guided biopsy and image fusion (mp MRI and Ultrasound)</strong></td>
<td>J. Walz, Marseille (FR)</td>
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<tr>
<td>14:30 - 17:30</td>
<td><strong>What are possible alternatives to multiparametric MRI?</strong></td>
<td>J. Walz, Marseille (FR)</td>
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<tr>
<td>14:30 - 17:30</td>
<td><strong>Staging of prostate cancer:</strong></td>
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<td>14:30 - 17:30</td>
<td><strong>Staging with CT, MRI and bone scintigraphy</strong></td>
<td>G. Villeirs, Ghent (BE)</td>
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<tr>
<td>14:30 - 17:30</td>
<td><strong>MRI in local staging of prostate cancer</strong></td>
<td>G. Villeirs, Ghent (BE)</td>
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<td>14:30 - 17:30</td>
<td><strong>Recurrent disease:</strong></td>
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<td>14:30 - 17:30</td>
<td><strong>Use of PET in the management of prostate cancer (initial staging and recurrence)</strong></td>
<td>J. Walz, Marseille (FR)</td>
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<tr>
<td>14:30 - 17:30</td>
<td><strong>MRI in detection of locally recurrent prostate cancer</strong></td>
<td>G. Villeirs, Ghent (BE)</td>
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<td>14:30 - 17:30</td>
<td><strong>When to do imaging of the prostate? Case discussion and current practical questions</strong></td>
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14:30 - 17:30

Closure and evaluation
Nerve-sparing cystectomy and orthotopic bladder substitution - Surgical tricks and management of complications

ESU Course 34

Sunday, 26 March
14:30 - 17:30

Location: Room 17, Capital suite (level 3)

Chair: A. Stenzl, Tübingen (DE)

Aims and objectives of this presentation
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 orthotropic 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)
Aims and objectives of this presentation
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
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 presentation**

I would like to see 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., Pasticier 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.¹, De Coninck V.¹, Schatteman P.¹, D’hondt F.¹, Mottrie A.¹

Institutes: OLV Ziekenhuis Aalst-Asse-Ninove, Dept. of Oncology / Unit of Urology, Milan, Italy, ²University of Trieste, Ospedali Riuniti Di Trieste, Dept. of Urology, Trieste, Italy, ³Hospital Regional De Alta Especialidad De La Peninsula De Yucatán, 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

**V64**

*Combined robot-assisted salvage partial nephrectomy and cryotherapy after radiofrequency failure on a solitary kidney*

By: Michiels C.¹, Grenier N.², Grassano Y.¹, Cornelis F.², Capon G.¹, Vuong N-S.¹, Susperregui J.¹, Robert G.¹, Pasticier G.¹, Bensadoun H.¹, Ferrière J-M.¹, Bernhard J-C.¹

Institutes: Bordeaux University Hospital, Dept. of Urology, Bordeaux, France, ²Bordeaux University Hospital, Dept. of Radiology, Bordeaux, France

**V65**

*Robot assisted partial nephrectomy in a horse-shoe kidney with selective clamping guided by*
firefly fluorescence imaging
By: Volpe A.¹, Billia M.¹, Bondonno G.¹, Zacchero M.¹, De Angelis P.¹, Romani M.L.¹, Terrone C.²
Institutes:¹Maggiore Della Carità Hospital - University of Eastern Piedmont, Dept. of Urology, Novara, Italy, ²IRCCS 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**

**Sunday, 26 March**
**15:45 - 17:15**

**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 presentation**
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 are complete macroscopic tumour clearance with specimens of 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.

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**Active surveillance for non-muscle invasive bladder cancer (NMIBC): Result from bladder cancer Italian active surveillance (BIAS) project**

**By:** Hurle R.¹, Lazzari 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

*656

**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, Albanesi L.², Buscarini M.³

**Institutes:** Villa Betania Hospital, Rome, Italy, ¹Villa Claudia Clinic, Dept. of Urology, Rome, Italy, ²University Campus Bio-Medico, Dept. of Urology, Rome, Italy

*657

**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, Gavalete P.⁵, Choi Y.⁶, De Reijke T.¹, Farahat Y.⁷, Inman B.⁷, 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, ³The Chinese University of Hong Kong, Dept. of Urology, 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
Is restaging transurethral resection (TUR) necessary in patients with non-muscle invasive bladder cancer (NMIBC) and focal lamina propria invasion?

By: Audenet F.1, Retinger C.1, Chien C.2, Benfante N.2, Bochner B.1, Donat M.1, Herr H.1, Dalbaghi G.1

Institutes:1Memorial Sloan Kettering Cancer Center, Dept. of Urology, New York, United States of America, 2Memorial Sloan Kettering Cancer Center, Dept. of Biostatistics, New York, United States of America

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, Roumigué M.2, Malavaud B.2

Institutes:1Institut Universitaire Du Cancer, Dept. of Pathology, Toulouse, France, 2Institut 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., Dept. of Urologic Surgery, Holon and The Sackler Faculty of Medicine Tel-Aviv University, 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:1University College Hospitals London, Dept. of Surgery and Interventional Sciences, London, United Kingdom, 2Universitat 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, Torino, 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:1Fundació Puigvert, Dept. of Urology, Barcelona, Spain, 2A.O. Città Della Salute E Della Scienza, University of Turin, Dept. of Urology, Turin, Italy, 3University Hospitals Leuven, Dept. of Urology, Leuven, Belgium, 4Paolo Giaccone General Hospital, Dept. of Urology, Palermo, Italy, 5John Radcliffe Hospital, University of Oxford, Dept. of Surgical Sciences, Oxford, United Kingdom, 6Policlinico Tor Vergata-University of Rome, Dept of Urology, Rome, Italy, 7Netherlands Cancer Institute – Antoni Van Leeuwenhoek Hospital, Dept of Urology, Amsterdam, The Netherlands, 8Radboud University Nijmegen Medical Centre, Dept. of Urology, Nijmegen, The Netherlands, 9Universt A Vita-Salute. Ospedale S. Raffaele, Dept of Urology, Milan, Italy, 10Motol Hospital, University of Prague, Dept of Urology, Prague, Czech Republic, 11Cademic Hospital, Uppsala University, Dept of Urology, Uppsala, Sweden, 12Centre Hospitalier Universitaire La Mil Etrie, University of Poitiers, Dept of Urology, Poitiers, France, 13Genetic and Molecular Epidemiology Group, Spanish National Cancer Research Centre, Dept. of Genetics, Madrid, Spain, 14Rabin Medical Centre, Dept. of Urology, Tel Aviv, Israel, 15Santa Chiara Hospital, Dept. of Urology, Trento, Italy, 16Weill Medical College of Cornell University, Dept. of Urology, New York, New York, United States of America, 17Chirurgische Universitats Klini, Dept. of Urology, Freiburg, Germany, 18Ismanoglio Hospital, University of Athens, Dept. of Urology, Athens, Greece, 19University of Florence, Dept. of Experimental and Clinical Medicine, Athens, Greece, 20Memorial Sloan Kettering Cancer Center, New York, Dept. of Urology, New York, United States of America, 21Medical University of Vienna, Dept. of Urology, Vienna, Austria, 22Mayo Clinic, Dept. of Urology, Rochester, United States of America, 23ORTC Headquarters, Formerly Department of Biostatistics, Brussels, Belgium
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


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 Iu T.

Institutes: Celal Bayar University, Faculty of Medicine, Dept. of Urology, Manisa, Turkey

Guidelines update

M. Babjuk, Prague 5 (CZ)
# Geriatrics in urological disorders

**Poster Session 50**

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

**Chairs:**
- J.L.H.R. Bosch, Utrecht (NL)
- G.N. Thalmann, Bern (CH)
- A. Wagg, Edmonton (CA)

**Aims and objectives of this presentation**
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.¹, Sakai-Saitou A.², Hattori T.³, Katano Y.⁴, Ishihata A.²

*Institutes:* Juntendo University, Faculty of Health Care and Nursing, Urayasu, Japan, ²Yamagata University, Dept. of Theoretical Nursing and Pathophysiology, Yamagata, Japan, ³Asahi Kasei Pharma Corporation, Dept. of Medical Affairs, Tokyo, Japan

**669**

**Impact of lower urinary tract symptoms on mortality: A 15-year follow-up of Tampere Aging Male Urologic Study (TAMUS)**

*By:* Åkerla J.², Pesonen J.¹, Pöyhönen A.², Häkkinen J.³, Koskimäki J.⁴, Tammela T.⁵, Auvinen A.⁵

*Institutes:* Päijät-Häme Central Hospital, Dept. of Surgery, Lahti, Finland, ²Central Finland Central Hospital, Dept. of Surgery, Jyväskylä, Finland, ³Turku University Hospital, Dept. of Urology, Turku, Finland, ⁴Tampere University Hospital, Dept. of Urology, Tampere, Finland, ⁵University of Tampere, School of Health Sciences, Tampere, Finland

**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

**671**

**Recurrent urinary retention: Establishment of a multidisciplinary team board to improve alternative technics to the indwelling urinary catheter**

*By:* Rambaud C.¹, Gonfrier S.¹, Arlaud C.¹, Demonchy E.², Guerin O.¹, Durand M.³

*Institutes:* University Hospital of Nice, Dept. of Geriatrics, Nice, France, ²University Hospital of Nice, Dept. of Infectiology, Nice, France, ³University Hospital of Nice, Dept. of Urology, Nice, France

**672**

**Geriatric assessment can predict outcomes of endoscopic surgery for benign prostatic hyperplasia in elderly patients**

*By:* Pichon T.¹, Culvy T.¹, Lebdail S.¹, Launay C.P.², Collet N.³, Chautard D.³, Cerruti A.¹, Hoarau N.¹, Brassart E.¹, Bigot P.², Beauchet O.², Azzouzi A-R.²

*Institutes:* Chu Angers, Dept. of Urology, Angers, France, ²Chu Angers, Dept. of Geriatric Medicine, Angers, France, ³CH Du Haut Anjou, Dept. of Geriatric Medicine, Chateau Gontier, France

**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.¹, Decalf V.¹, Kumps C.¹, Petrovic M.², Goessaert A-S.³, Everaert K.³

*Institutes:* Universitair ziekenhuis Gent, Dept. of Urology, Ghent, Belgium, ²Universitair ziekenhuis
*674 Psychological distress in patients undergoing surgery for urological cancer: A prospective single centre cross-sectional study
By: Pastore A.L., Maruccia S., Bou Mir A., Palleschi G., Carbone A., Camps Bellonch N., Palou J.

Institutes: 1 Sapienza 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

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., Losensky W., Brammertz L., Taubert H., Wach S., Keck B., Ritt M., Gassmann KG., Wullich B.

Institutes: 1 University 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

Institutes: 1 Japanese 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

Summary
A. Wagg, Edmonton (CA)
**Aims and objectives of this presentation**

The aim of this session is to update 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*

**By:** Dominique I.¹, Matillon X.², Dariane C.², Lebacle C.², Pradere B.², Olivier J.², Freton L.², Langouet O.², Ruggiero M.², Millet C.², Bergerat S.³, Panayatopoulos P.³, Betari R.³, Chebbi A.³, Caes T.³, Patard P.-M.³, Szabla N.³, Brichart N.³, Bohem A.³, Sabourin L.³, Guleryuz K.³, Rizk J.³, Gryn A.³, Madec F.X.³, Nouhaud F.X.³, Rod X.³, Hutin M.³, Fiard G.³, Peyronnet B.²

**Institutes:** ¹CHU Lyon Sud, Dept. of Urology, Lyon, France, ²CHU Rennes, Dept. of Urology, Rennes, France, ³CHU Grenoble, Dept. of Urology, Grenoble, France, ⁴CHU Edouard 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 Bicêtre, 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*

**By:** Eliseu M., Marques V., Antunes H., Tavares-De-Silva E., Temido P., Nunes P., Figueiredo A.

**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.², Kosev P.², Kovachev E.²

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**Scientific Programme**

EAU London 2017
**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., Mooney R., Cunnane C., Cunnane E., Thornhill J., Walsh M.*

*Institutes:* Tallaght Hospital, Dept. of Urology, Dublin, Ireland, CABER, Dept. of Biomedical Engineering, Limerick, Ireland, CABER, Dept. of Biomedical EngineeringBiomedical Engineering, Limerick, Ireland

**Long-term outcome after urethral rupture: A comparison of different treatment modalities**

*By: Furrer M., Paerli M., Thalmann G., Roth B.*

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

**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

**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., Khouni H., Boulma R., Nawfel B.R.*

*Institutes:* Internal Security Forces Hospital La Marsa, Dept. of Surgery-Urology, La Marsa, Tunisia, Taher Maamouri University Hospital of Nabeul, Dept. of Surgery-Urology, Nabeul, Tunisia, Military Hospital, Dept. of Urology, Tunis, Tunisia

**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

**Pelvic fracture urethral injury – the nature of the causative injury correlates strongly with surgical treatment and outcome**

*By: Bugeja S., Ivaz S., Frost A., Dragova M., Andrich D., Mundy A.*

*Institutes:* University College Hospitals London, Dept. of Reconstructive Urology, London, United Kingdom

**Sex related penile fracture associated with urethral rupture: A retrospective multicentric study**


*Institutes:* Polytechnic University of The Marche Region, Dept. of Urology, Ancona, Italy, Azienda Ospedaliero-Universitaria Di Bologna, Dept. of Andrology, Bologna, Italy, University of Turin, Città Della Salute E Della Scienza, Dept. of Urology, Turin, Italy, University of Bari, Dept. of Urology, Bari, Italy, University of Trieste, Dept. of Urology, Trieste, Italy

**Associated video presentation Detachment of corpora cavernosa during anastomotic bulboprostatic reconstruction after pelvic trauma**

L. Martínez-Piñeiro, Madrid (ES)

**Summary**

L. Martínez-Piñeiro, Madrid (ES)
Aims and objectives of this presentation
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: 1University 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

*694

Preliminary outcomes of the European multicentre experience with the ZSI 375™ artificial urinary sphincter for treatment of stress urinary incontinence in men
Institutes: 1Vivantes Klinikum Am Urban, Dept. of Reconstructive Urology and Genderincongruence, 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, Gaidlporf, 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
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

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: Netherlands 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

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

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

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

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, Tonolli-Catez H.¹, M Bauer R.², De Ridder D.³, Haab F.¹, Chauveau P.⁵, Arano P.⁵, Haillot O.⁵, 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

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, Kleber B.¹, Gozzi C.³, Rehder P.¹, May F.³, Homberg R.³, Gebhart P.³, Stief C.G.¹, Bauer R.M.¹
**Institutes:** 1 Ludwig-Maximilians-University Munich (LMU), Dept. of Urology, Munich, Germany, 2 Marienklinik Bozen, Dept. of Urology, Bolzano, Italy, 3 Medical University Innsbruck, Dept. of Urology, Innsbruck, Austria, 4 Klinikum Dachau, Dept. of Urology, Dachau, Germany, 5 St. Barbara Klinik Hamm, Dept. of Urology, Hamm, Germany, 6 Klinikum Voecklabruck, Dept. of Urology, Voecklabruck, Austria

*704*

**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

*705*

**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 presentation
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, Nyirády P.2, Varga J.2, Ditonno P.3, Boccasile S.3, Battaglia M.3, Chidini P.4, Berardinelli F.1, De Nunzio C.5, Tema G.5, Veccia A.6, Antonelli A.6, Simeone C.6, Pulitati 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 Kingdom, 3Institute of Cancer Research, Dept. of Molecular Pathology, London, United Kingdom, 4St George’s Hospital, Dept. of Pathology, London, United Kingdom, 5St George’s 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: Adimonye 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.5, 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 Urology, FL, United States of America

Is sarcopenia a useful prognostic indicator in patients with squamous cell carcinoma of the penis?


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, Ueberrdeik S., Loertzer H., Janssen M.², Hauschild E.², Bohle R.M.², 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.², Piva L.², Biasoni D.², Catanzaro M.², Torelli T.³, Stagni S.², Calareso G.⁴, Togliardi E.², Colecchia M.², 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

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

Sunday, 26 March
15:45 - 17:15

Location: Room Vienna, North Hall (Level 1)
Chairs: V.G. Mirone, Naples (IT)  D. Mitropoulos, Athens (GR)

Aims and objectives of this presentation
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, 5Fundació 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, Brunkhorst O. 1, Ross T. 1, Wood T. 1, Al-Jabir A. 1, Iqbal M. 1, Aya H. 1, Brewin J. 3, McIlhenny C. 4, Mccabe J. 5, Rukin N. 5, Patterson J. 2, Marsh H. 1, Dasgupta R. 3, Samsudder A. 5, 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 Trust, 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: St James’ University Hospital, Leeds Teaching Hospitals NHS Trust, Dept. of Urology, Leeds, United Kingdom,Bradford Royal Infirmary, Bradford Teaching Hospitals NHS Foundation Trust, Dept. of Urology, Bradford, United Kingdom, Castle Hill Hospital, Hull and East Yorkshire Hospitals NHS Trust, Dept. of Urology, Hull, United Kingdom

Learning of hand-assisted laparoscopic donor nephrectomy
By: Tae B.S., Jeong C.W., Kwak C., Ku J.H., Kim H.H., Paick J-S.
Institutes: Seoul National University Hospital, Dept. of Urology, Seoul, South Korea

Development and validation of a 3D-printed bladder model for laparoscopic and robot-simulated urethrovessical anastomosis training for radical prostatectomy
By: Guo Y.¹, Hoogenes J.¹, Wong N.¹, Kim K.¹, Quantz M.², Shayegan B.¹, Matsumoto E.¹
Institutes: McMaster University, Dept. of Surgery/urology, Hamilton, Canada, University 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.³, Mac Craith E.¹, Manecksha R.², Walsh M.³, Thornhill J.², Mulvin D.¹
Institutes: St Vincent’s University Hospital, Dept. of Urology, Co Dublin, Ireland, Tallaght Hospital, Dept. of Urology, Co Dublin, Ireland, CABER, 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: University Hospital Cologne, Dept. of Urology, Cologne, Germany, University Hospital Mainz, Dept. of Urology, Mainz, Germany, Vancouver General Hospital/University of British Columbia, Dept. of Urology, Vancouver, Canada, University Hospital Göttingen, Dept. of Urology, Göttingen, Germany, TU 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: University of Southampton, Faculty of Medicine, Southampton, United Kingdom, University 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: St Vincent’s Hospital, Dept. of Urology, Dublin, Ireland, Mater Misericordiae University Hospital, Dept. of Urology, Dublin, Ireland, Our Lady’s Children’s Hospital Crumlin, Dept. of Urology, Dublin, Ireland, St James’s Hospital, Dept. of Urology, Dublin, Ireland, Laura & Isaac Perlmutter Cancer Center, Dept. of Urology and Population Health, New York, United States of America
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.

*731 Prenatal urinary tract anomalies leading to termination of pregnancy
By: Verhovsky G.¹, Amos N.¹, Gabi K.², Maymon R.², Zisman A.¹
Institutes:¹Assaf Harofeh Medical Center, Dept. of Urology, Zrifin, Israel, ²Assaf Harofeh Medical Center, Dept. of Obstetric and Gynaecology, Zrifin, Israel

*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

*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

*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.², Lardy H.², Leclair M.-D.²
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

*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

*736 Comparison of intermediate and low frequency shock wave lithotripsy for pediatric kidney stone
By: Onur O., Kılıçarslan H., Mert A., Kordan Y.
Institutes:Uludag University, Dept. of Urology, Bursa, Turkey

*737 Comparison the results of 16 to 20 F percutaneous access dilatation of mini-PCNL in pediatric patients
By: Baydilli N., Akınsal E.C., Sönmez G., Demirci D.
Institutes: Erciyes University Faculty of Medicine, Dept. of Urology, Kayseri, Turkey

*738
Aims and objectives of this presentation

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.

Identification and characterization of selective androgen receptor degraders (SARDs) for the treatment of enzalutamide unresponsive and/or resistant prostate cancer

By: Getzenberg R., Ponnusamy S., Thiyagarajan T., Hwang D-J., He Y., Mcewan I., Watt C., Moldoveanu T., Miller D., Narayan R.

Institutes: Gtx Inc, Dept. of Prostate Cancer, Memphis, United States of America, University of Tennessee Health Science Center, Dept. of Medicine, Memphis, United States of America, University of Tennessee Health Science Center, Dept. of Pharmaceutical Sciences, Memphis, United States of America, St. Judes Children's Research Hospital, Dept. of Structural Biology, Memphis, United States of America, University of Tennessee Health Science Center, Pharmaceutical Sciences, Memphis, United States of America

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

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

The STAT3 inhibitor galiellalactone prevents prostate cancer cell induced generation of myeloid derived suppressor cells from monocytes ex vivo

By: Hellsten R., Leandersson K., Johansson M., Bjartell A.

Institutes: Division of Urological Cancers, Dept. of Translational Medicine, Lund University, Malmö, Sweden, Cancer Immunology, Dept. of Translational Medicine, Lund University, Malmö, Sweden, Glactone Pharma AB, Helsingborg, Sweden

The multi-kinase inhibitor EC-70124 delivers a double-hit to prostate cancer stem cells interfering with both STAT3 and NF-kB signaling

By: Civenni G., Shinde D., Zoma M., Albino D., Costales P., Moris F., Carbone G., Catapano C.

Institutes: IOR Institute of Oncology Research, Tumor Biology and Experimental Therapeutic, Bellinzona, Switzerland, Edificio Cientifico Tecnologico, EntreChem, EntreChem, Oviedo, Spain
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, Grosjean J.1, Goumans M.J.2, Hawinkels L.2, Van Der Pluijm G.2, Ten Dijke P.2, Spahn M.2, Thalmann G.4, Kruihof-De Julio M.1
Institutes: Urology Research Laboratory, Dept. of Clinical Research, Bern, Switzerland, Leiden University Medical Center, Dept. of Molecular Cell Biology, Leiden, The Netherlands, Leiden University Medical Center, Dept. of Urology, Leiden, The Netherlands, University Hospital Bern, Dept. of Urology, Bern, Switzerland

Systems pharmacology and quantitative proteomics for developing targeted triple therapy
By: Ebhardt H.A.1, Root A.2, Beizaei A.1, Liu Y.1, Gauthier N.4, Sander C.4, Aebersold R.3
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

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, Madou SinLau Hospital, Dept. of Urology, Tainan, Taiwan, Dalin Tzu-Chi Hospital, Dept. of Urology, Tainan, Taiwan, National Cheng-Kung University Hospital, Dept. of Urology, Tainan, Taiwan, National Cheng-Kung University, Dept. of Chemical Engineering, Tainan, Taiwan, Tainan 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, Sanofi-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, University of British Columbia, Vancouver Prostate Centre, Vancouver, Canada

New approaches to overcome endocrine therapy resistance in prostate cancer
G. Attard, Sutton (GB)
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 presentation
The aim of this session is to update 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.

*758 Intra-prostatic injection of PRX302 to focally ablate clinically significant prostate cancer: An open label, phase 2a study
By: Shanmugasvavan Y.1, Bass E.2, Hulme A.2, Freeman A.3, Brew-Graves C.1, Potyka I.1, Ramachandran N.4, Emberton M.1

Institutes: University College London, Division of Surgery and Interventional Sciences, London, United Kingdom, 2Sophiris, Sophiris Bio Corporation, California, United States of America, 3University College London Hospital, Dept. of Histopathology, London, United Kingdom, 4University College London Hospital, Dept. of Radiology, London, United Kingdom

*759 Impact of the use of N2O for general anesthesia during high intensity focused ultrasound (HIFU) for the treatment of localized prostate cancer
By: Potiron E.1, Lacoste J.2, Le Goguic G.2, Rousseau T.2, Nevoux P.2

Institutes: Clinique Urologique Nantes Atlantis, Dept. of, Saint Herblain, France, 2Clinique Urologique Nantes Atlantis, Dept. of, Saint Herblain, France

*760 Prospective comparative analysis of oncologic and functional outcomes between focal therapy and robotic radical prostatectomy
By: Garcia Barreras S.1, Sanchez-Salas R.1, Sivarama S.2, Secin F.3, Redondo C.1, Velilla G.1, Barret E.1, Nunes-Silva I.1, Srougi V.1, Baghdadi M.1, Galiano M.1, Rozet F.1, Cathala N.1, Mombet A.1, Prapotnich D.1, Cathelineau X.1

Institutes: Institut Mutualiste Montsouris, Dept. of Urology, Paris, France, 2Memorial Sloan Kettering, Dept. of Urology, New York, United States of America, 3CEMIC, Dept. of Urology, Buenos Aires, Argentina

*761 A phase III study comparing partial prostate ablation versus radical prostatectomy (PART) in intermediate risk prostate cancer – initial data from the feasibility study
By: Leslie T.1, Elliott D.3, Le Conte S.1, Brewster S.2, Sooriakumaran P.1, Bryant R.1, Dudderidge T.4, Rosario D.2, Catto J.1, Hindley R.6, Emberton M.7, Ahmed H.1, Donovan J.2, Hamdy F.1

Institutes: 1Oxford University - Churchill Hospital, Dept. of Urology, Oxford, United Kingdom, 2Churchill Hospital, Dept. of Urology, Oxford, United Kingdom, 3University of Bristol, Dept. of Social and Community Medicine, Bristol, United Kingdom, 4University Hospital Southampton NHS Foundation Trust, Dept. of Urology, Southampton, United Kingdom, 5Sheffield Teaching Hospitals, Dept. of Urology, Sheffield, United Kingdom, 6Basingstoke and North Hampshire Hospital, Dept. of Urology, Basingstoke, United Kingdom, 7University College London Hospital, Dept. of Urology, London, United Kingdom

*762 First repeated biopsy represents the most informative predictor of progression-free survival at 3
A nomogram for prediction of local cancer recurrence after primary prostate cryoablation
By: El Shafei A.1, Tay K.J.2, Ross A.3, Given R.4, Parsons J.K.5, Mouraviev V.6, Polascik T.2, Jones J.S.1
Institutes: 1Cleveland 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 Institution, 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: 1Western University, Dept. of Urology, London, Canada, 2Beaumont Health System, Department of Urology, Dept. of Urology and Radiology, Royal Oak, United States of America, 3Western University, Dept. of Urology, London, Canada, 4German Cancer Research Center (DKFZ), Dept. of Urology and Radiology, Heidelberg, Germany, 5Profound Medical Inc., Dept. of Engineering, Toronto, Canada

Neoadjuvant hormonal therapy for patients with low risk prostate cancer stimulates lymphvessel invasion and shorten biochemical recurrence-free survival periods
By: Miyata Y.1, Mochizuki Y.1, Shida Y.2, Matsuo T.2, Hakariya T.3, Ohba K.4, Furusato B.2, Fukuoka J.2, Sakai H.1
Institutes: 1Nagasaki 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
By: Parsons K.2, Ross A.3, El Shafei A.1, Hatem A.1, Cotta B.2, Tay K.J.4, Polascik T.2, Given R.5, Mouraviev V.6, Jones J.S.1
Institutes: 1Cleveland 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, Md, United States of America, 4Duke Cancer Institute, Dept. of Urology, Durham, Nc, United States of America, 5Eastern Virginia Medical School, Dept. of Urology, Virginia, United States of America, 6Global Robotics Institute, Dept. of Urology, Celebration, Florida, 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: Sujeenthiran A.1, Nossiter J.1, Charman S.1, Aggarwal A.1, Cathcart P.2, Payne H.3, Clarke N.4, Van Der Meulen J.1
Institutes: 1Royal 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

Associated video presentation MRI/US fusion office-based targeted cryoablation with local anesthesia
F.J. Bianco, Miami Lakes (US)
17:02 - 17:09

Summary
E. Barret, Paris (FR)
Renal cell carcinoma treatment: The search for the right strategy

**Poster Session 58**

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

**Chairs:** S. Fernández-Pello Montes, Gijón (ES)

F. Porpiglia, Orbassano (turin) (IT)

**Aims and objectives of this presentation**

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.

<table>
<thead>
<tr>
<th><strong>Poster Number</strong></th>
<th><strong>Presentation Title</strong></th>
<th><strong>Authors</strong></th>
<th><strong>Institutes</strong></th>
</tr>
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<tbody>
<tr>
<td><em>769</em></td>
<td>Modified 5-item frailty index is associated with increased healthcare resource utilization following elective minimally invasive radical nephrectomy</td>
<td>Xia L., Taylor B., Guzzo T.</td>
<td>University of Pennsylvania, Perelman School of Medicine, Division of Urology, Dept. of Surgery, Philadelphia, United States of America</td>
</tr>
<tr>
<td><em>770</em></td>
<td>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</td>
<td>Nini A., Larcher A., Muttin F., Zaffuto E., Dell'oglio P., Ripa F., Carenci C., La Croce G., Oppizzi M., Fragasso G., Montorsi F., Capitano U., Bertini R.</td>
<td>IRCCS San Raffaele, Dept. of Urology, Division of Oncology/Unit of Urology, URI, Milan, Italy, IRCCS San Raffaele, Dept. of Cardiology, Milan, Italy</td>
</tr>
<tr>
<td><em>772</em></td>
<td>Should partial nephrectomy be considered an imperative indication in stage II chronic kidney disease?</td>
<td>Hamilton Z., Larcher A., Lane B., Capitano U., Hassan A-E., Berquist S., Dufour C., Bek sac A.T., Wan F., Proudfoot J., Derweesh I., Montorsi F.</td>
<td>Moores Cancer Center, Dept. of Urology, La Jolla, United States of America, Spectrum Health, Dept. of Urology, Grand Rapids, United States of America, San Raffaele Scientific Institute, Dept. of Urology, Milan, Italy</td>
</tr>
<tr>
<td><em>773</em></td>
<td>Tumor size is associated with compensatory hypertrophy in the contralateral kidney before and after radical nephrectomy in patients with renal cell carcinoma</td>
<td>Park B.H., Bae S.R., Lee Y.S., Kang S.H., Han C.H.</td>
<td>Uijeongbu St. Mary’s Hospital, Dept. of Urology, Uijeongbu-Si, South Korea</td>
</tr>
<tr>
<td><em>774</em></td>
<td>Clinical application of calculated split renal volume using computed tomography-based renal volumetry after partial nephrectomy: Correlation with 99mTc-DMSA renal scan data</td>
<td>Lee C.H., Ku J.Y., Ha H.K.</td>
<td>Pusan National University Hospital, Dept. of Urology, Busan, South Korea</td>
</tr>
</tbody>
</table>
**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, Veltri 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*

**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, 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*

**Discrimination of malignant and benign kidney tissue with 1064 nm dispersive Raman spectroscopy**

*By: Haifler M.¹, Pence I.², Ristau B.¹, Greenberg R.¹, Chen D.¹, Smaldone M.¹, Kutikov A.¹, Viterbo R.¹, Uzzo R.¹, Zisman A.³, 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*

**Topographic distribution of sentinel lymph nodes in patients with renal tumours**

*By: Kuusk T.¹, Grivas N.¹, Donswijk M.², Prevo W.³, Horenblas 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*

**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 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*

**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.², 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*

**Associated video presentation** Laparoscopic inter-aorto-caval lymph-node dissection for RCC

R. Bass, Holon (IL)
EBU Session: Postgraduate training and education in European urology

Aims and objectives of this presentation
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.

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
To be confirmed

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)
Aims and objectives of this presentation
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
Management of prostate cancer

Aims and objectives of this presentation
The aim of this session is to discuss and debate about the role of screening, early detection and optimal treatment of localized prostate cancer. The role of screening based on the most updated results of prospective randomized 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 localized 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 EAU Consensus highlights and late breaking news

08:00 - 08:30 Debate Prostate cancer screening: Time to change recommendations for PSA testing?
08:00 - 08:15 Yes
J. Hugosson, Göteborg (SE)
08:15 - 08:30 No
G. Andriole, St. Louis (US)

08:30 - 09:00 State-of-the-art lecture MRI prior to biopsy – Results from the PROMIS trial

08:30 - 08:50 Presenter
H.U. Ahmed, London (GB)
08:50 - 09:00 Discussant
J. Walz, Marseille (FR)

09:00 - 09:30 Debate Should we change our strategy in primary prostate biopsy?
09:00 - 09:15 mpMRI targeted biopsies are sufficient
P.A. Pinto, Bethesda (US)
09:15 - 09:30 Systematic biopsy is essential
G. Ploussard, Toulouse (FR)
<table>
<thead>
<tr>
<th>Time</th>
<th>Event</th>
</tr>
</thead>
<tbody>
<tr>
<td>09:30 - 10:00</td>
<td><strong>State-of-the-art lecture</strong> Lessons from the ProtecT trial</td>
</tr>
<tr>
<td>09:30 - 09:50</td>
<td><strong>Presenter</strong> F.C. Hamdy, Oxford (GB)</td>
</tr>
<tr>
<td>09:50 - 10:00</td>
<td><strong>Discussant: Putting ProtecT into context</strong> N. Mottet, Saint-Étienne (FR)</td>
</tr>
<tr>
<td>10:00 - 10:30</td>
<td><strong>Debate</strong> Active surveillance for Gleason 3+4 prostate cancer</td>
</tr>
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<td><strong>Moderator:</strong> A. Rannikko, Helsinki (FI)</td>
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<tr>
<td>10:00 - 10:15</td>
<td><strong>Pro (US)</strong> M.R. Cooperberg, San Francisco (US)</td>
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<tr>
<td>10:15 - 10:30</td>
<td><strong>Con (EU)</strong> M. Graefen, Hamburg (DE)</td>
</tr>
<tr>
<td>10:30 - 10:50</td>
<td><strong>State-of-the-art lecture</strong> Hereditary prostate cancer</td>
</tr>
<tr>
<td></td>
<td>P.C. Walsh, Baltimore, MD (US)</td>
</tr>
<tr>
<td>10:50 - 11:00</td>
<td><strong>Late breaking news</strong></td>
</tr>
</tbody>
</table>
Aims and objectives of this presentation
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</th>
<th>Speaker(s)</th>
</tr>
</thead>
<tbody>
<tr>
<td>09:30 - 09:45</td>
<td><strong>State-of-the-art lecture</strong> EAU standpoint on meshes</td>
<td>T. Tarcan, Istanbul (TR)</td>
</tr>
<tr>
<td>09:45 - 10:15</td>
<td><strong>Debate</strong> Intrinsic sphincter deficiency: Is it worth diagnosing?</td>
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<tr>
<td>09:45 - 10:00</td>
<td><strong>Pro</strong></td>
<td>N.I. Osman, Sheffield (GB)</td>
</tr>
<tr>
<td>10:00 - 10:15</td>
<td><strong>Con</strong></td>
<td>G. Van Koeveringe, Maastricht (NL)</td>
</tr>
<tr>
<td>10:15 - 10:30</td>
<td><strong>Société Internationale d’Urologie (SIU) lecture</strong> Complications after treatment of prostate cancer: How bladder function influences therapy and outcome</td>
<td>M. Fisch, Hamburg (DE)</td>
</tr>
</tbody>
</table>
Leadership and the EAU

Special session

Monday, 27 March
08:30 - 11:30

Location: Room 9, Capital suite (level 3)
Chair: J.P.M. Sedelaar, Nijmegen (NL)

08:30 - 08:45
Welcome
J.P.M. Sedelaar, Nijmegen (NL)

08:45 - 09:45
Personal behaviour and leadership

08:45 - 09:45
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

09:45 - 10:15
Moderator:
J. Zijlstra, Maarsbergen (NL)

Do we recognise our system?

Should I intervene?

What is my as a leader?

10:15 - 11:00
Ambidexterity

10:15 - 11:00
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?
The infertile couple - Urological aspects
ESU Course 35

Monday, 27 March
08:30 - 11:30

Location: Room 10, Capital suite (level 3)

Chair: W. Aulitzky, Vienna (AT)

Aims and objectives of this presentation
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, Milano (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, Milano (IT)
Ultrasound in urology
ESU Course 36

Monday, 27 March
08:30 - 11:30

Location: Room 11, Capital suite (level 3)
Chair: T. Loch, Flensburg (DE)

Aims and objectives of this presentation
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 presentation
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 spend 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.

08:30 - 11:30
Introduction
J.A. Witjes, Nijmegen (NL)

08:30 - 11:30
Diagnosis, markers and innovations
J. Palou, Barcelona (ES)

08:30 - 11:30
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)

08:30 - 11:30
Risk groups and guideline treatment: What is clearly established
J.A. Witjes, Nijmegen (NL)

08:30 - 11:30
Comments on guideline treatment including BCG shortage and new treatment modalities
M. Babjuk, Prague (CZ)

08:30 - 11:30
Complications of intravesical therapy
J.A. Witjes, Nijmegen (NL)

08:30 - 11:30
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 presentation
Aims
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, Turin (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, Turin (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, Turin (IT)
**Aims and objectives of this presentation**
- 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.

**Scientific Programme**

**Monday, 27 March**
**08:30 - 11:30**

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

**Chair:** P. Gontero, Turin (IT)

**Introduction**
P. Gontero, Turin (IT)

**Active surveillance and discussion clinical cases**
P. Gontero, Turin (IT)

**Ablative therapies: Which technique and why?**
J.J.M.C.H. De La Rosette, Amsterdam (NL)

**Minimally invasive surgery in SRMs: How to safely do it when you get started**
F. Keeley, Bristol (GB)

**Indications for surgery vs ablative therapies**
P. Gontero, Turin (IT)

**Clinical case discussion**
J.J.M.C.H. De La Rosette, Amsterdam (NL)
P. Gontero, Turin (IT)
F. Keeley, Bristol (GB)
Update renal, bladder and prostate cancer Guidelines 2017, what is changed?

ESU Course 40

Monday, 27 March
08:30 - 11:30

Location: Room 17, Capital suite (level 3)
Chair: H.G. Van Der Poel, Amsterdam (NL)

Aims and objectives of this presentation
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
H.G. Van Der Poel, Amsterdam (NL)

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
H.G. Van Der Poel, Amsterdam (NL)

08:30 - 11:30
Discussion

08:30 - 11:30
Update prostate cancer: Metastasized
H.G. Van Der Poel, Amsterdam (NL)
Aims and objectives of this presentation
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.

A. Gammie, Bristol (GB)
A. Garcia Mora, Mexico City (MX)
L. Thomas, Bristol (GB)
Lymph node surgery in uro-oncology: Semi-Live

Location: Room Madrid, North Hall (Level 1)
Chair: M. Hohenfellner, Heidelberg (DE)

Aims and objectives of this presentation

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

Aims and objectives of this presentation
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, focusing on specific techniques, and emphasizing the role of optimize 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 Specific problems of female neo-bladder
G. Gakis, Tübingen (DE)

11:45 - 12:00
How I solve Optimal perioperative management
P.Y. Wüthrich, Berne (CH)
Male hypogonadism - What role for Testosterone Replacement Therapy (TRT)?

Thematic session 12

Monday, 27 March
10:30 - 12:00

Location: Room Paris, North Hall (Level 1)

Chairs: F.M.J. Debruyne, Arnhem (NL)
V.G. Mirone, Naples (IT)

10:30 - 10:45
Case presentation
F.M.J. Debruyne, Arnhem (NL)

10:45 - 11:00
The urologist as primary gatekeeper of men's health
N. Sofikitis, Ioannina (GR)

11:00 - 11:15
Urological implications of male hypogonadism
G.R. Dohle, Rotterdam (NL)

11:15 - 11:30
The role of the urologist in TRT
A. Salonia, Milan (IT)

11:30 - 11:45
ReproUnion: Strategic partnership between EAU and the European Union
J.O.R. Sonksen, Herlev (DK)

11:45 - 12:00
Panel discussion

Panel: F.M.J. Debruyne, Arnhem (NL)
G.R. Dohle, Rotterdam (NL)
V.G. Mirone, Naples (IT)
A. Salonia, Milan (IT)
N. Sofikitis, Ioannina (GR)
J.O.R. Sonksen, Herlev (DK)
Kidney transplant and reconstructive surgery
Thematic session 13

Location: Room Amsterdam, North Hall (Level 1)
Chairs: P. Kyzlasov, Moscow (RU)
        E. Lledó García, Madrid (ES)

Aims and objectives of this presentation
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
R.K. Ahlawat
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)
N. Tomada, Porto (PT)
Rare and complex urogenital disease and conditions
Thematic session 14

Location: Room Berlin, North Hall (Level 1)

Chairs: M. Battye, Sheffield (GB)
M. Fisch, Hamburg (DE)

Aims and objectives of this presentation
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.

10:30 - 10:45
State-of-the-art lecture European Reference Network (ERN) development in Europe and DG Sante
E. Terol, Brussels (BE)

10:45 - 11:00
State-of-the-art lecture The ERN eUROGEN
M. Battye, Sheffield (GB)

11:00 - 11:15
State-of-the-art lecture Rare uro-recto-genital anomalies
To be confirmed

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 - 12:00
European patient representative (ePAG)
Aims and objectives of this presentation
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 reports 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 the 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

Presenter
M. de Rooij, Nijmegen (NL)

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)

11:50 - 12:00
Discussion
### Aims and objectives of this presentation
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.

<table>
<thead>
<tr>
<th>Time</th>
<th>Event</th>
<th>Speaker</th>
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<tbody>
<tr>
<td>10:30 - 10:45</td>
<td>State-of-the-art lecture</td>
<td>How can microbiome affect the urinary tract?</td>
</tr>
<tr>
<td>10:45 - 11:00</td>
<td>State-of-the-art lecture</td>
<td>Management strategies for urogenital tuberculoses</td>
</tr>
<tr>
<td>11:00 - 11:15</td>
<td>State-of-the-art lecture</td>
<td>HPV vaccination in adolescents</td>
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<tr>
<td>11:15 - 11:30</td>
<td>State-of-the-art lecture</td>
<td>Antibiotic stewardship</td>
</tr>
<tr>
<td>11:30 - 11:45</td>
<td>State-of-the-art lecture</td>
<td>Current trends in the management of urosepsis</td>
</tr>
<tr>
<td>11:45 - 12:00</td>
<td>State-of-the-art lecture</td>
<td>Antibiotic resistance and novel antibiotics</td>
</tr>
</tbody>
</table>
### 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 presentation**

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.

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<tr>
<th>Time</th>
<th>Event</th>
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<tbody>
<tr>
<td>10:30 - 10:50</td>
<td><strong>Debate</strong> <em>Is there a role for local treatment of oligometastatic disease?</em></td>
</tr>
<tr>
<td>10:30 - 10:40</td>
<td><strong>Yes</strong> M. Spahn, Berne (CH)</td>
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<tr>
<td>10:40 - 10:50</td>
<td><strong>No</strong> B. Tombal, Brussels (BE)</td>
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<tr>
<td>10:50 - 11:05</td>
<td><strong>State-of-the-art lecture</strong> <em>EAU Guidelines on mCRPC - An update</em> P. Cornford, Liverpool (GB)</td>
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<tr>
<td>11:05 - 11:20</td>
<td><strong>Society for Urologic Oncology (SUO) lecture</strong> <em>Current and future biomarkers in castration resistant prostate cancer</em> C.P. Evans, Sacramento (US)</td>
</tr>
<tr>
<td>11:20 - 11:35</td>
<td><strong>State-of-the-art lecture</strong> <em>Next generation targets for individualised treatment</em> J. De Bono, Sutton (GB)</td>
</tr>
<tr>
<td>11:35 - 11:50</td>
<td><strong>State-of-the-art lecture</strong> <em>Update on immunotherapy - Revival of the fittest?</em> K. Fizazi, Villejuif (FR)</td>
</tr>
<tr>
<td>11:50 - 12:00</td>
<td><strong>Associated abstract presentation</strong> <em>Targeting androgen receptor variants by niclosamide overcomes resistance to abiraterone and enzalutamide</em> 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</td>
</tr>
</tbody>
</table>

### Scientific Programme

**EAU London 2017**

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*748*
Robotic assisted radical prostatectomy - Semi-Live Masterclass
Thematic session 18

Monday, 27 March
10:30 - 12:00

Location: Room Munich, North Hall (Level 1)
Chair: P. Albers, Düsseldorf (DE)

Aims and objectives of this presentation
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.

10:30 - 10:50

Video presentation Conventional nerve-sparing robot assisted radical prostatectomy
A. Mottrie, Aalst (BE)

Aims and objectives of this presentation
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.

10:50 - 11:00

Panel discussion

11:00 - 11:20

Video presentation Retzius-sparing robot assisted radical prostatectomy
A. Bocciardi, Milan (IT)

Aims and objectives of this presentation
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.

11:20 - 11:30

Panel discussion

11:30 - 11:50

Video presentation Management of inguinal hernias during robot assisted radical prostatectomy
A. E. Canda, Ankara (TR)

Aims and objectives of this presentation
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.

11:50 - 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)
Post-surgical urinary incontinence in males
ESU Course 41

Location: Room 10, Capital suite (level 3)
Chair: E. Chartier-Kastler, Paris (FR)

Aims and objectives of this presentation
• To review
  o mechanisms of continence in men and
  o 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

12:00 - 14:00
Introduction
E. Chartier-Kastler, Paris (FR)

12:00 - 14:00
Aetiology
F. Van Der Aa, Leuven (BE)

12:00 - 14:00
Workout of post-surgical incontinence
E. Chartier-Kastler, Paris (FR)

12:00 - 14:00
Conservative treatment for post-surgical incontinence
F. Van Der Aa, Leuven (BE)

12:00 - 14:00
Postsurgical LUTS
F. Van Der Aa, Leuven (BE)

12:00 - 14:00
Surgical treatment for post-surgical incontinence
E. Chartier-Kastler, Paris (FR)
Prostate biopsy - tips and tricks

ESU Course 42

Monday, 27 March
12:00 - 14:00

Location: Room 11, Capital suite (level 3)
Chair: P. Hammerer, Braunschweig (DE)

Aims and objectives of this presentation

• 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, Milan (IT)

12:00 - 14:00
Update on new technical developments
V. Scattoni, Milan (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 presentation
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

Thursday, 30 March
12:00 - 14:00

Location: Room 14, Capital suite (level 3)

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

Aims and objectives of this presentation
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)

P. Ost, Ghent (BE)
A. Briganti, Milan (IT)
Competing technologies in BPO surgery

**Aims and objectives of this presentation**
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 B.³, Apolikhin O.⁴, Kaprin A.⁵

**Institutes:** ¹Scientific 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

**By:** Umari P., Fossati N., Gandaglia G., Heinze A., De Groote R., Schatteman P., De Naeyer G., Mottrie A.

**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, Pelleschi 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
**V72**

**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

**V73**

**Thulium laser enucleation of the prostate (ThuLEP): First results, efficacy, and complications**  
*Institutes:* First Moscow State Medical University of I.M. Sechenov, Research Institute of Urology and Reproductive Health, Moscow, Russia, *IPG Medical, Photonics, Oxford, United States of America, 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 presentation
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: 1Rhode 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.2, Fossati N.1, De Naey G.2, De Groote R.2, Umani P.2, Trevisani F.1, Guazzoni G.3, Salonia A.1, Briganti A.1, Bertini R.1, Montorsi F.1, Mottrie A.2
Institutes: 1IRCCS 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, Sersi S.4, De Concilio B.3, Zeccolino G.5, Celia A.6, Ingrosso M.2, Giommini V.6, Annino F.7, Pizzuti V.7, Nuccitelli R.7, Dandrea M.8, Minervini A.9
Institutes: 1Spedali Civili Hospital of Brescia, Dept. of Urology, Brescia, Italy, 2San Pio Da Pietrelcina Hospital, Dept. of Urology, Vasto (chieti), 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 (vicenza), Italy, 6San Donato Hospital, Dept. of Urology, Arezzo, Italy, 7Misericordia Hospital, Dept. of Urology, Grosseto, Italy, 8Policlinico Di Abano, Dept. of Urology, Abano Terme (padova), Italy, 9Careggi Hospital, Dept. of Urology- On Behalf of The AGILE Group (italian Group For Advanced Laparo-Endoscopic Surgery), Florence, 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, Guaglianone S.¹, Muttin F.², Nini A.², Trevisani F.², Montorsi F.², Bertini R.², Gallucci M.¹

Institutes: ¹Regina Elena National Cancer Institute, Dept. of Urology, Rome, Italy, ²San Raffaele Hospital, University Vita Salute, Dept. of Urology, Milan, Italy, ³Regina Elena National Cancer Institute, Dept. of Urology, Rome, Italy

*786

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

*787

Factors influencing renal volume and renal function after minimally-invasive partial nephrectomy. Preliminary results of a prospective study
By: Porpiglia F.¹, Bertolo R.¹, Amparore D.¹, Piramide F.¹, Checcucci E.¹, Manfredi M.¹, Angusti T.², Barrera M.³, Sardo D.³, Veli A.³, Fiori C.¹

Institutes: ¹San Luigi Hospital, Dept. of Urology, Turin, Italy, ²San Luigi Hospital, Dept. of Nuclear Medicine, Turin, Italy, ³San Luigi Hospital, Dept. of Radiology, Turin, Italy

*788

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

*789

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., Iizuka J., Kobayashi H., Ishida H., Tanabe K.

Institutes: Tokyo Women's Medical University, Dept. of Urology, Tokyo, Japan

*791

Predictors of local recurrence after partial nephrectomy: Results from two-years follow up of a prospective multicentre study (RECORd 1 project)
By: Minervini A.¹, Mari A.¹, Campi R.¹, Novara G.², Antonelli A.², Bertolo R.₂, Bianchi G.₃, Fiori C.₄, Furlan M.₃, Longo N.₄, Mirone V.₄, Morgia G.₄, Morselli S.₁, Porpiglia F.₄, Schiavina R.₄, Serni S.₁, Sessa F.₁, Simeone C.₃, Terrone C.₄, Vanacore D.₁, Carini M.₁

Institutes: ¹Aou Careggi, Dept. of Urology, Florence, Italy, ²University of Padua, Dept. of Surgery, Padua, Italy, ³University of Brescia, Dept. of Urology, Brescia, Italy, ⁴University of Turin - San Luigi Gonzaga Hospital, Dept. of Urology, Turin, Italy, ⁵University of Modena and Reggio Emilia, Dept. of Urology, Modena, Italy, ⁶University of Naples Federico II, Dept. of Neurosciences, Science of Reproduction and Odontostomatology, Naples, Italy, ⁷University of Catania, Dept. of Urology, Catania, Italy, ⁸University of Bologna, Dept. of Urology, Bologna, Italy, ⁹University of Eastern Piedmont, Dept. of Urology, Novara, Italy

*792

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

13:28 - 13:36
Associated video presentation Purely off-clamp robotic partial nephrectomy
G. Simone, Rome (IT)
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:** M.R. Cooperberg, San Francisco (US)
N. Suardi, Milan (IT)

**Aims and objectives of this presentation**

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.

*793 The spatial distribution of positive cores predicts outcomes of active surveillance in very low risk prostate cancer patients

By: Erickson A., Vasarainen H., Mirtti T., Rannikko A.

Institutes: University of Helsinki, University of Helsinki, Institute for Molecular Medicine Finland, Helsinki, Finland, University of Helsinki, Dept. of Urology, Helsinki, Finland, University of Helsinki, Institute for Molecular Medicine Finland, Dept. of Pathology, Helsinki, Finland

Associated video presentation

*794 Variation in the use of active surveillance for low-risk prostate cancer


Institutes: Brigham and Women’s Hospital, Division of Urologic Surgery and Center For Surgery and Public Health, Boston, United States of America, Tan Tock Seng Hospital, Dept. of Urology, Singapore, Singapore, Marien Hospital Herne, Ruhr-University Bochum, Dept. of Urology, Herne, Germany, Henry Ford Health System, VUI Center for Outcomes Research, Analytics and Evaluation, Vattikuti Urology Institute, Detroit, United States of America

Associated video presentation

*795 PTEN status in diagnostic biopsies predicts active surveillance rebiopsy gleason upgrade, treatment change and adverse surgical histopathological findings

By: Erickson A., Lokman U., Vasarainen H., Mirtti T., Rannikko A.

Institutes: University of Helsinki, Institute for Molecular Medicine Finland, Helsinki, Finland, University of Helsinki, Dept. of Pathology, Institute for Molecular Medicine Finland, Helsinki, Finland

Associated video presentation

*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., Steyerberg E., Bruinsma S., Bangma C., Roobol M.

Institutes: Erasmus MC, Dept. of Public Health, Rotterdam, The Netherlands, Erasmus MC, Dept. of Urology, Rotterdam, The Netherlands

Associated video presentation
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:** Vita-Salute University San Raffaele, Dept. of Urology, Milan, Italy, 2Vita-Salute University San Raffaele, Dept. of Pathology, Milan, Italy

**Associated video presentation**

Outcomes after deferred radical prostatectomy for men initially managed with active surveillance

**By:** Arnsrud Godtman R.1, Schafferer M.2, Stranne J.2, Hugosson J.2

**Institutes:** 1Institute of Clinical Sciences, Sahlgrenska Academy At The University of Göteborg, Dept. of Urology, Göteborg, Sweden, 2Institute of Clinical Sciences, Sahlgrenska Academy At The University of Gothenburg, Dept. of Urology, Gothenburg, Sweden

**Associated video presentation**

Variation in prostate cancer care at commission on cancer designated facilities

**By:** Løppenberg 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, Abdullah F.2

**Institutes:** Ruhr-University Bochum, Marien Hospital Herne, Dept. of Urology, Herne, Germany, 2Center For Outcomes Research, Analytics and Evaluation, Vattikuti Urology Institute, Henry Ford Hosp, Dept. of Urology, Detroit, United States of America, 3Henry Ford Hospital, Dept. of Public Health Sciences, Detroit, United States of America, 4Maine Medical Center, Division of Urology & Center For Outcomes Research, Portland, United States of America, 5University Medical Center Hamburg-Eppendorf, Dept. of Urology, Hamburg, United States of America, 6Center For Surgery and Public Health, Brigham and Women’s Hospital, Division of Urology, Boston, United States of America

**Associated video presentation**

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.2, Gaboardi F.1, Del Maschio A.2, Montorsi F.1, Briganti A.1

**Institutes:** Vita-Salute University San Raffaele, Dept. of Urology, Milan, Italy, 2Vita-Salute University San Raffaele, Dept. of Radiology, Milan, Italy, 3Vita-Salute University San Raffaele, Dept. of Pathology, Milan, Italy

**Associated video presentation**

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.2, Macpherson R.2, Verrill C.1, Roberts I.1, Leslie T.1, Crew J.1, Sooriakumaran P.1, Hamdy F.1, Brewster S.1

**Institutes:** 1Oxford University Hospitals Nhs Foundation Trust, Dept. of Urology, Oxford, United Kingdom, 2Oxford University Hospitals Nhs Foundation Trust, Dept. of Radiology, Oxford, United Kingdom, 3Oxford University Hospitals Nhs Foundation Trust, Dept. of Pathology, Oxford, United Kingdom

**Associated video presentation**

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 F1, Kirkham A.1, Allen C.1, Punwani S.1, Emberton M.2, Moore C.2

**Institutes:** 1University College London Hospital, Dept. of Radiology, London, United Kingdom, 2University 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

Summary
To be confirmed
Prostate cancer: Outcomes after radiotherapy and brachytherapy

Location: Room Milan, North Hall (Level 1)

Chairs: A. Bossi, Villejuif (FR)
W.C. Loidl, Linz (AT)
C. Surcel, Bucharest (RO)

Aims and objectives of this presentation
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.3, Fujimoto K.1
Institutes: 1Nara Medical University, Dept. of Urology, Nara, Japan, 2Nara Medical University, Dept. of Radiation Oncology, Nara, Japan, 3Nara Medical University, Dept. of Pathology, 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: Royal 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, Sugiura M.3, Ito E.2, 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
By: Koo K.C.1, Lee W.K.2, Kim J.C.1, Bang W.J.2, Lee S.H.1, Cho S.Y.1, Kim S.I.1, Kim S.J.1, Cho J.S.2, Rha K.H.1, Hong S.J.1, Chung B.H.1

Scientific Programme
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, Fuji T.3, Hasegawa M.4, Konishi N.5, Fujimoto K.1

Institutes: 1Nara Medical University, Dept. of Urology, Kashihara, Japan, 2Nara Medical University, Dept. of Radiation Oncology, Kashihara, Japan, 3Nara Medical University, Dept. of Pathology, Kashihara, Japan

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: 1Memorial Sloan Kettering Cancer Center, Dept. of Surgery and Urology, New York, United States of America

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: 1Ninewells Hospital, Dept. of Urology, Dundee, United Kingdom, 2University of Dundee, School of The Environment, Dundee, United Kingdom, 3University of Dundee, Dept. of Urology, Dundee, United Kingdom, 4University of Edinburgh, Centre for Human Anatomy, Edinburgh, United Kingdom

Nationwide multicenter retrospective study on high-dose-rate brachytherapy as monotherapy for prostate cancer

By: Komiya A.1, Yoshioka Y.2, Kotsuma T.3, Kariya M.4, Konishi K.5, Nonomura N.6, Fujiuchi Y.7, Kitamura H.7

Institutes: 1Chiba University Graduate School of Medicine, Dept. of Urology, Chiba, Japan, 2Osaka University Graduate School of Medicine, Dept. of Radiation Oncology, Osaka, Japan, 3Osaka National Hospital, Dept. of Radiation Oncology, Osaka, Japan, 4Kochi University Graduate School of Medicine, Dept. of Radiation Oncology, Osaka, Japan, 5Osaka Medical Center for Cancer and Cardiovascular Diseases, Dept. of Radiation Oncology, Osaka, Japan, 6Osaka University Graduate School of Medicine, Dept. of Urology, Osaka, Japan, 7Graduate School of Medicine and Pharmaceutical Sciences For Research, University of Toyama, Dept. of Urology, Toyama, Japan

Ex vivo γH2AX 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, Hennlenlotter J.1, Stenzl A.1, Scharpf M.4, Fend F.4, Ricardi U.5, Baumann M.6, Zips D.2, Menegakis A.2

Institutes: 1Eberhard Karls University Tübingen, Dept. of Urology, Tübingen, Germany, 2Eberhard Karls University Tübingen, Dept. of Radiooncology, Tübingen, Germany, 3Maastricht University Medical Centre, Dept. of Radiation Oncology, Maastricht, The Netherlands, 4Eberhard Karls University Tübingen, Dept. of Pathology, Tübingen, Germany, 5University of Turin, Dept. of Radiation Oncology (Maastro), Turin, Italy, 6Faculty of Medicine and University Hospital Carl Gustav Carus, Dept. of Radiation Oncology, Dresden, Germany

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, Horenblad S.1, KleinJan G.3, Van Rhijn B.1, Van Der Poel H.1
Institutes: 1Netherlands Cancer Institute, Dept. of Urology, Amsterdam, The Netherlands, 2Netherlands Cancer Institute, Dept. of Radiation Oncology, Amsterdam, The Netherlands, 3Netherlands Cancer Institute, Dept. of Pathology, Amsterdam, The Netherlands, 4Netherlands Cancer Institute, Dept. of Nuclear Medicine, Amsterdam, The Netherlands, 5Leiden University Medical Center, Dept. of Radiology, Leiden, The Netherlands

13:28 - 13:38

Currect technique on radiation therapy
A. Bossi, Villejuif (FR)
Aims and objectives of this presentation
To look at the current role of multimedia technology on various aspects of urological 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.

12:38 - 12:48
The vanishing of printed journals
P. Dasgupta, London (GB)

12:48 - 12:58
The power of Twitter
S. Loeb, New York (US)

12:58 - 13:08
The danger of excessive information for patients
H.G. Van Der Poel, Amsterdam (NL)

*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, Department of Urology, Helsinki, Finland

*818
Developing HIGH-TECH bladder and bowel diary in innovative clinical informatics
By: Kitta T., Ouchi M., Kanno Y., Moriya T., Shinohara N.
Institutes: 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., Mottrie A., El Hajj I., El Salibi N., El Khoury F.
Institutes: University of Balamand, Dept. of Surgery and Urology, Beirut, Lebanon, 2OLV Robotic Surgery Institute, ORSI Academy, Melle, Belgium, 3Saint George University Hospital 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., Borgmann H., Baunacke M., Boehm K., Groiben C., Schmid M., Siegel F., Huber J.
Institutes: 1University Hospital Cologne, Dept. of Urology, Cologne, Germany, 2University Hospital Mainz, Dept. of Urology, Mainz, Germany, 3TU Dresden, Dept. of Urology, Dresden, Germany
**Quantitative analysis of innovation in Urology**


Institutes: Adelaide and Meath Hospital, Dept. of Urology, Dublin, Ireland, ②Royal College of Surgeons, Dept. of Surgery, Dublin, Ireland

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**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

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**Use of digital media in daily clinical practice among urology residents**

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

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**What is urology tweeting about? Strategic assessment of Twitter communication in urology**

By: Borgmann H.①, Katz M.②, Catto J.③, Weight C.④, Kutikov A.⑤

Institutes: ①University Hospital Mainz, Dept. of Urology, Mainz, Germany, ②Lowell General Hospital, Dept. of Radiation Medicine, Lowell, United States of America, ③University of Sheffield, Academic Urology Unit, Sheffield, United Kingdom, ④University of Minnesota, Dept. of Urology, Minneapolis, United States of America, ⑤Fox Chase Cancer Center, Division of Urologic Oncology, Philadelphia, United States of America

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**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

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**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

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**Whatsapp Messenger as a tool for the multidisciplinary management in everyday clinical practice**


Institutes: ①University of Palermo, Dept. of Urology, Palermo, Italy, ②Macchiarella Clinic, Dept. of Radiation Oncology, Palermo, Italy, ③ARNAS Civico Hospital, Dept. of Radiation Oncology, Palermo, Italy, ④ARNAS Civico Hospital, Dept. of Medical Oncology, Palermo, Italy, ⑤Concordia Hospital, Dept. of Medical Oncology, Palermo, Italy, ⑥Fondazione Istituto G. Giglio, Dept. of Medical Oncology, Cefalù, Italy, ⑦University of Palermo, Dept. of Medical Oncology, Palermo, Italy, ⑧University of Palermo, Clinical Epidemiology and Cancer Registry, Palermo, Italy, ⑨A.S.P. 209, Dept. of Urology, Trapani, Italy, ⑩Buccheri-La Ferla Hospital, Dept. of Urology, Palermo, Italy

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**Utilization of Facebook, Twitter, YouTube and Instagram in the prostate cancer community**

By: Struck J.P.①, Salem J.②, Siegel F.②, Kramer M.①, Tsaur I.②, Heidenreich A.②, Haferkamp A.②, Merseburger A.S.②, Borgmann H.④

Institutes: ①University Hospital Luebeck, Dept. of Urology, Luebeck, Germany, ②University Hospital Cologne, Dept. of Urology, Cologne, Germany, ③University Hospital Mannheim, Dept. of Urology, Mannheim, Germany, ④University Hospital Mainz, Dept. of Urology, Mainz, Germany
Aims and objectives of this presentation
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.

**830**
**Role of the crosstalk between tumor cells, vascular endothelium and the coagulation cascade for the invasion of urothelial bladder carcinoma**
By: John A.¹, Schneider S.², Gorzelanny C.³, Bolenz C.¹
Institutes: ¹University Hospital Ulm, Dept. of Urology, Ulm, Germany, ²University Hospital Hamburg, Dept. of Dermatology, Hamburg, Germany, ³Experimental Dermatology, Dept. of Dermatology, Mannheim, Germany

**831**
**Highly sensitive and specific novel biomarkers for the diagnosis of transitional bladder carcinoma**
By: Ku J.Y.¹, Lee C.H.¹, Lee K.¹, Kim K.H.¹, Baek S.R.¹, Park J.H.¹, Lee J.Z.¹, Park H.J.¹, Han S.H.¹, Jeong I.Y.¹, Kwon M.J.¹, Ha H.K.¹, Jean P.T.²
Institutes: ¹Pusan National University Hospital, Dept. of Urology, Busan, South Korea, ²National University of Singapore, Dept. of Urology, Singapore, Singapore

**832**
**Possible role of sonic hedgehog signaling and epithelial-mesenchymal transition in bladder cancer progression and invasion**
By: Shigemura K.¹, Kitagawa K.², Yamamichi F.³, Sung S-Y.⁴, Chen K.C.⁵, Nakano Y.¹, Fujisawa M.¹
Institutes: ¹Kobe University Graduate School of Medicine, Dept. of Urology, Kobe, Japan, ²Kobe University Graduate School of Medicine, Dept of Internal Related, Kobe, Japan, ³Hyogo Prefectural Amagasaki General Medical Center, Dept. of Urology, Amagasaki, Japan, ⁴Taipei Medical University, College of Medical Science and Technology, Taipei, Taiwan, ⁵Taipei Medical University, Dept. of Urology, Taipei, Taiwan

**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.¹, Wu W-J.¹, Li C-C.¹, Huang C-N.², Ke H-L.², Li W-M.², Lee H-Y.¹, Li C-F.³
Institutes: ¹Kaohsiung Municipal Ta-Tung Hospital, Kaohsiung Medical University, Dept. of Urology, Kaohsiung, Taiwan, ²Kaohsiung Medical University Hospital, Kaohsiung, Taiwan, ³Chi Mei Medical Center, Dept. of Pathology, Tainan, Taiwan
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, University 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: Instituto Nacional De Cancerologia, Dept. of Urology, Mexico City, Mexico, Instituto Nacional De Cancerologia, Dept. of Pathology, Mexico City, Mexico, Instituto Nacional De Cancerologia, Dept. of Clinical Research, Mexico City, Mexico

Targeting ERBB2 mutations in urothelial carcinoma  
By: Audenet F.¹, Isharwal S.¹, Arcila M.², Funt S.³, Rosenberg J.³, Bajorin D.³, Bochner B.¹, Berger M.², Al-Ahmadie H.², Solit D.³, Iyer G.³  
Institutes: Memorial Sloan Kettering Cancer Center, Dept. of Urology, New York, United States of America, Memorial Sloan Kettering Cancer Center, Dept. of Pathology, New York, United States of America, Memorial Sloan Kettering Cancer Center, Dept. of Medical Oncology, New York, United States of America

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: The Affiliated Drum Tower Hospital Of Nanjing University, School Of Medicine, Dept. of Urology, Nanjing, China, Nanjing 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

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

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 presentation
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.

Impact of intratumoral heterogeneity of renal cancer on drug response and development of resistance in patient derived xenografts
Institutes: University 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

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

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: University of Tübingen, Dept. of Urology, Tübingen, Germany, 2Natural and Medical Sciences Institute At The University of Tübingen, Dept. of Molecular Biology, Reutlingen, Germany

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.1, Oosterwijk E.1
Institutes: Radboudumc, Dept. of Urology, Nijmegen, The Netherlands, 2Radboudumc, Dept. of Hematology, Nijmegen, The Netherlands

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

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: Kyushu University, Dept. of Urology, Fukuoka, Japan, 2The Vancouver Prostate Centre, Dept. of Urologic Sciences, Vancouver, Canada

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
Institutes: The Vancouver Prostate Centre, Dept. of Urology, Vancouver, Canada, University of Toronto, Dept. of Surgical Oncology, Toronto, Canada

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., Kraus M., Bader J., Besse A., Schmid H.-P., Engeler D.S., Driessen C., Besse L.
Institutes: Kantonsspital St. Gallen, Dept. of Urology, St. Gallen, Switzerland, Kantonsspital 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., Yan-Jiang B.C., Kanayama H.-O., Teh B.T., Shyh-Chang N.
Institutes: Tokushima University Graduated School, Dept. of Urology, Tokushima, Japan, National Cancer Centre Singapore, Laboratory of Cancer Epigenome, Singapore, Singapore, Genome Institute of Singapore, Agency For Science Technology and Research, Singapore, Singapore

Summary
G. Stewart, Cambridge (GB)
Stress incontinence in women
Poster Session 65

Location: Room Vienna, North Hall (Level 1)
Chairs: T.J. Greenwell, London (GB)  
M. Plata, Bogota (CO)  
G. Van Koeveringe, Maastricht (NL)

Aims and objectives of this presentation
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, 2Rijnstate 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, 2Pole Santé Sud, Dept. of Urology, Le Mans, France, 3CHU Bordeaux, Dept. of Urology, Bordeaux, France, 4Pole Sante Sud, Dept. of Urology, Le Mans, France, 5CHU Brest, Dept. of Urology, Brest, France, 6CHU 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
**862**

**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:** ¹CHU de Caen, Dept. of Urology and Transplantation, Caen, France, ²CHU de Caen, Dept. of Abdominal Surgery, Caen, France

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**863**

**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:** ¹Zagazig University Hospital, Dept. of Urology, Zagazig, Egypt, ²Zagazig University Hospital, Dept. of Obstetrics and Gynecology, Zagazig, Egypt

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**864**

**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.¹, Cline K.³, Robertson K.⁵, Rardin C.⁷, Kahan R.⁸, Green L.⁹, Elser D.¹⁰, Zuckerman J.¹¹, Mc Cammon K.¹¹

**Institutes:** ¹Medical University of South Carolina, Dept. of Urology, Charleston, United States of America, ²Integrity Medical Research, Dept. of Urology, Mountlake Terrance, United States of America, ³Urologic 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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**865**

**Effectiveness of adjustable slings (Remeex system™) in women with stress urinary incontinence due to intrinsic sphincter deficiency**

**By:** Plata M.¹, Robledo D.¹, Castaño J.C.⁴, Osorio C.², Salazar M.³, Velásquez J.⁵, Trujillo C.¹, Caicedo J.¹, Cataño J.¹

**Institutes:** ¹Hospital Universitario Fundación Santa Fe De Bogotá, Dept. of Urology, Bogotá, Colombia, ²Clínica Confamiliar De Risaralda, Dept. of Urology, 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 Urology, Medellín, Colombia

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**866**

**Transurethral injections of polyacrylamide hydrogel (Bulkamid®) for treatment of female stress urinary incontinence (SUI) in DGH settings**

**By:** Hamed A.H.¹, Bekarma H., Rewhorn M., Nair B.

**Institutes:** University Hospital of Ayr, Dept. of Urology, Ayr, United Kingdom

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**867**

**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
Innovations in staging of prostate cancer

Poster Session 66

Monday, 27 March
12:15 - 13:45

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 presentation
Innovations in prostate cancer staging, prognostic groups, lymph nodes 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, Suard 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.⁵, Joniau S.⁵, Van Poppel H.⁵, Akessonov A.⁶, Osmonov D.K.⁶, Juennemann K.P.⁶, Abreu A.D.L.⁶, Almeida F.⁶, Fay C.⁷, Gill I.⁷, Mottrie A.M.⁸, Montorsi F.¹

Institutes: ¹Vita-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, Schwaiger M.²

Institutes: ¹Klinikum rechts 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.², Mäcke H.², Gourni E.², Wetterauer U.¹, Schultz-Seemann W.¹, Meyer P.T.², Jilg C.A.¹

Institutes: ¹Medical Center – University of Freiburg, Faculty of Medicine, University of Freiburg, Germany, Department of Urology, Freiburg, Germany, ²Medical Center – University of Freiburg, Faculty of Medicine, Department 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
**Indication to pelvic lymph nodes dissection for prostate cancer: The role of prostate**

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

**Can we modulate the extent of nodal dissection according to the preoperative risk of lymph node invasion in prostate cancer patients undergoing radical prostatectomy?**

By: Gandaiglia G., Zaffuto E., Dell’oglio P., Fossati N., Scattoni V., Bianchi M., Gallina A., Capitanio U., Gaboardi F., Montorsi F., Briganti A.

Institutes: Vita-Salute University San Raffaele, Dept. of Urology, Milan, Italy

**Characteristics of MRI staging using PI-RADS version 2 and its predictive performance for biochemical recurrence after radical prostatectomy compared to PI-RADS version 1**

By: Matsuoka Y.1, Ishioka J.1, Tanaka H.2, Kimura T.2, Inoue M.1, Ito M.1, Kijima T.1, Yoshida S.1, Yokoyama M.1, Saito K.1, Kihara K.1, Fujii Y.1

Institutes: Tokyo Medical and Dental University Graduate School, Dept. of Urology, Tokyo, Japan, Ochanomizu Surugadai Clinic, Dept. of Radiology, Tokyo, Japan

**Ability of a new clinical prognostic grouping to better predict disease mortality after treatment in primary non-metastatic prostate cancer**

By: Gnanapragasam V.1, Lophatnanan A.4, Muir K.4, Stattin P.3, Bratt O.3

Institutes: University of Cambridge, Academic Urology Group, Dept. of Surgery, Cambridge, United Kingdom, Addenbrookes Hospital, Dept. of Urology, Cambridge, United Kingdom, Umea University, Dept. of Surgical and Perioperative Science, Umea, Sweden, University of Manchester, Institute of Population Health, Manchester, United Kingdom

**Expression of tumor progression-associated genes in circulating tumor cells of patients with different stages of prostate cancer**

By: Bier S.1, Hennenlotter J.1, Beger G.1, Pavlenco L.1, Feniuk N.2, Hauch S.2, Rausch S.1, Stenzl A.1, Todenhöfer T.1

Institutes: Eberhard-Karls-University, Dept. of Urology, Tübingen, Germany, Qiagen, Dept. of Research and Development, Hilden, Germany, Qiagen, Dept. of Research and Development, Hilden, Germany

**Current and projected prevalence of prostate cancer according to risk-categories. A nation-wide and population-based study**

By: Folkvaljon Y.1, Garmo H.2, Ventimiglia E.3, Holmberg L.2, Stattin P.4

Institutes: Regional Cancer Centre Uppsala/örebro, Dept. of Surgical Sciences, Uppsala, Sweden, King’s College London, Faculty of Life Sciences and Medicine, Division of Cancer Studies, London, United Kingdom, IRCCS Ospedale San Raffaele, Division of Experimental Oncology/Unit of Urology; URI, Milan, Italy, Uppsala University, Dept. of Surgical Sciences, Uppsala, Sweden

**Are the results of the protect trial applicable to contemporary prostate cancer patients treated at two high-volume European Institutions?**

By: Gandaiglia G.1, Zaffuto E.1, Fossati N.1, Dell’oglio P.1, Cucchiara V.1, Pompe R.2, Suardi N.1, Rigatti P.3, Graefen M.2, Montorsi F.1, Tilki D.2, Briganti A.1

Institutes: Vita-Salute University San Raffaele, Dept. of Urology, Milan, Italy, Martini-Klinik Prostate Cancer Center, Dept. of Urology, Hamburg, Germany, Advanced Urotechnology Center,
External validation of a new clinical prognostic grouping to improve prediction of disease mortality at diagnosis in primary non-metastatic prostate cancer

By: Gnanapragasam V.¹, Bratt O.², Stattin P.³, Lee L.⁵, Huang H.⁵, Muir K.⁴, Lophatananon A.⁴

Institutes: University of Cambridge, Academic Urology Group, Dept. of Surgery, Cambridge, United Kingdom, ²Addenbrookes Hospital, Dept. of Urology, Cambridge, United Kingdom, ³Umea University, Dept. of Surgical and Perioperative Science, Umma, Sweden, ⁴Institute of Population Health, Manchester, United Kingdom, ⁵Singapore General Hospital, Dept. of Urology, Singapore, Singapore

Do more granular Gleason categorizations lead to better prognostic accuracy over time?


Institutes: University Hospital Zurich, Dept. of Urology, Zurich, Switzerland, ²University Hospital Zurich, Dept. of Pathology and Molecular Pathology, Zurich, Switzerland, ³Moffitt Cancer Center, Dept. of Epidemiology, Tampa, United States of America, ⁴Harvard T.H. Chan School of Public Health, Dept. of Epidemiology, Boston, United States of America, ⁵Boston University, Dept. of Epidemiology, Boston, United States of America, ⁶Brigham and Women’s Hospital/Brigham Medical School, Channing Division of Network Medicine, Dept. of Medicine, Boston, United States of America, ⁷S. Orsola-Malpighi Hospital, Addarii Institute, Dept. of Pathology, Bologna, Italy, ⁸Dana-Farber Cancer Institute, Harvard Medical School, Dept. of Medical Oncology, Boston, United States of America

New methods in staging of prostate cancer

M. Lardas, Nea Smirni-Athens (GR)
**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 presentation**
7% of the population have one Today's rare and difficult diseases will remain tomorrow's rare and difficult diseases. Unless we research, study and teach about them.

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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**882**
**Shorter telomere length increases age-related risk of kidney cancer in von Hippel-Lindau disease**
*By:* Wang J.Y., Peng S.H., Ning X.H., Li T., Liu J.Y., Liu S.J., Gong K.
*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

**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., Charvier K., Ruffion A., Mouriquand P., Morel-Journel N., Courtois F., Terrier J-E.
*Institutes:* University Hospital of Saint-Etienne, Dept. of Urology, Saint-Etienne, France, Henry Gabrielle Hospital, University Hospital of Lyon, Dept. of Neuro Perineal and Sexology Rehabilitation, Lyon, France, South Lyon Hospital, University Hospital of Lyon, Dept. of Urology, Lyon, France, Woman Mother Child Hospital, University Hospital of Lyon, Dept. of Urogynecology Surgery, Visceral, Thoracic, Newborn and Transplantation, Lyon, France, University of Québec, Dept. of Sexology, Montréal, Canada

**888**
**HIPEC with cytoreductive surgery can cure patients with limited peritoneal carcinomatosis from adenocarcinoma of the urachus**
*By:* Behrendt M.A., Mehta A., Boot H., Fransen Van De Putte E., Van Der Heijden M., Horenblas S., Moonen L., Verwaal V., Meinhardt W., Van Rijn B.
*Institutes:* Netherlands Cancer Institute - Antoni van Leeuwenhoek Hospital, Dept. of Urology, Amsterdam, The Netherlands, Basingstoke and North Hampshire Hospital, Dept. of Colorectal Surgery, Hemphire, United Kingdom, Netherlands Cancer Institute - Antoni van Leeuwenhoek Hospital, Dept. of Surgical Oncology, Amsterdam, The Netherlands, Netherlands Cancer Institute - Antoni van Leeuwenhoek Hospital, Dept. of Oncology, Amsterdam, The Netherlands, Netherlands
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

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.², 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 presentation**

Optimising 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:** 1. University of British Columbia, Dept. of Urologic Sciences, Vancouver, Canada, 2. University of Bern, Dept. of Urology, Bern, Switzerland, 3. 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:** 1. Lister Hospital Stevenage, Division of Robotic Urology, Department of Urology, Stevenage, United Kingdom, 2. Glickman Urological and Kidney Institute and Taussig Cancer Center, Cleveland Clinic, Cleveland, United States of America, 3. Division of Robotic Surgery, Dept. of Urology, Cleveland Clinic, Cleveland, United States of America, 4. Freeman Hospital, Dept. of Urology, Newcastle, United Kingdom, 5. University of British Columbia, Dept. of Urologic Sciences, Vancouver, Canada, 6. Cleveland Clinic, Glickman Urological and Kidney Institute and Taussig Cancer Center, Cleveland, United States of America, 7. Lee Moffitt Cancer Center and Research Institute, Dept. of Genitourinary Oncology, Tampa, United States of America, 8. University of Southern California, USC/Norris Comprehensive Cancer Center, Institute of Urology, Los Angeles, United States of America, 9. The Netherlands Cancer Institute–Antoni van Leeuwenhoek Hospital, Dept. of Urology, Amsterdam, The Netherlands, 10. MD Anderson Cancer Center, Dept. of Urology, Houston, United States of America, 11. University of Texas Southwestern Medical Center, Dept. of Urology, Dallas, United States of America, 12. University of Oklahoma College of Medicine, Dept. of Urology, Oklahoma City, United States of America, 13. University of Alberta, Edmonton, Alberta, Canada, 14. The James Buchanan Brady Urological Institute, The Johns Hopkins School of Medicine, Dept. of Urology, Baltimore, United States of America, 15. University of Kansas Medical Center, Dept. of Urology, Kansas City, United States of America, 16. University of Michigan Health System, Dept. of Urology, Ann Arbor, United States of America, 17. Division of Oncology, University of Washington School of Medicine and Fred Hutchinson Cancer Research, Dept. of Medicine, Seattle, United States of America, 18. Weill Cornell Medical College, Presbyterian Hospital, Dept. of Urology, New York, United States of America, 19. Exeter Surgical Health Services Research Unit, Royal Devon and Exeter NHS Trust, Dept. of Surgery, Exeter, United Kingdom, 20. McGill University Health Center, Dept. of Surgery (Division of Urology), Montreal, Canada, 21. University of California at Davis, Davis Medical
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

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: IRCCS Ospedale San Raffaele, Dept. of Urology, Milan, Italy

Circulating tumor cells do not correspond with clinicopathological characteristics of muscle-invasive bladder cancer patients undergoing radical cystectomy: Interim results of the CirGuidance study

By: Boormans J., De Kruijff I., Beije N., Kraan J., Te Slaa E., Wijburg C., Van Der Hoeven J., Van Der Heijden A., Somford R., Klaver O.S., Van N.M., Martens J.W., Sleijfer S.

Institutes: Erasmus MC, Dept. of Urology, Rotterdam, The Netherlands

Muscle invasive bladder cancer: A single sample patient assay to predict molecular subtypes and benefit of neoadjuvant chemotherapy


Institutes: University of British Columbia, Dept. of Urologic Sciences, Vancouver, Canada

Scientific Programme
Oncology, Houston, United States of America, 11University of Texas MD Anderson Cancer Center, Dept. of Urology, Houston, United States of America, 12University of Bern, Dept. of Urology, Bern, Switzerland, 13University Hospital of Southampton, Dept. of Medical Oncology, Hampshire, United Kingdom, 14University of Alberta Edmonton, Cross Care Institute, Dept. of Oncology, Alberta, Canada, 15University of Sacramento, UC Davis Comprehensive Cancer Center, Sacramento, United States of America

**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: University 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 Tuebingen, Dept. of Urology, Tuebingen, 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: Yamagata 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 Centarat 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.3, Roghmann F.4, Noldus J.4, Nuhn P.5, Rink M.1, Chun F.1, May M.8, Fisch M.1, Aziz A.1

Institutes: Universitätsklinikum 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: Kulikarni G.1, Hermanns T.1, Wei Y.1, Bhindi B.1, Satkunasivam R.1, Athanasopoulos P.1, Bostrom P.1, Kuk C.2, Li K.2, Templetton A.2, Sridhar S.2, Van Der Kwast T.1, Chung P.5, Bristow R.5, Milosevic M.5, Warde P.5, Fleschner N.5, Jewett M.6, Bashir S.7, Zlotta A.8

Institutes: Princess Margaret Cancer Centre, University Health Network, Dept. of Surgery, Toronto, Canada, 2Mount Sinai Hospital, Dept. of Surgery, Toronto, Canada, 3Princess Margaret Cancer Centre, University Health Network, Dept. of Medical Oncology, Toronto, Canada, 4Toronto General Hospital, University Health Network, Dept. of Pathology, Toronto, Canada, 5Princess Margaret
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, Urology, München, Germany

The accuracy of sequential urethral frozen sections and its impact on urethral recurrence after radical cystectomy
Institutes: University Hospital of Tuebingen, Dept. of Urology, Tuebingen, Germany
ESU/ESFFU Hands-on Training in Urodynamics

HOT08

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

Chair: H. Hashim, Bristol (GB)

Aims and objectives of this presentation
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.

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

**Monday, 27 March**
**14:00 - 15:30**

**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 presentation**
Demonstration of reconstructive procedures with novel approaches which seem promising because they still obey the principles of classic reconstructive urology or 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**
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.¹, Pini G.², Alba S.¹, Altieri V.¹, Verze P.², Mirone V.²
Institutes: ¹Romolo Hospital, Dept. of Urology, Rocca Di Neto, Italy, ²Federco II University, Dept. of Urology, Naples, Italy, ³Uroclinic, Minimally Invasive Robotic Center, Stockholm, Sweden

*V76

**Robotic ureteral reimplantation for uretero-enteric anastomotic strictures in different urinary diversions**
By: Simone G.¹, Fay C.², Freitas D.², Chopra S.², Misuraca L.¹, Tuderti G.¹, Ferriero M.¹, Guaglianone S.¹, Gill I.², Berger A.², Desai M.², Goh A.², Gallucci M.¹, Aron M.²
Institutes: ¹Regina Elena National Cancer Institute, Dept. of Urology, Rome, Italy, ²Keck School of Medicine, University of Southern California, USC Institute of Urology, Los Angeles, United States of America, ³Methodist Hospital, Dept. of Urology, Houston, United States of America

*V77

**Laparoscopic ureteral substitution with cecal appendix**
By: Cavalli A.², Hota T.³, Slongo L.², Gouveia D.², Souza V.³
Institutes: ¹Hospital de clinicas, Federal University of Parana, Dept. of Urology, Paraná, Brazil, ²University Federal of Parana, Dept. of Urology, Curitiba, Brazil, ³Hospital Nossa Senhora Das Graças, Dept. of Urology, Curitiba, Brazil

*V79

**Left-sided ureteroplasty with appendix**
By: Popov S.¹, Orlov I.¹, Vyazovtsev P.¹, Galliamov E.², Novikov A.³, Sergeev V.⁴
Institutes: ¹City Hospital Saint Luka / No18, Dept. of Urology, Saint Petersburg, Russia, ²Civil Aviation Hospital, Dept. of Urology, Moscow, Russia, ³Central Bank Medical Center, Dept. of Urology, Moscow, Russia, ⁴Moscow 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

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
Sophisticated approaches to advanced RCC

**Poster Session 69**

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

**Chairs:** J.I. Martínez Salamanca, Majadahonda (ES)
V. Matveev, Moscow (RU)
M.C. Mir Maresma, Cleveland (US)

**Aims and objectives of this presentation**
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.

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**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, Göteborg, Sweden, Akershus University Hospital, Dept. of Urology, Oslo, Norway, Haukelan University Hospital, Dept. of Urology, Bergen, Norway

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**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.³, 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 Renne, Dept. of Urology, Renne, France, San Raffaele Scientific Institute, Dept. of Urology, Milan, Italy

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**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, Martinez-Salamanca J.I.⁸, McKiernan J.M.⁹, Scherr D.S.¹⁰, Zigeuner R.¹¹, Libertino J.A.⁵

**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

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**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, Canada
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

Comparison between laparoendoscopic single site nephrectomy and conventional laparoscopic nephrectomy: A randomized control single institution experience
Institutes: Cairo University, Dept. of Urology, Cairo, Egypt

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 Reconstrcutive 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.5, Duclos B.5, Ravaud A.1, Laguerre B.5, Albiger L.5, Arnoux A.10, Escudier B.3, Patard J.J.1
Institutes: Bicètre 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, 10Bicêtre 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
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-Grosshadern, Dept. of Urology, Munich, Germany

S-TRAC adjuvant sunitinib phase 3 trial in patients with high risk renal cell carcinoma: Subgroups analyses by risk factors
Institutes: University Hospital of Munich, Dept. of Urology, Munich, Germany, 2Bicètre Hospital, Paris-Saclay University, Dept. of Urology, Le Kremlin Bicètre, France, 3Ronald Reagan UCLA Medical Center, Dept. of Urology, Los Angeles, Ca, United States of America, 4Bordeaux University
M.C. Mir Maresma, Cleveland (US)
Complications and functional outcomes after radical prostatectomy

**Aims and objectives of this presentation**

The aim of this session is to evaluate peri-operative 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., Fabricius M., McColl E., Johnson M., Soomro N., Harding C., Aning J.

**Institutes:** Newcastle Upon Tyne Hospitals NHS Foundation Trust, Dept. of Urology, Newcastle Upon Tyne, United Kingdom, University of Newcastle, Institute of Health and Society, Newcastle Upon Tyne, United Kingdom

*926* Predictors of continence after Retzius-sparing robot-assisted radical prostatectomy

**By:** Kim L.H., Abdel Raheem A., Santok G.D., Chang K., Lee S.H., Ham W.S., Choi Y.D., Rha K.H.

**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., Suardi N., Gallina A., Dell’oglio P., Fossati N., Cucchiara V., Moschini M., Bandini M., Zaffuto E., Salonia A., Gaboardi F., Damiano R., Mirone V., Montorsi F., Briganti A.

**Institutes:** Vita-Salute University San Raffaele, Dept. of Urology, Milan, Italy, University of Naples

Scientific Programme
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.4, Noma H.4, Takenaka A.1
Institutes: 1Faculty 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

Contemporary complications after radical prostatectomy
By: Pompe R.S.1, Beyer B.1, Gild P.1, Karakiewicz P.2, Leyh-Bannurah S-R.1, Schlamm T.1, Steuber T.1, Huland H.1, Graeven M.1, Tilki D.1
Institutes: 1Universitätsklinikum Hamburg-Eppendorf, Dept. of Urology, Hamburg, Germany, 2University of Montreal Health Center, Cancer Prognostics and Health Outcomes Unit, Montreal, Canada

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

Outcomes of preventive vs delayed ligation of dorsal vascular complex during RARP: Preliminary results of a randomized trial
Institutes: ASST Spedali Civili Hospital of Brescia, Dept. of Urology, Brescia, Italy

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: 1Hospital Universitario de Getafe, Dept. of Urology, Getafe, Spain, 2Pertica, Dept. of Statistics, Getafe, Spain, 3Hospital De Santa María, Dept. of Urology, Lisbon, Portugal

Incidence, risk factors, management and complications of rectal injuries during radical prostatectomy
By: Mandel P.1, Linnemannstöns A.2, Chun F.3, Schlamm T.1, Rosenbaum C.1, Ludwig T.3, Dahlem R.3, Fisch M.3, Graeven 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

Urinary continence, sexual function and biochemical recurrence 12 months following robot-assisted radical prostatectomy: A randomized controlled study comparing the Bocciardi and Menon techniques
Institutes: Vattikutti Urology Institute, Dept. of Urology, Detroit, United States of America

Long term complications and quality of life after pure versus robot-assisted laparoscopic prostatectomy: Results of a prospective randomised controlled trial
By: Fiori C.1, Bertolo R.1, Manfredi M.1, Mele F.1, Poggio M.1, Garrou D.1, Checcoli E.1, De Luca S.1
Passera R.², Scarpa R.M.¹, Porpigia F.¹

Institutes: ¹San Luigi Hospital, Dept. of Urology, Turin, Italy, ²San Giovanni Battista Hospital, Dept. of Nuclear Medicine, Turin, Italy
Survivorship in prostate cancer: "Its all about patients"

**Poster Session 71**

**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 presentation**
To assess patients' 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.

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*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:** ¹Klinikum Rechts Der Isar, Technical University of Munich, Dept. of Urology, Munich, Germany, ²Klinikum 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:** ¹University Medical Center Utrecht, Dept. of Urology, Utrecht, The Netherlands, ²NKI-AVL, Dept. of Urology, Amsterdam, The Netherlands, ³NKI-AVL, Division of Psychosocial Research & Epidemiology, Amsterdam, The Netherlands, ⁴Umc 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:** ¹Netherlands Comprehensive Cancer Organisation, Dept. of Research, Utrecht, The Netherlands, ²Radboud University Medical Centre, Dept. of Urology, Nijmegen, The Netherlands, ³Academic 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.P., Nabi G.N  
**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  
**By:** Kretschmer A., Buchner A., Grabbert M., Sommer A., Herlemann A., Stief C.G., Bauer R.M.  
**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:** ¹Chu Carémeau, Dept. of Urology Andrology, Nimes, France, ²Ipsen Pharma, Dept. of Urology, Boulogne-Billancourt, France, ³University 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*

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**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*

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**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, Sønsken J.¹*

*Institutes: ¹Herlev 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*

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**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*

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**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*

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**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 presentation**
To evaluate the imaging and markers for recurrence and adjuvant or salvage treatments results.

**Scientific Programme**

*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.⁶, Maggio A.⁶, Sanguinetti G.⁷, Di Muzio N.¹, Briganti A.³, Cozzarini C.⁴, Fiorino C.²

**Institutes:** San Raffaele Scientific Institute, Dept. of Radiotherapy, Milan, Italy, ²San Raffaele Scientific Institute, Dept. of Medical Physics, Milan, Italy, ³Candiolo Cancer Institute - FPO, IRCCS, Dept. of Radiotherapy, Candiolo, Italy, ⁴Regina Elena National Cancer Institute, Dept. of Radiotherapy, Rome, Italy, ⁵San Raffaele Scientific Institute, Dept. of Urology, Milan, Italy

*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.⁷, Dicker A.⁸, Menon M.¹, Abdollah F.¹

**Institutes:** Henry Ford Health System, Vattikuti Urology Institute, Detroit, United States of America, ²GenomeDx Biosciences, GenomeDx Biosciences, Vancouver, Canada, ³Mayo Clinic, Dept. of Urology, Rochester, United States of America, ⁴Johns Hopkins Hospital, James Buchanan Brady Urological Institute, Baltimore, United States of America, ⁵Sidney Kimmel Cancer Center, Thomas Jefferson University, Dept. of Radiation Oncology, Philadelphia, United States of America, ⁶Samuel Oschin Comprehensive Cancer Center, Cedars-Sinai Medical Center, Dept. of Surgery, Division of Urology, Los Angeles, United States of America, ⁷Northwestern University, Feinberg School of Medicine, Dept. of Urology, Chicago, United States of America, ⁸Vita Salute San Raffaele Hospital, Dept. of Urology, Milan, Italy

*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, Colicchia M.², Bossi A.³, Cozzarini C.⁴, Fiorino C.⁵, Noris Chiorda B.⁶, Dell’oglio P.², Gandaglia G.¹, Wiegel T.⁵, Shariat S.⁷, 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.¹⁰, Montorsi P.¹

**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 Oncology, Villejuif, France, ⁴Vita-Salute University San Raffaele, Dept. of Radiotherapy, Milan, Italy, ⁵University Hospital Ulm, Dept. of Radiation Oncology, Ulm, Germany, ⁶Medical University of Vienna, Dept. of Urology, Vienna, Austria, ⁷Medical University of Vienna, Dept. of Radiation Oncology, Vienna, Austria, ⁸University Hospitals Leuven, Dept. of Urology, Leuven, Belgium, ⁹University Hospitals Leuven, Dept. of Radiotherapy, Leuven, Belgium, ¹⁰Ghent 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, Urology, Dept of Development and Regeneration, 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, 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

By: Fossati N.1, Karnes R.J.2, Boorjian S.2, Colicchia M.3, Bossi A.3, Cozzarini C.4, Fiorino C.4, Chiorda B.N.4, Gandaglia G.1, Dell’oglio P.1, Diegel T.5, Shariat S.6, Goldner G.7, Joniau S.8, Battaglia A.9, Haustermans K.10, De Meerleer G.3, Fonteyne V.10, Ost P.11, Van Poppel H.5, Montorsi F.1, Briganti A.1

Institutes: Vita-Salute University San Raffaele, Dept. of Urology, Milan, Italy, Mayo Clinic, Dept. of Urology, Rochester, 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

By: Lee J-W., Crouzet S., Soria J., Gelet A.

Institutes: Hospices Civils De Lyon, Dept. of Urology and Transplantation, Lyon, France

Predictive factors of positive 68Ga-PSMA PET/CT in patients with PSA recurrence following radical prostatectomy

By: Tosco L.1, Joniau S.1, Witters M.1, Battaglia A.1, Croomphout L.2, Goffin K.2, Gheysens O.2, Deroose C.2, Oyen R.2, Van Laere K.2

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.3, Flamen P.2, Van Velthoven R.1

Institutes: Institut Jules Bordet, Dept. of Urology, Brussels, Belgium, Institut Jules Bordet, Dept. of Urology, Brussels, Belgium, Institut Jules Bordet, Dept. of Urology, 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, Tritzschler S.¹, El-Malazi L.¹, Wenter V.², Ilhan H.³, Bartenstein P.², Stief C.¹, Gratzke C.¹

Institutes: Ludwig-Maximilians-University Munich, Dept. of Urology, Munich, Germany, ²Ludwig-Maximilians-University Munich, Dept. of Nuclear Medicine, Munich, Germany

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**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

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**Stereotactic radiotherapy for bone and nodal oligometastases: Patterns of relapse in a prospective clinical trial**

By: Siva S.², Udovich 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: Peter 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

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**Assessing the risk of early and late toxicity of post-prostatectomy radiation therapy: A long-term multi-institutional analysis**

By: Briganti A.¹, Fossati N.³, Karnes J.², Boorjian S.², Colicchia M.², Bossi A.³, Cozzarini C.², Fiorino C.², Noris Chiorda B.¹, Dell’oglio P.³, Gandaglia G.³, Wiegel T.³, Shariat S.³, Goldner G.³, Joniau S.³, Battaglia A.³, Haustermans K.³, De Meerleer G.³, Fonteyne V.¹, Ost P.¹, Van Poppel H.³, Montorsi F.¹

Institutes: Vita-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 presentation

Not all patients respond to BCG therapy for urothelium tumors. 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.
**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., Takeuchi A., Shiota M., Black P., Eto M., Naito S., Gleave M., Ong C.
Institutes: Kyusyu University, Dept. of Urology, Fukuoka, Japan, The 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., Sato A., Asano T., Okubo K., Hoffmann M., Schulz W., Asano T.
Institutes: National Defense Medical College, Dept. of Urology, Tokorozawa, Japan, Heinrich 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., Oo H., Jäger W., Kobatake K., Goriki A., Seiler R., Todenhöfer T., Li N., Fazli L., Matsubara A., Black P.
Institutes: Hiroshima University, Dept. of Urology, Hiroshima, Japan, Vancouver 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., Miyata Y., Yasuda T., Nakamura Y., Matsuo T., Ohba K., Furusato B., Fukuoka J., Sakai H.
Institutes: Nagasaki University Graduate School of Biomedical Sciences, Dept. of Urology, Nagasaki, Japan, Nagasaki University Hospital, Dept. of Pathology, Nagasaki, Japan

**Compound A inhibits urothelial tumorigenesis via both glucocorticoid receptor and androgen receptor pathways**
By: Ide H., Inoue S., Zheng Y., Kashiwagi E., Kawahara T., Miyamoto H.
Institutes: University of Rochester, Dept. of Pathology, Urology and Oncology, Rochester, United States of America, Johns Hopkins University, Dept. of Pathology and Urology, Baltimore, United States of America, University of Rochester, Dept. of Pathology and Oncology, Rochester, United States of America, Kyushu University, Dept. of Urology, Fukuoka, Japan, Yokohama City University Medical Center, Dept. of Urology and Renal Transplantation, Yokohama, Japan

**New targets in urothelial cancer**
Y. Allory, Creteil (FR)
Oncogenes, tumor suppressor genes and molecular markers in renal cell carcinoma

Poster Session 74

Monday, 27 March
14:00 - 15:30

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 presentation
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.

*977 Risk assessment for ccRCC patients based on alterations in specific chromosomal regions
By: Grimm J.1, Janssen M.1, Wagenpfeil S.2, Hartmann A.3, Stöhr C.3, Kunath F.4, Stöckle M.1, Junker K.1
Institutes: 1Saarland University Medical Center, Dept. of Urology and Pediatric Urology, Homburg/saar, Germany, 2Saarland University Medical Center, Institute of Medical Biometry, Epidemiology and Medical Informatics, Homburg/saar, Germany, 3University Hospital Erlangen, Institute of Pathology, Homburg/saar, Germany, 4University Hospital Erlangen, Dept. of Urology, Homburg/saar, Germany

*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

*979 Validation and target identification of metastasis-associated miRNAs as prognostic markers in clear cell renal cell cancer
By: Heinzelmann J.1, Hoelters S.1, Arndt M.1, Pleyers R.1, Fecher-Trost C.2, Schalkowsky P.2, Janssen M.1, Pryalukhin A.3, Stoeckle M.1, Junker K.1
Institutes: 1Saarland University, Dept. of Urology and Pediatric Urology, Homburg, Germany, 2University of The Saarland, Experimental and Clinical Pharmacology and Toxicology, Homburg, Germany, 3University Hospital of Saarland, Institute of Pathology, Homburg, Germany

*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.1, De Stephanis L.2, Paterniani S.3, Galosi A.B.4, Ippolito C.1, Pinton P.3, Aguiari G.2
Institutes: 1University Hospital “St. Anna”, Dept. of Urology, Ferrara, Italy, 2University of Ferrara, Dept. of Biomedical and Specialty Surgical Sciences, Ferrara, Italy, 3University of Ferrara, Dept. of Morphology, Surgery and Experimental Medicine, Ferrara, Italy, 4Marche Polytechnic University, Dept. of Urology, Ancona, Italy

*982 Functional variants in the low-density lipoprotein receptor gene are associated with clear cell renal cell carcinoma susceptibility
Institutes: 1The Affiliated Hospital of Qingdao University, Dept. of Urology, Qingdao, China, 2Fudan University Shanghai Cancer Center, Cancer Institute, Shanghai, China, 3Fudan University Shanghai Cancer Center, Dept. of Urology, Shanghai, China
**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.³, 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, ²Inserm U1113, Team 3, Cellular Signalisation and Communication In Kidney and Prostate Cancers, Strasbourg, France, ³Strasbourg University Hospital, Dept. of Pathology, Strasbourg, France, ⁴Strasbourg University Hospital, Dept. of Urology, Strasbourg, France

**Systematic expression analysis of the mitochondrial complex III subunits identifies UQCRC1 as a biomarker in clear cell renal cell carcinoma**

*By*: Ellinger J.¹, Gromes A.¹, Poss M.¹, Brüggemann M.¹, Schmitdt D.¹, Ellinger N.², Tolkach Y.³, Dietrich D.³, Kristiansen G.³, Müller S.C.³

*Institutes*: Universitätsklinikum Bonn, Dept. of Urology, Bonn, Germany, ²Universitätsklinikum Bonn, Dept. of Anesthesia and Intensive Care, Bonn, Germany, ³Universitätsklinikum Bonn, Dept. of Pathology, Bonn, Germany

**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

**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)**

*By*: Skibbe M.¹, Guenther K.², Kapur P.³, Huang J.¹, Beldegrun A.⁵, Burchardt M.¹, Zimmermann U.¹, Gu Y-F.⁴, Wolff N.³, Brugarolas J.⁶, Lillig C.², Pantuck A.⁶, Kroeger N.¹

*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

**Targeting Lim1 oncogene has a therapeutic potential in advanced human renal cell carcinoma**

*By*: Hamaidi I.¹, Danilin S.², Dormoy V.², Rothhut S.¹, Coquard C.³, Barthelmes M.¹, Béraud C.⁶, Lindner V.⁴, Lang H.⁵, Massfelder T.¹

*Institutes*: INSERM U1113 Team 3, Dept. of Urology, Strasbourg, France, ²FIRALIS, Dept. of Urology, Hunsingue, France, ³Inserm UMRS 903, Dept. of Urology, Reims, France, ⁴HUS, Hôpital De Hauteperiere, Dept. of Pathology, Strasbourg, France, ⁵HUS, Nouvel Hôpital Civil, Dept. of Urology, Strasbourg, France, ⁶Urolead, Dept. of Urology, Strasbourg, France

**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.³, Fussek S.², Nowroozizadeh B.⁴, Huang J.⁴, Brandsstetter D.⁵, Dougall B.⁶, Burchardt M.², Beldegrun A.⁶, Seliger B.², Pantuck A.⁶

*Institutes*: Martin Luther University Halle/wittenberg, Medical Immunology At, Halle, Germany, ²Ernst-Moritz-Arndt University, Dept. of Urology, Greifswald, Germany, ³Martin Luther University Halle/wittenberg, Medical Immunology At, Halle, Unknown, ⁴David Geffen School of Medicine At The University of California, Dept. of Pathology and Laboratory Medicine, Los Angeles, United States of America, ⁵Amgen Inc., Dept. of Hematology and Oncology Research, Seattle, United States of America, ⁶David Geffen School of Medicine At The University of California, Los Angeles,
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)

Aims and objectives of this presentation
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)

*990
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

*991
Laparoscopic repair of female genitourinary fistulae: Single-center single-surgeon experience
By: Abdel-Karim A., Abelfotoh A., Elsalmy S.
Institutes: Alexandria University, Dept. of Urology, Alexandria, Egypt

*992
Comparison of autologous pubovaginal sling, abdominal sacrocolpopexy and laparoscopic sacrocolpopexy in the management of symptomatic pelvic organ prolapse
By: Cormio L., Mancini V., Liuzzi G., D'altilia N., Carrieri G.
Institutes: Urology and Renal Trasplant Unit, Dept. of Uro-Nephrology, University of Foggia, Ospedali Riuniti, Foggia, Italy

*993
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

*994
Urethrovaginal fistula repair: Long-term outcomes
By: Herschorn S.
Institutes: Sunnybrook Health Sciences Centre, Dept. of Surgery and Urology, Toronto, Canada

*995
Laparoscopic versus robotic assisted sacrocolpopexy: A randomized, controlled trial
By: Illiano E., Di Biasi M., Di Tonno P., De Rienzo G., Zucchi A., Mearini L., Maglia D., Costantini E.
Institutes: University of Perugia, Dept. of Urology, Perugia, Italy, University of Bari, Dept. of Urology, Bari, Italy

*996
Laparoscopic sacrocolpopexy in treatment of pelvic organ prolapse: Learning curve analysis
By: Carracedo Calvo D., López-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

*997
Abdominal vs laparoscopic sacrocolpopexy a subanalysis of a randomized controlled trial
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
Aims and objectives of this presentation
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, Zacchero 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
By: Hevia V., Lorca J., Gómez V., Donis F., Braser J., Alvarez S., Díez V., Jiménez M.A., Burgos F.J.
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 live donor nephrectomy in comparison with standard laparoscopic live 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
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, Singapore, National University Hospital, Dept. of Nephrology, University Medicine Cluster, Singapore, Singapore, National University Hospital, Dept. of Urology, University Surgical Cluster, Singapore, Singapore, National University Hospital, Dept. of Diagnostic Radiology, Singapore, Singapore

Local sildenafil accelerate renal regeneration after ischemia/reperfusion injury in canine model
By: Zahran M., Barakat N., Khter S., Awadalla A., Mosbah A., Shakeir A.
Institutes: Urology and Nephrology Center, Mansoura, Egypt, 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: Ordonez F., Kawano P., Guerra R., Yamamoto H., Modelli De Andrade L.G., 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

Kidney transplantation from uncontrolled donation after circulatory death (IIa): Organ procurement and renal harvested over a ten year period
Institutes: Hospital Universitario 12 de Octubre, Dept. of Urology, Madrid, Spain

Initial experience and results in kidney transplants in controlled asystolia donors in a single institution
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-Rodríguez J.C.4, Gracia R.M.4, Espinel E.2, Pont T.2, Morote J.1

Institutes: 1Hospital Universitari Vall d'Hebron, Dept. of Urology, Barcelona, Spain, 2Hospital Universitari Vall d'Hebron, Dept. of Transplant 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 presentation**

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.¹, Adi K.², Daryanto B.¹, Seputra P.¹, Indradiputra I.M.U.¹, Agil A.²  
Institutes: Saiful Anwar General Hospital, Dept. of Urology, Malang, Indonesia, ²Hasan 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: Ethiology and outcomes*  
By: Kasyan G.¹, Diakov V.¹, Pushkar D.²  
Institutes: Moscow State University of Medicine and Dentistry, Moscow, Russia, ²Moscow 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.¹, Naaseri S.², Solomon E.¹, Pakzad M.¹, Hamid R.¹, Ockrim J.¹, Greenwell T.¹  
Institutes: University College London Hospital Nhs Trust, Dept. of Urology, London, United Kingdom, ¹University 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, Padova, Italy

*1023 Sclerosis and severe fibrosis as a predictive factor for restricture after bulbar urethroplasty*  
By: Olsen Ekerhult T.¹, Lindqvist K.¹, Grenabo L.¹, Kåbjörn C.², Peeker R.¹  
Institutes: Sahlgrenska University Hospital, Dept. of Urology, Gothenburg, Sweden, ²Sahlgrenska University Hospital, Dept. of Urology, Gothenburg, Sweden
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

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

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, University of Sheffield, Materials Science and Engineering, Sheffield, United Kingdom

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

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

Smoking and stricture recurrence after one stage bulbar urethroplasty – results from a large contemporary cohort

By: Meyer C., Vetterlein M., Loewe C., Rink M., Chun F., Dahlem R., Fisch M., Kluth L.

Institutes: University Medical Center Hamburg-Eppendorf, Dept. of Urology, Hamburg, Germany

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
Upper urinary tract tumor: Let's manage it endoscopically!

Poster Session 78

Monday, 27 March
14:00 - 15:30

Location: Room Munich, North Hall (Level 1)

Chairs: A. Breda, Barcelona (ES), M. Rink, Hamburg (DE), O. Traxer, Paris (FR)

Aims and objectives of this presentation
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.

*1031
Assessment of clinical screening criteria and point of care testing for lynch syndrome-associated upper tract urothelial cancer
By: Metcalfe M.¹, Rao P.², Mork M.³, Xiao L.⁴, Broaddus R.², Matin S.¹
Institutes: ¹University of Texas MD Anderson Cancer Center, Dept. of Urology, Houston, United States of America, ²University of Texas MD Anderson Cancer Center, Dept. of Pathology, Houston, United States of America, ³University of Texas MD Anderson Cancer Center, Dept. of Genetics, Houston, United States of America, ⁴University of Texas MD Anderson Cancer Center, Dept. of Statistics, Houston, United States of America

*1032
Ureteroscopic biopsy of upper tract urothelial carcinoma is associated with increased intravesical recurrences on follow-up: A multi institutional Suture group study
By: Anbarasan T.¹, Shaikh N.², Mcluckie S.¹, Shams-Uddin A.³, Alcorn J.⁴, Jain S.⁵, Biyani C.S.⁴, Nabi G.¹
Institutes: ¹University of Dundee, School of Medicine, Academic Section of Urology, Division of Cancer Research, Dundee, United Kingdom, ²United Lincolnshire NHS Trust, Pilgrim Hospital, Dept. of Urology, Lincolnshire, United Kingdom, ³Imperial College Healthcare NHS Trust, Charing Cross Hospital, Dept. of Urology, London, United Kingdom, ⁴Mid Yorkshire Hospitals NHS Trust, Dept. of Urology, Wakefield, United Kingdom, ⁵Leeds Teaching Hospitals NHS Trust, Dept. of Urology, Leeds, United Kingdom

*1034
Is ureteroscopy essential prior to nephroureterectomy for upper tract transitional cell carcinoma?
By: Veeratterapillay R.¹, Thompson E.², Shakoor R.², Gandiya T.², Rogers A.², Thomas D.²
Institutes: ¹Freeman Hospital, Dept. of Urology, Newcastle Upon Tyne, United Kingdom, ²Freeman Hospital, Dept. of Urology, Newcastle Upon Tyne, Unknown

Scientific Programme

EAU London 2017
**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

**1038**
**CT urography understages, and URS with biopsy undergrades upper tract urothelial carcinoma in the preoperative evaluation before nephroureterectomy**
By: Almas B., Loe A., Reisæter L., Halvorsen O.J., Beisland C.
Institutes: Haukeland University Hospital, Dept. of Urology, Bergen, Norway, Haukeland University Hospital, Dept. of Radiology, Bergen, Norway, Haukeland 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., Reshetnyak O., Kabha M., Chang C.T., Sophie B., Diego M., Mabjeesh N., Matzkin H., Liao J., Sofer M.
Institutes: Tel Aviv Sourasky Medical Center, Tel-Aviv University, Dept. of Urology, Tel-Aviv, Israel, Stanford Health Care, Stanford University, Dept. of Urology, Stanford, United States of America, Tel 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., Yen R.F., Huang C.Y., Tsai Y.C., Pu Y.S.
Institutes: National Taiwan University Hospital, Dept. of Nuclear Medicine, Taipei, Taiwan, National Taiwan University Hospital, Dept. of Urology, Taipei, Taiwan, National 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., Kotsar A., Tammela T., Murtola T.
Institutes: Tampere University Hospital, Dept. of Urology, Tampere, Finland, University of Tampere, School of Medicine, Tampere, Finland, Tarto University Hospital, Dept. of Urology, Tarto, Estonia
Aims and objectives of this presentation
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.

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<th>Time</th>
<th>Session</th>
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<tr>
<td>14:30 - 17:30</td>
<td>Laparoscopic cystectomy in males (video based teaching)</td>
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<td>14:30 - 17:30</td>
<td>Conventional laparoscopy</td>
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<td>R.F. Van Velthoven, Brussels (BE)</td>
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<td>14:30 - 17:30</td>
<td>Robot-assisted technique with nerve sparing technique</td>
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<td>N.P. Wiklund, Stockholm (SE)</td>
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<tr>
<td>14:30 - 17:30</td>
<td>Laparoscopic cystectomy in Females (video based teaching)</td>
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<td>14:30 - 17:30</td>
<td>Conventional cystectomy</td>
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<td>J. Rassweiler, Heilbronn (DE)</td>
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<td>14:30 - 17:30</td>
<td>Robot-assisted cystectomy with organ preservation</td>
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<td>N.P. Wiklund, Stockholm (SE)</td>
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<td>14:30 - 17:30</td>
<td>Laparoscopic lymph node dissection (video based teaching)</td>
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<td>J. Rassweiler, Heilbronn (DE)</td>
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<tr>
<td>14:30 - 17:30</td>
<td>Laparoscopic urinary diversion (video based teaching)</td>
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<td>14:30 - 17:30</td>
<td>Intracorporeal urinary diversion</td>
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<td>R.F. Van Velthoven, Brussels (BE)</td>
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<td>14:30 - 17:30</td>
<td>Intracorporeal urinary diversion</td>
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<td>N.P. Wiklund, Stockholm (SE)</td>
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<td>14:30 - 17:30</td>
<td>Extracorporeal urinary diversion</td>
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<td>J. Rassweiler, Heilbronn (DE)</td>
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<tr>
<td>14:30 - 17:30</td>
<td>Controversies in laparoscopic and robotic cystectomy challenge the expert</td>
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<td>14:30 - 17:30</td>
<td>Oncological outcomes in laparoscopic cystectomy - Challenger</td>
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<td>14:30 - 17:30</td>
<td>Oncological outcomes in laparoscopic cystectomy - Pro</td>
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<tr>
<td>14:30 - 17:30</td>
<td>Complications and functional outcomes in laparoscopic cystectomy - challenger</td>
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<tr>
<td>14:30 - 17:30</td>
<td>Complications and functional outcomes in laparoscopic cystectomy - Pro</td>
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</tbody>
</table>
Robot renal surgery
ESU Course 47

**Location:** Room 11, Capital suite (level 3)

**Chair:** A. Mottrie, Aalst (BE)

**Aims and objectives of this presentation**
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?

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<th>Time</th>
<th>Session</th>
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<tr>
<td>14:30 - 17:30</td>
<td><strong>Introduction</strong>&lt;br&gt;A. Mottrie, Aalst (BE)</td>
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<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>
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<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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<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>
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<td>14:30 - 17:30</td>
<td><strong>Partial nephrectomy I: Step 1: 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>
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<td>14:30 - 17:30</td>
<td><strong>Partial nephrectomy II: Step IV: Different tumourresection techniques</strong>&lt;br&gt;A. Mottrie, Aalst (BE)</td>
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<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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<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>
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<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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Aims and objectives of this presentation
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
Aims and objectives of this presentation
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 kastration-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

**Location:** Room 17, Capital suite (level 3)

**Chair:** F.M.E. Wagenlehner, Giessen (DE)

**Aims and objectives of this presentation**
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

**Scientific Programme**

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)
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 presentation
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)
How will immunotherapy change the multidisciplinary management of urothelial bladder cancer

ESU Course 51

**Location:**
Room 16, Capital suite (level 3)

**Chairs:**
A. Necchi, Milan (IT)
J.P. Bedke, Tübingen (DE)

**Aims and objectives of this presentation**
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 demontrated, 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.

**Scientific Programme**

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

### Monday, 27 March
**15:45 - 17:15**

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

**Chairs:** C. Imbimbo, Naples (IT)  
F. Van Der Aa, Leuven (BE)

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**Aims and objectives of this presentation**

Reconstructive surgery is one of the most complex surgeries. Every case is a real challenge because it is not always easy to predict clinical situation. 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.

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**V82**

**Redo bulbo-prostatic anastomotic (BPA) urethroplasty for recurrent pelvic fracture-related urethral strictures**

*By:* Fes Ascanio E.¹, Bugeja S.², Ivaz S.³, Frost A.³, Campos F.⁴, Andrich D.³, Mundy A.³

*Institutes:* Hospital Can Misses, Dept. of Urology, Eivissa, Spain, ²St Luke’s Hospital, Dept. of Urology, San Luka, Malta, ³University College London Hospitals, Dept. of Urology, London, United Kingdom, ⁴Marques De Valdecilla University Hospital, Dept. of Urology, Santander, Spain

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**V83**

**Urethral centralisation after partial penectomy**

*By:* Parnham A.¹, Albersen M.², Kranz J.³, Sahdev V.¹, Ziada M.¹, Nigam R.¹, Muneer A.¹, Malone P.¹

*Institutes:* University College London Hospitals, Dept. of Andrology, London, United Kingdom, ²University Hospitals Leuven, Dept. of Urology, Leuven, Belgium, ³St. Antonius Hospital, Dept. of Urology, Eschweiler, Germany

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**V84**

**Detachment of corpora cavernosa during anastomotic bulboprostatic reconstruction after pelvic trauma**

*By:* Martínez-Piñeiro L.¹, Ríos E.², Sánchez J.², Diez J.², López-Tello J², Alvarez M.¹

*Institutes:* La Paz University Hospital, Dept. of Urology, Madrid, Spain, ²Infanta Sofia University Hospital, Dept. of Urology, Madrid, Spain

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**V87**

**Suture-free sealing of tunical defect with collagen fleece after partial plaque excision in Peyronie’s disease: Long-term outcomes of the sealing technique**

*By:* Hatzichristodoulou G.¹, Fiechtner S.¹, Gschwend J.³, Kübler H.³, Lahme S.²

*Institutes:* Technical University of Munich, Dept. of Urology, Munich, Germany, ²Siloah St. Trudpert Hospital, Dept. of Urology, Pforzheim, Germany

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**V88**

**Corporoplasty using bovine pericardium graft in Peyronie’s disease**

*By:* 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, Rodriguez-Patrón R.¹, Burgos-Revilla F.J.¹

*Institutes:* Hospital Universitario Ramón y Cajal, Dept. of Urology, Madrid, Spain, ²Hospital Universitario Ramón y Cajal and Centro de Urología Médico-Quirúrgico CUMQ-LYX, Dept. of Urology, Madrid, Spain, ³Centro de Urología Médico-Quirúrgico CUMQ-LYX, Madrid, Spain

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**V89**

**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)

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**Aims and objectives of this presentation**

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.

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1. **1044**

MIC and Trifecta in robot-assisted partial nephrectomy in highly complex tumors – similar results in comparison with tumors of low and intermediate complexity

**By:** Harke N.N.¹, Wagner C.², Schiefelbein F.³, Trabs G.³, Roosen A.⁴, Ubrig B.⁴, Schoen G.³, Witt J.²

**Institutes:** University of Rostock, Dept. of Urology, Rostock, Germany, ²St. Antonius Hospital, Prostate Center Northwest, Dept. of Urology, Pediatric Urology and Urologic Oncology, Gronau, Germany, ³Missionsaerztliche Klinik, Dept. of Urology, Wuerzburg, Germany, ⁴Augusta-Kranken-Anstalt, Dept. of Urology, Bochum, Germany

2. **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, Serni S.¹, Carini M.¹, Rasponlini M.R.², Minervini A.¹

**Institutes:** ¹Aou Careggi, Dept. of Urology, Florence, Italy, ²Aou Careggi, Dept. of Pathology, Florence, Italy

3. **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

4. **1048**

Robotic-assisted partial nephrectomy for hilar and non-hilar tumours: Perioperative outcomes

**By:** Lu S-Y.¹, Chung H-J.², Huang Y-H.², Lin T-P.², Lin A.², Chen K-K.²

**Institutes:** ¹Dept. of Urology, Taipei city, Taiwan, ²Taipei Veterans General Hospital, Dept. of Urology, Taipei city, Taiwan

5. **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

6. **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.⁶, Brichart N.⁷, Beauval J.B.³, Beaix A.³, 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, ⁶CHU Orléans, Dept. of Urology, Orléans, France, ⁷CHU Dijon, Dept. of Urology, Dijon, France, ⁸CHR Orléans, Dept. of Urology, Orléans, France, ⁹CHU Dijon, Dept. of Urology, Dijon, France.
Robot-assisted partial nephrectomy for complex cases (Padua score ≥ 10): Results from a multicenter experience at three high-volume centers

By: Lughezzani 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

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, Langenhuijsen 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 and Udine, 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, Michigan, United States of America, 7Peter MacCallum Cancer Centre, Epworth Healthcare, University of Melbourne, Division of Cancer Surgery, Melbourne, Australia, 8University HospitalsLeuven, Dept. of Urology and Radiation Oncology, Leuven, Belgium, 9University of Missouri, Dept. of Surgery-Urology Division, Columbia, Mo, United States of America, 10Memorial Sloan Kettering Cancer Center, Urology Service, New York, Ny, United States of America, 11University of Padua, 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, 12Onze 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 School, Dept. of Urology, Nanjing, China, 2Nanjing Medical University, School of Public Health, Nanjing, China

17:00 - 17:07

Summary

To be confirmed
Improving prostate cancer staging and outcomes after radical prostatectomy

Poster Session 80

**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 presentation**
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.

### Scientific Programme

#### *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.², 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.¹, 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.², 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

#### *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.
**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, Ariyama Y.³, Ohyama C.¹
**Institutes:** ¹Hiroshima University Graduate School of Medicine, Dept. of Urology, Hiroshima, 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 Tubingen, Dept. of Urology, Tubingen, 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, Yeoungnam 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., Vegt 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 presentation
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.

<table>
<thead>
<tr>
<th>Session</th>
<th>Title</th>
<th>Authors</th>
<th>Institutes</th>
</tr>
</thead>
<tbody>
<tr>
<td>1070</td>
<td>The BAUS radical prostatectomy audit 2014/2015 – an update on current practice and outcomes by centre and surgeon case volume</td>
<td>Khadhouri S. 1, Miller C. 1, McNeill A. 2, Hounsome L. 3, Fowler S. 4, McGrath J. 1</td>
<td>1Royal 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</td>
</tr>
<tr>
<td>1071</td>
<td>Efficacy of local treatment in prostate cancer patients with clinically pelvic lymph node-positive disease at initial diagnosis</td>
<td>Seisen T. 1, Vetterlein M. 1, Karabon P. 1, Jindal T. 1, Sood A. 1, Nocera L. 1, Nguyen P. 2, Choueiri T. 3, Trinh Q-D. 4, Menon M. 1, Abdollah F. 1</td>
<td>1Henri Ford Hospital, Dept. of Urology, Detroit, United States of America, 2Brigham and Women’s 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 Surgery, Boston, United States of America</td>
</tr>
<tr>
<td>1072</td>
<td>Oncological and functional outcomes of laparoscopic versus robot-assisted radical prostatectomy: Five years results of a prospective randomised controlled trial</td>
<td>Porpiglia F. 1, Fiori C. 1, Bertolo R. 1, Menfredi M. 1, Mele F. 1, Garrou D. 1, Cattaneo G. 1, De Luca S. 1, Passera R. 2, Scarpa R.M. 1</td>
<td>1San Luigi Hospital, Dept. of Urology, Turin, Italy, 2San Giovanni Battista Hospital, Dept. of Nuclear Medicine, Turin, Italy</td>
</tr>
<tr>
<td>1073</td>
<td>Contemporary extended pelvic lymph node dissection for prostate cancer in the UK – an analysis of national practice</td>
<td>Calleja E., Fowler S., McGrath J., Sooriakumaran P., Aning J.</td>
<td>BAUS Section of Oncology, British Association of Urological Surgeons, London, United Kingdom</td>
</tr>
<tr>
<td>1075</td>
<td>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</td>
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</tr>
</tbody>
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**Scientific Programme**

EAU London 2017 398
The CPC risk calculator app: A validated tool to predict recurrence after radical prostatectomy.


Institutes: Vita-Salute University San Raffaele, Dept. of Urology, Milan, Italy, 2Mayo Clinic, Dep. of Urology, Rochester, United States of America, 3Gustave Roussy Institute, Dept of Radiation Oncology, Villejuif, France, 4IRCCS Ospedale San Raffaele, Dept. of Radiotherapy, Milan, Italy, 5University Hospital Ulm, Dept. of Radiation Oncology, Ulm, Germany, 6Medical University of Vienna, Dep. of Urology, Vienna, Austria, 7Medical University of Vienna,Dept. of Radiation Oncology, Vienna, Austria, 8University Hospitals Leuven, Dept. of Urology, Leuven, Belgium, 9University Hospitals Leuven, Dept. of Radiotherapy, Leuven, Belgium, 10Ghent University Hospital, Dept. of Radiotherapy, Ghent, Belgium

Obesity was associated with improved metastases-free survival after surgery in 13,667 prostate cancer patients

By: Tennstedt P. 1, Salomon G. 1, Tilki D. 1, Budäus L. 1, Pompe R. 1, Leyh-Bannurah S. 2, Haese A. 1, Heinzer H. 1, Huland H. 1, Graeven M. 1, Schimmann J. 1

Institutes: University Medical Center Eppendorf, Department of Urology, Hamburg, Germany, 2University Medical Center Eppendorf, Department of Urology, Hamburg, Germany, 3Academic 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, 2Pasini Hospital, Dept. of Radiotherapy, Aosta, Italy, 3San Giovanni Battista Hospital, Dept. of Statistics, Turin, Italy, 4Institut Mutualiste Montsouris, Dept. of Urology, Paris, France, 5Guy’s Hospital, Dept. of Urology, London, United Kingdom, 6North Bristol NHS Foundation Trust, Dept. of Urology, Bristol, United Kingdom, 7Fundació Puigvert, Dept. of Urology, Barcelona, Spain, 8Leuven University Hospitals, Dept. of Urology, Leuven, Belgium, 9Clinique Saint Augustin, Dept. of Urology, Bordeaux, France, 10CHU Mondor, Dept. of Urology, Créteil, France, 11Pitié Salpêtrière Hospital- University Paris 6, Dept. of Urology, Paris, France, 12Institut Jules Bordet, Université Libre De Bruxelles, Dept. of Urology, Bruxelles, Belgium, 13Mayo Clinic, Dept. of Urology, Rochester, Mn, United States of America, 14OLV Hospital, Dept. of Urology, Aalst, Belgium, 15Vanderbilt University, Medical Center North, Dept. of Urology, Nashville, Tnt, United States of America, 16Netherlands Cancer Institute, Dept. of Urology, Amsterdam, The Netherlands, 17Martini 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, Clinical Effectiveness Unit, London, United Kingdom

Functional results of PROPENLAP: Prospective multicentric study comparing open and mini-
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.¹⁰, Irani J.¹¹, Zerbib M.¹², Vaessen C.¹³, Dubreuil P.¹⁴, Lebeau A.¹⁵, Allory Y.¹⁶, Abbou C-C.¹


*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 Medico 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.², Montorsi F.², Briganti A.²
Institutes: ¹Vita-Salute University San Raffaele, Dept. of Urology, Milan, Italy, ²Humanitas 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 presentation**

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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**Non-guideline concordant treatment of testicular cancer**

*1084

**By:** Paffenholz P., Pfister D., Heidenreich A.

**Institutes:** University Hospital Cologne, Dept. of Urology, Cologne, Germany

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**Testicular cancer in patients with learning disabilities in England from 2001-2015: A national cohort study**

*1085

**By:** Afshar M.2, Jackson-Spence F.1, De-Santis M.3, Tanner J-R.4, 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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**Reliability of frozen section examination in a large cohort of testicular masses: What did we learn?**

*1086

**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 Pathology, Milan, Italy, 4European Institute of Oncology and University of Milan, Dept. of Urology, Milan, Italy

---

**Diagnostic value of frozen section examination (FSE) during inguinal exploration in patients with inconclusive testicular lesions**

*1087

**By:** Fankhauser C.1, Beyer J.2, Roth L.2, Sulser T.1, Bode K-P.3, 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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**Primary retroperitoneal lymph node dissection (RPLND) in Stage II A/B seminoma patients without adjuvant treatment: A phase II trial (PRIMETEST)**

*1090

**By:** Lusch A., Gerbaulet L., Winter C., Albers P.
Surgical resection of residual tumours after adjuvant chemotherapy of germ cell (GC) tumour
By: Gonzalez F.¹, Bossavy J-P.¹, Otal P.², Quintyn-Rant M-L.³, Roumigué M.⁴, Chevreau C.⁵, Malavaud B.⁶
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 tumours: Surgical management and outcomes
By: Nini A.¹, Konieczny M.², Winter C.³, Lusch A.⁴, Krauspe R.⁵, Albers P.⁶
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, Matthis C.³, Wagner W.³, Ludwig T.¹, Meyer C.¹, Soave A.¹, Dulz S.¹, Asselborn N.³, Oechsle K.³, Bokemeyer C.³, Becker A.¹, Fisch M.¹, Hartmann M.¹, Chun F.¹, Kluth L.A.¹
Institutes: University 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
By: Necchi A.¹, Rosti G.², Badoglio M.³, Giannatempo P.⁴, Secondino S.², Lanza F.⁵, Pedrazzoli P.²
Institutes: Fondazione IRCCS – Istituto Nazionale Dei Tumori, Dept. of Medical Oncology, Milan, Italy, ²Fondazione IRCCS Policlinico San Matteo, Dept. of Medical Oncology, Pavia, Italy, ³EBMT, EBMT Study Offices, Paris, France, ¹Fondazione IRCCS Istituto Nazionale Dei Tumori, Dept. of Medical Oncology, Milano, Italy, ⁴Hospital of Ravenna, Dept. of Hematology, Ravenna, Italy

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.¹, Raggi D.¹, Calareso G.², Togliardi E.², Crippa F.², Pennati M.³, Zaffaroni N.³, Perrone F.², Colecchia M.¹, Nicolai N.³, Mariani L.², Salvioni R.²
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 Radiology, Milan, Italy, ⁴Fondazione IRCCS – Istituto Nazionale Dei Tumori, Pharmacology Unit, Milan, Italy, ⁵Fondazione IRCCS – Istituto Nazionale Dei Tumori, Nuclear Medicine – PET Unit, Milan, Italy, ⁶Fondazione IRCCS – Istituto Nazionale Dei Tumori, Dept. of Experimental Oncology and Molecular Medicine, Milan, Italy, ⁷Fondazione IRCCS – Istituto Nazionale Dei Tumori, Dept. of Pathology, Milan, Italy, ⁸Fondazione IRCCS – Istituto Nazionale Dei Tumori, Dept. of Urology, Milan, Italy
Aims and objectives of this presentation
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.

*1098

Dynamic imaging of urine flow at bladder neck during voiding by wireless capsule endoscopes in vivo
By: Yamamoto T.1, Mizuno H.1, Soh S.2, Funanshi Y.1, Matsukawa Y.3, Nakamura M.3, Gotoh M.1
Institutes: 1Nagoya University Graduate School of Medicine, Dept. of Urology, Nagoya, Japan, 2Dokkyo Medical University, Dept. of Urology, Koshigaya, Japan, 3Nagoya University Graduate School of Medicine, Dept. of Gastroenterology, Nagoya, Japan

*1099

Wireless micro-robots for endoscopic applications in urology
By: Adams F.1, Qiu T.2, Mark A.2, Melde K.2, Palagi S.2, Miernik A.1, Fischer P.2
Institutes: 1University Hospital Freiburg, Dept. of Urology, Freiburg, Germany, 2Max Planck Institute For Intelligent Systems, Micro Nano and Molecular Systems, Stuttgart, Germany

*1100

Measures of pelvic floor strength by age and parity using the Elvie device
By: Coggins J.1, Cartwright R.2, Bergmann J.3
Institutes: 1Chiaro Technology Ltd., Data Science Department, London, United Kingdom, 2Imperial College London, Faculty of Medicine, School of Public Health, London, United Kingdom, 3University of Oxford, Institute of Biomedical Engineering, Oxford, United Kingdom

*1101

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
By: Fu Q., Zhou S.
Institutes: Shanghai Sixth People's Hospital, Dept. of Urology, Shanghai, China

*1102

Modifying the surface chemistry of biomaterials designed for surgical treatment of stress urinary incontinence to reduce bacterial adhesion
By: Roman S.1, Mangir N.1, Chapple C.2, Mcarthur S.L.3, Macneil S.1
Institutes: 1University of Sheffield, Dept. of Material Science and Engineering, Sheffield, United Kingdom, 2Royal Hallamshire Hospital, Dept. of Urology, Sheffield, United Kingdom, 3Swinburne University of Thechnology, Biointerface Engineering Group and Polymer Nanointerface Engineering Group, Melbourne, Australia

*1103

Surface acoustic waves prevent bacterial colonization in indwelling urinary catheters
By: Rosenblum J.1, Markowitz S.2, Goldstein M.3
Institutes: 1Shaarei Zedek Medical Center, Dept. of Urology, Bet Shemesh, Israel, 2Shaarei Zedek Medical Center, Dept of Urology, Bet Shemesh, Israel, 3Private Practice, Dept. of Urology, Bet
**1104**

**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:** Unicastelo, Dept. of Biomedical Engineering, São Paulo, Brazil

**1105**

**Analysis of errors in 3D printing phantoms for partial nephrectomy**
**Institutes:** University of Ulsan College of Medicine, Dept. of Health Screening and Promotion Center, Seoul, South Korea, University of Ulsan College of Medicine, Dept. of Biomedical Engineering Research Center, Seoul, South Korea, University of Ulsan College of Medicine, Dept. of Urology, Seoul, South Korea

**1106**

**Feasibility and safety of augmented reality-assisted urological surgery**
By: **Rodríguez Socarrás M.E., Tortolero Blanco L., Salem J., Tsaur I., Gomez-Rivas J., Barret E., Borgmann H.**
**Institutes:** University Hospital Alvaro Cunqueiro, Dept. of Urology, Vigo, Spain, University Hospital Vivaloplo, Dept. of Urology, Elche, Spain, University Hospital Cologne, Dept. of Urology, Cologne, Germany, University Hospital Mainz, Dept. of Urology, Mainz, Germany, University Hospital La Paz, Dept. of Urology, Madrid, Spain, Institut Montsouris, Université Paris-Descartes, Dept. of Urology, Paris, France

**1107**

**Video analysis of skill and technique (VAST): Machine learning to assess the technical skill of surgeons performing robotic prostatectomy**
By: **Ghani K., Liu Y., Law H., He D., Miller D., Montie J., Deng J.**
**Institutes:** University of Michigan, Dept. of Urology, Ann Arbor, United States of America, University of Michigan, Dept. of Computer Science & Engineering, Ann Arbor, United States of America

**1108**

**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

**1109**

**Folic acid-conjugated AuAg nanoparticles combined surface enhanced Raman spectroscopy for rapid detection of bladder cancers in urine**
By: **Chuang T.Y., Chiu Y.C., Yang Y.T., Lin C.H., Liao M.Y., Huang C.C.**
**Institutes:** Taipei City Hospital, Zhongxiao Branch, Dept. of Urology, Taipei, Taiwan, National Pingtung University, Dept. of Applied Chemistry, Pingtung, Taiwan, Center For Micro/Nano Science and Technology and Advanced Optoelectronic Technology Center, National, Dept. of Photonics, Tainan, Taiwan, National Cheng Kung University, Medical Laboratory Science and Biotechnology, Tainan, Taiwan

**16:56 - 17:03**

**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 presentation**
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: ¹Hirslanden 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.², Chen H-H.², Lin H-H.², Tsai Y-T.²
Institutes: ¹National Yang-Ming University Taipei Veterans General Hospital, Dept. of Urology and Physiology, Taipei, Taiwan, ²National Yang-Ming University, Dept. of Physiology, 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, Spilotros M.³, Capece M.³, Parnham A.³, Garaffa G.³, Christopher N.³, Muneer A.³, Cellek S.¹, Ralph D.³
Institutes: ¹Anglia 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.³, Trombetta C.¹
Institutes: ¹Azienda 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

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: CHA 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: Hospital 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: Cardinal 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: Université 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, Simsek F.¹, Akbal C.¹, Sener G.⁵
Institutes: Marmara 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: Hospital 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

Summary
# 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 presentation**
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.

<table>
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<th><strong>Poster</strong></th>
<th><strong>Title</strong></th>
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<tr>
<td><strong>1122</strong></td>
<td>Prospective simultaneous comparison of fluid filled versus air filled pressure systems during clinical cystometry</td>
<td>By: Rosier P.</td>
<td>UMC Utrecht, Dept. of Urology, Utrecht, The Netherlands</td>
</tr>
<tr>
<td><strong>1123</strong></td>
<td>Comparing a novel hand held device (Peritron+) to standard urodynamics in measuring intravesical pressure</td>
<td>By: Radomski S.¹, Ruzhynsky V.¹, Bitzos S.², Goping I.²</td>
<td>Toronto Western Hospital, University Health Network, Dept. of Urology, Toronto, Canada, Laborie Medical Technologies Canada ULC, Clinical Research, Mississauga, Canada</td>
</tr>
<tr>
<td><strong>1126</strong></td>
<td>Validation of the TOTO Flowsky® uroflowmetry device</td>
<td>By: Tsang W.C.¹, Raman L.², Wai Z.², Guo H.², Consigliere D.², Chiong E.²</td>
<td>NUHS National University Health System, Dept. of Urology, Singapore, Singapore, National University Health System, Dept. of Urology, Singapore, Singapore</td>
</tr>
<tr>
<td><strong>1127</strong></td>
<td>Routine enema before urodynamics has no impact on the quality of abdominal pressure curves: Results of a prospective controlled study</td>
<td>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</td>
<td>CHU Rennes, Dept. of Urology, Rennes, France, CHU Rennes, Dept. of Physical Medicine and Rehabilitation, Rennes, France, CHU Rennes, Dept. of Gastrology, Rennes, France</td>
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<tr>
<td><strong>1128</strong></td>
<td>Brain areas involved in urinary urge sensation using 7 Tesla functional magnetic resonance imaging of the human brain</td>
<td>By: Rahnama'i M.S.¹, Van Den Hurk J.², Drossaerts J.³, Koeveringe G.³</td>
<td>Maastricht UMC+, Dept. Urology, Maastricht, The Netherlands, Scannexus, Scannexus, Maastricht, The Netherlands, Maastricht UMC+, Dept. of Urology, Maastricht, The Netherlands</td>
</tr>
<tr>
<td><strong>1129</strong></td>
<td>Concordance of urodynamic definitions of female bladder outlet obstruction</td>
<td>By: Solomon E, Yasmin H, Duffy M, Malde S, Ockrim J, Greenwell T.</td>
<td>University College London Hospital, Dept. of Urology, London, United Kingdom</td>
</tr>
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**1130**

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

**1131**

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

**1133**

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.⁵, Manunta A.¹  
**Institutes:** ¹CHU Rennes, Dept. of Urology, Rennes, France, ²CHU Rennes, Dept. of Gastrology, Rennes, France, ³CHU Rennes, Referral Center For Spina Bifida, Rennes, France, ⁴CHU Rennes, Dept. of Physical Medicine and Rehabilitation, Rennes, France, ⁵CHU Toulouse, Dept. of Urology, Toulouse, France

**1134**

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, Roma, Italy, ²Fondazione Santa Lucia, Neuro-Urology, Roma, Italy

**1135**

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:** University 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

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 presentation

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, Apaydin S.²
Institutes: ¹Bakirkoy Dr. Sadi Konuk Training and Research Hospital, Dept. of Urology, Istanbul, Turkey, ²Bakirkoy Dr. Sadi Konuk Training and Research Hospital, Dept. of Nephrology, Istanbul, Turkey, ³Adana Numune Training and Research Hospital, Dept. of Urology, Adana, Turkey

*1137 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, ²CHRU De Tours - Hôpital Bretonneau, Nephrology, Tours, France

*1139 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, Binhazzaa M.¹, Rischmann P.¹, Soulié M.¹, Kamar N.², Gamé X.¹, Sallusto F.¹, Doumerc N.¹
Institutes: ¹CHU Toulouse, Dept. of Urology, Toulouse, France, ²CHU Toulouse, Dept. of Nephrology, Toulouse, France

*1140 Renal graft implantation on vascular prothesis: A large multicenter study
By: Nedelec M., Glemain P., Chowaniec Y., Geudry P., Robine E., Madec F.X., Lefevre 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.¹, Yandza T.¹, Albano L.², Jourdan J.¹, Quintens H.¹, Tibi B.¹, Durand M.¹, Amiel J.¹, Chevallier D.¹
Kidney transplantation with grafts from old donors: Is there a difference in terms of complications and survival outcomes?

By: Medina Polo J.¹, Sopeña-Sutil R.¹, Benítez-Sala R.¹, De La Rosa-Kehrmann F.¹, Pamplona-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: University Hospital of Nice, Dept. of Urology, Nice, France, Hospital Universitario 12 de Octubre, Dept. of Urology, Madrid, Spain

Does nighttime renal graft increases the risk of post-operative complications?


Institutes: University Hospital of Nice, Dept. of Urology, Nice, France

Comparison of DCE-MRI renography, SPECT renography and endogenous creatinine clearance rate in kidney transplant recipients

By: Jun T., Ruoyun T., Zhijian H., Xiaobing J., Wani Z., Yudong Z., Min G.

Institutes: The First Affiliated Hospital of Nanjing Medical University, Dept. of Urology, Nanjing, China
Functional aspects of reconstructive surgery

**Poster Session 87**

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

**Chairs:**
- H. Abol-Enein, Mansoura (EG)
- E. Chartier-Kastler, Paris (FR)
- M. Hohenfellner, Heidelberg (DE)

**Aims and objectives of this presentation**
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

By: Von Landenberg N.¹, Hanske J.², Berg S.², Schmidt J.², Brock M.², Palisaar J.², Von Bodman C.², Roghmann F.², Noldus J.²

Institutes: Ruhr-University Bochum, Marien-Hospital Herne and Brigham and Women's Hospital, Harvard Medical Scho, Dept. of Urology, Herne, Boston, Germany, 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.¹, Altobelli E.¹, Mastroianni R.¹, Giacobbe A.², Castelli E.², Papalia R.¹

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.F.¹, Ewald S.², Neisius A.², Thüroff J.³, Stein R.³

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.¹, Anheuser P.², Rausch S.², Fechner G.⁴, Braun M.⁴, Müller S.⁶, Steffens J.¹, Käble T.⁷

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, Fachartzzentrum 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
**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, ²Universitätsmedizin Mainz, Klinik für Urologie, Mainz, Germany, ³UMM Universitätsmedizin Mannheim, Zentrum Für Kinder- Und Jugendurologie, Mannheim, Germany

**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, ²University College London Hospital, Dept. of Obstetrics and Gynaecology, London, United Kingdom

**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

**A step toward scarless surgery: Robot-assisted laparoendoscopic single-site versus mini-laparoscopic pyeloplasty**
Institutes: San Luigi Hospital, Dept. of Urology, Turin, Italy

**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

**Associated video presentation**
The novel technique of pelvic organ prolapse treatment: Apical sling and subfascial colporrhaphy
D. Shkarupa, St. Petersburg (RU)

**Robot assisted repair of a vesicovaginal fistula with a peritoneal flap**
By: Papadoukakis S., Poth S., Horstmann M.
Institutes: MKH St. Josefshospital, Dept. of Urology, Krefeld, Germany
Associated video presentation

**Summary**
M. Hohenfellner, Heidelberg (DE)
Upper urinary tract tumor: Outcomes after radical surgery & peri-operative chemotherapy
Poster Session 88

Location: Room Munich, North Hall (Level 1)

Chairs: To be confirmed
To be confirmed
E. Xylinas, Paris (FR)

Aims and objectives of this presentation
To date, however, 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 peri-operative 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.

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.1, Bellmunt J.2, Roupé M.3, Leow J.1, Lipsitz S.1, Vetterlein M.3, Preston M.1, Hanna N.1, Kibel A.1, Rouprêt M.3
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

Integrated comprehensive genomic characterization of upper tract urothelial carcinoma (UTUC)
By: Moss T.2, Qi Y.3, Xi L.5, Peng B.3, Mosqueda M.5, Guo C.6, Ittmann M.4, Wheeler D.5, Matin S.7, 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, 4Baylor College of Medicine, 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 Pathology, Houston, United States of America, 7MD Anderson Cancer Center, Dept. of Urology, Houston, United States of America

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.
**1161**

**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.², Li D.³, Zhou L.-Q.¹, He Z.-S.¹, Jin J.¹, Han W.-K.¹

**Institutes:** Peking University First Hospital, Dept. of Urology, Beijing, China, Peking University First Hospital, Dept. of Geriatrics, Beijing, China

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**1162**

**Comparing oncological outcomes of laparoscopic versus open nephroureterectomy for the treatment of upper tract urothelial carcinoma: A propensity match analyses**

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, Czech A.⁷, Bianchi M.⁸, Briganti A.⁹, Romeo G.¹⁰, Simone G.¹⁰, Gallucci M.¹⁰, Matsumoto K.¹¹, Karakiewicz P.¹², Shariat S.¹³

**Institutes:** Medical University of Vienna, Dept. of Urology, Vienna, Austria, Assistance-Publique Hôpitaux De Paris, Dept. of Urology, Paris, France, Hôpital Privé De La Louvière, Générale De Santé, Dept. of Urology, Lille, France, Hospital Mondor, Dept. of Urology, Creteil, France, CHU Rennes, Dept. of Urology, Rennes, France, Technische Universität Dresden, Dept. of Urology, Dresden, Germany, Jagiellonian University, Dept. of Urology, Krakow, Poland, Urological Research Institute, Vita-Salute University, San Raffaele Scientific, Dept. of Urology, Milan, Italy, Urological Research Institute, Vita-Salute University, San Raffaele Scientific, Dept. of Urology, Milan, Italy, Regina Elena National Cancer Institute, Dept. of Urology, Rome, Italy, Kitasato University School of Medicine, Dept. of Urology, Kanagawa, Japan, University of Montreal, Dept. of Urology, Montreal, Canada

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**1164**

**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.¹⁰, Gallucci M.¹⁰, Romeo G.¹⁰, Matsumoto K.¹¹, Karakiewicz P.¹², Shariat S.¹³

**Institutes:** Medical University of Vienna, Dept. of Urology, Vienna, Austria, Assistance-Publique Hôpitaux De Paris, Dept. of Urology, Paris, France, Hôpital Privé De La Louvière, Générale De Santé, Dept. of Urology, Lille, France, Hospital Mondor, Dept. of Urology, Creteil, France, CHU Rennes, Dept. of Urology, Rennes, France, Technische Universität Dresden, Dept. of Urology, Dresden, Germany, Jagiellonian University, Dept. of Urology, Krakow, Poland, Urological Research Institute, Vita-Salute University, San Raffaele Scientific, Dept. of Urology, Milan, Italy, Regina Elena National Cancer Institute, Dept. of Urology, Rome, Italy, Kitasato University School of Medicine, Dept. of Urology, Kanagawa, Japan, University of Montreal, Dept. of Urology, Montreal, Canada

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**1165**

**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:** Hirosaki University Graduate School of Medicine, Dept. of Urology, Hirosaki, Japan

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**1166**

**Significance of butyrylcholinesterase before chemotherapy as an independent predictor of overall survival in patients with advanced upper-tract urothelial cancer**


**Institutes:** Hirosaki University Graduate School of Medicine, Dept. of Urology, Hirosaki, Japan

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**1167**

**1000 retroperitoneoscopic procedures of the upper urinary tract: analysis of complications**


**Institutes:** Chu Henri Mondor, Dept. of Urology, Créteil, France

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**1168**

**Comparative effectiveness of different surgical approaches for nephroureterectomy 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

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.1, Matsumoto K.1, Hirayama T.1, Koguchii D.2, Murakami Y.3, Matsuda D.4, Okuno N.5, Utsunomiya T.2, Taoka Y.3, Irie A.5, Iwamura M.1
Institutes: Kitasato University School of Medicine, Dept. of Urology, Kanagawa, Japan, Kitasato University Medical Center, Dept. of Urology, Saitama, Japan, Kanagawa Prefectural Federation of Agricultural Cooperatives For Health and Welfare Sagamihara Kyodo, Dept. of Urology, Kanagawa, Japan, Higashiyamato Hospital, Dept. of Urology, Tokyo, Japan, National Hospital Organization Sagamihara Hospital, Dept. of Urology, Kanagawa, Japan, Kitasato University Kitasato Institute Hospital, Dept. of Urology, Tokyo, Japan

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
By: Yamashita S.1, Ito A.1, Mitsuzuka M.1, Aizawa A.2, Ioritani N.2, Ishidoya S.3, Ikeda Y.4, Numahata K.5, Orikasa K.6, Tochigi T.7, Soma F.8, Namima T.9, Saito H.10, Sato M.11, Katoh S.12, Ota S.13, Kyan A.14, Takeda A.15, Kaiho Y.1, Arai Y.1
Institutes: Tohoku University Graduate School Of Medicine, Dept. of Urology, Sendai, Japan, Japan Community Health Care Organization Sendai Hospital, Dept. of Urology, Sendai, Japan, Sendai City Hospital, Dept. of Urology, Sendai, Japan, Osaki Citizen Hospital, Dept. of Urology, Osaki, Japan, Yamagata Prefectural Central Hospital, Dept. of Urology, Yamagata, Japan, Kesennuma City Hospital, Dept. of Urology, Kesennuma, Japan, Miyagi Cancer Center, Dept. of Urology, Natori, Japan, Hachinohe City Hospital, Dept. of Urology, Hachinohe, Japan, Tohoku Rosai Hospital, Dept. of Urology, Sendai, Japan, Sendai Medical Center, Dept. of Urology, Sendai, Japan, Senenrifu Hospital, Dept. of Urology, Rifu, Japan, Ogachi Central Hospital, Dept. of Urology, Yuzawa, Japan, Japanese Red Cross Sendai Hospital, Dept. of Urology, Sendai, Japan, Shirakawa Kosei General Hospital, Dept. of Urology, Shirakawa, Japan, Iwate Prefectural Iwai Hospital, Dept. of Urology, Ichinoseki, Japan

Robotic radical nephroureterectomy is associated with poorer oncological outcomes than open and laparoscopic radical nephroureterectomy
By: Peyronnet B.1, Brichart N.2, Bruyere F.3, Seisen T.4, Alimi Q.1, Vanalderwerelt V.3, Rammal A.2, Mathieu R.1, Tondut L.1, Pradere B.3, Colin P.5, Verhoest G.1, Roupret M.6, Bensalah K.1
Institutes: CHU Rennes, Dept. of Urology, Rennes, France, CH Orleans, Dept. of Urology, Orleans, France, CHU Tours, Dept. of Urology, Tours, France, Pitié Salpêtrière Hospital, Dept. of Urology, Paris, France, CHU Lille, Dept. of Urology, Lille, France, Pitié Salpêtrière Hospital, Dept. of Urology, Paris, France
Stones

Plenary session 07

Tuesday, 28 March
08:00 - 13:30

Location: eURO Auditorium (Level 0)

Chairs: T. Knoll, Sindelfingen (DE)
A. Stenzl, Tübingen (DE)

Aims and objectives of this presentation
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, Bern (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)

08:30 - 08:35

Emergency ESWL
S. Picozzi, Milan (IT)

08:35 - 08:40

Emergency URS
J. Galan Llopis, Alicante (ES)

08:40 - 08:45

Alpha-blockers
T.B. Lam, Aberdeen (GB)

08:45 - 08:50

Stenting
A.J. Gross, Hamburg (DE)

08:50 - 09:00

Discussion

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?
09:15 - 09:25  
**Treat**  
M. Monga, Cleveland (US)

09:25 - 09:35  
**Observe**  
A. Miernik, Freiburg (DE)

09:35 - 09:45  
**Discussion**

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 - 11:30  
**Late breaking news**

11:30 - 13:30  
**Souvenir session** By the EAU Scientific Committee