Scientific Programme
Joint Session of the European Association of Urology (EAU) and the World Chinese Urologists

Urology beyond Europe

Location: Blue Area, Room 1 (Level 0)

Chairs: T.L. Lin, Taipei (TW)
J. Palou, Barcelona (ES)
L-P. Xie, Hangzhou (CN)

Aims and objectives of this session
To share scientific expertise and to collaborate among urologists from Chinese-speaking areas and Europe to provide better care for urological patients.

08:45 - 08:50
Welcome and introduction
T.L. Lin, Taipei (TW)
J. Palou, Barcelona (ES)
L-P. Xie, Hangzhou (CN)

08:50 - 09:29
Female urology
Moderators: J.P.F.A. Heesakkers, Nijmegen (NL)
H.C. Kuo, Hualien (TW)
T-J. Pan, Wuhan (CN)

08:50 - 09:03
Modern approach to Overactive bladder (OAB)
J.P.F.A. Heesakkers, Nijmegen (NL)

09:03 - 09:16
Back to the new fashion: The evolution of autologous fascia sling in the treatment of female stress urinary incontinence
C.C. Lin, Taipei (TW)

09:16 - 09:29
The study of augmentation cystoplasty by using bio design patch
K-X. Xu, Beijing (CN)

09:29 - 10:08
Prostate cancer
Moderators: N. Mottet, Saint-Étienne (FR)
Y.S. Pu, Taipei (TW)
L. Qi, Changsha (CN)

09:29 - 09:42
Prostate cancer guidelines: Yes or no?
N. Mottet, Saint-Étienne (FR)

09:42 - 09:55
The treatment strategy of metastatic castration resistant prostate cancer in Taiwan
S.S. Wang, Taichung (TW)

09:55 - 10:08
Updates in China Prostate Cancer Consortium
S.C. Ren, Shanghai (CN)

10:08 - 10:47
Endourology/Robotic surgery
<table>
<thead>
<tr>
<th>Time</th>
<th>Session</th>
<th>Speaker(s)</th>
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<tbody>
<tr>
<td>10:08 - 10:21</td>
<td>Update in robotic partial nephrectomy</td>
<td>A. Mottrie, Aalst (BE)</td>
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<tr>
<td>10:21 - 10:34</td>
<td>Robotic assisted microsurgical vasovasostomy</td>
<td>H. Wang, Kaohsiung (TW)</td>
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<tr>
<td>10:34 - 10:47</td>
<td>Laparoscopic thrombectomy in renal cell carcinoma with inferior vena cava involved</td>
<td>L.L. Ma, Beijing (CN)</td>
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<tr>
<td>10:47 - 11:26</td>
<td>Urological imaging</td>
<td>W.J. Wu, Kaohsiung (TW) J. Walz, Marseille (FR) L-Q. Zhou, Beijing (CN)</td>
</tr>
<tr>
<td>10:47 - 11:00</td>
<td>Pet imaging in prostate cancer</td>
<td>J. Walz, Marseille (FR)</td>
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<tr>
<td>11:00 - 11:13</td>
<td>MRI prior to robot-assisted laparoscopic radical prostatectomy: Does it make a difference?</td>
<td>E.Y-H. Huang, Taipei (TW)</td>
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<tr>
<td>11:13 - 11:26</td>
<td>Ultrasound-navigated precise transurethral vapor enucleation of the prostate</td>
<td>L-P. Xie, Hangzhou (CN)</td>
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<tr>
<td>11:26 - 12:05</td>
<td>Novel treatments in urology</td>
<td>P. Gontero, Turin (IT) J.S.T. Pang, Taipei (TW) Y. Xu, Harbin (CN)</td>
</tr>
<tr>
<td>11:26 - 11:39</td>
<td>Immunotherapy in bladder cancer</td>
<td>P. Gontero, Turin (IT)</td>
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<tr>
<td>11:52 - 12:05</td>
<td>The anatomical and clinical study of &quot;switch point&quot; block used in transperineal prostatic biopsy</td>
<td>H.F. Wang, SHANGHAI (CN)</td>
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<tr>
<td>12:05 - 12:15</td>
<td>Closing remarks</td>
<td>T.L. Lin, Taipei (TW) J. Palou, Barcelona (ES) L-P. Xie, Hangzhou (CN)</td>
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</table>
Joint Session of the European Association of Urology (EAU) and the Confederación Americana de Urología (CAU)

**Urology beyond Europe**

**Location:** Blue Area, Room 3 (Level 0)

**Chairs:** J. Gutierrez, Winston Salem (US)
H. Van Poppel, Leuven (BE)

**Aims and objectives of this session**

In this session the most diverse hot topics in oncologic urology, from robotic cystectomy over surgery for oligometastatic prostate cancer to focal therapy for prostate cancer will be covered, next to the current guidelines on bladder cancer and stone disease. State of the art presentations on adjuvant and neoadjuvant medical treatment for renal cell carcinoma, on urethral strictures and on andrology and female urology will be given.

**08:45 - 08:50**

**Welcome and introduction**

J. Gutierrez, Winston Salem (US)
H. Van Poppel, Leuven (BE)

**08:50 - 09:10**

**EAU Guidelines on Bladder Cancer: Update 2018**

M. Babjuk, Prague (CZ)

**09:10 - 09:30**

**Robotic radical cystectomy: Surgical hints, lymph node dissection, intracorporeal diversion**

A.R. Rodríguez, Watertown (US)

**09:30 - 09:50**

**Oligometastatic prostate cancer: Postpone hormonal treatment**

S. Joniau, Leuven (BE)

**09:50 - 10:10**

**Focal therapy for prostate cancer: On whom and how?**

R. Olivares, Santiago (CL)

**10:10 - 10:30**

**Neoadjuvant and adjuvant therapy in high-risk renal cell carcinoma**

A. Bex, Amsterdam (NL)

**10:30 - 10:50**

**Treatment of urethral strictures, how to select the best alternative**

L. Martínez Piñeiro, Madrid (ES)

**10:50 - 11:10**

**EAU patient’s information on stone treatment**

T. Bach, Hamburg (DE)

**11:10 - 11:30**

**Erectile dysfunction, new insights**

L.O. Torres, Belo Horizonte (BR)

**11:30 - 11:50**

**Update on infertility**

W. Aulitzky, Vienna (AT)
<table>
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<tr>
<th>Time</th>
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<th>Speakers</th>
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<tbody>
<tr>
<td>11:50 - 12:10</td>
<td>Reconstructive surgery of the pelvic floor: What urologists need to know</td>
<td>H. Davila, Vero Beach (US)</td>
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<tr>
<td>12:10 - 12:15</td>
<td>Closing remarks</td>
<td>J. Gutierrez, Winston Salem (US)</td>
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<td>H. Van Poppel, Leuven (BE)</td>
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## Joint Session of the European Association of Urology (EAU) and the Arab Association of Urology (AAU)

### Urology beyond Europe

**Friday 16 March**

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<thead>
<tr>
<th>Time</th>
<th>Session</th>
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<tr>
<td>09:30 - 09:33</td>
<td><strong>Welcome and introduction</strong></td>
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<tr>
<td></td>
<td>H. Abol-Enein, Mansoura (EG)</td>
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<td>N. Al-Hamdani, Baghdad (IQ)</td>
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<td>A. Stenzl, Tübingen (DE)</td>
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<tr>
<td>09:33 - 10:13</td>
<td><strong>Robotic surgery in urology</strong></td>
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<tr>
<td></td>
<td><strong>Moderators:</strong> M. Mustafa, Osmaniye (TR)</td>
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<td>J. Rassweiler, Heilbronn (DE)</td>
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<tr>
<td>09:33 - 09:48</td>
<td>Future developments in robotic surgery</td>
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<td>J. Rassweiler, Heilbronn (DE)</td>
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<td>09:48 - 10:03</td>
<td>Robotic intervention in nonmalignant disorders</td>
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<td>R. Azhar, Jeddah (SA)</td>
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<td>10:03 - 10:13</td>
<td>Discussion</td>
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<td>10:13 - 10:53</td>
<td><strong>Urinary stones</strong></td>
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<td><strong>Moderators:</strong> A.J. Gross, Hamburg (DE)</td>
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<td>A.N. Al Shunaigat, Amman (JO)</td>
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<td>10:13 - 10:28</td>
<td>The place of shock wave lithotripsy in the era of endourology advances</td>
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<td>Y. Farahat, Dubai (AE)</td>
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<td>10:28 - 10:43</td>
<td>Prevention of stone recurrence</td>
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<td>A.J. Gross, Hamburg (DE)</td>
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<td>10:43 - 10:53</td>
<td>Discussion</td>
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<td>10:53 - 11:33</td>
<td><strong>Andrology</strong></td>
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<td><strong>Moderators:</strong> A. Alhunayan, Kuwait (KW)</td>
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<td>M.M. Fode, Herlev (DK)</td>
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<td>10:53 - 10:58</td>
<td>Micro TESE for non obstructive azospermia</td>
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<td>11:08 - 11:23</td>
<td>Treatment of impotence and incontinence after radical prostatectomy/cystectomy</td>
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<tr>
<td>11:23 - 11:33</td>
<td>Discussion</td>
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</tbody>
</table>
| 11:33 - 12:13 | Reconstructive urology                                                                         | Moderators: I. Barghouth, Damascus (SY)  
                                  |                                   | H. Kouicem, Sétif (DZ)            |
| 11:20 - 11:32 | Complications of continent cutaneous urinary diversion and how to avoid                          | To be confirmed                    |
| 11:33 - 11:48 | Posterior urethral strictures: Approach and outcome in Sudan                                     | N. Ramadan, Khartoum (SD)          |
| 11:48 - 12:03 | Duplication anomalies in urinary tract                                                           | M. Eissa, Cairo (EG)              |
| 12:03 - 12:13 | Discussion                                                                                       |                                   |
| 12:13 - 12:15 | Closing remarks                                                                                  | H. Abol-Enein, Mansoura (EG)       | A. Stenzl, Tübingen (DE)          |
**Surgical safety of immediate versus deferred cytoreductive nephrectomy (CN) in patients with synchronous metastatic renal cell carcinoma (mRCC) receiving sunitinib. Data from the EORTC randomized trial 30073 SURTIME**

By: Bex A. \(^1\), Mulders P. \(^2\), Jewett M. \(^3\), Wagstaff J. \(^4\), Van Velthoven R. \(^5\), Laguna P. \(^6\), Wood L. \(^7\), Van Melick H. \(^8\), Soetekouw P. \(^9\), Lattouf J. \(^10\), Powles T. \(^11\), De Jong I. \(^12\), Rottey S. \(^13\), Tombal B. \(^14\), Marreaud S. \(^15\), Collette S. \(^15\), Collette L. \(^15\), Haanen J. \(^16\)

\(^1\)The Netherlands Cancer Institute, Dept. of Urology, Amsterdam, Netherlands, The, \(^2\)Radboud University, Dept. of Urology, Nijmegen, Netherlands, The, \(^3\)Princess Margeret Hospital, Dept. of Urology, Toronto, Canada, \(^4\)Singleton Hospital, Dept. of Oncology, Swansea, United Kingdom, \(^5\)Institut Bordelet, Dept. of Urology, Brussels, Belgium, \(^6\)AMC, Dept. of Urology, Amsterdam, Netherlands, The, \(^7\)Queen Elizabeth Hospital, Dept. of Oncology, Halifax, Canada, \(^8\)St Antonius Hospital, Dept. of Urology, Nieuwegein, Netherlands, The, \(^9\)Maastricht University Hospital, Dept. of Oncology, Maastricht, Netherlands, The, \(^10\)CHUM St Luc, Dept. of Urology, Montréal, Canada, \(^11\)St Bartholomews Hospital, Dept. of Oncology, London, United Kingdom, \(^12\)Groningen University Hospital, Dept. of Urology, Groningen, Netherlands, The, \(^13\)UZ Gent, Dept. of Oncology, Ghent, Belgium, \(^14\)University Hospital St Luc, Dept. of Urology, Brussels, Belgium, \(^15\)EORTC, Dept. of Statistics, Brussels, Belgium, \(^16\)The Netherlands Cancer Institute, Dept. of Oncology, Amsterdam, Netherlands, The

**High competing risks minimize real-world utility of adjuvant targeted therapy in renal cell carcinoma: A population-based analysis**

By: Chandrasekar T. \(^1\), Klaassen Z. \(^1\), Goldberg H. \(^1\), Sayyid R. \(^2\), Kulkarni G. \(^1\), Fleshner N. \(^1\)

\(^1\)University Health Network, University of Toronto, Dept. of Surgical Oncology, Division of Urologic Oncology, Toronto, Canada, \(^2\)Augusta University, Dept. of Urology, Augusta, United States of America

**Systematic review and meta-analysis of adjuvant therapy after nephrectomy for high-risk, non-metastatic renal cell carcinoma**
4 Natural history of collecting duct carcinoma: A unique multi-institutional study with a centrally-reviewed pathology

By: Ouzaid I. 1, Comperat E. 2, Rouprêt M. 3, Rioux-Leclerc N. 4, Descotes J. 5, Verkarre V. 6, Bernhard J-C. 7, Barthélémy P. 8, Malouf G. 9

1Bichat Hospital, Dept. of Urology, Paris, France, 2Tenon Hospital, Dept. of Pathology, Paris, France, 3CHU Pitié-Salpêtrière, Dept. of Urology, Paris, France, 4CHU Rennes, Dept. of Pathology, Rennes, France, 5CHU Grenoble, Dept. of Urology, Grenoble, France, 6CHU Georges Pompidou, Dept. of Pathology, Paris, France, 7CHU Bordeaux, Dept. of Urology, Bordeaux, France, 8CHU Strasbourg, Dept. of Medical Oncology, Strasbourg, France, 9CHU Pitié-Salpêtrière, Dept. of Medical Oncology, Paris, France

5 Validation of the IMDC prognostic model in metastatic renal cancer at diagnosis and investigation of it’s role in the prediction of outcome from cytoreductive nephrectomy

By: Hendry J. 1, Beh I. 2, Clement K. 1, O’Connor K. 2, Riddick A. 2, Stewart G. 2, Aboumarzouk O. 1, McNeill A. 2, Leung S. 2, Oades G. 1, Laird A. 2

1Queen Elizabeth University Hospital, Dept. of Urology, Glasgow, United Kingdom, 2NHS Lothian, Dept. of Urology, Edinburgh, United Kingdom

6 PD-L1 expression is associated with tumor progression and poor prognosis in Xp11.2 translocation renal cell carcinoma

By: Yiping Z., Qu Y-Y., Chang K., Xiaow W.-J., Wang H-K., Zhang H-K., Ye D-W. Fudan University Shanghai Cancer Center, Dept. of Urology, Shanghai, China

7 Tumor-infiltrating neutrophils predict therapeutic benefit of tyrosine kinase inhibitors in metastatic renal cell carcinoma

By: Wang J. 1, Liu L. 1, Ou C. 2, Xu J. 2, Guo J. 1

1Zhongshan Hospital of Fudan University, Dept. of Urology, Shanghai, China, 2Fudan University, Shanghai Medical College, Dept. of Biochemistry, Shanghai, China

8 The effect of fourth-line systemic therapy in metastatic renal cell carcinoma

<table>
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<tr>
<th>*9</th>
<th>Tumoral CD8+ T cells correlate with favorable outcome in metastatic renal cell carcinoma treated with tyrosine kinase inhibitors</th>
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<tbody>
<tr>
<td>By: Wang J. ¹, Liu L. ¹, Xi W. ¹, Xu J. ², Guo J. ¹</td>
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<tr>
<td>¹Zhongshan Hospital, Fudan University, Dept. of Urology, Shanghai, China, ²Fudan University, Shanghai Medical College, Dept. of Biochemistry, Shanghai, China</td>
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<tr>
<th>10</th>
<th>Sunitinib or sorafenib as neoadjuvant therapy may not improve the survival outcomes of renal cell carcinoma with tumor thrombus</th>
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<tbody>
<tr>
<td>By: Huang J., Cai W., Dong B., Li M., Kong W., Zhang J., Chen Y., Xue W., Huang Y.</td>
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<tr>
<td>Renji Hospital, Shanghai Jiao Tong University School of Medicine, Dept. of Urology, Shanghai, China</td>
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<tr>
<th>11</th>
<th>Statins and prognosis of renal cell cancer: A retrospective Finnish cohort study</th>
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<tbody>
<tr>
<td>By: Eskelinen T. ¹, Tammela T. ², Kotsar A. ³, Murtola T. ²</td>
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<tr>
<td>¹Tampere University Hospital, School Of Medicine, Tampere, Finland, ²Tampere University Hospital, Dept. of Urology, Tampere, Finland, ³Tarto University, Dept. of Urology, Tarto, Estonia</td>
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**Summary**

J. Bedke, Tübingen (DE)
How to improve preoperative workup and surgical management of adrenals and retroperitoneal tumours?

**Poster Session 02**

**Location:** Blue Area, Room 2 (Level 0)

**Chairs:** R. Autorino, Richmond (US)
L. Cormio, Bari Pacese (IT)

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.

**12**

Comparisons of surgeons' and assistants' fatigue after laparoendoscopic single-site versus conventional laparoscopic adrenalectomy: A single surgeon's experience

By: Inoue S., Hayashi T., Hieda K., Shinmei S., Teishima J., Matsubara A.
Hiroshima University, Dept. of Urology, Hiroshima, Japan

**13**

Prognosis and conditional probability survival analysis of adrenal cortical carcinoma: A population level study

By: Xiao W., Zhu Y., Ye D.
Fudan University Shanghai Cancer Center, Dept. of Urology, Shanghai, China

**14**

Radiotherapy effect on surgically treated retroperitoneal sarcoma: A propensity score analysis

By: Nazzani S.¹, Marchioni M.¹, Preisser F.¹, Bandini M.², Motta G.², Acquati P.², Carmignani L.², Karakiewicz P.¹
¹Centre Hospitalier de l'Université de Montréal, Cancer Prognostics and Health Outcomes Unit, Montreal, Canada, ²IRCCS Policlinico San Donato, Dept. of Urology, Milan, Italy

**15**

MECA-79-positive high endothelial venule density may associate with pheochromocytoma aggressiveness

By: Yasuhiro H., Yoneyama T., Yamamoto H., Hatakeyama S., Imai A., Yoneyama T., Koie T., Ohyama C.
Hirosaki University Graduate School of Medicine, Dept. of Urology, Hirosaki, Japan

**16**

Primary adrenal malignancy: Insights into the epidemiology of a rare histological subset

By: Chandrasekar T., Goldberg H., Klaassen Z., Ahmad A., Woon D., Herrera-Caceres
**Perioperative imaging techniques and immunohistochemistry to investigate the feasibility of laparoscopic partial adrenalectomy in primary aldosteronism**

By: Van de Wiel E. 1, Küsters B. 2, Veltien A. 3, Mann R. 3, Mukai K. 4, Deinum J. 5, Langenhuijsen J. 1

1Radboud University Nijmegen Medical Centre, Dept. of Urology, Nijmegen, Netherlands, The, 2Radboud University Nijmegen Medical Centre, Dept. of Pathology, Nijmegen, Netherlands, The, 3Radboud University Nijmegen Medical Centre, Dept. of Radiology, Nijmegen, Netherlands, The, 4Keio University School of Medicine, Dept. of Biochemistry, Tokyo, Japan, 5Radboud University Nijmegen Medical Centre, Dept. of Internal Medicine, Nijmegen, Netherlands, The

**Patient selection for confirmatory tests of primary aldosteronism (PA) using the PA discrimination score**

By: Yamamoto H. 1, Hatakeyama S. 1, Matsumoto T. 1, Soma O. 1, Kusaka A. 1, Hosogoe S. 1, Yoneyama T. 1, Imai A. 1, Yoneyama T. 1, Hashimoto Y. 1, Koie T. 1, Nakaji S. 2, Ohyama C. 1

1Hirosaki University Graduate School of Medicine, Dept. of Urology, Hirosaki, Japan, 2Hirosaki University Graduate School of Medicine, Dept. of Social Medicine, Hirosaki, Japan

**Insights from applying the adrenal vein sampling algorithm before adrenalectomy**

By: Chang C-H. 1, Lin C-Y. 2, Yeh S-D. 1

1Taiepi Medical University Hospital, Dept. of Urology, Taipei, Taiwan, 2Taiepi Medical University Hospital, Dept. of Radiology, Taipei, Taiwan

**Anatomical basis of laparoscopic partial adrenalectomy**

By: Chernylovskyi V., Styopushkin S., Chaikovskyi V., Sokolenko R.

Dnipro City Multifield Central Clinical Hospital #4, Dept. of Urology #1, Dnipro, Ukraine

**Incidental adrenal mass: Is 4 cm a good cut-off for surgical decision?**

By: Mendes Carvalho J. 1, Nunes P. 1, Antunes H. 1, Parada B. 1, Retroz E. 1, Tavares-Da-Silva E. 1, Carrilho F. 2, Figueiredo A. 1

1Coimbra University Hospital Center, Dept. of Urology and Renal Transplantation, Coimbra, Portugal, 2Coimbra University Hospital Center, Dept. of Endocrinology, Coimbra, Portugal

**Transumbilical approach for laparoendoscopic single-site adrenalectomy: Why not?**

By: Mendes Carvalho J. 1, Nunes P. 1, Antunes H. 1, Parada B. 1, Retroz E. 1,
23  

Retroperitoneal laparoscopic cool-tip radiofrequency ablation of adrenocortical adenoma with Cushing syndrome

By: Yao L., Zhang S.W., Guo H.Q.  
Nanjing Drum Tower Hospital—the Affiliated Hospital of Nanjing University Medical School,  
Dept. of Urology, Nanjing, China

V85  

Associated video presentation Robot-assisted left adrenalectomy and left renal vein tumor thrombectomy

By: Simone G., Tuderti G., Minisola F., Misuraca L., Ferriero M., Guaglianone S., Gallucci M.  
“Regina Elena” National Cancer Institute, Dept. of Urology, Rome, Italy
Joint Session of the European Association of Urology (EAU) and the Société Internationale d'Urologie (SIU)

Urology beyond Europe

Friday 16 March
09:45 - 12:15

Location: Blue Area, Room 4 (Level 0)

Chairs: B.R. Konety, Minneapolis (US)
J. N'Dow, Aberdeen (GB)

Aims and objectives of this session
1. Attendees will be able to develop an understanding of the key controversial issues in general urology and urologic oncology
2. Attendees will be able to identify and utilise best practices and current technology and methods of management of complex urologic problems
3. Attendees will be able to identify methods of management for complex urologic conditions that are feasible in both resource rich and resource poor environments

09:45 - 09:50
Welcome and introduction
B.R. Konety, Minneapolis (US)

09:50 - 11:10
Controversies in urologic oncology

Moderators: M.J. Ribal, Barcelona (ES)
F.P. Secin, Buenos Aires (AR)

09:50 - 10:00
Lymphadenectomy is unnecessary in renal cancer
A. Bex, Amsterdam (NL)

10:00 - 10:10
Lymphadenectomy is necessary for cure of renal cancer
F. Pouliot, Quebec (CA)

10:10 - 10:20
Metastasectomy for urothelial cancer is helpful
S. Egawa, Tokyo (JP)

10:20 - 10:30
Metastasectomy has no role in urothelial cancer
J.A. Witjes, Nijmegen (NL)

10:30 - 10:40
Intracorporeal diversion is optimal
N.P. Wiklund, Stockholm (SE)

10:40 - 10:50
There is no benefit to intracorporeal diversion
P. Gontero, Turin (IT)

10:50 - 11:00
The robot is needed in the developing world
S. Rawal, Delhi (IN)

11:00 - 11:10
The robot is an unnecessary luxury in the developing world
P. Dasgupta, London (GB)

11:10 - 12:10
Controversies in general urology

Moderators: P. Dasgupta, London (GB)
S. Rawal, Delhi (IN)
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<tr>
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| 11:10 - 11:20 | Intraoperative frozen section allows best practice in organ preserving surgery in penile cancer surgery  
D.J. Summerton, Leicester (GB) |
| 11:20 - 11:30 | Primary urethral repair after pelvic fracture is a bad idea  
S. Kulkarni, Pune (IN) |
| 11:30 - 11:40 | Minimally invasive techniques for BPH are good  
S. Gravas, Larissa (GR) |
| 11:40 - 11:50 | HOLEP is the best  
S. Borofsky, Minneapolis (US) |
| 11:50 - 12:00 | Social media is helpful for clinical medicine  
D. Murphy, Melbourne (AU) |
| 12:00 - 12:10 | Social media is the bane of clinical medicine  
J.W.F. Catto, Sheffield (GB) |
| 12:10 - 12:15 | Closing remarks  
J. N'Dow, Aberdeen (GB) |
Penile cancer - a rare disease demands expert treatment
Poster Session 03

Location: Blue Area, Room 5 (Level 0)
Chairs: H. John, Winterthur (CH)
        A. Muneer, London (GB)
        C. Protzel, Rostock (DE)

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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The adherence to the EAU Guidelines dramatically influences the survival of patients with penile cancer: Result from a retrospective international study (PECAD Study)


1 ASL Abruzzo, Dept. of Urology, Chieti, Italy, 2 Hospital of Budapest, Dept. of Urology, Budapest, Hungary, 3 Moffitt Cancer Center, Dept. of Genitourinary Oncology, Tampa, United States of America, 4 University of Bari, Dept. of Urology and Andrology Unit II, Bari, Italy, 5 University, Medical Statistics Unit, Naples, Italy, 6 Hospital “Sant’Andrea”, Sapienza University, Dept. of Urology, Rome, Italy, 7 Hospital “Spedali Civili”, Dept. of Urology, Brescia, Italy, 8 Istituto Europeo Oncologia, Dept. of Urology, Milan, Italy, 9 University of Modena & Reggio Emilia, Baggiovara Hospital, Dept. of Urology, Baggiovara, Italy, 10 Hospital Universitario La Paz, Dept. of Urology, Madrid, Spain, 11 Ceara Cancer Institute, Dept. of Urology, Fortaleza, Brazil, 12 Virginia Commonwealth University, Dept. of Urology, Richmond, United States of America

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Validation of the 8th edition of AJCC/UICC staging system for penile cancer: A retrospective multicenter study

By: Gu W., Ye D., Zhu Y.
Fudan University Shanghai Cancer Center, Urological Oncology, Shanghai, China

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Tumour escape in the microenvironment of penile squamous cell carcinoma; immune factors and clinicopathological predictors of lymph node metastasis and disease specific survival


1 Netherlands Cancer Institute, Dept. of Urology, Amsterdam, Netherlands, The,
**BAP1 protein loss in squamous cell carcinoma of the penis is associated with less nodal and distant metastasis at presentation**

By: Alnajjar H.M. 1, Alrifai D. 2, Kolluri K. 2, Mitra A. 3, Feber A. 4, Ben-Salha I. 5, Muneer A. 6, Alifrangis C. 3

1UCLH, Dept. of Urology, London, United Kingdom, 2UCL, Dept. of Respiratory Medicine, London, United Kingdom, 3UCLH, Dept. of Oncology, London, United Kingdom, 4UCL, Cancer Institute & Division of Surgery and Interventional Science, London, United Kingdom, 5UCLH, Dept. of Histopathology, London, United Kingdom, 6UCLH and University College London, NIHR Biomedical Research Centre, London, United Kingdom

**Relevance of HPV-status and histopathology for prognosis and miRNA expression in patients with penile carcinoma**

By: Hölters S. 1, Heinzelmann J. 1, Khalmurzaev O. 2, Matveev V. 2, Loertzer P. 1, Ueberdiek S. 1, Janssen M. 1, Pfuhl T. 3, Smola S. 3, Bohle R. 4, Pryanukhin A. 5, Fuhrich N. 6, Geppert C. 6, Hartmann A. 6, Loertzer H. 7, Hauschild E. 8, Wunderlich H. 9, Schöpe J. 10, Wagenpfeil S. 10, Stöckle M. 1, Junker K. 1

1Saarland University, Dept. of Urology and Paediatric Urology, Homburg, Germany, 2N.N. Blokhin Cancer Research Center, Dept. of Urology, Moscow, Russia, 3Saarland University, Dept. of Virology, Homburg, Germany, 4Saarland University, Dept. of Pathology, Homburg, Germany, 5University of Bonn, Dept. of Pathology, Bonn, Germany, 6University Erlangen-Nurnberg, Dept. of Pathology, Erlangen, Germany, 7Westpfalz-Klinikum GmbH, Dept. of Urology and Pediatric Urology, Kaiserslautern, Germany, 8Helios Klinik, Dept. of Urology, Blankenhain, Germany, 9St Georg Klinikum, Dept. of Urology and Pediatric Urology, Eisenach, Germany, 10Saarland University, Institute of Medical Biometry, Epidemiology and Medical Informatics, Homburg, Germany

**Use of FDG-PET/CT for staging pelvic lymph nodes in 100 patients with penile carcinoma**

By: Ottenhof S. 1, Djajadiningrat R. 2, Graafland N. 1, Versleijen M. 3, Vegt E. 3, Horenblas S. 1

1Netherlands Cancer Institute, Dept. of Urology, Amsterdam, Netherlands, The, 2HagaZiekenhuis, Dept. of Urology, 's Gravenhage, Netherlands, The, 3Netherlands Cancer Institute, Nuclear Medicine, Amsterdam, Netherlands, The

**Outcomes of penile carcinoma in situ involving the urethral meatus with CO2 laser treatment**

By: McGuinness L., Veeratterapillay R., Greene D., Keegan P.

City Hospitals Sunderland NHS Trust, Dept. of Urology, Sunderland, United Kingdom
A comparison between primary squamous cell carcinoma of the penis and primary squamous cell carcinoma of the urethra in men: Is the survival different?

By: Manjunath A. ¹, Alnajjar H. ¹, La Touche S. ¹, Corbishley C. ², Tinwell B. ², Ayres B. ¹, Watkin N. ¹
¹St George's Hospital, Dept. of Urology, London, United Kingdom, ²St George's Hospital, Dept. of Cellular Pathology, London, United Kingdom

Oncological outcomes of 100 glans resurfacing procedures for superficial invasive penile cancer

By: Sujenthiran A. ¹, Yan S. ¹, Ager M. ¹, Corbishley C. ², Ayres B. ¹, Watkin N. ¹
¹St George's Hospital, Dept. of Urology, London, United Kingdom, ²St George's Hospital, Dept. of Histopathology, London, United Kingdom

Results of the first interim analysis of the PräVAC trial: Prevention of wound complications following inguinal lymph node dissection in patients with penile cancer using epidermal vacuum-assisted wound closure

By: Schmid S. ¹, Seitz A. ², Haller B. ³, Fritsche H. ⁴, Huber T. ⁴, Burger M. ⁴, Gschwend J. ¹, Maurer T. ¹
¹Technische Universität München, Dept. of Urology, Munich, Germany, ²Universitätsklinikum Würzburg, Dept. of Urology, Würzburg, Germany, ³Technische Universität München, Dept. of Medical Statistics and Biometry, Munich, Germany, ⁴Universitätsklinikum Regensburg, Dept. of Urology, Regensburg, Germany

The management of the contralateral cN0 groin when the ipsilateral groin is cN+/pN+ in squamous cell carcinoma of the penis

By: Ager M., Manjunath A., Yan S., Lam W., Tinwell B., Corbishley C., Ayres B., Watkin N.
St George's University Hospital, Dept. of Urology, London, United Kingdom

Tensor fascia lata flap reconstruction in penile cancer patients with fungating nodes: A quality of life intervention?

By: Mahesan T. ¹, Sharma D. ¹, Soldin M. ², Watkin N. ¹, Ayres B. ¹
¹St George's Hospital, Dept. of Urology, London, United Kingdom, ²St George's Hospital, Dept. of Plastic Surgery, London, United Kingdom

Radiotherapy for inguinal node positive penile cancer: A single centre retrospective study

By: Njoku K. ¹, Eardley I. ², Kayes O. ², Elhamoun M. ², Henry A. ¹
¹St. James University Teaching Hospital, Leeds Institute of Cancer and Pathology, Leeds, United Kingdom, ²St. James University Teaching Hospital, Dept. of Urology, Leeds, United Kingdom
Summary
H. John, Winterthur (CH)
Joint Session of the European Association of Urology (EAU) and Pakistan Association of Urological Surgeons (PAUS)

Urology beyond Europe

Friday 16 March
09:45 - 12:15

Location: Green Area, Room 10 (Level 1)

Chairs: V.G. Mirone, Naples (IT)
M. Sheriff, Gillingham (GB)

Aims and objectives of this session
This joint EAU-PAUS session aims to provide an overview of the current challenges and latest developments in the management of urethral strictures and stones which pose considerable health-related and economic impact in Pakistan.

09:45 - 09:55
Welcome and introduction
S. Khan, Quetta (PK)
V.G. Mirone, Naples (IT)
M. Sheriff, Gillingham (GB)

09:55 - 10:45
Urethral stricture management
Moderators: M. Arshad, Rawalpindi (PK)
V.G. Mirone, Sheffield (GB)

09:55 - 10:10
Latest developments in urethral stricture surgery
C.R. Chapple, Sheffield (GB)

10:10 - 10:25
Spectrum and outcomes of urethral stricture disease management from major centres in Pakistan
Hussain, Karachi (PK)

10:25 - 10:45
Questions and answers

10:45 - 11:35
Stone management
Moderators: M. Ahmad, Rawalpindi (PK)
K. Sarica, Istanbul (TR)

10:45 - 11:00
Technological advances in stone management
C. Türk, Vienna (AT)

11:00 - 11:15
Changing paradigm in stone management in Pakistan: Where are we today?
M. Ahmad, Rawalpindi (PK)

11:15 - 11:35
Questions and answers

11:35 - 12:05
Joint EAU-PAUS case presentations
Moderators: M.S. Khan, London (GB)
M. Sheriff, Gillingham (GB)
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<thead>
<tr>
<th>Time</th>
<th>Session</th>
<th>Presenter, Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>11:35 - 11:50</td>
<td>Case presentation Urethral stricture</td>
<td>N. Orakzai, Peshawar (PK)</td>
</tr>
<tr>
<td>11:50 - 12:05</td>
<td>Case presentation Stones</td>
<td>Q. Zia, Rawalpindi (PK)</td>
</tr>
<tr>
<td>12:05 - 12:15</td>
<td>Closing remarks</td>
<td>V.G. Miron, Naples (IT)</td>
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<td>M. Sheriff, Gillingham (GB)</td>
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</table>
Joint Session of the European Association of Urology (EAU) and the Scandinavian Association of Urology (SCAUR): Urology Within Europe
Specialty Session

Friday 16 March
09:45 - 12:15

Location: Green Area, Room 12 (Level 1)
Chairs: C. Beisland, Bergen (NO)
J.O.R. Sonksen, Herlev (DK)

Aims and objectives of this session
The five Nordic countries comprise approximately 25 million people, and have similar treatment traditions and dominating public healthcare systems. Within the Scandinavian Association of Urology (SCAUR) there is a long tradition for collaboration within both education and research. The many similarities have made it possible to perform not only large RCT's, but also high-quality research originating from population-based (cancer) registries. The objective of this session is to discuss current Nordic research projects as well as tricky clinical cases within different areas of urology with opinion-leading experts from the EAU. The aim of the session is to further improve the collaboration between the two organisations in the future.

09:45 - 09:50
Welcome and introduction
C. Beisland, Bergen (NO)

09:50 - 10:35
Randomised controlled trials in the Nordic countries
Moderators: To be confirmed
E.S. Haug, Tønsberg (NO)
H. Jakobsen, Herlev (DK)
G. Palapattu, Ann Arbor (US)

09:50 - 10:05
How to use registries and previous Nordic RCT’s in new settings
P. Boström, Turku (FI)

09:50 - 10:20
Update on SPCG-15; RP vs. ERBT+HT in locally advanced prostate cancer
O. Akre, Stockholm (SE)

10:05 - 10:35
The Scandinavian urethroplasty study - A multicentre, prospective, randomised study comparing bulbar urethroplasty with excision and primary anastomosis or with an onlay grafting procedure using buccal mucosa
J. Sairanen, Helsinki (FI)

10:35 - 11:02
Modern stone treatment
Moderators: T. Knoll, Sindelfingen (DE)
P.J.S. Osther, Fredericia (DK)
O. Traxer, Paris (FR)
Ö. Ulvik, Bergen (NO)

10:35 - 10:42
Pharmacological modulation of upper urinary tract activity during flexible ureterorenoscopy
H.U. Jung, Fredericia (DK)
<table>
<thead>
<tr>
<th>Time</th>
<th>Session</th>
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<tr>
<td>10:42 - 11:00</td>
<td><strong>Case presentation:</strong> Tricky stone cases – The personalised way to treat it</td>
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<tr>
<td></td>
<td>K.H.A. Andreassen, Hellerup (DK)</td>
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<tr>
<td>11:00 - 11:02</td>
<td><strong>Discussion</strong></td>
</tr>
<tr>
<td>11:02 - 11:29</td>
<td><strong>Lower Urinary Tract Dysfunction</strong></td>
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<td><strong>Moderators:</strong> P. Abrams, Bristol (GB)</td>
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<td>To be confirmed</td>
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<td>L.N. Salling, Copenhagen (DK)</td>
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<td>A. Schultz, Oslo (NO)</td>
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<tr>
<td>11:02 - 11:12</td>
<td><strong>Prevention of bladder dysfunction in acute spinal cord injury</strong></td>
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<td>O.J. Nilsen, Oslo (NO)</td>
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<tr>
<td>11:12 - 11:27</td>
<td><strong>Case presentation:</strong> Difficult cases in functional urology with emphasis on urodynamics</td>
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<td>C. Graugaard-Jensen, Aarhus (DK)</td>
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<tr>
<td>11:27 - 11:29</td>
<td><strong>Discussion</strong></td>
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<tr>
<td>11:29 - 11:51</td>
<td><strong>Follow-up of Renal Cell Carcinoma (RCC)</strong></td>
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<td><strong>Moderators:</strong> C. Beisland, Bergen (NO)</td>
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<td>L. Lund, Odense (DK)</td>
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<td>11:29 - 11:39</td>
<td><strong>Rationale for current guidelines recommendations for RCC follow-up</strong></td>
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<td>B. Ljungberg, Umeå (SE)</td>
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<tr>
<td>11:39 - 11:49</td>
<td><strong>Follow-up of RCC: Strategies to close the knowledge gap</strong></td>
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<td>A. Bex, Amsterdam (NL)</td>
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<td>11:49 - 11:51</td>
<td><strong>Discussion</strong></td>
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<tr>
<td>11:51 - 12:13</td>
<td><strong>Training of Young Urologists</strong></td>
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<td><strong>Moderators:</strong> P.B. Ostergren, Herlev (DK)</td>
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<td>D.J. Summerton, Leicester (GB)</td>
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<td>H.G. Van Der Poel, Amsterdam (NL)</td>
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<tr>
<td>11:51 - 12:01</td>
<td><strong>Simulator training and the adoption of robotic simulation curricula in residents’ training</strong></td>
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<td>J. Bjerggaard Jensen, Aarhus (DK)</td>
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<tr>
<td>12:01 - 12:11</td>
<td><strong>ERUS Robotic curriculum</strong></td>
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<td>A. Mottrie, Aalst (BE)</td>
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<tr>
<td>12:11 - 12:13</td>
<td><strong>Discussion</strong></td>
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<tr>
<td>12:13 - 12:15</td>
<td><strong>Summary and closing remarks</strong></td>
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<td></td>
<td>J.O.R. Sonksen, Herlev (DK)</td>
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</table>
**Joint Session of the European Association of Urology (EAU) and the Maghreb Union Countries**

**Urology beyond Europe**

**Friday 16 March**

**09:45 - 12:15**

**Location:** Green Area, Room 11 (Level 1)

**Chairs:**
- A. Belaidi, Boufarik Blida (DZ)
- H.A. El Alj, Rabat (MA)
- R. El Kamel, Kairouan (TN)
- J.P.M. Sedelaar, Nijmegen (NL)

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<thead>
<tr>
<th>Time</th>
<th>Session</th>
<th>Authors</th>
</tr>
</thead>
<tbody>
<tr>
<td>09:45 - 09:50</td>
<td>Welcome and introduction</td>
<td>R. El Kamel, Kairouan (TN)</td>
</tr>
</tbody>
</table>
| 09:50 - 10:35 | Localised prostate cancer                                               | **Moderators:** H.A. El Alj, Rabat (MA)  
J.P.M. Sedelaar, Nijmegen (NL) |
| 09:50 - 10:00 | What is the best diagnostic work up for treatment selection, radiation or surgery? | K. Hachi, Alger (DZ)                        |
| 10:00 - 10:10 | What is the role of PLND?                                               | D. Touiti, Casablanca (MA)                   |
| 10:10 - 10:20 | What is the role on genetic profiling for localised prostate cancer?    | J.P.M. Sedelaar, Nijmegen (NL)               |
| 10:20 - 10:35 | Case discussions in cooperation with the EAU-YAU                       | J.P.M. Sedelaar, Nijmegen (NL)               |
| 10:35 - 11:10 | Metastatic prostate cancer                                              | **Moderators:** A. Belaidi, Boufarik Blida (DZ)  
J.P.M. Sedelaar, Nijmegen (NL) |
| 10:35 - 10:45 | How to select the right patient for the combination of hormones and chemotherapy | C. Djeffal, Annaba (DZ)                     |
| 10:45 - 10:55 | Is there a role for surgery in metastatic prostate cancer?              | S.M. Moudouni, Marrakech (MA)                |
| 10:55 - 11:10 | Case discussions in cooperation with the EAU-YAU                       | J.P.M. Sedelaar, Nijmegen (NL)               |
| 11:10 - 11:40 | Urethral strictures                                                    | **Moderators:** F. Campos Juanatey, Santander (ES)  
R. El Kamel, Kairouan (TN) |

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<tr>
<th>Time</th>
<th>Session</th>
<th>Speaker(s)</th>
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<tbody>
<tr>
<td>11:10 - 11:20</td>
<td>Review of the EAU Guidelines</td>
<td>F. Campos Juanatey, Santander (ES)</td>
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<tr>
<td>11:20 - 11:40</td>
<td>Difficult case discussion</td>
<td>A. Bouker, Tunis (TN)</td>
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<tr>
<td>11:40 - 12:10</td>
<td>Azoospermia/TESE</td>
<td>H.A. El Alj, Rabat (MA)</td>
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<td>P. Verze, Naples (IT)</td>
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<tr>
<td>11:40 - 11:50</td>
<td>Review of the EAU Guidelines</td>
<td>P. Verze, Naples (IT)</td>
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<tr>
<td>11:50 - 12:10</td>
<td>Interactive case discussion</td>
<td>W. Kerkeni, Tunis (TN)</td>
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<td>P. Verze, Naples (IT)</td>
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<tr>
<td>12:10 - 12:15</td>
<td>Closing remarks</td>
<td>R. El Kamel, Kairouan (TN)</td>
</tr>
</tbody>
</table>
Aims and objectives of this session
This session is to showcase 'the urological scene(s)' from the Federation of Asian Urological Associations (FAUA). ASEAN now consists of 10 countries but not all can participate due to socio-economic factors. Presentations are chosen by the National Associations as well as by well known ASEAN urologists.

09:15 - 09:17
Welcome and introduction
C.R. Chapple, Sheffield (GB)
C.C.M. Lei, Kuching (MY)

09:17 - 10:27
Uro-Oncology

09:17 - 09:27
The management of renal cancer in Indonesia and the current updates
W. Djatisoesanto, Surabaya (ID)

09:27 - 09:37
ERAS after radical cystectomy: A new standard?
L.S. Lee, Singapore (SG)

09:37 - 09:47
Predicting resistance to BCG therapy and emerging therapies for non-muscle invasive bladder cancer
E. Chiong, Singapore (SG)

09:47 - 09:57
Surgical management of penile cancer: Single center experience in Mandalay General Hospital, Myanmar
M. Thu, Mandalay (MM)

09:57 - 10:07
How robotic-assisted involvement in strategies of prostate cancer treatment in developing country
V.L. Chuyen, Ho Chi Minh City (VN)

10:07 - 10:17
Prognostic factors in prostate cancer patients who received Androgen Deprivation Therapy (ADT) at the time of diagnosis
B. Lojanapiwat, Chiang Mai (TH)

10:17 - 10:27
The role of the multidisciplinary team conference in Uro-Oncology
V. Sangar, Manchester (GB)

10:27 - 11:07
Reconstructive urology

10:27 - 10:37
Ketamine cystitis: How much do we understand its pathogenesis?
T.A. Ong, Kuala Lumpur (MY)
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<tr>
<th>Time</th>
<th>Session Title</th>
<th>Speaker(s)</th>
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<tbody>
<tr>
<td>10:47 - 10:57</td>
<td>Indonesian perspective and algorithm in management of urethral stricture disease</td>
<td>K. Adi, Bandung (ID)</td>
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<tr>
<td>11:07 - 11:47</td>
<td>Urinary stones</td>
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<td>11:17 - 11:27</td>
<td>FURS: Long life and mentoring</td>
<td>B. Soebhali, Samarinda (ID)</td>
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<tr>
<td>11:27 - 11:37</td>
<td>The lost art of open stone surgery for huge complex complete staghorn stone</td>
<td>T. Lwin, Yangon (MM)</td>
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<tr>
<td>11:47 - 12:12</td>
<td>A new life!</td>
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<tr>
<td>11:47 - 11:57</td>
<td>Low-intensity ESWT: An Asian tsunami breaking the horizon</td>
<td>C. Teo, Singapore (SG)</td>
</tr>
<tr>
<td>11:57 - 12:07</td>
<td>Kidney transplantation experience in Indonesia: A multicentric study</td>
<td>E.A. Nugroho, Semarang (ID)</td>
</tr>
<tr>
<td>12:07 - 12:12</td>
<td>The European Association of Urology in terms of networking, education and the promotion of evidence-based working practice</td>
<td>C.R. Chapple, Sheffield (GB)</td>
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<tr>
<td>12:12 - 12:15</td>
<td>Closing remarks</td>
<td>C.R. Chapple, Sheffield (GB)</td>
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<td>C.C.M. Lei, Kuching (MY)</td>
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</table>
EAU History Office: Danish contributions to urology and more

Specialty session

Location: Orange Area, Room 2 (Level 0)
Chairs: J.T. Andersen, Charlottenlund (DK)  
P.E. Van Kerrebroeck, Maastricht (NL)

Aims and objectives of this session
This session aims to highlight the contributions by Danish (as well as Nordic) urologists to urology. Additionally EAU History Office Chairman Prof. Van Kerrebroeck will give a talk on Ernest Desnos, who's name is attached to the EAU's newest Award. Dr. Mattelaer will present his latest book, and the History Session ends with a look at urologists who participated in the First World War.

09:15 - 09:20
Welcome and introduction
J.T. Andersen, Charlottenlund (DK)  
P.E. Van Kerrebroeck, Maastricht (NL)

09:20 - 09:35
The historical development of Nordic Urology with an emphasis on the collaboration within The Scandinavian Association of Urology
C. Beisland, Bergen (NO)

09:35 - 09:40
Discussion

09:40 - 09:47
The development of Urology as an independent speciality in Denmark
J.T. Andersen, Charlottenlund (DK)

09:47 - 09:50
Discussion

09:50 - 10:05
Hans Henrik Holm: A pioneer in urology and urological ultrasound
J.K. Kristensen, Gentofle (DK)

10:05 - 10:10
Discussion

10:10 - 10:25
Tage Hald: A pioneer in lower urinary tract dysfunction
J. Nordling, Herlev (DK)

10:25 - 10:30
Discussion

10:30 - 10:45
The foundation of a Scientific Society (ICCS) and what it has achieved
J.C. Djurhuus, Aarhus (DK)
## Scientific Programme - EAU18 Copenhagen

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<td>10:45 - 10:50</td>
<td>Discussion</td>
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<tr>
<td>10:50 - 11:05</td>
<td>Break</td>
</tr>
<tr>
<td>11:05 - 11:20</td>
<td><strong>Ernest Desnos and the first winner of the EAU Ernest Desnos Prize</strong>&lt;br&gt;P.E. Van Kerrebroeck, Maastricht (NL)</td>
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<tr>
<td>11:20 - 11:25</td>
<td>Discussion</td>
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<tr>
<td>11:25 - 11:40</td>
<td><strong>For this relief, much thanks! Peeing in art</strong>&lt;br&gt;J. Mattelaer, Kortrijk (BE)</td>
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<tr>
<td>11:40 - 11:45</td>
<td>Discussion</td>
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<tr>
<td>11:45 - 12:00</td>
<td><strong>A centenary: British urologists in the Great War</strong>&lt;br&gt;J. Goddard, Leicester (GB)</td>
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<td>12:00 - 12:05</td>
<td>Discussion</td>
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<tr>
<td>12:05 - 12:15</td>
<td><strong>Closing remarks</strong>&lt;br&gt;J.T. Andersen, Charlottenlund (DK)&lt;br&gt;P.E. Van Kerrebroeck, Maastricht (NL)</td>
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### Joint Session of the European Association of Urology (EAU) and the Iranian Urological Association (IUA)

**Urology beyond Europe**

**Friday 16 March**
**09:45 - 12:15**

**Location:** Orange Area, Room 3 (Level 0)

**Chairs:**
- A. Basiri, Tehran (IR)
- J. Rassweiler, Heilbronn (DE)

**Aims and objectives of this session**
This session of EAU and IUA will provide a platform for the exchange of treatment concepts and perspectives, in the light of differences in disease distribution and available equipment and expertise, by key opinion leaders in the respective fields in urology. The delegates will be stimulated to actively participate in discussions on different topics.

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<tr>
<th>Time</th>
<th>Session Title</th>
<th>EAU Representative</th>
<th>IUA Representative</th>
</tr>
</thead>
<tbody>
<tr>
<td>09:45 - 09:50</td>
<td>Welcome and introduction</td>
<td>J. Rassweiler, Heilbronn (DE)</td>
<td></td>
</tr>
<tr>
<td>09:50 - 10:19</td>
<td>Endourology: How to approach recurrent ureteropelvic junction obstruction</td>
<td>EAU representative: SMART-pyeloplasty</td>
<td>IUA representative: Laparoscopic pyeloplasty</td>
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<td>A.S. Gözen, Heilbronn (DE)</td>
<td>A. Basiri, Tehran (IR)</td>
</tr>
<tr>
<td>10:19 - 11:17</td>
<td>Renal tumours: Partial vs. radical nephrectomy for T1b tumours</td>
<td>EAU representative: Partial nephrectomy (laparoscopic and open)</td>
<td>IUA representative: Radical nephrectomy (laparoscopic and open)</td>
</tr>
<tr>
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<td>P.L. Chlosta, Cracow (PL)</td>
<td>M.H. Radfar, Tehran (IR)</td>
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**Scientific Programme - EAU18 Copenhagen**
<table>
<thead>
<tr>
<th>Time</th>
<th>Session Title</th>
<th>Presenters</th>
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<tbody>
<tr>
<td>11:17 - 11:46</td>
<td>Bladder cancer: Extended vs. standard lymph node dissection</td>
<td>P. Albers, Düsseldorf (DE)</td>
</tr>
<tr>
<td>11:29 - 11:41</td>
<td>IUA representative: Standard lymph node dissection</td>
<td>M. Ayati, Tehran (IR)</td>
</tr>
<tr>
<td>11:41 - 11:46</td>
<td>Questions and answers</td>
<td></td>
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<tr>
<td>11:46 - 12:10</td>
<td>Andrology: Varicocelectomy before ART (Yes/No)</td>
<td></td>
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<tr>
<td>11:58 - 12:10</td>
<td>EAU representative: No</td>
<td>N. Sofikitis, Ioannina (GR)</td>
</tr>
<tr>
<td>12:10 - 12:15</td>
<td>Closing remarks</td>
<td>A. Basiri, Tehran (IR)</td>
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5th ESO Prostate Cancer Observatory: Innovation and care in the next 12 months
Specialty session

Friday 16 March
10:45 - 12:30

Location: Green Area, Room 2 (Level 0)
Chairs: S. Joniau, Leuven (BE)
R. Valdagni, Milan (IT)

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

The forecast by each Panel Member is given in the form of take-home concise messages with 8-minute slide presentation followed by 2 minutes of discussion for each topic. The forecast will be discussed by the panel.

10:45 - 10:50
Introduction and presentation of the 2017 predictions (EAU17 Congress)
R. Valdagni, Milan (IT)

10:50 - 11:00
The researcher’s perspective
H.G. Lilja, New York (US)

11:00 - 11:10
The urologist’s perspective on surgery
A. Briganti, Milan (IT)

11:10 - 11:20
The urologist’s perspective on active surveillance
K. Touijer, New York (US)

11:20 - 11:30
The imaging specialist’s perspective on MRI
I.G. Schoots, Rotterdam (NL)

11:30 - 11:40
The pathologist’s perspective
R. Montironi, Ancona (IT)

11:40 - 11:50
The radiation oncologist’s perspective
A. Tree, Sutton (GB)

11:50 - 12:00
The medical oncologist’s perspective
A. Choudhury, Manchester (GB)

12:00 - 12:10
The imaging specialist’s perspective on PSMA
T. Maurer, Munich (DE)
<table>
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<th>Time</th>
<th>Session Title</th>
<th>Presenter</th>
<th>Location</th>
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<tr>
<td>12:10 - 12:25</td>
<td>The patient's perspective</td>
<td>L. Denis</td>
<td>Antwerp (BE)</td>
</tr>
<tr>
<td>12:25 - 12:30</td>
<td>Discussion and take-home messages</td>
<td>R. Valdagni</td>
<td>Milan (IT)</td>
</tr>
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</table>
Renal tumours: Novel approaches to overcome therapy resistance

Poster Session 04

Location: Red Area, Room 1 (Level 0)

Chairs: K. Junker, Homburg (DE)
V. Ficarra, Messina (IT)

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.

State-of-the-art lecture Mechanisms of therapy resistance in renal cancer
K. Junker, Homburg (DE)

37 Targeting metabolism re-programming as a therapy for drug-resistant renal cell carcinoma
By: Yoshino H., Miyamoto K., Yonemori M., Sugita S., Sakaguchi T., Enokida H., Nakagawa M.
Kagoshima University, Dept. of Urology, Kagoshima, Japan

38 Effect of a ketogenic diet on the clear cell renal cell carcinoma cell growth
By: Benoit M. ¹, Fortier E. ¹, Barth M. ², Procaccio V. ², Bourreau J. ³, Henrion D. ³, Bigot P. ¹
¹University Hospital of Angers, Dept. of Urology, Angers, France, ²University Hospital of Angers, Dept. of Genetics, Angers, France, ³UMR CNRS 6015 - UMR INSERM 1083, MITOVASC, Angers, France

* 39 Bromodomain protein BRD4 inhibition as a novel therapeutic approach in sunitinib-resistant renal cell carcinoma
By: Sakaguchi T., Yoshino H., Sugita S., Osako Y., Yonemori M., Miyamoto K., Nakagawa M., Enokida H.
Graduate school of Medical and Dental Sciences, Kagoshima University, Dept. of Urology, Kagoshima, Japan

40 Sorafenib-triggered stress granules promote resistance in renal cancer cells by recruiting anti-apoptotic cyclooxygenase 2
By: Chen W., Zhao X., Qi W., Cao W., Diao W., Guo H.
Medical School of Nanjing University, Dept. of Urology, Nanjing, China

41 DNA repair pathway genes were altered during TKI resistance in metastatic renal cell carcinoma
**42**

4-miRNA score predicts the individual metastatic risk of renal cell carcinomas

By: Heinzelmann J.¹, Arndt M.¹, Pleyers R.¹, Hoelters S.¹, Fehlmann T.², Pryanulkin A.³, Schaeffeler E.⁴, Bohle R.³, Gajda M.⁵, Wunderlich H.⁶, Janssen M.¹, Stöckle M.¹, Junker K.¹

¹Saarland University, Dept. of Urology and Pediatric Urology, Homburg, Germany, ²Saarland University, Dept. of Clinical Bioinformatics, Saarbruecken, Germany, ³Saarland University, Institute of Pathology, Homburg, Germany, ⁴Dr. Margarete Fischer-Bosch Institute of Clinical Pharmacology, Stuttgart, Germany, ⁵Jena University Hospital, Institute of Pathology, Jena, Germany, ⁶St. Georg Clinic Eisenach, Dept. of Urology, Eisenach, Germany

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**43**

Withdrawn

To be confirmed

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**44**

High CXC chemokine receptor 1 level predict poor survival in non-metastatic clear-cell renal cell carcinoma patients

By: Zhu Y., Liu Z., Fu H., Zhang J., Ye D.
Fudan University Shanghai Cancer Center, Dept. of Urology, Shanghai, China

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**45**

Role of renal cell carcinoma in the induction of neutrophil dedifferentiation into myeloid-derived suppressor-like cells and the expression of immunosuppressive markers

By: Ouzaid I.¹, Ko J.², Rayman P², Rini B.³, Finke J.²

¹Bichat Hospital, Dept. of Urology, Paris, France, ²Cleveland Clinic Lerner Research Institute, Dept. of Immunology, Cleveland, United States of America, ³Cleveland Clinic Taussig Cancer Center, Dept. of Medical Oncology, Cleveland, United States of America

---

**46**

Karyotyping of resected clear cell renal cell carcinoma: Loss of chromosome 4 predicts a worse disease-specific survival

By: Van Hattem M.W.¹, Renkens L.¹, Debieck-Rychter M.², Berkers J.¹, Van Cleynenbreugel B.¹, Everaerts W.¹, Joniau S.¹, Albersen M.¹

¹University Hospitals Leuven, Dept. of Urology, Leuven, Belgium, ²KU Leuven - University of Leuven, Dept. of Human Genetics, Leuven, Belgium

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**47**

Effect of African-American race on cancer specific mortality differs according to clear-cell vs. non-clear cell histologic subtype in metastatic renal cell carcinoma

By: Marchioni M.¹, Harmouch S.², Bandini M.³, Preisser F.⁴, Nazzani S.⁵, Tian Z.², Bondarenko H.D.², Kapoor A.⁶, Cindolo L.⁷, Briganti A.⁸, Shariat S.F.⁹, Schips L.¹⁰, Karakiewicz P.J.²

¹Università Degli Studi "G.D'Annunzio", Dept. of Urology, Chieti, Italy, ²Cancer
Prognostics and Health Outcomes Unit, University of Montreal Health Center, Dept. of Urology, Montreal, Canada, 3Division of Oncology/Unit of Urology, URI, IRCCS Ospedale San Raffaele; Vita-Salute San Raffaele University, Dept. of Urology, Milan, Italy, 4Martini-Klinik Prostate Cancer Center, University Hospital Hamburg-Eppendorf, Dept. of Urology, Hamburg, Germany, 5Academic Department of Urology, IRCCS Policlinico San Donato, University of Milan, Dept. of Urology, Milan, Italy, 6Division of Urology, McMaster University, Dept. of Urology, Hamilton, Canada, 7ASL Abruzzo 2, Dept. of Urology, Chieti, Italy, 8Division of Oncology/Unit of Urology, URI, IRCCS Ospedale San Raffaele, Milan, Italy, Dept. of Urology, Milan, Italy, 9Department of Urology, Medical University of Vienna, Dept. of Urology, Vienna, Austria, 10SS Annunziata Hospital, Dept. of Urology, Chieti, Italy

Summary
K. Junker, Homburg (DE)
Prostate cancer metabolic alterations
Poster Session 05

**Location:** Blue Area, Room 2 (Level 0)

**Chairs:**
- C.P. Evans, Sacramento (US)
- S. Füssel, Dresden (DE)
- W.M. Van Weerden, Rotterdam (NL)

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.

**State-of-the-art lecture** Novel patient-derived models for studying advanced prostate cancer
W.M. Van Weerden, Rotterdam (NL)

**48**

Metabolic syndrome increases the risk of upgrading Epstein 2015 Gleason score in patients with prostate cancer on biopsy: A radical prostatectomy multicenter cohort study

By: De Nunzio C.¹, Simone G.², Leonardo C.³, Mastroianni R.⁴, Muto G.⁴, Gallucci M.⁴, Lombardo R.¹, De Dominicis C.³, Cancrini F.¹, Tema G.¹, Tubaro A.¹
¹Sant' Andrea Hospital - Sapienza University, Dept. of Urology, Rome, Italy, ²Regina Elena National Cancer Institute, Dept. of Urology, Rome, Italy, ³Policlinico Umberto 1, Dept. of Urology, Rome, Italy, ⁴Regina Elena National Cancer Institute, Dept. of Urology, Rome, Italy

**49**

Defining the role of autophagy in urogenital homeostasis and prostate tumorigenesis using an in vivo shRNA mouse model

By: Jaulim A.¹, Cassidy L.¹, Young A.¹, Gnanapragasam V.J.², Pacey S.³, Narita M.¹
¹CRUK Cambridge Institute, University of Cambridge, Dept. of Surgery, Cambridge, United Kingdom, ²University of Cambridge, Dept. of Urology, Cambridge, United Kingdom, ³Addenbrooke's Hospital, Dept. of Oncology, Cambridge, United Kingdom

**50**

Upregulation of cholesterol and steroid biosynthesis pathways in prostate cancer cells is associated with diminished response to enzalutamide in a 3-dimensional spheroid co-culture model

By: Eder I.¹, Weber A.¹, Höfer J.¹, Klocker H.¹, Neuwirt H.²
¹Medical University Innsbruck, Dept. of Urology, Innsbruck, Austria, ²Medical University Innsbruck, Dept. of Internal Medicine IV - Nephrology and Hypertension, Innsbruck, Austria
51  **Withdrawn**  
To be confirmed

52  **Involvement of EZH2 in aerobic glycolysis of prostate cancer through miR-181b/ HK2 axis**

By: Tao T., Shen Z., Xiao J.  
Anhui provincial hospital, Dept. of Urology, Hefei, China

53  **New patient-derived ex vivo models for rapid preclinical testing with prostate cancer**

By: Obinata D.1, Lawrence M.1, Taylor R.1, Sandhu S.2, Porter L.3, Clark A.3, Ashikari D.3, Selth L.4, Fujiwara K.5, Inoue S.6, Takahashi S.7, Risbridger G.1  
1Monash University, Dept. of Anatomy and Developmental Biology, Melbourne, Australia,  
2The University of Melbourne, Dept. of Oncology, Melbourne, Australia,  
3Monash University, Anatomy and Developmental Biology, Melbourne, Australia,  
4University of Adelaide, Dame Roma Mitchell Cancer Research Laboratories, Adelaide, Australia,  
5Nihon University School of Medicine, Dept. of General Medicine, Tokyo, Japan,  
6Tokyo Metropolitan Institute of Gerontology, Dept. of Functional Biogerontology, Tokyo, Japan,  
7Nihon University School of Medicine, Dept. of Urology, Tokyo, Japan

54  **Targeting lactate dehydrogenase-A promotes docetaxel induced cytotoxicity predominantly in castration-resistant prostate cancer cells**

By: Muramatsu H.1, Sumitomo M.1, Sugie M.1, Morinaga S.1, Kajikawa K.1, Kobayashi I.1, Nishikawa G.1, Kato Y.1, Watanabe M.1, Kanao K.1, Nakamura K.1, Yoshikawa K.2  
1Aichi Medical University, Dept. of Urology, Nagakute, Japan,  
2Aichi Medical University, Division of Research Creation, Research creation support center, Nagakute, Japan

55  **MiR-138-directed transcriptional activation of β-catenin leads to induction of alphamethylacyl-CoA racemase in prostate cancer cells**

By: Erdmann K., Kaulke K., Fuessel S., Wirth M.  
TU Dresden, Dept. of Urology, Dresden, Germany

*56  **Diabetes associated alterations of the androgen receptor signaling pathway in patients with prostate cancer**

1University of Tübingen, Dept. of Urology, Tübingen, Germany,  
2University of Tübingen, Dept. of Internal Medicine, Division of Endocrinology, Diabetology, VascularDisease, Nephrology and Clinical Chemistry, Tübingen, Germany,  
3University of Tübingen, Dept. of Pathology, Tübingen, Germany,  
4University of Tübingen, Institute for Diabetes Research and Metabolic Diseases (IDM) of the Helmholtz Center Munich, Tübingen, Germany
57 Genomic analysis of primary high-risk prostate cancer tumors with metastatic recurrence identifies antizyme inhibitor 1 as a regulator of cancer cell migration through regulation of collagen expression

By: Van Den Broeck T.¹, Moris L.¹, Gevaert T.¹, Prekovic S.², Tosco L.¹, Smeets E.², Lehrer J.³, Haddad Z.³, Helsen C.², Margrave J.³, Boeckx B.⁴, Lambrechts D.⁴, Van Poppel H.¹, Everaerts W.¹, Chellisery J.³, Erho N.³, Buerki C.³, Davicioni E.³, Joniau S.¹, Claessens F.²

¹University Hospitals Leuven, Dept. of Urology, Leuven, Belgium, ²Department of Cellular and Molecular Medicine, KU Leuven, Laboratory of Molecular Endocrinology, Leuven, Belgium, ³GenomeDx Biosciences, Dept. of Research and Development, Vancouver, Canada, ⁴Vesalius Research Center, VIB, KU Leuven, Laboratory of Translational Genetics, Leuven, Belgium

58 Shift of mitochondrial oxidative phosphorylation is associated with mtDNA mutational load in primary prostate cancer tissue

By: Schöpf B.¹, Weissensteiner H.¹, Schäfer G.², Fendt L.¹, Gnaiger E.³, Klocker H.⁴

¹Medical University Innsbruck, Division of Epidemiology, Dept. of Medical Genetics, Innsbruck, Austria, ²Medical University Innsbruck, Dept. of Pathology, Innsbruck, Austria, ³Medical University Innsbruck, D. Swarovski Laboratory, Dept. of General and Transplant Surgery, Innsbruck, Austria, ⁴Medical University Innsbruck, Division of Experimental Urology, Dept. of Urology, Innsbruck, Austria

59 ADAR1 is highly expressed in primary prostate cancer and correlated with CD8+ T-lymphocytes density

By: Taverna G.¹, Grizzi F.², Melegari S.¹, Bozzini G.¹, Justich M.¹, Seveso M.¹, Colombo P.³, De Francesco O.¹, Lazzeri M.⁴, Hurle R.⁴, Benetti A.⁴, Casale P.⁴, Zandegiacomo S.⁴, Pasini L.⁴, Peschechera R.⁴, Lughezzani G.⁴, Buffi N.⁴, Mandressi A.¹, Guazzoni G.F.⁴

¹Humanitas Mater Domini, Dept. of Urology, Castellanza, Italy, ²Humanitas Clinical and Research Center, Dept. of Immunology and Inflammation, Rozzano (Milan), Italy, ³Humanitas Clinical and Research Center, Dept. of Pathology, Rozzano (Milan), Italy, ⁴Humanitas Clinical and Research Center, Dept. of Urology, Rozzano (Milan), Italy

60 Withdrawn
To be confirmed
Survivorship in prostate cancer: It is all about patients
Poster Session 06
Location: Blue Area, Room 5 (Level 0)
Chairs: J. Dowling, Dublin (IE)
M. Lazzeri, Milan (IT)

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.

61 Long term outcomes for men in a screening trial with an initial benign biopsy: A population-based cohort
By: Arnsrud Godtman R., Palmstedt E., Stranne J., Hugosson J.
Institute of Clinical Sciences, Dept. of Urology, Gothenburg, Sweden

62 Validating the use of the "aging men’s symptoms score" as screening tool for anxiety and depression in non-metastatic prostate cancer patients receiving androgen deprivation therapy
By: O'Cathail M. 1, Hosni S. 1, Little J. 1, Cox A. 2, Santhanam S. 1
1Nottingham University Hospitals, Dept. of Oncology & Radiotherapy, Nottingham, United Kingdom, 2Royal United Hospitals of Bath, Dept. of Oncology & Radiotherapy, Bath, United Kingdom

63 From active surveillance to active survivor: A pilot study
By: Pihl G.T. 1, Oebro L.F. 1, Ammentorp J. 2, Osther P. 1
1Lillebaelt Hospital, Dept. of Urology, Vejle, Denmark, 2University of Southern Denmark, Dept. of Regional Health Research, Odense, Denmark

64 Can active surveillance really reduce the harms of overdiagnosing prostate cancer? A reflection of real life clinical practice in the PRIAS study
By: Drost F.J. 1, Bangma C. 2, Kakehi Y. 3, Pickles T. 4, Rannikko A. 5, Valdagni R. 6, Roobol M. 2
1Erasmus MC University Medical Center, Dept. of Urology and Radiology, Rotterdam, Netherlands, The, 2Erasmus MC University Medical Center, Dept. of Urology, Rotterdam, Netherlands, The, 3Kagawa University Faculty of Medicine, Dept. of Urology, Kagawa, Japan, 4British Columbia Cancer Agency, Dept. of Radiation Oncology, Vancouver, Canada, 5Helsinki University Central Hospital, Dept. of Urology, Helsinki, Finland, 6Fondazione IRCCS Istituto Nazionale dei Tumori, Prostate Cancer Program and Radiation Oncology, Milan, Italy
A single educational seminar increases confidence and decreases dropout from active surveillance 5 years following diagnosis

By: Kinsella J.E. 1, Beckman K. 2, Cahill D. 1, Elhage O. 3, Popert R. 3, Brown C. 4, Cathcart P. 3, Van Hemelrijck M. 2, Challacombe B. 3

1The Royal Marsden Hospital, Dept. of Uro-Oncology, London, United Kingdom, 2Kings College London, Dept. of Translational Oncology and Urology Research, London, United Kingdom, 3Guys and St Thomas NHS Foundation Trust, Dept. of Urology, London, United Kingdom, 4Kings Hospital, Dept. of Urology, London, United Kingdom

Prostate cancer active surveillance: Longitudinal health-related quality of life, IPSS and IIEF changes in the Finnish arm of the prospective PRIAS study with up to nine-years of follow-up

By: Lokman U. 1, Vasarainen H. 2, Lahdensuo K. 2, Erickson A. 3, Mirtti T. 3, Rannikko A. 2

1University of Helsinki, Dept. of Urology, Helsinki, Finland and TOBB University of Economics and Technology, Faculty of Medicine, Dept. of Urology, Ankara, Turkey, 2University of Helsinki and Helsinki University Hospital, Dept. of Urology, Helsinki, Finland, 3University of Helsinki, Institute for Molecular Medicine Finland (FIMM), Dept. of Pathology, Helsinki, Finland

Encouraging every patient to be actively involved in decision-making, or ensuring patients’ preferred level of involvement

By: Van Stam M.A. 1, Pieterse A. 2, Van Der Poel H. 3, Bosch R. 1, Tillier C. 3, Horenblas S. 3, Aaronson N. 4

1UMC Utrecht, Dept. of Urology, Utrecht, Netherlands, The, 2LUMC, Dept. of Medical Decision Making, Leiden, Netherlands, The, 3NKI-AvL, Dept. of Urology, Amsterdam, Netherlands, The, 4NKI-AVL, Dept. of Psychosocial Research and Epidemiology, Amsterdam, Netherlands, The

Patients with urological malignancy are 5 times more likely to commit suicide: A large national cohort study


1St Georges University Hospitals NHS Foundation Trust, Dept. of Urology, London, United Kingdom, 2College of Medical and Dental Sciences, University of Birmingham, Dept of Urology, Birmingham, United Kingdom, 3Queen Elizabeth Hospital, University Hospitals Birmingham NHS Foundation Trust, Dept. of Urology, Birmingham, United Kingdom, 4St Georges University Hospitals NHS Foundation Trust, Dept. of Urology, Birmingham, United Kingdom

Satisfaction with care among men with localized prostate cancer - a nationwide population based study

By: Bergengren O. 1, Garmo H. 2, Bratt O. 3, Holmberg L. 1, Johansson E. 1, Bill-Axelson A. 1
Association between radiation therapy, surgery, or observation for localized high risk prostate cancer and patient-reported outcomes after 10 years in Asian population

By: Shi Q., Liao X., Xiaonan Z., Lu Y., Qiang W.
West China Hospital, Sichuan University, Dept. of Urology, Institute of Urology, Chengdu, China

Care pathways for the management of metastatic and castration-resistant prostate cancer in the era of novel therapeutic options: Experience of the EAU guidelines office

By: Dimitropoulos K., De Santis M., Mason M., Cornford P., Rouviere O., Bolla M., Briganti A., Fossati N., Gandaglia G., Maclennan S., Maclennan S., N'Dow J., Omar I., Plass K., Royle J., Van Den Bergh R., Van Der Poel H., Wiegel T., Mottet N.

Aberdeen Royal Infirmary, Dept. of Urology, Aberdeen, United Kingdom, University of Warwick, Cancer Research Centre, Coventry, United Kingdom, Velindre Cancer Centre, Dept. of Clinical Oncology, Cardiff, United Kingdom, Royal Liverpool and Broadgreen Hospitals NHS Trust, Dept. of Urology, Liverpool, United Kingdom, Hospices Civils de Lyon, Edouard Herriot Hospital, Dept. of Radiology, Lyon, France, CHU Grenoble, Dept. of Radiation Therapy, Grenoble, France, IRCCS Ospedale San Raffaele, Unit of Urology/Division of Oncology, URI, Milan, Italy, University of Aberdeen, Academic Urology Unit, Aberdeen, United Kingdom, European Association of Urology, Guidelines Office, Arnhem, Netherlands, The, Netherlands Cancer Institute, Dept. of Urology, Amsterdam, Netherlands, The, University Hospital Ulm, Dept. of Radiation Oncology, Ulm, Germany, St. Etienne University Hospital, Dept. of Urology, St. Etienne, France

Lifestyle, anthropometry and cardiovascular risk factors does not explain increased risk of cardiovascular disease in prostate cancer patients


Danish Cancer Society Center for Research, Dept. of Survivorship, Copenhagen, Denmark, Danish Cancer Society Center for Research, Dept. of Diet, Genes and Environment, Copenhagen, Denmark, Danish Cancer Society Center for Research, Dept. of Virus, Lifestyle and Genes, Copenhagen, Denmark, Copenhagen Prostate Cancer Center, Dept. of Urology, Copenhagen, Denmark, Danish Cancer Society Center for Research, Head of Research, Copenhagen, Denmark, Danish Cancer Society Center for Research, Dept. of Statistics and Pharmacoepidemiology, Copenhagen, Denmark, Copenhagen University Hospital, Oncology Clinic, Copenhagen, Denmark

Evolution of quality of life of partners of patients suffering from prostate cancer (PCa) receiving gonadotropin-releasing hormone (GnRH) agonist treatment
Brain morphological features and cognitive impairment in prostate cancer patients with chronic androgen deprivation therapy

By: Plata Bello A.C. 1, Pérez Martin Y. 2, Perez González J.M. 3, González Mora J.L. 2, Concepción Masip T. 1, Plata Bello J. 2

1 University Hospital of Canary Islands, Dept. of Urology, La Laguna, Spain, 2 University Hospital of Canary Islands, Dept. of Neuroscience, La Laguna, Spain, 3 IMETISA, Dept. of Radiology, La Laguna, Spain
Evolving stone management
Video Session 01

Location: Green Area, Room 15 (Level 0)

Chairs: P.A. Geavlete, Bucharest (RO)
J-T. Klein, Ulm (DE)
A.L. Pastore, Rome (IT)

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

V01
The Matrioska technique in percutaneous nephrolithotomy
University of Milan, Dept. of Urology, Milan, Italy

V02
Micro-nephrolithotomy in a transplanted kidney: A peculiar indication for a niche procedure
1University of Milan, Dept. of Urology, Milan, Italy, 2University of Milan, Dept. of Renal Transplantation, Milan, Italy

V03
Complicated removal of an encrusted Allium™ ureteral stent
By: Keller E.X., De Coninck V., Rodriguez-Monsalve M., Doizi S., Traxer O.
Tenon Hospital, Assistance-Publique Hôpitaux de Paris. Pierre et Marie Curie University, Dept. of Urology, Paris, France

V04
ECIRS with disposable ureteroscope: Bilateral synchronous treatment
By: Angerri Feu O., Emiliani E., Sánchez-Martín F., Millán F., Villavicencio H.
Fundació Puigvert, Dept. of Urology, Barcelona, Spain

V05
Monoplane fluoroscopy simplified technique of percutaneous calyx puncture
By: Lezrek M., Tazi H., Aboufaraj M., Slimani A., Alami M., Ammani A.
1Military Hospital Moulay Ismail, Dept. of Urology, Meknes, Morocco, 2Al Ghassani Hospital, Dept. of Urology, Fes, Morocco, 3Medical University of Vienna, Dept. of Urology, Vienna, Austria

V06
Understanding non-contact laser lithotripsy for dusting – the popcorn effect: A video analysis
Our technique of retrograde intrarenal surgery in less than 5 year old children

By: Vaddi C.M., Paidakula R., Pashyakanti Mata S.S.
Preeti Urology & Kidney Hospital, Dept. of Urology, Hyderabad, India

Ureteroscopic holmium laser lithotripsy using the Moses technology

By: Aldoukhi A., Ghani K.
University of Michigan, Dept. of Urology, Ann Arbor, United States of America
### Abstract Session - Best Posters Regional Meetings

**Best Poster Regional meetings**

**Location:** Orange Area, Room 5 (Level 0)

**Friday 16 March**

10:00 - 12:00

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

Best posters presented at the time of the 4th Baltic Meeting in conjunction with the EAU

*Chairs:* F. Jankevicius, Vilnius (LT)  
M. Jievaltas, Kauno Rajonas (LT)

**BALTIC1** 5α-reductase inhibitors use and bladder cancer-specific mortality in a Finnish population-based cohort  
V. Mäkelä, Tampere (FI)

**BALTIC2** Acute kidney injury after partial nephrectomy for renal masses in the solitary kidney  
L. Suslov, Minsk (BY)

**BALTIC3** Effect of urine on cell line in vitro: Implication for urinary tract regeneration  
F. Kowalski, ()

**BALTIC4** Salvage radiation therapy following radical prostatectomy. First results of a multicenter Lithuanian study  
M. Kincius, Vilnius (LT)

**BALTIC5** Survival in patients with locally advanced prostate cancer: A population-based study  
S. Polyakov, Minsk (BY)

**BALTIC6** First results of simultaneous kidney-pancreas transplantations in Estonia  
P. Veskimäe, Tartu (EE)

Best posters presented at the time of the 17th EAU Central European Meeting in conjunction with the 63rd annual conference of the Czech Urological Society

*Chairs:* P.L. Chlosta, Cracow (PL)  
M. Hora, Plzeň (CZ)

**CEM1** Modifications of laparoscopic ureteroneostomy  
P. Macek, Prague 2 (CZ)
| CEM2 Orthoplasty, an important part of the hypospadias cripple repair  
A. Andresanu, Sector 3, Bucuresti (RO) |
| CEM3 Evaluation of urological infections in patients with multiple sclerosis - a prospective study  
R. Wasserbauer, Brno - Bohunice (CZ) |
| CEM4 Genetic biomarkers related with prostate cancer: New perspectives  
B.S. Sandu, Bucharest (RO) |
| CEM5 Our experience with laparo-endoscopic single-site surgery (LESS) nephrectomy in clinical practice  
Š. Nykodýmová, Praha (CZ) |
| CEM6 Does MRI-TRUS fusion increase the detection rate of prostate cancer in primary biopsy setting in patients with PSA ≤20ng/ml?  
I. Minárik, Hostivice (CZ) |
| CEM7 Molecular and therapeutic aspects of advanced urachal cancer  
O. Modos, Budapest (HU) |
| CEM8 68Ga-PSMA 11 ligand PET/CT and PET/MRI in patients with biochemical recurrence after definitive treatment for clinically non-metastatic prostate cancer - detection and impact on therapeutic management  
B. Grubmüller, Vienna (AT) |
| CEM9 Prostate cancer and polymorphism in IGFBP-3 gene  
R. Dusenka, Martin (SK) |
| CEM10 The experiences with the surgical treatment of severe stress urinary incontinence in male with the implantation of artificial urethral sphincter ZSI 375 Licak, Presov (SK) |
| CEM11 Radical prostatectomy in high and highest risk prostate cancer. Is it worth it?  
F. Kowalski, Bydgoszcz (PL) |
| CEM12 Comparison of two artificial urinary sphincters for the treatment of male urinary Incontinence  
D. Sujecki, Warszawa (PL) |
Common problems in bladder cancer; evidence based debates

Specialty Session

Friday 16 March
12:30 - 15:30

Location: Green Area, Room 1 (Level 0)

Chairs: H.B. Grossman, Houston (US)
A.M. Kamat, Houston (US)
A. Stenzl, Tübingen (DE)

Aims and objectives of this session
After completion of this activity, participants will be able to:
• Discuss complex clinical changes in treating patients with bladder cancer.
• Discuss treatment alternatives in different bladder cancer disease states.
• Discuss the rationale for selecting particular therapy when a variety of treatment options exist.
• Discuss the clinical implications of biomarkers for diagnosis and prognosis.

12:30 - 12:33
Welcome and introduction
A.M. Kamat, Houston (US)

12:33 - 12:55
Case-based Debate: Does variant histology change management of non-invasive bladder cancer?

12:33 - 12:35
Case presenter
M. Burger, Regensburg (DE)

12:35 - 12:45
Discussants
A.M. Kamat, Houston (US)
D. McConkey, Houston (US)

12:45 - 12:48
Summary
M. Burger, Regensburg (DE)

12:48 - 12:55
Questions and answers

12:55 - 13:17
Case-based Debate: My patient has a normal cystoscopy but a positive urine marker: What now?

12:55 - 12:57
Case presenter
J. Palou, Barcelona (ES)

12:57 - 13:07
Discussants
M. Brausi, Modena (IT)
J.W.F. Catto, Sheffield (GB)

13:07 - 13:10
Summary
J. Palou, Barcelona (ES)

13:10 - 13:17
Questions and answers
<table>
<thead>
<tr>
<th>Time</th>
<th>Case-based Debate</th>
<th>Case presenter</th>
<th>Discussants</th>
<th>Summary</th>
<th>Questions and answers</th>
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<tbody>
<tr>
<td>13:39 - 14:01</td>
<td><strong>How should I treat a patient with initial T1HG disease and no tumour on re-TUR?</strong></td>
<td>S. Shariat, Vienna (AT)</td>
<td>J.W.F. Catto, Sheffield (GB)</td>
<td>S. Shariat, Vienna (AT)</td>
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<tr>
<td>14:01 - 14:23</td>
<td><strong>What to do now that my patient’s tumour has been molecularly classified (and does it matter!)?</strong></td>
<td>A. Stenzl, Tübingen (DE)</td>
<td>J. Bellmunt, Boston (US)</td>
<td>A. Stenzl, Tübingen (DE)</td>
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<tr>
<td>14:23 - 14:45</td>
<td><strong>How should I manage a patient with tumour recurrence despite adequate BCG?</strong></td>
<td>A.M. Kamat, Houston (US)</td>
<td>D. McConkey, Houston (US)</td>
<td>A.M. Kamat, Houston (US)</td>
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</table>
| 14:25 - 14:35| Discussants                      | P. Gontero, Turin (IT)  
                | J. Palou, Barcelona (ES)                                               |
| 14:35 - 14:38| Summary                          | A.M. Kamat, Houston (US)                                               |
| 14:38 - 14:45| Questions and answers            |                                                                        |
| 14:45 - 15:07| Case-based Debate:              | How to treat multi-focal Ta, HG disease if BCG is unavailable?          |
| 14:45 - 14:47| Case presenter                   | J.A. Witjes, Nijmegen (NL)                                             |
| 14:47 - 14:57| Discussants                      | M. Brausi, Modena (IT)  
                | P-U. Malmström, Uppsala (SE)                                          |
| 14:57 - 15:00| Summary                          | J.A. Witjes, Nijmegen (NL)                                             |
| 15:00 - 15:07| Questions and answers            |                                                                        |
| 15:07 - 15:29| Case-based Debate:              | Marker-driven use of NAC in (T2) urothelial cancer in an otherwise healthy patient? |
| 15:07 - 15:09| Case presenter                   | H.B. Grossman, Houston (US)                                            |
| 15:09 - 15:19| Discussants                      | J. Bellmunt, Boston (US)  
                | P. Black, Vancouver (CA)                                              |
| 15:22 - 15:29| Questions and answers            |                                                                        |
Renal tumours: Heterogeneity, molecular pathology and biomarkers

Friday 16 March
12:30 - 14:00

Location: Red Area, Room 1 (Level 0)
Chairs: L. Mengual, Barcelona (ES)
W. Nakata, Sakai city (JP)
M. G. B. Tran, Cambridge (GB)

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.

State-of-the-art lecture Renal cell cancer heterogeneity
M. G. B. Tran, Cambridge (GB)

75
Germline mutations of renal tumor predisposition genes in early-onset patients
By: Wu J.1, Wang H.1, Ricketts C.2, Linehan M.2, Zhu Y.1, Ye D.1, Gu C.1
1Fudan University Shanghai Cancer Center, Dept. of Urology, Shanghai, China, 2National Cancer Institute, Dept. of Urology, Bethesda, United States of America

76
SETD2-mediated loss of miR-10b determines MAP4K4 activation in renal cell carcinoma
By: Yan L., Li H., Zhang Y., Xu H., Ye Z.
Tongji Hospital, Tongji Medical College, Huazhong University of Science Technology, Dept. of Urology, Wuhan, China

77
Evaluation of concomitant medication with non-anticancer drugs in patients with surgically treated clear cell renal cell carcinoma: Impact on prognosis, cell-cycle activity, and proliferation
By: Rausch S.1, Neumann E.1, Klaiber P.1, Freitag K.1, Hennenlotter J.1, Kruck S.1, Scharpf M.2, Fend F.2, Schaeffeler E.3, Schwab M.3, Stenzl A.1, Bedke J.1
1Eberhard-Karls-University Tuebingen, Dept. of Urology, Tuebingen, Germany, 2Eberhard-Karls-University Tuebingen, Dept. of Pathology, Tuebingen, Germany, 3Dr. Margarethe Fischer-Bosch-Institute for Clinical Pharmacology, Institute of Clinical Pharmacology (IKP), Stuttgart, Germany

78
Extracellular vesicles isolated from human renal cell carcinoma tissues disrupt vascular endothelial cell morphology via azurocidin
By: Uemura M.1, Jingushi K.2, Nakano K.1, Hayashi Y.1, Wamg C.1, Ishizuya Y.1, Yamamoto Y.1, Matsuzaki K.1, Hayashi T.1, Kinouchi T.1, Kato T.1, Kawashima A.1, Ujike T.1, Nagahara A.1, Fujita K.1, Nonomura N.1
Absolute copy number and fragments size of circulating cell-free DNA are useful markers for renal cell carcinoma

By: Uemura M.1, Yamamoto Y.1, Nakano K.1, Hayashi Y.1, Wang C.1, Ishizuya Y.1, Matsuzaki K.1, Hayashi T.1, Kinouchi T.1, Jinguishi K.2, Kato T.1, Kawashima A.1, Nagahara A.1, Fujita K.1, Nonomura N.1

The role of the breast cancer resistance protein (BCRP/ABCG2) in clear cell renal cell carcinoma – a characterization study

By: Reustle A.1, Fisel P.1, Renner O.1, Büttner F.1, Winter S.1, Rausch S.2, Kruck S.2, Nies A.1, Hennenlotter J.2, Scharpf M.3, Fend F.4, Stenzl A.2, Schwab M.1, Schaeffeler E.1, Bedke J.2

Utility value of the S3-score in metastatic and non-metastatic clear cell renal cell carcinoma for a molecular prediction of clinical outcome

By: Büttner F.1, Winter S.1, Rausch S.2, Hennenlotter J.2, Kruck S.2, Stenzl A.2, Scharpf M.3, Fend F.3, Agaimy A.4, Hartmann A.4, Schwab M.1, Schaeffeler E.1, Bedke J.2

Intra-tumor molecular heterogeneity of clear cell renal cell carcinoma seems to contribute to the diversity of response to targeted therapies

By: Hong B.1, Yang Y.2, Guo S.3, Li Q.3, Gong K.1, Zhang N.2

Plasma microRNA signature - a potential biomarker for differentiating benign from malignant renal lesions

By: Bar El A.1, Greenberg E.2, Baruch Nissim E.2, Markovits E.2, Fridman E.3, Hout Siloni G.4, Pasmanik-Chor M.5, Markel G.2, Ramon J.1
<table>
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<th>Number</th>
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<tr>
<td>84</td>
<td><strong>Prognostic impact of tumor-infiltrative lymphocytes and circulating cytokines in patients undergoing radical nephrectomy for localized renal cell carcinoma</strong></td>
<td>Iida K., Miyake M., Onishi K., Hori S., Morizawa Y., Gotoh D., Tatsumi Y., Onishi S., Nakai Y., Anai S., Tanaka N., Fujimoto K.</td>
<td>Sheba Medical Center, Dept. of Urology, Ramat Gan, Israel, Sheba Medical Center, Ella Lemelbaum institute for Immuno-Oncology, Ramat Gan, Israel, Sheba Medical Center, Dept. of Pathology, Ramat Gan, Israel, Sheba Medical Center, Cancer Research Center, Dept. of Pathology, Ramat Gan, Israel, G.S.W Faculty of Life Science at Tel-Aviv University, Dept. of Bioinformatics, Tel-Aviv, Israel</td>
</tr>
<tr>
<td>85</td>
<td><strong>SLC13A3 as a functional biomarker and determinant of racial discrepancies in renal cell carcinoma</strong></td>
<td>Hennig M., Jordan A., Kramer M., Merseburger A., Soloway M., Lokeshwar V.</td>
<td>Universitätsklinikum Schleswig-Holstein, Campus Lübeck, Dept. of Urology, Lübeck, Germany, University of Miami Miller School of Medicine, David and Sheila Funte Graduate Program in Cancer Biology, Miami, United States of America, Memorial Healthcare System, Dept. of Urology, Aventura, United States of America, Medical College of Georgia, Augusta University, Biochemistry and Molecular Biology, Augusta, United States of America</td>
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**Summary**

M. G. B. Tran, Cambridge (GB)
**Pembrolizumab (pembro) as first-line therapy in elderly patients (pts) with poor performance status with cisplatin-ineligible advanced urothelial cancer (UC): Results from Keynote-052**

By: Castellano D. ¹, Grivas P. ², Plimack E. ³, Balar A. ⁴, O'Donnell P. ⁵, Bellmunt J. ⁶, Powles T. ⁷, Hahn N. ⁸, De Wit R. ⁹, Bajorin D. ¹⁰, Ellison M.C. ¹¹, Frenkl T. ¹¹, Keefe S. ¹², Vuky J. ¹³

¹Hospital Universitario 12 de Octubre, Dept. of Oncology, Madrid, Spain, ²Cleveland Clinic, Dept. of Hematology/Medical Oncology Taussig Cancer Institute, Cleveland, United States of America, ³Fox Chase Cancer Center, Dept. of Oncology, Philadelphia, United States of America, ⁴Perlmutter Cancer Center, NYU Langone Medical Center, Dept. of Oncology, New York, United States of America, ⁵The University of Chicago Medical Center, Dept. of Oncology, Chicago, United States of America, ⁶Dana-Farber Cancer Institute, Dept. of Medicine, Boston, United States of America, ⁷Barts Cancer Institute, Queen Mary University of London, Centre for Experimental Cancer Medicine, London, United Kingdom, ⁸Johns Hopkins University Sidney Kimmel Comprehensive Cancer Center, Dept. of Oncology, Baltimore, United States of America, ⁹Erasmus MC Cancer Institute, Dept. of Medical Oncology, Rotterdam, Netherlands, The, ¹⁰Memorial Sloan Kettering Cancer Center, Dept. of Oncology, New York, United States of America, ¹¹Merck & Co., Inc., Dept. of Medical Oncology, Kenilworth, United States of America, ¹²Merck & Co., Inc., Dept. of Medical Oncology, Kenilworth, United States of America, ¹³Oregon Health & Science University, Dept. of Oncology, Portland, United States of America

---

**Adjuvant immunotherapy after cystectomy for MIBC patients: Lessons learned from the phase II clinical trial ‘Magnolia’**

By: Mulders P.F.A. ¹, Colombel M. ², Heidenreich A. ³, Martínez-Piñeiro L. ⁴, Babjuk M. ⁵, Korneyev I. ⁶, Surcel C. ⁷, Yakovlev P. ⁸, Radziszewski P. ⁹, Colombo R. ¹⁰, Witjes J.A. ¹¹, Caris C. ¹¹, Schipper R. ¹¹, Witjes W.P.J. ¹¹

¹Radboud UMC, Dept. of Urology, Nijmegen, Netherlands, The, ²Hopital Edouard Herriot, Dept. of Urology, Lyon, France, ³Universitätsklinikum Köln, Dept. of Urology, Cologne, Germany, ⁴Hospital Universitario Infanta Sofia, Dept. of Urology, Madrid, Spain, ⁵Charles University, Dept. of Urology, Prague, Czech Republic, ⁶Saint Petersburg State Pavlov Medical University, Dept. of Urology, St. Petersburg, Russia, ⁷University of Medicine and
Immune-desert, immune–excluded and inflamed phenotypes predict survival and adjuvant chemotherapy response in patients with MIBC

By: Zhu Y., Fu H., Liu Z., Zhang J., Ye D.
Fudan University Shanghai Cancer Center, Dept. of Urology, Shanghai, China

Impact of number of cycles of platinum-based first-line chemotherapy for advanced urothelial carcinoma


1 Fondazione IRCCS Istituto Nazionale dei Tumori, Dept. of Medical Oncology, Milan, Italy
2 Fondazione IRCCS Istituto Nazionale dei Tumori, Clinical Epidemiology and Trials Organization Unit, Milan, Italy
3 University of Athens, Dept. of Medical Oncology, Athens, Greece
4 University of Southampton, Dept. of Medical Oncology, Southampton, United Kingdom
5 Dana-Farber Cancer Institute, Bladder Cancer Center, Boston, United States of America
6 University of Washington, Dept. of Medicine, Seattle, United States of America
7 Heinrich-Heine-University, Dept. of Urology, Dusseldorf, Germany
8 Karmanos Cancer Institute, Dept of Medical Oncology, Detroit, United States of America
9 Hopital Foch, Dept of Medical Oncology, Suresnes, France
10 Centre Hospitalier Universitaire Vaudois, Dept. of Medical Oncology, Lausanne, Switzerland
11 Stanford University School of Medicine, Dept. of Medical Oncology, Stanford, United States of America
12 Princess Margaret Hospital, Dept. of Medical Oncology, Toronto, Canada
13 Fox Chase Cancer Center, Dept. of Medical Oncology, Philadelphia, United States of America
14 Memorial Sloan-Kettering Cancer Center, Genitourinary Oncology Section, New York, United States of America
15 Barts Health and the Royal Free NHS Trust, Dept. of Medical Oncology, London, United Kingdom
16 Mount Sinai School of Medicine, Tisch Cancer Institute, Dept. of Medical Oncology, New York, United States of America
17 Dana Farber Cancer Institute, Bladder Cancer Center, Boston, United States of America

Impact of adequate pelvic lymph node dissection on overall survival after radical cystectomy: A stratified analysis by clinical stage and receipt of neoadjuvant chemotherapy


1 Marien Hospital Herne, Ruhr-University Bochum, Dept. of Urology, Herne, Germany
2 Brigham and Women's Hospital, Harvard Medical School, Division of Urological Surgery, Boston, United States of America
3 Brigham and Women's Hospital, Harvard Medical School, Division of Urological Surgery, Boston, United States of America
4 Assistance
91 Superior efficacy of neoadjuvant chemotherapy and radical cystectomy in cT3-4aN0M0 compared to cT2N0M0 bladder cancer

By: Hermans T.¹, Voskuilen C.¹, Deelen M.¹, Mertens L.¹, Horenblas S.¹, Meijer R.², Boormans J.³, Aben K.⁴, Van Der Heijden M.⁵, Pos F.⁶, De Wit R.⁷, Beerepoot L.⁸, Verhoeven R.⁴, Van Rhijn B.¹

¹Netherlands Cancer Institute - Antoni van Leeuwenhoek Hospital, Dept. of Urology, Amsterdam, Netherlands, The, ²University Medical Centre Utrecht, Dept. of Urology, Utrecht, Netherlands, The, ³Erasmus University Medical Center, Dept. of Urology, Rotterdam, Netherlands, The, ⁴Netherlands Comprehensive Cancer Organization, Dept. of Research, Utrecht, Netherlands, The, ⁵Netherlands Cancer Institute - Antoni van Leeuwenhoek Hospital, Dept. of Medical Oncology, Amsterdam, Netherlands, The, ⁶Netherlands Cancer Institute - Antoni van Leeuwenhoek Hospital, Dept. of Radiation Oncology, Amsterdam, Netherlands, The, ⁷Erasmus University Medical Center, Dept. of Medical Oncology, Rotterdam, Netherlands, The, ⁸Elisabeth - Twee Steden Hospital, Dept. of Medical Oncology, Tilburg, Netherlands, The

92 The prognostic significance of tumour-infiltrating lymphocytes and programmed death ligand 1 expression in patients with squamous cell carcinoma of bladder

By: Chen Y.¹, Cao Y.², Yang Y.¹, Yu W.¹, Wu S.¹, Jin J.¹

¹Peking university first hospital, Dept. of Urology, Beijing, China, ²Peking University Cancer Hospital and Institute, Dept. of Urology, Beijing, China

93 Evaluation of the safety and short term pathological effects of tri-modal therapy in patients with bladder cancer: A multicenter prospective trial

Osaka Medical College, Dept. of Urology, Osaka, Japan

94 Healthcare resource utilization in RANGE: Ramucirumab plus docetaxel versus placebo plus docetaxel in platinum-refractory advanced or metastatic urothelial cancer

By: Bamias A.¹, Van Der Heijden M.², De Wit R.³, Fléchon A.⁴, Nishiyama H.⁵, Castellano D.⁶, Drakaki A.⁷, Matsubara N.⁸, Liepa A.⁹, Zimmermann A.¹⁰, Bell-Mcquinn K.¹¹, Hamid O.¹¹, Petrylak D.¹², Powles T.¹³, Necchi A.¹⁴

¹National and Kapodistrian University of Athens, Dept. of Clinical Therapeutics, Athens, Greece, ²Netherlands Cancer Institute-Antoni van Leeuwenhoek Hospital, Dept. of Medical Oncology, Amsterdam, Netherlands, The, ³Erasmus MC Cancer Institute, Dept. of Medical Oncology, Rotterdam, Netherlands, The, ⁴Centre Léon Bérard, Dept. of Medical Oncology, Lyon, France, ⁵University of Tsukuba, Dept. of Urology, Tsukuba, Japan, ⁶Hospital Universitario 12 de Octubre, Dept. of Medical Oncology, Madrid, Spain,
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<td>95</td>
<td>Bladder cancer survival in men using 5-alpha-reductase inhibitors</td>
<td>Mäkelä V.¹, Kotsar A.², Tammela T.¹, Murtola T.¹</td>
<td>Tampere University Hospital, Dept. of Urology, Tampere, Finland, Tarto University Hospital, Tarto, Estonia</td>
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<tr>
<td>96</td>
<td>Bladder cancer survival in users of HDAC-inhibiting antiepileptic drugs in a population-based cohort study</td>
<td>Okas R.¹, Kotsar A.¹, Tammela T.², Murtola T.³</td>
<td>Tartu University Hospital, Dept. of Urology, Tartu, Estonia, Tampere University Hospital, Tampere, Finland, University of Tampere, Faculty of Medicine and Life Sciences, Tampere, Finland</td>
</tr>
<tr>
<td>97</td>
<td>Comparative effectiveness of radiotherapy and radical cystectomy in unfit patients with resectable urinary bladder cancer</td>
<td>D'Andrea D.¹, Stangl-Kremser J.¹, Goldner G.², Soria F.¹, Grubmüller B.¹, Hermann H.², Abufaraj M.¹, Foerster B.¹, Kimura S.¹, Shariat S.¹</td>
<td>Medial University of Vienna, Dept. of Urology, Vienna, Austria, Medial University of Vienna, Dept. of Radiotherapy, Vienna, Austria</td>
</tr>
<tr>
<td>98</td>
<td>Risk factors for symptomatic recurrence after radical cystectomy in patients with locally advanced bladder cancer</td>
<td>Anan G.¹, Hatakeyama S.¹, Fujita N.¹, Iwamura H.², Tanaka T.¹, Yamamoto H.¹, Tobisawa Y.¹, Yoneyama T.³, Yoneyama T.¹, Hashimoto Y.³, Koie T.¹, Ito H.⁴, Yoshikawa K.⁵, Kawaguchi T.⁶, Sato M.², Ohyama C.¹</td>
<td>Hirosaki University Graduate School of Medicine, Dept. of Urology, Hirosaki, Japan, Tohoku Medical and Pharmaceutical University, Dept. of Urology, Sendai, Japan, Hirosaki University Graduate School of Medicine, Dept. of Advanced Transplant and Regenerative Medicine, Hirosaki, Japan, Aomori Rosai Hospital, Dept. of Urology, Hachinohe, Japan, Mutsu General Hospital, Dept. of Urology, Mutsu, Japan, Aomori Prefectural Central Hospital, Dept. of Urology, Aomori, Japan</td>
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**Summary**

P. Patel, Edgbaston, Birmingham (GB)
**Posters**

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**Novel biomarkers for prostate cancer: The research continues**

**Poster Session 09**

**Location:** Blue Area, Room 2 (Level 0)

**Chairs:** I. Heidegger, Innsbruck (AT)  
P.B. Ostergren, Herlev (DK)  
K.A. Tasken, Oslo (NO)

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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**99**

**CHD1 deletion is an independent predictor of poor prognosis by increased metastasis in both PTEN-deficient and -intact prostate cancer**

By: **Oh-Hohenhorst S.J. 1**, Tilki D. 1, Matuszcak C. 2, Tennstedt P. 1, Kluth M. 3, Baumgart S. 4, Johnsen S.A. 4, Sirma H. 3, Simon R. 3, Lange T. 5

1University Hospital Hamburg-Eppendorf, Martini-Klinik, Prostate Cancer Center, Hamburg, Germany  
2University Hospital Hamburg-Eppendorf, University Cancer Center Hamburg, Hamburg, Germany  
3University Hospital Hamburg-Eppendorf, Dept. of Pathology, Hamburg, Germany  
4University Medical Center Göttingen, Dept. of General, Visceral and Pediatric Surgery, Göttingen, Germany  
5University Hospital Hamburg-Eppendorf, Dept. of Anatomy and Experimental Morphology, Hamburg, Germany

---

**100**

**Aggressive prostate cancer by the loss of male specific histone demethylase ‘KDM5D’**

By: **Komura K. 1**, Inamoto T. 2, Ibuki N. 2, Sweeney C. 3, Azuma H. 2, Kantoff P. 1

1Memorial Sloan Kettering Cancer Center, Dept. of Medicine, New York, United States of America  
2Osaka Medical College, Dept. of Urology, Takatsuki city, Japan  
3Dana-Farber Cancer Institute, Dept. of Medical Oncology, Boston, United States of America

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**101**

**Positive status for STAT5 locus amplification in conjunction with STAT5 protein expression is a powerful predictor of recurrence after radical prostatectomy**

By: **Nevalainen M. 1**, Haddad B. 2, **Erickson A.M. 3**, Udhane V. 4, Laviolette P. 5, Aaltonen E. 6, Pavela M. 6, See W. 7, Kallajoki M. 6, Mirtti T. 8

1Medical College of Wisconsin, Dept. of Pathology, Dept. of Pharmacology & Toxicology, and Medical College of Wisconsin Cancer Center, Milwaukee, United States of America  
2Georgetown University, Dept. of Oncology and Lombardi Comprehensive Cancer Center, Washington DC, United States of America  
3University of Helsinki, and Institute of Molecular Medicine Finland (FIMM), Dept. of Pathology, Medicum, Helsinki, Finland  
4Medical College of Wisconsin, Dept. of Pathology and Medical College of Wisconsin Cancer Center, Milwaukee, United States of America  
5Medical College of Wisconsin, Dept. of Radiology and Medical College of Wisconsin Cancer Center, Milwaukee, United States of America
FABP5 RNA expression as potential marker in TMPRSS2:ERG fusion negative prostate cancer

By: Worst T. 1, Nitschke K. 1, Waldbillig F. 1, Abdelhadi A. 1, Von Hardenberg J. 1, Weis C. 2, Gottschalt M. 2, Wahby S. 1, Boutros M. 3, Michel M.S. 1, Erben P. 1
1Mannheim Medical Center, Dept. of Urology, Mannheim, Germany, 2Mannheim Medical Center, Institute of Pathology, Mannheim, Germany, 3German Cancer Research Center, Dept. of Signalling and Functional Genomics, Heidelberg, Germany

Identification and evaluation of serum protein biomarkers for organ confined prostate cancer

By: Mc Ardle A. 1, Tonry C. 2, Fan Y. 2, Inzitari R. 2, Rooney R. 3, Brian B. 2, Parnell A. 4, Finn S. 5, Pennington S. 6
1Atturos, Conway Institute University College Dublin, Dublin, Ireland, 2Conway Institute, University College Dublin, Dublin, Ireland, 3NOVA, University College Dublin, Dublin, Ireland, 4University College Dublin, School of Maths, Dublin, Ireland, 5Trinity College Dublin, School of Medicine, Dublin, Ireland, 6Atturos, Conway Institute, University College Dublin, Dublin, Ireland

Potential new minimally-invasive diagnostic biomarkers for prostate cancer

By: Bjerre M.T. 1, Strand S. 1, Fredsøe J. 1, Høyer S. 2, Mortensen M. 3, Borre M. 3, Sørensen K. 1
1Aarhus University Hospital, Dept. of Molecular Medicine, Aarhus, Denmark, 2Aarhus University Hospital, Institute of Pathology, Aarhus, Denmark, 3Aarhus University Hospital, Dept. of Urology, Aarhus, Denmark

Comparison of cell cycle progression (CCP) score to two IHC markers (PTEN and Ki-67) for predicting outcome in prostate cancer after radical prostatectomy

By: Leon Bertrand P. 1, Cancel Tassin G. 2, Audouin M. 3, Drouin S. 4, Varinot J. 5, Comperat E. 6, Cathelineau X. 7, Rozet F. 7, Vaessen C. 8, Stone S. 9, Welbourn W. 10, Reid J. 10, Sangale Z. 10, Kormann P. 10, Rouprêt M. 8, Fromond-Hankard G. 11, Cussenot O. 3
106 Association of NRP2 and EGFR co-expression with cancer-specific survival in prostate cancer and the influence of NRP2-depletion combined with EGFR-inhibition on cell functioning in cisplatin-sensitive and –resistant DU145 prostate cancer cell lines

By: Borkowetz A. 1, Fuessel S. 1, Erdmann K. 1, Schulz A. 2, Baretton G. 3, Froehner M. 1, Toma M. 4, Muders M. 4, Wirth M. 1

1 Technische Universität Dresden, Dept. of Urology, Dresden, Germany, 2 OncoRay National Center for Radiation Research in Oncology, Dept. of Radiology, Dresden, Germany, 3 Technische Universität Dresden, Dept. of Pathology, Dresden, Germany, 4 University of Bonn, Dept. of Pathology, Bonn, Germany

107 Integrative analysis of the proteome in prostate cancer uncovers robustness against genomic and transcriptomic aberrations during disease progression

University of Tampere, Faculty of Medicine and Life Sciences, Tampere, Finland

108 A multivariate survival analysis of tumour micro-environment markers reveals an independent prognostic subgroup in matched prostate cancer cohorts

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

1 UZ Leuven, Dept. of Urology, Leuven, Belgium, 2 Université Libre de Bruxelles, Dept. of Pathology/CMMI, Brussels, Belgium, 3 KU Leuven, Dept. of Cellular and Molecular Medicine, Leuven, Belgium

109 A novel risk score (P-score) based on a 3-gene signature for survival prognosis of newly diagnosed prostate cancer patients

By: Peng Z. 1, Chatzianastasio D. 2, Söderdahl F. 3, Honek J. 4, Cao R. 4, Meisgen F. 4, Yachnin J. 5, Nilsson S. 5, Li C. 5

1 Karolinska Institutet, Dept. of Oncology and Pathology, Stockholm, Sweden, 2 Danderyd Hospital, Dept. of Pathology and Cytology, Stockholm, Sweden, 3 Statisticon AB, Dept. of Statistical analyse, Stockholm, Sweden, 4 Chundsell Medical AB, Dept. of Development, Stockholm, Sweden, 5 Karolinska University Hospital, Dept. of Oncology, Stockholm, Sweden
110

**Exploring the role of gut microbiota and prostate cancer**

By: Munukka E. ¹, Gunell M. ¹, Pietilä S. ², Knaapila J. ³, Rintala A. ¹, Kallio H. ¹, Lamminen T. ⁴, Eerola E. ¹, Huovinen P. ⁵, Hakanen A. ¹, Boström P. ³

¹Turku University Hospital, Dept. of Microbiology and Genetics, Turku, Finland, ²University of Turku, Turku Center for Biotechnology, Turku, Finland, ³Turku University Hospital and University of Turku, Dept. of Urology, Turku, Finland, ⁴Turku University Hospital, Dept. of Urology, Turku, Finland, ⁵University of Turku, Dept. of Biomedicine, Medical Microbiology and Immunology, Turku, Finland

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**Transcribed ultraconserved region Uc.63+ promotes resistance to docetaxel through AR signaling and a promising serum biomarker for docetaxel treatment in prostate cancer**

By: Sekino Y. ¹, Sakamoto N. ², Goto K. ¹, Honma R. ², Shigematsu Y. ¹, Sentani K. ², Oue N. ², Teishima J. ¹, Yasui W. ², Matsubara A. ¹

¹Institute of Biomedical & Health Sciences Hiroshima University, Dept. of Urology, Hiroshima, Japan, ²Institute of Biomedical & Health Sciences Hiroshima University, Dept. of molecular pathology, Hiroshima, Japan

112

**The mutational landscape of prostate cancer linked with pre-docetaxel LDH determines docetaxel treatment in mCRPC**

By: Hiew K. ¹, Hart C.A. ¹, Ali A. ¹, Lau M. ², Ramani V.A.C. ², Sangar V. ², Maddineni S. ², Elliott T. ³, Brown M. ¹, Clarke N.W. ²

¹The University of Manchester, GUCR Group, Division of Cancer Sciences, Manchester, United Kingdom, ²The Christie Hospital NHS Foundation Trust, Dept. of Urology, Manchester, United Kingdom, ³The Christie Hospital NHS Foundation Trust, Dept. of Oncology, Manchester, United Kingdom

**Summary**

I. Heidegger, Innsbruck (AT)
Scientific Programme - EAU18 Copenhagen

Laser treatment of benign prostatic obstruction: Moving forward
Poster Session 10

Friday 16 March
12:30 - 14:00

Location: Blue Area, Room 3 (Level 0)
Chairs: S. Gravas, Larissa (GR)
To be confirmed

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

113 Holmium laser enucleation of the prostate (HoLEP) in large-sized prostates
Hospital vall d'Hebron, Dept. of Urology, Barcelona, Spain

114 Karl Storz® DrillCut™ versus Lumenis® VersaCut™ prostate tissue morcellation devices after holmium laser enucleation: A prospective randomized controlled trial
By: Ibrahim A., Elhilali M., Andonian S., Carrier S.
McGill university Health Centre, Dept. of Urology, Montreal, Canada

115 Holmium laser prostatic enucleation (HoLEP) for very large prostate adenoma evaluated more than 200 cc
By: Theveniaud P.E., Mouton M., Habibi K., Girard F., Baumert H.
Hopital Saint Joseph, Dept. of Urology, Paris, France

116 Low power vs. high power holmium laser enucleation of the prostate: Critical assessment through randomized trial
Urology and Nephrology Center, Dept. of Urology, Mansoura, Egypt

117 Changes in voiding and storage symptoms after HoLEP
Hospital vall d'Hebron, Dept. of Urology, Barcelona, Spain

118 5-year follow-up of low power holmium laser enucleation of the prostate (HoLEP)
First Affiliated Hospital of Gannan Medical University, Dept. of Urology, Ganzhou, China
119 One-lobed enucleation HoLEP could be safely performed especially for large prostate

By: Terada N.¹, Iwamoto H.², Miyake N.², Kobayashi T.², Takamori H.¹, Fujii M.¹, Tsukino H.¹, Kamimura T.¹, Mukai S.¹, Kamoto T.¹
¹Miyazaki University, Dept. of Urology, Miyazaki, Japan, ²Nozaki-Higashi Hospital, Dept. of Urology, Miyazaki, Japan

120 Impact of antiplatelet and anticoagulation therapy for patients undergoing HOLEP in terms of hospitalization length and complications rate: A prospective study

By: Branchu B., Leon P., Fournier R., Lassere T., Larré S.
CHU de Reims, Dept. of Urology, Reims, France

121 Challenging large sized benign prostate hyperplasia through randomized trial of bipolar resection vs. holmium laser enucleation vs. Green Light laser vapo-enucleation of the prostate

By: Elshal A.¹, Soltan M.¹, El-Tabey N.¹, Laymon M.¹, Nabeeh H.¹, Nabeeh A.¹
Urology and Nephrology Center, Dept. of Urology, Mansoura, Egypt

122 Perioperative major acute cardiovascular events after 180-watt Green Light laser photoselective vaporization

¹Università Degli Studi "G.D’Annunzio", Dept. of Urology, Chieti, Italy, ²ASL 2 Abruzzo, Dept. of Urology, Chieti, Italy, ³"S.Andrea" Hospital, Sapienza University, Dept. of Urology, Rome, Italy, ⁴"Federico II" University of Naples, Dept. of Urology, Naples, Italy, ⁵Azienda Ospedaliera Città della Salute e della Scienza di Torino, Dept. of Urology, Turin, Italy, ⁶Arcispedale Santa Maria Nuova, Dept. of Urology, Reggio Emilia, Italy, ⁷"Hesperia" Hospital, Dept. of Urology, Modena, Italy, ⁸S. Lazzaro" Hospital, Dept. of Urology, Alba, Italy, ⁹"Santa Maria delle Croci" Hospital, Dept. of Urology, Ravenna, Italy, ¹⁰Rovereto Hospital, Dept. of Urology, Rovereto, Italy, ¹¹Ulivella e Glicini Clinic, Dept. of Urology, Florence, Italy, ¹²Azienda Ospedaliera - University of Padua, Dept. of Urology, Padua, Italy, ¹³"Santa Croce e Carle" Hospital, Dept. of Urology, Cuneo, Italy, ¹⁴University of Bari, Dept. of Emergency and Organ Transplantation, Urology and Andrology Unit, Bari, Italy, ¹⁵Ercole Franchini" Hospital, Dept. of Urology, Montecchio Emilia, Italy, ¹⁶"Santa Maria delle Croci Hospital", Dept. of Urology, Ravenna, Italy, ¹⁷Second University of Naples, Medical Statistics, Naples, Italy, ¹⁸University of Bari, Dept. of Emergency and Organ Transplantation, Urology and Andrology Unit, Bari, Italy, ¹⁹SS Annunziata Hospital, Dept. of Urology, Chieti, Italy

123 Risk factors of short-term surgical retreatment after GreenLight Laser therapy for benign prostate hyperplasia: A multi-institutional analysis
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<td>124</td>
<td>Holmium laser enucleation of the prostate is effective and safe in all prostate sizes</td>
<td>By: Whiting D., Guest K., Penev B., Cynk M.</td>
<td>Maidstone and Tunbridge Wells NHS Trust, Dept. of Urology, Maidstone, United Kingdom</td>
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<td>125</td>
<td>Morbidity evaluation of antiplatelet and anticoagulant treatments according to their perioperative management during photovaporisation of the prostate by Greenlight laser</td>
<td>By: Pradere B., Peyronnet B., Guillotreau J., Bordier B., Naspro R., Misrai V.</td>
<td>CHU Tours, Dept. of Urology, Tours, France, CHU Rennes, Dept. of Urology, Rennes, France, Clinique Pasteur, Dept. of Urology, Toulouse, France, ASST Papa Giovanni XXIII, Dept. of Urology, Bergamo, Italy</td>
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<td>126</td>
<td>Multicenter international experience of 180W LBO laser photo-vaporization in men with extremely large prostates (prostate volume&gt;200cc): Is there a size limit?</td>
<td>By: Valdivieso R., Hueber P-A., Bruyere F., Te A., Chughtai B., Elterman D., Misrai V., Zorn K., Smith A.</td>
<td>Centre Hospitalier de l'Université de Montréal (CHUM), Division of Urology, Québec, Canada, CHU Tours, Dept. of Urology, Tours, France, Cornell University, Dept. of Urology, New York, United States of America, University of Toronto, Dept. of Urology, Toronto, Canada, Clinique Pasteur, Dept. of Urology, Toulouse, France, Centre Hospitalier de l'Université de Montréal (CHUM), Dept. of Urology, Cuébec, Canada</td>
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**Summary**

S. Gravas, Larissa (GR)
Is systematic early drainage relevant to treat urinary tract rupture in non-penetrating renal trauma? Results from a multicenter study


1University of Rouen, Dept. of Urology, Rouen, France, 2University of Rennes, Dept. of Urology, Rennes, France, 3University of Lille, Dept. of Urology, Lille, France, 4University of Tours, Dept. of Urology, Tours, France, 5University of Paris XI, Dept. of Urology, Paris, France, 6University of Lyon, Dept. of Urology, Lyon, France, 7University of Clermont-Ferrand, Dept. of Urology, Clermont-Ferrand, France, 8University of Strasbourg, Dept. of Urology, Strasbourg, France, 9University of Angers, Dept. of Urology, Angers, France, 10University of Amiens, Dept. of Urology, Amiens, France, 11University of Toulouse, Dept. of Urology, Toulouse, France, 12University of Caen, Dept. of Urology, Caen, France, 13University of Paris V, Dept. of Urology, Paris, France, 14University of Nantes, Dept. of Urology, Nantes, France, 15University of Montpellier, Dept. of Urology, Montpellier, France, 16University of Grenoble, Dept. of Urology, Grenoble, France

Role of repeat imaging in renal trauma management: Results of a French multicentric study (TRAUMAFUF)

By: Betari R. 1, Olivier J. 2, Pradere B. 3, Ruggiero M. 4, Dominique I. 5, Freton L. 6, Millet C. 7, Bergerat S. 8, Panayotopoulos P. 9, Caes T. 2, Chebbi A. 10, Patard P.M. 11, Szabla N. 12, Dariane C. 13, Lebacle C. 13, Rizk J. 2, Rod X. 13, Fiard G. 14, Peyronnet B. 6

1CHU, Dept. of Urology, Amiens, France, 2CHR, Dept. of Urology, Lille, France, 3CHU, Dept. of Urology, Tours, France, 4Paris XI, Dept. of Urology, Paris, France, 5CHR, Dept. of Urology, Lyon, France, 6CHR, Dept. of Urology, Rennes, France, 7CHU, Dept. of Urology, Clermont Ferrand, France, 8CHU, Dept. of Urology, Strasbourg, France, 9CHU, Dept. of Urology, Angers, France, 10CHU, Dept. of Urology, Rouen, France, 11CHU, Dept.
Risk factors for failure of conservative management in blunt renal trauma: Results of a French national multicenter study (TRAUMAFUF)


1University of Lille, Dept. of Urology, Lille, France, 2University of Angers, Dept. of Urology, Angers, France, 3University of Paris XI, Dept. of Urology, Paris, France, 4University of Montpellier, Dept. of Urology, Montpellier, France, 5University of Strasbourg, Dept. of Urology, Strasbourg, France, 6University of Amiens, Dept. of Urology, Amiens, France, 7University of Rennes, Dept. of Urology, Rennes, France, 8University of Orleans, Dept. of Urology, Orleans, France, 9University of Lyon, Dept. of Urology, Lyon, France, 10University of Rouen, Dept. of Urology, Rouen, France, 11University of Toulouse, Dept. of Urology, Toulouse, France, 12University of Caen, Dept. of Urology, Caen, France, 13University of Clermont Ferrand, Dept. of Urology, Clermont Ferrand, France, 14University of Caen, Dept. of Urology, Caen, France, 15University of Tours, Dept. of Urology, Tours, France, 16University of Nantes, Dept. of Urology, Nantes, France, 17University of Paris V, Dept. of Urology, Paris, France, 18University of Grenoble, Dept. of Urology, Grenoble, France

Blunt renal trauma: What classification is most appropriate for management decision? Retrospective study about 159 patients

By: Sallami S. 1, Abou El Makarim S. 1, Bokal Z. 2, Ichaoui H. 1, Khouni H. 3, Bouzaidi K. 4, Touinsi H. 5

1Mohamed Tahar Mâamouri University Hospital, Dept. of Urology, Nabeul, Tunisia, 2Mohamed Tahar Mâamouri university Hospital, Dept. of Surgery, Nabeul, Tunisia, 3FSI University Hospital, Dept. of Urology, La Marsa, Tunisia, 4Mohamed Tahar Mâamouri University Hospital, Dept. of Radiology, Nabeul, Tunisia, 5Mohamed Tahar Mâamouri University Hospital, Dept. of Surgery, Nabeul, Tunisia

Early mobilization is safe after renal trauma: A multicenter study


1University of Rennes, Dept. of Urology, Rennes, France, 2University of Lille, Dept. of Urology, Lille, France, 3University of Montpellier, Dept. of Urology, Montpellier, France, 4University of Paris XI, Dept. of Urology, Paris, France, 5University of Lyon, Dept. of Urology, Lyon, France, 6University of Clermont-Ferrand, Dept. of Urology, Clermont-Ferrand, France, 7University of Strasbourg, Dept. of Urology, Strasbourg, France,
Failure predictors of non-operative management of severe blunt renal trauma: A multicenter study about 87 cases

By: Sallami S. 1, Ichaoui H. 1, Bokal Z. 2, Abou El Makarim S. 1, Khouni H. 3, Ben Atta M. 4

1 Mohamed Tahar Mâamouri University Hospital, Dept. of Urology, Nabeul, Tunisia,
2 Mohamed Tahar Mâamouri University Hospital, Dept. of Surgery, Nabeul, Tunisia,
3 FSI University Hospital, Dept. of Urology, La Marsa, Tunisia,
4 Oran University Hospital, Dept. of Urology, Oran, Algeria

Predictive factors of emergency nephrectomy after renal trauma: A multicenter study

By: Bergerat S. 1, Fiard G. 2, Panayotopoulos P. 3, Pradere B. 4, Betari R. 5, Freton L. 6, Szabla N. 7, Ruggiero M. 8, Dominique I. 9, Matillon X. 9, Chebbi A. 10, Caes T. 11, Patard P. 12, Brichart N. 6, Olivier J. 11, Sabourin L. 13, Guleryuz K. 7, Millet C. 13, Dariane C. 8, Lebacle C. 8, Rizk J. 11, Gryn A. 12, Madec F. 14, Nouhaud F. 10, Peyronnet B. 6

1 University of Strasbourg, Dept. of Urology, Strasbourg, France,
2 University of Grenoble, Dept. of Urology, Grenoble, France,
3 University of Caen, Dept. of Urology, Caen, France,
4 University of Paris XI, Dept. of Urology, Paris, France,
5 University of Rouen, Dept. of Urology, Rouen, France,
6 University of Lille, Dept. of Urology, Lille, France,
7 University of Paris V, Dept. of Urology, Paris, France,
8 University of Nantes, Dept. of Urology, Nantes, France,
9 University of Lyon, Dept. of Urology, Lyon, France,
10 University of Toulouse, Dept. of Urology, Toulouse, France,
11 University of Clermont-Ferrand, Dept. of Urology, Clermont-Ferrand, France,
12 University of Nantes, Dept. of Urology, Nantes, France

Management of renal trauma between adult and pediatric population


1 University of Toulouse, Dept. of Urology, Toulouse, France,
2 University of Toulouse, Dept of pediatric surgery, Toulouse, France,
3 University of Montpellier, Dept. of Urology, Montpellier, France,
4 University of Paris XI, Dept. of Urology, Paris, France,
5 University of Lyon, Dept. of Urology, Lyon, France,
6 University of Rennes, Dept. of Urology, Rennes,

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**Diagnosis, treatment, and outcome of arterioureteral fistula: The urologist’s perspective**

By: Heers H. ¹, Netsch C. ², Wilhelm K. ³, Secker A. ⁴, Kurtz F. ⁵, Spachmann P. ⁶, Viniol S. ⁷, Hegele A. ¹
¹Philipps-Universität Marburg, Dept. of Urology and Paediatric Urology, Marburg, Germany, ²Asklepios Klinik Barmbek, Dept. of Urology, Hamburg, Germany, ³Albert-Ludwigs-Universität Freiburg, Dept. of Urology, Freiburg, Germany, ⁴Westfälische Wilhelms-Universität Münster, Dept. of Urology, Münster, Germany, ⁵Technische Universität München, Dept. of Urology, Munich, Germany, ⁶Krankenhaus St. Josef, University of Regensburg, Dept. of Urology, Regensburg, Germany, ⁷Philipps-Universität Marburg, Dept. of Diagnostic and Interventional Radiology, Marburg, Germany

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**Development and validation of a nomogram for predicting testicular torsion among acute scrotums using environmental conditions and physical examinations**

By: Takeshita H., Kawakami S., Tachibana K., Hiranuma S., Sugiyama H., Shinohara M., Kagawa M., Yano A., Okada Y., Morozumi M.
Saitama Medical Center, Saitama Medical University, Dept. of Urology, Saitama, Japan

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**Does the time from entering the emergency room to the start of de-torsion surgery has an affect on the survival of the torque testis? A quality of care study**

By: Lorber A. ¹, Levin H. ², Gold D. ³, Gofrit O.N. ¹, Rosenberg S. ¹, Yutkin V. ¹, Pode D. ¹, Duvdevani M. ¹, Gielchinsky I. ¹, Landau E. ⁴, Hidas G. ⁴
¹Hadassah Medical Center, Dept. of Urology, Jerusalem, Israel, ²Hadassah Hebrew University, Dept. of Public Health, Jerusalem, Israel, ³Hadassah Hebrew University, Medical School, Jerusalem, Israel, ⁴Hadassah Medical Center, Dept. of Pediatric Urology, Jerusalem, Israel

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**Seasonality of testicular torsion: Evidence from internet search activity**

By: Kelly N.P., D'Arcy F.
University Hospital Galway, Dept. of Urology, Galway, Ireland

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**Management and outcomes of penile fracture: A ten-year multicentric study**

By: Kara N. ¹, Badet L. ², Ruffion A. ³, Morel Journel N. ³, Terrier J.E. ³
¹Hospices Civils de Lyon, Dept. of Urology, Lyon, France, ²Hospices Civils de Lyon:
Hopital Edouard Herriot, Dept. of Urology, Lyon, France, Hospices Civils de Lyon: Lyon Sud, Dept. of Urology, Lyon, France

Summary
M. Rauchenwald, Vienna (AT)
Male infertility: Improving outcomes of surgery and sperm retrieval

Location: Blue Area, Room 5 (Level 0)

Chairs: To be confirmed
M. Dinkelman-Smit, Rotterdam (NL)
C.F.S.J. Jensen, Herlev (DK)

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.

A UK multicentre study analysing the surgical sperm retrieval rates in men with non-mosaic Klinefelters syndrome undergoing mTESE

By: Sangster P.¹, Johnson M.¹, Raheem A.¹, Zainal Y.¹, Poselay S.¹, Hallerstrom M.¹, Johnson T.¹, Mohammadi B.¹, Moubasher A.¹, Hafez K.¹, Bhandari C.¹, Vicens-Morton A.J.², Yap T.², Shabbir M.², Minhas S.¹, Ralph D.³

¹University College London Hospitals, Dept. of Andrology, London, United Kingdom,
²Guys' and ST Thomas' NHS Foundation Trust, Dept. of Urology, London, United Kingdom,
³University College Hospital London, Dept. of Andrology, London, United Kingdom

Post-fertilization effects of varicocele on the zygotic microkinetics

By: Sofikitis N.¹, Mio Y.², Dimitriadis F.³, Vlachopoulou E.¹, Tsounapi P.⁴, Zachariou A.¹, Takenaka A.⁴

¹University of Ioannina, Dept. of Urology, Ioannina, Greece,
²Mio Fertility Clinic, Dept. of Gynecology, Yonago, Japan,
³Aristotle University, Dept. of Urology, Thessaloniki, Greece,
⁴Tottori University, Dept. of Urology, Yonago, Japan

Anti-Mullerian hormone-to-testosterone ratio is predictive of positive sperm retrieval in men with idiopathic non-obstructive azoospermia

By: Alfano M.¹, Ventimiglia E.¹, Locatelli L.¹, Capogrosso P.¹, Cazzaniga W.¹, Pederzoli F.¹, Frego N.¹, Mattoo R.¹, Saccà A.², Boeri L.³, Pagliardini L.⁴, Viganò P.⁵, Nebuloni M.⁶, Pontillo M.⁷, Montorsi F.¹, Salonia A.¹

¹San Raffaele Hospital University, Dept. of Urology, Milan, Italy,
²A. O. Papa Giovanni XXIII, Dept. of Urology, Bergamo, Italy,
³IRCCS Ca’ Granda Ospedale Maggiore Policlinico, Dipartimento di Scienze Cliniche e di Comunità, Università degli Studi di Milano, Dept. of Urology, Milan, Italy,
⁴IRCCS Ospedale San Raffaele, Dept. of Obstetrics, Milan, Italy,
⁵IRCCS Ospedale San Raffaele, Dept. of Urology, Milan, Italy,
⁶L. Sacco Hospital, Dept. of Biomedical and Clinical Sciences, Milan, Italy,
⁷IRCCS San Raffaele Hospital, Dept. of Laboratory Medicine, Milan, Italy
| 143 | **Clinical comparison between conventional and microdissection testicular sperm extraction for non-obstructive azoospermia: Shedding light on which treatment works for which patient**  
By: Gadda F.¹, Boeri L.¹, Palmisano F.¹, De Lorenzis E.¹, Gallioli A.¹, Fontana M.¹, Zanetti S.P.¹, Sampogna G.¹, Restelli L.², Somigliana E.², Serrago M.¹, Spinelli M.G.¹, Salonia A.³, Montanari E.¹  
¹Fondazione IRCCS Ca’ Granda Ospedale Maggiore Policlinico, University of Milan, Dept. of Urology, Milan, Italy, ²IRCCS Fondazione Ca’ Granda, Ospedale Maggiore Policlinico, Dept. of Medically Assisted Reproduction, Milan, Italy, ³IRCCS Ospedale San Raffaele, Division of Experimental Oncology/Unit of Urology, Dept. of Urology, Milan, Italy |

| 144 | **Withdrawn**  
To be confirmed |

| 146 | **20 years experience of sperm cryopreservation in cancer patients**  
By: Kim D.S.¹, Song S-H.¹, Kim D.K.², Sung S.Y.³, Her Y.S.³, Shin D.H.³, Oh M.H.³, Kang B.N.³, Lee J.I.³, Lee W.S.⁴  
¹CHA Gangnam Medical Center, CHA University College of Medicine, Dept. of Urology, Seoul, Korea, South, ²CHA Fertility Center, Seoul Station, CHA University College of Medicine, Dept. of Urology, Seoul, Korea, South, ³CHA Gangnam Medical Center, CHA University College of Medicine, Fertility Center, Seoul, Korea, South, ⁴Fertility center of CHA Gangnam Medical Center, CHA University College of Medicine, Dept. of Obstetrics and Gynecology, Seoul, Korea, South |

| 147 | **Learning curve in microdissection testicular sperm extraction: A single surgeon experience**  
By: Franceschelli A.¹, Vagnoni V.¹, Gentile G.¹, Sadini P.², Fiorillo A.², Colombo F.¹  
¹Policlinico di S.Orsola, Dept. of Urology and Gynecology, Andrology Unit, Bologna, Italy, ²Policlinico di S.Orsola, Dept. of Urology and Gynecology, Bologna, Italy |

| 148 | **Hypogonadism post TESE: How much is it really worrying?**  
ASST Papa Giovanni XXIII, Dept. of Urology, Bergamo, Italy |

| 149 | **Nutritional supplements in idiopathic male infertility: A systematic review**  
By: Vaidya A.¹, Ahmed K.², Brunckhorst O.³, Yap T.², Shabbir M.²  
¹Guy’s, King’s and St Thomas’ School of Medical Education, Guy’s campus, King’s College London, Dept. of Urology, London, United Kingdom, ²Guy’s and St. Thomas’ NHS Foundation Trust, King’s Health Partners, Dept. of Urology, London, United Kingdom, ³St Mary’s Hospital, Imperial College London, Dept. of Surgery and Cancer, London, United Kingdom |
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<td>150</td>
<td>Varicocele and oligoasthenoteratozoospermia: Evaluation of antioxidant supplementation effect on pregnancy rate and sperm quality</td>
<td>By: Busetto G.M., Virmani A., Agarwal A., Antonini G., Del Giudice F., Micic S., De Berardinis E.</td>
<td>Sapienza Rome University, Dept. of Urology, Rome, Italy, Sigma-tau HealthScience, Nutraceuticals, Utrecht, Netherlands, The American Center for Reproductive Medicine, Dept. of Andrology, Cleveland, United States of America, Uromedica Polyclinic, Dept. of Urology, Belgrade, Serbia and Montenegro</td>
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<td>151</td>
<td>Resveratrol attenuates metabolic, sperm and testicular changes in adult Wistar rats fed a cafeteria dietary</td>
<td>By: De Oliveira F., De Souza D., Gallo C.B.M., Costa W.S., Sampaio F.J., Gregorio B.M.</td>
<td>State University of Rio de Janeiro, Dept. of Anatomy, Rio de Janeiro, Brazil</td>
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<td>152</td>
<td>Functional deficit of sperm and fertility impairment in men with antisperm antibodies</td>
<td>By: Bozhedomov V.</td>
<td>Sechenov First Moscow State Medical University, Dept. of Obstetrics, Gynecology, Perinatology and Reproduction, Moscow, Russia</td>
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<td>145</td>
<td>Comparison of subinguinal microscopic and laparoscopic varicocelectomy</td>
<td>By: Zou X., Yang J., Chen H., Zhong X., Xie K., Zhang G.</td>
<td>First Affiliated Hospital of Gannan Medical University; Institute of Urology, Gannan Medical University, Dept. of Urology, Ganzhou, China</td>
</tr>
<tr>
<td></td>
<td>Summary</td>
<td>M. Dinkelman-Smit, Rotterdam (NL)</td>
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</tr>
</tbody>
</table>
Challenging laparoscopic surgery

Video Session 02

Friday 16 March
12:30 - 14:00

Location: Green Area, Room 15 (Level 0)

Chairs: A. Carbone, Latina (IT)
To be confirmed
L. Lusuardi, Salzburg (AT)

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

V09

Laparoscopic posterior adrenalectomy in prone position

Parc Taulí University Hospital, Dept. of Urology, Sabadell, Spain

V10

Right laparoscopic adrenalectomy for single metastatic lesion of colorectal cancer

By: Dotta F., Mantica G., Olivero A., Pacchetti A., Traverso P., Maffezzini M., Terrone C.
Ospedale Policlinico San Martino - University of Genoa, Dept. of Urology, Genoa, Italy

V11

Systematic laparoscopic partial nephrectomy for T1b kidney tumours

By: Fernández-Pello Montes S., Rodriguez Villamil L., Perez C., Rivas M., Monagas S., Mosquera J.
1Cabueñes University Hospital, Dept. of Urology, Gijon, Spain, 2San Agustin University Hospital, Dept. of Urology, Aviles, Spain

V12

Laparoscopic excision of locally recurrent renal cell carcinoma (RCC): Step-by-step anatomical landmarks

By: Khunovich D., Sidi A., Tsivian A.
E.Wolfson Medical Center, Dept. of Urologic Surgery, Holon, Israel

V13

Laparoscopic non-suture hemostasis for major veins

By: Sergeev V., Novikov A., Kochkin A., Volodin D., Gallyamov E., Biktimirov R.
1Federal Medical & Biological Agency, Dept. of Oncourology, Moscow, Russia, 2Medical Center of Bank of Russia, Dept. of Urology, Moscow, Russia, 3Russian Railways Hospital, Dept. of Urology, Nizhny Novgorod, Russia, 4Federal Medical & Biological Agency of Russian Federation, Dept. of Oncourology, Moscow, Russia, 5Aleksandr Evdokimov’s
Moscow State University, Dept. of Urology, Moscow, Russia, Dept. of Urology, Moscow, Russia

Laparoscopic nephroureterectomy for urothelial tumor in horseshoe kidney

By: Del Pozo Jiménez G., Castillón Vela I., Diez Diez J.A., Souto Souto A., Carballido Rodríguez J.
University Hospital Puerta de Hierro, Dept. of Urology, Majadahonda (Madrid), Spain

Transperitoneal laparoscopic pyeloplasty for retrocaval ureter: Single surgeon's experience and literature review

By: Seo I.Y., Oh T.H.
Wonkwang University Hospital, Dept. of Urology, Iksan, Korea, South

Laparoscopic treatment of hilium renal tumors

University Hospital of Cabueñes, Dept. of Urology, Gijon, Spain
## Joint Meeting of the European Association of Urology (EAU) and the Caucasus/Central Asian countries

### Urology beyond Europe

**Location:** Green Area, Room 10 (Level 1)

**Chairs:** I. Korneyev, St. Petersburg (RU)  
A.M. Grabsky, Yerevan (AM)

### Aims and objectives of this session

This session aims to strengthen professional contacts between European urology and the urologists in the Caucasus and Central Asia regions. The chosen topics include female and reconstructive urology, surgical treatment for LUTS/BPH and renal transplantation. This session gives urologists and residents in urology an update of current opinion in these areas as well as some insights from regional practice.

### 12:30 - 12:35

**Welcome and introduction**

I. Korneyev, St. Petersburg (RU)  
A.M. Grabsky, Yerevan (AM)

### 12:35 - 13:35

**Lower urinary tract**

**Moderators:** J.L.H.R. Bosch, Utrecht (NL)  
Z. Tchanturaia, Tbilisi (GE)

- **12:35 - 12:45**  
  Recent advances in female urology  
  J.L.H.R. Bosch, Utrecht (NL)
- **12:45 - 12:50**  
  Discussion
- **12:50 - 13:00**  
  Modern possibilities of combined urogenital reconstruction  
  Y.S. Harutyunyan, Yerevan (AM)
- **13:00 - 13:05**  
  Discussion
- **13:05 - 13:15**  
  The prevalence and regional specificities of the risk factors of female urinary incontinence in Uzbekistan  
  A. Abdurizaev, Tashkent (UZ)
- **13:15 - 13:20**  
  Discussion
- **13:20 - 13:30**  
  Comparative analysis of TURP, laser vaporisation and combined therapy - 10 years follow-up  
  T. Anafin, Almaty (KZ)
- **13:30 - 13:35**  
  Discussion

### 13:35 - 14:15

**Current trends in urology: Caucasus and Central Asia**
13:35 - 13:50  
**One-stage reconstruction of the panurethral stricture of the urethra**  
I. Rofiev, Dushanbe (TJ)

13:50 - 13:55  
**Discussion**

13:55 - 14:10  
**Current trends in national urology in Kyrgyzstan**  
N. Monolov, Bishkek (KG)

14:10 - 14:15  
**Discussion**

14:15 - 14:55  
**Renal transplantation and dialysis access surgery**

**Moderators:**  
A. Breda, Barcelona (ES)  
A.M. Grabsky, Yerevan (AM)

14:15 - 14:30  
**Recent advances in renal transplantation**  
A. Breda, Barcelona (ES)

14:30 - 14:35  
**Discussion**

14:35 - 14:50  
**Dialysis access surgery in the hands of urologist**  
A. Chkhotua, Tbilisi (GE)

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

14:55 - 15:00  
**Closing remarks**  
I. Korneyev, St. Petersburg (RU)  
A.M. Grabsky, Yerevan (AM)
## Joint Session of the European Association of Urology (EAU) and the Korean Urological Association (KUA)

**Urology beyond Europe**

**Friday 16 March**

**12:30 - 15:45**

**Location:** Green Area, Room 12 (Level 1)

**Chairs:**
- F. Montorsi, Milan (IT)
- G.T. Sung, Busan (KR)

**Aims and objectives of this session**
The session will compare the European and Korean management of prostate cancer, bladder cancer, LUTS and pelvic organs and testosterone therapy. The most controversial topics have been identified and will be discussed by recognised experts.

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<tr>
<th>Time</th>
<th>Session</th>
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<tbody>
<tr>
<td>12:30 - 12:35</td>
<td><strong>Welcome and introduction</strong></td>
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<tr>
<td></td>
<td>J. Cheon, Seoul (KR)</td>
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<td>F. Montorsi, Milan (IT)</td>
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<tr>
<td>12:35 - 13:15</td>
<td><strong>Prostate cancer</strong></td>
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<tr>
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<td>Moderators: J. Cheon, Seoul (KR)</td>
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<td>C. Stief, Munich (DE)</td>
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<td>12:35 - 12:45</td>
<td>Korean real practice data on enzalutamide for metastatic prostate cancer</td>
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<td>D.D. Kwon, Gwangju (KR)</td>
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<td>12:45 - 12:55</td>
<td>Novel modalities for nodal staging in prostate cancer</td>
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<td>H.G. Van Der Poel, Amsterdam (NL)</td>
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<tr>
<td>12:55 - 13:05</td>
<td>Chemohormonal therapy in metastatic hormone-sensitive prostate cancer: Korean experience</td>
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<td>J.Y. Joung, Goyang (KR)</td>
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<tr>
<td>13:05 - 13:15</td>
<td>Radical prostatectomy for (oligo) metastatic prostate cancer</td>
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<td>C. Stief, Munich (DE)</td>
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<td>13:15 - 13:25</td>
<td>Case discussion on prostate cancer</td>
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<td>G. Gandaglia, Milan (IT)</td>
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<td>J.H. Hong, Seoul (KR)</td>
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<td>S.S. Jeon, Seoul (KR)</td>
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<td>H.K. Ha, Busan (KR)</td>
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<tr>
<td>13:25 - 14:05</td>
<td><strong>Bladder cancer</strong></td>
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<td>Moderators: F. Montorsi, Milan (IT)</td>
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<td>G.T. Sung, Busan (KR)</td>
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<tr>
<td>13:55 - 14:05</td>
<td>Functional outcomes after robot-assisted radical cystectomy</td>
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<td>14:05 - 14:15</td>
<td>Case discussion on bladder cancer</td>
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<td>14:05 - 14:15</td>
<td>M.C. Cho, Seoul (KR)</td>
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<tr>
<td>14:15 - 14:55</td>
<td>LUTS/Pelvic organ</td>
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<td>14:15 - 14:25</td>
<td>Diagnosing the pathophysiologic mechanisms of nocturnal polyuria</td>
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<td>14:25 - 14:35</td>
<td>Laparoscopic transvesical surgery for vesicovaginal fistula</td>
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<td>14:35 - 14:45</td>
<td>Minimally invasive treatment options for male LUTS</td>
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<td>14:45 - 14:55</td>
<td>Will patients with detrusor underactivity benefit from TURP or HoLEP?</td>
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<td>14:55 - 15:05</td>
<td>Case discussion on LUTS/Pelvic organ</td>
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<td>15:05 - 15:25</td>
<td>Emerging evidence in long-standing controversies about testosterone</td>
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<td>replacement therapy</td>
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<td>15:05 - 15:15</td>
<td>Testosterone replacement therapy: Cardiovascular issues</td>
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<tr>
<td>15:15 - 15:25</td>
<td><strong>Testosterone replacement therapy: Prostate issues</strong></td>
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<td>H.J. Park, Busan (KR)</td>
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<td>15:25 - 15:35</td>
<td><strong>Case discussion on emerging evidence in long-standing controversies about testosterone replacement therapy</strong></td>
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<td>Panel: G Hatzichristou, Thessaloniki (GR)</td>
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<td>J.S. Huh, Jeju-si (KR)</td>
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<td>J-S. Hyun, Jinju (KR)</td>
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<td>I. Moncada, Madrid (ES)</td>
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<td>15:35 - 15:45</td>
<td><strong>Closing remarks</strong></td>
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<td></td>
<td>J.H. Hong, Seoul (KR)</td>
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<td>F. Montorsi, Milan (IT)</td>
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Joint Session of the European Association of Urology (EAU) and the Japanese Urological Association (JUA)

Urology beyond Europe

Friday 16 March 12:30 - 15:00

Location: Green Area, Room 11 (Level 1)

Chairs: Y. Tomita, Niigata (JP)
M. Wirth, Dresden (DE)

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

12:30 - 12:35
Welcome and introduction
Y. Tomita, Niigata (JP)
M. Wirth, Dresden (DE)

12:35 - 13:20
Stone disease
Moderators: K. Miyazawa, Ishikawa (JP)
T. Knoll, Sindelfingen (DE)

12:35 - 12:45
Prevention of recurrent urolithiasis up to date
K. Taguchi, Nagoya (JP)

12:45 - 12:55
Management of ureteral stones: Real world data
T. Knoll, Sindelfingen (DE)

12:55 - 13:20
Panel discussion on stone disease: How do you treat this patient?

13:20 - 14:05
Spina Bifida Occuluta (SBO)
Moderators: D.M. Castro Diaz, Santa Cruz de Tenerife (ES)
H. Kakizaki, Asahikawa (JP)

13:20 - 13:40
Summary of Japanese SBO guidelines
Y. Matsuta, Fukui (JP)

13:40 - 14:05
Panel discussion on Spina Bifida Occuluta (SBO): How to approach this situation?

14:05 - 14:50
Bladder cancer
Moderators: M. Wirth, Dresden (DE)
H. Matsuyama, Ube (JP)

14:05 - 14:15
Tri-modality treatment of muscle-invasive bladder cancer
T. Kojima, Tsukuba (JP)

14:15 - 14:25
Radical cystectomy and neo-bladder: Gold standard for muscle-invasive bladder cancer
M. Wirth, Dresden (DE)
<table>
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<tr>
<th>Time</th>
<th>Event Description</th>
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<tbody>
<tr>
<td>14:25 - 14:50</td>
<td>Panel discussion on bladder cancer: What is your choice of treatment?</td>
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<tr>
<td>14:50 - 15:00</td>
<td>Closing remarks</td>
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<td>M. Fujisawa, Kobe (JP)</td>
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</table>
Joint Session of the European Association of Urology (EAU) and the Urological Society of India (USI)

Urology beyond Europe

Location: Orange Area, Room 1 (Level 0)
Chairs: J.O.R. Sonksen, Herlev (DK)
A. Vaze, Mumbai (IN)

Aims and objectives of this session
To present and discuss the etiology, diagnosis and management of complications in urology through case presentations from the clinical area of uro-oncology, urinary stones and female urology. The session will end with a special symposium on genitourinary tuberculosis with special focus on epidemiology, imaging and surgical treatment. Leading experts from the Urological Society of India and European Association of Urology will give the case presentations followed by discussion with a panel of key opinion leaders.

12:30 - 12:34  Welcome and introduction
J.O.R. Sonksen, Herlev (DK)
A. Vaze, Mumbai (IN)

12:34 - 12:50  Why do complications occur?
12:34 - 12:42  Upper urinary tract
C. Beisland, Bergen (NO)
12:42 - 12:50  Lower urinary tract
N. Kekre, Vellore Tamilnadu (IN)

12:50 - 13:14  Complications in uro-oncology
Panel: T.S. O'Brien, London (GB)
S.K. Raghunath, Bangalore (IN)
S. Rawal, Delhi (IN)
H. Van Poppel, Leuven (BE)

12:50 - 12:57  Case presentation: Kidney cancer surgery
H. Tongaonkar, Mumbai (IN)

12:57 - 13:04  Case presentation: Prostate cancer surgery
A.S. Bjartell, Malmö (SE)

13:04 - 13:14  Discussion

13:14 - 13:45  Complications in stone diseases
Panel: T. Bach, Hamburg (DE)
P.J.S. Osther, Fredericia (DK)
S.K. Pal, Delhi (IN)
K. Sarkar, Kolkata (IN)
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<th>Time</th>
<th>Session</th>
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<tr>
<td>13:14 - 13:21</td>
<td><strong>Case presentation:</strong> Pleural violation in supra coastal access in PCNL: Problems and solution</td>
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<td>P. Maheshwari, Mumbai (IN)</td>
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<td>13:21 - 13:28</td>
<td><strong>Case presentation:</strong> Colonic injury during PCNL</td>
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<td>C.M. Scoffone, Turin (IT)</td>
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<td>13:28 - 13:35</td>
<td><strong>Case presentation:</strong> Tract size, does it matter: A re-look into etiopathogenesis of haemorrhagic complication of PCNL</td>
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<td>M. Chiruvella, Hyderabad (IN)</td>
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<td>13:35 - 13:45</td>
<td>Discussion</td>
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<td>13:45 - 14:23</td>
<td><strong>Complications in female urology</strong></td>
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<td>Panel:</td>
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<td>C.R. Chapple, Sheffield (GB)</td>
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<td>D.J.M.K. De Ridder, Leuven (BE)</td>
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<td>S.K. Pal, Delhi (IN)</td>
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<td>S. Sinha, Hyderabad (IN)</td>
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<td>A. Vaze, Mumbai (IN)</td>
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<td>13:45 - 13:52</td>
<td><strong>Case presentation:</strong> Incontinence and prolapse surgery: From an Indian perspective</td>
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<td>A. Jain, New Delhi (IN)</td>
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<td>13:52 - 13:59</td>
<td><strong>Case presentation:</strong> Incontinence and prolapse surgery: From a European perspective</td>
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<td>F.C. Burkhard, Bern (CH)</td>
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<td>13:59 - 14:06</td>
<td><strong>Case presentation:</strong> Urethral diverticulum surgery: From an Indian perspective</td>
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<td>A. Vaze, Mumbai (IN)</td>
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<td>14:06 - 14:13</td>
<td><strong>Case presentation:</strong> Urethral diverticulum surgery: From a European perspective</td>
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<td>E. Chartier-Kastler, Paris (FR)</td>
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<td>14:13 - 14:23</td>
<td>Discussion</td>
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<td>14:23 - 14:55</td>
<td><strong>Symposium on GU tuberculosis: Diagnosis, imaging and treatment</strong></td>
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<td>Moderators:</td>
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<td>R. Sood, New Delhi (IN)</td>
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<td>F.M.E. Wagenlehner, Giessen (DE)</td>
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<td>14:23 - 14:31</td>
<td><strong>Epidemiology of GU tuberculosis and its spectrum in India</strong></td>
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<td>A. Goel, Lucknow (IN)</td>
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<td>14:31 - 14:39</td>
<td><strong>Epidemiology of GU tuberculosis and its spectrum in Europe</strong></td>
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<td>T.E. Bjerklund Johansen, Oslo (NO)</td>
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<td>14:39 - 14:47</td>
<td><strong>Diagnostic laboratory: Radiological profile</strong></td>
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<td>S. Kumar, Vellore (IN)</td>
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<td>14:47 - 14:55</td>
<td><strong>Surgical management</strong></td>
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<td>A. Seth, New Delhi (IN)</td>
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<td>14:55 - 15:00</td>
<td><strong>Closing remarks</strong></td>
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Scientific Programme - EAU18 Copenhagen

R. Sabnis, Saligrmam (IN)
J.O.R. Sonksen, Herlev (DK)
### Joint Session of the European Association of Urology (EAU) and the Pan-African Urological Surgeons Association (PAUSA)

**Urology beyond Europe**

**Friday 16 March
12:30 - 15:00**

**Location:** Orange Area, Room 2 (Level 0)

**Chairs:**
- A. Chiura, Belgravia, Harare (ZW)
- J.M. Nijman, Groningen (NL)

**Aims and objectives of this session**
The main aims of this session are to expose our European colleagues to some of the challenges and advances in endourology and paediatric urology in Africa. We stimulate discussions around ways to be of mutual benefit to both European and African urological communities and bring to light the successes and challenges of male circumcision in the HIV era.

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<tr>
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<tr>
<td>12:30 - 12:35</td>
<td>Welcome and introduction</td>
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<tr>
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<td>J.M. Nijman, Groningen (NL)</td>
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<td>A. Chiura, Belgravia, Harare (ZW)</td>
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<td>12:35 - 13:25</td>
<td>HIV in Africa and the role of circumcision</td>
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<td>12:35 - 12:55</td>
<td>African perspective</td>
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<td>T. Mangwiro, Ruwa (ZW)</td>
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<td>12:55 - 13:15</td>
<td>European perspective</td>
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<td>N. Lohse, Copenhagen (DK)</td>
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<td>13:15 - 13:25</td>
<td>Discussion</td>
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<td>13:25 - 14:15</td>
<td>Paediatric urology</td>
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<td>13:25 - 13:45</td>
<td>African perspective</td>
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<td>M. Ndoye, San Francisco (US)</td>
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<td>13:45 - 14:05</td>
<td>European perspective</td>
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<td>J.M. Nijman, Groningen (NL)</td>
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<td>14:05 - 14:15</td>
<td>Discussion</td>
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<tr>
<td>14:15 - 14:55</td>
<td>Endourology in resource limited environments</td>
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<td>14:15 - 14:30</td>
<td>African perspective</td>
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<td>14:30 - 14:45</td>
<td>European perspective</td>
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<td>A. Thompson, Bristol (GB)</td>
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<td>Time</td>
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<td>14:45 - 14:55</td>
<td>Discussion</td>
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<td>14:55 - 15:00</td>
<td>Closing remarks</td>
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Meeting of the Young Academic Urologists (YAU)

Specialty session

Friday 16 March
13:00 - 16:30

Location: Green Area, Room 2 (Level 0)

Chairs: J.P.M. Sedelaar, Nijmegen (NL)
M.S. Silay, Istanbul (TR)

Aims and objectives of this session
The Young Academic Urologists (YAU) is a group of talented and already renowned European young urologists. We aim to promote high-quality studies in order to provide strong evidence for the best urological practice. In this session, both scientific and educational context will be discussed among the members of YAU and the leaders of European Urology.

13:00 - 13:15
Overview of YAU and what is on the horizon?
M.S. Silay, Istanbul (TR)

13:15 - 13:30
The role of YAU within EAU: The Secretary General’s perspective
C.R. Chapple, Sheffield (GB)

13:30 - 13:40
Overview of the Non-Oncology groups achievements
P. Kallidonis, Patras (GR)

13:40 - 13:50
Overview of the Oncology & Technology groups achievements
G. Ploussard, Toulouse (FR)

13:50 - 14:00
YAU awards

13:50 - 14:00
Best paper published in 2017 by a YAU group

13:50 - 14:00
Best poster presented at EAU 2018 by a YAU group

13:50 - 14:00
Reviewer of the year from YAU

14:00 - 15:00
Key studies of the year

Moderators:
M.C. Mir Maresma, Barcelona (ES)
T.A.T. Marcelissen, Maastricht (NL)
E. Xylinas, Paris (FR)

14:00 - 14:10
Abiraterone plus Prednisone in metastatic, castration-sensitive prostate cancer
D. Tilki, Hamburg (DE)
N. Mottet, Saint-Étienne (FR)

14:10 - 14:20
Survival analyses of patients with metastatic renal cancer treated with targeted therapy with or without cytoreductive nephrectomy
Role of antibiotic prophylaxis in antenatal hydronephrosis: Systematic review from EAU/ESPU Guidelines
B. Bafuelos Marco, Berlin (DE)
J.M. Nijman, Groningen (NL)

PROTECT TRIAL and sexual outcomes: Lights and shadows
P. Verze, Naples (IT)
A. Briganti, Milan (IT)

Sacral neuromodulation vs Botox (ROSETTA trial)
M.S. Rahnama'i, Maastricht (NL)
R. Dmochowski, Nashville (US)

Impact of molecular sub types in muscle-invasive bladder cancer on predicting response and survival after neoadjuvant chemotherapy
R. Seiler, Bern (CH)
Y. Allory, Créteil (FR)

Establishing a professional career at a European level: Motivational talk by Crystal Matula Award Winner
C. Gratzke, Munich (DE)

How can I get funded for my research? EAU Research Foundation: Opportunities and tips of application for Young Academic Urologists.
A.S. Bjartell, Malmö (SE)

Challenge the expert session  YAU versus key opinion leaders
Moderators:
L.A. Kluth, Hamburg (DE)
G. De Naeyer, Aalst (BE)
D. Veneziano, Reggio Calabria (IT)

Infundibular puncture for percutaneous nephrolithotomy
E. Liatsikos, Patras (GR)
T. Tailly, Ghent (BE)

Robot-assisted salvage lymph node dissection for clinically recurrent prostate cancer
N. Suardi, Milan (IT)
A. Heidenreich, Cologne (DE)

Pre-operative planning and new visualisation technologies in urology
J. Rassweiler, Heilbronn (DE)
A. Dourado Meneses, Teresina (BR)

Management of short urethral strictures: Urethroplasty is superior than endoscopic treatment
M. Fisch, Hamburg (DE)
Scientific Programme - EAU18 Copenhagen

- YAU Brainstorm meeting: 16.45-18.15 in Orange room 3
Radical prostatectomy and salvage prostatectomy: Do high numbers improve outcome?

Poster Session 13

Friday 16 March
14:15 - 15:45

Location: Blue Area, Room 1 (Level 0)

Chairs: K. Maes, Belas Clube De Campo (PT)
A. Mottrie, Aalst (BE)
R.J. Van Soest, Rotterdam (NL)

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

Functional outcomes and complications of a multicentre series of open versus robot-assisted salvage radical prostatectomy

By: Gontero P. 1, Marra G. 1, Alessio P. 1, Oderda M. 1, Palazzetti A. 1, Pisano F. 1, Battaglia A. 1, Munegato S. 1, Frea B. 1, Munoz F. 2, Filippini C. 3, Linares E. 4, Sanchez-Salas R. 4, Goonewardene S. 5, Dasgupta P. 5, Cahill D. 5, Challacombe B. 5, Popert R. 5, Gillatt D. 6, Persad R. 6, Palou J. 7, Joniau S. 8, Smelzo S. 9, Thierry P. 9, De La Taille A. 10, Roupret M. 11, Albisinni S. 12, Van Velthoven R. 12, Morlacco A. 13, Vidit S. 13, Gandaglia G. 14, Mottrie A. 14, Smith J. 15, Joshi S. 15, Fiscus G. 15, Berger A. 16, Aron M. 16, Van Der Poel H. 17, Tilki D. 18, Murphy D. 19, Lawrentschuk N. 19, Davis J. 20, Leung G. 20, Karnes R.J. 13

1Molinette Hospital - University of Studies of Turin, Dept. of Surgical Sciences, Turin, Italy, 2Pasini Hospital, Dept. of Radiotherapy, Aosta, Italy, 3University of Studies of Turin, 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, Brussels, 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, TN, United States of America, 16USC Norris Comprehensive Cancer Center and Hospital, University of South California, Dept. of Urology, Los Angeles, CA, United States of America, 17Netherlands Cancer Institute, Dept. of Urology, Amsterdam, Netherland, The, 18Martini Klinik, Dept. of Urology, Hamburg, Germany, 19Peter MacCallum Cancer Centre, Dept. of Urology, Melbourne, VIC, Australia, 20The University of Texas, MD Anderson Cancer Center, Dept. of Urology, Houston, TX, United States of America

Salvage prostatectomy after focal therapy – single centre experience

By: Herrera-Caceres J.O., Woon D.T.S., Goldberg H., Chandrasekar T., Klaassen Z.,
<table>
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<th>ID</th>
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<th>Authors</th>
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<tr>
<td>155</td>
<td>The impact of salvage prostatectomy on postoperative continence rates and patients quality of life</td>
<td>Heidegger I., Heidenreich A., Grabbert M., Kohl T., Pfister D. University Hospital Cologne, Dept. of Urology, Cologne, Germany</td>
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<td>156</td>
<td>Outcome of salvage robotic assisted radical prostatectomy (S-RALP) following focal prostate cancer therapy</td>
<td>Stonier T.W., Cathcart P. Princess Alexandra Hospital, Harlow, Dept. of Urology, London, United Kingdom, Guy's and St Thomas' Hospital, Dept. of Urology, London, United Kingdom</td>
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<td>157</td>
<td>Characteristics and oncological outcome of clinical T3a prostate cancer patients undergoing radical prostatectomy in multi-parametric MRI era</td>
<td>Yamamoto S., Yamamoto T., Masuda H., Numao N., Ogawa M., Inoue T., Takeda H., Ishikawa Y., Fujiwara R., Mikami H., Yuasa T., Fukui I., Yonese J. Cancer Institute Hospital, Dept. of Genitourinary Oncology, Tokyo, Japan, Cancer Institute Hospital, Dept. of Radiology, Tokyo, Japan</td>
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<td>158</td>
<td>Association between MRI based urethral parameters and continence following robot assisted radical prostatectomy</td>
<td>Kim L.H.C., Patel A., Kinsella N., Taghavi Azar Sharabiani M., Ap Dafydd D., Cahill D. Royal Marsden Hospital, Dept. of Urology, London, United Kingdom</td>
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<td>159</td>
<td>Positive surgical margins after robot-assisted radical prostatectomy in the multiparametric MRI era: The experience of a high volume third referral centre</td>
<td>Mistretta F.A., Matei D.V., Bianchi R., Di Trapani E., Conti A., Alessi S., Tringali V., Luzzago S., Russo A., Ferro M., Musi G., Petralia G., Renne G., De Cobelli O. European Institute of Oncology, Dept. of Urology, Milan, Italy, European Institute of Oncology, Dept. of Radiology, Milan, Italy, European Institute of Oncology, Dept. of Pathology, Milan, Italy</td>
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161 Concurrent inguinal hernia repair in patients undergoing minimally-invasive radical prostatectomy: A national surgical quality improvement program study

By: Taylor B. ¹, Xia L. ², Patel N. ¹, Scherr D. ¹, Guzzo T. ²
¹Weill Cornell Medical College, Dept. of Urology, New York, United States of America, ²University of Pennsylvania School of Medicine, Dept. of Urology, Philadelphia, United States of America

162 Assessing the external validity of the updated prostate cancer (PCa) intervention versus observation trial (PIVOT)

By: Abdollah F., Dalela D., Akshay S., Alanee S., Keeley J., Peabody J., Rogers C., Mani M.
Vattikuti Urology Institute, Henry Ford Hospital, Dept. of Urology, Detroit, United States of America

163 The impact of the time from biopsy to prostatectomy on postoperative biochemical recurrence in clinically high risk localized prostate cancer

By: Elghiaty A., Ham W.S.
Yonsei University, Urology and Urological Science Institute, Seoul, Korea, South

164 Gleason score 6 prostate cancer is not always harmless

¹University Hospitals Leuven, Dept. of Urology, Leuven, Belgium, ²Vita Salute San Raffaele University, Dept. of Urology, Milan, Italy, ³Jagiellonian University, Dept. of Urology, Krakow, Poland, ⁴University of Studies of Torino, Dept. of Urology, Turin, Italy, ⁵Martini Clinic, Dept. of Urology, Hamburg, Germany, ⁶Ludwig-Maximilians-Universität München, Dept. of Urology, Munich, Germany, ⁷Mayo Clinic, Dept. of Urology, Rochester, United States of America, ⁸Azienda Ospedaliero Universitaria Maggiore della Carità, Dept. of Urology, Novara, Italy, ⁹Institute Mutualiste Montsouris, Dept. of Urology, Paris, France, ¹⁰Inselspital, Universitätsspital Bern, Dept. of Urology, Bern, Switzerland, ¹¹Université Catholique de Louvain, Dept. of Urology, Brussels, Belgium, ¹²Netherlands Cancer Institute, Dept. of Urology, Amsterdam, Netherlands

165 An individual patient data meta-regression for continence recovery at 6 and 12 months following prostatectomy

¹Westmead Private Physiotherapy Services and The Clinical Research Institute, Urology Clinical Research Stream, Sydney, Australia, ²Macquarie University, Dept. of Statistics, Sydney, Australia, ³Memorial Sloan Kettering Cancer Center, Urology Service, Dept.
Should Gleason score at the positive surgical margin site be reported on the pathology report of robot-assisted radical prostatectomy?

By: Kanao K., Sugie M., Muramatsu H., Morinaga S., Kajikawa K., Kobayashi I., Nishikawa G., Kato Y., Watanabe M., Nakamura K., Sumitomo M.
Aichi Medical University, Dept. of Urology, Nagakute, Japan

Perioperative outcomes of 10,000 robotic assisted radical prostatectomies: Single surgeon experience

By: Palayapalayam Ganapathi H., Rocco B., Onol F., Roof S., Rogers T., Patel V.
1Global Robotics Institute at Florida Hospital Celebration Health, Center for Urologic Cancer, Celebration, United States of America, 2University of Modena and Reggio Emilia, Dept. of Urology, Modena, Italy
168

The shock of life: The history of electro-ejaculation

By: Aldiwani M. 1, Miah S. 1, Molokwu C. 2, Venugopal S. 3
1Imperial College NHS Trust, Dept. of Urology, London, United Kingdom, 2Bradford Royal Infirmary, Dept. of Urology, Bradford, United Kingdom, 3Chesterfield Royal Hospital, Dept. of Urology, Chesterfield, United Kingdom

169

The Spanish painter Joaquín Sorolla, operated by Joaquín Albarrán in Biarritz in 1906: The patient's point of view through his letters, with news on the lost portrait of Albarrán by Sorolla

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

170

Ancient healing temples specialized in urogenital diseases

By: Guner E. 1, Guner S.I. 2, Seker K.G. 1, Kalfazade N. 1, Arikan Y. 1
1University of Health Sciences, Dr. Sadi Konuk Education and Training Hospital, Bakirkoy, Dept. of Urology, Istanbul, Turkey, 2Esenyurt University, Kolan International Hospital, Sisli, Dept. of Hematology and Bone Marrow Transplantation, Istanbul, Turkey

171

The legacy of Thorkild Rovsing (1862 -1927) as an example of early scientific exchange between Scandinavia and Germany in the field of urology

By: Moll F., Hansson N., Halling T., Krischel M., Fangerau H. Heinrich-Heine- University, Institute for the History, Theory and Ethics of Medicine, Düsseldorf, Germany

172

The distinguished British lithotomist Thomas Hollier (1609-1690) and the successful removal of Samuel Pepys' (1633-1703) bladder stone

To be confirmed

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Urologists to the desert rats – serendipitous skills of the world war II urologists
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<td>174</td>
<td>Genital and sexual symbology in the Maya world</td>
<td>By: Angulo Cuesta J. 1, Figueroa C. 2</td>
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<td></td>
<td></td>
<td>1 Universidad Europea de Madrid, Clinical Department, Madrid, Spain, 2 Integral Urology, Dept. of Urology, Ciudad de Guatemala</td>
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<td>175</td>
<td>Man into woman: A history of male-to-female (MtF) sex reassignment surgery</td>
<td>By: Oliver R., Davies M.</td>
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<td>Salisbury District Hospital, Dept. of Urology, Salisbury, United Kingdom</td>
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<td>176</td>
<td>Bridging the gender gap: The early female urologists of the 20th century</td>
<td>By: Pindoria N. 1, Khoo C. 1, Tomui D. 2</td>
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<td></td>
<td>1 Chelsea and Westminster Hospital, Dept. of Urology, London, United Kingdom, 2 Epsom and St. Helier Hospital, Dept. of Urology, London, United Kingdom</td>
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<td>177</td>
<td>The portrait of Dr. Hans Haustein</td>
<td>By: Schultheiss D.</td>
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<td>Protestant Hospital, Dept. of Urology, Giessen, Germany</td>
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<td>178</td>
<td>&quot;This quite modern branch of surgery&quot; – Sir Henry Morris and the first nephrolithotomy</td>
<td>By: Goddard J.</td>
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<td>University Hospitals of Leicester NHS Trust, Dept. of Urology, Leicester, United Kingdom</td>
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<td>179</td>
<td>The male sexual case history: Changing the discourse on male sexuality</td>
<td>By: Quallich S., Ohl D.</td>
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<td>University of Michigan, Dept. of Urology, Ann Arbor, MI, United States of America</td>
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<td>180</td>
<td>A Danish cartoon representing the status of gender reassignment in the 1920s</td>
<td>By: Krischel M., Halling T., Hansson N., Fangerau H., Moll F.</td>
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<td>Heinrich Heine University, Dept. for the History, Theory and Ethics of Medicine, Düsseldorf, Germany</td>
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<td>181</td>
<td>Seventy-five years of &quot;Endoscopia urinaria&quot; (Urinary endoscopy) (Barcelona, 1939), by Antonio Puigvert Gorro (1905-1990), illustrated by Rafael Alemany Cremades</td>
<td>By: Fariña-Pérez L.A.</td>
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<td>Povisa Hospital, Dept. of Urology, Vigo, Spain</td>
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<td>Instruments used in the bladder stone surgery in ancient Anatolia</td>
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Cannabis and urology: A contradictory modern history

By: O'Rourke S. ¹, Pearce I. ²
¹University of Manchester, School of Medicine, Manchester, United Kingdom,
²Manchester Royal Infirmary, Dept. of Urology, Manchester, United Kingdom

184

Frozen in time: The origins of urological cryosurgery

By: Khoo C. ¹, Pindoria N. ¹, Philippou Y. ², Hadjipavlou M. ³
¹Chelsea and Westminster Hospital NHS Foundation Trust, Dept. of Urology, London, United Kingdom,
²University of Oxford, Nuffield, Dept. of Surgical Sciences, Oxford, United Kingdom,
³Guy’s Hospital, Dept. of Urology, London, United Kingdom
Medical management of LUTS/BPH: Finding the right treatment pathway
Poster Session 15

Location: Blue Area, Room 3 (Level 0)

Chairs: M. Drake, Bristol (GB)
J. Krhut, Ostrava (CZ)
R. Lee, New York (US)

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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What are the predicting factors for the therapeutic effects of tadalafil in male patients with lower urinary tract symptoms?

By: Matsukawa Y., Takai S., Ishida S., Funahashi Y., Majima T., Yoshie K., Yamamoto T., Gotoh M.
Nagoya University Graduate School of Medicine, Dept. of Urology, Nagoya, Japan

186

Testosterone replacement therapy is able to reduce prostate inflammation in men with BPH, metabolic syndrome and hypogonadism: Preliminary results from a randomized placebo-controlled clinical trial

By: Rastrelli G.¹, Cipriani S.¹, Lotti F.¹, Cellai I.¹, Comeglio P.¹, Boddi V.¹, Della Camera P.², Palma M.¹, Gacci M.², Serni S.², Maggi M.¹, Vignozzi L.¹
¹University of Florence, Dept. of Experimental Clinical and Biomedical Sciences - Sexual Medicine and Andrology Unit, Florence, Italy, ²University of Florence, Dept. of Urology, Florence, Italy

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Could dosage increase of α-blocker reduce the adverse effects of anticholinergics for the male patients with BPH and OAB?

By: Lee J.S.¹, Lee H.S.¹, Seo J.T.¹, Kim Y.S.²
¹Dankook University, Cheil Hospital, Dept. of Urology, Seoul, Korea, South, ²NHIS Ilsan Hospital, Dept. of Urology, Goyang, Korea, South

* 188

Effect of a decision aid for lower urinary tract symptoms due to benign prostatic hyperplasia on informed and value congruent decision making: A prospective study with a historical control group

By: Van Der Wijden F.¹, De Angst I.¹, Cuypers M.², De Vries M.³, Lamers R.¹, Van Melick H.⁴, De Beij J.⁵, Oerlemans D.⁶, Van De Beek C.⁷, Kil P.¹
¹ETZ Hospital, Dept. of Urology, Tilburg, Netherlands, The, ²Tilburg University, Dept. of Social Psychology, Tilburg, Netherlands, The, ³Radboud University, Institute for Computing and Information Sciences (iCIS) & Social and Cultural Psychology,
Analysis of referrals after a synergic work between primary care attention and urology. Impact of joint protocol implementation on most common pathologies and a continuing education program in our healthcare area

By: Garcia Rojo E.1, Medina-Polo J.1, Sopeña-Sutil R.1, Alonso-isa M.1, González-Padilla D.1, García-Alvarez G.2, Garcia-Gomez B.1, Gómez-Martín F.3, Molero-García J.M.3, Pereda-Arregui E.3, Vargas-Machuca-Cabañero M.C.3, Villacampa-Auba F.1, Passas-Martínez J.1, Tejido-Sánchez Á.1

1Hospital Universitario 12 de Octubre, Dept. of Urology, Madrid, Spain, 2Hospital Universitario 12 de Octubre, Dept. of Continuity of Health Care, Madrid, Spain, 3Hospital Universitario 12 de Octubre, General Practitioner, Madrid, Spain

Combination of finasteride and tamsulosine in the treatment of male lower urinary tract symptoms: What patients are thinking about?

By: Malkhasyan V.1, Kasyan G.1, Semeniakin I.1, Pushkar D.1

A.I. Evdokimov Moscow State University of Medicine and Dentistry, Dept. of Urology, Moscow, Russia

The effect of alpha blocker for post-operative urinary retention: A systemic review and meta-analysis

By: Chen P-C.1, Yeh T-C.2

1En Chu Kong Hospital, Dept. of Urology, New Taipei City, Taiwan, 2National Taiwan University Hospital Hsin-Chu Branch, Dept. of Urology, Hsin-Chu City, Taiwan

Prospective, multicenter study on the clinical management and outcomes of urinary retention in men

By: Shanmugabavan Y.1, Raja A.2, Kozen A.2, Ren K.2, Hillary C.3, Chahal R.1

1Bradford Teaching Hospitals NHS Foundation Trust, Dept. of Urology, Bradford, United Kingdom, 2Leeds Teaching Hospitals NHS Trust, Dept. of Urology, Leeds, United Kingdom, 3Sheffield Teaching Hospital HNS Foundation Trust, Dept. of Urology, Sheffield, United Kingdom

Cost-utility analysis of upfront pharmacotherapy compared to an upfront surgical intervention for patients with benign prostate hyperplasia

By: Elterman D.1, Shepherd S.2

1University Health Network - Toronto Western Hospital, Dept. of Urology, Toronto, Canada, 2McMaster University, Dept. of Health Research Methods, Evidence, and Impact, Hamilton, Canada
Nocturia is significantly associated with depressive symptoms in Caucasian-European men seeking medical help for sexual dysfunction without known psychiatric disorders

By: Pederzoli F.\textsuperscript{1}, Boeri L.\textsuperscript{1}, Capogrosso P.\textsuperscript{2}, Ventimiglia E.\textsuperscript{2}, Cazzaniga W.\textsuperscript{2}, Frego N.\textsuperscript{2}, Chierigo F.\textsuperscript{2}, Pozzi E.\textsuperscript{2}, Dehò F.\textsuperscript{2}, Montanari E.\textsuperscript{3}, Gaboardi F.\textsuperscript{2}, Mirone V.\textsuperscript{4}, Montorsì F.\textsuperscript{2}, Salonia A.\textsuperscript{2}

\textsuperscript{1}San Raffaele Hospital University, Dept. of Urology, Milan, Italy, \textsuperscript{2}San Raffaele Hospital University, Dept. of Experimental Oncology, Milan, Italy, \textsuperscript{3}Maggiore Policlinico Hospital, Dept. of Urology, Milan, Italy, \textsuperscript{4}University of Naples Federico, Dept. of Urology, Naples, Italy

Withdrawn
To be confirmed

Is there any association between obstructive sleep apnea syndrome and lower urinary tract symptoms in men?

By: Arslan B., Ozdemir E., Hazar A.I., Cilesiz N.C., Kalkanli A., Ozkan A., Cetin B., Karaca A.S.

Taksim Gaziosmanpasa Training and Research Hospital, Dept. of Urology, Istanbul, Turkey

A prospective analysis concerning the microbial resistance rates in patients undergoing TURP

By: Baten E.\textsuperscript{1}, Van Der Aa F.\textsuperscript{2}, Orye C.\textsuperscript{2}, Cartuyvels R.\textsuperscript{3}, Van Renterghem K.\textsuperscript{1}

\textsuperscript{1}Jessa Ziekenhuis, Dept. of Urology, Hasselt, Belgium, \textsuperscript{2}UZLeuven, Dept. of Urology, Leuven, Belgium, \textsuperscript{3}Jessa Ziekenhuis, Dept. of Microbiology, Hasselt, Belgium

Summary
M. Drake, Bristol (GB)
Poster Session 16

Friday 16 March
14:15 - 15:45

**Urology in the elderly patient**

**Location:** Blue Area, Room 4 (Level 0)

**Chairs:**
- T. Antunes Lopes, Porto (PT)
- S. Arlandis Guzman, Valencia (ES)
- A. Morgans, Nashville (US)

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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**198**

**Preoperative frailty score is associated with increased healthcare resource utilization following urological cancer surgery**

By: Taylor B.¹, Xia L.², Shoag J.¹, Scherr D.¹, Guzzo T.², Hu J.¹

¹Weill Cornell Medical College, Dept. of Urology, New York, United States of America,
²University of Pennsylvania School of Medicine, Dept. of Urology, Philadelphia, United States of America

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**Outcomes of frail and elderly patients undergoing TUR-P/BT in a single centre: The “Uro-Frailty MDT”**

By: Good D.¹, Jones H.², Drybrugh B.², Tsavalas P.¹, Foo I.³, Macdonald E.², Bollina P.¹

¹NHS Lothian, Dept. of Urology, Edinburgh, United Kingdom,
²NHS Lothian, Dept. of Medicine of the Elderly, Edinburgh, United Kingdom,
³NHS Lothian, Dept. of Anaesthiesia, Edinburgh, United Kingdom

---

**200**

**Clinical implication of a simple quantitative frailty assessment tool for prognosis in patients with urological cancers**

By: Soma O.¹, Hatakeyama S.¹, Matsumoto T.¹, Kusaka A.¹, Hosogoe S.¹, Hamano I.¹, Tobisawa Y.¹, Yoneyama T.¹, Yamamoto H.¹, Imai A.¹, Yoneyama T.¹, Hashimoto Y.¹, Koie T.¹, Nakaji S.², Ohyama C.¹

¹Hirosaki University Graduate School of Medicine, Dept. of Urology, Hirosaki, Aomori, Japan,
²Hirosaki University Graduate School of Medicine, Dept. of Social Medicine, Hirosaki, Aomori, Japan

---

**201**

**Increasing risk of postoperative daily-activity damage with aging on prostatectomy, nephrectomy, nephroureterectomy and cystectomy: Japanese nationwide database**

By: Sugihara T.¹, Yasunaga H.², Matsu H.², Fujimura T.³, Fukuhara H.³, Yukio H.⁴, Haruki K.³

¹Tokyo Metropolitan Tama Medical Center, Dept. of Urology, Tokyo, Japan,
²The University of Tokyo, Clinical Epidemiology and Health Economics, Tokyo, Japan,
³The

---
**Prospective evaluation of geriatric assessments as predictors of complications and functional outcome after major urologic tumor surgery in the old: Updated results after 2 years**

By: Kahlmeyer A., Amend W., Sikic D., Keck B., Goebell P., Wullich B.

Universitaetsklinikum Erlangen, Dept. of Urology and Pediatric Urology, Erlangen, Germany

**Outcomes of partial versus radical nephrectomy in octogenarian patients: Results from the RESURGE project**


1Spedali Civili Hospital, University of Brescia, Dept. of Urology, Brescia, Italy, 2University of Trieste, Dept. of Urology, Trieste, Italy, 3IVO Istituto Valenciano de Oncologia, Dept. of Urology, Valencia, Spain, 4Fundació Puigvert Autonoma, University of Barcelona, Dept. of Urology, Barcelona, Spain, 5Hospital Universitario La Paz, Dept. of Urology, Madrid, Spain, 6Kidney Center, Tokyo Women's Medical University, Dept. of Urology, Tokyo, Japan, 7Yonsei University College of Medicine, Dept. of Urology, Seoul, Korea, South, 8School of Medicine, University of Turin-San Luigi Gonzaga Hospital, Dept. of Urology, Turin, Italy, 9Technical University of Munich, Dept. of Urology, Munich, Germany, 10Changhai Hospital, Dept. of Urology, Shanghai, China, 11ORSI Academy, OLV Hospital, Dept. of Urology, Aalst, Belgium, 12University of Grenoble, Dept. of Urology, Grenoble, France, 13Sant’Andrea Hospital, University La Sapienza, Dept. of Urology, Rome, Italy, 14VCU Medical Center, Dept. of Urology, Richmond, United States of America, 15European Oncology Institute, Dept. of Urology, Milan, Italy, 16University of Modena and Reggio Emilia, Dept. of Urology, Modena, Italy, 17CUF Urology and University of Minho, Dept. of Urology, Braga, Portugal, 18Tor Vergata University, Dept. of Urology, Rome, Italy, 19ASL Abruzzo 2, Dept. of Urology, Chieti, Italy, 20Pascale Foundation, Dept. of Urology, Naples, Italy, 21San Bassiano Hospital, Dept. of Urology, Bassano del Grappa, Italy, 22Urological Research Institute, IRCCS San Raffaele Hospital, Dept. of Urology, Milan, Italy, 23UCSD, Dept. of Urology, San Diego, United States of America

**Minimally invasive partial nephrectomy for elderly patients with renal mass: Morbidity, renal function and oncologic outcomes in the RESURGE collaborative database**

By: Larcher A., Capitanio U., Antonelli A., Palumbo C., Furlan M., Pavan N.,
Determine the risk of complications and readmission after nephron sparing surgery: Tumor or patient

By: Kriegmair M.C. 1, Wunderle M. 1, Mandel P. 2, Porubsky S. 3, Wagener N. 1, Pfalzgraf D. 1

1University Medical Center Mannheim, Dept. of Urology, Mannheim, Germany, 2University Hospital Frankfurt, Dept. of Urology, Frankfurt, Germany, 3University Medical Center, Dept. of Pathology, Mannheim, Germany

Complications of radical cystectomy with ureterocutaneostomy in octogenarians

By: De Nunzio C. 1, Izquierdo L. 2, Lombardo R. 1, Tema G. 1, Lotrecchiano G. 3, Minervini A. 4, Simone G. 5, Cindolo L. 6, D’Orta C. 6, Ajami T. 2, Antonelli A. 7, Della Bella M. 8, Alcaraz A. 2, Tubaro A. 1

1Sant’Andrea Hospital, Sapienza University of Rome, Dept. of Urology, Rome, Italy, 2University Hospital Clinic de Barcelona, Dept. of Urology, Barcelona, Spain, 3Azienda Ospedaliera G. Rummo, Dept. of Urology, Benevento, Italy, 4Azienda Ospedaliero Universitaria Careggi, Dept. of Urology, Florence, Italy, 5Istituto Nazionale Tumori Regina Elena, Dept. of Urology, Rome, Italy, 6Ospedale San Pio da Pietrelcina, Dept. of Urology,
### 207
**The role of G8 screening tool in elderly population undergoing radical cystectomy: Preliminary evaluation**

By: Boschian R., Pavan N., Verzotti E., Silvestri T., Traunero F., Liguori G., Trombetta C.

ASUITS - University of Trieste, Dept. of Urology, Trieste, Italy

### 208
**Predictors of transition to watchful waiting from active surveillance among men with low-risk prostate cancer in a Caucasian cohort**


Fundacion Instituto Valenciano de Oncologia, Dept. of Urology, Valencia, Spain

### 209
**Mirabegron in older vs younger patients: Safety and tolerability data from a large integrated database**

By: Wagg A. ¹, Milsom I. ², Herschorn S. ³, Heesakkers J. ⁴, Cardozo L. ⁵, Chapple C.R. ⁶, Cruz F. ⁷, Staskin D.R. ⁸, Stoelzel M. ⁹, Schermer C. ¹⁰, Siddiqui E. ¹¹

¹University of Alberta, Geriatric Medicine, Edmonton, Canada, ²Institute of Clinical Sciences, Dept. of Obstetrics and Gynecology, Gothenburg, Sweden, ³University of Toronto, Dept. of Urology, Toronto, Canada, ⁴Radboudumc, Dept. of Urology, Nijmegen, Netherlands, The, ⁵King's College Hospital, Dept. of Urognynaecology, London, United Kingdom, ⁶Royal Hallamshire Hospital, Dept. of Urology, Sheffield, United Kingdom, ⁷Hospital S João and Faculty of Medicine/i3S Institute, Dept. of Urology, Porto, Portugal, ⁸St Elizabeth's Medical Center, Dept. of Urology, Brighton, United States of America, ⁹Astellas Pharma Europe, Data Science, Leiden, Netherlands, The, ¹⁰Astellas Pharma US, Medical Affairs, Americas, Northbrook, United States of America, ¹¹Astellas Pharma, Global Medical Affairs, Chertsey, United Kingdom

### 210
**To increase the success of removing the urinary catheter in elderly patients with recurrent urinary retention**

By: Rambaud C. ¹, Gonfrier S. ¹, Imbert De La Phalecque L. ², Fallot J. ², Haider R. ², Tibi B. ², Guerin O. ¹, Durand M. ²

¹Hospital of Nice, Dept. of Geriatricy, Nice, France, ²Hospital of Nice, Dept. of Urology, Nice, France

### 211
**Thermo-expandable metallic urethral stent for managing elderly people with indwelling urinary catheter: A compelling option to avoid long-term catheterization**

By: Rambaud C. ¹, Gonfrier S. ¹, Arlaud C. ¹, Imbert De La Phalecque L. ², Fallot J. ², Haider R. ², Tibi B. ², Guerin O. ¹, Durand M. ²

¹Hospital of Nice, Dept. of Geriatrics, Nice, France, ²Hospital of Nice, Dept. of Urology, Nice, France
Relationships between testosterone value and frailty in aging men and women

By: Matsushita K. ¹, Kurita N. ², Horie S. ¹

¹Juntendo University, Graduate School of Medicine, Dept. of Urology, Tokyo, Japan,
²Fukushima Medical University Hospital, Dept. of Urology, Fukushima, Japan
## Neural networks, computer aided urology and other advanced techniques
**Poster Session 17**

**Location:** Blue Area, Room 5 (Level 0)

**Chairs:**
- B.H. Chung, Seoul (KR)
- A. Miernik, Freiburg (DE)
- E. Nemr, Achrafieh - Beirut (LB)

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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<tr>
<th>213</th>
<th>High accuracy and effectiveness with deep neural networks and artificial intelligence in pathological diagnosis of prostate cancer: Initial results</th>
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<tbody>
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<td>By:</td>
<td>Zhang C.¹, Zhang Q.¹, Gao X.², Liu P.², Guo H.¹</td>
</tr>
<tr>
<td>¹</td>
<td>Nanjing Drum Tower Hospital, Dept. of Urology, Nanjing, China, ²Nanjing Innovative Data Technologies, Inc., Development, Nanjing, China</td>
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<th>214</th>
<th>Computer-aided diagnosis with a convolutional neural network algorithm for fully automated detection of prostate cancer using pre-biopsy MRI</th>
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<td>By:</td>
<td>Ishioka J.¹, Matsuoka Y.¹, Uehara S.¹, Yasuda Y.¹, Kijima T.¹, Yoshida S.¹, Yokoyama M.¹, Saito K.¹, Kihara K.¹, Kimura T.², Kudo K.³, Kumazawa I.⁴, Fujii Y.¹</td>
</tr>
<tr>
<td>¹</td>
<td>Tokyo Medical and Dental University, Dept. of Urology, Tokyo, Japan, ²Ochanomizu Surugadai Clinic, Dept. of Radiology, Tokyo, Japan, ³Tokyo Institute of Technology, Dept. of Information and Communications, Tokyo, Japan, ⁴Tokyo Institute of Technology, Laboratory for Future Interdisciplinary Research of Science and Technology, Tokyo, Japan</td>
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<th>215</th>
<th>Quantitation of hypoechoic lesions for the prediction and Gleason grading of prostate cancer: A prospective study</th>
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<td>By:</td>
<td>Hah Y.S.¹, Lee K.S.², Koo K.C.², Chung B.H.²</td>
</tr>
<tr>
<td>¹</td>
<td>Yonsei University College of Medicine, Dept. of Urology, Seoul, Korea, South, ²Yonsei University College of Medicine, Dept. of Urology, Seoul, Korea, South</td>
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<th>216</th>
<th>Light-sheet microscopy: Diagnosing intratumoral heterogeneity of intact tumors in three-dimension</th>
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<tr>
<td>By:</td>
<td>Tanaka N.¹, Kanatani S.¹, Kaczynska D.¹, Louhivuori L.¹, Wiklund P.², Oya M.³, Miyakawa A.², Uhlén P.¹</td>
</tr>
<tr>
<td>¹</td>
<td>Karolinska Institutet, Dept. of Medical Biochemistry and Biophysics, Stockholm, Sweden, ²Tokyo Medical and Dental University, Dept. of Urology, Tokyo, Japan, ³Tokyo Institute of Technology, Dept. of Information and Communications, Tokyo, Japan</td>
</tr>
</tbody>
</table>
217 Prognostic value of the new prostate cancer grading system

By: Offermann A., Kuempers C., Ribbat-Idel J., Becker F., Hohensteiner S., Schneider F., Hupe M.C., Merseburger A., Lubczyk V., Kuefer R., Perner S.

1University Medical Center Schleswig-Holstein, Campus Luebeck and Research Center Borstel, Leibniz Center for Medicine and Biosciences, Institute of Pathology, Luebeck and Borstel, Germany, 2Klinik am Eichert Alb Fils Kliniken, Dept. of Pathology, Goeppingen, Germany, 3Klinik am Eichert Alb Fils Kliniken, Dept. of Urology, Goeppingen, Germany, 4University Hospital Schleswig-Holstein, Campus Luebeck, Dept. of Urology, Luebeck, Germany, 5Klinik am Eichert Alb Fils Kliniken, Dept. of Urology, Goeppingen, Germany

218 A new approach for split renal function assessment of glomerular filtration rate, perfusion and plasma flow by mathematical analysis of 3D MSCT-based models

By: Proskura A., Glybochko P., Alyaev Y., Enikeev D., Khokhlachev S., Borisov V., Fiev D., Iurova M.

1I.M. Sechenov First Moscow State Medical University Ministry of Health of Russia, Research Institute of Uro nephrology and Human Reproductive Health, Moscow, Russia, 2Central Research institute stomatology and M.F. Surgery Ministry of Health of Russia, Laboratory of three-dimensional modeling and prototyping, Moscow, Russia, 3I.M. Sechenov First Moscow State Medical University Ministry of Health of Russia, Dept. of Occupational Diseases and Pulmonology, Moscow, Russia

219 Preliminary usability study of a visuo-haptic model of prostate cancer based on magnetic resonance elastography

To be confirmed

220 Metabolic syndrome does not increase the accuracy of the Rotterdam mobile-phone app for the prediction of prostate cancer and high-grade prostate cancer

By: Lombardo R., De Nunzio C., Tema G., Russo G.I., Zammitti F., Cancrini F., Tubaro A.

1Sant'Andrea Hospital, Sapienza University, Dept. of Urology, Rome, Italy, 2Azienda Ospedaliero - Universitaria , Dept. of Urology, Catania, Italy

221 The future of selective oncology therapy applied to urological tumors - plasma medicine (preliminary results)


1Coimbra's University Hospital, Urology and Renal Transplantation Department, Coimbra, Portugal, 2University of Coimbra, Faculty of Sciences and Technology, Coimbra, Portugal, 3University of Coimbra - Faculty of Medicine, Biophysics Institute, Coimbra, Portugal, 4University of Coimbra - Faculty of Medicine, Laboratory of Biostatistics and Medical Informatics, Coimbra, Portugal
222 Tanshinone-I protects renal ischemia-reperfusion injury in an Nrf2-dependent mechanism
By: Qiu X., Gao W., Zhao X., Chen W., Guo H.
Drum Tower Hospital, Medical School of Nanjing University, Dept. of Urology, Nanjing, China

223 Needle-assisted laparo-endoscopic single-site surgery for radical prostatectomy (LESS-RP) using a new series of Steerable™ instruments: Feasible option to overcome current limits?
Ghent University Hospital, Dept. of Neurosurgery, Ghent, Belgium, Maria Middelares Hospital, Dept. of Anesthesiology and Intensive Care Medicine, Ghent, Belgium, Ghent University Hospital, Dept. of Urology, Ghent, Belgium, Onze-Lieve-Vrouwe Hospital, Dept. of Urology, Aalst, Belgium, Maria Middelares Hospital, Dept. of Urology, Ghent, Belgium, Onze-Lieve-Vrouwe Hospital, Dept. of Gynecology, Aalst, Belgium, ORSI Academy, Dept. of ORSI, Melle, Belgium, Ghent University Hospital, Dept. of Gastrointestinal Surgery, Ghent, Belgium

224 Transcriptomic and metabolomic profiling in kidney tissue – a combined approach
Dr. Margarete Fischer-Bosch-Institute, Dept. of Clinical Pharmacology, Stuttgart, Germany, University of Tuebingen, Dept. of Urology, Tuebingen, Germany, Jewish General Hospital, Dept. of Medical Oncology, Montreal, Canada

225 Cryobiopsy for upper urinary tract lesions: Preclinical evaluation of a novel device
University of Ulm, Dept. of Urology, Ulm, Germany, Erbe Elektromedizin GmbH, Dept. of Research and basic technologies, Tübingen, Germany, Diakonie Klinikum Stuttgart, Dept. of Urology, Stuttgart, Germany

226 Reproducible isolation of high-purity urinary extracellular vesicles for uro-oncological biomarker studies
Ghent University Hospital, Dept. of Surgery, Ghent, Belgium, Ghent University Hospital, Dept. of Gynaecology, Ghent, Belgium, Ghent University Hospital, Dept. of Radiation Oncology and Experimental Cancer Research, Ghent, Belgium, University of Oulu, Dept. of Pathology, Oulu, Finland, University of Turku, Dept. Of Biochemistry, Turku, Finland
New standards of care in localised prostate cancer?

Video Session 03

Friday 16 March
14:15 - 15:45

Location: Green Area, Room 15 (Level 0)
Chairs: To be confirmed
C. Llorente Abarca, Madrid (ES)
P. Mozer, Paris (FR)

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

V17
Bladder neck preservation during robotic prostatectomy: If the only concern is about positive surgical margins, there is no problem

By: Dal Moro F. 1, Zazzara M. 1, Gardiman M. 2, Rugge M. 2, Zattoni F. 1
1University of Padua, Dept. of Urology, Padua, Italy, 2University of Padua, Dept. of Pathology, Padua, Italy

V18
Intraoperative neuromonitoring for neurovascular bundles preservation during radical prostatectomy. Impact on urinary continence

By: Burgos Revilla F.J. 1, Martin-Palomeque G. 2, Sanz-Mayayo E. 1, Sanchez C. 1, Gonzalez-Gordaliza C. 3, Saiz A. 4, Laso I. 1, Cabañas L. 5, Fraile A. 1, Rodríguez-Patrón R. 1
1Ramón y Cajal University Hospital. Alcalá University. IRYCIS, Dept. of Urology, Madrid, Spain, 2Ramón y Cajal University Hospital. Alcalá University. IRYCIS, Neurophysiology, Madrid, Spain, 3Ramón y Cajal University Hospital. Alcalá University. IRYCIS, Dept. of Radiology, Madrid, Spain, 4Ramón y Cajal University Hospital. Alcalá University. IRYCIS, Dept. of Pathology, Madrid, Spain, 5Ramón y Cajal University Hospital. Alcalá University. IRYCIS, Dept. of Neurophysiology, Madrid, Spain

V19
3D augmented reality robot-assisted radical prostatectomy

By: Porpiglia F., Bertolo R., Checucci E., Amparore D., Fiori C.
San Luigi Gonzaga Hospital, Dept. of Urology, Orbassano, Italy

V20
Preserving of periprostatic anatomy influences the early continence rate more than preserving of neurovascular bundles: A comparative study of three robot-assisted radical prostatectomy variations

By: Mosoyan M., Ilin D., Fedorov D.
Almazov National Medical Research Centre, Dept. of Urology and Robotic Surgery, Saint Petersburg, Russia

V21
Highlights in robot-assisted radical prostatectomy: Lateral approach with dorsal vein complex preservation
V22

**Challenging scenarios during bladder neck dissection in robot-assisted laparoscopic radical prostatectomy**

By: Önl F.F., Palayapalayam Ganapathi H., Rogers T., Patel V.
Florida Hospital Global Robotics Institute, Dept. of Urology, Celebration, United States of America

V23

**Transperineal freehand mpMRI targeted prostate biopsy under local anaesthesia using ESAOTE™ platform: Technique and initial oncological and functional outcomes**

By: Marra G.¹, Marquis A.¹, Tappero S.¹, Agnello M.¹, D’Agate D.¹, Oderda M.¹, Zitella A.¹, Greco A.¹, Faletti R.², Molinaro L.³, Gontero P.¹

¹San Giovanni Battista Hospital, Città della Salute e della Scienza and University of Turin, Dept. of Urology, Turin, Italy, ²San Giovanni Battista Hospital, Città della Salute e della Scienza and University of Turin, Dept. of Radiology, Turin, Italy, ³San Giovanni Battista Hospital, Città della Salute e della Scienza and University of Turin, Dept. of Pathology, Turin, Italy
# Confidence at First Sight! A Brighter Future for Bladder Cancer Patients

**Press Conference Photocure**

**Location:** Orange Area, Room 4 (Level 0)

**Aims and objectives of this session**

“Confidence at First Sight! A Brighter Future for Bladder Cancer Patients” will feature discussions from key opinion leaders in the field on the improved detection of bladder cancer with Blue Light Cystoscopy (BLC™) with Hexvix®/Cysview®, recent approvals, emerging real world data and clinical data and the future of care for patients.

<table>
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<tr>
<th>Time</th>
<th>Session</th>
<th>Speaker Details</th>
</tr>
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<tbody>
<tr>
<td>17:00 - 17:10</td>
<td><strong>Welcome</strong></td>
<td>To be confirmed</td>
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<tr>
<td>17:10 - 17:30</td>
<td><strong>Perspectives on NMIBC Barriers to Progress</strong></td>
<td>A.M. Kamat, Houston (US)</td>
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<tr>
<td>17:30 - 17:50</td>
<td><strong>New Data and Real World Experience</strong></td>
<td>S. Daneshmand, Los Angeles (US)</td>
</tr>
<tr>
<td>17:50 - 18:10</td>
<td><strong>Experience with BLC with Hexvix from Denmark: Real World Implications</strong></td>
<td>G.G. Hermann, Hellerup (DK)</td>
</tr>
<tr>
<td>18:10 - 18:30</td>
<td><strong>Bladder Cancer Management Now and in the Future</strong></td>
<td>P-U. Malmström, Uppsala (SE)</td>
</tr>
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</table>
### EAU Opening Ceremony

**Location:** Green Area, eURO Auditorium (Level 0)

**Friday 16 March**  
**18:00 - 19:30**

<table>
<thead>
<tr>
<th>Time</th>
<th>Event Description</th>
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</table>
| 18:00 - 18:07 | **Opening address**  
C.R. Chapple, Sheffield (GB)                                                      |
<p>| 18:07 - 18:14 | <strong>Welcome by Commissioner Andriukaitis</strong>                                         |
| 18:14 - 18:28 | <strong>Announcement of the new EAU Honorary Members</strong>                                  |
| 18:28 - 18:35 | <strong>Presentation of the EAU Willy Gregoir Medal 2018</strong>                              |
| 18:35 - 18:42 | <strong>Presentation of the EAU Frans Debruyne Life Time Achievement Award 2018</strong>        |
| 18:42 - 18:49 | <strong>Presentation of the EAU Crystal Matula Award 2018</strong>                              |
| 18:49 - 18:56 | <strong>Presentation of the EAU Hans Marberger Award 2018</strong>                              |
| 18:56 - 19:03 | <strong>EAU Ernest Desnos Prize</strong>                                                        |
| 19:03 - 19:10 | <strong>Presentation of the EAU Prostate Cancer Research Award 2018</strong>                    |</p>
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<tr>
<th>Time</th>
<th>Event</th>
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<tr>
<td>07:15-07:15</td>
<td>Welcome by the EAU Secretary General</td>
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<tr>
<td>07:15-07:15</td>
<td>Approval minutes General Assembly of 25 March 2017, London, United Kingdom</td>
</tr>
<tr>
<td>07:15-08:15</td>
<td>General report by the EAU Secretary General</td>
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<tr>
<td></td>
<td>C.R. Chapple, Sheffield (GB)</td>
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<tr>
<td>07:15-07:15</td>
<td>Report by the EAU Treasurer</td>
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<td>M. Wirth, Dresden (DE)</td>
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<tr>
<td>07:15-07:15</td>
<td>Specific reports on the EAU Offices by the EAU Executive</td>
</tr>
<tr>
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<td>• Approval new EAU members</td>
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<td>• Approval new Honorary members</td>
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<td>Other business</td>
</tr>
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<td></td>
<td>• Report of the chairman of the EAU Research Foundation (EAURF)</td>
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<tr>
<td></td>
<td>A.S. Bjartell, Malmö (SE)</td>
</tr>
<tr>
<td>07:15-07:15</td>
<td>Announcement of the 34rd Annual EAU Congress in Barcelona, 15-19 March 2019</td>
</tr>
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</table>
Aims and objectives of this session
In recent years, deteriorating semen quality has been increasingly observed. Various researchers have identified changing lifestyle choices, such as delayed fatherhood and increased anabolic steroid abuse, but also increased exposure to environmental gonadotoxins as potential important causes of this phenomenon. In this plenary, an overview of these issues will be given, and the urologist will be updated on surgical options for the management of male infertility problems.

In the second half of the session, the focus will be on emerging therapies in andrology which are claimed to possess potential curative capacities such as low intensity shockwaves and cellular therapies. The quality of evidence supporting these novel therapies will be discussed in a case-based fashion.

08:15 - 08:30
Are European men delaying fatherhood? Epidemiology and the effects of advancing paternal age on fertility potential and the offspring
A. Salonia, Milan (IT)

08:30 - 08:45
Is the environment responsible for male infertility: What is the evidence?
M. Dinkelman-Smit, Rotterdam (NL)

08:45 - 09:00
EAU Guidelines snapshot presentation Surgical therapy for male infertility: Techniques and indications
S. Kliesch, Münster (DE)

09:00 - 09:15
Hot topic Anabolic steroids and their effects on fertility
M. Zitzmann, Münster (DE)

09:15 - 09:45
Case-based debate Low intensity Extracorporeal Shockwave Therapy (ESWT) for Erectile Dysfuntion (ED)
Moderator: M. Margreiter, Vienna (AT)

09:15 - 09:20
Case presentation
M. Margreiter, Vienna (AT)

09:20 - 09:30
ESWT is the new first-line therapy for ED
I. Gruenwald, Haifa (IL)

09:30 - 09:40
ESWT for ED cannot be recommended based on current data
M.M. Fode, Herlev (DK)

09:40 - 09:45
Discussion
American Urological Association (AUA) lecture  Cellular therapies for andrology: Promising strategy or business opportunity?
T.J.J. Bivalacqua, Baltimore (US)
Nightmare session: Bladder cancer management

Plenary Session 2

Saturday 17 March
08:15 - 10:00

Location: Green Area, Room 1 (Level 0)

Chairs: T.S. O'Brien, London (GB)
M. Rouprêt, Paris (FR)

Aims and objectives of this session
The European Association of Urology (EAU) Non-Muscle and/or Muscle Invasive Bladder Cancer (NMIBC) guidelines are meant to help minimise morbidity and improve the care of patients with Bladder Cancer (BC). However, there may be underuse of guideline-recommended care in this potentially curable cohort. One reason is that non-indexed patients are treated by urologists. The incidence of postoperative complications is still the most frequently used surrogate marker of quality in surgery. The EAU guidelines has advocated the use of Clavien-Dindo classification as a standardised approach to grade and report postoperative complications in urology. However, it does not apply for intraoperative complications, and there is a need for an additional tool. In the current session we will discuss three distinct difficult clinical situations coming from the daily practice of urology in BC care. We will discuss issues around these very challenging cases and propose actions to overcome these so-called "nightmare" cases for urologists.

08:15 - 08:50
Case-based debate  pT0 post cystectomy - "You mean I went through all of this and there was no tumour"

08:15 - 08:20
Case presentation
T.S. O'Brien, London (GB)

08:20 - 08:30
Evidence
M. Burger, Regensburg (DE)

08:30 - 08:45
Cross examination
B. Leigh, London (GB)

08:45 - 08:50
Case solution

08:50 - 09:25
Case-based debate  Complications after a lengthy, complex cystectomy

08:50 - 08:55
Case presentation
M. Rouprêt, Paris (FR)

08:55 - 09:05
Evidence
A. Masson-Lecomte, Créteil (FR)

09:05 - 09:20
Cross examination
B. Leigh, London (GB)

09:20 - 09:25
Case solution
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<th>Time</th>
<th>Session</th>
<th>Description</th>
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<tr>
<td>09:25 - 10:00</td>
<td>Case-based debate</td>
<td>Complications following an early re-resection after no muscle in first TURBT</td>
</tr>
<tr>
<td>09:25 - 09:30</td>
<td>Case presentation</td>
<td>T.S. O'Brien, London (GB)</td>
</tr>
<tr>
<td>09:30 - 09:40</td>
<td>Evidence</td>
<td>H. Mostafid, Surrey (GB)</td>
</tr>
<tr>
<td>09:40 - 09:55</td>
<td>Cross examination</td>
<td>B. Leigh, London (GB)</td>
</tr>
<tr>
<td>09:55 - 10:00</td>
<td>Case solution</td>
<td></td>
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</table>
How to write the introduction and methods
ESU Course 01

Location: Orange Area, Room 1 (Level 0)
Chair: J.W.F. Catto, Sheffield (GB)

Aims and objectives of this session
Understand how to construct a well written introduction and methods section for your manuscript. Learn how to work through examples of good and bad practices, and understand key points when writing. Obtain insight from editors on what they expect to see.

• To understand what makes good introduction.
• To understand what makes a good methods section.
• To understand about systematic reviews and meta-analysis.
• To learn from experienced editors.

Welcome
J.W.F. Catto, Sheffield (GB)

How to write an introduction
G. Novara, Padova (IT)

Group working I

How to write the methods section
M. Assel, New York (US)

Key features for a systematic review
M.G.K. Cumberbatch, Sheffield (GB)

What to look for in the statistics section
M. Assel, New York (US)

Group working II

Questions and answers
Adrenals for urologists
ESU Course 04

Saturday 17 March
08:30 - 11:30

Location: Orange Area, Room 4 (Level 0)
Chair: A.S. Gözen, Heilbronn (DE)

Aims and objectives of this session
To teach all about the adrenal gland minimal invasive approach; starting with the correct indications for surgery and preoperative medical preparation. The different approaches and new equipment will be shown including special instructions. The operations will be given step by step in high quality videos in detail with tips and tricks. The complication videos and intraoperative management will be discussed interactively with the experts.

Introduction
A.S. Gözen, Heilbronn (DE)

Indications and patient preparation (medical and surgical)
J.F. Langenhuijsen, Nijmegen (NL)

Surgical anatomy of adrenals
F. Porpiglia, Turin (IT)

How I do it; step by step operative procedure, technical tips and tricks

- Transperitoneal
  J.F. Langenhuijsen, Nijmegen (NL)

- Retroperitoneal and prone
  A.S. Gözen, Heilbronn (DE)

- Mini-laparoscopic
  F. Porpiglia, Turin (IT)

Partial adrenalectomy and challenging cases in adrenalectomy
J.F. Langenhuijsen, Nijmegen (NL)

Complications and management
A.S. Gözen, Heilbronn (DE)

Discussion and interaction
A.S. Gözen, Heilbronn (DE)
J.F. Langenhuijsen, Nijmegen (NL)
F. Porpiglia, Turin (IT)
ESU/ESFFU Hands-on Training Course in OnabotulinumtoxinA administration for OAB
Sponsored by ALLERGAN

<table>
<thead>
<tr>
<th>Saturday 17 March 09:30 - 11:00</th>
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<tbody>
<tr>
<td><strong>Location:</strong></td>
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<td><strong>Chair:</strong></td>
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<td><strong>Tutors:</strong></td>
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**Aims and objectives of this session**
Botulinum toxin type A administration in Urology has become common practice over the last two decades. Following the completion of Phase 3 registration trials in OAB, OnabotulinumtoxinA received marketing approval for this indication and now has a standardised injection paradigm. This workshop 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.
ESU/ESFFU Hands-on Training Course in Urodynamics
Sponsored by LABORIE

Saturday 17 March
09:30 - 12:30

Location: Yellow Area, Room 2 (Level 0)
Chair: G. Van Koeveringe, Maastricht (NL)
Tutors: E. Finazzi Agrò, Rome (IT)
P. Rosier, Nijmegen (NL)
E. Solomon, London (GB)
U. Mehnert, Zurich (CH)
R. Kirschner-Hermanns, Bonn (DE)

Aims and objectives of this session

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

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.
ESU/ERUS Hands-on Training Course in Robotic surgery - Introduction
Sponsored by 3D SYSTEMS SIMBIONIX, MIMIC, INTUITIVE SURGICAL

Saturday 17 March
09:30 - 11:00

Location: Yellow Area, Room 5 (Level 0)
Chair: N. Grivas, Ioannina (GR)
Tutor: H. Zecha, Hamburg (DE)

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

Improve your robotic surgery skills in the following areas:
• Endowrist manipulation
• Camera Control
• 3rd Arm Control
• Needle Placement and Driving
• Suturing and Knot Tying
Technology Strikes Back
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 17 March
10:30 - 17:50

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

Aims and objectives of this session
Following a more than 10-year tradition of live-surgery sessions, the EAU Section of Uro-Technology (ESUT) presents an ambitious programme focussing on novel techniques and technologies in 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 on new instruments and devices that improve its ergonomics. The latest digital developments for flexible endoscopy of the upper urinary tract for diagnosis and treatment of tumours and calculi will also be demonstrated.

ESUT faculty consists of internationally well-known experts serving as surgeons and moderators. The different surgical procedures will be transmitted from Herlev Hospital in Copenhagen 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. In addition, the ESUT session will also be available online.

Live broadcasts from Herlev Hospital, Copenhagen (DK)

10:30 - 17:50 Coordinators in the eURO Auditorium

10:30 - 17:50 A. Breda, Barcelona (ES)
10:30 - 17:50 A.J. Gross, Hamburg (DE)

10:30 - 17:50 Coordinator at Herlev Hospital, Copenhagen (DK)

10:30 - 17:50 B. Kromann-Andersen, Herlev (DK)

10:30 - 17:50 Patient Advocates

10:30 - 17:50 L. Andersen, Frederiksberg (DK)
10:30 - 17:50 G.H.J. Atimash, Herlev (DK)
10:30 - 17:50 I. Ebbensgaard, Herlev (DK)
10:30 - 17:50 R.B. Hansen, Frederiksberg (DK)
10:30 - 17:50 M. Sabooh, Herlev (DK)
10:30 - 17:50 N. Svolgaard, Odense (DK)
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<thead>
<tr>
<th>Time</th>
<th>Session Title</th>
<th>Presenters</th>
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<tbody>
<tr>
<td>10:30 - 10:34</td>
<td><strong>Welcome and introduction</strong></td>
<td>E. Liatsikos, Patras (GR)</td>
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<tr>
<td>10:34 - 10:39</td>
<td><strong>Ethics of Live Surgery: Cases from last year</strong></td>
<td>B.J. Challacombe, London (GB)</td>
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<td>10:39 - 12:24</td>
<td><strong>Live Surgery Part I</strong></td>
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<td><em>Moderators:</em></td>
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<td>A. Govorov, Moscow (RU)</td>
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<td>M. Menon, Detroit (US)</td>
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<td>R. Sanchez-Salas, Paris (FR)</td>
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<td>C. Schwentner, Stuttgart (DE)</td>
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<td>A. Skolarikos, Athens (GR)</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>10:59 - 11:14</td>
<td><strong>Mini prone percutaneous nephrolithotripsy</strong></td>
<td>U. Nagele, Hall in Tirol (AT)</td>
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<td>11:14 - 11:25</td>
<td><strong>Flexible ureteroscopic lithotripsy</strong></td>
<td>G. Giusti, Milan (IT)</td>
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<td>11:25 - 11:36</td>
<td><strong>Single-use ureteroscopic lithotripsy</strong></td>
<td>K.H.A. Andreassen, Hellerup (DK)</td>
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<td>11:36 - 11:56</td>
<td><strong>Robotic partial nephrectomy</strong></td>
<td>S. Siemer, Homburg (DE)</td>
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<td>11:56 - 12:16</td>
<td><strong>Preperitoneal robot-assisted radical prostatectomy</strong></td>
<td>A. De La Taille, Créteil (FR)</td>
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<td>12:16 - 12:24</td>
<td><strong>Pre-recorded video: Holmium prostatectomy</strong></td>
<td>G. Wendt-Nordahl, Sindelfingen (DE)</td>
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<td>12:24 - 14:13</td>
<td><strong>Live Surgery Part II</strong></td>
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<td><em>Moderators:</em></td>
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<td>K. Ahmed, London (GB)</td>
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<td>T. Knoll, Sindelfingen (DE)</td>
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<td>B. Petrut, Cluj Napoca (RO)</td>
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<td>I. Varkarakis, Athens (GR)</td>
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<td>D. Veneziano, Reggio Calabria (IT)</td>
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<tr>
<td>12:24 - 12:32</td>
<td><strong>Pre-recorded video: Applications of confocal endomicroscopy technology in upper tract tumours</strong></td>
<td>A. Breda, Barcelona (ES)</td>
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<td>12:32 - 12:40</td>
<td><strong>Pre-recorded video: Robotic intracorporeal neobladder - Wiklund technique, step by step</strong></td>
<td>N.P. Wiklund, Stockholm (SE)</td>
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<td>12:40 - 12:48</td>
<td><strong>Pre-recorded video: Isiris single-use stent removal system</strong></td>
<td>J. Baard, Amsterdam (NL)</td>
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12:48 - 12:56  
Pre-recorded video: Bipolar bladder tumour resection with PDD  
R. Hofmann, Marburg (DE)

12:56 - 13:04  
Pre-recorded video: Supine combined Percutaneous Nephrolithotomy (PNL) without fluoroscopy  
P.J. Conort, Paris (FR)

13:04 - 13:12  
Pre-recorded video: Bipolar enucleation of prostate  
T.R.W. Herrmann, Hanover (DE)

13:12 - 13:32  
4K Laparoscopic extraperitoneal radical nephrectomy  
J. Rassweiler, Heilbronn (DE)

13:32 - 13:47  
Prone percutaneous nephrolithotripsy  
E. Liatsikos, Patras (GR)

13:47 - 14:02  
Supine Endoscopic Combined Intrarenal Surgery (ECIRS)  
P.J.S. Osther, Fredericia (DK)  
C.M. Scoffone, Turin (IT)

14:02 - 14:13  
Moses technology for ureteroscopic lithotripsy  
K. Ghani, Ann Arbor (US)

14:13 - 15:51  
Live Surgery Part III  
Moderators:  
A. Bachmann, Basel (CH)  
O.R. Durutovic, Belgrade (RS)  
M. Georgiev, Sofia (BG)  
A.S. Gözen, Heilbronn (DE)  
P. Nyirády, Budapest (HU)  
A. Skolarikos, Athens (GR)

14:13 - 14:33  
Robotic radical nephro-ureterectomy  
B. Kromann-Andersen, Herlev (DK)

14:33 - 14:53  
Robotic prostate adenomectomy  
A. Mottrie, Aalst (BE)

14:53 - 15:01  
Pre-recorded video: Holmium prostate enucleation  
M. Cynk, Tunbridge Wells (GB)

15:01 - 15:21  
3D Laparoscopic partial nephrectomy  
A. Alcaraz, Barcelona (ES)

15:21 - 15:32  
Flexible ureteroscopic lithotripsy  
O. Traxer, Paris (FR)

15:32 - 15:43  
Flexible ureteroscopic lithotripsy  
C.C. Seitz, Vienna (AT)

15:43 - 15:51  
Pre-recorded video: Bipolar enucleation of the prostate  
J. Rassler, Leipzig (DE)

15:51 - 17:45  
Live Surgery Part IV  
Moderators:  
S. Hruby, Zell am See (AT)  
To be confirmed
<table>
<thead>
<tr>
<th>Time</th>
<th>Session</th>
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</table>
| 15:51 - 16:11 | **4K Laparoscopic transperitoneal radical nephrectomy**  
J.V. Jepsen, Herlev (DK) |
| 16:11 - 16:22 | **Flexible ureteroscopic lithotripsy**  
G.M. Kamphuis, Amsterdam (NL) |
| 16:22 - 16:30 | **Pre-recorded video: Greenlight prostatectomy**  
F. Gomez Sancha, Madrid (ES) |
| 16:30 - 16:38 | **Pre-recorded video: Transurethral en-block resection of bladder tumour with PDD**  
L. Lusuardi, Salzburg (AT) |
| 16:38 - 16:46 | **Pre-recorded video: NBI-assisted resection of bladder tumour**  
B. Malavaud, Toulouse (FR) |
| 16:46 - 16:54 | **Pre-recorded video: HIFU for prostate cancer**  
R. Ganzer, Bad Tölz (DE) |
| 16:54 - 17:02 | **Pre-recorded video: Enucleation of the prostate using Hemera Pulsed Thulium laser with updated settings**  
J.B. Roche, Bordeaux (FR) |
| 17:02 - 17:10 | **Pre-recorded video: Applications of Thulium for prostate treatment**  
L. Carmignani, Milan (IT) |
| 17:10 - 17:21 | **Digital flexible ureteroscopic lithotripsy**  
L. Ajayi, London (GB) |
| 17:21 - 17:29 | **Pre-recorded video: Aquablation**  
T. Bach, Hamburg (DE) |
| 17:29 - 17:37 | **Pre-recorded video: Thulium vaporesection of the prostate: “The oyster technique”**  
P. Kallidonis, Patras (GR) |
| 17:37 - 17:45 | **Pre-recorded video: Thulium and upper tract tumour**  
G. Bozzini, Castellanza (IT) |
Management of stones: Advancing technology, increasing experience and changing concepts. Where are we in 2018?
Meeting of the EAU Section of Urolithiasis (EULIS)

Aims and objectives of this session
Technological advancements, coupled with increasing experience have considerably changed our treatment concepts in the contemporary management of stone disease both in adults and children. Currently a very well-planned treatment and follow-up strategy including well-conducted “imaging studies” and “metabolic evaluation” are being considered as the crucial steps for a successful and complication-free outcomes. Moreover, a close follow-up for all cases (if possible on an individual basis particularly in “risk group” patients) is certainly required to limit future stone recurrences and related complications which may well affect the life quality of stone forming cases. Thus, in this EULIS session, in addition to a close look at the recent developments in minimally invasive stone management particularly in “complex cases”; we will focus on the importance of “experience with tips and tricks” from the experts to increase stone-free rates and limit well known complications. Assessment of stone free status with appropriate timing and tools along with the essentials of follow-up period will be discussed in detail to outline some ongoing debates on these issues.

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

10:20 - 11:00
Metabolic evaluation and medical management of urinary stones
Moderators: G. Gambaro, Rome (IT)
            J.P. Haymann, Paris (FR)
            R. Siener, Bonn (DE)

10:20 - 10:30
Metabolic evaluation of a stone former: What's new? Not a “real benefit” in the era of minimal invasive surgery
G. Wendt-Nordahl, Sindelfingen (DE)

10:30 - 10:40
Metabolic evaluation of a stone former: What's new? Limited or extensive, it is a “must” in stone patients
R.J. Unwin, London (GB)

10:40 - 10:50
Medical Expulsive Therapy (MET) in ureteral stones: Still effective and attractive?
No thank you, a waste of time!
E. Montanari, Milan (IT)

10:50 - 11:00
Medical Expulsive Therapy (MET) in ureteral stones: Still effective and attractive?
Yes, please go further!
C.C. Seitz, Vienna (AT)

11:00 - 11:50
Video Session 1: Management of complex renal stones with Percutaneous Nephrolithotomy (PNL) – How I do it?
### Scientific Programme - EAU18 Copenhagen

**Moderators:**
- K. Sarica, Istanbul (TR)
- J. Galan Llopis, Alicante (ES)
- A. Hoznek, Creteil (FR)

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<tr>
<th>Time</th>
<th>Session Description</th>
<th>Speaker(s)</th>
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<tr>
<td>11:00 - 11:10</td>
<td><strong>Video presentation</strong> Large and complex stone horseshoe kidney (Standard PNL)</td>
<td>P. Kallidonis, Patras (GR)</td>
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<tr>
<td>11:10 - 11:20</td>
<td><strong>Video presentation</strong> Upper calyceal stone in supine position</td>
<td>M. Cepeda Delgado, Valladolid (ES)</td>
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<tr>
<td>11:20 - 11:30</td>
<td><strong>Video presentation</strong> Large and complex kidney stones (ECIRS)</td>
<td>C.M. Scoffone, Turin (IT)</td>
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<tr>
<td>11:30 - 11:40</td>
<td><strong>Video presentation</strong> Pediatric large renal pelvic stones (SMP)</td>
<td>G. Zeng, Guangzhou (CN)</td>
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<td>11:40 - 11:50</td>
<td><strong>Discussion</strong></td>
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<td>11:50 - 12:00</td>
<td><strong>Evaluation and follow-up of a stone former</strong></td>
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<td>11:50 - 11:50</td>
<td><strong>Moderators:</strong> D.J. Kok, Rotterdam (NL)</td>
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<td>A. Trinchieri, Lecco (IT)</td>
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<td>L. Villa, Milan (IT)</td>
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<td>11:50 - 12:00</td>
<td><strong>Urolithiasis training curriculum development and validation - EULIS collaborative project</strong></td>
<td>K. Ahmed, London (GB)</td>
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<td>12:00 - 12:10</td>
<td><strong>Patient-related outcome measures in stone disease</strong></td>
<td>F. Sanguedolce, Barcelona (ES)</td>
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<td>12:10 - 12:20</td>
<td><strong>Follow-up in stone patients: Patient adherence, cost-effectiveness, role of education</strong></td>
<td>E. Yuruk, Istanbul (TR)</td>
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<td>12:20 - 12:30</td>
<td><strong>Discussion</strong></td>
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<td>12:30 - 13:10</td>
<td><strong>Complications can occur but how can I lower the risk? Tips and tricks from the experts</strong></td>
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<td>12:30 - 12:30</td>
<td><strong>Moderators:</strong> A. Papatsoris, Athens (GR)</td>
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<td>A. Szendröi, Budapest (HU)</td>
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<td>C. Türk, Vienna (AT)</td>
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<td>12:30 - 12:40</td>
<td><strong>Infectious complications and Flexible Ureterorenoscopy (FURS)</strong></td>
<td>K. Sarica, Istanbul (TR)</td>
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<tr>
<td>12:40 - 12:50</td>
<td><strong>Bleeding and Percutaneous Nephrolithotomy (PNL)</strong></td>
<td>T. Knoll, Sindelfingen (DE)</td>
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<td>12:50 - 13:00</td>
<td><strong>Residual fragments and ongoing headache after Flexible Ureterorenoscopy (FURS)</strong></td>
<td>A. Miernik, Freiburg (DE)</td>
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<td>13:00 - 13:10</td>
<td><strong>Discussion</strong></td>
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<tr>
<td>13:10 - 13:20</td>
<td>Video presentation Pediatric lower calyceal stone with re-positioning</td>
<td>M. Straub, Munich (DE)</td>
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<td>13:20 - 13:30</td>
<td>Video presentation Calyceal diverticulum stone with infundibular stenosis</td>
<td>P.A. Geavlete, Bucharest (RO)</td>
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<td>13:30 - 13:40</td>
<td>Video presentation Large renal pelvic stone (&gt; 25 mm) - Robotic Flexible Ureterorenoscopy (FURS)</td>
<td>A. Patel, London (GB)</td>
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<td>13:40 - 13:50</td>
<td>Discussion</td>
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<td>13:50 - 14:00</td>
<td>New techniques in renal puncture during Percutaneous Nephrolithotomy (PNL). Did they make it safer and easier?</td>
<td>A. Skolarikos, Athens (GR)</td>
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<td>14:00 - 14:10</td>
<td>Disposable or re-usable scope: Which one and why?</td>
<td>S. Lahme, Pforzheim (DE)</td>
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<td>14:10 - 14:20</td>
<td>Settings and technique in using laser for stones: What are the new concepts?</td>
<td>S. Doizi, Paris (FR)</td>
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<tr>
<td>14:20 - 14:30</td>
<td>Closing remarks</td>
<td>K. Sarica, Istanbul (TR)</td>
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Aims and objectives of this session
In this session we introduce the European Society of Residents in Urology (ESRU) and the Young Urology Office (YUO). The main aim of this session is to offer talks tailored to residents' educational needs. We present the traditional surgical tips and tricks with all you need to know about certain surgical procedures. Furthermore we examine the role of lymphadenectomy for urological cancers. As a new feature this year, we present the 'Challenging the EAU Guidelines' session where cases will be presented and experts will be challenged in different perspectives. We will finish the day with the great finale of the EAU Guidelines Cup, a competition between the three finalists of the Cup and also the audience. Join us for the opportunity of winning great prizes.

10:00 - 10:15
Welcome and introduction
J.P.M. Sedelaar, Nijmegen (NL)
J.L. Vásquez Mendoza, Herlev (DK)

10:15 - 11:00
EAU session
Moderators: A. Cocci, Calenzano (IT)
M. Ilgi, Istanbul (TR)

10:15 - 10:25
What can the EAU do for you?
J. Rassweiler, Heilbronn (DE)

10:25 - 10:35
EAU Guidelines Office
J. N'Dow, Aberdeen (GB)

10:35 - 10:45
European School of Urology
J. Palou, Barcelona (ES)

10:45 - 10:55
Young Academic Urologists
M.S. Silay, Istanbul (TR)

10:55 - 11:00
Questions and answers

11:00 - 11:45
European Urology Scholarship Programme (EUSP)
Moderators: J. Gómez Rivas, Madrid (ES)
V.G. Mirone, Naples (IT)

11:00 - 11:10
EUSP Programme; does it deserve your attention?
M.J. Ribal, Barcelona (ES)
### Scientific Programme - EAU18 Copenhagen

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| 11:10 - 11:20 | EUSP scholars’ achievements  
J.A. Schalken, Nijmegen (NL)                                            |
| 11:20 - 11:30 | Emerging EUSP partnerships  
V.G. Mirone, Naples (IT)                                                    |
| 11:30 - 11:40 | Announcing the Best Scholar Award Winner  
G. Patruno, Rome (IT)                                                      |
| 11:40 - 11:45 | Questions and answers                                                    |
| 11:45 - 12:45 | The role of lymphadenectomy in urological cancers  
*Moderators:*  
A. Cebulla, Ulm (DE)  
U. Bele, Maribor (SI)                                                    |
| 11:45 - 12:00 | Penile cancer  
A. Muneer, London (GB)                                                   |
| 12:00 - 12:15 | Testicular cancer  
To be confirmed                                                            |
| 12:15 - 12:30 | Prostate cancer  
A. Heidenreich, Cologne (DE)                                               |
| 12:30 - 12:45 | Urothelial cancer  
J. Bjerggaard Jensen, Aarhus (DK)                                           |
| 12:45 - 13:15 | Round Table Discussion: Challenging the EAU Guidelines: Intermediate-risk prostate cancer |
| 12:45 - 12:54 | Case presenter on: Intermediate-risk prostate cancer  
P.B. Ostergren, Herlev (DK)                                                |
| 12:54 - 13:01 | Discussant on: Focal therapy  
R. Sanchez-Salas, Paris (FR)                                                |
| 13:01 - 13:08 | Discussant on: Active surveillance  
L. Klotz, Toronto (CA)                                                     |
| 13:08 - 13:15 | Discussant on: Defending radical prostatectomy and RT  
P. Sooriakumaran, London (GB)                                              |
| 13:15 - 13:45 | Round Table Discussion: Challenging the EAU Guidelines: Large kidney stones |
| 13:15 - 13:24 | Case presenter on: Large kidney stones  
T. Ucar, Istanbul (TR)                                                      |
| 13:24 - 13:31 | Discussant on: RIRS  
R. Cansino, Madrid (ES)                                                     |
| 13:31 - 13:38 | Discussant on: PCNL  
G. Giusti, Milan (IT)                                                       |
| 13:38 - 13:45 | Discussant on: Laparoscopy  
R.G. Atis, Istanbul (TR)                                                     |
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<thead>
<tr>
<th>Time</th>
<th>Event</th>
<th>Speaker(s)</th>
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<tbody>
<tr>
<td>13:45 - 14:45</td>
<td>Surgical tips and tricks</td>
<td>D. Duijvesz, Nijmegen (NL)</td>
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<td>A. Gulamhusein, Rotherham (GB)</td>
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<td>13:45 - 14:00</td>
<td>URS</td>
<td>E. Emiliani, Barcelona (ES)</td>
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<td>14:00 - 14:15</td>
<td>HOLEP</td>
<td>F. Gomez Sancha, Madrid (ES)</td>
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<td>14:15 - 14:30</td>
<td>Botox</td>
<td>M. Drake, Bristol (GB)</td>
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<td>14:30 - 14:45</td>
<td>Orchidectomy</td>
<td>C.G.A. Ruf, Koblenz (DE)</td>
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<td>14:45 - 15:30</td>
<td>The future of urology</td>
<td>S. Boret, Leuven (BE)</td>
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<td>J. Olivier, Lille (FR)</td>
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<td>14:45 - 15:00</td>
<td>Augmented reality</td>
<td>J. Gómez Rivas, Madrid (ES)</td>
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<td>15:00 - 15:15</td>
<td>3D printing</td>
<td>Z. Okhunov, Orange (US)</td>
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<td>15:15 - 15:30</td>
<td>Artificial intelligence</td>
<td>D. Veneziano, Reggio Calabria (IT)</td>
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<td>15:30 - 16:30</td>
<td>Guidelines Cup</td>
<td>J.L. Vásquez Mendoza, Herlev (DK)</td>
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<td>M. Waterschoot, Leuven (BE)</td>
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<td>Panel: T. Knoll, Sindelfingen (DE)</td>
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<td>M.J. Ribal, Barcelona (ES)</td>
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<td>16:30 - 16:45</td>
<td>Prizes and awards</td>
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<td>16:45 - 17:00</td>
<td>Group photo</td>
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Management of complex cases in male and female functional urology
Meeting of the EAU Section of Female and Functional Urology (ESFFU)

Saturday 17 March
10:15 - 14:00

Location: Red Area, Room 2 (Level 0)
Chair: F. Cruz, Porto (PT)

Aims and objectives of this session
Treatment of LUTS represents a fundamental part of urological activity. Pharmacological treatment requires expertise in handling the multiple drugs and neuromodulation at our disposable. The success of our strategy should involve the patient to delineate realistic goals. For refractory cases surgical options might be necessary but a judicious choice of the procedures and the moment of their application is crucial to optimise outcomes.

10:15 - 10:20
Welcome and introduction and call for new affiliates and associates
F. Cruz, Porto (PT)

10:20 - 11:35
Session I: Idiopathic urgency urinary incontinence
Moderators: D.M. Castro Díaz, Santa Cruz de Tenerife (ES)
J.P.F.A. Heesakkers, Nijmegen (NL)

10:20 - 10:35
Clinical case discussion
D.M. Castro Díaz, Santa Cruz de Tenerife (ES)
J.P.F.A. Heesakkers, Nijmegen (NL)

10:35 - 10:50
EAU Guidelines do not tell me which is the best oral pharmacotherapy
J.L.H.R. Bosch, Utrecht (NL)

10:50 - 11:05
Refractory Overactive Bladder (OAB) patients: Oral medication adjustment, botox or sacral neuromodulation?
M. Drake, Bristol (GB)

11:05 - 11:20
Are the cognitive effects of antimuscarinic drugs really an issue for long-term treatment of Urge Urinary Incontinence (UUI)?
A. Wagg, Edmonton (CA)

11:20 - 11:35
Which outcome measures should we use to define success?
J-N.L. Cornu, Rouen (FR)

11:35 - 12:40
Session II: ESFFU meets with other Societies
Moderators: F. Cruz, Porto (PT)
U. Mehnert, Zurich (CH)

11:35 - 11:55
The Society of Urodynamics, Female Pelvic Medicine and Urogenital Reconstruction (SUFU) lecture: Bladder augmentation in Spinal Cord Injury (SCI) patients: When is it too soon and when is it too late?
G. Lemack, Dallas (US)

11:55 - 12:05
Prize winner 6th international neuro-urology meeting
<table>
<thead>
<tr>
<th>Time</th>
<th>Event</th>
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<tbody>
<tr>
<td>12:05 - 12:25</td>
<td><strong>International Continence Society (ICS) lecture:</strong> Management of vesico vaginal fistulae</td>
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<td>S.M Mourad, New Cairo (EG)</td>
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<td>12:25 - 12:40</td>
<td><strong>EAU/European Urogynaecological Association (EUGA) and their position concerning the use of mesh for treatment of female SUI</strong></td>
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<td>F.C. Burkhard, Bern (CH)</td>
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<td>12:40 - 13:55</td>
<td><strong>Session III: Male Lower Urinary Tract Symptoms (LUTS) treatment</strong></td>
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<td><em>Moderators:</em> R. Bauer, Munich (DE)</td>
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<td>N. Thiruchelvam, Cambridge (GB)</td>
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<td>12:40 - 12:55</td>
<td><strong>How many drugs might my BPH/BPE patients need to control LUTS? One, two, three?</strong></td>
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<td>F. Van Der Aa, Leuven (BE)</td>
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<tr>
<td>12:55 - 13:10</td>
<td><strong>Is Transurethral Resection of the Prostate (TURP) safe in frail elderly men, or do we need minimally invasive treatments?</strong></td>
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<td>A. Tubaro, Rome (IT)</td>
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<tr>
<td>13:10 - 13:25</td>
<td><strong>My patient had a Transurethral Resection of the Prostate (TURP) but maintains very high PVRs.</strong></td>
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<td>P. Radziszewski, Warsaw (PL)</td>
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<td>13:25 - 13:40</td>
<td><strong>Treatment of Post-Prostatectomy Incontinence (PPI) with Artificial Urinary Sphincter (AUS). Update from ESFFU/EAURF registry on male incontinence surgery</strong></td>
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<td></td>
<td>R. Hamid, London (GB)</td>
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<td>13:40 - 13:55</td>
<td><strong>Treatment of Post-Prostatectomy Incontinence (PPI) with the adjustable AToms: The Iberian experience</strong></td>
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<td>J. Angulo Cuesta, Madrid (ES)</td>
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<td>13:55 - 14:00</td>
<td><strong>Closing remarks</strong></td>
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<td>F. Cruz, Porto (PT)</td>
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### When Basic Science meets Clinical Practice

Joint meeting of the EAU Section of Andrological Urology (ESAU) and the EAU Section of Infections in Urology (ESIU)

**Location:** Red Area, Room 3 (Level 0)

**Chairs:**
- N. Sofikitis, Ioannina (GR)
- F.M.E. Wagenlehner, Giessen (DE)

**Aims and objectives of this session**

There is a significant overlap between infections and andrological diseases, which will be addressed in this ESAU/ESIU joint meeting.

Successful treatment of infections is more and more hampered by the increasing rate of antimicrobial resistance, which nowadays is one of the major problems in patient care. Various strategies to cope with the increasing problem of antibiotic resistance are discussed during this session, amongst which “antibiotic stewardship – ABS” is one of the most important. To address this, a course on ABS, encompassing a multiple-choice exam will be held after this meeting. Upon successful completion of the ABS course and MC questions, a certificate can be downloaded at the EAU website.

Male infertility and erectile dysfunction represent not only private problems but also issues of great social importance. Their frequencies increase nowadays. The role of endocrine disrupting chemicals in the increasing percentage of infertile males today will be extensively discussed in this ESAU/ESIU joint meeting, together with male endocrinological topics, and scientific and clinical efforts for the development of “adjunct tools” to identify preoperatively the subpopulation of non-obstructed azoospermic men with testicular foci of advanced spermatogenesis up to the spermatozoon stage. The respect that should be demonstrated by the urological surgeon for the “neurovascular bundle” of the penis during penile surgical procedures will be emphasized. Furthermore recent news from andrology and guideline updates from urogenital infections will be presented.

<table>
<thead>
<tr>
<th>Time</th>
<th>Session Title</th>
<th>Details</th>
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</table>
| 10:00 - 10:05 | Welcome and introduction                          | N. Sofikitis, Ioannina (GR)  
F.M.E. Wagenlehner, Giessen (DE)                                         |
| 10:05 - 10:40 | Recent developments in urinary tract infections   | **Moderators:** M. Dinkelman-Smit, Rotterdam (NL)  
P. Tenke, Budapest (HU)                                                      |
| 10:05 - 10:25 | Novel antibiotics in the treatment of urinary tract infections | K. Naber, Straubing (DE)                                                   |
| 10:25 - 10:40 | Point of care susceptibility testing in urinary tract infections | V. Mouraviev, Davenport (US)                                               |
| 10:40 - 11:30 | Endocrinology of the male and infertility         | **Moderators:** R. Bartoletti, Pisa (IT)  
Z. Kopa, Budapest (HU)                                                      |
10:40 - 10:50  |  Comorbidities and testicular dysfunction  
F. Fusco, Napoli (IT)

10:50 - 11:00  |  Fertility preservation in testicular cancer  
S.S. Minhas, London (GB)

11:00 - 11:10  |  Risk factors for the development of hypogonadism in the ageing male  
A. Giwercman, Malmö (SE)

11:10 - 11:20  |  The role of colour-coded duplex sonography as an adjunct tool to predict the outcome of TESE in non-obstructed azoospermic men  
T. Diemer, Giessen (DE)

11:20 - 11:30  |  Discussion

11:30 - 11:40  |  Neurovascular bundle damage in penile or prostatic surgery: Consequences in sexual function  
Moderators: H.M. Çek, Edirne (TR)  
E. Ruiz-Castañé, Barcelona (ES)

11:30 - 11:40  |  Orgasmic dysfunction post radical prostatectomy  
A. Salonia, Milan (IT)

11:40 - 11:50  |  Parameters predicting the erectile function post-radical prostatectomy  
C. Bettocchi, Bari (IT)

11:50 - 12:00  |  Therapeutic management of penile fracture  
D.J. Ralph, London (GB)

12:00 - 12:10  |  The neurovascular bundle in penile surgery  
A. Kadioglu, Istanbul (TR)

12:10 - 12:20  |  Discussion

12:20 - 13:10  |  Antimicrobial stewardship course (ABS)  From cystitis to urosepsis: What is the best way to deal with antimicrobial resistance (ABS certificates)?  
Moderators: T.E. Bjerklund Johansen, Oslo (NO)  
P. Verze, Naples (IT)

12:20 - 12:30  |  Non-antibiotic treatment and prevention in uncomplicated cystitis  
B. Wullt, Lund (SE)

12:30 - 12:40  |  Collateral effects of antibiotic treatment and how to minimise them (C. difficile and multiresistant pathogens)  
J. Medina-Polo, Madrid (ES)

12:40 - 12:50  |  Epidemiology of multiresistant pathogens and consequences for clinical management in complicated Urinary tract infections (UTI) and urosepsis  
T. Cai, Trento (IT)

12:50 - 13:00  |  Which antibiotics in what indication: The role of mathematical modeling  
Z. Tandoğdu, Newcastle Upon Tyne (GB)
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<tr>
<th>Time</th>
<th>Session</th>
<th>Speaker(s)</th>
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<tr>
<td>13:00 - 13:10</td>
<td>Difficult-to-treat cases and ABS in the clinics</td>
<td>D. Batura, London (GB)</td>
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<tr>
<td>13:10 - 13:25</td>
<td>Recent news from andrology (snapshots)</td>
<td>S. Kliesch, Münster (DE)</td>
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<td>T. Perepanova, Moscow (RU)</td>
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<td>G. Bonkat, Basel (CH)</td>
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<td>13:25 - 13:35</td>
<td>Diagnosis and treatment of urethritis</td>
<td>F. Bruyere, Tours (FR)</td>
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<td>13:45 - 13:55</td>
<td>Asymptomatic bacteriuria: To treat or not to treat</td>
<td>B. Köves, Budapest (HU)</td>
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<tr>
<td>13:55 - 14:00</td>
<td>Closing remarks</td>
<td>N. Sofikitis, Ioannina (GR)</td>
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<td>F.M.E. Wagenlehner, Giessen (DE)</td>
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Updates in genito-urinary reconstruction
Meeting of the EAU Section of Genito-Urinary Reconstructive Surgeons (ESGURS)

Saturday 17 March
10:15 - 15:30

Location: Blue Area, Room 1 (Level 0)
Chair: R. Djinovic, Belgrade (RS)

Aims and objectives of this session
As per previous years, ESGURS Section Meeting has aim do present the developments of this complex and demanding field of genito-urinary reconstructive surgery. Top experts will show their experience in surgical techniques, but also in the pre and postoperative case, which can be equally important in achieving good result. Although urological reconstruction is very wide, we tried to cover majority of topics, with to goal to be interesting and useful both for beginners and experts.

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

10:20 - 10:30
State-of-the-art lecture Third-party assessment of data in retrospective clinical series: Review of the literature and a recent study from Lund
K.G.W. Månsson, Malmö (SE)

10:30 - 11:13
Urethral reconstruction – Part I
Moderators: M. Fisch, Hamburg (DE)
A. Mundy, London (GB)

10:30 - 10:43
Urethral reconstruction using a tissue-engineered oral mucosa graft in 98 patients: A lesson learned
G. Barbagli, Arezzo (IT)

10:43 - 10:53
Management of iatrogenic urethral strictures
M. Fisch, Hamburg (DE)

10:53 - 11:03
Urethral reconstructive techniques in Balanitis Xerotica Obliterans (BXO) patients
E. Lledó García, Madrid (ES)

11:03 - 11:13
How to handle re-stricture after 2 phase mesh graft urethroplasty
J. Sairanen, Helsinki (FI)

11:13 - 11:53
Urethral reconstruction – Part II
Moderators: D.E. Andrich, London (GB)
L. Martínez Piñeiro, Madrid (ES)

11:13 - 11:23
Urethral strictures: Etiology in different countries, nomenclature, follow-up protocols, criteria of success/failure
A. Zhivov, Moscow (RU)

11:23 - 11:33
Non-transecting techniques for narrow bulbar strictures
E. Palminteri, Arezzo (IT)
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<thead>
<tr>
<th>Time</th>
<th>Session</th>
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<tbody>
<tr>
<td>11:33 - 11:43</td>
<td>Cancer survivorship after the treatment of pelvic malignancy</td>
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<td>A. Mundy, London (GB)</td>
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<td>11:43 - 11:53</td>
<td>Endoscopic treatment of urethral strictures</td>
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<td>R. Leonardi, Catania (IT)</td>
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<td>11:53 - 12:18</td>
<td>Penile implant surgery</td>
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<td>Moderators: C. Bettocchi, Bari (IT)</td>
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<td>N. Tomada, Porto (PT)</td>
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<td>11:53 - 12:00</td>
<td>My journey in prosthetic urology: How to become an expert</td>
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<td>I. Moncada, Madrid (ES)</td>
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<td>12:00 - 12:10</td>
<td>Management of cylinder complications</td>
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<td>A. Shamsodini Takhtei, Doha (QA)</td>
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<td>12:10 - 12:18</td>
<td>How to build up a successful unit in prosthetic urology</td>
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<td>D.J. Ralph, London (GB)</td>
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<td>12:18 - 12:58</td>
<td>Peyronie's surgery – Tips and tricks</td>
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<td>Moderators: I. Moncada, Madrid (ES)</td>
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<td>A. Shamsodini Takhtei, Doha (QA)</td>
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<td>12:18 - 12:25</td>
<td>Decision-making in Peyronie's: Modeling vs. incision vs. grafting</td>
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<td>O.R. Sedigh, Torino (IT)</td>
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<td>12:25 - 12:33</td>
<td>Simple techniques of Peyronie's deformities correction</td>
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<td>J. Romero Otero, Madrid (ES)</td>
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<td>12:33 - 12:40</td>
<td>Albugineal grafting with non-absorbable vs. biologic materials</td>
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<td>J.I. Martínez Salamanca, Madrid (ES)</td>
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<td>12:40 - 12:48</td>
<td>Inflatable penile prosthesis plus grafting</td>
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<td>S. Sansalone, Rome (IT)</td>
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<td>12:48 - 12:58</td>
<td>Latest modifications of the sliding procedure to provide length and girth restoration</td>
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<td>P. Egydio, São Paulo (BR)</td>
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<td>12:58 - 13:33</td>
<td>Transgender surgery</td>
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<td>Moderators: G. Garaffa, London (GB)</td>
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<td>M.A.B. Fahmy, Cairo (EG)</td>
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<td>12:58 - 13:05</td>
<td>Gender assignment and modern aspects of education in gender confirmation surgery</td>
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<td>K-D. Sievert, Rostock (DE)</td>
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<td>13:05 - 13:13</td>
<td>Surgical management of neoclitoris (M-F surgery): Functional and aesthetic outcome</td>
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<td>C. Trombetta, Trieste (IT)</td>
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<td>E. Kocjancic, Chicago (US)</td>
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<td>13:23 - 13:33</td>
<td>Pros and cons of vaginectomy in F-M patients: How to do it</td>
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<td>N. Lumen, Ghent (BE)</td>
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<tr>
<td>13:33 - 14:08</td>
<td>Genito-urinary injuries (iatrogenic/trauma)</td>
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<td>Moderators: P. Anderson, Dudley (GB)</td>
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<td>R. Dahlem, Hamburg (DE)</td>
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<td>13:33 - 13:43</td>
<td>Worst cases in penile surgery</td>
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<td>C. Bettocchi, Bari (IT)</td>
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<td>T.J. Greenwell, London (GB)</td>
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<td>13:53 - 14:00</td>
<td>Treatment of recto-vesical fistula after radical prostatectomy</td>
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<td>J. Romero Otero, Madrid (ES)</td>
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<td>14:00 - 14:08</td>
<td>Total phalloplasty in cancer/trauma</td>
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<td>A.N. Christopher, London (GB)</td>
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<td>14:08 - 14:38</td>
<td>Penile skin reconstruction</td>
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<td>Moderators: D.J. Ralph, London (GB)</td>
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<td>S. Sansalone, Rome (IT)</td>
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<td>14:08 - 14:15</td>
<td>Principles of genital skin reconstruction</td>
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<td>D.J. Ralph, London (GB)</td>
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<td>14:15 - 14:23</td>
<td>Glans reconstruction</td>
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<td>A. Muneer, London (GB)</td>
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<td>14:23 - 14:30</td>
<td>Reconstruction of penile shaft skin</td>
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<td>P. Anderson, Dudley (GB)</td>
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<td>14:30 - 14:38</td>
<td>Scrotum reconstruction</td>
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<td>E. Ruiz-Castañé, Barcelona (ES)</td>
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<td>14:38 - 15:08</td>
<td>Incontinence surgery / hypospadias</td>
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<td>Moderators: E. Kocjancic, Chicago (US)</td>
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<td>T.S. Pottek, Berlin (DE)</td>
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<td>14:38 - 14:45</td>
<td>How to deal with urethral atrophy/downsize/relocate in patients with Artificial Urinary Sphincter (AUS)</td>
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<td>R. Dahlem, Hamburg (DE)</td>
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<td>14:45 - 14:53</td>
<td>The case for trans-corporeal placement / cuff tandem</td>
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<td>R. Olianas, Luneburg (DE)</td>
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<td>14:53 - 15:01</td>
<td>Hypospadias in adults</td>
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<td>R. Djinovic, Belgrade (RS)</td>
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<td>15:01 - 15:08</td>
<td>Hypospadias: Long-term outcomes in congenital penile reconstruction</td>
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<td>D.N. Wood, London (GB)</td>
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<td>15:08 - 15:26</td>
<td>Upper tract reconstruction</td>
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<td>Moderators: M.E. Alvarez Maestro, Madrid (ES)</td>
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<td>S. Deger, Ostfildern (DE)</td>
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<td>Time</td>
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<tr>
<td>15:08 - 15:18</td>
<td><strong>Conduit vs. neobladder for bladder cancer surgery – Pros and cons</strong></td>
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<tr>
<td>15:18 - 15:26</td>
<td><strong>Mitroffanof stoma for the most severe cases - How to do it</strong></td>
</tr>
<tr>
<td>15:26 - 15:30</td>
<td><strong>Summary and closing remarks</strong></td>
</tr>
</tbody>
</table>
All about prostate biopsy in an office and outpatient setting
Meeting of the EAU Section of Urologists in Office (ESUO)

Location: Blue Area, Room 2 (Level 0)
Chairs: H. Brenneis, Pirmasens (DE)
        H. Haas, Heppenheim (DE)
        S.M. Haensel, Rotterdam (NL)
        R. Schneider, Faulensee (CH)

Aims and objectives of this session
Prostate biopsy is a core procedure for office urologists. During this session all relevant aspects of prostate biopsy in an office setting will be presented by recognised specialists: indication, the procedure itself, the management of complications, and modern imaging. The session is chaired by office urologists, thus ensuring its focus on the outpatient situation. Discussion of crucial cases with the audience will be an important task of this interactive meeting.

10:15 - 10:25
Welcome and introduction
H. Haas, Heppenheim (DE)
R. Schneider, Faulensee (CH)

10:25 - 10:50
Indications
M.S. Michel, Mannheim (DE)

10:50 - 11:10
Prostate cancer molecular and genetic biomarkers in primary and secondary prostate biopsy setting
S. Czarniecki, Warsaw (PL)

11:10 - 11:40
Patient preparation
M.S. Michel, Mannheim (DE)

11:40 - 12:05
Biopsy procedure
M.S. Michel, Mannheim (DE)

12:05 - 12:15
Video: Prostate biopsy in the office
H. Brenneis, Pirmasens (DE)

12:15 - 12:35
Management of complications
S.M. Haensel, Rotterdam (NL)

12:35 - 13:10
TRUS-guided prostate biopsy
J. Walz, Marseille (FR)

13:10 - 13:45
MRI-guided prostate biopsy
J. Walz, Marseille (FR)

13:45 - 13:55
A fusion biopsy network in Switzerland: First experiences
R. Schneider, Faulensee (CH)
13:55 - 14:00  Closing remarks
               H. Haas, Heppenheim (DE)
### Complications in treatment of urological cancers

**Joint meeting of the EAU Section of Oncological Urology (ESOU), the EAU Robotic Urology Section (ERUS), the EAU Section of Uro-Technology (ESUT) and with the ESSO, ESTRO, EUOG, EORTC GUCG and SUO**

**Saturday 17 March**  
**10:15 - 15:30**

**Location:** Blue Area, Room 3 (Level 0)

**Chairs:**  
M. Brausi, Modena (IT)  
E. Liatsikos, Patras (GR)  
A. Mottrie, Aalst (BE)

**Aims and objectives of this session**  
The aim is to share possible complications in different treatments in the field of urological oncology. These complications will be discussed, as well as tips and tricks on how to prevent and treat them. Complication management is extremely important.

<table>
<thead>
<tr>
<th>Time</th>
<th>Session</th>
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</table>
| 10:15 - 10:20 | **Welcome and introduction**  
M. Brausi, Modena (IT)  
E. Liatsikos, Patras (GR)  
A. Mottrie, Aalst (BE) |
| 10:20 - 10:45 | **The European Society of Surgical Oncology (ESSO)**  
Complications after pelvic surgery from the perspective of a colorectal surgeon  
H. Rutten, Eindhoven (NL)  
Discussion |
| 10:45 - 11:10 | **The European Organisation for Research and Treatment of Cancer Genito-Urinary Cancer Group (EORTC GUCG)**  
Complications of hormonal treatment in prostate cancer  
S. Gillessen Sommer, St. Gallen (CH)  
Discussion |
| 11:10 - 11:35 | **The European Society for Radiotherapy & Oncology (ESTRO)**  
Immediate and late complications of radiotherapy for prostate cancer  
A. Bossi, Villejuif (FR)  
Discussion |
| 11:35 - 12:00 | **The European Uro-Oncology Group (EUOG)**  
CRPC: New drugs and sequencing  
S. Osanto, Leiden (NL) |
<table>
<thead>
<tr>
<th>Time</th>
<th>Session</th>
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<tbody>
<tr>
<td>11:55 - 12:00</td>
<td>Discussion</td>
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<tr>
<td>12:00 - 12:00</td>
<td>Critical evaluation of surgical complications after uro-onco surgery (ESOU, ERUS and ESUT)</td>
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<tr>
<td>12:00 - 12:20</td>
<td>The history of robotic surgery and where are we going? M. Menon, Detroit (US)</td>
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<td>12:20 - 13:10</td>
<td>Prostate cancer: Immediate and late complications</td>
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<td>12:20 - 12:35</td>
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<td>S. Joniau, Leuven (BE)</td>
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<tr>
<td>12:35 - 12:50</td>
<td>Robotic (SUO Lecture)</td>
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<td>C.P. Evans, Sacramento (US)</td>
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<td>12:50 - 13:05</td>
<td>Laparoscopic</td>
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<td>G. Janetschek, Salzburg (AT)</td>
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<td>13:05 - 13:10</td>
<td>Discussion</td>
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<tr>
<td>13:10 - 14:15</td>
<td>Bladder cancer: Immediate and late complications</td>
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<td>13:10 - 13:25</td>
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<td>M. Brausi, Modena (IT)</td>
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<td>13:25 - 13:40</td>
<td>Open RC</td>
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<td>G. Gakis, Würzburg (DE)</td>
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<td>13:40 - 13:55</td>
<td>Laparoscopic RC</td>
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<td>G. Pini, Milan (IT)</td>
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<td>13:55 - 14:10</td>
<td>Robotic RC</td>
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<td>J. Palou, Barcelona (ES)</td>
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<td>14:10 - 14:15</td>
<td>Discussion</td>
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<tr>
<td>14:15 - 15:05</td>
<td>Renal cancer: Partial nephrectomy, immediate and late complications</td>
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<td>14:15 - 14:30</td>
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<td>A. Volpe, Novara (IT)</td>
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<td>14:30 - 14:45</td>
<td>Robotic</td>
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<td>P. Dasgupta, London (GB)</td>
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<td>14:45 - 15:00</td>
<td>Laparoscopic</td>
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<td>A. Skolarikos, Athens (GR)</td>
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<td>15:00 - 15:05</td>
<td>Discussion</td>
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<td>Time</td>
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<tr>
<td>15:05 - 15:20</td>
<td>How to avoid complications in mini-invasive surgery</td>
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<td>15:20 - 15:30</td>
<td>Closing remarks</td>
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Kidney transplantation and reconstructive surgery
Joint meeting of the EAU Section of Transplantation Urology (ESTU) and the EAU Section of Genito-Urinary Reconstructive Surgeons (ESGURS)

Location: Blue Area, Room 4 (Level 0)

Chairs: R. Djinovic, Belgrade (RS)
        E. Lledó García, Madrid (ES)

Aims and objectives of this session
Kidney transplantation and reconstructive surgery are completely dependent on each other. No good kidney transplant may be completed without an accurate reconstructive surgery in the graft, surgical treatment of problems of the either upper or lower urinary tract, and reconstruction after complications. Also, as long as candidates for kidney transplant are getting older, pelvic floor problems or oncological diseases are the same as the general population. Finally, paediatric ESRD patients with neurogenic bladders deserve accurate reconstructive therapy of the LUT in many cases. In this session, we try to stress key points and tips & tricks of the reconstructive surgical options applied to the problems of kidney transplant patients.

10:00 - 10:05
Welcome and introduction

10:05 - 10:45
Paediatric renal transplant and reconstructive surgery of the lower urinary tract
  Moderator: G. Karam, Nantes (FR)

  10:05 - 10:25
  Renal transplant in children with augmented bladders: Long-term results
  P. Lopez Pereira, Madrid (ES)

  10:25 - 10:45
  Management of lower urinary tract dysfunction in ESRD in children
  L. McCarthy, Tonbridge (GB)

10:45 - 11:05
Pelvic organ prolapse reconstructive surgery in renal transplant recipients
  Moderator: V. Gomez Dos Santos, Madrid (ES)

10:45 - 11:05
F.J. González Garcia, Madrid (ES)

11:05 - 11:35
Kidney transplant and vascular anomalies
  Moderator: M. Wirth, Dresden (DE)

11:05 - 11:20
Different techniques of vessel reconstruction during kidney transplantation bench
  M. Musquera Felip, Barcelona (ES)

11:20 - 11:35
Kidney transplant in receptors with vascular problems
  J.D.J.M. Branchereau, Nantes (FR)

11:35 - 12:05
Wound-healing complications in kidney transplant recipients receiving everolimus
  Moderator: J. Mayor De Castro, Madrid (ES)

11:35 - 12:05
K. Budde, Berlin (DE)
### Scientific Programme - EAU18 Copenhagen

<table>
<thead>
<tr>
<th>Time</th>
<th>Session</th>
<th>Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>12:05 - 12:15</td>
<td><strong>Presentation of results: ESTU Research Grant 2017</strong></td>
<td><strong>Moderator:</strong> F.J. Burgos Revilla, Madrid (ES)</td>
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<td><strong>Evaluation of the delayed renal function after cardiac death donor using hypothermic machine perfusion compared with cold storage: Looking for a precise diagnosis</strong></td>
<td><strong>B.R. Etcheverry Giadrosich, L'Hospitalet de Llobregat (ES)</strong></td>
</tr>
</tbody>
</table>
| 12:15 - 12:25 | **ESTU Research Grant 2018**                                                                      | **Moderators:** V. Gomez Dos Santos, Madrid (ES)  
|              |                                                                                                   | E. Lledó García, Madrid (ES)                                                                     |
|              |                                                                                                   | **-**                                                                                                 |
|              |                                                                                                   | **F. Regis, Italy (IT)**                                                                             |
| 12:25 - 12:35 | **Rene Küss Award 2018**                                                                           | **Moderators:** E. Lledó García, Madrid (ES)  
|              |                                                                                                   | To be confirmed                                                                                      |
| 12:25 - 12:35 | **The European experience on robot-assisted kidney transplantation: 2 years after the beginning** | **K. Decaestecker, Ghent (BE)**                                                                    |
| 12:35 - 12:55 | **State-of-the-art lecture** Primary dorsal buccal mucosa graft urethroplasty for anterior urethral strictures in patients with lichen sclerosus** | **Moderator:** E. Lledó García, Madrid (ES)                                                         |
| 12:55 - 13:15 | **Methods of renal artery clamping in living donor nephrectomy**                                   | **Moderator:** A.J. Figueiredo, Coimbra (PT)                                                         |
| 13:05 - 13:15 | **Con**                                                                                            | **A. Breda, Barcelona (ES)**                                                                        |
| 13:15 - 13:35 | **Tips and tricks of robotic radical cystectomy in kidney transplant patients**                    | **Moderator:** F. Kleinclauss, Besançon (FR)                                                         |
| 13:15 - 13:35 |                                                                                                   | **I. Moncada, Madrid (ES)**                                                                           |
| 13:35 - 13:45 | **Summary and closing remarks**                                                                    |                                                                                                       |
How tumour heterogeneity influences our practice today and tomorrow

Joint meeting of the EAU Section of Urological Imaging (ESUI), the EAU Section of Uropathology (ESUP) and the EAU Section of Urological Research (ESUR)

Saturday 17 March
10:15 - 14:00

Location: Green Area, Room 15 (Level 0)

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

Aims and objectives of this session

Tumour heterogeneity is still a challenge for all disciplines concerning accurate diagnostics by using imaging and pathology. Molecular heterogeneity is one of the hot fields in urological research. The aim of this session is to provide a critical overview of kidney, bladder and prostate cancer in addressing molecular aspects, if and how imaging modalities might help to better define tumour characteristics and how precise pathology reporting might help in decision making upon therapy.

During the session, the prize giving ceremony for the ESUI vision award 2018 will be held, followed by the awarded study.

10:15 - 10:20
Welcome and introduction
K. Junker, Homburg (DE)
R. Montironi, Ancona (IT)
G. Salomon, Hamburg (DE)

10:20 - 10:40
State-of-the-art lecture  Paradigms of metastatic disease: Clonality, mutations and timing of metastatic development

10:20 - 10:35
S. Turajlic, London (GB)

10:35 - 10:40
Discussion

10:40 - 11:25
Tumour heterogeneity in renal cell cancer

Moderators: C. Jeronimo, Porto (PT)
H. Moch, Zurich (CH)
J. Walz, Marseille (FR)

10:40 - 10:51
Molecular heterogeneity between primary tumours and metastases in renal cell cancer
K. Junker, Homburg (DE)

10:51 - 10:55
Discussion

10:55 - 11:06
Does renal biopsy make sense in view of tumour heterogeneity?
H. Moch, Zurich (CH)

11:06 - 11:10
Discussion
Scientific Programme - EAU18 Copenhagen

11:10 - 11:21

**Precision medicine in renal cell cancer, can we select the treatment?**
A. Volpe, Novara (IT)

11:21 - 11:25

**Discussion**

11:25 - 12:26

**Tumour heterogeneity in bladder cancer**
*Moderators:* Y. Allory, Créteil (FR)
A. Lopez-Beltran, Lisbon (PT)
V. Scattoni, Milan (IT)

11:25 - 11:36

**mpMRI in bladder cancer: Development of VI-RADS ver.1.0**
V. Panebianco, Rome (IT)

11:36 - 11:40

**Discussion**

11:40 - 11:51

**Molecular and histopathological heterogeneity in muscle-invasive bladder cancer**
A. Lopez-Beltran, Lisbon (PT)

11:51 - 11:55

**Discussion**

11:55 - 12:06

**Molecular heterogeneity between primary tumours and metastases in bladder cancer**
L. Dyrskjøt, Aarhus (DK)

12:06 - 12:10

**Discussion**

12:10 - 12:21

**Precision medicine in bladder cancer: How can we precisely select the best systemic treatment?**
G. Niegisch, Düsseldorf (DE)

12:21 - 12:26

**Discussion**
L. Dyrskjøt, Aarhus (DK)
A. Lopez-Beltran, Lisbon (PT)
G. Niegisch, Düsseldorf (DE)
V. Panebianco, Rome (IT)

12:26 - 12:40

**ESUI Vision Award 2018**

12:26 - 12:36

**To be confirmed**
To be confirmed

12:26 - 12:36

**Characteristics of Prostate Cancer Found at Fifth Screening in the European Randomized Study of Screening for Prostate Cancer Rotterdam: Can We Selectively Detect High-grade Prostate Cancer with Upfront Multivariable Risk Stratification and Magnetic Resonance Imaging?**
A. Alberts, Rotterdam (NL)

12:36 - 12:40

**Discussion**
<table>
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<tr>
<th>Time</th>
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<tbody>
<tr>
<td>12:40 - 13:55</td>
<td><strong>Tumour heterogeneity in prostate cancer</strong>&lt;br&gt;<strong>Moderators:</strong> R. Montironi, Ancona (IT) G. Van Der Pluijm, Leiden (NL) G. Salomon, Hamburg (DE)</td>
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<tr>
<td>12:40 - 12:44</td>
<td><strong>Discussion</strong></td>
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<td>12:44 - 12:55</td>
<td><strong>Can we define an index lesion in prostate cancer by imaging?</strong>&lt;br&gt;C. Moore, London (GB)</td>
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<tr>
<td>12:55 - 12:59</td>
<td><strong>Discussion</strong></td>
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<tr>
<td>12:59 - 13:10</td>
<td><strong>Can we define an index lesion in prostate cancer by pathology?</strong>&lt;br&gt;R. Montironi, Ancona (IT)</td>
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<tr>
<td>13:10 - 13:14</td>
<td><strong>Discussion</strong></td>
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<tr>
<td>13:14 - 13:25</td>
<td><strong>The influence of tumour heterogeneity on active surveillance for prostate cancer</strong>&lt;br&gt;M. Stöckle, Homburg (DE)</td>
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<tr>
<td>13:25 - 13:29</td>
<td><strong>Discussion</strong></td>
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<tr>
<td>13:29 - 13:40</td>
<td><strong>Boil, grill, chill, electrocute... Do we need to take heterogeneity into consideration for focal therapy?</strong>&lt;br&gt;H.U. Ahmed, London (GB)</td>
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<tr>
<td>13:40 - 13:44</td>
<td><strong>Discussion</strong></td>
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<tr>
<td>13:44 - 13:55</td>
<td><strong>Molecular and histopathological heterogeneity between primary tumours and metastases in prostate cancer</strong>&lt;br&gt;M.C. Haffner, Baltimore (US)</td>
</tr>
<tr>
<td>13:55 - 14:00</td>
<td><strong>Closing remarks</strong>&lt;br&gt;K. Junker, Homburg (DE) R. Montironi, Ancona (IT) G. Salomon, Hamburg (DE)</td>
</tr>
</tbody>
</table>
Aims and objectives of this session
Hematuria is one of the most common indications for urologic evaluation, and is recognized as a sign of potentially important illness. Therefore, knowledge of the differential diagnosis, principles of evaluation, and strategies for management of hematuria is critical. This course is designed for the practicing urologist, to provide a guidelines-based and case-oriented approach to the evaluation and management of hematuria.

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

Course introduction and background to hematuria
S. Boorjian, Rochester (US)

Review of microscopic hematuria
H. Mostafid, Surrey (GB)

AUA guidelines (and beyond) on microscopic hematuria
S. Boorjian, Rochester (US)

Cases and questions focusing on microhematuria
S. Boorjian, Rochester (US)
H. Mostafid, Surrey (GB)

Evaluation and management of gross hematuria and hemorrhagic cystitis
S. Boorjian, Rochester (US)
H. Mostafid, Surrey (GB)

Prostate/Urethral/Upper urinary tract bleeding
H. Mostafid, Surrey (GB)

Cases and questions focusing on gross hematuria
S. Boorjian, Rochester (US)
H. Mostafid, Surrey (GB)
ESU/ESUT/ESUI Hands-on Training Course in MRI Fusion biopsy
Sponsored by BIOBOT, BKMEDICAL, EIGEN, EXACT IMAGING, HITACHI, KOELIS, MEDCOM, PHILIPS

Saturday 17 March
10:00 - 12:00

Location: Yellow Area, Room 3 (Level 0)
Chair: L. Budäus, Hamburg (DE)
Tutors: H. Cash, Berlin (DE)
A. Borkowetz, Dresden (DE)
A. Rannikko, Helsinki (FI)
C. Kastner, Cambridge (GB)
S. Kruck, Tübingen (DE)
S. Boxler, Bern (CH)
E. Baco, Oslo (NO)

Aims and objectives of this session
MRI is increasingly used in patients undergoing prostate biopsies. Different MRI Ultrasound fusion devices allow integrating the MRI information into the daily clinical workflow.
The course will provide an overview on MRI reading, technical basics and different prostate biopsy approaches. Technical considerations, the transrectal or transperineal approach will be critically reviewed and discussed. During the second half of the course, the participants are able to try out 7 different Fusion biopsy machines in small groups, changing every 10 min.

At the end of the course, the participants understand the advantages, handling and limitations of MRI Ultrasound fusion biopsies.
ESU Hands-on Training Course in Non-technical skills in surgery
Sponsored by ROCHE

Saturday 17 March
10:00 - 12:00

Location: Yellow Area, Iglo

Chairs: To be confirmed
M.S. Khan, London (GB)
K. Ahmed, London (GB)

Tutors: To be confirmed

Aims and objectives of this session
The operating room is a complex and highly stressful environment that requires interaction between a large team to achieve successful outcomes for the patients. This requires not only effective procedure-specific technical skills, but also additionally a range of non-technical skills. Non-technical skills are defined as skills unrelated to the technical completion of surgical procedures. They include decision-making, team-working, communication and leadership skills.

The importance of non-technical skills is often overlooked but they are unfortunately a major cause of surgical error. Like technical skills, which are acquired over many years of practice and training, non-technical skills are not innate traits and must also be developed through training and experience.

This course will serve to introduce practicing urologists to the concept of non-technical skills using an interactive full immersion simulation environment, developed at Imperial College London, whilst undertaking common scenarios in endoscopic urological surgery. Participants will be evaluated by experts in surgical education and provided individual feedback with view for further self-improvement.

Supporting faculty:
N. Raison, London (GB)
A. Aydin, London (GB)
N. Khan, London (GB)
C. Lovegrove, Perth (GB)
# EBU Session: Examinations and assessments – European standards

**Specialty session**

**Saturday 17 March**

**11:00 - 12:00**

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<tr>
<th>Time</th>
<th>Session Details</th>
<th>Speaker(s)</th>
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<tbody>
<tr>
<td>11:00 - 11:10</td>
<td>In-Service Assessments (ISA) and FEBU examinations: What are they? What is their purpose?</td>
<td>S. Tekgül, Ankara (TR)</td>
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<tr>
<td>11:10 - 11:20</td>
<td>In-Service assessments and FEBU examinations: The trainee's perspective – are they worth it? How to be successful in the exam</td>
<td>J.L. Vásquez Mendoza, Herlev (DK)</td>
</tr>
<tr>
<td>11:20 - 11:30</td>
<td>In-Service assessments (ISA) and FEBU examinations: Future developments and direction</td>
<td>A.J. Figueiredo, Coimbra (PT)</td>
</tr>
</tbody>
</table>
| 11:30 - 12:00 | Round table discussion                                                          | A.J. Figueiredo, Coimbra (PT)  
S. Tekgül, Ankara (TR)  
J.L. Vásquez Mendoza, Herlev (DK) |

## Aims and objectives of this session

The common purpose of all urologists is the best care for the patient. The EBU in collaboration with the EAU and national urological organisations is concerned with the standards of training and education for urologists of the present and the future. The aim of this session is to explore current and future needs.

11:30 - 12:00

- **Can EBU assessments be of any value in countries that have well established systems of education and training?**
- **Why should residents undertake EBU exams and assessments if they are not mandatory requirements in their native countries?**
- **How can European examinations and assessments help if there is great diversity of healthcare systems and training of urologists between countries?**
- **Can European standards and assessments benefit countries beyond Europe?**
- **How should someone prepare for the examinations and score well?**
Paediatric urology for the adult urologist. Congenital problems of the urinary tract: Obstruction and reflux and longterm outcome
ESU Course 03

Location: Orange Area, Room 2 (Level 0)
Chair: J.M. Nijman, Groningen (NL)

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

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

Prenatal hydronephrosis / prenatal intervention and postnatal 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 05

Location: Orange Area, Room 6 (Level 0)
Chair: P-T. Piéchaud, Bordeaux (FR)

Aims and objectives of this session
The course objective is to explain the surgical technique of radical prostatectomy performed through robotic-assisted laparoscopy for the treatment of prostatic carcinoma.
The outline of this course will give a detailed reminder of anatomical basic principles of radical prostatectomy.
General principles regarding ports placement will be also reminded considering the different possible options and the different types of robotic systems used. Then each teacher will make a presentation of his surgical technique using a video of 20 minutes explaining all the steps of the surgery in details. Other options of anatomical approach will be also introduced (posterior approach, lateral approach).
Finally, the course will present the possible intraoperative risks of complications and the functional and oncological results of this surgery.

Introduction
P-T. Piéchaud, Bordeaux (FR)

General principles of robotic radical prostatectomy, patient position, ports placement, ways of access
W. Artibani, Verona (IT)
P. Dasgupta, London (GB)

Anatomical and oncological supports of radical prostatectomy:

- Bladder neck preservation: Useful? Dangerous?
P-T. Piéchaud, Bordeaux (FR)

- Neurovascular bundle dissection: Anatomical reminders of the peri-prostatic fascia and space of dissection
P. Dasgupta, London (GB)
P. Dasgupta, London (GB)
P-T. Piéchaud, Bordeaux (FR)

- Bladder neck preservation: Useful? Dangerous?
P-T. Piéchaud, Bordeaux (FR)

- Neurovascular bundle dissection: Anatomical reminders of the periprostatic fascia and space of dissection
P. Dasgupta, London (GB)

Step by step operative procedure: How I do it?
Technical alternatives:

**Posterior approach: Bocciardi technique**
W. Artibani, Verona (IT)

**Lateral approach: Gaston technique**
P-T. Piéchaud, Bordeaux (FR)

**Lymphadenectomy: Technical principles**
W. Artibani, Verona (IT)

**Operative and postoperative complications**
P. Dasgupta, London (GB)

**Oncological and functional results**
W. Artibani, Verona (IT)

**Conclusion**
P-T. Piéchaud, Bordeaux (FR)
ESU/ESFFU Hands-on Training Course in OnabotulinumtoxinA administration for OAB
Sponsored by ALLERGAN

Location: Yellow Area, Room 1 (Level 0)
Chair: H. Hashim, Bristol (GB)
Tutors: R. Inman, Sheffield (GB)
M.S. Rahnama’i, Maastricht (NL)
E. Chartier-Kastler, Paris (FR)

Aims and objectives of this session
Botulinum toxin type A administration in Urology has become common practice over the last two decades. Following the completion of Phase 3 registration trials in OAB, OnabotulinumtoxinA received marketing approval for this indication and now has a standardised injection paradigm. This workshop 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.
ESU/ERUS Hands-on Training Course in Robotic surgery - Introduction

Sponsored by 3D SYSTEMS SIMBIONIX, MIMIC, INTUITIVE SURGICAL

Saturday 17 March
11:30 - 13:00

Location: Yellow Area, Room 5 (Level 0)
Chair: A. Ploumidis, Athens (GR)
Tutor: J.S. Schraml, Usti Nad Labem (CZ)

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

Improve your robotic surgery skills in the following areas:
• Endowrist manipulation
• Camera Control
• 3rd Arm Control
• Needle Placement and Driving
• Suturing and Knot Tying
The Expert-Guided Poster Tour is a new innovative session type. The Tour aims to provide an interactive platform informing delegates on the real essentials and providing in-depth information on the different research projects. The Expert-Guided Poster Tour consists of two parts: The first part is reserved for poster viewing. The posters will be on display for 2 hrs before the start of the Guided Poster Tour. During the second part of the Tour, the two experts acting as moderators, will ask questions to poster presenters.

PT001

Key steps in conducting systematic reviews for underpinning clinical practice guidelines: Methodology of the European Association of Urology

By: Knoll T., Omar M.I., MacLennan S., Hernández V., Canfield S., Yuan Y., Bruins M., Marconi L., Van Poppel H., N'Dow J., Sylvester R.

1Sindelfingen-Boeblingen Medical Center, University of Tübingen, Dept. of Urology, Sindelfingen, Germany, 2University of Aberdeen, Academic Urology Unit, Aberdeen, United Kingdom, 3Hospital Universitario Fundacion Alcorcon, Dept. of Urology, Madrid, Spain, 4University of Texas McGovern Medical School, Division of Urology, Houston, United States of America, 5McMaster University, Dept. of Medicine, Hamilton, Canada, 6Radboud University Medical Center, Dept. of Urology, Nijmegen, Netherlands, The, 7Coimbra University Hospital, Dept. of Urology, Coimbra, Portugal, 8University Hospital Gasthuisberg, Katholieke Universiteit Leuven, Dept. of Urology, Leuven, Belgium, 9EAU Guidelines Office, Brussels, Belgium

PT002


1General Teaching Hospital and 1st Faculty of Medicine, Charles University, Dept. of Urology, Prague, Czech Republic, 2Royal Free London NHS Foundation Trust, Dept. of Urology, London, United Kingdom, 3Hospital Universitario Fundación de Alcorcón, Dept. of Urology, Madrid, Spain, 4Hospital Motol and Second Faculty of Medicine, Charles University, Dept. of Urology, Prague, Czech Republic, 5Caritas-St. Josef Medical Center, University of Regensburg, Dept. of Urology, Regensburg, Germany, 6Hôpitaux Universitaires de l'Est-Parisien HUEP, Assistance Publique Faculty of Medicine Pierre et
PT003

Potential benefit of lymph node dissection during radical nephroureterectomy for upper tract urothelial carcinoma: A systematic review by the European Association of Urology Guidelines Panel on non-muscle-invasive bladder cancer


1 Fundación Instituto Valenciano de Oncología, Dept. of Urology, Valencia, Spain, 2 University of Rennes, Dept. of Urology, Rennes, France, 3 La Pitié-Salpêtrière Hospital, Assistance-Publique Hôpitaux de Paris, Academic Dept. of Urology, Paris, France, 4 Radboud University Nijmegen Medical Centre, Dept. of Urology, Nijmegen, Netherlands, The, 5 McMaster University, Dept. of Medicine, Division of Gastroenterology, Hamilton, Canada, 6 Hospital Motol, Second Faculty of Medicine, Charles University, Dept. of Urology, Prague, Czech Republic, 7 HELIOS Agnes-Karl-Krankenhaus, Dept. of Urology, Bad Schwartau, Germany, 8 Caritas St. Josef Medical Centre, University of Regensburg, Dept. of Urology, Regensburg, Germany, 9 La Pitié-Salpêtrière Hospital, UPMC, Dept. of Pathology, Paris, France, 10 University of Turin, Dept. of Urology, Turin, Italy, 11 University of Aberdeen, Academic Urology Unit, Aberdeen, United Kingdom, 12 North Hampshire Hospital, Dept. of Urology, Basingstoke, United Kingdom, 13 Fundació Puigvert, Universitat Autònoma de Barcelona, Dept. of Urology, Barcelona, Spain, 14 Netherlands Cancer Institute-Antoni van Leeuwenhoek Hospital, Dept. of Urology, Amsterdam, Netherlands, The, 15 European Association of Urology Guidelines Office, Brussels, Belgium, 16 Medical University of Graz, Dept. of Urology, Graz, Austria, 17 Medical University of Vienna, Vienna General Hospital, Dept. of Urology, Vienna, Austria, 18 La Pitié-Salpêtrière Hospital, Assistance-Publique Hôpitaux de Paris, Dept. of Urology, Paris, France

PT004

How to resolve discrepancies when findings from randomized controlled trials and meta-analyses disagree?

By: Sylvester R.J. 1, Canfield S.E. 2, Lam T.B.L. 3, Marconi L. 4, MacLennan S. 3, Yuan Y. 5, MacLennan G. 6, Norrie J. 6, Omar M.I. 7, Bruins H.M. 8, Hernández V. 9, Plass
Oncological outcomes of laparoscopic nephroureterectomy versus open radical nephroureterectomy for upper tract urothelial carcinoma: An European Association of Urology Guidelines systematic review


1CHU Rennes, Dept. of Urology, Rennes, France, 2La Pitié-Salpêtrière Hospital, Dept. of Urology, Paris, France, 3Fundación Instituto Valenciano de Oncología, Dept. of Urology, Valencia, Spain, 4Radboud University Nijmegen Medical Centre, Dept. of Urology, Nijmegen, Netherlands, The, 5McMaster University, Dept. of Medicine, Division of Gastroenterology, Hamilton, Canada, 6University of Aberdeen, Academic Urology Unit, Aberdeen, United Kingdom, 7Aberdeen Royal Infirmary, Dept. of Urology, Aberdeen, United Kingdom, 8Hospital Motol, Second Faculty of Medicine, Charles University, Dept. of Urology, Prague, Czech Republic, 9Tenon Hospital, Dept. of Pathology, Paris, France, 10Medical University of Graz, Dept. of Urology, Graz, Austria, 11European Association of Urology Guidelines Office, Brussels, , 12Caritas St. Josef Medical Centre, University of Regensburg, Dept. of Urology, Regensburg, Germany, 13North Hampshire Hospital, Dept. of Urology, Basingstoke, United Kingdom, 14Netherlands Cancer Institute, Antoni van Leeuwenhoek Hospital, Dept. of Surgical Oncology, Amsterdam, Netherlands, The, 15University of Turin, Dept. of Urology, Turin, Italy, 16Fundació Puigvert, Universidad Autónoma de Barcelona, Dept. of Urology, Barcelona, Spain, 17Vienna General Hospital, Dept. of Urology, Vienna, Austria

What are core outcome sets, how should they be developed and why are they essential for urology?

By: MacLennan S. 1, Williamson P.R. 2, Lam T.B.L. 1, Omar M.I. 1, Canfield S. 3, Marconi L. 4, N’Dow J. 1, Yuan Y. 5, Sylvester R. 6

1University of Aberdeen, Academic Urology Unit, Aberdeen, United Kingdom, 2University of Liverpool, Dept. of Biostatistics, Liverpool, United Kingdom, 3University of Texas McGovern Medical School, Division of Urology, Houston, United States of America, 4Coimbra University Hospital, Dept. of Urology, Coimbra, Portugal, 5McMaster University, Dept. of Medicine, Hamilton, Canada, 6EAU Guidelines Office, Brussels, Belgium
PT007

A core outcome set for localised prostate cancer effectiveness trials

By: MacLennan S., Williamson P.R., MacLennan S., N'Dow J., Lam T.B.L.

1University of Aberdeen, Academic Urology Unit, Aberdeen, United Kingdom, 2University of Liverpool, Dept. of Biostatistics, Liverpool, United Kingdom

PT008

What is the negative predictive value of multiparametric magnetic resonance imaging in excluding prostate cancer at biopsy? A systematic review and meta-analysis


1Hospices Civils de Lyon, Hôpital Edouard Herriot, Dept. of Urinary and Vascular Radiology, Lyon, France, 2University Hospitals Leuven, Dept. of Urology, KU Leuven, Laboratory of Molecular Endocrinology, Leuven, Belgium, 3European Association of Urology Guidelines Office, Brussels, Belgium, 4Coimbra University Hospital, Dept. of Urology, Coimbra, Portugal, 5Dana-Farber Cancer Institute, Bladder Cancer Center, Harvard Medical School, Boston, United States of America, 6Netherlands Cancer Institute, Dept. of Urology, Amsterdam, Netherlands, The, 7CHU Grenoble, Dept. of Radiation Therapy, Grenoble, France, 8Patient advocate, Hasselt, Belgium, 9University of Sheffield, Academic Urology Unit, Sheffield, United Kingdom, 10IRCCS Ospedale San Raffaele, Vita-Salute San Raffaele University, Division of Oncology/Unit of Urology, Milan, Italy, 11University of Bern, Inselspital, Dept. of Urology, Bern, Switzerland, 12St. James’s University Hospital and University of Leeds, Leeds Cancer Centre, Leeds, United Kingdom, 13Erasmus Medical Center, Dept. of Pathology, Rotterdam, Netherlands, The, 14N.N. Blokhin Cancer Research Center, Moscow, Russia, 15Netherlands Cancer Institute, Dept. of Urology, Amsterdam, Netherlands, The, 16University of Warwick, Cancer Research Centre, Coventry, United Kingdom, 17Erasmus MC, Dept. of Radiology & Nuclear Medicine, Rotterdam, Netherlands Cancer Institute, Dept. of Radiology, Amsterdam, Netherlands, The, 18University Hospital Ulm, Dept. of Radiation Oncology, Ulm, Germany, 19McMaster University, Division of Gastroenterology and Cochrane UGP D Group, Dept. of Medicine, Health Sciences Centre, Hamilton, Canada, 20Royal Liverpool and Broadgreen Hospitals NHS Trust, Liverpool, United Kingdom, 21University Hospital, Dept. of Urology, Saint-Étienne, France, 22University of Aberdeen, Academic Urology Unit, Aberdeen, United Kingdom, 23Hospices Civils de Lyon, Hôpital Edouard Herriot, Dept. of Urinary and Vascular Radiology, Lyon, France

PT009

The benefits and harms of different extents of lymph node dissection during radical prostatectomy for prostate cancer: A systematic review

By: Fossati N., Willemse P.-P., Van Den Broeck T., Yuan Y., Briers E., Bellmunt J., Bolla M., Cornford P., De Santis M., MacPepple E., Henry A.M., Matveev S., Van Der Poel H.G., Van Der Kwast T., Rouvière O., Wiegel T., Lam T., Mottet N., Joniau S.

1IRCCS Ospedale San Raffaele, Vita-Salute San Raffaele University, Division of...
Systematic review of quality of life outcomes after primary treatment for clinically localised prostate cancer


1 Leto Hospital, Dept. of Urology, Athens, , 2 Wrightington, Wigan and Leigh NHS Foundation Trust, Dept. of Urology, Wigan, United Kingdom, 3 Netherlands Cancer Institute, Dept. of Urology, Amsterdam, Netherlands, The, 4 University of Warwick, Clinical Trials Unit, Coventry, United Kingdom, 5 Dana-Farber Cancer Institute, Bladder Cancer Center, Boston, United States of America, 6 University Hospitals Leuven, Dept. of Urology, Leuven, Belgium, 7 Royal Liverpool and Broadgreen Hospitals NHS Trust, Liverpool, United Kingdom, 8 University of Sheffield, Academic Urology Unit, Sheffield, United Kingdom, 9 IRCCS Ospedale San Raffaele, Unit of Urology/Division of Oncology, Milan, Italy, 10 University of Bern, Inselspital, Dept. of Urology, Bern, Switzerland, 11 St. James’s University Hospital and University of Leeds, Leeds Cancer Centre, Leeds, United Kingdom, 12 CHU Grenoble, Dept. of Radiation Therapy, Grenoble, France, 13 Patient representative, Hasselt, Belgium, 14 University of Aberdeen, Academic Urology Unit, Aberdeen, United Kingdom, 15 Cardiff University, School of Medicine, Health Park, Wales Cancer Bank, Cardiff, United Kingdom, 16 University Hospital, Dept. of Urology, Saint-Etienne, France, 17 Hospices Civils de Lyon, Radiology Department, Edouard Herriot Hospital, Lyon, France, 18 Erasmus MC University Medical Center, Dept. of Radiology & Nuclear Medicine, Rotterdam, Netherlands, The, 19 University Hospital Ulm, Dept. of Radiation Oncology, Ulm, Germany, 20 University Hospital Groningen, Dept. of Urology, Groningen, Netherlands, The, 21 Dept. of Medicine, Hamilton, Canada, 22 Sheffield Hallam University, Faculty of Health and Wellbeing, Sheffield, United Kingdom
PT011

A systematic review and meta-analysis comparing the effectiveness and adverse effects of different systemic treatments for non-clear cell renal cell carcinoma


1Cabueñes Hospital, Dept. of Urology, Gijón, Spain, 2Sunderby Hospital, Dept. of Urology, Sunderby, Sweden, 3University Hospital Hamburg Eppendorf, Dept. of Urology, Hamburg, Germany, 4Coimbra University Hospital, Dept. of Urology, Coimbra, Portugal, 5University of Aberdeen, Academic Urology Unit, Aberdeen, United Kingdom, 6Institut Gustave Roussy, Dept. of Cancer Medicine, Villejuif, France, 7University of Rennes, Dept. of Urology, Rennes, France, 8University of Texas Medical School at Houston, Division of Urology, Houston, United States of America, 9Skåne University Hospital, Dept. of Urology, Malmö, Sweden, 10Patient Advocate International Kidney Cancer Coalition (IKCC), University Medical Centre Utrecht, Dept. of Nephrology and Hypertension, Utrecht, Netherlands, 11Faculty Hospital and Faculty of Medicine in Pilsen, Charles University, Dept. of Urology, Prague, Czech Republic, 12Hanover Medical School, Dept. of Urology and Urologic Oncology, Hanover, Germany, 13University Hospital Schleswig-Holstein, Dept. of Urology, Lübeck, Germany, 14The Royal Free NHS Trust and Barts Cancer Institute, Queen Mary University of London, London, United Kingdom, 15Ludwig-Maximilians University, Dept. of Urology, Munich, Germany, 16Maggiore della Carità Hospital, University of Eastern Piedmont, Division of Urology, Novara, Italy, 17Umeå University, Dept. of Surgical and Perioperative Sciences, Urology and Andrology, Umeå, Sweden, 18Netherlands Cancer Institute, Antoni van Leeuwenhoek Hospital, Dept. of Urology, Amsterdam, Netherlands, The

PT012

Systematic review of the performance of non-invasive tests in diagnosing bladder outlet obstruction in men with lower urinary tract symptoms

By: Malde S., Nambiar A.K., Umbach R., Lam T., Bach T., Bachmann A., Drake M.J., Gacci M., Gratze C., Madersbacher S., Mamoulakis C., Tikkinen K.A.O., Gravas S.

1Guy’s and St Thomas’ NHS Foundation Trust, Dept. of Urology, London, United Kingdom, 2Freeman Hospital, Dept. of Urology, Newcastle upon Tyne, United Kingdom, 3Klinikum Sindelfingen-Böblingen, Dept. of Urology, Sindelfingen, Germany, 4University of Aberdeen, Academic Urology Unit, Aberdeen, United Kingdom, 5Asklepios Hospital Harburg, Dept. of Urology, Hamburg, Germany, 6University Hospital Bonn, Dept. of Urology, Bonn, Germany, 7University of Bristol, School of Clinical Sciences, Bristol, United Kingdom, 8University of Florence, AOUC – Careggi Hospital, Dept. of Urology, Florence, Italy, 9Ludwig-Maximilians-University Munich, Dept. of Urology, Munich, United Kingdom, 10Kaiser Franz Josef Spital, Dept. of Urology, Vienna, Austria, 11University General Hospital of Heraklion, University of Crete Medical School, Dept. of Urology, Heraklion, Greece, 12University of Helsinki and Helsinki University Hospital, Depts. of Urology and Public Health, Helsinki, Finland, 13Faculty of Medicine, School of Health Sciences, University of Thessaly, Dept. of Urology, Larissa, Greece
Is nonoperative management the best first-line option for high-grade renal trauma?  
A systematic review

By: Sujenthiran A. 1, Elshout P. J. 2, Veskimae E. 3, Abu-Ghanem Y. 4, MacLennan S. 5, Yuan Y. 6, Serafetinidis E. 7, Sharma D.M. 1, Kitrey N.D. 4, Djakovic N. 6, Lumen N. 2, Kuehhas F.E. 9, Summerton D.J. 10

1St George's Healthcare NHS Trust, Dept. of Urology, London, United Kingdom, 2Ghent University Hospital, Dept. of Urology, Ghent, Belgium, 3Tampere University Hospital, Dept. of Urology, Tampere, Finland, 4Chaim Sheba Medical Centre, Dept. of Urology, Tel-Hashomer, Israel, 5University of Aberdeen, Academic Urology Unit, Aberdeen, United Kingdom, 6Health Science Centre, McMaster University, Dept. of Medicine, Hamilton, Canada, 7Asklipieion General Hospital, Dept. of Urology, Athens, Greece, 8Muhldorf General Hospital, Dept. of Urology, Muhldorf am Inn, Germany, 9Private Office, Vienna, Austria, 10University Hospitals of Leicester NHS Trust, Dept. of Urology, Leicester, United Kingdom

The risk of tumour recurrence in patients undergoing renal transplantation for end-stage renal disease after previous treatment for a urological cancer: A systematic review


1Aix-Marseille University, Marseille, France, 2Hospital Universitario Ramón y Cajal, Alcalá University, Dept. of Urology, Madrid, Spain, 3Radboudumc, Dept. of Urology, Nijmegen, Netherlands, The, 4Charité Universitätsmedizin Berlin, Dept. of Nephrology, Berlin, Germany, 5Coimbra University Hospital, Dept. of Urology and Renal Transplantation, Coimbra, Portugal, 6Hospital General Universitario Gregorio Marañón, Dept. of Urology, Madrid, Spain, 7Guy's and St Thomas' Hospital, Dept. of Urology and Renal Transplantation, London, United Kingdom, 8Medical University of Vienna, Clinical Institute of Pathology, Vienna, Austria, 9St George's Hospital, Dept. of Urology and Renal Transplantation, London, United Kingdom, 10Guy's and St Thomas' Hospital, Dept. of Urology and Renal Transplantation, London, United Kingdom, 11McMaster University, Dept. of Medicine, Health Science Centre, Hamilton, Canada, 12Fundacion Puigvert, University Autonoma of Barcelona, Dept. of Urology, Barcelona, Spain

Testicular tumour size and rete testis invasion as prognostic factors for the risk of relapse of clinical stage I seminoma testis patients under surveillance: A systematic review by the Testicular Cancer Guidelines Panel

By: Boormans J.L. 1, Mayor de Castro J. 2, Marconi L. 3, Yuan Y. 4, Laguna Pes M.P. 5, Bokemeyer C. 6, Nicolai N. 7, Algaba F. 8, Oldenburg J. 9, Albers P. 10

1Erasmus MC Cancer Institute, Dept. of Urology, Rotterdam, Netherlands, The, 2Hospital Gregorio Marañón, Dept. of Urology, Madrid, Spain, 3Centro Hospitalar e Universitário de Coimbra, Dept. of Urology and Renal Transplantation, Coimbra, Portugal, 4Health Sciences Centre, McMaster University, Division of Gastroenterology and Cochrane UGPD Group, Department of Medicine, Hamilton, Canada, 5AMC University Hospital, Dept. of Urology, Amsterdam, Netherlands, The, 6University Hospital Eppendorf, Dept. of Internal
Science Programme - EAU18 Copenhagen

Medicine II, Oncology, Hematology and Stem Cell Transplantation with Section Pneumology, Hamburg, Germany, 7 Fondazione IRCCS Istituto Nazionale Tumori, Milan, Italy, 8 Fundación Puigvert, Universitat Autònoma de Barcelona, Dept. of Pathology, Barcelona, Spain, 9 of Oncology, Akershus University Hospital, Lørenskog, Norway and University of Oslo, Oslo, Norway, 10 Düsseldorf University Hospital, Heinrich-Heine-University Düsseldorf, Dept. of Urology, Düsseldorf, Germany
How to write results and discussion
ESU Course 06

Location: Orange Area, Room 1 (Level 0)
Chair: J.W.F. Catto, Sheffield (GB)

Aims and objectives of this session
Learn the best way to draft the results and discussion section of a scientific paper. Understand how to work through examples of good and bad practices, to find the key points of the manuscript. Obtain insight from editors on what they expect to see.

• To understand what makes good results section and how best to present your data.
• To understand what makes a good discussion.
• To learn from experienced editors.

Welcome
J.W.F. Catto, Sheffield (GB)

Choosing and presenting your statistical analyses
M. Assel, New York (US)

How to write the results chapter
S. Boorjian, Rochester (US)

Group working I

Writing the discussion section
J-N.L. Cornu, Rouen (FR)

What the editor looks when reviewing the results and discussion
S. Boorjian, Rochester (US)

Group working II

Questions and answers
### Prosthetic surgery in urology

#### ESU Course 07

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<th>Time</th>
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<tr>
<td>Saturday 17 March</td>
<td>12:00 - 14:00</td>
<td>Orange Area, Room 3 (Level 0)</td>
<td>A. Muneer, London (GB)</td>
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#### Aims and objectives of this session

An increasing number of urological surgeons are developing a surgical practice which involves prosthetic surgery. This course will aim to cover the key areas of prosthetic surgery in urology with the aid of a video based platform. The course is aimed at urological trainees as well as established urologists wishing to develop a practice or gain an update and surgical tips in this area.

Surgical techniques with the aid of semi-live surgery will be a key focus of this course. At the end of the course participants should have a good understanding of:

- Minimising the risk of prosthesis infection and understand the role of biofilms
- Theatre preparation and set up for prosthetic surgery
- Patient selection and prosthetic surgery for male and female urinary incontinence including artificial urinary sphincters and sacral neuromodulation
- Penile prosthesis surgery – surgical techniques, avoiding complications and revision surgery

#### Introduction to biofilms and prosthetic infections

A. Muneer, London (GB)

#### Theatre set up and preparation of patients

A. Muneer, London (GB)

#### Prosthetic surgery for male urinary incontinence - Male slings and AUS

T. Rashid, London (GB)

#### Prosthetic surgery for female urinary incontinence

T. Rashid, London (GB)

#### Penile prosthesis surgery – surgical technique and avoiding complications

A. Muneer, London (GB)

#### Dealing with intraoperative complications and penile prosthesis revision surgery

A. Muneer, London (GB)
Surgery for renal cancer beyond minimally invasive approaches: Opportunities and limits
ESU Course 08

Saturday 17 March 12:00 - 14:00

Location: Orange Area, Room 5 (Level 0)
Chair: M. Kuczyk, Hanover (DE)

Aims and objectives of this session
Addressing patients with locally advanced renal cell cancer with / without intravascular 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 tumour 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?

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

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

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

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

The role of lymphadenectomy during the surgical treatment of RCC patients
M. Kuczyk, Hanover (DE)
Aims and objectives of this session
This course treats urogenitary pathology. We want to improve the urologist-pathologist interaction, understanding of the whole diagnostic spectrum and to update urologists with the new WHO classification 2018.

• Optimal handling of pathology specimen.
• When ask for frozen sections, surgical margins.
• Pathology report. Read and understand all included information.
• Novelties in Uro-Onco Pathology. Applications in daily practice.

Consensus conference on Gleason Grading: Proposal for a new grading system
E. Compérat, Paris (FR)

Bladder cancer classification: What is new in 2018, Classical grading and molecular grading, how to integrate?
E. Compérat, Paris (FR)

Kidney tumours with the 2018, WHO eyes
F. Algaba, Barcelona (ES)

Testis tumours: New insights with clinical impact
F. Algaba, Barcelona (ES)
EAU Guidelines controversies
Specialty session

Saturday 17 March
13:30 - 17:30

Location: Green Area, Room 10 (Level 1)

Chairs: J. N'Dow, Aberdeen (GB)
        R.J. Sylvester, Brussels (BE)

Aims and objectives of this session
Within this interactive session, we will explore the evidence base underpinning four controversial treatment recommendations in the EAU Prostate Cancer, Bladder Cancer, Testis Cancer and Urinary Incontinence Guidelines. In each case, the evidence for and against each recommendation will be presented and then reviewed by an external discussant. What is your opinion on these topics? To have your say, attend this session and vote to let us know.

The aim of this session is thus to acquaint attendees with recent work of the EAU Guidelines Panels by presenting how the evidence base is used to provide support for and against four controversial guidelines topics.

The EAU Guidelines Office oversees the development of clinical practice guidelines from some 20 different EAU guidelines panels. Guideline recommendations are underpinned, whenever possible, by systematic reviews and meta-analyses of randomized controlled trials. The validity of the results of a systematic review depends on the quality of the individual studies and their clinical and methodological heterogeneity. In many cases, however, only lower levels of evidence exist because randomization is not feasible, or a systematic review has not been done.

Guideline controversies arise when a recommendation is based on evidence that is not robust. Disagreements can occur, even between members of the same panel, if, for example, the results of a new randomized controlled trial differ from those found in a previous meta-analysis or if the results across different series of randomised and/or non-randomized studies vary from one to another. Such discrepancies are more often than not related to study differences relating to patient selection, treatment, outcome evaluation, and risk of bias.

So come to this session to let us know if you agree with experts and if not, then why not!

For this session, voting will be available via the EAU18 App or via www.qna.at/eau

13:30 - 13:35
Welcome and introduction
J. N'Dow, Aberdeen (GB)
R.J. Sylvester, Brussels (BE)

13:35 - 14:30
Muscle-invasive and metastatic bladder cancer: Can organ preservation become the Gold standard in muscle-invasive bladder cancer?
Moderator: J.A. Witjes, Nijmegen (NL)
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<thead>
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<th>Time</th>
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<tr>
<td>13:35 - 13:40</td>
<td>Introduction</td>
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<td>J.A. Witjes, Nijmegen (NL)</td>
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<td>13:40 - 13:50</td>
<td>PRO: Organ preservation will be the new Gold standard</td>
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<td>N. D. James, Birmingham (GB)</td>
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<td>13:50 - 14:00</td>
<td>CON: Cystectomy will remain the Gold standard</td>
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<td>A. Van Der Heijden, Nijmegen (NL)</td>
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<td>14:00 - 14:10</td>
<td>External discussant</td>
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<td>J.D. Kelly, Newcastle upon Tyne (GB)</td>
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<td>14:10 - 14:25</td>
<td>Audience voting</td>
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<td>14:25 - 14:30</td>
<td>Conclusions</td>
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<td>J.A. Witjes, Nijmegen (NL)</td>
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<tr>
<td>14:30 - 14:35</td>
<td>Introduction</td>
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<td>N. Mottet, Saint-Étienne (FR)</td>
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<td>14:35 - 14:45</td>
<td>Pro - Combination for everyone</td>
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<td>N.W. Clarke, Manchester (GB)</td>
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<td>14:45 - 14:55</td>
<td>Con - Combination restricted to a few/some situations</td>
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<td>P. Cornford, Liverpool (GB)</td>
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<td>14:55 - 15:05</td>
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<td></td>
<td>L. Collette, Brussels (BE)</td>
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<tr>
<td>15:05 - 15:20</td>
<td>Audience voting</td>
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<tr>
<td>15:20 - 15:25</td>
<td>Conclusions</td>
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<tr>
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<td>N. Mottet, Saint-Étienne (FR)</td>
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<tr>
<td>15:25 - 16:20</td>
<td>Urinary incontinence: Mesh versus non-mesh surgery for genital prolapse and urinary incontinence: Synthetic midurethral sling remains the gold standard for women with stress urinary incontinence</td>
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<td>Moderator: N. Mottet, Saint-Étienne (FR)</td>
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<tr>
<td>15:25 - 15:30</td>
<td>Introduction</td>
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<tr>
<td></td>
<td>F.C. Burkhard, Bern (CH)</td>
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<tr>
<td>15:30 - 15:40</td>
<td>Pro: Outcomes are excellent and complications are modest in experienced hands</td>
</tr>
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<td>A.K. Nambiar, Newcastle upon Tyne (GB)</td>
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<tr>
<td>15:40 - 15:50</td>
<td>Con: Complications are unacceptably high and other options are readily available</td>
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<td>N. Thiruchelvam, Cambridge (GB)</td>
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<tr>
<td>15:50 - 16:00</td>
<td>External discussant</td>
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<tr>
<td></td>
<td>G. Lemack, Dallas (US)</td>
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<td>Time</td>
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<tr>
<td>16:00 - 16:15</td>
<td>Audience voting</td>
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<tr>
<td>16:15 - 16:20</td>
<td>Conclusions</td>
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<tr>
<td></td>
<td>F.C. Burkhard, Bern (CH)</td>
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<tr>
<td>16:20 - 17:15</td>
<td>Testis cancer: Should prognostic factors be used to drive treatment recommendations in Stage I Seminoma</td>
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<td>Moderator: M.P. Laguna, Amsterdam (NL)</td>
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<tr>
<td>16:20 - 16:25</td>
<td>Introduction</td>
</tr>
<tr>
<td></td>
<td>M.P. Laguna, Amsterdam (NL)</td>
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<tr>
<td>16:25 - 16:35</td>
<td>Pro: There is sufficient evidence to use prognostic factors to drive treatment</td>
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<td>J. Oldenburg, Lørenskog (NO)</td>
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<tr>
<td>16:35 - 16:45</td>
<td>Con: The evidence to use prognostic factors to drive treatment is low</td>
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<td>J.L. Boormans, Rotterdam (NL)</td>
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<td>16:45 - 16:55</td>
<td>External discussant</td>
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<td>B. Leigh, London (GB)</td>
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<td>16:55 - 17:10</td>
<td>Audience voting</td>
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<tr>
<td>17:10 - 17:15</td>
<td>Conclusions</td>
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<td>M.P. Laguna, Amsterdam (NL)</td>
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<tr>
<td>17:15 - 17:30</td>
<td>Closing remarks</td>
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<tr>
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<td>J. N'Dow, Aberdeen (GB)</td>
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<td>R.J. Sylvester, Brussels (BE)</td>
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ESU/ESFFU Hands-on Training Course in OnabotulinumtoxinA administration for OAB
Sponsored by ALLERGAN

Location: Yellow Area, Room 1 (Level 0)
Chair: H. Hashim, Bristol (GB)
Tutors: R. Inman, Sheffield (GB)
        M. Belal, Birmingham (GB)
        A. Garcia Mora, Mexico City (MX)

Aims and objectives of this session
Botulinum toxin type A administration in Urology has become common practice over the last two decades. Following the completion of Phase 3 registration trials in OAB, OnabotulinumtoxinA received marketing approval for this indication and now has a standardised injection paradigm. This workshop 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.
ESU/ESFFU Hands-on Training Course in Urodynamics
Sponsored by LABORIE

Saturday 17 March 13:00 - 16:00

Location: Yellow Area, Room 2 (Level 0)
Chair: G. Van Koeveringe, Maastricht (NL)
Tutors: E. Finazzi Agrò, Rome (IT)
P. Rosier, Nijmegen (NL)
E. Solomon, London (GB)
U. Mehnert, Zurich (CH)
R. Kirschner-Hermanns, Bonn (DE)

Aims and objectives of this session
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

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.
ESU/ESUT/ESUI Hands-on Training Course in MRI Fusion biopsy
Sponsored by BIOBOT, BKMEDICAL, EIGEN, EXACT IMAGING, HITACHI, KOELIS, MEDCOM, PHILIPS

Saturday 17 March
13:30 - 15:30

Location: Yellow Area, Room 3 (Level 0)
Chair: L. Budäus, Hamburg (DE)
Tutors: S. Kruck, Tübingen (DE)
H. Cash, Berlin (DE)
A. Rannikko, Helsinki (FI)
C. Kastner, Cambridge (GB)
A. Borkowetz, Dresden (DE)
S. Boxler, Bern (CH)
P. Mozer, Paris (FR)

Aims and objectives of this session
MRI is increasingly used in patients undergoing prostate biopsies. Different MRI Ultrasound fusion devices allow integrating the MRI information into the daily clinical workflow.
The course will provide an overview on MRI reading, technical basics and different prostate biopsy approaches. Technical considerations, the transrectal or transperineal approach will be critically reviewed and discussed. During the second half of the course, the participants are able to try out 7 different Fusion biopsy machines in small groups, changing every 10 min.

At the end of the course, the participants understand the advantages, handling and limitations of MRI Ultrasound fusion biopsies.
ESU/ERUS Hands-on Training Course in Robotic surgery - Introduction
Sponsored by 3D SYSTEMS SIMBIONIX, MIMIC, INTUITIVE SURGICAL

Saturday 17 March
13:30 - 15:00

Location: Yellow Area, Room 5 (Level 0)
Chair: H. Zecha, Hamburg (DE)
Tutor: N. Grivas, Ioannina (GR)

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

Improve your robotic surgery skills in the following areas:
• Endowrist manipulation
• Camera Control
• 3rd Arm Control
• Needle Placement and Driving
• Suturing and Knot Tying
Infectious diseases 1: Lower urinary tract
Poster Session 18

Saturday 17 March
14:15 - 15:45

Location: Green Area, Room 2 (Level 0)
Chairs: K. Tze Wei, Kuala Lumpur (MY)
B. Pradere, Paris (FR)
R. Veeratterapillay, Newcastle upon Tyne (GB)

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

227 Vaccines for the prevention of recurrent urinary tract infections: A systematic review
By: Aziminia N. 1, Hadjipavlou M. 2, Pandian S. 1, Malde S. 3, Hammadeh M. 1
1Queen Elizabeth Hospital, Dept. of Urology, London, United Kingdom,
2Guy's Hospital, Guy's and St Thomas' NHS Foundation Trust, Dept. of Urology, London, United Kingdom,
3Guy's Hospital, Guy's and St Thomas' NHS Foundation Trust, Dept. of Urology, Birmingham, United Kingdom

228 The changing patterns of antimicrobial resistance in E. coli urine and blood isolates in the community and nosocomial populations of East Suffolk (UK), 2009-2016
By: Johnston T. 1, Wadhwa K. 2, Brendall A. 3, Hall P. 3, Hawizy A. 4, Habib M. 4,
Kapoor S. 4, Yardy G. 4, Brierly R. 4, Banerjee G. 4
1Cambridge University Hospitals, Dept. of Urology, Cambridge, United Kingdom,
2Norfolk and Norwich University Hospital, Dept. of Urology, Norwich, United Kingdom,
3Ipswich Hospital, Dept. of Microbiology, Ipswich, United Kingdom,
4Ipswich Hospital, Dept. of Urology, Ipswich, United Kingdom

229 Five-year prospective study evaluating risk factors for isolation of multiple-drug resistance (MDR) microorganisms in patients with healthcare-associated infections (HAIs) hospitalized in a urology ward
Hospital Universitario 12 de Octubre, Dept. of Urology, Madrid, Spain

230 Urogenital tuberculosis: The cause of ineffective antibacterial therapy for urinary tract infections
By: Kulchavenya E. 1, Cherednicenko A. 2
1Novosibirsk research TB Institute, Novosibirsk Medical University, Dept. of Urogenital, Novosibirsk, Russia,
2Novosibirsk research TB Institute, Novosibirsk Medical University, Bacteriological Laboratory, Novosibirsk, Russia
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<tr>
<th>Session</th>
<th>Title</th>
<th>Authors</th>
<th>Institution and Country</th>
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<tr>
<td>231</td>
<td>L-metionina associated with Hibiscus sabdariffa and Boswellia serrata (ACIDIF PLUS®) extracts is able to relief symptoms and improve quality of life in patients affected by recurrent uncomplicated urinary tract infections</td>
<td>Cai T. 1, Tiscione D. 1, Lanzafame P. 2, Luciani L. 1, Bartoletti R. 3, Malossini G. 1</td>
<td>Santa Chiara Regional Hospital, Dept. of Urology, Trento, Italy, Santa Chiara Regional Hospital, Dept. of Microbiology, Trento, Italy, University of Pisa, Dept. of Urology, Pisa, Italy</td>
</tr>
<tr>
<td>232</td>
<td>Utility of antibiotic prophylaxis before transurethral resection of bladder tumor</td>
<td>Di Cosmo G. 1, Verzotti E. 1, Rizzo M. 1, Umari P. 2, Liguori G. 1, Cai T. 3, Trombetta C. 1</td>
<td>Università degli Studi di Trieste, Dept. of Urology, Trieste, Italy, Università degli Studi del Piemonte Orientale, Dept. of Urology, Novara, Italy, Santa Chiara Reg. Hospital, Dept. of Urology, Trento, Italy</td>
</tr>
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<td>233</td>
<td>Too many negative Meares-Stamey tests: What is the reason?</td>
<td>Cai T. 1, Mazzoli S. 2, Lanzafame P. 3, Caciagli P. 4, Tiscione D. 1, Malossini G. 1, Verze P. 5, Palmieri A. 5, Bartoletti R. 6, Mirone V. 5</td>
<td>Santa Chiara Regional Hospital, Dept. of Urology, Trento, Italy, Santa Maria Annunziata Hospital, STDs Center, Florence, Italy, Santa Chiara Regional Hospital, Dept. of Microbiology, Trento, Italy, Santa Chiara Regional Hospital, Dept. of Laboratory Medicine, Trento, Italy, University of Naples, Dept. of Urology, Naples, Italy, University of Pisa, Dept. of Urology, Pisa, Italy</td>
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<td>234</td>
<td>Culture-based targeted antibiotic prophylaxis by β-lactams alone is not sufficient to prevent infective complications after transrectal prostate biopsy</td>
<td>Nasu Y. 1, Kosaka N. 2, Tanaka D. 1, Sugimoto A. 3, Takamoto A. 3</td>
<td>Okayama Rosai Hospital, Dept. of Urology, Okayama, Japan, Okayama Rosai Hospital, Dept. of Clinical Laboratory, Okayama, Japan, Okayama University Hospital, Dept. of Urology, Okayama, Japan</td>
</tr>
<tr>
<td>235</td>
<td>Efficacy and safety of different dosages of fosfomycin as antimicrobial prophylaxis in transrectal biopsy of the prostate</td>
<td>D'Elia C. 1, Trenti E. 1, Ladurner C. 1, Palermo S. 1, Mian C. 2, Saleh O. 3, Spoladore G. 4, Cai T. 5, Mian P. 4, Pycha A. 1</td>
<td>Bolzano General Hospital, Dept. of Urology, Bolzano, Italy, Bolzano General Hospital, Dept. of Pathology, Bolzano, Italy, University of Florence, Dept. of Urology, Florence, Italy, Bolzano General Hospital, Infectious Diseases, Bolzano, Italy, Santa Chiara Hospital, Dept. of Urology, Trento, Italy</td>
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<td>236</td>
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<td>237</td>
<td>Therapeutic effect of indoleamine 2,3-dioxygenase inhibitor in the prostatitis</td>
<td>Ohira S. 1, Hara R. 1, Tone S. 2, Nagai A. 1&lt;br&gt;1Kawasaki Medical School, Dept. of Urology, Kurashiki, Japan, 2Graduate School of Tokyo Denki University, Dept. of Life Science and Engineering, Kawagoe, Japan</td>
<td></td>
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<td>238</td>
<td>Vaginal discharge and acute cystitis in women. A shift of another paradigm?</td>
<td>Alidjanov J. 1, Pilatz A. 1, Abdufattaev U. 2, Naber K. 3, Wagenlehner F. 1&lt;br&gt;1Justus Liebig University, University Clinic of Giessen and Marburg, Clinic for Urology, Pediatric Urology and Andrology, Giessen, Germany, 2JSC , Dept. of Radiology, Tashkent, Uzbekistan, 3Technical University of Munich, Dept. of Urology, Munich, Germany</td>
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<td>239</td>
<td>Withdrawn</td>
<td>To be confirmed</td>
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<td>240</td>
<td>Comparison of efficacy of intravesical hyaluronic acid alone and in combination with oral chondroitin sulfate in patients with bladder pain syndrome</td>
<td>Aboyan V. 1, Aboyan I. 1, Zip'kovskaya O. 1, Mirkin Y. 2&lt;br&gt;1Clinical-Diagnostic Center, Dept. of Urology, Rostov-on-Don, Russia, 2Medical Corporation, Dept. of Urogynecology, Krasnodar, Russia</td>
<td></td>
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<td>241</td>
<td>Urinary microbiota in premenopausal women with recurrent uncomplicated lower urinary tract infections (2010-2015)</td>
<td>Naboka Y. 1, Kogan M. 2, Gudima I. 1, Dzhalagonia K. 1, Chernitskaya M. 1&lt;br&gt;1Rostov State Medical University, Dept. of Microbiology, Rostov-on-Don, Russia, 2Rostov State Medical University, Dept. of Urology, Rostov-on-Don, Russia</td>
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Summary
R. Veeratterapillay, Newcastle upon Tyne (GB)
Evaluation of LUTS in clinical practice
Poster Session 19

Location: Red Area, Room 2 (Level 0)
Chairs: M. Gacci, Florence (IT)
A. Tubaro, Rome (IT)

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.

242 The discrepancy between European Association of Urology (EAU) guidelines and daily practice in the evaluation of nocturia: Results of a Dutch survey
By: Rahnama'i M.S. 1, Vrijens D. 2, Marcelissen T. 2
1Maastricht University, Dept. of Urology, Maastricht, Netherlands, The, 2Maastricht University Medical Centre, Dept. of Urology, Maastricht, Netherlands, The

243 Nocturnal polyuria and nocturnal blood pressure patterns in male patients with lower urinary tract symptoms
Iwate medical university, Dept. of Urology, Morioka City Iwate, Japan

244 Development of a multivariate prediction model for nocturia, based on the most important etiologies of the urinary tract
By: Roggeman S. 1, Olesen T.K. 2, Denys M-A. 1, Goessaert A-S. 1, Bruneel E. 1, Decalf V. 1, Helleputte T. 3, Gramme P. 3, Everaert K. 1
1UZGent, Dept. of Urology, Ghent, Belgium, 2Ferring Pharmaceuticals, Project and Portfolio Management, Copenhagen, Denmark, 3DNAlytics, Data mining service, Louvain-la-Neuve, Belgium

245 Association of nocturia, sleep disorder, and quality of life in community-dwelling population: Results from Iwaki health promotion project in Japan
By: Imanishi K. 1, Hatakeyama S. 1, Imai A. 1, Matsumoto T. 1, Soma O. 1, Tokui N. 1, Yamamoto H. 1, Yoneyama T. 1, Hashimoto Y. 1, Koie T. 1, Nakaji S. 2, Ohyama C. 1
1Hirosaki University Graduate School of Medicine, Dept. of Urology, Hirosaki, Japan, 2Hirosaki University Graduate School of Medicine, Dept. of Social Medicine, Hirosaki, Japan

246 Survey on lower urinary tract symptoms, sleep disorders, and oxidase stress in community-dwelling population: Results from Iwaki health promotion project in Japan
A 3-day electronic bladder diary as an app for smart-phone: Validation study

By: Mateu Arrom L. 1, Peri L. 2, López-Fando L. 3, Franco A. 2, Jimenez-Cidre M.A. 3, Alcaraz A. 2

1Fundació Puigvert, Dept. of Functional & Female Urology, Barcelona, Spain,
2Hospital Clinic, Dept. of Urology, Barcelona, Spain,
3Hospital Universitario Ramon y Cajal, Dept. of Urology, Madrid, Spain

Is the role of urodynamics prior to intradetrusor botulinum toxin A injections for overactive bladder syndrome justified?

By: Smith P., Clarke L.
Salford Royal NHS Foundation Trust, Dept. of Urology, Salford, United Kingdom

Daily amount of urinary incontinence at the time of catheter removal can strongly predict postoperative urethral function and urinary continence recovery following robot-assisted laparoscopic radical prostatectomy

By: Matsukawa Y., Takai S., Ishida S., Yoshino Y., Kato M., Fuji T., Gotoh M.
Nagoya University Graduate School of Medicine, Dept. of Urology, Nagoya, Japan

The EORTC QLQ-C30 questionnaires predicts early and long-term incontinence in patients treated with robotic radical prostatectomy: Analysis of a large single center cohort

By: De Nunzio C. 1, Pastore A.L. 2, Lombardo R. 1, Carbone A. 2, Fuschi A. 2, Dutto L. 3, Witt J.H. 3, Cancrini F. 1, Tubaro A. 1

1Sant’Andrea Hospital, Sapienza University of Rome, Dept. of Urology, Rome, Italy,
2ICOT Hospital of Latina, Sapienza University of Rome, Dept. of Urology, Latina, Italy,
3St Antonius Hospital Gronau, Dept. of Urology, Pediatric Urology and Urological Oncology, Prostate Cancer Northwest, Gronau, Germany

Preoperative magnetic resonance imaging and clinical parameters for accurate prediction of continence recovery following radical prostatectomy – membranous urethral length measurement on MRI outperform predictive models


1University Hospital Heidelberg, Dept. of Urology, Heidelberg, Germany,
2German Cancer Research Center, Dept. of Radiology, Heidelberg, Germany,
3German Cancer Research...
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<td>252</td>
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<td>253</td>
<td>The diagnostic benefit of flexible cystoscopies in the investigation of recurrent urinary tract infections in women</td>
<td>Ng A., Santoni N., Grenville O., Aboumarzouk O.M., Small D.</td>
<td>Center, Dept. of Biostatistics, Heidelberg, Germany, Heidelberg University, Institute of Pathology, University Medicine Mainz, University Hospital Essen, Dept. of Urology, Essen, Germany</td>
</tr>
<tr>
<td>254</td>
<td>The influence of night time driving to male lower urinary tract symptom on occupational taxi driver</td>
<td>Park J.W., Jung J.S., Bae S.R., Park B.H., Chung H., Lee Y.S., Kang S.H., Kim J.C., Han C.H.</td>
<td>Uijeongbu St. Mary's Hospital, Dept. of Urology, Uijeongbu-Si, Korea, South, Konkuk University, Chungju Hospital, Dept. of Urology, Chungju, Korea, South, Catholic University of Korea, College of Medicine, Uijeongbu St. Mary's Hospital, Dept. of Urology, Uijeongbu-Si, Korea, South</td>
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Prostate cancer research: Androgen receptor and stem cell pathways
Poster Session 20

Location: Red Area, Room 3 (Level 0)

Chairs: J.A. Schalken, Nijmegen (NL)
M. Puhr, Innsbruck (AT)

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.

* 255 Molecular characterization of cancer stem cells from patient derived xenografts of advanced prostate cancer

By: Karkampouna S. 1, De Menna M. 1, Germann M. 2, Grosjean J. 1, Gray P. 3, Thalmann G. 4, Kruithof-De Julio M. 1

1University of Bern, Dept. of Clinical Research, Bern, Switzerland, 2EPFL Lausanne, ISREC, Lausanne, Switzerland, 3Salk Institute, Clayton Foundation Laboratories for Peptide Laboratories, La Jolla, United States of America, 4University Hospital Bern, Dept. of Urology, Bern, Switzerland

256 LIM-SH3 domain protein 1 promotes tumorgenesis in prostate cancer

By: Dejima T. 1, Ario T. 1, Nicholas E. 2, Peter B. 3, Masatoshi E. 1, Martin G. 3, Christopher O. 3

1Kyushu University, Dept. of Urology, Fukuoka, Japan, 2Research and Development, Genome DX Biosciences, Vancouver, Canada, 3The Vancouver Prostate Centre, Dept. of Urologic Sciences, Vancouver, Canada

257 The influence of prostatic anatomy and neurotrophins on basal prostate epithelial progenitor cells

By: Höfner T. 1, Klein C. 2, Haferkamp A. 1, Trumpp A. 2, Sprick M. 2

1University Hospital Mainz, Dept. of Urology, Mainz, Germany, 2Heidelberg Institute for Stem Cell Technology and Experimental Medicine, HI-STEM, Heidelberg, Germany

258 HER3 dimer feedback upregulation via PI3K-AKT-mTOR pathway inhibition leads to androgen receptor (AR) stabilisation in metastatic prostate cancer

By: Galazi M. 1, Weitsman G. 2, Gomez V. 1, Salji M. 3, Leung H. 3, Ng T. 1

1University College London, Dept. of Oncology, London, United Kingdom, 2King's College London, Dept. of Cancer Biology, London, United Kingdom, 3University of Glasgow, Dept. of Prostate Cancer Biology, Glasgow, United Kingdom
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<th>Number</th>
<th>Title</th>
<th>Authors</th>
<th>Institution(s)</th>
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<tr>
<td>259</td>
<td><strong>HMGN5 interacts with Ku70 and regulates DNA double-strand break repair in prostate cancer</strong></td>
<td><strong>By:</strong> He S., Li Y., Wang Z., Zhan Y., Li X., Zhou L.</td>
<td>Peking University First Hospital, Dept. of Urology, Beijing, China</td>
</tr>
<tr>
<td>260</td>
<td><strong>Reprogramming mouse induced pluripotent stem cells (iPSCs) towards cancer stem cells by conditioned medium derived from prostate cancer cells: A model for tracking drug response</strong></td>
<td><strong>To be confirmed</strong></td>
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<tr>
<td>261</td>
<td><strong>Patient-derived multicellular prostate cancer spheroids for in vitro cell culture and drug testing</strong></td>
<td><strong>By:</strong> Linxweiler J., Hammer M., Pryanukhin A., Veith C., Junker K., Stöckle M., Saar M.</td>
<td>Saarland University, Dept. of Urology and Pediatric Urology, Homburg/Saar, Germany, Saarland University, Dept. of General and Surgical Pathology, Homburg/Saar, Germany</td>
</tr>
<tr>
<td>262</td>
<td><strong>Role of FOXM1, CENPF and PARP inhibition in prostate cancer</strong></td>
<td><strong>By:</strong> Farran S., Ruggero K., Martinez A., Aytes A.</td>
<td>IDIBELL - Catalan Institute of Oncology, Prostate Cancer Progression and Resistance group, ProCURE, Barcelona, Spain</td>
</tr>
<tr>
<td>263</td>
<td><strong>Cancer-associated fibroblasts stimulate tumor growth and metastatic spread in an orthotopic prostate cancer xenograft model</strong></td>
<td><strong>By:</strong> Linxweiler J., Hammer M., Körbel C., Müller A., Stöckle M., Menger M., Junker K., Saar M.</td>
<td>Saarland University Medical Center, Dept. of Urology, Homburg/Saar, Germany, Saarland University, Institute for Clinical and Experimental Surgery, Homburg/Saar, Germany, Saarland University Medical Center, Dept. of Radiology, Homburg/Saar, Germany</td>
</tr>
<tr>
<td>264</td>
<td><strong>Low Cand1 expression is associated with reduced prostate cancer growth</strong></td>
<td><strong>By:</strong> Zwick J., Eigentler A., Puhr M., Höfer J., Klocker H., Heidegger I.</td>
<td>Medical University Innsbruck, Dept. of Urology, Innsbruck, Austria</td>
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<td>265</td>
<td><strong>Withdrawn</strong></td>
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**State-of-the-art lecture** **Androgen receptor signaling in prostate cancer progression**

J.A. Schalken, Nijmegen (NL)
**A focus on prostate cancer screening**

**Poster Session 21**

**Saturday 17 March**
**14:15 - 15:45**

**Location:** Blue Area, Room 2 (Level 0)

**Chairs:** A.M. Mizokami, Kanazawa (JP)  
M. Roobol, Rotterdam (NL)  
P. Stattin, Uppsala (SE)

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.

* 266

**Screening and prostate cancer mortality: Results of a unique cohort at 19 years of follow-up**

By: Osses D.¹, Remmers S.², Schröder F.², Van Der Kwast T.³, Roobol M.²
¹Erasmus University Medical Center, Dept. of Urology, Dept. Radiology and Nuclear Medicine, Rotterdam, Netherlands, The, ²Erasmus University Medical Center, Dept. of Urology, Rotterdam, Netherlands, The, ³Erasmus University Medical Center, Dept. of Pathology, Rotterdam, Netherlands, The

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**The German risk-adapted Prostate Cancer Screening Trial (PROBASE): First results after recruitment of 30,000 men**

By: Arsov C.¹, Becker N.², Herkommer K.³, Gschwend J.³, Imkamp F.⁴, Kuczyk M.⁴, Hadaschik B.⁵, Hohenfellner M.⁶, Siener R.⁷, Kristiansen G.⁸, Schimmöller L.⁹, Antoch G.⁹, Albers P.¹
¹University of Düsseldorf, Dept. of Urology, Düsseldorf, Germany, ²German Cancer Research Center, Dept. of Cancer Epidemiology, Heidelberg, Germany, ³Technical University of Munich, Dept. of Urology, Munich, Germany, ⁴Hanover Medical School, Dept. of Urology, Hanover, Germany, ⁵University of Duisburg-Essen, Dept. of Urology, Essen, Germany, ⁶University of Heidelberg, Dept. of Urology, Heidelberg, Germany, ⁷University of Bonn, Dept. of Urology, Bonn, Germany, ⁸University of Bonn, Dept. of Pathology, Bonn, Germany, ⁹University of Düsseldorf, Dept. of Radiology, Düsseldorf, Germany

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**Step-wise increase in high-risk pathological outcomes as a consequence of decreased screening: A population-based analysis**

By: Huynh L., Ranasinghe O., Ahlering T.
University of California, Irvine, Dept. of Urology, Orange, United States of America

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**Unintended consequences of decreased PSA-based prostate cancer screening**

By: Ahlering T.¹, Huynh L.¹, Kaler K.¹, Williams S.², Osann K.³, Joseph J.⁴, Lee D.
Blood glucose balance and disease-specific survival after prostate cancer diagnosis in the Finnish Randomized Study of Prostate Cancer Screening

By: Murtola T. 1, Sälli S. 1, Talala K. 2, Taari K. 3, Tammela T. 4, Auvinen A. 5

1University of Tampere, Faculty of Medicine and Life Sciences, Tampere, Finland, 2Finnish Cancer Registry, Dept. of Statistics, Helsinki, Finland, 3University of Helsinki and Helsinki University Hospital, Dept. of Urology, Helsinki, Finland, 4Tampere University Hospital, Dept. of Urology, Tampere, Finland, 5University of Tampere, Faculty of Social Sciences, Tampere, Finland

Development of prostate specific antigen (PSA) screening nomograms for 15-year prediction of prostate cancer diagnosis (PCDx), mortality (PCM), and all-cause mortality (ACM)

By: Carlsson S. 1, Brooks M. 1, Zajichek A. 2, Chagin K. 2, Hugosson J. 3, Kattan M. 2, Stephenson A. 1

1Cleveland Clinic, Dept. of Urology, Cleveland, United States of America, 2Cleveland Clinic, Dept. of Quantitative Health Sciences, Cleveland, United States of America, 3Sahlgrenska Academy, Dept. of Urology, Gothenburg, Sweden

The association between physician trust and prostate specific antigen screening: Implications for shared decision making

By: Klaassen Z. 1, Wallis C. 1, Goldberg H. 1, Chandrasekar T. 1, Fleshner N. 1, Finelli A. 1, Kulkarni G. 1, Satkunasivam R. 2

1University of Toronto, Princess Margaret Cancer Centre, Dept. of Urology, Toronto, Canada, 2Houston Methodist Hospital, Dept. of Urology, Houston, United States of America

Decision aids for prostate cancer screening choice: A systematic review and meta-analysis

Incidence and survival trends of de-novo metastatic prostate cancer - a population-based analysis of two national cohorts from USA and Denmark

By: Helgstrand J.T. 1, Røder M. 1, Klemann N. 1, Toft B. 2, Lichtensztajn D. 3, Brooks J. 4, Brasso K. 1, Vainer B. 2, Iversen P. 1

1 Copenhagen University Hospital, Dept. of Urology, Copenhagen, Denmark,
2 Copenhagen University Hospital, Dept. of Pathology, Copenhagen, Denmark,
3 Cancer Prevention Institute of California, Dept. of Urology, Fremont Ca, United States of America,
4 Stanford University Hospital, Dept. of Urology, Stanford Ca, United States of America
| 278 | **Withdrawn**  
     | To be confirmed |
| 279 | **Tumor associated neutrophils suppress CD8+ T cells responsiveness through galectin-9/Tim-3 to deteriorate survival in human renal cancer**  
     | To be confirmed |
Advanced assessment of urethral reconstruction and new developing techniques
Poster Session 22

Location: Blue Area, Room 4 (Level 0)
Chairs: L. De Kort, Utrecht (NL)
P. Hoebekke, Ghent (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.

280 Tissue-engineered autologous oral mucosa graft for urethral reconstruction: Results from a national multicentre survey
By: Ram-Liebig G. ¹, Barbagli G. ², Heidenreich A. ³, Fahlenkamp D. ⁴, Romano G. ⁵, Rebmann U. ⁶, Van Ahlen H. ⁷, Schakaki S. ⁷, Balsmeyer U. ⁴, Spiegeler M. ⁸, Knispel H. ⁸, Lazzeri M. ⁹
¹UroTiss Europe, Dept. of Research, Dortmund, Germany, ²Centro Chirurgico Toscano, Dept. of Urethral Reconstruction surgery, Arezzo, Italy, ³University Clinic and Polyclinic, Dept. of Urology, Cologne, Germany, ⁴Zeisigwald Clinics, Dept. of Urology, Chemnitz, Germany, ⁵Hospital of Valdarno, Dept. of Urology, Montevarchi, Italy, ⁶Diakonissen Clinic, Dept. of Urology, Dessau-Roßlau, Germany, ⁷Osnabrück Clinic, Dept. of Urology, Osnabrück, Germany, ⁸St. Hedwig Hospital, Dept. of Urology, Berlin, Germany, ⁹Istituto Clinico Humanitas, Dept. of Urology, Rozzano, Italy

281 Coherence tomography in the diagnosis of the extent of spongiofibrosis for patients with urethral stricture
By: Pavlov V., Izmailov A., Farganov A.R., Buzaev I., Kazihinurov R., Safiullin R. Clinic of Bashkirskiy State Medical University, Dept. of Urology, Ufa, Russia

282 Does testosterone (T) deficiency plays a role in the urethral stricture surgery?
By: Kogan M.I., Amirbekov B., Mitusov V., Glukhov V., Krasulin V., Kruchkova N. Rostov State Medical University, Dept. of Urology, Rostov-on-Don, Russia

283 A comparative study between the bipolar plasma kinetic and the cold-knife for urethrotomy as an endoscopic treatment of urethral strictures
By: Abou Taleb A.A. ¹, Kandil W. ², Sebaey A. ², El Shaer W. ², Galal S. ², Shedeed I. ², Noureldin Y. ²
¹Uropro Medical Center, Cairo, Egypt and Faculty of Medicine, Benha University, Dept. of Urology, Benha, Egypt, ²Faculty of Medicine, Benha University, Dept. of Urology, Benha, Egypt
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<td>A novel experimental study to establish a myoblasts differentiated cell sheet using induced adipose-derived stem cell technology</td>
<td>Qiang F. Shanghai Sixth People's Hospital, Dept. of Urology, Shanghai, China</td>
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<td>285</td>
<td>Gel casting as an approach for tissue engineering of multilayered tubular structures: Application for urethral reconstruction</td>
<td>Van Velthoven M. 1, Ramadan R. 1, Klotz B. 2, Gawlitta D. 2, Castilho M. 3, Malda J. 3, Costa P. 3, De Kort L. 1, De Graaf P. 1</td>
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<td>286</td>
<td>Surgical management for symptom control of male genital lymphoedema: An algorithm to aid clinical decision making</td>
<td>Mahesan T. 1, Yan S. 1, Gordon K. 2, Mortimer P. 2, Corbishley C. 3, Soldin M. 4, Ayres B. 1, Watkin N. 1</td>
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<td>287</td>
<td>Reconstructive surgery for penoscrotal filarial lymphedema: A decade of experience and follow-up with special emphasis on sexual function</td>
<td>Sinha R.J., Singh V., Patel R. King George Medical University, Dept. of Urology, Lucknow, India</td>
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<td>288</td>
<td>Urethrovaginal fistula: Aetiology, management and outcomes</td>
<td>Barratt R., Kotes S., Pakzad M., Hamid R., Ockrim J., Greenwell T. University College London Hospital, Dept. of Urology, London, United Kingdom</td>
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<td>289</td>
<td>A critical analysis of the management of recurrence after bulbar urethroplasty</td>
<td>Kahokehr A., Granieri M., Webster G., Peterson A. Duke University Medical Center, Dept. of Urology, Durham, United States of America</td>
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<td>Dual-layer urethroplasty with spongiosum and ventral dartos flap hypospadias repair: Description of surgical technique and report of fistula, dehiscence, and meatal stenosis rate at 1 year follow up</td>
<td>Neheman A. 1, Levitt M. 1, Darawasha A.E. 2, Nasseri R. 1, Zisman A. 1</td>
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<td>Assaf Harofeh Medical Center, Dept. of Urology, Tzrifin, Israel, Meir Medical Center, Dept. of Urology, Kefar Sava, Israel</td>
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<td>291</td>
<td>Genital reconstructive surgery in male to female transexuals: A systematic review of primary surgical techniques, complications and functional outcomes from 1950 to present day</td>
<td>Dunford C., Bell K., Rashid T.</td>
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<td>Late complications after hypospadias repair in childhood</td>
<td>Bizic M.(^1), Stojanovic B.(^1), Kojovic V.(^1), Bencic M.(^1), Korac G.(^2), Djordjevic M.(^1)</td>
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<td>Cosmetic and functional outcome for the use of stitch by stitch technique in hypospadias surgery: Results of 235 patients</td>
<td>El-Moghazy H.</td>
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<td>Can we achieve satisfaction in adult hypospadias surgery?</td>
<td>Dockray J., Rees R.</td>
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Renal cancer: Improved characterisation with imaging and pathology

Poster Session 23

Location: Blue Area, Room 5 (Level 0)

Chairs: J. Carballido Rodriguez, Madrid (ES)
        A. Larcher, Milan (IT)
        K.A. Mohd Ghani, Kuala Lumpur (MY)

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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Occupation and malignant neoplasm of the kidney: 85,962 cases from five Nordic countries

By: Michalek I.M. ¹, Martinsen J.I. ², Weiderpass E. ², Kjaerheim K. ², Lynege E. ³, Sparen P. ⁴, Tryggvadottir L. ⁵, Pukkala E. ⁶
¹University of Tampere, Faculty of Social Sciences, Tampere, Finland, ²Cancer Registry of Norway, Institute of Population-Based Cancer Research, Dept. of Research, Oslo, Norway, ³University of Copenhagen, Center for Epidemiology and Screening, Institute of Public Health, Copenhagen, Denmark, ⁴Karolinska Institutet, Dept. of Medical Epidemiology and Biostatistics, Stockholm, Sweden, ⁵Icelandic Cancer Registry, Faculty of Medicine, Reykjavik, Iceland, ⁶Finnish Cancer Registry, Institute for Statistical and Epidemiological Cancer Research, Helsinki, Finland

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Cost benefit analysis favors sonographic screening for renal tumors

By: Roizman S. ¹, Leshno M. ², Haifler M. ¹, Rappaport Y.H. ¹, Haifler M. ¹, Hode Rappaport Y. ¹, Zisman A. ¹
¹Shamir Medical Center, Dept. of Urology, Zerifin, Israel, ²Tel-Aviv University, Recanati School of Management, Tel-Aviv, Israel

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Computer-aided differential diagnosis of fat-poor angiomyolipoma using a deep neural networks algorithm in enhanced CT and T2-weighted magnetic resonance imaging

Tokyo Medical and Dental University Graduate School, Dept. of Urology, Tokyo, Japan

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Comparison between 68Ga-labelled PSMA and 18F-FDG PET/CT in the diagnostic value of clear cell renal cell carcinoma

By: Zhao X. ¹, Zhang C. ¹, Yu H. ¹, Zang S. ², Wang F. ², Guo H. ¹
¹Nanjing Drum Tower Hospital, Dept. of Urology, Nanjing, China, ²Nanjing First Hospital, Dept. of Nuclear Medicine, Nanjing, China
MR Spectroscopy distinguishes histologically-diagnosed kidney tissue

By: Del Vecchio S.1, Urquhart A.2, Krause L.3, Ellis R.1, Ng K.4, Samaratunga H.5, Gustafson S.6, Galloway G.2, Gobe G.1, Wood S.4, Mountford C.2
1UQDI Translational Research Institute (TRI)/Princess Alexandra Hospital (PAH), Kidney Disease Research, Brisbane, Australia, 2TRI, Diagnostic Imaging Program, Brisbane, Australia, 3TRI, UQDI Computational Medical Genomics Group, Brisbane, Australia, 4PAH, Dept. of Urology, Brisbane, Australia, 5Acquesta Pathology, Dept. of Pathology, Brisbane, Australia, 6PAH, Dept. of Radiology, Brisbane, Australia

U-SMART: (UCSD small mass ALT RENAL score tumor diameter) A novel scoring system of preoperative predictors to stratify oncologic risk of small renal masses

By: Yim K.1, Bindayi A.1, Ryan S.1, Reddy M.1, Nasseri R.1, Hamilton Z.2, Derweesh I.1
1University of California, San Diego School of Medicine, Dept. of Urology, San Diego, United States of America, 2St. Louis University School of Medicine, Dept. of Urology, St. Louis, United States of America

Routine renal mass biopsy in diagnosis of renal cancer

By: Tanabalan C., Neves J., Patki P., Ramachandran N., Grant L., Walkden M., Aitchison M., Tran M., Barod R.
Royal Free Hospital, Specialist Centre for Kidney Cancer, London, United Kingdom

Growth kinetics of small renal mass: Initial analysis of active surveillance registry

By: Park S-W.1, Lee J.W.1, Lee D.H.1, Nam J.K.1, Kim T.N.2, Park H.J.2, Chung M.K.1
1Pusan National University Yangsan Hospital, Dept. of Urology, Yangsan, Korea, South, 2Pusan National University Hospital, Dept. of Urology, Pusan, Korea, South

Dividing pathologically upstaged T3a renal cell carcinoma is associated with improved alignment of outcomes: A call for TMN revision

By: Hamilton Z1, Capitanio U2, Pruthi D.3, Liss M.3, Bindayi A.1, Larcher A.2, Ryan S.1, Reddy M.1, Yim K.1, Bloch A.1, Field C.1, Berquist S.1, Ballon-Landa E.1, Montorsi F.2, Derweesh I.4
1University of California, Dept. of Urology, San Diego, United States of America, 2San Raffaele Scientific Institute, Dept. of Urology, Milan, Italy, 3University of Texas, Dept. of Urology, San Antonio, United States of America, 4Moores Cancer Center, Dept. of Urology, La Jolla, Afghanistan

Contrast media enhancement reduction predicts tumor response to presurgical molecular-targeting therapy in patients with advanced renal cell carcinoma

Hirosaki University Graduate School of Medicine, Dept. of Urology, Hirosaki, Japan
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Related parameters of pulmonary metastasis in localized renal cell carcinoma patients with pulmonary nodules

By: Ku J.Y. 1, Lee C.H. 2, Kim K.H. 1, Baek S.R. 1, Park J.H. 1, Kang B.J. 1, Park W.Y. 3, Lee N.K. 4, Park H.J. 1, Kwon M.J. 1, Ha H.K. 1

1Pusan National University Hospital, Dept. of Urology, Busan, Korea, South, 2Busan Paik Hospital, Dept. of Urology, Busan, Korea, South, 3Pusan National University Hospital, Dept. of Pathology, Busan, Korea, South, 4Pusan National University Hospital, Dept. of Radiology, Busan, Korea, South

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Vascular expression of prostate-specific membrane antigen in renal tumors: Diagnostic and prognostic role


1University Hospital Bonn, Dept. of Pathology, Bonn, Germany, 2University Hospital Bonn, Dept. of Urology, Bonn, Germany, 3Charité - Universitätsmedizin Berlin, Dept. of Urology, Berlin, Germany, 4University Hospital Bonn, Dept. of Internal Medicine, Bonn, Germany, 5University Hospital Bonn, Dept. of Nuclear Medicine, Bonn, Germany

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Relationships between serum levels of acute phase reactants and molecular biological characteristics including intra-tumoural immune cells densities in renal cell carcinoma

By: Miyata Y., Sagara Y., Nakamura Y., Yasuda T., Tomohiro M., Ohba K., Mochizuki Y., Sakai H.

Nagasaki University Graduate School of Biomedical Sciences, Dept. of Urology, Nagasaki, Japan

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The role of histologic subtypes in follow-up scheme of postsurgical kidney cancer patients

By: Nini A. 1, Cianflone F. 2, Lucianò R. 3, Larcher A. 1, Carenzi C. 1, Cazzaniga W. 1, Mattoo R. 1, Montorsi F. 1, Doglioni C. 3, Gianolli L. 4, Rigatti P. 1, De Cobelli F. 5, Del Maschio A. 5, Gandaglia G. 1, Briganti A. 1, Salonia A. 1, Picchio M. 4, Freschi M. 3, Nicoletti R. 5, Capitanio U. 1, Bertini R. 1

1University Vita-Salute San Raffaele, IRCCS San Raffaele Scientific Institute, Milan, Italy, Unit of Urology, Milan, Italy, 2University Vita-Salute San Raffaele, URI, IRCCS San Raffaele Scientific Institute, Milan, Italy, Unit of Urology, Milan, Italy, 3University Vita-Salute San Raffaele, IRCCS San Raffaele Scientific Institute, Milan, Italy, Unit of Pathology, Milan, Italy, 4University Vita-Salute San Raffaele, IRCCS San Raffaele Scientific Institute, Milan, Italy, Unit of Nuclear Medicine, Milan, Italy, 5University Vita-Salute San Raffaele, IRCCS San Raffaele Scientific Institute, Milan, Italy, Unit of Radiology, Milan, Italy

Summary

J. Carballido Rodriguez, Madrid (ES)
Surgical correction of urorectal fistula (URF) following radical prostatectomy for the treatment of prostate cancer

By: Fes Ascanio E.A. ¹, Bugeja S. ², Ivaz S. ³, Frost A. ³, Campos F. ⁴, Andrich D. ³, Mundy A. ³
¹Hospital Can Misses, Dept. of Urology, Ibiza, 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

Robotic lingual mucosal onlay graft ureteroplasty for proximal ureteral stricture

By: Beysens M., De Groote R., Van Haute C., Tailly T., Lumen N., Decaestecker K.
University Hospital Ghent, Dept. of Urology, Ghent, Belgium

Transnephrostomic ICG guided robotic ureteral reimplantation for ureteroileal strictures after robotic cystectomy and neobladder

By: Simone G. ¹, Tuderti G. ¹, Misuraca L. ¹, Ferriero M. ¹, Vallati G. ², Minisola F. ¹, Guaglianone S. ¹, Gallucci M. ¹
¹Regina Elena National Cancer Institute, Dept. of Urology, Rome, Italy, ²Regina Elena National Cancer Institute, Dept. of Radiology, Rome, Italy

Pedicled preputial tube urethroplasty for bulbar urethral necrosis after failed anastomotic urethroplasty for pelvic fracture urethral distraction defects

By: Kulkarni S., Joshi P., Surana S., Kulkarni J., Joglekar O., Alkandari M.
Kulkarni Reconstructive Urology Center, Dept. of Reconstructive Urology, Pune, India

Excision and primary anastomosis for bulbar strictures has a major positive impact on functional outcomes and quality of life: Surgical technique and a prospective analysis from a single center

By: D’Hulst P., Floyd M.S.Jr., Castiglione F., Vander Eeckt K., Van Der Aa F., Joniau
### V29

**Urethral reconstruction using tissue-engineered oral mucosa graft MukoCell® in onlay technique**

By: Akbarov I., Karapanos L., Zugor V., Heidenreich A.
University Hospital of Cologne, Dept. of Urology, Uro-Oncology and robot-assisted Surgery, Cologne, Germany

### V30

**Intraoperative evaluation of retrograde leak point pressure (RLPP) during robotic assisted radical prostatectomy (RALP) for proper autologous sling tensioning to improve early urinary continence (EUC): The technique**

By: Mittino I., Zanni G., Sangalli M., Ghezzi M., Fabbri F., Sozzi F., Cestari A.
Istituto Auxologico Italiano, Dept. of Urology, Milan, Italy

### V31

**Hybrid repair for vaginal vault prolapse: 2 years' follow-up**

By: Kubin N.¹, Shkarupa D.¹, Shapovalova E.², Zaytseva A.¹, Staroseltseva O.¹
¹University Clinic of Saint-Petersburg State University, Dept. of Urology, Saint-Petersburg, Russia, ²University Clinic of Saint-Petersburg State University, Dept. of Gynecology, Saint-Petersburg, Russia
Prostate cancer screening and active surveillance – Where are we now?
ESU Course 10

Saturday 17 March
14:30 - 17:30

Location: Orange Area, Room 1 (Level 0)
Chair: A.R. Zlotta, Toronto (CA)

Aims and objectives of this session
• Prostate cancer is a global public health concern. While large randomized trials have shown a reduction in prostate cancer mortality with regular prostate-specific antigen (PSA) screening, there is potential for negative effects from over-diagnosis and treatment, making screening a controversial topic. This course will provide an overview of the evidence of both benefits and harm from the randomized trials as well as data from epidemiological studies illustrating the global incidence and mortality trends.
• Today’s challenges include the age when to start screening, screening intervals and the optimal use of "smarter screening". This course will cover the EAU-ESTRO-SIOG guidelines and other risk-stratified approaches to screening based on age, health and PSA-values, family history, ethnicity and genetic risk.
• Active surveillance (AS) 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. Several AS studies have consistently shown a low rate of progression to metastatic disease or death from prostate cancer with AS, with the majority of patients remaining free from definitive therapy for many years.
• Clinical and pathological factors influencing the risk of disease progression in patients with low risk prostate cancer under AS, surveillance strategy, role of repeat biopsy, inclusion criteria, and the use of MRI will be discussed.
• The course will be interactive and include illustrative and practical clinical case discussions.

Who, when, and how often to screen and when to stop? An illustrated risk-adapted strategy
S. Carlsson, New York (US)

Active surveillance
A.R. Zlotta, Toronto (CA)
Aims and objectives of this session

Congenital anomalies of the external genitalia are an important topic for the urologist and paediatric urologist. A child born with a disorder of sexual differentiation is a physical and psychological emergency. It requires the knowledge of the pathophysiology of the most frequent causes and the subsequent diagnostic and treatment decision tree. Together with a team of paediatricians, psychologists, geneticists, the (paediatric) urologist must be able to explain the condition to the parents in a way that they can choose the best option for their child. The external genitalia of a child will evolve from a social and voiding tool to an erotic and reproduction tool during puberty and adolescence. Again, the (paediatric) urologist should be aware of possible problems and accompany the child and their parents during that process.

After this course, the attendant will be able:
• to identify the most common causes of sexual differentiation (DSD) and know how to handle in the neonatal period.
• to diagnose and how to treat the most common congenital and acquired problems of the external genitalia.
• the normal development of the sexual function and fertility during puberty and adolescence, as well as possible problems due to congenital or acquired pathology.

Disorders of sex development
C. Radmayr, Innsbruck (AT)

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)

Congenital and acquired pathology of the external genitalia
B. Burgu, Ankara (TR)

Discussion
Management of BPO: From medical to surgical treatment, including setbacks and operative solutions (SOS)

ESU Course 12

Saturday 17 March
14:30 - 17:30

Location: Orange Area, Room 3 (Level 0)
Chair: V.A.C. Ramani, Manchester (GB)

Aims and objectives of this session
• To help delegates understand the principles and evidence behind the assessment and medical management of a BPO patient
• To summarise / review the evidence base for electro surgery and lasers for surgical management of BPO
• To help delegates understand the factors that influence the patient’s and surgeon’s choice of treatment modalities
• Setbacks and Operative Solutions (SOS): Tips and Tricks to improve outcomes and avoid complications

Introduction/scene setting BPO 2018
V.A.C. Ramani, Manchester (GB)

Assessment and medical management
V.A.C. Ramani, Manchester (GB)

Surgical management – Electrosurgery
T.R.W. Herrmann, Hanover (DE)

Surgical management – Lasers and less invasive options
S. Ahyai, Göttingen (DE)

Setbacks and operative solutions / Case presentations
S. Ahyai, Göttingen (DE)
T.R.W. Herrmann, Hanover (DE)
V.A.C. Ramani, Manchester (GB)
Aims and objectives of this session
Trauma is a leading cause of death and morbidity in civilian populations. All Urologists will have to manage trauma patients and need to understand basic principles. The EAU Guidelines Group prepare guidelines in order to assist in the management of urological trauma and these principles will be followed for the specific organ systems and in the context of polytrauma.

- Urological trauma is usually associated with other injuries. The role of the urologist in polytrauma is important to understand.
- Modern diagnostic imaging and interventional radiology techniques has resulted in a greater understanding of organ injury and treatment.
- Increasing use is made of non-operative or delayed surgical intervention with a resulting higher rate of organ preservation.
- Minimising long term morbidity is an important role for injuries that are usually not life threatening.

Introduction
N. Lumen, Ghent (BE)

General trauma considerations
D.M. Sharma, London (GB)

Renal trauma
N. Lumen, Ghent (BE)

Ureteral trauma
D.M. Sharma, London (GB)

Bladder trauma
N. Lumen, Ghent (BE)

Urethral trauma
D.M. Sharma, London (GB)

Genital trauma
N. Lumen, Ghent (BE)
Aims and objectives of this session
In many parts of Europe, open retropubic radical prostatectomy is still the gold standard for treating localised prostate cancer. The competition with radiotherapy and novel techniques like cryosurgery and HIFU, should encourage urologists to optimally perform the surgical resection. This teaching course is a must for the elder resident and the younger urologist but well trained urologists who do not treat many patients with localised prostate cancer, will benefit.

Introduction
H. Van Poppel, Leuven (BE)

Surgical anatomy
O. Hakenberg, Rostock (DE)

Step by step radical retropubic prostatectomy
H. Van Poppel, Leuven (BE)

Tips, tricks and pitfalls
O. Hakenberg, Rostock (DE)

Treatment of complications
H. Van Poppel, Leuven (BE)

Discussion and interaction
## Practical management of non-muscle invasive bladder cancer (NMIBC)

### ESU Course 15

**Location:** Orange Area, Room 6 (Level 0)

**Chair:** J.A. Witjes, Nijmegen (NL)

### Aims and objectives of this session

This course was made more practical in 2016 with more cases, many video’s regarding TUR techniques and problems, to obtain optimal interaction with the audience. Both the 2016 and 2017 evaluation were very positive by the participants. Therefore, we chose to keep the subjects unchanged in 2018 with obvious updates where needed.

After discussing diagnostic opportunities of NMIBC, we will spent considerable time on the technique of TUR, including tips, potential problems, en bloc resection, TUR in difficult situations and TUR with enhanced imaging. We will illustrate this with video’s and discuss pitfalls with the audience.

Additional risk adapted intravesical treatment including new modalities, including limitations of these recommendations, will be discussed next. After that, we will discuss daily problems with regard to complications during and after intravesical therapy and how to prevent and treat that. Finally a topic that remains a clinical problem remains on the program: how to deal with abnormal cytology including locations outside the bladder.

Since we try to keep the course as practical in interactive as possible we experienced lively discussions and interaction in London in 2017. This might imply that we might not cover all topics as planned in the program. Our goal is 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.

### Introduction

J.A. Witjes, Nijmegen (NL)

### Diagnosis, markers and innovations, no video’s on PDD, NBI etc.

J. Palou, Barcelona (ES)

### TUR technique: Tips and tricks; problems; En bloc resection; TUR and the location, including diverticula, ureteral meatus; Re-TUR; PDD, SPIES, NBI etc.: With several cases and video’s

M. Babjuk, Prague (CZ)

### Complications during surgery and what to do: Obturator nerve contraction, intra and extraperitoneal perforation, bleeding etc.

J. Palou, Barcelona (ES)

### Risk groups and guideline treatment: What is clearly established

J.A. Witjes, Nijmegen (NL)

### Comments on guideline treatment including BCG shortage and new treatment modalities

M. Babjuk, Prague (CZ)
<table>
<thead>
<tr>
<th>Complications of intravesical therapy, including case</th>
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<tr>
<td>J.A. Witjes, Nijmegen (NL)</td>
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<tr>
<th>How to deal with abnormal cytology including locations outside the bladder (UUT and urethra) and its limitations</th>
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<td>J. Palou, Barcelona (ES)</td>
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</table>
Lymphadenectomy in urological malignancies
ESU Course 16

**Location:** Orange Area, Room 7 (Level 0)

**Chair:** A. Mattei, Luzern (CH)

**Aims and objectives of this session**
Mostly, in case of tumour surgery, a loco-regional lymph node (LND) dissection is also indicated.
With the introduction of minimal invasive surgery the LND often seems to have lost the attention of the surgeons and has been practiced in less cases and/or less extensively.
Throughout our presentation we will corroborate the indications when a LND has to be performed, the templates, the techniques using different approaches, and the oncological as well as functional outcomes.

After attending this course, participants should be able to:
• Know the indication when to perform LND during surgery for urological malignancies.
• Apply the most modern imaging concepts for the preoperative lymph node staging.
• Have solid knowledge about the templates that have to be removed.
• Be informed concerning the oncological and functional results of lymph node dissection as well as complications.

**Prostate and urothelial cancers**
A. Mattei, Luzern (CH)

**Testicular cancer**
J. Sheinfeld, New York (US)

**Renal and penile cancers**
U. Capitanio, Milan (IT)
ESU/ESUI Hands-on Training Course in Prostate MRI reading for urologists
HOT 15

Location: Yellow Area, Room 4 (Level 0)
Chair: J. Walz, Marseille (FR)
Tutors: To be confirmed
J.J. Futterer, Nijmegen (NL)
V. Panebianco, Rome (IT)
E. Barret, Paris (FR)
Aims and objectives of this session
This course will provide interactive teaching from expert Faculty in prostate MRI reading and interpretation and help Urologists to understand the role MRI plays in the management of patients with prostate cancer and how to use the information generated by prostate MRI. The course will address how to use an imaging workstation, how to understand the basic concepts/principles behind different MRI sequences (T2-weighted imaging, DWI-imaging and DCE-imaging), in which order to view the different sequences when interpreting prostate MRI, how to use the PI-RADS and Likert scoring system to score MRIs, and finally to understand what are the standards for a prostate MRI and what quality criteria need to be fulfilled. The participants will do hands on reading and assessment of prostate MRI scans on their own laptops followed by a reference reading provided by expert radiologists and pathological verification.
**ESU Hands-on Training Course in Non-technical skills in surgery**
Sponsored by ROCHE

**Location:** Yellow Area, Iglo

**Chairs:** To be confirmed
K. Ahmed, London (GB)

**Tutors:** To be confirmed
To be confirmed
To be confirmed
To be confirmed
To be confirmed
To be confirmed
To be confirmed
To be confirmed

**Aims and objectives of this session**
The operating room is a complex and highly stressful environment that requires interaction between a large team to achieve successful outcomes for the patients. This requires not only effective procedure-specific technical skills, but also additionally a range of non-technical skills. Non-technical skills are defined as skills unrelated to the technical completion of surgical procedures. They include decision-making, team-working, communication and leadership skills.

The importance of non-technical skills is often overlooked but they are unfortunately a major cause of surgical error. Like technical skills, which are acquired over many years of practice and training, non-technical skills are not innate traits and must also be developed through training and experience.

This course will serve to introduce practicing urologists to the concept of non-technical skills using an interactive full immersion simulation environment, developed at Imperial College London, whilst undertaking common scenarios in endoscopic urological surgery. Participants will be evaluated by experts in surgical education and provided individual feedback with view for further self-improvement.

**Supporting faculty:**
N. Raison, London (GB)
A. Aydin, London (GB)
N. Khan, London (GB)
C. Lovegrove, Perth (GB)
ESU/ESFFU Hands-on Training Course in OnabotulinumtoxinA administration for OAB
Sponsored by ALLERGAN

Saturday 17 March
15:30 - 17:00

Location: Yellow Area, Room 1 (Level 0)

Chair: H. Hashim, Bristol (GB)
Tutors: M. Belal, Birmingham (GB)
        M.S. Rahnama’i, Maastricht (NL)
        A. Garcia Mora, Mexico City (MX)

Aims and objectives of this session
Botulinum toxin type A administration in Urology has become common practice over the last two decades. Following the completion of Phase 3 registration trials in OAB, OnabotulinumtoxinA received marketing approval for this indication and now has a standardised injection paradigm. This workshop 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.
ESU/ERUS Hands-on Training Course in Robotic surgery - Introduction
Sponsored by 3D SYSTEMS SIMBIONIX, MIMIC, INTUITIVE SURGICAL

Location: Yellow Area, Room 5 (Level 0)
Chair: J. Poulsen, Aalborg (DK)
Tutor: A. Ploumidis, Athens (GR)

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

Improve your robotic surgery skills in the following areas:
• Endowrist manipulation
• Camera Control
• 3rd Arm Control
• Needle Placement and Driving
• Suturing and Knot Tying
Leave no stone unturned - research on stone formation
Poster Session 24

Saturday 17 March
16:00 - 17:30

Location: Green Area, Room 1 (Level 0)
Chairs: G. Gambaro, Rome (IT)
        C. Netsch, Hamburg (DE)
        J.P. Haymann, Paris (FR)

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.

To be confirmed

310 Detailed metabolic evaluation in primary stone formers: Is it recommended? Comparing detailed metabolic evaluation outcome between primary and recurrent stone formers
By: Vincent P., Konanki V., Ravichandran R.
Meenakshi Mission Hospital & Research Centre, Dept. of Urology, Madurai, India

311 Withdrawn
To be confirmed

313 Erythropoietin receptor signaling pathway in ureteral obstruction
To be confirmed

314 The mechanism of diabetes mellitus-induced ureteral smooth muscle cell proliferation using a murine model
By: Taesoo C.¹, Kim Y.B.¹, Lee Y.², Jeon S.H.¹, Lee S-J.¹, Lee H-L.¹, Yoo K.H.¹
¹Kyung Hee University School of Medicine, Dept. of Urology, Seoul, Korea, South
²Community Health Center of Jeongsan, Dept. of Urology, Cheongyang-gun, Korea, South

315 Withdrawn
To be confirmed

316 Withdrawn
To be confirmed

317 Osteopontin antibody in the suppression of kidney crystal formation in a mice model of metabolic syndrome
By: Sugino T.¹, Taguchi K.¹, Unno R.¹, Tanaka Y.¹, Hamamoto S.¹, Ando R.¹,
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<th>ID</th>
<th>Title</th>
<th>Authors</th>
<th>Institutions</th>
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<tr>
<td>318</td>
<td>Inhibiting inflammation and modulating oxidative stress in oxalate induced nephrolithiasis with the Nrf2 activator dimethyl fumarate</td>
<td>Okada A., Mogami T., Tozawa K., Kohri K., Yasui T.</td>
<td>Nagoya City University Graduate School of Medical Sciences, Dept. of Nephro-Urology, Nagoya, Japan, JA Mie Komono Kosei Hospital, Dept. of Urology, Komono, Japan</td>
</tr>
<tr>
<td>319</td>
<td>β3-adrenergic receptor agonist prevents kidney stone formation by suppressing inflammatory adipocytokine expression and improving antioxidant action</td>
<td>Sugino T., Taguchi K., Tanaka Y., Unno R., Hamamoto S., Ando R., Okada A., Mogami T., Kohri K., Yasui T.</td>
<td>Nagoya City University Graduate School of Medical Sciences, Dept. of Nephro-Urology, Nagoya, Japan, JA Mie Komono Kosei Hospital, Dept. of Urology, Komono, Japan</td>
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<tr>
<td>320</td>
<td>High concentration calcium induces the transdifferentiation of rat kidney tubular epithelial cells to osteoblast-like cells via inhibiting matrix Gla protein</td>
<td>Wang Q., Wang S., Lu Y., Hu H., Zhang J.</td>
<td>Tongji Hospital, Tongji Medical College, Huazhong University of Science and Technology, Dept. of Urology, Wuhan, China</td>
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<td>321</td>
<td>Relationship of endoscopic lesions of the renal papilla with type of renal stone and 24h urine chemistry</td>
<td>Sabaté Arroyo X.A., Pieras Ayala E.C., Grases Freixedas F., Tubau Vidaña V., Bauzà Quetglas J.L., Guimerá García J., Pizá Reus P.</td>
<td>Hospital Universitari Son Espases, Dept. of Urology, Palma de Mallorca, Spain, Universitat De Les Illes Balears, Laboratory of Kidney Stone Research, University Institute of Health Science Research (IUNICS-IldISPa), Palma de Mallorca, Spain</td>
</tr>
<tr>
<td>322</td>
<td>Discovery of a novel gene expression profile of renal papilla including Randall’s plaque from calcium phosphate over calcium oxalate stone formers</td>
<td>Taguchi K., Hamamoto S., Tanaka Y., Sugino T., Unno R., Ando R., Okada A., Kohri K., Yasui T.</td>
<td>Nagoya City University Graduate School of Medical Sciences, Dept. of Nephro-Urology, Nagoya, Japan</td>
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<tr>
<td>323</td>
<td>Raman spectroscopy analysis of urolithiasis composition in biological environments: Feasibility study and preliminary results</td>
<td>Pradere B., Lucas I., Abi Haidar D., Doizi S., Daudon M., Traxer O.</td>
<td>CHU Tours, Dept. of Urology, Tours, France, LISE laboratory, UMR 8235, Paris,</td>
</tr>
</tbody>
</table>
Comparison of potassium citrate, citric acid and placebo on calcium phosphate stones recurrence: Preliminary results

By: Doizi S., Poindexter J., Pearle M., Sakhaee K., Maalouf N.
University of Texas Southwestern Medical Center, Center for Mineral Metabolism and Clinical Research, Dallas, United States of America
**324**

**SOFA and quick SOFA are more clinically useful scoring systems than SIRS in predicting mortality of patients with acute pyelonephritis associated with upper urinary tract calculi**

By: Fukushima H., Kobayashi M., Kawano K., Morimoto S.
Tsuchiura Kyodo General Hospital, Dept. of Urology, Ibaraki, Japan

**325**

**PCNL SIRS risk increasing in patients with positive stone culture and sub-optimal renal drainage**

By: Bolomytis S., 1 Harding R., 2 Timoney A., 2 Keeley F., 2 Jacobson K., 3 Collin N., 4 Philip J., 2
1Bristol Urological Institute, Dept. of Urology, Bristol, United Kingdom, 2Bristol Urological Institute, Dept. of Urology, Bristol, United Kingdom, 3Southmead Hospital, Dept. of Microbiology, Bristol, United Kingdom, 4Southmead Hospital, Dept. of Radiology, Bristol, United Kingdom

**326**

**Mortality due to obstructive pyelonephritis with urolithiasis depends on case volume: Analysis of 719 cases from Japanese national series**

By: Kamei J., 1 Sugihara T., 2 Yasunaga H., 3 Matsui H., 3 Fushimi K., 4 Homma Y., 5 Kume H., 1
1The University of Tokyo Hospital, Dept. of Urology, Tokyo, Japan, 2Tokyo Metropolitan Tama Medical Center, Dept. of Urology, Tokyo, Japan, 3School of Public Health, The University of Tokyo, Dept. of Clinical Epidemiology and Health Economics, Tokyo, Japan, 4Tokyo Medical and Dental University, Dept. of Health Care Informatics, Tokyo, Japan, 5Japan Red Cross Medical Center, Dept. of Urology, Tokyo, Japan

**327**

**Lower performance status is a risk factor for sepsis of patients with acute pyelonephritis associated with upper urinary tract calculi in the Sepsis-3 era**

By: Fukushima H., Kobayashi M., Kawano K., Morimoto S.
Tsuchiura Kyodo General Hospital, Dept. of Urology, Ibaraki, Japan
Effects of stone characteristics, operation findings and laboratory findings on postoperative SIRS in patients undergoing PNL

By: Çelik S., Bozkurt I.H., Degirmenci T., Yonguc T., Sefik E., Basmaci I., Dincel C. Bozyaka Education and Research Hospital., Dept. of Urology, Izmir, Turkey

The impact of acute kidney injury on prognosis in patients with urological sepsis

By: Fujita N., Hatakeyama Y., Tobisawa Y., Yoneyama T., Yamamoto H., Imai A., Yoneyama T., Hashimoto Y., Koie T., Yoshikawa K., Ohyama C.

1Hirosaki university, Dept. of Urology, Hirosaki, Japan, 2Mutsu general hospital, Dept. of Urology, Mutsu, Japan

Predictors of success of conservative management of emphysematous pyelonephritis (EPN)


Urology and Nephrology Center, Dept. of Urology, Mansoura, Egypt

Clinical, biochemical and microbiological determinants in the clinical course of patients with emphysematous pyelonephritis: A case series of 43 patients in a single hospital in Mexico


Centro Medico Lic. Adolfo Lopez Mateos. ISEM, Dept. of Urology, Toluca, Mexico

Is pain intensity a good criterion to select women with pyelonephritis requiring an initial imaging assessment?


1University of Rennes, Dept. of Urology, Rennes, France, 2University of Rennes, Dept. of Emergency Medicine, Rennes, France, 3University of Rennes, Dept. of Infectious Diseases, Rennes, France, 4University of Rennes, Dept. of Radiology, Rennes, France, 5University of Rennes, Dept. of General Medicine, Rennes, France

Intestinal barrier dysfunction in hyperoxaluria women with recurrent pyelonephritis

By: Stepanova N., Tolstanova G., Sergiychuk T., Akulenko I.

1Institute of Nephrology of the National Academy of Medical Sciences, Dept. of Nephrology and Dialysis, Kyiv, Ukraine, 2Taras Shevchenko National University of Kyiv, Educational and Scientific Center, Kyiv, Ukraine

Acute obstructive pyelonephritis can be caused by E. coli at ≤104 bacteriuria level (experimental model)

By: Kogan M., Maslyakova G., Napsheva A., Bedjanian S., Pasechnik D.
Naboka Y. ³, Gudima I. ³
¹Rostov State Medical University, Dept. of Urology, Rostov-on-Don, Russia, ²Saratov State Medical University, Dept. of Pathological Anatomy, Saratov, Russia, ³Rostov State Medical University, Dept. of Microbiology, Rostov-on-Don, Russia

Is there a relationship between the microbiota of urine and intestines in patients with acute obstructive pyelonephritis?

By: Naboka Y.¹, Kogan M. ², Gudima I. ¹, Mitusova E. ², Bedjanian S. ², Ivanov S. ¹
¹Rostov State Medical University, Dept. of Microbiology, Rostov-on-Don, Russia, ²Rostov State Medical University, Dept. of Urology, Rostov-On-Don, Russia

Clinical relevance of the bacteria spread into the irrigation fluid during endourological procedures: A novel tool to guide appropriate postoperative antibiotic management?

By: Boeri L.¹, De Lorenzis E.¹, Gallioli A.¹, Fontana M.¹, Zanetti S.P.¹, Palmisano F.¹, Sampogna G.¹, Longo F.¹, Colombo R.², Arghitu M.², Piconi S.³, Salonia A.⁴, Albo G.¹, Montanari E.¹
¹Fondazione IRCCS Cà Granda Ospedale Maggiore Policlinico, Dept. of Urology, Milan, Italy, ²Fondazione IRCCS Cà Granda Ospedale Maggiore Policlinico, Microbiology and Virology, Milan, Italy, ³ASST Fatebenefratelli Sacco, 1st Division of Infectious Diseases Unit, Milan, Italy, ⁴IRCCS Ospedale San Raffaele, URI, Division of Experimental Oncology/Unit of Urology, Milan, Italy

Novel silver nanoparticle coated urinary catheter reduces bacterial infection in mice and porcine models

By: Mandakhalikar K.D.¹, Wang R.², Rahmat J.N.³, Neoh K.G.⁴, Tambyah P.A.¹, Chiong E.³
¹National University of Singapore, Dept. of Medicine, Singapore, Singapore, ²ACI Medical Pte Ltd, ACI Medical Pte Ltd, Singapore, Singapore, ³National University of Singapore, Dept. of Urology, Singapore, Singapore, ⁴National University of Singapore, Dept. of Chemical and Biomolecular Engineering, Singapore, Singapore
Scientific Programme - EAU18 Copenhagen

## Urodynamics and beyond: Explorations in functional urology and neuro-urology

**Poster Session 26**

### Location:
Red Area, Room 2 (Level 0)

### Chairs:
- S. De Wachter, Edegem (BE)
- T.L. Lin, Taipei (TW)
- K. Rademakers, Maastricht (NL)

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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<th><strong>339</strong></th>
<th>Cystometry filling phase sensation volumes and pressures are affected by (the grade of) bladder outflow obstruction, both in men and identical in women</th>
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<tbody>
<tr>
<td><strong>By:</strong> Rosier P.</td>
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<tr>
<td><strong>University Medical Center Utrecht, Dept. of Urology, Utrecht, Netherlands, The</strong></td>
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<tr>
<th><strong>340</strong></th>
<th>Relationships between lower urinary tract symptoms and associated clinical features in patients with Parkinson's disease</th>
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<tr>
<td><strong>By:</strong> Gubbiotti M.¹, Brahimi E.², Rossi De Vermandois J.A.¹, Turco M.¹, Quadrini F.¹, Tambasco N.², Giannantoni A.¹</td>
<td></td>
</tr>
<tr>
<td>¹University of Perugia, Dept. of Surgical and Biomedical Sciences, Perugia, Italy, ²University of Perugia, Dept. of Neurology, Perugia, Italy</td>
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<tr>
<th><strong>341</strong></th>
<th>Initial results of the clinical application of a novel mathematical formula devised for calculating Flow Resistive Forces index (QRF), a new estimator of bladder outlet resistance, in patients undergoing free uroflowmetry testing</th>
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<tr>
<td><strong>By:</strong> Spyropoulos E.A.</td>
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<tr>
<td>Naval &amp; Veterans Hospital of Athens, Metropolitan Hospital, Bioclinic Piraeus Hospital, Dept. of Urology, Athens, Greece</td>
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<th><strong>342</strong></th>
<th>The effects of using a heating pad on reduction of anxiety, pain and distress during a cystoscopy in the female patients</th>
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<tr>
<td><strong>By:</strong> Ahn S.T.¹, Kim H.J.², Jeong H.G.¹, Park T.Y.¹, Shim J.S.³, Kim J.W.¹, Bae J.H.³, Kang S.H.³, Park H.S.¹, Moon D.G.¹, Cheon J.³, Lee J.G.³, Kim J.J.³, Oh M.¹</td>
<td></td>
</tr>
<tr>
<td>¹Korea University Guro Hospital, Dept. of Urology, Seoul, Korea, South, ²Korea University Guro Hospital, College of Nursing, Seoul, Korea, South, ³Korea University College of Medicine, Dept. of Urology, Seoul, Korea, South</td>
<td></td>
</tr>
</tbody>
</table>
343 Prediction of autonomic dysreflexia during urodynamic investigation

By: Walter M.¹, Knüpfer S.², Cragg J.³, Leitner L.², Schneider M.², Mehnert U.², Krassioukov A.¹, Schubert M.³, Curt A.³, Kessler T.²

¹University of British Columbia, Dept. of International Collaboration on Repair Discoveries, Vancouver, Canada, ²Spinal Cord Injury Center & Research, University of Zürich, Balgrist University Hospital, Dept. of Neuro-Urology, Zürich, Switzerland, ³Spinal Cord Injury Center & Research, University of Zürich, Balgrist University Hospital, Dept. of Neurology, Zürich, Switzerland

344 Withdrawn
To be confirmed

345 Does change in clinical diagnosis and management following ambulatory UDS lead to the symptomatic improvement of patients

By: Axell R.¹, Guzelburc V.², Duffy M.¹, Itam S.², Pakzad M.², Hamid R.², Ockrim J.², Greenwell T.²

¹University College London Hospital NHS Foundation Trust, Dept. of Medical Physics and Bioengineering, London, United Kingdom, ²University College London Hospital NHS Foundation Trust, Dept. of Urology, London, United Kingdom

346 Flow rate parameters and pressure flow studies in a large cohort of women with and without post void residual

By: Rosier P.
University Medical Center Utrecht, Dept. of Urology, Utrecht, Netherlands, The

347 Clinical study of the characteristics and method of classifying non-neurogenic, low-activity bladder in men: Focus on actual bladder contraction force during urination

By: Matsukawa Y., Majima T., Funahashi Y., Sassa N., Yamamoto T., Gotoh M.
Nagoya University Graduate School of Medicine, Dept. of Urology, Nagoya, Japan

348 Is urodynamic investigation properly prescribed in daily clinical practice: Report of data collected from an urodynamic centre

By: Palleschi G., Pastore A., Al Salhi Y., Fuschi A., Velotti G., Capone L., Carbone A.
Sapienza University of Rome, Dept. of Surgical Sciences and Biotechnologies, Latina, Italy

349 Parkinson’s disease (PD) and neurogenic lower urinary tract dysfunction (NLUTD). A comparison of symptoms and urodynamic (UDS) observations between men and women

Aristotle University of Thessaloniki, Dept. of Urology, Thessaloniki, Greece
350 Evaluation of the role of diuresis on the bother related to lower urinary tract symptoms

By: Herve F.¹, Mylle T.², Delabie L.², Everaert K.¹
¹Ghent University Hospital, Dept. of Urology, Ghent, Belgium, ²Ghent University, University, Ghent, Belgium

351 Does ambulatory urodynamic assessment change the primary clinical diagnosis and/or treatment pathway in patients where conventional urodynamic assessment did not conclusively reproduce their symptoms

By: Axell R.¹, Guzelburc V.², Duffy M.¹, Seth J.², Pakzad M.², Hamid R.², Ockrim J.², Greenwell T.²
¹University College London Hospital NHS Foundation Trust, Dept. of Medical Physics and Bioengineering, London, United Kingdom, ²University College London Hospital NHS Foundation Trust, Dept. of Urology, London, United Kingdom

352 Necessity of routine diuretic renography after pyeloplasty in adult patients with symptomatic ureteropelvic junction obstruction

Kyuungpook National University School of Medicine, Dept. of Urology, Daegu, Korea, South
Novel targets for prostate cancer experimental therapy
Poster Session 27

Saturday 17 March
16:00 - 17:30

Location: Red Area, Room 3 (Level 0)
Chairs: C. Ryan, San Francisco (US)
G.N. Thalmann, Berne (CH)

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.

State-of-the-art lecture How to overcome drug resistance?
C. Ryan, San Francisco (US)

354 VERU-111, an novel oral α and β tubulin inhibitor, has potent activity against paclitaxel sensitive and resistant prostate cancer

By: Getzenberg R.1, Dalton J.2, Miller D.3, Steiner M.1

1Veru Inc, Clinical Development, Memphis, United States of America, 2University of Michigan, School of Pharmacy, Ann Arbor, United States of America, 3University of Tennessee, School of Pharmacy, Memphis, United States of America

355 Head-to-head comparison of efficacy of darolutamide (ODM-201) vs. enzalutamide on mutated forms of the androgen receptor

By: Borgmann H.1, Lallous N.2, Ozistanbullu D.3, Beraldi E.2, Paul N.2, Dalal K.2, Fazli L.2, Haferkamp A.1, Lejeune P.4, Cherkasov A.2, Gleave M.2

1University Mainz, Dept. of Urology, Mainz, Germany, 2University of British Columbia, Dept. of Urologic Sciences, Vancouver, Canada, 3University Hospital Frankfurt, Dept. of Urology, Frankfurt, Germany, 4Bayer AG, Dept. of Urology, Berlin, Germany

356 Chitosan membranes applied on the neurovascular bundles during nerve sparing robot-assisted radical prostatectomy: Updated results of a phase II study

By: Porpiglia F.1, Bertolo R.G.1, Manfredi M.1, Checcucci E.1, Garrou D.1, De Cillis S.1, Geuna S.2, Fregnan F.2, Muratori L.2, Fiori C.1

1San Luigi Gonzaga Hospital, Dept. of Urology, Orbassano, Italy, 2San Luigi Gonzaga Hospital, Clinical and Biological Sciences, Orbassano, Italy

357 Glypican-1 as a novel immunotherapeutic target in prostate cancer

By: Zaslavsky A.1, Adams M.1, Wissmueller S.2, Campbell D.2, Klingemann H.3, Walsh B.2, Palapattu G.1

1University of Michigan, Dept. of Urology, Ann Arbor, United States of America, 2Minomic
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<tr>
<th>Session</th>
<th>Title</th>
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<td><strong>rAAV-based and intraprostatically delivered miR-34a therapeutics for efficient inhibition of prostate cancer progression</strong>&lt;br&gt;By: Ai J.¹, Yang L.¹, Wei Q.¹, Li H.¹, Gao G.²&lt;br&gt;¹Sichuan University, West China Hospital, Institute of Urology, Chengdu, China, ²UMASS Medical School, Horae Gene Therapy Center, Worcester, United States of America</td>
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<td>*359</td>
<td><strong>Disrupting the interaction between anti-GRP78 autoantibodies and cell surface GRP78 with low molecular weight heparin as a treatment for prostate cancer</strong>&lt;br&gt;By: Al-hashimi A.¹, Hoogenes J.², Lebeau P.², Shayegan B.², Austin R.¹&lt;br&gt;¹McMaster University, Dept. of Urology, Medicine, Hamilton, Canada, ²McMaster University, Dept. of Urology, Medicine, Hamilton, Canada</td>
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<tr>
<td>360</td>
<td><strong>Identifying of prostate cancer cell-specific internalizing aptamers and engineering of aptamer-targeted nanoparticles for prostate cancer therapy</strong>&lt;br&gt;By: Ji C., Guo H.&lt;br&gt;Drum Tower Hospital, Medical School of Nanjing University, Dept. of Urology, Nanjing, China</td>
<td></td>
</tr>
<tr>
<td>361</td>
<td><strong>A novel nitroxoline treatment, targeting the PI3K pathway, in combination with PD-1 blockage, exerts a potent prostate cancer anti-tumor effect</strong>&lt;br&gt;By: Xu N.¹, Li C.¹, Watanabe M.¹, Xu A.², Liu C.², Li Q.³, Araki M.¹, Wada K.¹, Nasu Y.¹, Huang P.¹&lt;br&gt;¹Okayama University, Dept.of Urology, Okayama, Japan, ²Zhujiang Hospital, Southern Medical University, Dept.of Urology, Guangzhou, China, ³Jiangsu Asieris Pharmaceuticals Co.,Ltd., Dept. of Research &amp; Development, Taizhou, China</td>
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<td>362</td>
<td><strong>Combinational therapeutics targeting Semaphorin 3C with anticancer drugs in prostate cancer</strong>&lt;br&gt;By: Takeuchi A.¹, Shiota M.¹, Ong C.², Tatsugami K.¹, Eto M.¹&lt;br&gt;¹Graduate School of Medical Sciences, Kyushu University, Dept. of Urology, Fukuoka, Japan, ²University of British Columbia, Dept. of Urologic Sciences, Vancouver, Canada</td>
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<td>363</td>
<td><strong>Overcoming enzalutamide-resistance by specific knockdown of transcription-factor STAT5 in prostate cancer</strong>&lt;br&gt;By: Thomas C.¹, Erb H.¹, Bodenbender J.¹, Diehl T.¹, Tsaur I.¹, Gleave M.², Culig Z.³, Jüngel E.¹, Haferkamp A.¹&lt;br&gt;¹University of Mainz, Dept. of Urology, Mainz, Germany, ²University of British Columbia, Vancouver Prostate Centre, Vancouver, Canada, ³University of Innsbruck, Dept. of Experimental Urology, Innsbruck, Austria</td>
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Liquid chromatography with high-resolution mass spectrometry is able to identify polyphenolic metabolites of bilberry-based supplementation in healthy volunteers and plan future studies of efficacy on prostate cancer disease

By: Ancillotti C.¹, Del Bubba M.¹, Baldesi R.², Bartoletti R.²
¹University of Florence, Dept. of Chemistry, Florence, Italy, ²University of Pisa, Dept. of Translational Research and New Technologies, Pisa, Italy

Summary
G.N. Thalmann, Berne (CH)
Optimising surgical technique and outcomes in cystectomy

Poster Session 28

Saturday 17 March
16:00 - 17:30

Location: Blue Area, Room 1 (Level 0)

Chairs: J.W.F. Catto, Sheffield (GB)
K.C. Koo, Seoul (KR)
G. Niegisch, Düsseldorf (DE)

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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Making a case for routine implementation of the Comprehensive Complication Index® into perioperative quality assessment after radical cystectomy

By: Vetterlein M.W., Gild P., Klemm J., Bradtke M., Soave A., Dahlem R., Fisch M., Rink M.
University Medical Center Hamburg-Eppendorf, Dept. of Urology, Hamburg, Germany

365

Radical cystectomy provides improved survival outcomes and decreased costs compared with trimodal therapy for patients diagnosed with localized muscle-invasive bladder cancer

By: Williams S.1, Tabayoyong W.2, Shan Y.1, Jazzar U.1, Mehta H.3, Baillargeon J.4, Huo J.5, Senagore A.3, Orihuela E.1, Tyler D.3, Swanson T.6, Kamat A.2
1The University of Texas Medical Branch, Dept. of Surgery, Dept. of Urology, Galveston, United States of America, 2The University of Texas MD Anderson Cancer Center, Dept. of Urology, Houston, United States of America, 3The University of Texas Medical Branch, Dept. of Surgery, Galveston, United States of America, 4The University of Texas Medical Branch, Dept. of Medicine, Galveston, United States of America, 5The University of Florida, Dept. of Health Services Research, Management and Policy, Gainesville, United States of America, 6The University of Texas Medical Branch, Dept. of Radiation Oncology, Galveston, United States of America

366

Survival after radiotherapy versus radical cystectomy for muscle-invasive bladder cancer

By: Häggström C.1, Garmo H.2, De Luna X.3, Van Hemelrijck M.2, Söderström K.4, Aljabery F.5, Ströck V.6, Hosseini A.7, Gårdmark T.8, Malmström P.1, Johnsson S.5, Liedberg F.9, Holmberg L.1
1Uppsala University, Dept. of Surgical Sciences, Uppsala, Sweden, 2King’s College London, School of Cancer and Pharmaceutical Sciences, Translational Oncology & Urology Research (TOUR), London, United Kingdom, 3Umeå University, USBE, Dept. of Statistics, Umeå, Sweden, 4Umeå University, Dept. of Radiation Sciences, Oncology, Umeå, Sweden, 5Linköping University, Dept. of Clinical and Experimental Medicine, Division of Urology, Linköping, Sweden, 6Sahlgrenska University Hospital, Dept. of
Nomogram-based risk prediction of local and distant relapse after radical cystectomy, and role of perioperative chemotherapy, in patients with muscle-invasive bladder cancer (MIBC): A multicenter study


1Fondazione Ircs Istituto Nazionale Dei Tumori, Dept. of Medical Oncology, Milan, Italy, 2McMaster University, Dept. of Biostatistics, Hamilton, Canada, 3Fox Chase Cancer Center, Dept. of Medical Oncology, Philadelphia, United States of America, 4Heinrich-Heine-University, Dept. of Urology, Dusseldorf, Germany, 5University of Washington, Dept. of Medical Oncology, Seattle, United States of America, 6City of Hope Comprehensive Cancer Center, Dept. of Medical Oncology, Duarte, United States of America, 7University of Athens, Dept. of Medical Oncology, Athens, Greece, 8University of Utah, Dept. of Medical Oncology, Salt Lake City, United States of America, 9University of Michigan, Dept. of Medical Oncology, Ann Arbor, United States of America, 10Center Georges-François Leclerc, Dept. of Medical Oncology, Dijon, France, 11Stanford University School of Medicine, Dept. of Medicine, Stanford, United States of America, 12University of Southampton, Dept. of Medical Oncology, Southampton, United Kingdom, 13Rabin Medical Center, Dept. of Medicine, Petach Tikva, Israel, 14Karmanos Cancer Institute, Dept. of Medical Oncology, Detroit, United States of America, 15Denver Veterans Affairs Medical Center, Dept. of Medical Oncology, Denver, United States of America, 16Centre Hospitalier Universitaire Vaudois, Dept. of Medical Oncology, Lausanne, Switzerland, 17Hopital Foch, Dept. of Medical Oncology, Suresnes, France, 18Princess Margaret Hospital, Dept. of Medical Oncology, Toronto, Canada, 19Barts Health and the Royal Free NHS Trust, Queen Mary University of London, Dept. of Medical Oncology, London, United Kingdom, 20Memorial Sloan-Kettering Cancer Center, Genitourinary Oncology Section, New York, United States of America, 21Dana-Farber Cancer Institute, Bladder Cancer Center, Boston, United States of America, 22Mount Sinai School of Medicine, Tisch Cancer Institute, Dept. of Medical Oncology, New York, United States of America

Early surgical safety outcomes from PURE-01: Secondary analysis from a phase 2 open-label study of neoadjuvant pembrolizumab (pembro) before radical cystectomy for muscle-invasive urothelial bladder carcinoma (MIUC)

By: Briganti A.  1, Necchi A.  2, Raggi D.  2, Giannatempo P.  2, Bianchi M.  1, Freschi M.  3, Colecchia M.  4, Fossati N.  1, Gandaglia G.  1, Salonia A.  1, Salvioni R.  5, Colombo R.  1, Gallina A.  1, Montorsi F.  1

1Vita Salute San Raffaele University, Dept. of Urology, Milan, Italy, 2National Cancer Institute, Dept. of Oncology, Milan, Italy, 3IRCCS San Raffaele Hospital, Dept. of Pathology, Milan, Italy, 4National Cancer Institute, Dept. of Pathology, Milan, Italy, 5National Cancer Institute, Dept. of Urology, Milan, Italy
371 Improved technique to reduce vesicoureteral reflux after radical cystectomy: Reposition of orthotopic ileal neobladder

By: Song W. 1, Yoon H.S. 1, Kim K.H. 1, Yoon H. 1, Chung W.S. 1, Sim B.S. 1, Cho I-R. 2, Lee D.H. 1

1Ewha Womans University School of Medicine, Dept. of Urology, Seoul, Korea, South, 2Inje University Ilsan Paik Hospital, Dept. of Urology, Goyang, Korea, South

372 Do patients benefit from total intracorporeal robotic radical cystectomy?

By: Shim J.S. 1, Kwon T.G 2, Rha K. 3, Lee Y. 4, Lee J. 5, Jeong B. 6, Yoon S. 1, Pyun J. 1, Kang S. 1

1Korea University Medical Center, Dept. of Urology, Seoul, Korea, South, 2Kyungpook National University School of Medicine, Dept. of Urology, Daegu, Korea, South, 3Yonsei University School of Medicine, Dept. of Urology, Seoul, Korea, South, 4Hallym University School of Medicine, Dept. of Urology, Seoul, Korea, South, 5Catholic University School of Medicine, Dept. of Urology, Seoul, Korea, South, 6Sungkyunkwan University School of Medicine, Dept. of Urology, Seoul, Korea, South

373 Short term reoperation rate after cystectomy and urinary diversion within a national population based registry

By: Jerlström T. 1, Ströck V. 2, Aljabery F.A-S. 3, Hosseini A. 4, Sherif A. 5, Ullén A. 6, Malmström P-U. 7, Liedberg F. 8, Gårdmark T. 9

1School of Health and Medical Sciences, Örebro University, Dept. of Urology, Örebro, Sweden, 2Sahlgrenska University Hospital, Dept. of Urology, Gothenburg, Sweden, 3Linköping University Hospital, Dept. of Clinical and Experimental Medicine, Linköping, Sweden, 4Karolinska Institutet, Dept. of Molecular Medicine and Surgery, Section of Urology, Stockholm, Sweden, 5Umeå University, Dept. of Surgical and Perioperative Sciences, Dept. of Urology and Andrology, Umeå, Sweden, 6Karolinska Hospital, Dept. of Oncology-Pathology, Stockholm, Sweden, 7Uppsala University, Dept. of Surgical Sciences, Uppsala, Sweden, 8Skåne University Hospital, Lund University, Dept. of Translational Medicine, Malmö, Sweden, 9Danderyd Hospital, Karolinska Institutet, Dept. of Clinical Sciences, Stockholm, Sweden

374 A new modification of tubeless cutaneous ureterostomy following radical cystectomy

By: Tsaturyan A. 1, Sahakyan S. 2, Muradyan A. 1, Oganov T. 3, Levonyan A. 4, Tsaturyan A. 4

1Yerevan State Medical University, Dept. of Urology, Yerevan, Armenia, 2American University of Armenia, Dept. of Public Health, Yerevan, Armenia, 3“Artmed” MC, Dept. of Urology, Yerevan, Armenia, 4“Artmed” MC, Dept. of Urology, Yerevan, Armenia

375 Urothelial carcinoma in bladder diverticula: A multicenter analysis of characteristics and treatment outcome in 110 patients

By: Voskuilen C. 1, Seiler R. 2, Rink M. 3, Poyet C. 4, Noon A. 5, Roghmann F. 6
376  The Danish Bladder Cancer Database: Three years follow-up


1Aarhus University Hospital, Dept. of Urology, Aarhus, Denmark, 2Aarhus University Hospital, Dept. of Epidemiology and Biostatistics, Aarhus, Denmark, 3Zealand University Hospital, Dept. of Pathology, Roskilde, Denmark, 4Odense University Hospital, Dept. of Oncology, Odense, Denmark, 5Copenhagen University Hospital, Dept. of Urology, Copenhagen, Denmark

377  Long term oncological outcomes following the randomised controlled cystectomy: Open, robotic and laparoscopic (CORAL) trial

By: Omar K., Nair R., Malde S., Thurairaja R., Dasgupta P., Khan M.

Guy’s and St. Thomas’ NHS Foundation Trust, Dept. of Urology, London, United Kingdom

378  Feasibility of complete urinary tract extirpation


1University Hospitals Leuven, Dept. of Urology, Leuven, Belgium, 2Selçuk University School of Medicine, Dept. of Urology, Konya, Turkey

379  Post-operatory complications in an high age Adjusted Charlson Comorbidity Index (ACCI) population submitted to radical cystectomy and urinary diversion

By: Prayer Galetti T., Lami V., Dal Moro F., Nguyen A.A.L., Zattoni F.

Urology Clinic University of Padua, Dept. of Surgery, Oncology and Gastroenterology, Padua, Italy

367  RRC-pentafecta: A proposal for standardization of outcomes reporting following robot assisted radical cystectomy

Landsberger H. ², Rajarubendra N. ², De Castro Abreu A. ², Berger A. ², Aron M. ², Gill I. ², Desai M. ²

¹USC Institute of Urology & the Catherine and Joseph Aresty, Keck School of Medicine, University of Southern California, Dept. of Urology, Los Angeles, United States of America, ²USC Institute of Urology & the Catherine and Joseph Aresty, Keck School of Medicine, University of Southern California, Dept. of Urology, Los Angeles, United States of America
New approaches to improve risk stratification in prostate cancer

Poster Session 29

Location: Blue Area, Room 2 (Level 0)

Chairs: F. Abdollah, West Bloomfield (US)
G. Gandaglia, Milan (IT)
C. Thomas, Mainz (DE)

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.

* 380

**Comprehensive molecular profiling of multifocal prostate cancer challenges the robustness of prostate cancer prognostic signatures**

By: Salami S. ¹, Hovelson D. ², Kaplan J. ², Mathieu R. ³, Udager A. ², Curci N. ⁴, Lee M. ¹, Lazo De La Vega L. ², Susani M. ⁵, Rioux-Leclercq N. ⁶, Spratt D. ⁷, Morgan T. ¹, Davenport M. ⁴, Rubin M. ⁸, Shariat S. ³, Tomlins S. ², Palapattu G. ¹

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,
⁴University of Michigan, Dept. of Radiology, Ann Arbor, United States of America,
⁵Medical University Vienna, Dept. of Pathology, Vienna, Austria,
⁶Rennes University Hospital, Dept. of Pathology, Rennes, France,
⁷University of Michigan, Dept. of Oncology, Ann Arbor, United States of America,
⁸Weill Cornell Medicine, Dept. of Pathology, New York, United States of America

381

**A multi-centre evaluation of the role of Prostate Health Index (PHI) in regions with different prevalences of prostate cancer: A different reference range is needed for European and Asian**

By: Chiu P.K. ¹, Ng C.F. ², Semjonow A. ³, Vincendeau S. ⁴, Houlgatte A. ⁵, Lazzeri M. ⁶, Guazzoni G. ⁷, Stephan C. ⁸, Haese A. ⁹, Bruijne I. ¹, Teoh J.Y. ¹⁰, Chiang C.H. ¹¹, Tan L.G. ¹², Chiong E. ¹², Huang C.Y. ¹³, Wu H.C. ¹⁴, Ye D. ¹⁵, Zhu Y. ¹⁵, Bangma C.H. ¹, Roobol M.J. ¹

¹Erasmus MC, Dept. of Urology, Rotterdam, Netherlands, The, ²SH Ho Urology Centre, The Chinese University of Hong Kong, Dept. of Surgery, Hong Kong, Hong Kong,
³Prostate Center, University Clinic Münster, Dept. of Urology, Münster, Germany,
⁴Hospital Pontchaillou, Dept. of Urology, Rennes, France, ⁵HIA Du Val De Grace, Dept. of Urology, Paris, France,
⁶Istituto Clinico -Clinical and Research Hospital Humanitas, Dept. of Urology, Rozzano, Italy,
⁷San Raffaele Hospital-Turro, Dept. of Urology, Milan, Italy,
⁸Charite-Universitaetsmedizin and Berlin Institute for Urologic Research, Dept. of Urology, Berlin, Germany,
⁹Martini Clinic Prostate Cancer Centre, University Clinic Hamburg-Eppendorf, Dept. of Urology, Hamburg, Germany,
¹⁰Prince of Wales Hospital, The Chinese University of Hong Kong, Dept. of Surgery, Hong Kong, Hong Kong,
¹¹Taipei
Veterans General Hospital and Su-Ao/Yuan-Shan Branch, Dept. of Surgery, Yi-Lan, Taiwan, University Surgical Cluster, National University Health System, Dept. of Urology, Singapore, Singapore, National Taiwan University Hospital, Dept. of Urology, Taipei, Taiwan, China Medical University, Dept. of Urology, Taichung, Taiwan, Fudan University Shanghai Cancer Center, Dept. of Urology, Shanghai, China

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Withdrawn
To be confirmed

383
Neutrophil to lymphocyte ratio is associated with lymph node invasion and higher nodal burden in contemporary high risk patients treated with radical prostatectomy and extended pelvic lymph node dissection

By: Bravi C.A.¹, Bianchi M.¹, Fossati N.¹, Gandaglia G.¹, Zaffuto E.¹, Scuderi S.¹, Robesti D.¹, Barletta F.¹, Nocera L.¹, Capitanio U.¹, Gallina A.¹, Suardi N.², Shariat S.³, Karakiewicz P.I.⁴, Montorsi F.¹, Briganti A.¹
¹Vita-Salute University San Raffaele, Dept. of Urology, Milan, Italy, ²San Raffaele Hospital Turro, Dept. of Urology, Milan, Italy, ³Medical University of Vienna, Dept. of Urology, Vienna, Austria, ⁴Cancer Prognostics and Health Outcomes Unit, Dept. of Urology, Montreal, Canada

384
Thrombospondin 1 and cathepsin D improve the detection of high-grade prostate cancer and reduce the number of unnecessary prostate biopsies

By: Klocker H.¹, Steiner E.¹, Horninger W.¹, Thomas S.², Tennstedt P.², Macagno A.³, Athanasiou A.³, Wittig A.³, Huber R.³, Schiess R.³, Gillessen S.⁴
¹Medical University Innsbruck, Dept. of Urology, Innsbruck, Austria, ²University-Hospital Hamburg-Eppendorf, Dept. of Urology, Hamburg, Germany, ³ProteoMediX, Dept. of Urology, Schlieren, Switzerland, ⁴St. Gallen and University of Bern, Dept. of Urology, St. Gallen, Switzerland

385
Defining a favorable intermediate-risk group: Utility of magnetic resonance imaging and genetic tests

By: Falagario U.G.¹, Bekac A.T.¹, Cumarasamy S.¹, Xu P.¹, Gupta A.¹, Martini A.¹, Tewari A.
Mount Sinai Hospital, Dept. of Urology, New York, United States of America

386
Association between prostate cancer and metabolic health status: Korean National Health Check-up data

By: Kim J.W.¹, Jeong H.G.¹, Park T.Y.¹, Ahn S.T.¹, Oh M.M.¹, Moon D.G.¹, Cheon J.², Lee J.G.², Park H.S.¹
¹Korea University Guro Hospital, Dept. of Urology, Seoul, Korea, South, ²Korea University College of Medicine, Dept. of Urology, Seoul, Korea, South

387
Major adverse cardiac events (MACE) are not associated with prostate cancer diagnosis or grade: An Italian biopsy cohort study
388

**Prediction of significant prostate cancer in patients with previously negative prostate biopsy undergoing MRI/ultrasound-fusion biopsy in combination with systematic biopsy**

By: Borkowetz A. 1, Renner T. 1, Schlumberger G. 1, Platzek I. 2, Toma M. 3, Froehner M. 1, Zastrow S. 1, Wirth M. 1

1Technische Universität Dresden, Dept. of Urology, Dresden, Germany, 2Technische Universität Dresden, Dept. of Radiology, Dresden, Germany, 3University of Bonn, Dept. of Pathology, Bonn, Germany

389

**Urinary steroidal profile as innovative and not expensive tool in differential diagnosis between benign prostate hyperplasia and prostate carcinoma**

By: Porpiglia F. 1, De Luca S. 1, Manfredi M. 1, Mele F. 1, Bertolo R. 1, Garrou D. 1, Amparore D. 1, Alleva G. 1, Pecoraro A. 1, Peretti D. 1, De Cillis S. 1, Vincenti M. 2, Amante E. 2, Fiori C. 1

1San Luigi Gonzaga Hospital, Dept. of Urology, Orbassano, Italy, 2San Luigi Gonzaga Hospital, Antidoping Center, Orbassano, Italy

390

**Comparison with diagnostic performance between aberrant glycosylated S2,3PSA test and conventional PSA tests**

By: Yoneyama T. 1, Ishikawa T. 2, Tobisawa Y. 1, Hatakeyama S. 1, Date M. 2, Nakamura K. 2, Narita S. 3, Mitsuzuka K. 4, Duivenvoorden W. 5, Pinthus J. 5, Hashimoto Y. 1, Koie T. 1, Habuchi T. 1, Arai Y. 4, Ohyama C. 1

1Hirosaki University Graduate School of Medicine, Dept. of Urology, Hirosaki, Japan, 2Wako Pure Chemical Industries, Diagnostics Research Laboratories, Hyogo, Japan, 3Akita University Graduate School of Medicine, Dept. of Urology, Hirosaki, Japan, 4Tohoku University Graduate School of Medicine, Dept. of Urology, Hirosaki, Japan, 5McMaster University, Dept. of Surgery, Hamilton, Canada

391

**Distinct immunohistochemical findings for common biomarkers in malignant and adjacent benign prostate: A study on needle biopsy microarrays derived from mpMRI-characterized tissue**

By: Stavrinides V. 1, Olivier J. 2, Kay J. 1, Freeman A. 3, Ahmed Z. 1, Pye H. 1, Heavey S. 1, Simmons L. 4, Kanthabalan A. 4, Arya M. 4, Briggs T. 5, Barratt D. 6, Charman S. 7, Gelister J. 5, Hawkes D. 6, Hu Y. 6, Jameson C. 3, Mc Cartan N. 1, Punwani S. 8, Van Der Meulen J. 9, Moore C. 1, Emberton M. 1, Ahmed H. 10, Whitaker H. 1

1University College London, Division of Surgery and Interventional Science, London, United Kingdom, 2Hospital Huriez, University Lille Nord de France, Dept. of Urology, Lille, France, 3University College London Hospital NHS Foundation Trust, Dept. of Pathology, London, United Kingdom, 4University College London Hospital NHS Foundation Trust, Dept. of Urology, London, United Kingdom, 5The Royal Free NHS Foundation Trust, Dept.
### 392

**Tumour-associated macrophages in prostate biopsy determined by automated image analysis are an independent prognostic marker for biochemical recurrence in prostate cancer patients**

By: Buchner A.¹, Athelogou M.², Hessel H.³, Huss R.², Kirchner T.³, Stief C.¹

¹Ludwig-Maximilians-University Munich, Dept. of Urology, Munich, Germany, ²Definiens AG, Dept. of Research, Munich, Germany, ³Ludwig-Maximilians-University Munich, Dept. of Pathology, Munich, Germany

### 393

**What patient factors predict PSA testing among men aged 50 and above**

By: Goldberg H., Klaassen Z., Chandrasekar T., Wallis C., Kulkarni G., Hamilton R., Finelli A., Fleshner N.

Princess Margaret Hospital, Dept. of Urology, Toronto, Canada
Prostate cancer: Management of oligometastatic disease and recurrence after local treatment

Poster Session 30

Saturday 17 March
16:00 - 17:30

Location: Blue Area, Room 3 (Level 0)

Chairs: C. Ohyama, Hirosaki (JP)
G. Ploussard, Toulouse (FR)

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

Is it worth to perform radical prostatectomy in a salvage setting? Results of a contemporary multicentre series of 395 cases

By: Marra G.1, Gontero P.1, Alessio P.1, Oderda M.1, Palazzetti A.1, Pisano F.1, Battaglia A.1, Munegato S.1, Calleris G.1, Frea B.1, Munoz F.2, Filippini C.3, Linares E.4, Sanchez-Salas R.4, Goonewardene S.5, Dasgupta P.6, Cahill D.6, Challacombe B.5, Popert R.5, Gillatt D.6, Persad R.6, Palou J.7, Joniau S.8, Smelzo S.9, Piechaud T.9, De La Taille A.10, Roupret M.11, Albisinni S.12, Van Velthoven R.12, Morlacchi P.13, Vidit S.13, Gandaglia G.14, Mottrie A.14, Smith J.15, Joshi S.15, Fiscus G.15, Berger A.16, Aron M.16, Van Der Poel H.17, Tilki D.18, Murphy D.19, Lawrentschuk N.19, Davis J.20, Gordon L.20, Karnes R.J.20

1Molinette Hospital - University of Studies of Turin, Dept. of Surgical Sciences, Turin, Italy, 2Pasini Hospital, Dept. of Radiotherapy, Aosta, Italy, 3University of Studies of Turin, 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, Brussels, 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, TN, United States of America, 16USC Norris Comprehensive Cancer Center and Hospital, University of South California, Dept. of Urology, Los Angeles, CA, United States of America, 17Netherlands Cancer Institute, Dept. of Urology, Amsterdam, Netherlands, The, 18Martini Klinik, Dept. of Urology, Hamburg, Germany, 19Peter MacCallum Cancer Centre, Dept. of Urology, Melbourne, VIC, Australia, 20The University of Texas, MD Anderson Cancer Center, Dept. of Urology, Houston, TX, United States of America

Salvage cryotherapy after radiotherapy in prostate cancer: A long-term prospective study

By: Donis Canet F.1, Laso García I.2, Arias Fúnez F.2, Brasero Burgos J.2, Duque

237
Ruiz G., Sánchez Gallego M.D., Burgos Revilla F.J.
1Ramon y Cajal University Hospital. University of Alcalá. IRICYS., Dept. of Urology, Madrid, Spain, 2Ramon y Cajal University Hospital, Dept. of Urology, Madrid, Spain

396

Oncological outcome of radical salvage prostatectomy in a large contemporary series

1University of Cologne, Dept. of Urology, Cologne, Germany, 2Mayo Clinic, Dept. of Urology, Rochester, United States of America

397

What is the optimal field of post-prostatectomy radiation therapy? Long-term results from a multi-institutional study

1Urological Research Institute - IRCCS Ospedale San Raffaele, Dept. of Radiotherapy, Milan, Italy, 2Vita-Salute University San Raffaele, Dept. of Urology, Milan, Italy, 3Mayo Clinic, Dept. of Urology, Rochester, United States of America, 4Gustave Roussy Institute, Dept. of Radiation Oncology, Villejuif, France, 5Vita-Salute University San Raffaele, Dept. of Radiotherapy, Milan, Italy, 6University Hospital Ulm, Dept. of Radiation Oncology, Ulm, Germany, 7Charité University Hospital Berlin, Dept. of Radiation Oncology, Berlin, Germany, 8Medical University of Vienna, Dept. of Urology, Vienna, Austria, 9Medical University of Vienna, Dept. of Radiation Oncology, Vienna, Austria, 10University Hospitals Leuven, Dept. of Urology, Leuven, Belgium, 11University Hospitals Leuven, Dept. of Radiotherapy, Leuven, Belgium, 12Ghent University Hospital, Dept. of Radiotherapy, Ghent, Belgium

400

Assessing the need for and the optimal duration of hormonal therapy in association with post-prostatectomy radiation therapy: Results from a multi-institutional study

1Urological Research Institute - IRCCS Ospedale San Raffaele, Unit of Urology - Division of Oncology, Milan, Italy, 2Mayo Clinic, Dept. of Urology, Rochester, MN, United States of America, 3Gustave Roussy Institute, Dept. of Radiation Oncology, Villejuif, France, 4Vita-Salute University San Raffaele, Dept. of Radiotherapy, Milan, Italy, 5Vita-Salute University San Raffaele, Dept. of Urology, Milan, Italy, 6University Hospital Ulm, Dept. of Radiation Oncology, Ulm, Germany, 7Charité University Hospital Berlin, Dept. of Radiation Oncology, Berlin, Germany, 8Medical University of Vienna, Dept. of Urology, Vienna, Austria, 9Medical University of Vienna, Dept. of Radiation Oncology, Vienna, Austria,
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<th>Session</th>
<th>Title</th>
<th>Authors</th>
<th>Institutions</th>
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<tr>
<td>401</td>
<td>Predictive factors of 68Ga-PSMA PET/CT positivity during biochemical recurrence after prostate cancer treatment with a curative intent</td>
<td>Diamand R., Al Hajj Obeid W., Artigas C., Flamen P., Van Velthoven R., Roumeguere T., Peltier A.</td>
<td>University Hospitals Leuven, Dept. of Urology, Leuven, Belgium, University Hospitals Leuven, Dept. of Radiotherapy, Leuven, Belgium, Ghent University Hospital, Dept. of Radiotherapy, Ghent, Belgium, Vita-Salute University San Raffaele, Dept. of Urology, Milan, Italy</td>
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<td>402</td>
<td>Robotic salvage lymph node dissection in prostate cancer after PSMA- or Choline-PET/CT: Operative and early oncological results</td>
<td>Linxweiler J., Saar M., Al-Kailani Z., Stöckle M., Siemer S., Ohlmann C.H.</td>
<td>Saarland University Medical Center, Dept. of Urology, Homburg/Saar, Germany</td>
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<td>403</td>
<td>Prospective evaluation of 68Ga-PSMA PET/CT in hormone-sensitive patients with biochemical recurrence of prostate cancer</td>
<td>Zacho H., Nielsen J., Dettmann K., Haberkorn U., Langkilde N., Jensen J., Petersen L.</td>
<td>Aalborg University Hospital, Dept. of Nuclear Medicine, Aalborg, Denmark, Holstebro Regional Hospital, Dept. of Urology, Holstebro, Denmark, University Hospital Heidelberg, Dept. of Nuclear Medicine, Heidelberg, Germany, Aalborg University Hospital, Dept. of Urology, Aalborg, Denmark</td>
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<td>404</td>
<td>Accuracy of 68Ga-PSMA-PET for the detection of lymph node metastases before salvage lymphadenectomy – a real life scenario</td>
<td>Mandel P., Tilki D., Chun F., Schlomm T., Leyh-Bannurah S-R., Pristuba E., Graeven M., Heinzer H., Klutmann S., Budäus L., Steuber T.</td>
<td>University Hospital Frankfurt, Dept. of Urology, Frankfurt, Germany, University Hospital Hamburg-Eppendorf, Martini-Klinik Prostate Cancer Center, Hamburg, Germany, University Hospital Hamburg-Eppendorf, Dept. of Nuclear Medicine, Hamburg, Germany</td>
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<td>405</td>
<td>Prospective evaluation of the performance of 68Ga-PSMA 11-PET CT/MRI imaging for lymph node staging in patients with biochemical recurrence after radical prostatectomy</td>
<td>Abufaraj M., Grubmüller B., Hartenbach M., Kramer G., Haitel A., Baltzer P., Haug A., Wadsak W., Pfaff S., Briganti A., Shariat S.F.</td>
<td>Medical university of Vienna, Dept. of Urology, Vienna, Austria, Medical university of Vienna, Division of Nuclear Medicine, Dept. of Biomedical Imaging and Image guided Therapy, Vienna, Austria, Medical university of Vienna, Dept. of pathology, Vienna, Austria, Medical university of Vienna, Dept. of Biomedical Imaging and Image guided Therapy, Vienna, Austria</td>
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<td>406</td>
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<td>408</td>
<td><strong>Local treatment of metastasis improves oncological outcome in men</strong></td>
<td>with prostate cancer undergoing cytoreductive radical prostatectomy (cRP) for metastatic prostate cancer (mPCA)</td>
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<td>By: Heidenreich A.¹, Fossati N. ², Karnes J. ³, Shariat S. ⁴, Pfister D. ¹, Montorsi F. ², Soligo M. ³, Grubmüller B. ⁴, Briganti A. ²</td>
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<td>¹University of Cologne, Dept. of Urology, Cologne, Germany, ²Vita-Salute San Raffaele University, Dept. of Urology, Milan, Italy, ³Mayo Clinic, Dept. of Urology, Rochester, United States of America, ⁴Medical University Vienna, Dept. of Urology, Vienna, Austria</td>
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<td>399</td>
<td><strong>The prognostic significance of persistently elevated PSA after radical prostatectomy is highly associated with pathological stage: Implications for timely use of salvage treatments</strong></td>
<td>By: Bravi C.A.¹, Gandaglia G. ¹, Parker W. ², Fossati N. ¹, Bandini M. ¹, Zaffuto E. ¹, Colombo R. ¹, Tutolo M. ¹, Suardi N. ¹, Capitanio U. ¹, Mirone V. ³, Karnes J. ², Boorjian S. ², Montorsi F. ¹, Briganti A. ¹</td>
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<td>¹University San Raffaele, Dept. of Urology, Milan, Italy, ²Mayo Clinic, Dept. of Urology, Rochester, United States of America, ³Federico II University, Dept. of Urology, Naples, Italy</td>
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<td>398</td>
<td><strong>Defining clinically meaningful positive surgical margins in patients undergoing radical prostatectomy for localized prostate cancer: A stage-by-stage analysis on the risk of clinical recurrence</strong></td>
<td>By: Gandaglia G. ¹, Fossati N. ¹, Robesti D. ¹, Scuderi S. ¹, Montironi R. ², Tutolo M. ¹, Barletta F. ¹, Zaffuto E. ¹, Dell'Oglio P. ¹, Capitanio U. ¹, Mirone V. ³, Lucianò R. ⁴, Freschi M. ⁴, Montorsi F. ¹, Bravi C.A. ⁵, Briganti A. ¹</td>
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<td>¹Vita-Salute University San Raffaele, Dept. of Urology, Milan, Italy, ²Polytechnic University of the Marche Region, School of Medicine, United Hospitals, Dept. of Pathological Anatomy, Ancona, Italy, ³Federico II University, Dept. of Urology, Naples, Italy, ⁴Vita-Salute University San Raffaele, Dept. of Pathology, Milan, Italy, ⁵San Raffaele Hospital, Milan, Italy</td>
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Clinical assessment of urethral strictures and fistulae
Poster Session 31

Location: Blue Area, Room 4 (Level 0)
Chairs: G. Barbagli, Arezzo (IT)
        M. Fisch, Hamburg (DE)
        S.J. Hosseini, Tehran (IR)

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

Evaluation of the effect of urethroplasty for anterior urethral strictures by a validated disease specific patient-reported outcome measure

By: Horiguchi A.¹, Shinchi M.¹, Ojima K.¹, Masunaga A.¹, Ito K.¹, Asano T.¹, Takahashi E.², Kimura F.², Azuma R.³
¹National Defense Medical College, Dept. of Urology, Saitama, Japan, ²Nishisaitama-chuo National Hospital, Dept. of Urology, Saitama, Japan, ³National Defense Medical College, Dept. of Plastic surgery, Saitama, Japan

Long-term follow-up of buccal mucosa graft urethroplasty: 20 years experience from an academic center and systematic review of the literature

By: Huber J., Kluge V., Leike S., Oehlschläger S., Putz J., Wirth M.P.
TU Dresden, Dept. of Urology, Dresden, Germany

Long-term results of the urethroplasty using oral mucosa graft: A series of more than 1000 consecutive patients

By: Borisenkov M., Pandey A., Beier J., Keller H.
Sana Klinikum Hof, Dept. of Urology, Hof, Germany

Bulbar urethral strictures after the treatment of prostate cancer

By: Bugeja S., Ivaz S., Frost A., Dragova M., Andrich D., Mundy A.
University College London Hospitals, Reconstructive Urology Unit, London, United Kingdom

Is there still a role for urethral dilatation in the modern management of bulbar urethral strictures?

By: Frost A., Bugeja S., Campos Juanatey F., Ivaz S., Dragova M., Andrich D., Mundy A.
University College London Hospitals, Reconstructive Urology Unit, London, United Kingdom
Fistulation into the pubic symphysis - the true nature of the condition

By: Ivaz S., Bugeja S., Frost A., Andrich D., Mundy A.
University College London Hospitals, NHS Foundation Trust, Reconstructive Urology Unit, London, United Kingdom

Urethral reconstruction in patients with urethral stent failure: An international multicenter experience

1 Universidad Europea de Madrid, Hospital de Getafe, Clinical Department, Madrid, Spain, 2 Kulkarni Center for Reconstructive Urology, Dept. of Urology, Pune, India, 3 Hospital de Clínicas José de San Martín, Universidad, Dept. of Urethral Reconstructive Surgery, Buenos Aires, Argentina, 4 Hospital General de Agudos Carlos G. Durand, Dept. of Urology, Buenos Aires, Argentina, 5 Eastern Virginia Medical School, Dept. of Urology, Norfolk, United States of America, 6 Centro de Educación Médica e Investigaciones Clínicas, Dept. of Urology, Buenos Aires, Argentina, 7 Hospital de Santa María, Universidad de Lisboa, Dept. of Urology, Lisbon, Portugal, 8 Ghent University Hospital, Dept. of Urology, Ghent, Belgium, 9 Hospital Italiano de Buenos Aires, Dept. of Urology, Buenos Aires, Argentina, 10 Hospital San José Tecnológico de Monterrey, Universidad de Monterrey, Dept. of Urology, Nuevo León, Mexico, 11 Unidad Urológica Mar del Plata, Dept. of Urology, Buenos Aires, Argentina, 12 Detroit Medical Center, Detroit Receiving Hospital, Dept. of Urology, Detroit, United States of America, 13 Hospital del Trabajador, Dept. of Urology, Santiago de Chile, Chile

Surgical outcomes of urethroplasty using modified U-score system

By: Lee C.U., Lee J.H., Bang S.H., Sung H.H., Choi C.
1 Samsung Medical center, Dept. of Urology, Seoul, Korea, South, 2 Samsung Medical Center, Sungkyunkwan University School of Medicine, Dept. of Urology, Seoul, Korea, South

Long term outcomes of re-do urethroplasty: Outcome evaluation through flexible cystoscopy

By: Esperto F., Osman N., Park J., Barretta M., Inman R., Chapple C.
1 Sheffield Teaching Hospital, Dept. of Urology, Sheffield, United Kingdom, 2 Changi General Hospital, Dept. of Urology, Singapore, Singapore, 3 Sheffield Teaching Hospital, Dept. of Urogynecology, Sheffield, United Kingdom

Risk factors associated with transperineal bulboprostatic anastomosis after pelvic fracture urethral injury: 10 years of experience from a urethroplasty center

By: Qiang F.
The 6th People's Hospital of Shanghai, Dept. of Urology, Shanghai, China
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<th>Session</th>
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<th>Authors</th>
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<td>421</td>
<td>Single-surgeon series of delayed anastomotic urethroplasty for pelvic fracture urethral injury: An analysis of surgical and patient-reported outcome of a 10-year experience in a Japanese referral center</td>
<td>Horiguchi A.&lt;sup&gt;1&lt;/sup&gt;, Shinchi M.&lt;sup&gt;1&lt;/sup&gt;, Ojima K.&lt;sup&gt;1&lt;/sup&gt;, Masunaga A.&lt;sup&gt;1&lt;/sup&gt;, Ito K.&lt;sup&gt;1&lt;/sup&gt;, Asano T.&lt;sup&gt;1&lt;/sup&gt;, Takahashi E.&lt;sup&gt;2&lt;/sup&gt;, Kimura F.&lt;sup&gt;2&lt;/sup&gt;, Azuma R.&lt;sup&gt;3&lt;/sup&gt;</td>
<td>1National Defense Medical College, Dept. of Urology, Saitama, Japan, 2Nishisaitama-chuo National Hospital, Dept. of Urology, Saitama, Japan, 3National Defense Medical College, Plastic surgery, Saitama, Japan</td>
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<td>422</td>
<td>Modified York Mason technique for repair of iatrogenic rectourinary fistula: 20 years of experience</td>
<td>Bergerat S.&lt;sup&gt;1&lt;/sup&gt;, Rozet F.&lt;sup&gt;1&lt;/sup&gt;, Barret E.&lt;sup&gt;1&lt;/sup&gt;, Batista Da Costa J.&lt;sup&gt;1&lt;/sup&gt;, Castro A.&lt;sup&gt;1&lt;/sup&gt;, Dell’Oglio P.&lt;sup&gt;1&lt;/sup&gt;, Galiano M.&lt;sup&gt;1&lt;/sup&gt;, Ingels A.&lt;sup&gt;1&lt;/sup&gt;, Sanchez Salas R.&lt;sup&gt;1&lt;/sup&gt;, Cathelineau X.</td>
<td>Institut Mutualiste Montsouris, Dept. of Urology, Paris, France</td>
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<td>423</td>
<td>Late complications of one stage anterior substitution urethroplasty with oral mucosa</td>
<td>Kunz I.&lt;sup&gt;1&lt;/sup&gt;, Maek M.&lt;sup&gt;1&lt;/sup&gt;, Musch M.&lt;sup&gt;1&lt;/sup&gt;, Vogel A.&lt;sup&gt;1&lt;/sup&gt;, Krege S.&lt;sup&gt;1&lt;/sup&gt;, Kröpfl D.&lt;sup&gt;1&lt;/sup&gt;</td>
<td>Kliniken Essen-Mitte, Dept. of Urology, Essen, Germany</td>
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<td>414</td>
<td>Evaluation of patient reported outcome methods (PROM) in patients undergoing different approaches to bulbar urethroplasty</td>
<td>Bugeja S.&lt;sup&gt;1&lt;/sup&gt;, Dragova M.&lt;sup&gt;1&lt;/sup&gt;, Campos Juanatey F.&lt;sup&gt;1&lt;/sup&gt;, Frost A.&lt;sup&gt;1&lt;/sup&gt;, Ivaz S.&lt;sup&gt;1&lt;/sup&gt;, Andrich D.&lt;sup&gt;1&lt;/sup&gt;, Mundy A.&lt;sup&gt;1&lt;/sup&gt;</td>
<td>University College London Hospitals, NHS Foundation Trust, Reconstructive Urology Unit, London, United Kingdom</td>
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<td>412</td>
<td>Comparative effectiveness of initial, repeat, and secondary anterior one-stage buccal mucosal graft urethroplasty</td>
<td>Vetterlein M.W.&lt;sup&gt;1&lt;/sup&gt;, Rosenbaum C.&lt;sup&gt;1&lt;/sup&gt;, Meyer C.&lt;sup&gt;1&lt;/sup&gt;, Stahlberg J.&lt;sup&gt;1&lt;/sup&gt;, Gild P.&lt;sup&gt;1&lt;/sup&gt;, Reiss P.&lt;sup&gt;1&lt;/sup&gt;, Engel O.&lt;sup&gt;1&lt;/sup&gt;, Dahlem R.&lt;sup&gt;1&lt;/sup&gt;, Fisch M.&lt;sup&gt;1&lt;/sup&gt;, Kluth L.&lt;sup&gt;1&lt;/sup&gt;</td>
<td>University Medical Center Hamburg-Eppendorf, Dept. of Urology, Hamburg, Germany</td>
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Surgical management of advanced disease
Poster Session 32

Saturday 17 March
16:00 - 17:30

Location: Blue Area, Room 5 (Level 0)
Chairs: N. Al-Hamdani, Baghdad (IQ)
M. Horstmann, Krefeld (DE)
G. Carrieri, Bari (IT)

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

425 Simultaneous cardiac and renal surgery for renal and retroperitoneal tumours invading the right atrium and peri-diaphragmatic inferior vena cava: Oncological outcome and long-term survival

By: Warren H.\textsuperscript{1}, Fernando A.\textsuperscript{1}, Austin C.\textsuperscript{2}, Thomas K.\textsuperscript{1}, Chowdhury S.\textsuperscript{3}, O'Brien T.\textsuperscript{1}

\textsuperscript{1}Guy's and St Thomas' NHS Foundation Trust, Dept. of Urology, London, United Kingdom,  \textsuperscript{2}Guy's and St Thomas' NHS Foundation Trust, Dept. of Cardiac Surgery, London, United Kingdom,  \textsuperscript{3}Guy's and St Thomas' NHS Foundation Trust, Dept. of Oncology, London, United Kingdom

427 Risk-based surveillance after surgical treatment of renal cell carcinoma

By: Capogrosso P.\textsuperscript{1}, Muttin F.\textsuperscript{1}, Larcher A.\textsuperscript{1}, Sjoberg D.\textsuperscript{2}, Vertosick E.\textsuperscript{2}, Cianflone F.\textsuperscript{1}, Dell'Oglio P.\textsuperscript{1}, Carenzi C.\textsuperscript{1}, Salonia A.\textsuperscript{1}, Vickers A.\textsuperscript{2}, Montorsi F.\textsuperscript{1}, Bertini R.\textsuperscript{1}, Capitanio U.\textsuperscript{1}

\textsuperscript{1}Urological Research Institute - IRCCS Ospedale San Raffaele, Unit of Urology, Division of Oncology, Milan, Italy,  \textsuperscript{2}Memorial Sloan Kettering Cancer Center, Dept. of Epidemiology & Biostatistics, New York, United States of America

429 Preoperative estimation of long-term oncologic outcomes in patients treated with surgery for kidney cancer

By: Muttin F.\textsuperscript{1}, Larcher A.\textsuperscript{1}, Ripa F.\textsuperscript{1}, Cianflone F.\textsuperscript{1}, Fossati N.\textsuperscript{1}, Gandaglia G.\textsuperscript{1}, Trevisani F.\textsuperscript{1}, Carenzi C.\textsuperscript{1}, Mottrie A.\textsuperscript{2}, Hamilton Z.\textsuperscript{3}, Derweesh I.\textsuperscript{3}, Salonia A.\textsuperscript{1}, Briganti A.\textsuperscript{1}, Montorsi F.\textsuperscript{1}, Bertini R.\textsuperscript{1}, Capitanio U.\textsuperscript{1}

\textsuperscript{1}Urological Research Institute, IRCCS Ospedale San Raffaele, Unit of Urology, Division of Oncology, Milan, Italy,  \textsuperscript{2}Onze Lieve Vrouw Hospital, Dept. of Urology, Aalst, Belgium,  \textsuperscript{3}Moores UCSD Cancer Center, University of California San Diego School of Medicine, Dept. of Urology, San Diego, United States of America

431 Impact of hospital nephrectomy volume on intermediate to long-term survival in renal cell carcinoma
By: Hsu R.C.J. ¹, Barclay M. ², Lyrratzopoulos G. ³, Gnanapragasam V. ¹, Armitage J. ⁴
¹University of Cambridge, Academic Urology Group, Dept. of Surgery, Cambridge, United Kingdom, ²University of Cambridge, Cambridge Centre for Health Services Research, Cambridge, United Kingdom, ³University College London, Epidemiology of Cancer Healthcare and Outcomes (ECHO) Group, Dept. of Behavioural Science and Health, London, United Kingdom, ⁴Cambridge University Hospitals NHS Foundation Trust, Dept. of Urology, Cambridge, United Kingdom

432

Robot assisted radical nephrectomy and inferior vena cava thrombectomy: Surgical technique, perioperative and mid-term oncologic outcomes

By: Simone G. ¹, Guaglianone S. ¹, Minisola F. ¹, Ferriero M. ¹, Tuderti G. ¹, Misuraca L. ¹, Vallati G. ², Pizzi G. ², Costantini M. ¹, Gallucci M. ¹
¹Regina Elena National Cancer Institute, Dept. of Urology, Rome, Italy, ²Regina Elena National Cancer Institute, Dept. of Radiology, Rome, Italy

424

Minimally invasive surgery for kidney cancer with venous thrombus: Oncological and functional outcomes from a multicentre serie

By: Marra G. ¹, Brattoli M. ¹, Filippini C. ², Linares Espinos E. ³, Martinez Salamanca J. ⁴, Spahn M. ⁵, Scherr D. ⁶, Delgado-Oliva F. ⁷, Vera-Donoso C. ⁷, Lorentz A. ⁸, Viraj M. ⁸, McKiernan J. ⁹, Libertino J. ¹⁰, Huang W. ¹¹, Evans C. ¹², Capitanio U. ¹³, Montorsi F. ¹⁴, Hutterer G. ¹⁴, Zigeuner R. ¹⁴, Gontero P. ¹⁴
¹Azienda Ospedaliero Universitaria S. Giovanni Battista - Molinette, Dept. of urology, Turin, Italy, ²Azienda Ospedaliero Universitaria S. Giovanni Battista - Molinette, Dept. of Anaesthesia and Critical care, Turin, Italy, ³Hospital Universitario La Paz, Dept. of Urology, Madrid, Spain, ⁴Hospital Universitario Puerta de Hierro-Majadahonda, Dept. of urology, Madrid, Spain, ⁵University Hospital Bern, Dept. of urology, Bern, Switzerland, ⁶Cornell University, Dept. of Urology, Ithaca, United States of America, ⁷La Fe Hospital, Dept. of Urology, Valencia, Spain, ⁸Emory University School of Medicine, Dept. of Urology, Atlanta, United States of America, ⁹Columbia University, Dept. of Urology, New York, United States of America, ¹⁰Emerson Hospital MGH Cancer Center, Tufts University School of Medicine, Dept. of Urology, Boston, United States of America, ¹¹NYU School of Medicine, Tisch Hospital and NYU Robotic Surgery Center, Dept. of Urology, New York, United States of America, ¹²UC Davis Medical Center, Dept. of Urology, Sacramento, United States of America, ¹³San Raffaele Hospital, Vita e Salute University, Dept. of Urology, Milan, Italy, ¹⁴Medical University of Graz, Dept. of Urology, Graz, Germany

433

The prognostic implication of body mass index on postoperative survival outcomes in non-metastatic renal cell carcinoma

By: Kim H.S. ¹, Lee H.W. ¹, Lee J.W. ¹, Bae J. ¹, Jeong C.W. ², Kawk C. ², Kim H.H. ², Ku J.H. ²
¹Dongguk University Ilsan Medical Center, Dept. of Urology, Goyang, Korea, South, ²Seoul National University Hospital, Dept. of Urology, Seoul, Korea, South

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Withdrawn
To be confirmed
435  
**Trends and morbidity for minimally invasive versus open cytoreductive nephrectomy in the management of metastatic renal cell carcinoma**

By: Zlatev D.¹, Mossanen M.¹, Pucheril D.¹, Ozambela M.¹, Wang Y.², Ingham M.¹, Chung B.³, Chang S.¹

¹Brigham and Women's Hospital, Division of Urologic Surgery, Boston, United States of America, ²Brigham and Women's Hospital, Center for Surgery and Public Health, Boston, United States of America, ³Stanford University Medical Center, Dept. of Urology, Stanford, United States of America

436  
**Evaluating neutrophil/lymphocyte ratio as a predictor of 30-day high-grade complications following renal surgery**


University of California San Diego, Dept. of Urology, La Jolla, United States of America

437  
**Anticipating the effect of selective referral on overall survival following cytoreductive nephrectomy**

By: Berg S.¹, Cole A.², Pucheril D.², Fletcher S.², Noldus J.¹, Sood A.³, Abdollah F.³, Menon M.³, Trinh Q-D.²

¹Ruhr University Bochum, Dept. of Urology, Herne, Germany, ²Brigham and Women's Hospital, Harvard Medical School, Division of Urological Surgery and Center for Surgery and Public Health, Boston, United States of America, ³Henry Ford Health System, Vatikutti Urology Institute, Detroit, United States of America

438  
**Time-dependent change of relapse sites of renal cell carcinoma after curative surgery**

By: Noguchi G.¹, Nakaigawa N.², Tsutsumi S.¹, Yasui M.¹, Ueno D.³, Namura K.⁴, Umemoto S.¹, Takizawa A.³, Ohta J.⁵, Ueki T.⁶, Watanabe T.⁷, Kobayashi K.⁴, Kondo K.², Kishida T.¹, Kanno H.⁸, Kitami K.⁹, Taguri M.¹⁰, Yao M.²

¹Kanagawa cancer center, Dept. of Urology, Yokohama, Japan, ²Yokohama City University Graduate School of Medicine, Dept. of Urology, Yokohama, Japan, ³International Goodwill Hospital, Dept. of Urology, Yokohama, Japan, ⁴Yokosuka Kyosai Hospital, Dept. of Urology, Yokohama, Japan, ⁵Yokohama Municipal Citizen’s Hospital, Dept. of Urology, Yokohama, Japan, ⁶Japanese Redcross Hadano Hospital, Dept. of Urology, Yokohama, Japan, ⁷Kanagawa Prefectural Ashigarakami Hospital, Dept. of Urology, Yokohama, Japan, ⁸Toshiba Rinkan Hospital, Dept. of Urology, Yokohama, Japan, ⁹Fujisawa City Hospital, Dept. of Urology, Yokohama, Japan, ¹⁰Yokohama City University Graduate School of Medicine, Dept. of Biostatistics, Yokohama, Japan

428  
**Application of a novel laparoscopic technique in the surgical treatment of renal tumor**

By: Zou X., Zhang G., Wang X., Yuan Y., Xiao R., Wu G.

Gannan Medical University, Dept. of Urology, Ganzhou, China
## Video Session 05

### Saturday 17 March

**16:00 - 17:30**

**Location:** Green Area, Room 15 (Level 0)

**Chairs:**
- M. Gallucci, Rome (IT)
- A. Messas, Paris (FR)
- B. Rocco, Modena (IT)

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

### V32

**Initial feasibility study of ureteral sealing and bladder endoscopic suturing in pluck ureteral detachment nephroureterectomy**

By: Lezrek M.\(^1\), Tazi H.\(^2\), Aboufaraj M.\(^3\), Slimani A.\(^1\), Alami M.\(^1\), Ammani A.\(^1\)

\(^1\)Military Hospital Moulay Ismail, Dept. of Urology, Meknes, Morocco,
\(^2\)Al Ghassani Hospital, Dept. of Urology, Fes, Morocco,
\(^3\)Medical University of Vienna, Dept. of Urology, Vienna, Austria

### V33

**Robot-assisted living donor nephrectomy and renal transplantation in a twin operating room: Preliminary experience**

By: Serni S., Vignolini G., Siena G., Campi R., Sessa F., Caroassai Grisanti S., Giancane S., Pili A., Greco I., Carini M., Li Marzi V.

AOU Careggi, University of Florence, Dept. of Urology, Florence, Italy

### V34

**The use of the porcine model as part of a structured -procedure specific- robotic training program in pediatric urology**

By: Ploumidis A.\(^1\), Mottrie A.\(^2\), Hoebeke P.\(^3\), Spinoit A-F.\(^3\)

\(^1\)Athens Medical Centre, Dept. of Urology, Athens, Greece,
\(^2\)ORSI Academy, Robotic Training Programme, Melle, Belgium,
\(^3\)Ghent University Hospital, Dept. of Urology, Ghent, Belgium

### V35

**Laparoscopic pudendal nerve decompression in patient with chronic pelvic pain**


Parc Taulí University Hospital, Dept. of Urology, Sabadell, Spain

### V36

**How to make a video for European Urology**

By: Pansadoro A.\(^1\), Barillaro F.\(^2\), Pohja S.\(^3\)

\(^1\)San Giovanni Addolorata, Dept. of Urology, Rome, Italy,
\(^2\)San Bartolomeo, Dept. of Urology, La Spezia, Italy,
\(^3\)S. Giovanni Di Dio Hospital, Dept. of Urology, Gorizia, Italy
The new device for lithoextraction during conventional PCNL

By: Ali S.¹, Grigoryev N.², Ali K.², Dymov A.², Bezrukov E.², Sukhanov R.², Glybochko P.³
¹Sechenov University, Dept. of Anatomic Pathology, Moscow, Russia, ²Sechenov University, Dept. of Urology, Moscow, Russia, ³Sechenov University, Moscow, Russia

Adjustable midurethral tape for surgical treatment of stress urinary incontinence: Two-years’ follow-up

By: Kubin N.¹, Shkarupa D.¹, Staroseltseva O.¹, Shapovalova E.², Zaytseva A.¹
¹University Clinic of Saint-Petersburg State University, Dept. of Urology, Saint-Petersburg, Russia, ²University Clinic of Saint-Petersburg State University, Dept. of Gynecology, Saint-Petersburg, Russia

Lessons learned from more than 10,000 robotic assisted laparoscopic radical prostatectomies: An evidence based approach

By: Palayapalayam Ganapathi H.¹, Rocco B.², Onol F.¹, Rogers T.¹, Patel V.¹
¹Global Robotics Institute at Florida Hospital Celebration Health, Center for Urologic Cancer, Celebration, United States of America, ²University of Modena and Reggio Emilia, Dept. of Urology, Modena, Italy
Urology by exploring: New experimental technologies and techniques in benign urogenital reconstruction

Expert-Guided Poster Tour 2

Saturday 17 March
16:00 - 17:00

Location: Green Area

Chairs: D.J.M.K. De Ridder, Leuven (BE)
J. Rassweiler, Heilbronn (DE)
To be confirmed

The Expert-Guided Poster Tour is a new innovative session type. The Tour aims to provide an interactive platform informing delegates on the real essentials and providing in-depth information on the different research projects. The Expert-Guided Poster Tour consists of two parts: The first part is reserved for poster viewing. The posters will be on display for 2 hrs before the start of the Guided Poster Tour. During the second part of the Tour, the two experts acting as moderators, will ask questions to poster presenters.

PT016

Adipose-derived stem cells-seeded bladder acellular matrix graft-silk fibroin enhances bladder reconstruction in a rat model

By: Xiao D. ¹, Yan H. ¹, Zhang M. ¹, Lv X. ¹, Li W. ², Lu M. ¹
¹Ren Ji Hospital, School of Medicine, Shanghai Jiao Tong University, Dept. of Urology and Andrology, Shanghai, China, ²Renji Hospital Shanghai Jiao Tong University School of Medicine, The State Key Lab of Metal Matrix Composites, Shanghai, China

PT017

Can neoclitoris size and location affect transsexual women sexual function? A preliminary pelvic MRI study

By: Vedovo F. ¹, Bertolotto M. ², Pavan N. ¹, Chiapparone G. ¹, Bucci S. ¹, Liguori G. ¹, Silvestri T. ¹, Trombetta C. ¹
¹Azienda Sanitaria Universitaria Integrata di Trieste, Dept. of Urology, Trieste, Italy, ²Azienda Sanitaria Universitaria Integrata di Trieste, Dept. of Radiology, Trieste, Italy

PT018

Postoperative complications following plastic surgery for paraffinomas of male genitalia

By: Dunev V.R. ¹, Kolev N. ¹, Stoykov B. ¹, Genov P. ², Atanasov J. ¹, Vanov A. ¹, Tonchev P. ³, Rachev I. ³
¹Medical University Plevlen, Dept. of Urology, Plevlen, Bulgaria, ²UMHAT RUSE, Dept. of Urology, Ruse, Bulgaria, ³Medical University Plevlen, Dept. of Burns and Plastic Surgery, Plevlen, Bulgaria

PT019

Laparoscopic orchiopexy for high intra-abdominal testes in adult patients, single vs two stages

By: Hammady A.R. ¹, El-Badry M. ²
PT020

**Functional and cosmetic outcomes in adult life of distal and penile hypospadias repaired in childhood**

By: Calleja Hermosa P.¹, Campos Juanatey F.¹, Portillo Martín J.A.¹, Correas Gómez M.Á.¹, Fernández Jiménez M.I.², De Diego García E.M.², López López A.J.², Tardáguila Calvo A.R.², Velilla Díez G.¹, Herrero Blanco E.¹, Varea Malo R.¹, Fernández Guzmán E.¹, Gutiérrez Baños J.L.³

¹Hospital Universitario Marqués de Valdecilla, Dept. of Urology, Santander, Spain, ²Hospital Universitario Marqués de Valdecilla, Dept. of Pediatric Surgery, Santander, Spain, ³Hospital Universitario Marqués de Valdecilla, Dept. of Urology, Santander, Spain

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PT021

**The effect of urethroplasty surgery on erectile and orgasmic functions: A prospective study**

By: Ürkmez A.¹, Yuksel O.², Ozsoy E.¹, Sahin A.², Topaktas R.¹, Koca O.¹, Ozturk M.¹

¹University of Health Sciences, Haydarpasa Numune Research & Training Hospital, Dept. of Urology, Istanbul, Turkey, ²University of Health Sciences, Fatih Sultan Mehmet Research & Training Hospital, Dept. of Urology, Istanbul, Turkey

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PT022

**Satisfaction, quality of life and psychosocial resources of male to female transgender after gender reassignment surgery**

By: Hess J.¹, Breidenstein A.², Henkel A.¹, Tschirdewahn S.¹, Rehme C.¹, Teufel M.², Tagay S.², Hadaschik B.¹

¹University Hospital Duisburg-Essen, Dept. of Urology, Essen, Germany, ²LVR-Clinical Centre, Dept. of Psychosomatic Medicine and Psychotherapy, Essen, Germany

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PT023

**Urethral coitus in patients with congenital malformations of the vagina - case series**

By: Stojanovic B., Bizic M., Kojovic V., Bencic M., Djordjevic M.
School of Medicine, University of Belgrade, Dept. of Urology, Belgrade, Serbia

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PT025

**Penoscrotal versus minimally invasive infrapubic approach for inflatable penile prosthesis placement: A single-center matched paired analysis**

Sapienza University, Dept. of Obstetrics and Gynecology, Rome, Italy

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PT026

**Ejaculatory dysfunction after treatment for lower urinary tract symptoms. What do patients really think?**

By: Doizi S., Lukacs B.
Tenon Hospital, Assistance-Publique Hôpitaux de Paris, Pierre et Marie Curie University., Dept. of Urology, Paris, France
PT027

Efficacy and safety of selective serotonin reuptake inhibitors and phosphodiesterase-5 inhibitors in men with premature ejaculation: A systematic review and network meta-analysis

By: Tu X., Jin K., Wei Q.
West China Hospital of Sichuan University, Dept. of Urology, Chengdu, China

PT028

Predictive factors of patients’ and partners’ sexual function improvement after Collagenase clostridium histolyticum injection for Peyronie’s disease: Analysis from the largest Italian multicentre single-arm study

1AOU Careggi, Dept. of Urology, Florence, Italy, 2AOU Vittorio Emanuele, Dept. of Urology, Catania, Italy, 3AOU Federico II, Dept. of Urology, Naples, Italy, 4AOU Molinette, Dept. of Urology, Turin, Italy, 5AOU Verona, Dept. of Urology, Verona, Italy, 6Psycosexologist, Dept. of Psycosexology, Como, Italy, 7Leonardo Da Vinci Hospital, Dept. of Urology, Empoli, Italy, 8Hospital of Prato, Dept. of Urology, Prato, Italy, 9Hospital of Lucca, Dept. of Urology, Lucca, Italy, 10Cattinara Hospital of Trieste, Dept. of Urology, Trieste, Italy

PT029

Kidneys from Maastricht category III: Does NECMO influence on DGF?

By: Beato Garcia S., Fiol M., Etcheverry B., Riera L., Suárez J.F., Gil-Vernet S., Vigués F.
1Hospital Universitario Bellvitge, Dept. of Urology, Hospitalet de Llobregat, Spain, 2Hospital Universitario Bellvitge, Dept. of Nephrology, Hospitalet de Llobregat, Spain

PT030

The long-term effect of suprapubic-assisted laparoendoscopic single-site surgery for inserting ureteral reimplantation

By: Zou X., Zhang G., Xiao G., Wang X., Yuan Y., Xiao R.
First Affiliated Hospital of Gannan Medical University, Dept. of Urology, Ganzhou, China

PT031

Transnephrostomic ICG guided robotic ureteral reimplantation for ureteroileal strictures after robotic cystectomy and neobladder

By: Simone G., Minisola F., Tuderti G., Vallati G., Misuraca L., Ferriero M., Guaglianone S., Gallucci M.
1Regina Elena National Cancer Institute, Dept. of Urology, Rome, Italy, 2Regina Elena National Cancer Institute, Dept. of Radiology, Rome, Italy

PT032

Early discharge in patients with low grade renal trauma: Results of the TRAUMAFUF multicentre study

PT033

Syringoceles of Cowper’s ducts and glands in adult men – an uncommon pathology with potentially serious consequences

By: Bugeja S., Ivaz S., Frost A., Andrich D., Allen C., Mundy A.

University College London Hospitals, NHS Foundation Trust, Reconstructive Urology Unit, London, United Kingdom

PT034

Use of a new urethral catheterisation device (UCD) to reduce the risks of urethral trauma due to urethral catheterisation

By: Bugeja S.¹, Yim I.², Tamimi A.³, Roberts N.⁴, Mundy A.¹

¹University College London Hospitals, NHS Foundation Trust, Reconstructive Urology Unit, London, United Kingdom, ²University College London Hospitals, NHS Foundation Trust, The Heart Hospital, London, United Kingdom, ³University College London Hospitals, NHS Foundation Trust, The Heart Hospital, Dept. of Radiology, London, United Kingdom, ⁴University College London Hospitals, NHS Foundation Trust, The Heart Hospital, The new Barts Heart Centre, London, United Kingdom

PT035

Urinary IL-33 and galectin-3 increase in patients with interstitial cystitis/bladder pain syndrome

By: Kochiashvili G., Kochiashvili D.

Tbilisi State Medical University, Dept. of Urology, Tbilisi, Georgia

PT036

Surgical approaches and outcomes in the treatment of adult male urethrocutaneous fistula at a large tertiary referral centre

By: Park J.J.¹, Esperto F.², Osman N.², Inman R.², Chapple C.²

¹Changi General Hospital, Dept. of Urology, Singapore, Singapore, ²Sheffield Teaching Hospitals, Dept. of Reconstructive Urology, Sheffield, United Kingdom

PT037

Repair of cystocele and apical genital prolapse using OPUR® 6-strap sling mesh implant. The experience of the first 100 operations
PT038 Robot-assisted bladder diverticulectomy: Perioperative and functional outcomes of a multicenter study


1USC Institute of Urology, Keck Medicine of USC, University of Southern California, Dept. of Urology, Los Angeles, United States of America, 2Guy's and St Thomas' Hospitals NHS Foundation Trust and Kings College, Dept. of Urology, London, United Kingdom, 3University of Verona, Dept. of Urology, Verona, Italy, 4Guy's and St Thomas' Hospitals NHS Foundation Trust and Kings College, Dept. Of Urology, London, United Kingdom

PT039 Management of urinary/perineal fistulae complicating the modern treatment of rectal cancer

By: Bugeja S., Ivaz S., Frost A., Dragova M., Andrich D., Mundy A.

University College London Hospitals, NHS Foundation Trust, Reconstructive Urology Unit, London, United Kingdom

PT040 Prospective randomized comparison of repairing simple vesicovaginal fistula with or without interposition flap

By: Singh V., Sinha R., Bansal A., Purkait B., Mehrotra S.

1King George Medical University, Dept. of Urology, Lucknow, India, 2King George Medical University, Dept. of Obstetrics and Gynaecology, Lucknow, India

PT041 The comparison of therapeutic efficacy of CHA1 MSC and ADMSC and evaluate the therapeutic mechanism in a chronic interstitial cystitis rat model

By: Choi K.H., Lee S.R., Hong Y.K., Park D.S., Jang S.H., Lee Y.E., Hong J.Y.

1CHA Bundang medical center, CHA University, Dept. of Urology, Seongnam, Korea, South, 2Bundang Jesaeng General Hospital, Dept. of Urology, Seongnam, Korea, South

PT042 Limited accuracy of transurethral and periurethral intrasphincteric injections of cellular suspension


1Medical University of Warsaw, Dept. of Urology, Warsaw, Poland, 2Medical University of Warsaw, Dept. of Immunology, Warsaw, Poland, 3Warsaw University of Life Sciences, Dept. of Large Animal Diseases, Warsaw, Poland

PT043 Withdrawn

To be confirmed
<table>
<thead>
<tr>
<th>Date</th>
<th>Time</th>
<th>Session Title</th>
<th>Speaker</th>
<th>Location</th>
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</table>
| Sunday 18 March | 07:30 - 08:00 | **Game changing session**                                        | **Location:** Green Area, eURO Auditorium (Level 0) | **Chairs:** F. Montorsi, Milan (IT)  
M. Wirth, Dresden (DE) |
|            | 07:30 - 07:45 | Update on immunotherapy in renal cell and bladder cancer       | M-O. Grimm, Jena (DE)  |
|            | 07:45 - 08:00 | New standard of care for hormone sensitive prostate cancer      | N. Mottet, Saint-Étienne (FR) |
Prostate cancer
Plenary Session 3

Sunday 18 March
08:00 - 10:30

Location: Green Area, eURO Auditorium (Level 0)

Chairs: F. Montorsi, Milan (IT)
        M. Wirth, Dresden (DE)

Aims and objectives of this session
This initial part of the session aims to illustrate the level and availability of genomic information needed to risk classify profile tumours according to their genetic profile. The audience will understand why efforts are made to develop genetic tests, and what is needed to make this a clinical tool.

08:00 - 08:25
Debate Genomic screening before active surveillance - Enough data?
Moderator: C.H. Bangma, Rotterdam (NL)

08:00 - 08:10
Genomic screening should be done
M.R. Cooperberg, San Francisco (US)

08:10 - 08:20
Clinical data and imaging are doing the job
O. Rouviere, Lyon (FR)

08:20 - 08:25
Discussion

08:25 - 08:40
European Society for Medical Oncology (ESMO) lecture Metastatic castration-resistant prostate cancer (mCRPC)
G. Attard, Sutton (GB)

08:40 - 09:35
Case-based debate Positron Emission Tomography–Computed Tomography (PET-CT) detected oligometastatic disease
Moderator: A. Briganti, Milan (IT)

08:40 - 08:45
Case presentation
A. Briganti, Milan (IT)

08:45 - 08:55
Systemic therapy is the standard of care
S. Gillessen Sommer, St. Gallen (CH)

08:55 - 09:05
Local control is needed
S. Joniau, Leuven (BE)

09:05 - 09:15
Local and metastasis imaging targeted treatments are needed
G. De Meerleer, Ghent (BE)

09:15 - 09:25
The EAU Guidelines perspective
N. Mottet, Saint-Étienne (FR)

09:25 - 09:35
Discussion
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<tr>
<th>Time</th>
<th>Session</th>
<th>Speaker/Location</th>
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<tbody>
<tr>
<td>09:35 - 09:45</td>
<td>Highlights from the poster sessions Androgen Receptor (AR) targeted therapy for non-metastatic Castration-Resistant Prostate Cancer (CRPC)</td>
<td>M. De Santis, Coventry (GB)</td>
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<tr>
<td>09:45 - 10:30</td>
<td>Case-based debate Locally advanced non-metastatic cancer in elderly patients</td>
<td>N.W. Clarke, Manchester (GB)</td>
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<tr>
<td>09:45 - 09:50</td>
<td>Case presentation</td>
<td>N.W. Clarke, Manchester (GB)</td>
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<tr>
<td>09:50 - 10:00</td>
<td>Geriatric assessment</td>
<td>A. Morgans, Nashville (US)</td>
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<tr>
<td>10:00 - 10:10</td>
<td>Systemic treatment</td>
<td>K. Fizazi, Villejuif (FR)</td>
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<tr>
<td>10:10 - 10:20</td>
<td>Local treatment</td>
<td>C. Cozzarini, Milan (IT)</td>
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<tr>
<td>10:20 - 10:30</td>
<td>Discussion</td>
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Aims and objectives of this session

The aims and objectives of this session are to emphasise the fact that overactive bladder is a non-specific symptom complex and indeed "the bladder is an unreliable witness" and that there are a number of potential physiological causes for the symptom complex overactive bladder. Treatment options after failed conservative management and drug therapy will be discussed. Continuing the theme of this session, lower urinary tract symptoms in the context of both stable and progressive neurogenic disease states and the important issue of age and the influence of polypharmacy when considering the management of OAB will be addressed.

A case presentation will focus on the dilemma concerning lower urinary tract symptoms associated with benign prostatic obstruction and the effect of surgery to relieve obstruction on these symptoms.

Take home message: The attendee at this session will understand the non-specific nature of urinary tract symptoms and appreciate current concepts on the appropriate investigation and management thereof including the potential effect of surgery for benign prostatic obstruction on associated lower urinary tract symptoms.
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<tr>
<th>Time</th>
<th>Session</th>
<th>Speaker/Location</th>
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<tbody>
<tr>
<td>09:10 - 09:25</td>
<td><strong>LUTS and progressive neurogenic disease</strong></td>
<td>X. Gamé, Toulouse (FR)</td>
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<tr>
<td>09:25 - 09:40</td>
<td><strong>Age, polypharmacy and OAB</strong></td>
<td>A. Wagg, Edmonton (CA)</td>
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<tr>
<td>09:40 - 10:15</td>
<td><strong>Case-based debate</strong> Management of storage LUTS before and after Benign Prostate Enlargement (BPE) surgery**</td>
<td>Moderator: P. Abrams, Bristol (GB)</td>
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<tr>
<td>09:40 - 09:45</td>
<td><strong>Case presentation</strong></td>
<td>P. Abrams, Bristol (GB)</td>
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<tr>
<td>09:45 - 09:55</td>
<td><strong>Before surgery</strong></td>
<td>M. Oelke, Gronau (DE)</td>
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<tr>
<td>09:55 - 10:05</td>
<td><strong>After surgery</strong></td>
<td>S. De Wachter, Edegem (BE)</td>
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<tr>
<td>10:05 - 10:15</td>
<td><strong>Discussion</strong></td>
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Office management of male sexual dysfunction
ESU Course 17

Location: Orange Area, Room 1 (Level 0)
Chair: C. Stief, Munich (DE)

Aims and objectives of this session
The course is aimed at providing practical advice on how to diagnose and treat a patient with Premature ejaculation or ED. It will allow
• An up-to-date understanding of the aetiology of ED and EP.
• An adequate work up enabling an individually adopted regimen.
• Currently available treatment options as topical and oral drugs, testosterone and devices.
• Post-prostatectomy ED with various approaches.

Introduction
C. Stief, Munich (DE)

Diagnostics - What is necessary?
I. Eardley, Leeds (GB)

Testosterone replacement
C. Stief, Munich (DE)

Oral therapy for ED
I. Eardley, Leeds (GB)

Therapy of ED when pills fail
D.J. Ralph, London (GB)

Medical therapy for premature ejaculation
I. Eardley, Leeds (GB)

Surgical topics: Penile implants, priapism, Peyronie's
D.J. Ralph, London (GB)

What to do after radical prostatectomy?
C. Stief, Munich (DE)
Update on stone disease
ESU Course 18

Location: Orange Area, Room 2 (Level 0)
Chair: A. Patel, London (GB)

Aims and objectives of this session
The previously devastating burden of urinary tract urolithiasis has been reduced by modern stone therapy. Complex branched stones are rare, and therapy has moved largely to the outpatient setting. Nevertheless, successful management requires competence in all aspects of stone management. After a brief review of new developments in present treatment strategies, these will be further explored by interactive case presentations.

• Stone disease aetiology is multi-factorial, relating in large part to genetics, diet (salt, calorie and protein intake), hydration status factors and ageing.
• The clinical presentation is changing with a growing base of elderly and obese patient cohorts in developed nations.
• Today’s challenge is employing the ideal initial and salvage approaches for specific situations - individuals, including judicious selection of prevention strategies.
• Patients should be given choices and counselled about the risk benefits and potential outcomes of all appropriate reasonable approaches.

Introduction
A. Patel, London (GB)

Medical aspects of urinary stones
M. Straub, Munich (DE)

SWL
M. Straub, Munich (DE)

Uretero-Renoscopy
A. Breda, Barcelona (ES)

Percutaneous nephrolithotomy and questions and answers
A. Patel, London (GB)

Interactive case discussion
A. Patel, London (GB)
Aims and objectives of this session
This novel course will give a state of the art update on the variety of penile diseases that Urologists will encounter in everyday clinical practice. The faculty consists of a group of internationally renowned experts in this field. A spectrum of pathologies can affect the penis including benign disorders to cancers. There will be particular focus on interactive case based discussions highlighting the pit falls and controversies in management of penile diseases;

• The aetiology, diagnosis and medical management of the common penile diseases including inflammatory conditions of the penis.
• The medical and surgical management of HPV, BXO and pre-malignant conditions of the penis.
• The medical and surgical management of Peyronie’s disease.
• The course will also deal with the surgical management of these diseases including the surgical indications and surgical techniques used in penile reconstructive surgery.
• The management of penile carcinoma including the aetiopathogenesis, techniques/outcome of organ sparing surgery and surgical management of advanced disease including lymphadenectomy will be discussed.

Peyronie's disease
S.S. Minhas, London (GB)

Penile dermatology for the urologist
C. Bunker, London (GB)

Surgical management of penile diseases
S.S. Minhas, London (GB)

HPV, premalignant lesions and penile cancer
S.S. Minhas, London (GB)

Management of penile cancer and lymph nodes
C. Protzel, Rostock (DE)
Advanced course on laparoscopic renal surgery
ESU Course 20

Location: Orange Area, Room 4 (Level 0)
Chair: V. Pansadoro, Rome (IT)

Aims and objectives of this session
Minimally invasive surgery has steadily improved over the last years. Today one can approach with confidence new, difficult and challenging situations. The course is structured to evaluate and explore the increasing indications and possible complications of laparoscopic and robotic kidney surgery. This course will focus upon common and uncommon complications and how to manage and prevent them. In addition, special situations such as single port inguinal approach, zero ischemia time, cava thrombus, accidental splenectomy and living donor nephrectomy will be presented.

Introduction
R. Bollens, Lomme (FR)
V. Pansadoro, Rome (IT)

Transperitoneal approach
V. Pansadoro, Rome (IT)

Retroperitoneal approach
R. Bollens, Lomme (FR)
V. Pansadoro, Rome (IT)

Single port inguinal approach
R. Bollens, Lomme (FR)

Intraoperative complications
R. Bollens, Lomme (FR)
V. Pansadoro, Rome (IT)

Difficult nephrectomies
R. Bollens, Lomme (FR)

Partial nephrectomy
R. Bollens, Lomme (FR)
V. Pansadoro, Rome (IT)

Special cases
R. Bollens, Lomme (FR)
V. Pansadoro, Rome (IT)
Advanced course on urethral stricture surgery
ESU Course 21

Location: Orange Area, Room 5 (Level 0)
Chair: R. Inman, Sheffield (GB)

Aims and objectives of this session
The advanced urethral stricture course will cover the assessment and surgical treatment of strictures of the penile, bulbar and posterior urethra. General principles of assessment and follow up, oral mucosa harvest and complications will be reviewed with evidence. Techniques of penile, bulbar and full length urethroplasty will be discussed and compared and cases reviewed with audience participation encouraged.
Pelvic fracture urethral injuries will also be discussed together with management techniques. Female urethroplasty will also be discussed and assessed.
Prior knowledge of relevant anatomy and basic endoscopic techniques will be helpful to those attending the course.

Introduction
R. Inman, Sheffield (GB)

General principles in urethral stricture surgery and cases
P. Nyirády, Budapest (HU)

Penile urethroplasty and cases
R. Inman, Sheffield (GB)

Bulbar and full length urethroplasty and cases
R. Inman, Sheffield (GB)

Posterior urethroplasty and cases
L. Martínez Piñeiro, Madrid (ES)

Female urethroplasty
R. Inman, Sheffield (GB)
Chronic pelvic pain in men and women
ESU Course 22

Sunday 18 March
08:30 - 11:30

Location: Orange Area, Room 6 (Level 0)
Chair: B. Messelink, Groningen (NL)

Aims and objectives of this session
The urologist is often dealing with patients having Chronic Pelvic Pain. This course will offer the urologist practical guidance in treating these patients. In the case discussion the participants will have the opportunity to help outlining the problem. In the lectures theoretical knowledge will be translated into daily guidelines for diagnostics and treatment of patients with pelvic pain.
At the end of this course the participant will
• Know the basic principles of treating patients with chronic pelvic pain.
• Know how to rule out well known causes.
• Have knowledge of the myofascial and psychological aspects.
• Be able to refer patients at the right time to the right team.

Chronic pelvic pain, the basics: Mechanisms and terminology
B. 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
B. Messelink, Groningen (NL)

Chronic pelvic pain in women: Practical guidelines on diagnostics and treatment
B. Messelink, Groningen (NL)

The interdisciplinary approach: Team members and organisation
D.S. Engeler, St. Gallen (CH)
Aims and objectives of this session
This course addresses comprehensively important anatomical considerations for open and minimally invasive radical prostatectomy and partial nephrectomy. Key technical aspects such as access, port placement, robotic docking and each step of the procedures will be discussed. Additionally, interfascial and intrafascial 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.

Introduction
J-U. Stolzenburg, Leipzig (DE)

Pelvic and surgical anatomy for laparoscopic/robotic radical prostatectomy (RPE)
H.A.R. Qazi, London (GB)
J-U. Stolzenburg, Leipzig (DE)

Surgical anatomy for laparoscopic/robotic assisted radical cystectomy
J. Cresswell, Middlesbrough (GB)

Port placement and robot docking-principles for pelvic laparoscopy
J. Cresswell, Middlesbrough (GB)
H.A.R. Qazi, London (GB)
J-U. Stolzenburg, Leipzig (DE)

Prostate, bladder and urethral sphincter anatomy. How to preserve urinary continence
J. Cresswell, Middlesbrough (GB)
H.A.R. Qazi, London (GB)
J-U. Stolzenburg, Leipzig (DE)

Surgical anatomy for nerve sparing surgery
J. Cresswell, Middlesbrough (GB)
J-U. Stolzenburg, Leipzig (DE)

Boundaries and technique of pelvic lymph node dissection for radical prostatectomy (standard, extended PLNA, risk stratified access) and radical cystectomy
J. Cresswell, Middlesbrough (GB)
H.A.R. Qazi, London (GB)
<table>
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<th>Summary and take home messages</th>
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ESU/ESUT Hands-on Training Course in Basic laparoscopy
Sponsored by KARL STORZ

Location: Yellow Area, Room 1 (Level 0)

Chairs: D. Veneziano, Reggio Calabria (IT)
A.S. Gözen, Heilbronn (DE)

Tutors: To be confirmed
B. Petrut, Cluj Napoca (RO)
To be confirmed
D. Rengifo Abbad, Majadahonda (ES)
To be confirmed
R. Sanchez-Salas, Paris (FR)
To be confirmed
G. Bozzini, Castellanza (IT)
To be confirmed
T.M. Ribeiro De Oliveira, Lisbon (PT)
M. Arslan, Izmir (TR)
P. Macek, Prague 2 (CZ)
J-T. Klein, Ulm (DE)

Aims and objectives of this session
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.

• You will improve your laparoscopic skills such as depth perception and bimanual dexterity
ESU/ESUT Hands-on Training Course in Thulium laser for vaporesection and holmium laser for laser lithotripsy
Sponsored by LISA LASER

Sunday 18 March
09:00 - 10:30

Location: Yellow Area, Room 2 (Level 0)
Chair: G. Muto, Torino (IT)
Tutors: C. Netsch, Hamburg (DE)
To be confirmed
To be confirmed
To be confirmed
A. Elshal, Mansoura (EG)
To be confirmed
J. Ellinger, Bonn (DE)
To be confirmed
R. Muschter, Rotenburg (DE)

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

Aims and objectives for Holmium laser lithotripsy:
• The fragmentation effect on artificial stones by the Holmium laser at different laser settings and the importance of the fibre position with respect to the stone,
• The handling of rigid and flexible ureterorenoscopes,
• The importance and influence of the irrigation management.
ESU/ESFFU Hands-on Training Course in Sacral Neuromodulation
Sponsored by MEDTRONIC

**Sunday 18 March**
**09:00 - 10:30**

**Location:** Yellow Area, Room 3 (Level 0)

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

**Tutors:**
- M. Belal, Birmingham (GB)
- E. Chartier-Kastler, Paris (FR)
- S. Musco, Florence (IT)
- L. Thomas, Bristol (GB)
- K-D. Sievert, Rostock (DE)
- P.E. Van Kerrebroeck, Maastricht (NL)

**Aims and objectives of this session**
A practical hands-on workshop that will allow the participants to practice on models the different steps of performing sacral neuromodulation including primary percutaneous nerve evaluation, tined lead and battery implantation and programming and also troubleshooting.

- Understand the indications for SNM
- Be able to perform the different steps of the procedure in a standardized format
- Be able to troubleshoot problems with SNM
ESU/ESUI Hands-on Training Course in Prostate MRI reading for urologists

HOT 16

Sunday 18 March
09:00 - 12:30

Location: Yellow Area, Room 4 (Level 0)

Chair: C. Moore, London (GB)
C.L. Dickinson, London (GB)
I.G. Schoots, Rotterdam (NL)
L. Budäus, Hamburg (DE)
A. Borkowetz, Dresden (DE)

Tutors: To be confirmed

Aims and objectives of this session

This course will provide interactive teaching from expert Faculty in prostate MRI reading and interpretation and help Urologists to understand the role MRI plays in the management of patients with prostate cancer and how to use the information generated by prostate MRI. The course will address how to use an imaging workstation, how to understand the basic concepts/principles behind different MRI sequences (T2-weighted imaging, DWI-imaging and DCE-imaging), in which order to view the different sequences when interpreting prostate MRI, how to use the PI-RADS and Likert scoring system to score MRIs, and finally to understand what are the standards for a prostate MRI and what quality criteria need to be fulfilled. The participants will do hands on reading and assessment of prostate MRI scans on their own laptops followed by a reference reading provided by expert radiologists and pathological verification.
ESU/ERUS Hands-on Training Course in Robotic surgery - Introduction
Sponsored by 3D SYSTEMS SIMBIONIX, MIMIC, INTUITIVE SURGICAL

Sunday 18 March
09:00 - 10:30

Location: Yellow Area, Room 5 (Level 0)
Chair: J.S. Schraml, Usti Nad Labem (CZ)
Tutor: W.M. Brinkman, Rotterdam (NL)

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

Improve your robotic surgery skills in the following areas:
• Endowrist manipulation
• Camera Control
• 3rd Arm Control
• Needle Placement and Driving
• Suturing and Knot Tying
## Latest and hot news in medical treatment in onco-urology

**Specialty Session**

### Sunday 18 March
**10:30 - 12:00**

- **Location:** Green Area, eURO Auditorium (Level 0)
- **Chairs:** F. Montorsi, Milan (IT)  
  M. Wirth, Dresden (DE)

<table>
<thead>
<tr>
<th>Time</th>
<th>Topic</th>
<th>Presenter</th>
<th>Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>10:30</td>
<td>Conclusions from recent oncology meetings regarding:</td>
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<tr>
<td>10:30 - 10:45</td>
<td><strong>Hormone-naive prostate cancer</strong></td>
<td>S. Joniau, Leuven (BE)</td>
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<tr>
<td>10:45 - 11:00</td>
<td><strong>Castration resistant prostate cancer</strong></td>
<td>C.P. Evans, Sacramento (US)</td>
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<tr>
<td>11:00 - 11:15</td>
<td><strong>Urothelial cancer</strong></td>
<td>T. Powles, London (GB)</td>
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<tr>
<td>11:15 - 11:30</td>
<td><strong>Renal cell cancer</strong></td>
<td>J. Bedke, Tübingen (DE)</td>
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<tr>
<td>11:30 - 11:45</td>
<td><strong>Testis and penile cancer</strong></td>
<td>A. Necchi, Milan (IT)</td>
<td></td>
</tr>
<tr>
<td>11:45 - 12:00</td>
<td><strong>Interaction between medical, urological and radiooncological treatment</strong></td>
<td>P.L. Nguyen, Boston (US)</td>
<td></td>
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</tbody>
</table>
Aims and objectives of this session
The session aims to discuss the pitfalls and advantages of current definitions in terms of research and management of Underactive Bladder (UAB). UAB broadly defines a symptom complex of bladder emptying problems and does not indicate a specific pathology. Pathophysiological mechanisms underlying UAB will be discussed. Treatment of underactive bladder will be reviewed on case studies with pro and con positions: TURP in male with BPO and detrusor hypocontractility, and the case of SNS in a young female with dysfunctional voiding and defecation problems.

10:30 - 10:45
Is underactive bladder a clinical entity?
N.I. Osman, Sheffield (GB)

10:45 - 11:00
What pathophysiological mechanisms is basic science unrevealing in underactive bladder?
T. Antunes Lopes, Porto (PT)

11:00 - 12:00
Case discussion  Treatment based on case studies

11:00 - 11:05
Moderator and case presenter: Man 60 yrs with Benign Prostatic Obstruction (BPO) and hypocontractility: Transurethral Resection of the Prostate (TURP)?
G. Van Koeveringe, Maastricht (NL)

11:05 - 11:15
Pro
E. Finazzi Agrò, Rome (IT)

11:15 - 11:25
Con
S. Madersbacher, Vienna (AT)

11:25 - 11:30
Discussion

11:30 - 11:35
Moderator and case presenter: Female 25 with dysfunctional voiding and defecation problems: Sacral Nerve Stimulation (SNS)
A. Tubaro, Rome (IT)

11:35 - 11:45
Pro
H.C. Kuo, Hualien (TW)

11:45 - 11:55
Con
D.M. Castro Díaz, Santa Cruz de Tenerife (ES)

11:55 - 12:00
Discussion
**Challenges in uro-oncology: Bladder cancer in the elderly**

**Thematic Session 02**

**Sunday 18 March**

**10:30 - 12:00**

**Location:** Green Area, Room 2 (Level 0)

**Chairs:** M. Babjuk, Prague (CZ)

J. Bjerggaard Jensen, Aarhus (DK)

**Aims and objectives of this session**

The ageing of the population is the phenomenon apparent in all developed countries. It is connected with increasing incidence of several malignancies including bladder cancer. As muscle invasive bladder cancer is life threatening disease even in elderly patients, remains radical cystectomy important tool in our armamentarium.

The aim of the session is to discuss all aspects of radical surgery in a frail elderly population. Very important is preoperative assessment of patients’ frailty and identification of those, who will profit from radical approach. There is no doubt, that the essential role for the fate of the patient is the high quality of surgery and perioperative care, which should be concentrated in high volume centers.

Significant number of dangerous complications, particularly gastroinestinal, are connected with urinary diversion. Careful selection of method of diversion seems to be of special importance. For the most frail patients, the cutaneous ureterostomy possibly with extraperitoneal approach, could be a valid option. It does not require bowel isolation and manipulation, reduces operation time, number of bowel and metabolic complications by maintaining radicality of surgery and reasonable quality of life. For patients who are not fit enough for surgery, the optimal palliative approach must be identified.

<table>
<thead>
<tr>
<th>Time</th>
<th>Event</th>
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<tbody>
<tr>
<td>10:30 - 10:45</td>
<td><strong>Pre-operative assessment in elderly cancer patients</strong></td>
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<tr>
<td></td>
<td>G. Niegisch, Düsseldorf (DE)</td>
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<tr>
<td>10:45 - 11:00</td>
<td><strong>Curative treatment for muscle-invasive bladder cancer in elderly patients: A systematic review</strong></td>
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<td>V. Fonteyne, Ghent (BE)</td>
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<tr>
<td>11:00 - 11:15</td>
<td><strong>Optimising anesthesia in the frail patient: What the urologist needs to know</strong></td>
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<td>P.Y. Wüthrich, Berne (CH)</td>
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<tr>
<td>11:15 - 11:45</td>
<td><strong>Debate</strong> The critically ill patient with locally advanced bladder cancer - Ureterocutaneostomy?</td>
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<td>Moderator: M. Babjuk, Prague (CZ)</td>
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<tr>
<td>11:15 - 11:25</td>
<td><strong>Yes</strong> A. Pycha, Bolzano (IT)</td>
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<tr>
<td>11:25 - 11:35</td>
<td><strong>No</strong> S. Siemer, Homburg (DE)</td>
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<tr>
<td>Time</td>
<td>Session</td>
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<tr>
<td>11:35 - 11:45</td>
<td>Discussion</td>
</tr>
</tbody>
</table>
| 11:45 - 12:00| The best local palliative treatment for inoperable patients  
I.M. Van Oort, Nijmegen (NL) |
Testis cancer: Important topics
Thematic Session 03

Sunday 18 March 10:30 - 12:00

Location: Red Area, Room 1 (Level 0)
Chair: P. Albers, Düsseldorf (DE)

10:30 - 10:45
Fertility: An overview
C.F.S.J. Jensen, Herlev (DK)

10:45 - 11:15
Debate
Recommended treatment for Seminoma Stage I

10:45 - 10:55
Carboplatin chemotherapy
J. Oldenburg, Lørenskog (NO)

10:55 - 11:05
Surveillance
R. Hamilton, Toronto (CA)

11:05 - 11:15
Discussion

11:15 - 11:30
New molecular tumour markers for germ cell tumours - Ready for prime time?
K.P. Dieckmann, Hamburg (DE)

11:30 - 12:00
Debate
Laparoscopic/robot-assisted postchemotherapy residual tumour resection

11:30 - 11:40
Pro
C. Schwentner, Stuttgart (DE)

11:40 - 11:50
Con
A. Heidenreich, Cologne (DE)

11:50 - 12:00
Discussion
Recent developments in imaging of the prostate
Thematic Session 04

Sunday 18 March
10:30 - 12:00

Location: Red Area, Room 2 (Level 0)
Chairs: P.J.L. De Visschere, Ghent (BE)
A. Villers, Lille (FR)

Aims and objectives of this session
Prostate MR and recent ultrasound imaging are present in our evaluation for prostate cancer diagnosis, staging and treatment planning. How can we refine imaging, making it more acceptable for patients, less time consuming and efficient for diagnosis and staging?

10:30 - 10:45
Prostate cancer bi-parametric versus multi-parametric Magnetic Resonance Imaging (MRI)
J. Barentsz, Nijmegen (NL)

10:45 - 11:00
Will sophisticated ultrasound replace Magnetic Resonance Imaging (MRI)?
G. Salomon, Hamburg (DE)

11:00 - 11:10
The current role of 3D printing
O.U. Ukimura, Kyoto (JP)

11:10 - 11:45
Clinical case Younger prostate cancer patient with rising Prostate Specific Antigen (PSA)
Moderator: A. Govorov, Moscow (RU)

11:10 - 11:13
Case presentation
A. Govorov, Moscow (RU)

11:13 - 11:22
Pitfalls on MRI
D.J. Rosario, Sheffield (GB)

11:22 - 11:31
European Association of Nuclear Medicine (EANM) lecture Additional value of Positron Emission Tomography–Computed Tomography (PET-CT)
S. Fanti, Bologna (IT)

11:31 - 11:40
Ultrasound is enough
T. Loch, Flensburg (DE)

11:40 - 11:45
Conclusion
A. Govorov, Moscow (RU)

11:45 - 11:55
Associated abstract presentations

1221
Clinical results of salvage PSMA-radioguided surgery in recurrent prostate cancer
By: Horn T. ¹, Rauscher I. ², Eiber M. ², Wester H.J. ³, Schottelius M. ³, Heck M.M. ¹, Gschwend J.E. ¹, Maurer T. ¹
Assessing the under-estimation of nodal tumour burden by 68Ga-PSMA and 11C-choline PET/CT scan in patients treated with salvage lymph node dissection for nodal recurrence of prostate cancer: A large multi-institutional analysis

By: Fossati N. 1, Suardi N. 1, Gandaglia G. 1, Bravi C.A. 1, Robesti D. 1, Soligo M. 2, Karnes R.J. 2, Schmautz M. 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. 6, Kalz A. 7, Osmonov D. 7, Juenemann K. 7, Rajarubendra N. 8, Gill I.S. 8, Mottrie A. 9, Montorsi F. 1, Briganti A. 1

1Vita-Salute University San Raffaele, Dept. of Urology, Milan, Italy, 2Mayo Clinic, Dept. of Urology, Rochester, MN, United States of America, 3University of Cologne, Dept. of Urology, Cologne, Germany, 4Ludwig-Maximilians-University, Dept. of Urology, Munich, Germany, 5University Hospitals Leuven, Dept. of Urology, Leuven, Belgium, 6University Hospitals Leuven, Dept. of Urology, Leuven, Germany, 7University Hospital Schleswig Holstein, Urology and Pediatric Urology, Campus Kiel, Germany, 8University of Southern California, USC Institute of Urology, Los Angeles, CA, United States of America, 9OLV Ziekenhuis Aalst, Dept. of Urology, Melle, Belgium

Late breaking news Comparison between the diagnostic accuracy of high resolution micro-ultrasound versus multiparametric MRI in the detection of prostate cancer: Preliminary results from a single institutional ongoing prospective trial

G. Lughezzani, Rozzano (IT)
Avoiding, managing and responding to pelvic floor surgical complications
Thematic Session 05

Location: Red Area, Room 3 (Level 0)

Chairs: D.J.M.K. De Ridder, Leuven (BE)
P. Zimmern, Dallas (US)

Aims and objectives of this session
Back to the future? Now that vaginal mesh implants have been abandoned for most indications, what are the remaining options and how can we avoid anatomical and functional complications. Let’s go back to the basics and ask the right questions.

10:30 - 10:45
Functional complications: Incontinence and voiding dysfunction, pain and dyspareunia
R. Lee, New York (US)

10:45 - 11:05
Know your anatomy and anatomical landmarks
P. Bonnet, Liege (BE)

11:05 - 11:20
Can I still use mesh for Pelvic Organ Prolapse (POP) repair?
T. Tarcan, Istanbul (TR)

11:20 - 11:40
Debate Vaginal surgery is out: Long live the abdominal approach for POP

11:20 - 11:30
Pro
A. Haferkamp, Mainz (DE)

11:30 - 11:40
Con
P. Zimmern, Dallas (US)

11:40 - 11:50
Management of functional complications of mesh sling
P. Zimmern, Dallas (US)

11:50 - 12:00
What have we learned from this session and what would be best practice?
D.J.M.K. De Ridder, Leuven (BE)
Semi-live session: Oncological surgery under scrutiny
Thematic Session 06

Sunday 18 March
10:30 - 12:00

<table>
<thead>
<tr>
<th>Time</th>
<th>Event</th>
</tr>
</thead>
</table>
| 10:30 - 10:45 | Video presentation Robotic extended lymph node dissection for prostate and bladder cancer  
H.G. Van Der Poel, Amsterdam (NL) |
| 10:45 - 11:00 | Panel of commentators                                               |
| 11:00 - 11:15 | Video presentation Robotic salvage radical prostatectomy  
X. Cathelineau, Paris (FR) |
| 11:15 - 11:30 | Panel of commentators                                               |
| 11:30 - 11:45 | Video presentation Laparoscopic adrenalectomy  
F. Porpiglia, Turin (IT) |
| 11:45 - 12:00 | Panel of commentators                                               |

Location: Blue Area, Room 1 (Level 0)
Panel: A. Briganti, Milan (IT)  
J.P.F.A. Heesakkers, Nijmegen (NL)  
G. Janetschek, Salzburg (AT)

Aims and objectives of this session
This semi-live session aims at describing step-by-step minimally invasive challenging procedures in the field genito-urinary cancers. Although laparoscopic and robotic approaches have taken the lead in the treatment of pelvic and retroperitoneal tumours, outcomes are still highly dependent on surgical skills and expertise. This session focuses on tips and tricks by recognised international experts aimed at optimising peri-operative and long-term outcomes of challenging minimally invasive surgeries.
End-stage renal disease and kidney transplantation: What the urologist needs to know
Thematic Session 07

Sunday 18 March 10:30 - 12:00

Location: Blue Area, Room 2 (Level 0)

Chairs: M-O. Grimm, Jena (DE)
        E. Lledó García, Madrid (ES)

Aims and objectives of this session
Patients planned for renal transplantation harbour complex medical problems due to the underlying disease and the consequences of end-stage renal disease. This session summarises frequent challenges for the urologist treating potential transplant recipients including polycystic kidney disease, urological and nephrological problems. Recently, robotic kidney transplantation has been invented by expert centers. In this session pros and cons as well as technical aspects of this fascinating technique will be critically discussed. Finally, diagnosis and treatment of complications after transplantation are presented.

10:30 - 10:45
Management of polycystic kidney disease
A.J. Figueiredo, Coimbra (PT)

10:45 - 11:00
The transplant recipient: Diagnosis and treatment of urologic problems
J.D. Olsburgh, London (GB)

11:00 - 11:18
Challenges of end-stage renal disease
B. Schröppel, Ulm (DE)

11:18 - 11:38
Point-counterpoint session Renal transplantation:

11:18 - 11:28
The advantages of the robotic approach
A. Breda, Barcelona (ES)

11:28 - 11:38
Open surgery remains the gold standard
O. Hakenberg, Rostock (DE)

11:38 - 11:53
Dealing with complications after renal transplantation
E. Lledó García, Madrid (ES)

11:53 - 12:00
Associated video abstract presentation

V33
Robot-assisted living donor nephrectomy and renal transplantation in a twin operating room: Preliminary experience

By: Serni S., Vignolini G., Siena G., Campi R., Sessa F., Caroassai Grisanti S., Giancane S., Pili A., Greco I., Carini M., Li Marzi V.
AOU Careggi, University of Florence, Dept. of Urology, Florence, Italy
# Overview of fusion biopsy devices

**Thematic Session 08**

**Sunday 18 March**

**10:30 - 12:00**

**Location:**  Blue Area, Room 3 (Level 0)

**Chairs:**  E. Barret, Paris (FR)  
             J. Walz, Marseille (FR)

**Aims and objectives of this session**

MRI and MRI/ultrasound fusion system is increasingly used in patients undergoing prostate biopsies. Different MRI/Ultrasound fusion devices are available. Often it is unclear where the advantages and disadvantages of the different systems are and there is a lack of clear head to head comparison between the different systems. The aim of this thematic session is to systematically present the different fusion technologies and to highlight their pros and cons. This will be followed by a round table discussion where several clinical cases will challenge the different technologies.

<table>
<thead>
<tr>
<th>Time</th>
<th>Presentation</th>
<th>Speaker(s)</th>
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<tbody>
<tr>
<td>10:30 - 10:40</td>
<td>Possible ways to refine prostate biopsy</td>
<td>M. Valerio, Lausanne (CH)</td>
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<tr>
<td>10:40 - 10:45</td>
<td>Statement MIM-Symphony</td>
<td>V. Kasivisvanathan, London (GB)</td>
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<tr>
<td>10:45 - 10:50</td>
<td>Statement Biojet</td>
<td>M. Drerup, Salzburg (AT)</td>
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<td>10:55 - 11:00</td>
<td>Statement BioBot</td>
<td>S. Kruck, Tübingen (DE)</td>
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<tr>
<td>11:00 - 11:05</td>
<td>Statement Urostation</td>
<td>A. Peltier, Brussels (BE)</td>
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<tr>
<td>11:05 - 11:10</td>
<td>Statement Artemis</td>
<td>J. Von Hardenberg, Mannheim (DE)</td>
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<tr>
<td>11:10 - 11:15</td>
<td>Statement UroNav</td>
<td>L.P. Boesen, Herlev (DK)</td>
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<tr>
<td>11:15 - 12:00</td>
<td>Round table discussion</td>
<td></td>
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</tbody>
</table>
Paediatric urology update  
Thematic Session 09

**Sunday 18 March**  
**10:30 - 12:00**

**Location:** Blue Area, Room 4 (Level 0)  
**Chairs:** B. Burgu, Ankara (TR)  
J.M. Nijman, Groningen (NL)

**Aims and objectives of this session**  
Paediatric Urology update 2018 presents you the latest clinical state-of-the-art lectures with useful tips and tricks for your daily urological practice and one overview of a basic paediatric urology research topic.

<table>
<thead>
<tr>
<th>Time</th>
<th>Title</th>
<th>Speaker, Location</th>
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<tbody>
<tr>
<td>10:30</td>
<td>Urotherapy, an underestimated therapeutic tool</td>
<td>A-F. Spinoit, Ghent (BE)</td>
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<tr>
<td>10:45</td>
<td>Understanding prepubertal behaviour of germ cells in cryptorchid testes: Prevention of testicular cancer</td>
<td>J. Thorup, Copenhagen (DK)</td>
</tr>
<tr>
<td>11:00</td>
<td>Advantages and disadvantages of robotics in paediatric urology</td>
<td>L.H. Olsen, Aarhus (DK)</td>
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<tr>
<td>11:15</td>
<td>Long-term outcomes in male genital reconstruction</td>
<td>P. Hoebeke, Ghent (BE)</td>
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<tr>
<td>11:30</td>
<td>Impact and outcome in female genital reconstruction</td>
<td>D.N. Wood, London (GB)</td>
</tr>
<tr>
<td>11:45</td>
<td>Education, training and future innovations for paediatric urology</td>
<td>B. Burgu, Ankara (TR)</td>
</tr>
</tbody>
</table>
# Surgery in Motion School session: Nerve-sparing Robot assisted Radical Prostatectomy (RARP), different ways to skin the cat

**Location:** Green Area, Room 15 (Level 0)

**Chair:** J.W.F. Catto, Sheffield (GB)

## Aims and objectives of this session
Surgery-in-Motion School is a special educational video library. In this two hour video based course, different experts will share their specific technique on the key steps in nerve sparing RARP. They will also discuss why they do it their way. At the end of the course, special complex cases will be shown, and the presenters will explain how to manage these.

### 10:00 - 10:10
**Welcome and introduction**  
J.W.F. Catto, Sheffield (GB)

### 10:10 - 10:30
**Bladder neck**  
D. Murphy, Melbourne (AU)  
A. Mottrie, Aalst (BE)  
N.P. Wiklund, Stockholm (SE)

### 10:10 - 10:30
**Discussion**

### 10:30 - 10:50
**Lateral dissection**  
M. Graefen, Hamburg (DE)  
D. Murphy, Melbourne (AU)  
N.P. Wiklund, Stockholm (SE)

### 10:30 - 10:50
**Discussion**

### 10:50 - 11:10
**Apical dissection**  
M. Graefen, Hamburg (DE)  
D. Murphy, Melbourne (AU)  
A. Mottrie, Aalst (BE)

### 10:50 - 11:10
**Discussion**

### 11:10 - 11:30
**Anastomosis**  
M. Graefen, Hamburg (DE)  
D. Murphy, Melbourne (AU)  
N.P. Wiklund, Stockholm (SE)
<table>
<thead>
<tr>
<th>Time</th>
<th>Session</th>
<th>Speaker and Details</th>
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<tbody>
<tr>
<td>11:10-11:30</td>
<td>Discussion</td>
<td></td>
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<tr>
<td>11:30-11:55</td>
<td>Special cases</td>
<td></td>
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<tr>
<td>11:30-11:35</td>
<td>The use of ICG for peri-prostatic artery identification</td>
<td>A. Mottrie, Aalst (BE)</td>
</tr>
<tr>
<td>11:35-11:40</td>
<td>Ureteral orifices close to bladder neck management</td>
<td>M. Graefen, Hamburg (DE)</td>
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<tr>
<td>11:40-11:45</td>
<td>Post TUR-P or HOLEP</td>
<td>N.P. Wiklund, Stockholm (SE)</td>
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<tr>
<td>11:45-11:50</td>
<td>Very large prostate</td>
<td>D. Murphy, Melbourne (AU)</td>
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<tr>
<td>11:50-11:55</td>
<td>Median lobe</td>
<td>A. Mottrie, Aalst (BE)</td>
</tr>
<tr>
<td>11:55-12:00</td>
<td>Closing remarks</td>
<td>J.W.F. Catto, Sheffield (GB)</td>
</tr>
</tbody>
</table>
### ESU/ESUT Hands-on Training Course in Basic laparoscopy
Sponsored by KARL STORZ

| Sunday 18 March  
| 10:10 - 11:10 |

| **Location:** | Yellow Area, Room 1 (Level 0) |
| **Chair:** | B.S.E.P. Van Cleynenbreugel, Leuven (BE) |
| **Tutors:** | To be confirmed |
| | G. Pini, Milano (IT) |
| | To be confirmed |
| | J.F. Langenhuijsen, Nijmegen (NL) |
| | To be confirmed |
| | D. Rengifo Abbad, Majadahonda (ES) |
| | To be confirmed |
| | R. Sanchez-Salas, Paris (FR) |
| | To be confirmed |
| | D. Veneziano, Reggio Calabria (IT) |
| | To be confirmed |
| | C. Wagner, Gronau (DE) |
| | To be confirmed |
| | L. Osório, Porto (PT) |
| | A.S. Gözen, Heilbronn (DE) |
| | P. Macek, Prague 2 (CZ) |

**Aims and objectives of this session**

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.

- You will improve your laparoscopic skills such as depth perception and bimanual dexterity
# ESU/ESUT Hands-on Training Course in Thulium laser for vaporesection and holmium laser for laser lithotripsy

**Sponsored by LISA LASER**

**Sunday 18 March**

**10:45 - 12:15**

**Location:** Yellow Area, Room 2 (Level 0)

**Chairs:** To be confirmed

R. Muschter, Rotenburg (DE)

**Tutors:** To be confirmed

P. Krombach, Luxembourg (LU)

C. Netsch, Hamburg (DE)

To be confirmed

A. Elshal, Mansoura (EG)

To be confirmed

J. Ellinger, Bonn (DE)

To be confirmed

E. Liatsikos, Patras (GR)

To be confirmed

To be confirmed

Aims and objectives of this session

**Aims and objectives for the Vaporesection and Vaporization of BPH training:**

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

**Aims and objectives for Holmium laser lithotripsy:**

- The fragmentation effect on artificial stones by the Holmium laser at different laser settings and the importance of the fibre position with respect to the stone,
- The handling of rigid and flexible ureterorenoscopes,
- The importance and influence of the irrigation management.
ESU/ERUS Hands-on Training Course in Robotic surgery - Introduction
Sponsored by 3D SYSTEMS SIMBIONIX, MIMIC, INTUITIVE SURGICAL

Sunday 18 March
10:45 - 12:15

Location: Yellow Area, Room 5 (Level 0)
Chair: I.C. Acar, Ankara (TR)
Tutor: H. Zecha, Hamburg (DE)

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

Improve your robotic surgery skills in the following areas:
• Endowrist manipulation
• Camera Control
• 3rd Arm Control
• Needle Placement and Driving
• Suturing and Knot Tying
ESU Hands-on Training Course in Non-technical skills in surgery
Sponsored by ROCHE

Sunday 18 March
10:00 - 12:00

Location: Yellow Area, Iglo
Chairs: To be confirmed
P. Dasgupta, London (GB)
K. Ahmed, London (GB)
Tutors: To be confirmed

Aims and objectives of this session
The operating room is a complex and highly stressful environment that requires interaction between a large team to achieve successful outcomes for the patients. This requires not only effective procedure-specific technical skills, but also additionally a range of non-technical skills. Non-technical skills are defined as skills unrelated to the technical completion of surgical procedures. They include decision-making, team-working, communication and leadership skills.

The importance of non-technical skills is often overlooked but they are unfortunately a major cause of surgical error. Like technical skills, which are acquired over many years of practice and training, non-technical skills are not innate traits and must also be developed through training and experience.

This course will serve to introduce practicing urologists to the concept of non-technical skills using an interactive full immersion simulation environment, developed at Imperial College London, whilst undertaking common scenarios in endoscopic urological surgery. Participants will be evaluated by experts in surgical education and provided individual feedback with view for further self-improvement.

Supporting faculty:
N. Raison, London (GB)
A. Aydin, London (GB)
N. Khan, London (GB)
C. Lovegrove, Perth (GB)
EAU Patient Information Session

Specialty Session

Sunday 18 March 11:30 - 14:35

Location: Green Area, Room 10 (Level 1)

Aims and objectives of this session
To build the capacity of European prostate-, kidney- and bladder cancer patients advocacy to support their members and advocate for better care.

For this session, voting will be available via the EAU18 App or via www.qna.at/eau

11:30 - 11:35
Welcome and introduction
C.R. Chapple, Sheffield (GB)

11:35 - 12:35
Round Table: The unmet needs of urology cancer survivors
Moderators: T. Bach, Hamburg (DE)
S. Sarikaya, Ankara (TR)

11:35 - 11:50
Prostate cancer
K. Mastris, Antwerpen (BE)

11:50 - 12:05
Bladder cancer
A. Winterbottom, Chinnor (GB)

12:05 - 12:20
Urinary diversions
To be confirmed

12:05 - 12:20
Survey results: Prostate cancer patients
P. Cabri, Merelbeke (BE)

12:20 - 12:35
Kidney cancer
R.H. Giles, Utrecht (NL)

12:35 - 12:50
Break

12:50 - 13:50
Involving the patient
Moderators: T. Bach, Hamburg (DE)
S. Ottenhof, Amsterdam (NL)

12:50 - 13:05
How patients' and nurses’ communication influence outcome
C.N. Tillier, Amsterdam (NL)

13:05 - 13:20
EAU Patient Information: Are we clear enough?
J.L. Vásquez Mendoza, Herlev (DK)

13:20 - 13:35
How to address the illiterate patient
M.R. Van Balken, Arnhem (NL)
<table>
<thead>
<tr>
<th>Time</th>
<th>Session</th>
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</thead>
<tbody>
<tr>
<td>13:35 - 13:50</td>
<td><strong>Translating science into practice</strong>&lt;br&gt;J.W.F. Catto, Sheffield (GB)</td>
</tr>
<tr>
<td>13:50 - 14:35</td>
<td><strong>Keynote presentations</strong>&lt;br&gt;&lt;i&gt;Moderators:&lt;/i&gt; T. Bach, Hamburg (DE)  G. Patruno, Rome (IT)</td>
</tr>
<tr>
<td>13:50 - 14:05</td>
<td><strong>Giving patients a meaningful voice in the design and delivery of care</strong>&lt;br&gt;S. MacLennan, Aberdeen (GB)</td>
</tr>
<tr>
<td>14:05 - 14:20</td>
<td><strong>How to use policy papers to call for change at pan-European level</strong>&lt;br&gt;Makaroff, Brussels (BE)</td>
</tr>
<tr>
<td>14:20 - 14:35</td>
<td><strong>How to increase the impact of an awareness campaign</strong>&lt;br&gt;T. Albreht, Ljubljana (SI)</td>
</tr>
<tr>
<td>14:35 - 14:50</td>
<td><strong>Patients and unmet needs in relation to prostate cancer</strong>&lt;br&gt;P. Cabri, Merelbeke (BE)</td>
</tr>
</tbody>
</table>
ESU/ESUT Hands-on Training Course in Basic laparoscopy
Sponsored by KARL STORZ

**Location:** Yellow Area, Room 1 (Level 0)

**Chairs:** To be confirmed
C. Wagner, Gronau (DE)

**Tutors:**
B. Petrut, Cluj Napoca (RO)
S. Barmoshe, Brussels (BE)
G. Pini, Milano (IT)
M. Arslan, Izmir (TR)
L. Osório, Porto (PT)
T.M. Ribeiro De Oliveira, ()
K. Ahmed, London (GB)
J-T. Klein, Ulm (DE)

**Aims and objectives of this session**
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.

- You will improve your laparoscopic skills such as depth perception and bimanual dexterity
ESU/ESFFU Hands-on Training Course in Sacral Neuromodulation
Sponsored by MEDTRONIC

Sunday 18 March 11:00 - 12:30

Location: Yellow Area, Room 3 (Level 0)
Chair: H. Hashim, Bristol (GB)
Tutors: M. Belal, Birmingham (GB)
E. Chartier-Kastler, Paris (FR)
S. De Wachter, Edegem (BE)
T.M. Kessler, Zurich (CH)
S. Musco, Florence (IT)
L. Thomas, Bristol (GB)
K-D. Sievert, Rostock (DE)

Aims and objectives of this session
A practical hands-on workshop that will allow the participants to practice on models the different steps of performing sacral neuromodulation including primary percutaneous nerve evaluation, tined lead and battery implantation and programming and also troubleshooting.

• Understand the indications for SNM
• Be able to perform the different steps of the procedure in a standardized format
• Be able to troubleshoot problems with SNM
Bladder cancer: Minimally invasive approaches

**Location:** Green Area, eURO Auditorium (Level 0)

**Chairs:**
- W. Artibani, Verona (IT)
- J.W. Collins, Stockholm (SE)
- F. D'Hondt, Aalst (BE)

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

**V41**

**Title:** Robot-assisted laparoscopic en-bloc partial cystectomy, urachal resection, umbillectomy and pelvic lymphadenectomy with intracorporeal ultrasonography for urachal adenocarcinoma: A case report

**By:** Proskura A., Shpot E.
Sechenov University, Dept. of Urology, Moscow, Russia

**V42**

**Title:** Robotic assisted radical cystourethrectomy

**By:** Lee E., Coret M., Thomas B.
Addenbrooke's Hospital, Cambridge University Hospitals, Dept. of Urology, Cambridge, United Kingdom

**V44**

**Title:** Radical cystectomy with vagina preservation

**By:** Lopez L., Silvano F., Pérez Y.P., Alves Mota Filho F.H.
Clinique Saint - Augustin, Dept. of Urology, Bordeaux, France

**V45**

**Title:** Palliative cystectomy: Presentation of 3 cases

**By:** Medina Gonzalez A., Perez Garcia C., Gonzalez Rodriguez I., Diaz Mendez B., Cruceyra Betriu G., Gil Ugarteburu R., Fernandez-Pello Montes S., Rúger Jiménez L., Mosquera Madera J.
Hospital of Cabueñes, Dept. of UROLOGY, Gijón, Spain

**V46**

**Title:** Endoscopic incision for uretero-ileal anastomotic stricture: Step by step technique


¹Hospital Álvaro Cunqueiro, Dept of Urology, Vigo, Spain, ²Hospital Álvaro Cunqueiro, Dept. of Radiology, Vigo, Spain
<table>
<thead>
<tr>
<th>Session</th>
<th>Title</th>
<th>Authors</th>
<th>Institution</th>
</tr>
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<tbody>
<tr>
<td>V47</td>
<td>Nerve and vesicle seminal sparing, lateral approach robot assisted radical cystectomy with intracorporeal neobladder</td>
<td>Roche J.B., Pérès Y.P.</td>
<td>Clinique Saint Augustin, Dept. of Urology, Bordeaux, France</td>
</tr>
</tbody>
</table>
**Better understanding LUTS: A look behind the curtain**

*Poster Session 33*

**Sunday 18 March**

**12:15 - 13:45**

**Location:** Green Area, Room 1 (Level 0)

**Chairs:**
- L. Birder, Pittsburgh (US)
- F. Cruz, Porto (PT)
- Y. Igawa, Tokyo (JP)

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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**439**

**Detrusor underactivity (DU) caused by bladder outlet obstruction (BOO) is associated with an early impairment of the bladder sensory mechanism**

By: Vale L., Antunes-Lopes T., Avelino A., Birder L.A., Charrua A., Cruz F.

1 Hospital Sao Joao & Faculty of Medicine/i3S of Porto, Dept. of Urology, Porto, Portugal, 2 University of Pittsburgh, Dept. of Pharmacology, Pittsburgh, United States of America

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**440**

**Overexpression of transient receptor potential vanilloid-4 (TRPV4) in urothelium of rat urinary bladder following bladder outlet obstruction**


Chonnam National University Hospital, Dept. of Urology, Gwangju, Korea, South

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**441**

**MicroRNAs, inhibited by TNF-α, might influence smooth muscle remodeling during outlet obstruction-induced lower urinary tract dysfunction**

By: Hashemi Gheinani A., Koeck I., Burkhard F., Monastyrskaya K.

1 University of Bern, Dept. of BioMedical Research, Bern, Switzerland, 2 University Hospital, Dept. of Urology, Bern, Switzerland

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**442**

**Enhanced urinary extracellular vesicle isolation strategies to increase the yield and purity of human urinary exosomes for biomarker discovery**


1 University of Bern, Dept. of BioMedical Research, Bern, Switzerland, 2 University of Bern, Dept. of Urology, Bern, Switzerland, 3 University of Bern, Dept. of Pathology, Bern, Switzerland, 4 University of Bern, Dept. of Anatomy, Bern, Switzerland, 5 University Hospital, Dept. of Urology, Bern, Switzerland

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**443**

**Metabotropic glutamate receptor subtypes 1 and 5 are necessary for synergic activity of bladder and external urethral sphincter in mice with spinal cord injury**
**RQ-00434739, a novel TRPM8 antagonist, inhibits prostaglandin-E2-induced hyperactivity of the primary bladder afferent nerves in rats**

By: Aizawa N.\(^1\), Ohshiro H.\(^2\), Watanabe S.\(^2\), Homma Y.\(^3\), Igawa Y.\(^1\)

\(^1\)The University of Tokyo Graduate School of Medicine, Dept. of Continence Medicine, Tokyo, Japan, \(^2\)RaQualia Pharma Inc., Discovery Research, Nagoya, Japan, \(^3\)Japanese Red Cross Medical Center, Director, Tokyo, Japan

**Supraspinal lower urinary tract control in spinal cord injury patients undergoing intradetrusor onabotulinumtoxinA injections: An MRI study**

By: Leitner L.\(^1\), Walter M.\(^1\), Liechti M.\(^1\), Michels L.\(^2\), Kollias S.\(^2\), Mehnert U.\(^1\), Kessler T.\(^1\)

\(^1\)Spinal Cord Injury Center & Research, University of Zürich, Balgrist University Hospital, Dept. of Neuro-Urology, Zürich, Switzerland, \(^2\)University of Zürich, University Hospital Zürich, Institute of Neuro-Radiology, Zürich, Switzerland

**A three-dimensional scaffold containing encapsulated adipose-derived stem cells promotes bladder reconstruction via SDF-1α/CXCR4 pathway**

By: Xiao D.\(^1\), Yan H.\(^1\), Zhang M.\(^1\), Lv X.\(^1\), Li W.\(^2\), Lu M.\(^1\)

\(^1\)Ren Ji Hospital, School of Medicine, Shanghai Jiao Tong University, Dept. of Urology and Andrology, Shanghai, China, \(^2\)Renji Hospital Shanghai Jiao Tong University School Of Medicine, The State Key Lab of Metal Matrix Composites, Shanghai, China

**Whole genome epigenetic characteristics of pelvic lipomatosis: The new hope to prevent and cure this disease**

By: Xiong G., He S., Li X., Han W., Zhou L.

Peking University First Hospital, Dept. of Urology, Beijing, China

**fMRI in patients with detrusor sphincter dyssynergia - is the neural circuit affected?**

By: Seseke S.\(^1\), Dechent P.\(^2\), Trojan L.\(^3\)

\(^1\)Martha-Maria-Hospital Halle-Dölauf, Dept. of Urology, Halle, Germany, \(^2\)Georg-August-University, Dept. of Cognitive Neurology, Göttingen, Germany, \(^3\)Georg-August-University, Dept. of Urology, Göttingen, Germany

**Inhibition of prostate smooth muscle contraction by inhibitors of polo-like kinases (PLK): A new role for PLK1 in smooth muscle contraction?**


University of Munich, Dept. of Urology, Munich, Germany
<table>
<thead>
<tr>
<th>Session</th>
<th>Title</th>
<th>Authors</th>
<th>Affiliations</th>
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<tbody>
<tr>
<td>451</td>
<td>Withdrawn</td>
<td>To be confirmed</td>
<td></td>
</tr>
<tr>
<td>452</td>
<td>Epigenetic regulation of COX-2 expression by DNA methylation via NF-κB activation in ketamine-induced ulcerative cystitis</td>
<td>By: Juan Y-S., Chuang S-M., Wen-Jeng W., Chen-Yu L., Yi-Lun L., Chuang S-M., Weng-Chen W.</td>
<td>1Kaohsiung Municipal Ta-Tung Hospital, Dept. of Urology, Kaohsiung, Taiwan, 2Kaohsiung Medical University, Dept. of Urology, Kaohsiung, Taiwan, 3Kaohsiung Medical University, Dept. of Gynecology, Kaohsiung, Taiwan, 4Sinying Hospital, Dept. of Urology, Tainan, Taiwan</td>
</tr>
<tr>
<td>453</td>
<td>A mussel protein-based underwater tissue adhesive sealant: Pre-clinical animal study for vesico-vaginal fistula</td>
<td>By: Pyun J.H., Kim H.J., Shim J.S., Kang S.G., Joo K.J., Cheon J., Cha H.J., Kang S.H.</td>
<td>1Kangbuk Samsung Hospital, Sungkyunkwan University School of Medicine, Dept. of Urology, Seoul, Korea, South, 2Pohang University of Science and Technology (POSTECH), Chemical Engineering, Seoul, Korea, South, 3Korea University College of Medicine, Dept. of Urology, Seoul, Korea, South</td>
</tr>
</tbody>
</table>
Urothelial tumours: Innovative therapies and resistance mechanisms
Poster Session 34

Sunday 18 March
12:15 - 13:45

Location: Green Area, Room 2 (Level 0)
Chairs: M. Babjuk, Prague (CZ)
        C. Jeronimo, Porto (PT)
        M. Knowles, Leeds (GB)

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.

State-of-the-art lecture Signaling pathways implicated in therapy: Resistance in urothelium cancer
C. Jeronimo, Porto (PT)

454 Low dose gemcitabine increases the cytotoxicity of human γδT cell in in vitro and in an orthotopic xenograft model in bladder cancer
By: Shimizu T.¹, Miyashita M.¹, Tomogane M.², Ukimura O.¹, Ashihara E.²
¹Kyoto Prefectural University of Medicine, Dept. of Urology, Kyoto, Japan, ²Kyoto Pharmaceutical University, Dept. of Clinical and Translational Physiology, Kyoto, Japan

455 Therapeutic and diagnostic implications of the NOTCH and MAPK pathways in urothelial bladder cancer
By: Schulz G.B.¹, Grimm T.¹, Jokisch F.¹, Casuscelli J.¹, Buchner A.¹, Kretschmer A.¹, Stief C.¹, Horst D.², Karl A.¹
¹Ludwig-Maximilians-University, Dept. of Urology, Munich, Germany, ²Ludwig-Maximilians-University, Dept. of Pathology, Munich, Germany

456 The ataxia telangiectasia and Rad3 related kinase inhibitor AZD6738 sensitizes bladder cancer cells to gemcitabine
By: Isono M., Sato A., Asano T., Okubo K., Asano T.
National Defense Medical College, Dept. of Urology, Tokorozawa, Japan

457 Targeting HRAS as a potential therapeutic target through RAS inhibitor salirasib in bladder cancer
By: Satoshi S., Yoshino H., Miyamoto K., Yonemori M., Sakaguchi T., Osako Y., Enokida H., Nakagawa M.
Kagoshima University, Dept. of Urology, Kagoshima, Japan
4N1K-peptide derived from thrombospondins acts as a tumour suppressor in bladder cancer in vivo and in vitro: Potential therapeutic agents for intra-vesical therapy

By: Miyata Y., Asai A., Yasuda T., Nakamura Y., Sagara Y., Matsuo T., Ohba K., Sakai H.
Nagasaki University Graduate School of Biomedical Sciences, Dept. of Urology, Nagasaki, Japan

Ritonavir and oprozomib cause bladder cancer apoptosis synergistically by inducing endoplasmic reticulum stress

By: Sato A., Asano T., Okubo K., Isono M., Asano T.
National Defense Medical College, Dept. of Urology, Tokorozawa, Japan

Biological characterization of cisplatin-resistant bladder cancer: Implications for second-line treatments?

1University of Bern, Dept. of Urology, Bern, Switzerland, 2GenomeDx Biosciences, Dept. of Research and Development, Vancouver, Canada, 3GenomeDx Biosciences, Dept. of Biostatistics, Vancouver, Canada, 4University of British Columbia, Dept. of Urologic Sciences, Vancouver, Canada, 5University of Washington School of Medicine, Dept. of Urology, Seattle, United States of America, 6University Medical Center Rotterdam, Dept. of Pathology, Rotterdam, Netherlands, The, 7University Hospital of Southampton, Dept. of Urology, Hampshire, United Kingdom, 8University Hospital of Southampton, Dept. of Medical Oncology, Hampshire, United Kingdom, 9The Netherlands Cancer Institute, Dept. of Urology, Amsterdam, Netherlands, The, 10Lund University, Dept. of Translational Medicine, Malmö, Sweden, 11University Medical Center Rotterdam, Dept. of Urology, Rotterdam, Netherlands, The, 12UC Davis Comprehensive Cancer Center, Dept. of Urology, Sacramento, United States of America, 13The Netherlands Cancer Institute, Dept. of Medical Oncology, Amsterdam, Netherlands, The

TGFβ1 promotes gemcitabine resistance through regulating the LncRNA-LET/NF90/miR-145 signaling axis in bladder cancer

By: Zhuang J.1, Shen L.2, Yang L.1, Yan J.2, Guo H.1
1Drum Tower Hospital, Medical School of Nanjing University, Dept. of Urology, Nanjing, China, 2State Key Laboratory of Pharmaceutical Biotechnology and MOE Key Laboratory of Model Animals for Disease Study, Model Animal Research Center, Dept. of Genetics, Nanjing, China

High-throughput drug screening using conditionally reprogrammed patient-derived cell lines in bladder cancer

By: Boström P.1, Kettunen K.2, Lamminen T.3, Heinosalo T.4, West G.2, Poutanen
463 Targeting of BRD4 with JQ1, combined with mitomycin C as a novel combination therapy for non-muscle invasive bladder cancer

By: Simm C.¹, Caridis A.¹, Di Maio A.¹, Knowles P.¹, Gorman B.¹, Jones R.¹, Ward D.², Oppermann U.³, Bountra C.³, Khanim F.¹, Bryan R.²

¹University of Birmingham, School of Biosciences, Birmingham, United Kingdom,
²University of Birmingham, Institute of Cancer & Genomic Sciences, Birmingham, United Kingdom,
³University of Oxford, Structural Genomics Consortium, Oxford, United Kingdom

464 Oxygen generating manganese dioxide nanoparticles for enhanced photodynamic therapy to bladder cancer by ameliorating hypoxia

By: Lin T.
Nanjing Drum Tower Hospital, Dept. of Urology, Nanjing, China

465 Metformin augments panobinostat’s antineoplastic activity in bladder cancer cells by activating AMP-activated protein kinase

By: Okubo K., Sato A., Asano T., Isono M., Asano T.
National Defense Medical College, Dept. of Urology, Tokorozawa, Japan

Summary
M. Babjuk, Prague (CZ)
Advancing urological care through new innovative education and training strategies
Poster Session 35

Location: Red Area, Room 1 (Level 0)
Chairs: K. Dimitropoulos, Aberdeen (GB)
A.S. Gözen, Heilbronn (DE)
J.S. Royle, Edinburgh (GB)

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

467 Application of 3D printed models for localized renal cancer treatment
By: Byadretdinov I., Glybochko P., Alyaev Y., Rapoport L., Bezrukov E., Sirota E. I.M. Sechenov First Moscow State Medical University of Minzdrav of Russia, Research Institute of Uro nephrology and Human Reproductive Health, Dept. of Urology, Moscow, Russia

468 Randomized controlled trials retracted from publication: An analysis of urology-related studies
By: Reddy B.¹, Subhash M.², Jung J.H.³, Kuntz G.M.⁴, Dahm P.³ ¹Massachusetts General Hospital, Dept. of Urology, Boston, United States of America, ²Tufts Medical Center, Dept. of Obstetrics and Gynecology, Boston, United States of America, ³University of Minnesota, Dept. of Urology, Minneapolis, United States of America, ⁴University of Florida, HSC Library, Jacksonville, United States of America

469 Implementation of European Association of Urology (EAU) guidelines on the evaluation and management of nocturia and nocturnal polyuria in the daily practice: A comparative survey among Iranian and Dutch urologists
By: Rahnama'i M.S.¹, Ladi-Seyedian S-S.², Vrijens D.³, Marcelissen T.³, Nikfallah A.⁴, Hajebrahimi S.⁵ ¹Maastricht University, Dept. of Urology, Maastricht, Netherlands, The, ²Universal Scientific Education and Research Network (USERN), Pelvic Floor Rehabilitation And Urotherapy Group (PFRUG), Tehran, Iran, ³Maastricht University Medical Centre, Dept. of Urology, Maastricht, Netherlands, The, ⁴Tehran University of Medical Sciences, Spinal cord injury center, Tehran, Iran, ⁵Research center for Evidence Based Medicine, Tabriz University of Medical Sciences, Dept. of Urology, Tabriz, Iran

470 Development and validation of the non-technical skills for urological surgeons (NoTSUS) ureteroscopy scenario curriculum
By: Aydin A.¹, Brunckhorst O.¹, Raison N.¹, Brewin J.², Mcilhenny C.³, Al-Jabir A.¹
Misinterpretation of online surgical outcomes: The British Association of Urological Surgeons Surgical Outcomes Audit

By: Sathianathan N., Albersheim-Carter J., Labine L., Watson B., Konety B., Weight C.
University of Minnesota, Dept. of Urology, Minneapolis, United States of America

TURBT: Next-generation virtual reality training for next-generation surgeons?

University Hospital Tuebingen, Dept. of Urology, Tuebingen, Germany

Definition of a structured training curriculum for robot-assisted partial nephrectomy: A Delphi-consensus study from the ERUS Educational Board

ORSI Academy, Dept. of Urology, Melle, Belgium, Karolinska University Hospital, Dept. of Urology, Stockholm, Sweden, University of California San Diego School of Medicine, Division of Urology Dept. of Surgery, La Jolla, United States of America, University of Eastern Piedmont, Dept. of Urology, Novara, Italy, University of Messina, Dept. of Human and Pediatric Pathology “Gaetano Barresi”, Urologic Section, Messina, Italy, University of Turin, San Luigi Gonzaga Hospital, Dept. of Urology, Orbassano, Italy, Urological Research Institute, IRCCS Ospedale San Raffaele, Unit of Urology, Division of Oncology, Milan, Italy, Universittatsklinikum des Saarlandes, Dept. of Urology, Homburg, Germany, Urological Science Institute, Yonsei University College of Medicine, Dept. of Urology, Seoul, Korea, South, University of Leipzig, Dept. of Urology, Leipzig, Germany, Fortis Escorts Kidney and Urology Institute, Dept. of Urology, New Delhi, India, Peter MacCallum Cancer Centre, Dept. of Cancer Surgery, Melbourne, Australia, Onze Lieve Vrouw Hospital, Dept. of Urology, Aalst, Belgium, Hopital Pitié-Salpêtrière, Dept. of Urology, Paris, France, Guy's Hospital, Dept. of Urology, London, United Kingdom, University of Padua, Urology Clinic, Dept. of Surgery, Oncology, and Gastroenterology, Padua, Italy, Swedish Medical Center, Dept. of Urology, Seattle, WA, United States of America, Royal Melbourne Hospital, University of Melbourne, Parkville and Australian Prostate Cancer Research Centre at Epworth Hospital, Division of Urology, Dept. of Surgery, Richmond,
<table>
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<tr>
<th>ID</th>
<th>Title</th>
<th>Authors</th>
<th>Institutions</th>
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<tr>
<td>474</td>
<td>The cohort without a catheter: Five years of the BAUS undergraduate syllabus</td>
<td>By: Osen E. 1, Smith S. 2</td>
<td>VIC, Australia, 20 IRCCS Istituto Clinico Humanitas, Humanitas University, Division of Urology, Rozzano, Italy, 21 AOU Careggi, University of Florence, Dept. of Urology, Florence, Italy, 22 Athens Medical Centre, Dept. of Urology, Athens, Greece, 23 Netherlands Cancer Institute, Dept. of Urology, Amsterdam, Netherlands, The</td>
</tr>
<tr>
<td>475</td>
<td>Assessing andrology/infertility sub-specialty exposure between residents in the United States and Europe</td>
<td>By: Carrion D.M. 1, Gomez-Rivas J. 1, Rodriguez Socarras M. 2, Abou Ghayda R. 3, O'Leary M. 3, Kathrins M. 3, Niederberger C. 4, Fode M. 5, Vazquez J.L. 5</td>
<td>1 Hospital Universitario La Paz, Dept. of Urology, Madrid, Spain, 2 Hospital Santa Barbara, Dept. of Urology, Puertollano, Spain, 3 Brigham and Women's Hospital, Dept. of Urology, Boston, United States of America, 4 University of Illinois at Chicago, Dept. of Urology, Chicago, United States of America, 5 Herlev and Gentofte Hospital, Dept. of Urology, Herlev, Denmark</td>
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<td>476</td>
<td>Mental training and its effect on procedural and cognitive learning - a blueprint for urologic residents in a condensed work environment?</td>
<td>By: Marks P. 1, Kaulfuss J. 1, Chun F. 2, Grange P. 1, Fisch M. 1, Kluth L. 2, Meyer C. 1</td>
<td>1 University Medical Center Hamburg-Eppendorf, Dept. of Urology, Hamburg, Germany, 2 University Medical Center Frankfurt, Dept. of Urology, Frankfurt, Germany</td>
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<td>477</td>
<td>Cognitive training for technical and non-technical skills in robotic surgery: A randomised controlled trial</td>
<td>By: Raison N. 1, Ahmed K. 1, Abe T. 1, Brunckhorst O. 1, Novara G. 2, Buffi N. 3, McIhenny C. 4, Van Der Poel H. 5, Van Hemeirjck M. 6, Gavazzi A. 7, Dasgupta P. 1</td>
<td>1 King's College London, MRC Centre for Transplantation, London, United Kingdom, 2 University of Padua, Dept. of Urology, Padua, Italy, 3 Humanitas Clinical and Research Centre, Dept. of Urology, Milan, Italy, 4 Forth Valley Royal Hospital, Dept. of Urology, Larbert, United Kingdom, 5 Netherlands Cancer Institute, Dept. of Urology, Amsterdam, Netherlands, The, 6 King's College London, Division of Cancer Studies, London, United Kingdom, 7 Azienda USL Toscana Centro, Dept. of Urology, Florence, Italy</td>
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<td>478</td>
<td>Safer, faster, better: Improving the urology ward round &amp; handover process (iWRAHP)</td>
<td>By: Rai S., Browning A.</td>
<td>Mid Yorkshire Hospitals NHS Trust, Dept. of Urology, Wakefield, United Kingdom</td>
</tr>
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</table>
The evolution of a urological ‘boot camp’ for new starting urology residents within the United Kingdom

By: Young M.1, Kailavasan M.2, Taylor J.3, Cornfield P.4, Colquhoun A.5, Rochester M.6, Hanchanale V.4, Somani B.7, Nabi G.6, Garthwaite M.9, Gowda R.9, Myatt A.10, Jain S.1, Biyani C.S.1

1Leeds Teaching Hospitals, Dept. of Urology, Leeds, United Kingdom, 2Royal Derby Hospital, Dept. of Urology, Derby, United Kingdom, 3Forth Valley Royal Hospital, Dept. of Urology, Larbert, United States of America, 4Royal Liverpool University Hospitals NHS Trust, Dept. of Urology, Liverpool, United Kingdom, 5Cambridge University Hospitals NHS Foundation Trust, Dept. of Urology, Cambridge, United Kingdom, 6Norfolk and Norwich University Hospitals NHS Foundation Trust, Dept. of Urology, Norfolk, United Kingdom, 7University Hospital Southampton NHS Trust, Southampton, United Kingdom, 8Ninewells Hospital, Dept. of Urology, Dundee, United Kingdom, 9South Tees Hospitals NHS Foundation Trust, Dept. of Urology, Middlesbrough, United Kingdom, 10Hull and East Yorkshire NHS Trust, Dept. of Urology, Hull, United Kingdom

The Pi (Performance improvement) score: An algorithm to objectively assess performance improvement during E-BLUS hands on training (HoT) sessions


1Grande Ospedale Metropolitano, Dept. of Urology and Kidney Transplant, Reggio Calabria, Italy, 2MBDA Italia SpA, Human Resources Management, Rome, Italy, 3Gelre Ziekenhuis, Dept. of Urology, Apeldoorn, Netherlands, The, 4Leicester General Hospital, University of Leicester, Dept. of Urology, Leicester, United Kingdom, 5St James’s University Hospital Leeds Teaching Hospitals NHS Trust, Dept. of Urology, Leeds, United Kingdom, 6University Vita-Salute, San Raffaele Scientific Institute, Dept. of Urology, Milan, Italy, 7Università degli Studi di Torino, A.O.U. San Luigi Gonzaga, Dept. of Oncology, Turin, Italy, 8The North West London Hospitals NHS Trust; Imperial College Healthcare NHS Trust, Dept. of Urology, London, United Kingdom, 9Radboud University medical center, Dept. of Urology, Nijmegen, Netherlands, The, 10Ospedale San Raffaele – Turro, Dept. of Urology, Milan, Italy, 11Fundació Puigvert, Barcelona, Dept. of Urology, Barcelona, Spain, 12Azienda Ospedaliero-Universitaria di Careggi, Dept. of Urology, Florence, Italy, 13University of Athens, Dept. of Urology, Athens, Greece, 14General Hospital Hall in Tirol, Dept. of Urology and Andrology, Hall in Tirol, Austria, 15UZ Leuven, Dept. of Urology, Leuven, Belgium, 16St. Antonius-Hospital, Dept of Urology and Oncology, Gronau, Germany, 17Grande Ospedale Metropolitano, Dept. of Nephrology, Reggio Calabria, Italy, 18School of Medicine, University of Minho, Dept. of Urology, Braga, Portugal

Summary
J.S. Royle, Edinburgh (GB)
Early detection of prostate cancer
Poster Session 36

Sunday 18 March
12:15 - 13:45

Location: Red Area, Room 2 (Level 0)
Chairs: S. Carlsson, New York (US)
        M. Frydenberg, Melbourne (AU)
        B.A. Hadaschik, Essen (DE)

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.

480
What is an acceptable false negative rate in the detection of prostate cancer?
By: Verbeek J., Roobol M.
     Erasmus Medical Center, Dept. of Urology, Rotterdam, Netherlands, The

481
Bi-parametric prebiopsy MRI in men with clinical suspicion of prostate cancer.
Prospective multi-centre validation trial
By: Syvänen K., Ettala O., Jambor I., Verho J., Knaapila J., Kiviniemi A.,
     Kähkönen E., Kallajoki M., Taimen P., Lamminen T., Seppänen M., Rannikko A.,
     Oksanen O., Riikonen J., Aronen H., Boström P.
     1Turku University Hospital, Dept. of Urology, Turku, Finland,
     2Turku University Hospital, Dept. of Diagnostic Radiology, Turku, Finland,
     3Turku University Hospital, Dept. of Pathology, Turku, Finland,
     4Satakunta Central Hospital, Dept. of Surgery, Pori, Finland,
     5Helsinki University Hospital, Dept. of Urology, Helsinki, Finland,
     6Helsinki University Hospital, Dept. of Radiology, Helsinki, Finland,
     7Tampere University Hospital, Dept. of Urology, Tampere, Finland

482
The role of multi-parametric MRI as a triage test: A propensity-matched comparison of a MRI-triage and a TRUS-biopsy pathway
By: Eldred-Evans D., Brittain J., Servian P., Miah S., Tam H., Ahmed H.,
     Winkler M.
     1Imperial College London, Dept. of Surgery and Cancer, London, United Kingdom,
     2Imperial College NHS Trust, Dept. of Urology, London, United Kingdom

483
Prostate cancer risk-assessment for multiparametric MRI targeted and systematic biopsy: Balancing harms and benefit in biopsy naïve men using the Rotterdam Prostate Cancer Risk Calculator
By: Mannaerts C., Gayet M., Verbeek J., Engelbrecht M., Savci-Heijink C.,
     Jager G., Gielens M., Van Der Linden H., Beerlage H., De Reijke T., Wijkstra H.,
     Roobol M.
**The FUTURE trial; a multicenter RCT on three techniques of MRI targeted prostate biopsy**

By: Wegelin O.\(^1\), Exterkate L.\(^2\), Somford D.\(^3\), Barentsz J.\(^3\), Leest, Van Der M.\(^3\), Kummer A.\(^4\), Vreuls W.\(^5\), Bruin, De P.\(^4\), Bosch R.\(^6\), Melick, Van H.\(^1\)

\(^1\) AMC University Hospital, Dept. of Urology, Amsterdam, Netherlands, The, \(^2\) Jeroen Bosch Hospital, Dept. of Urology, 's-Hertogenbosch, Netherlands, The, \(^3\) Erasmus Medical Centre, Dept. of Urology, Rotterdam, Netherlands, The, \(^4\) AMC University Hospital, Dept. of Radiology, Amsterdam, Netherlands, The, \(^5\) AMC University Hospital, Dept. of Pathology, Amsterdam, Netherlands, The, \(^6\) Jeroen Bosch Hospital, Dept. of Radiology, 's-Hertogenbosch, Netherlands, The, \(^7\) Jeroen Bosch Hospital, Dept. of Pathology, 's-Hertogenbosch, Netherlands, The, \(^8\) Erasmus Medical Centre, Dept. of Urology, Rotterdam, Netherlands, The

**Which patients with PI-RADs 3 lesion at multiparametric MRI can avoid prostate biopsy**

By: Dell'Oglio P.\(^1\), Stabile A.\(^1\), Mazzone E.\(^1\), Soligo M.\(^2\), Brunetti L.\(^3\), Damascelli A.\(^4\), Karnes R\(^2\), Karakiewicz P.I.\(^5\), Capitanio U.\(^1\), Cianflone F.\(^1\), Fossati N.\(^1\), Gandaglia G.\(^1\), Zaffuto E.\(^1\), Damiano R.\(^6\), Esposito A.\(^3\), De Cobelli F.\(^4\), Montorsi F.\(^1\), Briganti A.\(^1\)

\(^1\) Vita-Salute San Raffaele University, Dept. of Urology, Milan, Italy, \(^2\) Mayo Clinic, Dept. of Urology, Rochester, United States of America, \(^3\) Vita-Salute University San Raffaele, Dept. of Radiology, Milan, Italy, \(^4\) Vita-Salute San Raffaele University, Dept. of Radiology, Milan, Italy, \(^5\) University of Montreal Health Center, Cancer Prognostics and Health Outcomes Unit, Montreal, Canada, \(^6\) Magna Graecia University, Dept. of Urology, Catanzano, Italy

**Features of prostate cancers detected by MRI in the PSA range 1.8-2.99: A report from the Gothenburg 2 prostate cancer screening study**

By: Hugosson J.\(^1\), Geterud K.\(^2\), Arnsrud Godtman R.\(^1\), Grenabo Bergdahl A.\(^1\), Kohestani K.\(^1\), Pihl C.\(^3\), Stranne J.\(^1\), Wallström J.\(^2\), Hellström M.\(^2\)

\(^1\) Sahlgrenska University Hospital, Dept. of Urology, Gothenburg, Sweden, \(^2\) Sahlgrenska University Hospital, Dept. of Radiology, Gothenburg, Sweden, \(^3\) Sahlgrenska University Hospital, Dept. of Pathology, Gothenburg, Sweden

**Comparison of the accuracy of multiparametric magnetic resonance imaging results with the final pathology findings for radical prostatectomy specimens in the detection of prostate cancer**

By: Lee C.H.\(^1\), Ku J.Y.\(^2\), Seo W.\(^1\), Ha H.K.\(^2\)
Assessing the predictive value of Prostate Health Index versus PIRADS in mpMRI targeted prostate cancer biopsy

By: Stejskal J., Záleský M., Bořecká K., Novák V., Fiala V., Čapoun O., Dolejšová O., Eret V., Veselý Š., Zachoval R.

Thomayer Hospital, Dept. of Urology, Prague, Czech Republic, Thomayer Hospital, Dept. of Clinical Biochemistry, Prague, Czech Republic, Motol University Hospital, Dept. of Urology, Prague, Czech Republic, General University Hospital, Dept. of Urology, Prague, Czech Republic, University Hospital in Pilsen, Dept. of Urology, Pilsen, Czech Republic

Development and external validation of MRI-based nomogram to predict the probability of prostate cancer diagnosis with MRI-US fusion biopsy


“Regina Elena” National Cancer Institute, Dept. of Urology, Rome, Italy, Sapienza University, Dept. of Radiology, Rome, Italy, Campus Biomedico University, Dept. of Urology, Rome, Italy, Humanitas University, Gradenigo Hospital, Dept. of Urology, Turin, Italy, Hospital of Cremona, Dept. of Urology, Cremona, Italy, University of Southern California, Dept. of Urology, Los Angeles, United States of America

Multiparametric-MRI/ultrasound fusion prostate biopsy: Are two biopsy cores per MRI-lesion required?


University of Düsseldorf, Dept. of Urology, Düsseldorf, Germany, University of Düsseldorf, Dept. of Pathology, Düsseldorf, Germany, University of Düsseldorf, Dept. of Radiology, Düsseldorf, Germany

Inter-individual variability in MRI/TRUS fusion targeted biopsies in a first biopsy setting: Bicentric prospective study


Thomayer Hospital, Dept. of Urology, Prague, Czech Republic, FN Motol, Dept. of Urology, Prague, Czech Republic, Thomayer Hospital, Dept. of Radiology, Prague, Czech Republic

Summary

M. Frydenberg, Melbourne (AU)
Functional outcomes of urinary tract reconstruction

Poster Session 37

**Location:** Red Area, Room 3 (Level 0)

**Chairs:**
- R. Bauer, Munich (DE)
- E.L. Koldewijn, Schijndel (NL)
- F. Liedberg, Malmö (SE)

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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**492**

A retrosigmoid ileal conduit with no transposition of the left ureter decreases the risk of ureteral stricture following radical cystectomy: A comparative study

By: Ficarra V. ¹, Crestani A. ², Rossanese M. ³, Palumbo V. ¹, Calandriello M. ², Valotto C. ², Giannarini G. ²

¹University of Messina, Dept. of Human and Pediatric Pathology “Gaetano Barresi”, Urologic Section, Messina, Italy, ²Academic Medical Centre “Santa Maria della Misericordia”, Urology Unit, Udine, Italy, ³University of Catania, Urology Unit, Catania, Italy

**493**

Transperitoneal laparoscopic management of megaureter with extracorporeal ureteral tapering: Safety and feasibility

By: El Harrech Y. ¹, Janane A. ¹, Ghoundale O. ², Alami M. ¹, Touiti D. ², Ameur A. ¹, Bensouda A. ³

¹Military hospital Med V, Dept. of Urology, Rabat, Morocco, ²Military Hospital Avicenna, Dept. of Urology, Marrakech, Morocco, ³Military hospital Med V, Rabat, Morocco

**495**

The trifecta outcome of ureteral reconstruction in iatrogenic injury and non-iatrogenic ureteral surgeries: 10-year experience in a tertiary referral center

By: Tseng C-S., Chow P-M., Huang K-H., Hung S-C.
National Taiwan University Hospital, Dept. of Urology, Taipei, Taiwan

**496**

Rendezvous & Ante-grade Realignment of Ureter (ROAR-U): Medium term results

By: Khong B., Bolomytis S., Gallagher J., Collin N., Philip J.
Southmead Hospital, North Bristol Trust, Dept. of Urology and Radiology, Bristol, United Kingdom

**497**

The outcomes of ureterolysis during complex rectovaginal endometriosis surgery in stented patients.

By: Mikhail M. ¹, Fisher G. ², Arumugam V. ¹, Tasleem A. ¹, Choong S. ¹, Allen S. ¹, Vashisht A. ², Saridogan E. ², Cutner A. ², Smith D. ¹
499  Continent catheterizable urinary conduits in adults with non-neurogenic and neurogenic lower urinary tract dysfunction

By: Groenendijk I., Blok B., Van Den Hoek J., Scheep J.
Erasmus MC, Dept. of Urology, Rotterdam, Netherlands, The

500  Functional outcome and postoperative complications with continent urinary diversion versus ileal conduit in neuro-urological patients

By: Froehlich M., Bywater M., Schmid D., Kessler T., Eberli D.
University Hospital Zurich, Dept. of Urology, Zurich, Switzerland, Balgrist University Hospital Zurich, Dept. of Neuro-Urology, Zurich, Switzerland

501  Patient-reported outcomes and health-related quality of life after radical cystectomy: Results from a large prospective study

By: Kretschmer A., Grimm T., Buchner A., Schulz G., Jokisch F., Apfelbeck M., Stief C., Karl A.
Ludwig-Maximilians University, Dept. of Urology, Munich, Germany

502  Comparison of outcomes of double-barrelled wet colostomy vs ileal conduit and end colostomy for urinary and faecal diversion following total pelvic exenteration

By: Kim L.H.C., Parkash B., Thompson A., Kumar P.
Royal Marsden Hospital, Dept. of Urology, London, United Kingdom

503  Incidence and management of pyocystis following ileal conduit urinary diversion for benign aetiology

By: Mankaryous G., Barratt R., Pakzad M., Hamid R., Ockrim J., Greenwell T.
University College London Hospital, Dept. of Urology, London, United Kingdom

504  Urethroplasty for traumatic urethral strictures in children and adolescents

University Hospital Ghent, Dept. of Urology, Ghent, Belgium

505  Outcomes of reconstructive urological surgery in radiotherapy patients

By: Toia B., Seth J., Ecclestone H., Pakzad M., Hamid R., Greenwell T., Ockrim J.
UCLH, Dept. of Urology, London, United Kingdom
Chronic kidney disease after nephron sparing surgery: What you always wanted to know
Poster Session 38

Sunday 18 March
12:15 - 13:45

Location: Blue Area, Room 1 (Level 0)
Chairs: T. Klatte, Cambridge (GB)
         F. Porpiglia, Turin (IT)

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

506 Yonsei nomogram: A predictive model of new onset chronic kidney disease following on-clamp partial nephrectomy in patients with T1 renal tumors
1Tanta University Hospital, Dept. of Urology, Tanta, Egypt, 2Chuncheon Sacred Hospital Hallym University, Dept. of Urology, Seoul, Korea, South, 3Yonsei Severance Hospital, Dept. of Urology, Seoul, Korea, South, 4Aljouf University, Dept. of Urology, Aljouf, Saudi Arabia

507 Increased warm ischemia time associated postoperative renal functional loss after laparoscopic partial nephrectomy in patients with contralateral functioning kidney is regained during intermediate term follow-up
By: Erdem S., Boyuk A., Verep S., Tefik T., Nane I., Ozcan F., Sanli O.
Istanbul University, Istanbul Faculty of Medicine, Dept. of Urology, Istanbul, Turkey

508 Functional evaluation by renal scintigraphy and CT-scan volumetric assessment before and after partial nephrectomy. Is the surgical complexity of the tumor predictive of the postoperative outcome?
By: Porpiglia F., Bertolo R., Amparore D., Manfredi M., Mele F., Garrou D., Cattaneo G., Checcucci E., Alleva G., Cossu M., Ragni F., Piramide F., Fiori C., Scarpa R.M.
San Luigi Gonzaga Hospital, Dept. of Urology, Orbassano, Italy

509 Striking a balance between renal ischemia and excessive blood loss decreases risk of acute kidney injury following partial nephrectomy of solitary kidney
By: Cherniaev V., Volkova M.I., Figurin K., Alborov S., Ridin V., Matveev V.
N.N. Blokhin Medical Research Center of Oncology, Dept. of Urology, Moscow, Russia

510 On-clamp versus off-clamp partial nephrectomy: Propensity score matched comparison of long term functional outcomes
By: Simone G., Capitanio U., Larcher A., Tuderti G., Ferriero M., Misuraca L.
511 Off-clamp robot-assisted partial nephrectomy: How far shall we proceed?


1Tanta University Hospital, Dept. of Urology, Tanta, Egypt, 2Yonsei Severance Hospital, Dept. of Urology, Seoul, Korea, South, 3Aljouf University, Dept. of Urology, Aljouf, Saudi Arabia

513 Selective arterial clamping with near-infrared fluorescence versus standard clamping during robot-assisted partial nephrectomy: Operative and early functional results based on renal scan

By: Mattevi D. 1, Luciani G.L. 1, Chiodini S. 1, Puglisi M. 1, Vattovani V. 1, Anceschi U. 2, Cai T. 1, Malossini G. 1

1Santa Chiara Hospital, Dept. of Urology, Trento, Italy, 2Santa Chiara Hospital, Dept. of Urology, Kenilworth, United States of America

514 Tumor coloring by Bleu Patente Sodique during laparoscopic partial nephrectomy after selective embolization of tumor vessels in a hybrid operating room: Feasibility and safety

By: Benoit M. 1, Panayotopoulos P. 1, Fortier E. 1, Bouvier A. 2, Nedelcu C. 2, Culry T. 1, Aube C. 2, Azzouzi A.R. 1, Bigot P. 1

1University Hospital of Angers, Dept. of Urology, Angers, France, 2University Hospital of Angers, Dept. of Radiology, Angers, France

515 ICG marked off-C robotic partial nephrectomy for endophytic renal tumors: Proof of concept and initial series

By: Simone G. 1, Misuraca L. 1, Tuderti G. 1, Ferriero M. 1, Minisola F. 1, Vallati G. 2, Pizzi G. 2, Guaglianone S. 1, Gallucci M. 1

1Regina Elena National Cancer Institute, Dept. of Urology, Rome, Italy, 2Regina Elena National Cancer Institute, Dept. of Radiology, Rome, Italy

516 The impact of aortic and renal arterial calcium score on renal function after partial nephrectomy

By: İleri F. 1, Ceyhan E. 1, Haberal H.B. 1, Jafarov R. 1, Balci H. 2, Haçiroğlu T. 2, Bilen C.Y. 1

1Hacettepe University, Dept. of Urology, Ankara, Turkey, 2Hacettepe University, Dept. of Radiology, Ankara, Turkey

517 Histomorfometric evaluation of rat kidney submitted to warm ischemia and the protective effect of resveratrol
Effect of ischemia-reperfusion-injury in diabetic rats: Is ischemia during nephron sparing surgery acceptable in a diabetic metabolic state?

By: Jarczyk J.1, Kriegmair M.1, Porubsky S.2, Klotz S.3, Ouerdani R.4, Erben P.1, Yard B.4
1University of Heidelberg, Medical Faculty Mannheim, Dept. of Urology, Mannheim, Germany, 2University of Heidelberg, Medical Faculty Mannheim, Dept. of Pathology, Mannheim, Germany, 3German Center for Neurodegenerative Diseases, Research institute for Neurodegenerative diseases (DZNE), Bonn, Germany, 4University of Heidelberg, Medical Faculty Mannheim, Dept. of Medicine, Mannheim, Germany

Remote ischemic pre-conditioning: The role in the reduction of the ischemic damage during laparoscopic partial nephrectomy as assessed by neutrophile gelatinase-associated lipocain

By: Porpiglia F.1, Calza E.2, Bertolo R.G.1, Manfredi M.1, Amparore D.1, Cattaneo G.1, Checcucci E.1, Pecoraro A.1, Giordano A.1, De Cillis S.1, Piana A.1, De Luca S.1, Ragni F.1, Scarpa R.M.1, Caironi P.2, Fiori C.1
1San Luigi Gonzaga Hospital, Dept. of Urology, Orbassano, Italy, 2San Luigi Gonzaga Hospital, Dept. of Anesthesiology, Orbassano, Italy

Evaluation of different biomarkers for the early detection of acute kidney injury following elective nephron-sparing surgery: Preliminary results in a prospective cohort study

By: Cocci A.1, Sessa S.1, Allinovi M.2, Romagnani P.3, Innocenti S.3, Zanazzi M.4, Ognibene A.5, Lorubbio M.5, Paparella L.6, Vanacore D.5, Campi R.7, Greco I.1, Serni S.1, Carini M.1, Minervini A.1
1AOU Careggi, Dept. of Urology, Florence, Italy, 2University of Florence, Dept. of Biomedical Experimental and Clinical Sciences 'Mario Serio', Florence, Italy, 3University of Florence, Dept. of Biomedical Experimental and Clinical Sciences 'Mario Serio', Florence, Italy, 4Careggi University hospital, Renal Unit, Florence, Italy, 5Careggi University Hospital, General laboratory, Florence, Italy, 6AOU Careggi, Dept. of Anesthesiology and Intensive care Unit, Florence, Italy, 7AOU Careggi, Dept. of Urology, Florence, Italy

Summary
F. Porpiglia, Turin (IT)
Optimising outcomes in kidney transplantation

Poster Session 39

Sunday 18 March 12:15 - 13:45

Location: Blue Area, Room 2 (Level 0)

Chairs: A. Alcaraz, Barcelona (ES)  
G. Karam, Nantes (FR)  
C. Terrone, Turin (IT)

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.

To be confirmed

521

**Early morning kidney transplantation – perioperative complications**

By: Pereira Lourenco M., Eliseu M., Carvalho J., Marconi L., Moreira P., Nunes P., Parada B., Dias V., Roseiro A., Bastos C., Rolo F., Figueiredo A.

Centro Hospitalar e Universitário de Coimbra, Dept. of Urology and Kidney Transplantation, Coimbra, Portugal

* 522

**Temporary contraindication of obese recipients in kidney transplantation: A new morphometric tool for decision support**

By: Pinar U., Renard Y., Bedretdinova D., Parier B., Hammoudi Y., Irani J., Bessede T.

1Bicêtre Hospital, Dept. of Urology, Le Kremlin-Bicêtre, France, 2CHU de Reims, Dept. of Visceral Surgery, Reims, France

523

**Robot-assisted kidney transplantation in obese recipients: The ERUS working group experience**


1Fundació Puigvert, Dept. of Urology, Barcelona, Spain, 2Hospital Clinic, Dept. of Urology, Barcelona, Spain, 3University Hospital of Rangueil, Dept. of Urology and Renal Transplantation, Toulouse, France, 4Ghent University Hospital, Dept. of Urology, Ghent, Belgium, 5Ghent University Hospital, Dept. of Urology, Ghent, Belgium, 6University Hospital Halle, Dept. of Urology, Halle, Germany, 7University of Florence, Dept. of Urology, Florence, Italy, 8Bakirkoy Sadi Konuk Training and Research Hospital Center, Dept. of Urology, Istanbul, Turkey, 9University Saarland, Dept. of Urology, Homburg/Saar, Germany
**524**  
Withdrawn  
To be confirmed

**525**  
Clinical impact of perfusion fluid contamination in kidney transplant  
Bellvitge University Hospital, Dept. of Urology, Hospitalet de Llobregat, Spain, Bellvitge University Hospital, Dept. of Infectious Diseases, Hospitalet de Llobregat, Spain, Bellvitge University Hospital, Dept. of Nephrology, Hospitalet de Llobregat, Spain

**526**  
Kidney transplant from a living donor: Does the choice of the donor right kidney lead to greater surgical morbidity in the recipient?  
By: Ferreiro Pareja C., Riera L., Suárez J., Fiol M., Etcheverry B., Pujol L., Cocera R., Vigués F.  
University Hospital of Bellvitge, Dept. of Urology, Barcelona, Spain

**527**  
Intraoperative and graft-related variables associated with graft upper tract post-operative obstruction: A prospective observational study  
Città della Salute e della Scienza - San Giovanni Battista Molinette Hospital, Dept. of Urology, Turin, Italy, Città della Salute e della Scienza - San Giovanni Battista Molinette Hospital, Dept. of Nephrology and Renal Transplantation, Turin, Italy

**528**  
Comparison of glomerular filtration rate (GFR) loss after nephrectomy in 3 populations: Living donor nephrectomy, radical nephrectomy and partial nephrectomy for cancer  
By: Boissier R., Sichez P.C., Tran S., Delaporte V., Karsenty G., Lechevallier E.  
Aix-Marseille University, Dept of Urology and Renal Transplantation, Marseille, France, Aix-Marseille University, Dept. of Urology and Renal Transplantation, Marseille, France

**529**  
Outcomes of robot-assisted radical prostatectomy before and after renal transplant  
Guy's and St Thomas' NHS Foundation Trust, Dept. of Urology, London, United Kingdom, King's College Hospital NHS Foundation Trust, Dept. of Urology, London, United Kingdom, Guy's and St Thomas' NHS Foundation Trust, Dept. of Renal Transplant, London, United Kingdom, Guy's and St Thomas' NHS Foundation Trust, Dept. of Urology and Renal Transplantation, London, United Kingdom

**530**  
Hyperspectral imaging for ex-vivo organ characterization during normothermic machine perfusion
531 MicroRNAs in kidney hypothermic machine perfusion fluid as novel biomarkers for graft function: Have changes in normalization guidelines support previous results?

By: Gomez Dos Santos V. 1, García-Bermejo L. 2, Ramos E. 2, Diez-Nicolás V. 1, Alvarez S. 1, Hevia V. 1, Fernández A.A. 1, Martínez A. 3, Elías S. 4, Sánchez C. 1, Arias F. 1, Jiménez M. 1, Rodríguez-Patrón R. 1, Burgos F.J. 1

1 University Hospital Ramón y Cajal, Dept. of Urology, Madrid, Spain, 2 University Hospital Ramón y Cajal, Biomarkers and Therapeutic Targets Group, Madrid, Spain, 3 University Hospital Ramón y Cajal, Dept. of Transplant Coordination, Madrid, Spain, 4 University Hospital Ramón y Cajal, Dept. of Nephrology, Madrid, Spain

532 Serum aberrant N-glycan profile as a marker associated with early antibody-mediated rejection in patients receiving a living donor kidney transplant

By: Noro D. 1, Yoneyama T. 1, Hatakeyama S. 1, Tobisawa Y. 1, Mori K. 1, Hashimoto Y. 2, Koie T. 1, Tanaka M. 3, Nishimura S-I. 3, Sasaki H. 4, Saito M. 5, Harada H. 6, Chikaraishi T. 4, Ishida H. 7, Tanabe K. 7, Satoh S. 5, Ohyama C. 1

1 Hirosaki University Graduate School of Medicine, Dept. of Urology, Hirosaki, Japan, 2 Hirosaki University Graduate School of Medicine, Dept. of Advanced Transplant and Regenerative Medicine, Hirosaki, Japan, 3 Hokkaido University Graduate School of Life Science, Frontier Research Center for Advanced Material and Life Science, Sapporo, Japan, 4 St. Mariana University of Medicine, Dept. of Urology, Kawasaki, Japan, 5 Akita University Graduate School of Medicine, Dept. of Urology, Akita, Japan, 6 Sapporo City General Hospital, Dept. of Kidney Transplant Surgery, Sapporo, Japan, 7 Tokyo-Woman's Medical University, Dept. of Urology, Tokyo, Japan

533 Anti-CD20 and mTOR inhibitors: Can we change the prognosis of post-transplant lymphoproliferative disorder?

By: Guerrero Ramos F. 1, Cavero Escribano T. 2, Pamplona Casamayor M. 1, Rodríguez Antolín A. 1, Duarte Ojeda J. 1, Tejido Sánchez Á. 1, Villacampa Aubá F. 1, Medina Polo J. 1, González Monte E. 2, Passas Martínez J. 1, De La Rosa Kehrmann F. 1

1 Hospital Universitario, Dept. of Urology, Madrid, Spain, 2 Hospital Universitario, Dept. of Nephrology, Madrid, Spain
Prostate MRI combined with PSA-density may reduce the number of follow-up targeted biopsies in men on active surveillance for low-risk prostate cancer

By: Osses D.¹, Alberts A.¹, Verbeek J.², Drost F-J.¹, Roobol M.², Schoots I.³
¹Erasmus University Medical Center, Dept. of Urology, Dept. Radiology and Nuclear Medicine, Rotterdam, Netherlands, The, ²Erasmus University Medical Center, Dept. of Urology, Rotterdam, Netherlands, The, ³Erasmus University Medical Center, Dept. Radiology and Nuclear Medicine, Rotterdam, Netherlands, The

Prostate health index and multiparametric MRI to predict prostate cancer grade reclassification in active surveillance

By: Schwen Z.¹, Mamawala M.¹, Ross A.¹, Tosoian J.¹, Druskin S.¹, Sokoll L.², Epstein J.², Pavlovich C.¹, Carter H.B.¹
¹Johns Hopkins University School of Medicine, James Buchanan Brady Urological Institute and Dept. of Urology, Baltimore, United States of America, ²Johns Hopkins University School of Medicine, Dept. of Pathology, Baltimore, United States of America

Active surveillance: Off-protocol selection increases the risk of unfavorable outcomes

By: Soeterik T.¹, Van Melick H.¹, Dijksman L.¹, Biesma D.¹, Witjes F.², Van Basten J.P.³
¹St. Antonius Hospital, Dept. of Urology, Nieuwegein, Netherlands, The, ²Radboud University Nijmegen Medical Center, Dept. of Urology, Nijmegen, Netherlands, The, ³Canisius Wilhelmina Hospital, Dept. of Urology, Nijmegen, Netherlands, The

How can we expand active surveillance criteria in patients with low- and intermediate risk prostate cancer without increasing the risk of misclassification: Development of a novel risk calculator

By: Gandaglia G.¹, Van Den Bergh R.², Tilki D.³, Fossati N.¹, Ost P.⁴, Surcel C.⁵, Sooriakumaran P.⁶, Tsaur I.⁷, Valerio M.⁸, Kretschmer A.⁹, Montorsi F.¹, Graefen
538 Risk inflation as a consequence of MRI-targeted biopsy of the prostate in men on active surveillance for low-risk prostate cancer?

By: Osses D. 1, Alberts A. 1, Verbeek J. 2, Drost F-J. 1, Roobol M. 2, Schoots I. 3
1 Erasmus University Medical Center, Dept. of Urology, Dept. Radiology and Nuclear Medicine, Rotterdam, Netherlands, The, 2 Erasmus University Medical Center, Dept. of Urology, Rotterdam, Netherlands, The, 3 Erasmus University Medical Center, Dept. of Radiology and Nuclear Medicine, Rotterdam, Netherlands, The

539 Is focal therapy for prostate cancer an attractive option? Results of an international survey from the young academic urologists (YAU) amongst 484 physicians

By: Marra G. 1, Ploussard G. 2, Ost P. 3, De Visschere P. 3, Sooriakumaran P. 4, Briganti A. 5, Gandaglia G. 5, Tilki D. 6, Surcel C. 7, Tsaur I. 8, Van Den Bergh R. 9, Kretschmer A. 10, Goonewardene S. 11, Borgmann H. 12, Gontero P. 1, Ahmed H. 13, Valerio M. 14
1 Molinette Hospital - University of Studies of Turin, Dept. of Surgical Sciences, Turin, Italy, 2 Saint Jean Languedoc Hospital, Dept. of Surgical Sciences, Toulouse, France, 3 Ghent University, Dept. of Urology and Radiology, Ghent, Belgium, 4 University College London Hospital, Dept. of Urology, London, United Kingdom, 5 Vita e Salute University, San Raffaele Hospital, Dept. of Urology, Milan, Italy, 6 Martini Klinik, Dept. of Urology, Hamburg, Germany, 7 Fundeni Clinical Institute, Dept. of Urology, Bucharest, Romania, 8 University of Mainz, Dept. of Urology, Mainz, Germany, 9 University of Utrecht, Dept. of Urology, Utrecht, Netherlands, The, 10 Ludwig-Maximilians-University of Munich, Dept. of Urology, Munich, Germany, 11 Guy’s Hospital, Dept. of Urology, London, United Kingdom, 12 University Hospital of Mainz, Dept. of Urology, Mainz, Germany, 13 Imperial College London, Dept. of Surgery and Cancer, London, United Kingdom, 14 Centre Hospitalier Universitaire Vaudois, Dept. of Urology, Lausanne, Switzerland

540 Active surveillance in prostate cancer patients: Predicting the chance of continuing AS after re-biopsy
To be confirmed

541 Follow-up in active surveillance for prostate cancer: Variety in Dutch practice patterns
Prostate radiofrequency ablation focal treatment (proRAFT): Results of a prospective development study for localised prostate cancer

By: Soeterik T., Van Melick H., Dijksman L., Biesma D., Witjes J., Van Basten J.-P.

1St. Antonius Hospital, Dept. of Value Based Healthcare, Nieuwegein, Netherlands, The, 2St. Antonius Hospital, Dept. of Urology, Nieuwegein, Netherlands, The, 3Radboud University Medical Centre, Dept. of Urology, Nijmegen, Netherlands, The, 4Canisius Wilhelmina Hospital, Dept. of Urology, Nijmegen, Netherlands, The

The clinical application and molecular mechanism of a blood based three gene signature underlying active surveillance of prostate cancer

To be confirmed

Cost-utility analysis of focal HIFU versus active surveillance for low- to intermediate-risk prostate cancer using a Markov multi-state Model

By: Duroux T., Robert G., Renaud A.

1University of Bordeaux, Inserm U1219, Team EMOS, Bordeaux, France, 2CHU Bordeaux, Dept. of Andrology and Kidney Transplantation, Bordeaux, France, 3CHU Bordeaux, Clinical Epidemiology Unit (USMR), Bordeaux, France

The importance of negative baseline multiparametric MRI to reduce the rate of early reclassification in low-risk prostate cancer patients managed with active surveillance


1San Raffaele Hospital Turro, Dept. of Urology, Milan, Italy, 2Vita-Salute University San Raffaele, Dept. of Urology, Milan, Italy, 3Vita-Salute University San Raffaele, Dept. of Radiology, Milan, Italy, 4Federico II University, Dept. of Urology, Naples, Italy, 5Polytechnic University of Marche Region, Dept. of Pathology, Ancona, Italy, 6Medical University of Vienna, Dept. of Urology, Vienna, Austria

Consistent biopsy quality and Gleason grading within the global active surveillance GAP3 initiative: A prerequisite for future studies

By: Van Der Kwast T., Bruinsma S., Nieboer D., Helleman J., Roobol M.
Focal HIFU: Higher recurrence rate in treatment of anterior compared to posterior lesions in prostate cancer

By: Huber P.M.\textsuperscript{1}, Afzal N.\textsuperscript{2}, Arya M.\textsuperscript{3}, Boxler S.\textsuperscript{1}, Charman S.\textsuperscript{4}, Cornaby A.\textsuperscript{2}, Dudrider T.\textsuperscript{5}, Emberton M.\textsuperscript{3}, Guillaumer S.\textsuperscript{3}, Hindley R. J.\textsuperscript{6}, Leemann L. T.\textsuperscript{7}, Lewi H.\textsuperscript{8}, Mc Cartan N.\textsuperscript{4}, Moore C. M.\textsuperscript{3}, Nigam R.\textsuperscript{9}, Ogden C.\textsuperscript{10}, Persad R.\textsuperscript{11}, Shah K.\textsuperscript{4}, Thalmann G.N.\textsuperscript{12}, Virdi J.\textsuperscript{13}, Winkler M.\textsuperscript{14}, Ahmed H. U.\textsuperscript{14}

\textsuperscript{1}University Hospital Bern, Dept. of Urology, Bern, Switzerland, \textsuperscript{2}Dorset County Hospital NHS Trust, Dept. of Urology, Dorset, United Kingdom, \textsuperscript{3}UCLH NHS Foundation Trust, Dept. of Urology, London, United Kingdom, \textsuperscript{4}University College London, Division of Surgery and International Sciences, London, United Kingdom, \textsuperscript{5}University Hospital Southampton NHS Trust, Dept. of Urology, Southampton, United Kingdom, \textsuperscript{6}Hampshire Hospitals NHS Foundation Trust, Dept. of Urology, Basingstoke, United Kingdom, \textsuperscript{7}University of Zurich, Dept. of Political Science, Zurich, Switzerland, \textsuperscript{8}Springfield Hospital, Dept. of Urology, Chelmsford, United Kingdom, \textsuperscript{9}Royal County Surrey Hospital NHS Trust, Dept. of Urology, Surrey, United Kingdom, \textsuperscript{10}The Royal Marsden Hospital NHS Foundation Trust, Dept. of Academic Urology, London, United Kingdom, \textsuperscript{11}Southmed Hospital, Dept. of Urology, Bristol, United Kingdom, \textsuperscript{12}University Hospital Insel, Dept. of Urology, Bern, Switzerland, \textsuperscript{13}The Princess Alexandra Hospital NHS Trust, Dept. of Urology, Harlow, United Kingdom, \textsuperscript{14}Charing Cross Hospital, Imperial Urology, London, United Kingdom
**Paediatric urology 1: Pyeloplasty and stones**

**Poster Session 41**

**Sunday 18 March**

**12:15 - 13:45**

**Location:** Blue Area, Room 4 (Level 0)

**Chairs:**
- G. Bogaert, Leuven (BE)
- S. Tekgül, Ankara (TR)
- L.A. ‘t Hoen, Rotterdam (NL)

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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**548**

**Morphology of the fetal renal pelvis during the second trimester: Comparing genders**

By: Favorito L., Gallo C., Lobo M., Costa W., Sampaio F.,

Rio de Janeiro State University, Dept. of Urogenital Research, Rio de Janeiro, Brazil

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**549**

**Pyeloplasty in children with low differential renal function: Is there a possibility for functional recoverability?**

By: El Helaly A., Sarhan O., Al Otay A., Al Ghanbar M., Nakshabandi Z.,

Prince Sultan Military Medical City, Dept. of Urology, Riyadh, Saudi Arabia

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**550**

**The characteristics of crossing vessel assessed by retrograde renal pelvic dilatation during pyeloplasty in pediatric patients with ureteropelvic junction obstruction**

By: Kang S.K., Kim S.H., Hwang J.H., Kim S.Y., Kim S.W., Han S.W., Lee Y.S.,

1Yonsei University College of Medicine, Dept. of Urology and Urological Science Institute, Seoul, Korea, South, 2Severance Children’s Hospital, Dept. of Pediatric Urology, Seoul, Korea, South

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**551**

**Laparoscopic pyeloplasty versus open pyeloplasty in pediatric patients with previous open surgical repair: A retrospective comparative study and single center experience**

By: Hammady A.R., Elbadry M.,

1Sohag University Hospital, Dept. of Urology and Minimally Invasive Techniques, Sohag, Egypt, 2El-Minia University Hospital, Dept. of Urology and Minimally Invasive Techniques, El-Minia, Egypt

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**552**

**Transperitoneal minilaparoscopic pyeloplasty is a safe procedure in children and young adults**

By: Bañuelos Marco B., Friedersdorff F., Lingnau A.,

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<td>Ureteral stent colonization and urinary tract infection in children undergoing minimally invasive pyeloplasty</td>
<td>Neheman A.¹, Tamimi A.¹, Haifler M.¹, Stav K.¹, Darawshe A.E.², Leibovitch I.², Goltzman G.³, Zisman A.¹</td>
<td>Charité Universitätsmedizin Berlin, Dept. of Paediatric Urology and Urology, Berlin, Germany, Meir Medical Center, Dept. of Urology, Kfar-Saba, Israel,</td>
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<td>554</td>
<td>Outcome of pediatric pyeloplasty in kidneys with split renal function less than 10%: A prospective study of 25 cases</td>
<td>Yehia Abdelaziz A.¹, Shaker H.², Hussien H.¹, Aldaqados H.³</td>
<td>Cairo University, Dept. of Urology, Cairo, Egypt, El Fayoum University, Dept. of Urology, El Fayoum, Egypt, El Fayoum University, Dept. of Urology, El Fayoum, Egypt</td>
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<td>555</td>
<td>Pyeloplasty: A feasible less invasive follow up plan</td>
<td>Al Otay A., El Helaly A., Sarhan Q., Al Ghanbar M., Nakshabandi Z.</td>
<td>Prince Sultan Military Medical City, Dept. of Urology, Riyadh, Saudi Arabia</td>
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<td>Long term improvement of ultrasound parameters in kidney units after early pyeloplasty</td>
<td>Šarapatka J., Šmakal O., Vrána J., Študent V.</td>
<td>University Hospital Olomouc, Dept. of Urology, Olomouc, Czech Republic</td>
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<td>557</td>
<td>Combined use of flexible ureteroscopy with micro-percutaneous nephrolithotomy in pediatric multiple kidney stones</td>
<td>Wenying W., Li J.</td>
<td>Beijing Friendship Hospital, Capital Medical University, Dept. of Urology, Beijing, China</td>
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<td>559</td>
<td>Retrograde intrarenal surgery or percutaneous nephrolithotomy: Which one is more effective for 1-2 cm renal stones in pediatric patients?</td>
<td>Sarikaya S.¹, Ebiloglu T.¹, Selvi I.², Senocak C.², Bozkurt O.F.²</td>
<td>Gulhane Research and Training Hospital, Dept. of Urology, Ankara, Turkey, Kecioren Research and Training Hospital, Dept. of Urology, Ankara, Turkey</td>
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<td>560</td>
<td>Outcomes of flexible ureteroscopic lithotripsy for treatment of kidney stones in infants</td>
<td>Wenying W., Li J., Tian Y.</td>
<td>Beijing Friendship Hospital, Capital Medical University, Dept. of Urology, Beijing, China</td>
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### 561

**The course of renal function and strictures of the ureteroenteric anastomosis in the long-term outcome after urinary diversion using the ileocecal segment in children and adolescents**

By: Deuker M.\(^1\), Stein R.\(^2\), Davis K.\(^1\), Haferkamp A.\(^3\)

\(^1\)University Hospital Frankfurt, Dept. of Urology, Frankfurt, Germany, \(^2\)University Medical Centre Mannheim, Dept. of Pediatric Urology, Mannheim, Germany, \(^3\)University Medical Center of the Johannes Gutenberg University Mainz, Dept. of Urology, Mainz, Germany

### 562

**Are the results of pediatric renal transplantation identical to the adult population?**

By: Pontes Antunes H., Tavares-Da-Silva E., Carvalho J., Parada B., Bastos C., Figueiredo A.

Urology and Renal Transplantation Department, Coimbra University Hospital Center, Urology and Renal Transplantation Department, Coimbra, Portugal

### 558

**Pediatric PCNL puncture complication: Risk factors**

By: Gamal Saad W., Mmdouh A.

Sohag university hospital, Dept. of Urology, Sohag, Egypt
Cystectomy - histology, lymph nodes and prognostics...
Poster Session 42

Location: Blue Area, Room 5 (Level 0)
Chairs: A.J. Colquhoun, Cambridge (GB)
M.S. Michel, Mannheim (DE)
A.R. Zlotta, Toronto (CA)

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

563

Effect of the level of node metastases in patients treated with radical cystectomy and extended pelvic lymph node dissection

By: Moschini M.¹, Burgio G.², Bianchi M.², Gandaglia G.², Suardi N.², Tutolo M.², Mattei A.³, Salonia A.², Briganti A.², Montorsi F.², Colombo R.², Gallina A.²
¹Luzerner Kantonsspital, Vita-Salute University, Urological Research Institute, Dept. of Urology, Luzern, Switzerland,
²San Raffaele Scientific Institute, Vita-Salute University, Urological Research Institute, Dept. of Urology, Milan, Italy,
³Luzerner Kantonsspital, Dept. of Urology, Luzern, Switzerland

564

Impact of variant histologic differentiation in bladder cancer patients on recurrence pattern after radical cystectomy: Implications for follow up schemes

By: Moschini M.¹, Burgio G.², Damiano R.³, Suardi N.², Fossati N.², Gandaglia G.², Dehò F.², Bianchi M.², Mattei A.¹, Salonia A.², Briganti A.², Montorsi F.², Colombo R.², Gallina A.²
¹LUKS, Dept. of Urology, Luzern, Switzerland,
²San Raffaele, Dept. of Urology, Milan, Italy,
³Catanzaro, Dept. of Urology, Catanzaro, Italy

565

Post-chemotherapy PD-L1 expression correlates with clinical outcomes in Japanese bladder cancer patients treated with total cystectomy

By: Yasuhiro H., Yamamoto H., Imai A., Hatakeyama S., Yoneyama T., Koie T., Kawaguchi T., Ohyama C.
Hirosaki University Graduate School of Medicine, Dept. of Urology, Hirosaki, Japan

566

Lymphadenectomy during salvage cystectomy in patients with advanced and metastatic bladder cancer

By: Stakhovskyi O., Voylenko O., Semko S., Kononenko O., Pikul M., Vitruk I., Stakhovsky E.
National Cancer Institute, Dept. of Plastic and Reconstructive OncoUrology, Kiev, Ukraine

567

Comparative outcomes of radical cystectomy for muscle invasive bladder cancer in primary vs. progressive tumor: Results in a large multicenter study
568 Integration of neutrophil-to-lymphocyte ratio into the MD Anderson Cancer Center preoperative risk classification of patients with bladder cancer who underwent radical cystectomy

By: Hirasawa Y., Ishizawa Y., Gondo T., Shimizu Y., Hashimoto T., Satake N., Nakagami Y., Namiki K., Ohori M., Ohno Y.
Tokyo Medical University, Dept. of Urology, Tokyo, Japan

569 Can orthotopic bladder substitution be performed in patients with positive biopsies of the distal prostatic urethra (male) or the bladder neck (female)?

By: Roth B., Giannakis I., Kiss B., Thalmann G.
University of Bern, Dept. of Urology, Bern, Switzerland

570 Complete transurethral resection before radical cystectomy improve oncological outcomes

CHU Pontchaillou, Dept. of Urology, Rennes, France, CHU Rangueil, Dept. of Urology, Toulouse, France, CHU Pontchaillou, Dept. of Pathology, Rennes, France, Centre Eugène Marquis, Dept. of Oncology, Rennes, France

571 Favorable locoregional control in patients with histologic variants of urothelial carcinoma treated with tetra-modality bladder-sparing protocol incorporating consolidative partial cystectomy with lymph node dissection

Tokyo Medical and Dental University Graduate School, Dept. of Urology, Tokyo, Japan

572 Circulating tumor cells and copy number variations of circulating tumor DNA in bladder cancer patients treated with radical cystectomy

University Medical Center Hamburg-Eppendorf, Dept. of Urology, Hamburg, Germany,
573

Prognostic value of concomitant carcinoma in situ in radical cystectomy specimens on patients with bladder cancer: A meta-analysis of 24,136 patients

By: Kimura S. 1, Mari A. 1, Foerster B. 1, Vartolomei M. 1, Abufaraj M. 1, Briganti A. 2, Egawa S. 3, Shariat S. 1

1Medical University of Vienna, Dept. of Urology, Vienna, Austria, 2San Raffaele Scientific Institute, Vita-Salute San Raffaele University, Urological Research Institute, Milan, Italy, 3Jikei University School of Medicine, Dept. of Urology, Tokyo, Japan

576

Prognostic impact of tumor infiltrating lymphocytes and immune cell related gene expression after radical cystectomy in muscle-invasive bladder cancer


1Friedrich-Alexander University Erlangen-Nuremberg, Dept. of Pathology, Erlangen, Germany, 2Friedrich-Alexander University Erlangen-Nuremberg, Dept. of Urology, Erlangen, Germany, 3University of Heidelberg, Dept. of Urology, Mannheim, Germany, 4Stratifyer, Dept. of Stratifyer, Cologne, Germany, 5University of Regensburg, Dept. of Urology, Regensburg, Germany, 6University of Ulm, Dept. of Urology, Ulm, Germany

577

Role of mixed urothelial-squamous histological variant percentage on survival outcomes after radical cystectomy for bladder cancer


ASST Papa Giovanni XXIII, Dept. of Urology, Bergamo, Italy
The Expert-Guided Poster Tour is a new innovative session type. The Tour aims to provide an interactive platform informing delegates on the real essentials and providing in-depth information on the different research projects. The Expert-Guided Poster Tour consists of two parts: The first part is reserved for poster viewing. The posters will be on display for 2 hrs before the start of the Guided Poster Tour. During the second part of the Tour, the two experts acting as moderators, will ask questions to poster presenters.

PT044

Changes in stone treatment practise the last 20 years

By: Andreassen K.H.A.
Herlev - Gentofte Hospital, Dept. of Urology, Copenhagen, Denmark

PT045

What patients really think about urolithiasis guidelines: Barriers to guideline implementation from the patients’ perspective

By: Sallami S.¹, Abou El Mamakrim S.¹, Khouni H.², Ichaoui H.¹
¹Mohamed Tahar Mâamouri University Hospital, Dept. of Urology, Nabeul, Tunisia, ²FSI University Hospital, Dept. of Urology, La Marsa, Tunisia

PT046

The analysis of urolithiasis incidence in the contralateral kidney of uninephrectomy patients

By: Zou X.¹, Xie T.¹, Xu Q.², Huang X.², Zhang G.¹, Xiong L.²
¹First Affiliated Hospital of Gannan Medical University, Dept. of Urology, Ganzhou, China, ²Peking University People’s Hospital, Dept. of Urology, Beijing, China

PT047

Quality of life and satisfaction in a virtual stone clinic: A pilot study

By: Hendry J., Kerr L., Mcilhenny C.
Forth Valley Hospital, Dept. of Urology, Larbert, United Kingdom

PT048

Development and internal validation of a nomogram for predicting spontaneous passage of ureteral stones of ≤10mm

By: Yoshida T., Taguchi M., Inoue T., Matsuzaki T., Kinoshita H., Matsuda T.
Kansai medical university, Dept. of Urology, Osaka, Japan

PT049

Flouroless ureteroscopy for definitive management of distal ureteral calculi: Randomized controlled trial
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<td>PT050</td>
<td>The surgical experience does not affect radiation exposure during retrograde intrarenal surgery: Preliminary findings from a cross sectional study</td>
<td>By: Boeri L.¹, Gallioli A.¹, De Lorenzis E.¹, Zanetti S.P.¹, Sampogna G.¹, Fontana M.¹, Palmisano F.¹, Longo F.¹, Malagó G.¹, Brambilla R.², Campoleoni M.², Salonia A.³, Montanari E.¹&lt;br&gt;¹Fondazione IRCCS Ca Granda-Ospedale Maggiore Policlinico Department of Clinical Sciences and Community Health University of Milan, Dept. of Urology, Milan, Italy, ²Fondazione IRCCS Ca Granda-Ospedale Maggiore Policlinico, Health Physics Unit, Milan, Italy, ³IRCCS Ospedale San Raffaele; URI, Division of Experimental Oncology/Unit of Urology, Milan, Italy</td>
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<td>PT051</td>
<td>Automated stone/tissue autofluorescence analysis in real-time – an ex vivo evaluation of an intelligent laser lithotripsy system</td>
<td>By: Schlager D.¹, Schütz J.², Brandenburg A.², Miernik A.¹&lt;br&gt;¹University Medical Center Freiburg - Faculty of Medicine, Dept. of Urology, Freiburg, Germany, ²Fraunhofer Institute of Physical Measurement Techniques, Dept. of Production Control, Freiburg, Germany</td>
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<td>PT052</td>
<td>Diameter of ureteral access sheath (UAS): Does it affect the surgical outcomes of retrograde intrarenal surgery (RIRS) for management of 2-3 cm sized renal stone?</td>
<td>By: Choi J.Y.¹, Ko Y.H.¹, Moon K.H.¹, Jung H.C.¹, Song P.H.¹&lt;br&gt;Yeungnam University Medical Center, Dept. of Urology, Daegu, Korea, South</td>
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<td>PT053</td>
<td>Ureteral access sheath-related injuries vs post operative infective conditions: Is sheath insertion always needed?</td>
<td>By: Bozzini G.¹, Buffi N.², Verze P.³, Casellato S.⁴, Maruccia S.⁴, Romero Otero J.⁵, Gozen S.A.⁶, Lughezzani G.², Guazzoni G.F.², Montanari E.⁷&lt;br&gt;¹Humanitas Mater Domini, Dept. of Urology, Castellanza, Italy, ²Humanitas Research Hospital, Dept. of Urology, Rozzano, Italy, ³Università Federico II, Dept. of Urology, Naples, Italy, ⁴Istituti Clinici Zucchi, Dept. of Urology, Monza, Italy, ⁵Hospital 12 de Octubre, Dept. of Urology, Madrid, Spain, ⁶Heilbronn Hospital, Dept. of Urology, Heilbronn, Germany, ⁷Policlinico di Milano, Dept. of Urology, Milan, Italy</td>
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<td>PT054</td>
<td>Variation in ureteral access sheath (UAS) size, and potential impact on safe intra-renal pressure (IRP) during retrograde intra-renal surgery (RIRS)</td>
<td>By: Patel A.¹, Kabakçi A.S.², Tokatlı Z.³, Sarıca K.⁴, Saglam R.³&lt;br&gt;¹Spire Roding Hospital, Dept of Urology, London, United Kingdom, ²Hacettepe University, Dept of Bioengineering, Ankara, Turkey, ³Medicana International Hospital, Dept. of</td>
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Urology, Ankara, Turkey, Health Sciences University Kartal Training Hospital, Dept. of Urology, Istanbul, Turkey

PT055

Impact of flexible ureterorenoscopy on biomarkers which are associated with renal parenchyma injury

By: Maybüchen L.\textsuperscript{1}, Stekhoven D.\textsuperscript{2}, Birzele J.A.\textsuperscript{1}, Mack M.\textsuperscript{1}, Risch M.\textsuperscript{3}, Strebel R.\textsuperscript{1}
\textsuperscript{1}Kantonsspital Graubünden, Dept. of Urology, Chur, Switzerland, \textsuperscript{2}ETH Zürich, Dept. of Clinical Bioinformatics, Zürich, Switzerland, \textsuperscript{3}Kantonsspital Graubünden, Dept. of Laboratory, Chur, Switzerland

PT056

'Torque' abilities of reusable and single-use flexible ureterorenoscopes: A novel in-vitro evaluation of twelve flexible ureteroscopes

By: Dragos L.B.\textsuperscript{1}, Martis S.M.\textsuperscript{2}, Somani B.K.\textsuperscript{3}, Bres-Niewada E.\textsuperscript{4}, Sener T.E.\textsuperscript{5}, Buttice S.\textsuperscript{6}, Wiseman O.J.\textsuperscript{7}, Doizi S.\textsuperscript{8}, Traxer O.\textsuperscript{8}
\textsuperscript{1}University of Medicine and Pharmacy, Dept. of Urology, Timisoara, Romania, \textsuperscript{2}Clinical Emergency County Hospital, Dept. of Urology, Timisoara, Romania, \textsuperscript{3}University Hospital Southampton NHS Trust, Dept. of Urology, Southampton, United Kingdom, \textsuperscript{4}Medical University of Warsaw, Dept of Urology, Warsaw, Poland, \textsuperscript{5}Marmara University Istanbul, Dept. of Urology, Istanbul, Turkey, \textsuperscript{6}San Giovanni di Dio Hospital, Dept. of Urology, Agrigento, Italy, \textsuperscript{7}Cambridge University Hospitals NHS Trust, Dept. of Urology, Cambridge, United Kingdom, \textsuperscript{8}Tenon Hospital, Dept. of Urology, Paris, France

PT057

Taking advantage of single-use flexible ureteroscopes: Techniques of forced tip deflection and forced torque

By: Keller E.X.\textsuperscript{1}, De Coninck V.\textsuperscript{1}, Rodriguez-Monsalve M.\textsuperscript{1}, Dragos L.\textsuperscript{2}, Doizi S.\textsuperscript{1}, Traxer O.\textsuperscript{1}
\textsuperscript{1}Tenon Hospital, Assistance-Publique Hôpitaux de Paris. Pierre et Marie Curie University, Dept. of Urology, Paris, France, \textsuperscript{2}University of Medicine and Pharmacy “Victor Babes” Timisoara, Dept. of Urology, Timisoara, Romania

PT058

Comparison of flexible ureterorenoscope quality of vision: An in vitro study

By: Talso M.\textsuperscript{1}, Proietti S.\textsuperscript{2}, Emiliani E.\textsuperscript{3}, Gallioli A.\textsuperscript{1}, Orosa A.\textsuperscript{4}, Servian P.\textsuperscript{5}, Barreiro A.\textsuperscript{5}, Giusti G.\textsuperscript{2}, Montanari E.\textsuperscript{1}, Somani B.\textsuperscript{6}, Traxer O.\textsuperscript{7}
\textsuperscript{1}University of Milan, Dept. of Urology, Milan, Italy, \textsuperscript{2}San Raffaele University, Dept. of Urology, Milan, Italy, \textsuperscript{3}Fundacion Puigvert, Dept. of Urology, Barcelona, Spain, \textsuperscript{4}Ramón Cajal University, Dept. of Urology, Madrid, Spain, \textsuperscript{5}Hôpital Tenon, Dept. of Urology, Paris, France, \textsuperscript{6}University Hospitals Southampton, Dept. of Urology, Southampton, United Kingdom, \textsuperscript{7}Hôpital Tenon, Dept. of Urology, Paris, France

PT059

The optics of the new digital single-use flexible ureterorenoscopes: Is the endoscopic view as good as the view of the reusable scopes?

By: Dragos L.B.\textsuperscript{1}, Keller E.X.\textsuperscript{2}, Martis S.M.\textsuperscript{3}, Somani B.K.\textsuperscript{4}, Bres-Niewada E.\textsuperscript{5}, Ploumidis A.\textsuperscript{6}, Sener T.E.\textsuperscript{7}, Buttice S.\textsuperscript{8}, Iacobaie C.\textsuperscript{2}, Pupca G.N.\textsuperscript{9}, Daminescu L.C.\textsuperscript{3}, Bardan R.T.\textsuperscript{9}, Cumpanas A.A.\textsuperscript{9}, Doizi S.\textsuperscript{2}, Traxer O.\textsuperscript{10}
<table>
<thead>
<tr>
<th>PT060</th>
<th>Impact of ureteric stent string extraction related with patient’s QoL and complications at post-operative ureteroscopy for urolithiasis; controlled trial</th>
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<tr>
<td>By: Inoue T.(^1), Ikeda J.(^1), Okada S.(^2), Hamamoto S.(^3), Kinoshita H.(^1), Matsuda T.(^1)</td>
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<tr>
<td>1Kansai Medical University, Dept. of Urology and Andrology, Osaka, Japan, 2Gyoutoku General Hospital, Dept. of Urology, Gyoutoku, Japan, 3Nagoya City University Graduate School of Medical Science, Nephro-urology, Dept. of Urology, Nagoya, Japan</td>
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<tr>
<th>PT061</th>
<th>The safety and efficacy of urgent primary ureteroscopic management without initial decompression for ureteric calculi presenting as acute kidney injury and sepsis</th>
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<tr>
<td>By: Vincent P.(^1), Konanki V.(^1), Ravichandran R.</td>
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<td>Meenakshi Mission Hospital &amp; Research Centre, Dept. of Urology, Madurai, India</td>
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<tr>
<th>PT062</th>
<th>Is preoperative pyuria associated with postoperative febrile complication after ureteroscopic stone removal for ureter or renal stones?</th>
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<td>To be confirmed</td>
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<tr>
<th>PT063</th>
<th>Evaluation of medium term events in CIRFs after RIRS</th>
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<tr>
<td>By: Sánchez González J.V.(^1), Bahillo Mateu P.(^1), Budía Alba A.(^1), Saez Moreno I.(^1), Perez-Ardavin J.(^1), Trassiera Vila M.(^1), López Acón D.(^1), Ordaz Jurado G.(^1), Boronat Torno F. University and Polytechnic Hospital La Fe, Dept. of Urology, Valencia, Spain</td>
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<tr>
<th>PT064</th>
<th>Comparison of irrigation outflows between flexible ureteroscopy, mini-PCNL and standard PCNL</th>
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<tr>
<td>By: Doizi S.(^1), Uzan A.(^1), Rodriguez-Monsalve M.(^1), Keller E.(^2), De Coninck V.M.J.(^3), Traxer O.</td>
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<tr>
<th>PT065</th>
<th>The use of Entonox in ESWL: Friend or foe? A feasibility pilot study</th>
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<tr>
<td>By: Sahu M.(^1), Srinivasan R.(^1), Adair A.(^1), Willis S.</td>
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<tr>
<td>Guy’s Hospital, Dept. of Urology, London, United Kingdom</td>
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<tr>
<th>PT066</th>
<th>The clinical role of X-ray computed tomography to predict the clinical efficiency of extracorporeal shock wave lithotripsy</th>
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</table>
By: Perekalina A.¹, Glybochko P.¹, Alyaev U.¹, Rudenko V.¹, Kuzmicheva G.², Kraev I.¹
¹I.M. Sechenov First Moscow State Medical University, Dept. of Urology, Moscow, Russia,
²Moscow State University of Fine Chemical Technologies named after M.V. Lomonosov,
Dept. of Chemistry, Moscow, Russia

PT067

Upper calyceal access vs lower calyceal access for renal pelvic stone 3-4 cm: A randomized study

By: Gamal Saad W., Mmdouh A.
Sohag University Hospital, Dept. of Urology, Sohag, Egypt

PT068

Risk factors for blood transfusion following percutaneous nephrolithotomy in the UK

By: Althaus A.¹, Withington J.², Finch W.³, Smith D.⁴, Turney B.⁵, Fowler S.⁶, Armitage J.¹, Irving S.³, Burgess N.³, Wiseman O.¹
¹Addenbrooke’s Hospital, Dept. of Urology, Cambridge, United Kingdom,
²Royal Free Hospital, Dept. of Urology, London, United Kingdom,
³Norfolk and Norwich University Hospital, Dept. of Urology, Norwich, United Kingdom,
⁴University College London Hospitals, Dept. of Urology, London, United Kingdom,
⁵Oxford University Hospitals, Dept. of Urology, Oxford, United Kingdom,
⁶Royal College of Surgeons of England, Dept. of Urology, London, United Kingdom

PT069

A novel concept for reporting outcomes of a successful treatment in endourology for stones: The SToNE-FECTA

By: Cacciamani G.E.¹, Medina L.G.¹, Thum D.J.², Lopez De Mesa B.¹, Gill I.¹, Fuchs G.¹
¹USC Institute of Urology & the Catherine and Joseph Aresty, Keck School of Medicine, University of Southern California, Dept. of Urology, Los Angeles, United States of America,
²Academic Urology Practice, Cedars-Sinai Medical Center, Dept. of Urology, Los Angeles, United States of America

PT070

The role of patient information sheets and portable video media in preventing hospital re-presentations for stent irritation: A single-blinded, randomised controlled trial in a major tertiary hospital

By: Joseph C., Foulis D., Kam J., Yuminaga Y., Beattie K., Arianayagam M., Canagasingham B., Ferguson R., Khadra M., Ko R., Varol C., Winter M.
Nepean Urology Research Group, Dept. of Urology, Kingswood, Australia

PT071

Incidence, burden and management of urolithiasis in cystic fibrosis patients

By: Kampantais S.¹, Bright-Thomas R.², Jones A.², Young J.G.³
¹Southend University Hospital, Dept. of Urology, Southend-on-Sea, United Kingdom,
²University Hospital of South Manchester, Adult Cystic Fibrosis Centre, Manchester,
Establishing a rare stone disease service: 10 years of experience running a dedicated cystinuria clinic

By: Kum F. 1, Wong K. 1, Rottenberg G. 2, Game D. 3, Bultitude M. 1, Thomas K. 1

1Guy's and St. Thomas' Hospitals, Dept. of Urology, London, United Kingdom, 2Guy's and St. Thomas' Hospitals, Dept. of Radiology, London, United Kingdom, 3Guy's and St. Thomas' Hospitals, Dept. of Nephrology, London, United Kingdom
What has changed in the non-oncology guidelines
ESU Course 24

Location: Orange Area, Room 1 (Level 0)
Chair: S. Gravas, Larissa (GR)

Aims and objectives of this session
At the end of this course, participants should be able to:
• Understand how Guidelines recommendations are formulated.
• Highlight the changes and the gaps of the different Guidelines discussed at the course.
• Be familiar with the strength of the evidence of the current Guidelines.
• Apply knowledge gained in this course to develop an evidence-based practice in the management of patients.

Male LUTs
S. Gravas, Larissa (GR)

Urinary incontinence
A. Tubaro, Rome (IT)

Male infertility
A. Jungwirth, Salzburg (AT)

Male sexual dysfunction
P. Verze, Naples (IT)

Thromboprophylaxis
K. Tikkinen, Helsinki (FI)
New perspectives in the management of upper tract tumours
ESU Course 25

Location: Orange Area, Room 2 (Level 0)
Chair: S. Shariat, Vienna (AT)

Aims and objectives of this session
This course will address contemporary concepts and controversies in UTUC such as:
• Accurate staging and its role in clinical decision making/risk stratification.
• Risks, benefits, and side effects of current and novel therapeutic approaches including endoscopic and minimal-invasive surgery.
• Optimal management of the bladder cuff as well as indication and extent of lymphadenectomy.
• Systemic therapy for high-risk and metastatic patients.

Epidemiology, diagnosis, evaluation
M. Rouprêt, Paris (FR)

Prognostic and predictive factors, pathology
S. Shariat, Vienna (AT)

Treatment of low risk cancer (high grade Ta, T1 and CIS)
M. Rouprêt, Paris (FR)

Treatment of localized high risk (invasive) and metastatic cancer
S. Shariat, Vienna (AT)
Aims and objectives of this session
With the large widespread of mini-invasive surgery, improving knowledge of practical aspects of laparoscopy is mandatory.
Knowledge of:
• Indications and contra-indications of laparoscopic approach.
• How to choose and use the instrumentation, in order to optimize the procedure and minimize adverse effects.
• Air insufflations parameters and optimal access in laparoscopic urology.
• How to prevent, recognize and manage complications.

This course aims to provide all this knowledge in an interactive and practical way (video clip, open discussion), in order to assist beginners in laparoscopy shortening their learning curve and optimizing the success of their laparoscopic procedures.
• Laparoscopic surgery: For which patients and which procedures?
• Masterize the armentarium.
• Tips and tricks to optimize the procedure.
• New potential and future evolutions.

Indications for laparoscopy
B.S.E.P. Van Cleynenbreugel, Leuven (BE)

Instrumentation and haemostatis
X. Cathelineau, Paris (FR)

Peritoneal access and effects of pneumoperitoneum
B.S.E.P. Van Cleynenbreugel, Leuven (BE)

Avoiding complications
X. Cathelineau, Paris (FR)
Basic penile scrotal surgery and first steps in endourology
ESU Course 27

Sunday 18 March
12:00 - 14:00

Location: Orange Area, Room 4 (Level 0)
Chair: L. Henningsohn, Stockholm (SE)

Aims and objectives of this session
The course is designed to introduce the application of basic surgical knowledge and principles for the 1st and 2nd year residents. The course will provide the learners with basic knowledge and skills in developing a safe and methodological approach to their initial application of surgical knowledge. The course includes case discussions and learner activity.

Intended learning outcomes.
After this course you will be able to:
• Discuss the basic principles, indications and techniques in basic urological surgery of the scrotum and penis and basic endourology.
• Reason and plan for basic urological procedures based on the anatomy and the individual previous medical history.
• Choose the most appropriate surgical technique in common basic urological conditions.
• Discuss and understand the most common surgical risks in basic urological surgery and endoscopy.

Physical examination of the genitourinary tract
L. Henningsohn, Stockholm (SE)
R. Sanchez-Salas, Paris (FR)

Penile surgery
L. Henningsohn, Stockholm (SE)

Scrotal surgery
R. Sanchez-Salas, Paris (FR)

Basic endoscopic procedures (urethral catheterization, cystoscopy, nephrostomy)
L. Henningsohn, Stockholm (SE)
R. Sanchez-Salas, Paris (FR)
**Aims and objectives of this session**
The ESU Course on testicular cancer will cover all important issues in the diagnosis and treatment of patients with germ cell cancer. There will be time for discussion during and after the presentations. Case reports will be discussed to highlight special situations of controversy. In addition, short video clips will be presented to demonstrate surgical techniques in retroperitoneal residual tumour resection.

In brief, following items will be presented and discussed:
- EAU Guideline recommended staging procedures an classifications like IGCCC.
- 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.

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| Testicular cancer - Early stages | N.W. Clarke, Manchester (GB) |
| Testicular cancer - Case discussion | N.W. Clarke, Manchester (GB) |
| Testicular cancer - Advanced stages | P. Albers, Düsseldorf (DE) |
| Testicular cancer - Case discussion | P. Albers, Düsseldorf (DE) |
Aims and objectives of this session
MIBC is a multifaceted entity where one size no longer fits all, supporting the development of personalized and, in selected cases, organ-preserving strategies. Are the advances in imaging, molecular biology, conservative surgery; medical oncology and radiotherapy strong enough to shift the current pre-eminence of the ablative approach toward a more integrated and conservative perspective? If yes, what are the ideal candidates?

• One size does not fit all and urologists are central to the development of personalized treatment in MIBC.
• Patients selection is critical and based on advances in imaging, resection techniques and pathology.
• Organ preservation is feasible in a significant proportion of patients.
• Radical cystectomy and pre-emptive chemotherapy are essential to optimize results in aggressive conditions.

Introduction
B. Malavaud, Toulouse (FR)

Cystectomy in the management of bladder invasive and locally-advanced bladder cancer
M. Burger, Regensburg (DE)

Elements for a multidimensional approach to MIBC
B. Malavaud, Toulouse (FR)

Bladder-sparing approaches to muscle invasive bladder cancer
B. Malavaud, Toulouse (FR)

Overview of systemic treatments in metastatic bladder cancer
B. Malavaud, Toulouse (FR)

Concluding remarks
<table>
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<th>ESU Course 30</th>
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| **Sunday 18 March**  
**12:00 - 14:00** |
| **Location:** Orange Area, Room 7 (Level 0) |
Aims and objectives of this session
One of the main goals of the EAU is to establish and introduce common standards for training and European urological practice in order to improve patient care. The E-BLUS exam certifies a basic level of laparoscopic urological skills. The exercises addresses bimanual dexterity, depth perception, suturing and cutting skills. Clinical application is found in such procedures as partial nephrectomy, total nephrectomy, pyeloplasty and radical prostatectomy. To aid in the training of these skills and to prepare for this E-BLUS exam the online theoretical course is mandatory http://uroweb.org/education/online-education/surgical-education/laparoscopy/theoretical-course/

The course will start with E-BLUS training to further develop your laparoscopic skills and to benefit from the knowledge and expertise of international laparoscopy experts. After the training your skill are tested in the E-BLUS exam. Make sure you are prepared for the exam because training time onsite will be limited and without previous training you will most likely not pass the exam. The exercises to be performed can be found in the instructional videos at http://uroweb.org/education/online-education/surgical-education/laparoscopy/
ESU/ESUT Hands-on Training Course in Thulium laser for vaporesection and holmium laser for laser lithotripsy
Sponsored by LISA LASER

**Location:** Yellow Area, Room 2 (Level 0)

**Chair:** P. Krombach, Luxembourg (LU)

**Tutors:**
- J-T. Klein, Ulm (DE)
- A. Miernik, Freiburg (DE)
- M. Oelke, Gronau (DE)
- M. Ritter, Mannheim (DE)

**Aims and objectives of this session**

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

Aims and objectives for Holmium laser lithotripsy:
- The fragmentation effect on artificial stones by the Holmium laser at different laser settings and the importance of the fibre position with respect to the stone,
- The handling of rigid and flexible ureterorenoscopes,
- The importance and influence of the irrigation management.
ESU/ESFFU Hands-on Training Course in Urodynamics
Sponsored by MEDKONSULT MEDICAL TECHNOLOGY, MEDICA

Sunday 18 March
13:00 - 16:00

Location: Yellow Area, Room 3 (Level 0)
Chair: H. Hashim, Bristol (GB)
Tutors: L. Thomas, Bristol (GB)
A. Garcia Mora, Mexico City (MX)
A. Gammie, Bristol (GB)
M. Drake, Bristol (GB)

Aims and objectives of this session
This course aims to provide a practical course offering an interactive “hands-on” environment for doctors, nurses and technicians to improve their skills in urodynamics, 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 ran successfully in the United Kingdom and abroad in major international conferences. 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.

The aim is to teach and emphasise good Urodynamics practice using accepted international standards.
At the end of the workshop delegates should feel more confident in their practice of urodynamics.
ESU/ERUS Hands-on Training Course in Robotic surgery - Introduction
Sponsored by 3D SYSTEMS SIMBIONIX, MIMIC, INTUITIVE SURGICAL

Sunday 18 March
13:00 - 14:30

Location: Yellow Area, Room 5 (Level 0)
Chair: N. Grivas, Ioannina (GR)
Tutor: J. Poulsen, Aalborg (DK)

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

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

Video Session 07

Sunday 18 March
14:00 - 15:30

Location: Green Area, eURO Auditorium (Level 0)

Chairs: F. Gómez Veiga, Salamanca (ES)
M.E. Alvarez Maestro, Madrid (ES)
To be confirmed

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

V48
Feasibility of a single use disposable diagnostic digital cystoscope: Initial clinical experience

By: Ostrowski A. 1, Kowalski F. 2, Banas M. 1, Goli V. 3, Denes B. 4, Drewa T. 1
1Nicolaus Copernicus University, Dept. of Oncological Urology, Bydgoszcz, Poland,
2Nicolaus Copernicus University, Dept of Oncological Urology, Bydgoszcz, Poland,
3Las Vegas Urology, Dept. of Urology, Las Vegas, United States of America,
4UroViu, Dept. of Clinical Development, Redwood City, United States of America

V49
Green Light Laser for management of haemorrhagic cystitis – technique and initial results

By: Pascoe C. 1, Christidis D. 2, Manning T. 2, Lamb B. 3, Murphy D. 1, Lawrentschuk N. 1
1Peter MacCallum Cancer Center, Dept. of Cancer Surgery, Melbourne, Australia,
2Austin Health, Dept. of Surgery, Melbourne, Australia,
3Peter MacCallum Cancer Centre, Dept. of Cancer Surgery, Melbourne, Australia

V50
Endourological management of upper tract urothelial carcinoma: An imperative case

Fundació Puigvert, Dept. of Urology, Barcelona, Spain

V51
"PiReS": How to build a bladder model for Pigtail Removal Simulation

St. Antonius Hospital Gronau, Dept. of Urology, Pediatric Urology and Urological Oncology, Prostate Center Northwest, Gronau, Germany

V52
Surgical anatomy and changes in the morphology of the external urethral sphincter after endoscopic enucleation of the prostate measured by transrectal ultrasound

By: Rijo E. 1, Gil-Vernet J.M. 2
Endoscopic treatment of vesicoureteral reflux in adult patients: Suspension technique with Vantris

By: Benelli A., Varca V., Peraldo F., Rosso M., Gregori A.
ASST-Rhodense, Dept. of Urology, Garbagnate Milanese, Italy

“En bloc” thulium laser resection of NMIBC: Technique and preliminary results

Istituto Clinico Humanitas IRCCS, Dept. of Urology, Rozzano, Italy

PDD-guided thulium fiber laser en-bloc enucleation of bladder tumor

By: Glybochko P., Alyaev Y., Rapoport L., Enikeev D., Enikeev M., Sorokin N., Sukhanov R., Dymov A., Taratkin M.
I.M. Sechenov First Moscow State Medical University, Research Institute of Urology and Reproductive Health, Moscow, Russia
0578 Which mechanism account for chronic bladder pain that develops later in life in individuals who suffer stressful events during infancy and adolescence?

By: Matos R. 1, Serrão P. 2, Cruz F. 3, Charrua A. 1
1Faculty of Medicine of University of Porto, Dept. of Biomedical Science, Porto, Portugal, 2University of Porto, Dept. of Biomedical Science, Porto, Portugal, 3University of Porto, Dept. of Urology, Porto, Portugal

0579 Anti-Nogo-A antibodies: A causal treatment for neurogenic lower urinary tract dysfunction due to spinal cord injury?

By: Schneider M.P. 1, Sartori A. 1, Ineichen B. 1, Schwab M. 2, Kessler T. 1
1University of Zürich, Balgrist University Hospital, Spinal Cord Injury Center & Research, Dept. of Neuro-Urology, Zürich, Switzerland, 2Brain Research Institute, University of Zürich, Dept. of Health Sciences and Technology, Zürich, Switzerland

0580 Prevention of neurogenic detrusor overactivity following spinal cord injury: Effects of early administration of resiniferatoxin and botulinum toxin A

By: Oliveira R. 1, Sousa Chambel S. 1, Silva R. 1, Coelho A. 1, Cruz F. 2, Duarte Cruz C. 1
1Faculty of Medicine, University of Porto, Dept. of Biomedicine, Porto, Portugal, 2Hospital São João, Dept. of Urology, Porto, Portugal

0581 ESWT protects from bladder dysfunction after traumatic spinal cord injury via a toll-like receptor 3 dependent mechanism

By: Nägele F. 1, An A. 1, Graber M. 1, Lobenwein D. 2, Kremer C. 3, Hirsch J. 1, Pözl L. 1, Grimm M. 1, Holfeld J. 1, Tepeköylü C. 1
1Innsbruck Medical University, University Hospital for Cardiac Surgery, Innsbruck, Austria, 2Innsbruck Medical University, Dept. of Clinical and Functional Anatomy, Dept. of Anatomy, Histology and Embryology, Innsbruck, Austria, 3Innsbruck Medical University, Dept. of Radiology, Innsbruck, Austria
Can antioxidant therapy be protective against diabetes-induced bladder dysfunction?

By: Tsounapi P.¹, Honda M.¹, Shimizu R.¹, Nishikawa R.¹, Teraoka S.¹, Kimura Y.¹, Yumioka T.¹, Yamaguchi N.¹, Iwamoto H.¹, Morizane S.¹, Dimitriadis F.², Hikita K.¹, Sofikitis N.³, Takenaka A.¹

¹Tottori University Faculty of Medicine, Dept. of Urology, Yonago, Japan, ²Aristotle University of Thessaloniki School of Medicine, Dept. of Urology, Thessaloniki, Greece, ³University of Ioannina, School of Medicine, Dept. of Urology, Ioannina, Greece

The finasteride can promote kidney changes? A study developed in a model of benign prostatic hyperplasia

By: Da Silva M., Estrada J., Sampaio F., De Souza D.
State University of Rio de Janeiro, Urogenital Research Unit, Rio de Janeiro, Brazil

Protective effect of platelet-rich plasma on urethral injury model of male rats in bladder

By: Tavukçu H.H.¹, Aytaç O.¹, Atuğ F.¹, Alev B.², Çevik Ö.³, Yarat A.⁴, Çetinel S.⁵, Sener G.², Kulaksızoglu H.K.¹

¹Istanbul Bilim University, Istanbul Florence Nightingale Hospital, Dept. of Urology, Istanbul, Turkey, ²Marmara University, School of Pharmacy, Dept. of Pharmacology, Istanbul, Turkey, ³Adnan Menderes University, School of Medicine, Dept. of Biochemistry, Aydin, Turkey, ⁴Marmara University, Faculty of Dentistry, Dept. of Biochemistry, Istanbul, Turkey, ⁵Marmara University, School of Medicine, Dept. of Histology & Embryology, Istanbul, Turkey

Maternal high-fat diet promoted prostatic atrophy in Wistar rats’ offspring

By: Campos-Silva P., Souza-Fernandes A., De Souza D., Gallo C., Costa W., Sampaio F., Gregorio B.M.
State University of Rio de Janeiro, Dept. of Anatomy, Rio de Janeiro, Brazil

Early fesoterodine fumarate administration prevents the onset of neurogenic detrusor overactivity after spinalization in rats: Mechanism of action

By: Przydacz M.¹, Loutochin G.¹, Biardeau X., Cammisotto P.¹, Zimoch J.², Benlimame N.³, Campeau L.¹, Corcos J.¹

¹Jewish General Hospital, Dept. of Urology, Montreal, Canada, ²University Children’s Hospital, Dept. of Surgery, Zurich, Switzerland, ³Jewish General Hospital, Dept. of Cancer, Montreal, Canada

Does electrical stimulation in the lower urinary tract induce diuresis?

By: Van Der Lely S.¹, Liechti M.¹, Popp W.², Kessler T.¹, Mehnert U.¹

¹Balgrist University Hospital, Spinal Cord Injury Center, Dept. of Neuro-Urology, Zurich, Switzerland, ²ETH Zurich, Rehabilitation Engineering Laboratory, Zurich, Switzerland
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<th>Title</th>
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<td>588</td>
<td>Effects of castration and testosterone replacement over serotonin (prostatic and plasmatic): An in vivo study</td>
<td>Oliveira Da Mota P., Lopes Cordeiro A., Martins J., Torres J., Morais N., Moura R., Miranda A., Correia-Pinto J., Lima E., Carvalho-Dias E.</td>
<td>1 Hospital de Braga, Surgical Sciences Research Domain, Life and Health Sciences Research Institute, ICVS/3B's - PT Gover, Dept. of CUF Urology and Service of Urology, Braga, Portugal, 2 University of Minho, Hospital de Braga, Surgical Sciences Research Domain, Life and Health Sciences Research Institute, ICVS/3B's - PT Gover, Dept. of CUF Urology and Service of Urology, Braga, Portugal</td>
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<td>589</td>
<td>Carbon and zeolite impregnated polyester fabric inhibits urine odour: A randomized experimental study</td>
<td>Taverna G., Grizzi F., Thiel L., Stork B., Justich M., Melegari S., Seveso M., Bozzi G., De Francesco O., Miller D., Tidu L., Hurle R., Lughezzani G., Casale P., Pasini L., Benassi A., Mandressi A., Guazzoni G.F.</td>
<td>1 Humanitas Mater Domini, Dept. of Urology, Castellanza, Italy, 2 Humanitas Clinical and Research Center, Dept. of Immunology and Inflammation, Rozzano, Italy, 3 College of Health Professions, University of Detroit Mercy, McAuley School of Nursing, Detroit, United States of America, 4 University of Michigan, School of Medicine, Dept. of Urology, Ann Arbor, United States of America, 5 Mercy Health VNS, Nurses Services and Hospice Services, Muskegon, United States of America, 6 Italian Ministry of Defences, Military Veterinary Center, Grosseto, Italy, 7 Humanitas Clinical and Research Center, Dept. of Urology, Rozzano, Italy</td>
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<td>590</td>
<td>Rno-miR-199a-3p antagonism prevents glomerulosclerosis in the Fischer-344 to Lewis rat model of antibody-mediated rejection</td>
<td>Zeuschner P., Grau V., Padberg W., Becker J.U., Dieplinger G.</td>
<td>1 Saarland University Medical Center, Dept. of Urology and Pediatric Urology, Homburg, Germany, 2 Justus-Liebig-University Giessen, Laboratory of Experimental Surgery, Dept. of General and Thoracic Surgery, Giessen, Germany, 3 Justus-Liebig-University Giessen, Dept. of General and Thoracic Surgery, Giessen, Germany, 4 University Hospital of Cologne, Dept. of Pathology, Cologne, Germany, 5 Transplant Center Cologne, Dept. of General, Visceral and Cancer Surgery, Cologne, Germany</td>
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<td>591</td>
<td>Comparison between nanotechnology structured water (magnalife) and tadalafil for the treatment of erectile dysfunction</td>
<td>Sami A.K., Alshimmrre R., Moudhaffer Alkhalidi I., Jasim Alzaidy O.</td>
<td>1 University of Sulaimani, Dept. of Urology, Sulaimani, Iraq, 2 Ghazi Alhariri Hospital, Dept. of Urology, Baghdad, Iraq, 3 University of Baghdad, Dept. of Urology, Baghdad, Iraq, 4 Baaquba teaching hospital, Dept. of Urology, Baaquba, Iraq</td>
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<td>592</td>
<td>In vivo neo bladder regeneration by the presence of human adipose tissue derived mesenchymal stem cells</td>
<td>Morera Esteve M.J., Mellado-Lopez M., Forteza J., Moreno-Manzano V.</td>
<td>1 University of Sulaimani, Dept. of Urology, Sulaimani, Iraq, 2 Ghazi Alhariri Hospital, Dept. of Urology, Baghdad, Iraq, 3 University of Baghdad, Dept. of Urology, Baghdad, Iraq, 4 Baaquba teaching hospital, Dept. of Urology, Baaquba, Iraq</td>
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Vera Donoso C.D. 4
1Centro de Investigación Príncipe Felipe, Neuronal and Tissue Regeneration Laboratory, Valencia, Spain, 2Centro de Investigación Príncipe Felipe (CIPF), Neuronal and Tissue Regeneration Laboratory, Valencia, Spain, 3Joint Unit of Molecular Pathology CIPF-UCV, Valencia, Spain, 4Hospital la Fe, Dept. of Urology, Valencia, Spain

Summary

P. Radziszewski, Warsaw (PL)
Urothelial tumours: Genetic and epidemiology

Poster Session 44

Sunday 18 March
14:00 - 15:30

Location: Green Area, Room 2 (Level 0)

Chairs: A. Lopez-Beltran, Lisbon (PT)
R. Montironi, Ancona (IT)

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.

State-of-the-art lecture Developments in genetic epidemiology of urothelial cancer
A. Lopez-Beltran, Lisbon (PT)

* 593 The impact of smoking on genomic alterations in muscle-invasive bladder cancer

By: Seiler R. ¹, Rink M. ², Aziz A. ³, Hendricksen K. ⁴, Wyatt A. ⁵, Black P. ⁵, Von Rundstedt F. ⁶, Gibb E. ⁷, Shariat S.F. ⁸, Poyet C. ⁹, Roghmann F. ¹⁰, Xylinas E. ¹¹
¹University of Bern, Dept. of Urology, Bern, Switzerland, ²University Medical Center Hamburg-Eppendorf, Dept. of Urology, Hamburg, Germany, ³University of Rostock, Dept. of Urology, Rostock, Germany, ⁴The Netherlands Cancer Institute, Dept. of Urology, Amsterdam, Netherlands, ⁵University of British Columbia, Dept. of Urology, Vancouver, Canada, ⁶University of Jena, Dept. of Urology, Jena, Germany, ⁷GenomeDx Biosciences, Dept. of Research and Development, Vancouver, Canada, ⁸University of Vienna, Dept. of Urology, Vienna, Austria, ⁹University of Zurich, Dept. of Urology, Zurich, Switzerland, ¹⁰University of Bochum, Dept. of Urology, Bochum, Germany, ¹¹University of Paris Descartes, Dept. of Urology, Paris, France

594 UHRF1BP1: A tumor suppressor gene associated with bladder cancer risk in Han Chinese

By: Wu J. ¹, Zhu Y. ¹, Ye D. ¹, Wang M. ², Xu J. ³, Gu C. ¹, Gu W. ¹, Wang H. ¹, Zhang J. ¹
¹Fudan University Shanghai Cancer Center, Dept. of Urology, Shanghai, China, ²Nanjing Medical University, Public Health, Nanjing, China, ³Duke University, Dept. of Urology, Durham, United States of America

* 595 Functional genomics reveal mechanisms of resistance and strategies for combination therapy to CDK4/6 inhibition in bladder cancer

By: Sathe A. , Tong Z. , Qi P. , Gschwend J.E. , Nawroth R.
Klinikum rechts der Isar, Technical University of Munich, Dept. of Urology, Munich, Germany
Is there finally an increasing survival of patients with urinary bladder cancer? A nationwide study in Sweden 1997–2016

By: Malmström P-U.1, Liedberg F.2, Sherif A.3, Ströck V.4, Hosseini-Aliabad A.5, Johansson S.6, Aljabery F.7, Gårdmark T.8

1Uppsala University Hospital, Dept. of Urology, Uppsala, Sweden, 2Skåne University Hospital, Dept. of Urology, Malmö, Sweden, 3Umeå University, Dept. of Urology, Umeå, Sweden, 4Sahlgrenska University Hospital, Dept. of Urology, Gothenburg, Sweden, 5Karolinska University Hospital, Dept. of Urology, Stockholm, Sweden, 6Linköping University Hospital, Dept. of Urology, Linköping, Sweden, Linköping University Hospital, Dept. of Urology, Linköping, Sweden, 7Linköping University Hospital, Dept. of Urology, Linköping, Sweden, 8Danderyd hospital, Dept of Urology, Danderyd, Sweden

Genomic characterization of putative CTCs isolated from CellSearch® discarded fractions by Parsortix system and Cellcelector micromanipulator

By: Nini A.1, Lampignano R.2, Behrens B.3, Yang L.2, Steinau L.2, Fehm T.2, Niegeois G.1, Lorch A.1, Hoffmann M.1, Große Siemer R.1, Albers P.1, Schulz W.1, Stoecklein N.3, Neubauer H.2

1University Hospital of Dusseldorf, Dept. of Urology, Düsseldorf, Germany, 2University Hospital of Dusseldorf, Dept of Obstetrics and Gynecology, Düsseldorf, Germany, 3University Hospital of Dusseldorf, Dept of General Surgery, Düsseldorf, Germany

Chloroquine enhances acridine orange induced photodamages in human bladder cancer cells under blue light exposure

By: Lin Y-C.1, Lin J.F.2, Tsai T.F.1, Chen H.E.1, Chou K.Y.1, Hwang T.I.1

1Shin Kong WHS Memorial Hospital, Dept. of Urology, Taipei, Taiwan, 2Shin Kong WHS Memorial Hospital, Central Laboratory, Taipei, Taiwan

Asthma status is associated with decreased risk of aggressive urothelial bladder cancer


1Hospital Universitari Parc Tauli, Dept. of Urology, Sabadell, Spain, 2Spanish National Cancer Research Centre (CNIO), Genetic and Molecular Epidemiology Group, Madrid, Spain, 3National Cancer Institute, Division of Cancer Epidemiology and Genetics, Bethesda, United States of America, 4Hospital del Mar Medical Research Institute (IMIM), Dept. of Epidemiology, Barcelona, Spain, 5Hospital Universitario Canarios, Dept. of Epidemiology, La Laguna, Spain, 6Hospital Germans Trias i Pujol, Dept. of Urology, Badalona, Spain, 7Hospital del Mar, Dept. of Urology, Barcelona, Spain, 8Hospital del Mar, Dept. of Pathology, Barcelona, Spain, 9Hospital de Elche, Dept. of Oncology, Elche, Spain, 10Hospital Central de Asturias, Dept. of Urology, Oviedo, Spain, 11Hospital Universitario de Canarias, Dept of Urology, Santa Cruz de Tenerife, Spain, 12Hospital de
600 Prostate specific membrane antigen (PSMA) expression in transitional cell carcinoma (TCC) – who puts the S in PSMA?

By: Schreiber H.¹, Nimphius W.², Verburg F.³, Luster M.³, Hofmann R.¹, Hegele A.¹

¹University Hospital Marburg, Dept. of Urology and Pediatric Urology, Marburg, Germany,
²University Hospital Marburg, Institute of Pathology, Marburg, Germany,
³University Hospital Marburg, Dept. of Nuclear Medicine, Marburg, Germany

601 Influence of diabetes on the risk of urothelial cancer according to body mass index: A 10-year nationwide population-based observational study

By: Moon H.W.¹, Yang J.¹, Kang S.¹, Lee K.W.¹, Jeong H.C.¹, Choi J.B.², Choi S.W.¹, Park Y.H.¹, Bae W.J.¹, Cho H.J.¹, Hong S.¹, Lee J.Y.¹, Kim S.W.¹, Ha U-S.¹

¹Seoul St. Mary’s Hospital, Dept. of Urology, Seoul, Korea, South, ²College of Medicine, The Catholic University of Korea, Dept. of Urology, Bucheon, Korea, South

602 Withdrawn
To be confirmed

603 Pathological significance of thrombospondin-3 to -5 in patients with bladder cancer

By: Araki K., Miyata Y., Nakamura Y., Yasuda T., Sagara Y., Matsuo T., Ohba K., Sakai H.
Nagasaki University Graduate School of Biochemical Sciences, Dept. of Urology, Nagasaki City, Japan

Summary
R. Montironi, Corinaldo (IT)
Novel treatment indications for metastatic prostate cancer

Poster Session 45

Sunday 18 March
14:00 - 15:30

Location: Red Area, Room 1 (Level 0)

Chairs: J.H. Hong, Seoul (KR)
A. Omlin, St. Gallen (CH)
L. Türkeri, Istanbul (TR)

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.

* 604

Prostate-specific antigen (PSA) response in men with nonmetastatic castration-resistant prostate cancer (M0 CRPC) treated with enzalutamide (ENZA): Results from PROSPER

By: Sternberg C. N. ¹, Fizazi K. ², Saad F. ³, Rathenborg P. ⁴, Shore N. ⁵, Demirhan E. ⁶, Modelska K. ⁷, Phung D. ⁸, Krivoshik A. ⁹, Hussain M. ¹⁰

¹San Camillo and Forlanini Hospitals, Dept. of Medical Oncology, Rome, Italy, ²Institut Gustave Roussy, University of Paris Sud, Dept. of Medical Oncology, Villejuif, France, ³Centre hospitalier de l’Université de Montréal, University of Montreal, Dept. of Surgery, Montreal, Canada, ⁴Herlev Hospital, Dept. of Urology, Herlev, Denmark, ⁵Carolina Urologic Research Center, Dept. of Urology, Myrtle Beach, United States of America, ⁶Pfizer, Inc., Dept. of Biostatistics, San Francisco, United States of America, ⁷Pfizer, Inc., Dept. of Clinical Development, San Francisco, United States of America, ⁸Astellas Pharma Inc, Dept. of Biostatistics, Northbrook, United States of America, ⁹Astellas Pharma Inc, Dept. of Medical Science and Dept. of Oncology, Northbrook, United States of America, ¹⁰Northwestern University, Dept. of Hematology Oncology, Chicago, United States of America

* 605

Patient-reported outcome measures in men with non-metastatic castration-resistant prostate cancer: Baseline data from the PROSPER trial

By: Tombal B. ¹, Hussain M. ², Penson D. ³, Attard G. ⁴, Sternberg C.N. ⁵, Phung D. ⁶, Naidoo S. ⁷, Modelska K. ⁸, Demirhan E. ⁹, Ramaswamy K. ¹⁰, Ivanescu C. ¹¹, Saad F. ¹²

¹Cliniques Universitaires Saint-Luc, Division of Urology, Brussels, Belgium, ²Northwestern University Robert H. Lurie Comprehensive Cancer Center, Division of Hematology/Oncology, Chicago, United States of America, ³Vanderbilt University Medical Center, Dept. of Urologic Surgery, Nashville, United States of America, ⁴The Institute of Cancer Research and the Royal Marsden, Treatment Resistance, Surrey, United Kingdom, ⁵San Camillo-Forlanini Hospital, Medical Oncology, Rome, Italy, ⁶Astellas Pharma Inc, Biostatistics, Leiden, Netherlands, The, ⁷Astellas Pharma Inc, Dept. of Oncology, Chertsey, United Kingdom, ⁸Pfizer Inc, Dept. of Oncology, San Francisco, United States
606  
**Radium-223 re-treatment in patients with castration-resistant prostate cancer and bone metastases: 2-year follow-up from an international, open-label, phase 1/2 study**

By: Heinrich D.¹, Nordquist L.², Mariados N.³, Méndez Vidal M.J.⁴, Keizman D.⁵, Thellenberg Karlsson C.⁶, Peer A.⁷, Procopio G.⁸, Frank S.⁹, Pulkkanen K.¹⁰, Rosenbaum E.¹¹, Severi S.¹², Trigo Perez J.M.¹³, Trandafir L.¹⁴, Wagner V.¹⁵, Li R.¹⁶, Sartor O.¹⁷

¹Akershus University Hospital, Dept. of Oncology, Lørenskog, Norway, ²GU Research Network, LLC, Dept. of Medical Oncology, Omaha, NE, United States of America, ³Associated Medical Professionals of New York, PLLC, Dept. of Radiation Oncology, Syracuse, NY, United States of America, ⁴Maimonides Institute of Biomedical Research (IMIBIC), Reina Sofia Hospital, University of Cordoba, Dept. of Oncology, Cordoba, Spain, ⁵Meir Medical Center, Genitourinary Oncology Service, Kfar Saba, Israel, ⁶Cancer Center Norlands University, Dept. of Radiation Sciences, Umeå, Sweden, ⁷Rambam Health Care Campus, Dept. of Oncology, Haifa, Israel, ⁸Fondazione Istituto Nazionale Tumori Oncologia Medica Genitourinaria, Dept. of Medical Oncology, Milan, Italy, ⁹Hadassah Hebrew University Medical Center, Dept. of Oncology, Jerusalem, Israel, ¹⁰Kuopio University Hospital, Dept. of Oncology, Kuopio, Finland, ¹¹Rabin Medical Center—Davidoff Center, Dept. of Urology and Oncology, Petah Tikva, Israel, ¹²Romagnolo Scientific Institute for the Study and Care of Cancer—IRST IRCCS, Nuclear Medicine Therapeutic Unit, Meldola, Italy, ¹³Hospital Universitario Virgen de la Victoria, Dept. of Medical Oncology, Málaga, Spain, ¹⁴Bayer Pharma AG, Pharmaceuticals, Dept. of Oncology Radium & OncoMed, Basel, Switzerland, ¹⁵Bayer Pharma AG, Dept. of Global Clinical Development, Basel, Switzerland, ¹⁶Bayer HealthCare Pharmaceuticals, Dept. of Global Research & Development Statistics, Whippany, NJ, United States of America, ¹⁷Tulane Cancer Center, Dept. of Medicine and Urology, New Orleans, LA, United States of America

607  
**Radioligand therapy with Lutetium 177-labeled PSMA-I&T for metastatic castration-resistant prostate cancer: Clinical experience with 100 consecutive patients**

By: Heck M.¹, Schwaiger S.¹, Knorr K.², Retz M.¹, Maurer T.¹, Janssen F.¹, D’Alessandria C.², Wester H-J.³, Gschwend J.¹, Schwaiger M.², Tauber R.¹, Eiber M.²

¹Rechts der Isar University Hospital, Technical University of Munich, Dept. of Urology, Munich, Germany, ²Rechts der Isar University Hospital, Technical University of Munich, Dept. of Nuclear Medicine, Munich, Germany, ³Technical University of Munich, Dept. of Pharmaceutical Radiochemistry, Gauting, Germany

608  
**Clinical experience with PSMA-Actinium-225 radioligand therapy in end-stage metastatic castration-resistant prostate cancer patients**

By: Van Der Doelen M.¹, Mehra N.², Van Oort I.¹, Janssen M.³, Haberkorn U.⁴
609

AR-V7 in peripheral whole blood of castration-resistant prostate cancer patients: Association with treatment-specific outcome under abiraterone and enzalutamide

By: Seitz A-K. 1, Thoene S. 2, Bietenbeck A. 2, Nawroth R. 1, Tauber R. 1, Thalgott M. 1, Schmid S. 1, Secci R. 2, Retz M. 1, Gschwend J. 1, Ruland J. 2, Winter C. 2, Heck M. 1
1Rechts der Isar University Hospital, Technical University of Munich, Dept. of Urology, Munich, Germany, 2Rechts der Isar University Hospital, Technical University of Munich, Institute of Clinical Chemistry and Pathobiochemistry, Munich, Germany

610

Outcomes of crossover between androgen receptor targeting drugs in the castration resistant prostate cancer registry (CAPRI)

By: Kuppen M. 1, Westgeest H. 2, Van Den Eertwegh F. 3, Van Moorselaar J. 4, De Wit R. 5, Van Oort I. 6, Aben K. 7, Verhoeven R. 7, Van Den Bergh F. 8, Coenen J. 9, Uyl-De Groot C. 1, Gerritsen W. 10
1Erasmus University, Institute for Medical Technology Assessment, Rotterdam, Netherlands, The, 2Amphia Hospital, Dept. of Internal Medicine, Breda, Netherlands, The, 3VU University Medical Center, Dept. of Medical Oncology, Amsterdam, Netherlands, The, 4VU University Medical Center, Dept. of Urology, Amsterdam, Netherlands, The, 5Eramus MC Cancer Institute, Dept. of Medical Oncology, Rotterdam, Netherlands, The, 6Radboud University Medical Center, Dept. of Urology, Nijmegen, Netherlands, The, 7Netherlands Comprehensive Cancer Organisation, Utrecht, Netherlands, The, 8University Medical Center Groningen, Dept. of Radiation Oncology, Groningen, Netherlands, The, 9Isala Klinieken, Dept. of Medical Oncology, Zwolle, Netherlands, The, 10Radboud University Medical Center, Dept. of Medical Oncology, Nijmegen, Netherlands, The

611

Sipuleucel-T immunotherapy for castrate-resistant prostate cancer modulates soluble B7-H3: A novel mechanism of action

By: Chang A. 1, Nair S. 2, George D. 3, Inman B. 1
1Duke University, Dept. of Urology, Durham, United States of America, 2Duke University, Dept. of Surgery, Durham, United States of America, 3Duke University, Dept. of Medical Oncology, Durham, United States of America

612

Definitive therapy for men with newly-diagnosed oligometastatic prostate cancer: Initial surgical outcomes from a phase II study

By: Gupta M. 1, Srivastava A. 1, Reyes D. 1, Trock B. 1, Tran P. 2, Allaf M. 1, Bivalacqua T. 1, Carter H. 1, Ross A. 1, Partin A. 1, Pienta K. 1, Pavlovich C. 1
1 James Buchanan Brady Urological Institute, Johns Hopkins Medical Institutions, Dept. of Urology, Baltimore, United States of America, 2 Johns Hopkins Medical Institutions, Dept. of Radiation Oncology and Molecular Radiation Sciences and Oncology, Baltimore, United States of America

613 Influence of high and low disease volume on docetaxel response in M1 Ca prostate in the STAMPEDE trial

1 Christie NHS Foundation trust, Dept. of Uro-Oncology, Manchester, United Kingdom, 2 Cancer research Manchester institute, Belfast- Movember Centre of Excellence, Manchester, United Kingdom, 3 University Hospital Birmingham, Dept. of Uro-Radiology, Birmingham, United Kingdom, 4 University College London, Medical Research Unit, Clinical Trial team, London, United Kingdom, 5 University Hospital Birmingham, Dept. of Oncology, Birmingham, United Kingdom, 6 Christie NHS Foundation trust, Dept. of Uro-oncology, Manchester, United Kingdom

614 Systemic Immune-Inflammation Index predicts the combined clinical outcome after sequential therapy with abiraterone and docetaxel for metastatic castration-resistant prostate cancer patients

1 Renji Hospital, School of Medicine, Shanghai Jiao Tong University, Dept. of Urology, Shanghai, China, 2 Shanghai Jiaotong University Affiliated No. 6 Hospital, Shanghai Institute of Ultrasound in Medicine, Dept. of Ultrasonography, Shanghai, China

615 Prognostic factors for oncologic outcomes in metastatic chemotherapy-naïve castration-resistant prostate cancer with enzalutamide

1 Asan Medical Center, Dept. of Urology, Seoul, Korea, South, 2 Ulsan University Hospital, Dept. of Urology, Ulsan, Korea, South

616 Optimal sequencing strategy using docetaxel and androgen receptor axis-targeted agents in patients with castration-resistant prostate cancer: Utilization of neutrophil-to-lymphocyte ratio

1 Gangnam Severance Hospital, Dept. of Urology, Seoul, Korea, South, 2 Shinchon Severance Hospital, Dept. of Urology, Seoul, Korea, South

Summary
A. Omlin, St. Gallen (CH)
Prostate cancer diagnosis: Get the target!

Poster Session 46

Sunday 18 March
14:00 - 15:30

Location: Red Area, Room 2 (Level 0)

Chairs: C.F. Kweldam, Rotterdam (NL)
R. Rabenalt, Düsseldorf (DE)
K. Touijer, New York (US)

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

617

Automated diagnosis of prostate cancer location by artificial intelligence in multiparametric MRI

By: Oishi Y. 1, Kitta T. 1, Shinohara N. 1, Nosato H. 2, Sakanashi H. 2, Murakawa M. 2
1Graduate School of Medicine, Hokkaido University, Dept. of Renal and Genitourinary Surgery, Sapporo Hokkaido, Japan,
2National Institute of Advanced Industrial Science and Technology, AI Research Center, Tsukuba Ibaraki, Japan

618

Defining the target prior to prostate fusion biopsy: The effect of MRI reporting on cancer detection

By: Westhoff N. 1, Siegel F. 1, Peter C. 1, Von Hardenberg J. 1, Michel M.S. 1, Budjan J. 2, Ritter M. 1
1University Medical Center Mannheim, Dept. of Urology, Mannheim, Germany,
2University Medical Center Mannheim, Institute of Clinical Radiology and Nuclear Medicine, Mannheim, Germany

619

Simple biparametric MRI in detection and ruling out significant prostate cancer in biopsy-naïve men (BIDOC study)

By: Boesen L.P. 1, Nørgaard N. 1, Løgager V. 2, Balslev I. 3, Thstrup K-C. 2, Winther M 2, Bisbjerg R. 1, Jakobsen H. 1, Thomsen H. 2
1Herlev Gentofte University Hospital, Dept. of Urology, Herlev, Denmark,
2Herlev Gentofte University Hospital, Dept. of Radiology, Herlev, Denmark,
3Herlev Gentofte University Hospital, Dept. of Pathology, Herlev, Denmark

620

Biparametric MRI: Could it reduce the cost of MRI while maintaining diagnostic accuracy for prostate cancer?

By: Grummet J. 1, Pepdjonovic L. 1, Huang S. 1, Dat A. 1, Miller R. 1, Begashaw K. 1, Kalapara A. 1, Mann S. 1, Ryan A. 2, O’Sullivan R. 3, Moon D. 1, Landau A. 1, Snow R. 1, Hanegbi U. 1, Frydenberg M. 1
1Australian Urology Associates, Dept. of Urology, Melbourne, Australia,
2Tissupath, Dept.
### 621

**Inter-reader agreement of Prostate Imaging Reporting and Data System version 2 in detecting prostate cancer on 3 Tesla multiparametric MRI: A prospective study on patients referred to radical prostatectomy**

By: Giannarini G.¹, Girometti R.², Sioletic S.³, Rossanese M.⁴, Palumbo V.⁵, Calandriello M.¹, Crestani A.¹, Zuiani C.², Ficarra V.⁵

¹Academic Medical Centre “Santa Maria della Misericordia”, Dept. of Urology, Udine, Italy, ²University of Udine, Dept. of Medicine, Institute of Radiology, Udine, Italy, ³Academic Medical Centre “Santa Maria della Misericordia”, Dept. of Pathology, Udine, Italy, ⁴University of Catania, Dept. of Urology, Catania, Italy, ⁵University of Messina, Dept. of Human and Pediatric Pathology “Gaetano Barresi”, Urologic Section, Messina, Italy

### 622

**Multiparametric magnetic resonance of the prostate second opinion may reduce the number of unnecessary biopsies: A single center experience**

By: Luzzago S.¹, Catellani M.¹, Mistretta F.A.¹, Conti A.¹, Serino A.¹, Bianco R.¹, Russo A.¹, Di Trapani E.¹, Ferro M.¹, Alessi S.², Petralia G.², Musi G.¹, Matei D.V.¹, De Cobelli O.¹

¹IEO European Institute of Oncology, Dept. of Urology, Milan, Italy, ²IEO European Institute of Oncology, Dept. of Radiology, Milan, Italy

### 623

**Assessing the impact of radiologist expertise on the misdiagnosis of clinically significant prostate cancer among men receiving multi-parametric MRI**

By: Dell’Oglio P.¹, Stabile A.¹, Bravi C.A.¹, Mazzone E.¹, Fossati N.¹, Gandaglia G.¹, Esposito A.², Brembilla G.², Brunetti L.², Grande P.³, Shariat S.⁴, De La Taille A.⁵, Karakiewicz P.⁶, De Cobelli F.², Montorsi F.¹, Briganti A.¹

¹Vita-Salute University San Raffaele, Dept. of Urology, Milan, Italy, ²Vita-Salute University San Raffaele, Dept. of Radiology, Milan, Italy, ³Groupe Hospitalier Pitie-Salpetriere, Assistance Publique Hopitaux de Paris, Faculty of Medicine Pierre et Marie Curie, University Paris Sorbonne, Dept. of Urology, Paris, France, ⁴Medical University of Vienna, Dept. of Urology, Vienna, Austria, ⁵CHU Mondor, Assistance Publique des Hopitaux de Paris - University Paris-Est France, Dept. of Urology, Creteil, France, ⁶University of Montreal Health Center, Cancer Prognostics and Health Outcomes Unit, Montreal, Canada

### 624

**The FUTURE trial: A RCT on MRI targeted prostate biopsy. Comparison of targeted and systematic biopsy outcomes**

By: Exterkate L.¹, Wegelin O.², Van Melick H.², Barentsz J.³, Van Der Leest M.³, Kummer A.⁴, Vreuls W.⁵, De Bruin P.⁴, Bosch R.⁶, Somford D.¹

¹Canisius Wilhelmina Hospital, Dept. of Urology, Nijmegen, Netherlands, The, ²St. Antonius Hospital, Dept. of Urology, Nieuwegein/Utrecht, Netherlands, The, ³Radboud University Medical Centre, Dept. of Radiology, Nijmegen, Netherlands, The, ⁴St. Antonius Hospital, Dept. of Pathology, Nieuwegein/Utrecht, Netherlands, The, ⁵Canisius Wilhelmina
625 The urologist’s learning curve for MRI/TRUS fusion guided prostate biopsy

By: De Castro Abreu A.L. 1, Oishi M. 1, Lin-Brande M. 1, Cacciamani G.E. 1, Ashrafi A.N. 1, Shin T. 1, Freitas D. 1, Fay C. 1, Ohe C. 1, Winter M. 1, Margaryan T. 1, Aron M. 2, Chen F. 3, Ukimura O. 1, Palmer S. 3, Gill I.S. 1

1USC/Norris Cancer Center, Dept. of Urology, Los Angeles, United States of America, 2Keck Medical Center of USC, Dept. of Pathology, Los Angeles, United States of America, 3Keck Medical Center of USC, Dept. of Radiology, Los Angeles, United States of America

626 Number and spatial distribution of cores in multiparametric-magnetic resonance/ultrasound fusion prostate biopsy: Is there a role in the index tumor detection and characterization?

By: Porpiglia F. 1, De Luca S. 1, Manfredi M. 1, Mele F. 1, Bertolo R. 1, Garrou D. 1, Ampareore D. 1, Checcucci E. 1, Giordano A. 1, Ragni F. 1, Bombaci S. 1, Gned D. 2, De Pascale A. 2, Fiori C. 1

1San Luigi Gonzaga Hospital, Dept. of Urology, Orbassano, Italy, 2San Luigi Gonzaga Hospital, Dept. of Radiology, Orbassano, Italy

627 Initial results comparing 29 MHz micro-ultrasound with multi-parametric MRI for targeted prostate biopsy: Relative sensitivity to clinically significant prostate cancer


Clinica IMQ Zorrotzaurre, Dept. of Urology, Bilbao, Spain

628 Prostate cancer diagnosis by three-dimensional contrast-ultrasound dispersion imaging

By: Schalk S. 1, Huang J. 2, Li J. 2, Wijkstra H. 3, Huang P. 2, Mischi M. 1

1Eindhoven University of Technology, Dept. of Electrical Engineering, Eindhoven, Netherlands, The, 2Second Affiliated Hospital of Zhejiang University, Dept. of Ultrasound, Hangzhou, China, 3Academic Medical Center University of Amsterdam, Dept. of Urology, Amsterdam, Netherlands, The

629 Which patients should consider and which patients could safely avoid prostate biopsy in the setting of negative mpMRI?

By: Oishi M. 1, Ashrafi A.N. 1, Cacciamani G.E. 1, Shin T. 1, Ohe C. 1, Ghodoussipour S. 1, Lin-Brande M. 1, Winter M. 1, Medina L. 1, Margaryan T. 1, Palmer S. 2, Aron M. 3, Ukimura O. 4, Gill I. 1, De Castro Abreu A.L. 1

1University of Southern California, USC Institute of Urology, Los Angels, United States of America, 2University of Southern California, Dept. of Radiology, Los Angels, United States of America, 3University of Southern California, Dept. of Pathology, Los Angels, United
States of America, ^4Kyoto Prefectural University of Medicine, Dept. of Urology, Kyoto, Japan

630 Prediction of unilateral prostate cancer by the combination of transrectal ultrasonography-guided prostate biopsy and multi-parametric magnetic resonance imaging: A real-life experience
To be confirmed

631 Utility of early transperineal template-guided prostate biopsy for risk stratification in men undergoing active surveillance for prostate cancer

By: Voss J. ^1, Pal R. ^1, Hannah M. ^1, Ahmed S. ^1, Jaulim A. ^2, Walton T. ^1
^1Nottingham University Hospitals NHS Trust, Dept. of Urology, Nottingham, United Kingdom, ^2Cambridge University Hospitals NHS Foundation Trust, Dept. of Urology, Cambridge, United Kingdom
Non-interventional handling of stones: Imaging and conservative management
Poster Session 47

Sunday 18 March 14:00 - 15:30

Location: Red Area, Room 3 (Level 0)

Chairs: E. Montanari, Milan (IT)
To be confirmed
G. Zeng, Guangzhou (CN)

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

632 Global mortality of kidney stone disease following surgical and conservative management in the last two decades

By: Whitehurst L. ¹, Jones P. ², Somani B. ²
¹Queen Alexandra Hospital, Dept. of Urology, Portsmouth, United Kingdom,
²Southampton General Hospital, Dept. of Urology, Southampton, United Kingdom

634 Predictor for uric acid stones: Mean stone density, stone heterogeneity index, and variation coefficient of stone density on single-energy NCCT, and urine pH

By: Kang D.H. ¹, Kim J.W. ², Kim J.C. ², Lee S.H. ², Cho K.S. ², Ham W.S. ², Jeon S.H. ³, Choi Y.D. ², Lee J.Y. ²
¹Inha University School of Medicine, Dept. of Urology, Incheon, Korea, South,
²Yonsei University College of Medicine, Urological Science Institute, Dept. of Urology, Seoul, Korea, South,
³Kyung Hee University School of Medicine, Dept. of Urology, Seoul, Korea, South

635 Size matters - precise stone measuring determines surgical planning

By: Rassweiler-Seyfried M-C. ¹, Otto C. ¹, Haneder S. ², Riffel P. ³, Ritter M. ¹
¹Universityhospital Mannheim, Dept. of Urology, Mannheim, Germany,
²University Hospital of Cologne, Institute of Diagnostic and Interventional Radiology, Cologne, Germany,
³Universityhospital Mannheim, Institute of Clinical Radiology and Nuclear Medicine, Mannheim, Germany

636 Low-dose unenhanced computed tomography with iterative reconstruction is available for the diagnosis of urinary stones

By: Chang I.H. ¹, Kim J.W. ¹, Myung S.C. ¹, Kim T.H. ¹, Moon Y.T. ¹, Kim K.D. ¹, Ahn S.H. ², Kim J.H. ², Lee S.Y. ³, Kim M.S. ⁴, Chi B.H. ¹
¹ChungAng University Hospital, Dept. of Urology, Seoul, Korea, South,
²KEPCO Medical
Medically expulsive therapy (MET) has no benefit in improving spontaneous stone passage (SSP) in patients presenting with acute ureteric colic: Results from the MIMIC study


1British Urology Researchers in Surgical Training (BURST), Urology Research Collaborative, , London, United Kingdom, 2British Urology Researchers in Surgical Training (BURST), Urology Research Collaborative, London, United Kingdom, 3University College London Hospital, Dept. of Statistical Science, London, United Kingdom, 4Australian Young Urology Researchers Organisation (YURO), Urology Research Collaborative, , Australia, 5Information Services Division, University College London
(UCL), Urology Research Collaborative, London, United Kingdom, 6Addenbrooke’s Hospital, BURST Collaborative MIMIC Study Group, Cambridge, United Kingdom, 7Austin Hospital, BURST Collaborative MIMIC Study Group, Heidelberg, Victoria, Australia, 8Barts Health, Whips Cross and the Royal London, BURST Collaborative MIMIC Study Group, London, United Kingdom, 9Royal United Hospitals Bath, BURST Collaborative MIMIC Study Group, Bath, United Kingdom, 10Bendigo Health, BURST Collaborative MIMIC Study Group, Bendigo, Australia, 11Bendigo Health, BURST Collaborative MIMIC Study Group, Bendigo, Australia, 12Box Hill Hospital, BURST Collaborative MIMIC Study Group, Melbourne, Australia, 13Broomfield Hospital, BURST Collaborative MIMIC Study Group, Chelmsford, United Kingdom, 14Craigavon Area Hospital, BURST Collaborative MIMIC Study Group, Northern Ireland, United Kingdom, 15Charing Cross Hospital, BURST Collaborative MIMIC Study Group, London, United Kingdom, 16Chester Hospital, BURST Collaborative MIMIC Study Group, Mersey, United Kingdom, 17Cheltenham General Hospital, BURST Collaborative MIMIC Study Group, Cheltenham, United Kingdom, 18Cumberland Infirmary Carlisle, BURST Collaborative MIMIC Study Group, Carlisle, United Kingdom, 19Darent Valley Hospital, BURST Collaborative MIMIC Study Group, Dartford, United Kingdom, 20Dorset County Hospital, BURST Collaborative MIMIC Study Group, Dorchester, United Kingdom, 21Maroondah Hospital, BURST Collaborative MIMIC Study Group, Melbourne, Australia, 22BURST Collaborative MIMIC Study Group, Edinburgh, United Kingdom, 23Freeman Hospital, BURST Collaborative MIMIC Study Group, Newcastle, United Kingdom, 24Fiona Stanley Hospital, BURST Collaborative MIMIC Study Group, Perth, Western Australia, Australia, 25Forth Valley Royal hospital, BURST Collaborative MIMIC Study Group, Larbert, United Kingdom, 26Glasgow Royal Infirmary, BURST Collaborative MIMIC Study Group, Glasgow, United Kingdom, 27Guys Hospital, BURST Collaborative MIMIC Study Group, London, United Kingdom, 28Great Western Hospital, BURST Collaborative MIMIC Study Group, Swindon, United Kingdom, 29Heart of England NHS FT, BURST Collaborative MIMIC Study Group, Birmingham, United Kingdom, 30Heidelberg Repatriation Hospital, BURST Collaborative MIMIC Study Group, Ivanhoe, Victoria, Australia, 31High Wycombe Hospital, BURST Collaborative MIMIC Study Group, High Wycombe, United Kingdom, 32James Paget University Hospital, BURST Collaborative MIMIC Study Group, Great Yarmouth, United Kingdom, 33James Cook University Hospital, BURST Collaborative MIMIC Study Group, Middlesbrough, United Kingdom, 34Kettering General Hospital, BURST Collaborative MIMIC Study Group, Kettering, United Kingdom, 35Kingston Hospital, BURST Collaborative MIMIC Study Group, Kingston upon Thames, United Kingdom, 36King’s College Hospital, BURST Collaborative MIMIC Study Group, London, United Kingdom, 37Leicester General Hospital, BURST Collaborative MIMIC Study Group, Leicester, United Kingdom, 38Lister hospital, BURST Collaborative MIMIC Study Group, Stevenage, United Kingdom, 39Luton and Dunstable hospital, BURST Collaborative MIMIC Study Group, Luton, United Kingdom, 40Queen Elizabeth Hospital, BURST Collaborative MIMIC Study Group, Kings Lynn, United Kingdom, 41Manchester Royal Infirmary, BURST Collaborative MIMIC Study Group, Manchester, United Kingdom, 42Musgrove Park Hospital, BURST Collaborative MIMIC Study Group, Taunton, United Kingdom, 43North Manchester General Hospital, BURST Collaborative MIMIC Study Group, Manchester, United Kingdom, 44Norfolk and Norwich Hospital, BURST Collaborative MIMIC Study Group, Norwich, United Kingdom, 45Northampton General Hospital, BURST Collaborative MIMIC Study Group, Northampton, United Kingdom, 46Nottingham University Hospitals, BURST Collaborative MIMIC Study Group,
Is medical expulsive therapy (MET) with tadalafil more effective than tamsulosin in distal ureteric stones (DUS)? A prospective randomized study

By: Boulos V., Nada A.
El Sahel Teaching Hospital, Dept of Urology, Cairo, Egypt
Concordance in ureteric stent tip and urine cultures for quality improvement in management of urological infection: A pilot study

By: Keenan R.A., Nic An Riogh A., Fuentes A., Cullen I., Daly P.
University Hospital Waterford, Dept. of Urology, Waterford, Ireland

Biofilms on short-term indwelling ureteral stents: Influence on associated symptoms and complications

By: Betschart P. 1, Zumstein V. 1, Buhmann M.T. 2, Albrich W.C. 3, Nolte O. 4, Schmid H-P. 1, Ren Q. 2, Abt D. 1
1Cantonal Hospital St. Gallen, Dept. of Urology, St. Gallen, Switzerland, 2Empa, Swiss Federal Laboratories for Materials Science and Technology, Laboratory for Biointerfaces, St. Gallen, Switzerland, 3Cantonal Hospital St. Gallen, Division of Infectious Diseases and Hospital Epidemiology, St. Gallen, Switzerland, 4Center for Laboratory Medicine, St. Gallen, Switzerland

In vitro effects of novel coating agents on bacterial biofilm development on ureteral stents

By: Dressler F.F. 1, Szell T. 1, Goelz H. 2, Miernik A. 1, Brandstetter T. 3, Scherag F. 3, Schoeb D.S. 1
1Faculty of Medicine, University of Freiburg – Medical Center, Freiburg, Dept. of Urology, Freiburg im Breisgau, Germany, 2Faculty of Medicine, University of Freiburg – Medical Center, Freiburg, Institute for Microbiology and Hygiene, Freiburg im Breisgau, Germany, 3Department of Microsystems Engineering (IMTEK), University of Freiburg, Chemistry and Physics of Interfaces, Freiburg im Breisgau, Germany

Double J ureteral stent, how long is too long? Results of a European multicentric study

By: Legrand F. 1, Saussez T. 2, Celia A. 3, Djouhri F. 4, Ruffion A. 5, Musi G. 6, Roumeguere T. 1
1ULB Hôpital ERASME, Dept. of Urology, Brussels, Belgium, 2Hôpital St-Luc, Dept. of Urology, Brussels, Belgium, 3University Hospital of Modena, Dept. of Urology, Modena, Italy, 4Centre hospitalier des Vals d’Ardèche, Dept. of Urology, Ardèche, France, 5CHU Lyon - Centre Hospitalier Lyon Sud, Dept. of Urology, Lyon, France, 6European Institute of Oncology, Dept. of Oncology, Milan, Italy

The diameter of the ureteral stent has an impact on pain levels and quality of life during short term treatment

By: Nestler S., Witte B., Schilchegger L., Jones J.
Hochtaunuskliniken Bad Homburg, Dept. of Urology, Bad Homburg, Germany

Can mirabegron relieve double-J stent-related discomfort: A multicenter, randomized, open-label pilot study

By: Tae B.S. 1, Jeon B.J. 1, Hoon C. 1, Park J.Y. 1, Jo S. 2, Shim J.S. 3, Lee J.G. 3
**Scientific Programme - EAU18 Copenhagen**

645  
**A randomized controlled trial evaluating sildenafil citrate in relieving ureteral stent related symptoms**

By: Tharwat M., Elsaadany M., Lachine A., El-Nahas A.  
Urology and Nephrology Center, Dept. of Urology, Mansoura, Egypt

646  
**The first 100 cases with the ALLIUM® ureteral stent in the management of ureteral disorders**

1Institute Neurotraumatologico Italian, Dept. of Urology, Grottaferrata, Italy, 2Università La Sapienza, Dept. of Urology, Rome, Italy
Complications and alternatives to partial nephrectomy

Poster Session 48

Sunday 18 March
14:00 - 15:30

Location: Blue Area, Room 1 (Level 0)

Chairs: C.K. Bensalah, Rennes (FR)
R. Coelho, Sao Paulo (BR)
M.C. Mir Maresma, Barcelona (ES)

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.

* 647

Influence of symptomatic pseudoaneurysms on postoperative renal function in patients after partial nephrectomy: Results of a matched-pair analysis

By: Walach M.T., Rathmann N., Pfalzgraf D., Diel S., Ritter M., Michel M., Wagener N., Kriegmair M.
University Medical Centre Mannheim, Dept. of Urology, Mannheim, Germany

648

Open partial nephrectomy vs. robot-assisted partial nephrectomy for cystic renal masses: Impact of peroperative cystic spillage and oncological results

By: Pradere B.1, Peyronnet B.2, Delporte G.3, Khene Z.2, Manach Q.4, Moulin M.5, Rizk J.3, Brichart N.6, Beauval J.7, Roupret M.8, Bex A.9, Bruyère F.1, Bensalah K.2

1CHRU Tours, Dept. of Urology, Tours, France, 2CHU Rennes, Dept. of Urology, Rennes, France, 3CHU Lille, Dept. of Urology, Lille, France, 4Hospital Pitié-Salpetrière, Dept. of Urology, Paris, France, 5CHU Dijon, Dept. of Urology, Dijon, France, 6CHU Orléans, Dept. of Urology, Orléans, France, 7CHU Toulouse, Dept. of Urology, Toulouse, France, 8Hopital Pitié-Salpetrière, Dept. of Urology, Paris, France, 9Netherlands Cancer Institute, Dept. of Urology, Amsterdam, Netherlands, The

649

Risks of chronic kidney disease, cardiovascular events and mortality between partial and radical nephrectomy for T1 renal cell carcinoma

By: Hsu R.C.J.1, Barclay M.2, Lytratzopoulos G.3, Gnanapragasam V.1, Armitage J.4
1University of Cambridge, Academic Urology Group, Dept. of Surgery, Cambridge, United Kingdom, 2University of Cambridge, Cambridge Centre for Health Services Research, Cambridge, United Kingdom, 3University College London, Epidemiology of Cancer Healthcare and Outcomes (ECHO) Group, Dept. of Behavioural Science and Health, London, United Kingdom, 4Cambridge University Hospitals NHS Foundation Trust, Dept. of Urology, Cambridge, United Kingdom

* 650

Surgically-induced hypertension and cardiovascular morbidity following treatment for localized kidney cancer: The impact of nephrons loss

Scientific Programme - EAU18 Copenhagen
Complications and survival outcomes in cardiopathic renal cancer patients elected for surgical treatment


1University Vita-Salute San Raffaele - IRCCS San Raffaele Scientific Institute, Unit of Urology, Milan, Italy, 2University Vita-Salute San Raffaele - IRCCS San Raffaele Scientific Institute, Unit of Cardiology, Milan, Italy

Oncological outcome of robotic tumorectomy versus cryoablation for renal masses: Comparison after matching on radiological stage and renal score


1Saint Louis Hospital, Dept. of Urology, Paris, France, 2Saint Louis Hospital, Dept. of Radiology, Paris, France, 3CHU Rennes, Dept. of Urology, Paris, France, 4Pitié-Salpêtrière Hospital, Dept. of Urology, Paris, France, 5Henri Mondor Hospital, Dept. of Urology, Paris, France

TRIFECTA outcomes of partial nephrectomy versus percutaneous ablation in cT1a renal masses

By: Covin B., Benoit T., Lagarde S., Delchier M.C., Roumigué M., Doumerc N., Thououzan M., Huyghhe E., Game X., Soulie M., Beauval J.B.

1University Hospital of Rangueil, Dept. of Urology, Andrology, Transplantation, Toulouse, France, 2University Hospital of Rangueil, Dept. of Radiology, Toulouse, France

Percutaneous image-guided thermal radiofrequency ablation for cT1a-b renal masses: Long-term follow-up experience of a tertiary referred center


1European Institute of Oncology, Dept. of Urology, Milan, Italy, 2European Institute of Oncology, Dept. of Interventional Radiology, Milan, Italy, 3European Institute of Oncology, Dept. of Pathology, Milan, Italy
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<tr>
<th>Paper Number</th>
<th>Title</th>
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<tr>
<td>655</td>
<td>Comparison of mid-term oncological outcomes of active surveillance and percutaneous</td>
<td>By: Umari P.¹, Rizzo M.², Billia M.¹, Chiapparrone G.², Pavan N.², Liguori G.², Stacul F.³, Zacchero M.¹, De Angelis P.¹, Volpe A.¹, Trombetta C.²</td>
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<td>cryoablation of small renal masses</td>
<td>¹Ospedale Maggiore della Carità, Dept. of Urology, Novara, Italy, ²Ospedale Cattinara, Dept. of Urology, Trieste, Italy, ³Ospedale Maggiore, Dept. of Radiology, Trieste, Italy</td>
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<td>656</td>
<td>Repeated cryoablation as treatment modality after failure of primary renal cryoablation:</td>
<td>By: Sundelin M.O.¹, Nielsen T.K.¹, Lagerveld B.², Keeley F.³ ¹Aarhus University Hospital, Dept. of Urology, Aarhus, Denmark, ²Onze Lieve Vrouwe Gasthuis, Dept. of Urology, Amsterdam, Netherlands, The, ³Bristol Urological Institute, Dept. of Urology, Bristol, United Kingdom</td>
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<td>An EuRECA multinational analysis</td>
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<td>657</td>
<td>Arteriel selective embolization versus robotic partial nephrectomy in the treatment of</td>
<td>By: Ouzaid I.¹, Delporte G.², Ouzzane A.³, Puech P.⁴, Villers A.², Haber G-P⁵, Ravery V.¹ ¹Bichat Hsopital, Dept. of Urology, Paris, France, ²CHU Lille, Dept. of Urology, Lille, France, ³CHU Lille, Dept. of Urology, Lille, France, ⁴CHU Lille, Dept. of Radiology, Lille, France, ⁵Cleveland Clinic, Glickman urological and kidney institute, Cleveland, United States of America</td>
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<td>renal angiomyolipomas</td>
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**Summary**

R. Coelho, Sao Paulo (BR)
Kidney donation and transplantation - moving ahead

Poster Session 49

Location: Blue Area, Room 2 (Level 0)

Chairs: F.J. Burgos Revilla, Madrid (ES)  
        J.D. Olsburgh, London (GB)  
        M. Stöckle, Homburg (DE)

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.

To be confirmed

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Robotic versus laparoscopic hand-assisted living donor nephrectomy: A retrospective comparative analysis

By: Klein J.P. \(^1\), Renard J. \(^1\), Karine H. \(^2\), Martin P-Y. \(^2\), Sun P. \(^3\), Iselin C. \(^1\)

\(^1\)Geneva University Hospitals, Dept. of Urology, Geneva, Switzerland, \(^2\)Geneva University Hospitals, Dept. of Nephrology, Geneva, Switzerland, \(^3\)Geneva University Hospitals, Dept. of Transplant Surgery, Geneva, Switzerland

660

Results of our program of donation after controlled cardiac death

By: Pujol Galarza L. \(^1\), Fiol Riera M. \(^1\), Riera Canals L. \(^1\), Suárez Novo J.F. \(^1\), Cocera Rodríguez R. \(^1\), Etchevery Giadrosich B. \(^1\), Camps Lloveras N. \(^1\), Melilli E. \(^2\), Vigués Julià F. \(^1\)

\(^1\)Hospital Universitari de Bellvitge, Dept. of Urology, L'Hospitalet de Llobregat, Spain, \(^2\)Hospital Universitari de Bellvitge, Dept. of Nephrology, L'Hospitalet de Llobregat, Spain

661

Kidney transplantation from non-heart-beating donors (NHBD) after extracorporeal membranous oxygenation (ECMO) – initial experience and comparison to brain-dead donors (BDD) outcomes

By: Manso M. \(^1\), Pacheco-Figueiredo L. \(^1\), Santos-Silva A. \(^1\), Antunes-Lopes T. \(^1\), Diniz H. \(^2\), Sampaio S. \(^2\), Pestana M. \(^2\), Gomes-Carvalho J. \(^1\), Oliveira G. \(^2\), Cruz F. \(^1\)

\(^1\)São João Hospital Center, Dept. of Urology, Oporto, Portugal, \(^2\)São João Hospital Center, Dept. of Nephrology, Oporto, Portugal

662

Controlled donors after circulatory death: Comparison between normothermic regional perfusion and super rapid retrieval in renal transplantation

By: Peri Cusi L. \(^1\), Ruiz A. \(^2\), Da Sousa E. \(^3\), Musquera M. \(^1\), Carmona F. \(^2\), Rodríguez-Villar C. \(^2\), Diekmann F. \(^3\), Paredes D. \(^2\), Antonio A. \(^1\)

\(^1\)Hospital Clínic, Dept. of Urology, Barcelona, Spain, \(^2\)Hospital Clínic, Donation and
Renal outcome after simultaneous heart and kidney transplantation

By: Toinet T.¹, Dominique I.², Cholley I.³, Vanalderwerelt V.⁴, Goujon A.⁵, Paret F.⁶, Bessede T.⁷, Delarotte V.⁸, Salomon L.³, Badet L.², Boutin J-M.⁴, Verhoest G.⁵, Branchereau J.⁶, Loupy A.⁹, Timsit M-O.¹

¹HEGP - Université Paris Descartes, Dept. of Urology, Paris, France, ²Hospices Civils de Lyon, Dept. of Urology and Transplant surgery, HEH, Lyon, France, ³Henri Mondor, Dept. of Urology, Créteil, France, ⁴CHRU de Tours, Dept. of Urology, Tours, France, ⁵CHU de Rennes, Dept. of Urology, Rennes, France, ⁶CHU de Nantes, Dept. of Urology, Nantes, France, ⁷Bicêtre, Dept. of Urology, Le Kremlin Bicêtre, France, ⁸APHM, Dept. of Urology, Marseille, France, ⁹HEGP - Université Paris Descartes, Dept. of Nephrology and Epidemiology, Paris, France

Robot-assisted kidney autotransplantation: First case series in Europe

By: Van Parys B.¹, Tailly T.¹, Beysens M.¹, Van Besien J.¹, Van Haute C.², Ponette D.³, Desender L.⁴, Randon C.⁴, De Ryck F.⁴, Vermassen F.⁴, Hoebeke P.¹, Decaestecker K.¹

¹Ghent University Hospital, Dept. of Urology, Ghent, Belgium, ²Brugmann Hospital, Université Libre de Bruxelles, Dept. of Urology, Brussels, Belgium, ³AZ Darniaan, Dept. of Urology, Ostend, Belgium, ⁴Ghent University Hospital, Dept. of Thoracic and Vascular Surgery, Ghent, Belgium

Associated video presentation 3D printing meets robotic kidney transplantation: A hybrid model for training

By: Uwechue R.¹, Gogalniceanu P¹, Byrne N², Chandak P.¹, Kessaris N¹, Olsburgh J.¹, Ahmed K³, Mamode N.¹, Loukopoulos I.¹

¹Guy's and St Thomas' NHS trust, Dept. of Transplantation, London, United Kingdom, ²Guy's and St Thomas' NHS trust, Dept. of Medical Physics, London, United Kingdom, ³Guy's and St Thomas' NHS trust, Dept. of Urology, London, United Kingdom

Robotic kidney transplantation: Bakirkoy experience

By: Tugcu V.¹, Sahin S.¹, Yavuzsan A.H.¹, Yigitbasi I.¹, Akbay F.G.², Apaydin S.²

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

The European experience on robot-assisted kidney transplantation: 2 years after the beginning

By: Decaestecker K.¹, Breda A.², Territo A.², Tugcu V.³, Selcuk S.³, Alcaraz A.⁴, Musquera M.⁴, Stocke M.⁵, Fornaro P.⁶, Mohammed N.⁶, Desender L.⁷, Doumerc N.⁸, Siena G.⁹
1Ghent University Hospital, Dept. of Urology, Ghent, Belgium, 2Fundació Puigvert, Autonoma University of Barcelona, Dept. of Urology, Barcelona, Spain, 3Bakirkoy Dr. Sadi Konuk Training and Research Hospital, Dept. of Urology, Istanbul, Turkey, 4Hospital Clinic de Barcelona, Dept. of Urology, Barcelona, Spain, 5University Saarland, Dept. of Urology, Homburg/Saar, Germany, 6University Hospital Halle (Saale), Dept. of Urology, Halle, Germany, 7Ghent University Hospital, Dept. of Thoracic and Vascular Surgery, Ghent, Belgium, 8University Hospital of Rangueil, Dept. of Urology, Toulouse, France, 9University of Florence, Careggi Hospital, Dept. of Urology, Florence, Italy

667 Postoperative complications and long term outcomes of kidney transplantation from expanded criteria donors

By: Fellmann M., Balssa L., Clement E., Frantczack A., Bernardini S., Bittard H., Chabanes E., Guichard G., Kleinclauss F.

CHRU Besancon, Dept. of Urology, Besancon, France

668 Double J is superior to externally draining ureteric stent in enhancing recovery after living donor kidney transplantation

By: Bruintjes M., D’Ancona F., Kusters A., Hilbrands L., Warlé M.

1Radboud University Medical Center, Dept. of Surgery, Nijmegen, Netherlands, 2Radboud University Medical Center, Dept. of Urology, Nijmegen, Netherlands, 3Radboud University Medical Center, Dept. of Nephrology, Nijmegen, Netherlands

669 Prevalence and impact of chronic postsurgical pain following laparoscopic donor nephrectomy: A cross-sectional cohort study


1Radboud University Medical Center, Dept. of Surgery, Nijmegen, Netherlands, 2Radboud University Medical Center, Dept. of Urology, Nijmegen, Netherlands, 3Radboud University Medical Center, Dept. of Nephrology, Nijmegen, Netherlands, 4Radboud University Medical Center, Dept. of Anaesthesiology, Nijmegen, Netherlands

670 Renal transplantation into enterocystoplasty or trans-ileal derivation: Short- and long-term results in adults and children


1Chu de Caen, Dept. of Urology, Caen, France, 2Manchester Royal Infirmary Hospital, Dept. of Transplantation, Manchester, United Kingdom

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

By: Bañuelos Marco B., Friedersdorff F., Lingnau A.

1Charité Universitätsmedizin Berlin, Dept. of Urology and Pediatric Urology, Berlin, Germany, 2Charité Universitätsmedizin Berlin, Dept. of Urology, Berlin, Germany
Established stress urinary incontinence after radical prostatectomy: A risk calculator based on the 24-hour pad weight test

Fundación IVO, Dept. of Urology, Valencia, Spain

Investigation of the mechanism underlying chronological urinary continence recovery after radical prostatectomy: Effectiveness of a longer urethral stump to prevent urinary incontinence

Kanazawa University Graduate School of Medical Science, Dept. of Urology, Kanazawa, Japan

Impact of posterior urethrovesical reconstruction on early return to continence after robot-assisted radical prostatectomy (RARP): Results of prospective, single-blind, parallel-group, randomized controlled trial

By: Hoogenes J., Bos D., Wang Y., Wu C., Patterson L., Farrokhyar F., Shayegan B.
McMaster University, Dept. of Surgery, Division of Urology, Hamilton, Canada

Which patients with low-risk prostate cancer are still receiving radical prostatectomy? Impact of patient selection on inverse stage migration at two European, tertiary referral centers

1Vita-Salute University San Raffaele, Dept. of Urology, Milan, Italy, 2Magna Graecia University of Catanzaro, Dept. of Urology, Catanzaro, Italy, 3Vattikuti Urology Institute, Henry Ford Health System, Outcomes Research, Analytics, and Evaluation, Detroit, United States of America, 4University of Montreal Health Center, Cancer Prognostics and
676  The impact of anxiety and depression on surgical and functional outcomes in patients who underwent radical prostatectomy

By: Pompe R.S.¹, Krüger A.¹, Karakiewicz P.², Preisser F.¹, Graefen M.¹, Huland H.¹, Tilki D.¹
¹University Hospital Hamburg-Eppendorf, Martini-Klinik Prostate Cancer Center, Hamburg, Germany, ²University of Montreal Health Center, Cancer Prognostics and Health Outcomes Unit, Montreal, Canada

677  What is learning curve of robot-assisted radical prostatectomy (RARP) in a very high-volume open radical prostatectomy (RRP) center: Experience of a propensity matched-pair analysis of 10719 patients

University Clinic Eppendorf, Martini-Klinik Prostate Cancer Center, Hamburg, Germany

678  The prognostic impact of downgrading and upgrading from biopsy to radical prostatectomy in a contemporary grading system for prostate cancer

By: Jang W.S.¹, Koh D.H.¹, Park J.W.¹, Kang S.K.¹, Kim J.W.¹, Lee J.S.¹, Kim Y.S.², Cho I.R.³, Lee J.S.⁴, Kim W.T.⁵, Ham W.S.¹, Choi Y.D.¹
¹Yonsei University College of Medicine, Dept. of Urology, Seoul, Korea, South, ²National Health Insurance Corporation Ilsan Hospital, Dept. of Urology, Goyang, Korea, South, ³Inje University College of Medicine, Dept. of Urology, Gimhae, Korea, South, ⁴Cheil General Hospital & Women's Healthcare Center, Dept. of Urology, Seoul, Korea, South, ⁵Chungbuk National University, Dept. of Urology, Cheongju, Korea, South

679  The impact of time from diagnosis to primary radical prostatectomy (RP) on prostate cancer-specific mortality (PCSM)

By: Aas K.¹, Fosså S.D.², Møller B.³, Myklebust T-A.⁴, Vlatkovic L.⁵, Kvåle R.⁶, Berge V.¹
¹Oslo University Hospital, Dept. of Surgery, Oslo, Norway, ²Oslo University Hospital, Dept. of Oncology, Oslo, Norway, ³Cancer Registry of Norway, Dept. of Registry, Oslo, Norway, ⁴Cancer Registry of Norway, Dept. of Statistics, Oslo, Norway, ⁵Oslo University Hospital, Dept. of Pathology, Oslo, Norway, ⁶Haukeland University Hospital, Dept. of Oncology, Bergen, Norway

680  Does the delay from prostate biopsy to radical prostatectomy influence the risk of biochemical recurrence?

By: Meunier M.E.¹, Neuzillet Y.¹, Radulescu C.², Hervé J.M.¹, Rouanne M.¹, Lebret T.¹
¹Hopital Foch, Dept. of Urology, Suresnes, France, ²Hopital Foch, Dept. of Pathology, Suresnes, France
Is there an age limit for the indication of extended pelvic lymph node dissection during radical prostatectomy in patients with clinically localized prostate cancer?


1Vita-Salute University San Raffaele, Dept. of Urology, Milan, Italy, 2Federico II University, Dept. of Urology, Naples, Italy, 3Onze-Lieve-Vrouwe Hospital, Dept. of Urology, Aalst, Belgium

Obese patients undergoing robotic radical prostatectomy have no impaired operative outcome

By: Neuenschwander J., Burkhardt O., Hess L., Randazzo M., Horton K., Padevit C., John H.

Kantonsspital Winterthur, Dept. of Urology, Winterthur, Switzerland

Impact of blood loss during radical prostatectomy on the functional outcome

By: Preisser F., Pompe R., Karakiewicz P., Slaomon G., Graefen M., Huland H., Tilki D.

1University Hospital Hamburg-Eppendorf, Martini-Klinik Prostate Cancer Center, Hamburg, Germany, 2University of Montreal Health Center, Cancer Prognostics and Health Outcomes Unit, Division of Urology, Montreal, Canada

Prevalence and pathological characteristics of anterior prostate cancer in a cohort of radical prostatectomy patients diagnosed by biopsies and MRI

By: Marcq G., Pinçon C., Rizk J., Fantoni J.C., Aubert S., Leroy X., Villers A.

1Centre Hospitalier Régional Universitaire de Lille, Dept. of Urology, Lille, France, 2Lille 2 University, Dept. of Biostatistics, Lille, France, 3Centre Hospitalier Régional Universitaire de Lille, Dept. of Pathology, Lille, France

Prostate cancer quality of care disparities and their impact on patient outcomes

By: Lawson K., Daignault K., Saarela O., Abouassaly R., Finelli A.

1University of Toronto, Dept. of Surgery, Division of Urology, Toronto, Canada, 2University of Toronto, Dalla Lana School of Public Health, Toronto, Canada, 3Cleveland Clinic, Glickman Urological & Kidney Institute, Cleveland, United States of America

Summary

H.G. Van Der Poel, Amsterdam (NL)
Paediatric urology 2: Hypospadias and testis
Poster Session 51

Location: Blue Area, Room 4 (Level 0)
Chairs: M. Eissa, Cairo (EG)
        A. Schröder, Mainz (DE)
        M.S. Silay, Istanbul (TR)

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

686
Long term outcomes for XY cloacal extrophy raised as female
By: Namdarian B. 1, Creighton S. 2, Carmichael P. 3, Wood D. 1
1University College London Hospital, Dept. of Urology, London, United Kingdom,
2University College London Hospital, Dept. of Gynaecology, London, United Kingdom,
3Great Ormond Street Hospital, Dept. of Psychology, London, United Kingdom

687
Nerves and vessels in the corpora cavernosa and corpus spongiosum: Analysis of their development in the human penis during the whole fetal period
By: Gallo C., Costa W., Favorito L., Sampaio F.
State University of Rio de Janeiro, Urogenital Research Unit, Rio de Janeiro, Brazil

688
Is the skin immune system compromised in patients with hypospadias?
By: Haid B. 1, Reider D. 2, Spinoit A-F. 3, Nägele F. 4, Pechriggl E. 5, Romani N. 2, Oswald J. 1
1Ordensklinikum Linz, Hospital of the Sisters of Charity, Dept. of Pediatric Urology, Linz, Austria,
2Innsbruck Medical University, Dept. of Dermatology and Venereology, Innsbruck, Austria,
3UZ Gent, Dept. of Urology, Ghent, Belgium,
4Innsbruck Medical University, Dept. of Pediatric Urology, Innsbruck, Austria,
5Innsbruck Medical University, Dept. of Plastic and Reconstructive Surgery, Innsbruck, Austria

689
Inlay internal preputial graft urethroplasty vs tubularized incised plate urethroplasty for primary distal hypospadias
By: Zou X., Wu Y., Zhang Z., Yuan Y., Xiao R., Zhang G.
First Affiliated Hospital of Gannan Medical University, Institute of Urology, Dept. of Urology, Ganzhou, China

690
Preputial dartos fascia flap as a secure layer in tubularized incised plate urethroplasty for repair of uncircumcised patients with distal hypospadias
By: Abouelgreed T. 1, Altramsy A. 2
<table>
<thead>
<tr>
<th>Paper Number</th>
<th>Title</th>
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<tbody>
<tr>
<td>691</td>
<td>Evaluating the use of a continent, mid-urethral stent for hypospadias surgery in toilet-trained children</td>
<td>Nasseri R.¹, Levitt M. ¹, Akdam A. ¹, Darawsha A.E. ², Neheman A. ¹</td>
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<td>¹Assaf Harofeh Medical Center, Dept. of Urology, Tzifrin, Israel, ²Meir Medical Center, Dept. of Paediatric Urology, Kfar Saba, Israel</td>
</tr>
<tr>
<td>692</td>
<td>Hyperbaric oxygen treatment in complex hypospadias surgery</td>
<td>Verhovsky G.¹, Bush N. ², Snodgrass W. ², Lang E. ¹, Efrati S. ¹, Zisman A. ¹, Neheman A. ¹</td>
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<td>¹Assaf Harofeh Medical Center, Dept. of Urology, Zerifin, Israel, ²Parc Urology, Dept. of Urology, Frisco, United States of America</td>
</tr>
<tr>
<td>693</td>
<td>Proximal hypospadias treated with a transverse preputial island tube: Long-term functional, sexual and cosmetic outcomes</td>
<td>Rijnja S.¹, De Jong T. ², Bosch J. ¹, De Kort L. ¹</td>
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<td>¹UMC Utrecht, Dept. of Urology, Utrecht, Netherlands, The, ²University Children's Hospital UMC Utrecht, Dept. of Urology, Utrecht, Netherlands, The</td>
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<tr>
<td>694</td>
<td>The impact of varicocele on testicular growth during puberty: A cross-sectional observational study</td>
<td>De Win G.¹, Van Dam P.J. ², Van Dam V. ², Van Den Keybus T. ², Daems F. ², Bauwens W. ², Leysen C. ², Van Der Heyde T. ², Vaganee D. ³, De Baets K. ³, Wachter S. ³</td>
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<td>¹Antwerp University, Dept. of Urology, Antwerp, Belgium, ²Antwerp University, Dept. of Health Sciences, Antwerp, Belgium, ³Antwerp University, Dept. of Urology, Antwerp, Belgium</td>
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<tr>
<td>695</td>
<td>Laparoscopic management of varicocele in children and adolescents: Systematic review and metanalysis</td>
<td>Tandon S., Bennett D., Nataraja R., Pacilli M.</td>
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<td>Monash Health, Dept. of Pediatric Surgery, Melbourne, Australia</td>
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<tr>
<td>696</td>
<td>Embolization/sclerotherapy in the management of varicocele in children and adolescents: Systematic review and meta-analysis</td>
<td>Tandon S., Bennett D., Nataraja R., Pacilli M.</td>
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<td>Monash Health, Dept. of Pediatric Surgery, Melbourne, Australia</td>
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<tr>
<td>697</td>
<td>The impact of urbanization level on the incidence rate of testicular dysgenesis syndrome: A nationwide, population-based cohort study</td>
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</table>
Prevalence of testicular appendices, epididymal anomalies and patency of processus vaginalis and its relationship with undescended testis position

By: Favorito L.A., Gallo C., Sampaio F.
State University of Rio de Janeiro, Urogenital Research Unit, Rio de Janeiro, Brazil

Late ascended testes: Is ectopic gubernacular insertion a criterion for an embryologic pathogenetic background?

By: Haid B., Spinoit A-F., Radford A., Rein P., Oswald J., Silay M.S.
1Ordensklinikum Linz, Hospital of the Sisters of Charity, Dept. of Pediatric Urology, Linz, Austria,
2UZ Gent, Dept. of Urology, Ghent, Belgium,
3Leeds Children's Hospital, NHS Trust, Dept. of Pediatric Surgery, Leeds, United Kingdom,
4Istanbul Medeniyet University, Dept. of Pediatric Urology, Istanbul, Turkey

Testicular pain pathway in children: Investigating where missed torsion occurs most often

By: Bastianpillai C., Hamid S., Green J.
Whipps Cross Hospital, Dept. of Urology, London, United Kingdom
Cystectomy - improving perioperative and supportive care
Poster Session 52

Location: Blue Area, Room 5 (Level 0)
Chairs: M. Gallucci, Rome (IT)
A. Mattei, Luzern (CH)
G.T. Sung, Busan (KR)

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

701 The impact of change in prophylactic antibiotics on infectious complications after radical cystectomy with orthotopic neobladder
By: Song W. 1, Kim K.H. 1, Yoon H.S. 1, Kim C.J 2, Yoon H.N 1, Chung W.S. 1, Sim B.S. 1, Cho I.R 3, Choi H.J. 2, Lee D.H. 1
1Ewha Womans University School of Medicine, Dept. of Urology, Seoul, Korea, South, 2Ewha Womans University School of Medicine, Dept. of Internal Medicine, Seoul, Korea, South, 3Inje University Ilsan Paik Hospital, Dept. of Urology, Goyang, Korea, South

702 Effect of long acting anticholinergic on nocturnal incontinence after radical cystectomy and orthotopic neobladder. A randomized placebo-controlled crossover study
By: Zahran M. 1, Nabeih H. 1, Taha D. 2, Harraz A. 1, El Hefnawy A. 1, Ali-El-Dein B. 1
1Urology and Nephrology Center, Dept. of Urology, Mansoura, Egypt, 2Kafrelsheikh University, Dept. of Urology, kafrelsheikh, Egypt

703 Risk of fractures following urinary diversion for bladder cancer: A population-based study
By: Richard P. 1, Bashir S. 2, Gupta A. 3, Fleschner N. 4, Zlotta A. 4, Mohammed A. 5, Kulkarni G. 4
1University of Sherbrooke, Division of Urology, Dept. of Surgery, Sherbrooke, Canada, 2University of Toronto, Dept. of Biostatistics, Toronto, Canada, 3Cedars-Sinai Medical Center, Dept. of Urology, Los Angeles, United States of America, 4University of Toronto, Dept. of Surgery and Surgical Oncology, Toronto, Canada, 5Luton and Dunstable Hospital NHS Foundation Trust, Dept. of Urology, Luton, United Kingdom

704 Relationship between postoperative weight loss and oncological outcomes after radical cystectomy
By: Hatakeyama S., Fujita N., Kodama H., Tokui N., Hosogoe S., Kusaka A., Yamamoto H., Yoneyama T., Yoneyama T., Hashimoto Y., Koie T., Ohyama C.
Hirosaki University Graduate School of Medicine, Dept. of Urology, Hirosaki, Japan
Cigarette smoking is adversely associated with pathological response to platinum-based neoadjuvant chemotherapy in patients undergoing treatment for urinary bladder cancer

By: Gild P.¹, Vetterlein M.², Necchi A.³, Seiler R.⁴, Roghmann F.⁵, Gontero P.⁶, Cumberbatch M.⁷, Dobruch J.⁸, Mertens L.⁹, Seisen T.¹⁰, Anract J.¹¹, Pycha A.¹², Saba K.¹³, Poyet C.¹³, Noon A.⁷, Van Rhijn B.⁹, Roupret M.¹⁰, Shariat S.¹⁴, Xylinas E.¹¹, Rink M.¹

¹University Medical Center Hamburg-Eppendorf, Dept. of Urology, Hamburg, Germany, ²University Medical Center Hamburg-Eppendorf, Dept. of Urology, Hamburg, Germany, ³Fondazione IRCCS Istituto Nazionale dei Tumori, Dept. of Medical Oncology, Milan, Italy, ⁴University Hospital Berne, Dept. of Urology, Berne, Switzerland, ⁵Marien Hospital, Dept. of Urology, Herne, Germany, ⁶University of Turin, Dept. of Surgical Sciences, Turin, Italy, ⁷Sheffield Teaching Hospitals NHS Trust, Dept. of Urology, Sheffield, United Kingdom, ⁸Centre of Postgraduate Medical Education, Dept. of Urology, Warsaw, Poland, ⁹Netherlands Cancer Institute – Antoni van Leeuwenhoek Hospital, Dept. of Urology, Amsterdam, Netherlands, The, ¹⁰University Paris Sorbonne, Dept. of Urology, Paris, France, ¹¹Cochin Hospital, Paris Descartes University, Dept. of Urology, Paris, France, ¹²Central Hospital of Bolzano and Medical School, Sigmund Freud University, Dept. of Urology, Bolzano, Italy and Vienna, Austria, Italy, ¹³University Hospital Zürich, Dept. of Urology, Zürich, Switzerland, ¹⁴Medical University Vienna, Dept. of Urology, Vienna, Austria

Evolvement of cystectomy care over a 11-years period in a high volume tertiary referral center

By: Brassetti A.¹, Möller A.¹, Laurin O.¹, Höijer J.², Adding C.¹, Miyakawa A.¹, Hosseini A.¹, Wiklund P.¹

¹Karolinska Institutet, Molecular Medicine and surgery section of Urology, Stockholm, Sweden, ²Karolinska Institutet, Institute of Environmental Medicine, Unit of Biostatistics, Stockholm, Sweden

Utilization and outcomes of chemoprophylaxis for the prevention of venous thromboembolism following radical cystectomy: A population-based study

By: Zlatev D., Reese S., Mossanen M., Pucheril D., Chang S. Brigham and Women's Hospital, Dept. of Urologic Surgery, Boston, United States of America

Enhanced recovery protocol versus standard protocol for radical cystectomy: Results of a prospective randomized study

By: Ibrahim H., Kotb S., Elfyouny H., Abd Allah A., Kasem A., Salem A., Abd Elhamid M., Mursi K., Abd Elrazzak O. Cairo University, Faculty of Medicine, Dept. of Urology, Cairo, Egypt

Disease and patient's characteristics in elderly (≥75 years) treated with radical cystectomy: results of a large multicentre retrospective series
Comparison of readmissions and hospital costs between continent and incontinent urinary diversion after radical cystectomy: An analysis of a nationally representative database

By: Joice G. 1, Chappidi M., Patel H., Kates M., Sopko N., Stimson C., Pierorazio P., Bivalacqua T.
The James Buchanan Brady Urological Institute at Johns Hopkins Hospital, Dept. of Urology, Baltimore, United States of America

Multicentric comparison of surgical outcomes obtained after open radical cystectomy and robot-assisted laparoscopic radical cystectomy for muscle-invasive bladder cancer

By: Lenfant L. 1, Parra J. 1, Verhoest G. 2, Graffeille V. 2, Masson-Lecomte A. 3, Vordos D. 3, De La Taille A. 3, Roumiguie M. 4, Lesourd M. 4, Taksin L. 5, Granger B. 6, Ploussard G. 7, Rouprêt M. 1

1Pitié-Salpêtrière Hospital, Assistance Publique-Hôpitaux de Paris (AP-HP), Dept. of Urology, Paris, France, 2Pontchaillou Hospital, Dept. of Urology, Rennes, France, 3Henri Mondor Hospital, Assistance Publique-Hôpitaux de Paris (AP-HP), Dept. of Urology, Créteil, France, 4CHU Rangueil, Paul-Sabatier University, Dept. of Urology, Andrology and Renal Transplantation, Toulouse, France, 5Hôpital privé d’Antony, Dept. of Urology, Antony, France, 6Pitié-Salpêtrière Hospital, Assistance Publique-Hôpitaux de Paris (AP-
<table>
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<th>Article Id</th>
<th>Title</th>
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<tbody>
<tr>
<td>712</td>
<td>The role of preoperative controlling nutritional status (CONUT) score in the assessment of survival outcomes in patients with muscle invasive bladder cancer (MIBC) treated with radical cystectomy: A pilot study</td>
<td>By: Claps F., Pavan N., Boltri M., Trauner F., Liguori G., Trombetta C. Urology Clinic, ASUITS, University of Trieste, Dept. of Urology, Trieste, Italy</td>
</tr>
<tr>
<td>713</td>
<td>Quality of life in patients with bladder cancer after modified ureterocutaneostomy</td>
<td>By: Stakhovskyi O., Voylenko O., Semko S., Kononenko O., Pikul M., Vitruk I., Stakhovsky E. Stakhovsky Institute, Dept. of Plastic and Reconstructive Oncourology, Kyiv, Ukraine</td>
</tr>
<tr>
<td>714</td>
<td>The impact of cigarette smoking on adverse pathological features and survival in patients undergoing radical cystectomy for urinary bladder cancer - a prospective, European multicenter study of the EAU young academic urologists urothelial carcinoma group</td>
<td>By: Gild P., Vetterlein M., Gontero P., Roghmann F., Cumberbatch M., Dobruch J., Mertens L., Necchi A., Seisen T., Anract J., Pycha A., Saba K., Noon A., Van Rijn B., Roupret M., Seiler S., Xylinas E., Rink M. University Medical Center Hamburg-Eppendorf, Dept. of Urology, Hamburg, Germany, University of Torino, Dept. of Surgical Sciences, Torino, Italy, Marien Hospital, Dept. of Urology, Herne, Germany, Sheffield Teaching Hospitals NHS Trust, Dept. of Urology, Sheffield, United Kingdom, Centre of Postgraduate Medical Education, Dept. of Urology, Warsaw, Poland, Netherlands Cancer Institute – Antoni van Leeuwenhoek Hospital, Dept. of Urology, Amsterdam, Netherlands, The, Fondazione IRCCS Istituto Nazionale dei Tumori, Dept. of Medical Oncology, Milan, Italy, University Paris Sorbonne, Dept. of Urology, Paris, France, Cochin Hospital, Paris Descartes University, Dept. of Urology, Paris, France, Central Hospital of Bolzano and Medical School, Sigmund Freud University, Vienna, Dept. of Urology, Bolzano and Vienna, Italy, University Hospital Zürich, Dept. of Urology, Zürich, Switzerland, University Hospital Berne, Dept. of Urology, Berne, Switzerland, Medical University Vienna, Dept. of Urology, Vienna, Austria</td>
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5 University hospital of Tampere, Dept. of Urology, Tampere, Finland, 6 University hospital of Oulu, Dept. of Urology, Oulu, Finland, 7 University hospital of Kuopio, Dept. of Urology, Kuopio, Finland, 8 Central hospital of Pori, Division of Urology, Dept. of Surgery, Pori, Finland, 9 Central hospital of Lahti, Division of Urology, Dept. of Surgery, Lahti, Finland, 10 Central hospital of Seinäjoki, Division of Urology, Dept. of Surgery, Seinäjoki, Finland, 11 Central hospital of Jyväskylä, Division of Urology, Dept. of Surgery, Jyväskylä, Finland, 12 Central hospital of Lappeenranta, Division of Urology, Dept. of Surgery, Lappeenranta, Finland, 13 Central hospital of Mikkeli, Division of Urology, Dept. of Surgery, Mikkeli, Finland, 14 Central hospital of Rovaniemi, Division of Urology, Dept. of Surgery, Rovaniemi, Finland, 15 Central hospital of Hämeenlinna, Division of Urology, Dept. of Surgery, Hämeenlinna, Finland, 16 Central hospital of Joensuu, Division of Urology, Dept. of Surgery, Joensuu, Finland, 17 Central hospital of Vaasa, Division of Urology, Dept. of Surgery, Vaasa, Finland, 18 Central hospital of Kemi, Division of Urology, Dept. of Surgery, Kemi, Finland
### Robotic education, innovation and surgery session

**Specialty session - Live surgery**

**Sunday 18 March**

**14:00 - 17:00**

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<thead>
<tr>
<th>Location:</th>
<th>Green Area, Room 15 (Level 0)</th>
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<tr>
<td><strong>Moderators:</strong></td>
<td>M.S. Michel, Mannheim (DE)</td>
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<td></td>
<td>F. Montorsi, Milan (IT)</td>
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<td>C. Vaessen, Paris (FR)</td>
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<th>Time</th>
<th>Session Description</th>
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<tr>
<td>14:00 - 17:00</td>
<td>da Vinci RARP in locally extended prostate cancer</td>
<td>A. Mottrie, Aalst (BE)</td>
<td>Green Area, Room 15</td>
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<tr>
<td>14:00 - 17:00</td>
<td>da Vinci Retroperitoneal RAPN</td>
<td>J-U. Stolzenburg, Leipzig (DE)</td>
<td>Green Area, Room 15</td>
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**Advanced course on upper tract laparoscopy: Kidney, UPJ, ureter and stones**

**ESU Course 31**

**Sunday 18 March**

**14:30 - 17:30**

**Location:** Orange Area, Room 1 (Level 0)

**Chair:** G. Janetschek, Salzburg (AT)

**Aims and objectives of this session**

Surgery of the kidney by means of laparoscopy is standard of care, and has replaced open surgery to a great extent.

Approach: Transperitoneal, retroperitoneoscopy, posterior, direct through the mesentery of the colon. Each approach has specific advantages also depending on the procedure to be performed.

Procedures: Ablative, reconstruction, stone surgery.

Presentation: Power-point, interactive, videos, tips and tricks, complications.

- For surgery of the kidney, the daVinci robot is often an overkill. Also it is not available everywhere. Therefore standard laparoscopy is still of importance and should be mastered by every endoscopic surgeon.
- 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 as well as the surgical concept of the respective procedure complications can either be avoided or managed appropriately.

**Approach: Transperitoneal, retroperitoneoscopy**

G. Janetschek, Salzburg (AT)

**Kidney: Nephrectomy, management of cysts**

A. Alcaraz, Barcelona (ES)

**Ureter: Nephroureterectomy, end-to-end anastomosis, replacement**

H. Baumert, Paris (FR)

**Pyeloplasty: Indication – techniques – problems**

H. Baumert, Paris (FR)

**Stone surgery**

A. Alcaraz, Barcelona (ES)

**Complication management**

G. Janetschek, Salzburg (AT)

**Questions, tips and tricks**

A. Alcaraz, Barcelona (ES)

H. Baumert, Paris (FR)

G. Janetschek, Salzburg (AT)
Flexible ureterorenoscopy and retrograde intrarenal surgery: Instrumentation, technique, tips, tricks and indications
ESU Course 32

Sunday 18 March
14:30 - 17:30

Location: Orange Area, Room 2 (Level 0)
Chair: O. Traxer, Paris (FR)

Aims and objectives of this session
The aims and objectives of this course is to provide a complete overview of instruments, endoscopes, indications, technique and special tips and tricks concerning Retrograde IntraRenal Surgery (RIRS) using flexible ureterorenoscopes and Holmium YAG lasers. At the end the participants will know the equipment and the technique to perform flexible ureterorenoscopy in the best conditions.
• To learn about equipment.
• To learn about technique and indications.
• To learn how to use an Holmium Laser.
• To learn tips and tricks for special circumstances.

Welcome message and introduction of the course
O. Traxer, Paris (FR)

Instrumentation: Endoscopes
O. Traxer, Paris (FR)

Instrumentation: Laser and lithotripsy devices
M. Grasso, New York (US)

Instrumentation: Disposable (wires, retrieving devices, UAS, irrigation devices and others)
P.J.S. Osther, Fredericia (DK)

Technique: Stones
O. Traxer, Paris (FR)

Technique: Urothelial tumours and strictures
M. Grasso, New York (US)

Tips and tricks and special circumstances
O. Traxer, Paris (FR)

Indications (guidelines) and clinical cases
P.J.S. Osther, Fredericia (DK)

Conclusions
O. Traxer, Paris (FR)
Aims and objectives of this session
Focal treatment is about eradicating the cancer lesion within the prostate while preserving genitourinary function. This interactive course offers delegates:
• understanding of the rationale for focal treatment and patient selection criteria.
• update on principles, outcome and side effects of focal technologies.
• a thorough discussion of biopsy strategies and imaging in diagnostic work-up and follow-up
• information about existing registries.

As men with prostate cancer are getting younger the side effects of whole gland treatment are getting more important. With several new technologies available a significant development of focal treatment is expected in the coming years.

Selection criteria for FT

Patient and disease characteristics
J.P.M. Sedelaar, Nijmegen (NL)

Role of imaging (mp Ultrasound and mp MRI)
E. Barret, Paris (FR)

Prostate biopsy modalities
A. Govorov, Moscow (RU)

Focal therapy modalities

Treatment options
J.P.M. Sedelaar, Nijmegen (NL)

Energy sources (technical aspects - videos)

HIFU
E. Barret, Paris (FR)

Cryotherapy
A. Govorov, Moscow (RU)

Brachytherapy
A. Govorov, Moscow (RU)

Others (laser ablation, irreversible electroporation, radiofrequency)
E. Barret, Paris (FR)

Energy sources (technical aspects - videos)

Follow up
Tools for post focal treatment evaluation
J.P.M. Sedelaar, Nijmegen (NL)

Oncological and functional outcomes
A. Govorov, Moscow (RU)

Definition of failure and failure management
E. Barret, Paris (FR)

Clinical cases
Aims and objectives of this session
Clinicians involved in the care of female patients should know vaginal surgery. A specific goal of the faculty is to employ scientific principles, published information and clinical experience to describe and position newly developed techniques in current management of urinary incontinence. Special attention will be given to new techniques that use synthetics tapes in SUI surgery. This course will also cover the management of complications of surgery for stress incontinence and mesh complications. Treatment of recurrent urinary incontinence and incontinence with mixed symptoms also will be under discussion.
Management of vesicovaginal fistulae, urethral diverticula 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.

Introduction: Female Urology – Improving functional outcome
D. Pushkar, Moscow (RU)

Stress urinary incontinence – Approaching patients’ expectations
T.J. Greenwell, London (GB)

Obstructive slings: What to do?
D. Pushkar, Moscow (RU)
K-D. Sievert, Rostock (DE)

Autologous sling in 2018
T.J. Greenwell, London (GB)

Management of mesh complications
T.J. Greenwell, London (GB)
D. Pushkar, Moscow (RU)
K-D. Sievert, Rostock (DE)

Urethral diverticulae surgery – Tips and tricks
T.J. Greenwell, London (GB)

Urethral loss in females
D. Pushkar, Moscow (RU)
Vesico-vaginal fistulae repair from simple to complicated
D. Pushkar, Moscow (RU)

New slings for SUI – Do you need one?
T.J. Greenwell, London (GB)
K-D. Sievert, Rostock (DE)

Conclusions
Dealing with the challenge of infection in urology
ESU Course 35

Sunday 18 March
14:30 - 17:30

Location: Orange Area, Room 5 (Level 0)
Chair: F.M.E. Wagenlehner, Giessen (DE)

Aims and objectives of this session
This ESU course on infection diseases provides a broad, up to date coverage of the most important and recent problems of infectious diseases in urology. Antimicrobial resistance is one of the biggest worldwide challenges in medicine and gains increasing importance in urology. The management of infections in general and of urogenital tract infections especially, has been compromised by this rapid and continuous increase of antimicrobial resistance. Basic biologic principles and strategies to treat urogenital tract infections from benign infections to life threatening infections will be discussed in this workshop:

• Classification of UTI and surgical field contamination categories as a basis for treatment and prophylaxis.
• Diagnosis, treatment and prophylaxis strategies of urogenital tract infections.
• Uncomplicated and recurrent cystitis.
• Complicated urinary tract infections.
• Urosepsis and Fournier gangrene.
• Male genital tract infections.

Introduction
F.M.E. Wagenlehner, Giessen (DE)

Classification of UTI and surgical field contamination categories as a basis for treatment and prophylaxis
Z. Tandoğdu, Newcastle Upon Tyne (GB)

Low grade and recurrent UTI
F.M.E. Wagenlehner, Giessen (DE)

Male genital infections: Prostatitis, epididymitis and urethritis
B. Köves, Budapest (HU)

Hospital acquired UTI and antibiotic resistance
Z. Tandoğdu, Newcastle Upon Tyne (GB)

Perioperative prophylaxis with special focus on prostate biopsies, stone surgery and prosthesis implantation
B. Köves, Budapest (HU)

Sepsis and Fournier’s gangrene
F.M.E. Wagenlehner, Giessen (DE)
Prostate cancer imaging: When and how to use it
ESU Course 36

Sunday 18 March
14:30 - 17:30

Location: Orange Area, Room 6 (Level 0)
Chair: J. Walz, Marseille (FR)

Aims and objectives of this session
Recently new imaging technologies have been developed to improve the
diagnosis and management of prostate cancer. These are multiparametric MRI,
choline PET and new ultrasound based technologies.
The course’s aim is to provide:
• An overview on the currently available imaging tools for prostate cancer.
• Practical information about their use.
• A critical assessment of their clinical performance and their limitations.

Introduction and objective of course
J. Walz, Marseille (FR)

Diagnosis of prostate cancer:

Standardization, acquisition and reporting of multiparametric MRI
B.M. Carey, Leeds (GB)

Reading of a prostate MRI and use of MRI for diagnosis of prostate cancer
B.M. Carey, Leeds (GB)

MRI guided biopsy and image fusion (mp MRI and Ultrasound)
J. Walz, Marseille (FR)

What are possible alternatives to multiparametric MRI?
J. Walz, Marseille (FR)

Staging of prostate cancer:

Staging with CT, MRI and bone scintigraphy
P.J.L. De Visschere, Ghent (BE)

MRI in local staging of prostate cancer
P.J.L. De Visschere, Ghent (BE)

Recurrent disease:

Use of PET in the management of prostate cancer (initial staging and recurrence)
J. Walz, Marseille (FR)

MRI in detection of locally recurrent prostate cancer
P.J.L. De Visschere, Ghent (BE)
When to do imaging of the prostate? Case discussion and current practical questions
B.M. Carey, Leeds (GB)
P.J.L. De Visschere, Ghent (BE)
J. Walz, Marseille (FR)

Closure and evaluation
Nerve-sparing cystectomy and orthotopic bladder substitution - Surgical tricks and management of complications
ESU Course 37

Location: Orange Area, Room 7 (Level 0)
Chair: A. Stenzl, Tübingen (DE)

Aims and objectives of this session
This course has over many years dealt with the technique of urethra- and nerve-sparing cystectomy and subsequent orthotopic bladder substitution in male and female patients. It will deal with indications, technique, possible complications and their prevention. Urologists with a vast experience in cystectomy and urinary diversion will present technical tips using videoclips, results in the literature as well as own data.
• Technique of nerve-sparing cystectomy.
• Optimization of sphincter preservation for optimal continence results.
• Technical tips and tricks in orthotopic neobladder surgery.
• What to observe in male and female patients.

Preoperative investigations and selection of patients for orthotopic bladder substitution
J.E. Gschwend, Munich (DE)

Arguments for nerve-sparing cystectomy with orthotopic bladder substitution
A. Stenzl, Tübingen (DE)

How to do a nerve-sparing cystectomy in male patients
H. Abol-Enein, Mansoura (EG)

Surgical tricks to avoid complications with orthotopic bladder substitution
J.E. Gschwend, Munich (DE)

Video on how to obtain good functional results in female patients
A. Stenzl, Tübingen (DE)

Tips and Tricks: Male/female orthotopic urinary diversion
H. Abol-Enein, Mansoura (EG)

How to treat complications during follow-up
J.E. Gschwend, Munich (DE)
Aims and objectives of this session
One of the main goals of the EAU is to establish and introduce common standards for training and European urological practice in order to improve patient care. The E-BLUS exam certifies a basic level of laparoscopic urological skills. The exercises addresses bimanual dexterity, depth perception, suturing and cutting skills. Clinical application is found in such procedures as partial nephrectomy, total nephrectomy, pyeloplasty and radical prostatectomy. To aid in the training of these skills and to prepare for this E-BLUS exam the online theoretical course is mandatory http://uroweb.org/education/online-education/surgical-education/laparoscopy/theoretical-course/

The course will start with E-BLUS training to further develop your laparoscopic skills and to benefit from the knowledge and expertise of international laparoscopy experts. After the training your skill are tested in the E-BLUS exam. Make sure you are prepared for the exam because training time onsite will be limited and without previous training you will most likely not pass the exam. The exercises to be performed can be found in the instructional videos at http://uroweb.org/education/online-education/surgical-education/laparoscopy/
ESU/ESUT Hands-on Training Course in Thulium laser for vaporesection and holmium laser for laser lithotripsy
Sponsored by LISA LASER

Sunday 18 March
14:45 - 16:15

Location: Yellow Area, Room 2 (Level 0)
Chair: J. Rassweiler, Heilbronn (DE)
Tutors: J-T. Klein, Ulm (DE)
M. Oelke, Gronau (DE)
A. Miernik, Freiburg (DE)
M. Ritter, Mannheim (DE)

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

Aims and objectives for Holmium laser lithotripsy:
• The fragmentation effect on artificial stones by the Holmium laser at different laser settings and the importance of the fibre position with respect to the stone,
• The handling of rigid and flexible ureterorenoscopes,
• The importance and influence of the irrigation management.
ESU/ERUS Hands-on Training Course in Robotic surgery - Introduction
Sponsored by 3D SYSTEMS SIMBIONIX, MIMIC, INTUITIVE SURGICAL

Sunday 18 March
14:45 - 16:15

Location: Yellow Area, Room 5 (Level 0)
Chair: W.M. Brinkman, Rotterdam (NL)
Tutor: I.C. Acar, Ankara (TR)

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

Improve your robotic surgery skills in the following areas:
• Endowrist manipulation
• Camera Control
• 3rd Arm Control
• Needle Placement and Driving
• Suturing and Knot Tying
ESU Hands-on Training Course in Non-technical skills in surgery
Sponsored by ROCHE

Sunday 18 March
14:00 - 16:00

Location: Yellow Area, Iglo

Chairs: M. Shabbir, Wembley Middlesex (GB)
K. Ahmed, London (GB)

Tutors: To be confirmed
To be confirmed
To be confirmed
To be confirmed
To be confirmed
To be confirmed
To be confirmed

Aims and objectives of this session
The operating room is a complex and highly stressful environment that requires interaction between a large team to achieve successful outcomes for the patients. This requires not only effective procedure-specific technical skills, but also additionally a range of non-technical skills. Non-technical skills are defined as skills unrelated to the technical completion of surgical procedures. They include decision-making, team-working, communication and leadership skills.

The importance of non-technical skills is often overlooked but they are unfortunately a major cause of surgical error. Like technical skills, which are acquired over many years of practice and training, non-technical skills are not innate traits and must also be developed through training and experience.

This course will serve to introduce practicing urologists to the concept of non-technical skills using an interactive full immersion simulation environment, developed at Imperial College London, whilst undertaking common scenarios in endoscopic urological surgery. Participants will be evaluated by experts in surgical education and provided individual feedback with view for further self-improvement.

Supporting faculty:
N. Raison, London (GB)
A. Aydin, London (GB)
N. Khan, London (GB)
C. Lovegrove, Perth (GB)
Emerging techniques in robotic renal surgery

Video Session 08

Sunday 18 March
15:45 - 17:15

**Location:** Green Area, eURO Auditorium (Level 0)

**Chairs:** B.J. Challacombe, London (GB)
M. Musquera Felip, Barcelona (ES)
C-C. Abbou, Vincennes (FR)

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

V56

**Right renal tumor with inferior vena cava tumor thrombus: Robot-assisted approach**

By: Mota Filho F.H.A., Pérès Y.P., Silvano F., Hoepfnner J.L.
Clinique Saint Augustin, Dept. of Urology, Bordeaux, France

V57

**Robot-assisted nephrectomy and IVC thrombectomy in the treatment of renal cell carcinoma**

By: Juárez Del Dago Anaya P., Gaston R., Cuadros Rivera V., Llanes González L., Reinoso J., Fernández Del Álamo J., Gomez Sancha F.
1Gabinete de Urología y Andrología, Dept. of Urology, Las Palmas de Gran Canaria, Spain,
2ICUA - Clinica CEMTRO, Dept. of Urology, Madrid, Spain

V58

**ICG marked off-clamp robotic partial nephrectomy for endophytic renal tumors: Proof of concept and initial series**

By: Simone G., Misuraca L., Tuderti G., Ferriero M., Minisola F., Vallati G., Pizzi G., Guaglianone S., Gallucci M.
1Regina Elena National Cancer Institute, Dept. of Urology, Rome, Italy,
2Regina Elena National Cancer Institute, Dept. of Radiology, Rome, Italy

V59

**Robot-assisted partial nephrectomy with enucleative resection strategy for highly complex renal masses: Results from a high-volume referral cancer centre**

University of Florence, Dept. of Urology, Florence, Italy

V61

**Robot-assisted laparoscopic tumornephrectomy and cavotomy for right-sided renal tumors with caval tumorthrombi**

By: Adank J-P., Zimmermann M., Fischer B., Umbeh M., Müntener M.
Stadtspital Triemli Zürich, Dept. of Urology, Zurich, Switzerland
### V60

**3D augmented reality to maximize the efficacy of fluorescence guided selective clamping during robot assisted partial nephrectomy**

By: [Porpiglia F.](#), [Bertolo R.](#), [Amparore D.](#), [Checcucci E.](#), [Fiori C.](#)

San Luigi Gonzaga Hospital, Dept. of Urology, Orbassano, Italy

### V62

**3D-modeling for vascular anatomy reconstruction before robotic partial nephrectomy**


1. Sant'Orsola-Malpighi Hospital - University of Bologna, Dept. of Urology, Bologna, Italy
2. University of Bologna, Dept. of Bioengineering, Bologna, Italy
Minimally invasive surgical options for benign prostatic obstruction relief: Tailored surgery for reduced morbidity?
Poster Session 53

Sunday 18 March
15:45 - 17:15

Location: Green Area, Room 1 (Level 0)
Chairs: T.R.W. Herrmann, Hanover (DE)
        H. Woo, Sydney (AU)
        K. Zorn, Montreal (CA)

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.

* 716

The WATER study clinical results – a phase III blinded randomized trial of Aquablation vs. TURP with blinded outcome assessment for moderate-to-severe LUTS in men with BPH

By: Roehrborn C. 1, Gilling P. 2
1UT Southwestern Medical Center, Dept. of Urology, Dallas, United States of America,
2Tauranga Hospital, Bay of Plenty District Health Board, Tauranga, New Zealand

717

BPH related bladder outlet obstruction treatment with MediTate® temporary implantable nitinol device (TIND): 3 years follow up results

San Luigi Gonzaga Hospital, Dept. of Urology, Orbassano, Italy

718

Our experience and actual indications for prostatic artery embolization as an alternative treatment for lower urinary tract symptoms

By: Secco S. 1, Barbosa F. 2, Di Trapani D. 1, Brambillasca P.M. 2, Barbieri M. 1, Migliorisi C. 2, Napoli G. 1, Vercelli R. 2, Solcia M. 2, Petralia G. 1, Strada E. 1, Bocciardi A. 1, Rampoldi A. 2, Galfano A. 1
1ASST Grande Ospedale Metropolitano Niguarda, Dept. of Urology, Milan, Italy, 2ASST Grande Ospedale Metropolitano Niguarda, Dept. of Interventional Radiology, Milan, Italy

719

Minimal invasive simple prostatectomy: Analysis of 207 cases

1Hospital Universitario Nuestra Señora La Candelaria, Urology Department, Santa Cruz de Tenerife, Canary Islands, Spain, 2Hospital General Universitario Reina Sofía, Urology Department, Murcia, Spain, 3Complejo Hospitalario de Pontevedra, Urology Department, Pontevedra, Galicia, Spain
<table>
<thead>
<tr>
<th>Session 720</th>
<th>Sexual function after TUEB and HoLEP in men with prostate size greater than 80 ml: Results of 9 month follow-up, prospective study</th>
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<tbody>
<tr>
<td>By: Obidniak V., Popov S., Orlov I., Bayramov K., Sushina I., Malevich S., Viazovtsev P., Grin E.</td>
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<tr>
<td>St Petersburg Clinical Hospital Named After St Luka, Dept. of Urology, St Petersburg, Russia</td>
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<tr>
<th>Session 721</th>
<th>Predictors of response to the prostatic urethral lift (PUL) treatment</th>
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<tr>
<td>By: Gratzke C., Barkin J., Roehrborn C.</td>
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<tr>
<td>1Ludwig Maximilians University, Dept. of Urology, Munich, Germany, 2Humber River Hospita, Toronto Urology Clinical Study Group, Toronto, Canada, 3University of Texas Southwestern Medical Center, Dept. of Urology, Dallas, United States of America</td>
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<tr>
<th>Session 722</th>
<th>A real world single office experience with the Rezum radio frequency water vapor thermal therapy system for benign prostatic hyperplasia</th>
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<tbody>
<tr>
<td>By: Mollengarden D., Goldberg K., Wong D., Roehrborn C.</td>
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<tr>
<td>UT Southwestern Medical Center, Dept. of Urology, Dallas, United States of America</td>
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<tr>
<th>Session 723</th>
<th>Real world study of the Prostatic Urethral Lift for BPH</th>
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<tr>
<td>By: Barber N., Gange S., Walter P., Eure G., Grier D.</td>
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<tr>
<td>1Frimley Park Hospital, Dept. of Urology, Camberley, United Kingdom, 2Summit Urology Group, Dept. of Urology, Salt Lake City, United States of America, 3Western NY Urology Associates, Dept. of Urology, Cheektowaga, United States of America, 4Urology of Virginia, Dept. of Urology, Virginia Beach, United States of America, 5Sound Urological Associates, Dept. of Urology, Las Vegas, United States of America</td>
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<th>Session 724</th>
<th>Ejaculation-preserving Greenlight photovaporization: Short- and long term results</th>
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<tr>
<td>By: Doizi S., Lukacs B.</td>
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<tr>
<td>Tenon Hospital, Assistance-Publique Hôpitaux de Paris, Pierre et Marie Curie University, Dept. of Urology, Paris, France</td>
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<tr>
<th>Session 725</th>
<th>Reoperation rates and mortality after transurethral and open prostatectomy in a long-term nation-wide analysis: Have we improved over a decade?</th>
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<tbody>
<tr>
<td>By: Eredics K., Wachabauer D., Röthlin F., Madersbacher S., Schauer I.</td>
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<tr>
<td>1Kaiser Franz Josef Hospital, Dept. of Urology, Vienna, Austria, 2Austrian Public Health Institute, Dept. of Statistics, Vienna, Austria, 3Sigmund Freud Private University, Dept. of Urology, Vienna, Austria</td>
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<th>Session 726</th>
<th>Risk of mortality after TUR-P in Denmark: Results from DaPCaR</th>
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<tr>
<td>By: Klemann N., Helgstrand T., Brasso K., Toft B., Vainer B., Iversen P., Røder A.</td>
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</table>
Day-case transurethral resection of the prostate (TURP) is possible for three-quarters of men

By: Kyriazis G., Mbiadjeu D., Lavan L., Austin T., Gormley R., Hodgson D. Portsmouth Hospitals NHS Trust, Dept. of Urology, Portsmouth, United Kingdom

Summary
H. Woo, Sydney (AU)
Non muscle invasive bladder cancer: How to improve surgical and medical management?

Poster Session 54

Sunday 18 March
15:45 - 17:15

Location: Green Area, Room 2 (Level 0)

Chairs: L-M. Krabbe, Münster (DE)
R. Hurle, Bergamo (IT)

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

Results of the phase-I open-label clinical trial SAKK 06/14 assessing safety of intravesical instillation of the recombinant BCG VPM1002BC in patients with non-muscle invasive bladder cancer and previous failure to conventional BCG therapy


1University Hospital Basel, Dept. of Urology, Basel, Switzerland, 2University Hospital Geneva, Dept. of Urology, Geneva, Switzerland, 3University of Basel, Alto Uro AG, Basel, Switzerland, 4Cantonal Hospital Chur, Dept. of Oncology, Chur, Switzerland, 5Vaccine Project Management GmBH, Hannover, Germany, 6Vaccine Project Management GmbH, Hannover, Germany, 7Serum Institute of India, Pune, India, 8University Hospital Basel, Dept. of Clinical Microbiology, Basel, Switzerland, 9Lausanne University Hospital, Division of Immunology and Allergy, Lausanne, Switzerland, 10Swiss Group for Clinical Cancer Research, Bern, Switzerland, 11University Hospital Basel, Dept. of Oncology, Basel, Switzerland

Improved outcome over time in TaG1G2 tumors


1Linköpings Universitet, Dept. of Experimental Medicine, Linköping, Sweden, 2Karolinska Institutet Danderyds Sjukhus, Dept. of Clinical Sciences, Stockholm, Sweden, 3Sahlgrenska Universitetssjukhuset, Dept. of Urology, Dept. of Clinical Sciences, Gothenburg, Sweden, 4Karolinska Institutet, Dept. of Molecular Medicine and Surgery, Stockholm, Sweden, 5Umeå Universitet, Dept. of Surgical and Perioperative Science, Urology and Andrology, Umeå, Sweden, 6Karolinska Institutet, Dept. of Oncology Pathology, Stockholm, Sweden, 7Uppsala Universitet, Dept. of Surgical Sciences, Uppsala, Sweden, 8Lunds Universitet, Translational Medicine, Lund, Sweden

Performance evaluation of bladder EpiCheckTM for NMIBC monitoring: European multi-center pivotal study
Performance of bladder wash cytology during surveillance of non-muscle-invasive bladder cancer: Analysis in a contemporary patient cohort

By: Kranzbühler B., Bieri U., Poyet C., Sulser T., Hermanns T.
University Hospital Zürich, Dept. of Urology, Zürich, Switzerland

Oncofid-P-B (paclitaxel-hyaluronic acid) in the intravesical therapy of patients affected by primary or recurrent Ta G1-G2 papillary cancer of the bladder. A phase II marker lesion study

By: Bassi P.F., 1 Racioppi M., 1 Palermo G., 1 Selli C., 2 Battaglia M., 3 Gontero P., 4 Simeone C., 5 Eisendhardt A., 6 Vom Dorp F., 7 Neisius A., 8 Arjona M.F., 9 Castro Diaz D., 10 Ramirez Backhaus M., 11 Moreno Sierra J., 12 Llorente C., 13 Nohales Taurines G., 14 Giordan N., 15 Marinello A.
1 A. Gemelli Foundation Hospital - Catholic University of Sacred Heart, Dept. of Urology, Rome, Italy,
2 Azienda Ospedaliera Universitaria di Pisa, Dept. of Urology, Pisa, Italy,
3 Ospedale consorziale Policlinico di Bari, Dept. of Urology, Bari, Italy,
4 Ospedale Città della Salute e della Scienza di Torino, Dept. of Urology, Turin, Italy,
5 Spedali Civili di Brescia, Dept. of Urology, Brescia, Italy,
6 Praxisklinik urologie Rhein-Rurh, Dept. of Urology, Mülheim, Germany,
7 Klinik und Poliklinik fur Urologie Kinderurologie und urologische Onkologie Universitatsklinikum, Dept. of Urology, Essen, Germany,
8 Urologische Klinik und Poliklinik Universitätsmedizin der Johannes Gutenberg-Universität, Dept. of Urology, Mainz, Germany,
9 Hospital del Henares, Dept. of Urology, Madrid, Spain,
10 Hospital La Laguna, Dept. of Urology, Santa Cruz de Tenerife, Spain,
11 Instituto Valenciano de Oncologia, Dept. of Urology, Valencia, Spain,
12 Hospital clínico San Carlos, Dept. of Urology, Madrid, Spain,
13 Hospital Universitario Fundacion Alcorcon, Dept. of Urology, Madrid, Spain,
14 Hospital del Mar, Dept. of Urology, Barcelona, Spain,
15 Fidia Pharma Group, Dept. of Pharmaceuticals, Abano Terme, Italy

Early versus delayed radical cystectomy for clinical T1 bladder cancer

Keck School of Medicine, University of Southern California, USC Institute of Urology, Los Angeles, United States of America

Increasing incidence and more active therapy of patients with bladder cancer in Sweden: A population based registry study
Continuous saline bladder irrigation after transurethral resection is an alternative prophylactic strategy for the patients with non-muscle-invasive bladder cancer

By: Onishi T. 1 , Shibahara T. 1 , Sekito S. 1 , Sasaki T. 2 , Uchida K. 3

1Ise Red cross hospital, Dept. of Urology, Ise, Japan, 2Mie University, Dept. of Urology, Tsu, Japan, 3Mie University, Dept. of Pathology, Tsu, Japan

Results of CALIBER: A phase II randomised feasibility trial of chemoablation versus surgical management in low risk non-muscle invasive bladder cancer


1Royal Surrey County Hospital, Dept. of Urology, Guildford, United Kingdom, 2James Cook University Hospital, Dept. of Urology, Middlesbrough, United Kingdom, 3University Hospitals of Leicester NHS Trust, Clinical Sciences Unit, Leicester, United Kingdom, 4University College London Hospital, Dept. of Oncology, London, United Kingdom, 5Consumer Representative, Hampshire, United Kingdom, 6University of Sheffield, Academic Urology Unit, Sheffield, United Kingdom, 7Gloucestershire Hospitals NHS Foundation Trust, Dept. of Urology, Cheltenham, United Kingdom, 8University College London, UCL Cancer Institute, London, United Kingdom, 9St James's University Hospital, Leeds Institute of Cancer and Pathology, Leeds, United Kingdom, 10Royal Devon and Exeter NHS Foundation Trust, Exeter Surgical Health Services Research Unit, Exeter, United Kingdom, 11The Royal Wolverhampton Hospitals NHS Trust, Dept. of Urology, Wolverhampton, United Kingdom, 12Medway NHS Trust, Dept. of Urology, Gillingham, United Kingdom, 13Institute of Cancer Research, Clinical Trials and Statistics Unit, London, United Kingdom

Long-term follow-up in high risk non muscle invasive bladder cancer (NMIBC) “en-bloc” resection


Istituto Clinico Humanitas IRCCS, Dept. of Urology, Rozzano, Italy

ElectroMotive drug administration (EMDA) of mitomycin C as first line salvage therapy in high risk “BCG-failure” non muscle invasive bladder cancer: 3 years
followup outcomes

By: Di Gianfrancesco L. , Racioppi M. , Ragonese M. , Palermo G. , Lenci N. , Sacco E. , Bassi P.F.
Catholic University of the Sacred Heart, Dept. of Surgery, Rome, Italy

739

Is a biopsy from the tumor base after TURBT required?

E. Wolfson Medical Center, The Sackler Faculty of Medicine Tel-Aviv University, Dept. of Urologic Surgery, Holon, Israel

740

Day case primary transurethral resection of bladder tumour (TURBT) as standard protocol in a single UK centre. Should this be the new standard?

By: Austin T. , Menzies-Wilson R. , Robinson R. , Forshaw C. , Wilby D.
Queen Alexandra Hospital, Dept. of Urology, Portsmouth, United Kingdom

741

Discharge of low risk non muscle invasive bladder cancer after one year: Results of a national survey of the adoption of the NICE bladder cancer guidelines recommendations in the UK

By: Mostafid H. 1 , Malde S. 2 , Mir-Kohler A. 2 , Bagnall P. 3 , Taylor J. 4 , Cresswell J. 5 , Catto J 6
1 Royal Surrey County Hospital, Dept. of Urology, Guildford, United Kingdom, 2 Guy’s Hospital, Dept. of Urology, London, United Kingdom, 3 Northumbria Healthcare NHS Foundation Trust, Dept. of Urology, Newcastle, United Kingdom, 4 Salford Royal Foundation Trust, Dept. of Urology, Manchester, United Kingdom, 5 James Cook University Hospital, Dept. of Urology, Middlesbrough, United Kingdom, 6 Royal Hallamshire Hospital, Dept. of Urology, Sheffield, United Kingdom

742

Pathological substaging of pT1 urothelial bladder carcinoma is associated with tumor progression

By: Jeandin E. 1 , Dupont A. 2 , Tille J-C. 2 , Hauser J. 1 , Tran S-N. 1 , Regusci S. 1 , De Gorski A. 1 , Iselin C. 1 , Wirth G.J. 1
1 Hôpitaux Universitaires de Genève, Dept. of Urology, Geneva, Switzerland, 2 Hôpitaux Universitaires de Genève, Dept. of Pathology, Geneva, Switzerland
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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Patient (pt) reported outcomes (PROs) in SPARTAN, a phase 3, double-blind, randomized study of apalutamide (APA) plus androgen deprivation therapy (ADT) vs placebo (PBO) plus ADT in men with nonmetastatic castration-resistant prostate cancer (nmCRPC)

By: Saad F. ¹, Small E. ², Hadaschik B. ³, Graff J. ⁴, Mainwaring P. ⁵, McQuarrie K. ⁶, Li S. ⁷, Lawson J. ⁸, Lopez-Gitlitz A. ⁹, Smith M. ¹⁰

¹University of Montréal Health Center, Dept. of Urology, Montréal, Canada, ²Helen Diller Family Comprehensive Cancer Center, Dept. of Medicine, San Francisco, United States of America, ³University of Duisburg-Essen, Dept. of Urology, Essen, Germany, ⁴Oregon Health & Science University, Knight Cancer Institute, Portland, United States of America, ⁵Canossa Private Hospital, Medical Oncology, Brisbane, Australia, ⁶Janssen Global Services, Dept. of Urology, Horsham, United States of America, ⁷Janssen Research & Development, Clinical Biostats, Spring House, United States of America, ⁸Janssen Research & Development, Dept. of Oncology, Raritan, United States of America, ⁹Janssen Research & Development, Clinical Oncology, Los Angeles, United States of America, ¹⁰Massachusetts General Hospital Cancer Center, Dept. of Hematology, Boston, United States of America

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Phase 3 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, Pastisís S. ⁵, Queimadelos A. ⁶, Robertson C. ⁷

¹CHLC-Hospital S.José, Dept. of Urology, Lisbon, Portugal, ²CUI MED A Saint Michal Hospital, Dept. of Urology, Bratislava, Slovakia, ³Jessenius 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 Strathclyde, Dept. of Urology, Glasgow, United Kingdom

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Decline in serum androgens and survival in metastatic castration resistant prostate cancer (MCRPC) patients treated with docetaxel and prednisone: Results from CALGB 90401 (alliance)
Radical prostatectomy with combined chemo-hormonal therapy in prostate cancer patients with lymph node metastases

By: Nyushko K.M., Alekseev B., Ustinova T., Paichadze A., Kaprin A.
1P.A. Herzen Moscow Oncological Research Institute, Dept. of Urology, Moscow, Russia, 2P.A. Herzen Moscow Oncological Research Institute, Dept. of Oncology, Moscow, Russia, 3P.A. Herzen Moscow Oncological Research Institute, Dept. of Chemotherapy, Moscow, Russia

Androgen deprivation therapy for prostate cancer and risk of dementia

1Höglandssjukhuset, Dept. of Urology, Eksjö, Sweden, 2Uppsala University Hospital, Regional Cancer Centre, Uppsala, Sweden, 3King’s College London, School of Cancer and Pharmaceutical Sciences, Dept. of Translational Oncology & Urology Research (TOUR), London, United Kingdom, 4University of Gothenburg, Sahlgrenska Academy, Dept. of Urology, Gothenburg, Sweden, 5Karolinska Institute, Dept. of Clinical Geriatrics - NVS, Stockholm, Sweden, 6Uppsala University, Dept. of Surgical Sciences, Uppsala, Sweden, 7Karolinska Institute, Dept. of Clinical Science Intervention and Technology (CLINTEC), Stockholm, Sweden

Four vs ten months of induction ADT for intermittent therapy (the FIT trial): A prospective CURC randomized trial

By: Klotz L., Loblaw A., Siemens R., Ouellette P., Kapoor A., Saad F.
1Sunnybrook HSC, University of Toronto, Dept. of Urology, Toronto, Canada, 2Sunnybrook HSC, University of Toronto, Dept. of Radiation Oncology, Toronto, Canada, 3Queen’s University, Dept. of Urology, Kingston, Canada, 4Granby Hospital, Dept. of Urology, Granby, Canada, 5McMaster University, Dept. of Urology, Hamilton, Canada, 6Université de Montréal, Dept. of Urology, Montreal, Canada

Factors associated with testosterone recovery after androgen deprivation therapy in patients with prostate cancer

Asan Medical Center University of Ulsan College of Medicine, Dept. of Urology, Seoul, Korea, South

750  Non-alcoholic fatty liver disease in men undergoing androgen deprivation therapy for prostate cancer

By: Gild P. 1, Cole A. 2, Von Landenberg N. 3, Sun M. 4, Mucci L. 5, Chun F. 6, Nguyen P. 7, Kibel A. 8, Trinh Q-D. 2

1University Medical Center Hamburg-Eppendorf, Dept. of Urology, Hamburg, Germany, 2Brigham And Women's Hospital, Harvard Medical School, Division of Urological Surgery and Center for Surgery and Public Health, Boston, United States of America, 3Marien Hospital Herne, Ruhr-University Bochum, Dept. of Urology, Bochum, United States of America, 4Dana Farber Cancer Institute, Harvard Medical School, Dept. of Medical Oncology, Boston, United States of America, 5Harvard T.H. Chan School of Public Health, Dept. of Epidemiology, Boston, United States of America, 6University Hospital Frankfurt, Dept. of Urology, Frankfurt, Germany, 7Dana-Farber Cancer Institute, Harvard Medical School, Dept. of Radiation Oncology, Boston, United States of America, 8Brigham And Women's Hospital, Harvard Medical School, Division of Urological Surgery, Boston, United States of America

751  Impact of clinical trial participation on survival in patients with castration-resistant prostate cancer: A multi-center analysis

By: Koo K.C. 1, Lee J.S. 2, Kim J.W. 1, Kang S.K. 1, Lee K.S. 1, Kim D.K. 1, Ha Y.S. 1, Cho K.S. 1, Rha K.H. 2, Hong S.J. 2, Chung B.H. 1

1Yonsei University College of Medicine, Gangnam Severance Hospital, Dept. of Urology, Seoul, Korea, South, 2Yonsei University College of Medicine, Shinchon Severance Hospital, Dept. of Urology, Seoul, Korea, South

752  New-onset diabetes after androgen-deprivation therapy for prostate cancer: A nationwide propensity score-matched four-year longitudinal cohort study

By: Jhan J.H., Yeh H.C., Chang Y.H., Guu S.J., Wu W.J., Chou Y.H., Li C.C.
Kaohsiung Medical University, Dept. of Urology, Kaohsiung, Taiwan

753  Assessment of androgen deprivation therapy efficacy is more reliable with luteinizing-hormone measurement: Need to change the concept?

By: Cuadras M. 1, Miret E. 1, López R. 1, Comas I. 2, Ferrer R. 2, Regis L. 1, Celma A. 1, Planas J. 1, Placer J. 1, Morote J. 1

1Vall d’Hebron University Hospital, Dept. of Urology, Barcelona, Spain, 2Vall d’Hebron University Hospital, Dept. of Biochemistry, Barcelona, Spain

754  Androgen deprivation therapy increased the risk of pulmonary embolism in patients with prostate cancer - from 24,464 patients, Taiwan National Health Insurance Research Database

By: Hong J.H., Lu Y-C., Huang C-Y., Pu Y-S.
National Taiwan University Hospital, Dept. of Urology, Taipei, Taiwan
Anti-androgen monotherapy versus GnRH agonists in men with non-metastatic prostate cancer

By: Thomsen F.B.¹, Bosco C.², Garmo H.², Adolfsson J.³, Hammar N.⁴, Stattin P.⁵, Van Hemelrijck M.²

¹Rigshospitalet Copenhagen Prostate Cancer Center, Dept. of Urology, Copenhagen, Denmark, ²King’s College London, Dept. of Translational Oncology & Urology Research (TOUR), London, United Kingdom, ³Karolinska Institutet, Dept. of CLINTEC, Stockholm, Sweden, ⁴Karolinska Institutet, Dept. of Epidemiology, Stockholm, Sweden, ⁵Uppsala University Hospital, Dept. of Surgical Sciences, Uppsala, Sweden

Summary
A.S. Merseburger, Lübeck (DE)
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Chairs: S.S. Minhas, London (GB)  
N. Sofikitis, Ioannina (GR) |
| 756 | The differentiation of non-obstructive azoospermic patients’ germ cells using supernatant product of adipose tissue-derived mesenchymal stem cells and three-dimensional structure | By: Pourmand G. 1, Mehrsay A. 1, Fazaeli H. 2, Kalhor N. 2, Tabatabaii Qomi R. 2  
1Sina Hospital, Dept. of Urology, Tehran, Iran, 2Academic Center of Education, Culture and Research, Highly specialized jihad daneshgahi infertility treatment center, Tehran, Iran |
| 757 | Male reproductive health is a key determinant of unhealthy aging: Results from a longitudinal cohort study | By: Ventimiglia E. 1, Capogrosso P. 1, Cazzaniga W. 1, Boeri L. 1, Pederzoli F. 1, Alfano M. 1, Chierigo F. 1, Frego N. 1, Pozzi E. 1, Abbate C. 1, Dehò F. 1, Montanari E. 2, Gaboardi F. 1, Mirone V. 3, Montorsì F. 1, Salonia A. 1  
1San Raffaele Hospital University Vita-salute San Raffaele, Dept. of Experimental Oncology, Unit of Urology, Milan, Italy, 2IRCCS Fondazione Ca’ Granda – Ospedale Maggiore Policlinico, University of Milan, Dept. of Urology, Milan, Italy, 3School of Medicine and Surgery, University of Naples Federico II, Dept. of Urology, Naples, Italy |
| 758 | SLC9A3 is a novel pathogenic gene in Taiwanese males with congenital bilateral absence of the vas deferens | By: Wu Y-N. 1, Lin Y-H. 2, Chiang H-S. 2  
1Fu Jen Catholic University, School of Medicine, New Taipei City, Taiwan, 2Fu Jen Catholic University, Graduate Institute of Biomedical and Pharmaceutical Science, New Taipei City, Taiwan |
<p>| 759 | Defining the inter-relationship between seminal reactive oxygen species, DNA fragmentation index (DFI), polymorphonuclear leucocytes (PMN) and oxidative stress in sperm | By: Minhas S.S. 1, Yap T. 2, Almekaty K. 1, Ramsay J. 3, Víceñas-Morton A.J. 2, Homa S. 4 |</p>
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<td>Molecular reasons for male factor subfertility: The impact of epigenetic tagging of retrotransposable elements in sperm chromatin</td>
<td>Gies S., Ozturk N., Rogenhofer N., Steger K., Kuerschner S., Schuppe H-C., Schagdarsurengin U.</td>
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<td>When to perform semen culture in asymptomatic infertile men? Hints from a cross sectional study</td>
<td>Ventimiglia E., Pederzoli F., Capogrosso P., Cazzaniga W., Boeri L., Alfano M., Chierigo F., Frego N., Pozzi E., Abbate C., Dehò F., Montanari E., Gaboardi F., Mirone V., Montorsi F., Salonia A.</td>
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<td>764</td>
<td>Y-chromosome abnormalities in men with sub-fertility. An analysis of the frequency of abnormalities and determination of a threshold sperm concentration for genetic</td>
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Peak retrograde flow in varicoceles influences sperm DNA integrity in adolescents

By: De Win G.1, Coeck E.2, Stuer S.2, De Wachter S.1, De Neubourg D.3, Punjabi U.3
1University Hospital Antwerp and University of Antwerp, Dept. of Urology and Faculty of Health Sciences, Antwerp, Belgium, 2University of Antwerp, Faculty of Health Sciences, Antwerp, Belgium, 3University Hospital Antwerp and Antwerp University, Dept. of Fertility Disorders and Faculty of Health Sciences, Antwerp, Belgium

The impact of semen infections over sperm parameters in primary infertile men: Results of a real-life, cross-sectional study

By: Pederzoli F.1, Ventimiglia E.1, Capogrosso P.1, Boeri L.2, Cazzaniga W.1, Alfano M.1, Chierigo F.1, Pozzi E.1, Frego N.1, Abbate C.1, Dehò F.1, Montanari E.3, Gaboardi F.1, Montorsi F.1, Salonia A.1
1San Raffaele Hospital University, Dept. of Experimental Oncology, Milan, Italy, 2University of Milan, Dept. of Urology, Milan, Italy, 3IRCCS Fondazione Ca’ Granda, Dept. of Urology, Milan, Italy, 4School of Medicine and Surgery, Dept. of Urology, Naples, Italy

Prediabetes in primary infertile men: Results from a cross-sectional study

By: Boeri L.1, Capogrosso P.1, Ventimiglia E.1, Pederzoli F.1, Cazzaniga W.1, Frego N.1, Chierigo F.1, Pozzi E.1, Alfano M.1, Dehò F.1, Montanari E.2, Gaboardi F.1, Montorsi F.1, Salonia A.4
1San Raffaele Hospital University Vita-salute San Raffaele, Division of Experimental Oncology, Unit of Urology, Milan, Italy, 2IRCCS Fondazione Ca’ Granda - Maggiore Policlinico Hospital, Dept. of Urology, Milan, Italy, 3School of Medicine and Surgery, University of Naples Federico II, Dept. of Urology, Naples, Italy, 4San Raffaele Hospital University Vita-salute San Raffaele, Division of Experimental Oncology, Unit of Urology, Milan, Italy

Precise assessment of underlying etiological factors in infertile men: Results from a cross-sectional study

By: Pederzoli F.1, Ventimiglia E.1, Chierigo F.1, Capogrosso P.1, Boeri L.1, Cazzaniga W.1, Alfano M.1, Frego N.1, Pozzi E.1, Abbate C.1, Dehò F.1, Montanari E.2, Gaboardi F.1, Montorsi F.1, Salonia A.1
1San Raffaele Hospital University Vita-salute San Raffaele, Division of Experimental Oncology, Unit of Urology, Milan, Italy, 2IRCCS Fondazione Ca’ Granda - Maggiore Policlinico Hospital, Dept. of Urology, Milan, Italy, 3School of Medicine and Surgery, University of Naples Federico II, Dept. of Urology, Naples, Italy
Does antioxidant therapy (AT) may improve fresh-TESA/ICSI cycle outcome in patients with obstructive azoospermia (OA)?

By: Korshunov M. ¹, Korshunova E. ², Darenkov S. ¹

¹Central Medical Academy Office of The President of Russian Federation, Dept. of Urology, Moscow, Russia, ²National Medical Research Centre of Radiology, Dept. of Urology, Moscow, Russia
## The ideal of minimal-invasive stone treatment: ESWL

**Poster Session 57**

**Sunday 18 March**

**15:45 - 17:15**

**Location:** Red Area, Room 3 (Level 0)

**Chairs:**
- A. Petřík, Hluboka nad Vltavou (CZ)
- B. Somani, Southampton (GB)
- H-M. Fritsche, München (DE)

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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<td>770</td>
<td>A novel accurate method of predicting the disintegration of proximal ureteral stones by extracorporeal shock-wave lithotripsy: The CT texture analysis</td>
<td>Yang X., Cong L., Yuchao L., Shaogang W., Dirie N.I., Qing W.</td>
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<td></td>
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<td>1Tongji Hospital, Tongji Medical College, Huazhong University of Science and Technology, Dept. of Urology, Wuhan, China, 2Tongji Hospital, Tongji Medical College, Huazhong University of Science and Technology, Dept. of Urology, Wuhan, China</td>
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<td>772</td>
<td>Automatic measurement of mean stone density by three-dimensional stone images for predicting shock wave lithotripsy success</td>
<td>Yamashita S., Kohjimoto Y., Iwahashi Y., Iguchi T., Iba A., Hara I.</td>
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<td>Wakayama Medical University, Dept. of Urology, Wakayama, Japan</td>
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<td>1Inha University School of Medicine, Dept. of Urology, Incheon, Korea, South, 2Yonsei University College of Medicine, Dept. of Urology, Urological Science Institute, Seoul, Korea, South</td>
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<td>774</td>
<td>Pain tolerance during treatment of urinary stones with ESWL: Factors of influence</td>
<td>Bongers M., Böing-Messing F., Van Roijen H.</td>
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<td>Tilburg University, Dept. of Urology, Tilburg, Netherlands, The</td>
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<td>775</td>
<td>An experimental study of a solid conductive medium for reducing trapped air pockets during extracorporeal shock wave lithotripsy</td>
<td>Chen W., Liou W., Yang Y., Cheng K., Lin Y.</td>
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<td>1St. Joseph Hospital, Division of Urology, Dept. of Surgery, Kaohsiung, Taiwan, 2St.</td>
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<td>776</td>
<td>A prospective randomized study to investigate the effect of power ramping on treatment outcome in extracorporeal shockwave lithotripsy of renal calculi</td>
<td>Ng C.F., Teoh J.Y.C., Yee C.H., Chiu P., Li C., Leung S., Lau B., Wong K.T., Chu W.</td>
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<td>777</td>
<td>Prospective and randomized study of the effects of shock wave lithotripsy and retrograde intrarenal surgery on renal function</td>
<td>Turan T., İşman F.K., Danacioglu Y.O., Sendogan F., Kahraman Genç N., Eflioglu O., Ucar T., Atis R.G., Caskurlu T., Yildirim A.</td>
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<td>778</td>
<td>Enzymes activities after extracorporeal shockwave lithotripsy (ESWL) in renal stone patients</td>
<td>Hiroš M., Hasanbegović M., Sadović S., Selimović M., Kovačević J., Spahović H.</td>
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<td>779</td>
<td>Can we predict the ancillary treatments after extracorporeal shockwave lithotripsy for renal and upper ureteral stones?</td>
<td>Ibrahim A., Elatreisy A., Ganpule A., Khalaf I., Desai M.</td>
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<td>780</td>
<td>Is early extracorporeal shock wave lithotripsy useful for colic patients with ureteral stones? A guide to effective early extracorporeal shock wave lithotripsy</td>
<td>Kim K., Kwang Taeck K., Jin Kyu O., Kyung Jin C., Tae Beom K., Khae Hawm K., Han J., Sang Jin Y.</td>
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<td>781</td>
<td>Comparison of dual shockwave lithotripsy effectiveness in patients with and without indwelling stents</td>
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**Long-term risk of new-onset diabetes did not increase after shock wave lithotripsy for urolithiasis: A national representative cohort in Taiwan**

By: Tsai C-Y. 1, Huang S.W. 2

1 Far Eastern Memorial Hospital, Dept. of Urology, Dept. of Surgery, New Taipei, Taiwan,
2 National Taiwan University Hospital Yun-lin Branch, Dept. of Urology, Yun-lin, Taiwan

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**Comparative analysis of lost productivity and costs, between extracorporeal lithotripsy treatment and endoscopic treatment for reno-ureteral lithiasis less than 2 cm**

By: Perez Ardavin J. 1, Lorenzo L. 1, Caballer Tarazona V. 2, Budia A. 1, Bahilo P. 1, López-Acón J.D. 1, Ordaz D.G. 1, Trassierra M. 1, Sánchez González J.V. 1, Vivas Consuelo D. 2, Boronat F. 1

1 Hospital Universitari i Politècnic La Fe, Dept. of Urology, Valencia, Spain, 2 Universidad Politécnica de Valencia, Center for Health Economics and Management, Valencia, Spain

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**SWL versus RIRS, medium term event comparison on CIRFs**


University and Politecnic Hospital La Fe, Dept. of Urology, Valencia, Spain

**771**

**3D texture analysis in abdominal CT aided by machine learning classifiers predicts shock wave lithotripsy success**

By: Mannil M. 1, Von Spiczak J. 1, Hermanns T. 2, Alkadhi H. 1, Fankhauser C. 2

1 University of Zurich, Dept. of Radiology, Zurich, Switzerland, 2 University of Zurich, Dept. of Urology, Zurich, Switzerland
**Testis cancer - quality of care makes the difference**

**Poster Session 58**

| **Sunday 18 March** | **Location:** Blue Area, Room 1 (Level 0) |
| **15:45 - 17:15** | **Chairs:** J. Oldenburg, Lørenskog (NO)  
D. Pfister, Cologne (DE) |

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.

* **785**

**Risk factors for malignancy in patients with Leydig cell tumors: A systematic review and meta-analysis of 1375 patients**

By: Fankhauser C.¹, Grogg J.¹, Bode P.², Sulser T.¹, Beyer J.³, Hermanns T.¹  
¹University of Zurich, Dept. of Urology, Zurich, Switzerland, ²University of Zurich, Dept. of Pathology, Zurich, Switzerland, ³University of Zurich, Dept. of Oncology, Zurich, Switzerland

* **786**

**Metastasis in seminomatous germ cell tumours is characterized by a specific miRNA pattern**

By: Ernst S.¹, Heinzelmann J.¹, Hölters S.¹, Weber G.², Bohle R.M.³, Stöckle M.¹, Junker K.¹, Heinzelbecker J.¹  
¹Saarland University, Dept. of Urology and Pediatric Urology, Homburg, Germany, ²Gemeinschaftspraxis für Humangenetik, Gemeinschaftspraxis für Humangenetik, Homburg, Germany, ³Saarland University, Dept. of Pathology, Homburg, Germany

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**Increased tumor vascularization is associated with amount of immune competent PD-1 positive cells in testicular cancer**

By: Jennewein L.¹, Bartsch G.², Gust K.³, Roos F.⁴, Khoder W.⁴, Vallo S.⁴, Blaheta R.⁴, Kvasnicka H.⁵, Harter P.¹, Mani J.⁴  
¹Goethe University Hospital, Dept. of Neuropathology, Frankfurt, Germany, ²University of Mainz, Dept of Urology, Mainz, Germany, ³Medical University of Vienna, Dept. of Urology, Vienna, Austria, ⁴Goethe University Hospital, Dept. of Urology, Frankfurt, Germany, ⁵Goethe University Hospital, Dept of Pathology, Frankfurt, Germany

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**Time for a change in the management of small testicular masses: Results of a large multicentric retrospective study on testis sparing surgery**

By: Gentile G.¹, Bianchi L.², Rizzo M.³, Falcone M.⁴, Dente D.⁵, Cilletti M.⁶, Franceschelli A.¹, Vagnoni V.¹, Garofalo M.², Schiavina R.², Brunocilla E.², Claps F.³, Liguori G.³, Trombetta C.³, Timpano M.⁷, Rolle L.⁷, Cafarelli A.⁵, Porreca A.⁵

By: Ward K. 1, Almekaty K. 2, Kelly B. 1, Bhandari C. 2, Patel K. 1, Patel P. 1, Shabbir M. 3, Minhas S. 2, Viney R. 1

1University Hospitals Birmingham, Dept. of Urology, Birmingham, United Kingdom,
2University College London Hospitals, Dept. of Andrology, London, United Kingdom,
3Guy's and St Thomas', Dept. of Urology, London, United Kingdom

Pathological and clinical outcomes of minimally invasive retroperitoneal lymph node dissection and single dose carboplatin for clinical stage 2a seminoma

By: Nicol D.L. 1, Huddart R. 2, Hazell S. 3, Sohaib A. 4, Reid A. 5, Mayer E. 6

1Royal Marsden Hospital, Institute of Cancer Research, Dept. of Urology, London, United Kingdom,
2Royal Marsden Hospital, Institute of Cancer Research, Clinical Academic Radiotherapy, London, United Kingdom,
3Royal Marsden Hospital, Gynaecology Unit, London, United Kingdom,
4Royal Marsden Hospital, Dept. of Radiology, London, United Kingdom,
5Royal Marsden Hospital, Dept. of Urology, London, United Kingdom,
6Royal Marsden Hospital, Imperial College, Dept. of Urology, London, United Kingdom

The PRIMETEST trial – interim results of a phase II trial for primary retroperitoneal lymph node dissection (RPLND) in Stage II A/B seminoma patients without adjuvant treatment

By: Lusch A., Große Siemer R., Albers P.
University of Dusseldorf, Medical Faculty, Dept. of Urology, Dusseldorf, Germany

Sarcopenia in patients with testicular cancer undergoing chemotherapy: Prognostic impact of psoas major muscle loss

Okayama University, Dept. of Urology, Okayama, Japan

Centralization tendencies of radical retroperitoneal lymph node dissection (RPLND) for testicular cancer in Germany from 2006 to 2014: Analysis of total population data

By: Groeben C., Koch R., Baunacke M., Wirth M., Huber J.
Medical Faculty Carl Gustav Carus, Dept. of Urology, Dresden, Germany
Experience of a tertiary referral center: Multivisceral approach and complications for post chemotherapy retroperitoneal lymph node dissection (PC-RPLND) in advanced germ cell tumors

By: Lusch A., Große Siemer R., Albers P.  
University of Dusseldorf, Medical Faculty, Dept. of Urology, Dusseldorf, Germany

Effect of number of computed tomography (CT) scans during follow-up (FUP) of patients with clinical stage I (CSI) seminoma: A trial-level meta-analysis

By: Giannatempo P. 1, Raggi D. 1, Tagliaabue E. 2, Catanzaro M. 3, Biasoni D. 3, Torelli T. 3, Stagni S. 3, Nicolai N. 3, Piva L. 3, Salvioni R. 3, Mariani L. 2, Necchi A. 1  
1Fondazione 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

Associations between serum levels of testosterone and luteinising hormone and fatigue, anxiety, depression and sexual functioning in 154 long-term survivors of testicular cancer

By: Skoett J.W. 1, Bandak M. 2, Kreilberg M. 1, Lauritsen J. 2, Daugaard G. 2  
1Copenhagen University Hospital, Rigshospitalet, Dept. of Oncology, Copenhagen, Denmark, 2Copenhagen University Hospital, Rigshospitalet, Dept. of Oncology, Copenhagen, Denmark

Quality of life and long-term toxicities in testicular cancer

By: Ernst S. 1, Kaßmann K. 1, Lehmann J. 2, Cohausz M. 3, Ohlmann C.H. 1, Stöckle M. 1, Heinzelbecker J. 1  
1Saarland University, Dept. of Urology, Homburg, Germany, 2Urologie am Prüner Gang, Dept. of Urology, Kiel, Germany, 3Urologische Gemeinschaftspraxis Münster, Dept. of Urology, Münster, Germany

Summary

D. Pfister, Cologne (DE)
Trials in progress
Poster Session 59

Sunday 18 March
15:45 - 17:15

**Location:** Blue Area, Room 2 (Level 0)

**Chairs:**
- A.S. Bjartell, Malmö (SE)
- G.I. Russo, Catania (IT)
- P. Sooriakumaran, London (GB)

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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**Patient-reported outcomes in bladder cancer; a multicenter randomized controlled trial - a study design**

By: Taarnhoj G.A.\(^1\), Johansen C.\(^2\), Dohn L.H.\(^3\), Lindberg H.\(^3\), Pappot H.\(^1\)

\(^1\)Rigshospitalet, Dept. of Oncology, Copenhagen, Denmark, \(^2\)Danish Cancer Society, Unit of Survivorship, Copenhagen, Denmark, \(^3\)Herlev Hospital, Dept. of Oncology, Herlev, Denmark

### 799

**Phase 2 study of pembrolizumab in patients with bacillus Calmette-Guérin–unresponsive, high-risk, non–muscle-invasive bladder cancer: KEYNOTE-057**

To be confirmed

### 800

**Evaluating safety and efficacy of INCB054828 as adjuvant therapy for molecularly-selected, high-risk patients with urothelial carcinoma (UC): A phase 2 study of the European Association of Urology Research Foundation (EAU-RF)**

By: Necchi A.\(^1\), Perez Gracia J.L.\(^2\), Loriot Y.\(^3\), Witjes W.\(^4\), Montorsi F.\(^5\), Bjartell A.\(^6\), Shariat S.\(^7\)

\(^1\)Fondazione IRCCS Istituto Nazionale dei Tumori, Dept. of Medical Oncology, Milan, Italy, \(^2\)Clinica Universidad de Navarra, Dept. of Medical Oncology, Pamplona, Spain, \(^3\)Gustave Roussy, Dept. of Medicine, Paris, France, \(^4\)European Association of Urology, Research Foundation, Arnhem, Netherlands, The, \(^5\)Vita Salute San Raffaele University, IRCCS San Raffaele Hospital, Urological Research Institute (URI), Milan, Italy, \(^6\)Skane University Hospital, Lund University, Dept. of Urology, Malmo, Sweden, \(^7\)Medical University of Vienna, Dept. of Urology, Vienna, Austria

### 801

**KEYNOTE-361: Phase 3 trial of pembrolizumab ± chemotherapy versus chemotherapy alone in advanced urothelial cancer**

By: Powles T.\(^1\), Loriot Y.\(^2\), Gschwend J.E.\(^3\), Bellmunt J.\(^4\), Gezzi L.\(^5\), Vulsteke C.\(^6\), Abdelsalam M.\(^7\), Gafanov R.\(^8\), Kyun Bae W.\(^9\), Revesz J.\(^10\), Yamamoto Y.\(^11\), Anido U.\(^12\), Su W.\(^13\), Fleming M.\(^14\), Markus M.\(^15\), Feng D.\(^16\), Poehlein C.\(^16\), Alva A.\(^17\)

\(^1\)Barts Cancer Institute, Queen Mary University of London, Centre for Experimental
### 802
**Peculiar: An open label, multicenter, single-arm, phase 2 study of neoadjuvant pembrolizumab (PEM) and epacadostat (EPA), preceding radical cystectomy (Cy), for patients (pts) with muscle-invasive urothelial bladder cancer (MIUBC)**

By: Necchi A.¹, Mariani L.², Anichini A.³, Messina A.⁴, Giannatempo P.¹, Raggi D.¹, Briganti A.⁵, Montorsi F.⁵

1 Fondazione IRCCS Istituto Nazionale dei Tumori, Dept. of Medical Oncology, Milan, Italy, 2 Fondazione IRCCS Istituto Nazionale dei Tumori, Dept. of Clinical Epidemiology and Trials Organization Unit, Milan, Italy, 3 Fondazione IRCCS Istituto Nazionale dei Tumori, Dept. of Human Immunology, Milan, Italy, 4 Fondazione IRCCS Istituto Nazionale dei Tumori, Dept. of Urology, Milan, Italy, 5 Vita Salute San Raffaele University and Urological Research Institute (URI), IRCCS San Raffaele Hospital, Dept. of Urology, Milan, Italy

### 803
**Cabozantinib (CABO) plus durvalumab (DURVA) in patients with advanced and chemotherapy-treated bladder carcinoma, of urothelial and non-urothelial histology: The open-label, single-arm, phase 2 ARCADIA trial**

By: Raggi D.¹, Giannatempo P.¹, Anichini A.², Calareso G.³, Crippa F.⁴, Mariani L.⁵, Necchi A.¹

1 Fondazione IRCCS Istituto Nazionale Dei Tumori, Dept. of Medical Oncology, Milan, Italy, 2 Fondazione IRCCS Istituto Nazionale dei Tumori, Dept. of Human Tumor Immunology, Milan, Italy, 3 Fondazione IRCCS Istituto Nazionale dei Tumori, Dept. of Clinical Epidemiology and Trials Organization Unit, Milan, Italy, 4 Fondazione IRCCS Istituto Nazionale dei Tumori, Nuclear Medicine - PET unit, Milan, Italy, 5 Fondazione IRCCS Istituto Nazionale dei Tumori, Clinical Epidemiology and Trials Organization Unit, Milan, Italy

### 804
**EV-103 Study: A phase 1b dose-escalation and dose-expansion study of enfortumab vedotin in combination with immune checkpoint inhibitor (CPI) therapy for treatment of patients with locally advanced or metastatic urothelial cancer**
Scientific Programme - EAU18 Copenhagen

805

**EV-201 Study: A single-arm, open-label, multicenter study of enfortumab vedotin for treatment of patients with locally advanced or metastatic urothelial cancer who previously received immune checkpoint inhibitor therapy**

By: Rosenberg J. 1, Balar A. 2, O'Donnell P. 3, Heath E. 4, Hahn N. 5, Gartner E. 6, Melhem-Bertrandt A. 7, Petrylak D. 8

1Memorial Sloan Kettering Cancer Center, Dept. of Medicine, New York, United States of America, 2New York University, Cancer Institute, New York, United States of America, 3University of Chicago, Dept. of Medicine, Chicago, United States of America, 4Wayne State University, Karmanos Cancer Institute, Detroit, United States of America, 5Johns Hopkins Medical Center, Dept. of Oncology and Urology, Baltimore, United States of America, 6Seattle Genetics, Dept. Clinical Development, Bothell, United States of America, 7Astellas Pharma, Inc., Dept. Development Medical Sciences, Northbrook, United States of America, 8Yale School of Medicine, Yale Cancer Center, New Haven, United States of America

806

**Cognitive effects of androgen receptor (AR) directed therapies for advanced cancer of the prostate (COGCaP)**

By: Morgans A. 1, Penson D. 2, Du L. 3, Jackson J. 4, Moses K. 2

1Northwestern University Feinberg School of Medicine, Dept. of Medicine, Chicago, United States of America, 2Vanderbilt University Medical Center, Dept. of Urologic Surgery, Nashville, United States of America, 3Vanderbilt University Medical Center, Dept. of Biostatistics, Nashville, United States of America, 4Vanderbilt University Medical Center, Dept. of Medicine, Nashville, United States of America

807

**Early experience of a randomized controlled trial of radical prostatectomy for oligometastatic prostate cancer: Challenges to patient recruitment and effective solutions**

By: Sooriakumaran P. 1, Rajan P. 1, Sridhar A. 1, Khetrapal P. 1, Nathan S. 1, Eden C. 2, Kelly J. 1, Hamdy F. 3, Wilson C. 4

1University College London Hospital, Dept. of Oncology, London, United Kingdom, 2Royal Surrey County Hospital, Dept. of Urology, Guildford, United Kingdom, 3Oxford University Hospital, Dept. of Urology, Oxford, United Kingdom, 4University of Bristol, Dept. of Population Health Sciences, Bristol, United Kingdom
IMbassador250: A phase III trial in patients with metastatic castration-resistant prostate cancer (mCRPC) comparing atezolizumab plus enzalutamide vs enzalutamide alone

By: Gillessen Sommer S., Powles T., Drake C., Rathkopf D., Narayanan S., Green M., Leng N., Schiff C., Sweeney C., Fizazi K.

1Kantonsspital St. Gallen, St. Gallen and University of Bern, Dept. of Oncology and Haematology, Bern, Switzerland, 2Barts Cancer Institute, Queen Mary University of London, Dept. of Experimental Cancer Medicine, London, United Kingdom, 3Herbert Irving Comprehensive Cancer Center, Columbia University Medical Center, Dept. of Genitourinary Oncology, New York, United States of America, 4Memorial Sloan Kettering Cancer Center, Dept. of Genitourinary Oncology, New York, United States of America, 5Genentech, Inc., Dept. of Product Development Oncology, South San Francisco, United States of America, 6Genentech, Inc., Tecentriq GU Program, South San Francisco, United States of America, 7Genentech, Inc., PD Biometrics Biostatistics, South San Francisco, United States of America, 8Dana-Farber Cancer Institute, Lank Center for Genitourinary Oncology, Boston, United States of America, 9Gustave Roussy, Dept. of Cancer Medicine, Villejuif, France

Phase 3, randomized, double-blind trial of pembrolizumab in the adjuvant treatment of renal cell carcinoma (RCC): KEYNOTE-564


1Barts Cancer Institute, Dept of Experimental Cancer Medicine, London, United Kingdom, 2Duke Cancer Center, Dept. of Medical Oncology, Durham, United States of America, 3Macquarie University Hospital, Dept. of Medical Oncology and Clinical Research, Sydney, Australia, 4Texas Oncology Houston Memorial City, Dept. of Medical Oncology, Houston, United States of America, 5St Vincent Frontier Cancer Center, Dept. of Hematology and Oncology, Billings, United States of America, 6Adelaide Cancer Centre, Dept. of Medical Oncology, Kurralta Park, Australia, 7University of Ulsan College of Medicine, Dept. of Oncology and Internal Medicine, Seoul, Korea, South, 8Samsung Medical Center, Dept. of Medicine, Seoul, Korea, South, 9RBHI Ivanovo Regional Oncology Dispensary, Dept. of Medical Oncology, Ivanovo, Russia, 10Taipei Veterans General Hospital, Division of Urology, Taipei City, Taiwan, 11USC Norris Comprehensive Cancer Center, Division of Oncology, Los Angeles, United States of America, 12Merck & Co., Dept. of Medical Oncology, Kenilworth, United States of America, 13Dana-Farber Cancer Institute, Dept. of Oncology, Boston, United States of America

A phase III study of atezolizumab vs placebo as adjuvant therapy in patients with renal cell carcinoma at high risk of recurrence following resection (IMmotion010)

By: Bex A., Pal S., Rini B., Albiges L., Suárez C., Donaldson F., Qiu J., Hashimoto K., Uzzo R.

1Netherlands Cancer Institute, Dept. of Urology, Amsterdam, Netherlands, The, 2City of Hope Comprehensive Cancer Center, Dept. of Medical Oncology & Therapeutics Research, Duarte, United States of America, 3Cleveland Clinic, Dept. of Hematology &
811

Challenges for the application of a novel cell-based therapeutic approach to treat SUI

Universitätsspital Zürich, Dept. of Urology, Zürich, Switzerland
Prostate cancer surgery in high risk patients - experimental?

Poster Session 60

**Sunday 18 March**
**15:45 - 17:15**

**Location:** Blue Area, Room 3 (Level 0)

**Chairs:** X. Cathelineau, Paris (FR)
M. Graefen, Hamburg (DE)
H. Matsuyama, Ube (JP)

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

812 Identification of treatable high risk prostate cancer only by radical prostatectomy - who are good candidates for radical prostatectomy in high risk prostate cancer

By: Nagao K., Mori J., Shimizu K., Kawai Y., Inoue R., Yamamoto Y., Matsumoto H., Matsuyama H.
Graduate School of Medicine, Yamaguchi University, Dept. of Urology, Ube, Japan

813 The influence of tracer injection into the prostate for the detection of lymph node metastases in prostate cancer during robot assisted radical prostatectomy with sentinel node procedure: A phase II randomized comparison

By: Wit E.¹, Kleinjan G.², Donswik M.³, Leeuwen Van F.², Poel Van Der H.¹
¹The Netherlands Cancer Institute - Antoni van Leeuwenhoek hospital, Dept. of Urology, Amsterdam, Netherlands, The,
²Leiden University Medical Center, Interventional Molecular Imaging Laboratory, Leiden, Netherlands, The,
³The Netherlands Cancer Institute - Antoni van Leeuwenhoek hospital, Dept. of Nuclear Medicine, Amsterdam, Netherlands, The

814 Overall survival of high-risk prostate cancer patients who received neoadjuvant chemohormonal therapy followed by radical prostatectomy at a single institution

By: Fujita N., Koie T., Tobisawa Y., Yoneyama T., Yamamoto H., Imai A., Hatakeyama S., Yoneyama T., Hashimoto Y., Ohyama C.
Hirosaki university, Dept. of Urology, Hirosaki, Japan

815 Neoadjuvant chemo-hormonal therapy combined with radical prostatectomy and extend PNLD for very high risk locally advanced prostate cancer: A 3-arms retrospective comparative study

By: Pan J., Chenfei C., Yinjie Z., Xiaoguang S., Jianjun S., Fan X., Yanqing W., Baijun D., Wei X.
Ren Ji Hospital Affiliated to Shanghai Jiao Tong University, School of Medicine, Dept. of Urology, Shanghai, China
Androgen deprivation therapy should not be used as monotherapy in high or very high risk localized prostate cancer


1 Asan Medical Center, Dept. of Urology, Seoul, Korea, South, 2 Ulsan University Hospital, Dept. of Urology, Ulsan, Korea, South

Neoadjuvant docetaxel plus goserelin in patients with very-high risk, locally advanced prostate cancer: Initial results from a randomized study

By: Zhang H.L., Zhu Y., Dai B., Ye D.W.

Fudan University Shanghai Cancer Center, Dept. of Urology, Shanghai, China

Multi-institutional prospective study comparing oncological outcomes between radical prostatectomy with extended pelvic lymph node dissection versus radiotherapy and long-term adjuvant androgen deprivation therapy for high risk localized prostate cancer


1 Diaconesses-Croix St Simon Hospital, Dept. of Urology, Paris, France, 2 Gustave Roussy Institute, Dept. of Radiation Oncology, Villejuif, France

Differences of oncologic outcomes of prostate cancer with nodal metastasis in the absence of distant metastasis according to initial treatment: Radical prostatectomy vs. androgen deprivation therapy


1 Asan Medical Center, Dept. of Urology, Seoul, Korea, South, 2 Ulsan University Hospital, Dept. of Urology, Ulsan, Korea, South

Long-term oncological outcomes after radical prostatectomy and extended pelvic lymph node dissection in high-risk prostate cancer: Comparing last decade to previous 20 years

By: Rubio Briones J., Ramirez Backhaus M., Gómez-Ferrer A., Mir Maresme C., Domínguez Escrig J., Collado Serra A., Iborra I., Solsona E., Mascarós J.M., Casanova J.

Instituto Valenciano de Oncología, Dept. of Urology, Valencia, Spain

Stage-migration and survival of lymph node positive prostate cancer patients: A comprehensive trend analyses of surgically treated men over the last two decades

822  Contemporary trends and survival outcomes after aborted radical prostatectomy in lymph node metastatic prostate cancer patients

By: Bandini M. 1, Preisser F. 2, Nazzani S. 3, Marchioni M. 4, Tian Z. 5, Smith A. 6, Bondarenko H. 5, Gallina A. 1, Abdollah F. 7, Shariat S. 8, Montorsi F. 1, Saad F. 5, Tilki D. 2, Briganti A. 9, Karakiewicz P. 5

1IRCCS Ospedale San Raffaele, Vita-Salute San Raffaele University, Dept. of Urology/Urological Oncology, Milan, Italy, 2University Hospital Hamburg-Eppendorf, Dept. of Urology, Hamburg, Germany, 3Mayo Clinic, Dept. of Urology, Rochester, United States of America, 4Medical University of Vienna, Dept. of Urology, Vienna, Austria, 5Polytechnic University of the Marche Region, School of Medicine, United Hospitals, Dept. of Pathological Anatomy, Ancona, Italy, 6University of Montreal Health Center, Cancer Prognostics and Health Outcomes Unit, Division of Urology, Montreal, Canada

823  Radical cystoprostatectomy in high risk prostate cancer. Is it worth it?

By: Kowalski F. 1, Wilamowski J. 1, Ostrowski A. 1, Adamowicz J. 1, Bryczkowski M. 1, Baranowski A. 2, Mikołajczak W. 2, Drewa T. 1

1A. Jurasz University Hospital No. 1, Dept. of Urology, Bydgoszcz, Poland, 2Nicolaus Copernicus Specialist Municipal Hospital, Dept. of Urology, Toruń, Poland

824  The role of primary surgery and external beam radiation therapy in the management of non-metastatic ductal prostate cancer: 20-year outcomes from a single institution experience

By: Francavilla S. 1, Triggiani L. 2, Palumbo C. 1, Bardoscia L. 2, Tellini R. 1, Buglione M. 2, Peroni A. 1, Antonelli A. 1, Magrini S.M. 2, Simeone C. 1

1Spedali Civili Hospital, University of Brescia, Dept. of Urology, Brescia, Italy, 2Spedali Civili Hospital, University of Brescia, Dept. of Radiation Oncology, Brescia, Italy

825  Zero PSA after RP: It is reasonable in selected N+ prostate cancer patients if a ePLND is performed

By: Ramirez Backhaus M. 1, Mir Maresma C. 1, Mascarós J.M. 2, Mamber A. 1, Gómez-Ferrer Á. 1, Domínguez-Escrig J.L. 1, Casanova J.L. 3, Iborra I. 1, Monróis J.L. 1, Collado Serra A. 1, Hernández J. 1, Spinetti G. 1, Calatrava Fons A. 4, Rubio-Briones J. 1
826

**Effect of extended pelvic lymph node dissection on oncologic outcomes in D’Amico intermediate- and high-risk radical prostatectomy patients**

By: Preisser F.¹, Van Den Bergh R.², Gandaglia G.³, Ost P.⁴, Surcel C.⁵, Sooriakumaran P.⁶, Montorsi F.³, Graefen M.¹, Van Der Poel H.², De La Taille A.⁷, Briganti A.³, Salomon L.⁷, Ploussard G.⁷, Tilki D.¹

¹University Hospital Hamburg-Eppendorf, Martini-Klinik Prostate Cancer Center, Hamburg, Germany, ²Netherlands Cancer Institute, Dept. of Urology, Amsterdam, Netherlands, The, ³IRCCS Ospedale San Raffaele, Unit of Urology/Division of Oncology, URI, Milan, Italy, ⁴Ghent University Hospital, Dept. of Radiotherapy, Ghent, Belgium, ⁵Fundeni Clinical Institute, Centre of Urological Surgery, Dialysis and Renal Transplantation, Bucharest, Romania, ⁶University College London Hospital, Dept. of Uro-oncology, London, United Kingdom, ⁷Henri Mondor Hospital, Assistance-Publique Hopitaux de Paris, Dept. of Urology, Creteil, France
**Paediatric urology 3: Bladder and vesicoureteral reflux**

*Poster Session 61*

**Location:** Blue Area, Room 4 (Level 0)

**Chairs:**
- B. Burgu, Ankara (TR)
- J.M. Nijman, Groningen (NL)
- J. Wen, Zhengzhou (CN)

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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| 827 | Bladder and bowel dysfunctions in children with cerebral palsy and acquired brain injury: Are we able to define incidence and to predict them? | Chiminello R.¹, Mosiello G.², Castelli E.¹  
¹Bambino Gesù Children's Hospital, Dept. of Neurorehabilitation, Rome, Italy, ²Bambino Gesù Children's Hospital, Dept. of Pediatric Neuro-Urology, Rome, Italy |
| 829 | Withdrawn                                                              | To be confirmed                                                                                   |
| 830 | Treating infrequent voiding in children - use of a timed voiding pattern | Johnston M.¹, Tay L.J.², Green J.², Warner R.³  
¹Basingstoke and North Hampshire Hospital, Dept. of Urology, Basingstoke, United Kingdom, ²Whipps Cross Hospital, Dept. of Urology, London, United Kingdom, ³Imperial College London, Dept. of Urology, London, United Kingdom |
| 831 | Differences between clinic and home uroflows among normal control and children with lower urinary tract symptoms | Johnin K., Kobayashi K., Kawauchi A.  
Shiga University of Medical Science, Dept. of Urology, Otsu, Japan |
| 832 | Withdrawn                                                              | To be confirmed                                                                                   |
| 833 | Objective and subjective improvement in children with idiopathic detrusor overactivity after intravesical botulinum toxin injection | Al Edwan G.¹, Mansi H.¹, Al Adwan R.²  
¹University of Jordan, Dept. of Urology, Amman, Jordan, ²University of Jordan, School of Medicine, Amman, Jordan |
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<th>Session</th>
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<td>834</td>
<td>Retrospective analysis of more than a decade of botulinum-A toxin for refractory dysfuntional voiding in pediatric patients</td>
<td>Ortiz Perojo R., Díaz Naranjo S., Angulo Madero J.M., Lahoz García C., Velasco Sastre E., Ulloa Espinel J.M., Bermudez Villaverde R., Moya Villalvilla I., Garcia Rodriguez V., Muñoz Delgado B., Sanz Sacristán J.</td>
<td>Hospital General de Segovia, Dept. of Urology, Segovia, Spain, Hospital Materno-Infantil Gregorio Marañón, Dept. of Pediatric surgery, Madrid, Spain, Hospital General de Segovia, Dept. of Urology, Segovia, Spain</td>
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<td>835</td>
<td>Urinary nerve growth factor and brain-derived neurotrophic factor can predict therapeutic efficacy in children with monosymptomatic nocturnal enuresis</td>
<td>Morizawa Y., Aoki K., Hori S., Nakai Y., Miyake M., Onishi S., Tanaka N., Fujimoto K.</td>
<td>Nara Medical University, Dept. of Urology, Nara, Japan</td>
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<td>836</td>
<td>Assessment of the sleep characteristics of pediatric patient population with nocturnal enuresis diagnosis: 3rd step hospital questionnaire-based study</td>
<td>Sarikaya S., Yildiz Sarikaya F., Damar E., Senocak C., Bozkurt O.</td>
<td>Gulhane Research and Training Hospital, Dept. of Urology, Ankara, Turkey, Hacettepe University Faculty of Medicine, Dept. of Neurology, Ankara, Turkey, Kecioren Research and Training Hospital, Dept. of Urology, Ankara, Turkey</td>
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<td>837</td>
<td>Alarm or desmopressin therapy for pediatric monosymptomatic enuresis? A meta-analysis</td>
<td>Chang S.J., Peng C.C.</td>
<td>Taipei Tzu Chi Hospital, Buddhist Tzu Chi Medical foundation, Dept. of urology, New Taipei, Taiwan, Washington University in St. Louis, Dept. of surgery, St. Louis, United States of America</td>
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<td>838</td>
<td>Withdrawn</td>
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<td>841</td>
<td>Transvesical laparoscopic surgery in complexed patients of vesicoureteral reflux with ureterovesical junction obstruction or complete double pelvis and ureter</td>
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By: Yasuyuki N., Ushijima S., Kanazawa M., Fujihara A., Hongo F., Okihara K., Ukimura O.
Kyoto Prefectural University of Medicine, Dept. of Urology, Kyoto, Japan
The use of multimedia in urology
Poster Session 62

Sunday 18 March
15:45 - 17:15

Location: Blue Area, Room 5 (Level 0)
Chairs: P. Dasgupta, London (GB)
        J. Huber, Dresden (DE)
        S. Loeb, New York (US)

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

842

Benefit of urology e-consultation through an opportunity cost study

By: Ballesta B.¹, Martínez Mora C.², Falcon Barroso J.¹, Díaz García J.L.¹, Amador Robayna A.¹, Carrión Valencia A.¹, Orribo Morales N.¹, García García L.¹, Jiménez Navarro M.¹, Fumero Arteaga S.¹, Monllor Gisbert J.¹
¹University Hospital Nuestra Señora de Candelaria, Dept. of Urology, Santa Cruz de Tenerife, Spain, ²University of Alicante, Dept. of Applied Economic Analysis Dept., Alicante, Spain

843

Preliminary trial of a device to remotely monitor catheter output

By: Mosli-Lynch C.¹, Barton-Grimley D.², Vismer M.²
¹University College London Hospital, Dept. of Urology, London, United Kingdom,
²OpSense, Medical Devices, London, United Kingdom

844

Association of frailty and lower urinary tract symptoms: Results from the Iwaki health promotion project in Japan

By: Soma O.¹, Hatakeyama S.¹, Matsumoto T.¹, Kusaka A.¹, Hosogoe S.¹, Hamano I.¹, Tobisawa Y.¹, Yoneyama T.¹, Yamamoto H.¹, Imai A.¹, Yoneyama T.¹, Hashimoto Y.¹, Koie T.¹, Nakaji S.², Ohyama C.¹
¹Hirosaki University Graduate School of Medicine, Dept. of Urology, Hirosaki, Aomori, Japan, ²Hirosaki University Graduate School of Medicine, Dept. of Social Medicine, Hirosaki, Aomori, Japan

845

Effect of music on outpatient urological procedures: A systematic review and meta-analysis from European section of Uro-Technology (ESUT)

By: Jones P.¹, Kyriakides R.¹, Pietropaolo A.¹, Geraghty R.¹, Skolarikos A.², Liatsikos E.³, Traxer O.⁴, Somani B.¹
¹University Hospital Southampton NHS Trust, Dept. of Urology, Southampton, United Kingdom, ²University of Athens, Dept. of Urology, Athens, Greece, ³Patras University, Dept. of Urology, Patra, Greece, ⁴Tenon Hospital, Dept. of Urology, Paris, France
846 Mobile phone apps for the prediction of prostate cancer: A multicenter external validation and comparison

By: Lombardo R.¹, De Nunzio C.¹, Tema G.¹, Cancrini F.¹, Chacon R.², Garcia-Cruz E.², Huguet J.², Ribal M.J.², Alcaraz A.², Tubaro A.¹
¹Sant’Andrea Hospital, Sapienza University of Rome, Dept. of Urology, Rome, Italy, ²University Hospital Clínica de Barcelona, Dept. of Urology, Barcelona, Spain

847 A prospective clinical, cost and environmental analysis of a clinician-led urology virtual clinic

By: Miah S., Dunford C., Edison M., Gan C., Servian P., Ahmed H., Gibbons N., Hrouda D.
Charing Cross Hospital, Dept. of Urology, London, United Kingdom

848 Teleconsultation in urology: Patient satisfaction assessment

Hospices civils de Lyon, Dept. of Urology, Lyon, France

849 A pilot experience in using a digital app to follow-up prostate cancer patients in a UK district general hospital

By: Phan Y.C., Loh A.Y.H., Anankumar A., Elves A.
Royal Shrewsbury Hospital, Dept. of Urology, Shrewsbury, United Kingdom

850 Is online patient information on bladder cancer websites in line with the EAU guidelines?

By: Salem J.¹, Paffenholz P.¹, Bolenz C.², Cebulla A.², Haferkamp A.³, Kuru T.¹, Pfister D.¹, Tsaur I.³, Borgmann H.³, Heidenreich A.¹
¹University Hospital Cologne, Dept. of Urology, Cologne, Germany, ²University Hospital Ulm, Dept. of Urology, Ulm, Germany, ³University Medicine Johannes Gutenberg-University Mainz, Dept. of Urology, Mainz, Germany

851 State-of-the-art automated extraction of detailed pathological data from narratively written electronic health records

By: Leyh-Bannurah S-R¹, Tian Z.², Karakiewicz P.I.², Wolfgang U.³, Pehrke D.⁴, Fisch M.⁵, Huland H.⁵, Graeven M.⁵, Budäus L.⁵
¹University Medical Center Hamburg-Eppendorf, Dept. of Prostate Cancer, Hamburg, Germany, ²University of Montreal, Dept. of Cancer Prognostics and Health Outcomes, Montreal, Canada, ³University of Muenster, Dept. of Information Systems, Muenster, Germany, ⁴University Medical Center, Dept. of Prostate Cancer, Hamburg, Germany, ⁵University Medical Center, Dept. of Urology, Hamburg, Germany

852 A platform of MDT management for genitourinary cancers across China in the “internet+” era
### 853

**Science Hackathon using artificial intelligence, the future of medical literature research? A first experience with a new technology with the intention to boost augmented reality in surgery**

By: Schoeb D.S., Hein S., Dressler F.F., Adams F., Schlager D., Miernik A.
Faculty of Medicine and Medical Center - University of Freiburg, University of Freiburg, Dept. of Urology, Freiburg im Breisgau, Germany

### 854

**Withdrawn**
To be confirmed

**Summary**

P. Dasgupta, London (GB)
The Expert-Guided Poster Tour is a new innovative session type. The Tour aims to provide an interactive platform informing delegates on the real essentials and providing in-depth information on the different research projects. The Expert-Guided Poster Tour consists of two parts: The first part is reserved for poster viewing. The posters will be on display for 2 hrs before the start of the Guided Poster Tour. During the second part of the Tour, the two experts acting as moderators, will ask questions to poster presenters.

PT074

Burden of lymph node metastases in patients with prostate cancer treated with radical prostatectomy and lymph node dissection

By: Preisser F.1, Marchioni M.2, Bandini M.3, Saad F.4, Graefen M.5, Tilki D.5, Karakiewicz P.I.4
1University Hospital Hamburg-Eppendorf, Hamburg, Germany, Martini-Klinik Prostate Cancer Center, Hamburg, Germany, 2SS Annunziata Hospital, Dept. of Urology, Chieti, Italy, 3Urological Research Institute, IRCCS San Raffaele Scientific Institute, Dept. of Urology and Division of Experimental Oncology, Milan, Italy, 4University of Montreal Health Center, Division of Urology, Cancer prognostics and Health Outcomes Unit, Montreal, Canada, 5University Hospital Hamburg-Eppendorf, Martini-Klinik Prostate Cancer Center, Hamburg, Germany

PT075

Care pathways for the management of localised and locally advanced prostate cancer: Experience of the EAU guidelines office

By: Dimitropoulos K.1, Cornford P.2, De Santis M.3, Mason M.4, Rouviere O.5, Bolla M.6, Briganti A.7, Fossati N.7, Gandaglia G.7, Maclennan S.8, Maclennan S.8, N'Dow J.8, Omar I.9, Plass K.9, Royle J.1, Van Den Bergh R.10, Van Der Poel H.10, Wiegel T.11, Mottet N.12
1Aberdeen Royal Infirmary, Dept. of Urology, Aberdeen, United Kingdom, 2Royal Liverpool and Broadgreen Hospitals NHS Trust, Dept. of Urology, Liverpool, United Kingdom, 3University of Warwick, Cancer Research Centre, Coventry, United Kingdom, 4Velindre Cancer Centre, Dept. of Clinical Oncology, Cardiff, United Kingdom, 5Hospices Civils de Lyon, Edouard Herriot Hospital, Radiology Department, Lyon, France, 6CHU Grenoble, Dept. of Radiation Therapy, Grenoble, France, 7IRCCS Ospedale San Raffaele, Unit of Urology/Division of Oncology, URI, Milan, Italy, 8University of Aberdeen, Academic Urology Unit, Aberdeen, United Kingdom, 9European Association of Urology, Guidelines Office, Arnhem, Netherlands, The, 10Netherlands Cancer Institute, Dept. of Urology, Amsterdam, Netherlands, The, 11University Hospital Ulm, Dept. of Radiation
Evaluating the psychometric properties of the EPIC-26

By: Crump T.¹, Peterson A.², Charbonneau C.³, Carlson K.¹, Sutherland J.², Baverstock R.¹

¹University of Calgary, Dept. of Surgery, Calgary, Canada, ²University of British Columbia, Centre for Health Services and Policy Research, Vancouver, Canada, ³Vesia, Alberta Bladder Centre, Calgary, Canada

Time to disease progression is a predictor of metastasis and mortality in patients with high-risk prostate cancer who achieved undetectable prostate-specific antigen following robot-assisted radical prostatectomy

To be confirmed

Causes of death in localised prostate cancer: Long term data from two phase III trials


¹Centre Hospitalier Universitaire De Sherbrooke, Dept. of Radio-Oncology, Sherbrooke, Canada, ²Centre Hospitalier Universitaire de Québec, Dept. of Radio-Oncology, Québec, Canada, ³Maisonneuve-Rosemont Hospital Montreal, Dept. of Radio-Oncology, Montreal, Canada, ⁴CSSS de Chicoutimi, Dept. of Radio-Oncology, Chicoutimi, Canada, ⁵Jewish General Hospital Montreal, Dept. of Radio-Oncology, Montreal, Canada, ⁶CSSS Gatineau, Dept. of Radio-Oncology, Gatineau, Canada, ⁷Centre Hospitalier Régional de Trois-Rivières, Dept. of Radio-Oncology, Trois-Rivières, Canada, ⁸CSSS Rimouski-Neigette, Dept. of Radio-Oncology, Rimouski, Canada, ⁹Nova Scotia Cancer Centre, Dept. of Radio-Oncology, Halifax, Canada, ¹⁰Centre Hospitalier Universitaire De Montreal, Dept. of Radio-Oncology, Montreal, Canada, ¹¹Centre Hospitalier Universitaire De Québec, Dept. of Radio-Oncology, Québec, Canada, ¹²Université de Montreal, Dept. of Radio-Oncology, Montreal, Canada, ¹³McGill University Health Centre Montreal, Dept. of Radio-Oncology, Montreal, Canada

Which patients should be still considered for late salvage radiotherapy for rising or persistently elevated PSA after radical prostatectomy: Results from a large multi-institutional study

By: Noris Chiorda B.¹, Fossati N.¹, Karnes J.², Soligo M.², Boorjian S.², Bossi A.³, Coraggio G.³, Di Muzio N.⁴, Cozzarini C.⁴, Fiorino C.⁴, Gandaglia G.¹, Robesti D.¹, Bartkowiak D.⁵, Budach V.⁶, Shariat S.⁷, Goldner G.⁸, Battaglia A.⁹, Joniau S.⁹, Haustermans K.¹⁰, De Meerleer V.¹⁰, Fonteyne V.¹¹, Ost P.¹¹, Van Poppel H.⁹, Montorsi F.¹, Wiegel T.⁵, Briganti A.¹

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, ⁴San Raffaele Hospital, Dept. of Radiotherapy,
<table>
<thead>
<tr>
<th>PT080</th>
<th>Salvage radical prostatectomy (SRP) for radioresistant prostate cancer (PCA): Outcome analysis of 2 tertiary referral centres</th>
</tr>
</thead>
<tbody>
<tr>
<td>By: Heidenreich A.¹, Alessandro M.², Soligo M.², Kohl T.¹, Grabbert M.¹, Pfister D.¹, Karnes J.²</td>
<td></td>
</tr>
<tr>
<td>¹University of Cologne, Dept. of Urology, Cologne, Germany, ²Mayo Clinic, Dept. of Urology, Rochester, United States of America</td>
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<tr>
<th>PT081</th>
<th>Comparative effectiveness of salvage cryosurgery and high intensity focused ultrasound for radiorecurrent prostate cancer: A regression analysis</th>
</tr>
</thead>
<tbody>
<tr>
<td>By: Peters M.¹, Dewar M.², Hetou K.², Noteboom J.¹, Tersteeg R.¹, Van Der Voort Van Zyp J.¹, Violette P.³, Bauman G.⁴, Chin J.²</td>
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<tr>
<td>¹University Medical Centre Utrecht, Radiation Oncology, Utrecht, Netherlands, ²University of Cologne, Dept. of Urology, Cologne, Germany, ³Woodstock Hospital, Dept. of Urology, Woodstock, Canada, ⁴London Health Sciences Centre, Radiation Oncology, London, Canada</td>
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<tr>
<th>PT082</th>
<th>Natural history of patients affected by nodal recurrence from prostate cancer treated with salvage lymph node dissection without additional treatments</th>
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</thead>
<tbody>
<tr>
<td>By: Fossati N.¹, Suardi N.¹, Bravi C.¹, Soligo M.², Karnes J.², Schmautz M.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, Kalz A.⁶, Osmonov D.⁶, Juenemann K.⁶, Rajarubendra N.⁷, Gill I.⁷, Mottrie A.⁸, Briganti A.¹, Montorsi F.¹</td>
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<tr>
<td>¹Vita-Salute University San Raffaele, Dept. of Urology, Milan, Italy, ²Mayo Clinic, Dept. of Urology, Rochester, United States of America, ³University of Cologne, Dept. of Urology, Cologne, Germany, ⁴Ludwig-Maximilians-University, Dept. of Urology, Munich, Germany, ⁵University Hospital Leuven, Dept. of Urology, Leuven, Belgium, ⁶University Hospital Schleswig Holstein, Urology and Pediatric Urology, Campus Kiel, Germany, ⁷University of Southern California, USC Institute of Urology, Los Angeles, United States of America, ⁸OLV Ziekenhuis Aalst, Dept. of Urology, Melle, Belgium</td>
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<tr>
<th>PT083</th>
<th>Salvage lymphadenectomy in prostate cancer</th>
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<tbody>
<tr>
<td>By: Morozov A., Bezrukov E., Sukhanov R., Sirota E., Slusarenco R., Martirosyan G. Sechenov First Moscow State Medical University, Dept. of Urology, Moscow, Russia</td>
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<tr>
<th>PT084</th>
<th>Negative histology after salvage lymph node dissection for patients with PET/CT documented lymph node recurrence from prostate cancer: False positive findings or missed disease</th>
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PT085

Pathological landscape following salvage robot-assisted radical prostatectomy after focal high intensity focused ultrasound


University College London Hospital, Dept. of Uro-oncology, London, United Kingdom

PT086

The prognostic role of early PSA response after salvage radiation therapy: Long-term results from a multi-institutional study


1Vita-Salute San Raffaele University, Dept. of Urology, Milan, Italy, 2Mayo Clinic, Dept. of Urology, Rochester, United States of America, 3University of Cologne, Dept. of Urology, Cologne, Germany, 4Ludwig Maximilians University, Dept. of Urology, Munich, Germany, 5University Hospital Leuven, Dept. of Urology, Leuven, Belgium, 6University Hospital Schleswig Holstein, Dept. of Urology, Campus Kiel, Germany, 7University of Southern California, Dept. of Urology, California, United States of America, 8QLV Ziekenhuis Aalst, Dept. of Urology, Melle, Belgium, 9Vita Salute University San Raffaele, Dept. of Urology, Milan, Italy

PT087

Survival benefit of local vs. no local treatment for metastatic prostate cancer - impact of baseline PSA and metastatic substages


1University Hospital Hamburg-Eppendorf, Martini-Klinik Prostate Cancer Center, Hamburg, Germany, 2University Hospital Hamburg-Eppendorf, Dept. of Urology, Hamburg, Germany, 3IRCCS San Raffaele Scientific Institute, Dept. of Urology and
PT088

**The risk of cardiovascular disease following GnRH agonists versus antagonists: Real-world evidence from four European countries**

By: George G. 1, Scailteux L-M. 2, Garmo H. 1, Balussa F. 3, De Coster G. 4, De Schutter H. 4, Kuiper J. 5, Oger E. 3, Verbeeck J. 4, Van Hemelrijck M. 1

1King’s College London, Dept. of Translational Oncology and Urology Research, London, United Kingdom, 2Rennes Hospital University, Pharmacovigilance Pharmacoepidemiology and Drug Information Center, Rennes, France, 3Rennes University, UPRES EA 7449 REPERES Pharmacoepidemiology and Health Services Research, Rennes, France, 4Belgian Cancer Registry, Brussels, Belgium, 5PHARMO Institute for Drug Outcomes Research, Utrecht, Netherlands, The

PT089

**A meta-analysis of adverse events of degarelix versus luteinizing hormone agonists**

By: Jin C. 1, Cui C. 2, Zhang X. 1, Xu T. 1

1Peking University People’s Hospital, Dept. of Urology, Beijing, China, 2Yale University School of Medicine, Dept. of Immunobiology, New Haven, United States of America

PT090

**Quantitative assessment of bone scan to evaluate response in treatment with RA-223 in metastatic castration resistant prostate cancer (mCRPC)**

By: Anand A. 1, Lofgren A. 1, Tragardh E. 2, Edenbrandt L. 3, Sandsén J. 4, Beckman L. 5, Svensson J. 6, Karlsson C. 7, Widmark A. 7, Kindblom J. 8, Ullen A. 9, Bjartell A. 10

1Skane Hospital, Translational Medicine, Division of Urological Cancers, Malmo, Sweden, 2Skane University Hospital, Clinical Physiology and Nuclear Medicine, Malmo, Sweden, 3Gothenburg University, Dept. of Nuclear Medicine, Gothenburg, Sweden, 4Central Hospital Karlstad, Dept. of Oncology, Karlstad, Sweden, 5Sundsvall-Härnösand County Hospital, Dept. of Oncology, Sundsvall, Sweden, 6Skovde Hospital, Dept. of Urology, Skövde, Sweden, 7Umea University, Dept. of Radiation Sciences, Umea, Sweden, 8Gothenburg University, Dept. of Oncology, Gothenburg, Sweden, 9Karolinska University Hospital, Dept. of Oncology, Stockholm, Sweden, 10Skane Hospital, Dept. of Translational Medicine, Division of Urological Cancers, Malmo, Sweden

PT091

**First interim results of PARABO: A non-interventional study evaluating patients with mCRPC with bone metastases treated with Radium-223 (Xofigo®) in a real life German practice setting**

By: Palmedo H. 1, Eschmann S. 2, Werner A. 3, Selinski I. 4, Möllers M. 5, Pinkert J. 6, Van Crüchten I. 6, Neusser T. 7, Pöppel T. 8

1Office based nuclear medicine center for Radiology, Nuclear Medicine, Bonn, Germany, 2Marienhospital, Nuclear Medicine, Stuttgart, Germany, 3Radiology Schwetzingen, Nuclear Medicine, Schwetzingen, Germany, 4Office based center for Radiology, Nuclear Medicine, Wiesbaden, Germany, 5Office based center for Radiology, Nuclear Medicine,
PT092

REASSURE observational study of radium-223 (Ra-223): First interim results by prior/concomitant treatment (Tx) in patients (Pts) with metastatic castration-resistant prostate cancer (mCRPC) enrolled in Europe


1The Christie NHS Foundation Trust, Dept. of Oncology, Manchester, United Kingdom, 2Universitätsklinikum Magdeburg, Dept. of Urology and Children Urology, Magdeburg, Germany, 3University of Messina, Dept. of Nuclear Medicine, Messina, Italy, 4ZNA Middelheim, Dept. of Oncology, Antwerp, Belgium, 5Centralsjukhuset i Karlstad, Dept. of Oncology, Karlstad, Sweden, 6Rigshospitalet, Dept. of Oncology, Copenhagen, Denmark, 7Fondazione IRCCS Istituto Nazionale dei Tumori, Dept. of Radiotherapy and Oncology, Milan, Italy, 8University of Göttingen, Dept. of Urology, Göttingen, Germany, 9H. San Pedro de Alcántara, Dept. of Medical Oncology, Caceres, Spain, 10Diakonissenkrankenhaus Dessau, Dept. of Urology, Dessau, Germany, 11Benjamin Franklin Medical Center, Dept. of Oncology, Berlin, Germany, 12Bayer, Dept. of Oncology, Basel, Switzerland, 13Bayer, Dept. of Oncology, Whippany, United States of America, 14San Camillo Forlanini Hospital, Dept. of Oncology, Rome, Italy, 15UCL Saint Luc, Dept. of Urology, Sint-Lambrechts-Woluwe, Belgium

PT093

Short-term dynamics of dehydroepiandrosterone sulfate can predict responsiveness to hormone therapy in patients with hormone-naïve metastatic prostate cancer

Saitama Medical Center, Dept. of Urology, Kawagoe, Japan

PT094

Prevalence and prognostic impact of prostate cancer histological variants at radical prostatectomy: A long-term, single center analysis

By: Bravi C.A. 1, Gandaglia G. 1, Fossati N. 1, Lucianò R. 2, Zaffuto E. 1, Scattoni V. 1, Gallina A. 1, Bertini R. 1, Freschi M. 2, Shariat S. 3, Mirone V. 4, Karakiewicz P. 5, Montironi R. 6, Doglioni C. 2, Montorsi F. 1, Briganti A. 1

1Vita-Salute University San Raffaele, Dept. of Urology, Milan, Italy, 2Vita-Salute University San Raffaele, Dept. of Pathology, Milan, Italy, 3Medical University of Vienna, Dept. of Urology, Vienna, Austria, 4Federico II University, Dept. of Urology, Naples, Italy, 5Cancer Prognostic and Health Outcomes, Dept. of Urology, Montreal, Canada, 6Polytechnic University of the Marche Region, School of Medicine, United Hospitals, Dept. of Pathological Anatomy, Ancona, Italy

PT095

Cytokine guided robotic prostatectomy

By: Vasdev N. 1, Nidhin R. 2, Linda F. 1, Gowrie M.S. 3, Prasad V. 3, Thakur S. 2, Scientific Programme - EAU18 Copenhagen
Baydon A.R. 2
1Lister Hospital, Dept. of Urology, Stevenage, United Kingdom, 2University of Hertfordshire, Dept. of Pharmacology, Hatfield, United Kingdom, 3Lister Hospital, Dept. of Anaesthetics, Stevenage, United Kingdom

PT096

Using video analysis to understand the technical variation of robot-assisted radical prostatectomy (RARP) in a statewide surgical collaborative

By: Ghani K. 1, Patel P. 2, Kim T. 1, Prebay Z. 3, Telang J. 1, Linsell S. 1, Kleer E. 3, Miller D. 1, Peabody J. 4, Johnston W. 5
1University of Michigan, Dept. of Urology, Ann Arbor, United States of America, 2Detroit Medical Center, Dept. of Urology, Detroit, United States of America, 3IHA Urology, Dept. of Urology, Ann Arbor, United States of America, 4Henry Ford Hospital, Dept. of Urology, Detroit, United States of America, 5Michigan Institute of Urology, Dept. of Urology, Novi, United States of America

PT097

Evaluating the predictive accuracy and the clinical benefit of a nomogram aimed to predict survival in node positive prostate cancer patients: External validation on a multi-institutional database

By: Schiavina R. 1, Bianchi L. 1, Marco B. 1, Mineo Bianchi F. 1, Briganti A. 2, Carini M. 3, Terrone C. 4, Mottrie A. 5, Gacci M. 3, Gontero P. 6, Imbimbo C. 7, Marchioro G. 8, Milanese G. 9, Mirone V. 7, Montorsì F. 2, Morgia G. 10, Novara G. 11, Porreca A. 12, Volpe A. 8, Brunocilla E. 1
1University of Bologna, Dept. of Urology, Bologna, Italy, 2URI, IRCCS Ospedale San Raffaele, Unit of Urology/Division of Oncology, Milan, Italy, 3University of Florence, Dept. of Urology, Florence, Italy, 4University of Genoa, Dept. of Urology, Genoa, Italy, 5OLV Hospital, Dept. of Urology, Aalst, Belgium, 6University of Turin, Dept. of Urology, Turin, Italy, 7University of Naples, Dept. of Urology, Naples, Italy, 8University of Eastern Piedmont, Dept. of Urology, Novara, Italy, 9University of Ancona, Dept. of Urology, Ancona, Italy, 10University of Catania, Dept. of Urology, Catania, Italy, 11University of Padua, Dept. of Urology, Padua, Italy, 12Abano Hospital, Dept. of Urology, Abano Terme, Italy

PT098

What factors influence urinary continence after robot-assisted radical prostatectomy?

By: Zraik I.M. 1, Musch M. 1, Roggenbuck U. 2, Loewen H. 1, Krege S. 3, Kröpfl D. 1
1Klinikum Essen-Mitte, Dept. of Urology, Essen, Germany, 2University Duisburg-Essen, Institute for Medical Informatics, Dept. of Biostatistics and Epidemiology, Essen, Germany, 3Klinikum Essen-Mitte, Dept. of Urology, Essen, Germany

PT099

Withdrawn
To be confirmed

PT100

Laparoscopic 3D-vision radical prostatectomy: A case series study on perioperative outcomes
### PT101

**Interrupted versus continuous suturing for the vesicourethral anastomosis during radical prostatectomy: A systematic review and meta-analysis**

By: Kowalewski K-F.¹, Tapking C.¹, Hetjens S.², Nickel F.¹, Mandel P.³, Ritter R.⁴, Kriegmair M.C.⁴  
¹University of Heidelberg, Dept. of General, Visceral and Transplantation Surgery, Heidelberg, Germany, ²University Medical Center Mannheim, Dept. of Medical Statistics, Mannheim, Germany, ³University Medical Center Hamburg-Eppendorf, Dept. of Urology, Hamburg, Germany, ⁴University Medical Center Mannheim, Dept. of Urology, Mannheim, Germany

### PT102

**Withdrawn**

To be confirmed

### PT103

**Complications of robotic assisted laparoscopic prostatectomy - the first 1000 cases from a single surgeon series**

By: Nic An Riogh A.¹, O’ Meara S¹, Lundon D.¹, O’ Malley K.²  
¹Mater Misericordiae University Hospital, Dept. of Urology, Dublin, Ireland, ²Mater Private Hospital, Dept. of Urology, Dublin, Ireland
ERN eUROGEN
Specialty session

Location: Green Area, Room 12 (Level 1)
Chairs: M. Battye, Sheffield (GB)
W.F.J. Feitz, Nijmegen (NL)

Aims and objectives of this session
The ERN eUROGEN session will update you on the recent largest health care innovation in Europe involving 30 Million Patients with Rare or Complex Conditions. This program on Urogenital rare diseases and complex conditions involves the whole spectrum from congenital anomalies to lifelong care and complex functional and rare urogenital tumors. Patients care and interaction, Guidelines, Training and Education and Research programs are interacting for the improvement of the care for your patients. Additional information is available on www.eurogen-ern.eu.

15:45 - 16:00
EU perspective on European Reference Network progress and update
M. Battye, Sheffield (GB)

16:00 - 16:15
EAU Guideline Office; CONSIDER Guidance without evidence
A. Bex, Amsterdam (NL)

16:15 - 16:30
Patient perspectives and progress in ERN eUROGEN
R.S. Bartezzati, Rome (IT)

16:30 - 16:45
Hypospadias registries and clinical implications (WS1)
F. Van der Toorn, Rotterdam (NL)

16:45 - 17:00
Complex functional urology research knowledge gaps and solutions (WS2)
J.P.F.A. Heesakkers, Nijmegen (NL)

17:00 - 17:15
Clinical aspects and ERN impact on penile tumour care improvement (WS3)
M. Albersen, Leuven (BE)
Aims and objectives of this session
One of the main goals of the EAU is to establish and introduce common standards for training and European urological practice in order to improve patient care. The E-BLUS exam certifies a basic level of laparoscopic urological skills. The exercises addresses bimanual dexterity, depth perception, suturing and cutting skills. Clinical application is found in such procedures as partial nephrectomy, total nephrectomy, pyeloplasty and radical prostatectomy. To aid in the training of these skills and to prepare for this E-BLUS exam the online theoretical course is mandatory http://uroweb.org/education/online-education/surgical-education/ laparoscopy/theoretical-course/

The course will start with E-BLUS training to further develop your laparoscopic skills and to benefit from the knowledge and expertise of international laparoscopy experts. After the training your skill are tested in the E-BLUS exam. Make sure you are prepared for the exam because training time onsite will be limited and without previous training you will most likely not pass the exam. The exercises to be performed can be found in the instructional videos at http://uroweb.org/education/online-education/surgical-education/laparoscopy/
**EAU Consensus highlight and game changing session**

**Consensus Highlight**

**Monday 19 March**

**07:30 - 08:00**

**Location:** Green Area, eURO Auditorium (Level 0)

**Chairs:**
- P. Albers, Düsseldorf (DE)
- J. Palou, Barcelona (ES)

<table>
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<tr>
<th>Time</th>
<th>Event Description</th>
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<tbody>
<tr>
<td>07:30</td>
<td><strong>EAU Consensus Highlight</strong> Adolescent urology</td>
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<td>D.N. Wood, London (GB)</td>
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<tr>
<td>07:45</td>
<td><strong>Game changer</strong> Prostate evaluation for clinically important disease: Sampling using image-guidance or not? (The PRECISION study, NCT02380027)</td>
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<td>V. Kasivisvanathan, London (GB)</td>
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<tr>
<td>07:55</td>
<td><strong>Game changer Discussant</strong></td>
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<td>D. Murphy, Melbourne (AU)</td>
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Precision medicine
Plenary Session 5

Monday 19 March
08:00 - 10:30

Location: Green Area, eURO Auditorium (Level 0)
Chairs: P. Albers, Düsseldorf (DE)
J. Palou, Barcelona (ES)

08:00 - 08:30
Case-based debate  Is Prostate-Specific Membrane Antigen (PSMA)-Positron Emission Tomography–Computed Tomography (PET-CT) for Prostate-Specific Antigen (PSA) relapse worth the trouble?
Moderator: P. Albers, Düsseldorf (DE)

08:00 - 08:05
Case presentation
P. Albers, Düsseldorf (DE)

08:05 - 08:15
Pro
T. Maurer, Munich (DE)

08:15 - 08:25
Con
A. De La Taille, Créteil (FR)

08:25 - 08:30
Discussion

08:30 - 08:45
Urinary precision markers for the decision-making in prostate cancer
J.A. Schalken, Nijmegen (NL)

08:45 - 09:10
Case-based debate  BRCA1/2 testing before treatment of metastatic Castration-Resistant Prostate Cancer (mCRPC)
Moderator: G.N. Thalmann, Berne (CH)

08:45 - 08:49
Case presentation: Patient with a family history
G.N. Thalmann, Berne (CH)

08:49 - 08:58
Ready for prime time
P. Nelson, Seattle (US)

08:58 - 09:07
Not yet
F.C. Hamdy, Oxford (GB)

09:07 - 09:10
Discussion

09:10 - 09:25
Société Internationale d’Urologie (SIU) lecture Now or never – Realising the promise of precision oncology for urothelial carcinoma
P. Black, Vancouver (CA)

09:25 - 10:15
Case-based debate  Invasive bladder cancer
### Scientific Programme - EAU18 Copenhagen

**Moderator:** J.E. Gschwend, Munich (DE)

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<tr>
<th>Time</th>
<th>Session Title</th>
<th>Speakers</th>
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<tr>
<td>09:25 - 09:30</td>
<td><strong>Case presentation</strong></td>
<td>J.E. Gschwend, Munich (DE)</td>
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<tr>
<td>09:30 - 09:40</td>
<td><strong>Does new molecular subtyping in urothelial cancer add to Tumour, Nodes and Metastasis (TNM)?</strong></td>
<td>E. Compérat, Paris (FR)</td>
</tr>
<tr>
<td>09:40 - 09:50</td>
<td><strong>Molecular subtyping hits the clinic</strong></td>
<td>J.W.F. Catto, Sheffield (GB)</td>
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<tr>
<td>09:50 - 10:00</td>
<td><strong>Precision selection for immunotherapy for bladder cancer</strong></td>
<td>T. Powles, London (GB)</td>
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<td>10:00 - 10:15</td>
<td><strong>Discussion by panel</strong></td>
<td>J.W.F. Catto, Sheffield (GB)</td>
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<td>E. Compérat, Paris (FR)</td>
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<td>T. Powles, London (GB)</td>
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<tr>
<td>10:15 - 10:25</td>
<td><strong>Game changer Results of POUT - A phase III randomised trial of peri-operative chemotherapy versus surveillance in upper tract urothelial cancer (UTUC)</strong></td>
<td>A.J Birtle, Preston (GB)</td>
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<td>10:25 - 10:30</td>
<td><strong>Game changer Discussant</strong></td>
<td>M. Rouprêt, Paris (FR)</td>
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Aims and objectives of this session
Disease prevention is a topic of increasing importance throughout the medical field. Here the focus is on preventing urological diseases by addressing systemic disease processes: Preventing or slowing the progression of lower urinary tract symptoms, minimising invasive urological procedures in high-risk patients with multiple co-morbidities, and mitigating urological complications associated with other medical conditions. Practical specific care suggestions and solutions for improving lower urinary tract function in patients with other chronic medical conditions will be discussed.

08:00 - 08:15
Prevention of resistance: Antimicrobial stewardship in urology
T. Cai, Trento (IT)

08:15 - 08:25
Prevention of infectious complications after prostate biopsy: A Cochrane analysis
A. Pilatz, Giessen (DE)

08:25 - 08:40
Microbiota and Lower Urinary Tract Symptoms (LUTS): The new truth?
F.M.E. Wagenlehner, Giessen (DE)

08:40 - 08:55
Prevention of morbidity and mortality in uroseptic patients
Z. Tandoğdu, Newcastle Upon Tyne (GB)

08:55 - 09:10
Lifestyle factors and urological diseases
K. Tikkinen, Helsinki (FI)

09:10 - 09:45
Case-based debate Preventing LUTS by preventing/treating these diseases
Moderator: G. Lemack, Dallas (US)

09:10 - 09:15
Case presentation
G. Lemack, Dallas (US)

09:15 - 09:24
Cardiovascular diseases
C. De Nunzio, Rome (IT)

09:24 - 09:43
Chronic Obstructive Pulmonary Disease (COPD)/Sleep apnoe
A-S. Goessaert, Ghent (BE)

09:33 - 09:42
Geriatric
P. van Houten, Amsterdam (NL)

09:42 - 09:45
Conclusion
G. Lemack, Dallas (US)
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<th>Time</th>
<th>Event</th>
<th>Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>09:45 - 10:00</td>
<td><strong>Confederación Americana de Urología (CAU) lecture</strong> Modern treatment of LUTS</td>
<td>A. Garcia Mora, Mexico City (MX)</td>
</tr>
<tr>
<td>10:00 - 10:15</td>
<td><strong>Late breaking news</strong></td>
<td></td>
</tr>
<tr>
<td>10:08 - 10:15</td>
<td><strong>Discussant</strong></td>
<td>J.P.F.A. Heesakkers, Nijmegen (NL)</td>
</tr>
<tr>
<td>10:00 - 10:08</td>
<td><strong>Prostatic artery embolization versus transurethral resection of the prostate for benign prostatic hyperplasia: A randomized controlled trial</strong></td>
<td>D. Abt, St. Gallen (CH)</td>
</tr>
<tr>
<td>10:15 - 10:30</td>
<td><strong>Society for Urologic Oncology (SUO) lecture</strong> Prevention of scientific mistakes and future science strategies for our patients</td>
<td>L. Klotz, Toronto (CA)</td>
</tr>
</tbody>
</table>
The infertile couple - Urological aspects
ESU Course 38

Location: Orange Area, Room 1 (Level 0)
Chair: W. Aulitzky, Vienna (AT)

Aims and objectives of this session
This course provides state-of-the-art information on urological aspects of diagnosis and therapy of modern reproductive medicine. Diagnostic procedures should be standardised and coordinated in a timely fashion for both partners, focusing on the possible urological, hormonal and genetic causes of male infertility. In terms of therapy, this course will provide updated information on evidence based data and will discuss the importance of varicoceles in male infertility. We will show microsurgical techniques on video and explain why proper training and skills perfection is key to successful case management. A successful IVF/ICSI outcome depends upon the use of state-of-the-art techniques for sperm retrieval and sperm preparation. We will also provide information on genetic aspects and stress the responsibility of the urologist as an adviser and gatekeeper for the treatment of the infertile couple.

Diagnostic work-up, medical treatment
A. Salonia, Milan (IT)

Pathophysiology, diagnosis and treatment of varicocele
W. Aulitzky, Vienna (AT)

Microsurgical refertilisation
W. Aulitzky, Vienna (AT)

Sperm retrieval techniques and genetic aspects of IVF/ICSI
A. Salonia, Milan (IT)
Ultrasound in urology
ESU Course 39

Aims and objectives of this session
Ultrasound is the basic imaging tool of the urologist and almost all urologists are using ultrasound in daily practice. Despite this, training and teaching of urological ultrasound is not provided in a satisfactory manner. The aim of the course is to provide the technical basics and standards for the use of ultrasound in urology. After the course the delegate should know the ideal settings for reliable and informative urological ultrasound as well as the normal and pathological findings.

- Covering urological organs: kidney, ureter, bladder, testis and penis.
- Standard patient positioning.
- Best choice of transducers and settings.
- Standard operating procedures (SOP).
- Normal, benign and malignant pathologic findings.
- Interventional and intraoperative ultrasound.

Technical basics and new technologies
T. Loch, Flensburg (DE)

Standardisation, tuning, acquisition and reporting of ultrasound exams
M. Ritter, Mannheim (DE)

Ultrasound of the kidney and ureter
M. Ritter, Mannheim (DE)

Ultrasound of the bladder
T. Loch, Flensburg (DE)

Ultrasound of the testis
T. Loch, Flensburg (DE)

Ultrasound of the penis
M. Ritter, Mannheim (DE)
**Prolapse management and female pelvic floor problems**

**ESU Course 40**

**Location:** Orange Area, Room 3 (Level 0)

**Chair:** E. Kocjancic, Chicago (US)

**Aims and objectives of this session**
This course gives practical information about prolapse management by urologists. From anatomy to mesh implant, the recent revival of native tissue repairs and the management of complications. Also laparoscopic and robotic approaches will be evaluated.

**Introduction**
E. Kocjancic, Chicago (US)

**Vaginal surgical anatomy for urologists**
E. Kocjancic, Chicago (US)

**Investigations and imaging for POP**
G.R. Kasyan, Moscow (RU)

**Vaginal native tissue repair**
G.R. Kasyan, Moscow (RU)

**Vaginal mesh repair**
E. Kocjancic, Chicago (US)

**Open/laparoscopic/robotic repair**
H. Hashim, Bristol (GB)

**Classification and management of complications & case discussion**
H. Hashim, Bristol (GB)
E. Kocjancic, Chicago (US)
Aims and objectives of this session
• The course aims to address the multiplicity of treatment options for small renal masses.
• Essential concepts to guide the clinical decision making process will be interactively discussed with the help of clinical cases.
• Practical tips for a safe and effective treatment delivery will be provided on the current standard of ablative therapies and minimally invasive surgery.
• Attendees should become familiar on when and how to propose active surveillance in their daily clinical practice.

Introduction
P. Gontero, Turin (IT)

Active surveillance and discussion of 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)
Aims and objectives of this session
The course aims at introducing the basic principles of the diagnostic work-up and of the management of the most common neurological micturition dysfunctions to urologists and residents. The early identification of these 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 neuro-urological patients with different background diseases
- To discuss representative clinical cases

Introduction
F. Cruz, Porto (PT)

Pathophysiology of neurogenic bladder dysfunction and basic principles of management of LUT dysfunction
M. Drake, Bristol (GB)

Urodynamic investigation of a patient with a neurological disease
G. Van Koeveringe, Maastricht (NL)

Management of the urological problems in:

- **Patients with spinal cord injury**
  F. Cruz, Porto (PT)

- **Patients with Parkinson’s disease**
  M. Drake, Bristol (GB)

- **Patients with cerebral vascular accidents and dementia**
  G. Van Koeveringe, Maastricht (NL)

- **Patients with Multiple Sclerosis**
  F. Cruz, Porto (PT)

Clinical case
M. Drake, Bristol (GB)
Clinical case
G. Van Koeveringe, Maastricht (NL)

Conclusions
F. Cruz, Porto (PT)
Leadership and the EAUN

Location: Orange Area, Room 6 (Level 0)
Aims and objectives of this session
During the course recent practice changing alterations in the guidelines will be discussed. Based on the clinical recommendations the highlights of the guidelines on prostate, renal and bladder cancer as changed in the 2017 updates will be presented and illustrated by clinical cases. A basic knowledge of the guidelines information is assumed for participating trainees.
Update prostate cancer: Metastasized
H.G. Van Der Poel, Amsterdam (NL)
ESU/ESUT/EULIS Hands-on Training Course in Endoscopic stone treatment - step 1
Sponsored by KARL STORZ

Monday 19 March
09:30 - 10:30

Location: Yellow Area, Room 1 (Level 0)

Chair: B. Somani, Southampton (GB)
To be confirmed

Tutors:
To be confirmed
N. Macchione, Milan (IT)
B.M. Schoensee, Potsdam (DE)
To be confirmed
A. Ploumidis, Athens (GR)
T. Tokas, Hall In Tirol (AT)
G.M. Kamphuis, Amsterdam (NL)
E. Emiliani, Barcelona (ES)

Aims and objectives of this session
In this course, basic endoscopic skills can be acquired and learned. Skills associated with cystoscopy, rigid and flexible ureteroscopy are trained by the validated exercises of the Endoscopic stone treatment (EST s1). Experienced Endourologists will guide you to master navigation skills needed with hand-eye-coordination for cystoscopy, rigid ureteroscopy in a model, placement of access sheath and flexible ureteroscopy in the K-Box. The course can be used as an additional training to prepare for the EST S1 examination. Finally, all remaining questions can be answered and discussed with all tutors including the demonstration of tips and tricks.

• At the end of the course, the participants will be able to perform rigid and flexible ureteroscopy in the models
• The participants will be able to interact with tutors and gain valuable insights into the tips and tricks of basic and advanced ureteroscopy.
ESU Hands-on Training Course in Sharpening your presentations skills and improve your career

HOT 31

**Monday 19 March 09:30 - 12:30**

**Location:** Yellow Area, Room 3 (Level 0)

**Chair:** D. Veneziano, Reggio Calabria (IT)

**Tutors:**
- J. Gómez Rivas, Madrid (ES)
- A. Dourado Meneses, Teresina (BR)

**Aims and objectives of this session**
An effective communicator needs to be flexible, energetic and enthusiastic. Delivering a talk puts you on public display. An audience not only listens to your ideas, it also responds to the way you use your voice and your body. You need more than a well written presentation to make an impact: you will also need to deliver it in a lively, flexible and interesting way.
In this course we provide tips and tricks for inspiring, invoking energy, confidence, and safety in your presentation style. The course will be performed in the TED format, with no podium available and itinerant talks in front of the slides.

At the end of this course you will be able to:
- Use your voice effectively
- Optimize the usage of body language.
- Connect with your audience
- Improve your skills on softwares used for presentations
ESU/ESUI Hands-on Training Course in Prostate MRI reading for urologists

Location: Yellow Area, Room 4 (Level 0)
Chair: V. Kasivisvanathan, London (GB)
Tutors: J. Barentsz, Nijmegen (NL)
F. Giganti, London (GB)
L.P. Boesen, ()
M.C. Mir Maresma, Barcelona (ES)

Aims and objectives of this session
This course will provide interactive teaching from expert Faculty in prostate MRI reading and interpretation and help Urologists to understand the role MRI plays in the management of patients with prostate cancer and how to use the information generated by prostate MRI. The course will address how to use an imaging workstation, how to understand the basic concepts/principles behind different MRI sequences (T2-weighted imaging, DWI-imaging and DCE-imaging), in which order to view the different sequences when interpreting prostate MRI, how to use the PI-RADS and Likert scoring system to score MRIs, and finally to understand what are the standards for a prostate MRI and what quality criteria need to be fulfilled. The participants will do hands on reading and assessment of prostate MRI scans on their own laptops followed by a reference reading provided by expert radiologists and pathological verification.
ESU/ERUS Hands-on Training Course in Robotic surgery - Introduction
Sponsored by 3D SYSTEMS SIMBIONIX, MIMIC, INTUITIVE SURGICAL

Monday 19 March
09:00 - 10:30

Location: Yellow Area, Room 5 (Level 0)

Chairs: To be confirmed
To be confirmed
M. Naudin, Hyon (BE)

Tutor: N. Fossati, Milan (IT)

Aims and objectives of this session
The European School of Urology (ESU) and the EAU Robotic Urology Section (ERUS) offer an intensive Hands-on Training Course. We will provide training using simulators. The main aims of this 90 minutes course are:

- improving the participants’ control-skills and hand-eye-coordination, as well as
- an objective benchmarking of console performance and an introduction into standardized surgical steps in robot-assisted procedures.

Improve your robotic surgery skills in the following areas:

- Endowrist manipulation
- Camera Control
- 3rd Arm Control
- Needle Placement and Driving
- Suturing and Knot Tying
# Management of complicated urinary stone disease

**Thematic Session 10**

**Monday 19 March**

**10:30 - 12:00**

| Location: | Green Area, Room 1 (Level 0) |
| Chairs: | J. Denstedt, London, Ontario (CA) |
| | T. Knoll, Sindelfingen (DE) |

**Aims and objectives of this session**

Treating stones can be complex due to stone size or location, but as well due to specific comorbidities or anatomic anomalies. Choosing the best approach requires significant expertise and experience of the urologist. This session aims being a very interactive, practical discussion on selected cases to improve personal knowledge on difficult, complex situations.

<table>
<thead>
<tr>
<th>Time</th>
<th>Event</th>
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<tbody>
<tr>
<td>10:30 - 10:40</td>
<td><strong>Prevention of recurrent cystine stones - Can it be done?</strong>&lt;br&gt;K. Thomas, London (GB)</td>
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<tr>
<td>10:40 - 11:15</td>
<td><strong>Case discussion</strong>&lt;br&gt;A 2 cm lower pole stone in an obese patient is treated best...</td>
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<tr>
<td>10:40 - 10:45</td>
<td><strong>Case presentation</strong>&lt;br&gt;P. Kallidonis, Patras (GR)</td>
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<tr>
<td>10:45 - 11:05</td>
<td>... By percutaneous nephrolithotomy&lt;br&gt;A. Skolarikos, Athens (GR)</td>
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<tr>
<td>10:55 - 11:05</td>
<td>... Ureteroscopy&lt;br&gt;P.J.S. Osther, Fredericia (DK)</td>
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<tr>
<td>11:05 - 11:15</td>
<td>... Combined&lt;br&gt;C.M. Scoffone, Turin (IT)</td>
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<tr>
<td>11:15 - 11:25</td>
<td><strong>Holmium laser: Do you play it right?</strong>&lt;br&gt;P.M. Kronenberg, Amadora (PT)</td>
</tr>
<tr>
<td>11:25 - 12:00</td>
<td><strong>Case discussion</strong>&lt;br&gt;Pus after puncture of an infectious staghorn stone&lt;br&gt;<strong>Moderator:</strong> J. Denstedt, London, Ontario (CA)</td>
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<tr>
<td>11:25 - 11:30</td>
<td><strong>Case presentation</strong>&lt;br&gt;J. Denstedt, London, Ontario (CA)</td>
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<tr>
<td>11:30 - 11:40</td>
<td><strong>How to prevent septic complications in the age of multi-resistancy</strong>&lt;br&gt;G. Bonkat, Basel (CH)</td>
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<tr>
<td>11:40 - 11:50</td>
<td><strong>Multi-tract PCNL approach</strong>&lt;br&gt;O.R. Durutovic, Belgrade (RS)</td>
</tr>
<tr>
<td>11:50 - 12:00</td>
<td><strong>Laparoscopic - Robotic approach</strong>&lt;br&gt;A.S. Gözen, Heilbronn (DE)</td>
</tr>
</tbody>
</table>
**EAU Guidelines Session: Management of muscle-invasive bladder cancer - When should the guidelines be ignored?**  
**Thematic Session 11**

**Monday 19 March**  
**10:30 - 12:00**

**Location:** Green Area, Room 2 (Level 0)  
**Chair:** J.A. Witjes, Nijmegen (NL)

**Aims and objectives of this session**
EAU guidelines are presented with the highest possible levels of evidence, after a yearly, comprehensive literature search. However, not all recommendations are level A. Surgical RCT’s, for example, are rare. This means consensus for some issues, but this is not always easy. An example the 2017 Advanced Prostate Cancer Consensus Conference (Gillessen et al., Eur Urol). In conclusion, guidelines should not be ignored, but the text and recommendations are open for interpretation.  
In thematic session 11 issues for MIBC are discussed: Surgery and bladder preservation, perioperative chemotherapy, histology and follow up. After this session, the audience should understand strength and limitations of guideline recommendations, and how to deal with that.

<table>
<thead>
<tr>
<th>Time</th>
<th>Session</th>
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</table>
| 10:30 - 10:35 | **Case presentation**  
Male with cT2/3 urothelial cancer - Screening negative - Choice: Cystectomy + Lymph Node Dissection (LND) + neobladder  
J.A. Witjes, Nijmegen (NL) |
| 10:35 - 10:45 | **Who are optimal candidates for bladder preservation?**  
A. Van Der Heijden, Nijmegen (NL) |
| 10:45 - 10:55 | **Who benefits from neoadjuvant chemotherapy and who needs immediate radical treatment?**  
P. Black, Vancouver (CA) |
| 10:55 - 11:05 | **How to do it poorly: Cystectomy beyond the guidelines**  
S. Lerner, Houston (US) |
| 11:05 - 11:15 | **How to interpret the specimen’s pathology**  
A. Hartmann, Erlangen (DE) |
| 11:15 - 11:25 | **What you could miss at follow-up**  
E. Veskimäe, Tampere (FI) |
| 11:25 - 11:35 | **What will we recommend in 2025?**  
T.W. Todenhöfer, Tübingen (DE) |
| 11:35 - 11:53 | **Summary and conclusions**  
J.A. Witjes, Nijmegen (NL) |
| 11:53 - 12:00 | **Associated abstract presentation** |
The impact of change in prophylactic antibiotics on infectious complications after radical cystectomy with orthotopic neobladder

By: Song W.1, Kim K.H.1, Yoon H.S.1, Kim C.J.2, Yoon H.N.1, Chung W.S.1, Sim B.S.1, Cho I.R.3, Choi H.J.2, Lee D.H.1

1Ewha Womans University School of Medicine, Dept. of Urology, Seoul, Korea, South, 2Ewha Womans University School of Medicine, Dept. of Internal Medicine, Seoul, Korea, South, 3Inje University Ilsan Paik Hospital, Dept. of Urology, Goyang, Korea, South
Aims and objectives of this session
The European Association of Urology (EAU) on upper tract cancer (UTUC) guidelines are meant to help minimise morbidity and improve the care of patients with UTUC. However, there may be underuse of guideline-recommended care in this potentially curable cohort. One reason is that UTUC is a rare disease. Based on the evidence available, we feel that UTUC patients with a contralateral normal kidney can be classified at the time of diagnosis as having low-risk UTUC or high-risk UTUC. This classification would allow streamlining of patient care and patient-centred management plans to be formulated. This type of risk stratification is particularly pertinent for patients who are elderly, in need of nephron-sparing surgery, or comorbid. Such a classification is crucial for highlighting to the urologic community that an alternative treatment to radical nephroureterectomy for UTUC now exists and should be seriously considered for all patients who qualify as having low-risk UTUC. We will discuss concrete examples of these challenging situations and propose actions to overcome these issues for urologists.
**Aims and objectives of this session**
As evidence on the oncological safety and long term benefits of partial nephrectomy have been accumulated, the indications of the approach are constantly expanding into larger and more complicated tumours. In addition, numerous different technical variations of partial nephrectomy have emerged with regard to management of renal ischemia (hilar or artery only clamping, selective clamping or clampless approaches), to tumour excision approach (heminephrectomy, minimal margin partial nephrectomy, tumour enucleation) and tumour bed sealing options. As a result, partial nephrectomy has evolved from a single operation into a group of nephron sparing approaches aiming into achieving optimum oncological outcomes with minimum functioning kidney damage. Perfecting the technique of nephron sparing surgery should be a goal of every upper track surgeon. In this session three partial nephrectomies performed via an open, a laparoscopic and a robotic assisted technique will be demonstrated under the critical review of expert in the field aiming into stressing important tips and tricks of each approach.

### Schedule

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<tr>
<th>Time</th>
<th>Event</th>
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</table>
| 10:30 - 10:35 | **Case presentation** 47 year old male, 6 cm tumour centrally located  
M. Brausi, Modena (IT)  |
| 10:35 - 11:00 | **Video presentation** Laparoscopic partial nephrectomy  |
| 10:35 - 10:50 | Surgical video  
P.L. Chlosta, Cracow (PL)  |
| 10:50 - 11:00 | Interrupted and challenged by:  
C.K. Bensalah, Rennes (FR)  
C. Surcel, Bucharest (RO)  |
| 11:00 - 11:25 | **Video presentation** Robotic partial nephrectomy  |
| 11:00 - 11:15 | Surgical video  
C.K. Bensalah, Rennes (FR)  |
| 11:15 - 11:25 | Interrupted and challenged by:  
P.L. Chlosta, Cracow (PL)  
C. Surcel, Bucharest (RO)  |
| 11:25 - 11:50 | **Video presentation** Open partial nephrectomy  |
| 11:25 - 11:40 | Surgical video  
C. Surcel, Bucharest (RO)  |
<table>
<thead>
<tr>
<th>Time</th>
<th>Event</th>
<th>Interrupted by</th>
<th>Challenge by</th>
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<tr>
<td>11:40 - 11:50</td>
<td><strong>Interrupted and challenged by:</strong></td>
<td>C.K. Bensalah, Rennes (FR)</td>
<td>P.L. Chlosta, Cracow (PL)</td>
</tr>
<tr>
<td>11:50 - 12:00</td>
<td><strong>Conclusion</strong></td>
<td></td>
<td>M. Brausi, Modena (IT)</td>
</tr>
</tbody>
</table>
Semi-live pelvic floor surgery: Which techniques for recurrent Stress Urinary Incontinence (SUI)

Thematic Session 14

Monday 19 March
10:30 - 12:00

Location: Red Area, Room 3 (Level 0)
Chair: To be confirmed
Panel: To be confirmed
F.C. Burkhard, Bern (CH)
G. Lemack, Dallas (US)

Aims and objectives of this session
The aim of this session is to have the surgeon illustrate and comment in semi-live video clips without sound or graphics the surgical options to deal with recurrent or persistent SUI after previous surgery. The participants have the possibility to discuss technical details of the surgical procedures as well as the optimal indications with the experts.

10:30 - 10:50
Surgery video presentation Secondary sling
R. Inman, Sheffield (GB)

10:50 - 11:00
Panel discussion

11:00 - 11:20
Surgery video presentation Laparoscopic burch
D. Waltregny, Liège (BE)

11:20 - 11:30
Panel discussion

11:30 - 11:50
Surgery video presentation Artificial sphincter in women
E. Chartier-Kastler, Paris (FR)

11:50 - 12:00
Panel discussion
### Active surveillance for low-risk prostate cancer

**Thematic Session 15**

**Location:** Blue Area, Room 1 (Level 0)

**Chair:** C.H. Bangma, Rotterdam (NL)

**Aims and objectives of this session**
This session on active surveillance for low risk prostate cancer addresses the methods for selection and monitoring in the developing field of imaging and genomics. The background for the variation in practices and results around the world is highlighted, and the role of the patient in self-management is discussed. Afterwards, the attendants of this session will be able to make a clear decision when and how to biopsy the individual patient with low risk cancer.

#### 10:30 - 10:50
**Point-counterpoint session**  
**Selection for active surveillance: Only Magnetic Resonance Imaging (MRI)-targeted lesions are relevant**

**10:30 - 10:40**  
**Pro**  
C. Moore, London (GB)

**10:40 - 10:50**  
**Con**  
C. Arsov, Düsseldorf (DE)

#### 10:50 - 11:05
**Monitoring: Can we skip biopsies?**  
A. Rannikko, Helsinki (FI)

#### 11:05 - 11:20
**Case discussion**  
**Variation of monitoring around the world:**

**Asia**  
Y.K. Kakehi, Kagawa (JP)

**North America**  
P. Carroll, San Francisco (US)

**Europe**  
A.S. Bjartell, Malmö (SE)

**11:20 - 11:30**  
**Do we need a protocol at all?**  
M. Roobol, Rotterdam (NL)

**11:30 - 11:45**  
**What can a patient do?**  
R. Valdagni, Milan (IT)

**11:45 - 11:59**  
**Associated abstract presentations**  
**Moderators:**  
M. Frydenberg, Melbourne (AU)  
A. Semjonow, Münster (DE)
Active surveillance magnetic resonance imaging study (ASIST): Results of a prospective, multicentre, randomized trial

By: Klotz L.¹, Loblaw A.², Van Der Kwast T.³, Fleshner N.¹, Ghai S.⁴, Chin J.⁵, Pond G.⁶, Haider M.⁴

¹University of Toronto, Dept. of Urology, Toronto, Canada, ²University of Toronto, Radiation Oncology, Toronto, Canada, ³University of Toronto, Dept. of Pathology, Toronto, Canada, ⁴University of Toronto, Dept. of Radiology, Toronto, Canada, ⁵University of Western Ontario, Dept. of Urology, London, Canada, ⁶McMaster University, Biostatistics, Hamilton, Canada

Active surveillance in prostate cancer for patients with non-suspicious MRI at entry: Can confirmatory biopsies be avoided?

By: Olivier J.¹, Puech P.², Fantoni JC.¹, Drumez E.³, Leroy X.⁴, Villers A.¹

¹Université de Lille, Dept. of Urology, Lille, France, ²Université de Lille, Dept. of Radiology, Lille, France, ³Université de Lille, Dept. of Statistic, Lille, France, ⁴Université de Lille, Pathology Institute, Lille, France
To get going with research in Europe
Thematic Session 16

Location: Blue Area, Room 2 (Level 0)
Chairs: J.W.F. Catto, Sheffield (GB)
        Z. Culig, Innsbruck (AT)

Aims and objectives of this session
Although urologists and urology-affiliated researchers have made great breakthrough in patient care in recent years, overall national and international financial support has declined. Improvements in urological diagnostics and therapy are only possible with high quality well funded basic, translational, and clinical research. The rules for writing scientific proposals have changed and more knowledge about project management and dissemination of results is required. The purpose of this session is to evaluate current situation in urological research funding in Europe and discuss suggestions for improvement in the future.

10:30 - 10:50
How the EAU Research Foundation can help
A.S. Bjartell, Malmö (SE)

10:50 - 11:10
EU-funded research in the past and present
G. Jenster, Rotterdam (NL)

11:10 - 11:30
Urothelium cancer research in Europe: What can we do better?
L. Dyrskjøt, Aarhus (DK)

11:30 - 11:45
Prospective randomised controlled trial: Pitfall or success
C. Gratzke, Munich (DE)

11:45 - 12:00
Discussion
Possibility to improve grant writing and evaluation
Moderator: M.S. Silay, Istanbul (TR)
Panel: A.S. Bjartell, Malmö (SE)
        L. Dyrskjøt, Aarhus (DK)
        C. Gratzke, Munich (DE)
        G. Jenster, Rotterdam (NL)
## Systemic immunotherapy in urological cancers

**Thematic Session 17**

### Monday 19 March
**10:30 - 12:00**

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<thead>
<tr>
<th>Time</th>
<th>Event</th>
<th>Speaker</th>
<th>Location</th>
</tr>
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<tbody>
<tr>
<td>10:30 - 10:45</td>
<td>Basics and beyond - What we need to know</td>
<td>J. Bedke, Tübingen (DE)</td>
<td>Blue Area, Room 3 (Level 0)</td>
</tr>
<tr>
<td>10:45 - 11:00</td>
<td>Monotherapy or combinations for Renal Cell Carcinoma (RCC) and Urothelial Carcinoma (UCa)</td>
<td>C. N. Sternberg, Rome (IT)</td>
<td>Blue Area, Room 3 (Level 0)</td>
</tr>
<tr>
<td>11:00 - 11:15</td>
<td>How to evaluate the benefit</td>
<td>Y. Loriot, Villejuif (FR)</td>
<td>Blue Area, Room 3 (Level 0)</td>
</tr>
<tr>
<td>11:15 - 11:30</td>
<td>The need for joint patient care</td>
<td>S. Foller, Jena (DE)</td>
<td>Blue Area, Room 3 (Level 0)</td>
</tr>
<tr>
<td>11:30 - 12:00</td>
<td>Case-based panel discussion Managing immuno-related side effects</td>
<td>K. Lingard, Sutton (GB)</td>
<td>Blue Area, Room 3 (Level 0)</td>
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<td></td>
<td>Moderator:</td>
<td>C. N. Sternberg, Rome (IT)</td>
<td>Blue Area, Room 3 (Level 0)</td>
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<td>Panel:</td>
<td>J. Bedke, Tübingen (DE)</td>
<td>Blue Area, Room 3 (Level 0)</td>
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<td>S. Foller, Jena (DE)</td>
<td>Blue Area, Room 3 (Level 0)</td>
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<td>Y. Loriot, Villejuif (FR)</td>
<td>Blue Area, Room 3 (Level 0)</td>
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</table>
### Complications in external genitalia surgery

**Thematic Session 18**

**Monday 19 March**

<table>
<thead>
<tr>
<th>Time</th>
<th>Session</th>
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</thead>
</table>
| 10:30 - 12:00 | **Location:** Blue Area, Room 4 (Level 0)  
**Chair:** J. Rassweiler, Heilbronn (DE) |

**Aims and objectives of this session**

This thematic session follows the tradition of reviewing type and management of complications in major fields in operative urology. This year, we want to focus on the management of complications in external genitalia surgery starting with simple circumcision, but also involving hypospadias repair and sexual traumata. Again, we were able to invite excellent expert in this field. The demonstration of complications will include videos and case demonstrations, which are discussed intensively with audience. We are looking forward to your active participation!

<table>
<thead>
<tr>
<th>Time</th>
<th>Session</th>
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</table>
| 10:30 - 10:40 | **Complications of circumcision**  
G. Bogaert, Leuven (BE) |
| 10:40 - 10:45 | **Discussion** |
| 10:45 - 10:55 | **Complications of hypospadias repair**  
M. Fisch, Hamburg (DE) |
| 10:55 - 11:00 | **Discussion** |
| 11:00 - 11:10 | **Complications of urethral surgery**  
S. Kulkarni, Pune (IN) |
| 11:10 - 11:15 | **Discussion** |
| 11:15 - 11:25 | **Complications of scrotal surgery**  
G Hatzichristou, Thessaloniki (GR) |
| 11:25 - 11:30 | **Discussion** |
| 11:30 - 11:40 | **Sexual trauma and complications**  
M. Fiedler, Heilbronn (DE) |
| 11:40 - 11:45 | **Discussion** |
| 11:45 - 11:55 | **Complications of penile and sphincter implantations**  
A. Kadioglu, Istanbul (TR) |
| 11:55 - 12:00 | **Discussion** |
Transgender healthcare: A primer for the urologist

### Aims and objectives of this session
This session will take you through a typical journey of a transgender patient. As urologists, we are the technicians and rely heavily on our psychiatrists to make the correct diagnosis before referral. Hormonal therapy is used early and it's irreversible changes are often necessary, not only to complete the real life test, but to help decide what type of surgery is best suited to the patient. The surgeries are complex, often with complications which will be discussed as well as the end goal of penile prosthesis implantation. Finally, do we have a better option now with penile transplantation on the horizon.

<table>
<thead>
<tr>
<th>Time</th>
<th>Session Title</th>
<th>Speaker</th>
<th>Location</th>
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<tbody>
<tr>
<td>10:30 - 10:45</td>
<td>Psychological evaluation and outcomes for transgenders: What the urologists needs to know</td>
<td>T. Steensma, Amsterdam (NL)</td>
<td>Blue Area, Room 5 (Level 0)</td>
</tr>
<tr>
<td>10:45 - 11:00</td>
<td>Gender-affirming endocrine treatment</td>
<td>A.D. Fisher, Florence (IT)</td>
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<tr>
<td>11:00 - 11:15</td>
<td>Vaginoplasty techniques in the Male to Female (MtF) patient</td>
<td>T. Rashid, London (GB)</td>
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<tr>
<td>11:15 - 11:30</td>
<td>Managing the urethra of the Female to Male (FtM) patient</td>
<td>R. Djinovic, Belgrade (RS)</td>
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<tr>
<td>11:30 - 11:45</td>
<td>Penile implants in FtM patients</td>
<td>G. Garaffa, London (GB)</td>
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<tr>
<td>11:45 - 12:00</td>
<td>Hot topic Getting ready for penile transplantation: A novel option?</td>
<td>N. Sopko, Baltimore (US)</td>
<td></td>
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</tbody>
</table>
ESU/ESUT/EULIS Hands-on Training Course in Endoscopic stone treatment - step 1
Sponsored by KARL STORZ

**Location:**
Yellow Area, Room 1 (Level 0)

**Chair:**
B. Somani, Southampton (GB)
N. Macchione, Milan (IT)
G.M. Kamphuis, Amsterdam (NL)
M. Özsoy, Vienna (AT)
To be confirmed
S. Proietti, Milan (IT)
T. Tokas, Hall In Tirol (AT)
E. Emiliani, Barcelona (ES)

**Aims and objectives of this session**
In this course, basic endoscopic skills can be acquired and learned. Skills associated with cystoscopy, rigid and flexible ureteroscopy are trained by the validated exercises of the Endoscopic stone treatment (EST s1). Experienced Endourologists will guide you to master navigation skills needed with hand-eye-coordination for cystoscopy, rigid ureteroscopy in a model, placement of access sheath and flexible ureteroscopy in the K-Box. The course can be used as an additional training to prepare for the EST S1 examination. Finally, all remaining questions can be answered and discussed with all tutors including the demonstration of tips and tricks.

- At the end of the course, the participants will be able to perform rigid and flexible ureteroscopy in the models
- The participants will be able to interact with tutors and gain valuable insights into the tips and tricks of basic and advanced ureteroscopy.
ESU Hands-on Training Course in Non-technical skills in surgery
Sponsored by ROCHE

**Location:** Yellow Area, Iglo

**Chair:** K. Ahmed, London (GB)

**Tutors:** To be confirmed

**Aims and objectives of this session**

The operating room is a complex and highly stressful environment that requires interaction between a large team to achieve successful outcomes for the patients. This requires not only effective procedure-specific technical skills, but also additionally a range of non-technical skills. Non-technical skills are defined as skills unrelated to the technical completion of surgical procedures. They include decision-making, team-working, communication and leadership skills.

The importance of non-technical skills is often overlooked but they are unfortunately a major cause of surgical error. Like technical skills, which are acquired over many years of practice and training, non-technical skills are not innate traits and must also be developed through training and experience.

This course will serve to introduce practicing urologists to the concept of non-technical skills using an interactive full immersion simulation environment, developed at Imperial College London, whilst undertaking common scenarios in endoscopic urological surgery. Participants will be evaluated by experts in surgical education and provided individual feedback with view for further self-improvement.

**Supporting faculty:**
N. Raison, London (GB)
A. Aydin, London (GB)
N. Khan, London (GB)
C. Lovegrove, Perth (GB)
**ESU/ESUT/EULIS Hands-on Training Course in Endoscopic stone treatment - step 1**

Sponsored by KARL STORZ

**Monday 19 March**

11:50 - 12:50

**Location:** Yellow Area, Room 1 (Level 0)

**Chair:** B. Somani, Southampton (GB)

**Tutors:**
- M. Özsoy, Vienna (AT)
- T. Tokas, Hall In Tirol (AT)
- A. Ploumidis, Athens (GR)
- B.M. Schoensee, Potsdam (DE)
- S. Proietti, Milan (IT)
- E. Emiliani, Barcelona (ES)

**Aims and objectives of this session**

In this course, basic endoscopic skills can be acquired and learned. Skills associated with cystoscopy, rigid and flexible ureteroscopy are trained by the validated exercises of the Endoscopic stone treatment (EST s1). Experienced Endourologists will guide you to master navigation skills needed with hand-eye-coordination for cystoscopy, rigid ureteroscopy in a model, placement of access sheath and flexible ureteroscopy in the K-Box. The course can be used as an additional training to prepare for the EST S1 examination. Finally, all remaining questions can be answered and discussed with all tutors including the demonstration of tips and tricks.

- At the end of the course, the participants will be able to perform rigid and flexible ureteroscopy in the models
- The participants will be able to interact with tutors and gain valuable insights into the tips and tricks of basic and advanced ureteroscopy.
ESU/ERUS Hands-on Training Course in Robotic surgery - Introduction
Sponsored by 3D SYSTEMS SIMBIONIX, MIMIC, INTUITIVE SURGICAL

Location: Yellow Area, Room 5 (Level 0)
Chair: C. Wagner, Gronau (DE)
Tutors: To be confirmed
        M. Naudin, Hyon (BE)

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

Improve your robotic surgery skills in the following areas:
• Endowrist manipulation
• Camera Control
• 3rd Arm Control
• Needle Placement and Driving
• Suturing and Knot Tying
Technological solutions for BPH
Video Session 09

Monday 19 March
12:15 - 13:45

Location: Green Area, eURO Auditorium (Level 0)

Chairs: F. Gomez Sancha, Madrid (ES)
G. Muir, Dorking (GB)
A. Porreca, Abano Terme (IT)

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

V64 Laser enucleation techniques in residual BPH management
By: Enikeev D., Glybochko P., Alyaev Y., Rapoport L., Enikeev M., Sorokin N., Sukhanov R., Taratkin M.
I.M. Sechenov First Moscow State Medical University, Research Institute of Uronephrology and Reproductive Health, Moscow, Russia

V65 Thulium fiber laser enucleation of the prostate in management of giant BPH (>200 cc)
By: Enikeev D., Glybochko P., Alyaev Y., Rapoport L., Enikeev M., Taratkin M.
I.M. Sechenov First Moscow State Medical University, Research Institute For Uronephrology And Reproductive Health, Moscow, Russia

V66 Robot-assisted “pure” adenomectomy for large prostate adenoma: Is it the way to solve the bladder outlet obstruction and maintain a normal sexual function?
By: Porpiglia F., Fiori C., Bertolo R., Checcucci E., Amparore D., Scarpa R.M.
AOU San Luigi Gonzaga Orbassano – Turin; University of Turin, Dept. of Urology, Orbassano, Italy

V67 Recommendations for safe and efficient morcellation after endoscopic enucleation of the prostate (EEP)
By: Rijo E.¹, Misrai V.², Gomez-Sancha F.³
¹Hospital Quiron Barcelona, Dept. of Urology, Barcelona, Spain, ²Clinique Pasteur, Dept. of Urology, Toulouse, France, ³ICUA-Clinica CEMTRO, Dept. of Urology, Madrid, Spain

V68 HoLEP dangers: How to avoid them
By: Codas Duarte, Daily T., Fassi-Fehri H.
Edouard Herriot Hospital, Dept. of Urology and Surgery of Transplantation, Lyon, France

V69 HoLEP performed using Quanta Litho low power laser with anteroposterior en bloc technique
By: Minagawa S., Okada S., Morikawa H.
Gyotoku General Hospital, Dept. of Urology, Chiba, Japan

V63

Transvesical robotic simple prostatectomy with 360° circumferential reconstruction: Step-by-step technique

By: Cacciamani G.E. ¹, Medina L. ¹, Ashrafi A.N ¹, Landsberger H. ¹, Winter M. ¹, Desai M. ¹, Aron M. ¹, Berger A. ²

¹University of Southern California, Dept. of Urology, Los Angeles, United States of America, ²USC Institute of Urology, Dept. of Urology, Los Angeles, United States of America
Straight access to the stone: Percutaneous nephrolithotomy
Poster Session 63

Monday 19 March
12:15 - 13:45

Location: Green Area, Room 1 (Level 0)
Chairs: O. Angerri Feu, Barcelona (ES)
        M. Bultitude, London (GB)
        S.Y. Cho, Seoul (KR)

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

To be confirmed

855
Is PCNL changing in the UK – analysis of 9500 cases from the BAUS PCNL Registry

By: Finch W. ¹, Armitage J. ², Withington J. ³, Irving S. ¹, Fowler S. ⁴, Burgess N. ¹, Wiseman O. ²
¹Norfolk and Norwich University Hospitals, Dept. of Urology, Norwich, United Kingdom,
²Addenbrookes Hospital, Dept. of Urology, Cambridge, United Kingdom,
³Guy's Hospital, Dept. of Urology, London, United Kingdom,
⁴BAUS, Audit, London, United Kingdom

856
Nephrolithometry scoring systems in percutaneous nephrolithotomy: The Guy’s stone score, S.T.O.N.E. nephrolithometry, CROES nomogram and S-ReSC score

By: Bibi M., Sellami A., Ouanes Y., Chaker K., Ben Rhouma S., Nouira Y.
Hospital La Rabta, Dept. of Urology, Tunis, Tunisia

857
Do culture positive residual fragments have an impact on postoperative SIRS in patients undergoing PNL?

By: Degirmenci T. ¹, Bozkurt I.H. ¹, Celik S. ¹, Arslan B. ², Yonguc T. ¹, Sefik E. ¹, Dincel C. ¹
¹Bozyaka Education and Research Hospital, Dept. of Urology, Izmir, Turkey,
²Istanbul Taksim Training and Research Hospital, Dept. of Urology, Izmir, Turkey

858
Stone culture is not better than bladder urine culture as SIRS predictor after percutaneous nephrolithotomy

By: Corsaro A., Özsoy M., Veser J., Seitz C.
Vienna General Hospital, Dept. of Urology, Vienna, Austria

859
SabreSource: A novel percutaneous nephrolithotomy apparatus to aid collecting system puncture - a preliminary report

By: Howlett J., Lazarus J., Kaestner L., Moore A.
<table>
<thead>
<tr>
<th>Session</th>
<th>Title</th>
<th>Authors</th>
</tr>
</thead>
<tbody>
<tr>
<td>860</td>
<td>Intrarenal pressure during percutaneous nephrolithotomy – ex vivo measurements for different PNL systems</td>
<td>Wilhelm K., Schulze-Ardey J., Spaeth J., Schumann S., Miernik A.</td>
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<tr>
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<td>University of Freiburg, Medical Centre, Dept. of Urology, Freiburg, Germany</td>
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<td>Tel-Aviv Sourasky Medical Center, Dept. of Urology, Tel-Aviv, Israel, School of Mechanical Engineering, Dept. of Hydrology, Tel-Aviv, Israel, Tel-Aviv University, Dept. of Hydrology, Tel-Aviv, Israel, Tel-Aviv Sourasky Medical Center, Dept. of Radiology, Tel-Aviv, Israel</td>
</tr>
<tr>
<td>862</td>
<td>The effect of anterior calyx stone on complication and stone free rates in percutaneous nephrolithotomy operations</td>
<td>Kalkanli A., Ozdemir E., Cilesiz N.C., Ozkan A., Arslan B., Hazar A.I., Aydin M., Tandogdu Z.</td>
</tr>
<tr>
<td></td>
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<td>Taksim Gaziosmanpasa Training and Research Hospital, Dept. of Urology, Istanbul, Turkey, Northern Institute for Cancer Research Newcastle University, Dept. of Urology, Newcastle, United Kingdom</td>
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<td>Rio Hortega University Hospital, Dept. of Urology, Valladolid, Spain, Rio Hortega University Hospital, Dept. of Urology, Valladolid, Spain</td>
</tr>
<tr>
<td>863</td>
<td>Massive vs limited pneumatic stone disintegration in PCNL for stag horn stone: A randomized study</td>
<td>Gamal Saad W., Mmdouh A.</td>
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<td>Sohag University Hospital, Dept. of Urology, Sohag, Egypt</td>
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<tr>
<td>864</td>
<td>Mini-PCNL versus standard-PCNL for the management of 20-40 mm size kidney stones: The initial result of a multi-center randomized controlled trial</td>
<td>Zeng G.</td>
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<tr>
<td></td>
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<td>Minimally Invasive Surgery Center, The First Affiliated Hospital of Guangzhou Medical University, Dept. of Urology, Guangzhou, China</td>
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## Scientific Programme - EAU18 Copenhagen

<table>
<thead>
<tr>
<th>Session</th>
<th>Title</th>
<th>Authors</th>
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</thead>
<tbody>
<tr>
<td>865</td>
<td>Comparison of Super-mini PCNL (SMP) versus Miniperc for stones larger than 2 cm: A propensity score-matching study</td>
<td>Zeng G.¹, Liu Y.², Zhu W.³. The First Affiliated Hospital of Guangzhou Medical University, Dept. of Urology, Guangzhou, China, The First Affiliated Hospital of Guangzhou Medical University, Minimally Invasive Surgery Center, Guangdong Key Laboratory of Urology, Dept. of Urology, Guangzhou, China.</td>
</tr>
<tr>
<td>866</td>
<td>A comparison of tubeless versus totally tubeless PCNL</td>
<td>Ahmad M., Shahiman M.A., Jahangir M. Rawalpindi Medical University, Dept. of Urology, Rawalpindi, Pakistan</td>
</tr>
<tr>
<td>867</td>
<td>Are the different renal drainage options after percutaneous nephrolithotomy different in terms of efficacy and safety? Percutaneous nephrostomy and ureteral stents</td>
<td>Pimentel Torres J., Oliveira J.N., Mota P., Cordeiro A., Morais N., Anacleto S., Lima E. Hospital de Braga, Dept. of Urology, Braga, Portugal</td>
</tr>
</tbody>
</table>
### Scientific Programme - EAU18 Copenhagen

**Seeing is believing: Advances in imaging and optics in urothelial cancer**

**Poster Session 64**

**Monday 19 March**

**12:15 - 13:45**

**Location:** Green Area, Room 2 (Level 0)

**Chairs:**
- T.M. De Reijke, Amsterdam (NL)
- M. Moschini, Luzern (CH)
- R. Nair, London (GB)

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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<tr>
<th><em>868</em></th>
<th><strong>Quantitative and qualitative multimodal optical analysis to discriminate urothelial carcinoma grades</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>By:</strong></td>
<td>Pradere B.¹, Poulon F.², Doizi S.³, Cussenot O.³, Compérat E.⁴, Abi Haidar D.⁵, Traxer O.³</td>
</tr>
<tr>
<td>¹CHU Tours, Dept. of Urology, Tours, France, ²IMNC laboratory, UMR 8165, Paris, France, ³Hopital Tenon, Dept. of Urology, Paris, France, ⁴Hopital Tenon, Dept. of Pathology, Paris, France, ⁵IMNC Laboratory, UMR 8165, Paris, France</td>
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<tr>
<th>869</th>
<th><strong>4D ultrasound cystoscopy with Fly Through in the evaluation of urinary bladder tumors: Feasibility and outcomes</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>By:</strong></td>
<td>Grande P.¹, Lemma A.¹, Cristini C.¹, Cantisani V.², Forte V.², Ciccariello M.², Drudi F.², Catalano C.², D'Ambrosio F.², Di Pierro G.B.¹</td>
</tr>
<tr>
<td>¹Sapienza University, Dept. of Obstetrics and Gynaecology Sciences and Urologic Sciences, Rome, Italy, ²Sapienza University, Dept. of Radiological Sciences, Rome, Italy</td>
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<tr>
<th>870</th>
<th><strong>Objective evaluation for the cystoscopic diagnosis of bladder cancer using artificial intelligence</strong></th>
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</thead>
<tbody>
<tr>
<td><strong>By:</strong></td>
<td>Ikeda A.¹, Hoshino Y.², Nosato H.³, Kojima T.¹, Kawai K.¹, Ohishi Y.³, Sakanaishi H.³, Murakawa M.³, Yamanouchi N.², Nishiyama H.¹</td>
</tr>
<tr>
<td>¹University of Tsukuba, Faculty of Medicine, Dept. of Urology, Tsukuba, Japan, ²Toho University, Faculty of Science, Dept. of Information Science, Funabashi, Japan, ³National Institute of Advanced Industrial Science and Technology, Artificial Intelligence Research Center, Tsukuba, Japan</td>
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<tr>
<th><em>871</em></th>
<th><strong>Diagnostic classification of cystoscopic images using deep convolutional neural networks</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>By:</strong></td>
<td>Eminaga O.¹, Semjonow A.², Breil B.³</td>
</tr>
<tr>
<td>¹University Hospital Cologne/Stanford Medical School, Dept. of Urology, Cologne/Palo Alto, United States of America, ²University Hospital Muenster, Dept. of Urology, Muenster, Germany</td>
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</table>
| 872 | Identification of red/green/blue values from white-light imaging and narrow-band imaging for the discrimination of bladder cancer features | By: Hah Y.S., Lee K.S., Koo K.C., Chung B.H.  
1Yonsei University College of Medicine, Dept. of Urology, Seoul, Korea, South, 2Yonsei University College of Medicine, Dept. of Urology, Seoul, Korea, South |
| 873 | Multiparametric cystoscopy for the detection of bladder cancer using wide field multispectral imaging during TUR-B | By: Kriegmair M.C., Theuring M., Rother J., Grychtol B., Deliolanis N., Michel M., Ritter M., Bolenz C.  
1University Medical Center Mannheim, Dept. of Urology, Mannheim, Germany, 2Fraunhofer Project Group, Dept. of Urology, Mannheim, Germany, 3University Medical Center Mannheim, Dept. of Urology, Mannheim, Germany, 4University of Ulm, Dept. of Urology, Ulm, Germany |
1Careggi University Hospital, Dept. Of Urology, Florence, Italy, 2University of Florence, European Laboratory for Non-Linear Spectroscopy, Dept. Of Physics, Florence, Italy |
| 875 | New imaging techniques for bladder cancer diagnostics | By: de Jong M.  
Scinvivo, Dept. of Research and Development, Amsterdam, Netherlands, The |
1Yonsei University College of Medicine, Dept. of Urology, Seoul, Korea, South, 2Yonsei University College of Medicine, Dept. of Urology, Seoul, Korea, South |
1Academic Medical Center Amsterdam, Dept. of Urology, Amsterdam, Netherlands, The, 2Academic Medical Center, Dept. of Urology, Amsterdam, Netherlands, The, 3Academic Medical Center, Dept. of Pathology, Amsterdam, Netherlands, The, 4Academic Medical Center, Dept. of Biomedical Engineering and Physics, Amsterdam, Netherlands, The |
878  Computer-assisted diagnosis during blue light cystoscopy using image analysis methods: Ahead of pathology?

By: Kriegmair M.C. 1, Hartmann A. 2, Todenhöfer T. 3, Ali N. 4, Hipp G. 5, Knoll T. 6, Honeck P. 1, Oberneder R. 5, Stenzl A. 3, Popp J. 4, Bocklitz T. 4

1University Medical Center Mannheim, Dept. of Urology, Mannheim, Germany, 2University Erlangen-Nuernberg, Dept. of Pathology, Erlangen-Nuernberg, Germany, 3University Hospital Tübingen, Dept. of Urology, Tübingen, Germany, 4Friedrich-Schiller-University, Institute of Physical Chemistry and Abbe Center of Photonics (IPC), Jena, Germany, 5Urological Hospital Planegg, Dept. of Urology, Munich-Planegg, Germany, 6Klinikum Sindelfingen-Böblingen, Dept. of Urology, Sindelfingen, Germany

879  The utility of pre-operative CT urography in the diagnosis of patients with suspected upper tract urothelial cancer

By: Ellis R. 1, Scriven S. 1, Lloyd J. 2, Ratan H. 1

1Nottingham City Hospital, Dept. of Urology, Nottingham, United Kingdom, 2Nottingham City Hospital, Dept. of Radiology, Nottingham, United Kingdom

880  Accuracy of fluorescence and narrow band imaging in the contemporary management of bladder cancer: A systematic review with diagnostic meta-analysis

By: Russo G.I. 1, Cacciamani G. 2, Stenzl A. 3, Artibani W. 2, Gill I. 4, Morgia G. 1

1University of Catania, Dept. of Urology, Catania, Italy, 2University of Verona, Dept. of Urology, Verona, Italy, 3University of Tübingen, Dept. of Urology, Tübingen, Germany, 4University of Southern California, Dept. of Urology, Los Angeles, United States of America
New ideas and old questions on how to deal with benign upper tract diseases
Poster Session 65
Monday 19 March
12:15 - 13:45
Location: Red Area, Room 1 (Level 0)
Chairs: W. Mahfouz, Alexandria (EG)
        J. Patterson, Sheffield (GB)
        O. Traxer, Paris (FR)

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

881
Treating benign ureteroenteric strictures: 27-year experience comparing endourological techniques with open surgical approach

By: Van Son M.J. 1, Lock T. 2, Fransen Van De Putte E. 3, Peters M. 1, Meijer R. 2
1University Medical Center Utrecht, Dept. of Radiotherapy, Utrecht, Netherlands, The,
2University Medical Center Utrecht, Dept. of Urology, Utrecht, Netherlands, The,
3Antoni van Leeuwenhoek Hospital, Dept. of Urology, Amsterdam, Netherlands, The

882
Prospective study of the safety and outcomes of robotic-assisted laparoscopic ureterolysis including comparative analysis with open ureterolysis in patients with ureteric obstruction from retroperitoneal fibrosis (RPF) managed in a specialist RPF centre

By: Fernando A., Challacombe B., De La Rosa A., O'Brien T.
Guy's and St Thomas' Hospital, Dept. of Urology, London, United Kingdom

883
Withdrawn
To be confirmed

884
Single-use versus reusable digital flexible ureterorenoscopes. Is the irrigant flow comparable?

By: Dragoş L.B. 1, De Coninck V.M.J. 2, Rodriguez-Monsalve Herrero M. 2, Keller E.X. 2
1University of Medicine and Pharmacy, Dept. of Urology, Timisoara, Romania, 2Tenon Hospital, Dept. of Urology, Paris, France, 3University Hospital Southampton NHS Trust, Dept. of Urology, Southampton, United Kingdom, 4Medical University of Warsaw, Dept. of Urology, Warsaw, Poland, 5Clinical Emergency County Hospital, Dept. of Urology, Timisoara, Romania, 6Marmara University, Dept. of Urology, Istanbul, Turkey, 7San Giovanni di Dio Hospital, Dept. of Urology, Agrigento, Italy, 8San Raffaele Hospital, Dept. of Urology, Milan, Italy, 9Tenon Hospital, Sorbonne Universités, UPMC Paris VI, Groupe de Recherche Clinique sur la Lithiase Urinaire, GRC n°20, Dept. of Urology, Paris, France
Risk factors associated with developing septic shock among patients with an infected obstructed upper urinary tract

By: Lavi A., Tzemah S., Hussein A., Bishara I., Sherbecahkov N., Mashiah A., Zelichenko G., Gross M., Cohen M.
Haamek medical center, Dept. of Urology, Afula, Israel

A challenging evaluation for etiology of recurrent hematuria: Urinary system pathology or a complication of antiplatelet/anticoagulant treatment

By: Dikmen A.V.
Polatlı Duatepe Government Hospital, Dept. of Urology, Ankara, Turkey

Histomorfometric evaluation of normotensive and hypertensive rats' kidney treated with Tribulus terrestris

By: Gonçalves G., Da Silva M., Ferraz V., Sampaio F., De Souza D.
State University of Rio de Janeiro, Urogenital Research Unit, Rio de Janeiro, Brazil

Laparoscopic ureteroureterostomy – international multicenter experience

By: Macek P. ¹, Abdel-Karim A. ², Hora M. ³, Fanta M. ⁴, Elsalm S. ⁴, Dytrych P. ⁵, Hanus T. ¹
¹General University Hospital and First Medical Faculty of Charles University, Dept. of Urology, Prague, Czech Republic, ²Alexandria University, Dept. of Urology, Alexandria, Egypt, ³Faculty Hospital Pilsen, Dept. of Urology, Pilsen, Czech Republic, ⁴General University Hospital and First Medical Faculty of Charles University, Dept. of Gynecology and Obstetrics, Prague, Czech Republic, ⁵General University Hospital and First Medical Faculty of Charles University, Dept. of Surgery, Prague, Czech Republic

Novel trans-umbilical laparoscopic surgery for adrenal cysts

By: Zou X., Wu G., Zhang Z., Zhang G., Yuan Y., Xiao R.
Gannan Medical University, Dept. of Urology, Ganzhou, China

The impact of single kidney dysfunction on the psychopathology in young men: Population-based analysis of military manpower administration national database in Korea

By: Kim J.J., Hong S.K., Byun S-S.
Seoul National University Bundang Hospital, Dept. of Urology, Seongnam, Korea, South

Does soft coagulation damage renal tissue in robot-assisted partial nephrectomy?

By: Shiozaki K. ¹, Atagi Y. ¹, Miyake T. ¹, Tsujioka T. ¹, Izumi K. ¹, Yamanaka M. ¹, Kawanishi Y. ¹, Kawanishi S. ², Kanayama H. ³
¹Takamatsu Red Cross Hospital, Dept. of Urology, Takamatsu, Japan, ²Goshikidai Hospital, Dept. of Urology, Takamatsu, Japan, ³Tokushima University, Dept. of Urology, Tokushima, Japan
The European experience on robot-assisted kidney transplantation: Minimum of one year follow up

By: Territo A.¹, Breda A.¹, Basile G.¹, Alcaraz A.², Musquera M.², Doumerc N.³, Decaestecker K.⁴, Desender L.⁵, Stockle M.⁶, Janssen M.⁶, Fornara P.⁷, Mohammed N.⁷, Siena G.⁸, Sem S.⁸, Sahin S.⁹, Tu?cu V.⁹
¹Fundació Puigvert, Dept. of Urology, Barcelona, Spain, ²Hospital Clinic, Dept. of Urology, Barcelona, Spain, ³University Hospital of Rangueil, Dept. of Urology and Renal Transplantation, Toulouse, France, ⁴Ghent University Hospital, Dept. of Urology, Ghent, Belgium, ⁵Ghent University Hospital, Dept. of Thoracic and Vascular Surgery, Ghent, Belgium, ⁶University Saarland, Dept. of Urology, Homburg, Germany, ⁷University Hospital Halle (Saale), Dept. of Urology, Halle, Germany, ⁸University of Florence, Dept. of Urology, Florence, Italy, ⁹Bakirkoy Sadi Konuk Training and Research Hospital Center, Dept. of Urology, Istanbul, Turkey

Associated video presentation Endoscopic incision for uretero-ileal anastomotic stricture: Step by step technique

By: Pérez Schoch M.¹, Carballo Quintá M.¹, Almuster Domínguez S.¹, Castro Iglesias M.¹, Sánchez Ramos J.¹, Montero Fabuena R.¹, Diaz Álvarez J.M.¹, Martínez Vázquez A.², López García S.¹, López Díez M.E.¹, Martínez-Sapiña Llanas I.¹, Barros Rodríguez J.M.¹, Ojea Calvo A.¹
¹Hospital Álvaro Cunqueiro, Dept of Urology, Vigo, Spain, ²Hospital Álvaro Cunqueiro, Dept. of Radiology, Vigo, Spain

Associated video presentation Robotic lingual mucosal onlay graft ureteroplasty for proximal ureteral stricture

To be confirmed
Selecting the optimal approach to partial nephrectomy

**Poster Session 66**

**Monday 19 March**

**12:15 - 13:45**

**Location:** Red Area, Room 2 (Level 0)

**Chairs:**
- A. Antonelli, Brescia (IT)
- A. Kutikov, Philadelphia (US)
- M. Oya, Tokyo (JP)

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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**894**

**Fibrotic Adhesive Toxic-fat (F.A.T.): The association of fibrotic and adhesive perirenal fat with peri-operative outcomes of robot assisted partial nephrectomy (RAPN)**

By: Chessa F.¹, Schiavina R.¹, Angiolini A.¹, Borghesi M.¹, Gaudiano C.², Busato F.², Di Carlo M.², Giunchi F.³, Bianchi L.¹, Pultrone C.¹, Dababneh H.¹, Fiorentino M.³, Brunocilla E.¹

¹University of Bologna, Dept. of Urology, Bologna, Italy, ²S. Orsola-Malpighi University Hospital, Dept. of Diagnostic Medicine, Bologna, Italy, ³University of Bologna, Dept. of Pathology, Bologna, Italy

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**895**

**Perioperative outcomes of aspirin use in partial nephrectomy**

By: Ingham M., Mossanen M., Krasnow R., Wang Y., Altthaus A., Chang S.

Brigham and Women's Hospital, Harvard Medical School, Dept. of Urologic Surgery, Boston, United States of America

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**896**

**The impact of surgical strategy in robot-assisted partial nephrectomy: Should we treat anterior tumours with transperitoneal access and posterior tumours with retroperitoneal access?**

By: Larcher A.¹, De Naeyer G.², Xiangjun L.³, Hamilton Z.⁴, Cianflone F.⁵, D'Hondt F.⁴, Bindayi A.⁴, Ma X.³, Capitanio U.⁵, Schatteman P.², Derweesh I.⁴, Zhang X.³, Montorsi F.⁵, Mottrie A.¹

¹ORSI Academy, Dept. of Urology, Melle, Belgium, ²Onze Lieve Vrouw Hospital, Dept. of Urology, Aalst, Belgium, ³Chinese People's Liberation Army General Hospital, Dept. of Urology, Beijing, China, ⁴Moores UCSD Cancer Center, University of California San Diego School of Medicine, Dept. of Urology, San Diego, CA, United States of America, ⁵Urological Research Institute, IRCCS Ospedale San Raffaele, Unit of Urology, Division of Oncology, Milan, Italy

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**897**

**Endoscopic robot-assisted simple enucleation vs laparoscopic simple enucleation with single layer renorrhaphy technique in localized renal tumors: A propensity score-matching analysis from a high-volume centre**
898

**Surgical nomogram for predicting the likelihood of postoperative surgical complications in patients treated with partial nephrectomy: A prospective multicenter observational study (the RECORd 2 project)**

By: Mari A.¹, Campi R.¹, Borghesi M.², Schiavina R.², Brunocilla E.², Gontero P.³, Marson F.⁴, Porpiglia F.⁵, Bertolo R.⁵, Antonelli A.⁶, Simeone C.⁶, Montorsi F.⁷, Capitanio U.⁷, Longo N.⁸, Mirone V.⁸, Roscigno M.⁹, Li Marzi V.¹, Montanari E.¹⁰, Trombetta C.¹¹, Siracusano S.¹², Artibani W.¹², Volpe A.¹³, Ficarra V.¹⁴, Schips L.¹⁵, Vespasiani G.¹⁶, Celia A.¹⁷, Carini M.¹, Minervini A.¹

¹Careggi University Hospital, Dept. of Urology, Florence, Italy, ²University of Bologna, Dept. of Urology, Bologna, Italy, ³San Giovanni University of Studies of Torino, Dept. of Urology, Turin, Italy, ⁴San Giovanni Battista Hospital, University of Studies of Torino, Dept. of Urology, Turin, Italy, ⁵San Luigi Gonzaga Hospital, Dept. of Urology, Orbassano, Italy, ⁶University of Brescia, Dept. of Urology, Brescia, Italy, ⁷IRCCS San Raffaele Scientific Institute, Dept. of Urology, Milan, Italy, ⁸University Federico II of Naples, Dept. of Urology, Naples, Italy, ⁹Papa Giovanni XXIII Hospital, Dept. of Urology, Bergamo, Italy, ¹⁰Fondazione IRCCS, Dept. of Urology, Milan, Italy, ¹¹University of Trieste, Dept. of Urology, Trieste, Italy, ¹²University of Verona, Dept. of Urology, Verona, Italy, ¹³University Hospital, Dept. of Urology, Novara, Italy, ¹⁴University of Messina, Dept. of Urology, Messina, Italy, ¹⁵SS Annunziata Hospital, Dept. of Urology, Chieti, Italy, ¹⁶University Hospital of Tor Vergata, Dept. of Urology, Rome, Italy, ¹⁷San Bassiano Hospital, Dept. of Urology, Bassano del Grappa, Italy

899

**Comprehensive comparison of CSA, RENAL, PADUA, and C-index in predicting functional change after partial nephrectomy in small renal mass: An approach using computed tomography-based renal volumetry**

By: Lee C.H.¹, Ku J.Y.², Seo W.I.¹, Ha H.K.²

¹Inje University Busan Paik Hospital, Inje University College of Medicine, Dept. of Urology, Busan, Korea, South, ²Pusan National University Hospital, Pusan National University School of Medicine, Dept. of Urology, Busan, Korea, South

900

**Development of a patient decision aid for complex, localized renal masses**

By: McAlpine K.¹, Breau R.¹, Stacey D.², Knee C.¹, Lavallée L.¹

¹The Ottawa Hospital, Division of Urology, Ottawa, Canada, ²The Ottawa Hospital Research Institute, Centre for Practice Changing Research, Ottawa, Canada

901

**Variations in renal cortex volumes before and after partial nephrectomy: A pilot study on 30 cases**

By: Tellini R.¹, Vecchia A.¹, Ferrari F.¹, Palumbo C.¹, Zamboni S.¹, Ambrosini R.², Simeone C.¹, Antonelli A.¹

¹Spedali Civili Hospital University of Brescia, Dept. of Urology, Brescia, Italy, ²Spedali Civili Hospital University of Brescia, Dept. of Radiology, Brescia, Italy
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<tr>
<td>902</td>
<td>Comparison of surface, intermediate and base scoring system with clinicopathologic findings in nephron sparing surgery</td>
<td>Çitamak B., Haberal H., Akdogan B.</td>
<td>Hacettepe University, Dept. of Urology, Ankara, Turkey</td>
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<td>903</td>
<td>Centrality index as a risk factor for renal function impairment at 1 year after laparoscopic partial nephrectomy</td>
<td>Kim H.T.¹, Kim J.W.², Lee Y.J.¹, Chung J-W.¹, Ha Y-S.¹, Lee J.N.¹, Kim B.S.¹, Kim T.¹, Yoo E.S.¹, Chung S.K.¹, Kwon T.G.¹</td>
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<pre><code>                                                             | Kyungpook National University School of Medicine, Dept. of Urology, Daegu, Korea, South          |
</code></pre>
<p>| 904 | Modified robot-assisted simple enucleation with single layer renorrhaphy technique versus standard robot-assisted partial nephrectomy for treating localized renal cell carcinoma | Zhao X., Lu Q., Xu L., Qu F., Yao L., Liu T., Gan W., Guo H.                                      | Drum Tower Hospital, Medical School of Nanjing University, Dept. of Urology, Nanjing, China             |
| San Luigi Gonzaga Hospital, Dept. of Urology, Orbassano, Italy                                   |
| 906 | Analysis of the impact of assistant surgeon experience on peri-operative outcomes of robotic partial nephrectomy | Bosquet E., Khene Z-E., Peyronnet B., Goujon A., Robert C., Freton L., Grafeille V., Verhoest G., Mathieu R., Bensalah K. |
| Rennes University Hospital, Dept. of Urology, Rennes, France                                     |
| 907 | The learning curve for robot-assisted partial nephrectomy: Impact of surgical experience on perioperative outcomes | Larcher A.¹, Peyronnet B.², De Naeyer G.³, Muttin F.⁴, Khene Z.E.², Schatteman P.³, D'Hondt F.³, Ferreiro C.³, Capitanio U.⁴, Montorsi F.⁴, Bensalah K.² |
| ORSI Academy, Dept. of Urology, Melle, Belgium, Rennes University Hospital, Dept. of Urology, Rennes, France, Onze Lieve Vrouw Hospital, Dept. of Urology, Aalst, Belgium, Urological Research Institute, IRCCS Ospedale San Raffaele, Unit of Urology, Division of Oncology, Milan, Italy |
| 908 | The effect of onset age and involved organs on overall survival in Von Hippel-Lindau disease |                                                                                                   |                                                                                                       |</p>
Scientific Programme - EAU18 Copenhagen

Peking University First Hospital, Dept. of Urology, Beijing, China
New imaging for the lower urinary tract
Poster Session 67

Location: Red Area, Room 3 (Level 0)
Chairs: F. Deho, Milan (IT)
M. Bertolotto, Trieste (IT)
T.A. McNicholas, Herts (GB)

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.

* 909 Diffusion-weighted MRI as an imaging biomarker for histological grade of bladder cancer: Semi-automatic segmentation analysis

By: Kaneko K.¹, Yoshida S.¹, Takahara T.², Sakamoto T.³, Yokoyama M.¹, Ishioka J.¹, Matsuoka Y.¹, Saito K.¹, Kihara K.¹, Fujii Y.¹
¹Tokyo Medical and Dental University, graduated school, Dept. of Urology, Tokyo, Japan,
²Tokai University School of Engineering, Dept. of Biomedical Engineering, Tokyo, Japan,
³PixSpace, Ltd., Dept. of Radiology, Tokyo, Japan

910 Can ultrasound renal tract replace CT intravenous urogram in patients investigated for non-visible haematuria? Results of the DETECT I study

By: Tan W.S.¹, Feber A.², Sarpong R.¹, Khetrapal P.¹, Rodney S.¹, Jail R.¹, Dong L.², Rezaee S.², Williams N.¹, Brew-Graves C.¹, Kelly J.¹
¹University College London, Division of Surgery & Interventional Science, London, United Kingdom,
²University College London, UCL Cancer Institute, London, United Kingdom

911 Microscopic hematuria and use of oral anticoagulation in a check-up population: Prevalence and work up findings

By: Swidan A., Mosharafa A., Elkady A., Elgammal A.
Cairo University, Dept. of Urology, Cairo, Egypt

912 Can diffusion-weighted magnetic resonance imaging predict response to platinum-based chemotherapy in urothelial carcinoma?

By: Sakamoto K.¹, Ito M.¹, Kataoka M.¹, Suzuki H.¹, Takemura K.¹, Ikuta S.², Nakanishi Y.¹, Takaki Y.², Yokoyama Y.³, Tobisu K.¹, Koga F.¹
¹Tokyo Metropolitan Cancer and Infectious Diseases Center Komagome Hospital, Dept. of Urology, Bunkyo-ku, Japan,
²Tabata Radiology Clinic, Dept. of Radiology, Kita-ku, Japan,
³Tokyo Metropolitan Cancer and Infectious Diseases Center Komagome Hospital, Dept. of Diagnostic Radiology, Bunkyo-ku, Japan
913 Absence of inchworm sign on DWI as a predictive marker for progression in pT1 bladder cancer

By: Yajima S. 1, Yoshida S. 1, Takahara T. 2, Yokoyama M. 1, Ishioka J. 1, Matsuoka Y. 1, Saito K. 1, Kihara K. 1, Fujiy Y. 1
1Tokyo Medical and Dental University, Dept. of Urology, Tokyo, Japan, 2Tokai University School of Engineering, Dept. of Biomedical Engineering, Tokyo, Japan

914 The usefulness of diffusion-weighted MRI in the differential diagnosis of urachal disorders

By: Soma T. 1, Yoshida S. 1, Tanaka H. 2, Uehara S. 1, Yasuda Y. 1, Kijima T. 1, Yokoyama M. 1, Ishioka J. 1, Matsuoka Y. 1, Saito K. 1, Kihara K. 1, Fujiy Y. 1
1Tokyo Medical and Dental University Graduate School, Dept. of Urology, Tokyo, Japan, 2Ochanomizu Surugadai Clinic, Dept. of Radiology, Tokyo, Japan

915 Withdrawn
To be confirmed

916 Sonourethrography: Alternative technique in diagnostic urethral strictures

By: Krukowski J., Sowa M., Kaluzny A., Frankiewicz M., Klacz J., Matuszewski M.
Medical University of Gdansk, Dept. of Urology, Gdansk, Poland

917 Magnetic resonance imaging in urethral strictures with a special focus on spongiofibrosis - from image to a 3D-print. Joint radiological and urological perspective

By: Frankiewicz M. 1, Markiet K. 2, Belka M. 3, Matuszewski M. 1, Krukowski J. 1
1University Clinical Centre in Gdansk, Dept. of Urology, Gdansk, Poland, 2University Clinical Centre in Gdansk, Dept. of Radiology, Gdansk, Poland, 3Medical University of Gdansk, Dept. of Pharmaceutical Chemistry, Gdansk, Poland

918 Penile fracture: Ultrasound value in the diagnosis and early surgical treatment

Hospital Universitary Miguel Servet, Dept. of Urology, Zaragoza, Spain

919 Pre- and intraoperative radiation exposure of medical staff during dynamic sentinel node biopsy in penile cancer patients

By: Naumann C.M. 1, Colberg C. 1, Knüpfer S. 1, Dischinger J. 2, Jünemann K-P. 1, Lützen U. 3, Hamann M.F. 1
1University Hospital Schleswig Holstein Campus Kiel, Dept. of Urology and Pediatric Urology, Kiel, Germany, 2Christian-Albrechts-University, Dept. of Northern German Seminar for Radiation Protection gGmbH, Kiel, Germany, 3University Hospital Schleswig
### 920

**Intracavernosal versus intraurethral alprostadil before penile duplex ultrasound: Results from a comparative study**

By: Risi O.\(^1\), Manfredi A.\(^1\), Manica M.\(^2\), Lisanti R.C.\(^3\), La Croce G.\(^2\), Saccà A.\(^2\)

\(^1\)ASST Bergamo Ovest, Dept. of SSD Urodynamics and Andrology, Treviglio, Italy, \(^2\)ASST Papa Giovanni XXIII, Dept. of Urology, Bergamo, Italy, \(^3\)Humanitas Cliniche Gavazzeni, Dept. of Urology, Bergamo, Italy

### 921

**Ultrasound predictive factors for efficacy and safety of the use of Collagenase Clostridium Histolyticum (CCH) in the treatment of Peyronie's disease (PD): Impact on patient’s selection**

By: Fernandez Pascual E.\(^1\), Martínez-Salamanca J.I.\(^1\), Cerezo E.\(^1\), Minaya J.\(^1\), Carballido J.\(^1\)

LYX Institute of Urology, Dept. of Urology, Madrid, Spain

### 922

**The utility of MRI of the penis in the management of Peyronie disease**

By: Alhammadi A.\(^1\), Ouzaid I.\(^2\), Fernandez P.\(^3\), Hupertan V.\(^4\), Ravery V.\(^2\)

\(^1\)Bichat Hospital, Dept. of Urology, Paris, France, \(^2\)Bichat Hospital, Dept. of Urology, Paris, France, \(^3\)Bichat Hospital, Dept. of Radiology, Paris, France, \(^4\)Clinique Turin, Dept. of Urology, Paris, France
Prostate cancer staging: Imaging versus statistics - look or calculate?

**Location:** Blue Area, Room 1 (Level 0)

**Chairs:**
- P.L. Chlosta, Cracow (PL)
- T. Maurer, Munich (DE)
- N. Suardi, Milan (IT)

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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**923**

**Staging performance and clinical impact of 68Ga-PSMA 11 ligand PET/MRI for primary diagnosed prostate cancer**


1Medical University of Vienna, Dept. of Urology, Vienna, Austria, 2Medical University of Vienna, Dept. of Pathology, Vienna, Austria, 3Medical University of Vienna, Dept. of Radiology, Vienna, Austria, 4Medical University of Vienna, Dept. of Nuclear Medicine, Vienna, Austria, 5Medical University of Vienna, Dept. of Radiation Oncology, Vienna, Austria

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**925**

**North American validation and head-to-head comparison of four preoperative nomograms for prediction of lymph node invasion before radical prostatectomy**


1Ospedale San Raffaele, Dept. of Oncology, Milan, Italy, 2SS Annunziata Hospital, Dept. of Urology, Chieti, Italy, 3University Medical Center, Dept. of Urology, Hamburg, Germany, 4University of Montreal Health Center, Dept. of Urology, Montréal, Canada, 5University of Montreal Health Center, Cancer Prognostics And Health Outcomes Unit, Montréal, Canada, 6Henry Ford Hospital, Dept. of Urology, Detroit, United States of America, 7Ospedale San Raffaele, Dept. of Oncology/Unit of Urology, URI, Milan, Italy, 8Medical University of Vienna, Dept. of Urology, Vienna, Austria

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**926**

**Inclusion of prostate cancer foci outside imaging detected index lesion improves the ability to predict final pathological stage: Implications for a correct patient staging**

Seminal vesicle invasion on multi-parametric magnetic resonance imaging: Correlation with histopathology

By: Grivas N. 1, Hinnen K. 2, de Jong J. 3, Heemsbergen W. 4, Moonen L. 4, Witteveen T. 4, Van Der Poel H. 1, Heijmink S. 5
1The Netherlands Cancer Institute-Antoni van Leeuwenhoek Hospital, Dept. of Urology, Amsterdam, Netherlands, The, 2Academic Medical Center, Dept. of Radiation Oncology, Amsterdam, Netherlands, The, 3The Netherlands Cancer Institute-Antoni van Leeuwenhoek Hospital, Dept. of Pathology, Amsterdam, Netherlands, The, 4The Netherlands Cancer Institute-Antoni van Leeuwenhoek Hospital, Dept. of Radiation Oncology, Amsterdam, Netherlands, The, 5The Netherlands Cancer Institute-Antoni van Leeuwenhoek Hospital, Dept. of Radiology, Amsterdam, Netherlands, The

Evaluation of Gallium-68 PSMA PET/CT imaging in individuals with biochemical recurrence following radical prostatectomy

By: Rothe C., Yuminaga Y., Kam J., Beattie K., Arianayagam M., Canagasingham B., Ferguson R., Khadra M., Ko R., Varol C., Winter M.
Nepean Urology Research Group, Dept. of Urology, Kingswood, Australia

Not all prostate cancers are avid on 68Ga-PSMA PET/CT: A series describing the incidence of non-PSMA PET avid prostate cancer

By: Nzenza T. 1, Mitchell C. 2, Ranasinghe W. 1, Lamb B. 3, Hofman M. 4, Bolton D. 1, Murphy D. 3, Lawrentschuk N. 1
1Austin Health, Dept. of Urology, Melbourne, Australia, 2Peter MacCallum Cancer Centre, Dept. of Pathology, Melbourne, Australia, 3Peter MacCallum Cancer Centre, Dept. of Surgical Oncology, Melbourne, Australia, 4Peter MacCallum Cancer Centre, Dept. of Molecular Imaging, Melbourne, Australia

68Ga-PSMA-PET in the diagnosis of local recurrent disease after radiotherapy in patients with prostate cancer

By: Pfister D. 1, Schmidt M. 2, Kohl T. 1, Haidl F. 1, Heidenreich A. 1
1University of Cologne, Dept. of Urology, Cologne, Germany, 2University of Cologne, Dept. of Nuclear Medicine, Cologne, Germany

68Ga-PSMA PET/CT for restaging prostate cancer after definitive therapy: Results of a prospective single-center trial

By: Borghesi M. 1, Ceci F. 2, Paolo C. 3, Tiziano G. 3, Andrea F. 3, Bianchi L. 1, Mineo Bianchi F. 1, Schiavina R. 1, Brunocilla E. 1, Fanti S. 3
1University of Bologna, Dept. of Urology, Bologna, Italy, 2Ahmanson Translational Imaging
Evaluation of Gallium-68 PSMA PET/CT for post-prostatectomy biochemical recurrence in comparison to CT abdomen/pelvis and bone scan

By: Yuminaga Y., Rothe C., Kam J., Beattie K., Nalavenkata S., Arianayagam M., Canagasingham B., Ferguson R., Khadra M., Ko R., Varol C., Winter M.
Nepean Hospital, Nepean Urology Research Group, Kingswood, Australia

PREDICT: Prostate – a novel prognostic model that estimates individual survival in newly diagnosed primary non-metastatic prostate cancer

By: Thurtle D., Greenberg D., Lee L.S., Huang H., Pharoah P., Gnanapragasam V.
1University of Cambridge, Academic Urology Group, Dept. of Surgery, Cambridge, United Kingdom,
2Public Health England, National Cancer Registry Analysis Service, Eastern Region, Cambridge, United Kingdom,
3Singapore General Hospital, Dept. of Urology, Singapore, Singapore,
4University of Cambridge, Centre for Cancer Genetic Epidemiology, Cambridge, United Kingdom

METastasis reporting and data system for prostate cancer score of whole-body DWI as a prognostic biomarker for castration-resistant prostate cancer

1Tokyo Medical and Dental University Graduate School, Dept. of Urology, Tokyo, Japan,
2Tokai University School of Engineering, Dept. of Biomedical Engineering, Isehara, Japan,
3AIC Yaesu Clinic, Dept. of Radiology, Tokyo, Japan

Clinical significance of MRI-targeted biopsy in prediction of adverse pathological and oncological outcome after radical prostatectomy

1Tokyo Medical and Dental University Graduate School, Dept. of Urology, Tokyo, Japan,
2Ochanomizu Surugadai Clinic, Dept. of Radiology, Tokyo, Japan

Summary
N. Suardi, Milan (IT)


**Urothelial tumours: Immune regulation**

*Poster Session 69*

**Location:** Blue Area, Room 2 (Level 0)

**Chairs:** R. Bryan, Birmingham (GB)
A. Govorov, Moscow (RU)
A. Vlahou, Athens (GR)

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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**State-of-the-art lecture**

**Proteomics in bladder cancer: Possibilities and perspectives**

A. Vlahou, Athens (GR)

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**936**

**RNA sequencing identifies 3 different molecular grades and immune checkpoint cascades with distinct clinical behaviour in non-muscle invasive bladder cancer**

By: Chandrasekar T.¹, Zlotta A.¹, Shen J.², Noon A.³, Jiang H.⁴, Ehrlich A.⁵, Kuk C.⁵, Ni R.⁶, Sukhu B.⁶, Chan K.⁶, Roupret M.⁷, Seisen T.⁷, Comperat E.⁸, Sweet J.⁹, Kulkarni G.¹, Fleshner N.¹, Azad A.⁶, Van Der Kwast T.⁹, Wrana J.⁶

¹University of Toronto, Dept. of Surgical Oncology, Toronto, Canada, ²Mount Sinai Hospital, Dept. of Surgical Oncology, Toronto, Canada, ³University of Sheffield, Dept. of Urology, Sheffield, United Kingdom, ⁴University Health Network, Dept. of Statistics, Toronto, Canada, ⁵University of Toronto, Dept. of Surgical Oncology, Toronto, Canada, ⁶Mount Sinai Hospital, Dept. of Pathology, Toronto, Canada, ⁷Université Pierre et Marie Curie, Dept. of Urology, Paris, France, ⁸Université Pierre et Marie Curie, Dept. of Pathology, Paris, France, ⁹University Health Network, Dept. of Pathology, Toronto, Canada

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**937**

**Tumor stroma-infiltrating mast cells predict prognosis and adjuvant chemotherapeutic benefits in patients with muscle invasive bladder cancer**

By: Zhu Y., Liu Z., Fu H., Zhang J., Ye D.
Fudan University Shanghai Cancer Center, Dept. of Urology, Shanghai, China

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**938**

**Long term results of BCG Tokyo and GMCSF-IFNα gene therapy in an orthotopic model of bladder cancer**

By: Esuvaranathan K.¹, Tham S.M.², Mahendran R.²

¹National University Health System, Dept. of Urology, Singapore, Singapore, ²National University of Singapore, Dept. of Surgery, Singapore, Singapore

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**939**

**Stromal immunotype predict survival and benefit from adjuvant chemotherapy in patients with muscle invasive bladder cancer**
A mechanism for evasion of CTL immunity by altered O-glycosylation of HLA class I in bladder cancer

By: Yoneyama M.S. 1, Tobisawa Y. 2, Hatakeyama S. 2, Sato M. 1, Tone K. 3, Tatara Y. 4, Kakizaki I. 4, Hosni S. 5, Tsuboi S. 1, Ohyama C. 2

1 Oyokyo Kidney Research Institute, Cancer Immunology and Cell Biology, Hirosaki, Japan, 2Hirosaki University Graduate School of Medicine, Dept. of Urology, Hirosaki, Japan, 3Shizuoka Cancer Center, Dept. of Anatomic Pathology, Shizuoka, Japan, 4Hirosaki University Graduate School of Medicine, Glycotechnology, Hirosaki, Japan, 5Yamagata Prefectural Central Hospital, Dept. of Urology, Yamagata, Japan

Intravesical instillation of chemotherapeutic agents enhances immunomodulation of tumor microenvironment status in conventional BCG therapy


Nara Medical University, Dept. of Urology, Nara, Japan

The chemokine IP10 (CXCL10) dominates the long-term immune response stimulated by BCG treatment of non-muscle invasive bladder cancer, but a high concentration of IP10 in urine is strongly indicative of risk for the development of intolerance to BCG


1 Hospital Universitario La Paz, Dept. of Urology, Madrid, Spain, 2 Institute for Biological Standards and Control (MHRA-NIBSC), Division of Bacteriology, Medicines and Healthcare products Regulatory Agency-National, Potters Bar, United Kingdom, 3 National Centre for Biotechnology, CNB-CSIC, Dept. of Immunology and Oncology, Madrid, Spain, 4 Hospital Universitario Infanta Sofia, Dept. of Urology, Madrid, Spain

Latent viral infection as a factor of unfavorable prognosis of bladder cancer

By: Kosova I. 1, Loran O. 2, Sinyakova L. 2, Gundorova L. 3, Kosov V. 4, Kolbasov D. 5, Pogodina I. 6

1 Moscow City Hospital named by V.P Demikhov, Dept. of Urology, Moscow, Russia, 2 Russian Medical Academy of Postgraduated Continuous Education, Dept. of Urology, Moscow, Russia, 3 Moscow City Hospital named by V.P Demikhov, Dept. of Pathology, Moscow, Russia, 4 Komi Republican Oncologic Hospital, Dept. of Urology, Syktyvkar, Russia, 5 Moscow City Hospital named by V.P Demikhov, Dept. of Urology, Moscow, Russia, 6 The Vologda Regional Clinical Hospital № 2, Dept. of Pathology, Cherepovets, Russia
Association between inflammatory potential in diet and bladder cancer risk: Results from three US prospective cohort studies


1Medical University of Vienna, Dept. of Urology, Vienna, Austria, 2Harvard T.H Chan School of Public Health, Dept. of Nutrition, Boston, United States of America, 3Medical University of Vienna, Dept. of Urology, Vienna, Austria, 4San Raffaele Scientific Institute, Dept. of Urology, Milan, Italy, 5Harvard Medical School, Dept. of Medicine, Boston, United States of America, 6Medical University of Vienna, Dept. of Epidemiology, Vienna, Austria, 7Harvard T.H Chan School of Public Health, Dept. of Epidemiology, Boston, United States of America

Rationale and possibility of intravesical Bacillus Calmette-Guerin therapy with cytokine against bladder cancer

By: Takeuchi A., Shiota M., Kamiryo Y., Tatsugami K., Eto M.

Graduate School of Medical Sciences, Kyushu University, Dept. of Urology, Fukuoka, Japan

High-penetrating, target-releasing drug delivery system based on dendritic nanoparticles for intravesical instillation

By: Qiu X., Cao K., Lin T., Chen W., Yuan A., Wu J., Guo H.

1Drum Tower Hospital, Medical School of Nanjing University, Dept. of Urology, Nanjing, China, 2Medical School of Nanjing University, State Key Laboratory of Pharmaceutical Biotechnology, Nanjing, China

Urothelial bladder cancer cells affect tumor-promoting processes in normal bladder fibroblasts and support tumorigenesis by secretion of tumor-associated exosomes

By: Baumgart S., Heinzelmann J., Krause E., Stoeckle M., Junker K.

1Saarland University Medical Center, Dept. of Urology and Pediatric Urology, Homburg, Germany, 2Saarland University Medical Center, Dept. of Physiology, Homburg, Germany
Retreatment with onabotulinumtoxinA is not associated with an increased risk of clean intermittent catheterisation: Pooled post hoc analysis

By: Cruz F.¹, Rovner E.², Sobol J.³, Mccammon K.⁴, Hamid R.⁵, Radomski S.⁶, Orejudos A.⁷, Aboushwareb T.⁸, Lemack G.⁹

¹Hospital S. Joao & Faculty of Medicine of Porto/IBMC Porto, Dept. of Urology, Porto, Portugal, ²Medical University of South Carolina Health Urology Services, Dept. of Urology, Charleston, SC, United States of America, ³Michigan Institute of Urology, Dept. of Urology, West Bloomfield, MI, United States of America, ⁴Eastern Virginia Medical School, Dept. of Urology, Virginia Beach, VA, United States of America, ⁵University College London Hospitals, Dept. of Urology, London, United Kingdom, ⁶University of Toronto, Dept. of Urology, Toronto, ON, Canada, ⁷Allergan, Statistics, Irvine, CA, United States of America, ⁸Allergan, Dept. of Urology, Irvine, CA, United States of America, ⁹University of Texas Southwestern Medical Center, Dept. of Urology and Neurology, Dallas, TX, United States of America

Programming settings and recharge interval in a prospective study of a rechargeable sacral neuromodulation system for the treatment of overactive bladder

By: Van Kerrebroeck P.E.¹, De Wachter S.², Ruffion A.³, Van Der Aa F.⁴, Perrouin-Verbe M-A.⁵, Jairam R.⁶, Elneil S.⁷, Blok B.⁸

¹Maastricht UMC, Dept. of Urology, Maastricht, Netherlands, The, ²University Hospital Antwerp, Dept. of Urology, Edegem, Belgium, ³Hôpital Lyon Sud, Pierre Bénite, Dept. of Urology, Lyon, France, ⁴UZ Leuven, Dept. of Urology, Leuven, Belgium, ⁵University Hospital of Nantes, Dept. of Urology, Nantes, France, ⁶Maastricht University Medical Centre, Dept. of Urology, Maastricht, Netherlands, The, ⁷National Hospital of Neurology and Neurosurgery, Dept. of Uro-Neurology, London, United Kingdom, ⁸Erasmus MC, Dept. of Urology, Rotterdam, Netherlands, The

Treatment of overactive bladder with a miniaturized rechargeable sacral neuromodulation system

By: Blok B.F.M.¹, Van Kerrebroeck P.², De Wachter S.³, Ruffion A.⁴, Van Der Aa F.⁵
Efficacy and tolerance of botulinum toxin injections after sacral nerve stimulation failure for idiopathic overactive bladder

By: Baron M., Delcourt C., Pfister C., Grise P., Cornu J-N.
Charles Nicolle Hospital, Dept. of Urology, Rouen, France

OnabotulinumtoxinA for neurogenic detrusor overactivity not only reduces the frequency and severity of autonomic dysreflexia safely but significantly improves quality of life for individuals with spinal cord injury

By: Walter M., Kran S., Nigro M., Stothers L., Rapoport D., Kavanagh A., Krassioukov A.
University of British Columbia, Urologic Sciences, Vancouver, Canada

Cycling sacral root neuromodulation: Pilot study to assess the effectiveness of this mode in neuromodulator programming for the treatment of chronic pelvic pain syndrome

1Azienda ospedaliera universitaria integrata Verona, Dept. of Urology, Verona, Italy, 2Medical University of Vienna International, Dept. of Nation Hospital, Abu Dabi, United Arab Emirates, 3Azienda Ospedaliera Universitaria Integrata, Dept. of Urology, Verona, Italy, 4Medical University of Vienna International, Dept. of Urology and Neurourology, Abu Dabi, United Arab Emirates, 5Nation Hospital, Dept. of Anesthesiology, Abu Dabi, United Arab Emirates, 6Nation Hospital Abu Dabi, Dept. of Radiology, Abu Dabi, United Arab Emirates, 7Nation Hospital Abu Dhabi, Dept. of Physiotherapy, Abu Dabi, United Arab Emirates, 8Nation Hospital Abu Dhabi (UAE), Dept. of Obstetrics and Gynecology, Abu Dabi, United Arab Emirates

Another therapeutic role for intravesical botulinum toxin A: Patients with severe bladder spasm with long stay catheters

By: Young M., Osman N., Philips L., Mangera A., Reid S., Inman R., Chapple C.
Sheffield Teaching Hospitals, Dept. of Urology, Sheffield, United Kingdom

Outcomes of use of intravesical abobotulinumtoxinA (Dysport®) for treatment of overactive bladder – a prospective study
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<th>ID</th>
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<tr>
<td>956</td>
<td>Long term follow-up reveals a low persistence rate of abobotulinum toxin A injections for idiopathic OAB</td>
<td>By: Craciun M., Irwin P. Leighton Hospital, Michael Heal Unit, Dept. of Urology, Crewe, United Kingdom</td>
</tr>
<tr>
<td>957</td>
<td>Withdrawn</td>
<td>To be confirmed</td>
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</table>
| 958 | Complications of non-continent cutaneous urinary diversion in adult spinal cord injured patients | By: Guillot-Tantay C., Chartier-Kastler E., Perrouin-Verbe M-A., Denys P., Léon P., Phé V.  
 1Pitié Salpêtrière Academic Hospital, Dept. of Urology, Paris, France,  
2Raymond Poincaré Academic Hospital, Physical Medicine and Rehabilitation, Garches, France |
1Charles Nicolle Hospital, Dept. of Urology, Rouen, France,  
2University of Rennes, Dept. of Urology, Rennes, France,  
3Charles Nicolle Hospital, Dept. of Physical and Rehabilitation Medicine, Rouen, France,  
4University of Toulouse, Dept. of Urology, Toulouse, France |
| 960 | Long-term outcomes of permanent nitinol urethral stent Memotherm® implantation in neurological patients with detrusor-striated sphincter dyssynergia | By: Leon Bertrand P., Chartier Kastler E., Ismail S., Denys P., Perrouin-Verbe M., Phé V.  
1CHU Reims, Dept. of Urology, Reims, France,  
2Pitié-Salpêtrière Hospital, Dept. of Urology, Paris, France,  
3Pitié-Salpêtrière Hospital, Dept. of Urology, Paris, France,  
4Raymond Poincaré University Hospital, Dept. of Physical Medicine and Rehabilitation, Garches, France,  
5Pitié-Salpêtrière Hospital, Dept. of Urology, Paris, France |

**State-of-the-art lecture** Long term outcome of invasive treatment  
G.R. Kasyan, Moscow (RU)
961 Which patients are at risk of post-operative sepsis? Results from a large prospective series of patients elected for urologic surgery


962 Old age, urinary obstruction and high lactate levels are risk factors to develop septic shock in urosepsis. A retrospective analysis.

By: Ferretti S., Paiolo E., Tagliaferri F., Padua E., Bocchialini T., Barbagallo M., Maestroni U.

1Hospital and University of Parma, Dept. of Surgery, Urology Unit, Parma, Italy, 2Hospital and University of Parma, Dept. of Surgery, 2° Unit Anesthesia and Intensive Care, Parma, Italy, 3University of Parma, School of Medicine, Parma, Italy

963 Lactobacillus probiotic decreases urinary oxalate excretion in non-stone formers women with recurrent pyelonephritis

By: Stepanova N.
State Institution, Institute of Nephrology of the National Academy of Medical Sciences, Dept. of Nephrology and Dialysis, Kyiv, Ukraine

964 Lower urinary tract dysfunction in chronic Chagas disease: Clinical and urodynamic presentation in 148 patients

By: Bey E., Paucara B., Gaget O., Solano P., Breniere S.

1Intertryp, Dept. of Urology, Grenoble, France, 2Seladis, Dept. of Urology, La Paz, Bolivia, 3Intertryp, Dept of Public Health, Grenoble, France, 4Intertryp, Dept. of Biology, Montpellier, France, 5Ciseal, Dept. of Biology, Quito, Ecuador

965 Withdrawn
To be confirmed
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| 966 | Can rectal-swab targeted antibiotic prophylaxis reduce the rate of urinary sepsis after transrectal ultrasound guided prostate biopsy? | By: Martin J., Vennam S., Murugesan M., Chakrabarti P.  
Royal Cornwall Hospital, Dept. of Urology, Truro, United Kingdom |  
| 967 | A prospective analysis concerning the limited clinical consequences of positive microbial cultures after TURP | By: Baten E.  
Van Der Aa F., Orye C., Cartuyvels R., Van Renterghem K.  
1 Jessa Ziekenhuis, Dept. of Urology, Hasselt, Belgium, 2 UZLeuven, Dept. of Urology, Leuven, Belgium, 3 Jessa Ziekenhuis, Microbiology, Hasselt, Belgium |  
Medical University of Warsaw, Dept. of Urology, Warsaw, Poland |  
1 Justus Liebig University, University Clinic of Giessen and Marburg, Clinic for Urology, Pediatric Urology and Andrology, Giessen, Germany, 2 Technical University of Munich, Dept. of Urology, Munich, Germany, 3 Hurley Consulting Associates Ltd., Clinical, President (CEO), Summit, United States of America, 4 Hurley Consulting Associates Ltd., Dept. of Drug Development, Summit, United States of America, 5 Mission Pharmacal Company, Clinical Research, Boerne, United States of America |  
1 Hospital Universitario 12 de Octubre, Dept. of Urology, Madrid, Spain, 2 Hospital Universitario 12 de Octubre, Dept. of Nephrology, Transplant Coordination, Madrid, Spain |  
IRCCS Hospital San Raffaele, Dept. of Urology, Milan, Italy |  
| 973 | Using the fractional thermo-ablative laser FemTouch™ as a novel treatment method in women with recurrent urinary tract infections: The first experience in the United States |  
| 520 |  |  |  |
Kingdom

By: Yang B., Foley C., Foley S.
Royal Berkshire Hospital Reading UK, Dept. of Urology, Reading, United Kingdom

A novel porcine model of persistent bladder infection

By: Petersen N., Nielsen T., Asferg C., Kolmos H.J., Andersen T., Lund L.
1Odense University Hospital, Dept. of Urology, Odense, Denmark, 2University of Southern Denmark, Research Unit of Clinical Microbiology, Institute of Clinical Research, Odense, Denmark, 3Odense University Hospital, Dept. of Urology, Dept. of Clinical Research, Odense, Denmark

Fournier's Gangrene – an overview of predictive factors for mortality in a large contemporary series

By: Oliveira C., Vale L., Pereira P., Costa D., Lopes T., Silva J., Almeida Pinto R.M., Cruz F.
1Universidade do Porto, Dept. of Urology, Porto, Portugal, 2Centro Hospitalar de São João, Dept of Urology, Porto, Portugal
Future and new approaches in the treatment of male sexual dysfunction
Poster Session 72

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.

976
**Effects of controlled oxygen release from hollow microparticles for prolonged stem cell survival and improved erectile function**

By: Park Y.H.¹, Kim M.Y.¹, Jung A.R.¹, Lee K.W.¹, Ha U.S.¹, Hong S.H.¹, Kim S.W.¹, Lee J.Y.¹, Kang S.M.²
¹The Catholic University of Korea, Seoul St. Mary's Hospital, Dept. of Urology, Seoul, Korea, South, ²The Catholic University of Korea, Seoul, St Mary's Hospital, Dept. of Urology, Seoul, Korea, South

977
**STIM/Orai calcium entry system contributes to contractility of human penile smooth muscle, becoming a potential therapeutic target in erectile dysfunction**

By: Romero Otero J.¹, Angulo J.², Medina-Polo J.¹, García-Gómez B.¹, El Assar M.³, La Fuente J.⁴, Fernández A.⁵, Sánchez-Ferrer A.⁶, Sevilleja-Ortiz A.⁷, Rodríguez-Mañas L.⁸
¹Hospital Universitario 12 de Octubre, Dept. of Urology, Madrid, Spain, ²Ramón y Cajal Sanitary Investigation Institute (IRYCIS), Hospital Ramón y Cajal, Dept Histology, Investigation, Translational Investigation in Cardiology Unit, Madrid, Spain, ³Hospital Universitario de Getafe, Investigation Foundation, Getafe, Spain, ⁴Hospital Santo Antonio, Dept. of Urology, Porto, Portugal, ⁵Ramón y Cajal Sanitary Investigation Institute (IRYCIS), Hospital Ramón y Cajal, Traslacional Investigation in Cardiology Unit, Madrid, Spain, ⁶Sanitary Investigation Foundation, Hospital Universitario de Getafe, Getafe, Spain, ⁷Ramón y Cajal Sanitary Investigation Institute (IRYCIS), Hospital Ramón y Cajal, Dept. of Histology-Investigation, Madrid, Spain, ⁸Hospital Univeristario de Getafe, Dept. of Geriatrics, Getafe, Spain

978
**Synergy of nanofibrous meshes for the differentiation of transplanted mesenchymal stem cells into neuron-like cells around the injured cavernous nerve of rats**

By: Song Y.S.¹, Song E.S.², Lee H.J.³, Choi S.S.³, Doo S.W.¹, Kim J.H.¹, Yun J.H.⁴, Yang W.J.¹, Lee S.J.⁵
¹Soonchunhyang University College of Medicine, Dept. of Urology, Seoul, Korea, South, ²Inha University College of Medicine, Dept of Obstetrics and Gynecology, Incheon, Korea,
Intratunical injection of human adipose tissue–derived stem cells partially reverts fibrosis and restores collagen III/I ratio in a rat model of chronic Peyronie’s disease

1University College London Hospitals, Dept. of Andrology, London, United Kingdom, 2Linköping University, Division of Drug Research, Dept. of Medical and Health Sciences, Linköping, Sweden, 3University of Leuven, Laboratory for Experimental Urology, Organ systems, Dept. of Development and Regeneration, Leuven, Belgium, 4Airlangga University/Dr Soetomo General Hospital, Dept. of Urology, Surabaya, Indonesia, 5IRCCS Ospedale San Raffaele, Dept. of Oncology and Urology, Milan, Italy, 6Johns Hopkins Medical Institutions,, Dept. of Urology, Baltimore, United States of America, 7University College London Hospitals, Dept. of Andrology, London, United Kingdom

Major pelvic ganglion neurons express CXCR4, which binds stromal derived factor-1 and enhances neurotrophin protein levels and neurogenesis

By: Sopko N. 1, Matsui H. 2, Joice G. 1, Pak E. 3, Yoshida T. 1, Liu X. 1, Hannan J. 3, Bivalacqua T. 1
1The Johns Hopkins School of Medicine, Dept. of Urology, Baltimore, United States of America, 2The University of Tokyo, Dept. of Urology, Tokyo, Japan, 3East Carolina University, Dept. of Physiology, Greenville, United States of America

Low intensity-shockwave therapy (Li-ESWT) delivered by Aries® improves erectile function and decreases cavernosal fibrosis of spontaneously hypertensive rats (SHR)

By: Giuliano F. 1, Assaly-Kaddoum R. 2, Laurin M. 2, Bernabé J. 2, Behr-Roussel D. 2
1Université Versailles Saint Quentin en Yvelines, Pelvipharm, Dept. of Urology, Montigny-le-Bretonneux, France, 2Université Versailles Saint Quentin en Yvelines, Pelvipharm, Montigny-le-Bretonneux, France

Galanin administration partially restores erectile function after cavernous nerve injury and mediates endogenous nitrinergic nerve outgrowth in vitro

By: Weyne E. 1, Hannan L. 2, Matsui H. 3, Sopko N. 4, De Ridder D. 5, Bivalacqua J. 4, Van Der Aa F. 1, Albersen M. 1
1KU Leuven and University, Dept. of Urology, Leuven, Belgium, 2East Carolina University, Dept. of Physiology, Greenville, United States of America, 3University of Tokyo, Dept. of Urology, Tokyo, Japan, 4Johns Hopkins Brady Urological Institute, Dept. of Urology,
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<th>Paper No.</th>
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<tr>
<td>984</td>
<td><strong>RhoA kinase-inhibition prevents myofibroblast transformation in a cell culture model of Peyronie's disease</strong></td>
<td>Milenkovic U. 1, Ilg M. 2, Van Renterghem K. 3, De Ridder D. 1, Albersen M. 1</td>
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<td>1University Hospitals of Leuven, Dept. of Development and Regeneration, Leuven, Belgium, 2Anglia Ruskin University, Faculty of Medical Science, Chelmsford, United Kingdom, 3Jessa Hospital and University of Hasselt, Dept. of Urology, Hasselt, Belgium</td>
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<td>985</td>
<td><strong>Withdrawn</strong></td>
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<td>986</td>
<td><strong>Synergy between vardenafil and tamoxifen in a rat model of Peyronie's disease</strong></td>
<td>Ilg M.M. 1, Milenkovic U. 2, Muneer A. 3, Albersen M. 2, Cellek S. 1, Ralph D. 3</td>
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<td>1Anglia Ruskin University, Faculty of Medical Science, Chelmsford, United Kingdom, 2University Hospitals Leuven and Leuven University, Dept. of Development and Regeneration, Leuven, Belgium, 3University College London Hospital, Dept. of Andrology, London, United Kingdom</td>
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<tr>
<td>987</td>
<td><strong>Improvement of erectile function through combination of anti-fibrotic effect by LIM-kinase 2 inhibitor with suppression of apoptosis and potentiation of endothelial function by type 5 phosphodiesterase inhibitor</strong></td>
<td>Park J. 1, Kang S. 2, Seon D. 2, Sun I. 2, Kim S. 2, Jung H. 2, Hwang Y. 2, Cho S.Y. 1, Park K. 2, Kim S.W. 2, Paick J. 2, Cho M.C. 1</td>
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<td>1Seoul National University, Boramae Medical Center, Dept.of Urology, Seoul, Korea, South, 2Seoul National University, College of Medicine, Dept.of Urology, Seoul, Korea, South</td>
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<td>988</td>
<td><strong>Persistent erectile dysfunction after discontinuation of 5-alpha reductase inhibitor therapy in rats depending on the duration of treatment</strong></td>
<td>Sung H.H. 1, Kang S.J. 1, Chae M.R. 1, Bang S. 1, Lee J. 1, So I. 2, Park J.K. 3, Lee S.W. 1, Choi C. 4</td>
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<td>1Samsung Medical Center, Sungkyunkwan University School of Medicine, Dept. of Urology, Seoul, Korea, South, 2Seoul National University College of Medicine, Dept. of Physiology and Biophysics, Seoul, Korea, South, 3Chonbuk National University and Research Institute of Clinical Medicine of Chonbuk National University-Biomedical Research Institute, Clinical Trial Center of Medical Device of Chonbuk National University, Dept. of Urology, Jeonju, Korea, South, 4Samsung Medical Center, Sungkyunkwan University School of Medicine, Dept of Urology, Seoul, Korea, South</td>
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<td>989</td>
<td><strong>Withdrawn</strong></td>
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Summary
J.I. Martinez Salamanca, Madrid (ES)
The Expert-Guided Poster Tour is a new innovative session type. The Tour aims to provide an interactive platform informing delegates on the real essentials and providing in-depth information on the different research projects. The Expert-Guided Poster Tour consists of two parts: The first part is reserved for poster viewing. The posters will be on display for 2 hrs before the start of the Guided Poster Tour. During the second part of the Tour, the two experts acting as moderators, will ask questions to poster presenters.

PT104
The assessment of the ERSPC and PCPT2.0 risk calculators in the prediction of prostate cancer in men attending a prostate assessment clinic
By: KC S., King T., Mak D., Lundon D., Bhatt R., Doherty A., Viney R., Patel P., Kelly B.
University Hospital Birmingham, Dept. of Urology, Birmingham, United Kingdom

PT105
Effects of introducing pre-biopsy mpMRI into contemporary UK prostate cancer detection
By: Hobbs C., Eyre K., McCormick R., Gleeson F., Macpherson R., Verrill C., Hamdy F., Brewster S., Bryant R.
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

PT106
A nurse led clinic for suspected prostate cancer referrals is safe, cost and time efficient
By: Drudge-Coates L., Khati V., Ballesteros R., Martyn-Hemphill C., Brown C., Green J., Challacombe B., Muir G.
1King’s College Hospital NHS Foundation Trust, Dept. of Urology, London, United Kingdom, 2Barts Health NHS Trust, Dept. of Urology, London, United Kingdom, 3Guy’s & St Thomas’ NHS Foundation Trust, Dept. of Urology, London, United Kingdom

PT107
Can we eliminate the biopsy for the gland of MRI negative side?
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<tr>
<th>Session</th>
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<th>Authors</th>
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<tr>
<td>PT108</td>
<td>Is local anaesthetic transperineal prostate biopsy feasible and acceptable: A comparison of patient experience under local anaesthetic or sedation</td>
<td>Valero Sarmiento L. 1, Marenco J.L. 2, Moore C. 2, Orczyk C. 2, Collins T. 2, Emberton M. 2</td>
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<td>1University College of London, Dept. of Anaesthesia, London, United Kingdom,</td>
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<td>2University College of London, Dept. of Uro-Oncology, London, United Kingdom</td>
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<tr>
<td>PT109</td>
<td>Zonal distribution of prostate cancer foci in patients undergoing initial and multiple biopsy series: MRI fusion targeted results from 1,365 patients</td>
<td>Leyh-Bannurah S-R. 1, Kachanov M. 1, Beyersdorff D. 2, Preisser F. 1, Fisch M. 3, Graefen M. 1, Budäus L. 1</td>
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<td>1Martini-Klinik, Prostate Cancer Center Hamburg-Eppendorf, Dept. of Urology, Hamburg, Germany,</td>
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<td>2University Medical Center Hamburg-Eppendorf, Department for Diagnostic and Interventional Radiology and Nuclear Medicine, Hamburg, Germany,</td>
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<td>3University Medical Center Hamburg-Eppendorf, Dept. of Urology, Hamburg, Germany</td>
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<td>PT110</td>
<td>Withdrawn</td>
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<tr>
<td>PT111</td>
<td>Multiparametric ultrasound: Combining greyscale, shearwave elastography and contrast-enhanced imaging for the localization of significant prostate cancer: Comparison with radical prostatectomy specimens</td>
<td>Mannaerts C. 1, Wildeboer R. 2, Postema A. 1, Hagemann J. 3, Massimo M. 2, Wijkstra H. 1, Salomon G. 3</td>
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<td></td>
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<td>1AMC University Hospital, Dept. of Urology, Amsterdam, Netherlands, The, 2Eindhoven University of Technology, Dept. of Electrical Engineering, Eindhoven, Netherlands, The,</td>
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<td>3University Hospital Hamburg-Eppendorf, Martini Clinic Prostate Cancer Center, Hamburg, Germany</td>
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<tr>
<td>PT112</td>
<td>A multiparametric approach for dynamic contrast-enhanced ultrasound imaging of prostate cancer</td>
<td>Wildeboer R. 1, Postema A. 2, Kuenen M. 3, Wijkstra H. 2, Mischi M. 1</td>
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<td>1Eindhoven University of Technology, Dept. of Electrical Engineering, Eindhoven, Netherlands, The, 2Academic Medical Center University of Amsterdam, Dept. of Urology, Amsterdam, Netherlands, The, 3Philips Research, Dept. of In-Body Systems, Eindhoven, Netherlands, The</td>
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<tr>
<td>PT113</td>
<td>Improvement of prostate cancer detection rate using transrectal ultrasound-MRI targeted biopsy: The role of a CAD system combined to multiparametric MRI</td>
<td>Pecoraro M. 1, Campa R. 1, Barchetti G. 1, Ceravolo I. 1, Simone G. 2, Leonardo C. 3, Panebianco V. 1</td>
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Scientific Programme - EAU18 Copenhagen
PT114

Innovative diffusion MRI protocol to improve prostate cancer diagnosis

By: Shenhar C. ¹, Degani H. ², Bar Y. ¹, Baniel J. ¹, Tamir S. ³, Binyaminov O. ³, Furman-Haran E. ², Margel D. ¹

¹Rabin Medical Center, Dept. of Urology, Petach Tikva, Israel, ²Weizmann Institute of Science, Dept. of Biological Regulation, Rehovot, Israel, ³Rabin Medical Center, Dept. of Imaging, Petach Tikva, Israel

PT115

The learning curve of MRI-US fusion prostate biopsies

By: Margel D. ¹, Ber Y. ¹, Sela S. ¹, Belo I. ¹, Tabachnik T. ¹, Benjaminov O. ², Tamir S. ², Baniel J. ¹

¹Beilinson Hospital, Dept. of Urology, Petach Tikva, Israel, ²Beilinson Hospital, Dept. of Imaging, Petach Tikva, Israel

PT116

The end of transfaecal biopsies: Histological outcomes of transperineal prostate biopsies under local anesthetic in the outpatient setting

By: Kum F., Kulkarni M., Faure-Walker N., Elhage O., Cathcart P., Popert R.

Guy's and St. Thomas' Hospitals, London, Dept. of Urology, London, United Kingdom

PT117

Characteristics of global Gleason grading for MRI-targeted biopsy in comparison with systematic biopsy and prostatectomy grades

By: Matsuoka Y. ¹, Tanaka H. ², Kimura T. ², Waseda Y. ¹, Uehara S. ¹, Yasuda Y. ¹, Kijima T. ¹, Yoshida S. ¹, Yokoyama M. ¹, Ishioka J. ¹, Saito K. ¹, Kihara K. ¹, Fujii Y. ¹

¹Tokyo Medical and Dental University Graduate School, Dept. of Urology, Tokyo, Japan, ²Ochanomizu Surugadai Clinic, Dept. of Radiology, Tokyo, Japan

PT118

Pathological upgrading in patients with prostate cancer on active surveillance after medium-term follow-up


Hospital Universitario Fundación Alcorcón, Dept. of Urology, Alcorcón, Spain

PT119

Active surveillance in a high-volume centre: Oncological outcomes and management changes during a 12 years experience

By: Catellani M. ¹, Luzzago S. ¹, Mistretta F.A. ¹, Conti A. ¹, Russo A. ¹, Bianchi R. ¹, Di Trapani E. ¹, Cozzi G. ¹, Petralia G. ², Ferro M. ¹, Musi G. ¹, Matei D.V. ¹, De Cobelli O. ¹

¹IEO European Institute of Oncology, Dept. of Urology, Milan, Italy, ²IEO European Institute of Oncology, Dept. of Radiology, Milan, Italy
Baseline characteristics in an MRI-based active surveillance cohort: Association with clinical and histological outcomes

By: Stavrinides V., Giganti F., Stabile A., Allen C., Punwani S., Whitaker H., Emberton M., Moore C.

1University College London, Dept. of Surgery and Interventional Science, London, United Kingdom, 2University College London Hospitals NHS Foundation Trust, Dept. of Radiology, London, United Kingdom

Cost consequences of alternative MRI-based follow-up strategies in active surveillance of prostate cancer: A decision tree model study based on micro-costing

By: Elkjaer M.C., Søgaard R., Andersen M.H., Borre M., Pedersen B.G.

1Aarhus University Hospital, Dept. of Urology, Aarhus N, Denmark, 2Aarhus University, Dept. of Public Health, Aarhus, Denmark, 3Aarhus University Hospital, Dept. of Radiology, Aarhus N, Denmark

Progression and treatment rates using an active surveillance protocol incorporating image guided baseline biopsies and multi-parametric MRI monitoring for men with favourable risk prostate cancer

By: Thurtle D., Barrett T., Thankappan-Nair V., Koo B., Warren A., Kastner C., Saeb-Parsy K., Kimberley-Duffell J., Gnanapragasam V.

1Cambridge University Hospitals NHS Trust, Dept. of Urology, Cambridge, United Kingdom, 2Cambridge University Hospitals NHS Trust, Dept. of Radiology, Cambridge, United Kingdom, 3Cambridge University Hospitals NHS Trust, Dept. of Pathology, Cambridge, United Kingdom, 4University of Cambridge, Academic Urology Group, Cambridge, United Kingdom

Increasing trend of non-interventional treatment management in patients candidate to active surveillance with localized prostate cancer


1IRCCS Ospedale San Raffaele, Milan, Italy; Vita-Salute San Raffaele University, Division of Oncology/Unit of Urology, URI, Milan, Italy, 2University of Montreal Health Center, Division of Urology/Urologic Oncology, Montréal, Canada, 3University of Montreal Health Center, Cancer Prognostics and Health Outcomes Unit, Montréal, Canada, 4Policlinico San Donato, University of Milan, Academic Dept. of Urology, Milan, Italy, 5SS Annunziata Hospital, Dept. of Urology, Chieti, Italy, 6University Medical Center Hamburg-Eppendorf, Hamburg, Martini Klinik, Hamburg, Germany, 7Henry Ford Hospital, Henry Ford Health System, Vattikut Urology Institute and VUI Center for Outcomes Research Analytics and Evaluation (VCORE), Detroit, United States of America, 8SS Annunziata Hospital, Dept. of Urology, Chieti, Italy, 9Medical University of Vienna, Dept. of Urology, Vienna, Austria

MRI detection of clinically significant prostate cancer in non-index tumors: Implications for focal therapy
PT125

MRI-guided transurethral ultrasound ablation in patients with localized prostate cancer: 3-year outcomes of a prospective phase I clinical trial


1London Health Sciences Center, Dept. of Urology and Radiology, London, Canada, 2Beaumont Health System, Dept. of Urology, Royal Oak, United States of America, 3German Cancer Research Center (DKFZ), Dept. of Urology and Radiology, Heidelberg, Germany, 4Profound Medical Inc., Dept. of Clinical Affairs, Mississauga, Canada

PT126

Office-based MRI/US fusion target prostate cancer cryoablation under local anaesthesia: 301 patients


Urological Research Network, Dept. of Urology, Miami, United States of America

PT127

Combined clinical parameters and multiparametric MRI for prediction of sidespecific extraprostatic disease - a risk-model for patient-tailored risk stratification before radical prostatectomy

By: Radtke J.P.1, Wiesenfarth M.2, Hadaschik B.3, Hiltthaler B.1, Kesch C.4, Schütz V.1, Alt C.5, Roth W.6, Wieczorek K.7, Duensing S.1, Roethke M.C.8, Schlemmer H-P.8, Hohenfellner M.1, Bonekamp D.8, Teber D.1

1University Hospital Heidelberg, Dept. of Urology, Heidelberg, Germany, 2German Cancer Research Center, Dept. of Biostatistics, Heidelberg, Germany, 3University Hospital Essen, Dept. of Urology, Essen, Germany, 4University of British Columbia, The Vancouver Prostate Centre, Vancouver, Canada, 5Medical Faculty of the Heinrich-Heine-University Dusseldorf, Institute of Diagnostic and Interventional Radiology, Dusseldorf, Germany, 6University Medicine Mainz, Institute of Pathology, Mainz, Germany, 7University of Heidelberg, Institute of Pathology, Heidelberg, Germany, 8German Cancer Research Center, Dept. of Radiology, Heidelberg, Germany

PT128

Staging with Ga-68 HBED-CC-Glu-NH-CO-NH-Lys (Ahx) PSMA-11 PET CT (PSMA) prior to radical prostatectomy has high predictive value in assessing biochemical response to surgery

By: Emmett L.1, Nandurkar R.1, Van Leeuwen P.2, Woo H.3, Kooner R.4, Ende D.4
PT129

Is fatal family history in prostate cancer a predictor of radical prostatectomy outcomes?

By: Herkommer K. 1, Strüh J. 1, Kron M. 2, Kranz S. 1, Sander S. 2, Gschwend J.E. 1

1Klinikum rechts der Isar, Technical University of Munich, Dept. of Urology, Munich, Germany, 2University of Ulm, Institute for Epidemiology and Biometry, Ulm, Germany

PT130

Early versus standard catheter removal after complete anatomical reconstruction during robot-assisted radical prostatectomy: Results from a prospective single-institutional randomized trial (RIPRECA)

By: Lista G. 1, Lughezzani G. 1, Buffi N. 1, Pescheckera R. 1, Lazzeri M. 1, Casale P. 1, Hurle R. 1, Pasini L. 1, Cardone P. 1, Zandegiacomo S. 1, Benetti A. 1, Saita A. 1, Guazzoni G. 2

1Istituto Clinico Humanitas, Dept. of Urology, Rozzano, Italy, 2Istituto Clinico Humanitas, Irccs, Humanitas University, Dept. of Urology, Rozzano, Italy

PT131

Robotic perineal radical prostatectomy: Initial experience with 30 cases

By: Tugcu V. 1, Akca O. 2, Simşek A. 1, Ismail Y. 1, Sahin S. 1, Yenice G. 1, Tasci A. 1

1University of Health Sciences, Istanbul Bakirkoy Dr. Sadi Konuk Research and Training Hospital, Dept. of Urology, Istanbul, Turkey, 2University of Health Sciences, Istanbul Kartal Dr. Lutfi Kirdar Research and Training Hospital, Dept. of Urology, Istanbul, Turkey

PT132

Functional outcomes and post-operative complications in elderly patients (> 65 years old) undergoing robotic-assisted radical prostatectomy

By: Harmouch S. 1, Traboulsi S. 1, Tholomier C. 2, Couture F. 3, Bondarenko H. 1, Negrean C. 1, Karakiewicz P. 1, El-Hakim A. 1, Zorn K.C. 1

1University of Montreal, Dept. of Urology, Montreal, Canada, 2University of Mcgill, Dept. of Urology, Montreal, Canada, 3University of McGill, Dept. of Urology, Montreal, Canada

PT133

How do urinary incontinence and PSA recurrence affect health related QoL after radical prostatectomy?


Wakayama Medical University, Dept. of Urology, Wakayama, Japan
### Aims and objectives of this session
- To review:
  - mechanisms of continence in men.
  - 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.

### Introduction
E. Chartier-Kastler, Paris (FR)

### Aetiology
F. Van Der Aa, Leuven (BE)

### Workout of post-surgical incontinence
E. Chartier-Kastler, Paris (FR)

### Conservative treatment for post-surgical incontinence
F. Van Der Aa, Leuven (BE)

### Postsurgical LUTS
F. Van Der Aa, Leuven (BE)

### Surgical treatment for post-surgical incontinence
E. Chartier-Kastler, Paris (FR)
Prostate biopsy - Tips and tricks
ESU Course 45

**Location:** Orange Area, Room 2 (Level 0)

**Chair:** P. Hammerer, Braunschweig (DE)

**Aims and objectives of this session**
- Provide an update on recent imaging techniques like TRUS, Elastography, Histoscanning, multiparametric magnetic resonance imaging (mpMRI) and nuclear imaging techniques for prostate cancer diagnosis.
- Explain standard reporting systems for ultrasound and mpMRI like PI-RADS.
- Discuss different prostate biopsy techniques.
- Tips and Tricks to reduce morbidity of prostate biopsies.

**Indications for TRUS and biopsy**
P. Hammerer, Braunschweig (DE)

**Practical aspects of TRUS and TRUS-guided biopsies**
P. Hammerer, Braunschweig (DE)

**Indications for rebiopsy**
C. Moore, London (GB)

**Update on new technical developments**
C. Moore, London (GB)
Percutaneous nephrolithotripsy (PCNL)

ESU Course 46

Monday 19 March
12:00 - 15:00

Location: Orange Area, Room 3 (Level 0)

Chair: E. Liatsikos, Patras (GR)

Aims and objectives of this session
Aim of this course is to describe in detail the surgical techniques of all available treatment options in percutaneous surgery of renal stones. In addition, to tips and tricks aiming into improving the efficacy of the operation, the most common complications associated with the procedure will be reviewed focusing on their prevention and proper management.

Objectives
• Describe the basic percutaneous nephrolithotripsy techniques.
• Provide tips to improve the efficacy of the operation.
• Provide evidence on the comparison of percutaneous with ureteroscopic and extracorporeal treatment options; Which approach for which stone.
• Describe associate complications including their management.

Guidelines on stone treatment
T. Knoll, Sindelfingen (DE)

PCNL instrumentation – Suite organisation, wires, dilators and lithotriptors
C.M. Scoffone, Turin (IT)

From Skin to Stone: Step-by-Step access using only fluoroscopy (Prone position)
E. Liatsikos, Patras (GR)

From Skin to Stone: Step-by-Step access using US and fluoroscopy (Supine position)
C.M. Scoffone, Turin (IT)

MiniPerc- Indications, equipment and technique
T. Knoll, Sindelfingen (DE)

Tips and tricks in PCNL
E. Liatsikos, Patras (GR)

Round table: Complications of PCNL: Diagnosis, management, prevention
E. Liatsikos, Patras (GR)
T. Knoll, Sindelfingen (DE)
C.M. Scoffone, Turin (IT)
Renal transplantation: Technical aspects, diagnosis and management of early and late urological complications

ESU Course 47

Location: Orange Area, Room 4 (Level 0)

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

Aims and objectives of this session
Renal transplant is an essential part of urology. The aims of the course are:
• To show surgical techniques of organ procurement in deceased and living donation settings.
• To establish the basic principles for evaluation of candidates to donation and recipients of kidney graft.
• To show the different approaches and surgical details of kidney transplant in conventional and complex recipients.
• To review the algorithms for diagnosis and treatment of medical and surgical complications after kidney transplantation.

Selection and urological preparation of transplant recipients; surgical aspects of nephrectomy in living and deceased donor
A.J. Figueiredo, Coimbra (PT)

Laparoscopic living donor nephrectomy: Technical aspects and controversies
F.J. Burgos Revilla, Madrid (ES)

Avoiding complications by proper techniques of renal transplantation; tricks and tips
A.J. Figueiredo, Coimbra (PT)

How to diagnose and manage postoperative and long-term complications following renal transplantation
F.J. Burgos Revilla, Madrid (ES)
Oligometastatic prostate cancer
ESU Course 48

**Location:** Orange Area, Room 5 (Level 0)

**Chair:** R.J. Karnes, Rochester (US)

**Aims and objectives of this session**
- Provide an introduction to working definition(s), background, and biology of oligometastatic prostate cancer.
- Update the current molecular imaging to provide such a diagnosis.
- Review the potential roles of surgery and/or radiation as metastasis directed therapy.
- Understand opportunities and challenges in individualizing care of the oligometastatic prostate cancer patient.

**Introductions; Oligometastatic prostate cancer as a diagnosis**

R.J. Karnes, Rochester (US)

**Surgery for recurrent nodal metastasis with updates on molecular/PET imaging**

A. Briganti, Milan (IT)

**Radiation in oligometastatic prostate cancer (primary and recurrent) and clinical trial updates**

P. Ost, Ghent (BE)

**Surgery of primary oligometastatic prostate cancer (N1/M1)**

R.J. Karnes, Rochester (US)

**Further cases (case illustrations throughout)**

A. Briganti, Milan (IT)
R.J. Karnes, Rochester (US)
P. Ost, Ghent (BE)

**Questions audience**
**Leadership and the EAU: Cultivating (medical) leadership**

**Specialty session**

**Monday 19 March**

**13:00 - 16:00**

**Location:** Orange Area, Room 6 (Level 0)

**Chair:** J.P.M. Sedelaar, Nijmegen (NL)

**Aims and objectives of this session**

- What is my role as a medical leader?
  - Who are my stakeholders when it comes to leadership
  - Leadership lessons
- Managing peers and co-workers
  - Preferences leadership styles
- Analysis and diagnosis on your system
- Reflection on my role as a leader
  - What are the actual management challenges
  - Reflection on my role
- Enhancing engagement
  - How does a climate of change occur
  - What is my role within my team

**Group work:**

- Discuss how you can develop/implement medical leadership
- Consider potential challenges you might face in completing and how you may overcome them
- Distinguish technical challenges from adaptive challenges
- Observe your system
- Feedback on personal leadership

**Scientific Programme - EAU18 Copenhagen**

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<th>Time</th>
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<td><strong>Welcome and introduction</strong></td>
<td>J.P.M. Sedelaar, Nijmegen (NL)</td>
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<td>13:15 - 14:15</td>
<td><strong>Personal behaviour and leadership</strong></td>
<td>H. Rijksen, Maarsbergen (NL)</td>
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<td>14:15 - 15:15</td>
<td><strong>Insights in your organisational patterns and symptoms</strong></td>
<td>J. Zijlstra, Maarsbergen (NL)</td>
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<td>14:45 - 15:15</td>
<td><strong>Ambidexterity</strong></td>
<td>H. Rijksen, Maarsbergen (NL)</td>
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<td>15:15 - 16:00</td>
<td><strong>Adaptive challenges</strong></td>
<td>J. Zijlstra, Maarsbergen (NL)</td>
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</table>
Aims and objectives of this session
The Endoscopic Stone Treatment (EST) training curriculum has the goal to provide the clinician with proficiency skills in the treatment of urinary stones with endoscopic techniques. This protocol has been designed following a very strict process, in order to mitigate the risks of complications related to the learning curve process. Moving along the different tasks 336 Programme Book EAU Education and training steps, the participant will learn how to use the different instruments and technologies that can be functional to stone fragmentation and extraction.

The EST s1 (Endoscopic Stone Treatment step 1) is the first step of this training and assessment curriculum. To aid in the training of these skills and to prepare for this ESTs1 exam, the exercises to be performed can be found in the instructional videos at uroweb.org.
Innovative techniques for improving lymph node management

**Video Session 10**

**Monday 19 March**
14:00 - 15:30

**Location:** Green Area, eURO Auditorium (Level 0)

**Chairs:**
- A. Celia, Bassano del Grappa (IT)
- G. Janetschek, Salzburg (AT)
- P-T. Piéchaud, Bordeaux (FR)

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

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**V70**
**Anatomical 3D image guidance for real-time lymph node localization during robot-assisted salvage lymphadenectomy**

By: Önol F.F., Palayapalayam Ganapathi H., Rogers T., Roof S., Patel V.
Florida Hospital Global Robotics Institute, Dept. of Urology, Celebration, United States of America

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**V71**
**Laparoscopic inguinal and pelvic lymphadenectomy in the penile cancer. A novel abdominal approach**

Hospital General Universitario Gregorio Marañón, Dept. of Urology, Madrid, Spain

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**V72**
**Left post-chemotherapy retroperitoneal lymph node dissection (PC-RPLND): Stage IIIB seminoma**

By: Baldissera Aradas J.V., Miranda Aranzubia O., Pérez Cadavid S., Casas Agudo V., Orosa Andrade A., Lópex León V., Rivas Escudero J., López Rellán E.
Bierzo hospital, Dept. of Urology, Ponferrada, Spain

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**V73**
**Beyond traditional frontiers: Therapeutic supine robotic RPLND for post chemotherapy residual retroperitoneal masses in testicular cancer**

By: Tamhankar A., Ojha S., Ahluwalia P., Gautam G.
Max Institute of Cancer, Dept. of Uro-Oncology, Delhi, India

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**V74**
**Surgical feasibility, and outcome of robot-assisted video endoscopic inguinal lymph node dissection in node positive groin of carcinoma penis patients**

By: Singh A., Jaipuria J., Baidya S., Kumar R., Jain J., Rawal S.
Rajiv Gandhi Cancer Institute and Research Centre, Dept of Uro-Oncology, Delhi, India

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**V75**
**Robot-assisted salvage lymph node dissection for nodal recurrence of prostate cancer**
Salvage robot-assisted retroperitoneal lymphadenectomy for prostate cancer nodal recurrence only detected by 68Ga-PSMA PET CT: Technical aspects and results

By: Mota Filho F.H.A., Savio L.F., Santos R., Da Cruz J.A.S., Passerotti C.C.
Hospital Alemão Oswaldo Cruz, Centro de Cirurgia Robótica, São Paulo, Brazil
Safe access through natural orifice: It is the era of ureteroscopy
Poster Session 73

Monday 19 March
14:00 - 15:30

Location: Green Area, Room 1 (Level 0)

Chairs: E. Emiliani, Barcelona (ES)
       G. Giusti, Milan (IT)
       P.N. Dogra, New Delhi (IN)

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

To be confirmed

990

Double-blinded prospective randomized clinical trial comparing regular and moses modes of holmium laser lithotripsy: Preliminary results

By: Ibrahim A., Fahmy N., Carrier S., Elhilali M., Andonian S.
McGill University Health Centre, Dept. of Urology, Montreal, Canada

991

The comparative clinical study of Ho: YAG and SuperPulse Tm fiber laser lithotripters

By: Ergakov D., Martov A.G., Guseynov M., Traxer O.
1Moscow City D.D. Pletnew's Hospital, Dept. of Urology, Moscow, Russia,
2Université Pierre et Marie Curie, Paris, France

V06

Understanding non-contact laser lithotripsy for dusting – the popcorn effect: A video analysis
To be confirmed

992

Tailored optimal perioperative antimicrobial prophylaxis in retrograde intrarenal surgery: Evidence from a prospective randomized trial

By: Zeng G.
The First Affiliated Hospital of Guangzhou Medical University, Dept. of Urology, Guangzhou, China

993

Spinal versus general anesthesia for retrograde intrarenal surgery: A prospective double-blinded randomized-controlled trial

By: Mohamed M.H.A.T., Al-Hamri S., Askar A., Al-Rawagadh M.
1Cairo University, Dept. of Urology, Cairo, Egypt,
2National Guard Hospital, Dept. of Urology, Riyadh, Saudi Arabia,
3AL-Moosa Specialized Hospital, Dept. of Urology, Alahsa, Saudi Arabia
Comparison of eight digital (reusable and disposable) flexible ureteroscopes deflection properties: In-vitro study in 10 different scope settings

By: Dragos L.B.¹, Rodriguez-Monsalve Herrero M.², Somani B.K.³, Keller E.X.², De Coninck V.², Martis S.M.⁴, Bres-Niewada E.⁵, Sener T.E.⁶, Buttice S.⁷, Daminescu L.C.⁴, Pupca G.N.¹, Bardan R.T.¹, Cumpanas A.A.¹, Iacoboai C.², Doizi S.², Traxer O.⁸

¹University of Medicine and Pharmacy, Dept. of Urology, Timisoara, Romania, ²Tenon Hospital, Dept. of Urology, Paris, France, ³University Hospital Southampton NHS Trust, Dept. of Urology, Southampton, United Kingdom, ⁴Emergency Clinical County Hospital, Dept. of Urology, Timisoara, Romania, ⁵Medical University of Warsaw, Dept. of Urology, Warsaw, Poland, ⁶Marmara University, Dept. of Urology, Istanbul, Turkey, ⁷San Giovanni di Dio Hospital, Dept. of Urology, Agrigento, Italy, ⁸Tenon Hospital, Sorbonne Universités, UPMC Paris VI, Groupe de Recherche Clinique sur la Lithiase Urinaire, GRC n°20, Dept. of Urology, Paris, France

Single-use versus reusable ureteroscopes for retrograde intrarenal surgery (RIRS): Systematic comparative analysis of physical and optical properties in three different devices

Eberhard-Karls-University Tuebingen, Dept. of Urology, Tübingen, Germany

Clinical outcomes and costs of reusable and single-use flexible ureterorenoscopes

By: Mager R., Kurosch M., Höfner T., Frees S., Haferkamp A., Neisius A.
University Medical Center Mainz, Dept. of Urology and Pediatric Urology, Mainz, Germany

Comparison of intrarenal pelvic pressure levels during flexible ureteroscopy, minimipercutaneous nephrolithotomy and conventional percutaneous nephrolithotomy in a kidney model

By: Doizi S., Uzan A., Keller E., De Coninck V., Rodriguez-Monsalve Herrero M., Traxer O.
Tenon Hospital, Assistance-Publique Hôpitaux de Paris. Pierre et Marie Curie University., Dept. of Urology, Paris, France

Comparison of stone free rates and quality of life between percutaneous nephrolithotomy (PNL) and retrograde intra-renal surgery (RIRS) in management of 2-4 cm renal stones: A prospective controlled study

By: Üçer O., Erbatu O., Albaz A.C., Temeltaş G., Gümüş B., Müezzinoğlu T.
Manisa Celal Bayar University, Faculty of Medicine, Dept. of Urology, Manisa, Turkey

Head to head comparison of flexible ureterorenoscopy (fURS) versus robot-assisted flexible URS (rfURS) using the Avicenna Roboflex URS robot

By: Klein J-T.¹, Charalampogianis N.², Fiedler M.², Kabakci S.³, Tokatli Z.⁴, Rassweiler J.²
Reducing operative complications from kidney stones (ROCKS): Understanding emergency department visits after ureteroscopy in a statewide collaborative

By: Ghani K.¹, Kim T.¹, Telang J.¹, Johnson A.¹, Roberts W.¹, Tekchandani A.², Wynberg J.³, Leese J.⁴, Kadlec A.⁵, Dauw C.¹, Hollingsworth J.M.¹

¹University of Michigan, Dept. of Urology, Ann Arbor, United States of America, ²MidMichigan Health, Dept. of Urology, Midland, United States of America, ³Detroit Medical Center, Dept. of Urology, Detroit, United States of America, ⁴IHA Urology, Dept. of Urology, Ann Arbor, United States of America, ⁵West Michigan Urological Associates, Dept. of Urology, Holland, United States of America

Ureterorenoscopy with double JJ stent and its impact on sexual function in young men: A prospective randomised multicenter controlled study

By: Khouni H.¹, Boulma R.¹, Raboudi M.¹, Khiari R.², Ghozzi S.², Ben Rais N.²

¹Internal Forces security Hospital, Dept. of Urology, La Marsa, Tunisia, ²Military Hospital, Dept. of Urology, Tunis, Tunisia

Hospital variation in the rate of emergency department visits after ambulatory stone surgery

By: Dauw C., Hollingsworth J., Dupree J., Hou H., Ghani K.

University of Michigan, Dept. of Urology, Ann Arbor, United States of America
Urine based diagnosis of urothelial cancer

Location: Green Area, Room 2 (Level 0)

Chairs: L. Dyrskjøt, Aarhus (DK)
N. Tanaka, Kashihara (JP)
T.W. Todenhöfer, Tübingen (DE)

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.

1009 DNA methylation of a panel of genes as a urinary biomarker for diagnosis of bladder cancer

By: Georgopoulos P. 1, Apostolidis A. 1, Fragkou E. 2, Papaioannou M. 2, Ioannidis I-E. 1, Markopoulou S. 3
1Aristotle University of Thessaloniki, Dept. of Urology, Thessaloniki, Greece, 2Aristotle University of Thessaloniki, Dept. of Biochemistry, Medical School, Thessaloniki, Greece, 3Aristotle University of Thessaloniki, Dept. of Pharmacology, Thessaloniki, Greece

1003 Prospective validation of a diagnostic urine test for bladder cancer: The HEMAturia study

By: Van Kessel K. 1, De Jong J. 1, Ziel-Van Der Made A. 1, Roshani H. 2, Haensel S. 3, Van Montfrans-Wolterbeek J. 3, Boeve E. 4, Oomens E. 5, Van Casteren N. 6, Boormans J. 7, Van Criekinge W. 8, Zwarthoff E. 1
1Erasmus MC Cancer Institute, Erasmus Medical Center, Dept. of Pathology, Rotterdam, Netherlands, The, 2HagaZiekenhuis, Dept. of Urology, The Hague, Netherlands, The, 3Havenziekenhuis, Dept. of Urology, Rotterdam, Netherlands, The, 4Franciscus Hospital, Dept. of Urology, Rotterdam, Netherlands, The, 5Amphia Hospital, Dept. of Urology, Breda, Netherlands, The, 6IJsselland Hospital, Dept. of Urology, Capelle a/d IJssel, Netherlands, The, 7Erasmus MC Cancer Institute, Erasmus Medical Center, Dept. of Urology, Rotterdam, Netherlands, The, 8MDxHealth, SEO, Irvine, United States of America

1004 Urine cell based DNA methylation classifier for monitoring bladder cancer

By: Van Der Heijden A. 1, Mengual L. 2, Ingelmo-Torres M. 2, Lozano J.J. 3, Van Rijt-Van De Westerlo C. 1, Sousa C. 2, Geavlete B. 4, Moldoveanu C. 4, Ene C. 4, Dinney C. 5, Czerniak B. 5, Schalken J. 1, Kiemeney L. 1, Ribal M. 2, Witjes A. 1, Alcaraz A. 2
1Radboud University Medical Center, Dept. of Urology, Nijmegen, Netherlands, The, 2Hospital Clinic, Dept. and Laboratory of Urology, Barcelona, Spain, 3CIBERRehd, Bioinformatic Platform, Barcelona, Spain, 4Saint John Emergency Clinical Hospital, Dept.
1005 Diagnostic predictive value of Xpert bladder cancer monitor in the follow up of patients affected by non muscle invasive bladder cancer (NMIBC)

By: D’Elia C.1, Pycha A.2, Hanspeter E.3, Trenti E.1, Palermo S.1, Pycha A.1, Mian C.3

1Bolzano General Hospital, Dept. of Urology, Bolzano, Italy, 2Riga Stradiins University, Dept. of Urology, Riga, Latvia, 3Bolzano General Hospital, Dept. of Pathology, Bolzano, Italy

1006 Comprehensive genomic profiling of neuroendocrine bladder cancer pinpoints molecular origin and potential therapeutics

By: Zhang R.1, Zhuang G.2, Chen H.1, Shen P.2, Jing Y.2, Xue W.1, Huang Y.1

1Ren Ji Hospital, School of Medicine, Shanghai Jiao Tong University, Dept. of Urology, Shanghai, China, 2Ren Ji Hospital, School of Medicine, Shanghai Jiao Tong University, State Key Laboratory of Oncogenes and Related Genes, Renji-Med X Clinical Stem Cell Research Center, Shanghai, China

1007 Aberrant N-glycosylation profile of serum immunoglobulins is a diagnostic biomarker of urothelial carcinomas

By: Tanaka T.1, Yoneyama T.1, Noro D.1, Imanishi K.1, Yuta K.1, Tobisawa Y.1, Mori K.1, Yamamoto H.1, Imai A.1, Hatakeyama S.1, Hashimoto Y.1, Koie T.1, Tanaka M.2, Nishimura S.2, Kurauchi S.3, Takahashi I.4, Ohyama C.1

1Hirosaki University Graduate School of Medicine, Dept. of Urology, Hirosaki, Japan, 2Hokkaido University, Graduate School of Life Science, Frontier Research Centre for Advanced Material and Life Science, Sapporo, Japan, 3Hirosaki University Graduate School of Medicine, Dept. of Social Medicine, Hirosaki, Japan, 4Hirosaki University Graduate School of Medicine, Dept. of Social medicine, Hirosaki, Japan

1008 MALBAC-based whole genome abnormality score (WGAS): A new concept technique shows its potential in non-invasive diagnosis of bladder cancer

By: Liu H.1, Lin T.1, Ouyang N.2, He W.1, Wang B.1, Xu K.1, Lu S.3, Huang J.1

1Sun Yat-sen Memorial Hospital, Sun Yat-sen University, Dept. of Urology, Guangzhou, China, 2Sun Yat-sen Memorial Hospital, Sun Yat-sen University, Cellular & Molecular Diagnostics Center, Guangzhou, China, 3Yikon Genomics, Yikon Genomics, Shanghai, China

1010 A novel non-invasive aid for bladder cancer diagnosis: A prospective, multi-centre study to evaluate the ADXBLADDER test

By: Dudderidge T.1, Nabi G.2, Mom J.3, Umez-Eronini N.4, Hrouda D.5, Cresswell J.6, McCracken S.7

1University Hospital Southampton, Dept. of Urology, Southampton, United Kingdom, 2Ninewells Hospital, Dept. of Urology, Dundee, United Kingdom, 3West Cumberland
1011 Withdrawn
To be confirmed

1012 What is the role of urinary cytology as part of haematuria investigations? Results of a prospective observational study (DETECT I)
By: Tan W.S.1, Feber A.2, Sarpong R.1, Jalil R.1, Khetrapal P.1, Rodney P.1, Dong L.3, Rezaee S.3, Williams N.1, Brew-Graves C.1, Kelly J.1
1University College London, Division of Surgery & Interventional Science, London, United Kingdom, 2University College London, UCL Cancer Institute, London, United Kingdom, 3University College London, UCL Cancer Institute, London, United Kingdom

1013 “Sniffing bladder cancer” – detection of bladder tumours with an electronic nose and ion mobility spectrometry
By: Heers H.1, Gut J.M.1, Hegele A.1, Hofmann R.3, Boeselt T.2, Hattesohl A.2, Baumbach J.3, Koczulla A.R.2
1Philipps-Universität Marburg, Dept. of Urology and Paediatric Urology, Marburg, Germany, 2Philipps-Universität Marburg, Dept. of Pulmonology, Marburg, Germany, 3Reutlingen University, Dept. of Applied Chemistry, Reutlingen, Germany

1014 Detection of urothelial carcinoma using selected urine-DNA methylation biomarkers in patients with gross hematuria
By: Xiong G., Guo R., Li X., Zhang K., Zhou L.
Peking University First Hospital, Dept. of Urology, Beijing, China

1015 Invasion-associated miRNA signatures as possible diagnostic biomarker of muscle invasive bladder cancer using tissue and urinary exosomes
By: Baumgart S.1, Meschkat P.1, Edelmann P.1, Viertel C.1, Pryanulkhin A.2, Bohle R.3, Stoeckle M.1, Hartmann A.4, Heinzelmann J.1, Junker K.1
1Saarland University Medical Center, Dept. of Urology and Pediatric Urology, Homburg, Germany, 2University Hospital Bonn, Dept. of Pathology, Bonn, Germany, 3Saarland University Medical Center, Dept. of Pathology, Homburg, Germany, 4University Hospital Erlangen, Dept. of Pathology, Erlangen, Germany

1016 Is the diagnostic routine evaluation necessary for patients with microscopic hematuria during anticoagulant therapy to detect urinary tract malignancy?
By: Moon K.H., Choi J.Y., Ko Y.H., Song P.H., Jung H.C.
Yeungnam University Medical Center, Dept. of Urology, Daegu, Korea, South
Urothelial carcinoma of the upper tract: New options, new strategies and personalised management

Poster Session 75

Monday 19 March
14:00 - 15:30

Location: Red Area, Room 1 (Level 0)

Chairs: C. Beisland, Bergen (NO)
S. Osanto, Leiden (NL)
S. Shariat, Vienna (AT)

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

1017

Results of POUT - a phase III randomised trial of peri-operative chemotherapy versus surveillance in upper tract urothelial cancer (UTUC)


1Royal Preston Hospital, Dept. of Cancer, Preston, United Kingdom, 2Newcastle upon Tyne Hospitals NHS Trust., Dept. of Urology and Renal services, Newcastle, United Kingdom, 3University Hospitals Leicester, Dept. of Urology, Leicester, United Kingdom, 4North Bristol NHS Trust, Dept. of Urology, Bristol, United Kingdom, 5The University of Sheffield, Dept. of Oncology & Metabolism, Sheffield, United Kingdom, 6University of Birmingham, Institute of Cancer and Genomic Sciences, Birmingham, United Kingdom, 7Cardiff University, School of Medicine, Cardiff, United Kingdom, 8Beatson West of Scotland Cancer Centre, Cancer Research UK Glasgow Centre, Glasgow, United Kingdom, 9Institute of Cancer Research, Clinical Trials and Statistics Unit, London, United Kingdom, 10University of Bristol, Qualitative Research Integrated within Trials, Bristol, United Kingdom, 11Southend University Hospital NHS Foundation Trust, Dept. of Urology, Southend, United Kingdom, 12Consumer Representative, Consumer Representative, London, United Kingdom, 13St Barts & the London NHS Trust, Experimental Cancer Medicine, London, United Kingdom, 14Institute of Cancer Research, Clinical Trials and Statistics Unit, London, United Kingdom, 15University of Bristol, Qualitative Research Integrated within Trials, Bristol, United Kingdom, 16Fight Bladder Cancer, Consumer Representative, Chinnor, United Kingdom

1018

Regional distribution of lymph node metastasis in upper urinary tract urothelial cancer, sub-analysis of large multi-institutional study (JCOG1110A)

Risk-stratified surveillance protocol improves cost-effectiveness after radical nephroureterectomy in patients with upper tract urothelial carcinoma

By: Momota M. 1, Hatakeyama S. 1, Tobisawa Y. 1, Yoneyama T. 1, Yamamoto H. 1, Yoneyama T. 1, Hashimoto Y. 1, Koie T. 1, Iwabuchi I. 2, Ogasawara M. 2, Kawaguchi T. 2, Ohyama C. 1

1Hirosaki University Graduate School of Medicine, Dept. of Urology, Aomori, Japan, 2Aomori Prefectural Central Hospital, Dept. of Urology, Aomori, Japan

Clinical implication of bacillus Calmette-Guérin (BCG) perfusion therapy in patients with carcinoma in situ (CIS) of the upper urinary tract: A comparison with nephroureterectomy


Hirosaki University Graduate School of Medicine, Dept. of Urology, Hirosaki, Japan
1021 Anti-cancer effects of green tea consumption on malignant behavior up-regulated by smoking in patients with upper urinary tract cancer

By: Sagara Y.¹, Miyata Y.¹, Nakamura Y.¹, Yasuda T.², Araki K.¹, Matsuo T.¹, Ohba K.¹, Sakai H.¹
¹Nagasaki University Hospital, Dept. of Urology and Renal Transplantation, Nagasaki, Japan, ²Nagasaki University Hospital, Dept. of Urology and Renal Transplantation, Nagasaki, Japan

1022 Postoperative chemotherapy bladder instillation after nephroureterectomy: A survey from the YAU urothelial cancer group and ESOU

By: Von Rundstedt F-C.¹, Seiler R.², Roghmann F.³, Aziz A.⁴, Dobruch J.⁵, Necchi A.⁶, Kluth L.⁷, Rink M.⁷, Hendrickson K.⁸, Poyet C.⁹, Decaestecker K.¹⁰, Moschini M.¹¹, Sargsos P.¹², Brausi M.¹³, Thalmann G.¹⁴, Xylinas E.¹⁵
¹University of Jena, Dept. of Urology, Jena, Germany, ²University of Bern, Dept. of Urology, Bern, Switzerland, ³University of Bochum, Dept. of Urology, Herne, Germany, ⁴University Hospital Rostock, Dept. of Urology, Rostock, Germany, ⁵University Hospital Warsaw, Dept. of Urology, Warsaw, Poland, ⁶Fondazione IRCCS, Istituto Nazionale dei Tumori, Dept. of Medical Oncology, Milan, Italy, ⁷University Hospital Hamburg, Dept. of Urology, Hamburg, Germany, ⁸Dutch Cancer Institute, Dept. of Urology, Amsterdam, Netherlands, ⁹University Hospital Zürich, Dept. of Urology, Zürich, Switzerland, ¹⁰University Hospital Gent, Dept. of Urology, Ghent, Belgium, ¹¹Kantonsspital Luzern, Dept. of Urology, Luzern, Switzerland, ¹²Institut Bergonié, Dept. of Radiation Oncology, Bordeaux, France, ¹³Hospital Center Carpi-Modena, Dept. of Urology, Modena, Italy, ¹⁴University Hospital Bern, Dept. of Urology, Bern, Switzerland, ¹⁵Cochin Hospital Paris Descartes University, Dept. of Urology, Paris, France

1023 The influence of dysplasia at the surgical margin on the prognosis for patients with upper tract urothelial carcinoma after radical nephroureterectomy

By: Huang J., Yuan Y., Chen Y., Zhang J., Chen H., Xue W., Huang Y.
Ren Ji Hospital, School of Medicine, Shanghai Jiao Tong University, Dept. of Urology, Shanghai, China

1025 The impact of CKD on upper tract urothelial carcinoma

By: Kodama H.¹, Hatakeyama S.¹, Soma O.¹, Matsumoto T.¹, Kusaka A.¹, Hosogoe S.¹, Hamono I.¹, Tobisawa Y.¹, Yoneyama T.¹, Yamamoto H.¹, Imai A.¹, Yoneyama T.¹, Hashimoto Y.¹, Koie T.¹, Ito H.², Yoshikawa K.³, Sasaki A.⁴, Kawaguchi T.⁵, Ohyama C.¹
¹Hirosaki University Graduate School of Medicine, Dept. of Urology, Hirosaki, Japan, ²Aomori Rosai Hospital, Dept. of Urology, Hachinohe, Japan, ³Mutsu General Hospital, Dept. of Urology, Mutsu, Japan, ⁴Tsugaru General Hospital, Dept. of Urology, Goshogawara, Japan, ⁵Aomori Prefectural Central Hospital, Dept. of Urology, Aomori, Japan

1026 Ureteroscopy prior to nephroureterectomy for upper tract urothelial carcinoma – does it affect oncological outcomes?
Value of repeated ureterorenoscopy within the first 3 months after endoscopic treatment in upper tract urothelial carcinoma (UTUC)


1Medical University of Vienna, Dept. of Urology, Vienna, Austria, 2University Hospitals Leuven, Dept. of Urology, Leuven, Belgium, 3Cochin Hospital, Assistance-Publique Hôpitaux de Paris, Paris Descartes University, Dept. of Urology, Paris, France, 4Pitié-Salpêtrière, Assistance-Publique Hôpitaux de Paris and Faculté de Médecine Pierre et Marie Curie, University Paris VI, Dept. of Urology, Paris, France, 5McGill University Health Center, Division of Urology, Dept. of Surgery, Montreal, Canada, 6Urological Research Institute, Vita-Salute University, San Raffaele Scientific Institute, Dept. of Urology, Milan, Italy, 7The Netherlands Cancer Institute-Antoni van Leeuwenhoek Hospital, Dept. of Urology, Amsterdam, Netherlands, The, 8University Hospitals Leuven, Dept. of Urology, Leuven, Belgium, 9Urological Research Institute, Vita-Salute University, San Raffaele Scientific Institute, Dept. of Urology, Milan, Italy, 10Virginia Commonwealth University, Division of Urology, Richmond, United States of America, 11Virginia Commonwealth University, Division of Urology, Richmond, United States of America, 12Kantonsspital Winterthur, Dept. of Urology, Winterthur, Switzerland, 13Hôpital Privé de La Louvière, Générale de Santé, Dept. of Urology, Lille, France, 14Medical University of Vienna, Dept. of Urology, Vienna, Austria

Utility of lymph node dissection for clinical node negative upper tract urothelial cell carcinoma: A multicenter study

By: Hamilton Z. 1, Haifler M. 2, Krabbe L. 3, Clinton T. 3, Han D. 1, Ryan S. 1, Reddy M. 1, Field C. 1, Bloch A. 1, Uzzo R. 2, Margulis V. 3, Derweesh I. 1

1University of California, Dept. of Urology, San Diego, United States of America, 2Fox Chase Cancer Center, Dept. of Urology, Philadelphia, United States of America, 3University of Texas Southwest, Dept. of Urology, Dallas, United States of America

Predicting factors of renal function decline after radical nephroureterectomy for upper tract urothelial carcinoma: Correlation with results of preoperative 99mTc-diethylenetriamine pentaacetic acid (DTPA)

By: Ryu J. 1, Choi S.Y. 1, Lee J. 1, Lee W.C. 1, Chae H.K. 1, Choi W. 1, Kyung Y.S. 1, Park S. 2, Moon K.H. 2, You D. 1, Jeong I.G. 1, Hong J.H. 1, Ahn H. 1, Kim C-S. 1

1Asan Medical Center, Dept. of Urology, Seoul, Korea, South, 2Ulsan University Hospital, Dept. of Urology, Ulsan, Korea, South

The impact of neoadjuvant chemotherapy on locally advanced upper tract urothelial carcinoma: A multicenter study

Scientific Programme - EAU18 Copenhagen
1031

Prognostic value of circulating miRNAs in upper urinary tract tumours

By: Izquierdo Reyes L. 1, Montalbo R. 1, Ingelmo-Torres M. 1, Lozano J.J. 2, Grandes L. 1, Alcaraz A. 1, Mengual L. 1

1Hospital Clinic, Dept. and Laboratory of Urology, Barcelona, Spain, 2CIBERehd. Centro de Investigación Biomédica en red de Enfermedades Hepáticas y Digestivas, Bioinformatic Platform, Barcelona, Spain

1024

Efficacy of intravesical Bacillus Calmette-Guérin for subsequent non-muscle invasive bladder cancer after radical nephroureterectomy for upper urinary tract urothelial carcinoma: A propensity score matched analysis with primary bladder cancer

To be confirmed

Summary

S. Shariat, Vienna (AT)
Surgery for the small renal mass: What can be achieved?
Poster Session 76

Location: Red Area, Room 2 (Level 0)
Chairs: I.S. Gill, Los Angeles (US)
V. Matveev, Moscow (RU)
A. Minervini, Florence (IT)

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

1032

Tumor size, histological grade, and microvascular invasion predict progression of renal cell carcinoma after radical or partial nephrectomy

By: Mattila K.E. 1, Laajala T.D. 2, Tornberg S.V. 3, Kilpeläinen T. 4, Vainio P. 5, Ettala O. 6, Boström P. 6, Nisen H. 4, Elo L. 7, Jaakkola P.M. 1

1University of Turku and Turku University Hospital, Dept. of Oncology and Radiotherapy, Turku, Finland, 2University of Turku, Dept. of Mathematics and Statistics, Turku, Finland, 3University of Helsinki and Helsinki University Hospital, Dept. of Urology, Helsinki, Finland, 4University of Helsinki and Helsinki University Hospital, Dept. of Urology, Helsinki, Finland, 5University of Turku and Turku University Hospital, Dept. of Pathology, Turku, Finland, 6University of Turku and Turku University Hospital, Dept. of Urology, Turku, Finland, 7University of Turku and Åbo Akademi University, Turku Centre for Biotechnology, Turku, Finland

1033

Baseline and post-operative renal function are related to cancer-specific mortality in renal cell carcinoma: Retrospective analysis of a multicentre dataset of 3,500 cases

By: Antonelli A. 1, Minervini A. 2, Sandri M. 3, Bertini R. 4, Bertolo R. 5, Carini M. 2, Furlan M. 1, Larcher A. 4, Mantica G. 6, Mari A. 2, Montorsi F. 4, Palumbo C. 1, Porgiglia F. 5, Simeone C. 1, Terrone C. 6, Capitanio U. 4

1Spedali Civili Hospital, Dept. of Urology, Brescia, Italy, 2Careggi Hospital, Dept. of Urology, Florence, Italy, 3University of Brescia, Dept. of Urology, Brescia, Italy, 4Urological Research Institute, Dept. of Urology, Milan, Italy, 5San Luigi Gonzaga Hospital, Dept. of Urology, Turin, Italy, 6IRCCS San Martino Hospital, Dept. of Urology, Genoa, Italy

1034

Pseudocapsule infiltration, positive surgical margins and local recurrence after enucleative robot-assisted partial nephrectomy (RAPN) for renal cell carcinoma (RCC): Results at a median follow-up of 56 months

By: Campi R. 1, Di Maida F. 1, Mari A. 1, Bencini G. 1, Montagnani I. 2, Morselli S. 1, Gigliucci G. 1, Pili A. 1, Tuccio A. 1, Lapini A. 1, Carini M. 1, Raspolinni M. 2, Minervini A. 1
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<th>Institutions</th>
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<tr>
<td>1035</td>
<td>Impact of surgical margin status after partial nephrectomy for renal cell carcinoma</td>
<td>By: Jang W.S. 1, Lee J.S. 1, Koh D.H. 1, Park J.W. 1, Kang S.K. 1, Kim J.W. 1, Kim Y.S. 2, Cho I.R. 3, Lee J.S. 4, Kim W.T. 5, Ham W.S. 1, Choi Y.D. 1</td>
<td>1Yonsei University College of Medicine, Dept. of Urology, Seoul, Korea, South, 2National Health Insurance Corporation Ilsan Hospital, Dept. of Urology, Goyang, Korea, South, 3Inje University College of Medicine, Dept. of Urology, Gimhae, Korea, South, 4Cheil General Hospital &amp; Women's Healthcare Center, Dept. of Urology, Seoul, Korea, South, 5Chungbuk National University, Dept. of Urology, Cheongju, Korea, South</td>
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<td>1036</td>
<td>Contact surface area predicts post nephron sparing surgery renal function decline in low surgical complexity tumors</td>
<td>By: Kord E., Rappaport Y., Zisman A., Haifler M.</td>
<td>Shamir Medical Center, Dept. of Urology, Tzrifin, Israel</td>
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<td>1037</td>
<td>Oncologic and functional outcomes of radical and partial nephrectomy in pT3a pathologically upstaged renal cell carcinoma: A multi institutional analysis</td>
<td>By: Reddy M. 1, Bindayi A. 1, Hamilton Z. 1, Ryan S. 1, Yim K. 1, Nasseri R. 1, Joshi S. 2, Benoit P. 3, Pruthi D. 4, Gupta R. 5, Kirmiz S. 5, Bensalah K. 3, Capitanio U. 6, Montorsi F. 6, Lane B. 5, Uzzo R. 2, Derweesh I. 1</td>
<td>1UC San Deigo, Dept. of Urology, La Jolla, United States of America, 2Fox Chase Cancer Center, Dept. of Urology, Philadelphia, United States of America, 3University of Rennes, Dept. of Urology, Rennes, France, 4UT San Antonio, Dept. of Urology, San Anotnio, United States of America, 5Spectrum Health, Dept. of Urology, Grand Rapids, United States of America, 6Ospedale San Raffaele, Dept. of Urology, Milan, Italy</td>
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<td>1038</td>
<td>Open, laparoscopic and robot-assisted partial nephrectomy: Comparison of perioperative outcomes and trifecta rate achievement in a large, single-institution series</td>
<td>By: Borghesi M., Schiavina R., Bianchi L., Barbaresi U., Presutti M., Salvador M., Angiolini A., Pultrone C.V., Dababneh H., Rizzi S., Brunocilla E.</td>
<td>University of Bologna, Dept. of Urology, Bologna, Italy</td>
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Perioperative, functional and oncological outcomes of robot-assisted partial nephrectomy for cT2 renal tumors: A multicenter analysis (The ROSULA project)


1 San Luigi Gonzaga Hospital, Dept. of Urology, Orbassano, Italy, 2 Virginia Commonwealth University, Dept. of Urology, Richmond, United States of America, 3 UC San Diego Health System, Dept. of Urology, La Jolla, United States of America, 4 Swedish Urology Group, Dept. of Urology, Seattle, United States of America, 5 IRCCS Ospedale San Raffaele, Dept. of Urology, Milan, Italy, 6 Regina Elena National Cancer Institute, Dept. of Urology, Rome, Italy, 7 University of Florence, Careggi Hospital, Dept. of Urology, Florence, Italy, 8 Lewis Katz School of Medicine at Temple University, Dept. of Urology, Philadelphia, United States of America, 9 G. Pascale Foundation and Institute for Cancer Research and Care, Dept. of Urology, Naples, Italy, 10 European Institute of Oncology, Dept. of Urology, Milan, Italy, 11 OLV Hospital, Dept. of Urology, Aalst, Belgium, 12 Urological Science Institute, Yonsei University College of Medicine, Dept. of Urology, Seoul, Korea, South, 13 Fox Chase Cancer Center, Dept. of Urology, Philadelphia, United States of America, 14 Annuziata Hospital, Dept. of Urology, Chieti, Italy, 15 University of Tennessee Medical Center, Dept. of Urology, Knoxville, United States of America, 16 Changhi Hospital, Dept. of Urology, Shanghai, China, 17 Medical College Wisconsin, Dept. of Urology, Milwaukee, United States of America, 18 Guy's Hospital, Dept. of Urology, London, United Kingdom, 19 City of Hope Medical Center, Dept. of Urology, Duarte, United States of America, 20 Cleveland Clinic Foundation, Dept. of Urology, Cleveland, United States of America, 21 Indiana University, Dept. of Urology, Indianapolis, United States of America, 22 University of Southern California, Dept. of Urology, Los Angeles, United States of America.

Comparison of partial vs. radical nephrectomy effect on other cause mortality, cancer specific mortality and 30-day mortality in patients older than 75 years


1 Università Degli Studi “G.D’Annunzio”, Dept. of Urology, Chieti, Italy, 2 Martini-Klinik
Surgical outcomes and predictors of complications in elderly patients undergoing partial or radical nephrectomy for clinically localized renal cancer: A multi-institutional analysis (RESURGE project)


Partial vs radical nephrectomy for renal masses in the octogenarian

By: Abu-Ghanem Y.
Sheba Hospital, Dept. of Surgical Urology, Tel Hashomer, Israel

Patterns and predictors of resection techniques during partial nephrectomy for T1 renal masses: Results of a multicentre prospective cohort study from the surface-
intermediate-base (SIB) margin score international consortium (IDEAL phase 2b)

By: Campi R.1, Kutikov A.2, Lane B.3, De Cobelli O.4, Sanguedolce F.5, Villeda Sandoval C.I.6, Hatzichristodoulou G.7, Mari A.1, Antonelli A.8, Rodriguez Faba O.9, Langenhuijsen H.10, Klatte T.11, Roscigno M.12, Akdogan B.13, Karakoyunlu N.14, Marszalek M.15, Capitanio U.16, Volpe A.17, Brookman-May S.18, Uzzo R.2, Carini M.1, Minervini A.1

1University of Florence, Dept. of Urology, Florence, Italy, 2Fox Chase Cancer Center, Division of Urologic Oncology, Philadelphia, United States of America, 3Spectrum Health Medical Group Urology, Dept. of Urology, Grand Rapids, United States of America, 4European Institute of Oncology (IEO), Dept. of Urology, Milan, Italy, 5Southmead Hospital-North Bristol NHS Trust, Dept. of Urology, Bristol, United Kingdom, 6Fundacio Puigvert, Autonomous University of Barcelona, Dept. of Urology, Barcelona, Spain, 7Technical University of Munich, University Hospital Klinikum Rechts Der Isar, Dept. of Urology, Munich, Germany, 8University of Brescia, Dept. of Urology, Brescia, Italy, 9Fundacio Puigvert, Uro-oncology Unit, Barcelona, Spain, 10Radboud University Nijmegen Medical Centre, Dept. of Laparoscopy, Robotics and Endourology, Nijmegen, Netherlands, The, 11Medical University of Vienna, Dept. of Urology, Vienna, Austria, 12AO Papa Giovanni XXIII, Dept. of Urology, Bergamo, Italy, 13Hacettepe University, School of Medicine, Dept. of Urology, Ankara, Turkey, 14Dışkapı Yıldırım Beyazıt Training and Research Hospital, Dept. of Urology, Ankara, Turkey, 15Donauhospital, Dept. of Urology and Andrology, Vienna, Austria, 16University Vita-Salute San Raffaele, Scientific Institute Hospital San Raffaele, Dept. of Urology, Milan, Italy, 17Maggiore della Carità Hospital, Dept. of Urology, Novara, Italy, 18Ludwig-Maximilians-University, Campus Grosshadern, Dept. of Urology, Munich, Germany

| 1045 |

**Withdrawn**
To be confirmed

**Summary**
V. Matveev, Moscow (RU)
New imaging technologies for the kidney
Poster Session 77

**Poster Session 77**

**Monday 19 March**
**14:00 - 15:30**

**Location:** Red Area, Room 3 (Level 0)

**Chairs:**
S. Kruck, Tübingen (DE)
J. Walz, Marseille (FR)

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.

1046

**What doses are our patients receiving? The radiation dose associated with CT, RIRS and PCNL**

By: Patel P.¹, Lobo N.¹, Honey I.², Gallagher D.², Rottenberg G.³, Glass J.¹, Thomas K.¹, Bultitude M.¹

¹Guy's and St Thomas' NHS Foundation Trust, Dept. of Urology, London, United Kingdom,
²Guy's and St Thomas' NHS Foundation Trust, Dept. of Medical Physics, London, United Kingdom,
³Guy's and St Thomas' NHS Foundation Trust, Dept. of Radiology, London, United Kingdom

1047

**Patients' perception of safety of radiological investigations: A cross sectional study**

By: Kumar P., Irving S.
Norfolk and Norwich University Hospital NHS foundation trust, Dept. of Urology, Norwich, United Kingdom

1048

**Minimizing radiation dose in urologists assessment: Narrowing the anatomical focus of CT KUB**

By: Rodger F.¹, Leitch A.², Nanapragasam A², Holmes R.²

¹Queen Elizabeth University Hospital, Dept. of Urology, Glasgow, United Kingdom,
²Royal Victoria Infirmary, Dept. of Radiology, Newcastle upon Tyne, United Kingdom

1049

**Combined use of 3D reconstruction plus near-infrared fluorescence during robot-assisted partial nephrectomy for pT1b tumors: Operative and early functional results based on renal scan**

By: Luciani L.G., Mattevi D., Chiodini S., Puglisi M., Valentino V., Anceschi U., Tiscione D., Malossini G.
Santa Chiara Hospital, Dept. of Urology, Trento, Italy

1050

**Virtual partial nephrectomy imaging is very useful in robot-assisted partial nephrectomy**
1052

Follow up of small renal masses treated with cryoablation: Role of contrast enhanced ultrasound

By: Sanchez Gallego M.D. , Sanz Mayayo E. , Gómez Dos Santos V. , Rodríguez-Patrón Rodríguez R. , Lorca Álvaro J. , Álvarez Rodríguez S. , Hevia Palacios V. , Burgos Revilla F.J.
Hospital Ramón y Cajal, Dept. of Urology, Madrid, Spain

1053

Subtypization of renal cell carcinoma: Application of dual-energy computed tomography and iodine uptake analysis – correlation with microvascular density in tumor specimens

By: Marcon J. 1, Graser A. 2, Horst D. 3, Casuscelli J. 1, Stief C. 1, Reiser M. 2, Buchner A. 1, Staehler M. 1
1Ludwig-Maximilian University of Munich, Dept. of Urology, Munich, Germany, 2Ludwig-Maximilian University of Munich, Dept. of Clinical Radiology, Munich, Germany, 3Ludwig-Maximilian University of Munich, Dept. of Pathology, Munich, Germany

1054

The value of sonography in predicting clear cell carcinoma’s nuclear grade. Preliminary results using B-mode, Doppler and contrast enhanced ultrasound

By: Dobrota F. 1, Tamas Szora A. 2, Socaciu M. 3, Buruian M. 4, Coman I. 1, Crisan N. 1, Bungårdean C. 5, Opincariu I. 6, Badea R. 3
1Cluj-Napoca Municipal Hospital, Iuliu Ha?ieganu University of Medicine and Pharmacy, Dept. of Urology, Cluj Napoca, Romania, 2Municipal Hospital, Iuliu Ha?ieganu University of Medicine and Pharmacy, Dept. of Radiology and Imaging, Cluj Napoca, Romania, 3Octavian Fodor Regional Institute of Gastroenterology and Hepatology, Iuliu Ha?ieganu University of Medicine and Pharmacy, Dept. of Ultrasoundography, Cluj Napoca, Romania, 4Tg. Mure? County Emergency Hospital, University of Medicine and Pharmacy, Dept. of Radiology and Imaging, Targu Mure?, Romania, 5Cluj-Napoca Municipal Hospital, Iuliu Ha?ieganu University of Medicine and Pharmacy, Dept. of Pathology, Cluj Napoca, Romania, 6Iuliu Ha?ieganu University of Medicine and Pharmacy, Dept. of Anatomy, Cluj Napoca, Romania

1055

Non-contrast computed tomography for percutaneous nephrolithotomy: Are complications and stone-free rate related to Hounsfield parameters? Results of a cross-sectional study

By: Gallioli A. 1, De Lorenzis E. 1, Boeri L. 1, Fontana M. 1, Zanetti S.P. 1, Palmisano F. 1, Sampogna G. 1, Longo F. 1, Salonia A. 2, Montanari E. 1
1Fondazione IRCCS Ca’ Granda-Ospedale Maggiore Policlinico, University of Milan, Dept. of Urology, Milan, Italy, 2IRCCS Ospedale San Raffaele, URI, Division of Experimental Oncology/Unit of Urology, Milan, Italy
Assessing the diagnostic accuracy of low and ultra-low radiation dose CT of the urinary tract for the investigation of urolithiasis

By: Rodger F., Ng A., Santoni N., Rhoditi G., Aboumarzouk O.
Queen Elizabeth University Hospital, Dept. of Urology, Glasgow, United Kingdom

Characterization of renal stones using spectral detector computed tomography

1University Hospital Cologne, Dept. of Diagnostic and Interventional Radiology, Cologne, Germany,
2University Hospital Cologne, Dept. of Urology, Cologne, Germany,
3University of Bonn, Dept. of Urology, University Stone Centre, Bonn, Germany,
4University Hospital Mannheim, Dept. of Urology, Mannheim, Germany

Prediction of intraoperative urinary collecting system entry in patients with peripheral renal tumors undergoing partial nephrectomy: Usefulness of tumor-centered multiplanar reconstruction

1Tokyo Medical and Dental University Graduate School, Dept. of Urology, Tokyo, Japan,
2Ochanomizu Surugadai Clinic, Dept. of Radiology, Tokyo, Japan

State-of-the-art lecture Better characterise with imaging
S. Kruck, Tübingen (DE)
Prostate cancer: Improved characterisation of patients and disease
Poster Session 78

Location: Blue Area, Room 1 (Level 0)
Chairs: S. Boxler, Bern (CH)  
W.C. Loidl, Linz (AT)  
S.V. Yrastorza, Quezon (PH)

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

1058
Verification for staging groups of the American joint committee on prostate cancer: Emphasis on the Gleason score
To be confirmed

1059
The importance of the size of nodal metastases in predicting recurrence of node positive prostate cancer patients treated with radical prostatectomy and extended pelvic lymph node dissection: Implications for post-operative treatment tailoring

By: Mazzone E.¹, Gandaglia G.¹, Fossati N.¹, Dell'Oglio P.¹, Suardi N.¹, Zaffuto E.¹, Freschi M.², Lucianiò R.², Larcher A.¹, Mirone V.³, Colombo R.¹, Gaboardi F.⁴, Montorsi F.¹, Briganti A.¹
¹Vita-Salute University San Raffaele, Dept. of Urology, Milan, Italy, ²Vita-Salute University San Raffaele, Dept. of Pathology, Milan, Italy, ³Federico II University, Dept. of Urology, Naples, Italy, ⁴San Raffaele Turro Hospital, Dept. of Urology, Milan, Italy

1060
Variation in pelvic lymph node dissection among prostate cancer patients in the Netherlands: Are we using a double standard for radical prostatectomy and radiotherapy patients?

By: Jansen H.¹, Somford D.², Van Oort I.³, Hulshof M.⁴, Pos F.⁵, Van Moorselaar R.⁶, Wijsman B.⁷, Hulsbergen-Van De Kaa C.⁸, Kiemensley L.⁹, Aben K.¹
¹Netherlands Comprehensive Cancer Organisation, Dept. of Research, Utrecht, Netherlands, The, ²Canisius-Wilhelmina Hospital, Dept. of Urology, Nijmegen, Netherlands, The, ³Radboud University Medical Center, Radboud Institute for Health Sciences, Dept. of Urology, Nijmegen, Netherlands, The, ⁴Academic Medical Center, Dept. of Radiotherapy, Amsterdam, Netherlands, The, ⁵The Netherlands Cancer Institute - Antoni van Leeuwenhoek Hospital, Dept. of Radiotherapy, Amsterdam, Netherlands, The, ⁶VU University Medical Center, Dept. of Urology, Amsterdam, Netherlands, The, ⁷Elisabeth-TweeSteden Hospital, Dept. of Urology, Tilburg, Netherlands, The, ⁸Radboud University Medical Center, Radboud Institute for Health Sciences, Dept. of Pathology, Nijmegen, Netherlands, The, ⁹Radboud University Medical Center, Radboud Institute for Health Sciences, Department for Health Evidence, Nijmegen, Netherlands, The
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<th>Session</th>
<th>Title</th>
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<td>1061</td>
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<td>1Tokyo Medical and Dental University Graduate School, Dept. of Urology, Tokyo, Japan, 2Ochanomizu Surugadai Clinic, Dept. of Radiology, Tokyo, Japan</td>
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<td>1063</td>
<td>The number of positive mpMRI-targeted cores is linearly associated with the risk of multi-focal clinically significant prostate cancer: Implications for correct patient staging and counselling</td>
<td>Stabile A., Dell'Oglio P., Zaffuto E., Gandaglia G., Capitano U., Fossati N., Maga T., Soligo M., Brembilla G., Brunetti L., Damiano R., Shariat S., Esposito A., De Cobelli F., Montorsi F., Karnes R.J., Briganti A.</td>
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<td>1Vita-Salute University San Raffaele, Dept. of Urology, Milan, Italy, 2Mayo Clinic, Dept. of Urology, Rochester, United States of America, 3Vita-Salute University San Raffaele, Dept. of Radiology, Milan, Italy, 4Magna Graecia University of Catanzaro, Dept. of Urology, Catanzaro, Italy, 5Medical University of Vienna, Dept. of Urology, Vienna, Austria</td>
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<td>1Sant’ Andrea Hospital, Sapienza University of Rome, Dept. of Urology, Rome, Italy, 2ICOT Hospital of Latina, Sapienza University, Dept. of Urology, Latina, Italy, 3St Antonius Hospital Gronau, Dept. of Urology, Pediatric Urology and Urological Oncology, Gronau, Germany, 4Istituto Nazionale Tumori Regina Elena, Dept. of Urology, Rome, Italy</td>
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<td>1065</td>
<td>Prostatic nerve subtype predicts post-prostatectomy recurrence</td>
<td>Reeves F., Battye S., Roth H., Peters J.S., Hovens C., Costello A.J., Corcoran N.M.</td>
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<td>1Royal Melbourne Hospital, Dept. of Urology, Melbourne, Australia, 2TissuPath, Dept. of Pathology, Mount Waverley, Australia, 3Peninsula Health, Dept. of Urology, Frankston, Australia</td>
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<td>1066</td>
<td>How does the length of extra-capsular prostatic extension is a predictor factor of biochemical recurrence in pT3a R0 N0 M0 stage?</td>
<td>Montesi L., Galosi A., Leone L., Milanese G., Dell’Atti L., Palagonia E., Montironi R.</td>
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<td>1University Hospital Ospedali Riuniti, Dept. of Urology, Ancona, Italy, 2University Hospital Ospedali Riuniti, Dept. of Pathological Anatomy, Ancona, Italy</td>
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1067 Increased prostate cancer glucose metabolism detected by FDG-PET/CT in localised Gleason 8-10 prostate cancers identifies very high-risk patients for early recurrence and resistance to castration

By: Lavallee E. 1, Bergeron M. 1, Buteau F-A. 2, Duchesnay N. 1, Blouin A-C. 1, Fradet Y. 1, Dujardin T. 1, Tiguet R. 1, Lacombe L. 1, Fradet V. 1, Makao-Nguile M. 1, Beauregard J-M. 2, Pouliot F. 1

1 Laval University, Dept. of Urology, Québec, Canada, 2 Laval University, Dept. of Nuclear Medicine, Québec, Canada

1068 The evolution of prostate cancer care in a tertiary referral hospital over the past decade

By: Goossens M. 1, Bijnens A. 1, Florin H-J. 1, Haustermans K. 2, De Meerleer G. 2, Albersen M. 1, Van Cleynenbreugel B. 1, Van Poppel H. 1, Joniau S. 1, Everaerts W. 1

1 University Hospitals Leuven, Dept. of Urology, Leuven, Belgium, 2 University Hospitals Leuven, Dept. of Radiotherapy, Leuven, Belgium

1069 Ethnicity and prostate cancer: Implications for improving outcomes

By: Pathmanathan B. 1, Batura D. 2, Mukerji G. 2, Mohamed O. 2, Hellawell G. 2

1 Imperial College Healthcare NHS Trust, Clinical Research Department, London, United Kingdom, 2 London North West Healthcare NHS Trust, Dept. of Urology, London, United Kingdom

1070 Contemporary national trends in localized prostate cancer risk profile at diagnosis

By: Fletcher S. 1, Cole A. 1, Von Landenberg N. 2, Berg S. 2, Gild P. 3, Noldus J. 2, Menon M. 4, Trinh Q-D. 1, Kibel A. 5

1 Brigham and Women's Hospital, Division of Urological Surgery and Center For Surgery and Public Health, Boston, United States of America, 2 Marien Hospital Herne, Ruhr-University Bochum, Dept. of Urology, Herne, Germany, 3 University Medical Center Hamburg-Eppendorf, Dept. of Urology, Hamburg, Germany, 4 Henry Ford Health System, Vatikuti Urology Institute, Detroit, United States of America, 5 Brigham And Women's Hospital, Harvard Medical School, Division of Urological Surgery, Boston, United States of America

1071 Inverse stage migration patterns in North American patients undergoing local prostate cancer treatment: A contemporary population-based update in light of the 2012 USPSTF recommendations

By: Leyh-Bannurah S-R. 1, Karakiewicz P.I. 1, Pompe R.S. 1, Preisser F. 1, Zaffuto E. 1, Dell’Oglio P. 1, Briganti A. 2, Nafez O. 3, Fisch M. 4, Steuber T. 4, Graefen M. 5, Budäus L. 5

1 University of Montreal, Cancer Prognostics and Health Outcomes Unit, Montreal, Canada, 2 Urological Research Institute, IRCCS San Raffaele Scientific Institute, Dept. of Urology and Division of Experimental Oncology, Milan, Italy, 3 Elbe Klinikum Stade, Dept. of Urology, Stade, Germany, 4 University Medical Center Hamburg-Eppendorf, Dept. of Urology, Hamburg, Germany, 5 University Hospitals Leuven, Dept. of Radiotherapy, Leuven, Belgium
Scientific Programme - EAU18 Copenhagen

Urology, Hamburg, Germany, Prostate Cancer Center Hamburg-Eppendorf, Martini-Klinik, Hamburg, Germany
Urothelial tumours: Molecular subtypes and clinical relevance
Poster Session 79

Monday 19 March
14:00 - 15:30

Location: Blue Area, Room 2 (Level 0)

Chairs: Y. Allory, Créteil (FR)
M. Sanchez-Carbayo, Vitoria-Gasteiz (ES)
A. Sato, Tokorozawa (JP)

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.

State-of-the-art lecture Molecular characterisation of urothelial tumours
M. Sanchez-Carbayo, Vitoria-Gasteiz (ES)

* 1072
Altered deposition of collagens promote tumor budding at the tumor invasion front in urothelial carcinoma of the bladder

By: Miyake M., Hori S., Morizawa Y., Nakai Y., Owari T., Itami Y., Tanaka N., Fujimoto K.
Nara Medical University, Dept. of Urology, Kashihara Nara, Japan

* 1073
Molecular subtype classification of urothelial carcinoma in Lynch syndrome

By: Eriksson P.1, Therkildsen C.2, Höglund M.3, Jönsson M.3, Sjödahl G.4, Nilbert M.1, Liedberg F.4
1Lund University, Dept. Of Oncology And Pathology, Lund, Sweden, 2University Hospital Copenhagen, The HNPPC register, Clinical Research Center, Hvidovre, Denmark, 3Institution of Clinical Sciences, Malmö, Dept. of Oncology and Pathology, Lund, Sweden, 4Lund University, Dept. of Urological Research, Malmö, Sweden

* 1074
Integrated molecular analysis of upper urinary tract urothelial carcinoma

By: Fujii Y.1, Sato Y.1, Suzuki H.2, Yoshizato T.2, Shiozawa Y.3, Yoshida K.2, Shiraishi Y.4, Nakagawa T.1, Nishimatsu H.5, Okaneya T.6, Makishima H.2, Sanada M.7, Miyano S.4, Ogawa S.2, Homma Y.1, Kume H.1
1The University of Tokyo Hospital, Dept. of Urology, Tokyo, Japan, 2Graduate School of Medicine Kyoto University, Dept. of Pathology, Kyoto, Japan, 3The University of Tokyo Hospital, Dept. of Pediatrics, Tokyo, Japan, 4Institute of Medical Science, Dept. of DNA, Tokyo, Japan, 5The Fraternity Memorial Hospital, Dept. of Urology, Tokyo, Japan, 6Toranomon Hospital, Dept. of Urology, Tokyo, Japan, 7Nagoya Medical Center, Dept. of Advanced Diagnosis, Nagoya, Japan

1075
Analysis of molecular mechanism of progression of non-muscle-invasive bladder cancer (NMIBC) by genome-wide exome and UTR mutation analysis
Evaluation of hTert-mutations in urinary cfDNA for bladder cancer detection

By: Salomo K.¹, Stasik S.², Fuessel S.¹, Thiede C.², Wirth M.¹
¹TU Dresden, Dept. of Urology, Dresden, Germany, ²TU Dresden, Dept. of Medicine I, Dresden, Germany

Prothymosin-α enhances PTEN expression transcriptionally and orchestrates with TRIM21 to regulate Keap1/Nrf2 signaling in human bladder cancer

By: Tsai Y-S.¹, Tsai H-T.², Tzai T-S.³, Wu C-L.⁴
¹National Cheng Kung University, Dept. of Urology, Tainan, Taiwan, ²National Cheng Kung University Hospital, Dept. of Urology, Tainan, Taiwan, ³An-Nan Hospital, Dept. of Urology, Tainan, Taiwan, ⁴National Cheng Kung University, Dept. of Biochemistry, Tainan, Taiwan

An extensive panel of patient-derived bladder cancer xenografts representing the various molecular subtypes of muscle-invasive bladder cancers (MIBC)

By: Lang H.¹, Beraud C.², Lassalle M.², Lluel P.², Lindner V.³, Allory Y.⁴, Sirab N.⁴, Bernard-Pierrot I.⁵, Radvanyi F.⁵, Massfelder T.⁶
¹Nouvel Hôpital Civil, Dept. of Urology, Strasbourg, France, ²Urolead, Dept. of Urology, Toulouse, France, ³Hôpital de Hautepierre, Dept. of Pathology, Strasbourg, France, ⁴Mondor Biomedical Research Institute, Dept. of Pathology, Créteil, France, ⁵UMR 144 Institut Curie, Dept. of Oncology, Paris, France, ⁶Institut Curie, Dept. of Urology, Strasbourg, France

Using plasma cell-free DNA mutations to monitor patients for micro-metastatic bladder cancer after radical cystectomy

By: Khetrapal P.¹, Dong L.², Wong Y.N.S.², Tan W.S.², Rodney S.¹, Lamb B.³, Briggs T.³, Thompson J.³, Sridhar A.³, Kelly J.¹, Feber A.²
¹University College London, Division of Surgery & Interventional Science, London, United Kingdom, ²University College London, Cancer Institute, London, United Kingdom, ³University College London Hospital, Dept. of Urology, London, United Kingdom

Long non-coding RNAs as markers for prognosis and drug target gene expression in muscle-invasive bladder cancer

By: Worst T.¹, Rinaldetti S.², Rempel E.³, Eckstein M.⁴, Steidler A.¹, Weis C.⁵, Bolenz C.⁶, Hartmann A.⁴, Erben P.¹
¹Mannheim Medical Center, Dept. of Urology, Mannheim, Germany, ²Mannheim Medical Center, Dept. of Hematology and Oncology, Mannheim, Germany, ³German Cancer
Fluid intake and clinicopathological characteristics of bladder cancer: The West Midlands Bladder Cancer Prognosis Programme (BCPP)

By: Van Hensbergen M. ¹, Van Osch F.H.M. ², Jochems S. ², James N. ³, Wallace M. ³, Wesselius A. ¹, Cheng K. ⁴, Bryan R. ⁵, Zeegers M. ⁶

¹Maastricht University, Dept. of Complex Genetics and Epidemiology, Maastricht, Netherlands, The, ²Maastricht University, Dept. of Complex Genetics and Epidemiology/Institute of Cancer and Genomic Sciences, Maastricht, Netherlands, The, ³University of Birmingham, Dept. of Urology, Birmingham, United Kingdom, ⁴University of Birmingham, Dept. of Public Health and Epidemiology, Birmingham, United Kingdom, ⁵University of Birmingham, Institute of Cancer and Genomic Sciences, Birmingham, United Kingdom, ⁶Maastricht University, Dept. of Complex Genetics, Public Health and Primary Care (School CAPHRI)/ Dept. of Complex Genetics, NUTRIM School for Nutrition and Translational Research in Metabolism, Maastricht, Netherlands, The

Summary
M. Sanchez-Carbayo, Vitoria-Gasteiz (ES)
New conservative treatment options in functional urology
Poster Session 80

Monday 19 March
14:00 - 15:30

Location: Blue Area, Room 3 (Level 0)
Chairs: T.J. Greenwell, London (GB)
H. Kakizaki, Asahikawa (JP)
G. Van Koeveringe, Maastricht (NL)

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

1082 Vibegron, a novel potent and selective β3-adrenoreceptor agonist, for the treatment of patients with overactive bladder: A randomized, double-blind, placebo-controlled phase 3 study
By: Yoshida M. 1, Takeda M. 2, Goto M. 3, Nagai S. 4, Kurose T. 4
1National Center For Geriatrics and Gerontology, Dept. of Urology, Obu, Aichi, Japan,
2University of Yamanashi, Graduate School of Medical Sciences., Dept. of Urology, Chuo, Yamanashi, Japan,
3Nagoya University Graduate School of Medicine, Dept. of Urology, Nagoya, Japan,
4Kyorin Pharmaceutical Co.,Ltd., Clinical Development Center, Tokyo, Japan

1083 Natural treated history of urinary urgency: A 21-year follow-up of Tampere Aging Male Urologic Study (TAMUS)
By: Åkerla J. 1, Pesonen J. 2, Häkkinen J. 3, Koskimäki J. 4, Tammela T. 4, Auvinen A. 5
1Central Finland Central Hospital, Dept. of Surgery, Jyväskylä, Finland,
2Päijät-Häme Central Hospital, Dept. of Surgery, Lahti, Finland,
3Turku University Hospital, Dept. of Urology, Turku, Finland,
4Tampere University Hospital, Dept. of Urology, Tampere, Finland,
5University of Tampere, Faculty of Social Sciences, Tampere, Finland

1084 Long term compliance with repeated botulinum toxin A injections in patients with neurogenic detrusor overactivity after spinal cord injury
By: Hebert K. 1, Klarskov N. 2, Bagi P. 1, Biering-Sørensen F. 3, Elmelund M. 3
1Rigshospitalet, University of Copenhagen, Dept. of Urology, Copenhagen, Denmark,
2Herlev and Gentofte Hospital, University of Copenhagen, Dept. of Obstetrics , Herlev, Denmark,
3Rigshospitalet, University of Copenhagen, Clinic for Spinal Cord Injuries, Copenhagen, Denmark

1085 Mirabegron integrated database: Do safety and tolerability differ by sex?
By: Staskin D.R. 1, Herschorn S. 2, Wagg A. 3, Heesakkers J. 4, Cardozo L. 5, Milsom I. 6, Chapple C. 7, Cruz F. 8, Stoelzel M. 9, Schermer C. 10, Siddiqui E. 11
**1086**

**Trends in the use of older overactive bladder agents and uptake of fesoterodine and mirabegron in Canada**

By: Elterman D. 1, Shepherd S. 2, Minhas R. 3, Tadrous M. 4, Gomes T. 4

1University Health Network - Toronto Western Hospital, Dept. of Urology, Toronto, Canada, 2McMaster University, Dept. of Health Research Methods, Evidence and Impact, Hamilton, Canada, 3University of British Columbia, Faculty of Pharmaceutical Sciences, Vancouver, Canada, 4University of Toronto, The Leslie Dan Faculty of Pharmacy, Toronto, Canada

**1087**

**Comparative of efficiency and safety of medicinal product Imidafenacin and tolerodine for treatment of overactive bladder**

By: Sharvadze G., Mukhametshina E., Samsonov M.

R-Pharm Group, Medical Department, Moscow, Russia

**1088**

**Anticholinergic burden with antimuscarinics in elderly Japanese patients receiving overactive bladder medication: A nationwide real-world analysis**


1National Center for Geriatrics and Gerontology, Dept. of Urology, Obu, Japan, 2Astellas Pharma Inc., Medical Affairs, Tokyo, Japan, 3Astellas Pharma Inc., Real World Informatics and Analytics, Tokyo, Japan, 4Astellas Pharma US Inc., Real World Informatics and Analytics, Northbrook, Illinois, United States of America, 5Astellas Pharma Inc., Development, Tokyo, Japan

**1089**

**Urinary function improves in hypogonadal men with moderate International Prostate Symptom Score (IPSS) treated for up to 10 years with testosterone in comparison to untreated controls**

By: Haider K.S. 1, Haider A. 1, Doros G. 2, Traish A. 3

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 Biochemistry and Urology, Boston, United States of America

**1090**

**Effect of imipramine on urethral opening pressure - a randomized, double-blind, placebo-controlled crossover study in healthy women**
1091
The management of nocturia and nocturnal polyuria in the daily practice: Results of a Dutch survey

By: Rahnama'i M.S., Vrijens D., Marcelissen T.
Maastricht University Medical Centre, Dept. of Urology, Maastricht, Netherlands, The

1092
Comparative efficacy and safety of fixed dose combination of solifenacin+tamsulosin between treatment-naive patients and patients crossing over from prior alpha-blocker and/or antimuscarinic therapy

By: Georgopoulos P., Apostolidis I., Papaefstathiou E., Kalaitzi M., Ioannidis I-E., Apostolidis A.
Aristotle University of Thessaloniki, Dept. of Urology, Thessaloniki, Greece

1093
Real life data on mirabegron in neurogenic bladder dysfunction

By: Soebadi M.A., Hakim L., Van Der Aa F., De Ridder D.
1Dr Soetomo Hospital Universitas Airlangga, Dept. of Urology, Surabaya, Indonesia,
2University Hospitals KU Leuven, Dept. of Urology, Leuven, Belgium

1094
Clinical outcomes of second-line treatments cycling in refractory wet overactive bladder patients before switching to a third-line therapy: A real world observational study

By: Giannantoni A., Gubbiotti M., Rossi De Vermandois J.A., Quadrini F., Cagini R., Mearini E.
University of Perugia, Dept. of Surgical and Biomedical Sciences, Perugia, Italy

1095
The health-care seeking prevalence of lower urinary tract symptoms in an adult cohort - a nationwide, population-based observational study, 2005-2012

1Cardinal Tien Hospital, Division of Urology, Dept. of Surgery, New Taipei City, Taiwan,
2National Yang-Ming University, Institute of Health and Welfare Policy, Taipei, Taiwan,
3National Taiwan University Hospital, Dept. of Urology, Taipei, Taiwan

1096
Quality of life in older patients with overactive bladder treated with mirabegron in routine clinical practice: Secondary analysis of a pan-European non-interventional study (BELIEVE)

By: Foley S., Choudhury N., Huang M., Stari A., Nazir J., Freeman R.
1Royal Berkshire Hospital, Dept. of Urology, Reading, United Kingdom,
2Astellas Pharma Europe Ltd, Medical Affairs, EMEA, Chertsey, United Kingdom,
Scientific Programme - EAU18 Copenhagen

Ltn, Medical Affairs, EMEA, Health Economics, Chertsey, United Kingdom, 4Derriford Hospital, Urogynaecology Unit, Plymouth, United Kingdom

Summary
T.J. Greenwell, London (GB)
Enhanced recovery after urological surgery

Poster Session 81

Monday 19 March
14:00 - 15:30

Location: Blue Area, Room 4 (Level 0)

Chairs: S. Egawa, Tokyo (JP)
O. Hakenberg, Rostock (DE)

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

1097
One year follow up of the efficacy of physical prehabilitation in radical cystectomy pathways - secondary results from a randomized controlled trial

By: Jensen B.T. ¹, Borre M. ¹, Borre M. ², Soendergaard I. ¹, Jensen J.B. ¹
¹Aarhus University Hospital, Dept. of Urology, Aarhus, Denmark, ²Aarhus University Hospital, Dept. of Hepatology, Aarhus, Denmark

1098
Impact of implementation of the EAU guidelines panel recommendations on reporting and grading of complications on perioperative outcomes after robot-assisted radical prostatectomy

By: Gandaglia G. ¹, Fossati N. ¹, Suardi N. ¹, Bravi C. ¹, Scuderi S. ¹, Grillo L. ¹, Dell'Oglio P. ¹, Mazzone E. ¹, Robesti D. ¹, Barletta F. ¹, Moschini M. ¹, Capitanio U. ¹, Mirone V. ², Montorsi F. ¹, Briganti A. ¹
¹Vita-Salute University San Raffaele, Dept. of Urology, Milan, Italy, ²Federico II University, Dept. of Urology, Naples, Italy

1099
Results of enhanced recovery after surgery (ERAS) components implementation to radical cystectomy

By: Ryndzin A. ¹, Minich A. ¹, Zaitseva L. ², Zelenkevich I. ¹, Krasny S. ¹
¹N.N. Alexandrov National Cancer Centre, Dept. of Urology, Liasny, Belarus, ²N.N. Alexandrov National Cancer Centre, Dept. of Statistics, Liasny, Belarus

1100
Enhanced recovery after surgery (ERAS): A prospective evaluation of complications and length of stay after robot-assisted partial nephrectomy

By: Fakhfakh S., Pignot G., Traumann M., Brun C., Nguyen Duong L., Cini E., Rybikowski S., Tourret M., Blache J., Faucher M., Mokart D., Walz J.
Institut Paoli Calmettes, Dept. of Oncology, Marseille, France

1101
Implementation of an enhanced recovery program after robotic partial nephrectomy for cancer

By: Dominique I. ¹, Terrier J.E. ¹, Morel Journel N. ¹, Friggeri A. ², Champetier D. ¹, Ruffion A. ¹, Paparel P. ¹
1102 Applying enhanced recovery after surgery (ERAS) protocols to radical cystectomy (RC) patients undergoing ileal urinary diversions - results of a single center prospective randomized controlled trial

By: Olaru V. 1, Baston C. 2, Gingu C. 2, Preda A. 3, Manea I. 2, Chirita M. 2, Vrabie R. 2, Teodorescu D. 2, Domnisor L. 2, Sorohan B. 4, Sinescu I. 2

1 Fundeni Clinical Institute, Center of Uro nephrology and Renal Transplant, Bucharest, Romania, 2Fundeni Clinical Institute, Center of Uro nephrology and Renal Transplant, Bucharest, Romania, 3Fundeni Clinical Institute, Center of Uro nephrology and Renal Transplant, Bucharest, Romania, 4Fundeni Clinical Institute, Dept. of Nephrology, Bucharest, Romania

1103 Proposal of intraoperative adverse incident classification (EAUiaiC) and patient surgical class category by the European Association of Urology guidelines ad hoc panel

By: Biyani C. 1, Rouprêt M. 2, Bjerggaard Jensen J. 3, Mitropoulos D. 4

1St James’s University Hospital, Dept. of Urology, Leeds, United Kingdom, 2Hospital Pitié-Salpétrière, Dept. of Urology, Paris, France, 3Aarhus University Hospital, Dept. of Urology, Skejby, Denmark, 4University of Athens Medical School, Dept. of Urology, Athens, Greece

1104 An international survey on the use of thromboprophylaxis in urological surgery

By: Violette P. 1, Vernooij R. 2, Aoki Y. 3, Agarwal A. 4, Cartwright R. 5, Arai Y. 6, Tailly T. 7, Novara G. 8, Craigie S. 9, Breau R. 10, Sandset P.M. 11, Guyatt G. 9, Tikkinen K. 12

1Woodstock General Hospital, Dept. of Surgery, Woodstock, Canada, 2Netherlands Comprehensive Cancer Organisation, Dept. of Research, Utrecht, Netherlands, The, 3University of Fukui, Dept. of Urology, Fukui, Japan, 4University of Toronto, Faculty of Medicine, Toronto, Canada, 5Oxford University Hospital, Dept. of Urogaenecology, Oxford, United Kingdom, 6Tohoku University, Dept. of Urology, Sendai, Japan, 7University Hospital Ghent, Dept. of Urology, Ghent, Belgium, 8University of Padua, Dept. of Surgery, Oncology, and Gastroenterology, Padua, Italy, 9McMaster University, Dept. of Health Research Methods, Evidence, and Impact, Hamilton, Canada, 10Ottawa Hospital Research Institute, Dept. of Surgery, Ottawa, Canada, 11Oslo University Hospital, Dept. of Haematology, Oslo, Norway, 12Helsinki University Hospital, and University of Helsinki, Dept. of Urology, Helsinki, Finland

1105 Is the ICIQ-SF questionnaire reliable in predicting QoL outcomes: Results of a prospective single-center study

By: Tutolo M. 1, Bianchi M. 1, Salonia A. 1, Briganti A. 1, Castagna G. 1, Bekhuis Y. 2, Joniau S. 2, Van Cleynenbreugel B. 2, Everaerts W. 2, Van Der Aa F. 2

1Vita-Salute University San Raffaele, Dept. of Urology, Milan, Italy, 2University Hospitals Leuven, Dept. of Urology, Leuven, Belgium
<table>
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<th>ID</th>
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<th>Authors</th>
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| 1106| The effectiveness of intraoperative hyoscine butylbromide (Buscopan®) in reducing postoperative catheter-related bladder discomfort in urological patients: A prospective, randomized, placebo-controlled, double-blinded study | By: Al-Shawi M. ¹, Timm B. ², Davis N. ¹, Brough S. ³  
¹The Austin Hospital, Dept. of Urology, Melbourne, Australia, ²Launceston General Hospital, Dept. of Urology, Launceston, Australia, ³Launceston General Hospital, Dept. of Urology, Launceston, Australia |
| 1107| Effect of methocarbamol on postoperative pain following inguinal hernia surgery | By: Mogharabian N. ¹, Asadpour A. ², Sohrabi M.B. ¹, Karimi M. ¹  
¹Shahroud University of Medical Sciences, School of Medicine, Shahroud, Iran, ²Mashhad University of Medical Sciences, School of Medicine, Mashhad, Iran |
Cancer Institute Hospital, Japanese Foundation for Cancer Research, Dept. of Urology, Tokyo, Japan |
| 1109| To do or not to do? Covering colostomy and/or gracilis flap in transperineal fistula repair | By: Bugeja S., Ivaz S., Frost A., Dragova M., Andrich D., Mundy A.  
University College London Hospitals, NHS Foundation Trust, Reconstructive Urology Unit, London, United Kingdom |
First Affiliated Hospital of Gannan Medical University, Dept. of Urology, Ganzhou, China |
### Male sexual dysfunction: Focus on comorbidity and diagnostic innovation

**Poster Session 82**

**Location:** Blue Area, Room 5 (Level 0)

**Chairs:**
- A. Parnham, Manchester (GB)
- J. Romero Otero, Madrid (ES)
- A. Salonia, Milan (IT)

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

<table>
<thead>
<tr>
<th>Session</th>
<th>Title</th>
<th>Authors</th>
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<tbody>
<tr>
<td>1111</td>
<td>A new proof for relationship between erectile dysfunction and atherosclerosis: Fragmented QRS?</td>
<td>Karabakan M.¹, Bozkurt A.², Saylam B.³, Kucuksu Z.⁴, Hirik E.² ¹Mersin Toros State Hospital, Dept. of Urology, Mersin, Turkey, ²Erzincan University Menguecek Gazi Research and Training Hospital, Dept. of Urology, Erzincan, Turkey, ³Mersin City Hospital, Dept. of Urology, Mersin, Turkey, ⁴Erzincan University Menguecek Gazi Research and Training Hospital, Dept. of Cardiology, Erzincan, Turkey</td>
</tr>
<tr>
<td>1112</td>
<td>Metabolic syndrome is an independent risk factor for acquired premature ejaculation</td>
<td>Jeh S.¹, Yoon S.¹, Do J.¹, Seo D.H.², Lee S.W.¹, Choi S.M.¹, Lee C.², Kam S.C.², Hwa J.S.¹, Chung K.H.², Hyun J.S.¹ ¹Gyeongsang National University Hospital, Dept. of Urology, Jinju, Korea, South, ²Gyeongsang National University Changwon Hospital, Dept. of Urology, Changwon, Korea, South</td>
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<tr>
<td>1113</td>
<td>Withdrawn</td>
<td>To be confirmed</td>
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<tr>
<td>1114</td>
<td>Erectile dysfunction in allogeneic hematopoietic stem cell transplant patients</td>
<td>Zampieri N.¹, Andreini A.², Costantini C.², Bruno C.³, Malerba G.⁴, Tecchio C.⁵, Camoglio F.S.⁶ ¹Woman and Child Hospital, University of Verona, Dept. of Fertility Preservation, Verona, Italy, ²Hematology and Bone Marrow Transplant Unit, Dept. of Medicine, Verona, Italy, ³University of Verona, Dept. of Radiology, Verona, Italy, ⁴University of Verona, Dept. of Neuroscience, Biomedicine and Movement Science, Section of Biology, Verona, Italy, ⁵Hematology and Bone-Marrow Transplant Unit, Dept. of Medicine, Verona, Italy, ⁶Woman and Child Hospital, University of Verona, Dept. of Fertility Preservation, Pediatric surgical Unit, Verona, Italy</td>
</tr>
</tbody>
</table>
Prevalence of sexual dysfunction and its association with lower urinary tract symptoms in men and women over 18 years old: Results from the Colombian Overactive Bladder and Lower urinary Tract symptoms (COBaLT) study

By: Bravo-Balado A. 1, Trujillo C.G. 1, Cataño J.G. 1, Caicedo J.I. 1, Rondón M. 2, Plata M. 1
1Hospital Universitario Fundación Santa Fe de Bogotá and Universidad de los Andes School of Medicine, Dept. of Urology, Bogotá, Colombia, 2Pontificia Universidad Javeriana School of Medicine, Clinical Epidemiology and Biostatistics, Bogotá, Colombia

Correlation between penile Doppler ultrasound findings and penile arterial insufficiency under percutaneous transluminal angioplasty for patients with erectile dysfunction

National Taiwan University Hospital, Dept. of Urology, Taipei, Taiwan

Radioanatomical study of penile drainage veins using three dimensional computed tomography images of 139 patients

By: Kawanishi Y., 1 Izumi K. 1, Muguruma H. 1, Yamanaka M. 1, Kawanishi S. 2, Fukawa T. 3, Kanayama H. 4
1Takamatsu Red Cross Hospital, Dept. of Urology, Takamatsu, Japan, 2Goshikidai Clinic, Dept. of Psychiatry, Takamatsu, Japan, 3Tokushima university, Dept. of urology, Tokushima, Japan, 4Tokushima University, Dept. of Urology, Tokushima, Japan

A new penile tumescence and hardness monitoring device, its design concept and prototyping

By: Matsumoto S. 1, Takeuchi Y. 2
1Asahikawa Medical University Hospital, Clinical Research Support Center, Asahikawa, Japan, 2Asahikawa Medical University, Research Center for Brain Function and Medical Engineering, Asahikawa, Japan

Nocturnal penile erections evaluation using a new generation of RigiScan: Small sometimes is better

By: Cocci A. 1, Rizzo M. 2, Cito G. 1, Cacciamani G. 3, Russo G.I. 4, Capece M. 5, Falcone M. 6, Timpano M. 6, Tanganelli G. 7
1University of Florence, Dept. of Urology, Florence, Italy, 2University of Trieste, Dept. of Urology, Trieste, Italy, 3University of Verona, Dept. of Urology, Verona, Italy, 4University of Catania, Dept. of Urology, Catania, Italy, 5University of Naples, Dept. of Urology, Naples, Italy, 6University of Turin, Dept. of Urology, Turin, Italy, 7University of Pisa, Dept. Information Engineering, Pisa, Italy

Could audiovisual sexual stimulation (AVS) using RigiScan replace duplex ultrasound examination in specific patients suspicious of erectile dysfunction (ED)?

By: Fang D., Peng J., Zhang Z., Zheng W., Tang Y., Cui W., Yuan Y., Song W., Gao
<table>
<thead>
<tr>
<th>Session</th>
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<tr>
<td>1121</td>
<td><strong>Withdrawn</strong>&lt;br&gt;To be confirmed</td>
<td>B. Xin Z.&lt;br&gt;Peking University First Hospital, Andrology Center, Dept. of Urology, Beijing, China</td>
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<td>1122</td>
<td><strong>Endocan: A novel potential indicator for severity of erectile dysfunction?</strong>&lt;br&gt;Management of penile fracture repair with an early intraoperative curvature correction of the cavernous body deviation</td>
<td>Arslan B., Ozdemir E., Hazar A.I., Özkani A., Kalkanlı A., Cilesiz N.C., Cetin B., Balci M.B.C.&lt;br&gt;Taksim Gaziosmanpasa Training and Research Hospital, Dept. of Urology, Istanbul, Turkey</td>
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<tr>
<td>1123</td>
<td><strong>Management of penile fracture repair with an early intraoperative curvature correction of the cavernous body deviation</strong>&lt;br&gt;State-of-the-art lecture Are we changing diagnosis of male sexual dysfunction?</td>
<td>Dell'Atti L., Leone L., Scarcella S., Fulvi P., Maselli G., Galosi A.B.&lt;br&gt;Polythecnic University of Marche Region University Hospital, Dept. of Urology, Ancona, Italy</td>
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</table>

State-of-the-art lecture: Are we changing diagnosis of male sexual dysfunction?
A. Parnham, Manchester (GB)
**Laparoscopic and robot-assisted laparoscopic radical cystectomy**

**ESU Course 50**

**Location:** Orange Area, Room 1 (Level 0)

**Chair:** N.P. Wiklund, Stockholm (SE)

**Aims and objectives of this session**
The course is video based. The steps in the surgical treatment of muscle invasive bladder cancer by conventional laparoscopy and robot-assisted technique will be described. The surgical technique to perform Male and female cystectomy, lymph node dissection, urinary diversion with extracorporeal and intracorporeal technique, conduits as well as orthotopic neobladders, will be shown. Indications, contraindications, outcomes and handling of complications will be discussed.

- The surgical steps in nerve sparing and non-nerve sparing male cystectomy.
- The surgical steps in female cystectomy with and without organ sparing technique.
- The surgical steps in lymph node dissection during cystectomy.
- The technique in urinary diversion, conduit and neobladder, with intra and extracorporeal technique.
- Indications, outcomes and complications after minimally invasive cystectomy.
- The handling of the most common complications after minimally invasive cystectomy.

**Laparoscopic cystectomy in males (video-based teaching)**

**Conventional laparoscopy**
R.F. Van Velthoven, Brussels (BE)

**Robot-assisted technique with nerve sparing technique**
N.P. Wiklund, Stockholm (SE)

**Laparoscopic cystectomy in Females (video based teaching)**

**Conventional cystectomy**
J. Rassweiler, Heilbronn (DE)

**Robot-assisted cystectomy with organ preservation**
N.P. Wiklund, Stockholm (SE)

**Laparoscopic lymph node dissection (video-based teaching)**
J. Rassweiler, Heilbronn (DE)

**Laparoscopic urinary diversion (video-based teaching)**

**Intracorporeal urinary diversion**
R.F. Van Velthoven, Brussels (BE)

**Intracorporeal urinary diversion**
N.P. Wiklund, Stockholm (SE)
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<th>Topic</th>
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<tr>
<td>Extracorporeal urinary diversion</td>
<td>J. Rassweiler, Heilbronn (DE)</td>
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<tr>
<td>Challenge the expert: Controversies in laparoscopic and robotic cystectomy</td>
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<td>Oncological outcomes in laparoscopic cystectomy - Challenger</td>
<td>R.F. Van Velthoven, Brussels (BE)</td>
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<td>Oncological outcomes in laparoscopic cystectomy - Pro</td>
<td>N.P. Wiklund, Stockholm (SE)</td>
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<tr>
<td>Complications and functional outcomes in laparoscopic cystectomy - Challenger</td>
<td>J. Rassweiler, Heilbronn (DE)</td>
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<tr>
<td>Complications and functional outcomes in laparoscopic cystectomy - Pro</td>
<td>N.P. Wiklund, Stockholm (SE)</td>
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**Aims and objectives of this session**
Having attended the course, the attendee should:
- Understand the basic physical principles referable to urodynamics.
- Be able to assess the quality of a urodynamic trace.
- Recognise common artefacts and know how to correct them.
- Know the indications for urodynamic studies in men, women and neurological patients.

**Urodynamics: Philosophy, scientific basis and technique**
P. Abrams, Bristol (GB)

**Urodynamics in neurourology**
J.L.H.R. Bosch, Utrecht (NL)

**Urodynamics in female urology**
P. Abrams, Bristol (GB)

**Urodynamics in men**
J.L.H.R. Bosch, Utrecht (NL)
Aims and objectives of this session
This course will cover all principal indications for robotic surgery of the upper urinary tract. The standard techniques will be explained on a video-based fashion and will be followed by discussing advanced cases as well as troubleshooting and complication management. On top of that, technical innovations and new applications will be discussed as well. Don't miss this course, a must for all robotic surgeons!:
• Videobased step-by-step approach.
• Standard techniques.
• Complex cases.
• Troubleshooting and complication management.
• Technical innovations: What's new in robotics?

Introduction
A. Mottrie, Aalst (BE)

Patient positioning, trocar positioning, trans- and retroperitoneal access in renal robotic surgery
B.J. Challacombe, London (GB)

Robotic pyeloplasty: Multichannel or single technique
N. Buffi, Milan (IT)

Renal surgery: Nephrectomy and nephroureterectomy: How I do it
B.J. Challacombe, London (GB)

Partial nephrectomy I: Step 1: Isolation of renal hilum; Step 2: Mobilisation of the kidney; Step 3: Clamping of renal pedicle: Different techniques
N. Buffi, Milan (IT)

Partial nephrectomy II: Step 4: Different tumour resection techniques
A. Mottrie, Aalst (BE)

Partial nephrectomy III: Step 5: Different renorrhaphy techniques
B.J. Challacombe, London (GB)

Partial nephrectomy IV: Special & difficult indications
A. Mottrie, Aalst (BE)

Partial nephrectomy V: Complication management and new tools
A. Mottrie, Aalst (BE)
Wrap up and conclusions
B.J. Challacombe, London (GB)
Aims and objectives of this session
The three lectures of ESU course 54 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.

Treatment of kastration-sensitive metastatic prostate cancer
K. Miller, Berlin (DE)

What is the role of chemotherapy and immunotherapy in patients with CRPC?
G. Mickisch, Bremen (DE)

Treatment of mCRPC – Sequence or combination?
K. Pummer, Graz (AT)
Prostate cancer update: How to optimise the everyday management of your patients
ESU Course 49

**Location:** Orange Area, Room 7 (Level 0)

**Chair:** F. Montorsi, Milan (IT)

**Aims and objectives of this session**
The course is aimed at critically reviewing key papers published during the previous 12 months and devoted to the management of prostate cancer patients with a particular focus on diagnosis, staging, local treatments and systemic therapies. Practice-changing manuscripts published in peer-reviewed journals will be identified and discussed for each topic. For every paper a clear take home message applicable to the every-day clinical practice will be identified and discussed.

At the end of the course participants will be informed on the latest and most significant novelties related to the contemporary management of prostate cancer patients.

**Screening and early detection: The role of PSA and novel biomarkers**
F. Montorsi, Milan (IT)

**Diagnostic evaluation: The role of multiparametric magnetic resonance imaging and target biopsies**
M. Graefen, Hamburg (DE)

**Staging and predictive models**
C.P. Evans, Sacramento (US)

**Treatment of clinically localized prostate cancer: Short- and long-term outcomes of radiotherapy, brachytherapy and focal therapy**
M. Graefen, Hamburg (DE)

**Treatment of clinically localized prostate cancer: Short- and long-term outcomes of radical prostatectomy**
F. Montorsi, Milan (IT)

**Management of biochemical and clinical recurrence after treatment with curative intent**
M. Graefen, Hamburg (DE)

**Systemic therapies in hormone-sensitive and castration-resistant prostate cancer**
C.P. Evans, Sacramento (US)
Aims and objectives of this session

The Endoscopic Stone Treatment (EST) training curriculum has the goal to provide the clinician with proficiency skills in the treatment of urinary stones with endoscopic techniques. This protocol has been designed following a very strict process, in order to mitigate the risks of complications related to the learning curve process. Moving along the different tasks 336 Programme Book EAU Education and training steps, the participant will learn how to use the different instruments and technologies that can be functional to stone fragmentation and extraction.

The EST s1 (Endoscopic Stone Treatment step 1) is the first step of this training and assessment curriculum. To aid in the training of these skills and to prepare for this ESTs1 exam, the exercises to be performed can be found in the instructional videos at uroweb.org.
### ESU Hands-on Training Course in Non-technical skills in surgery

**Sponsored by ROCHE**

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<th>Location:</th>
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| Chairs: | M.S. Khan, London (GB)  
K. Ahmed, London (GB) |
| Tutors: | To be confirmed  
To be confirmed  
To be confirmed  
To be confirmed  
To be confirmed  
To be confirmed |

**Aims and objectives of this session**

The operating room is a complex and highly stressful environment that requires interaction between a large team to achieve successful outcomes for the patients. This requires not only effective procedure-specific technical skills, but also additionally a range of non-technical skills. Non-technical skills are defined as skills unrelated to the technical completion of surgical procedures. They include decision-making, team-working, communication and leadership skills.

The importance of non-technical skills is often overlooked but they are unfortunately a major cause of surgical error. Like technical skills, which are acquired over many years of practice and training, non-technical skills are not innate traits and must also be developed through training and experience.

This course will serve to introduce practicing urologists to the concept of non-technical skills using an interactive full immersion simulation environment, developed at Imperial College London, whilst undertaking common scenarios in endoscopic urological surgery. Participants will be evaluated by experts in surgical education and provided individual feedback with view for further self-improvement.

**Supporting faculty:**

- N. Raison, London (GB)  
- A. Aydin, London (GB)  
- N. Khan, London (GB)  
- C. Lovegrove, Perth (GB)
All presentations have a maximum length of 8 minutes, followed by 4 minutes of discussion.

V77

**Gender confirmation vaginoplasty: The Chicago technique**

By: Kocjancic E. ¹, Vigneswaran H. ¹, Sofer L. ¹, Jaunarena J. ¹, Whitehead D. ², Morgantini L.A. ¹, Schechter L. ²

¹University of Illinois at Chicago, Dept. of Urology, Chicago, United States of America,
²Weiss Memorial Hospital, Dept. of Plastic Surgery, Chicago, United States of America

V78

**A multi-center analysis on surgical technique, outcomes and learning curve of male-to-female penoscrotal vaginoplasty**

By: Cocci A. ¹, Polloni G. ², Delle Rose A. ¹, Grisanti Caroassai S. ¹, Cito G. ¹, Semi S. ¹, Carini M. ¹, Matteucci V. ³, Morelli G. ⁴

¹University of Florence, Dept. of urology, Florence, Italy,
²Psycho-Sexology, Dept. of Psycho-Sexology, Milan, Italy,
³Cisanello Hospital, Dept. of Surgery, Pisa, Italy,
⁴Cisanello Hospital, Dept. of urology, Pisa, Italy

V79

**Bladder exstrophy radial artery phalloplasty: Exstrophy related issues and saphenous vein interposition graft**

By: Chiriacò G., Blecher G., Johnson M., Sangster P., Christopher N., Ralph D.

University College London Hospitals (UCLH), Dept. of Andrology, London, United Kingdom

V80

**Surgical technique for complex cases of Peyronie’s disease: Penile prosthesis implantation, modified neurovascular bundle release and single or multiple corporeal incisions and grafting with collagen fleece**

By: Fernández-Pascual E. ¹, González-García J. ², Souto A.D. ¹, García E. ¹, Marcos D. ¹, Turo J. ¹, Carballido J. ¹, Martínez Salamanca J.I. ¹

¹Puerta de Hierro Majadahonda University Hospital, Dept. of Urology, Madrid, Spain,
²Hospital Central de la Cruz Roja San José y Santa Adela, Dept. of Urology, Madrid, Spain
V81  Microsurgical vs robot-assisted vasovasostomy: Technical aspects and results

By: Umari P.¹, De Naeyer G.², Schatteman P.², De Groote R.², Fossati N.³, Gandaglia G.³, Heinze A.², Rizzo M.⁴, Pavan N.⁴, Liguori G.⁵, Bucci S.⁴, Mottrie A.², Trombetta C.⁴

¹Ospedale Maggiore della Carità, Dept. of Urology, Novara, Italy, ²OLV Hospital Aalst, Dept. of Urology, Aalst, Belgium, ³Ospedale San Raffaele, Dept. of Urology, Milan, Italy, ⁴Cattinara Hospital, Dept. of Urology, Trieste, Italy, ⁵Cattinara Hospital, Dept. of Urology, Trieste, Italy

V82  New transscrotal approach for robotic microsurgical denervation of the spermatic cord with robotic microsurgical varicocelectomy

By: Gudeloglu A.¹, Etafy M.², Brahmbhatt J.², Parekattil S.³

¹Hacettepe University Medical Faculty, Dept. of Urology, Ankara, Turkey, ²PUR Clinic, Dept. of Urology, Clermont, United States of America, ³PUR Clinic, Dept. of Urology, Clermont, United States of America

V83  Penile sclerosing granuloma - surgical excision

By: Blecher G.¹, Asher N.², Garaffa G.¹, Ralph D.J.¹

¹University College of London Hospital, Dept. of Andrology, London, United Kingdom, ²University College of London Hospital, Dept. of Pathology, London, United Kingdom

V84  Surgical management of severe post-operative skin necrosis after penile lengthening corporoplasty

By: Colombo F., Gentile G., Franceschelli A., Vagnoni V., Angiolini A., Sadini P., Andrology Unit - S. Orsola University Hospital, Dept. of Urology and Gynecology, Bologna, Italy
New insights in LUTS/BPH pathophysiology and therapeutic targets

**Poster Session 83**

**Monday 19 March**

15:45 - 17:15

**Location:** Green Area, Room 1 (Level 0)

**Chairs:** C. Gratzke, Munich (DE)  
G. Morgia, Catania (IT)

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.

1124

**Positive association of androgen deprivation and male overactive bladder symptoms: A nationwide population-based cohort study in Taiwan**

By: Hu J-C., Li J-R., Cheng C-L.  
Taichung Veterans General Hospital, Division of Urology, Dept. of Surgery, Taichung, Taiwan

* 1125

**Allopurinol and risk of benign prostatic hyperplasia in a Finnish population-based cohort**

By: Kukko V. 1, Kaipia A. 2, Talala K. 3, Taari K. 4, Tammela T.L.J 1, Auvinen A. 5, Murtola T. 1  
1University of Tampere, Faculty of Medicine and Life Sciences, Tampere, Finland,  
2Tampere University hospital, Dept. of Urology, Tampere, Finland, 3Finnish Cancer Registry, Dept. of Statistics, Helsinki, Finland, 4University of Helsinki and Helsinki University Hospital, Dept. of Urology, Helsinki, Finland, 5University of Tampere, Faculty of Social Sciences, Tampere, Finland

1126

**Statins use is associated with reduce the risk of clinical benign prostatic hyperplasia in patients with hyperlipidemia**

By: Shih H.J. 1, Huang C-J. 2, Tsai P-S. 3, Fan Y-C. 2  
1Wan Fang Hospital, Taipei Medical University, Dept. of Urology, Taipei, Taiwan, 2Wan Fang Hospital, Taipei Medical University, Dept. of Anesthesiology, Taipei, Taiwan, 3College of Nursing, Taipei Medical University, Graduate Institute of Nursing, Taipei, Taiwan

1127

**Sexual steroids in serum and prostatic tissue of human non-cancerous prostate (STERPROSER Trial)**

By: Neuzillet Y. 1, Raynaud J.P. 2, Radulescu C. 3, Fiet J. 4, Giton F. 4, Dreyfus J.F. 5, Ghoneim T. 1, Rouanne M. 1, Lebret T. 1, Botto H. 1  
1Hôpital Foch, University of Versailles - Saint-Quentin-en-Yvelines, Dept. of Urology, Suresnes, France, 2University Pierre et Marie Curie, Dept. of Research, Paris, France,
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<th>ID</th>
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<tr>
<td>1128</td>
<td>Prostatic stromal inflammation is associated with bladder outlet obstruction in patients with benign prostatic hyperplasia</td>
<td>Inamura S.1, Ito H.1, Shinagawa T.1, Tsutsumiuchi M.1, Taga M.1, Kobayashi M.2, Yokoyama O.1</td>
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<td></td>
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<td>1University of Fukui, Dept. of Urology, Eiheiji. Fukui, Japan, 2University of Fukui, Dept. of Tumor Pathology, Eiheiji. Fukui, Japan</td>
</tr>
<tr>
<td>1129</td>
<td>Antidiabetic drugs and risk of benign prostatic hyperplasia</td>
<td>Nygård L.1, Talala K.2, Taari K.3, Tammela T.4, Auvinen A.5, Murtola T.J.4</td>
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<td>1University of Tampere, Faculty of Medicine and Life Sciences, Tampere, Finland, 2Cancer Society of Finland, Finnish Cancer Registry, Helsinki, Finland, 3University of Helsinki and Helsinki University Hospital, Dept. of Urology, Helsinki, Finland, 4Tampere University Hospital, Dept. of Urology, Tampere, Finland, 5University of Tampere, Faculty of Social Sciences, Tampere, Finland</td>
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<tr>
<td>1130</td>
<td>Neuroendocrine cells have an impact on the initial growth of prostatic hyperplasia in human and rats</td>
<td>Kyoda Y., Ichihara K., Hashimoto K., Kobayashi K., Fukuta F., Masumori N.</td>
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<td>Sapporo Medical University School of Medicine, Dept. of Urology, Sapporo, Japan</td>
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<tr>
<td>1131</td>
<td>Phosphodiesterase 4b expression in a canine experimental model of benign prostatic hyperplasia</td>
<td>Gasa Galmes B.I.1, García-Larrosa A.1, Sanchez Guerri I.2, Juanpere Rodero N.2, Mogas Amorós T.3, Lloreta Trull J.2, Cecchini Rosell L.1</td>
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<td>1Hospital del Mar, Dept. of Urology, Barcelona, Spain, 2Hospital del Mar, Dept. of Pathology, Barcelona, Spain, 3Autonomous University of Barcelona, Dept. of Animal Medicine and Surgery of Veterinary Faculty, Bellaterra, Spain</td>
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<td>University of Munich, Dept. of Urology, Munich, Germany</td>
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<tr>
<td>1133</td>
<td>Inhibition of human prostate stromal cell growth by thalidomide: A novel remedy in LUTS?</td>
<td></td>
</tr>
</tbody>
</table>
A randomized, placebo-controlled, single-blind, parallel design, multi-center, phase II clinical trial to evaluate the efficacy and safety of GV1001 in patients with benign prostatic hyperplasia (BPH)


1Dongguk University, Dept. of Urology, Gyeongju, Korea, South, 2Seoul National University, Dept. of Urology, Bundang, Korea, South, 3Inje University, Dept. of Urology, Busan, Korea, South, 4Keimyung University, Dept. of Urology, Daegu, Korea, South, 5Yonsei University, Dept. of Urology, Seoul, Korea, South, 6Chung-ang University, Dept. of Urology, Seoul, Korea, South, 7Hanyang University, Dept. of Urology, Guri, Korea, South, 8Eulji University, Dept. of Urology, Seoul, Korea, South

Summary
C. Gratzke, Munich (DE)
Accurate staging and stratification of urothelial carcinomas of the bladder and upper tract
Poster Session 84

Monday 19 March 15:45 - 17:15

Location: Green Area, Room 2 (Level 0)
Chairs: B. Ali-El-Dein, Mansoura (EG)
P. Gontero, Turin (IT)
E. Xylinas, Paris (FR)

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

1136

The long-term prognostic value of survivin expressing circulating tumor cells in patients with high-risk non-muscle invasive bladder cancer (NMIBC)

By: Busetto G.M. 1, Del Giudice F. 1, Raimondi C. 2, Gazzaniga P. 2, De Berardinis E. 1
1Sapienza Rome University, Dept. of Urology, Rome, Italy, 2Sapienza Rome University, Molecular Medicine, Rome, Italy

1137

Stromal lymphocyte infiltration is associated with tumor invasion depth but is not prognostic in high-grade T1 bladder cancer

By: Betari R. 1, Rouanne M. 1, Radulescu C. 2, Signolie N. 3, Allory Y. 2, Marabelle A. 3
, Adam J. 4, Lebret T. 1
1Hôpital Foch, Dept. of Urology, Suresnes, France, 2Hôpital Foch, Dept. of Pathology, Suresnes, France, 3Institut Gustave Roussy, Dept. of Oncology, Villejuif, France, 4Institut Gustave Roussy, Dept. of Pathology, Villejuif, France

1138

Correlation of genetic and cytogenetic alterations in pathological aggressiveness urothelial carcinoma of the bladder: Performance of BCA-1, a mini-array comparative genomic hybridisation-based test

By: Leon Bertrand P. 1, Cancel Tassin G. 2, Sighar K. 3, Compérat E. 4, Cécile G. 5, Ondet V. 5, Hugonin S. 6, Audoin M. 7, Dozy S. 7, Traxer O. 7, Ciofu C. 7, Rouprêt M. 8, Lacave R. 6, Cussenot O. 7
1CHU Reims, Dept. of Urology, Reims, France, 2GRC n°5, ONCOTYPE-URO, Institut Universitaire de Cancérologie, UPMC Sorbonne Université, CeRePP, Reims, France, 3Array Genomics, Dept. of Arraygenomics, Voisins le Bretonneux, France, 4Hôpital Tenon, AP-HP, UPMC Sorbonne Université, Dept. of Pathology, Paris, France, 5GRC n°5, ONCOTYPE-URO, Institut Universitaire de Cancérologie, UPMC Sorbonne Université, CeRePP, Paris, France, 6Hôpital Tenon, AP-HP, UPMC Sorbonne Université, Dept. of Tumoral Biology, Paris, France, 7Hôpital Tenon, AP-HP, UPMC Sorbonne Université, Dept. of Urology, Paris, France, 8Hôpital Pitie-Salpetriere, AP-HP, UPMC Sorbonne Université, Dept. of Urology, Paris, France
1139

Blue light cystoscopy for diagnosis of urothelial bladder cancer: Results from a multicenter registry

By: Bazargani S.1, Bateni Z.1, Bivalacqua T.2, Pohar K.3, Konety B.4, Willard B.5, Taylor J.6, Liao J.7, Holzbeierlein M.8, Tierney J.9, Djaladat H.1, Schuckman A.1, Daneshmand S.1

1University of Southern California, Dept. of Urology, Los Angeles, United States of America, 2Johns Hopkins University, Dept. of Urology, Baltimore, United States of America, 3Ohio State University, Dept. of Urology, Ohio, United States of America, 4University of Minnesota, Dept. of Urology, Minneapolis, United States of America, 5Carolina Urology Partners, Dept. of Urology, Lexington, United States of America, 6Michael E. DeBakey VAMC, Dept. of Urology, Houston, United States of America, 7VA Palo Alto Health Care System, Dept. of Urology, Palo Alto, United States of America, 8Kansas University, Dept. of Urology, Lawrence, United States of America, 9Charleston Ave Medical Center, Dept. of Urology, Charleston, United States of America

1140

DaBlaCa-11: Photodynamic diagnosis in flexible cystoscopy – initial findings in a randomized controlled trial

By: Drejer D.1, Moltke A-L.2, Munk Nielsen A.3, Lam G.W.4, Bjerggaard Jensen J.5

1Hospital of West Jutland, Holstebro, Dept. of Urology, Holstebro, Denmark, 2Aarhus University, Dept. of Clinical Medicine, Aarhus, Denmark, 3Aarhus University Hospital, Dept. of Urology, Aarhus, Denmark, 4Herlev og Gentofte Hospital, Dept. of Urology, Herlev, Denmark, 5Aarhus University Hospital and Hospital of West Jutland, Holstebro, Dept. of Urology, Aarhus, Denmark

1141

Ureteroscopy as a diagnostic tool for diagnosis of upper tract urothelial cancer: Pros and cons in a series with 305 patients in correlation with the final histopathological results

By: Atwa A.1, Elawdy M.2, Taha D.3, Abd El-Hamid M.4, Osman Y.1, Zahran M.5

1Urology and Nephrology Center, Dept. of Urology, Mansoura, Egypt, 2Ministry of Health, Dept. of Urology, Maskat, Oman, 3Kafir Elsheikh University, Dept. of Urology, Kafir Elsheikh, Egypt, 4Urology and Nephrology Center, Pathology, Mansoura, Egypt, 5Urology And Nephrology Centre, Mansoura University, Mansoura, Egypt

1142

Thulium laser en-bloc resection of bladder tumor (THUEB-BT): TIGER (Thulium Italian Group Established on Research) study to compare laser and electrical en-bloc transurethral resection of bladder tumor

By: Bozzini G.1, Maruccia S.2, Pastore A.3, Buffi N.4, Guazzoni G.4, Parma P.5, Saredi G.6, Casellato S.2, Montanari E.7

1Humanitas Mater Domini, Dept. of Urology, Castellanza, Italy, 2Istituti Clinici Zucchi, Dept. of Urology, Monza, Italy, 3University La Sapienza Rome, Dept. of Urology, Latina, Italy, 4Humanitas Research Hospital, Dept. of Urology, Rozzano, Italy, 5Ospedale di Mantova, Dept. of Urology, Mantova, Italy, 6Ospedale Fondazione Macchi, Dept. of Urology, Varese, Italy, 7IRCCS Policlinico Milano, Dept. of Urology, Milan, Italy
Genome-wide DNA methylation profiling of upper tract urothelial carcinoma

By: Hassler M.R.¹, Kimura S.¹, Ilijazi D.¹, Pulverer W.², D’Andrea D.¹, Ertl I.E.¹, Haitel A.¹, Weinhaeusel A.², Shariat S.F.¹

¹Medical University of Vienna, Dept. of Urology, Vienna, Austria, ²Austrian Institute of Technology, Health & Environment Department, Vienna, Austria

Occupation and malignant neoplasm of the renal pelvis: 11,241 cases from five Nordic countries

By: Michalek I.M.¹, Martinsen J.I.², Weiderpass E.², Kjaerheim K.², Lyng E.³, Sparen P.⁴, Tryggvadottir L.⁵, Pukkala E.⁶

¹University of Tampere, Faculty of Social Sciences, Tampere, Finland, ²Cancer Registry of Norway, Institute of Population-Based Cancer Research, Dept. of Research, Oslo, Norway, ³University of Copenhagen, Center for Epidemiology and Screening, Institute of Public Health, Copenhagen, Denmark, ⁴Karolinska Institutet, Dept. of Medical Epidemiology and Biostatistics, Stockholm, Sweden, ⁵Icelandic Cancer Registry, Faculty of Medicine, Reykjavik, Iceland, ⁶Finnish Cancer Registry, Institute for Statistical and Epidemiological Cancer Research, Helsinki, Finland

Technical data on upper tract urothelial carcinoma (UTUC) grading using 3 different biopsy devices

By: Territo A.¹, Breda A.¹, Basile G.¹, Vila Reyes H.¹, Subiela J.D.¹, Mayordomo O.¹, Rodríguez Faba O.¹, Gaya J.M.¹, Palou J.²

¹Fundació Puigvert, Dept. of Urology, Barcelona, Spain, ²Fundació Puigvert, Dept. of Urology, Barcelona, Spain

Size focality invasion in upper tract urothelial carcinoma (SFI-UTUC), a novel imaging-based morphometric scoring system to predict survival outcomes in UTUC

By: Hamilton Z.¹, Haifler M.², Krabbe L-M.³, Ryan S.¹, Reddy M.¹, Berquist S.¹, Clinton T.³, Bloch A.¹, Field C.¹, Patel S.¹, Cotta B.¹, Margulis V.³, Uzzo R.², Derweesh I.¹

¹University of California, Dept. of Urology, San Diego, United States of America, ²Fox Chase Cancer Center, Dept. of Urology, Philadelphia, United States of America, ³University of Texas Southwest, Dept. of Urology, Dallas, United States of America

Validation of pre-treatment risk stratification parameters according to EAU Guidelines on upper tract urothelial carcinoma (UTUC)


¹Medical University of Vienna, Dept. of Urology, Vienna, Austria, ²MD Anderson Cancer Center, Dept. of Urology, Houston, United States of America, ³Pitié-Salpêtrière, Assistance-Publique Hôpitaux de Paris and Faculté de Médecine Pierre et Marie Curie,
Correlation between confocal laser endomicroscopy (Cellvizio®) and histological grading of upper tract urothelial carcinoma: Improving our experience

By: Breda A. 1, Vila Reyes H. 1, Territo A. 1, Basile G. 1, Sanguedolce F. 1, Gaya J.M. 1, Algaba F. 2, Palou J. 1

1 Fundació Puigvert, Dept. of Urology, Barcelona, Spain, 2 Fundació Puigvert, Dept. of Pathology, Barcelona, Spain

Preoperative nomogram for predicting locally advanced disease in patients with upper urinary tract urothelial carcinoma

By: Yoshida T. 1, Kobayashi T. 2, Ito K. 2, Makita N. 3, Matsuzaki T. 1, Nakamoto T. 1, Magaribuchi T. 2, Kawa G. 4, Kawaura T. 5, Kitawaki T. 5, Kawakita M. 3, Ogawa O. 2, Murota T. 1, Kinoshita H. 1, Matsuda T. 1

1 Kansai medical university, Dept. of Urology, Osaka, Japan, 2 Kyoto university, Dept. of Urology, Kyoto, Japan, 3 Kobe City Medical Center General Hospital, Dept. of Urology, Kobe, Japan, 4 Saiseikai Noe Hospital, Dept. of Urology, Osaka, Japan, 5 Kansai medical university, Dept. of Mathematics, Osaka, Japan

Feasibility of perfusion MRI to predict renal function after nephroureterectomy in upper tract urothelial carcinoma patients

By: Waseda Y. 1, Yoshida S. 1, Takahara T. 2, Arita Y. 3, Sakamoto T. 4, Yajima S. 1, Uehara S. 1, Yasuda Y. 1, Tanaka H. 1, Kijima T. 1, Yokoyama M. 1, Ishioka J. 1, Matsuoka Y. 1, Saito K. 1, Kihara K. 1, Fuji Y. 1

1 Tokyo Medical and Dental University Graduate School, Dept. of Urology, Tokyo, Japan, 2 Toque University School of Engineering, Dept. of Biomedical Engineering, Kanagawa, Japan, 3 AIC Yaesu Clinic, Dept. of Radiology, Tokyo, Japan, 4 PixSpace.Ltd, Dept. of Radiology, Fukuoka, Japan
Prostate cancer: Outcomes after radiotherapy and brachytherapy

Poster Session 85

Monday 19 March
15:45 - 17:15

Location: Blue Area, Room 1 (Level 0)

Chairs: C. Cozzarini, Milan (IT)
N. Fossati, Milan (IT)
R. Sanchez-Salas, Paris (FR)

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.

* 1151

Testing the impact of adjuvant radiotherapy (aRT) after radical prostatectomy (RP) on overall mortality (OM) in prostate cancer patients with pathologically node positive disease: A nationwide analysis

By: Abdollah F. 1, Sood A. 1, Dalela D. 1, Keeley J. 1, Trinh Q.D. 2, Alanee S. 1, Rogers C. 1, Peabody J. 1, Menon M. 1

1Henry Ford Hospital, Dept. of Urology, Detroit, United States of America, 2Brigham and Women's Hospital/Harvard Medical School, Dept. of Urological Surgery, Boston, United States of America

1152

The effect of tamsulosin in improving lower urinary tract symptoms in prostate cancer patients undergoing external beam radiation therapy. A randomized control trial

By: Tsirkas K. 1, Papatsoris A. 2, Zygogianni A. 3, Skolarikos A. 2, Fragkoulis C. 1, Nastos K. 4, Dellis A. 4

1G. Gennimatas General Hospital, Dept. of Urology, Athens, Greece, 2Sismanoglion General Hospital, Medical School, National and Kapodistrian University of Athens, Dept. of Urology, Athens, Greece, 3Radiotherapy Unit, Aretaieion Academic Hospital, Medical School, National and Kapodistrian University of Athens, Dept. of Radiology, Athens, Greece, 4Aretaieion Academic Hospital, Medical School, National and Kapodistrian University of Athens., Dept. of Surgery, Athens, Greece

1153

Patient versus physician-reported outcomes in hypofractionated radiotherapy for prostate cancer

By: Rammant E. 1, Ost P. 2, Swimberghe M. 2, Vanpachtenbeke F. 2, Bultijnck R. 1, Lumen N. 3, Decaestecker K. 3, Fonteyne V. 2

1Ghent University, Dept. of Radiotherapy and Experimental Cancer Research, Ghent, Belgium, 2Ghent University Hospital, Dept. of Radiotherapy and Experimental Cancer Research, Ghent, Belgium, 3Ghent University Hospital, Dept. of Urology, Ghent, Belgium
Facility level variation in rates of definitive therapy for low risk prostate cancer among men with limited life expectancy: An opportunity for value-based care redesign

By: Von Landenberg N. 1, Cole A. 2, Friedlander D. 2, Berg S. 1, Löppenberg B. 1, Noldus J. 1, Roghmann F. 1, Kibel A. 3, Trinh Q-D. 2
1Marien Hospital Herne, Ruhr-University Bochum, Dept. of Urology, Herne, Germany, 2Brigham And Women's Hospital, Harvard Medical School, Division of Urological Surgery and Center for Surgery and Public Health, Boston, United States of America, 3Brigham And Women's Hospital, Harvard Medical School, Division of Urological Surgery, Boston, United States of America

Factors affecting self-reported, long-term (1-2 yrs) urinary incontinence from post-prostatectomy RT

1Istituto di Candiolo- Fondazione del Piemonte per l'Oncologia IRCCS, Dept. of Radiotherapy, Candiolo (Turin), Italy, 2Fondazione IRCCS Istituto Nazionale dei Tumori, Dept. of Radiotherapy, Milan, Italy, 3Istituto Nazionale dei Tumori “Regina Elena”, Dept. of Radiotherapy, Rome, Italy, 4Istituto di Candiolo- Fondazione del Piemonte per l'Oncologia IRCCS, Dept. of Medical Physics, Candiolo (Turin), Italy, 5Fondazione IRCCS Istituto Nazionale dei Tumori, Dept. of Medical Physics, Milan, Italy, 6Istituto Nazionale dei Tumori “Regina Elena”, Dept. of Medical Physics, Rome, Italy, 7Ospedale Regionale U.Parini-AUSL Valle d’Aosta, Dept. of Radiotherapy, Aosta, Italy, 8Ospedale di Ivrea, A.S.L. TO4, Dept. of Radiotherapy, Ivrea, Italy, 9Ospedale di Ivrea, A.S.L. TO4, Dept. of Medical Physics, Ivrea, Italy, 10Cliniche Gavazzeni-Humanitas, Dept. of Radiotherapy, Bergamo, Italy, 11Comprensorio Sanitario di Bolzano, Dept. of Radiotherapy, Bolzano, Italy, 12Comprensorio Sanitario di Bolzano, Dept. of Medical Physics, Bolzano, Italy, 13Ospedale degli Infermi, Dept. of Radiotherapy, Biella, Italy, 14Ospedale degli Infermi, Dept. of Medical Physics, Biella, Italy, 15San Raffaele Scientific Institute, Dept. of Urology, Milan, Italy, 16San Raffaele Scientific Institute - Università Vita Salute, Dept. of Urology, Milan, Italy, 17Programma Prostata, Fondazione IRCCS Istituto Nazionale dei Tumori, Dept. of Radiotherapy, Milan, Italy, 18San Raffaele Scientific Institute, Dept. of Medical Physics, Milan, Italy, 19San Raffaele Scientific Institute, Dept. of Radiotherapy, Milan, Italy

Genitourinary and gastrointestinal toxicity in patients undergoing prostate low-dose-rate brachytherapy

By: Morizawa Y. 1, Tanaka N. 1, Asakawa I. 2, Hori S. 1, Nakai Y. 1, Miyake M. 1, Anai S. 1, Masatoshi H. 2, Fujimoto K. 1
1Nara Medical University, Dept. of Urology, Nara, Japan, 2Nara Medical University, Dept. of Radiation Oncology, Nara, Japan
Does treatment of the primary tumor in oligometastatic prostate cancer matter?

By: Poulsen M.H. 1, Mortensen M. 1, Høilund-Carlsen P. 2, Jakobsen J. 3
1Odense University Hospital, Dept. of Urology, Odense, Denmark, 2Odense University Hospital, Nuclear Medicine, Odense, Denmark, 3Herlev and Gentoftte University Hospital, Dept. of Urology, Copenhagen, Denmark

Radiation cystitis after prostate cancer radiotherapy: Risk factors associated to hospital admission and intervention

By: Sanguedolce F. 1, Pisano F. 2, Sancho Pardo G. 3, Acosta E. 4, Mercadé Sanchez A. 2, Balaña Lucena J. 2, Breda A. 2, Territo A. 2, Basile G. 2, Vila H. 2, Rodríguez Faba O. 2, Palou Redorta J. 2
1Fundació Puigvert, Autonomous University of Barcelona, Dept. of Urology, Barcelona, Spain, 2Fundació Puigvert, Dept. of Urology, Barcelona, Spain, 3Hospital Sant Pau i Santa Creu, Autonomous University of Barcelona, Dept. of Radiotherapy and Oncology, Barcelona, Spain, 4Hospital Sant Pau i Santa Creu, Dept. of Radiotherapy and Oncology, Barcelona, Spain

Comparison of chronological changes in urinary function in patients who underwent low-dose-rate brachytherapy for prostate cancer - a randomized controlled trial of alpha-1 adrenoceptor antagonist alone vs. combination with cycloxygenase-2 inhibitor

By: Tanaka N. 1, Torimoto K. 1, Asakawa I. 2, Miyake M. 1, Anai S. 1, Nakai Y. 1, Fuji T. 3, Hasegawa M. 2, Fujimoto K. 1
1Nara Medical University, Dept. of Urology, Kashihara, Japan, 2Nara Medical University, Dept. of Radiation Oncology, Kashihara, Japan, 3Nara Medical University, Dept. of Diagnostic Pathology, Kashihara, Japan

Urinary symptoms in the first year after I-125 implantation for prostate cancer: Does 4D intraoperative dose planning improve LUTS

1Maidstone and Tunbridge Wells NHS Trust, Dept. of Urology, Maidstone, United Kingdom, 2Maidstone and Tunbridge Wells NHS Trust, Dept. of Oncology, Maidstone, United Kingdom, 3Maidstone and Tunbridge Wells NHS Trust, Dept. of Radiology, Maidstone, United Kingdom

Summary
C. Cozzarini, Milan (IT)
Poster Session 86

Location: Blue Area, Room 2 (Level 0)

Chairs: K. Thomas, London (GB)  
B.E. Ayres, London (GB)

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.

To be confirmed

1168

**Losing kidneys in retroperitoneal fibrosis (RPF): A prospective analysis of kidney loss as a result of ureteric obstruction from RPF in patients referred to a national RPF centre**

By: Fernando A. , De La Rosa A. , O'Brien T.
Guy's and St Thomas' Hospital, Dept. of Urology, London, United Kingdom

1163

**Management of inguinoscrotal sarcoma – a two centre experience**

By: Parnham A. , Sangar V. , Muneer A.
1Christie Hospital, Dept of Urology, Manchester, United Kingdom, 2NIHR Biomedical Research Centre and University College London, Dept. of Urology, London, United Kingdom

1164

**Withdrawn**

To be confirmed

1165

**Genito-Urinary Extramammary Pagets disease: Recognition and outcomes of distinct histological subtypes**

By: Yan S. , Manjunath A. , Mensah E. , Tinwell B. , Corbishley C. , Ayres B. , Watkin N.
1Guy's Hospital, Dept. of Urology, London, United Kingdom, 2St George's Hospital, Dept. of Urology, London, United Kingdom, 3St George's Hospital, Dept. of Histopathology, London, United Kingdom

1166

**Squamous cell carcinoma of the posterior urethra: Outcomes following radical surgery and adjuvant chemo-radiotherapy**

By: Castiglione F. , Christodoulidou M. , Albersen M. , Malone P. , Alifrangis C. , Mitra A. , Muneer A.
1University College London Hospital, Dept. of Urology, London, United Kingdom, 2NIHR
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<tr>
<th>ID</th>
<th>Title</th>
<th>Authors</th>
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<tr>
<td>*1167</td>
<td>Genotyping in cystinuria - do first degree relatives share a similar phenotype?</td>
<td>By: Kum F.¹, Wong K.¹, Mein R.², Bultitude M.¹, Thomas K.¹ ¹Guy’s and St. Thomas’ Hospitals, London, Dept. of Urology, London, United Kingdom, ²Guy’s and St. Thomas’ Hospitals, London, Dept. of Molecular Genetics, London, United Kingdom</td>
</tr>
<tr>
<td>1169</td>
<td>Concentration of high mobility group box 1 proteins increases in the urine of interstitial cystitis patients in correlation with epithelial growth factor</td>
<td>By: Kochiashvili G., Kochiashvili D. Tbilisi State Medical University, Dept. of Urology, Tbilisi, Georgia</td>
</tr>
<tr>
<td>1170</td>
<td>Genotype and phenotype correlation in Von Hippel–Lindau disease based on the alteration of HIF-α binding site in VHL protein</td>
<td>By: Liu S., Wang J., Peng S., Li T., Ning X., Hong B., Liu J., Zhou J., Ma K., Cai L., Gong K. Peking University First Hospital, Dept. of Urology, Beijing, China</td>
</tr>
<tr>
<td>1171</td>
<td>Risk factors for survival in patients with von Hippel-Lindau disease</td>
<td>By: Wang J.Y., Liu S.J., Hong B.A., Zhou J.C., Ma K.F., Gong K. Peking University First Hospital, Dept. of Urology, Beijing, China</td>
</tr>
<tr>
<td>1173</td>
<td>Withdrawn</td>
<td>To be confirmed</td>
</tr>
<tr>
<td>1174</td>
<td>Neuroendocrine malignancies of the urogenital system: A single-center experience</td>
<td>By: Zolcsak Z.¹, Baki M.¹, Fuder E.², Salamon F.², Zolcsák A.³, Tóth Z.³, Landherr L.¹ ¹Uzsoki Hospital, Dept. of Oncoradiology, Budapest, Hungary, ²Uzsoki Hospital, Dept. of Pathology, Budapest, Hungary, ³Uzsoki Hospital, Dept. of Urology, Budapest, Hungary</td>
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<tr>
<td>1175</td>
<td>Comparative analysis between multilocular cystic RCC and multilocular cystic clear cell RCC with low malignant potential using 25 immunohistochemical tissue markers</td>
<td>By: Kim S.H.¹, Park W.S.¹, Joung J.Y.¹, Suh Y.S.¹, Kim J.K.¹, Seo H.K.¹, Lee K.H.¹, Park B.², Joo J.², Kwon W.³, Chung J.¹</td>
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Two novel AGXT mutations identified in Chinese patients with severe bilateral multiple nephrolithiasis

By: Du Y., Li J.

Capital medical University, Dept. of Urology, Beijing, China
Surgical treatment for stress incontinence in men and women

Poster Session 87

Monday 19 March 15:45 - 17:15

Location: Blue Area, Room 3 (Level 0)

Chairs: R. Inman, Sheffield (GB)
V.G. Mirone, Naples (IT)
D. Pushkar, Moscow (RU)

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

1177
Withdrawn
To be confirmed

1178
The Virtue European trial for urinary incontinence after prostatectomy: Intermediate 1-year outcomes


1 Mater Private Hospital, Dept. of Urology, Dublin, Ireland,
2 Leiden University Medical Center, Dept. of Urology, Leiden, Netherlands, The,
3 Caremeau University Hospital, Dept. of Urology, Nîmes, France,
4 European Institute of Oncology, Dept. of Urology, Milan, Italy,
5 Guy's Hospital, Dept. of Urology, London, United Kingdom,
6 Puerta del Mar University Hospital, Dept. of Urology, Cadix, Spain,
7 Henri Mondor University Hospital, Dept. of Urology, Créteil, France,
8 Schleswig-Holstein University Hospital, Dept. of Urology, Kiel, Germany,
9 Gent University Hospital, Dept. of Urology, Ghent, Belgium,
10 Pitié-Salpêtrière University Hospital, Dept. of Urology, Paris, France,
11 Coloplast, Medical Affairs Office, Le Plessis-Robinson, France,
12 Erasme University Hospital, Dept. of Urology, Brussels, Belgium

1179
Prospective analysis of AMS 800 © placement with double cuff in patients with a history of radiotherapy

By: Ludwig T.A., Maurer V., Rosenbaum C., Marks P., Reiss P., Engel O., Riechardt S., Fisch M., Dahlem R.

University Medical Center Hamburg Eppendorf, Dept. of Urology, Hamburg, Germany

1180
Outcomes of periurethral bulking agent injection for treatment of postprostatectomy incontinence after sling placement: A multi-national experience

By: Chung A. 1, Lynch W. 2, McCammon K. 3

1 Concord Repatriation General Hospital, Dept. of Urology, Sydney, Australia,
2 Macquarie University Hospital, Dept. of Urology, Sydney, Australia,
3 Eastern Virginia Medical School, Dept. of Urology, Norfolk, United States of America
1181

Robot-assisted artificial urinary sphincter implantation in female patients: Lessons learnt after a 58 patients multicenter experience

By: Peyronnet B. 1 , Belas O. 2 , Capon G. 3 , Manunta A. 1 , Allenet C. 3 , Belas M. 4 , Callerot P. 5 , Cardot V. 6 , Delreux A. 7 , Descazeaud A. 8 , Fournier G. 5

1 University of Rennes, Dept. of Urology, Rennes, France, 2 Polyclinique Sud, Dept. of Urology, Le Mans, France, 3 University of Bordeaux, Dept. of Urology, Bordeaux, France, 4 Polyclinique sud, Dept. of Urology, Le Mans, France, 5 University of Brest, Dept. of Urology, Brest, France, 6 Clinique Meudon, Dept. of Urology, Meudon, France, 7 Clinique Saint-Gregoire, Dept. of Urology, Rennes, France, 8 University of limoges, Dept. of Urology, Limoges, France

1182

Suburethral male sling: Correlation between continence outcomes and magnetic resonance findings

By: Collado Serra A. 1 , Pelechano Gómez P. 2 , Martin I. 2 , Ramirez-Backhaus M. 1 , Dominguez-Escrig J. 1 , Casanova J. 1 , Gomez-Ferrer A. 1 , Iborra I. 1 , Mir C. 1 , Cervera J. 3 , Rubio-Brones J. 1

1 Fundación IVO, Dept. of Urology, Valencia, Spain, 2 Fundación IVO, Dept. of Radiology, Valencia, Spain, 3 Fundacion IVO, Dept. of Radiology, Valencia, Spain

1183

Long term results and risk factors of failure of adjustable periurethral balloons in women with stress urinary incontinence due to intrinsic sphincter deficiency

By: Perrouin Verbe M.A.., Bergot C. , Rigaud J. , Levesque A. , Bouchot O. , Le Normand L.

Nantes University Hospital, Dept. of Urology, Nantes, France

1184

Results from the multicenter Iberian study with the adjustable transobturator male system for post-prostatectomy incontinence

By: Angulo Cuesta J. 1 , Cruz F. 2 , Esquinas C. 1 , Arance I. 1 , Manso M. 2 , Rodríguez A. 3 , Pereira J. 3 , Ojea A. 4 , Carballo M. 4 , Rabassa M. 5 , Teyrouz A. 5 , Escribano G. 6 , Rodríguez E. 6 , Teba F. 7 , Celada G. 7 , Madurga B. 8 , Álvarez-Ossorio J.L. 8 , Marcelino J. 9 , Martins F. 9

1 Universidad Europea de Madrid, Hospital de Getafe, Clinical Department, Madrid, Spain, 2 Centro Hospitalar São João, Dept. of Urology, Oporto, Portugal, 3 Hospital Arquitecto Marcide, Dept. of Urology, Ferrol, Coruña, Spain, 4 Hospital Alvaro Cunqueiro, Dept. of Urology, Vigo, Pontevedra, Spain, 5 Hospital Son Llatzer, Dept. of Urology, Palma de Mallorca, Spain, 6 Hospital Universitario Gregorio Marañón, Dept. of Urology, Madrid, Spain, 7 Hospital Universitario de la Princesa, Dept. of Urology, Madrid, Spain, 8 Hospital Universitario Puerta del Mar, Dept. of Urology, Cádiz, Spain, 9 Hospital de Santa María, Dept. of Urology, Lisbon, Spain

1185

Out-in transobturator tape: Over 10 years follow-up

By: Natale F. 1 , Illiano E. 2 , La Penna C. 3 , Zucchi A. 4 , Parisi F. 5 , Alunni F. 5 , Costantini E. 6

1 S. Carlo di Nancy Hospital, Dept. of Urogynecology, Rome, Italy, 2 University of Perugia,
Five-year outcomes of transobturator tape (TOT) compared with tension-free vaginal tape (TVT) in treatment of women with stress urinary incontinence


1Zagazig University, Dept. of Urology, Zagazig, Egypt, 2Cairo university, Dept. of Urology, Cairo, Egypt

The outcome of implantation of a bladder neck artificial urinary sphincter (BN AUS) for recurrent urodynamically proven stress urinary incontinence and mixed urinary incontinence

By: Benamer D., O'Connor E., Andrich D., Ockrim J., Greenwell T., Mundy A.

1UCLH, Dept. of Female, Functional and Restorative Urology, London, United Kingdom, 2UCLH, Dept. of Reconstructive Urology, London, United Kingdom

Does the adjustable transobturator male system maintain continence and satisfaction in long term? A single center experience

By: Strini K.A., Ehrlich G., Holter M., Pummer K., Primus G., Dalpiaz O.

1University Hospital Graz, Dept. of Urology, Graz, Austria, 2University Hospital Graz, Institute of Medical Computer Sciences, Statistics and Documentation, Graz, Austria

Functional outcomes of adjustable continence therapy (ACT™) balloons in women: A multicentric retrospective study

By: Sanson C., Guiffart P., Peyronnet B., Game X., Biardeau X.

1CHU Rangueil, Dept. of Urology, Toulouse, France, 2CHU Lille, Dept. of Urology, Lille, France, 3CHU Rennes, Dept. of Urology, Rennes, France

Artificial urinary sphincter in male patients with spina bifida: Comparison of perioperative and functional outcomes between bulbar urethra and bladder neck cuff placement


1Rennes University Hospital, Dept. of Urology, Rennes, France, 2Nantes University Hospital, Dept. of Urology, Nantes, France, 3Toulouse University Hospital, Dept. of Urology, Toulouse, France, 4Kerpace Hospital, Physical Medicine and Rehabilitation, Ploemeu, France, 5Rennes University Hospital, French referral network of Spina Bifida, Rennes, France
Surgical treatment of female urethra ectopia and hypermobility

By: Komyakov B., Ochelenko V.A., Fadeev V., Tarasov V.
North-West Medical University, Dept. of Urology, Saint-Petersburg, Russia

Summary
V.G. Mirone, Naples (IT)
Modelling as applied to imaging and treatment techniques
Poster Session 88

Location: Blue Area, Room 4 (Level 0)
Chairs: V. Ravery, Paris (FR), V. Scattoni, Milan (IT)

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

1192
Study of the renal parenchyma volume during the fetal period in humans
By: Diniz A.¹, Favorito L.¹, Gallo C.¹, Vieiralves R.², Sampaio F.¹
¹Rio de Janeiro State University, Urogenital Research Unit, Rio de Janeiro, Brazil, ²URio de Janeiro State University, Urogenital Research Unit, Rio de Janeiro, Brazil

1193
Development of silicone surgical guide for partial nephrectomy with 3D printing and injection molding
By: Kyung Y.S.¹, Ryu J.², Choi S.Y.², Song H.K.³, Choi W.², Lee J.², Lee W.², Chae H.K.², Kim N.³, Kim C.²
¹University of Ulsan College of Medicine, Dept. of Health Screening and Promotion Center, Seoul, Korea, South, ²University of Ulsan College of Medicine, Dept. of Urology, Seoul, Korea, South, ³University of Ulsan College of Medicine, Dept. of Convergence Medicine, Seoul, Korea, South

1194
The role of 3D printed virtual models for robot-assisted-radical-prostatectomy and partial-nephrectomy: A validation study
By: Porpiglia F.¹, Bertolo R.¹, Manfredi M.¹, Mele F.¹, Amparore D.¹, Checcucci E.¹, Garrou D.¹, Cattaneo G.¹, Pecoraro A.¹, Peretti D.¹, Ragni F.¹, Di Dio M.¹, Gnede D.², Solito F.², Toso S.¹, Fiori C.¹
¹San Luigi Gonzaga Hospital, Dept. of Urology, Orbassano, Italy, ²San Luigi Gonzaga Hospital, Dept. of Radiology, Orbassano, Italy

1195
Low-intensity extracorporeal shockwave therapy (li-ESWT) in the treatment of diabetic nephropathy
By: Skov-Jeppesen S.M.¹, Yderstræde K.B.², Bistrup C.³, Jensen B.L.⁴, Marcussen N.⁵, Hanna M.⁶, Lund L.¹
¹Odense University Hospital, Dept. of Urology, Odense, Denmark, ²Odense University Hospital, Dept. of Endocrinology, Odense, Denmark, ³Odense University Hospital, Dept. of Nephrology, Odense, Denmark, ⁴University of Southern Denmark, Dept. of Cardiovascular and Renal Research, Institute of Molecular Medicine, Odense, Denmark, ⁵Odense University Hospital, Dept. of Pathology, Odense, Denmark, ⁶Charing Cross
<table>
<thead>
<tr>
<th>Session</th>
<th>Title</th>
<th>Authors</th>
<th>Institutions</th>
</tr>
</thead>
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<tr>
<td>1197</td>
<td>Novel use of the AccuVein AV400 during RARP: Infrared augmented reality device to help reduce abdominal wall hematoma</td>
<td>Ajib K., Couture F., Tholomier C., Liberman D., Bondarenko H., Karakeiwicz P., Zorn K.</td>
<td>University of Montreal Hospital Center, Dept. of Urology, Montreal, Canada</td>
</tr>
<tr>
<td>1198</td>
<td>The first clinical study of the Korean robotic surgical system, Revo-i Model MSR-5000</td>
<td>To be confirmed</td>
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<td>1199</td>
<td>CICERO: Cystoscopic imaging collection and enhancement project: A novel recording device and image enhancement technology</td>
<td>Heer R., Groves S.E., Thorpe A., Robson W., Tandogdu Z., Soomro N., Bramwell D.I.</td>
<td>Newcastle University, Northern Institute For Cancer Research, Newcastle upon Tyne, United Kingdom, Biosignatures Ltd, Clinical Operations, Newcastle upon Tyne, United Kingdom, Newcastle upon Tyne Hospitals NHS Foundation Trust, Dept. of Urology, Newcastle upon Tyne, United Kingdom, Northern Institute for Cancer Research, Dept. of Urology, Newcastle upon Tyne, United Kingdom, Biosignatures Ltd, CSO, Newcastle upon Tyne, United Kingdom</td>
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<tr>
<td>1200</td>
<td>Head-mounted display assisted magnetic resonance/ultrasound fusion prostate biopsy system</td>
<td>Uehara S., Yoshida S., Matsuoka Y., Yasuda Y., Kijima T., Yokoyama M., Ishioka J., Saito K., Kihara K., Fujii Y.</td>
<td>Tokyo Medical and Dental University Graduate School, Dept. of Urology, Tokyo, Japan</td>
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<tr>
<td>1201</td>
<td>Seek and destroy: A novel laser system with real-time automatic target identification for urinary stone lithotripsy. An in-vivo study</td>
<td>Schlager D., Schütz J., Brandenburg A., Miernik A.</td>
<td>University Medical Center Freiburg, Dept. of Urology, Freiburg, Germany, Fraunhofer Institute of Physical Measurement Techniques, Production Control, Freiburg, Germany</td>
</tr>
<tr>
<td>1202</td>
<td>Robotic waterjet wound debridement: Evaluation of a novel technology in a simulated, clinical setting using a porcine skin model</td>
<td>Schoeb D.S., Klodmann J., Schlager D., Mueller P.F., Miernik A., Bahls T.</td>
<td>University of Freiburg, Dept. of Urology, Freiburg, Germany, German Aerospace Center (DLR), Institute of Robotics and Mechatronics, Weßling, Germany</td>
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<tr>
<td>Session</td>
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<td>1203</td>
<td>Innovation and application of LESS in urology: Suprapublic-assisted laparoendoscopic single-site surgery (SA-LESS) with report of 745 cases in a single center</td>
<td>Zou X., Zhang G., Jiang B., Yuan Y., Xiao R., Wu G.</td>
<td>First Affiliated Hospital of Gannan Medical University; Institute of Urology, Dep. of Urology, Ganzhou, China</td>
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<tr>
<td>1205</td>
<td>Imaging skeletal muscle regeneration after stem cell application using diffusion tensor imaging (DTI) and magnetisation transfer (MT) measurements</td>
<td>Keller D., Eberhardt C., Boss A., Eberli D.</td>
<td>University Hospital Zurich, Dept. of Urology, Zurich, Switzerland; University Hospital Zurich, Institute for diagnostic and interventional radiology, Zurich, Switzerland</td>
</tr>
<tr>
<td>1206</td>
<td>Hydrogel scaffolds for detrusor regeneration in rats after partial detrusorectomy</td>
<td>Smolar J., Horst M., Eberli D.</td>
<td>Zurich, Dept. of Urology, Zurich, Switzerland</td>
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</tbody>
</table>
Surgical aspects and novel noninvasive treatments for male sexual dysfunction
Poster Session 89

Monday 19 March 15:45 - 17:15

Location: Blue Area, Room 5 (Level 0)

Chairs: M.M. Fode, Herlev (DK)
E.C. Serefoglu, Istanbul (TR)
P. Verze, Naples (IT)

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.

* 1208

Preliminary outcomes of Clostridium Histolyticum collagenase (CHC) using a modified technique “Percutaneous Needling Tunneling (PNT)” in the treatment of Peyronie’s disease (PD): Prospective randomized study

By: Fernandez Pascual E., Turo J., Martínez-Ballesteros C., Rodríguez-Monsalve M., Marcos D., Carballido J., Martinez-Salamanca J.I. Puerta de Hierro Majadahonda University Hospital, Dept. of Urology, Madrid, Spain

1209

Analysis of our results in the treatment of Peyronie’s disease with Clostridium histolyticum collagenase and modeling using penis extender

By: Alonso Isa M., García-Gómez B., Medina-Polo J., Justo-Quintas J., García-Rojo E., Romero-Otero J. Hospital Universitario 12 de Octubre, I+D+I Men’s Health, Dept. of Urology, Madrid, Spain

1210

Clinical efficacy of intralesional therapy for Peyronie’s disease in randomized clinical trials: A systematic review and network meta-analysis

By: Russo G.i,1 Albersen M,2 Cacciamani G,3 Cocci A,4 Mirone V,5 Morgia G,6 Kessler T,7 Serefoglu E.C,8 Verze P.5

1University of Napoli, Dept. of Urology, Naples, Italy, 2University of Leuven, Dept. of Urology, Leuven, Belgium, 3University of Verona, Dept. of Urology, Verona, Italy, 4University of Firenze, Dept. of Urology, Florence, Italy, 5University of Napoli, Dept. of Neuroscience, Reproductive sciences and Odontostomatolgy, Naples, Italy, 6University of Catania, Dept. of Urology, Catania, Italy, 7Spinal Cord Injury Center & Research, Dept. of Neuro-Urology, Zurich, Switzerland, 8Bagcilar Training and Research Hospital, Dept. Urology, Istanbul, Turkey

1211

Efficacy and safety of a new penile traction device in the treatment of stable phase of Peyronie’s disease: A controlled multicenter study

By: Moncada I,1 Romero J,2 Torremade J,3 Fraile A,4 Sola I,5 Martinez-
The “Scratch technique”, minimally invasive prosthesis implant and adjuvant vacuum pump therapy as a multimodal approach in the definitive treatment of patients with Peyronie disease: A multicenter preliminary experience

By: Busetto G.M.¹, Antonini G.¹, Del Giudice F.¹, De Berardinis E.¹, Perito P.²
¹Sapienza Rome University, Dept. of Urology, Rome, Italy, ²Coral Gables Hospital, Dept. of Urology, Coral Gables, United States of America

External beam radiation therapy following radical prostatectomy is the strongest risk factor for infections in penile prosthetic surgery. Results from a 397 implants monocentric series

By: Ceruti C.¹, Sibona M.¹, Preto M.¹, Bertinato R.¹, Sedigh O.², Timpano M.², Falcone M.¹, Gontero P.¹, Rolle L.¹
¹University of Turin, Dept. of Surgery, Dept. of Urology, Turin, Italy, ²AOU Città della Salute e della Scienza di Torino, Dept. of Urology, Turin, Italy

Efficacy of low-intensity shock wave therapy for the treatment of ED in diabetic patients: A pooled analysis

By: Spivak L.¹, Vinarov A.¹, Shultz-More T.², Appel B.³, Gruenwald I.³
¹Sechenov University, Dept. of Urology, Moscow, Russia, ²Medispec, Dept. of Urology, Yehud, Israel, ³Rambam Healthcare Campus, The Neurourology Unit, Haifa, Israel

Effect of linear, low-intensity extracorporeal shock wave therapy for erectile dysfunction

By: Fojecki G.¹, Tiessen S.¹, Osther P.J.²
¹Odense University Hospital, Dept. of Urology, Odense, Denmark, ²Lillebaelt Hospital, Dept. of Urology, Vejle, Denmark

The effect of transcutaneous posterior tibial nerve stimulation on premature ejaculation

By: Onen E., Nas I., Aydos M., Sambel M., Kilic M., Oner S., Demirbas M.
Bursa Yuksek Ihtisas Training and Research Hospital, Dept. of Urology, Bursa, Turkey

Effects of pan-pelvic endovascular intervention on erectile function and lower urinary tract symptoms: Results of computed tomographic angiography and 12-month clinical follow-up from the all-comer PERFECT registry

By: Wang T-D.¹, Lee W-J.², Chang Y-K.³, Liu S-P.³
<table>
<thead>
<tr>
<th>1218</th>
<th>Clinical indications for penile prosthesis implantation: Data from the national prospective registry of penile prosthesis implantation “INSIST-ED”</th>
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<tr>
<td>By: Deho F., Capogrosso P., Pescatori E., Cazzaniga W., Caraceni E., Colombo F., Bettocchi C., Antonini G., Negro C., Ciampalini S., Conti E., Dachille G., Capone M., Polito M., Salonia A., Palmieri A.</td>
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<td>Italian Society of Andrology - SIA, Dept. of Andrology, Rome, Italy</td>
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<tr>
<th>1219</th>
<th>Treatment of erectile dysfunction with hMaxi-K gene transfer: Safety report from phase IIA study</th>
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<tr>
<td>By: Arun N. 1, Abul F. 1, El Tafahany A. 1, Melman A. 2</td>
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<td>1Sabah Al Ahmad Urology Centre / Dasman Diabetes Institute, Dept. of Urology, Kuwait, Kuwait, 2Albert Einstein College of Medicine, Dept. of Urology, New York City, United States of America</td>
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<tr>
<th>1220</th>
<th>Autologous adipose tissue derived stromal vascular fraction for treatment of vasculogenic erectile dysfunction: Results of clinical trial phase I/II</th>
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<td>By: Epifanova M. 1, Chaliy M. 1, Eremin I. 2, Pulin A. 2, Nadelyaeva I. 3, Gvasaliya B. 4, Artemenko S. 1</td>
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<tr>
<td>1I. M. Sechenov First Moscow State Medical University, Dept. of Urology, Moscow, Russia, 2FSBSI, Dept. of Urology, Moscow, Russia, 3FSBI Central State Medical Academy, Dept. of Public Health, Moscow, Russia, 4FPE of RUDN University, Dept. of Clinical Urology, Moscow, Russia</td>
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<tr>
<th>1207</th>
<th>Novel nomogram predicting the probability of penile curvature improvement in patients Collagenase clostridium histolyticum (CCH-Xiapex®) using a new shortened protocol</th>
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<tr>
<td>By: Cocci A. 1, Russo G.I. 2, Cito G. 1, Capece M. 3, Falcone M. 4, Tippano M. 4, Cacciamani G. 5, Polloni G. 6, Minervini A. 1, Serni S. 1, Gacci M. 1, Carini M. 1, Giammussio B. 7, Verze P. 8, Arcaniolo D. 3, Campi R. 1, Greco I. 1, Giubilei G. 9, Blefari F. 10, Giorgi P.M. 11, Rizzo M. 12, Mondaini N. 1</td>
<td></td>
</tr>
<tr>
<td>1University of Florence, Dept. of Urology, Florence, Italy, 2University of Catania, Dept. of Urology, Catania, Italy, 3University of Naples, Dept. of Urology, Naples, Italy, 4University of Turin, Dept. of Urology, Turin, Italy, 5University of Verona, Dept. of Urology, Verona, Italy, 6Psyco-sexologist, Dept. of Psychosexology, Florence, Italy, 7University of Catani, Dept. of Urology, Catania, Italy, 8University of Naples, Dept. of Urology, Florence, Italy, 9Leonardo Da Vinci Hospital, Dept. of Urology, Empoli, Italy, 10Hospital of Prato, Dept. of Urology, Prato, Italy, 11Hospital of Lucca, Dept. of Urology, Lucca, Italy, 12Cattinara Hospital, Dept. of Urology, Trieste, Italy</td>
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**Summary**

P. Verze, Naples (IT)
How will immunotherapy change the multidisciplinary management of urothelial bladder cancer?

ESU Course 52

Monday 19 March
15:30 - 17:30

Location: Orange Area, Room 3 (Level 0)

Chairs: A. Necchi, Milan (IT)
J. Bedke, Tübingen (DE)

Aims and objectives of this session

Early results from immunotherapy trials in the salvage setting of advanced/metastatic urothelial bladder cancer (UBC) paved the way of a revolutionary road in the treatment of this disease.

Atezolizumab, an anti-programmed cell death ligand-1 (PD-L1) antibody, was recently granted conditional approval by the U.S. Food and Drug Administration (FDA) for the treatment of advanced or metastatic UBC after platinum chemotherapy (IMvigor 210 study).

Pembrolizumab, an anti-PD-1 antibody, has just demonstrated, for the first time in this disease, overall survival advantage compared to active therapy in a phase 3, multicenter, randomized trial (Keynote-045 study) of salvage therapy.

Other immune checkpoint inhibitors have been positively investigated, and a myriad of clinical trials are being developed in UBC worldwide in different clinical settings, including the non-muscle invasive disease.

Consequently, urologists are asked to understand the background of immunotherapy in UBC, the achievable results and side effects, and to know which are the ongoing and future therapeutic options for their patients, provided either inside or outside of clinical trials.

In brief, the aims will be the following:

• To provide urologists with the state-of-the art with the use of immune-checkpoint inhibitors in UBC.
• To provide urologists with the next clinical trials in the setting of non-muscle invasive and muscle invasive metastatic disease, and in the perioperative setting (before or after surgery).
• To provide an overview of the immunological background of the mode of action of checkpoint inhibitors in bladder carcinoma.
• To discuss the optimal clinical management of patients receiving immune checkpoint inhibitor treatment, including side effects.

State of the art of immune checkpoint inhibitors in urothelial bladder cancer – Advanced disease
A. Necchi, Milan (IT)

State of the art of immune checkpoint inhibitors in urothelial bladder cancer – Early stages
J. Bedke, Tübingen (DE)

Ongoing clinicals trials in the EU and future developments
J. Bedke, Tübingen (DE)
A. Necchi, Milan (IT)
Scientific Programme - EAU18 Copenhagen

| Case discussion 1: When should we consider immune-checkpoint inhibitors in UBC treatment |
| J. Bedke, Tübingen (DE) |
| A. Necchi, Milan (IT) |

| Case discussion 2: How to manage treatment with immune-checkpoint inhibitors in UBC |
| J. Bedke, Tübingen (DE) |
| A. Necchi, Milan (IT) |
Aims and objectives of this session
The Endoscopic Stone Treatment (EST) training curriculum has the goal to provide the clinician with proficiency skills in the treatment of urinary stones with endoscopic techniques. This protocol has been designed following a very strict process, in order to mitigate the risks of complications related to the learning curve process. Moving along the different tasks 336 Programme Book EAU Education and training steps, the participant will learn how to use the different instruments and technologies that can be functional to stone fragmentation and extraction.

The EST s1 (Endoscopic Stone Treatment step 1) is the first step of this training and assessment curriculum. To aid in the training of these skills and to prepare for this ESTs1 exam, the exercises to be performed can be found in the instructional videos at uroweb.org.
Stones
Plenary Session 7

Tuesday 20 March
08:00 - 13:30

Location: Green Area, eURO Auditorium (Level 0)
Chairs: T. Knoll, Sindelfingen (DE)
        A. Stenzl, Tübingen (DE)

Aims and objectives of this session
Stones belong to the most common diseases, comparable with diabetes or hypertension. Management of urolithiasis is therefore daily business of most urologist. This plenary will cover important aspects and developments in pathogenesis, diagnosis, interventional treatment and prevention of urinary stones.

08:00 - 08:20
Bone metabolism and stones
J.P. Haymann, Paris (FR)

08:20 - 08:55
Case-based debate How can we evaluate and treat the high-risk stone former?
Moderator: K. Sarica, Istanbul (TR)

08:30 - 08:35
Case presentation
K. Sarica, Istanbul (TR)

08:35 - 08:42
Based on 24 hours urine collection
G. Gambaro, Rome (IT)

08:42 - 08:49
Empiric prevention is more than sufficient
T. Bach, Hamburg (DE)

08:49 - 08:55
Discussion

08:55 - 09:10
Urological Association of Asia (UAA) lecture Experience with 'mega stones' treatment
J. Matsuzaki, Yokohama city (JP)

09:10 - 09:35
Debate Single-use flexible Ureteroscopy (URS): Ready to become standard?
Moderator: K.M. Anson, London (GB)

09:10 - 09:20
Yes
A. Neisius, Trier (DE)

09:20 - 09:30
No
S. Doizi, Paris (FR)

09:30 - 09:35
Discussion
<table>
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<th>Time</th>
<th>Event</th>
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<tr>
<td>09:35 - 10:20</td>
<td><strong>Case-based panel discussion</strong> Nightmares in ureteroscopy and percutaneous nephrolithotomy</td>
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<td><strong>Case presenter</strong></td>
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<td>O. Wiseman, London (GB)</td>
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<td><strong>Discussant</strong></td>
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<td>M. Brehmer, Stockholm (SE)</td>
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<td><strong>Discussant</strong></td>
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<td>P. Krombach, Luxembourg (LU)</td>
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<td><strong>Discussant</strong></td>
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<td>S. Proietti, Milan (IT)</td>
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<td><strong>Discussant</strong></td>
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<td>A. Skolarikos, Athens (GR)</td>
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<td><strong>Discussant</strong></td>
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<td>M. Sofer, Tel-Aviv (IL)</td>
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<td><strong>Discussant</strong></td>
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<td>G. Zeng, Guangzhou (CN)</td>
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<td>10:20 - 10:35</td>
<td><strong>Extracorporeal Shock Wave Lithotripsy (ESWL): The final knockout by Retrograde Intrarenal Surgery (RIRS)?</strong> T.R.W. Herrmann, Hanover (DE)</td>
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<td>10:35 - 11:00</td>
<td><strong>Debate</strong> Did patients benefit from miniaturisation of Percutaneous Nephrolithotomy (PNL)?</td>
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<td><em>Moderator:</em> M. Monga, Cleveland (US)</td>
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<tr>
<td>10:35 - 10:45</td>
<td><strong>No</strong></td>
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<td>E. Liatsikos, Patras (GR)</td>
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<td>10:45 - 10:55</td>
<td><strong>Yes</strong></td>
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<td>A. Hoznek, Creteil (FR)</td>
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<tr>
<td>10:55 - 11:00</td>
<td><strong>Discussion</strong></td>
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<tr>
<td>11:00 - 11:15</td>
<td><strong>What are the differences between the American Urological Association (AUA) and European Association of Urology (EAU) guidelines, and why?</strong></td>
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<td>C. Türk, Vienna (AT)</td>
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<td>11:15 - 11:30</td>
<td><strong>Stone treatment: What do we need for the future?</strong></td>
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<td>P.J.S. Osther, Fredericia (DK)</td>
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<td>11:30 - 13:30</td>
<td><strong>Souvenir Sessions</strong> By the EAU Scientific Committee</td>
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<tr>
<td>11:30 - 11:40</td>
<td><strong>Benign prostatic disease</strong></td>
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<td>J-N.L. Cornu, Rouen (FR)</td>
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<td>Time</td>
<td>Session</td>
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<tr>
<td>11:40 - 11:50</td>
<td><strong>Urolithiasis and endourology</strong></td>
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<tr>
<td>11:50 - 12:00</td>
<td><strong>Renal cancer and transplantation</strong></td>
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<tr>
<td>12:00 - 12:10</td>
<td><strong>Prostate cancer: Early detection and screening</strong></td>
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<tr>
<td>12:10 - 12:20</td>
<td><strong>Prostate cancer: Localised and advanced disease</strong></td>
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<tr>
<td>12:20 - 12:30</td>
<td><strong>Systemic therapy in Genitourinary (GU) cancer</strong></td>
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<tr>
<td>12:30 - 12:40</td>
<td><strong>Urothelial cancer</strong></td>
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<td>12:40 - 12:50</td>
<td><strong>Functional urology</strong></td>
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<td>12:50 - 13:00</td>
<td><strong>Imaging in urology</strong></td>
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<tr>
<td>13:00 - 13:10</td>
<td><strong>Basic science</strong></td>
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<td>13:10 - 13:20</td>
<td><strong>Paediatric urology and rare diseases</strong></td>
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<tr>
<td>13:20 - 13:30</td>
<td><strong>Andrology</strong></td>
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