Welcome and introduction

**Friday 17 July**
**08:20 - 08:30**

**Location:** Virtual room 2

**08:20 - 08:30**  
**Welcome to the EAU20 Virtual Congress**  
C.R. Chapple, Sheffield (GB)
# Game changing session 1

**Game changing session**

**Friday 17 July**  
**08:30 - 09:10**

<table>
<thead>
<tr>
<th>Time</th>
<th>Event</th>
<th>Location</th>
<th>Chairs:</th>
</tr>
</thead>
</table>
| 08:30 - 08:50 | Continence following robot-assisted (R-LRPE) and conventional laparoscopic radical prostatectomy (LRPE) – results of a prospective, randomized, multicenter, patient blinded study  
*Speaker:* J-U. Stolzenburg, Leipzig (DE)  
*Discussant:* To be confirmed | Virtual room 1          | A. Briganti, Milan (IT)  
M. Wirth, Dresden (DE) |
| 08:45 - 08:50 | Discussion, questions and answers  
A. Briganti, Milan (IT)  
M. Wirth, Dresden (DE) | Virtual room 1          | A. Briganti, Milan (IT)  
M. Wirth, Dresden (DE) |
| 08:50 - 09:10 | ProPSMA Study: A prospective randomised multi-centre study of PSMA-PET/CT imaging for staging high risk prostate cancer prior to curative-intent surgery or radiotherapy  
*Speaker:* M. Hofman, Melbourne (AU)  
*Discussant:* M. Heck, Munich (DE) | Virtual room 1          | A. Briganti, Milan (IT)  
M. Wirth, Dresden (DE) |
| 09:05 - 09:10 | Discussion, questions and answers  
A. Briganti, Milan (IT)  
M. Wirth, Dresden (DE) | Virtual room 1          | A. Briganti, Milan (IT)  
M. Wirth, Dresden (DE) |
Modern prostate cancer imaging in daily practice
Plenary session 01

Location: Virtual room 2
Chairs: J. Walz, Marseille (FR)
H.P.A.M. Van Poppel, Leuven (BE)

Learning objectives of this session
Imaging of prostate cancer is a rapidly changing field with many new technologies being established in the last few years. Actually true paradigm shifts were observed as image guided diagnosis of prostate cancer became a standard of care at last year’s EAU meeting. However, these new clinical pathways generate also problems and fields of uncertainty such as how to put them into context with modern biomarkers, how to apply these new pathways in the community setting, and how to make clinical benefit out of modern molecular imaging? This session addresses the most pertinent problems and issue encountered with modern imaging and gives answers how those might be overcome.

09:10 - 09:20
Ultrasound in prostate cancer imaging: Dead or ready to get started?
C.K. Mannaerts, Amsterdam (NL)

09:20 - 10:10
Prostate biopsies

09:20 - 09:30
Imaging as triage
H.U. Ahmed, London (GB)

09:30 - 09:40
What might genomics add to the decision?
G. Jenster, Rotterdam (NL)

09:40 - 09:50
MRI in the expert center vs. MRI in the community center
C. Kastner, Cambridge (GB)

09:50 - 10:00
Risk stratification of prostate cancer based on targeted biopsies
B.A. Hadaschik, Essen (DE)

10:00 - 10:10
What should you do with men you do not biopsy, or whose biopsy is negative?
A. Lamb, Oxford (GB)

10:10 - 10:20
Screening strategy and active surveillance in 2020
C.H. Bangma, Rotterdam (NL)

10:20 - 10:45
Biochemical recurrence I

10:20 - 10:25
Biochemical recurrence after radical prostatectomy
A. Herlemann, Munich (DE)

10:25 - 10:35
Let's ask for imaging
B. Tombal, Brussels (BE)

10:35 - 10:45
Let's start with early treatment
To be confirmed

10:45 - 11:20
Biochemical recurrence II

10:45 - 10:52
The biochemical recurrence patient
L. Moris, Leuven (BE)
<table>
<thead>
<tr>
<th>Time</th>
<th>Session</th>
<th>Presenters</th>
</tr>
</thead>
<tbody>
<tr>
<td>10:52 - 10:59</td>
<td>Systemic treatment</td>
<td>G. Ploussard, Toulouse (FR)</td>
</tr>
<tr>
<td>10:59 - 11:06</td>
<td>Metastasis-directed therapy with radiotherapy</td>
<td>P. Ost, Ghent (BE)</td>
</tr>
<tr>
<td>11:06 - 11:13</td>
<td>Metastases-directed therapy with surgery</td>
<td>T. Maurer, Hamburg (DE)</td>
</tr>
<tr>
<td>11:13 - 11:20</td>
<td>Summary from the EAU Prostate Cancer Guidelines Panel</td>
<td>N. Mottet, Saint-Étienne (FR)</td>
</tr>
<tr>
<td>11:20 - 11:30</td>
<td>A peek into the future: Artificial intelligence and prostate cancer imaging</td>
<td>O. Rouvière, Lyon (FR)</td>
</tr>
<tr>
<td>11:30 - 11:40</td>
<td>Discussion, questions and answers</td>
<td>J. Walz, Marseille (FR)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>H.P.A.M. Van Poppel, Leuven (BE)</td>
</tr>
</tbody>
</table>
**Focal therapy for prostate cancer: Mid-term oncological outcomes and salvage radical prostatectomy**

**Thematic session 01**

**Friday 17 July**
11:40 - 13:00

**Location:** Virtual room 1

**Chairs:** C.H. Bangma, Rotterdam (NL)  
A. Villers, Lille (FR)

Learning objectives of this session
This session on focal therapy for intermediate-risk prostate cancer addresses the oncological outcomes with at least 3 years of followup. Various energies will be reported and discussed with the panel. In case of focal therapy failure, salvage radical prostatectomy is a treatment option. However, it may be technically challenging, and pathology may show adverse features. The session participants will be able to make a decision when and how to advise the individual patient with intermediate risk cancer considering focal therapy and what to expect in case of salvage radical prostatectomy.

11:40 - 11:45
**Introduction to focal therapy**

A. Villers, Lille (FR)

11:45 - 12:25
**Midterm oncological results of focal therapy**

11:45 - 11:50
**IRE focal ablation**

P.D. Stricker, Sydney (AU)

11:50 - 11:55
**HIFU focal ablation**

C. Orczyk, London (GB)

11:55 - 12:00
**HIFU hemi-ablation**

J. Olivier, Lille (FR)

12:00 - 12:05
**Cryotherapy focal ablation**

H.U. Ahmed, London (GB)

12:05 - 12:25
**VTP TOOKAD**

A. Borkowetz, Dresden (DE)

12:10 - 12:25
**Panel discussion**

12:25 - 12:45
**Outcomes of salvage radical prostatectomy after focal therapy**

12:25 - 12:35
**Good functional and pathological results**

S. Crouzet, Lyon (FR)

12:35 - 12:45
**Disappointing functional and pathological results**

P. Sooriakumaran, London (GB)

12:45 - 13:00
**Discussion, questions and answers**

C.H. Bangma, Rotterdam (NL)  
A. Villers, Lille (FR)
## New frontiers in infections

**Plenary Session 02**

**Friday 17 July**

**13:00 - 14:30**

**Location:** Virtual room 2  
**Chairs:** J.P.F.A. Heesakkers, Nijmegen (NL)  
F.M.E. Wagenlehner, Giessen (DE)

### Learning objectives of this session

Urological infections become more and more difficult to treat, due to the fact that on the one hand antimicrobial resistance and multiresistance emerge dramatically in causative pathogens on a global level and antibiotics are increasingly restricted. On the other hand urological patients do have more and more accompanying morbidities. This session deals with the most important and recent aspects and strategies that deal with the challenges of antimicrobial resistance, from prevention and prophylaxis to treatment of life threatening infections.

<table>
<thead>
<tr>
<th>Time</th>
<th>Event</th>
<th>Presenter</th>
<th>Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>13:00 - 13:15</td>
<td><strong>View on the Coronavirus crisis from an European perspective</strong></td>
<td>To be confirmed</td>
<td></td>
</tr>
<tr>
<td>13:15 - 13:30</td>
<td><strong>New diagnostic techniques to overcome antibiotic resistance</strong></td>
<td>To be confirmed</td>
<td></td>
</tr>
<tr>
<td>13:30 - 13:50</td>
<td><strong>How to minimise infectious complications of prostate biopsies: A white paper</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13:30 - 13:35</td>
<td><strong>Case presentation</strong></td>
<td>To be confirmed</td>
<td></td>
</tr>
<tr>
<td>13:35 - 13:50</td>
<td><strong>State-of-the-art lecture</strong></td>
<td>A. Pilatz, Giessen (DE)</td>
<td></td>
</tr>
<tr>
<td>13:50 - 14:05</td>
<td><strong>Urosepsis: Hot data from the SERPENS study</strong></td>
<td>Z. Tandoğdu, London (GB)</td>
<td></td>
</tr>
<tr>
<td>14:05 - 14:25</td>
<td><strong>Infection control practices in patients at risk for multiresistant pathogens</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>14:05 - 14:15</td>
<td><strong>Pro isolation</strong></td>
<td>S.J. Harbarth, Genève (CH)</td>
<td></td>
</tr>
<tr>
<td>14:15 - 14:25</td>
<td><strong>Against isolation</strong></td>
<td>G. Bonkat, Basel (CH)</td>
<td></td>
</tr>
</tbody>
</table>
| 14:25 - 14:30 | **Discussion, questions and answers**  | J.P.F.A. Heesakkers, Nijmegen (NL)  
F.M.E. Wagenlehner, Giessen (DE) |                           |
Men's health 2020
Thematic session 02

Friday 17 July
15:30 - 17:00

Location: Virtual room 2
Chairs: C. Gratzke, Freiburg (DE)
J.O.R. Sønksen, Herlev (DK)

Learning objectives of this session
In this thematic session, we will highlight the role of the urologist as the gatekeeper for men’s health. Indeed, many symptom complexes (such as LUTS and ED) that we face as urologists are sentinels of systemic and potentially life-threatening diseases. Also men with infertility have been identified as having a poorer general health status compared to their fertile counterparts. In the first part of this session, top-level speakers will highlight how to recognize and deal with these underlying comorbidities in our patients. The second part of the session will focus on maximally maintaining quality of life in its most diverse facets when dealing with a man with prostatic disease, in which the urologist again bears the responsibility to serve as a gatekeeper of men’s health and quality of life.

15:30 - 16:00
The urologist as a gatekeeper for men’s health

15:30 - 15:40
LUTS
M. Gacci, Florence (IT)

15:40 - 15:50
Erectile dysfunction
A. Parnham, Manchester (GB)

15:50 - 16:00
Male infertility
L. Boeri, Milan (IT)

16:00 - 16:55
Case-based debate Preservation of quality of life in prostatic disease

16:00 - 16:05
Case presentation
A. Mattigk, Ulm (DE)

16:05 - 16:15
Alpha blockers and 5-ARI: Effects on libido and ejaculation
G.I. Russo, Catania (IT)

16:15 - 16:25
Daily PDE5 inhibitors
M. Oelke, Gronau (DE)

16:25 - 16:35
TRT will ameliorate all his symptoms
G. Corona, Bologna (IT)

16:35 - 16:45
Ejaculation preserving surgical options: Pro
L. De Kort, Utrecht (NL)

16:45 - 16:55
Ejaculation preserving surgical options: Con
T. Hermanns, Zürich (CH)

16:55 - 17:00
Discussion, questions and answers
C. Gratzke, Freiburg (DE)
J.O.R. Sønksen, Herlev (DK)
# Management of patients with CRPC in 2020

**Thematic session 03**

**Friday 17 July**

**17:00 - 18:30**

**Location:** Virtual room 1

**Chairs:** M. De Santis, Berlin (DE)  
M. Wirth, Dresden (DE)

## Learning objectives of this session

This session will review the current challenges in the management of castration resistant prostate cancer in view of novel imaging, novel therapeutics, earlier use of anticancer drugs, molecular markers and pathology. A focus will be prediction of response and sequencing of treatment options. Case based discussions will exemplify the challenges in 2020 for daily practice.

<table>
<thead>
<tr>
<th>Time</th>
<th>Session</th>
</tr>
</thead>
</table>
| 17:00 - 17:15 | **CRPC: Prediction of response to systemic treatment**  
L. Horvath, Sydney (AU) |
| 17:15 - 17:30 | **Imaging of CRPC - what is possible, what is necessary?**  
W.L. Loidl, Linz (AT) |
| 17:30 - 17:45 | **Molecular pathology before systemic treatment - what is feasible?**  
S. Perner, Luebeck (DE) |
| 17:45 - 18:10 | **Case-based debate**  
**M0 CRPC: Androgen Receptor Targeted Treatment (ARTA)** |
| 17:45 - 17:50 | **Case presentation**  
G. Gandaglia, Milan (IT) |
| 17:50 - 18:00 | **Yes**  
A. Morgans, Chicago (US) |
| 18:00 - 18:10 | **No**  
J. Bedke, Tübingen (DE) |
| 18:10 - 18:20 | **The best sequence for M+ CRPC in 2020**  
To be confirmed |
| 18:20 - 18:30 | **Discussion, questions and answers**  
M. De Santis, Berlin (DE)  
M. Wirth, Dresden (DE) |
Radioligand therapy in metastatic castration-resistant prostate cancer

Location: Virtual room 2

Chairs: A. Briganti, Milan (IT)
        M. Heck, Munich (DE)
        D. Murphy, Melbourne (AU)

Learning objectives of this session
Prostate-specific membrane antigen (PSMA) offers great potential not only as a target for diagnostic but also for therapeutic purposes. The present session highlights the application of PSMA-targeted radioligand therapy in metastatic castration-resistant prostate cancer. Indication, limitations and future developments will be discussed.

<table>
<thead>
<tr>
<th>Time</th>
<th>Session Title</th>
<th>Speaker</th>
<th>Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>18:30 - 18:45</td>
<td>Current and future radioligands (ligands and emitters)</td>
<td>M. Gauthé, Paris (FR)</td>
<td></td>
</tr>
<tr>
<td>18:45 - 19:00</td>
<td>Limitations of PSMA based on prostate cancer biology</td>
<td>P. Rescigno, London (GB)</td>
<td></td>
</tr>
<tr>
<td>19:00 - 19:15</td>
<td>Critical assessment of radioligand therapy</td>
<td>T. Steuber, Hamburg (DE)</td>
<td></td>
</tr>
<tr>
<td>19:15 - 19:50</td>
<td>Case-based debate (PSMA)-targeted radioligand therapy: For which patients, which stages?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>19:15 - 19:20</td>
<td>Case presentation</td>
<td>I. Tsaur, Mainz (DE)</td>
<td></td>
</tr>
<tr>
<td>19:20 - 19:30</td>
<td>Treatment options: Medical oncologist</td>
<td>U. Vogl, Bellinzona (CH)</td>
<td></td>
</tr>
<tr>
<td>19:30 - 19:40</td>
<td>Treatment options: Nuclear medicine</td>
<td>M. Eiber, Munich (DE)</td>
<td></td>
</tr>
<tr>
<td>19:40 - 19:50</td>
<td>Radioligand therapy for less advanced cases: Urologist</td>
<td>A. Heidenreich, Cologne (DE)</td>
<td></td>
</tr>
<tr>
<td>19:50 - 20:00</td>
<td>Discussion, questions and answers</td>
<td>A. Briganti, Milan (IT)</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>D. Murphy, Melbourne (AU)</td>
<td></td>
</tr>
<tr>
<td>19:50 - 20:00</td>
<td></td>
<td>M. Heck, Munich (DE)</td>
<td></td>
</tr>
<tr>
<td>Time</td>
<td>Session Title</td>
<td>Speaker</td>
<td>Discussant</td>
</tr>
<tr>
<td>-----------</td>
<td>-------------------------------------------------------------------------------</td>
<td>------------------------------</td>
<td>------------------</td>
</tr>
<tr>
<td>08:30 - 08:45</td>
<td>Recurrence risk in patients with High Grade Non-Muscle Invasive Bladder Carcinoma in the Randomised Phase III Clinical Trial ‘NIMBUS’ stratified for EORTC and CUETO risk categories. A contemporary trend to less recurrences?</td>
<td>M-O. Grimm, Jena (DE)</td>
<td>P. Black, Vancouver (CA)</td>
</tr>
<tr>
<td>08:45 - 09:00</td>
<td>Results from the phase III study of nadofaregene firadenovec: Safety and efficacy in patients (pts) with high-grade, BCG-unresponsive Non-Muscle Invasive Bladder Cancer (NMIBC)</td>
<td>N. Shore, Myrtle Beach (US)</td>
<td>J.A. Witjes, Nijmegen (NL)</td>
</tr>
<tr>
<td>09:00 - 09:05</td>
<td>Discussion, questions and answers</td>
<td>J. Palou, Barcelona (ES)</td>
<td>K. Tikkinen, Helsinki (FI)</td>
</tr>
</tbody>
</table>
### Challenges across the spectrum of bladder cancer

**Plenary session 03**

**Location:** Virtual room 2  
**Chairs:** To be confirmed  
M. Rouprêt, Paris (FR)  
A. Stenzl, Tübingen (DE)

**Learning objectives of this session**
Clinical decision making for non muscle-invasive bladder cancer and new tools for adjuvant treatment for these tumours take a large part of this session. Furthermore an optimisation in the selection of elderly patients with advanced bladder cancer for surgical vs. conservative treatment will be presented. One part of the session deals with personalised treatment and its underlying genetic testing in bladder cancer.

<table>
<thead>
<tr>
<th>Time</th>
<th>Presentation</th>
</tr>
</thead>
</table>
| 09:05 - 09:15 | Definition of very high-risk and refractory NMIBC  
M. Babjuk, Prague (CZ) |
| 09:15 - 09:45 | Early cystectomy in high-risk NMIBC: A standard? |
| 09:15 - 09:25 | Pro  
S. Shariat, Vienna (AT) |
| 09:25 - 09:35 | Con  
J. Palou, Barcelona (ES) |
| 09:35 - 09:45 | Discussion |
| 09:45 - 10:00 | Immunotherapy and beyond: New options for NMIBC  
P. Black, Vancouver (CA) |
| 10:00 - 10:15 | Urinary markers in low-grade NMIBC: Ready to stop cystoscopies?  
J.A. Witjes, Nijmegen (NL) |
| 10:15 - 10:30 | Frailty and cognitive assessment in patients diagnosed with MIBC  
G. Pignot, Marseille (FR) |
| 10:30 - 10:45 | Treatment options for elderly patients with muscle-invasive bladder cancer  
M.J. Ribal Caparros, Barcelona (ES) |
| 10:45 - 11:00 | Different bladder cancer genotypes: New treatment options  
R. Seiler, Bern (CH) |
| 11:00 - 11:15 | The future of personalised treatment: Test the tumour for a response  
M. Shen, New York (US) |
| 11:15 - 11:25 | Discussion, questions and answers  
To be confirmed  
M. Rouprêt, Paris (FR)  
A. Stenzl, Tübingen (DE) |
Five things I wish I would have known earlier in my career: Lessons from the mentors
Thematic session 05

Location: Virtual room 1
Chairs: F. Montorsi, Milan (IT)
J. Palou, Barcelona (ES)

Learning objectives of this session
During a long and successful career, many decisions that are taken on the basis of the evidence available at that specific time have subsequently proven incorrect.

Three recognised Mentors in Urology: Peter Carroll for Prostate Cancer, Inderbir Gill for Kidney Cancer and Mark Soloway for Bladder Cancer will scrutinize their own extraordinary personal experience achieved over many years to identify the mistakes done, how they were able to manage them and how they subsequently changed their practice.

At the end of each talk, another top expert in the same field will summarize for the audience what the contemporary guidelines are saying about the management of that disease.

Delegates will learn from the outstanding experience of these giants in urology and their counterparts. Learning from mistakes is a phenomenally important part of the professional growth of each urologist.

11:25 - 11:55 Bladder cancer
11:25 - 11:45 Speaker
M.S. Soloway, Miami (US)
11:45 - 11:55 Discussant
J.W.F. Catto, Sheffield (GB)

11:55 - 12:25 Kidney cancer
11:55 - 12:15 Speaker
To be confirmed
12:15 - 12:25 Discussant
C.K. Bensalah, Rennes (FR)

12:25 - 12:55 Prostate cancer
12:25 - 12:45 Speaker
To be confirmed
12:45 - 12:55 Discussant
A. Briganti, Milan (IT)

12:55 - 13:00 Discussion, questions and answers
F. Montorsi, Milan (IT)
J. Palou, Barcelona (ES)
# Game changing session 3

**Location:** Virtual room 2  
**Chairs:** C.R. Chapple, Sheffield (GB)  
H.P.A.M. Van Poppel, Leuven (BE)

<table>
<thead>
<tr>
<th>Time</th>
<th>Title</th>
<th>Speaker</th>
<th>Discussant</th>
</tr>
</thead>
</table>
**Bladder dysfunction, storage symptoms and benign prostatic disease**

Plenary session 04

**Saturday 18 July**

<table>
<thead>
<tr>
<th>Time</th>
<th>Session Title</th>
<th>Speaker</th>
<th>Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>13:20 - 13:30</td>
<td><strong>Basic neurological workup in a male LUTS patient: Keypoints for daily clinical practice</strong></td>
<td>L. Campeau, Montreal (CA)</td>
<td>Virtual room 1</td>
</tr>
<tr>
<td>13:30 - 13:55</td>
<td><strong>Non-neurogenic OAB in a 60yr man with 60g prostate: First-line medical prescription</strong></td>
<td>C. De Nunzio, Rome (IT)</td>
<td></td>
</tr>
<tr>
<td>13:30 - 13:35</td>
<td>Choose anticholinergics</td>
<td>C. De Nunzio, Rome (IT)</td>
<td></td>
</tr>
<tr>
<td>13:35 - 13:40</td>
<td>Choose a Beta-3 agonist</td>
<td>J-N.L. Cornu, Rouen (FR)</td>
<td></td>
</tr>
<tr>
<td>13:40 - 13:45</td>
<td>Choose alpha blockers</td>
<td>S.A. Arlandis, Valencia (ES)</td>
<td></td>
</tr>
<tr>
<td>13:45 - 13:50</td>
<td><strong>Role of combination therapy</strong></td>
<td>S. Madersbacher, Vienna (AT)</td>
<td></td>
</tr>
<tr>
<td>13:50 - 13:55</td>
<td><strong>C. Gratzke, Freiburg (DE)</strong></td>
<td>C. Gratzke, Freiburg (DE)</td>
<td></td>
</tr>
<tr>
<td>13:55 - 14:20</td>
<td><strong>Non-neurogenic OAB and proven obstruction, drugs don't work</strong></td>
<td>M. Speakman, Taunton (GB)</td>
<td></td>
</tr>
<tr>
<td>13:55 - 14:00</td>
<td><strong>Preference for resection</strong></td>
<td>M. Speakman, Taunton (GB)</td>
<td></td>
</tr>
<tr>
<td>14:00 - 14:05</td>
<td><strong>Preference for vaporisation</strong></td>
<td>M. Gacci, Florence (IT)</td>
<td></td>
</tr>
<tr>
<td>14:05 - 14:10</td>
<td><strong>Preference for enucleation</strong></td>
<td>T.R.W. Herrmann, Frauenfeld (CH)</td>
<td></td>
</tr>
<tr>
<td>14:10 - 14:15</td>
<td><strong>Preference for aquablation</strong></td>
<td>A. Miernik, Freiburg (DE)</td>
<td></td>
</tr>
<tr>
<td>14:15 - 14:20</td>
<td><strong>Questions and answers</strong></td>
<td>J-N.L. Cornu, Rouen (FR)</td>
<td></td>
</tr>
<tr>
<td>Time</td>
<td>Session</td>
<td></td>
<td></td>
</tr>
<tr>
<td>------------</td>
<td>-----------------------------------------------------------</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
| 14:20 - 14:30 | **Persistence of OAB symptoms after prostate surgery, despite good de-obstruction**  
M. Rieken, Vienna (AT) |
| 14:30 - 15:00 | **Minimally-invasive options for day case surgery** |
| 14:30 - 14:35 | **Urolift**  
N. Barber, Camberley (GB) |
| 14:35 - 14:40 | **TIND**  
F. Porpiglia, Turin (IT) |
| 14:40 - 14:45 | **Rezum therapy**  
To be confirmed |
| 14:45 - 14:50 | **Day case Greenlight laser vaporisation**  
B. Pradere, Toulouse (FR) |
| 14:50 - 14:55 | **Prostate embolisation**  
D. Abt, St. Gallen (CH) |
| 14:55 - 15:00 | **Questions and answers**  
J-N.L. Cornu, Rouen (FR)  
C. Gratzke, Freiburg (DE) |
# Urinary reconstruction in (neuro)urology

## Thematic session 06

### Saturday 18 July

**16:00 - 16:30**

**Location:** Virtual room 1

**Chairs:**
- C.R. Chapple, Sheffield (GB)
- J.P.F.A. Heesakkers, Nijmegen (NL)

**Learning objectives of this session**

After the introduction of botulinum toxin A in the armamentarium of neurogenic bladder dysfunction, other more complex treatment options have been very much ignored. However, botulinum toxin does not work in every case. Advances in sacral neuromodulation have occurred and may prove useful for neurogenic patients. Urinary diversion may be a realistic option in complex cases, and urologists need to familiarize themselves with other neurological problems in addition to MS or SCI. Parkinson’s disease is a good example of a disease with multiple urological problems that urologists should be aware of.

<table>
<thead>
<tr>
<th>Time</th>
<th>Event</th>
</tr>
</thead>
<tbody>
<tr>
<td>16:00 - 16:30</td>
<td><strong>Debate</strong> What happens if Botox does not work in MS anymore?</td>
</tr>
<tr>
<td>16:05 - 16:15</td>
<td><strong>Go for surgery</strong></td>
</tr>
<tr>
<td></td>
<td>To be confirmed</td>
</tr>
<tr>
<td>16:15 - 16:25</td>
<td><strong>Stay conservative</strong></td>
</tr>
<tr>
<td></td>
<td>G. Del Popolo, Florence (IT)</td>
</tr>
<tr>
<td>16:25 - 16:30</td>
<td><strong>Discussion, questions and answers</strong></td>
</tr>
<tr>
<td></td>
<td>C.R. Chapple, Sheffield (GB)</td>
</tr>
<tr>
<td></td>
<td>J.P.F.A. Heesakkers, Nijmegen (NL)</td>
</tr>
<tr>
<td>16:00 - 16:05</td>
<td><strong>Case presentation</strong></td>
</tr>
<tr>
<td></td>
<td>M. Tutolo, Milan (IT)</td>
</tr>
<tr>
<td>Time</td>
<td>Subject</td>
</tr>
<tr>
<td>------------</td>
<td>--------------------------------</td>
</tr>
<tr>
<td>16:30 - 16:40</td>
<td>3rd prize - non-oncology</td>
</tr>
<tr>
<td>16:30 - 16:35</td>
<td>Presenter</td>
</tr>
<tr>
<td>16:35 - 16:40</td>
<td>Discussant</td>
</tr>
<tr>
<td>16:40 - 16:50</td>
<td>2nd prize - non-oncology</td>
</tr>
<tr>
<td>16:45 - 16:50</td>
<td>Discussant</td>
</tr>
<tr>
<td>16:40 - 16:45</td>
<td>Presenter</td>
</tr>
<tr>
<td>16:50 - 17:00</td>
<td>1st prize - non-oncology</td>
</tr>
<tr>
<td>16:50 - 16:55</td>
<td>Presenter</td>
</tr>
<tr>
<td>16:55 - 17:00</td>
<td>Discussant</td>
</tr>
</tbody>
</table>
Immunotherapy and beyond
Thematic session 07

Saturday 18 July
17:00 - 18:10

Location: Virtual room 1
Chairs: S. Gillessen Sommer, Bellinzona (CH)
R.J. Van Soest, Rotterdam (NL)

Learning objectives of this session
This session will provide an overview of the current challenges and obstacles in the treatment of urothelial cancer and renal cell carcinoma in view of recently approved agents and combinations including immunotherapy, targeted agents and combinations.

17:10 - 17:20
Chemotherapy remains standard of care
G. Niegisch, Düsseldorf (DE)

17:00 - 17:20
Perioperative therapy for urothelial cancer

17:00 - 17:10
PD-1/PD-L1 Inhibitors are replacing perioperative chemotherapy
J.L. Boormans, Rotterdam (NL)

17:20 - 17:30
Should we sequence all urothelial cancer patients?
S. Shariat, Vienna (AT)

17:40 - 17:50
IO + IO
M. Schmidinger, Vienna (AT)

17:30 - 17:40
IO + TKI
A.S. Merseburger, Lübeck (DE)

17:30 - 17:50
Immunotherapy combinations for intermediate-poor risk mRCC

17:50 - 18:00
Novel urothelial cancer treatment beyond PD-1/PD-L1 inhibition
Y. Loriot, Villejuif (FR)

18:00 - 18:10
Discussion, questions and answers
S. Gillessen Sommer, Bellinzona (CH)
R.J. Van Soest, Rotterdam (NL)
Salvage LND prostate cancer
Thematic session 08

Saturday 18 July
18:10 - 19:40

Location: Virtual room 2
Chairs: C.H. Bangma, Rotterdam (NL)
        F. Montorsi, Milan (IT)

Learning objectives of this session
Here we review the biology and treatment for advanced local and distant metastatic prostate cancer. We consider treatment options and discuss which is better and for whom.

18:10 - 18:25
Does early diagnosis help the patient?
A. Briganti, Milan (IT)

18:25 - 19:00
Primary treatment of pelvic lymph node metastatic prostate cancer

18:25 - 18:35
Surgery only
K. Touijer, New York (US)

18:35 - 18:45
Radiation only
N. Van As, London (GB)

18:45 - 18:55
Systemic only
R.J.A. Van Moorselaar, Amsterdam (NL)

18:55 - 19:00
Discussion, questions and answers
C.H. Bangma, Rotterdam (NL)
F. Montorsi, Milan (IT)

19:00 - 19:25
Treatment of recurrent lymph node metastatic PCa

19:00 - 19:10
Surgery is the best option
S. Joniau, Leuven (BE)

19:10 - 19:20
Radiation is the best option
P. Ost, Ghent (BE)

19:20 - 19:25
Discussion, questions and answers
C.H. Bangma, Rotterdam (NL)
F. Montorsi, Milan (IT)

19:25 - 19:40
Treatment of polymetastatic hormone sensitive prostate cancer
C. Sweeney, Boston (US)
## Best abstract session: Oncology

**Poster Session**

<table>
<thead>
<tr>
<th>Time</th>
<th>Session Description</th>
<th>Details</th>
</tr>
</thead>
</table>
| Saturday 18 July   | **Location:** Virtual room 1                                                        | **Chairs:** P. Albers, Düsseldorf (DE)  
Z. Culig, Innsbruck (AT)                                                                 |
| 19:40 - 19:50      | **2nd prize - oncology** 925 Late toxicity and quality of life from GETUG-AFU 22 study: A randomised phase II trial comparing 6 months of degarelix in combination with radiotherapy to radiotherapy alone for patients with detectable PSA after radical prostatectomy | **Presenter:** P. Sargos, Bordeaux (FR)  
**Discussant:** A. Briganti, Milan (IT)                                                                 |
| 19:45 - 19:50      | **Discussant**                                                                     | A. Briganti, Milan (IT)                                                                 |
| 19:40 - 19:45      | **Presenter**                                                                      | P. Sargos, Bordeaux (FR)                                                                 |
| 19:50 - 20:00      | **1st prize - oncology** PT090 Inhibition steroid sulfatase suppresses androgen signaling and improves response to enzalutamide | **Presenter:** A. Gao, Sacramento (US)  
**Discussant:** Z. Culig, Innsbruck (AT)                                                                 |
**Game changing session 4**  
Game changing session

**Sunday 19 July**  
08:30 - 09:05

<table>
<thead>
<tr>
<th>Time</th>
<th>Event Description</th>
<th>Speaker</th>
<th>Discussant</th>
</tr>
</thead>
<tbody>
<tr>
<td>08:30 - 08:45</td>
<td>A prospective randomized study of bicalutamide +/- docetaxel for non metastatic prostate cancer with a rising PSA (SPCG-14)</td>
<td>A.S. Josefsson, Göteborg (SE)</td>
<td>C. Sweeney, Boston (US)</td>
</tr>
<tr>
<td>08:45 - 09:00</td>
<td>Health-related quality-of-life (HRQoL) analysis from KEYNOTE-426: pembrolizumab (pembro) plus axitinib (axi) vs sunitinib for advanced renal cell carcinoma (RCC)</td>
<td>J. Bedke, Tübingen (DE)</td>
<td>I. Duran, Santander (ES)</td>
</tr>
<tr>
<td>09:00 - 09:05</td>
<td>Discussion, questions and answers</td>
<td>M-O. Grimm, Jena (DE)</td>
<td>J. N'Dow, Aberdeen (GB)</td>
</tr>
</tbody>
</table>
### Live session: Nightmare on robotics

#### Plenary session 05

**Sunday 19 July**  
**09:05 - 11:35**

**Location:** Virtual room 2  
**Chairs:** T.S. O'Brien, London (GB)  
P. Dasgupta, London (GB)

#### Learning objectives of this session
Bertie Leigh is back exploring and probing the complications of robotic surgery through the prism of the law court. In so doing we hope to improve approaches to consent, surgical technique and training.

Scenarios 1&3 explore challenges arising from the uniqueness of robotics viz, what to do after mechanical failure and issues arising from the physical separation of surgeon and assistant. Scenario 2 explores the transition to performing highly complex robotic procedures.

The session will be entertaining and challenging. “If my case came to court, how would I look?”

<table>
<thead>
<tr>
<th>Time</th>
<th>Session Description</th>
<th>Presenters</th>
</tr>
</thead>
<tbody>
<tr>
<td>09:05 - 09:50</td>
<td>Mechanical failure of the robot during RARP: Should I have stopped?</td>
<td></td>
</tr>
<tr>
<td>09:05 - 09:10</td>
<td>Case presentation</td>
<td>D. Tilki, Hamburg (DE)</td>
</tr>
<tr>
<td>09:10 - 09:20</td>
<td>Case discussion</td>
<td>To be confirmed</td>
</tr>
<tr>
<td>09:20 - 09:40</td>
<td>Cross-examination</td>
<td>B. Leigh, London (GB)</td>
</tr>
<tr>
<td>09:40 - 09:50</td>
<td>Case solution</td>
<td>T.S. O'Brien, London (GB)</td>
</tr>
<tr>
<td>09:50 - 10:35</td>
<td>Were you ready for this level of complexity? Robotic T3 RCC into the IVC</td>
<td></td>
</tr>
<tr>
<td>09:50 - 09:55</td>
<td>Case presentation</td>
<td>To be confirmed</td>
</tr>
<tr>
<td>09:55 - 10:05</td>
<td>Case discussion</td>
<td>C. Schwentner, Stuttgart (DE)</td>
</tr>
<tr>
<td>10:05 - 10:25</td>
<td>Cross-examination</td>
<td>B. Leigh, London (GB)</td>
</tr>
<tr>
<td>10:25 - 10:35</td>
<td>Case solution</td>
<td>T.S. O'Brien, London (GB)</td>
</tr>
<tr>
<td>10:35 - 11:20</td>
<td>Was your team appropriately skilled? Bowel perforation during robotic radical cystectomy</td>
<td></td>
</tr>
<tr>
<td>10:35 - 10:40</td>
<td>Case presentation</td>
<td>R. Nair, London (GB)</td>
</tr>
<tr>
<td>10:40 - 10:50</td>
<td>Case discussion</td>
<td>To be confirmed</td>
</tr>
<tr>
<td>Time</td>
<td>Session</td>
<td>Speaker(s)</td>
</tr>
<tr>
<td>--------------</td>
<td>--------------------------------------------------</td>
<td>----------------------</td>
</tr>
<tr>
<td>10:50 - 11:10</td>
<td>Cross-examination</td>
<td>B. Leigh, London (GB)</td>
</tr>
</tbody>
</table>
# Complications of renal surgery

**Thematic session 09**

**Sunday 19 July**
**11:35 - 13:00**

**Location:** Virtual room 1

**Chairs:**
- A. Breda, Barcelona (ES)
- J. Rassweiler, Heilbronn (DE)

**Learning objectives of this session**

Based on the previous series of thematic sessions on complications, we want to focus this year on complications of renal surgery including all type of approaches from endourology to open surgery. European experts will present typical complications and their management. Discussion of the presented cases with the audience guided by the two moderators will be an important part of the session.

<table>
<thead>
<tr>
<th>Time</th>
<th>Session Title</th>
<th>Speakers</th>
</tr>
</thead>
<tbody>
<tr>
<td>11:35 - 11:50</td>
<td>Complications of laparoscopic renal surgery</td>
<td>P.L. Chlosta, Cracow (PL)</td>
</tr>
<tr>
<td>11:50 - 12:05</td>
<td>Complications of robotic renal surgery</td>
<td>A. Minervini, Florence (IT)</td>
</tr>
<tr>
<td>12:05 - 12:20</td>
<td>Complications of retrograde intra-renal surgery</td>
<td>To be confirmed</td>
</tr>
<tr>
<td>12:20 - 12:35</td>
<td>Complications of renal transplantation</td>
<td>F.J. González García, Madrid (ES)</td>
</tr>
<tr>
<td>12:35 - 12:50</td>
<td>Complications of open renal surgery</td>
<td>M.S. Michel, Mannheim (DE)</td>
</tr>
<tr>
<td>12:50 - 13:00</td>
<td>Discussion, questions and answers</td>
<td>A. Breda, Barcelona (ES)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>J. Rassweiler, Heilbronn (DE)</td>
</tr>
</tbody>
</table>
Stones: The role of innovation
Plenary session 06

Sunday 19 July
13:00 - 15:10

Location: Virtual room 2

Chairs: W.F.J. Feitz, Nijmegen (NL)
T. Knoll, Sindelfingen (DE)
K. Sarica, Istanbul (TR)

Learning objectives of this session
Today, stone treatment means endourology in most cases. New endoscopes, new lasers, new disposables promise better efficacy, lower morbidity and shorter hospital stays. Is this all true or are there potential drawbacks to be considered? Which protocols and treatment algorithms lead to the best treatment results? This plenary will give answers.

13:00 - 13:10
Temperature and intrarenal pressure during laser lithotripsy
E. Liatsikos, Patras (GR)

13:10 - 13:35
Perioperative Antibiotic Prophylaxis: When, how and how long?

13:10 - 13:20
When?
E. Montanari, Milan (IT)

13:20 - 13:30
How (long)?
C.C. Seitz, Vienna (AT)

13:30 - 13:35
Questions and answers
W.F.J. Feitz, Nijmegen (NL)
T. Knoll, Sindelfingen (DE)
K. Sarica, Istanbul (TR)

13:35 - 13:45
How to minimise radiation exposure in endourology
A. Skolarikos, Athens (GR)

13:45 - 14:05
New technology in retrograde intrarenal surgery: Unnecessary luxury vs. measurable benefit

13:45 - 13:50
Measurable benefit
S. Proietti, Milan (IT)

13:50 - 13:55
Unnecessary luxury
A. Neisius, Trier (DE)

13:55 - 14:05
Rebuttal
A. Neisius, Trier (DE)
S. Proietti, Milan (IT)

14:05 - 14:15
Beyond holmium laser: New lithotripsy devices

14:05 - 14:15
Holmium
K. Ghani, Ann Arbor (US)

14:15 - 14:25
Thulium
P.M. Kronenberg, Amadora (PT)

14:25 - 14:35
Ballistic
O. Wiseman, Cambridge (GB)
<table>
<thead>
<tr>
<th>Time</th>
<th>Session Details</th>
</tr>
</thead>
</table>
| 14:35 - 14:45 | Questions and answers  
T. Knoll, Sindelfingen (DE)  
K. Sarica, Istanbul (TR) |
| 14:45 - 15:10 | 1cm stone in the lower calyx plus 2cm upper ureteral stone with complete obstruction |
| 14:45 - 14:50 | Retrograde ureteroscopy  
T. Tailly, Ghent (BE) |
| 14:50 - 14:55 | Percutaneous nephrolithotomy and antegrade ureteroscopy  
N. Gadzhiev, Saint Petersburg (RU) |
| 14:55 - 15:00 | Laparoscopic ureterolithotomy and flexible nephroscopy  
To be confirmed |
| 15:00 - 15:10 | Questions and answers  
W.F.J. Feitz, Nijmegen (NL)  
T. Knoll, Sindelfingen (DE)  
K. Sarica, Istanbul (TR) |
Learning objectives of this session
Development in technologies are pivotal for progress in Urology. The session shows scientific areas that are interesting for a urologic research agenda throughout Europe, and triggers the mind of young urologists to seek for complementary training.

Patterns and computers

16:10 - 16:30
Recognising images, tissues, signals
W.J. Niessen, Rotterdam (NL)

16:20 - 16:30
Imagine all the people… is there a second, digital, me?
C. Auffray, Lyon (FR)

Small devices, new materials

16:30 - 16:55
Modulating urologic nerves
To be confirmed

16:40 - 16:50
New technology for urology: 7T MRI scanner
W. Van der Zwaag, Amsterdam (NL)

16:50 - 16:55
What are the consequences for implants in urology with the new EU directive?
J.P.F.A. Heesakkers, Nijmegen (NL)

Discussion, questions and answers
C.H. Bangma, Rotterdam (NL)
W.F.J. Feitz, Nijmegen (NL)
J. Rassweiler, Heilbronn (DE)
# Testis cancer and surgical andrology

Plenary session 07

**Sunday 19 July**

**17:00 - 19:00**

**Location:** Virtual room 1

**Chairs:**
- P. Albers, Düsseldorf (DE)
- M. Albersen, Leuven (BE)
- M.S. Silay, Istanbul (TR)

**Learning objectives of this session**

After starting off this session with an update on the treatment algorithm of Peyronie’s disease and surgical aspects of genital reconstruction, the interrelationship of testicular cancer and male infertility—both arising from the testicular dysgenesis syndrome (TDS)—will be discussed. The attendee will take home a deeper insight in the molecular connection between these two diseases and the impact of one diagnosis on the management of the other. Autologous testicular tissue transplants are on the horizon and will be highlighted. MicroRNAs as biomarkers and robotic approaches of retroperitoneal masses are further topics of discussion and state-of-the-art presentations will help to clarify their roles in current management.

<table>
<thead>
<tr>
<th>Time</th>
<th>Event</th>
</tr>
</thead>
<tbody>
<tr>
<td>17:00 - 17:10</td>
<td>The current treatment algorithm for Peyronie’s disease: Is there still a role for surgery?</td>
</tr>
<tr>
<td></td>
<td>J.I. Martínez Salamanca, Majadahonda (ES)</td>
</tr>
<tr>
<td>17:10 - 17:25</td>
<td>“I wish I’d never…”: Complications and how to avoid them in male genital reconstructions</td>
</tr>
<tr>
<td></td>
<td>D.J. Ralph, London (GB)</td>
</tr>
<tr>
<td>17:25 - 17:35</td>
<td>Infertility and the risk of testis cancer: New molecular connections</td>
</tr>
<tr>
<td></td>
<td>To be confirmed</td>
</tr>
<tr>
<td>17:35 - 17:50</td>
<td>Autologous testicular tissue transplantation in young cancer patients: How far are we?</td>
</tr>
<tr>
<td></td>
<td>K. Orwig, Pittsburgh (US)</td>
</tr>
<tr>
<td>17:50 - 18:00</td>
<td>How to manage testicular microlithiasis and CIS</td>
</tr>
<tr>
<td></td>
<td>M. Dinkelman-Smit, Rotterdam (NL)</td>
</tr>
<tr>
<td>18:00 - 18:15</td>
<td>The new testis cancer biomarker miRNA 371: Ready for prime time?</td>
</tr>
<tr>
<td></td>
<td>R. Hamilton, Toronto (CA)</td>
</tr>
<tr>
<td>18:15 - 18:45</td>
<td>Twitter told me the robot can do it: Small retroperitoneal masses in testis cancer, what is best? Stage IIA</td>
</tr>
<tr>
<td>18:15 - 18:20</td>
<td>Case presentation</td>
</tr>
<tr>
<td></td>
<td>J.L. Vásquez, Roskilde (DK)</td>
</tr>
<tr>
<td>18:20 - 18:30</td>
<td>Open RPLND is still the gold standard</td>
</tr>
<tr>
<td></td>
<td>D. Nicol, London (GB)</td>
</tr>
<tr>
<td>18:30 - 18:40</td>
<td>Robotic RPLND is safe and feasible</td>
</tr>
<tr>
<td></td>
<td>A. Hiester, Düsseldorf (DE)</td>
</tr>
<tr>
<td>18:40 - 18:45</td>
<td>Concluding remarks and rebuttal: Was Twitter right? Can we use SoMe to better educate patients?</td>
</tr>
<tr>
<td></td>
<td>J.L. Vásquez, Roskilde (DK)</td>
</tr>
<tr>
<td>Time</td>
<td>Event</td>
</tr>
<tr>
<td>------------</td>
<td>--------------------------------------------</td>
</tr>
<tr>
<td>18:45 - 19:00</td>
<td>Discussion, questions and answers</td>
</tr>
<tr>
<td></td>
<td>P. Albers, Düsseldorf (DE)</td>
</tr>
<tr>
<td></td>
<td>M. Albersen, Leuven (BE)</td>
</tr>
<tr>
<td></td>
<td>M.S. Silay, Istanbul (TR)</td>
</tr>
</tbody>
</table>
Controversies in renal cancer surgery
Thematic session 11

Sunday 19 July
19:00 - 20:00

Location: Virtual room 2
Chairs: M-O. Grimm, Jena (DE)
To be confirmed

Learning objectives of this session
In renal cancer surgery a number of new controversies have emerged during recent years. The paradigm of organ preservation “whenever possible” has been challenged by doubts about its benefit depending on comorbid disease. Another controversy concerns the surgical approach to partial nephrectomy, open vs. minimally invasive. Finally, cytoreductive nephrectomy is not any more the standard in synchronous metastatic RCC if VEGFR-TKI therapy is intended. But what is the evidence with modern PD-1/PD-L1 immune-checkpoint inhibitor based combination therapies?

These and other surgical “hot topics” will be discussed – join the session and take part!

<table>
<thead>
<tr>
<th>Time</th>
<th>Session</th>
<th>Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>19:00 - 19:20</td>
<td>Case based debate</td>
<td>Organ preservation: Do the benefits outweigh additional risks?</td>
</tr>
<tr>
<td>19:00 - 19:05</td>
<td>Case presentation</td>
<td>M-O. Grimm, Jena (DE)</td>
</tr>
<tr>
<td>19:05 - 19:10</td>
<td>Pro: Partial nephrectomy</td>
<td>A. Breda, Barcelona (ES)</td>
</tr>
<tr>
<td>19:10 - 19:15</td>
<td>Pro: Minimally invasive nephrectomy</td>
<td>A.E. Canda, Istanbul (TR)</td>
</tr>
<tr>
<td>19:15 - 19:20</td>
<td>Discussion, questions and answers</td>
<td>M-O. Grimm, Jena (DE)</td>
</tr>
<tr>
<td>19:20 - 19:30</td>
<td>Open vs. minimally invasive partial nephrectomy: What is the evidence?</td>
<td>M.C. Mir Maresma, Barcelona (ES)</td>
</tr>
<tr>
<td>19:30 - 19:40</td>
<td>How to best approach the large renal mass: Tips and tricks</td>
<td>T.S. O'Brien, London (GB)</td>
</tr>
<tr>
<td>19:40 - 20:00</td>
<td>Case based debate</td>
<td>Cytoreductive nephrectomy: What do we know?</td>
</tr>
<tr>
<td>19:40 - 19:45</td>
<td>Case presentation</td>
<td>M-O. Grimm, Jena (DE)</td>
</tr>
<tr>
<td>19:45 - 19:50</td>
<td>Cytoreductive nephrectomy may be an option only after response</td>
<td>A. Bex, London (GB)</td>
</tr>
<tr>
<td>19:50 - 19:55</td>
<td>Pro: Upfront cytoreductive nephrectomy</td>
<td>A. Finelli, Toronto (CA)</td>
</tr>
<tr>
<td>19:55 - 20:00</td>
<td>Discussion, questions and answers</td>
<td>M-O. Grimm, Jena (DE)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>To be confirmed</td>
</tr>
</tbody>
</table>
Andrology and genital cancers: Novelties surrounding that other Corona
Poster Session 1

Monday 20 July
17:00 - 17:45

Location: Virtual room 1
Chairs: M. Albersen, Leuven (BE)
M.M. Fode, Herlev (DK)
A. Muneer, London (GB)

Presentations are 2 minutes in length, followed by 2 minutes for a live discussion.

13

The response of prostate cancer cell lines to exogenous testosterone: Lessons for clinical practice

By: Birch B.R.P., Hald O.
University Hospital Southampton NHS Foundation Trust, Dept. of Urology, Southampton, United Kingdom

315

Assessing the impact of male cancers on total motile sperm count

By: Smith M.¹, Tharakan T.², Stroud T.¹, Goh E.T.³, Figueiredo M.³, Joannou L.³, Dearing C.⁴, Vyas L.², Jayasena C.³, Ramsay J.³, Minhas S.²
¹Imperial College London, School of Medicine, London, United Kingdom, ²Imperial College Healthcare Trust, Dept. of Urology, London, United Kingdom, ³Imperial College Healthcare Trust, Dept. of Andrology, London, United Kingdom, ⁴Eastern Institute of Technology, School of Health Science and Nursing, Taradale, New Zealand

320

Challenging the guidelines: Proposal of a new sperm concentration cut-off for Y chromosome microdeletions testing in primary infertile men

By: Cazzaniga W.¹, Capogrosso P.¹, Boeri L.², Ventimiglia E.¹, Pozzi E.¹, Baudo A.¹, Candela L.¹, Pellegrino F.¹, Oreggia D.¹, Abbate C.¹, Mirone V.³, Montorsi F.¹, Salonia A.¹
¹IRCCS Ospedale San Raffaele, Unit of Urology; URI, Milan, Italy, ²IRCCS Fondazione Ca’ Granda – Ospedale Maggiore Policlinico, University of Milan, Dept. of Urology, Milan, Italy, ³Naples University, Dept. of Urology, Naples, Italy

609

Cytotoxic T-lymphocytes and dendritic cells driving the inflammatory micro-environment of Peyronie’s disease

By: Milenkovic U.¹, Boeckx B.², Lambrechts D.², Van Renterghem K.³, Bivalacqua T.J.⁴, De Ridder D.¹, Albersen M.¹
¹KU Leuven, Dept. of Development and Regeneration, Laboratory of Experimental Urology, Leuven, Belgium, ²VIB-KU Leuven, Dept. of Laboratory of Translational Genetics, Leuven, Belgium, ³Jessa Hospital, Dept. of Urology, Hasselt, Belgium, ⁴Johns Hopkins Medical Institute, Dept. of Urology, Baltimore, United States of America
<table>
<thead>
<tr>
<th>Page</th>
<th>Title</th>
<th>Authors</th>
</tr>
</thead>
<tbody>
<tr>
<td>494</td>
<td>Can low intensity shockwaves therapy compete the efficacy of PDE5is? A pooled data analysis from 2 randomized clinical trials</td>
<td>To be confirmed</td>
</tr>
<tr>
<td>487</td>
<td>Effect of antimicrobial dipping solutions on post-operative infection rates in diabetic patients undergoing primary insertion of a Coloplast titan inflatable penile prosthesis</td>
<td>To be confirmed</td>
</tr>
<tr>
<td>216</td>
<td>Location and histology of retroperitoneal metastases in post-chemotherapy retroperitoneal lymph node dissection for non-seminoma germ cell tumour</td>
<td>To be confirmed</td>
</tr>
<tr>
<td>217</td>
<td>Minimally invasive retroperitoneal lymph node dissection (MI-RPLND) and single dose adjuvant carboplatin for low volume stage 2 seminoma – 3 year outcomes</td>
<td>To be confirmed</td>
</tr>
<tr>
<td>143</td>
<td>Establishment, characterization and imaging of a first platinum-resistant penile cancer patient derived xenograft in nude mice: An eUROGEN project</td>
<td>By: Albersen M.¹, Vanthoor J.¹, Thomas A.², Milenkovic U.¹, Dumez H.³, De Meerleer G.⁴, Joniau S.¹, Everaerts W.¹, Tsaur I.², Muneer A.⁵, Himmelreich U.⁶, Cawthorne C.⁶, Deroose C. M.⁷, Spans L.⁸, Vanden Bempt I.⁸, Leucci E.⁹, Van Rompuy A.¹⁰, Rizzotto L.⁹ ¹University Hospitals Leuven, Dept. of Urology, Leuven, Belgium, ²University Medicine Mainz, Dept. of Urology, Mainz, Germany, ³University Hospitals Leuven, Dept. of Medical Oncology, Leuven, Belgium, ⁴University Hospitals Leuven, Dept. of Radiation Oncology, Leuven, Belgium, ⁵University College London Hospital, NIHR Biomedical Research Centre, London, United Kingdom, ⁶KU Leuven, Biomedical MRI/Molecular Small Animal Imaging Center (MoSAIC), Leuven, Belgium, ⁷University Hospitals Leuven, Dept. of Nuclear Medicine &amp; Molecular Imaging, Leuven, Belgium, ⁸KU Leuven, Dept. of Human Genetics, Leuven, Belgium, ⁹KU Leuven, Trace - PDTX Platform Dept. of Oncology, Laboratory of RNA Cancer Biology, Leuven, Belgium, ¹⁰University Hospitals Leuven, Dept. of Pathology, Leuven, Belgium</td>
</tr>
<tr>
<td>144</td>
<td>Validation of hybrid ICG-99mTc-nanocolloid for sentinel node biopsy in a large cohort of penile cancer patients: Improved sentinel node detection compared to blue dye</td>
<td>By: Dell'Oglio P.¹, De Vries H.M.², Mazzone E.³, Horenblas S.², Van Der Poel H.G.², Van Leeuwen F.W.B.⁴, Brouwer O.R.² ¹The Netherlands Cancer Institute – Antoni van Leeuwenhoek Hospital; Interventional Molecular Imaging Laboratory, Leiden University Medical Center, Dept. of Urology, Amsterdam, The Netherlands, ²The Netherlands Cancer Institute – Antoni van Leeuwenhoek Hospital, Dept. of Urology, Amsterdam, The Netherlands, ³San Raffaele Hospital, Dept. of Urology, Milan, Italy, ⁴Interventional Molecular Imaging Laboratory, Leiden University Medical Center, Dept. of Urology, Leiden, The Netherlands</td>
</tr>
</tbody>
</table>
Challenges in andrology
Video Session 1

Monday 20 July
18:45 - 19:15

Location: Virtual room 1
Chairs: F. Cancrini, Rome (IT)
E. Kojancic, Chicago (US)
I. Moncada Iribarren, Madrid (ES)

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

V090

Post-infiltration ultrasound evaluation of collagenase clostridium histolyticum for the treatment of Peyronie's disease: Independent factor of therapeutic success

By: Cocci A. 1, Russo G.I. 2, Cito G. 1, Romano A. 1, Verrienti P. 1, Cai T. 3, Bartoletti R. 4, Morelli G. 4, Minervini A. 1, Polloni G. 5, Rizzo M. 3, Falcone M. 6, Mondaini N. 7

1University of Florence, Dept. of Urology, Florence, Italy, 2University of Catania, Dept. of Urology, Catania, Italy, 3University of Trieste, Dept. of Urology, Trieste, Italy, 4University of Pisa, Dept. of Urology, Pisa, Italy, 5Psychosexuology, Psychosexuology, Como, Italy, 6University of Turin, Hospital Molinette, Dept. of Urology, Turin, Italy, 7Villa Donatello Hospital, Uro-Andrology, Florence, Italy

V091

New technique for penile prosthesis implantation in severely fibrosed corpora cavernosa; the “un-folding technique”

By: Abdel-Rassoul M.A.
Cairo University, Dept. of Urology, Cairo, Egypt
New frontiers in urological imaging
Poster Session 2

Tuesday 21 July
17:00 - 17:45

Location: Virtual room 1
Chairs: To be confirmed
R. Sanchez-Salas, Paris (FR)
N.R. Suardi, Genoa (IT)

Presentations are 2 minutes in length, followed by 2 minutes for a live discussion.

353

A new quality control scoring system for multiparametric MRI of the prostate from the PRECISION trial

By: Giganti F. 1, Kasivisvanathan V. 2, Punwani S. 1, Emberton M. 2, Allen C. 1, Moore C.M. 2, PRECISION Study Group
1University College London Hospital, Dept. of Radiology, London, United Kingdom,
2University College London Hospital, Dept. of Urology, London, United Kingdom

270

Which prostate cancers are overlooked by mpMRI? An analysis from PROMIS

1University College London, UCL Division of Surgery & Interventional Science, London, United Kingdom,
2Frimley Health NHS Foundation Trust, Dept. of Urology, London, United Kingdom,
3University College London, Medical Research Council (MRC) Clinical Trials Unit, London, United Kingdom,
4Taunton & Somerset NHS Foundation Trust, Dept. of Urology, Taunton, United Kingdom,
5University Hospital Southampton NHS Foundation Trust, Dept. of Urology, Southampton, United Kingdom,
6University College London Hospitals NHS Foundation Trust, Dept. of Pathology, London, United Kingdom,
7Whittington Health NHS Trust, Dept. of Urology, London, United Kingdom,
8Maidstone & Tunbridge Wells NHS Trust, Dept. of Urology, Tunbridge Wells, United Kingdom,
9Hampshire Hospitals NHS Foundation Trust, Dept. of Urology, Basingstoke, United Kingdom,
10University College London Hospitals NHS Foundation Trust, Dept. of Radiology, London, United Kingdom,
11Public & Patient Representative, Public & Patient Representative, Nottingham, United Kingdom,
12The Royal Marsden NHS Foundation Trust, Dept. of Academic Urology, London, United Kingdom,
13North Bristol NHS Trust, Dept. of Urology, Bristol, United Kingdom,
14Sheffield Teaching Hospitals NHS Foundation Trust, Dept. of Urology, Sheffield, United Kingdom,
15Wrexham Maelor Hospital NHS Trust, Dept. of Urology, Wrexham, United Kingdom,
16Imperial College London, Dept. of Surgery & Cancer, London, United Kingdom

1031

Does inclusion of MRI in active surveillance decrease the rate of discontinuation? A reflection of the use of MRI in the PRIAS study
1147

**Prospective evaluation of pelvic lymph node staging with 18fluorine prostate-specific membrane antigen PET/CT prior to extended lymph node dissection in primary prostate cancer – the SALT trial**

To be confirmed

800

**Impact of 68Ga-PSMA-11 PET on the management of biochemically recurrent prostate cancer in a prospective single-arm clinical trial**


1University Hospital Essen, Dept. of Nuclear Medicine, Essen, Germany, 2University of California Los Angeles, Ahmanson Translational Imaging Division, Dept. of Molecular and Medical Pharmacology, Los Angeles, United States of America, 3Klinikum rechts der Isar, Dept. Nuclear Medicine, Munich, Germany, 4University of California San Francisco, Dept. of Radiology and Biomedical Imaging and Pharmaceutical Chemistry, San Francisco, United States of America, 5University of California San Francisco, Dept. of Urology, San Francisco, United States of America, 6University of California San Francisco, Helen Diller Family Comprehensive Cancer Center, San Francisco, United States of America, 7UCLA Medical Center, University of California Los Angeles, Dept. of Urology, Los Angeles, United States of America, 8University of California Los Angeles, Ahmanson Translational Imaging Division, Department of Molecular and Medical Pharmacology, Los Angeles, United States of America

529

**No-response at mpMRI after neoadjuvant pembrolizumab is a proxy of adverse pathological and oncological outcomes in patients treated with radical cystectomy: Interim results from the PURE01 study**

By: Bandini M. 1, Zaffuto E. 1, Scuderi S. 1, Pederzoli F. 1, Marandino L. 2, Raggi D. 2, Barletta F. 1, Gandaglia G. 1, Fossati N. 1, Burgio G. 1, Moschini M. 3, Zamboni S. 3, Afferi L. 3, Comara S. 1, Briganti A. 1, Montorsi F. 1, Colombo R. 1, Necchi A. 2, Gallina A. 1

1Vita-Salute San Raffaele University, Dept. of Urology, Milan, Italy, 2Fondazione IRCCS Istituto Nazionale dei Tumori, Dept. of Oncology, Milan, Italy, 3Klinik für Urologie, Luzerner Kantonsspital, Dept. of Urology, Lucerne, Switzerland

530

**Replacing TURBT with mpMRI for staging MIBC: Pilot data from the BladderPath trial**

By: Bryan R.T. 1, Pirrie S.J. 1, Liu W. 1, Amir R. 2, Gallagher J. 3, Hughes A.I. 1, Jefferson K.P. 4, Knight A. 5, Nanton V. 6, Mintz H.P. 6, Pope A.M. 7, Catto J.W.F. 8, Patel P. 1, James N.D. 1

1University of Birmingham, Institute of Cancer and Genomic Sciences, Birmingham,
<table>
<thead>
<tr>
<th>ID</th>
<th>Title</th>
<th>Authors</th>
</tr>
</thead>
<tbody>
<tr>
<td>535</td>
<td>Clinical impact of [18F] Fluorodeoxyglucose positron emission tomography/computed tomography on management of patients with muscle-invasive bladder cancer</td>
<td>United Kingdom, University Hospitals Birmingham NHS Foundation Trust, Dept. of Radiology, Birmingham, United Kingdom, Patient Advocate, Bingley, United Kingdom, University Hospitals Coventry and Warwickshire NHS Trust, Dept. of Urology, Coventry, United Kingdom, Action Bladder Cancer UK, Chairman and Patient Advocate, Tetbury, United Kingdom, University of Warwick, Warwick Medical School, Coventry, United Kingdom, University of Birmingham, Institute of Cancer and Genomic Sciences, Birmingham, United Kingdom, University of Sheffield, Dept. of Oncology and Metabolism, Sheffield, United Kingdom</td>
</tr>
<tr>
<td>794</td>
<td>Combination of Dual Energy CT scan and Infrared Spectroscopy: Analysis of imaging accuracy in prediction of different stones composition and stiffness</td>
<td>By: Capretti C.C., Milanese G., Cameli A.M., Sbaraglia F., Mari A., Pierini L., Misericordia M., Scarcella S., Giovagnoni A., Giuseppetti G.M., Galosi A.B. Polythecnic University of Marche Region, Dept. of Urology, Ancona, Italy, Polythecnic University of Marche Region, Dept. of Radiology, Ancona, Italy</td>
</tr>
<tr>
<td>475</td>
<td>Utility of diffusion-weighted magnetic resonance imaging radiomics features in the differentiation of fat-poor angiomyolipoma from clear cell renal cell carcinoma</td>
<td>To be confirmed</td>
</tr>
</tbody>
</table>
## Clinical applications of novel imaging techniques

### Video Session 2

**Tuesday 21 July**

**18:45 - 19:15**

**Location:** Virtual room 1

**Chairs:** To be confirmed
A. Carbone, Latina (IT)
To be confirmed

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

<table>
<thead>
<tr>
<th>ID</th>
<th>Title</th>
<th>Chairs</th>
</tr>
</thead>
<tbody>
<tr>
<td>V072</td>
<td><strong>Rapid segmentation of renal tumours to calculate volume using 3D interpolation</strong></td>
<td>To be confirmed</td>
</tr>
<tr>
<td>V021</td>
<td><strong>Contrast-enhanced trans-rectal ultrasound for surveillance of post-treatment recurrence after focal HIFU of prostate</strong></td>
<td>To be confirmed</td>
</tr>
</tbody>
</table>
Surgical options in functional urology: Shaping the future
Poster Session 3

Location: Virtual room 1
Chairs: To be confirmed
N. Thiruchelvam, Cambridge (GB)
K. Tikkinen, Helsinki (FI)

Presentations are 2 minutes in length, followed by 2 minutes for a live discussion.

201 Two-year outcomes after aquablation compared to TURP: Results from a blinded randomized trial
By: Barber N. ¹, Gilling P. ², Bidair M. ³, Anderson P. ⁴, Sutton M.A. ⁵, Aho T. ⁶, Thomas A. ⁷, Te A. ⁸, Roehrborn C.G. ⁹
¹Frimley Health NHS Foundation Trust, Dept. of Urology, Surrey, United Kingdom, ²University of Auckland, Dept. of Urology, Tauranga, New Zealand, ³Alvarado Medical Institute, Dept. of Urology, San Diego, United States of America, ⁴The Royal Melbourne Hospital, Dept. of Urology, Melbourne, Australia, ⁵Houston Methodist Hospital, Dept. of Urology, Houston, United States of America, ⁶Adenbrookes Hospital, Dept. of Urology, Cambridge, United Kingdom, ⁷Princess of Wales Hospital, Dept. of Urology, Bridgend, United Kingdom, ⁸New York Presbyterian Hospital, Dept. of Urology, New York, United States of America, ⁹UT Southwestern Medical Centre, Dept. of Urology, Dallas, United States of America

212 Five-year preliminary functional urinary outcomes of the prospective, randomized controlled trial of convective water vapor thermal therapy for treatment of lower urinary tract symptoms due to benign prostatic hyperplasia
To be confirmed

650 Prostatic urethral lift real-world study confirms effectiveness and safety in a broad array of patient groups
By: Kayes O.
Leeds Teaching Hospitals, Dept. of Urology, Leeds, United Kingdom

831 A prospective, randomised clinical trial comparing holmium laser enucleation versus photoselective vaporization for day-surgery to treat benign prostatic hyperplasia
By: Chen Y.B., Chen Q., Gu M., Liu C., Wang Z.
Shanghai Ninth People’s Hospital, Dept. of Urology, Shanghai, China

207 Second generation of temporary implantable nitinol device (iTind) in men with lower urinary tract symptoms (LUTS): Who profit most from treatment? 2 year results of the MT-02-study
To be confirmed
**358**
Litoxetine (LTX) shows significant treatment effect in urinary incontinence (UI)
To be confirmed

**364**
Long-term outcomes from TVT procedures for treatment of female stress urinary incontinence: Data from a minimum of 18 years of follow-up
To be confirmed

**363**
Interim analysis of a European prospective observational study evaluating patient reported outcomes of Altis single incision sling in women operated for stress urinary incontinence

By: Capon G. ¹, Van Der Aa F. ², Ryckebusch H. ³, Ferry P. ⁴
¹Pellegrin hospital, Dept. of Urology, Bordeaux, France, ²UZ Leuven, Functional and reconstructive urology, neurourology, Leuven, Belgium, ³Coloplast, Medical Affairs Office, Le Plessis-Robinson, France, ⁴Saint Louis Hospital, Dept. of Gynaecology, La Rochelle, France

**1078**
Complications after perineal surgery (with or without implantation of material): First results of the French multicenter observatory VIGIMESH after 1873 inclusions

¹CHU de Poitiers, Dept. of Urology, Poitiers, France, ²CHU Estaing, Dept. of Gynaecology and Obstetrics, Clermont-Ferrand, France, ³Université de Lille, Dept. of Gynaecology and Obstetrics, Lille, France, ⁴CH de La Rochelle, Dept. of Gynaecology and Obstetrics, La Rochelle, France, ⁵Université de Strasbourg, Dept. of Urology, Strasbourg, France, ⁶Hôpital Saint-Vincent-de-Paul, Dept. of Gynaecology and Obstetrics, Lille, France, ⁷Groupe Hospitalier Diaconesses-Croix-Saint-Simon, Dept. of Gynaecology, Paris, France, ⁸CHU de Poitiers, Dept. of Visceral Surgery, Poitiers, France, ⁹CHU de Strasbourg, Dept. of Gynaecology and Obstetrics, Strasbourg, France, ¹⁰CHU de Poitiers, Dept. of Gynaecology and Obstetrics, Poitiers, France, ¹¹CH de Dunkerque, Dept. of Gynaecology and Obstetrics, Dunkirk, France, ¹²Université Paris-Sud, Dept. of Gynaecology and Obstetrics, Paris, France, ¹³CHU de Caen, Dept. of Gynaecology and Obstetrics, Caen, France, ¹⁴Université de Poitiers, Clinical Investigation Center, Poitiers, France, ¹⁵Université de Poitiers, Inserm U1018, Poitiers, France, ¹⁶Université de Nîmes, Dept. of Gynaecology and Obstetrics, Nîmes, France, ¹⁷Université de Versailles Saint-Quentin-en-Yvelines, Dept. of Gynaecology and Obstetrics, Poissy, France, ¹⁸Université de Poitiers, Dept. of Gynaecology and Obstetrics, Poitiers, France

**368**
Robot-assisted artificial urinary sphincter implantation in female patients: An international multicenter study

By: Peyronnet B. ¹, Capon G. ², Biardeau X. ³, Belas O. ⁴, Lecoanet P. ⁵, Castro-Sader L. ⁶, Allue M. ⁶, Hein R. ⁷, Daher M. ⁸, Manunta A. ¹, Robert G. ², Hascoet J. ¹, Dubois F. ⁹, Thibault F. ¹⁰, Cardot V. ¹¹, Vidart A. ¹², Descazeaud A. ¹³, Fournier G. ¹⁴, Everaerts W. ¹⁵, Van Der Aa F. ¹⁵
¹University of Rennes, Dept. of Urology, Rennes, France, ²University of Bordeaux, Dept. of Urology, Bordeaux, France, ³University of Lille, Dept. of Urology, Lille, France, ⁴Clinique Le Mans Sud, Dept. of Urology, Le Mans, France, ⁵University of Nancy, Dept. of Urology,
Nancy, France, 6 Vall Dhebron, Dept. of Urology, Barcelona, Spain, 7 Magdeburg Klinik, Dept. of Urology, Magdeburg, Germany, 8 Magdeburg University, Magdeburg, Germany, 9 Clinique Saint-Gregoire, Dept. of Urology, Saint Grégoire, France, 10 Metz Hospital, Dept. of Urology, Metz, France, 11 Clinique Bizet, Dept. of Urology, Paris, France, 12 Foch Hospital, Dept. of Urology, Suresnes, France, 13 University of Limoges, Dept. of Urology, Limoges, France, 14 University of Brest, Dept. of Urology, Brest, France, 15 University of Leuven, Dept. of Urology, Leuven, Belgium
Advanced reconstructive surgery
Video Session 3

Wednesday 22 July
18:45 - 19:15

Location: Virtual room 1
Chairs: G. Al Edwan, Amman (JO)
A. Hosseini, Stockholm (SE)
F. Van Der Aa, Leuven (BE)

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

V054

Technical aspects of Robotic Assisted Laparoscopic Ureterolysis (RALU) for the treatment of ureteric obstruction from Retroperitoneal Fibrosis (RPF)

By: Walsh A.L.W., Mc Dermott K., La Rosa A., Challacombe B., O'brien T., Fernando A.
Guy's and St. Thomas NHS Foundation Trust, Dept. of Urology, London, United Kingdom

V058

Double-face augmentation urethroplasty for bulbar urethral strictures-dorsal versus ventral approach: Technical implications and short-term outcomes

By: Enganti B., Chiruvella M., Bendigeri M.T., Ghouse S.M., Ragoori D., Reddy P.C., Pandya S.
Asian Institute of Nephrology & Urology, Dept. of Urology, Hyderabad, India
Targeted treatment and personalised management of advanced bladder cancer
Poster Session 4
Thursday 23 July 17:00 - 17:45

Location: Virtual room 1

Chairs: M. De Santis, Berlin (DE)
F. Liedberg, Malmö (SE)
T. Seisen, Paris (FR)

Presentations are 2 minutes in length, followed by 2 minutes for a live discussion.

1058

Cost-effectiveness analysis of the phase 3 IMvigor130 study evaluating atezolizumab as monotherapy or combined with platinum-based chemotherapy versus chemotherapy alone in locally advanced or metastatic urothelial cancer

By: Magee D.E. 1, Cheung D.C. 1, Hird A.E. 1, Sridhar S.S. 2, Fallah-Rad N. 2, Fleshner N.E. 3, Kulkarni G.K. 3
1University of Toronto, Dept. of Urology, Dept. of Surgery, Toronto, Canada, 2University of Toronto, Dept. of Medical Oncology, Department of Internal Medicine, University Health Network, Toronto, Canada, 3University of Toronto, Dept. of Urology, Dept. of Surgery, University Health Network, Toronto, Canada

1056

Interim results of PEANUT: An open-label, single-arm, phase 2 study evaluating pembrolizumab plus nanoparticle albumin-bound paclitaxel (nab-paclitaxel) as salvage therapy for metastatic urothelial carcinoma (UC)

By: Necchi A. 1, Raggi D. 1, Bandini M. 2, Farè E. 1, Giannatempo P. 1, Colecchia M. 1, Pederzoli F. 2, Gallina A. 2, Marandino L. 1, Calareso G. 1, Madison R. 3, Briganti A. 2, Ross J. 3, Montorsi F. 2
1Fondazione IRCCS Istituto Nazionale dei Tumori, Dept. of Medical Oncology, Milan, Italy, 2IRCCS San Raffaele Hospital, Dept. of Urology, Milan, Italy, 3Foundation Medicine, Dept. of FMI, Cambridge, United States of America

768

Preliminary results of a European multicentre phase 1 study with Oncofid-P-B for the treatment of BCG unresponsive carcinoma in situ (CIS) of bladder at the end of 12 consecutive weeks intensive course and during ongoing monthly maintenance phase

By: Hurle R. 1, Guazzoni G. 2, Colombo P. 3, Santoro A. 4, De Cobelli O. 5, Di Trapani E. 5, Nohales G. 6, Carlos L. 7, Duran-Merino R. 8, Lazzeri M. 1
1IRCCS Humanitas Clinical and Research Hospital, Dept. of Urology, Rozzano, Italy, 2IRCCS Humanitas Clinical and Research Hospital - Humanitas University, Dept. of Urology, Rozzano, Italy, 3IRCCS Humanitas Clinical and Research Hospital, Dept. of Pathology, Rozzano, Italy, 4IRCCS Humanitas Clinical and Research Hospital - Humanitas University, Dept. of Oncology, Rozzano, Italy, 5IEO, Dept. of Urology, Milan, Italy, 6Hospital del Mar, Dept. of Urology, Barcelona, Spain, 7Hospital Universitario Fundacion Alcorcon, Dept. of Urology, Madrid, Spain, 8H.G.U., Dept. of Urology, Madrid, Spain
Impact of molecular subtyping and immune infiltration on response and outcome following neoadjuvant pembrolizumab (pembro), versus neoadjuvant chemotherapy (NAC), in muscle-invasive bladder cancer

By: Necchi A.¹, Raggi D.¹, Briganti A.², Farè E.¹, Giannatempo P.¹, Marandino L.¹, Gallina A.², Colecchia M.¹, Lucianò R.², Bianchi M.², Colombo R.², Salonia A.², Gandaglia G.², Fossati N.², Capitanio U.², Montorsi F.², Boormans J.³, Liu Y.⁴, De Jong J.³, Dittamore R.⁴, Davicioni E.⁴, Black P.⁵, Gibb E.⁴
¹Fondazione IRCCS Istituto Nazionale dei Tumori, Dept. of Medical Oncology, Milan, Italy, ²IRCCS San Raffaele Hospital, Dept. of Urology, Milan, Italy, ³Erasmus MC Cancer Institute, Dept. of Urology, Rotterdam, The Netherlands, ⁴Decipher Biosciences, Decipher Biosciences, Vancouver, Canada, ⁵University of British Columbia, Dept. of Urology, Vancouver, Canada

Randomized phase III trial of dose-dense MVAC or GC as perioperative chemotherapy for muscle-invasive urothelial bladder cancer (MIUBC): Preliminary results of the GETUG/AFU V05 VESPER trial on toxicity and pathological responses
To be confirmed

The supplementary GM-CSF to neoadjuvant gemcitabine-cisplatin systemic chemotherapy plus PD-L1 blockade decrease local tumor recurrence of urothelial carcinoma after surgery via suppression of MDSCs in blood and tumor microenvironment
To be confirmed

VAR2-armed CAR T-cells as an immunotherapeutic strategy for bladder cancer
To be confirmed

The diagnostic accuracy of Bladder EpiCheck in high-risk population
To be confirmed

Xpert® bladder cancer monitor in the follow up of patients affected by non muscle invasive bladder cancer (NMIBC): An update
To be confirmed

Evaluation of ADXBLADDER and cytology performance in the follow up of NMIBC: A blinded prospective multicentric study

By: Gontero P.¹, Montanari E.², Roupret M.³, Longo F.², Stockley J.⁴, Kennedy A.⁴, Rodríguez Ó.⁵, Sieverink C.⁶, Vanié F.⁷, Allasia M.¹, Witjes J.A.⁶, Colombel M.⁸, Sylvester R.⁹, McCracken S.¹⁰, Dudderidge T.¹¹, Palou J.⁵
¹Ospedale Molinette, Dept. of Urology, Turin, Italy, ²Università Policlinico Milano, Dept. of Urology, Milan, Italy, ³Hôpital Pitié-Salpêtrière, Sorbonne University, Dept. of Urology, Paris, France, ⁴Arquer Diagnostics, Dept. of R&D, Sunderland, United Kingdom, ⁵Fundacio Puigvert, Dept. of Urology, Barcelona, Spain, ⁶Radboud University Medical Centre, Dept. of Urology, Nijmegen, The Netherlands, ⁷Hôpital Pitié-Salpêtrière, Dept. of Urology, Paris, France, ⁸Hôpital Edouard Herriot, Dept. of Urology, Lyon, France, ⁹EAU Non-muscle Invasive Guidelines Panel, EAU Guidelines Office, Brussels, Belgium, ¹⁰Sunderland Royal Hospital, Dept. of Urology, Sunderland, United Kingdom, ¹¹University Hospital Southampton, Dept. of Urology, Southampton, United Kingdom
**Improving outcomes in the treatment of bladder cancer**

Video Session 4

**Thursday 23 July**

**18:45 - 19:15**

**Location:** Virtual room 1

**Chairs:** To be confirmed
K. Decaestecker, Ghent (BE)
To be confirmed

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

---

**V057**

**Safety and short-term oncological outcomes of thulium fiber laser en-bloc resection of non-muscle-invasive bladder cancer: A prospective non-randomized phase II trial**

By: Enikeev D.¹, Taratkin M.¹, Laukhina E.¹, Sukhanov R.¹, Dymov A.¹, Sorokin N.², Shariat S.F.³, Glybochko P.¹

¹Sechenov University, Institute for Urology and Reproductive Health, Moscow, Russia,
²Moscow State University, Dept. of Urology, Moscow, Russia,
³Medical University of Vienna, Dept. of Urology, Vienna, Austria

---

**V028**

**Sex-sparing robot-assisted radical cystectomy with intracorporeal Padua ileal neobladder in female: Surgical technique, perioperative, oncologic and functional outcomes**

To be confirmed
**Renal Cell Carcinoma**  
Poster Session 5  

| Location: Virtual room 1 | Chairs: R. Boissier, Marseille (FR)  
To be confirmed  
To be confirmed |
|-------------------------|---------------------------------|

Presentations are 2 minutes in length, followed by 2 minutes for a live discussion.

<table>
<thead>
<tr>
<th>Presentation</th>
<th>Title</th>
<th>Authors</th>
</tr>
</thead>
<tbody>
<tr>
<td>601</td>
<td>The impact of delay in time to surgery on outcomes of localized renal cell carcinoma: Analysis based on tumor size</td>
<td>To be confirmed</td>
</tr>
<tr>
<td>33</td>
<td>The impact of 3D digital reconstruction on the surgical planning of partial nephrectomy: A prospective case-control trial</td>
<td>To be confirmed</td>
</tr>
</tbody>
</table>
| 469          | Novel classification model of tumour shape irregularity: Significance for predicting potential oncologic risks in clinically localised renal cell carcinoma | Tanaka H. 1, Shimada W. 1, Fukuda S. 1, Fukushima H. 1, Moriyama S. 1, Uehara S. 1, Kijima T. 1, Yoshida S. 1, Yokoyama M. 1, Ishioka J. 1, Matsuoka Y. 1, Saito K. 1, Campbell S. 2, Fuji Y. 1  
1Tokyo Medical and Dental University, Dept. of Urology, Tokyo, Japan, 2Cleveland Clinic, Dept. of Glickman Urological and Kidney, Cleveland, United States of America |
| 30           | The IRON study: Investigation of Robot-assisted versus Open Nephron-sparing surgery | To be confirmed |
| 597          | Renal biopsies performed before or during ablation: A comparison of different diagnostic strategies in small renal cell tumors | Widdershoven C.V. 1, Aarts B.M. 2, Zondervan P.J. 1, Van Delden O.M. 3, Klompenhouwer E.G. 2, Prevoo W. 4, Montauban Van Swijndregt A.D. 5, Henderickx M.M.E.L. 1, Van Moorselaar R.J.A. 1, Bex A. 6, Lagerveld B.W. 5  
1Amsterdam UMC, Dept. of Urology, Amsterdam, The Netherlands, 2Antoni van Leeuwenhoek, Dept. of Radiology, Amsterdam, The Netherlands, 3Amsterdam UMC, Dept. of Radiology, Amsterdam, The Netherlands, 4Onze Lieve Vrouwe Gasthuis, Dept. of Radiology, Amsterdam, The Netherlands, 5Onze Lieve Vrouwe Gasthuis, Dept. of Urology, Amsterdam, The Netherlands, 6Antoni van Leeuwenhoek, Dept. of Urology, Amsterdam, The Netherlands |
| 603          | Benchmarking current nephrectomy practice in malignant disease in England: An analysis of the BAUS complex operation registry | To be confirmed |
| 834          | Nephrectomy after complete response to immune checkpoint inhibitors for metastatic Renal Cell Carcinoma (mRCC): A new surgical challenge? | To be confirmed |
Variations in the exposure to sunitinib with immediate and deferred cytoreductive nephrectomy (CN). A post-hoc analysis of the randomized controlled EORTC SURTIME trial

Impact of metastasectomy on cancer specific and overall survival in metastatic renal cell carcinoma: Analysis of the REMARCC registry

Recommendations for follow up of surgically resected chromophobe renal cell carcinoma
Emerging technologies in partial nephrectomy

Video Session 5

Friday 24 July
18:45 - 19:15

Location: Virtual room 1

Chairs: To be confirmed
M. Musquera Felip, Barcelona (ES)
To be confirmed

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

V059

Innovations and technical variations in robot-assisted kidney transplantation:
Results from the ERUS working group
To be confirmed

V001

Beyond the limits of ultrasound: Three dimensional augmented reality robot assisted partial nephrectomy (3D AR-RAPN) for complex renal masses

By: Porpiglia F. 1, Checcucci E. 1, Amparore D. 1, Piramide F. 1, Volpi G. 1, De Cillis S. 1, Verri P. 1, Manfredi M. 1, Piazzolla P. 2, Fiori C. 1, Vezzetti E. 2, Mottrie A. 3

1 AOU San Luigi Gonzaga, Dept. of Urology, Orbassano, Italy, 2 Politecnico di Torino, Dept. of Management and Production Engineering, Turin, Italy, 3 OLV Hospital, Dept. of Urology, Aalst, Belgium
### Management of prostate cancers – from screening to metastasis

**Poster Session 6**

**Saturday 25 July**
**17:00 - 17:45**

**Location:** Virtual room 1

**Chairs:**
- Z. Culig, Innsbruck (AT)
- G.P. Haas, Syracuse (US)

Presentations are 2 minutes in length, followed by 2 minutes for a live discussion.

<table>
<thead>
<tr>
<th>Presentation ID</th>
<th>Title</th>
<th>Authors</th>
<th>Institutions</th>
</tr>
</thead>
<tbody>
<tr>
<td>51</td>
<td>From screening to mortality reduction: An overview of the patient journey in ERSPC Rotterdam</td>
<td>Roobol M.J., Remmers S., Van Slooten-Midderigh M.E., Franken-Raab C.G.A.M., ERSPC Rotterdam Study group</td>
<td>Erasmus University Medical Center, Dept. of Urology, Rotterdam, The Netherlands</td>
</tr>
<tr>
<td>PT145</td>
<td>Long-term oncological outcomes following active surveillance of low risk prostate cancer: A population-based study</td>
<td>To be confirmed</td>
<td></td>
</tr>
<tr>
<td>PT157</td>
<td>Association of Mediterranean diet score and disease progression among localized prostate cancer patients on active surveillance</td>
<td>Gregg J.R., Zhang X., Zheng J., Ward J.F., Kim J., Davis J.W., Daniel C.</td>
<td>UT MD Anderson Cancer Center, Dept. of Urology, Houston, United States of America, UT MD Anderson Cancer Center, Dept. of Epidemiology, Houston, United States of America, Merck &amp; Co., Dept. of Clinical Research, Kenilworth, United States of America</td>
</tr>
<tr>
<td>PT053</td>
<td>Impact of residual microscopical evidence of prostate cancer at second tumor resection on biochemical recurrence after radical prostatectomy</td>
<td>To be confirmed</td>
<td></td>
</tr>
<tr>
<td>1110</td>
<td>Patient-reported outcomes of neoadjuvant apalutamide (ARN-509) and radical prostatectomy in treatment of intermediate to high risk prostate cancer (NEAR) trial</td>
<td>To be confirmed</td>
<td></td>
</tr>
</tbody>
</table>
Singapore General Hospital, Dept. of Urology, Singapore, Singapore

**Assessing the impact of salvage radiation therapy field after radical prostatectomy: A long-term analysis from a large multi-institutional series**


1IRCCS Ospedale San Raffaele, Dept. of Oncology, Unit of Urology, Milan, Italy, 2Mayo Clinic, Dept. of Urology, Rochester, MN, United States of America, 3Gustave Roussy Institute, Dept. of Radiation Oncology, Villejuif, France, 4IRCCS Ospedale San Raffaele, Dept. of Radiotherapy, Milan, Italy, 5IRCCS Ospedale San Raffaele, Dept. of Oncology, Unit of Urology, Milan, Italy, 6University Hospital Ulm, Dept. of Radiation Oncology, Ulm, Germany, 7Medical University of Vienna, Dept. of Urology, Vienna, Austria, 8Medical University of Vienna, Dept. of Radiation Oncology, Vienna, Austria, 9University Hospitals Leuven, Dept. of Urology, Leuven, Belgium, 10University Hospitals Leuven, Dept. of Radiotherapy, Leuven, Belgium

**Longitudinal analysis of personal DNA methylome patterns in metastatic prostate cancer**
To be confirmed

**Inhibition steroid sulfatase suppresses androgen signaling and improves response to enzalutamide**
To be confirmed
## Advances in the treatment of localised prostate cancer

**Video Session 6**

**Saturday 25 July**

**18:45 - 19:15**

**Location:** Virtual room 1

**Chairs:**
- F. Gómez Veiga, Salamanca (ES)
- S. Nathan, London (GB)

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

---

### V053

**3D augmented reality robot-assisted radical prostatectomy: The computer vision algorithm allows to identify the extracapsular extension on neurovascular bundles**

By: Porpiglia F.¹, Checcucci E.¹, Amparore D.¹, Piana A.¹, Piramide F.¹, Volpi G.¹, De Cillis S.¹, Manfredi M.¹, Piazzolla P.², Fiori C.¹, Vezzetti E.²

¹AOU San Luigi Gonzaga, University of Turin, Dept. of Urology, Orbassano, Italy,
²Politecnico di Torino, Dept. of Management and Production Engineering, Turin, Italy

### V023

**Evaluation of pain in office based transperineal targeted prostate biopsy under local anesthesia using a modified anesthetic protocol**


American Hospital of Paris, Dept. of Urology, Paris, France
Wisconsin quality of life machine learning algorithm for predicting quality of life in kidney stone patients


¹McGill University, Faculty of Medicine, Montreal, Canada, ²University of British Columbia, Dept. of Urologic Sciences, Vancouver, Canada, ³University of California San Diego School of Medicine, Dept. of Urology, San Diego, United States of America, ⁴University of Wisconsin-Madison, Dept. of Urology, Madison, United States of America, ⁵University of Texas Southwestern Medical Center, Dept. of Urology, Dallas, United States of America, ⁶Pennsylvania State University College of Medicine, Dept. of Urology, Hershey, United States of America, ⁷Cleveland Clinic, Glickman Urological and Kidney Institute, Cleveland, United States of America, ⁸University of North Carolina School of Medicine, Dept. of Urology, Chapel Hill, United States of America, ⁹Palmetto Health USC Medical Group, Dept. of Urology, Columbia, United States of America, ¹⁰University of California Irvine School of Medicine, Dept. of Urology, Orange, United States of America, ¹¹University of California San Francisco School of Medicine, Dept. of Urology, San Francisco, United States of America, ¹²Dartmouth Hitchcock Medical Center, Dept. of Urology, Lebanon, United States of America, ¹³University of Florida College of Medicine, Dept. of Urology, Gainesville, United States of America, ¹⁴McGill University Health Center, Dept. of Urology, Montreal, Canada, ¹⁵University of California Davis School of Medicine, Dept. of Urology, Sacramento, United States of America, ¹⁶University of Washington, Dept. of Urology, Seattle, United States of America, ¹⁷Université de Montréal, Dept. of Urology, Montreal, Canada

Development of a risk calculator to predict spontaneous stone passage in patients with acute ureteric colic

By: Gao C.¹, Peters M.², Jayaraajan K.¹, Todd M.³, Cashman S.¹, Nambiar A.¹, Cumberbatch M.⁴, Lamb B.¹, Peacock A.⁵, Van Son M.J.², Van Rossum P.S.N.², Pickard R.⁶, Erotocritou P.⁷, Smith D.⁸, Kasivisvanathan V.¹, Shah T.¹, British Urology Researchers in Surgical Training (BURST) Collaborative MIMIC Study Group

¹British Urology Researchers in Surgical Training (BURST), London, United Kingdom, ²University Medical Center Utrecht, Cancer Center, Dept. of Radiation Oncology, Utrecht, The Netherlands, ³Australian Young Urology Researchers Organisation (YURO),
546  Cost-efficiency analysis of reusable versus single-use flexible ureteroscopy and the development of a formula to evolve to a cost-efficient hybrid model
By: Van Compernolle D., Veys R., Beysens M., Van Haute C., Tailly T.
Ghent University Hospital, Dept. of Urology, Ghent, Belgium

548  The risk of unplanned healthcare utilization in patients undergoing ureteroscopy with uncorrected bleeding diathesis in a surgical collaborative
By: Hiller S.C., Swarna K., Leavitt D., Frontera J.R., Jafri S.M., Hollingsworth J., Dauw C., Ghani K.
For The Michigan Urological Surgery Improvement Collaborative.
University of Michigan, Dept. of Urology, Ann Arbor, United States of America, Henry Ford Health System, Dept. of Urology, Detroit, United States of America, Michigan Institute of Urology, Dept. of Urology, Rochester, United States of America, William Beaumont Hospital, Dept. of Urology, Royal Oak, United States of America

PT115  Antegrade flexible nephroscopy (second-look) in gas (CO2) medium: New technique for residual stones removal
By: Korolev D., Rapoport L., Tsarichenko D., Enikeev M., Enikeev D., Glybochko P.
Sechenov University, Dept. of Urology and Reproductive Health, Moscow, Russia

666  The first prospective assessment of S.T.O.N.E, Guy, CROES, S-ReSC nomograms in the prediction of percutaneous nephrolithotomy outcomes
Faculty of Medicine, Benha University, Dept. of Urology, Benha, Egypt

670  Super-mini PCNL (SMP) vs. standard PCNL for the management of renal calculi <2 cm: A randomized controlled study
To be confirmed

182  The effect of alternating bidirectional approach during shock wave lithotripsy for upper lumbar ureteric stones. A randomized controlled trial
To be confirmed

176  Pulse modulation with Moses technology improves popcorn laser lithotripsy
By: Black K.M., Aldoukhi A.H., Teichman J., Hall T., Roberts W., Ghani K.
University of Michigan, Dept. of Urology, Ann Arbor, United States of America, University of British Columbia, Vancouver, Dept. of Urologic Sciences, Vancouver, Canada, University of Michigan, Dept. of Engineering, Ann Arbor, United States of America

PT131  In vitro comparison of ablation rates between superpulsed thulium fiber laser and ho:Yag laser for endocorporeal lithotripsy
By: Panthier F.¹, Doizi S.¹, Berthe L.², Traxer O.¹, Groupe de Recherche Clinique sur la lithiase urinaire (n°20)
¹Hopital Tenon, Dept. of Urology, Paris, France, ²Ecole Supérieure des Arts et Métiers, PIMM Laboratory, Paris, France
3D guidance for stone management

Video Session 7

Sunday 26 July
18:45 - 19:15

Location: Virtual room 1

Chairs: J-T. Klein, Ulm (DE)
M. Lezrek, Meknes (MA)
A. Skolarikos, Athens (GR)

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

V008

The mobile app displaying inside view of the kidney’s PCS and measuring infundibulopelvic angle. Is there any difference with the existing methods?

By: Guliev B., Komyakov B., Talyshinskii A.
North-Western State Medical University named after I.I.Mechnikov, Dept. of Urology, Saint Petersburg, Russia

V010

3D mixed reality guidance for percutaneous puncture during kidney stones surgical treatment

By: Porpiglia F., Checcucci E., Amparore D., Peretti D., Piramide F., De Cillis S., Verri P., Niculescu Razvan G., Poggio M., Cossu M., Fiori C.
AOU San Luigi Gonzaga, University of Turin, Dept. of Urology, Orbassano, Italy