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Welcome by the EAU Congress President  
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Dear Colleagues,

Bienvenue à Paris!

It is a tremendous honour and pleasure to welcome you to my home city for the 21st Annual EAU Congress from 5-8 April 2006. It is 10 years since the EAU Congress was held in Paris and in that interim period the EAU has grown into a multi-faceted professionally renowned organisation. The 21st Annual EAU Congress will provide a platform for you to interact with your colleagues, will stimulate and create an exchange of ideas and will be personally rewarding.

As professionals in the field of urology we are constantly striving to increase our knowledge and with this in mind the EAU Scientific Committee have compiled an exciting and varied programme. The high-quality scientific programme will open new perspectives on issues related to treatment and patient care. The plenary sessions and core symposia will indeed provide you with a full update on the most important aspects and latest achievements in urology.

The Congress will also serve the educational mission of the EAU through a variety of courses and hands-on training sessions organised by the European School of Urology (ESU). The Congress will be fully accredited by the EU-ACME (European Urology - Accredited Continuing Medical Education).

To coincide with the scientific programme, an extensive commercial exhibition will be held where companies and suppliers will exhibit their newest innovations. Your participation in this Congress will also be an opportunity for you to discover, or rediscover, Paris – City of Light. Paris is a city of art and theatre, of The Eiffel Tower and Notre Dame, of the Champs Elysées and the Canal St-Martin, of nightclubs and the Moulin Rouge – never a dull moment in this historic, romantic and bustling city.

I look forward to welcoming old friends and meeting new ones in what promises to be a successful and memorable Congress!
Dear colleagues,

It is a great pleasure for me to welcome you to Paris for the 21st Annual EAU Congress.

The Annual EAU Congress is one of the most important events of our association and it is only with the dedication of many people that a medical congress of this magnitude and diversity can be realised.

This programme book is the result of the commitment of the EAU Scientific Office together with all those people who have directly contributed or who are taking part in the programme. The aims of the programme are twofold:

Firstly, the plenary and sub-plenary sessions will deliver up-to-date scientific information to delegates engaged in clinical practice, providing a full update on the latest developments in the field of urology which clearly indicates what can be achieved or utilised and what remains debatable.

Secondly, the abstract sessions are a platform to foster scientific exchanges and discussions between clinician-researchers, based on recently concluded work or work in progress.

The plenary and sub-plenary programme is the culmination of the hard work of the EAU Scientific Office under the guidance of Professor F. Hamdy. Leafing through the programme book, you will find that ‘no (urological) stone has been left unturned’ and that the majority of the questions of the day will be addressed, if not answered.

One of the measures of a successful congress is through its scientific submissions and these are the direct result of your personal energetic input. The Paris Congress sets a new record for abstract submissions with more than 3,200 abstracts being submitted. You can be assured that reviewers and members of the EAU Scientific Office have done their best to compile a marvelous programme, the only regret being that they were unable to accept more papers due to time and space constraints.

I wish you an excellent 2006 EAU Congress in Paris.
EAU Patrons and Contributors

The European Association of Urology respectfully acknowledges the EAU Corporate Sponsors and all other sponsors for providing educational grants and services to the 21st Annual EAU Congress

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**KARL STORZ GMBH & CO.KG page 309**

**17.30-19.00**
**Symposium**
Clinical experience of Duloxetine in women with Stress Urinary Incontinence (SUI) symptoms
**BOEHRINGER INGELHEIM GMBH/ ELI LILLY page 173**

**17.30-19.00**
**Symposium**
Facing the current challenges in BPH
**GLAXOSMITHKLINE page 169**

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**Thursday, 6 April, Afternoon**

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**SUB-PLENARY SESSION 12**

11.00-12.00 Debate

Is surveillance an option for renal cancer?

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**LEVEL 3**

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<td>16.00-17.00</td>
<td>Poster Session 70</td>
<td>15.45-17.15</td>
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<tr>
<td>Hands-on Training Session 5: Holmium Laser Workshop LUMENIS page 313</td>
<td>Hands-on Training Session 6: Holmium Laser Workshop LUMENIS page 313</td>
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<td>Prostate cancer: PSA and novel markers</td>
<td>Poster Session 71</td>
<td>Prostate cancer: Screening/early detection</td>
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<td>17.30-19.00</td>
<td>Symposium</td>
<td>Targeted agents in the management of RCC: The role of the urologist</td>
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<td>Exploring the limits of 5α-reductase inhibitors in prostate cancer prevention, detection and treatment</td>
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<td>07.00</td>
<td><strong>SUB-PLENARY SESSION 16</strong></td>
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<td><strong>SUB-PLENARY SESSION 17</strong></td>
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<td><strong>SUB-PLENARY SESSION 19</strong></td>
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<td><strong>SUB-PLENARY SESSION 18</strong></td>
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<td><strong>SUB-PLENARY SESSION 15</strong></td>
<td>Room</td>
<td><strong>STATE-OF-THE-ART LECTURE</strong></td>
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<td></td>
<td>07.45-08.15 State-of-the-art lecture</td>
<td>Nomograms in prostate cancer</td>
<td>07.45-08.15 State-of-the-art lecture</td>
<td>Small renal tumors: Pre- and post operative evaluation</td>
<td>07.45-08.15 State-of-the-art lecture</td>
<td>The long term outcome of medical treatment for BPH</td>
<td>07.45-08.15 State-of-the-art lecture</td>
<td>The evolution of urological training in Europe</td>
<td>07.45-08.00 EORTC-GU Session highlights</td>
<td>08.00-08.15 EORTC-GU Session highlights</td>
<td>08.15-08.30 ESU Session highlights</td>
<td>08.30-08.45 ESU Session highlights</td>
<td>07.45-08.00 ESU Session highlights</td>
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<td>08.15-08.45 State-of-the-art lecture</td>
<td>Imaging strategies in prostate cancer</td>
<td>08.15-08.45 Urological Research Society lecture</td>
<td>Management of BCG failures in superficial bladder cancer</td>
<td>08.15-08.65 State-of-the-art lecture</td>
<td>How to handle high-risk infections in urology</td>
<td>08.15-08.45 EUSP Session</td>
<td>08.00-08.15 EORTC-GU Session highlights</td>
<td>08.15-08.30 ESU Session highlights</td>
<td>08.30-08.45 ESU Session highlights</td>
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<td>08.00-09.10 Award session 3</td>
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<td>09.10-09.25 State-of-the-art lecture</td>
<td>History of urology in France</td>
<td>09.25 - 09.45 EAU Guidelines</td>
<td>What’s new in 2006?</td>
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<td>09.45 - 10.05 State-of-the-art lecture</td>
<td>The dilemma of over-detection and overtreatment of prostate cancer</td>
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<td>10.05 - 10.40 Round table discussion</td>
<td>Radical prostatectomy: To do or not to do</td>
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<td>11.00 - 11.35 Round table discussion</td>
<td>The optimal management of the patient with hormone resistant prostate cancer</td>
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<td>11.35 - 13.00 Souvenir session from the EAU Scientific Committee from page 268</td>
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</tbody>
</table>
Floorplans Palais des Congrès

Level A (-1)

Level 0

Cloakroom

EAU Information Desk
Floorplans Palais des Congrès

Level 1

- EAU Square
  - Cyber Corner
  - DVD Library
  - EAU Membership
  - EAU Publications
  - EBU Desk
  - EAU Berlin 2007
  - Historical Exhibit

- Rooms 111–113 and 131–138

- eURO Auditorium

- Astellas Suite/Room 125

- Rooms 101–104 and 121–128

- Catering Area

Level 2

- Rooms 211–213 and 231–237

- Room 241

- Speakers Service Centre/Room 241

- Rooms 201–204 and 221–227

- Catering Area

- Internet Corner

- Presentation Training Centre
General Information

Abstract book
The abstract book is a special supplement of European Urology. It was sent to all EAU members prior to the congress and the abstracts are available for EAU members through the EAU website. The abstract book is also included in the congress bag. Additional copies can be purchased at the Cashier Desk (on level 3) during the congress. An abstract CD will be provided to all congress delegates.

Abstract CD’s are sponsored by SANOFI-AVENTIS

Accessibility Palais des Congrès
The 21st Annual EAU Congress will take place at the Palais des Congrès in Paris. The Palais des Congrès is easily accessible by public transportation (Metro line 1: Porte Maillot).

Palais des Congrès
2, Place de la Porte Maillot
75017 PARIS
P +33 (0) 1 40 68 25 55
F +33 (0) 1 40 68 27 40
W www.palais-congres-paris.fr

Air France and airport info
Air France has been appointed as the official airline carrier for the 21st Annual EAU Congress and is offering special congress fares to all congress participants. Air France offers a comprehensive global route network linking many major cities to Paris.

Airport Paris: Roissy Charles de Gaulle
Roissy Charles de Gaulle Airport is located 23 kilometres North-East of Paris and is the city’s largest airport. The airport is served by taxi, Air France shuttle service, TGV and RER trains.

The Air France shuttle service runs a bus service between 05:50 and 23:00 hrs. Buses run every ten minutes from the airport to the Palais des Congrès. The journey takes approximately 40 minutes.

The rapid RER train service links Roissy Charles de Gaulle Airport with central Paris. The trains run every 15 minutes (eight minutes in peak periods); the journey takes approximately 35 minutes.

Useful phone numbers
Paris Roissy Charles de Gaulle Airport +33 (0) 1 48 62 22 80
Air France +33 (0) 8 20 82 08 20
Taxi services G7 +33 (0) 1 47 39 47 39

Badges
The badge classification is as follows:
Red : Congress delegate EAU member
Grey : Congress delegate non-EAU member
Green : Exhibitor
Blue : Health care professional (nurse)
Orange : Press
White : Accompanying person
Yellow : Organising staff
Pink : Special registration

Bank and exchange
The national currency in France is the euro (€). Banking hours in Paris are generally from 10.00 to 17.00 hrs. on Monday to Friday. Some branches are open on Saturday.

Automatic cash machines can be found in most commercial centres. The nearest automatic cash machine is located on level A of the Palais des Congrès. It accepts most international credit cards (Visa, Mastercard, Amex) and operates 24 hours a day, seven days a week.

Business Centre
A business centre is available at the Hotel Concorde Lafayette.

Car park
There is an underground car park directly under the Palais des Congrès. The car park has direct access to the Palais des Congrès.

Currency exchange
Currency exchange can be carried out at all bank branches and post offices. Exchange offices ("Bureau de change") can also be found in large department stores, railway stations, airports and close to tourist sites.
Please note: Although the exchange rate is fixed, commission rates are not. These must be clearly displayed.
An exchange office is located on level 0 of the Palais des Congrès and is open from Monday to Saturday from 09.00 to 20.00 hrs.

Cellular phones
Cellular phones must be switched off during all sessions.

Certificate of Attendance
A Certificate of Attendance for the 21st Annual EAU Congress is included in the congress bags. A list of CME accreditation points granted by various national urological societies and the European Board of Urology is available in the programme book as well as on the congress website.

Climate and weather conditions
Paris has an intermediate climate with cold winters and hot summers. In April the weather is usually pleasant with an average temperature of 16°C. It is however recommended to bring a raincoat and sweater.
General information

Cloakroom/Luggage
The cloakroom is located on the ground level (level 0) and is at participants’ disposal during congress hours. Please be sure to collect all personal effects at the end of the day.

Congress bags
Each delegate receives a voucher for a congress bag which includes a programme book, abstract book and exhibition guide.

The congress bags are sponsored by ASTELLAS

Congress hours
<table>
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<tr>
<th>Day</th>
<th>Time</th>
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<tr>
<td>Wednesday, 5 April</td>
<td>08.30 – 21.00</td>
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<tr>
<td>Thursday, 6 April</td>
<td>07.30 – 19.00</td>
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<tr>
<td>Friday, 7 April</td>
<td>07.45 – 19.00</td>
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<tr>
<td>Saturday, 8 April</td>
<td>07.45 – 13.00</td>
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</tbody>
</table>

Contacts
Congress Manager
Ms. Patricia de Bont
(p.debont@congressconsultants.com)

Exhibition Manager
Ms. Henriet Wieringa (h.wieringa@congressconsultants.com)

Sponsoring
Mrs. Jacqueline Roelofswaard (j.roelofswaard@uroweb.org)

Scientific programme
Ms. Silvia de Bruin (s.debruin@congressconsultants.com)

Registrations
Ms. Marije Koops (m.koops@congressconsultants.com)

ESU courses
Mrs. Jacobijn Sedelaar (esu@uroweb.org)

All other information
info@congressconsultants.com

Daily Congress Newsletter
Daily congress newsletters will be provided on the first 3 congress days.

EAU Cyber Corner
The EAU Cyber Corner, included in the EAU Booth (booth PA27 on level 1), is at your disposal to check the EAU website: www.uroweb.org.

Supported by an unrestricted educational grant from ASTELLAS

EAU Digital Video Library
The EAU digital video library, included in the EAU Booth (booth PA27 on level 1), is operational during exhibition hours. A wide choice of videos from the European Association of Urology including the videos presented in Paris and at past EAU Congresses can be viewed on request on individual monitors. The prize winning videos will be on continuous display. All videos can be copied to DVD, a service that is provided free of charge for all congress delegates.

Supported by an unrestricted educational grant from ASTELLAS

EAU Education office (European School of Urology)
The European School of Urology, working with European faculties, aims to provide high quality international urology educational courses. The ESU has a special booth on level 3 with extensive information on the activities of the European School of Urology (ESU). Registration for the courses can be made on-line through: www.eauparis2006.org.

All congress delegates will receive an ESU Course CD.

Check page 271 for the extensive course programme.
ESU Course CD’s are sponsored by NOVARTIS PHARMA AG

Fees ESU and ESU-ESUT courses (for congress registered participants only):

<table>
<thead>
<tr>
<th>Course</th>
<th>Non-EAU member</th>
<th>EAU members, residents</th>
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<tr>
<td>C = 2 hrs.</td>
<td>€ 40</td>
<td>€ 25</td>
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<tr>
<td>C = 3 hrs.</td>
<td>€ 60</td>
<td>€ 40</td>
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Fees excluding VAT

Registration fee for ESU courses will be waived for all ESRU-EAU junior members and EAU junior members (max. 10 free registrations are granted per course based on a first come, first served basis).
**General Information**

**EAU Square**
The EAU square in the exhibition area (booth PA27 on level 1) consists of the EAU Cyber Corner, the EAU Booth, the EBU Corner, the EAU Digital Video Library and the EAU Historical Exhibition. The EAU Booth provides information on membership status and membership benefits. Non-members are invited to visit the EAU Booth to inquire about the many advantages for EAU members and to apply for EAU membership.

**European Board of Urology (EBU) info desk**
For information about the activities of the EBU, such as the annual examinations in urology, in-service assessment, accreditation of residency training programmes in urology within Europe, please visit the EBU corner at the EAU square (booth PA27 on level 1).

**EU-ACME info desk**
Information about the EU-ACME programme, your acquired CME credit points and membership cards can be obtained at the EU-ACME corner at the EAU square (booth PA27 on level 1).

**Electricity**
The electricity in France runs on 220 volts and the frequency is 50 Hz. Wall outlets take plugs with two male contact pins. A plug adaptor should be taken along if incompatible electronic gadgets are used.

**European Urology**
European Urology, the journal of the EAU, has been a respected urological forum for over 20 years, and today is read by more than 9,000 urologists across the globe. With an impact factor of 2.651 the journal has become one of the world’s leading medical periodicals.

To meet today’s new challenges, we have introduced an innovative range of developments that will ensure European Urology continues to provide the best clinical guidance, research and education for urologists across Europe and the world.

See the new European Urology for yourself – visit either the European Urology or EAU booth at the exhibition.

**Exhibition**
An extensive technical exhibition, involving technical equipment manufacturers, pharmaceutical companies and scientific publishers, will be held jointly with the congress on levels 1 to 3 of the Palais des Congrès.

**Exhibition hours**

<table>
<thead>
<tr>
<th>Day</th>
<th>Hours</th>
<th>Level</th>
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<tbody>
<tr>
<td>Wednesday, 5 April</td>
<td>10.00 – 21.00 hrs.</td>
<td>Level 1</td>
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<tr>
<td>Thursday, 6 April</td>
<td>10.00 – 18.30 hrs.</td>
<td>Levels 2 &amp; 3</td>
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<tr>
<td>Friday, 7 April</td>
<td>09.00 – 17.45 hrs.</td>
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<tr>
<td>Saturday, 8 April</td>
<td>09.00 – 13.30 hrs.</td>
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**First aid**
There is a medical unit present for first aid on Level 1 (room 315 on level 3). In case of an emergency contact a security guard immediately.

**Future meetings area**
Posters and other documentation on future meetings can be displayed in the “Future Meetings Area” on level 1. It is strictly forbidden to put up promotional material at any other location in the building.

**Hospitality suites: Special Latin-American and Asian Suites**
During the 21st Annual EAU Congress there will be special hospitality suites to welcome congress delegates from the Latin-American and Asian countries. You can find the suites at level 2 (room 231 & room 233).

**Commercial hospitality suites**

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<tr>
<th>Country</th>
<th>Room</th>
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<tbody>
<tr>
<td>American Medical Systems</td>
<td>127</td>
<td>Level 1</td>
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<tr>
<td>Astellas Pharma</td>
<td>125</td>
<td>Level 1</td>
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<tr>
<td>AstraZeneca</td>
<td>111</td>
<td>Level 1</td>
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<tr>
<td>Cook</td>
<td>135</td>
<td>Level 1</td>
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<tr>
<td>Kyowa Hakko</td>
<td>104</td>
<td>Level 1</td>
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<tr>
<td>Pfizer Inc</td>
<td>212</td>
<td>Level 2</td>
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**Hotel accommodation**
The EAU has contracted the company “Colloquium” in Paris to deal with the housing for congress participants. Colloquium staff will be available for queries at the hotel desk in the registration area.

**Insurance**
The organisers do not accept responsibility for any personal damage. Participants are strongly recommended to arrange their own personal insurance.

**Internet corners**
There are two internet corners on level 2 and level 3 of the Palais des Congrès. Delegates can use the computers free of charge.

**Language**
All presentations during the congress will be conducted in English, the official language of the EAU. There will be no translation provided, only during the EAU/CAU session and the EAUN Meeting.

**Local time**
From the end of March until the end of October, French time goes from GMT+1 to GMT+2 (GMT = Greenwich Meridian Time).
Lost and found
Found items should be returned to the Information Desk on level 0. Should you unfortunately happen to lose something, please report to this desk for assistance.

Messages
Messages can be left and collected at the Information Desk on level 0. Please regularly consult the monitors at various points in the congress centre to see whether any message has been left for you.

Phone numbers
<table>
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<tr>
<th>Service</th>
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<tbody>
<tr>
<td>SAMU (medical emergencies)</td>
<td>15</td>
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<tr>
<td>Police emergency</td>
<td>17</td>
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<td>Fire service emergency</td>
<td>18</td>
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<tr>
<td>European emergency line</td>
<td>112</td>
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Photo service
Photos taken by the official EAU photographer during the congress and the official social events can be purchased during and after the congress through the congress website: www.eauparis2006.org.

Poster Builder Service
The EAU offered a Poster Builder Service that enabled you to create your poster for the 21st Annual EAU Congress on-line. Your posters are ready for pick-up at the Speakers Service Centre in Paris (room 241 on level 2).

Press centre
Journalists can obtain free registration to the Congress at the Press registration Desk in the registration area on level 3. All media operators must show their credentials (press card dated 2006 and original assignment letter). All press are invited to report to the EAU Press Centre (room 362 on level 3) to obtain the assistance and information they require. Internet access, fax machine, printer and photocopier are provided.

Restaurants
In France you will find a variety of restaurants, from the simple, small, intimate ones to famous, gourmet restaurants, along with brasseries, inns and tea rooms. The majority of restaurants serve food between 12.00 – 15.00 hrs and 19.00 – 23.00 hrs.

Shopping
Paris is one of the fashion capitals of the world. Go window-shopping at the great couturiers, along the Avenue Montaigne, the Faubourg Saint-Honoré, the Place de la Madeleine, the Saint-Sulpice quarter or Sèvres-Babylone, between the Rues de Grenelle, du Cherche-Midi and des Saints-Pères.

Smoking policy
Smoking is prohibited inside the congress centre.

Tourist Information
Tourist information will be available at the Paris Info Desk in the registration area on level 3. Excursions can be booked on-line through the congress website: www.eauparis2006.org.

Transportation
Congress delegates receive a transportation pass that is valid on all public transport within the City of Paris. Also a plan of the public transport is available at the transportation desk.
Speakers’ Guidelines

Speakers Service Centre - Room 241/Level 2

Only digital presentations will be accepted during the congress and all presentations should be handed in at the Speakers Service Centre at least two hours prior to the start of the session.

Opening hours
Tuesday, 4 April 14.00 – 19.30 hrs.
Wednesday, 5 April 06.30 – 20.00 hrs.
Thursday, 6 April 06.00 – 19.30 hrs.
Friday, 7 April 06.00 – 19.30 hrs.
Saturday, 8 April 06.00 – 13.30 hrs.

If you are a chair person
Locate your session room in time. Please be in your session room at least 15 minutes prior to the start of the session.
We remind you that:
• Speakers should strictly observe timing.
• Discussants should not speak without permission and must first clearly state their name, institution and country of origin.

If you are a speaker in an oral session
Locate your session room in time. Please turn in PowerPoint presentations at the Speaker Service Centre in room 241 on level 2 at least two hours prior to the start of your session. Failure to do so could result in presentations not being available for projection when required. Facilities are provided for PowerPoint presentations only. Please be in your session room no later than 15 minutes prior to the start of the session. Do remember that time allotted to speakers in oral sessions is 9 minutes (including 2 minutes for discussion). Follow the chairs’ instructions, in particular those regarding the timing of your lecture.

If you are presenting a poster
Posters must be put up in the room 15 minutes prior to the start of the session. The poster boards are numbered and your poster should be mounted on the board which corresponds with your abstract number. Pushpins are available in the session room. Please remove your poster immediately at the end of the session. PowerPoint presentations are not allowed during poster sessions. The PDF of your poster, supplied by yourself prior to the congress, will be projected during discussion of your abstract. In case you forgot to submit the PDF prior to the congress, you can still do this up to 2 hours prior to your session at the Speaker Service Center in room 241 on level 2.

Disclose links to the industry
The EAU Scientific Committee request that you disclose to the audience any links you may have with the industry related to the topic of your lecture at the beginning of your session. A link can be; being a member of an advisory board or having a consultancy agreement with a specific company.

Presentation training centre
At this year’s EAU Congress, as in previous years, you can take advantage of working with speaking consultant Mr. Paul Casella (Iowa, US) to help improve your presentation and delivery skills. The one-on-one half hour sessions are free of charge and are available to all speakers. As these sessions have proved to be very popular in the past, please make your appointment at the Speaker Service Centre in room 241 on level 2; you can sign up for an appointment from Wednesday 5 April to Saturday 8 April. The presentation training sessions are held in a room next to the Speaker Service Centre.
**Social Programme**

**Opening Ceremony and Welcome Cocktail**
The EAU Opening Ceremony contains entertaining shows and special award presentations. The Ceremony will be followed by a Welcome Cocktail where you will have a taste of the famous French cuisine. The Ceremony and Welcome Cocktail will take place at the Palais des Congrès.

**Opening Ceremony**
- **Date:** Wednesday, 5 April 2006
- **Time:** 18.15 – 19.30 hrs.
- **Location:** eURO Auditorium
- **Costs:** Included in the registration fee

**Welcome Cocktail**
- **Date:** Wednesday, 5 April 2006
- **Time:** 19.30 – 21.00 hrs.
- **Location:** Palais des Congrès, Exhibition area Level 1
- **Costs:** Included in the registration fee

**Nurses Dance Evening**
For all nurses attending the 7th Meeting of the European Association of Urology Nurses (EAUN), organised in conjunction with the 21st Annual EAU Congress, a special evening has been organised which will give the opportunity to meet and socialise with colleagues in the field. As in previous years an enjoyable evening of music and dancing is guaranteed. Non nursing delegates may also attend this evening at their own expense.

- **Date:** Thursday, 6 April 2006
- **Time:** 20.00 – 01.00 hrs.
- **Location:** Private Club - Les Planches
  40 rue du Colisée
  75008 PARIS
- **Costs:** Included in the registration fee for healthcare professionals; other delegates have free access and only need to pay their drinks.
- **Transport:** Participants are to use their transport passes to go by metro to the venue (line 1: Franklin Roosevelt or line 9: Franklin Roosevelt or St. Philippe du Roule)

**Sponsored by HOLLISTER EUROPE LTD.**

**EAU Evening**
Located in an old wine storage facility along the banks of the river Seine this year’s EAU Evening will take place at ‘Les Pavillons de Bercy’, an enchanting museum with old games and carrousels. This large collection of authentic fairground objects and carrousels provides an insight into the world of fairground arts from the 9th century.

Take a stroll through ‘Le Theatre du Merveilleux’ where the wonders of the magic lantern will enchant and impress. This extraordinary room has been inspired by fairy tales from around the globe.

- **Date:** Friday, 7 April 2006
- **Time:** 20.00 – 23.30 hrs.
- **Location:** Les Pavillons de Bercy, 53, Avenue des Terroirs de France, 75012 Paris, France
- **Costs:** € 50,- for all registered delegates
  € 100,- for exhibitors and non-delegates
  Fees excluding 19.6% VAT
- **Transport:** Participants are to use their transport passes to go by metro to the venue (line 14: Cour St. Emillion)
- **Dress Code:** Casual (ladies, please be aware that there are several cobble stoned areas)
Excursions

Tour E1 Paris City Tour

Date: Wednesday, 5 April 2006  
Time: 14.00 - 17.30 hrs.  
Price: €41,- per person

This tour is especially designed for those who wish to discover the essentials of Paris including the Opéra, Place de la Concorde, Champs-Elysées, Arc de Triomphe, Eiffel Tower, the Invalides, Latin Quarter and the beautiful cathedral Notre Dame.

Tour E2 Orsay Museum

Date: Thursday, 6 April 2006  
Time: 09.00 - 12.30 hrs.  
Price: €51,- per person

The transformation of the Orsay train station into a museum respects the original architectural design. This museum is dedicated to all forms of artistic expression: painting, sculpture and photography of the 1848-1914 period. The era of impressionist painters is particularly well represented with the masterpieces of Manet, Monet, Renoir and Degas to name but a few.

Tour E3 Versailles and Trianons

Date: Thursday, 6 April 2006  
Time: 09.00 - 17.30 hrs.  
Price: €146,- per person

This estate is often considered the most outstanding chateau in the world. Built during the reign of Louis XIV the Sun King, it is testimony to the splendor of French classicism and the power of one single man. The visit to the royal apartments traces this lavish chapter in the history of France. Visit the hall of mirrors where the ‘Treaty of Versailles’ was signed and not to be missed are the splendid apartments of Marie Antoinette. After lunch the afternoon will be devoted to visiting the Trianons and the Hameau de la Reine.

Tour E4 Louvre Museum

Date: Friday 7, April 2006  
Time: 09.00 - 12.30 hrs.  
Price: €54,- per person

The Louvre is the largest museum in the world and the quality and sheer variety of its contents make it a must see on your visit to Paris. It plays host to an enormous collection of paintings, drawings, antiques sculptures, furniture, coins and jewellery. Next to the well known masterpieces such as the Mona Lisa and the Venus de Milo extensive art collections are displayed throughout the many galleries.
Excursions

Tour E5  Fontainbleau and Vaux-Le-Vicomte

Date:  Friday, 7 April 2006
Time:  08.30 - 17.30 hrs.
Price:  € 146,- per person

Used by the kings of France from the 12th century, the medieval royal hunting lodge of Fontainbleau, standing at the heart of a vast forest in the Ile-de-France, was transformed, enlarged and embellished in the 16th century by François I, who wanted to create a 'New Rome'. Surrounded by an immense park, the Italianate palace combines Renaissance and French artistic traditions. North of Fontainebleau stands the majestic Vaux-Le-Vicomte castle. The castle was built in 1656 by finance wizard Fouquet, who employed the most famous artists of the period including Le Vau, Le Brun, and Le Nôtre. Vaux-Le-Vicomte today stands as a tribute to the extraordinary genius of Fouquet.

Tour E6  Conciergerie, Sainte-Chappelle and Notre-Dame

Date:  Saturday, 8 April 2006
Time:  09.00 - 12.30 hrs.
Price:  € 64,- per person

The Conciergerie, a fortress like building on the Ile-de-la-Cité built by Philippe the Fair (1284-1314) now makes up much of the Palais de Justice complex. Its history as a place of imprisonment, torture, and death is significant. Among its more famous prisoners were Marie Antoinette, Charlotte Corday, Danton, and Chenie. Marie Antoinette’s cell is now a chapel to her memory, and includes her crucifix, and two life portraits. Just a few metres away stands the magnificent Sainte Chapelle. Built in the French Gothic style, it sits in the heart of Paris, on the Ile de la Cité just west of Notre Dame. King Louis IX (Saint Louis) had it built to house the precious holy relics that he purchased from the Emperor of Constantinople. Not far from here lies the Notre-Dame. Dating back to the 13th century it is a masterpiece of Gothic art in Western Europe. Its stained glass and huge interior are stunning artistic experiences of mystical dimension.

Excursions can be booked through: www.eauparis2006.org
About Paris

City Overview
For some, Paris represents a city of romance, for others, the French capital is a sparkling mix of writers and artists. While the first visit to the French capital may surprise, it is unlikely to disappoint. On all sorts of levels – historical, architectural, cultural – this is a fascinating city.

The River Seine splits the city into the Rive Droite (Right Bank) north of the river and the Rive Gauche (Left Bank) south of the river. Paris is just 10km by 11km, and is easily explored on foot or via the efficient transport system. Orientation is simplified by the 20 arrondissements (1st to 20th, in French 1er to 20e), spiralling outwards from the central Île de la Cité to Porte de Montreuil on the eastern edge of the city.

The life of the modern city began about 2500BC when a Celtic tribe called the Parisii established a fishing settlement Lutècia, on the Île de la Cité. The Romans were later drawn to this strategic location, a natural crossroads between Germany and Spain, and took control in 52BC. The first King of France Hugues Capet, ruled from Paris in AD987. Despite English rule between 1420 and 1436, a series of French kings brought the centralisation of France, with Paris at its cultural, political and economic heart.

The history of Paris can be uncovered throughout its distinctive districts. Hilly Montmartre, with its village atmosphere, was where the Paris Commune began in 1871; the Marais evokes medieval Paris, its winding streets a sharp contrast to the wide, orderly Haussmann boulevards, devised by Napoleon III. These grand 19th-century avenues still dominate the city. The grands travaux (large projects) of Président Mitterrand added the Grande Arche de la Défense, the ultra-modern Opéra de la Bastille, the impressive Institut du Monde Arabe, and constructed a glass pyramid in the central courtyard of the Louvre.

Nightlife
When planning an evening out in Paris, it is more important to decide where to go than what to do. The Champs-Elysées and Trocadéro areas are full of tourists and overpriced nightspots, but may be worth considering. Pigalle, it is the seedy neighbourhood of Paris but home to some good music venues including the Moulin Rouge cabaret, where the can-can is still performed. Montmartre is heaving in summer but the views over Paris from Sacré-Coeur are unbeatable. Bastille is buzzing with bars and clubs but is a bit too hectic for some. The best area for an evening’s café-hopping is the Marais district, closely followed by the increasingly fashionable Oberkampf, which suits a younger crowd.

Restaurants
Dining in Paris is an adventure for the most experienced palette. French food is served in restaurants, bistros, tea salons, cafes and wine bars. Apart from the huge variety of French cuisine, there are a multitude of international restaurants to choose from. Foods range from rich French dishes to simple local cuisine. Almost every chef brings the cuisine of his birth to his menu.

You can dine in Paris at any time day or night, particularly in the many cafes, brasseries and bistros. Good food can be found everywhere in the city; however, the Left Bank including St-Germain-des-Pres and the Latin Quarter have the most restaurants. Many well-known cafes are located in Montparnasse including the splendidly preserved 1920s cafes Le Select and La Rontonde. The more expensive restaurants are located around the Invalides and Palais de Chaillot.

The eating diversity of Paris is great. The long tradition of regional cuisine can be experienced and enjoyed in many of the bistros. Dress code is generally informal unless you choose to dine at a three-star restaurant where the dress code tend to be more formal. Table reservations are recommended to avoid waiting. Bon appetit!

Shopping
The Parisian fashion ideal is elegant. Trends may come and go but Paris is always at the fashion forefront and there are few cities where you can find so many top-quality designers.

The exclusive designer shops are in the 8th arrondissement, in the golden triangle formed by Avenue des Champs-Elysées, Avenue Montaigne and Rue François 1st and along Rue du Faubourg St-Honoré. A typically Parisian shopping experience can be had at the main department stores on Boulevard Haussmann, – Les Galeries Lafayette and Au Printemps.

Métro Temple or Republique take the bargain shopper to the cheapest department store in the city, Tati, 172 rue du Temple, 3rd. Cut-price designer gear can be snapped up at the Mouton à Cinq Pattes, 8 rue St-Placide, 6th.

Those who enjoy intimate, friendly boutiques should head for the Marais district, in the 4th. Rue des Francs-Bourgeois is in the gay quarter sells designer kitsch, while the winding rue des Rosiers in the Jewish quarter has plenty of young designers whose works are displayed at L’Eclaireur. This area is at its busiest on Sunday, with many shops closed on Saturday due to the Jewish sabbath.

The Carrousel du Louvre, under the glass pyramid in the Louvre courtyard, is a good place for tasteful gifts but shoppers determined to take home plastic Eiffel Towers should head for rue de Rivoli, home to tourist kitsch.
About Paris

Most shops are open Monday to Saturday 0900/1000-1900/2000 and close between about 1200 and 1430 for lunch. Sales tax is 19.6%, as standard, although it varies widely between what are regarded as essential items and luxury goods. Non-EU visitors can get a tax deduction on purchases, from a certain amount, in any one establishment by obtaining a form at the relevant shop and presenting it to customs on departure.

Key Attractions

Tour Eiffel
The Eiffel Tower literally towers over the Champ de Mars in the smart 7th arrondissement. The top (third) floor offers a sweeping panorama of Paris. From directly underneath there is a fascinating view of the delicate ironwork of Gustave Eiffel, who was commissioned to build the tower for the Exposition Universelle in 1889, the centenary of the French Revolution.

Champ de Mars, 7th
Website: www.tour-eiffel.fr
Transport: Métro Bir-Hakeim; RER Champ de Mars-Tour Eiffel.

Cathédrale de Notre-Dame
The Notre-Dame Cathedral is located on the Ile-de-la-Cité, Bishop Maurice de Sully began construction in 1163 to outshine the new abbey at St-Denis; work was completed in 1345. The result is a Gothic masterpiece, with three stunning rose windows. Visitors can climb the 387 spiral steps to the top of the 75m (246ft) north tower. The views over the River Seine and the city centre are well worth the effort. There is also a Treasury with various liturgical objects on display.

6 Place du Parvis-Notre-Dame, 4th
E-mail: info@cathedraledeparis.com
Website: www.cathedraledeparis.com
Transport: Métro Cité; RER St-Michel-Notre-Dame.

Sacré-Cœur
A long, wide series of steps lead to the snowy-white-domed Sacré-Cœur that dominates Montmartre. A mishmash of styles, the Catholic church was built between 1870 and 1919 to atone for the ‘sins’ of the Commune. The interior is bright with neo-Byzantine mosaics and the domed tower offers a spectacular view over Paris. The crypt contains an interesting collection of religious relics and a slide show on the construction of the Basilica.

Pavris du Sacré-Coeur, 18th
Website: www.sacre.coeur-montmartre.com
Transport: Métro Abbesses or Anvers.

Musée National du Louvre
The Louvre first opened to the public in 1793 following the Revolution, a showcase of the art treasures of the kings of France. The museum comprises of three wings on four floors: Richelieu (along rue de Rivoli), Sully (around cour Carrée) and Denon (along the River Seine). The vast permanent collection includes Greek, Etruscan, Roman, Egyptian and Oriental antiquities, French, Spanish, Italian and northern European sculpture and 19th-century objets d’art. The painting collection is the strongest, with French, Italian, Dutch, German, Flemish and Spanish masterpieces from the mid-13th to the mid-19th centuries. Most famed French works include David’s Coronation of Napoléon, Ingres’ The Turkish Bath, Géricault’s depiction of disaster, The Raft of the Medusa and Delacroix’s ode to revolution, Liberty Leading the People. The Mona Lisa, in a bulletproof case, has since 2004 been housed in its own room. Excavations have exposed traces of the medieval Louvre, which are on display together with the history of the Louvre under the Cour Carrée in the entresol level in the Sully wing.

Cour Napoléon, 1st
E-mail: info@louvre.fr
Website: www.louvre.fr
Transport: Métro Palais Royal-Musée du Louvre.
Musée Rodin
Auguste Rodin (1840-1917) lived and worked in this 18th-century hôtel particulier. Now the Rodin Museum, his sculptures are displayed both in the interior and the gardens. Indoors, The Kiss portrays eternal passion frozen in white marble, while The Hand of God gives life to creamy white, half-formed figures. Works of Rodin’s mistress and pupil, Camille Claudel and paintings by Van Gogh, Monet, Renoir and Rodin himself, are also on display. The gardens are graced by the monumental bronze The Thinker, whose godly physique contrasts sharply with the decrepitude of the writhing figures of The Gates of Hell and the controversial final portrait of Balzac, once described as ‘a block that disgraces its author and French Art’.

77 rue de Varenne, 7th
Website: www.musee-rodin.fr
Transport: Métro Varenne.

Musée d’Orsay
The strength of this large museum, housed in a former train station by the River Seine, lies in its collection of Impressionist and Post-Impressionist art. The collection, covering the decisive 1848-1914 period, is arranged chronologically, beginning on the ground floor, jumping to the third, then descending to the middle level. Among the most famous works are Manet’s Déjeuner sur l’Herbe, rejected from the Salon of 1863; five of Monet’s paintings of Rouen Cathedral and the recently acquired realist work, L’Origine du Monde by Gustave Courbet, whose graphic depiction of the female sex continues to shock.

Entrances are at 1 rue de la Légion d’Honneur and 1 rue de Bellechasse, 7th
Website: www.musee-orsay.fr
Transport: Métro Solférino; RER Musée d’Orsay.

Musée National Picasso
Paris-based Pablo Picasso (1881-1973) owned most of this collection, the largest worldwide, housed in a 17th-century mansion in the Marais. All phases of his art are represented, with preparatory sketches and paintings covering the Blue Period, Rose Period, Cubism, Classicism, Surrealism and sculptures ranging from a huge plaster head to a small cat. Memorable works include the Blue Period self-portrait Paolo as Harlequin, the surreal Nude in an Armchair and poignant paintings of Marie-Thérèse. Photographs are displayed alongside the works they inspired and African masks with Picasso’s ‘primitive’ wood carvings. There is also a glimpse of the artist’s personal taste in paintings, with his Matisse and Cézanne paintings displayed.

Hôtel Salé, 5 rue de Thorigny, 3rd
Website: www.musee-rodin.fr
Transport: Métro Chemin Vert or St-Paul.

Centre Georges Pompidou
Considered outrageous in 1977, the Pompidou Centre, designed by Piano and Rogers, has become part of the Parisian landscape, primary coloured tubes and all. Although not yet thirty years old, the building has already been revamped and extended to cope with the huge numbers visiting its expanding collection of contemporary art and its multimedia library. It re-opened on the first day of the new millennium, the main focus being the 20th-century collection of the Musée National d’Art Moderne (MNAM).

Place Georges Pompidou, 4th
E-mail: info@cnac-gp.fr
Website: www.centrepompidou.fr
Transport: Métro Hôtel de Ville or Rambuteau; RER Châtelet-Les Halles.

About Paris
**Congress Hotels**

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www.hotel-balmoral.com  
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Place André Malraux
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Fax: +33 1 44 58 38 01
www.hoteldulouvre.com
Métro Palais Royal line 1

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75008 PARIS
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http://www.hotelvernet.com
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Métro Pont de Neuilly line 1

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Fax: +33 1 40 55 31 31
www.lemeridien.fr
Métro Porte Maillot line 1

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75014 Paris
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www.montparnasse.lemeridien.com
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www.novotel.com
Métro La Défense line 1

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www.boulogne.radissonssas.com
Métro Porte de Saint Cloud line 9

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Métro Georges V line 1
**Special session**

**Joint Session of the European Association of Urology (EAU) and the Confederación Americana de Urología (CAU)**

**Room Concorde 1 Level 4**

<table>
<thead>
<tr>
<th>Time</th>
<th>Event</th>
<th>Chair</th>
<th>Location</th>
<th>Code</th>
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<tbody>
<tr>
<td>08:30 - 08:50</td>
<td>EAU: Patient selection for radical prostatectomy</td>
<td>C. Llorente, Madrid (ES)</td>
<td>Room Concorde 1</td>
<td>con1-5-1410</td>
</tr>
<tr>
<td>08:50 - 09:10</td>
<td>CAU: CT-PET scan identification of cerebral nuclei involved in normal sexual response</td>
<td>H. Davila Barrios, Caracas (VE)</td>
<td>Room Concorde 1</td>
<td>con1-5-1420</td>
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<tr>
<td>09:10 - 09:30</td>
<td>EAU: Functional and oncological results of LRP</td>
<td>J-U. Stolzenburg, Leipzig (DE)</td>
<td>Room Concorde 1</td>
<td>con1-5-1430</td>
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<tr>
<td>09:30 - 09:50</td>
<td>CAU: Transobturator approach: More than a surgical technique</td>
<td>P. Palma, Campiñas (BR)</td>
<td>Room Concorde 1</td>
<td>con1-5-1440</td>
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<tr>
<td>09:50 - 10:10</td>
<td>EAU: Treatment of metastatic prostate cancer</td>
<td>T.M. De Reijke, Amsterdam (NL)</td>
<td>Room Concorde 1</td>
<td>con1-5-1450</td>
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<tr>
<td>10:10 - 10:30</td>
<td>CAU: Laparoscopic repair of recto-urinary fistulae</td>
<td>R. Sotelo Noguera, Caracas (VE)</td>
<td>Room Concorde 1</td>
<td>con1-5-1460</td>
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<tr>
<td>10:30 - 10:50</td>
<td>EAU: Treatment of neurogenic bladder dysfunction</td>
<td>J.L. Ruiz-Cerdá, Valencia (ES)</td>
<td>Room Concorde 1</td>
<td>con1-5-1470</td>
</tr>
<tr>
<td>10:50 - 11:10</td>
<td>CAU: Laparoscopic simple prostatectomy for BPH</td>
<td>R. Sotelo Noguera, Caracas (VE)</td>
<td>Room Concorde 1</td>
<td>con1-5-1480</td>
</tr>
<tr>
<td>11:10 - 11:30</td>
<td>EAU: Chemotherapy for invasive bladder cancer</td>
<td>J.A. Witjes, Nijmegen (NL)</td>
<td>Room Concorde 1</td>
<td>con1-5-1490</td>
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<td>11:30 - 12:00</td>
<td>Questions</td>
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<td>Room Concorde 1</td>
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Simultaneous translation from English to Spanish will be provided
Session of the International Society for the Study of Aging Male (ISSAM)

Testosterone and male aging in urological practice

Room 352a/b Level 3

09:30 - 11:00

Chairs: G.H.J. Mickisch, Bremen (DE)
B. Lunenfeld, Tel Aviv (IL)

09:30 - 09:33 Introduction
G.H.J. Mickisch, Bremen (DE) 352-5-1500

09:33 - 09:51 Incidence, prevalence and diagnosis of late-onset hypogonadism
B. Lunenfeld, Tel Aviv (IL) 352-5-1510

09:51 - 10:09 What are the risks and what is the clinical relevance of (late-onset) hypogonadism?
H. Behre, Halle (DE) 352-5-1520

10:09 - 10:27 Is there a role for testosterone treatment in daily urological practice?
F. Montorsi, Milan (IT) 352-5-1530

10:27 - 10:45 Is testosterone needed for penile erection?
A. Yassin, Hamburg (DE) 352-5-1540

10:45 - 10:57 Questions and answers 352-5-1550

10:57 - 11:00 Concluding remarks by chairs 352-5-1560

Aims and objectives
The change in endocrine profiles over a lifespan and the decline of peripheral testosterone affecting a significant percentage of the aging male population is undoubtedly a recognised reality. Androgen deficiency in the aging male has become a topic of increasing interest and debate throughout the developed world. The symposium is designed to provide a brief overview of the incidence and prevalence of late-onset hypogonadism (LOH). Based on the ISSAM/ISA/EAU recommendations on diagnosis and management of LOH, an attempt will be made to define LOH and to answer the principal questions of whether older hypogonadal men will benefit from testosterone treatment, what risks are associated with such intervention and whether there is a role for testosterone treatment in daily urological practice.
Wednesday, 5 April - EAU Programme

Abstract Session

12:45 - 14:15 Surgical anatomy in laparoscopic radical prostatectomy

eURO Auditorium Level 1

Video Session 1

Chairs: I.J. De Jong, Groningen (NL)  
R. Gaston, Bordeaux (FR)

All presentations are 14 minutes in length

V1 Anatomical features and dissection of the accessory pudendal arteries during laparoscopic radical prostatectomy  

V2 Laparoscopic radical prostatectomy, preservation of accessory pudendal arteries  
L. Martínez-Piñeiro, J.R. Cansino, F. Cáceres, A. Taberner, J. Cisneros, J.J. De La Peña (Madrid, Spain)

V3 Anatomy and preservation of accessory pudendal arteries in laparoscopic radical prostatectomy  
F. Secin, N. Karanikolas, J.I. Martinez Salamanca, F. Bianco, K. Touijer, B. Guillonneau (New York, United States of America)

V4 Neurovascular bundle dissection: Interfascial, extrafascial and full resection techniques  

V5 Description of the surgical anatomy of the fascias surrounding the prostate during laparoscopic radical prostatectomy  

V6 How to prevent iatrogenic capsular incision during laparoscopic nerve-sparing radical prostatectomy  
G. Fournier, A. Valeri, A. Rammal, V. Joulin, J. Donohue, C. Deruelle, L. Cormier, X. Taccoen, L. Doucet, A. Volant (Brest, Nancy, France)
Abstract Session

Urothelial tumours: Management of infiltrative/advanced tumours I

12:45 - 14:15

Room Blue Level 2

Oral Session 1

Chairs: M.A. Kuczyk, Tübingen (DE)
        G.N. Thalmann, Berne (CH)

All presentations are 7 minutes in length, followed by 2 minutes of discussion

Overview presentation
M.A. Kuczyk, Tübingen (DE)

1 Comparative study for oncological outcome following laparoscopic nephroureterectomy or standard nephroureterectomy for upper urinary tract transitional cell carcinoma

2 Laparoscopic radical cystectomy: Review of 100 cases
R. Gaston, S. Barmoshe, A. Pansadoro, E. Lufuma, C. Mugnier, J.L. Hoepffner, T. Piechaud (Bordeaux, France; Brussels, Belgium)

3 Prognostic risk factors for survival following adjuvant chemotherapy for locally advanced urothelial bladder cancer
D. Pfister, C. Ohlmann, E. Özgür, U. Engelmann, A. Heidenreich (Cologne, Germany)

4 Recurrence of transitional cell carcinoma of the bladder after radical cystectomy: Therapy and outcome
J. Gschwend, G.J. Bartsch, M. Straub, R. Kuefer, R. Hautmann, B. Volkmer (Ulm, Germany)

5 Early versus late cystectomy for T1G3 transitional cell carcinoma (TCC) of the bladder
B. Volkmer, R. Hautmann, J. Gschwend (Ulm, Germany)

6 Time to cystectomy - its influence on overall survival
P. Cathcart, J. Armitage, M. Emberton (London, United Kingdom)

7 Survival following cystectomy for primary muscle invasive bladder transitional cell carcinoma versus invasion on top of superficial disease
B. Ali-el-Dein, M. Abdel-Latif, A. Mosbah, A. Shaaban, A. Nabeeh, E.I. Ibrahim, H.A. El-Kappany (Mansoura, Egypt)

8 Is orthotopic neobladder replacement a good derivation solution in morbid obesity patients after cystectomy for cancer?
F. Thibault, T. Lebret, L. Yonneau, J. Herve, S. Elard, J.E. Poulain, P.M. Lugagne, F. Saporta, J.L. Orsoni, M. Butreau, H. Botto (Suresnes, France)

Summary
G.N. Thalmann, Berne (CH)
Wednesday, 5 April - EAU Programme

Abstract Session

12:45 - 14:15 Sexual function and dysfunction: Basic research

Room Ternes Level 1

Poster Session 1

Chairs:  P. Hedlund, Lund (SE)
         S. Ückert, Hanover (DE)

Study for 30 min. Interactive discussion for 60 min.

9  The mechanisms for diminished erectile function in an animal model of binge cocaine use
   M. Kendirci, L. Pradhan, L. Trost, S. Chandra, K.C. Agrawal, W.J.G. Hellstrom (New Orleans, United States of America)

10 Effects of hypertension and captopril-treatment on sexual functions in female rats
    A. Giraldi, P. Nedergaard, K.E. Andersson, E. Kristensen, P. Hedlund (Copenhagen, Denmark; Lund, Sweden)

11 Androgens regulate smooth muscle contractility of human cavernous arteries and corpus cavernosum by non-genomic mechanisms
    E. Waldkirch, S. Ückert, D. Schultheiss, M. Sohn, U. Jonas, C.G. Stief, K.E. Andersson, P. Hedlund (Hanover, Frankfurt, Munich, Germany; Lund, Sweden)

12 Plasma concentration of asymmetric dimethylarginine (ADMA) in relation to erectile dysfunction in patients with and without coronary artery disease

13 Down-regulation of angiogenic factors and their downstream target molecules affect the deterioration of erectile function in a rat model of hypercholesterolaemia
    D. Seong, J. Ryu, S. Yoon, H. Shin, S.U. Song, S. Piao, L.W. Zhang, J. Han, J. Suh (Incheon, South Korea)

14 Distribution of rho-kinase-related proteins and effects of Y27632 in human cavernous arteries
    E. Waldkirch, S. Ückert, M. Sohn, U. Jonas, C.G. Stief, K.E. Andersson, P. Hedlund (Hanover, Frankfurt, Munich, Germany; Lund, Sweden)

15 The feasibility of ex vivo expanded marrow stromal cells (stem cells) genetically modified with eNOS for improving erectile function in diabetic rats
    M. Kendirci, W. Deng, T.J. Bivalacqua, P.J. Kadowitz, W.J.G. Hellstrom (New Orleans, Baltimore, United States of America)

16 Transplantation of non-haematopoietic adult bone marrow stem cells isolated by the p75 nerve growth factor into the penis promotes recovery of erectile function in a rat model of cavernous nerve injury

17 Non-invasive monitoring the transplanted human mesenchymal stem cells in the penis using molecular magnetic resonance image
18 Structural and molecular analysis of erectile nerve repair  
F. May, K. Matiassek, C. Arndt, T. Maurer, A. Lehmer, M. Vroemen, A. Blesch, N. Weidner, B. Gansbacher, R. Hartung, D. Sauer, M. Apprich (Munich, Germany; San Diego, United States of America)

19 Differences between BMP-2 and TGF-β1 stimulation of fibroblast cultures from the plaque of Peyronie’s disease  
S.M. Haag, E.W. Hauck, C. Szardening-kirchner, T. Diemer, O. Eickelberg, W. Weidner (Giessen, Germany)

20 The effect of epimedium brevicornum maxim extract on clitoral intracavernous pressure in the rabbit  
K. Chen, J. Chiu, L.S. Chang (Taipei, Taiwan)

21 Different tissue cell turnover in the rat penis during aging: A comparative study  
C. Costa, N. Tomada, P. Vendeira, H. Almeida, J. Santos, D. Magalhães (Porto, Portugal)

22 Significance of the nitric oxide (NO) pathway in the control of human vaginal tissue: A functional and immunohistochemical study  
S. Ückert, K. Richter, V. Nüser, K. Albrecht, F. Scheller, U. Jonas, G. Wolf (Hanover, Magdeburg, Germany)

23 Therapeutic prospects for PEDF and its peptides in nerve regeneration on cultured major pelvic and spinal cord ganglia  
T. Nelius, S. Filleur, F. Reiher, E.P. Allhoff, O. Volpert (Magdeburg, Germany; Chicago, United States of America)
Wednesday, 5 April - EAU Programme

Abstract Session

12:45 - 14:15 Kidney tumours: Basic research

Room Maillot Level 2

Poster Session 2

Chairs: E. Oosterwijk, Nijmegen (NL)
D.G. Rohde, Darmstadt (DE)

Study for 30 min. Interactive discussion for 60 min.

24 PTEN independent activation of the PKB/AKT pathway in renal cell cancer and inactivation of P27kip by phosphorylation at T157
J. Hennenlotter, A.S. Merseburger, P.A. Ohneseit, P. Simon, A. Stenzl, M. Kuczyk (Tübingen, Germany)

25 Correlation of p16INK4 expression in renal cell carcinoma with clinicopathological parameters
S.O. Ikuerowo, M.A. Kuczyk, R. Von Wasielewski, O.B. Shittu, U. Jonas, S. Machtens, J. Serth (Ibadan, Nigeria; Tübingen, Hanover, Germany)

26 Fruits and vegetables and renal cell carcinoma: Findings from the European prospective investigation into cancer and nutrition (EPIC)
S. Weikert, H. Boeing, K. Miller, F. Buechner, B. Ljungberg, N. Allen, T. Norat (Berlin, Nuthetal, Germany; Bilthoven, The Netherlands; Umea, Sweden; Oxford, United Kingdom; Lyon, France)

27 The development of tumour specific immunity induced by cryosurgery in murine renal cell carcinoma animal model

28 VEGF pathway is involved in antitumour and antiangiogenic effect of arginine deiminase on renal cell carcinoma
C. Yoon, D. Yoon, Y. Shim, E. Kim, K. Chae, J. Lee, C. Kim, N. Won, B. Min, D. Yoon (Seoul, Chungju, South Korea)

29 Decreased p27kip protein expression as determined by tissue microarray analysis (TMA) predicts the clinical prognosis of renal cell cancer patients
M. Kuczyk, J. Serth, M. Mengel, E. Von Der Heyde, A.S. Merseburger, J. Hennenlotter, A. Stenzl, U. Jonas (Tübingen, Hanover, Germany)

30 Quest for the adult human renal stem cell-isolation and characterisation of a stem cell enriched side population using Hoechst dye efflux method
S. Addla, C. Hart, V. Ramani, M. Brown, N. Clarke (Manchester, United Kingdom)

31 Nucleostemin mRNA is expressed in both normal and malignant renal tissues
X. Fang, Y. Fan, Z. Liu, S. Zhao, P. Ekman, D. Xu (Jinan, China; Stockholm, Sweden)

32 BFGF expression in renal cell cancer: Correlation with clinical and histological features by tissue microarray analysis and measurement of serum levels
M. Horstmann, A.S. Merseburger, E. Von Der Heyde, J. Serth, G. Wegener, M. Mengel, G. Feil, J. Hennenlotter, K-D. Sievert, A. Stenzl, M. Kuczyk (Tübingen, Hanover, Germany)
33 Activation combined biomarkers PI3K and p-Akt is associated with reduced survival in renal cell carcinoma
J. Hennenlotter, A.S. Merseburger, U. Kühs, M. Horstmann, A. Stenzl, M. Kuczyk (Tübingen, Germany)

34 Curcumin sensitises tumour necrosis factor-related apoptosis-inducing ligand induced apoptosis through
CCAAT/enhancer-binding protein homologous protein independent DR5 up-regulation
D.G. Kim, H.I. Lee, I.R. Cho, H.C. Jung, J.S. Park, K.S. Lee (Gyeongju, Goyang, Daegu, South Korea)

35 Correlation of RAS association family 1A gene expression in renal cell carcinoma with pathological
parameters and survival of patients
H. Tezval, M.A. Kuczyk, U. Jonas, S. Machtens, J. Serth (Hanover, Tübingen, Germany)

36 A renal cancer (RENCA) vaccine inhibits tumour growth in the murine RENCA model
C. Doehn, N. Esser, H. Pauels, D. Jocham, J. Drevs (Lübeck, Freiburg, Gronau, Germany)

37 Prognostic significance of intratumoural DNA content heterogeneity on multiple fresh samples of renal cell
carcinoma: A follow-up study on 132 patients
E. Leonardi, L.G. Luciani, C. Divan, F. Coccarelli, A. Reich, P. Dalla Palma, G. Malossini (Trento, Italy)

38 Quantitative analysis of RAS association family 1a gene (RASSF1A) promoter methylation in renal cell carci-
noma, peritumoural and normal renal parenchyma
I. Peters, T. Eilers, M.A. Kuczyk, J. Hennenlötter, K. Albrecht, N. Wilke, S. Machtens, U. Jonas, J. Serth (Hanover,
Tübingen, Germany)
**Wednesday, 5 April - EAU Programme**

**Abstract Session**

**12:45 - 14:15 Research and drug therapy for stone disease**

**Room 242 Level 2**

**Poster Session 3**

**Chairs:**
- T. Esen, Istanbul (TR)
- A. Patel, London (GB)

Study for 30 min. Interactive discussion for 60 min.

**39** Relaxant effect of drotaverine (No-Spa®) in human isolated ureteral rings
S. Palea, P. Robineau, P. Rischmann, P. Lluel (Toulouse, Paris, France)

**40** The effect of xanthine oxidase inhibitors on com crystal-renal epithelial cell interaction
K. Nagatsuma, H. Asakura, S. Matsuzaki, M. Murai (Tokyo, Japan)

**41** In vitro effects of PDE-5 inhibitors sildenafil, vardenafil and tadalafil on isolated human ureteral smooth muscle
C. Gratzke, B. Schlenker, S. Uckert, G. Kedia, F. Scheller, O. Reich, A. Becker, C. Stief (Munich, Hanover, Germany)

**42** Calcium oxalate monohydrate crystals inhibit the expression of heat shock protein 25 in canine renal distal tubule cells
A. Patel, S. Choong, W. Robertson, J. Hothersall (London, United Kingdom)

**44** Impact of ascorbic acid on cystine stone formation - evaluation in the animal model
S. Sagi, Y. Cao, A. Haecker, M.S. Michel, P. Alken, T. Knoll (Mannheim, Germany)

**45** A new in vitro model for cystinuria type 1 by RNAi transfection
S. Sagi, Y. Cao, A. Haecker, P. Alken, M.S. Michel, T. Knoll (Mannheim, Germany)

**46** Use of the ureteric pressure transducer catheter to monitor the human ureteric response to smooth muscle relaxant drugs in vivo
K. Davenport, A. Timoney, F. Keeley (Bristol, United Kingdom)

**47** Does sildenafil citrate reverse shock wave induced renal trauma in rabbit model?
A. Simsir, B. Turna, O. Nazli, N. Cikili (Izmir, Turkey)

**48** Double-blind, placebo controlled comparison of therapeutic effect of morphine and ketoprofen in monotherapy and in association varus desmopressin for acute renal colic: About 120 patients
S. Ben Rhouma, S. Sallami, I. Bensalah, M. Cheif, G.H. Hafsia, Y. Nouira, A. Horchani (Tunis Jabbari, Tunis, Tunisia)

**49** Prospective long-term follow-up of patients with asymptomatic lower pole caliceal stones
K. Inci, A. Sahin, E. Islamoglu, E. Ozden, M. Bakkaloglu, H. Ozen (Ankara, Turkey)

**50** What is the role of corticosteroid therapy in the management of distal ureteral stones in emergency?
51 Doxazosin for the management of distal ureteral stones
E. Liatsikos, T. Voudoukis, P. Katsakiori, K. Asimakopoulos, A. Athanasopoulos, P. Perimenis, J. Stolzenburg
(Patras, Greece; Leipzig, Germany)

52 Is daily diuresis risk factor for calcium oxalate stone formation?
D. Milenkovic-petronic, A. Vuksanovic, N. Lalic, C. Tolic, M. Kozomara, S. Dragicevic (Belgrade, Serbia and
Montenegro)

53 The influence of diet on urinary cystine excretion
R. Siener, A. Hesse (Bonn, Germany)
**Wednesday, 5 April - EAU Programme**

**Abstract Session**

**12:45 - 14:15 Urothelial tumours: Basic research I**

**Room 251 Level 2**

**Poster Session 4**

*Chairs:* S. Machtens, Hanover (DE)
O. Nativ, Haifa (IL)

*Study for 30 min. Interactive discussion for 60 min.*

54 Can histone deacetylase inhibitors (HDACI) delay epithelial cancers progression? - epidemiological evaluation of cancer prevalence in patients treated with valproic acid (VPA)

M. Cohen, R. Rodriguez, Y. Meucz, A. Stein, G. Rennert (Haifa, Israel; Baltimore, United States of America)

55 Targeting novel nuclear receptors with histone deacetylase inhibitor combination therapy in bladder cancer

S.A. Abedin, A. Veerakumarasivam, J. Kelly, D.E. Neal, I. Mills, M. Campbell (Birmingham, Cambridge, United Kingdom)

56 Superficial urothelial bladder tumours: Identification of a set of gene candidates to distinguish pTa and pT1 stages


57 A gene promoter hypermethylation panel to detect transitional cell carcinoma of the bladder

D. Yates, I. Rehman, S. Cross, M. Meuth, F. Hamdy, J.W. Catto (Sheffield, United Kingdom)

58 Novel pro-apoptotic genes regularly methylated and associated with recurrence in superficial and muscle-invasive bladder cancer

F. Christoph, S. Weikert, C. Kempkensteffen, H. Krause, K. Miller (Berlin, Germany)

59 Genetic and epigenetic mechanism of development and progression of bladder cancer

W.C. Moon, T.H. Kim, B.S. Shim, Y.S. Kim, C.H. Noh, M.R. Oh (Seoul, South Korea)

60 Exploration of key genes modulating sensitivity against epidermal growth factor receptor tyrosine kinase inhibitor (GEFITINIB) in human bladder cancer cell lines

R. Inoue, H. Matsuyama, S. Yano, Y. Yamamoto, C. Ohmi, S. Sakano, N. Iizuka, K. Naito (Ube, Japan)

61 Competing risks nomogram predicting the probability of bladder cancer recurrence after cystectomy can reliably distinguish between those destined to recur and those who may die of other causes before recurrence


62 Improvement of anti-angiogenic and anti-tumourigenic efficacy of thrombospondin-1 by PPAR ligands in bladder cancer

T. Nelin, H. Huang, S. Filleur, S. Campbell, E.P. Allhoff, O. Volpert (Magdeburg, Germany; Chicago, United States of America)
63 Multitarget gene inhibition by synthetic nucleic acids in bladder cancer cells
Y. Burmeister, K. Kraemer, S. Fuessel, M. Kotzsch, A. Meye, O.W. Hakenberg, M.P. Wirth (Dresden, Germany)

64 Proteomics urine samples analysis of healthy versus transitional cell carcinoma patients utilising surface enhanced laser desorption ionisation time of flight mass spectrometry

66 Targeting bladder tumour cells in vivo and in the urine by a peptide identified using phage display
E.S. Yoo, B. Lee, T.G. Kwon, S.K. Chung, B.W. Kim, D.Y. Kim, C.H. Park, Y.K. Park (Daegu, South Korea)

67 The in vivo activation of the fas death receptor pathway in transitional cell carcinoma of the bladder following treatment with mitomycin-C
H.F. O’Kane, C. Watson, P. Hyland, R. Johnston, K. Williamson (Belfast, United Kingdom)

68 Multidetector CT urography in the evaluation of the urinary tract
A. Tsili, C. Tsampoulas, D. Giannakis, P. Tzoumis, D. Dristiliaris, N. Sofikitis, S. Efremidis (Ioannina, Greece)
Wednesday, 5 April - EAU Programme

Abstract Session

Basic research developments in female urology

Room 252 Level 2

Poster Session 5

Chairs: K-E. Andersson, Lund (SE)
        H. Bruschini, Sao Paulo (BR)

Study for 30 min. Interactive discussion for 60 min.

69 Improvement of urethral closure pressures after application of myoblasts depends on the number of injected cells
   M. Mitterberger, G. Klima, H. Fritsch, G.M. Pinggera, G. Bartsch, H. Strasser (Innsbruck, Austria)

70 Transurethral ultrasound guided stem cell therapy of urinary incontinence
   H. Strasser, R. Marksteiner, E. Margreiter, M. Mitterberger, G.M. Pinggera, F. Frauscher, S. Hering, G. Bartsch
   (Innsbruck, Austria)

71 Normal female sphincter macro- and microanatomy: Studies including fetal histology and intrarethral ultrasound
   P. Rehder, A. Weinseisen, J. Neyer, L. Pallwein, F. Frauscher, G. Pinggera, G. Bartsch, C. Gozzi (Innsbruck,
   Austria)

72 Urinary glycosaminoglycan excretion in postmenopausal women with and without hormone replacement therapy
   J. Brollo, M. Maroclo, F. Sampaio, L. Cardoso (Rio De Janeiro, Brazil)

73 Second messenger pathways following detrusor M3 receptor stimulation
   D. Daly, R. Chess-Williams, C. Chapple (Sheffield, United Kingdom)

74 Abolition by estrogen of neuronal nitric oxide synthase smooth muscle relaxation in the female mice urethra
   J. Nader, M. Srougi, V. Ortiz (Sao Paulo, Brazil)

75 Glycosaminoglycans behaviour following protamine induced cystitis in rats
   R. Soler, H. Bruschini, J.C. Truzzi, M.T. Alves, K.R. Leite, N.O. Camara, A. Mendes, J.R. Martins, L.G. Pimentel,
   H. Malavaud (Toulouse, France)

76 Excretion of urinary glycosaminoglycans during normal pregnancy and puerperium in young women
   M. Maroclo, C. Cabral, S. Pereira, F. Sampaio, L. Cardoso (Rio De Janeiro, Brazil)

77 Composition of urothelial extracellular matrix in normal young men and women
   M. Maroclo, C. Cabral, F. Sampaio, L. Cardoso (Rio de Janeiro, Brazil)

78 The effect of expressions of vasoactive intestinal polypeptide and nicotinamide adenine dinucleotide phosphate
   diaphorase in the anterior vaginal wall on female urinary incontinence and sexual function
   W. Lee, J.I. Kim, J.Z. Lee, M.K. Chung (Busan, South Korea)

79 The evaluation of ultrasound estimated bladder weight in female overactive bladder
   G. Canepa, M. Garaventa, G. Capponi, F. Campodonico, M. Maffezzini (Genoa, Italy)
80  
Intraurethral circumferential sphincter surface EMG: The tool to diagnose intrinsic sphincter deficiency?
J. Heesakkers, R. Gerretsen (Nijmegen, The Netherlands)

81  
Effects of magnetic stimulation in the treatment of pelvic floor dysfunction

82  
Three-dimensional transurethral ultrasound: Measurement of dynamic activity of rhabdosphincter and urethra in women
M. Mitterberger, G.M. Pinggera, A. Klauser, F. Frauscher, G. Bartsch, H. Strasser (Innsbruck, Austria)

83  
A call for a severity classification in urinary incontinence – insights from the PURE study
B. Monz, E. Chartier-Kastler, A. Wagg, G. Samsioe, M. Espuna Pons, C. Hampel, D. Quail, C. Chinn, S. Hunskaar (Ingelheim, Mainz, Germany; Paris, France; London, Surrey, United Kingdom; Lund, Sweden; Barcelona, Spain; Bergen, Norway)
Wednesday, 5 April - EAU Programme

Abstract Session

Urethral strictures

Poster Session 6

12:45 - 14:15

Room Havana Level 3

Study for 30 min. Interactive discussion for 60 min.

85 Urethral ultrasound value in internal urethrotomy
V. Cauni, P. Geavlete, G. Nita, D. Georgescu (Bucharest, Romania)

86 Urethral gray-scale and colour doppler sonography in the diagnostic evaluation of anterior urethral strictures
A.E. Pelzer, J. Bektic, A.P. Berger, L. Pallwein, T. Akkad, G. Bartsch, W. Horninger (Innsbruck, Austria)

87 Buccal patch urethroplasty in men with recurrent urethral strictures
A. O’Riordan, R. Pickard (Newcastle upon Tyne, United Kingdom)

88 Lingual mucosa as an alternative graft for urethroplasty
A. Simonato, A. Gregori, A. Lissiani, P. Traverso, C. Ambruosi, A. Romagnoli, G. Carmignani (Genoa, Milan, Trieste, Italy)

89 Ventral oral mucosal graft (OMG) urethroplasty with spongioplasty by a ventral sagittal urethrotomy for bulbar urethral stricture
M. Abdus Salam (Dhaka, Bangladesh)

90 Buccal mucosa dorsal inlay graft – a new single stage approach for reconstruction of recurrent strictures of the fossa navicularis
S. Kamp, T. Knoll, A. Haecker, J.K. Badawi, M. Hatzinger, P. Alken (Mannheim, Germany)

91 Bulbar urethral stricture repair with buccal mucosa graft
M. Titta, G. Benedetto, S. Durante, G. Abatangelo, F. Nigro, P. Ferrarese, E. Scremin, L. Cavaretta, A. Tasca (Vicenza, Italy)

92 Tissue-engineered buccal mucosa – preliminary results in substitution urethroplasty
S. Bhargava, S. MacNeil, C.R. Chapple (Sheffield, United Kingdom)

93 Genital skin grafts as dorsal onlay for urethral reconstruction
C. Gozzi, G. Pinggera, A. Pelzer, J. Bektic, G. Bartsch, P. Rehder (Innsbruck, Igls/ Innsbruck, Austria)

94 Small intestinal submucosa (SIS) in the treatment of bulbar urethral strictures
R. Fiala, A. Vidlar, M. Grepl, V. Student, K. Belej, R. Vrtal (Olomouc, Czech Republic)

95 Could peritoneum share in solving problems of deficient and/or strictured anterior urethra?
F.E. Moossa, M. Azooz, K. Farag (Cairo, Egypt)

96 Dorsally placed spiral penile flaps versus free grafts for repair of long bulbar penile strictures
A. Abuzeid, A. Abdel Hafez, M. Saleem, A. Badawy, A. Abdel Wahab, M. Ali (Sohag, Egypt)
97 A new option for urethral reconstruction with multilayered urothelium established from bladder washings
U. Nagele, S. Maurer, G. Feil, C. Bock, J. Krug, K.D. Sievert, A. Stenzl (Tübingen, Germany)

98 Transplantation of organ-specific acellular matrix for urethral reconstruction in humans
L. Ribeiro-Filho, Á. Sarkis, A. Mitre, P.E. Guimaraes, A. Osaki, H. Shiina, M. Igawa, R. Dahiya, E. Tanagho, M. Srougi (São Paulo, Brazil; Izumo, Japan; San Francisco, United States of America)

99 Management of traumatic posterior urethral stricture – results of a randomised study
S. Ravichandran, T. Nambirajan, G. Athmalingham (Chennai, India)
Wednesday, 5 April - EAU Programme

Abstract Session

12:45 - 14:15 Prostate cancer: High throughput target discovery and validation

Room Concorde 1 Level 4

Poster Session 7

Chairs: Z. Culig, Innsbruck (AT)
        H.Y. Leung, Newcastle upon Tyne (GB)

Study for 30 min. Interactive discussion for 60 min.

100 The effect of tissue ischaemia on gene expression in prostate cancer

101 The impact of internal standards in mass spectrometry used for pattern analysis of prostate cancer serum
I. Feuerstein, A.E. Pelzer, C. Fuchsberger, K. Kofler, M. Rainer, H. Klocker, G. Bartsch, G.K. Bonn (Innsbruck, Austria)

102 Influence of blood sampling on protein profiling and pattern analysis using maldi mass spectrometry
A.E. Pelzer, I. Feuerstein, C. Fuchsberger, K. Kofler, W. Horninger, G. Bartsch, G.K. Bonn, H. Klocker (Innsbruck, Austria)

103 Analysis of cDNA expression profiles of prostate carcinoma applying a neural network
R. Kuefer, J. Gschwend, R. Hautmann, A. Chinnaian, M. Rubin, H. Kestler (Ulm, Germany; Boston, United States of America)

104 Comparative analysis of fibroblast growth factor receptors expression in clinical prostate cancer using tissue microarray
K. Sahadevan, S. Darby, M. Mathers, C. Robson, H. Leung, V. Gnanapragasam (Newcastle Upon Tyne, United Kingdom)

105 Protein profiling with whole prostatic tissues by MALDI
I. Feuerstein, C. Fuchsberger, K. Kofler, W. Horninger, H. Klocker, G. Bartsch, G.B. Bonn, A.E. Pelzer (Innsbruck, Austria)

106 Progression risk assessment in prostate cancer using a novel bioinformatics based genetic model
B. Wullich, V. Jung, J. Rahnenführer, N. Beerentenwinkel, M. Müller, W. Schulz, J. Kamradt, M. Stoeckle (Homburg/ Saar, Saarbrücken, Düsseldorf, Germany)

107 Genomic characterization of 10 prostate cancer cell lines by microarray based comparative genomic hybridization (arrayCGH)
J. Kamradt, V. Jung, B. Walker, M. Stöckle, P. Meltzer, B. Wullich (Homburg, Homburg Saar, Germany; Bethesda, United States of America)

108 Gene expression analysis of hormone-refractory prostate cancer in transurethral resection samples
P. Albers, O. Stoss, M. Werther, D. Zielinsky, N. Jost, J. Rüschoff, T. Henkel (Kassel, Germany)

109 Comparison of genomic alterations of disseminated tumour cells and the primary tumour from prostate carcinoma patients
K. Bluemke, C. Karzek, U. Bilkenroth, H. Taubert, A. Melchior, H. Heynemann, P. Fornara (Halle, Germany)
110 Quantitative multigene expression profiling of primary prostate cancer  
A. Meye, U. Schmidt, S. Fuessel, R. Koch, G. Baretton, M. Froehner, M. Wirth (Dresden, Germany)

111 Expression of receptor and non receptor tyrosine kinases in prostate cancer  
P.J. Bastian, S. Kummer, L.C. Heukamp, S.C. Müller, V.R. Alexander (Bonn, Germany)

112 Comparative genomic hybridization (CGH) and spectral karyotyping (SKY) analysis of LNCAP sublines  
G.N. Thalmann, J. Phillips, A. Afonso, L. Chung (Berne, Switzerland; New York, Atlanta, United States of America)

113 Tissue microarray analyses of multiple biomarkers as candidate prognostic indicators for predicting relapse following radical prostatectomy  
J. Nariculam, A. Freeman, M. Feneley, J. Masters (London, United Kingdom)

114 Methylation profile of N33, HIC, GSTP1 and CDKN2 at different stages of prostate carcinogenesis  
B. Alekseev, P. Shegai, T. Kekeeva, M. Nemtsova, D. Zaletaev, I. Rusakov (Moscow, Russia)
Wednesday, 5 April - EAU Programme

Abstract Session

Laparoscopic radical prostatectomy and robotic surgery I

Room Concorde 2 Level 4

Poster Session 8

Chairs: S. Deger, Berlin (DE)
T. Sulser, Basel (CH)

Study for 30 min. Interactive discussion for 60 min.

115 An animal model for heat distribution around endoshears coagulation devices - applications for laparoscopic nerve sparing surgery
R. Katz, Y. Danai, O. Gofrit, E. Peleg, D. Adler, D. Pode (Jerusalem, Israel)

116 Anatomical retrograde laparoscopic prostatectomy improves post operative erections without increasing of surgical margins: A comparative study
M. Colombel, F. Mege Lechevallier, J.M. Marechal, L. Poissonnier, F.J. Murat, E. Pricaz, A. Gelet, M. Xavier (Lyon, France)

117 From standard laparoscopic to robotic extraperitoneal prostatectomy: Evolution in 350 cases
H. John, N. Engel, C. Brugnolaro, M. Muentener, R. Strebel, D.M. Schmid, D. Hauri, P. Jaeger (Zurich, Switzerland)

118 The significance of positive surgical margins &lt; 1mm after laparoscopic radical prostatectomy
X. Cathelineau, J. Harmon, F. Rozet, E. Barret, G. Vallancien (Paris, France)

119 Performance and functional outcome of endoscopic extraperitoneal radical prostatectomy in relation to obesity – an assessment of 500 patients
E. Liatsikos, S. Mühlstädt, R. Rabenalt, M. Do, L.C. Horn, M.C. Truss, J. Stoljenburg (Rio - Patras, Greece; Leipzig, Dortmund, Germany)

120 Extraperitoneal robot assisted radical prostatectomy-outcome in &gt;400 patients
J. Joseph, J. Boczko, D. Golijanin, I. Vicente, M. Mathe, E. Erturk, H. Patel (Rochester, United States of America; London, United Kingdom)

121 The radius surgical system – a new device for laparoscopic radical prostatectomy?
T. Frede, A. Hammady, J. Klein, D. Teber, G. Buess, J. Rassweiler (Müllheim, Heilbronn, Tübingen, Germany)

122 Comparison of laparoscopic radical prostatectomy with and without previous trans urethral prostate resection

123 The arrival of microrobots in urologic surgery
J. Joseph, D. Oleynik, M. Rentschler, J. Boczko, H. Patel (Rochester, Omaha, United States of America; London, United Kingdom)

124 Radical prostatectomy: Morbidity of the robotic versus the laparoscopic approach
F. Rozet, G. Braud, X. Cathelineau, E. Barret, J. Harmon, D. Almeida, G. Vallancien (Paris, France)
The outcome of laparoscopic extraperitoneal radical prostatectomy in patients with high body mass index, prior pelvic surgery, and large prostate size
A. Rodriguez, D. Buethe, J. Pow-Sang (Tampa, United States of America)

Laparoscopic radical prostatectomy: The impact of obesity
J. Ooi, T. Gianduzza, C. Chang, D. Moon, R. Singh, N. Patil, C. Eden (Basingstoke, United Kingdom)

Restoration of posterior aspects of striated sphincter shortens time to continence in video laparoradical prostatectomy. A prospective randomised trial
B. Rocco, S. Stener, A. Bozzola, S. Galli, A. Gregori, F. Scieri, A. Scaburri, M.C. Paoletti, F. Gaboardi (Milan, Firenze, Italy)

Modular training for residents with no prior experience with open pelvic surgery in endoscopic extraperitoneal radical prostatectomy
R. Rabenalt, J. Stolzenburg, M. Do, L.C. Horn, S. Bhanot, C. Anderson, E. Liatsikos (Leipzig, Germany; London, United Kingdom; Patras, Greece)

Impact of previous abdominal surgery, on the feasibility and morbidity of transperitoneal laparoscopic radical prostatectomy
G. Fournier, C. Deruelle, A. Rammal, V. Joulin, X. Taccoen, A. Valeri (Brest, France)
Abstract Session

Metastatic prostate cancer: Skeletal issues

Room Concorde 3 Level 4

12:45 - 14:15

**Poster Session 9**

**Chairs:** J.B. Anderson, Sheffield (GB)
R.C.M. Pelger, Leiden (NL)

Study for 30 min. Interactive discussion for 60 min.

130 **Predictors of clinical outcome in patients with prostate cancer and bone metastases: Prognostic significance of fractures and bone markers**
F. Saad, R.E. Coleman, R. Cook, J.E. Brown, M. Smith, Y. Hei, Y. Chen (Montreal, Waterloo, Canada; Sheffield, United Kingdom; Boston, East Hanover, United States of America)

131 **The role of daily calcium intake on bone mineral density in patients with prostate cancer under androgen suppression**

132 **Comparison of serum bone turnover markers and pain scores in bone metastases due to hormone refractory prostate cancer (HRPCA): Effects of combined and repeated zoledronic acid and docetaxel-based chemotherapy**
A. Hegele, H.G. Wahl, A.J. Schrader, S. Sevinc, L. Koliva, R. Hofmann, P. Olbert (Marburg, Germany)

133 **Changes in bone mineral density in prostate cancer patients under androgen suppression during the first two years of treatment**

134 **Prevalence of osteoporosis in prostate cancer patients under androgen suppression**

135 **Persistence and compliance (adherence) with oral bisphosphonates in prostate cancer patients**
A. Hoer, H. Gothe, V. Barghout, G. Schifffhorst, B. Haussler (Berlin, Germany; Florham Park, United States of America)

136 **Peripheral or axial bone density measurements to identify osteoporosis in prostate cancer patients undergoing androgen deprivation therapy?**
V. Wadhwa, J. Rosser, N. Parr (Upton, Wirral, United Kingdom)

137 **Bone turnover parameters ICTP and PINP are promising serum markers for diagnosis and therapy monitoring of bone metastases in prostate cancer patients**
G. Feil, S. Feyerabend, A.G. Anastasiadis, C. Bock, A. Stenzl (Tübingen, Germany)

138 **The use of incadronate disodium injection for bone metastases of prostate cancer**
P. Espina, A. Uy (Quezon City, Philippines)

139 **Zoledronic acid as adjunct to androgen deprivation therapy reduces bone loss in men with prostate cancer**
R. Casey, W. Love, C. Mendoza, D. Reymond, M. Zarenda (Oakville, Dorval, Mississauga, Canada)
141 Zoledronic acid reduces skeletal morbidity regardless of previous skeletal events in men with prostate cancer and bone metastases
F. Saad, D.M. Gleason, R. Murray, S. Tchekmedyian (Montreal, Canada; Tucson, Long Beach, United States of America; Victoria, Australia)

142 Effects of skeletal morbidities on longitudinal patient-reported outcomes and survival in patients with metastatic prostate cancer
V. Depuy, K. Anstrom, L. Castel, K. Schulman, F. Saad, V. Bargskou, K. Weinfurt (Durham, Chapel Hill, Florham Park, United States of America; Montreal, Canada)

143 Efficacy of radiotherapy in pain and spinal cord compression syndrome treatment from bone metastases in prostate cancer patients with low performance status and life expectancy
P. Milecki, Z. Kwas (Poznan, Poland)

144 Chronic pulmonary disease is an independent prognostic factor for advanced prostate cancer
C.W. Jeong, S.K. Hong, H. Jeong, C. Kwak, E. Lee, S.E. Lee (Seoul, Seongnam, Gyeonggi, South Korea)
Abstract Session

14:30 - 16:00 Advances in laparoscopic pelvic surgery

eURO Auditorium Level 1

Video Session 2

Chairs: A. Alcaraz, Barcelona (ES)
H. Baumert, Paris (FR)

All presentations are 14 minutes in length

V7 Laparoscopic partial cystectomy for bladder müllerianosis
V. Pansadoro, P. Emiliozzi, G. Federico, M. Martini, A. Pansadoro, M. Pizzo, P. Scarpone
(Rome, Italy)
eURO-5-1820

V8 Laparoscopic radical cystectomy in female
F. Gaboardi, A. Bozzola, S. Galli, A. Gregori, F. Scieri, S. Stener, B. Rocco (Milan, Italy)
eURO-5-1830

V9 Laparoscopic radical cystectomy with neobladder acc. to Studer
V. Pansadoro, P. Emiliozzi, G. Federico, M. Martini, A. Pansadoro, M. Pizzo, P. Scarpone
(Rome, Italy)
eURO-5-1840

V10 Laparoscopic radical cystectomy with bladder replacement
eURO-5-1850

V11 Transvesical laparoscopic diverticulectomy
V. Pansadoro, P. Emiliozzi, G. Federico, M. Martini, A. Pansadoro, M. Pizzo, P. Scarpone
(Rome, Italy)
eURO-5-1860

V12 Endoscopic lymphadenectomy for penile carcinoma
R. Sotelo, A.J. García, R. Sánchez Salas, O. Carmona, R. Dubois, F. Cornejo, M. Mariano,
G. Neiva, A. Finelli (Caracas, Venezuela; Quito, Ecuador; Porto Alegre, Goiania, Brazil;
Toronto, Canada)
eURO-5-1870
Abstract Session

Urological reconstruction I

14:30 - 16:00

Room Blue Level 2

Oral Session 2

Chairs: J.E. Gschwend, Ulm (DE)
       A.R. Mundy, London (GB)

All presentations are 7 minutes in length, followed by 2 minutes of discussion

Overview presentation
J.E. Gschwend, Ulm (DE)

145 In vitro prevascularisation of biological matrices with human bladder microvascular endothelial cells can be stimulated by bone marrow mesenchymal progenitor cells
G. Ram-Liebig, M. Haase, G. Baretton, M.P. Wirth (Dresden, Germany)

147 Intralbugineous N-butyl-2-cyanoacrylate (histoacryl)
F.E. Moossa, M. Azooz, K. Farag, H. Khattab, H. Azooz (Cairo, Egypt)

148 Utility of an everting sheath to dilate urethral strictures
C. Adam, P. Weidlich, R. Horvath, R. Sroka, C. Stief (Munich, Germany)

149 Biocompatibility of new bioactive biodegradable urethral stents

150 Endosew: The new laparoscopic sewing-machine
B. Brehmer, C. Moll, G. Jakse (Aachen, Germany)

151 Determining the optimal frequency of skill labs for training and skill retention on endoscopic suturing
G. De Win, B. Van Cleynenbreugel, D. De Ridder, M. Miserez (Leuven, Belgium)

Summary
A.R. Mundy, London (GB)
Abstract Session
14:30 - 16:00
Prostate cancer stem cells

Oral Session 3
Chairs: M. Cecchini, Berne (CH)
N.J. Maitland, York (GB)

All presentations are 7 minutes in length, followed by 2 minutes of discussion

Overview presentation
N.J. Maitland, York (GB)

153 The human androgen receptor gene is a primary target of the Wnt signalling pathway
R. Buttyan, X. Yang, D. Bemis, M. Benson, F. Vacherot, S. Terry, A. De La Taille (New York, United States of America; Creteil, France)

154 Detection of mutations in genes of the Wnt signalling pathway in prostate cancer using laser microdissection and whole genome amplification
G. Yardy, S. Brewster, W. Bodmer (Oxford, United Kingdom)

155 Cyclin A1 binds to androgen receptor and regulates the tumour invasion in cooperation with VEGF and beta-catenin
B. Wegiel, A. Bjartell, J. Persson (Malmö, Sweden)

156 Noggin blocks osteosclerosis in prostate cancer bone metastasis

157 BMP7 has a potential role in prostate carcinogenesis and inhibits prostate cancer metastases in vivo
C.A. Rentsch, J. Buijs, G. Van Der Horst, P. Van Overveld, A. Wetterwald, R. Schwaninger, N. Henriquez, P. Ten Dyke, F. Borovecki, G.N. Thalmann, R. Pelger, S. Vukicevic, M.G. Cecchini, C. Löwik, G. Van Der Pluijm (Berne, Switzerland; Leiden, The Netherlands; Zagreb, Croatia)

158 EZH2 gene is amplified in late-stage prostate cancers
T. Tammela, O. Saramäki, P. Martikainen, R. Vessella, T. Visakorpi (Tampere, Finland; Seattle, United States of America)

159 Enrichment of the prostate side population: The quest for the prostate epithelial stem cell
J. Samuel, C. Hart, P. Gilmore, R. Bhatt, V. Ramani, M. Brown, N. Clarke (Manchester, United Kingdom)

160 In vitro differentiation of human prostate progenitor cells
J. Hansson, N. Vashchenko, A. Bjartell, V. Gadaleanu, P.-A. Abrahamsson (Malmö, Sweden)

Summary
M. Cecchini, Berne (CH)
Wednesday, 5 April - EAU Programme

Abstract Session

14:30 - 16:00 Ejaculatory dysfunction: Basic and clinical research

Room Ternes Level 1

**Poster Session 10**

**Chairs:**
D. Ralph, London (GB)
M. Waldinger, The Hague (NL)

**Study for 30 min. Interactive discussion for 60 min.**

161 Location and nature of the innervation of the ejaculatory complex: Histological and immunohistochemical studies with 3D reconstruction
I. Karam, S. Droupy, G. Benoît, J.F. Uhl, I. Abd-alsamad, V. Delmas (Le Kremlin Bicêtre, Paris, Creteil, France)

162 Distribution of androgen receptors in spinal neurons innervating the seminal vesicle in male rat
Q.S. Xue, C. Xu, E.D. Yaici, F. Giuliano, L. Cayzergues, G. Benoît, S. Droupy (Le Kremlin Bicêtre, France)

163 Pharmacological stimulation of brain dopamine D3 receptors induced ejaculation in anaesthetised rats
P. Clément, J. Bernabé, L. Alexandre, F. Giuliano (Gif-sur-Yvette, Garches, France)

164 Dopamine D2-like receptors mediate the expulsion phase of ejaculation elicited by 8-hydroxy-2-(di-n-propylamino) tetralin (8-OH-DPAT) in anesthetized rats
P. Clément, J. Bernabé, H. Kia, L. Alexandre, P. Denys, F. Giuliano (Gif-sur-Yvette, Garches, France)

165 An overview of the sexual assessment monitor (SAM), designed to calculate ejaculatory latency time (ELT)
M. Wyllie, W. Dinsmore, M. Thomas, J. Wyllie, C. Novak (London, United Kingdom; Belfast, Ireland)

166 Psychometric validation of a sexual quality of life measure for men – SQOL (M): Validation in men with premature ejaculation
L. Abraham, T. Symonds, M.F. Morris (Sandwich, United Kingdom)

167 Determinants of ejaculatory dysfunction in a community-based longitudinal study
M. Gan, M. Smit, G. Dohle, A. Bohnen, R. Bosch (Rotterdam, Utrecht, The Netherlands)

168 Latency time in men with and without premature ejaculation: Data from five European countries
F. Giuliano, D. Patrick, E. Polverejan, C. Jamieson, D. Gagnon (Garches, France; Seattle, Raritan, Mountain View, United States of America)

169 Premature ejaculation: Results from a European observational study
F. Giuliano, D. Patrick, H. Porst, G. La Pera, M. Rothman, R. Hashmonay, S. Merchant (Paris, France; Seattle, Raritan, United States of America; Bonn, Germany; Rome, Italy)

170 How does a man’s premature ejaculation impact on his partner’s sexual satisfaction?
K. May, L. Abraham, T. Symonds, M. Martin, D. Wild (Sandwich, Oxford, United Kingdom; Seattle, United States of America)

171 Premature ejaculation: The female perspective
D. Patrick, F. Giuliano, J. Dean, A. Kokoszka, G. La Pera, P. McNulty, S. Merchant, M. Rothman (Seattle, Raritan, United States of America; Paris, France; Devon, United Kingdom; Warsaw, Poland; Rome, Italy)
172  Prospective, randomised, double-blind study with tadalafil and slow-release fluoxetine in premature ejaculation  
R. Mattos, A.M. Lucon, M. Srougi (São Paulo, Brazil)

173  Dapoxetine pharmacokinetics and tolerability in hypertensive men  
N. Modi, M. Dresser, B. Wang, S. Gupta (Mountain View, United States of America)

174  Long-term safety and tolerability of dapoxetine for the treatment of men with premature ejaculation  
R. Shabsigh, G. Broderick, M. Miloslavsky, S. Bull, A. Nilsson-Neijber (New York, Jacksonville, Mountain View, Raritan, United States of America)

175  To what extent is heroin used to relieve premature ejaculation and other sexual disorders?  
G. La Pera, A. Carderi, Z. Marianantoni, F. Peris, M. Lentini, F. Taggi (Rome, Italy)
Abstract Session

14:30 - 16:00 Kidney tumours: Diagnosis and staging I

Poster Session 11

Chairs: D. Jacqmin, Strasbourg (FR)  
        I.C. Sinescu, Bucharest (RO)

Study for 30 min. Interactive discussion for 60 min.

176 Perioperative and renal venous VEGF-levels: Prognostic relevance in patients with renal cell carcinoma  
T. Klatte, M. Böhm, E.P. Allhoff (Magdeburg, Mittenaar, Germany)

177 The nuclear Furhman grade: A European multicentre study for the determination of the optimal grading  
system in terms of prognosis  
N. Rioux-Leclercq, E. Leray, P. Fergelot, A. Mejean, A. Valeri, V. Ficarra, W. Artibani, L. Cindolo, A. De La Taille,  
L. Salomon, C.C. Abbou, J. Tostain, D. Chautard, L. Schips, R. Zigeuner, B. Lobel, F. Guille, J. Patard (Rennes,  
Paris, Brest, Creteil, St. Etienne, Angers, France; Verona, Benevento, Italy; Graz, Austria)

178 Multicolour FISH on fine-needle biopsies for confirmation of diagnosis  
A. Chyrhai, O. Reichelt, J. Sanjmyatav, H. Wunderlich, J. Schubert, K. Junker (Jena, Germany)

179 Imaging of renal cell carcinoma and prostate cancer using refractory index radiology  
C. Yoon, D. Yoon, D. Sung, J. Lee, A. Kim, C. Oh, J. Je, S. Seol, Y. Huw, G. Margaritondo, D. Yoon (Seoul, Pohang,  
South Korea; Taipei, Taiwan; Lausanne, Switzerland)

180 Prognostic value of the urinary collecting system invasion in renal cell carcinoma  
J. Tostain, B. Lobel, F. Guille (Rennes, Creteil, St Etienne, France; Benevento, Verona, Italy)

181 The usefulness of F-18 deoxiglucose positron emission tomography (FDG-PET) for re-staging renal cell  
cancer patients when a solitary metastasis or an isolated renal fossa recurrence is suspected  
Spain)

183 The effect of competing mortality on the risk of cancer-specific survival in kidney cancer  
D.J. Lewinshtein, A. Briganti, K.F. Chun, F. Guille, B. Lobel, J.J. Patard, V. Ficarra, W. Artibani, L. Cindolo,  
J. Tostain, C. Abbou, D. Chopin, A. De La Taille, P. Perrotte, P.I. Karakiewicz (Montreal, Canada; Rennes, Saint  
Etienne, Creteil, France; Verona, Naples, Italy)

184 Prognosis and clinical characteristics according to the histologic subtypes in renal cell carcinoma  
C.W. Jeong, K.T. Kim, C. Kwak, S.E. Lee (Seoul, Seongnam Gyeonggi, South Korea)

185 Diagnostic evaluation of small renal masses: Value of contrast-enhanced ultrasound in comparison to multi- 
detector helical computed tomography  
L. Pallwein, E. Pallwein, S. Matthias, R. Peschel, G. Bartsch, F. Frauscher (Innsbruck, Austria)

187 Prognostic factors of survival in papillary renal cell carcinomas (PRCC)  
P. Gontero, G. Ceratti, S. Guglielmetti, E. Kočjancić, G. Marchioro, S. Crivellaro, G. Maso, A. Andorno, G. Valente,  
D. Bonvini, F. Faggiano, B. Frea (Novara, Italy)
188 Prognostic significance of the 2002 TNM classification of renal carcinoma in pT2 and pT3a stages
(Sabadell, Spain)

189 Follow-up of complex cystic lesions of the kidney Bosniak type II/IIF
P. Weibl, I. Lutter, J. Breza (Bratislava, Slovakia)

190 How can we avoid unnecessary renal surgery in oncocytoma patients?
O. Reichelt, M. Gajda, A. Chyhrai, H. Wunderlich, K. Junker, J. Schubert (Jena, Germany)
**Wednesday, 5 April - EAU Programme**

### Abstract Session

**Update on ureteroscopy and stents**

<table>
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<tr>
<th>14:30 - 16:00</th>
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<td>Room 242 Level 2</td>
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#### Poster Session 12

**Chairs:** H. Danuser, Luzern (CH)  
M. Gallucci, Rome (IT)

- **Study for 30 min. Interactive discussion for 60 min.**

<table>
<thead>
<tr>
<th><strong>No.</strong></th>
<th><strong>Title</strong></th>
<th><strong>Authors</strong></th>
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<tbody>
<tr>
<td>192</td>
<td>Thermo-expandable ureteric stent in the management of complex refractory benign ureteric strictures: Long term efficacy and risk factors associated with complications</td>
<td>G. Lee, S. Longhorn, M. Kellett, C. Allen, D. Rickards, S. Choong, T. Philp (London, United Kingdom)</td>
</tr>
<tr>
<td>193</td>
<td>Ureteral double-J stents: Subjective and objective evaluation of morbidity and quality of life in 64 patients</td>
<td>C. Milesi, E. Panicucci, F. Carlino, F. Manassero, G. Giannarini, C. Selli (Pisa, Italy)</td>
</tr>
<tr>
<td>195</td>
<td>Risk of collateral damage of endourological tools</td>
<td>P. Honeck, G. Wendt Nordahl, A. Häcker, P. Alken, T. Knoll (Mannheim, Germany)</td>
</tr>
<tr>
<td>197</td>
<td>Which flexible ureterorenoscopes are the best?</td>
<td>J. Deturmeny, S. Larre, Y. Rouach, P. Rivière, A. Girshovich, K. Jamali, P. Sebe, B. Gattegno, O. Traxer (Paris, France)</td>
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<tr>
<td>199</td>
<td>Laser endoureterotomy: Long term results and prediction of the outcome</td>
<td>A. Shoma, R. Faisal, O. Mansour, H. El Kappany (Mansoura, Egypt)</td>
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<td>201</td>
<td>Endoscopic management of impassable ureteric strictures: 8 Year experience</td>
<td>G. Lee, S. Longhorn, M. Kellett, C. Allen, D. Rickards, S. Choong, T. Philp (London, United Kingdom)</td>
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203 Post-operative pain after flexible ureterorenoscopy using simple gravity for irrigation or automated, electronically, controlled irrigation systems
O. Traxer, Z. Abourjeily, A. Thevenin, E. Marret, B. Gattegno, P. Thibault (Paris, France)

204 Flexible ureteroscopy in upper urinary calculi: Indications and results
A. Hochmuth, V. Zimmermanns, P. Liske, S. Lahme (Pforzheim, Germany)

205 In vitro study of irrigation flow and pressure in 3 new generation of flexible ureteroscopes by using pneumatic cuff and automated devices
F. Thibault, P. Sèbe, L. Niang, M.A. Lakmichi, B. Gattegno, P. Thibault, O. Traxer (Paris, France)
Wednesday, 5 April - EAU Programme

Abstract Session

Urothelial tumours: Basic research II

14:30 - 16:00

Room 251 Level 2

Poster Session 13

Chairs: P. Gontero, Novara (IT)
M.J. Ribal Caparros, Barcelona (ES)

Study for 30 min. Interactive discussion for 60 min.

206 Evaluation of the prenyltransferase inhibitor AZD3409 in pre-clinical models of urothelial carcinoma

207 Thiotoximidine combined with raltitrexed and UVA as a potential therapy for bladder cancer

208 Genome-wide expression analysis after demethylation in p53 wildtype and mutated bladder and renal cell carcinoma cell lines
F. Christoph, D. Lenze, B. Hirsch, M. Hummel, H. Krause, K. Miller (Berlin, Germany)

209 Matrix metalloprotease-9 expression helps predict response to intravesical therapy in CIS of bladder

210 Molecular profiling of bladder cancer by cDNA microarrays
M.J. Ribal, M. Burset, L. Mengual, E. Ars, F. Algaba, H. Villavicencio, A. Alcaraz (Barcelona, Spain)

211 The knockdown of multidrug resistance protein 1 gene activity by RNA interference in bladder cell line

212 Differential detection of S100A8 in transitional cell carcinoma of the bladder by pair-wise tissue proteomic and immunohistochemical analysis
J. Tolson, V. Gnau, H. Dihazi, J. Hennenlotter, A.S. Merseburger, A. Beck, G. Müller, T. Flad, C.A. Müller, M. Kuczyk (Tübingen, Göttingen, Germany)

213 Dicoumarol potentiates cisplatin-induced apoptosis mediated by C-Jun N-terminal kinase in p53 wild-type urological cancer cell lines
J. Watanabe, H. Nishiyama, Y. Matsui, H. Kawanishi, M. Ito, T. Kamoto, O. Ogawa (Kyoto, Japan)

214 Effectivity and availability of an intravesical antisense approach in a bladder cancer model
C.E. Blietz, I. Kausch, B. Kynast, C. Doehn, D. Jocham (Lübeck, Leipzig, Germany)

215 Fluorescent-in-situ-hybridization (FISH) for detection of recurrent transitional cell carcinoma of the bladder
M. Marin, L. Mengual, F. Algaba, Y. Arce, M. Burset, M.J. Ribal, E. Ars, L. Izquierdo, H. Villavicencio, A. Alcaraz (Barcelona, Spain)

216 Is high resolution array-based comparative genomic hybridisation able to pick up germline genomic aberrations in hereditary bladder cancer?
L.A. Kiemeney, R.P. Kuiper, R. Pfundt, S. Van Reijmersdal, M.P. Schoenberg, K.A. Aben, M.F. Niermeijer,
217 Bcl-2 and Bcl-xL antisense oligonucleotides enhance cytotoxicity of gemcitabine in bladder cancer cell lines
A. Becker, C. Bolenz, A. Schaaf, L. Trojan, Y. Cao, P. Alken, M.S. Michel (Mannheim, Germany)

218 Low frequency of chromosomal alterations in CGH analysis in low-risk papillary bladder tumours with FGFR3 mutations
K. Junker, E. Zwarthoff, J. Van Oers, I. Kania, J. Schubert, A. Hartmann (Jena, Regensburg, Germany; Rotterdam, The Netherlands)

219 Molecular and immunohistochemical analysis of the prognostic value of cell-cycle regulators in urothelial neoplasms of the bladder

220 Microarray analyses in bladder cancer cells: Inhibition of hTERT expression down-regulates EGFR
Non-neurogenic voiding dysfunction: The bladder factor

Room 252 Level 2

Poster Session 14

Chairs: K.P. Jünemann, Kiel (DE)
       M. Lazzeri, Firenze (IT)

Study for 30 min. Interactive discussion for 60 min.

221 Cellular characterization of detrusor smooth muscle cadherin

222 Cumene hydroperoxide, an agent inducing lipid peroxidation, causes muscarinic receptor damage in the urinary bladder
    R. De Jongh, G. Van Koeveering, M. Dambros, G.R. Haenen, P. Van Kerrebroke (Maastricht, The Netherlands)

223 A new approach for functional treatment of urinary incontinence with mesenchymal stem cells in a rat model
    G. Feil, A.M. Boehmler, S. Maurer, R. Zimmermann, J. Krug, R. Moehle, C. Bock, G. Seitz, A. Stenzl, K.D. Sievert (Tübingen, Germany)

224 Experimental evidence of the effect of the inhibition of phosphodiesterase type 4 by rolipram in conscious rat with bladder outlet obstruction
    V. Julia-Guilloteau, K. Mevel, S. Oger, J. Bernabe, P. Denys, L. Alexandre, F. Giuliano (Gif Sur Yvette, Garches, France)

225 Influence of the inhibition of cyclic nucleotide phosphodiesterase type 4 on human detrusor smooth muscle contractions
    S. Oger, D. Behr-Roussel, J. Bernabe, P. Denys, E. Camperat, T. Lebret, F. Giuliano (Gif Sur Yvette, Garches, Paris, Suresnes, France)

226 Is the urothelium derived inhibitory factor the same substance as the endothelium derived hyperpolarising factor?
    R. Cross, C.R. Chapple, R. Chess-Williams (Sheffield, United Kingdom)

227 The role of interleukin-6 on the contractile responses of rat urinary bladder

228 Beta-adrenoceptor agonists effectively relax rat bladder irrespective of contractile stimulus
    M. Michel, C. Sand (Amsterdam, The Netherlands; Essen, Germany)

229 Histologic features in the urinary bladder wall affected from neurogenic overactivity – a comparison of inflammation, oedema and fibrosis with and without injection of botulinum toxin type A
    E. Compérat, A. Reitz, A. Delcourt, F. Capron, P. Denys, E. Chartrier-Kastler (Paris, France)

230 Persistent detrusor instability after transurethral resection of the prostate is associated with reduced perfusion of the urinary bladder
    M. Mitterberger, G.M. Pinggera, K. Kofler, F. Frauscher, L. Pallwein, H. Gradl, G. Bartsch, H. Strasser (Innsbruck, Austria)
232  Effects of estrogen on the function and the expression of Rho-kinase in rat bladder  
S.K. Hong, J.H. Yang, J.H. Ku, K.J. Park, S.W. Kim, J.S. Paick (Sungnam, Seoul, South Korea)

233  Neonatal diethylstilbestrol treatment and surgical bladder outlet obstruction differentially affect the composition of the rat vesical extracellular matrix  
C. Cabral, F. Sampaio, L. Cardoso (Rio de Janeiro, Brazil)

235  Correlation between CT and urodynamic findings of patients after cerebrovascular accidents (CVA)  
A. Abdel Hafez, D. Rohrmann, R. Toepper, S. Kemény, J. Noth, G. Jakse (Sohag, Egypt; Aachen, Germany)
**Wednesday, 5 April - EAU Programme**

**Abstract Session**

**14:30 - 16:00 Penile disorders and carcinoma of the penis**

**Room Havana Level 3**

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**Poster Session 15**

*Chairs: S. Minhas, London (GB)  
A. Salonia, Milan (IT)*

**Study for 30 min. Interactive discussion for 60 min.**

**236** Significant alterations of transforming growth factor-β and tumour necrosis factor-α in patients with Peyronie’s disease compared to healthy controls  
M. Praetorius, R. Zimmermann, C. Bock, S. Corvin, W. Sturm, G. Feil, A. Stenzl (Tübingen, Germany)

**237** Efficacy of extracorporeal shock wave therapy (ESWT) in patients with Peyronie’s disease (PD) – first results of a prospective, randomised, placebo-controlled, single-blind study  
G. Hatzichristodoulou, C. Meisner, P. Liske, A. Stenzl, S. Lahme (Pforzheim, Tübingen, Germany)

**238** The effect of transdermal electromotive administration (EMDA) of verapamil on the serum levels of metalloproteinase – 1 (MMP1) and their inhibitors (TIMPs) in Peyronie’s disease  
C. Tsalikis, A. Lekas, G. Doumanis, S. Tsalavoutas, G. Koritsiadis, V. Politis, C. Mitsios, S. Koritsiadis (Piraeus, Athens, Greece)

**239** Tunica albuginea free graft for corporoplasty in the baboon: A comparison between 6 months and 1 year effects  

**240** Single centre experience with Mondor’s disease: Clinical presentation, therapy and outcome  
G. Pinggera, K. Tosun, L. Pallwein, M. Mitterberger, J. Bektic, P. Rehder, C. Gozzi, H. Strasser, G. Bartsch (Innsbruck, Austria)

**241** Urogenital involvement in the Klippel-Trenaunay-Weber syndrome – treatment options and results  
F. Vicentini, F.T. Denes, C.M. Gomes, J.L.B. Mesquita, F.A.Q. Silva, M. Srougi (Sao Paulo, Brazil)

**242** Iatrogenic trapped penis: One stage repair  
M. Djordjevic, S. Perovic, S. Sansalone (Belgrade, Serbia and Montenegro)

**243** Value of 18F-FDG-PET/CT in staging penile cancer  
M. Seitz, B. Scher, E. Hungerhuber, P. Schneede, C. Gratzke, O. Reich, C. Stief, B. Schlenker (Munich, Germany)

**244** Comparison of diagnostic radiological modalities in predicting inguinal lymph node involvement in penile cancer  
O. Kayes, C. Allen, D. Ralph, S. Minhas (Harrow, London, United Kingdom)

**245** Nomogram predictive of pathological inguinal lymph node  
V. Ficarra, W. Artibani, S. Cosciani Cunico, G. Anselmo, F. Zattoni, M. Kattan (Verona, Brescia, Treviso, Udine, Italy; Cleveland, United States of America)
246 Penile carcinoma managed in a UK supra-regional referral centre: Lessons learned
P. Hadway, C.M. Corbishley, M. Perry, N.A. Watkin (London, United Kingdom)

247 Size of metastasis in the sentinel node predicts additional nodal involvement in penile carcinoma
B. Kroon, O. Nieweg, H. Van Boven, S. Horenblas (Amsterdam, The Netherlands)

248 Penectomy with simultaneous compared to deferred bilateral inguinal lymph node dissection (ILND) for squamous carcinoma of the penis – evaluation of surgical complications
C. Heyns, P. Theron (Tygerberg, South Africa)

249 Penile cancer - histopathological subtypes and predictors of outcome in a UK series
O. Kayes, S. Minhas, P. Kumar, A. Freeman, N. Christopher, D. Ralph (Harrow, London, United Kingdom)

250 Metastatic risk of T1 penile carcinoma: Has it been underestimated?
C.M. Naumann, C. Van Der Horst, C. Seif, M. Hamann, S.H. Hautmann, P.M. Braun, B. Volkmer, R. Hautmann, K.P. Jünemann (Kiel, Ulm, Germany)
Wednesday, 5 April - EAU Programme

Abstract Session

Testis tumours

Room Concorde 1 Level 4

Poster Session 16
Chairs: B. Lobel, Rennes (FR)
G. Pizzocaro, Milan (IT)

Study for 30 min. Interactive discussion for 60 min.

251 Hypothesis for a correlation of genetic variants of the insulin-like factor 3 gene with the development of testicular cancer
A. Sylakos, D. Baltogiannis, I. Miyagawa, F. Dimitriadis, D. Giannakis, N. Sofikitis (Ioannina, Greece; Yonago, Japan)

252 Examination of cell-death, cell-cycle, repair and stress
H. Schmelz, M. Port, E.W. Hauck, W. Weidner, C. Sparwasser, M. Abend (Ulm, Munich, Giessen, Germany)

253 Promotor methylation and corresponding m-RNA expression of the putative tumour suppressor gene testisin in testicular germ cell tumours (TGCT)
C. Kempkensteffen, F. Christoph, S. Weikert, H. Krause, M. Schrader, K. Miller (Berlin, Germany)

254 Expression of the p63 and notch signalling systems in the testicular germ cell tumour
T. Hayashi, S. Yoshida, R. Ohno, N. Ishii, T. Terao, T. Yamada (Kawagoe, Saitama, Japan)

255 Frequent epigenetic inactivation of the p53 target gene APAF-1 and distinct methylation profile in seminomatous and nonseminomatous germ cell tumours
F. Christoph, C. Kempkensteffen, S. Weikert, H. Krause, M. Schrader, K. Miller (Berlin, Germany)

256 Expression of oestrogen and luteinising hormone receptor in testis cancer
A. Giwercman, N. Dizeyi, A. Bjartell, Å. Lundwall, V. Gadaleanu, K. Teerds (Malmö, Sweden; Utrecht, The Netherlands)

257 Incidence of germ cell tumours during follow-up of testicular microlithiasis
M.A. Van Leeuwen, S. Nadorp, J.L.H.R. Bosch, M.T.W.T. Lock (Utrecht, The Netherlands)

258 Surveillance of testicular microlithiasis? Results of an UK based national questionnaire survey
S. Ravichandran, R. Smith, P. Conford, M. Fordham (Liverpool, United Kingdom)

259 Incidental ultrasound findings in a great population of sub-fertile patients: Our experience and description of a paradoxical oncological disease
I. Gattuccio, F. Montalto, F. Zangara, M. Parrinello, G. Savoca, L. Salame, C. Gagliardo, F. Gattuccio (Palermo, Italy)

260 Outcome analysis of 16 cases of bilateral germ-cell tumours
V. Matveev, M. Volkova, D. Roschin (Moscow, Russia)

261 Bilateral testicular germ cell tumours in Turkey: Long term results and risk factors in 27 patients
262 Tumourectomy for the treatment of Leydig cell tumours of the testis
S. Droupy, H. Mawlawi, V. Izard, E. Fabre, Y. Hammoudi, P. Eschwege, L. Cayzergues, S. Ferlicot, G. Benoît
(Le Kremlin Bicêtre, France)

263 Feasibility of bilateral nerve-sparing laparoscopic retroperitoneal lymph node dissection
H. Steiner, T. Müller, T. Akkad, R. Neururer, G. Bartsch, R. Peschel (Innsbruck, Austria)

264 Post-chemotherapy laparoscopic retroperitoneal lymph node dissection in patients with metastatic testicular carcinoma
S. Corvin, R. Maldonado, D. Schilling, A. Anastasiadis, A. Stenzl (Tübingen, Germany)

265 Intrathoracic germ cell tumours: Treatment results and long-term follow-up
M. Volkova, A. Tjulandin, B. Polotskiy, B. Ahmedov, V. Matveev (Moscow, Russia)
Wednesday, 5 April - EAU Programme

Abstract Session

14:30 - 16:00 Laparoscopic radical prostatectomy and robotic surgery II

Room Concorde 2 Level 4

Poster Session 17
Chairs: X. Cathelineau, Paris (FR)
J-U. Stolzenburg, Leipzig (DE)

Study for 30 min. Interactive discussion for 60 min.

267 Functional and oncological outcome of interfascial nerve-sparing laparoscopic radical prostatectomy
J. Rassweiler, M. Hruza, C. Stock, A.S. Gözen, D. Teber (Heilbronn, Germany)

268 Preoperative and intraoperative risk factors for side-specific positive surgical margins in laparoscopic radical prostatectomy for prostate cancer
F. Secin, A. Serio, F. Bianco, N. Karanikolas, K. Touijer, B. Guillonneau (New York, United States of America)

269 Incidence and risk factors of symptomatic deep venous thrombosis in prostate cancer patients undergoing laparoscopic radical prostatectomy
F. Secin, C.C. Abbou, I. Gill, G. Fournier, T. Piéchaud, C. Schullman, I. Turk, G. Janetschek, N. Karanikolas, A. Serio, A. Vickers, K. Touijer, B. Guillonneau (New York, Cleveland, Burlington, United States of America; Creteil, Brest, Bordeaux, France; Brussels, Belgium; Linz, Austria)

270 5-year biochemical progression free and cancer specific survival following laparoscopic radical prostatectomy
F. Rozet, G. Braud, X. Cathelineau, E. Barret, J. Harmon, D. Almeida, G. Vallancien (Paris, France)

271 Value of frozen sections during nerve-sparing laparoscopic radical prostatectomy
R. Naspro, G. Guazzoni, M. Freschi, A. Cestari, A. Salonia, N. Buffi, F. Montorsi, P. Rigatti (Milan, Italy)

272 Evaluation of sexual activity after laparoscopic radical prostatectomy
A. Mombet, N. Cathala, F. Giuliano, D. Prapotnich, X. Cathelineau, F. Rozet, E. Barret, G. Vallancien (Paris, France)

273 Endoscopic extraperitoneal radical prostatectomy – experience with 900 procedures
J. Stolzenburg, R. Rabenalt, M. Do, M. Burchardt, S. Bhanot, L.C. Horn, M.C. Truss, E. Liatsikos (Leipzig, Hanover, Dortmund, Germany; London, United Kingdom; Patras, Greece)

274 The importance of video documented laparoscopic radical prostatectomy for improvement of positive surgical margin rate in organ confined prostate cancer
T. Erdogru, D. Teber, R. Marrero, A. Hammady, T. Frede, J. Rassweiler (Antalya, Turkey; Heilbronn, Germany)

275 A simple affordable homemade laparoscopic model for narrowing the learning curve of urological trainees-skill acquisition using two key laparoscopic radical prostatectomy steps
S.S. Kommu, F.H. Mumtaz (London, United Kingdom)

276 Endoscopic extraperitoneal radical prostatectomy in the elderly: Comparison of clinical outcomes and short-term oncological results between younger and older men
V. Poulakis, R. De Vries, D. Wolfgang, U. Witzsch, E. Becht (Frankfurt am Main, Germany)
277 Modified transperitoneal approach for laparoscopic radical prostatectomy
A. Häcker, A. Al-Bodour, N. Albquami, S. Jeschke, P. Prammer, K. Leeb, G. Janetschek (Mannheim, Germany; Linz, Austria)

278 Impact of a multidisciplinary continuous quality improvement programme on the positive surgical margin rate after laparoscopic radical prostatectomy

279 The effect of prior bladder outlet surgery on laparoscopic radical prostatectomy
A. Richards, J. Ooi, I. Laczko, D. Moon, C. Eden (Basingstoke, United Kingdom)

280 Urethovesical anastomosis during endoscopic extraperitoneal radical prostatectomy: A prospective comparison between the single-knot running and interrupted technique
V. Poulakis, R. De Vries, W. Dillenburg, U. Witzsch, E. Becht (Frankfurt am Main, Germany)

266 Is it worth revisiting laparoscopic 3D visualisation? A validated assessment
H.R. Patel, J. Joseph (London, United Kingdom; Rochester, United States of America)
**Wednesday, 5 April - EAU Programme**

**Abstract Session**

**Hormone refractory prostate cancer**

**Room Concorde 3 Level 4**

**14:30 – 16:00**

**Poster Session 18**

*Chairs: N.W. Clarke, Manchester (GB)  
C.N. Sternberg, Rome (IT)*

Study for 30 min. Interactive discussion for 60 min.

**281** Molecular triggered therapy in hormone-refractory prostate cancer  
C. Ohlmann, E. Özgür, U. Engelmann, A. Heidenreich (Cologne, Germany)

**282** Somatostatin receptor scintigraphy for neuroendocrine pattern in patients with hormone-refractory prostate cancer: Preliminary experience  
F. Manassero, P. Erba, P. Lazzeri, S. Evangelisti, G. Mariani, C. Selli (Pisa, Italy)

**283** Phase II screening study to assess the combination of a LHRH analogue, dexamethasone and somatostatin analogue versus LHRH analogue with dexamethasone in hormone refractory prostate cancer patients  
F. Calais Da Silva junior, F. Calais Da Silva, T. Oliver, F. Gonçalves (Lisbon, Portugal; London, United Kingdom; Bratislava, Slovakia)

**284** Randomised controlled clinical trial of a combination of somatostatin analog and dexamethasone plus zoledronate vs zoledronate in patients with androgen ablation refractory prostate cancer  
M. Koutsilieris, C. Mitiades, J. Bogdanos, D. Karamanolakis, C. Milathianakis, A. Sourla, T. Dimopoulos (Athens, Piraeous, Thessaloniki, Greece; Boston, United States of America)

**285** Increase of circulating chromogranin A in patients with hormone refractory prostate cancer  
D. Hirano, S. Minei, S. Sugimoto, K. Yamaguchi, T. Yoshikawa, T. Yoshida (Tokyo, Japan)

**286** Serum chromogranine A and chemotherapy in hormone-resistant prostate cancer  
L. Guy, A. Cabrespine, J.B. Bay, E. Khenifar, F. Kwiatkowski, P. Chollet, J. Boiteux (Clermont-Ferrand, Vichy, France)

**287** Randomised study of docetaxel (D) and dexamethasone (Dx) with low or high dose estramustine (E) for patients with advanced hormone-refractory prostate cancer (HRPC)  
T. Nelius, T. Klatte, F. Reiher, R. Yap, E.P. Allhoff (Magdeburg, Germany; Chicago, United States of America)

**288** A phase II clinical study of high-dose Calcitriol plus Docetaxel and Zoledronic acid in hormone-refractory prostate cancer (HRPC)  
M. Bulbul, A. Shamseddine, J. Makarem, Z. Abdel Khalik, A. Taher, N. El-Saghir, R. Khawli, K. Hemadeh (Beirut, Lebanon)

**289** Second-line chemotherapy with docetaxel for prostate-specific antigen (PSA) relapse in men with hormone-refractory prostate cancer (HRPC) previously treated with docetaxel-based chemotherapy  
C. Ohlmann, E. Özgür, S. Wille, U. Engelmann, A. Heidenreich (Cologne, Germany)
Docetaxel, vinorelbine and zoledronic acid as first line treatment in patients with hormone refractory prostate cancer

Phase II study of intravenous vinorelbine plus hormone therapy in hormone-refractory prostate cancer
F. Calais Da Silva Junior, F.E. Calais Da Silva (Lisbon, Portugal)

Low-dose oral chemotherapy for hormone refractory prostate carcinoma (HRPC). Estramustine phosphate versus estramustine phosphate and etoposide. A randomised phase II study of GSTU foundation
V. Serretta, G. Morgia, V. Altieri, A. Siragusa, M. Motta, F. Orestano, M. Napoli, G. De Grande, A. Galuffo, D. Melloni, C. Pavone, M. Pavone Macaluso, R. Allegro, All Members of GSTU (Palermo, Sassari, Napoli, Caltagirone (CT), Catania, Trapani, Siracusa, Sicilia, Calabria, Campania, Molise, Puglia, Basilicata, Italy)

Phase I study with an immunomodulated autologous cell vaccine for locally advanced prostate cancer
M. Berger, J.L. Horst, F. Kreutz, M. Pimentel, R.L. Müller, W.J. Koff (Porto Alegre, Brazil)

Vaccination of hormone-refractory prostate cancer patients with peptide cocktail-loaded dendritic cells: Clinical results of a phase I clinical trial
O. Hakenberg, S. Fuessel, A. Meye, M. Schmitz, S. Zastrow, K. Richter, P. Rieber (Dresden, Germany)
Wednesday, 5 April - EAU Programme

Symposium

Managing the LUTS/BPH patient: The impact of nocturia

16:15 - 17:45

eURO Auditorium Level 1

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

Introduction
P.E. Van Kerrebroeck, Maastricht (NL)

Nocturia: Does it also affect the partner?
N. Stanley, Guildford, Surrey (GB)

Measuring nocturia and its effects on quality of life and quality of sleep
E. Chartier-Kastler, Paris (FR)

Controlling the impact of nocturia: Initial data
M.J. Speakman, Taunton, Somerset (GB)

Discussion and take home messages
P.E. Van Kerrebroeck, Maastricht (NL)

Aims and objectives
Nocturia is one of the most bothersome symptoms for patients with lower urinary tract symptoms suggestive of benign prostatic hyperplasia (LUTS/BPH). Consequently, impaired sleep due to frequent nocturnal awakenings and/or difficulty in falling asleep again may result in a reduction in the hours of undisturbed sleep (HUS), i.e. the time between falling asleep and first awakening to void. This may impair quality of life (QoL) and, in the long term, increase morbidity and mortality. Treatment for LUTS/BPH should therefore relieve LUTS both during the day and night. During the symposium, the need for new instruments to measure nocturia, as well as the impact of nocturia on QoL and HUS, will be reviewed. In addition, data on the effect of the new formulation of tamsulosin, the oral controlled-absorption system (OCAS), on nocturia will be discussed.

Sponsored by ASTELLAS/BOEHRINGER INGELHEIM GMBH
Symposium

Helping couples stay connected - new paradigms in ED management

Chair: I. Saenz De Tejada, Madrid (ES)

Welcome and introduction
I. Saenz de Tejada, Madrid (ES)

Sexual ecology: The partner perspective
A. Graziottin, Milan (IT)

Is timing everything?
I. Saenz de Tejada, Madrid (ES)

Sexual satisfaction for couples
B. Cuzin, Lyon (FR)

Maria and ED: A case discussion
B. Cuzin, Lyon (FR)
A. Graziottin, Milan (IT)

Conclusion
I. Saenz De Tejada, Madrid (ES)

Aims and objectives
At the end of this session, participants will be able to:
• Recognise the importance of the partner and the relationship in treating men with erectile dysfunction (ED)
• Understand the unique biochemical profile of Levitra®
• Understand how ED relates to the quality of life (QoL) of the patient and partner
• Improve communication skills in treating ED.

This symposium will focus on couples with ED and the impact that ED has on their relationship. Research on the female partner of a man with ED elucidates the important effect that ED has on her sexual experience and how successful treatment of the man’s ED improves the experience of both the man and his partner. Our understanding of the sexual ecology of men with ED and their partners helps to put clinical data and treatment decisions into perspective. There is now an extensive body of knowledge about ED that focuses primarily on functionality and improvement of erections, but still too little attention has been given to female partners of men with ED. We will discuss clinical data from a trial that tested the hypothesis that by treating male ED subjects with vardenafil, their female partner’s sexual QoL also shows meaningful improvement. In addition, an overview of new clinical data on Levitra® will be provided.

Sponsored by BAYER HEALTHCARE AG
Wednesday, 5 April - EAU Programme

Advancing the management of OAB: New data, new directions

Room Blue Level 2

Chair: C.R. Chapple, Sheffield (GB)

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

The impact of LUTS: Multi-national results from the EPIC study
I. Milsom, Goteborg (SE)

New data: Do the findings dispel the questions about the treatment of OAB in men?
S.A. Kaplan, New York (US)

Outcomes in OAB treatment: Patient perception – a key to success
W. Artibani, Padua (IT)

Questions and answers/Closing remarks
C.R. Chapple, Sheffield (GB)

Aims and objectives
Overactive bladder (OAB) is often perceived as a condition that affects primarily women. However, there is increasing evidence that OAB is equally prevalent in men and women. New data from the Overactive Bladder (OAB): Epidemiology, Risk Factors, Comorbidities, and Bother (Impact on Quality of Life, Productivity, Depression, and Sexuality study [EPIC]) study—released at this symposium—document the high prevalence of lower urinary tract symptoms (LUTS) in men. Urgency and frequency, with or without urgency incontinence, are part of the LUTS complex and are highly prevalent in men. Yet, men are less likely than women to be diagnosed and therefore less likely to be prescribed an antimuscarinic agent. Men are predominately managed with use of α-blockers, and, despite this treatment, many continue to have persistent, bothersome symptoms. The evidence supporting the advancement of the management of men with LUTS and OAB symptoms will be reviewed. These data demonstrate the need for a shift in the treatment paradigm for men with LUTS. Further, data from the IMPovement in Patients: Assessing Symptomatic Control With Tolterodine (IMPACT) trial suggest that management of OAB in men and women can be further advanced by focusing on the most bothersome symptoms as a treatment end point and a driver of patient satisfaction. The new data presented in this symposium will provide physicians with new insight into the prevalence and bothersomeness of OAB, as well as diagnosis and treatment of this condition in men and women.
Symposium

Prostate cancer prevention: A relevant therapeutic target for patients with BPH

Room Bordeaux Level 3

16:15 - 17:45

Welcome and introduction
M. Marberger, Vienna (AT) bord-5-2250

PCPT revisited
S. Lippman, Houston (US) bord-5-2260

Consequences of screening for prostate cancer: New insights from PCPT
A. Joyce, Leeds (UK) bord-5-2270

Chemoprevention of prostate cancer in the urological patient
M. Marberger, Vienna (AT) bord-5-2280

Panel discussion, questions and answers
bord-5-2285

Conclusion
M. Marberger, Vienna (AT) bord-5-2290

Aims and objectives
The purpose of this symposium is to update participants on NEW aspects from the Prostate Cancer Prevention Trial (PCPT) for prostate cancer prevention and its implications for the management of patients with benign prostatic hyperplasia (BPH). We will examine the use of prostate-specific antigen as a predictive marker in BPH, and as a diagnostic strategy for the detection of prostate cancer in the urologist’s practice. In addition, clinicians will be provided with up-to-date information on the latest evidence from the PCPT, the relationship of the PCPT outcomes to BPH, and the role of finasteride in the management of patients with BPH who are concerned about or at risk of prostate cancer.
Wednesday, 5 April - EAU Programme

Symposium

BPH patient of the third millennium

Room Havana Level 3

16:15 - 17:45

Chair: M.P. Wirth, Dresden (DE)

Introduction
M.P. Wirth, Dresden (DE)

Is there a role for watchful waiting?
P-A. Abrahamsson, Malmö (SE)

LUTS/BPH sexual impact on female partner: CHOQ project
P. Perrin, Lyon (FR)

Evaluation of treatment impact on male sexual function
A.R. Zlotta, Brussels (BE)

Discussion

Conclusion
M.P. Wirth, Dresden (DE)

Aims and objectives
The aim in this symposium is to present the evolution of benign prostatic hyperplasia (BPH) management regarding today’s patient and to discuss the approach in the management of BPH.

Is there a role for watchful waiting? (P-A. Abrahamsson, Malmo)
To evaluate what leads to the decision to treat a patient (symptoms, risk, age) and to try to answer the question as to which patients need no treatment.

Sexual impact on female partner: CHOQ project (P. Perrin, Lyon)
Today’s patient must be seen as a whole considering his everyday life including his relationship with his female partner. The CHOQ project presents the impact of BPH on the female partner.

Evaluation of treatment impact on male sexual function (A. Zlotta, Brussels)
As people live longer, men today want to enjoy their life, including their sexual life, as long as possible. Drugs available for the medical treatment of BPH have a negative impact on sexual function. How should patients be counselled regarding medical and surgical treatment in this respect?

Sponsored by PIERRE FABRE MÉDICAMENT
Symposium

Vascular–targeted photodynamic therapy with Tookad (VTP) for the treatment of localised prostate cancer

Room Maillot Level 2

Chair:  F.M.J. Debruyne, Nijmegen (NL)

Introduction
F.M.J. Debruyne, Nijmegen (NL)  mail-5-2350

VTP with Tookad for the focal treatment of prostate cancer
P. Scardino, New York (US)  mail-5-2360

Results of phase I/II trials with Tookad for the treatment of prostate cancer after radiation therapy
J. Trachtenberg, Toronto (CA)  mail-5-2370

Vascular–targeted photodynamic therapy using Tookad: A clinical study in early prostate cancer
C. Moore, London (GB)  mail-5-2380

Conclusion
F.M.J. Debruyne, Nijmegen (NL)  mail-5-2390

Aims and objectives
Photodynamic therapy (PDT) is a therapeutic modality that enables the destruction of a target tissue by administration of a light-sensitive photosensitiser and the local application of monochromatic light, in the presence of oxygen. Steba Biotech and Negma, in collaboration with the Weizmann Institute of Science, are developing the new-generation photosensitiser Tookad (WST09), a bacteriochlorophyll derivative with the unique characteristics of distribution within the vascular network, better penetration into tissues and rapid clearance without skin phototoxicity. Since PDT with Tookad causes tissue necrosis via vascular damage, this procedure is known as “vascular–targeted photodynamic therapy” (VTP). The symposium organised by Steba Biotech and Negma at EAU 2006 will discuss the use of VTP with Tookad in cancer treatment. Several internationally renowned speakers will present recent results from trials of Tookad given to patients with recurring localised prostate cancer and as a first-line treatment.

Sponsored by STEBA BIOTECH and NEGMA
**Wednesday, 5 April - EAU Programme**

**Symposium**

**Skeletal preservation in prostate cancer: The changing role of the urologist**

**Room Concorde 2 Level 4**

**Chair:** N.W. Clarke, Manchester (GB)

**Welcome and introduction**
N. Clarke, Manchester (GB)  con2-5-2400

**Diagnosis and prevention of bone loss in patients with prostate cancer**
M. Colombel, Lyon (FR)  con2-5-2410

**New clinical tools for urologists: Case studies and best practice**
J. Eastham, New York (US)  con2-5-2420

**New research findings on bisphosphonates: Survival, pain, and antitumor effects**
F. Saad, Montreal (CA)  con2-5-2430

**Focusing bisphosphonate treatment in prostate cancer**
N. Clarke, Manchester (GB)  con2-5-2440

**Questions to the panel and audience feedback**

**Conclusion**
N. Clarke, Manchester (GB)  con2-5-2450

**Aims and objectives**
1. Encourage urologists to actively screen and treat bone metastases in patients with prostate cancer.
2. Discuss the increased risks of fractures for patients receiving androgen deprivation therapy and the impact of bisphosphonates on reducing bone resorption.
3. Highlight the impact of bisphosphonate therapy on improving pain and quality of life in patients with metastatic prostate cancer.
4. Describe the activities of bisphosphonates that may affect tumour growth and survival.
**Symposium**

**Progress in medical management of renal cell carcinoma (RCC): The expanding role of the urologist**

**Room Concorde 1 Level 4**

**Chair:** D. Jacqmin, Strasbourg (FR)

**Introduction**
D. Jacqmin, Strasbourg (FR)  

**Signal transduction inhibitors: The benefits of multi-targeting**
P. De Mulder, Nijmegen (NL)

**New perspectives in the treatment of RCC**
O. Rixe, Paris (FR)

**Rationale for study of multi-targeted Tyrosine kinase inhibitors in the adjuvant and neo-adjuvant setting**
D. Jacqmin, Strasbourg (FR)

**Conclusion**
D. Jacqmin, Strasbourg (FR)

**Aims and objectives**
Highlight and review the benefits of multi-targeted therapies. Review disease background, pathophysiology and current management techniques in renal cell carcinoma (RCC). Provide critical information on new therapies to treat RCC. Present the rationale of multi-targeted tyrosine kinase inhibitors in the neo-adjuvant and adjuvant settings.
**Wednesday, 5 April - EAU Programme**

### EAU Opening Ceremony and Welcome Cocktail

**eURO Auditorium Level 1**

**18:15 - 21:00**

**Welcome address**
L. Boccon-Gibod, Paris (FR), EAU Congress President

**Opening address**
P. Teillac, Paris (FR), EAU Secretary General

**Short Opening Show**

**Announcement of the new honorary EAU members**
Citation by P. Teillac, Paris (FR)
Honorary members: G. Bartsch, Innsbruck (AT)

**Presentation Willy Gregoir Medal**
Citation by P. Teillac, Paris (FR)
Presented to: A. Borkowski, Warsaw (PL)
The EAU is proud to present the Willy Gregoir Medal to an important senior urologist who contributed in an extraordinary way to the development of urology in Europe

**Presentation Frans Debruyne Lifetime Achievement Award**
Citation by P. Teillac, Paris (FR)
Presented to: C. Schulman, Brussels (BE)
The EAU wish both to honour and acknowledge the important and long-standing contributions by a distinguished colleague to the activities and development of this association

**EAU-AUA International Academic Exchange Programme – the European Tour**
Recognition of the participants:
Senior advisor: J. William McRoberts, Kentucky (US)
Fellows:
- S. Chang, Vanderbilt University Medical Centres, Nashville (US)
- P. Dahm, Duke University, Durham (US)
- S. Jackman, University of Pittsburgh, Pittsburgh (US)

**Congress Opening Show**
KIMERA - Fable and imagery created as reality
Sergi Buka combines the ancient and universal language of Chinese shadows with the modernity of the projections of video, using magic as a conductive thread to surprise the audience.

**19:30 - 21:00**

**Welcome Cocktail in the exhibition area on level 1**
Plenary session

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<th>Chairs</th>
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<td>07:30 - 11:00</td>
<td><strong>Plenary session 1</strong></td>
<td>eURO Auditorium Level 1</td>
<td>C.R. Chapple, Sheffield (GB)</td>
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<td>P. Teillac, Paris (FR)</td>
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07:30 - 08:00 | **Highlight session 1** |

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<thead>
<tr>
<th>Topic</th>
<th>Speaker</th>
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<tr>
<td>Oncology</td>
<td>S. Hautmann, Kiel (DE)</td>
<td>eURO-6-0000</td>
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<tr>
<td>Functional urology</td>
<td>F. Carboni, Novara (IT)</td>
<td>eURO-6-0010</td>
</tr>
<tr>
<td>Stone disease</td>
<td>O.W. Hakenberg, Dresden (DE)</td>
<td>eURO-6-0020</td>
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08:00 - 08:05 | **Award session 1** |

**EAU Crystal Matula Award 2006**
Supported by an unrestricted educational grant from LABORIE MEDICAL TECHNOLOGIES

**EAU Thesis Award 2005**
Supported by an unrestricted educational grant from SANOFI-AVENTIS

08:05 - 08:20 | **State-of-the-art lecture** European Urology is your journal: A plan for the future |

**Speaker:** F. Montorsi, Milan (IT)

**Aims and objectives**
This lecture is aimed at illustrating in detail the new format of European Urology, the official journal of the European Association of Urology. Following 30 years of invaluable leadership of Prof. Claude Schulman, currently editor emeritus of the journal, Prof. Francesco Montorsi from Milan has taken over and guided European Urology through a number of major changes. New features in European Urology will include: new cover and new layout of articles, new table of contents with take-home messages for each article, extended editorial authored by major experts, review articles, original articles, case study of the month to be published in part on the front cover of the journal, “open to debate” and “interviews sections” involving internationally known opinion leaders, “words of wisdom” section devoted to surveying the urological literature, resident’s corner devoted to highlighting the best work from residents, top downloads of articles, previews of future articles. High quality copy-editing will be applied to every accepted paper. First round of peer review is completed in 14 days. Following acceptance, articles will be available online in 14 days. The editorial board of European Urology has been completely renovated. Join this European Urology session to know more about “your platinum” journal.
08:20 - 08:40  American Urological Association (AUA) lecture A novel virus associated with genetic susceptibility to prostate cancer

Speaker: E.A. Klein, Cleveland (US)  

Aims and objectives
While the etiology of prostate cancer is unknown, it is clear that both genetics and environment play a role in its origin and evolution. Guided by epidemiologic observations and genome-wide scans, genetic linkage studies have recently identified a number of susceptibility genes for the development of prostate cancer. In addition, histologic and molecular studies suggest an important role for intraprostatic inflammation in tumor initiation and progression. This review highlights recent scientific and clinical evidence, including the isolation and characterization of a new viral pathogen, suggesting a convergence between genetic susceptibility, predisposition to infection, and impaired cellular defense mechanisms against oxidative stress in the genesis of prostate cancer, and presents an integrated model synthesizing these genetic, molecular, and cell biological events. The potential implications for development of effective prevention strategies are also discussed.

08:40 - 09:20  Breaking news session Anti-angiogenic therapy in renal cancer; the role of the urologist

Chair: P.F.A. Mulders, Nijmegen (NL)  

Introduction renal cell carcinoma and anti-angiogenic therapy  
P.F.A. Mulders, Nijmegen (NL)  

Prognostication and patient selection  
J.J. Patard, Rennes (FR)  

Results of clinical studies and future perspectives  
A. Belldegrun, Los Angeles (US)  

Aims and objectives
Within a breaking news session the EAU attendance will be informed on the implementation of new targeted therapy with proven efficacy in renal cell carcinoma (RCC). These new small molecules inhibit angiogenesis and a significant impact on disease control and survival. Knowledge on current treatment and selection of RCC patients for systemic treatments will be presented. Moreover the important role of the urologist in these new treatment modalities will be explained.

09:20 - 09:40  State-of-the-art lecture New indications for IPDE 5

Speaker: P. Hedlund, Lund (SE)  

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09:40 - 10:20  Round table discussion The management of renal stone disease in 2006

Chair: P. Van Cangh, Brussels (BE)
Panel: P.J. Conort, Paris (FR)  eURO-6-0110
F. Keeley, Bristol (GB)  eURO-6-0120
N. Vodopija, Slovenj Gradec (SI)  eURO-6-0130

Aims and objectives
There is an increasing tendency to consider that the major problems related to stone disease and its management are largely resolved. This is reflected by a trend to reduce the time devoted to urolithiasis at contemporary urological congresses, and the decreasing number of publications on the topic in modern literature. A closer look however reveals a less than optimistic reality. Complete stone-free rates remain unacceptably low, recurrences are high, and complications and re-treatment rates are probably under-reported, or more importantly, considered inevitable.

This round table is clinically oriented. Commonly encountered scenarios will be presented involving problematic renal and ureteral calculi. The panel of experts will provide delegates with the most recent information on indications and rationale for treatment selection, helping the practising urologist to address the simple but difficult issue of: "When and how to intervene" and more importantly "When not to interfere".

10:20 - 10:40  State-of-the-art lecture Serum proteomics in urological cancer

Speaker: U.H. Stenman, Helsinki (FI)  eURO-6-0140

Aims and objectives
Proteomics is a promising approach for identification of new tumour markers. Mass spectrometric (MS) techniques for detection of proteins have evolved dramatically and are increasingly applied to the identification of new biomarkers. So far methods based on matrix-assisted laser desorption and ionisation (MALDI or SELDI) have mainly been used to study protein and peptide profiles associated with cancer and several promising reports have been published. However, the results have not been reproducible and really useful new markers remain to be detected. This can be explained by over-optimistic expectations regarding the sensitivity and resolution of the methods used. All known tumour markers occur at concentrations that are about one million-fold lower than those of the major serum proteins. With the MS techniques used, only abundant proteins are detectable. New studies using more sophisticated techniques have therefore been initiated. Other promising approaches are to use pre-fractionation of the sample before MS analysis and to study other body fluids, e.g. urine, and tissue extracts. Although we are still waiting for a breakthrough, it is most likely that proteomics will provide us with new tools to diagnose urological cancer.

10:40 - 11:00  Società Italiana di Urologia (SIU) lecture The bladder detrusor - an innocent victim of the prostate

Speaker: V. Mirone, Naples (IT)  eURO-6-0150

Aims and objectives
Morpho-functional alterations of the bladder detrusor are one of the most important, if not the main, mechanism through which benign prostatic hyperplasia (BPH) causes lower urinary tract symptoms (LUTS). Data is now available in the literature showing how infravesical obstruction causes enlargement and wall thickening of the detrusor muscle. This morphological change can cause irreversible damage if a critical threshold is not surpassed. It has also been demonstrated that this modification is not only due to muscle cell hypertrophy, but also to collagen neo-deposition, which severely alters bladder wall architecture and structure. The increase in collagen content correlates with the presence and severity of LUTS in BPH patients, and tends to correlate with the presence of detrusor overactivity. Being irreversible, collagen neo-deposition possibly plays a role in
the persistence of symptoms after obstruction-reliever procedures, described in as many as 30% of men with BPH. Based upon this new discovery of pathogenesis of LUTS in “prostatic patients”, the natural history of BPH should be updated.
# Sub-plenary session

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<th>Time</th>
<th>Session</th>
<th>Speaker</th>
<th>Location</th>
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<tr>
<td>11:00 - 11:15</td>
<td>Section highlights of the European Society of Infection in Urology (ESIU)</td>
<td>M.C. Bishop, Nottingham (GB)</td>
<td>252-6-0160</td>
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<tr>
<td>11:15 - 11:30</td>
<td>Section highlights of the European Society of Neurourology (ESNU)</td>
<td>D.J.M.K. De Ridder, Leuven (BE)</td>
<td>252-6-0170</td>
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<tr>
<td>11:30 - 11:45</td>
<td>Section highlights of the European Society for Urological Imaging (ESUI)</td>
<td>H. Wijkstra, Amsterdam (NL)</td>
<td>252-6-0180</td>
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<tr>
<td>11:45 - 12:00</td>
<td>Section highlights by the eUrolithiasis Society (EULIS)</td>
<td>P.N. Rao, Manchester (GB)</td>
<td>252-6-0190</td>
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Thursday, 6 April - EAU Programme

Sub-plenary session

11:00 - 12:00  Sub-plenary session 2

Moderator: C. Llorente, Madrid (ES)

eURO Auditorium Level 1

11:00 - 11:30  State-of-the-art lecture Laparoscopic training for urological surgeons

Speaker: C.C. Abbou, Creteil (FR)

eURO-6-0200

Aims and objectives

Most of the well-standardised open techniques are switching to minimal invasive procedures. The laparoscopic approach has proven its value in this matter. Due to the steep learning curve, methods of training have been developed worldwide in which two parameters must be considered: the laparoscopic skills of the surgeon and knowledge of the technique. Daily practice on the pelvitrainer is a crucial and unavoidable step in achieving laparoscopic skills, particularly in terms of becoming familiar with the handling of instruments and dissection and suturing techniques. Nowadays, each training programme has its own well-defined method. In the near future, virtual training with the modality of simulation will be used for practice, as well as for evaluating the skills of a trainee. To gain knowledge of a particular technique, self-study by reading books, watching videos, attending live surgery in an operating room and assisting a skilled expert will lead to an understanding of the different steps involved. At the end, it will give the trainee the opportunity to be self-confident with the technique and to fulfil a laparoscopic procedure advised by the expert. The tips and tricks given by an expert will help the trainee to shorten his learning curve. For this purpose, a standardised and reproducible technique is necessary and even obligatory. Developments of all these ideas will be addressed during the session.

11:30 - 12:00  State-of-the-art lecture The objective evaluation of functional results following the treatment of localised prostate cancer

Speaker: G. Vallancien, Paris (FR)

eURO-6-0210

Aims and objectives

A great disparity exists in the literature regarding the reporting of functional outcomes following radical prostatectomy. Although validated questionnaires are used, many variables still exist in the evaluation of erectile dysfunction and incontinence that render the comparison of outcomes impossible.

A query was conducted encompassing the literature from January, 2000 to October, 2005. 98 papers were available for analysis. Variability was seen in study design. Twenty-seven percent of articles stated that a single surgeon performed all operations. Two surgeons were said to have performed all operations in 6.25%, and three surgeons in 3.12% of studies. Multiple surgeons (four or greater) contributed in 22.9% of articles, and in 40.6% of papers this statistic was not stated. The party responsible for the collection of data was stated in 25% of papers. Of these papers, direct physician involvement in the collection occurred in 8.3%, research assistants were the primary collectors in 5.2%, and an independent third party was responsible 11.4% of papers. The timing of survey also varied greatly. In articles pertaining to erectile dysfunction, an average of 69% potent men postoperatively was calculated (range 6-100%). For incontinence, an average of 95.3% was calculated (range 42-100%). The patient’s preoperative status was given in 31.6% of papers relating to ED while 18.3% of papers relating to incontinence made this information available. 7.5% of papers reported on ejaculatory or orgasm satisfaction.

Conclusions: Many variables exist when evaluating the functional outcomes following radical prostatectomy. Differences in methodology, scores and statistics data do not allow to get the truth. In order to better evaluate the functional outcomes of radical prostatectomy, a unified approach is essential.
Sub-plenary session

11:00 - 12:00 Sub-plenary session 3

Room Ternes Level 1

Moderator: C.R. Chapple, Sheffield (GB)

11:00 - 11:30 State-of-the-art lecture Tissue engineering for the lower urinary tract

Speaker: K-D. Sievert, Tübingen (DE)

Aims and objectives
Clinical "state-of-the-art" tissue engineering (TE) solutions for urological reconstruction currently means acellular xenograft matrices. Certain materials have been introduced with a proclaimed success rate as free transplants; however, the clinical outcome has been disappointing as there are long study follow-ups for most materials and indications. With continued research, the approach has been taken to understand the mixed outcome of these materials. In addition, cell expansion and tissue regeneration has progressed with the first successful clinical application in treating urinary stress incontinence. To understand the place of TE in reconstructive urology, it is important to pinpoint which goals have been reached in the laboratory and to address future requirements to solve the outstanding issues. By articulating these possibilities, TE can be successfully brought into the clinic to conform to general medical principles.

11:30 - 12:00 State-of-the-art lecture The role of laser prostatectomy in BPH

Speaker: D. Jocham, Lübeck (DE)

Aims and objectives
Holmium laser enucleation of the prostate (HoLEP) combined with mechanical morcellation represents the latest refinement of holmium:YAG surgical treatment for benign prostatic hyperplasia (BPH). The efficiency and reliability of the HoLEP technique as an alternative to transurethral resection of the prostate (TURP) and open prostatectomy have been verified by numerous prospectively randomised studies. Photoselective vapourisation of the prostate (PVP) utilises high-power (80W). Potassium-titanyl-phosphate (KTP) laser represents the latest evolutionary development in laser prostatectomy. The latest results of studies comparing TURP and laser technology have proven that both laser techniques (HoLEP and PVP) are safe and efficacious with durable results. As yet, there are no studies comparing the efficiency and safety of the HoLEP and PVP techniques. Although there is a lack of long-term results, the short-term results suggest that both techniques are equal in efficiency and are superior with respect to safety compared to TURP.
Sub-plenary session

11:00 - 12:00

Sub-plenary session 4

Moderator: G.A. Bogaert, Leuven (BE)

Room Maillot Level 2

11:00 - 11:30

ESPU lecture Management of upper urinary tract lithiasis in children

Speaker: H.B. Lottmann, Paris (FR)  

Aims and objectives
Particularities in the management of urolithiasis in the paediatric age group mainly concern the very young age group, particularly infants. Apart from this very young age group, treatment options for older children are very similar to that of adults and the patient can be managed in most urolithiasis treating centres. Because of its efficiency, and its low morbidity, ESWL should always be considered as the first treatment option; other treatment modalities (i.e. percutaneous nephrolithotomy, ureteroscopy, laparoscopy or open surgery) are discussed when ESWL is a poor indication, or has failed or is not available.

11:30 - 12:00

State-of-the-art lecture The management of vesico-ureteric reflux in childhood

Speaker: E. Jaureguizar, Madrid (ES)  

Aims and objectives
Vesico-ureteric reflux (VUR) remains one of the most controversial issues in paediatric urology. Evidence-based medicine has shown that many of the old theories of VUR were based on opinion rather than on evidence. Pertinent questions are:

• Is reflux alone harmful or must it be associated with urinary tract infections to produce damage?
• Are VUR-related renal lesions acquired or congenital?
• Does bladder dysfunction have a role in VUR? Our ability to use modern imaging techniques to follow the development of VUR from the fetal period onwards has changed our understanding of the problem. The remaining controversial questions are:
• Whether reflux should be treated?
• And if so, when should that happen? As with many other aspects of life, there are no clear answers in medicine, and in fact, valid answers may be mutually exclusive. However, we shall still be able to present some clear conclusions on how to manage VUR at the beginning of the 21st century.
**Sub-plenary session**

**11:00 - 12:00**

**Sub-plenary session 5**

*Room Blue Level 2*

**Moderator:** I. Eardley, Leeds (GB)

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**11:00 - 11:30**

State-of-the-art lecture *The management of premature ejaculation*

*Speaker:* S. Droupy, Le Kremlin Bicêtre (FR)

**Aims and objectives**

The recent increase in research with regard to premature ejaculation has generated a significant number of new informations looking at the diagnosis, definition and management of this condition. A number of behavioural and psycho-relational approaches have been proposed to treat premature ejaculation. Effective psychosexual treatment combines multiple strategies such as physiological relaxation, pubococcygeal muscle training, cognitive and behavioral pacing strategies, and the involvement of the partner in the therapy. Taking advantage of the ejaculation-delaying effects of selective serotonin reuptake inhibitors (SSRIs) increases the treatment options available to prescribers and patients. A recent meta-analysis of daily treatment studies with SSRIs and clomipramine demonstrated comparable efficacy of clomipramine with sertraline and fluoxetine in delaying ejaculation, whereas the efficacy of paroxetine was greater. New acute treatment interventions with short half-lives SSRIs are under investigation.

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**11:30 - 12:00**

State-of-the-art lecture *Optimising semen analysis*

*Speaker:* W. Weidner, Giessen (DE)

**Aims and objectives**

Approximately 15% of couples are unable to conceive a child after 1 year of regular unprotected intercourse. In up to 50%, a male factor is involved, which is usually defined by abnormal semen analysis. Precise normal values have not been accepted worldwide for semen parameters. In Europe, the reference values given by the WHO are considered to be the “gold standard”.

- Standardised tests of semen are based on the WHO reference values. Varying time of sexual abstinence and lack of standardisation may contribute to significant different results.
- Concerning morphology, the use of strict criteria indicates that cut-off values for normality are substantially lower than those proposed by the WHO.
- Estimating motility, the introduction of objective, computer-aided sperm assessment may improve accuracy. Limitations of these techniques will be addressed.
- Identification of leucocytes is necessary for the diagnosis of male accessory gland infections and prostatitis. Today, the techniques and cut-off points are under debate.
- Specialised tests, e.g. antisperm antibodies, specialised test of sperm function and the measurement of seminal plasma parameters may have an indication in selected patients. The indications are presented. Finally, the relation between semen quality and fertility is discussed against the background of the new literature published in the century of intracytoplasmic sperm injection (ICSI).
### Thursday, 6 April - EAU Programme

**Sub-plenary session**

**11:00 - 12:00 Sub-plenary session 6**

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

**Room Havana Level 3**

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<td>11:00 - 11:40</td>
<td><strong>Original presentations selected from submitted abstracts</strong></td>
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| 11:00 - 11:40 | Predicting recurrence and progression in stage Ta-T1 bladder cancer patients using EORTC risk tables  
R. Sylvester, Brussels (BE)  
hava-6-0280 |
| 11:00 - 11:40 | Which patients with To-4 N0 M0 prostate cancer most suitable for local treatment with curative intent do not need immediate treatment in EORTC trial 30891?  
L. Collette, Brussels (BE)  
hava-6-0290 |
| 11:40 - 12:00 | **State-of-the-art lecture**  
**The future of academic medicine: Five scenarios to 2025**  
**Speaker:** J. Clark, London (GB)  
hava-6-0300 |

**Aims and objectives**

Two of the greatest challenges facing academic medicine in the 21st century are its relationship with stakeholders and bridging the translational gap.

- Will fostering deeper collaboration with health care partners (including the pharmaceutical industry) threaten or save academic medicine?
- How best can academic medicine better engage with its chief “customers”: patients, general and specialist practitioners, and policy makers?

Scenario building provides an opportunity to think outside the box. We have considered current global instabilities and future drivers of change to create five scenarios of how academic medicine might look in 2025. These generate possibilities for what strategic decisions need to be taken today. The aims of this seminar are to introduce five future scenarios for academic medicine, discuss the similarities and differences between them, debate their relative merits, and identify decisions that must be taken now to ensure the most desirable future.
Sub-plenary session

11:00 - 12:00 Sub-plenary session 7

Moderator: G.N. Thalmann, Berne (CH)

Room Bordeaux Level 3

11:00 - 11:20 State-of-the-art lecture Is there still a place for open stone surgery?

Speaker: J.J.M.C.H. De La Rosette, Amsterdam (NL)

11:20 - 12:00 Drugs in urology: Current controversies Zoledronic acid and protection of the skeleton in prostate cancer

The evidence
Y. Hei (Novartis US)

The urologist's view
C.C. Schulman, Brussels (BE)
M.P. Wirth, Dresden (DE)

Debate: The way forward and questions from the audience
Y. Hei (Novartis US)
C.C. Schulman, Brussels (BE)
M.P. Wirth, Dresden (DE)
Thursday, 6 April - EAU Programme

Abstract Session

12:15 - 13:45 Laparoscopic surgery in renal cell carcinoma

eURO Auditorium Level 1

Video Session 3

Chairs: R. Bollens, Brussels (BE)
       H.G. Van Der Poel, Amsterdam (NL)

All presentations are 14 minutes in length

V13 Laparoscopic partial nephrectomy with clamping of the renal parenchyma

V14 Laparoscopic partial nephrectomy for RCC in warm ischaemia
     A. Häcker, K. Leeb, N. Albquami, A. Al Badour, S. Jeschke, G. Janetschek (Mannheim, Germany; Linz, Austria)

V15 Laparoscopic upper pole heminephroureterectomy in complete duplication of the ureter
     P. Casale, M. Simone, R. Marzano, C. Casarosa, G. Pomara, F. Francesca (Pisa, Italy)

V16 Tachosil® is an effective haemostatic aid during laparoscopic partial nephrectomy in a porcine model
     D. Murphy, R. Puri, P. Rimington, A. Rane (London, Bradford, Eastbourne, Redhill, United Kingdom)

V17 A refined technique of laparoscopic nephroureterectomy
     A. Tsivian, S. Benjamin, A.A. Sidi (Holon, Israel)

V18 Laparoscopic removal of local recurrence of renal cell carcinoma (RCC)
     A. Tsivian, S. Benjamin, A. Kheifets, A.A. Sidi (Holon, Israel)
Abstract Session

Testis tumours: Diagnosis and management

Room Blue Level 2

Oral Session 4

Chairs: P. Albers, Kassel (DE)  
F.M.J. Debruyne, Nijmegen (NL)

All presentations are 7 minutes in length, followed by 2 minutes of discussion

Overview presentation
P. Albers, Kassel (DE)  
blue-6-0420

296 Real-time elastography for evaluation of testicular masses: Initial experience
L. Pallwein, H. Steiner, T. Akkad, G. Bartsch, F. Frauscher (Innsbruck, Austria)  
blue-6-0430

297 MR imaging in the histological characterisation of testicular tumours
A. Tsili, C. Tsampoulos, X. Giannakopoulos, A. Silakos, E. Arkoumani, N. Sofikitis, S. Efremidis (Ioannina, Greece)  
blue-6-0440

298 Outcomes of surveillance protocol of clinical stage I nonseminomatous germ cell tumours: is shift to risk adapted policy justified?
R.T. Divrik, B. Akdogan, H. Ozen, F. Zorlu (Izmir, Ankara, Turkey)  
blue-6-0450

299 Management of bilateral testicular germ cell tumours – experience of the German testicular cancer study group (GTCSG)
A. Heidenreich, P. Albers, S. Krege (Cologne, Kassel, Essen, Germany)  
blue-6-0460

300 Post chemotherapy retroperitoneal lymph node dissection - is full bilateral resection always necessary?
H. Steiner, R. Peschet, T. Müller, T. Akkad, C. Gozzi, G. Bartsch (Innsbruck, Austria)  
blue-6-0470

301 The value of post chemotherapy surgery in the management of patients harbouring liver metastases from germ cell tumours
J. Hartmann, O. Rick, K. Öchsle, T. Gauler, P. Schöffski, J. Schleicher, F. Mayer, R. Teichmann, L. Kanz, C. Bokemeyer, M. Kuczyk (Tübingen, Berlin, Essen, Hanover, Hamburg, Germany)  
blue-6-0480

302 Open versus laparoscopic retroperitoneal lymph node dissection in clinical stage I nonseminomatous germ cell tumour: A comparative study of quality of life and reconvalescence
V. Poulakis, W. Dillenburg, K. Skriapas, R. De Vries, U. Witzsch, E. Becht (Frankfurt am Main, Germany)  
blue-6-0490

303 Organ sparing surgery in small testicular tumours does not lead to development of anti-sperm antibodies
H. Steiner, T. Müller, T. Akkad, C. Gozzi, M. Neyer, G. Bartsch (Innsbruck, Austria)  
blue-6-0500

Summary
F.M.J. Debruyne, Nijmegen (NL)  
blue-6-0510
# Thursday, 6 April - EAU Programme

## Abstract Session

### Oral Session 5

**Chairs:**  
- L. Egevad, Stockholm (SE)  
- H. Patel, London (GB)

All presentations are 7 minutes in length, followed by 2 minutes of discussion.

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<thead>
<tr>
<th>Presentation</th>
<th>Title</th>
<th>Authors</th>
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<td>305</td>
<td>Molecular biological analysis of the heterogeneous prostate cancer group Gleason score 7</td>
<td>C. Mian, F. Marziani, M. Lodde, E. Comploj, S. Palermo, L. Lusuardi, M. Mian (Bolzano, Italy)</td>
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<tr>
<td>306</td>
<td>Adverse pathological findings in patients with needle biopsy Gleason score 6 prostate cancer with a PSA level of 2-4ng/ml and 4-10ng/ml following radical prostatectomy</td>
<td>J. Bektic, A.E. Pelzer, A.P. Berger, G. Bartsch, W. Horninger (Innsbruck, Austria)</td>
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<tr>
<td>307</td>
<td>Anterior and posterior T1c prostate cancer, clinical and histopathological characteristics of 202 cases</td>
<td>S. Arbeláez Arango, F. Aguiló Lúcia, E. Condom Mundó, J. Suarez Novo, F. Vigués Juliá, J. Muñoz Seguí, N. Serrallach Mila (Barcelona, Spain)</td>
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<td>308</td>
<td>Grade inflation in prostate cancer throughout 20 consecutive years of radical prostatectomy at the same institution. Is there a real upward shift in grade?</td>
<td>A. Salonia, G. Zanni, M. Scavini, M. Freschi, F. Montors, L.F. Da Pozzo, V. Scattoni, R. Bertini, G. Guazzoni, P. Karakiewicz, P. Rigatti (Milan, Italy; Montreal, Canada)</td>
</tr>
<tr>
<td>310</td>
<td>Intraoperative pathological staging of prostate cancer during radical retropubic prostatectomy</td>
<td>S. Lacquaniti, P. De Giuli, P.P. Fasolo, E. Conti, N. Dogliani, G. Sebastiani, R. Mandras, L. Puccetti, G. Fasolis (Alba, Italy)</td>
</tr>
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</table>
Determination of preoperative PSA and Gleason score from punch biopsy alone is limited in the prediction of lymph node metastasis in prostate carcinoma patients.

M. Musch, V. Klevecka, U. Roggenbuck, S. Stoerkel, D. Kroepfl (Essen, Wuppertal, Germany)

Summary

H. Patel, London (GB)
Thursday, 6 April - EAU Programme

Abstract Session

Erectile dysfunction: Epidemiology and clinical research

Room Ternes Level 1

Poster Session 19

Chairs: I. Moncada-Iribarren, Madrid (ES) V. Mirone, Naples (IT)

Study for 30 min. Interactive discussion for 60 min.

312 Erectile dysfunction predictor for acute myocardial infarction and stroke
B.W.V. Schouten, A.M. Bohnen, J.L.H. Bosch, J.W. Deckers, R.M.D. Bernsen, S. Thomas (Rotterdam, Utrecht, The Netherlands)

313 Erectile dysfunction as a predictive factor of coronary artery disease: A prospective study
F. Dubosq, T. Lebret, A. Guiomord, C. Tainturier, J.C. Bousquet, H. Botto (Suresnes, Paris, France)

314 A cross sectional study of the effects of vascular disease on corporal oxygen saturation (StO2) in the flaccid and erect penis
P. Padmanabhan, S. Telegraft, A. McCullough (New York, United States of America)

315 Male sexual dysfunction after stroke: Correlation between brain lesion and sexual function
J. Hyun, S.C. Gam, J.H. Chong, O. Kwon, K. Moon (Jinju, Daegu, South Korea)

316 Vascular risk factors and erectile dysfunction in healthy men
A. Ponholzer, C. Temml, M. Marszalek, K. Mock, M. Rauchenwald, S. Madersbacher (Vienna, Austria)

317 The effect of vardenafil (Levitra) on endothelial function of cavernous and brachial arteries in patients with erectile dysfunction
E. Mazo, S. Gamidov, V. Iremashvili (Moscow, Russia)

318 Endothelial function of brachial and cavernous arteries in patients with erectile dysfunction
S. Gamidov, E. Mazo, V. Iremashvili (Moscow, Russia)

319 Erectile dysfunction in patients suffering from adrenal tumours
J. Stefancik, B. Trebaticky, J. Dubravicky, J. Brutenic, J. Breza (Bratislava, Slovakia)

320 Thoughts and views on erectile dysfunction in the 50+ population in Belgium
H. Claes, H. Van Poppel (Leuven, Belgium)

321 The impact of discussions between men with erectile dysfunction (ED) and their doctors on continuation of PDE5 inhibitor treatment: Subset analysis of men with ED from the multinational men’s attitudes to life events and sexuality (MALES) phase II study
W.A. Fisher, R. Rosen, I. Eardley, M. Sand (Ontario, Canada; Piscataway, Westhaven, Connecticut, United States of America; Leeds, United Kingdom)

322 Female partners’ attitudes are associated with treatment seeking for erectile dysfunction (ED) in men with ED
W.A. Fisher, R. Rosen, I. Eardley, M. Sand (Ontario, Canada; Piscataway, Westhaven, Connecticut, United States of America; Leeds, United Kingdom)
323  Clinimetric properties of LISAT-8 questionnaire as a screening tool for erectile dysfunction
I. Moncada-Iribarren, J. Rejas, E.M. Martinez, C. Fernandez Micheltorena (Madrid, Spain)

324  Daytime penile tumescence testing during midazolam induced sleep after the nocturnal sleep deprivation at
the previous night
Y.S. Song, K.H. Lee, K.J. Kim, Y.H. Park (Seoul, South Korea)

325  Erectile functions and nocturnal penile tumescence and rigidity monitoring in men with lower urinary tract
symptoms
T. Jakubczyk, P. Kryst, K. Pych, B. Dybowski, R. Hanecki, A. Gugala, A. Borkowski (Warsaw, Poland)

326  Apolipoprotein E knockout mice as a new model of hypercholesterolaemia and atherosclerosis-associated
erectile dysfunction
D. Behr-Roussel, B. Darblade, A. Oudot, S. Compagnie, J. Bernabé, L. Alexandre, F. Giuliano (Gif Sur Yvette,
Garches, France)
Thursday, 6 April - EAU Programme

Abstract Session

12:15 - 13:45 Kidney tumours: Diagnosis and staging II

Room Maillot Level 2

Poster Session 20

Chairs: B. Ljungberg, Umeå (SE)
J.J. Patard, Rennes (FR)

Study for 30 min. Interactive discussion for 60 min.

327 Association between tumour necrosis and usual prognostic parameters in renal cell carcinoma
N. Rioux-Leclercq, P. Fergelot, K. Bensalah, B. Lobel, F. Guille, A. Manunta, S. Vincendeau, J. Patard (Rennes, France)

328 Diagnostic and evolutive patterns of renal cell carcinoma in adults 40 years or less: Comparative study versus older patients

329 Histopathology of renal tumours of 4 cm or less: A Korean multi-institutional study

330 Renal cancer and kidney tuberculosis
E. Kulchavenya (Novosibirsk, Russia)

331 Renal tumours in young patients (20-40 years): Analysis of 120 tumours and comparison of presentation and outcome with older patients
S. Siemer, J. Lehmann, F. Becker, B. Wullich, M. Stöckle (Homburg/Saar, Germany)

332 Long-term outcome of patients with papillary renal cell carcinoma
F.H. Hartmann, U. Ramp, F.R. Moltzahn, I. Wolff, R. Ackermann, M. Grimm (Düsseldorf, Germany)

333 Risk classification of renal cell carcinoma – NARA Oncology Research Group Experience
M. Tanaka, K. Fujimoto, H. Kondo, Y. Chihara, N. Tanaka, M. Tanaka, Y. Hirao (Kashihiara, Japan)

334 Hsp27 expression in primary and metastatic renal cell carcinoma
R. Zigeuner, N. Droschl, V. Tauber, P. Rehak, C. Langner (Graz, Austria)

335 Renal cell carcinoma in the Netherlands: Difference in stage presentation in the last decade
I. Kümmerlin, F. Ten Kate, H. Wijkstra, J. De La Rosette, P. Laguna (Amsterdam, The Netherlands)

336 Retrospective prognostic value of nodal and distant metastases in renal cell carcinoma
| 337  | Survival and prognostic classification of patients with metastatic kidney cancer of bone  
     | Y. Toyoda, N. Shinohara, T. Harabayashi, T. Abe, T. Akino, A. Sazawa, K. Nonomura (Sapporo, Japan) |
| 338  | External validation of the Mayo Clinic sign score to predict cancer-specific survival using a European series of conventional renal cell carcinoma  
     | V. Ficarra, C. Lohse, G. Novara, A. Galfano, S. Cavalleri, G. Martignoni, W. Artibani (Verona, Italy; Rochester, United States of America) |
| 339  | Renal tumours between 3 and 4cm show significantly more aggressive parameters than tumours equal or less than 3cm. An analysis of 287 renal tumours ≤4cm  
| 340  | Analysis of clinical-pathological features and survival for patients under the age of 40 with renal cortical tumours  
     | M. Ordonez, M. Snyder, A. Iasonos, F. Secin, P. Russo, B. Guillonneau, K. Touijer (New York, United States of America) |
| 341  | Congenital renal arteriovenous malformation: Diagnostic clues and methods  
     | D.G. Lee, J.S. Huh, S.H. Jeon, S.J. Lee (Seoul, Cheju, South Korea) |
Thursday, 6 April - EAU Programme

Abstract Session

12:15 - 13:45 Endourology for stones

Room 242 Level 2

Poster Session 21

Chairs: F. Keeley, Bristol (GB)  
J-G. Valdivia Uria, Zaragoza (ES)

Study for 30 min. Interactive discussion for 60 min.

342 Predictors of pain during outpatient flexible cystoscopy  
S.S. Kommu, R.S. Surange, M. Gupta, S.D. Chowdhury, N.K. Sharma (London, Oldham, United Kingdom)

343 A prospective audit of flexible ureterorenoscopy and holmium laser lithotripsy for the treatment of intrarenal calculi  
J. Henderson, L. Ajayi, K. Thomas, P. Dasgupta, R. Tiptaft, J. Glass (London, United Kingdom)

344 Ureteroscopic retrieval of migrated stents under local anaesthesia  
K. Livadas, A. Skolarikos, I. Varkarakis, D. Chalikopoulos, E. Karagiotis, G. Alivizatos, A. Bisas (Athens, Greece)

345 Flexible ureteroscopy in the treatment of renal stones  
L.G. Luciani, G. De Giorgi, M. Zanin, F. Zattoni (Trento, Udine, Italy)

346 Influence of stone retrieval devices on deflection-ability of double bending flexible ureteroscopes  
V. Zimmermanns, P. Liske, S. Lahme (Pforzheim, Germany)

347 Pig kidney: Anatomical relationships between the renal venous arrangement and the kidney collecting system – applied study for urological research and surgical training  
L. Favorito, H. Bageti Filho, M.A. Pereira-Sampaio, F. Sampaio (Rio de Janeiro, Brazil)

348 Ex vivo training model for percutaneous renal surgery  
W.L. Strohmaier, A. Giese (Coburg, Germany)

349 Percutaneous nephrolithotripsy (PCNL) in supine position: Our experience  
A. Frattini, P. Salsi, S. Ferretti, M. Ciuffreda, P. Cortellini (Parma, Italy)

350 Percutaneous nephrolithotomy in the supine position  

351 Miniperc? No, thank you  
G. Giusti, M. Seveso, G. Taverna, A. Piccinelli, A. Benetti, L. Pasini, P. Grazioti (Milan, Italy)

352 Detection of residual stones after percutaneous nephrolithotomy: Role of non-enhanced spiral computed tomography  
Y. Osman, N. El-tabey, H. Refai, A. Elnahas, A. Shoma, I. Eraky, M. Kenawy, H. El-Kapany (Mansoura, Egypt)

353 Is percutaneous nephrolithotomy a safe and effective procedure for treatment of renal stones in children?  
F. Dal Moro, A. Capizzi, W. Rigamonti, M. Cosentino, A. Cisternino, T. Prayer Galetti, W. Artibani (Padua, Italy)
354 Intraoperative complications in PCNL. Observations of a teaching centre after more than 1800 procedures
F. Miclea, M. Botoca, P. Boiborean, V. Bucuras, I. Herman, A. Cumpanas, D. Tigaran (Timisoara, Romania)

355 The effect of previous ipsilateral open stone surgery on percutaneous nephrolithotomy
T. Erdogru, A. Danisman, A. Sanli, O. Kutlu, M. Ucar, M. Baykara (Antalya, Turkey)

356 Management of residual renal stone fragments after percutaneous nephrolithotomy: About 63 patients
S. Sallami, M. Cheliff, I. Bensalah, G. Hafsia, S. Ben Rhourma, Y. Nouira, A. Horchani (Tunis, Tunisia)
Thursday, 6 April - EAU Programme

Abstract Session

12:15 - 13:45 Urothelial tumours: Basic research III

Room 251 Level 2

Poster Session 22

Chairs: O.W. Hakenberg, Dresden (DE)
L.N. Türkeri, Istanbul (TR)

Study for 30 min. Interactive discussion for 60 min.

357 Inhibitory effect of vitamin E on cigarette smoke induced oxidative damage to transitional cell epithelium in a rat model
F.F. Önol, Y. Temiz, M. Yüksel, F. Eren, L. Türkeri (Istanbul, Turkey)

358 Tissue inhibitor of metalloproteinase-2 (TIMP-2) expression assessed by real time RT-PCR assay in peripher al blood is a marker of metastatic disease in bladder cancer
C. Pascual-Mateo, A. Ferruelo, M. Lujan, J.M. Garcia, A. Berenguer, J.C. Angulo (Getafe, Spain)

359 Triptolide (PG490)-mediated sensitisation of urothelial cancer cells to cisplatin induced apoptosis
Y. Matsui, J. Watanabe, H. Nishiyama, H. Kawanishi, M. Ito, T. Takahashi, T. Kamoto, O. Ogawa (Kyoto, Japan)

360 Cigarette smoking, professional exposition, Ki–67, p53, mitotic index and bladder cancer prognosis: A case- control clinical study
G. Casetta, A. Zitella, A. Greco, A. Tizzani (Torino, Italy)

361 Peptabody-EGF: A novel apoptosis inducer targeting ErbB1 receptor overexpressing cancer cells

362 Initial experience with evaluation of bladder tumour growth in the nude rat using a newly developed mini-endoscope: A new orthotopic transitional cell cancer model
C. Bolenz, Y. Cao, M. Wenzel, M. Fernandez, L. Trojan, P. Alken, M.S. Michel (Mannheim, Germany)

363 In vitro study of epirubicin and ciprofloxacin induced apoptosis in human urothelial cancer cell lines
D. Engeler, E. Scandella, H. Schmid, B. Ludewig (St. Gallen, Switzerland)

364 Microsatellite instability and mutation analysis of candidate genes in urothelial cell
P. Mongiat Artus, C. Miquel, M. Van Der Aa, O. Buhard, R. Hamelin, H. Soliman, C. Bangma, A. Janin, P. Teillac, T. Van Der Kwast, F. Praz (Paris, Villejuif, France; Rotterdam, The Netherlands)

365 Microsatellite instability as predictor of survival in patients with invasive upper urinary tract transitional cell carcinoma
M. Rouprêt, G. Fromont, G. Cancel-Tassin, A. Azzouzi, J.W. Catto, F.C. Hamdy, G. Vallancien, F. Richard, O. Cussenot (Paris, Angers, France; Sheffield, United Kingdom)

366 Urinary survivin is a biomarker for the diagnosis of invasive bladder cancer
367 DNA methylation alterations in bladder cancer
A. Neuhausen, A.R. Florl, M. Grimm, W.A. Schulz (Düsseldorf, Germany)

368 Genetic profiling of urothelial carcinomas of the upper urinary tract
K. Junker, B. Jentsch, R. Stöhr, M. Burger, A. Hartmann, J. Schubert (Jena, Regensburg, Germany)

369 Single-nucleotide polymorphism of ninjurin gene is associated with higher risk for human bladder cancer progression
A. Sarkis, L. Ribeiro-filho, P.E. Guimaraes, J. Pontes Junior, I. Amorin Da Silva, V. Sa, H. Shiina, R. Dahiya, M. Srougi (Sao Paulo, Brazil; San Francisco, United States of America)

370 20q13 gain is associated with chromosomal instability in transitional cell carcinomas of the upper urinary tract
J. Akao, H. Matsuyama, Y. Yamamoto, K. Nagao, C. Ohmi, S. Sakano, K. Naito (Ube, Japan)

371 Application of Paclitaxel-Eluting metal mesh stents within the pig ureter: An experimental study
Thursday, 6 April - EAU Programme

Abstract Session

12:15 - 13:45 Non-neurogenic voiding dysfunction: Overactive bladder

Room 252 Level 2

Poster Session 23

Chairs: J. Heesakkers, Nijmegen (NL)
P. Radziszewski, Warsaw (PL)

Study for 30 min. Interactive discussion for 60 min.

372 Prevalence of overactive bladder syndrome: European results from the EPIC study
(Chapel Hill, New York, United States of America; Goteborg, Sweden; Bergen, Norway; Toronto, Canada; London, Bristol, United Kingdom; Mainz, Germany; Padova, Italy)

373 Prevalence of incontinence and overactive bladder: European results from the EPIC study
(New York, Chapel Hill, United States of America; Goteborg, Sweden; Bergen, Norway; Toronto, Canada; London, Bristol, United Kingdom; Mainz, Germany; Padova, Italy)

374 Epidemiological study of risk factors for urinary incontinence and overactive bladder in a primary care population
J.M. Mendive, S. Armengol (Barcelona, Spain)

375 Tolterodine extended release (TER) for overactive bladder (OAB): Improvement in objective symptoms is correlated with reductions in symptom bother and improvement in health-related quality of life
M. Brodsky, D.B. Glasser, K.S. Coyne, Z. Jumadilova, M. Carlsson (New York, Bethesda, United States of America)

376 Symptom-specific efficacy of tolterodine extended release in primary care patients with overactive bladder

377 Differential effects of the antimuscarinic agents darifenacin and extended-release oxybutynin on recent memory in older subjects
G. Kay, T. Crook, L. Rekeda, R. Lima (Washington, Fort Lauderdale, East Hanover, United States of America)

378 Long-term treatment of overactive bladder with darifenacin in older patients: Analysis of responder rates in a 2-year, open-label extension study
F. Haab, S. Hill, K. Lheritier, F.T. Kawakami, M. Gittelman (Paris, France; Blackburn, United Kingdom; Basel, Switzerland; Aventura, United States of America)

379 Fesoterodine in non-neurogenic voiding dysfunction - results on efficacy and safety in a phase 3 trial
C. Chapple, P. Van Kerrebroeck, A. Tubaro, R. Millard (Sheffield, United Kingdom; Maastricht, The Netherlands; Rome, Italy; Randwick, Australia)

380 The STAR study: Analysis of symptom severity and treatment response in overactive bladder
C. Chapple, R. Fiala, L. Gorilovsky, I. Mincik, S. Pasechnikov, D. Pushkar, M. Wright, J. Bolodeouk (Sheffield, Staines, United Kingdom; Olomouc, Czech Republic; Moscow, Russia; Presov, Slovakia; Kyiv, Ukraine)
Botulinum toxin-A is safe and effective in the treatment of patients with overactive bladder and idiopathic detrusor overactivity: Results from a randomised, double blind, placebo controlled trial
A. Sahai, S. Khan, P. Dasgupta (London, United Kingdom)

Experience including long-term results of 150 cases treated with Botulinum-A toxin injections into the detrusor muscle for overactive bladder refractory to anticholinergics
D.M. Schmid, P. Sauermann, M. Werner, D. Perucchini, R. Strebel, M. Muntener, N. Blick, P. Jaeger, D. Hauri, B. Schurch (Zurich, Switzerland)

Botulinum A toxin intravesical injections in the treatment of painful bladder syndrome: A pilot study
A. Giannantoni, E. Costantini, S.M. Di Stasi, M.C. Tascini, F. Santaniello, M. Del Zingaro, M. Porena (Perugia, Rome, Italy)

Botulinum toxin B is not an effective treatment of the refractory overactive bladder
H. Graham, A. Watkins, K. Wareham, S. Emery, D. Jones, M. Lucas (Swansea, Llantrisant, United Kingdom)

Surgical reinterventions following InterStim® sacral nerve modulation implant – 11 years experience
J. Gajewski (Halifax, Canada)

Nocturia and overactive bladder: Do they have similar aetiology?
K.A. Tikkinen, T. Tammela, A. Auvinen (Tampere, Finland)
Thursday, 6 April - EAU Programme

Abstract Session

12:15 - 13:45 BPH: Basic research

Room Havana Level 3

Poster Session 24
Chairs: F.K. Habib, Edinburgh (GB)
T. Prayer-Galetti, Padua (IT)

Study for 30 min. Interactive discussion for 60 min.

387 Benign prostatic hyperplasia may be an epigenetic disease
T.H. Kim, W.C. Moon, M.R. Oh, T.H. Uhm, C.H. Noh (Seoul, South Korea)

388 Prostate hypertrophy induced by testosterone: Effect of oxybutynin in an experimental model of overactive bladder in conscious rats

389 Benign prostatic hyperplasia specimens derived from patients after urinary retention show significantly more prostate glands with upregulation of HLA-DR and loss of CD38 than those derived from patients without urinary retention
G. Kramer, M. Dieter, K. Hrachowitz, C. Seitz, M. Marberger (Vienna, Austria)

390 Are muscarinic receptors of the prostate having significant role in the pathophysiology of bladder outlet obstruction? Phase 1 (in vitro-) study
M. Abdel-Khalek, A. Nabieh, E. Ibrahim (Mansoura, Egypt)

391 Expression of proinflammatory interleukin-17B,-C,-E and their receptors in prostatic tissue
K. Hrachowitz, G. Kramer, G. Steiner, M. Marberger (Vienna, Austria)

392 Changes of calcium-activated potassium channel expressions in rat bladder and ureter after relieving partial bladder outlet obstruction
D. Kim, E.K. Yang, J.W. Kim (Daegu, South Korea)

393 Insulin, estrogen and lean body mass – three risk factors for the development of benign prostatic hyperplasia

394 Morphometric analysis of the prostate demonstrates the importance of the loco-regional morphology to the mechanical characteristics of the gland
S. Leung, S. Phipps, J. Yang, R. Rueben, F. Habib, A. McNeill (Edinburgh, United Kingdom)

395 The effects of the ATP - sensitive potassium channel opener, cromakalim, on the contractile activity of human and pig prostates
H. Akino, C.R. Chapple, R. Chess-Williams (Sheffield, United Kingdom)

396 Alfuzosin reverses bladder hypertrophy induced by bladder outlet obstruction in rats
P. Lluel, M. Méen, S. Palea (Toulouse, France)
397 Nitric oxide donors reverse the tension induced by endothelin-1 of isolated human prostate tissue and stimulate the production of cyclic GMP
G. Kedia, M. Truss, T. Chigogidze, L. Managadze, U. Jonas, S. Öckert (Hanover, Dortmund, Germany; Tbilisi, Georgia)

398 The expression pattern of TNF receptors family on the prostate epithelial from BPH patients after the γ-1 antagonist treatment. An in vitro assay
T. Drewa, Z. Wolski, B. Misterek, R. Debski, Z. Skok (Bydgoszcz, Poland)

399 Effects of nitric oxide synthases on overactive bladder after relief of bladder outlet obstruction in rats
H. Kim, M. Choo, J.C. Kim, S.M. So (Daejeon, Seoul, South Korea)

400 Analysis of extracellular matrix in prostatic urethra of patients with benign prostatic hyperplasia
F. Sampaio, M. Babinski, M. Chagas, F. Carrerete, W. Costa (Rio de Janeiro, Brazil)

401 BPH: Histological aspects of adenoma mononuclear cell infiltration
F. Manzarbeitia, R. Vela Navarrete, J.L. Sarasa, J.V. García Cardoso, C. González Enguita (Madrid, Spain)
Thursday, 6 April - EAU Programme

Abstract Session

12:15 - 13:45 Control of prostate cancer cell growth

Room Concorde 1 Level 4

Poster Session 25

Chairs: A. Meye, Dresden (DE)  
R.W.G. Watson, Dublin (IE)

Study for 30 min. Interactive discussion for 60 min.

402 Mutations of epidermal growth factor receptor in hormone sensitive and refractory prostate cancers  
Y.D. Choi, N.H. Cho, K. Park, J.S. Lee (Seoul, South Korea)

403 Role of promyelocytic leukaemia zinc finger (PLZF) and pre-B-cell leukaemia transcription factor (PBX1) in androgen-independent prostate cancer cell growth  
T. Kikugawa, S. Higashiyama, N. Tanji, M. Yokoyama (Toon, Japan)

404 Abnormal ERK5 expression is associated with metastatic, androgen-independent human prostate cancer and stimulates proliferation, migration and MMP-1, -2 and -9 expression  
S. McCracken, M. Mathers, J. Edwards, C. Robson, P. Cohen, H. Leung (Newcastle upon Tyne, Glasgow, Dundee, United Kingdom)

405 Rheb, a novel small G-protein of Ras superfamily, is associated with proliferation in human prostate cancer cell lines  

406 Differential regulation of the A-type cyclins in response to interleukin-6 treatment is mediated by PI3k-Akt and map kinase pathways in LnCaP prostate cancer cell line  
B. Wegiel, J. Persson, Z. Culig, A. Bjartell (Malmö, Sweden; Innsbruck, Austria)

407 Sp1 and Sp3 transcription factors upregulate the proximal promoter of the human prostate-specific antigen gene in prostate cancer cells  

408 Osteoprotegerin derived from tumour cells or from bone marrow cell types differs in its activity as a survival factor for prostate cancer  
N. Cross, E. Waterman, N. Jokonya, I. H Olsen, F. Hamdy, C. Eaton (Sheffield, United Kingdom)

409 Functional analyzes of C13orf19 in prostate cell lines  

410 Grade-specific characterization of VEGF and Cox-2 expression in benign prostatic hyperplasia and prostate cancer: Switch of angiogenic factor expression in high-grade carcinomas  
K. Gyftopoulos, K. Vourda, E. Papadaki, P. Perimenis, G. Sakellaropoulos, I. Varakis (Patras, Greece)

411 Extracellular matrix dermatopontin modulates prostate cell growth in vivo  
T. Takeuchi, M. Suzuki, J. Kumagai, M. Sakai, T. Kitamura (Tokyo, Japan)
Hormone treatment alters expression of RNaseL and oligoadenlyate synthetases in hormone sensitive prostate cell lines
J. Kamradt, H. Cunliffe, B. Wullich, M. Stöckle, P. Meltzer (Homburg/Saar, Germany; Bethesda, United States of America)

Androgen regulated human homeobox gene OTEX is expressed in androgen dependent LNCaP cells and down-regulated in the pure androgen independent prostate cancer
K.C. Chen, C. Peng, H. Hsieh-Li (Taipei, Taiwan)

Characterization for the molecular signalling pathway through with androgen deprivation upregulated Akt phosphorylation in LNCaP prostate cancer cells
R. Buttyan, X. Yang, D. Bemis, M. Benson, F. Vacherot, S. Terry, A. De La Taille (New York, United States of America; Creteil, France)

Human prostate fibroblasts of different zonal origin induce LNCaP cell proliferation, androgen-independence and bone metastasis
G.N. Thalmann, H. Rhee, R. Sikes, S. Pathak, H. Zhau, U.E. Studer, L. Chung (Berne, Switzerland; Atlanta, Delaware, Houston, United States of America)

Drug-specific modulation of 11C-cholin uptake in human prostate cancer cell lines
Thursday, 6 April - EAU Programme

Abstract Session

Localised prostate cancer: Surgical results

**Poster Session 26**

*Chairs:  F. Recker, Aarau (CH)*  
*P. Wiklund, Stockholm (SE)*

**Study for 30 min. Interactive discussion for 60 min.**

**417**  
Intra-cavernosal saline infusion decreases intraoperative blood loss during radical retropubic prostatectomy by using the gate structure of the Santorini plexus

*K. Stav, F. Zacci, M. Bahar, A. Lindner, A. Zisman (Zeriffin, Israel)*

**418**  
Significance of variation in the shapes of prostatic apex and dorsal vein complex observed on preoperative magnetic resonance imaging (MRI) in performing radical retropubic prostatectomy (RRP)


**419**  
Long term survival after prostatectomy

*M. Colombel, M. Xavier, M.L. Florence, M. Jean Marie (Lyon, France)*

**420**  
Radical prostatectomy in Austria: A nation-wide analysis of 16,524 cases

*S. Madersbacher, M. Willinger, M. Rauchenwald (Vienna, Austria)*

**421**  
Influence of the extent of positive margins on biochemical recurrence after radical prostatectomy

*C. Llorente, J.M. De La Morena, D. Martin, C. Capitan, P. Dominguez, M. Alvarez, M. Sanchez (Madrid, Spain)*

**422**  
Prognostic factors of recurrence following radical prostatectomy for clinically localised prostate cancer. Evaluation of the prostate glandular non-malignant margins

*C. Allepuz, A. Borque, M. Allue, J. Alfaro, M.J. Gil, P. Gil, A. Servera, C. Rioja, L. Rioja (Zaragoza, Spain)*

**423**  
The effect of surgical volume on failure free survival after radical prostatectomy in the province of Quebec

*E. Antebi, S. Benayoun, A. Ramirez, P. Perrotte, M. Mccormack, F. Benard, L. Valiquette, F. Saad, P.I. Karakiewicz (Montreal, Canada)*

**424**  
Ratio of urine loss (UL) to micturation volume (MV) on the first day after catheter removal predicts recover of

*D. Teber, M. Ates, A.S. Gozeen, M. Hruza, J. Rassweiler (Heilbronn, Germany)*

**425**  
Outcome after radical prostatectomy in young men with or without a family history of prostate cancer

*M. Roupret, G. Fromont, M. Bitter, G. Gattegno, F. Richard, G. Vallancien, O. Cussenot (Paris, France)*

**426**  
European study on radical prostatectomy (ESRPE)-part I: Surgical and oncological results and changes 1993-2004

*B. Djavan, B. Rocco, V. Ravery, P. Hammerer, A. Zlotta, M. Brausi, A. Kaisary, I. Romics, T. Anagnostou, P. Dobronski, M. Marberger (Vienna, Austria; Milan, Italy; Paris, France; Braunschweig, Germany; Brussels, Belgium; London, United Kingdom; Budapest, Hungary; Athens, Greece; Warsaw, Poland)*

**427**  
European study on radical prostatectomy (ESRPE)-part II: Functional results and changes 1993-2004

*B. Djavan, B. Rocco, V. Ravery, P. Hammerer, A. Zlotta, M. Brausi, A. Kaisary, I. Romics, T. Anagnostou,*
Anterograde radical retropubic prostatectomy for cure clinically localised prostate cancer: Oncological outcome in a 17-year series

L. Masieri, S. Serni, A. Lapini, A. Minervini, G. Nesi, M. Carloni, G. Vignolini, M. Carini (Florence, Italy)

Does surgical manipulation of tumour accelerate cancer dissemination: A prospective longitudinal study of radical prostatectomised cancer patients


The use of a morbidity score after radical prostatectomy

M. Hruza, M. Schulze, S. Subotic, C. Stock, D. Teber, J.J. Rassweiler (Heilbronn, Germany)

Prevalence and prognostic significance of a tertiary Gleason pattern in radical prostatectomy specimens among a consecutive cohort of 3147 prostate cancer patients

Thursday, 6 April - EAU Programme

Abstract Session

Non surgical treatment of prostate cancer: Contemporary issues

Room Concorde 3 Level 4

Poster Session 27

Chairs: D. Dearnaley, Sutton (GB) V. Ravery, Paris (FR)

Study for 30 min. Interactive discussion for 60 min.

432 Immediate external beam radiation therapy (EBRT) after radical prostatectomy (RP): Long-term influence on QoL, urinary and rectal symptoms
B. Tombal, B. Debie, A. Feyaerts, R. Opsomer, F.X. Wese, P. Scaillet, P. Van Cangh (Brussels, Belgium)

433 A clinical evaluation of the optical characteristics of the prostate in men with prostate cancer
C. Moore, C.A. Mosse, I. Hoh, H. Payne, C. Allen, S.G. Bown, M. Emberton (London, United Kingdom)

434 Vascular-targeted photodynamic therapy in organ confined prostate cancer – report of a novel photosensitiser
C. Moore, I. Hoh, C.A. Mosse, C. Allen, A. Freeman, S.G. Bown, M. Emberton (London, United Kingdom)

435 Match pair analysis HDR brachytherapy vs. thermoradiotherapy using interstitial thermoseeds
S. Deger, T. Schink, D. Böhmer, K. Taymoorian, J. Roigas, V. Budach, S. Loening (Berlin, Germany)

436 Thermotherapy using magnetic nanoparticles in patients with locally recurrent prostate cancer: Initial results of a phase I study

437 Feasibility of cyberknife for the treatment of localised prostate cancer: Preliminary results
K. Park, K.H. Kim, M.K. Jo, C. Lee, C.G. Cho (Seoul, South Korea)

438 High intensity focussed ultrasound treatment for prostate cancer: Is the internet a good source of patient information?
S. Patel, S. Kommu, M. Hotston, R. Persad (Bristol, United Kingdom)

439 10 years high intensity focused ultrasound (HIFU) as local treatment of prostate cancer: Profile of side effects
S. Thueroff, K. Knauer, C. Chaussy (Munich, Germany)

440 Salvage therapy using high intensity focused ultrasound for local recurrence of prostate cancer after radiation therapy
S. Mallick, A. Dufour, Y. Fouques, H. Bensadoun (Caen, France)

441 Prostate cancer control with transrectal HIFU in 124 patients: Seven-years actuarial results
A. Gelet, J. Chapelon, F. Murat, L. Curiel, R. Bouvier, O. Rouviere, X. Martin (Lyon, France)

442 10 years application of high intensity focused ultrasound (HIFU) in prostate cancer (PCa)
C. Chaussy, S. Thueroff, K. Knauer (Munich, Germany)
Salvage HIFU for radiorecurrent prostate cancer: Factors influencing the outcome
F. Murat, J. Chapelon, L. Poissonnier, R. Bouvier, L. Curie, X. Martin, A. Gelet (Lyon, France)

High intensity focused ultrasound (HIFU) in prostate cancer
V. Zizzi, A. Callea, R. Piccinni, A. Cafarelli, D. Sblendorio, B. Berardi, A. Tempesta, F. Gala, A. Traficante (Bari, Italy)

Prostate cryosurgery: Not all the freezing probes are the same
S. Ahmed, J. Davies (Guildford, United Kingdom)

Cryoaulation of prostate cancer using 17 gauge cryoneedles technology 4 year European experience
U. Witzsch, W. Dillenburg, V. Poulakis, E. Becht (Frankfurt, Germany)
Thursday, 6 April - EAU Programme

Abstract Session

14:00 - 15:30 Open versus laparoscopic radical prostatectomy, the debate?

Video Session 4

Chairs: M.C. Truss, Dortmund (DE)
       M. Zerbib, Paris (FR)

All presentations are 14 minutes in length

V19 Urachal-sparing laparoscopic radical prostatectomy
    F. Secin, F. Bianco, N. Karanikolas, K. Touijer, B. Guillonneau (New York, United States of America)

V20 Open retropubic nerve-sparing radical prostatectomy – how I do it
    U.E. Studer, F.C. Burkhard, G.N. Thalmann (Berne, Switzerland)

V21 Selective dissection of the apex during radical prostatectomy allows better tumour control and continence
    J. Walz, M. Graefen, A. Haese, H. Heinzer, H. Huland (Hamburg, Germany)

V22 Nerve-sparing radical prostatectomy - the surgeons view through the Varioscope® M5
    R. Goetschl, N. Schmeller (Salzburg, Austria)

V23 The radical perineal prostatectomy with simultaneous extended pelvic lymphadenectomy via the same incision
    J. Beier, H. Keller (Hof, Germany)

V24 Laparoscopic radical prostatectomy. Differences between the inter-fascial and intra-fascial technique
    L. Martínez-Piñeiro, J.R. Cansino, C. Sanchez, A. Taberner, J. Cisneros, J. De La Peña (Madrid, Spain)
Abstract Session

14:00 - 15:30 Kidney tumours: Laparoscopic treatment

Room Blue Level 2

Oral Session 6

Chairs: M. Jewett, Toronto (CA)  
V. Pansadoro, Rome (IT)

All presentations are 7 minutes in length, followed by 2 minutes of discussion

Overview presentation
V. Pansadoro, Rome (IT)

447 Morbidity and clinical outcome of nephron sparing surgery in relation to tumour size and indication  

448 A cost analysis of laparoscopic versus open radical nephrectomy in the management of solid renal tumours – the experience of a tertiary United Kingdom referral centre  

449 Effect of obesity on the result of laparoscopic nephrectomy  
T.H. Oh, D.S. Ryu, J.C. Woo, C.H. Chong (Masan, Busan, South Korea)

450 Laparoscopic transperitoneal nephrectomy using a remote-controlled robotic surgical system (Da Vinci®). 40 cases  
J. Hubert, F. Leclers, F. Kotaiche, B. Feuillu, E. Mourey, L. Cormier, R. Kipper (Nancy, France)

451 Can warm ischaemia of more than 30 minutes, during laparoscopic nephron sparing surgery, cause damage of renal parenchyma: Prospective study and preliminary results  
F. Porpiglia, F. Musso, C. Terrone, J. Renard, S. Grande, M. Poggio, R.M. Scarpa (Orbassano, Italy)

452 Photodynamic detection as a new tool to assess resection status in laparoscopic nephron-sparing surgery for renal cell carcinoma  
C. Kuemmel, K. Fehst, H. Gerullis, G. Popken (Berlin, Germany)

453 Laparoscopic partial nephrectomy, single centre experience with 80 cases – outcomes and lessons learned  
A. Nadu, N. Kitrey, M. Laufer, E. Friedman, J. Ramon (Ramat Gan, Israel)

454 Laparoscopic partial nephrectomy: A multi-institutional Italian survey  
A. Celia, G. Guazzoni, V. Pansadoro, V. Disanto, F. Porpiglia, C. Milani, G. Breda (Bassano del Grappa (VI), Milan, Rome, Acqua Viva Delle Fonti, Torino, Padua, Bassano del Grappa, Italy)

Summary

M. Jewett, Toronto (CA)
Abstract Session

**Bladder cancer: Diagnosis and staging I**

**Oral Session 7**

*Chairs: P. Graziotti, Rozzano (IT)  
J. Rubio Briones, Valencia (ES)*

All presentations are 7 minutes in length, followed by 2 minutes of discussion

**Overview presentation**

J. Rubio Briones, Valencia (ES)

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<th>Session</th>
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<td>455</td>
<td>Discrepancy between clinical and pathological stage: Impact on prognosis following radical cystectomy</td>
<td>S. Shariat, Palapattu, P. Karakiewicz, G. Gupta, C. Rogers, A. Vazina, P. Bastian, M. Schoenberg, S. Lerner, A. Sagalowsky, Y. Lotan (Dallas, Baltimore, Montreal, Houston, United States of America)</td>
<td>bord-6-0800</td>
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<td>456</td>
<td>Biological significance of squamous and glandular differentiation in urothelial cell carcinoma of the upper urinary tract</td>
<td>R. Zigeuner, G. Hutterer, T. Chromecki, P. Rehak, C. Langner (Graz, Austria)</td>
<td>bord-6-0830</td>
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<td>457</td>
<td>Tumour necrosis as prognostic indicator in urothelial carcinoma of the upper urinary tract</td>
<td>C. Langner, G. Hutterer, T. Chromecki, S. Leibl, P. Rehak, R. Zigeuner (Graz, Austria)</td>
<td>bord-6-0840</td>
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<td>458</td>
<td>Is the new two-tiered WHO/ISUP grading system superior to the traditional three-tiered grading system in predicting outcome of patients with upper urinary tract urothelial carcinoma?</td>
<td>C. Langner, G. Hutterer, T. Chromecki, P. Rehak, R. Zigeuner (Graz, Austria)</td>
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<td>459</td>
<td>Review pathology in a diagnostic bladder cancer trial: The impact of patient risk category</td>
<td>J.A. Witjes, P.M.J. Moonen, A.G. Van Der Heijden (Nijmegen, The Netherlands)</td>
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<td>460</td>
<td>Initial diagnosis of bladder cancer using a point-of-care assay</td>
<td>H. Barton Grossman, NMP22 Clinical Investigation Group (Houston, United States of America)</td>
<td>bord-6-0880</td>
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<td>461</td>
<td>Gene-expression profiles predict nodal metastasis and survival in patients undergoing radical cystectomy</td>
<td>F. Liedberg, S. Gudjonsson, M. Höglund, D. Lindgren, W. Månsson (Lund, Sweden)</td>
<td>bord-6-0890</td>
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<td>462</td>
<td>Comparison of urinary cytology and fluorescence-in-situ hybridisation assay (FISH) for the detection of urothelial bladder carcinoma</td>
<td>O. Hakenberg, U. Schmidt, N. Berdjis, A. Meye, F. Wawroschek, A. Baldauf, S. Zastrow, M. Wirth (Dresden, Germany)</td>
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**Summary**

P. Graziotti, Rozzano (IT)
Thursday, 6 April - EAU Programme

Abstract Session

14:00 - 15:30 Erectile dysfunction: Treatment

Room Ternes Level 1

Poster Session 28
Chairs: A. Martin-Morales, Malaga (ES)
E. Wespes, Charleroi (BE)

Study for 30 min. Interactive discussion for 60 min.

463 Safety and efficacy of avanafil, a new PDE5 inhibitor for treating erectile dysfunction
J. Kaufman, J. Dietrich (Aurora, Mountain View, United States of America)

464 Hemodynamic effects of co-administration of avanafil and glyceryl trinitrate
A. Nehra, D. Swearingen, J. Dietrich, C. Peterson (Rochester, Phoenix, Mountain View, United States of America)

465 Efficacy and safety of tadalafil 2.5 mg and 5 mg administered once a day in men with diabetes mellitus and erectile dysfunction
G. Brock, J. Buvat, M. Gambla, D. Hatzichristou, D. Lording, L. Rose, E. Rubio Aurioles, G. Spera, S.Y. Liang, L. Frumkin (London, Canada; Lille, France; Columbus, OH, Bothell, WA, United States of America; Thessaloniki, Greece; Malvern, Australia; Münster, Germany; Delagación Tlalpan, Mexico; Rome, Italy)

466 Treatment with sildenafil improves self-esteem in patients with erectile dysfunction. A double-blind, placebo controlled study using the SEAR (self-esteem and relationship) questionnaire
I. Moncada-Iribarren, J. Koskimaki, L. Rodriguez-Vela, S. Jimenez, J. Chaves (Madrid, Zaragoza, Spain; Tampere, Finland)

467 Erectile dysfunction drug (phosphodiesterase-5 inhibitors) associated with nonarteritic anterior ischemic optic neuropathy (NAION)
C. Calvet, K. Martin, H. Farghal, M. Molimard, N. Moore, P. Ballanger (Bordeaux, France)

468 Comparison of clinical efficacy and preference of three different PDE5 inhibitors for the patients with erectile dysfunction
Y. Changhee, S. Seoung Hun, H. Bumsik, T.Y. Ahn (Seoul, South Korea)

469 Timing of sexual intercourse in erectile dysfunction (ED) patients treated with the three available PDE5 inhibitors
F. Giuliani, E. Vicaut, Y. Jeanpetit, E. Lavallée (Garches, Paris, France)

470 Microvascular arterial bypass surgery: Assessment of long-term outcome
G.V. Fantini, C. Panzer, R. Munarriz, I. Goldstein (Milan, Italy; Boston, United States of America)

471 Results of a phase I hMaxi-K gene transfer trial for erectile dysfunction
A. Melman, N. Bar-Chama, A. Mccullough, K. Davies, G. Christ (Bronx, New York, Winston Salem, United States of America)

472 There is no significant difference between on-demand PDE5-I vs. PDE5-I as rehabilitative treatment in patients treated by bilateral nerve-sparing radical retropubic prostatectomy
F. Montorsi, A. Salonia, A. Gallina, G. Zanni, A. Saccà, F. Dehò, A. Briganti, M. Ghezzi, L. Barbieri, E. Farina,
Nightly low dose sildenafil improves recovery of erectile function after nerve-sparing radical prostatectomy
A. Bannowsky, S. Hautmann, B. Wefer, H. Schulze, C. Van Der Horst, C. Seif, P.M. Braun, K-P. Jünemann (Kiel, Germany)

Severe dropout rate from the treatment for erectile dysfunction in non-counseled patients who underwent bilateral nerve sparing radical retropubic prostatectomy
A. Salonia, A. Gallina, G. Zanni, A. Saccà, S.J. Schuit, L. Barbieri, A. Briganti, E. Farina, P. Rigatti, F. Montorsi (Milan, Milan, Italy; Rotterdam, The Netherlands)

Age difference between patient and partner is a predictive factor of potency rate following radical prostatectomy
A. Descazeaud, M. Peyromaure, B. Debre, T. Flam (Paris, France)

The real-life safety and efficacy of vardenafil (REALISE): Subgroup analysis of patients with radical prostatectomy
H. Van Ahlen, J. Zumbé, K. Stauch, H. Landen (Osnabrück, Leverkusen, Germany)

Sexual rehabilitation after radical retropubic prostatectomy: A randomised prospective study on vacuum device + sildenafil vs. alprostadil + sildenafil
A. Zucchi, L. Mearini, E. Costantini, A. Giannatoni, F. Fioretta, M. Porena (Perugia, Italy)
Thursday, 6 April - EAU Programme

Abstract Session

**Infections of the genito-urinary tract**

**Room Maillot Level 2**

**14:00 - 15:30 Infections of the genito-urinary tract**

**Poster Session 29**

*Chairs:* T.E. Bjerklund Johansen, Porsgrunn (NO)  
T. Hanus, Prague (CZ)

Study for 30 min. Interactive discussion for 60 min.

478 Multicentre study on diagnosis of sexually transmitted disease by using oligonucleotide microarray (STD DNA chip)  

479 Protective effects of hyaluronic acid in rats with cyclophosphamide induced cystitis  
S. Lee, J.W. Yi, J. Huh, S.H. Jeon, J.I. Kim (Seoul, Jeju, South Korea)

480 Assessment of immunological response to chlamydia infection in male infertility  
G. Pinggera, G. Walder, K. Tosun, J. Beklic, P. Rehder, R. Herwig, M. Mitterberger, H. Strasser, G. Bartsch (Innsbruck, Austria)

481 MRI in colo-vesical fistula  
S. Ravichandran, S. Matanhelia, M. Dobson (Preston, United Kingdom)

482 Relationship between ciprofloxacin-resistant E. coli and complicated urinary tract infection  
K. Ohjung, L. Changug, S. Bongmo (Seoul, South Korea)

483 E. Coli resistance in community and hospital acquired urinary tract infections  

484 Microbiologic colonization of ileal neobladders  
C. Braun, G. Bartsch, R. Marre, R. Hautmann, B. Volkmer (Ulm, Germany)

485 Long-term effects of antibiotic-coated Foley catheter on bacterial bio film formations and the analysis of auto inducer gene expression related quorum sensing mechanism  

486 Heparin coating as a preventive strategy to control catheter-associated urinary tract infections  
P. Tenke, B. Kovács (Budapest, Hungary)

487 A randomised double-blinded placebo controlled cross over trial assessing the effect of cranberry juice intake on mucus production and symptomatic urinary tract infections in patients transposed intestinal segments into the urinary bladder  
G. Nabi, B. Somani, T. Hasan, J. Norrie, J. N’dow (Aberdeen, Newcastle, United Kingdom)

488 Trimethoprim-sulfamethoxazol – first-line treatment for urinary tract infection by methicillin-resistant staphylococcus aureus?  
A. Strauß, S. Seseke, T. Seiler, F. Seseke, R. Ringert (Göttingen, Germany)
Plasma concentrations, urinary excretion and bactericidal activity of Ciprofloxacin XR (1,000mg) versus Levofloxacin (500mg) in healthy volunteers receiving a single oral dose
F. Wagenlehner, M. Kinzig-schippers, U. Tischmeyer, C. Wagenlehner, F. Sörgel, W. Weidner, K.G. Naber (Straubing, Nürnberg-Heroldsberg, Giessen, Germany)

Outcome of nephrectomy and kidney-preserving procedures for the treatment of emphysematous pyelonephritis
B.S. Park, J.S. Huh, S.H. Jeon, S.J. Lee, J.I. Kim, S.G. Chang (Seoul, Jeju, South Korea)

Urinary tract infection and risk factors after urodynamic studies in female stress urinary incontinence
J.H. Choe, J.W. Kim, W.T. Kim, J.S. Lee, J.T. Seo (Seoul, South Korea)

The prevalence of TB in 82 hematospermic patients
S.A. Mahmoudi (Esfahan, Iran)
Thursday, 6 April - EAU Programme

Abstract Session

14:00 - 15:30 Refinements on PCNL

Room 242 Level 2

Poster Session 30
Chairs: M. Grabe, Malmö (SE)
X. Martin, Lyon (FR)

Study for 30 min. Interactive discussion for 60 min.

493 A prospective randomised trial comparing 16-slice three-dimensional computed tomographic urography vs intravenous urogram for planning percutaneous renal stone surgery

494 Predictors of perioperative course and clinical outcome in patients undergoing PCNL for extensive stone disease. Results from 3 centres in Germany and Malaysia
P. Olbert, W.S. Leong, M.L. Liong, A. Hegele, A.J. Schrader, R. Hofmann (Marburg, Germany; Penang, Malaysia)

495 Colonic perforation during percutaneous nephrolithotomy: Study of risk factors
A. El-Nahas, A. Shokeir, A. El-Assmy, A. Shoma, I. Eraky, M. El-Kenawy, H. El-Kappany (Mansora, Egypt)

496 The impact of commonly encountered medical disorders on the outcome and complication rates of percutaneous nephrolithotomy
A. Muslimanoglu, A. Tefekli, F. Altunrende, M. Akcay, M. Baykal, Y. Berberoglu (Istanbul, Turkey)

497 Routine placement of a nephrostomy tube after percutaneous nephrolithotomy is unnecessary
Z. Zaman, S. Kommu, N. Watkin, C. Jones, P. Boyd, E. North (North Cheam, United Kingdom)

498 Planning percutaneous renal stone surgery: Differences between 16-slice three-dimensional computed tomographic urography and intravenous urography

499 Percutaneous suprapubic cyst lithotripsy under local anesthesia
E. Aravantinos, V. Tzortzis, A. Karatzas, I. Mitsogiannis, G. Moutzouris, M. Melekos (Larissa, Greece)

500 The learning curve in PCNL. Do individual skills prevail over experience?
M.R. Botoca, P. Boiborean, V. Bucuras, I. Herman, R. Minciu, D. Claici, G. Pupca, A. Cumpanas, M. Burdan, E. Ghita, F. Miclea (Timisoara, Romania)

501 Management of pelvic stones larger than 20 mm: Laparoscopic transperitoneal pyelolithotomy or percutaneous nephrolithotomy?

502 Number of renal calix punctures and blood loss during percutaneous nephrolithotripsy. Is there a correlation?
S. Ferretti, P. Salsi, A. Frattini, U. Maestroni, L. Astesana, P. Cortellini (Parma, Italy)
503 Supracostal approach for percutaneous renal surgery
S. Giannakopoulos, T. Pantazis, D. Antoniou, C. Kalaitzis, A. Triantafyllidis, S. Touloupidis (Alexandroupolis, Greece)

504 Minimal invasive PCNL in patients with renal pelvic and calyceal stones - enhanced experience in 164 patients
V. Zimmermanns, P. Liske, S. Lahme (Pforzheim, Germany)

505 Percutaneous treatment of large upper tract stones after urinary diversion

506 Endourological treatment of pyelogenic cyst
F. Nigro, P. Ferrarese, G. Abatangelo, M. Titta, E. Scremin, A. Tasca (Venice, Italy)

507 Comparison of outcomes in percutaneous nephrolithotomy requiring single or multiple access tracts
N. Hegarty, B. Chung, A. Monish, M. Desai (Cleveland, United States of America)
Thursday, 6 April - EAU Programme

Abstract Session

Adrenals and clinical kidney transplantation

14:00 - 15:30

Poster Session 31

Chairs: B.C. Knipscheer, Nijmegen (NL)  
E. Lechevallier, Marseille (FR)

Study for 30 min. Interactive discussion for 60 min.

508 Transperitoneal laparoscopic adrenalectomy: The platinum standard for the treatment of adrenal surgical pathologies
A. Cestari, G. Guazzoni, A. Centemero, M. Riva, A. Losa, R. Naspro, T. Maga, P. Rigatti (Milan, Italy)

509 Long term follow up of adrenocortical carcinoma patients treated with adjuvant low dose mitotane (o.p’- DDD)
M. Mullerad, G. Dickstein, C. Shechner, G. Meyer, B. Moskovitz, O. Nativ (Haifa, Israel)

510 Laparoscopic surgery for pheochromocytoma
N. Knezevic, M.M. Bernat, T. Roncevic, T. Hudolin, I. Krhen, Z. Marekovic, N. Goreta, J. Pasini (Zagreb, Croatia)

511 Adrenalectomy for pheochromocytoma: Laparoscopy versus open
E.S. Yoo, S.K. Chung, B.W. Kim, G.T. Sung, T.H. Oh, H.C. Jung, T.G. Kwon (Daegu, Busan, Masan, South Korea)

512 Adrenal metastases in adult patients with parenchymatous renal cancer
S. Voinea, I. Sinescu, M. Harza, C. Gingu, B. Serbanescu, V. Cerempei, E. Dudu, C. Baston, R. Lazar, C. Pavel (Bucharest, Romania)

513 Laparoscopic transperitoneal adrenalectomy in 130 patients
J. Luptak, J. Vseticka, M. Vraný, J. Svihra, B. Elias, R. Tomaskin, J. Kliment (Martin, Slovakia; Jablonec N. Nisou, Czech Republic)

514 Total bilateral adrenalectomy - retrospective study for 10 years
B. Serbanescu, I. Sinescu, M. Harza, S. Voinea, E. Dudu, A. Iordache, I. Manea (Bucharest, Romania)

515 Simultaneous bilateral laparoscopic adrenalectomy

516 Over 15 years of kidney transplantation from non-heart beating donors
H. Amano, H. Ishida, N. Miyamoto, N. Tokumoto, K. Tanabe, H. Toma (Shinjuku-ku, Tokyo, Japan)

517 A multicentre prospective randomised living donor (LIDO) trial: Laparoscopic versus minimally invasive open donor nephrectomy
B. Knipscheer, N. Kok, D. Pilzecker, I. Dooper, J. Yzermans, P. Mulders (Nijmegen, Rotterdam, The Netherlands)

518 Hand-assisted laparoscopic donor nephrectomy versus open donor nephrectomy: Recovery of glomerular filtration rate
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<td>Laparoscopic donor nephrectomy: Outcome in vascular challenging cases</td>
<td>H. Abouel Fettouh (Agouza-Cairo, Egypt)</td>
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<td>520</td>
<td>Complete robotic-assistance during laparoscopic live donor nephrectomies: An initial evaluation of 28 procedures at a single site</td>
<td>J. Hubert, E. Renoult, E. Mourey, L. Frimat, B. Feuillu, L. Cormier, A. Coissard, M. Kessler (Vandoeuvre les Nancy, France)</td>
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<td>521</td>
<td>The role of renal autotransplantation in complex urological reconstruction</td>
<td>F. J. Burgos, J. Pascual, R. Marcen, J. Saenz, A. Linares, L. Lopez Fando, A. Paez, J. Ortuño (Madrid, Spain)</td>
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<td>522</td>
<td>Renal transplant recipients are at high risk for locally advanced and metastatic prostate cancer</td>
<td>F. Kleinclauss, L. Salomon, Y. Neuzillet, M. Gigante, F. Iborra, J. Petit, L. Cormier, E. Lechevallier (Besançon, Creteil, Marseille, Nice, Montpellier, Amiens, Nancy, France)</td>
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</table>
Thursday, 6 April - EAU Programme

Abstract Session

14:00 - 15:30 Non-neurogenic voiding dysfunction: Urinary incontinence

Room 252 Level 2

Poster Session 32

Chairs: P. Dinis Oliveira, Porto (PT)
       C. Saussine, Strasbourg (FR)

Study for 30 min. Interactive discussion for 60 min.

523 The transobturator tape (TOT) for male urinary incontinence: Mechanism of action according to dynamic MRI imaging and first clinical results
   P. Rehder, J. Bektic, L. Pallwein, G. Bartsch, C. Gozzi (Innsbruck, Austria)

524 Principles of anatomy and histology for male transobturator tape (TOT) suspension for the treatment of post-prostatectomy urinary incontinence
   P. Rehder, A. Lunacek, G. Bartsch, C. Gozzi (Innsbruck, Austria)

525 Male perineal sling for stress urinary incontinence: Mid-term results for the first 50 treated patients
   H. Fassi-Fehri, A. Cherasse, F. Murat, M. Colombel, X. Martin, X. Gelet (Lyons, France)

526 Artificial urinary sphincter and in-vance male sling in the treatment of post-prostatectomy incontinence: A comparison study
   S. Herschorn, M. Liu (Toronto, Canada)

527 Proact versus male sling: Preliminary data of a retrospective study
   S. Crivellaro, A. Singla, N. Aggarwal, B. Frea, E. Kocjancic (Novara, Italy; Detroit, United States of America)

528 Results of the French multicentric prospective study for treatment of stress urinary incontinence with ProACT balloons after prostate surgery
   T. Lebret, F. Cour, J. Benchetrit, P. Grise, J. Bernstein, V. Delaporte, E. Chartier-Kastler, H. Botto, P. Costa (Suresnes, Paris, Montauban, Rouen, Muret, Marseille, Nîmes, France)

529 Single centre Austrian study evaluating the adjustable continence therapy (Pro ACT™) for male post prostatectomy stress urinary incontinence - last 17 months follow up
   O. Schlarp, W.A. Huebner (Korneuburg, Austria)

530 Post prostatectomy incontinence: Duloxetine and rehabilitation versus rehabilitation alone
   G. Del Popolo, M.T. Filocamo, V. Li Marzi, M. Marzocco, E. Dattolo, A. Tosto, D. Villari, G. Nicita (Florence, Italy)

531 Prospective randomised study of duloxetine versus anticholinergics versus pelvic floor training alone following radical prostatectomy: Impact on timing and magnitude of recovery of continence
   S. Marihart, M. Brausi, B. Rocco, R. Herwig, T. Anagnostou, A. Kaisary, M. Marberger, M. Chancellor, B. Djavan (Vienna, Austria; Milan, Italy; Athens, Greece; London, United Kingdom; Houston, United States of America)

532 A new artificial urinary sphincter with conditional occlusion for stress urinary incontinence - long term clinical results
   S. Knight, J. Susser, T. Greenwell, A. Mundy, M. Craggs (London, United Kingdom)
533  Voiding chart data to study lower urinary tract function non-invasively: Critical review of the parameter “voiding frequency”
S. De Wachter, J.J. Wyndaele (Edegem, Belgium)

534  Tables for predicting post prostatectomy incontinence (PPI)
S. Wille, C. Ohlmann, A. Heidenreich, R. Hofmann, U. Engelmann (Cologne, Marburg, Germany)

535  Randomised sham-controlled evaluation of functional continuous magnetic stimulation with pelvic floor muscle training in patients with urinary incontinence
T. Yamanishi, T. Suzuki, K. Yasuda, S. Kitahara, K. Yoshida (Tochigi, Saitama, Japan)

536  Tolterodine extended release (ER) for overactive bladder (OAB): Correlations among improvements in objective symptoms, patient perception of bladder condition (PPBC), and health-related quality of life (HRQL)
P. Van Kerrebroeck, K.S. Coyne, Z. Kopp, M. Brodsky, J.T. Wang (Maastricht, The Netherlands; Bethesda, New York, United States of America)

537  Prevalence of lower urinary tract symptoms (LUTS) in men: European results from the EPIC study
D. Irwin, I. Milsom, K. Reilly, S. Hunskaar, Z. Kopp, S. Herschorn, C. Kelleher, C. Hampel, W. Artibani, P. Abrams (Chapel Hill, New York, United States of America; Goteborg, Sweden; Bergen, Norway; Toronto, Canada; London, Bristol, United Kingdom; Mainz, Germany; Padova, Italy)

84  The use of spiral MDCT (multi detector computed tomography) scan in proACT (adjustable continence therapy) implant failures
A. Giammò, G. Bodo, S. Castellano, M.P. Bertapelle, A. Borrè, R. Carone (Torino, Italy)
Thursday, 6 April - EAU Programme

Abstract Session

14:00 - 15:30 BPH: Evaluation

Room Havana Level 3

Poster Session 33

Chairs: G.J. Alivizatos, Athens (GR)
        F. Desgrandchamps, Paris (FR)

Study for 30 min. Interactive discussion for 60 min.

538 LUTS significantly affect quality of life measured with the fact questionnaire
J.E. Batista Miranda, Y. Pardo-Cladellas, B. Molinuevo (Barcelona, Spain)

539 All components of ejaculation are impaired in men with lower urinary tract symptoms suggestive of benign prostatic hyperplasia
J.M. Fitzpatrick, R.C. Rosen (Dublin, Ireland; Piscataway, United States of America)

540 A simple case definition of clinical Benign Prostatic Hyperplasia, based on International Prostate Symptom Score, predicts general practitioner consultation rates
E.T. Kok, R. Jonkheijm, J. Gouweloos, F.P.M.J. Groeneveld, S. Thomas, A.M. Bohnen, J.L.H. Bosch (Rotterdam, Utrecht, The Netherlands)

541 Management of benign prostatic hyperplasia by French urologists: The Duo study

542 Longitudinal changes in international prostate symptom score in community-dwelling men: 6.53 year follow-up data from the Krimpen study
R. Bosch, F. Groeneveld, A. Bohnen (Utrecht, Rotterdam, The Netherlands)

543 Has the decline in surgical treatment for benign prostatic hyperplasia resulted in an increase in the incidence of acute urinary retention?
P. Cathcart, J. Armitage, J. Van Der Meulen, M. Emberton (London, United Kingdom)

544 Relapse in acute urinary retention following its first occurrence
P. Cathcart, J. Armitage, J. Van Der Meulen, M. Emberton (London, United Kingdom)

545 Basic fibroblast’s growth factor (bFGF) as prognostic risk factor of progression of LUTS/BPH
R. Boroyan, I. Aghajanyan, G. Shahbazyan (Yerevan, Armenia)

546 Perfusion of the prostate before and after transurethral resection of the prostate
M. Mitterberger, G.M. Pinggera, L. Pallwein, H. Gradl, F. Frauscher, G. Bartsch, H. Strasser (Innsbruck, Austria)

547 Association of obesity and benign prostatic enlargement: A case-control study in China
L. Xie, Y. Bai, X. Zheng, X. Zhang, K. Yao, L. Xu (Hangzhou, China)

548 Benign prostate hyperplasia: Must bothersomeness of symptoms be privileged?
P. Perrin, N. Marionneau, M. Cucherat, C. Taieb (Pierre Bénite, Boulogne Billancourt, Lyon, France)

549 Benign prostate hyperplasia: Relation between IPSS, SPI and quality of life IPSS item scores
P. Perrin, M. Cucherat, N. Marionneau, A. Ruffion, C. Taieb (Pierre Bénite, Lyon, Boulogne Billancourt, France)
550 Actigraphy: A new method to assess the impact of nocturia on the bed partner
R. Meadows, N. Stanley, S. Venn, J. Hislop, J. Dawson, K. McDonald, S. Arber (Guildford, United Kingdom)

551 Predictive factors of daily activities related to LUTS
N. Marionneau, P. Perrin, C. Taïeb (Boulogne Billancourt, Lyon, France)

552 Lower urinary tract symptoms: Local ischemia assessed by sonographic findings and correlated to impaired quality of life
G. Pinggera, M. Mitterberger, L. Pallwein, F. Frauscher, P. Rehder, R. Herwig, C. Gozzi, G. Bartsch, H. Strasser (Innsbruck, Austria)
Thursday, 6 April - EAU Programme

Abstract Session

Novel targets for diagnosis and therapy of prostate cancer

Room Concorde 1 Level 4

Poster Session 34

Chairs: A. Bjartell, New York (US)
P. Mongiat-Artus, Paris (FR)

Study for 30 min. Interactive discussion for 60 min.

553 Epidermal growth factor receptor family members (EGFR and Her2) are prognostic markers and potential therapeutic targets in prostate cancer

554 Peroxisome proliferator activator-receptor-γ is a new target in the treatment of human prostate cancer
T. Hayama, M. Matsuyama, K. Tsuchida, Y. Takemoto, T. Nakatani, R. Yoshimura (Osaka, Japan)

555 Superior anti-tumour immune response of dendritic cells fused with prostate cancer cells compared with tumour lysate-pulsed dendritic cells
S.B. Lee, S.Y. Jun, C. Yoo, J. Park, J.Y. Park, H.S. Kim, C.S. Kim (Seoul, Kangneung, Chungnam, South Korea)

556 Enhanced efficacy of radiation sensitivity by controlled gene delivery of PTEN expression vector conjugated with cationised gelatin in prostate cancer cells
A. Tomioka, S. Takada, M. Tanaka, Y. Hirao (Kashiwara, Japan)

557 Effects of a new oncolytic adenovirus (Xvir03) in human prostate cancer cell lines and in xenograft mouse model
U. Treiber, K. Mantwill, N. Köhler Vargas, A. Bernshausen, P.S. Holm, H. Van Randenborgh, R. Paul, N. Zantl, R. Hartung, B. Gänsbacher (Munich, Germany)

558 Aberrant expression and potency as a cancer immunotherapy target of alpha-methylacyl-CoA racemase (AMACR) in prostate cancer

559 Vaccination of hormone-refractory prostate cancer patients with peptide cocktail-loaded dendritic cells: Immunological results of a phase 1 clinical trial

560 Quantitative RT-PCR analysis of steroid hormone receptor gene expression in laser microdissected prostate cancer specimens
T. Walton, G. Li, T. Mc Culloch, R. Seth, D. Powe, M. Bishop, R. Rees (Nottingham, United Kingdom)

561 Human kallikrein 2 (hK2) inhibitors suppress tumour growth of prostate cancer xenografts in nude mice
C. Kündig, S. Cloutier, S. Aellen, L. Felber, J. Chagas, C. Gygi, P. Jichlinski, H.J. Leisinger, E. Diamandis, D. Deperthes (Epalinges, Lausanne, Switzerland; Mogi Das Cruzes, Brazil; Toronto, Canada)
562 The occurrence of prostate specific antigen - IgM immune complexes (IC) as novel serum biomarker for prostate cancer
L. Beneduce, T. Prayer-Galetti, M. Grimani Giustinian, A. Gallotta, S. Fracalanza, G. Betto, W. Artibani, F. Pagano (Venezia, Padua, Italy)

563 Assessment of a cleaved product of E-cadherin as a serum biomarker with predictive value for prostate cancer
R. Kuefer, M. Hofer, B. Volkmer, J. Gschwend, R. Hautmann, M. Rubin, D. Mark (Ulm, Germany; Boston, Ann Arbor, United States of America)

564 Human lymphocytes response to the challenging dose as a predictive assay
Z. Dobrowolski, A. Wasilewska, W. Lipczyński, B. Dobrowolska, L. Michalski, P. Jakubik, A. Strach, A. Panek (Cracow, Poland)

565 The role of determination of androgen receptors in the management of patients with locally advanced and metastatic prostate cancer
A. Muradian, A. Avoyan, T. Sarkissyan, G. Khachatryan, A. Martirosyan, G. Yerznkyan (Yerevan, Armenia)

566 A potential tumour suppressive role for the novel prostate basal cell marker TSC-22 in prostate cancer

567 Pim-1 enhances androgen responses at castrate DHT levels in prostate cancer cell lines
M. Nawijn, H. Van Der Poel (Amsterdam, The Netherlands)
Thursday, 6 April - EAU Programme

Abstract Session

14:00 - 15:30 Prostate cancer: Genetics and chemoprevention

Room Concorde 2 Level 4

Poster Session 35

Chairs: O. Cussenot, Paris (FR)
        L.A. Kiemeney, Nijmegen (NL)

Study for 30 min. Interactive discussion for 60 min.

568 Segregation analysis of 1546 Finnish pedigrees
S. Pakkanen, A. Baffoe-Bonnie, M. Matikainen, P. Koivisto, T. Tammela, O. Liang, B. Joan, J. Schleutker
(Tampereen Yliopisto, Tampere, Finland; Philadelphia, Bethesda, United States of America)

569 The impact of clinical features on linkage to prostate cancer predisposition in German prostate cancer families
K. Herkommer, C. Martin, C. Maier, W. Vogel, R.E. Hautmann, T. Paiss, J. Hoegel (Ulm, Germany)

570 Expression of hormone-/carcinogen-metabolising enzymes in the prostate: Clues into peripheral-zone susceptibility?
N. Ragavan, R. Hewitt, A.C. Hindley, C.M. Nicholson, S.S. Matanhelia, F.L. Martin (Preston, Lancaster, United Kingdom)

571 An observational study of cancers among female partners of UK-resident prostate cancer patients

572 Clinical significance of Pl polymorphism of the glycoprotein 3 gene in prostate cancer
O. Loran, A. Itkes, A. Seriogin, Jr (Moscow, Russia)

573 CAG repeat shortening – an explanation for the development of androgen-independent prostate cancer

574 Androgens and prostate cancer risk: A prospective study
S. Wirén, U. Stenman, G. Hallmans, P. Stattin (Umeå, Sweden; Helsinki, Finland)

575 Differences in distribution of polymorphisms in genes regulating androgen activity between prostate cancer low-risk Inuit men and high-risk Scandinavians
Y. Giwercman, C. Giwercman, A. Giwercman, H.S. Pedersen, G. Toft, J.P. Bonde (Malmö, Sweden; Nuuk, Greenland; Aarhus, Denmark)

576 Chemoprevention of human prostate cancer (PCa) by oral administration of green tea catechins (GTCs) in high grade pin (HGPIN) subjects: A preliminary report from a 1 year proof of principle study
S. Bettuzzi, M. Brausi, F. Rizzi, G. Castagnetti, G. Peracchia, S. Astancolle, A. Corti (Parma, Modena, Italy)

577 Omega-3 poly-unsaturated fatty acids inhibit omega-6 poly-unsaturated fatty acid directed metastasis towards human bone marrow stroma
M. Brown, C. Hart, E. Gazi, N. Clarke (Manchester, United Kingdom)
578  Bioavailability of isoflavones in the human prostate
    N. Védrine, L. Guy, C. Manach, C. Rémésy, J. Boiteux (Clermont-Ferrand, France)

579  A low-carbohydrate, high-fat diet inhibits proliferation of prostate cancer in vivo
    L. Klotz, N. Fleshner, V. Venkateswaran (Toronto, Canada)

580  Differences in serum concentrations of vitamin E, C, A, lycopene, carotenoids, macro- and microelements, products of lipid peroxidation in various prostate lesions

581  Green tea (EGCG) and prostate cancer: A new sphingosine kinase inhibitor?
    N. Doumerc, E. Bonhoure, A. Dayon, P. Rischmann, B. Malavaud, O. Cuvillier (Toulouse, France)

582  Modification of proliferation, apoptosis and androgen receptor expression of LNCaP cells by diet polyphenols
    A. Ferruelo, J. Angulo, C. Pascual-mateo, I. Romero, M. Lujan, A. Berenguer (Getafe, Spain)
### Thursday, 6 April - EAU Programme

**Abstract Session**

**14:00 - 15:30 Prostate cancer: Radiotherapy and brachytherapy**

**Room Concorde 3 Level 4**

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<td>T.M. De Reijke, Amsterdam (NL)</td>
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<td>F. Pina, Matosinhos (PT)</td>
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<td>V. Fonteyne, L. Vakaet, G. Villeirs, W. Oosterlinck, L. Denoyette, W. De Neve, G. De Meerleer (Ghent, Belgium)</td>
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<td>F. Munoz, A. Guarneri, O. Sedigh, P. Ciammella, U. Ferrando, C. Fiandra, R. Ragona, F. Liberale, U. Ricardi (Torino, Italy)</td>
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<td>A. Salonia, C. Cozzarini, L.F. Da Pozzo, F. Fazio, V. Scattoni, A. Briganti, L. Bua, P. Rigatti, F. Montorsi (Milan, Italy)</td>
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<td>J. Nohra, E. Huyghe, M. Soulie, M. Khedis, P. Rischmann, B. Malavaud, P. Pierre (Toulouse, France)</td>
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<td>H. Burden, S. Evans, R. Persad (Bristol, United Kingdom)</td>
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<td>M. Simms, P. Royce, R. Snow, J. Millar (Melbourne, Australia)</td>
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593 Oncological outcome and treatment related toxicity in patients with localised prostate cancer following HDR-IR-192 brachytherapy combined with external beam radiotherapy
F. Jansen, M. Wildhagen, W. Kirkels, P. Jansen, C. Bangma, B. Chaplin (Rotterdam, The Netherlands)

594 Long-term erectile function after LDR-brachytherapy with iodine-125 for the treatment of localised prostate cancers
S. Machtens, R. Baumann, J.H. Karstens, B. Bastian, J. Hagemann, J. Serth, U. Jonas (Hanover, Germany)

595 Acute toxicity in low risk prostate cancer treated with low dose (125) I brachytherapy: Prospective analysis
A. Rodríguez, M.Í. Cabeza, F. Villacampa, S. De La Rosa, O. Leiva, P. Fernandez, A. Lopez, E. Lanzós (Madrid, Spain)

596 Side effects after 16 years of brachytherapy for localised prostate carcinoma
S. Hautmann, S.H. Stübinger, A. Bannowsky, K. Overmoyer, O. Erdt, M. Danilevicius, C. Van Der Horst, P.M. Braun, K.P. Jünemann (Kiel, Germany)

597 Long term health related quality of life after state of the art radical treatment for early prostate cancer: Brachytherapy and laparoscopic radical prostatectomy outcome data with 18 month follow-up
A. Henderson, P. Sooriakumaran, S. Khaksar, C. Eden, S. Langley, R. Laing (Guildford, Basingstoke, United Kingdom)
Thursday, 6 April - EAU Programme

Abstract Session

Surgical approaches to incontinence

**Video Session 5**

**Chairs:**
- B. Bemelmans, Amsterdam (NL)
- P.A. Geavlete, Bucharest (RO)

All presentations are 14 minutes in length

**V25** Combined obturator - pre-pubic cystocele and incontinence repair: Rationale and technique
- P. Palma, C. Riccetto, M. Dambros, R. De Fraga, N. Rodrigues Netto Jr. (Campinas, Brazil)

**V26** A new surgical technique for implantation of a permanent electro stimulation system for treatment of female overactive bladder and interstitial cystitis
- I. Nissenkorn, R. De Jong, P. Radziszewski, M. Cervigni, M. Parsons, L. Cardozo, B. Farnsworth, J. Nordling (Tel-Aviv, Israel; Cape Town, South Africa; Warsaw, Poland; Rome, Italy; London, United Kingdom; Sydney, Australia; Herlev, Denmark)

**V27** Bulbourethral sling with invance device for the treatment of post-prostatectomy incontinence
- I. Morra, R. Tarabuzzi, F. Porpiglia, M. Cossu, M. Billia, J. Renard, R.M. Scarpa (Torino, Italy)

**V28** Laparoscopic sacral colpopexy using a double polyester mesh
- J.P. Giolitto (Rheims, France)

**V29** Simultaneous implantation of the artificial urinary sphincter and inflatable penile prosthesis
- L. Jones (San Antonio, United States of America)

**V30** Dorsal graft urethroplasty for urethral stricture in the female
- A. Tsivian, S. Benjamin, A.A. Sidi (Holon, Israel)
Abstract Session

15:45 - 17:15 History of urology

Room Blue Level 2

Oral Session 8

Chairs: A. Jardin, Paris (FR)
D. Schultheiss, Giessen (DE)

All presentations are 7 minutes in length, followed by 2 minutes of discussion

Overview presentation
D. Schultheiss, Giessen (DE)

598 History of condoms: An interesting journey of the “rubber”
A. Omar, A. Rao, O. Karim, H. Motiwala (Slough, United Kingdom)

599 Androgyne: An universal phenomena
J.J. Mattelaer (Kortrijk, Belgium)

600 Urogenital tract diseases from the scope of medieval Armenian doctors
R. Badalyan, S. Vardanyan, H. Yenokyan, I. Aghajanyan (Yerevan, Armenia)

601 The origins of scientific treatment for venereal diseases
E. Poulakou-Rebelakou, C. Tsiamis, C. Alamanis, A. Rempelakos (Athens, Greece)

602 The urethral catheter - a passage through history
A. Khan, A. Thwaini, A. Mampitya, A. Rao, I. Shergill, J. Barua (Harold Wood, United Kingdom)

603 Wolfgang Amadeus Mozart. The death of a genius
M. Hatzinger, A. Haecker, J.K. Badawi, S. Kamp, P. Alken (Mannheim, Germany)

604 The moment of 'enlightment'
R. Pelger (Leiden, The Netherlands)

605 Moulages in urology, a forgotten topic
F.H. Moll, M. Frank, J. Leissner (Cologne, Germany)

606 Sir Peter Freyer – a distinguished Irish doctor
J.P. O'Donoghue, J.G. Noble (Oxford, United Kingdom)

Summary
A. Jardin, Paris (FR)
Abstract Session

15:45 - 17:15 Prostate cancer: Impact of lymphnode dissection

Room Bordeaux Level 3

Oral Session 9
Chair: C.C. Abbou, Creteil (FR)
A. Heidenreich, Cologne (DE)

All presentations are 7 minutes in length, followed by 2 minutes of discussion

Overview presentation
A. Heidenreich, Cologne (DE)

607 Extended lymphadenectomy should be performed in patients with PSA >6, biopsy Gleason score 7-10 and stage T2 or higher prostate cancer
A. Briganti, K.F. Chun, F. Montorsi, V. Scattoni, L. Da Pozzo, A. Salonia, F. Deho, E. Farina, B. Aldo, A. Gallina, R. Colombo, R. Bertini, L. Barbieri, L. Valiquette, P. Rigatti, P.I. Karakiewicz (Montreal, Milan, Italy; Montreal, Canada)

608 Defining the ideal number of nodes to remove at pelvic lymphadenectomy for prostate cancer: Validation of a nomogram for intermediate- to high risk patients
A. Briganti, R. Heuer, K.H.F. Chun, H. Isbarn, G. Salomon, G. Tinn, O. Von Nordenflycht, A. Haese, H. Heinzer, M. Graefen, H. Huland, P.I. Karakiewicz (Milan, Italy; Hamburg, Germany; Montreal, Canada)

609 Laparoscopic extended pelvic lymphnode dissection for prostate cancer: Description of the surgical technique and first results
A. Häcker, S. Jeschke, N. Albqami, A. Al-Bodour, P. Prammer, K. Leeb, G. Janetschek (Mannheim, Germany; Linz, Austria)

610 Can extended lymphnode dissection improve prognosis?
D. Echtle, E. Mueller, D. Frohneberg (Essen, Karlsruhe, Germany)

611 Complications of pelvic lymphadenectomy in a consecutive series of 1000 patients undergoing radical prostatectomy between 1993 and 2004
M. Musch, V. Klevecka, U. Roggenbuck, D. Kroepfl (Essen, Germany)

612 Node positive prostate cancer is not always a systemic disease and benefits from radical prostatectomy, extended pelvic lymphadenectomy and adjuvant radiotherapy
L. Da Pozzo, C. Cozzarini, B. Mazzoccoli, G.V. Fantini, N. Suardi, F. Montorsi, R. Bertini, A. Salonia, A. Bolognesi, F. Fazio, P. Rigatti (Milan, Italy)

613 Pelvic lymphnode dissection (PLND) can safely be spared in adequately selected low risk patients without affecting cure rates of patients undergoing radical retropubic prostatectomy (RRP)
A. Haese, T. Steuber, M. Graefen, J. Walz, T. Schlomm, C. Eichelberg (Hamburg, Germany)
Number of sentinel lymphnodes (SLN) of the prostate localised outside the areas of “limited” versus “extended” pelvic node dissection

A. Mattei, F. Fuechsel, S. Warncke, S. Z’brun, T. Krause, U.E. Studer (Berne, Switzerland)

Summary

C.C. Abbou, Creteil (FR)
Abstract Session

15:45 - 17:15 Sexual dysfunction: Medical treatment/miscellaneous

Room Ternes Level 1

Poster Session 37

Chairs: E.A. Austoni, Milan (IT)
I. Saenz De Tejada, Madrid (ES)

Study for 30 min. Interactive discussion for 60 min.

615 Are body mass index or waist/hip-ratio independent risk factors for erectile dysfunction or lower urinary tract symptoms?
A. Ponholzer, C. Temml, M. Marszalek, K. Mock, M. Rauchenwald, S. Madersbacher (Vienna, Austria)

616 Moderate or severe erectile dysfunction is associated with severe coronary artery disease among chest pain patients
S. Hirsimäki, J. Koskimäki, P. Kuukasjärvi, J. Laurikka, H. Huhtala, A. Kaipia (Tampere, Finland)

617 The correlation of erectile dysfunction and intima-media thickness of common carotid arteries
S. Kwon, K. Moon, J. Kim, T. Park, J. Hyun (Daegu, Jinju, South Korea)

618 Is there a change in female genital sensation during sexual arousal?
I. Gruenwald, I. Gertman, L. Loewenstein, Y. Vardi (Haifa, Israel)

619 Vardenafil improves satisfaction in couples affected by erectile dysfunction previously untreated with PDE5 inhibitors
D. Edwards, G. Hackett, O. Collins, J. Curram (Gloucestershire, Birmingham, Newbury, Berkshire, United Kingdom)

620 Improvement in erection quality is associated with treatment satisfaction and improved self-esteem, confidence, and sexual relationship satisfaction
V. Stecher, S. Collins, C. Feiner, D. Lording, M. Gillman (New York, United States of America; Malvern, Victoria, Queensland, Australia)

621 Influence of sildenafil on lower urinary tract symptoms
H.S. Chang, C.H. Park, C.J. Kim, K.S. Kim, D.G. Kim, Y.J. Seo, T.G. Kwon, D.Y. Kim, H.C. Jung (Daegu, Gyeongju, South Korea)

622 Patient expectations for treatment outcomes when initiating tadalafil treatment for erectile dysfunction: Results from the Detect study
S. Arver, T. Eliasson, P. Perimenis, A. Bitton, K. Giannitsas, M. Belger, H. Schmitt (Stockholm, Sweden; Patras, Athens, Greece; Geneva, Switzerland; Erl Wood, United Kingdom; Brussels, Belgium)

623 A prospective evaluation of long-term therapy with tadalafil and penile haemodynamics at colour Doppler ultrasound
A. Mofferdin, M.C. Sighinolfi, S. De Stefani, S. Micali, G. Peluso, G. Bianchi (Modena, Italy)

624 Penile rehabilitation and recovery penile length following radical prostatectomy. 5 years’ follow-up
O. Sedigh, M. Paradiso, A. Abbona, G.L. Milan, U. Ferrando, G. Pasquale (Torino, Italy)
625 Early rehabilitation and nerve-sparing cystectomy. Is there any value?
E. Hekal, M. El-Bahasawy, A. Mesbah, A. Shaaban (Mansoura, Egypt)

626 Sildenafil in the treatment of post-radical cystectomy erectile dysfunction in 100 patients
T. Syed Ahmed, M. El-bahasawy, E. Ibrahim, E. El-sobky, N. El-tabeiy, M. Bazeed (Sharjah, United Arab Emirates; Mansoura, Egypt)

627 Tadalafil in men with erectile dysfunction and spinal cord injury
F. Giuliano, A. Sanchez Ramos, D. Loechner Ernst, G. Del Popolo, Y. Zhao, J. Casariego (Le Kremlin Bicetre, France; Toledo, Madrid, Spain; Murnau, Germany; Florence, Italy; Indianapolis, United States of America)

628 Efficacy of sildenafil 100 mg on demand in patients undergoing bilateral nerve-sparing radical prostatectomy is based on precise predicting factors
F. Montorsi, G. Zanni, A. Salonia, A. Gallina, A. Briganti, L. Barbieri, F. Dehò, N. Suardi, F. Fabbri, E. Farina, P. Rigatti (Milan, Italy)

629 Young men with erectile dysfunction: Too young to be true?
R. Casella, L. Ronci, T. Sulser, K. Lehmann (Biel, Basel, Baden, Switzerland)
Thursday, 6 April - EAU Programme

Abstract Session

15:45 - 17:15 Kidney tumours: Nephron sparing treatment

Room Maillot Level 2

Poster Session 38

Chairs: V. Ficarra, Verona (IT)
I. Romics, Budapest (HU)

Study for 30 min. Interactive discussion for 60 min.

630 Kidney tumour resection with use of tachosil as haemostatic treatment
H. Van Poppel, S. Siemer, S. Lahme, S. Altziebler, S. Machtens, W. Strohmaier, H.W. Wechsel, P. Goebell,
Homburg/Saar, Tübingen, Hanover, Coburg, Wilhelmshaven, Essen, Planegg, Leipzig, Hamburg, Germany;
Graz, Salzburg, Wien, Austria; Roskilde, Denmark)

631 A novel method of renal parenchymal suturing with the absorbable clips during laparoscopic partial
nephrectomy in a porcine model
Z. Hidenori, N. Teruhisa, A. Isao, T. Takayuki, M. Yuki, K. Hideki, N. Munehiro, N. Hiroshi, S. Nobuharu,
F. Mizuya, T. Yoshio, T. Masayuki (Yamanashi, Japan)

632 Surgical evaluation of parenchymal clamping during conservative surgery for renal tumours
A. Mejean, M.O. Timsit, E. Fontaine, N. Thiounn, B. Dufour (Paris, France)

633 Laparoscopic partial nephrectomy for renal cell tumours in warm ischaemia
H. Meixl, J. Wakonig, K. Jeschke (Klagenfurt, Austria)

634 Open partial nephrectomy with selective renal parenchymal control: A new reliable clamp
J. Nohra, E. Huyghe, E. El Khoury, M. Khedis, M. Soulie, D. Roux, P. Plante (Toulouse, France)

635 Longer-term outcome of non-ischaemic partial nephrectomy using microwave tissue coagulator
K. Fujimoto, M. Tanaka, M. Tanaka, Y. Hirao (Kashiwara, Japan)

636 Partial nephrectomy for centrally located tumours
N. Kleinmann, A. Nadu, Y. Mor, J. Ramon (Ramat Gan, Israel)

637 'Bench' surgery with autotransplantation for hilar kidney tumours: A nephron-sparing alternative in patients
with a solitary kidney
J. Boormans, W. Marchand, J. Ijzermans, G. Mikisch, P. Verhagen (Rotterdam, The Netherlands; Bremen,
Germany)

638 Prospective study of safety margins in partial nephrectomy: Intra-operative assessment and contribution of
frozen sections
M.O. Timsit, J.P. Bazin, N. Thiounn, E. Fontaine, Y. Chretien, B. Dufour, A. Mejean (Paris, France)

639 A national survey on the practice of nephron-sparing surgery in France
J. Bernhard, J. Ferriere, B. Lacroix, J. Tostain, C. Pfister, M. Colombel (Rennes, Rouen, Creteil, Toulouse,
Bordeaux, St Etienne, Lyon, France)
640  Nephron-sparing surgery: Experience in 159 consecutive cases
S. Joniau, H. Van Poppel (Leuven, Belgium)

641  Progression and long-term survival after simple enucleation for the elective treatment of pT1a renal cell carcinoma (RCC): Our experience over 25 years
A. Lapini, A. Minervini, S. Serni, L. Masieri, F. Nelli, G. Giubilei, N. Tosi, M. Carini (Florence, Italy)

642  Enucleoresection for renal cell carcinoma: Prognostic factors and long-term results in pathological T1-stage patients

643  Simple enucleation for the treatment of renal cell carcinoma between 4 and 7 cm in greatest dimension: Progression and long-term survival
A. Minervini, S. Serni, A. Lapini, L. Masieri, M. Carloni, L. Manoni, F. Lanzi, M. Carini (Florence, Italy)

644  30 Years’ experience in nephron-sparing surgery: Long-term survival and comparison of results after elective and imperative surgery
F. Becker, S. Siemer, M. Hack, A. Tzavaras, C. Pönicke, M. Stöckle (Homburg, Germany)
Thursday, 6 April - EAU Programme

Abstract Session

15:45 - 17:15 An appraisal of ESWL

Room 242 Level 2

Poster Session 39

Chairs: P. Alken, Mannheim (DE)
H-G. Tiselius, Stockholm (SE)

Study for 30 min. Interactive discussion for 60 min.

645 The role of volume and attenuation value histogram of urinary stone on non-contrast helical CT as the predictor of fragility by shock wave lithotripsy

646 Use of double-J stents prior to extracorporeal shock wave lithotripsy: A prospective study assessing symptoms and complications
A.A. Karama Musa (Aden, Yemen)

647 Semen changes after extracorporeal shock wave lithotripsy for distal ureteral stones
M.A. Sayed (Assiut, Egypt)

648 Ureteric calculi treated with increased shock wave energy
J. Bikhchandani, P. Zammit, N. Bafaloukas, C. Cannaby, S. Albanis, N. Buchholz (London, United Kingdom)

649 Effectiveness of successive shock wave lithotripsy for renal and ureteral stones after failed initial treatment
H. Hegazy, A. Elabbady (Alexandria, Egypt)

650 Predictors of clinical significance of residual fragments after ESWL for renal stones
A. El-Nahas, A. El-Assmy, K. Madbouly, K. Sheir (Mansora, Egypt)

651 Right and left lower calyceal stones: Is there any difference in terms of renal anatomical features affecting stone clearance after extracorporeal shock wave lithotripsy?
C. Acar, B. Küpeli, S. Gürocak, I. Bozkirli (Ankara, Turkey)

652 Effects of extracorporeal shock wave lithotripsy on endovascular aortic stentgrafts
J. Birzele, D. Mayer, R. Winkler, M. Lachat, H. John (Zurich, Dübendorf, Switzerland)

653 Comparison of success rate of ESWL technique according to the position of stone in different parts of ureter
M. Rastegari, S. Shakeri, H. Khishdoost (Shiraz, Iran)

654 Extracorporeal shock wave lithotripsy success based on body mass index
G. Mokhtari (Rasht, Iran)

655 Predictors of success after extracorporeal shock wave lithotripsy (ESWL) for renal calculi between 20–30mm: A multivariate analysis model
A. El-Assmy, A. El-Nahas, M. Abo-Elghar, I. Eraky, M. El-Kenawy, K. Sheir (Mansoura, Egypt)
656  Can we predict the success of shockwave lithotripsy by stone density measured with computerised tomography?

657  Impact of lower pole renal anatomy on stone clearance after shock wave lithotripsy in children
B. Turna, O. Nazli, A. Simsir, G. Ustun, E. Apaydin (Izmir, Turkey)

658  Treatment of renal stones in children: A comparison between percutaneous nephrolithotomy
A. Shokeir, K. Sheir, A. El-Assmy, A. El-Nahas, W. Easa, H. El-Kappany (Mansoura, Egypt)

659  Tamsulosin improves clearance of renal stones larger than 10mm after ESWL
G.L. Gravina, A.M. Costa, P. Ronchi, G. Galatioto Paradiso, G. Pace, L. Gualà, O. Martella, G. Simoncini,
G. Ranieri, G. Angelozzi, M. Coscione, C. Vicentini (L’Aquila, Italy)
Thursday, 6 April - EAU Programme

Abstract Session

Urothelial tumours: Management of superficial tumours

Room 251 Level 2

15:45 - 17:15

Poster Session 40

Chairs: T. Lebret, Suresnes (FR)
J. Palou Redorta, Barcelona (ES)

Study for 30 min. Interactive discussion for 60 min.

660 Testing of chemosensitivity in patients with transitional cancer of the bladder
M. Büttner, W. Strohmaier, H. Heidecke (Coburg, Luckenwalde, Germany)

661 Retinoblastoma protein expression is a predictor of response to BCG and interferon-α treatment for superficial bladder cancer

662 Intravesical pemetrexed: Potential and toxicity in a pre-clinical pig study
K. Hendricksen, P.M.J. Moonen, A.G. Van Der Heijden, J. Molkenboer-Kuenen, C.A. Hulsbergen-Van De Kaa, J.A. Witjes (Nijmegen, The Netherlands)

663 Comparison of the 1973 and 1998 grading systems for superficial papillary bladder cancer
B. Van Rhijn, B. Ooms, A. Jöbsis, T. Van Der Kwast (Rotterdam, Den Haag, The Netherlands; Toronto, Canada)

664 Phase II marker lesion study with intravesical instillation of eoquin™ in superficial bladder cancer, toxicity and marker response - the final results

665 Complications of BCG intravesical treatment for superficial bladder tumours - 21 years’ follow-up
D.A. Georgescu, P. Geavlete, I. Arabagiu, D. Soroiu (Bucharest, Romania)

666 Metachronous upper urinary tract tumours after superficial bladder tumours
D.A. Georgescu, P. Geavlete, G. Nita, S. Aghamiri (Bucharest, Romania)

667 Effects of simultaneous transurethral resection of the prostate and solitary bladder tumours smaller than three centimetres on oncological results

668 The use of local anaesthesia with N-DO™ injector (thysion™) for TUR of small bladder tumours (BT) and bladder mapping: Preliminary results and cost-effectiveness analysis
M. Brausi, M. Gavioli, G. Peracchia, G. De Luca, M. Viola, G. Simonini, G. Verrini (Modena, Modena-Carpi, Italy)

669 Value of second TURBT in grade 3 stage T1 transitional cell carcinoma of the bladder
B. Ali-el-Dein, M. Badran, R. Abu-Eideh, A. Nabeeh, E. Ibrahim (Mansoura, Egypt)
670 Prognostic significance of absence of proper muscle in the resected specimen of primary T1G3 bladder cancer
J. Park, C. Song, J.B. Kim, J. Hong, C. Kim, H. Ahn (Seoul, South Korea)

671 Optimised postoperative administration of intravesical Mitomycin C
T. Müller, T. Akkad, C. Gozzi, R. Ramoner, M. Mitterberger, G. Bartsch, H. Steiner (Innsbruck, Austria)

672 Efficacy of managing small recurrent bladder tumours by diathermy using the CYF 4 Olympus flexible cystoscope under local anaesthesia in day surgery unit
P. Chandrasekar, G. Walkay, J. Calleary, R. Samman, J. Virdi, B. Potluri (Harlow, United Kingdom)

673 Long-term follow-up of a randomised trial comparing sequential Bacillus Calmette-Guérin and electro-motive mitomycin-C with Bacillus Calmette-Guérin alone in high-risk superficial bladder cancer

674 Early versus delayed cystectomy for superficial bladder transitional cell carcinoma: A retrospective study
B. Ali-el-Dein, M. Abdel-Latif, A. Mosbah, A.A. Shaaban, A. Nabeeh, E.I. Ibrahiem, H.A. El-Kappany (Mansoura, Egypt)
Thursday, 6 April - EAU Programme

Abstract Session

Clinical practice in female urology

Room 252 Level 2

Poster Session 41

Chairs: W. Artibani, Padua (IT)
        M. Spinelli, Milan (IT)

Study for 30 min. Interactive discussion for 60 min.

675 Quality of life in patients with symptoms of overactive bladder and refractory idiopathic detrusor overactivity following intradetrusor injections of botulinum toxin type A: Results from a randomised, double blind, placebo-controlled trial
A. Sahai, S. Khan, P. Dasgupta (London, United Kingdom)

676 Evaluation of pelvicol implants in preventing recurrence of anterior vaginal wall prolapse: Randomised multicentre study
E. Kočjanec, P. Pifarotti, F. Magatti, F. Bernasconi, D. Riva, B. Frea, M. Meschia (Novara, Milan, Como, Desio, Cantù, Magenta, Italy)

677 Prospective, open, randomised trial of tension-free vaginal tape and colposuspension as treatment for stress incontinence, 3-years’ follow-up: Preliminary 6-month and 1-year results
M. Tellez Martinez-Fornes, C. Fernandez, F. Gimeno Albo (Madrid, Spain)

678 Short-term efficacy of high-supervisory-intensity group pelvic floor training versus unsupervised, home training in female stress urinary incontinence: A randomised pilot study
E. Konstantinidou, A. Apostolidis, N. Kondelidis, Z. Tsimtsiou, D. Hatzichristou, E. Ioannides (Thessaloniki, Greece)

679 Assessment of pelvic neuropathic lesions in female stress urinary incontinence
G. Pinggera, R. Spranger, P. Rehder, K. Tosun, M. Mitterberger, H. Strasser, G. Bartsch (Innsbruck, Austria)

680 Cizolirtine citrate, an effective treatment for urinary incontinence secondary to overactive bladder
J. Všeticka, J. Schraml, I. Pavlik, J. Zátura, T. Semerad, M. Abadías (Jablonec N. Nisou, Ústí Nad Labem, Prague, Olomouc, Rakovník, Czech Republic; Barcelona, Spain)

681 Laparoscopic promontofixation: Results at 4.5 years
C. Mugnier, A. Pansadoro, S. Barmoshe, J.L. Hoepfner, T. Piechaud, R. Gaston (Bordeaux, Rome, France; Brussels, Belgium)

682 Successful treatment of vesico-vaginal fistula through the abdominal approach: A 24-year experience
M. Mancini, R. Boscolo Berto, F. Gottardo, F. Dal Moro, F. Pagano, W. Artibani (Padua, Italy)

683 Analysis of long-term pelvic floor electrostimulation therapy for interstitial cystitis
M. Parsons, P. De Jong, P. Radziszewski, D. Peter, A. Borkowski, M. Cervigni, L. Cardozo, B. Farnsworth, J. Nordling, J. Groen, J.L.H. Bosch, C. Chapple, H. O’Connell, R. Anna, I. Nissenkorn (Edgbaston, Birmingham, London, Sheffield, United Kingdom; Cape-town, South Africa; Warsaw, Poland; Rome, Italy; Sydney, Melbourne, Australia; Herlev, Denmark; Rotterdam, Utrecht, The Netherlands; Tel Aviv, Israel)
684  Reproducibility of a minimally invasive intradetrusor injection technique to treat detrusor overactivity with botulinum toxin
A. Sahai, V. Kalsi, S. Khan, C. Fowler (London, United Kingdom)

685  Italian single-centre evaluation of adjustable continence therapy for the treatment of female stress urinary incontinence: 4 Year follow-up
E. Kocjancic, S. Crivellaro, S. Ranzoni, D. Bonvini, B. Frea (Novara, Italy)

686  Use of Ho: YAG laser in the treatment of patients with recurrent and interstitial cystitis
A. Zaitcev, D. Pushkar, V. Diyakov, I. Galchikov (Moscow, Russia)

687  Predictive value of female voiding (outflow obstruction and detrusor contraction-) nomograms is insufficient
P. Rosier, L. De Kort, R. Bosch (Utrecht, The Netherlands)

688  Electrical stimulation and behavioural treatment in female patients with mild overactive bladder syndrome, clinical results
G. Palleschi, A. Pastore, G. Bova, E. Shehi, S. Mariani, A. Tubaro, A. Carbone (Latina, Italy)

689  How useful is uroflowmetry in females?
S. Al-hayek, M. Belal, P. Abrams (Bristol, United Kingdom)
Thursday, 6 April - EAU Programme

Abstract Session

15:45 - 17:15 BPH: Medical therapy

Room Havana Level 3

Poster Session 42

Chairs: R. Berges, Cologne (DE)
        B. Djavan, Vienna (AT)

Study for 30 min. Interactive discussion for 60 min.

690 Alfuzosin 10mg once daily prevents BPH overall clinical progression but not acute urinary retention occurrence: Results of a 2-year placebo-controlled study
C. Roehrborn (Dallas, United States of America)

691 The relationship between testosterone levels and measures of sexual dysfunction: Baseline data from dutasteride studies involving a total of 12,464 subjects
M. Marberger, C. Roehrborn, R. Rittmaster, T. Wilson (Vienna, Austria; Dallas, Research Triangle Park, United States of America)

692 Baseline data from the Combination of Avodart™ and Tamsulosin (CombAT) trial: Relationships between body mass index (BMI) and LUTS/BPH measures
C. Roehrborn, C. Schulman, P. Arrosagarai, A. Duggan, K. Major-Walker, B. Morrill (Dallas, Research Triangle Park, United States of America; Brussels, Belgium; Guipúzcoa, Spain; Greenford, United Kingdom)

693 Racial differences in baseline characteristics in the Combination of Avodart™ and Tamsulosin (CombAT) trial
F. Montorsi, R. Damião, M. Chung, A. Duggan, K. Major-Walker, B. Morrill (Milan, Italy; Rio De Janeiro, Brazil; Busan, South Korea; Greenford, United Kingdom; Research Triangle Park, United States of America)

694 Management of acute urinary retention in France: Cross-sectional survey in 2635 men with BPH
F. Desgrandchamps, F. De La Taille, J. Doublet (Paris, Creteil, France)

695 Management of patients suffering from moderate to severe benign prostatic hyperplasia: Real-life practice of French urologists (the Duo study)
R.O. Fourcade, M.C. Picot, A. Gaudin, N. Texier, A. Slama (Auxerre, Montpellier, Marly Le Roi, Paris, France)

696 The efficacy and safety of tadalafil administered once a day for lower urinary tract symptoms (LUTS) in men with benign prostatic hyperplasia (BPH)
K. Mc Vary, C. Roehrborn, J. Kaminetsky, S. Auerbach, B. Wachs, J. Young, A. Esler, G. Sides, B. Denes (Chicago, Dallas, New York, Newport Beach, Long Beach, Laguna Woods, Bothell, Indianapolis, United States of America)

697 Impact of baseline variables on the risk of LUTS progression, AUR and BPH-related surgery: Results of a 2-year placebo-controlled study with alfuzosin 10mg once daily
C. Roehrborn (Dallas, United States of America)

698 Alfuzosin 10mg once daily administered for 3 years is associated with a low incidence of LUTS/BPH progression events
M. Emberton, A. Alcaraz, H. Matzkin, M. Elhilali, R. Hartung, N. Harving, J. Van Moorselaar (London, United Kingdom; Barcelona, Spain; Tel Aviv, Israel; Montreal, Canada; Munich, Germany; Aalborg, Denmark; Amsterdam, The Netherlands)
Combination of an α-blocker, alfuzosin and a PDE5 inhibitor, sildenafil citrate, is superior to monotherapy in treating lower urinary tract symptoms and sexual dysfunction
S.A. Kaplan, R. Gonzalez, J. Ogiste, A.E. Te (New York, United States of America)

Treatment of LUTS in men with a novel aromatase inhibitor finrozole
T.L. Tammela, A. Nilson, T. Streng, K. Vahtera, R. Lammintausta, R. Santti (Tampere, Turku, Finland)

Medical management of lower urinary tract symptoms associated with benign prostatic hyperplasia (LUTS/BPH): Differences between urologists and primary care physicians (PCPs)
J.T. Wei, J. Nuckolls, M. Miner, R.C. Rosen, C.G. Roehrborn (Ann Arbor, Michigan, Roanoke, Virginia, Swansea, Massachusetts, Piscataway, New Jersey, Dallas, Texas, United States of America)

Demographic and clinical parameters associated with use of medical therapy at enrolment to the BPH registry & patient survey
C.G. Roehrborn, J.T. Wei, S.E. Althof, L.S. Marks, D.J. Pasta, A.D. Seftel (Dallas, Texas, Ann Arbor, Michigan, Cleveland, Ohio, Los Angeles, California, San Francisco, California, United States of America)

Stromal nodules and vessel wall thickening are pathological features of BPH associated with failure of α-blocker therapy
R.D. Smith, M.A. Tran-dang, B. Khoubehi, R. Witherow, J. Vale, A. Patel, M. Walker (London, United Kingdom)

Self-management for men with uncomplicated lower urinary tract symptoms: A randomised controlled trial
Thursday, 6 April - EAU Programme

Abstract Session

Prostate cancer: Biopsy issues I

Room Concorde 1 Level 4

15:45 - 17:15

Poster Session 43

Chairs: J. Breza, Bratislava (SK)
        T. Loch, Flensburg (DE)

Study for 30 min. Interactive discussion for 60 min.

705 Prostate biopsy using different applications of Lidocaine
R. Szlauer, P. Meissner, A. Gnad, R. Goetschl, N.T. Schmeller, K. Fink (Salzburg, Austria)

706 The effect of the patient’s anxiety and periprostatic anaesthesia on pain control during transrectal prostate needle biopsy
U. Tekdogan, A. Tuncel, V. Nalcacioglu, C. Kisa, Y. Aslan, A. Atan (Ankara, Turkey)

707 A randomised, single-blind, parallel-group study to assess the efficacy of analgesia protocols for transrectal ultrasonographically guided prostate biopsy
K. Moysidis, M. Kantiou, O. Kerasidou, E. Thomaidou, A. Giakoumelos, K. Hatzimouratidis, D. Hatzichristou (Thessaloniki, Greece)

708 Prostate biopsy in middle Europe: Results of a survey about indication, patient preparation and biopsy technique
K.G. Fink, H. Schmid, L. Paras, N.T. Schmeller (Salzburg, Austria; St. Gallen, Switzerland)

709 MRI-guided prostate biopsy in a routine setting: First results in individuals with elevated PSA levels and negative TRUS-biopsy

710 Prostate biopsy directed on the basis of 3-dimensional proton MR spectroscopic imaging findings in patients with prior negative biopsy
R. Schiavina, C. Testa, B. Corti, R. Lodi, E. Brunocilla, S. Concetti, A. Franceschelli, E. Salizzoni, B. Barbiroli, G. Martorana (Bologna, Italy)

711 Comparison of contrast enhanced targeted repeat biopsy in patients with low PSA (2 to 4 ng/ml) and low prostate volume versus 10 core laterally based biopsy strategy
C. Wiunig, J. Poiner, S. Obwexer, R. Meyer-venter, M. Remzi, F. Frauscher, A. Reissigl (Bregenz, Vienna, Innsbruck, Austria)

712 The effect of TRUSG guided prostate biopsy on the uroflowmetry parameters
K. Ozer, K. Bal, F. Sengul, Y. Ozdamar, A. Bolukbası (Izmir, Turkey)

713 Prognosis factors to predict seminal vesicle invasion in patients diagnosed by systematic ten core biopsies
F. Gomez Veiga, A. Barbagelata, S. Pertega, J. Ponce, E. Romero, J. Janeiro, P. Casas, L. Castelo, E. Rosado, M. Gonzalez Martin (La Coruña, Spain)

714 Value of longitudinal total PSA slope in predicting repeat prostate biopsy outcome
O. Celhay, A. De La Taille, L. Salomon, C.C. Abbou, B. Doré, J. Irani (Poitiers, Creteil, France)
715 Risk of non significant prostate cancer in prostate cancer patients diagnosed by an extended prostate needle biopsy procedure and treated by radical prostatectomy

716 Variation of biopsy prostate cancer detection rate among individual investigators

717 Systematic, standardised pathological examination of the prostate in radical cystoprostatectomy specimens raises the detection rate of prostatic carcinoma
E. Fridman, J. Kopolovic, Y. Mor, M. Laufer, J. Ramon (Tel-Hashomer, Israel)

718 Role of antimicrobial treatment in patients with elevated PSA and normal digital rectal examination
V. Serretta, A. Galuffo, A. Catanese, R. Allegro, R. Ascoli, D. Melloni, F. Aragona, C. Pavone, M. Pavone Macaluso (Palermo, Italy)

719 Migration of cancer features in clinically localised prostate cancer treated with radical prostatectomy over a 12 year period
H. Augustin, M. Auprich, P. Stummvoll, K. Lipsky, K. Pummer, P. Petritsch (Graz, Austria)
Thursday, 6 April - EAU Programme

Abstract Session

**Management of high risk and advanced prostate cancer**

Room Concorde 2 Level 4

**Abstract Session 44**

**Chairs:**
- P.D. Abel, Southall (GB)
- C.C. Schulman, Brussels (BE)

*Study for 30 min. Interactive discussion for 60 min.*

720 Serum IL-6 more than 4 pg/ml in prostate cancer (PC) patients is an independent prognostic factor of PC death
F. Pina, G. Figueiredo, N. Lunet, L. Saraiva, P. Silva, F. Cruz, B. Henrique (Matosinhos, Porto, Portugal)

721 PSA doubling time as predictor of objective progression and death in patients with T0-4 N0-2 M0 prostate cancer not suitable for local definitive treatment on watchful waiting (EORTC 30891)
L. Collette, U.E. Studer, P. Whelan, W. Albrecht, J. Casselman, T.M. De Reijke, D. Hauri, W. Loidl, S. Isorna, S.K. Sundaram, M. Debois (Brussels, Oostende, Belgium; Berne, Zurich, Switzerland; Leeds, Wakefield, United Kingdom; Vienna, Linz, Austria; Amsterdam, The Netherlands; Las Palmas, Spain)

722 Comparative analysis of post-treatment biochemical outcomes of localised prostate cancer in a Japanese population: What is the best approach for high-risk patients?

723 PSA and ALP as survival predictors for patients with metastatic prostate cancer
D. Robinson, G. Sandblom, R. Johansson, E. Varenhorst, P.O. Hedlund (Linköping, Uppsala, Umeå, Stockholm, Sweden)

724 What does brachytherapy treat? Histopathological analysis of 49 cases after radical prostatectomy for T1c prostate cancer
S. Arbeláez Arango, F. Aguiló Lúcia, E. Condom Mundó, J. Suarez Novo, N. Camps, N. Serrallach Mila (Barcelona, Spain)

725 Poor overall survival in men treated with definitive radiotherapy without evidence of disease relapse – are we treating too many men with radiotherapy?
I. Stikarovska, P. Perrotte, F. Saad, M. Mccormack, P.I. Karakiewicz (Montreal, Canada)

726 Non-metastatic hormone-refractory prostate cancer (HRPC): Is any place for conformal radiotherapy in management?
P. Milecki, P. Milecki, P. Martenka, Z. Kwias, A. Antczak (Poznan, Poland)

727 Metastatic disease rates after radical prostatectomy and radiotherapy in screen-detected prostate cancer
S. Roemeling, M.J. Roobol, C. Gosselaar, C.G. Franken-Raab, T.H. Van Der Kwast, F.H. Schröder (Rotterdam, The Netherlands; Toronto, Canada)

728 Radical retropubic prostatectomy versus external beam radiotherapy for localised prostate cancer: An interim report of a multicentre, prospective, phase III randomised study
729 Impact of pathological review of radical prostatectomy specimens on prognosis and predicted benefit from immediate post-operative irradiation for high risk patients (EORTC 22911)
T. Van Der Kwast, M. Bolla, H. Van Poppel, K. Vekemans, P. Van Cangh, F. Schroder, T. De Reijke, L. Da Pozzo, J. Bosset, L. Collette (Toronto, Canada; Grenoble, Besancon, France; Leuven, Hasselt, Brussels, Belgium; Rotterdam, Amsterdam, The Netherlands; Milan, Italy)

730 Morbidity after long-term androgen deprivation – a matched pair comparison to radical prostatectomy and external beam irradiation
S. Madersbacher, A. Henning, G. Struhal, A. Ponholzer (Vienna, Austria)

731 Effect of zoledronic acid on bone metabolism in prostate cancer (T3NxMo) patients on the androgen deprivation
Y. Alaev, A. Vinarov, Y. Demidko, E. Bezrukov, D. Butnaru (Moscow, Russia)

732 Percutaneous nephrostomy insertion for patients with ureteric obstruction caused by prostate cancer
J. Nariculam, D. Murphy, N. Sellars, S. Gwyther, M. Swinn (Redhill, United Kingdom)

733 To do or not to do: Nephrostomy in obstructive malignant uropathy. Does hormone status matter and can we predict who may benefit?
M. Harris, M. Speakman (Taunton, United Kingdom)

734 Does perineural invasion result in early bone metastases in prostate cancer?
R. Thurairaja, R. Persad, J. McFarlane, R. Iles, A. Bahl (Bristol, Bath, London, United Kingdom)
Thursday, 6 April - EAU Programme

Abstract Session

15:45 - 17:15 Prostate cancer: Staging/Imaging

Room Concorde 3 Level 4

Poster Session 45

Chairs: A. De La Taille, Creteil (FR)
M. Graefen, Hamburg (DE)

Study for 30 min. Interactive discussion for 60 min.

735 Staging of unilateral clinical T3a prostate cancer: Digital rectal examination or transrectal ultrasound?

736 Transrectal ultrasound in preoperative staging of prostate cancer – a single-centre study in 300 patients
A. Bannowsky, D. Osmnov, B. Wefer, S.H. Stübinger, S. Hautmann, K. Bothe, C.M. Naumann, U. Mehnert,
P.M. Braun, K-P. Jünemann (Kiel, Germany)

737 A comparison of prostate cancer staging performance of gray-scale transrectal ultrasound with T2-weighted
3 tesla MRI using a body array and endorectal coil
S. Heijmink, J. Fütterer, H. Van Moerkerk, H. Langenhuijsen, C. Hulsbergen-V.D. Kaa, B. Knipscheer, F. Witjes,
J. Barentsz (Nijmegen, The Netherlands)

738 Diagnostic accuracy of magnetic resonance imaging with endorectal coil (ER-MRI) in staging early prostate
cancer (EPC) before radical prostatectomy (RP)
A.B. Porcaro, F. Migliorini, C. Monaco, M. Balzarro, S. Montemezzi, A. Borsato, G. Gortenuti, R. Pianon,
M. Longo, C. Ghimenton, M. Romano, L. Comunale (Verona, Italy)

739 Is there a role for magnetic resonance imaging (MRI) in the management of T1c carcinoma prostate?
H. Qazi, R. Manikandan, J. Philip, R. Mistry, G. Lamb, P. Cornford, A. Woolfenden, K. Parsons (Liverpool, United
Kingdom)

740 Wash-in rate on the basis of dynamic contrast-enhanced MR imaging: Usefulness for prostate cancer
detection and localisation
Korea)

741 11C-choline PET/TC for tumour localisation of primary prostate cancer: Comparison with 3-dimensional
proton MR spectroscopic imaging using radical prostatectomy specimen as standard of reference
R. Schiavina, M. Farsad, C. Testa, A. Bertacchi, F. Manferrari, M. Garofalo, B. Barbiroli, R. Lodi,
A. D’errico-grigioni, G. Martorana (Bologna, Italy)

742 11C-choline PET and PET/CT in patients with suspected prostate cancer - is there a clinical relevance?
M. Seitz, B. Scher, C. Gratzke, B. Schlenker, O. Reich, C. Stief (Munich, Germany)

743 Prostate carcinoma: Sentinel-lymph-node mapping by 3D-fusion-scintigraphy combined with intra-operative
gamma-probing increases sensitivity in detecting lymph node metastases
D. Schilling, R. Maldonado, I. Hund, B. Amend, G. Gakis, R. Bares, A. Stenzl, S. Corvin (Tübingen, Germany)
Sentinel node technique and lymphatic drainage in prostate cancer: Results of a study on 110 patients

Comparison of 18-fluor cholin PET CT and laparoscopic radioisotope-guided sentinel lymph node dissection for detection of pelvic lymph node metastases in patients with clinically localised prostate cancer
G. Janetschek, A. Häcker, S. Jeschke, S. Ziegerhofer, S. Sega, K. Leeb, W. Langsteger (Linz, Austria; Mannheim, Germany)

Detection of sentinel lymph nodes in prostate cancer patients
I. Rusakov, B. Alekseev, K. Nyushko, G. Frank, E. Belova, N. Vorobyev, V. Polyakov, A. Kalpinskiy (Moscow, Russia)

Preliminary results of the radiofrequency ultrasonic signal processing in prostate cancer detection
A. Bertaccini, A. Franceschelli, E. Brunocilla, F. Manferrari, R. Schiavina, D. Marchiori, S. Granchi, E. Biagi, L. Masotti, G. Martorana (Bologna, Florence, Italy)

Tissue resonance interaction method (TRIMprobtm) for non invasive diagnosis of prostate cancer: A multicentre clinical evaluation

Using prostate-specific antigen (PSA) and amino-terminal propeptide of type 1 procollagen (P1NP) with axial skeletal magnetic resonance imaging (MRI) enhances prediction and detection of early bone metastases in prostate cancer
R. Thurairaja, J. Mcfarlane, R. Greenwood, R. Iles, R. Persad (Bristol, Bath, London, United Kingdom)
Initial treatment response and sexual function: Two keys to understanding and managing of LUTS/BPH

**Chair:** C.G. Roehrborn, Dallas (US)

**Introduction**
C.G. Roehrborn, Dallas (US)

**Sexuality in BPH patients: Why and how to evaluate it?**
R.C. Rosen, Piscataway (US)

**Baseline characteristics of the BPH patients: Is it possible to define clear cut offs?**
C.G. Roehrborn, Dallas (US)

**Initial response to the medical treatment: A pragmatic approach of the BPH management**
M. Emberton, London (GB)

**Conclusion**
C.G. Roehrborn, Dallas (US)

**Aims and objectives**
Lower urinary tract symptoms (LUTS) associated with BPH is an increasingly prevalent condition in ageing men, which significantly affects their daily life and particularly their sexual function. Although BPH is not a life-threatening condition, some men with LUTS have a progressive disease that is defined mainly by a deterioration in symptoms, and in rare cases by acute urinary retention and/or BPH-related surgery. Identification of these patients who are at risk of unfavourable outcomes is important to optimise their management. Beside the baseline variables, such as severe LUTS, high post-void residual volume, enlarged prostate and high prostate-specific antigen, there is increasing evidence that treatment response is also a crucial predictor of serious outcomes. Furthermore, sexuality is an important aspect of quality of life in the ageing male. As there is a link between LUTS severity and sexual dysfunction and because treatment options for BPH management have different impacts on sexuality, the sexual dimension has to be taken into account when considering a patient’s expectations and choice of treatment.
Aims and objectives
In this symposium we will consider strategies to optimise our management of overactive bladder (OAB), particularly with respect to older patients, who constitute a large proportion of patients with OAB. We will review key issues affecting the management of OAB in older patients, and discuss how to refine OAB treatment to achieve the best outcomes in this patient group. The symposium will also include an overview of the latest clinical data on darifenacin, a muscarinic M3 selective receptor antagonist developed for the treatment of OAB.
Symposium

The evolution of patient treatment: Beyond ED efficacy

Room Bordeaux Level 3

17:30 - 19:00

Chair: I. Eardley, Leeds (GB)

Welcome and opening remarks
I. Eardley, Leeds (GB)

A comparative trial of sildenafil citrate and tadalafil: Efficacy, preference and reasons for preference
I. Eardley, Leeds (GB)

The reconditioning endothelium concept: A step forward in treatment of erectile dysfunction with PDE5 inhibitors
P. Montorsi, Milan (IT)

PDE5 inhibitor dosing regimens for the treatment of ED: Review of the data
W. Hellstrom, New Orleans (US)

BPH: The rationale for treatment with PDE5 inhibitors
M.P. O’Leary, Boston (US)

Panel discussion

Questions and closing remarks
I. Eardley, Leeds (GB)

Aims and objectives
The Lilly ICOS Symposium at the EAU 2006 is entitled “The evolution of patient treatment: beyond ED efficacy”. The symposium faculty looks forward to updating health care providers with the current efficacy and safety data on the use of tadalafil in the treatment of erectile dysfunction (ED) both on demand and chronically. This update will include results from the first head-to-head study comparing efficacy, safety, and patient preference between phosphodiesterase 5 (PDE5) inhibitors. Additionally, there is a growing body of evidence that PDE5 inhibitors may have therapeutic benefits beyond ED. The symposium will address the potential use of PDE5 inhibitors in reconditioning the endothelium, and in the treatment of lower urinary tract symptoms secondary to benign prostatic hyperplasia (BPH).
Symposium

Facing the current challenges in BPH

Room Concorde 2 Level 4

17:30 - 19:00

Chair: P. Teillac, Paris (FR)

Introduction
P. Teillac, Paris (FR)

Current and future clinical practice in Europe - what is really happening?
B. Djavan, Vienna (AT)

What are the views of patients and urologists on BPH and its management?
R. Harkaway, Moorestown (US)

What are the data on BPH treatment from everyday practice?
F. Desgrandchamps, Paris (FR)

How do new data from clinical trials allow us to optimise the assessment and treatment of BPH patients?
V. Mirone, Naples (IT)

Discussion

Conclusion
P. Teillac, Paris (FR)

Aims and objectives

Published data on the consequences and complications of the disease BPH has changed so that BPH is now considered to be a progressive disease. This new understanding has been reflected in the latest edition of the EAU BPH guidelines and this symposium will discuss how this new perspective has altered real-life clinical practice. The main focus of the symposium will be to present the latest data in BPH, how the concept of the disease has evolved and how this may impact on management. A key theme for discussion will be patient preference; new evidence will be presented including attitudes to treatment and which treatment for which patient. Discussion will be included on how this latest data impacts on critical assessments and treatment recommendations.
**Symposium**

**Ablatherm-HIFU for prostate cancer: A 10-year European experience**

**Room Havana Level 3**

**Chair:** K. Miller, Berlin (DE)

**Introduction**
K. Miller, Berlin (DE)

**High intensity focused ultrasound - physical principles and future promise**
G. Ter Haar, Sutton (GB)

**Efficacy results and safety of high intensity focused ultrasound for the treatment of localised prostate cancer: 10 Years experience**
S. Thüroff, Munich (DE)

**Salvage high intensity focused ultrasound for prostate cancer local relapse after radiation beam therapy**
F. J. Murat, Lyon (FR)

**Open questions on the role of HIFU as a low side effects option in the treatment of localised prostate cancer: “A medical oncologist point of view”**
U. Tirelli, Aviano (IT)

**Conclusion**
K. Miller, Berlin (DE)

**Aims and objectives**

Mini invasive techniques are increasingly used in modern medicine and are received with enthusiasm by patients. With 10 years European data Ablatherm HIFU is now recognised by urology and considered as a standard routine treatment for localised PCa. As a result, the number of centres with access to Ablatherm HIFU increased at a very fast pace. With in excess of 100 centres in Europe and 10000 patients treated so far Ablatherm HIFU is well positioned to become one of the alternatives of choice for curing PCa while preserving quality of life. During this symposium the physics of Focused Ultrasound will be explained and the first 10 years results will be reported. This symposium will demonstrate why according to physical principle, HIFU is the best solution to combine Efficacy and Accuracy thus preserving quality of life for certain indications. An exhaustive report on 10 years experience with Ablatherm HIFU will give an objective picture of the situation.
Symposium
Optimising the urologist’s use of testosterone

17:30 - 19:00

Room Maillot Level 2

Chair: F. Montorsi, Milan (IT)

Introduction: Are we really using testosterone the way we should?
F. Montorsi, Milan (IT) mail-6-1510

Highlighting EAU official recommendations on LOH
W. Weidner, Giessen (DE) mail-6-1520

Testosterone substitution in LOH: A risk/benefit analysis
A. Allona Almagro, Madrid (ES) mail-6-1530

Testosterone and PDE5 inhibitors: Legitimate companions?
C. Stief, Munich (DE) mail-6-1540

Roadmap to testosterone substitution in clinical practice - a US perspective
A. Dobs, Baltimore (US) mail-6-1550

Conclusion
F. Montorsi, Milan (IT) mail-6-1560

Aims and objectives
Testosterone substitution is an effective form of managing late-onset hypogonadism (LOH). As a therapeutic tool, testosterone is sometimes overlooked as a prime source of treatment. The symposium will discuss the means by which testosterone substitution can assist the urologist’s management of LOH. During the session, a risk/benefit analysis, as well as recently published recommendations will be reviewed, offering a strong basis for the optimal standard of care. The use of testosterone substitution will also be discussed in combination with PDE5-inhibitors and erectile dysfunction. Furthermore, information on new treatment options will be explored and experts in the field will discuss their own experience in clinical practice with testosterone substitution.
Symposium

Urgency in OAB: Patient outcomes or clinical outcomes?

Chair: F. Haab, Paris (FR)

17:30 - 19:00

Introduction
F. Haab, Paris (FR)  

Putting patient or physician requirements first?
M. Espuna Pons, Barcelona (ES)  

Review of new evidence - a clinical perspective
D. Robinson, London (GB)  

Review of real-life evidence - a more relevant perspective?
D.J.M.K. De Ridder, Leuven (BE)  

Panel discussion

Conclusion
F. Haab, Paris (FR)  

Aims and objectives
To review what really bothers the OAB patient the most
To review the latest clinical data, focussing on patient outcomes
To define effective patient management for the future

Room Blue Level 2

Sponsored by ASTELLAS
Symposium

Clinical experience of duloxetine in women with stress urinary incontinence (SUI) symptoms

Room Concorde 1 Level 4

Chair: J.R. Shah, London (GB)

Introduction
J.R. Shah, London (GB)  con1-6-1620

Portrait of an SUI patient: Bridging the gap between patient and physicians’ perspectives
S. Hunskaar, Bergen (NO)  con1-6-1630

How well is clinical practice supported by efficacy data?
K.P. Jünemann, Kiel (DE)  con1-6-1640

The use of SNRI in urology: Safety in practice
A. Smith, Manchester (GB)  con1-6-1650

Take home messages
J.R. Shah, London (GB)  con1-6-1660

Aims and objectives
The differential diagnosis of (predominant) stress urinary incontinence (SUI) and urge urinary incontinence (UUI), and the subsequent treatment of SUI in clinical practice remains a challenge. During this symposium, the impact of the different types of UI on patient’s quality of life and how these types of UI can be identified and recognised in clinical practice will be discussed. It will also be reviewed which treatments are effective in women with pure or predominant SUI (according to evidence-based medicine), and how these treatments fit into clinical practice. Finally, the application of serotonin noradrenaline reuptake inhibitors, such as duloxetine, in the treatment of women with pure or predominant SUI symptoms in clinical practice will be addressed from efficacy and safety points of view.
Thursday, 6 April - EAU Programme

19:00 - 19:45 EAU General Assembly

Room Havana Level 3

1 Welcome by the EAU Secretary General
   P. Teillac, Paris (FR)  

2 Approval minutes General Assembly, 16 March 2005, Istanbul, Turkey  

3 General report by the Secretary General
   P. Teillac, Paris (FR)  

4 Report by the EAU Treasurer and Audit Committee
   M.P. Wirth, Dresden (DE)  

5 Specific reports on the EAU Offices by the EAU Executive
   • EAU Foundation for Urological Research  

6 Future congresses
   Presentation of the 22nd EAU Annual Congress in Berlin, 21-24 March 2007  

7 Report by the Secretary General on the EAU Membership & Nomination Office
   • Approval new EAU members
   • Approval new Honorary members  

8 Other items
   P. Teillac, Paris (FR)
Plenary session

07:45 - 11:00 Plenary session 2

Chairs: P-A. Abrahamsson, Malmö (SE)
        F. Hamdy, Sheffield (GB)

07:45 - 08:15 Highlight session 2

Oncology
B. Tombal, Brussels (BE)  eURO-7-0000

Prostate cancer - prostate disease
J.B. Anderson, Sheffield (GB)  eURO-7-0010

Andrology
A. Salonia, Milan (IT)  eURO-7-0020

08:15 - 08:20 Award session 2

Hans Marberger prize for the best European paper published on endoscopy in urology in the year 2005
Supported by an unrestricted educational grant from KARL STORZ GMBH & CO.KG  eURO-7-0030

08:20 - 08:55 Debate The management of bladder cancer in the elderly

Chair: M.P. Wirth, Dresden (DE)  eURO-7-0040

Introduction
M. Brausi, Modena (IT)  eURO-7-0050
P. Whelan, Leeds (GB)  eURO-7-0060

Conclusion  eURO-7-0070

Aims and objectives
Radical cystectomy with urinary diversion and chemotherapy has traditionally been reserved for less elderly patients. There is evidence in the literature that older patients have a poorer outcome after radical cystectomy not because of their age but because of more advanced tumour stages and less aggressive treatment, e.g. adjuvant chemotherapy. While the risks of surgery and anaesthesia remain, modern surgical and perioperative management has considerably facilitated the management of radical cystectomy patients. Of great importance is postoperative pain management and its implications for bowel function. It will be discussed whether today there is still an age limit for radical cystectomy. The importance of comorbidity and its influences on complications and outcome will be another topic. The panellists will also discuss whether patients for whom a cure is surgically possible should be offered this option regardless of age and whether there is an age limit for chemotherapeutic strategies.
State-of-the-art lecture Current status of HIFU and cryotherapy in prostate cancer

Speaker: G. Aus, Göteborg (SE)  
eURO-7-0080

Aims and objectives
The current trend in Europe is for an increasing number of men to be diagnosed with early-stage prostate cancer. Surgery and radiation therapies in any form are the standard options offered to these men when treatment with curative intent is an option. High-intensity focussed ultrasound (HIFU) and cryotherapy have been available for several years but have not yet found widespread clinical use. Both methods have been continuously developed and today’s therapies have little resemblance to those used a decade ago. The aim of the presentation is to present modern HIFU and cryotherapy and to try to evaluate their potential use in everyday clinical practice.

Société Internationale d’Urologie (SIU) lecture CT urography in the evaluation and management of urological malignancies

Speaker: J. Ramon, Ramat-Gan (IL)  
eURO-7-0090

Aims and objectives
CT urography (CTU) is a relatively new non-invasive multi-phase scan of the urinary tract. The multidetector CT (MDCT) scanners that have developed dramatically in recent years have enabled rapid, thin-section imaging with high resolution and multiple reconstruction possibilities. Urologists accept coronal and sagittal 2D- and 3D- reconstructions more easily than conventional axial CT images. CTU images simulate the well-known images of an excretory urography (IVP), but are able to reveal much more information on the renal parenchyma and other abdominal structures. The ability of the multi-phase CTU to differentiate calculi from a blood clot or an enhancing tumour is a major advantage over IVP. In the past several years, CTU has become a primary investigational tool for haematuria and other urological problems. It is being used as a problem-solving test for equivocal results from ultrasound, IVP, conventional CT and cystoscopy examinations. Several imaging protocols for CTU are currently used, and different reconstruction methods are applied. In the 3D volume rendering reconstruction, all tissues excluding the urinary tract (including bones) are deleted and a movie including 360 views of the urinary system is generated. Images that could not be shown by any of the previously used imaging modalities are generated and reveal anatomical information on the structure of the urinary system.

Urological Association of Asia (UAA) lecture Prostate cancer incidence in Korea

Speaker: K.H. Lee, Koyang (KR)  
eURO-7-0100

Aims and objectives
The incidence of prostate cancer in Asia including Korea is much lower than that of Western countries, but it is very rapidly increasing in Korea. The aim of this lecture is to present descriptive epidemiological data of the incidence of prostate cancer and to explore the possible causes of a rapidly rising incidence of prostate cancer in Korea. In addition, this lecture reports on the collective results of a multicentre prospective study in Korea: Cancer detection rates by prostate needle biopsy in accordance with prostate-specific antigen (PSA), number of biopsy cores, age, and the clinical usefulness of % free PSA for reducing unnecessary prostate biopsy in patients with an intermediate PSA level. This research will eventually contribute to early detection of prostate cancer.
09:55 - 10:40  Round table discussion  New approaches in the treatment of overactive bladder

Chair:    P. Abrams, Bristol (GB)

Introduction
Panel:    K-E. Andersson, Lund (SE)
          D. Castro Diaz, Santa Cruz De Tenerife (ES)
          E. Chartier-Kastler, Paris (FR)

Conclusion

Aims and objectives
- To review our knowledge of the Pathogenesis of OAB symptoms: targeting the afferent nerves?
- To differentiate OAB from other conditions such as painful bladder syndrome, in order to effectively target treatment.
- How to choose the autmuscarnic treatment of choice.
- Defining the place of intra vesical therapies such as botulinum toxin
- To understand the role of nerve stimulation and neuromodulation
- To create an algorithm of care in OAB

10:40 - 11:00  State-of-the-art lecture  Testosterone supplementation in the ageing male

Speaker:    C.C. Schulman, Brussels (BE)

Aims and objectives
The various aspects of hormonal supplementation in men will be considered. Potential benefits and risks remain controversial due to a lack of evidence based long-term studies. Special attention will be focused on testosterone and the prostate. On the other hand, the risks of androgen deprivation therapy for prostate cancer will be outlined with specific reference to the increased risk of cardiovascular side effects and mortality.
**Friday, 7 April - EAU Programme**

### Sub-plenary session

**11:00 - 12:00 Sub-plenary session 8**

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<th>Time</th>
<th>Event</th>
<th>Speaker</th>
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<tr>
<td>11:00 - 11:15</td>
<td>Section highlights of the European Society of Female Urology (ESFU)</td>
<td>E. Costantini, Perugia (IT)</td>
<td>252-7-0170</td>
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<tr>
<td>11:15 - 11:30</td>
<td>Section highlights of the European Society of Urological Research (ESUR)</td>
<td>E. Oosterwijk, Nijmegen (NL)</td>
<td>252-7-0180</td>
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<tr>
<td>11:30 - 11:45</td>
<td>Section highlights of the European Society of Transplantation Urology (ESTU)</td>
<td>M. Giessing, Berlin (DE)</td>
<td>252-7-0190</td>
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<tr>
<td>11:45 - 12:00</td>
<td>Section highlights of the European Society of Genito-Urinary Reconstructive Surgeons (ESGURS)</td>
<td>S. Perovic, Belgrade (CS)</td>
<td>252-7-0200</td>
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**Moderator:** U. Jonas, Hanover (DE)

**Room 252 Level 2**
**Sub-plenary session**

**11:00 - 12:00 Sub-plenary session 9**

**eURO Auditorium Level 1**

**Moderator:** F.R. Cruz, Porto (PT)

**11:00 - 11:30 State-of-the-art lecture** *Update on the management of mixed urinary incontinence*

**Speaker:** W. Artibani, Padua (IT)  
*eURO-7-0210*

**11:30 - 12:00 State-of-the-art lecture** *The management of failed surgery for female stress incontinence*

**Speaker:** J.R. Shah, London (GB)  
*eURO-7-0220*

**Aims and objectives**

The majority of females with stress incontinence can expect success rates from minimally invasive surgery of approximately 90%. However, those that fail to benefit from surgery are both distressed and difficult to treat. Once a “tape” is in place, can we repeat this type of surgery if the outcome is not successful? What should we do to investigate our patients when failure or complications have arisen? There is no doubt some form of investigation in patients with failed surgery is clearly necessary. Video-urodynamics form the mainstay of investigation and should be used for those patients with complex symptoms and incontinence in order to judge the best form of treatment. Surgical options are limited for the patient with failed surgery and much depends upon age, mobility, manual dexterity and the patient’s desires. Although each surgeon has his/her own preference when surgery fails, we should be able to develop a framework to help our failed patients that will help to reduce suffering with the opportunity for greatest success.
**Friday, 7 April - EAU Programme**

**Sub-plenary session**

**Sub-plenary session 10**

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<th>Time</th>
<th>Session</th>
<th>Location</th>
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<td>11:00 - 12:00</td>
<td><strong>State-of-the-art lecture</strong> Dose escalation in brachy and radiotherapy for prostate cancer</td>
<td>Room Ternes Level 1</td>
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**Moderator:** A.R. Zlotta, Brussels (BE)

**11:00 - 11:40**

**State-of-the-art lecture**

**Dose escalation in brachy and radiotherapy for prostate cancer**

**Radiotherapy:** D. Dearnaley, Sutton (GB)  
**Brachytherapy:** S. Machtens, Hanover (DE)

**Aims and objectives**

Permanent interstitial brachytherapy by the use of implantable seeds has become a widely accepted therapeutic modality in patients with localised prostate cancer. The application of iodine-125 or palladium-103 seeds has resulted in the most conformal way to irradiate prostate cancer so far available. The long-term outcome in regard to tumour control has been determined by the dose that is delivered to the prostate. As the prescription dose for iodine-125 implants has been limited to 140-145 Gy in the past, most recent investigations have proved a prescription dose of 160 Gy to be more effective in regard to tumour control without increasing therapy-dependent morbidity. Technical advances in seed application ensure a safe and effective application of sources and a good correlation between intra-operative and postoperative dosimetry.

**11:40 - 12:00**

**State-of-the-art lecture**

**Management of stage I testis cancer**

**Speaker:** P. Albers, Kassel (DE)

**Aims and objectives**

During the last 5 years, several important trials including randomised phase III trials have been published concerning the optimal treatment of stage I seminoma and non-seminoma patients. Consecutively, the consensus recommendations regarding diagnosis and treatment of testicular cancer have changed (see updated EAU Guidelines on Testicular Cancer, European Urology, December 2005). In comparison to about 10 years ago, many patients with non-seminoma can now be sufficiently treated with a thorough surveillance strategy. Surgery and chemotherapy remain options for patients at high risk of recurrence or unwilling to undergo surveillance. Comparable changes have been proposed for the treatment of seminoma patients. Most patients will not experience a recurrence with a carefully selected surveillance protocol. This talk will summarise the most important changes in the treatment recommendations for seminoma as well as non-seminoma clinical stage I patients.
## Sub-plenary session

### Sub-plenary session 11

**Moderator:** P. Dobronski, Warsaw (PL)

#### 11:00 - 11:20 State-of-the-art lecture Modern management of priapism

**Speaker:** A. Kadioglu, Istanbul (TR)

**Aims and objectives**

The term “priapism” is named after the Greek god Priapus. Priapism is a pathological condition of penile erection that persists beyond or is unrelated to sexual stimulation. Priapism can be classified as ischaemic or non-ischaemic depending on the status of penile arterial flow. It is a true urological emergency requiring a prompt and accurate diagnosis and treatment. Treatments may have a benefit in relieving the unwanted erection and associated pain, but they have little documented benefit in terms of potency preservation. For this reason, urologists should know how to manage this urgent condition. Eventually, pathophysiology and management of priapism with the current data obtained from basic science and clinical researches will be discussed.

#### 11:20 - 11:40 State-of-the-art lecture Managing erectile dysfunction in the cardiac patient

**Speaker:** P. Montorsi, Milan (IT)

**Aims and objectives**

To evaluate cardiac patients who have erectile dysfunction (ED) and need to be treated with phosphodiesterase 5 (PDE-5) inhibitors. Objectives: Sexual activity carries a modestly increased relative risk of acute coronary infarction in normal subjects and patients with established coronary artery disease (CAD). The risk is confined in the 2 h-interval following sexual intercourse and is greatly reduced by regular exercise. Since ED often coexists with CAD, it is of paramount importance to investigate fully CAD patients with ED, regardless of whether they have or have not had cardiovascular symptoms. The exercise stress test is a useful, readily available and reproducible non-invasive tool to test patient coronary reserve during exercise. According to this, a risk score (low-, intermediate- and high-risk category) is able to stratify those patients who can be treated immediately with PDE-5 inhibitors and those who require additional tests and therapy before the administration of this highly effective class of drugs for ED. The overall cardiovascular safety of PDE-5 inhibitors is well documented.

#### 11:40 - 12:00 State-of-the-art lecture Prevention of erectile dysfunction following radical prostatectomy

**Speaker:** K.P. Jünemann, Kiel (DE)
Friday, 7 April - EAU Programme

Sub-plenary session

Sub-plenary session 12

Room Havana Level 3

Moderator: C. Selli, Pisa (IT)

Debate Is surveillance an option for renal cancer?

Chair: P. Matthews, Cardiff (GB)

Introduction

Pro: M. Jewett, Toronto (CA)

Con: M. Stöckle, Homburg/Saar (DE)

Conclusion

Aims and objectives

The incidence of renal cancer is increasing while the mortality has remained stable. One possible explanation for this is the increasing number of small renal masses (2cms or less) that are being diagnosed using modern more sensitive imaging. It is likely that these masses are renal cancers although they may grow very slowly and cause no harm to the patient. The advent on new minimally invasive technologies such as cryotherapy, RF ablation and HIFU has increased the pressure on clinicians to treat these lesions. Do they all need treating or is there a case for surveillance?

This aim of this session is to explore the arguments for and against conservative non-operative management of the patient with a small renal mass.
**Sub-plenary session**

**Sub-plenary session 13**

**Moderator:** F. Hamdy, Sheffield (GB)

**Seminar Malignant bone disease in prostate cancer**

**Mechanisms of malignant bone disease**
G. Van Der Pluijm, Leiden (NL)  
[mail-7-0330]

**Monitoring the skeleton**
R.E. Coleman, Sheffield (GB)  
[mail-7-0340]

**Current therapies and novel targets**
B. Tombal, Brussels (BE)  
[mail-7-0350]

**Aims and objectives**
1. To explain the importance of increased bone resorption in the pathophysiology of metastatic bone disease from prostate cancer and outline how bone markers can be used to predict the likelihood of skeletal morbidity.
2. To outline the rationale for bisphosphonate therapy in advanced prostate cancer and present an overview of the clinical trial results with bone specific treatments.
3. To describe the effects of prostate cancer treatments on normal bone and outline the appropriate strategies for evaluation and treatment.
**Friday, 7 April - EAU Programme**

**Sub-plenary session**

**11:00 - 12:00** Sub-plenary session 14  
*Room Bordeaux Level 3*

**Moderator:** F.M.J. Debruyne, Nijmegen (NL)

**11:00 - 11:20** State-of-the-art lecture Basic and clinical research in reproductive medicine at Osaka University

*Speaker: A. Okuyama, Osaka (JP)*

**Aims and objectives**

Since 1928 our department has been composed of five basic/clinical research groups: oncology; urodynamics; endourology; kidney transplant and male reproduction/andrology. The department has 30 faculty urologists inclusive of PhD students. In this lecture, I will introduce recent research achievements in reproductive medicine including: Transplantation of spermatogonial stem cells isolated from leukemic mice restored fertility without inducing leukemia (J. Clin. Inv. 2005). Prediction of successful outcome of microdissection TESE in men with idiopathic nonobstructive azoospermia (J. Urol. 2004). Comparative study on evaluation methods for serum free testosterone level for PADAM diagnosis (Int. J. Imp. Res. 2005). Brain proceedings and audio visual sexual stimuli inducing penile erection: A positron emission tomography study (J. Urol. 2006 in press)

**11:20 - 12:00** Drugs in urology: Current controversies Bicalutamide as monotherapy in the management of prostate cancer

**The evidence**

T. Morris (AstraZeneca GB)  
D. Newling (AstraZeneca GB)

**The urologist’s view**

P-A. Abrahamsson, Malmö (SE)  
P. Teillac, Paris (FR)

**Debate: The way forward and questions from the audience**

P-A. Abrahamsson, Malmö (SE)  
T. Morris (AstraZeneca GB)  
D. Newling (AstraZeneca GB)  
P. Teillac, Paris (FR)
Special Session

European HIFU Club

Room 253 Level 2

Chair: W. Artibani, Padua (IT)

Introduction
W. Artibani, Padua (IT)

What the integrated imaging has changed?
S. Thuroff, Munich (DE)

Discussion and questions

Ideas and solutions for preserving patient’s potency and continence after HIFU treatment
W. Wieland, Regensburg (DE)

Discussion and questions

Tips and tricks for treating with HIFU, prostates greater than 35g.
G. Pasticier, Bordeaux (FR), P. Conort, Paris (FR)

Discussion and questions

The learning curve with HIFU technique: What is easy, what is difficult?
S. Brown, Stockport (UK)

Discussion and questions

HIFU history: From the beginning and after 1300 patients in Lyon. Past, present and future
A. Gelet, Lyon (FR)

Discussion and questions

What are the patients asking for? What do we want to tell them?
W. Artibani, Padua (IT)

Discussion and questions

Conclusion
W. Artibani, Padua (IT)

Supported by an unrestricted educational grant from EDAP
Video Session 6

**Chairs:**
I.J. De Jong, Groningen (NL)
P.A. Geavlete, Bucharest (RO)

*All presentations are 14 minutes in length*

**V31**  
Ureteroscopic laser approach in recurrent ureteropelvic junction stenosis  
V. Mirciulescu, P. Geavlete, G. Nita, D. Georgescu (Bucharest, Romania)

**V32**  
One day stay for robotic pyeloplasty  
D. Murphy, S. Khan, B. Challacombe, J. Olsgurgh, P. Dasgupta (London, United Kingdom)

**V33**  
The thulium laser vaporesction of the prostate  
R. Goetschl, N. Schmeller (Salzburg, Austria)

**V34**  
Magnetic resonance image-guided robot for prostate brachytherapy  
M. Muntener, H. Bagga, A. Patriciu, D. Mazilu, D. Petrisor, N. Patel, L. Kavoussi, D. Stoianovici (Baltimore, United States of America)

**V35**  
Retrograde flexible ureteroscopic approach in symptomatic caliceal calculi  
D.R. Multescu, P. Geavlete, G. Nita, D. Georgescu (Bucharest, Romania)

**V36**  
Extending the application of tubeless percutaneous nephrolithotomy (PNL)  
M. Sofer, I. Kaver, J. Ben Chaim, A. Friedman, E. Metlitzky, H. Matzkin (Tel-Aviv, Israel)
Abstract Session

**Kidney transplantation: Basic research**

**Room Blue Level 2**

**Oral Session 10**

*Chairs:*  
J. Burgos Revilla, Madrid (ES)  
G. Nicita, Florence (IT)

All presentations are 7 minutes in length, followed by 2 minutes of discussion

**Overview presentation**  
J. Burgos Revilla, Madrid (ES)

750 **Ischaemic preconditioning of the rat kidney prior to subsequent ischaemia reduces fibrosis and alpha-smooth muscle actin expression after 15 days of reperfusion**  

751 **Effect of simvastatin in apolipoprotein deficient (apo E-/-) mice with surgically induced chronic renal failure**  
O. Ivanovski, D. Szumilak, T. Nguyen-Khoa, N. Mothu, B. Lacour, T. B. Drüeke, Z. A. Massy (Skopje, Macedonia; Paris, Amiens, France)

752 **Regeneration of kidney tissue through the transplantation of embryonic renal cell in rat**  

753 **Role of endothelial cells in solid organ transplantation: Technique and first results from a transgenic mouse model**  
D. Engeler, P. Krebs, B. Bolinger, H. Schmid, B. Ludewig (St. Gallen, Switzerland)

754 **Microchimerism and renal transplantation: Doubt still persists**  
G. Pourmand, B. Nikbin, A. Saraji, A. Mehrsai, S. Moosavi, A.R. Abedi (Tehran, Iran)

755 **Preconditioning in renal transplantation depends on the manipulation of anti-apoptotic proteins**  

756 **The ultrastructure of arteriosclerosis in patients with endstage renal disease**  
D. Rohrmann, G. Schlieper, A. Mahnken, J. Mayer, M. Ketteler, G. Jakse, J. Floege (Aachen, Germany)

757 **A new method for standardised diagnosis following renal transplantation: Contrast enhanced ultrasound**  
M. Giessing, T. Fischer, S. Deger, J. Roigas, A. Wille, S.A. Loening (Berlin, Germany)

**Summary**  
G. Nicita, Florence (IT)
Abstract Session

Prostate cancer: Surgery T3/ advanced disease

Room Bordeaux Level 3

12:15 - 13:45

Oral Session 11

Chairs: G. Ahlgren, Malmö (SE)
        H. Van Poppel, Leuven (BE)

All presentations are 7 minutes in length, followed by 2 minutes of discussion

Overview presentation

H. Van Poppel, Leuven (BE)

758 Is radical prostatectomy a useful method for the clinically localised prostate cancers with Gleason score 8 or greater?

S. Bedir, M. Kilciler, F. Erdemir, Y. O zgok, S. Goktas, A.F. Peker (Ankara, Turkey)

759 Radical prostatectomy after neo-adjuvant hormonal therapy until PSA-nadir in initially unresectable prostate cancer

M. Hack, U. Zwer gel, F. Becker, C. Pön icke, J. Lehmann, M. Stöckle (Homburg, Germany)

760 PCa with PSA >20 - is there a chance of cure?

M. Spahn, P. Bader, M. Woehr, D. Frohneberg (Karlsruhe, Germany)

761 Treatment of clinical stage T3 prostate cancer: A surgical disease?


762 Neoadjuvant chemohormonal therapy in poor prognosis localised prostate cancer

A. Zisman, N. Yarom, K. Stav, D. Leibovici, A. Lindner, A. Sella (Ness Ziona, Zeriffin, Israel)

763 Outcome for clinical unilateral T3a prostate cancer: A single-institution experience


764 Prognostic factors for patients with locally advanced prostatic cancer who underwent radical prostatectomy

K. Tomita, Y. Tsurumaki, H. Kume, S. Takahashi, T. Takeuchi, T. Kitamura (Tokyo, Japan)

765 Neo-adjuvant chemohormonal taxane-based therapy before radical prostatectomy (RRP) in high-risk prostate cancer: 4.4 Years follow-up of a phase II trial

T. Prayer-Galetti, P. Sperandio, M. Gardiman, V. De Marco, A. Cisternino, G. Betto, S. Fracalanza, F. Pagano, W. Artibani (Padua, Italy)

Summary

G. Ahlgren, Malmö (SE)
## Abstract Session

**Male infertility**

### Poster Session 46

**Chairs:**
- T.B. Hargreave, Edinburgh (GB)
- V.R. Izard, Le Kremlin Bicêtre (FR)

**Study for 30 min. Interactive discussion for 60 min.**

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<tr>
<th>Abstract Number</th>
<th>Title</th>
<th>Authors</th>
<th>Location</th>
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<tr>
<td>766</td>
<td>Morphometric analysis of the testis in NFAT1 gene knockout mice</td>
<td>W. Costa, H. Pazos, J. Viola, F. Sampaio</td>
<td>Rio de Janeiro, Brazil</td>
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<tr>
<td>767</td>
<td>Immunohistochemical changes and expression of connexin 43 and occludin in rat testis and epididymis after epididymal ligation</td>
<td>B. Turna, K. Ozdedeli, G. Oktem, B. Altay, H. Aktug, B. Semerci, A. Bilir</td>
<td>Izmir, Istanbul, Turkey</td>
</tr>
<tr>
<td>768</td>
<td>The effects of acute epididymoorchitis and ciprofloxacin treatment on testicular histomorphology and sperm parameters in rats</td>
<td>A. Demir, P. Türker, S. Sirvanci, F.F. Önl, A. Findik, S. Arbak, T. Tarcan</td>
<td>Istanbul, Turkey</td>
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<tr>
<td>769</td>
<td>The antidepressant St. John’s Wort (hypericum perforatum) inhibits rat and human vas deferens contractility</td>
<td>V. Altieri, V. Montanaro, R. Capasso, G. Aviello, F. Capasso, G. Napodano, A. Izzo</td>
<td>Naples, Italy</td>
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<tr>
<td>770</td>
<td>Loss of the male gamete y-chromosome during spermatogenesis in men with history of bilateral cryptorchidism</td>
<td>A. Sylakos, D. Giannakis, D. Baltogiannis, N. Giotitsas, I. Miyagawa, N. Sofikitis</td>
<td>Ioannina, Greece; Yonago, Japan</td>
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<tr>
<td>771</td>
<td>Is Inhibin B a predictor before testicular sperm extraction or just a cost factor?</td>
<td>F. Reiher, O. Rau, T. Nelius, T. Lindenmeir, I. Nickel, J. Kleinstein, E.P. Allhoff</td>
<td>Magdeburg, Germany</td>
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<tr>
<td>772</td>
<td>Vibratory ejaculation and home insemination in 136 spinal cord injured men and their partners</td>
<td>J. Sønksen, D. Löchner-Ernst</td>
<td>Herlev, Denmark; Murnau, Germany</td>
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<td>773</td>
<td>Comparison between sonographic findings in the scrotum and hormonal and semen profiles in extreme mountain bikers</td>
<td>L. Pallwein, J. Gradl, L. Nikolai, G. Bartsch, F. Frauscher</td>
<td>Innsbruck, Austria</td>
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<tr>
<td>774</td>
<td>Klinefelter’s syndrome and male fertility with assisted reproduction techniques (ART)</td>
<td>F. Garcia-Belandria, B. Lobel, D. Le Lannou</td>
<td>Rennes, France</td>
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<tr>
<td>775</td>
<td>Chronic prostatitis/chronic pelvic pain syndrome (CP/CPPS) influences acrosome function in spermatozoa</td>
<td>M. Ludwig, T. Diemer, H.C. Schuppe, W.B. Schill, W. Weidner, R. Henkel</td>
<td>Giessen, Germany; Belville, South Africa</td>
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<tr>
<td>776</td>
<td>Measurement of steroid hormone concentrations in peripheral and spermatic blood in infertile patients with non-obstructive azoospermia: A prospective comparative study</td>
<td>L. Sibert, G. Pasquier, N. Rives, B. Mace, C. Pfister, P. Grise</td>
<td>Rouen, France</td>
</tr>
</tbody>
</table>
777  Vas deferens endoscopy (vasoscopy): A new diagnostic tool?  
L. Carmignani, G. Bozzini, F. Gadda, P. Acquati, M. Ferruti, G.M. Colpi, F. Rocco (Milan, Italy)  

778  Effect of alpha-blockers on sperm parameters in healthy adult men  
W. Hellstrom, S.C. Sikka (New Orleans, Louisiana, United States of America)  

779  Chronic post-vasectomy testicular pain – a prospective assessment  
R. Illing, T. Leslie, J. Guillebaud, D. Cranston (London, Oxford, United Kingdom)  

780  Post vasectomy semen analysis: Compliance, outcome and distress symptoms  
M. Mitterberger, N. Leonhartsberger, K. Tosun, H. Strasser, G. Bartsch, G.M. Pinggera (Innsbruck, Austria)
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<th>Poster Session 47</th>
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<tr>
<td><strong>Study for 30 min. Interactive discussion for 60 min.</strong></td>
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</table>
| **781** High-intensity focused ultrasound for the treatment of small renal tumours  
*R. Illing, T. Leslie, J. Kennedy, F. Wu, G. Ter Haar, R. Phillips, A. Protheroe, D. Cranston (London, Oxford, United Kingdom; Chongqing, China)* |
| **782** Percutaneous radiofrequency ablation (PRFA) of small renal tumours under ultrasound (US) in high risk patients: 2 Year follow-up  
*M. Brausi, M. Gavioli, G. De Luca, G. Peracchia, G. Verrini, G. Simonini, M. Viola, F. Ferrari (Carpi, Italy)* |
| **783** Bipolar radiofrequency ablation: A technical advancement in radiofrequency technology  
*A. Häcker, F. Risse, K. Peters, S. Vallo, P. Alken, J. Jenne, M.S. Michel (Mannheim, Heidelberg, Germany)* |
| **784** Percutaneous radiofrequency ablation of small renal tumours – the Cleveland clinic experience  
*J. Kaouk, N. Hegarty, A. Fineli, M. Spaliviero, E. Remer, C. O Malley, I. Gill, A. Novick (Cleveland, United States of America)* |
| **785** Radiofrequency ablation of kidney tumours in surgical risk patients  
*M. Salagierski, M. Salagierski, T. Konecki, M. Sosnowski (Lodz, Poland)* |
| **786** Skipping is still a common problem with radiofrequency ablation of small renal tumours  
*H. Klingler, J. Mauermann, M. Remzi, J. Kettenbach, M. Susani, M. Marberger (Vienna, Austria)* |
| **787** Common features of patients with complications following radiofrequency ablation of renal tumours  
*V. Glentzes, S. Martinis, H. Stathis, P. Aggelidis, I. Poulias (Athens, Greece)* |
| **788** Impact of radiofrequency and cryoablation of small renal tumours on renal function in the solitary kidney and early oncological results  
*N. Hegarty, J. Kaouk, E. Remer, C. O Malley, I. Gill, A. Novick (Cleveland, United States of America)* |
| **789** Percutaneous cryoablation of small kidney tumours under magnetic resonance imaging guidance: Medium term follow up  
*A. Caviezel, F. Schmidlin, C. Iselin (Geneva, Switzerland)* |
| **790** Laparoscopic renal cryoablation (LRC) of small renal masses: Lesson learned after 70 procedures  
*A. Cestari, G. Guazzoni, R. Naspro, T. Maga, V. Dell’acqua, P. Rigatti (Milan, Italy)* |
| **791** Retroperitoneoscopy-assisted cry ablation of small renal tumours: A 21 months follow-up  
*B. Weltzien, R. Ruszat, A. Bachmann, R. Casella, T. Forster, S. Wyler, T. Sulser (Basel, Switzerland)* |
| **792** Surgical management of isolated renal bed recurrence  
*S. Sandhu, V. Khoo, T. Eisen, M. Gore, T. Christmas (London, United Kingdom)* |
793  The role of metastasectomy in the management of renal cancer
S. Ramsey, M. Aitchison (Glasgow, United Kingdom)

794  The role of metastasectomy in renal cell carcinoma
C. Ghysel, S. Joniau, H. Van Poppel (Leuven, Belgium)

795  How should we manage patients with T4 renal tumours?
S. Ramsey, M. Aitchison (Glasgow, United Kingdom)
**Abstract Session**

**Neuro-urolgy: Sensory mechanisms**

**Poster Session 48**

*Chairs:*  
A. Apostolidis, London (GB)  
D.J.M.K. De Ridder, Leuven (BE)

**Study for 30 min. Interactive discussion for 60 min.**

*810*  
**Activation of the ERK signalling pathway in lumbosacral spinal cord neurones of spinal injured rats by bladder reflex activity contributes to detrusor overactivity**  
C. Cruz, S. Mcmahon, F. Cruz (Porto, Portugal; London, United Kingdom)

*796*  
**The essence of urgency: Vanilloid receptor expression in women’s bladders**  
R.J. Millard, L. Liu, I. Kristiana, K.J. Mansfield, K. Vaux, E. Burcher (Sydney, Australia)

*797*  
**The effect of bladder sensory input modulation on urgency: Data from a placebo controlled trial with intravesical resiniferatoxin**  
C. Silva, J. Silva, H. Castro, F. Reis, P. Dinis, A. Avelino, F. Cruz (Porto, Portugal)

*798*  
**The decline of urgency following intradetrusor botulinum neurotoxin type a (BoNT/A) injections for detrusor overactivity (DO): Preliminary results**  
V. Kalsi, A. Apostolidis, G. Gonzales, S. Elneil, P. Dasgupta, C. Fowler (London, United Kingdom)

*799*  
**Intravesical Botulinum A Toxin (Botox™) – does it have a role in the management of interstitial cystitis?**  
A. Davies, R. Chahal, R. Inman, G. Urwin (Otley, Leeds, Sheffield, York, United Kingdom)

*800*  
**Daily intravesical instillation of 1 mg nociceptin/orphanin FQ (N/OFQ) for the control of neurogenic detrusor overactivity - a multicentre, placebo controlled, randomised study**  

*801*  
**The effect of botulinum toxin A on sensations evoked by electrical stimulation and bladder filling sensations**  
G. Karsenty, S. Boy, A. Reitz, P.A. Knapp, B. Schurch (Zurich, Switzerland)

*802*  
**Brain activation in response to pudendal afferent stimulation, bladder afferent stimulation and neuromodulation - an fMRI-study in healthy female subjects**  
S. Boy, J. Svensson, A. Reitz, P.A. Knapp, V. Cândia, R. Kleiser, A. Curt, S. Kollias, B. Schurch (Zurich, Switzerland)

*803*  
**Quantifying urge sensation during routine cystometry using a computerised visual analog scale**  
I. Gruenwald, I. Gertman, Y. Vardi, O. Massarwa (Haifi, Israel)

*804*  
**The effect of tolterodine on sensations evoked by electrical stimulation and bladder filling sensations**  
S. Boy, B. Schurch, G. Mehringer, P.A. Knapp, G. Karsenty, A. Reitz (Zurich, Switzerland)

*805*  
**Sensory recovery after decompression of the pudendal nerve at the urogenital diaphragm: A prospective clinical study**  
S. Hruby, L. Dellon, W. Höttl, J. Ebmer, O. Aszmann (Vienna, Austria; Baltimore, United States of America)
806 Percutaneous radiofrequency sacral rhizotomy in the treatment of neurogenic detrusor overactivity in spinal cord injured patients
R. Ferreira, C.A.L. Dancona, N.R. Netto Jr., V.P. Dantas Filho (Campinas - Sao Paulo, Brazil)

807 Sub-sensory threshold: Effective long term setting in patients with a permanent neuromodulator
K. Sievert, J. Pannek, D. Engeler, M. Horstmann, A.S. Merseburger, L. Hertle, A. Stenzl (Tübingen, Herne, Münster, Germany; St. Gallen, Switzerland)

808 The ice water test in patients with idiopathic detrusor overactivity
S. Al-hayek, N. Gardener, I. Mills, D. Scholfield, P. Abrams (Bristol, Sandwich, United Kingdom)

809 Is urine analysis a prerequisite before conducting an ice water test?
S. De Wachter, T. Van Meel, J.J. Wyndaele (Edegem, Wilrijk, Belgium)
Abstract Session

**Bladder cancer: Diagnosis and staging II**

**Room 251 Level 2**

**Poster Session 49**

*Chairs: P. Jichlinski, Lausanne (CH) G. Lüdecke, Giessen (DE)*

Study for 30 min. Interactive discussion for 60 min.

811 Expression of cyclooxygenase-2 in patients treated with radical cystectomy
S. Shariat, Y. Lotan, R. Ashfaq, Y. Sagalowsky, J.T. Hsieh (Dallas, United States of America)

812 EGFR expression in urothelial carcinoma of the upper urinary tract is associated with disease progression and metaplastic morphology
R. Zigeuner, S. Leibl, G. Hutterer, T. Chromecki, P. Rehak, C. Langner (Graz, Austria)

813 Cox-2 expression in urothelial carcinomas of the upper urinary tract correlates with tumour progression
C. Langner, G. Hutterer, T. Chromecki, P. Rehak, R. Zigeuner (Graz, Austria)

814 Subdivision of stage pT3 in urothelial carcinoma of the renal pelvis facilitates detection of patients at high risk for failure
C. Langner, G. Hutterer, T. Chromecki, P. Rehak, R. Zigeuner (Graz, Austria)

815 The effect of competing mortality on the risk of bladder-cancer recurrence and bladder cancer-specific survival

816 Positive cytology, but negative white light endoscopy: An indication for fluorescence cystoscopy in bladder cancer?
A. Karl, O. Reich, S. Tritschler, R. Knuechel-Clarke, A. Hartmann, C. Stief, D. Zaak (Munich, Aachen, Regensburg, Germany)

817 A novel virtual reality endoscopy simulator for endourological procedures: Development and evaluation
O. Reich, M. Noll, B. Schlenker, C. Gratzke, R. Waidelich, M. Seitz, R. Baumgartner, A. Hofstetter, C. Stief (Munich, Germany)

818 Changing histological pattern of bladder carcinoma in Egypt in the last 20 years: Shift of squamous to transitional types
M. Abdel-Latif, Y. Osman, A. Mosbah, A. Shaaban (Mansoura, Egypt)

819 Loss of heterozygosity (LOH) or fluorescence in-situ hybridization (FISH) analysis compared to routine cytology from voided urine for the detection of bladder cancer
R.T. Strebel, S. Frigerio, B.C. Padberg, D. Lenggenhager, A. Messthaler, M.T. Abdou, H. Moch, D.R. Zimmermann (Zurich, Switzerland)
820 A prospective study to evaluate CT urography for diagnosis of bladder cancer in patients presenting with macroscopic haematuria
B. Turney, N. Cowan (Oxford, United Kingdom)

821 Multidetector CT cystoscopy in the evaluation of bladder tumours
A. Tsili, C. Tsampoulas, D. Giannakis, P. Tzoumis, E. Arkoumani, N. Sofikitis, S. Efremidis (Ioannina, Greece)

822 Urine survivin in non-invasive diagnosis of transitional cell carcinoma of the urinary bladder
M. Pesl, M. Babjuk, V. Soukup, I. Pavlik, J. Dvoracek (Prague, Czech Republic)

823 A prospective controlled comparison of urine cytology and the NMP22 BladderChek assay in the detection of urinary transitional cell carcinoma
S. Srirangam, A Crump, G. Thiruendran, D. Neilson (Blackburn, United Kingdom)

824 Comparison of survivin, telomerase subunits, and cytology for the noninvasive detection of bladder cancer
S. Weikert, F. Christoph, C. Kempkensteffen, M. Schrader, M. Mueller, K. Miller (Berlin, Ludwigshafen, Germany)

825 Prognostic factors of intermediate and high risk superficial bladder cancer: Long term results of a large cohort study
A. Zitella, G. Casetta, A. Greco, D. Pacchioni, G. Bussolati, A. Tizzani (Torino, Italy)
Abstract Session

Diagnostic aspects in female urology

Room 252 Level 2

Poster Session 50

Chairs: B. Bemelmans, Amsterdam (NL)
        F.C. Burkhard, Berne (CH)

Study for 30 min. Interactive discussion for 60 min.

826 Medication use of European women seeking treatment for UI: Findings from the PURE observational study
    C. Chinn, M. Espuna Pons, E. Chartier-Kastler, A. Wagg, G. Samsioe, S. Hunskaar, D. Quail, B. Monz, C. Hampel
    (Surrey, London, United Kingdom; Barcelona, Spain; Paris, France; Lund, Sweden; Bergen, Norway; Ingelheim,
    Mainz, Germany)

827 Characteristics of European women consulting a physician for the first time: Results from the PURE study on
    urinary incontinence
    A. Wagg, B. Monz, D. Quail, M. Espuna Pons, C. Hampel, E. Chartier-Kastler, G. Samsioe, S. Hunskaar, C. Cinn
    (London, Surrey, United Kingdom; Ingelheim, Mainz, Germany; Barcelona, Spain; Paris, France; Lund, Sweden;
    Bergen, Norway)

828 Estimating a preference-based single index from the overactive bladder questionnaire
    Y. Yang, J. Brazier, A. Tsuchiya, T. Young, K. Coyneb (Sheffield, United Kingdom; Maryland, United States of
    America)

829 Usefulness of antibiotic prophylaxis in invasive urodynamics in fertile and in post menopausal female
    subjects
    S. Siracusano, A. Tiberio, M. Simonazzi, F. Facchini, V. Alfano, A. Giannantoni, S. Ciciliato, R. Knez, G. D’aloia,
    M. Bernabei (Trieste, Brescia, Perugia, Italy)

830 Dynamic MR imaging of the pelvic floor: Technique and feasibility
    A.H. Karantanas, G. Daskalopoulos, N. Chondros, N. Goursogiannis, F. Sofras (Heraklion, Greece)

831 Urodynamic characterization of a female population with clinical SUI and concomitant symptoms suggestive
    of bladder outlet obstruction
    A.M. Costa, G.L. Gravina, G. Paradiso Galatioto, P. Ronchi, L. Gualà, C. Vicentini (L’Aquila, Italy)

832 The natural history of female urinary incontinence over 5 years
    S. Madersbacher, C. Wehrberger, C. Temml, A. Ponholzer (Vienna, Austria)

833 P-Mate: A new device allowing women to urinate in standing position. Urodynamic and user’s satisfaction
    assessment
    G. Karsenty, E. Elzayat, M.C. Lemieux, J. Corcos (Montréal, Canada)

834 Comparison of lower urinary tract symptoms reported in voiding diary and its agreement with the physician
    and nurse assessment
    J. Gajewski, J. Puthenparumpil, S. Weerasinghe (Halifax, Canada)
835  Female urinary incontinence in urology and ob&gyn outpatient clinics: Analysis of the risk factors of bother-somness and help seeking behavior
B. Cetinel, O. Demirkesen, T. Tarcan, O. Yalcin, T. Kocak, M. Senocak, I. Itil (Istanbul, Izmir, Turkey)

836  Urethral and bladder neck functional length following bladder neck suspension in female stress urinary incontinence: Tension free vaginal tape (TVT) vs Stamey procedure
D. Basic, J. Stoiljkovic, J. Hadzi Djokic, L. Djurasic, B. Basic (Nis, Belgrade, Serbia and Montenegro)

837  Age-related rhabdosphincter function in female urinary stress incontinence: Assessment of intraurethral ultrasonography
F. Frauscher, L. Pallwein, A. Klauser, J. Gradl, S. Hannes, M. Michael (Innsbruck, Austria)

838  Does the urodynamic evaluation change the treatment decision for uncomplicated female urinary incontinence?

839  Evaluation of pelvic floor reconstructive surgery using tridimensional helical CT
P. Palma, M. Dambros, C. Riccetto, R. De Fraga, R. Maia, N. Rodrigues Netto Jr. (Campinas, Brazil)
Friday, 7 April - EAU Programme

Abstract Session

BPH: New techniques I

Room Havana Level 3

Poster Session 51

Chairs: S. Madersbacher, Vienna (AT)
P. Tenke, Budapest (HU)

Study for 30 min. Interactive discussion for 60 min.

841 Photo selective vaporisation of the prostate (PVP): Functional outcome and adverse events after 285 procedures
R. Ruszat, A. Bachmann, S. Wyler, H.H. Seifert, T. Forster, O. Reich, T. Sulser (Basel, Switzerland)

842 Objective evaluation of rotoresection: A prospective study
S. Soliman, B. Wadie, A. Shehab El-din, A. Ghanem, E.H. Ibrahim (Mansoura, Egypt)

843 8 Year multicentre European pooled analysis of clinical and urodynamic outcome and retreatment rates of high energy transurethral microwave thermotherapy:
M. Harik, M. Waldert, B. Djavan, C. Seitz, S. Alavi, P. Dobronski, V. Ravery, A. Kaisary, S. Marihart, S. Hruby, M. Marberger (Vienna, Austria; Warszaw, Poland; Paris, France; London, United Kingdom)

844 A randomised double blind study comparing transurethral enucleative resection with classical transurethral resection for treatment of BPH
L. Chunxiao, Z. Shaobo, C. Binshen, L. Hulin, X. Yawen, X. Abai, F. Ping (Guangzhou, China)

845 Holmium laser enucleation of the prostate (HoLEP) versus open prostatectomy for prostates >70 gr: 2 Year follow-up
F. Montorsi, R. Naspro, N. Suardi, R. Colombo, A. Salonia, A. Cestari, G. Guazzoni, V. Digirolamo, P. Rigatti (Milan, Italy)

846 Transurethral microwave thermotherapy (TUMT) using the TherMatrx TMx-2000™ for treatment of benign prostatic hyperplasia: Five year follow-up of multicentre randomised pivotal trial
D. Albala, G. Andriole, B. Davis, G. Eure, J. Kabalin, J. Lingeman, J. Nuzarelllo (Durham, North Carolina, St. Louis, Overland Park, Norfolk, Scottsbluff, Indianapolis, Wheaton, United States of America)

847 Outcome of 71 patients with huge prostates >100 mls treated with Green Light PVP
R. Krishnamoorthy, N. Barber, K. Walsh, P. Thompson, G. Muir (London, United Kingdom)

848 Transurethral enucleative resection of prostate for treatment of BPH
L. Chunxiao, X. Abai, Z. Shaobo, L. Hulin, X. Yawen, C. Binshen, F. Ping (Guangzhou, China)

849 Bipolar versus monopolar TURP: A randomised study
C. Terrone, C. Soffone, C. Cracco, M. Poggio, R. Tarabuzzi, I. Morra, M. Cossu, F. Ragni, R.M. Scarpa (Orbassano, Orbassano, Italy)

850 Incidence and prediction of prostate cancer (PSA) after open adenomectomy for benign prostatic hyperplasia (BPH)
B. Tombal, G. De Buyl, A. Feyaerts, R. Opsomer, F.X. Wese, P. Van Cangh (Brussels, Belgium)
851  **Photoselective vaporization of the prostate for benign prostatic hypertrophy: Comparison of short-term treatment outcomes with TURP**

J. Park, S.H. Song, S. Lee, B. Hong, T.Y. Ahn (Seoul, South Korea)

852  **Photo-selective vaporization of the prostate utilizing local anaesthesia for the treatment of symptomatic prostatic obstruction. A report of 150 cases**

C. Arum, P. Romundstad, J. Mjønes (Trondheim, Norway)

853  **Acute urinary retention (AUR) following a trial without catheter (TWOC): Is a second TWOC worthwhile?**

O. Celhay, J. Irani, B. Merlet, F. Ouaki, C. Pirès, B. Doré (Poitiers, France)

854  **Prostatectomy in octogenarians**

A. Muslumanoglu, A. Tefekli, F. Altunrende, M. Barut, M. Baykal, Y. Berberoglu (Istanbul, Turkey)

855  **Photoselective vaporization of the prostate (PVP) versus transurethral resection of the prostate (TURP)**

Friday, 7 April - EAU Programme

Abstract Session

Prostate cancer: Diagnosis PSA

Room Concorde 1 Level 4

12:15 - 13:45

Poster Session 52

Chairs: P.C. Albertsen, Farmington (US)
        G. Aus, Göteborg (SE)

Study for 30 min. Interactive discussion for 60 min.

856 Extent of PSA contamination in the Spanish section of the European randomised study of screening for prostate cancer (ERSPC)
M. Lujan, A. Paez, J. Angulo, C. Pascual, E. Miravalles, A. Berenguer (Madrid, Spain)

857 Serum prostate-specific antigen is a predictor of the transition zone volume rather than total prostate volume in men with benign prostatic hyperplasia
A. Zlotta, A. Ben Addi, C. Schulman, F. Dehö, A. Saccà, D. Angiolilli, M. Sangalli, P. Rigatti, V. Scattoni, F. Montorsi (Brussels, Belgium; Milan, Italy)

858 Prostate cancer detection rate in patients with low serum prostate specific antigen and normal digital rectal examination in a European referral population

859 Diagnostic yield of a PSA threshold for prostate biopsy of 2.5 ng/ml compared to 4 ng/ml
M. Muntener, U. Kunz, K. Eichler, M. Puhan, D.M. Schmid, P. Jaeger, R.T. Strebel (Zurich, Switzerland)

860 Can PSA patterns be used to identify men with prostate cancer?
D. Connolly, A. Black, T. Nambirajan, L.J. Murray, A. Gavin, P.F. Keane (Belfast, United Kingdom)

861 Finger-prick PSA testing. Do PSA levels in capillary correlate with PSA levels in venous blood?
R. Vaidyanathan, M. Sharma, M. Partridge, D. Cochrane, M. Emberton, O. Karim, I. Walker, I. Davidson (Slough, Rugby, London, United Kingdom)

862 PSAwatch™ - a 10 minute, quantitative PSA assay on stored plasma
R. Vaidyanathan, M. Sharma, M. Partridge, D. Cochrane, M. Emberton, O. Karim, I. Walker, I. Davidson (Slough, Rugby, London, United Kingdom)

863 Detection of prostate cancer using (F/T)PSA/PSA-density ratio
M. Müller, G. Kapanadze, A. Obaje, H.H. Seifert, R. Ackermann (Düsseldorf, Germany)

864 Calculating PSA velocity – the secret of success? Regress!
D. Connolly, A. Black, G. Napolitano, L.J. Murray, A. Gavin, P.F. Keane (Belfast, United Kingdom)

865 PSA velocity and the detection of clinically significant cancers in an early detection setting (ERSPC, Rotterdam)
M.J. Roobol, F.H. Schröder (Rotterdam, The Netherlands)
866 Correlation of PSA-velocity with tumour-stage and Gleason score in a screening population
A.P. Berger, M. Deibl, H. Klocker, H. Steiner, J. Bektic, A.E. Pelzer, N. Leonhartsberger, G. Bartsch, W. Horninger (Innsbruck, Austria)

867 Prostate-specific antigen velocity and prostate-specific antigen slope compared for prostate cancer diagnosis in men with 3 or more PSA measurements
L. Benecchi, M. Potenzoni (Parma, Italy)

868 Is a PSA velocity cut-off of 0.75 ng/ml/year appropriate for all men?
D. Connolly, A. Black, L.J. Murray, A. Gavin, P.F. Keane (Belfast, United Kingdom)

869 The prognostic value of PCA3 gene-based analysis of urine sediments after extended digital rectal examination

870 Specificity of the APTIMA® PCa3 assay for prostate cancer
J. Groskopf, S.M.J. Aubin, I.L. Deras, A. Blase, S. Bodrug, S. Brentano, C. Clark, H. Rittenhouse, M.L. Macairan, L.S. Marks (San Diego, Los Angeles, United States of America)
Abstract Session

**Prostate cancer: Staging**

**Room Concorde 2 Level 4**

**Poster Session 53**

*Chairs:* S. Egawa, Tokyo (JP)
U.E. Studer, Berne (CH)

**Study for 30 min. Interactive discussion for 60 min.**

**871** Are the volume of high-grade prostatic intraepithelial neoplasia (HG PIN) and the number of biopsies with HG PIN predictive for prostate cancer?
A. Govorov, D. Pushkar, J. Kosko, M. Kovylina (Moscow, Russia; Emporia KS, United States of America)

**872** A new PSA sensitive probe to be used for preoperative assessment of extraprostatic extension of tumours
D.R. Hjelme, R. Ellingsen, B. Falch, A. Bjerkøy, D. Østling, O. Aune, E. Paus, H. Wæhre (Trondheim, Oslo, Norway)

**873** Predictors of seminal vesicle invasion before radical prostatectomy
Y. Tsurumaki, K. Tomita, H. Kume, S. Takahashi, T. Takeuchi, T. Kitamura (Tokyo, Japan)

**874** The significance of negative AMACR staining in prostate cancer: Sorting neuroendocrine prostatic cancer in challenging diagnostic cases
E. Fridman, J. Pinthus, M. Laufer, Y. Mor, J. Ramon, J. Kopolovic (Tel-Hashomer, Israel; Hamilton Ontario, Canada)

**875** Pathological and biochemical features of cancers detected in men with PSA levels 1.5 - 4 ng/ml: A multi-institutional European pooled analysis
B. Djavan, B. Rocco, V. Ravery, A. Zlotta, R. Herwig, T. Anagnostou, P. Dobronski, A. Borkowski, L. Boccon Gibod, C. Schulman, M. Marberger (Vienna, Austria; Milan, Italy; Paris, France; Brussels, Belgium; Athens, Greece; Warsaw, Poland)

**876** Histopathological features of prostate cancer treated by radical prostatectomy in the PSA era
C. Terrone, S. Grande, E. Bollito, M. Papotti, R. Tarabuzzi, M. Poggio, C. Cracco, C. Scoffone, F. Porpiglia, S. Guercio, M. Bellina, R.M. Scarpa (Orbassano, Rivoli, Italy)

**877** Is lymph node density a prognostic factor?
D. Echtle, E. Mueller, D. Frohneberg (Essen, Karlsruhe, Germany)

**878** Should we replace the Gleason score with the amount of high-grade cancer?
A.N. Vis, S. Roemeling, R. Kranse, F.H. Schröder, T.H. Van Der Kwast (Rotterdam, The Netherlands; Toronto, Canada)

**879** The prognostic significance of tumour angiogenesis and matrix metalloproteinase expression in prostate cancer after radical prostatectomy: A multivariate analysis study
M. Abdel-Khalek, M. Abdel-Hamid, E. Ibrahim (El-Mansoura, Egypt)

**880** Up-regulation of hypoxia-inducible factor 1 alpha (HIF-1α) is an early event in prostate cancer development
C. Pipinikas, S. Nair, R. Kirby, N. Carter, C. Fenske (London, United Kingdom)
881   PSA-velocity depends on pathologic stage and Gleason score even after biochemical failure after radical prostatectomy
    A.P. Berger, M. Deibl, H. Klocker, H. Steiner, A. Tewari, J. Bektic, A.E. Pelzer, N. Leonhartsberger, A. Lunacek,
    G. Bartsch, W. Horninger (Innsbruck, Austria; New York, United States of America)

882   Atheromatous disease, and latent prostate cancer observations on autopsy study material
    K. Stamatiou, E. Agapitos, G. Dilemnia, I. Heretis, V. Papadimitriou, F. Sofras (Peiraias, Athens, Heraklion,
    Greece)

883   Ability of serum markers to detect bone metastases in patients with prostate cancer
    Fernández (Sevilla, Spain)

884   Detection of bone metastases in prostate cancer by 18-F sodium fluoride PET
    Netherlands)

885   Detection of prostate cancer (PCa) bone metastases using MRI of the axial-skeleton (as-MRI): Efficiency and
    cost/benefit ratio over Tc-99m bone scan
    B. Tombal, A. Stainier, P.J. Van Cangh, F. Jamart, B. Vande Bergh, F. Lecouvet (Brussels, Belgium)
Abstract Session

Urogenital trauma

Poster Session 54

Chairs:
J.L. Descotes, Grenoble (FR)
F. Schmidlin, Chêne-Bougeries (CH)

Study for 30 min. Interactive discussion for 60 min.

886 A comprehensive renal injury concept based upon impact tests on porcine kidneys and a validated (fresh human cadaver) finite element model of the human abdomen
F. Schmidlin, J. Snedeker, P. Niederer, M. Farshad, P. Iazzio (Geneva, Zurich, Switzerland; Minneapolis, United States of America)

887 Renal trauma: A ten-year experience in the diagnosis and treatment of renal injuries
A. Lekas, I. Fokitis, G. Lefakis, V. Charalampidis, S. Tsalavoutas, S. Koritsiadis (Piraeus, Greece)

888 Features and outcomes of patients with grade 4 renal injury
S. Shariat, G. Dhami, K. Stage (Dallas, United States of America)

889 Traumatic dissection of the renal pedicle. Modalities of management in adults and children
J. Long, A. Manel, J. Descotes, B. Boillot, C. Sengel, J. Rambeaud (Grenoble, France)

890 Selective and super selective embolization as a minimally invasive management of active renovascular bleeding in high grade renal injuries- experience in 13 patients
H. Khairy Salem, A. Nassef (Cairo, Egypt)

891 Long-term results of internal urethrotomy for recurrence stenosis after urethroplasty for post-traumatic urethral stricture
T. Culty, L. Boccon-Gibod (Paris, France)

892 End to end anastomosis vs. patch urethroplasty in the treatment of incomplete bulbar urethral strictures
M. Tunc, O. Gokce, O. Acar, O. Sanli, N. Aras, C. Ozsoy (Istanbul, Turkey)

893 Anastomotic urethroplasty for post-traumatic urethral strictures: Previous urethral manipulations have a negative impact on the final outcome
T. Culty, L. Boccon-Gibod (Paris, France)

894 The use of tubularized penile circular fasciocutaneous flap in the reconstruction of urethral injuries
P. Tsakiris, K. Sournas, V. Moutzouris, A. Arhontakis (Athens, Greece)

895 Can we prevent the recurrence of urethral strictures with direct visual dilatation of urethra?
M. Tunc, O. Gokce, O. Acar, O. Sanli, N. Aras, C. Ozsoy (Istanbul, Turkey)

896 Endoscopic and surgical realignment for post-traumatic rupture of the posterior urethra
M.M. Gargouri, Y. Nouira, N. El Fekih, F. Ben Jeddou, K. Belhadj, M. Chtourou, A. Horchani (Tunis, Tunisia)

897 When perform surgical exploration in patients with “presumed penile fracture”?
A. Cavalcanti, L. Koifman, L. Favorito, C. Manes, D. Rachid Filho, J. Carvalho, P. Rabelo (Rio de Janeiro, Brazil)
898  Accuracy of ultrasonography in diagnosis of testicular rupture after testicular trauma
J. El Ammari, G. Guichard, H. Wallerand, E. Chabannes, S. Bernardini, H. Bittard, F. Kleinclauss (Besançon, France)

899  Genital burns in pediatric patients
A. Cavalcanti, R. Reis, A. Beatriz, M.L. Neurauper, I. Afcer, L. Favorito (Rio de Janeiro, Brazil)

900  Management of penile urethral lesion in penile blunt trauma
L. Favorito, A. Cavalcante, R. Krambeck, A. Alexandre (Rio de Janeiro, Brazil)
Friday, 7 April - EAU Programme

Abstract Session

Laparoscopic surgery: Difficult cases

14:00 - 15:30

Video Session 7

Chairs: H.P. Beerlage, Amsterdam (NL)
R.J.A. van Moorselaar, Amsterdam (NL)

All presentations are 14 minutes in length

V37 Laparoscopic radical prostatectomy: Technical aspects and pitfalls during the apical dissection
G. Fournier, A. Valeri, A. Rammal, V. Joulin, J. Donohue, L. Cormier, X. Taccoen, C. Deruelle, L. Doucet, A. Volant (Brest, Nancy, France)

V38 Bladder neck dissection during laparoscopic radical prostatectomy: Difficult cases
G. Fournier, A. Valeri, A. Rammal, V. Joulin, J. Donohue, L. Cormier, X. Taccoen, C. Deruelle, L. Doucet, A. Volant (Brest, Nancy, France)

V39 Dealing with a difficult urethrovessical anastomosis in laparoscopic radical prostatectomy

V40 Laparoscopic repair of an inferior vena cava injury during a right partial nephrectomy
F. Secin, Z. Dotan, B. Shayegan, S. Olgac, B. Guillonneau, K. Touijer (New York, United States of America)

V41 Technical difficulties in retroperitoneoscopic radical nephrectomy. Is tumour location important?
M. Lucan, V. Lucan, F. Elec, G. Iacob, C. Burghhelea, A. Barbos (Cluj-Napoca, Romania)

V42 Laparoscopic repair of rectourethral fistulae
R. Sotelo, A.J. García, M. Mariano, G. Trujillo, E. Rodriguez, R. De Andrade, L. Sánchez, C. Andrade, A. Finelli (Caracas, Venezuela; Porto Alegre, Brazil; Toronto, Canada)
# Abstract Session

**Prostatitis and prostatodynia**

**Room Blue Level 2**

## Oral Session 12

*Chairs:* W. Aulitzky, Vienna (AT)  
W. Weidner, Giessen (DE)

**All presentations are 7 minutes in length, followed by 2 minutes of discussion**

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<thead>
<tr>
<th>Session</th>
<th>Title</th>
<th>Authors</th>
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<tr>
<td>901</td>
<td>Heat/burning sensation induced by topical application of capsaicin on the perineal cutaneous area: A new approach in the diagnosis and treatment of chronic prostatitics/chronic pelvic pain syndrome (CP/CPPS)?</td>
<td>D. Turini, M. Lazzeri, P. Beneforti, M. Spinelli, S. Malaguti (Florence, Milan, Italy)</td>
</tr>
<tr>
<td>903</td>
<td>MnSOD and IL-10 polymorphisms in chronic pelvic pain syndrome patients</td>
<td>S. Arisan, E.D. Buyuktuncer, M.C. Kiremit, T. Caskurlu, N. Palavan Unsal, E. Ergenekon (Istanbul, Turkey)</td>
</tr>
<tr>
<td>904</td>
<td>Changes in some components of the kallikrein-kinin system in the ejaculate of patients with chronic pelvic pain syndrome</td>
<td>M. Kogan, A. Shangichev, Z. Mikashinovich, E. Chernogubova, I. Belousov, A. Afoko (Rostov on Don, Russia)</td>
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<tr>
<td>905</td>
<td>Transrectal colour Doppler-ultrasonographical imaging of prostate</td>
<td>M. Kogan, I. Belousov, A. Shangichev, A. Afoko, A. Paleniy (Rostov on Don, Russia)</td>
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<td>906</td>
<td>Serum and prostatic tissue concentrations of moxifloxacin (400 mg) after a single intravenous infusion in patients with benign prostatic hyperplasia undergoing transurethral resection of the prostate</td>
<td>F. Wagenlehner, J. Lunz, F. Kees, W. Wieland, K.G. Naber (Straubing, Regensburg, Germany)</td>
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<tr>
<td>907</td>
<td>Antiviral treatment with valacyclovir: Does it improve symptoms of chronic pelvic pain syndrome?</td>
<td>M. Huwyler, E. Dobry, H. Danuser (Lucerne, Switzerland)</td>
</tr>
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<td>908</td>
<td>Intraprostatic injection of botulinum toxin A for men with chronic pelvic pain syndrome</td>
<td>D.S. Park, S.M. Shin (Sungnam, Seoul, South Korea)</td>
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</tbody>
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**Summary**

W. Aulitzky, Vienna (AT)
Abstract Session

14:00 - 15:30 Prostate cancer: Hormonal treatment

Room Bordeaux Level 3

Oral Session 13
Chairs: W. Albrecht, Vienna (AT)
L. Klotz, Toronto (CA)

All presentations are 7 minutes in length, followed by 2 minutes of discussion

Overview presentation
L. Klotz, Toronto (CA) bord-7-0840

909 Endocrine treatment and LUTS in men with prostate cancer
L. Klarskov, S. Mommsen, P. Klarskov, N. Svoldgaard (Herlev, Middelfart, Odense, Denmark) bord-7-0850

910 Improving patient choice in the treatment of prostate cancer – self-injection of leuprolelin acetate (Prostap® SR)
B. Patel, R. Hamm, T. Whittlestone, R. Persad (Bristol, Exeter, United Kingdom) bord-7-0860

911 Natural progression in men treated with hormonal therapy after radical prostatectomy failure
C. Porter, A. Briganti, K.F. Chun, K. Kodama, R. Gibbons, R.J. Correa, P. Perrotte, P.I. Karakiewicz (Montreal, Canada; Seattle, United States of America) bord-7-0870

912 Bicalutamide monotherapy in high-grade prostatic intraepithelial neoplasia
A.V. Bono, A.V. Bono, R. Montironi, L. Mazzucchelli, I. Ferrari (Bugugguate, Varese, Ancona, Italy) bord-7-0880

913 Adjuvant therapy with bicalutamide 150 mg versus standard care alone: Third analysis results from trial 24 of the early prostate cancer programme
M. Wirth, C. Tyrrell, K. Delaere, M. Sanchez-Chapado, J. Ramon, D. Wallace, J. Hetherington, F. Pina, C. Heyns, T. Borchers, S. Navani, J. Armstrong (Dresden, Germany; Plymouth, Birmingham, Hull, Macclesfield, United Kingdom; Heerlen, The Netherlands; Madrid, Spain; Tel-Hashomer, Israel; Porto, Portugal; Cape Town, South Africa) bord-7-0890

914 Efficacy and tolerability of bicalutamide in early non-metastatic prostate cancer: Latest findings from the Scandinavian Prostatic Cancer Group Study No 6 (SPCG-6) of the early prostate cancer programme
P. Iversen, J. Johansson, P. Lodding, O. Lukkarinen, P.I. Lundmo, P. Klarskov, T. Tammela, I. Tasdemir, J. Armstrong, T. Morris (Copenhagen, Herlev, Denmark; Örebro, Goteborg, Sweden; Oulu, Tampere, Finland; Trondheim, Stavanger, Norway; Macclesfield, United Kingdom) bord-7-0900

915 A one-year, multicentre, randomised study of degarelix, a gonadatrophin–releasing hormone (GnRH) receptor blocker, in prostate cancer patients
H. Van Poppel, J. De La Rosette, B. Persson, J.K. Jensen, T.K. Olesen (Leuven, Belgium; Amsterdam, The Netherlands; Copenhagen, Denmark) bord-7-0910
Efficacy and safety of teverelix, a new gonadotrophin releasing hormone antagonist in patients with advanced prostate cancer. Results from a phase 2 multicentre, open-label, pilot study investigating an initial intramuscular injection.

C. Maclean, A. Ulys, F. Jankevičius, D. Kaniušas, J. Drewe, F. Larsen (Edinburgh, United Kingdom; Vilnius, Kaunas, Lithuania; Basel, Switzerland)

Summary

W. Albrecht, Vienna (AT)
Friday, 7 April - EAU Programme

Abstract Session

14:00 - 15:30 Bladder cancer: Diagnosis and staging III

Room Ternes Level 1

Poster Session 55

Chairs: H. Steiner, Innsbruck (AT)
        J.A. Witjes, Nijmegen (NL)

Study for 30 min. Interactive discussion for 60 min.

917 UCyt+/immunocytä in the detection of recurrent urothelial carcinoma: An update on 1,991 analyses
    C. Mian, K. Maier, E. Comploj, M. Lodde, L. Berner, S. Palermo, F. Vittadello, A. Pycha (Bolzano, Italy)

918 Fiberoptic infrared (FT-IR) spectroscopy as a tool for discrimination between normal urothelium and
    transitional carcinoma cells (TCC) of different grade: Pilot study
    S. Kravchick, Y. Raichlin, Y. Kravchenko, D. Ben Dor, A. Katzir, S. Cytron (Ashkelon, Ariel, Tel-Aviv, Israel)

919 Fluorescence in situ hybridization (FISH) for diagnosis of upper urinary tract tumours - a pilot study
    T. Akkad, A. Brunner, I. Verdorfer, T. Mueller, C. Gozzi, G. Bartsch, H. Steiner (Innsbruck, Austria)

920 Survivin expression is associated with bladder cancer presence, stage, progression and mortality
    S. Shariat, R. Ashfaq, A. Sagalowsky, Y. Lotan (Dallas, United States of America)

921 Forced diuresis improves the diagnostic accuracy of 18F-FDG PET in the abdomen and pelvis
    L. Vaucher, M.E. Kamel, S. Schmidt, J. Prior, H.J. Leisinger, A. Bischof Delaloye, J. Patrice (Lausanne,
    Switzerland)

922 Evaluation of five potential tumour markers for urinary bladder cancer – endostatin, midkine, survivin,
    livin and E-FABP
    R. Fiala, D. Stejskal, A. Vidlar, M. Grepl (Olomouc, Czech Republic)

923 Soluble fas is a new sensitive and specific urine marker for bladder cancer presence and staging
    S. Shariat, R. Svatek, Y. Lotan, A. Sagalowsky, R. Casella (Dallas, United States of America; Biel, Switzerland)

924 Genetic signature of the early recurrence of superficial bladder cancer by combining the expression profile
    of 3 genes

925 Multicolour-FISH for the risk-stratification of superficial bladder cancer
    A. Pycha, M. Lodde, E. Comploj, L. Lusuardi, S. Palermo, M. Mian, K. Maier, C. Mian (Bolzano, Italy)

926 RisikoCheck©, an internet-based instrument to identify risk populations for bladder cancer: Experiences of
    two years online risk check in four languages
    G. Lüdecke, W. Weidner (Giessen, Germany)

927 The new CST-2000 flexible cystoscope with slide-on™ Endosheath® System
    E. Mayer, S. Undre, N. Sevdalis, A. Patel (London, United Kingdom)
928 Can we estimate upper tract transitional cell cancer grade based on metachronous or synchronous bladder tumour grade?
A. Beri, Y. Bar Yosef, I. Kaver, H. Matzkin (Tel Aviv, Israel)

929 Evaluation of the diagnostic value of NMP-22 bladder tumour test by means of fluorescence cystoscopy
S. Tritschler, S. Scharf, A. Karl, D. Zaak, C. Stief (Munich, Germany)

930 Cellular autofluorescence imaging for the diagnosis of urothelial carcinoma in urine
P. Eschwège, K. Steenkeste, A. Deniset, S. Lécart, S. Lévéque-Fort, M. Fontaine-Aupart, S. Ferlicot (Le Kremlin Bicêtre, Orsay, France)

931 Multiplex polymerase chain reaction in microsatellite analysis urine sediment cells. A fast and cheap method in diagnosing and monitoring of superficial transitional bladder cell carcinoma
R. Bartoletti, T. Cai, M. Dal Canto, G. Nesi, V. Boddi, M. Piazzini (Florence, Italy)
Friday, 7 April - EAU Programme

Abstract Session

14:00 - 15:30 Kidney tumours: Laparoscopy/ follow up

Room Maillot Level 2

Poster Session 56

Chairs: V. Ficarra, Verona (IT)
H. Klingler, Vienna (AT)

Study for 30 min. Interactive discussion for 60 min.

932 Is there an obvious learning curve effect for laparoscopic nephrectomies performed by newly appointed UK consultant surgeons trained in laparoscopy?
M. Nuttall, N. Barber, R. Hindley, J. Poulsen, P. Rimington, W. Choi (Canterbury, Frimley, Basingstoke, London, Eastbourne, United Kingdom)

933 Complications of laparoscopic partial nephrectomy
E. Barret, S. Lorin, X. Cathelineau, F. Rozet, N. Cathala, A. Mombet, D. Prapotnich, G. Vallancien (Paris, France)

934 The use of tissue glues and/or sealants in laparoscopic nephron-sparing surgery: A European survey
A. Celia, G. Guazzoni, V. Pansadoro, V. Disanto, F. Porpiglia, P. Fornara, C. Abbou, G. Janetschek, N. Soomro, C. Milani, A. Breda, P. Schulam, J. De La Rosette, M. Lagana, G. Breda (Bassano del Grappa (VI), Milan, Rome, Acquaviva Delle Fonti, San Luigi Hospital, Padua, Italy; Halle, Germany; Creteil, France; Linz, Austria; Newcastle, United Kingdom; Los Angeles, United States of America; Amsterdam, The Netherlands)

935 Autologous fibrin glue for haemostasis in laparoscopic partial nephrectomy for renal cell carcinoma
L. Schips, K. Lipsky, O. Dalpiaz, S. Gidaro, P. Petritsch, R. Zigeuner (Graz, Austria)

937 Is there still a role for hand assisted laparoscopic nephrectomy (HAL)?
T. Appanna, A. Martindale, J. Goad, C. Temelcos, A. Clarke, R. Asopa, L. Cleeve, O. Niall (Melbourne, Australia)

938 Interferon alpha 2b as medical selection for nephrectomy in patients with synchronous metastatic renal cell carcinoma: A consecutive study
A. Bex, M. Kerst, H. Mallo, W. Meinhardt, S. Horenblas, G. De Gast (Amsterdam, The Netherlands)

939 Radical nephrectomy and metastatectomy combined with immunotherapy for metastatic renal cell carcinoma
Y.H. Park, C.W. Jeong, S.K. Hong, H. Jeong, C. Kwak, E. Lee, S.E. Lee (Seoul, Gyeonggi, South Korea)

940 With increasing tumour size histopathological features are more aggressive in clear cell RCC, but not in papillary RCC

941 Combination immunochemotherapy as an adjuvant therapy for stage T3 renal cell carcinoma

942 Renal cell carcinoma with venous tumour thrombus: Prognostic significance of the level of the tumour thrombus and of associated metastases on long-term survival
S. Klaver, S. Joniau, H. Goethuys, R. Suy, H. Van Poppel (Leuven, Genk, Belgium)
943 Follow-up after radical nephrectomy-modified protocol based on pathological stage
J. Cherian, S. Madan, S. King, A. Lawson, M. Stower, R. Sundaram, R. Puri (Bradford, Wakefield, York, Harrogate, United Kingdom)

944 The impact of hospital provider volume on the outcome of radical nephrectomy
P. Cathcart, M. Nuttall, M. Emberton (London, United Kingdom)

945 Outcome analysis of 28 cases of Wilm’s tumour in adults
D. Roschin, V. Matveev, M. Volkova, T. Sharoev (Moscow, Russia)

946 Surgical strategies for urological malignancies of the retrocrural area
D. Sahi, C. Ohlmann, E. Özgür, U. Engelmann, A. Heidenreich (Cologne, Germany)
Friday, 7 April - EAU Programme

Abstract Session

14:00 - 15:30 Neuro-urolgy: Neuromodulation, urodynamics and bowel function

Room 242 Level 2

Poster Session 57

Chairs: J.L.H.R. Bosch, Utrecht (NL)
        J.L. Ruiz-Cerdá, Valencia (ES)

Study for 30 min. Interactive discussion for 60 min.

947 Deep brain stimulation in Parkinson’s disease and urodynamic and positron emission computed tomography (PET) changes
C. Seif, B. Wefer, C. Van Der Horst, P. Braun, K.P. Junemann, J. Herzog, P. Weiss Blankenhorn (Kiel, Julich, Germany)

948 Long latency somatosensory evoked potentials: Modifications after percutaneous tibial nerve stimulation
E. Finazzi Agro, F. Petta, C. Pachatz, R. Miano, F. Sciobica, G.A. Marfia (Rome, Italy)

949 Impact of electrostimulation of the periprostatic urethral branch of the pelvic nerves an the pudendal nerve on the membranous urethra in the male rabbit
C. Van Der Horst, C. Seif, C. Naumann, G. Böhler, P. Braun, K. Jünemann (Kiel, Germany)

950 Detrusor contractility test: A reliable patient selection method for sacral neuromodulation
M.P. Bertapelle, M.C. Dalle Ore, G. Bodo, A. Giammò, R. Carone (Torino, Italy)

952 Are there any programming algorithms associated with successful and effective InterStim therapy in patients with urinary voiding dysfunction?
E. Kocjancic, J. Smith, S. Crivellaro, P. Gontero, G. Marchioro, B. Frea (Novara, Italy; Burlington, Massachusetts, United States of America)

953 Long-term clinical efficacy of sacral neuromodulation (SNM) for patients with neurogenic low urinary tract symptoms (LUTS)
G. Lombardi, A. Macchiarella, N. Mondaini, G. del Popolo (Florence, Italy)

954 Simultaneous registration of intraabdominal and intravesical pressures during cystometries in awake rats – effects of outflow obstruction and intravesical PGE2
T. Lee, K.E. Andersson, T. Streng, P. Hedlund (Lund, Sweden)

955 Heart rate variability during urodynamic examination to assess autonomic nervous system function - initial results from a feasibility study
P.A. Knapp, A. Reitz, M. Sax, S. Boy, B. Schurch (Zurich, Switzerland)

956 The outcome of urodynamic findings in patients with tethered cord
A. El-Hefnawy, B. Wadie (Mansoura, Egypt)

957 Clinical and urodynamic abnormalities of patients in different phases after cerebrovascular accidents
A. Abdel Hafez, D. Rohrmann, R. Toepper, J. Noth, G. Jakse (Sohag, Egypt; Aachen, Germany)
Urodynamically demonstrated rectal contraction: Do they represent neuropathy?
A. Abdel Hafez, D. Rohrmann, G. Jakse (Sohag, Egypt; Aachen, Germany)

Guarding response of the bladder and bowel: Are they both aberrant following spinal cord injury?
A.V. Balasubramaniam, E.A.L. Chung, J.B. Woodhouse, M.D. Craggs, S.L. Knight, J.A. Bycroft, A. Gall, F.R.I. Middleton (Stanmore, United Kingdom)

Micturition and defecation: Which act has predominance?
S. De Wachter, J.J. Wyndaele (Wilrijk, Belgium)

Female sexual dysfunction and hormonal status in spinal cord injured (SCI) patients
G. Lombardi, N. Mondaini, A. Cilotti, G. Giubilei, G. Del Popolo (Florence, Italy)
Abstract Session
Paediatrics I

Poster Session 58
Chairs: R. Kocvara, Prague (CZ)
J.M. Nijman, Groningen (NL)

Study for 30 min. Interactive discussion for 60 min.

962 Diagnostic accuracy of colour Doppler sonography of the ureteral jets in children with hydronephrosis: Evolution of a novel concept to evaluate obstruction
J. Bessa Junior, M.C. Chammas, L. Cerri, F.T. Denes, G. Cerri, M. Srougi (Sao Paulo, Brazil)

963 Optimization of the pyeloplasty technology on the base of hydrodynamic analysis
M. Kogan, V. Sizonov, S. Konovalov, V. Antonenko, A. Afoko (Rostov on Don, Russia)

964 Detection of viruses in bladder, renal pelvis urine and kidney biopptates in children with obstruction of upper urinary tract
M. Kogan, U. Naboka, I. Kluka, I. Suchkov, A. Afoko (Rostov on Don, Russia)

965 Isolating viral and bacterial pathogens in biopsy material from kidneys of children with obstructive uropathy
M. Kogan, U. Naboka, I. Kluka, L. Bragina, I. Suchkov (Rostov on Don, Russia)

966 The expression of interleukin-6 and its receptors in the developing rat kidney

967 A shift in presentation and treatment in children with a primary non-refluxing megaureter
R. Beetz, R. Stein, A. Schröder, S. Wölfle, J. Thüroff (Mainz, Germany)

969 A histological study of urethral plate with light and transmission electron microscopy in hypospadias
H.S. Chang, C.H. Park, C.I. Kim, K.S. Kim (Daegu, South Korea)

970 The effect of VEGF on the angiogenic activity after urethral reconstruction using free penile graft: Preliminary results

971 Modified Snodgrass and Mathieu techniques for treatment hypospadias
T. Ali (Nyíregyháza, Hungary)

972 Microsurgical four-layer two overlapping dorsal subcutaneous flaps for urethrocutaneous fistula after hypospadias repair
A.F. Hussein (El-Minia, Egypt)

973 The value of the uroflowmetric parameters and urinary flow patterns of children with hypospadias operation
C. Kaya, E.V. Kucuk, M.I. Ozturk, H. Kanberoglu, M.I. Karaman (Istanbul, Turkey)
974  Uncommon manifestations of ventral urethral duplications
J. Miller, J. Steiß, G. Alzen, W. Weidner (Giessen, Germany)

975  Comparative genomic hybridisation reveals clonal origin of blastemal, epithelial and stromal cells in Wilm’s tumours

976  Laparoscopic nephrectomy for Wilms tumour in children: A new paradigm?
F. Dénes, R. Duarte, C. Lilian, V. Odone Filho, M. Srougi (Sao Paulo, Brazil)
**Friday, 7 April - EAU Programme**

**Abstract Session**

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<td>14:00 - 15:30</td>
<td>Female urology: Which sling?</td>
<td>Room 252 Level 2</td>
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**Poster Session 59**

*Chairs: J. Grall, Dijon (FR)  
D. Pushkar, Moscow (RU)*

*Study for 30 min. Interactive discussion for 60 min.*

977 **Comparison of transobturator and transabdominal tapes for surgical treatment of female stress urinary incontinence**  
H. Sender, J. Green (Toronto, Canada)

978 **Prospective multicentre trial of Monarc Transobturator Sling for stress incontinence: 24 Month functional data**  
D. Deridder, B. Jacquetin, A. Fischer, P. Debodinance, A. Marques Queimadelos, C. Courtieu, M. Cervigni, J. Rassler, A. Rane, S. Herschorn, G. Urwin, W. Goetze, S. Ouellet, M. Schrader, G. Mellier (Leuven, Belgium; Clermont Ferrand, St. Pol Sur Mer, Montpellier, Lyon, France; Ruedesheim Am Rhein, Leipzig, Strausberg, Berlin, Germany; Santiago De Compostela, Spain; Roma, Italy; Townsville, Australia; Toronto, Montreal, Canada; York, United Kingdom)

979 **Audit of clinical outcome of TVT vs. TOT sub urethral sling procedures**  
E. Dickerson, T. Tang, R. Jeavons, G. Urwin, A. Evans (York, United Kingdom)

981 **Transvaginal bone-anchored sling (bas) for treatment of stress urinary incontinence: Intermediate-term follow-up**  
C. Giberti, S. Siracusano, S. Ciciliato, M. Lavagna, P. Cortese (Savona, Trieste, Italy)

982 **Prospective, multicentre, randomised study comparing retropubic and transobturator routes in female stress incontinence cure. Functional outcomes at three months**  
E. David-Montefiore, E. Darai, M. Grisard-Anaf, K. Bonnet, J. Frobert, J. Lienhard (Paris, Lyon, Bourg en Bresse, Sainte Colombe, France)

983 **Periurethral prolene mesh supported vaginal wall sling: New periurethral fibrosis procedure for the treatment of stress urinary incontinence**  
C. Kaya, N. Pirincci, H. Kanberoglu, M. Ozturk, M.I. Karaman (Istanbul, Turkey)

984 **Transvaginal endosonography in the evaluation of tension free vaginal tape (TVT) implantation**  
A. Loch, M. Stöckle, T. Loch (Flensburg, Homburg, Germany)

985 **Sexuality after transobturator vaginal tape for stress urinary incontinence. Results at 14 months of a mailed questionnaire**  
M. Geraud (Compiègne, France)

986 **SPARC-Sling System in stress incontinent women with intrinsic sphincter deficiency: 1-Year follow-up**  
G. Primus (Graz, Austria)

987 **Transobturator tape as a day surgery procedure**  
M. Abdel-Fattah, K. Sivanesan, I. Ramsay (Glasgow, United Kingdom)
Remeex system: A therapeutic option in selected cases of stress urinary incontinence with intrinsic sphincter deficiency (ISD)
J.L. Campos-Fernandes, P. Paparel, A. Leriche, B. Leriche, M. Devonec, A. Ruffion (Pierre Bénite, Lyon, France)

5 Years experience with a cost-effective modification of the tension-free vaginal sling: Technique and results
S. Subotic, M. Schulze, D. Teber, J. Rassweiler (Heilbronn, Germany)

Stamey bladder neck suspension and nonoperative management for the treatment of mixed urinary incontinence in women - a prospective comparison and long-term results
C. Topuzovic, S. Micic (Belgrade, Serbia and Montenegro)

The tension-free vaginal tape for managing female stress urinary incontinence in 95 cases
V. Argyropoulos, A. Kostakopoulos, P. Tekerlekis, V. Protogerou, M. Melekos (Athens, Larissa, Greece)
### Abstract Session

#### BPH: New techniques II

**Room Havana Level 3**

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<td><strong>Chairs:</strong> M. Emberton, London (GB)</td>
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<td>A. Tubaro, Rome (IT)</td>
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- **Study for 30 min. Interactive discussion for 60 min.**

1. **992** Questionnaire-based evaluation of erectile function after photoselective vaporization of the prostate (PVP) and transurethral resection of the prostate (TURP)

2. **993** Photoselective vaporisation of the prostate in men over 80 years

3. **994** The comparison of PK tissue management system TURP with conventional monopolar TURP

4. **995** Bipolar transurethral resection of the prostate with the ACMI Vista CTR system: Experience on 74 cases
   - A. Meneghini, M. Pizzarella, V. Pegoraro (Rovigo, Italy)

5. **996** Photoselective vaporization (PVP) vs. transurethral electroresection of the prostate (TURP): A comparing cost analysis

6. **997** Erectile functions in BPH patients after photoselective vaporization of the prostate laser surgery
   - O.F. Karatas, A. Tasçi, V. Tugcu (Istanbul, Turkey)

7. **998** The “learning curve” with holmium laser enucleation of the prostate
   - T. Aho, H. Fernando, L. Suraparaju (Cambridge, United Kingdom)

8. **999** Safety and efficacy of holmium laser enucleation of the prostate for urinary retention
   - T. Aho, H. Fernando, L. Suraparaju (Cambridge, United Kingdom)

9. **1000** Noise levels during holmium laser enucleation of the prostate (HoLEP)

10. **1001** Transurethral incision of the prostate (TUIP): Long-term results
    - D. Argirovic (Belgrade, Serbia and Montenegro)

11. **1002** Preliminary clinical experience on molecular quantic resonance electrosurgical unit – vesalius u 20 - in transurethral resection of the prostate
    - A. Meneghini, V. Pegoraro (Rovigo, Italy)

12. **1003** Is intensity of the prostatic vascularization important for TUMT efficacy?
    - M. Lucan, S. Dudea, F. Elec, V. Lucan, G. Iacob, C. Burghela, A. Barbos (Cluj Napoca, Romania)
1004  Prediction factors in TUMT efficacy
M. Lucan, F. Elec, V. Lucan, C. Burghelea, G. Iacob, A. Barbos (Cluj Napoca, Romania)

1005  The morbidity of laparoscopic versus open simple prostatectomy
E. Barret, A. Bracq, G. Braud, J. Harmon, D. Almeida, F. Rozet, X. Cathelineau, G. Vallancien (Paris, France)

1006  Preliminary results of the EAU Real-Life Data Registry on TUNA® therapy
A. Tubaro, K. Höfner, H. Villavicencio, J. De La Rosette, C. Chapple (Rome, Italy; Oberhausen, Germany; Barcelona, Spain; Amsterdam, The Netherlands; Sheffield, United Kingdom)
Friday, 7 April - EAU Programme

Abstract Session

14:00 - 15:30 Prostate cancer: PSA and novel markers

Room Concorde 1 Level 4

Poster Session 61
Chairs: U.H. Stenman, Helsinki (FI)
        C. Wülffing, Münster (DE)

Study for 30 min. Interactive discussion for 60 min.

1007 Preliminary study on plasma nucleic acid based detection of prostate cancer
W.C. Moon, T.H. Kim, M.R. Oh, C.H. Noh, T.H. Uhm (Seoul, South Korea)

1008 Diagnostic performance of serum ribonuclease activity in men with PSA levels between 2.5 and 20 ng/ml

1009 Differentiation enhancement of circulating immune cells containing intracellular PSA: A new method for
discrimination between benign and malignant prostatic disease
R. Herwig, G. Kramer, B. Djavan, P. Rehder, R. Ramoner, M. Marberger (Vienna, Innsbruck, Austria)

1010 Soluble receptor of human cytokine IL-6 (sIL-6R) on 123 patients with untreated prostate cancer (PC)
F. Pina, G. Figueiredo, N. Lunet, N. Tomada, A. Silva, F. Cruz, H. Barros (Porto, Portugal)

1011 Serum soluble urokinase-type plasminogen activator receptor (SUPAR) is a useful marker of prostate cancer
(Ancona, Milan, Italy)

1012 Aptima® PCA3 molecular urine test: Development of a method to aid in the diagnosis of prostate cancer
Y. Fradet, J. Groskopf, S.M.J. Aubin, I.L. Deras, A. Blase, S. Bodrug, C. Clark, S. Brentano, M. Desaulniers,
H. Rittenhouse (Quebec, Canada; San Diego, United States of America)

1013 The usefulness of human glandular kallikrein 2 (hK2) and [-5,-7]proPSA serum measurement for PCA
prediction in the re-screening biopsy
M. Kwiatkowski, D. Seiler, B. Arndt, A. Huber, F. Recker (Aarau, Switzerland)

1014 Clinical usefulness of hK2 and free-to-total PSA ratio to improve early diagnosis of prostate cancer in a
population based screening
M. Kwiatkowski, D. Seiler, B. Arndt, A. Huber, F. Recker (Aarau, Switzerland)

1015 Comparative assessment of free and total forms of serum human glandular kallikrein 2 and prostate specific
antigen for prediction of locally advanced and recurrent prostate cancer
P. Scardino, H. Lilja (Hamburg, Germany; New York, United States of America; Turku, Finland)

1016 Glutathione-S-transferase (GSTPi): A serum molecular marker to define the risk of prostate cancer
R. Gunelli, M. Fiori, L. Valmorri, H. Hanitzsch, P. Lilli, C. Saltutti, C. Vivaacqua, T. Zenico, E. Bercovich (Forli,
Italy)
1017 Serum levels of pro-matrix metalloproteinases 2, pro-matrix metalloproteinases 9 and gelatinase activity in patients with prostate cancer and benign prostatic hyperplasia
A. Zitella, G. Casetta, G. Mengozzi, G. Aimo, A. Greco, D. Rosso, A. De Libero, G. Ghignone, A. Tizzani (Torino, Italy)

1018 Role of neopterin in diagnosis of prostate cancer: 47114 Analyzed samples
G. Pinggera, W. Horninger, H. Schennach, J. Bektic, P. Rehder, M. Mitterberger, K. Tosun, G. Walder, H. Strasser, G. Bartsch (Innsbruck, Austria)

1019 Quantitative real-time RT-PCR of CD24 m-RNA
M. Schostak, H. Krause, K. Miller, F. Christoph, C. Kemppkensteffen, J. Koellermann, M. Schrader (Berlin, Fulda, Germany)

1020 Early diagnosis of prostate cancer: Trimprob versus PSA, DRE, TRUS: A toss-up control study
A. Tubaro, C. De Nunzio, A. Trucchi, L. Miano (Roma, Italy)

1021 Transforming growth factor alfa (TGF-α) level is associated both to serum androgen and primary androgen insensibility prostate cancer (pc) status
F. Pina, G. Figueiredo, N. Lunet, A. Silva, P. Silva, F. Cruz (Matosinhos, Porto, Portugal)
Friday, 7 April - EAU Programme

Abstract Session

Prostate cancer: Treatment evaluation
Room Concorde 2 Level 4

Poster Session 62

Chairs: L. Cecchini, Barcelona (ES)  
C. Terrone, Orbassano (IT)

Study for 30 min. Interactive discussion for 60 min.

1022 The discussion of life expectancy with urology patients  
M. Clarke, K. Kennedy, P. Ewings, R. Macdonagh (Taunton, United Kingdom)

1023 Sexual, urinary and bowel function in elderly men without prostate cancer  
I. Korfage, M-L. Essink - Bot, M. Roobol, F. Schröder, H. De Koning (Rotterdam, The Netherlands)

1024 A prospective study evaluating psychological responses to rapid PSA testing  
S. Wilkinson, K. Warren, A. Ramsden, A. Matthews, G. Chodak (Chicago, United States of America)

1025 BMI and its ability to improve prediction of biochemical recurrence (BCR) after radical prostatectomy (RP): Does a statistically significant marker always improve predictive accuracy in multivariate models?  

1027 Is 11-C choline positron emission tomography an applicable tool in the evaluation of biochemical failure after treatment for localised prostate cancer?  
S. Corvin, D. Schilling, J. Hennenlotter, A. Anastasiadis, A. Stenzl (Tübingen, Germany)

1028 Integrated 11C-choline PET/CT scan in the evaluation of patients with biochemical failure after radical retro-pubic prostatectomy: Hystologic correlations after pelvic and retroperitoneal lympho-node dissection  
V. Scattoni, N. Suardi, M. Picchio, C. Messa, M. Freschi, M. Roscigno, L. Da Pozzo, F. Fazio, F. Montorsi, P. Rigatti (Milan, Italy)

1029 Introducing a new and simple scoring system to evaluate oncological and functional outcome after radical prostatectomy  
L. Salomon, A. De La Taille, D. Vordos, A. Hoznek, R. Yiou, C. Abbou (Creteil, France)

1030 Nomograms and consequent patients risk stratification for clinically localised prostate cancer cannot be safely used for treatment planning in clinical practice  
P. Puppo, C. Introini, A. Naselli, R. Andreatta (Genoa, Italy)

1031 Prediction of insignificant cancers: How good are current nomograms?  

1032 Partin tables do not adequately predict the risk of lymph node involvement in patients undergoing radical prostatectomy for clinically localised prostate cancer  
A. Heidenreich, C. Ohlmann, U. Engelmann, M. Schuhmacher, U. Studer (Cologne, Germany; Berne, Switzerland)
1033 Individual prognostic significance of the nineteen single conditions contributing to the Charlson comorbidity score in patients undergoing radical prostatectomy
M. Froehner, R. Koch, R.J. Litz, S. Oehlschlaeger, O.W. Hakenberg, M.P. Wirth (Dresden, Germany)

1034 Impact of treatment on the long term survival of patients with localised prostate cancer

1035 Preliminary results from a 12 month follow-up study of patients receiving different types of treatment for prostate cancer in conditions of usual clinical practice
J.L. Rodriguez-Miñón, J.M. Cuesta, J. Rodríguez-Molina, E. Cavada, R. Ibarz, C. Casimiro (Madrid, Calahorra, Barcelona, Spain)

1036 Prostate cancer treatment costs: What influences them?
S. Thueroff, C. Chaussy (Munich, Germany)
Abstract Session

Urological reconstruction II

Room Concorde 3 Level 4

14:00 - 15:30

Poster Session 63

Chairs: T.J. Greenwell, London (GB)
K-D. Sievert, Tübingen (DE)

Study for 30 min. Interactive discussion for 60 min.

1037 Routine autologous human myoblast and fibroblast cell cultures for reconstruction of the lower urinary tract
H. Strasser, M. Mitterberger, G.M. Pinggera, G. Bartsch, E. Margreiter, R. Marksteiner (Innsbruck, Austria)

1038 The effect of diabetes mellitus on urinary continence after radical cystoprostatectomy and ileal orthotopic bladder substitution
T.M. Kessler, U.E. Studer, G.N. Thalmann (Berne, Switzerland)

1039 Improved gastrointestinal recovery and metabolic compensation in the early postoperative period after cystectomy and ileal bladder substitution/ileal conduit by intraoperative stenting of the uretero-ileal anastomosis
A. Mattei, C. Baermann, S. Warncke, U.E. Studer (Berne, Switzerland)

1040 Management of sphincter weakness incontinence after radical prostatectomy complicated by anastomotic stricture

1041 Who responds in mailed questionnaire surveys in a cystectomy population?
B. Volkmer, K. Herkmmer, R. Kuefer, G. Bartsch, C. Braun, R. Hautmann (Ulm, Germany)

1042 Reconfiguration of the severely fibrotic penis with a penile implant: 3-Year follow-up
F. Montorsi, F. Dehò, A. Briganti, A. Salonia, G. Zanni, L. Barbieri, P. Rigatti (Milan, Italy)

1043 Ten-year outcome of patients receiving three-piece penile implant for Peyronie’s disease and their partners: Results of a prospective study
F. Montorsi, F. Dehò, A. Salonia, A. Briganti, L. Barbieri, G. Zanni, V. Scattoni, M. Roscigno, P. Rigatti (Milan, Italy)

1044 Congenital penile curvature: Dermal grafting procedure to prevent penile shortening in adults
A. Simonato, A. Gregori, P. Traverso, C. Ambruosi, A. Romagnoli, G. Carmignani (Genoa, Milan, Italy)

1045 Modified Thiersch-Duplay technique reduces fistula formation after primary distal hypospadias repair
F.J. Murat, M. Kulisa, A. Valmalle, P. Wolf, H. Dodat (Lyons, France)

1046 Clinical safety and effectiveness of penile re-augmentation
J.Y. Kim, H.S. Jeon (Seoul, South Korea)

1047 A bioactive double layer defined biomatrix for bladder wall regeneration
1048 Tissue biocompatibility of new bioactive biodegradable stent materials

1049 The bulbourethral composite suspension – indication, technique and results. An alternative to the artificial sphincter?
N. Blick, H. John (Zurich, Switzerland)

1050 The York Mason approach to repair of iatrogenic rectourinary fistulas: A 15-year experience
F. Dal Moro, M. Mancini, F. Pinto, N. Zanovello, P. Bassi, A. Cisternino, F. Pagano (Padua, Italy)

1051 Nephrovesical subcutaneous ureteric bypass: Long-term results in patients with advanced metastatic disease – improvement of renal function and quality of life
J. Schmidbauer, C. Kratzik, H.C. Klingler, M. Remzi, M. Marberger (Vienna, Austria)
Friday, 7 April - EAU Programme

Abstract Session

15:45 - 17:15 Video award session

**Video Session 8**

*Chairs:* R.J.A. Van Moorselaar, Amsterdam (NL)  
M. Zerbib, Paris (FR)

All presentations are 14 minutes in length

**V8 Third video prize:**

*Laparoscopic radical cystectomy in female*

F. Gaboardi, A. Bozzola, S. Galli, A. Gregori, F. Scieri, S. Stener, B. Rocco (Milan, Italy)

Supported by an unrestricted educational grant from ASTELLAS

**V11 Second video prize:**

*Transvesical laparoscopic diverticulectomy*

V. Pansadoro, P. Emiliozzi, G. Federico, M. Martini, A. Pansadoro, M. Pizzo, P. Scarpone (Rome, Italy)

Supported by an unrestricted educational grant from ASTELLAS

**V20 First video prize:**

*Open retropubic nerve-sparing radical prostatectomy – how I do it*

U.E. Studer, F.C. Burkhard, G.N. Thalmann (Berne, Switzerland)

Supported by an unrestricted educational grant from ASTELLAS

**Prize for the best video published in the EUVJ 2005:**

*Laparoscopic radical cystectomy with orthotopic ileal neobladder*


Supported by an unrestricted educational grant from ASTELLAS
Abstract Session

**15:45 - 17:15 Kidney tumours: Systemic treatment**

**Room Blue Level 2**

### Oral Session 14

**Chairs:**
- M.O. Grimm, Düsseldorf (DE)
- P.F.A. Mulders, Nijmegen (NL)

All presentations are 7 minutes in length, followed by 2 minutes of discussion.

#### Overview presentation

M.O. Grimm, Düsseldorf (DE)

#### 1052 Monotherapy with interferon-γ, or combination therapy with interferon-γ, interleukin-2 and 5-fluorouracil for metastatic renal cell carcinoma

Y.H. Park, C.W. Jeong, S.K. Hong, H. Jeong, C. Kwak, E. Lee, S.E. Lee (Seoul, Gyeonggi, South Korea)

#### 1053 Low-dose interleukin-2 (IL-2) in combination with interferon-α (IFN) and 5-fluorouracil (5-FU) for metastatic renal cell carcinoma (MRCC)

G. Kharkevich, I. Tsimafeyeu, L. Demidov (Moscow, Russia)

#### 1054 An adjuvant vaccination with Reniale® prolongs survival in patients with renal cell carcinoma following radical nephrectomy: Secondary analysis of a multicentre phase-III trial

C. Doehn, A. Richter, R.A. Theodor, W. Lehmacher, D. Jocham (Lübeck, Leipzig, Ulm, Cologne, Germany)

#### 1055 Phase 1 study of carbonic anhydrase 9 peptide vaccines in patients with metastatic renal cell carcinoma


#### 1056 Allogeneic dendritic cell vaccination against metastatic renal cell carcinoma with or without cyclophosphamide

N. Leonhartsberger, L. Höltl, R. Ramoner, C. Zelle Rieser, H. Gander, C. Papesh, W. Nussbaumer, G. Bartsch (Innsbruck, Kufstein, Austria)

#### 1057 Sunitinib malate (SU11246) – efficacy in renal cell carcinoma (RCC)


#### 1058 Randomised Phase III trial of the multi-kinase inhibitor sorafenib (BAY 43-9006) in patients with advanced renal cell carcinoma (RCC)

B. Escudier, C. Szczylik, T. Eisen, S. Oudard, W.M. Stadler, B. Schwartz, M. Shan, R.M. Bukowski (Paris, France; Warsaw, Poland; London, United Kingdom; Chicago, Connecticut, Cleveland, United States of America)
Bevacizumab treatment for multimetastatic renal cancer: Results after 6 months

(Paris, France)

Summary

P.F.A. Mulders, Nijmegen (NL)
Abstract Session

Prostate cancer: Intermittent hormonal treatment

Room Bordeaux Level 3

15:45 - 17:15

Oral Session 15

Chairs: B. Tombal, Brussels (BE)
P. Whelan, Leeds (GB)

All presentations are 7 minutes in length, followed by 2 minutes of discussion

Overview presentation
B. Tombal, Brussels (BE) bord-7-1040

1060 Analysis of body temperature changes during hot flushes in men after bilateral orchidectomy for prostate cancer
C. Heyns, N. Aziz (Tygerberg, South Africa) bord-7-1050

1061 Men with poor-prognosis non-metastatic prostate cancer can be cured with adjuvant androgen deprivation therapy
P. Mulders, T. Keane, N. Flesner, C. Lawton, H. Payne, S. Taneja (Nijmegen, The Netherlands; Charleston, Milwaukee, New York, United States of America; Toronto, Canada; London, United Kingdom) bord-7-1060

1062 Is the degree of PSA decline after immediate androgen deprivation a prognostic factor for outcome in patients with T0-4 N0 M0 prostate cancer not suitable for local treatment with curative intent? (Results from the EORTC 30891 trial)
L. Collette, U.E. Studer, P. Whelan, W. Albrecht, J. Casselman, T.M. De Reijke, D. Hauri, W. Loidl, S. Isorna, S.K. Sundaram, M. Debois (Brussels, Oostende, Belgium; Berne, Zurich, Switzerland; Leeds, Wakefields, United Kingdom; Vienna, Linz, Austria; Amsterdam, The Netherlands; Las Palmas, Spain) bord-7-1070

1063 Rise of serum PSA and testosterone following androgen ablation: Preliminary data in patients with intermittent androgen deprivation therapy for metastatic prostate cancer
D.H. Han, S.H. Choo, B.J. Jung, S.S. Jeon, H.M. Lee, H.Y. Choi (Seoul, South Korea) bord-7-1080

1064 Intermittent hormone therapy for advanced and non-localised prostate cancer
D. Prapotnich, N. Cathala, A. Mombet, X. Cathelineau, F. Rozet, E. Barret, G. Vallancien (Paris, France) bord-7-1090

1065 Finnish multicentre study to compare intermittent IAD and continuous androgen deprivation CAD in patients with advanced prostate cancer – what kind of patients are candidates for IAD?
A. Salonen, J. Viitanen, M. Ala-Opas, K. Taari, T. Tammela (Kuopio, Joensuu, Helsinki, Tampere, Finland) bord-7-1100

1066 Phase III Study of intermittent MAB versus continuous MAB: An international cooperative study – quality of life
F. Calais Da Silva, A. Bono, P. Whelan, M. Brausi, A. Queimadelos, J. Portilllo, Z. Kirkali, F.M. Calais Da Silva Junior (Lisbon, Portugal; Varese, Modena, Italy; Leeds, United Kingdom; Santiago de Compostela, Santander, Spain; Izmir, Turkey) bord-7-1110
Intermittent hormone therapy for biological recurrence after radical prostatectomy

D. Prapotnich, A. Mombet, N. Cathala, X. Cathelineau, F. Rozet, E. Barret, G. Vallancien
(Paris, France)

Summary

P. Whelan, Leeds (GB)
Friday, 7 April - EAU Programme

Abstract Session

15:45 - 17:15 Urothelial tumours: Management of infiltrative/advanced tumours II

Room Ternes Level 1

Poster Session 64

Chairs: H. Abol-Enein, Mansoura (EG)
D.M.A. Wallace, Birmingham (GB)

Study for 30 min. Interactive discussion for 60 min.

1068 Laparoscopic radical nephroureterectomy: The incidence of local recurrence and port site metastasis
M. Muntener, E. Schaeffer, F. Romero, M. Allaf, F.A. Brito, C. Pavlovich, L. Kavoussi, T. Jarrett (Baltimore, United States of America)

1069 Radical cystectomy in octogenarians
R. Kuefer, J.E. Gschwend, G.J. Bartsch, R. Hautmann, B.G. Volkmer (Ulm, Germany)

1070 The impact of age and co-morbid disease on the outcome of radical cystectomy
P. Cathcart, M. Nuttall, J. Armitage, J. Van Der Meulen, M. Emberton (London, United Kingdom)

1071 Radical cystectomy and orthotopic bladder substitution in women: A report on 192 cases
B. Ali-el-Dein, A.A. Shaaban, R. Abu-Eideh, A. Mosbah, M. Abdel-Latif, H. Abol-Enein, M.A. Ghoneim (Mansoura, Mansoura, Egypt)

1072 Tumor recurrence in the remnant urothelium after radical cystectomy for transitional cell carcinoma of the bladder in females: Long term results of a single centre
T. Akkad, C. Gozzi, M. Deibl, T. Mueller, A. Pelzer, G. Pinggera, G. Bartsch, H. Steiner (Innsbruck, Austria)

1073 Combined intra-arterial chemotherapy and concurrent radiotherapy in compromised patients with muscle-invasive bladder cancer
H. Kubo, N. Harada, K. Nishiyama, M. Kawahara, M. Nakagawa (Kagoshima, Satsuma-Sendai, Japan)

1074 The impact of hospital provider volume on the outcome of cystectomy in the UK
P. Cathcart, M. Nuttall, J. Armitage, J. Van Der Meulen, M. Emberton (London, United Kingdom)

1075 A single institution cost comparison of laparoscopic versus open radical cystoprostatectomy and orthotopic ileal neobladder
A. Gregori, A. Bozzola, A. Simonato, A. Lissiani, S. Galli, C. Paololetti, B. Rocco, F. Scieri, S. Stener, F. Gaboardi (Milan, Italy)

1076 Combination chemotherapy with paclitaxel, ifosfamide, and nedaplatin in patients with urothelial cancer who had received prior cisplatin-based therapy: advanced report

1077 Evaluation of chemotherapy with magnetic resonance imaging in patients with advanced carcinoma of the bladder
B. Schrier, A. Witjes, M. Peters, J. Barentsz (Nijmegen, The Netherlands)
1078  **Is preservation of prostate and seminal vesicles in patients with infiltrative bladder cancer justified?**
D. Gotsadze, V. Chakvetadze, E. Danelia (Tbilisi, Georgia)

1079  **Perioperative complications according to comorbidity and age in patients after radical cystectomy**
V. Novotny, D. Wiessner, O.W. Hakenberg, U. Heberling, S. Oehlschlaeger, R.J. Litz, M.P. Wirth (Dresden, Germany)

1080  **Survival and prognostic stratification of patients with metastatic urothelial cancer who underwent systemic chemotherapy**
T. Abe, N. Shinohara, T. Harabayashi, A. Sazawa, Y. Toyoda, T. Akino, S. Maruyama, S. Suzuki, K. Nonomura (Sapporo, Japan)

1081  **Long term results of surgical treatment for upper urinary tract transitional cell cancer**
V. Vukotic-Maletic, M. Lazic, D. Kojic (Belgrade, Serbia and Montenegro)

1082  **Complications of modified sigma rectum pouch (Mainz pouch 2) urinary diversion: Experience at 238 patients**
J. Hadzi Djokic, D. Basic, V. Colovic (Belgrade, Nis, Serbia and Montenegro)
### Poster Session 65

**Chairs:**
- P.J. Conort, Paris (FR)
- L. Cormio, Bari-Carbonara (IT)

**Study for 30 min. Interactive discussion for 60 min.**

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<th>Abstract Number</th>
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<th>Authors</th>
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<tr>
<td>1083</td>
<td>Shock wave lithotripsy (SWL) for all location large (&gt; 10 mm) ureteral stones using HM3 lithotryptor</td>
<td>S. Halachmi, M. Nagar, O. Golan, O. Goldin, Z. Kaufman, Y. Ofer, S. Meretyk (Haifa, Israel)</td>
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<tr>
<td>1084</td>
<td>Clinical result of ultrasound based real-time tracking for urolithiasis in extracorporeal shock wave lithotripsy</td>
<td>C. Chang, C.R. Chen (Hsinchu, Hua-Lien, Taiwan)</td>
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<td>1085</td>
<td>Efficacy of extracorporeal shock wave lithotripsy for lower calyceal stones</td>
<td>K. Sarica, E. Alkan, O.F. Karatas (Istanbul, Turkey)</td>
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<tr>
<td>1086</td>
<td>Impact of air bubbles in the coupling medium in efficacy of extracorporeal shock wave lithotripsy</td>
<td>A. Jain, T. Shah (Bradford, United Kingdom)</td>
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<td>1087</td>
<td>Long term follow-up of effect of extracorporeal shock wave</td>
<td>W. Eassa, K. Shier, M. Dawaba, M. El-Kenawey (Mansoura, Egypt)</td>
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<tr>
<td>1088</td>
<td>In-situ ESWL for ureteric stones – still up to date?</td>
<td>C. Chaussy, T. Bergsdorf, S. Thueroff (Munich, Germany)</td>
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<td>1090</td>
<td>Ultrasound-guided percutaneous nephrostomy performed by an urologist. Ten-years experience</td>
<td>A. Skolarikos, G. Alivizatos, I. Varkarakis, D. Staios, C. Liakouras, A. Papatsoris, C. Constantinides, C. Deliveliotis (Athens, Greece)</td>
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<tr>
<td>1091</td>
<td>Supracostal approach for percutaneous renal surgery: Experience with 67 cases</td>
<td>M.R. El Halaby, A. Abdelmaksoud, M. Shoeb, K. Fawaz, A. Elrobeigi (Cairo, Egypt)</td>
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<tr>
<td>1092</td>
<td>Antegrade approach for large ureteric stones according to the Chinese minimally invasive percutaneous nephrolithotomy (MPCNL) technique: An effective method with minimal morbidity</td>
<td>S.K. Li, C. Tai, H. Chau, T. Fung, C. Fan, S. Hou (Hong Kong, Hong Kong)</td>
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<td>1093</td>
<td>A simple cost effective model for remote teleconsultation (telerounding) for the post operative management of urological patients</td>
<td>S.S. Kommu, I.J. Persad, J. Groom, J. Mc Gurk, S.J. Kodamala, N.A. Watkin, J.B. Emtage (Surrey, United Kingdom)</td>
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<tr>
<td>1094</td>
<td>Dissolve your stones with herbal tablets - a survey of remedies available over the internet</td>
<td>M. Harris, J. Hindmarsh (Northallerton, Middlesbrough, United Kingdom)</td>
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1095  The effect of papaverine hydrochloride on ureteral colic resistant to conventional treatment
E. Alkan, F. Karatas, K. Sarica (Istanbul, Turkey)

1096  Do weather conditions influence the ureterocolic onset?
F. Dal Moro, A. Abate, R. Boscolo, G. Arandjelovic, F. Tosato, A. Cisternino, T. Prayer Galetti, P. Bassi (Padua, Italy; Berkeley, United States of America)

1097  Predictive factors for absconees of renal stone clinic - a multi-centre study
Abstract Session
15:45 - 17:15 Neuro-urology: The detrusor and the urethra

Poster Session 66

Chairs: M.D. Craggs, London (GB)
         A. Reitz, Zurich (CH)

Study for 30 min. Interactive discussion for 60 min.

1098 Influence of mechanical stretch on gene expression and contraction in pig detrusor tissue

1099 Gene expression and functional role of prostaglandin E2 receptor subtypes in the rat urinary bladder mucosa and detrusor: How do these changes in association with bladder outlet obstruction?
B. Masanori, D. Shuqi, Z. Hidenori, A. Isao, T. Masayuki (Tamaho, Japan)

1100 Therapeutic effects of connexin inhibitors on detrusor overactivity associated with bladder outlet obstruction in rats
J.C. Kim, E.Y. Park, D. Kim, J.H. Kim, T. Hwang (Seoul, Daegu, South Korea)

1101 The presence and the functional role of muscarinic receptor subtypes in human bladder smooth muscle in patients with normal and detrusor overactivity
T. Yamanishi, T. Mizuno, H. Abe, T. Kamai, K. Arai, K. Yoshida (Tochigi, Japan)

1102 Juvenile pig detrusor differs in contractile mechanisms from mature tissue
M. Wuest, K. Schlobach Da Costa, J. Hecht, T. Christ, M. Braeter, U. Ravens (Dresden, Germany)

1103 Solifenacin in multiple sclerosis patients with overactive bladder – a prospective study
F. Van Rey, J. Heesakkers (Nijmegen, The Netherlands)

1104 Are efficacy and tolerability of propiverine and oxybutynin comparable in children with neurogenic detrusor overactivity (NDO)? A multicenter observational cohort study

1105 Compliance and long-term efficacy of anticholinergic therapy in paediatric patients with detrusor hyperreflexia
F. Christoph, A. Moschkowitsch, C. Kempkenstefen, M. Schrader, K. Miller (Berlin, Germany)

1106 Botulinum toxin injections into the bladder wall – a morphological evaluation of the injection technique using magnetic resonance imaging
S. Boy, M. Schmid, A. Reitz, A. Von Hessling, J. Hodler, B. Schurch (Zurich, Switzerland)
1107 Detrusor injections of botulinum toxin A in patients with neurogenic detrusor overactivity significantly decrease the incidence of symptomatic urinary tract infections
X. Gamé, Y. Bentaleb, I. Thiry-Escudie, X. De Boissezon, C. Roques, B. Malavaud, P. Marque, P. Rischmann (Toulouse, France)

1108 Treatment with Botulinumtoxin A in neurogenic bladder dysfunction - a randomised double-blind study with Dysport
I. Ehren, D. Volz, E. Farrelly, L. Berglund, L. Brundin, P. Lafolie (Stockholm, Sweden)

1109 Effects of phosphodiesterase 5 inhibition on the NO/ cGMP pathway in the human and pig urethra
V. Werkström, K.E. Andersson, P. Hedlund (Lund, Sweden)

1110 Increasing by specific phosphodiesterase V inhibitor of neuronal nitric oxide synthase smooth muscle relaxation in the female mice urethra

1111 Cyclo-oxygenase-2 is expressed in interstitial cells of the mouse bladder
P. Hedlund, K.E. Andersson (Lund, Sweden)

1112 A facilitatory neuromodulative effect of duloxetine and pelvic floor training on the excitability of urethral sphincter motor neurones
S. Boy, A. Reitz, S. Simitovic, P.A. Knapp, B. Schurch (Zurich, Switzerland)
Abstract Session

**Paediatrics II**

**Poster Session 67**

**Chairs:**
- H.B. Lottmann, Paris (FR)
- S. Tekgüi, Ankara (TR)

**Study for 30 min. Interactive discussion for 60 min.**

1113 **Inflammation of the testis and epididymis in otherwise healthy child, is it a true bacterial urinary tract infection?**
- S. Halachmi, A. Toubi, S. Meretyk (Haifa, Israel)

1114 **Acute scrotal pain in children: Results of 298 surgical explorations**
- M. Waldert, M. Dobrovits, M. Remzi, C. Seitz, M. Marberger (Vienna, Austria)

1115 **The diagnostic value of C-reactive protein and erythrocyte sedimentation rate for patients with an acute scrotum**
- S.A. Asgari (Rasht, Iran)

1116 **Protective effect of ADL on reperfusion injury following testicular torsion**
- C. Yoon, D. Yoon, M.M. Oh, S. Kang, Y. Shim, B. Min, D. Yoon (Seoul, South Korea)

1117 **Protective effects of sildenafil administration on testicular torsion/detorsion damage in rats**
- A. Hassanzadeh Salmasi, S. Payavbash, A. Beheshtian, B. Ghazi Nezami, S. Rahimpour, S. Kiumehr, R. Rabbani, S.M. Tavangar, A.R. Dehpour (Tehran, Iran)

1118 **Natural history of vanishing testis**
- P. Hegarty, I. Mushtaq, R. Rub, N. Sebire (London, United Kingdom; Hadera, Israel)

1119 **Neurofibromatosis type 1 and its urological manifestation**
- A. Schröder, R. Stein, J. Thüroff, P. Gutjahr (Mainz, Germany)

1120 **Perineal ultrasonography for non invasive evaluation of the sacral reflexes in children**
- L. De Kort, T. De Jong, A. Klijn, M. Vijverberg (Utrecht, The Netherlands)

1121 **Loss of interstitial cells of Cajal and gap junction protein Cx 43 at the ureterovesical junction in children with vesicoureteral reflux**
- C. Schwentner, J. Oswald, A. Lunacek, B. Schlenck, H. Fritsch, G. Bartsch, C. Radmayr (Innsbruck, Austria)

1122 **A new oral MELT formulation of desmopressin in primary nocturnal enuresis (PNE). A randomised comparison to the tablet formulation**
- H. Lottmann, F. Froeling, S. Allousi, A.S. El-Rhadi, S. Rittig, A. Riis, B. Persson (Paris, France; Den Haag, The Netherlands; Neunkirchen, Germany; Sidcup, United Kingdom; Aarhus, Copenhagen, Denmark)

1123 **Parental awareness of paediatric constipation**
- I. Akyol, C. Adayener, T. Senkul, K. Karademir, K. Baykal, C. Iseri (Istanbul, Turkey)
1124  What is the bladder wall thickness in normal primary school children?
H.S. Dogan, B. Akpinar, S. Gurocak, D. Akata, M. Bakkaloglu, S. Tekgul (Ankara, Turkey)

1125  The effect of bladder filling technique on uroflowmetry parameters in children
J. Khastgir, S. Al-Hayek, L. Swithinbank, P. Abrams (Bristol, United Kingdom)

1126  Propiverine compared to oxybutynin in children with idiopathic detrusor overactivity – are efficacy and
tolerability comparable?
S. Alloussi, G. Muertz, R. Braun, U. Gerhardt, M. Heinrich, E. Hellmis, W. Horn, A. Hossfeld, A. Marschall-
Kehrel, K. Niklas, M. Raabe, T. Rössler, D. Schultz-Lampel, B. Seibt, S. Siemer, H. Walter, B. Wiedeking, B.
Willer, P. Bock, J. Hanisch (Neunkirchen, Dresden, Leipzig, Munich, Duisburg, Mönchengladbach, Stadtlengsfeld,
Oberursel, Saarbrucken, Freiburg, Rottweil, Villingen-Schwenningen, Zwickau, Homburg/Saar, Grimmen, Essen,
Germany; Basel, Switzerland)

1127  Percutaneous renal surgery in children with complex stone
E. Özden, A. Ahin, H.S. Dogan, B. Tan, S. Tekgül, H. Özen (Ankara, Turkey)
### Abstract Session

**Management of the complications of surgery in female urology**

**Room 252 Level 2**

**Poster Session 68**

**Chairs:**

- D. Castro Diaz, Santa Cruz De Tenerife (ES)
- F. Haab, Paris (FR)

**Study for 30 min. Interactive discussion for 60 min.**

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<th>Poster Session</th>
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<td>1129</td>
<td>Incontinence after colposuspension during sacroplasty: Preliminary results of a randomised study</td>
<td>E. Costantini, A. Giannantoni, L. Mearini, A. Zucchi, M. Saccomanni, V. Bini, A. Vianello, M. Porena (Perugia, Italy)</td>
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<td>1130</td>
<td>Female sexual functions after surgery for stress urinary incontinence: Vaginal sling versus Burch colposuspension</td>
<td>F. Çayan, S. Ülger, S. Dilek, E. Akbay, S. Çayan (Mersin, Turkey)</td>
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<td>1131</td>
<td>Mesh erosions with the transobturator approach for tension free vaginal tapes in management of urodynamic stress incontinence</td>
<td>M. Abdel-Fattah, K. Sivanesan, I. Ramsay (Glasgow, United Kingdom)</td>
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<td>1132</td>
<td>Surgical management of acute urinary retention after sling procedure</td>
<td>V. Landreat, A. Manunta, J.P. Harlicot, P.L. Broux, J. Dugast, J.J. Patard, B. Lobel, F. Guillé (Rennes, France)</td>
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<td>1133</td>
<td>Pre- and postoperative complications of TVT (tension-free vaginal tape): Our experience</td>
<td>S. Charalambous, A. Fotas, A. Papathanasiou, G. Fatles, S. Touloupidis, V. Rombis (Thessalonica, Alexandroupolis, Greece)</td>
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<td>1134</td>
<td>Significant complications following urethral tape implantation: A neglected problem</td>
<td>H. Klingler, M. Tinzi, M. Marberger (Vienna, Austria)</td>
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<td>1135</td>
<td>Voiding dysfunction following Transobturator tape procedure</td>
<td>K. Sivanesan, M. Abdel Fattah, I. Ramsay (Glasgow, United Kingdom)</td>
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<td>1136</td>
<td>Monofilament versus multifilament polypropylene mesh for female incontinence: Safety evaluation</td>
<td>J.M. Martínez Sagarra, C. García-Tuñón, F. Castroviejo Royo, A. Rodríguez-Toves, J.H. Amon Sesmero, C. Conde Redondo (Valladolid, Spain)</td>
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<td>1137</td>
<td>Is the tissular rehabilitation of synthetic suburethral tapes satisfactory?</td>
<td>V. Boublil, J. Hermieu, M. Toublanc, V. Ravery, V. Delmas, S. Dominique, L. Boccon-Gibod (Paris, France)</td>
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<tr>
<td>1138</td>
<td>Urethrolysis after tension-free vaginal tape procedure: Simple incision technique</td>
<td>A. Cavalcanti, J. Carvalho, R. Krambeck, D. Rachid Filho, M. Rubinstein, I. Rubinstein, L. Favorito (Rio de Janeiro, Brazil)</td>
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</tbody>
</table>
1139 Urethrolysis: A versatile operation for bladder outlet obstruction in women following stress incontinence surgery
G. Wirth, J.P. Spinosa, C. Iselin (Geneva, Switzerland)

1140 Clinical and urodynamic results of sections of sub-urethral tapes
V. Boublil, J. Hermieu, V. Ravery, V. Delmas, S. Dominique, L. Boccon-Gibod (Paris, France)

1141 Reduced risk of intraoperative complications when the tension-free vaginal tape procedure is used on a full bladder
T. Lee, S. Yoon (Incheon, South Korea)

1142 Unilateral transvaginal urethrolysis for urinary obstruction after antiincontinence surgery
F. Villacampa, F. Cabrera, M. Sanchis, S. De La Rosa, J. Romero, N. Felip, O. Leiva (Madrid, Spain)
Friday, 7 April - EAU Programme

Abstract Session

15:45 - 17:15 BPH: Intervention therapy

Room Havana Level 3

Poster Session 69

Chairs: J. Ramon, Ramat-Gan (IL)
       M.H. Vanden Bossche, Brussels (BE)

Study for 30 min. Interactive discussion for 60 min.

1143 A prospective randomised controlled trial comparing bipolar transurethral resection in saline (TURIS) system and conventional monopolar transurethral resection of prostate in men with benign prostate hyperplasia: A 1 year’s clinical efficacy and safety
       H. Ho, S. Yip, K.B. Lim, K.T. Foo, C. Cheng (Singapore, Singapore)

1144 A safer way of transurethral resection of the prostate: “Coagulating intermittent cutting” reduces haemostatic complications
       A.P. Berger, A.E. Pelzer, J. Bektic, H. Steiner, A. Lunacek, G. Bartsch, W. Horninger (Innsbruck, Austria)

1145 Transurethral resection of prostate in patients with chronic urinary retention and a hypocontractile detrusor: A prospective urodynamic based outcome analysis
       M. Abdus Salam, P. Jasim, P. Saha, R. Abedin, G. Chowdhury, K. Alam (Dhaka, Bangladesh)

1146 Comparative morbidity of transurethral or suprapubic bladder catheterisation for acute urinary retention: Results of a prospective survey in 2635 men with BPH
       F. Desgrandchamps, A. De La Taille, J. Doublet (Paris, Creteil, France)

1147 Does operator’s experience influences the incidence and the “patterns” of the urethral strictures post turp?
       A. Cumpanas, M. Botoca, V. Bucuras, P. Boiborean, F. Miclea, P. Dragan (Timisoara, Romania)

1148 A prospective randomised study between transurethral vaporisation using plasmakinetic energy and transurethral resection of prostate - five year results
       P. Chandrasekar, F. Kapasi, J. Virdi (Harlow, United Kingdom)

1149 CoreTherm treatment vs TURP in patients with BPH: A prospective randomised multicentre study with 5 years follow-up
       A. Mattiasson, S. Schelin, B. Magnusson, S. Moddy, H. Ageheim, J. Richthoff, J. Duelund, K. Kröyer, J. Nordlig, E. Boyle, T. Larson (Lund, Kalmar, Kristianstad, Ljungby, Sweden; Fredriksberg, Herlev, Denmark; Toledo, Scottsdale, United States of America)

1150 Effects of resectoscope loop manipulation
       J.V. Di Trolio (Roseland, United States of America)

1151 Laparoscopic simple prostatectomy vs. open simple prostatectomy: The first comparative study
       H. Baumert (Paris, France)

1152 Thulium laser enucleation of the prostate
       S. Gordon, G. Watson (Southwater, Eastbourne, United Kingdom)
1153 Prospective study: BPH: GYRUS loop vs. conventional TURP - 2 years follow up
A.F. Tan, R. Chen (Mornington, Frankston, Australia)

1154 Efficacy of high-power KTP photoselective laser vaporization prostatectomy for the treatment of BPH
D.H. Han, J.W. Chung, B.J. Jung, J.H. Hong, S.W. Lee (Seoul, South Korea)

1155 Monopolar vs bipolar TUR: Results of a randomised prospective study
F. Bertolotto, M. Raggio, G. Vigliercio, F. Germinale, C. Introini (Camogli, Genoa, Vercelli, Italy)

1156 Potentially dangerous elevations in blood pressure during office microwave treatments of the prostate
B. Larson, L. Mynderse, V. Sommers, M. Jaff, W. Evans, T. Larson (Cleveland, Ohio, Boston, Rochester, Fort Lauderdale, Scottsdale, Arizona, United States of America)

1157 Prospective study of 645 patients with significant benign prostatic enlargement: Complications and immediate outcome after suprapubic prostatectomy
O. Reich, A. Bachmann, D. Zaak, C.G. Stief, M. Seitz, B. Schlenker, C. Gratzke, P. Hermanek, N. Lack, C. Burmeister (Munich, Germany)
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<td><strong>1158</strong></td>
<td>Definitive histologic diagnosis on prostate biopsies in 3 hours: The first year experience</td>
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<td><strong>L.D. Nava</strong>, M. Freschi, C. Doglioni, A. Losa, E. Scapaticci, T. Maga, P. Rigatti, G. Guazzoni (Milan, Italy)</td>
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<td><strong>1159</strong></td>
<td>Evaluation of 16 gauge needle for prostate biopsy</td>
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<td><strong>K. Fink</strong>, G. Hutarew, R. Szlauer, R. Goetschi, N.T. Schmeller (Salzburg, Austria)</td>
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<tr>
<td><strong>1160</strong></td>
<td>Influence of using sixteen gauge needle on prostate cancer detection rate in transrectal ultrasound-guided prostate biopsy</td>
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<td><strong>1161</strong></td>
<td>Saturation biopsy versus 8-core biopsy. comparative study in repeated biopsy for the diagnose of prostate cancer</td>
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<td><strong>1162</strong></td>
<td>Prostate saturation biopsy in the reevaluation of microfocal prostate cancer</td>
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<td><strong>L. Boccon-Gibod</strong>, N. Barry Delongchamps, M. Toublanc, L. Boccon-Gibod, V. Ravery (Paris, France)</td>
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<tr>
<td><strong>1163</strong></td>
<td>Improved prediction of the presence of Gleason grade 4/5 component by 3-dimensional 26-core prostate biopsy</td>
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<td><strong>N. Numao</strong>, S. Kawakami, Y. Fujii, Y. Kageyama, M. Koike, K. Kihara (Tokyo, Japan)</td>
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<td><strong>1164</strong></td>
<td>Percentages of positive cores, cancer length and Gleason grade 4/5 cancer in systematic sextant biopsy are all predictive of adverse pathology and biochemical failure after radical prostatectomy</td>
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<td><strong>S. Suekane</strong>, M. Noguchi, O. Nakashima, K. Matsuoka (Kurume, Japan)</td>
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<td><strong>1165</strong></td>
<td>Multifocal prostate cancer: Do needle biopsies detect the largest tumour?</td>
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<tr>
<td><strong>N. Barry Delongchamps</strong>, V. Ravery, M. Toublanc, L. Boccon-Gibod, L. Boccon-Gibod (Paris, France)</td>
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<td><strong>1166</strong></td>
<td>Impact of ratio between gland size and number of biopsy cores on repeat prostate biopsy: Development and internal validation of a new repeat biopsy nomogram in men assessed with 10 or more cores</td>
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<tr>
<td><strong>1167</strong></td>
<td>Clinical significance of only one positive biopsy core in a sextant prostate needle biopsy</td>
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Prostate volume at initial biopsy is the most important predictor of repeat biopsy outcome. Validation of a novel predictive tool

Impact of sampling density on initial 10 or more (+) core prostate biopsy: Development and internal validation of a 10+ cores biopsy nomogram

Relationship between primary Gleason pattern on needle biopsy and clinicopathological outcomes among men with Gleason 7 adenocarcinoma of the prostate
P.J. Bastian, M.L. Gonzalgo, L.A. Mangold, J.I. Epstein, P.C. Walsh, A.W. Partin (Baltimore, United States of America)

Gleason score upgrading at time of pathological Gleason score occurs more frequently in external-based biopsies than in university-based biopsies

Prostate cancers scored as Gleason 6 in prostate biopsy are frequently Gleason 7 tumours at radical prostatectomy: Implication on outcome
Friday, 7 April - EAU Programme

Abstract Session

15:45 - 17:15 Prostate cancer: Screening/ early detection

Room Concorde 2 Level 4

Poster Session 71

Chairs: J. Irani, Poitiers (FR)
D.M. Quinlan, Dublin (IE)

Study for 30 min. Interactive discussion for 60 min.

1173 Serum lipid-lowering drugs and prostate cancer risk – a population based case-control study
T. Murtola, T. Tammela, L. Määttänen, A. Auvinen (Tampere, Helsinki, Finland)

1174 Finasteride, alpha-blockers and risk of prostate cancer - a population based case-control study
T. Murtola, T. Tammela, L. Määttänen, M. Hakama, A. Auvinen (Tampere, Helsinki, Finland)

1175 Impact of body mass index on serum PSA levels in Japanese males
M. Kohno, K. Ito, T. Yamamoto, H. Takechi, M. Ohi, K. Suzuki (Maebashi, Japan)

1176 Relationship between prostate specific antigen and obesity in Korea
N.G. Choi, H.J. Kim, T.S. Shin (Seoul, South Korea)

1177 Obesity, insulin resistance and risk of prostate cancer. A prospective study
P. Stattin, T. Stocks, S. Rinaldi, B. Lindahl, G. Hallmans, R. Kaaks (Umeå, Sweden; Lyon, France)

1178 A critical appraisal of the ability of body mass index (BMI) to predict high grade prostate cancer (PCa)

1179 The evaluation of patient information booklets for localised prostate cancer
T. Yap, J. Armitage, M. Emberton, J. Van Der Meulen (London, United Kingdom)

1180 Pathways to the diagnosis of prostate cancer in the control arm of a large randomised screening trial
S. Roemeling, M.J. Roobol, C. Gosselaar, F.H. Schröder (Rotterdam, The Netherlands)

1181 Incidence of prostate cancers detected in men who refused biopsy at initial screening (1993-1999)
M.J. Roobol, F.H. Schröder (Rotterdam, The Netherlands)

1182 Prostate cancer detection in men aged 45-49 years in the UK ProtecT (prostate testing for cancer and treatment) trial
A. Lane, J. Howson, M. Mason, D. Neal, J. Donovan, F. Hamdy (Bristol, Sheffield, Cardiff, Cambridge, United Kingdom)

1183 Differences in knowledge of prostate cancer among brothers of men with prostate cancer and controls
K. Herkommer, K. Hohl, J.E. Gschwend, T. Paiss, M. Kron (Ulm, Germany)

1184 Is a negative prostate biopsy result a positive outcome?
M. Harris, M. Speakman (Taunton, United Kingdom)
1185  Is dihydrotestosteron a prognostic factor among men with screening-detected prostate cancer?
A. Kjellman, O. Akre, U. Norming, M. Tornblom, O. Gustafsson (Stockholm, Sweden)

1186  Attitudes and perception to prostate cancer screening with PSA
H. Malmi, L. Määttänen, M. Ruutu, T. Tammela, A. Auvinen (Helsinki, Tampere, Finland)

1187  Updated follow-up of active surveillance with selected delayed intervention for localised prostate cancer
L. Klotz, A. Loblaw, R. Nam (Toronto, Canada)
Friday, 7 April - EAU Programme

Abstract Session

15:45 - 17:15 Prostate cancer: Surgical results

Room Concorde 3 Level 4

Poster Session 72

Chairs: M. Colombel, Lyon (FR)  
P. Hammerer, Braunschweig (DE)

Study for 30 min. Interactive discussion for 60 min.

1188 Visible quality – benchmarking in prostate cancer therapy
(Berlin, Kassel, Germany)

1189 Incontinence after radical prostatectomy: Subjective and objective outcome is not always the same
M. Kwiatkowski, D. Seiler, B. Arndt, J. Gregorin, P. Bueschel, H. Greiter, F. Recker (Aarau, Switzerland)

1190 Incidence by definition, risk factors and temporal trend of urinary incontinence after radical prostatectomy
in a single institution over a 20-year period
T. Prayer-Galetti, A. Cisternino, E. Sacco, G. Betto, S. Fracalanza, F. Pagano (Padua, Italy)

1191 Cystogram after radical prostatectomy is reliable when performed by trans rectal ultrasound
J. Walz, T. Steuber, S. Ahyai, F. Scharlau, C. Eichelberg, E. Currin, M. Graefen, H. Huland (Hamburg, Germany)

1192 Urinary continence after standard and nerve sparing radical retropubic prostatectomy
D. Pushkar, V. Diyakov, A. Bernikov, A. Bormotin (Moscow, Russia)

1193 Severe vesicourethral anastomotic strictures after radical prostatectomy

1194 Nerve sparing radical prostatectomy: A new method of intraoperative frozen section analysis
K. Bothe, P.M. Braun, S. Hautmann, A. Bannowsky, K.P. Jüinemang (Kiel, Germany)

1195 Lack or reliability of recollected international index of erectile function domains in candidates to radical
prostatectomy
A. Salonia, G. Zanni, A. Gallina, A. Saccà, A. Briganti, L. Bua, M. Raber, E. Farina, R. Colombo, P. Rigatti,
F. Montorsi (Milan, Italy)

1196 Quality of life after radical prostatectomy - the influence of the nerve sparing technique
D. Seiler, M. Kwiatkowski, J. Gregorin, B. Arndt, P. Bueschel, H. Greiter, F. Recker (Aarau, Switzerland)

1197 The common spared neurovascular bundle might not be sufficient for all types of nerve distributions in a
nerve sparing radical prostatectomy
A. Stenzl, K. Sievert (Tübingen, Germany)

1198 Extraperitoneal radical prostatectomy and previous history of hernia repair: Evaluation of results
S. Keskin, G. Guichard, A. Hoznek, A. De La Taille, R. Yion, D. Vordos, C. Abbou, L. Salomon (Cretteil, France)
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<th>1199</th>
<th>The incidence of inguinal hernia in radical retropubic prostatectomy. Do you warn your patients?</th>
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<td>J. Hicks, A. Grey, S. Holmes (Portsmouth, United Kingdom)</td>
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<th>1200</th>
<th>Risk adjusted analysis of positive surgical margins following laparoscopic and retropubic radical prostatectomy</th>
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<th>1201</th>
<th>How significant are surgical case load and patient’s age in clinical outcome from radical prostatectomy?</th>
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<td>V.S. Hanchanale, J.E. McCabe, S. Willmott, P.M. Javle (Crewe, United Kingdom)</td>
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<th>1202</th>
<th>PSA tracker – remote follow-up of prostate cancer patients</th>
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<td></td>
<td>J. McFarlane, J. McFarlane, K. Warren (Bath, United Kingdom)</td>
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Friday, 7 April - EAU Programme

Symposium

17:30 - 19:00

Frontiers in prostate cancer: Advancing our ability towards improved cancer detection

Room Ternes Level 1

Chair: L. Boccon-Gibod, Paris (FR)

Introduction
L. Boccon-Gibod, Paris (FR) tenn-7-1150

Global prevalence and outcomes: How well are we managing prostate cancer?
L. Boccon-Gibod, Paris (FR) tenn-7-1160

Prostate cancer detection: Understanding and addressing the clinical limitations of prostate specific antigen
R. Kirby, London (GB) tenn-7-1170

Strategic considerations to address ambiguous biopsy results and the need for repeat procedures
A. De La Taille, Creteil (FR) tenn-7-1180

PCA3 – Performance overview of an emerging molecular clinical marker
P. F. A. Mulders, Nijmegen (NL) tenn-7-1190

PCA3 – Can a novel molecular clinical marker improve prostate cancer management?
M. Droller, New York (US) tenn-7-1200

Questions and answers

tenn-7-1210

Conclusion
L. Boccon-Gibod, Paris (FR) tenn-7-1220

Aims and objectives
Prostate cancer is the third most common malignancy in the world and ranks 6th in cancer-related mortality. While the use of the Prostate Specific Antigen test has resulted in earlier diagnoses, it is associated with limitations including the inability to differentiate between aggressive and non-aggressive tumours as well as non-cancerous more common conditions such as benign prostatic hyperplasia and prostatitis. These false-positive results can often lead to biopsy, which might produce equivocal findings, and unnecessary patient anxiety. Thus, despite advances over recent decades, the optimal diagnostic approach for prostate cancer remains elusive. The aim of this programme is to discuss new biological molecular markers (PCA3) along with biopsy strategies as emerging potential approaches to this dilemma.

Objectives
Following completion of this programme, participants should be better able to:
- Describe the current global status of diagnosis, treatment, and survival of prostate cancer.
- List limitations to prostate-specific antigen as a tool for diagnosing prostate cancer, guiding treatment, and monitoring patient response to therapy.
- Discuss the challenges of using biopsy to diagnose prostate cancer.
- Describe PCA3 and the possible implications of its use to improve the clinical management of prostate cancer.
Symposium

17:30 - 19:00 Improving management of prostate cancer: Are all LHRH agonists equal?

*Room Blue Level 2*

**Chair:** C.C. Schulman, Brussels (BE)

**Introduction**
C.C. Schulman, Brussels (BE)

**Management of prostate cancer: Global strategies**
A. Alcaraz, Barcelona (ES)

**Importance of optimal testosterone suppression**
B. Tombal, Brussels (BE)

**Eligard®: Advantages for optimal testosterone control**
R. Berges, Cologne (DE)

**Eligard® 6 - the new treatment paradigm in prostate cancer**
O. Sartor, Boston (US)

**Discussion and take home messages**
C.C. Schulman, Brussels (BE)

**Aims and objectives**
The management of prostate cancer remains a key challenge for physicians. Luteinising hormone-releasing hormone (LHRH) agonists have become the treatment of choice for patients diagnosed with advanced prostate cancer. Treatment with LHRH agonists aims to achieve a rapid and sustained suppression of serum testosterone levels with minimal breakthrough responses. During the symposium, global strategies for managing prostate cancer as well as the role of LHRH agonists will be discussed. Additionally, the importance of optimal testosterone suppression and the potential advantages of a new LHRH agonist formulation Eligard® will be reviewed.

Sponsored by ASTELLAS
Symposium

Targeting patient and partner satisfaction: Insights into the functional and emotional benefits of Viagra®

17:30 - 19:00 Targeting patient and partner satisfaction: Insights into the functional and emotional benefits of Viagra®

Chair: A. Martin-Morales, Malaga (ES)

eURO Auditorium Level 1

Introduction
A. Martin-Morales, Malaga (ES)

Optimising treatment in patients with ED: The importance of establishing treatment goals
R. King, Victoria (AU)

The science of sex: The mechanisms underlying hard erections
A.L. Burnett, Baltimore (US)

Mutual satisfaction: The emotional benefits of hard erections
J. Buvat, Lille (FR)

Conclusion
A. Martin-Morales, Malaga (ES)

Aims and objectives
Erectile dysfunction (ED) is an emotional and a physical burden for patients and their partners and has a significant impact on their quality of life. Because ED continues to be bothersome if treatment is suboptimal, treatment should be targeted to patients based on their therapeutic goals. Many patients report that what they want from their ED medication are hard erections, improved sexual relations, and partner satisfaction.

In this symposium, information will be presented that highlights the ability of Viagra® to deliver hard erections. In addition, preliminary data on the mechanisms underlying the physiology of erection hardness will be shared. Preclinical findings suggest a possible relationship between these mechanisms and the distinct attributes of Viagra. Data on Viagra® will be presented that support the correlation between erection hardness and patient-partner satisfaction.

Participants in this symposium will have a better understanding of the significant relationship between improved function and emotional benefits when treating patients with ED and of the importance of having a treatment goal and optimising therapy to meet that goal.
Symposium

Exploring the limits of 5α-reductase inhibitors in prostate cancer prevention, detection and treatment

Room Concorde 2 Level 4

Chair: I. Thompson, San Antonio (US)

Introduction
I. Thompson, San Antonio (US) con2-7-1340

How can we change the lifecycle of prostate cancer?
I. Thompson, San Antonio (US) con2-7-1350

Part 1: Research on 5α-reductase inhibitors in prostate cancer chemoprevention and treatment: From bench to bedside

How does the latest basic science research inform future clinical practice?
J.A. Schalken, Nijmegen (NL) con2-7-1360

How will recent clinical studies with 5α-reductase inhibitors in prostate cancer change clinical practice?
I. Thompson, San Antonio (US) con2-7-1370

Part 2: The impact of 5α-reductase inhibitor-based chemoprevention on public health and clinical practice strategies

What are the potential public health effects of prostate cancer chemoprevention?
F.H. Schröder, Rotterdam (NL) con2-7-1380

What are the potential effects of prostate cancer chemoprevention on clinical practice?
N. Fleshner, Toronto (CA) con2-7-1390

Discussion

Conclusion
I. Thompson, San Antonio (US) con2-7-1410

Aims and objectives
The introduction of the 5α-reductase inhibitors (5ARIs) heralded a new era of medical therapy for the treatment of benign prostatic hyperplasia. The 5ARIs were designed to limit the androgen drive that fuels continued prostate growth in ageing men. It was also evident from early in vitro studies that the 5ARIs had an inhibitory effect on the growth of prostate cancer cells, as well as inducing their apoptosis. Coupled with their ability to inhibit the synthesis of dihydrotestosterone, whilst maintaining testosterone levels, the 5ARIs had the potential to impact prostate cancer lifecycle coupled with a more favourable adverse event profile than androgen ablation. During this symposium we will explore what is known concerning the effects of 5ARIs on prostate cancer prevention, detection and treatment. The symposium will begin with a ‘view from the bench’ of what is known at a cellular and molecular level concerning 5ARI action on the prostate. We will then examine what the Prostate Cancer Prevention Study has taught us concerning the potential of 5ARIs as a chemopreventive strategy, and how they impact prostate cancer detection. These findings will then be placed into a population context, examining the implications of 5ARI-based chemoprevention on screening, detection and management of prostate cancer. Finally, the practical implications of the chemoprevention for daily practice will be considered, including the impact of 5ARIs on the use of PSA, and how men suitable for chemoprevention might be identified.
**Friday, 7 April - EAU Programme**

**Symposium**

17:30 - 19:00

**Molecular diagnostics in bladder cancer management: The UroVysion experience**

Room **Havana Level 3**

**Chair:**
J.J.M.C.H. De La Rosette, Amsterdam (NL)

**Introduction**
J.J.M.C.H. De La Rosette, Amsterdam (NL)

**Current challenges in bladder cancer management: Where do we go from here?**
J.J.M.C.H. De La Rosette, Amsterdam (NL)

**Understanding bladder cancer - implications for the use of UroVysion FISH**
G. Sauter, Hamburg (DE)

**Approaches to bladder cancer diagnosis and management: The non-invasive way**
A. Pycha, Bolzano (IT)

**Conclusion**
J.J.M.C.H. De La Rosette, Amsterdam (NL)

**Aims and objectives**
Modern molecular diagnostic methods such as fluorescence-in-situ hybridisation (FISH) can significantly improve the management of urological cancer. Based on genetic profiling by comparative genomic hybridisation and FISH, it has recently been shown that there appear to exist two fundamentally different entities of bladder neoplasia, paTaG1/G2 and paTaG3, pT1-4, with the first conferring an extremely low risk of progression, and the latter with high aggressive growth potential. Regular monitoring for bladder tumour recurrence and progression is important and can be managed with unprecedented diagnostic accuracy by employing FISH. FISH uses DNA probes to identify chromosomal abnormalities (chromosomal change is the earliest event associated with cancer). FISH is a non-invasive method based on urine specimen testing and offers higher sensitivity than cytology at comparable specificity, independent of tumour stage and grade. The technique is not affected by ongoing BCG immunotherapy and allows for clear decision-making in the case of atypical or equivocal cytology results. FISH detects signs of malignancy at the molecular level with the capability of tumour detection long before clinical symptoms develop, thereby providing the advantages of earlier diagnosis and therapeutic intervention. The combination of FISH and cystoscopy offers the best available sensitivity and specificity. The sessions will address current issues in management of bladder cancer with a special emphasis on FISH. Both clinical and technical aspects will be presented and discussed.

**Sponsored by ABBOTT MOLECULAR**
**Symposium**

**OAB: What matters to the patient?**

**Chair:** U. Jonas, Hanover (DE)

**Introduction**
U. Jonas, Hanover (DE)

**Efficacy/safety measures**
P. Tootzs-Hobson, Birmingham (GB)

**Treatment persistence, long term management**
C. Hampel, Mainz (DE)

**QoL, patient satisfaction/preference, patient-oriented goals**
P. Sand, Winnetka (US)

**Conclusion**
U. Jonas, Hanover (DE)

**Aims and objectives**
The latest systematic review and meta-analysis have confirmed that antimuscarinics are safe and efficacious in treating overactive bladder (OAB). Yet, significant differences exist between the antimuscarinics in terms of adverse event profile, withdrawal rate, efficacy outcome and quality of life (QoL). The main challenge of the physician remains fulfilment of the patient’s expectations and treatment. Treatment persistence has indeed been found low with each antimuscarinic in daily practice. The symposium will discuss how objective measures of QoL and long-term treatment persistence matter to the patient. What can we expect from patient satisfaction and patient-oriented goals? The symposium will propose the best clinical data mix for selecting a treatment in OAB.
Symposium

Prostate cancer: Optimising treatment strategy to meet our patients’ needs - working together to improve standard of care

17:30 - 19:00

Room Bordeaux Level 3

Chair: J.M. Fitzpatrick, Dublin (IE)

Introduction
J.M. Fitzpatrick, Dublin (IE)  bord-7-1520

The need for improved therapeutic strategies for patients with metastatic hormone-refractory prostate cancer
J.B. Anderson, Sheffield (GB)  bord-7-1530

New hope for patients with metastatic hormone-refractory prostate cancer
R. De Wit, Rotterdam (NL)  bord-7-1540

Treatment of prostate cancer in the 21st century – future directions
M. Eisenberger, Baltimore (US)  bord-7-1550

A multidisciplinary team approach for the optimal clinical management of metastatic hormone-refractory prostate cancer - case studies
J.M. Fitzpatrick, Dublin (IE)  bord-7-1560

Conclusion
J.M. Fitzpatrick, Dublin (IE)  bord-7-1570

Aims and objectives
Metastatic hormone-refractory prostate cancer (mHRPC) is no longer considered a chemoresistant disease. The recent publications of the TAX 327 and SWOG 99-16 trials demonstrate that three-weekly docetaxel in combination with prednisone is the first and only chemotherapy to exhibit significant improvements in overall survival in patients with mHRPC. Furthermore, this survival benefit is accompanied by a significant improvement in the quality of life of patients with mHRPC. These findings represent a tremendous advance in the treatment of mHRPC and firmly establish docetaxel as the new standard of care for these patients. As such, they also question traditionally held perceptions regarding the use of chemotherapy in patients with mHRPC. This symposium aims to facilitate discussion of the precise definition of mHRPC and to address the optimal time at which patients should be considered eligible for chemotherapy. In addition, while addressing the manageability of docetaxel, this symposium aims to demonstrate that docetaxel therapy can benefit all mHRPC patient groups, including asymptomatic, symptomatic and elderly patients. The potential for the future use of docetaxel in the adjuvant setting will also be discussed. Participants will be encouraged to address the need for a multi-disciplinary team approach, through consultation/partnership of urologists and oncologists, to achieve a practical method to facilitate the identification of the most appropriate treatment strategy for patients with mHRPC.
Symposium
Targeted agents in the management of renal cell carcinoma (RCC): The role of the urologist

Room Concorde 1 Level 4

Chair: J-J. Patard, Rennes (FR)

Welcome and introduction
J-J. Patard, Rennes (FR)  con1-7-1580

RCC: Prognostic factors and patient selection
A. Belldegrun, Los Angeles (US)  con1-7-1590

Current treatment in advanced RCC: Impact of targeted therapies in the management of RCC
J. Bellmunt, Barcelona (ES)  con1-7-1600

New perspectives: An oral multikinase inhibitor in patients with advanced RCC
B. Escudier, Paris (FR)  con1-7-1610

Advanced therapy in RCC: Where are we?
T. Eisen, London (GB)  con1-7-1620

Looking ahead: Integrating new agents in the armamentarium of the urologist
J-J. Patard, Rennes (FR)  con1-7-1630

Conclusion
J-J. Patard, Rennes (FR)  con1-7-1640

Aims and objectives
In recent years, targeted therapies have come to the forefront of attention in the increasingly sophisticated field of cancer therapeutics. In light of these new developments, this satellite symposium will focus on the role of the urologist in applying these therapies to the management of RCC. The programme will be driven by a panel of international experts who will lead discussions of prognostic factors, patient selection and the impact of targeted treatments on outcomes for patients with advanced RCC. The potential of targeted therapeutics as adjuvant RCC therapy will be reviewed and associated trials will be described.
# Sub-plenary session

## Sub-plenary session 15

**Room 252 Level 2**

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<tr>
<th>Time</th>
<th>Event</th>
<th>Speaker</th>
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<tr>
<td>07:45 - 08:00</td>
<td><strong>Section highlights of the European Society of Uro-Technology (ESUT)</strong></td>
<td>J.J.M.C.H. De La Rosette, Amsterdam (NL)</td>
<td>252-8-0000</td>
</tr>
<tr>
<td>08:00 - 08:15</td>
<td><strong>Section highlights of the European Organisation for Research and Treatment of Cancer Genito-Urinary Group (EORTC-GU)</strong></td>
<td>Z. Kirkali, Izmir (TR)</td>
<td>252-8-0010</td>
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<tr>
<td>08:15 - 08:30</td>
<td><strong>Section highlights of the European Society of Oncological Urology (ESOU)</strong></td>
<td>A. Govorov, Moscow (RU)</td>
<td>252-8-0020</td>
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<tr>
<td>08:30 - 08:45</td>
<td><strong>Section highlights of the European Society of Andrological Urology (ESAU)</strong></td>
<td>P. Verze, Naples (IT)</td>
<td>252-8-0030</td>
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**Moderator:** U. Jonas, Hanover (DE)
Sub-plenary session

07:45 - 08:45 Sub-plenary session 16

Moderator: P.F.A. Mulders, Nijmegen (NL)

eURO Auditorium Level 1

07:45 - 08:15 State-of-the-art lecture Nomograms in prostate cancer

Speaker: M. Kattan, Cleveland (US)

eURO-8-0040

Aims and objectives
The ability to make predictions is an essential part of any medical decision. It is particularly crucial when considering treatment of clinically localised prostate cancer. Nomograms and prediction model software typically provide the most accurate predictions. Many nomograms have been developed for all prostate cancer clinical states. Some of these are discussed in this review, as is their utility in facilitating decision-making and informed consent.

08:15 - 08:45 State-of-the-art lecture Imaging strategies in prostate cancer

Speaker: J.L. Descotes, Grenoble (FR)

eURO-8-0050

Aims and objectives
The aim of this lecture is firstly to evaluate the usual place and limitations of imaging techniques in different clinical situations, and then to give an overview of the prospects of transrectal ultrasonography (TRUS) in the detection of prostate cancer and of magnetic resonance imaging (MRI) for local evaluation of the tumour. Concerning prostate cancer detection, it is commonly held that the evolution of TRUS technology (high-frequency transducers) allows visualisation of the prostate's internal architecture and that transrectal random biopsies are now the gold standard method of diagnosis of prostate cancer. However, it has also been well established that TRUS is an imperfect tool due to the low specificity and sensitivity of hypoechoic lesions. New imaging strategies involve: 1. The use of Dopper ultrasound with targeted biopsy is assessed by the neovascularity of prostate cancer. The positive predictive value seems higher than gray-scale TRUS in some studies. 2. Contrasted enhanced ultrasound is a different way of visualising small neovessels in the tumour. After intravenous administration of contrast, microbubbles are extremely reflective and their presence in small blood vessels could improve cancer detection. Accurate evaluation of these new technologies is essential to determine their real place in different clinical situations. Concerning local staging, MRI can be helpful if the examination is performed within 4 weeks after the biopsy and if the radiologist has a good expertise in prostate cancer. The variability of sensitivity and specificity in literature is a limitation for the current use of MRI. Intermediate- and poor-prognosis tumours are good indications especially for evaluation of the seminal vesicle. Dynamic MRI and metabolic evaluation of citrates and choline by spectro-MRI is under evaluation by expert centres. These techniques could add information on tumour volume and tumour aggressiveness before radical prostatectomy or for diagnosis of local recidive after radiotherapy.
Sub-plenary session

07:45 - 08:15 State-of-the-art lecture Small renal tumours: Pre- and postoperative evaluation

**Speaker:** M. Marberger, Vienna (AT)

**Aims and objectives**
Small renal tumours, usually detected by chance in asymptomatic patients, represent a major proportion of kidney tumours today. About 20% of these are benign, some of the malignant lesions have a low potential for progression and some tend to spread early in spite of their size. Therapy therefore ranges from watchful waiting, minimally invasive energy ablation, partial nephrectomy to radical nephrectomy. A safe treatment decision cannot be based on tumour size at diagnosis only, but should follow advanced imaging and biopsy algorithms at diagnosis and, if treatment dependent, at follow-up.

08:15 - 08:45 Urological Research Society lecture Management of BCG failures in superficial bladder cancer

**Speaker:** M. Droller, New York (US)

**Aims and objectives**
Because BCG failure in treatment of “superficial” bladder cancer may indicate impending progression, it is important to understand the biologic potential of the cancer diathesis both from the outset (i.e. when it presented initially) and at treatment failure. The objectives of this presentation are to describe the several features of “superficial” bladder cancer that may be used in characterizing the intrinsic biologic potential, risk for aggressive behavior, and expression of treatment failure of the different cancer diatheses, use these as the context for evaluating results of various treatment approaches with BCG, and describe alternative approaches to consider in patients who have failed BCG therapy.
## Sub-plenary session 18

### 07:45 - 08:45

**Moderator:** C.C. Abbou, Creteil (FR)

### 07:45 - 08:15

**State-of-the-art lecture** The evolution of urological training in Europe

**Speaker:** E. Kiely, Cork (IE)

**Aims and objectives**

In the latter years of the 19th century urology evolved mainly from general surgery, but also from dermatology and venereology. The major urological advances in the 20th century were surgical but it appears now that the evolution of urological practice is, and will be, toward a “more medical” specialty.

Urological training has largely run parallel to that of surgery; adopting the apprenticeship model that was best suited to learning the “craft” of urological surgery. There is however an increasing trend toward trainees learning surgery in a simulated environment, which demands less from the trainer. Further challenges to the older approach is the increased non-surgical diagnostic and therapeutic workload resulting both from alterations in clinical practice and changes in population demographics, the feminisation of medical graduates, the efforts at harmonisation of training and accreditation in Europe, and the limitations placed by the European working-time directive.

It is vital that the further evolution of urological training be directed from within the speciality.

### 08:15 - 08:45

**European Urological Scholarship Programme (EUSP)**

**Introduction on the EUSP**

C.C. Abbou, Creteil (FR)

**Prize for the Best EUSP Scholar 2005**

**Second Prize for the Best EUSP Scholar 2005**
Sub-plenary session

Sub-plenary session 19

Moderator: J.A. Schalken, Nijmegen (NL)

07:45 - 08:15 State-of-the-art lecture The long term outcome of medical treatment for BPH

Speaker: J.M. Fitzpatrick, Dublin (IE)

08:15 - 08:45 State-of-the-art lecture How to handle high-risk infections in urology

Speaker: M. Lafaurie, Paris (FR)

Aims and objectives
The objective of this talk is to present and discuss three clinical cases that will each focus on a specific infectious issue frequently met in urology. Using these cases, the following points will be addressed:
1. Onset of fever in a patient receiving intravesical BCG therapy - the diagnostic procedures and therapeutic options will be discussed.
2. Antibiotic prophylaxis before prostate biopsy - the factors contributing to the choice and duration of antibiotics will be discussed.
3. Febrile complications following insertion of double-J ureteral stents - diagnostic and treatment strategies will be presented.
Plenary session

08:45 - 13:00  

Plenary session 3  

**Chairs:**  
L. Boccon-Gibod, Paris (FR)  
M.P. Wirth, Dresden (DE)  

08:45 - 09:10  

Award session 3  

- Prize of the Congress President for the best presentation on clinical urology  
- Prize of the French Urological Society  
- Prize for the Best Paper published on Fundamental Research  
  Supported by an unrestricted educational grant from SANOFI-AVENTIS  
- Prize for the Best Paper published on Clinical Research  
  Supported by an unrestricted educational grant from SANOFI-AVENTIS  
- Prize for the Best Scientific Paper published in European Urology in the year 2005  
  Supported by an unrestricted educational grant from ELSEVIER  
- Third prize for the Best Abstract (oncology)  
- Third prize for the Best Abstract (non-oncology)  
- Second prize for the Best Abstract (oncology)  
- Second prize for the Best Abstract (non-oncology)  
- First prize for the Best Abstract (oncology)  
  Supported by an unrestricted educational grant from KARL STORZ GMBH & CO.KG  
- First prize for the Best Abstract (non-oncology)  
  Supported by an unrestricted educational grant from KARL STORZ GMBH & CO.KG  
- 2006 Award for the Best Booth  

09:10 - 09:25  

State-of-the-art lecture  
**History of urology in France**  

**Speaker:**  
P. Teillac, Paris (FR)  

09:25 - 09:45  

EAU Guidelines  
**What’s new in 2006?**  

**Chair:**  
G. Aus, Göteborg (SE)  

**Speakers:**  
B. Lobel, Rennes (FR)  
T. Loch, Flensburg (DE)  
A.P.M. Van Der Meijsen, ’s-Hertogenbosch (NL)  

Supported by an unrestricted educational grant from SANOFI-AVENTIS  

Supported by an unrestricted educational grant from KARL STORZ GMBH & CO.KG  

Supported by an unrestricted educational grant from ELSEVIER  

Supported by an unrestricted educational grant from KARL STORZ GMBH & CO.KG  

- **eURO-8-0130**  
- **eURO-8-0140**  
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- **eURO-8-0180**  
- **eURO-8-0190**  
- **eURO-8-0200**  
- **eURO-8-0210**  
- **eURO-8-0220**  
- **eURO-8-0230**  
- **eURO-8-0240**  
- **eURO-8-0250**  
- **eURO-8-0260**  
- **eURO-8-0270**  
- **eURO-8-0280**
Aims and objectives
The frontline of knowledge in urology is moving forward rapidly. In order to keep up with the latest, high-quality information in the field, the EAU Guidelines are updated frequently. The aim of this presentation is to show how the EAU guidelines may provide you with the latest information in a readily accessible way. The hot news from selected guidelines updated this year will be presented in this session.

09:45 - 10:05 State-of-the-art lecture The dilemma of over detection and over treatment of prostate cancer

Speaker: P.C. Albertsen, Farmington (US)

Aims and objectives
This presentation will review the epidemiology of prostate cancer, including the impact of screening on the changing incidence of this disease. The lecture will discuss the following:
1. The concept of lead time and how it impacts survival statistics.
2. The concept of length time and how it influences the type of cancers identified.
3. The impact of altering the prostate-specific antigen threshold on the incidence of prostate cancer.
4. How finding more cancers may or may not impact mortality from this disease.
5. The relative efficacy of aggressive intervention.

10:05 - 10:40 Round table discussion Radical prostatectomy: To do or not to do

Chair: U.E. Studer, Berne (CH)

Introduction
Panel:
- P.C. Albertsen, Farmington (US)
- A. Bill-Axelson, Uppsala (SE)
- L. Boccon-Gibod, Paris (FR)
- F. Hamdy, Sheffield (GB)

Conclusion

Aims and objectives
Prostate cancer is a major cause of death in men, thus justifying its prevention and treatment. On the other hand, the number of diagnosed prostate cancers exceeds its death toll several-fold. Over-treatment is possible. Furthermore, despite a rapidly increasing number of radical prostatectomies performed, mortality from prostate cancer has only slowly decreased. These and other issues will be discussed, including results from SPCG-4 and the UK ProtecT study.

10:40 - 11:00 State-of-the-art lecture The role of PSA kinetics in the management of prostate cancer

Speaker: P-A. Abrahamsson, Malmö (SE)

Aims and objectives
For more than a decade, the prostate-specific-antigen (PSA) test has been a way for doctors to gauge prostate cancer risk. Men whose PSA levels, measured by a simple blood test, rose above a specific level were considered likely to harbour cancer cells within their prostate gland. Currently, PSA testing helps provide evidence that the disease is present and also indicates how aggressive it is. However, the value of PSA in identifying patients increased risk of prostate cancer is controversial. PSA screening has resulted in a dramatic stage migration towards small volume cancer. Stamey and others have, therefore, questioned the utility of an isolated PSA rea-
ding in the context of prostate cancer diagnosis. The ongoing debate over PSA measurement has only recently began to incorporate the additional value derived from using PSA kinetics for patient decision-making.

11:00 - 11:35  **Round table discussion**  The optimal management of the patient with hormone resistant prostate cancer

**Chair:** N.W. Clarke, Manchester (GB)

**Introduction**  
Oncologist: J. Bellmunt, Barcelona (ES)  
Radiotherapist: S. Nilsson, Malmö (SE)  
Urologist: V. Ravery, Paris (FR)

**Conclusion**

**Aims and objectives**  
The aims of this discussion are to highlight the spectrum of clinical morbidity associated with hormone-refractory prostate cancer (HRPC), to emphasise the existing therapeutic options and to provide state-of-the-art information about developments in cytotoxic chemotherapy and new agents used alone or in combination in the treatment of HRPC. The main objectives are to provide an up-to-date overview of the nature of the disease and its treatment, and most importantly, to emphasise that HRPC is best managed by a coordinated multi-disciplinary team involving surgeons, oncologists and nursing/palliative care. Individual objectives: Dr Bellmunt - To focus on the use of chemotherapy, the development of novel agents alone or in combination, and to speak about clinical trials and their importance in this disease. Dr Nilsson - To provide an overview of the use of radiotherapy and bone-directed treatments in HRPC. The overview should include the diagnosis and management of pathological fracture and cord compression. Dr Ravery - To provide an overview of the urological complications associated with the disease, including the management of lower urinary tract symptoms and obstructive uropathy. In addition, attention should be focussed on the holistic care of the patient and the general supportive management of problems such as marrow failure. Particular emphasis should be placed on the role of the urologist in coordinating the general management of the spectrum of problems engendered by the disease.

11:35 - 13:00  **Souvenir Session from the EAU Scientific Committee**

**Oncology**  
X. Cathelineau, Paris (FR)

**Prostate disease**  
C. Selli, Pisa (IT)

**Minimally invasive therapies**  
G. Janetschek, Linz (AT)

**Paediatrics**  
G.A. Bogaert, Leuven (BE)

**Stones disease**  
C. Llorente, Madrid (ES)

**Reconstruction andrology**  
I. Eardley, Leeds (GB)
ESU Course 1

Paediatric urology for the adult urologist: A practical update

Room 341 Level 3

09:00 - 12:00

Chair: J.M. Nijman, Groningen (NL)

Obstructive uropathy: What to do when, from neonate till puberty
G.A. Bogaert, Leuven (BE) 341-6-1670

How to deal with congenital malformations of the external genitalia, when is surgery indicated and how to do it
S. Tekgül, Ankara (TR) 341-6-1680

Urinary infection, reflux and voiding dysfunction: New insights in pathology, diagnostic work-up and management
J.M. Nijman, Groningen (NL) 341-6-1690

Aims and objectives
During this course an update is provided on common problems of the genito-urinary tract in children by means of state-of-the-art lectures, cases and interactive participation. Also the interaction between paediatric urologist, adult urologist, gynaecologist and paediatrician will be discussed. Corrections of congenital malformations of the urogenital tract have major implication for the quality of life, but also on long-term follow-up and future interventions and treatment of complications. The course is in particular for general urologists and those in training. Participants are encouraged to participate in the course as much as possible: there will be ample time for discussion and presentation of cases.

Registration fee excluding VAT
EAU members, residents € 40
Non-EAU member € 60

ESU courses are EU-ACME accredited with 1.5 credits per hour
ESU Courses, 6 April

ESU Course 2

09:00 - 12:00

Prostate cancer - screening, diagnosis and staging

Chair: P-A. Abrahamsson, Malmö (SE)

Screening
F. Hamdy, Sheffield (GB)

Diagnosis and staging
P-A. Abrahamsson, Malmö (SE)

Aims and objectives

The incidence of prostate cancer has increased dramatically during the last 10-15 years and it is now the commonest cancer in males in developed countries. The increase is mainly caused by the increasing use of opportunistic screening or case-finding based on the use of prostate-specific antigen (PSA) testing in serum. With this approach, prostate cancer is detected 5-10 years before giving rise to symptoms and on average 17 years before causing the death of the patient. While this has led to detection of prostate cancer at a potentially curable stage, it has also led to substantial over diagnosis, i.e. detection of cancers that would not surface clinically in the absence of screening. A major challenge is thus to identify the cases that need to be treated while avoiding to diagnose patients who will not benefit from being diagnosed and who will only suffer from the stigma of being a cancer patient. Therefore, prognostic markers that could predict which patients need to be diagnosed and which do not, is of major importance. The aim of this course is therefore designed for urological trainees and established urologists, who wish to update themselves on latest information regarding screening, diagnosis and staging in prostate cancer. The course will stimulate interaction with the audience and in part be based on a number of case-scenarios for discussion with the delegates, followed by brief state-of-the-art presentations. In addition, emphasis will be placed on controversial issues and recent progress in terms of diagnostic tools, staging procedures and prognostic factors.

At the conclusion of this course, the participants should get better insights in terms of:

• What are the best approaches towards screening and early detection of prostate?
• How can the subgroup of patients who will benefit the most from early therapy be identified?
• For which patients is an approach of “watchful waiting” more appropriate than active therapy?

Registration fee excluding VAT
EAU members, residents € 40
Non-EAU member € 60

ESU courses are EU-ACME accredited with 1,5 credits per hour
ESU Course 3

Evaluation and management of female pelvic floor disorders

Room 342b Level 3

Chair: W. Artibani, Padua (IT)

Female pelvic floor disorders: The clinical picture
W. Artibani, Padua (IT) 342b-6-1720

How to evaluate female pelvic floor disorders
E.J. Messelink, Amsterdam (NL) 342b-6-1730

Female pelvic floor disorders conservative management
E.J. Messelink, Amsterdam (NL) 342b-6-1740

Pelvic floor surgical reconstruction
W. Artibani, Padua (IT) 342b-6-1750

Pelvic floor laparoscopic reconstruction
R. Gaston, Bordeaux (FR) 342b-6-1760

Aims and objectives
The evaluation and management of female pelvic floor disorders request a multi-dimensional and trans-disciplinary approach. Urologists should know how to appropriately assess the anterior, middle and posterior vaginal/pelvic floor’s compartments by means of physical examination, imaging and functional assessment, bearing in mind the anatomic-functional unity of pelvic floor. Conservative management is the first line approach to the majority of pelvic floor disorders. Its role and outcome will be presented based on ICI recommendations. Surgical reconstruction (vaginal / supra-pubic) of pelvic floor disorders can be carried out by a team of surgeons (urologists, gynaecologists and colorectal surgeons) or by a fully trained pelvic floor surgeon. Careful planning and intra-operative flexibility are the key to success. Laparoscopic reconstruction of female pelvic floor is the forefront approach and yields an appealing alternative to conventional surgery. Participants will be updated by means of balanced reviews of the literature, existing guidelines, personal experience of lecturers and real-life clinical cases.

Registration fee excluding VAT
EAU members, residents € 40
Non-EAU member € 60

ESU courses are EU-ACME accredited with 1.5 credits per hour
ESU Courses, 6 April

ESU Course 4

09:00 - 12:00

Update on benign penile and scrotal disorders

Room 343 Level 3

Chair: I. Romics, Budapest (HU)

Scrotal disorders
I. Romics, Budapest (HU) 343-6-1770

Penile disorders: Peyronie’s disease, BXO
M.M. Fisch, Hamburg (DE) 343-6-1780

Penile prosthesis
D. Ralph, London (GB) 343-6-1790

Aims and objectives
The most serious benign scrotal disease is the Fournier gangrene. It is a bacterial infection necrotising the skin and the fascia of the scrotum from different ethiology. Its therapy involves the intensive care in case of shock and septicaemia and urgent surgical intervention. It is usually performed in more steps and involves reconstruction and plastic surgery of the scrotum and penis, sometimes the groin and lower part of the abdominal skin. Trauma, benign tumours and different skin diseases will also be discussed. The aim of the session is to provide an update on the ethiology and treatment options of the Peyronie’s diseases. Indication and the decision of conservative and operative treatment modalities will be discussed. BXO is a frequent disease, its treatment is controversial. Management of BXO will be introduced. The penile prosthesis is widely used in primary organic erectile dysfunction and after radical prostatectomy, cystectomy as well. Technique, types of prosthesis, follow up, management of complication are the most important issues of penile prosthesis.

Registration fee excluding VAT
EAU members, residents € 40
Non-EAU member € 60

ESU courses are EU-ACME accredited with 1.5 credits per hour
ESU Course 5

Lower urinary tract dysfunction and urodynamics

Room 351 Level 3

Chair: P. Abrams, Bristol (GB)

The scientific basics of urodynamics
P. Abrams, Bristol (GB)

Urodynamics - getting philosophy and technique correct
P. Abrams, Bristol (GB)

Urodynamics in female urology and neurology
J.R. Shah, London (GB)

Urodynamics in the child and in men
S. Madersbacher, Vienna (AT)

Aims and objectives

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 children, men, women and neurological patients

Registration fee excluding VAT
EAU members, residents € 40
Non-EAU member € 60

ESU courses are EU-ACME accredited with 1.5 credits per hour
ESU Courses, 6 April

ESU Course 6

Laparoscopy for beginners

Chair: A.D. Joyce, Leeds (GB)

Indications for laparoscopy
A.D. Joyce, Leeds (GB) 353-6-1840

Instrumentation and techniques of haemostasis
X. Cathelineau, Paris (FR) 353-6-1850

Access and pneumoperitoneum
A.D. Joyce, Leeds (GB) 353-6-1860

Avoiding complications
X. Cathelineau, Paris (FR) 353-6-1870

Aims and objectives
Training in urological laparoscopic surgery in Europe is presently inadequate because of several factors:
• A shortage of designated training centres
• A shortage of recognised trainers
• Lack of appropriate facilities, either equipment, expertise or support. Urologists interested in laparoscopy must be properly trained in order to minimise the risk of potential complications and to ensure patient safety.

This course aims to provide the delegate with the core knowledge over the correct use of the imaging system, the specialised instrumentation and the important protocols for accessing and exiting the abdomen, including how to recognise and avoid potential complications. The highlight of this revised course will be the use of video clips to illustrate many of the essential points and to promote discussion amongst the delegates.

Registration fee excluding VAT
EAU members, residents € 25
Non-EAU member € 40

ESU courses are EU-ACME accredited with 1,5 credits per hour
ESU Course 7

Retropubic radical prostatectomy - tips, tricks and pitfalls

Room 341 Level 3

Chair: H. Van Poppel, Leuven (BE)

Surgical anatomy
B. Djavan, Vienna (AT)

Step by step radical retropubic prostatectomy
H. Van Poppel, Leuven (BE)

Tips, tricks and pitfalls
B. Djavan, Vienna (AT)

Treatment of complications
H. Van Poppel, Leuven (BE)

Discussion and interaction

Aims and objectives
In many parts of Europe, open retropubic radical prostatectomy is still the gold standard for treating localised prostate cancer. Although laparoscopic radical prostatectomy is getting more popular in selected centers, the open surgical approach will still be the most often performed operative procedure in many countries throughout Europe in the coming years. Localised prostate cancer is more and more detected in its earlier stages and surgery offers undoubtedly the best local control. The urologist’s surgical skill must be outstanding and the urological community is responsible to guarantee optimal surgical quality through adequate training. The competition with external beam radiotherapy, brachytherapy and novel minimally invasive techniques, like cryosurgery and HIFU should encourage young urologists to optimally perform the surgical resection with the best possible tumour control and the least impact on continence and potency. This course aims at bringing to the modern urologist the different technical steps of the classical “retropubic prostatectomy” with emphasis on the preservation of continence and potency and discusses the special tips and tricks that must enable every contemporary urologist to obtain good results with a minimum of complications. Also, the prevention and treatment of complications are discussed. This teaching course is a must for the elder resident and the younger urologist who begins his career but also the well trained urologists that are not treating many patients with localised prostate cancer, will benefit. The participants will get inside in the detailed surgical anatomy, the pre-operative measures, the intra-operative steps of a very systematic and safe operation. Also the experienced uro-oncological surgeon will enjoy the tricks and pitfalls and will learn how to solve intra- and postoperative complications.

Registration fee excluding VAT
EAU members, residents € 40
Non-EAU member € 60

ESU courses are EU-ACME accredited with 1.5 credits per hour
# ESU Course 8

**ESU Courses, 6 April**

**12:30 - 15:30**

**Chronic pelvic pain syndromes (CPPS) with special focus on chronic prostatitis (CP) and painful bladder syndrome / interstitial cystitis (PBS/IC)**

<table>
<thead>
<tr>
<th>Topic</th>
<th>Presenter</th>
<th>Location</th>
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</thead>
<tbody>
<tr>
<td><strong>CPPS: Definitions, terminology and classification</strong></td>
<td>M. Fall, Göteborg (SE)</td>
<td>342a-6-1930</td>
</tr>
<tr>
<td><strong>CP: Definition, classification and etiology</strong></td>
<td>J. Nordling, Copenhagen (DK)</td>
<td>342a-6-1940</td>
</tr>
<tr>
<td><strong>CP: Diagnostic work up</strong></td>
<td>J.-J. Wyndaele, Antwerp (BE)</td>
<td>342a-6-1950</td>
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<tr>
<td><strong>CP: Treatment</strong></td>
<td>M. Fall, Göteborg (SE)</td>
<td>342a-6-1960</td>
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<tr>
<td><strong>PBS/IC: Definition, classification and etiology</strong></td>
<td>M. Fall, Göteborg (SE)</td>
<td>342a-6-1970</td>
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<tr>
<td><strong>PBS/IC: Diagnostic work up</strong></td>
<td>J. Nordling, Copenhagen (DK)</td>
<td>342a-6-1980</td>
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<tr>
<td><strong>PBS/IC: Treatment</strong></td>
<td>J.-J. Wyndaele, Antwerp (BE)</td>
<td>342a-6-1990</td>
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<tr>
<td><strong>Scrotal pain</strong></td>
<td>J. Nordling, Copenhagen (DK)</td>
<td>342a-6-2000</td>
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<tr>
<td><strong>Urethral syndrome</strong></td>
<td>M. Fall, Göteborg (SE)</td>
<td>342a-6-2010</td>
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<tr>
<td><strong>Neurological aspects of CPPS</strong></td>
<td>J.-J. Wyndaele, Antwerp (BE)</td>
<td>342a-6-2020</td>
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**Aims and objectives**

Painful diseases of the pelvis are not rare, but are poorly understood and constitutes one of the largest clinical challenges in urological practice. Definitions are often “soft” and consequently evaluation, classification and selection of proper treatment difficult. There have been a lot of activity within these areas during the last few years, and it is the scope of the course to bring the participants up to date, so after the course they can perform a relevant evaluation of patients with chronic pain syndromes in the pelvis and offer these patients the best treatment available today.

**Registration fee excluding VAT**

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<thead>
<tr>
<th>Category</th>
<th>Fee</th>
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<tbody>
<tr>
<td>EAU members, residents</td>
<td>€ 40</td>
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<tr>
<td>Non-EAU member</td>
<td>€ 60</td>
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ESU Course 9

Renal cell carcinoma - surgical aspects

Room 342b Level 3

12:30 - 15:30

Chair: Z. Kirkali, Izmir (TR)

Radical nephrectomy
Z. Kirkali, Izmir (TR) 342b-6-2030

Surgery for renal vein and vena cava invasion
G.H.J. Mickisch, Bremen (DE) 342b-6-2040

Laparoscopic surgery
D. Jacqmin, Strasbourg (FR) 342b-6-2050

Nephron sparing surgery
Z. Kirkali, Izmir (TR) 342b-6-2060

Surgery for difficult cases
G.H.J. Mickisch, Bremen (DE) 342b-6-2070

Surgery for local recurrence
D. Jacqmin, Strasbourg (FR) 342b-6-2080

Metastasectomy
G.H.J. Mickisch, Bremen (DE) 342b-6-2090

Other minimally invasive techniques
D. Jacqmin, Strasbourg (FR) 342b-6-2100

Aims and objectives
Renal cell carcinoma is a common and killer urologic malignancy in Europe. Despite the recent progress and developments in the therapy of advanced disease, surgery remains the mainstay of treatment in most cases. The aim of this course on surgery for RCC is to highlight the indications and show the surgical techniques for various clinical presentation types of RCC. Attendees for this course on RCC will be able to learn how to do open and minimally invasive surgery for localised and respectable RCC. Indications and techniques of open radical and nephron-sparing surgery will be shown with example cases and video presentations step by step. Similarly the laparoscopic surgical techniques will be presented using video clips. Despite earlier diagnosis, still a substantial number of patients are seen where difficult and more sophisticated surgery is needed. This will be addressed by real life cases and surgery for recurrences and metastases will also be addressed. The course also will deal with new minimally invasive techniques to destruct renal masses. This course is an excellent opportunity to learn the role and techniques of surgery in RCC for residents as well as for the practicing urologist. Don’t miss it if you see patients with RCC in you daily practice! At the end of the course the attendees will be able to understand the comprehensive role of surgery in RCC and learn how to perform:
• Open and laparoscopic radical nephrectomy
• Laparoscopic and open nephron-sparing surgery
• Surgery for venous invasion, metastases, local recurrences and difficult cases

Registration fee excluding VAT
EAU members, residents € 40
Non-EAU member € 60

ESU courses are EU-ACME accredited with 1.5 credits per hour
ESU Courses, 6 April

ESU Course 10

Management and outcome in invasive and locally advanced bladder cancer

12:30 - 14:30

Room 343 Level 3

Chair: G.N. Thalmann, Berne (CH)

Defining the problem - staging, grading, prognosticators of outcome
G.N. Thalmann, Berne (CH) 343-6-2110

Is cystectomy the safest?
G.N. Thalmann, Berne (CH) 343-6-2120

Update on neoadjuvant and adjuvant chemotherapy
C.N. Sternberg, Rome (IT) 343-6-2130

Cases - a practical approach
343-6-2140

Aims and objectives

This course will provide urologists with practical information to treat and counsel patients with invasive and locally advanced bladder cancer and focuses on the relevant principles involved in the management of this disease. Major themes covered in this session include treatment options for invasive bladder cancer and proper patient selection, management strategies for invasive and locally advanced disease and the current role of chemotherapy in both the neoadjuvant/adjuvant and metastatic disease settings. The course is very clinically oriented with lectures highlighted by case studies with audience participation. Objectives: After attending this course, the participants should be able to:

• Explain the rationale, patient selection and controversies regarding radical surgery for invasive and locally advanced bladder cancer
• Understand the rationale and limitations of nonsurgical approaches to the management of invasive and locally advanced bladder cancer
• Define the current role and results of neoadjuvant/adjuvant chemotherapy for invasive bladder cancer as well as chemotherapy used in the management of metastatic bladder cancer.

Registration fee excluding VAT
EAU members, residents € 25
Non- EAU member € 40

ESU courses are EU-ACME accredited with 1,5 credits per hour
ESU Course 11

Minimally invasive treatment for localised prostate cancer

Room 351 Level 3

Chair: G. Morgia, Sassari (IT)

Cryotherapy
G. Morgia, Sassari (IT) 351-6-2150

Brachytherapy
S. Machtens, Hanover (DE) 351-6-2160

HIFU
S. Thüroff, Munich (DE) 351-6-2170

Aims and objectives
The challenge of modern medicine is to increasingly use mini-invasive techniques.
Nowadays, while surgery and radio therapy must be considered the standard forms of treatment for prostatic cancer, nonetheless mini-invasive techniques are greeted with ever more enthusiasm by patients. In addition the first long term results, indispensable for correct oncological evaluation of the technique, are also being reported.
Brachytherapy, cryotherapy and HIFU must be recognised by urology and proposed for patients with prostate cancer, albeit only in cases where the indications are correct.
This course will demonstrate the techniques, the results and the complications of this procedure, highlighting those essential aspects which may sometimes make the use of these procedures preferable to conventional techniques.
Finally clinical cases will be discussed. Practical examples of the use of mini-invasive therapy will be examined, and there will be time for an exchange of opinions with the audience on the practical applications of the techniques.

Registration fee excluding VAT
EAU members, residents € 25
Non-EAU member € 40

ESU courses are EU-ACME accredited with 1.5 credits per hour
**ESU Courses, 6 April**

**ESU Course 12**

**Advanced course on laparoscopic prostatectomy**

**Room 353 Level 3**

*Chair:* C.C. Abbou, Creteil (FR)

**Introduction**
C.C. Abbou, Creteil (FR)  

**Laparoscopic anatomy of the prostate including the fascia and the bundles**
J-U. Stolzenburg, Leipzig (DE)

**Instruments**
C.C. Abbou, Creteil (FR)  
J-U. Stolzenburg, Leipzig (DE)  
P. Dubernard, Lyon (FR)

**Trocar position and technique of placement: Extra versus transperitoneal approach**
C.C. Abbou, Creteil (FR)  
J-U. Stolzenburg, Leipzig (DE)  
P. Dubernard, Lyon (FR)

**Steps of the procedure: Anterograde approach**
C.C. Abbou, Creteil (FR)  
J-U. Stolzenburg, Leipzig (DE)  
P. Dubernard, Lyon (FR)

**Steps of the procedure: Retrograde technique (video)**
P. Dubernard, Lyon (FR)

**Complications**
C.C. Abbou, Creteil (FR)  
J-U. Stolzenburg, Leipzig (DE)  
P. Dubernard, Lyon (FR)

**Conclusion**
C.C. Abbou, Creteil (FR)

**Aims and objectives**
Laparoscopic radical prostatectomy needs to be well standardised to be reproduced. For that we will give first precise information on the anatomy of the fascias and the bundles in order to have a better vision of the operative laparoscopic anatomy. The experts must then go thought each step of the surgery. For that, shorts well selected video clips will be presented and discussed successively: eg the best way to perform the space for the extraperitoneal approach, how to spare the bladder neck, to make easy the dorsal vein complex control, the anastomosis... Different aspects of the nerve sparing surgery will be addressed including the retrograde and the anterograde technique. The participants must understand the role of the surgeon and of the first assistant in order to have the best exposure. They will be aware of the risk of complications or difficulties for each part of the procedure. The tricks to shorten the operative time will be also discussed. Finally the results and the complications will be addressed. At the end of the session, the participant, If they are beginners, should have a better comprehension of each step of the technique and the way to start. If they are experienced, should improve, their technique by picking some important tricks This course will be presented by expert having more
than 1,000 procedures in their own hands. The participants must be ready to be active by asking questions or giving their own opinions.

**Registration fee excluding VAT**
- EAU members, residents: € 25
- Non-EAU member: € 40

ESU courses are EU-ACME accredited with 1.5 credits per hour.
ESU Courses, 6 April

ESU Course 13

Interventional therapies for BPH

15:00 – 17:00

Room 343 Level 3

Chair: M. Emberton, London (GB)

Introduction
M. Emberton, London (GB)

The role of open surgery
R.M. Kuntz, Berlin (DE)

TURP: Still the ‘gold standard’?
K.M. Anson, London (GB)

TUMT / TUNA - still up-to-date?
R.M. Kuntz, Berlin (DE)

Laser technology
K.M. Anson, London (GB)

Other treatment alternatives- update
K.M. Anson, London (GB)

Patient selection for invasive and instrumental management
M. Emberton, London (GB)

Case discussion

Aims and objectives
To update delegates on the relative harms and benefits of both established and novel interventions for BPH
• To create a classification of BPH interventions
• To create a reporting standard (for both harms and benefits) for these interventions
• To summarise the evidence base for each of these interventions
• To debate with the delegates a hierarchy of interventions
• To speculate on future trends

Registration fee excluding VAT
EAU members, residents € 25
Non-EAU member € 40

ESU courses are EU-ACME accredited with 1,5 credits per hour
### ESU Course 14

**The infertile couple - urological aspects**

**Room 351 Level 3**

<table>
<thead>
<tr>
<th>Time</th>
<th>Session</th>
<th>Presenter</th>
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<tbody>
<tr>
<td>15:00 - 17:00</td>
<td><strong>Diagnostic work-up, medical treatment</strong></td>
<td>W. Weidner, Giessen (DE)</td>
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<tr>
<td>15:00 - 17:00</td>
<td><strong>Pathophysiology, diagnosis and treatment of varicocele</strong></td>
<td>W. Aulitzky, Vienna (AT)</td>
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<tr>
<td>15:00 - 17:00</td>
<td><strong>Microsurgical refertilization</strong></td>
<td>W. Aulitzky, Vienna (AT)</td>
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<tr>
<td>15:00 - 17:00</td>
<td><strong>Sperm retrieval techniques, sperm preparation and genetic aspects of IVF/ICSI</strong></td>
<td>W. Weidner, Giessen (DE)</td>
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</tbody>
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#### Aims and objectives

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, focussing 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 inform about genetic aspects and stress the responsibility of the urologist as an adviser and gatekeeper for the treatment of the infertile couple.

#### Registration fee excluding VAT

- EAU members, residents: € 25
- Non-EAU member: € 40

ESU courses are EU-ACME accredited with 1.5 credits per hour.
ESU Courses, 6 April

ESU Course 15

15:00 - 17:00  
Advanced course on laparoscopic cystectomy

Room 353 Level 3

Chair: R.F. Van Velthoven, Brussels (BE)
Faculty: P.T. Piechaud, Bordeaux (FR)

Surgical anatomy (laparoscopic point of view)  353-6-2420
Material: Laparoscopic set  353-6-2430
Oncological prerequisites  353-6-2440
Technical protocol  353-6-2450
Results  353-6-2460

Aims and objectives
Illustrate from the surgical and anatomical point of view, the step by step protocol of the radical cystectomy done by laparoscopic approach:
• Stressing the respect of fundamental rules of oncologic surgery when treating transitional cell carcinoma of the bladder
• Describing the protocol in both sexes: - nerve sparing cystectomy
  - uterus sparing cystectomy

Discuss the cost/benefit ratio of a whole laparoscopic approach versus a combined (laparoscopy + open) procedure for urinary diversion in ileal conduit, orthotopic reservoirs, diversion to the recto-sigmoid. With respect to the actual state of the art regarding the staging of lymph nodes involvement in TCC, discuss the feasibility of laparoscopic extended lymph node dissection Review the literature with respect to oncological results (port metastases, local recurrences and distant metastases), follow up and functional outcome

Registration fee excluding VAT
EAU members, residents  € 25
Non-EAU member  € 40

ESU courses are EU-ACME accredited with 1.5 credits per hour
ESU Course 16

Advanced course on urethral stricture surgery

09:00 - 12:00

Chair: C.R. Chapple, Sheffield (GB)

Anatomy of the urethra and nature of stricture disease
C.R. Chapple, Sheffield (GB)

Which type of urethroplasty - a critical overview of results and complications
A.R. Mundy, London (GB)

Anastomotic urethroplasty - principles and practice
L. Boccon-Gibod, Paris (FR)

Substitution urethroplasty - when, what, how?
C.R. Chapple, Sheffield (GB)

Aims and objectives
• To review the treatments available for urethral stricture disease
• To detail the role of the treatments which are available for specific patient scenarios?
• To provide a clearer understanding of the role of anastomotic and substitution urethroplasty in the management of urethral stricture disease
• To outline the principles of the surgical management of patients with urethras that have been injured by trauma

Participants of the course will obtain a clear view on the current role of surgery for the management of urethral stenosis affecting both the anterior and posterior urethra in contemporary clinical practice.

Registration fee excluding VAT
EAU members, residents € 40
Non-EAU member € 60
ESU Courses, 7 April

ESU Course 17

Diagnosis and management of superficial bladder cancer

Room 342a Level 3

Chair: J.A. Witjes, Nijmegen (NL)

Diagnosis of superficial bladder cancer, including urinary markers and PDD
J.A. Witjes, Nijmegen (NL)

Cases on diagnosis
J.A. Witjes, Nijmegen (NL)

Optimal initial therapy in superficial bladder cancer
M. Babjuk, Prague (CZ)

Demonstration of TUR with blue light
M. Babjuk, Prague (CZ)

An efficient prognostic factor score system: The 2006 version
W. Oosterlinck, Ghent (BE)

Case where decisions can be made based on prognostic factors in the patients’ history
W. Oosterlinck, Ghent (BE)

EAU guidelines on papillary Ta, T1 lesions: What is new in therapy in the 2006 version?
W. Oosterlinck, Ghent (BE)

Intermediate risk cases
W. Oosterlinck, Ghent (BE)

Evidence based therapy of CIS and high risk superficial bladder cancers
M. Babjuk, Prague (CZ)

High risk cases
M. Babjuk, Prague (CZ)

BCG failures, the therapeutic advice and their prognosis
J.A. Witjes, Nijmegen (NL)

Case discussion and closure
J.A. Witjes, Nijmegen (NL)

Aims and objectives
In Paris there is again a course on diagnosis and management of superficial bladder cancer. Since many years this course is very well attended and received. The course again has been updated, especially since new guidelines have been developed in 2005. The aim is to discuss several problems into more detail, rather than giving an overview of everything that is published. After most presentations some cases will be discussed in an interactive way. In the first presentation Prof. Fred Witjes from Nijmegen will discuss the diagnosis of superficial bladder cancer, including the expanding field of urinary markers and the use of fluorescence cystoscopy. The second lecture will be given by Dr. Marko Babjuk from Prague, where he will discuss the optimal initial therapy in superficial bladder cancer. This will include the TUR technique, the biopsy policy (where, when and how), blue light resection, one immediate instillation and what we should expect from the pathologist. Third,
Prof. Wim Oosterlinck from Ghent will discuss the 2006 view on an efficient prognostic factor score system. His second lecture will deal with therapeutic news according to the new EAU guidelines on papillary Ta, T1 lesions. Dr. Babjuk will than discuss the evidence based therapy of CIS and high risk superficial bladder cancers. This will include BCG versus chemotherapy and the role of primary cystectomy. Finally Prof. Witjes will give an overview on the therapeutic possibilities for patients failing BCG, like new intravesical drugs, new treatment modalities (hyperthermia) and the role of p53. In between the lectures short practical presentations and case discussions are planned. After the course attendees should have clear practical guidelines for some common daily practical problems in patients with superficial bladder cancer.

**Registration fee excluding VAT**

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<thead>
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<tr>
<td>EAU members, residents</td>
<td>€ 40</td>
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<td>Non-EAU member</td>
<td>€ 60</td>
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ESU Course 18

Advanced prostate cancer - new perspectives

Chair: M.P. Wirth, Dresden (DE)

Endocrine therapy - timing and modalities
M.P. Wirth, Dresden (DE) 342b-7-1810

Therapy of hormone refractory prostate cancer
K. Pummer, Graz (AT) 342b-7-1820

New targets for treatment of hormone refractory prostate cancer
P. Teillac, Paris (FR) 342b-7-1830

Aims and objectives
This course aims at delivering up to date information about the role and optimal timing of androgen deprivation therapy in patients with advanced prostate cancer. Once androgen independence develops, new second line hormonal therapies and chemotherapy are available that may improve the quality of life, delay further progression and possibly prolong survival. The role of experimental drugs is critically discussed. Those drugs which are close to clinical application and their mechanisms of action will be explained. There will be room for discussions about the management of patients, and the conduct of clinical trials.

Registration fee excluding VAT
EAU members, residents € 40
Non-EAU member € 60

ESU courses are EU-ACME accredited with 1.5 credits per hour
ESU Course 19

Update on stone disease

Room 343 Level 3

Chair: P. Alken, Mannheim (DE)

Principles of case selection
P. Alken, Mannheim (DE) 343-7-1840

ESWL: Prevention of calcium oxalate/phosphate stones
P.J. Conort, Paris (FR) 343-7-1850

URS: Prevention of uric acid stones
A. Patel, London (GB) 343-7-1860

PNL and surgery: Prevention of struvite and cystine stones
P. Alken, Mannheim (DE) 343-7-1870

Aims and objectives
Which are the necessary diagnostic steps to select the right procedure for stone removal? What are the expert’s tricks to guarantee success? How to avoid complications? Which diagnostic and therapeutic steps are mandatory to prevent stone recurrence? Based on case reports these questions will be answered for ESWL, URS, PCNL and surgery and the most frequently met stone types. If you want a special case of your own practice to be discussed during the course, send the case report to peter.alken@uro.ma.uni-heidelberg.de

Registration fee excluding VAT
EAU members, residents € 40
Non-EAU member € 60

ESU courses are EU-ACME accredited with 1,5 credits per hour
ESU Course 20

Radical cystectomy and orthotopic bladder substitution - surgical tricks and management of complications

Room 351 Level 3

Chair: U.E. Studer, Berne (CH)

Preoperative investigations and selection of patients for orthotopic bladder substitution
J.E. Gschwend, Ulm (DE) 351-7-1880

Arguments for nerve sparing cystectomy with orthotopic bladder substitution
A. Stenzl, Tübingen (DE) 351-7-1890

How to do a nerve sparing cystectomy in male and female patients, surgical tricks to avoid complications with orthotopic bladder substitution
U.E. Studer, Berne (CH) 351-7-1900

Tips on how to obtain good functional results in female patients
A. Stenzl, Tübingen (DE) 351-7-1910

Active post-operative management is the most important step
U.E. Studer, Berne (CH) 351-7-1920

How to treat complications during follow-up
J.E. Gschwend, Ulm (DE) 351-7-1930

Aims and objectives
In this course special emphasis is on patient selection and on practical surgical steps: on how to do meticulous pelvic lymph node dissection, nerve sparing cystectomy in male and female patients as well as how to do various types of orthotopic bladder substitutes with good long-term functional results. The course is aimed to be interactive with 50% of the time reserved for questions and discussions with the audience. At the end of the course, the participant should know all the essential and practical steps in order to achieve good results with cystectomy and orthotopic bladder substitution.

Registration fee excluding VAT
EAU members, residents € 40
Non- EAU member € 60

ESU courses are EU-ACME accredited with 1,5 credits per hour
ESU Courses, 7 April

ESU Course 21

Vaginal surgery for urologists

09:00 - 12:00

Room 353 Level 3

Chair: D. Pushkar, Moscow (RU)

Vaginal surgery nowadays - what is new?
D.J.M.K. De Ridder, Leuven (BE) 353-7-1940

Surgery of SUI - 10 years of Prolene
D. Pushkar, Moscow (RU) 353-7-1950

Prolapse surgery for urologists - mesh? When mesh? Which mesh?
D.J.M.K. De Ridder, Leuven (BE) 353-7-1960

Complications of vaginal surgery
D.J.M.K. De Ridder, Leuven (BE) 353-7-1970

Complications of vaginal surgery
D. Pushkar, Moscow (RU) 353-7-1980

Periurethral cysts, fistulas and rare conditions
D. Pushkar, Moscow (RU) 353-7-1990

Video session 353-7-2000

Aims and objectives
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 clinical practice. Special attention will be given to new techniques that use synthetics tapes in stress urinary incontinence alone or those cases associated with prolapse. This course will also cover the management of complications of surgery for stress incontinence. Vaginal approach to prolapse and use of different meshes will be covered in critical view based upon personal experience. Management of periurethral cysts, fistulas and other rare conditions will be shown both during podium and video presentations. Carefully prepared clinical cases and video demonstration of various surgical techniques and tricks will provide a clear understanding of the most common procedures to all participants. Interactive course means active participation by the audience. 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 newest technique in patients with stress incontinence, prolapse and iatrogenic injuries of lower urinary tract. This course will facilitate the decision making process for those who are just starting their careers.

Registration fee excluding VAT
EAU members, residents € 40
Non-EAU member € 60

ESU courses are EU-ACME accredited with 1,5 credits per hour
ESU Course 22

Penile and testicular cancer

12:30 - 14:30

Room 341 Level 3

**Chairs:**

- P. Albers, Kassel (DE)
- N.W. Clarke, Manchester (GB)

**Penile cancer - early stages**

N.W. Clarke, Manchester (GB) 341-7-2010

**Penile cancer - advanced stages**

P. Albers, Kassel (DE) 341-7-2020

**Testis cancer - early stages**

N.W. Clarke, Manchester (GB) 341-7-2030

**Testis cancer - advanced stages**

P. Albers, Kassel (DE) 341-7-2040

**Aims and objectives**

Organ-sparing approaches in penile cancer have proven to be effective. Up to date management of superficial lesions will be presented including laser surgery and several techniques of surgical reconstructions after partial penectomy or glansectomy. The different indications and extensions of lymph node dissection in the groin will be discussed and demonstrated as surgical step by step procedures. In cases of advanced disease, different chemotherapy regimens will be presented and the current favourite of out-patient based chemotherapy will be shown in detail. In the August 2005 issue of European Urology the latest update of the guidelines for diagnosis and treatment of testicular cancer has been published. Based on this European consensus, this ESU course will provide the auditorium with the latest information on diagnostic tools, staging and treatment of testis cancer stage by stage. In early stages, organ sparing surgery, current histopathological prognostic factors for surveillance and individualised treatment options will be discussed with the auditorium following case presentations. The role of conventional as well as laparoscopic RPLND in early stages will be clarified. In advances stages, the course participants will learn about stage by stage treatment according to IGCCCG classification. Detailed information on chemotherapy regimens and the handling of side effects will be provided. In this section of the course, tips and tricks of residual tumor resection will be presented using case reports and intraoperative pictures and movies. Participants will have enough time to ask questions and discuss their own cases.

**Registration fee excluding VAT**

- EAU members, residents € 25
- Non-EAU member € 40

ESU courses are EU-ACME accredited with 1.5 credits per hour
ESU Course 23

Urological management of renal failure and renal transplantation - treatment of urological complications

Room 342a Level 3

Chair: G. Karam, Nantes (FR)

Urological and vascular aspects of recipient preparation
G. Karam, Nantes (FR) 342a-7-2050

Surgical aspects of nephrectomy in living and cadaveric donors
K. Dreikorn, Bremen (DE) 342a-7-2060

Laparoscopic living donor nephrectomy
G. Karam, Nantes (FR) 342a-7-2070

Technical aspects of renal transplantation
K. Dreikorn, Bremen (DE) 342a-7-2080

Surgical complications
A. Alcaraz, Barcelona (ES) 342a-7-2090

Aims and objectives
Given the dramatic improvement in short and long term graft survival, renal transplantation is nowadays the most effective treatment of end stage renal failure. Recipients considered for transplant are older and pose more problems than in the past, in some cases requiring specific urological preparation. We would like to share our experience concerning the selected items with the audience. These include how to prepare transplant recipients with surgical or urological problems, how to choose the most safe technique for performing living donor nephrectomy, how to deal with unusual situations of renal procurement or transplantation and finally for urologists, how to diagnose and manage urological complications.

Registration fee excluding VAT
EAU members, residents € 25
Non-EAU member € 40
**ESU Course 24**

**How to do a clinical trial**

**Room 342b Level 3**

**Chair:** F.M.J. Debruyne, Nijmegen (NL)

**Clinical research in urology: What are the dead ends and how to avoid them?**
F.M.J. Debruyne, Nijmegen (NL)  342b-7-2100

**Clinical research in urology: Demands and expectations from the professionals and patients**
B. Malavaud, Toulouse (FR)  342b-7-2110

**Statistical power and outcome of clinical trials: What a urological investigator should know**
R. Sylvester, Brussels (BE)  342b-7-2120

**How to manage a clinical urological trial: Practical aspects**
F.M.J. Debruyne, Nijmegen (NL)  342b-7-2130

**Case scenarios**  342b-7-2140

**Aims and objectives**
Clinical research is essential for any progress in medicine. It is the most appropriate way to evaluate new diagnostic and/or therapeutic approaches. Also in urology, clinical research has played an important role in defining new treatment strategies for many urological diseases. Where for many years this form of research was limited to selected centres, it has now spread to a larger participation of urological departments and urologists. The academic or academically oriented urological departments are no longer the only more or less exclusive participants in urological clinical research. As a matter of fact, today many non-academic, private and office urologists contribute significantly to current urological clinical protocols. It is therefore important to be informed about all essential aspects of clinical urological research and in this course participants will be able to learn about all issues involved. Hence, the course is a must for all those actually involved in clinical urological research and is thus intended not only for urologists, but also for epidemiologists, statisticians and clinical research nurses.

**Registration fee excluding VAT**
EAU members, residents  € 25
Non-EAU member  € 40
ESU Courses, 7 April

ESU Course 25

Office management of male sexual dysfunction

12:30 – 14:30

Room 343 Level 3

Chair: C. Stief, Munich (DE)

Background on function and dysfunction of erection and ejaculation
C. Stief, Munich (DE) 343-7-2150

Assessment – what is necessary?
I. Eardley, Leeds (GB) 343-7-2160

Testosterone replacement
C. Stief, Munich (DE) 343-7-2170

Medical therapy of ED and premature ejaculation
I. Eardley, Leeds (GB) 343-7-2180

Therapy of ED when pills fail
C. Stief, Munich (DE) 343-7-2190

Management of ED in the patient with cardiovascular disease
I. Eardley, Leeds (GB) 343-7-2200

What to do after radical prostatectomy?
C. Stief, Munich (DE) 343-7-2210

Aims and objectives

The course is aimed at providing practical advice on how to diagnose and treat a patient with premature ejaculation or erectile dysfunction. It will allow an up-to-date understanding of the underlying mechanisms of the erectile process and the etiology of erectile dysfunction. The recent development of various orally available drugs with different modes of action and distinctly different side effect profiles enables individually tailored therapies. However, this individually adopted regimen requires an adequate work up that will be comprehensively presented. Although present and future orally available drugs will be covered in depth, alternative options such as local pharmacotherapy or various devices will be presented with special emphasis since their adequate indication and appropriate use by the urologist makes the distinctive difference in comparison to other specialists in the field. Then, specific topics with high practical importance as the cardiovascular patient with ED or the post-prostatectomy case will be covered. The course will be very interactive allowing in depth information on the various aspects of the cutting edge of erectile dysfunction.

Registration fee excluding VAT
EAU members, residents € 25
Non-EAU member € 40
ESU Course 26

Update on neurourology

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

Introduction
P.E. Van Kerrebroeck, Maastricht (NL)

History, investigations and diagnostic classifications
P.E. Van Kerrebroeck, Maastricht (NL)

Conservative and surgical treatments
F.R. Cruz, Porto (PT)

Case discussion

Aims and objectives
In this course various aspects of neurourology will be discussed as well theoretical as practical. As an introduction the neural control of the lower urinary and genital tract will be reviewed focusing on those elements relevant to the practising urologist. Furthermore the elements of neuro-urological history and physical examination will be presented and correlated with the different neurological conditions. The role of additional investigations as f.e. urodynamics will be discussed. Finally the different therapeutic options classical as well as more experimental, conservative as well as surgical will be summarised. At the end of this course, the application of practical algorithms in neurourology will be rehearsed with the participants in the form of case discussions.

Registration fee excluding VAT
EAU members, residents € 25
Non-EAU member € 40
ESU Courses, 7 April

ESU Course 27

Advanced course on laparoscopic nephrectomy

Chair: R. Bollens, Brussels (BE)

Extraperitoneal nephrectomy
T. Sulser, Basel (CH) 353-7-2260

Transperitoneal nephrectomy
R. Bollens, Brussels (BE) 353-7-2270

Live donor nephrectomy
T. Sulser, Basel (CH) 353-7-2280

Partial nephrectomy
R. Bollens, Brussels (BE) 353-7-2290

Aims and objectives
Practical tips and tricks in advanced laparoscopic kidney surgeries.

Registration fee excluding VAT
EAU members, residents € 25
Non-EAU member € 40

ESU courses are EU-ACME accredited with 1.5 credits per hour
ESU Course 28

15:00 - 17:00

Ultrasound for the urologist - TRUS and TRUS guided biopsies

Room 341 Level 3

Chair: P. Hammerer, Braunschweig (DE)

Indications for TRUS and biopsy
P. Hammerer, Braunschweig (DE) 341-7-2300

Practical aspects of TRUS and TRUS guided biopsies
P. Hammerer, Braunschweig (DE) 341-7-2310

Indications for rebiopsy
A.R. Zlotta, Brussels (BE) 341-7-2320

Update on new technical developments
A.R. Zlotta, Brussels (BE) 341-7-2330

Aims and objectives
The purpose of this ESU Course is to define the optimal transrectal ultrasound, to discuss new ultrasound techniques for prostate cancer detection as well as defining a new standard for transrectal ultrasound-guided prostate biopsies. In addition, techniques to reduce morbidity and to increase patient acceptance will be discussed. Transrectal ultrasound is performed for more than 15 years, and this technique is now an important part of prostate cancer diagnosis and staging. Anatomic studies of prostatectomy specimens that defined the zonal anatomy of the prostate and a detailed mapping of the tumor location has increased our understanding of transrectal ultrasound images as well as optimal placement of the biopsy needles. The stage migration seen by prostate specific antigen based screening has resulted in most tumors being non-palpable at diagnosis. Therefore in the PSA area with tumors at early stage, non-palpable and and sometimes ultrasonografically isoechoic, transrectal ultrasound is needed to enable sampling of all relevant areas of the prostate including those that appear normal. The systematic sampling of the prostate by the sextant biopsy technique improved the detection rate of prostate cancer over sampling hypoechoic or palpable suspicious lesions. However, in men with initially negative biopsies a second set of sextant biopsies will be positive in about 20-30%. Several groups demonstrated that the sextant technique is inadequate for sampling of larger prostates and they advocated additional samples. Will an increase of prostate biopsies result in patient discomfort? Although some studies report no additional morbidity from the more extensive biopsy protocols, it seems likely that discomfort for the patient would be increased. What can be done to reduce pain and discomfort and improve tolerance for additional biopsies? Simple and efficacious methods are now available to provide anaesthesia in men undergoing prostate biopsies.

Registration fee excluding VAT
EAU members, residents € 25
Non-EAU member € 40

ESU courses are EU-ACME accredited with 1,5 credits per hour
ESU Course 29

How to write a paper for publication

Room 342a Level 3

Chair: F. Montorsi, Milan (IT)

Faculty: C.A. McKillop, Bucks (GB)

Assessing the type of publication
Choosing a journal
Deciding on authorship
Writing: how to do it
Submission
Reviewer’s comments
Editor’s comments
Checking proofs and waiting for publication

Aims and objectives
Why should I invest a lot of my time in writing scientific papers? There are a lot of good reasons for this and the course will start by describing them all. All most important aspects of scientific writing will then be discussed: what are the available publication types, how to choose the target journal, how to identify authors. The “How to do it” for a scientific paper will represent the core of the course. A publication type will be taken as a case study and the whole writing process will be described. Mechanics and tips including referencing options, journal style, do’s and don’ts will be covered. All details regarding how to submit a paper will also be discussed. In addition, how to deal with reviewers’ comments will be considered. The post acceptance for publication phase will be discussed including checking proofs. In summary attendees are expected to leave the course with the knowledge of the fundamental requirements to be successful in having a scientific paper accepted from a major journal.

Registration fee excluding VAT
EAU members, residents € 25
Non-EAU member € 40

ESU Courses are EU-ACME accredited with 1,5 credits per hour
ESU Course 30

Upper urinary tract trauma

Room 342b Level 3

Chair: L. Martínez-Piñeiro, Madrid (ES)

Blunt and penetrating renal trauma
L. Martínez-Piñeiro, Madrid (ES) 342b-7-2420

External ureteral trauma - etiology, diagnosis and treatment
W. Månsson, Lund (SE) 342b-7-2430

Iatrogenic ureteral lesions - etiology, classification, diagnostic algorithm and therapeutic options
J.-J. Rambeaud, Grenoble (FR) 342b-7-2440

Ureterointestinal anastomotic strictures - prevention and management
W. Månsson, Lund (SE) 342b-7-2450

Aims and objectives
• To review the current classifications of renal/ureteral trauma
• To outline the principles of diagnosis and management of renal and ureteral trauma
• To provide a clearer understanding of the role of the treatments which are available for specific patient scenarios
• To interact with the audience and discuss together management and treatment of real cases

Participants of the course will obtain a clear view on the current management of blunt and penetrating injuries affecting the ureter and/or kidney in contemporary clinical practice. Iatrogenic injuries of the ureter due to urologic and non-urologic surgery or instrumentation will be covered also. More than 50% of the time of the course will be spent with the discussion of real clinical cases.

Registration fee excluding VAT
EAU members, residents € 25
Non-EAU member € 40

ESU courses are EU-ACME accredited with 1,5 credits per hour
ESU Courses, 7 April

ESU Course 31

Ageing male

15:00 - 17:00

Room 343 Level 3

Chair: C.C. Schulman, Brussels (BE)

Physiopathology of male hormonal deficiency
M.L. Ruutu, Helsinki (FI)

Hormonal supplementation
M.L. Ruutu, Helsinki (FI)

Risks of hormonal substitution (prostate and others)
C.C. Schulman, Brussels (BE)

Testosterone and erectile dysfunction
C.C. Schulman, Brussels (BE)

Aims and objectives
The aim of this course is to outline for practising urologists the increasing place and importance of male hormone endocrinology, the basic concept and the clinical implications. The various aspects of hormonal supplementation in men will consider the potential benefits and risks associated. Special attention will focus on testosterone and the prostate and the place of testosterone in erectile dysfunction.

Registration fee excluding VAT
EAU members, residents € 25
Non-EAU member € 40

ESU courses are EU-ACME accredited with 1.5 credits per hour
ESU Course 32

The molecular basis of prostate cancer; science in practice

Room 351 Level 3

15:00 - 17:00

Chair: J.A. Schalken, Nijmegen (NL)

What genetics can tell us
R.W.G. Watson, Dublin (IE)

From genetics to proteomics and new therapy: Choosing targets suitable for diagnosis, prognosis, therapy
J.A. Schalken, Nijmegen (NL)

Aims and objectives
Molecular techniques have been introduced in research in life sciences almost two decades ago. Our insight in the genetic code, the complex signalling networks and the interaction with the architecture of cells has increased exponentially. The new ‘high throughput’ technology platforms now enable the identification of many new potential targets for diagnosis and therapy. In this course we will provide an integral overview of the molecular- and cellular tools we have nowadays in our laboratories. The information presented will be sufficient to understand the principles of molecular- and cell biological methods, so that one can understand the potential use of them for research aimed at solving clinical unmet needs. ‘Real life’ examples of successes, particular in the diagnosis and therapy of prostate cancer will be presented, i.e. results from basic research that were translated into clinical applicability. Finally, several practical case scenario’s will be discussed how molecular techniques are currently implemented in clinical practise.

Registration fee excluding VAT
EAU members, residents € 25
Non-EAU member € 40

ESU courses are EU-ACME accredited with 1.5 credits per hour
Advanced course on upper tract laparoscopy (UPJ and adrenal)

Chair: C. Eden, Basingstoke (GB)

Pyeloplasty: Which approach and why?
C. Eden, Basingstoke (GB) 353-7-2520

Pyeloplasty: Technique (video) and results
C. Eden, Basingstoke (GB) 353-7-2530

Pyeloplasty: Intra-operative problems and complications
C. Eden, Basingstoke (GB) 353-7-2540

Andrenalectomy: Which approach and why?
G. Guazzoni, Milan (IT) 353-7-2550

Andrenalectomy: Technique (video) and results
G. Guazzoni, Milan (IT) 353-7-2560

Andrenalectomy: Intra-operative problems and complications
G. Guazzoni, Milan (IT) 353-7-2570

Questions
C. Eden, Basingstoke (GB) 353-7-2580
G. Guazzoni, Milan (IT)

Aims and objectives
Within the next 10 years almost all urology will be subdivided into office urology, endoluminal urology, penoscrotal surgery and laparoscopy. If you want to operate on the adrenal, kidney, bladder or prostate you will need to learn laparoscopy. The well-documented learning curve for advanced laparoscopy can be considerably shortened by expert instruction and learning from the mistakes of others. Two acknowledged experts in laparoscopic pyeloplasty and adrenalectomy will instruct delegates using didactic lectures and video on the laparoscopic management of UPJ obstruction and on laparoscopic adrenalectomy. This course will not deal with the aetiology of the disease processes or with their diagnosis. It will include advice on which laparoscopic route to use, suturing technique, troubleshooting intra-operative problems and how to manage post-operative complications. Be there or be left behind!

Registration fee excluding VAT
EAU members, residents € 25
Non-EAU member € 40

ESU courses are EU-ACME accredited with 1.5 credits per hour
ESU Course 34

**Multi Media Course**

**Room 242 Level 2**

**Chair:** F. Gomez Sancha, Madrid (ES)

**Multimedia applications in urological practice**
F. Gomez Sancha, Madrid (ES) 242-7-2590

**On-line video surgical learning system**
A. Messas, Nanterre (FR) 242-7-2600

**Aims and objectives**
This course is structured in two parts:

- The first part will explain how to make good use of the internet to keep updated in urology, focusing on the utility of urological surgery video learning systems. The available online video learning systems will be discussed, and the new EAU video learning system Urozoom will be presented.

- The second part of the course will cover how to enhance your powerpoint presentations with the addition of digital photographs, home-made surgical videos, flash animations and animated graphics to produce truly multimedia presentations.

Participants in this course should gain insight in how to use the internet to keep updated and expand their urological knowledge, and make good use of the growing body of surgical video footage available in the Internet. They will also get to know the new EAU project Urozoom - surgical video learning system. Also, they will have a better understanding of how Powerpoint can become a powerful tool to communicate by integrating multimedia elements. It will be relatively easy for the attendants to significantly enhance his presentations with the use of the tips and tricks presented at this course. Although this course is open to everyone and its contents have been designed to make it attractive to a wide range of urologists with different levels of experience with computers, it is not a basic course on how to use a computer from scratch. Those with previous experience in using the internet and creating powerpoint presentations will make the most of it.”

**Registration fee excluding VAT**
- EAU members, residents € 25
- Non-EAU member € 40

ESU courses are EU-ACME accredited with 1,5 credits per hour
ESU/ESUT Hands-on Courses, 6 April

10:00 - 12:30

ESU/ESUT Course 1 - Hands-on course on Laparoscopy

Room 352a Level 3

Chair: J. Rassweiler, Heilbronn (DE)

A. Cestari, Milan (IT)
A. Hoznek, Creteil (FR)
J. Klein, Heilbronn (DE)

Aims and objectives

Laparoscopic procedures are continuously evolving in Urology based on the increasing expertise of urologic surgeons. This includes ablative procedures, such as radical nephrectomy as well as reconstructive techniques, such as pyeloplasty. Some advanced procedures (i.e. radical prostatectomy, radical cystectomy) have both, ablative and reconstructive steps. Since the number of centers with laparoscopic expertise is still limited in Europe, laparoscopic training programs have become very important. Hands-on training courses at the pelvi-trainer represent one of the main steps of such courses.

The European School of Urology (ESU) and the European Society of Uro-technology (ESUT) offer an intensive hands-on-course with different models focussing on both ablative as well as reconstructive laparoscopic techniques. For this purpose standardized models for endoscopic suturing techniques (i.e. vesico-urethral anastomosis) are provided, which allow a step-wise approach to this technically difficult task. Perfused pulsating models of porcine aorta and kidney (P.O.P.-trainer) enable the training of retroperitoneal lymph node dissection, partial and simple nephrectomy as well as the management of vascular complications. The extent of the exercises depends on the educational level of the trainee.

European experts will serve as trainers after a short introduction. According to the flexibility and variety of models, this course is not only directed to beginners, but may also serve for experienced surgeon to extend their technical capabilities.

Registration fee excluding VAT

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Supported by an unrestricted educational grant from KARL STORZ GMBH & CO.KG
ESU/ESUT Course 2 - Hands-on course on Laparoscopy

Room 352a Level 3

Chair: B. Guillonneau, New York (US)

T. Erdogru, Antalya (TR) 352a-6-2500
F. Keeley, Bristol (GB) 352a-6-2510
M.P. Laguna, Amsterdam (NL) 352a-6-2520

Aims and objectives

Laparoscopic procedures are continuously evolving in Urology based on the increasing expertise of urologic surgeons. This includes ablative procedures, such as radical nephrectomy as well as reconstructive techniques, such as pyeloplasty. Some advanced procedures (i.e. radical prostatectomy, radical cystectomy) have both, ablative and reconstructive steps. Since the number of centers with laparoscopic expertise is still limited in Europe, laparoscopic training programs have become very important. Hands-on training courses at the pelvi-trainer represent one of the main steps of such courses.

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Supported by an unrestricted educational grant from KARL STORZ GMBH & CO.KG
ESU/ESUT Hands-on Courses, 7 April

10:00 - 12:30

ESU/ESUT Course 3 - Hands-on course on Laparoscopy

Chair: J.J.M.C.H. De La Rosette, Amsterdam (NL)

G. Breda, Bassano Del Grappa (IT)
P. Fornara, Halle/Saale (DE)
H.C. Klingler, Vienna (AT)

Room 352a Level 3

Aims and objectives
Laparoscopic procedures are continuously evolving in Urology based on the increasing expertise of urologic surgeons. This includes ablative procedures, such as radical nephrectomy as well as reconstructive techniques, such as pyeloplasty. Some advanced procedures (i.e. radical prostatectomy, radical cystectomy) have both, ablative and reconstructive steps. Since the number of centers with laparoscopic expertise is still limited in Europe, laparoscopic training programs have become very important. Hands-on training courses at the pelvi-trainer represent one of the main steps of such courses.

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European experts will serve as trainers after a short introduction. According to the flexibility and variety of models, this course is not only directed to beginners, but may also serve for experienced surgeons to extend their technical capabilities.

Registration fee excluding VAT
EAU members, residents € 25
Non-EAU member € 40

Supported by an unrestricted educational grant from KARL STORZ GMBH & CO.KG
ESU/ESUT Course 4 - Hands-on course on Laparoscopy

Room 352a Level 3

Chair: G. Janetschek, Linz (AT)
S. Deger, Berlin (DE)
P. Rischmann, Toulouse (FR)
N. Soomro, Newcastle upon Tyne (GB)

Aims and objectives
Laparoscopic procedures are continuously evolving in Urology based on the increasing expertise of urologic surgeons. This includes ablative procedures, such as radical nephrectomy as well as reconstructive techniques, such as pyeloplasty. Some advanced procedures (i.e. radical prostatectomy, radical cystectomy) have both, ablative and reconstructive steps. Since the number of centers with laparoscopic expertise is still limited in Europe, laparoscopic training programs have become very important. Hands-on training courses at the pelvi-trainer represent one of the main steps of such courses.

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European experts will serve as trainers after a short introduction. According to the flexibility and variety of models, this course is not only directed to beginners, but may also serve for experienced surgeon to extend their technical capabilities.

Registration fee excluding VAT
EAU members, residents € 25
Non-EAU member € 40

Supported by an unrestricted educational grant from KARL STORZ GMBH & CO.KG
Thursday, 6 April - Hands-on Training Sessions

Hands-on training session

10:00 - 12:00  
Endourology masterclass training course  
Room 352b Level 3

10:00 - 11:00  
Session 1- Performing PCNL successfully, exploring different access techniques

Chair: J.J.M.C.H. De La Rosette, Amsterdam (NL)

X-ray access  
J.J.M.C.H. De La Rosette, Amsterdam (NL)  
352b-6-2530

Ultrasound access  
A. Gross, Hamburg (DE)  
352b-6-2540

Hands-on PCNL training

11:00 - 12:00  
Session 2- Ureteroscopy. The journey further into inner space continues with the aid of new technology

Chair: D.A. Tolley, Edinburgh (GB)

Ureteroscopy. The journey further into inner space continues with the aid of new technology  
D.A. Tolley, Edinburgh (GB)  
352b-6-2550  
G. Preminger, Durham (US)  
352b-6-2560

Hands-on ureteroscopy training

Aims and objectives
The Endourology training course at the 21st Annual EAU Congress in Paris, (FR) will offer 2 sessions in advanced endourology training. The 1st session will focus on advanced techniques in performing PCNL, focusing on access techniques, x-ray, and ultrasound. The 2nd session will focus on utilizing new technology when performing rigid and flexible ureteroscopy. Both sessions will offer didactic as well as hands on training.

For a free registration please go to the Boston Scientific booth, PA06, Level 1
Friday, 7 April

Hands-on training session

09:00 - 17:00 Holmium laser workshop

Room 352b Level 3

<table>
<thead>
<tr>
<th>Time</th>
<th>Session</th>
<th>Speaker</th>
<th>Room</th>
</tr>
</thead>
<tbody>
<tr>
<td>09:00 - 10:00</td>
<td>HoLAP workshop</td>
<td>S.M. Kumar, Westland (US)</td>
<td>352b-7-2570</td>
</tr>
<tr>
<td>11:00 - 12:00</td>
<td>HoLEP workshop</td>
<td>T. Aho, Cambridge (UK)</td>
<td>352b-7-2580</td>
</tr>
<tr>
<td>14:00 - 15:00</td>
<td>HoLAP workshop</td>
<td>S.M. Kumar, Westland (US)</td>
<td>352b-7-2590</td>
</tr>
<tr>
<td>16:00 - 17:00</td>
<td>HoLEP workshop</td>
<td>T. Aho, Cambridge (UK)</td>
<td>352b-7-2600</td>
</tr>
</tbody>
</table>

Aims and objectives

The Holmium Laser has been a valuable instrument for Urologists for over 10 years. It is well accepted for endoscopic and percutaneous lithotripsy, is increasingly used for the palliative treatment of recurrent bladder tumours, and is now becoming established as a cost-saving device for treating BPH in prostates up to and over 200 gm.

Experienced practitioners of Holmium Laser Ablation of the Prostate (HoLAP™) and Holmium Laser Enucleation of the Prostate (HoLEP™) will present the techniques in four sessions (2 x HoLAP and 2 x HoLEP). Participants will have the opportunity to discuss the techniques, see the equipment used and work on a simulator.

Limited places are available. For a free registration please go to the Lumenis booth, PA05, Level 1
Meeting of the European Society of Female Urology (ESFU)

**Update on female urology**

**Room Ternes Level 1**

**08:30 - 12:30**

**Welcome and introduction**

**08:35 - 08:55**
Indications, technique and outcome of urethrolisis after surgery for SUI
D. Pushkar, Moscow (RU)  

tern-5-0250

**08:55 - 09:05**
Discussion

**09:05 - 09:25**
Complications of meshes for lower urinary tract reconstruction
F. Haab, Paris (FR)  

tern-5-0260

**09:25 - 09:35**
Discussion

**09:35 - 10:00**
Debate: Are injectables justified as first option for SUI
**Pro:** P.E. Van Kerrebroeck, Maastricht (NL)  
**Con:** J. Corcos, Montreal (CA)  

tern-5-0270

tern-5-0280

**10:00 - 10:20**
New therapies for painful bladder syndrome
J.J. Wyndaele, Antwerp (BE)  

tern-5-0290

**10:20 - 10:30**
Discussion

**10:30 - 11:00**
Break

**11:00 - 11:20**
Botox for OAB. How evident is the evidence?
A. Giannantoni, Perugia (IT)  

tern-5-0300

**11:20 - 11:30**
Discussion

**11:30 - 11:50**
State of the art of pelvic floor laparoscopic reconstruction
R. Gaston, Bordeaux (FR)  

tern-5-0310

**11:50 - 12:00**
Discussion

**12:00 - 12:20**
Recent developments in pelvic floor imaging
P. Rehder, Innsbruck (AT)  

tern-5-0320

**12:20 - 12:30**
Discussion and conclusion

**Aims and objectives**
This meeting aims to provide an update on the recent developments in the field of female urology. Well-known experts in this subspecialty of urology will cover some of the hottest and most controversial issues related to pelvic floor imaging, surgery for stress urinary incontinence, painful bladder syndrome and overactive bladder. Live interactive discussion will be promoted.
Wednesday, 5 April - EAU Section Meetings

Meeting of the European Society of Oncological Urology (ESOU) and the meeting of the European Organisation for Research and Treatment of Cancer Genito-Urinary Group (EORTC GU-Group)

08:30 - 10:30 ESOU - Uro-oncological surgery: Tricks and techniques

eURO Auditorium Level 1

Chair: V. Ravery, Paris (FR)

08:30 - 09:15 Face-to-face on the OR - mini-invasive procedures: Organ-sparing treatment of kidney cancer. Technique and results
Chair: G.H.J. Mickisch, Bremen (DE)

Laparoscopic organ-sparing surgery (+ video)
F. Rozet, Paris (FR) eURO-5-0000

RFA/Cryosurgery (+video)
P. Whelan, Leeds (GB) eURO-5-0010

09:15 - 09:45 State-of-the-art and clinical cases
Chair: H. Van Poppel, Leuven (BE)

Penile cancer: Surgical strategy for lymph node dissection
O. Bouchot, Nantes (FR) eURO-5-0020

09:45 - 10:30 Debate
Chair: A.R. Zlotta, Brussels (BE)

Should ASAP patients be submitted to radical treatment?
Pro: M. Brausi, Modena (IT) eURO-5-0030
Con: P. Hammerer, Braunschweig (DE) eURO-5-0040

Aims and objectives
The main goal of the ESOU meeting in Paris 2006, is to provide the audience with very practical points of surgical techniques in penile, renal and prostate cancers.
The first part of the meeting will be dedicated to an update on the strategy for lymph node dissection in penile cancer. Then, minimally invasive techniques for kidney cancers will be discussed by two debaters, defender of laparoscopy or RFA/cryosurgery.
Finally, the relevance of radical prostatectomy for ASAP patients will be debated during a pro and con session.
At the end of the meeting, the delegates attending should be able to apply in the OR the tricks and techniques which will be discussed and described during the meeting.
**EORTC-GU Group: From clinical trials to patient care**

**Chair:** Z. Kirkali, Izmir (TR)

<table>
<thead>
<tr>
<th>Time</th>
<th>Session</th>
<th>Speaker(s)</th>
<th>Location</th>
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<tbody>
<tr>
<td>10:30 - 10:35</td>
<td>Welcome and introduction</td>
<td>Z. Kirkali, Izmir (TR)</td>
<td>eURO-5-0050</td>
</tr>
<tr>
<td>10:35 - 10:55</td>
<td>Superficial bladder cancer</td>
<td>W. Oosterlinck, Ghent (BE)</td>
<td>eURO-5-0060</td>
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<tr>
<td>10:55 - 11:15</td>
<td>Advanced bladder cancer</td>
<td>J. Bellmunt, Barcelona (ES)</td>
<td>eURO-5-0070</td>
</tr>
<tr>
<td>11:15 - 11:35</td>
<td>Renal cell cancer</td>
<td>M. Aitchison, Glasgow (GB)</td>
<td>eURO-5-0080</td>
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<tr>
<td>11:35 - 11:55</td>
<td>Testis tumors</td>
<td>R. De Wit, Rotterdam (NL)</td>
<td>eURO-5-0090</td>
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<tr>
<td>11:55 - 12:15</td>
<td>Prostate cancer</td>
<td>T.M. De Reijke, Amsterdam (NL)</td>
<td>eURO-5-0100</td>
</tr>
<tr>
<td>12:15 - 12:30</td>
<td>Conclusion</td>
<td>Z. Kirkali, Izmir (TR)</td>
<td>eURO-5-0110</td>
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</table>

**Aims and objectives**

This 2 hour meeting of the EORTC GU Group is entitled “From clinical trials to patient care”. Five experts will review superficial and advanced bladder cancer, prostate, testis and kidney cancer. Each presenter will give a 10-min. highlight of the latest developments and conclusions from the clinical trials conducted by the EORTC GU-Group in the light of the general urological oncologic knowledge. Presentations will be followed by clinical case discussions. At the end of this session the delegates attending will learn the results of the latest EORTC trials and will be able to incorporate this knowledge into their clinical patient care questions and to be part of the interactive discussions.
**Wednesday, 5 April - EAU Section Meetings**

**Meeting of the European Society of Andrological Urology (ESAU)**

<table>
<thead>
<tr>
<th>Time</th>
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<tbody>
<tr>
<td>08:30 - 12:30</td>
<td><strong>What’s new in andrology? An old head on young shoulders</strong></td>
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<td><strong>Room 353 Level 3</strong></td>
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<tr>
<td>08:30 - 09:40</td>
<td><strong>Gender reassignment surgery</strong></td>
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<tr>
<td></td>
<td><strong>Chair:</strong> V. Mirone, Naples (IT)</td>
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<tr>
<td>08:30 - 09:00</td>
<td><strong>Gender reassignment surgery</strong></td>
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<td><strong>Chair:</strong> D. Ralph, London (GB)</td>
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<tr>
<td>08:30 - 08:45</td>
<td><strong>Male to female transsexualism: State of the art</strong></td>
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<td><strong>V. Mirone, Naples (IT)</strong></td>
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<td>08:45 - 09:00</td>
<td><strong>The corpus cavernosum tissue from male-to-female gender reassignment:</strong></td>
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<td><strong>A valuable pharmacological model</strong></td>
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<td><strong>F. Fusco, Naples (IT)</strong></td>
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<tr>
<td>09:00 - 09:15</td>
<td><strong>Female to male transsexualism: State of the art</strong></td>
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<td><strong>C. Bettocchi, Bari (IT)</strong></td>
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<tr>
<td>09:15 - 09:30</td>
<td><strong>Female-to-male transsexualism: What’s new?</strong></td>
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<td><strong>F. Palumbo, Bari (IT)</strong></td>
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<tr>
<td>09:30 - 09:40</td>
<td><strong>Discussion</strong></td>
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<tr>
<td>09:40 - 10:50</td>
<td><strong>Andrological surgery</strong></td>
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<td></td>
<td><strong>Chair:</strong> E.J.H. Meuleman, Amsterdam (NL)</td>
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<tr>
<td>09:40 - 09:55</td>
<td><strong>Peyronie’s disease: State of the art</strong></td>
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<td><strong>W. Weidner, Giessen (DE)</strong></td>
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<tr>
<td>09:55 - 10:10</td>
<td><strong>Basic data in Peyronie’s disease</strong></td>
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<td><strong>E.W. Hauck, Giessen (DE)</strong></td>
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<tr>
<td>10:10 - 10:25</td>
<td><strong>Male infertility: State of the art</strong></td>
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<td><strong>N. Sofikitis, Ioannina (GR)</strong></td>
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<tr>
<td>10:25 - 10:40</td>
<td><strong>Experimental models of left varicocele in animals: What have we learned</strong></td>
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<td><strong>A. Sylakos, Ioannina (GR)</strong></td>
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<tr>
<td>10:40 - 10:50</td>
<td><strong>Discussion</strong></td>
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<tr>
<td>10:50 - 11:20</td>
<td><strong>ESSM Lecture: Endothelial function, the metabolic syndrome and erectile dysfunction</strong></td>
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<td><strong>I. Eardley, Leeds (GB)</strong></td>
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<tr>
<td>11:20 - 12:30</td>
<td><strong>Medical andrology</strong></td>
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<td><strong>Chair:</strong> C. Stief, Munich (DE)</td>
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<tr>
<td>11:20 - 11:35</td>
<td><strong>Late Onset Hypogonadism (LOH): State of the art</strong></td>
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<td><strong>C.C. Schulman, Brussels (BE)</strong></td>
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<td>Time</td>
<td>Topic</td>
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<tr>
<td>11:35 - 11:50</td>
<td>The role of testosterone in PDE5-I non responders</td>
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<tr>
<td>11:50 - 12:05</td>
<td>Prostatic disease and sexuality: State of the art</td>
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<tr>
<td>12:05 - 12:20</td>
<td>Sexual dysfunction after radical prostatectomy: Self-reported questionnaires and haemodynamic profiles</td>
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<tr>
<td>12:20 - 12:30</td>
<td>Discussion</td>
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</tbody>
</table>

**Aims and objectives**

Aims and objectives Three main sessions will focus on the andrological topics of gender reassignment surgery, surgical andrology and medical andrology. Each one of these will include four lectures. Our aim is to introduce an expert speaker to lecture on each topic, which will be followed by a lecture on basic research given by a young research assistant. We hope to deliver and communicate joint ideas and up-to-date information, given the worldwide experience of the lecturing experts. The session offers unprecedented scope to our young researchers and a chance for them to present their hard work to an international forum. This should produce a great effect in an interactive environment. We hope to make it a productive and valid session. Our main goal is to share and provide the quality science to which our society is dedicated to pursue.
Wednesday, 5 April - EAU Section Meetings

Meeting of the European Society of Transplantation Urology (ESTU)

08:30 - 12:30 Controversies in immunosuppression and hot topics in renal transplantation

**Room 343 Level 3**

**Chair:** J. Burgos Revilla, Madrid (ES)

08:30 - 08:35 **Welcome and introduction**
J. Burgos Revilla, Madrid (ES) 343-5-0330

08:30 - 10:30 **Immunosuppression and renal transplant**
*Chairs:* A.B. Chkhotua, Tbilisi (GE)
A.J. De Castro Figueiredo, Coimbra (PT)

08:30 - 09:00 **Immunosuppression in renal transplant: An update**
A. Alcaraz, Barna Barcelona (ES) 343-5-0340

09:00 - 09:30 **Calcineurin-sparing or steroid sparing immunosuppression in renal transplant**
M. Giessing, Berlin (DE) 343-5-0350

09:30 - 10:00 **Are surgical complications more common with modern immunosuppression?**
G. Karam, Nantes (FR) 343-5-0360

10:00 - 10:30 **Post-transplant cytokine responses in living and cadaveric donor renal allografts: Functional implications**
E. Lledó Garcia, Madrid (ES) 343-5-0370

**Discussion**

10:30 - 12:30 **Hot topics in clinical transplant**
*Chairs:* R. Vela Navarrete, Madrid (ES)
G. Nicita, Florence (IT)

10:30 - 11:00 **Cardiovascular disease after renal transplantation. Current controversies**
R. Marcen, Madrid (ES) 343-5-0380

11:00 - 11:30 **Management of prostate and bladder cancer after renal transplant**
P. Ditonno, Bari (IT) 343-5-0390

11:30 - 12:00 **Guidelines for renal transplant in patients with a prior history of neoplasia**
K. Dreikorn, Bremen (DE) 343-5-0400

12:00 - 12:30 **Transferred pathology associated with renal transplant: Medical, ethical and legal problems**
Y. Neuzillet, Marseille (FR) 343-5-0410

**Discussion and conclusion** 343-5-0415
Aims and objectives
The development of the new immunosuppressive drugs and advances in patient management have decreased acute rejection and improved early graft survival after kidney transplantation. However, the use of these new agents commonly results in the development of complications that present new challenges for the urologist involved in renal transplant. Higher incidences of wound complications and lymphoceles have been reported with the use of sirolimus and mycophenolate mofetil. Knowledge of the mechanisms of action of the different immunosuppressive regimens is beginning to be mandatory for urologists involved in kidney transplant programmes. Cardiovascular diseases, infections and malignancies are the main causes of mortality after renal transplant. However, the management of these situations in the transplant recipient is not clearly established. Finally, the risk of transference of infections and neoplasias from the donor to the recipient represents medical, legal and ethical dilemmas that frequently are a matter of controversy. The discussion of all these issues is the aim of this ESTU session.
**Wednesday, 5 April - EAU Section Meetings**

Meeting of the European Society of Genito-Urinary Reconstructive Surgeons (ESGURS)

### 08:30 - 12:30

**Reconstructive surgery of the pelvis**

**Chairs:** E.A. Austoni, Milan (IT)  
W. Stackl, Vienna (AT)

<table>
<thead>
<tr>
<th>Time</th>
<th>Session</th>
<th>Chair(s)</th>
<th>Location</th>
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<tbody>
<tr>
<td>08:30 - 08:45</td>
<td>Pelvic floor reconstruction in females</td>
<td>W. Artibani, Padua (IT)</td>
<td>blue-5-0420</td>
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<tr>
<td>08:50 - 09:05</td>
<td>Urethral hypermobility and anterior vaginal wall prolapse: Transobturator vesico-urethral suspension with different devices</td>
<td>E.A. Austoni, Milan (IT)</td>
<td>blue-5-0430</td>
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<tr>
<td>09:10 - 09:25</td>
<td>Vesico-vaginal fistula repair</td>
<td>A.R. Mundy, London (GB)</td>
<td>blue-5-0440</td>
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<tr>
<td>09:30 - 09:45</td>
<td>Reconstruction of neovagina</td>
<td>S. Perovic, Belgrade (CS)</td>
<td>blue-5-0450</td>
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<tr>
<td>09:50 - 10:05</td>
<td>Laparoscopic mobilisation of neo-vagina to assist secondary ileal vaginoplasty in male-to-female transsexuals</td>
<td>E. Belgrano, Trieste (IT)</td>
<td>blue-5-0460</td>
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<td>G. Liguori, Trieste (IT)</td>
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<td>10:10 - 10:25</td>
<td>Recurrent bladder neck stenosis: Treatment options and results</td>
<td>R. Olianas, Buchholz (DE)</td>
<td>blue-5-0480</td>
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<td>M.M. Fisch, Hamburg (DE)</td>
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<tr>
<td>10:30 - 11:00</td>
<td>Break</td>
<td>J-P. Sarramon, Toulouse (FR)</td>
<td>blue-5-0500</td>
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<td>S.A. Loening, Berlin (DE)</td>
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<tr>
<td>11:00 - 11:15</td>
<td>The role of laparoscopy for reconstructive surgery in the pelvis</td>
<td>V. Pansadoro, Rome (IT)</td>
<td>blue-5-0510</td>
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<tr>
<td>11:20 - 11:35</td>
<td>Optimal results after orthotopic bladder substitution: Surgical precautions</td>
<td>W. Månsson, Lund (SE)</td>
<td>blue-5-0520</td>
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<tr>
<td>12:10 - 12:25</td>
<td>Laparoscopic cystectomy with uretero-ileal diversion</td>
<td>X. Gamé, Toulouse (FR)</td>
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<td>R. Mallet, Toulouse (FR)</td>
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<td>J-P. Sarramon, Toulouse (FR)</td>
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<td>P. Rischmann, Toulouse (FR)</td>
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12:25 - 12:30  

**Conclusion**

*Aims and objectives*

Reconstruction of the inner female genitalia is one aspect of pelvic surgery. Beside pelvic floor reconstruction, vesico-vaginal fistula repair as well as surgical techniques for creation of a neovagina will be discussed. The treatment of recurrent bladder neck stenosis in males, who have had endoscopic intervention for benign prostatic disease, remains a challenge. Options and postoperative results will be presented. The second part of the meeting focuses on the role of laparoscopy during reconstructive pelvic surgery. What types of urinary diversion after laparoscopic cystectomy are feasible? What are the results that can be obtained and the complications to be expected compared to open surgery?
**Wednesday, 5 April - EAU Section Meetings**

**Meeting of the European Society of Infection in Urology (ESIU)**

<table>
<thead>
<tr>
<th>Time</th>
<th>Session</th>
<th>Speaker(s)</th>
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<tbody>
<tr>
<td>08:30 - 12:30</td>
<td><strong>Difficult infections in urology</strong></td>
<td>Room Havana Level 3</td>
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<td><strong>Chair:</strong> K.G. Naber, Straubing (DE)</td>
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<tr>
<td>08:30 - 08:35</td>
<td><strong>Welcome and introduction</strong></td>
<td>K.G. Naber, Straubing (DE)</td>
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<tr>
<td>08:35 - 10:20</td>
<td><strong>Neurogenic bladder and urinary tract infection (UTI)</strong></td>
<td>T.E. Bjerklund Johansen, Porsgrunn (NO)  M.C. Bishop, Nottingham (GB)</td>
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<tr>
<td>08:35 - 08:50</td>
<td><strong>UTI in patients with neurological bladder (overview)</strong></td>
<td>C. Hultling, Stockholm (SE)</td>
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<td>08:50 - 09:00</td>
<td><strong>Discussion</strong></td>
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<tr>
<td>09:00 - 09:15</td>
<td><strong>Bladder drainage by means of intermittent catheterisation</strong></td>
<td>T.E. Bjerklund Johansen, Porsgrunn (NO)</td>
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<tr>
<td>09:15 - 09:20</td>
<td><strong>Discussion</strong></td>
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<tr>
<td>09:20 - 09:35</td>
<td><strong>When to use antibiotic therapy in neurogenic bladder?</strong></td>
<td>P. Denys, Garches (FR)</td>
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<tr>
<td>09:35 - 09:40</td>
<td><strong>Discussion</strong></td>
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<tr>
<td>09:40 - 09:55</td>
<td><strong>How to prevent recurrent UTI in neurogenic bladder?</strong></td>
<td>M. Stöhrer, Murnau (DE)</td>
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<tr>
<td>09:55 - 10:00</td>
<td><strong>Discussion</strong></td>
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<td>10:00 - 10:15</td>
<td><strong>Is cranberry an alternative for prevention in UTI?</strong></td>
<td>H. Botto, Suresnes (FR)</td>
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<tr>
<td>10:15 - 10:20</td>
<td><strong>Discussion</strong></td>
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<tr>
<td>10:20 - 10:40</td>
<td><strong>Break</strong></td>
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<tr>
<td>10:40 - 12:30</td>
<td><strong>Chronic prostatitis/chronic pelvic pain syndrome</strong></td>
<td>B. Lobel, Rennes (FR)  M. Grabe, Malmö (SE)</td>
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<tr>
<td>10:40 - 10:55</td>
<td><strong>Chronic bacterial prostatitis: A European treatment study</strong></td>
<td>K.G. Naber, Straubing (DE)</td>
</tr>
</tbody>
</table>
Aims and objectives
The section meeting of ESIU will mainly deal with two difficult problems in urology: 1) Urinary tract infections (UTI) in patients with neurogenic bladder disturbances. 2) Chronic prostatitis/chronic pelvic pain syndrome (CP/CPPS). Urologists treating UTI in patients with neurogenic bladder should be aware of the peculiarities at all levels: diagnostic parameters, epidemiology, when to treat with what antimicrobials and how to deal with the detriorated bladder function. CP/CPPS is still an enigma concerning treatment but may also play a role in the development of prostate cancer. Therapeutic, histomorphological and experimental aspects will be discussed in this respect.
Wednesday, 5 April - EAU Section Meetings

Meeting of the eUroliathiasis Society (EULIS)

08:30 - 12:30 Difficult cases of urolithiasis: Medical and surgical solutions

Room Concorde 3 Level 4

Chair: P.N. Rao, Manchester (GB)

08:30 - 08:40
Welcome and introduction
P.N. Rao, Manchester (GB)

08:40 - 10:00 Medical solutions
Chair: H-G. Tiselius, Stockholm (SE)

08:40 - 08:55 Does crystalluria cause recurrent renal colic?
A. Trinchieri, Saronno (VA) (IT)

08:55 - 09:10 Who is a recurrent and problematic stoneformer?
K. Sarica, Gaziantep (TR)

09:10 - 09:25 Do metabolic investigations help?
B. Hess, Zurich (CH)

09:25 - 09:40 Novel medical solutions
H-G. Tiselius, Stockholm (SE)

09:40 - 10:00 Discussion

10:00 - 11:20 Surgical solutions
Chair: P. Alken, Mannheim (DE)

10:00 - 10:10 The limits of ESWL and endoscopic surgery
F. Keeley, Bristol (GB)

10:10 - 10:20 Partial and/or total nephrectomy - when and in whom?
W.L. Strohmaier, Coburg (DE)

10:20 - 10:30 Ileal replacement of ureter and renal auto-transplantation - when and in whom?
P. Alken, Mannheim (DE)

10:30 - 10:40 Chronic renal pain in stoneformers - what is it?
B. Hess, Zurich (CH)

10:40 - 10:50 Renal sympathectomy - has it got a role?
P.N. Rao, Manchester (GB)

10:50 - 11:20 Discussion
M. Daudon, Paris (FR)
L.J.G. Grenabo, Göteborg (SE)

11:20 - 12:20 Scientific poster session (selected best papers presented at the eULIS Congress in Coburg, Germany, 2005)
Chair: W.L. Strohmaier, Coburg (DE)
The influence of variations of calcium and oxalate concentrations on stone growth in vitro
N.K. Saw, Wrexham (GB) con3-5-0840

Stabilisation of calcium oxalate suspension by urinary macromolecules, probably an efficient protection from stone formation
J. Baumann, Biel (CH) con3-5-0850

Do antioxidants protect against renal injury in patients receiving lithotripsy for renal calculi?
K. Al-Awadi, Rawda (KW) con3-5-0860

Extending the application of tubeless percutaneous nephrolithotomy
A. Beri, Holon (IL) con3-5-0870

Role of mutations in the sodium dicarboxylate cotransporter-1 in the etiology of hypocitraturia in calcium-oxalate stone disease
S. Lahme, Pforzheim (DE) con3-5-0880

A new knock-out cell culture model for investigation of cystinuria
T. Knoll, Mannheim (DE) con3-5-0890

Are the new generation biphosphonates effective for inhibition of calcium oxalate urolithiasis? A rat model
N. Atsu, Istanbul (TR) con3-5-0900

12:20 - 12:30 Conclusion

Aims and objectives
The management of most stones is straightforward. As in all clinical situations, difficult problems appear from time to time. What can an urologist offer to such a patient? Sometimes, the solution is medical and sometimes it is surgical. The aim of the meeting is to highlight some not-so-commonly known presentations of urolithiasis and medical and surgical solutions for these problems.
**Meeting of the European Society of Neurourology (ESNU)**

**08:30 - 12:30**

**Introducing the second European masterclass on Botulinum toxin for the overactive bladder**

**Room 242 Level 2**

**Chairs:**
C.J. Fowler, London (GB)
P. Dasgupta, London (GB)

**08:30 - 09:00**

**Business meeting**

**09:00 - 09:20**

**Botulinum toxin for adult OAB: The 'magnificent 7' first years**
B. Schürch, Zurich (CH) 242-5-0910

**09:20 - 09:40**

**Botulinum toxin for adult OAB: The 'bad and the ugly' cases**
P. Radziszewski, Warsaw (PL) 242-5-0920

**09:40 - 10:00**

**'La cite des enfants perdus': Botulinum toxin for children with neurogenic bladder**
H. Schulte-Baukloh, Berlin (DE) 242-5-0930

**10:00 - 10:20**

**Delivering Botulinum toxin to the bladder: Design your own technique!**
P. Dasgupta, London (GB) 242-5-0940

**10:20 - 10:40**

**Break**

**10:40 - 11:00**

**'Honey, I blew up the kids': Botulinum toxin makes the bladder more compliant**
E. Chartier-Kastler, Paris (FR) 242-5-0950

**11:00 - 11:20**

**'Innerspace': Electron microscopy views of the overactive detrusor**
A. Haferkamp, Heidelberg (DE) 242-5-0960

**11:20 - 11:40**

**'Love me tender': The 'sensational' urothelium flirts with Botulinum toxin**
A. Apostolidis, London (GB) 242-5-0970

**11:40 - 12:00**

**'The colour of money': A cost-consequence model for Botulinum toxin**
V. Kalsi, London (GB) 242-5-0980

**12:00 - 12:30**

**Discussion and conclusion**
C.J. Fowler, London (GB) 242-5-0990

**Aims and objectives**

In the past 7 years, Botulinum neurotoxin type A (BoNT/A) has revolutionised the treatment of neurogenic or non-neurogenic LUTS resistant to first line treatments. Worldwide reports of BoNT/A injected into the wall of the overactive bladder (OAB) confirm its exceptional efficacy in improving urgency, frequency and urgency incontinence as well as urodynamic parameters. However, its mode of action in the human bladder is largely unknown and studies are needed to explore whether its effects on detrusor function are the result of modulation of afferent pathways. With a mean duration of action of up to 11 months and reproducibility of its clinical effect in repeat treatments, the challenge for established second line treatments of the OAB is becoming apparent. BoNT/A, however, remains an unlicensed treatment in the OAB and comparative studies with established treatments are needed to examine its cost-effectiveness and its potential integration in the therapeutics of patients with OAB.
This workshop aims to provide a review of the current knowledge on the use of BoNT/A in the OAB, looking at clinical efficacy and safety, mechanism of action, as well as issues related to its application in clinical practice, such as injection techniques and costings.
**Wednesday, 5 April - EAU Section Meetings**

Meeting of the European Society for Urological Imaging (ESUI)

<table>
<thead>
<tr>
<th>Time</th>
<th>Session</th>
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<tbody>
<tr>
<td>08:30</td>
<td><strong>Innovative imaging in and around urology</strong></td>
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<tr>
<td>08:30 - 09:30</td>
<td>Business meeting</td>
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<tr>
<td>09:30 - 09:45</td>
<td>Welcome and introduction</td>
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<td>T. Loch, Flensburg (DE)</td>
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<td>09:45 - 10:00</td>
<td><strong>State of the art: Imaging in Europe: Who, where, what, how many?</strong></td>
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<td>M. Colombel, Lyon (FR)</td>
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<td>P. Fornara, Halle/Saale (DE)</td>
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<td>M. Coelho, Lisbon (PT)</td>
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<td>10:00 - 10:15</td>
<td>ESUI guest lecture: Modern radiology: What is doable?</td>
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<td>G. Schneider, Homburg/Saar (DE)</td>
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<td>10:15 - 10:25</td>
<td>Intralaparoscopic ultrasound in urology</td>
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<td>C. Trombetta, Trieste (IT)</td>
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<td>G. Liguori, Trieste (IT)</td>
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<td>10:25 - 10:35</td>
<td>Intraoperative ultrasound in the evaluation of tumor thrombus of the IVC (inferior vena cava)</td>
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<td>E. Belgrano, Trieste (IT)</td>
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<td>C. Trombetta, Trieste (IT)</td>
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<td>10:35 - 10:45</td>
<td>The use of 3D Ultrasonography in complex kidney cysts</td>
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<td>M. Coelho, Lisbon (PT)</td>
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<td>10:45 - 11:00</td>
<td>Modern imaging of the prostate: Standards and future</td>
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<td>T. Loch, Flensburg (DE)</td>
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<td>11:00 - 11:15</td>
<td>4D-ultrasound of the infant bladder - virtual cystoscopy?</td>
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<td>C. Schwentner, Innsbruck (AT)</td>
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<td>11:15 - 11:30</td>
<td>Ultrasound guided transurethral application of stem cells in treatment of incontinence</td>
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<td>H. Strasser, Innsbruck (AT)</td>
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<td>11:30 - 11:45</td>
<td>Contrast specific imaging of the prostate and the kidney</td>
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<td>H. Wijkstra, Amsterdam (NL)</td>
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<td>11:45 - 12:00</td>
<td>PET in urology: Useful tool or waste of money?</td>
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<td>S. Machtens, Hanover (DE)</td>
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<td>12:00 - 12:15</td>
<td>Sono-elastography of the testis and prostate</td>
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<td>L. Pallwein, Innsbruck (AT)</td>
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**Room 252 Level 2**
**Aims and objectives**

The role of imaging in urology varies from country to country. In some countries, imaging (even conventional X-ray or fluoroscopy) is considered to be routine work in day-to-day practice. In other countries, on the other hand, all imaging is done by the radiologist. However, due partly to the common use of ultrasound, it seems quite natural that the urologist should utilize imaging modalities in order to evaluate urological organs. Modern imaging technologies, especially 3D- and even 4D-reconstruction, give magnificent anatomical perspectives, which can be displayed and stored digitally in order to evaluate them with or without the patient being present. Increasingly, we are in contact with other specialties to perform more complex imaging. It seems very important to communicate with each other and other fields and to investigate the perspectives of innovative imaging techniques in and around urology. In the name of the ESUI, we want to create or extend your interests in the field of imaging and hope that you will benefit from the experience of the presenters. Furthermore, it seems important that different countries exchange their experiences and discuss the advantages and disadvantages of the different systems. I want to cordially invite you to visit the annual meeting of our society at the EAU and the many special courses offered by the presenters in their field of excellence.
Meeting of the European Society for Urological Research (ESUR)

08:30 - 12:30 ‘...omics in urological disease’

Chair: G.N. Thalmann, Berne (CH)

08:30 - 08:35 Welcome and introduction

08:35 - 08:55 Why is translational research important in urology?
J.A. Schalken, Nijmegen (NL)

08:55 - 09:20 Genomics in urological research
T. Visakorpi, Tampere (FI)

09:20 - 09:45 Proteomics in urological research I
U.H. Stenman, Helsinki (FI)

09:45 - 10:00 Break

10:00 - 10:25 Proteomics in urological research II
R. Banks, Leeds (GB)

10:25 - 10:50 Pharmacogenomics in urological research
J. Reichardt, Camperdown (AU)

10:50 - 11:15 Bio-informatics
O. Poch, Illkirch Strasbourg (FR)

11:15 - 11:45 Discussion

11:45 - 12:30 Business meeting

**Aims and objectives**

In recent years we have been increasingly confronted with new technologies that are termed “...omics” such as genomics and proteomics. Do these technologies concern us as urologists? What do they tell us? When are they used? In this symposium, very distinguished speakers and experts in the field will discuss the concept of translational research. They will introduce the interested urologist to the concepts, techniques, principles and limitations of these novel technologies in a comprehensive manner. In addition, the problem of how to analyse this large amount of data will be addressed. A round table discussion will enable interactive discussion of these technologies and whether and how they will find their way into clinical practice. This symposium is for all those who are interested in new developments or those just wanting to learn more about “...omics”.

Room 351 Level 3
Meeting of the European Society for Uro-Pathology (ESUP)

08:30 - 12:30  Morphological changes in prostate tissue following the various forms of treatment

Chair: Liliane Boccon-Gibod, Paris (FR)

08:30 - 09:10  Changes following 5-alpha-reductase treatment
Liliane Boccon-Gibod, Paris (FR)  341-5-1250

09:10 - 09:50  Changes induced by cryotherapy
R. Montironi, Ancona (IT)  341-5-1260

09:50 - 10:30  Changes induced by androgen blockade
A. Lopez-Beltran, Cordoba (ES)  341-5-1270

10:30 - 11:10  Changes induced by radiation therapy
F. Algaba, Barcelona (ES)  341-5-1280

11:10 - 11:50  Neo adjuvant hormone therapy before radical prostatectomy, pitfalls in specimen evaluation
L. Egevad, Stockholm (SE)  341-5-1290

11:50 - 12:30  Effects of hormonal therapies on surgical margin status
G. Mikuz, Innsbruck (AT)  341-5-1300
**Wednesday, 5 April - EAU Section Meetings**

**Meeting of the European Society of Uro-Technology (ESUT)**

<table>
<thead>
<tr>
<th>Time</th>
<th>Event</th>
<th>Speakers</th>
<th>Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>08:30 - 13:45</td>
<td><strong>What’s new in uro-technology?</strong></td>
<td><strong>Chairs:</strong> A.D. Joyce, Leeds (GB) G.J. Alivizatos, Athens (GR)</td>
<td><strong>Room Bordeaux Level 3</strong></td>
</tr>
<tr>
<td>08:30 - 08:35</td>
<td><strong>Welcome and introduction</strong></td>
<td>J.J.M.C.H. De La Rosette, Amsterdam (NL)</td>
<td><strong>bord-5-1310</strong></td>
</tr>
<tr>
<td>08:35 - 09:00</td>
<td><strong>What’s new in endourology?</strong></td>
<td>D.A. Tolley, Edinburgh (GB)</td>
<td><strong>bord-5-1320</strong></td>
</tr>
<tr>
<td>09:00 - 09:30</td>
<td><strong>PDD - live surgery</strong></td>
<td>R. Muschter, Rotenburg (DE)</td>
<td><strong>bord-5-1330</strong></td>
</tr>
<tr>
<td>09:30 - 10:00</td>
<td><strong>Flexible URS - live surgery</strong></td>
<td>R.C. Swartz, Örebro (SE)</td>
<td><strong>bord-5-1340</strong></td>
</tr>
<tr>
<td>10:00 - 10:30</td>
<td><strong>Bipolar TURP - live surgery</strong></td>
<td>J. Rassweiler, Heilbronn (DE)</td>
<td><strong>bord-5-1350</strong></td>
</tr>
<tr>
<td></td>
<td><strong>Chairs:</strong> G. Breda, Bassano Del Grappa (IT) R.F. Van Velthoven, Brussels (BE)</td>
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</tr>
<tr>
<td>10:30 - 11:00</td>
<td><strong>What’s new in laparoscopy?</strong></td>
<td>G. Janetschek, Linz (AT)</td>
<td><strong>bord-5-1360</strong></td>
</tr>
<tr>
<td>11:00 - 12:30</td>
<td><strong>Laparoscopic cystectomy - live surgery</strong></td>
<td>C.C. Abbou, Creteil (FR)</td>
<td><strong>bord-5-1370</strong></td>
</tr>
<tr>
<td>12:30 - 13:00</td>
<td><strong>Training in laparoscopy</strong></td>
<td>I.S. Gill, Cleveland (US)</td>
<td><strong>bord-5-1380</strong></td>
</tr>
<tr>
<td>13:00 - 13:30</td>
<td><strong>What’s new in urologic imaging?</strong></td>
<td>J.J.M.C.H. De La Rosette, Amsterdam (NL)</td>
<td><strong>bord-5-1390</strong></td>
</tr>
<tr>
<td>13:30 - 13:45</td>
<td><strong>Conclusion</strong></td>
<td>J.J.M.C.H. De La Rosette, Amsterdam (NL)</td>
<td><strong>bord-5-1400</strong></td>
</tr>
</tbody>
</table>

**Aims and objectives**

In the section meeting of the ESUT, we intend to present and demonstrate “What’s new in urotechnology?” Special attention will be given to recent achievements in the field of endourology and laparoscopy. LIVEsurgery will include improvements in diagnostics (photodynamics diagnostics), stone management (flexible ureteroscopy) and electrosurgery (bipolar transurethral resection of the prostate). The LIVE surgery demonstrations will conclude with a cystectomy. In addition, two presentations will address training in laparoscopy and recent advances in urological imaging. Attending delegates will receive a full update on recent advances in urotechnology enabling them to judge the value of these technologies.

Supported by an unrestricted educational grant from KARL STORZ GMBH & CO.KG
ESRU Meeting

13th Meeting of the European Society of Residents in Urology (ESRU)

Chairs:
- M.S. Keskin, Ankara (TR)
- L. Martínez-Piñeiro, Madrid (ES)

12:30 - 13:00
Lunch

13:00 - 13:10
Welcome and introduction

13:10 - 13:35
State-of-the-art lecture Essentials of paediatric urology
J.M. Nijman, Groningen (NL)

13:35 - 14:00
State-of-the-art lecture Ureterorenoscopy: Techniques, indications and results
O. Traxer, Paris (FR)

14:00 - 14:25
State-of-the-art lecture Learning laparoscopy
C.C. Abbou, Creteil (FR)

14:25 - 15:00
Campbell’s challenge
An interactive quiz, testing the European residents on their urological knowledge: the winner will receive the urological bible: the new Campbell’s Urology
Chair: M.S. Keskin, Ankara (TR)

15:00 - 15:20
EAU Guidelines, their use in daily clinical practice
Chair: K.F. Parsons, Liverpool (GB)
Speakers: T. Hanus, Prague (CZ)
D.N. Mitropoulos, Athens (GR)

15:20 - 15:45
Break

15:45 - 16:45
Nightmare session
A presentation of clinical problems that have startled and perplexed residents all over Europe
Chair: A.R. Mundy, London (GB)
Panel:
- H.C. Klingler, Vienna (AT)
- L. Martínez-Piñeiro, Madrid (ES)
- I.C. Sinescu, Bucharest (RO)

16:45 - 17:00
Prize and conclusion
M.S. Keskin, Ankara (TR)

17:00 - 18:00
Drinks reception
## Wednesday, 5 April

### EAUN Programme

**12:30 - 18:00**  
*7th International Meeting of the European Association of Urology Nurses (EAUN)*

**12:30 - 16:00**  
**Workshop** *Presentations in English: Reading and comprehension*  
*Room Passy Level 1*

**Speaker:** A. Hagan, Coleraine (UK)

**17:00 - 18:00**  
**EAUN Opening Ceremony**  
*Room Passy Level 1*

**Guest speaker:** J. Mattelaer, Kortrijk (BE)

**18:15 - 19:30**  
**EAU Congress Opening Ceremony**  
*eURO Auditorium Level 1*

**19:30 - 21:00**  
**EAU Congress Welcome Cocktail**  
*Exhibition Area Level 1*
Thursday, 6 April – EAUN Programme

08:30 – 10:00 Breakfast symposium Intermittent catheterisation

Chair: J.T. Marley, Belfast (IE)

Welcome and introduction
J.T. Marley, Belfast (IE) 243-6-5150

State of the art
M. Beynon (Coloplast GB) 243-6-5160

Best practice – adult
T. Schwennesen, Skejby (DK) 243-6-5170

Introduction to case studies
J. T. Marley, Belfast (IE) 243-6-5180
M. Beynon (Coloplast GB) 243-6-5190

Group discussions

Plenum discussion
M. Beynon (Coloplast GB) 243-6-5210

Questions

Closing

Aims and objectives
This state of the art symposium will address the implications of intermittent catheterization on the neurogenic and non-neurogenic bladder. Key areas of focus will be, indications, best practice and future challenges. The symposium will be a combination of short presentations, small group workshops / discussions and questions and answers.

Sponsored by COLOPLAST A/S

10:30 – 12:00 ESU Course Anatomy and physiopathology of the urinary tract – Part 1

Chair: P. Rischmann, Toulouse (FR)

Introduction and anatomy of the upper urinary tract
P. Rischmann, Toulouse (FR) pass-6-5020

Adrenal gland: physiology and main disorders
F. Mantero, Padua (IT) pass-6-5030

Mechanisms of kidney function and failure
D. Chauveau, Toulouse (FR) pass-6-5040

12:00 – 13:00 Break

Simultaneous translation from English to French will be provided
Thursday, 6 April

13:00 - 14:30  ESU Course  Anatomy and physiopathology of the urinary tract - Part 2

Room Passy Level 1

Chair: P. Rischmann, Toulouse (FR)

Pyelonephritis: Mechanisms and consequences
B. Lobel, Rennes (FR)

Obstruction of the upper urinary tract: Causes and main treatments
P. Van Cangh, Brussels (BE)

Videos and discussion

14:30 - 15:00  Break

15:00 - 16:30  Abstract session I

Room Passy Level 1

Chairs: K. Jensen, Zürich (CH)  
J.T. Marley, Belfast (IE)

P1  Nurses as key figures in clinical trials
S. Skou (Aarhus, Denmark)

P2  Information pass for female patients with a continent catheterisable pouch
K. Ochsner, R. Willener, F.C. Burkhard (Bern, Switzerland)

P3  Validation of the Overactive Bladder Family Impact Measure (OAB-FIM)
K.S. Coyne, L. Matza, J. Brewster-Jordan, E. Goldfischer (New Albany, OH, United States of America)

P4  Identifying own practice with telephone nursing
B. Thoft (Aarhus, Denmark)

O1  A way how to put evidence into clinical practice on a urology ward
R. Willener, V. Hantikainen (Bern, Switzerland)

O2  The urological patient at the nurse reception
E. Bonns (Korsholm, Finland)

O3  Is it reasonable for a man in acute urinary retention to be catheterised and immediately discharged for nurse-led care in the community?
J. Lee, J. Green, P. Rouse (London, United Kingdom)

O4  Assessment of sexual dysfunction in women with urinary incontinence
C. Dondar, U. Boylu, H. Aslan, S. Silay, C. Miroglu (Istanbul, Turkey)

O5  Macroscopic hematuria - an accurate and reliable tool in data collecting and documentation? an inter-disciplinary project.
L. Breindahl Kristensen, A-M. Skovsgaard (Aarhus, Denmark)

O6  Stress urinary incontinence treatment using synthetic tape. About 60 cases.
A. Bouzouita, M. Sfaxi, M. Cherif, M.R. Ben Slama, M. Hajri, L. Ben Hassine, M. Chebil, M. Ayed (Tunis, Tunisia)

Simultaneous translation from English to French will be provided
Thursday, 6 April – EAUN Programme

16:30 - 18:00  Workshop **Blocked catheters**  
**Room** Passy Level 1  
**Speaker:** M. Lauritzen, Stockholm (SE)  
pass-6-5140

16:30 - 18:00  State-of-the-art lecture **Suprapubic catheterisation**  
**Room** 243 Level 2  
**Speaker:** O. Ziylan, Istanbul (TR)  
243-6-5220

20.00 - 01.00  **Nurses Dance Evening**  
For more information see page 25

Simultaneous translation from English to French will be provided
**Friday, 7 April**

<table>
<thead>
<tr>
<th>Time</th>
<th>Event</th>
<th>Room</th>
<th>Level</th>
</tr>
</thead>
<tbody>
<tr>
<td>08:30 - 09:30</td>
<td><strong>Finding information on the internet and PubMed</strong></td>
<td><strong>Passy Level 1</strong></td>
<td>pass-7-5230</td>
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<tr>
<td>09:30 - 10:00</td>
<td><strong>Break</strong></td>
<td></td>
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<tr>
<td>10:00 - 11:00</td>
<td><strong>Workshop Writing for publication</strong></td>
<td><strong>243 Level 2</strong></td>
<td>243-7-5350</td>
</tr>
<tr>
<td>10:00 - 11:00</td>
<td><strong>Uro stomas Post indications and technique</strong></td>
<td><strong>Passy Level 1</strong></td>
<td>pass-7-5240</td>
</tr>
<tr>
<td>11:00 - 11:30</td>
<td><strong>Uro stomas Post operative care</strong></td>
<td><strong>Passy Level 1</strong></td>
<td>pass-7-5250</td>
</tr>
<tr>
<td>11:30 - 12:00</td>
<td><strong>Uro stomas Stoma care and patient education</strong></td>
<td><strong>Passy Level 1</strong></td>
<td>pass-7-5260</td>
</tr>
<tr>
<td>12:00 - 13:00</td>
<td>Lunch</td>
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<tr>
<td>13:00 - 14:00</td>
<td><strong>Uro stomas Complications</strong></td>
<td><strong>Passy Level 1</strong></td>
<td>pass-7-5270</td>
</tr>
<tr>
<td>14:30 - 15:00</td>
<td><strong>Break</strong></td>
<td></td>
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<tr>
<td>13:00 - 13:45</td>
<td><strong>State-of-the-art lecture Cystoscopy</strong></td>
<td><strong>243 Level 2</strong></td>
<td>243-7-5360</td>
</tr>
<tr>
<td>13:45 - 14:35</td>
<td><strong>State-of-the-art lecture Stone management</strong></td>
<td><strong>243 Level 2</strong></td>
<td>243-7-5370</td>
</tr>
</tbody>
</table>

*Simultaneous translation from English to French will be provided.*
Friday, 7 April – EAUN Programme

15:00 - 15:15  Presentation of BAUN Journal

Speaker:  J.T. Marley, Belfast (IE)

Room Passy Level 1  
pass-7-5280

15:15 - 16:45  Abstract session II

Chairs:  K. Jensen, Zürich (CH)  
         J.T. Marley, Belfast (IE)

Room Passy Level 1

P5  PVP –photoselective vaporisation of the prostate  
    M. Midttun, M. Bindslev (Herlev, Denmark)

P6  Standardized documentation of Zometa® therapy and nursing care at an urology outpatient clinic  
    U. Ramseier, R. Willener (Berne, Switzerland)

P7  The artificial urinary sphincter. An overview about the system and a view on nurses’ responsibilities  
    S. Hieronymi, U. Witzsch (Oberursel, Frankfurt, Germany)

P8  Oral oxycodone hydrochloride vs epidural anaesthesia for pain control after radical retropubic prostatectomy  
    L. Hohwü, O. Akre, B. Lennart, M. Törnbom, O. Gustafsson (Stockholm, Sweden)

P9  Individual quality of life following radical prostatectomy in men with prostate cancer  
    A. Ghabeli Juibary (Babol, Iran)

P7  Prostate biopsy techniques and results. About 350 cases  
    M. Slafi, A. Bouzouita, M.R. Ben Slama, M. Blah, L. Ben Hassine, M. Hajri,  
    M. Chebil, M. Ayed, K. Hamza (Tunis, Tunisia)

P8  Transurethral ethanol ablation of prostate (TEAP): An alternative treatment option for patients with BPH  
    K. Wilkinson, N. Buchholz, N. Bafaloukas, C. Cannaby (London, United Kingdom)

P9  Nursing information for prostate cancer patients and its relationship on patients’ health related quality of life  
    L. Kuivalainen (Joenasu, Finland)

O7  Tips and tricks in robotic urology - lessons learned in the past three years  
    M. Nightingale, P. Seagers, S. O’Neil (London, United Kingdom)

O10  Percutaneous cystolithotripsy using video-monitoring cystoscope  
     M.R. Razaghi, A. Tabibi, B. Abadpoor, A. Kavyani, A. Moradi, H. Karami (Tehran, Iran)

17:15 - 18:00  EAUN General Assembly and Awards

Chair:  A. Grundal, Aarhus (DK)

Room 243 Level 2  
pass-7-5340

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As a member of the EAU you will have many advantages which include the membership fees:

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  - European Urology Video Journal, an annual published DVD aiming to distribute the best information on urological diseases and techniques.
  - The EAU Urology Updates, a quarterly published educational publication, published as a supplement of European urology.
  - EAU Guidelines, an extensive series of guidelines on many urological diseases produced by the EAU Health Care Office.
  - Historia Urologiae Europaeae (one volume each year on European historical subjects).
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So if you are not yet an EAU member, make certain to become one in Paris and visit the EAU booth PA27 on level 1.
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M. Zerbib, Paris (FR)

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Continuing Medical Education
EU-ACME is an initiative resulting from a close collaboration between the European Association of Urology (EAU) and the Accreditation Committee of the European Board of Urology (EBU).

EU-ACME stands for European Urology – Accredited Continuing Medical Education. It is based on the EBU/UEMS rules and its primary task is the implementation, promotion and organization of Continual Medical Education (CME) among European Urologists. It provides urologists with the system which helps them to keep track of their educational activities, irrespective of the country they practice in or where they have participated in CME and/or CPD activities.

It is expected that national CME systems for specialists will become obligatory in European countries in the near future. Participation in the EU-ACME Programme will give certified European urologists the opportunity to start gathering the required points.

At the moment the following associations/countries participate in the EU-ACME Programme:

• EAU
• ESPU
• ICS
• Austria
• Greece
• Italy
• Poland
• Romania
• Spain
• Sweden
• The Netherlands
• Turkey

This means that participants of the EU-ACME Programme can gain credits for participation in all urological activities that are organised by the affiliated associations, for more information, please visit the website: http://rtweb.rtol.it/ebu

Accreditation of the 21st Annual EAU congress
Many countries within Europe have a national CME accreditation system. The EAU has requested all European National Urological Societies to give CME accreditation points for attending the EAU Congress. The number of credits granted to the congress by the different National Urological Associations is listed in the programme book. Information on national accreditation can be found as well by contacting the National Urological Associations.

The 21st Annual EAU Congress is accredited with 1 credit per hour with a maximum of 6 credits per day and a maximum of 18 credits for the whole meeting. ESU courses are granted 1.5 credits per hour, irrespective of the 18 credits for the whole congress.

Attendance control will take place at all entrances to sessions, symposia and courses by scanning of the congress badge. Credit points will automatically be attributed to members of the EU-ACME Programme.

Information about the EU-ACME programme, your acquired CME credit points and membership cards can be obtained at the EU-ACME corner at the EAU booth PA27 on level 1.
The participants of the countries who already joined the EU-ACME programme will receive automatically credits following the rules of the EBU/UEMS system.

The 21st Annual EAU Congress is therefore accredited with 1 credit per hour, 6 credits per day with 18 credits for the whole meeting. Countries participating in this Programme are: Austria, Greece, Italy, Poland, Romania, Spain, Sweden, The Netherlands and Turkey as well as the following international societies: EAU, ESPU and ICS.

Please find below the CME accreditation points given by other National Urological Societies for participation in the 21st Annual EAU Congress in Paris on 5-8 April 2006 which are given according to European or national regulations. A Certificate of Attendance has been inserted in the congress bag.

<table>
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<tr>
<th>Country</th>
<th>Organization/Association</th>
<th>Entire Congress</th>
<th>Per Day</th>
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(countries who responded to our inquire)
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<td>1976</td>
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The EAU Digital Video Library is supported by an unrestricted educational grant from ASTELLAS
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<td>Laparoscopic right radical and left partial nephrectomy for bilateral RCC</td>
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<td>G. Janetschek, R. Peschel, D. Strohmayer, G. Bartsch (Innsbruck, Austria)</td>
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<td>Water jet technology in renal surgery</td>
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<td>R. Basting, N. Djakovic, P. Widmann (Altötting, Germany)</td>
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<td>Nephron sparing surgery for multiple renal cell carcinoma in a solitary kidney</td>
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<td>G. Nicita, M. Paoletti, D. Villari, E. Dattelo, V. Li Marzi, M. Marzocco (Florence, Italy)</td>
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<td>Partial nephrectomy and subtotal pancreatectomy for renal adenocarcinoma lumbotomy approach for both procedures</td>
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<td>O. Leiva, M. Martin, F. Villacampa, J. Duarte, A. Rodriguez, F. De la Rossa (Madrid, Spain)</td>
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<td>Surgical approach in renal cell carcinoma with intravenous neoplastic extension</td>
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<td>C. Stief, H. Schäfer, M. Kucyk, U. Jonas (Hannover, Germany)</td>
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<td>Surgical management of renal cell carcinoma with intra-atrial extension: Combined cardiopulmonary bypass, hypospermia and temporary cardiac arrest</td>
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<td>F. Martins, J. Freeman, J. Alves, J. Lencastre (Lisbon, Portugal)</td>
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<td>Radical nephrectomapsulectomy under ECC and deep hypothermic arrested circulation in RCC with thrombosis of the inferior v. cava or into the atrium. Surgical techniques and personal series</td>
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<td>R. Bertini, M. Rsocigno, L. Da Pozzo, R. Colombo, P. Stefano, O. Alfieri, P. Rigatti (Milan, Italy)</td>
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<td>New strategy and minimal access approach for cardiopulmonary bypass (CPB) in renal cell carcinoma (RCC) with suprahepatic caval thrombi</td>
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<td>A. Sorcini, J.A. Libertino (Burlington, Massachusetts, United States of America)</td>
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<td>Refinement in rectosigmoid vaginoplasty</td>
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<td>Penile disassembly technique in epispadias repair: Our variant</td>
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<td>Endoscopic retrograde endopyelotomy in ureteropelvic junction obstruction</td>
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<td>P. Geavlete, V. Miriciulescu, V. Cauni, G. Nita, D. Georgescu (Bucharest, Romania)</td>
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Uroplasty with free appendix mucosal graft
T. Lebret, P. Grise, J. Hervé, P. Mitrofanoff, H. Botto (Rouen, Suresnes, France)

Laparoscopic promontory sacral colposuspension
P. Antiphon, A. Hoznek, L. Salomon, D. Chopin, C. Abbou (Créteil, France)

Full-length buccal mucosa dorsal onlay graft for balinitis xerotica obliterans
S. Kulkarni, J. Kulkarni, D. Kiperkar (Pune, India; Ashford-Middlesex, United Kingdom)

Urethroplasty with free graft of buccal mucosa
A. Mendes Leal, T. Aires (Povoa, Portugal)

Gastrocystoplasty
J. Dvoracek, R. Kocvara, Z. Dite (Prague, Czech Republic)

Cytocele repair using a marlex graft
G. Martorana, E. Brunocilla, S. Concetti, L. Bisceglie, G. Vignoli (Bologna, Italy)

Female cystectomy with orthotopic ileal afferent limb reconstruction
R. Mills, U. Studer (Bern, Austria)

‘Y’ neobladder: Preliminary results
D. Fontana, M. Bellina, C. Scoffone, M. Poggio, S. Guercio (Torino, Italy)

Duplex Doppler Ultrasound evaluation in single-system ureteroceles
P. Geavlete, D. Georgescu, G. Nita (Bucharest, Romania)

Nephro-ureterectomy performed by transurethral excision of a bladder cuff and retroperitoneal laparoscopy
J. Rozenman, J. Shental, D. Almog, G. Chaimovitch (Afula, Israel)

Percutaneous nephrolithotomy of transplanted kidney
F. Francesca, R. Felipetto, F. Mosca, U. Boggi, G. Rizzo, R. Puccini (Pisa, Italy)

Inlay-onlay flap urethroplasty in the absence of the urethral plate
R. Kocvara, J. Dvoracek (Prague, Czech Republic)

Inverted ‘Y’ incision-variant of transurethral incision of the prostate
P. Geavlete (Bucharest, Romania)
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Simultaneous flap vaginoplasty and introitoplasty in urogenital sinus malformation
L. Martínez-Piñeiro, J. García-Mediero, P. Cárcamo, M. Gacía-Matres, J. De la Peña (Madrid, Spain)

Second Prize EAU 2001 Geneva
Laparoscopic retroperitoneal lymphnode dissection for testicular cancer
R. Peschel, G. Janetschek, D. Strohmeyer, G. Bartsch, A. Hobisch (Innsbruck, Austria)

Third Prize EAU 2001 Geneva
Robotically assisted laparoscopic radical prostatectomy
G. Vallancien, G. Pasticier, J. Rietbergen, B. Guillonneau (Paris, France)

Telesurgical laparoscopic radical prostatectomy
J. Rassweiler, T. Frede, O. Seemann, C. Stock, L. Sentker (Heilbronn, Germany)

Use of pedicled flap labia minora for the repair of female urethral strictures
M. Tanello, E. Frego, C. Simeone, S. Cosciani Cunico (Brescia, Italy)

Female urethral sticture and diverticula
V. Pansadoro, F. De Paula, M. Pizzo, P. Emiliozzi, P. Scarpone, G. Federico (Rome, Italy)

Hadera continent reservoir - 5 year follow-up
D. Yachia, N. Erlich (Hadera, Israel)

Retroperitoneal lymph node dissection with caval thrombectomy for advanced nonseminomatous germ cell tumour of the left testicle
F. Martins, M. Alves, J. Freeman, J. Lencastre, J. Varela (Lisbon, Portugal)

Dorsal onlay preputial graft urethroplasty for repair of distal bulbar urethral stricture
L. Martinez-Piñeiro, J. Cisneros, J. Ramón de Fata, J. De la Peña (Madrid, Spain)

Nerve and seminal vesicle sparing cystectomy with orthotopic urinary diversion for selected bladder cancer
R. Colombo, R. Bertini, A. Salonia, L. Da Pozzo, M. Roscigno, P. Rigatti (Milan, Italy)

Seminal vesicle sparing cystectomy and ileocapsuloplasty
G. Muto, F. Bardari, L. D’Urso, P. Coppola (Torino, Italy)

The Ghoneim antireflux ureteroileal implantation technique on GIA stapler detubularised ileal neobladder
G. Muto, F. Bardari, L. D’Urso, P. Coppola (Torino, Italy)

Cost effective hand assisted laparoscopic radical nephrectomy (Hungarian technique)
G. Kovacs, E. Holman, B.S. Dénés, J. Kalman, A. Karsza, J. Rozsahegy (Budapest, Hungary)

Local tumour excision in renal cell carcinoma
L. Martinez-Piñeiro, A. Aguilera, D. Rendon, E. Rios, J. De la Peña (Madrid, Spain)
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V.I.P. (Vescica Ileale Padovana) Ileal neobladder: The evolution
P. Bassi, F. Pagano, W. Battenello, D. Battaglia (Padua, Italy)

Seminal vesicle and prostatic capsule sparing cystectomy
M. Carini, A. Lapini, U. Locuntom, L. Maseiri, S. Serni (Padua, Italy)

Total penectomy with perineal urethrostomy for locally advanced neoplasms of the penis
A. Simonato, A. Gregori, A. Lissiani, S. Galli, A. Bozzola, F. Gaboardi (Milan, Italy)

Radical ilioinguinal node dissection with transposition of the sartorius muscle
A. Simonato, A. Lissiani, A. Gregori, S. Galli, A. Bozzola, F. Gaboardi (Milan, Italy)

News in urosonography
H. Heynemann, M. Zacharias, A. Wicht, K-V. Jenderka, P. Formara (Halle-Wittenberg, Germany)

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Excision and end-to-end anastomosis for repair of bulbar urethral stricture
L. Martínez-Piñeiro, N. Cruz, F. Torrubia, R. Medina, P. Montañes (Madrid, Sevilla, Spain)

Ventral onlay preputial graft urethroplasty for repair of bulbar urethral stricture
L. Martínez-Piñeiro, F. Torrubia, N. Cruz, J.B. García Ramos, P. Montañes (Madrid, Sevilla, Spain)

Endoscopic ureteral stripping in the treatment of renal pelvis tumours
T. Maghiar, G. Bumbu, V. Coltoiu (Oradea, Romania)

Lithiasis on the vesical-urethral anastomosis after radical prostatectomy
G. Bumbu, V. Coltoiu, T. Maghiar, L. Szilagyi (Oradea, Romania)

Dorsal onlay graft urethroplasty with oral mucosa
J. Martínez-Piñeiro, E. Ríos, J. García Mediero, L. Martínez-Piñeiro (Madrid, Spain)

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Educational Video Prize 2002 Birmingham
Nerve sparing laparoscopic radical retropubic prostatectomy
C. Abbou, A. Hoznek, L. Salomon, R. Quintela, F. Saint, E. Olsson, D. Chopin (Créteil, France)

Innovational Video Prize 2002 Birmingham
Resection of RCC with extended vena caval involvement performed with cardiopulmonary bypass, hypothermia and cardiac arrest with heartport device
P. Graziotti, M. Maffezzini, G. Giusti, M. Seveso, G. Taverna, D. Lavelli, R. Gallotti, A. Bandera, A. Benetti (Milan, Italy)

Research Video Prize 2002 Birmingham
The risk of bladder denervation during antireflux surgery: A reliable neurophysiological model
C. Seif, P. Braun, F. Martinez Porillo, B. Herberger, G. Boehler, J. Leissner, K-P. Juenemann, R. Hohenfellner (Mannheim, Magdeburg, Kiel, Mainz, Germany)
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<td>Inlay-onlay flap urethroplasty in the absence of the urethral plate</td>
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**Penile curvature and Peyronie: New problems, new solutions**
F. Mantovani, E. Patelli, C. Castelnuovo, E. Pisani (Milan, Italy)

**Total urethral reconstruction with S.I.S. (porcine small intestinal sub-mucosa)**
D. Mauro (Rome, Italy)

**Seminal vesicle sparing sigmoid neobladder reconstruction**
G. Nicita, D. Villari, E. Dattolo, V. Li Marzi, M. Paoletti, M. Marzocco (Florence, Italy)

**Conversion of a conduit to continent cutaneous diversion**
D. Melloni, M. Caramia, C. Magno, V. Serretta, W. Mansson (Messina, Palermo, Italy; Lund, Sweden)

**Retroperitoneoscopic partial nephrectomy**
S. Sato (Sapporo, Japan)

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<td>Penile duplication with long distance: joining with successful outcome</td>
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**Re-do end to end urethroplasty in traumatic disruption of the membranous urethra**
L. Martínez-Piñeiro, J. Madrid, A.J. Garcia (Madrid, Spain)

**Reconstructive phalloplasty after amputation for penile cancer, using dermal-epidermal grafts, prosthesis implantation and glanduloplasty with oral mucosa**
E. Austoni, F. Colombo (Milan, Italy)

**Primary malignant melanoma of the urethra: reconstructive solution in a rare case**
G. Carmignani, P. Traverso, A. Naselli, F. Bertolotto, A. Romagnoli, C. Corbu (Genova, Italy)

**One stage primary reconstruction of bladder extrophy with modified penile disassembly**
A. Hafez, M. Eisherbny, M. Baazed, M. Ghoneim (Mansoura, Egypt)

**Management of radiation of rectoprostatic fistulas with skin or buccal graft patch onlay and gracilis muscle interpretation**
A. Sorcini, J. Latini, L. Zinman (Burlington, United States of America)
Conservative vaginal surgery for total genitourinary prolapse
G. Nicita (Florence, Italy)


Laparoscopic repair of recurrent prolapse
H. Baumert, H. Widmer, R. Gupta, R. Adorna Rosa, B. Guilloneau, G. Vallencien (Paris, France)

Innovational Video Prize Madrid 2003
Video-assisted nerve and prostate-sparing cystectomy
X. Cathelineau (Paris, France)

Research Video Prize Madrid 2003
Extraperitoneal laparoscopic radical prostatectomy
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<td>Complex repair in failed male transsexual surgery</td>
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<td>Perugia orthotopic neo-bladder vesicle. Prostate sparing cystectomy: a complete after seminal- recovery of sexual function and body image</td>
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<td>Primary malignant melanoma of the urethra. Reconstructive solution in a rare case</td>
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<td>Prize for the Best Video published in EUVJ 2003</td>
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<td>05 EAU 36</td>
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<td>One stage primary reconstruction of bladder extrophy with modified penile disassembly</td>
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<td>Educational – surgery video prize</td>
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<td>Endoscopic extraperitoneal radical prostatectomy (EERPE)</td>
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<td>U. Stolzenburg, R. Rabenalt, M. Do, M. H. Pfeiffer, M. Truss, W. Dorschner (Hannover, Leipzig, Germany)</td>
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<td>Innovational video prize</td>
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<td>Robotic-assisted (Da Vinci®) laparoscopic conduit urinary diversion in neurogenic bladder</td>
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<td>J. Hubert, J. Beis, B. Feuillu, A. Coissard, P. Mangin, J. Andre (Nancy, France)</td>
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<td>Endourologic treatment of renal pelvic and urethral transitional cell carcinoma</td>
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<td>P. Geavlete, D. Georgescu, G. Nita, V. Mirciuleascu (Bucharest, Romania)</td>
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<td>Pyelocaliceal diverticulum particularities: experiences on 5 cases</td>
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<td>P. Geavlete, D. Georgescu, G. Nita, V. Cauni (Bucharest, Romania)</td>
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<td>Endoscopic treatment of superficial transitional cell carcinoma in the intramural ureter</td>
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<td>P. Geavlete, D. Georgescu, G. Nita (Bucharest, Romania)</td>
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Sigma- Rectum pouch, modified technique
J. Hadzi-Djokic, D. Basic, M. Petrovic, D. Jovanovic, Z. Dzamic, N. Prokopiv (Belgrade, Serbia and Montenegro)

Laparoscopic radical cystectomy with mainz rectal pouch urinary diversion
A. Loualalen (Toulouse, France)

Genital organ preservation during radical cystectomy and orthotopic bladder substitution in selected women
B. Ali-El-Dein, A. Mosbah, Y. Osman, M. Abdel-Latif, I. Eraky, A. Shaaban, M. Ghoneim (Mansoura, Egypt)

Laparoscopic cystoprostatectomy for bladder cancer, description step by step
C. Vaessen, M. Mouzin, X. Game, N. Berrogain, B. Malavaud, P. Rischmann (Toulouse, France)

Laparoscopic cystoprostatectomy
X. Cathalineau, F. Rozet, S. Lorin, W. Duncan, C. Arroyo, E. Barret (Paris, France)

Laparoscopic radical cystectomy and ileal conduit in women
H. Baumert, F. Khan, R. Morgan, H. Patel, M. Al-Akraa, A. Kaisary (London, United Kingdom)

Laparoscopic radical cystectomy
A. Hoznek, C-C. Abbou (Creteil, France)

Surgical treatment of total uterine prolapse associated with stress urinary incontinence and bilateral hydronephrosis
J. Hadzi-Djokic, D. Basic, Z. Dzamic, M. Acimovic, V. Stamenkovic, S. Velikovic (Belgrade, Serbia and Montenegro)

Female laparoscopic artificial urinary sphincter in women for type III incontinence: Preliminary results.
B. Nijinou (Le Havre, France)

Treatment of male urinary incontinence with submucosal bulking agents
J. Seibold, A. Merseberger, K. Sievert, A. Stenzl (Tübingen, Germany)

The tunica-albuginea- patch- technique: A new technique of an autologous grafting procedure for patients with Peyronie’s disease
J.U. Schwarzer, J. Mayerhofer, O. Schukai, B. Mühlen (Freising, Germany)

Treatment of Peyronie’s disease with plaque incision and application of bovine pericardium graft
L. Martinez-Pineiro, S. Alonso, J. Cruz, E. Cuervo, J. De la Pena (Madrid, Spain)
Early ligature of the renal artery during laparoscopy radical nephrectomy
F. Porpiglia, C. Terrone, R. Tarabuzzi, C. Fiori, M. Cossu, C. Cracco, C. Scoffone, R. Scarpa (Orbassano, Italy)

Laparoscopic radical nephrectomy
A. Shoma, E. Ibrahim, H. El Kappany (Mansoura, Egypt)

Laparoscopic partial nephrectomy for renal tumours after renal artery clamping the Quebec City experience.
T. Dujardin, R. Sabbagh, B. Inman (Québec, Canada)

Laparoscopic nephron-sparing sugery techniques of haemostatis
F. Gaboardi, A. Simonata, A. Lissiani, A. Gregori, S. Galli, A. Bozzola (Milan, Italy)

Laparoscopic radical nephrectomy with lymph node dissection for advanced renal cell carcinoma pT3aN2.
H. Baumert, F. Khan, N. Shah, T. Aho, W. Turner (Paris, France; London, United Kingdom)
Also available at the EAU Digital Video Library are the videos presented during the video sessions in the eURO Auditorium

2006-1 Anatomical features and dissection of the accessory pudendal arteries during laparoscopic radical prostatectomy
(Brest, Paris, France)

2006-2 Laparoscopic radical prostatectomy, preservation of accessory pudendal arteries
L. Martínez-Piñeiro, J.R. Cansino, F. Cáceres, A. Tabernero, J. Cisneros, J.J. De La Peña (Madrid, Spain)

2006-3 Anatomy and preservation of accessory pudendal arteries in laparoscopic radical prostatectomy
F. Secin, N. Karanikolas, J.I. Martinez Salamanca, F. Bianco, K. Touijer, B. Guillonneau (New York, United States of America)

2006-4 Neurovascular bundle dissection: interfascial, extrafascial and full resection techniques

2006-5 Description of the surgical anatomy of the fascias surrounding the prostate during laparoscopic radical prostatectomy
(Brest, Paris, France)

2006-6 How to prevent iatrogenic capsular incision during laparoscopic nerve sparing radical prostatectomy
(Brest, Nancy, France)

2006-7 Laparoscopic partial cystectomy for bladder müllerianosis
V. Pansadoro, P. Emiliozzi, G. Federico, M. Martini, A. Pansadoro, M. Pizzo, P. Scarpone (Rome, Italy)

2006-8 Laparoscopic radical cystectomy in female
F. Gaboardi, A. Bozzola, S. Galli, A. Gregori, F. Scieri, S. Stener, B. Rocco (Milan, Italy)

2006-9 Laparoscopic radical cystectomy with neobladder acc. to Studer
V. Pansadoro, P. Emiliozzi, G. Federico, M. Martini, A. Pansadoro, M. Pizzo, P. Scarpone (Rome, Italy)

2006-10 Laparoscopic radical cystectomy with bladder replacement

2006-11 Transvesical laparoscopic diverticulectomy
V. Pansadoro, P. Emiliozzi, G. Federico, M. Martini, A. Pansadoro, M. Pizzo, P. Scarpone (Rome, Italy)

2006-12 Endoscopic lymphadenectomy for penile carcinoma
R. Sotelo, A.J. Garcia, R. Sánchez Salas, O. Carmona, R. Dubois, F. Cornejo, M. Mariano, G. Neiva, A. Finelli
(Caracas, Venezuela; Quito, Ecuador; Porto Alegre, Goiania, Brazil; Toronto, Canada)

2006-13 Laparoscopic partial nephrectomy with clamping of the renal parenchyma
(Rennes, France)

2006-14 Laparoscopic partial nephrectomy for RCC in warm ischemia
A. Häcker, K. Leeb, N. Albquami, A. Al Badour, S. Jeschke, G. Janetschek (Mannheim, Germany; Linz, Austria)

2006-15 Laparoscopic upper pole heminephroureterectomy in complete duplication of the ureter
P. Casale, M. Simone, R. Marzano, C. Casarosa, G. Pomara, F. Francesca (Pisa, Italy)
2006-16 Tachosil® is an effective haemostatic aid during laparoscopic partial nephrectomy in a porcine model
D. Murphy, R. Puri, P. Rimington, A. Rane (London, Bradford, Eastbourne, Redhill, United Kingdom)

2006-17 A refined technique of laparoscopic nephroureterectomy
A. Tsivian, S. Benjamin, A.A. Sidi (Holon, Israel)

2006-18 Laparoscopic removal of local recurrence of renal cell carcinoma (RCC)
A. Tsivian, S. Benjamin, A. Kheifets, A.A. Sidi (Holon, Israel)

2006-19 Urachal sparing laparoscopic radical prostatectomy
F. Secin, F. Bianco, N. Karanikolas, K. Touijer, B. Guillonneau (New York, United States of America)

2006-20 Open retropubic nerve sparing radical prostatectomy? How I do it
U.E. Studer, F.C. Burkhard, G.N. Thalmann (Bern, Switzerland)

2006-21 Selective dissection of the apex during radical prostatectomy allows better tumour control and continence
J. Walz, M. Graeven, A. Haese, H. Heinzer, H. Huland (Hamburg, Germany)

2006-22 Nerve sparing radical prostatectomy - the surgeons view through the varioscope M5
R. Götschl, N. Schmeller (Salzburg, Austria)

2006-23 The radical perineal prostatectomy with simultaneous extended pelvic lymphadenectomy via the same incision
J. Beier, H. Keller (Hof, Germany)

2006-24 Laparoscopic radical prostatectomy. Differences between the inter-fascial and intra-fascial technique
L. Martínez-Piñeiro, J.R. Cansino, C. Sanchez, A. Tabernero, J. Cisneros, J.J. De La Peña (Madrid, Spain)

2006-25 Combined obturator – pre pubic cystocele and incontinence repair: Rationale & technique
P. Palma, C. Riccetto, M. Dambros, R. De Fraga, N. Rodrigues Netto Jr. (Campinas, Brazil)

2006-26 A new surgical technique for implantation of a permanent electro stimulation system for treatment of female overactive bladder and interstitial cystitis
I. Nissenkorn, R. De Jong, P. Radziszewski, M. Cervigni, M. Parsons, L. Cardozo, B. Farnsworth, J. Nordling (Tel- Aviv, Israel; Cape Town, South Africa; Warsaw, Poland; Rome, Italy; London, United Kingdom; Sydney, Australia; Herley, Denmark)

2006-27 Bulbo-urethral sling with invance device for the treatment of post-prostatectomy incontinence
I. Morra, R. Tarabuzzi, F. Porpiglia, M. Coisse, M. Billia, J. Renard, R. Scarpa (Turin, Italy)

2006-28 Laparoscopic sacral colpopexy using a double polyester mesh
J.P. Giolitto (Reims, France)

2006-29 Simultaneous implantation of the artificial urinary sphincter and inflatable penile prosthesis
L. Jones (San Antonio, Texas, United States of America)

2006-30 Dorsal graft urethroplasty for urethral stricture in the female
A. Tsivian, S. Benjamin, A.A. Sidi (Holon, Israel)

2006-31 Ureteroscopic laser approach in recurrent ureteropelvic junction stenosis
V. Miriciulescu, P. Geavlete, G. Nita, D. Georgescu (Bucharest, Romania)
2006-32 One day stay for robotic pyeloplasty
D. Murphy, S. Khan, B. Challacombe, J. Olsgurgh, P. Dasgupta (London, United Kingdom)

2006-33 The thulium laser vapoablation of the prostate
R. Götschl, N. Schmeller (Salzburg, Austria)

2006-34 Magnetic resonance image-guided robot for prostate brachytherapy
M. Muntener, H. Bagga, A. Patriciu, D. Mazilu, D. Petrisor, N. Patel, L. Kavoussi, D. Stoianovici
(Baltimore, United States of America)

2006-35 Retrograde flexible ureteroscopic approach in symptomatic caliceal calculi
D.R. Multescu, P. Geavlete, G. Nita, D. Georgescu (Bucharest, Romania)

2006-36 Extending the application of tubeless percutaneous nephrolithotomy (PNL)
M. Sofer, I. Kaver, J. Ben Chaim, A. Friedman, E. Metlitzky, H. Matzkin (Tel Aviv, Israel)

2006-37 Laparoscopic radical prostatectomy: Technical aspects and pitfalls during the apical dissection
(Brest, Nancy, France)

2006-38 Bladder neck dissection during laparoscopic radical prostatectomy: Difficult cases
(Brest, Nancy, France)

2006-39 Dealing with a difficult urethrovesical anastomosis in laparoscopic radical prostatectomy

2006-40 Laparoscopic repair of an inferior vena cava injury during a right partial nephrectomy
F. Secin, Z. Dotan, B. Shayegan, S. Olgac, B. Guillonneau, K. Touijer (New York, United States of America)

2006-41 Technical difficulties in retroperitoneoscopic radical nephrectomy. Is tumour location important?
M. Lucan, V. Lucan, F. Elec, G. Iacob, C. Burghielea, A. Barbos (Cluj – Napoca, Romania)

2006-42 Laparoscopic repair of rectourethral fistulae
R. Sotelo, A.J. Garcia, M. Mariano, G. Trujillo, E. Rodriguez, R. De Andrade, L. Sánchez, C. Andrade, A. Finelli
(Caracas, Venezuela; Porto Alegre, Brazil; Toronto, Canada)
The following videos were presented during the 20th Annual EAU Congress in Istanbul, Turkey, 16-19 March 2005

2005-1 Laparoscopic nerve sparing radical prostatectomy using clips for haemostasis during postero-lateral dissection: an unusual “point of view” of the surgical anatomy
G. Fournier, A. Valeri, V. Joulin, A. Rammal, X. Taccoen, C. Deruelle, F. Sallusto (Brest, France)

2005-2 Technique of nerve-sparing endoscopic extraperitoneal radical prostatectomy (NSEERPE)

2005-3 Extraperitoneal laparoscopic radical intrafascial prostatectomy
F. Porpiglia, C. Terrone, R. Rarabuzzi, F. Ragni, C. Fiori, C. Cracco, M. Cossu, C. Scoffone, R. Scarpa (Orbassano, Italy)

2005-4 Nerve-sparing extraperitoneal laparoscopic radical prostatectomy
V. Poulakis, W. Dillenburg, U. Witzsch, E. Becht (Frankfurt am Main, Germany)

2005-5 Robotic-assisted laparoscopic transperitoneal radical prostatectomy
F. Gaboardi, A. Simonato, A. Lissiani, A. Gregori, S. Galli, A. Bozzola. (Milan, Italy)

2005-6 Robot assisted endoscopic extraperitoneal seminal vesical tip and nerve sparing radical prostatectomy
M. Muentener, D. Schmid, R. Strebef, D. Hauri, H. John (Zürich, Switzerland)

2005-7 Laparoscopic cystectomy for bladder cancer: description step by step
C. Vaessen, M. Mouzin, X. Game, N. Berrogain, B. Malavaud, P. Rischmann (Toulouse, France)

2005-8 Laparoscopic cystoprostatectomy
X. Cathelineau, F. Rozet, S. Lorin, W. Duncan, C. Arroyo, E. Barret (Paris, France)

2005-9 Genital organ preservation during radical cystectomy and orthotopic bladder substitution in selected women
B. Ali-El-Dein, A. Mosbah, Y. Osman, M. Abdel-Latif, I. Eraky, A. Shaaban, M. Ghoneim (Mansoura, Egypt)

2005-10 Laparoscopic radical cystectomy + ileal conduit in women
H. Baumert, F. Khan, R. Morgan, H. Patel, M. Al-Akraa, A. Kaisary (Paris, France; London, United Kingdom)

2005-11 Laparoscopic radical cystectomy with mainz rectal pouch urinary diversion
A. Ioualalen, M. Ziani. (Toulouse, France)

2005-12 Laparoscopic radical cystectomy with orthotopic ileal neobladder
A. Hoznek, D. Vordos, G. Matthew, L. Salomon, A. De la Taille, R. Yiou, C. Abbou. (Créteil, France; Rochester, United States of America)

2005-13 Early ligature of the renal artery during laparoscopic radical nephrectomy
F. Porpiglia, C. Terrone, R. Tarabuzzi, C. Fiori, M. Cossu, C. Cracco, C. Scoffone, R. Scarpa (Orbassano, Italy)

2005-14 Laparoscopic radical nephrectomy could duplicate the open technique
A. Shoma, E. Ibrahim, H. El Kappany (Mansoura, Egypt)

2005-15 Laparoscopic partial nephrectomy for renal tumours after renal artery clamping: the Québec City experience
T. Dujardin, R. Sabbagh, B. Inman (Québec, Canada)

2005-16 Laparoscopic nephron-sparing surgery: techniques of haemostasis
F. Gaboardi, A. Simonato, A. Lissiani, A. Gregori, S. Galli, A. Bozzola (Milan, Italy)

2005-17 Laparoscopic radical nephrectomy with lymph node dissection for advanced renal cell carcinoma (pt3a n2)
H. Baumert, F. Khan, N. Shah, T. Aho, W. Turner (Paris, France; Cambridge, United Kingdom)
2005-18 Donor nephrectomy and renal transplantation in horseshoe kidney
J. Palou Redorta, A. Alcaraz, J. Huguet, C. Baez, H. Villavicencio (Barcelona, Spain)

2005-19 Total glans resurfacing for pre-invasive carcinoma of the penis: a new approach
P. Hadway, R. Singh, C. Corbishley, N. Watkin (London, United Kingdom)

2005-20 Dorsal dartos flap for fistula prevention in Snodgrass hypospadias repair
M. Djordjevic, S. Perovic (Belgrade, Serbia and Montenegro)

2005-21 Lingual mucosa graft in the management of short anterior urethral strictures
A. Simonato, A. Lissiani, A. Gregori, S. Galli, A. Bozzola, F. Gaboardi (Milan, Italy)

2005-22 Phalloplasty penile prosthesis insertion for transexualism
D. Ralph, N. Christopher, S. Minhas, C. Bettocchi (London, United Kingdom)

2005-23 Treatment of Peyronie’s disease with plaque incision and application of bovine pericardium graft
L. Martínez-Piñeiro, S. Alonso, J. Cruz, E. Cuervo, J. De la Peña (Madrid, Spain)

Peyronie’s disease
J.U. Schwarzer, J. Mayerhofer, O. Schukai, B. Mühlen (Freising, Germany)

2005-25 Laparoscopic retroperitoneal lymph node dissection (RPLND) for a large residual mass post chemotherapy
H. Baumert, F. Khan, T. Aho, N. Shah, W. Turner (Paris, France; Cambridge, United Kingdom)

2005-26 Laparoscopic adrenalectomy: an established approach for management of adrenal pheochromocytoma
A. Shoma, I. Eraky, H. El Kappany (Mansoura, Egypt)

2005-27 Endourological treatment of ureteral and bladder pathology after renal transplant

2005-28 Robot assisted dismembered pyeloplasty: a new approach for management of primary ureteropelvic junction
obstruction with secondary renal stones
A. Shoma, A. Hemal, N. El Tabey (Mansoura, Egypt; Detroit, United States of America)

2005-29 Retroperitoneoscopic dismembered double-V pyeloplasty
M. Kilinç (Konya, Turkey)

2005-30 Transmesocolic approach in laparoscopic pyeloplasty
R. Kocvara, J. Dvoráček, J. Sedláček, Z. Díte (Prague, Czech Republic)

2005-31 Extra peritoneoscopic millin transcapsular prostatic adenomectomy

2005-32 Laparoscopic simple prostatectomy without the requirement of post operative irrigation: the technique
H. Baumert, F. Khan, N. Shah, T. Aho, W. Turner (Paris, France; Cambridge, United Kingdom)

2005-33 Laparoscopic transvesical ureteral advancement
P. de Kuyper, W. Oosterlinck (Ghent, Belgium)

2005-34 Laparoscopic Lich Gregoir ureteral implantation
C. Vaessen, M. Mouzin, N. Berrogain, X. Game, P. Rischmann (Toulouse, France)
2005-35 Laparoscopic treatment of urachal diverticulum
A. Tsivian, S. Benjamin, A.A. Sidi (Holon, Israel)

2005-36 Laparoscopic partial cystectomy and en-bloc removal of the urachus for urachal adenocarcinoma
F. Porpiglia, C. Terrone, R. Tarabuzzi, F. Ragni, M. Cossu, C. Cracco, C. Scoffone, R.M. Scarpa (Orbassano, Italy)

2005-37 Technique for vesico-uretral anastomosis in laparoscopic radical prostatectomy: an educational video
G. Fournier, A. Valeri, V. Joulin, A. Rammal, X. Taccoen, C. Deruelle, F. Sallusto (Brest, France)

2005-38 Bladder neck – urethral anastomosis after laparoscopic extraperitoneal radical prostatectomy: technical details after 200 procedures
G. Martina, J. Lovisolo, P. Giumelli, S. Scuzzarella, M. Remotti, C. Giacomo (Sondalo, Tradate, Italy)

2005-39 Laparoscopic radical prostatectomy: preservation of a left accessory pudendal artery
G. Fournier, A. Valeri, V. Joulin, A. Rammal, X. Taccoen, C. Deruelle, F. Sallusto (Brest, France)

2005-40 Bladder neck dissection in laparoscopic radical prostatectomy. Technical details after more than 250 cases

2005-41 Female laparoscopic artificial urinary sphincter in women for type III incontinence: preliminary results
B. Njinou (Yvoir, Belgium)

2005-42 Bulking agents for the treatment male postoperative stress urinary incontinence
J. Seibold, A. Merseburger, K. Sievert, A. Stenzl (Tuebingen, Germany)
The following videos were presented during the 19th Annual EAU Congress in Vienna, Austria, 24-27 March 2004

2004-1 Animal model for laparoscopic radical prostatectomy
L. Martínez Piñeiro, C. Núñez, S. Alonso, J. Pacios, J. De La Peña (Madrid, Spain)

2004-2 Retrograde extraperitoneal laparoscopic prostatectomy (RELP) the Lyon technique—a 204 cases experience. Access to and exposure of the operative field
P. Dubernard, S. Benchetrit, P. Chaffange, B. Cuzin, T. Hamza, C. Rochat, C.L.U.B. (Lyon, France)

2004-3 Creation of the working space for extraperitoneal laparoscopic radical prostatectomy

2004-4 The role of surgical assistants during extraperitoneal laparoscopic radical prostatectomy
J. Audet, L. Ruiz, V. Destefano, S. Steiner, A. De La Taille, L. Salomon, A. Hoznek, C. Abbou (Créteil, France)

2004-5 Complete solo laparoscopic radical prostatectomy

2004-6 Holmium laser enucleation of prostate combined with mechanical morcellation Italian experience
I. Vavassori, R. Hurle, S. Valenti, A. Manzetti, A. Vismara, O. Fenice (Bergamo, Italy)

2004-7 Laparoscopic transperitoneal left partial nephrectomy: the value of isolated arterial cross-clamping
W. Hassen, E. Trabulsi, A. Tousj, J. Saranchuk, S. Savage, B. Guillonneau (New York, United States of America)

2004-8 The use of synthetic glue to enhance hemostatic control during laparoscopic partial nephrectomies
H. Baumert, H. Widmer, F. Dugardin, F. Rozet, X. Cathelineau, G. Vallancien (Paris, France)

2004-9 Laparoscopic excision of renal cell carcinoma under intracorporeal vascular control
X. Krah, O. Lux, U. Hanschmann, N. Benken, G. Eschholz, H. Weber (Blankenhain, Bad Berka, Germany)

2004-10 Hand-assisted laparoscopy with the LAP DISC®
N. Kreutzer, F. Redwig, H. Schulze (Dortmund, Germany)

2004-11 Radical nephrectomy by transperitoneal, extraperitoneal and hand-assisted laparoscopy: comparative description of surgical steps
J. Audet, L. Ruiz, S. Laurent, F. Desgrandchamps, T. Piechaud, R. Gaston, A. Hoznek, C. Abbou (Créteil, Paris, Bordeaux, France)

2004-12 Laparoscopic robotic-assisted (Da Vinci®) live-donor nephrectomy
J. Hubert, B. Feuillu, N. Billaut, L. Frimat, L. Cormier, L. Prevot, D. Hestin, P. Mangin, M. Kesler (Nancy, France)

2004-13 Retrograde extraperitoneal laparoscopic prostatectomy (RELP): the Lyon technique—a 204 cases experience
P. Dubernard, S. Benchetrit, P. Chaffange, B. Cuzin, T. Hamza, P. Van Box Som, C.L.U.B. (Lyon, France)

2004-14 Endoscopic extraperitoneal radical prostatectomy (EERPE)

2004-15 Laparoscopic radical prostatectomy. Preservation of neurovascular bundles with the combined retrograde and descending technique
L. Martínez Piñeiro, C. Núñez, A. Tabernerio, J. Pacios, S. Alonso, J. De la Peña (Madrid, Spain)

2004-16 Laparoscopic cysto-prostatectomy and orthotopic neo-bladder in man
H. Baumert, H. Widmer, F. Dugardin, F. Rozet, X. Cathelineau, G. Vallancien (Paris, France)
2004-17 Laparoscopic radical cystectomy with open construction of an orthotopic ileal neobladder
F. Porpiglia, R. Tarabuzzi, M. Cossu, C. Scoffone, C. Terrone, S. Guercio, R. Scarpa (Orbassano, Italy)

2004-19 Robotic assisted laparoscopic dismembered pyeloplasty
J. Hubert, A. Hoznek, B. Feuillu, A. Lobontiu, C. Abbou (Nancy, Créteil, France)

2004-20 Laparoscopic pyeloplasty for uretero-pelvic stenosis treatment failures
H. Baumert, H. Widmer, F. Dugardin, F. Combes, F. Rozet, X. Cathelineau, G. Vallancien (Paris, France)

2004-21 Laparoscopic pyeloplasty for an ureteropelvic junction syndrome on a horseshoe kidney
F. Rozet, H. Widmer, F. Dugardin, F. Combes, X. Cathelineau, H. Baumert, G. Vallancien (Paris, France)

2004-22 Robotic-assisted (Da Vinci®) laparoscopic conduit urinary diversion in neurogenic bladder
J. Hubert, J. Beis, B. Feuillu, A. Coissard, P. Mangin, J. Andre (Nancy, France)

2004-23 Retroperitoneal venous hemangioma: laparoscopic approach

2004-24 Sequential trans-urethral resection of prostate and laparoscopic bladder diverticulectomy under US guidance
F. Porpiglia, M. Cossu, R. Tarabuzzi, C. Terrone, C. Cracco, R. Scarpa (Orbassano, Italy)

2004-25 Transobturator tape – perineal hammock
V. Delmas (Paris, France)

2004-26 Trans-obturator sling procedure for urinary stress incontinence
L. Ruiz, A. Cicco, R. Yiou, D. Vordos, A. De la Taille, L. Salomon, A. Hoznek, D. Chopin, C. Abbou (Créteil, France)

J. De Leval, P. Bonnet, O. Reul, D. Waltregny (Liege, Belgium)

2004-28 Bulbourethral composite suspension for post-prostatectomy urinary incontinence: step by step
H. John (Zurich, Switzerland)

2004-29 Laparoscopic artificial urinary sphincter insertion
M. Abi Moussa, A. Manunta, Y. Barbè, J. Patard, B. Lobel, F. Guillé (Rennes, France)

2004-30 Laparoscopic urethrolysis, treatment of genital prolapse and artificial urinary sphincter insertion
A. Manunta, Y. Barbé, S. Vincendeau, M. Abi Moussa, J. Patard, B. Lobel, F. Guillé (Rennes, France)

2004-31 Renal autotransplantation: an alternative after metallic ureteral stent incrustation
J. Burgos Revilla, P. Perez, F. Arias, R. Rodriguez Patron, I. Gomez, E. Fernandez (Madrid, Spain)

2004-32 Organ-sparing therapy with ureteroscopic and percutaneous approach in upper urinary tract tumours (UUTT)
A. De Lisa, P. Usai, R. Scarpa, E. Usai (Cagliari, Italy)

2004-33 Dorsal free graft urethroplasty by ventral approach
F. Gomez-Sancha, L.M. Herranz Fernández, M. Jiménez Gálvez, R. Arellano Gañán, I. Pereira Sanz (Madrid, Spain)
2004-34 Complex epispadias repair: new advances
   S. Perovic (Belgrade, Serbia and Montenegro)

2004-35 Distal urethra transposition in female patients with chronic uti associated with sexual intercourse
   V. Diakov, D. Pushkar (Moscow, Russia)

2004-36 Sex reassignment surgery for male-to-female transsexuals: an urological job
   G. Liguori, C. Trombetta, L. Salamè, S. Bucci, G. Garaffa, E. Belgrano (Trieste, Italy)

2004-37 Difficulties, mishaps and errors encountered during the first laparoscopic radical prostatectomies
   A. Messas, D. Bohin, S. Beley, J. Ghossein, B. Lhoest, V. Boublil, S. Dominique, O. Dumonceau, V. Delmas, V. Ravery, L. Boccon Gibod (Paris, Argenteuil, France)

2004-38 Laparoscopic correction of surgical complications that can occur during laparoscopic radical prostatectomy
   H. Baumert, H. Widmer, F. Dugardin, F. Rozet, X. Cathelineau, G. Vallancien (Paris, France)
2003-1 Laparoscopic training in urology
R. Katz, A. Hoznek, P. Antiphon, L. Salomon (Créteil, France)

2003-2 Using fresh cadavers to teach laparoscopic radical prostatectomy

2003-3 Laparoscopic anatomical radical prostatectomy – experience after 350 cases
J. Rassweiler, O. Seemann, M. Hatzinger, L. Sentker, T. Frede (Heilbronn, Germany)

2003-4 Step by step teaching of the assistant’s technique in laparoscopic prostatectomy
H. Baumert, H. Widmer, R. Gupta, V. Cardot, R. Adorno, B. Guillonneau, G. Vallancien (Paris, France)

2003-5 Prostate brachytherapy: a real-time, ultrasound-guided, original technique
L. Nava, A. Losa, A. Cestari, M. Riva, P. Mangili, N. Di Muzio, G. Guazzoni, L. Rigatti (Milan, Italy)

2003-6 Urethral reconstruction with buccal mucosa graft
H. Keller, F. Lamadé (Hof, Offenburg, Germany)

2003-7 Extraperitoneal laparoscopic radical prostatectomy
C. Abbou, A. Hoznek, P. Antiphon, L. Salomon, A. De la Taille, R. Katz, T. Borkowski, D. Chopin (Créteil, France)

2003-8 Laparoscopic extraperitoneal radical prostatectomy: the Montsouris technique 2
X. Cathelineau, H. Bermudez, S. Gholami, H. Baumert, S. Elard, F. Bruyere, G. Vallancien (Paris, France)

2003-9 Modifications of laparoscopic radical prostatectomy: extraperitoneal approach and identification of dissection plane at the bladder neck using simultaneous bi-planar transrectal ultrasonography
M. Komuro, T. Tsuchida, I. Araki, Y. Takihana, K. Matsushita, M. Takeda (Yamanishi, Japan)

2003-10 Laparoscopic salvage prostatectomy compared with normal laparoscopic prostatectomy

2003-11 Extraperitoneal laparoscopic robot assisted radical prostatectomy
P. Antiphon, A. Hoznek, M. Gettman, A. De la Taille, L. Salomon, R. Katz, T. Borkowski, C. Abbou (Créteil, France)

2003-12 Radical perineal prostatectomy
H. Villavicencio (Barcelona, Spain)

2003-13 The nerve-sparing radical perineal prostatectomy
H. Keller, M. Linder, F. Lamadé (Hof, Offenburg, Germany)

2003-14 Continent vesicostomy after female urethrectomy


2003-16 Safyre: a versatile self-anchoring readjustable sling
2003-17 Intravaginal slingplasty (IVS): building safety in the management of female stress urinary incontinence

2003-18 Laparoscopic repair of recurrent prolapse
H. Baumert, H. Widmer, R. Gupta, R. Adorno, V. Joulin, B. Guillonneau, G. Vallancien (Paris, France)

2003-19 Robot assisted laparoscopic prolapse repair
H. Baumert, H. Widmer, S. Gholami, R. Gupta, R. Adorno, F. Rozet, B. Guillonneau, G. Vallancien (Paris, France)

2003-20 Redo end to end urethroplasty in traumatic disruption of the membranous urethra
L. Martínez-Piñeiro, J. Madrid, A. García (Madrid, Léon, Spain)

2003-21 Penile duplication with long distance: joining with successful outcome
S. Perovic, M. Djordjevic, R. Brdar, S. Ducic (Belgrade, Serbia and Montenegro)

2003-22 Primary malignant melanoma of the urethra: reconstructive solution in a rare case
G. Carmignani, P. Traverso, A. Naselli, F. Bertolotto, A. Romagnoli, C. Corbu (Genoa, Italy)

2003-23 One stage primary reconstruction of bladder extrophy with modified penile disassembly
A. Hafez, M. Elsherbiny, M. Bazeed, M. Ghoneim (Mansoura, Egypt)

2003-24 Carcinoma of the penis: video-algorithm for inguinal lymphadenectomy
A. Simonato, A. Lissiani, A. Gregori, A. Bozzola, S. Galli, F. Gaboardi (Milan, Italy)

2003-25 Management of radiation recto-prostatic fistula with skin or buccal graft patch onlay and gracilis muscle interposition
A. Sorcini, J. Latini, L. Zinman (Burlington, United States of America)

2003-26 Laparoscopic retroperitoneal lymphadenectomy in stage I NSGCT
G. Schön (Würzburg, Germany)

2003-27 Bilateral laparoscopic retroperitoneal lymph node dissection (RPLND) in a patient with metachronous bilateral NSGCT
C. Trombetta, G. Liguori, S. Bucci, F. Scieri, E. Belgrano (Trieste, Italy)

2003-28 Laparoscopic retroperitoneal lymph node dissection for residual masses
H. Baumert, H. Widmer, S. Gholami, R. Adorno, R. Gupta, B. Guillonneau, G. Vallancien (Paris, France)

2003-29 Technique of laparoscopic adrenalectomy in large adrenal tumours
G. Schön (Würzburg, Germany)

2003-30 Limitation of retroperitoneoscopic surgery for adrenal and retroperitoneal tumours
T. Yagisawa, F. Ito, N. Ishikawa, Y. Hashimoto, N. Goya, H. Toma (Tokyo, Japan)

2003-31 Substitution of inferior vena cava with reimplantation of hepatic and renal veins
A. Sorcini, D. Lewis, R. Jenkins (Burlington, United States of America)

2003-32 Laparoscopic nephro-ureterectomy with endoscopic laser excision of the distal ureter
G. Schön (Würzburg, Germany)

2003-33 Robot assisted kidney transplantation
A. Hoznek, M. Gettman, P. Antiphon, A. De la Taille, L. Salomon, F. Saint, A. Lobontiu, C. Abbou (Créteil, France)
2003-34 Retroperitoneal laparoscopic pyeloplasty
R. Katz, A. Hoznek, P. Antiphon, T. Borkowski, A. De la Taille, L. Salomon, C. Abbou (Créteil, France)

2003-35 Retroperitoneal endoscopic nephrectomy: new technique for access and management of vessels
G. Schön (Würzburg, Germany)

2003-36 Hand-assisted retroperitoneoscopic radical nephrectomy
P. Dekuyper, W. Oosterlinck (Gent, Belgium)

2003-37 Is there still a role for open conservative surgery?
F. Francesca, R. Felipetto, A. Barsali, M. Cosci, P. Casale (Pisa, Italy)

2003-38 Video-assisted nerve and prostate-sparing cystectomy
X. Cathelineau, A. Renda, H. Bermudez, D. Cahill, H. Widmer, G. Loison, B. Guillonneau, H. Baumert, G. Vallancien (Paris, France)

2003-39 Laparoscopic prostate, nerve and seminal sparing cystectomy and orthotopic ileal neobladder: technical aspects
A. Cestari, G. Guazzoni, R. Colombo, M. Riva, L. Nava, A. Losa, P. Bellinzoni, P. Rigatti (Milan, Italy)

2003-40 Laparoscopic radical cystectomy with external ileal neobladder: our technique step by step
P. Paulhac, M. Hubert, G. Philippe, C. Pierre (Limoges, France)

2003-41 Minimally invasive laparoscopic neobladder (MILAN)
F. Gaboardi, A. Simonato, A. Lissiani, A. Gregori, S. Galli, A. Bozzola (Milan, Italy)

2003-42 Bipolar transurethral prostate resection (TURP): a new approach with co-blation technology
A. Patel, J. Adshead, M. Swinn (London, United Kingdom)

2003-43 Laparoscopic retropubic adenomectomy
H. Baumert, S. Gholami, H. Bermudez, H. Widmer, X. Cathelineau, G. Vallancien (Paris, France; San Francisco, United States of America)
The following videos were presented during the 17th Annual EAU Congress in Birmingham, United Kingdom, 23-26 February 2002

2002-1 Laparoscopic nerve-sparing retroperitoneal lymph node dissection: the surgical technique
R. Peschel, M. Gettman, A. Hobisch, R. Neururer, G. Bartsch (Innsbruck, Austria)

2002-2 Laparoscopic left partial nephrectomy for cancer
C. Gerard, H. Bermudez, D. Rey, G. Vallancien, B. Guillonneau (Paris, France)

2002-3 The vascular steps of right lumboscopic nephrectomy for cancer
P. Paulhac, F. Dargent, J. Dumas, P. Colomba (Limoges, France)

2002-5 Retroperitoneal laparoscopic renal surgery in children without clips
S. Micali, P. Caione, L. Storti, N. Capozza, M. Scarfini, F. Micali (Rome, Italy)

2002-6 Lymphatic-sparing laparoscopic varicocelectomy: a microsurgical repair
R. Kocvara, J. Dvoracek, J. Kriz, Z. Dite, K. Novak (Prague, Czech Republic)

2002-7 Nerve sparing laparoscopic radical retropubic prostatectomy
C. Abbou, A. Hoznek, L. Salomon, R. Quintela, F. Saint, E. Olsson, D. Chopin (Créteil, France)

2002-8 Radical prostatectomy by simplified extra peritoneal laparoscopic technique
P. Dubernard, P. Van Box Som, T. Hamza, S. Benchetrit (Lyon, France)

2002-9 Telerobotic laparoscopic radical prostatectomy
C. Abbou, A. Hoznek, E. Olsson, D. Samadi, A. Nadu, R. Quintela, L. Salomon (Créteil, France)

2002-10 Laparoscopic radical prostatectomy: nerve sparing technique
J. Davis, M. Fabrizio, S. Deger, S. Loening, I. Türk (Norfolk, United States of America; Berlin, Germany)

2002-11 Cavernous nerve sparing during radical prostatectomy
L. Martinez-Piñeiro, M. Garcia-Matres, J. Garcia Mediero, J. Cruz, J. De la Peña (Madrid, Spain)

2002-12 Prostate brachytherapy technique
F. Aguilo, J. Suarez, N. Serrallach, S. Arbeláez (Barcelona, Spain)

2002-13 Resection of RCC with extended vena caval involvement performed with cardiopulmonary by pass, hypothermia and cardiac arrest with heartport device
P. Grazioti, M. Maffezzini, G. Giusti, M. Seveso, G. Taverna, D. Lavelli, R. Gallotti, A. Bandera, A. Benetti (Milan, Italy)

2002-15 Is disseminated angiomyolipomatosis a contra-indication to renal transplantation?
M. Lucan, P. Rotariu, G. Iacob, L. Ghervan, M. Neculoiu, V. Lucan, D. Sarb, C. Burghgelea (Cluj-Napoca, Romania)

2002-16 Surgical management of RCC with intrapericardiac IVC extension: diaphragmatic approach to the intrapericardiac IVC
M. Davydov, V. Matveev, B. Matveev, K. Figurin (Moscow, Russia)

2002-17 Surgical management in the growing teratoma syndrome
R. Miano, T. Christmas, C. Vicentini, A. Tubaro, F. Forte, L. Miano (Rome, L’Aquila, Italy)

2002-18 Tumorectomy for carcinoma in a single kidney. Classic hemostasis procedures
L. Martin, A. Diego, A. Diest, A. Santiberi, J. Sanz, J. Godoy, R. Bermudez (Segovia, Spain)

2002-19 Incisionless suprapubic pubovaginal sling using the porcine small intestine submucosa (SIS): technical refinements
P. Palma, C. Riccetto, V. Herrmann, M. Dambros, M. Thiel, N. Netto Jr. (Campinas, Brazil)
2002-20 Urethral restoration with simultaneous fascial sling procedure in patients with urethral loss
O. Loran, D. Pushkar (Moscow, Russia)

P. Palma, C. Riccetto, V. Herrmann, M. Dambros, M. Thiel, L. Paz, N. Netto Jr. (Campinas, Americana, Brazil)

2002-23 Radical cystectomy and orthotopic neobladder in women: rationale and nerve-sparing technique
G. Martorana, S. Concetti, E. Vece, A. Bertaccini (Bologna, Italy)

2002-24 Laparoscopic supratrigonal cystectomy with substitute bladder ileoplasty
H. Bermudez, C. Gerard, D. Rey, J. Adorno Rosa, G. Vallancien, B. Guillonneau (Paris, France)

2002-25 Waterjet technology in penile disassembly for M. Peyronie - the ideal tool for worst cases of Induratio Penis Plastica (IPP)
F. Basting, N. Perovic (Altötting, Germany)

2002-26 Clitoroplasty in intersex repair using disassembly technique
S. Perovic, M. Djordjevic, V. Vukadinovic (Belgrade, Yugoslavia)

2002-28 Penile revascularization with epigastric artery by-pass
L. Martínez-Piñeiro, A. Aguilera, J. Cruz, J. De la Peña (Madrid, Spain)

2002-29 Complex repair in failed male transsexual surgery
S. Perovic, M. Djordjevic, A. Kollias (Belgrade, Yugoslavia; Westerstede, Germany)

2002-30 Total penectomy with perineal urethrostomy for carcinoma of the penis
A. Simonato, A. Lissiani, S. Galli, A. Bozzola, A. Gregori, F. Gaboardi (Milan, Italy)

2002-31 The Tyrolean iceman: urethroscopy in a 5200-year old man
A. Pycha, L. Lusuardi, M. Marberger, E. Egarter Vigl (Bolzano, Italy)

2002-32 News in urosursonography
M. Zacharias, K. Jenderka, H. Heynemann (Halle/Saal, Germany)

2002-33 Robotic remote laparoscopy (Da Vinci™): results in experimental surgery
J. Hubert, B. Feuillu, M. Artis, P. Mangin (Vandoeuvre Les Nancy, France)

2002-34 Percutaneous access to the kidney using PAKY: our experience in telesurgery
S. Miceli, D. Stoianovici, A. De Carolis, N. Grassi, A. Patriciu, G. Vespasiani, L. Kavoussi (Rome, Italy; Baltimore, United States of America)

2002-35 The risk of bladder denervation during antireflux surgery: a reliable neurophysiological model

2002-36 Adjuvant “Miniperc” in percutaneous nephrolithotomy
A. Frattini, P. Salsi, S. Ferretti, M. Ziveri, P. Cortellini (Parma, Italy)
2001-1 Laparoscopic radical prostatectomy - the Berlin experience
I. Tuerk, S. Deger, B. Winkelmann, S. Loening (Berlin, Germany)

2001-2 Nerve sparing laparoscopic radical prostatectomy
C. Abbou, A. Hoznek, L. Salomon, P. Antiphon, F. Saint, D. Chopin (Créteil, France)

2001-4 Advances in laparoscopic radical prostatectomy: separation of the bladder from the prostate associated with endoscopic access
J. Cosson, C. Leleu, G. Kouri, Y. Bottine (Perigueux, France)

2001-5 Telesurgical laparoscopic radical prostatectomy
J. Rassweiler, T. Frede, O. Seemann, C. Stock, L. Sentker (Heilbronn, Germany)

2001-7 Initial pitfalls in laparoscopic radical prostatectomy
M. Dubs, M. Largo, F. Recker (Aarau, Switzerland)

2001-8 Nerve and seminal-sparing cystectomy with orthotopic urinary diversion for select bladder cancer
R. Colombo, R. Bertini, A. Salonia, L. Da Pozzo, M. Roscigno, P. Rigatti (San Raffaele, Milan, Italy)

2001-9 The Ghoneim antireflux ureteroileal implantation technique on GIA stapler detubularized ileal neobladder
G. Muto, F. Bardari, L. D’Urso, R. Leggero (Turin, Italy)

2001-11 How to minimise urinary incontinence following radical prostatectomy
N. Blick, J. Crew, U. Studer (Berne, Switzerland)

2001-12 The extended radical perineal prostatectomy
G. Jakse (Aachen, Germany)

2001-13 The radical perineal prostatectomy using a self-retaining system
H. Keller, F. Lamadé, R. Horsch (Offenburg, Germany)

2001-14 Percutaneous treatment of a pyelogenic cyst containing stones
A. Tasca, A. Cacciola, E. Scremin (Vicenza, Italy)

2001-15 Laparoscopic renal cryoablation: technical notes
A. Cestari, G. Guazzoni, L. Nava, F. Montorsi, T. Maga, V. Scattoni, A. Addis, P. Rigatti (Milan, Italy)

2001-17 Laparoscopic donor nephrectomy - first experience
I. Tuerk, S. Deger, B. Schoenberger, S. Loening (Berlin, Germany)

2001-18 Retroperitoneal laparoscopic nephrectomy for polycystic kidney disease
A. Hoznek, L. Salomon, F. Saint, A. Cicco, W. Alamé, D. Chopin, C. Abbou (Créteil, France)

2001-19 Cost effective hand assisted laparoscopic radical nephrectomy (Hungarian technique)
G. Kovács, E. Holman, B.S. Dénes, J. Kálmán, A. Karsza, J. Rózsahegyi (Budapest, Hungary)

2001-20 Percutaneous nephrolitholapaxy (PCNL) by a new lithoclast plus ultrasonic handpiece combination - a novel and highly effective technique in the therapy of renal calculi
R. Hofmann, P. Olbert, Z. Varga, S. Wille, A. Heidenreich (Marburg, Germany)

2001-21 Percutaneous nephrolithotomy in the childhood: our experience with 65 children
C. Tóth, A. Nagy, I. Kocsis (Debrecen, Hungary)
2001-22 Ureteroscopic management of lower pole renal calculi
  P. Dahm, B. Auge, N. Wu, G. Preminger (Durham, United States of America)

2001-23 Retroperitoneal lymph node dissection with caval thrombectomy for advanced nonsemonimatous germ cell tumour of the left testicle
  F. Martins, J. Alves, J. Freeman, J. Lencastre, J. Varela (Lisboa, Portugal)

2001-25 Laparoscopic approach to large para-aortic lymphocyst after radical nephrectomy and regional lymphadenectomy
  P. Cortellini, N. Sebastio, G. Incarbone, A. Barbieri, M. Simonazzi, C. Pavlidis, L. Sarli (Parma, Italy)

2001-26 Left sided kidney tumour with caval thrombus into right atrium
  H. Weber, M. Torka, N. Benken, E. Gey, M. Günnewig, X. Krah, G. Eschholz (Blankenheim, Bad Berka, Germany)

2001-27 Retroperitoneoscopic adrenalectomy: lateral approach vs. posterior approach
  T. Yagisawa, F. Ito, H. Amano, N. Goya, H. Toma (Tokyo, Japan)

2001-28 Reconstruction of distal urethra with buccal mucosa onlay patch graft
  M. Fisch, F. Martins, J. Lencastre, J. Varela, J. Alves (Hamburg, Germany; Lisbon, Portugal)

2001-29 Local tumour excision in renal cell carcinoma
  L. Martinez-Piñeiro, A. Aguilera, D. Rendon, E. Rios, J. De la Peña (Madrid, Spain)

2001-30 Tailored laminectomy for neuromodulator implantation

2001-31 Multi-obstruction of the seminal duct
  J. Pomerol, J. Vicente, J. Sarquella, N. Ribé (Barcelona, Spain)

2001-33 Tendinous vaginal support (T.V.S.) using the porcine small intenstine submucosa (SIS): a promising anatomical approach for urinary stress incontinence
  P. Palma, C. Riccetto, V. Herrmann, M. Dambrós, R. Mesquita, N. Netto jr. (Campinas, Brazil)

2001-34 Megameatus intact prepuce: a rare hypospadias presentation
  A. Mendes Leal, T. Aires (Clípóvoa, Portugal)

2001-35 Genital prolapse repair - pubovaginal sling sacrospinous ligament suspension with cadaveric fascia
  M. Kozminski (St. Joseph, United States of America)

2001-36 Complete penile disassembling and tunica albuginea autograft in the treatment of severe penile deformities due to la Peyronie’s disease
  G. Carmignani, C. Corbu, A. De Rose, P. Traverso (Genoa, Italy)

2001-37 Correction of the curvature in Peyronie’s disease by transplantation of saphenous vein patches
  F. Boeminghaus, M. Schermesser, J. Witt, M. König (Neuss, Germany)

2001-38 TURP: state of the art
  V. Pansadoro (Rome, Italy)
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<td>Malignant dysgerminoma in a true hermaphrodite</td>
<td>V. Bucuras, R. Bardan, J. Corcan, P. Dragan (Timisoara, Romania)</td>
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<td>2000-7</td>
<td>Surgical treatment of morbus Peyronie using penile disassembly technique accomplished by water jet device and laser beam</td>
<td>R. Basting, N. Djakovic, P. Widmann, S. Perovic (Belgrade, Yugoslavia; Altoetting, Germany)</td>
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<td>2000-9</td>
<td>Our experience on tension free vaginal tape for stress urinary incontinence</td>
<td>M. Naudin, D. Pamart, A. Corbusier (Brussels, Mons, Belgium)</td>
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<td>New strategy and minimal access approach for cardiopulmonary bypass (CPB) in renal cell carcinoma (RCC) with suprahepatic caval thrombi</td>
<td>A. Sorcini, J. Libertino (Burlington, United States of America)</td>
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<td>2000-21</td>
<td>Use of the ultrasonic scalpel to facilitate radical prostatectomy</td>
<td>W. Young, J. Pow-Sang, D. Cuthbertson (Tampa, United States of America)</td>
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<td>2000-22</td>
<td>Radical perineal prostatectomy, an interesting surgical approach in some selected patients</td>
<td>A. Mendes Leal, T. Aires (Povoa de Varzim, Portugal)</td>
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<td>2000-23</td>
<td>Video assisted minilaparotomy for RRP</td>
<td>P. Puppo, G. Conzi, C. Introini, G. Vigliercio (Genova, Italy)</td>
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<td>2000-25</td>
<td>Vesicourethral reconstruction during laparoscopic radical prostatectomy</td>
<td>C. Abbou, A. Hoznek, L. Salomon, P. Antiphon, M. Ben Slama, F. Saint, D. Chopin (Créteil, France)</td>
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<td>2000-27</td>
<td>Laparoscopic radical prostatectomy - the Heilbronn technique</td>
<td>J. Rassweiler, O. Seemann, M. El-Quaran, L. Sentker (Heilbronn, Germany)</td>
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<td>2000-28</td>
<td>The anatomical approach to radical cystectomy</td>
<td>M. Gallucci, A. Vincenzoni, M. Mauro, P. Fortunato (Rome, Italy)</td>
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<td>2000-29</td>
<td>Continent urinary diversion with parietal stoma of Indiana type</td>
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<td>2000-31</td>
<td>Systematic processing of radical prostatectomy specimens</td>
<td>H. Schmid, A. Semjonow, A. Terpe, L. Hertle (Münster, Germany)</td>
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<td>Extra-peritoneal radical cystectomy and sigmoid neo-bladder with tenomyotomy</td>
<td>K. Krajka, A. Mikszewicz, M. Markuszewski, M. Matuszewski (Gdansk, Poland)</td>
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2000-34  **Retroperitoneoscopy 2000 - the technique**  
J. Rassweiler, T. Frede, O. Seemann, M. Hatzinger (Heilbronn, Germany)

2000-35  **Single stage retrograde endopyelotomy with the Rite-Cut® electrode**  
A. Patel, J. Webster (London, United Kingdom)

2000-36  **Posterior retroperitoneoscopic adrenalectomy for large adrenal tumour**  
T. Yagisawa, F. Ito, T. Shimizu, H. Amano, H. Toma (Tokyo, Japan)

2000-38  **Laparoscopic bilateral partial adrenalectomy in a boy with familial pheochromocytoma**  
G. Janetschek, R. Peschel, C. Radmayr, G. Bartsch, H. Neumann (Innsbruck, Austria; Freiburg, Germany)

2000-39  **Laparoscopic surgery of bilateral multiple renal cysts with the ultracision scalpel**  
W. Kozak, W. Feil, U. Maier (Vienna, Austria)

2000-40  **Retroperitoneoscopy in child: the Visiport technique**  
S. Micali, P. Bove, R. Miano, G. Maturo, E. Matarazzo, N. Capozza, P. Caione (Rome, Italy)

2000-42  **Ileal T pouch with split-cuff ureteral anastomosis**  
G. Marino, R. Cevoli, G. Del Noce, M. Laudi (Turin, Italy)
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