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A warm welcome to London!

Dear Colleagues,

It gives me great pleasure to welcome you to London, for the 18th International Meeting of the European Association of Urology Nurses (EAUN). With the support and close collaboration of our British urology nursing colleagues, this year’s meeting in Britain’s capital promises to be exciting, incredibly diverse and interactive.

We have a remarkable range of topics that cover many key issues in urological nursing. We are also delighted to have two collaborative EAUN-European School of Urology (ESU) courses that address the ‘learning curve in urological surgery’ and ‘urinary diversion’.

In our thematic sessions we will cover important topics such as testicular cancer, NMI bladder cancer, advanced urodynamics, female urology, prostatitis and many others. This year in our state-of-the-art lectures and themed sessions we deal with varied challenges in nursing practice from counselling patients with acute and chronic kidney failure, drug-resistant micro-organisms to patient education in a challenging environment or poor patient literacy.

Furthermore we will enlighten the delegates on interesting developments such as a Danish nurse-driven survivorship clinic and urodynamic studies with air filled catheters from Belgium (in the video session on Sunday). And in the ‘Westminster House of Commons’ session we will debate the contentious question of whether patients know what treatment is best for them, which no doubt will spark a lot of discussion.

We also invite you to the traditional Urowalk and to catch up with colleagues at the popular Nurses’ Dinner & Dance on Sunday.

And should you have any questions and suggestions, please do not hesitate to talk to us at the EAUN booth in room 2 of the Capital Suite on level 3.

On behalf of myself and the members of the EAUN Scientific Committee, who have put together this programme, I would like to wish you a very enjoyable and informative experience in London!

Stefano Terzoni
EAUN Chair
## EAUN Scientific Committee

<table>
<thead>
<tr>
<th>Name</th>
<th>City</th>
<th>Country</th>
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<tbody>
<tr>
<td>C. Tillier</td>
<td>Amsterdam</td>
<td>NL</td>
</tr>
<tr>
<td>B. Thoft Jensen</td>
<td>Arhus</td>
<td>DK</td>
</tr>
<tr>
<td>J. Marley</td>
<td>Newtownabbey</td>
<td>IE</td>
</tr>
<tr>
<td>L. Van De Bilt-Sonderegger</td>
<td>Eindhoven</td>
<td>NL</td>
</tr>
<tr>
<td>F. Geese</td>
<td>Dublin</td>
<td>IE</td>
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## EAUN Board

<table>
<thead>
<tr>
<th>Name</th>
<th>City</th>
<th>Country</th>
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</thead>
<tbody>
<tr>
<td>S. Terzoni</td>
<td>Milan</td>
<td>IT</td>
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<tr>
<td>S. Vahr</td>
<td>Copenhagen</td>
<td>DK</td>
</tr>
<tr>
<td>L. Drudge-Coates</td>
<td>London</td>
<td>GB</td>
</tr>
<tr>
<td>P. Allchorne</td>
<td>London</td>
<td>GB</td>
</tr>
<tr>
<td>S. Borg</td>
<td>Msida</td>
<td>MT</td>
</tr>
<tr>
<td>L. Söderkvist</td>
<td>Stockholm</td>
<td>SE</td>
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<td>G. Villa</td>
<td>Milan</td>
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<tr>
<td>J. Verkerk</td>
<td>Gouda</td>
<td>NL</td>
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## EAUN Congress Office

<table>
<thead>
<tr>
<th>Name</th>
<th>City</th>
<th>Country</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hanneke Lurvink</td>
<td>Arnhem</td>
<td>NL</td>
</tr>
<tr>
<td><a href="mailto:eaun@uroweb.org">eaun@uroweb.org</a></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Simone Rutten</td>
<td>Msida</td>
<td>MT</td>
</tr>
<tr>
<td><a href="mailto:s.rutten@congressconsultants.com">s.rutten@congressconsultants.com</a></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**EAUN Congress coordinators**

Hanneke Lurvink  
eaun@uroweb.org

Simone Rutten  
s.rutten@congressconsultants.com
General

General Information
Speaker Guidelines
Abstracts
All abstracts and posters are also available online at www.eaun17.org and through the congress App as of Friday 24 March 2017.

Access to Session Rooms
Only congress delegates with a valid badge, have access to session rooms. Seating is regulated on a first-come, first-served basis. We recommend delegates to go to session rooms well in advance. Due to safety regulations, the organisers will close a session room when all seats are taken. It is not allowed to stand in the aisles of session rooms.

Address and Accessibility
Congress Centre
ExCeL London
One Western Gateway
Royal Victoria Dock
London, E16 1XL
United Kingdom
www.excel.london

The main entrance for EAU17 is the East entrance. This entrance of ExCeL London is connected with DLR Station: Prince Regent.

Please see page 12 for more information about travelling in London.

App: Your smart congress companion
With the EAU Events App you have instant access to the most important information of the 18th International EAUN Meeting via your smartphone. With use of the App you will be able to browse the complete scientific programme by day, topic, speaker and create your own personal programme. You will easily find room and exhibitor locations on the floor plans and you will receive daily updates and the latest news. In your personal congress bag you can save all relevant information, which you can email after the congress so you can easily review all scientific content at a later stage. You do not need constant internet access and you can use the App offline. Download the EAU Events App for free in the Play Store (Android) or App Store (iOS).

Badge Classification
The badge classification is as follows:
- Blue badge : EAU member
- White badge : Delegate
- Purple badge : Nurse
- Green badge : Exhibitor
- Red badge : Press
- Yellow badge : Organising staff

Badge Tracking System
Congress delegates have a QR code on their badge which enables them to leave their contact details with exhibitors in a quick and easy way. The QR code will also be scanned at the entrance of session rooms to gather CME and statistical information. EAU bears no responsibility for data scanned by third-parties.

Bank and Exchange
The national currency in the United Kingdom is the Pound (£). There is a Travelex ATM at the Boulevard near the Registration Area (Level 1) for retrieving Pounds. The Business Centre (Level 0) has a Bureau de Change for changing foreign currencies to Pounds. A Currency Exchange Corporation for exchanging over 60 currencies is located 5 minutes walking outside the West Entrance at 21 Western Gateway, London. Alternatively, there are banks available at Canary Wharf.

Business Centre
There is a business centre on level 0, near the stairs next to entrance N4/S4 which sells a range of stationery items and has copy and print facilities as well as computers with internet access.

Certificate of Attendance
Certificates of Attendance for the 18th International EAUN Meeting will be available on www.eaun17.org from Wednesday, 29 March 2017. Login with the numbers (without *) under the barcode on your congress badge and complete the questionnaire to retrieve your personalised Certificate of Attendance.

Cloakroom / Luggage
The cloakrooms are located at the East Entrance (Level 0) and in the Registration Area (Level 1) and open during congress hours. Please be sure to collect all personal belongings at the end of each day. Do not leave any bags unattended.
CME Accreditation
The EAUN applied for accreditation of the 17th International EAUN Meeting for nurse specialists and nursing and care professionals in the Netherlands.

Congress Bag
Delegates can collect a congress bag in the Registration Area (Level 1).

EAU Booth & EAUN Booth
Visit the EAUN Booth (Room 2 of the Capital Suite on level 3) for information on all EAUN activities, and to pick up the EAUN programme book. Also for coffee and information from other nursing organisations this is the place to go.

For information on membership status and membership application, you are welcome to visit the EAU Booth in the Exhibition (booth G50).

EAU Education Office - European School of Urology (ESU)
The European School of Urology (ESU), working with European faculties, aims to provide high quality international educational courses in urology.
For more information on ESU Courses, please visit the ESU booth (Room 2 of the Capital Suite on level 3).

EAU Patient Information
EAU Patient Information is the trusted portal for patients and urologists, offering evidence-based information on diagnostics, treatments and patient support. Delegates are welcome to visit the EAU Patient Information Corner for a presentation of animated videos on surgical procedures developed for patients. The EAU Patient Information Corner is located next to the EAU Booth (Booth G50 in the Exhibition Hall on Level 1).

EAU Policy on Live Surgery
The EAU established an official policy on Live Surgery Events, offering organising centres a clear framework within which to plan and perform live surgeries. It outlines a set of guidelines in which the overriding principle is that patient safety must take priority over all other considerations in the conduct of live surgery. Read more on www.uroweb.org.

Emergency Phone Numbers
In case of an emergency please contact a security guard immediately or call the following phone number:
Medical, Fire, Security, Unattended packages: 4444
Telephones have been installed at key locations throughout the centre i.e. Hall Entrances, Exits and Stairwells. From an external line please call +44 (0)20 7069 4444.

Best Posters
The best scientific posters presented at the 32nd Annual EAU Congress and the 18th EAUN Meeting can be viewed at the e-Poster Area (accessible during congress hours in the North Hall on Level 1) and through the congress website as of 24 March 2017.

The awards for the 3 Best EAUN Posters will be handed out in the EAUN Award Session, Room 4, Capital suite (level 3), Monday, 27 March, 14.00.

European Urology & European Urology Focus
European Urology, ‘The Platinum Journal’, published continuously since 1975, is an international peer
reviewed journal devoted to urology and related sciences and is published monthly. European Urology is the official journal of the European Association of Urology (EAU), a scientific society with more than 15,000 members from 130+ countries worldwide. European Urology is available both in print and online and reaches over 20,000 readers. The Editor-in-Chief of European Urology is Professor James Catto. European Urology’s 2015 impact factor is 14.976. Come see European Urology for yourself - visit either the European Urology (booth B02) or the EAU Booth (booth G50) in the Exhibition Hall on Level 1. European Urology Focus (EU Focus) is a sister journal to European Urology and the second official publication of the European Association of Urology (EAU).

Exhibition
The EAU Exhibition is one of the premier events worldwide for showcasing new and established products as well as cutting-edge medical technology. In the exhibition you can also find a Catering Point (A53), the EAU Booth with EAUN counter (G50), the EAU Video Library (J50), the European Urology booth (B02), the Charge & Connect Area (C50), the Innovation in Education Square and the ESU Hands-on Training Rooms.

Exhibition Hours:
Saturday 25 March 09.15 - 18.15 hrs.
Sunday 26 March 09.15 - 18.15 hrs.
Monday 27 March 09.15 - 18.15 hrs.

Exhibition Guide
The Exhibition Guide with an exhibition floor plan and an overview of all exhibitors with their company outline is included in the Programme-at-a-Glance. The Programme-at-a-Glance is inserted in the Congress Bag.

First Aid
There is a medical unit present for first aid at the ExCeL Boulevard on Level 1, indicated on the directional signs with the first aid symbol ( ). In the event of a medical emergency dial internal telephone number 4444. From an external line please call +44 (0)20 7069 4444.

Food & Beverage
Coffee Corners
At the following coffee corners you may enjoy coffee, tea, snacks and/or pastries:
• Costa Coffee – ExCeL Boulevard, Level 1 (located between entrances S14/15 & N14/15);
• E16 – ExCeL Boulevard, Level 1 (next to Registration Area)
• Coffee Corner in the Exhibition Hall – Booth A53
• Mobile Coffee Point, Level 3, in front of the entrance to Capital Suite

Restaurants
There are many restaurants located at the ExCeL Boulevard (Level 1) where you may enjoy a coffee, snacks and/or lunch. Examples of the available restaurants are: Subway, Bagel factory, Prime Burger, Chozen Noodle, Viva Burrito & many more.

If you are looking for an ideal communication point to have lunch, the Bridge Restaurant (located on the ExCeL Boulevard between entrances S13 & N13) will suit you best. You also have the possibility to purchase small snacks and drinks in the Whistle Stop supermarket (located in front of entrance S5 on the ExCeL Boulevard).

Guidelines
Extended and Pocket
EAU members can collect a copy of the EAU Guidelines 2017, free of charge at the EAU booth in the Exhibition Hall. These publications are also available for purchase by EAUN and other non-EAU members at the EAU Booth (booth G50).

EAUN Guidelines
EAUN delegates can collect the new summary guidelines at the Wellspect HealthCare Booth (booth B52 in the Exhibition Hall on Level 1).

Hotel Accommodation
The company K.I.T. Group has been contracted to handle the hotel accommodation for congress participants. Their staff will be available at the Hotel Desk in the Registration Area (Level 1).

Industry Partners
We would like to thank our industry partners. Please refer to page 53 for the industry acknowledgements.

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

Language
All presentations during EAUN17 will be conducted in English, the official language of the EAUN.
Learning Objectives EAUN Meeting
The EAUN Meeting provides a forum for presenting original unpublished data and sharing ideas for urological innovation as well as disseminating evidence-based knowledge of primary clinical relevance.
Delegates attending the EAUN International Meeting will be able to:
- Review emerging evidence, innovative techniques and scientific advances relevant to the field of urological nursing;
- Review the latest data and emerging trends from studies in clinical and translational research relevant to nursing and urological care generally;
- Discuss the evolving role of the EAUN in promoting higher standards of urological nursing care, urological nursing research and practice development;
- Enhance their knowledge of evidence-based approaches to the management of urological disease;
- Gain new knowledge on emerging diagnostic and risk-assessment strategies in the management of urological disease;
- Enhance their practical knowledge and skills through educational activities, workshops and courses;
- Gain exposure to new developments in evidence-informed, multi-professional urological care including medical technology, drug therapy, medical devices and new cutting edge technology through visiting the EAU Congress Exhibition.

Lost and Found
Found items should be returned to the EAU Info Desk at Level 1 at the East Entrance. If you lose or find something, please report to this desk for assistance.

Membership EAUN
Become a member of the EAUN or settle your membership fees at the EAU Booth (G50) in the Exhibition Hall.
Urologists can visit the special EAUN counter in the EAU Booth (G50) to learn more about EAUN membership and register their nursing colleagues as members.

Mobile Phones
The sound and camera flash of mobile phones must be switched off during sessions.

Opening Ceremony and Awards
Participants and exhibitors attending the congress are invited to the official Opening Ceremony on Friday, 24 March at 18.00-19.30 in the eURO Auditorium (Level 0). During the Opening Ceremony the new Honorary EAU Members will be announced and the following EAU Awards will be delivered: Willy Gregoir Medal, Frans Debruyne Life Time Achievement Award, Crystal Matula Award, Hans Marberger Award, Innovators in Urology Award and the Prostate Cancer Research Award 2017.
The Opening Ceremony will be followed by a Networking Reception in the ExCeL Boulevard (Level 1) until 21.00 hrs.

Personal Planner
Do not miss anything during this year’s congress, use the EAU Personal Planner!
- It is fully integrated with the scientific programme of the congress
- You can select your priority sessions and export them to your Outlook, Google Calendar or print them out.
Visit the congress website for more information: www.eau17.uroweb.org/scientific-programme/overview/.

Kindly note that the planner on the website and the planner in the App do not exchange information. You can use either one for your planning.

PosterSessionOnline Service
Poster presenters who created their posters through the “EAU PosterSessionOnline Service”, can collect their posters at the Speaker Service Centre (Registration Area, Level 1).

Poster DVD EAU17
A DVD with a collection of scientific posters from the EAU17 Congress has been inserted in all congress bags. All abstracts and posters will also be available online at www.eau17.org and www.eaun17.org and through the congress App as of 24 March 2017.

Prayer Room
Special rooms dedicated to prayer are located between Entrances S8-S9 on the ExCeL Boulevard (Level 1).

Presentation Training Centre
Mr. Paul Casella (Iowa, USA) gives Individual Presentation Skills Training Sessions to help improve presentation and delivery skills. The one-on-one half hour sessions are free of charge and available to all speakers. Please go to the Speaker Service Centre to make an appointment for this popular training session.
General Information

Press Centre
Journalists and medical/science writers can obtain free registration to the congress. Journalists receive a press pack, to be collected at the EAU Press Centre located at the London Suite (Level 0). All press are invited to report to the EAU Press Centre to obtain the assistance and information they require. Internet access, printer and photocopier are provided.

Resource Centre EAUN17
All of the congress’ scientific content, including abstracts, posters, videos and PPT presentations will be available online in the Resource Centre (www.eaun17.org). Content is constantly updated over the course of the congress and afterwards. Watch scientific sessions you may have missed, or re-read the data of the latest research. You have access to the Resource Centre with your congress registration login (MyEAU), your EAUN member login (MyEAU) or with the number under the barcode on your congress badge (type the number without the *).

Restaurant Reservations
The London cuisine is characterised by its international allure. For restaurant suggestions, kindly visit the London Information Desk in the Registration Area (Level 1). They also offer advice and discounts on a fine selection of restaurants.

Security and Safety
The safety of all congress attendees is of utmost importance to the EAU. ExCeL London and the EAU have taken security precautions to ensure the maximum possible safety for all EAUN17 participants. All bags may be subject to inspection. Do not leave any bags unattended at any time.

Smoking Policy
The EAU(N) Congress and the concomitant exhibition have been designated as non-smoking events throughout the entire venue (the use of e-cigarettes is also not allowed).

Social Media
We are using social media at the congress to encourage an open discussion on urological science and experiences at the congress. Congress faculty, opinion leaders, delegates and media share their ideas, commentary and photos on Facebook and Twitter. You can follow the EAUN on Facebook via www.facebook.com/eaunpage and on Twitter via @EAUNurses. Use #EAUN17 to discuss the Congress, and join the conversation!

Social Media Helpdesk
For basic inquiries, please visit the walk-in Social Media Helpdesk at the Boulevard (Level 1) in front of the Registration Area. The EAU Community Manager will answer basic questions, assist in creating social media accounts, and help post on various platforms from 11.00 to 13.00 hrs on 25 to 27 March. No registration necessary. This service is for free.

Speaker Service Centre
The Speaker Service Centre is located in the Registration Area (Level 1). For extensive speaker information see page 14.

Taxi
See page 13 for information on taxi’s in London.

Transportation pass
Congress delegates may collect a complimentary Oyster Card valid on the Tube network, DLR trains and buses. The Oyster card is already charged with £10.00. A return trip within zone 1-3 is approximately £7.60. It is required to touch in and out every time the card is used. The Oyster Cards can be collected at the Transportation Passes Desk in the Registration Area (Level 1).

Travelling by Public Transportation
The Underground and the Docklands Light Railway (DLR) for travelling between London City Centre and ExCeL
The quickest way to get around is on the underground system known as The Underground. With 11 colour-coded lines and 270 stations, it reaches every corner of the city. The DLR is the quickest way to reach EAUN17 congress venue ExCeL and locations in East London. The DLR station at the East Entrance of ExCeL is called “Prince Regent”. An Underground-map is included in your congress bag. The Underground trains generally run between 5am and midnight, Monday to Saturday, with reduced operating hours on Sunday. Timetables depend on the station and the line, so it’s worth checking the Transport for London website at tfl.gov.uk.

The Express Trains for travelling between London City Centre, the Airports, Paris and Brussels
Express trains link Heathrow and Gatwick airports
to London city centre in less than 30 minutes, with four trains running every hour. Eurostar operates 22 trains a day from Paris, bringing visitors into central London in just over two hours, while 11 trains a day link the city to Brussels in less than two hours.

**The Thames Clippers for travelling between London City Centre and ExCeL**

Thames Clipper catamarans leave every 20 minutes from piers on the doorstep of the London Eye, Tower Bridge, Greenwich and the O2 arena. The RB1 stop is located at O2 across the river from ExCeL, which is easily accessible by taking the Emirates Air Line Cable car. The Cable Car terminal is located close to the West Entrance of ExCel.

**Travelling by Taxi**

More than 20,000 licensed black cabs can be hailed on the street, for metered fares, or pre-booked at fixed rates. There are taxi stands at all airports, in the city centre and at the East Entrance of ExCeL. It is best advised to go to the taxi ranks outside the ExCeL entrance to get a taxi, alternatively the staff at ExCeL Info Desk (East Entrance, Level 1) can book a taxi if required.

Taking an Uber is an alternative as well. You can order a ride via the Uber App, downloadable via Play Store (Android) and App Store (iOS).

**Upcoming Meetings**

Posters and other information on upcoming meetings can be displayed in the “Upcoming Meetings” promotion area (Booth L20, Exhibition Hall, Level 1). It is strictly forbidden to put up promotional material at any other location in the building.

**Video Library**

The EAU Video Library is located in the Exhibition Hall on Level 1 (booth J50). A wide choice of EAU videos, including all videos presented in London and at previous EAU Congresses, can be viewed on individual monitors. All videos can be copied to a DVD which can be collected during exhibition hours, a service that is provided free of charge to all congress delegates. On Tuesday, 28 March DVD’s can be collected in the Registration Area (Level 1) at the “Support Desk”.

**Wi-Fi / Charge & Connect Area**

Free wireless internet is available in all areas and session rooms except for the exhibition area. Please connect to the “EAU17” network, after which you will be prompted to fill in the password ‘london17’ and accept the terms and conditions. A special “Charge & Connect Area” with sitting areas, work stations and power outlets is available at booth C50 in the Exhibition Hall.

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**Apply for your EAUN membership online!**

Would you like to receive all the benefits of EAUN membership, but have no time for tedious paperwork?

**Becoming a member is now fast and easy!**

Go to [www.eaun.uroweb.org](http://www.eaun.uroweb.org) and click EAUN membership to apply online. It will only take you a couple of minutes to submit your application, the rest - is for you to enjoy!
General

Speaker Guidelines

**Speaker Service Centre**

Only digital presentations will be accepted during the congress. All presentations should be handed in at least three hours prior to the start of the session at the Speaker Service Centre (Registration area, level 1). If you have an early presentation, please hand in your presentation on the previous day! Failure to do so could result in presentations not being available for projection when required.

**Opening hours**

- Thursday, 23 March: 14.00 - 19.00 hrs.
- Friday, 24 March: 08.00 - 19.00 hrs.
- Saturday, 25 March: 07.00 - 19.30 hrs.
- Sunday, 26 March: 07.00 - 19.30 hrs.
- Monday, 27 March: 07.00 - 19.30 hrs.
- Tuesday, 28 March: 07.00 - 13.00 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. Kindly note that:

- Speakers should strictly observe timing.
- Discussants should first clearly state their name, institution and country of origin.

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**If you are presenting a poster**

Posters must be put up on the boards in the Foyer, in front of room 4, 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. A maximum of 6 pre-defined PowerPoint slides (including a title and conflict of interest slide) are allowed during poster presentations. For Presentation Training see page 11.

**Disclose links to the industry**

The EAU Scientific Congress Office requests 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.

**Prize-winning posters**

If a poster PDF has been submitted to the EAUN before the start of the annual meeting the winning posters will be made available in the digital best poster area from Sunday evening.
Scientific Programme
<table>
<thead>
<tr>
<th>Time</th>
<th>Saturday, 25 March</th>
<th>Sunday, 26 March</th>
<th>Monday, 27 March</th>
</tr>
</thead>
<tbody>
<tr>
<td>08.30</td>
<td>08.30 - 09.30 Thematic Session 8 Tomorrow is already today: Urology healthcare in the near future</td>
<td>08.30 - 09.30 Thematic Session 9 Challenges and opportunities in geriatric onco-urology care</td>
<td>08.30 - 09.30 Thematic Session 12 Lymphoedema in urological patients after pelvic lymph node dissection</td>
</tr>
<tr>
<td>09.00</td>
<td>09.00 - 10.00 Plenary Session Specialist nursing and nursing specialists: Are they the same and why should we care?</td>
<td>09.00 - 10.00 Thematic Session 10 The urology nurse as patient advocate: Forgotten role?</td>
<td>09.00 - 10.00 Thematic Session 13 Drug-resistant microorganisms in urology: Is there an avalanche coming?</td>
</tr>
<tr>
<td>09.45</td>
<td>10.15 - 11.15 Thematic Session 1 Female urology</td>
<td>Break</td>
<td>Break</td>
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<tr>
<td>10.00</td>
<td>10.00 - 10.30 Break</td>
<td>10.00 - 10.30 Thematic Session 2 Challenges in testicular cancer</td>
<td>10.00 - 10.30 Break</td>
</tr>
<tr>
<td>10.30</td>
<td>10.30 - 11.30 Thematic Session 3 Advanced urodynamics</td>
<td>10.30 - 11.30 Thematic Session 4 Nursing solutions in difficult cases</td>
<td>10.30 - 11.30 Thematic Session 5 Prostatitis</td>
</tr>
<tr>
<td>10.45</td>
<td>10.45 - 12.00 Break</td>
<td>10.45 - 12.00 Poster Viewing Foyer, in front of room 4</td>
<td>10.45 - 12.00 Poster Session 2</td>
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<tr>
<td>11.00</td>
<td>11.00 - 12.00 Thematic Session 6 Video Session</td>
<td>11.00 - 12.00 Thematic Session 7 Nursing research in urology: Who’s afraid of the big bad wolf?</td>
<td>11.00 - 12.00 Award Session</td>
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<tr>
<td>11.15</td>
<td>11.15 - 12.15 Break</td>
<td>11.15 - 12.15 Poster Session 3</td>
<td>11.15 - 12.15 Break</td>
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<tr>
<td>11.45</td>
<td>11.45 - 12.45 Break</td>
<td>11.45 - 12.45 EAUN-ESU Course 2 Part 1</td>
<td>11.45 - 12.45 Break</td>
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<tr>
<td>12.00</td>
<td>12.00 - 13.00 Thematic Session 11 E-health and empowerment</td>
<td>12.00 - 13.00 EAUN-ESU Course 1 Part 1</td>
<td>12.00 - 13.00 General Assembly</td>
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<td>13.00</td>
<td>13.00 - 13.00 Break</td>
<td>13.00 - 13.00 EAUN-ESU Course 1 Part 2</td>
<td>13.00 - 13.45 General Assembly</td>
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<td>14.00</td>
<td>14.00 - 15.00 Break</td>
<td>14.00 - 15.00 EAUN-ESU Course 1 Part 2</td>
<td>14.00 - 15.00 Break</td>
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<td>15.00</td>
<td>15.00 - 16.00 Break</td>
<td>15.00 - 16.00 EAUN-ESU Course 1 Part 2</td>
<td>15.00 - 16.00 Westminster House of Commons’ Session</td>
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<tr>
<td>15.15</td>
<td>15.15 - 16.15 Break</td>
<td>15.15 - 16.15 EAUN-ESU Course 1 Part 2</td>
<td>15.15 - 16.15 Westminster House of Commons’ Session</td>
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**Resource Centre**: www.eaun17.org > Resource Centre

In the Resource Centre the slides, abstracts, posters, and videos of EAUN17 will be available after the meeting.

The extensive EAUN programme is available in the special EAUN programme book and EAUN17 App (in the EAU Events App)
Plenary Session

09.00 - 10.00 Specialist nursing and nursing specialists: Are they the same and why should we care?

Room 4, Capital Suite (level 3)

Chair: S. Terzoni, Milan (IT)

09.00 - 09.05 Welcome to the 18th International EAUN Meeting
S. Terzoni, Milan (IT)

09.05 - 09.10 Welcome to London
C.R. Chapple, Sheffield (GB)

09.10 - 09.15 Welcome by BAUN
J. Taylor, Manchester (GB)

09.15 - 09.35 Advancing urological practice: Challenges from the literature?
J.T. Marley, Newtownabbey (GB)

09.35 - 09.55 Nurse-led clinic for men with suspected prostate cancer: An exemplar of practice
P. Aslet, Basingstoke (GB)

Aims and objectives
- To explore the potential role of the specialist nurse in seeing men with suspected prostate cancer
- To review intended benefits of integrated nurse-led clinics in this setting
- To identify any risks of nurses reviewing patients with suspected prostate cancer
- To understand the challenges faced when changing the way care is delivered
- How to ensure standards of care maintained

09.55 - 10.00 Discussion
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Search for ‘EAU Events’ in your app store!
## Thematic Session 1

**Room 4, Capital Suite (level 3)**

*Chair:* J. Verkerk-Geelhoed, Gouderak (NL)

### Aims and objectives of this session

This session will give the delegates an insight in the female urology of the women in menopause. The participants will get an overview of:

- The specifics of the female urology and the hormonal issues in menopause
- The symptoms and impact women experience on Genitourinary Syndrome of Menopause (GSM)
- The possible treatments that are available for women experiencing symptoms of GSM, including hormone replacement therapy
- The symptoms and treatment with bladder prolapse related to the problems in menopause

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<th>Speaker/Location</th>
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<td>10.15</td>
<td>Introduction</td>
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<tr>
<td>10.20</td>
<td>Female urology</td>
<td>L.S. Mertens, Amsterdam (NL)</td>
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<tr>
<td>10.35</td>
<td>Genitourinary Syndrome of Menopause (GSM)</td>
<td>D. Holloway, London (GB)</td>
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<tr>
<td>10.50</td>
<td>Bladder prolapse: Symptoms and treatment</td>
<td>C.I. Carvalho Ferreira, Matosinhos (PT)</td>
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<tr>
<td>11.05</td>
<td>Questions and answers</td>
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</table>
Saturday, 25 March - EAUN Programme

Thematic Session 2

10.15 - 11.15 Challenges in testicular cancer

Room 1, Capital Suite (level 3)

Chair: P. Allchorne, London (GB)

Aims and objectives of this session
This session aims to give an update on how nursing can optimise testicular cancer care.

Objectives:
• To give an overview and update on testicular cancer – how far have we come?
• To demonstrate the importance of supporting men at key stages of their diagnosis and long-term care
• Does peer support have a role in men’s recovery?
• What ethical challenges do health professionals face with men who have intellectual disabilities? And what support and training should be given to health professionals treating these men?

10.15 - 10.20 Introduction

10.20 - 10.35 Testicular cancer: An overview and update
M.P. Laguna, Amsterdam (NL)

10.35 - 10.50 Nursing support and follow-up in testicular cancer care
L. Shephard, London (GB)
L. Cooper, London (GB)

Aims and objectives
Aim:
To set up a testicular cancer health and well-being event for patients 3-6 months following diagnosis.

Objectives:
• To design a one-off event that will enable survivors to manage the transition from active treatment to survivorship
• To establish a group of stakeholders that will support these events
• To deliver an informative programme to address the specific issues these patients face
• To address these issues, offer specialist support and advice and signpost to relevant services
• To give patients an opportunity to meet other patients going through similar experiences for peer support
• To evaluate the effectiveness of these events through patient questionnaires and feedback

10.50 - 11.05 Exploring the treatment challenges in men who have an intellectual disability and testicular cancer
N. Love-Retinger, New York (US)

11.05 - 11.15 Questions and answers
Saturday, 25 March - EAUN Programme

Thematic Session 3

**Advanced urodynamics**

11.30 - 12.30

Room 4, Capital Suite (level 3)

Chair: L. Van De Bilt-Sonderegger, Eindhoven (NL)

Aims and objectives of this session

Urodynamic studies are useful to evaluate lower urinary tract function in an objective manner. Symptoms of dysfunction are not specific and not sensitive. When initial treatment on the basis of signs and symptoms fails, a precise diagnosis of the dysfunction may be required to establish a further management plan. Urodynamic testing requires understanding of normal physiology, as well as of pathophysiology. Furthermore, performing invasive testing requires personal, communicative and instrumental skills. The session will elaborate on technical and other pitfalls, on the prevention of errors and on the recognition of errors and artefacts and the possibility for correction. The recently published (December 2016) ICS Good Urodynamic Practices document will be the basis of this presentation.

11.30 - 11.35

Introduction

11.35 - 11.50

Future trends in urodynamics

P.F.W.M. Rosier, Nijmegen (NL)

Aims and objectives

Lower urinary tract symptoms are subjective while expressed by the patient and also when interpreted by the health professional. Objective testing and diagnosis is the golden standard for management of every disease or dysfunction. Urodynamic testing provides objective diagnosis of lower urinary tract function, unbiased by subjectivity. Adequate testing requires skills, knowledge and also cooperation with the patient. Future urodynamics will be better standardized, better controlled for technical errors. Future urodynamics will be better practice-supported but also more decision and evaluation supported, but also more patient friendly. This presentation will unveil the scene for the following decade of urodynamics.

11.50 - 12.05

Urodynamics in women: Current issues, challenges and practice

T.A. Schwennesen, Århus (DK)

12.05 - 12.20

Urodynamics in men: Current issues, challenges and practice

T.A. Schwennesen, Århus (DK)

12.20 - 12.30

Questions and answers
Special Session

11.30 - 12.30  Nursing solutions in difficult cases

Room 1, Capital Suite (level 3)

Chair:  L. Drudge-Coates, London (GB)

Aims and objectives of this session
In guidelines it is common practice to describe/focus on typical cases, but we all know that there is also a need for information on nursing practice in atypical (difficult) cases. All nurses encounter problems in daily nursing practice and have found their own solutions or sometimes have not found a solution. In this session these challenging cases are presented and discussed offering delegates a unique opportunity to learn from each other’s experience.

The submitted cases have been evaluated by an expert jury:
• Ronny Pieters, Ghent, Belgium (Urology Nurse)
• Eva Wallace, Dublin, Ireland (Urology Nurse)
• Helen Forristal, Dublin, Ireland (Urology Nurse Practitioner, sub-specialisation in uro-oncology)
• Françoise Picard, Bordeaux, France (Head Nurse Urology Department)

11.30 - 11.35  Welcome and introduction
L. Drudge-Coates, London (GB)

Deviating from the standard – Stoma care of a patient with trisomy and autistic tendencies
C. Hübsch-Aepli, Zürich (CH)

11.45 - 11.55  Robotic surgery in kidney transplantation: Nursing role in the first European case
T. Alonso Torres, Barcelona (ES)

11.55 - 12.05  Post-operative complications post Radical Robotic Prostatectomy
S. Bowen, Dublin (IE)

12.05 - 12.15  Treating ‘complications’ post Radical Robotic Prostatectomy
M. O’Brien, Dublin (IE)

12.15 - 12.30  Conclusions
Thematic Session 4

12.45 - 13.45 Joint EAUN-ICS Session: Challenges with urine incontinence

Room 1, Capital Suite (level 3)

Chair: V. Geng, Lobbach (DE)

Aims and objectives of this session
Incontinence – a topic which is becoming more important due to demographic developments as well as a result of new therapeutic approaches with consequences for continence.
The participants should get an overview about:
• Different types of urinary incontinence
• Urinary incontinence and the Quality of Life (QoL) which is related to the incontinence
• Gender typical differences in QoL
• Interventions if intermittent catheterisation is not an option
• Changes and challenges with incontinence as a problem

12.45 - 12.50
Introduction

12.50 - 13.05
ICS Lecture: Intervening when patients are not able to use standard CIC
S. Eustice, Truro (GB)

13.05 - 13.20
The effect of urinary incontinence on health-related quality of life: Is it similar in men and women?
D.A. Bedretdinova, Paris (FR)

13.20 - 13.35
Is surgery the answer for urinary incontinence?
W. Naish, Redhill (GB)

Aims and objectives
Identify different types of urinary incontinence by symptoms and explore management options. Outline of published guidelines on management and when surgery is appropriate.

13.35 - 13.45
Questions and answers

Memorial Service

12.45 - 13.00 Memorial Service - Bruce Turner

Room 4, Capital Suite (level 3)

Chairs: L. Drudge-Coates, London (GB)
L. Fleure, London (GB)

Memorial session to commemorate the life and career of Bruce Turner
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<tr>
<td>13.15 - 13.45</td>
<td>E-health and empowerment</td>
<td>G. Villa, Milan (IT)</td>
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**Aims and objectives of this session**
At present, nurses and urologists are still working towards realising the empowerment strategy of the WHO. Implementing a patient-centered pathway is only possible when we as health care professionals know the individual needs of our patients. But how does that work? One opportunity offers the EAU Patient Information Group through offering evidence-based information, developed on a European level and published through internet. This session will give an overview about the initiative, the website and how you as a nurse can use it to support your patients.

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### Thematic Session 5

**Acute and chronic kidney failure**

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<td><strong>Introduction</strong></td>
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<tr>
<td>14.20</td>
<td><strong>Acute and chronic renal insufficiency</strong></td>
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<tr>
<td>F.M.E. Wagenlehner, Giessen (DE)</td>
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<tr>
<td>14.35</td>
<td><strong>Patient counselling for chronic kidney disease</strong></td>
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<td>G. Rütti, Berne (CH)</td>
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<td>14.50</td>
<td><strong>The importance of diet for patients with chronic renal insufficiency</strong></td>
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<td>M. Borre, Århus (DK)</td>
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#### Room 1, Capital Suite (level 3)

**Chair:** C.N. Tillier, Amsterdam (NL)

**Aims and objectives of this session**

Kidneys are one of the body’s vital organs and have several key tasks such as:
- acting as filters;
- balancing the minerals which are necessary to the body;
- maintain water balance; and
- producing hormones, enzymes and vitamins.

In this session we will examine the importance of renal function and have an overview of acute and chronic kidney failures. We will focus, particularly, on chronic renal failure, a condition which involves significant decrease in kidney function, regardless of the cause, and which leads to the kidneys losing the ability to properly filter blood. As nurses, how can we provide good patient counseling? This topic and other issues will be discussed in this session.

**Introduction**

14.15 - 14.20

**Acute and chronic renal insufficiency**

14.20 - 14.35

F.M.E. Wagenlehner, Giessen (DE)

**Aims and objectives**

The aim of this presentation is to explore and discuss the function of the kidneys from development and anatomy to physiology and their role in general and urological diseases. The diagnostic criteria and pharmacological impact of diseased kidneys will be presented. The following aspects will be highlighted:
- Anatomy of the kidneys
- Physiology and pathophysiology of kidney function
- Diseases impacting kidney function
- Urological diseases and kidney function
- Diagnosis of kidney function
- Pharmacology in reduced kidney function

**Patient counselling for chronic kidney disease**

14.35 - 15.00

G. Rütti, Berne (CH)

**Aims and objectives**

Chronic kidney disease (CKD) is often progressive but associated with few symptoms in early stages. A healthy lifestyle and adherence to medical treatment may halt CKD progression. Advanced Practice Nurse (APN) consultation aims at promoting knowledge, self-management and self-efficacy of CKD patients and their family members. The consultation programme in our outpatient clinic includes a needs assessment, basic CKD information and individually tailored sessions. CKD knowledge significantly improved after one month and one year in patients and family members. Interviews showed that they struggled with an incomprehensible diagnosis. The APN supported them in handling CKD by offering information, insights and understanding, provided a new outlook and filled some gaps in CKD care. APN consultation has the potential to improve CKD knowledge; the ongoing guidance and continuity of care is highly appreciated by patients and family members.

**The importance of diet for patients with chronic renal insufficiency**

14.50 - 15.05

M. Borre, Århus (DK)

**Questions and answers**

15.05 - 15.15
Saturday, 25 March - EAUN Programme

Poster Session 1

14.15 - 16.00  Poster session

Room 4, Capital Suite (level 3)

Chairs:  B.T. Jensen, Århus (DK)
         J.T. Marley, Newtownabbey (GB)

Poster viewing of 30 minutes. Short introduction of 4 minutes by the chair of the session. Presentations will take place on stage. Standard presentations are 6 minutes in length, followed by 2 minutes for discussion.

14.15 - 14.45  Poster viewing

P01 A randomized controlled trial study of the efficacy of intensive pre-operative pelvic floor muscle training to decrease post-prostatectomy urinary incontinence among Chinese men
S.L. Ng, Y.B. Tse, L. Yeung, B. Ho, A. Ng, W.K. Ma, J. Tsu, M.K. Yiu (Hong Kong West Cluster, The University of Hong Kong, Hong Kong)

P02 MEN with MEC: Satisfaction and recommendations

P03 Enhancing recovery in prostate cancer care can we do it better? Experiences from a nurse led survivorship programme
J.M. Ferguson, J.J. Aning (Newcastle upon Tyne, United Kingdom)

P04 The impact of a comprehensive functional health assessment on men after treatment for prostate cancer: The True NTH exercise and diet study

P05 Transition from hospital-based supervised exercise to unsupervised exercise in the community: Experiences from men with prostate cancer

P06 A descriptive study of experienced burden by spouses living with men undergoing androgen deprivation therapy for prostate cancer
J. Avlastenok, K. Rud, H. Køppen, F. Føns, P. Østergren (Herlev, Denmark)

P07 Management of bone health in patients with advanced cancer: A survey of specialist urology nurses
L. Drudge-Coates, E. Van Muilekom, J.C De La Torre Montero, K. Leonard, M. Van Oostwaard, E. Aerts, D. Niepel, B.T Jensen (London, United Kingdom; Amsterdam, Eindhoven/veldhoven, The Netherlands; Madrid, Spain; Dublin, Ireland; Zurich, Switzerland; Vienna, Austria; Århus, Denmark)

P08 Evaluate the clinical nursing staff’s knowledge and competency before and after training program on using bladder scanner to check post void residual urine (PVRU) for urological patients
S.L. Ng (Hong Kong West Cluster, Hong Kong)

P09 The optimal volume of bladder filling in case of trial without catheter (TWOC), the patient is in control
J.D. Van Kesteren, M.J. Lely, J.H. Takkenberg (Amsterdam, The Netherlands)
State-of-the-art Lecture 2

Guidelines catheterisation, urethral intermittent in adults

Room 1, Capital Suite (level 3)

Chair: G. Villa, Milan (IT)

Aims and objectives of this session
This session will highlight the scientific basis for this guideline, in particular: the indications, contraindications and alternatives for intermittent catheterisation, the indications about the procedure and the equipment, and the nursing interventions related to complications.

15.30 - 15.35
Introduction

15.35 - 16.00
A summary of the intermittent catheterisation guidelines
S. Vahr Lauridsen, Copenhagen (DK)

Aims and objectives
Implementation of clinical guidelines is still a major challenge. To make knowledge from EAUN Guidelines easier to use, an edited summary of the 2013 EAUN Guideline ‘Catheterisation urethral intermittent in adults’ has been published. In this session you will get an introduction to the evidence behind the intermittent catheterisation procedure performed by a health care professional. A short overview of new evidence regarding the procedure and patient-related perceptions of intermittent catheterisation published after the release of the 2013 guidelines will also be presented.
### Thematic Session 6

**16.15 - 17.15 High-risk non-muscle invasive bladder cancer: What's new?**

**Room 4, Capital Suite (level 3)**

**Chair:** W.M. De Blok, Utrecht (NL)

**Aims and objectives of this session**

The shortage of BCG showed to the urological society that a treatment method depending on one source can cause great difficulty and can even lead to cystectomy. In the session the speakers will show that innovation of the treatment for Non Muscle Invasive Bladder Cancer (NMIBC) is on its way. The psycho-social burden on patients with NMIBC is, compared to other oncological illnesses, a long-lasting burden. Unmet needs have, because of the length of the treatment and follow up, a deep impact. In this session the speakers will elaborate on these themes.

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<tr>
<td>16.15 - 16.20</td>
<td><strong>Introduction</strong></td>
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| 16.20 - 16.40 | **Innovations in treatment for high-risk non-muscle invasive bladder cancer**
  | K. Hendricksen, Amsterdam (NL)            |
| 16.40 - 17.05 | **Unmet psycho-social needs in bladder cancer**
  | N. Mohamed, New York (US)                |

**Aims and objectives**

Improvement in treatment of Urothelial Carcinoma of the urinary Bladder (UCB) has led to a larger numbers of survivors living with the impact of treatment and side effects on their Health-Related Quality of Life (HRQoL). However, methodological limitations and the lack of sensitivity of the HRQoL measures used to assess gender-, age-, and treatment-related differences may limit the generalisability of their outcomes and their utility in clinical settings. A vast body of research identifying patients’ informational and supportive care needs during survivorship has emerged. Research examining unmet needs in UCB patients lags significantly behind that of other cancers both in terms of the adequacy of needs measures and the breadth and depth of published studies on these issues. Our recent studies in UCB patients showed significant unmet informational and supportive care needs that vary across the disease trajectory. This paper will review study results and discuss their implications for UCB research and health care.

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**Thematic Session 7**

**Nursing research in urology: Who's afraid of the big bad wolf?**

**Room 1, Capital Suite (level 3)**

*Chair: K. Fitzpatrick, Dublin (IE)*

16.15 - 16.20  **Introduction**

16.20 - 16.40  **Exploring the anatomy of a urological research paper**  
R. Leaver, London (GB)

**Aims and objectives**

This session will explore how to read a research paper quickly and efficiently

**Aims:**

- To explore the structure of a research paper
- To outline the common elements in most articles
- To focus on specific areas to get the gist of a paper

16.40 - 17.05  **Statistics without tears - it can be done**  
P. Slater, Coleraine Co. Londonderry (IE)

17.05 - 17.15  **Questions and answers**
Thematic Session 8

**Room 4, Capital Suite (level 3)**

*Chair: L. Drudge-Coates, London (GB)*

**Aims and objectives of this session**

This session will give the delegates an insight in the role of digital technology and examples of how it now plays an increasingly important role in healthcare provision in addressing the challenges faced by health services around the world. The participants will get an overview of:

- The specific use of e-health and how it plays a pivotal role in evolving the way in which healthcare is delivered.
- The use of the internet and patient access for clinical information.
- The impact of technology and how it is changing traditional hospital consultation practices.

08.30 - 08.35  
**Introduction**

08.35 - 08.55  
**e-Health in urology: What can we expect?**  
H.G. Van Der Poel, Amsterdam (NL)

*Aims and objectives*  
eHealth is changing medicine. Both healthcare workers and patients communicate and gather information on the digital highways. How will these changes impact healthcare? How is regulation of the highway traffic done in a safe and rapid fashion? We will reflect on the possibilities and needs.

08.55 - 09.10  
**Online health information seeking among patients**  
J. Moreland, Elgin (GB)

*Aims and objectives*  
Online Health Information Seeking (OHIS) has become an area of increasing interest over the last decade. The Internet has enabled the democratisation of health information, as knowledge that was previously exclusive to health professionals is now available to the public. The prevalence of patient OHIS and the impact it has on health professionals, in the context of patient consultations, is the focus of an ongoing body of research outlined in this lecture.

09.10 - 09.20  
**Urology nursing tomorrow: Webconsultation**  
W.M. De Blok, Utrecht (NL)

*Aims and objectives*  
Now that the current communication systems make it possible that grandfather can communicate with his granddaughter with a click of the mouse, new options for our patients should be considered. In hospitals where not only new technology can offer innovation of care, discussions are ongoing about what should or should not be done. Privacy legislation can be an obstacle for innovative plans, whereas online technology opens up options that weren’t possible 1 year ago. In this session examples of opportunities and threats will be shown and discussed.

09.20 - 09.30  
**Questions and answers**
**Thematic Session 9**

**Room 1, Capital Suite (level 3)**

*Chair: C.N. Tillier, Amsterdam (NL)*

**Aims and objectives of this session**

The management of urological cancer in the elderly is a major public health problem due to the ageing population, increased cancer risk with age and therapeutic progress. Do we have to make a difference in treatments because of the patient’s age? Can you propose to seniors, for example a prostatectomy, nephrectomy, cystectomy or neo-adjuvant chemotherapy before cystectomy? Does the treatment depend on the age of the patient or on his general condition? Do we still have just to use the Charlson Index to evaluate if a patient can undergo a treatment. Do we have to use other instruments/validated questionnaires? What is the role of the nurse? These session will clarify this questions.

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<td>08.30 - 08.35</td>
<td>Introduction</td>
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<tr>
<td>08.35 - 08.50</td>
<td>Improving care of elderly persons affected by urological cancer: The place of the advanced nurse specialist in geriatrics/oncology A. Roveri, Rennes (FR)</td>
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<tr>
<td>08.50 - 09.20</td>
<td>Person-centered cancer care in the elderly B. McCormack, Musselburgh (GB)</td>
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<tr>
<td>09.20 - 09.30</td>
<td>Questions and answers</td>
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ESU/ESFFU Hands-on Training Courses

Sacral neuromodulation procedure standardisation

Room Africa (level 1)

Chair: H. Hashim, Bristol (GB)

Tutors: M. Belal, Birmingham (GB)
E. Chartier-Kastler, Paris (FR)
S. De Wachter, Nijlen (BE)
T.M. Kessler, Zurich (CH)
S. Musco, Florence (IT)
L. Thomas, Bristol (GB)

Course description
A practical hands-on training course that will allow the participants to practise on models the different steps of performing sacral neuromodulation including primary percutaneous nerve evaluation, tined lead and battery implantation and programming and also troubleshooting.

Aims and objectives
- Understand the indications for SNM
- Be able to perform the different steps of the procedure in a standardised format
- Be able to troubleshoot problems with SNM

Target audience
Doctors, Nurses, technicians and clinical scientists who have little or no knowledge of sacral neuromodulation.

HOT 19 Sunday, 26 March 09.30 - 11.00
HOT 20 Sunday, 26 March 11.30 - 13.00

Registration
Limited places available, a fee of €31.20 (incl. VAT) applies. Registration at the ESU Desk in the Registration area (level 1).
## State-of-the-art Lecture 3

**Exploring patients’ lack of engagement with structured education**

**Room 4, Capital Suite (level 3)**

*Chair: L. Van De Bilt-Sonderegger, Eindhoven (NL)*

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<tr>
<td>09.45 - 09.50</td>
<td>Introduction</td>
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<tr>
<td>09.50 - 10.15</td>
<td>Lessons from diabetes care</td>
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D. Chaney, London (GB)

### Aims and objectives

The aim of this lecture is to build awareness of the successes and challenges of Structured Diabetes Education (SDE) programmes in the UK.

Objectives:

Following the presentation those attending will be able to:

- Describe the historical development of structured diabetes education in the UK
- Understand the challenges faced when introducing a SDE programme
- Discuss potential facilitators to assist with development and introduction of a SDE programme
- Utilise the knowledge gained and apply it to the development of similar programmes for people experiencing urological disorders
Room 1, Capital Suite (level 3)

Chair: B.T. Jensen, Århus (DK)

09.45 - 09.50 Introduction

09.50 - 10.15 Establishing a research-focused and nurse-driven survivorship clinic across cancer surgical specialities
T. Juul, Århus (DK)

Aims and objectives
Cancer in the pelvic region includes highly prevalent cancer types such as endometrial-, prostate-, and colorectal cancer, and the treatment is managed by different disciplines like gynaecology, urology, colorectal surgery and oncology. Across disciplines, the treatment modalities have many similarities, thus, these patient-groups also suffer from similar long term sequelae. Bowel-, urinary- and sexual dysfunction are common long term sequelae, all affecting the patients’ quality of life.

In Århus/Denmark a nurse-led multidisciplinary survivorship clinic is currently being established. The main idea is to unite the expertise from all relevant disciplines to offer the best possible care and treatment of these multi-faceted long term sequelae, and to establish a research environment across the usual frontiers between clinical disciplines and traditional professional boundaries.
Thematic Session 10

10.30 - 11.30 The urology nurse as patient advocate: Forgotten role?

Room 1, Capital Suite (level 3)

Chair: N. Love-Retinger, New York (US)

10.30 - 10.35 Introduction

10.35 - 11.00 Nurse advocacy: Is it hiding in plain sight?
H.A.M. Van Muilekom, Amsterdam (NL)

Aims and objectives
Nurses have always been the best advocates for patients. Although over the years more and more patients are able to take care of themselves during their diagnosis and treatment, it is still of enormous importance that they receive the best information they need to make informed decisions. Help to make the right choices and support in this process is for everybody necessary to make sure their unmet needs are recognised and nothing is done without their consent and interest.

-What is patient advocacy?
-How can nurses fulfill the patient advocacy role?
-What do nurses need to be able to be a patient advocate?

11.00 - 11.25 Nurse advocacy: What does ethics tell us?
D. Watson, Amsterdam (NL)

Aims and objectives
In the era of evidence-based medicine clinical practice is often characterized by a protocol-driven approach to individual patient care. This trend seems to be amplified by a growing organisational focus on efficiency improvement (e.g. 'lean management'). At the same time patients express their opinions about their treatment more assertively. Some show signs of disease-related infobesity when they discuss this with doctors and nurses. In this context practising respectful, attentive care becomes imperative. In patient-centred healthcare individual patient needs are as important as patient values. This approach optimises patient buy-in and satisfaction with the chosen treatment without compromising its scientific quality. Nurses and doctors have complementary roles in this respect. The presentation will address what respectful, attentive care involves and how nurses can align with patients in mutually satisfactory shared-decision making about their treatments.

11.25 - 11.30 Discussion
Poster Session 2

Room 4, Capital Suite (level 3)

Chairs: B.T. Jensen, Århus (DK)  
J.T. Marley, Newtownabbey (GB)

Poster viewing of 30 minutes. Short introduction of 4 minutes by the chair of the session. Presentations will take place on stage. Standard presentations are 6 minutes in length, followed by 2 minutes for discussion.

10.30 - 11.00 Poster viewing

P10 Nurse continence specialist impacting continence care in the community  
J. Skelly (Hamilton Ontario, Canada)

P11 Translating Unique Learning for Incontinence Prevention, the TULIP Project: Comparative effectiveness study of a diverse population of adult women receiving bladder health education  

P12 Is re-use of intermittent urethral catheters safe and preferred? Real world data from the United States  

P13 Incidence and impact of urinary tract infections (UTI) when starting intermittent catheterisation (CIC) and the effect on quality of life (third preliminary analysis)  
H. Mulder (Groningen, The Netherlands)

P14 An exploration of bacillus Calmette-Guerin treatment for non-muscle invasive bladder cancer: A mixed methods approach  
J. Alcorn, L. Burton, J. Garside, E. Topping (Wakefield, Huddersfield, United Kingdom; Doha, Qatar)

P15 Efficacy of preoperative uro-stoma-education on self-efficacy after radical cystectomy; secondary outcome from a prospective randomized controlled trial  
B.T. Jensen, B. Kiesbye, I. Soendergaard, S.A. Kristensen (Århus N, Denmark)

P16 How a multidisciplinary approach to an enhanced recovery program for robotic assisted radical cystectomy reduces length of stay and improved outcomes  

P17 Self-care and quality of life in patients with urostomy  
S.M. Giorgio, M. Boarin, G. Villa, D.F. Manara (Milan, Italy)

P18 Life with an urostomy: A phenomenological study  
M. Bresciani, N. Boschetti, N. Leggio, G. Villa, D. Manara (Milan, Italy)
## Special Session

### 11.45 - 12.15  Nursing research competition

**Room 1, Capital Suite (level 3)**

*Chair: R. Pieters, Ghent (BE)*

#### Aims and objectives of this session

The aim of the nursing research competition is to give nurses the chance to start research in the field of urology nursing. The audience is presented the research plans that are being discussed by a jury, so this session also becomes an interactive learning session for pitfalls and opportunities in setting up nursing research.

**11.45 - 11.55**  
**Quality of life in penile cancer patients: A survey of patient reported outcomes**  
H.A.M. Van Muilekom, Amsterdam (NL)

**11.55 - 12.05**  
**Improving quality of life in patients with neurogenic bladder**  
V. Katsarou, Athens (GR)

#### Aims and objectives

The main strategic scientific aims are threefold. First of all, all patients with neurologic bladder disorders living in island of Santorini will be recorded. Secondly, the questionnaire study will be performed to examine quality of life in these patients. Finally, the result will be studied with the ambitions to provide innovative action for improving quality of life patients with Parkinson’s, Multiple Sclerosis and other neurological disorders. The overall aim of the project is to inform and assist nurses at the national level. Ultimately, the project will develop specific tools and evidence-based actions to optimise the delivery of care to the large proportion of Santorini citizens.

**12.05 - 12.15**  
**DACOACH - Feasibility of self-tracking and data-guided health-coaching via personal, mobile and wearable devices in chronic care management**  
L.F. Øbro, Vejle (DK)
# Thematic Session 11

**12.30 - 13.30 Joint EAUN-BAUN session: Current issues in urological care**

### Room 4, Capital Suite (level 3)

**Chairs:**  
P. Allchorne, London (GB)  
J. Taylor, Manchester (GB)

**Aims and objectives of this session**  
This session aims to champion advanced nursing practice throughout Europe in urology.

Objectives:
- Addressing variability in nursing standards across Europe using examples of best practice and inspirational leadership
- Demonstrating nurses in advanced roles are cost efficient, effective, patient centred and provide much needed continuity of care to patients

### 12.30 - 12.40 Introduction

### 12.40 - 12.50 Brexit - in or out?  
J. Brocksom, Leeds (GB)

### 12.50 - 13.00 The recovery package  
M. Bagnall, Wallsend (GB)

**Aims and objectives**
- The recovery package is a set of interventions which aims to greatly improve the lives of people living with and beyond cancer and to reduce GP and hospital visits.
- The four interventions include holistic assessment, treatment summary, health and wellbeing events and a cancer care review.
- This presentation will describe a project funded by Prostate Cancer UK which implemented the recovery package for patients living with prostate cancer in north Northumberland.

### 13.00 - 13.10 A novel APP approach to nurse-led renal catheter care  
K. Melchiorsen, Århus (DK)

### 13.10 - 13.20 Leadership driven care implementation: From bench to bedside  
L. Aarvig, Århus Nord (DK)

**Aims and objectives**
- At Århus University Hospital, we have implemented research findings from the study dealing with the optimization of patient care for cystectomy patients. How can this best be done in practice? What consideration must be given when research is implemented?

### 13.20 - 13.30 Questions and answers
# EAUN-ESU Course 1

**Learning curve in urological robot-assisted surgery**

**Room 1, Capital Suite (level 3)**

*Chair:* J.W. Collins, Stockholm (SE)

**Aims and objectives of this session**

What does it entail for you as a nurse, when your hospital starts up a programme of robot-assisted surgery? How can you efficiently accomplish patient and robot installation? What are the avoidable, common errors that you should not make?

This course takes a closer look at the practical points of such an event, and takes a closer look at the start-up, learning curve and development of such a programme. It will also give you insight in the pros and cons of robot-assisted surgery, as well as the indications and limitations.

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<thead>
<tr>
<th>Time</th>
<th>Session</th>
<th>Presenter</th>
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<tbody>
<tr>
<td>12.30</td>
<td>Indications and limitations of robot assisted surgery</td>
<td>J.W. Collins, Stockholm (SE)</td>
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<tr>
<td>12.50</td>
<td>Starting with robot assisted surgery in your OR: Wisdom, warnings and what I wish I would have known</td>
<td>A. Hartman, Amsterdam (NL)</td>
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<td>13.10</td>
<td>Patient installation and robot positioning</td>
<td>J.W. Collins, Stockholm (SE)</td>
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<tr>
<td></td>
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<td>A. Hartman, Amsterdam (NL)</td>
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<tr>
<td>13.30</td>
<td>Break</td>
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<tr>
<td>14.00</td>
<td>Learning curve for the surgeon</td>
<td>J.W. Collins, Stockholm (SE)</td>
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<tr>
<td>14.20</td>
<td>Learning curve for the nurse</td>
<td>A. Hartman, Amsterdam (NL)</td>
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<tr>
<td>14.40</td>
<td>Discussion</td>
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## Unmoderated Poster Session

**13.00 - 17.30 Poster Viewing**

### EAUN Poster Area

**Aims and objectives of this session**

Although not chosen for formal presentation, the EAUN Scientific Committee has invited nine authors to share their work in our poster area in the Foyer on Sunday afternoon. The authors have been asked to be present near their poster from 13.30 - 14.00 taking the opportunity to discuss their work with the other delegates. Unmoderated posters do not qualify for entry into the abstract competition.

**The EAUN: An analysis of what differentiates current members from non members**

*P. Allchorne, M. Parry, I. Bakolis, N. Sevdalis, J.S.A. Green (London, United Kingdom)*

**The clinical outcomes of patients with urinary retention managed with clean intermittent catheterization**

*H.Y. Luk, Y.W. Au, S.C. Liu (Hong Kong, Hong Kong)*

**Evaluate the outcome of developing a clinical pathway on male acute urinary retention in the AED and Urology Centre**

*S.L. Ng, A.T.L. Ng, Y.B. Tse, L. Yeung, B.S.H Ho, M.K. Yiu (Hong Kong, Hong Kong West Cluster, Hong Kong)*

**Audit of One Stop Haematuria clinic in a Dublin Hospital over 1 year - 2016**

*M. O’Brien, S. Bowen, G. Kavanagh, L. Casey (Dublin, Ireland)*

**Surgical treatment of BPH: Nursing evolves with new techniques?**

*I. Zordan (Cuneo, Italy)*

**Use of WeChat Intelligent Terminal for improving follow-up rate of patients after radical cystectomy**

*X.M. Li, Y.W. Li, Z.Y. Li, J. Li, Z.W. Chen (Chongqing, China)*

**Patient involvement in ERAS treatment program: Patient diary after radical cystectomy**

*M. Ronge, K. Egge (Lørenskog, Norway)*

**Pre surgical health and well being clinic for men undergoing robotically assisted laparoscopic prostatectomy (RALP)**

*J. Billing, C. Turner, M. Bracey (Exeter, United Kingdom)*

**Guidelines for care and treatment for patient with macroscopic haematuria**

*N. Hageman, H. Thulin (Stockholm, Sweden)*
Video Session

Room 4, Capital Suite (level 3)

Chair: S.J. Borg, St. Julians (MT)

Aims and objectives of this session
Urology nursing is very dynamic, propelled forward by emerging technology, evidence-based practice and clinical demands. However, it is a mistake to assume that urology nursing practice is of the same level, or offering the same services, evenly throughout the EU. In fact, what is taken for granted as a recognised nurse-led practice in one country, is totally the opposite in another EU state. With this in mind, the video session’s aim is to showcase such practices by nurses to other fellow urology nurses, what has been achieved and fine-tuned in specific areas. It will also be an occasion to ask our fellow urology nurses on how they had overcome situations that may still be presenting in other emerging clinical nursing practices.

Introduction
S.J. Borg, St. Julians (MT)

V1 My second visit to Africa - follow up
B. Keil (Heilbronn, Germany)

V2 Instruction video of urodynamic studies in adults with air filled catheters
V. Decalf, A-F. Spinoit, I. Ragolle, C. Kumps, M-A. Denys, P. Hoebeke, K. Everaert (Ghent, Belgium)

State-of-the-art Lecture 5

Prostatitis

Room 1, Capital Suite (level 3)

Chair: P. Allchorne, London (GB)

Aims and objectives of this session
This session examines diagnosis and treatments of prostatitis (EAU guidelines), including pathophysiology, types, diagnosis, treatments, and future developments.

15.15 - 15.20
Introduction

15.20 - 15.45
Prostatitis: Types and treatment
J. Shah, London (GB)

Aims and objectives
Prostatitis is a ‘Cinderella’ condition which causes heartsink for the clinician and distress for the patient. Many patients have suffered for many years. They will often have received long courses of antibiotics with little benefit and the usual unwanted side effects. Is there another way of treating prostatitis that could ease the symptoms and return the patient to a more normal way of life? During this lecture I will explore what is current and what is recommended. I will then discuss perhaps a new way forward to investigate and treat this troublesome condition.
# Special Session

<table>
<thead>
<tr>
<th>Time</th>
<th>Session Title</th>
<th>Details</th>
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</table>
| 15.45 - 16.15 | 'Westminster House of Commons' Session: This house believes that patients do not know what treatment is best for them | Room 4, Capital Suite (level 3)  

**Speaker of the House:** R. Pieters, Ghent (BE)

**Aims and objectives of this session**
Patient participation, patient involvement, patient empowerment... an expanding evolution in patient care. But are patients sufficiently informed regarding the right treatment for their disease? Isn’t the doctor best-placed to decide on the right therapy for the right patient? In this session we aim to discuss with the audience the different angles of the current evolution.

**Opposer:** D. Watson, Amsterdam (NL)  
**Proposer:** B. McGowan, Newtownabbey (GB)
### Thematic Session 12

<table>
<thead>
<tr>
<th>Time</th>
<th>Session Description</th>
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<tbody>
<tr>
<td>08.30 - 09.30</td>
<td>Lymphoedema in urological patients after pelvic lymph node dissection</td>
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#### Room 4, Capital Suite (level 3)

**Chair:** J. Verkerk-Geelhoed, Gouderak (NL)

**Aims and objectives of this session**

Pelvic lymph node dissection in urological cancer treatment is undertaken for both prostate cancer and bladder cancer. Urological patients that undergo pelvic lymph node dissection in addition to their treatment will be subjected to an increased risk of complications such as lymphoedema. This can cause significant morbidity as a result of skin infection, eczema, pain as well as psychological discomfort. This session aims to provide knowledge on detecting risk factors and early signs in patients at high risk of getting lymphoedema and how it can be prevented and treated.

<table>
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<tr>
<th>Time</th>
<th>Presentation</th>
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<tbody>
<tr>
<td>08.30 - 08.35</td>
<td>Introduction</td>
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<tr>
<td>08.35 - 08.50</td>
<td>Lymphoedema after pelvic lymph node dissection: Defining, preventing and treating</td>
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<tr>
<td></td>
<td>I. Schollema-Noordhoff, Drachten (NL)</td>
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<tr>
<td>08.50 - 09.05</td>
<td>Pre- and post-operative evaluation of patients at risk of lymphoedema</td>
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<td>M. Pinto, Naples (IT)</td>
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</table>

**Aims and objectives**

In developed countries cancer is the most frequent cause of secondary lymphoedema but there are emerging data about genetic susceptibility and new drugs’ side effects that increase the risk of developing lymphoedema. It is widely accepted that the etiology of lymphoedema is multifactorial and risk factors could contribute more or less depending on individual and environmental patient context. Patient evaluation before and after treatment is a strategic step to identify patients at higher risk, to adopt primary prevention strategies (including less invasive surgical procedures such as videoscopic LND) and to promote early detection and early treatment onset (secondary prevention). A detailed medical history (focused to risk factors) and a general clinical examination are followed by body region volume measurement plus lymphoedema stage assessment using standardized methods and by disability and quality of life evaluation using validated scales and instruments.

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<tr>
<th>Time</th>
<th>Presentation</th>
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<tr>
<td>09.05 - 09.20</td>
<td>Pelvic lymph node dissection in uro-oncology</td>
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<td>R. Gaston, Bordeaux (FR)</td>
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<tr>
<td>09.20 - 09.30</td>
<td>Questions and answers</td>
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</tbody>
</table>
08.30 - 09.30  Drug-resistant microorganisms in urology: Is there an avalanche coming?

Room 1, Capital Suite (level 3)

Chair:  C.N. Tillier, Amsterdam (NL)

Aims and objectives of this session
We have all seen, in the last sixteen years, a dramatic upsurge of UTI caused by E. coli that have not responded to the mainstream drugs in use in our first line of defence. Therefore the primary aims & objectives of this session is to have delegates more aware of findings coming out of a worldwide-performed point prevalence study conducted by the Global Prevalence of Infections in Urology's (GPIU). We are in reality running out of time and oral antibiotics that can treat such infection, thus it is of upmost importance for urology nurses to be well informed of their salient role in preventing the dissemination of drug-resistant microorganisms.

08.30 - 08.45  The global prevalence of infections in urology study: A long-term, worldwide surveillance study on urological infections
F.M.E. Wagenlehner, Giessen (DE)

Aims and objectives
The Global Prevalence of Infections in Urology (GPIU) study is a worldwide-performed point prevalence study intended to create surveillance data on antibiotic resistance, type of urogenital infections, risk factors and data on antibiotic consumption, specifically in patients at urological departments with healthcare-associated urogenital infections (http://gpiu.esiu.org/).
Apart from the GPIU main study, several side studies are taking place, dealing with transurethral resection of the prostate, prostate biopsy, as well as urosepsis. The GPIU study has been annually performed since 2003, including 27,542 patients. Resistance rates of most uropathogens against antibiotics were high, especially with a note of multidrug resistance. The severity of HAUTI is also increasing, 25% being urosepsis in recent years.

08.45 - 09.05  Antibiotics: Has the urological time bomb exploded?
T.E. Bjerklund Johansen, Oslo (NO)

09.05 - 09.20  What is the role of nurses in the prevention of CAUTI (catheter-associated urinary tract infections)?
N. Bartlomé-Wyss, Aarau (CH)

Aims and objectives
Catheter-Associated Urinary Tract Infections (CAUTI) are the most common nosocomial infections. We used a multi-modal interdisciplinary intervention to reduce CAUTI with three key elements: stringent indications for urinary catheter (UC) insertion, shifting the task to decide on UC removal from physicians to nurses and an automatic electronic alert for catheter removal as key elements.

09.20 - 09.30  Questions and answers
Monday, 27 March - EAUN Programme

Hands-on Training Courses

Robotic skills and communication - Introductory course

Room Asia (level 1)

Chair: L. Söderkvist, Stockholm (SE)

Tutors: M. Bloch, Cleveland (USA)
        A. Koch, Hamburg (DE)
        A. Thouroude, Montpellier (FR)

Course description
Robotic surgery is demanding teamwork more than most other kinds of surgery. To work as a team it is necessary to know and understand the work of the team members. Plus due to the location of the surgeon, communication is a vital aspect of the success.

EAUN will provide training using simulators and roll play to introduce you to the required psychomotor skills and to more effective communication.

This course will offer an opportunity to discover the challenges and difficulties encountered in the console performing robotic surgery. The main aims of this 90 minute course are testing and improving your psychomotor skills in robotic surgery using simulators, and gaining an understanding of the requirements of a remote console surgeon and the assistant using the simulator for team training working in pairs.

Aims and objectives
- Learn the basics of effective communication
- Obtain an understanding of the role of a console surgeon
- Test and improve your psychomotor skills required in the console by performing various exercises and experience parts of a surgical procedure in the simulator

Target audience
Novice and experienced nurses and operating room nurses curious to learn more of the fundamentals of robotic surgery and the skills required in the console.

EAUN-HOT 01 Monday, 27 March 09.15 - 10.45
EAUN-HOT 02 Monday, 27 March 11.00 - 12.30

Registration
Limited places available, a fee of €31.20 (incl. VAT) applies. Registration at the ESU Desk in the Registration area (level 1).
# State-of-the-art Lecture 6

**Illiteracy and health literacy in patients**

**Room 4, Capital Suite (level 3)**

**Chair:** J. Verkerk-Geelhoed, Gouderak (NL)

**Aims and objectives of this session**

This session addresses the impact of illiteracy on health outcomes. What can be done about this with specific materials?

<table>
<thead>
<tr>
<th>Time</th>
<th>Session</th>
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<tbody>
<tr>
<td>09.45 - 09.50</td>
<td><strong>Introduction</strong></td>
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<tr>
<td>09.50 - 10.15</td>
<td><strong>Health literacy: Are all patients equal for understanding the standard information given?</strong> M.R. Van Balken, Arnhem (NL)</td>
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</table>

**Aims and objectives**

- To enlighten the audience on the problem of illiteracy
- To highlight the consequences of illiteracy on healthcare
  - Example: the financial burden of health illiteracy
  - Example: unequal initial presentation, outcome of therapy, complication and mortality rates
- To illustrate the problem with urological examples
- To show the audience how to recognise illiterate patients
- To give examples of what can be done to lessen the problem
State-of-the-art Lecture 7

Unlocking the potential of social media in nursing

Room 1, Capital Suite (level 3)

Chair: L. Drudge-Coates, London (GB)

Aims and objectives of this session
The aim of the session will be to give people an understanding of what social media is and how it can be used in nursing and healthcare.

The session will cover the following:
• The rise of social media
• Why social media is valuable for nursing
• How nurses can use social media to inform their practice, as part of their practice, and to share and celebrate their practice
• Social media, CPD and revalidation
• Some signposting on how to get started

09.45 - 09.50
Introduction

09.50 - 10.15
Unlocking the potential of social media in nursing
T. Chinn, Bristol (GB)

Aims and objectives
Social media in nursing is taking off in a huge way - this session aims to explore the potential that has already been realised and the potential that is yet to be unlocked. The session will explore how participants can think differently about social media and use it to inform their work, as part of their work and to share their work.
### EAUN-ESU Course 2

#### 10.30 - 12.30  Urostomy/urinary diversion: Clinical pathway for the management of patients who undergo a cystectomy

**Room 4, Capital Suite (level 3)**

*Chair:* O. Hakenberg, Rostock (DE)

**Aims and objectives of this session**
This session will provide an overview of urinary diversion techniques, their advantages and problems in view of postoperative management and nursing care that these patients will need. This will address issues of complications as well as their prevention.

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<th>Time</th>
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<tr>
<td>10.30 - 10.45</td>
<td>Oncological and non-oncological indications for cystectomy</td>
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<tr>
<td></td>
<td>J.A. Nieuwenhuijzen, Amsterdam (NL)</td>
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<tr>
<td>10.45 - 11.00</td>
<td>Stoma or continent reservoir?</td>
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<td>O. Hakenberg, Rostock (DE)</td>
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<tr>
<td>11.00 - 11.15</td>
<td>What, when and how to explain to a patient everything about a urostomy</td>
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<td>S.P. Fillingham, Kent (GB)</td>
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<tr>
<td>11.15 - 11.30</td>
<td>Continental Urinary Diversion: A patient’s view (Mitrofanoff Support UK)</td>
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<tr>
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<td>K. Rogers, Bournemouth, Dorset (GB)</td>
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<tr>
<td>11.30 - 11.45</td>
<td>Break</td>
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<tr>
<td>11.45 - 12.00</td>
<td>Complications after radical cystectomy</td>
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<tr>
<td></td>
<td>J.A. Nieuwenhuijzen, Amsterdam (NL)</td>
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<tr>
<td>12.00 - 12.15</td>
<td>Follow-up after cystectomy</td>
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<td>O. Hakenberg, Rostock (DE)</td>
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<tr>
<td>12.15 - 12.30</td>
<td>Discussion</td>
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**Thematic Session 14**

**Rare cases and diseases in urology**

**Room 1, Capital Suite (level 3)**

*Chair: S. Vahr Lauridsen, Copenhagen (DK)*

**Aims and objectives of this session**

This session will provide you with the newest knowledge about uncommon conditions that can be found in urology patients. In everyday practice it is often difficult to find literature and practical information about unusual diseases for timely management of such conditions. The speakers of this session will discuss relevant observations, indications and treatment of these cases.

10.30 - 10.50

**Urachuscarcinoma**

M.A. Behrendt, Amsterdam (NL)

*Aims and objectives*

Urachal Cancer is a rare but potentially deadly disease. Multidisciplinary treatment approaches and translational research as well as centralisation in so called ‘tumour centres’ have changed management and survival of these patients. What used to be a rarity, considered fatal, is now proven to be genetically linked to gastrointestinal tumours, thus opening a range of treatment options and changing the therapeutic approach. By using Urachal Cancer I would like to give an example of how next-generation sequencing and multidisciplinary, translational research can improve understanding and outcome for rare diseases in general.

10.50 - 11.10

**Adult hypospadias**

Y.F. Rawashdeh, Århus N (DK)

*Aims and objectives*

This lecture aims at giving the audience insight into the fact that no final word is written on primary hypospadias repair in adults. It is common sense to accept that techniques for repair do not differ between adults and children however sutures, catheters and dressing need to be adapted to the size and the erectile activity of the adult penis. With the increased detection of genital anomalies at a younger age and the advent of microsurgical techniques, virtually most of hypospadias are nowadays diagnosed, and most of them are corrected. Primary adult hypospadias will probably therefore progressively vanish, at least in Western Europe.

11.10 - 11.30

**Penile carcinoma: An update**

N.M. Graafland, Nijmegen (NL)

*Aims and objectives*

To provide an overview of contemporary diagnostic tools and available treatments.
Thematic Session 15

11.45 - 12.45 Urology nurses: Demonstrating our worth to the people who matter

Room 1, Capital Suite (level 3)

Chair: F. Geese, Berne (CH)

Aims and objectives of this session
Nurses, in general, are poor at demonstrating the value of the service we offer to society and to those who pay for health services in particular. A website like www.apollonursingresource.com helps to assist nurses to develop some skills to have a better voice to explain and advocate for the service we offer. This session will present 2 different perspectives on how we as nurses can support and influence each other to become a stronger voice.

11.45 - 11.50 Introduction

11.50 - 12.20 Valuing what we do, so that we can do what we value
A. Leary, London (GB)

12.20 - 12.35 Recognition of urology nurses in the south of Europe
T. Santos, Barreiro (PT)

Aims and objectives
The aim of this presentation is to provide a perspective about the main activities and responsibilities of an urology nurse in the south of Europe, particularly in Portugal. The current reality of nursing education in Portugal will also be introduced.

12.35 - 12.45 Questions and answers
**Special Session**

**13.00 - 13.45  General Assembly**

**Room 4, Capital Suite (level 3)**

The General Assembly (AGM) is open to all delegates. Only Full EAUN Members can vote.

**Chair:** S. Terzoni, Milan (IT)

**Board:**
- S. Vahr, Copenhagen (DK), Chair Elect
- L. Drudge-Coates, London (GB), Past Chair
- P. Allchorne, London (GB)
- S. Borg, Msida (MT)
- L. Söderkvist, Stockholm (SE)
- C. Tillier, Amsterdam (NL)
- J. Verkerk-Geelhoed, Gouda (NL)
- G. Villa, Milan (IT)

**Agenda**
- Welcome by the chair
- Approval of the Minutes AGM 2016
- The report of the chair with presentation of the achievements of 2016/2017
- Report ESUN activities
- Report Finances & Special Interest Groups & Scientific committee
- Call for Social Media Assistant / Nursing Professional
- Acknowledgements
- Open forum (for proposals from the members, cards will be available at the EAUN booth)

**Award Session**

**14.00 - 14.15  Award session**

**Room 4, Capital Suite (level 3)**

**Chair:** S. Terzoni, Milan (IT)

**Agenda**
- First Prize for the Best EAUN Poster Presentation
- Second Prize for the Best EAUN Poster Presentation
- Third Prize for the Best EAUN Poster Presentation
- Prize for the Best EAUN Nursing Research Project

Prize for the Best EAUN Nursing Research Project supported by an educational grant.
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**EAUN Awards**
Prize for the Best EAUN Nursing Research Project - WELLSPECT HEALTHCARE

**Other Contributors**
ASTELLAS
COOK MEDICAL
Abstract and Video Submission
Difficult Case Submission
Research Project Plan Submission

Deadline: 1 December 2017