The Voice of Urology in Canada

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NEWSLETTER OF THE CANADIAN UROLOGICAL ASSOCIATION

SPRING 2014

President's Message



Dr. Peter AndersonPresident
Halifax, NS

recently read Bobby Orr's autobiography and was struck by a point that he made several times: *the critical importance of mentors in his career.* Here was arguably the best hockey player ever to lace up skates, and he was saying that if it were not for the guiding influence of mentors at various stages of his development, he

doesn't think he would have achieved some of the amazing feats that he is famous for accomplishing. If this man, with such outstanding natural talent and motivation, needed mentors to achieve his goals, then surely the rest of us have little chance of reaching our potential without such influence.

According to Patel and Puddester* "mentoring is a developmental partnership through which one person imparts knowledge, skills, experience, and insights to foster the personal and professional growth of a colleague or subordinate." By the way, Dr. Derek Puddester, a dynamic and engaging thinker on the topic of physician well-being, is one of our confirmed speakers at the upcoming Annual Meeting in St. John's, NL. The definition of mentoring provided by Patel and Puddester should have a familiarity to it for any of us engaged in a formal teaching role, but it really has a much broader application beyond medical school and post-graduate training. I have often heard from newly graduated colleagues that the first few years of practice were difficult due to situations that their training did not prepare them to manage. This is not a criticism of training programs, but rather simply an acknowledgement that it is impossible to ensure that every scenario is taught and learned during a 5-year residency. I cannot help but ask myself: Where were the mentors for these individuals once they started practice?

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We should all see mentoring as an important career-long responsibility and asset, which becomes more valuable as we gain experience. We should also be teaching mentoring skills to our medical students and residents, with the expectation that they will practice them throughout their career. We already know that mentoring occurs at every stage of training: "See one, do one, teach one" is an expression that we have all experienced in real life, but we do not often acknowledge the importance of this mentoring. If we demonstrate by our own actions that mentoring is a professional responsibility, everyone will benefit, including our patients.

The 2014 Annual Meeting is fast approaching; have you booked your hotel room yet? All indications are that this will be a highly attended event. The only other time that the meeting was held in St. John's, which was in 2002 when Jim Wilson was President, is remembered as "one of the best" by those who attended. Your co-chairs of the Scientific Program Committee, Greg Bailly and Tom Whelan, have lined up a busy schedule of learning, with 10 State-of-the-Art lectures by world renowned experts and 8 Educational Forums on topics relevant to your daily practice. Of course the meeting will also be a

showcase of original Canadian research presented at the podium and poster sessions.

At the end of an exciting day of learning you will just be getting started, as the social program that Local Organizing Committee Chair, Chris French, has in store for you is guaranteed to make you laugh and dance your evenings away. We have booked our Fun Night as a "Rally in the Alley" on George Street, which is famous for having the most pubs per square foot of any street in North America (that's right: more than New Orleans). The legendary friendliness of Newfoundlanders is not a myth, and we will provide opportunities for you to experience that reality for yourself. St. John's is a compact city and our meeting hotels are right in the centre of where you'll want to be during your stay. The meeting will end on July 1st, so if you stay an extra night you'll be able to celebrate Canada Day before anyone else in the country. This is not the meeting to skip, so make sure someone else is on call for June 28 to July 1, 2014.

* Patel H, Puddester D. *The Time Management Guide: A practical handbook for physicians by physicians*. Ottawa: Royal College of Physicians and Surgeons; 2012:152.

Notice of the CUA & CUASF Annual General Meetings (AGM) and Special Meetings



Date: June 30, 2014 from 16:00 to 17:30

Location: Delta St. John's and Conference Centre, St. John's, NL

Attendees: Active and Senior CUA Members only

A Special Meeting is being called at the time of the AGMs of the CUA and CUASF as the Membership needs to adopt/approve the following items:

- 1. DRAFT 2014 CUA Articles of Continuance
- 2. DRAFT New edition of the 2014 CUA Bylaws*
- 3. DRAFT First edition of the 2014 CUA Policy Book*
- 4. DRAFT 2014 CUASF Articles of Continuance
- 5. DRAFT New edition of the 2014 CUASF Bylaws⁺

These documents, along with the previous versions of the bylaws and summaries of the proposed changes, are available for review on the "Members Only – View documents – Bylaws" site of the CUA Website **www.cua.org**. They must be approved at the Special Meetings in June 2014 in order to be submitted to the Government of Canada by the October 2014 deadline. Therefore, if there are any proposed changes that you feel will prevent your approval or the Membership's approval at the AGM, please bring your concerns to the attention of Dr. Karen Psooy, CUA Secretary (**secretary@cua.org**) as soon as you identify them so appropriate revisions may be incorporated prior the meetings.

*See Bylaws Report in this Newsletter for a summary of proposed changes. (see page 5)

*See CUASF Report in this Newsletter for a summary of proposed changes. (see page 11)

Secretary's Report



Dr. Karen Psooy Secretary Winnipeg, MB

The CUA continues to move forward, implementing previously approved proposals and discussing new ones. To provide us with a road map for future proposals, we are working on the finishing touches of the new 2014-2019 CUA Strategic Plan. Thanks to all the members who completed the needs assessment survey, and congratulations again to Drs. Karakiewicz, Levine and Klinghoffer for winning the participant draw! I trust they enjoyed their shopping sprees.

Regarding implementation of changes, the new International Membership category has been looked on favourably by our US Members, with approximately one-third of our US urologist-Members making the switch from Active Membership. With Associate Membership now being a dues-paying category, the CUA will continue to strive to provide value to *ALL* members.

The 2014 Winter Executive Committee (soon to be referred to as "the Board") Meeting took place in Montreal at the end of January, with Dr. Peter Anderson chairing as President. The meeting ran smoothly and attendance was very good, with all but one Committee chair present to give their report in person. The highlight of my Membership Report was that overall CUA Membership continues to grow, with 55 new applications presented for approval! As to the highlights of the other reports given, I will leave that to the CUA Committee chairs and officers. However, I do ask that our Active and Senior Members pay special attention to the reports of the CUA Bylaws Chair and CUASF Administrative Council Chair included in this newsletter. We ask that you provide us with feedback regarding the proposed CUA and CUASF Bylaws changes well in advance of the AGM – the President's ability to adjourn the AGM on time and let the attendees get ready for the President's Gala in Newfoundland depends on it! Hope to see you in St. John's! 🌞

Members without Contact Information - Your Help Requested

The number of members for whom we have lost contact is down, however, a few persist. Your help would be most appreciated. If you have any contact information on these members, please email the CUA Secretary at secretary@cua.org or phone Ms. Denise Toner at (514) 395-0376, ext. 42.

Member	Category	Identifying clues	Last sighting
Dr. Mana Al-Assiri	Candidate	_	Riyadh, KSA
Dr. Denise Arsenault	Inactive	Retired Urologist	QC
Dr. John L. Bishop	Senior	Retired Urologist	_
Dr. J.J. Bourgouin	Senior	Retired Urologist	_
Dr. Peter Owen Crassweller	Senior	Retired Urologist	Port Carling, ON
Dr. A. Emerson Dunphy	Senior	Associate	Ingonish, NS
Dr. Mark Hares	Senior	Retired Urologist	Timmons, ON
Dr. William Jacobson	Associate	_	_
Dr. Richard W. Johnson	Associate	MD	_
Dr. Uri Lindner	Candidate	UT Fellow (-2013)	Toronto, ON
Dr. Gary Mackie	Senior	Urologist	_
Dr. David Margel	Candidate	UT Fellow (-2013)	Toronto, ON
Dr. David A. McLeod	Senior	Urologist	Washington, DC
Dr. Charles Frederick Pearce	Senior	Retired Urologist	Windsor, ON
Dr. Bernard B. Robinson	Senior	Urologist	_
Dr. Palma Rocchi	Associate	Researcher	Marseille, France
Dr. Wen-Rong Sun	Associate	_	Tianjin, China
Dr. Brian Edward Tomka	Senior	Retired Urologist	Sarnia, ON
Dr. John A. Webster	Senior	Retired Urologist	Yarmouth, NS
Dr. Malcolm L. Wilson	Inactive	_	Kelowna, BC
Dr. Jae-Hyuk Yoo	Associate	Physician	Vancouver, BC

CUA Bylaws Committee Report

Dr. Stuart Oake, President-Elect, Chair, Bylaws Committee | Ottawa, ON

he Bylaws Committee has had a busy year. The CUA filed for Not-for-Profit (NFP) Corporation status in the mid-1990s and has maintained this status since. Industry Canada has since established the new Canadian NFP Corporations Act which replaces Part II of the Canada Corporations Act, the Act that historically governed the structure and content of the CUA Bylaws. The new NFP Act required a complete rework of the CUA Bylaws. The intent of the Act is to provide NFP Corporations with more governance flexibility with Bylaws that are better suited for the NFP sector. The new proposed CUA Bylaws will therefore be: NFP Act compliant, streamlined, and have content that is specific to Corporate Governance requirements.

In order to be compliant with the NFP Act, the Bylaws Committee has moved Bylaw articles that are not required for NFP compliance and placed them in a newly established Policy Book. The new Policy Book will contain historical Bylaw articles that are specific to CUA governance and are critically important to the functional governance of our Association. Policy Books are not required to be reported and approved by Industry Canada, in contrast to our Bylaws.

Along with the reworking of our Bylaws and the creation of the new Policy Book, the CUA has made multiple changes that are reflected in our Bylaws and the first version of our Policy Book. The following is a list of relevant changes reflected in both governing documents.

Highlights of the changes made in the 2014 CUA Bylaws DRAFT:

- 1. Nomenclature:
 - a. The previously known "CUA Executive Committee" will now be referred to as the "CUA Board of Directors" or "the Board."
 - b. The previously known "CUA Core Executive Committee" will now be referred to as the "CUA Executive Committee" (composed of the CUA Officers).
- 2. Bylaws amendments:
 - a. The Board may approve and implement changes to the by-laws at any time. These changes must be approved by the Membership at the AGM. If they are not approved, the changes are reversed.
 - Previously, changes proposed by the Board could only be implemented following approval by the Membership at the AGM.
 - b. By-laws amendments may be approved by the majority vote of the Membership (previously 2/3 vote).
- 3. The CUA must notify Members of their ability to access CUA's annual financial statements.
- 4. The Membership may remove a Director from the Board through 2/3 vote, and elect a replacement.
- 5. The Board may remove a Director by majority vote.

- 6. A CUA Policy Book will keep all procedural information that previously was contained within the CUA Bylaws. That which is contained within the Policy Book will be amended and approved by the Board and the Membership in the same manner as described for the Bylaws.
- The Prize Essay Committee has been dissolved, with the functions being transferred to the Scientific Program Committee.
- 8. Loss of contact information for two years is grounds for removal of a non-dues paying Member.
- 9. Electronic communication has been incorporated into the Bylaws.

Highlights of changes contained within the 2014 CUA Policy Book DRAFT

- 1. The CUA President, Treasurer and Secretary will also serve as the CUASF President, Treasurer and Secretary.
- 2. A "President's International Travel Policy" has been added.
- For dues-paying membership categories, full access to benefits of Membership will only commence after receipt of dues.
- 4. For dues-paying membership categories, full access to benefits of Membership will be withheld from Members who are in arrears.
- 5. Changes regarding the Nominating Committee:
 - a. The nomination for the Vice-President should be based primarily on merit, and not on regionalization or other factors.
- 6. Changes regarding the Finance Committee:
 - Multiple changes were made to reflect the current business of the committee.
- 7. Changes regarding the Socioeconomics Committee:
 - a. Flexibility had been added to the membership in order to address the various tasks.
- 8. Changes regarding the Scientific Program Committee:
 - a. The membership will include regional and subspecialty representation, and at least 1 non-academic urologist.
 - b. "The Prize Essay Award" will now be called the "The Prize Manuscript Award" and only Candidate Members who are first authors of the manuscript may apply.
- 9. Changes regarding the Continuous Professional Development Committee:
 - a. The chair will serve for 4 years (previously 5).
- 10. Affiliates must provide the CUA with updated copies of their constitutional documents upon request.

To review the 2013 CUA Bylaws and the 2014 CUA Bylaws DRAFT and Policy Book DRAFT, please go to the "Members Only - Documents - Bylaws" section of the CUA website www.cua.org.

Office of Education Report



Dr. Gerry BrockVice-President, Education
London, ON

The CUA Office of Education (OE) continues to be extremely busy, it has successfully reached a record number of programs: OVER 50 in one calendar year!

If you are interested in claiming credit for our programs, please log into the CUA website in the members only section, in the CPD section.

In accordance with our strategic plan, the CUA OE is also persistently reaching out to other groups:

Primary Care Physicians (PCPs)

CUA Primary Care Comprehensive Urology Review is in full swing and has already attracted over 200 family practitioners across Canada!

Ottawa

Tuesday, March 4, 2014 Ottawa Marriott Hotel Chair: Dr. Anthony Bella CUA Invited Speakers: Drs. Duane Hickling and Stuart Oake

Vancouver

Monday, March 10, 2014 Hilton Vancouver Metrotown Hotel Chair: Dr. Anna Wolak CUA Invited Speakers: Drs. Peter Black, Alan So, and Brian Yang

Mississauga

Monday, March 24, 2014 Delta Meadowvale Hotel & Conference Centre Chair: Dr. Alan Bell CUA Invited Speakers: Drs. Jack Barkin, Tony Finelli, and Ethan Grober

Calgary

Monday, March 31, 2014 The Westin Calgary Chair: Dr. Richard A. Ward

CUA Invited Speakers: Drs. Kevin Carlson and Jay Lee

At press time there are 2 more cities to roll out: Halifax and Montreal. The goal of the programs is to reduce the number of incorrect referrals by disseminating the most advanced urological information as well as inviting this group to become associate members of the CUA.

Thanks to our sponsors for their continuous support:







Non-academic Urologists

As a follow-up to the 1st CUA Community Advisory Board Meeting held in Niagara Falls in June 2013, the CUA assembled a second panel of non-academic urologists to meet at the Winter Executive meeting in Montreal in January 2014.

The group was led by Drs. Jack Barkin and Lorne Aaron who, along with several urologists from across Canada, met with our strategic planner to ensure that their needs were implemented into the next phase of our 5-year plan.

From this meeting, the CUA OE understands that we should continue to work on:

- Developing communication techniques for non-academic urologists.
- Making sure that residents get sufficient community exposure.
- Establishing standards for medical care.
- Providing the opportunity to interact with key opinion leaders.
- Managing membership as a more active process.

As a result of their input, we have organized the following events to meet their needs:

2nd Annual CUA-CUOG GU Cancers Multidisciplinary Meeting (see Page 8)

In conjunction with this program, the CUA is looking to leverage a genitourinary (GU) cancers tool that all community urologists will be able to access and enter cases and receive feedback as to whether they meet CUA guidelines. There are further plans to establish a private blog on the new CUA website for uro-oncologists to exchange information on GU cancer cases.

1st CUA Instructional Course: Better BOTOX

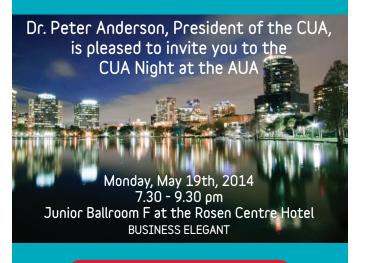
- From patient prep to injection protocols (see Page 8)

This hands-on course will provide participants the opportunity to practice their skills at injecting Botox for overactive bladder. The Executive is investigating several other educational initiatives to meet the needs of this group.

General Public - Patients

In addition to the development of the *Consumer's Guide to Urology*, the OE is developing a series of patient consent videos.





Come visit our CUA booth #426

AUA Annual Meeting
May 16-21, 2014 • Orlando, FL, USA



The Voice of Urology in Canada

Reaching Out Internationally

CUA-EAU Visiting Professor Program June 2014

As part of an ongoing educational exchange between the Associations, the CUA will host our visiting European urologists this coming June.

The following centres have been selected to host our visitors:

The Schulich School of Medicine & Dentistry

Western University

London, Ontario

Department of Urology Dalhousie University

Halifax, Nova Scotia

University of Toronto Toronto, Ontario

CUA will welcome:

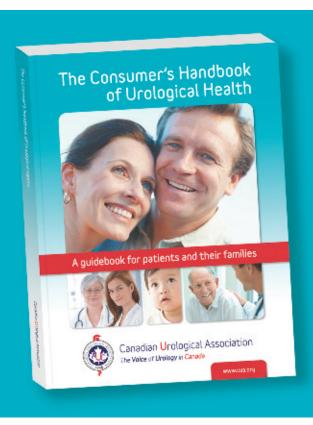
Senior Advisor, Professor Andrzej Borkowski from Warsaw, Poland along with 3 fellows; Professor Frank Van der Aa from Belgium, Dr. David Pfister and Dr. Georgios Gakis from Germany.

The Annual European Urology Residents Education Exchange Program (EUREP) 2014

We will welcome Dr. Thomas Roza from Belgium who will attend the CSUR Scientific Retreat and the Laparoscopic Skills course followed by the 69th Annual Meeting of the CUA.

CUA-USANZ Resident Exchange Program 2014

Two Urological Society of Australia and New Zealand (USANZ) residents will join us at the 69th Annual Meeting.



\$25

taxes and shipping included

To order your copy Visit www.cua.org for a printable version of the order form.



The Voice of Urology in Canada

CUA NEWS 7 SPRING 2014

A Message from the Scientific Program Chairs

Dr. Gregory Bailly, Halifax, NS; Dr. Thomas Whelan, St. John, NB | Co-chairs, Scientific Program Committee

The Scientific Program Committee for the 69th Annual Meeting of the Canadian Urological Association has been busy finalizing the invited speakers and topics for this June. We are pleased to introduce the following confirmed speakers:

Pediatric Urology - **Dr. Anthony Caldamone**, Professor of Surgery (Urology) and Pediatrics, Alpert Medical School, Brown University; Director of Pediatric Urology, Hasbro Children's Hospital, Providence, RI

Physician Wellness - **Dr. Derek Puddester**, Associate Professor, Department of Psychiatry; Special Project Lead, Innovation & Evaluation, Postgraduate Medical Education, Faculty of Medicine, University of Ottawa, Director, Physician Health, Canadian Medical Association, Ottawa, ON Endourology and Stone Disease - **Dr. Glenn Preminger**, Professor, Chief of Urology, Department of Urology, Duke University Medical Center, Durham, NC

Male Sexual Health and Infertility - Dr. Laurence A.
Levine, Professor, Department of Urology, Rush University
Medical Center, Chicago, IL; Uropartners, LLC, Chicago, IL
Oncology - Dr. Axel Heidenreich, Professor, Department
of Urology, RWTH Aachen University, Aachen, Germany

Oncology - **Dr. Surena Matin**, Associate Professor, Department of Urology; Medical Director of Minimally Invasive New Technology in Oncologic Surgery (MINTOS) Multidisciplinary Program, University of Texas M.D. Anderson Cancer Center, Houston, TX

BPH and Male LUTS - **Dr. Mark J. Speakman**, Consultant, Urological Surgeon, Department of Urology, Taunton & Somerset NHS Trust Hospital, Taunton, Somerset, UK

Female Urology and Pelvic Floor Reconstruction - Dr. Eric S. Rovner, Professor, Department of Urology, Medical University of South Carolina, Charleston, SC

Oncology - **Dr. Daniel W. Lin**, Professor, Chief of Urologic Oncology, Department of Urology, Bridges Endowed Professorship in Prostate Cancer Research, University of Washington, Seattle, WA

Each invited speaker will give a State-of-the-Art Lecture and, along with Canadian content experts, will participate in an educational forum. The topics have been specifically chosen for their relevance to CUA members in attendance and to highlight the speakers' areas of expertise.

As well, there will be ample opportunity to review a wide array of new and exciting Canadian research. These abstracts will be showcased during podium sessions, moderated and unmoderated poster sessions. Late breaking abstracts, Prize Essays and the annual CUASF lecture will round out the program. Each morning "clinical pearls that could change your practice" will review the previous day's program.

We are excited to present this scientific program and look forward to seeing you in Newfoundland! *

CUA 2014 Scientific Program Committee

Co-chair, Gregory Bailly, Halifax, NS Co-chair, Thomas Whelan, Saint John, NB

Sero Andonian, Montreal, QC Anthony Bella, Ottawa, ON Rodney Breau, Ottawa, ON Ben Chew, Vancouver, BC Ethan Grober, Toronto, ON Jonathan Izawa, London, ON Paul Johnston, St. John's, NL Anil Kapoor, Hamilton, ON Rodrigo Romao, Halifax, NS Keith Rourke, Edmonton, AB Alan So, Vancouver, BC

NEW for Members!

The 2nd Annual CUA-CUOG Multidisciplinary GU Oncology Meeting (with members from CAGMO, GUROC & CNUP)

Registration Fee: \$25 for CUA members Saturday, June 28, 2014 from 10:30 to 15:30 Sheraton St. John's, NL Lunch is included in the registration fee.

cuameeting.org

CUA Instructional Course: Better BOTOX - From patient prep to injection protocol

Registration Fee: \$25 for CUA members Saturday, June 28, 2014 from 10:30 to 14:30 Sheraton St. John's, NL

Lunch is included in the registration fee.

The 2014 CUA Scientific Program Grid

Saturday,	Juno 29	1630-1730	Podium Session 2: Pediatrics	
-		1030 1130	Podium Session 3: Endo/Simulation/Education	
0900-1830	Registration Open	1900-2300	CUA FUN NIGHT	
1600-1650 Educational Forum 1: CaPCan II: A tool to take the Canadian Urologist to the next level of CRPC management. Chair: Fred Saad		Monday, June 30		
1650-1740	Educational Forum 2: New Challenges in Caring for the Patient with CRPC: Tips and Tools for the Busy	0630-1630 0800-1500 0730-0900	Registration Open Exhibit Hall Open Moderated Poster Session 1: Prostate Cancer	
1740-1750	Urologist. Chair: Alan So ASAP Survivorship Program Presentation Joseph Chin	0100 0700	(OR/Active Surveillance/Miscellaneous) Moderated Poster Session 2: Pediatrics Moderated Poster Session 3: ED/Infertility	
1750-1840	POSTER RECEPTION	0900-0910	Clinical Pearls That Could Change Your Practice	
Sunday, June 29		0910-0940	State-of-the-Art Lecture 5: Selection of Patients	
0630-1730	Registration Open		for Active Surveillance. Daniel Lin	
0800-1700	Exhibit Hall Open	0940-1000	Break in Exhibit Hall	
0730-0740	Welcome Address Peter Anderson, Greg Bailly, Tom Whelan	1000-1050	Educational Forum 7: Improving Safety and Accuracy of Prostate Diagnosis. Chair: Rodney Breau	
0740-0810	State-of-the-Art Lecture 1: Is There Still a Role for the Medical Management of Nephrolithiasis in the	1050-1150	Podium Session 4: Oncology (Prostate/Bladder/Testes)	
	Age of Lithotripsy? Perspective from the AUA	1150-1250	Lunch in Exhibit Hall	
	Guidelines Panel. Glenn Preminger	1250-1255	Introduction to the EAU President	
0810-0900	Educational Forum 3: Medical Management of Stones: A Case Based Approach. Chair: Ken Pace	1255-1300	EAU Presidential Address	
0900-0930	Break in Exhibit Hall	1300-1330	State-of-the-Art Lecture 6: LUTS/BPH Terminology - Stop the Confusion. Mark Speakman	
0930-1000	State-of-the-Art Lecture 2: Neoadjuvant Chemotherapy for UTUC: Rationale and Outcomes of a New Paradigm. Surena Matin	1330-1420	Educational Forum 8: Male LUTS/BPH: New Paradigms for Prediction, Prevention and Management. Chair: Curtis Nickel	
1000-1050	Educational Forum 4: Urothelial Carcinoma: Strategies for Upper Tract Surveillance, Management of Postoperative Urinary Diversion Complications and Contemporary Use of	1420-1450	State-of-the-Art Lecture 7: Treatment of Peyronie's Disease: What's New and What Works Laurence Levine	
	Biomarkers. Chair: Jonathan Izawa	1450-1510	Break in Exhibit Hall	
1050-1150	Podium Session 1: Oncology (Kidney)	1510-1600	Educational Forum 9: Management of Scrotal Pain Chair: Ethan Grober	
1150-1250	Opening Brunch in Exhibit Hall	1600-1730	CUA Annual General Meeting	
1250-1320	State-of-the-Art Lecture 3: Does One Sling Fit All or Not? Sizing up SUI in 2014. Eric S. Rovner	1900-1930	PRESIDENT'S COCKTAIL	
1320-1410	Educational Forum 5: Innovations in Functional	1930-2300	PRESIDENT'S BANQUET	
1320-1410	Urology. Chair: Sender Herschorn	Tuesday, J	Tuesday, July 1	
1410-1415	Introduction to the AUA President	0630-1415	Registration Open	
1415-1420	AUA Presidential Address William F. Gee	0730-0915	Moderated Poster Session 4: Stones/ Endo/transplant	
1420-1450	CUASF Lecture Ron Kodama		Moderated Poster Session 5: Education/Economics/Technology	
1450-1510	Break in Exhibit Hall		Moderated Poster Session 6: Bladder Cancer	
1510-1540	State-of-the-Art Lecture 4: Putting the Undescended Testicle in its Place! Anthony Caldamone		Moderated Poster Session 7: Functional Urology (Incontinence/Urodynamics/LUTS/Neuro)	
1540-1630	Educational Forum 6: Point/Counterpoint: Ideal Surgical Management for Congenital Duplication Anomalies - Upper or Lower Urinary Tract Surgical Approach? Chair: Rodrigo Romao	0915-0925	Moderated Poster Session 8: Prostate (Diagnosic/ CRPC/ Radiation Therapy/ BPH/Laser) Moderated Poster Session 9: Kidney Cancer Clinical Pearls That Could Change Your Practice	

Continued on page 10

Scientific program continued from page 9 1145-1215 State-of-the-Art Lecture 9: The Role of Radical

0925-0955 **State-of-the-Art Lecture 8: Physician Health:**

Prostatectomy in the Management of Locally **Advanced and Metastatic Prostate Cancer Keeping You Out of Court, Connected with Your** Axel Heidenreich Family, and Happy with Your Life. Derek Puddester

0955-1015 Break in Fover

Podium Session 5: Functional 1015-1145

Urology(Incontinence/Neurology/LUTS/Men's

Health)

1215-1345 Lunch and Educational Forum 10: Challenging

Decisions and Debates in Renal Cell Carcinoma

Chair: Anil Kapoor

1345-1415 Closing Ceremonies

Update from the CUASF Scientific Council Chair



Dr. Ricardo Rendon Chair, CUASF Scientific Committee Halifax, NS





The CUA Astellas Research Grant Program was created in 2011 to support peer-reviewed research that promotes excellence in urology research with the ultimate goal of improving patient care. In 2013, grants were awarded to the following:

Kourosh Afshar

University of British Columbia

Voiding disorders and autonomic NS activity in children

Sumit Dave

Western University

A clinical trial to determine the extent to which probiotic therapy reduces side effects of antibiotic prophylaxis in pediatric neurogenic bladder patients with a history of recurrent urinary tract infections

Alp Sener

Western University

A novel delivery method of supplemental hydrogen sulphide and caspace-3 siRNA during mechanical perfusion are protective in a donation after cardiac death model of porcine renal transplantation

For the 2014-2015 program, 3 awards of \$50000 each will again be awarded. The review process is currently underway and award recipients will be announced at the Annual Meeting in St. John's, NL.





In recent years, the CUASF has expanded to administer a number of additional research grant programs. This year, we are pleased to highlight our ongoing collaboration with Astellas Pharma Canada in developing the CUA-CUOG Research Grant Program. This program will award 4 research grants, 2 grants of \$50000 each and 2 grants of \$25 000 each, in support of research in the area of prostate cancer.





The first ever CUA Pfizer Incontinence Fellowships were awarded in 2013. This Fellowship program was created to facilitate scientific discovery and innovation in urology in Canada. The CUA Pfizer Incontinence Fellowships were awarded to:

Rahul Kumar Bansal

McMaster University

Bladder training video: Urotherapy trial

Daniel Yanko

Vesia [Alberta Bladder Centre]

Developing a registry of overactive bladder patients

Two fellowships of \$60000 each will be awarded for 2014-2015. The deadline for the CUA Pfizer Incontinence Fellowship was April 1, 2014. Award recipients will be announced on June 30, 2014 at the President's Reception and Banquet during the CUA Annual Meeting in St. John's, NL – we hope to see you

Over the past year, the CUA has disbursed a total of \$405 000 in research grants and fellowship funding. The CUA is proud to support urology research in Canada.

Update from the CUASF Administrative Council

Dr. Robert Siemens, Chair, CUASF Administrative Council | Kingston, ON

inally, the CUASF Bylaws needed to be rewritten to be compliant with the new Not-for-Profit Act. The last bylaw revision was in 1997, so a number of changes reflect what has been current practice for some time, while there are also a few more radical changes. A final draft needs to be approved by members at the AGM in June 2014.

Highlights of the changes made in the 2014 CUASF Bylaws DRAFT:

- 1. Nomenclature:
 - a. The CUASF Executive Committee will now be referred to as the CUASF Board of Directors.
- 2. CUASF Board of Directors composition:
 - a. There are now 5 Directors, which consist of 3 Officers (President, Treasurer and Secretary) and the Administrative Council Chair and Scientific Council Chair.
 - Previous composition was President, Secretary, Member-at-Large, Administrative Council Chair & Scientific Council Chair.
 - b. The CUA President, Treasurer and Secretary are the CUASF President, Treasurer and Secretary respectively, by default.

- 3. Administrative Council membership:
 - a. The membership may be as small as only 1 member (the Chair), or larger if determined by the Chair.
 - i. Previous composition was the Administrative Council chair, the CUA Treasurer and 3 individuals.
- 4. Scientific Council membership:
 - a. The membership now consists of 7 members.
 - i. Previous composition was 5 members.
- 5. Process for Bylaws amendments:
 - a. The Board may approve and implement changes to the bylaws at any time. These changes must be approved Membership at the AGM. If they are not approved, the changes are reversed.
 - Previously, changes proposed by the Board could only be implemented following approval by the Membership at the AGM.

To review the 1997 CUASF Bylaws and the 2014 CUASF Bylaws DRAFT, please go to the "Members Only - Documents - Bylaws" section of the CUA website www.cua.org. Comments should be forwarded to the CUASF Secretary, Dr. Karen Psooy at secretary@cua.org.

CUA Historian Report

Dr. Jerzy Gajewski, CUA Historian | Halifax, NS

S ince becoming CUA historian I have focused my attention on the history of CUA as an organization rather than the history of urology in general. My first step was to review, organize, catalogue and file old CUA documents. There were 5 boxes of old documents at the CUA Corporate Office, which are now reviewed, catalogued and stored in a designated file cabinet. Six more boxes will be delivered from the archives of the Department of Urology at Queen's University by Dr. Jim Wilson, a previous CUA Historian. I have also contacted the Canadian Medical Association (CMA) for permission to access their archives. CUA was organized as a section of the CMA for the first few years of its inception.

Other projects include:

- The collection of the historical publications related to Canadian urology;
 - The Canadian Urological Association (N. Struthers)
 - Urology in Ottawa Valley (W.E. Collins)
 - The History of Urology in Nova Scotia (W.A. Ernst)

- Histoire de l'urologie montréalaise (J. Charbonneau)
- From retrograde pyelography to robotic prostatectomy: History of urology at the University of Western Ontario (J. Chin)
- The gathering of CVs and obituaries archives of Canadian urologists.
- The gathering of electronic archives in cooperation with Central Office and Information Technology Chair, Christopher Nguan. We are hoping to establish a web-based central electronic archive.
- The starting of a major project 2015 CUA 70th meeting on the "Milestones in Canadian Urology."

Future projects include:

- The creation of an exhibition of donated old urological instruments and books at our CUA Corporate Office.
- A project with AUA historian, Dr. Rainer Engel "Canadians at AUA & Americans at CUA."

If you have any historical documents or photographs, please send them along to the CUA Corporate Office.

Competence: Expectations, Perceptions and Reality. How do we align all three?



Dr. Andrew MacNeily Chair, CUA Post-graduate Training Committee and Chair, Chair of the Royal College Urology Specialty Committee Vancouver, BC

What is a "General Urologist"? What procedures should trainees be compatible. should trainees be competent to perform independently upon graduation from our residency programs? How and by whom is competence assessed? These are some of the complex questions that your Postgraduate Educational Committee struggles with. This committee regularly reviews and revises the objectives of training in urology. However, what we expect graduates to be competent to perform, what graduates perceive they are competent to perform, and what graduates actually are competent to perform can be quite disparate. Two provocative surveys addressing these questions were performed by the McGill group and presented at our Annual Meeting last June in Niagara Falls. Some findings included that recent graduates perceived that they were not competent to perform many procedures that we traditionally had expected they would. Likewise many faculty members from across Canada perceived that their graduating residents were not competent to perform many of these same procedures. The conclusion was that we need to revise our objectives of training.^{1,2} Or do we? Perhaps we need to revise our training model. De facto, with 90% of our graduates now pursuing post-residency fellowship training, we already have, in a sense, revised our training. While we do not have a two-stream system of training that exists in some European countries, we have graduates pursuing additional training in various sub-specialties and technical applications to stay apace of disruptive innovations, such as laparoscopy and robotics. Urology as a specialty is not alone in grappling with defining a core set of technical competencies: A task force on the future of general surgery just released their report on that discipline's future in Canada.3 After a 2 year indepth review of the specialty, the report outlined a series of recommendations intended to transform general surgery residency training to ensure a strong relationship between training and eventual practice. One key recommendation was the creation of "enhanced areas of expertise." This may take the form of tailored training during residency based on one's projected field of practice, or with additional fellowship training and subsequent Areas of Focused Competence (AFC)

diplomas. In addition, the report highlighted the importance of Competency Based Medical Education (CBME).⁴

As the chair of the Post-graduate Educational committee, I attended a 2-day meeting at the Royal College in November 2013 on the upcoming implementation of CBME. This new educational paradigm is known as the Competence by Design initiative. It is unclear what shape it will ultimately take, but there will be a de-emphasis on the Final In-Training Evaluation Report and the examination process; it will ultimately focus on how learners are meeting their set "milestones" throughout the course of their training. The Post-graduate Educational committee will be tasked with creating these milestones according to a Royal College template. All of our objectives of training will need to be re-written in the new milestones format. Long overdue ecase logs and e-portfolios for our residents will become mandatory in the next 2 to 3 years. As a result, increased faculty time and more frequent input using multiple evaluative tools will be required to assess residents. Clearly there will be a need for faculty development so that the teachers are capable of adapting to this new form of Post-graduate medical education. We will also need to de a better job of engaging the two-thirds of CUA members who practice outside of residency training centres. We need to determine what core competencies they require of recent graduates for safe and independent practice. We are entering interesting times in Postgraduate medical education.

I encourage you to read these reports in greater detail.

- 1. Bachir BG, Aprikian A, Kassouf W. Are Canadian urology residency programs fulfilling Royal College expectations? A survey on graduated chief residents. *CUAJ* 2014; Volume 8, Issues 3-4.
- 2. Haddad R, Kassouf W, Andonian S, et al. Royal College Objectives of Training: A survey of faculty members from Canadian training programs. *CUAJ* 2013; Volume 7, Issues 5-6.
- 3. The Future of General Surgery: Evolving to meet a changing practice. Available at: www.royalcollege.ca/portal/page/portal/rc/advocacy/educational_initiatives/futuregeneral_surgery. Accessed February 28, 2014.
- 4. Competence by Design (CBD). Available at: www.royalcollege.ca/portal/page/portal/rc/resources/cbme. Accessed February 28, 2014.

Social media has come of age at the CUA!

The CUA Annual meeting in Niagara saw a 10x increase in Twitter activity this past year. #cua2014 is active so please join us and follow CUA online. @CanUrolAssoc is the official



Dr. Christopher Nguan Chair, IT Committee Vancouver. BC

handle of the CUA on Twitter. Rajiv Singal (Toronto East General Hospital) has joined us on the CUA IT Committee and is working in conjunction with committee member Mike Leveridge (Queen's) in expanding the CUA social media presence to further the Association's mission to be the "Voice of Urology in Canada."

Stay tuned for the official launch of the new, revamped CUA website!

Finally, the IT Committee would like to solicit ideas from members as to what IT projects you believe the Association should initiate. These could take the form of social media integration, mobile apps, website functionality, eHealth initiatives, etc. Please send all your suggestions to: cua@nguan.ca

Socioeconomic Committee Report

Dr. Sidney B. Radomski, Chair, CUA Socioeconomic Committee | Toronto, ON

s has been well-publicized recently, there is a real concern regarding the job situation for many surgical specialties including urology. Last year the Socioeconomic Committee (SEC) determined the number of actively practicing urologists in Canada and the future job situation for our newly minted urologists. At that time it appeared stable. The SEC and the CUA continue to monitor the situation closely. In the last 6 months the SEC examined the resources (cystoscopy and operating time, research time etc.) given to newly appointed urologists in academic and non-academic centres. This was done in Ontario with a summary of some of the results highlighted in the box to the right. In the next 6 months the same data will be determined for Alberta and BC. Also, in Ontario, we will examine the resources given to established urologists in academic and non-academic centres and

compare them to that of newly established urologists. This data will give recruits and recruiting urology centres some idea of what young and new urologists can expect when starting out their practice.

All of the data will be presented at the CUA Annual Meeting in June 2014.

	Academic	Non-academic
Cysto time	2.67 days/month	3.75 days/month
OR Time	4.89 days/month	4.54 days/month
Office	7/9 hospital (all 7 subsidized)	14/14 outside hospital (10/14 sharing) (1 in hospital also subsidized



New look for our Patient Information Brochures

In keeping with our new branding, we have taken the initiative to revamp our brochures to unify this look and to reinforce that CUA is "The Voice of Urology in Canada."

Look for these new brochures in your offices soon!

Corporate Office Update



Tiffany Pizioli Executive Director Montreal, QC

n the past 2 years, the team at the CUA Corporate Office has grown to respond to the increasing needs of the Association. Located minutes from Trudeau airport in Dorval, the CUA headquarters houses a dedicated and experienced team of 7 people who serve members on a daily basis.

The Office of Education (OE) is supported by Catherine Millar and Nadia Pace, who work alongside Dr. Gerry Brock (VP Education) and me to develop and organize educational events, including the Annual Meeting. The number of programs created in the OE has reached a record number of 50+, and many events are still ongoing at the close of our fiscal year end approaching in April 2014. With the elimination of co-development with industry as it relates to the development of educational programs, Catherine Millar works closely with Dr. Ben Chew (CPD Chair) and the Royal College of Physicians and Surgeons of Canada (RCPSC) to ensure that the CUA continues to uphold its status as a leader in the creation of unbiased programs. In addition to managing projects, Nadia Pace works with Dr. Wassim Kassouf (VP

Communications) to ensure that the CUA brand is properly marketed and that the CUA continues to be associated with "The Voice of Urology in Canada."

CUAJ continues to thrive under the editorial direction of Josephine Sciortino, who has been with the journal since its inception. Together with Dr. Robert Siemens (Editorin-Chief), Josephine has worked hard to increase the journal's impact. The annual number of manuscripts received has surpassed 400. With the advertising support being handled by Denise Toner, the journal has become financially sound despite the downward trend in advertising.

In addition to her advertising duties, Denise Toner also supports the membership and along with Dr. Karen Psooy (Secretary), she has efficiently managed the database and increased membership.

With 4 divisions under the CUA (Annual Meeting, OE, CUAJ, and Corporate Office) and more than 50 projects, Raffaella Leroux supports the office with her administrative expertise. She coordinates the patient information brochures and vets all requests through the corporate office.

This year we welcome the addition of Corey Golfman, accounting specialist who will handle the bookkeeping for all divisions, including the CUASF. Corey has many years of experience and we are delighted to welcome him to the team.

The staff at the CUA Corporate Office will be in St. John's, NL for the 69th Annual Meeting and we encourage members and industry partners to visit us at the CUA booth and put a face to a name!

Nominations Process 2014



Dr. Joseph Chin Chair, Nominating Committee London, ON

A s Immediate Past-President of the CUA, I chair the Nominating Committee for 2014. The Committee has the responsibility to ensure that all positions on the CUA Executive are filled. The Nominating Committee would appreciate names of CUA Active Members who would be willing and able to fill the positions that are open. The Committee will be responsible for asking the individual if he/she is willing to serve the Association.

All individuals that are presented to the Nominating Committee will be carefully considered. However, not all of those suggested will have their names appear on the slate of nominees, as the Nominating Committee is charged with recommending a single individual for each position.

Open 2014-2015 positions to be proposed by the Nominating Committee

Vice-President (President in 2017)/1-year term (To replace Dr. Michael Leonard) [Note: This generally leads to a 4-year commitment as a CUA Director and Officer]

Vice-President Education-Elect/1-year term (To replace Dr. Gerald Brock in 2015) [Note: This generally leads to a 5-year commitment with the last 4 as a CUA Director and Officer]

Treasurer-Elect/1-year term

(To replace Dr. Anne-Marie Houle in 2015) [Note: This generally leads to a 5-year commitment with the last 4 as a CUA Director and Officer]

Executive-at-Large, British Columbia/3-year term (To replace Dr. Andrew MacNeily)

CUASF, Executive Committee, Administrative Council, Chair/4-year term (To replace Dr. Robert Siemens)

Please forward the names of potential candidates to: Dr. Joseph Chin, Nominating Committee joseph.chin@lhsc.on.ca

CUAJ Update

Josephine E. Sciortino, Editorial Director, Dr. Robert Siemens, Editor-in-Chief

n 2013, CUAJ experienced 2 major changes: We implemented an online manuscript submission and review process and we became a monthly journal. Both of these changes have affected the journal positively.

Our latest impact factor is 1.657, up 89% from our original figure of 0.875. CUAJ continues to receive most of its manuscripts from Canadian authors, with increasing numbers from China. Our submission rate has grown by 20% since last year and quite appropriately so has our rejection rate.

We also have enlisted the help of 3 Associate Editors – each well-qualified for the task and each very well-versed in OJS (our online submission system). Our 3 Associate Editors are: Martin Koyle from Toronto, Michael McCormack from Montreal and Anil Kapoor from Hamilton. They are extremely helpful in the following areas:

- Acting as Section Editors in our online system to find reviewers
- · Preparing editorials
- · Reviewing papers
- Acting as general go-to people for Editorial Director's queries
- Generating supplements

Our Reviewer Workshop is a continuing success for all meeting participants, especially for residents. This year in Newfoundland, we are hosting the Workshop during the Canadian Senior University Resident's (CSUR) event.

Since completing our first year with the online manuscript system (OJS), we have seen an increase in manuscripts and have established a robust pool of reviewers. The system allows us to prepare editorial calendars months ahead of schedule and has allowed us to speed up the review process.

Starting with our first print issue in 2014, we have also created a new look for the journal (see box in the top right corner).

Our financial picture is still positive. Revenue from print advertising (as opposed to online) is still crucial. We also are diversifying our revenue stream. We continue to promote reprints and supplements. CUAJ is now a member of the Canadian Association of Medical Publishers (CAMP), a group of medical publishers dedicated to advancing health sciences and medical communications in Canada. Membership in this group will keep us abreast of the news in medical publishing and trends in advertising.





Top CUAJ articles, based on views in 2013

- Defining a new testosterone threshold for medical castration: Results from a prospective cohort series Vol 7, No 5-6 (2013): CUAJ May
- Salvage radiotherapy after high-intensity focused ultrasound treatment for localized prostate cancer: Feasibility, tolerance and efficacy Vol 6. No 5 (2012): CUAJ October
- 8. Metastatic prostate cancer with malignant ascites: A case report and literature review Vol 7, No 3-4 (2013): CUAJ April
- Salvage prostatectomy post-definitive radiation therapy: The Vancouver experience Vol 7, No 3-4 (2013): CUAJ April
- Duloxetine for the treatment of post-prostatectomy stress urinary incontinence Vol 7, No 5-6 (2013): CUAJ May
- 5. The relevance of serum levels of long chain omega-3 polyunsaturated fatty acids and prostate cancer risk: A meta-analysis Vol 7, No 5-6 (2013): CUAJ May
- Best practices for the treatment and prevention of urinary tract infection in the spinal cord injured population Vol 7, No 3-4 (2013): CUAJ April
- Canadian guideline on genetic screening for hereditary renal cell cancers
 Vol 7, No 9-10 (2013): CUAJ October
- Are physicians performing neonatal circumcisions well trained?
 Vol 7, No 7-8 (2013): CUAJ August
- 2012 Update: Guidelines for Adult Urinary Incontinence Collaborative Consensus Document for the Canadian Urological Association Vol 6, No 5 (2012): CUAJ October

69th Annual Meeting

Early Bird Registration

St. John's, NL • June 28 - July 1, 2014

By April 30, 2014



Fun Night

Rally in the Alley on St. John's most legendary street: George Street

Be sure to wear your comfy shoes...not that the walk is long, no worries, but the Grand Finale of the "Rally in the Alley" will be full of surprises that will make you want to stick around and dance 'til the end.

President's Reception and Banquet

Monday, June 30, 2014

Join us for an elegant evening with fine local food and drink.

- Scientific Program
- Affiliated meetings
- CUA-CUOG Multi-Disciplinary Meeting
- CUA Instructional Course ...and much more!



www.cuameeting.org

CUA Charity Run/Walk*

Tuesday, July 1, 2014 • 06:30 to 07:30

CUA will hold a Charity Run & Walk where participants can choose a 2 km walk or a 5 km fun-run through the streets of St. John's. Strike up some friendly competition as we band together to support this important CUA initiative!

*A fee of \$50 CAN applies (non-taxable)



All proceeds will be donated to Bladder Cancer Canada and Kidney Cancer Canada

