

# Nurses' Programme at EAU Robotics Section Meeting

Shifting roles for nurses and the importance of certification



By Loek Keizer

Uniquely for a Section Meeting, the ERUS Meeting in Amsterdam featured a full-day programme for nurses involved or interested in robotic surgery. With ERUS coming under the wings of the EAU, the EAUN is now cooperating with the ERUS nurses' group. Special topics were covered, with opportunities for knowledge exchange and hands-on training.

Mr. Willem De Blok, clinical nurse specialist in Amsterdam and local organiser for the EAUN Programme in Amsterdam on September 17th spoke to us looking back on the successful day. The EAU Robotic Urology Section Meeting is the only specialised meeting with its own nurses programme: "I think ERUS can be commended for this, although

the nurses did take the initiative as well. When ERUS was founded, there was a simultaneous desire to involve nurses in the emerging field of robotic urology. The whole team, from surgeons to nurses, should be certified and trained for robotic urology."

De Blok on the roles of nurses in the OR: "There are some international differences, which become apparent at meetings like this. In some countries, the nurse is a surgeon's first assistant whereas in others one urologist is required to assist another.

"In some countries nurses or OR assistants have a larger role to play, taking care of routine procedures so that the surgeon can focus on patients that do require specialist care. In the UK, there is a similar division of labour although it's not formally arranged this way like in the United States or Canada, which pioneered the concept of the nurse practitioner."

The day's programme attracted 76 nurses (including faculty) and offered lectures and workshops on a variety of topics including cost-efficiency throughout robotic procedures, a case of five prostatectomies in one day, and state-of-the-art overview lectures from urologists. Break-out sessions allowed ward and OR nurses to attend a special scientific programme, as well as an opportunity for hands-on training. "The hands-on training was popular and well-received. We would have dearly liked to have given more nurses the opportunity to take part in hands-on training, but we were limited by the number of machines available."

The day's programme ended with a frank discussion with a patient who suffered some complications after



The nurses' day at ERUS attracted nurses from 10 European countries, South Korea and the USA

a robotic prostatectomy. Involving a patient gave the attending nurses a good indication of how a patient experiences the whole procedure, and also allowed them to ask questions that one would not necessarily ask one's own patients as they are treated. De Blok: "The patient was very open to talk about issues like incontinence and impotence, including the end of his

relationship as a result of the procedure. As nurses, we of course deal with the patient on a different level from the surgeons. It's important that we keep this human element in mind at meetings like these."

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Nurses Söderkvist and Rundin from Stockholm speak on their hospital's experiences with performing five prostatectomies in a single day

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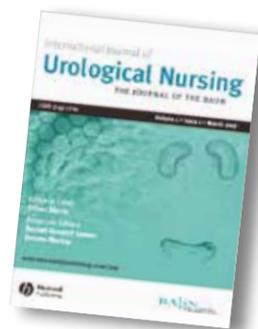
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T +31 (0)26 389 0680 F +31 (0)26 389 0674 [eaun@uroweb.org](mailto:eaun@uroweb.org) [www.eaun.uroweb.org](http://www.eaun.uroweb.org)



European Association of Urology Nurses

# EAUN joins Chinese Urology Association meeting

Education strengthens collaborative work on urological nursing care



**Lawrence Drudge-Coates**  
Clinical Nurse Specialist, Uro-oncology  
EAUN Chair  
London (UK)

[l.drudge-coates@eaun.org](mailto:l.drudge-coates@eaun.org)

**My visit to China on invitation by the Chinese Urology Association's Nursing Committee, started in Wuhan, capital of Hubei province and the most populous city (population at 10 million) in Central China. Wuhan lies in the eastern Jiangnan Plain where the Yangtze and Han Rivers meet.**

Accompanied by Mr. Larry Tsang and Gilbert Lui, Nursing committee members of the Chinese Urology Association, who were instrumental in organising this visit, I met with Ms. HE Wei, chair of the Nursing Committee and Prof. YE Zhang Qun, immediate past president of the Chinese Urological Association (CUA). Their department, at the Hospital of Tongji Medical College of Huazhong University of Science and Technology, is an extremely busy unit where around 10,000 urology outpatients are attended to every week.

With translators, language did not prove to be of any hindrance as we discussed common issues we faced in



Colleagues from Hong Kong inc Chinese Urology Nursing Committee members. From left: Ms Lo Yi Mei, Ms Yang Jiahui, Mr Larry Tsang, Mr Gilbert Lui, Ms Sophie Come

European Association of Urology Nurses

urology nursing care, areas for educational collaboration and EAUN membership. Such discussions proved to be both highly informative and productive.

## CUA meeting

It was truly an honour to be the first foreign urology nurse to attend the CUA Annual Meeting, and my visit was met with both intrigue and delight as I was introduced to CUA members

I also renewed old acquaintances from Hong Kong and again met Prof G. Zhou, urology professor of the Beijing Hospital of Ministry of Health, who had completed his PhD work at my institution some 12 years ago. As head of international relations for the CUA, he interviewed me regarding my visit, which provided an opportunity to highlight the work of the EAUN and the benefit of collaboration with CUA nurses.

## 21st CUA conference, Jinan

The nursing component of the meeting was held in the Shandong Hall. After a few words of Mandarin (which I practised many times!), I presented an overview of the EAUN, including its key clinical guideline developments, e-learning education and membership benefits, all of which were positively received.

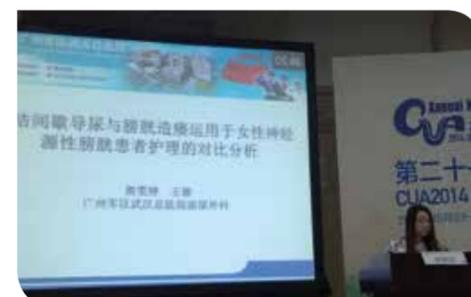


Being all too familiar with the EAUN abstract presentations, it was a real insight for me to hear some of the work being carried out by urology nurses in China, which was not different from our own. The meeting received 738 nursing papers for consideration which covered key aspects of urological clinical care, nursing education, scientific management and innovative research. Only 29 of the 738 were presented at the meeting due to practical considerations of hosting this event. There were

presentations focusing on the growing role of rehabilitation, its impact on traditional postoperative care, improvements being made in the patient's postoperative recovery rate and shortened hospital stay. This was something all too familiar in my own clinical practice, but nevertheless not with the same population base.

The visit to China very much highlighted the need and benefit for collaboration across different urology nursing organisations and the ensuing challenges. The EAUN's mission is not only to support and encourage the development of urology nursing within Europe, but also to collaborate with national societies across the globe in support of the development and application of high-quality urology nursing practices.

This particular issue was evident in discussions regarding EAUN clinical guidelines-- with translation and modification to fit local practices- which will



Ms Xiong Wenting presenting a paper on Clean intermittent catheterisation and bladder puncture gastrostomy in females with neurogenic bladder

prove to be a very successful initiative. I therefore look forward to our continued collaboration. My thanks to the CUA committee for its hospitality and very warm welcome.



Members of the CUA nursing committee - Ms HE Wei- Nursing Chair (in blue)

# 15th Asia-Pacific Prostate Cancer Conference

Meeting presents salient nursing issues in prostate cancer



**Tanja Rogers, RN**  
Counties Manukau Health  
Urology Dept.  
Auckland (NZ)

[Tanja.Rogers@cmdhb.org.nz](mailto:Tanja.Rogers@cmdhb.org.nz)

**I attended the 15th Asia-Pacific Prostate Cancer Conference 2014 held in Melbourne, Australia from 31 August to 2 September together with around 600 other delegates from around the globe.**

The conference is renowned for a comprehensive and stimulating programme that covers clinical urology, translational science and nursing and other allied areas. The nursing and allied health section included many presentations with topics such as: continence, active surveillance, hormone therapy, advanced prostate cancer and current nursing and allied health research trends. The following is a summary of key points from three of the sessions I attended.

Dr. Trish Neumann, specialist continence and pelvic floor physiotherapist, presented a session entitled 'Teaching pelvic floor exercises (PFE) to men before prostate surgery- what is best practice?' According to Neumann, post-operative PFE training isn't effective and that men who are taught PFE prior to prostate surgery have an earlier return of bladder control, less

leakage post-operatively and return earlier to normal life. She added that one of the main benefits of teaching PFE pre-operatively is that it is easier to teach motor control to men who don't have pain. The pre-operative PFE education session also provides an opportunity for health professionals to cover information that helps establish realistic post-operative goals and expectations. Assessment during this phase also allows for identification of any pre-existing voiding patterns that may require investigation prior to surgery such as detrusor overactivity.

Neumann also said that teaching PFE needs to be personalised to suit each individual since not everyone learns the same way. She believes that the best way to deliver PFE education is to use a combination of written and verbal information, as well as pelvic anatomy models and pictures. Transperineal ultrasound and digital rectal



Melbourne was hosting the 15th Asia-Pacific Prostate Cancer Conference

examination can also be used to assess how well men are contracting their pelvic floor muscles.

Mr. Jeremy Grummet, a urological surgeon specialised in urological cancers, gave an overview of transperineal (TP) and transrectal ultrasound (TRUS) guided prostate biopsy techniques focussing on the implications for the patients undergoing the procedures. Grummet said approximately 50% of TRUS biopsies are negative for cancer since either the cancer has been missed by the biopsy sampling process or because there was no cancer present in the prostate gland. He reported that the TRUS biopsy procedure causes pain and carries a significant risk of post-procedure infection.

**"...participants undergoing supervised exercise had a more positive outlook and a stronger sense of social belonging."**

According to Grummet, one way to address the risks of TRUS biopsy is to be smarter in the way we use PSA testing, ensuring it is used in men most likely to benefit from an early diagnosis of prostate cancer. He also recommended that men should have an MRI scan prior to TRUS biopsy to enable a targeted biopsy, thus decreasing the detection of insignificant low-risk cancers. Grummet advocated TP biopsy as a method of decreasing infection risk and avoiding the use of broad spectrum prophylactic antibiotics. TP biopsy also enables targeted biopsies and reduces the discomfort associated with prostate biopsy since it is performed under general anaesthetic. Grummet



opined that TP biopsy should be offered as an option to all patients in whom a prostate biopsy is indicated.

Prof. Daniel Galvao presented a session entitled 'Active surveillance for prostate cancer- potential application of exercise medicine'. Galvao has been involved with numerous trials of the potential benefit of exercise in men with prostate cancer. He said that participants undergoing supervised exercise had a more positive outlook and a stronger sense of social belonging. They also had fewer symptoms of depression and fatigue and an improvement in their quality of life measures. He also underscored the importance of the role of nurses in educating patients on how to increase their quality of life. He added that there is a wealth of evidence showing that exercise is safe and well tolerated by prostate cancer patients on active surveillance.

Overall, I found the conference very interesting with content that motivates me to pursue ideas that can lead to improved care of prostate cancer patients. The next conference in the series is the Prostate Cancer World Congress in Cairns, Australia from August 18 to 21, 2015. I hope you can join us for another dynamic meeting!

Madrid programme will feature new topics, current issues and trends



**Stefano Terzoni**  
Chair EAUN Scientific  
Congress Office  
Milan (IT)

s.terzoni@eaun.org

Other items in the programme aim to provide practical and useful information which can be useful in our everyday clinical practice, including topics such as practical management of urological emergencies, urological care for people with learning disabilities, ongoing challenges in male sexuality, intravesical instillation and BCG treatments, 3Tesla magnetic resonance, and many others.

#### Workshops and panel discussions

Several workshops will be offered, including a session on perioperative care in prostate disease, updates on pelvic floor rehabilitation, an ESU course on female sexual assessment and rehabilitation (in collaboration with the European School of Urology), success factors in self-dilatation, UTI in clean intermittent catheterisation, troubleshooting in patients with indwelling catheters, psychological aspects of living with cancer, and care pathways in bladder cancer treatment.

A new EAUN guideline on intravesical instillation, developed by the EAUN guidelines panel, will be presented. The Marketplace Session, already a well-known and appreciated session in past meetings, will allow participants to discuss adapted physical activity, sexual and urological rehabilitation, and ERAS (Enhanced Recovery After Surgery) with internationally renowned experts.

As in the previous editions, two poster sessions have been included in the programme. The number of abstracts submitted over the years has been increasing, and many important topics have been addressed by high quality posters. Everyone eligible for EAUN membership has the opportunity to submit their abstract before December 1st via the congress website.

A video session called "Surgery in Motion," first introduced in Milan and greatly appreciated by the delegates, will be included in the Madrid programme. Original videos, produced in the operating theatre, will show and comment on unusual surgical



Panel discussion on the European perspective of urology nursing at the EAUN Meeting in Stockholm last April

More than 300 delegates from 27 countries attended the 15th EAUN Meeting held in Stockholm last April, which attracted this year outstanding contributions by lecturers from all over Europe.

The meeting in 2015, to be held in Madrid from March 20 to 24, promises to be even more interesting: the EAUN scientific committee and the board took into consideration the suggestions provided by the delegates in Stockholm. The most appreciated sessions will also be in next year's programme plus new topics and current issues.

The programme, available on the website [www.eaunmadrid2015.uroweb.org](http://www.eaunmadrid2015.uroweb.org), begins with a plenary session regarding the future of urological nursing and the need for a common framework. Currently, there is an important European debate regarding the definition (and therefore the future) of urological nursing. In two years, the European Union is expected to make a stand on this issue, and this will have an impact on education, mobility, and working possibilities for urological nurses across Europe. Thus, the opening session of the EAUN meeting will focus on this important topic, with lectures on the various aspects followed by a panel discussion. We invite you to join the discussion, as this will have repercussions on our daily practice.

situations. Additional expert commentary on these procedures will be shared with the audience to provide practical information.

The classic Nursing Difficult Case Solution session entitles free registration for authors of the most interesting nursing cases. These selected authors will also present their work during the meeting. We encourage submissions of original cases by e-mail (details on the website) before December 1. Those who submit a case and are not yet EAUN members will be granted free membership for 12 months.

Finally, if you have a planned research project, the EAUN Research Competition is open with a €2,500 prize to be awarded to the most significant research project, enabling authors to receive support and funding. The author's proposed research will be presented in summary form on the EAUN website.

Deadline for submitting, by email, your research proposal is December 1 (further details on the website).

The 16th EAUN Meeting in Madrid will serve as an excellent opportunity to share expertise and for both EAUN members and non-members to be directly involved in improving urological nursing and play an active role in discussing current issues. Nursing cases, posters and research projects are welcome, and would contribute greatly in an active exchange of knowledge and information.

We look forward to receiving your ideas and suggestions for discussion topics. For additional information, visit our website or contact [eaun@uroweb.org](mailto:eaun@uroweb.org) in case of queries.

See you in Madrid!

European Association of Urology Nurses



## 16th International EAUN Meeting

21-23 March 2015, Madrid, Spain



Register now for the early bird fee!

**Deadline**  
**12 January 2015**

### Preliminary Programme

#### Saturday, 21 March 2015

- 09.00 – 10.15 **Opening Plenary Session**  
The future of urological nursing – The need for a common framework: time is running out
- 10.30 – 11.15 **Workshop**  
Nursing challenges in urodynamics
- 10.30 – 11.15 **Workshop**  
Contemporary issues in patient pathways and cancer treatment
- 11.30 – 12.30 **Workshop**  
Ongoing challenges in health and sexuality in male patients
- 11.30 – 12.30 **Nursing Research Competition**
- 12.45 – 13.45 **EAUN-EORNA Workshop**  
Diagnosis and peri-operative care in prostate disease
- 14.00 – 14.30 **State-of-the-art lecture**  
Best practice principles in the urological care for people who have a learning disability
- 14.00 – 15.15 **Poster Abstract Session**
- 14.45 – 17.00 **EAUN-ESU Course - 1**  
Practical management of urological emergencies

#### Sunday, 22 March 2015

- 09.00 – 10.00 **Workshop**  
Intravesical instillation in NMIBC
- 09.00 – 10.15 **Inside the body - surgery in motion (videos)**
- 10.15 – 10.45 **State-of-the-art lecture**  
BCG treatments for superficial bladder cancer
- 10.15 – 11.15 **Workshop**  
Troubleshooting and quality of life in indwelling catheterisation
- 10.45 – 11.15 **State-of-the-art lecture**  
Not only instillation: BCG perfusion for kidney and urethra
- 11.30 – 12.15 **Workshop**  
Care pathway and rehabilitation in bladder cancer surgery
- 11.30 – 13.15 **Poster Abstract Session**
- 12.15 – 13.15 **Workshop**  
Living with prostate cancer: Daily issues and quality of life
- 14.45 – 16.45 **Market Place Session**  
Rehabilitation in urology cancer care
- 14.45 – 15.45 **Workshop**  
UTI in clean intermittent catheterisation: What's new?
- 16.00 – 17.00 **Workshop**  
Clean intermittent catheterisation and self dilatation: quality of life and success factors

#### Monday, 23 March 2015

- 09.00 – 10.00 **Workshop**  
Difficult case session
- 09.00 – 10.00 **Workshop**  
Pelvic floor rehabilitation for LUTS: What's new?
- 10.15 – 10.45 **State-of-the-art lecture**  
PSA, is it a Patient Stress Amplifier?
- 10.45 – 11.15 **State-of-the-art lecture**  
3Tesla Magnetic Resonance Imaging for PCA
- 10.15 – 12.45 **EAUN-ESU Course - 2**  
Female sexual assessment and rehabilitation
- 13.15 – 13.45 **EAUN General Assembly**
- 13.45 – 14.00 **EAUN Award Session**  
Supported with an educational grant from AMGEN

#### Scientific Committee:

Stefano Terzoni (IT), Chair  
Bente Thoft Jensen (DK)  
Jerome Marley (GB)  
Lisette Van De Bilt (NL)  
Rita Willener (CH)

For more information:  
[info@congressconsultants.com](mailto:info@congressconsultants.com)

