

**AUA/EAU Academic Fellowship Exchange
European Tour 2010, March 30 – April 21**

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Tuesday March 30, 2010

GROUP EVENTS 3/30/10

- Arrival in Bratislava, Slovakia
- Welcome dinner with Professor Jan Breza and his wife, Daniela, at the Slovak Restaurant

We arrived in Bratislava after a long journey by way of Indianapolis, Atlanta, Amsterdam, and Prague. Shortly after deplaning, we met two friendly Slovaks who would prove to be indispensable guides during our stay: our driver, Mario, and our guide, Tatiana. We stopped briefly at our hotel in the center of old Bratislava—just steps from the Danube river

and in the shadow of Bratislava Castle—before joining our host, Professor Jan Breza of the Slovak University, and his wife, Daniela, for dinner. The Brezas greeted us warmly and presented us with several gifts: most notably pieces of traditional folk pottery from the nearby Modra region of Slovakia which we would be visiting in the upcoming days. Over a hearty Slovakian meal, we chatted about medicine, politics, and culture.

Wednesday March 31, 2010

GROUP EVENTS 3/31/10

- Medical discussion with Professor Jan Breza
- Tour of the Slovak University medical center
- Meeting with the Director of the Slovak University
- Lunch at the hospital
- Tour of Comenius University Medical School and meeting with faculty
- Inpatient rounds with Professor Breza at Slovak University Department of Urology

We met Professor Breza in his office early the next morning and spent 2 hours discussing the Slovakian health care system, Slovakian medical training, and differences in the current practice of urology between our two countries. The Slovak University Department of Urology practice covers the full breadth of urological care and includes an extremely active renal transplant service with the urologists performing both the donor and recipient procedures. Professor Breza’s team oversees immunosuppression therapy during the first year after surgery before transferring long-term management to a nephrologist. The Department has its own operative suite comprising an endoscopy/lithotripsy room, two open rooms, a recovery room, and an intensive care recovery

room. Laparoscopy has not yet entered the standard surgical armamentarium in Slovakia due to a shortage of funding and equipment; however, Professor Breza enthusiastically noted that their department would shortly obtain laparoscopic equipment and would soon be performing its first laparoscopic nephrectomy under the direction of a skilled laparoscopist from outside the region. Following this discussion, we toured the patient care and medical teaching facilities at Slovak University Medical School, met with the Rector of Slovak University (the equivalent of a university president in the United States), and explored nearby Comenius University Medical School, an institution steeped in tradition and housed in a building over 300 hundred years old. We then returned to Slovak University Hospital, where we donned white coats and rounded on the urology inpatient service. We saw many interesting cases, including patients recovering from renal tumor, extra-adrenal pheochromocytoma, and renal transplant surgery. We concluded our day with dinner in an Argentinian restaurant located in the heart of the old city: an improbable gastronomical fusion of the South American and the Eastern European highlighting Bratislava's thriving global culture.

Thursday April 1, 2010

GROUP EVENTS 4/1/10

- Visit to the Slovak National Academy of Sciences
- Visit to the Institute of Virology
- Lunch at the hospital
- Scientific session

The day started with a visit to the building housing the Slovak Academy of Sciences, where we met the President, Dr. Jaromir Pastorek and his wife Dr. Silvia Pastorekova. The Academy employees over 3000 people, with 1/3 of them being scientists. They collaborate extensively with European and American scientists, and additionally have

'structural' funds from the EU to support centers for translational research, including establishment of a Genomics Center and expansion of the Proteomics Center and Confocal microscopy core labs. The highlight of our day was a lecture by Dr. Silvia Pastorekova, one of the original discoverers of carbonic anhydrase 9 and developer of the antibody directed against it, M75. Dr. Pastorekova is Chair of the Department of Molecular Medicine at the Institute of Virology, and has active research projects for the basic and translational aspects of CA9 as well as significant work on arenaviruses, particularly lymphocytic choriomeningitis virus (LCMV). LCMV appears to be highly prevalent and may be responsible for severe disease in the immunocompromised as well as a cause of spontaneous abortions in the general female population. The fellows were highly impressed with the tenacity, thoroughness, and equanimity with which she approached her subject matter, and were very pleased when she was able to join us for lunch at the main hospital. The afternoon was highlighted by the following lectures from Dr. Rowland, who presented on the History and Development of the Indiana Pouch, including detailed technical aspects on construction to maximize efficiency, capacity, and continence. Dr. Breza presented his experience with adrenal tumors, which is one of the largest experiences in Europe. He showed excellent photographs and scans of successful operations, including the scans from a patient who we had seen on round the previous day. Their experience is all with open surgery as they have not yet started doing

laparoscopy in Slovakia. Dr. Freedland presented on his work on Obesity and Prostate Cancer. Dr. Matin presented his institutional experience with Neoadjuvant Therapy for Metastatic RCC. Dr. Parsons presented on the Prevention of BPH. A good discussion followed, at which point we were transported back to the hotel. Dr. Breza was a tireless host, and escorted us from morning until evening every day for 5 days. On this 3rd day, after conclusion of the afternoon lectures we had 1 hour to prepare for dinner at a Cuban restaurant. There was something oddly international about listening to a live Cuban band while dining in Slovakia. At one point the female lead singer was singing Sinatra's "My Way". Little did we know then that we would hear this song in every city we visited thereafter, in the most improbable places and times.

Friday April 2, 2010

GROUP EVENTS 4/2/10

- Visit to Devin castle and Red Rock Castle
- Bird of prey exhibition
- Easter dinner

Our day started out leisurely with a 9:30am pick up. We then drove for approximately 30 minutes to reach Devin Castle. This is an old castle that is largely in ruins now, but situated strategically at the confluence of the Morava and Danube rivers. The views from the castle were spectacular, though the wind was howling and it was quite cold. We also received a very

interesting lesson in modern history. Across the Danube was Austria. During the Cold War era, Slovaks were not allowed to go near the river for fear they would try to swim across to freedom. For the daring few who tried, they would be shot by Slovakian soldiers if detected – even once on Austrian land. There was a very moving memorial at Devin Castle to commemorate the 400+ people who died trying to escape to Austria.

After seeing Devin, we returned to the warm minivan and drove for an hour to get to Red Rock Castle. There we received a very nice tour of the castle refurbished with period furniture and art. This was a Castle owned by various aristocracy over the years. The cellars were particularly interesting as they had housed either copper or wine over the years. It was not clearly evident why the Castle was named Red Rock until we got to the cellar where we saw a small amount of Red Rock at the base of the castle. Hence, this became our little running joke for the next few days about the lack of red rocks at Red Rock Castle. At the castle, we looked at a very impressive falcon yard with all kinds of birds. We then watched a show with flying falcons and it was quite amazing to see them fly and attack!

After the castle, we transferred to a local restaurant in the countryside, where Professor Breza knew the owner and had a very typical Easter lunch/dinner. The food and hospitality was amazing – as they were throughout Slovakia. After eating, we all returned to the hotel tired and turned in early to get rest for tomorrow's adventures.

Saturday April 3, 2010

GROUP EVENTS 4/3/10

- Tour of Slovakian countryside
- Slovakian National Opera House

Easter is the most important religious holiday in Europe, and this just as true in Slovakia. Accordingly, very few patients enter hospitals or elect to have surgery performed for several

days prior to the holiday. We were very gratified to have Dr. Breza and his charming wife arrange for several sightseeing tours in the Slovakian countryside, wineries and other local attractions. The evening was topped off at the Slovakian National Opera House with a performance of Verdi's Nabucco, which the group enjoyed immensely despite the Italian language performance and Slavic captioning. The Slovak opera is well known throughout Europe and is frequently attended by many Germans and Austrians who come for the high quality performances.

Sunday April 4, 2010

GROUP EVENTS 4/4/10

- Bus and walking tour
- Farewell dinner

We spent Easter Sunday exploring the rich history of Bratislava. A bus tour included stops at the tomb of a prominent Jewish rabbi, the President's Palace, the National Bank of Slovakia, Bratislava castle, the Slavin

monument (a WWII memorial in honor of Soviet soldiers killed during the liberation of Slovakia), and the Slovak national theater. Later, we left the bus behind and toured Bratislava on foot, strolling along narrow cobblestone streets, among centuries-old town squares, and through the cavernous expanse of St. Martin's Cathedral. Finally, at a farewell dinner that evening, Professor Breza presented Dr. Rowland with a Medal commemorating the 90th Anniversary of the Slovak University Medical Center. Dr. Rowland is only the 57th individual to ever receive this award.

Monday April 5, 2010

GROUP EVENTS 4/5/10

- Fly to Munich
- Walking tour and Alte Pinakothek
- Hofbrauhaus

Our day started out with a late pick up and then a transfer to the Vienna airport – a short 40 minute drive away. It was an interesting drive knowing that many people gave their lives to be able to go from Slovakia to Austria and here we were going with essentially no border control. We then made the quick 1 hour flight to Munich

and arrived at the hotel. After a short rest, we were met by several of the faculty and residents from Maximilian University in Munich and taken on a brief walking tour through Munich. It was amazing to see the Rathaus (town hall) and Opera and many other beautiful buildings. Afterwards we went to the Alte Pinakothek museum – the oldest museum in Munich. There we received a guided tour through the museum. Because we only had one hour before the museum closed, the guide decided to focus on an in-depth explanation of only a few paintings rather than the typical mad dash trying to see everything. While at first we were concerned we would miss important paintings, we all realized that the fewer paintings but a more in-depth approach gave us all a far better appreciation of the beauty and symbolism of the paintings. Our guide was a professor of art history who was handpicked by Professor Stief. Needless to say we were highly impressed and much more culturally transformed.

After the museum, we took a stroll and headed to dinner at the Hofbrauhaus – the traditional beer hall in Munich. There we all enjoyed traditional Bavarian food and some

good beer. Afterwards, we headed to a coffeehouse for some dessert and coffee. Finally, around 11pm we headed back to our hotel, tired, but excited to begin our German adventure.

Tuesday April 6, 2010

GROUP EVENTS 4/6/10

- Surgery
- Tour of Schloss Neueschwanstein
- Dinner at Prof. and Mrs. Stief's house

The day was spent primarily in the operating rooms, with again opportunities for all of us to participate in many different cases, including a radical cystectomy with neobladder (Mainz II pouch), partial nephrectomy, photodynamic diagnosis of bladder tumor with TURBT, a complex TURBT for a tumor of unknown

pathology, and a robotic prostatectomy. Their experience with robotics is still early. Their case volumes are quite high as they cover a large portion of medical care of Bavaria. The German system is quite hierarchical, and the Chief has his choice of cases day by day, but as we would see not quite as hierarchical as other centers we would visit. Junior faculty are able to subspecialize, unlike most other centers we visited, likely because there is such high volume of cases. Our German colleagues were highly efficient, and placed a premium on speedy operations. They took great pride in completing complex maneuvers in the shortest time possible. They expressed frustration at the inefficiency of case turnover in their hospital, and we commented that this appears to be a universal complaint.

We were disarmed by the warmth and collegiality of our Bavarian colleagues. While we spent the shortest time with this group, there was a high level of collaboration developed in this short time and we have very fond memories of our time and discussions with this exceptional team. In the afternoon we were driven to the foothills of the Bavarian mountains. After a tour of the beautiful Sleeping Beauty castle of Schloss Neuschwanstein, in the evening we were invited to Professor Stief's house, where we enjoyed dinner with his family and his Urology staff cooked by a chef from one of the premier restaurants in Germany. Once again, were enchanted by the warmth, collegiality, and friendliness of our new German friends who invited us so completely into their work and lives.

Wednesday April 7, 2010

GROUP EVENTS 4/7/10

- Radiology conference at Hospital Grosshadern.
- Surgery
- Scientific presentations.
- Pathology conference.
- Departure to Padua, Italy.

After an early start with the entire Department of Urology at Grosshadern Hospital reviewing interesting cases at Radiology Conference, we changed into scrubs to observe and participate in the following surgeries: radical retropubic prostatectomy, open partial nephrectomy, cystectomy with neobladder reconstruction, and transurethral resection

of bladder tumor. Also of note was a diagnostic endoscopy case performed using a new disposable ureteroscopic system that is currently unavailable in the U.S. A scientific program followed the operative cases at which Dr. Matin presented his work on laparoscopic partial nephrectomy, Dr. Freedland on diet and prostate cancer, Dr. Parsons on modifiable risk factors of BPH, Dr. Gratzke (Maximillians-Universitat) on cannabinoid receptors in the lower urinary tract, and Dr. Tilki (Maximillians-Universitat) her research on novel prostate cancer markers. The presentations sparked excellent scientific discussions and an enthusiastic intellectual exchange. The day finished with a departmental Pathology Conference. Cases included a primary Leydig cell tumor of the testicle, transitional cell carcinoma of the bladder, adenocarcinoma of the prostate, and xanthogranulomatous pyelonephritis. The conference thus concluded, the delegation departed directly from the hospital for Padua, Italy.

Thursday April 8

GROUP EVENTS 4/8/10

- Meeting with Prof. Zattoni
- Tour of ORs and clinic
- Surgery
- Tour of Padua
- Scientific presentations.

Thursday (April 8) morning was a little painful. We had arrived late the night before and on not quite enough sleep and here we were standing in the hotel lobby unsure what was going to meet us in Padua. We were picked up and after a short 10 minute drive through the lovely very old town of Padua, we arrived at the hospital. There we were met by Professor Filiberto Zattoni, the

Chairman of the Department of Urology in Padua. We spent the first hour meeting with Professor Zattoni who only became the chair in Padua two months ago. It was a very interesting meeting where we learned about medicine in Italy (everyone covered by the government and only ~5% of people have private insurance) to how Urology training works. Mirroring similarities to Munich, we were all surprised that residency really only teaches office Urology and basic endoscopic skills. Residents don't do the "big cases" – except perhaps as a second assistant. Apparently the time to learn how to do the big cases was when you were junior or even mid-career faculty. Also, even as a senior faculty (including vice-chairman), you would only perform most of the case with the Chairman having the discretion to come in at any point and finish the case. All-in-all, the system, though quite different from our own, seems to work and at the end of the day the patients all appeared to receive excellent care. After our morning briefly with the Professor, we changed into scrubs and took a quick tour of the ORs and clinic – all located on the same floor and interconnected. Consistent with other European Urology centers we visited patients would routinely stay much longer in the hospital than in the US (ureteroscopy was 1 day, radical prostatectomy was 8 to 10 days). As such, this necessitates a much larger in-patient census (60 beds just for Urology) than in our system.

After the tour, we headed to the OR to watch them perform surgery: robotic radical prostatectomy, hypospadias repair, and ureteroscopy. It was quite enjoyable and interesting to see that in general the techniques and approaches used in Padua were not that different than the approaches we used at our own institutions.

We then broke in the early afternoon for a quick lunch before heading out to see one of the sites of Padua. We then returned in the late afternoon to the research buildings for a wonderful scientific interchange. We gave talks about our respective research and listened to them give talks about the history of Padua and the University and about the Padua Pouch – a technique for continent diversion that they have used in nearly 1,000 patients. After the afternoon session, we headed back to the hotel for a short break before heading to dinner at a true Italian restaurant overlooking one of the main squares in Padua. Both the food and company were delightful! We then returned to the hotel late, tired, but excited about the day and excited about tomorrow.

Friday April 9, 2010

GROUP EVENTS 4/9/10

- Surgery
- Tour of Padua and Medical School

We were escorted to the Urology Department where, a short walk across the hallway, we entered the dedicated Urology operating rooms and watched several cases being performed.

The OR staff was very warm and friendly toward us and we were able to go from room to

room to observe different cases. The cases included a robotic simple nephroureterectomy (for nonfunctioning kidney in a patient with a history of bladder TCC), a pediatric Mitrofanoff procedure for neurogenic bladder, ureteroscopic stone extraction, ureteroscopic stone lithotripsy for an ectopic pelvic kidney, and radical nephrectomy. The Department has a new DaVinci® Si system and they are trying to use it for several cases in order to gain familiarity with the technology.

As noted above, the system is somewhat more pyramidal, in that the Chief of Urology, being responsible for every case being performed, has the option to do any case that other more junior faculty have started. In addition we understood that as there is new leadership in this department, that the new Chief wanted to establish a new standard of care and was probably more hands on than usual.

After observing cases were were given a short tour of Padua University, the 2nd oldest university in the world, after Bologna. We were moved and amazed, sitting in the same lecture hall that Galileo Galilei gave lectures, and looking up at the walls decorated with portraits of giants in anatomy such as Fallopio and Morgagni. We saw the anatomy theater, an impressive mini-stadium built inside the building, where students could observe autopsies. In contradistinction to Bologna (where autopsies were forbidden by the church), cadaveric dissections were allowed in Padua, as the university was under Venetian rule. Two autopsies a year were officially allowed, yet the need was greater, and thus many unofficial dissections took place in the theater, which was also fitted with novel gadgetry such as tables that could flip over and a drainage tunnel that led directly to the river, allowing for rapid removal of bodies and other incriminating evidence. In another room with a round table surrounding a lone chair (used for interviewing medical students) we saw skulls on display: these were skulls of former faculty who had donated their bodies for anatomic teaching. Just as moving was the story of the first woman in the world to attend and graduate in medicine, which occurred here in the late 1600's. She became a nun shortly after graduating and died while still young. We were filled with

gratitude, a great sense of legacy, and a fuller appreciation of the sacrifices made for the sake of medicine by those who paved the way for the development of modern health care.

Saturday April 10, 2010

GROUP EVENTS 4/10/10

- Tour of Venice with Prof. Galetti

Following a quick breakfast, a bus deposited us on the periphery of Venice—the only point on the island at which cars are permitted. We slowly threaded our way through narrow streets, over countless small canals, and stopped at the Second School, home of many of Titian’s masterpieces. We then boarded a boat and cruised the famous Grand Canal before crossing the Rialto Bridge and touring the Piazzzo San Marco, Doge’s Palace, St. Mark’s Square, the Bridge of Sighs, and the old Prisons. We concluded our day over dinner with Dr. Tommaso Galetti—a faculty member from Padua, native of Venice, and extremely gracious host.

Sunday April 11, 2010

GROUP EVENTS 4/11/10

- Travel to Madrid
- Meet Dr. and Mrs. Llorente

Today was a travel day. We woke up early (6am hotel pick-up) and headed to the airport for a 2½ hour flight to Madrid. The flight and trip were relatively uneventful and we arrived at our hotel shortly before noon. Being Sunday, most restaurants and shops were closed, so we took a taxi and headed to the center of town (~5-10 minutes). There, not quite over our desire for German food, we found a nice schnitzel restaurant right on the main square. After a delicious lunch, we walked around for an hour or two and then headed back to the hotel for a rest before dinner. Dinner was early by Spanish standards – 8pm. We were met at the lobby of the hotel by Dr. Carlos Llorente and his wife Lydia. We then walked to dinner at a wonderful tapas restaurant and enjoyed a nice and leisurely first night in Spain learning all about Madrid, Spain, and Spanish Urology.

Monday April 12, 2010

GROUP EVENTS 4/12/10

- Transfer to Alcorcon hospital
- Case presentations/Indications conference
- Surgery
- Scientific presentations

We were driven into the suburbs of Alcorcon, where we were greeted by the staff of the Urology Department at the Fundacio Alcorcon. The spacious facility is only 12 years old and is in excellent condition. The residents had prepared a list of cases describing the patients and operations being done that day. Over the course of the day we observed a laparoscopic extraperitoneal radical prostatectomy for a patient with low risk prostate cancer, a left laparoscopic radical nephroureterectomy for a distal ureteral TCC, and a variety of other cases. Dr. Llorente performed an elegant extraperitoneal laparoscopic radical

prostatectomy. He feels that the extraperitoneal approach for prostatectomy is advantageous and this approach is used routinely at their center. For the nephroureterectomy the distal ureter and bladder cuff is approached via the incision used for specimen extraction, which was done quite similar to those of us watching. Following surgery we went to the lecture hall where we were treated to lectures from Dr. Rowland on the history and technical aspects of the Indiana Pouch and from Dr. Martin on the role of neoadjuvant chemotherapy for upper tract TCC.

Tuesday April 13, 2010

GROUP EVENTS 4/13/10

- Case conference at Hospital Universitario Fundacion Alcoron.
- Surgery
- Scientific presentations.

The first activity of the day was a conference with the residents and faculty of the Department of Urology at Hospital Universitario Fundacion Alcoron. The residents presented the cases we would be observing: laparoscopic radical cystoprostatectomy with ileal conduit, laser photovaporization of the prostate, penile

prosthesis implantation, and 2nd stage Interstim. We then changed into scrubs and spent the morning and first portion of the afternoon in the operating room. The latter part of the day was devoted to a scientific program at which Dr. Freedland presented research on PSA kinetics, Dr. Parsons on dietary interventions for low-risk prostate cancer, and Dr. de la Pena (Hospital Universitario Fundacion Alcoron) on tissue engineering in the urinary tract.

April 14-21, 2010

We finally had one free day to explore Madrid, and the following day we flew to Barcelona for the EAU meeting. There we met up with many of our hosts from the past month, which at this point felt like seeing old friends. We met the leadership of the EAU and were recognized at the EAU 25th Anniversary Dinner. Some of us had presentations and meetings to attend. Due to the Eyjafjallajökull volcano eruption in Iceland and the subsequent travel quagmire it caused, attendance was down about 30%. We concluded our time in Barcelona eager to return to our lives and homes, yet with a much greater appreciation of how different our specialty is half way around the world and yet so similar in many ways, convinced that Urologists are just great people all around the world.

We all strongly recommend the continuation of the AUA-EAU Academic Exchange Program to further the understanding and cooperation among urologists of these two continents.