

## THE OFFICIAL NEWSLETTER

*Volume 13, Issue 2, 2018*

**IUGA**   
international urogynecological association  
**Regional Symposia**

### **IUGA Regional Symposium & URPS 2018**

Live Operative Workshop & Symposium on  
Urogynecology & Reconstructive Pelvic Surgery

**September 7-9, 2018**

*TN MGR Medical University, Chennai, India*

*Hosted by: Urogynecology & Reconstructive Pelvic Surgery  
Society of India (URPSSI)*

[www.iuga.org/regional-symposium-india-2018](http://www.iuga.org/regional-symposium-india-2018)

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The IUGA Newsletter is published by the members of the Publications Committee

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IUGA 43rd Annual Meeting - June 27-30, 2018 - Vienna

The views and opinions expressed by the authors in this publication do not necessarily reflect those of IUGA and/or its editors.

# LETTER FROM THE PRESIDENT



**LYNSEY HAYWARD**

*IUGA President*

Dear Colleagues,

In this edition, we look back at the highlight of the year so far – the outstanding success of the 43<sup>rd</sup> IUGA Annual Meeting in Vienna. Over 1500 attendees from 75 countries gathered

to meet, learn, and make new friendships in the beautiful city of Vienna. My thanks go to Heinz Kölbl, Karl Tamussino,

and the fantastic Local Organizing Committee (LOC) who worked so hard to make this one of the very best IUGA meetings to date. Paul Riss was the Honorary Chair of the meeting and it was my honor to present him with a Lifetime Achievement Award for his dedicated work both within IUGA and the wider urogynecological community.

The meeting began with 20 workshops that were of high quality and very well attended. The Pan-Asian meeting attracted more the 220 attendees with speakers from 14 nations, while the Ibero- American and EUGA meetings also had very large audiences. More than 150 joined the Fellows' sessions and it was great to see both the talent and enthusiasm that is coming through to underwrite IUGA's future. For the first time we held a dedicated nursing track within the IUGA meeting and this generated a huge amount of interest. We look forward to building on this next year. The annual IUGA Public Forum was attended by more than 70 men and women with the question time extending well beyond the time slot, highlighting the huge need for education within the general community. My thanks to the Public Relations and LOC Committees for organizing this event.

The main program included 18 state of the art and mini state of the art lectures, a debate, and round tables. Following a record number of abstract submissions, the quality of the original presentations was very high. The Ulf Ulmsten Lecture, entitled "The Ideal Birth [in the developing world] is UR-Choice," was delivered by Don Wilson and was a real highlight of the meeting. My thanks go to the Scientific Committee, the Education Committee, Workshop Subcommittee, and the Program Committee for their hard work and dedication in bringing together this program.

More than 400 people attended the Gala Dinner held at the beautiful Vienna City Hall, while 140 enthusiastic souls turned out in the rain for the FIUGA Fun Walk/Run. If you were unable to attend the IUGA meeting this year, many of the key lectures are now available in [the IUGA Academy](#), so take a look!

For those who missed my Presidential Address, I was able to confirm that we are now able to invest in further IUGA membership benefits. These include our new online CME program, the IUGA Pelvic Floor Modules (launched at the Annual Meeting), along with our new mobile-friendly website and patient website ([www.yourpelvicfloor.org](http://www.yourpelvicfloor.org)). Through the year, we have been running podcasts, investing in a new membership system, and adding multi-lingual content to the IUGA Academy. I would like to congratulate the IUGA IT team who have worked incredibly hard to achieve all these goals this year.

My final thanks go to our impressive IUGA staff. The meeting planning was led by Vivian Gies and it is thanks to the dedication of the whole IUGA team that the meeting ran so smoothly and professionally.

It is a challenging time for urogynecology. However, IUGA is going from strength to strength, expanding in both membership and reach and maintaining its role as the international leader in urogynecology. The IUGA Board and I are dedicated to building on this success and we are looking forward to another productive and exciting year ahead!

Best wishes,  
Lynsey Hayward







# 43<sup>rd</sup> Annual Meeting

June 27-30 / 2018  
Vienna, Austria

IUGA ♀  
international urogynecological association

[www.iuga.org](http://www.iuga.org)

## LOOKING BACK AT THE IUGA 43rd Annual Meeting June 27-30, 2018 Vienna, Austria



# IUGA 43RD ANNUAL MEETING

The IUGA 43rd Annual Meeting was held June 27-30, 2018 in Vienna, Austria. With 20 workshops, 677 abstracts presented, 33 invited speakers, 1561 attendees, and 37 exhibitors, the meeting was informative, engaging, and filled with memorable moments. Thank you to the following individuals for contributing summaries of various Annual Meeting sessions: Manjula Annappa, Cathy Davis, Laura Didomizio, Catherine Hudson, Sharif Ismail, Helene Moser, Lopa Pandya, and Stewart Pringle.

## PUBLIC FORUM

Each year IUGA holds a Public Forum in conjunction with the Annual Meeting. The Public Forum aims to dispel some of the taboo surrounding urogynecological topics and provide information to the public.



This year's Public Forum focused on continence/incontinence. IUGA worked closely with members and staff of the Austrian Continence Society (Medizinische Kontinenzgesellschaft Österreich - MKÖ), who secured all of the local expert speakers and publicized the event. On the advice of MKÖ, this year's event was conducted in German, which was a departure for IUGA but greatly contributed to the success of the program. Over 70 individuals attended.

Olanrewaju Sorinola, IUGA Public Relations Committee Chair, provided a very brief introduction in English, along with remarks from Jaqueline Cahill from the World Federation of Incontinent Patients on World Continence Week.

The Forum was moderated by Max Wunderlich and Engelbert Hanzal. Lothar C. Fuith, specialist in gynecology and obstetrics and President of MKÖ, discussed childbirth and the pelvic floor. Physiotherapist Christine Stelzhammer covered pelvic floor training, and Gisele Schön, a certified nurse and continence and stoma consultant, talked about the role of nursing in incontinence. Michael Rutowski, a specialist in urology, covered continence/incontinence in the older population, and Michaela Lechner, a surgeon with colorectal specialization, wrapped up the presentation portion of the program by discussing bowel problems.

The event concluded with a very interactive question and answer session. There were comments, discussions, opinions, and personal stories from the women and men present. It was a very engaging, educational event and the attendees were very grateful for the learning opportunity.

## FELLOWS' DAY

The Fellows' Day program at the Annual Meeting provided an exciting opportunity for trainees from around the globe to participate in workshops, hear from experts in the field, and exchange ideas. The program kicked off with a hands-on workshop sponsored by Boston Scientific with both local and international experts providing guidance. Stations included single incision sling, retropubic and transobturator slings, a station on sacrospinous ligament fixation, and a review of new digital resources. The day continued with the Fellows' reception and an opportunity to meet new mentors. In the evening we dined on the water and enjoyed spending time with other fellows outside of a clinical setting.

On Thursday the Fellows' program began with a review of exciting changes to the website including opportunities for observership grants and international fellowships. During

this session we also learned how to set up a research project which included tips and tricks to doing your own statistics. There was also a paper session which provided for a lively discussion on various projects from around the world including a multicenter RCT comparing native tissue repair to synthetic mesh repair and if cesarean sections prevent bothersome pelvic floor dysfunction. Last, but certainly not least, the group had the opportunity to meet the *IUJ* Editors-in-chief, Drs. Rebecca Rogers and Steven Swift, and the IUGA Board and hear about exciting opportunities for getting involved within the organization.

Thank you to Marianne Koch and Sijetlana Lozo for organizing! We are looking forward to the next Fellows' Day in Nashville.

## NURSING TRACK

In an effort to foster more nursing involvement in IUGA, this year's Annual Meeting included an independent nursing program running concurrently with the rest of the program. This track had two sessions aimed primarily at nurses but was open to allied health care professionals and medics alike.

The meeting opened with a specialist workshop – Vaginal Pessaries in the Management of POP and UI. This was a lively session with lots of interaction and over 50 delegates in attendance. The workshop was chaired by Angie Rantell, Nurse Cystoscopist, NMP and Lead Nurse of the Urogynaecology Department at Kings College Hospital, London. Topics including patient assessment, patient counseling, management of complications, and teaching patients' self-management were covered by experts in the field including Ellie Stewart, Ranee Thakar, and Rohna Kearney. Following the sessions there was an opportunity for hands-on practice with all speakers readily available for demonstrations and to answer questions.

The second nursing session was held on Friday and covered the multidisciplinary approach to chronic pelvic pain and bladder pain. This was again chaired by Angie Rantell and

a panel including Vic Khullar (consultant urogynaecologist), Barry Berghmans (clinical epidemiologist, health scientist and pelvic physiotherapist), and Wendy Ness (clinical nurse specialist) discussing each role of the specialist when managing these patients.

### NURSING SPECIAL INTEREST GROUP MEETING

This year the first ever Nursing SIG meeting was held. Attendees included nurses of different nationalities, Bob Freeman (IUGA Past President), and Barry Berghmans (Chair of the Pelvic Floor Rehabilitation SIG). Those present were informed of the many benefits of being a member of IUGA and of the opportunities available through the organization, such as access to the IUGA Academy which has lectures and several CME-accredited modules; access to Patient Information Leaflets; and opportunities to apply for observerships and research grants. In addition to discussing opportunities available to IUGA members there was a real interest in finding out what the nurses in the room would like to see happening within the organization and several excellent recommendations were put forward. A key theme running throughout the meeting was the importance of a multidisciplinary approach and working together to ensure the best outcome for patients.

## PRESIDENTIAL ADDRESS

Dr. Lynsey Hayward began the 2018 Presidential Address by paying tribute to one of IUGA's founding fathers, Oscar Contreras Ortiz, MD, who passed away last year. Dr. Contreras Ortiz served as IUGA President from 1996-1998 and was beloved by many across the world. She then expressed her gratitude to the Local Organizing Committee in Vienna led by Drs. Paul Riss, Heinz Kölbl and Karl Tamussino, as well as the IUGA 2018 Scientific Program Committee and Scientific Committees who reviewed over 650 abstracts for this year's

meeting. President Hayward then switched gears to discuss many of the exciting new things happening at IUGA in 2018. There are brand new organizational and patient websites to peruse and the membership system has been streamlined. There has been a large investment into educational content including the IUGA Academy. Additionally, the relationship with Springer (publisher of the *IJJ*) continues to grow. Finally, the IUGA Lifetime Achievement Award was presented to Dr. Paul Riss to honor his outstanding service to IUGA.

## STATE OF THE ART LECTURE: WHAT CAN WE LEARN FROM BIG DATA?

Dr. Amina Qutub presented the 2018 State of the Art Lecture on big data. She began her lecture by putting the topic into perspective for the audience. She recounted the "big data" collected by Austrian friar Gregor Mendel over a 7-year period in which he painstakingly described characteristics of thousands of pea plants. Modern genomics and metabolomics have come a long way since then but the concept of big data remains the same. She then reviewed

examples of how big data in genomics can help one make individualized choices regarding treatment choices and disease outcomes. Crowd-sourcing in science is an ideal way to gain more information and create data networks instead of working in silos. The big challenge moving forward is making sure that we use this big data wisely to develop treatment algorithms for our patients and society.

## ROUNDTABLE: SEXUAL HEALTH AND AGING

Drs. James Simon and Irwin Goldstein, President and Past President of the International Society for the Study of Women's Sexual Health (ISSWSH), presented a roundtable discussion focused on sexual health and the aging process. They discussed Hypoactive Sexual Desire Disorder, the most common female sexual dysfunction, affecting 10% of women. They also introduced a process of care model algorithm, the Decreased Sexual Desire Screener (DSDS) – a validated questionnaire to screen for sexual function and desire problems, long vs acquired problems, and identifying modifiable factors like medical, psychiatric, substance or sleep disturbance. They emphasized the need to understand sexual desire in relation to ovulation, as well as vulvovaginal

atrophy with genitourinary symptoms and myths of avoiding HRT.

The presenters also brought forth the idea of the human female prostate gland around the urethra and hypothesized that placement of the mid-urethral sling traverses periurethral tissue which may have the potential to affect female orgasmic function and sexual satisfaction.

Case series were discussed on erectile function in aging men, including penile implant surgery, use of stem cells, and platelet rich plasma infusion.

## ULF ULMSTEN LECTURE: THE IDEAL BIRTH [IN THE DEVELOPED WORLD] IN 2018 IS UR CHOICE!

Dr. Don Wilson, hailing from the University of Otago in New Zealand, presented this year's Ulf Ulmsten lecture regarding the ideal route of delivery. When asked to describe an "ideal birth," some common themes among women include choice, empowerment, and information. The question at the heart

of this talk was "Can childbirth-related pelvic floor disorders be prevented?" Dr. Wilson began by reviewing the findings of the ProLong study and piqued our interest for the results to come in ProLong 20+. The SWEPOP study demonstrated that cesarean section only partially prevented urinary

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incontinence, indicating other contributing factors. Cesarean delivery has not been shown to prevent fecal incontinence in either of these longitudinal studies. It is likely that prolapse can be at least partially prevented through cesarean delivery when compared to vaginal delivery. However, Dr. Wilson was clear that blanket elective cesarean sections are unlikely to

be an effective prevention strategy and emphasized the risks of cesarean delivery. Instead, using the UR-CHOICE model developed by Jelovsek et. al., women and providers can take a more individualized and informed approach to obstetric decision making.

## SYMPOSIUM: EVOLUTION OF UROGYNECOLOGICAL TRAINING

The medical education symposium was devoted to the evolution of Urogynecology training. It had a good attendance, despite being one of four concurrent afternoon sessions. It was chaired by a trainer, Professor Linda Cardozo (UK), and a trainee, Heinrich Husslein (Austria).

Olanrewaju Sorinola (UK) covered the theoretical aspects. He illustrated how learning and assessment evolved to focus on the competencies to be fulfilled at the end of training. He outlined how task-orientated and problem-based curriculums accommodate varied learning styles on the path to becoming an expert.

The situation in the developing world was described by Stephen Jeffery (South Africa), who completed Subspecialty Training (Fellowship) in the UK. He highlighted challenges like limited staffing, medication, equipment and training opportunities, more pressing priorities, such as high

maternal mortality rate, and more complex needs, such as obstetric fistula. He described how initiatives, such as the IUGA Observerships and FIUGA's Ghana Project, can make a difference on the ground. He emphasized the value of helping neighboring colleagues, continued support over time, and relying on videos as well as the internet in facing these challenges.

Professor Douglas Tincello (UK) provided an example from the developed countries. He summarized training and professionalism milestones including the establishment of the British Society of Urogynaecology, Subspecialty Training in Urogynecology, surgical database, and Unit Accreditation.

The questions and debates that followed highlighted the need for collaboration between the developed and developing world and value of perseverance in reaching goals despite the obstacles.

## PANEL DISCUSSION: THE FRAIL ELDERLY - MINIMIZING RISK AND OPTIMIZING OUTCOMES IN THE MANAGEMENT OF PELVIC FLOOR DYSFUNCTION

Dr. Thomas Hamp (Austria) critically evaluated peri-operative care. A frailty score is widely used but adds little to clinical evaluation. Enhanced recovery reduces length of stay but not mortality. Delirium is a major concern and certain drugs, such as benzodiazepines and opiates, should be avoided. Regional anesthesia has no proven benefit compared with general anesthesia. Delirium is related to pre-existing risk factors rather than the anesthetic. Early mobilization and return to a familiar environment are helpful.

Dr. Bil Gibson (Canada) described frailty and sarcopenia. Frailty is distinct from multi-morbidity or being elderly. The

impact of LUTS, especially urge incontinence, is such that treatment is justified. While surgery is less common, pelvic floor exercises are effective even in the cognitively impaired. Treating disordered sleep breathing and obesity help urinary incontinence, while drugs to be avoided include IR oxybutynin and doxasocin.

A bundle of simple measures reduce morbidity. The elderly benefit from setting realistic goals as opposed to less realistic cure of symptoms.

## NEW PFM EXERCISE CLASS

Twenty-four women and two men got up early Saturday morning to join the PFM exercise class offered by Chantal Dumoulin and Kari Bø. Chantal explained the evidence of PFM training (PFMT) as first line therapy for urinary incontinence problems, no matter if it is carried out individually or as group training. PFMT should focus on strength, endurance, power, relaxation, or a combination of these parameters. The advantage of the group training is peer support, reducing stigmas and improving motivation, adherence and self-

efficacy. Group PFMT may be implemented with or without previous individualized PFM instruction. Kari Bø succeeded in motivating the group with a physical workout accompanied with music, alternating with blocs of PFMT (emphasizing the strength component) in different body positions. Strength PFMT needs a good and motivating instructor to really reach one's individual limits and thereby ensure the effectiveness of the training, which was perfectly fulfilled by Kari Bø.

## DEBATE: THIS HOUSE BELIEVES THAT APICAL PROLAPSE SHOULD BE CORRECTED VIA THE VAGINAL ROUTE RATHER THAN ABDOMINAL

This lively debate was covered by Heinz Kölbl (Austria) and Bob Shull (USA) for the vaginal route versus Bruno Deval (France) and Catherine Matthews (USA) for the abdominal route. Dr. Kölbl highlighted shorter operative time, use of spinal anesthetic, and faster recovery time, with no difference in improvement of quality of life over an abdominal approach. Dr. Deval countered with the concept of treating prolapse like hernias, using mesh to improve outcomes. Dr. Shull answered with the concept that apical

prolapse may be a failure to recognize and treat initially, but good understanding of anatomy and technique allows for good outcomes with the vaginal route. Finally, Dr. Matthews ended with evidence that failure rates of vaginal approaches are high, with concurrent shortening of the vagina. Although we must balance efficacy and risk, evidence shows sacrocolpopexy has better durability and less dyspareunia. All panel members agreed that training is essential to minimize risk and complications.

## SPECIAL LECTURE: MESH – WHERE DO WE STAND IN 2018? INTERNATIONAL SCENARIO AND PERSPECTIVE

The special lecture on the current status of mesh use across the globe, delivered by Willy Davila (USA), was very well attended despite being one of 3 concurrent morning sessions held on the final day of the meeting. He outlined recent developments and consequences of the ban on vaginal mesh use in New Zealand, Australia and the UK and provided the results of the IUGA mesh survey carried out before the Annual Meeting. A 4-member panel discussion provided examples in Australia, the UK, Brazil, and Japan.

Panelists discussed the pressure from patients, and lawyers, influenced unbalanced views in the media, which prompted politicians to act on anecdotes in a more emotional, rather than scientific way in the court of public opinion. The concern led to a drop in offering and accepting vaginal mesh and some patients becoming worried despite having successful surgery. Although the use of tapes for stress incontinence

and abdominal/laparoscopic mesh was largely unaffected by recent regulations, their use also dropped. The lack of change in some countries, where mesh was not banned, was highlighted and variation in public awareness and litigation fear were considered as possible factors.

Although IUGA did a roundtable discussion in 2004, which was reported in 2005, more could have been done to close the loop, perhaps at the local level, in terms of research, product licensing, certification and monitoring with less reliance on industry. This was recognized as the lesson to be learned when dealing with any future development.

## ANNUAL MEETING AWARDS AND PRIZES

### **LIFETIME ACHIEVEMENT AWARD**

The IUGA Lifetime Achievement Award is presented to an IUGA member who has made an outstanding contribution to IUGA and the field of urogynecology. This year's recipient, Paul Riss (Austria), is a founding member of the Austrian Society of Urogynecology and Reconstructive Pelvic Surgery (AUB) and the Austrian Continence Society. He has also served as President of both IUGA and AUB, as well as serving as Editor-in-Chief of the *IUJ* from 2011-2016.



### **OSCAR CONTRERAS ORTIZ AWARD**

This new award honors the memory of Oscar Contreras Ortiz, one of the founders of the *IUJ* and IUGA President from 1996-1998. This award recognizes the most impactful publication in the *IUJ* in the previous year. This year's awardees are Vergeldt TF, Weemhoff M, Int'Hout J, and Kluivers KB for their publication, *Risk Factors for Pelvic Organ Prolapse and its Recurrence: A Systematic Review*.



### **AXEL INGELMAN-SUNDBERG BEST ABSTRACT PRIZE**

This award honors the memory of Axel Ingelman-Sundberg, one of IUGA's founding fathers and its first President. This year's awardees are D'Souza JC, Monga A, Tincello D, Sultan AH, Hillard TC, Grigsby S, Kibria A, Jordan CF, and Ashmore C. for their abstract *Perineal Trauma in Subsequent Delivery After Previous Obstetric Anal Sphincter Injury: A Multi-centre Study*



### **BEST BASIC SCIENCE ABSTRACT PRIZE**

This year's Best Basic Science Abstract Prize was awarded to Ford A, Asfour V, Taylor V, Gibbs K, Fernando R, Digesu A, Khullar V, for their abstract *Diamine Oxidase and Mast Cell Count: Two Separate Roles in the Pathogenesis of Bladder Pain Syndrome*.



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### **BEST ABSTRACT PRESENTED BY A PHYSICIAN-IN-TRAINING PRIZE**

This 2018 Best Abstract Presented by a Physician-in-Training Prize was awarded to Karmakar D, Dwyer PP, Nikppor P, Schierlitz L, for their abstract *Simple Closure with Conservation of the Sling versus Excision for Tape Extrusion: Which Provides the Best Outcome?*



### **ULF ULMSTEN LECTURE**

Since 2005 IUGA has celebrated the contributions of Ulf Ulmsten to the field of urogynecology with this named lecture. This year's lecture, *The Ideal Birth [in the developed world] in 2018 is UR-CHOICE!*, was presented by Don Wilson (New Zealand).

### **IUGA RESEARCH GRANTS**

IUGA offers two research grants – one in basic science and one in clinical research. Each grant is \$10,000 USD. The 2018 awards were announced in Vienna during the Annual Business Meeting.

- » **2018 Basic Science Research Grant:** Zhuoran Chen (Australia) for the project titled: *Refractory Urge Incontinence: A Battle Between Proinflammatory and Anti-inflammatory Cytokines?*
- » **2018 Clinical Research Grant:** Vatche' Minassian (USA) for the project titled: *Urinary Microbiome and Inflammatory Response in Postmenopausal Women with Urgency Urinary Incontinence Before and After Anticholinergic Treatment*

## FIUGA ACTIVITIES IN VIENNA

### THE GHANA PROJECT

This year's Annual Meeting fundraising activities benefit the Ghana Project - FIUGA's flagship initiative. The Ghana Project is an FPMRS fellowship program with sites in both Accra and Kumasi, Ghana. To learn more about the progress of the program from its inception in 2013 to today, please visit [www.fiuga.org/ghana-project/](http://www.fiuga.org/ghana-project/). Below, this year's fellows share the impact of being able to attend the IUGA 43rd Annual Meeting.



*FIUGA supported the Ghanaian fellows and faculty to attend the Annual Meeting.*



**OBED HAYROD  
ATOMO-HAMMOND**  
*Ghanaian Fellow*

Hello IUGA! My name is Obed Atomo-Hammond, a fellow from Accra, Ghana, and an attendee of Vienna 2018. I joined the Urogyne fellowship by inspiration from a man I respect in the field. Coming from a country where Urogynecology is little known even among the general doctor's population, my expectations were with mixed feelings.

My first impression was meeting so many Urogyne specialists and fellows during the pre-conference registration. Meeting so many gurus in the field I had only read about in textbooks and journals face-to-face for the first time solidified my confidence and aspirations that I made the right choice.

The workshops were well organized with hands-on teaching models and were intensely interactive. What made me even more happy was the fact that there were manuals on workshops I couldn't attend available in the meeting app.

My most memorable moments were the Fun Walk/Run in the rain!! and the Fellows' dinner by the riverside. My heartfelt gratitude goes to IUGA's President and all the organizers who made the IUGA Annual Meeting in Vienna a memorable experience!

The 43rd IUGA conference for me was an eye opener and it afforded me the opportunity to acquire new information, knowledge and skill in new areas of urogynecology. Insightful presentations, debate and hands-on workshop was what I needed to shape my practice and also to give better care to my patients. The conference opened the door into the need to add on to knowledge and academia through research. Being on the Danube with the city of Vienna in panoramic view is an unforgettable memory!



**VORMAWOR ANDREW  
PANYIN**  
*Ghanaian Fellow*

### PEDAL TO VIENNA

Thank you to Karl Tamussino for arranging a group cycling tour from Munich, Germany to Vienna, Austria. Fourteen participants plus a van driver made the trip, and along the way raised funds for the Ghana Project.



## FUN RUN/WALK

In our biggest turn-out yet, over 120 participants joined us in the pouring rain for this year's FIUGA Fun Walk/Fun Run, which took place in Donaupark in Vienna. This year's participants included corporate and affiliate teams (THANK YOU to Boston

Scientific, Coloplast, Contura, Promedon, Medtronic, Status Plus, and the British Society of Urogynaecology), meeting attendees, and guests.



Rainy Start



Fastest Female Runner:  
**Gillian Fowler**



Fastest Male Runner:  
**Trevor Kattenberg**



Best Team:  
**British Society of  
Urogynaecology**

## FUNdraising for FIUGA

For the first time this year, participants could create a personal fundraising webpage to raise additional funds to support the Ghana Project. This new initiative brought in an additional \$4,000! Top fundraiser bragging rights for

this year's Fun Walk/Run go to Lynsey Hayward, who raised \$1,800 for the cause. Jan Willem de Leeuw raised over \$600 as he pedaled his way from Munich to Vienna. Thank you to ALL our individual FUNdraisers!

## SILENT AUCTION

This year's FIUGA Silent Auction did not disappoint! Items available included preceptorships, vacation homes in sunny locales from Canada to Australia, as well as Vienna and

Nashville site-seeing passes. Thank you to all who donated and bid on items!

## HONORED MENTOR AWARDS

FIUGA's Honored Mentor Award was created as a means for members to show their appreciation and gratitude for the unwavering support, guidance, and lasting impact their mentor has had on their careers. This year, three outstanding

mentors were honored: Linda Cardozo (UK), Peter Dwyer (Australia), and Paul Riss (Austria). Congratulations to these well-deserving awardees!





## PHYSIO CORNER



**BARY BERGHMANS, PHD,  
MSC, RPT**

Associate Professor

### THE DOOR-TO-DOOR WORKSHOP OF THE PELVIC FLOOR REHABILITATION SPECIAL INTEREST GROUP

Nine years ago, recognizing that conservative assessment and treatments were more and more in the spotlight of health care providers dealing with pelvic floor dysfunctions,

IUGA created the Pelvic Floor Rehabilitation Special Interest Group (SIG). One of the goals of the SIG remains to increase the use of pelvic floor rehabilitation

among IUGA members. Thus, each year the SIG organizes a multidisciplinary workshop on a hot topic in urogynecology. At this year's meeting, the SIG offered its so-called Door-to-Door workshop for the 5<sup>th</sup> time to address gaps in knowledge and skill related to conservative assessments and interventions.

IUGA has a long-standing tradition of opening its doors not only to medical doctors but also to psychologists, sexologists, physiotherapists, nurses and other allied health professionals. The 'Door-to-Door' concept for this year's workshop aimed to bring together all relevant disciplines who surround the patient with (chronic) pelvic pain ((C)PP) and sexual dysfunction. The patient is in front of two identical doors. Behind these doors the medical doctor and other allied health providers are ready to assess, discuss, treat and evaluate the patient's health problem and work together in a multidisciplinary setting. To realize this, mutual understanding, cooperation and demonstration of clinical practice and effects are paramount.

Building on the 2017 Ulf Ulmsten lecture and its publication in the *International Journal of Urogynecology*,<sup>1</sup> this IUGA workshop brought medical doctors and other health providers shoulder to shoulder to provide an evidence-based biological rationale and clinically relevant hands-on training about diagnostics and conservative treatment in women with (C)PP and sexual dysfunction. Bary Berghmans, chair of the workshop and the IUGA Pelvic Floor Rehabilitation SIG, introduced the Door-to-Door concept and then explained and discussed the underlying working mechanisms of pelvic

physiotherapy for (C)PP and female sexual dysfunction, concepts and principles of pelvic floor rehabilitation, patient selection for pelvic physiotherapy, current level of evidence, how this evidence is linked to the medical profession and how is it implemented into clinical practice. Bert Messelink, urologist and sexologist, presented sexological diagnostic consultation and evaluation in (C)PP and female sexual dysfunction, followed by Maeve Whelan and Maura Seleme, both pelvic physiotherapists and IUGA SIG Pelvic Floor Rehabilitation ambassadors, who covered the practical part of assessment, physiotherapeutic consultation, and treatment. They built on the biological rationale and showed participants innovative and effective assessment strategies and tools and treatment modalities. Sohier Elneil, urogynecologist, showed how multidisciplinary modeling and conservative treatment fits in relevant care and can be beneficial for all women with these often poorly understood and treated health problems. She showed evidence-based algorithms used in her service. Bert Messelink then spoke about multidisciplinary guidelines and how these can be incorporated in daily practice. The last speaker, urologist Desiree Vrijens, reflected on the multifactorial urological aspects of urgency/frequency syndromes and their relation to chronic pelvic pain and what to do from the urological point of view. The workshop was attended by gynecologists, physiotherapists, and some midwives, nurses, sexologists and urologists, so, clearly a multidisciplinary audience.

### REFERENCES

Berghmans B. Physiotherapy for pelvic pain and female sexual dysfunction: an untapped resource. *Int Urogynecol J*. 2018 May;29(5):631-638. doi: 10.1007/s00192-017-3536-8. Epub 2018 Jan 9.

## IUJ CORNER



**LINDSAY MACMURRAY**  
IUJ Managing Editor

### CELEBRATING PEER REVIEW

On behalf of all the Editors of the *IUJ*, we would like to dedicate this *IUJ* Corner to recognizing the essential role of our reviewers. We appreciate the invaluable role that our reviewers play in maintaining the high quality of research published in our journal. To further share our appreciation of our peer reviewers, the *IUJ* will be participating in Peer Review Week 2018. Now in its fourth year, Peer Review Week is



**REBECCA G. ROGERS  
MD**  
IUJ Editor-in-Chief

an annual, global event that celebrates the critical role that peer review has in publishing. This year, Peer Review Week is from September 10-15. Throughout the week, the *IUJ* will be highlighting the exceptional work of our peer reviewers on social media. We also encourage you to follow #PeerRevWk18 and #PeerRevDiversityInclusion on social media and to check out <https://peerreviewweek.wordpress.com> to learn about various virtual and in-person activities taking place that week.

The theme of Peer Review Week 2018 is “Diversity and Inclusion.” Central to the mission of the *IUJ* is the global advancement of urogynecology research. One way that we serve our mission and promote diversity and inclusion is by ensuring international representation from our peer reviewers. We are proud to share that our ad hoc reviewers represent 70 countries and our Editorial Board Members represent 28 countries! We welcome the participation of experienced and new reviewers. The *IUJ* has a mentored reviewer category and we encourage early-career urogynecologists to become involved with the journal by reviewing or submitting commentaries on original research articles. If you would like to become more involved, please contact Lindsay MacMurray, Managing Editor ([iujeditorialoffice@gmail.com](mailto:iujeditorialoffice@gmail.com)).

Lastly, we would like to take a moment to recognize our top Editorial Board Members from the past year. The following Editorial Board Members provided the most reviews in the past year and we are very grateful for their service to the journal!

01. R. Keith Huffaker (USA)
02. Tsia-Shu Lo (Taiwan)
03. Danny Lovatsis (Canada)
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## UPCOMING MEETINGS

### ICS (International Continence Society)

August 23-31, 2018

Philadelphia, Pennsylvania, United States

### IUGA Regional Symposium

September 7-9, 2018

Chennai, India

### 17th Biennial Meeting of the International Gynecologic Cancer Society (IGCS 2018)

September 14-16, 2018

Kyoto, Japan

### ESCP 2018 Scientific Annual Meeting

September 26-28, 2018

Nice, France

### 38th Congress of the Société Internationale d'Urologie

October 4-7, 2018

Dragon City, Seoul, South Korea

### AUGS PFD Week 2018

October 9-13, 2018

Chicago, IL, USA

### FIGO

October 14-19, 2018

Rio de Janeiro, Brazil

### EUGA 2018

October 25-27, 2018

Milan, Italy

### BAUN Annual Conference and Exhibition

November 26-27, 2018

Bournemouth, United Kingdom

## UPCOMING IUGA ANNUAL MEETINGS

*Celebrating the IUGA 44th Annual Meeting and AUGS PFD Week 2019*

**AUGS/IUGA**

SCIENTIFIC MEETING

September 24-28, 2019 | Nashville, TN - USA

[www.augs-iuga2019.org](http://www.augs-iuga2019.org)

### 2020 IUGA 45th Annual Meeting

The Hague, The Netherlands - June 24-27, 2020











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## IUGA OFFICE - OFFICE@IUGA.ORG

<b>IUGA Office - North America</b> <b>Office:</b> +1 (952) 683 9037 <b>Fax:</b> +1 (952) 314 8212 <b>Address:</b> 14305 Southcross Dr., Suite 100 Burnsville MN, 55306, USA	<b>IUGA Office - Europe</b> <b>Office:</b> +31 (0)75-647 63 65 <b>Fax:</b> +31 (0)75-647 63 71 <b>Address:</b> Zaanweg 119A, 1521 DS Wormerveer, The Netherlands <b>Mail:</b> PO Box 94, 1520 AB Wormerveer, The Netherlands
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