



ICS Neuro-urology Promotion Committee Meeting Agenda

Monday 26th August 2013,

Venue: Centre Convencions Internacional de Barcelona (CCIB)

Room; M212

Time: 12.00-14.00,

Known Attending: Homero Bruschini, Emmanuel Chartier-Kastler, Márcio Averbeck, Jalesh Panicker, Thomas Kessler, Ryuji Sakakibara, Jerzy Gajewski, Enrico Finazzi Agro, Waleed Altaweel, Brigitte Schurch, Helmut Madersbacher, Andrei Manu-Marin, Melissa Davies

Known Apologies: Louise Kurczycki

In Attendance: Dan Snowdon

Please be aware that the below timing proposed by the office are approximates.

1. Committee picture to be taken 12.00-12.05
2. Approval of Beijing committee meeting minutes (Attached) 12.05-12.10
3. Terms of office (Attached) 12.10-12.15
4. Terms of Reference (Attached) 12.15-12.20
5. Collaboration of this Committee with other Committees of the ICS, especially with the Educational Committee, the Continence Promotion Committee and the Urodynamics Committee
6. Discussion on Guidelines possibly/ hopefully to be produced by our Committee
 - a) Intermittent Bladder Catheterization
Attached you will find a draft from Marcio Averbeck as a basis for discussion Waleed Altaweel has already expressed his wish to collaborate on this topic. Our Committee members are asked to bring guidelines on Intermittent Catheterization from other societies. I would like to draw your attention to the EAUN (European Association of Urology Nurses) Guidelines which have also produced Guidelines on urethral catheterisation. <http://www.uroweb.org/nurses/>.
 - b) *Guidelines in collaboration with EAU, preliminary report on discussion with Prof. Jürgen Pannek*
7. Fellowship 13.40-13.55
 - > Letter issued to Allergen regarding sponsorship discussion (See Appendix)
8. AOB



ICS Neuro-urology Promotion Committee Meeting Minutes

Sunday 14th October 2012,

Time: 13.00-15.00

Venue: China National Convention Center (CNCC), Beijing

Room: 406

Present: Anthony Stone (Chair), Enrico Finazzi Agro, Helmut Madersbacher, Brigitte Schurch, Limin Liao , Jerzy Gajewski, Ryuji Sakaibara

Apologies: Waleed Al Taweel, Emmanuel Chartier-Kastler, Graham Creasey, Karel Everaert, Andrei Manu-Marin, Clare Fowler, Homero Bruschini, Victor Nitti, Pablo Gomery, Jean Jacques Wyndaele

In Attendance: Avicia Burchill

Also in Attendance: Marcio Averbeck, Jalesh Panicker, Louise Kurczykzi, Ajay Singla

1.	Committee picture to be taken
2.	<p>Approval of Glasgow committee meeting minutes (Appendix A) TS explained that Louise, Marcio and Jalesh will be ratified at the AGM but they are present today. Minutes were reviewed. JG proposed HM seconded Motion – minutes approved all in favour</p>
3.	<p>Terms of office (Appendix B)</p> <p>It was discussed to write to Karel Everat & Victor Nitti asking them to stand down from the committee due to lack of activity and attendance. JJ Wyndaele, Piotr Radziszewski have stepped down, Graham Creasey will step down as of the Beijing AGM. Those present, HM, EF, LL, RS, BS, confirmed they wanted to renew once after the Barcelona AGM Homero Brushcini, Andei Manu confirmed prior to the meeting they wished to renew after the Barcelona AGM.</p> <p>A discussion was held as to who to recruit to the committee and it was agreed that there should be someone who is involved directly in sexual dysfunction. JP also suggested a bowel expert. HM to ask Thomas Kastler to express an interest.</p> <p>ACTION POINT: TS to write to Karel Everat & Victor Nitti asking them to stand down from the committee <i>Post Script Note: Both confirmed they are willing to stand down</i></p> <p>ACTION POINT: AB to contact Waleed Altaweel and Clare Fowler to find out if they wish to renew after the Barcelona AGM. This will clarify exactly how many to replace. <i>Post Script note: Waleed confirmed he wished to renew his position. Clare Fowler confirmed that she wished to stand down with immediate effect.</i></p>

	<p>ACTION POINT: Ask for expressions of interest from those with experience/interest in of sexual and bowel issues of neurogenic patients to join.</p>
	<p>AS briefed the committee about the strategic planning of the ICS in that the Board plan is to put a 5 year plan for the ICS. The Board are looking at certain topics – governance/revenues etc. An external company with experience of strategic planning have been appointed called Compass. A questionnaire will be sent out to the members to get feedback and to invite committee chairs and members to a brain storming session meeting in January. The next meeting in March to form a document by June ready for Barcelona for the next 5 years. JG suggested to outline what the ICS does i.e. members which country at the beginning of the questionnaire. AS left the meeting</p>
<p>4.</p>	<p>Terms of Reference It was agreed to amend the purpose of the committee within the terms of reference</p> <p>Aim of this committee is to promote neuro-urology and to assist centres requesting help, set up and development of this sub-specialty</p> <p>The functions were also discussed and it was agreed to make “promote educational efforts” first and re-arrange order. ACTION POINT: AB to update committee terms of reference on paper/website etc.</p>
<p>5.</p>	<p>Future Neurourology promotion projects: workshops, local primary /community care education</p> <p>AS wanted to know about how to coordinate workshops at the annual meeting and to look locally about how to promote neurourology in your community. It was discussed about going over the EAU guidelines but should we look at it globally. EF asked if you can promote a workshop outside of the annual meeting. TS there might be expertise that might be available to join annual meeting workshops – re locally the education committee deals with the international meetings. Could our committee propose a neuro course? HM stated that we could draw the education committee’s attention to something in particular and ask them to incorporate such topics. TS stated that this is exactly what he had in mind. MA – noted that the eau guidelines in certain parts are not updated since 2008. HM this could be our job to update. J P referencing the NICE guidelines about management of neurogenic bladder which can be circulated to everyone. TS stated that its important not to reinvent the wheel and its important to take certain areas of these guidelines to promote to the communities. RS thinks that Brain imaging may facilitate understanding of Neurourology. JG we may need to think about how you treat in different countries. TS stated that this was agenda item 6 but can we encompass this into the whole proposal. LK should we prioritise the topics. TS lets use the forum to brainstorm and then see what we want to cover.</p> <p>Further discussion was held and the following proposal was suggested: We propose that we would select specific topics on neurourology which we can develop into educational</p>

	<p>modules to encourage workshop organisers to input into their content. TS will send a mail to ask for specific topics and generate a specific educational module. The topics would include aspect of therapy and diagnosis. These educational efforts should take into consideration the differences in global management. These should also be used to make contact with other societies/groups.</p> <p>JP can we have something to advise the scientific chair to include neurourology. TS proposed that the neuro-urology promotion committee strongly encourage the scientific committee to have dedicated state of the art/round table on neuro-urology.</p> <p>ACTION POINT: TS to e-mail committee for specific ideas for the lecture/education module. ACTION POINT: TS to send a specific note to future scientific chair to encourage plenary lectures on neuro-urology.</p>
6.	<p>Standard management: global differences, are EAU guidelines sufficient? Included above.</p>
7.	<p>Report on pudendal neuropathy (FP) TS stated that Francesco Pesce was meant to have a report on pudendal neuropathy. TS stated that he did not feel that this was part of the neuro-urology promotion committee remit. TS proposed that we encourage the board of trustees whether they would consider setting up a pelvic pain committee. JG the SSC are looking at pelvic pain and this maybe enough. The committee agreed. JC entered the meeting.</p>
8.	<p>Fellowship issues: length of fellowship, research component</p> <p>AB explained that due to ongoing funding projections the Board of Trustees have lowered the cap on the awards and grants to be issued next year and going forward. Funding was discussed and it was agreed to make a proposal to the board to ask Allergan to support a neuro-urology fellowship.</p> <p>JG suggested that the local host ask for sponsorship but the committee agreed that this may not be so successful.</p> <p>Further discussion about the fellowship length and AB explained that it can be anywhere from 1 week to 3 months. The committee feel that 3 months is a requirement for the neuro-urology fellowship.</p> <p>ACTION POINT: TS to be in contact with Board to propose contact with Allergan to get funding for fellowship.</p> <p>ACTION POINT: AB to change the wording on the additional neuro-urology fellowship guidelines to stipulate that the fellowship should be for 3 months – no more or less. AB to send wording to committee for confirmation.</p> <p>ACTION POINT: AB to check whether the fellows are advised that a report must be prepared after they have completed their fellowship i.e. is it on the application.</p>

	There was also a proposal to receive a report from the host.
9.	<p>Discuss information/ dissemination on intermittent catheterization</p> <p>This agenda point was discussed as part of developing topics and promotion. It was suggested that this be one of the topics for the educational module.</p>
10	<p>Any other business</p> <p>Budget 2013: Request for mid-year meeting.</p> <p>JP neurourology is different from other activities from the ICS and we have many stakeholders. Do we want to start engaging with other societies – we just see the tip of the iceberg with patients – they are being managed by a GP or urologists. But often physician don't know when to refer. JP suggested that we approached other organizations to introduce the idea of the neurourology. TS in our overall promotional ideas is to other sections of the medical community. This point was added to the proposal about topic development. JP stated that this could be extended at the regional education courses.</p>

Neuro-Urology Promotion Committee Terms of Office

Member	Committee Role	Term Start	Term End	Term Yrs	Elected	Term details	Renew	Stand Down	Additional Information
Anthony Stone	Chair	18-Oct-12	15-Jul-15	3	Y	3 year term will finish 2015 - can renew once by formal election			Announced decision to step down June 2013
Emmanuel Jean Chartier Kastler	Committee Member	24-Oct-08	30-Oct-14	6	N	6 year term will finish in 2014- CANNOT renew			
Jerzy Gajewski	Committee Member	24-Oct-08	30-Oct-14	6	N	6 year term will finish in 2014- CANNOT renew			
Pablo Gomery	Committee Member	24-Oct-08	30-Oct-14	6	N	6 year term will finish in 2014- CANNOT renew			
Helmut Madersbacher	Committee Member	02-Oct-09	03-Jul-15	3	N	6 year term will finish in 2015- CANNOT renew			
Homero Bruschini	Committee Member	02-Oct-09	03-Jul-15	3	N	6 year term will finish in 2015- CANNOT renew			
Ryuji Sakakibara	Committee Member	21-Oct-09	03-Jul-15	3	N	6 year term will finish in 2015- CANNOT renew			
Andrei Manu-Manu	Committee Member	02-Oct-09	03-Jul-15	3	N	6 year term will finish in 2015- CANNOT renew			
Jalesh Panicker	Committee Member	18-Oct-12	03-Jul-15	3	N	3 year term will finish in 2015 - can renew			
Louise Kurczycki	Committee Member	18-Oct-12	03-Jul-15	3	N	3 year term will finish in 2015 - can renew			
Márcio Averbek	Committee Member	18-Oct-12	03-Jul-15	3	N	3 year term will finish in 2015 - can renew			
Melissa Davies	Committee Member	18-Oct-12	03-Jul-15	3	N	3 year term will finish in 2015 - can renew			
Brigitte Schurch	Committee Member	26-Aug-10	15-Sep-16	6	N	6 year term will finish in 2016- Cannot renew			
Enrico Finazzi Agro	Committee Member	26-Aug-10	15-Sep-16	6	N	6 year term will finish in 2016- Cannot renew			
Limin Liao	Committee Member	26-Aug-10	15-Sep-16	6	N	6 year term will finish in 2016- Cannot renew			
Waleed Altaweel	Committee Member	26-Aug-10	15-Sep-16	6	N	6 year term will finish in 2016- Cannot renew			
Thomas Kessler	Committee Member	29-Aug-13	15-Sep-16	3	N	3 year term will finish in 2016- can renew once			New member 2013

Nominations 2014

3 people cannot renew, 3 committee positions available 2014

1 Chair position available.

Key	
Colour	Meaning
	Stepping down in Barcelona
	Will need to confirm if renewing/ positions will need to be advertised after Barcelona
	New member/position

ICS Neurourology Committee Terms of reference

1. PURPOSE: Aim of this committee is to promote neuro-urology and to assist centres requesting help, to set up and develop this sub-specialty

2. FUNCTIONS:

1. To promote educational efforts, including materials related to Neurourology
2. To manage and run the Neuro-Urology Fellowship
3. To encourage multidisciplinary and multicentre research relating to Neurourology
4. To contribute to the creation of standards and guidelines in Neurourology in collaboration with other relevant committees and organisations

3. RESPONSIBLE TO: ICS Board of Trustees and ICS Membership

4. COMPOSITION:

Total Members	Method of Appointment	Name	Term of Office
General Secretary	Ex Officio		2 years
Chair:	Elected. A member must sign his/her agreement to stand. This nomination is signed by nominator and seconder, all being ICS members. The Chair would normally have served as a committee member, either current or in the past. Nominations received by April 1st as advertised. Voting regulations as stated.	See Membership	Term of office: 3 years, renewable once by formal election.
Membership	All members of ICS committees must be active ICS members (paid for current membership year) (By-law 2.3.2) and have completed a disclosure form.	See Membership	3 years, renewable once by Chair and committee approval. Further terms could be approved in exceptional circumstances and by referral to the ICS Trustees. Members must attend at least 1 out of 3 annual meetings to be considered for a

			renewal of term.
Subcommittees (if any)			
	Neuro-Urology Guidelines	See Membership	
Updated September 2013			

- 5. MEETINGS:** One face-to-face meeting during the Annual Scientific meeting; other deliberations normally by electronic media. Another meeting will be considered if necessary and will ideally be combined with a major European conference.
- 6. QUORUM:** One third of committee membership plus one. For example, a committee of ten will have a quorum of four members.
- 7. MINUTES:** Minutes are recorded at each meeting and posted on the ICS website in accordance to ICS Bylaw 6.1-6.4).
- 8. REPORTING & ROLES:** The Chair of each committee is required to prepare an annual report to the Board of Trustees outlining achieved goals/budget requests and future objectives and strategies. The Chair is also required to be present at the Annual General Meeting should the membership have any questions over committee activities.

The committee Chair is also responsible for submitting an interim report to the Board of Trustees' mid-term meeting. The date that this report will be required will be given in advance each year.

For Terms of Office information please see the [Neurourology Committee Membership page](#).



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Allergan

24 July 2013

Dear Sir/Madam,

The Neurourology Fellowship programme of the ICS gives newly trained health professionals a unique opportunity to spend up to 3 months with renowned specialists from developed countries. We are asking you to help us fund these fellowships.

The ICS has run this programme since 2009. The fellowship opportunities are designed to provide a range of opportunities for continence specialists (of any profession) to gain bladder/bowel skills in research, clinical practice or education at expert centres. In keeping with the objectives of the ICS priority is given to members from less economically developed countries, allied and non-medical health professionals, and members in training.

The Neurourology Fellowship gives the chance for applicants to learn from experts in Neurourology at select international centres of excellence – see attached information. Experience gained may be in surgery, laboratory research, or conservative management of incontinence. Applications are judged on the clinical relevance of the proposed fellowship and the anticipated impact on career and future clinical practice.

We are seeking your support for the Neurourology Fellowship for the next three years - £10,000 (GBP) per year. This commitment would ensure continued success of the programme and the future careers of young, up and coming professionals. The funding would support at least one fellow per year to spend up to three months at the host centre of their choice. The funding will cover economy travel expenses, accommodation and a per diem all of which will be administered by the ICS. Applicants are asked to submit a budget with their application. The ICS Awards Committee will review and approve the applications.

We sincerely hope that you are interested in this opportunity and would like to arrange a meeting at the Barcelona ICS meeting this August to discuss (between 26-30 August). Alternatively, a teleconference could be arranged instead. If you already have a system in place where the ICS can apply for a grant we would be very interested in applying.

We very much look forward to your reply.

Yours truly,

A handwritten signature in black ink, appearing to read 'Sender Herschorn', written in a cursive style.

Sender Herschorn
ICS General Secretary

Fellowships in Neurourology

Objectives and Practical Information

Fellows must attend the centres for the full **3 months** and will be held at one of the following centres:

Centre	Fellowship Chair
Montreal (Canada)*	Jacques Corcos
San Francisco (USA)	Graham Creasey
Ghent (Belgium)	Karel Everaert
Halifax (Canada)	Jerzy Gajewski
Paris (France)*	Emmanuel Chartier-Kastler and Pierre Denys
Innsbruck (Austria)	Helmut Madersbacher
Sacramento (USA)	Tony Stone
Antwerp/Brussels (Belgium)	Jean Jacques Wyndaele

The fellow must choose a centre depending on their original location and the ability to obtain the necessary visa of entry to the host country.

* To attend the Paris or Montreal centres the candidate must be fluent in French.

These fellowships are open to all health professionals (physicians, nurses, physiotherapists, technicians, etc)

Candidates must be within 5 years of Graduation at the start of their fellowship.

The objectives of the Fellowship in Neuro-Urology are:

- To describe the basis of neuro anatomy of the lower urinary tract (LUT)
- To learn to classify the steps of management for the most commonly encountered neurological conditions responsible for neurogenic bladders such as: SCI, MS, Parkinson disease, congenital cord malformations, and strokes.
- To perform a (video) Urodynamic study, to describe its indications and to interpret it.
- To describe the non surgical methods of bladder emptying (CIC, indwelling catheters, Crede) and storage (physio, time voiding, bladder drills, behavioural modifications, etc)
- To be able to assess the value of electrostimulation/modulation in these diseases.
- To describe the technique, indications, results, pitfalls and risks of the use of Botulinum toxin.
- To describe the indications, techniques and role of surgery in the management of neurogenic bladders (stents, sphincterotomies, bladder augmentations, derivations, etc).

These objectives will be achieved through:

- Oriented readings
- Short presentations (weekly)
- Observations of surgical cases
- Practical experience with urodynamics (medical status permitting)
- Discussions, rounds, visits on the wards, etc

Evaluation of the candidate's performance:

- Written report by the fellow at the end of their fellowship
- Oral evaluation by the staff responsible
- Description of one or several realistic projects aiming to change Neuro-Urology practice in their own country
- Follow-up of the application of acquired knowledge in his country by the staff responsible (by emails and mail or eventually a local visit), in the 6 and 12 months after the fellowship

Evaluation of the fellowship:

A formal evaluation questionnaire will be completed by each candidate at the end of their fellowship in order to help the ICS to improve these experiences.

To the Board of Trustees of the ICS

To Sender Herschorn, GS of the ICS

Copy to Dan Snowdon, ICS Office

RE: Neuro-Urology Committee

Dear Trustees, dear General Secretary,

The members of the committee were informed that Anthony Stone has regretfully decided to step back as the chairman of the Neuro-Urology Committee. First of all we would like to thank Anthony for his work and all the efforts he has put into this committee during the last years after having taken over the chairmanship from Francesco Pesce.

Reading the information from the ICS office we were concerned about plans to dissolve this committee. We – all members of this committee (only Gomery did not answer yet) – would like to state that this committee must survive.

May I cite some statements of the committee members:

Emmanuel Chartier-Kastler wrote: *“I have the strong feeling that the only pure neurourology committee still existing is at ICS and that there is a tremendous role for this committee in terms of knowledge and promotion of neurourology. EAU decided a few years ago to merge within ESFFU: there is no interest for neurourology from gynecologists or some functional urologists. Pure neurourology does not exist anymore at EAU... So worldwide, it means that in case of disappearance of our committee it would only exist a committee within SIU. The scientific level of ICS and it's multidisciplinary way of working are the good arguments to keep it... Neuro-Urology is of high clinical value but unknown and dedicated to a disabled population which is not always of major interest for other colleagues. My opinion is that your letter has to be sent and I sign it with all of you.”*

Jalesh Panicker states: *“The committee is one of the few standing bodies in the international arena dedicated to the promotion of neurourology. Unique is the multidisciplinary nature of this committee thus providing a holistic view to neurourology practice.”*

Melissa Davis: *“Furthermore, the importance of education on these topics is essential and I support you in pushing forward this as an essential aspect of the committees work.”*

We – the members of the committee – would like to strengthen our position by developing a convincing plan of action to be discussed already during the next meeting in Barcelona (*especially addressed by Jerzy Gajewski , Andrei Manu-Marin and Marcio Averbek*) . Several proposals have already been made:

- (1) The committee is currently working on ICS guidelines for neurogenic lower urinary tract dysfunction and we do this in collaboration with the EAU. Already after the ICS Meeting in Glasgow we had contacted Prof. Jürgen Pannek, currently chairman of the EAU guidelines on neurogenic lower urinary tract dysfunction. He welcomes this collaboration. The plan is, that we go carefully through these EAU guidelines to amend and to correct them where necessary and update them based on the latest literature. The Barcelona meeting will allocated different chapters of the EAU guidelines to different members of our committee. Guidelines

on intermittent catheterization is definitely necessary taking into account that the various types of catheters – hydrophilic and non-hydrophilic – available on the market and techniques applied (Marcio Averbeck).

(2) We should “*effectively cross-link with other committees*” (Jalesh Panicker), e.g. with the mixed committee and especially with the Educational Committee. We feel that in most of the Educational Courses also Neuro-Urology should be represented with at least one presentation and we would like to support the Educational Committee in this regards by nominating speakers for such lectures. Thus neurogenic urinary and fecal incontinence should be promoted and the awareness for these topics increased.

(3) Emmanuel Chartier-Kastler proposed to found an intersociety Neuro-Urology group (ICS, SIU, EAU, AUA?).

Also the question of an interim chairman was discussed and so far 8 committee members addressed this issue and support this idea. These committee members proposed that Helmut Madersbacher should be the interim chair and should set up the program/agenda for the next meeting in Barcelona.

Could the authorities of the ICS inform us, if the committee members could nominate the interim chairman already now, moreover, we would like to ask when the new chairman can be elected. Will this be already possible in Barcelona or will this only be possible when the official term of Anthony is finished?

We are also very pleased that Sender, our GS, has the intention to attend our meeting and he is of course very welcome.

Kindest regards,

The members of the Neuro-Urology Committee

Altaweel Waleed

Kurczycki Louise Liao

Averbeck Marcio

Limin Madersbacher

Bruschii Homero

Helmut Manu-Marin

Chartier-Kastler Emmanuel

Andrei Panicker Jalesh

Davies Melissa

Sakakibara Ryuji

Finazzi Enrico

Schurch Brigitte

Gajewski Jerzy

Stone Anthony

Kessler Thomas