

## ICS 2008 AGM Transcript

**22 October, 2008, Cairo**

**Werner Schaefer:** (11:23) Good morning, so due to the entrance control I can be quite confident that only ICS members, paid up members, are in the room. I would like to start to open the AGM, in Cairo, for the 38<sup>th</sup> meeting. So welcome. Normally this meeting is Chaired by the General Secretary but in its absence it can be elected from one out of the trustees and in fact there are only two trustees in the moment officially in office – Ajay Singla and me, so I will do it. First point as usual. So the next point would be approval of the minutes from the Rotterdam meeting, August 24<sup>th</sup> last year (2007) in the Netherlands. Any comments to the minutes to that meeting that have been sent around and have been discussed? I don't see anyone making any remarks on these minutes so I will approve and sign them? Any matters arising from these minutes that should be discussed in here? I don't see anybody who has an interest to add something there.

So now we come to the long awaited and hard worked for items which is the amendments to our Articles of Association and our Bylaws, and our Articles actually allow voting on all resolutions by show of hands but because we thought it's a sensitive issue we decided to run this as a poll with ballot paper to provide the highest possible anonymity for all members and you should have all received ballot papers at the entrance and those who have proxy votes the equivalent number of the papers. The vote will be counted and organised by our office, so that's mainly Dominic Turner who also organised the electronic voting and he will be the official supervisor of the voting today, and this is important because it has to happen outside of this hall because there are several ballot papers to count. However, if there is anyone willing to volunteer to oversee on behalf of the members I am very happy to accept this if you agree, and if I may ask for example those two gentlemen over there, **Norman Zimmerman** from Los Angeles, and **Guus Kramer** would you be willing to do that? (inaudible answer from those addressed). Ok, if there are no objections from the audience then these two will be our official supervisors of the process. The amended Articles are the result of two years very hard work, and I think I have to really point out one of the main contributors and support, this was Ted Arnold. He always kept us on the run and said we have to look in this, we have to look in this, we have to look in this. These have all been published, in time, a long time ago on the website. We received comments, critiques, suggestions, we took each and everyone very serious and answered everything. So in the end I think we should be very confident that this really is what the members want and that should be accepted. As you will know the special resolution being a special resolution needs a 75% majority to be accepted. Beside all the internal issues which was mainly desires for having shortening in terms of office, more transparency and more representation of the membership, there are other legal requirements due to changes in the UK

charity law, which has not been put by us in there but by our legal advisors but are actually points which I think are not of importance to the membership. (594 words, 16:29, 5m 6secs). So now as you all know the concept is that the General Secretary will have the terms of office of three years, that the membership will be represented by a large Board of trustees who all have full legal rights and responsibility to represent this charity, and because this is open and according to our existing Articles there is no maximum number. We accepted the candidacy of 19 for the trustee position, and we will vote also on these. This large Board of trustees should really be able to represent the society and they will have to give clear information every year at the AGM what they have done and what they are planning and they are the main contact points for each and every member at every time during the year to contact them. So are there any questions to the Articles which I am happy to answer? Ok, if there are no questions then please mark on the ballot paper the special resolution and it's very simple, it's yes or no, and then it's my understanding collected by the office staff and by Kenes staff. Ok?

-----Pause while

In addition I think that we can also run that together with the voting for the Bylaws which is an ordinary resolution, that means it just needs a simple majority.

**Unknown:** Can we now vote for both?

Well now you can vote for the Articles, for the amendment of Articles and Bylaws. Well it's clearly marked. Well, the Office thought it better to do that in one. Articles and Bylaws, yes or no.

**Jacques Corcos:** could you repeat that Werner, I'm not sure that everybody understood that.

**Werner Schaefer:** Ok, let me repeat this. Now we are voting for the amendment of Articles and Bylaws. You have separate forms, one for the special resolution changing our Articles and one for the ordinary resolution changing our Bylaws, and they are clearly marked so I don't see any reason why there should be any confusion. While this is happening, due to the – I will not vote, no – while this is happening I think we should be more economic with our time and the next point will be a ballot for General Secretary, and after that a ballot for the trustees. We have received in time and correctly supported three nominations for General Secretary, all are well known and well established ICS members, and nevertheless although these persons are well known we will give each of the candidates one minute, hopefully strict possibility to make a short statement and to keep it in alphabetic order I would like to ask first Jacques Corcos for a short statement.

**Jacques Corcos:** nobody never told us one minute

WS: The office should have done that.

JC: I don't think that is fair.

WS: Avicia, you hear that?

JC: How long so we have?

WS: A minute. Why have they not been told (to Avicia). Jacques complains he did not know. (inaudible response from Avicia). Ok, Jacques, read emails. Sorry (laughter), sorry, Jacques.

JC: Nobody told us that. . .

WS: There have been emails.

JC: Do we have slides?

WS: How will you download them?

JC: Do we have slides? Yes, this is what we are asking for. Avicia ask us for slides.

WS: It's on here? Ok. (22.11, 5m 42sec, 553 words)This one?

JC: Yes. Ok so I am going to try to be brief, it was not planned like that but I am going to try to be brief so I think that's . . . A lot of people know me already but I would just like to say in few word that one of the main reason that I think I am a good candidate to be Secretary of this great association is that I'm in this association for more than twenty years, I serve on the Ad Board (*Advisory Board*) for more than eight years, and as you can, as most of you know during the last few years there was a lot storm and hurricanes passing on this Ad Board and I'm the only survival of these hurricanes and those are why I survived, it's just because I'm a person of good composition usually and I try to negotiate a lot of things and I have been against any kind of extremism in this Ad Board and finally it worked relatively well because I'm still on the Ad Board and I think I have only friends on this Ad Board. Just very quickly to say I put two slide to explain why I am planning to do for the future and the future is obviously to listen to people, and this is extremely important, in my point of view you should be, all the members should be at their view questioned by short questions, by short email regularly to know exactly what is important to do. My main focus is going to be on science, developing science. This is the most important for the society. I would like open science to everybody and give a large view, a large opportunity to everybody to access science, to present science in good condition and you have here the least of what I'm planning to do. I deliver a society, I would like to revisit the structure of the society in term of affiliation to the UK, the UK charity to know if it's really possible, and again what I want to do is here. So my motto: science, consultation, balance, humanism and friendship. Thank you very much (applause)

WS: Thank you. Next will be, Heinz Koelbl. (to JC) I'm very impressed that you have prepared slides not knowing that you would give a presentation (laughter).

JC: Always prepared.

**Heinz Koelbl (HK):** Dear ICS members, it is a honour for me to stand in front of you to apply for Chairmanship, General Secretary of the ICS. I see ICS as very important interdisciplinary society comprising people, all people interested in urinary and faecal incontinence and pelvic floor disorders. It's important due to, as we know, increasing social demands, demographic development in any parts of the world and the growing request in quality of life, and the topics of ICS deal with most challenging feats in human health care. Who am I? Just to let you know, I am Professor of Obstetrics and Gynaecology, so I am a Gynaecologist since 1992. I have been elected twice in my life as Chairman of Department of Obstetrics and Gynaecology and I have been Scientific Committee Chairman in the International Urogynaecology Association and Chairman of the Scientific Committee this year in the ICS. I have been (25.54, 3m 43s, 557). I have been president of the European Urogynaecology Association between 2003 and 2008, I am member of many international societies, I am co-editor of the majority of Urodynamics and Urogynaecological journals, I have more published more than 270 medline-cited publications, I am involved in national congress and international and here you see my disclosures. So what has Heinz Koelbl to do with ICS? Well, I am a member since 1984, I have regularly participated at this meetings with contributions, I have chaired educational courses, I was involved in the Scientific Committee for several times, I have belonged to the Publication Committee of ICS, and this year I am Chairman of the Scientific Committee. What do I want to do with ICS? Well, I see ICS as society for all people interested in the topics as a multidisciplinary institution and I would like to continue and help to support the process, the ongoing process of harmonisation. I think it's a task of ICS to make each topic a worldwide issue supported by systems, a national medical society and the task profile focuses on patient care, continuing medical education and research. But I wish ICS an increasing number of members, you see here and at the end my statement, success is a present packed in hard work. Teamwork is the secret of success, let us work together for good future of ICS. Thank you very much (applause).

WS: Thank you, Heinz. Sherif please. Sherif, you also have slides?

**Sherif Mourad (SM):** Hello everybody. Actually I don't have special words today because I put my biography and my mission on the website which I'm sure all you have read, and I will not say I will do so and so because actually this time the General Secretary will just be one of the trustees and the coming days will be suggestions, agreements, discussions and activities. So we have too many work to do, in many sectors that can serve the patients of voiding disfunctions all over the world, and I'm sure all of you can help in this. I am very pleased after the great success that happened this year for ICS meeting, and I prove to the whole world that the ICS

has recovered and will rather go stronger than before, and I'm sure that any of the three of us will be honoured to serve this society with enthusiasm and sincere activity because we are a big family, and the General Secretary of the society means commitment rather than title. Thank you very much (applause).

WS: Thank you, Sherif. So please mark your ballot paper for the one and only. The decision will be made by simple majority. Ok, unfortunately the ballot papers are not in alphabetical order, it's a slight oversight, I hope you accept this. Ok, so we can continue? The next point is the vote for trustees and I would like to outline there some little differences compared to the vote for General Secretary. Here you have the chance and the opportunity and I think the obligation I think to vote with yes or no, and this is the solution we finally came up. As I mentioned, the old Articles, and we have to vote according to the old Articles, said very simply there is no maximum in the number of trustees but we don't think an unlimited number of trustees will be helpful. Now we have 19 additional candidates because Ajay Singla and me are still staying in and the General Secretary will join among the trustees. So you can vote here with yes or no, please everybody mark clearly with yes or no. (30. 30, 4m.36s, 606w). But you can vote, as I say, for everybody on this list. Peter Rosier has a question, or a comment.

**Peter Rosier (PR):** Can you say how you are going to analyse these, and will there be a minimum threshold?

WS: Well, it is as it said, sorry maybe I should have added this. It says here it's an ordinary resolution and an ordinary resolution is an ordinary majority and that according to UK law, it just means any of the trustees who has more yes than no will be in.

PR: Thank you.

WS: Ok. Thanks for making this clear. There is another question, please.

**Igawa:** It is not question, Jean-Jacques Wynedale is listed a candidate of the trustee. Unfortunately he could not come here and he ask me to reason. He has regular lecture for medical student at his university and he can't cancel that. So that is his message.

WS: Thank you. Any other comments/questions?

Unknown lady: I have a question. I'm a little concerned about the conduct of the election because some people have already voted online and have may be voting twice. There doesn't seem apparently to be any control about that.

WS: The votings will be count here and all those members who have voted electronically and not present here, their vote will be counted. Those who voted electronically and are present here, their vote will be deleted and they are asked to vote here. Here and now. That's according

to our Articles. Does that clarify your concerns?

Unknown lady: Yes, thank you.

WS: Ok, so please mark your sheet and that will be then collected again from the Kenes people. Ok, still sake of time the next thing is the trustees report. This will rather short this year, you know I could now continue lament now continuously about whatever times we had, changes we had but I don't want to do it. I only would like to refer to Dirk De Ridder's taxi driver with the wisdom of old Egypt: here Egypt we have solutions and no problems (laughter). Ok, thank you. First, in the trustee report the development of the membership. As you can see we definitely had 2006/2007 a problem as reflected by the decline in membership. I would now argue these problems seem to be solved, confidence is rebuilt. The membership as of October 12<sup>th</sup> is 2047, which is a record membership. We never had over 2000 members, and I'm quite pleased to announce that according to activity at these meetings and some discussions we will start the new year with a membership of 2300 or more. So it will be a definite record, and we have some initiatives which we are very confident that also due to the attraction of the upcoming San Francisco meeting that the membership will rise significantly during the year, and the membership still clearly reflects our multi-speciality. It doesn't change significantly but you see that's still what we want, a true contribution from all professions, 52 different professions however that may be marked. Ok. It's the widest variety you can find and that makes the ICS so very unique, this truly multi-special and international character, and as we have been a mainly Europe based with a largest contribution from the UK and Scandinavia we are still European a little bit dominance but there is a strong development from Asian countries so we will see a hift in there which just reflects the changes of our time. It seems that a lot of the future will be, as usual, with the young people and the majority of the young people does not live in Europe. Ok, that's actually all I wanted to say but I'm happy to answer any question you might have. Ok, I can't see any question coming up. Yes please, microphone.

**Julia Herbert (JH):** Julia Herbert from the UK. I'm just interested in the balance of the membership and the different percentages of groups, but it doesn't seem to be reflected in the names on the nominations that we have just filled in. For example, there is one physiotherapist and four nurses and I just wondered if there was any formula of how the trustees are made up or how this is going to happen and is it going to change in the future?

WS: We were faced with a certain problem. There is nothing that justifies that we as trustees interfere in the nomination process and demand certain specialties to be represented in proportion. But I think all members knew that this was asked for nomination and there are some unusual movement in there, I accept that as there are no four nurses and only one

physiotherapist. But I manipulated possibly a little bit by calling round and saying why is there only one physiotherapist but that is all I could do.

JH: My understanding is that I know of three other physiotherapists who I understood had been nominated and their names don't appear on the nomination form. So I'm not clear how that's happened. That's my concern.

WS: It was, I can tell you, it was all the nominations we have received on here. There was nobody excluded.

JH: Ok, thank you.

WS: Mandy please.

Mandy Wells (MW): Can I just make an additional comment to that. I don't think it was made very clear on the website and on the news that went round. As nurses we realised the day that nominations were to close that nominations were called for, and I think that highlights what's happened within the physios. The communication, especially with people of different languages, it didn't come out right.

WS: Well, we have certain ways and forms of communication and we cannot change those, and this is e-mails sent around and they have to be read, and I admit I am also among those who think they see a title line and know what it is and I don't read it, and instead of reading I just print it. But that's the only way it is and it was sent around early and it was known that it would be coming. That's what it is. Yes, Helmut Madersbacher. Please Helmut, the microphone. This slide or one back?

**Helmut Madersbacher (HM):** Yes, that one. Well, I just see and think faecal incontinence increasing issue also for us and I would like to see the coloproctologists clearly up in this chart because I think we have not too many of them and we should encourage coloproctologists to join the ICS but if you have it like this you cannot see how many coloproctologists are really in the ICS. So I would see this other, maybe you can break it down and then we see how many coloproctologists are there because I think faecal incontinence is an increasing issue also for us.

WS: I am happy to accept this and have it down. We can break it all if you like to.

HM: And encourage more surgeons to join us.

WS: Yep, well, ok.

**Ajay Singla (AS):** The trustee nomination for physio, they did not submit their nomination before the deadline.

WS: You see, the office always knows more but that's what it is. You see I am even stimulating your questions. The geriatrics are in there

Unknown: Shut up, no just shut up (laughter). I just wanted to reassure the conference that committees and things like that don't exactly get my juices going but I can tell you that I certainly understood about the system and there was an option for me to step forward as a special trustee which I declined, and so come off it, it was perfectly clear and fair you just weren't paying attention and live with it (applause).

WS: Ok, so even the oldest members of this society should have understood this (laughter) but please lets go to more serious stuff. Ajay Singla, the Treasurer's report.

AS: It is nothing really serious, nothing more serious stuff you said, Werner.

WS: Didn't you want to announce you invested all our funding in Iceland and now it's gone? (laughter).

AS: Well, that's what I was saying we lost all the money in this economic crisis. It was lost in the stock market (joke). I'm very pleased to announce that even with this economic crisis the society is very healthy. So I'm going to show you consolidated statement ending 31<sup>st</sup> of December last year. So if you look at this the total income for 2007 is about £585,000. This is in Sterling pounds. As you can see the comparison from the year before in 2006. The next line is actually the expenditure for 2007 as compared to 2006. So the net income at the last year, we still have some income at £28,370 and now this is just the breakdown in nutshell. I really don't have enough slides to give you breakdown in detail description of every single accounting of every single donations of money coming in or money going out. But this is for the income that we received in donations and gifts in 2007, £38,000, which is definitely higher than what we received in 2006. (42.17). The sponsorships and grants are actually highlighted in yellow as it was much lower in 2007 than 2006. The main reason for that is actually we lost a contribution in 2007 from main two contributors from 2006: Pfizer and Metronic.

Scientific organisation income was almost the same as we had in 2006. The investment income, which is actually not the huge investment that we have done so far, it's all in like the saving account with earning only basically 5% of interest rate. We have not invested in any mutual funds or any stocks or real estate for that matter. Education activities income £36,000 as compared with much higher than the 2006. The membership fees again are highlighted in yellow because it's dropped of about 200 members in 2007 compared to 2006 but as you saw from the previous slides by Werner that membership has really kicked off again, the membership that we have the record number of members now. Exchange rate gains because we get money in different currencies, in dollars and euros but the accounts are being held in actually Sterling pound in banks in the UK. So, this is the total of income with the £585,969.



Next one is the expenses breakdown. Scientific organisation expenses £179,000. Educational activities that we did in year of 2007 we spent about £186,000. Membership costs are much the same. We have not increased the membership dues for our society for a few years now. We are still going to at 50 Sterling pound which is very very reasonable if you compare other professional organisation or societies and even though we spent only member including every what we do for member is about £90 so we actually take a loss of £40 on one member. Governance cost, this is actually our office, is £74,000, so total expenses a little bit higher than 2007 as compared to 2006. Now this slide actually give you a five year consolidated summary that actually you can see what happened over the years since 2003 even though 2003 figures include more than 12 months. So that gives you a sort of where we are as compared to last five years so not very off as compared with 2006, 2007, total income, total expenditure and then net income is certainly much lower in 2007 and then front balance which has been brought forward so it's as I mentioned we're still financially stable and pretty healthy organisation. That our current balance still after all this has happened in the last couple of years that our balance that we are carrying is still £1.4 million pounds. The next thing I want to do is to approve all these accounts for the annual accounts somebody for the 2007 that's number one that member actually have to approve and if there is no objection you can please approve this then we can forward this to our accountants.

WS: Any questions to the accounts that you want to add now? Yes please.

Unknown lady (46m04sec): Thank you for the report Ajay but can you just summarise for the group how much of what the society does is dependent on industry support and how much of it is expended on educational activities that are away from the annual meeting. It is alarming to look at your numbers and even though we were healthy a couple of years ago the net income last year was £27,000. So if the trend is that is that it's coming from industry and we don't have it it looks like we're going to have to be spending a lot less, just sort of the executive summary from your point of view.

AS: No, I know it's very hard to digest even for myself and I really don't have a detailed breakdown to give you an answer but it's all available if you are interested. As for us, we do get funds from various industries as you see for any annual meeting or any other educational courses we do but as far as the educational activities we . . . because it's a charity and we can't go above a certain reserve so what we do is we try to spend that money on various educational activities. We do on average about three educational courses in addition to our annual meeting and each educational course we had set a budget of £25,000. So if we do three courses in one year we want to spend at a loss, we want to spend £75,000 to keep that reserve low. I really don't have the exact figure or the industry figure for what we have at this moment.

**Unknown lady:** But we're still very dependent on industry?

**AS:** Absolutely. We are.

**Unknown lady:** Are we trying to get more independent from industry?

**AS:** Well, I don't know. It will be very hard these days without industry support whether just by the membership fee and that's probably why we kept the membership fee low. So we're not making any money out of the membership fees so we have enough money coming in from the industrial support.

**Unknown lady:** I for one am happy to pay more (laughter)

**AS:** Ok next time we charge you £90.

**Unknown man:** I have a question, just on membership fees. It is remarkable that the fares have remained static and I think that's good for people who might be a little bit financially strapped but perhaps we could think about the option of having the membership fee at £50 and people given the option of paying a higher membership fee. Peggy would be happy to pay a higher membership fee and so would I, and the other thing that I'd like you to consider is a longer duration of membership fees so that I would have the option of paying three or five years but I'd certainly be happy to pay a higher membership fee and I'd like you to seriously consider the option of two membership fees.

**AS:** I think your suggestion is excellent. I think so, we should consider that. We did?

**WS:** Well actually we had this some years ago. I'm careful in all these answers without talking to Avicia in the office what kind of problems coming up there but we will definitely think about this and I think we will have to raise the membership fees in the not too far future. We will do the best we can to keep it down, and Peter Rosier?

**PR:** I have a question about the strategy of the ICS, it is not concerning approval, I think I approve myself what I have seen.

**WS:** Is it related to finances?

**PR:** (50m02s) Yes it is. I see that the money that we spend on education is increasing and have we ever said a percentage or number which is the maximum in what we expend in that?

**AS:** In the annual meeting or in the courses? Or total?

**PR:** You present only educational so I don't think we can break that down but have we some limit that the courses should be budget neutral, more or less, or that there was a budget for a courses? Are we exceeding that budget that we decided on a year or two year ago I think?

**AS:** There is no limit as you mentioned on the dollar amount or the money that we have set amount for the educational activities. We try to restrict the amount for the courses so even though that doesn't really work out every single time there are some courses that actually we did not spend £25,000 and there are courses that we spend a lot more than the set target.

**PR:** Would it be wise to have a transparent policy about the this and pro-active management of this for transparency?

**AS:** Absolutely. I totally agree. Yes, Mandy.

**Mandy Wells:** About the fees, I think it's important that we think about raising them but can I make a bit of plea for the nurses and the physios who don't earn as much as the doctors. (51.36) I don't want it to be a two-tier membership.

**WS:** Ok, let me answer this very clearly. This year, Ajay and I primarily and then Dirk happily joined as we made clear new decision and that was that we did not want to make a maximum profit at this meeting but we just said we need certain reserves, like for two years we to have the money in the bank and also to guarantee our office can exist and then we just calculated what the minimum profit we need from this meeting to maintain our financial stability and then I guess as you all have seen we drastically reduced the registration fee, particularly for the nurses (applause) and physios and the residents and we are very happy to really do anything we can and we think that is a right step in the right direction and we will have a permanent strategy but it's not for Ajay and Dirk and me to decide because that's for the new trustees because that means new continuity in this society.

**Chris surname unknown:** That was actually my primary question. I wanted to hear from the trustees now that our strategy going forward is a revenue neutral, our breakeven strategy because we have build up a nice reserve and I don't see any reason why we shouldn't be trying to build more reserve, and my second point was to kind of follow up on Peggy's statement, I'm sure I and other people would be interested in having a list for the past three years of the total expenditures of the organisation and what percentage of that has come direct from industry, and I would like to see where that's been and where that's going and participate in how we're going forward with that.

**WS:** Point taken.

**AS:** We can provide that.

**WS:** Ok, if there are no more questions I ask first for approval for accounts. Ok, you have a question, no.

AS: And we need approval from our accountants. Goldwyns, they are based in Bristol, England have been our accountants for the past few years and I think they have really done a remarkable job. So we need to have it approved for their appointment or reappointment by the membership. So if everybody approves, one year, every year they have to be approved.

WS: Thank you, Ajay (applause). So some more details on the education committee and on the activities. So here at the ICS meeting in Cairo we have, as you know, this number of educational courses and workshops. I try to attend to as many as I could. We thought it was overall quite successful, there was a large number of participants. We are very well aware that we have to improve some mechanisms to ensure that each and every course meets the standard but it's sometimes very difficult to project their courses who have been very well attended this year and poorly attended last year. It's impossible to forecast. But San Francisco offers the opportunity that we can widely expand the number of courses and most important for that is that the proposals come in in time and the time is soon, it's December 1<sup>st</sup>. So everybody is invited, everybody who has an interest is invited to express it, to send a submission to the office to say we would like to a course on this and this topic. There were some suggestions from, I think Chris Payne made a suggestion, that there should be a course on how to review papers so that we get more reviewers for the journal. That will be partly discussed later. Any activity, any topic related to our main interest is welcome and all members are free to come up and organise what they think is of benefit. Ok, during the past years we have asked for new members in the education committee and that was done via the website. There are some changes due to some people reaching their terms of office and because it's a large committee I didn't want to list the names here. We ran a couple of courses, the first was the Mumbai course in association with the SIU. That was I think in November last year and that was originally organised via Ajay Singla at the SIU and at that time I think, Linda Cardozo was taken the responsibility for this. After that, and that was a very successful event with almost 300 participants and it was quite interesting to see that this joint efforts with other societies actually is pretty productive mechanism and format. Then there was a little bit of a break and then in July this year we had an education course in Berlin which I was think was of exceptional scientific quality. Attendance was a little bit poor, less than what we expected, so it was like 100 people only. Then we had in August a course in Istanbul which was a lone standing course (57.31, 5m 54s, 831w) in support with the Turkish Continence Society, this the mysterious TCS. We had a large participation, I think it was a very good course and then in September we again joined the Chinese Continence Society, the CCS, this time in Chongqing, you all know where it is, it's the largest city in the world with 32 million people living there, and we had a Chair again with the CCS. We ran, by their invitation, one day with ICS faculty and the other days were run with the CCS. This is a very economic way for us because we only have to support the travel of the ICS speakers and some were already in the country. Ok, so that's what we have achieved this year. There were other plans who did not work out for the rest of the year. Next year we

have definite plan thanks mainly to the effort of Helmut Madersbacher to work together with the Thai Urological Association (TUA) and we will organise a course in beginning of April in Pattaya, Thailand, and there have been very detailed talks with the Urological Association because in my learning curve I learn more and more about the enormous extent of politics behind these kind of meetings, but it was very successful, Helmut confirmed me to make it clear to the Thai urologists that we are not a urological society but a multi-speciality and it is guaranteed that gynaecologists, physiotherapists and nurses will be equally represented there. We have another invitation to go to Brazil by Carlos Ancona, and there (59,12) are now quite long discussions with the Slovakian urologists and gynaecologists and the plan at the moment is to run a meeting in September in Bratislava. So these are the more definite decisions, there are other invitations which came out of Russia, out of Vietnam and it looks again like we will go to China, in that same format that we contribute to their course. Any questions or wishes to courses, and I would like to emphasise here again. We mainly, we are pro-active but we definitely welcome any kind of invitation for new locations but the idea behind it was primarily to go to areas we had not been with our annual meeting and to raise more interest in the ICS, and one of the activities going together with that from next year on we will have a very structured way of having invited ICS lectures at national conventions. I did an ICS lecture in April in Moscow and I think that's a good way to raise interest in the ICS, and we have already a couple of invitations to send speakers as to the wishes of the national society the the national meeting. We pay the travel and that will be officially announced as an ICS lecture. Yes please, Peggy.

**Peggy (surname unknown):** I had a question about the content of these courses. I appreciate that the committee thinks hard about what would be best to teach in these courses and they also have to respond to the local organisers who are requesting something, but can you correct my impression that many of our educational courses are aimed at urodynamics. Taken to China, taken to many different countries, and I'm not sure what the science is that doing urodynamics improves patient outcomes. There's probably better science that teaching the public pelvic floor exercises in some of these countries would improve the patients' health and continence. (applause)

WS: Well, well accepted but there we have clearly to distinguish between those activities where we are invited and usually the invitation comes with certain expectations and so we will try to accommodate this, but we always emphasise that we are a multi-special society and that the ICS is best presented when that is made clear. But you know, it depends, these courses last year have been quite different. The course in Germany was quite strong in gynaecology but that had to do with the faculty that was available and it's not like you can particularly when you have to do it on short term notice that you can get a lot people within three months coming to a meeting, and so that was pretty much a gynaecologically, physiotherapy orientated meeting,

and so there will be differences. Again, the Turks had special wishes, what they wanted to have covered, and so we have to accommodate this, but. . . Yes, we are open to this. Mandy.

**Mandy Wells (MW):** Yeah, as a matter of fact, Werner I'd like to thank you for stressing it is a multi-disciplinary society. Just for comment for people in this room the nurses were told we weren't welcome, particularly in Berlin because the nurses didn't do very much, and definitely in Turkey where the nurses are the handmaidens to the doctors, and I think that maybe if we'd been able to go to Turkey we'd have been able to change the way Turkish doctors view nurses. But I think it's really important we have to stress multi-disciplinary working.

**WS:** Well, I can only repeat what I said, we emphasise that we are a multi-specialty but we cannot change the world and it's not our responsibility that there was just a big fight between the Turkish Continence Society and the Turkish Urogynaecology and Pelvic Floor Society and they had their internal struggles. We had similar problems in Germany in that the urologists were upset because there were too many gynaecologists. We are a multi-special society and that's our emphasis and that's what we have to stand for and I'm also learning, I wasn't aware that there is so much politics behind it. But the nurses are so tough that I'm gonna learn that (laughter). Ok, Heinz.

**Heinz Koelbl:** Werner, I just want to give you feedback from this meeting. I was asked by several participants who would like to have some of the educational courses either as an early morning or late evening event during the scientific meeting, and there are because they cannot afford to stay such a length of time during, for a week for example, so I was asked and just want to give you this information.

**WS:** Heinz, I am very happy about remark. It is long standing suggesting for me to follow certain other structures which I guess have some experience in wisdom like the AUA who is running courses in the morning but also in the evening and in parallel to the main programme, and without interfering with your presentation it is obviously and very clear that we have to adapt to the increasing number of abstracts submitted. We cannot stay with the current format of having like 23 oral presentations, and, and, and, when we have, and I expect so in San Francisco, abstract submission over 1000. We will have to change, we will have to do more things in parallel and we will go in the early morning and later evening with courses, but I am fighting against the American concept of the pre-breakfast course starting at 05:15 (laughter). Yeah, they do that! Ok, so any other questions to courses? Everybody is welcome and as I said before we have to develop new structures going back to the curriculum for courses in the developing world. Obviously our current courses is not something which we could send to somewhere in Africa, that would be pretty useless. We have to redevelop a definite curriculum according to the needs, to the local needs, and that of course also means that in countries where it is appropriate there may be even long standing courses of nurses, to be supported by

the ICS. I have no problem with that if that is appropriate. (01:06.05). The other main effort that we're going to do will be we have in the coming year in the education committee we will very strongly try to develop e-learning, that means web-based learning modules and by now we have the infrastructure in the office. Dominic has worked on this. We have the infrastructure, most of the software. So we will try to develop that as intensively as we can, but that's where particularly ICS members can log in the website, run through a certain course and if they are successful that's going to be interactive and if they successfully answer a series of questions they will get a certificate. Ok, any other questions related to ... well, anything that is related to the education committee? Ok, so it seems you're all education, no, sorry, Kari Bo.

**Kari Bo (KB):** I just want to emphasise again that I don't think you are right in saying we can not change the world because if we have a standard at the ICS based in evidence-based practice we should use that and then we can change the world and not just continue to do the things that we've always done. So we were discussing this I think in depth at the advisory board the other day and I know that you've been very good in trying to implement that we also have conservative treatment in these courses but I would really like to say, on behalf of many people here, that it should be our effort to really set the standard and not let the other people out there say, well we want surgery, we want urodynamics only.

**WS:** Yes, yes (applause) I support all this but I think it's not helpful when I run around and complain how much I have been punished for there was so much physiotherapy on the Berlin programme. That should be also recognised. Ok, any other things? I don't see anything so you're all educated now? Ok, San Francisco deadline is December 1<sup>st</sup>, I said that and now I would like to ask Jerzy Gajewski to give a report on the publications and communications committee.

**Jerzy Gajewski (JG):** It's already good afternoon. I would like to present a video of our publications and communications committee, this are the members. I would like to thank each and every one of them for helping running this committee and hard work and also as you can say Jane Meijlink is also editor for ICS news and she puts in countless numbers of hours for this society. I would also like to emphasise that we have a great support from the ICS office to run our committee and our projects. So our projects include publication of ICS news, this happens twice a year, one is usually before the meeting, one is after the meeting. We present some important issue related to our society, we are open for any suggestion what we should put into. We ask for sending us some articles for publication. We review books, and if you look through our ICS news we just want to be in touch with membership regarding what our society is about. We also have a very short quick notice in the form of e-news where we relay the messages from the ICS office and trustees, and you should read it because very often there is important information for you and very often we ask for some response. We sent a few surveys, however,

we have very little actually returned. So now we will be working on somehow to make you to answer our questions, how we should do our work. What we want to do, we don't know if we are doing the right thing, we don't know if this is what you are expecting from us. So in the next few months we will be sending surveys regarding each of our activities. It will be short, it won't be like ten/twenty minutes, it will be like five minutes, but we want to know if the publications we're doing are right and if we are doing right thing for you and maybe something you want us to do more. We also working on corporate identity of the ICS. We know there are a lot of publications and presentation, committee report, that do not have the same standard, the same look. So we have hired a graphic designer on part time to do this for us. She will also help to do different forms and standards for all publication related to ICS society work. Press and affairs and congress newsletter, this also takes, at least in the beginning takes us a lot of work to prepare standards and suggestions how the press should be at our meeting, what information they should get (1.11.51, 5m45s, 797w), what facility we should provide them and also the congress newsletter. Last year we use a very expensive company to do that. They did an excellent job but it cost a lot of money. This year we try do it at home/inhouse and it was much cheaper but it was not as good as we thought it is. So again we will send survey to ask how important you think is this congress newsletter, do you think it's worth putting some money on that project. We also still producing fact sheets which are general information about problem we are dealing with. This we use for press, for patient, for general information to the public. We are also having webpage which just received news scheme almost a year ago and we are now working on getting the web working in more user friendly way, there sometimes is too long to get information that we want and it's not so easy. Dominic is working very hard to make this website very friendly, and we also do ICS publicity. So that means we would like our society to be well known at the other meeting. We go to AUA, European meeting and sometimes the country which we will be having our ICS meeting. So this are the activity we have in our publication committee. Again we will send a survey asking you how well we are doing our job and what else we should in the future. Thank you very much (applause).

**WS:** Thank you, Jerzy. I'm sure Jerzy is happy to take questions if there are any. I see a movement there, Karl Sievert.

**Karl Sievert (KS):** It's only a short comment for your corporate identity. You talked about that we wanted to incorporate colorectal. If we have the bladder as a signal we will have a problem to incorporate colorectals so we might, it is probably inappropriate, but if we are talking all the time about AUA/EAU we have to think about other big disciplines where the colorectals are present and we have to present ourself as faecal incontinence societies that those are included. I think it is a remarkable society that we have at the moment but if we want faecal incontinence include we have to find somebody who gives us a better look.



**WS:** Ok, we wait for your design.

**JG:** But this is really important, that's why we just a few weeks ago we hired this girl and we will go with all of this suggestion to her. We don't want to change the logo, which is the same from the beginning. We can add something to it to get your point. Thank you.

**WS:** Ok, thank you, Jerzy. So we come to the next point, Diane Newman, reports for the continence promotion committee.

**Diane Newman (DN):** Thank you very much. We've been very active and we've had a lot going on. We still have growing organisations around the world but this has become very difficult to track so what I did this year I put a structure in place and we now have subcommittees, and if you look in our report on the website you can see the structure. I divided the world up into four areas, and individuals in those areas will be in charge of working with continence promotion and working with organisations in that particular part of the world. So we continue to grow I think very rapidly. We will have done two successful initiatives as of 2009 and I'm very proud of this. If you've noted in Ajay's report we've had donations to the ICS, those are all for continence promotion. We've been able to raise donations, these are unrestricted funds we can use for continence promotion. We probably will triple that next year because there is a huge interest in what we're doing around the world as far as educating the public about this topic. Last year in Rotterdam we had a public forum on the Saturday after the meeting, it was very successful. We had over 300 people attend where we had lectures which went on from experts who presented at the ICS. We had product displays and it was a very successful undertaking. Tomorrow night we will have another one here in Cairo. I just have to commend Sherif, it will – oh tonight, tonight we're gonna have it. We have 400 attendees, there were 1500 calls in to attend here in the Middle East. (applause) We will do it again in San Francisco and that will be a yearly event to have that. The next thing (1.16.55, 5m4s, 766w) we're gonna want in 2009 is the first World Continence Week. We will announce that at our public forum. The week will be the last week of June and there are handouts about the forum and about WCW at the ICS booth. The concept here is to raise awareness, it will be a global initiative. We will hope to use some of the donations to maybe have prizes that will be awarded to the organisation around the world that maybe has the best press event, has the best event – like the bladder run or whatever, and we hope to have a monetary award and actually to raise awareness. Our long term goal is to have the World Health Organisation acknowledge this, so we really feel this is a big promotion for us as far as raising awareness. I want to really thank the society because we have really done this in under two to three years. For the support of the members as professionals to take a lead in raising awareness. As you all know these conditions are taboos around the world, they are underreported and this is one way for us to really get the word out that people should come forward. Thank you very much (applause).

**WS:** Thank you. The next point is the ethics committee report. Ted Arnold is so kind to report. Lewis Wall couldn't be here so Ted Arnold will give the report.

**Ted Arnold (TA):** I'll be very brief. The members of the committee are those (slides) but the Chair, Lewis Wall, has finished his term of office and has now been replaced by Claire Fowler. Claire would have been here but has had to leave early this morning and has asked that I give this report on her behalf. We have replacements in place for Kari Bo, Diane Newman and Jacques Corcos. They are: Margaret Sherborn, Mary Palmer and Ian Pearce. We will require replacements during the year for the Gordon Hosker and myself who are finished terms of office. So there is urogynaecology specialty, a urologist, and Gordon is one of the 'others'. So if anyone has an interest and expertise in the area we invite expressions of interest through Avicia please. The activity of the committee has largely been centred around the code of conduct which has been part of the ICS bylaws which you have just voted on, and that was largely thanks to efforts by Lewis Wall. For this coming year the committee is endeavouring to make some inroads into a form of presentation at the 2009 meeting on the ethics of research, but if anyone in the group has any input or suggestions we would welcome those through Claire Fowler of course. Finally, I would like to, on behalf of the whole committee, thank those who have contributed a part, particularly Lewis as Chairman for the past few years, and people who are moving off the committee. Thank you. (applause)

**WS:** Are there any urgent questions to the ethics committee? Thank you, Ted Arnold.  
Standardisation committee – Dirk de Ridder.

**Dirk de Ridder (DdR):** Over the last year due to my other activities as trustee the activities of the standardisation committee have been pretty low but we've had exchanges over email on what the structure and function of the standardisation committee should be and how it should function. We had a meeting at this ICS meeting here in Cairo and this is more or less what we agreed upon, that we have kind of steering committee consisting of myself, Peter Rosier, Fitzgerald, Ash Monga, Piotr Radziszewski and Ralph Webb. We would try to have an oversight on the existing initiatives, the subcommittees and the working groups. Try to keep consistency in the reports from the different working groups and actually promote new working groups. We will focus at this time on terminology because the semantic difference between standardisation and terminology was of some importance. (1.21.51, 4m56s, 655w). We will also put in place a formal decision process. We had a proposal from a working group that could come to the standardisation committee or we could even invite people to write a report on a certain topic. We will use evidence-based medicine principles and if a consensus is reached on a topic where there is not enough evidence we would like to see that this consensus process is transparent. The first draft will go out to expert readers and the second draft will be on the website for three months for comments by the membership and then we will have a final draft which can be

published as a full article but it would also be nice to have a short, abbreviated form in the form of a fact sheet. There is a joint IUGA/ICS report on urogynaecological terminology in preparation. We had again a discussion at this meeting on this paper. It is going out to a second set of expert readers and it will be on the website soon for your comments. You may have noticed that at a certain moment we removed certain subcommittees from the website. This was simply because of the fact that most of them were interactive or no longer knew if their members were willing to participate or not. There are now two subcommittees that are revived. Actually, Werner Schaefer is going to take the lead on the revision of the urodynamic report and Bert Messelink is going to revive the pelvic floor assessment and both of these people have a team that will work with them together. Other proposals like pain issues and definitions of urgency are underway but they are not established yet. So please read the e-news for reading about the submission processes for new working groups and subcommittees, and also of a more detailed description of how we would like the standardisation committee to function in the future. Thank you. (applause)

**WS:** No questions to Dirk? Everybody happy. Next, you can read it yourself.

**Jacques Corcos (JC):** Ok, neurourology committee we worked on mainly two aspects. The first one is to set up the fellowship in neurourology. The fellowship has been approved last year by the ICS Board and this fellowship is a three month fellowship in one of these there different destinations and there is supervision of a member of the ICS and a member of the neurourology committee. The travel expenses are paid by the ICS. We got twelve candidates coming from twelve countries. The process of selection has been the review, six of us reviewed the files, and the final decision has been to Dr Jianguo Wen of China. He has from China. He decided to go to Montreal and he will start very soon the three months of fellowship in neurourology. Next competition is going to be open in December with deadline decision in March 2009. After this two fellowship will be reevaluation of this process and of this fellowship to be done to be going to continue or not to offer it. Second point, we work on the neurourology guidelines. We circulated the review comments. We decided to change a little bit the process and to make it evidence-based so we are writing a new draft and we should come out with something during this coming year. Working on this guideline we think and we are proposing to the ICS to create a guideline committee because we think it is important that we write guidelines or that we endorse existing guidelines from other societies and we put our label on these guidelines, and this is a point of discussion for the future. Thank you. (applause)

**WS:** Questions from outside, no?

**JC:** Just a detail, the fellowship is not only open to physicians, it is open to nurses, physiotherapists and other health professionals.

**WS:** And it is under discussion to expand this outside of neurourology. But again all this depends on activity in the society, if anyone has a strong idea please step forward. Ok, so we can come to the next point and Wendy Bower please, children's committee.

**Wendy Bower (WB):** Thank you. We were one of the committees that suffered from you not reading your e-news letter. We changed Chairs of the children's committee last year and the first thing that we wanted to conduct was a needs analysis to know what it was that you would like from us. We have a vision of what we think we would like to provide. We would like to be the link between the international children's continence society and the adult world. In this regard we think that their period of adolescence probably needs a lot of attention because it doesn't get the direct attention from either society exactly. So our proposal is to focus on this interface and to that extent we have run courses addressing adolescence in the last three years and also again this year. We are also following this plan working on a manuscript, two manuscripts really, following guidelines on assessing and treating adolescence. But I'd like you just to take a moment since you're captive and you have a blank piece of paper that says children's committee on it. Can you just write the numbers on that page of what you would like us to do from this list please and any other comment that would be extremely helpful. As I said, we are very keen not to duplicate the information (1.28.29) that is presented at the ICCS but we are happy to be a conduit to bring some of it over to this meeting as we understand that people can't always go to a paediatric meeting as your caseload is varied. All done? Thank you. (applause).

**WS:** Next agenda point ICS/ICD committee. The Chairman is not here, the committee is dissolved. It's under discussion but we are aware that there are other discussions regarding the ICUD and what the future of this shall be. It is our intention though to include such a consultation process within the ICS because as you're well aware most of the work was done by ICS members anyhow and I think we should take this on and cover this, but as there is no Chairman here, committee dissolved. Any questions which I potentially could answer. Otherwise, if you have strong ideas about the future of this activity step forward and make it happen. Ok, thanks. Next is the meetings and nominations committee. So there were some appointments in the last year and you can just read them, I don't think I have to read all this. I guess you also very well aware of it. We have some complications, hopefully, possibly no real complications with the lower three elections because as you know we had to run elections to the advisory board hoping that it will not exist at this moment of time and but as you also know it is that Jane Meijlink and Mandy Wells are also running for trustee positions so that's just more or less to your information, and we have approved bids for 2012 but there is still some discussion going on in the moment about the bids and we also will revise the process. As you know now we in general have any voting happening before this meeting so the final decision can be made here. For reasons not really known to me that was different with future meetings,

applications had to be in by April 1<sup>st</sup> but the committee did not meet before here, so the voting was afterwards. I think we should change that and stratify all this. So then we call for nominations but that will also go out and you see it has time but this will go out as written information by e-news and everybody can react to this. Now we come to the scientific committee report from this year, Heinz Koelbl.

**Heinz Koelbl (HK):** So dear members I want to thank the committee members who really had very much to do this year. As I already pointed out we had a total number of abstract submissions, 954. We stick to the concept of last year's meeting and formed five podium sessions consisting of 26 oral presentations and 112 oral posters, 18 videos and 424 non-discussed posters. So this is the highest numbers of abstracts submitted as a standalone meeting which was only topped by the IUGA joint venture in Paris. So you will ask many questions to me probably about how we proceeded with the abstracts submitted and at initiation of the conference, at committee meeting we had democratic vote on especially sticking to the concept of the abstract submission rules and therefore you will see that by the way this is the number of abstracts submitted. You will see that the rejection was very high. Here you will see the distribution of abstracts divided by continent and you will see that especially an increasing number of African countries have submitted abstracts which is due to the fact that Sherif definitely has served as a magnet to encourage people to submit abstracts. Again, Sherif thank you very much, your support was very important for this meeting and especially also for the scientific content of the meeting. Here again, top ten countries in 2008, so UK was the leading country with regard to the submission of abstracts. We formed the programme with four state of the art lectures and one round table, and we had a rejection rate of 27% and the reason why these abstracts were rejected has been that the references were not kept in a normal way. Many people were putting names in the abstract which is not in accordance with the abstract submission rules. So the identity could be evaluated by looking at these names, and we had another meeting this week of the scientific committee to discuss about the issue about the high rejection rate of abstracts, especially due to the references part and we decided that for the next year in San Francisco we will use abstracts, we can use references, but the reviewers of the scientific committee will not be able to look at the names of these references. So anonymity will be kept. At the second vote we decided that at the end before submitting the abstracts you will have to confirm that you have followed the guidelines of the abstracts submission rules. So this is all I can tell you. Thank you very much for your attention. I am open for discussion.

**Diane Newman:** I know that we're very much a research-based organisation but the newest, but were we're going is translational research. Is there any discussion about adding any of that to this programme because translational research (1.35.58, 7m29s, 882w), we have a lot of

clinicians in this society, really is where the world's going. So I'm wondering, it would be very attractive.

**HK:** You mean outside that what was submitted as abstract?

**DN:** Well, or as abstracts.

**HK:** As abstracts you always take what you get.

**DN:** Well, outside of abstracts then.

**HK:** Outside of the abstract, I think this is a good point we will have to follow. Thank you for your suggestion. Abdul.

**Abdul:** Heinz, I'm just asking the question I asked at IUGA about submitting in both societies and presenting at both societies. We had submitted a paper in IUGA, it was accepted and we contacted the office and they said no you cannot present in both societies so we withdrew from ICS, then they changed their mind, it is too late to put it back there and this goes on. So can you give us some guidance. Can we present in both societies?

**HK:** It's a very good point, Abdul. Thanks for bringing this up. Actually I served as a reviewer for the International Urogynaecology meeting this year in Taiwan as well and I can assure you that 70% were identical. So something has to be done to not to duplicate the meetings. We have to get in contact with IUGA and definitely for the next year this will be done.

**Abdul:** Just a question of having dual publication. If you accept in both societies the abstract is published in two journals.

**HK:** Well, as I said there are two different committees not really acting between each other so something has to be done and I think we have to contact IUGA in order to avoid this inconvenience.

**Unknown:** We have got a long history of this problem with IUGA. The abstract submission date is about the same so people cannot decide what to do. Then when it comes to the programme we are so close together that it's hardly feasible to sort it out. So the general tactics is that if the other wants to withdraw he is happy to do so and we will not blame him for withdrawing and accept the abstract but if the other wants to present it on both meetings we say ok, it's just a clash of time and no solution for that.

**HK:** Marcus

**Marcus:** I get a feeling that the scientific programme for this meeting year after year lacks a narrative, and I just wonder if at future meetings, particularly for state of the art lectures and

maybe at some of the education courses that we could consider having a theme to the meeting. It might be sexual function or along those lines.

**HK:** I think this is a good suggestion and for the next Chair will be a good suggestion to follow and make a good programme.

**Unknown:** Can I come back about these duplicate publications because I think it's a non-imagined problem. Frankly, I'm bringing to these societies young doctors who are at the beginning of their academic career, and I think that there's no harm done at all in them presenting similar data at two meetings. It's excellent for training and we're meant to be training. Secondly, in my university life I see people repeatedly presenting their findings in the course of our interaction and, for a very good purpose, it improves our understanding, it allows us to discuss it more, it achieves a great deal, and I really honestly think that this is an oration nonsense and it should be, look for god's sake, let's have freedom and for those who don't like it and can afford to go to both conferences go to IUGA, watch the papers and then spend three weeks thinking up some devastating questions and then come and perform from the floor at ICS. Otherwise go to bed!

**HK:** Two good points. I think I totally agree in what Abdul has said, it's also important that we have to keep in mind. I think it needs some more communication between the two societies. How to handle it? I think we will find a solution for that. Thank you.

**WS:** Marcus Drake.

**Marcus Drake (MD):** I would be very interested to know what the committee's thoughts are about previously published work that's actually in peer review in journals and already in the public domain because I did have one in the poster session I Chaired from 2005 which I felt was a bit steep.

**HK:** It is also a very difficult topic because you never will definitely avoid this situation because abstracts are submitted to ICS and meanwhile they are under revision in a journal and they appear in the literature. So you can't really do it. I experienced the same for many years I can tell you.

**MD:** But a declaration of the status of (1.41.29, 5m32s, 808w) publications submissions might be helpful during the abstracts review.

**HK:** Yes, could be but even that does not avoid this situation.

**Unknown:** I would like to suggest for future meetings the publication in the journal of the abstracts and the podium of the discussed poster sessions. I personally feel that printed

abstracts become more and more anachronistic and would propose that maybe not next year but in due course all abstracts are published on the website only. I think abstracts in print is . . .

**HK:** It is a good suggestion, I agree.

**WS:** Ok, we can continue and next on the agenda is the report on our journal, Neurourology and Urodynamics. As Chris Chapple could not be here this will be presented by Dr Ridder.

**Dirk de Ridder (DdR):** These slides were made up by Chris Chapple. This is the impact factor of Neurourology and Urodynamics. The impact factor is currently 2.671. It is going up gradually and we expect a further rise this year. The number of submissions, you see there are 171 submissions up to September 2008, and most of them are under revision so the total number of articles being dealt with is about 300. The submission and the acceptance times, this is 2006 you see the time from submission to first decision. On the left you see the days, it starts with 40 days and it goes down a little bit and there is a viability around the holiday seasons. This is 2007 where you see that in July and August and September we had a little slow down but then recuperated in May very well when we decided under the 20 days. This is 2008 and you still see we maneuver around 30 to 40 days before the author gets the first decision. So over the last twelve months the average time to first decision in 33 days and submission to final decision in 61 days. Our acceptance ratio is 51.2%. We have had a discussion last year if we should be more strict and try to lower this but this is a little bit due to the nature of our journal. I will not go into this slide, it's quite difficult to read but it summarises the submission statistics, the preliminary reports and the number of original clinical articles that are being submitted. We had 145 additional pages, they are currently already on early review to get rid of the backlog. The conditions are no more than 100 pages and we have more papers in the proofing process now than previously. We saw collaboration with the Cochrane review groups. So far three shortened versions of Cochrane reviews have been published. They also have been accompanied by editorial comments by leaders in the field and we try to achieve more of those and a few of them are currently in the pipeline. There will be two separate supplements: an update on our pharmacology with the authors you see listed in the slide and there also will be a special supplement in the honour of Ed McGuire. This supplement will be paid by his own institution, and so will not interfere with the normal publishing of the clinical articles. Advertisements, it has been controversial but after the last Board meeting it was decided not to progress any further with advertisements so we do not have any advertisements in the journal. There have been comments on the layout, they have changes, changes have been made to the layout. The font has been changed in the abstract and the text size is larger. We want to thank our reviewers. We have a set of ten top reviewers, they all have been awarded a certificate of which you see a print on the slide and of course their pictures are being displayed at this meeting. The names are in alphabetical order and for next year we will go in reverse



alphabetical order. The aims stated at the last editorial Board meeting, we wanted to maintain and reduce the time from submission to publication. It's fairly stable for the moment, we still can do a little bit better. We are working with manuscript central, I mean the electronic web-based machinery behind it to improve this process. Together with Helmut Madersbacher the CME online is progressing. We have more clinical contact, the layout has been modified and we will accept of course, in due time, ICS reports. Future initiatives: more standardisation reports, continue to work on gaining reviews – we have implemented reviews and we will also have short versions of the ICUD reports of many of the committees. This is the editorial team and on behalf of Chris I want to thank all my co-editors and it's up to you now to help us further to improve this journal, the quality and success of it by reading it, reviewing papers for it and if you have any comments or idea about improving Neurourology and Urodynamics please write to Chris and the editorial office. Thank you (applause).

**WS:** Obviously there are no urgent questions. So I have the task now to announce the voting results. The special resolution has been accepted by 96.11% (applause). So in numbers there were 321 in favour and 13 against. The ordinary resolution, that means regarding the bylaws, has been accepted by 95%, 315 in favour and 17 against (applause). So that's quite nice and most impressively the general secretary election really came almost to one third for each of the candidates. It's very very close though it had to be counted and recounted and recounted and just with very few votes . . . Jacques Corcos made it. Congratulations. (applause). It turned out that the task to make all the analyses of the trustee elections has been too difficult to manage in time. It will be published as soon as available on our website but you know the rules so I don't there are any major surprise to be expected but a lot of votes to be counted. Ok, any other business that has to be raised here and now, considering the fact that we are 15 minutes over time? I'm really pleased to see that'd not the case so we're going to meet again at October 3<sup>rd</sup> at San Francisco with a proper general secretary. Thank you. (applause)