



Children's Committee teleconference 14th March 2018

Attendees: Giovanni Mosiello (Chair), Nelly Faghani, Stuart Bauer, Rien Nijman, Jian Guo Wen, Ashani Couchman

Also in attendance: Jenny Ellis

GM-This call is to update the committee on our projects. We have received additional financial support to produce best practice documents and to support some fellowships over the next 2 years. If we will be able to work well we can imagine to receive some economical support in the future too. The committee can now start to work on this document. We plan to produce 1 document this year on bladder and then 1 document next year on Bowel management. The first document, bladder will cover 4 topics for discussion:

- 1 reusable catheter, to define a standard procedure for this, when single use are not available
2. stomas and channels
3. Self management CIC
4. What to do for bladder management in children with special needs as cerebral palsy, Down Syndrome, significant cognitive deficit. When cic is not possible to use: button cistostomy, alpha blockers, urinary diversion.

This call to decide everyone's involvement in the projects. We will need to collect data for the documents. Will need experts and other committee's involvement in this project e.g. neuro, education, physio and nursing. GM in conjunction with the office will contact the relevant committees advising them of this opportunity.

Action: GM in conjunction with the office will contact the relevant committees to see if they would like to be involved in the publications.

GM asked everyone to confirm their interests and availability to be involved in these projects.

- AC advised that she is interested in the pediatric bladder project.
- NF didn't feel that these projects covered her areas of practice or expertise. So she is not sure what she can add to the projects, but would be happy to be involved as required.
- SB advised that he is currently involved in a study that may be useful. This is a questionnaire going to 30 families regarding intermittent catheterisation. SB advised that he is very keen to be involved in the committee projects and would be happy to provide the data generated from his study to assist with the projects.
- RN advised that he is happy to contribute to the papers. He is also involved in a spina bifida patients survey, so could help in this area. RN asked if the paper management of the bladder or intermittent catheterisation? GM confirmed both management of bladder and CIC. GM liked the suggestion of involving the family in the bladder study. We need practical recommendations for the document- this is part of the Wellspect funding. We need to focus on CIC and practical aspects of management. We could do a follow up document next year for patients/family.
- AC asked whether we were planning on doing a consensus statement on use of CIC, management options in the long term? GM yes, we will be creating standards for management.

JE advised that the next stage would be a forum discussion and division of tasks.



Action: GM to provide the project documents to be added to the committee forum for review and discussion.

Action: Committee members need to review the documents and volunteer for the projects that they would like to be involved in.

GM asked the members to assist with the fellowships project as well. We need to draft the criteria we will be asking for from members. The fellows will receive € 5000 for their fellowships and they will have 2- 3 months of intensive study at their host centers. GM advised that the committee need to decide how to select the host center and define a standard clinical programme, define selection criteria for applicants

JE suggested that the committee review the ICS Neurourology fellowships- we may be able to use the same criteria.

Action: Office to email GM the ICS Neurourology fellowships information.

Deadline for fellowships- , total number of 5 , within 2 years, GM to email around some criteria. JE email to me and will add to the forum.

GM asked which members would be at EAU Copenhagen? If you are available then it would be good to catch up and have a face to face meeting. All agreed and confirmed that they would like GM know if they were attending.

GM felt it would be useful to have a call after Easter, following the online discussions. All agreed. JE confirmed whether the timings from this call would be good for future calls, all confirmed it would be.

Action: Office to arrange a teleconference after Easter. Call times to be similar to 14th March call times.

GM thanked everyone for attending.

Call Ends