Urology Events Planner 2013

Genitourinary Cancers Symposium 2013 (ASCO ASTRO SUO 2013)
At Rosen Shingle Creek, Orlando (14 – 16 Feb 2013)

Satellite Symposium Of The 10th International Congress Of Andrology.
At Sanur Beach Hotel Bali, Sanur, Bali (19 – 21 Feb 2013)

AUA Segura International Urolithiasis Course
At the Nadiad, India (21 - 23 Feb 2013)

"Clinical Urology Workshop" for P.G. students - CONTACT :Mr. Ravi Kumar: Mob: 094440045440
By eminent National Faculty, at SSSIHMS, Prashantigram, Puttaparthi, A.P., India. (23 - 24 Feb 2013)

European Association Of Urology 28th Annual Congress 2013 (EAU 2013)
At Mico – Milano Congressi, Milan (15- 19 Mar 2013)

SASSM (South Asian Society for Sexual Medicine) Inaugural Conference
At Bangalore. www.sassm.in (29 - 31 Mar 2013)

American Association Of Genitourinary Surgeons Annual Meeting 2013 (AAGUS 2013)
At Ritz-Carlton, New Orleans (03- 06 Apr 2013)

24th Videourology World Congress
At Marrakesh, Marrakesh Morocco (11 - 13 Apr 2013)

Annual AUA Meeting 2013
At San Diego, California, United States of America (04 - 08 May 2013)

American Urological Association Annual Meeting 2013 (AUA 2013)
At San Diego Convention Center, San Diego (04 -08 May 2013)

Mid Term UAK Workshop on Urooncology at Amritha Institute of Medical Sciences,
At Kochi, Kerala, India. (24 - 26 of May 2013)

Annual Meeting of The British Association of Urological Surgeons (BAUS)
At Manchester, United Kingdom (17 - 20 Jun 2013)

Clinical Topics in Urology - "Lithiasis from A TO Z"
At Athens, Greece (05 - 06 Jul 2013)

South Zone Urology Conference of India
At Mysore, Karnataka, India. (12 - 14 Jul 2013)

LAPENDOFUSION 3 D workshop at Lakes shore Hospital
At Kochi, Kerala, India (3 - 4 of Aug 2013)

33rd Congress of the Société Internationale d'Urologie (SIU)
At Vancouver, Canada (08 - 12 Sep 2013)

31st World Congress of Endourology and SWL
New Orleans, LA, USA (22 -26 Oct 2013)

UAK annual conference
At Alleppey, organized by the Tiruvalla Urology Club; Org Sec: Dr Nebu Mammen (26 - 27 of Oct 2013)

11th Urooncology Congress
At Antalya, Turkey (06- 10 Nov 2013)

Address For Correspondence : Dr. Sanel Varghese
Editorial Secretary, UAK, 'Kairos', ACN-6, Opp. Holy Family School,
Angamaly - 683 572, Kerala, India.

JANUARY 2013 - issue (iii)

UAK NEWSLETTER

OFFICIAL NEWSLETTER OF THE UROLOGICAL ASSOCIATION OF KERALA

Editor's Message

Dear Colleagues,

As this first newsletter for the year 2013 reaches you, after the just concluded successful annual USI Conference in Pune 2013, we gear up for a number of urology meets in our region. Commencing with the midterm urooncology workshop of UAK in AIIMS, Kochi, Lapendofusion2013, followed by UAK annual conference in Tiruvalla.

I take this opportunity to wish you all Success & Happiness through this brand New Year!

Allow me to borrow an inspiring quote from Mr. Sreedharan, Principal Advisor to Delhi Metro at a recent seminar on "VISION KERALA 2030":

"*The secret of my success was punctuality, integrity, professional competency and social responsibility, the four pillars on which people ought to build their careers*".

Let us as individuals and as a professional body, seek to be challenged to greater excellence in these four qualities, not merely as a New Year resolution, but as values of lasting quality and posterity.

We also solicit your valuable suggestions and contributions to improve the content, relevance and reach of this newsletter and the associations' website.



Dr Sanel Varghese
Hon UAK Editorial Secretary.

Secretary's Message

Dear Colleagues,

Happy New Year to You all. After the successful conclusion of the annual meet at Kannur we have entered a new year and look forward to the years various meet's.

Kannur provided superb hospitality and a good scientific meet. The large number of papers submitted resulted in problem of finding adequate space to accomodate them all.

It is proposed to establish a scientific committee who will frame guidelines for the papers and select the papers for presentation. I hope that more papers would come from people in private practice.

Let me sign off by wishing everyone a happy and prosperous new year



Dr Poulose Chally
Hon Secretary, UAK

UAK Office Bearers

President	: Dr AN Thomas
Vice President	: Dr Hamsa Thayyil
Hon. Secretary	: Dr Poulose Chally
Treasurer	: Fredrick Paul
Jt. Secretary	: Dr Vasudevan
Editorial Secretary	: Dr Sanel Varghese
Executive Members	: Dr. Ginil Kumar, Dr Shanmuga Das, Dr. Sathyendran Nambiar, Dr. Saju PR

Editorial Board : Dr. Suresh Bhat,Dr. K.V. Vinod, Dr. Georgie Mathew



UAKON 2012 KANNUR

26th ANNUAL CONFERENCE OF UROLOGICAL ASSOCIATION OF KERALA
26th 27th & 28th OCTOBER 2012
KANNUR

Minutes of the The annual general body meeting , Kannur, 2012

by: Dr Poulose Chally, Hon Secretary, UAK

The annual general body meeting of UAK was held on 27/10/12 at hotel Blue Nile kannur. The President Dr A N Thomas welcomed the delegates to the general body meet. The members stood up in silent prayer in memory of Dr Samuel Koshy who passed away during the year. Dr Krishnamoorthy spoke a few words about Dr Samuel Koshy. The minutes of the annual general body meet held at Kovalam in 2011 was circulated and passed by the house.





The secretary Dr Poulose chally then read the annual report. He expressed happiness at the large number of delegates turning up for the mid term meeting held at Trivandrum. This video workshop organized by Dr Vinod was well appreciated by the delegates. The kannur meet had over 50 papers and the secretary expressed concern over finding time to accommodate all the papers. The house suggested that it is the prerogative of the secretary to accept or reject the papers. The secretary informed the house that he plans to form a scientific committee to look into the selection of papers. The secretary informed the house that at present the only income of the society is the membership fees of new members and a small income from the fixed deposits lying with the society. He suggested that a small part of the profit arising from conferences may be contributed to the parent body. The secretary proposed to start a cancer registry for the society and the same was accepted provided money could be found for the same. At present some money from the society was being used for charity and the secretary proposed that this money could also be used for research by the post graduate students which was accepted by the general body.

In the absence of the treasurer, Dr Suresh Bhat presented a brief summary of accounts which was accepted. The Editor Dr Sanel verghese in his report pointed out that he was able to publish 2 newsletters. He regretted the paucity of articles for publication in the newsletter. As the changes in the address of the members are not being communicated to the editor it is resulting in a large number of newsletters being returned to the editor, He also said that he is in the process of updating the website of UAK.









Dear Doctors,

"Wish you all a Happy New Year."

We have conducted the exclusive workshop Lapendofusion in 2009 and 2011 with an overwhelming response from delegates throughout the country. As a continuation we are planning to conduct the lapendofusion 2013 on August 3rd & 4th (Saturday, Sunday) at Cochin. We will be showing all varieties of laparoscopic and endourological procedures. The highlight of this event will be 3D laparoscopic urological workshop. We request your sincere support and co-operation. Kindly include this event in your upcoming news letter for information. The final details of the programme and venue will be informed later.

Thanking you,
Dr. George P.Abraham
Organizing Chairman,
Lapendofusion 2013



Amrita International Uro Oncology CME and Workshop **24th 25th and 26th May 2013**, International Auditorium, B Block, Amrita Institute of Medical Sciences, Amrita Viswavidyapeeth campus, Kochi 41, Kerala, India.

Dear Colleagues,

Greetings!!

Uro-Oncology Division of Urology department, Medical oncology and Radiation oncology departments at Amrtia Institute of medical sciences, Kochi in association with Kochi Uroclub and Urological association of Kerala is conducting a one day CME and two day workshop on Uro Oncology. We are planning to cover major portion of the academic and surgical aspects of the subject on the three days.

A video instructional course is also planned in the workshop to demonstrate the steps of important surgeries which will be very useful for post graduates and young urologists.

Audience: We are expecting delegates from national level. A good participation from post graduates is expected as the CME discussion will be useful for them. The CME section will attract medical ad radiation oncology doctors apart from the urologist who want to update their academic and surgical knowledge.

Best wishes and warm personal regards

Dr. Ginil Kumar
MS, MCh Uro, DNB(Uro), MNAMS
Professor, Department of Urology
Co Ordinator, Uro Oncology division
Amrita Institute of Medical Sciences, Cochin
Phone: +91-484-2801234-ext-1320 (Office),
+919895071039 (Mob)
e-mail: drginil@aims.amrita.edu
drginil@gmail.com
uroconference@aims.amrita.edu
Organizing Secretary,
Amrita International CME and Workshop on Uro oncology

CME (24th May 2013)

- Discussion on important and controversial issues in Carcinoma of Prostate, bladder, Kidney and penis.
- Symposium and discussion on clinical scenarios.
- Combined sessions and expert views from eminent medical radiation and surgical Oncology specialists.

Workshop (25th and 26th May)

Cases (Subject to availability)

1) Open radical cystectomy and neobladder
2) Open radical prostatectomy (Nerve sparing)
3) Open and laparoscopic partial nephrectomy
4) Open Retroperitoneal LN dissection.
5) Radical nephrectomy and IVC exploration
6) Lap and open nephroureterectomy
7) Video endoscopic inguinal lymphnode dissection

Video class demonstrating the steps of radical prostatectomy and radical cystectomy by Dr Murugesan Manoharan, Miami University, USA

Video symposium on robot assisted laparoscopic surgeries

International faculty

Hassan Abol - enein : Mansoura University Egypt
Murugesan Manoharan: University of Miami, Florida, USA

National faculty

Dr. Mahesh Desai, Dr. Jagadish Kulkarni,
Dr.Ganesh Gopalakrishnan, Dr. Sudhir Rawal, Dr. Rajesh Ahlawat,
Dr. Makarand Khochikar, Dr. Anita Borges, Dr. Amalesh Seth, Dr. Hemant Tongaonkar,
Dr. Yuvaraja, Dr. Raghunath, Dr. Joseph Thomas, Dr V P Ganagadharan,
Dr. T K Padmanabhan, Dr. Francis, Dr. George P Abraham,
Dr. Sanjay Bhat, Dr. Felix Cardoza, Dr. Shyam K Ramesh,
Dr. Krishna Murthi, Dr. Suresh Bhat.









The review article for 2013 was not selected and it was decided that the executive committee would decide upon the same, Dr Nebu Issac proposed Thiruvalla as the venue for UAK annual meet 2013 and this was accepted. Both Dr George P Abraham and Dr Ginil Kumar wanted to hold the mid term meeting of UAK. However both of them said they would be able to hold the meeting only in July – August. Various members raised objection saying that this would be very close to the annual meet and would result in difficulties to the organizing secretary of annual meet. The house felt that if either of them would like to hold the meeting in April May then it would be considered as the mid term meet.

Dr Shanmugha Das was renominated as the Quiz master for the year 2013. Dr George PAbraham was selected as the speaker for the Prof Roy Chally orator 2013, There being no other matter the general body meeting concluded.

PRIZE WINNERS

Best Review Article
"Role of PDE5 Inhibitors in Urology"
Dr Arun Ramdas Menon

Urology Quiz Second Prize
Dr Nitin Negi

Dr P Subramonian P.G. Travel Fellowship
Dr Arun Ramdas Menon

Best poster prize
" Inadvertant use of guidewire as a cause of page kidney : A rare case"
Dr Chandraprakash V

Best paper
"Association of Central Obesity with LUTS in BPH"
Dr Rohan Rajendran.

Best Video prize
"NOTES assisted donor nephrectomy with trans vaginal extraction"
Dr Kishore T A

Urology Quiz First prize
Dr Tanuj Paul Bhatia







email: uaknewsletter@gmail.com website: www.uakonline.com

Bilateral Ex-Vivo Nephron Sparing Surgery with Auto Transplantation for Giant Bilateral Renal Angiomyolipoma

Dr. George P Abraham Dr. Krishnamohan R, Dr. Avinash T Siddaiah, Dr. Datson P George, Dr. Jisha J Abraham, Dr. Oppukeril S Thampan, Dr Krishanu Das, Lakeshore Hospital, Kochi, Kerala.

Introduction

Angiomyolipoma of kidney is a rare benign renal neoplasm composed of varying amounts of mature adipose tissue, smooth muscle and aneurysmal blood vessels.The appearance on ultrasonography (US), computer tomography(CT), magnetic resonance imaging (MRI) and elective angiography is highly characteristic. The frequency of angiomyolipoma varies from 0.7 to 2% of all renal tumors whether the cases were discovered as incidental findings or sporadic with or without associated tuberous sclerosis. More common in females. The usual age at diagnosis is (20 - 40) years and these patients usually present with flank pain or hemorrhage. We describe the case of a young woman with massive bilateral angiomyolipoma and its management [1,2].

Case Report

A 28 year old unmarried female working as Nursing Assistant presented to us with history of bilateral large abdominal mass and flank pain. She was having abdominal discomfort for the past 5 years. No h/o hematuria or voiding symptoms. Clinical examination revealed firm mass in both the flanks extending from the hypochondrium to the iliac fossa. Serum creatinine was 1.3 . CT scan of abdomen revealed huge bilateral renal mass, right side measuring 25 X 18 X13 cm and left side measuring 30 X 19 X 14 cm occupying almost the entire abdomen and replacing almost both kidneys suggestive of bilateral angiomyolipoma of the kidneys.[fig 1]. CT chest was normal. The patient had visited various hospitals and was advised B/L nephrectomy followed by lifelong dialysis or renal transplant. She was not willing for the same and came to us a last resort. Treatment options were discussed with the patient. Angioembolisation was not feasible in view of large size, multiple vessels supplying tumor and poor demarcation between tumor and normal renal parenchyma in the imaging. After explaining risk and outcome, bilateral nephrectomy, bench dissection and autotransplantation was planned. First, right nephrectomy, bench dissection with nephron sparing surgery and autotransplantation was conducted [fig 2,3]. After 4 weeks interval the procedure was repeated on the left side[fig 5,6,7] .

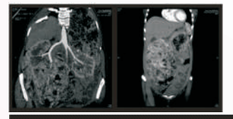




Fig 1, CT scan



Fig 2, R kidney with angiomyolipoma

Operative, postoperative and follow up details were recorded. Total operation duration was 10 and 8 hours, tumor weight was 3 kilograms on either side. Orals started after 24 hours, hospital stay was 7 days for right side and 5 days for left side surgeries respectively..Serum Creatinine was 1.4 and 1.5 mg/dl on 5th postoperative day and at 1 month follow up.

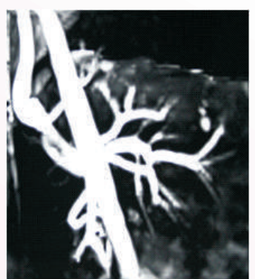


Fig 8, Follow up MR angiogram , L kidney

Follow up magnetic resonance imaging with angiogram showed good perfusion of the left auto transplanted remnant kidney [fig 8]. Histopathology sections from the growth revealed areas of mature adipose tissue, tortuous thick walled blood vessels, smooth muscles and perivascular epitheloid cells which was consistent with angiomyolipoma.

Discussion

Very large renal angiomyolipomas are rarely reported in the medical literature. Multiple lesions are seen in about one third of cases and bilateral tumours in 15%. Management of large bilateral renal tumors generally involves bilateral nephrectomy followed by renal transplantation at later date bridging the waiting period with hemodialysis. These treatment options are associated with problems like shortage of kidney donations suitable for transplantation, significant reduced quality of life, high morbidity and mortality and high cost involved in these procedures. In view of these drawbacks there is resurgent interest in bench dissection and autotransplantation in recent years. In exceptional situations, bench surgery followed by autotransplantation may be indicated. In 2001, team of surgeons from Texas, USA operated on a patient with a tumor burden of 5.5 kgs. One side nephrectomy and one side partial nephrectomy was performed. In 2008, team of doctors from Japan removed large tumor in patient by doing bilateral nephrectomy, total tumor weight was 5.8 kgs. To best of our knowledge, we have removed the largest angiomyolipoma by weight (6kgs) and by size (30 cms) till date. Similarly, we have performed bench dissection and autotransplantation using flower vase incision [fig 9] , large incision of 43 cm for such a large tumor for the first time which is not reported till date [3].



Fig 9 , Flower vase incision

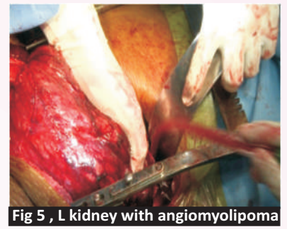


Fig 5 , L kidney with angiomyolipoma

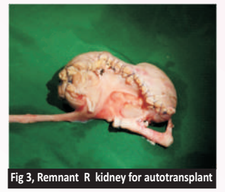


Fig 3, Remnant R kidney for autotransplant



Fig 7, Remnant L kidney for autotransplant

Ex-vivo nephron sparing surgery and autotransplantation for large renal angiomyolipoma is feasible with satisfactory renal functional outcome. Morbidity, poor quality of life and high cost involved in renal replacement therapy can be avoided with this procedure in selected cases. However this surgically challenging procedure should be regarded as the last resort.



Fig 6, L excised angiomyolipoma

REFERENCES

1. Murphy VM, Beckwith JB , Farrow GM, Tumours of kidney and related urinary structures: AFIP Fascicles: 1994 .P. 161 – 178

2. Edle JN . Angiomyolipoma of kidney. Semin Diag Pathol , 1998;15; 21 – 40

3. Giant bilateral angiomyolipomas associated with tuberous sclerosis Ciancio SJ , Vira M, Simon MA , Lerner SP, Schulam PG ; Scott Department of urology, Bayer college of medicine and Methodist hospital, Houston , Texas, USA