

11th EAUN Meeting – sharing insights, unveiling opportunities

Nurses' meeting successful despite volcano eruption

Barcelona

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15 April, evening: On the television - pictures of an ash cloud coming to Europe... Airplanes are staying on the ground. Hopefully tomorrow this will be over....



16 April: All airfields in Europe are closing or already closed. Ulli Haase (board member) calls me, she tells me that Bente Thoft (chair EAUN) is stranded in the Netherlands. After some phone calls we can join a bus to Barcelona sponsored by Astellas. So at 5:30 pm we start our 'Barcelona adventure'.

17 April: Twenty hours later we arrive in Barcelona (around 2.00 pm), just in time for Bente to open the EAUN Meeting.

Of the 400 nurses expected, between 100 and 200 arrived. Unfortunately, also some speakers didn't arrive. For the board, this was a very challenging situation. Some presentations were cancelled, some were taken over by colleagues, and some programme elements were re-arranged. But everybody was very understanding and basically almost the whole programme was presented.



EAU Secretary General
P.A. Abrahamsson

At 15.15 Bente Thoft and Per-Anders Abrahamsson (Secretary General EAU) opened the EAUN Meeting. After the opening the new evidence-based guideline "Good Practice in Healthcare: Continent Urinary Diversion" was introduced. All delegates received a free copy. The board of the EAUN was very proud to announce that the guideline which was published last year - "Incontinent Urostomy" - is accepted by the National Clearing House. The board expressed their hope that this guideline will also be accepted. For the next publication the practice-based guideline "Urethral Catheterisation", section "Male Catheterisation" will be updated as an evidence-based guideline. The board requested members to apply to join this working group (more information is available on the EAUN website).

The Hollister-sponsored workshop "The ins and outs of intermittent catheterization" by D. Newman was very informative. Presented with a focus on US-based practices, the lecture pointed to a lot of similarities with Europe, but also differences. The latter were mostly about insurance and the way nurse practitioners are working in the USA.



Opening day reception

At the end of the day there was a wonderful welcome reception partly sponsored by AMGEN where nurses could meet and enjoy the Spanish sangria and lovely food.



W. De Blok

18 April

After the well-appreciated ESU-course on "Erectile dysfunction" which was held in the morning, W. De Blok replaced H. Van Muilekom to present the state-of-the-art lecture "New developments in urological cancer care

including the nursing aspects". Here are some of the highlights from this lecture:

- Prostate cancer: the prostate pointer, which can be helpful in decision-making for the urologist and patient.
- The number of performed laparoscopic procedures has increased from 9% (2003) to 43% (2007). But both in open as well as laparoscopic procedures, the two major nursing challenges remain: ED and incontinence.
- Testicular cancer: many long-term effects like secondary malignancy, infertility, libido, etc.. Here too, there are many challenges for nursing interventions! The risk of developing second malignancy is 30%. In the first 2 years in 50% of cases the sperm is normal, after 5 years this is observed in 80%.
- Penile cancer: is uncommon, mostly in older men (> 60 years). After amputation, sometimes a perianal urostomy is necessary.
- Bladder cancer: The audience participated in the discussion on the need of an evidence-based guideline about instillation. Currently everybody does it in their own way and there are no standard recommendations available for nurses.



Sietske De Vries wins the 1st EAUN Urology Nursing Quiz

The first EAUN Urology Nursing Quiz took place with questions about urology, Barcelona and soccer. At the end four delegates had only one wrong answer. The final winner was selected by lottery. The prize - a free registration for the EAUN Meeting next year in Vienna - was won by Sietske De Vries from Amsterdam.



EAUN Chair Bente Thoft

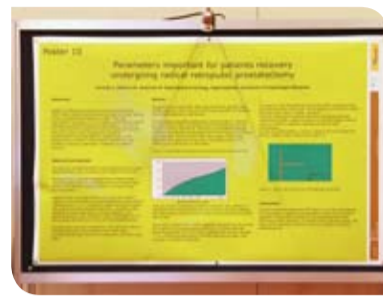
The workshop "Nursing tools for patients instruction on prostate cancer" also new some replaced speakers and I would like to share some important take home messages from 'Prostate cancer: nursing and supportive care':

- High supportive care needs during therapy is predictive of unmet needs afterwards
- Treatment with radiotherapy or hormone therapy is a significant predictor of unmet needs
- Resources should be targeted to those who need them most
- Assessment is crucial
- Promote health and focus on prevention
- Need to develop supportive care strategies to reduce burden of illness

In the same workshop the presentation: "The role of the nurse in diagnostic and bone health" discussed that it is important to establish whether the bone-disease is due to androgen therapy or due to bone-metastasis. Important is the assessment of risk factors, such as medical history, life-style history and fall risk. Non-pharmacological treatment options include: advice about alcohol decrease, to stop smoking and on diet (calcium and vitamin D supplementation)

The next presentation: "Hormone treatment and possible nursing interventions" described hormonal therapy and side-effects, the need for monitoring effects and the complications. Treatment options are androgen deprivation or medical castration. The nurse is a part of a prostate team and nursing interventions are lined up to relieve side effects, treat, monitor effect, ensure QoL, prevent adverse events and research.

In the following lecture "Patient perspective and patient education", L. Denis talked about the optimal medical treatment, patient-centred care, holistic approach, quality of life and equality. The organisation Europa UOMO is in partnership with many other organisations, including the EAUN. The next meeting is in Warsaw in 2010 and the EAUN is also invited.



Winning poster

A poster which discussed "Parameters important for patient recovery undergoing radical retropubic prostatectomy" (P10-s) drew some interesting conclusions: Urinary continence following radical prostatectomy seems to be the cornerstone in the process of regaining pre-operative social and functional capacity. Patient-reported continence 6 months following surgery strongly correlates to the results from pad tests. In other words pad tests can be omitted in patients stating continence.

An oral presentation about "Profile of urology nurses in Turkey" (O10-s) gave an overview of urology nurses working in Turkey. The Turkish urology nurses organisation is very young but it already has 130 members. There are many different education levels and nurses are not active in participating in scientific research. Urology nurses have to be supported in education and research by taking their expectations from the association into consideration.

"Nursing trainee ward for urological patients" (O5-s) described a project on an oncological ward, where nursing students learn about some of the most important issues, while practising in an authentic environment. Four students are coached by two nurses from the ward. The reason to start this project is the fact that in the near future the shortage of nurses is expected to increase. Importantly, research shows that students often continue to work in their final internship department.

"Assesment of nurses' support programme for self-removal of urethral stents with external strings by patients at their home guide by telephone assistance" (O9-p). Nurses' support programme for self-removal of stents by patients at their home significantly improves patients' understanding and acceptance. Considering the positive results of this study, the authors are in the process of establishing specific nurses' support programmes for other urological interventions.

19 April

We started with the EAUN general Assembly. After that the sponsored session by Astra Tech on "Urological management of Spina Bifida during childhood and adolescence - what happens when entering adulthood" was presented. Important issues were to convey good urological management, clean intermittent catheterisation training and education; to discuss that CIC changed the survival of Spina bifida patients reaching adulthood and to realise the importance of bladder management follow-up regardless of age.

The state-of-the-art lecture "Quality of life (QoL) after cystectomy" described how a cystectomy can influence the individual QoL. The objectives are to pay attention to a wide range of symptoms that may occur after a cystectomy and to how we can improve the care in order to support the affected individuals.

There are different measures of QoL: Generic (e.g. SF-36), Symptom-specific (e.g. IPSS), Cancer-specific (e.g. EORTC), Tumour group-specific (e.g. eTACT-B1), Treatment-specific. QoL differs in individual patients. The investigator did research in 190 patients with non-continent urostomy, 82 with a continent cutaneous reservoir, and 180 with an orthotopic bladder.

EAUN Board

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She used the VAS-scale, and asked the QoL questions in the last year. She assessed various parameters including anxiety, self-esteem and incontinence. In conclusion it was said that the number and grade of the symptoms influence the QoL, and not the type of diversions.

Then, a Vantas-sponsored presentation was delivered to the audience "Vantas: a new era for prostate cancer management". Vantas is an implant for patients with advanced prostate cancer. It is implanted in the upper arm with a trochart, and before implantation some anesthesia is given. In some countries nurse practitioners perform this implantation, (removal and the replacement), which can be done in 2-7 minutes. Testosterone suppression is maintained for one year and is well tolerated.

The state-of-the-art lecture of J. Albaugh on "Managing erectile dysfunction and quality of life" was very interesting. Working as a nurse practitioner in this field he has the possibility to do a lot of conservative treatments, educate and do research.

In the workshop "Ensuring continence in difficult cases" two difficult cases were presented: "Nursing care of post-ileal neobladder incontinence" and "Lluis 1-Cancer 0". Both were well-presented cases. Next year this workshop will be open to all urological cases.

Prizes

Because only one author of an EAUN Nursing Research Project was present, the board decided that for an honest assessment the decision who won the award should be based on the research plan assessment, which had taken place by the jury before the meeting.

- The EAUN Nursing Research Project award went to E. Grainger (Denmark) et al. for "Adherence to fast-track programmes within urology nursing care 2008-2010";
- The Poster prize went to L. Grunchy (Denmark) et al. for "Parameters important for patient recovery undergoing radical retropubic prostatectomy" (P10-s);
- The Oral presentation prizes went to A. Ozbas (Turkey) et al. for "Profile of urology nurses in Turkey" and C. Ferrero (Italy) et al. for "Realisation of a pediatric pathway in an adult urological division: a bet for nurse".

After the closing words by the board, there was the possibility for 20 nurses to visit the Fundacio Puigvert hospital, which was informative and exciting.

Last but not least, Ulli, Bente and Hanny sincerely thank Astellas, the Netherlands for the opportunity to travel to Barcelona with a bus arranged by the company.



Enthusiasm for the award winners