

# IRANIAN UROLOGICAL ASSOCIATION NEWSLETTER

## NO. 2, SPECIAL ISSUE: GENERAL ASSEMBLY

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### Co-editors

My name is Niloufar Ahmadian. I was born In 1991 in Amol City, Mazandaran Province (northern Iran). I studied in the schools affiliated to the national organization for development of exceptional talents (the so called Sampad in Persian) in Amol City. In 2009, I started my training in Medical School of the Shahrood University of Medical Sciences (Shahrood, Semnan Province, Iran). My general medical course dissertation, was about the relation between fine needle aspiration biopsy of thyroid nodules and radiological outcomes. In 2017, I was admitted to the urology residency training program at Tabriz University of Medical Sciences and now I am a senior urology resident. Given that I had a top grade, I could take the specialty exam straight. During the period of my training in general medicine, I participated in three courses in the field of clinical reasoning in the medical sciences national Olympiad. I have also worked in playing pieces and I have won several awards for acting and theater directorship. I am fluent in three languages (Persian, English, and Hindi). Continuing to study in one of the two branches of Female Urology or Pediatric Urology is one of my plans.

I was honoured to cooperate as newsletter co-editor in IUA Newsletter and my aim is developing my scientific relationships in Urology. I had the opportunity to enhance the condition of genitourinary surgery and become involved in extension and conduction of scientific and research-related works, and I am really looking forward to receive the workmates ideas in order to make better changes in the newsletter and report as many innovations and achievements as possible.



Dr. N. Ahmadian

My name is Nasser Yousefzadeh Kandvani, and I achieved my specialty in the field of kidney and urology. I was born in 1987 and I accomplished my education in the Hasheminejad Hospital affiliated to the Iran University of Medical Sciences, Tehran (Tehran Province, Iran) in 1998. I was one of the 10% urology board top rankers in 1998 and currently, I work as a faculty member of Tehran University of Medical Sciences in Baharloo Hospital and Yas Hospital Complex. I spent my general medical training in Tehran University of Medical Sciences. During my student days, I had a history of social activities, including the establishment of the Mehravaran Charity Center, the establishment of the Iranian Medical Students Association, and the launch of international student activities at the university. During my studies, I have been working for 4 years as a representative of incoming students in October 1985, and for 2 years I have been representing students in the general medicine course review program of Tehran University of Medical Sciences (MD 90) in the Basic Sciences Committee. At the end of my general medicine course, I was a member of the team sent from Tehran University of Medical Sciences to the Medical Students Olympiad in two courses, and I gained a rank in the field of health system management. During my residency, I had the experience of holding an annual congress of residency training congresses and for a while, I was a member of the residency committee of the Iranian Urological Association. In my opinion, the Iranian Urological Association provides good opportunities to improve the level of urology in the country, and I need to accompany and participate in the association's programs. In this regard, and considering the goals of the newsletter of the association, I am happy to be a member of the team of this newsletter.



prof. N. Yousefzadeh

*"The board of directors of the Iranian Urological Association welcomes the cooperation of members of the urology community in the content of the newsletter and considers the newsletter as the main route of advertising their activities"*



### General Assembly Report

The Public Gathering of the IUA was administered on January 1, 2017, at the assembly room of the Shahid Hasheminejad Hospital. The special circumstances arising from Corona and the holding of this year's congress in a virtual manner and the legal requirement for the assembly to be recognized in person led the board to the point of holding the assembly following the protocol and spacing and of course online broadcasting. At the same time, this year's General Assembly had two important and decisive proposals on its agenda. Promotion of branches to the Society as well as the structure of determining and classifying members based on scientific and professional contributions in the Iranian Urological Association.

At the beginning of the meeting, with the vote of the participants, Dr. Razi, Dr. Seyed Yousef Hosseini, and Dr. Shahr Azad were elected as members of the panel managing the meeting and took charge of the meeting and then Dr. Basiri, the president of the association, criticized the words.

### Activities Report

Dr. Basiri, President of the Iranian Urological Association, presented a report on the activities of the Association and the Board of Directors.

Dr. Basiri: On average, the board of directors of the Iranian Urological Association meets regularly every week, and after the onset of the corona epidemic crisis, these meetings are held via Skype. During all this time, the monthly conferences were held under their usual routine, and with the corona crisis, they continued with webinars with more follow-up. This was in addition to the many other webinars that are being held and are well known to the urology community. Men's Health Day was organized by Dr. Farzad Allameh and the Assistant Congress under the responsibility of Dr. Fallah Karkan was organized regularly and in both cases, we were satisfied and welcomed. This year, the annual congress of the Iranian Urological Association was held virtually for two days in two weeks in the context of the Corona epidemic, and in this regard, it was a pioneer among the scientific associations of the country and even the world (in holding the main annual congress). The President of the Congress was Dr. Nikobakht and the Executive Secretary was Dr. Soleimani. Also, a two-day andrology symposium was held in Tehran, chaired by Dr. Sedighi Gilani and written by Dr. Akhvizadegan. A joint oncology webinar was held with the participation of the Iranian Urological Association and the World Urological Association under the management of Dr. Radfar, with the participation of half of the urology community and a significant number of urologists from other countries.

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One of the activities of the association was to provide research to provide medical services (HSR) on the problems of the urology community. The association's union committee, under the management and responsibility of Dr. Sharifi Aghdas, in the first action of the country's urologists (distribution map) by statistics He prepared and specified that currently 1365 urologists are active in the country and of course, in terms of number, they are more than the ministry's forecast (1200 people in 2025). Distribution and locations and complete demographic characteristics were also obtained.

Based on this research, the board of directors of the association began negotiations with the Ministry of Health to reduce the capacity to accept assistants and ultimately improve the quality of services to the people.

The Forensic and Occupational Medicine Committee under the responsibility of Dr. Nikobakht, by convening meetings and participation of members of specialized branches, was able to prepare specific forms for obtaining consent in common urological practices and publish them for members of the urological community.

The committee also consulted with forensic medicine about the wider use of the urology community's recommended experts, as well as their qualifications (at least 5 years of post-graduate work experience), and reached executive agreements in these cases.

The research committee led by Dr. Ghahestani carried out an innovative work on recommendations for planning urological surgeries, the third edition of which was published as the main platform in the Urology Journal and was also sent to regional and global associations. The committee also conducted a research paper on the tariff for urological surgeries and published it to pave the way for interdisciplinary tariff revisions in the future.

The association's website was updated under the responsibility of Dr. Soleimanzadeh and Dr. Ghahestani, but more importantly, the legal ownership obligation, which was vague and unrecognizable, was identified in a one-year process by setting up a parallel site and was fully registered for the Iranian Urological Association.

The newsletter of the association, which we had been thinking of publishing for a long time, was published with the responsibility and efforts of Dr. Ghahestani, and the structure for its continued publication has been created. The newsletter is in English and Persian for domestic and foreign audiences.

In a meeting organized with the initiative and follow-up of the Urology Association with the Deputy Minister of Education of the Ministry of Health, Dr. Haghdoust, the number of urologists projected in the country was discussed and the results of the union committee were presented and the next meetings with experts were planned.

For next year's congress, Dr. Razi was elected chairman and Dr. Soleimanzadeh's scientific secretary, and they have been meeting for several months.

For Men's Health Day, Dr. Narimani, who has a good track record of working with the association, was given the responsibility. Recently, the BPH Congress was held in collaboration with INUS.

During all this time, Dr. Zargar, as the treasurer of the association, acted in such a way that despite the corona conditions, the financial balance of the association remained positive.

At the end of Dr. Shahr Azad's report, they deeply praised the activities of the board of directors and then Dr. Razi asked for the opinions of the audience. Dr. Zargar, Dr. Soleimanzadeh, and Dr. Jamshidian joined the meeting online and then Dr. Simforosh thanked the board for their tireless activities. He said that the main task of the association was to gather and align urologists.

Due to the problems in the communication lines, the chairman of the association, instead of Dr. Zargar, presented a summary of the financial balance, which was officially approved by the inspector of the association, Dr. Jamshidian. After that, Dr. Zargar connected through Skyroom and recalled the efforts made for Hashtgerd land, and Dr. Basiri praised his deep-rooted and continuous efforts in the association

and concerning Hashtgerd land.

Dr. Shahr Azad suggested that this year's Urology Congress be conducted in person and in accordance with protocols.

The board and the executive board of the association closely monitor the epidemic conditions, and of course, everyone's priority is to include at least some form of face-to-face meetings in the program while maintaining the health of the members.

Following that, the financial report of the association was presented in the form of income and expenses, and Dr. Jamshidian, as the inspector of the association, approved it.

At the suggestion of Dr. Roshan to carry out matters related to Hashtgerd land, the Assembly voted to delegate full authority to the relevant affairs. An extraordinary General Assembly was convened after a 15-minute pause.

### Extraordinary General Assembly session

In this meeting, two important proposals were voted and approved. One of these resolutions is related to the classification of members of the urological community based on points and the introduction of individuals in the annual congresses. Dr. Soleimanzadeh, who was present at the meeting via Skype, explained the decision. The purpose of this project is to motivate members to work in the structure of the association by providing scientific and social credibility. From the beginning of the board, there was a concern about how to attract and motivate the participation of members. In this project, the participation of members is recognized by the association at different levels and becomes a scientific credit in the individual's resume.

The next plan was to upgrade the branches to societies. According to this plan, the specialized societies of the Urology Association, which previously operated in the form of specialized branches, will be promoted and will have powers that can be subsequently engraved and amended with the approval of the general assemblies. Dr. Simforosh welcomed the plan and even considered it a prelude to the next steps. Dr. Seyed Yousef Hosseini expressed his concern about weakening the Iranian Urological Association and creating more divisions, and Dr. Sedighi Gilani later confirmed this concern. Dr. Zargar considered this plan a good way for the future and Dr. Basiri emphasized that this plan was accidentally invented to respond to this inevitable concern and the expansion and independence of sub-specialized branches. It was also emphasized that any person other than a member of the mother association can be a member of two societies as a person with the right to vote. Finally, the plan was approved in the voting.

Following that, the representative of the ministry, Dr. Bayat, welcomed the plan in his closing speech and considered it as a beginning for a path that should be followed in other associations as well. At the same time, he described it as delicate and said that the ministry may be reformed, but efforts will be made to ensure that its spirit and original payment are not tarnished. The General Assembly officially ended with the presence of the representative of the Ministry and the approval of the resolutions.

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### Resolution of the Board of Directors on the content of the newsletter

At the meeting dated January 11, the Board of Directors approved that the content of the newsletter is restricted to scientific and professional issues pertinent to urology community and its requirements, excluding Iranian and Christian new year hails or national attractions exalted on live urology events ,motivating attendees to active participation.

### Approve the calendar of scientific events

Due to the prevalence of webinars and sometimes interference of their schedules, a public demand rose to create a tool to preclude contingency and overlap of events, and many colleagues consider this function would be best attributed to the legitimacy and capacity of IUA body. Therefore, with the approval of the board of directors, a calendar was formed in which the colleagues, regardless of the audit, record the events that they intend in advance. It was also emphasized that there should be complete neutrality in this case and freedom of registration, so the registration of any event will not constitute a definite endorsement of that event or responsibility for how it is held or does not carry verification of BOD.

Name of event	holder	time	date	link
EAU 2021	European Association of Urology (EAU)	Full program	8-12 July 2021	<a href="https://www.eurocongress.uroweb.org/">https://www.eurocongress.uroweb.org/</a>
SJU Congress 2021	Société Internationale d'Urologie (SIU)	Full program	10-14 November 2021	<a href="https://www.siu-urology.com/congress-2021/venue/finland/">https://www.siu-urology.com/congress-2021/venue/finland/</a>
AUA Congress 2021	American Urological Association (AUA)	Full program	10-13 September 2021	<a href="https://www.aua2021.org/">https://www.aua2021.org/</a>
UUA Virtual Congress 2021	Urological Association of Asia (UAA)	Full program	19-21 August 2021	<a href="http://www.uuaet.org/meeting.php">http://www.uuaet.org/meeting.php</a>
ICS Congress 2021	International Continence Society (ICS)	Full program	12-15 October 2021	<a href="https://www.ics.org/1631">https://www.ics.org/1631</a>
INUS Congress 2021	International Neuro-urology Society (INUS)	Full program	29-31 August 2021	<a href="https://www.inus-urology.com/2021/08/29th-inus-congress-2021/">https://www.inus-urology.com/2021/08/29th-inus-congress-2021/</a>
ESSM Virtual Meeting 2021	European Society for Sexual Medicine (ESSM)	Full Program	19-20 February 2021	<a href="https://www.essm-congress.org/virtual/">https://www.essm-congress.org/virtual/</a>



### Report of the meeting with the Chairman of the Supreme Insurance Council

Iranian Urological Association

In the name of God, the meeting of the board of directors of the Iranian Urology Association with the secretary of the Supreme Insurance Council was held on Tuesday, 01/13/2021, focusing on the issue of urology procedures payments and insurance coverage of equipment used for treatment and surgery of urology patients. The meeting was attended by Dr. Basiri, President of the Association, Dr. Sharifi Aghdas, Chairman of the Guild Committee, Dr. Radfar, Secretary of the Urology Association, on behalf of the Board of Directors, and Dr. Razavi, Secretary of the Supreme Insurance Council and relevant experts. First, the problems in the discussion of surgical tariffs were raised and the following issues were emphasized: Lack of interdisciplinary equability and consistency for urology procedures when compared with other surgical disciplines, and lack of coverage of necessary and practical equipment in the treatment of urological patients (such as prostheses, sphincters, flexible ureterscope, and SNN). Then, Dr. Razavi explained the existing financial constraints and also referred to the translation of the CPT 2018 by the medical system. This booklet has been translated literally word by word and is going to replace the current CPT in the future, so the representatives of the association strongly requested that this version should be provided to the association board of directors so as the members can surveil and express their opinions.

Dr. Razavi mentioned that any such fundamental modification requires the approval of the Supreme Insurance Council and the approval of the whole Cabinet. There upon he raised these suggestions as temporary measures to compensate for the aforementioned shortcomings in current CPT:

1. Separation of major surgeries into their components and summation of relevant codes in any procedure
2. Insurance coverage of equipment either single use or undisposible will be undertaken after items proposed by IUA
3. Defining new procedure codes –not recognized in the current CPT-and are usually used by insurance companies as a pretext to abstain paying service providers due rights.
4. Offering code allocation to procedures-not necessarily sophisticated but still consuming-for which no tariff has been assigned yet.

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### Interview with Dr. Shahr Azad

#### Iranian Urological Association

#### 1. First, give a summary of your biography

I entered medical school in 1970.

1977: General Medicine from the University of Tehran,

1983: specialties from the University of Tehran, Shariati Hospital

1984-85: I moved to Arak and stated working as faculty member of the same hospital, which did not continue afterwards.

During the Iran- Iraq war, I participated as a volunteer while in residency and soon after as a deployment to the war front, and behind the front like other Iranian doctors.

1990, I practiced pediatric Urology for six months with a year and half in Onco- Urology at the university of Washington/Seattle USA.

1991-1992, I started to work in Dr.Shariaty hospital as a faculty member, but after a year university selection did not accepted my solidarity.

1992, I began to work in Ministry of defense, shahid Chamran hospital for 28 years.

during this time I have been a guest speaker at scientific conferences along with publishing articles about my practice. I have also translated and authorized two books on urodynamic and urinary incontinence.

I am currently a senior member of AUA with an EAU, working full time at Atieh hospital. I am also trusted expert in forensic medicine centers

#### 2. You are one of those people in urology community who has outstanding activity in cyberspace and social media. How do you see the current state of cyberspace in which urologists show up ?

Cyberspace can be used in two ways

1- Communication with colleagues and sharing ideas

2- Scientific communication and exchange of information and sharing the problems of their patients and obtaining counseling

Regarding webinars, due to the situation of cyberspace in Iran, I must say that it is of little use to me.

In general, God does not take cyberspace away from us.

#### 3. Your principal activity is in the private sector. Did you choose this path and if you return, will you choose the same path?

As I said above

Most of my work has been in the public sector and for a short time at the University of Tehran and Azad, and I am currently mainly active in the private sector.

I am very interested in education but

I did not have special conditions for it as perceived by authorities then.

So if I live again, I will try to be a specialist and active doctor in the educational environment. I love teaching.

#### 4- How do you evaluate the activity of the board of directors of present tenure? What suggestions do you have for the remaining term of the board of directors?

I have always been an active individual in the association and currently. I praised the activity of the well-respected board of direction

From my point of view, the esteemed management can be revised colleagues, especially the youngsters one.

#### 5- About the plan to turn branches into society: How meaningful do you find it? Do you think that this plan will lead to more cohesion in the urology community? What suggestions do you have in this regard and how far do you see the goals of this plan being implemented?

Regarding this question, I must say No. In Iran previous experience shows that all these subgroups, in addition to independence and activity, need to be alongside and unified under the flag of Iranian Urology Association.

#### 6- Apart from this plan, do you consider the performance of this period of the board of directors to be successful in using the forces and potentials of the urological community?

It may be a redundant question, but the choice is the choice of all colleagues and the choices are appropriate according to how it is done and the level of social responsibility, appraisal and commitment of urologists. As it has been practically proven.

#### 7- If you have a point or you add a question to this list, we welcome it.

Wishing you health and success and avoiding ego centrality and intolerance of others opinions.



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### Interview with **Dr. Mohammad Ali Hemmatian** Iranian Urological Association

#### Summarize your professional scientific biography

Hello, I am Dr. Mohammad Ali Hemmatian, married, have two children, graduated from Tabriz University of Medical Sciences, trained in urology at the University of Tehran, Sina Hospital, mentored by the professors Dr. Pourmand, Dr. Mehrsai, Dr. Nikobakht as instances. I was able to pass board exam and get certified as board fellow. I worked in Shahid Madani Hospital in Karaj for 26 years. It is a trauma center. I gained good experiences from this center.

I have been elected as director of Alborz Branch of Urology Association for several years. During this time, we had 14 conferences in collaboration with IUA. I am currently recovering from my corona illness.

#### In your opinion, what has been the best period for the urology community and this field?

Personally, I think that all these years I have been happy to be a member of this association and all have been fruitful and exciting, but in recent years, with recruitment of young people, a wider range of urologists have been attracted to the association.

#### How do you evaluate the activity of the board of directors of the association in this period? What suggestions do you have for the remaining time of the tenure of current board of directors?

Due to unforeseen conditions and the current state of the world during the last year following the outbreak of corona, the esteemed board of directors has been able to keep the urologist colleagues updated with online scientific programs.

#### About the plan to upgrade branches to society: How meaningful do you find it?

Do you think this plan will lead to greater cohesion in the urology community? What suggestions do you have in this regard and how much do you see the goals of this undertaking being implemented?

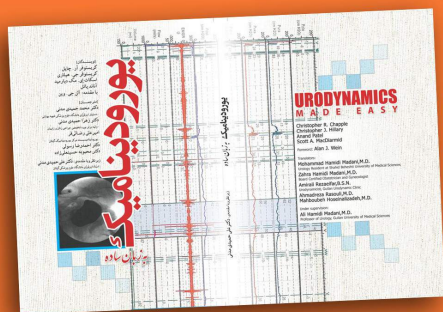
In my opinion, by turning the branches into separate societies, the association will lose its integrity and the power of decision-making and planning will be dispersed. Eventually the decision-making power in the main association will be lost and I am personally against it.

#### Apart from this plan, do you consider the performance of this period of the board of directors to be successful in deploying the forces and potentials of the urological community?

Yes, it is very, very excellent and deserves appreciation.

Thanks for your time and cordial interview.

# IRANIAN UROLOGICAL ASSOCIATION NEWSLETTER



book introduction

prof.

Ali Hamidi Madani

Professor of Urology, Guilan University  
of Medical Sciences

Eurodynamics in simple language

Iranian Urological Association

Urodynamics is an essential component of lower urinary tract function (LUT) assessment that needs to be integrated with other existing assessment methods in the complete assessment process of patients with complaints of lower urinary tract symptoms (LUTS) and includes a wide range of diagnostic approaches, starting with an accurate history and provides information such as flow rates, residual urine, and, of course, more invasive techniques such as pressure-flow study in an integrated form where necessary. UDS helps the treating physician obtain detailed information on how the lower urinary tract is functioning, choose the best treatment approach and manage the patient's symptoms and improve urinary tract function.

Naturally, performing and interpreting this assessment correctly requires acquiring the necessary knowledge in the field of anatomy and neurophysiology of LUT and the necessary skills in performing and interpreting urodynamic procedures. In this regard, there are several scientific sources in the field. The meritoriously called masterpiece URODYNAMICS MADE EASY teaches everything a Urodynamicist needs to know in simple but clear and concise language, and every urologist is recommended to have it in the personal library.

This authoritative scientific source has been reprinted every 9 to 10 years since 1991, and in the fourth edition of this book, which was published in 2019 written by experts such as Christopher R. Chapple, Christopher J. Hillary, Anand Patel, and Scott A. MacDiarmid, and prefaced by Alan J. Wein and published by ELSEVIER Publishing Company, has significantly enhanced its scientific richness and made it a user-friendly reference.

A group of people interested in this field who cooperate with Guilan Urodynamics Center including Dr. Mohammad Hamidi Madani Urology Resident, Shahid Labbafinejad Medical Center, Shahid Beheshti University of Medical Sciences, Dr. Zahra Hamidi Madani, Surgeon and Obstetrician, and board certified Gynecologist 2020, Amir Ali Rezaeifar, Nursing and Urodynamicist, Dr. Ahmad Reza Rasouli and Dr. Mahboubeh Hossein Alizadeh Physicians of the center, under supervision of Dr. Ali Hamidi Madani (Urology Professor of Guilan Medical University) have tried to translate this book in an accurate and reader friendly fashion and dedicate it to those who are interested in this field with full respect and reverence to esteemed translators of previous editions.



## Resolution of the General Assembly on the new organization of the Iranian Urological Association

Note: The proposed organization is designed based on the following main axes and policies.

1. Maintaining the unity and integrity of the urological community of the country and at the same time the possibility of balanced and coordinated growth and development of all specialized trends to promote the position of the field of urology
2. Organizing the activities of specialized branches with the focus on the Iranian Urological Association in improving scientific and educational affairs and providing medical services
3. Expanding active, constructive, and inspiring cooperation and interaction between specialized branches with other fields of science and technology at the national, regional, and international levels.

### Proposed organization

1. From this date, the Iranian Urological Association will be known as the Association and each specialized branch will be known as a Society.
2. For each of the Societies in the place of the Association, the facilities of office affairs will be provided so that the activities will be followed up and implemented under the supervision of the Board of Directors of that Society.
3. The officials of each Society can correspond with their members and the board of directors of the Urology Association. Communication and correspondence with the official authorities of the country - and other

associations and international and regional institutions will be possible with the joint signature of the President of the Society and the President of the Iranian Urological Association.

4. Determining the criteria and criteria for evaluating the performance of societies to quantitatively and qualitatively measure their progress, following the approval of the general proposal in the Extraordinary General Assembly will be on the agenda of the Board of the Iranian Urological Association.
5. Each Society will have 5 members of the "Board of Directors" who will be elected through direct elections with the votes of the members of the same Society. Of these 5 people, one will be the president, one will be the vice president and one will be the secretary of the relevant field.
6. Each member of the Iranian Urological Association can be a member of a maximum of two societies. However, candidacy for election as the Board of Directors of Societies for each member of the Iranian Urological Association will be possible in only one field.

The details of the duties and powers of the Board of Directors, the manner of decision-making and correspondence, the allocation of budgets, revenue generation, the allocation of congressional time percentages and the like shall be specified in the internal regulations of the Societies. This regulation will be compiled after the election of the members of the board of directors and the chairman, vice-chairman, and secretary of each Society, with the participation of the societies themselves and the approval of the board of directors of the Iranian Urological Association.

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### Interview with prof. Madaen

#### Iranian Urological Association

**1. Please introduce yourself:** In the name and remembrance of God, greetings, and thanks to the officials of the association who continue their activities in the hard time of corona outbreak. I am Dr. Seyed Kazem Madain, a retired professor of urology at Tabriz University of Medical Sciences. I was born in 1952 in Shishvan village on the outskirts of Ajabshir city. In 1971, I entered the medical field of Tabriz University. In the middle of my military service, I registered for a residency and in 1979, I entered the residency course in urology at the University of Tabriz. My interest in this field has been due to its service to the vulnerable sections of society. Diseases of this field are also common and the number of specialists in this field was not enough at that time and there were only 5 general urologists in the whole northwest.

The beginning of our residency coincided with the time of the war when I was selected as the person in charge of sending a medical team to the front, and I went to the front five times. After finishing my residency, at the insistence of the then president of the university and with the consent of the Ministers of Health and Science in 1983, I worked as a faculty member in Tabriz. Throughout my faculty, I have had other heavy responsibilities at the same time. When the ministries were separated, I became the president of the University of Medical Sciences, which was the first president of Tabriz University of Medical Sciences after the separation of the Ministry of Health.

At that time we did not have an independent urology group and the surgery group was dedicated (total ENT, urology, thoraxen, etc.). We took the opportunity to form a dedicated urology group, and at that time I was the director of the urology group. In 1984, I was a member of the Board of Examiners of the Urology Board for 35 days. In 1989, I was promoted to associate professor. In 1991 I went to London for a restorative fellowship and in 1999 I became a professor. After becoming the president of the university, I also worked as the vice chancellor for research and then as the vice chancellor for education at the university. In 2005, I took a study opportunity at the Cleveland Clinic in the United States.

**2. Explain to us the growth process and actions of the Tabriz Urology Department during your management:**

I preferred not to go to the private sector and work in the university due to my university goals. First, I set up a specialized clinic in the university with 5 colleagues (Sheikh Al-Rais, etc.). During needs assessment and prioritization, many surgeries were not performed by colleagues (such as duct repair) when different people were trained in subspecialty courses inside and outside Iran. The next priority has been the problem of incontinence and urinary control in women. During our trip to the Netherlands, we learned some incontinence procedures, including Burch and we invited interested people like Dr. Haj Ebrahimi, and she studied as a Female Urologist in Canada, and then she was accepted as a faculty member and established a fellowship in this field. The strategy was for each colleague to work in a specific field to get out of General Urology.

The next issue was patient density. Early on, a normal patient with BPH retention was on the waiting list for surgery for about a year, but that list is now gone. Urology equipment is also complete. We currently have a large number of active and successful university graduates throughout Iran, including Dr. Taghizadeh.

**3. Explain to us the problems along the way of a young urologist:**

Once upon a time, we had a shortage of specialists, but nowadays the number of specialists exceeds the need of the country and urologists remain unemployed, unmotivated and hopeless. Need assessment should be done for the future of these people (creation of new fields, adaptation to the new world, opportunity to study abroad) and attention should be paid to the age of new beginning residents (not over 35 years old).

**4. The professor or collaboration that has had the most impact on you?** The first professor was Dr. Tavakoli, who studied in Germany. They

were literate and confident surgeons, and they were very courageous compared to their time, and I owe them. Professors such as Dr. Simforosh, Dr. Pourmand, Dr. Basiri, and others who have founded modern urology have also influenced us.

**5. What is your opinion about professional ethics in present urology practice over the country?**

In any case, we should not prioritize our caveats over the patients health interests. When the number of graduates increases, ethics is gradually forgotten and procedures without sound indication increase. But the doctor must treat the patient so as he wanted to be treated while illness and the rich and the poor exactly the same.

**6. Have you invented a special technique or method in urological operations?**

The reference book is a summary of people's experiences, let's not be satisfied with the books. Use the experiences of other professors and colleagues. When you reach a dead-end during surgery, immediately do something new that comes to your mind and benefits the patient. We developed techniques in retropubic prostatectomy and its modifications, in hypospadias, and rectovesical fistulas (in collaboration with Professor Basiri). There is also a symphysectomy technique in pediatric urinary tract surgery, all of which are depicted in published articles.

**7. Among urological operations, which operation was more interesting and attractive for you?**

Human intellect is beyond books. I invented a technique when I faced challenges during surgical operations. Once there was a young girl who had her urethra amputated during the trauma and came to us 4 months later with a cystostomy. The patient had no urethra at all. The bladder was also raised and away from the pubis. During the operation, when I noticed that there was a large gap between the distal urethra and the bladder. I released the pedicle flap from the rectus fascia of the abdomen and wrapped it around the urethral catheter in the space between the bladder and the distal urethra. I kept the catheter for 1 month and the patient had complete urination 1 month later and his problem was gone.

**8. Explain the criteria for admitting new specialists to the faculty:**

We have a strategic plan that I was responsible for implementing this project and with the cooperation and support of colleagues; the goal was to meet the urological needs of the people and to be up to date. Based on the needs of the field, we have selected people. In terms of financing, we have tried to solve the economic problem of our colleagues as much as possible.

**9. Given that you are a successful teacher and a successful man also, apart from work, what hobbies do you have in your spare time?**

There is a verse in the Qur'an with the words: And it is not for man except what he tries.

Man is as useful as he tries. I have never been aimless. As a child, I helped my father with farming during the day and studied at night. I have never given up sports and exercise and have always been involved in swimming, gardening, and mountaineering. Exercise is essential for a healthy mind.

**Dear Professor Madaen, I am very grateful to you for giving us your time and I wish you good health and an abundance of blessings from God Almighty.**

## IRANIAN UROLOGICAL ASSOCIATION NEWSLETTER

### Resolution of the special members regalia of the association in the general assembly

#### Distinguished Member

An IUA member who fulfils **Four** of the following items:

1. More than 10 years of IUA membership
2. Being elected as a member of IUA Board of Directors (BOD) for one or more periods (applicable once only).
3. Playing the official role of chairman / secretary / manager of at least one of the IUA events (IUA Annual Congresses, Mid-term Congresses, Men's Health Day, international and subspecialty events of IUA based on IUA Board of Directors' enactment and president's official appointment (applicable once only).
4. Outstanding role in facilitating research in urology aiming to the national priorities
5. Outstanding role in university education in urology
6. Outstanding role in community education in urology
7. Outstanding role in progression of urology practice in national level
8. Outstanding role in welfare of IUA members

#### Leading Member

An IUA member who fulfils **Three** of the following items:

1. More than 15 years of IUA membership
2. Executive role in the structure of the international urology-related associations / societies like SIU, EAU, UAA, ICS, INUS, ESSM or any other similar foundations acting beyond a national framework.
3. Executive role in the main congresses of urology-related associations / societies (mentioned in item 2).
4. Executive role in the international journals (being a reviewer is not applicable)
5. Outstanding contribution in urology knowledge and practice in an international level
6. Being rewarded by a prominent urology-related structure for a positive contribution in research, education, innovation or practice related to urology.

#### Honorary Member

A non-member authority who fulfils **One** of the following items:

1. An Iranian non-urologist with outstanding contribution in urology knowledge development (university managers, inventors, scientists of other disciplines ...)
2. An Iranian non-urologist with outstanding contribution in welfare of the IUA members (like politicians, healthcare managers, charity activists ...)
3. An Iranian non-urologist with outstanding role in introducing urology to the general population (like artists, writers, journalists, media activists ...)
4. A non-Iranian urologist with outstanding continuous role in cutting edge knowledge sharing with IUA members (As constant IUA congress speaker, key facilitator of university mutual agreements with considerable collaborations, constant partnership in research collaboration ...)

**Note 1)** Since some of the above mentioned items may contain unclear instances, decision about eligibility of the candidates will be upon approval by a majority (more than 50%) of the voters of a committee. This committee will contain all previously elected distinguished and leading members in addition to the IUA BOD. Each year's announced new Distinguished and Leading Members will also be added to the Jury committee, so that the number of the committee members will be increasing.

**Note 2)** Honorary members have been excluded from the voters because they may not know the details of eligibility criteria, considering that they are either non-urologist or non-Iranian.

**Note 3)** The Honorary Membership will preferably be awarded to ONE Iranian and ONE non-Iranian candidate each year.

**Note 4)** Only for the *first three* years, *IUA board of directors during recent three courses* will announce:

- Three (3) outstanding members
- No leading member (starting from the fourth year on)
- One Iranian honorary member
- One non-Iranian honorary member

Thus from the forth years' selection, voters will be 9 outstanding members + 7 BOD members. Selections from the fourth year will take place among eligible candidates collected via appropriate announcements in website, social networks and short messages.



## IRANIAN UROLOGICAL ASSOCIATION NEWSLETTER



### Patient report

Please send the necessary actions and discussion about the patient to the email of the editor (prof. Ghahestani): mgrosva@gmail.com

**Iranian Urological Association**

A 5 year old girl with bilateral hydronephrosis and total incontinence was referred by a pediatric nephrologist. The mentioned problems were total urinary incontinence and bilateral hydro uretero-nephrosis.

#### Severe Bilateral hydroureteronephrosis

Rt kidney Anteroposterior Diameter:20mm  
 Lt kidney Anteroposterior Diameter:20mm  
 Rt ureteral diameter:7mm  
 Lt ureteral diameter:5mm

Bladder wall thickness:3.5 mm  
 Post void residue: 100cc

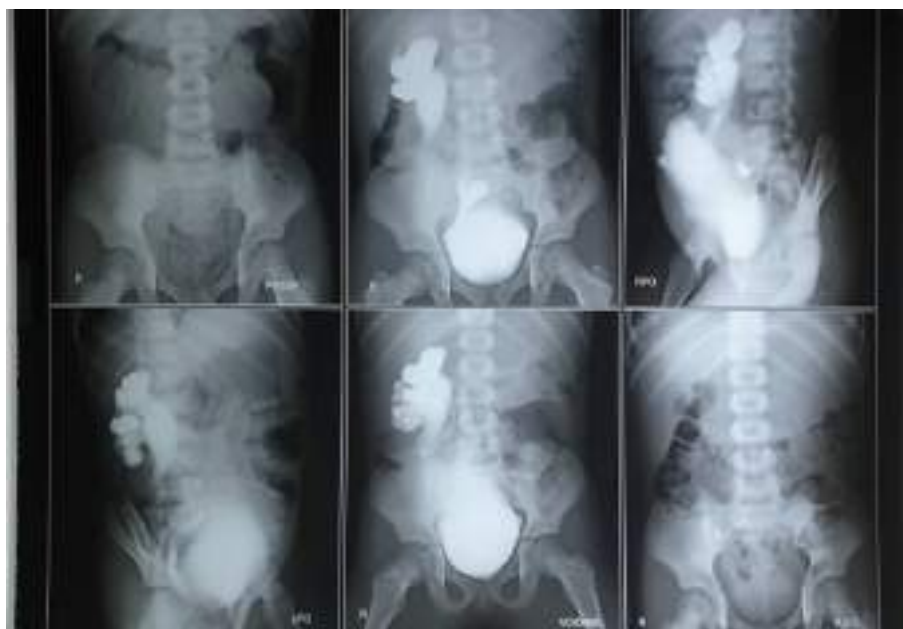
VCUG stereotypes: The following report

Complete urine test:

WBC=3  
 RBC=1  
 SG=1002  
 Nitrite=Neg

Please send the necessary actions and discussion about the patient to the email of the editor (prof. Ghahestani): mgrosva@gmail.com

According to the choice of the head, along with the opposite points of view, will be published in the next issues, along with mentioning the names.  
 Also, the physician and the author of the patient report will be introduced and their suggested treatment options will be explained.



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