

## ICS Committee Reports 2013

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## Report of Children and Young Adults' Committee – July 2013

- Activities continue to be focused on adolescents and young adults
- Continuation of Transition from Childhood to Adult Services of young people with on-going continence care needs
  - Developed an understanding of the issues
  - Collection of baseline data about current practice and issues surrounding the Transition and Transfer into adult services.
  - Predicated on lack of standardized Transition practices in urology.
- Successful Adolescent Meeting in Toronto June 2013
  - Joint meeting with ICCS
  - Multi-disciplinary
  - Many perspectives presented
  - Gaps in service delivery identified
  - Awaiting final report
- Next phase of the Transition to Adult Services has begun
  - Standardization document with the aim to identify health-service problems facing patients with paediatric urological conditions who are becoming adults and the clinical implications this has for long-term health and specialist care. A secondary aim is to develop a systems-approach model that meets the needs of the young person, their family and the clinicians working within adult services.
  - Joint document with ICCS arising from Toronto meeting and bringing together authors working at the adolescent interface
  - Expected completion by November 2013
  - Discussion of response to current practice survey
  - Development and trial of proposed guideline / pathways.
- Evaluation of resources to guide clinicians working with adolescents who have co-existing disabilities
  - Findings to be presented at Barcelona committee meeting
- Manuscript from Beijing Workshop: editing phase
- Barcelona workshop: overlap of interventions used in both children and adults
- Plans for 2014:
  - New Committee chair: Giovanni Mosiello
  - 2 new committee members elected to replace outgoing members
  - Continued focus on adolescent issues
  - Management guidelines for adolescent gynaecological conditions
  - Development of response to review of disability resources

- Completion of deliverable from Toronto Adolescent meeting: Standardization document

## Continence Promotion Committee Annual Report

### Activities:

- Conference call with Satya Vasani, Diane Newman, Jenny Ellis and myself to discuss some historical items and plans for the future. These include WHO designation of WCW, future of the public forum, as well as project and material development and possible restructuring within the committee for efficiency.
- An online survey was written by the chair and completed by the group with very good response rate. A review of this information will take place at the committee meeting to develop guidance for future plans and goals that will translate into clear action items. (See appendix for summary)
- Brian Buckley and Anita Saltmarche stepped down from the committee.
- The public forum was cancelled this year largely due to failure to identify a group with “feet on the ground” in Barcelona to handle the organization and planning. This was a difficult decision. The future of the public forum will be discussed at the committee meeting.

### Requests and Considerations:

- Some members of the CPC have raised issue with there not being a patient advocacy group represented on the Board of Trustees. This has also been a continuing issue within the CPC as individual patient advocates feel they are not getting adequate exposure.
- Would like the CPC workshop at the Annual Meeting be reviewed and approved by the Board rather than the education committee.
- Seems to be a “disconnect” between the CPC and the Board and we need to figure out how to close that gap and increase communication. Many CPC members do not feel the Board of Trustees supports the work of the committee.
- Concerned about the size of the committee and some inactive members.

### Fiscal Requests:

- I would again like to request funding for an interim meeting so provide continuity after the AGM and continue momentum of project and material development- approximate cost £25,000.

## **Annual report of the Education Committee 2012 – 2013**

Adrian Wagg, Interim Chairman

### **Overview**

The Education committee and its sub-committees have continued core functions on behalf of ICS over the past year and have operated within a reduced budget, voted by the Board of Trustees, in response to the decrease in operating funds which is now governed by the committee. The entire committee was engaged in selecting workshops for the ASM 2013, resulting in an excellent variety of high quality workshops. The number of workshops was intentionally reduced this year to allow for committee operations on the first day of the ASM and to encourage a good attendance at each workshop. The committee also acted to ensure that ICS committee outputs were given a platform and were not entered into the usual competition; something which the committee recommends continues into the future. The committee has generated guidelines for experts at the “Meet the Experts” sessions and qualifying criteria for ICS speakers for the future.

### **Courses and workshops**

The courses and workshops sub-committee have continued lively debate on the format, content and location of educational courses and lectures outside the ASM and decided that, strategically, South America would be targeted in view of the location of the 2014 meeting. The reduction in available funding meant that support for some annual activities could not be supported centrally. The committee was heartened by the response of organizers who retained their activities and the ICS link regardless. A list of activities is in Appendix A and funding information Appendix B. The revised, streamlined application process has worked well and had allowed the committee to consider batching applications into 2 review periods annually. A live online applications site, allowing the S/C members to view application progress is in production.

### **E-learning**

The subcommittee was involved in selection of workshops for the e—learning modules and the refinement of previous year’s content. Subcommittee members were also involved in writing questions for older content in line with ICS house style. The subcommittee has also begun the commissioning of a workshop for 2014, specifically for e-learning content. The subcommittee will continue to develop courses and content, monitor question writing and course selection for the next year. As e-learning becomes more sophisticated in ICS; members will be involved with liaison with other relevant committees regarding their proposals for e-learning.

### **Trainees**

The trainees subcommittee established and analysed a survey of trainees needs. In response to this, a specific trainee's session has been launched for 2013. The intent is to provide critical appraisal of trainee's research in a safe forum and allow trainees to network. The subcommittee would like to develop their work and include more non –physician trainees in their activities. The EC would like the Board to consider forming a Trainees committee outside the EC, to promote the needs of trainees within ICS.

### **Education quality**

The subcommittee has produced a house style for ICS questions and is running a faculty development workshop on writing quality questions at the ASM. The subcommittee has additionally produced, with the help of the office, podcasts covering guidelines on good Chairmanship and presentation style and skills which are hosted on the ICS TV website. The subcommittee has also commissioned a podcast on high quality abstracts which will be available after the meeting. A survey of member's views on a core ICS syllabus was conducted and is undergoing analysis and revision.

### **Plans for 2013 – 14**

The committee should like to see a mechanism for ICS educational approval of workshops and courses by other societies and affiliates. The current *ad hoc* process is not suited to purpose. The interim Chairman and office are working on a first draft document of criteria which may well then be developed into an accreditation process. This will additionally be useful for the approval of official ICS educational output. As the ICS strategic plans operationalise, the role of the education committee is likely to change as requirements for approval, accreditation, and quality maintenance and development become core functions. Liaison with the scientific committee will also become increasingly important in this regard. The EC continues to develop and refine its processes and has become more democratic and productive over the past year. The interim chairman wishes the new Chairman every success in continuing this process.

### **Appendix A**

#### **2012-2013 Educational Activities**

##### **Leipzig , Germany, 26-29<sup>th</sup> September 2012. Guest Lecture.**

Werner Schaefer attended the Deutsche Gesellschaft für Urologie Annual meeting in Leipzig, Germany. Werner presented a key note lecture on The Overactive Bladder: A Critical Review, "How much brain does the bladder need?"

**Krakow, Poland, 22-23<sup>rd</sup> November 2012. Add on Course.**

The ICS in conjunction with Practical Medicine “Gynecology and Obstetrics” held an add on course to their 9th Practical Medicine Conference 2012. The focus of the course was to improve the knowledge of medical professions in the areas of;

The mechanisms of childbirth-induced pelvic floor dysfunction.

To review the evidence-based obstetric practice on prevention of pelvic floor dysfunction.

To improve the management of childbirth-induced pelvic floor dysfunction.

To explain mechanisms of new therapeutic interventions for female LUTS.

The local hosts for this event were Tomasz Rechberger and Diaa Rizk. The ICS speakers for this event were Stefano Salvatore, Alois Martan, Annette Kuhn, Piotr Radziszewski and Rona Mackenzie.

**Sicily, Italy, 15-16th November 2012. Add on Course.**

The ICS participated in the AIUG Associazione Italiana di Urologia Ginecologica e del Pavimento Pelvico conference 2012 in Sicily. The add on course was entitled 'Female pelvic floor dysfunction in the Mediterranean: a multidisciplinary approach' and was represented by Sherif Mourad and Mandy Wells.

**Manila, Philippines, 30<sup>th</sup> November-1<sup>st</sup> December 2012. Add on Course.**

The ICS held an add on course in conjunction with the Philippine Urological Association at the Dusit Thani Manila Hotel. The local coordinators were Dr Joel Aldana and Dr Marie Lapitan. The ICS speakers for this event were Margaret Sherburn, Vincent Tse and Patrick Woodman.

**Pune, India, 17th January 2013. Add on Course.**

The ICS participated in the Urological Society of India Annual Meeting. ICS was represented by Ajay Singla who presented two keynote lectures; Management of recurrent SUI in women and A panel discussion on surgical treatment of OAB/SUI.

**Cape Town, South Africa, 24th January 2013. Add on course.**

ICS held an add on course in South Africa with IUGA and in association with Stellenbosch University and the South African Urogyneological Society. The course added on to the IUGA Regional Symposia and was held on 24th January. The local host for this event was Donna Bliss and the speakers were Julia Herbert and Lesley Hanson.

**Dubai, UAE, 7-9th February 2013. Add on course.**

Sherif Mourad was the local host and ICS coordinator on behalf of this course. The ICS funded five speakers to attend, namely Werner Schaefer, Sender Herschorn, Piotr Radziszewski, Bary Berghmans and Sharon Eustice. Following on from the success of the last two year's Nursing sessions, the ICS also supported the Nursing Workshop sessions held on Saturday 9th February- funding the ICS Nursing Committee member, Sharon Eustice.

**Valencia, Venezuela, 11-12th March 2013. Add on Course.**

The ICS in conjunction with the National congress of Gynecology and Obstetrics Venezuelan Society held a two day education course in Valencia. The local coordinators were Ricardo Blanch and Alberto Gonzales and the ICS coordinator Diaa Rizk. The ICS speakers were Diaa Rizk, Katherine Moore and Sophie Fletcher. The speakers presented a range of topics from Cultural differences in the perceptions, experiences and consequences of female UI to Conservative management of stress and mixed urinary incontinence.

**Guadalajara, Mexico, 26-27th April 2013. Guest Lecture.**

The ICS attended an education course in Guadalajara in conjunction with the Sociedad Mexicana De Urologia (SMU), Colegio Mexicano De Urologia (CMU), Consejo Mexicano De Urologia (CONAMEU) and Sociedad Iberoamericana De Neurourologia Y Urologia Ginecologica (SINUG.) Ajay Singla and Carlos D'Ancona represented the ICS at this event. Ajay Singla presented 'Good Urodynamic Practice.' "Slings: TVT vs. TOT" "Pelvic Prolapse: Anterior and Posterior Mesh Repair, Should We Be Afraid?" Carlos D'Ancona presented Good Urodynamic Practice. Both speakers participated in the roundtable- urodynamics in children. The local host for this event was Dr. Daniel García Sánchez.

**Oporto, Portugal, 29-30th April 2013. Add on Course.**

ICS hosted a hands-on education course on functional bladder in conjunction with Santo Antonio Hospital -CHP, Porto, Portugal and the Sociedad IberoAmerican Neurourologia e Uroginecologia (SINUG).The speakers for this event were Marcus Drake and Jacques Corcos. The local host for this event was Mario Gomes.

**San Diego, USA, 4th May 2013. Guest Lecture.**

Francesco Cruz represented the ICS at the AUA Annual Meeting in San Diego, providing a keynote lecture on Urgency/Bladder Afferent Signaling/Urothelial-Afferent Signaling.

**Latina, Italy, 20-22nd June 2013. Guest Lecture.**

Chris Chapple represented the ICS at the Italian Society of Urodynamics (Società Italiana di Urodinamica, SIUD course in Latina. Chris presented Tissue engineered solutions for lower urinary tract reconstruction. The local host for this event was Enrico Finazzi-Agrò.

**Oporto, Portugal, 19-20th August 2013.**

The focus of the workshop was for six delegates (young surgeons) to receive hands on surgical training on pelvic floor reconstruction. We had 15 applications for the 6 available positions. This event was organised by Mario Gomes and Diaa Rizk.



## **Forthcoming Courses;**

### **ICS Education Course in conjunction with SIU Vancouver, BC, Canada. 8th September 2013.**

The ICS will be hosting an afternoon workshop at the Société Internationale d'Urologie annual meeting in Vancouver on Sunday 8th September.

The ICS Speakers for this course are; Suzy El Neil, Inder Perakash, Bernhard Liedl and Tomasz Rechberger. The ICS Speakers and their topics will be as follows:

- Suzy El Neil;
  - Recent Advances in the Evaluation and Management of Genito-urinary Fistula
  
- Inder Perakash;
  - CNS and Urinary Incontinence: An Update
  
- Bernhard Liedl ;
  - Management of Urinary Incontinence in the Elderly; Male
  
- Tomasz Rechberger;
  - Management of Urinary Incontinence in the Elderly; Female
  - Role of Connective Tissue Alterations in Female Pelvic Floor Dysfunctions

### **Hands on Urodynamics Course Oporto, Portugal, 27-28<sup>th</sup> September 2013.**

The ICS will be hosting a hands-on education course on Urodynamics in Portugal in September 2013. The course will be hosted in conjunction with Santo Antonio Hospital-CHP- Porto, Portugal and the Sociedad Ibero American Neurourologia e Uroginecologia (SINUG.) This course will take place at the Santo Antonio Hospital in Oporto on 27th & 28th September.

The ICS Speakers for this course are; Paul Abrams and Peter Rosier. The ICS Speakers and their topics will be as follows:

Paul Abrams;

- Role of Urodynamics in patient's management
- Evaluating urethral function; Definitions, Methods, VLPP and UPP
- Hands on Urodynamics; Normal urodynamic examination, Stress and urge urinary incontinence, Mixed urinary incontinence and Infravesical obstruction (BPH.)
- Good Urodynamic Practice
- ICS Conference
- Hand on Urodynamics; Neurogenic bladder ( multiple sclerosis, FAP, Spinal cord injury )

Peter Rosier;

- Interactive session: Practical Urodynamic; Equipment and Material, Catheters and transducers, Balancing and calibration, Slide-show: urodynamics step-by-step.
- Multichannel 's Urodynamic Evaluation; Cystometry and Pressure/Flow Voiding Study

- Hands on Urodynamics; Normal urodynamic examination, Stress and urge urinary incontinence, Mixed urinary incontinence and Infravesical obstruction (BPH.)
- Neurogenic Lower Urinary Tract Dysfunction and Urodynamics
- ICS Conference
- Hand on Urodynamics; Neurogenic bladder ( multiple sclerosis, FAP, Spinal cord injury )

The Director of the event will be Mario Joao Gomes.

**ICS Education Course in conjunction with the Turkish Continence Society, Antalya, Turkey, 4-6<sup>th</sup> October 2013**

The ICS will be hosting a one day education course on Pelvic Organ Prolapse (POP) in Antalya in conjunction with the Turkish Continence Society. This course adds on to the 3<sup>rd</sup> Congress of the Turkish Continence Society on Functional and Female Urology, 4-6<sup>th</sup> October 2013.

The local host for this event is Bulent Cetinel.

Sender Herschorn, Dirk De Ridder, Sherif Mourad, and Karl Dietrich Sievert will be representing the ICS presenting the below topics;

Sender Herschorn;

- POP Evaluation
- Surgical Treatment of Apical Prolapse: Abdominal Approaches

Dirk De Ridder;

- POP Treatment Alternatives: When to Treat?
- Surgical Treatment of Apical Prolapse: Vaginal Approaches

Sherif Mourad;

- Surgical Treatment of Anterior and Posterior POP
- Panel: POP Surgical Treatment: Case Discussions

Karl Dietrich Sievert;

- Mesh Complications in POP Surgery
- Panel: POP Surgical Treatment: Case Discussions

**ICS Guest Lecture in conjunction with the Hellenic Urological Association (UNUFU), Kalamata, Greece, 4<sup>th</sup> October 2013.**

The ICS will be attending the Hellenic Urological Association (UNUFU) Annual Meeting in Kalamata. This course will take place on 4<sup>th</sup> October 2013 at the Philoxenia Hotel, Kalamata.

The local host for this event is Stavros Charalampous.

Bertil Blok will be representing the ICS presenting a key note lecture on Male Incontinence.

**ICS Education Course in conjunction with the Hungarian Continence Society, Sopron, Hungary, 11-12<sup>th</sup> October 2013.**

The ICS will be hosting a one day education course in Sopron in conjunction with the Hungarian Continence Society. This course adds on to the biennial congress of the Hungarian Continence Society, 11-12<sup>th</sup> October 2013.

The local host for this event is Dr. Ferenc Katona.

Marcus Drake, Marijke Slieker-Ten Hove, Christine Norton, Helmut Madersbacher and Heinz Koelbl will be representing the ICS presenting the below topics;

**Marcus Drake;**

- Terminology of Lower Urinary Tract Function and Dysfunction – An Update
- What is the Role of Urodynamics? – Are They Always Necessary?
- Mini-invasive alternatives – Botulinum Toxin A and Sacral Neuromodulation
- In the Male; The Male Slings – Are They Already Perfect?

**Marijke Slieker-Ten Hove;**

- Physiotherapy for Urinary Incontinence – What is Evidence-Based?
- Prolapse, diagnostics and treatment by the pelvic physiotherapist

**Christine Norton;**

- Faecal Incontinence – An Unrecognized but Important Problem
- Incontinence Aids in 2013 – What, When and For Whom?

**Helmut Madersbacher;**

- New Insights in the Brain presentation of the Bladder- In the Elderly
- Basic Diagnostic Workup – The Value of the Bladder Diary
- The Overactive Bladder; Behavioural Therapy, Pharmacotherapy or Both?
- In the Neuropaths; Is Surgery Always the Last Resort?

**Heinz Koelbl;**

- The Role of the General Practitioner in the Management of the Incontinent Patient – the Expectations
- In the Female; Meshes and Slings – What Is In, What Is Out?

**ICS Education Course at SOBEST, Salvador, Brazil, 13-14th October 2013**

The ICS in conjunction with the Brazilian Wound, Ostomy and Continence Society will be hosting a two day education course 13-14th October 2013 in Brazil. The course will add- on the Brazilian Wound, Ostomy and Continence Societies main annual meeting which takes place 13-17th October 2013 at the Hotel Pestana, Salvador, Bahia. The local host for this event will be Beatriz Yamada.

The ICS Speakers and their topics will be as follows:

**Adrian Wagg;**

- Urinary and Fecal incontinence – The ICS and ICI algorithms
- Treatment strategies for geriatric incontinence
- Geriatric incontinence and risk of fall and fracture

**Donna Bliss;**

- Incontinence in non-neurological disorders-Skin care
- Nursing care for geriatric incontinence
- Diet and food in continence care: myths and truths

**Jacqueline Cahill;**

- Psychosocial impact of urinary and fecal incontinence
- Economics and public policies on continence management
- The role of patient groups in improving patient education about incontinence care and public access to incontinence services

**Simone Bothelho Pereira;**

- Incontinence management during pregnancy
- Pelvic Organ Prolapse (POP)- Non-surgical management
- Incontinence in athletes

**ICS Education Course in Brazil, 15-16<sup>th</sup> November 2013**

The ICS will be hosting an education course in Brazil in November 2013.

The course is entitled “Update in Urogynecology” and will be hosted in conjunction with the Internacional Congress of the Brazilian Nucleus of Urogynecology, Federação Brasileira dos Associados de Ginecologia e Obstetrícia (FEBRASGO) and Sociedade Brasileira de Urologia (SBU.) This course will take place at the Salvador Convention Centre on 15<sup>th</sup> & 16<sup>th</sup> November.

The ICS Speakers and their topics will be as follows:

- Donald Ostergard;
  - Surgical Treatment: site-specific
  - Trouble – how to avoid and deal with it?
  - Complex urinary incontinence
  - Urinary Fistulas; Definition treatment
  
- Bary Berghmas;
  - Conservative Treatment
  - Physical Therapy – real treatment or surgical postponement?
  - The role of physical therapy
  
- Peter Rosier;
  - Requiem to Urodynamics
  - Bladder ageing
  - Treatment of refractory OAB

The local host for these events will be Carlos D’Ancona.

**Kathmandu, Nepal, 2-3rd April 2014**

ICS will be hosting an add on course at the Nepalese Society of Obstetricians and Gynaecologists (NESOG) annual meeting in Kathmandu. The ICS will be represented by Diaa Rizk, Veronica Hagggar, Andrew Gammie, Sherif Mourad and Adrian Wagg.

**Appendix B**

	Budget	Actual as of 28/02/13	Actual as of 31/03/13	Actual as of 31/04/13	Actual as of 31/05/13	Actual as of 30/06/13	Ongoing against budget	Actual as of 31/07/13
Dubai	£8,600	£6,713	N/A all claimed	N/A all claimed	N/A all claimed	N/A all claimed	N/A all claimed	N/A all claimed
South Africa	£5,000	£3,792	N/A all claimed	N/A all claimed	N/A all claimed	N/A all claimed	N/A all claimed	N/A all claimed
Guest Lecture India	£2,500	£1,824	N/A all claimed	N/A all claimed	N/A all claimed	N/A all claimed	N/A all claimed	N/A all claimed
Venezuela Add on	£6,000			£4,632	N/A all claimed	N/A all claimed	N/A all claimed	N/A all claimed
Cadaver Course	£303				£300	N/A all claimed	N/A all claimed	N/A all claimed
Mexico GL	£1,100				£619	N/A all claimed	N/A all claimed	N/A all claimed
SIUD GL	£500				£128	N/A all claimed	N/A all claimed	N/A all claimed
AUA lecture GL	£2,800				£-	N/A all claimed	N/A all claimed	N/A all claimed
ICS Functional Bladder Course 2013 Portugal GL	£500					£491	£500	
Urodynamics Course Portugal GL Sept	£303						£303	
Brazil Nurses Add on &	£16,200						£16,200	

translation Oct								
Hungary Add on nov	£2,500						£2,500	
Greece GL	£500						£500	
Turkey add on	£ -	N/A	N/A	N/A			£ -	N/A
Brazil Gynae & urology	£12,900						£12,900	
Thailand Guest Lecture	£2,800						£2,800	
Total	£62,506	£12,329	£ -	£4,632	£1,047	£491	£53,211	

Budget for year  
£57500

## Ethics Committee Report 2013

Once again, there has been limited activity for and from the Ethics Committee (EC) during 2013 therefore the Committee's report is limited.

### 1. Activities/achievements:

Some of the EC members participated in the ad hoc Disciplinary committee (Nina Davis, Edward Stanford) joined by 2 others. The EC continues to monitor disclosures at the annual meeting and has discussed efforts to improve that monitoring. The EC is unaware of any disclosure issues that required attention.

There are no immediate action items for the 2013 meeting

### 2. Committee membership;

Members:

Several new members will be required for the EC. The most recent Duties and Organization of the Ethics Committee 2009 was amended to have a Committee consisting of 15 members. Currently, there are 10 members:

E J Stanford	Urogyn	2016	
Nina Davis	Uro, geriatrician	2013	will renew
Andrew Farkas	Gyn	2015	
Suzanne Hagen	Nurse	2015	
Mitesh Parekh	Urogyn	2013	has not participated, will not renew
Tom Rosenbaum	Uro	2015	
KD Sievert	Uro	2013	will not renew
Safwat Tosson	Gyn	2015	

New physio member added to replace Margaret

We will need to recruit 3 or 4 new members.

The anticipated structure of the EC is gyn 2; uro 2; continence nurse 1; geriatrician 1; physio 1.

The General Secretary also serves as a member. The bylaws of ICS indicate that the GS is a non-voting member however the Duties 2009 indicate he/she is a voting member based on his/her discretion.

Action points:

I propose that the EC remain with the current structure, add 3 new members, with a max of 15. This allows for the addition of ad hoc members as needed.



The Ethics Committee recommended that, to avoid any conflict of interest, the General Secretary not be a voting member of ICS committees. The Board considered this request and agreed with the recommendation. Therefore the General Secretary will remain as an ex-officio member of committees without voting rights.

The chair is preparing a proposal to the Board of Trustees that the Ethics Committee chair attend board meetings as an ad hoc member.

The EC has elected to not designate a Deputy Chair.

**3. Budget requests:**

This year the EC is hosting a lunch symposium with a guest speaker. This has been funded by the ICS. The exact amount is not known to me. We request a sum to cover conference calls, speaker travel, meals, and lodging.

**4. Disclosure/Research;**

The disclosure statement required of each presenter was very successful at the Glasgow and Beijing meetings. The EC assumes that the Scientific Committee will continue to require a disclosure slide be filled out by each presenter and presented at each presentation. The question is how to monitor the disclosures in regards to content.

Discussion is how to expand this to all scientific presentations.

Action point: The manner by which to monitor content will be discussed at the EC meeting.

**5. Disciplinary Committee**

The issues of the complaints and resolutions will be discussed in the EC meeting.

**6. The EC proposed a code of conduct for all members and meeting participants to sign and comply with its directives.**

**7. One request from the membership was discussed. The correspondence is attached.**

The EC communicated through the website discussion forum with the excellent assistance of the administrative staff of ICS, in particular, Avicia.

Correspondence

Dear Dr Dietz,

I must apologise for the delay in responding to your e-mail from November. I have now gathered the facts and have discussed with my committee. If I interpret your concerns

correctly they are:-

- 1) Should the Annual Meeting Chair be allowed to speak at an industry symposium
- 2) Should the Editor in Chief be allowed to speak at an industry symposium
- 3) Should the GS be allowed to present an industry backed abstract.

In response:

1) Should the Annual Meeting Chair be allowed to speak at an industry symposium The office have confirmed that Limin was not party to any abstracts this year but we do know he did a 5 minute Chairman's welcome at the Astellas symposium and he chaired a workshop. The ICS Annual Meeting Guidelines which are NOW in effect state the following (section 18.4 of the guidelines): "Speakers or Chairmen of industry symposia are not allowed to Chair ICS sessions on a similar subject. Symposia are not to be held within the ICS programme (during official ICS scientific sessions, workshops or social events). The ASM Chairman should not present in or Chair such symposia." After looking in to this, the EC does not feel that Limin contribution to the industry talk was sufficient for concern as it was just a welcome/introduction but, to address your concern, in future years this will not be allowed. The Board had already changed within the guidelines earlier in 2012 which are now in effect after the Beijing meeting as scheduled. Therefore, in the opinion of the EC, there is no need for any changes to any current guideline documents or additional recommendations to the Board of Trustees.

2) Should the Editor in Chief be allowed to speak at an industry symposium? The EC understands that Dr Chappel did a 20-minute talk at the Allergan symposium on Treatment options for the neurogenic bladder. The EC has worked hard on disclosure guidelines. After discussion, the EC feels that as long as full disclosure is made before speaking that this is considered sufficient. However, none of the Ethics committee members were in attendance at this symposium and so cannot comment as to whether there was any incident of improper disclosure. Further, the ICS office has reminded me that the EIC is not in contract with ICS but is with Wiley directly for his EIC work and therefore we do not have that much "control" over his research and what events he attends/presents.

3) Should the GS be allowed to present an industry backed abstract? Sender was party to abstracts at ICS 2012 and office informs me that he was asked last minute to present abstract number 68 and 222 because the arranged presenter could not attend or present. Unless he did not tell the office, Sender did not present at any other sessions or symposiums while in Beijing. Again the committee felt that the ICS disclosure policy is sufficient to cover this point. Considering that the GS position - as with all trustees are unpaid, are we able to state that they should refrain from all industry led research and "acting for industry" during their term of office. For Trustees this would be 6 years. I was the moderator at the scientific session at which the GS presented research that he was personally involved in. I can assure

you that the GS complied with ICS disclosure guidelines and made no comments of a personal or inappropriate nature. His presentation did not deviate from the data on the slide set and during Q&A, only factual information was given. The office also advises me that as part of the financial audit all of the trustees disclosures are reviewed to ensure that there is no undue influence within the Board and therefore affecting financial decisions or strategies of the charity.

I appreciate your bringing concerns to the EC. I hope that the Committee's efforts meet your expectations.

Sincerely,

Edward Stanford MD MS FACOG FACS  
Chair, ICS Ethics Committee

## **ICS Fistula Committee Report 2013**

*By : Sherif Mourad*

During the last year 2012/2013 The Fistula Committee has worked hard to continue on the training programme through the fistula workshops.

The committee now has one main group of members. One elected member (Gill Brook) joined the main committee to replace Limin Liao.

### **Fistula Committee Members**

Sherif Mourad

Chris Payne

Ervin Kocjancic

Sophie Fletcher

Gilles Karsenty

Hassan Shaker

Jacqueline Cahill

Limin Liao (Gill Brook)

Suzy Elneil

Ahmed Saafan

Diaa Rizk

### **Mission sub-committees**

#### **1. Awareness and coordination with ICS CPC, PCC & Website:**

- a. Sophie Fletcher
- b. Jacqueline Cahill
- c. Sherif Mourad
- d. Limin Liao

#### **2. Communication/coordination with other medical organizations:**

- a. Chris Payne
- b. Gilles Karsenty
- c. Sherif Mourad
- Suzy Elneil

#### **3. Funding:**

- a. Jacky Cahill
- b. Ervin Kocjancic
- c. Ahmed Saafan
- d. Diaa Rizk

#### **4. Training:**

- a. Sherif Mourad
- b. All zonal chairs

#### **5. Follow up:**

- a. Ervin Kocjancic

- b. Hassan Shaker
- c. Sophie Fletcher

### **Zonal Task Forces**

It was decided to keep the basic structure of the interim committee which divided the world's problem areas into zones with one committee member assigned to each zone.

<b>Sub-committee</b>	<b>Zone</b>	<b>Sub-committee chair</b>
Zone 1	Africa North East	Sherif Mourad
Zone 2	Africa West	Gill Karsenty
Zone 3	Africa Central	Suzy El Neil
Zone 4	Asia	Limin Liao
Zone 5	Americas	Chris Payne / E Kocjancic

### **Training courses:**

- ***The first ICS Fistula Workshop*** was held at Ain Shams University Hospital in Cairo, 16-17 January 2010, in collaboration with the Pan Arab Continence Society (PACS). The workshop was led by Professor Sherif Mourad together with his associates Drs. Farahat, Farouk, Omar, Osman, Saafan, Shaker and Yassin. The participants were urologists, gynaecologists, and urogynaecologists from Senegal, Benin, El Salvatore, Honduras, USA, United Kingdom, Indochina, Saudi Arabia and South Korea. Some came from countries where obstetric fistula is endemic, or endemic in neighbouring countries, while others had a special interest in going to areas where this physically and socially debilitating medical tragedy occurs in order to help as a surgeon. Some participants in poorly funded countries were supported by the ICS for the cost of travel and the workshop.
- The committee plans to create an internet based course that will be taken by participants prior to the workshop. This will allow the workshop to then focus much more on technical details of the surgery.
- ***The second ICS Fistula Workshop*** in Kampala – Uganda; Following on from the success of the 2010 Fistula Workshop, the ICS offered 5 ICS members the chance to attend the 2011 Surgical Repair to Vagina Fistula Workshop in Uganda. The workshop took place between 28<sup>th</sup>-30<sup>th</sup> April in Kampala at the Kibuli Hospital, organised by Dr Sherif Mourad.
- The trainers included:
  - \*Sherif Mourad (Director of the workshop and ICS Fistula Committee Chair)
  - \*Hassan Shaker (ICS Fistula Committee Member)
  - \*Mohamed Yassin (ICS Member)
  - \*Ahmed Saafan (ICS Fistula Committee Member)
- The trainees were ICS members from Burkina Faso, Jordan, Egypt, Canada and Mexico.

- The workshop started with the theoretical section as seen in the programme and then the practical/ surgical section which took place along 3 days.
- Sherif arranged for the trainees to experience 12 cases initially, but during the workshop the delegates in fact underwent more than 30 cases! The cases included all the different types of vaginal fistulas; low fistulas, high fistulas, multiple, simple, recurrent up to 6 times fistulas, complex and rectovaginal fistulas. The trainees also performed cases of urethroplasty and urethral reconstruction. The approaches were both vaginal and abdominal approaches. Also Ureteric reimplantation was performed and I operated on a rare case of vesico-uterine fistula.
- The workshop was a great success on the national level, and was noted in the local newspapers, Radio and TV.
- Whilst in Kampala Sherif Mourad discussed with local authorities (MOH, University and national hospital director) the possibility of establishing a large training center in Kampala as a referral center for East Africa for the treatment of Vaginal fistula. He also met with UNFPA representative in Uganda and we discussed the possible motions of preventive measures of this big problem.
- ***The ICS Fistula Surgical training course*** in Chengdu – China. Limin Liao the China subcommittee chair organized an ICS fistula course in collaboration with the Chinese Continence Society. Sherif Mourad was invited to perform live surgical training for fistula repair. Two live surgeries were performed and transmitted directly to the conference room where all the audience were following the entire steps of the procedures and well translated by Limin and other Chinese gynecological Professors. This was followed by a lecture and extensive discussion about the possible complications of fistula repair given by Sherif Mourad who represented the ICS. The follow up reports from China showed that the 2 cases are completely dry and are doing very well.
- ***The third ICS Fistula Workshop*** was set up and run by the Chair of the ICS Fistula committee, Professor Sherif Mourad. The faculty included Dr Hassan Shaker, Dr Ahmed Saafan and Dr Mohamed Hussein, all from Ain Shams University and Suzy Elneil, from University College Hospital in London. The course took place at Luxor International Hospital, which is based in the ancient city of Luxor in Egypt. Luxor was the ancient city of Thebes, the great capital of Egypt during the New Kingdom, and the glorious city of the god Thebes. Ten delegates attended the two and half day foundation course in the study of fistula surgery, and all its ramifications. The delegates were a true international mixture coming from Egypt, Jordan, Puntland in Somalia, Turkey, Switzerland, United Arab Emirates and United Kingdom. Roughly half of the candidates were urologists and half were obstetricians and gynaecologists. All of them had had exposure to fistula surgery and some were already surgeons working in this field. On the morning of the first day, we ran a basic theory course on the anatomy, aetiology and pathophysiology, surgical techniques, complications and the management of complications of patients with obstetric and iatrogenic fistula. In the afternoon we started with two cases in adjacent theatres. The cases were both small juxta-cervical vesicovaginal fistulas in women who had suffered obstetric trauma. Both were repaired successfully, and on our post-operative ward rounds over the following two days both patients were making a

good recovery. Candidates were divided into two groups, one group divided between the two theatres and one group observing the surgery through a video-link. Some of the faculty were based in the hall and some in theatre, thus facilitating a continuous two-way dialogue between the theatre and the hall. The candidates found this to be very useful, as they were able to ask questions throughout surgery.

- On the second day, the team operated on five complex cases. The cases included a recurrent obstetric cervico-vesico-vaginal-uterine fistula (who needed a hysterectomy), two patients with severely contracted bladders following primary obstetric fistula repair several years ago who needed bladder augmentation. On day three, three patients underwent surgery. They included a patient with recurrent vesico-vaginal fistula that occurred 25 years after primary repair and two patients with urinary stress incontinence post-primary fistula repair. All patients made a good recovery post-surgery and on our post-operative round later on the third day, we were welcomed by the patient's families and photographed! We felt honored to be received in such a wonderful way.
- The feedback from the candidates was very positive. They found the ICS course to be 'intensive', 'informative', 'excellent' and 'perfect for what I hope to do later this year'. These are direct quotes from some of the candidates. Several candidates were on the verge of starting work with different hospitals in Africa with colleagues in the field in fistula surgery. The faculty were able to provide guidance. Some of them will be joining members of the faculty in their on-going fistula work in sub-Saharan Africa.
- The **4<sup>th</sup> ICS Fistula Workshop** in Kampala – Uganda on December 13-15<sup>th</sup>, 2012.
- The trainers included:
  - \*Sherif Mourad (Director of the workshop and ICS Fistula Committee Chair)
  - \*Mohamed Yassin (ICS Member)
  - \*Ahmed Saafan (ICS Fistula Committee Member)
  - \*Mohamed Metwaly (ICS Member)
- The **5<sup>th</sup> ICS Fistula Workshop** in Kampala – Uganda on June 6-8<sup>th</sup>, 2013.
- The trainers included:
  - \*Sherif Mourad (Director of the workshop and ICS Fistula Committee Chair)
  - \*Ahmed Saafan (ICS Fistula Committee Member)
  - \*Mohamed Metwaly (ICS Member)

It is quite clear that the ICS Fistula course provides a good starting point for those doctors who wish to learn more about fistula surgery. It covers obstetric, traumatic and iatrogenic fistula and also deals with the complications seen post primary repair, such as contracted bladders and urinary stress incontinence. Furthermore, it provides a platform from where surgeons can take a confident leap into providing care for these women and children, who have suffered such devastating injuries. This makes it a comprehensive and laudable course. It is likely that in years to come this course will need to be expanded, as interest in this field continues to grow.

**Fistula Website:**

The fistula website is designed in a collaborative work between the FC, the CPC and probably the PCC with Sophie Fletcher and Jane Meijlink as the director of the process. The news and activities of the fistula committee will be available on line, together with some educational material including teaching power point slides and videos of fistula repair.

In fact a dedicated video showing the different aspects of the fistula committee will be produced by the ICS office with the help of Jane and other members, to be available on line as well.

**Fistula Fact Sheet:**

Jane Meijlink together with Sophie Fletcher and Sherif Mourad produced a balanced fistula factsheet that was well reviewed and approved by the committee members to be added to other factsheets of ICS.

**Plans:**

The committee is still planning for more training courses in Uganda, Egypt, Rowanda and Tanzania.

**The ICS Fistula Center in Kampala:**

Sherif Mourad and other members are still in the agreement process with the Ugandan authorities namely the Ministry of Health and Mulago University Hospital to sign a MOU for the fistula center that will serve as a referral center for East Africa.

**The video production:**

A well designed video about the whole fistula problem was produced by the ICS CPC with great effort done by Vasan Srimi who supervised this task.

**Budget:**

The committee will be seeking a budget (calculated by the office) to cover the following:

- One or Two training courses (5 fully sponsored, 5 not sponsored).
- Books and printing materials for awareness
- Supporting a speaker representing the ICS once or twice a year.

**Communications:**

The committee is planning to communicate and collaborate with all the societies and associations who are interested in this field as: UNFPA, IUGA , SIU, PACS, ISOFS, EAU, WHO, AUA and AFFCS.



## Nursing committee of the international continence society

Once again this has been a fairly quiet year for the nursing committee mainly due to the limited financial support for its activities due to the economic situation within the society as a whole.

We would thank the Trustees for the support that we have received and hope that the financial situation the society has had to manage will be markedly improved over the next year leading to some of our activities being able to go forward.

I would like to thank my committee members for their work, particularly the sub-committees chairs and their committee members. The chairs are Sharon Eustice for the Communications Sub-Committee, Kathleen Hunter for the Research Sub-Committee, Donna Bliss for the Education Sub-Committee and Jennifer Skelly for the Practice Su-Committee. Copies of the sub-committee reports are detailed below. Jennifer was unwell for several months this year and Joan "O" kindly stepped into the brink to chair the committee during Jennifer's absence. Jennifer has now resigned as chair and Lesley Hanson has kindly agreed to take over the role for the next year. I would like to thank Jennifer and Joan on behalf of the Nursing committee for all their hard work- thank you.

In addition to the sub-committees two working parties have been set up:-

1) A working party on care of the frail elderly especially those living in care homes. This is chaired by Joan "O", and includes Adrian Wagg amongst its membership.

2) A Multi-disciplinary work party on peri-partum care. The nursing co-chair for this is Anna Bosenquet, the physiotherapy co-chair is Pauline Chiarelli and the medical co-chair is Bob Freeman.

It had been hoped that the ICS would be able to fund a one off meeting of these working parties prior to this years, conference; however, due to financial restrictions this was not achievable. Therefore these working parties have made little headway, though it is hoped that networking will occur at the meeting in Barcelona.

I would also like to thank Jenny, Dan and Avicia at the ICS office for all their support, in what must have been a very trying year for them given the internal politics that have occurred. In addition it was my great pleasure to represent the ICS at a continence meeting in Sicily last year, as well as being asked independently to assist in leading the first ever nurses bladder, bowel and pelvic floor course in Hong Kong this January, and I would like to thank the Sicilian organising committee for their great hospitality and Becky Chan and her colleagues (nursing, physiotherapists and medical) for their warm hospitality, friendship and professional courtesy with respect to my time in Hong Kong in addition to be able to lecture on the brilliant course that they have developed.

Becky and her colleagues are requesting recognition or accreditation for this course by the ICS, as have the lead teachers for other bladder and bowel nursing courses, particularly in the UK and Australia. Consequently as part of this annual report I kindly request both the education committee and the board of trustees to progress work towards this means.

In addition if there is agreement for the concept of recognised or accredited courses it would benefit the worldwide continence nursing agenda if ICS work in collaboration with the WOCN and WCET in order to establish an internationally recognised standard for the content of such courses. A part of our plan as a committee this year was to work with Dominic to develop some e-learning courses around continence nursing. Once again this was not possible, but I do believe that within the nursing community of ICS there is an enthusiasm in continuing to look at such a program in the future, providing accredited/recognised e-learning courses for all levels of nursing and care staff particularly in the first instance concentrating on 1st level nurses and possibly care assistants. There have been a number of teleconferences between members of the practice sub-committee and the research sub-committee with a view to identifying practice issues in nursing care that will lead to future nursing research activities. Jennifer Skelly has carried out an on line questionnaire with all nursing members of ICS aimed at identifying practice issues that need further scrutiny by both the practice and research nursing communities. Her findings will be presented at the nursing forum in Barcelona this year.

In addition, I can report that the education sub-committee chair spent a good deal of time co-ordinating a nursing speaker for an IUGA course in Cape Town and Lesley Hanson kindly represented the ICS at this meeting. Donna Bliss has also represented the ICS nursing community at a nursing conference in Brazil.

#### **Budget required;**

**One day nursing Committee meeting;** The Committee would like to hold a whole day nursing committee meeting prior to the Brazil meeting. A large number of committee members finish their terms at Brazil and we would appreciate funding in order to allow a more seamless handover to new committee members and the newly elected chair, in order to discuss previous committee work and three year planning. The estimated costs would be for accommodation, room hire and catering for committee members- estimated cost £5,000.

#### **Whole Day meeting for Intra and Postpartum Working Group and Long Term care Working Group;**

The proposed meetings should be the only meeting in the (currently anticipated) three year term for each working group to discuss a 3 year strategy for the groups. The estimated costs would be for accommodation, room hire and catering. The estimated costs would be £12,000.

The estimated total budget would be £17,000.

I attach the sub-committee reports including three year plans for the research and education sub-committee's

Mandy Wells,  
Nursing Committee Chair  
ICS Nursing Committee

## **Brief Report to Nursing Committee from Education Committee representative January 2013**

**Submitted by Donna Bliss**

A collaborative ICS-IUGA course for nurses and PTs in South Africa was recently conducted last week. Lesley Hanson and Julia Herbert were respective speakers.

ICS Education Committee had its semi-annual meeting and reviewed applications for workshops. An interim chair, Adrian Wagg, was appointed. The 1/2 day workshop re: nursing content was accepted and we hope to be able to offer simultaneous translation—still working on this. Several other workshops including nurse presenters were also accepted. Donna Bliss asked Dom Turner if he could provide a list of WS with nurse presenters once the deadline for accepting the invitation has passed in case we want to list these on the website for nurse attendees. The competition was high due to time/room constraints.

Due to the shortfall of funds generated by the conference in China, all committee meetings will be held starting on Monday of the conference and not before. Similarly, Education Committee has needed to prioritize courses/guest lectures and review budgets for efficiency to be approved and offered during the next year and in light of commitments already made. There is a strategic focus in the South/Central America region to increase interest for the 2014 ICS conference. The funds that have been budgeted are below courses/guest lecture applications already received. I would recommend that Nursing Committee does not submit an application for a course in Italy for 2013 as it will likely not be funded. Planning a multidisciplinary course in 2014 or 2015 and as an add-on to another conference will increase its chances of being approved/funded.

ICS is planning to offer a multi-disciplinary abstract session for trainees in Barcelona, which had good support from the Education committee. This has led to review and discussion about abstracts submitted and reviewed outside the scientific committee and presented at various forums. Input was sought from Nursing and PT committees. ICS is currently reviewing this issue.

The status of E-learning was reviewed. Currently ICS' plan is to continue to tape workshops/sessions offered at the annual scientific meeting and develop learning assessment QAs. There is a list of workshops/sessions that are in the queue for developing QAs and offering online that was provided as well as a list of topics desired. ICS plans to follow this plan for the near future. If Nursing Committee wishes to have sessions taped and made available online in the future, it is recommended to contact the Education Committee about submitting a workshop and coordinating this request with others on their list. A session on how to write the learning assessment QAs is planned to be offered in Barcelona as some nurses expressed interest in wanting to learn how to do this.

Donna Bliss participated in reviewing and suggesting revisions to the criteria for workshop applications. If approved, suggested revisions should improve scoring for multi-disciplinary and multi-national applications.

All disciplines/professions including nurses and PTs need to recognize issues/balance of wanting courses/workshops for their specific discipline/profession only and the ICS policy of offering such courses in a multi-disciplinary manner.

### **Nursing Research Subcommittee Report July 2013**

Members: Kathleen Hunter (Chair), Daa Rizk, Sandra Engberg, Lesley Hanson, Mary Palmer, Gede (Putu) Syasa

A three year plan, based on the subcommittee goals, will be submitted separately.

2012-13 Progress Report	
<b>Short term goals</b>	
Recruit research subcommittee members	In the past year, three new members were added to the committee. Sandra Engberg and Putu Syasa were new nurse members, and Lesley Hanson agreed to be on the practice as well as research subcommittees to support the work between the two subcommittees. Daa Rizk agreed to stay on as the non- nursing representative and Mary Palmer as past subcommittee chair.  A plan to recruit new members for ongoing continuity is to be established.
Compile a listing of ICS members currently conducting continence nursing research.	List being developed from ICS member list.
Create a map of research types that ICS nurses are participating in.	To be developed. Researchers identified on the list above will be contacted for further information on their research interests and projects.
Encourage ICS nurse members to submit abstracts to the International Continence Society scientific meetings.	Outstanding. As the ICS office does not specifically track submissions by nurses to the main scientific meeting, the feasibility of a voluntary method of tracking nursing submissions needs to be explored.  Reminders to submit to the main meeting in the nursing section of the ICS newsletter.
Identify issues in conjunction with the education and practice sub-committees relevant to a nursing	Teleconference with Practice Subcommittee Chair in December 2012, followed by a call involving subcommittee members in April 2013 to discuss a member survey. Member survey of priorities conducted under the leadership of

research agenda.	Jennifer Skelly, results to be presented in Barcelona 2013.
Prioritize and agree upon international issues/projects for continence nursing research.	Discussion to occur with Practice and Research Subcommittee members in Barcelona
Implement the “Guideline for Collaborative Continence Nursing Research”	Outstanding. As part of the practice/research priorities discussions in Barcelona, the subcommittee will explore the feasibility of a pilot to reviewing research proposals, and providing content expertise as available and methodological advice (e.g. participant recruitment) and review of manuscripts of study findings. Recruitment of researchers willing to devote time to these activities will be important.
<b>Long term goals</b>	
Provide a forum for continence nursing research at annual scientific meetings.	<p>The Nursing Committee Chair, and Nursing Research Subcommittee chair worked with members of the Education and Scientific review committees to clarify the call for abstracts to ensure nurse members understood that an abstract accepted to the Forum was not to be represented as an acceptance to the main scientific meeting.</p> <p>ICS Nurse members were notified of the Nursing Forum call for nursing abstracts after the decisions on abstracts for the main scientific meeting were announced in May 2013. The abstracts were to be submitted June 14, but an extension to June 21 was provided. Eleven abstracts were received and are being reviewed. Evaluation criteria and scoring system is being trialed.</p> <p>We will review criteria and parameters of the call, including abstracts sent in after the deadline for next year.</p>
Financial Scholarships for nurse scholars to attend meeting to present research.	To be discussed with the Scholarship Committee.
Develop, implement, and evaluate an international continence research agenda with an evaluation plan regarding benchmarks.	Development of a research agenda and prioritization of projects will be developed from the prioritization of practice/research topics identified in the 2013 survey (see above).

Respectfully submitted:  
Kathleen F. Hunter PhD RN NP NCA,  
Chair Research Sub-Committee

**INTERNATIONAL CONTINENCE SOCIETY**

**Nurses Committee: Communication Subcommittee**

**Annual Report**

**Date: July 2013**

**Submitted by Sharon Eustice (Chair)**

**Members: Veronica Haggard; Gisele R. Azevedo**

<b>Short-Term Goals for 2012/13</b>	<b>Outcomes/Comments</b>
Kenes International to incorporate international nursing organizations in their standard communication mechanisms for the 2013 ICS meeting.	Updated list sent to Kenes and implemented.
Upload abstracts once presented at the Nurse Forum (or an overview document preliminary to Forum meeting).	Completed for 2012 abstracts - this to be recurrent for the 2013 abstracts.
Contribute an article to the ICS Newsletter.	Two articles completed - one for ICS news and one for Nurse Members.
Add sub-committee reports to website following October 2012 meeting.	Completed for 2012 - this to be recurrent for 2013 following the Barcelona meeting.
<b>Long-Term Goals for 2012/13</b>	<b>Outcomes/Comments</b>
Drive up ICS nurse membership: consider affiliated membership opportunities with existing organisations e.g. ACA, WOCN.	Affiliation flyer/information sent out to nursing organisations.
Quarterly nurse committee newsletter to members.	Mid-term newsletter sent out to nurse

	members in March 2013.
Seek funding to sponsor fellowship and travel awards targeted to nurses (Collaborative with Research and Education Subcommittees).	Arranged via Nursing Committee Chair.
Revisit website format.	Corporate approach in place.
Introduction of the Public Forum with monthly debate topics (add-in to e-news/e-flash to all members).	Four questions now posted on the public forum.

### Objectives for next 3 years (2013 – 2016)

1. The communications sub-committee will help the Nursing Committee achieve our overall objectives.
2. Engage effectively with other ICS committees and build strong relationships.
3. Demonstrate the success of our work and regularly showcase examples of output from the nurse membership.
4. Ensure that the nurse membership and wider ICS community understand what we do.
5. To regularly gather feedback from the nurse membership to ensure we are maintaining standards.

## ICS Physiotherapy Committee Annual Report

Chair: Helena Frawley, PhD, FACP

Term of office: Aug 2011 – Aug 2013

Date report submitted: 22 July 2013

Committee members: Marijke van Kampen, Pauline Chiarelli, Chantale Dumoulin, Els Bakker, Margaret Sherburn, Jacqueline de Jong, Beth Shelly, Doreen McClurg, Fetske Hogen Esch, Stephanie Knight, Melanie Morin. (Education Committee Representative: Marijke Slieker-ten Hove)

The Physiotherapy Committee represents and supports ICS physiotherapy members and the physiotherapy contribution to various ICS committees in order to encourage and maintain the multidisciplinary strength of the ICS. It acts as a liaison body between the Chair of ICS, ICS Board of Trustees and its physiotherapy members regarding matters of mutual concern.

The Physiotherapy Committee has 3 functions: communication, research and education.

3 x Committee meetings in past 12 months: face-to-face Beijing, Oct 2012; Teleconferences x 2: Jan & July 2013.

### **Activities and achievements over the past year:**

- Terms of Reference:

- o Committee membership:

- Membership and Communication sub-committee:

- o Physiotherapy Round-table sub-committee: Organisation of the Barcelona 'Physiotherapy Round-table' meeting:

- State-of-the-Art topic
- 3 x research presentations
- 7 x workshops
- Registrations: very popular this year: over-subscribed for attendance
- No sponsorship secured for meeting and post-meeting socialisation, reflected in attendance fee

- o Contributions to 'ICS Newsletter', summary of Physiotherapy activities

- o Ongoing contributions and improvements to the 'ICS Physiotherapy Committee News' page on the ICS website



o Physiotherapy committee succession planning:

- Within PT committee, and PT representation on other ICS committees
- 2 committee members retiring pre-Barcelona: Fetske Hogen Esch (Netherlands) (remaining on as working party member of PT Round-table sub-committee); Pauline Chiarelli (Australia)
- 3 new members welcomed: Cristina Naranjo Ortiz (Madrid), Stephanie Madill (Canada); Bill Landry (Canada)
  - ensuring timely and appropriate physiotherapy membership of, contributions to, and follow-through of representation. Physiotherapists elected to:
- Ethics committee: Cristina Naranjo Ortiz (Spain); committee member
- Standardisation of Terminology: Beth Shelly (USA); committee member
- Scientific Committee: Melanie Morin (Canada); committee member
- Fistula Committee: Gill Brook (UK)
- Continence Promotion Committee: Peter Meyers (Belgium)
- Scientific and Research sub-committee

o Main activity has been related to 'State-of-the-Science Seminar: Improving pelvic floor muscle training adherence strategies: from theory to practice' which was conducted in the 2 days pre-ICS Meeting in 2011. Continuing activity related to manuscript preparation:

- 4 manuscripts nearing completion, aim for submission to N&U Journal post ICS 2013

o Creation of a PT-specific position on the Scientific Committee: a very welcome development after a hiatus of several years. PT committee member Melanie Morin appointed to this position

o Election of PT committee member Beth Shelly to

o Committee representation and contribution to ICS Standardisation and Terminology Sub-committees:

- Chronic Pelvic Pain: Helena Frawley
- Opportunistic face-to-face meeting with Chair, Mentor and other working party members at the 1st World Congress Abdominal & Pelvic Pain in Amsterdam May-June 2013.
  - Conservative Management of Female Pelvic Floor Dysfunction: Helena Frawley (Mentor); Beth Shelly (Working Party)

- Opportunistic face-to-face meeting with Chair in Oslo June 2013
- o Contribution to Scientific Program for 2013:
  - Lunchtime pelvic floor muscle exercise classes
- Education and Professional Development
- o External to Physiotherapy committee:
  - Physiotherapy representation to ICS education committee: review of workshop submissions, contribution to all other Education committee activities as relevant.
- o Internal to Physiotherapy committee:
  - Contribution to PT & Nursing Peri-partum voiding dysfunction working party

Plans for the next year:

- Membership and Communication sub-committee:
  - o Planning for 2014 Round-table, inclusion of local speakers and liaison with local members
  - o For ICS committees who have physiotherapy representation on their committee who are not members of the PT Committee, establish a system of timely and effective communication of their activities back to PT committee
  - o Approach relevant ICS committees who do not have physiotherapy input or representation, to establish if a contribution can be made
- Scientific and Research sub-committee:
  - o Submit manuscripts from 'State-of-the-Science Seminar: Improving pelvic floor muscle training adherence strategies: from theory to practice' to N&U Journal for publication
- Education and Professional Development:
  - o Continue to contribute physiotherapy topics and speakers to multidisciplinary educational activities
  - o Contact key physiotherapy members to contribute to submission or workshops for 2014 Meeting

Notification of any new subcommittees (as the Trustees should formally approve these, as per the ICS Bylaws):

- nil

Details of any budget requests:

- Jan & July teleconferences 2014

Confirmation whether the committee will call for expressions of interest for new committee members, as of the 2013 AGM in Barcelona:

- Committee will approach any Brazilian Physiotherapy members who are potentially able to assist local planning and organising for 2014 Rio de Janeiro Physiotherapy Round-table Meeting

Special request for any members whose terms are ending to be renewed for one more term. This is permitted assuming this Bylaw change is voted in by the membership at the 2013 AGM:

- Not known at this stage

## Publications and communications committee of ics

THE P&CC: PAST, PRESENT AND FUTURE 2013 REPORT; **Jerzy B Gajewski**

The ICS Publications Committee was first established in 2004, with Chris Chapple as Committee Chair. The aims of the committee were *“communicating important news, information and in particular scientific developments both to and from the membership and between The ICS and the outside world. In addition to the further development of existing ICS publications such as the journal Neurourology and Urodynamics and the website, important new projects will be the development of a topical newsletter for the membership, a press office and the development of a plan for future ICS publication policy”*.

The first committee meeting was held at the Royal College of Surgeons, London on 24 January 2005. The appointed members present at the meeting were: Walter Artibani, Daniela Marschall-Kehrel, Jane Meijlink, Heinz Koelbl, Piotr Radziszewski, Stefano Salvatore, Jerzy Gajewski, Vik Khullar, Chris Chapple (Chair) and Dominic Turner (ICS Office). All members were formally elected in 2007. Since then, several more members have contributed to the work of the committee including: Katherine Moore, Sherif Mourad, Hashim Hashim, Tomasz Rechberger, Ian Pearce, Jacky Cahill, Nina Davis, Jeffrey Garris, Stergios K. Doumouchtsis and Pamela Ellsworth. In 2006, Chris Chapple stepped down as chair of the committee after being appointed Editor-in- Chief of Neurourology and Urodynamics. Jerzy Gajewski was appointed as interim chair and formally elected in 2007. The name of the committee was change to Publications and Communications Committee (P&CC) on 29 November 2006. The new Term of Reference was as follows: *“This committee has been charged with the important role of communicating important news, information and in particular scientific developments both to and from the membership and between the ICS and the outside world”*. One of the first major projects of the committee was development of a corporate identity, a new logo and the new ICS website. This process went through several stages over ensuing years. Since then, the ICS Website has been updated a number of times, with the latest version just released. Dominic Turner and IT colleagues from the ICS office has been instrumental in the Web design. We have recently acquired [ICS.org](http://ICS.org) domain name.

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### Logo evolution



Original



2005



2013

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## Website evolution



Original



2005



2013

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The most important activity of the committee is the publication of ICS News, which is available to the membership and the general public. The ICS News editorial board was set up on 13 January 2006. Jane Meijlink was appointed Editor-in-Chief with associate editors that have changed over the years and currently comprise Katherine Moore, Susie Orme, Simone Crivellaro and Jacqueline Cahill, ably and enthusiastically assisted by ICS Office staff. All have worked exceptionally hard to make this publication interesting and valuable to the membership, ensuring that all ICS members worldwide are kept informed of activities and developments in the Society. ICS News has become an important tool in communication with the members of the ICS. All members are encouraged to contribute to this publication

The P&CC also publishes and maintains a series of up-to-date and accurate Fact Sheets (currently under the direction of Nina Davis) which are used to communicate with the media and the public at large. It consists of 12 modules related to the ICS and many aspects of incontinence and pelvic floor dysfunction.

ICS e-Flash is a regular information service organised by the ICS P&CC. It keeps members informed about all relevant events on a regular basis. E-Flash is emailed once or twice a month. Almost 60 issues have been delivered so far.

P&CC defines general policies and plays a consulting role with the ICS Office coordinating and arranging Press and Public Relations for the ICS in cooperation with local organising agents.

I would like to thank all members of the committee for their dedication and hard work for the benefit of our Society. I would like particularly to recognise several members of P&CC who – along with me myself - will complete their final term on the committee this year: Daniela Marschall-Kehrel, Katherine Moore, Susie Orme and our Editor-in-Chief Jane Meijlink. Jane was instrumental in transforming ICS News into a very important and successful publication. We are also happy to announce that Pamela Ellsworth has agreed to take on the role of our new Editor-in-Chief. In addition to being a paediatric urologist and Associate Professor of Surgery (Urology) at Alpert Medical School of Brown University, Pamela Ellsworth also has extensive experience in writing, editing and publishing that will be of great value to the ICS News Editorial Board. I would also like to congratulate Jacqueline Cahill on her recent election as a next PCC Chair. Jacqueline graduated from McGill University with a Bachelor of Social Work and has for most of her career worked in the non-profit sector of Montreal. For the last several years

she held position as Executive Director of The Canadian Continence Foundation. I am sure the PCC will continue to be very active and important committee of ICS.

We also greatly appreciate the help and support from the ICS office staff in Bristol: Dan Snowdon, Dominic Turner, Avicia Burchill, Jenny Ellis, Tracy Griffin, Sophie Mangham, Ashley Brookes and Roger Blackmore.

Plans for the next year activity will include;

1. Two issues of ICS News
2. Regular e-Flash mailing
3. Update of Fact Sheets
4. Further development of the Website
5. Press and Public Relation activity
6. ICS advertising and promotion

We are requesting similar budget as in 2012, including midterm PCC meeting.

## Standardisation Steering Committee Report to ICS Trustees, July 2013

Progress in the last year

### Working groups (WGs)- current;

1. **Urodynamic equipment**; chaired by Andrew Gammie. The Report is going through consultation (text approved by SSC), with a Workshop at Barcelona being run as a Committee Activity to discuss the consultation version. This will advise the WG and the SSC for the final document to be submitted to the Trustees.
2. **Chronic pelvic pain**; chaired by Ragi Doggweiler, mentored by Kristene Whitmore. Multiple iterations undertaken. WG is meeting in Barcelona. Report due this year.
3. **Conservative management of female pelvic floor dysfunction**; chaired by Kari Bo [Joint with IUGA], Helena Frawley, mentored by Marcus Drake. First draft undertaken- too extensive, so being shortened. WG is meeting in Barcelona. Report due this year.
4. **Good Urodynamic Practice (revision)**; chaired by Peter Rosier and co-chaired by Werner Schafer, mentored by Marcus Drake. In process of selecting working group members from the list of applicants. Report due 18 months.
5. **Core LUTS**; a WG comprising the SSC itself, likely to consult outside. Core LUTS signifies the minimum knowledge set for a practitioner seeing people with LUTS (nurse, physiotherapist, care of the elderly, neurologist, and non-specialist urologist/ gynaecologist). In effect, a tester for an approach to rapid production of “digestible” documents appropriate for a less specialist practitioner- i.e. short and easy to read, and therefore less off-putting than the weighty standards produced till now. Also to serve as the basis for the SSC’s first ICS education module, and therefore will be developed with self-test in mind. Development process may be via modified Delphi, but will be discussed at SSC meeting in Barcelona. Expedited report due 6 months.

### Working groups- proposed

1. **Revision of “Standardisation of terminology of LUT function” (Abrams et al., 2002).**

With the recent publication of a female terminology document (Haylen et al. 2010), initial plan was to establish a WG on Male LUTS. SSC now feels it is more appropriate to address the whole of LUTS. This will be a main discussion point at the committee’s meeting in Barcelona. Extensive consultation will be needed to get input of all stakeholders. Scoping will address liaison with other organisations (IUGA, ICCS, EAU, AUA, industry/ regulatory) which will be the first task of the “Liaison lead” (see below).

Two key problems are present: 1. Broad range of stakeholders with lack of engagement by many; 2. The need for evidence base beyond “expert opinion”. Thus we envisage

A) Survey on storage LUTS; we have set up a questionnaire to capture opinions, go-live before Barcelona meeting.

B) “Bladder diary day”; we will be discussing a large scale initiative to seek 10,000 days of bladder diary information from symptomatic and asymptomatic individuals. Aim is to seek a sounder basis for crucial definitions (increased day-time frequency, polyuria, nocturnal polyuria, sleep duration/ night-time).

2. **Neuro-urology**; scoping document has been drafted by Rizwan Hamid (previous co-opted member) and agreed by SSC. Mentor not yet agreed. Advert for WG chair/ membership to be placed imminently.
3. **Basic Science**; scoping document not yet drafted.
4. **Bowel dysfunction**. This topic has been minimally addressed by ICS standardisations, and we had hoped for a WG to be established this year. However, SSC has been constrained by lack of suitable expertise, particularly as the only applicant to SSC membership for specific role subsequently withdrew. A document will shortly be published by IUGA on Female Anorectal terminology; SSC was unable to agree to joint authorship with IUGA as development did not catalogue the specifics expected in the Standards development process (Rosier et al. 2012). A complementary generally-applicable document appears necessary, and mechanisms to attempt delivery of this will be discussed at Barcelona.

### ICS Wiki

The ICS Wiki now includes all current standardisation documents. A group of young volunteers is engaged in drafting content with each undertaking the page for 2 symptoms, many of which are already uploaded.

<b>Editor</b>	<b>Storage LUTS</b>	<b>Voiding/ post mict LUTS, others</b>
<i>Christina</i>	Urgency	Slow/splitting/intermittent stream
<i>Daniele</i>	Increased daytime frequency	Urinary retention
<i>Giorgio</i>	Nocturia	Straining
<i>Petros</i>	Stress urinary incontinence	Feeling of incomplete emptying
<i>Renata</i>	Mixed urinary incontinence	Hesitancy
<i>Sajjad</i>	Overactive bladder	Terminal/ Post micturition dribble
<i>Liaqat</i>	Stress urinary incontinence	Normal bladder sensation
<i>Petek</i>	Urgency urinary incontinence	Increased bladder sensation
<i>Markos</i>	Mixed urinary incontinence	Reduced/ absent bladder sensation
<i>Elisabetta</i>	Situational urinary incontinence (e.g. giggle, sexual intercourse)	Non-specific bladder sensation
<i>Waleed</i>	Continuous urinary incontinence	Nocturnal enuresis



The wiki is starting to get momentum, and soon the ICS will be able to direct users to the wiki for all terminology requirements as a one-stop location, from which link-outs to education modules (once developed) and other resources will be straightforward. With evolution, the Wiki may be able to function as a basis of terminology revision of individual symptoms in a responsive manner (i.e. new evidence becoming available, or new consensus initiatives). This is due to the ability to publish rapidly and retain time-stamped older definitions. This could be an entirely new approach which saves the cumbersome and laborious process of large WGs with an extensive remit.

### **SSC Membership**

Current membership; Marcus Drake (Chair), Stergios Doumouchtsis, Catherine DuBeau, Robert Freeman, Salma Kayani, Ash Monga, Jane Meijlink, Luis Monteiro, Peter Rosier, Ralph Webb, Kristene Whitmore. Several are coming to the end of term.

New members at last election; Lawrence Gichini (nursing), Sohier El Neil (neuro-urology), Beth Shelley (Physiotherapy).

Multidisciplinary representation; Care of the elderly no suitable applicant- to be re-advertised. Colo-rectal applicant withdrew- to be re-advertised.

Patient representation; term extension may be requested for Jane Meijlink, to tide over search for suitable membership.

Individuals will now undertake specific responsibilities, with named leads for specific functions (to come from those SSC members not mentoring a WG). We will seek leads for: Education modules; Inter-organisation liaison; Wiki; Standards translation.

### **Budget requests**

1. Setting up and running an online bladder diary documentation
2. Access to software for professional consensus using Delphi system

### **Meetings and activity**

The committee has been active with two full teleconferences and several other teleconferences between subgroups.

### **Working practices**

The new approach to developing contemporaneous ICS standards is now fully in force, and is the context for the two most recently established WGs. The paper setting out the mechanisms is published; Rosier PF, de Ridder D, Meijlink J, Webb R, Whitmore K, Drake MJ. Developing evidence-based standards for diagnosis and management of lower urinary tract or pelvic floor dysfunction. *Neurourol Urodyn.* 2012 Jun; 31:621-4. This is the governance framework for current SSC practice.

Marcus Drake, July 2013

## Urodynamics Committee annual committee report 2013:

Activities and achievements over the past year:

- ✓ Development of modules is continued and the first module is accepted for publication in NU&U
- ✓ (3 new modules will be submitted to NU&U for peer review)
- ✓ A strategy to endorse the modules in ICS is designed (we anticipate 4 modules to be accepted in 2013)
- ✓ New modules are planned and developing (the UC expects  $\pm 5$  new modules in preparation before the end of 2013)

Plans for the next year

- ✓ Submitting (to NU&U and ICS-representatives) and presenting (recording) of 5 new modules in 2014
- ✓ Assisting other committees to develop (e-)teaching modules.
- ✓ Development (plan) of non-urodynamic (diagnosis) educational modules
- ✓ Continued and close cooperation with Educational Activities Organizing Committee
- ✓ Continued and close cooperation with Standardisation Steering Committee
- ✓ Cooperation with publications /'ICS graphics and layout' committee/persons

Notification of any new subcommittees (as the Trustees should formally approve these, as per the ICS Bylaws)

- ✓ (Of course) there are no plans for new subcommittees
  - The urodynamics committee assists ad-hoc working groups to develop the modules –under the full responsibility of ICS-UC.

Details of any budget requests

- ✓ Meetings at-hoc outside ICS annual meeting (are and) will be arranged cost-neutral.
- ✓ **(Yearly) New recordings of the modules should be covered by ICS budget:  $\pm 2-3$  hours of (audio-video-ppt's) recording**

Confirmation whether the committee will call for expressions of interest for new committee members, as of the 2013 AGM in Barcelona

- ✓ This has to be discussed at our committee meeting in Barcelona (but likely: yes -2 new members)

Special request for any members whose terms are ending to be renewed for one more term. This is permitted assuming this Bylaw change is voted in by the membership at the 2012 AGM.

- ✓ This has to be discussed at our committee meeting in Barcelona.