SWIU Annual Breakfast
6:30 a.m.–9:00 a.m.
Sunday, May 20, 2007

Localized Prostate Cancer Panel: Let the Punishment Fit the Crime
4:00 p.m.–5:00 p.m.
Tuesday, May 22, 2007

SWIU Networking Reception
5:00 p.m.–7:00 p.m.
Tuesday, May 22, 2007
Welcome

The Society of Women in Urology Board of Directors welcomes you to the 27th Annual Breakfast Meeting for women urologists and researchers on Sunday, May 20, from 6:30 a.m. to 9:00 a.m. at the Anaheim Marriott, Orange County Ballroom. We are honored to have Dr. Paul Schellhammer, President-Elect of the AUA, provide us with an update on the status of the AUA. We have chosen as our speaker Dr. Catherine Rhu devries, Associate Professor of Surgery/Urology at the University of Utah. Her presentation, “Back to the Future: High Tech/ Low Tech Surgery in Developing Countries,” will focus on her work this past year with developing countries.

The annual business meeting with election of officers, along with the presentation of various awards, will take place after the lecture. The SWIU Community Service Award in Men’s Health is awarded to a male or female urologist whose actions at work or in the community exceed job expectations and reflect values of compassion, respect, trust, commitment to excellence and teamwork, and the promotion of good health in men. The SBUR/SWIU award, presented at the annual breakfast, recognizes excellence in urologic research.

Again this year, we have instituted a CME-accredited course prior to the networking session that deals with Localized Prostate Cancer. We hope to see you there.

We hope you enjoy the meeting and the opportunity to network with your colleagues.

Sincerely,
Cathy Kim Naughton, MD
2006–2007 SWIU President
Society of Women in Urology, Inc.
Board of Directors
2006-2007

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6:45 a.m.   Welcoming Remarks  
Cathy Kim Naughton, MD, President, SWIU

6:50 a.m.   AUA Update  
Paul F. Schellhammer, MD, President-Elect, AUA

7:00 a.m.   AUA History Exhibit- Women Healers  
Mr. Rainer Engel, Curator  
William P. Didusch Center for Urologic History  
American Urological Association, Inc.

7:10 a.m.   “Back to the Future: High Tech/Low Tech Surgery in Developing Countries”  
Catherine Rhu deVries, MD

8:00 a.m.   Men’s Health Award for Outstanding Community Service in Men’s Health  
SBUR/SWIU Award  
Presented by Margot Damaser, PhD  
ICA Advocate of the Year  
Presented by Vicki Ratner, MD

8:35 a.m.   Annual Business Meeting

8:45 a.m.   Networking

Localized Prostate Cancer Panel: Let the Punishment Fit the Crime  
Tuesday, May 22, 2007 - 4:00pm – 5:00pm  
Grand Ballroom HJK - Anaheim, California

   Martha K. Terris, MD – Moderator  
   Jan L. Colli, MD, Carol Salem-Hand, MD,  
   Shandra Wilson, MD & Ann Y. Becker, MD – Panelists

Networking Reception - Tuesday, May 22, 2007  
Grand Ballroom G - Anaheim, California  
5:00 p.m. – 7:00 p.m.

Everyone is Welcome! This is a great opportunity to meet with other urologists to discuss the issues in the field of urology, as well as other medical issues. In addition, SWIU will announce the Christina Manthos Mentor Award winner and you will also here from the 2007 Elizabeth Pickett Award winner. We look forward to this great networking opportunity every year and hope to see you there!
Target Audience: Women Urologists

Morning Educational Objectives: To acquaint participants with the interface of cutting-edge technology and medical issues in the developing world.

Afternoon Educational Needs: It is important to keep up to date with the most recent therapeutic and surgical options. Prostate cancer remains the leading cause of cancer in American men and constitutes approximately 40%–45% of a general urologic practice. Early detection is our greatest weapon against death due to prostate cancer. Another concern to urologists and patients alike is how to lessen the morbidity of surgical interventions of prostate cancer. The panel of academic experts and experienced private practitioners will feature the latest data regarding proPSA and B-PSA. Most of the urologists in the audience may be unfamiliar with this new approach to the only tumor marker in prostate cancer.

Afternoon Educational Objectives:
- Audience members will be able to cite the latest data on the efficacy, technique, and morbidity associated with the leading surgical treatment for prostate cancer—the nerve-sparing radical prostatectomy.
- Audience members will be able to describe the advantages and disadvantages of PSA-use prostate cancer screening.
- Audience members will be able to discuss the role of new clinical markers for prostate cancer in research and clinical practice.

Accreditation: The American Urological Association Education and Research, Inc. (AUAER) is accredited by the Accreditation Council for Continuing Medical Education (ACCME) to provide continuing medical education for physicians. The AUAER takes responsibility for the content, quality, and scientific integrity of this CME activity.

Credit Designation: The American Urological Association designates this educational activity for a maximum of 2.00 AMA PRA Category 1 Credits™. Physicians should only claim credit commensurate with the extent of their participation in the activity.

AUAER Disclosure Policy: As a provider accredited by the Accreditation Council for Continuing Medical Education (ACCME), the AUAER must ensure balance, independence, objectivity, and scientific rigor in all its activities.

All faculty participating in an educational activity provided by the AUAER are required to disclose to the audience any relevant financial relationships with any commercial interest to the provider. The intent of this disclosure is not to prevent faculty with relevant financial relationships from serving as faculty, but rather to provide members of the audience with information on which they can make their own judgments. The AUAER must resolve any conflicts of interest prior to the commencement of the educational activity. It remains for the audience to determine if the faculty’s relationships may influence the educational content with regard to exposition or conclusion. When unlabeled or unapproved uses are discussed, these are also indicated.

Unlabeled or Unapproved Use of Drugs or Devices: It is the policy of the AUAER to require the disclosure of all references to unlabeled or unapproved uses of drugs or devices prior to the presentation of educational content. The audience is advised that this continuing medical education activity may contain reference(s) to unlabeled or unapproved uses of drugs or devices. Please consult the prescribing information for full disclosure of approved uses.

Disclaimer: The opinions and recommendations expressed by faculty, authors, and other experts whose input is included in this program are their own and do not necessarily represent the viewpoint of the AUAER.

Evidence-Based Content: As a provider of continuing medical education accredited by the ACCME, it is the policy of the AUAER to review and certify that the content contained in this CME activity is valid, fair, balanced, scientifically rigorous, and free of commercial bias.

Special Assistance
We encourage participation by all individuals. If you have a disability, advance notification of any special needs will help us better serve you. Call 847-517-7225 if you require special assistance to fully participate in the meeting.
Christina Manthos Mentoring Award
Christina Manthos was an extraordinary young urologist whose life and career were sadly curtailed by breast cancer. The SWIU, as a means of perpetuating the flame of her inspiration and honoring her memory, has established an annual award to recognize those men or women who demonstrate extraordinary mentoring skills in supporting the career of a female urologist. The SWIU believes that a mentor is an important element in the life of each professional woman and wants to encourage and reward those who set a good example.

The Christina Manthos Mentoring Award was founded to honor the memory of an esteemed colleague. Christina Lean Manthos earned her medical degree from USUHS in 1990, receiving the Army Surgeon General’s Award and the Janet M. Glasgow award from the American Medical Women’s Association. After a Surgical internship at Fitzsimmons AMC, where she won Outstanding Intern of the Year, she was sent to Korea to serve as a clinic commander. Subsequently, she returned to Fitzsimmons AMC, where she completed her urology residency in 1996. She then served with distinction as the assistant chief of the urology service at the USAF Academy and Fort Carson until she lost her battle with breast cancer in 1999. Christina will be fondly remembered as a gifted urologic surgeon, dedicated officer, and inspiring mentor.

Society of Women in Urology Travel Award
We are excited by the increased numbers of women that are choosing urology as their career and would like to encourage them to actively participate in SWIU activities, especially in the AUA annual meetings. With this in mind, we are proud to continue to offer the “SWIU Travel Award” for our resident members. The award is designed to assist with the travel expenses of women residents presenting their research at the podium or poster sessions of the AUA annual meeting. A recipient will be selected and will receive an award amount of $1,000.00. The winner is expected to attend the SWIU Sunday Breakfast Meeting and is required to present at the Networking Reception on Tuesday evening.

SWIU Community Service Award in Men’s Health
Nominees for the SWIU Community Service Award in Men’s Health should be male or female urologists whose actions at work or in the community exceed job expectations and reflect values of compassion, respect, trust, commitment to excellence and teamwork, and the promotion of good health in men. The individual may have volunteered at local hospitals, clinics, churches, schools, places of employment, government facilities, athletic facilities, either to screen for disease or to educate the community about prostate cancer, benign prostate enlargement, male infertility, erectile dysfunction, and other male disorders on a regular basis.

Elizabeth Pickett Research Award Program
The Elizabeth Pickett Research Award Program makes funds available for small research grants for basic science or clinical urologic research. The awards may be used to continue or supplement a current project or to initiate a new study. Each candidate for the award must be a trained urologist (MD/DO), a urology resident/fellow, or a post-doctoral basic scientist with a research interest in urologic related diseases and dysfunction. Each candidate must also be a current member in good standing with SWIU.

SWIU/SBUR Award
Joint SWIU/Society for Basic Urologic Research (SBUR) Award for Excellence in Urological Research
SWIU and SBUR have a common interest in recognizing the accomplishments of female scientists with a distinguished track record of basic science urological research accomplishments. The award represents the collaborative efforts of these two societies toward their common goals. Appropriate candidates for this award are members of SBUR who hold an MD or a PhD or both and who have a distinguished track record of urological research. Nominations for this award are accepted by the SBUR (www.sbur.org), who will nominate two candidates for consideration by the Board of Directors of SWIU, who will make the final decision. The award winner receives a monetary award and one year free membership to Society of Women in Urology.

Visit the SWIU website at www.swiu.org for more information.
Welcome and Thank You to Our 2007 Corporate Members

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SWIU Membership Information

Member Benefits
If you have questions about applying for membership, the member benefits, or the categories of membership, please contact SWIU at 847-517-7225 or e-mail us at info@swiu.org.

Meetings
The SWIU meets annually at a special breakfast held in conjunction with the opening of the national meeting of the American Urological Association (AUA). Offered at a different site each year, the meeting presents an unmatched opportunity for serious learning as well as networking through meeting new members and welcoming old friends. A guest speaker presents on a timely topic for women in medicine and includes scientific and research news, as well as business issues such as marketing and managed care. You’ll also enjoy relaxing at a location that has been selected for its beauty, comfort, and amenities. A special meeting just for networking is also held one evening at the AUA meeting. It is an important opportunity to meet SWIU members at an informal gathering and to establish relationships that you will value throughout the year.

Membership Directory
One of our favorite member benefits, the directory is updated annually and provides valuable information you can’t get anywhere else. The current member list includes phone and fax numbers and e-mail addresses. We also include the subspecialty of each member and whether she accepts referrals.
Mentor Program
Unique to the SWIU, this is a member benefit we are especially proud of. Included in the directory, each physician listed has agreed to answer questions and give opinions and advice in the categories of: Academic & Clinical Issues, Practice Management & Finance, Workplace Issues, Family Issues, Organized Urology & Public Speaking, International Urology, Military Physicians, and issues of particular interest to African-American, Asian, or Latino women. These volunteers are available by phone, fax, and e-mail. It's a special member benefit that works only when you use it.

Elizabeth Pickett Research Award
Funds are available for small research grants for basic science or clinical urologic research. The awards are to continue or supplement a current project or to initiate new study. Applications are reviewed by the SWIU Research Committee and are judged primarily on the scientific merit of the proposal. The awards are for one year.

News
Published four times a year, the SWIU Newsletter offers a calendar of events, job notices, AUA reports, feature articles from our members, and the President’s Message. Members are encouraged to submit articles of interest. We are also happy to recognize your personal and professional accomplishments in the newsletter. The SWIU NEWSBLAST is a new benefit for SWIU members. An e-mail newsblast provides important, current information for the membership in a short, accessible format.

Networking
Networking is a vital and valuable way to gain new knowledge and insight and perhaps make a friend along the way. Through our annual meeting, membership directory, and mentor program, SWIU members have access to the finest minds in women’s urology! Choose a quiet moment for a phone call or attend a meeting where your voice is one of those being heard. We need you! And we need each other!

Membership Categories

Active
Must be a member in good standing of the American Urological Association. Must have acceptably completed an accredited urologic training program or its equivalent in a foreign country. Active members have voting privileges.

Affiliate
Must be a physician in a related field of medicine and science who cannot qualify for active membership or a non-physician who, by professional or personal accomplishments, has contributed significantly to medicine in general or the specialty of urology in general. Affiliate members may not vote.

Resident
Must have graduated from an acceptable medical school with receipt of Doctor of Medicine degree or an equivalent degree. Must be enrolled in a resident program credentialed by the Accreditation Council for Graduate Medical Education (ACGME) or such similar body in a foreign country. Resident members may not vote.
SWIU
SAVE THE DATES!

2008 Annual Breakfast Meeting
Sunday, May 18, 2008
Orlando, Florida

2009 Annual Breakfast Meeting
Sunday, May 3, 2009
Washington, D.C.
### PHARMACIA

**Briefer Summary of Prescribing Information**

**INDICATIONS AND USAGE**

**Depot LA** Capsules are once daily extended release capsules indicated for the treatment of patients with clinical signs of reduced ambulatory function who respond to a trial of **Depot LA** 2.5 mg daily (for **CLINICAL PHARMACOLOGY**, Pharmacokinetics in Special Populations in full prescribing information).

**CONTRAINDICATIONS**

**Depot LA** Capsules are contraindicated in patients with reduced ambulatory function, who respond to a trial of **Depot LA** 2.5 mg daily (for **CLINICAL PHARMACOLOGY**, Pharmacokinetics in Special Populations in full prescribing information).

**PRECAUTIONS**

**Drug Interactions**

**CYP3A4 Inhibitors**: Ketonazole, an inhibitor of the drug metabolizing enzyme CYP3A4, significantly increased plasma concentrations of **Depot LA** when coadministered to subjects who were poor metabolizers (see **CLINICAL PHARMACOLOGY**, Variability in Metabolism and Drug-Drug Interactions in full prescribing information). For patients receiving ketonazole or other potent CYP3A4 inhibitors such as saquinavir or ritonavir, the dose of **Depot LA** should be reduced from 2.5 mg to 1.5 mg daily (see **DOSE AND ADMINISTRATION**).

**Drug-Laboratory Test Interactions**

**Interactions with testosterone and laboratory tests have not been studied.**

**Carcinogenesis, Mutagenesis, Impairment of Fertility**

Graft-versus-host disease (GVD) is a significant risk for patients with chronic myeloid leukemia (CML). The risk of developing GVD is increased in patients treated with **Depot LA** 2.5 mg daily (for **CLINICAL PHARMACOLOGY**, Variability in Metabolism and Drug-Drug Interactions in full prescribing information). Patients receiving **Depot LA** should be monitored for the development of GVD.

**PRECAUTIONS**

**Do not administer to patients with clinical signs of reduced ambulatory function who respond to a trial of **Depot LA** 2.5 mg daily (for **CLINICAL PHARMACOLOGY**, Pharmacokinetics in Special Populations in full prescribing information).**

**ADVERSE REACTIONS**

The Phase 2 and 3 clinical trial program for **Depot LA** Capsules included 1073 patients who were treated with **Depot LA** (n=937) or placebo (n=56). The patients were treated with 2.5, 4, 6, or 8 mg daily for up to 15 months. Because clinical trials are conducted under widely varying conditions, adverse reaction rates observed in the clinical trials of a drug cannot be directly compared to rates in the clinical trials of another drug and may not reflect the rates observed in practice. The adverse reaction information from clinical trials does, however, provide a basis for identifying the adverse events that appear to be related to drug use and for approximating rates.

The data described below reflect exposure to **Depot LA** 2.5 mg once daily in 405 patients and to placebo in 507 patients exposed for 12 weeks in the Phase 3, controlled clinical study.

Adverse events were reported in 52% (n=263) of patients receiving **Depot LA** and in 49% (n=267) of patients receiving placebo. The most common adverse events reported by patients receiving **Depot LA** were dry mouth, headache, constipation, and abdominal pain. Dry mouth was the most frequently reported adverse event for patients treated with **Depot LA** occurring in 23.4% of patients treated with **Depot LA** and 7.7% of placebo-treated patients. Dry mouth, constipation, and abdominal pain (accommodation abnormalities), urinary retention, and dry eyes are expected side effects of anticholinergic agents. A serious adverse event was reported by 1.4% (n=7) of patients receiving **Depot LA** and by 0.6% (n=18) of patients receiving placebo.

The frequency of discontinuation due to adverse events was highest during the first 4 weeks of treatment. Similar percentages of patients treated with **Depot LA** or placebo discontinued treatment due to adverse events. Treatment was discontinued due to adverse events and drug discontinuation was reported as an adverse event in 2.4% (n=12) of patients treated with **Depot LA** and in 1.2% (n=6) of patients treated with placebo.

Table 4. Incidence (%) of Adverse Events Exceeding Placebo Rate and Reported in ≥1% of Patients Treated with **Depot LA** 2.5 mg daily in a 12-week, Phase 3 Clinical Trial

**Table 4. Incidence (%) of Adverse Events Exceeding Placebo Rate and Reported in ≥1% of Patients Treated with **Depot LA** 2.5 mg daily in a 12-week, Phase 3 Clinical Trial**

<table>
<thead>
<tr>
<th>Body System</th>
<th>Adverse Event</th>
<th>Placebo Rate (%)</th>
<th><strong>Depot LA</strong> 2.5 mg daily (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nervous</td>
<td>Headache</td>
<td>6</td>
<td>8</td>
</tr>
<tr>
<td>Gastrointestinal</td>
<td>Abdominal pain</td>
<td>3</td>
<td>3</td>
</tr>
<tr>
<td>Vision</td>
<td>Ocular disorder</td>
<td>3</td>
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</tr>
<tr>
<td>Respiratory</td>
<td>Disorientation</td>
<td>3</td>
<td>3</td>
</tr>
<tr>
<td>Allergic</td>
<td>Anaphylaxis</td>
<td>3</td>
<td>3</td>
</tr>
</tbody>
</table>

**Dosage and Administration**

**Special Populations**

Patients receiving **Depot LA** should be monitored for the development of GVD.

**Pregnancy**

**Carcinogenesis, Mutagenesis, Impairment of Fertility**

**Precautions**

**Drug Interactions**

**CYP3A4 Inhibitors**: Ketonazole, an inhibitor of the drug metabolizing enzyme CYP3A4, significantly increased plasma concentrations of **Depot LA** when coadministered to subjects who were poor metabolizers (see **CLINICAL PHARMACOLOGY**, Variability in Metabolism and Drug-Drug Interactions in full prescribing information). For patients receiving ketonazole or other potent CYP3A4 inhibitors such as saquinavir or ritonavir, the dose of **Depot LA** should be reduced from 2.5 mg to 1.5 mg daily (see **DOSE AND ADMINISTRATION**).
DETROL LA is indicated for the treatment of overactive bladder with symptoms of urge incontinence, urgency, and frequency. DETROL LA is contraindicated in patients with urinary retention, gastric retention, or uncontrolled narrow-angle glaucoma and in patients who have demonstrated hypersensitivity to the drug or its ingredients. DETROL LA capsules should be used with caution in patients with clinically significant bladder outflow obstruction, gastrointestinal obstructive disorders, controlled narrow-angle glaucoma, and significantly reduced hepatic or renal function. Dry mouth was the most frequently reported adverse event (DETROL LA 23% vs placebo 8%); others (24%) included headache (DETROL LA 6% vs placebo 4%), constipation (DETROL LA 6% vs placebo 4%), and abdominal pain (DETROL LA 4% vs placebo 2%).

Please see important product information on adjacent page.