



SWIU News

Society of Women in Urology, Inc.

Summer 2012

President's Message

By Melissa Kaufman, MD, PhD



Melissa Kaufman,
MD, PhD

As physicians and scientists, one of our main objectives is gaining information regarding the issues faced by the patients we strive to treat. We consume so many words, absorb so many conversations, and consider an array of complex concepts as we travel through our days. Which of these seemingly endless declarations and ideas should I value? The task seems so straightforward that my confusion is confusing.

It appears that I have become somewhat fearful of even opening my email inbox as the deluge of material through which I must wade becomes more and more overwhelming. Although there are bright spots to swimming into the deep waters of the information superhighway, how are we, or our patients, equipped to determine what is valuable and what is fraudulent? There is no doubt regarding the power to touch many lives simultaneously. But really, it may be time for us all to step back and perhaps take it one person at a time. Just like we do in the exam room, focusing on the person for whom we are caring. In the context of SWIU, we recently enjoyed just such an opportunity for individual interface this past January.

Indeed, the amazing transformation of our society in the past several years culminated in our Inaugural Clinical Mentoring Conference held in Scottsdale, Arizona in January 2012. For those fortunate enough to witness the vitality of the interactions at this venue, it was honestly touching and brought back what I perceive as the primary mission of our society...support for each other. Professional advancement can be interpreted in so many contexts and I have recently been reminded by a wise mentor that there really are direct ways of navigating these complex spaces we place ourselves in. Imagine how we appear to so many women outside of urology, even those within other medical fields. It has taken incredible instinct (or as my mentor said "gestalt") to get to this place of astonishing opportunity.

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The Clinical Mentoring Conference reinforced data emerging from the business sector that unlike the perception of many people in society that women behave as “queen bees” and hold other women back, we actually strive to assist other women much more than our male colleagues! Catalyst, a nonprofit organization dedicated to advancement of women in business leadership, published a report entitled “High Potentials in the Pipeline: Leaders Pay It Forward” detailing how women help other women succeed. Ilene H. Lang, president & chief executive officer of Catalyst, reported that 65 percent of women who received career development support are developing new talent (compared to 56 percent of men), and 73 percent of those women are developing other women (as compared to 30 percent of men). Details of her insightful commentary and links to the report and resources from Catalyst can be found at <http://www.catalyst.org/blog/>.

Despite the substantial gains of our sage founders, SWIU as an organization has never been more relevant or necessary than it is today. Even the recent blockage of the Paycheck Fairness Act, which would have required employers to demonstrate equity in based on qualifications not related to gender, demonstrates SWIU’s persistent need to command a lobby and presence in urology. According to the bill’s sponsor, Senator Barbara Mikulski (D-Md.), women made 59 cents for every dollar men made in 1963 and this has only advanced to 77 cents at present. We still have critical agendas to face and much of our strength to accomplish meaningful change for women in our specialty is facilitated by our infrastructure as a group. I look forward to leading our progressive evolution as a society dedicated to sustaining advancement of women in urology by continuing to pay it forward. 

Annual SWIU Breakfast Session

Keynote Address

By Nancy A. Huff, MD



Margit Fisch, MD

The society was honored this year to have the keynote address at the Annual Breakfast Meeting delivered by Dr. Margit Fisch. Dr. Fisch is the chair of the department of urology and pediatric urology at the University Medical Center at Hamburg-Eppendorf. Currently the only woman urologist in Germany to hold a chair position, Dr. Fisch gave a thoughtful presentation on the history of women in medicine and the history of women in urology. She highlighted a few examples of women physicians, including reports from Egyptian antiquity of women restricted to the practice of treating female patients and other examples of Euro-

pean women who were groundbreaking in the field. She noted that Trotula of Salerno in the 11th century held a chair at the Medical School of Salerno. She treated urinary infections as well as stone disease in male and female patients and is attributed with authoring several early influential medical texts. James Barry, who practiced Medicine at the University of Edinburgh in the early 17th century and was responsible for medical care in the English Colonies, was actually a woman who cleverly hid her gender in order to excel in her profession. In Germany, medical education for women lagged behind some of the other European countries, but Dorothea Erxleben trained under her father and was granted a medical degree in the 16th century. In general, however, German women had to go to Switzerland for medical training until the 1890s at which time a cultural shift occurred, and women were allowed to study in their home country. By 1909, regular medical studies for women were more common, and by the 1920s German female physicians gained academic teaching positions. There were significant increases in women entering medical practice under the influence of societal and cultural changes that followed each of the World Wars.

Maximillian Nitze of Dresden, Germany, developed the cystoscope in the 1870s and is regarded as the father of urology. Although the field of urology quickly developed afterwards, it was only after WWII that women were able to gain access to urologic medical training. Germany board certified its first woman urologist in 1954, preceding the board certification in 1962 of Elisabeth Pickett, the first women in the United States to achieve board certification in urology.

Dr. Fisch then presented data on more current statistics of women in the field of urology. A 2007 publication in the *Journal of Urology* reported 324 women

urologists in the US as of July 2006. At the same time in Germany, there were 504 women urologists. Of all of the European countries, Germany has one of the highest percentages of urologists who are women. As of early 2012, 11 percent of German urologists are women, and significant percentages are also seen in the Netherlands, Sweden, Spain and Switzerland. Turkey, however, has one of the lowest percentages of women urologists in the European Union.

Shifting her discussion specifically to academic urology in Germany, Dr. Fisch stated that there are currently 10 women who hold high level university positions, including three heads of sections, six heads of departments and her one chair position. Dr. Fisch then presented a few studies published in Germany looking at career development for physicians. She noted that there is a striking difference in attitude and expectation of career and full-time employment in comparing students and physicians in practice in the former East Germany and West Germany, with a higher percentage of full-time employment seen in East German female physicians. Dr. Fisch reported that there are still significant gender differences and societal pressures on women physicians with children to pursue part-time employment and to compromise their own career development in preference to their spouses’ careers. Dr. Fisch has proposed restructuring of the urology training programs in Germany to allow for a more balanced approach to family life and career. She was pleased to highlight mentoring programs that are being put in place to facilitate successful career development for women wanting to enter the field of urology.

Regarding her own career evolution, she credited influential professors and mentors she encountered during the course of her education. She trained in general surgery for one year in Luxemburg before starting urology training in the highly respected program at the University of Mainz. Although the sixth woman to enter the program, she was the first to complete it. She was board certified in 1992 and became the first female faculty in her department at the University of Mainz. She subsequently moved to Hamburg where she was first the provisional director of the urology program before ascending to director of the section of pediatric urology in 2002. At that time she was the second woman in Germany to hold a high level academic urology position. In 2009, she was appointed chair of the department of urology and pediatric urology at the University Medical Center in Hamburg-Eppendorf. She has been active in the German Association of Urology, serving on the board from 2003 – 2008, as well as the European Society of Genitourinary Reconstructive Surgeons of which she is a past president.

On behalf of the Society of Women in Urology, I wish to thank Dr. Fisch for her interesting and provocative presentation. I congratulate her on her successful career and her commitment to mentor the next generation of women in the field. 

Elisabeth Pickett Research Award:

Akanksha Mehta, MD;

Ann M. Suskind, MD

By Dolores J. Lamb, PhD

The Elisabeth Pickett, MD Research Award is designed to support the urologic research projects of young women who are trained urologists (MD/DO), urology residents/fellows or post-doctoral PhD fellows engaged in urologic research during their training. It commemorates the life and achievements of Elisabeth Pickett, MD who was the first female board-certified urologist in the United States. The award is supported by generous donations by Dr. Pickett's family, SWIU members and friends. This year's winners are Drs. Akanksha Mehta and Ann Suskind.



Akanksha Mehta, MD

Akanksha Mehta, MD, received one of two Elisabeth Pickett, MD Research Award at the annual meeting of the SWIU at the AUA in Atlanta, Georgia. Dr. Mehta attended Brown University where she received her BSc in biology (honors), a BA in international relations and graduated magna cum laude. She then attended Brown Medical School in Providence, Rhode Island, where she received her MD in 2006. Her internship and residency in urology were performed at Rhode Island Hospital. Dr. Mehta is a reproductive medicine and surgery fellow in the

urology department of Weill Cornell Medical College spending her research year working in Dr. Darius Paduch's laboratory. Her project, focused on the role of intratesticular estradiol signaling in Klinefelter Syndrome related hypogonadism, addresses an important problem in understanding the mechanism endocrine dysfunction in men with XXY-XXXY chromosomal aneuploidy. Her experiments focus on the molecular mechanism of the transmembrane G-protein coupled estrogen receptors (also known as GPR30) in intratesticular function to understand estrogen action and its role in steroidogenesis and spermatogenesis. The long-term goal of this project is to assess the possibility of hormonal manipulation in Klinefelter syndrome patients to maximize their reproductive potential and optimal long-term health goals. Dr. Mehta's career goal is to be a specialist in male reproductive medicine and surgery.



Ann M. Suskind, MD

Ann M. Suskind, MD, is the second recipient of the Elisabeth Pickett, MD Research Award for her studies on understanding the dissemination of sacral neuromodulation. Dr. Suskind received her bachelor's degree in anthropology in 2001. She then went to Albany Medical College where she received her doctor of medicine degree in 2006. She was a general surgery intern and then urology resident at the University of Connecticut (2007 - 2011). From 2011 - 2013 she is attending the University of Michigan Rackham School of Graduate Studies where she will obtain

a masters in clinical research design and statistical analysis. During this time she is also a fellow in neurourology and pelvic reconstructive surgery and in health services research. She will finish her training in 2014. Her mentor is J. Quentin Clemens, MD, MS. Dr. Suskind focused her study on the dissemination of sacral neuromodulation devices in lower urinary tract treatment for a variety of disorders. Her aims are to measure the dissemination of sacral neuromodulation and its determinants, focusing on clinical indications (FDA approved and non-approved) longitudinal trends in the use of these devices. She then wishes to quantify the magnitude of variation in the use of sacral neuromodulation. It is expected that the findings from this study will improve the understanding of the dissemination of sacral neuromodulation treatments at the community level and in the long term the study will help identify specific clinical targets thus providing a better evidence base. 



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SWIU Gatherings

Western Section Meeting

Date: Wednesday, October 10, 2012

Time: 5:00 p.m. - 6:00 p.m.

Location: Kohala 1 & 2 Room

Host: Vannita Simma-Chiang, MD

North Central Section Meeting

Date: Saturday, October 13, 2012

Time: 6:15 a.m. - 7:00 a.m.

Location: Aroso Room

Host: Tamra E. Lewis, MD

SWIU/SBUR Award for Excellence in Urologic Research:

Jill A. Macoska, PhD

By Dolores J. Lamb, PhD



Jill A. Macoska, PhD

The SWIU/SBUR Award for Excellence in Urologic Research recognizes the contributions of outstanding female scientists with established achievements in urologic research. This year's awardee is Dr. Jill Macoska, professor of urology at the University of Michigan. Dr. Macoska received her BS in physical anthropology at Kent State University. She then moved to New York where she received her MS and PhD in biochemistry from the City University of New York. Her post-doctoral training was in molecular genetics at Harvard University and at the Michigan Cancer Foundation in Detroit. Dr. Macoska's work focuses on prostate cancer and benign prostatic hyperplasia. She has been the recipient of a number of awards, including the PhD Scholar Award (1991 – 1993) and New Investigator Award (1995 – 1996) from the American Foundation for Urologic Disease. In 1996 – 1997 she received the Society for Basic Urologic Research/

Merck Young Investigator Award. Her laboratory is extremely well funded with grants for the following research areas:

- **Planning Centers for Interdisciplinary Research in Benign Urology** 1 P20DK090870-02 (Macoska, PI) NIH
- **PTEN- and EGFR-Dependence of CXCL12-Mediated Proliferation in the Aging Prostate** 1 R01 DK081841-04 (Macoska, PI) NIH/NIDDK
- **Chemokine Prostate Cancer Biomarkers** (EDRN/NCI) U01 CA086402 (Macoska, PI) NIH/UTHSCSA
- **Michigan Institute for Clinical and Health Research** (MICH1R) UL1 RR024986 (Shanley, PI) (Macoska) NIH / NCRR
- **SPORE in Prostate Cancer Career Development Program 2** P50 CA069568 (Pienta, PI) (Macoska) NIH/NCI

Dr. Macoska's work has influenced our understanding of both benign and malignant prostatic disease. She has been a prolific writer with over 57 papers published predominantly in the areas of benign prostatic hyperplasia/LUTs (Lower Urinary Tract Symptoms) and prostate cancer. 

Networking Reception

By Leslie M. Rickey, MD, MPH

After a fantastic panel discussion on male infertility put together by Dr. Naughton, everyone headed to the SWIU Networking Reception. Every year, this event provides the opportunity to see old friends from across the country as well as greet new SWIU members. Our diverse membership was reflected in the range of attendees that included medical students, residents, and fellows, as well as urologists from academic and private practice backgrounds, large and small groups. I am always impressed by the incredible scope of experience and expertise of the women I get to talk at SWIU gatherings and definitely take advantage of these meetings to seek out opinions about surgical procedures, research questions, and career negotiation. I believe it is this interaction that also made our first Clinical Mentoring conference so successful, and I am looking forward to the upcoming conference in January 2013. See you in Arizona!

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We invite your continued support.

Women Leaders in Urology Forum – Evaluation and Treatment of the ‘Forgotten Partner’ of the Infertile Couple

By Melissa R. Kaufman, MD, PhD

We extend gratitude to the many SWIU members and guests present for the exceptional Women Leaders in Urology Forum at the 2012 AUA in Atlanta, GA. As



Dolores J. Lamb, PhD



Wayne Kuang, MD



Kathleen Hwang, MD

Kathleen Hwang, MD of Brown University Urological Associates in Providence, RI.

Dr. Kuang initiated the dialogue with a fascinating question “Is the Y chromosome going extinct?” He discussed genetic loss on the Y chromosome and the perception that the male genotype is in a state of decay. This was of course a rousing means to begin his discussion on what defines normal fertility and how to proceed with evaluation of the male partner.

He first highlighted the parameters utilized to initiate an assessment, namely when a couple who desires fertility has had one year of frequent unprotected intercourse without conception. The appraisal focuses on both defining reversible causes but also informing the families of the implications and provision of appropriate counseling for irreversible conditions.

Dr. Kuang explained the basic evaluation for male infertility consists of history and physical, semen analysis, hormonal profiles and possibly genetic profiles or imaging. He further detailed the aspects of a sexual history that need to be obtained as well as careful review of medications as the toxicity of several common pharmaceutical may have dramatic impact on testicular function. Of course, although the physical exam findings of urologic significance such as varicocele, testicular size, hypospadias and the presence of vas deferens cannot be understated; more occult relationships such as increased adipose tissue which may alter spermatogenesis should also be carefully noted. Further highlights from his discussion of semen analysis and laboratory evaluation are outlined as follows:

always, additional commitments precluded some from attending the forum, thus we hope in this brief overview to share some of the valuable knowledge offered. Cathy Naughton, MD, former SWIU president and director of the Center for Sexual Health at Metropolitan Urological Specialists in St. Louis, MO, assembled a remarkable panel of to discuss a topic of universal significance and frequent confusion to urologists, namely male infertility. Methods for evaluation of male infertility patients and understanding of the pathophysiology of the condition remain an elusive objective for many urologists. In addition to the high-yield management pearls, the forum discussed a wealth of information regarding the basic science behind our current conceptualizations of infertility with state-of-the-art treatment strategies.

The panelists convened by Dr. Naughton were a noteworthy group truly representing the current and future leaders of urology. How tremendously fortunate we are to have these women as active participants in our society and our male colleagues supporting of our educational initiatives. Panel members included Dolores J. Lamb, PhD, professor in the Scott Department of urology and department of molecular and cellular biology at Baylor University. Professor Lamb holds the Lester and Sue Smith Chair in basic urologic research at Baylor University and additionally serves on the SWIU board as treasurer.

Accompanying Dr. Lamb were two very dynamic and experienced practitioners and researchers in the realm of male infertility, Wayne Kuang, MD, director, Southwest Fertility Center for Men in Albuquerque, NM, and

1. The new 2010 World Health Organization (WHO) guidelines for semen analysis are derived from “fertile” men who were able to establish a pregnancy within 12 months. While the WHO would like men to be above the 5th centile (volume >1.5mL, concentration >15M/mL, motility >40%) to put them within the 95% reference interval, it is important to remind patients that being below the 5th centile doesn’t automatically mean you can’t get pregnant and being above it doesn’t guarantee fertility. The sperm parameters are just one piece of the puzzle that one must take into consideration.
2. Make sure you obtain at least 2 semen samples. Ideally they would be one month apart with 2 – 3 days of abstinence.
3. If you are trying to properly time sex, remember that most pregnancies occur in the six day window leading up to the day of ovulation. Sperm can live in a woman’s reproductive tract for 2 – 3 days so have sex approximately every other day starting a week before your expected day of ovulation. A rough guide would be having sex day 7,9,11,13,14,15 if you expect to ovulate on day 14.
4. While foreplay and natural lubrication is best for couples who deal with vaginal dryness, there is one artificial lubricant that seems to have minimal deleterious effects on sperm and that is Preseed (Dr. Kuang does not have any financial or professional association with the product).
5. Remember to get a total testosterone and FSH blood levels in addition to a semen analysis (ideally two) during evaluation for male infertility.

Dr. Kuang cautioned that during hormonal profile evaluation it is not uncommon to expose hypogonadism and that up to 45% of patients with non-obstructive azoospermia or oligospermia may require future testosterone supplementation.

Shifting gears to basic science, Dr. Lamb outlined current concepts of the genetic basis of male infertility. She began by detailing how chromosomal karyotype analysis may reveal large scale abnormalities to subsequently focus further evaluation. However, she cautioned that karyotype analysis is, in general, a superficial study designed to determine large scale numerical or structural defects.

Dr. Lamb next skillfully guided the audience through the alphabet soup of male infertility factors including Y chromosome microdeletions, azoospermia factor (AZF), copy number variants, as well as single gene defects which may contribute to male infertility such as congenital bilateral absence of the vas deferens (CV-ABD) and cystic fibrosis transmembrane conductance regulator (CFTR).

Her take home messages were to appreciate the vast array of genetic etiologies for male infertility and recognize that most laboratories have the capacity to test for only a few of these defects. She further cautioned that even with sophisticated genetic testing, there were no guarantees of success even employing advanced assisted reproductive technologies.

Dr. Hwang next proceeded to provide a very illuminating update on current medical and surgical interventions for male infertility. She began with a review of the “holy trinity” of male infertility, the hypothalamic-pituitary-gonadal (HPG) axis. Dr. Hwang described how the vast majority of medical therapies for the treatment of infertility are directed at parameters modulated or produced by the HPG axis. She detailed indications and use of a variety of medical therapies including dopamine agonists, Clomid, tamoxifen, and human chorionic gonadotropin (hCG) as well as the role of newer aromatase inhibitors.

With regards to surgical interventions, Dr. Hwang described in depth both varicocele repair as well as multiple means of vasectomy reversal. Finally, she gave a deft description of assisted reproductive technologies and their indications and implications.

The session concluded with a question and answer session allowing panelists to provide opinions and data on several provocative areas of male infertility probed by the audience including pediatric varicocele, implications of sacrifice of the vassal artery, as well as controversies with testosterone assays and replacement therapies.

We are extremely grateful to Dr. Naughton and all the panel members for graciously sharing their cumulative expertise on this critical topic. They truly provided fertile ground for contemplation of the concerns regarding the forgotten male partner. Please plan on attending next year’s Women Leaders in Urology event at the AUA and we encourage you to share any ideas for topics of particular interest by contacting us at info@swiu.org with your comments and suggestions. 



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ADDRESS SERVICE REQUESTED

SAVE THE DATE!

SWIU 2nd Annual Clinical Mentoring Conference
January 25 – 27, 2013
JW Marriott Camelback Inn
Scottsdale, AZ

After the stunning success of the Inaugural Clinical Mentoring Conference, SWIU is pleased to announce the 2nd Annual Conference! This meeting promises to be an excellent scientific program combined with invaluable networking opportunities among women in urology.

The program is shaping up to be a fantastic learning opportunity for all. Scientific sessions will cover a variety of valuable subjects including robotics, female sexual dysfunction, prostate cancer and the couple, a panel discussion from women executives in industry and a panel on practice management. We have several hands-on experiences planned and a top-notch faculty including: Kristene Whitmore, Teresa Beam, Elizabeth Mueller, Jennifer Anger, Carol Salem, Elizabeth Williams, Karyn Eilber and Lynda Jayjohn.

We will devote the Saturday banquet to honor Jean Fourcroy, MD, PhD, MPH. Dr. Fourcroy, along with the handful of other women urologists in practice at the time, founded SWIU in 1981. She served as president for 10 consecutive years until handing over the reins in 1992. Showcasing Dr. Fourcroy's considerable contributions to SWIU and the field of urology at large, along with providing a fascinating perspective on the history of women in urology, will make this an event you don't want to miss!

We hope to see you there!

