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Q1 Why did you decide to pursue a career in urology, and what continues to motivate you today?

Urology is one of the medical specialties with the highest involvement in new technologies. From endoscopic surgery to laparoscopic robot-assisted surgery, we are one of the leaders in disruptive technologies in the medical field. Also, urology combines surgical with clinical-medical activity, covering many subtopics from benign diseases to oncology. My field of interest is genitourinary tumours. Lately there has been a big change in the management of genitourinary tumours, with novel drugs, targeting agents, and tailored medicine. Nowadays, motivation in the clinical aspect comes from patient satisfaction, and for the academic part, in leading a team of young and enthusiastic people and pushing forward to increase the academic level in Europe. This team is the Young Academics Urologists (YAU) of the European Association of Urology (EAU).¹

Q2 What experience did you gain from your role as Chairman of the European Society of Residents in Urology (ESRU), and are there any notable achievements that come to mind from your time in this position? I was part of the ESRU for 5 years,

and I learned multiple soft skills such as leadership, communication, and teamwork. In these 5 years, we published many papers about the actual status of urology training in Europe, raising awareness of the lack of confidence, lack of training in major surgery, and amount of surgical simulators, among others. Also, we found that although the residents present their work at congresses, this does not translate into scientific publications, so there is a lack of academic-scientific motivation, and it mainly depends on going abroad or getting into a PhD programme. Nowadays, the EAU is working hard to make urological education reachable at all levels in Europe.

Q3 Having participated in multiple international congresses and collaborated on more than 250 published scientific papers, what will you be focusing on next as an educator?

The natural pathway of doctors should be to achieve proficiency in their field of interest, and deliver this knowledge to the next generations. In the YAU, we are working on building an open academic curriculum for everyone. This curriculum should be Pan-European, unbiased, and high-level, covering the latest updates in research, and led by experts.

Q4 Drawing upon your experience as a clinical observer, are there any innovations on the horizon in the fields of laparoscopy and focal therapy techniques for prostate cancer?

Prostate cancer is living a revolution in terms of diagnosis and treatment. There are novel imaging techniques such as MRI, prostate-specific membrane antigen, and micro-ultrasound, among others, which allow us to see, diagnose, and control a tumour that we were not able to see a few decades ago. Focal therapy and robotic surgery allow us to deliver tailored treatments with good oncological results, without harbouring the quality of life. New energies to deploy inside the prostate are coming, and new robots are in the field, so the future is promising.

Q5 How is the EAU, with whom you have several positions of involvement, educating healthcare professionals and trainees in the field of urology?

The EAU offers numerous resources and programmes for optimal learning in urology for doctors at any stage of their urological careers. The educational arm of the EAU is the European School of Urology (ESU). The ESU aims to stimulate, coordinate, and organise all "Lately there has been a big change in the management of genitourinary tumours, with novel drugs, targeting agents, and tailored medicine."

postgraduate teaching and education activities of the EAU at the highest level possible. Therefore, all teaching activities organised by the ESU are open to constant evaluation. No matter what stage you are in your career, the EAU-ESU can offer you valuable learning resources, designed to prepare the frontrunners in urology, including masterclasses, courses, hands-on training, webinars, on-demand activities, e-courses, and podcasts, among others. There are educational platforms with the latest findings on clinical trials, insights from meeting reports, and interviews with key opinion leaders called UROONCO² and UROLUTS.³ Furthermore, urologists can be part of scholarships and exchange programmes at reputable European institutions from an early stage, and team up with experts in clinical and experimental research via the European Urological Scholarship Programme (EUSP).



Q6You recently co-authored the study, 'Augmented reality' applications in urology: a systematic review'. What were the key findings from this investigation?

Augmented reality applied to surgical procedures refers to the superimposition of pre-operative or intraoperative images into the operative field. Augmented reality has been increasingly used in a myriad of surgical specialties, including urology, and its advances have led to increasing registration accuracy, as well as increased ability to identify anatomic landmarks, and improve outcomes during urologic procedures, such as robot assisted radical prostatectomy and partial nephrectomy.

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