Congress Interviews

This year, we had the pleasure of sitting down with the International Urologic Research Society (IURES) 2025 Congress presidents, Erdem Canda and Emre Huri. As two distinguished leaders in the field, they highlight the innovative programme planned for this year's Congress, the rapid growth of the Society, and the promising future of robotic surgery. Read on to gain their expert perspectives.

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Q1 As Co-President, what was your specific area of focus for the IURES Congress, and how did your work with Erdem Canda, Koç University, Istanbul, Türkiye, help make the Congress successful?

My specific area of focus for the Congress is functional and reconstructive urology. I work more on preparing for workshops on secondary modulation and developing printed models to help create the best possible equipment. As a co-president, I also worked on every part of the programme because our programme has different subsections like scientific meetings, courses, live surgeries, and interactive international meetings, and we organise all these. Because of this, I was particularly responsible for implementing the Congress and building relationships with international societies such as the Balkan Neurology Society and the Egyptian Neurology Society. In reality, though, we worked together on every part of the process. Canda and I collaborated closely, and I believe that this teamwork was the most important factor in the success of the Congress.

Q2 How does the IURES Congress help with the important need to create clear, standard rules for treatment for different hospitals in both Türkiye and Europe?

This Congress helped our participants, or maybe not 'helped', but guided our colleagues, from many different cities and various types of hospitals. Some came from education and training hospitals, others from state hospitals, and we also had many urology residents participating. The Congress attracted participants not only from Türkiye but also internationally.

In all our sessions, we focused on discussing the future needs of urological science, especially in terms of evidence levels. For that reason, the Congress promoted treatment policies and provided detailed, evidence-based information about urological diseases. So, I can honestly say that this Congress reached a

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high scientific level, not only for Türkiye or Europe, but on a worldwide scale.

Q3 Your work connects research and the clinic. How did you make sure that the sessions at IURES focused on research findings that doctors can actually use right away with their patients?

Our society was established 3 years ago, and inside the society, we had the research section. Research is not easy to deal with; it's a long-term commitment. But we are working to strengthen scientific research, especially in areas where evidence is lacking in the urological field.

I would also like to mention our new collaboration with an EU project. We are a collaborator in the EU Erasmus Youth Project called the European Youth School of Robotic Technology. IURES is a partner of the project. Within the project, we are responsible for dissemination. We help promote and spread knowledge of robotic technology among young people, residents, and young urologists.

We are also preparing 3D-printed models for robotic training programs, and we have selected several robotic reconstructive surgical procedures for this purpose. This is one of our research-based European projects. The most important issue is to follow research and implement it in clinical practice. It's not something that happens in a single day, but we continue working, and new ideas are still emerging.

Q4 What new and innovative teaching methods, beyond traditional lectures, did IURES implement this year to ensure doctors effectively retained the updated knowledge?

We had many hands-on training courses. In these courses, we first performed secondary neuromodulation on a 3D-printed customised model. We performed penile prosthesis surgery courses with the printed model castings. In addition, we used printed prostate and kidney models for robotic and laparoscopic surgery.

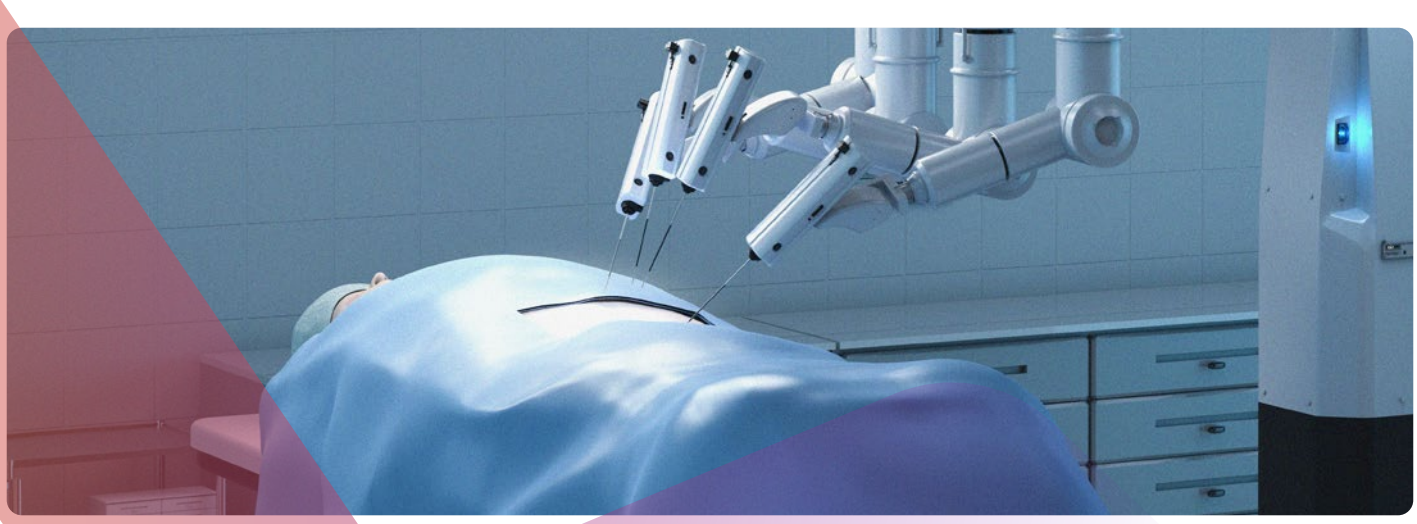
In the Congress, we had a special guest, Ignacio T. Castillón Vela, Hospital Universitario Nuestra Señora del Rosario, Madrid, Spain, and I think he did a great job. We also organised laparoscopic ureteroneocystostomy courses as part of our EURO Lab sessions. These were examples of new, innovative technologies implemented in our hands-on training.

This Congress provided valuable opportunities for our colleagues, especially the younger generation who represent the future of urology in Türkiye, although it benefited our international guests as well. We had more than 500 participants, and more than 60 or 70 international colleagues who were truly interested in our programme.

When you look at the Congress, it is not only 'international' in name; the scientific programme itself reflects this. We started at 8 a.m. and continued until 7 p.m., without overlapping sessions. In the main hall, we focused on discussions about the needs and the future of urology across different subsections, while in the other halls we provided hands-on training and updated practical knowledge.

Q5 New technology has ethical questions. Did IURES include any sessions to discuss the responsible use of new tools like AI, or questions about patient data privacy?

We also had a course on AI, specifically the usefulness



of AI in urology. I participated in that session as well. It was a theoretical course, and we invited speakers from different disciplines, not only urologists, but also engineers. We discussed AI as a broad concept, and under that, we focused on deep learning, machine learning, and AI-based diagnostic tools, including applications for prostate cancer evaluation.

This is one of our main goals for the future: to use AI for training purposes and possibly for our next meetings. For example, AI could help us analyse our data to identify which topics are most popular and which ones may not need as much focus.

Regarding patient data privacy, we always stress its importance in all our theoretical lectures. We also emphasise the role of AI in protecting patient data. We don't have a specific dedicated course on data privacy yet, but we incorporate this topic within the AI course.

Q6 What goals did you set for IURES to help with public health issues, such as improving screening for cancer or treating widespread diseases like kidney stones in the region?

When you look at the Congress, and even apart from the Congress, we have a policy, our policy to teach our colleagues. On the other hand, we also have a responsibility to the public, because we have a responsibility to give the right information about the urological disease, diagnosis, management, follow-up, and treatment, including which surgical approaches are appropriate, whether robotic, open, or laparoscopic.

We are aware of the importance of this condition, especially in improving cancer screening and managing widespread conditions like kidney stones. We have a subspecialty group focused on stone disease, and they are working actively in this area. We also have a group for uro-oncology addressing these problems. I personally work on functional urological issues, such as voiding dysfunction. So we are continually developing new ideas, projects, and research-based studies.

On the other hand, today we had an interview with the Turkish National Agency and national TV channels. We provided information about prostate cancer, bladder cancer, urinary incontinence, bladder dysfunction, urinary retention, and also about the robotic surgical era in Türkiye and in the region. I think this is another way the Congress benefits public health.

Q7 Looking back at the Congress this year, what has been a particular highlight, or standout moment for you, and why?

We had several highlights, especially in neurotechnology. Our main highlight was, and still is, robotic technology. We used different robotic systems during the live surgeries.

Another major achievement was organising 15 different hands-on training courses. We also introduced a 'live lunch session' during the coffee break. This meant we didn't stop the scientific programme even during social time, because we believe that social activities can also serve scientific purposes. So, the live lunch session became one of the unique highlights of this Congress.

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We also made very effective use of social media to share our goals with the world. This is not marketing; it is the true visualisation of our ideas and our vision. And our vision is 'the future together', because we believe that when you are together, you achieve success in science and reach your main goals in urology.

It's not only me and Canda, our entire executive committee also worked together on these goals. This Congress highlighted the importance of unity and collaboration in creating such a unique event.

Finally, although we are a regional society, we have strong collaboration with the Balkan Urological Association, which includes five to seven national societies. The Egyptian Urology Association was also represented, as well as the European Association of Urology (EAU), Société Internationale d'Urologie (SIU), and American Urological Association (AUA). This is one of the elements that truly stands out: it is a Turkish Congress, but at an international level.