IUGA 2009: some perspectives from a neutral corner

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IUGA 2009 in Como has come and gone. In the world of the urogynaecologist—or as some would prefer, *the pelvic organ reconstructive surgeon*—the annual IUGA congress is the highlight of the year. This is a time when one recharges one's knowledge—sometimes it is more a reassurance of one's competence to practise.

Compared to previous IUGA congresses, IUGA 2009 was different. The programme was changed in many ways—the workshops were well planned and well attended, and the main programme interlinked review lectures with the scientific programme—to such an extent that the lecture halls were still full on the last day! The overdose of industry seminars of the past was not there—the biggest plus point of IUGA 2009. Whereas the congresses of 2006, 2007, and 2008 were dominated with all kinds of innovations on the different synthetic mesh kits, this time, one needed to hunt to find any. The scientific programme was central and the rest, more peripheral.

The feel of this congress was that a new era is dawning: the joy of the fantasy of mesh kits having the answers to all our problems is being replaced with the reality that the cracks in the wall are appearing. As time goes by, the synthetic meshes are giving rise to a new science: how to diagnose complications caused by them and how to rectify that. The focus had been in the past on the successes and failures to cure prolapse—now, it is shifting to not only the failure rates but also the harm done to those who had failures, and more importantly, the long-term complications

even in those who had initial good results. The pendulum is still on the move.

It is no wonder that at this congress, five workshops highlighted complications of synthetic meshes: how to diagnose, classify, and treat them. This is to my mind going to be one of the main attractions at IUGA congresses to come. IUGA 2009 was the starting point. The last few drops in the synthetic mesh innovations bucket was a few introductions of, what someone called, the *stamp-size mesh kits*: increase the pore size or decrease the mesh size—both leading to less and less mesh, until nothing remains. Those who (still) do not want to hear will, unfortunately, stay deaf; and those who do not want to see will stay blind.

One aspect of the IUGA 2009 experience which needs to be underlined is the video sessions. At this congress, in contrast to IUGA 2006 and 2007, these proved to be poorly attended. A pure organisational blunder—the EUGA was given the responsibility of having video sessions as part of their poorly advertised pre-congress meeting. The few videos accepted were accepted more on the basis of the names who subjected them than on the basis of content. Videos not accepted for this meeting were introduced as a “digital poster” session—a fantastic idea, but poorly advertised, if advertised at all. I am sure few attendees knew about this. Video with data was a new addition to the main programme and was well attended. Unfortunately, the criterion of not mentioning industry names or advertising was not adhered to in quite a few of these. Some videos were also of very poor quality. The vast majority of attendees to IUGA are experienced surgeons—they want to see other surgeons operate and compare. Videos of surgical procedures—it do not need to be “surgical innovations” all the time; a simple rerun of a well-known procedure in the hands of an expert—are always good to watch.

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A fantastic introduction to IUGA 2009 was the lunch with experts. To be able to speak with your heroes and idols at a congress is always one of the reasons why normal mortals attend. At IUGA 2009, this was possible, not only due to this lunch meeting but also in between lectures. One of the responsibilities of being leaders in your field is that you must be available to your peers during meetings like this. This initiative by the organisers must be applauded.

From the perspective of someone who has English as a second language, I do want to make a suggestion to organisers of congresses where the only language is English. At this congress, as at others, it once again became apparent the advantage speakers with English as first language have. The poor Greek, Italian, or French speaker

is at a distinct disadvantage: he/she has to put his message forward in the same time frame as his/her English/American colleague, has to answer questions—which he/she normally did not fully grasp—off the cuff under the same pressures as the English/American colleague. Is it possible to lend these people a hand? In the days leading to an international congress like this, a special workshop session can easily be arranged to coach interested speakers. I am certain a lot of good knowledge and new perspectives got lost due to the language barriers.

IUGA 2009 was a better experience for me personally than the last one I attended in 2007—the fact that I did not bother to go to Taiwan in 2008 says it all.

My thanks and congratulations to the Italian organisers.