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A SURVEY OF FUNCTIONAL UROLOGY TEACHING IN ITALY: SHOULD NATIONAL AND INTERNATIONAL SOCIETIES CONTRIBUTE FURTHER TO UROLOGISTS' TRAINING?

Hypothesis / aims of study

The cost of managing conditions of interest in functional Urology (including all clinical issues associated to lower urinary tract dysfunction and symptoms) in Italy represents 20% of costs related to Urology care (1). Unfortunately, uro-oncology, urinary lithiasis and andrology seem to be predominant in the core curriculum of postgraduate urological training and we believe that training in functional Urology may be insufficient. The aim of this paper is to perform a survey on teaching in functional Urology (FU) among Urology Residents in Italy.

Study design, materials and methods

All Italian Residents were contacted by e-mail and asked to fill a brief, anonymous online questionnaire through Surveymonkey.com. The survey was based on close-ended questions. The questionnaire was developed specifically for this survey and was constructed based on results obtained from prior experience of survey construction in medicine. Responses were collected and uploaded onto a database. Survey participants provided general information such as such as gender, year of training and region of training. Several aspects of functional Urology and training were explored, such as hours of teaching and practice in functional Urology, number of urodynamic studies performed, confidence in interpreting the tests without supervision, type of surgical procedures performed at their centre. The perceived needs regarding education and training in functional Urology were investigated ("do you feel the need to deepen knowledge in functional Urology?". "Do you believe there is a need for post-training fellowships in theoretical and practical aspects of functional Urology, including surgery?"). Descriptive statistics were used to analyze the responses.

Results

One hundred and two out of 430 Italian Residents (23.7%) responded to the survey. Sixty-eight (66.6%) of them were men and 34 (33.4%) were women. Thirty-nine of them were first or second year Residents, 42 third or fourth year ones and 21 were in the final year of their training.

Ninety-two (90.2%) Residents reported the presence of a functional Urology unit in their teaching hospitals. On the other hand, 90.2% and 50% of them reported that the percentage of their educational program dedicated to functional Urology was less than 25% and 10%, respectively. Frontal lectures on functional Urology were sparingly offered and never represented more than 20% of programs. In 86.3% of the cases functional Urology was about 10% of the program and in 55.1% of cases, it was about 5% of it. It is worth noting that male LUTS was the major interest for FU units according to 92.2% of Residents. On the other hand, neurourology and female Urology accounted for less than 15% of working time of the FU unit for 70.6% and 51% of Residents, respectively. Theatre time dedicated to surgical procedures for incontinence was less than 10% of the total according to 83.3% of Residents. Table 1 reports the percentage of functional Urology units performing different types of surgery for urinary incontinence. Overall, 67.6% of Residents participating in the survey reported to have performed less than 10 urodynamic investigations on their own. A vast majority (89.2%) would like to deepen their knowledge of functional Urology; 78.4% agreed on the need for a post-training fellowship on theoretical and practical aspects of functional Urology, including surgery.

Interpretation of results

The percentage of Residents who responded to the present survey (23.7%) is in line with our expectations according to the average response rate using the same website (2).

Although the vast majority of training centres have a unit dedicated to functional Urology (92.15%), the time dedicated to educating Residents in this area seems insufficient to the majority of Italian Residents reporting less than 10% and 5% of their time dedicated to the study and practice of this subspecialty. Neurourology and female Urology are the Cinderella of functional Urology in postgraduate training, whilst more attention is paid to male LUTS. Surgical activity seems to reflect the same attitude; with a staggering 83.3% of Residents reporting that time dedicated to surgical procedures for incontinence was less than 10% of the total. The majority (67.6%) of Residents reported to have performed less than 10 urodynamic investigations on their own. The picture described in our survey suggests the urgent need to improve our postgraduate training programs. This is of particular importance given the vast majority of Residents would like to deepen training the knowledge of functional Urology and would appreciate post-training fellowship in this area.

Concluding message

This survey conducted in Italy, the European Country with the highest number of Residents in Urology (3), suggests the need to improve postgraduate training in functional Urology. This is an important part of the Urology core curriculum, and in daily practice, however it does not appear to be adequately considered in the training programs, especially with regards to neuro- and female-urology. The reasons behind this insufficient training are numerous and can be found within health care organizations, reimbursement-based public health and surgical appeals. We believe that postgraduate training in Urology should be reorganized and balanced towards the real needs of our practice.

Table 1: Percentage of centres performing different anti-incontinence surgical procedures

Mid-urethral slings (trans-obturator)	76.5%
Mid-urethral-slings (retropubic)	34.3%
Burch colposuspension	30.2%
Lap Burch colposuspension	8.4%
Vaginal surgery for Pelvic Organ Prolapse	39.2%
Lap/robotic surgery for POP	37.1%
Bulking agents	8.4%
Other surgery for male urinary incontinence	42.4%
Artificial Sphincters	62.7%

References
1. Società Italiana di Urologia, Bocconi University report
2. www.surveymonkey.com
3. European Society of Residents in Urology (internal report 2015)

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