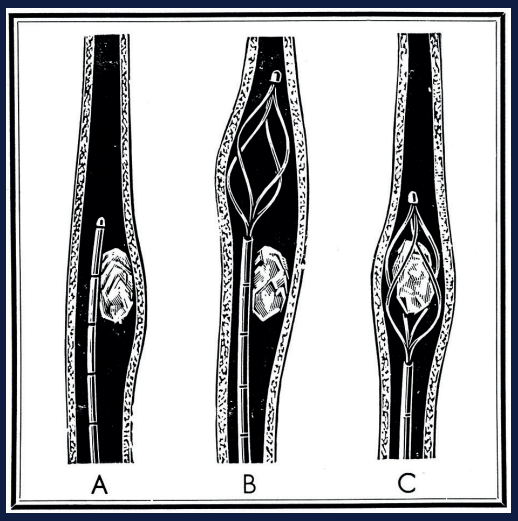
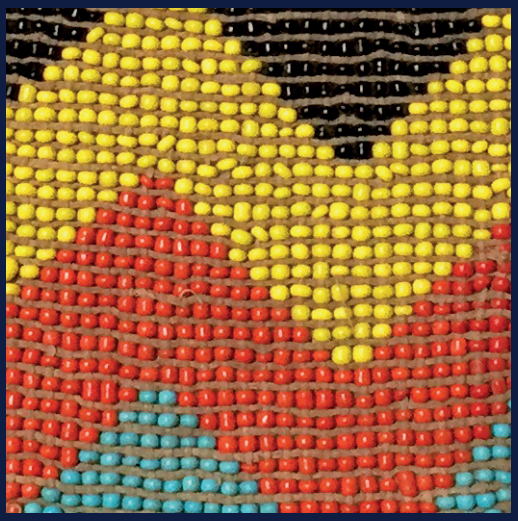
Historical Exhibition Brochure

Dormia: The man and his instrument

Cache-sexe & The 2023 Desnos Prize Winner





eau History Office

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EAU23 | MILAN, ITALY
10-13 March 2023

Urology in Milan: The Dormia Basket

Every day, a urologist somewhere in the world asks the operative nurse for a Dormia Basket. We are so used to do this, but do we really know who Dormia was? The name Dormia is not of a manufacturer but rather the name of a renowned Italian urologist who was active until 20 years ago. Prof. Enrico Dormia (1928-2009), a giant in the field of urology.

Born in 1928 in Bormio, a tiny village in the Italian Alps, Enrico Dormia graduated from the University of Milan in 1952. He went on to complete his fellowship training in Milan, was promoted to Professor and became an active member of the staff at the Urology Clinic of the University of Milan. During his stay in the Urology Clinic, under the direction of Prof. Luigi Pisani, who was President of the International Society of Urology and one out of three full professors of Urology in Italy, Dormia worked hard and studied urinary stones in depth.

At that time, until the early eighties, the only active therapy for ureteral or kidney stones was open surgery. In fact, it was only in 1978 that Arthur Smith established a new specialty in Urology and chose the name "endourology", defining it as a "closed and controlled manipulation of the genitourinary tract". After this date, in Europe, ureterorenoscopy by Perez Castro, PCNL by P. Alken and ESWL by C. Chaussy started and blossomed.

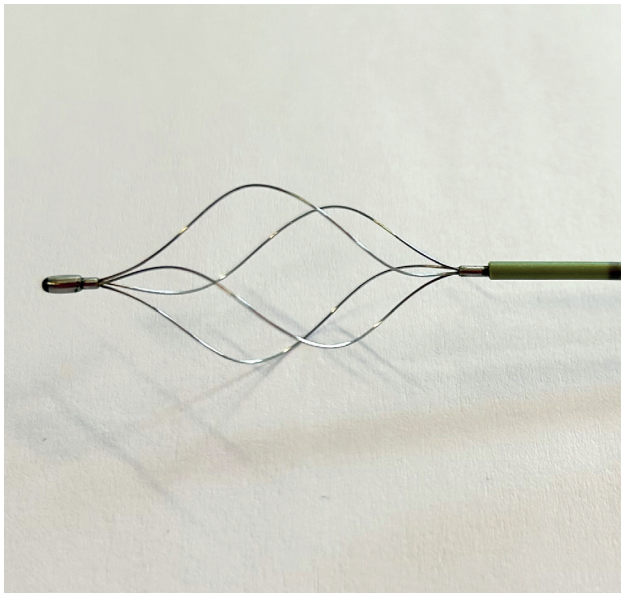
Professor Enrico Dormia

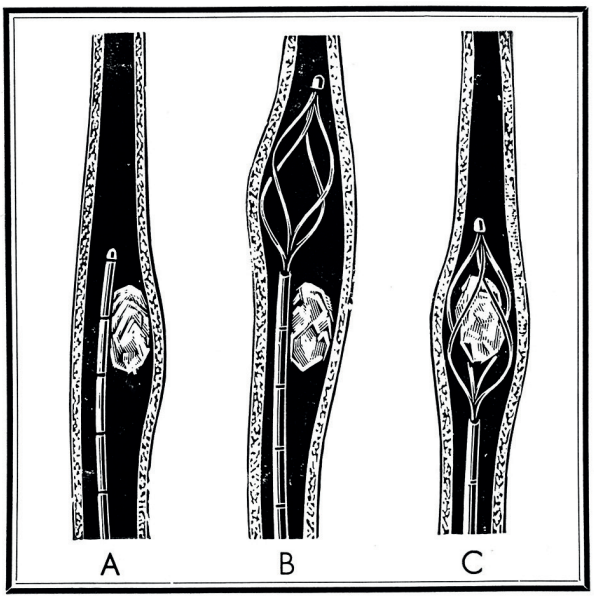
In the early 1950s, Enrico Dormia had started to study how to apply to stones the concept popularised by another great Italian physician, Umberto Veronesi 30 years later: "from the maximum treatment possible to the minimum efficacious one", stressing the concept of minimally invasive therapy in urology. Dormia dedicated his efforts to ideate and develop systems to extract ureteral stones from the lumen of the ureter and to the possibility of dissolving the stones in the renal cavities. They would then be washed out with solutions invented for this purpose, producing significant scientific and clinical work in the field of chemolysis.

The basket and the metallic tricep

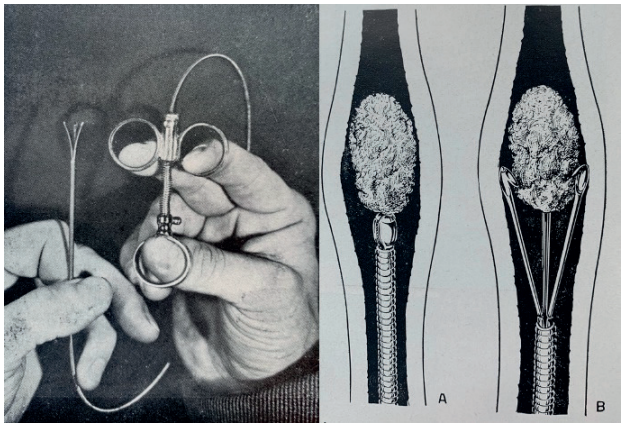
In 1958 Dormia published the first paper in Italian on two new instruments to remove stones from the ureter: the basket and the metallic tricep. Dormia, a bright and creative man, developed the concept of putting together a ureteral catheter and the thinnest string of a guitar to create the prototype of the world famous Dormia Basket: a 5 Ch catheter containing a metal wire that -pushed out of the tip of the catheter- was able to spring 3 or 4 wires fixed to each other on the tip and arranged in an helicoidal shape. The basket was able -when sprung out- to dilate the ureter, capture and extract the stone.

The second instrument was a metallic tricep, 8 Ch in size, actuated by a handle with three fingers. Both instruments had to be inserted in the ureter in cystoscopy and under radiological control. The basket had to pass over the stone and had to be adjusted with gentle movements towards the stone until this was "in" the basket, whereas the second instrument had to touch the stone and then had to be opened to allow the tricep to embrace the stone. The release of the stone was more difficult with the basket than with the triceps. However, some historical extractions are reported in the literature at the beginning of the basket tale.





« *The basket was able -when sprung out- to dilate the ureter, capture and extract the stone.*



« *The basket had to pass over the stone and had to be adjusted with gentle movements towards the stone until this was "in" the basket, whereas the metallic tricep had to touch the stone and then had to be opened to allow the tricep to embrace the stone*

I had the lucky opportunity to be taught by Prof. Dormia to extract ureteral stones by means of the basket under radiological control. The rules were simple:

1. The stone should be located in the pelvic ureter no more than 7 cm from the papilla.
2. The bladder had to be empty.
3. The traction had to be continuous and gentle.
4. The direction of the traction had to be towards the opposite side and upwards.
5. Sometimes an electrical papillotomy had to be performed before the extraction.

Only in Dormia's hands could the basket be employed in stones above the iliac vessels: in these cases a small weight was attached to the basket (usually some Italian coins) and the progression of the stone was observed radiologically for some days. The Dormia basket was presented in Paris during an international congress. It was patented, acquired and commercialized by Porgès in the Coloplast group, which owns the brand name "Dormia Basket". An early model by Porgès was recently donated to the EAU History Office by Dr. Johan Mattelaer and is on display at the EAU Central Office.

Dormia planted the seeds

Nowadays the original extraction technique, which was safe in Enrico Dormia's hands and was a well-established technique, has been abandoned. The EAU Guidelines forbid the blind extraction of ureteral stones and recommend to do that under direct vision. However, without any doubt, Dormia planted the seeds of the extraordinary future development of endourology.

Adapted from Prof. Emanuele Montanari's "Prof. Enrico Dormia: The man, the urologist and his basket" from *European Urology Today* Vol. 33 No. 3 (2021).

Cache-sexe: Covered, uncovered, discovered

Cache-sexe refers to a genital covering, and is derived from the French 'cacher' (to hide) and 'sexe' (the genitals). Other terms used are *apron, skirt, loincloth* or *girdle*. Nowadays, a word frequently used for a kind of bikini briefs is *thong*, and an intriguing word indicating a 'modern' cache-sexe is *tanga*.

A cache-sexe may cover various parts of the human body, and can vary from only partially covering the genital area to hiding a larger area, sometimes even combining the front and the back.

In males there is a wide variety from devices that close the foreskin on top of the glans of the penis, to a specific glans covering, a penis sheath that leaves the scrotum free, and finally the complete 'cache-sexe' that covers the genital area. In females, the variation is generally more related to size and form than to a specific anatomical area.

The cache-sexe can be traced back to the palaeolithic, and one of the oldest African examples of a cache-sexe is a 12th-century girdle originating from Mali. In Europe, string skirts dating from the 14th century BC have been discovered.

When and how a cache-sexe is worn, varies from society to society. Often the main reason for wearing a cache-sexe is protection. However, because of the open styling of the cover, it may be less effective as physical barrier, but instead offer spiritual protection. Some people believe that ghosts can attack vulnerable areas such as the urethra or the anus. Therefore, a cache-sexe is used to protect, if not actually conceal, that part of the body against the evil spirit through its ritual power.

Modesty was thought to be a significant function of the cache-sexe, and the penis sheath can be considered a specific example in this respect.

A more likely interpretation of the function of the cache-sexe is the fulfilment of a group aesthetic and meeting standards of public dress. Not wearing a cache-sexe is a visible statement of a person's inability or unwillingness to participate in social interaction within the group, as when ill or in mourning.

In many societies, the main function of the cache-sexe appears to be one of drawing attention to secondary sex characteristics by concealing that part of the body.

A cache-sexe often represents more than a covering or a display. It is a unique form of material culture, that offers insight into the physical, social and aesthetic life of people in ethnic groups and cultures worldwide.

Foreskin covers (19th cent.), Zulu people, South Africa, priv. coll.

The displayed items are related to the new book by EAU History Office Chairman Prof. Philip Van Kerrebroeck. EAU members with the right entitlements can collect their copy at the EAU Booth while stocks last.

Female cache-sexe (ca. 1960), Kirdi people, Cameroon, priv. coll.

Yali men with penis cover and rotan rings, West New Guinea, Indonesia.

Penis cover (19th cent.), crocodile tooth and cowries on rotan skeleton, Middle Sepik area, Papua New Guinea, priv. coll.

The 2023 Desnos Prize Winner

By Prof. Javier Angulo Cuesta on behalf of the EAU History Office

Prof. Remigio Vela Navarrete

Professor Remigio Vela Navarrete is, without a doubt, one of the most internationally prestigious Spanish urologists. Among his merits, his important role in the development and implantation of kidney transplantation in Spain stands out. He is aged 85 years now and is in excellent health condition. He was born at the end of the summer of 1937 in a small municipality in the meadow of Extremadura, Salvaleón (Badajoz), land of conquerors. At the age of 12 he lost his mother, thus beginning his medical vocation.

He was intern at the Jesuit school of Villafranca de los Barros (Badajoz), where he stood out as a brilliant student. At the age of 24, he graduated from Universidad Complutense (Madrid) and joined Jiménez Díaz Institute to specialize as urologist at the age of 27. He was a disciple of two great teachers, Carlos Jiménez Díaz - founder of the institute - and Luis Cifuentes Delatte. From the former he received his excellent training as a clinician, and from the latter his love for urology. He carried out his professional practice at the Jiménez Díaz Foundation, where he became director of the department of surgery and head of urology.

Vela Navarrete participated in the very dawning of kidney transplantation in Spain. In 1965, he defended his doctoral thesis on renal homograft rejection and completed his training at the University of California in Los Angeles (UCLA 1965-66). He published his first scientific papers in the 1970s and began his long and successful research and teaching career at the Autonomous University of Madrid in 1974, being its first professor of urology since 1998 and currently emeritus professor.

He has been a consulting professor for the Bologna Pact and has led internationally recognised research programmes. He is a great communicator and has written numerous articles and books on kidney transplantation, urodynamics, erectile dysfunction, urinary tract infection, lithogenesis, pharmacology of voiding dysfunctions, and healthy aging in the male.

One of his most brilliant concepts was the prognostic value of translumbar pyelography and aspiration of urine that led to urodynamic study of upper urinary tract in chronic obstructive nephropathy.

In 2005 he received the Francisco Díaz medal, the highest award from the Asociación Española de Urología (AEU), of which he was General Secretary. He directed the Office of Strategy and Planning of the European Urological Association and was part of the first board of its History Office. He subsequently also promoted the creation of a History Office for the Spanish Association.

Over the years, Vela Navarette acted as curator of historical exhibitions and authored numerous books on history, also beyond urology. In 2022, the AEU published his most recent work, documenting the development of kidney transplantation in Spain. A digest of this book can be found in this year's edition of *De Historia* (Vol. 30). This marks his sixth contribution to the series. He is a regular speaker at the special History sessions during EAU annual congress, and also AEU and CAU meetings.

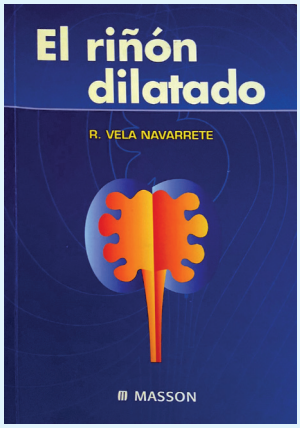
His affable character and charisma have allowed him to participate in countless human projects and international teaching and professional activities, all over the world. He is an Honorary Member of the Royal National Academy of Medicine since 2017. Remigio is a great Europeanist, and at the same time a lover of his land of Extremadura and his country, Spain.

We can define him as the best Hispanist of Urology, a scholar of the Spanish Golden Age, a deep connoisseur of Latin culture, a lover of chocolate and its history, and good cuisine. Possibly from his origin in the land of conquerors comes his great love for Latin America, always reciprocated. A true gentleman, lover of History and Culture, the best ambassador that - like good wines - has always gained over the years. Lucky in life and in love, a great conversationalist and a great worker, humble and rich simultaneously.

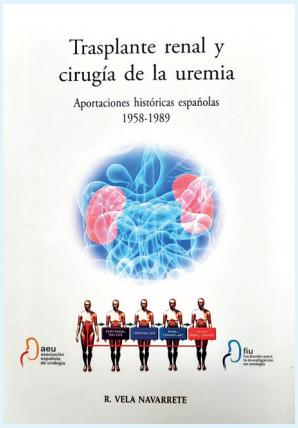
The surgical team of the first successful heterologous donor kidney transplant performed in Madrid, May 1965. From left to right: Remigio Vela Navarrete, Luis Cifuentes Delatte, Carlos Alférez Villalobos and Enrique García de la Peña.

Dear Professor, congratulations on this new and well-deserved award for your double passion, History and Urology.

Prof. Vela Navarrete will be honoured with the Desnos Prize at the EAU23 Opening Ceremony held in Auditorium 1 on Friday from 18:00.



Prof. Vela Navarrete's book on the prognostic value of translumbar pyelography and aspiration of urine that led to urodynamic study of upper urinary tract in chronic obstructive nephropathy.



Prof. Vela Navarrete's latest book on the history of kidney transplantation, Trasplante renal y cirugía de la uremia. Aportaciones históricas españolas 1958-1989 can be ordered via the Spanish Assocation of Urology: www.aeu.es

In conjunction with
EAU23 | MILAN, ITALY
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European Association of Urology

The EAU History Office at EAU23

Abstract Session 07:

History of Urology
Saturday, 11 March, 12:00 - 13:30
Pink Area, Coral 1

New books at EAU23
Free for EAU Members with the appropriate entitlements, while stocks last:

- *Cache-Sexe: Covered, uncovered, discovered* by Philip Van Kerrebroeck
- *De Historia Urologiae Europaeae* Volume 30, with Volume 29 available upon request.

Collect your copies at the EAU Booth in the Exhibition.

Special anniversary publication available for all delegates in your Congress Bag:

- *EAU:50 – The European Association of Urology celebrates its half-century* by Loek Keizer

50 YEARS