



**Welcome from Anne Daniels,
IAUN President**

We take great pleasure in welcoming you to this newsletter. We have created this publication with the intention of providing a space for Urology nurses to learn and read about developments in the field of Urology. From recent guidelines and publications, to annual urology conferences and upcoming events, we are delighted to share with you and hope you will join us as contributors in the future



UPCOMING EVENTS

Association for Continence Professionals (ACP) Irish National Conference.
27th February 2026 Mullingar Park Hotel

European Association of Urology Nurses. (EAUN) Annual Conference.
14th -16th March, Excel, London, UK

John Fitzpatrick, Irish Genitourinary, Cancer Conference 2026, The Aviva Stadium, Dublin. Date: TBC

Association for Continence Professionals (ACP) Conference. 11th – 12th May 2026, EICC, Edinburgh, UK.

British Association of Urology Nurses (BAUN) Study Day. June 6th, Holland House Hotel, Cardiff, UK

British Association of Urology Nurses. (BAUN) Annual Conference.
18th – 20th October 2026,
Convention Complex, Manchester, UK



2025 marked the 25th International Meeting of the European Association of Urology Nurses (EAUN25), it took place in Madrid, Spain from 22nd to 24th March 2025. To mark this momentous anniversary, the Board presented an exciting, comprehensive and innovative scientific programme. Here are some highlights for you...

Saturday kicked off by celebrating 25 years of the EAUN, exploring the development of the EAUN and an overview was provided of where the EAUN is moving in the future. The Endourology and Robotics Special Interest Group (SIG) presented on 'The evolving landscape of nurse-led practice within endourology and robotics'. The Bladder Cancer SIG discussed Salvage therapy in localised recurrence of bladder cancer and side effects, and the Continence SIG navigated current challenges in continence care. The first poster session was held as well as a session on creating and presenting posters.

Sunday had a good balance of both benign and oncological urology topics including Unravelling chronic bladder pain: diagnosis, urodynamics and enhancing quality of life, Uroflowmetry: How to understand the results and Integrative oncology: Combining complementary and conventional treatments. Integrative oncology is a field of medicine that combines conventional cancer treatments with complementary therapies and supportive care approaches to address the physical, emotional, and spiritual needs of cancer patients. There was an EAUN - ESU Course on the Diagnosis and management of acute urologic presentations. This covered a wide range of acute urological conditions and educated attendees on their diagnoses and treatments. The course addressed various conditions including testicular pain, acute penile problems, hydronephrosis, urinary retention and Fournier gangrene. The day concluded with the Nursing Research Competition, research plans were presented and discussed by a jury. This was an interactive learning session for pitfalls and opportunities in setting up nursing research.

On the final day there was state-of-the-art Lectures on the upcoming emerging landscape of systemic therapies for metastatic urothelial cancer and on Polyuria: Urological causes and treatment. There was an innovative thematic session on the Management of Sexual Dysfunction and Promotion of Sexual Wellbeing for all genders. It provided a better understanding of sexual dysfunction in all genders as well as discussing common pitfalls and strategies to minimise difficulties in discussing treatment options. As always the day concluded with the all important awards ceremony and the general assembly.

Lynn Casey ANP, TUH

Fundamentals in Benign Urology

*Rachael Dalton & Sonya Bowen, ANP,
St James Hospital*

The inaugural fundamentals in benign urology nursing study day took place in St James Hospital in Dublin on the 28th of November 2025. The study day was developed and facilitated by the ANPs and CNSs within the Dublin midlands hospital group. Nursing professionals with an interest in urology across the country were invited to attend. 27 delegates attended this event with participants travelling from as far as Cork!

The aim of this study day was to provide healthcare professionals with updated knowledge and practical skills in the management of common benign urological conditions. Our goal was to enable participants to offer evidence-based, holistic, and person-centred nursing care. It is essential that all nursing staff have a good understanding of the fundamentals in caring for patients with urological conditions. To support this, a recent study completed by the urology medical team in association with the endocrinology department at St James, postulated that there was a desire for further education in relation to the diagnosis and management of benign urological conditions (Khan et al 2024). Considering this and the fact that urinary tract infections are the second most common hospital acquired infections in Ireland (HSE, 2023), it is clear that a bespoke urological nursing study day is a professional development requirement for all nursing staff.

The study day began with an opening address from the Director of Nursing at St James Hospital, Sharon Slattery. The morning session began with a review of Genitourinary anatomy facilitated by Rachael Dalton ANP. This was followed by an overview of male urological conditions presented by ANP Niamh Rhodes, and an overview of female urological conditions facilitated by Ms Lisa Smyth, Consultant Urologist.

The mid-morning session began with an insightful look into urinary tract infections delivered by ANP Tanya Conroy, followed by an important review of the management of patients with urosepsis provided by Bernie Waterhouse, CNM2. We were delighted to welcome Ms Ann Marie Kelly, CNS in continence care who facilitated an interactive session on managing incontinence.

Following lunch, Lilia Benfedda and Kristia Segovia, CNSs presented the delegates with an update of post-op care of patients following urological surgeries. This was nicely followed by a review of urinary drainage devices and nephrostomy care competently delivered by Sonya Bowen, ANP, and Orla Croke, CNS.

The afternoon session saw our delegates divide into prearranged groups for our workshop sessions. The workshops afforded delegates an opportunity to finetune their clinical skills with updates on incontinence care products and their correct use, intermittent catheterisation, product update, troubleshooting and a catheter and nephrostomy care workshop. The study day ended with a fun online interactive quiz, in which one lucky group won a variety of chocolates for their efforts.

Feedback from the event was largely positive with 100% of delegates recommending the study day to others, while 85% felt their urological knowledge had improved. Participants would have liked more time allocated to the workshops, and this will be taken into consideration when planning next year's event.

A special thank you to all the speakers, it's not easy standing up in front of an audience! Finally thank you to Marie and Debbie from Coloplast who facilitated a workshop and provided refreshments throughout the day.



L-R: Lilia Benfedda, Niamh Rhodes, Sonya Bowen, Orla Croke, Tanya Conroy, Rachael Dalton.

References

- HSE (2023) point prevalence survey of healthcare associated infections and antimicrobial use in European acute care hospitals. Available at [ww.hspc.ie](http://www.hspc.ie)
- Bowers,K.,Khan,J.,Manecksha,R.,Sullivan,J.,Owens,L. (2024). Lower urinary tract dysfunction in the diabetic population: diabetes specialist's knowledge base, clinic practice patterns and patient survey. Endocrine abstracts. P119.



EAUN26 in London, UK from 14th-16th March 2026, is set to be an incredible meeting of urology professionals, offering a wealth of knowledge, networking, and a chance to be part of the global urology community. The three-day event brings together urological nursing professionals from across Europe and beyond. The scientific programme will cover a wide range of clinical and practical topics, including biomarkers, renal cancer treatment strategies, and the role of immunotherapy in metastatic disease. Additional sessions will explore nurse-led clinics, psychosexual counselling, care for frail patients, and intercultural aspects of healthcare.

EAUN26 features plenary and thematic sessions, poster tours, hands-on training, case discussions, and hospital visits. Awards will be presented for outstanding contributions in both scientific and practice-orientated categories.

For the social side, delegates can join us at the Nurses' Dinner on 13th March, the perfect place for networking and enjoying the company of colleagues worldwide. This also gives everyone an opportunity to meet the Board, SCO and SIG members, and guest lecturers. **Registration is through the online system.**

For a comprehensive overview of the full programme, please visit www.eaun26.org
Register before 10th February to secure your place.



Professional Development

RSCI Renal Nursing PgCert :

<https://www.rcsi.com/dublin/postgraduate/taught-courses/renal-nursing-cert/course-details>

Ulster University: Advancing Care for People with Urological Disorders :

<https://www.ulster.ac.uk/courses/202324/advancing-care-for-people-with-urological-disorders-32645>

Ulster University: The Fundamentals of Adult Continence Promotion :

<https://www.ulster.ac.uk/courses/202324/the-fundamentals-of-adult-continence-promotion-32648>

NHS Trust: Certificate in Urodynamics Course :

<https://www.nbt.nhs.uk/bristol-urological-institute/bui-education/urodynamic-courses/certificate-urodynamics-course>

HSE: Nurse and Midwife Medicinal Product Prescribing
:<https://healthservice.hse.ie/about-us/onmsd/onmsd/specific-programmes/nurse-midwife-medicinal-product-prescribing.html>

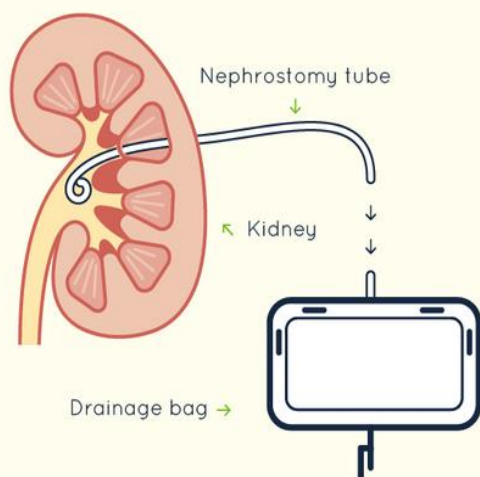
Special Interest Article: Nephrostomy Tubes

A nephrostomy is a tube placed through the skin into the kidney to allow urine to be drained via a different pathway. Nephrostomy insertion is sometimes necessary if the normal route of urine drainage is unavailable, for example, due to a stone or tumour. If the drainage pathway from the kidney to the bladder becomes obstructed at any part, then a nephrostomy can offer an alternative means for passing urine.

When the flow of urine is blocked, it may lead to dilation of the collecting system of the kidney, called hydronephrosis. The resulting back pressure can lead to progressive kidney damage and deterioration of renal function. In some cases, the stagnant urine may also become infected, with potential for the development of sepsis.

Insertion of a nephrostomy usually takes place in the Interventional Radiology department, with ultrasound and fluoroscopy guidance. Antiseptic cleaning solution is applied to the skin over the kidney, sterile drapes placed around the site, and local anaesthetic is injected into the skin over the kidney. A needle is inserted, and contrast is injected to provide images. A wire is placed and then the nephrostomy tube is placed over the wire. Once inserted, it is secured at the skin, and a drainage bag attached.

NEPHROSTOMY



Anna Loughlin, ANP Urology, St. James Hospital

A dressing is placed at the skin site, usually with a securing device (such as DrainGuard or Griplok), and covered with a water resistant dressing.

Most patients will pass some blood in the urine for a few days, and some may require mild pain relief for a day or two. Education is crucial for the patient or carer to understand what to expect, and how to care for the nephrostomy. The patient or carer needs to understand how to empty and change the drainage bag, how to flush the tube (if indicated), the importance of hand hygiene when accessing the nephrostomy, and managing fluid intake. Dressings are usually changed weekly, and patients may need to be linked in with local services such as the community RGN.

A nephrostomy tube has a life span of approximately 3 months, but how long it is required for each patient depends on the pathology causing the original obstruction. If the obstruction is relieved, for example with surgery, a nephrostomy may be removed. If it is required for longer than 3 months, it is replaced to prevent any blockage or damage. Evidence shows that long term nephrostomy insertion can negatively affect quality-of-life for patients, impacting their mobility, sleep, self-care capacity, and sexual function.

Nephrostomy E-course is available from the European Association of Urology Nurses at <https://nurses.uroweb.org/education-events/education>, which is free for members.

EAUN On-demand education – a selection of what's available

Intravesical Instillation Guidelines: Whats new.

E-course: Clinical strategies for reducing UTIs in intermittent catheterisation: From guideline to the bedside.

E-course: Urinary incontinence -the "superunknown"

E-course: Pigtail Nephrostomy Catheter

E-course: Follow-up care after radical cystectomy in primary care.

E-course: Pelvic organ prolapse and impact on urinary function

E-courser: Female sexual function - anatomy, physiology and impact of urological cancers.

Excellence in Urological Cancer Care – NCCP, Quality, Risk and Audit Forum 2025

November 7th 2025, John Durkan Theatre, Trinity Centre for Health Sciences, St James's Hospital, Dublin.

The NCCP National Urological Cancer Quality, Risk and Audit Forum brought together leading clinicians, nurses, researchers, and healthcare professionals to share insights and shape the future of urological cancer care in Ireland. This annual event serves as a cornerstone for quality improvement, evidence-based practice, and multidisciplinary collaboration. The morning session opened with Ms Fiona Bonas, Assistant National Director, NCCP, providing a strategic update on the Cancer Strategy 2017–2026, followed by Mr Paul Sweeney, National Urological Cancer Clinical Lead, who outlined progress within the Urological Cancer Clinical Leads Group.

Highlights included:

Professor Philip Cornford delivering a keynote on Prostate Active Surveillance, drawing on his experience as Chair of the EAU Prostate Cancer Guideline Panel.

Updates on NCCP prostate cancer guidelines from Dr Eve O'Toole, and KPI reporting from Dr Ian Dawkins.

Dr Therese Redaniel presented the latest NCRI Urological Cancer Report, while Mr David Galvin discussed Ireland's role in the EU PRAISE-U initiative to broaden cancer screening.

Clinical updates featured Ms Louise McLoughlin on intravesical gemcitabine and docetaxel bladder cancer therapies and Dr Triona McCarthy on cancer genetics.

The afternoon focused on survivorship and innovation, with Ms Clare Leatham reviewing the Stratified Self-Managed Follow-Up (SSMFU) pathway. Interactive workshops fostered practical learning across radiology, surgical pathways, nursing practice, and data management. Notably, the nursing workshop led by Anne Daniels, Lynn Casey and the Bladder Cancer Working Group explored standardising intravesical therapy delivery through collaboration, reflecting the growing emphasis on consistency and safety. The forum concluded with a roundtable discussion and closing remarks from Mr Paul Sweeney, reinforcing NCCP's commitment to quality, data-driven decision-making, and patient-centred care. This event underscored the power of multidisciplinary teamwork and continuous improvement in delivering comprehensive evidence based urological cancer services.



Figure 1: Nurse attendance at the NCCP Forum from across Ireland.

Anne Daniels, ANP Urology UHW

IPCOR

Wasfa Farooq, David Galvin

The Irish Prostate Cancer Outcomes Research (IPCOR) is a multi-institute longitudinal prostate cancer clinical quality registry and biorepository, collecting patient reported outcome measures at regular timepoints, along with clinical data from medical charts and biological specimens. Staff at hospital sites across Dublin and Galway explicitly consent men undergoing diagnostic biopsy for prostate cancer. Hospital charts of willing men are accessed for data abstraction into a comprehensive cloud-based digital registry software. Questionnaires are dispatched at diagnosis and regularly as their treatment progresses. The Clinical data and Patient outcome data are fed back to the treating doctors and nurses to personalise and improve their care. Our data also supports hospital management in improving use of resources and in driving guideline adherence. We are grateful to our Lived Experience Advisory Panel (LEAP group) who advise and direct our research program. The first phase of IPCOR, 2016 to 2020, manually collected data through the National Cancer Registry Ireland on an expanded clinical dataset across 16 hospitals. This data was collected under a consent waiver and is being utilised for secondary data analysis in a pseudonymised manner. Starting in 2025, funding was granted by Movember to implement this second phase of IPCOR across 6 sites: Mater Misericordiae University Hospital, Mater Private Hospital, St Vincent's University Hospital, St Vincent's Private Hospital, Galway University Hospital and St Luke's Radiation Oncology Network. Movember also provides and supports the Dacima-based registry software. All IPCOR data is owned by UCD. Ultimately our ambition is to become the central source for clinical and outcome data, translational research and patient support for prostate cancer in Ireland.

Further information can be followed on www.ipcor.ie.

Advancing Men's Health in Ireland

Last September, Movember Ireland worked with leading researchers and partners to launch The Real Face of Men's Health report, a deep dive into the state of men's health across Ireland. The findings were stark: in 2023, male life expectancy stood 3.5 years lower than females, with men 40% more likely to die prematurely from largely preventable causes. The economic cost of men's health? Over €1 billion annually, with €716 million potentially preventable. In partnership with men's health organisations, health sector leaders, families, celebrities and the Movember community we didn't just document the problem - we supported a movement.

Progress in 100 Days

On the 22nd of October in a historic first, Minister for Health Jennifer Carroll McNeill led the inaugural Statements on Men's Health in the Dáil. Ministers and TDs from across the political spectrum shared personal experiences and constituency concerns, directly referencing the report and committing to meaningful action.

Showcasing What Works

The report doesn't just present new data - it showcases proven interventions and community initiatives happening across the country. Through case studies, we highlight what actually works in supporting men's health, from community-based outreach programmes to mental health initiatives that meet men where they are.

Our Work in Cancer Care

We're particularly proud of our prostate cancer initiatives. Through IPCOR 2 with UCD, we're revolutionising how clinical data and biological samples improve cancer care for Irish men. With €4.1M invested globally in 18 equity-focused grants, including In Ireland; the University Hospital of Limerick's grant will gather prostate cancer experiences of men 60+ living in rural areas in the Midwest. Their findings combined with existing research will create solutions to address patient's unmet needs in prostate cancer care. Last June's a sexual health convening brought together 27 healthcare experts - urologists, specialist nurses, psychologists, and lived experience representatives to implement our world-first Clinical Guidelines for Sexual Health and Prostate Cancer. We've since established Ireland's first Sexual Health Advisory Group to ensure clinicians routinely address intimacy concerns, recognising that 8 in 10 men with prostate cancer report poor sexual function, yet less than half receive support.

Moving Forward Together

From research to policy, clinical practice to community support, we're partnering with communities and healthcare leaders to change the face of men's health - creating a healthcare system that truly serves Irish men and those that love and support them. This is just the beginning.

To find out more and download our report, visit:
<https://ie.movember.com/movember-institute/the-real-face-of-mens-health-report>

PRAISE-U

David Galvin

The EU Council recommendation in December 2022, included prostate cancer as a suitable target disease for organised screening, and invited countries to proceed with pilots and further research. An EU-wide consortium involving 14 countries and 26 Institutions has been established under the PRAISE-U initiative and five pilot programs have been established including one in Ireland. The objectives are to bring together a range of national societies and experts and establish a national prostate cancer screening model and to pilot it. Ultimately the plan is to amalgamate all EU pilot data and to provide a report to the EU Commission in 2026.

During the pilot, the opinions of all stakeholders before, during and after screening is being sought. In addition, in collaboration with Movember, we are assessing the impact of a digital media campaign on recruitment and men's awareness of prostate cancer. To date, nearly 7500 men have been invited to participate in the Waterford, Mater and St Vincent's hospital catchment areas since March 2025. Unique to Ireland, a home passed finger prick PSA test is being piloted. To date 1350 men have returned their PSA tests. Based on this PSA value, men are risk stratified with 88% of men having normal PSA values (<3). Those with a PSA value > 3 are directly referred to the local Rapid Access Clinic, where the decision to proceed with a MRI scan is based on the ERSPC prostate risk calculator, and the decision to biopsy is also based on a risk stratification process. To date this pathway has demonstrated a 80% probability of detecting clinically significant prostate cancer, and a 40-100% reduction in the need for a biopsy in PIRADS 3 lesions.

A meeting next month in Brussels will examine the PRAISE-U findings and make recommendations on Europe wide prostate cancer screening.

Committee Members:

Anne Daniels: President

Rachel Dalton: Vice President

Liz Boyce / Lynn Casey: Treasurer

Natasha King: Admin /Secretary

Hannah Graham

Donnacha Shanahan

Sheila Kiely

Anita Cahill

Caroline Ahern

Catherine McGarvey

Anna Loughlin

Contact:

iaunurses@gmail.com

www.iaun.ie