The University of Michigan Department of Urology

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Recap of CopMich 2016

Urology Department Faculty and Staff

5 Items, 10 Minutes

One of the often-overlooked areas where our Department of Urology excels is in the efforts to build relationships with professional partners. These efforts are not undertaken with a short term payoff in mind; rather, they are done with the goal of building long-lasting, mutually beneficial support networks that advance the field of urology as a whole.

In today's edition of What's New, we hear about one of those relationships. Dr. Dana Ohl's work with Dr. Jens Sønksen began as a simple professional appreciation for each other's' work, as well an opportunity for each doctor to share their respective area of expertise. The working relationship has now grown to include regular visits to Denmark and Michigan, support for each other's respective departments, and a collaborative, international conference that helps to drive the field of urology forward.

These accomplishments exemplify how partnerships support urologic innovation and excellence. The journey to improve does not have to be undertaken alone, and when we work together - regardless of geographic or institutional boundaries - the entire field benefits.

Now let's hear from Dr. Dana Ohl.

-Eric Anderson, Marketing and Communications Specialist

1. Background of the University of Michigan/University of Copenhagen Collaboration

(In case you are wondering, the title FECSM exemplifies my involvement with European Urology—FECSM is a title given to individuals who are Board Certified in Sexual Medicine in Europe. "Fellow of the European Committee of Sexual Medicine)

When I first took over the faculty responsibilities of Andrology from Carol Bennett, one of my tasks was to build on the great foundation that she made in the area of electroejaculation (EEJ) in men with spinal cord injury (SCI). She had achieved the first pregnancy in the US utilizing electroejaculated sperm and was really establishing Michigan as a center of excellence in this area.

We continued the work with EEJ, but had absolutely no success with another procedure gaining popularity in ejaculation induction, that of penile vibratory stimulation (PVS). At the AUA meeting 1994, a young Danish doctor named Jens Sønksen made a presentation that seemed to have answers. He found that the amplitude of the penile vibrator used had to be tightly controlled to get high ejaculation rates. After his presentation at the AUA, he was invited to come to Michigan and "PROVE IT".

Dr. Sønksen:



Well, he did just that. We lined up our prior PVS failures for him, and with his amplitude settings, we had a very high ejaculation rate in this patient population. The other part of the agreement was that I would visit his hospital and teach him the technique of EEJ. This early interaction led to our joint decision to collaborate in this developing area.

Our first collaboration was a one year research fellowship for Dr. Sønksen at Michigan. In addition to collating data on clinical patients, we did prospective comparative studies on semen quality, direct comparisons of EEJ and PVS, and created a canine model of SCI male fertility. During that very productive year, we worked with many individuals, including Ed McGuire, Gary Wedemeyer, Thomas Dam (flow cytometry expert from Denmark), and the ULAM people, as well as the staff of Urology. Many papers came out of that year, and served as the basis for Dr. Sønksen's PhD and Doctor of Medical Science degrees from the University of Copenhagen.

2. Ongoing Collaboration 1994-present

Since the early years, there have been multiple projects performed in collaboration either at Michigan or in Copenhagen. From this, we have published 31 peer-reviewed articles, and 19 solicited chapters. We have directed 14 international symposia on the topics of spinal cord injury infertility and also in penile prosthesis surgical techniques.

One recent publication:

Spinal Cord (2012) 50, 63-66 © 2012 International Spinal Cord Society All rights reserved 1362-4393/12



ORIGINAL ARTICLE

Vibratory ejaculation in 140 spinal cord injured men and home insemination of their partners

J Sønksen¹, M Fode¹, D Löchner-Ernst² and DA Ohl³

From the early days of stimulation for the purpose of getting an ejaculate, further observations have allowed us to branch out into other areas, using transcutaneous surface vibration, to investigate effects on muscle spasticity, urinary incontinence and even recovery of post-prostatectomy erectile dysfunction. Three PhD students have completed their degrees examining novel uses of vibration, with three more entering training.

One example of this:



Functional Urology

Penile vibratory stimulation in the recovery of urinary continence and erectile function after nerve-sparing radical prostatectomy: a randomized, controlled trial

Mikkel Fode*, Michael Borre[†], Dana A. Ohl[‡], Jonas Lichtbach[§] and Jens Sønksen*

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We have also had research fellows and clinical observers throughout the years visiting Michigan:









3. CopMich2015 is born

With the great success we realized through the years, others began asking whether Danish collaborations might benefit their fields as well. The most persistent in this was our Head of Urologic Oncology, Ganesh Palapattu. While we were exploring ways to get Ganesh to travel to Denmark to meet people, we noticed that there was a lot of interest in work being done at Michigan in other urological areas, including quality of care and outcomes research. Finally, Professor Sønksen himself, having seen the use of midlevel providers at the University of Michigan, felt this was an important collaboration area, as well. Since there were so many areas to address and compare to see if collaborations were possible between Denmark and Michigan, we felt the most efficient way to bring this together was a face-to-face conference.

During the 2015 European Society for Sexual Medicine meeting in Copenhagen, the CopMich planning committee of Jens Sønksen, Mikkel Fode, Christian Jensen and Dana Ohl met in the Bella Sky Hotel to create the conference. We agreed on several things:

- -CopMich would be the name
- -The first meeting will be held in Copenhagen, with future meeting alternating between Ann Arbor and Copenhagen
 - -Michigan faculty would pay their own travel expenses
 - -Facility costs would be borne by U-Copenhagen
- -Topics chosen were Andrology/Infertility, Oncology, Gamete Preservation in Cancer Patients, Advanced Practice Nursing, and Quality of Care Assessment

-The meeting would be educational for the attendees, with a high priority placed on specialty-specific breakout sessions to discuss collaborations

Bella Sky Hotel, Copenhagen:



4. CopMich2015, Copenhagen, November 20-22, 2015

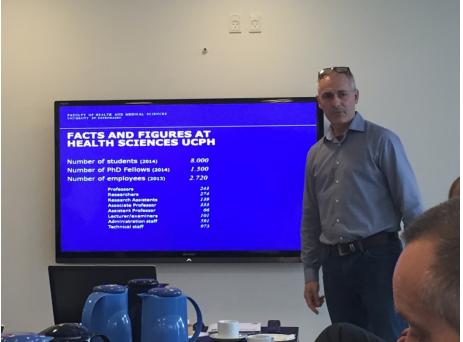
Ten Michigan faculty participated in the meeting, along with 17 Scandinavian faculty and 9 trainees. Michigan faculty included:

-Urology: Jim Dupree, David Miller, Jeffrey Montgomery, Dana Ohl, Ganesh Palapattu, Susanne Quallich

-OB-GYN: Lisa Green, Timothy Johnson, Molly Moravek, Tariq Shah

On Day 1, the Michigan faculty had a tour of the hospital and the medical school. This included several meetings with hospital director and the upper echelon of medical school administration:





During the meeting, there were 100 attendees. The meeting took place in the Scandic Hotel Copenhagen:



Over the course of two and half days, we had lectures:



Point-counterpoint sessions:



Advanced Practice Nursing discussions:



Trainee presentations:



Lively Breakout sessions:



The course was highly rated by attendees:

General Evaluation:		Strongly Agree	5	4	3	2	1	Strongly Disagree	FINAL SCORE (n=30)
1.	The educational activity was well organized.	5	4		3		2	1	4,8
	The subject matter presented was relevant								4,4
2.	to my current practice.	5	4		3		2	1	·
	The activity presented was consistent with								4,9
3.	what had been advertised.	5	4		3		2	1	•
	The content was balanced (free of								4,8
4.	commercial bias).	5	4		3		2	1	•

So, at the end, we felt we had a very successful first rendition of a new concept in collaboration in several areas. The breakouts yielded many ideas that I hope will bear research fruit in the future, and possibly change health care policy in Scandinavia, as well. We are discussing where to go from here, to continue this concept and look forward to the next meeting being held in Ann Arbor.

5. Not all work

Most of the Michigan people had not yet visited Copenhagen, so we organized some time in seeing the town, including Tivoli Gardens and Nyhavn (new harbor area), as well as a gala dinner at the Danish Medical Society.

So, it is safe to say we had fun, as well. I will end with some pictures:











