

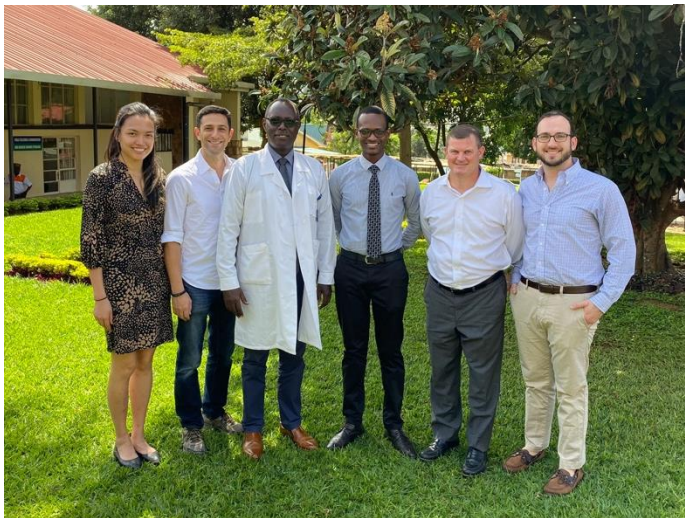


# Fellows' Update

## Applications open: Annual fellow's scholarships for reconstructive urology trip to Kigali Rwanda, May 29<sup>th</sup> – June 5<sup>th</sup> 2020. Applications due March 1<sup>st</sup>.

An interval GURS / IVUMed trip, led by Frank Burks, MD, went to Kigali in November of this last year. He reported a continued commitment to learning reconstructive urology, particularly focused upon the treatment of urethral strictures and pelvic fracture urethral injury. Accompanying Dr. Burks was Dr. Daniel Stein, and IVUMed scholar Dr. Jillet Han.

### Frank Burks, MD and the GURS / IVUMed team



Frank Burks reported “the primary site for our trip was Kigali University Hospital (CHUK). CHUK is the largest hospital in the country and the main referral hospital for tertiary care. Two operating rooms and staff were made available for our week-long workshop. An intense week was well planned by the Rwandan surgeons with two to three operations per room per day. A total of 25 cases were performed in 4 and a half days of operating.

### Operating at CHUK



Our team worked with many talented residents and staff at CHUK, but the attending most eager to learn was Dr. Emile Rwamasirabo a young and engaged attending urologist at CHUK. Dr. Rwamasirabo had evaluated each patient and obtained appropriate imaging for the planned procedure.

This year a trip will be co-sponsored by GURS and IVUMed and have a similar format to last year. **The trip is scheduled May 29<sup>th</sup> -June 5<sup>th</sup>. Two scholarships are available through GURS and applications are now open. The deadline for applications are March 1<sup>st</sup>. Selected applicants will be notified by March 15<sup>th</sup>.**

Please follow this link to apply: [Fellow Scholarship Application GURS Rwanda.](#)

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**Save the Date:** Mark Your 2020 Calendars Now

**GURS Academic Congress 2020**  
**Montreal, Quebec, Canada**  
**October 5–7, 2020**  
**Hotel Omni Mont-Royal**



**Abstract submission: opens March 1<sup>st</sup>**

Consider submission of your best work for poster, video, oral, or podium presentations. The podium presentations will be limited and represent the most impactful research presented at the meeting. Podium presentations will involve publication of a manuscript in *Urology*, as well as comments and review from the meeting itself.

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**Reminder:** Please keep accurate [operative logs](#) that will need to be submitted at the end of fellowship

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**Featured Article:** Drs. Fergus and Breyer present a nice qualitative [evidence summary and review](#) of the pathophysiology underlying the enigmatic entity of lichen sclerosis this month in *Urology*.



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# Pathophysiology, Clinical Manifestations, and Treatment of Lichen Sclerosus: A Systematic Review



**Kirkpatrick B. Fergus, Austin W. Lee, Nima Baradaran, Andrew J Cohen, Bradley A. Stohr, Bradley A. Erickson, Nnenaya A. Mmonu, and Benjamin N. Breyer**

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<b>OBJECTIVE</b>	To elucidate current understanding on the pathophysiological mechanism of genital lichen sclerosus (LS), urologic manifestations, and treatment options.
<b>MATERIALS AND METHODS</b>	The Medline/PubMed and Embase databases were systematically reviewed for publications pertaining to LS. After applying inclusion and exclusion criteria, references were assessed for relevance to the pathophysiology, presentation, and treatment of LS by title and abstract review by 2 independent reviewers, yielding 186 articles for assessment.
<b>RESULTS</b>	The contemporary understanding of the epidemiology and histology of LS is reviewed herein. Additionally, we explore in detail the 3 hypotheses regarding the pathophysiological mechanism contributing to disease presentation: infectious etiology, primary immune dysregulation, and the isotraumatopic response. We summarize the available biological evidence supporting each hypothesis. This discussion provides context for understanding LS morbidity and may spur new avenues of research. For the clinician, we review the clinical presentation of disease, including the risk of progression to squamous cell carcinoma. The current medical and surgical treatment options are also detailed.
<b>CONCLUSION</b>	LS remains a potentially insidious disease which may lead to debilitating urinary and sexual dysfunction. Cross disciplinary research should aim for earlier detection, as well as more effective and durable treatment. The exact cause of LS remains unknown. UROLOGY 135: 11–19, 2020. © 2019 Elsevier Inc.

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