

Round table: The Road to successful intervention

Live from the studio: Patient Information Session



Friday 9 July
18:00 - 19:00

Location Virtual Room 2

Chairs H. Van Poppel, Leuven (BE)
E. Rogers, Renmore, Galway (IE)

This round table discussion has been funded by Ferring Pharmaceuticals. The programme of this online activity has been independently developed and approved by the EAU Patient Office.

Learning objectives

The objective of the roundtable is to discuss the shared responsibilities of both the healthcare provider and patient during a patient's care pathway. Do healthcare providers ask the right questions during intake? Do patients provide all the information the healthcare provider needs, such as a detailed medical history and anything that could be relevant to the decision-making process, as to what care pathway to take?

18:00 - 18:02

Welcome and introduction

18:02 - 18:18

Awareness, education and communication

18:02 - 18:04

What did you know about PCa?
S.A. Clark-Wehinger, Meudon (FR)

18:04 - 18:06

Why does our general male population know so little about the prostate and prostate cancer?
M. Rogan, Galway (IE)

18:06 - 18:08

How did you find out about PSA testing?
S.A. Clark-Wehinger, Meudon (FR)

18:08 - 18:10

Do you discuss the possibility of PSA Testing with your patients?
M. Rogan, Galway (IE)

18:10 - 18:12

Tell us more about your communications with your primary physician
S.A. Clark-Wehinger, Meudon (FR)

18:12 - 18:14

How should a patient prepare for intake?
M. Rogan, Galway (IE)

18:14 - 18:18

Discussion

18:18 - 18:32

Early detection

18:18 - 18:20

What is PSA testing and why is it so important?
R.J.A. Van Moorselaar, Amsterdam (NL)

18:20 - 18:22

Would you consider a PSA test, and if so, why? If not, why?
M. McRory, Roscommon (IE)

18:22 - 18:24

Do you know what a digital rectal examination (DRE) is?
M. McRory, Roscommon (IE)

18:24 - 18:26

Why is a DRE important?
R.J.A. Van Moorselaar, Amsterdam (NL)

18:26 - 18:28

What are the financial consequences of early detection vs. late detection?
R.J.A. Van Moorselaar, Amsterdam (NL)

18:28 - 18:32

Discussion

18:32 - 18:44

Active surveillance

18:32 - 18:34

What is active surveillance and when is it recommended as a treatment option?

L. Moris, Leuven (BE)

18:34 - 18:36

Did you have a good understanding of what active surveillance entails?

C. Pieri, Milan (IT)

18:36 - 18:38

When do you change from AS to active treatment? Triggers?

L. Moris, Leuven (BE)

18:38 - 18:40

How did it make you feel when your doctor recommended active surveillance?

C. Pieri, Milan (IT)

18:40 - 18:44

Discussion

18:44 - 18:56

Treatment

18:44 - 18:46

What is ADT and when is it recommended as a treatment option?

A.S. Merseburger, Lübeck (DE)

18:46 - 18:48

Treating prostate cancer leads to many undesirable side effects. In your experience with androgen deprivation therapy, which specific side effects cause patients and their loved ones the most upset?

R. Wassersug, Vancouver (CA)

18:48 - 18:50

Do you address ADT-related CV risks and other frequent comorbidities with your patients and if so, to what extent?

A.S. Merseburger, Lübeck (DE)

18:50 - 18:52

Were you made aware of the cardiovascular risks? Were you made aware of medical tests that assess one's risk of having or developing cardiovascular disease?

R. Wassersug, Vancouver (CA)

18:52 - 18:56

Discussion

18:56 - 19:00

Closing remarks