

UROLOGIESE BYDRAES

In hierdie uitgawe van die *Tydskrif* publiseer ons sommige van die urologiese bydraes wat gelewer is by geleentheid van die Tweede Kongres van die Urologiese Vereniging van Suid-Afrika gehou in Kaapstad gedurende Julie 1958. Die Kongres was suksesvol en is goed bygewoon deur uroloë sowel as deur besoekers uit ander Groepe. Ook het ons die voorreg gehad om 'n paar Amerikaanse kollegas by ons te hê. Ons besoekers uit Amerika het veral daartoe bygedra om belangstelling te wek vir die program van die Kongres wat 'n groot omvang van onderwerpe ingesluit het. Alhoewel die Kongres in die eerste plek 'n urologiese kongres was, was dit die beleid van die organiseerders om onderwerpe te kies en sprekers te nooi wat belangstelling sou wek by lede van verskeie ander Groepe—spesialiste sowel as algemene praktisyns.

Die tema wat op die eerste dag behandel is, in die vorm van 'n ope sitting, was gewasse van die blaas. Waardevolle bydraes tot hierdie betwisbare onderwerp is gelewer. Die vergadering was baie gelukkig om dr. Wm. A. Milner van Albany, V.S.A., hier te kon hê. Hy het 'n baie goedgeokumenteerde oorsig gegee van sy uitgebreide ervaring by die behandeling van hierdie dodelike siekte deur middel van betreklik konserwatiewe metodes van transuretrale reseksie en inplanting van radonmiddels.

Sedert die afgelope oorlog het die Mediese Vereniging gereelde tweejaarlikse algemene kongresse gehou en dit het die spesialistegroep 'n goeie geleentheid gegee om onafhanklike byeenkomste van hul eie Groepe in die jare daartussen te reël. Die eerste byeenkoms van die urologiese Vereniging is in 1956 in Port Elizabeth gehou en die tweede in Kaapstad in Julie 1958. Die volgende byeenkoms sal waarskynlik in 1960 in Johannesburg plaasvind en die verwagting is dat 'n hele aantal oorsese kollegas weer ooreed sal kan word om die byeenkoms by te woon.

As ons dit in gedagte hou dat spesialis-uroloë eintlik net in groot stede kan werk, waar hospitale is wat ten volle uitgerus is met moderne snykundige apparaat, het Suid-Afrika 'n betreklike groot aantal mense wat hulle werk beperk tot die genitaal-urinêre stelsel. Die teenwoordige lidmaatskap van die Groep beloop byna 40 lede insluitende

3 geaffilieerde lede van Rhodesië. Dit is eintlik maar 'n klein gemeenskaplike in vergelyking met Europese en Amerikaanse standaarde en die Urologiese Groep van Suid-Afrika sou miskien as ambisieus bestempel kon word omdat hulle besoekers van oorsee uitnooi om urologiese kongresse in hierdie land by te woon. Die toenemende stroom medici wat Suid-Afrika gedurende die afgelope jare besoek het, laat 'n mens egter tot die gevolgtrekking kom dat ons land 'n besondere aantrekkingskrag het vir ons besoekers.

Die Amerikaanse besoekers by die Kongres in Kaapstad het die gasvryheid wat hulle hier geniet het hoog op prys gestel en hulle was veral geesdriftig oor die peil wat gehandhaaf is by die besprekings. Ons het alle rede om te dink dat die voorgestelde Kongres in 1960 betreklik goed bygewoon sal word deur oorsese uroloë en dat dit moontlik die begin sou kon wees van gesamentlike kongresse wat meer dikwels gehou kan word soos dit die geval is met kongresse gereël deur die Britse Vereniging van Uroloë en die Kanadese Urologiese Vereniging.

Chirurge dwarsoor die wêreld het te staan gekom voor vermeerderde werkgeleenthede wat moontlik gemaak word deur moderne vooruitgang—en die urologiese chirurg is hier geen uitsondering nie. Sy gebied is ook steeds aan die uitbrei en hy moet op hoogte bly van sulke probleme soos endokrinologie, elektrolitiese chemie, kongenitale anomalieë en geriatric. Die probleem van hoe om op hoogte te bly met die moderne ontwikkeling kan op baie maniere opgelos word, byvoorbeeld deur te lees, deur navorsingswerk te doen, deur te reis en deur middel van omgang met kollegas op kongresse. Daar is baie probleme verbonde aan navorsingswerk in Suid-Afrika—veral probleme van ekonomiese aard. Oorsese reise is luukse wat min mense kan bekostig. Dié gaping word vir die meeste mediese praktisyns deur leeswerk gevul en tog is leeswerk alleen nie genoeg nie. Ons het altyd die behoefte aan die prikkeling van gedagte-wisseling wat veral op kongresse moontlik is.

Die uroloë moet met hulle ondernemings van die verlede gelukkigewens word en dit sal 'n werklike prestasie wees as die Kongres van 1960 tot gesamentlike urologiese kongresse binne die Gemenebes sou kon lei.

UROLOGICAL CONTRIBUTIONS

In this issue of the *Journal* are published some of the papers which were presented at the Second Congress of the Urological Society of South Africa held in Cape Town during July 1958. This was a well-attended and successful Congress of urological surgeons, enhanced by the presence of visitors from other Groups, and graced by a sprinkling of American colleagues. In particular, our visitors from America added interest to the full and varied programme which covered a wide range of subjects. It was the policy of the organizers to choose such subjects and invite such speakers that the

field covered, although mainly urological, was wide enough to attract both specialist and general members of several other Groups.

The first day of the Congress took the form of a plenary session devoted to the discussion of bladder tumours, and valuable contributions to this controversial subject were read. The meeting was indeed fortunate to have attracted Dr. Wm. A. Milner of Albany, USA, who produced a carefully documented review of his vast experience in dealing with this deadly disease, by the relatively conservative

means of transurethral-resection and the implantation of radon seed.

Since the last war the Medical Association of South Africa has held a general congress at two-yearly intervals, and this has given the specialist Groups an excellent opportunity of arranging independent meetings of their own Groups in the intervening years. The first meeting of the Urological Society was held in Port Elizabeth in 1956, and the second in Cape Town last July. The next meeting will probably take place in Johannesburg in 1960, and it is hoped that a fair number of overseas colleagues will be induced to attend.

If we bear in mind the fact that specialist urologists can only function in large cities which have hospitals fully equipped with modern surgical amenities, then South Africa has a fair quota of practitioners who confine their skill to the genito-urinary tract. The present membership of the Group numbers nearly two score, and this includes three affiliated members from Rhodesia. This is a small community by European and American standards, and the Urological Society of South Africa may be regarded as somewhat ambitious in asking overseas visitors to attend urological congresses in this country. However, the increasing stream of medical men who have visited South Africa in recent years shows that our country does hold some attraction for visitors.

The American visitors to the Congress in Cape Town were enthusiastic about the standard of the papers and the

discussions and thoroughly appreciated the hospitality extended to them. There is good reason to believe that the proposed Congress in 1960 will be reasonably well attended by urological surgeons from abroad, and it may be the beginning of more frequent joint congresses, such as have been held by the British Association of Urological Surgeons and the Canadian Urological Society.

Surgeons all over the world are realizing that the scope of their work is constantly widening. The urological surgeon is no exception. His field, too, is steadily widening and he has to keep abreast of such advances as have been made in endocrinology, electrolyte chemistry, congenital anomalies, and geriatrics.

The problem of keeping in touch with modern advances can be solved in various ways: by reading, by research work, by travel, and by communication with colleagues at congresses. Research work in South Africa presents many difficulties, of which the economic problem is probably the most important. Overseas travel is a luxury that many cannot afford. Reading fills this need for most medical men, and yet, reading alone is not enough. The stimulus gained from the exchange of views is essential and this becomes especially possible at congresses.

The urologists are to be congratulated on their past efforts and it will be a real achievement if the 1960 Congress opens the way to future joint urological congresses within the Commonwealth.