

UCSF

UC San Francisco Previously Published Works

Title

Traditional and Virtual Congress Meetings During the COVID-19 Pandemic and the Post-COVID-19 Era: Is it Time to Change the Paradigm?

Permalink

<https://escholarship.org/uc/item/5087f30h>

Journal

European Urology, 78(3)

ISSN

0302-2838

Authors

Porpiglia, Francesco
Checcucci, Enrico
Autorino, Riccardo
[et al.](#)

Publication Date

2020-09-01

DOI

10.1016/j.eururo.2020.04.018

Peer reviewed



Since January 2020 Elsevier has created a COVID-19 resource centre with free information in English and Mandarin on the novel coronavirus COVID-19. The COVID-19 resource centre is hosted on Elsevier Connect, the company's public news and information website.

Elsevier hereby grants permission to make all its COVID-19-related research that is available on the COVID-19 resource centre - including this research content - immediately available in PubMed Central and other publicly funded repositories, such as the WHO COVID database with rights for unrestricted research re-use and analyses in any form or by any means with acknowledgement of the original source. These permissions are granted for free by Elsevier for as long as the COVID-19 resource centre remains active.

available at www.sciencedirect.com
journal homepage: www.europeanurology.com



European Association of Urology



Platinum Opinion

Traditional and Virtual Congress Meetings During the COVID-19 Pandemic and the Post-COVID-19 Era: Is it Time to Change the Paradigm?

Q2 Francesco Porpiglia^{a,*}, Daniele Amparore^a, Riccardo Autorino^b, Enrico Checcucci^a,
Matthew R. Cooperberg^{c,d}, Vincenzo Ficarra^e, Giacomo Novara^f

^a Division of Urology, Department of Oncology, School of Medicine, San Luigi Hospital, University of Turin, Orbassano, Italy; ^b Division of Urology, Department of Surgery, VCU Health, Richmond, VA, USA; ^c Department of Urology, Helen Diller Family Comprehensive Cancer Center, University of California, San Francisco, CA, USA; ^d Department of Epidemiology & Biostatistics, University of California, San Francisco, CA, USA; ^e Urology Section, Gaetano Barresi Department of Human and Pediatric Pathology, University of Messina, Messina, Italy; ^f Urology Clinic, Department of Surgery, Oncology, and Gastroenterology, University of Padua, Padua, Italy

Article info

Associate Editor:
James Catto

At this critical time when the COVID-19 pandemic is spreading, major congress meetings have either been cancelled or delayed, including urology meetings. The 2020 annual meeting of the European Association of Urology due to be held in July has been postponed. The annual meeting of the American Urological Association has also been cancelled and will be replaced by a virtual education symposium. Similarly, many other events at national and regional levels have been cancelled. Such drastic decisions were mandatory considering that the peak of the COVID-19 spread has not yet been reached, and that differences in epidemic curves among countries make global organization difficult. Urologists worldwide are also being asked to reorganize their clinical activity to support internists and anesthesiologists [1–3]. Moreover, giving the

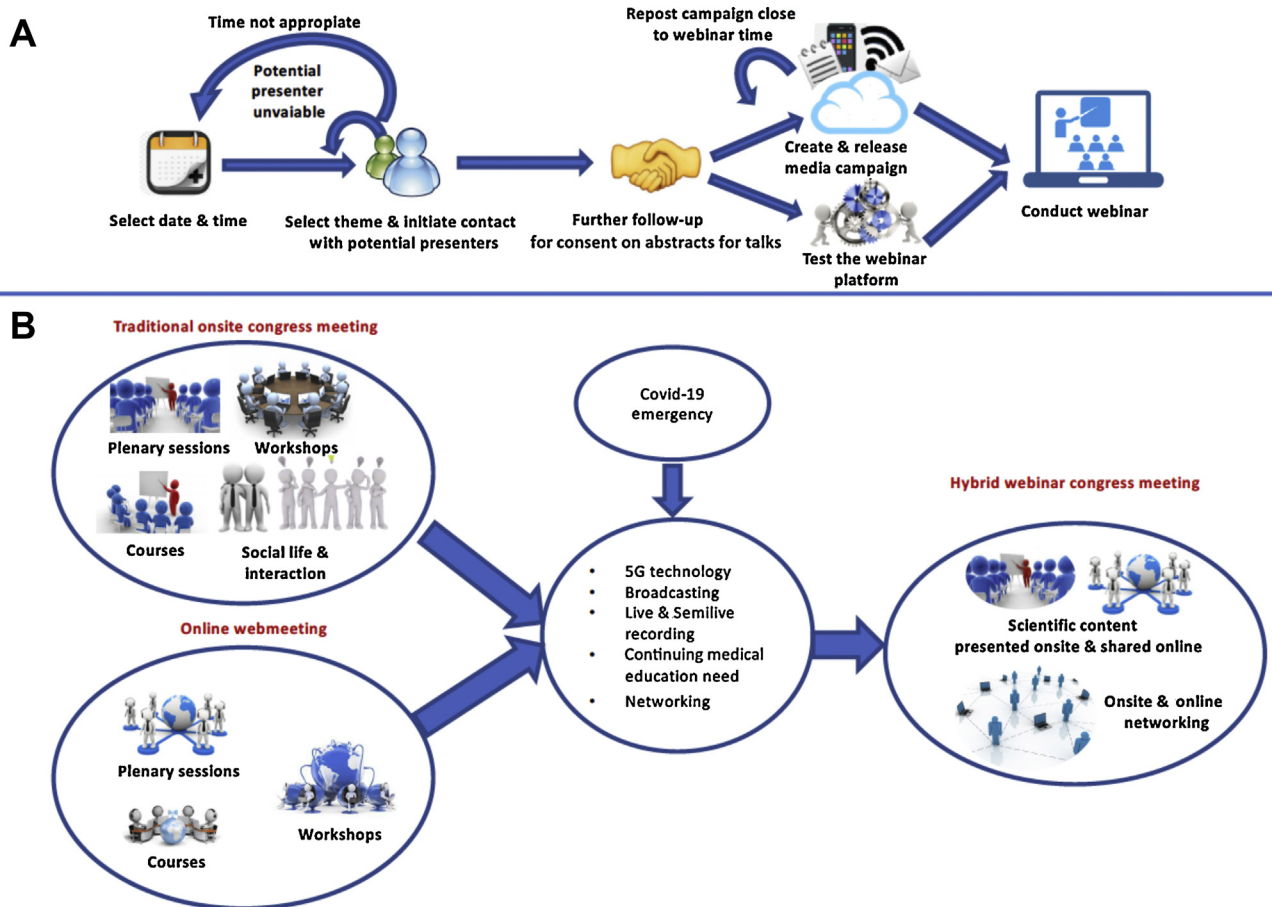
high virulence of COVID-19, gathering thousands of attendees in a single venue would be inappropriate [4,5].

Despite the inevitability of these decisions, they have significant consequences: (1) continuing medical education has been disrupted; and (2) the economic damage to scientific societies and industry partners appears to be huge. In trying to solve these issues and overcome the well-established format for traditional meeting, the possibility of organizing a virtual congress using online technology seems to be attractive and safe. The new digital platforms now available allow advanced virtual integration among users, giving opportunities for exchange of remote information. Interactive video and audio capabilities allow real-time interaction. The advent of hyperefficient telecommunication networks (satellite, 5 G) guarantees the transmission of high-quality images offering an optimal visual experience, with an image quality close to reality [6]. Moreover, these technologies allow the creation of virtual communities in which “social-virtual” events, at which participants meet to discuss a common topic, can be organized. The most modern tool for live distance learning is webinar technology [7] (Fig. 1A). Attendees can potentially deliver the same scientific contribution as at a live event without the need to move from their workplace; industries can also add commercial spots during online meetings. A completely web-based event can be planned.

* Corresponding author. Division of Urology, Department of Oncology, School of Medicine, San Luigi Hospital, University of Turin, Regione Gonzole 10, 10043 Orbassano, Italy. Tel. +39 011 9026477; Fax: +39 011 9026244. E-mail address: francesco.porpiglia@unito.it (F. Porpiglia).

<https://doi.org/10.1016/j.eururo.2020.04.018>

0302-2838/© 2020 Published by Elsevier B.V. on behalf of European Association of Urology.



Q1 Fig. 1 – (A) Flowchart of planning and logistics activities for a webinar series. Adapted from Fadlelmola et al [7]. (B) Graphical representation of content for a traditional onsite congress and an online web-meeting. Owing to the advent of new technologies and pushed by the COVID-19 emergency, a hybrid webinar congress can be planned.

Although this technological solution has much appeal, it also has some critical limitations. Human contact, affections, and emotions are almost impossible to reproduce on an online platform. Many formal and most informal interactions among faculty, delegates, scientific societies, and industries could be at risk, potentially reducing the opportunities for networking. Moreover, the role of the scientific societies themselves could also be jeopardized, considering the economic implications of such reorganization.

Ideally, a union between people and technology should be created. All the unlimited potential of the digital world should be gradually integrated into the real world, leading to a “hybrid” event. A real *agora* should be merged with a virtual *agora*, whereby meeting attendees enjoy the virtual content provided and interact with it in real time (Fig. 1B). Preliminary experiences using social media (Twitter) during which meeting content was shared and debated between onsite and online attendees have already been reported [8]. In the near future, scientific sessions could be a mix between live and broadcasted events during which the onsite faculty interact dynamically with online members. All the scientific content of the meeting should be transmitted online via real-time or delayed streaming to

allow attendees to choose the best time at which to view the sessions. Some meetings already stream plenary session lectures and selected smaller lectures, but this capability could be expanded across the full meeting content. Dedicated online platforms and apps for meeting exist but could be greatly improved in terms of the interface and capability to allow delegates to choose their preferred sessions and explore exhibition areas. Poster “walks” could be conducted virtually, and open Q&A sessions for poster presenters could continue asynchronously throughout the duration of the meeting (and beyond). For onsite attendees, the social experience should be maximized. Scientific sessions should be accompanied by social events aimed to facilitate onsite networking, which remains a highly valuable experience for members of the community to build both personal and scientific relationships.

The speed and reach of the COVID-19 pandemic have forced rapid changes in how we conduct all aspects of medical practice and research. Some of these—wider and less burdensome implementation of telehealth solutions, for example—have been a long time coming and hopefully will persist as a durable silver lining when the crisis subsides. The similarly rapid evolution in how scientific meetings are conducted should likewise have long-term

112 benefits. We hope that by the end of the COVID-19
113 emergency, we will enjoy a new reality in which technology
114 and sociality go together in order to offer a more engaging
115 and adaptable scientific congress experience, allowing more
116 flexible and dynamic use of content, modulated to the needs
117 of each attendee.

118 **Q3 Conflicts of interest:** The authors have nothing to disclose.

119 References

- 120 **Q4** [1] Ficarra V., Novara G., Abrate A., et al. Urology practice during COVID-
121 19 pandemic. *Minerva Urol Nefrol*. In press.
122 [2] Chan M.C., Yeo S.E.K., Chong Y.L., Lee Y.M. Stepping forward: urol-
ogists' efforts during the COVID-19 outbreak in Singapore. *Eur Urol*.
In press. <https://doi.org/10.1016/j.eururo.2020.03.004>.

- [3] Naspro R, Da Pozzo LF. Urology in the time of corona. *Nat Rev Urol*. In
123 press. 123
[4] Desai A.N., Patel P. Stopping the spread of COVID-19. *JAMA*. In press.
124 <https://doi.org/10.1001/jama.2020.3227>. 124
[5] Stensland K.D., Morgan T.M., Moinzadeh A., et al. Considerations in
125 the triage of urologic surgeries during the COVID-19 pandemic. *Eur*
126 *Urol*. In press. 126
[6] Jell A, Vogel T, Ostler D, et al. 5th-Generation mobile com-
127 munication: data highway for surgery 4.0. *Surg Technol Int*
128 2019;35:36–42. 128
[7] Fadlelmola FM, Panji S, Ahmed AE, et al. Ten simple rules for
129 organizing a webinar series. *PLoS Comput Biol* 2019;15:
130 e1006671. 130
[8] Gómez Rivas J, Carrion DM, Tortolero L, et al. Scientific social media,
131 a new way to expand knowledge. What do urologists need to know?
Actas Urol Esp 2019;43:269–76. 131

UNCORRECTED PROOF