



THE COLLEGES OF MEDICINE OF SOUTH AFRICA

Incorporated Association not for gain
Reg No 1955/000003/08

Final Examination for the Fellowship of the
College of Urologists of South Africa

28 January 2021

Paper 1

(3 hours)

All questions are to be answered. Each question to be answered in a separate book (or books if more than one is required for the one answer)

- 1 A 65-year-old male Professor of Statistics is visiting South Africa on a holiday from his home in Chicago, Illinois, USA. He has had significant lower urinary tract symptoms (LUTS) for over a year and is contemplating management on his return to the USA. He consults with you for advice on his treatment when he returns home.
ECOG = 0 with no comorbidities, OAB, or nocturia
IPSS = 25
PSA = 2ng/ml
DRE = 40cc BPH
FBC/U&E = Normal
USS KUB = Normal kidneys, IPP 2cm, 40gm BPH
IIEF = 5
- Please answer his following questions concisely
- a) What non-surgical options do I have, and what are the side effects/benefits of each? (10)
- b) What surgical/invasive options do I have, and what are the side effect profiles and durability of each? (10)
- In addition
- c) Briefly discuss the pathophysiology of BPH. (10)
[30]
- 2 Discuss the modern management of castration resistant prostate cancer (CRPC) under the headings:
- a) Diagnostic criteria (10)
- b) Prognosticators of disease progression (5)
- c) Management of non-Metastatic CRPC (10)
- d) Bone health management (5)
- e) Use of theranostics (10)
[40]

- 3 Regarding urological fistulae:
- a) Classify/ categorise urological fistulae and give examples. (5)
- Discuss VVF under the following headings:
- b) Etiology. (5)
 - c) Diagnosis. (10)
 - e) Briefly discuss Gouverniet's syndrome. (5)
 - f) Briefly discuss Youssef syndrome. (5)
 - g) Discuss your approach to a persisting or recurring fistula following repair. (10)
- [40]
- 4 Regarding urolithiasis:
- a) Discuss the indications and contraindications of ESWL (10)
 - b) What are the different types of PCNL that can be employed based on the tract size and discuss the indications for PCNL in the management of Urolithiasis. (10)
 - c) Discuss the different techniques you can use to gain calyceal access in PCNL. (10)
- Discuss the management of the following complications of PCNL:
- d) Bleeding from the tract. (5)
 - e) On completion of the PCNL, you realise you have gone through large bowel. (5)
- [40]



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Paper 2

(3 hours)

All questions are to be answered. Each question to be answered in a separate book (or books if more than one is required for the one answer)

- 1 A 60-year-old female presents with the feeling of a bulge in her vagina:
 - a) List other associated symptoms that need to be assessed in the history. (10)
 - b) List the possible causes of the symptoms mentioned in Q1a). (10)
 - c) List the indications for a laparoscopic sacrocolpopexy. (5)
 - d) When is it preferable to offer a laparoscopic sacrocolpopexy as opposed to a native tissue repair (vaginal approach)? (5)
 - e) What are the complications of laparoscopic sacrocolpopexy? (10)[40]

- 2
 - a) Discuss the anatomy and the surgical importance of visible internal peritoneal elevations in the lower abdomen and pelvis. (10)
 - b) Discuss the anatomy of the inguinal canal. (10)
 - c) Discuss pigment related kidney injury. (10)
 - d) Discuss pacemaker potentials and pacemaker activity in the renal pelvis and ureter. (10)[40]

- 3 Regarding spina bifida:
 - a) Discuss your approach to persistent urinary incontinence in a 17-year-old male spina bifida patient who can walk with crutches. (20)
 - b) Discuss the urologic considerations in pregnancy in female spina bifida patients. (20)[40]

- 4
 - a) Discuss the indications and rationale for performing lymph node dissection AND adrenalectomy at radical nephrectomy for renal cell carcinoma (RCC). (20)
 - b) Briefly discuss endemic and familial syndromes related to upper tract transitional cell carcinoma (TCC). (10)[30]