

Name and address of Centre

Andrology unit of the department of urology at Erasmus MC in
Rotterdam, NL

Type of Centre

University ☐
University Hospital ☒
Private Centre ☐

Other (please specify) _____

1. Director Dr. Gert Dohle, MD, PhD

2. Director (if more Institutions in the Centre) _____

3. Present Staff (Senior Scientists)

1) Name Dr. Willem Boellaard, MD
Degree Staff member
Speciality Andrologist EAA and sexologist
Academician ☐ Affiliated Member ☐ Clinical Andrologist ☒

2) Name Dr. Marij Dinkelman-Smit, MD, PhD
Degree Staff member
Speciality Andrologist EAA
Academician ☐ Affiliated Member ☐ Clinical Andrologist ☒

3) Name _____
Degree _____
Speciality _____
Academician ☐ Affiliated Member ☐ Clinical Andrologist ☐

Insert any additional staff below (if required)**MD/Biologists/Chemists**

1) Name Godfried van der Heijden
Degree Clinical embryologist
Speciality Head of the andrology
laboratorium
Full time/part time Full time
Academician ☐ Affiliated Member ☐ Clinical Andrologist ☐

2) Name Hikke van Doornick
Degree Head of the IVF-laboratory
Speciality Clinical embryologist

Full time/part time _____

Academician ☐ Affiliated Member ☐ Clinical Andrologist ☐

3) Name _____
 Degree _____
 Speciality _____
 Full time/part time _____

Academician ☐ Affiliated Member ☐ Clinical Andrologist ☐

4) Name _____
 Degree _____
 Speciality _____
 Full time/part time _____

Academician ☐ Affiliated Member ☐ Clinical Andrologist ☐**Insert any additional staff below (if required)****PhD Students**

1) Name Dr. Jocelyn van Brakel, MD
 2) Name Dr. Lisette Elsinga, MD
 3) Name _____

Nurses

1) Name _____
 2) Name _____
 3) Name _____

Laboratory Technicians

1) Name Mrs. L. van Gastel
 2) Name Ms. C. Heijmans
 3) Name Ms. S. Waterval

Administrative Personnel

1) Name _____
 2) Name _____
 3) Name _____

Insert any additional staff below (if required)**For each staff category please specify changes (increased or decreased since last EAA site visit)****Physicians**

Unchanged ☐ Increased ☒ Decreased ☐
 Please specify _____ Please specify _____

Nurses

Unchanged ☒ Increased ☐ Decreased ☐
 Please specify _____ Please specify _____

Laboratory TechniciansUnchanged ☒Increased ☐Decreased ☐

Please specify _____

Please specify _____

Administrative PersonnelUnchanged ☒Increased ☐Decreased ☐

Please specify _____

Please specify _____

Overall comment – is personnel staff enough for centres activities?

Yes ☒No ☐

Further comment _____

4. Clinical Activity*A. Outpatients: Consultations per year in the last 3 years*

	2012	2013	2014
New patients	921	889	962
Controls	1790	1659	1588

Type of patients in the last years (%)	2012	2013	2014
Infertility	70%	70%	70%
Erectile dysfunction	15%	15%	15%
Hypogonadotropic Hypogonadism	2	1	2
Klinefelter	4	7	2
Gynaecomastia	0	0	0
Varicocele	15	12	14
Cryptorchidism	15	15	20
Male sex accessory gland infections	2	4	3
Testicular tumours	21	24	26
Disorders of gender identity	0	0	0
Other			

B. Ultrasound (testis, penile, prostate)

	2012	2013	2014
total	644	629	673
Controls			

C. Andrological surgery procedures

	2012	2013	2014
Testicular biopsies/TESE	87	143	151
Varicocele ligation	52	26	32
Prostate biopsies (urology dept)	-	-	-
BPH (urology dept)	-	-	-
Prostate cancer (urology dept)	-	-	-

Vasectomy urol dept	=-	-	-
Vaso-vasostomy	30	32	40
Vaso-epididymostomy	7	13	24
Testicular tumours	62	58	52
Penile curvature correction	43	35	33

5. A. Andrology laboratory activity

	2012	2013	2014
Semen analyses	1449	1439	1179
Sperm antibodies	15%	15%	15%
Seminal markers	261	230	198

5. B. Andrology laboratory activity

Sperm banking donors Yes ☒ No ☐

Sperm banking cancer patients Yes ☒ No ☐

If yes:

	2012	2013	2014
Number of samples	145	162	210

5. C. Hystopathological evaluation of biopsies Yes ☒ No ☐

5. D. Reproductive Hormones Assays Yes ☒ No ☐

If yes please specify type of assays and number of samples in the last year

All TESE procedures include histology and testing for Carcinoma in situ of the testis

All male infertility cases will have reproductive hormones determined

5. E. Y chromosome microdeletions according to EAA/EMQN guidelines Yes ☒ No ☐

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If yes number of tests in the past year

Participation to the EAA quality control scheme? Yes ☒ No ☐

If no, specify if available in another lab of the same hospital Yes ☐ No ☐

Blood karyotyping Yes ☒ No ☐

If no, specify if available in another lab of the same hospital Yes ☐ No ☐

Other genetic tests (please specify)

CFTR gen mutation screening in men with CBAVD

6. Collaborations with other Clinical Units of the University/Hospital

IVF Unit Yes ☒ No ☐

If yes please specify: Children, Endocrinology, IVF, Urology, Genetics, Pathology

We are part of a reproductive center within Erasmus MC

Urology Clinic	Yes ☒	No ☐
Endocrine Clinic	Yes ☒	No ☐
Genetics Lab/Unit	Yes ☒	No ☐
Paediatric Unit	Yes ☒	No ☐
Central Hospital Laboratory	Yes ☒	No ☐
Private Centres	Yes ☐	No ☒

If yes please specify:

7. Clinical teaching activity

Duration of training (years):

	Number
A: Trainees in the last five years	3
B: Trainees who passed EAA-ESAU\exam for Clinical Andrologist in the last 5yrs	3
C: Trainees working in the centre preparing to pass the EAA-ESAU examination	0
D: Ph D Students	2
E: Medical Students	2
F: Other students	1

8. Formal Andrology teaching program

Yes ☒ No ☐

If yes: specify duration (years/months): Years Months ☒

	Hours of formal teaching per year	Professional training (weeks/months)
Medical Students	6	3
Ph D Students	40	40
Post Graduate students	10	3 months
Trainees		
Other degrees (please specify)		

9. Research Activity

Please list the main papers in peer review journals in the last 3 years with I.F. in a separate file.

10. Research Funding

Please specify the amount of available funds in the last 3 years and their source (Government, European Union, University, Local Government, Pharmaceutical Industries, Banks, Foundations....)

Year	2012
Total amount (€)	20.000,-
Funding Source(s)	Government

Year	2013
Total amount (€)	35.000,-
Funding Source(s)	Hospital funding

Year	2014
Total amount (€)	60.000,-
Funding Source(s)	Pathology project

Insert any additional funding below if required

11. Please report the main improvements of the Centre following the (last) EAA site visit

Clinical Activity

Increase in: TESE procedures, testicular tumours, fertility preservation in cancer patients.

Fully integrated in the Reproductive center of Erasmus MC

Laboratory Activity

Development of screening tools for carcinoma in situ cells in semen.

Development of seminal predictive test/marker for the presence of germ cells in men with azoospermia

Research Activity

Testicular development disorders: genetic background of testicular development, cryptorchidism and fertility, genetic background of meiotic arrest

Teaching

Not changed in the last 5 years (medical students, PhD programs, Residents in training for urology and gynaecology, laboratory quality system, external visitors)

12. Overall considerations by the Centre Director

A. The centre is growing ☒ Is stable ☐ Has problems ☐

If 'has problems', please specify _____

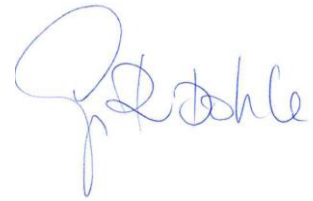
B. Other Comments by the Centre Director

Currently, there are no new funds for a PhD project.

13. Anticipated future changes in the Centre

Date 26 June 2015

Director's signature



Publications 2012-2014**2012****Publications:****International scientific(is)**

1. Dohle GR, Diemer T, Kopa Z, Krausz C, Giwercman A, Jungwirth A; European Association of Urology Working Group on Male Infertility. European Association of Urology guidelines on vasectomy. Eur Urol. 2012;61(1):159-63.
2. Dohle GR, Elzanaty S, van Casteren NJ. Testicular biopsy: clinical practice and interpretation. Asian J Androl. 2012;14(1):88-93.
3. van Brakel J, Dohle GR, de Muinck Keizer-Schrama SM, Hazebroek FW. Different surgical findings in congenital and acquired undescended testes. BJU Int. 2012 110:387-91.
4. Elzanaty S, Dohle GR. Vasovasostomy and predictors of vasal patency: a systematic review. Scand J Urol Nephrol. 2012;46(4):241-6.
5. Dohle GR, Diemer T, Kopa Z, Krausz C, Giwercman A, Jungwirth A; Grupo de Trabajo de la Asociación Europea de Urología sobre la Infertilidad Masculina. [European Association of Urology guidelines on vasectomy]. Actas Urol Esp. 2012;36(5):276-81.
6. Jungwirth A, Giwercman A, Tournaye H, Diemer T, Kopa Z, Dohle G, Krausz C; European Association of Urology Working Group on Male Infertility. European Association of Urology guidelines on Male Infertility: the 2012 update. Eur Urol. 2012;62(2):324-32.
7. Hammiche F, Laven JS, Twigt JM, Boellaard WP, Steegers EA, Steegers-Theunissen RP. Body mass index and central adiposity are associated with sperm quality in men of subfertile couples. Hum Reprod. 2012;27(8):2365-72.

Editorial:

Commentaar op het artikel: Behandeling van urethrastricturen door urologen in Nederland; wie doet wat? Van M.A. van Leeuwen e.a., Ned. Tijdschrift voor Urologie 2012;2: 115-116.

2013

PhD Thesis: Y.D. Dubbelman; functional outcome of radical retropubic prostatectomy.

(Co)promotor(s): Bangma, Prof. Dr. C.H., Dohle, Dr. GR.

PhD thesis EUR (intern gepromoveerd, intern voorbereid); 11-01-2013

aantal bladz. 193

(International) scientific publications 2013

1. Smit M., Romijn J.C., Wildhagen M.F., Veldhoven J.L.M., Weber R.F.A., Dohle G.R. Decreased sperm DNA fragmentation after surgical varicocele is associated with increased pregnancy rate. *Journal of Urology* 2013;189:146-150
2. van Brakel J., Kranse R., de Muinck Keizer-Schrama S.M., Hendriks A.E., de Jong F.H., Bangma C.H., Hazebroek F.W., Dohle G.R. Fertility potential in men with a history of congenital undescended testes: a long-term follow-up study. *Andrology* 2013; 1:100-108

Editorial:

Dohle G.R., Glassberg K.I. How common are varicoceles? New data on the prevalence in adolescence and new discussions. *Andrology* 2013;1:661-662

Book contribution

Dohle GR. Mannelijke infertiliteit. In: Bangma C.H. (Eds) leerboek urologie 2013;111-123 Bohn Stafleu van Loghum. ISBN 9789031398089

Guidelines;

G.R. Dohle (chairman), S. Arver, C. Bettocchi, S. Kliesch, M. Punab, W. de Ronde. EAU guideline on male hypogonadism. ISBN 978-90-79754-71-7

A. Jungwirth, T. Diemer, **G.R. Dohle**, A. Giwercman, Z. Kopa, C. Krausz, H. Tournaye. EAU guideline on male infertility. ISBN 978-90-79754-71-7

2014

(International) scientific publications 2014

1. Tournaye H, Dohle GR, Barratt CL. Fertility preservation in men with cancer. *Lancet*. 2014 4;384(9950):1295-301.
2. Van Brakel J., Kranse R., De Muinck Keizer-Schrama S.M.P.F., Hendriks A.E.J., De Jong F.H., Hack W.W.M., Van Der Voort-Doedens L.M., Bangma C.H., Hazebroek F.W., Dohle G.R. Fertility potential in a cohort of 65 men with previously acquired undescended testes. *Journal of Pediatric Surgery* 2014 49:4 (599-605)
3. Dwarkasing R.S., Verschuuren S.I., Leenders G.J.L.H., Thomeer M.G.J., Dohle G.R., Krestin G.P. Chronic lower urinary tract symptoms in women: Classification of abnormalities and value of dedicated MRI for diagnosis. *American Journal of Roentgenology* 2014 202:1 (W59-W66)

4. Adank MC, van Dorp W, Smit M, van Casteren NJ, Laven JS, Pieters R, van den Heuvel-Eibrink MM. Electroejaculation as a method of fertility preservation in boys diagnosed with cancer: a single-center experience and review of the literature. *Fertil Steril*. 2014;102(1):199-205

Congress proceedings

1. Huijgen N.A., Goijen H.J., Twigt J.M., Mulders A.M., Lindemans J., Dohle G.R., Laven J.S., Steegers-Theunissen R.P. The impact of medication used for acid-related gastrointestinal symptoms on semen quality in subfertile couples. *Reproductive Sciences* 2014 21:3 SUPPL. 1 (127A)
2. W. Boellaard, L. Looijenga, G. Dohle. Risk of testicular carcinoma in situ in a cohort of 204 patients with non-obstructive azoospermia. *Andrology* 2014;2:89
3. W. Boellaard, P. Soekhan, M. van Lingen, H. Stoop, A. Gilles, W. Oosterhuis, L. Looijenga. VASA mRNA detection in contrast to immunochemistry with a poly- and monoclonal antibody is specific for germ cells in the male urogenital tract. *Andrology* 2014;2:60
4. G. Dohle. Late consequences of childhood and adolescence cancer treatment. *Andrology* 2014;27
5. G. Dohle. Testosterone replacement therapy and prostate cancer: Larger studies needed to show whether testosterone therapy does not lead to a higher PCa risk. *European Urology Today* April 2014

Editorial:

Dohle GR Re: Long-term testosterone therapy in hypogonadal men ameliorates elements of the metabolic syndrome: An observational, long-term registry study. *European Urology* 2014 66:5 (965-966)

Dutch articles:

1. G.R. Dohle. Lichen sclerosus et Atrophicans: samenvatting van de nieuwe multidisciplinaire richtlijn. *Tijdschrift voor urologie/De Urograaf*. 2014;6 (oktober) 2-3

Book contribution

1. G. Dohle. Delft en de gouden eeuw van de andrologie. In: *Canon van de Urologie*. Isbn: 978-94-90826-34-5
2. G. Dohle. Varicocele in historisch perspectief. In: *Canon van de Urologie*. Isbn: 978-94-90826-34-5

Guidelines

1. G.R. Dohle (chairman), S. Arver, C. Bettocchi, S. Kliesch, M. Punab, W. de Ronde. EAU guideline on male hypogonadism. ISBN 978-90-79754-71-7
2. A. Jungwirth, T. Diemer, G.R. Dohle, A. Giwercman, Z. Kopa, C. Krausz, H. Tournaye. EAU guideline on male infertility:2014 update. ISBN 978-90-79754-71-7