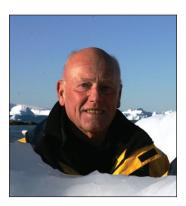
## LEGENDS IN UROLOGY

Johan J. Mattelaer, MD Kortrijk, Belgium



I became interested in the history of medicine, and curious about the field of urology, in my teens, and this eventually became the focus of my career.

In 1962, when I was 25 years old and newly graduated from the Catholic University of Leuven, Belgium, as a medical doctor. After 4 years training in general surgery and as there were only a few urologists in Belgium, I decided to do a residency in urologic surgery abroad. I was fortunate to be able to train with several top European urologists. I spent 6 months as a resident working with Sir David Innes Williams, Richard Turner-Warwick, and Derek J. Griffiths at the Institute of Urology in London, 18 months as a resident with Hans Marberger in the urological department at the University of Innsbruck, in Austria, 1 year as a resident with Leonce Wemeau and Etienne Mazeman in Lille, France, and 6 months as a resident with Wim Moonen in 's Hertogenbosch, The Netherlands.

In 1969, when I began practicing medicine in a clinic in my native city of Kortrijk, Belgium, I was the only urologist in the city, which then had 7 clinics/hospitals and 3 maternity hospitals that served a population of about 100,000. By 2003, when I retired all 7 clinics/hospitals had fused to one big hospital with 1100 beds and a urological department with 5 urologists and 2 residents--one of the larger urological departments in Belgium.

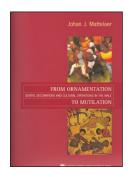
Over the years, along with my urologist colleagues and residents, I published 150 scientific urological articles. I was president of the Dutch-speaking Belgian Society of Urology and also (very exceptionally) president of the French-speaking Société Belge d'Urologie. During 12 years, I was the Belgian delegate and founding father of the European Board of Urology, of which I was the secretary elect and secretary for 2 years.

I hope I was a good urologist and helpful for many patients, but in parallel with my interest in helping patients, I was always very intrigued by the history of medicine, urology, and sexology. I came by this interest naturally. My father, a general practitioner in Kortrijk, introduced me in the history of medicine, and my uncle Bernard Mattelaer, a pharmacist, was chairman of the European Society of the History of Pharmacy for 15 years. As a young resident in London, I spend my Saturdays in the library of the Wellcome Building, one of the most important institutions in the world for the history of medicine, and I wrote a few articles on the history of medicine and urology.

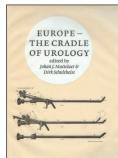
In 1990, Prof. Willy Gregoir invited me to set up a historical exhibit at the 9<sup>th</sup> EAU congress in Amsterdam. This was a huge success and led to the establishment of the Historical Committee of the EAU, which I chaired for 10 years. The goal of this committee was to update the history of urology, give lectures at the annual EAU congresses to get urologists interested in the history of their specialty, and publish. In 1996 we started the yearly publication of "de Historia Urologia Europaeae," which I was the editor of for 10 years. I still contribute to this publication, and we are currently working on the 23<sup>rd</sup> volume.

Travel has always been dear to me, helping me to uncover the "secrets" of other peoples, cultures, religions, and philosophies. I also have a lively interest in photography and ethnography. From these various interests, I gradually developed the idea of writing books that were about the phallus and sexology in art and culture, and were not just for urologists, but for anyone with an interest in art, religion, symbolism, ethnography, and history.

Since 2000, the EAU has sponsored the publication of a series of books I wrote on the history of urology and sexology, which were presented at EAU congresses:



- In 2000 at the EAU congress in Brussels: The Phallus in Art and Culture
- In 2003 at the EAU congress in Madrid: From Ornamentation to Mutilation - Penis Sheaths, Infibulation, Circumcision and Castration in the Male
- In 2008 at the EAU congress in Milan: Urine: Catheterization, Collection of the Liquid White Gold
- In 2010 at the 25<sup>th</sup> EAU congress in Barcelona: *Europe, the Cradle of Urology*
- In 2013 at the EAU congress in Milan: Sexuo-logical and and other Less Logical Stories
- In 2015 at the 30<sup>th</sup> EAU congress in Madrid: 30 Milestones in Urology
- In 2016 at the EAU congress in Munich: Forbidden Fruit: Sex, Eroticism and Art



In 2003 I became an honorary member of the EAU and in 2009 I was honored with the Frans Debruyne Lifetime Achievement Award.

When young urologists ask me why it is worthwhile to study the history of urology I always tell them the following facts. Within the universe of medicine, which remains both an art and a science, urology is a fascinating and flourishing specialty. Urologists can rightly be proud of what they have achieved throughout the long course of medical history. They have been founders and pioneers in many different areas of knowledge and expertise. For example, is it not true that circumcision, castration, and lithotomy are the oldest known surgical procedures in which the patients actually survived? And is it not also true that uroscopy, the careful examination of urine in a clear glass matula, is the oldest diagnostic tool in medicine?

After many centuries of groundbreaking work by the 'piss lookers,' barber/surgeons and stone cutters, who we can now consider to be the proto-urologists, the final years of the 19<sup>th</sup> century witnessed the start of the heroic period of modern urology, with the founding of major urological centers in cities such as Paris, London, Berlin, and Vienna. This breakthrough coincided with the invention of the most important urological instrument of all: the cystoscope, first demonstrated by Maximilian Nitze in Vienna in 1879. This instrument made it possible to look inside the human body for the very first time. It was with the aid of a cystoscope that Georg Kelling performed the first laparoscopy in 1901.

Urologists have also been pioneers of minimally invasive surgery. The development of extracorporeal shock wave lithotripsy (ESWL) made it possible to pass shock waves into the body to shatter stones in the bladder, kidney or ureter. The percutaneous litholapaxy procedure meant an end to painful lumbotomy for the removal of pyelum stones. Similarly, urologists were amongst the first to enthusiastically embrace laparoscopic surgery, even for major operations, and today robot-assisted surgery is already well established in many urological departments.

Thus, urologists have many reasons to be proud of their contributions to medical history. I continue to be fascinated by this history, in my work as a full-time urological historian.

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