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Foreword

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This special issue of *Urological Research* contains state-of-the-art lectures presented during the Fourth eULIS Symposium held in Coburg, 16–18 June 2005, which is in fact the 11th in the series of European Symposia on Urolithiasis. eULIS (European Urolithiasis Society) is a section of the European Association of Urology (EAU) dedicated to research in all the fields of renal stone disease.

The incidence and prevalence of urolithiasis, as we know from current studies in Europe and America, have further increased in the last 25 years. Various factors might take the blame for this, for instance a change in eating habits, environmental conditions but not the least a still very widespread tendency among many of our colleagues to shy away from metabolic evaluation and metaphylaxis or prevention.

But this is a significant problem. Healthcare systems are burdened with ever-higher costs of treatment, a serious development in view of falling contributions. Much more of a burden, however, are the economic losses that occur as a result of illness-related absence from work. Finally, diseases due to urinary stones, in contrast to heart and circulation or malignant diseases, are disorders that appear mainly in the active phase of life.

So it must be our aim, beyond the least invasive stone treatment methods possible, to firmly fix the necessity of metaphylaxis, that is secondary prevention, in the minds of not only the patients but also the doctors who treat them. Many secondary prophylaxis measures, such as changing eating habits, prevent not only the growth of new stones but also other illnesses like heart and circulation diseases and diabetes mellitus.

What is unique about the European symposia and their predecessors, the Bonn–Vienna and Jena Bladder Stone Symposia is the fact that scientists of different disciplines meet here in order to exchange ideas on all aspects of the widespread disease of urolithiasis. So basic researchers namely anatomists, physiologists, dieticians, biochemists,

and mineralogists are represented as those who apply this knowledge to patients like urologists and nephrologists.

The conference programme of the Fourth eULIS Symposium in Coburg was also correspondingly varied. More than 200 participants from all over Europe, especially, not only from our neighbouring countries in the East, but also from Africa, America, Asia, and Australia, found the way to Coburg. Besides the 30 or so invited state-of-the-art presentations, about 180 original presentations were contributed in the form of lectures or posters.

New insights and controversial opinions in the fields of epidemiology, diagnostics, and therapy for urinary stone disease were presented in numerous overview lectures, point-counterpoint debates, and lectures. The speakers of these state-of-the-art contributions were encouraged to be provocative while addressing the current issues in urolithiasis research.

For the first time, one morning session was dedicated to live operations in which acknowledged experts in the field demonstrated modern endourological therapy procedures.

For our young colleagues, we, for the first time, introduced instructional courses and hands-on training workshops as a special feature of the congress programme. We hope by this means to give our interested young colleagues an opportunity to learn about the state of the art in research, diagnostics, and therapy for stone disease at first hand from famous practitioners.

I am grateful to Dr. William G. Robertson, the editor-in-chief of *Urological Research*, and Mrs Christiane Notarmarco of Springer-Verlag that they enabled us generously to publish the state-of-the-art lectures of the Fourth eULIS Symposium. Through this, we can spread the contemporary knowledge in the field of renal stone disease to more colleagues than those who had attended the meeting in Coburg. This hopefully will help urolithiasis, an important field of medicine, get its due attention, especially, while regarding its increasing incidence, the sequelae as arterial hypertension and renal insufficiency, the increasing costs for treatment and the economic burden.

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