

LETTERS TO THE EDITOR

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Urs E. Studer: a master of surgery

In the autumn of 1984, I had the privilege of meeting Urs Studer when I started my clinical fellowship at the Urologische Klinik und Poliklinik, Anna Seiler Haus, part of the Inselspital in Bern. At that time, the department was under the leadership of the renowned Ernst J. Zingg. Later on Paolo Usai worked as an Assistenzarzt with Studer for three years when he was already become the Director of Urology in Bern

In 1984, Urs Studer returned from a research stint at UCLA with an innovative idea: to transform the Kock's pouch procedure into a neobladder. He immediately engaged me in this exciting project, discussing the surgical intricacies and the underlying pathophysiology. After our initial surgeries, it became evident that the small ileal stump, initially believed to improve the anastomosis, provided no benefits and was subsequently abandoned.

Urs Studer was known for his surgical precision and remarkable ambidextrous skills, which, combined with his meticulous approach, made him an unparalleled surgeon. During the pre-laparoscopic era, I learned valuable techniques from him, such as distinguishing the three layers of pelvic fascia, respecting pelvic innervation, and meticulously constructing the neobladder by hand with extramucosal seromuscular stitches. He emphasized the importance of preserving the delicate vascularization of the ureter, particularly for the left when passing it under the mesentery to connect it, spatulated, to the neobladder and how important is to develop by scissors a wide whole in a golf hole manner to connect it.

I was particularly impressed by Studer's careful patient selection process. He chose patients with a high likelihood of long-term survival to study the electrolyte changes induced by the ileal neobladder over time, enabling us to understand and correct these alterations. His profound knowledge of hydroelectrolyte balances was truly exceptional.

Today, forty years later, Studer's "*ersatzblase*" remains the gold standard for the international treatment of infiltrating bladder cancer.

From him I learned the art of using the bipolar electrosurgery and the mounted swab (tupferli) to gently develop surgical planes in atraumatic and bloodless ways.

Surgery, as Zingg and Studer taught us, could be seen as the art of developing these planes, a concept that they instilled in us naturally.

Urs Studer had high expectations, not only for others but also for himself. I recall him having me revise abstracts five or six times, but the end result was undoubtedly of exceptional quality. He guided me gently and profoundly toward improving the presentation of scientific work. He was scientifically impeccable, critical, profoundly knowledgeable in urology and anatomy, and his innovations in prostate and bladder oncological surgery, as published in leading urological journals, continue to hold relevance even thirty years later. This underscores his role as a trailblazer in this field.

He was a genuine and sincere individual, wholly dedicated to urological research and progress, which became his life's work. Unfortunately, illness took him away from urology, but his surgical teachings continue to be unparalleled and fundamental in our surgical training. His surgical insights in prostate and bladder surgery unquestionably establish him as one of the true pioneers of modern urology.

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