In the Hungarian language, the word *legend* is close in meaning to the word tale, that is, something that probably never happened. Upon receiving the invitation to contribute to this series, I felt that this was just a fairy tale, since I do not really belong with the urologists I have read about here. They are the “giants” of urology—a few that I can count as my friends—but I am only in their shadows.

On the other hand, I am the first urologist from Central and Eastern Europe to be invited to share my story. M. Marberger mentioned being raised in Austria, on the border between “good” and “bad”. I was born on the “bad” side, in Hungary, a communist country under Soviet influence. My ancestors, however, are Croatian. Croatia was part of Hungary from the end of the 11th century until 1920. In my home town, the surname Romics can be found in church records from 1710. At the beginning of the 18th century, the Roman Catholic Croats of Dalmatia moved north towards Budapest. My parents still spoke an ancient Croatian language.

My father was a carpenter with a workshop on the ground floor of our home and two employees. In 1950, he was labeled a “bourgeois” and everything was taken away from him and consolidated into a kolkhoz, where he continued to work with the same hammer and saw—which no longer belonged to him.

I entered Semmelweis University in Budapest in 1965, and received my MD in 1971. Besides studying, in my spare time I had to work on our peach farm to contribute to our family’s income.

Possibilities for travel were limited. Hungary was closed to the West and a special permit was needed to travel to Yugoslavia, although Hungarians could travel to the German Democratic Republic and Poland. On my first trip to Romania in 1968, I learned for the first time that 2 million Hungarians were living in Romania (Hungary’s population is 10 million) and that Transylvania has been part of Romania since 1920. This came as a real shock! There had been no mention of this in school.

After finishing university, I worked at the Department of Pathophysiology, at Semmelweis University. I realized I was more interested in working with patients, in healing. I came to the Urological Department of the university in 1974. Established in 1920, it was the first university clinic where urology was taught independent of surgery, and it was also the second oldest university clinic in Europe (after the one established in Paris in 1919). The first director was Professor Géza Illyés. According to the Department’s guest book, from 1922 until the outbreak of World War II, 106 (!) American urologists and surgeons (including Charles Mayo) and 100 guests from other parts of the world visited the department. There must have been a reason for so many visits (see J Urol 2007;178(2):409-413). Professor Illyés headed the department until 1941. Another great and distinguished professor was Antal Babics (1945-1974). Following the war, visitors came almost exclusively from the Soviet Union and Eastern block countries.

I was doing the everyday work of a young physician, but I missed the scientific part. My boss, F. Balogh, had a special interest in oncology, so my first research studies were related to zinc in the prostate. We studied urinary hydroxyproline as a marker of metastasis. Together with my immunologist friend, J. Horváth, who now lives in the United States, we investigated how the outcome of cancer patients is influenced by their immune status. We analyzed cellular and humoral immune parameters. We also treated bladder-cancer patients with an immune stimulant (levamisol) and were able to extend the interval between two recurrences. We didn’t know anything back then about BCG or interferon—this was all happening in the 70s. I wrote my PhD dissertation on this topic in 1985.

I spent 3 months in Bonn in 1984, the first time that I was in Germany. I had not received permission to exchange currency, so I had to travel without a single German mark. I attended my first international congress, the World
Congress of Endourology, with some money I had stashed away. After delivering three oral presentations, I went to Bonn, the West-German capital, where Professor Vahlensick gave me money and a room. I was involved in everything: surgery, congresses, building relationships, learning German, writing articles, and I even saved money for my family by eating bread-and-butter sandwiches.

On July 1, 1985, Professor D. Bach, the deputy chief in Bonn, was to become the chief urologist of a new hospital in Bocholt, Germany, close to the Dutch border, and he invited me to go there with him. I was due to start working on January 1, 1986, but my license was delayed, so I only started 6 months later. I had lots of patients to operate on, including children, and I was frequently on duty—a total of 110 times in 1987! I was 40 years old with a physician wife. She was with our 6-year-old daughter Kata and our son, Miklós, who was born in November 1987. Although I was often on duty, the money came in handy, because my wife and I planned to return to Budapest in 1998 and wanted to save money for a car and a bigger home than our 52 m² apartment there. In Bocholt, in addition to all the routine work, I was always game to try something new. It was here that I first saw an ultrasound machine; I gathered so many interesting materials about it that in 1989, I wrote a book entitled “Urological ultrasound,” which was published in German and Hungarian. PSA determinations were introduced in 1987, and in 1988, I presented a poster on PSA at the EAU in London. Later that year I presented the first lecture on PSA in Hungary and published the first Hungarian article about PSA.

Returning to Hungary in 1988, I did the first 100 PSA determinations, and that year I organized an international conference on the topic of prostate cancer and PSA. Naturally, later on, PSA determinations became general practice in Hungary too.

In Bocholt, Germany, I had been involved in a wide range of research. This included benign prostatic hyperplasia (BPH) studies, including analyses of the trace element contents of prostatic exprimates; metabolic disorder (urinary citrate, magnesium, etc.) studies of the many patients with urinary stones; isotope scanning studies of patients with testicular torsion; and studies of the accuracy of CT in determining lymph node metastasis, compared with pathological data. I authored or co-authored approximately 30 published papers from those 2 years of research. Not only did I gain technical knowledge and skills, and obtain scientific results, but from my boss, Professor D. Bach, I also learned how to manage a department—which became very important later on.

My wife and I had never thought of staying in Germany. In those days, this could only be done illegally, and we would not have been able to return to Hungary to visit our parents, family, and friends. While the possibilities of acquiring more knowledge and seeing more of the world were appealing, we were not drawn by the chance to earn more money, if it would mean breaking our ties with our family and friends.

After we returned to Budapest, I continued working in the Urological Department, in Semmelweis University. I and my colleagues used flow cytometry to determine the DNA from the radical prostatectomy specimens I had brought with me from Germany, and we compared our findings with clinical parameters and patient outcomes. We determined various tumor markers (Ki67, bcl2, etc.). We studied the effect of LHRH analogue on apoptosis by means of re-biopsies taken at various intervals. I was interested in everything that was related to urooncology. I was among the first in Hungary to carry out local BCG therapy, and I was the first to use interferon treatment for patients with kidney and bladder cancer. We studied numerous markers (TPA, E-cadherin, microsatellite analysis, urovision, claudin, etc.). I was also engaged in studies of thrombosis prophylaxis, incontinence following radical prostatectomy, and HIFU therapy. As a result of this work, in 1995, I defended my DSc thesis on urooncology at the Hungarian Academy of Sciences.

In 1992 I became associate professor at the Urology Department of Semmelweis University, but I wanted to become independent. In 1995 I became department head of a 45-bed ward at a Budapest hospital. This gave me new strength and allowed me to perform high volume surgical operations, start a journal club, publish several articles, organize two congresses (one of them German-Hungarian), and, with international co-authors, write a book about BPH. During this time I also organized the first Hungarian prostate cancer screening of 1000 patients.

In 1997 the university chair was vacated and I was appointed head of the clinic, which I chaired until July 1, 2012, when I turned 65 years old. I was the 6th chairman of the department. The 15 years that I headed the department were the best years of my professional life.

As a university clinic, our primary role was and still is to teach. University students from all over the world are taught in Hungarian, German, and English. We also give postgraduate training. The department received the nomination “EBU-
certified European Training Centre.” We had young urologists coming to us from countries ranging from Uzbekistan to Greece. For two terms, I was a faculty member and board member of the EAU ESU (European School of Urology).

There was a significant increase in the number of radical cystectomies and radical prostatectomies. It made me feel good whenever I removed a large renal cell carcinoma with or without cava involvement, and every time I performed a radical prostatectomy or a radical cystectomy. At the beginning we performed Mainz II type sigma pouch operations; later most operations were ileum conduits. Few patients met the criteria for orthotopic bladder replacement.

Over the years, we replaced the operating room equipment, and in the clinic’s five operating theatres we performed an average of 2500 open and laparoscopic surgeries annually. In our polyclinic, a large number of incontinent patients underwent surgery using the new sling techniques. We also had a growing andrology program owing to microsurgical interventions. Patients with urethral and penile disorders were commonly seen. Lower and upper endoscopic procedures and extracorporeal shock-wave lithotripsy were also frequently performed. Annually, 40 thousand (!) physician-patient encounters occurred at the clinic.

I was a visiting professor in Vienna, Austria, and other cities in neighboring countries, and our department also hosted a visiting professor from the EAU each year. J. Fitzpatrick was the first, Anup Patel (UK) was the most recent one, and in between there were M. Marberger, F. Debruyne, Studer, Abrahamsson, Chapple, and others. Within the framework of the AUA-EAU exchange program, J. Gillenwater and three young colleagues visited our department. In 2011, we were honored by the visit of Dr. Datta Wagle, the President of the AUA.

Ten years ago I established the first and only Hungarian urooncology (chemotherapy) center, which is still functioning in the department. All examinations related to cancer patients are carried out, from screening to chemotherapy.

Since we lack an adequate laboratory, most of our scientific activities have been performed with Hungarian, German, and Austrian collaborators. In the past 15 years, in the Department of Urology, two DSc theses and ten PhD theses were defended and we wrote 494 papers, 20 books, and textbooks.

In addition to being a member of the ESU, for many years I was also member of the EAU Academic Fellowship Committee, and I have been member of the EAU Historical Committee for over 10 years. Along with Marberger, I played a small role in organizing the EAU-CEM (European Association of Urology-Central European Meeting) and the first and fifth Budapest meetings. In 2011 we organized the 5th World Congress of History of Urology.

I am or have been an Advisory Board member of CJU, BJUI, and Int Urol Nephrol, and numerous Hungarian periodicals and journals in neighboring countries. This is my 10th year as editor of the Hungarian journal “Uroonkológia,” which has occasionally been published in English.

I am an honorary member of the EAU, the Society of Urology of Germany, the Czech Republic, Poland, Slovakia, and Romania, as well as the Croatian Medical Association. I am an honorary professor at the Medical University in Tirgu Mures, Romania, which also offers Hungarian courses. In Hungary I was president of the College of Urology between 2000 and 2004; I had/have several duties at the Hungarian Academy of Sciences; and I am currently president of the Hungarian Urooncology Society. Upon my recommendations G. Haas, M. Marberger, Ch. Chapple, H. Rübben, and J. Schubert were appointed honorary professors at Semmelweis University.

I have special connections with Hungarian patients living in neighboring countries. Since the end of the 70s, countless patients have visited me from Transylvania (the Western part of Romania where the Hungarians live). I have also had numerous patients visiting from Slovakia, Ukraine, and Serbia. We are regular lecturers at medical congresses held in Hungarian in Romania and we frequently teach medical students there in Hungarian. We also have close ties with Hungarian urologists around the world, including G. Haas in America, T. Dénes in Brazil, Ervin (Zvi) Löb (Leib) in Israel, and Erik Schick in Canada.

Traditions are important to me. We founded a small museum at the clinic, we regularly visit the graves of our previous professors, and we celebrate Christmas together at the clinic.

Among my honors, I wish only to mention the Officer’s Cross of the Order of Merit of the Hungarian Republic. I derive satisfaction from my students’ accomplishments and my recovered patients. On my 65th birthday Marberger said: “You have put this clinic on the map of European Urology,” which was a nice compliment.

I am joyful because my son Miki is a resident at the clinic. With his mother, Éva, who is a neonatology assistant professor and our daughter, Kata, who holds an MBA in economics, the family is complete. With what little spare time I have, I enjoy my hobbies, which are history (the last 150 years), fine arts, painting, and all kinds of music.