The Wisdom of Wayne Gretzky: Lessons For Urologic Practice

It is indeed appropriate that an editorial in The Canadian Journal of Urology reviews the wisdom of Wayne Gretzky, arguably one of the greatest hockey players in history, and its relevance to urologic practice. Gretzky said, “The secret to winning hockey isn’t knowing where the puck is but knowing where it is going to be”. This hockey perspicacity has great relevance to urologists.

Urologic practice is rapidly changing, but it should be recognized that rapid change in urology is not a new phenomenon, it is the essence of our specialty and, in large measure, what makes it so satisfying.

A brief review of the AUA national program books from 1980, 1990, 2000, 2010 and 2020 illustrate the point. In 1980, the only biomarkers on the program were flow cytometry for bladder cancer and prostatic acid phosphatase and creatine kinase for prostate cancer.1 Radical retropubic prostatectomy and continent urinary diversions were yet to be fully described. However, new surgical instruments such as the rigi-flex nephroscope received attention.

In 1990, radical surgery for both prostate and bladder cancer received more prominence.2 New approaches to the treatment of BPH were highlighted including balloon dilation of the prostate. One of the keynote addresses was given by Nobel Laureate, Andrew V. Schally, “New Approaches to Therapy for Prostate Cancer”, which signaled the increased acceptance of GnRH agonists.

By 2000, the program reflected the continued emergence of minimally invasive surgery. The Ramon Guiteras Lecture, “Surgical Implosion: The Waning of the Wound” was presented by Ralph V. Clayman.3 The increasing reliance on computers in urologic practice appeared as the subject of the presidential address, “Y2K and the AUA” by Lloyd H. Harrison. Finally, the increased participation and collaboration of urologists with gynecologists in the treatment of female patients was reviewed in a state-of-the-art lecture, “Gender Related Medicine” by Gloria E. Sarta.

In 2010, the prostate cancer treatment strategy of active surveillance occupied a prominent place on the program including a grand ballroom panel discussion by Ian Thompson, Ballentine Carter and William Catalona.4 The challenge of managing small renal masses was featured including presentations on laparoscopic management, thermal ablation and observation. The Society of Women in Urology (SWIU) had a dedicated session which affirmed the changing demographics of the AUA membership and resident training.

The 2020 AUA meeting featured many landmark presentations.5 Dr. Anthony Fauci presented, “Coronavirus Infections: More Than Just The Common Cold”. Dr. Peter Carroll gave the Ramon Guiteras Lecture, “Active Surveillance For Low And Intermediate Risk Disease-The Past Or The Future”. The Journal of Urology Lecture, “Using The Power Of The Web And Social Media To Help Readers Find The Information They Want” was given by John W. Davis MD, FACS.

Other topical presentations included, “Reviewing The Current Indispensable Role Of Prostate MRI” by Dr. Peter Pinto and a panel on “Genetic Testing: What The Urologist Needs To Know” was led by doctors Leonard G. Gomella and Veda Giri. A state of the art lecture, “Have Electronic Medical Records Improved Medical Care?” was delivered by Peter Basch, MD. Other lectures covered topics of great interest including the BCG shortage, blue light cystoscopy and pain management in urologic practice.
The Wisdom of Wayne Gretzky: Lessons For Urologic Practice

The Rip Van Winkle fable written by Washington Irving serves as a lesson for urologists to consider. The fictional Van Winkle fell asleep for 20 years, but consider a urologic Rip Van Winkle who fell asleep in 1980 and awoke just before the 2020 AUA meeting. Covid-19 pandemics, active surveillance for urologic malignancies, the opioid crisis, genetics to guide clinical care, social media and phones and computers that you can hold in your hand are all commonplace. One can imagine that the awakened urologic Rip would be caught somewhere between frightened and amazed.

As urology moves forward, it is with humility that we should recall a quote, “Everything that can be invented, has been invented”, that has been attributed to Charles Holland Duell who was the United States Commissioner of Patents from 1898-1901.6 Although the authenticity of this quote has been questioned as apocryphal by Samuel Sass,7 it nonetheless should caution urologists to approach the future with well-placed humility. The only thing that we can say with certainty is that urologic practice will continue to change in fundamental ways. The confluence of socioeconomic pressures, the aging of the population, the evolution of new medical devices and seminal scientific discoveries will undoubtedly make the program of the 2060 AUA national meeting virtually unrecognizable to those of us alive today. However, some aspects of urologic practice that hopefully will remain immutable are the sense of camaraderie, the dedication to patient care and the excitement of discovery. None of us should forget the hockey wisdom of Wayne Gretzky - the secret of successful urology isn’t knowing where urologic practice is today but knowing where it is going to be.

Kevin R. Loughlin, MD, MBA
Associate Editor
Boston, Massachusetts, USA

References