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Platinum Opinion



Virtual Conferences and the COVID-19 Pandemic: Are We Missing Out with an Online Only Platform?

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For centuries, medical conferences have been a primary modality for disseminating and presenting new research. As a result of the COVID-19 pandemic, this model has been dramatically disrupted: without established precedent in many cases, the traditional conference approach dramatically adjusted from initial cancellations (particularly early in the pandemic) to a virtual approach now used by the majority of scientific meetings held this year. While this change is associated with lower travel expenses, a positive environmental impact, and convenient access to content [1], there are many potential pitfalls, including a decrease in social networking (which may disproportionately affect junior physicians), fewer ad hoc discussions and resultant collaborations, a potential decrease in interactivity and engagement, and loss of the social component of conference participation [2]. In light of these effects, we wondered how the transition to a virtual format affects interest in conferences.

In a recent Twitter poll conducted by European Urology (@EUplatinum), followers were asked "As we round out 2020 and the ongoing pandemic: Are you more or less likely to submit an abstract to a conference if the meeting is going to be virtual?" The majority of respondents indicated that they would be less likely to submit to a virtual conference (54%, Fig. 1). With clinicians and researchers less inclined to submit their work to strictly virtual conferences, the ramifications of these "lost opportunities", from the perspectives of both a research dissemination and inperson fostering of research/mentoring collaborations, remain to be determined.

Virtual conferences are arguably less likely to negatively affect the reporting of results from important phase 2/3 clinical trials. The recent 2021 virtual genitourinary



Fig. 1 – Pie chart depicting results of an @EUplatinum Twitter poll on December 16, 2020 assessing the impact of strictly virtual conferences on the likelihood of submitting research abstracts.

American Society of Clinical Oncology (GU ASCO) meeting marked 1 yr since urology/major oncology meetings were forced to adopt a completely virtual platform. Despite the virtual platform, GU ASCO 2021 saw the reporting and

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publication of two *New England Journal of Medicine* [3,4] and two *Lancet* [5,6] trials in prostate, kidney, and urothelial carcinoma. However, fewer submissions to virtual conferences may lead to fewer presentations of studies not funded by pharmaceutical companies, including observational and post hoc analyses of clinical trials, which are often presented by residents, fellows, and trainees. While much of the important data from these studies will eventually be published in peer-reviewed journals, a large proportion will not [7] and the loss of these academic opportunities for junior physicians probably extends beyond the dissemination of their data.

This transition to virtual meetings has probably also hampered professional development, particularly for individuals in medical training. First, research productivity and the associated conference presentations are a key component of applications for residency and fellowship. These presentations reflect the trainees' research acumen, critical thinking skills, and presentation ability. The loss of inperson conferences will diminish opportunities to hone public speaking skills. Furthermore, there is a loss of the opportunity to present and interact with an audience, providing lessons in answering questions, taking feedback, and defending one's research, not to mention the exposure granted by these presentations. The ad hoc spontaneous networking opportunities afforded by in-person conferences cannot easily be replicated in a virtual setting. Thus, opportunities for collaboration, mentorship, and generating new ideas for clinicians, researchers, and medical trainees are probably lost.

The results of the @EUplatinum Twitter poll demonstrate that with 1 yr of experience with virtual medical conferences necessitated by the COVID-19 pandemic, *European Urology* followers are much less interested in contributing to conferences held virtually. This is important in the context of the upcoming European Association of Urology annual meeting, which was recently changed to an entirely virtual format from the planned hybrid meeting to be held in Milan, Italy. With increasing uptake and availability of COVID-19 vaccines, a return to in-person urology conferences is probably not far off. The utilization of virtual formats has allowed for wide dissemination of conferences in real time, including increased participation by virtual attendees from South America and China, and wider dissemination of knowledge to countries with lower income, a valuable goal we need to maintain in the future. However, the enthusiasm, networking, collaborations, and social gatherings that come with in-person conferences are uniquely valuable in the academic world. Thoughtful adoption of hybrid meetings may allow the urology community to reap the benefits of each of these approaches for many years after the COVID-19 pandemic subsides.

Conflicts of interest: The authors have nothing to disclose.

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