Nature Reviews Urology **9**, 120 (2012); published online 28 February 2012; doi:10.1038/nrurol.2012.20; doi:10.1038/nrurol.2012.23; doi:10.1038/nrurol.2012.22; doi:10.1038/nrurol.2012.21

# **IN BRIEF**

# **PROSTATE CANCER**

# Lack of awareness of ADT adverse effects

A high proportion of patients and their partners are unaware of the side effects of androgen deprivation therapy (ADT), according to a study in *Urologic Oncology*. 79 patients on ADT and 54 of their partners were asked to indicate the adverse effects that they were aware of from a checklist. Over 70% did not know that anemia, memory problems, loss of body hair and depression are associated with ADT, and more than half were unaware of serious effects such as reduced muscle mass, osteoporosis, weight gain, genital shrinkage and gynecomastia. These data might partially explain the reduced quality of life often described by patients and their partners, as uninformed patients cannot make a conscious effort to prevent or reduce the effect or risk of adverse effects.

Original article Walker, L. M. et al. Patients and partners lack knowledge of androgen deprivation therapy side effects. *Urol. Oncol.* doi:10.1016/j.urolonc.2011.12.015

### PEDIATRICS

#### Oral or sequential IV/oral antibiotics for pyelonephritis

A multicenter prospective trial has investigated whether oral antibiotic treatment is as effective at minimizing renal scarring as sequential intravenous(IV)/oral therapy in infants and children with pyelonephritis. 171 children aged 1–36 months with a first episode of pyelonephritis received either oral cefixime for 10 days or IV ceftriaxone for 4 days followed by oral cefixime for 6 days. Follow-up scintigraphy showed renal scarring in 30.8% of children in the oral treatment group, but in only 27.3% of the sequential group. This finding supports the use of oral therapy for primary episodes of pyelonephritis in young children and infants.

**Original article** Bocquet, N. *et al.* Randomized trial of oral versus sequential IV/oral antibiotic for pyelonephritis in children. *Pediatrics* doi:10.1542/peds.2011-0814

#### **CLINICAL GUIDELINES**

# Goh, not Waaldijk, to classify vesicovaginal fistula

Analysis of obstetric fistula in 202 women from the Democratic Republic of Congo suggests that Goh's classification system is more effective at predicting closure of obstetric fistulae than Waaldijk's system. Fistulae were classified using both systems and women received preoperative, surgical and follow-up assessment. Multivariate analysis of successful closure showed that Goh predicted an increased likelihood of failed closure in type 4 fistulae, but no single component predicted failure in Waaldijk's system.

Original article Capes, T. et al. Comparison of two classification systems for vesicovaginal fistula. Int. Urogynecol. J. doi:10.1007/s00192-012-1671-9

# **KIDNEY CANCER**

#### Diabetes is not an adverse prognostic factor in RCC

Diabetes is correlated with poor prognosis in a number of different cancers. For their study in *Urologic Oncology*, Antonelli *et al.* evaluated data from 1,604 patients collected since 1987, comparing RCC mortality in patients with and without type 2 diabetes. Patients with diabetes more often had asymptomatic, smaller and low-stage tumors, and presence of diabetes had no effect on survival analysis.

Original article Antonelli, A. et al. Pre-existing type-2 diabetes is not an adverse prognostic factor in patients with renal cell carcinoma: a single-center retrospective study. Urol. Oncol. doi:10.1016/j.urolonc.2011.12.013