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# IN BRIEF

### **PROSTATE CANCER**

# Laparoscopic radical prostatectomy for high-risk disease

New data support the use of laparoscopic radical prostatectomy in men with high-risk prostate cancer, demonstrating good outcomes in terms of disease control, continence and erectile function. 1,975 men with high-risk prostate cancer (PSA  $\geq$ 20 ng/ml, Gleason  $\geq$ 8 on biopsy or cT stage  $\geq$ 2) underwent laparoscopic radical prostatectomy plus pelvic lymphadenectomy. After a mean follow-up of 24.9 months (3–120 months), the rates of biochemical recurrence-free survival, continence and potency were 79.2%, 91.8% and 64.4%, respectively.

**Original article** Di Benedetto, A. *et al.* Laparoscopic radical prostatectomy for high-risk prostate cancer. *BJU Int.* doi:10.1111/bju.12797

#### BLADDER CANCER

### Solifenacin relieves irritative symptoms after TURBT

The anticholinergic agent solifenacin can provide symptomatic comfort to patients with bladder cancer after they undergo transurethral resection of the bladder tumour (TURBT). Patients who received solifenacin 6 h before TURBT and every day for 2 weeks after the procedure (n=58) reported lower overactive bladder symptom scores (5.67 versus 7.86; P<0.001) and reduced rates of catheter-related discomfort (P<0.05) than a control group of patients who received placebo (n=58).

**Original article** Zhang, Z. *et al.* Solifenacin is able to improve the irritative symptoms after transurethral resection of bladder tumors. *Urology* doi:10.1016/j.urology,2014.02.034

### **STONES**

#### Kidney stones linked to increased cardiovascular risk

A meta-analysis of six cohort studies—including 49,597 patients with kidney stones and 3,558,053 controls—suggests that kidney stones are associated with increased cardiovascular risk. Increased risks of coronary heart disease (HR 1.19), stroke (HR 1.40), myocardial infarction (HR 1.29) and coronary revascularization (HR 1.31) were reported for patients with kidney stones. Limited data implied that women are at higher risk than men, but this association must be investigated further.

**Original article** Liu, Y. *et al.* Kidney stones and cardiovascular risk: a meta-analysis of cohort studies. *Am. J. Kidney Dis.* doi:10.1053/j.ajkd.2014.03.017

## INCONTINENCE

### Leak point pressure predicts successful male sling surgery

Male sling placement is indicated for men with 'mild or moderate' post-prostatectomy incontinence, which is generally measured by the number of pads used during a 24-hour period. Owing to the subjective nature of this measurement, investigators have sought an alternative that can predict successful sling surgery for these patients. Researchers from New Zealand studied 47 men with incontinence following prostate surgery and found that men with a leak point pressure  $\leq 100\,\mathrm{cm}\,\mathrm{H_2O}$  were four times more likely to experience sling failure than those with a leak point pressure  $> 100\,\mathrm{cm}\,\mathrm{H_2O}$ 

**Original article** Barnard, J. et al. A leak point pressure of greater than  $100\,\mathrm{cm}\,\mathrm{H}_2\mathrm{O}$  is associated with greater success in retro-urethral transobturator sling placement for the treatment of post-prostatectomy incontinence. *BJU Int.* doi:10.1111/bju.12791