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## IN BRIEF

### KIDNEY CANCER

#### Stool microbiome changes in VEGF-TKI-induced diarrhoea

Findings of a study investigating the stool microbiome of patients with metastatic renal-cell carcinoma (mRCC) receiving vascular-endothelial growth factor-tyrosine kinase inhibitors (VEGF-TKIs) reveal profound alterations in the microbiota of patients with VEGF-TKI-induced diarrhoea. Patients with diarrhoea had higher levels of *Bacteroides* spp and lower levels of *Prevotella* spp than those receiving VEGF-TKIs who did not have diarrhoea. These findings highlight that alterations in faecal microbiota might explain the VEGF-TKI-induced diarrhoea experienced by some, but not all patients receiving this treatment.

**Original article** Pal, S. K. *et al.* Stool bacteriomic profiling in patients with metastatic renal cell carcinoma receiving vascular endothelial growth factor-tyrosine kinase inhibitors. *Clin. Cancer Res.* doi:10.1158/1078-0432.CCR-15-0724

### URINARY INCONTINENCE

#### Replenishment therapy ameliorates post-radiation cystitis

Nocturia owing to cystitis following radiation therapy for prostate cancer is a problem in approximately 25% of patients. New research suggests that glycosaminoglycan replacement therapy, with a combination of intravesical hyaluronic acid and chondroitin sulphate, significantly reduces the nocturnal voiding frequency of patients with post-radiation cystitis. These preliminary findings merit further investigation in a randomized controlled trial.

**Original article** Gacci, M. *et al.* Sodium hyaluronate and chondroitin sulfate replenishment therapy can improve nocturia in men with post-radiation cystitis: results of a prospective pilot study. *BMC Urol.* doi:10.1186/s12894-015-0046-1

### PROSTATE CANCER

#### Baseline atrophy reduces prostate cancer risk

A retrospective analysis of men with a serum PSA of 2.5–10 ng/ml and a previous negative diagnosis of prostate cancer following analysis of a biopsy sample has revealed that patients with both mild and moderate or marked prostate atrophy have a significantly lower risk of prostate cancer compared with that of patients with no prostate atrophy. This association was observed after follow-up durations of both 2 years and 4 years.

**Original article** Moreira, D. M. *et al.* Baseline prostate atrophy is associated with reduced risk of prostate cancer in men undergoing repeat prostate biopsy. *J. Urol.* doi:10.1016/j.juro.2015.05.103

### UROLOGICAL CANCER

#### Modified frailty index provides more accurate prognosis

A retrospective analysis of the prognostic validity of a modified version of the Canadian Study of Health and Aging Index has revealed that inclusion of additional cancer-specific, and lifestyle criteria improves the validity of this index. This finding enables improved clinical decision-making such as whether patients with a high degree of frailty are likely to benefit from procedures such as cystectomy, prostatectomy or nephrectomy. This modified frailty index was also found to be superior to other available risk-stratification tools.

**Original article** Lascano, D. *et al.* Validation of a frailty index in patients undergoing curative surgery for urologic malignancy and comparison with other risk stratification tools. *Urol. Oncol.* doi:10.1016/j.urolonc.2015.06.002