Nature Reviews Urology **12**, 122 (2015); published online 3 February 2015; doi:10.1038/nrurol.2015.19; doi:10.1038/nrurol.2015.18; doi:10.1038/nrurol.2015.20; doi:10.1038/nrurol.2015.21

IN BRIEF

PROSTATE CANCER

DTCs are not associated with clinical outcome

The presence of disseminated tumour cells (DTCs) at the time of prostatectomy does not influence clinical outcome. Todenhöfer and co-workers evaluated the presence and prognostic role of DTCs in 248 patients with prostate cancer and a high risk of disease recurrence. 47 patients (19.0%) had evidence of DTCs at prostatectomy, but the researchers found no correlation between the presence of DTCs and tumour stage, nodal stage, serum PSA or Gleason score. Furthermore, they found no difference in rates of biochemical recurrence, metastasis development or cancer-specific death over a median 58 months follow-up period.

Original article Todenhöfer, T. *et al.* Significance of apoptotic and non-apoptotic disseminated tumor cells in the bone marrow of patients with clinically localized prostate cancer. *Prostate* doi:10.1002/pros.22947

PROSTATE CANCER

Predictors of high-grade tumours at radical prostatectomy

Low circulating levels of free and bioavailable testosterone might be independent predictors of high-grade prostate cancer, according to a new study, which included 354 patients undergoing robot-assisted radical prostatectomy for localized prostate cancer and investigated independent predictors for postoperative aggressive pathological features. Léon *et al.* found no significant correlation between low circulating testosterone levels and extracapsular extension, seminal vesicle invasion or positive surgical margins, but low free and bioavailable testosterone levels independently predicted a Gleason score \geq 7 and Gleason score upgrading.

Original article Léon, P. *et al.* Low circulating free and bioavailable testosterone levels as predictors of high-grade tumors in patients undergoing radical prostatectomy for localized prostate cancer. *Urol. Oncol.* doi:10.1016/j.urolonc.2014.11.010

BPH

Are STIs linked with BPH/LUTS outcomes?

A large study has investigated whether a history of sexually transmitted infections (STIs) or positive STI serology is associated with outcomes of BPH and related lower urinary tract symptoms (LUTS). Although small case– control studies and cross-sectional surveys have indicated an association between STIs and LUTS, Breyer *et al.* found no associations between most STIs and BPH/ LUTs-related outcomes. They did report, however, that *Trichomonas vaginalis* warrants further study.

Original article Breyer, B. N. *et al.* Sexually transmitted infections, benign prostatic hyperplasia and lower urinary tract symptom-related outcomes: results from the Prostate, Lung, Colorectal, and Ovarian Cancer Screening Trial. *BJU Int.* doi:10.1111/bju.13050

PROSTATE CANCER

Reducing hospital admissions following prostate biopsy

Use of two classes of antibiotics—single-dose ciprofloxacin and single dose intramuscular ceftriaxone—is associated with a reduced rate of hospitalization following transrectal ultrasonography-guided prostate biopsy compared with use of oral ciprofloxacin alone, according to a new study that used data from 4,134 biopsies.

Original article Luong, B. *et al.* Reduction in hospital admissions with the addition of prophylactic intramuscular ceftriaxone before transrectal ultrasonography-guided prostate biopsies. *Urology* doi:10.1016/j.urology.2014.10.047