

**IN THE NEWS
FROM EAU15**

At the 30th Annual European Association of Urology (EAU) Congress, held in Madrid, a wide range of data from many subspecialties of urology were presented, spanning results from preclinical experiments and early phase I studies to findings from cohort studies and long-term follow-up data from phase III trials.

In a session focusing on men's sexual health, results of a large population-based cohort study investigating the possible association between phosphodiesterase type 5 inhibitor (PDE5I) use and melanoma were highlighted. This research was sparked by a recent study suggesting an increased risk of melanoma in a US cohort of men who take sildenafil. In the new study, the team analyzed data from Sweden using logistic regression and found no increase in risk of melanoma with increasing duration of exposure to PDE5Is.

In a thematic session on male lower urinary tract symptoms, long-term results of the prospective, randomized, controlled GOLIATH study, which compared GreenLight™ laser vaporisation with transurethral resection of the prostate, demonstrated comparable safety and functional outcomes for both techniques at 24 months.

Late-breaking results from two trials examining the efficacy of enzalutamide in men with metastatic castration-resistant prostate cancer (mCRPC) were presented in the last plenary session of the meeting. The phase III trial PREVAIL compared enzalutamide with placebo in chemotherapy-naive patients with mCRPC. At final overall survival analysis, the researchers found a significant increase in overall survival (around 4 months; HR 0.77, 95% CI 0.67–0.88) and a 17.2-month delay in chemotherapy for men receiving enzalutamide. The phase II trial TERRAIN examined efficacy and safety of enzalutamide versus bicalutamide in chemotherapy-naive men with mCRPC. Progression-free survival was significantly longer in enzalutamide-treated patients (around 10 months; HR 0.44, 95% CI 0.34–0.57).

A prominent topic throughout the meeting was the search for new, reliable and, ideally, noninvasive biomarkers to enable improved diagnosis, as well as measurement of response and progression, of urological cancers. For example, one team presented the results of the clinical validation of their urinary gene expression test for noninvasive diagnosis of bladder cancer in comparison with cytology in a prospective, blinded, multicentre study. All four tested gene signatures had high accuracy.

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