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IN BRIEF

PROSTATE CANCER

EBRT + ADT outcomes for node-positive patients

Men with node-positive (N1) prostate cancer have good outcomes with surgery and external beam radiation therapy (EBRT), but N1 cancer can behave in different ways. A matched case analysis of men with pN1 prostate cancer versus pN0 patients (n = 69 per group) treated with EBRT with androgen deprivation showed no difference in recurrence-free survival between the groups; 5-year prostate-cancer-specific survival and overall survival were also similar, and toxic effects were rare. Primary EBRT + ADT represents a reasonable treatment option for men with pN1 prostate cancer.

ORIGINAL ARTICLE Van Hemelryk, A. *et al.* The outcome for pathological node positive prostate cancer patients treated with intensity-modulated radiotherapy and androgen deprivation therapy: a case-matched analysis of pN1 and pN0 patients. *Int. J. Radiat. Oncol. Biol. Phys.* http://dx.doi.org/10.1016/j.ijrobp.2016.06.011 (2016)

BLADDER CANCER

Cisplatin response is modulated by AR activity

Resistance to cisplatin (CDDP)-based combination therapies makes advanced bladder cancer difficult to treat. UMUC3-control-short hairpin RNA (shRNA) cells with endogenous androgen receptor (AR) and AR-negative 647V/5637 cells stably expressing AR were more resistant to CDDP than UMUC-AR-shRNA and vector control cells, respectively. In AR-positive cells, treatment with R1881, a synthetic androgen, induced NF-κB expression (a mechanism of CDDP resistance). Furthermore, AR and NF-κB levels were increased in CDDP-resistant cells following long-term CDDP exposure. These data suggest that AR activation might be involved in CDDP resistance via a NF-κB mechanism, and that targeting AR might overcome CDDP resistance

ORIGINAL ARTICLE Kashiwagi, E. N. *et al.* Androgen receptor activity modulates responses to cisplatin treatment in bladder cancer. *Oncotarget* http://dx.doi.org/10.18632/oncotarget.9994 (2016)

BIOMARKERS

Urinary exosome biomarkers of radiation exposure

Urinary exosomes are a good source of biomarkers of disease progression and could, therefore, provide biomarkers of acute and persistent radiation injury. Mice were exposed to lethal whole-body radiation, and urine and serum samples collected for isolation and analysis of exosome biomarkers suggestive of radiation-induced responses. 23 biomarkers were identified from urine, indicating damage to the liver, gastrointestinal tract and genitourinary system. This paper represents the first report of exosome proteomics to identify radiation injury signatures.

ORIGINAL ARTICLE Kulkarni, S. *et al.* Identifying urinary and serum exosome biomarkers for radiation exposure using a DDA and SWATH-MS combined workflow. *Int. J. Radiat. Oncol. Biol. Phys.* http://dx.doi.org/10.1016/j.ijrobp.2016.06.008 (2016)

PAEDIATRICS

Randomized study of the Xiao procedure

Children with myelomeningocele or lipomyelomeningocele requiring spinal detethering were randomized to receive detethering with or without the Xiao procedure. Double-blind evaluations over 3 years of follow-up monitoring showed no difference in voluntary voiding or continence, and evaluators were unable to predict to which group each patient had been randomized.

ORIGINAL ARTICLE Tuite, G. F. *et al.* Urologic outcome of the Xiao procedure in children with myelomeningocele and lipomyelomeningocele undergoing spinal cord detethering: results of a randomized, prospective, double blind study. *J. Urol.* http://dx.doi.org/10.1016/j.juro.2016.05.111 (2016)