

IN BRIEF

➔ INFECTION

Prophylactic ART in HIV serodiscordant couples

A study published in *The New England Journal of Medicine* shows that immediate antiretroviral therapy (ART) is beneficial to prevent HIV transmission in serodiscordant couples. 1,762 index participants were randomized to receive immediate ART at enrolment, or delayed ART offered when two consecutive CD4⁺ counts fell below 250 cells per cubic millilitre. The primary end point was diagnosis of genetically linked HIV infection in the previously unaffected partner. In the immediate ART group, three linked infections and 26 unlinked infections were diagnosed; in the delayed ART group, 43 linked infections and 12 unlinked infections were diagnosed. Early prophylactic ART was associated with a 93% lower risk of linked partner infection than delayed ART.

ORIGINAL ARTICLE Cohen, M. S. et al. Antiretroviral therapy for the prevention of HIV-1 transmission. *N. Engl. J. Med.* <http://dx.doi.org/10.1056/NEJMoa1600693> (2016)

➔ PROSTATE CANCER

'Equivocal' lymphovascular invasion?

Data from 1,310 men who received prostatectomy has shown that lymphovascular invasion considered 'equivocal' on pathology review was associated with other adverse features, including advanced stage and Gleason grade, and positive surgical margins. Patients with positive nodes and those with equivocal nodes had shorter biochemical-recurrence-free survival than those with negative nodes.

ORIGINAL ARTICLE Galiabovitch, E. et al. Routinely reported 'equivocal' lymphovascular invasion in prostatectomy specimens is associated with adverse outcomes. *BJU Int.* <http://dx.doi.org/10.1111/bju.13594> (2016)

➔ BLADDER CANCER

Accuracy of urethral frozen section

Negative pathology on urethral frozen section during radical cystectomy is a reliable indicator that urethrectomy is not necessary. Results of 298 patients' urethral frozen sections were compared with rereviewed samples and the final urethral margins. All negative sections were confirmed to be negative, resulting in a negative predictive value of 100%. Of 28 sections that were originally positive, two were determined to be negative, resulting in a positive predictive value of 93%. The study authors recommend that positive urethral frozen sections are discussed at the time of surgery in order to make real-time decisions on the need for urethrectomy.

ORIGINAL ARTICLE Kates, M. et al. Accuracy of urethral frozen section during radical cystectomy for bladder cancer. *Urol. Oncol.* <http://dx.doi.org/10.1016/j.urolonc.2016.06.014> (2016)

➔ PROSTATE CANCER

6-monthly PSA test predicts survival

A retrospective review of 532 patients with high-risk prostate cancer treated with concurrent external beam radiotherapy (EBRT) and androgen deprivation therapy has demonstrated that a 6-month post-EBRT serum PSA level >0.1 ng/ml is an independent predictor of poorer biochemical-recurrence-free survival, distant-metastasis-free survival, and prostate-cancer-specific mortality. This test could help to identify patients at high risk of disease progression and to select those eligible for salvage therapy in clinical trials.

ORIGINAL ARTICLE Naik, M. et al. Post-treatment PSA 6 months after radiation with androgen deprivation therapy predicts for distant metastasis-free survival, and prostate cancer specific mortality. *Int. J. Radiat. Oncol. Biol. Phys.* <http://dx.doi.org/10.1016/j.ijrobp.2016.07.009> (2016)