Editorial

This special double volume which incorporates issues 5 and 6 of volume 2 has been produced to clear the backlog before we embark on volume 3. We hope that you agree that there is plenty here to interest all those who focus on prostatic diseases. In our 'What's Hot?' section the second meeting of the Central European Association of Urology is reviewed. The meeting in Vienna provided an invaluable overview of where we are right now with both benign and malignant prostatic disease.

The review section of this issue contains a useful overview of state-of-the-art transrectal ultrasonography, the single most useful imaging modality for the prostate. Staying on the subject of diagnosis and staging, Alan Partin's group reviews the use of neural networks in urology. It is clear that analysis of multiple data will be necessary to provide the highest quality prognostic information for prostate cancer patients. In a third review article Theodorou gives an overview of the thorny problem of prostatitis and emphasises the value of the new terminology which we all certainly adopt.

Much else of value is contained in this first issue of Prostate Cancer and Prostatic Diseases of the new millennium. Arie Beldegrun's group reports the use of a new tumour necrosis factor apoptosis inducing ligand as a novel

treatment for prostate cancer. Jay Smith and associates ask whether invasive monitoring is now necessary for radical prostatectomy. The answer we might suggest is that it depends on the operative experience of the surgeon! In contrast, Brasso and colleagues look at the morbidity in men with localised prostate cancer managed by therapy of non-curative intent.

Benign prostatic hyperplasia (BPH) is the most common prostatic affliction. This double issue contains several papers that address this problem. Platz *et al* look again at the issue of plasma steroid hormones and BPH. Feneley *et al* report the results of a randomised controlled trial of the tissue effects of the 5 alpha-reductase inhibitor finasteride in men with symptomatic BPH.

Finally we very much welcome the selected abstracts from the autumn meeting of the British Prostate Group (BPG) which has associated itself with this journal. We look forward to receiving manuscripts from that source and from our other readers for speedy review and publication.

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