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## **Editorial**

Prostate Cancer and Prostatic Diseases (2003) 6, 1. doi:10.1038/sj.pcan.4500651

The year 2003 has started auspiciously for *Prostate Cancer and Prostatic Diseases*. Firstly, we have been notified that the National Library of Medicine has now accepted the journal into Medline and Index Medicus. This is an acknowledgement of the quality and timeliness of the material published over the past 5 years and should act as a great incentive for readers and researchers to submit their papers to this journal. Importantly, the Index Medicus and Medline databases are available online throughout the world, are fully searchable and include citations from articles indexed, the indexing terms and the English abstract.

As usual, this issue of the journal contains many interesting papers relating to prostate cancer. Pandha *et al* examine the feasability of cancer vaccine strategies based on the modification of whole prostate cancer cells. The team headed by Ros Eeles looks at fumarate hydratase as a cause of inherited susceptibility to prostate cancer, but finds no evidence to support the hypothesis. Hamy *et al* report the specific block of androgen receptor activity using antisense oligonucleotides and suggest that these may find a clinical application in the future. Another possible therapeutic avenue is the regulation of matrix metalloproteins that are associated with increasing tumour burden in prostate cancer. Daja *et al* report on the differential expression of these substances in epithelial cell lines.

Who to biopsy? how to biopsy? (with or without local anaesthetic)? and when to biopsy? are often questions posed by clinicians. Several papers in this issue address

these problems. When the biposies do come back positive what is the next move? Two influential international groups report the results of nerve sparing and cavernous nerve graft reconstruction in an attempt to reduce the negative effect of radical prostatectomy on sexual function.

The thorny issue of monotherapy with LHRH analogues vs maximum androgen blockade is investigated by Gotanda  $et\ al$ . They conclude that there may be an advantage in combining chlormadinone acetate with an LHRH analogue to improve response rates.

The issue of prostatitis is also addressed in the journal. Kastner and Jakse conclude that IgA levels in semen may provide a reliable and inexpensive test for the disease, an advance that is sorely needed.

Also, the British Prostate Group (BPG) publish their abstracts in this issue. In future, because of space constraints we hope to publish these in a supplement. We support the BPG and other organizations around the world pushing forward the frontiers of research into prostate cancer and prostatic diseases and wish them all good luck.

Finally, we announce in this issue the winner of the AstraZeneca Scholarship for the best paper published in 2002. We are delighted to congratulate Col. David Preston for his excellent paper which reports that long term androgen deprivation is associated with an increased rate of bone loss.

Roger Kirby, Mike Brawer and Judd Moul