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Association between stroke lesions and sexual dysfunction in men

Sexual dysfunction is a well-recognized problem in men with a history of stroke. Previous studies have assessed the association between sexual and erectile dysfunction in patients with cerebrovascular disease, but controversy persists over whether this link is organic or psychological.

In this new study, Jung and colleagues aimed to identify the effect of location of brain lesions on sexual function. They asked 109 patients with a history of stroke, and a control group of 109 age-matched participants, to complete a questionnaire that included questions about sexual desire, ejaculatory function and sexual satisfaction, as well as five questions from the International Index of Erectile Function (IIEF-5).

Erectile-function scores were significantly lower in stroke patients compared with controls, and most patients reported that frequency of intercourse and sexual desire was low after stroke. The researchers found that the 41 patients with multiple brain lesions had significantly reduced erectile function compared with the 30 patients who had one lesion (P<0.01). Patients with a lesion in the right cerebellum had a significant reduction in their IIEF-5 score, which corresponded to ejaculation dysfunction.

Previous studies have found that the right cerebral hemisphere is essential in men's sexual function. The authors conclude that the specific location of stroke lesions could influence sexual desire and sexual dysfunction in men.

Original article Jung J-H *et al.* 2008 Sexual dysfunction in male stroke patients: correlation between brain lesions and sexual function. *J Urol* **71**: 99–103

Laser excision is effective for treating early-stage penile carcinoma

Penile carcinoma is a rare tumor, traditionally treated by amputation 2 cm proximal to the tumor. A new study by an Italian group has shown that men with early-stage penile carcinoma can be effectively treated with a conservative, organ-sparing strategy—microscopic tumor classification followed by CO₂ laser excision.

This retrospective, single-institution study included 224 patients with early-stage penile

carcinoma treated with CO₂ laser excision between 1982 and 2006. Patients initially underwent penile microscopy; tumors were classified by their appearance on exposure to 5% acetic acid. Patients with red or grayish white, acetoreactive, macular lesions (superficial carcinomas) underwent laser excisional biopsy for tumors <20 mm and incisional biopsy for larger tumors, followed by laser excision (and possibly circumcision); patients with cupuliform or exophytic lesions (*in situ* or invasive cancer) underwent incisional biopsy, reductive systemic chemotherapy, and laser microsurgery.

In total, 111 patients underwent partial surface excision and 113 underwent total surface excision. Reductive chemotherapy was administered to 44 patients. Concordance between the first and final histologic diagnoses was 77%. Tumors recurred in 32 patients and the 10-year recurrence rate was 17.5%. Nine patients required amputations, a median of 55 months after surgery. No intraoperative complications occurred, no patients complained of changes in erection capability, and cosmetic outcome was judged as satisfactory or excellent by all patients. The authors recommend penile microscopy to identify patients with early-stage penile carcinoma who have indications for conservative laser excision.

Original article Bandieramonte G *et al.* (2008) Peniscopically controlled CO₂ laser excision for conservative treatment of *in situ* and T1 penile carcinoma: report on 224 patients. *Eur Urol* [doi:10.1016/j.eururo.2008.01.019]

Varicocele: good results for transcatheter foam sclerotherapy

Varicocele affects 9–15% of men, and is the most common cause of male infertility. This disorder is often treated surgically, but several minimally invasive techniques for percutaneous gonadal-vein embolization have been described. Transcatheter foam sclerotherapy (TCFS) occludes the gonadal vein via introduction of sodium tetradecyl sulfate foam, which causes local inflammation. The viscosity of this foam allows for precise application of small aliquots, which reduces complication rates.

Gandini and colleagues retrospectively assessed the outcomes of 244 consecutive men (mean age 28.2 years) with 280 varicoceles treated by TCFS. The men underwent left antecubital transbrachial gonadal-vein