

IN BRIEF

BPH

Association of clinical benign prostatic hyperplasia with prostate cancer incidence and mortality revisited: a nationwide cohort study of 3,009,258 men

Ørsted, D. D. *et al. Eur. Urol.* doi:10.1016/j.eururo.2011.06.016

A research team has investigated the link between BPH and prostate cancer in the entire Danish male population. Over up to 27 years of follow-up, BPH was shown to be associated with a two-fold to three-fold increase in prostate cancer incidence, and with a two-fold to eight-fold increase in associated mortality.

PROSTATE CANCER

Can we stop prostate-specific-antigen testing 10 years after radical prostatectomy?

Loeb, S. *et al. J. Urol.* 185, 500-505 (2011)

10,609 men have been included in a study of late biochemical recurrence of prostatic malignancy after radical prostatectomy. 1,684 of the participants developed biochemical recurrence—77% within 5 years of surgery, 17% within 5–10 years, and 5% and 1% within 10–15 years and after more than 15 years, respectively. These findings indicate that PSA testing could be safely discontinued for men with no biochemical recurrence at 10 years postprostatectomy.

PROSTATE CANCER

Evaluating the value of number of cycles of docetaxel and prednisone in men with metastatic castration-resistant prostate cancer

Pond, G. R. *et al. Eur. Urol.* doi:10.1016/j.eururo.2011.06.034

Retrospective analysis of data from two trials has been undertaken in order to estimate the optimal number of 3-week cycles of docetaxel plus prednisone for men with CRPC. The study included 332 men from the TAX-327 trial, who received up to 10 cycles, and 220 men from the CS-205 trial, which allowed up to 17 cycles. 6-month and 12-month survival in TAX-327 were 92% and 75%, respectively, compared with 93% and 63% in CS-205. Subanalysis indicated that <10 cycles of docetaxel plus prednisone may negatively effect survival, but the benefit of >10 cycles is yet to be proved.

PROSTATE CANCER

Cigarette smoking and prostate cancer recurrence after prostatectomy

Joshu, C. E. *et al. J. Natl Cancer Inst.* 103, 835-838 (2011)

Smokers are more likely to experience disease recurrence after prostatectomy for cancer. Over a mean follow-up period of 7.3 years, 34.3% of men who smoked experienced disease recurrence, compared to 14.8% of former smokers and 12.1% of never smokers, even after adjusting for pathological characteristics.