IN BRIEF

PROSTATE CANCER

The genomic complexity of primary human prostate cancer

Berger, M. F. *et al. Nature* **470**, 214–220 (2011)

Complete sequencing of seven human prostate cancers has revealed the presence of complex chains of chromosome rearrangements in or near genes known to have a tumorigenic role. In patients harboring the TMPRSS2-ERG gene fusion, breakpoints were concentrated near DNA binding sites for open chromatin, the androgen receptor and ERG, suggesting aberrant transcription might be the source of such genomic reorganization events.

PROSTATE CANCER

Presurgical stress management improves postoperative immune function in men with prostate cancer undergoing radical prostatectomy

Cohen, L. *et al. Psychosom. Med.* **73**, 218–215 (2011)

Men who attend two stress management sessions before undergoing radical prostatectomy have significantly higher levels of natural killer cell cytotoxicity and circulating proinflammatory cytokines 48 h after surgery than those who do not receive guidance. Data collected from 159 patients indicate that learning diaphragmatic breathing and adaptive coping skills before surgery can improve postoperative immune response.

PROSTATE CANCER

Short-term neoadjuvant androgen deprivation and radiotherapy for locally advanced prostate cancer: 10-year data from the TROG 96.01 randomised trial

Denham, J. W. *et al. Lancet Oncol.* doi:10.1016/S1470-2045(11)70063-8

Mature data from TROG 96.01 confirm that in men treated with radiotherapy for locally advanced prostate cancer, 6 months of neoadjuvant hormone treatment is superior to 3 months, and to radiotherapy alone. At 10.6 years, patients who received 6 months of androgen deprivation therapy had significantly lower rates of disease progression (local and distant) and mortality (prostate cancer-specific and all-cause).

MALE FACTOR INFERTILITY

Varicocele as a risk factor for androgen deficiency and effect of repair

Tanrikut, C. *et al. BJU Int.* doi:10.1111/j.1464-410X.2010.10030.x.

Men with varicoceles have significantly lower testosterone levels than age-matched controls undergoing vasectomy reversal (mean levels 416 ng/dl versus 469 ng/dl; $P<0.001$), suggesting an increased risk of hypogonadism in affected patients. Testosterone levels increased in 70% of men after they underwent microsurgical varicocele repair, by an average of 178 ng/dl.