

## IN BRIEF

## ➔ PROSTATE CANCER

**AZGP1 expression predicts favourable outcomes**

Data from a phase III trial demonstrate that zinc- $\alpha$  2-glycoprotein (AZGP1) status at radical prostatectomy is predictive of outcomes of patients with prostate cancer, after a median follow-up duration of 15.8 years. Biopsy samples from a total of 347 patients undergoing radical prostatectomy were analysed using immunohistochemistry. Low or absent AZGP1 expression was found to be an independent predictor of a short biochemical-relapse-free survival duration, relative to mean levels of AZGP1 and also improved the discriminatory value of existing prognostic risk models. These findings indicate the clinical merit of AZGP1 expression as a prognostic biomarker in men with prostate cancer.

**ORIGINAL ARTICLE** Zhang, A. Y. *et al.* A prospective multi-centre phase III validation study of AZGP1 as a biomarker in localised prostate cancer. *Ann. Oncol.* <http://dx.doi.org/10.1093/annonc/mdx247> (2017)

## ➔ KIDNEY CANCER

**Bap1 and Pbrm1 determine tumour grade**

Many clear cell renal cell carcinomas (ccRCC) harbour ubiquitin carboxyl-terminal hydrolase BAP1 (*BAP1*) and protein polybromo-1 (*PBRM1*) mutations. Now, data from genetically modified mouse models indicate that conditional *Bap1* or *Pbrm1* knockout with Von Hippel–Lindau codeletion results in ccRCC of different grades: *Bap1*-deficient tumours had a higher grade with greater serine/threonine-protein kinase mTOR activation, relative to *Pbrm1*-deficient tumours, which had a longer latency.

**ORIGINAL ARTICLE** Gu, Y.-F. *et al.* Modeling renal cell carcinoma in mice: *Bap1* and *Pbrm1* inactivation drive tumor grade. *Cancer Discov.* <http://dx.doi.org/10.1158/2159-8290.CD-17-0292> (2017)

## ➔ INFECTION

**Intravesical gentamicin ameliorates recurrent UTI**

Data from a retrospective cohort study indicate that regular intravesical instillations of gentamicin reduce the frequency of recurrent UTI. A total of 27 patients with  $\geq 6$  culture-confirmed treatment-refractory UTIs in the past year received nightly intravesical gentamicin infusions. Systemic absorption of gentamicin was generally limited, and treatment was discontinued in patients whose serum gentamicin levels routinely reached  $>1$  mg/l. No adverse effects were reported with use of this approach, and the majority of patients (22) had a decrease in the incidence of UTI after commencing treatment.

**ORIGINAL ARTICLE** Abrams, P. *et al.* The use of intravesical gentamicin to treat recurrent urinary tract infections in lower urinary tract dysfunction. *NeuroUrol. Urodyn.* <http://dx.doi.org/10.1002/nau.23250> (2017)

## ➔ PAIN

**Chondroitin sulfate is superior to hyaluronic acid**

Data from a comparison study involving patients with interstitial cystitis/bladder pain syndrome indicate the superiority of chondroitin sulfate compared with hyaluronic acid as glucosaminoglycan replacement therapy. Intravesical chondroitin sulfate was superior in terms of 24-hour urinary frequency, nocturia, and interstitial cystitis problem index scores. No severe adverse effects were reported. These results, from a small cohort of patients, indicate the need for further comparisons in order to confirm this finding.

**ORIGINAL ARTICLE** Gülpınar, Ö. *et al.* Clinical comparison of intravesical hyaluronic acid and chondroitin sulfate therapies in the treatment of bladder pain syndrome/interstitial cystitis. *NeuroUrol. Urodyn.* <http://dx.doi.org/10.1002/nau.23284> (2017)