

Read all about it... It can be awkward when a patient asks you about a report in their favourite tabloid detailing an amazing research breakthrough or a 'cutting-edge' new treatment / test and you don't know what they are talking about! So this section fills you in on the facts.

New prostate cancer test to spare men from surgery

The Times – 15 November 2018

The Times reports on research funded by the Irish Cancer Society, led by Professor William Watson at University College Dublin. The work underway seeks to develop a new model for risk stratifying prostate cancer. This lab-based research used prostate tissue from 158 patients with indolent, significant and aggressive disease, examining a panel of biomarkers across these tissues. The panels included tests such as DNA methylation, protein glycosylation and mRNA expression. The next step was then to integrate this 'omic' (genomic, proteomic etc.) data into a model that could distinguish between indolent

and aggressive and non-localised disease.

The end result of this work is highly encouraging – a novel panel of pooled biomarkers which could be tested on tissue or serum and has superior accuracy over previous single biomarker panels and previous pooled panels.

No validation of this model has yet been reported on, so this is still a long way from being put into clinical use. I have no doubt though, that one day omic data will be available to the point that we can give accurate, individualised percentages to patients in terms of the risk of embarking on active surveillance.

Revealed: The metal ring that can stop men needing the loo at night

The Daily Mail – 5 November 2018

Following on nicely from the discussion in the last issue about less invasive options for benign prostatic hyperplasia (BPH); The Daily Mail reports on another new treatment potentially coming to market. This particular device is a metal ring-shaped implant for holding open the prostatic urethra. You may, as I did, initially assume this was a remarketed prostatic stent, but this is something entirely different.

The procedure is intended to be performed under local anaesthesia and like other less invasive BPH procedures, seems better suited to mild to moderate BPH. The delivery apparatus consists of a balloon to dilate the prostatic urethra and a nitinol C-shaped ring. Once the balloon is inflated and the urethra dilated, the open end of the ring is penetrated into the prostate tissue and circled to bury it outside of the lumen of the urethra, holding the lumen open. As with other procedures of this ilk, up to three rings may be required from some prostates.

In the October issue of *European Urology Focus*, the results of the First-in-Man trial was published (the previous study used canines). Twenty-nine men with prostate sizes of 35-50cc were

selected and treated with the device. Twenty-eight men were assessed at cystoscopy as requiring just one implant. No serious complications occurred.

Patients with the implant were followed out to 12 months for this publication and at 12 months, mean improvement in International Prostate Symptom Score (IPSS), Quality of Life (QoL) and Qmax were improved by 53%, 52% and 49%, respectively. These results, although very early, are comparable with prostatic urethral lift surgery.

All encouraging so far; however, implant positioning failed in 11 out of the 29 patients. It seems that the delivery apparatus may have been a major factor in this, which led to a revision to the hardware mid trial. Following this revision, the final 16 patients had successful implantation in 81% of cases. In the future, consideration will also have to be given to how compatible this implant is with future surgery, be it transurethral resection of the prostate (TURP) or holmium laser enucleation of the prostate (HoLEP).

This is a fascinating concept, but it sounds as though it is still a long way from being available to patients.

The men having penis fillers to boost their self-esteem

BBC News – 31 October 2018

Following on from features on daytime TV programmes such as *Good Morning* and the *Victoria Derbyshire Programme*, the BBC reports that 'penis fillers' are gaining popularity. A quick Google search will reveal a number of 'clinics' in metropolitan areas across the UK that offer to inject hyaluronic acid fillers under the penile shaft skin. The procedure is intended to increase penile girth.

The BBC reporter spoke to a gentleman who felt "ashamed" when looking at other men's penises in the local gym changing room. Deciding to forego the obvious and more socially acceptable solution of just not looking at other men's penises in the changing room, he chose to have fillers and now feels "more comfortable". Joking aside, I think it is likely that some men who seek something like this out could have some form of body dysmorphia or a psychological component to their issues.

The BBC took the opinion of Mr Asif Muneer, who discourages the use of such procedures. Clearly, there is no way that the risk of infection can be entirely mitigated, but more worrying is the possibility that a rise in popularity of such procedures may lead to men undertaking 'DIY' procedures. I suspect we've all come across at least one patient who has made a mess of their genitalia through injecting Vaseline or industrial-grade silicone and it would be a tragedy to see a rise in cases such as those.



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