

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.

National prostate cancer screening programme targeted at men who are genetically pre-disposed to the condition could prevent one in six deaths, study finds

The Mail Online – 11 March 2021

The Mail reports on a publication in *JAMA* of research coming out of University College London. Clearly, it remains a hugely contentious and significant debate – should there be a screening programme for prostate cancer? As we know, currently, there is no good evidence to recommend a screening programme utilising current, cost-effective measures (prostate specific antigen, digital rectal exam, etc.). What is available and what is cost-effective will surely change over time though and this research aims to answer what a screening programme could look like in the future and what the impact of it would be.

The research used an analytical model with a hypothetical cohort of 4.48 million men aged 55 to 69 years. In the model, the effect of following these men up to the age of 90 was probed. The benefits of age-based and risk-stratified screening were examined using biopsy-first and MRI-first diagnostic pathways and the results derived from probabilistic analyses.

At the risk of over-simplifying the findings, MRI-first age-based screening was associated with 0.9% fewer deaths from prostate cancer and 33.8% fewer biopsies. The cost of such a programme would be significant though, likely £20k

- £30k per quality-adjusted life year gained, depending on the threshold used for 10-year prostate cancer risk (i.e. the age at which the hypothetical patients would be screened).

The Mail goes on to talk to Thomas Callender, the lead researcher on this work. In his previous publication, he similarly modelled the effects of employing polygenic profiling to better identify the 10-year risk of developing prostate cancer for the patients and thus, better identifying an individualised time to launch screening investigations. Combination of polygenic profiling and MRI screening would potentially form the basis of a real-world screening programme.

Clearly, the next step in such research would be to translate this from a model to an actual clinical trial. I think all of us would welcome an approach to investigating for prostate cancer that further removes nuance and ambiguity from the process. However, at the same time, I think it is likely the experience of many of us that MRI slots for CWT referrals are not abundant even now and I think we should all be concerned about the negative impact of the COVID-19 pandemic on NHS investment in the coming years.

Human penises are shrinking because of pollution, warns scientist

Sky News – 24 March 2021

Whilst this headline may be enough to strike fear into the hearts of most male readers, the panic here is probably not that immediate. The story comes off the back of a book written by Dr Shanna Swan going to publication. Dr Swan's *Count Down* details how the modern world is threatening the future of the human race, particularly how 'phthalate syndrome' is causing male genital deformity and infertility. Phthalates

are used in plastic manufacture but the human race is now routinely exposed. Animal studies indicate it can block testosterone and lead to testicular dysgenesis and hypospadias. There is no hard evidence that these things are occurring though, hypospadias rates appear to be stable. Perhaps this may be just enough of a nudge that I might remember my 'bag for life' the next time I go into the supermarket.

Severe kidney problems seen with COVID-19

Reuters – 12 March 2021

Multiple news agencies reported in March on a publication in *JAMA* which indicates that COVID-19 related acute kidney injury (AKI) appears to be far more significant than previously thought. As you may be aware, a great many patients in ICUs up and down the country have developed severe renal dysfunction, requiring filtration. Many more have suffered less severe renal impairment. A Connecticut study of 182 COVID-19 patients with AKI (as compared to 1400 patients with non-COVID AKI) has shown COVID AKI to be more severe and significantly less likely to recover at six months, presumably as a consequence of severe microvascular injury. Overall, the prognosis appears to be worse for this particular variety of AKI and is something we are likely to need to be aware of going forward.

Woman warns people not to pee 'just in case' before they leave the house if they don't need to

Mail Online – 10 March 2021

Ok, hear me out – this will be brief. I found it interesting that it makes the news that a lady on the 'TikTok' app has posted a 'viral' video about good bladder habits and avoiding learned voiding dysfunction. This positive message appears to have reached over a million people and the message has now likely reached even more. I am unclear whether this lady is considered an 'influencer'.

Not being a 13-year-old schoolgirl, I have little understanding of what 'TikTok' actually is, but if this is how information is to be consumed by the masses from now on, perhaps we need to have a serious think about how this is harnessed for the benefit for public health and how accuracy of information can be assured.

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