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	Our review indicates that clinical research on localised renal cancer is impeded by heterogeneity in selection, definition, and reporting of outcomes. This work forms the first step in the development of a core outcome set to improve the process for drawing up clinical practice guidelines and to facilitate treatment decision-making by health care professionals and patients.	

Original Articles

Prostate Cancer

A Novel Radiographic Pattern Related to Poor Prognosis in Patients with Prostate Cancer with Metastatic Spinal Cord Compression 44*J. Wänman, K. Abul-Kasim, J. Semenas, E. Thysell, A. Bergh, P. Wikström and S. Crnalic*

We found a novel radiographic pattern of prostate cancer bone metastases on magnetic resonance imaging that was similar to haematological malignancies such as multiple myeloma. This pattern was associated with poor survival and neurological outcomes after surgery for metastatic spinal cord compression.

Clinical Value of a Routine Urine Culture Prior to Transrectal Prostate Biopsy 54*J. Örtengren, A. Wimmerstedt, D. Åberg, H. Janson, H. Kjölhede, G. Kahlmeter and O. Bratt*

We evaluated a clinical routine with urine culture prior to transrectal prostate biopsy in a comparative, populationbased register study of almost 6000 procedures and found that it did not lead to fewer infectious complications.

Prospective Long-term Health-related Quality of Life Outcomes After Surgery, Radiotherapy, or Active Surveillance for Localized Prostate Cancer 60*E. Kord, N. Jung, N. Posielski, J. Jiang, S. Elsamanoudi, G.T. Chesnut, R. Speir, S. Stroup, J. Musser, A. Ernest, T. Tausch, J.P. Flores and C. Porter*

We prospectively evaluated long-term health-related quality of life (HRQoL) in a large US patient population treated for localized prostate cancer. HRQoL outcomes varied according to treatment modality and time. Radical prostatectomy (RP) results in worse long-term urinary function and incontinence, but less irritative and obstructive symptoms than external beam radiotherapy (EBRT) and active surveillance (AS). Sexual domain scores were least affected by AS, while RP shows similar scores to EBRT at long term. These changes should inform patients about their expected outcomes following treatment.

Side-specific, Microultrasound-based Nomogram for the Prediction of Extracapsular Extension in Prostate Cancer 72*A.M. Pedraza, S. Parekh, H. Joshi, R. Grauer, V. Wagaskar, L. Zuluaga, R. Gupta, F. Barthe, J. Nasri, K. Pandav, D. Patel, M.A. Gorin, M. Menon and A.K. Tewari*

We developed a side-specific nomogram to predict extracapsular extension based on clinicopathologic variables and microultrasound findings. Its performance was comparable with that of a model based on multiparametric magnetic resonance imaging. External validation and prospective trials are required to corroborate our results.

Prostate Cancer Tumor Volume and Genomic Risk 90*A. Ramaswamy, J.A. Proudfoot, A.E. Ross, E. Davicioni, E.M. Schaeffer and J.C. Hu*

Higher tumor volume was associated with worse genomic features in intermediate- and high-risk disease, but not in low-risk prostate cancer. These results encourage utilization of active surveillance in the majority of low-risk patients with a high tumor burden.

Kidney Cancer

Defining Tumour Shape Irregularity for Preoperative Risk Stratification of Clinically Localised Renal Cell Carcinoma 36*H. Tanaka, S. Fukuda, K. Kimura, Y. Fukawa, K. Yamamoto, H. Fukushima, S. Moriyama, Y. Yasuda, S. Uehara, Y. Waseda, S. Yoshida, M. Yokoyama, Y. Matsuoka, K. Saito, U. Tateishi, S.C. Campbell and Y. Fujii*

This is the first study to define and classify tumour shape irregularity (TSI) based on imaging for preoperative risk stratification in clinically localised renal cell carcinoma. TSI was independently associated with pT3a upstaging, Fuhrman grade 3–4, and recurrence after surgery.

Research Letter: Open
Science



Corrigendum



Red Out: Bleeding During Robotic Retroperitoneal Lymph Node Dissection and Strategies To Manage It

84

F. Reeves, N. George and B. Challacombe

Control of bleeding in retroperitoneal lymph node dissection (rRPLND) hinges on meticulous preparation before surgery and intraoperative attention to technical and nontechnical factors. rRPLND surgeons need a range of techniques at their disposal and their team must be coordinated and swift in response to bleeding.

Robot-assisted Radical Prostatectomy with the Versius Robotic Surgical System: First Description of a Clinical Case

82

B. Rocco, F. Turri, M. Sangalli, S. Assumma, I. Piacentini, A. Grasso, P. Dell'Orto, T. Calcagnile, L. Sarchi, G. Bozzini and M.C. Sighinolfi

Corrigendum re "Impact of Body Mass Index on Survival Outcomes for Patients with Metastatic Renal Cell Carcinoma in the Immuno-oncology Era: A Systematic Review and Meta-analysis" [Eur Urol Open Sci 2022;39:62–71]

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K. Takemura, S. Yonekura, L.E. Downey, D. Evangelopoulos and D.Y.C. Heng