

# CONTENTS

## Reviews



### **Kidney Transplant Outcomes in Elderly Population: A Systematic Review and Meta-analysis**

13

A. Artiles, A. Domínguez, J.D. Subiela, R. Boissier, R. Campi, T. Prudhomme, A. Pecoraro, A. Breda, F.J. Burgos, A. Territo, V. Hevia, on behalf of the EAU-YAU Kidney Transplantation Working Group

Compared with younger population, kidney transplant (KT) in elderly patients has inferior patient and graft survival outcomes in the long term. Elderly candidates selection for KT including geriatric assessment might be crucial for achieving better outcomes.

### **Is a Course of Intermittent Self-dilatation with Topical Corticosteroids Superior at Stabilising Urethral Stricture Disease in Men and Improving Functional Outcomes over a Course of Intermittent Self-dilatation Alone? A Systematic Review and Meta-analysis**

95

W. Verla, R. Barratt, G. Chan, K. Dimitropoulos, F. Esperto, Y. Yuhong, T. Greenwell, N. Lumen, F. Martins, N. Osman, A. Ploumidis, S. Riechardt, M. Waterloos, F. Campos-Juanatey, European Association of Urology Urethral Stricture Guidelines Panel

Addition of topical corticosteroids to intermittent self-dilatation after direct vision internal urethrotomy can result in better short-term stabilisation of urethral strictures. The addition of topical corticosteroids appears safe, but further high-quality studies are needed to fully explore the utility of this approach in different treatment settings.

## Original Articles



## Prostate Cancer

### **The Patient Journey from Randomization to Detection of Prostate Cancer and Death: Results from ERSPC Rotterdam**

1

S. Remmers, D. Nieboer, M.J. Roobol, ERSPC Rotterdam Study Group

It remains crucial to reduce unnecessary testing and overdiagnosis of prostate cancer. However, it is clear that early detection of prostate cancer can reduce suffering and death from the disease.

### **Patient and General Population Preferences Regarding the Benefits and Harms of Treatment for Metastatic Prostate Cancer: A Discrete Choice Experiment**

26

D. Menges, M.C. Piatti, A. Omlin, R. Cathomas, D. Benamran, S. Fischer, C. Iselin, M. Küng, A. Lorch, L. Prause, C. Rothermundt, A. O'Meara Stern, D. Zihler, M. Lippuner, J. Braun, T. Cerny, M.A. Puhan

There is substantial preference heterogeneity between patients regarding the expected survival benefits and potential adverse effects of systemic treatment for metastatic hormone-sensitive prostate cancer. Patients' preferences regarding survival and treatment-related adverse effects should be explicitly discussed in clinical practice.

## Bladder Cancer

**Carboplatin Induction Chemotherapy in Clinically Lymph Node-positive Bladder Cancer**

39

*M. von Deimling, L.S. Mertens, B.W.G. van Rhijn, Y. Lotan, P.E. Spiess, S. Daneshmand, P.C. Black, M. Pallauf, D. D'Andrea, M. Moschini, F. Soria, F. Del Giudice, L. Afferi, E. Laukhina, T. Yanagisawa, T. Kawada, J.Y. Teoh, M. Abufaraj, G. Ploussard, M. Roumiguié, P.I. Karakiewicz, M. Babjuk, P. Gontero, E. Xylinas, M. Rink, S.F. Shariat, B. Pradere*

No guideline recommendations exist for the treatment of cisplatin-ineligible patients with clinically lymph nodepositive (cN+) bladder cancer. In this study, carboplatin-based induction chemotherapy appeared to be an attractive alternative before radical cystectomy for this population. In particular, patients with cN1 disease who are not eligible for cisplatin may benefit from gemcitabine/carboplatin induction chemotherapy.

**Minimum Volume Standards: An Incentive To Perform More Radical Cystectomies?**

47

*S.T. Nuijens, L.M.C. van Hoogstraten, R.P. Meijer, L.A. Kiemeny, K.K.H. Aben, J. A. Witjes*

Minimum volume standards for radical cystectomy do not seem to create an unwanted incentive to perform more surgeries.

## Urothelial Cancer

**Single-nucleus and Spatially Resolved Intratumor Subtype Heterogeneity in Bladder Cancer**

78

*S.V. Lindskrog, S.S. Schmäkel, I. Nordentoft, P. Lamy, M. Knudsen, F. Prip, T. Strandgaard, J.B. Jensen, L. Dyrskjøt*

Intratumor subtype heterogeneity is an important biological feature of human bladder tumors. Discrete subtype assignments from bulk RNA-sequencing data lack biological granularity, supporting the potential use of continuous classification scores for improved clinical risk stratification of patients.

## Penile Cancer

**Nationwide Data Support Centralised Decision-making in Penile Cancer Care: A Before-and-After Study on Guideline Adherence and Disease-specific survival for Patients with an Indication for Perioperative Oncological Treatment**

70

*E. Ulvskog, E.K. Persson, P. Kirrander, K. Fall, J. Ahlgren*

We report on increasing use of perioperative oncological therapy for men with penile cancer in a national cohort over a 19-yr period. We found a statistically significant survival benefit in men receiving perioperative treatment, but causality cannot be proven.

## Endo-urology

**Prospective Comparison of Thulium and Holmium Laser Lithotripsy for the Treatment of Upper Urinary Tract Lithiasis**

7

*B. Delbarre, F. Baowaidan, T. Culty, L. Khelfat, M. Brassier, M. Ferragu, A. Magnier, A. Secourgeon, F. Tariel, S. Lebdaï, P. Bigot*

Lithotripsy with Ho:YAG laser is the current gold standard for stones in the upper urinary tract (UUT). Thulium fiber laser (TFL) has the potential to be more efficient than and as safe as Ho:YAG. We found that TFL and Ho:YAG lithotripsy were comparable in terms of their stone-free rate and safety for treatment of UUT lithiasis. A cumulative stone size of 1–2 cm could be an argument for using TFL rather than Ho:YAG.

## Neuro-urology

**Augmentation Uretero-enterocystoplasty Is an Effective Procedure in Protecting the Upper Urinary Tract Without Accelerating Deterioration of Renal Function**

62

*X. Wang, Z. Zhou, F. Zhang, X. Li, L. Liao*

Augmentation uretero-enterocystoplasty is considered a safe and effective treatment for refractory lower urinary tract dysfunction, and will not aggravate the deterioration of renal function in patients with renal dysfunction.

## Pediatric Urology

**Day Surgery in Children Undergoing Retroperitoneal Robot-assisted Laparoscopic Pyeloplasty: Is It Safe and Feasible?**

55

*A. Broch, A. Paye-Jaouen, B. Bruneau, M. Glenisson, K. Taghavi, N. Botto, J. Goulin, P. Lopez, S. Querciagrossa, A. El Ghoneimi, S. Dahmani, M. Hidalgo, T. Blanc*

Robotic-assisted laparoscopic pyeloplasty is increasingly being used in children. This prospective case series demonstrates the feasibility and safety of day surgery in children undergoing retroperitoneal robot-assisted laparoscopic pyeloplasty, obviating the need for routine inpatient care. Excellent results can be achieved by careful patient selection, a clear clinical pathway, and a dedicated and experienced team.

## Trial Protocol

**Prostate Cancer IRE Study (PRIS): A Randomized Controlled Trial Comparing Focal Therapy to Radical Treatment in Localized Prostate Cancer**

89

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We summarize the protocol for Prostate Cancer IRE Study (PRIS), which comprises two parallel randomized controlled trials comparing irreversible electroporation with robot-assisted radical prostatectomy or radiotherapy in men with newly diagnosed intermediate-risk prostate cancer.