

International Braz J Urol

EDITOR'S COMMENT

LH-RH Analogue for Unilateral Cryptorchidism

The May – June 2008 issue of the International Braz J Urol presents interesting contributions from different countries, and as usual, the editor's comment highlights some papers.

Doctor Hadziselimovic, from Kindertagesklinik, Liestal, Switzerland, confirmed on page 319 that LH-RH analogue (LH-RHa) treatment induces an increase in maturation of the germ cells. The author studied 30 unilateral cryptorchid boys, with an average age of 3 years at the time of surgery. Testicular biopsy showed that they had impaired testicular maturation and were therefore at high risk for infertility. Fifteen of the 30 unilateral cryptorchid boys were treated with 10 µg LH-RHa (Buserelin) nasal spray, administered on alternate days for a period of 6 months, following orchiopexy. The control group consisted of 15 cryptorchid boys who had been treated by Schoemakers type of orchiopexy, alone. After puberty, the ejaculates of both groups were analyzed. He found that all males in the untreated group were severely oligospermic, with 20% being azoospermic. In contrast, 86% of the treated ex-cryptorchid males had a sperm concentration within the normal range. For the first time it was demonstrated that infertility in cryptorchidism could be successfully corrected when suitably treated with a LH-RHa. This innovative hormonal treatment will have a profound effect on the current recommended surgical treatment of boys with undescended testes. Dr. Marcelo Braz, form Bonsucesso Hospital, Rio de Janeiro, Brazil, and Dr. Luciano Favorito, form the Urogenital Research Unit, Rio de Janeiro, Brazil, provided editorial comments on this article.

Doctor Souza and co-workers, from Federal University of Sao Paulo, Brazil, developed on page 345 an experimental model to assess the histological characteristics of dorsal buccal mucosa graft urethroplasty when used dorsally to reconstruct the urethral plate. They used 12 New Zealand rabbits with a surgically created dorsal penile urethral defect. A buccal mucosa graft was sutured to the corpora and tunica albuginea, and the ventral urethra anastomosed to this new urethral plate. The animals were divided in groups 1, 2 and 3 and sacrificed 1, 3 and 6 weeks after surgery. In group 1 the histopathological analysis showed submucosal lymph-mononuclear inflammatory edema, numerous eosinophils and squamous epithelium integrated into the adjacent urothelium. In group 2 there was no evidence of an inflammatory response but rather complete subepithelial hyaline healing, which was more marked in group 3. The authors concluded that the healing of buccal mucosa grafts to reconstruct the urethral plate can be achieved by total integration of the squamous epithelium with the urothelium, maintaining the original histological properties of the graft with no fibrosis or retraction. Dr. Massimo Lazzeri and Dr. Guido Barbagli, from the Center for Reconstructive Urethral Surgery, Arezzo, Italy, Dr. Raimund Stein, from the University of Mainz, Germany, and Dr. Alchiede Simonato and Dr. Andrea Gregori, from the University of Genoa, Italy, provided excellent editorial comments on this paper.

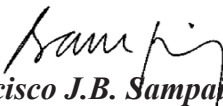
Doctor Frota and colleagues, form the Glickman Urological Institute, Cleveland Clinic Foundation, Ohio, USA, reviewed on page 259 the current status of laparoscopic radical prostatectomy (LRP) and robotic assisted radical prostatectomy (RALP) in relation to radical retropubic prostatectomy (RRP) in the manage-

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ment of localized prostate cancer. The authors concluded that after intermediate term follow-up, LRP and RALP achieved similar oncologic and functional results compared to RRP. However, LRP and RALP were associated with decreased blood loss, faster convalescence and better cosmetics when compared to RRP. The RALP technique is undoubtedly more expensive. Dr. Julio Pow-Sang, from the University of South Florida College of Medicine, Tampa, Florida, USA and Dr. Lambda Msezane and Dr. Scott Eggener, from the University of Chicago, Illinois, USA, provided important editorial comments on this manuscript.

Doctor Eandi and associates, from the University of California Davis, Sacramento, California, USA, evaluated on page 336 their experience with tension-free transvaginal tape (TVT) placement for the management of stress urinary incontinence (SUI) in women who had previously undergone a failed midurethral synthetic sling (MUS) procedure. After studying 10 patients available for follow-up at a mean period of 16 months, they found that 4 of the 10 patients achieved complete continence, and another 3 patients reported significantly improved continence and quality of life. Three women stated that their continence did not improve. They concluded that TVT placement may be a viable option for the management of women with persistent or recurrent SUI following an initial MUS procedure. Dr. Mayank Mohan Agarwal and Dr. Ravi-mohan Mavuduru, from Postgraduate Institute of Medical Education and Research, Chandigarh, India and Dr. Alexander Tsivian, from Tel Aviv University, Israel, provided editorial comments on this paper.

Doctor Asbagh and collaborators, from Celal Bayar University, Manisa, Turkey, investigated on page 354 the inhibitory effects of zoledronic acid (ZA) on tumor related growth factor IL-6 in hormone resistant prostate cancer cell lines. The association between apoptosis and IL-6 inhibition was also assessed. They found that PC-3 and DU145 cell lines were sensitive to ZA mediated cytotoxicity in a dose- and time-dependent manner. However, the apoptotic effect was significantly different among PC-3 and DU145 cells ($p < 0.05$). IL-6 secretion was significantly lower in both cell lines, compared to the untreated control cells ($p < 0.05$). Although the increased inhibition of IL-6 secretion was associated with increased apoptosis in DU145 cells ($p = 0.002$), there was no similar association for PC-3 cell line ($p = 0.347$). When compared to the untreated controls, the number of cDNA copies was significantly lower in the ZA treated DU145 cell line at doses of 30 and 90 μ M ($p < 0.05$), suggesting a reduced expression of IL-6 mRNA. The authors concluded that ZA exhibited a time- and dose-dependent apoptotic effect on PC-3 and DU145 prostate cancer cell lines and this effect was associated with inhibited secretion of IL-6 in DU145 cell line. Dr. Zoran Culig, from the Innsbruck Medical University, Austria, provided editorial comment on this paper.


Francisco J.B. Sampaio, M.D.
Editor-in-Chief