

International Braz J Urol

EDITOR'S COMMENT

A Really International Urological Journal

The January – February 2009 issue of the International Braz J Urol presents interesting contributions from many different countries, and as usual, the editor's comment highlights some papers.

Also, it is a great pleasure to confirm that the International Braz J Urol is a truly international Journal. In this issue, concerning articles and editorials, we present contributions from 12 different countries from different continents.

Doctor Tyagi and colleagues, from William Beaumont Hospital, Royal Oak, Michigan, USA, investigated on page 76 the presence of functional β_1 , β_2 and β_3 -adrenoceptor in urothelium and detrusor muscle of human bladder through in vitro pharmacology of selective β_3 adrenoceptor agonist solabegron. They confirmed the presence of mRNA for β_1 , β_2 and β_3 -adrenoceptor in both human urothelium and detrusor. In an in vitro functional bladder assay, solabegron and other agonists for β -adrenoceptors such as procaterol and isoproterenol evoked potent concentration-dependent relaxation of isolated human bladder strips. It was concluded that selective β_3 -adrenoceptor agonist may be a potential new treatment for the overactive bladder OAB syndrome. Also, the authors speculated that the existence of β_3 -adrenoceptor mRNA in the urothelium, in addition to the detrusor muscle suggest multiple site of actions for the β_3 -adrenoceptor in the lower urinary tract. Dr. Atsushi Otsuka, from Hamamatsu University School of Medicine, Shizuoka, Japan, provided an editorial comment to this article.

Doctor Castilho and colleagues, from Catholic University of Campinas evaluated on page 24 the long-term follow-up (minimum 18 months) of 24 patients undergoing laparoscopic adrenalectomy for pheochromocytoma. The authors found intra-operative complications in 4 patients (16.7%) and postoperative complications in 2 (8.3%). Eighteen (90%) of the 20 patients who had symptomatic hypertension, returned to normal blood pressure immediately after surgery, during the hospital stay. The authors found that the initial positive results obtained in the treatment of 24 patients were confirmed after a mean follow-up of 74 months. It was concluded that laparoscopic adrenalectomy for pheochromocytoma is a safe and effective procedure, providing the benefits of a minimally invasive approach. Dr. Tobias-Machado & Dr. Maria Bicudo, from ABC Medical School, São Paulo, Brazil, Dr. Cassio Andreoni, from Federal University of São Paulo, Brazil and Dr. M Fau & Dr. Laurent Brunaud, from University of Nancy, France, provided important editorial comments on laparoscopic treatment of pheochromocytoma.


Doctor Lopes and co-workers, from Federal University of Bahia, Salvador, Bahia, Brazil, presented on page 49 the use of a bovine pericardium graft in corporoplasty for penile prosthesis implantation. Bovine pericardium was used to cover large areas of implanted penile prostheses in 5 patients with a history of ero-

EDITOR'S COMMENT - *continued*

sion, infection and fibrosis and the use of the tunica albuginea was unfeasible. The authors concluded that bovine pericardium might substitute synthetic and autologous material with the additional advantages of lower cost and greater availability. Dr. Paulo H. Egydio, from the Center for Peyronie's Disease, São Paulo, Brazil and Dr. Nicolaas C. Lumen, from Ghent University Hospital, Belgium, provided interesting editorial comments on this paper.

Doctor Natalin and colleagues, from Columbia University, New York, USA, compared on page 36 the ureteroscopic treatment outcomes of ureteral and renal stones, stratified for stone size and location, between overweight, obese and non-obese patients. A total of 107 patients underwent flexible or semi-rigid ureteroscopy with Ho:YAG laser lithotripsy and met criteria for review and analysis. The authors found an overall, initial stone-free rates of 91%, 97%, and 94% in normal, overweight and obese individuals respectively. When compared to non-obese patients, there were no significant differences. For renal and proximal ureteral stones, the stone-free rate in overweight and obese individuals was 94% in both groups; and a stone-free rate of 100% was found for distal stones, also in both groups. It was concluded that ureteroscopic treatment of stones in obese and overweight patients is an acceptable treatment modality, with success rates similar to non-obese patients. Dr. Mauricio Rubinstein, from Federal University of State of Rio de Janeiro, RJ, Brazil and Dr. Eduardo Mazzucchi, from University of Sao Paulo, USP, Brazil

Doctor Nadu and collaborators, from Tel Aviv University, Israel, reported on page 9 the outcomes of laparoscopic surgery combined with endourological assistance for the treatment of renal stones in patients with associated anomalies of the urinary tract. The authors studied 13 patients with ureteropelvic junction obstruction, horseshoe kidney, ectopic pelvic kidney, fused-crossed ectopic kidney, and double collecting system. Treatment included laparoscopic pyeloplasty, pyelolithotomy, and nephrolithotomy combined with flexible nephroscopy and stone retrieval. Intraoperative complications were lost stones in the abdomen diagnosed in 2 patients during follow up. Mean number of stones removed was 12 (range 3 to 214). Stone free status was 77% (10/13) and 100% after one ancillary treatment in the remaining patients. It was concluded that laparoscopic and endourological techniques can be successfully combined in a one-procedure solution that deals with complex stone disease and repairs underlying urinary anomalies. Dr. Nasser Simforoosh, from Shaheed Beheshti University of Medical Sciences, Tehran, Iran and Dr. Manickam Ramalingam, from K.G. Hospital and Post Graduate Institute, Coimbatore, India, provided important editorial comments on this paper. in the abdomen diagnosed in 2 patients during follow up. Mean number of stones removed was 12 (range 3 to 214). Stone free status was 77% (10/13) and 100% after one ancillary treatment in the remaining patients. It was concluded that laparoscopic and endourological techniques can be successfully combined in a one-procedure solution that deals with complex stone disease and repairs underlying urinary anomalies. Dr. Nasser Simforoosh, from Shaheed Beheshti University of Medical Sciences, Tehran, Iran and Dr. Manickam Ramalingam, from K.G. Hospital and Post Graduate Institute, Coimbatore, India, provided important editorial comments on this paper.


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