What's Inside?

SYSTEMIC REVIEW OF URODYNAMICS IN EVALUATION OF LOWER URINARY TRACT

Men with bothersome lower urinary tract symptoms refractory to initial treatment require urodynamic study (UDS) for an appropriate diagnosis.^[1] Singh et al. evaluated 10 studies with 1474 patients in the age group of 18–50 years.^[2] In the review, 79% of patients who underwent conventional UDS had a demonstrable abnormality as compared to 97% of the patients who were subjected to video UDS. Detrusor underactivity was the most common abnormality in conventional UDS group (24%) and primary bladder neck obstruction was seen in 49% of the video UDS group. The authors conclude that the evidence for the use of UDS in these patients is sparse. Video UDS may provide a more precise diagnosis, but this may be due to bias in patient selection and characteristics.

INDICATIONS AND OUTCOMES OF PEDIATRIC ROBOTIC UROLOGICAL PROCEDURES

Robot-assisted laparoscopic surgery has been customized to meet the needs of pediatric urological procedures in recent years.^[3] Robot-assisted laparoscopic pyeloplasty is the most common procedure performed in the pediatric population with success ranging between 90% and 100%.^[4] Hou et al. review the current role of robot assistance for pediatric stone surgery, partial nephrectomy, nephroureterectomy, ureteral reimplantation and apendico-vesicostomy. Complex procedures such as augmentation cystoplasty, bladder neck reconstruction and Malone antegrade continence enema are also feasible with this approach. The authors conclude that in pediatric patients, robotic procedures improve cosmesis, hospital stay and postoperative pain and retrospective studies found the outcomes comparable to tradition open surgery.

A RANDOMIZED CONTROL TRIAL COMPARING THE EFFECT OF PREOPERATIVE ESTROGEN ON COMPLICATIONS OF PROXIMAL HYPOSPADIAS REPAIR

Repair of proximal hypospadias is associated with complications such as wound dehiscence, fistula formation and strictures. The effect of estrogen on wound healing has been studied and there is evidence to suggest that it may be beneficial.^[5] In an endeavor to minimize complications, Pati *et al.* report

a randomized control trial which included 60 patients.^[6] Both the groups (with and without preoperative estrogen cream application) had comparable incidence of wound dehiscence (41.4% vs. 45.2%) and urethro-cutaneous fistula (37.9% vs. 51.6%). The authors conclude that the application of topical estrogen on the ventral aspect of penis before hypospadias repair did not improve the complication rates of wound healing and fistula formation.

SURVIVAL OUTCOMES OF CANCER PROSTATE FROM TWO CANCER REGISTRIES IN PUNJAB

Cancer registries in India have shown an increasing trend of prostate cancer and reported a shift in its ranking among common cancers.^[7] This report by Budukh *et al.* from the Sangur and Mansa cancer registries in Punjab, India shows the trend of prostate cancer in the rural population of India. It highlights that the majority of the cases reported in advanced stages and have an overall 5 year, age-standardized survival of 30.3%.^[8] These figures are much lower than to the 61.9% reported from other Asian communities.^[9] Two additional findings in this study are that 12.9% patients were treated without a histological diagnosis and 37.3% patients did not complete treatment.

AUDIT OF PRACTICE PATTERNS OF ANTIBIOTIC USAGE IN ENDOUROLOGICAL SURGERY IN INDIA

In a multi-institutional cross-sectional audit, Nayyar *et al.* have described the practice patterns of antibiotic use for endourological surgery in India.^[10] This study was an initiative of the collaborative research committee of the Urological Society of India and included 1538 patients from 20 hospitals. The authors report that the majority (75.4%) of the patients undergoing endourological procedures receive more than one dose of prophylactic antibiotics. The authors also report a high rate of multi dose, multiple (51%), post-discharge (77.4%), and guideline discordant (75.4%) antibiotic use in endourological procedures.

COMPARISON OF TWO LAB PARAMETERS TO PREDICT THE MORTALITY OF FOURNIER'S GANGRENE

Fournier's gangrene (FG) is one of the most important acute infective urological emergencies with a mortality as high as 30%.^[11] Wirjopranoto *et al.* report a study evaluating the role of neutrophil-to-lymphocyte ratio (NLR) and platelet-to-lymphocyte ratio (PLR) as the predictors of mortality in cases with FG.^[12] An NLR >8 and PLR >140 were considered as the high risk features. In their cohort of

135 patients, 112 survived and the analysis of the patients who succumbed to their disease revealed that NLR of >8 was an independent risk factor for mortality and increased the risk by 12 fold. However, PLR was not predictive of outcomes of FG.

IS ACTIVE SURVEILLANCE A GOOD OPTION FOR SMALL RENAL MASSES IN DIABETICS?

While 80% of the small renal masses (SRM) may be malignant, only 25% have the potential to metastasize.^[13] Alcalá *et al.* retrospectively analyzed 111 patients who were on active surveillance for SRMs.^[14] The overall growth rate of tumours was nonsignificantly higher in the diabetic group (0.26 cm/year vs. 0.15 cm/year, P = 0.24) who also had worse overall survival (P < 0.05). Diabetes, low epidermal growth factor receptor, and high growth rate of tumor (>0.5 cm/years) were associated with a high all-cause mortality. The study highlights the importance of understanding patients factors and comorbidities in the management of SRMs.

RENAL REPLACEMENT LIPOMATOSIS

Dasgupta *et al.* present an image of renal replacement lipomatosis (RRL) in a patient with non-functioning kidney secondary to renal calculus disease.^[15] The histology was replacement of parenchyma by fat as the sinus fat proliferated and the parenchyma atrophied. RRL is an rare but important entity as it may be misinterpreted on a CT for a fat-rich renal tumor.

PENILE LESION AS SOLITARY MANIFESTATION IN CHRONIC LYMPHOCYTIC LEUKEMIA

In this case report, Hamid *et al.* describe a rare case of cutaneous infiltration of genital skin as a delayed manifestation of chronic lymphocytic leukemia (CLL) two decades after the initial presentation.^[16] *Leukaemia cutis* is a rare manifestation of indolent hematological malignancies such as CLL. The diagnosis is established by local excision.

PRIMARY RETROPERITONEAL FIBROSIS PRESENTING AS A RENAL MASS

Primary retroperitoneal fibrosis can rarely present as an atypical renal mass. Shrivastava *et al.*^[17] suggest that a biopsy

should be the first step. Steroids and rituximab can be used for the medical management of disease.

Abhishek Singh*

Department of Urology, Muljibhai Patel Urological Hospital, Nadiad, Gujarat, India *E-mail: drabhisheksingh82@gmail.com

REFERENCES

- Nitti VW, Lefkowitz G, Ficazzola M, Dixon CM. Lower urinary tract symptoms in young men: Videourodynamic findings and correlation with noninvasive measures. J Urol 2002;168:135-8.
- Singh G, Mittal A, Sinha S, Panwar VK, Bhadoria AS. Urodynamics in the evaluation of lower urinary tract symptoms in young adult men: A systematic review. Indian J Urol 2023;39:97-106.
- Andolfi C, Kumar R, Boysen WR, Gundeti MS. Current status of robotic surgery in pediatric urology. J Laparoendosc Adv Surg Tech A 2019;29:159-66.
- 4. Hou SW, Xing MH, Gundeti MS. Pediatric robotic urologic procedures: Indications and outcomes. Indian J Urol 2023;39:107-20.
- Mukai K, Urai T, Asano K, Nakajima Y, Nakatani T. Evaluation of effects of topical estradiol benzoate application on cutaneous wound healing in ovariectomized female mice. PLoS One 2016;11:e0163560.
- Pati AB, Mishra P, Mahalik SK, Tripathy BB, Mohanty MK. Effect of preoperative estrogen on complications after proximal hypospadias repair: A randomized controlled trial. Indian J Urol 2023;39:126-32.
- Budukh A, Bakshi G, Prakash G. Change in the ranking and increasing trend of the prostate cancer from the population-based cancer registries in India. Indian J Urol 2018;34:235-6.
- Budukh AM, Thakur JS, Dora TK, Kadam PR, Bagal SS, Patel KK, *et al.* Overall survival of prostate cancer from Sangrur and Mansa cancer registries of Punjab state, India. India Indian J Urol 2023;39:148-55.
- 9. Hassanipour S, Delam H, Arab-Zozani M, Abdzadeh E, Hosseini SA, Nikbakht HA, *et al.* Survival rate of prostate cancer in Asian Countries: A systematic review and meta-analysis. Ann Glob Health 2020;86:2.
- Nayyar R, Kumar S. Peri-operative antibiotic usage during endourological surgery: A multi-institutional, national-level, cross-sectional audit of prevalent practice pattern in India. Indian J Urol 2023;39:133-41.
- 11. Lin TY, Ou CH, Tzai TS, Tong YC, Chang CC, Cheng HL, *et al.* Validation and simplification of Fournier's gangrene severity index. Int J Urol 2014;21:696-701.
- 12. Wirjopranoto S. Comparison Between Neutrophil-to-Lymphocyte Ratio and Platelet-to-Lymphocyte Ratio As Predictors of Mortality on Fournier's Gangrene Cases. Indian J Urol 2023;39:121-5.
- 13. Smaldone MC, Kutikov A, Egleston BL, Canter DJ, Viterbo R, Chen DY, *et al.* Small renal masses progressing to metastases under active surveillance: A systematic review and pooled analysis. Cancer 2012;118:997-1006.
- 14. Alcalá NE, Futral CD, Miller CA, Sinks AL, Clark PE, Roy OP. Impact of diabetes and chronic kidney disease on active surveillance outcomes

for small renal masses: A cohort study. Indian J Urol 2023;39:142-7.

- 15. Dasgupta R, Das CJ, Gupta A. A rare diagnosis of renal replacement lipomatosis. Indian J Urol 2023;39:165-6.
- Hamid TA, Elmekresh A, Bagheri F. An unusual, delayed, solitary manifestation of a penile lesion in chronic lymphocytic leukemia. Indian J Urol 2023;39:160-2.
- 17. Shrivastava N, Aggarwal D, Jena R. Primary retroperitoneal fibrosis presenting as a renal mass. Indian J Urol 2023;39:157-9.

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