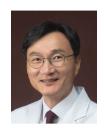
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Celebrating the 60th anniversary of Investigative and Clinical Urology



I am very pleased to publish this special issue of *Investigative and Clinical Urology* (Investig Clin Urol, or ICUrology) celebrating our 60th anniversary. In October 2019, ICUrology celebrated its 60th anniversary during the annual meeting of the Korean Urological Association (Fig. 1). The journal started under the name of *Taehan Pinyogikwa Hakhoe chi* in 1960. It was renamed as the *Korean Journal of Urology* in February 2009 and then changed its title to *Investigative and Clinical Urology* in January 2016, as part of efforts to broaden its scope as an international journal. The journal is currently indexed in Science Citation Index Expanded (SCIE), MEDLINE/PubMed, PubMed Central (PMC), Directory of Open Access Journals (DOAJ), and more. The ICUrology received its first 2018 impact factor of 1638 in 2019.

ICUrology is an international, peer-reviewed, open access journal published bimonthly. It aims to cover both basic and clinical state-of-the-art research related to the field of urology in the formats of original articles, rapid communications, review articles, special articles, innovations in urology,



Fig. 1. Photo taken after the official ceremony of the 60th anniversary of the *Investigative and Clinical Urology* journal during the annual meeting of the Korean Urological Association.

editorials, and letters to the editor. A total of 8,103 papers were published in *Investigative and Clinical Urology* from January 1960 to December 2019. A detailed history and publication data are published in the special issue [1].

For this special issue, we invited 7 worldwide renowned scholars in the field of urology.

The first review is titled "The changing landscape in the management of newly diagnosed castration sensitive metastatic prostate cancer" by Dr. Michael S. Cookson from the University of Oklahoma, USA [2]. The authors emphasized that along with the options available to the clinician for the treatment of men with metastatic castration-sensitive prostate cancer, care of these patients has evolved into a multidisciplinary field with expanding roles for medical, urologic, and radiation oncologists. Dr. Wun-Jae Kim from Chungbuk National University College of Medicine, Korea, reviewed the discovery of urinary biomarkers in urological research [3]. The authors discussed urine-based biomarkers and how these biomarkers can be applied as a diagnostic and prognostic tool in clinical trials and patient care to promote bladder health. In the endourology field, we invited Dr. Daniel D. Eun from Temple University, USA. The authors reviewed the current status of robot-assisted distal ureteral reconstruction for benign pathology [4]. In the field of lower urinary tract dysfunction, Dr. Hann-Chorng Kuo from Buddhist Tzu Chi Medical Foundation and Tzu Chi University, Taiwan, reviewed the clinical application of botulinum toxin A (Botox) in urology, and concluded that although Botox injection is promising for the treatment of overactive bladder and interstitial cystitis/painful bladder syndrome patients refractory to conventional therapies, the need for anesthesia, the occurrence of local complications, and the risks of a large postvoid residual urine volume and urinary tract infection limit its clinical application [5]. In the infection/inflammation field, in a review titled "The human gastrointestinal microbiota and prostate cancer development and treatment"

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by Dr. Sybil Sha from Dartmouth Medical School, USA [6], the authors concluded that the gastrointestinal microbiome plays a role in the pathogenesis of prostate cancer through systemic mechanisms. In pediatric urology, Dr. Mohan S. Gundeti from The University of Chicago Medicine, USA, presented their 8-year experiences in live surgery using robot-assisted laparoscopic pyeloplasty (RAL-P), ureteral reimplantation (RALUR), and hemi-nephrectomy (RAL-HN) and suggested consultation with an ethics review board and formulation of standard guidelines for patient selection, surgical equipment, and operative team [7]. In the field of female urology, Dr. Una J. Lee from Virginia Mason Medical Center, USA, performed a retrospective review to identify demographic and clinical characteristics of patients with symptomatic pelvic floor mesh complications who underwent mesh removal [8]. They concluded that surgical removal can improve presenting symptoms, including for patients with pain in the absence of other indications.

I would like to express my sincere appreciation to all authors for their contribution to the special issue celebrating the 60th anniversary of the journal. The ICUrology has faithfully played its academic role for the past 60 years, and it will continue to lead the field of urology for the next 60 years and more. The final goal of our journal is to become your first-choice journal in urology. I wish all the readers and contributors a Happy New Year.

Best wishes,

CONFLICTS OF INTEREST

The author has nothing to disclose.

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