

Advances in urology

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*Innovation distinguishes between a leader
and a follower.*

– Steve Jobs¹

*Good communication is the bridge between
confusion and clarity.*

– Nat Turner²

The volume of total medical knowledge is expanding at an exponential rate, with estimations of doubling in the 50 years prior to 1950, 7 years by 1980, 3.5 years by 2010 and just 0.2 years, or 73 days, by 2020.³ Rapid innovation benefits patient care by enabling novel solutions to previously untreatable pathology. However, effective subsequent practice change requires active formulation and dissemination of knowledge through various trusted information channels.⁴ In this Urological Society of Australia and New Zealand (USANZ) edition of the *Australian Journal of General Practice*, we explore contemporary challenges and breakthroughs in urology, aiming to provide practical insights for primary care physicians.

Prostate cancer remains a significant health concern in Australia. We discuss contemporary approaches to conservative management,⁵ and then trace the evolution of hormonal therapy, highlighting the role of androgen deprivation therapy (ADT) and emphasise the contemporary importance of added androgen receptor pathway inhibitors.⁶

Gender affirmation surgeries are set to play an increasing role in the management of gender dysphoria. We outline surgical options and referral criteria, advocating for a holistic multidisciplinary approach to ensure comprehensive care for transgender individuals.⁷

Recurrent urinary tract infections (rUTIs) often pose challenges in primary care.^{8,9}

Through a narrative review, Wynn et al simplify rUTIs with a stepwise approach to diagnosis and management with further exploration of contemporary strategies and emerging therapies.¹⁰

Managing obstructive lower urinary tract symptoms (LUTS) in the medically comorbid patient has historically been difficult. Yanada et al explore innovations in minimally invasive surgical interventions, elucidating how an expanding urological toolkit is enabling tailored surgical approaches to individual patient needs.¹¹

Finally, McDonald et al delve into advances in the management of urinary incontinence in the post mesh era with a stepwise, pragmatic approach.¹²

Although urologists have shown innovation across instrument design, robotics and surgical techniques well beyond the scope of this issue, we hope the chosen topics provide a set of practical reference points for the busy general practitioner.

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