

**9 – BEHAVIOUR, PSYCHOLOGY, SEXOLOGY**

**Single institution 2-year patient reported validated sexual function outcomes after nerve sparing robot assisted radical prostatectomy.** *Rodriguez E, Finley DS, Skarecky D, Ahlering TE. J Urol. 2009;181:259.* Overall 90% of men reported return of potency at 24 months and 46% returned to baseline with normal 5-item International Index of Erectile Function (IIEF) scores and 100% firmness. There was no difference in 5-item IIEF scores or fullness between unilateral and bilateral nerve sparing.

**Chronic interpersonal stress predicts activation of pro- and anti-inflammatory signaling pathways 6 months later.** *Miller GE, Rohleder N, Cole SW. Psychosom Med. 2009;71:57.* Chronic interpersonal difficulties (a study on 103 healthy young women) accentuate expression of pro- and anti-inflammatory signaling molecules. Although this process does not result in systemic inflammation under quiescent conditions, it does accentuate leukocytes' inflammatory response to microbial challenge. These dynamics may underlie the excess morbidity associated with social stress, particularly in inflammation-sensitive diseases like depression and atherosclerosis.

**Effect of vaginal polypropylene mesh implants on sexual function.** *Gauruder-Burmester A, Koutouzidou P, Tunn R. Eur J Obstet Gynecol Reprod Biol. 2009;142:76.* Since a very high rate of dyspareunia and impairment of sexual function is reported in women after vaginal mesh repair, a validated questionnaire was administered to 120 women to explore sex life before and after polypropylene mesh insertion (Apogee(R) / Perigee(R)) 1 year after surgery, and gynecologic examinations were performed preoperatively and postoperatively to assess urogenital anatomy and function. No woman complained of dyspareunia at 1-year follow-up. In 40 patients (33.3%), analysis of the validated questionnaires revealed more deeply rooted sexual disorders based on partnership problems and unrelated to surgery. The Authors conclude that sexual dysfunction is only rarely associated with urogynecologic surgery.

**10 – MISCELLANEOUS**

**Female cosmetic genital surgery.** *Goodman MP. Obstet Gynecol. 2009;113:154.* Genital plastic surgery for women has come under scrutiny and has been the topic of discussion in the news media, online, and in medical editorials. In the absence of measurable standards of care, lack of evidence-based outcome norms, and little standardization either in nomenclature or training requirements, concern has been raised by both ethicists and specialty organizations. Some women request alteration of their vulvas and vaginas for reasons of cosmesis, increasing self-esteem and improving sexual function.

**Budesonide induction and maintenance therapy for Crohn's disease during pregnancy.** *Beaulieu DB, Ananthakrishnan AN, Issa M et al. Inflamm Bowel Dis. 2009;15:25.* Budesonide (Entocort EC, AstraZeneca) is an enteric coated locally acting glucocorticoid preparation whose pH- and time-dependent coating enables its release into the ileum and ascending colon for the treatment of mild to moderate Crohn's disease. Budesonide was used during pregnancy at the 6 mg/day dose in 6 patients and 9 mg/day dose in 2 patients. There were no cases of maternal adrenal suppression, glucose intolerance, ocular side effects, hypertension or fetal congenital abnormalities.

**Prevalence of anal squamous intra-epithelial lesion in women presenting genital squamous intra-epithelial lesion.** *Giraldo P, Jacyntho C, Costa C et al. Eur J Obstet Gynecol Reprod Biol. 2009;142:73.* To determine the frequency of anal squamous intra-epithelial lesions (ASIL) in women with genital squamous intra-epithelial lesions (GSIL), 184 patients with histopathological diagnosis of GSIL and 76 controls without GSIL, were submitted to anoscopy in order to determine the presence of ASIL. All the women were HIV-negative. The frequency of ASIL was 17.4% in the GSIL group and only 2.6% in the control group. All the high grade ASIL diagnoses were found in women with cervical SIL.