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### Title

S&T-45 ASSOCIATION BETWEEN PUBIC HAIR GROOMING AND SEXUALLY TRANSMITTED INFECTIONS: RESULTS FROM A NATIONALLY REPRESENTATIVE PROBABILITY SAMPLE

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### Authors

Osterberg, E Charles

Gaither, Thomas

Awad, Mohannad

et al.

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**CONCLUSIONS:** Perioperative anticoagulation during surgical shunting represents a logical next step in the management of ischemic priapism. It resolves the issue of priapism recurrence in the early post-operative period, due to clotting of the shunt site. We suggest incorporating perioperative anticoagulation for priapism shunting procedures in future guidelines for the management of priapism.

**Source of Funding:** None

**S&T-44**

**MULTIPLE USE OF PHOTODYNAMIC DIAGNOSIS OF THE BLADDER IN THE SAME PATIENT CAN BE PERFORMED WITH NO MAJOR SIDE EFFECTS – RESULTS OF A LARGE SINGLE-CENTER STUDY**

*Maria Apfelbeck\*, Tobias Grimm, Alexander Buchner, Birte-Swantje Schneevoigt, Alexander Kretschmer, Friedrich Jokisch, Markus Grabbert, Gerald Schulz, Christian Stief, Alexander Karl, Munich, Germany*

**INTRODUCTION AND OBJECTIVES:** The detection of highly aggressive tumor stages during follow up of urothelial carcinoma is essential for the outcome and cancer specific survival of patients. Photodynamic diagnosis (PDD) has proven to optimize the detection of carcinoma in situ and high grade papillary tumors in multiple meta-analyses. Current EAU guidelines recommend the use of PDD in the following scenario: instead of random biopsies when bladder CIS or high-grade tumour is suspected (e.g., positive cytology, recurrent tumour with previous history of a high-grade lesion). As this scenario can occur also during follow up of patients who already underwent PDD in the past, it seems necessary to study possible side effects or the induction of allergisation if PDD is used several times in the same patient.

**Aim**

The aim of the study was to analyse if multiple performances of PDD during follow up cystoscopies or TUR-BTs are safe to be applied in the same patient.

**METHODS:** Data of patients that were diagnosed and treated for urothelial cancer (UCC) of the bladder in the time from 2008 until 2013 at our institution were collected and analyzed. Special interest was given on observed side effects during the instillation of the substance, on the day of the instillation and during the entire hospital stay. We focused on minor and major side effects associated with the use of Hexylaminolevulinat (HAL), such as allergic events, urinary tract infections, photosensitization of the skin and relevant changes in blood pressure.

**RESULTS:** In total n = 75 patients were included in our analysis in the time from 2008 until 2013. PDD was performed in the same patient 4,62 times mean (minimum two times and maximum 12 times). The time intervals between instillations ranged from 1 month until 44 months. (mean 7,65 months) We observed no major side effect in all patients. Minor side effects were: Urinary tract infections: n= 5, alguria: n= 8, pollakisuria n=8, spasm of the bladder n=19, which could not be associated directly to the use of PDD

**CONCLUSIONS:** In our study there were no major side effects caused by the frequent use of HAL. No effect of the induction of allergisation could be detected in our study cohort by the use of several HAL instillations. PDD can therefore be performed safely in the same patient during the follow up of aggressive tumors without major side effects or the fear of allergisation.

**Source of Funding:** None

**S&T-45**

**ASSOCIATION BETWEEN PUBIC HAIR GROOMING AND SEXUALLY TRANSMITTED INFECTIONS: RESULTS FROM A NATIONALLY REPRESENTATIVE PROBABILITY SAMPLE**

*E. Charles Osterberg\*, Thomas Gaither, Mohannad Awad, Matthew Truesdale, San Francisco, CA; Siobhan Sutcliffe, St. Louis, MO; Isabel Allen, Benjamin Breyer, San Francisco, CA*

**INTRODUCTION AND OBJECTIVES:** Small-scale studies suggest pubic hair grooming is associated with sexually transmitted

infections (STIs). No large study has evaluated the association between grooming and STIs. Our aim is to characterize this possible correlation.

**METHODS:** A national web survey of men and women aged 18 to 65 years was conducted through GfK Custom Research Knowledge Panels, a probability-based web panel designed to be representative of the United States population. Survey questions focused on pubic hair grooming, sexual behavior, and STIs. Cutaneous STIs were categorized as herpes, HPV, molluscum and syphilis. Secretory STIs were categorized as gonorrhea, chlamydia, and HIV. Pubic lice was analyzed separately. We defined extreme grooming as removal of all pubic hair via grooming more than 11 times per year and high frequency grooming as daily or weekly pubic hair trimming. Step-wise multivariable logistic regression modeling was performed to calculate adjusted odds ratios.

**RESULTS:** 7,580 (52.5%) completed the survey. 74% of subjects reported to groom pubic hair, 66% men and 84% women. After adjusting for age and lifetime number of sexual partners, ever having groomed was positively associated with a history of STIs (OR 1.78; CI 1.44-2.20) and with cutaneous STIs (OR 1.87; CI 1.20-2.91). This positive association persisted for extreme groomers (OR 1.63; CI 1.1-2.42) and high frequency groomers (OR 1.47; CI 1.2-1.17). High frequency grooming appeared to be protective for secretory STIs (OR 0.64; CI 0.44-0.94) and extreme grooming appeared to be protective against lice (OR 0.56; CI 0.3-1.02), however this was non significant.

**CONCLUSIONS:** History of pubic hair grooming was positively associated with lifetime history of cutaneous STIs. Removal of all pubic hair may be protective against lice. STI risk reduction strategies should consider inquiry on grooming habits.

Impact of Grooming on STI Adjusted Odds Ratios for Age and Lifetime Sexual Partners						
	Secretory + STIs	Pvalue	Cutaneous ^ STIs	Pvalue	Lice	Pvalue
History of Grooming	0.97 (0.64-1.48)	0.9	1.87 (1.20-2.91)	0.01	1.41 (0.86-2.42)	0.17
No History of Grooming	1 (ref)	----	1 (ref)	----	1 (ref)	----
Extreme* Grooming	0.88 (0.59-1.30)	0.51	1.63 (1.10-2.42)	0.02	0.56 (0.30-1.02)	0.06
Non-Extreme Grooming	1 (ref)	----	1 (ref)	----	1 (ref)	----
High frequency grooming #	0.64 (0.44-0.94)	0.02	1.70 (1.16-2.47)	0.01	0.63 (0.36-1.08)	0.09
Non - High frequency grooming	1 (ref)	----	1 (ref)	----	1 (ref)	----

+ Secretory STI = gonorrhea, chlamydia, and HIV  
 ^ Cutaneous STIs = herpes, HPV, molluscum and syphilis  
 \* Extreme grooming = removal of all pubic hair more than 11 times / year  
 # High frequency grooming = hair trimming daily or weekly

**Source of Funding:** none

**S&T-46**

**COMPARISON OF GLEASON SCORE MISCLASSIFICATION BETWEEN TRANSRECTAL ULTRASOUND – MAGNETIC RESONANCE IMAGING FUSION GUIDED PROSTATE BIOPSIES AND SYSTEMATIC BIOPSIES. A PROSPECTIVE ANALYSIS ACCORDING TO FINAL HISTOPATHOLOGY AFTER PROSTATECTOMY.**

*Sebastian Berg\*, Herne, Germany; Florian Roghmann, Johannes Rüb, Robin Epplen, Rein-Jüri Palisaar, Joachim Noldus, Marko Brock, Herne, Germany*

**INTRODUCTION AND OBJECTIVES:** Targeted prostate biopsies (tBx) of suspicious lesions detected by multiparametric magnetic resonance imaging (MRI) improved detection of prostate cancer (PCa) and revealed more clinical significant cancers. We evaluate the histopathologic PCa misclassification rate of fusion-guided tBx and