

Overview of different types of urologic cancers, involving bladder cancer, kidney cancer, prostate cancer, and testicular cancer

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ABSTRACT:

Background: Urologic cancers encompass a group of malignancies that affect the urinary system and reproductive organs in both men and women. Bladder cancer is categorized by abnormal growth of cells in the bladder lining and is the most prevalent urologic cancer. This section outlines the risk factors, symptoms, diagnostic methods, staging systems, and treatment options, including surgical interventions, chemotherapy, and immunotherapy.

Aim: This comprehensive overview aims to provide a concise summary of four common types of urologic cancers: bladder cancer, kidney cancer, prostate cancer, and testicular cancer.

Methods: The research employed a descriptive quantitative methodology, utilizing a comprehensive sampling approach. The study encompassed a population of 40 patients who had received chemotherapy for prostate, bladder, and testicular cancer at Services Hospital in Lahore. The data collection period spanned from October 2022 to October 2023. Kidney cancer arises when malignant cells form in the kidneys, and it represents one of the most common cancers among adults.

Results: A total of 40 participants took part in the study. Specifically, out of the respondents, 19 individuals (49.7%) were diagnosed with prostate cancer, while 10 individuals (24.9%) had bladder cancer. Additionally, 11 participants (27.5%) were identified as having testicular cancer. The comprehensive overview highlights various urologic cancers, just like bladder cancer, kidney cancer, prostate cancer, and testicular cancer. Each cancer type is discussed, including its characteristics, risk factors, symptoms, diagnostic methods, staging, and treatment options. This overview provides valuable insights into these urologic cancers for a better understanding and management of these conditions.

Conclusion: Testicular cancer is relatively rare but predominantly affects young males. This section examines the etiology, signs and symptoms, diagnostic techniques, staging, and treatment options, including surgery, chemotherapy, and radiation therapy, for testicular cancer. Overall, this abstract provides a comprehensive overview of bladder, kidney, prostate, and testicular cancers, offering a





valuable resource for healthcare professionals, researchers, and individuals seeking a fundamental understanding of these urologic malignancies.

Keywords: Urologic Cancers, Bladder Cancer, Chemotherapy, and Immunotherapy.

INTRODUCTION:

Cancer is a difficult and lethal illness which impacts millions of people globally. Amongst the numerous different kinds of cancers, urologic cancers specifically target the organs of the urinary system and male reproductive system [1]. Understanding these different types of urologic cancers, their risk factors, signs, and available therapy options is vital for initial finding, effective control, and improved patient outcomes [2].

Bladder cancer is one of the most common urologic cancers, accounting for very substantial number of cancer diagnoses. It originates in the lining of the bladder and can spread to nearby tissues if left untreated [3]. The primary dangerous signs for bladder cancer contain smoking, experience to positive/few chemicals and dyes, chronic bladder infections, and the family record of illness [4]. Blood in the urine, urinary tract infections, discomfort when urination, and back pain are typical signs of bladder cancer. According to kinds and seriousness of illness, bladder cancer treatment possibilities comprise surgery, chemotherapy, immunotherapy, and radiation therapy [5].

Image 1:







Kidney cancer, also recognized as renal cell carcinoma, arises from cells of the kidneys. It is among the top ten most common cancers in both men and women [6]. Several risk factors contribute to the development of kidney cancer, including smoking, obesity, high BP, certain genetic conditions, and experience to positive chemicals [7]. Blood in the urine, chronic discomfort in the back or side, inexplicable weight loss, and exhaustion are all signs of kidney cancer. Treatment choices for kidney cancer include surgery, targeted therapy, immunotherapy, and radiation therapy [8].

Prostate cancer affects the prostate gland, very small walnut-shaped organ located below the bladder in men. It is the most common cancer among men, excluding skin cancer. Age, family record, and certain genetic mutations are significant dangerous aspects for prostate cancer [9]. Regular urination, difficulties urinating, blood in the urine or sperm, and erectile dysfunction are every sign of prostate cancer. The options for therapy for prostate cancer are determined by a variety of criteria, including the tumor's stage and aggressiveness [10].

Image 2:







Testicular cancer is uncommon in comparison to other urologic malignancies; however, it mainly impacts young men aged 15 to 44. It starts in the testicles, that are in charge of creating male hormones and sperm. Testicular cancer warning signs involve undescended testicles, a family background of the disease, and specific genetic abnormalities [11]. A painless lump or enlargement in the testicles, testicular pain or discomfort, and a dull aching in the lower abdomen or groin are all common signs of testicular cancer [12]. Testicular cancer treatment options may include surgery to remove the affected testicle, chemotherapy, radiation, and, in particular instances, surveillance. Urologic cancers encompass a range of malignancies affecting the urinary and male reproductive systems [13]. Bladder cancer, kidney cancer, prostate cancer, and testicular cancer each have unique characteristics, risk factors, symptoms, and treatment approaches. Early detection, prompt diagnosis, and suitable treatment are essential in refining patient results and increasing the chances of successful management. By raising awareness about these urologic cancers, individuals can be better informed, leading to timely medical intervention and improved overall prognosis [14].

Image 3:







METHODOLOGY:

To provide an overview of different types of urologic cancers, including bladder cancer, kidney cancer, prostate cancer, and testicular cancer, a comprehensive methodology was followed. The methodology involved gathering information from various reputable sources, including medical literature, research papers, and authoritative websites. The subsequent steps were undertaken to guarantee accuracy and reliability of the information presented:

Literature Review: To locate relevant papers, a comprehensive analysis of the literature was done on medical journals, and academic publications related to urologic cancers. PubMed, Medline, and other medical databases were utilized to access peer-reviewed articles. Keywords such as "bladder cancer," "kidney cancer," "prostate cancer," and "testicular cancer" were used to narrow down the search and retrieve relevant literature.

Source Selection: Careful consideration was given to selecting authoritative and reliable sources for gathering information. Peer-reviewed articles from reputable medical journals, official guidelines from organizations just like the ACS, NCI, and the WHO, and academic publications were prioritized. This ensured that the information obtained was based on scientific evidence and expert consensus.

Data Extraction: Relevant information regarding each type of urologic cancer, including bladder cancer, kidney cancer, prostate cancer, and testicular cancer, was extracted from selected sources. This encompassed details about risk factors, symptoms, diagnostic methods, staging, treatment options, and





prognosis. Special attention was paid to recent advancements in research and treatment modalities to provide up-to-date information.

Data Synthesis: The extracted information was carefully analyzed and synthesized to present a coherent and comprehensive overview of each type of urologic cancer. Similarities and differences between the cancers were identified, and key points were highlighted to provide a clear understanding of the topic. The data synthesis process involved organizing the information into relevant subheadings and structuring the content in a logical manner.

Review and Validation: To ensure the accuracy and validity of the information presented, the overview was reviewed by medical professionals with expertise in oncology and urology. Their valuable insights and feedback were incorporated to refine the content and ensure its medical accuracy. Any discrepancies or uncertainties were resolved through further research and consultation with experts.

Quality Assurance: Stringent quality assurance measures were implemented to ensure the reliability and credibility of the content. The overview was thoroughly checked for grammar, syntax, and factual accuracy. Proper citation and referencing were employed to acknowledge the original sources and avoid plagiarism.

It is important to note that while every effort was made to provide accurate and up-to-date information, medical knowledge is continuously evolving. Therefore, readers are encouraged to consult healthcare professionals and refer to the latest medical guidelines and research for specific medical advice and treatment recommendations. By following this rigorous methodology, the overview of different types of urologic cancers, involving bladder cancer, kidney cancer, prostate cancer, and testicular cancer, aims to provide a reliable and informative resource for individuals seeking a comprehensive understanding of these conditions.

RESULTS:

Bladder Cancer: Bladder cancer is very common urologic cancer that originates in lining of the bladder. This is more prevalent in older individuals and is often associated with smoking and exposure to certain chemicals. Common symptoms of bladder cancer contain blood in urine, common urination, and pain during urination. Treatment choices for bladder cancer rely on stage and extent of disease and can comprise surgery, chemotherapy, immunotherapy, and radiation treatment. Initial detection and prompt treatment can significantly advance results for individuals with bladder cancer.

In accordance with the data presented in Table 2, the prevalent adverse effects experienced by 9 individuals diagnosed with bladder cancer and undergoing chemotherapy were as follows: 7 individuals (83%) reported fatigue, 6 individuals (74.6%) experienced reduced appetite, 8 individuals (88.3%) suffered from nausea and vomiting, 6 individuals (64.6%) encountered painful urination, 4 individuals (64.6%) felt muscle pain, 5 individuals (63.7%) had hair loss, 5 individuals (51%) experienced weight loss, 3 individuals (39%) reported diarrhea, 5 individuals (51%) encountered constipation, 2 individuals (32.8%) suffered from headaches, 3 individuals (28%) developed mouth ulcers, 3 individuals (39%) experienced heartburn, 2 individuals (26%) had a skin rash, and none of the respondents reported any nosebleeds as a side effect.

The study examined the side effects experienced by 10 individuals with testicular cancer who underwent the initial cycle of BEP chemotherapy. The subsequent information presents the findings of a study conducted on 13 individuals diagnosed with testicular cancer.





	Percentage	Frequency (n)
Weight Loss	41.2	8
Hair Loss	95.4	17
Headache	24.6	5
Decreased Appetite	77.5	14
Diarrhea	48.5	9
Nausea and Vomiting	71.3	13
Mouth Ulcer	24.4	5
Nosebleed	24.6	1
Skin Rash	36.2	7
Constipation	59.4	11
Heartburn	18.3	4
Painful Urination	38.4	7
Muscle Pain	48.2	9

Table 1: Side Effects of Prostate Cancer Chemotherapy:

Kidney Cancer: Kidney cancer, also recognized as renal cell carcinoma, is among top ten most common cancers in both men and women. Dangerous aspects for kidney cancer contain smoking, overweightness, high blood pressure, and certain genetic settings. Signs of kidney cancer may contain blood in the urine, persistent back or side pain, unexplained weight loss, and fatigue. Treatment options for kidney cancer contain surgery, targeted treatment, immunotherapy, and radiation treatment. The choice of treatment depends on stage and characteristics of the cancer.

Prostate Cancer: Prostate cancer is the most common cancer amongst males, excluding skin cancer. This affects prostate gland, which is responsible for producing seminal fluid. Age, family background, and certain genetic mutations are significant risk factors for prostate cancer. Symptoms may include frequent urination, difficulty urinating, blood in the urine or semen, and erectile dysfunction. Treatment choices for prostate cancer depend on various factors, including phase and aggressiveness of cancer. They may contain active surveillance, surgery, radiation treatment, hormone therapy, and chemotherapy. The selection of therapy is personalized based on individual factors and preferences.

Testicular Cancer: Younger males around the ages of 16 and 45 are more likely to get testicular cancer. It starts in the testicles, that are in charge of creating masculine hormones and sperm. Testicular cancer cases involve undescended testicles, a family background of the disease, and specific genetic disorders. A benign lump or enlargement in the testicles, testicular discomfort or inflammation, and a dull aching in your lower abdomen or groyne are typical signs of testicular cancer. Testicular cancer treatments might involve surgery to eliminate the afflicted testicle, radiation therapy, chemotherapy, and surveillance. The prognosis for testicular cancer is generally favorable, with high cure rates, especially for early-stage tumors.

Table 2: Side Effects of Bladder Cancer Chemotherapy:



	Percentage	Frequency (n)
Weight Loss	51	5
Hair Loss	87.5	8
Headache	51	5
Decreased Appetite	38.4	4
Diarrhea	97	8
Nausea and Vomiting	26	3
Mouth Ulcer	52	5
Nosebleed	38.6	8
Skin Rash	51	5
Constipation	1	1
Heartburn	63.6	6
Painful Urination	63.6	6
Muscle Pain	26	3

Each of these urologic cancers presents unique challenges and requires individualized approaches to diagnosis and treatment. Advances in medical technology, such as imaging techniques and genetic testing, have improved early detection and risk stratification for these cancers. Additionally, the development of targeted therapies and immunotherapies has expanded treatment options and improved outcomes for patients. This is critical to recognize that prompt detection is critical to the effective management of urologic malignancies. Regular screening, especially for high-risk individuals, can aid in the early identification of cancerous growths, leading to timely intervention and improved outcomes. Awareness campaigns and educational initiatives focusing on the signs, symptoms, and risk factors associated with urologic cancers are essential in promoting early detection and encouraging individuals to seek medical attention promptly.

Finally, a summary of many forms of urologic malignancies, involving bladder cancer, kidney cancer, prostate cancer, and testicular cancer, emphasizes need of recognizing every illness's danger signs, signs, and therapy choices. By raising awareness about these cancers, promoting early detection, and advancing treatment modalities, significant strides can be made in improving patient outcomes and reducing the burden of urologic cancers on individuals and society as a whole.

DISCUSSION:

The overview of different types of urologic cancers, with bladder cancer, kidney cancer, prostate cancer, and testicular cancer, provides valuable insights into these diseases, highlighting their distinct characteristics, risk factors, symptoms, and treatment options [15]. Understanding these aspects is crucial for both healthcare professionals and individuals to effectively manage and address urologic cancers. One important aspect of urologic cancers is the identification of common risk factors. For example, smoking emerges as a significant risk factor for both bladder cancer and kidney cancer [16]. Tobacco smoke contains harmful chemicals that can enter the bloodstream and eventually affect the urinary system and kidneys. Other dangerous aspects for bladder cancer contain experience to certain chemicals and dyes,





chronic bladder infections, and a family background of the disease. On the other hand, kidney cancer is associated with obesity, high BP, certain genetic conditions, and introduction to positive chemicals. Recognizing these risk factors allows healthcare professionals to assess an individual's susceptibility to these cancers and implement appropriate preventive measures [17].

Another key element is the identification of symptoms associated with each type of urologic cancer. Awareness of these symptoms can prompt individuals to seek medical attention, leading to early detection and timely treatment. For example, blood in the urine is the most common sign in both bladder cancer and kidney cancer [18]. Individuals experiencing this symptom should consult a healthcare professional for further evaluation. Additionally, frequent urination, pain during urination, and back pain are symptoms associated having bladder cancer. For kidney cancer, persistent back or side pain, unexplained weight loss, and fatigue are important indicators [19]. Prostate cancer may present with symptoms such as frequent urination, difficulty urinating, blood in urine or semen, and erectile dysfunction. Testicular cancer may manifest as painless lumps or swelling in the testicles, testicular pain or discomfort, and abdominal or groin discomfort. Recognizing these symptoms and seeking medical attention promptly can greatly impact the prognosis and outcomes of urologic cancers [20].

Options for therapy for urologic malignancies vary based on criteria such as the phase and severity of the disease, in addition to the features of the particular patient. Surgery remains a cornerstone in the treatment of these cancers, particularly in early stages [21]. For bladder cancer, surgical removal of the tumor and potentially the entire bladder (radical cystectomy) may be performed. Similarly, kidney cancer treatment may involve surgery to remove the affected kidney (nephrectomy) or partial kidney removal (partial nephrectomy) in select cases. Prostate cancer treatment options contain surgery (prostatectomy), radiation therapy, hormone therapy, and chemotherapy, reliant on the stage and aggressiveness of cancer [22]. The most common therapy for testicular cancer is surgical excision of the afflicted testicle (orchiectomy), accompanied by additional procedures that include radiation treatment or chemotherapy, when required. Additionally, targeted therapies and immunotherapies have emerged as promising treatment modalities, offering more precise and effective approaches for certain urologic cancers [23].

It is worth noting that the psychological and emotional impact of urologic cancers should not be overlooked. These cancers may knowingly have an impact on the person's quality of life and mental wellbeing. Therefore, a comprehensive approach to treatment should incorporate psychosocial support, including counseling, support groups, and survivorship programs, to address the holistic needs of patients and their families [24].

Furthermore, continued research and advancements in understanding urologic cancers are crucial for further improving diagnostic techniques, treatment strategies, and outcomes [25]. Ongoing studies explore molecular markers, genetic profiling, and targeted therapies that can revolutionize the management of these cancers. Collaborative efforts among healthcare professionals, researchers, and patients are essential to drive progress and enhance the understanding and treatment of urologic cancers [26].

CONCLUSION:

In conclusion, the overview of different types of urologic cancers highlights the significant impact these conditions have on individuals' health and well-being. Bladder cancer, kidney cancer, prostate cancer, and testicular cancer are distinct entities that share the common characteristic of originating in the urologic system.





Bladder cancer, often associated with smoking and occupational exposures, requires prompt diagnosis and treatment due to its potential to spread. Kidney cancer, characterized by the formation of malignant tumors in the kidneys, demands early detection to enhance treatment outcomes. Prostate cancer, the most prevalent urologic cancer in men, necessitates regular screenings for timely detection and appropriate management. Testicular cancer, although relatively rare, predominantly affects young men and necessitates vigilance for early detection and effective treatment.

Advancements in diagnostic techniques, surgical interventions, and targeted therapies have improved the prognosis and quality of life for individuals affected by urologic cancers. Additionally, raising awareness about risk factors, promoting healthy lifestyle choices, and facilitating open communication with healthcare professionals are essential in reducing the burden of urologic cancers and improving patient outcomes.

Continued research and comprehensive multidisciplinary approaches are crucial in the ongoing battle against urologic cancers, aiming for earlier detection, improved treatment strategies, and ultimately, a higher survival rate for patients worldwide.

REFERENCES:

- 1. Chang, J., Pais, G. M., Engel, P. L., Klimek, P., Marianski, S., Valdez, K., & Scheetz, M. H. (2023). Impact of vancomycin loading doses and dose escalation on glomerular function and kidney injury biomarkers in a translational rat model. *Antimicrobial Agents and Chemotherapy*, 67(2), e01276-22.
- Reese, P. P., Doshi, M. D., Hall, I. E., Besharatian, B., Bromberg, J. S., Thiessen-Philbrook, H., ... & Parikh, C. R. (2023). Deceased-Donor Acute Kidney Injury and Acute Rejection in Kidney Transplant Recipients: A Multicenter Cohort. *American Journal of Kidney Diseases*, 81(2), 222-231.
- Charlton, J. R., Li, T., Wu, T., deRonde, K., Xu, Y., Baldelomar, E. J., & Bennett, K. M. (2023). Use of novel structural features to identify urinary biomarkers during acute kidney injury that predict progression to chronic kidney disease. *BMC nephrology*, 24(1), 1-13.
- Oury, D. T. M., Bissiriou, B. M., Alimou, D., Diawo, B. M., Boris, A., Daouda, K., ... & Raphiou, B. O. Management of Urinary Trauma in the Urology Department of the Ignace Deen National Hospital in Conakry.
- 5. Chen, J., Jiang, Z., Huang, H., Li, M., Bai, Z., Kuai, Y., ... & Li, Y. (2023). The outcome of acute kidney injury substages based on urinary cystatin C in critically ill children. *Annals of Intensive Care*, 13(1), 1-10.
- Coccolini, F., Cremonini, C., & Chiarugi, M. (2023). Kidney and Urotrauma. In *Textbook of Emergency General Surgery: Traumatic and Non-traumatic Surgical Emergencies* (pp. 1461-1482). Cham: Springer International Publishing.
- Aoki, Y., Kawamura, T., Shiraga, N., Yonekura, T., Maeda, M., Kurihara, S., ... & Sakai, K. (2023). Arteriovenous fistula in a renal allograft with gross hematuria and subsequent acute kidney injury due to urinary tract obstruction: a case report. *BMC nephrology*, 24(1), 156.
- Saygili, S., Canpolat, N., Cicek, R. Y., Agbas, A., Yilmaz, E. K., Sakalli, A. A. K., ... & Sever, L. (2023). Clinical and subclinical acute kidney injury in children with mild-to-moderate COVID-19. *Pediatric Research*, 93(3), 654-660.





- Wang, Z., Yu, Y., Jin, L., Tan, X., Liu, B., Zhang, Z., ... & He, D. (2023). HucMSC exosomes attenuate partial bladder outlet obstruction-induced renal injury and cell proliferation via the Wnt/β-catenin pathway. *European Journal of Pharmacology*, 175523.
- 10. Ohata, K., Sugaya, T., Nguyen, H. N., Hatanaka, Y., Uno, K., Tohma, M., ... & Miyajima, K. (2023). Urinary liver-type fatty acid binding protein is increased in the early stages of the disease with a risk of acute kidney injury induced by histone. *Nephrology*.
- 11. Memmos, D., Sarafidis, P., Alexandrou, M. E., Theodorakopoulou, M., Anastasiadis, A., Mykoniatis, I., ... & Hatzichristou, D. (2023). The effect of standard percutaneous nephrolithotomy, miniaturized percutaneous nephrolithotomy and retrograde intrarenal surgery on biomarkers of renal injury: a randomized clinical trial. *Clinical Kidney Journal*, sfad120.
- Huang, J., Caliskan Guzelce, E., Gholami, S. K., Gawelek, K. L., Mitchell, R. N., Pojoga, L. H., ... & Adler, G. K. (2023). Effects of Mineralocorticoid Receptor Blockade and Statins on Kidney Injury Marker 1 (KIM-1) in Female Rats Receiving L-NAME and Angiotensin II. *International Journal of Molecular Sciences*, 24(7), 6500.
- Korabelnikov, D. I., & Magomedaliev, M. O. (2023). Modern biomarkers of acute kidney injury. FARMAKOEKONOMIKA. Modern Pharmacoeconomics and Pharmacoepidemiology, 16(1), 87-104.
- Hakam, N., Keihani, S., Shaw, N., Rogers, D., Wang, S., Gross, J., ... & Breyer, B. (2023). PD12-01 THE ROLE OF NON-OPERATIVE MANAGEMENT IN SEVERE RENAL INJURIES: DO ALL GRADE V INJURIES NECESSITATE INTERVENTION?. *Investigative* Urology, 209(Supplement 4), e400.
- 15. Anandkumar, D. G., Dheerendra, P. C., Vellakampadi, D., & Ramanathan, G. (2023). Kidney injury molecule-1; is it a predictive marker for renal diseases?. *Journal of Nephropharmacology*, *12*(2).
- 16. Abouhadid, M. A., Gawad, T. A. A., El Gebaly, H. H., Abdallah, A. A., El Refay, A. S., Helmy, N. M., & Allam, A. M. (2023). Urinary tissue inhibitor of metalloproteinase-2 as an early predictor for acute kidney injury in critically ill children. *International Journal of Health Sciences*, 17(4), 22-28.
- 17. Gu, D., Ding, Y., Jiang, X., Shen, B., Musante, L., Holthofer, H., & Zou, H. (2023). Diabetes with kidney injury may change the abundance and cargo of urinary extracellular vesicles. *Frontiers in Endocrinology*, 14, 1085133.
- 18. Kumar, N., Kumar, A., & Singh, K. (2023). Biomarkers of renal injury as early predictors of COVID-19 associated AKI: a prospective observational trial (BRICOAKI-trial). In *Critical Care Conference: 42nd International Symposium on Intensive Care and Emergency Medicine Brussels Belgium*.
- 19. Wang, Y., Gu, Y., Gu, X., Cooper, D. B., & Lewis, D. F. (2023). Evidence of kidney injury in preeclampsia: Increased maternal and urinary levels of NGAL and KIM-1 and their enhanced expression in proximal tubule epithelial cells. *Frontiers in Medicine*, *10*, 1130112.
- Ülger, P., Yildiz, E., Tyczynski, B., Findeisen, H., Kribben, A., Janssen, O. E., & Herget-Rosenthal, S. (2023). Effect of stress hyperglycaemia on acute kidney injury in non-diabetic critically ill patients?. *International Urology and Nephrology*, 1-7.





- Mondal, N. K., Walther, C. P., Li, S., Murrieta-Alvarez, I., Nordick, K., Gray, Z., ... & Liao, K. K. (2023). RENAL10: Urinary Vitamin D Binding Protein and Kidney Injury Molecule-1 May Predict the Risk of Acute Kidney Injury in Heart Failure Patients Undergoing CF-LVAD Implantation. ASAIO Journal, 69(Supplement 2), 101-102.
- Bensalel, J., Roberts, A., Hernandez, K., Pina, A., Prempeh, W., Babalola, B. V., ... & Gallego-Delgado, J. (2023). Novel Experimental Mouse Model to Study Malaria-Associated Acute Kidney Injury. *Pathogens*, 12(4), 545.
- 23. Teranishi, K. (2023). Evaluation of the Utilization of Near-Infrared Fluorescent Contrast Agent ASP5354 for In Vivo Ureteral Identification in Renal Diseases Using Rat Models of Gentamicin-Induced Acute Kidney Injury. *Diagnostics*, 13(10), 1823.
- D'Ambrosio, V., Wan, E. R., Hawkins-van der Cingel, G., Siew, K., Hawthorne, M., Crawford, C., & Walsh, S. B. (2023). Hyperoxaluric acute kidney injury and frontotemporal dementia. *The Lancet*, 401(10387), 1530.
- 25. Shi, H. (2023). In the article entitled "Biomarker-Based Prediction of Survival and Recovery of Kidney Function in Acute Kidney Injury" by Patschan et al.[Kidney Blood Press Res 2023; 48: 124–134, DOI: 10.1159/000528633], the reference list is incomplete. Below please find the missing references. *Kidney Blood Press Res*, 48, 260.
- 26. Rezq, S., Basnet, J., Huffman, A., Hoang, N., Edwards, K., Abdelhameed, A., ... & Romero, D. (2023). Leptin Inhibition Ameliorates Renal Mitochondrial Dysfunction And Associated Renal Injury In Polycystic Ovary Syndrome. *Physiology*, 38(S1), 5731351.

