
INTRODUCTION

The Changing Role of the Primary Care Physician in the Management of Urologic Conditions

I am very pleased to introduce our latest Supplement in the series: *Urology Update for Primary Care Physicians*. In 2008 we came to the conclusion that the primary care physician (PCP) had a dramatic role and impact in diagnosing and managing a number of urologic conditions that affect their patients. To that end we have published a number of updates always looking at needs assessments from the PCP. If anything, the present Supplement only emphasizes this role.

The PCP, with the knowledge and understanding gained from these reviews should feel comfortable in diagnosing a number of these conditions and offering strategies of treatment that we have suggested. If the patient does not respond as expected, or if there are any concerns, then the PCP can very easily refer to the specialist. To provide backup for the PCP, in certain conditions we have highlighted “RED FLAGS” denoting symptoms or signs that require early referral.

In this Supplement we have attempted to emphasize the importance in trying to encourage the patient to report the symptoms suggestive of these pervasive conditions (Overactive Bladder – Radomski,¹ BPH – Elterman,² and Nocturia – Barkin³), because there are excellent, effective and safe ways of treating the conditions that can have a dramatic effect on the patients’ lives.

We also highlight the fact that there have been reports of potential risks and side effects of some of the frequently prescribed old and new medical therapies. We try to provide the PCP the information needed to dispel some of the myths associated with, for example, Testosterone Replacement Therapy and increased cardiac risk, (Hassan⁴).

Finally, in our review of the old and new medical therapies for the management of, first castrate sensitive and then castrate resistant prostate cancer, we highlight the critical role that the PCP plays in helping to identify early and manage some of the expected and unexpected side effects of these life saving therapies, (Mak⁵).

At *The Canadian Journal of Urology*, (CJU), we continue to promote and support the idea that there is a partnership between the PCP and the Urologist in the comprehensive care we provide to our patients suffering from the many common urologic conditions in both men and women.

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References

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