



## A new prognostic model for localized renal cell carcinoma

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Dear Editor,

I read with interest the review of Tobias Klatte et al. about the prognostic factors and models for renal cell carcinoma, recently published on *World Journal of Urology* [1].

I noted that among the prognostic models for clinically localized disease reported in this article, a new score [called GRade, Age, Nodes and Tumor (GRANT), Table 1], recently developed and validated on ASSURE trial population, is missing [1, 2]. The performance of the GRANT score is similar to that of the UISS modified model [3], but its strength, compared with the others already available, is the ease and clarity of its calculation, with a potential role in the clinical practice [2]. Moreover, the GRANT score is validated also in non clear cell histology [2]. Last, it is the only model that included the age of the patients and it was originally developed in an adjuvant trial of immunotherapy with cytokines [4]: these considerations could candidate this score also as a useful tool as stratifying factor in the future adjuvant immunotherapy trials.

**Table 1** The GRANT score: the number of unfavorable risk factors is summed, and patients with 0 or 1 factor are classified in the favorable risk group, while patients with 2 or more risk factors are classified in the unfavorable risk group

Variable	Score
Age	
≤60	0
>60	1
pT (TNM 2002 <sup>a</sup> )	
1-2-3A	0
3B-3C-4	1
Pathological nodal status	
0-X	0
1-2	1
Fuhrman grade	
1-2	0
3-4	1
Favorable group	0-1
Unfavorable group	≥2

<sup>a</sup>TNM according to 2002 TNM Staging (American Joint Committee on Cancer 6th edition)

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## Compliance with ethical standards

**Conflict of interest** S. Buti received honoraria for advisory role and as speaker at scientific events from Pfizer, BMS, IPSEN, Pierre-Fabre, Merck Sharp & Dohme (MSD), AstraZeneca; he also received research funding from Novartis.

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