

## 32- COMPARISON OF TWO TEMPLATES OF LYMPHADENECTOMY IN PATIENTS AFFECTED BY HIGH RISK PROSTATE CANCER

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### OBJECTIVES

We have compared two templates of pelvic lymphadenectomy in high risk patients undergoing an extraperitoneal or transperitoneal laparoscopic radical prostatectomy.

### METHODS

- High risk patients (PSA  $\geq 20$  ng/ml or  $\geq$  cT2c or Gleason  $>7$ )
- Two consecutive series of patients
- Group 1: extraperitoneal lap RP; external iliac and obturator nodes
- Group 2: transperitoneal lap RP; common iliac, hypogastric, external iliac, obturator nodes
- Comparison of number of nodes removed, positive nodes, complications

### RESULTS

Table 1. Baseline characteristics

		All pts 178 pts	Group 1 129 pts	Group 2 49 pts	p value
Age	y	66.3 $\pm$ 10.3	67.3 $\pm$ 5.7	63.9 $\pm$ 17.3	0.05
PSA	ng/ml	11.3 $\pm$ 7.7	10.6 $\pm$ 6.1	13.0 $\pm$ 10.6	0.05
PSAD	n	0.25 $\pm$ 0.19	0.23 $\pm$ 0.16	0.32 $\pm$ 0.27	0.07
BMI	n	27.1 $\pm$ 3.4	27.1 $\pm$ 3.4	27.2 $\pm$ 3.5	0.05
Clinical Stage	cT1c	43.8 (78)	48.8 (63)	30.6 (15)	0.07
	cT2	53.9 (96)	51.2 (66)	61.2 (30)	
	cT3	2.3 (4)	0	8.2 (4)	
Biopsy Gleason	3+3	5.6 (10)	7.7 (10)	0	0.001
	3+4	4.5 (8)	3.1 (4)	8.2 (4)	
	4+3	49.4 (88)	60.5 (78)	20.4 (10)	
	>7	40.4 (72)	28.7 (37)	71.4 (35)	
% positive cores	n (SD)	45.4 ( $\pm$ 26.1)	41.3 ( $\pm$ 25.5)	55.7 ( $\pm$ 25.1)	0.001

Table 2. Postoperative outcomes

		All pts 178 pts	Group 1 129 pts	Group 2 49 pts	p value
Operative time	min.	247.3 ( $\pm$ 59.6)	241.1 ( $\pm$ 61.3)	267.2 ( $\pm$ 49.1)	0.02
Prostate volume	ml	52.5 ( $\pm$ 19.7)	53.2 ( $\pm$ 20.3)	50.2 ( $\pm$ 17.8)	0.41
Pathological Stage	pT2	60.2	65.2	46.9	0.01
	pT3a	25.2	23.2	30.7	
	pT3b	13.5	10.8	20.4	
	pT4	1.1	0.8	2.0	
Pathological Gleason	3+3	3.4	4.6	0	0.13
	3+4	17.4	20.2	10.2	
	4+3	47.2	44.2	55.1	
	>7	32.0	31.0	34.7	
Positive SM	%	24.2	19.4	36.7	0.02
Complications	%	18.0	22.5	6.1	0.05
Lymphocele	%	3.4	4.7	0	0.12
Nodes removed	n (SD)	21.2 ( $\pm$ 11.1)	17.0 ( $\pm$ 8.6)	32.2 ( $\pm$ 9.1)	<0.001
Positive nodes pts		7.3	2.3	20.4	<0.001

### CONCLUSIONS

In our retrospective analysis, a transperitoneal laparoscopic radical prostatectomy with an extended lymphadenectomy template allows to remove a greater number of nodes and to obtain an higher number of positive nodes without increasing risk of complications