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# AUA VIRTUAL EXPERIENCE



## MP72-03 Assessing the impact of absence of detrusor muscle in Ta-LG urothelial carcinoma of the bladder on recurrence free survival

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**Background:** to assess if the absence of detrusor muscle at TURBt pathologic report has a negative impact on recurrence free probability in patients with a Ta LG UC of the bladder.

Material and Methods: Study period: 2008 - 2018

#### **Inclusion criteria:**

- Low-grade, pTa, UC
- Minimum follow-up of 1-yr

#### **Exclusion criteria:**

- Previous history of high-grade UC
- Previous history of upper urinary tract UC
- Bladder tumors differentiations other than UC

**Surgical technique:** All patients with a new diagnosis of BC underwent standard TURBt. Standard practice requires to obtain DM in all resections, regardless of tumor appearance.



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**Results:** 203 consecutive patients were included. Patients and tumors characteristics were reported in Table1.

At Kaplan-Meier analysis <u>low-risk</u> <u>EORTC</u> <u>cohort</u> <u>displayed</u> <u>a</u> <u>significantly</u> <u>higher</u> <u>RFS</u> <u>probability</u> <u>compared with intermediate-risk cohort</u> (Figure 1a).

At univariable Cox regression multiple tumors, tumor diameter  $\geq$ 3cm, previous history of UC  $\leq$ 1 yr and combined EORTC risk group were significant predictors of recurrence. Absence of detrusor muscle at pathologic report (Figure 1b) and adjuvant intravesical treatments had negligible impacts on RFS probabilities (Table 2).

**Conclusion:** EORTC risk group is a strong predictive patients with Ta-LG UC of the bladder. Absence of de negligible role on recurrence of patients with Ta-LG considered as a mandatory data to assess prognosis or

