

**MP41-02 CAN EXTRA ANATOMICAL URINARY DIVERSION (EAUD) BE USED SAFELY IN ELDERLY CANCER PATIENTS?**

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# MULTICENTER TRIAL Results

- Prospective cohort study performed at 4 Hospitals with 60 patients between 2016 and 2018.
- There was no mortality in the first 90 days.
- In 4 cases an explant was performed: 1 due to displacement of the bypass distal end, 1 due to a multidrug-resistant infection and in 2 cases due to an enteric fistula.

	OLDER PTS (>70 years old)	YOUNGER PTS (<70 years old)
Mean Age	76 years (SD 5.55)	53 years (SD 10.06)
N° of cases	11 (31%)	25 (69%)
Intraoperative complications	No significant difference (p>0.39)	
Explants (cases)	1	3

	MALIGNANT CASES	BENING CASES	
N° of Cases	36 (60%)	24 (40%)	
Median Operative Time (min)	94.36	30.37	p>0.17
Hospital Stay (days)	12.50 days $\pm$ 7.11	21.00 days $\pm$ 28.56	P = 0.07 (ns)

## Conclusions

EAUD is a clinically safe and promising treatment for elderly patients with complex ureteral stenosis due to cancer. EAUD reduces the number of nephrostomies and changes of JJ stents and thereby improving the quality of life and reduces the costs. However, the procedure is complex due to high comorbidity patients with previous radiation or surgery and the high risk of infection. Patients must be appropriately informed about these risks.