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RECURRENCES AFTER ROBOT-ASSISTED RADICAL CYSTECTOMY: RESULTS FROM THE INTERNATIONAL ROBOTIC CYSTECTOMY CONSORTIUM

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Introduction

- Concern for more Local recurrence after RARC.
- We sought to describe recurrences following RARC utilizing a multinational database.

Methods

- IRCC (28 institutions, from 14 countries).
- Recurrence rates and patterns were analyzed.
- 2107 patients were analyzed with a median follow up of 26 months.

RARC vs Historic Open Series

	Present	Venkatramani et al	Bochner et al	Collins et al	Albisinni et al	Ngyuen et al	Hautmann et al	Madersbacher et al	Stein et al
# of patients	2107	152 vs 150	58 vs 60	717	503	383	1100	507	1054
RC Type	RARC	ORC vs RARC	ORC vs RARC	RARC	Laparoscopic	ORC vs RARC	ORC	ORC	ORC
Urothelial Carcinoma, %	62	76 Vs 82	95 vs 95	95	98	89 vs 95	100	100	100
≥pT3, %	37	32 vs 31	35 vs 28	33	42	43 vs 34	19	33	29
% +ve margins	6	5 vs 6	5 vs 3	4.8	6	13 vs 6	NR	NR	NR
RFS	66 at 5 yrs	65 vs 58 at 3 yrs	NR	75 at 2 yrs	62 at 10 yrs	60 vs 70	66 at 5 yrs	50 at 10 yrs	66 at 10 yrs
Local recurrence, (%)	11	3 vs 4	NR	11	4	23 vs 18	NR	8	7
Distant Metastases, (%)	18	23 vs 22	NR	18	23	36 vs 29	NR	25	22
% of peritoneal carcinomatosis	1.2	0.01 vs 0.01	3 vs 3	0.7	NR	8 vs 21	NR	NR	NR
Abdominal wall / Port-site metastases, (%)	1	0.01 vs 0	0 vs 8	0.3 for port-site only	NR	NR	NR	NR	NR
% of extra-pelvic lymph nodes	5	0.06 vs 0.06	17 vs 8	7	NR	15 vs 23	NR	NR	NR

Conclusion

RARC seems to have comparable rates and patterns of recurrences compared to large ORC series.