

MP74-04

RADICAL PROSTATECTOMY FOR GLEASON 3+3
PROSTATE CANCER;
WHO, HOW AND WHY?

ANALYSIS OF THE BRITISH ASSOCIATION OF
UROLOGICAL SURGEONS COMPLEX OPERATIONS
DATABASE.

Joseph B John¹, John Pascoe¹, Sarah Fowler², Thomas Walton³, Mark Johnson⁴, Jonathan Aning⁵, Benjamin Challacombe^{2,6} and John S McGrath^{1,2} on behalf of the BAUS Section of Oncology.

¹Royal Devon and Exeter NHS Foundation Trust

²British Association of Urological Surgeons

³Nottingham University Hospitals NHS Trust

⁴Newcastle Upon Tyne Hospitals NHS Foundation Trust

⁵North Bristol NHS Trust

⁶Guy's and St Thomas' NHS Foundation Trust



The British Association
of Urological Surgeons

BACKGROUND AND METHODS

Background:

- There is a risk of overtreating low-grade prostate cancer (PCa) with radical prostatectomy (RP).

Objective:

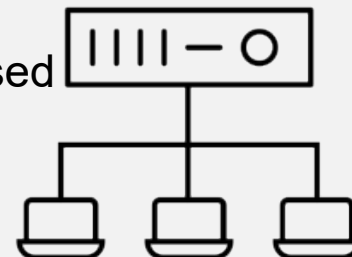
- To understand modern RP practices in England for Gleason 3+3 PCa

Methods:

- BAUS RP database for England (2016-18) analysed
- 21,973 RPs
- 2,627 for Gleason 3+3 (12% of RPs)



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FINDINGS

Pre-operatively:

- \geq cT2b and PSA \geq 10: 10%
- \geq cT2b and PSA <10: 24%
- \leq cT2b and PSA \geq 10: 18%

Conclusions:

- Rates of RP for 3+3 are reduced
- Clinically justified
- Peri-operative outcome data indicate that RP in this cohort is safe
 - Transfusion rate = 0.4%, Clavien-Dindo 3-4 = 0.8%.

Post-operatively:

