

**RANDOMIZED CONTROLLED TRIAL ASSESSING THE IMPACT OF EARLY DORSAL VENOUS COMPLEX (EDVC) LIGATION ON URINARY CONTINENCE RECOVERY AFTER ROBOT-ASSISTED RADICAL PROSTATECTOMY (RARP): FULL REPORT ONE MONTH AFTER SURGERY.**

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- ❑ **312 consecutive patients** treated with robotic prostatectomy have been randomly assigned to the experimental group (early DVC ligation,  $n=156$ ) and to the control group (standard technique,  $n=156$ ).
- ❑ Primary endpoint: **continence recovery at 1 and 4 months from surgery**. Continence defined as **0-1 pad/die**

## DESCRIPTION OF THE TECHNIQUES

### Standard technique

The DVC is ligated after the bladder neck incision and the development of the postero-lateral aspect of the prostate.

### Experimental technique

Ligation of the DVC before the bladder neck incision and nerve sparing lateral dissection, right after the incision of the endopelvic fascia.

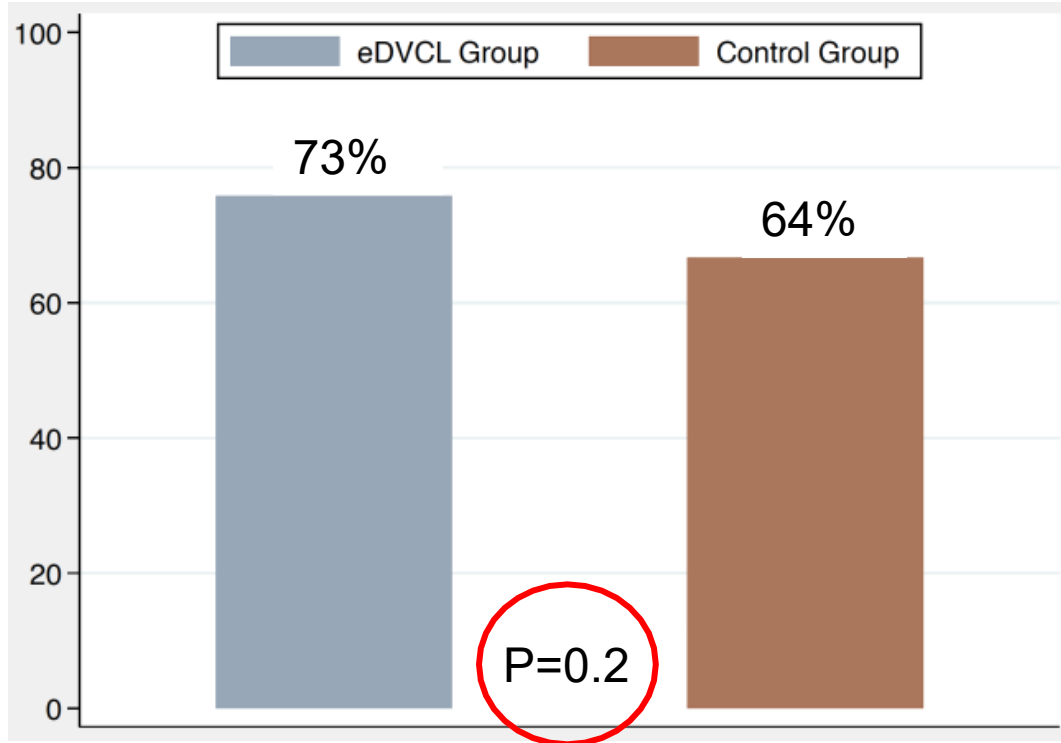
## STATISTICS

- ❑ According to power analyses, the sample size was calculated to achieve a statistically significant **difference of 15% between the two groups**.
- ❑ **Secondary endpoints:**
  - **90-day complications** (Clavien-Dindo classification)
  - **Positive surgical margins rate**

## RESULTS

- ❑ Preoperative PSA, biopsy grade group and clinical stage **did not differ between the two groups** (all  $p \geq 0.1$ ).
- ❑ **Median operative time was 160 minutes in both groups**.
- ❑ One month after surgery, **23% vs 28% of patients** were continent in the experimental vs. control group, respectively ( $p=0.4$ ).

## Continence rates 4 months after surgery in 199 patients with available data for analyses



## Positive surgical margins rate and Clavien-Dindo complications rates

	eDVCL Arm (n=156; 50%)	Control Arm (n=156; 50%)	P
<b>Positive Surgical Margins</b>	35 (22%)	37 (23%)	0.9
<b>Clavien-Dindo <math>\geq 2</math> complications</b>	21 (13%)	16 (10%)	0.5
<b>Clavien-Dindo <math>\geq 3</math> complications</b>	10 (6%)	12 (7%)	0.8

## CONCLUSIONS

- ❑ Our results suggest that **early DVC ligation does not increase the risk of positive margins or complications.**
- ❑ Awaiting longer follow-up, **we did not find evidence that the timing of DVC ligation affects functional outcomes** after robotic radical prostatectomy.