

American Urological Association

AUA VIRTUAL **EXPERIENCE**

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Prognostic differences and survival outcomes in patients with papillary renal cell carcinoma subtypes -A comparison between type I vs. type II

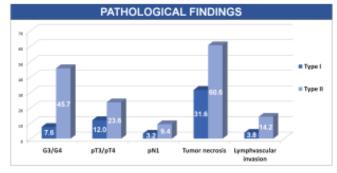


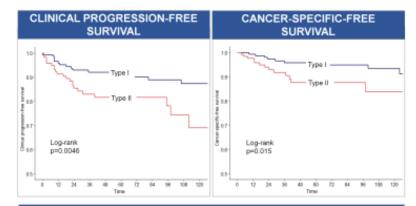
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Results

		BASELINE			
Variables		Papillary type I (n= 158; 55.4%)	Papillary type II (n= 127; 44.6%)	p-value	
Age at surgery,	Median	60	64	<0.01	
years	Range	52.2-69	55.5-70.5		
Gender,	Female	24 (15.2)	28 (22)	0.2	
n (%)	Male	134 (84.8)	99 (78)		
Charlson	0	82 (51.9)	61 (48)	0.2	
Comorbidity Index, n (%)	1	26 (16.5)	27 (21.3)		
	2	33 (20.9)	18 (14.2)		
	>3	17 (10.8)	21 (16.5)		
Clinical size, mm	Median	35	40	0.02	
	Range	20-60	30-63		
Clinical N-stage, n (%)	cN0	146 (92.4)	109 (85.8)	0.01	
	cN1	12 (7.6)	18 (14.2)		





MULTIVARIABLE COX-REGRESSION MODELS

Predictors	CLIN	ICAL PROGR	RESSION	CANCER-SPECIFIC MORTALITY		
	HR	95%CI	p-value	HR	95%CI	p-value
Type I	Ref.			Ref.		
Type II	2.41	(1.18-4.91)	0.01	3.33	(1.31-8.43)	0.01
Age	1.01	(0.98-1.04)	0.3	1.01	(0.97-1.05)	0.5
Clinical size	1.21	(1.13-1.31)	<0.001	1.25	(1.13-1.37)	<0.001
Year of surgery	0.98	(0.93-1.04)	0.7	0.91	(0.85-0.98)	0.02



Conclusions

- Papillary type II harbours more unfavorable pathological characteristics, compared to type I;
- Papillary type II is associated with higher risk of clinical progression, as well as cancer-specific mortality, relative to type I;
- Based on poor oncologic outcomes, papillary type II might deserve a more aggressive post-surgical surveillance.