Elective nephron-sparing surgery in 69 patients with renal cell carcinoma > 4 cm

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RESULTS

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Æ Elective nephron-sparing surgery for tumors < 4cm has become an established surgical standard procedure

Æ Similar complication and survival rates comparable to radical nephrectomy

Æ Question: elective nephron-sparing surgery in localized tumors > 4 cm??

Æ Retrospective analysis of patients from the Homburg database

PATIENTS AND METHODS

1975 - 2003: n = 463 nephron-sparing surgery

Æ n = 368 / 463 (79.5%) elective indications

Æ n = 94 / 368 (25.5%) elective nephron-sparing surgery of tumors > 4 cm

Æ 69 / 94 (73.4%) renal cell carcinoma

- Current follow-up: collected data from 86.2% of all patients

- Statistics: SPSS™ for Windows

- Kaplan-Meier-method (survival)


- Mean age: 54.2 years (median 57 years)

- Surgical approach: 100% retroperitoneal (flank incision)

- Surgical technique: n = 83 (88.3%) warm ischaemia

Æ n = 10 (10.6%) no ischaemia

Æ n = 1 (0.1%) cold ischaemia (perfusion)

- Mean follow-up time: 74.5 months (range: 0.5 – 240.1 months)

- Tumor recurrence: n = 4

Æ n = 3 lung metastasis

Æ n = 1 hilar lymph nodes

Æ all tumors stage pT1b

Æ 1, 4, 6 and 11 years after surgery

Æ no local recurrence!

Æ Excellent survival after elective nephron-sparing surgery of renal cell carcinoma > 4 cm

Æ Low complication rates

Æ 26.6% benign tumors

- Depending on technical feasibility, elective nephron-sparing surgery can also be considered for tumors exceeding 4 cm in size!