

Similar oncologic efficacy for robotic, open cystectomy

December 21 2012



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(HealthDay)—For patients with bladder cancer undergoing radical cystectomy, a robotic approach seems to have the same oncologic efficacy as an open approach and demonstrates potential perioperative benefits, according to a pilot study published in the February issue of *The Journal of Urology*.

Dipen J. Parekh, M.D., from the University of Texas Health Sciences Center at San Antonio, and colleagues conducted a [prospective randomized trial](#) comparing the perioperative outcomes and oncologic efficacy of open and robotic assisted laparoscopic radical cystectomy. Data were available for 40 patients.

The researchers observed no significant differences between the groups with respect to the oncologic outcomes of positive margins (5 percent each) or the number of lymph nodes removed (23 for open radical cystectomy versus 11 for robotic assisted laparoscopic radical cystectomy; $P = 0.135$). The estimated blood loss was reduced for the robotic assisted laparoscopic radical cystectomy group (400 ml) compared with the open radical cystectomy group (800 ml). In addition, there was a trend toward a decreased rate of stays longer than five days in the robotic group (65 versus 90 percent; $P = 0.11$) as well as a trend toward fewer transfusions (40 versus 50 percent, $P = 0.26$).

"Our results suggest no significant differences in surrogates of oncologic efficacy. Robotic assisted laparoscopic radical cystectomy demonstrates potential benefits of decreased estimated blood loss and decreased hospital stay compared to open radical cystectomy," the authors write. "Our results need to be validated in a larger multicenter prospective [randomized clinical trial](#)."

More information: [Abstract](#)
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