

Saturday 28 September 2019

Oral Session 2: Oncology

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The impact of neoadjuvant chemotherapy on survival after radical cystectomy

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Introduction: Radical cystectomy is the standard treatment option for muscle invasive bladder cancer. The use of neoadjuvant chemotherapy is reported to be associated with a survival advantage. The aim of this study was to assess the impact of neoadjuvant chemotherapy on survival after radical cystectomy.

Methods: A retrospective review was performed of a prospectively maintained bladder cancer database. All procedures were performed by a single fellowship trained Urologic Oncologist.

Results: During the study period 2013–2018, 55 patients underwent radical cystectomy. The median age was 66 years (Range 42–83 years). 48 (87.3%) patients were \leq pT2 while 7 (12.7%) were pT3/4. 19 (34.5%) patients received neoadjuvant chemotherapy and 5 (9.1%) received adjuvant.

Of the 19 patients who received neoadjuvant chemotherapy, 12 (63.2%) were pT2, 3 (15.8%) pT3, 4 (21.1%) pT4.

Overall, 11 patients have died at a median of 4 months (Range 1–24) with no difference between those who received neoadjuvant chemotherapy or not (15.8% vs 22%, $p=0.73$).

Conclusion: Despite reported survival advantage of neoadjuvant chemotherapy, a survival advantage was not seen in our cohort.