

# PE14 The effect of USPSTF recommendation on post-operative outcomes in Robot-assisted laparoscopic prostatectomy (RALP) based on analysis of a single surgeon series

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Bhat K.R.S.<sup>1</sup>, Onol F.F.<sup>1</sup>, Moschovas M<sup>1</sup>, Rogers T.<sup>1</sup>, Jenson C.<sup>1</sup>, Rocco B.<sup>2</sup>, Patel V.<sup>1</sup>

<sup>1</sup>Global Robotics Institute, Dept. of Urology, Celebration, United States of America, <sup>2</sup>University of Modena e Reggio Emilia, Dept. of Urology, Modena, Italy

**Introduction & Objectives:** US Preventive Services Task Force (USPSTF)'s recommendation against PSA-based screening has resulted in a change in practice pattern of patients receiving robot assisted radical prostatectomy (RALP). We evaluated the possible influence of these changes on surgical technique, trifecta and pentafecta outcomes following RALP.

**Materials & Methods:** We retrospectively analyzed all men that underwent RALP between 2002 to 2018 with minimum 6 months followup from a prospectively collected IRB approved database. Patients were sub grouped based on degree of nerve sparing. Subgroups were analyzed for differences in clinical parameters and outcomes before and after USPSTF's recommendation by using Chi square test.

**Results:** Mean preoperative PSA increased from 6.0 to 7.41 ng/ml between the two groups. After the USPSTF recommendation,  $\geq$ T3 disease undergoing Partial Nerve Sparing (PNS) and full nerve sparing (FNS) increased by 16% and 6%. respectively. In patients with FNS, potency rate decreased from 79.7% to 73.7% without significant change in trifecta rates before and after 2012 (70.6% vs. 67.7%,  $p=0.074$ , Table 1). There was a small but statistically significant decrease in pentafecta rates from 61.8% to 57.5% ( $p=0.012$ , Table 1). In patients with PNS, PSM, potency and continence rates decreased significantly after USPSFT's recommendation (Table 1). This resulted in a significant decrease in trifecta rate from 46.8% to 33 %, and in pentafecta rate from 40% to 26.2%.

Table No 1: - Comparison of patient outcomes with respect to nerve sparing before and after 2012

Parameters	Till Dec 2012 (n= 3817)		From January 2013 (n=3451)		P value	
	PNS	FNS	PNS	FNS	PNS	FNS
PSM	265(16)	237(13.5)	442(21.5)	190(13.5)	<.001	0.147
Potency	963(58.8)	1587(79.7)	834(40.7)	1031(73.7)	<.001	<.001
Continence	1541(94)	1908(95.8)	1754(85.6)	1315(94)	<.001	0.054
BCR	240(7.7)	154 (7.7)	216(10.5)	56(4)	<.001	<.001
PSA persistence	87(5.3)	20(1)	135(6.6)	13(1)	<.001	<.001
Trifecta	766(46.8)	1405(70.6)	676(33)	947(67.7)	<.001	0.074

Pentafecta	656(40)	1231(61.8)	538(26.2)	805(57.5)	<.001	0.012
Total	1638	1991	2950	1399		

**Conclusions:** After USPSTF recommendation, our practice has seen a trend towards operating more aggressive disease. In patients undergoing FNS, this only marginally affected the surgical outcomes. However, in patient with PNS this was associated with a statistically significant decrease in our trifecta and pentafecta rates despite increasing surgical experience.