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Introduction & Objectives: A great number of different techniques for Robot-assisted laparoscopic radical prostatectomy (RARP) have been proposed; Retzius-sparing RARP (RSP) has been considered one of the most innovative ones in the last ten years, anatomically being among the least demolitive [1, 2]. Objective of the paper is to evaluate the possible different attitudes in performing RSP according to the different centers that perform this kind of surgery in the world.

Materials & Methods: At the end of December 2017 we sent an institutional survey to all the urologists included in the EAU Robotic Urology (ERUS) mailing lists. We further integrated the mailing list with centers found through personal networks, via Pubmed, Google, Bing, and Youtube, including the words “Retzius-sparing”, “Bocciardi”, “trans-Douglas” or “Posterior approach”.

Results: We had complete answers from 33 centers with experience in RSP, reaching approximately 5,000 cases operated. The technical and perioperative details and strategies are reported in Table 1.

Fifteen of the centers (46.8%) reported performing all of their prostatectomies with the Retzius-sparing approach; the remaining 17(53.2%) reported selecting the RSP cases according to different features. Some of them selected the patients according to patient age (3.1% performed RSP in the younger and 6.2% in the elderly ones), other centers according to cancer risk classification (lower and intermediate, 37.5% of centers), other ones according to cancer location (no anterior tumors, 12.5% of centers), other ones according to prostate volume (low and intermediate, 31.2% of centers), others selecting easier cases (25% of centers).

Conclusions: Studying a new surgery with quite evident but still debated functional advantages, we aim to sensitize all the urologists performing RSP to share their experiences.