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Introduction & Objectives: Currently partial nephrectomy (PN) is the gold standard for the treatment of T1a (<4 cm) renal tumours. In carefully selected patients and in specialised centres where surgical expertise is available the indications for PN have expanded to include T1b tumours (4 - 7 cm). At present, with the widespread use of robotic technology, the boundaries of PN are pushed even further.

In expert hands, RAPNs (robotic assisted partial nephrectomies) are performed routinely and safely for T2a (7-10 cm) and T2b (>10 cm) tumours, with good oncological and functional outcomes.

Materials & Methods: Video presentation from the OLV Hospital video database.

Conclusions:

Robotic Assisted Partial Nephrectomy (RAPN) for T2 renal tumours can be challenging but is being performed more frequently. Previous experience in robotic surgery and RAPN for T1 tumours is a logical and necessary step prior to attempting surgery on larger and more complex tumours. Oncological and functional outcomes appear favourable in a cohort of patients from a tertiary referral centre.