

P094 Evolving landscape of nephron sparing surgery: National Registry data in Australia between 2006 and 2016

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Introduction & Objectives: Nephron sparing surgery (NSS) is currently recommended by the contemporary management guidelines when possible for patients with T1 renal tumours. Published trends in use of NSS outside the USA are limited, particularly since the introduction of robotic-assisted PN (RAPN). The aim of this study was to describe contemporary surgical management patterns of renal tumours in Australia.

Materials & Methods: National claims data according to the Medicare Benefits Schedule (MBS) on surgical management of renal tumours in adult Australians between January 2000 to December 2016 was collated. Analysis of absolute number, population-adjusted rate, and renal cancer-adjusted rate of interventions according to age and gender were performed, as well as proportion of PNs performed using robotic-assisted approaches.

Results: Between 2000 and 2016, the rate of PN increased while RN remained stable (PN: 0.87 to 4.16, RN: 6.52 to 6.70 per 100,000 population). Since 2015, PN has become more common than RN in patients 25 to 44 years of age (0.98 vs 0.95 procedures per 100,000 population). Renal cancer-adjusted rate of interventions exhibited a trend toward increasing utilization of PN and reduced RN across all age groups. An increase in overall surgical treatment was observed (25% to 41%), mainly due to increased treatment of patients older than 75 years. The proportion of RAPN was seen to rapidly increase (4.7% in 2010 to 58% in 2016).

Conclusions: Treatment utilisation for renal masses has changed significantly in Australia. PN is increasingly replacing RN in younger patients, and older patients are receiving more surgical treatment. The clinical impact of increased RAPN utilisation is yet to be determined.