Pre-operative characteristics of pT3b prostate cancer

results from the Be-RALP project



Poelaert F, Joniau S, Roumeguère T, Ameye F, De Coster G, Dekuyper P, Quackels T, Van Cleynenbruegel B, Van Damme N, Van Eycken E, Lumen N for Be-RALP: the Belgian RALP consortium

OBJECTIVES

To evaluate the pre-operative characteristics of prostate cancer (PCa) with confirmed seminal vesicle invasion on pathology (pT3b) after robot-assisted laparoscopic prostatectomy (RALP).

METHODS

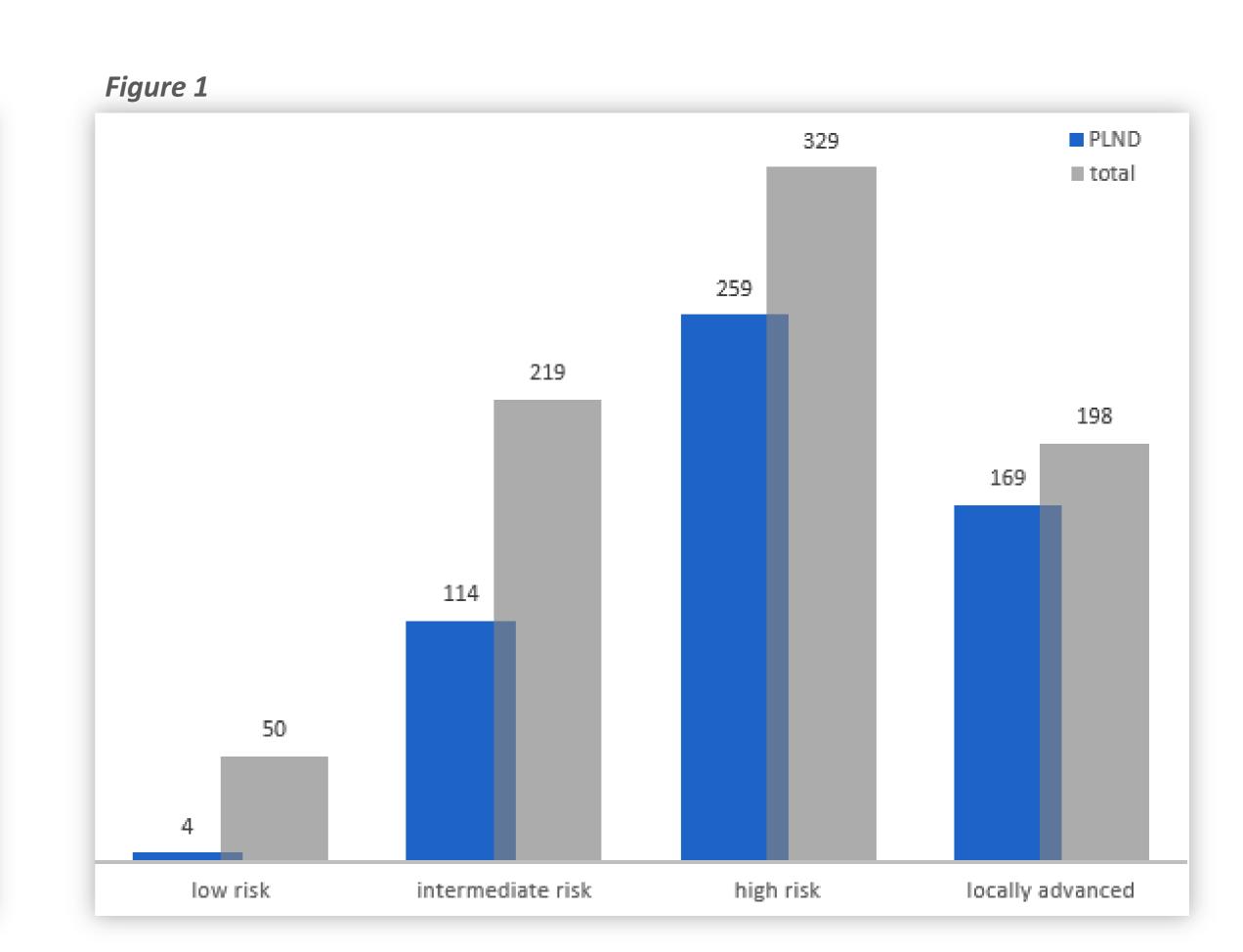
As part of the prospective Be-RALP project, from October 2009 till March 2016, 848 patients with clinical or pathological seminal vesicle invasion were evaluated.

RESULTS

Of the 79 patients with clinical T3b disease, 56 (71%) had seminal vesicle invasion on pathologic evaluation of the RP specimen. Seven hundred ninety-six patients with pT3b PCa were operated with RALP, of which 546 (69%) received pelvic lymph node dissection (PLND).

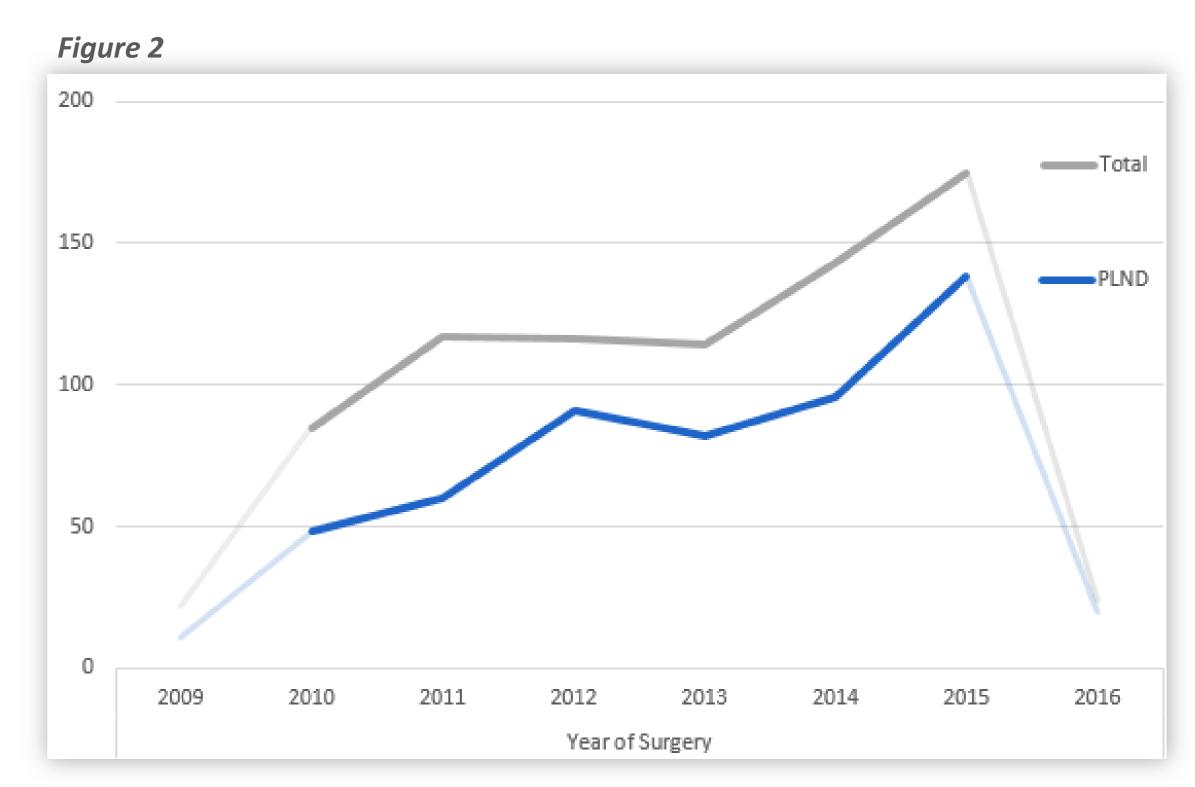
Median PSA was 10 (IQR 7-17) and 187 patients (24%) had clinical T3-4 disease (*Table 1*). Of the patients with grade group >3 on biopsy, 15% did not receive PLND, compared to 22% on pathology (p=0.019).

	total (n=796)	RALP+PLND (n=546)	RALP (n=250)	p value
atient / tumor				
age, yr	65 (60-70)	65 (60-69)	65 (61-69)	0.545
PSA, μg/l	10 (7-17)	12 (8-20)	8 (6-11)	< 0.001
cT stage, n (%)				< 0.001
T1-2	598 (76)	380 (71)	218 (88)	
T3-4	187 (24)	158 (29)	29 (12)	
cN positive, n (%)	29 (4.6)	28 (6.4)	1 (0.5)	< 0.001
biopsy grade group, n (%)				< 0.001
1	129 (17)	41 (7.7)	88 (36)	< 0.001
2 - 3	361 (47)	247 (47)	114 (47)	0.976
4	152 (20)	125 (24)	27 (11)	< 0.001
5	132 (17)	117 (22)	15 (6.1)	< 0.001
biopsy details				
cores, n	11 (8-12)	11 (8-12)	10 (8-12)	0.089
positive cores, n	6 (4-8)	6 (4-9)	4 (3-6)	< 0.001
positive / total cores, %	57 (38-83)	63 (42-92)	50 (30-67)	< 0.001
highest involvement, %	80 (50-100)	90 (57-100)	66 (22-90)	< 0.001



PLND was performed in **8**% (4/50) **low-risk**, **52**% (114/219) **intermediate-risk** and **79**% (259/329) **high-risk localized** PCa patients. **Eighty-five**% (169/198) of patients with **high-risk locally advanced** disease received PLND (*Figure 1*).

After multivariate analysis (including risk group) year of surgery (*Figure 2*, p<0.001) and percentage positive / total biopsy cores (OR 1.01 [1.005-1.018], p=0.001) were significant predictors for receiving PLND.



CONCLUSIONS

- > clinical T3-4 disease was reported before RALP in only 24% of all pT3b PCa tumors
- > the use of PLND increased over time
- > next to risk group, Belgian urologists also include percentage of positive biopsy cores in their decision making to perform PLND or not











