Surgical Outcomes of Urachal Carcinoma: Effects on Postoperative Bladder Function

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BACKGROUND:

- Urachal carcinoma (UC) is a rare, aggressive cancer arising from the urachus. It accounts for less than 1% of all bladder cancers [1].
- Most commonly presents late, often at an advanced stage. Adenocarcinoma is the most frequent histological type [2].
- Main treatment = surgical resection. Impact on bladder function and QoL is poorly understood.

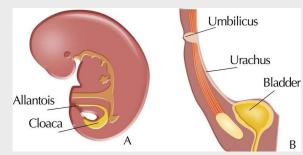


Figure 1: The urachus runs from the bladder dome to the umbilicus, typically regressing after birth [3].

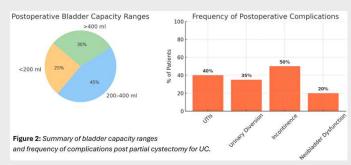
AIMS:

Evaluate impact of different surgical techniques on postoperative urinary continence and quality of life outcomes.

METHODOLOGY:

- Databases searched: PubMed, EMBASE, Web of Science, Cochrane Library, and Scopus
- Time frame: 1990-2025
- Inclusion criteria: adults with UC undergoing surgery, studies reporting postoperative bladder function outcomes

RESULTS:



DISCUSSION:

- Neobladder techniques can help, but are not complication-free
- Tumor involvement pre-surgery is a key prognostic factor [1,2].
- Need for better patient counseling and long-term planning

RECCOMENDATIONS

- Establish national or international databases to track surgical outcomes, recurrence, and functional impact over time. Prospective multicenter studies required.
- Future research should prioritize how surgical choices affect lifestyle, work, and mental health from the patient perspective.
- Standardize functional outcome reporting across studies.

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