

## FACTORS ASSOCIATED WITH EARLY RECOVERY OF CONTINENCE AFTER ROBOT-ASSISTED RADICAL PROSTATECTOMY

### Hypothesis / aims of study

Urinary incontinence is one of the common surgical complication after robot-assisted radical prostatectomy (RARP). In most cases, recovery from urinary incontinence is achieved within 3-6 months<sup>1)-3)</sup>. Interestingly, in some of the cases, patients achieve recovery of continence within a few weeks. The objective of this study was to investigate factors associated with early recovery of continence after RARP.

### Study design, materials and methods

The study included 263 patients who underwent RARP for prostate cancer between November, 2011 and April 2015. All surgeries were performed by transperitoneal, anterograde approach using 6 ports. Recovery of continence was defined as 'pad-free' or '0g of urinary leakage'. Outcome of continence was checked at 14 and 30 days after surgery. Clinico-pathological data as well as continence outcomes were prospectively collected and assessed.

### Results

Age, PSA, and BMI were  $66.5 \pm 5.9$ ,  $9.5 \pm 6.8$ ,  $23.8 \pm 2.8$  (mean  $\pm$  SD), respectively. Nerve sparing surgery was performed in 86 patients. Surgeon experience ( $> 50$ ) and lower T stage were significantly associated with continence outcomes at 14 days after surgery (Table 1,  $P = 0.0150$  and  $P = 0.0404$ , respectively). There were significantly more patients with 'prostate weight  $< 40$ ' who achieved continence at 30 days after surgery (Table 1,  $P = 0.0472$ ).

### Interpretation of results

Surgeon experience and tumor-characteristics were more likely to be associated with recovery of continence in an early stage after surgery.

### Concluding message

In terms of early recovery of continence, surgeon experience and tumor-characteristics seem to be important.

Table 1 Analysis of factors associated with early recovery of continence after robot-assisted radical prostatectomy (N = 263)

Factors	Patients achieving continence at:						
	14 days N = 263			30 days N = 263			
	No	Yes	P value	No	Yes	P value	
<b>Preoperative</b>							
<b>Surgeon experience</b>							
	$\leq 50$	122	4	<b>0.0150</b>	114	12	0.3569
	$> 50$	122	15		119	18	
Age	$\leq 67$	108	12	0.1112	102	18	0.0931
	$> 67$	136	7		131	12	
BMI	$\leq 23$	90	8	0.6324	83	15	0.1253
	$> 23$	154	11		150	15	
DM	Absent	207	16	1.0000	199	24	0.4376
	Present	37	3		34	6	
D'Amico risk classification	Low	35	5	0.1616	35	5	0.8133
	Inter-High	209	14		198	25	
<b>Surgical &amp; pathological</b>							
Nerve sparing	None	166	11	0.3642	157	20	0.9373
	Performed	78	8		76	10	
<b>PW<sup>a</sup></b>	$< 40$	119	11	0.4436	110	20	<b>0.0472</b>
	$\geq 40$	125	8		122	10	
<b>pT stage</b>	pT2	158	17	<b>0.0404</b>	153	22	0.4021
	$> pT2$	86	2		80	8	
Gleason score	$\leq 7$	184	60	0.8666	177	56	0.4758
	$> 7$	14	5		21	9	
RM	Negative	182	18	0.0515	177	23	0.9325
	Positive	62	1		56	7	

BMI, body mass index; DM, diabetes mellitus; Inter, Intermediate; PW: prostate weight, RM: resection margin. <sup>a</sup> Weight of the resected prostate.

## References

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## Disclosures

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