

## **BLADDER NECK SPARING RADICAL RETROPUBIC PROSTATECTOMY: RESULTS ON CONTINENCE AND POSITIVE SURGICAL MARGINS**

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**Objectives:** Radical prostatectomy is the therapeutical option giving best results on long term biochemical relapse free-survival rate in localized prostatic cancer; nevertheless many patients informed on complications related to surgery, as incontinence, decide for different treatments. Aim of the study is to evaluate urinary continence and positive surgical margins rate in patients undergone retropubic radical prostatectomy bladder neck sparing.

**Materials and Methods:** 180 patients underwent bladder neck sparing radical retropubic prostatectomy. 152 patients (84,6%) had PSA < 10 ng./ml ; 28 patients (15,4%) had PSA > 10 ng./ml. Gleason score at biopsy was  $\leq 7$  in 169 patients (93,8%) and 8 (4+4) in 11 patients (6%). Surgical procedure provided a meticulous dissection with anatomical sparing of bladder neck and sampling of margins for pathological evaluation.

**Results:** 157 patients (87,2%) had immediate urinary continence. 21 patients (11,6%) showed a mild dribbling disappeared within 4/6 weeks, 1 patient has stress incontinence, 1 patient is incontinent. 162 patients (90%) were pT2, respectively 66 patients pT2a, 55 patients pT2b, 41 patients pT2c. 18 patients (10%) were pT3, respectively, 10 patients (5,5%) were pT3a 8 patients (4,5%) pT3b. 17 patients (9,4%) showed positive margins and extraprostatic extension resulted in 12 patients (pT3a), 5 patients were pT2c. None had positive surgical margins at the prostate apex; 1 patient was N+.

**Conclusions:** Bladder neck sparing radical prostatectomy improves results on immediate urinary continence, with positive impact on QoL and a reasonably low risk of positive surgical margins in patients carefully selected in the preoperative staging.