Clipless Robot-assisted Retzius Sparing Radical Prostatectomy
An Analysis of peri-operative Oncological and Functional outcomes

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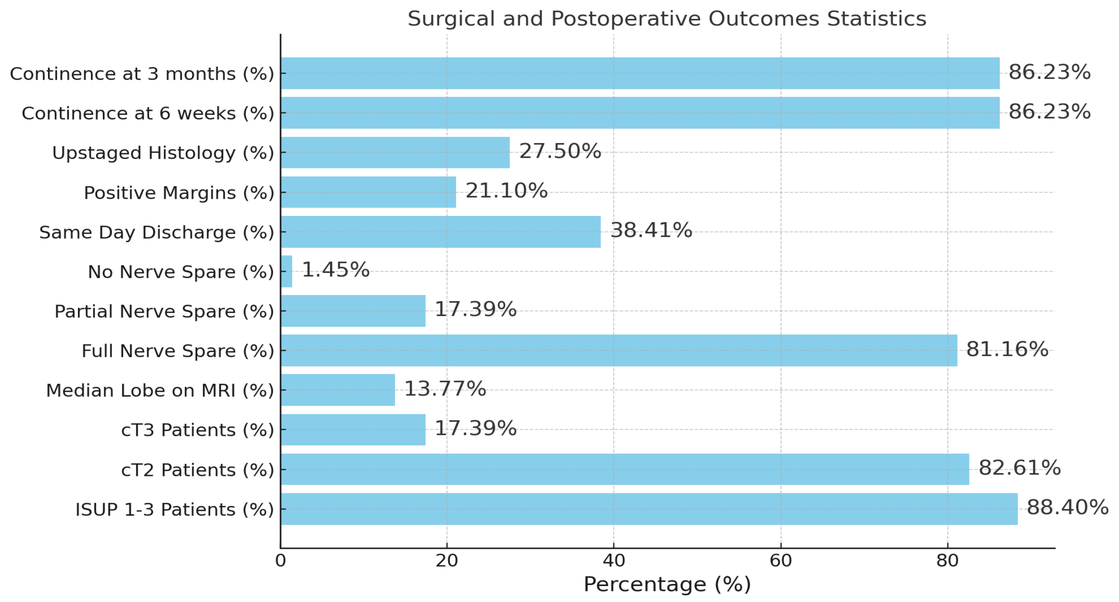
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Introduction

Retzius sparing RARP (RS-RARP) is a modification of the standard RARP technique traditionally requires clips to control the pedicles. We aimed to retrospectively analyse the operative, peri-operative, oncological and functional outcomes of this completely 'clipless' approach to RS-RARP in our centre.

Methodology

The study was done as an audit in out department. We included consecutive patients who underwent clipless-RS-RARP in our centre from February 2023 to December 2023. The clipless RS-RARP was done using the Davinci Xi system in all cases (primary surgeon-author W.A.C). No clips were used in these procedures and the preoperative, intra-operative and postoperative data were recorded with a minimum follow-up of 3 months.



Results

A total of 138 patients underwent RS-RAP using this technique in the study period. The median age was 64 years and the median BMI was 27.25 kg/m2. 88.4% were ISUP 1-3 group patients. 82.61 were cT2 and 17.39% were cT3 and 13.77% had median lobe in MRI. Mean console time was 99 minutes with 81.16% having full nerve spare, 17.39% partial and 1.45% none. 38.4% were fit to be discharged on the same day/evening admission/surgery. There were no major complications (CD>3) or postoperative bleeding. Margins were positive in 21.1% and, 27.5% men upstaged in histology report, compared to preoperative staging. The continence rates were 86.23%, at 6 weeks and 3 months.



Mean Console time 99mins



34% Same day discharge



81% Full Nerve spare

Conclusion

Clipless RS-RARP is a safe procedure with good oncological and early continence recovery. This modification avoids clip-related complications without the expense of any higher complication rates than standard RARP.