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AB056. Cytoreductive radical prostatectomy for men with oligo-metastatic prostate cancer

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Background: To present our preliminary surgical experience with cytoreductive radical prostatectomy for patients with oligometastatic prostate cancer.

Methods: Ten selective cases with oligometastatic prostate cancer diagnosed by bone scan and biopsy of prostate underwent cytoreductive radical prostatectomy. The operating time, estimated blood loss and perioperative complication were recorded and evaluated. Follow up studies were performed with an evaluation for postoperative PSA level and the status of the urinary voiding.

Results: The mean age was 65.1 years (range, 55–78 years), initial PSA level was 70.27 ng/mL (range, 8.56–280.0 ng/mL), biopsy Gleason score was 8 (range, 6–9), Preoperative clinical stage 1 case T4N0M1, 3 cases T3N1M1, 4 cases T3N0M1, 2 cases T2N0M1. All the operations were successfully performed. The total operative time range was 110–260 min with mean time of 200 min. The blood loss was 85–350 mL with mean 140 mL and no blood transfusion was required. The catheter was removed after a mean [range] of 14 [9–16] days. No intra-operative complications occurred. Eight patients had positive surgical margins. The mean [range] hospital stay was 7 [3–15] days

after surgery. All the cases were continent after removal of the catheter. No cases demonstrated vesicourethral stricture. All ten patients had decreased PSA after operation 6 weeks.

Conclusions: Cytoreductive radical prostatectomy for patients with oligometastatic prostate cancer could be safe, effective, and appropriate. Cytoreductive radical prostatectomy might be a treatment option in the multimodal management of oligo-metastatic prostate cancer.

Keywords: Prostate cancer; oligo-metastatic; cytoreductive radical prostatectomy

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AB057. Intravesicular administration of sodium hyaluronate ameliorates the inflammation and cell proliferation of cystitis cystica et glandularis involving interleukin-6/Stat3 signaling pathway

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Background: In this study, we evaluate the clinical use of intravesical sodium hyaluronate in Cystitis cystica et glandularis (CCEG) patients who have completed treatment and investigate the role of the IL-6/Stat3 pathway in CCEG