



Seminal Vesicle-Sparing Radical Prostatectomy: A Novel Concept to Restore Early Urinary Continence

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Précis: Seminal vesicle-sparing radical prostatectomy may maintain urinary continence

Introduction

Urinary incontinence is one of the major potential side effects of radical prostatectomy. The sensory and motor components of the pelvic nerve are in close contact with the seminal vesicles, and may be affected by surgery thus leading to this problem. To try to avoid this, researchers from Zurich University investigated the possibility of preserving the seminal vesicle tip during radical prostatectomy.

Method

A total of 54 men underwent radical prostatectomy for localized prostate cancer. Of them, 34 patients had standard prostatectomy and 20 underwent seminal vesicle-sparing prostatectomy.

Results

- Continence rate was significantly higher in the group whose seminal vesicles were spared: 60% after 6 weeks and 95% after 6 months, compared with 18% at 6 weeks and 82% at 6 months in patients receiving standard prostatectomy.
- Sensory threshold levels were similar before and after surgery in the seminal vesicle-sparing group, but were significantly lower after standard prostatectomy.

Discussion

In this study, radical prostatectomy in which the distal end of the seminal vesicle was not dissected preserved pelvic innervation and urinary continence. The authors warn that the technique should be used with caution when seminal vesicles are at risk for cancer invasion. In addition, long-term follow-up is needed to evaluate the local-tumor control as well as overall survival.

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