Upper urinary tract tumour: Outcomes after radical surgery & peri-operative chemotherapy

**Location:** Room Munich, North Hall (Level 1)

**Chairs:** S. Lerner, Houston (US)  
E. Xylinas, Paris (FR)

**Aims and objectives of this session**
To date, radical surgery represents the only potentially curable therapeutic intervention for patients with urothelial carcinoma of the upper tract (UTUC). Although the role of lymphadenectomy in these tumors has not yet been clarified, recent evidence has shown that in patients with locally advanced tumors, it improves staging and consequently could help in selecting patients for adjuvant chemotherapy. UTUC and bladder carcinomas, are considered to be relatively chemosensitive. In fact, most of the data regarding the clinical efficacy of chemotherapy in the neoadjuvant and adjuvant settings are based on outcomes from the treatment of bladder UC. Contrary to what has been demonstrated for bladder cancer, there have been no convincing reported effects of neoadjuvant chemotherapy for UTUCs. Adjuvant chemotherapy achieves a remission rate of up to 50% but has minimal impact on survival. Systemic recurrences are common in this disease, however, and it is therefore reasonable to consider perioperative chemotherapy in an effort to decrease a patient’s risk of recurrence. The aim of this session is to discuss modern outcomes after radical nephroureterectomy and perioperative chemotherapy.

Poster viewing of 20 minutes. Presentations will take place on stage. Standard presentations are 2 minutes in length, followed by 2 minutes for discussion. Extended presentations (*) are 3 minutes in length, followed by 3 minutes for discussion.

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*Effectiveness of adjuvant chemotherapy after radical nephroureterectomy for locally advanced and/or positive regional lymph node upper tract urothelial carcinoma*

**By:** Seisen T.¹, Krasnow R.², Bellmunt J.³, Rouprêt M.², Leow J.¹, Lipsitz S.¹, Vetterlein M.¹, Preston M.¹, Hanna N.¹, Kibel A.¹, Sun M.¹, Choueiri T.², Trinh Q.-D.¹, Chang S.L.¹

**Institutes:** Brigham and Women Hospital, Dept. of Urology, Boston, United States of America, ²Dana Farber Cancer Institute, Dept. of Genito Urinary Medical Oncology, Boston, United States of America, ³Hôpitaux Universitaires La Pitié-Salpêtrière, Dept. of Urology, Paris, France

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*Integrated comprehensive genomic characterization of upper tract urothelial carcinoma (UTUC)*

**By:** Moss T.³, Qi Y.³, Xi L.², Peng B.³, Mosqueda M.³, Guo C.³, Ittman M.⁴, Wheeler D.², Matin S.⁷, Lerner S.¹

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*Perioperative chemotherapy does not improve disease free survival in upper tract urothelial carcinoma: A population based analysis*

**By:** Goldberg H., Klaassen Z., Chandrasekar T., Hamilton R., Kulkarni G., Fleschner N.

**Institutes:** Princess Margaret Hospital, Division of Urology, Department of Surgical Oncology, Toronto, Canada
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Association of PD-L1 expression with cancer-specific survival in upper tract urothelial carcinoma


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Comparing oncological outcomes of laparoscopic versus open nephroureterectomy for the treatment of upper tract urothelial carcinoma: A propensity match analysis


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Prognostic impact of primary tumor location in advanced urothelial tract cancer (UCC); a pooled analysis of EORTC 30924, 30986, and 30987 trials

By: Moschini M., Shariat S., Roupret M., De Santis M., Bellmunt J., Sternberg C., Tombal B., Collette L.

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Trends of lymphadenectomy in upper tract urothelial carcinoma patients treated with radical nephroureterectomy: The impact of surgical technique


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Clinical benefit of platinum-based neoadjuvant chemotherapy for locally advanced upper tract urothelial carcinoma

By: Hatakeyama S., Hosogoe S., Kusaka A., Hamano I., Imai A., Yoneyama T., Hashimoto Y., Koie T., Ohyama C.

Institutes: 1Hiroaki University Graduate School of Medicine, Dept. of Urology, Hiroaki, Japan

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Significance of butyrylcholinesterase before chemotherapy as an independent predictor of overall survival in patients with advanced upper-tract urothelial cancer

By: Yoneyama T., Oikawa M., Hagiwara K., Toshikazu T., Narita T., Imanishi K., Yoneyama T., Mori
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1000 retroperitoneoscopic procedures of the upper urinary tract: Analysis of complications
Institutes: CHU Henri Mondor, Dept. of Urology, Créteil, France

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Comparative effectiveness of different surgical approaches for nephroureterectomy for the treatment of upper tract urothelial carcinoma
By: Hanna N., Ingham M., Seisen T., Chang S.
Institutes: Brigham and Women's Hospital, Harvard Medical School, Dept. of Urology, Boston, Canada

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Ability of early ureteral ligation to prevent intravesical recurrence after radical nephroureterectomy for upper urinary tract urothelial carcinoma: A prospective single-arm multicenter clinical trial
Institutes: 1Tohoku University Graduate School Of Medicine, Dept. of Urology, Sendai, Japan, 2Japan Community Health Care Organization Sendai Hospital, Dept. of Urology, Sendai, Japan, 3Sendai City Hospital, Dept. of Urology, Sendai, Japan, 4Osaki Citizen Hospital, Dept. of Urology, Osaki, Japan, 5Yamagata Prefectural Central Hospital, Dept. of Urology, Yamagata, Japan, 6Kesennuma City Hospital, Dept. of Urology, Kesennuma, Japan, 7Miyagi Cancer Center, Dept. of Urology, Natori, Japan, 8Hachinohe City Hospital, Dept. of Urology, Hachinohe, Japan, 9Tohoku Rosai Hospital, Dept. of Urology, Sendai, Japan, 10Sendai Medical Center, Dept. of Urology, Sendai, Japan, 11Senenrifu Hospital, Dept. of Urology, Rifu, Japan, 12Ogachi Central Hospital, Dept. of Urology, Yuzawa, Japan, 13Japanese Red Cross Sendai Hospital, Dept. of Urology, Sendai, Japan, 14Shirakawa Kosei General Hospital, Dept. of Urology, Shirakawa, Japan, 15Iwate Prefectural Iwai Hospital, Dept. of Urology, Ichinoseki, Japan

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Robotic radical nephroureterectomy is associated with poorer oncological outcomes than open and laparoscopic radical nephroureterectomy
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