Aims and objectives of this session
This session is designed to optimise oncological outcomes.

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

Clinical and outcome characteristics of the cancer genome atlas (TCGA) bladder cancer cohort: Is it representative?
By: Seiler R., Black P., Thalmann G., Stenzl A., Todenhöfer T.
Institutes: Universitätsspital Bern, Universitätsklinik für Urologie, Bern, Switzerland, University of British Columbia, Dept. of Urologic Sciences, Vancouver, Canada, University of Bern, Dept. of Urology, Bern, Switzerland, University Hospital, Eberhard-Karls-University, Dept. of Urology, Tübingen, Germany

Does associated CIS with MIBC impact on neoadjuvant chemotherapy? Results of an International consortium
Institutes: Lister Hospital Stevenage, Division of Robotic Urology, Department of Urology, Stevenage, United Kingdom, Glickman Urological and Kidney Institute and Taussig Cancer Center, Cleveland Clinic, Cleveland, United States of America, Division of Robotic Surgery, Dept. of Urology, Stevenage, United Kingdom, Freeman Hospital, Dept. of Urology, Newcastle, United Kingdom, University of British Columbia, Dept. of Urologic Sciences, Vancouver, Canada, Cleveland Clinic, Glickman Urological and Kidney Institute and Taussig Cancer Center, Cleveland, United States of America, H. Lee Moffitt Cancer Center and Research Institute, Dept. of Genitourinary Oncology, Tampa, United States of America, University of Southern California, USC/Norris Comprehensive Cancer Center, Institute of Urology, Los Angeles, United States of America, The Netherlands Cancer Institute-Antoni van Leeuwenhoek Hospital, Dept. of Urology, Amsterdam, The Netherlands, MD Anderson Cancer Center, Dept. of Urology, Houston, United States of America, University of Texas Southwestern Medical Center, Dept. of Urology, Dallas, United States of America, University of Oklahoma College of Medicine, Dept. of Urology, Oklahoma City, United States of America, University of Alberta, Edmonton, Alberta, Canada, The James Buchanan Brady Urological Institute, The Johns Hopkins School of Medicine, Dept. of Urology, Baltimore, United States of America, University of Kansas Medical Center, Dept. of Urology, Kansas City, United States of America, University of Michigan Health System, Dept. of Urology, Ann Arbor, United States of America, Division of Oncology, University of Washington School of Medicine and Fred Hutchinson Cancer Research, Dept. of Medicine, Seattle, United States of America, Weill Cornell Medical College, Presbyterian Hospital, Dept. of Urology, New York, United States of America, Exeter Surgical Health Services Research Unit, Royal Devon and Exeter NHS Trust, Dept. of Surgery, Exeter, United Kingdom, McGill University Health Center, Dept. of
Bladder-sparing protocol consisting of low-dose chemoradiotherapy and consolidative partial cystectomy against muscle-invasive bladder cancer: A comparison of oncological outcomes between primary and progressive diseases


Institutes: Tokyo Medical and Dental University Graduate School, Dept. of Urology, Tokyo, Japan

The B4GALT1 expression is prognostic and predictive for postoperative adjuvant chemotherapy benefit in patients with muscle-invasive bladder cancer


Institutes: Fudan University Shanghai Cancer Center, Dept. of Urology, Shanghai, China, Zhengshan Hospital, Fudan University, Dept. of Urology, Shanghai, China, School of Basic Medical Sciences, Fudan University, Biochemistry and Molecular Biology, Shanghai, China

Pattern of positive node metastases in patients treated with extended and super extended pelvic lymph node dissection and radical cystectomy due to bladder cancer


Institutes: IRCCS Ospedale San Raffaele, Dept. of Urology, Milan, Italy, Magna Graecia University of Catanzaro, Dept. of Urology, Catanzaro, Italy, Klinik Für Urologie, Luzerner Kantonsspital, Dept. of Urology, Lucerne, Switzerland, Medical University of Vienna, Dept. of Urology, Vienna, Austria

Circling tumor cells do not correspond with clinicopathological characteristics of muscle-invasive bladder cancer patients undergoing radical cystectomy: Interim results of the CirGuidance study


Muscle invasive bladder cancer: A single sample patient assay to predict molecular subtypes and benefit of neoadjuvant chemotherapy


Institutes: Universitätsklinikum für Urologie, Bern, Switzerland, GenomeDx, Biosciences, Vancouver, Canada, Netherlands Cancer Institute, Dept. of Surgical Oncology, Division of Urology, Amsterdam, The Netherlands, University of Washington School of Medicine, Dept. of Urology, Seattle, United States of America, University Hospital of Southampton, Dept. of Urology, Hampshire, United Kingdom, Erasmus MC, University Medical Center Rotterdam, Dept. of Pathology, Rotterdam, The Netherlands, GenomeDx, Dept. of Biosciences, Vancouver, Canada, Department of Translational Medicine, Lund University, Division of Urological Research, Malmö, Sweden, University of North Carolina At Chapel Hill, Lineberger Comprehensive Cancer Center,
Preoperative double-J stenting increases the risk of upper urinary tract (UUT) recurrence after radical cystectomy

By: Kiss B.¹, Furrer M.-A.¹, Wuethrich P.², Burkhard F.¹, Thalmann G.¹, Roth B.¹

Institutes: ¹University Hospital Bern, Dept. of Urology, Bern, Switzerland, ²University Hospital Bern, Dept. of Anesthesiology, Bern, Switzerland

Impact of perioperative transfusion of red blood cells and fresh frozen plasma on recurrence-free survival of patients after radical cystectomy for bladder cancer


Institutes: University Hospital of Tübingen, Dept. of Urology, Tübingen, Germany

Fate of patients undergoing pulmonary metastasectomy for metastatic urothelial carcinoma

By: Hoshi S.¹, Fukui I.², Kageyama Y.³, Kawashima K.⁴, Narita S.⁵, Ono K.⁶, Numahata K.¹, Sato M.⁶, Morozumi K.⁸, Kuromoto A.⁸, Ozawa M.⁸, Hoshi K.⁷, Bilim V.⁷, Sasagawa I.⁷

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Characterization of genomic aberrations of circulating, cell-free DNA in bladder cancer patients treated with radical cystectomy using multiplex ligation-dependent probe amplification: A new and efficient profiling method

By: Soave A.¹, Chun F.¹, Rink M.¹, Weisbach L.¹, Maurer V.¹, Gild P.¹, Steinbach B.², Fisch M.¹, Pantel K.², Schwarzenbach H.²

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Perioperative allogeneic blood transfusion does not adversely impact survival after radical cystectomy for urinary bladder cancer – a competing-risks analysis from a multi-institutional European series

By: Gild P.¹, Vetterlein M.¹, Kluth L.A.¹, Gierth M.², Fritsche H-M.², Burger M.², Protzel C.³, Hakenberg O.³, Von Landenberg N.⁴, Roghmann F.⁴, Noldus J.⁴, Nuhn P.⁵, Rink M.¹, Chun F.¹, May M.⁶, Fisch M.¹, Aziz A.¹

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A propensity score analysis of radical cystectomy versus bladder-sparing trimodal therapy in the setting of a multidisciplinary bladder cancer clinic

By: Kulkarni G.¹, Hermanns T.¹, Wei Y.¹, Bhindi B.¹, Satkunasivam R.¹, Athanasopoulos P.¹, Bostrom P.¹, Kuk C.², Li K.², Templeton A.², Sridhar S.², Van Der Kwast T.², Chung P.², Bristow R.², Milosevic M.², Warde P.², Fleshner N.⁶, Jewett M.⁶, Bashir S.⁷, Zlotta A.⁸

Institutes: ¹Princess Margaret Cancer Centre, University Health Network, Dept. of Surgery, Toronto, Canada, ²Mount Sinai Hospital, Dept. of Surgery, Toronto, Canada, ³Princess Margaret Cancer
Outcome of patients undergoing radical cystectomy for urothelial cell carcinoma of the bladder with evidence of distant metastases. Results of a single center study
Institutes: LMU-Klinikum der Universität München, Dept. of Urology, Munich, Germany

The accuracy of sequential urethral frozen sections and its impact on urethral recurrence after radical cystectomy
Institutes: University Hospital of Tübingen, Dept. of Urology, Tübingen, Germany