

Improving recovery and reducing complication rate after urological surgery

Poster Session 44

Sunday, 26 March
14:00 - 15:30

Location: Room Vienna, North Hall (Level 1)

Chairs: J. Bjerggaard Jensen, Aarhus N (DK)
I. Korneyev, St. Petersburg (RU)

Aims and objectives of this session

This session presents the recent advances and evidence about enhanced recovery after surgery programs, as well as new data regarding perioperative care in patients undergoing major urological surgery.

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

14:19 - 14:23

Introduction

J. Bjerggaard Jensen, Aarhus N (DK)

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Enhanced recovery enhances reduction of length of stay in patients treated with robotic assisted radical cystectomy with intracorporeal urinary diversion

By: [Tan W.S.](#)¹, Lamb B.², Tan M-Y.³, Sridhar A.², Mohammed A.², Baker H.², Briggs T.², Tan M.⁴, Kelly J.¹

Institutes:¹University College London, Dept. of Surgery and Interventional Science, London, United Kingdom, ²University College London Hospitals, Dept. of Urology, London, United Kingdom, ³University of Glasgow, School of Medicine, London, United Kingdom, ⁴University College London Hospitals, Dept. of Anaesthesia and Perioperative Medicine, London, United Kingdom

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The application of ERAS pathways to radical cystectomy: Outcomes from 482 consecutive cases

By: [Pang K.](#)¹, Groves R.², Noon A.¹, Catto J.¹

Institutes:¹University of Sheffield, Dept. of Oncology and Academic Urology Unit, Sheffield, United Kingdom, ²Royal Hallamshire Hospital, Dept. of Anaesthesia, Sheffield, United Kingdom

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A prospective randomized single-centre trial evaluating an ERAS protocol versus a standard protocol for patients treated with radical cystectomy and urinary diversion for bladder cancer

By: [Frees S.](#), Aning J., Black P., Struss W., Bell R., Gleave M., So A.

Institutes: Vancouver Prostate Centre, Dept. of Urology, Vancouver, Canada

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Factors influencing the length of hospital stay after robotic radical cystectomy; is 4 days hospital stay feasible?

By: [Moschonas D.](#), Soares R., Roodhouse A., Jones C., Mostafid H., Woodhams S., Swinn M., Perry M., Patil K.

Institutes: The Royal Surrey County Hospital, Dept. of Urology, Guildford, United Kingdom

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Enhanced recovery protocol after radical cystectomy is safe and accelerates bowel function recovery compared to standard perioperative care

By: Palumbo V.², [Giannarini G.](#)¹, Lami V.², Rossanese M.¹, Crestani A.¹, Ficarra V.¹

Institutes:¹Academic Medical Centre Hospital Santa Maria Della Misericordia, Dept. of Urology, Udine, Italy, ²University of Padua, Dept. of Urology, Padua, Italy

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Enhanced recovery after radical cystectomy – results of the first 18 months after implementation of a full ERAS program using the EIAS database

By: [Müller S.](#), Lilleaasen G., Davami J., Axcrona K.

Institutes: Akershus Universitetssykehus, Dept. of Urology, Lørenskog, Norway

- 594 **Validation of the Clavien-Dindo grading system in urology by the EAU guidelines ad hoc panel**
By: Mitropoulos D.², Bjerggaard Jensen J.¹, Artibani W.³, Biyani C.S.⁴, Rouprêt M.⁵, Truss M.⁶
Institutes:¹Aarhus University Hospital, Dept. of Urology, Aarhus, Denmark, ²University of Athens Medical School, Dept. of Urology, Athens, Greece, ³University of Verona, Dept. of Surgery, Verona, Italy, ⁴St. James's University Hospital, Dept. of Urology, Leeds, United Kingdom, ⁵Pitié-Salpêtrière Hospital, AP-HP, Academic Dept. of Urology, Paris, France, ⁶Klinikum Dortmund GmbH, Dept. of Urology, Dortmund, Germany
- 595 **Spinal analgesia versus intravenous opioid for robot-assisted radical prostatectomy: A retrospective analysis of 200 cases**
By: Kim L.¹, Brammer K.¹, Jay A.¹, Kasivisvanathan R.², Cahill D.¹
Institutes:¹Royal Marsden Hospital Nhs, Dept. of Urology, London, United Kingdom, ²Royal Marsden Hospital Nhs, Dept. of Anaesthesia, London, United Kingdom
- 597 **Procedure-specific risks of thrombosis and bleeding in urological cancer surgery: Systematic reviews and meta-analyses**
By: Tikkinen K.¹, Craigie S.², Agarwal A.³, Violette P.⁴, Novara G.⁵, Cartwright R.⁶, Naspro R.⁷, Siemieniuk R.⁸, Ali B.⁹, Eryuzlu L.³, Geraci J.⁹, Winkup J.⁹, Yoo D.³, Gould M.¹⁰, Sandset P.M.¹¹, Guyatt G.¹²
Institutes:¹University of Helsinki, Dept. of Urology and Public Health, Helsinki, Finland, ²McMaster University, Michael G. DeGroote National Pain Center, Hamilton, Canada, ³University of Toronto, School of Medicine, Toronto, Canada, ⁴Woodstock General Hospital, Dept. of Surgery, Division of Urology, Woodstock, Canada, ⁵University of Padua, Dept. of Surgical, Oncological, and Gastroenterological Sciences, Urology Clinic, Padua, Italy, ⁶Imperial College London, Dept. of Epidemiology and Biostatistics, London, United Kingdom, ⁷ASST Papa Giovanni XXIII, Dept. of Urology, Bergamo, Italy, ⁸University of Toronto, Dept. of Medicine, Toronto, Canada, ⁹McMaster University, Dept. of Clinical Epidemiology and Biostatistics, Hamilton, Canada, ¹⁰Kaiser Permanente Southern California, Dept. of Research and Evaluation, Pasadena, United States of America, ¹¹University of Oslo, Institute of Clinical Medicine, Oslo, Norway, ¹²McMaster University, Dept. of Medicine, Hamilton, Canada
- 598 **NOACs in urology: The surgeon's guide to perioperative management**
By: Rahim S.¹, Datta S.¹, Wood M.², Maan Z.¹
Institutes:¹Colchester Hospital University Nhs Foundation Trust, Dept. of Urology, Colchester, United Kingdom, ²Colchester Hospital University Nhs Foundation Trust, Dept. of Haematology, Colchester, United Kingdom
- 599 **Prediction of postoperative complications after radical nephrectomy, based on patient comorbidity preoperatively**
By: Fragkiadis E., Alamanis C., Mitropoulos D., Constantinides C.A.
Institutes:Laiko Hospital, Urology, Zografou-Athens, Greece
- 600 **The feasibility of day case robotic-assisted laparoscopic prostatectomy**
By: Coomer W.¹, Jefferies M.¹, Ravi J.¹, Colmsee M.², Tozer J.², Carter A.¹, Wilson J.¹
Institutes:¹The Royal Gwent Hospital, Dept. of Urology, Newport, United Kingdom, ²The Royal Gwent Hospital, Dept. of Anaesthetics, Newport, United Kingdom
- 15:15 - 15:22 **Summary**
 J. Bjerggaard Jensen, Aarhus N (DK)