

Laparoscopic Versus Open Radical Cystectomy: A Comparison of Quality of Life Outcomes

Introduction and Objectives: Laparoscopic radical cystectomy (LRC) is increasingly offered as an alternative to conventional open radical cystectomy (ORC) in the UK. Although there is an ever-increasing literature about the oncological and surgical efficacy of LRC, less is known about the Quality of Life (QoL) for patients undergoing LRC. We report a comparison of QoL data between LRC and ORC.

Materials and Methods: A retrospective questionnaire study was performed using the SF-36 tool. The validated SF-36 questionnaire tested individual patients in 4 physical and 4 emotional domains. These included physical functioning, general health, bodily pain, vitality, social functioning, emotional wellbeing and mental health. There were 45 consecutive laparoscopic and open cystectomy patients who were contacted; 88% (n=40) patients completed the questionnaires.

Results: There was 50% (n=20) who had an open procedure and the rest LRC. The mean age for ORC was 65.9 years and 71.2 years for LRC. Overall there was an increase in the QoL scores favouring LRC (mean: LRC57.0 vs. ORC46.6). Mean scores for physical activity and wellbeing (L92.3:O85.7), vitality (L51.7:O46.0), mental health (L56.0:O50.0) and social functioning (L63.7:O48.3) all favoured LRC. There was no difference in pain scores (L23.3:O23.6) and emotional health problems were higher in the LRC group (L73.3:O78.5).

Conclusions: With patient reporting, there is a tendency towards earlier and more strenuous return to physical activity, with greater vitality and an earlier return to social functioning with LRC. Patients held high expectations of LRC and sometimes felt disappointed when surgery did not meet these high expectations, possibly accounting for the lower emotional scores for LRC.