

Lymph Node Dissection in Laparoscopic Radical Cystectomy

Introduction and Objective: We analyzed clinical and pathological results of pelvic lymph node dissection (PLND) in laparoscopic radical cystectomy (LRC).

Materials and Methods: Between 2004 and 2011, 70 patients with bladder cancer received LRC with PLND. The cases were assigned to two groups: group 1 (n=20), PLND was performed by opening the abdomen to get inside following LRC; group 2 (n=50), laparoscopic PLND was performed. Comparison has been done between two groups in terms of operative time, estimated blood loss, need for blood transfusion, LNs positive, number of LNs, and complications.

Results: No significant differences in terms of operative time and complications have been found between two groups. Blood loss and transfusion requirements were less in group 2. LNs-positive case was found 20% (10/50) and 10% (2/20), in group 1 and 2, respectively. The mean number of LNs was 16.32 ± 1.076 in group 1 and 18.06 ± 2.607 in group 2.

Conclusions: Laparoscopic PLND during LRC is indicated in selected bladder cancer patients, and achieved an adequate number of LNs. Laparoscopic PLND is a safe and feasible procedure.