Late Pelvic Recurrence of Nonseminomatous Testicular Carcinoma After Negative Retroperitoneal Lymph Node Dissection

Prodromos G. Borboroglu, Christopher L. Amling, and James L. Roberts

We report a case of pathologic Stage I teratoma recurring in the pelvis as embryonal carcinoma 12 years after radical orchiectomy and bilateral retroperitoneal lymph node dissection (RPLND). The patient received three cycles of chemotherapy (cisplatin, etoposide, bleomycin) followed by complete surgical excision of the pelvic

mass. Successful treatment of these rare late recurrences usually requires chemotherapy and complete surgical excision. Pelvic relapse may potentially result from incomplete iliac node resection at the time of RPLND, altered lymphatic drainage from an incompletely resected spermatic cord, or a second primary extragonadal tumor focus. Our case emphasizes the importance of meticulous surgical technique during RPLND and the necessity for follow-up beyond 5 years in patients with testicular cancer.

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