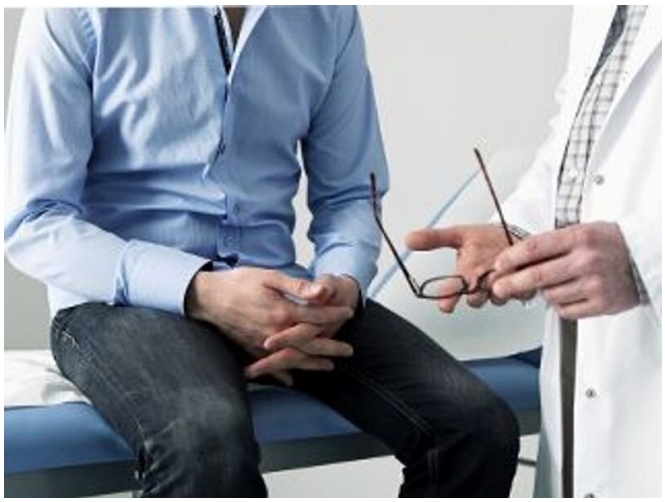
Prostate cancer pathology not worse with delayed surgery

11 December 2020



(HealthDay)—Among men with clinically localized high-risk prostate adenocarcinoma undergoing radical prostatectomy, surgical delay time (SDT) is not associated with a higher risk for adverse pathological features or with worse overall survival, according to a study published online Dec. 8 in *JAMA Network Open*.

Leilei Xia, M.D., from the University of Pennsylvania Perelman School of Medicine in Philadelphia, and colleagues examined the association of SDT of radical prostatectomy with final pathological and survival outcomes among patients with clinically localized high-risk prostate adenocarcinoma diagnosed between 2006 and 2016 who underwent radical prostatectomy. Data were included for 32,184 patients.

The researchers found that having longer SDT compared with an SDT of 31 to 60 days was not associated with increased risks for any adverse pathological outcomes, pT3 to T4 disease, pN-positive disease, positive surgical margin, or adverse pathological score greater than or equal to 2. There was also no association for longer SDT with worse overall survival.

"These findings suggest that prostate cancer surgery can be safely delayed up to six months and should be considered as low priority compared with other emergent and cancer surgeries when health care resources need to be prioritized during special times, such as the coronavirus disease 2019 pandemic," the authors write.

More information: Abstract/Full Text

Copyright © 2020 HealthDay. All rights reserved.

APA citation: Prostate cancer pathology not worse with delayed surgery (2020, December 11) retrieved 11 June 2021 from https://medicalxpress.com/news/2020-12-prostate-cancer-pathology-worse-surgery.html

This document is subject to copyright. Apart from any fair dealing for the purpose of private study or research, no part may be reproduced without the written permission. The content is provided for information purposes only.