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Single center study of clinicopathological correlation of patient surgically treated for RCC

KEYWORDS: Renal cell carcinoma; Incidence; Robson grade; Incidental inding

INTRODUCTION

The incidence of renal cell carcinoma (RCC) is rising; one of the possible explanation is the widespread use and the availability of sophisticated diagnostic techniques such as ultrasound and CT. Aim of this work is to analyze clinical and pathological data of patients subjected to surgical treatment for diagnosed RCC at the Institute of Urology in the ten year period from 1988 to 1998.

MATERIAL AND METHODS

In this ten year period 593 patients were operated for RCC. The average age was 55.4 years with the range from 17 to 84 years. Most of the patients were men (men/ female ratio was 64:36). Since all necessary data were available for 525 patients, they are included in the study. All of the patients were operated for the suspicion of RCC.

RESULTS

In most of them, radical nephectomy including lymphadenectomy was performed (409 pts., 77.9%). Lymphadenectomy was omitted for different reasons in 76 pts (14.7%), nephron sparing surgery was done in 26 pts (4.8%). The preoperative diagnosis was pathologically denied in 53 pts (10.1%) in whom liposarcoma, oncocytoma or angiomiolipoma was diagnosed.

Table 1. The distribution of patients in whom RCC was pathologically confirmed

Robson Stage	No of patients	Percentage
1	273	58.0
2	86	18.3
3	52	11.0
4	60	12.7

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The average diameter of the tumor was 8.2 cm. Metastasis were present in 50 pts(10.6%), while lymph nodes were involved in 56 pts in whom lymphadenectomy was performed (N1:36pts, N2:10 pts, N3:10 pts.).

CONCLUSION

At our institution, we noticed the rise of number of patients operated for RCC in the ten year period from 1988 to 1999. The clinically assumed diagnosis of RCC was not pathologically confirmed in 10% of patients.

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