

VE07 Robot-assisted renal tumorectomy: Optimal treatment option in a solitary kidney with multiple tumours

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Introduction & Objectives: Active surveillance, ablation therapy or surgery (radical or partial nephrectomy) are treatment modalities for small renal masses. Management must be adapted to tumour characteristics and patient comorbidities.

Materials & Methods: We present the case of a 70-year-old male, with previous history of right radical nephrectomy in 2018 secondary to clear cell renal cell carcinoma Fuhrman grade 3 that extended into the cava vein. During follow-up, 2 solid lesions of 2 cm each were identified in the left kidney. Due to their location in the proximity of the renal vessels and pelvis, percutaneous treatment was dismissed. Robot-assisted tumorectomy of both lesions was performed.

Results: Operative time was 3 hours. There were no postoperative complications. The patient was discharged on day 4 after urinary catheter was removed. The pathological report confirmed clear cell renal cell carcinoma Fuhrman grade 3, with negative margins. At 6 months of follow-up, renal function has remained stable and there is no evidence of recurrence.

Conclusions: Robot-assisted partial nephrectomy has demonstrated good oncological outcomes with maximal preservation of renal parenchyma. It might be particularly indicated in solitary kidney, multiple renal tumours and patients with chronic renal disease. In appropriately selected patients, off-clamp technique is safe and further prevents renal function deterioration.