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Introduction & Objectives: Holmium laser enucleation of the prostate (HoLEP) is effective in treating lower urinary tract symptoms from prostatic disease. We investigate the role of HoLEP in the management of patients with benign prostatic hypertrophy (BPH) and prostate cancer (CaP).

Materials & Methods: Retrospective review of data regarding all patients undergoing HoLEP at a single institution was performed. Pre- and postoperative PSA, multiparametric MRI, and pathology results were analyzed for those with CaP identified prior to (group 1) or incidentally (group 2) at HoLEP.

Results: One hundred and 47 patients underwent HoLEP. Eighteen patients had CaP diagnosed before HoLEP and 16 patients (10.9%) had incidentally detected CaP at HoLEP. The total PSA dropped by 82.35%, from 8.27 ng/ml of the initial evaluation to 1.46 ng/ml at 3 months after HoLEP in group 1, and by 91.03%, from 3.01 ng/ml of the initial evaluation to 0.27 ng/ml at 3 months after HoLEP in group 2; the values remained stable up to 12 months. All patients in both groups (including patients who underwent cancer treatment postHoLEP) survived without cancer progression, including patients with PCa diagnosis at HoLEP and based on the initial PCa status.

Conclusions: More than the 10% of patients undergoing HoLEP might receive PCa diagnosis. The HoLEP could be performed even in PCa patients, in any disease stage, in order to relief lower urinary tract symptoms. In both cases, the HoLEP does not affect the oncological outcomes. Further investigation is warranted to determine the durability of success of these approaches.