

Açık Parsiyel Nefrektomi

8 Mart 2008, Antakya

Dr.Bülent Soyupak



Nefron Koruyucu Cerrahi

- ▶ Cerrahi tekniğin iyileşmesi
- ▶ Radyolojik görüntüleme
- ▶ İnsidental tm sayısı
- ▶ Adrenal ve lenf nodu metastazı



Nefron Koruyucu Cerrahi

- ▶ Endikasyonlar
 - ▶ Mutlak
 - Soliter böbrekte tümör
 - Bilateral tümör
 - Böbrek yetmezliği
 - ▶ Göreceli
 - Diğer böbreğin işlevlerinde ilerleyici bozulma olasılığı
 - Çok odaklı tümör gelişimine neden olabilecek hastalıklar (von Hippel Lindau hastalığı, papiller RCC)
 - ▶ Elektif
 - Sağlıklı diğer böbrek

Elektif NK Nefrektomi

► Sağkalım

► RN=NKN

	Ind*	No. of Patients	Tumor Size (cm)	Disease-Free Survival (5 Years) %	Local Recurrence (%)	Median Follow-Up (Months)
Van Poppel et al.[30]	A	76	0.9–15	96	0	75
Herr[31]	E	70	1.1–6.5	97	1.5	120
Hafez et al.[32]	A	310	<4	96	0.6	47
		175	>4	86	0.8	47
Lee et al.[33]	A	79	0.5–4	100	0	40
Lau et al.[34]	E	164	3.3 ± 1.7	98	1	44
Mc Kiernan et al.[35]	E	117	0.9–4.0	100	1.2	25
Kural et al.[36]	E	50	3.63 ± 1.36	100	0	33.1
Patard et al. [37]	A	314	0–4.0	97.8	0.8	51
		65	4.0–7.0	93.8	3.6	51
Leibovich et al.[38]	A	91	4.0–7.0	98	5.4	64
Becker et al.[39]	E	69	4.1–10.0	100	5.8	70
Mitchell et al.[40]	A	66	4–15.0	93.5	2.3	34

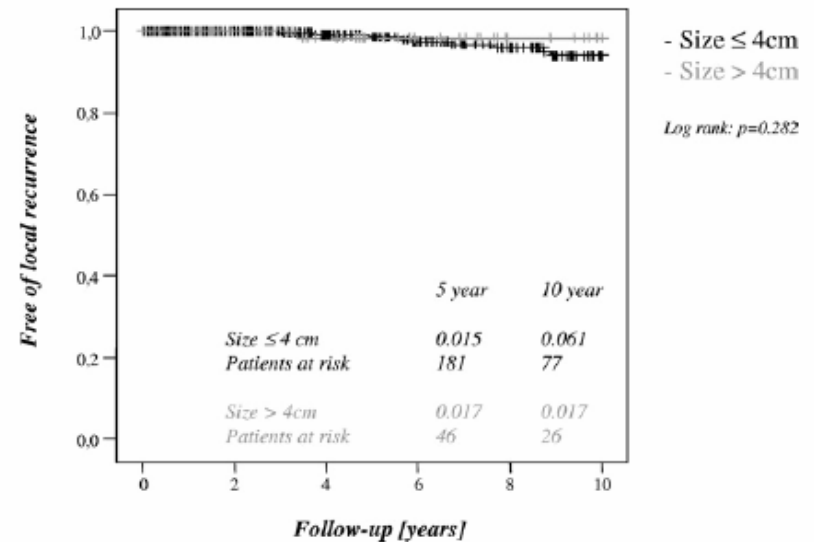
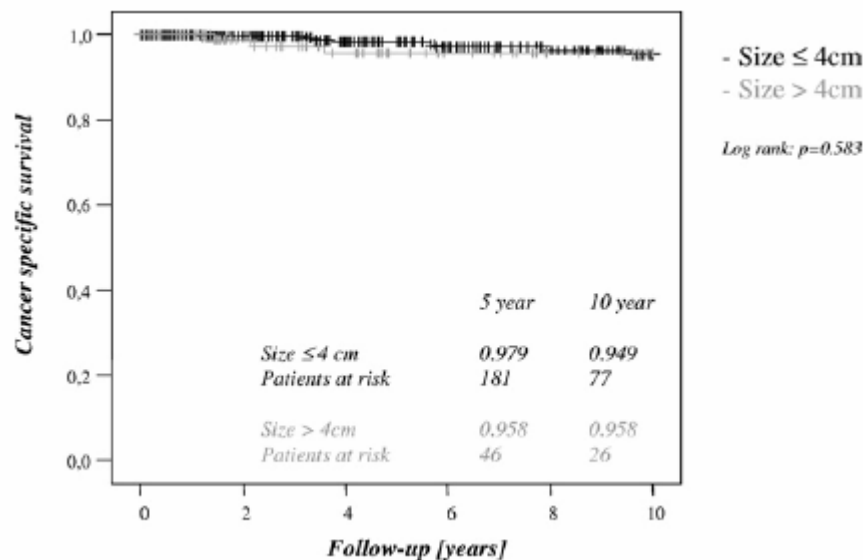
	No. of Patients		5-Year Disease-Free Survival (%)		Local Recurrence-Free Survival (%)		Median Follow-Up (Months)
	RN	NSS	RN	NSS	RN	NSS	
Lerner et al.[41]	209	185	89	89	—	94.4	44
Lau et al.[34]	164	164	97	98	97	99	44
Lee et al.[33]	183	79	96	96	100	100	40
Mc Kiernan et al.[35]	173	117	100	100	98.6	96.4	25
Leibovich et al.[38]	841	91	86	98	97.7	94.6	60
Patard et al.[37]	1075	379	97.4	97.8	99.6	99.8	51
Becker et al.[39]	369	241	95.5	97.8	—	94.4	64
Mitchell et al.[40]	66	33	97.8	96.2	98.8	97.7	60

	No. of Patients	Disease-Free Survival (5-Years) (%)	Local Recurrence (%)	Creat. Preop. (mg/dl)	Creat. Postop. (mg/dl)	No. of Patients End-Stage Renal Disease (%)
Absolute indications						
Fergany et al.[44]	96	88	4	1.4 ± 0.5*	1.8 ± 0.8*	7,3
Adkins et al.[45]	30	—	0	1.5**	1.8**	10
Saranchuk et al.[46]	54	88	6	1.4**	1.5**	3,7
Fergany et al.[47]	400	89	3.5	1.4 ± 0.5*	2.2 ± 1.3*	5
Elective indications						
McKiernan et al.[35]	117	100	1.2	0.98*	1.0*	0
Lau et al.[31]	164	96	1	1.1**	1.2**	1,2

Elective Nephron Sparing Surgery for Renal Cell Carcinoma Larger Than 4 cm

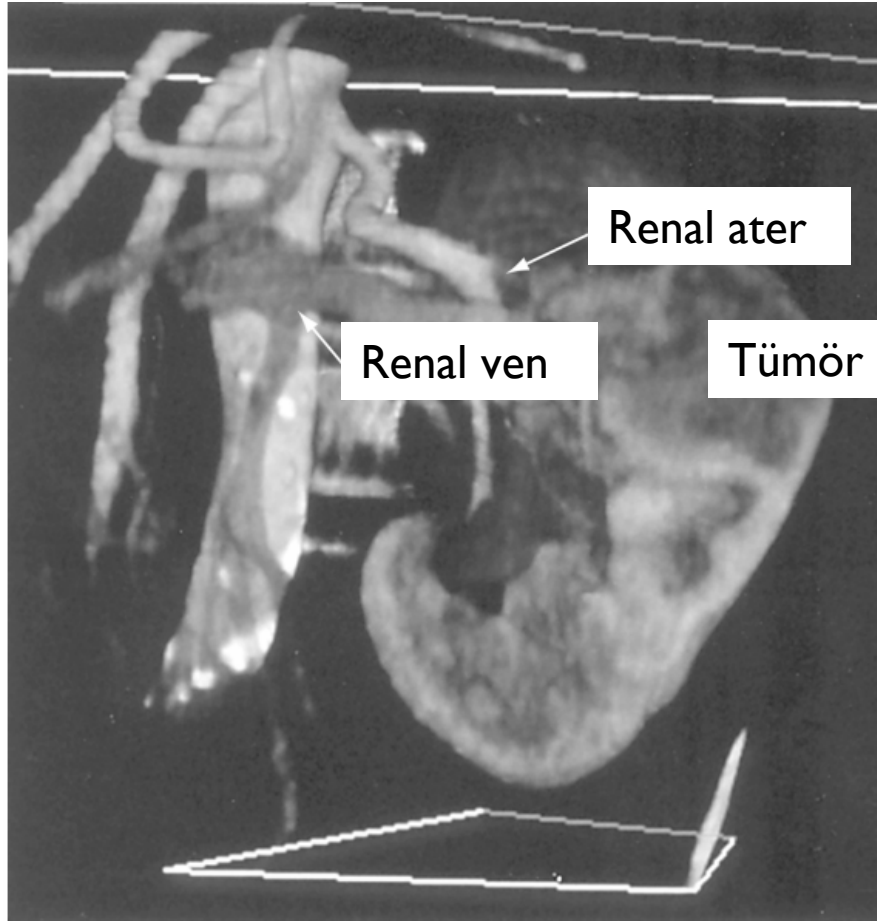
Sascha Pahernik,* Frederik Roos, Bernd Röhrig, Christoph Wiesner and Joachim W. Thüroff

From the Departments of Urology and Medical Biostatistics, Epidemiology and Informatics (BR), Johannes Gutenberg University, Mainz, Germany

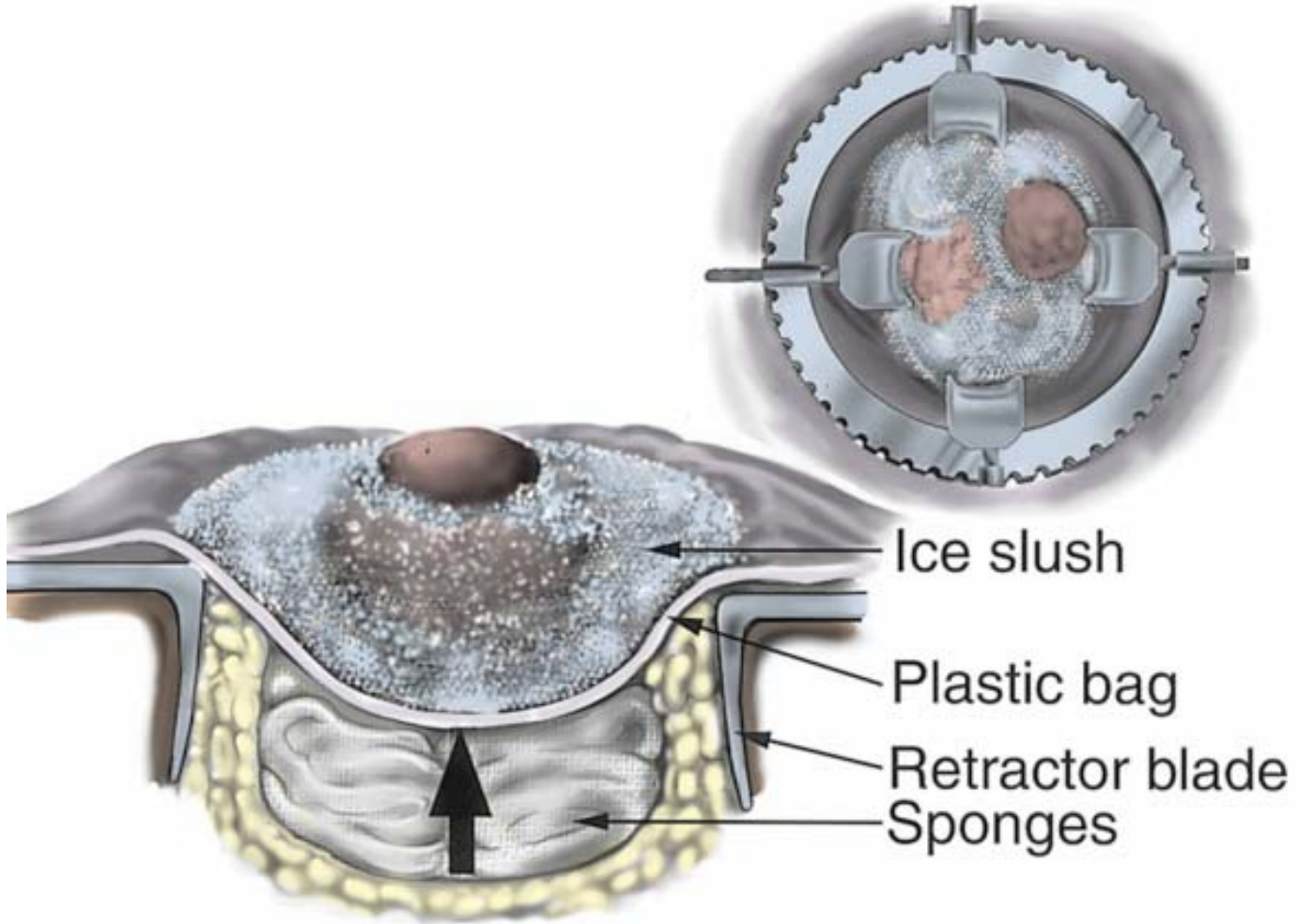


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- ▶ $T_m < 4\text{cm} \rightarrow \% 12-22$ benign
 - ▶ Kontralateral tm nüksü %1-5
 - ▶ BHRK
 - ▶ +ve sınır
 - ▶ Multifokalite
 - ▶ Papiller RHK
 - ▶ Grade
 - ▶ Yaşam kalitesi↑

3D CT



Teknik





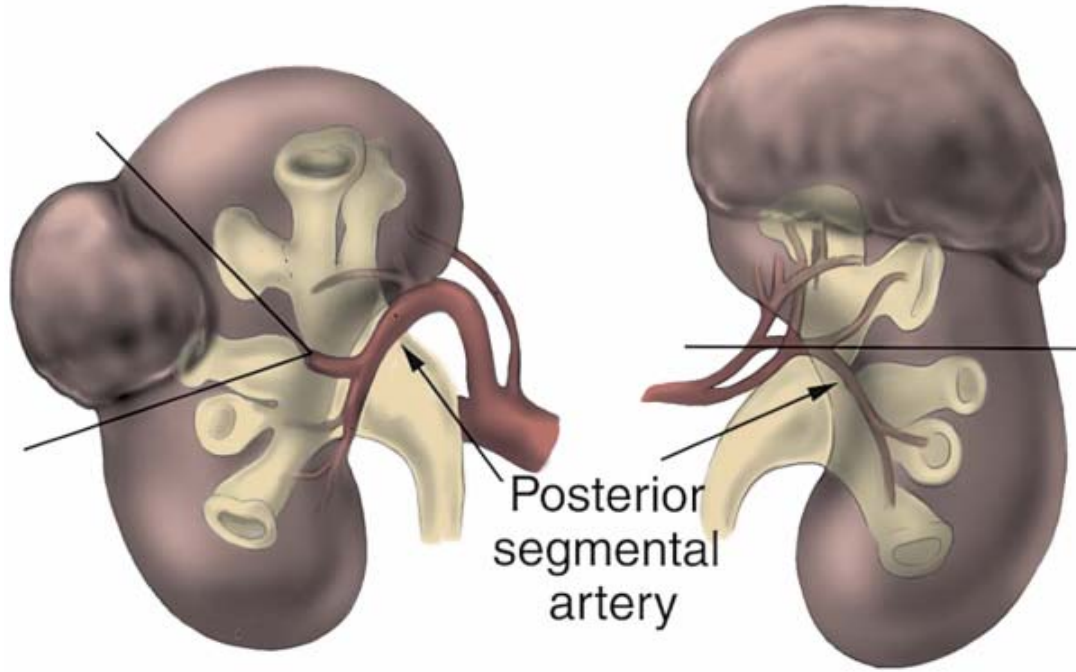
Temel prensipler

- ▶ Erken vasküler kontrol
- ▶ İskemik renal hasardan kaçınma
- ▶ Komplet tümör eksizyonu
- ▶ Toplayıcı sistemin kapatılması
- ▶ Hemostaz
- ▶ Renal defektin kapatılması eya doldurulması



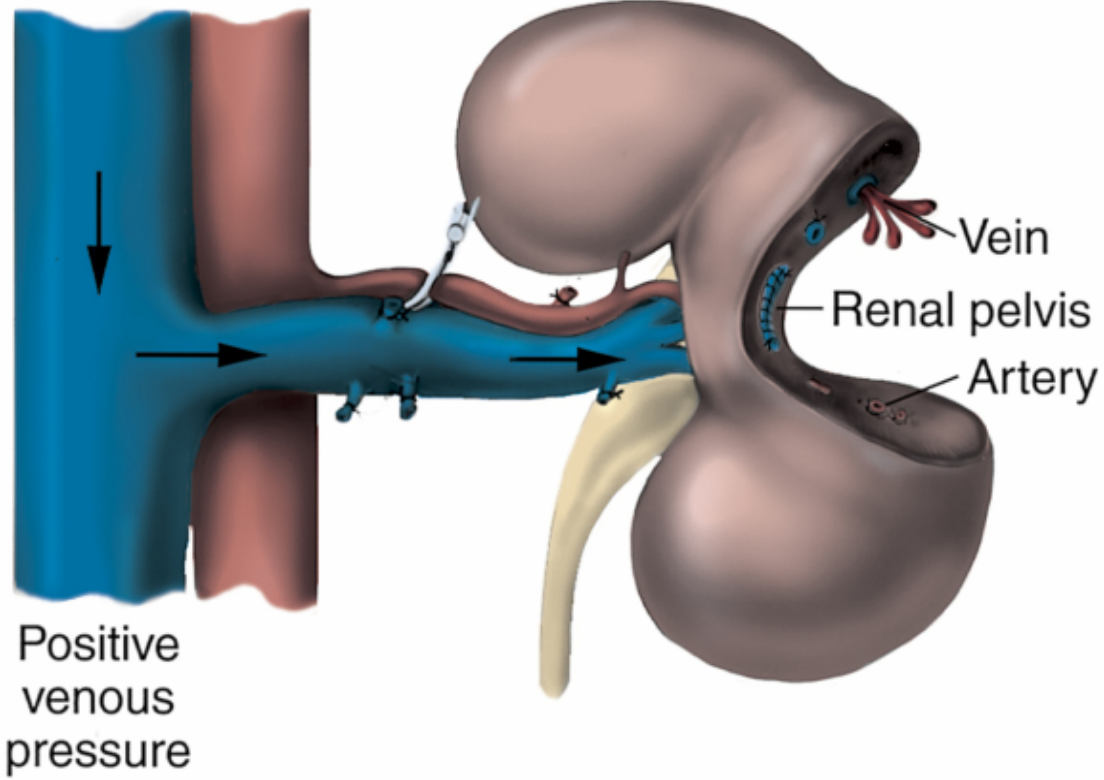
Teknik

- ▶ Renal arter kontrolü
 - ▶ Kanamayı ↓
 - ▶ Doku turgorunu ↓
- ▶ Renal ven kontrolü
- ▶ Hipotermi

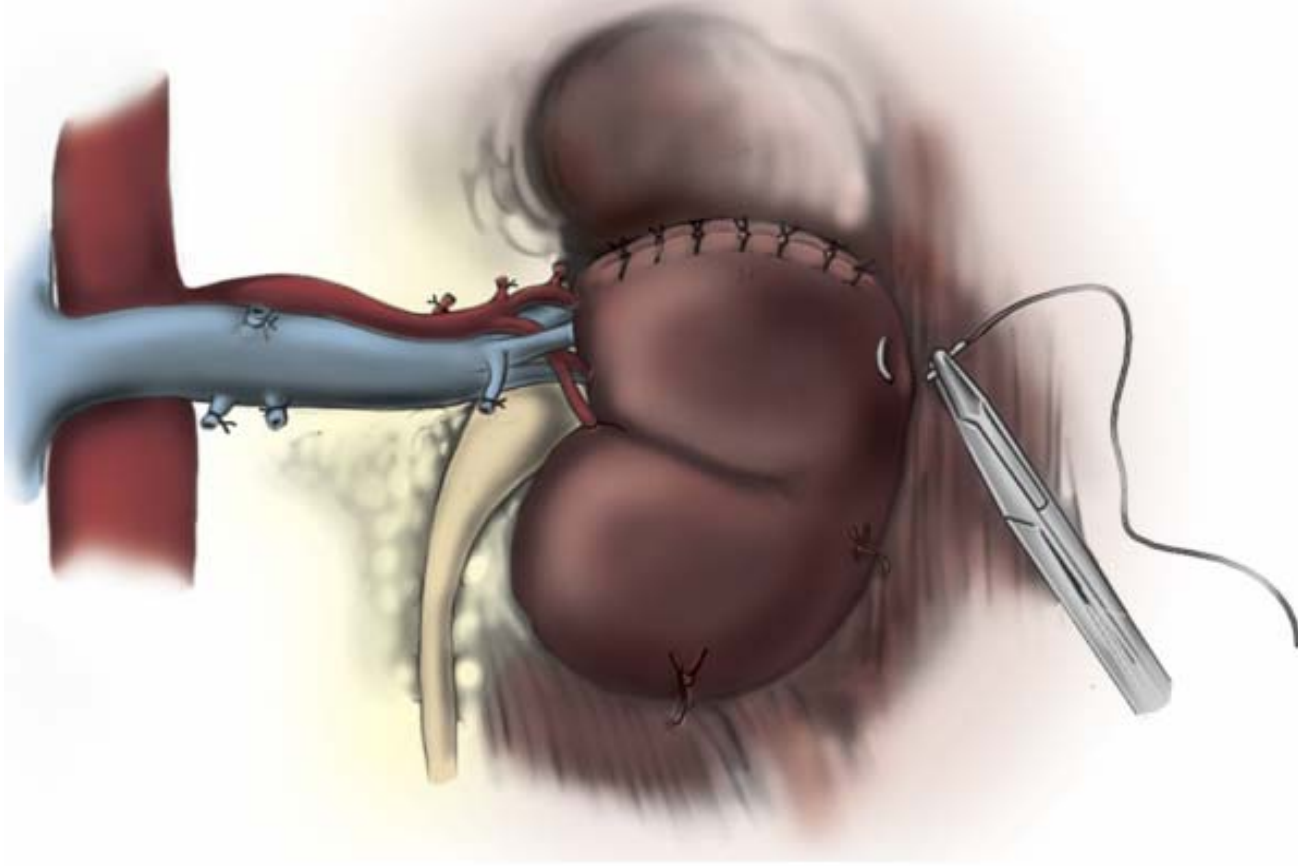




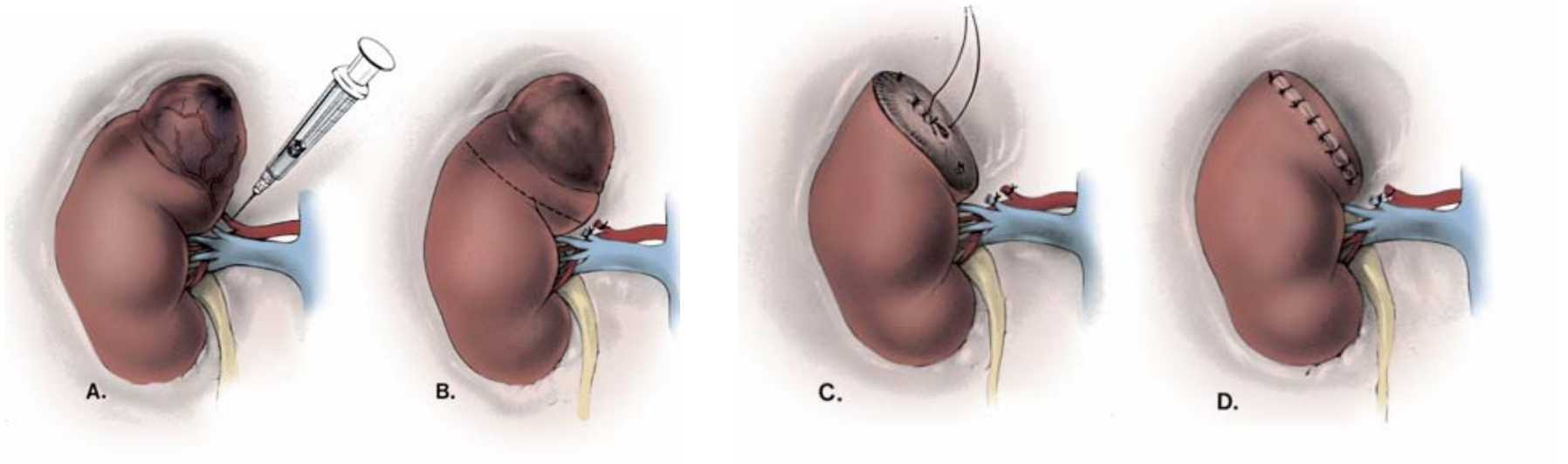
Lung hyperinflation



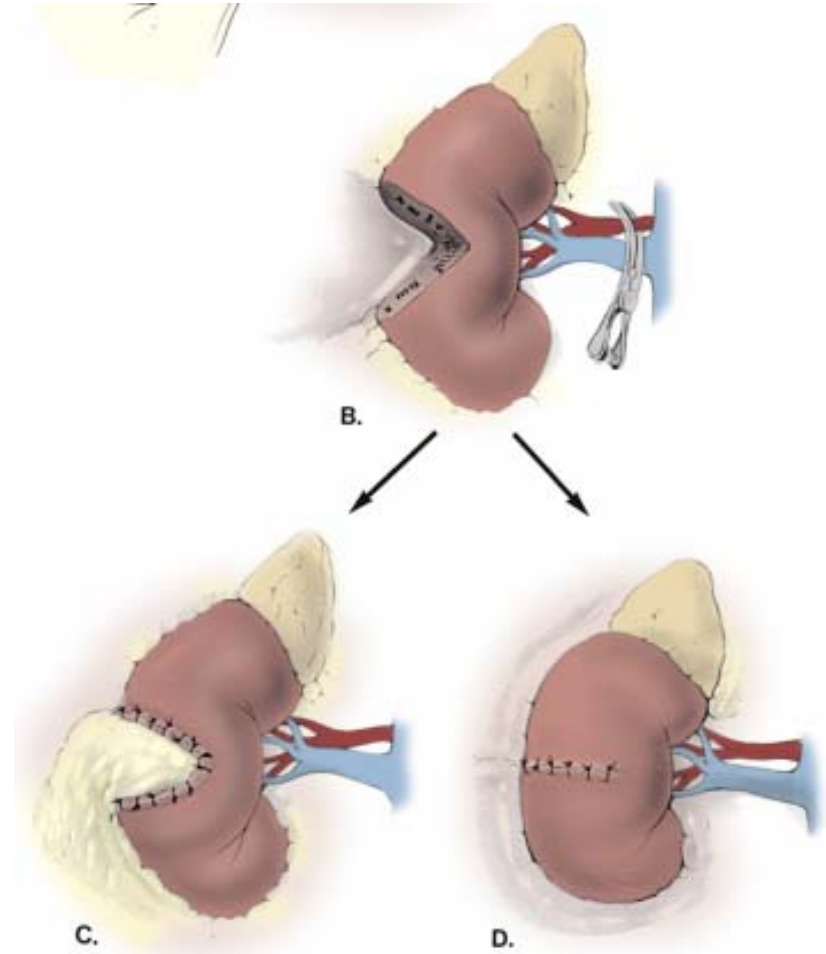
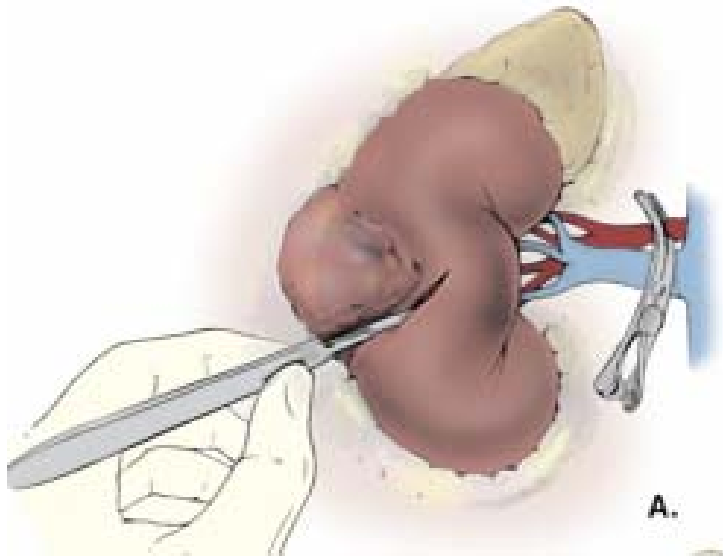
Nephropexy of Remnant Kidney



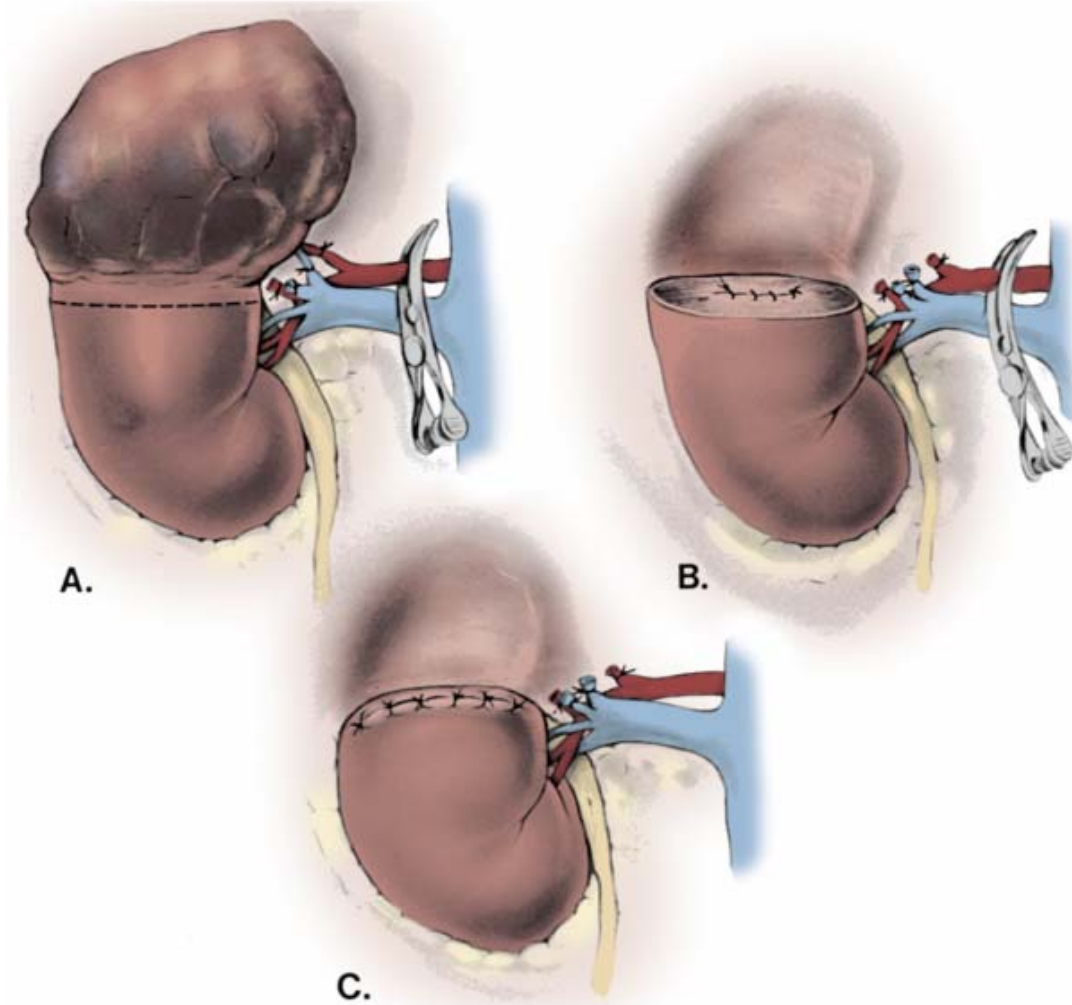
Polar nefrektomi



Wedge rezeksiyon



Transvers rezeksiyon





Cerrahi sınır

- ▶ 1 cm
- ▶ Renal fonksiyon kaybı
- ▶ Satelit lezyonlar
(Li, zucchi, Van Poppel)
- ▶ Genişlik \neq nüks
(Sutherland)
- ▶ Enükleasyon
(Lapini)



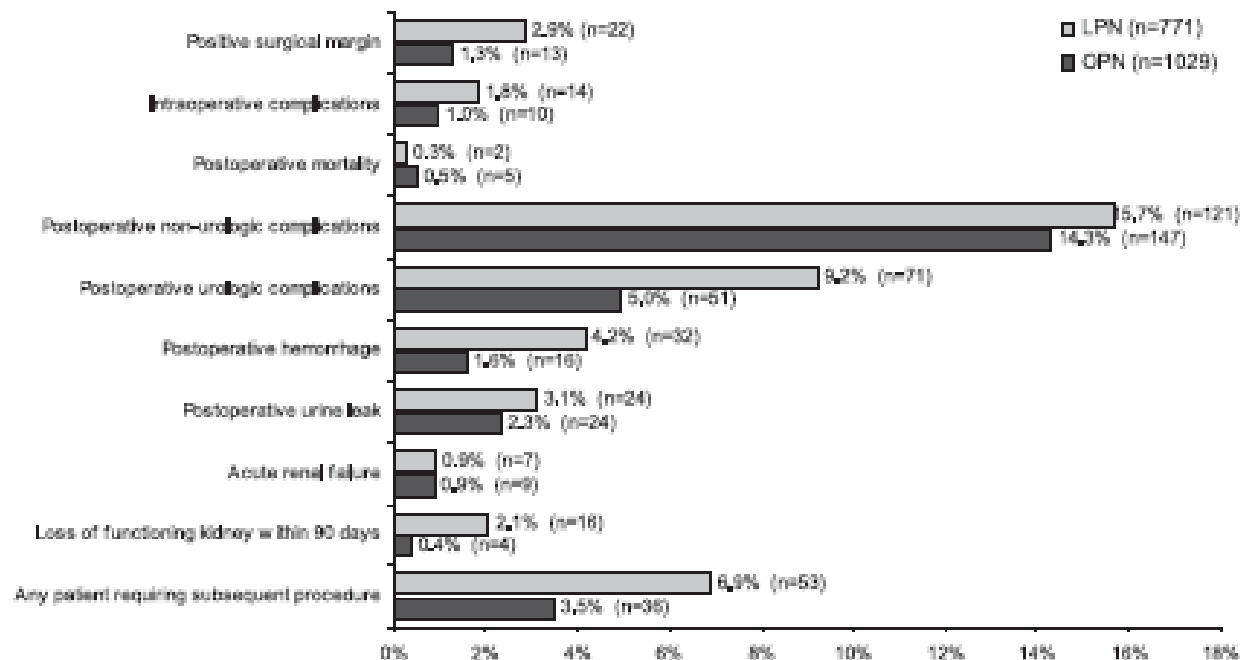
Komplikasyonlar

- ▶ Kanama
- ▶ Fistül (% 17)
- ▶ Üreteral obstrüksiyon
- ▶ Böbrek yetmezliği (% 26)
- ▶ Enfeksiyon

Comparison of 1,800 Laparoscopic and Open Partial Nephrectomies for Single Renal Tumors

Inderbir S. Gill, Louis R. Kavoussi, Brian R. Lane, Michael L. Blute, Denise Babineau, J. Roberto Colombo, Jr., Igor Frank, Sompol Permpongkosol, Christopher J. Weight, Jihad H. Kaouk, Michael W. Kattan and Andrew C. Novick*

From the Glickman Urological Institute (ISG, BRL, JRC, CJW, ACN) and Department of Quantitative Health Sciences (DB, MWK), Cleveland Clinic, Cleveland, Ohio, and Departments of Urology, The Johns Hopkins Hospital (LRK, SP), Baltimore, Maryland, and Mayo Clinic (MLB, IG), Rochester, Minnesota



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- ▶ Açık parsiyel nefrektomi nefron koruyucu cerrahinin uygun olduđu hastalarda altın standarttır.