AUA 2018 - Abstract MP 28-17 - Saturday May 19

Non Type 1 pRCC is associated with a worst oncological outcome in patients treated surgically

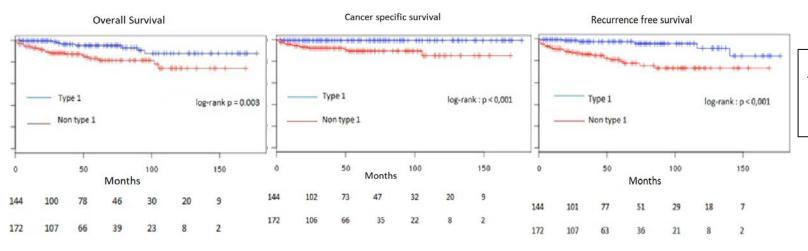
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<u>Objective</u>: There is conflicting data on prognostic implications of subclassification of pRCC. We aim to determine whether histological subtyping can be considered as a prognostic factor for survival.

Methods: A bicentric retrospective study compared clinicopathologic features and survival in patients treated surgically for 164 Type 1 and 198 Non Type 1 pRCC.

<u>Results</u>: Non Type 1 pRCC tumors were associated with more aggressive histological characteristics. Overall survival, cancer free survival and specific survival were significantly lower in Non Type 1 pRCC group. 92% Non Type 1 tumors were high Fuhrman grade lesions, which was the only histological prognostic factor for overall survival on multivariate analysis.

	Type 1 (n = 164)	Non Type 1 (n = 198)	р
Low grade (1-2) High grade (3-4)	123 (75%) 41 (25%)	16 (8,1%) 181 (91,9%)	< 0,001
Mean Tumor Size (mm)	35,8	53,6	< 0,001
Multifocal	45 (27,4%)	23 (11,6%)	0,0002
pT1 pT2 pT3 pT4	145 (88,4%) 12 (7,3%) 7 (4,3%) 0	121 (61,1%) 27 (13,6%) 48 (24,2%) 1 (0,5%)	< 0,001
Sarcomatoid contingent	3 (1,8%)	21 (10,6%)	0,001
Vascular Emboli	5 (3%)	28 (14,1%)	< 0,001
Presence of Tumor Necrosis	57 (34,8%)	128 (64,6%)	< 0,001
N stage	1 (0,6%)	12 (6%)	0,008



<u>Conclusion</u>: Non Type 1 pRCC is strongly associated with high grade and survival is significantly lower when compared to Type 1 pRCC.