BACKGROUND

- Percutaneous renal mass biopsy (RMB) is an important tool in the management of renal cell cancer, which can be used for risk stratification and treatment planning.
- High sensitivity and specificity for identification of renal cancer.
- Low overall and major complication rates, 2.2% and 0.4%.

OBJECTIVE

- To evaluate patient, tumor, and technical factors associated with procedural complications after RMB.

METHODS

- 1155 consecutive patients undergoing percutaneous core RMB from 2000-2017 were identified. Patients routinely called 2 days after procedure to assess complications.
- No patient, tumor or technical factor evaluated was predictive of non-diagnostic rate.

RESULTS

- Multivariate logistic regression analysis for factors associated with non-diagnostic rate.
- No cases of tumor seeding identified.
- Hospital admission in 11 patients (1.0%).

CONCLUSIONS

- Low overall and major complication rates, 2.2% and 0.4%.
- No patient, tumor or technical factor evaluated was predictive of complications.
- No difference in patients who remained on ASA, platelet >25,000 but < LLN, or INR 1.2-2.
- Non-diagnostic biopsy was more likely in cystic masses, hypo-enhancing with larger skin-to-tumor distance and smaller diameter.