OBJECTIVES

To compare the morbidity and functional results after radical retropubic prostatectomy with and without previous transrectal prostate biopsy related acute prostatitis history.

METHODS

We retrospectively reviewed data available 320 patients undergoing open radical prostatectomy between 2010 and 2016 of whom 23 (7.2%) had previous transrectal prostate biopsy related acute prostatitis history. The perioperative and postoperative data were statistically compared between group 1 (with previous prostatitis) and group 2 (without previous prostatitis). Variables evaluated included demographic characteristics, perioperative complications, functional and oncological outcomes.

RESULTS

In group 1, the operative time, hospitalization and bladder catheterization time was statistically increased by 40 minutes, 1.9 days, and 2.5 days, respectively (p<0.001, p<0.001, p=0.02). The positive margin rate was not significantly different between the two groups (p=0.64). The rate of complications with Clavien > 2 increased in group 1 (G1 26% vs G2 12%) (p=0.02). Neurovascular bundle preservation ratio was statistically higher in group 2 (G1 46.5% vs G2 76.9% ) (p=0.02) (Table 1).

CONCLUSIONS

Previous transrectal prostate biopsy related acute prostatitis history is associated with higher operative time, hospitalization and bladder catheterization time and perioperative complications during RP. Although the neurovascular bundle preservation is technically more difficult, potency and the urinary continence rate was not affected by previous prostatitis history according to our study. Further studies are still necessary to confirm these results.