

### عنوان مقاله:

Prognostic Implication and Survival Outcomes of Perioperative Blood Transfusion on Urological Malignancies **Undergoing Radical Surgical Intervention** 

## محل انتشار:

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#### خلاصه مقاله:

Background & Objective: Background and objective: Perioperative blood transfusion (PBT) during radical urological surgeries has been associated with an increased incidence of complications. The present study analyzes the outcome of perioperative blood transfusion (PBT) and the prognostic implications after radical surgeries on patients with malignant urological tumors. Methods: Our retrospective study included Y9Y cases of partial or radical nephrectomy /cystectomy/prostatectomy surgeries for kidney/bladder/ prostate carcinoma from YoYY. Data on preoperative, intraoperative, and pathological parameters were evaluated. PBT was taken as a period of transfusion of allogenic RBC during/preoperative/postoperative surgeries. The effect of PBT on oncological parameters like recurrence-free survival (RFS), overall survival (OS), and cancer-free survival (CSS) was compared using univariate cox regression analysis (Odds ratio, Hazard ratio). Results: PBT was applied on NYF (Yo.5%) patients of nephrectomy, &F (F5.6%) patients of cystectomy, and ۲۳ (۳۱%) patients of prostatectomy. The baseline characteristics of the cohort study found symptomatic patients with older age and other co-morbidities to be transfusion-dependent. Also, the patients undergoing radical operations with more blood loss and advanced tumor stage were more likely to receive PBT. PBT was significantly associated with survival outcomes (P<...Δ) in nephrectomy and cystectomy cases but independent of association in prostatectomy cases. Conclusion: The result of this study concludes that in nephrectomy and cystectomy operations, PBT had a significant association with cancer recurrence and mortality; however, in prostatectomy cases, no significant correlation was noted. Thus, proper criteria to prevent the unnecessary use of PBT and more defined parameters for transfusion are needed to improve postoperative survival. Autologous transfusion should be considered more frequently. However, more extensive studies and randomized trials are needed in this

# كلمات كليدى:

Perioperative blood transfusion, Urological malignancies, Nephrectomy, Cystectomy, Prostatectomy

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