

## عنوان مقاله:

A Comparison of Early Results and Patient Satisfaction Rate between Modified Radical Cystectomy with Mainz II Urinary Diversion and Standard Radical Cystectomy with Continent Ileocecal Urinary Diversion

## محل انتشار:

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## نویسندگان:

Saeed Shakeri - *Department of Urology, Shiraz University of Medical Sciences, Shiraz, Iran*

Hossein Zeighami - *Student Research Committee, Fasa University of Medical Sciences, Fasa, Iran*

Mehdi Salehipour - *Department of Urology, Shiraz University of Medical Sciences, Shiraz, Iran*

Hossein Beik Mohammadloo - *Department of Urology, Shiraz University of Medical Sciences, Shiraz, Iran*

Aria Shakeri - *University of Toronto, Toronto, Canada*

Arash Shakeri - *University of Waterloo, Waterloo, Canada*

Shahryar Zeighami - *Department of Urology, Shiraz University of Medical Sciences, Shiraz, Iran*

## خلاصه مقاله:

**Background:** This study compared the early success, complication and patient satisfaction rates of modified extraperitoneal radical cystectomy (Mainz II urinary diversion) with standard intraperitoneal radical cystectomy (continent ileocecal urinary diversion) in a group of patients with muscle invasive urothelial carcinoma of the urinary bladder. **Methods:** From September ۲۰۰۹ until November ۲۰۱۳, this randomized study enrolled ۶۰ patients with muscle invasive transitional cell carcinoma of the urinary bladder who underwent radical cystectomy and urinary diversion. The patients were randomly allocated to two groups via block randomization. Group A included ۳۰ patients (۲۸ men and ۲ women) who underwent modified small incision extraperitoneal radical cystectomy with a Mainz II urinary diversion. Group B included ۳۰ patients (۲۷ men and ۳ women) who had classic intraperitoneal radical cystectomy and ileocecal continent diversion. The data were extracted and analyzed. The patients were followed for one year after surgery. **Results:** Group A patients had a mean age of  $۶۱.۴۷ \pm ۸.۶۳$  years. Group B patients had a mean age of  $۶۰.۷۷ \pm ۶.۸۲$  years. There were no statistically significant differences in blood loss, electrolyte and acid-base abnormalities, and early post-operative complication rates between the two groups. However, surgical and hospitalization times were significantly shorter in group A ( $P < ۰.۰۰۱$ ). In addition, patients were mobilized earlier and had shorter nothing by mouth time. Patient satisfaction rate was significantly more in group A. **Conclusion:** Small incision extraperitoneal radical cystectomy and Mainz II urinary diversion is a safe, less complicated, effective and more rapid technique with excellent short term outcome. It seems this technique is a reliable alternative for continent urinary diversion in selected bladder cancer patients, mainly in those with urethral involvement.

## کلمات کلیدی:

