

Isolated loco-regional recurrence after radical nephrectomy for renal cell carcinoma: A study of 22 patients

Ihab Samy Fayekl, Hany Fayez Habashy², Nevine Fayez Habashy³ 1-Surgical Oncology Department, National Cancer Institute, Cairo, Egypt 2-Surgery Department, Fayoum Teaching Hospital, Fayoum University, Fayoum, Egypt 3-Surgical Pathology Department, National Cancer Institute, Cairo, Egypt

Abstract

Objective: This study aimed to assess prognosis of isolated local recurrence (ILR) of renal cell carcinoma (RCC) after radical nephrectomy (RN). **Patients and Methods:** This retrospective study involved 22 cases (16 men and 6 women) of ILR from two centers with a mean age of 60.1 ± 8.5 years. All cases were managed surgically. **Results:** Primary tumors were mainly clear cell carcinoma (n= 17). Nine patients had T3 and T4 tumors. Local recurrence involved mainly the operative bed (n=17); 4 among them had nodal recurrence as well. The median interval to local recurrence was 13.5 months (7-25 months). Stages T3 and T4 were significantly associated with shorter interval. Complete excision was possible in 9 patients (41%); 8 tumors were irresectable. It was associated with significantly higher overall and median disease-free survival (DFS). Advanced disease stage ($p= 0.002$) and shorter interval to recurrence ($p<0.001$) were associated with higher proportion of incomplete excision. The median overall survival and DFS were 15 months (95% CI: 4.4-25.6) and 10 months (95% CI: 4.5-15.5), respectively. Overall and DF survival were significantly better in patients with nodal recurrence only, complete excision of the recurrence and interval from nephrectomy to recurrence >15 months. **Conclusion:** ILR after radical nephrectomy for RCC is more common with more advanced stages, where interval to recurrence tends to be shorter. The management should be surgical, which was possible in nearly 60% of cases. Complete excision was associated with better overall and disease free survival.

KEYWORDS: Isolated loco-regional recurrence; Radical nephrectomy; Renal cell carcinoma