# البحث الرابع

Factors related to upstaging of clinical stage T2 organ-confined bladder cancer following radical cystectomy: A multicenter study

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### **English Summary**

#### Purpose:

This study aimed to detect possible risk factors related to upstaging of clinical stage T2 organ confined (OC) to non OC (nOC) bladder cancer (BC) following radical cystectomy (RC).

## **Patients and Methods:**

This is a multicenter prospective study including 196 Egyptian BC patients undergoing RC from January 2017 to February 2019 at Cairo University, Fayoum University, and Menoufia University. Only patients with muscle invasive BC (T2) were included in the study. Patients' characteristics, preoperative clinical data (including Hydronephrosis), cystoscopy data, and biopsy pathological data were recorded. Preoperative clinical staging is compared to postoperative pathological staging, to determine upstaged cases. The occurrence of upstaging in correspondence to each preoperative factor is recorded and statistically analyzed.

# Results:

Among 196 BC patients of our study, upstaging from OC T2 to nOC occurred in 88 (44.9%) patients. Statistical analysis showed that the factors related to upstaging are older age ( $P \le 0.001$ ), large tumor size (P = 0.048), lymphovascular invasion (LVI) ( $P \le 0.001$ ), and multifocal tumor

(P  $\leq$  0.001). On the other hand, the following factors were not related to upstaging: gender (P = 0.159), smoking (P = 0.286), preoperative hydronephrosis (P = 0.242), and presence of carcinoma in situ (P = 0.349).

### **Conclusions:**

The difference between clinical and pathological staging of BC patients following RC is a frequent problem with no clear guidelines to overcome it. Several factors including age of the patient, large tumor size, LVI, and multifocal tumor are predictors of upstaging in OC BC. A good concern must be taken in these patients to achieve an optimum treatment plan for them.