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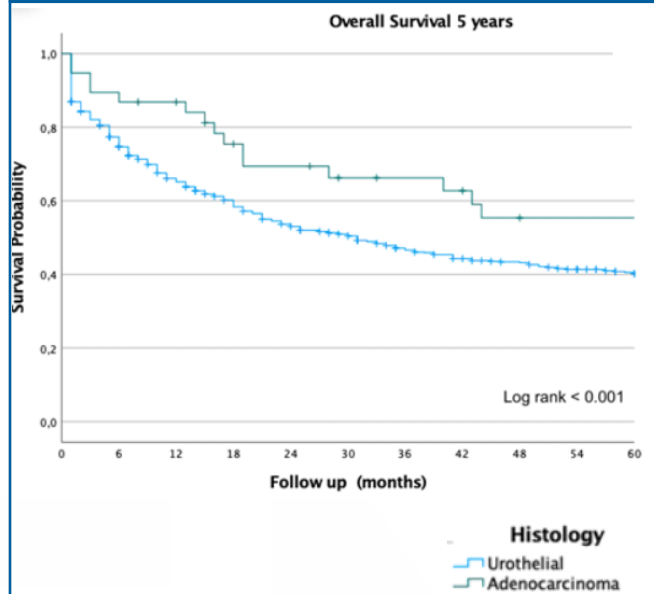
Introdução e Objetivo

Long-term oncologic data on patients undergoing radical cystectomy for non-metastatic primary bladder adenocarcinoma (BA) are limited. We assessed patients receiving radical cystectomy at a high-volume tertiary oncological Institution.

Método

We analyzed medical records of 40 patients with primary bladder adenocarcinoma between January 2008 and July 2023 at a high-volume oncological center (Institute of Cancer of São Paulo, Brazil). Clinical and pathologic, and survival data at the latest follow-up were collected. Clinical recurrence-free survival, cancer-specific mortality and overall survival were investigated using Kaplan-Meier survival curves and compared with urothelial carcinoma.

Figuras



Resultados

The study is a clinicopathologic report on 40 patients with primary adenocarcinoma of the urinary bladder and urachus. The mean age was 62 (12.64) years, 8 cases with urachal tumors, 3.2% with concomitant carcinoma in situ, 25.6% with lymphovascular invasion. All tumors exhibited adenocarcinomatous features in at least two thirds of the examined tumor area. 16 patients presented recurrency. The Kaplan Meyer curve was illustrated in figure 1 and compare the overall survival of adenocarcinoma with urothelial carcinoma.

Coluna 1	Coluna 2
Characteristic	Overall population
Age at Cystectomy (Years)	39
Median (IQR)	66 (15%)
Gender	35
Male	19 (48.7%)
Female	20 (51.3%)
Body Mass Index (kg/m ²)	24
Mean (SD)	71.3 (416.1%)
Patient Smoking Status	35
Non-smoker	13 (36.1%)
Current	8 (22.2%)
Past	15 (41.7%)
ASA Score*	35
I	3 (7.7%)
II	30 (77.7%)
III	6 (15.3%)
ACCP**	19
2-4	11 (57.9%)
5-6	6 (31.6%)
≥ 7	2 (10.5%)
Clinical stage of urothelial Bca	25
High Risk Non Muscle Invasive	1 (4%)
Muscle Invasive	24 (96%)
Chemotherapy before radical cystectomy	35
Yes	7 (18.4%)
No	31 (81.5%)
Preoperative laboratorial tests	
Neutrophil-to-lymphocyte ratio; Mean; SD	36.56 (±3.31%)
Hemoglobin (g/dL); Mean; SD	11.87 (±2.2%)
Albumin (g/dL); Mean; SD	3.53 (±0.83%)

Creatinine (mg/dL); Mean; SD	1.49 (±1.67%)
Urachal Adenocarcinoma	36
Yes	8 (21%)
No	30 (75%)
Partial Cystectomy	36
Yes	9 (23.7%)
No	29 (76.3%)
Pathological T stage	34
T0	5 (14.7%)
Ta	0
T1b	0
T1c	2 (5.9%)
T2	6 (17.6%)
T3	9 (25.2%)
T4	12 (35.3%)
Number of lymph nodes removed	35
0 - 10	6 (17.1%)
11 - 20	15 (42.9%)
21 - 30	8 (22.9%)
≥ 31	6 (17.1%)
Number of positive lymph node	25
1	17 (68%)
2	1 (4%)
3	2 (8%)
4	2 (8%)
≥ 5	3 (9%)
Lymph node density	33
0	25 (75.8%)
0 - 0.33	32 (96.9%)
> 0.33 - 0.5	0
> 0.5 - 1	1 (3%)

Carcinoma In Situ	28
Yes	2 (7.2%)
No	26 (92.8%)
Lymph-vascular Invasion (LVI)	30
Yes	10 (33.3%)
No	20 (66.6%)
Hydronephrosis	27
Yes	9 (33%)
No	18 (66.6%)

Conclusão

Patients with primary adenocarcinoma of the bladder have epidemiological profile different from urothelial carcinoma and have lower mortality than patients with urothelial cancer.

Referências

Pantuck AJ, Vates TS, Javidian P, Weiss RE. Urachal adenocarcinoma. Can J Urol. 1997 Dec;4(4):450-452. PMID: 12735811.
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