Title: Radical Cystectomy in a High-Volume University Hospital Urology Service.

## Introduction and Objective:

Bladder cancer is the second most common malignant urological neoplasm, with 90% of cases being transitional cell carcinomas. Cystectomy is a radical treatment aimed at oncological control but is associated with high morbidity and mortality rates. Outcomes depend on various factors such as the patient's overall health, disease staging, and the experience of the medical center. The objective of this study is to describe the results of radical cystectomy performed by a urology service in a high-volume university hospital.

## Methods:

We conducted a retrospective cohort study of medical records of all patients who underwent radical cystectomy for bladder cancer between January 2019 and May 2023. We evaluated patients' clinical characteristics as well as postoperative tumor staging. All surgeries were performed by the same surgical team, with open cystectomies done under general anesthesia or neuro-axis block and robotic procedures with intracorporeal diversion. We assessed postoperative complications within the first 60 days after surgery using the Clavien-Dindo scale and presented overall survival.

## Results:

A total of 74 patients were included in the study, with 59 undergoing open radical cystectomy and 15 undergoing robotic procedures, averaging 22.2 patients per year. Patient and tumor characteristics, surgical outcomes, and complications are presented in the table.

Variável	Aberta (59)	Robótica (15)
Idade	65,52 (38-81)	62,6 (44-72)
Sexo Masculino	37 (63%)	13 (86%)
Sexo Feminino	22 (37%)	2 (14%)
Derivação		
Derivação -Ureterostomia cutânea	27	3
Derivação - Bricker	30	5
Derivação - Neobexiga	1	7
Estadiamento		
TNM – Estádio 1	10	1
TNM – Estádio 2	24	6
TNM – Estádio 3	19	8
TNM – Estádio 4	6	1
Complicações		
Tempo de Internação	21,9 (5-84)	18,2 (5-56)
Clavien-Dindo 1 a 2	32	9
Clavien-Dindo acima de 3	24	6

Sobrevida global	55%	33%	

Conclusion: Despite our center performing a high volume of cystectomies, our patients tended to have more advanced disease, yet the incidence of complications is similar to the literature.