

EDITORIAL COMMENT

Application of robot-assisted surgery has progressed with its use in the pelvis especially for radical cystectomy and hysterectomy. Despite this advance, the average patient undergoing robot-assisted radical cystectomy is older, has multiple comorbid conditions and potential for metastatic disease which needs to be addressed with thorough oncologic diligence. Fairey et al¹ in their retrospective analysis of 314 patients found that severe medical comorbidity was associated with an increased 90 day mortality and risk of postoperative complication. Megwalu II et al² evaluated 675 patients and revealed that comorbidity was an independent predictor of overall survival. This paper brings to light a critical component observed in patients who are surgical candidates for advanced localized bladder cancer. However, robot-assisted radical cystectomy should be cautiously introduced at centers which have already established their robot-assisted surgical programs. Extensive experience in robot-assisted radical prostatectomy and a significant background in open oncologic surgery are required to manage the burden of this lethal disease.

References

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2. Megwalu II, Vlahiotis A, Radwan M, Piccirillo JF, Kibel AS. Prognostic impact of comorbidity in patients with bladder cancer. *Eur Urol* 2008;53(3):581-589.

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