Published in final edited form as:

J Urol. 2012 December ; 188(6): 2212. doi:10.1016/j.juro.2012.10.023.

Commentary: Robotic Radical Prostatectomy is an Effective Approach for Treating Localized Prostate Cancer—is it Technique or Technician?

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In this issue of The Journal Liss et al (page 2205) confirm that robotic prostatectomy is an oncologically safe and effective modality with 5-year biochemical recurrence-free survival outcome comparable to that of open radical prostatectomy.¹ In their study, while biological variables such as Gleason grade and pathological stage were the major determinants of biochemical recurrence, an iatrogenic positive surgical margin also increased the risk for recurrence. In that regard, the masters of open radical prostatectomy taught us that attaining negative surgical margin while preserving continence and sexual recovery is a challenging task and that a continued learning process based on feedback can result in improved surgical technique.²

To compare and appreciate the differences in surgical techniques in attempting to reduce apical positive margin rates,³ we selected the video “Nerve-sparing retropubic radical retropubic prostatectomy with extracapsular dissection: quality of surgical excision” (2010 V0476) and the video “Anatomic retro-apical technique for synchronous posterior-anterior approach to apical transection during robotic radical prostatectomy” (2010 V0474). We wish to emphasize that clear understanding of surgical anatomy, delicate tissue handling and attention to details are the common factors for attaining optimal outcomes regardless of surgical approach.

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