CASE OF THE WEEK





CURING KIDNEY CANCER WITHOUT COMPROMISING KIDNEY FUNCTION

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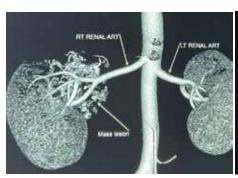
Senior Consultant Urology, Uro-Oncology and Robotic Surgery

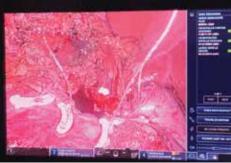
Apollo Hospitals, Chennai

Renal cell carcinoma accounts for 3% of all adult cancers and 85% of all kidney tumours. In India, probably due to lack of reporting incidence is considered to be low. Many renal masses remain asymptomatic until the late disease stages. The majority of RCCs are detected incidentally by non-invasive imaging investigating various non-specific symptoms and other abdominal diseases. When detected at an early stage these tumours can be cured without losing the kidney.

For people with localized T1a-b renal tumours (size of tumour less than 7cm), both partial nephrectomy and radical nephrectomy have been shown to have similar oncological effects. At the same time, studies have shown that patients with partial nephrectomy have less post-operative renal function decline than radical nephrectomy. Therefore, regardless of whether laparoscopic assisted or robot-assisted, partial nephrectomy is regarded as the best choice for the treatment of T1 renal tumours whenever possible though it is technically demanding.

This 41 year old gentleman from Assam presented with right loin pain and on evaluation with a ultrasound he was found to have a 6 cm right renal mass. We evaluated him with CT scan with contrast that showed a 6.3x5.4cm enhancing mass lesion on medial aspect of upper and interpole region of right kidney that was highly suspicious of malignancy.





At Apollo Greams Road, he underwent a partial nephrectomy thereby preserving the portion of the kidney with tumour. The cutting edge of the procedure is the cancer is cleared off from the kidney whereas the remaining portion of the

functioning kidney without cancer is preserved. Dr.N.Ragavan, Senior Consultant Uro Oncologist operated on the patient with the latest technology Da Vinci Xi Robot.

The advantage of the robotic surgery for a partial nephrectomy is that the patient can return back to his normal activities far earlier than any open procedure. It also means that a long incision on the abdomen is avoided and post-surgery the patient has minimal pain and requires less support. Spreading the word about these conditions and the latest treatment options available is vital, and you can help. The biopsy report showed margins without tumour and this procedure successfully brought some quality and meaning to the life of this patient in terms of cancer cure along with preservation of the kidney.

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