Better Survival Rates With Robotic Prostate Surgery

/PRNewswire/ -- In a first-of-its kind research initiative, radical prostatectomy surgery yielded better survival rates than external beam radiation therapy (EBRT) in the treatment of localized prostate cancer. Dr. David Samadi, world-renowned SMART (Samadi Modified Advanced Robotic Technique) robotic surgeon and prostate cancer treatment expert, talks about this study of more than 1,600 men and the survival benefits of robotic prostate surgery.

"This is the first side-by-side survival comparison of these two prostate cancer treatment modalities," said Dr. Samadi. "After considering a full spectrum of comorbidity factors researchers saw drastically decreased prostate cancer-specific mortality rates in the men who opted for radical prostatectomy surgery."

Nearly 2/3 of the study's participants underwent robotic prostate removal surgery for the treatment of their localized prostate cancer. After long-term observance these men showed improved survival rates of 40 percent and 65 percent over the men who opted for external beam radiation therapy. Findings were presented at the 2012 American Urological Associate annual meeting and are featured on the cover the June 2012 Renal & Urology News.

A board certified urologic oncologist, Dr. David Samadi has devoted his career to perfecting robotic prostate surgery with his SMART procedure for the expert removal of a cancerous prostate and the preservation of delicate urinary and sexual nerve bundles. The more than 4,000 patient success stories to his name support his firm belief in the numerous survival and quality of life benefits of SMART surgery.

"Robotic prostatectomy surgery is the most comprehensive prostate cancer treatment. Surgery is the only way to fully and precisely isolate the scope of the disease and remove the tumor. The administration of radiation therapy is somewhat hindered by pre-surgery imaging. There is no replacement for the clarity of first-hand analysis during surgery."

Men in Dr. Samadi's care are reassured by his unmatched patients survival rates as well as superior recovery from potential side effects. With his ongoing post-operative attention, 96 percent of his patients have urinary control in only 2-3 months and in just a year or two 85 percent regain sexual potency.

"After radical prostatectomy, patients have the cancer-free assurance of a zero PSA level," Dr. Samadi explained. "After radiation, PSA levels continue to fluctuate, requiring greater vigilance and testing." Also, the side effects of EBRT can include significant and long-term bowel and bladder issues, erectile problems, and even an increased risk of bowel and bladder cancer.

"For otherwise healthy men with localized prostate cancer, radiation may not be the best first line of defense. If the cancer returns after EBRT, surgery is a challenging option and treatment choices become limited," cautions Dr. Samadi. "However, radiation can be effective prostate cancer therapy for some men." Those who are not surgical candidates can achieve positive results with radiation therapy and EBRT can be a useful secondary treatment in cases of high-risk recurrence after surgery.

Dr. Samadi is Vice Chairman of the Department of Urology and Chief of Robotics and Minimally Invasive Surgery at Mount Sinai Medical Center in New York and a frequent international educator on prostate cancer and his SMART prostate surgery.

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