[Positive surgical margins after radical prostatectomy].

[Article in Italian]
Galetti TP, Cattaneo F, Coati I, Gardiman M.

Abstract
Positive surgical margins (PSMs) in radical prostatectomy specimens are usually considered a negative prognostic parameter. However, their definition and the management of patients with PSMs remain unclear. The aim of the present review is to define pathological features of PSMs, to report their incidence and risk factors and to update PSMs prognostic meaning and possible treatment modalities. The average incidence of PSMs in contemporary series ranges from 6.5% to 32%. The likelihood of PSMs is influenced by pre-operative PSA (total-PSA and PSA-density), tumor features (volume, grade and stage), previous prostatic surgery (open or TURP), patients' characteristics (BMI and pelvis shape) and surgeons' skill. Although PSMs are a predictor of biochemical recurrence, their impact on cause specific survival is highly variable and largely influenced by the tumor Gleason Score. Adjuvant radiotherapy is an effective treatment in PSMs patients but early salvage radiotherapy may be an alternative option that guarantees equivalent survival benefits with less side effects. Further studies are required to define the best candidates to adjuvant or early salvage radiation therapy.

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