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Novel Use of Tachosil® in Bilateral Nerve-sparing Robot-assisted Laparoscopic Radical Prostatectomy (biNS-RaLRP)

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Objective:

To investigate the novel use of Tachosil® (an absorbable fibrin sealant patch) in biNS-RaLRP with conventional athermal dissection technique.

Patients & Methods:

Since November 2013, Tachosil® was investigated as a haemostatic tool in biNS-RaLRP. Operative data, outcomes were prospectively collected and compared with our historical cohort from June 2012 to November 2013.

Results:

A total of 16 and 20 patients had biNS-RaLRP performed with and without Tachosil® respectively. All of them had intrafascial nerve-sparing technique. Both groups were comparable in age, pre-op PSA, prostate size and console time. There were a trend of less haemoglobin drop (-0.78 vs -1.13) and drain output (without pelvic lymph node dissection: 84.5 vs 112.4ml) in the Tachosil® group. Complications rates and hospital stay were similar. Continence rates by one hour pad test were good in both groups at 1m, 3m and 6m (1, 1, 0.5 gram vs 1, 0, 1 gram). For patients with pre-op IIEF-5 ≥ 17 , baseline IIEF-5 (21.9 vs 19.8) were similar and potency recovery appeared faster in the Tachosil® group (IIEF-5 change at 1m, 3m, 6m: -14.7, -7.9, -5.8 vs -14.2, -8.7, -7.1)

Conclusion:

Tachosil® is a feasible haemostatic option in biNS-RaLRP with athermal dissection. The potency recovery appears faster in Tachosil® group. Longer follow-up is needed to assess the impact on sexual function.