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Non-Discussion Poster

Oncology

NDP001:

A PHEOCHROMOCYTOMA PATIENT PRESENT WITH CUSHING'S SYNDROME

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Case summary: This 33 years old woman was well being and had clean medical history according to her own statement. Although over the past five years, she was getting progressively body weight gain even under diet control. She also mentioned about the elevated blood pressure, alongside with palpitation, hand tremor and headache. In this period of time, moon face, purplish striae, face acne and central obesity were noted in the physical examination. From all the symptoms and signs as mentioned above, Cushing' syndrome was the initial impression. Although, huge hypervascular with central necrosis adrenal tumor was noted in the image survey. After right adrenalectomy, pheochromocytoma was diagnosed by the pathologic result. Through a series of analysis, and paper review, Cushing' syndrome, ectopic adrenalcorticotrophic hormone production by pheochromocytoma induced, was our final diagnosis.

NDP002:

RARELY HUGE METANEPHRIC ADENOMA: A CASE REPORT

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Metanephric adenoma (MA) is an extremely rare benign neoplasm of the kidney that accounting for 0.2% of adult renal epithelial neoplasms, with only less than 200 cases worldwide. The mean age of patients with MAs is 41. Here, we presented a case of 71 years old man with palpable abdominal mass for 4 years. Computed tomography of abdomen revealed a huge, heterogeneous mass measured 31×18 cm in size containing calcification and arising from the right retroperitoneal space. Surgery was done with midline incision of abdomen. After exposure the retroperitoneal tumor from lateral side of ascending colon, the mass originates from low pole of right kidney was noted. The tumor was removed after ligating the supplying vessel and radical nephrectomy was then performed. The pathological examination showed MA composed of tightly packed small acini lined by uniform small cells with inconspicuous cytoplasm. The nuclei are uniform, ovoid and have inconspicuous nucleoli. In addition, immunohistochemical staining showed reactive for CD57 and Vimentin, and negative for CK7, RCC, WT-1, EMA, AMACR. The proliferative index of Ki-67 is < 1%. Papillary renal cell carcinoma (PRCC) and epithelial Wilm's tumor which have mimic histological features may thus rule out. This patient was free from recurrence after a follow-up period of 2 years.

Due to the limited amount of MA, the features of biological, imaging, and pathological have not been clearly described. Furthermore, this case might be the biggest MA in the literature. He received laparotomy radical nephrectomy with excellent outcome. Our report may increase in the familiarity of this disease in the future.

NDP003:

SUBGROUP ANALYSIS OF OUTCOMES OF RADICAL NEPHROURETERECTOMY: A SINGLE INSTITUTION EXPERIENCE

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Purpose: Open, hand-assisted laparoscopy and pure laparoscopy technique are now cornerstones of radical nephroureterectomy (RNU) for upper tract urothelial carcinoma (UTUC). We aimed to perform subgroup analysis about the outcomes and complications of patient with UTUC receiving RNU at our institution.

Materials and Methods: Patient with UTUC receiving RNU from 2004 to 2014 at Shin-Kong WHS Memorial Hospital were included. Relevant demographic and perioperative data during and within 6 weeks of surgery were evaluated retrospectively. Subgroup analysis comparing these three method was also performed.

Results: A total of 138 RNU were performed. Open approach resulted in more blood loss (715 +/- 617 mls). Pure-laparoscopic consumed more operative time (193 +/- 78 mins) and Hand-assisted approach resulted in less length of stay (8.7 +/- 4.0 days). Pathological stage 4 cancer resulted in more blood loss, more operative time, and longer length of stay. However, grade did not resulted in statistically different perioperative outcome. At a median follow-up of 65mons, OS and PFS revealed a better result toward pure laparoscopic RNU. The limitations of our study include the small sample size, the single-centre experience, the personal choice of laparoscopic technique. Comparing the periods of 2004 to 2009 vs 2010 to 2014, the incidence of complications tended to decrease (17.3% vs 12.5%, p = 0.3).

Conclusion: Pure-laparoscopic and hand-assisted RNU are seemed safe techniques for patient with UTUC. In our institution, robotic-assisted laparoscopic RNU still make progress.

NDP004:

EPIDIDYMAL ADENOMATOID TUMOR: A CASE REPORT AND LITERATURE REVIEW

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Case report: A 64-year-old man presented to the urology department with progressive right testicular enlargement for 6 months. No associated testicular pain or fever was mentioned. His physical examination was unremarkable, except for a small nontender intratesticular mass at the middle pole of right testis. Pelvic computed tomography revealed fluid accumulated in right scrotum with septum formation. No obvious intratesticular mass was found. Serum tumor markers, including alpha-fetoprotein, beta-human chorionic gonadotropin, and lactate dehydrogenase, were all within normal limits. The patient subsequently underwent right testicular exploratory surgery. During the surgery, one cystic mass protruded from lateral side of right testis. The final histology resection revealed an adenomatoid tumor growing from the epididymis.