

25mg/m², IV, every three to four weeks. Thirty patients ever received prior docetaxel treatments. The PSA response, pain response, time to progression duration and adverse events were recorded.

Results: The median age of the thirty-two patients was 65.7 years (range 45–84) and the median PSA when started Cabazitaxel was 65.5 ng/ml (range 3.82–5239). The mean treatment courses of the patient were 5.9 (range 3–17). PSA declined in twenty-two patients (69%, 22/32) and eighteen of them (56%, 18/32) got more than 50% declination (PSA response). The median progression free survival was 6 months. The most common subjective adverse effects were leukopenia (84%). Ten (31%) patients had grade 3–4 neutropenia and 4 (12.5%) patients had more than grade 2 anemia. Liver function impairment was also found in three (9%) patients.

Conclusions: Cabazitaxel 20–25mg/m², IV, every three to four weeks were tolerated and revealed good PSA response in castration resistant prostate cancer patients. However, high risk of neutropenia should be kept in mind.

MP4-8. ANDROGEN RECEPTOR EXPANDS THE POPULATION OF CANCER STEM CELLS IN UPPER URINARY TRACT UROTHELIAL CARCINOMA CELLS

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Purpose: Androgen receptor (AR) plays a role in the development and progression of upper urinary tract urothelial cell carcinoma (UUTUC). Here we investigated whether AR stimulates UUTUC development and progression, possibly by expanding the population of cancer stem cells (CSCs), which are a particular population of cells within cancer cells responsible for tumor initiation, drug resistance and metastasis.

Materials and methods: We compared BFTC 909 cells with or without the addition of AR on their CSC population with flow cytometry, colony formation and sphere formation assay to determine the effects of AR on CSC activity. To observe the effects of AR on BFTC 909 cells, quantitative real-time PCR was used to detect the expression stemness genes and miRNAs and western blotting was also performed to examine EMT (epithelial-mesenchymal transition) related proteins. In vivo tumor formation was also evaluated with the implantation of cancer cells in nude mice and IHC was used to detect OCT4 and MMP9 expression on the tumor samples.

Results: We found that the addition of AR in UUTUC cells, (BFTC 909 cell line) significantly increased the population of CSC, clonogenicity, sphere formation and the expression of stemness genes (Oct4, Bmi1 and Nanog) and CSC-related miRNA profile as well as EMT related proteins. Furthermore, in an immune-deficient mouse model, the addition of AR in UUTUC cells also increased the tumor formation.

Conclusions: This study will help us better understand the extent to which AR contributes to UUTUC by expanding their CSC population and capacity and could explain high incidence of UUTUC observed in males. These findings may lead AR to serve as a potential therapeutic target for urothelial carcinomas in the future.

MP4-9. RENAL CLASSIC AND EPITHELIOID ANGIOMYOLIPOMA – EXPERIENCE OF CHI MEI HOSPITAL AND LITERATURES REVIEW

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Introduction: Renal angiomyolipoma (AML) is a benign neoplasm. There are two major histologic types of AMLs: classic and epithelioid. Recently malignant epithelioid variant of angiomyolipoma has been further described. We would like to compare these two histologic types receiving surgical treatment of our own experience

Material: We collected 53 cases of renal angiomyolipoma from our hospital receiving surgical intervention from September 2010 to August 2014. **Results:** Among these cases, 38 (71.7%) was female with medium age 56.9 year-old. 15 male (28.3%) with medium age 58.7 year-old. 21 of 53 (39.6%)

had right side AML with left 30 of 53 (56.6%) and bilateral 1 of 53 (1.9%). 3 of 53 (5.7%) received nephrectomy and 50/53 (94.3%) received partial nephrectomy. Classic angiomyolipoma accounted for 92.5% (49/53) of all cases with epithelioid variant 7.5% (4/53). No recurrence was noticed among classic type with average follow-up length 32.6 months. Recurrence was noted in one of epithelioid variant in 31 months follow-up.

Conclusion: Renal angiomyolipoma is a benign neoplasm consisting of thick-walled aneurysmal vessels, smooth muscle, and varying levels of mature adipose tissue. Recently malignant epithelioid variant of angiomyolipoma has been further described since it was presented on 1997 by Eble and colleagues. Here, We compared these two histologic types receiving surgical treatment of our own experience and we would like to compared it with data of other institute to see of there's any differences and the cause leading to it.

MP4-10. RETROPERITONEAL LIPOSARCOMA: EXPERIENCE OF CHI-MEI HOSPITAL

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Purpose: Retroperitoneal liposarcomas are rare malignant tumor with an aggressive disease course and high recurrent rate. In this article, we will share our experience in treating retroperitoneal liposarcoma and describe the tumor behavior we observed.

Materials and methods: During January 2010 to December 2014, 11 patient are treated in our hospital for retroperitoneal liposarcomas. We review the treatments (surgical or non-surgical), clinical presentation, tumor behavior, pathological subtype, and the characteristics of recurrent tumor.

Results: There are 11 patients of retroperitoneal liposarcoma enrolled in this analysis. 9 patients are female, and 2 are male. 7 patients are well-differentiated liposarcoma, and 4 are de-differentiated liposarcoma. One patient died one month after surgical excision of tumor because of pneumonia. One patient has no recurrence in 3 years of follow-up. One has bone metastasis at the time of diagnosis. 8 patients are found recurrent and receive repeated surgical excision of tumor, and 3 of them experience second recurrence. One patient experience third recurrence, and one has fourth recurrence. The mean time to recurrence is 40 months. 4 patients have surgical margin involved with tumor, and the mean recurrence time in this subgroup is 5 months.

Conclusions: During the past 4 years, 11 patients with retroperitoneal liposarcoma receiving surgical excision of tumor have been followed at our hospital. There is no obvious difference in tumor recurrence between pathology subtypes. Patients with positive surgical margin experience shorter time to recurrence.

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MP5-1.

THE INFLUENCE OF INTRAVESICAL PROSTATIC PROTRUSION AND POST OPERATIVE CONTINENCE AFTER PATIENTS RECEIVED ROBOTIC ASSISTED LAPAROSCOPIC RADICAL PROSTATECTOMY

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Purpose: We try to evaluate the influence of intravesical prostatic protrusion (IPP) in the postoperative continence of patient who received robotic assisted laparoscopic radical prostatectomy.

Materials and methods: A total 600 patients who underwent robotic assisted laparoscopic radical prostatectomy were included in the study. Preoperative MRI was performed in all patients and the vertical distance from the tip of the protruding prostate to the base of the urinary bladder was measured in all sagittal plane. The degree of intravesical prostatic protrusion were divided into three groups (IPP<5mm, 5mm<IPP<10mm,