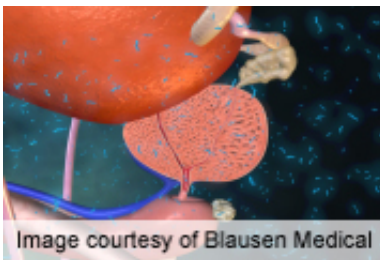


# Surgeon variation affects QoL after prostatectomy

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(HealthDay)—There is a significant association between performing surgeons and patient quality of life following radical prostatectomy, according to a study published in the April issue of *The Journal of Urology*.

To examine the correlation between the surgeon performing prostatectomy and patient quality-of-life outcomes, Arthur Hartz, M.D., Ph.D., from the University of Utah in Salt Lake City, and colleagues surveyed 1,500 randomly selected patients from the Utah Cancer Registry who had had a prostatectomy for cancer cure more than one year previously, were 70 years of age or less, and had no metastatic disease or other [cancer therapy](#).

The researchers found that the survey response rate was 64 percent. Twenty-two percent of the 678 responders reported leaking urine more than once per day. Seven percent used more than one pad per day and 40 percent reported that medication was necessary for an erection. Surgeon variation was significantly associated with erectile strength, urine leakage, and length of hospital stay. There was a significant correlation between surgeon risk-adjusted erectile outcomes and leakage outcomes and length of stay. There was also a significant correlation between annual surgeon volume and less leakage and shorter length of stay. Robotic surgery was associated with a shorter stay, compared with open retropubic surgery. Shorter stay, less [urine leakage](#), and weaker erection were associated with the perineal approach.

"We found that patient quality of life depends on the surgeon who performs the prostatectomy," the authors write. "A collaboration of clinicians working with a cancer registry might provide information useful for quality improvement."

Several authors disclosed [financial ties](#) to the pharmaceutical industry.

**More information:** [Abstract](#)  
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