

New tool IDs mortality risk after bladder cancer surgery

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(HealthDay)—A new risk-stratification tool is able to estimate mortality

in patients with urothelial carcinoma of the bladder (UCB) after cystectomy, according to a study published online Sept. 7 in *Cancer*.

Christopher J. Welty, M.D., from the University of California, San Francisco, and colleagues identified 14,828 patients who underwent cystectomy with [lymph node dissection](#) for UCB from the Surveillance, Epidemiology, and End Results database (1988 to 2011), who were randomly divided into discovery and validation cohorts. The Cancer of Bladder Risk Assessment (COBRA) tool was developed using a Cox model that included age, [tumor stage](#), and lymph node density.

The researchers found that patients with muscle invasive (T2), lymph node-positive disease had a survival curve similar to that seen in patients with extravesical (T3 and T4), lymph node-negative disease. There was a 1.61-fold increase in the risk of bladder cancer death in the development cohort with each point increase in the COBRA score (range, 0 to 7). The model was able to accurately stratify [patients](#) across risk levels in the development cohort and the two validation cohorts.

"The COBRA score offers a straightforward, validated risk-stratification tool that incorporates the relative contribution of tumor stage and lymph node involvement to patient prognosis after cystectomy for UCB," the authors write.

Several authors disclosed financial ties to the diagnostics industry.

More information: [Abstract](#)
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