

Mayo Clinic finds surgeon caseload, practice setting affect treatment of small kidney tumors

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Patients with small kidney tumors are more likely to be offered treatment options based on surgeons' case volume and type of practice than on tumor characteristics, a Mayo Clinic study has found. Fellowship-trained surgeons who practice in academic medical centers with high volumes of patients with kidney tumors were 70 to 80 percent more likely to follow American Urological Association (AUA) guidelines by recommending partial nephrectomy. Surgeons in private practice who see few patients with kidney tumors more often offered radical nephrectomy: removal of the entire kidney.

Mayo Clinic researchers presented their findings during the AUA Annual Meeting in Washington.

"There is wide variability in how renal masses are managed. We must recognize these discrepancies may be due to different perceptions of technical feasibility in performing a partial nephrectomy," says Christopher Weight, M.D., of Mayo Clinic's Department of Urology. "What we're encouraging is a discussion between physicians and patients about all options available. Some patients may benefit from a referral to surgeons with more experience with renal tumors."

The study shows that as [kidney tumors](#) get larger and more complex, all [surgeons](#) tend to offer a radical nephrectomy. However, the tumor complexity that may result in one surgeon recommending total removal of the kidney may be well below a more experienced surgeon's threshold. Approximately 45,000 Americans require radical or partial nephrectomy each year.

Provided by Mayo Clinic

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