

Recent Advances in Endourology, 7

S. Naito, Y. Hirao, T. Terachi (Eds.)

## **Endourological Management of Urogenital Carcinoma**

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# Endourological Management of Urogenital Carcinoma

With 58 Figures, Including 29 in Color

 Springer

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*Cover: Planes of neurovascular bundle dissection. See Fig. 5, p. 137.*

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# Preface

The Japanese Society of Endourology and ESWL has published a monograph in the series *Recent Advances in Endourology* every year since 1999, at which time laparoscopic surgery had become popular, for not only benign but also malignant urological diseases. At that time, however, attention had been focused primarily on the techniques or minimal invasiveness of the surgery, and much of the data were still short-term. During the subsequent 6 years, long-term oncological or functional outcomes have been collected in various fields, and advances in surgical techniques and improved instrumentation have led to further, widespread development of such complex surgery as laparoscopic partial nephrectomy, radical cystectomy and urinary diversion, radical prostatectomy, and retroperitoneal lymph node dissection. Recently, the trend for laparoscopic surgery for small renal cancer has been shifting away from radical surgery to more organ-sparing procedures. Furthermore, recent advances in medical engineering have now made it possible to also use robotics for laparoscopic surgery, and new methods for laparoscopic surgery are continually being developed. Robotic assistance seems to be quite useful in performing laparoscopic radical prostatectomy and radical cystectomy with urinary diversion, both of which require an extremely high level of expertise.

While we have benefited greatly from the development of minimally invasive surgery, some serious complications have also been reported. As a result, the Endoscopic Surgical Skill Qualification System in Urological Laparoscopy was established by the Japanese Urological Association and the Japanese Society of Endourology and ESWL, and began being implemented in Japan in 2004. The skills of applicants were assessed by referees reviewing unedited videotapes of laparoscopic nephrectomies or adrenalectomies. In the first year, 136 of 205 applicants passed the assessment and were certified as laparoscopic surgeons with adequate skills to perform urologic laparoscopic surgery independently. This system is expected not only to improve laparoscopic surgeons' skills and reduce the number of serious complications but also to be a motivating factor for young urologists. Similar qualification systems may be established in other countries in the near future.

This seventh volume of *Recent Advances in Endourology* focuses on the treatment of urogenital malignancies with endourological procedures, including

laparoscopic surgery with robotic assistance. The standard procedures and their relatively long-term outcomes or new techniques have been clearly described with detailed references. We editors are deeply grateful to the authors for contributing their educational and informative chapters. We hope that this monograph will be helpful in providing a better understanding of the present status of endourological management for urogenital carcinoma and, consequently, will set the stage for future improvements in both oncological and functional outcomes.

Seiji Naito, M.D., Ph.D.  
Chief Editor

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