

Special Issue

Robotic Radical Cystectomy: Current State, Challenges, and Future Developments

Message from the Guest Editor

Radical cystectomy is a complex surgical undertaking that often results in an extended operative stay, postoperative complications, and readmissions. Minimal invasive surgery is emerging as an alternative to the open approach with reduced postoperative pain, incisional morbidity, blood loss, transfusion rate, hospital stay, and early return of bowel function with a rapid postoperative convalescence. During the last few years, the use of robot radical cystectomy (RRC) has been growing, rising from 0.6% in 2004 to close to 40% of cystectomies in 2019 in the US. This surgical technique's continued evolution, made possible by the introduction of robotic technology, needs standardized reporting of perioperative and survival outcomes to reflect patient and surgeon expectations following RRC. The creation of the urinary diversion (UD) after RRC is considered the most challenging step of the entire surgical procedure, and the use of extracorporeal (ECUD), totally intracorporeal (ICUD), and hybrid UD has been described in the literature for both continent and incontinent diversions.

Guest Editor

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Deadline for manuscript submissions

closed (30 September 2021)



Journal of Clinical Medicine

an Open Access Journal
by MDPI

Impact Factor 2.9
CiteScore 5.2
Indexed in PubMed



mdpi.com/si/73359

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