

# An easily-applied and cheap hemostatic (an anti-bleeding agent) powder used at the end of robotic prostate cancer surgery may dramatically improve patient outcomes and represent a shortcut for less-experienced surgeons to substantially improve their results.

Wednesday 1 September, 2021

A study published today in the *Journal of Urology* (J Urol 2021; 206: e264-265 <https://www.auajournals.org/doi/10.1097/JU.0000000000001996.04>) and due to be presented later this month at the annual meeting of the American Urological Association has shown that using powdered topical microporous polysaccharide hemospheres at the end of robotic prostate cancer surgery in 422 men resulted in a trifecta (continent, potent and cancer-free) rate that matched the best previously published results worldwide, despite limited prior surgical experience.

LONDON, 1 September 2021 - Santis Health today announced the publication of a comparative study in the *Journal of Urology* of 862 men who either had or did not have powdered microporous polysaccharide hemospheres (Arista TM, Becton Dickinson, Franklin Lakes, USA) applied to the operative site at the end of robotic prostate cancer surgery to reduce bleeding complications. Analysis of the results showed that although post-operative bleeding was reduced, as expected, the largest effect was in improving post-operative potency rates compared to historical controls (78.1% vs 33.7%) by the same surgeon, resulting in a 1-year post-treatment trifecta (continent, potent and cancer-free patients) rate that was similar (53.1% vs 57%) to the best published rate in the medical literature. This was despite the senior surgeon having a limited operative experience of only 420 cases of robotic (but 2,500 cases overall) surgery at the start of the study.

"Of the three main outcome measures of robotic prostate cancer surgery, potency (erections sufficient for sex) is by far the most difficult to achieve due to the 63-year average age of the patients that we operate on, as well as the constraints imposed by the location of cancer within the prostate. We were very surprised by the dramatic improvement in post-operative potency preservation in patients receiving the powder, which takes just 10 seconds to apply at the end of the case and costs only £100 (compared to the £1.5 million purchase and £100,000 annual service cost of the robot). We identified two possible mechanisms by which the patients in this group might have better preservation of potency and are currently constructing a larger, randomised-controlled trial to determine the relative effects of using the powder, surgical technique and surgical experience, as potentially all three might have had an effect," said Professor Christopher Eden, founder of Santis Health and senior author of the publication.

In the UK alone, there are 42,000 new diagnoses of prostate cancer each year and 10,000 deaths because of it. Each year, approximately 5,000 men have prostate cancer surgery and despite the greater accuracy of robotic prostatectomy, published potency rates as low as 22% have been reported by the UK's National Institute for Health and Clinical Excellence.

"Although amongst the available treatment options available, only surgery offers the certainty of a target PSA blood test result of zero and preservation of all of the major fall-back options, it also has the potential to cause disturbance of bladder and sexual function, especially in the hands of low-volume surgeons," explains Professor Eden, adding that "it is possible that by using this powder, less experienced surgeons could achieve better functional results much more quickly than before, and experienced surgeons could obtain results that have previously been unattainable".

"Santis Health is based in London and is the highest-volume prostatectomy practice in the UK, with its surgeons recognised by their peers as leaders in their field and who are focused on data collection and optimising patient outcomes both in the National Health Service and in private practice," said Professor Eden.

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### **Additional Assets:**

abstract in Journal of Urology that describes the research.

<https://www.auajournals.org/doi/10.1097/JU.0000000000001996.04>

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