PATIENT SUMMARY



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Adjuvant chemotherapy in upper tract urothelial carcinoma (the POUT trial): a phase 3, open-label, randomised controlled trial

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Introduction

Urothelial carcinoma is a specific type of cancer that mostly occurs in the bladder. Urothelial carcinoma of the kidneys or the ureters (=the two tubes through which urine flows from the kidneys to the bladder) is rare and has a worse prognosis. The standard care for these specific patients is **nephroureterectomy**, which is a surgery that removes the cancer along with the renal pelvis, kidney, ureter, and bladder cuff. After such a surgery, a doctor may prescribe something called **adjuvant chemotherapy**: a chemotherapy that aims to prevent the cancer from coming back. Since no international consensus existed on the benefit of such a chemotherapy after nephroureterectomy for these patients, the authors of this article aimed to take a first step toward a clear answer.

They assessed the efficiency of systemic (=affecting the entire body) platinum-based chemotherapy. Over a period of more than five years, 261 patients participated in their trial. 132 patients received chemotherapy; in the other 129 participants, the cancer was only monitored.

Findings

The authors concluded that adjuvant platinum-based chemotherapy after nephroureterectomy should be considered a new standard of care for patients with urothelial carcinoma of the kidneys or the ureters. The trial demonstrated that these patients survive significantly longer without any signs or symptoms of the cancer when receiving this chemotherapy.

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