

**EUROPEAN  
CURRICULUM VITAE  
FORMAT**



**PERSONAL INFORMATION**

Name **Ettore Di Trapani**  
Position Urologist at European Institute of Oncology (IEO)  
Address Via Amedeo d'Aosta 11 - 20129 Milan; Italy  
Telephone Italian Mobile: +39 339 5679827  
Fax -  
E-mail Ettore.ditrapani@ieo.it

Nationality Italian  
Date of Birth 16<sup>th</sup> June 1985  
Gender Male

**WORK EXPERIENCE**

- Dates (from - to) **From January to December 2016**
- Name and address of the employer Università Vita-Salute San Raffaele – Via Olgettina 60 Milan, Italy
- Type of business or sector Urologist
- Main activities and responsibilities Laparoscopic surgery for Urologic diseases

**EDUCATION**

- Dates (from - to) **From September 2003 to July 2009**
- Name and type of organization providing education and training Università Campus Bio-Medico di Roma – Via Alvaro del Portillo 1 Triglia (RM), Italy
- Principal subjects/occupational skills covered Medical school
- Title of qualification awarded July 21<sup>st</sup> 2009 - Graduated from Medical School
- Thesis PET-TC 18F-choline scan in early diagnosis of prostate cancer's biochemical relapse in patients underwent radical prostatectomy  
Prof. Maurizio Buscarini  
Prof. Michele Gallucci

- Dates (from - to) **From May 2010 to May 2015**
- Name and type of organization providing education and training Università Vita-Salute San Raffaele – Via Olgettina 60 Milan, Italy
- Principal subjects/occupational skills covered Residency
- Title of qualification awarded May 25<sup>th</sup> 2015 Doctor in Urology
- Thesis Development of the first mouse model of radical prostatectomy: a feasibility study

with biochemical validation  
Prof. Francesco Montorsi  
Prof. Alberto Briganti  
Prof. Andrea Salonia

#### **OBSERVATIONAL FELLOWSHIP**

- Dates (from - to)
- Name and type of organization providing education and training
- Principal subjects/occupational skills covered
- Title of qualification awarded
- Head of the Urology Department

#### **SURGICAL FELLOWSHIP**

- Dates (from - to)
- Name and type of organization providing education and training
- Principal subjects/occupational skills covered
- Title of qualification awarded
- Head of the Urology Department

#### **SURGICAL FELLOWSHIP**

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- Title of qualification awarded
- Head of the Urology Department

#### **OBSERVATIONAL FELLOWSHIP**

- Dates (from - to)
- Name and type of organization providing education and training
- Principal subjects/occupational skills covered
- Title of qualification awarded
- Tutor of the Radiation Oncology Department

*Pagina 2 - Curriculum vitae di  
[ COGNOME, Nome ]*

#### **From 20<sup>th</sup> august 2009 to 20<sup>th</sup> October 2009**

City of Hope National Medical Center - Duarte, California, United States of America

Skills on robotic surgery for the treatment of urological tumors

-

Dr. Timothy Wilson

#### **From 5<sup>th</sup> May 2014 to 1<sup>st</sup> November 2014**

Institute Mutualiste Montsouris – 42 Boulevard Jourdan 75014 Paris, France

Surgical skills on robotic and laparoscopic surgery for the treatment of urological tumors

Surgical skills on endoscopic surgery for the treatment of prostate and bladder urological diseases

Surgical skills on the focal treatment for localized prostate cancer

-

Dr. Xavier Cathelineau

#### **From 3<sup>rd</sup> November 2014 to 30<sup>th</sup> November 2015**

Groupe Hospitalier Diaconesses Croix Saint Simon – 18 Rue Sgt Bauchat 75012 Paris, France

Surgical skills on robotic and laparoscopic surgery for the treatment of urological tumors

Surgical skills on endoscopic and open surgery for the treatment of urological diseases

-

Dr. Bertrand Guillonnet

#### **From 5<sup>th</sup> May 2014 to 1<sup>st</sup> November 2015**

Institut Gustave Roussy, Villejuif, France

Skills on high dose radiation therapy for the treatment of prostate cancer

-

Dr. Alberto Bossi

Per ulteriori informazioni:  
[www.cedefop.eu.int/transparency](http://www.cedefop.eu.int/transparency)  
[www.europa.eu.int/comm/education/index\\_it.html](http://www.europa.eu.int/comm/education/index_it.html)  
[www.eurescv-search.com](http://www.eurescv-search.com)

## Other Courses

**26-28<sup>th</sup> January 2015**

### **Hands-on Training on Laparoscopic Radical Prostatectomy**

Ecole Européen de Chirurgie, Paris, France

Laparoscopic radical prostatectomy on fresh cadavers

### **European training programme in Basic Laparoscopic Urological Skills (E-BLUS)**

Congress of the European Association of Urology, Madrid, Spain

March 20-24<sup>th</sup> 2015

### **Last GCP training (ICH GOOD CLINICAL PRACTICE E6 (R2))**

December 18<sup>th</sup> 2017

## **PERSONAL SKILLS AND COMPETENCES**

*Acquired in the course of life and career but not necessarily covered by formal certificates and diplomas*

### **MOTHER TONGUE**

**Italian**

### **OTHER LANGUAGES**

#### **English**

Excellent

Excellent

Excellent

#### **French**

Excellent

Excellent

Excellent

#### **Spanish**

Good

Good

Good

- READING
- WRITING
- TALKING

- READING
- WRITING
- TALKING

- READING
- WRITING
- TALKING

## **SOCIAL SKILLS AND COMPETENCES**

My work and my international experiences brought me to live and work with other people, in multicultural environments, in positions where communication is important and situations where teamwork is essential.

## **ORGANIZATIONAL SKILLS AND COMPETENCES**

As a old resident, I've been resident in chief in my hospital, my issues were to organize and fix meetings and discuss about criticisms in our training program and/or rotations organization

## **TECHNICAL SKILLS AND COMPETENCE**

Good experience and acquired skills with Word, Power Point, Excel, SPSS.

ARTISTIC SKILLS -  
AND COMPETENCES  
*Music, writing, design, etc.*

OTHER SKILLS -  
AND COMPETENCES

**Honors and awards:**

*EAU 2013 – Best poster*

Spatial distribution of positive cores decreases misclassification rates of patients with low risk prostate cancer candidate for active surveillance

*EAU 2015 – IPSEN Best Bladder Poster*

Neoadjuvant cisplatin-based chemotherapy does not impact perioperative morbidity in patients underwent radical cystectomy for bladder cancer.

*Premio Cosciani Cunego – Best Residency thesis 2015*

Development of the first mouse model of radical prostatectomy: a feasibility study with biochemical validation.

*EAU 2016 – Best poster*

Development of the first model of radical prostatectomy in mouse: a feasibility study with biochemical validation.

*ERUS 2017 – Best video*

Robot assisted retroperitoneal lymph node dissection for non seminomatous germ cell testicular cancer: initial experience of a high volume center

**Professional Memberships:**

European Association of Urology (EAU)

Società Italiana di Urologia (SIU)

Società Italiana di Andrologia (SIA)

**Clinical Protocols:**

*Theracoat – OPTIMA study*

Co-investigator for Ospedale San Raffaele, Milan, Italy

**Scientific indexed publications:**

- How can we predict lymphorrhea and clinically significant lymphoceles after radical prostatectomy and pelvic lymphadenectomy? Clinical implications. Capitanio U, Pellucchi F, Di Trapani E, Jeldres C, Cestari A, Karakiewicz PI, Montorsi F. BJU Int 2010
- Lymphatic spread of nodal metastases in high-risk prostate cancer: The ascending pathway from the pelvis to the retroperitoneum. Briganti A, Suardi N, Capogrosso P, Passoni N, Freschi M, di Trapani E, Gallina A, Capitanio U, Abdollah F, Tutolo M, Bianchi M, Salonia A, Da Pozzo LF, Montorsi F, Rigatti P. Prostate. 2012 Feb 1;72(2):186-92. doi: 10.1002/pros.21420. Epub 2011 May 2.
- Choosing the best candidates for penile rehabilitation after bilateral nerve-sparing radical prostatectomy. Briganti A, Di Trapani E, Abdollah F, Gallina A, Suardi N, Capitanio U, Tutolo M, Passoni N, Salonia A, DiGirolamo V, Colombo R, Guazzoni G, Rigatti P, Montorsi F. J Sex Med. 2012 Feb;9(2):608-17. doi: 10.1111/j.1743-6109.2011.02580.x. Epub 2011 Dec 21.
- Clinical and diagnostic assessment for therapeutic decisions in prostate cancer. Passoni NM, Di Trapani E, Suardi N, Gallina A, Abdollah F, Bianchi M, Picchio M, Giovacchini G, Messa C, Rigatti P, Montorsi F, Briganti A. Q J Nucl Med Mol Imaging. 2012 Aug;56(4):321-30. Review.

- When to perform lymph node dissection in patients with renal cell carcinoma: a novel approach to the preoperative assessment of risk of lymph node invasion at surgery and of lymph node progression during follow-up.  
Capitanio U, Abdollah F, Matloob R, Suardi N, Castiglione F, Di Trapani E, Capogrosso P, Gallina A, Dell'Oglio P, Briganti A, Salonia A, Montorsi F, Bertini R. *BJU Int.* 2013 Jul;112(2):E59-66. doi: 10.1111/bju.12125.
- The key role of time in predicting progression-free survival in patients with renal cell carcinoma treated with partial or radical nephrectomy: conditional survival analysis.  
Abdollah F, Suardi N, Capitanio U, Matloob R, Fossati N, Castiglione F, Di Trapani E, Di Trapani D, Russo A, Carenzi C, Montorsi F, Rigatti P, Bertini R. *Urol Oncol.* 2014 Jan;32(1):43.e9-16. doi: 10.1016/j.urolonc.2013.05.006. Epub 2013 Aug 2
- Naftopidil for the treatment of benign prostate hyperplasia: a systematic review.  
Castiglione F, Benigni F, Briganti A, Salonia A, Villa L, Nini A, Di Trapani E, Capitanio U, Hedlund P, Montorsi F.  
*Curr Med Res Opin.* 2014 Apr;30(4):719-32. doi: 10.1185/03007995.2013.861813. Epub 2013 Dec 18.
- Long-term Outcomes of Salvage Lymph Node Dissection for Clinically Recurrent Prostate Cancer: Results of a Single-institution Series with a Minimum Follow-up of 5 Years.  
Suardi N, Gandaglia G, Gallina A, Di Trapani E, Scattoni V, Vizziello D, Cucchiara V, Bertini R, Colombo R, Picchio M, Giovacchini G, Montorsi F, Briganti A.  
*Eur Urol.* 2014 Feb 18. pii: S0302-2838(14)00130-4. doi: 10.1016/j.eururo.2014.02.011.
- Extent of lymph node dissection at nephrectomy affects cancer-specific survival and metastatic progression in specific sub-categories of patients with renal cell carcinoma (RCC).  
Capitanio U, Suardi N, Matloob R, Roscigno M, Abdollah F, Di Trapani E, Moschini M, Gallina A, Salonia A, Briganti A, Montorsi F, Bertini R. *BJU Int.* 2014 Aug;114(2):210-5. doi: 10.1111/bju.12508. Epub 2014 May 22.
- Extended lymph node dissection in prostate cancer: a procedure with therapeutic utility.  
Gandaglia G, Di Trapani E, Briganti A.  
*Oncology (Williston Park).* 2014 Jul;28(7):600, 602.
- Nephron-sparing Techniques Independently Decrease the Risk of Cardiovascular Events Relative to Radical Nephrectomy in Patients with a T1a-T1b Renal Mass and Normal Preoperative Renal Function.  
Capitanio U, Terrone C, Antonelli A, Minervini A, Volpe A, Furlan M, Matloob R, Regis F, Fiori C, Porpiglia F, Di Trapani E, Zacchero M, Serni S, Salonia A, Carini M, Simeone C, Montorsi F, Bertini R.  
*Eur Urol.* 2014 Oct 2. pii: S0302-2838(14)00964-6. doi: 10.1016/j.eururo.2014.09.027.
- Repeated biopsy in the detection of prostate cancer: When and how many cores.  
Scattoni V, Russo A, Di Trapani E, Capitanio U, La Croce G, Montorsi F.  
*Arch Ital Urol Androl.* 2014 Dec 30;86(4):311-3. doi:10.4081/auia.2014.4.311.
- Evolution from laparoscopic to robotic nephron sparing surgery: a high-volume laparoscopic center experience on achieving 'trifecta' outcomes. Carneiro A, Sivaraman A, Sanchez-Salas R, Di Trapani E, Barret E, Rozet F, Galiano M, Pizzaro FU, Doizi S, Cathala N, Mombet A, Prapotnich D, Cathelineau X. *World J Urol.* 2015 Apr 14.

- A nomogram predicting the cancer-specific mortality in patients eligible for radical cystectomy evaluating clinical data and neoadjuvant cisplatin-based chemotherapy. Di Trapani E, Sanchez-Salas R, Gandaglia G, Rocchini L, Moschini M, Lizee D, Carneiro A, Sivaraman A, Barret E, Rozet F, Galiano M, Bennamoun M, Colombo R, Suardi N, Briganti A, Montorsi F, Cathelineau X. *World J Urol*. 2015 Jul 22.
- The Role of Simulation in Surgical Training: An Analysis of Controversies. Di Trapani E, Guillonnet B. *Eur Urol Focus*. In Press. Available online 12 September 2015. doi:10.1016/j.euf.2015.08.002.
- Preoperative Favorable Characteristics in Bladder Cancer Patients Cannot Substitute the Necessity of Extended Lymphadenectomy During Radical Cystectomy: A Sensitivity Curve Analysis. Moschini M, Karnes RJ, Gandaglia G, Luzzago S, Dell'Oglio P, Rossi MS, di Trapani E, La Croce G, Damiano R, Salonia A, Shariat SF, Montorsi F, Briganti A, Gallina A, Colombo R. *Urology*. 2016 Feb;88:97-103. doi: 10.1016/j.urology.2015.12.005. Epub 2015 Dec 9. PMID: 26683751
- Higher number of transrectal ultrasound guided prostate biopsy cores is associated with higher blood loss and perioperative complications in robot assisted radical prostatectomy. Carneiro A, Sivaraman A, Sanchez-Salas R, Nunes-Silva I, Baghdadi M, Srougi V, di Trapani E, Uriburu Pizzaro F, Doizi S, Barret E, Rozet F, Galiano M, Cathelineau X. *Actas Urol Esp*. 2017 Apr;41(3):155-161. doi: 10.1016/j.acuro.2016.09.012. Epub 2016 Nov 24. English, Spanish. PMID: 27890493
- Impact of neoadjuvant chemotherapy on complications of minimally invasive radical cystectomy. Lizée D, Salas RS, Barret E, Galiano M, Di Trapani E, Montorsi F, Cathelineau X. *Actas Urol Esp*. 2017 Mar;41(2):88-96. doi: 10.1016/j.acuro.2016.05.008. Epub 2016 Nov 28. English, Spanish. PMID: 27908636
- Short-Form Charlson Comorbidity Index for Assessment of Perioperative Mortality After Radical Cystectomy. Dell'Oglio P, Tian Z, Leyh-Bannurrah SR, Trudeau V, Larcher A, Moschini M, Di Trapani E, Capitanio U, Briganti A, Montorsi F, Saad F, Karakiewicz PI. *J Natl Compr Canc Netw*. 2017 Mar;15(3):327-333. PMID: 28275033
- Outcomes of robot-assisted simple enucleation of renal masses: A single European center experience. Matei DV, Vartolomei MD, Musi G, Renne G, Tringali VML, Mistretta FA, Delor M, Russo A, Cioffi A, Bianchi R, Cozzi G, Di Trapani E, Bottero D, Cordima G, Lucarelli G, Ferro M, de Cobelli O. *Medicine (Baltimore)*. 2017 May;96(18):e6771. doi: 10.1097/MD.0000000000006771. PMID: 28471972
- Assessing the Impact of Surgeon Experience on Urinary Continence Recovery After Robot-Assisted Radical Prostatectomy: Results of Four High-Volume Surgeons. Fossati N, Di Trapani E, Gandaglia G, Dell'Oglio P, Umari P, Buffi NM, Guazzoni G, Motttrie A, Gaboardi F, Montorsi F, Briganti A, Suardi N. *J Endourol*. 2017 Jul 21. doi: 10.1089/end.2017.0085. PMID: 28732186
- Lymph node dissection should not be dismissed in case of localized renal cell carcinoma in the presence of larger diseases. Dell'Oglio P, Larcher A, Muttin F, Di Trapani E, Trevisani F, Ripa F, Carenzi C, Briganti A, Salonia A, Montorsi F, Bertini R, Capitanio U. *Urol Oncol*. 2017 Aug 8. pii: S1078-1439(17)30355-1. doi: 10.1016/j.urolonc.2017.07.010. PMID: 28801027

- When to Perform Preoperative Bone Scintigraphy for Kidney Cancer Staging: Indications for Preoperative Bone Scintigraphy. Larcher A, Muttin F, Fossati N, Dell'Oglio P, Di Trapani E, Stabile A, Ripa F, Trevisani F, Carenzi C, Picchio M, Briganti A, Salonia A, Mottrie A, Bertini R, Montorsi F, Capitanio U. *Urology*. 2017 Dec;110:114-120. doi: 10.1016/j.urology.2017.08.043. Epub 2017 Sep 7. PMID: 28890151
- Robot-assisted Partial Nephrectomy: 5-yr Oncological Outcomes at a Single European Tertiary Cancer Center. Vartolomei MD, Matei DV, Renne G, Tringali VM, Crisan N, Musi G, Mistretta FA, Russo A, Cozzi G, Cordima G, Luzzago S, Cioffi A, Di Trapani E, Catellani M, Delor M, Bottero D, Imbimbo C, Mirone V, Ferro M, de Cobelli O. *Eur Urol Focus*. 2017 Oct 27. pii: S2405-4569(17)30242-0. doi: 10.1016/j.euf.2017.10.005. [Epub ahead of print]
- Development of the First Model of Radical Prostatectomy in the Mouse: A Feasibility Study. Di Trapani E, Nini A, Locatelli I, Buono R, Russo A, Dell'Oglio P, Castiglione F, La Croce G, Benigni F, Montorsi F, Salonia A, Cavarretta I, Briganti A.
- Thulium-yttrium-aluminium-garnet (Tm:YAG) laser treatment of penile cancer: oncological results, functional outcomes, and quality of life. Musi G, Russo A, Conti A, Mistretta FA, Di Trapani E, Luzzago S, Bianchi R, Renne G, Ramoni S, Ferro M, Matei DV, Cusini M, Carmignani L, de Cobelli O.



**AURO.it – Verona, September 2009**

**Posters:**

- PET-TC con 18F-colina nella diagnosi precoce di recidiva biochimica in pazienti sottoposti a prostatectomia radicale.
- Carcinoma uroteliale muscolo infiltrante: RMN in diffusione per la valutazione del coinvolgimento linfonodale in pazienti candidati a cistectomia radicale.
- Nefrectomia radicale e gestione del dolore: la nostra esperienza con l'ON-Q.

**3<sup>rd</sup> Annual conference on new technologies and innovative treatment strategies for GU malignancies - San Diego 2<sup>nd</sup>-4<sup>th</sup> October 2009**

**Società Italiana di Urologia (S.I.U.) – Milan, 17-20<sup>th</sup> October 2010**

**Posters:**

- Fattore predittivo di Gleason sum upgrading significativo in pazienti con tumore prostatico a basso rischio ed un singolo frustolo positivo alla biopsia.
- L'età è un fattore di predittivo di Gleason score upgrading in pazienti affetti da neoplasia prostatica trattati con prostatectomia radicale.

**EAU – Wien, 18-22<sup>th</sup> March 2011**

**Posters:**

- Critical assessment of the performance of PSA kinetics for the prediction of [11C]choline PET/CT in prostate cancer patients with biochemical failure after radical prostatectomy.
- The impact of percentage of positive cores in predicting biochemical recurrence after radical prostatectomy. Importance of baseline tumor characteristics.
- More extensive pelvic lymph node dissection is associated with reduced risk of cancer progression in node negative organ confined prostate cancer patients.
- Lymph node density predicts survival of patients with nodal metastases and prostate cancer only in presence of more extensive nodal dissection. Importance of accurate staging.
- The value of computed tomography in detecting prostate cancer lymph node metastasis is negligible even in contemporary patients with very high risk of nodal involvement.
- Adjuvant radiotherapy reduces the rate of urinary continence recovery after radical prostatectomy in intermediate and high-risk prostate cancer patients.
- The extent of lymph node dissection does not affect the rate of erectile function recovery after bilateral nerve-sparing retropubic radical prostatectomy.
- Age and aggressive prostate cancer in patients with low risk characteristics. Implications for consecutive management.

- Is 10-year follow-up long enough to evaluate oncological outcomes of patients after radical prostatectomy? Importance of long term assessment.

#### **Società Italiana di Urologia (S.I.U.) – Rome, 23-26<sup>th</sup> October 2011**

##### **Posters:**

- Charlson Co-Morbidity Index Predicts Overall Mortality in patients treated with partial or radical nephrectomy for Renal Cell Carcinoma.
- Intrafascial technique offers improved functional outcomes in patients treated with bilateral nerve sparing robotic radical prostatectomy.
- Seminal vesicle preservation does not improve functional outcome of patients treated with bilateral nerve sparing radical retro pubic prostatectomy.

#### **EAU – Paris, 14-17<sup>th</sup> February 2012**

##### **Posters:**

- Staging lymphadenectomy in renal cell carcinoma must be extended: A sensitivity curve analysis.
- Outcome of multimodality treatment of cT4 very-high risk prostate cancer with radical cystectomy as initial step: A multi-institutional study of 62 patients.
- The key role of time in predicting post-radical prostatectomy erectile function recovery rate: conditional survival analysis.
- An initial serum PSA level less than 5 ng/ml at diagnosis does not correlate with tumor volume in low risk prostate cancer patients. Implications for conservative treatments.
- The number of organs affected by distant metastases is an independent predictor of cancer specific survival in renal cell carcinoma patients.
- Evaluation of lymph node recurrent prostate cancer with integrated [11C]choline PET/CT in patients with PSA failure after radical prostatectomy: validation by histological analysis.

#### **Società Italiana di Urologia (S.I.U.) – Venice, 21-24<sup>th</sup> October 2012**

##### **Posters:**

- Oncological and functional outcomes of patients eligible for active surveillance treated With radical prostatectomy.
- How to expand indications criteria for active surveillance without compromising cancer control. The importance of the extent of biopsy sampling.
- Effect of number and location of distant metastases on renal cell carcinoma mortality in candidates for cytoreductive nephrectomy: implications for multimodal therapy.
- Concordance between clinical and pathological lymph node invasion in renal cell carcinoma: Lymphadenopathies in larger tumors are more likely to be nodal

metastases.

- Renal and cardiovascular morbidity after partial or radical nephrectomy in patients with kidney tumors up to 7 centimeters: implications on overall mortality .
- Single spot at [(11)c]-Choline-PET/CT scan is not predictive of a single, isolated nodal metastasis at final pathology. Need for extensive salvage nodal treatment.
- Postoperative PDE5 inhibitor use increases the rate of urinary continence recovery after nerve-sparing radical prostatectomy.
- The key role of time in predicting post-radical prostatectomy urinary continence recovery rate: conditional survival analysis.
- Metastasi surrenalica destra con trombosi neoplastica della vena cava inferiore intra-diaframmatica e cardiomiopatia ischemica in esiti di neoplasia renale sinistra [Video].

#### **ESSM – Amsterdam 6-8<sup>th</sup> December 2012**

- Final report: Potential neuroprotective effects of a cannabinoid 2 receptor agonist in a rat model

#### **EAU – Milan, 15-19<sup>th</sup> March 2013**

##### **Poster:**

- Spatial distribution of positive cores decreases misclassification rates of patients with low risk prostate cancer candidate for active surveillance.
- When to perform lymph node dissection in renal cell carcinoma patients: a novel approach to preoperatively assess the risk of lymph node invasion at surgery and nodal progression during follow up.

#### **Società Italiana di Urologia (S.I.U.) – Riccione, 5-8<sup>th</sup> October 2013**

##### **Poster:**

- Predictive accuracy of nephrometric scores can be improved by adding clinical patient characteristics: an algorithm combining anatomic tumor complexity, BMI and Charlson Index to depict perioperative complications after nephron sparing surgery.
- The extent of lymphadenectomy at nephrectomy affects cancer specific survival and metastatic progression in specific subgroups of patients with renal cell carcinoma.
- When to perform lymph node dissection in renal cell carcinoma patients: a novel approach to preoperatively assess the risk of lymph node invasion at surgery and nodal progression during follow up.
- External validation of the EAU Guidelines for pelvic lymph node dissection among patients treated with robotic assisted radical prostatectomy.
- The number of positive nodes is the strongest predictor of cancer specific survival in

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[www.cedefop.eu.int/transparency](http://www.cedefop.eu.int/transparency)  
[www.europa.eu.int/comm/education/index\\_it.html](http://www.europa.eu.int/comm/education/index_it.html)  
[www.eurescv-search.com](http://www.eurescv-search.com)

patients treated with radical prostatectomy for pathological T3 prostate cancer.

- Spatial distribution of positive cores decreases misclassification rates of patients with low risk prostate cancer candidate for active surveillance.
- Early recovery of urinary continence is strongly correlated to subsequent post-operative erectile function outcomes in men treated with radical prostatectomy.

#### **EAU – Stockholm, 11-15<sup>th</sup> April 2014**

##### **Posters:**

- Reductive cystoplasty and simultaneous prostatic adenomectomy improve symptoms score in patients with chronic obstructive urine retention and detrusor impaired contractility.
- Long term outcomes of salvage lymph node dissection for clinically recurrent prostate cancer: Results of a single institution series with a minimum follow-up of 5 years.
- Outcome of radical prostatectomy for misclassified active surveillance candidates.
- Assessing the optimal extent of salvage lymph node dissection in patients with single pelvic node uptake at [11c]-choline PET/CT scan from recurring prostate cancer.
- Pelvic lymph node dissection can be safely omitted in men with a risk of nodal metastases  $\leq 5\%$  based on the Briganti nomogram: Validation of the EAU guidelines recommendations for nodal dissection based on patients outcome.
- Intratunical injection of human adipose tissue-derived stem cells partially reverts fibrosis and restores collagen III/I ratio in a rat model of chronic Peyronie's disease.
- Intratunical injection of autologous adipose stromal vascular fraction (SVF) prevents fibrosis in a rat model of Peyronie's disease.
- Nephron sparing surgery does not decrease other-causes mortality relative to radical nephrectomy in patients with radical T1a-T1b renal mass: Results from a large multi-institutional study.
- Renal function impairment after nephron sparing surgery or radical nephrectomy in patients with clinical T1a-T1b renal mass and normal preoperative glomerular filtration rates: Results from a large multi-institutional study.
- The number of cores taken at first negative biopsy does not affect the cancer detection rate at saturation repeat biopsy in patients with persistent suspicion of prostate cancer.
- Has the new edition of the TNM improved the lymph node staging for renal cell carcinoma?

#### **AUA – Orlando, 16-21<sup>th</sup> May 2014**

##### **Posters:**

- Early regular treatment with a cannabinoid 2 receptor agonist protected erectile

function in a rat model of cavernous nerve injury

- Pelvic lymph node dissection can be safely omitted in men with a risk of nodal metastases  $\leq 5\%$  based on the Briganti nomogram: validation of the EAU Guidelines recommendations for nodal dissection based on patient outcome.
- Has the new edition of the TNM improved the lymph node staging for renal cell carcinoma?
- Decreasing rates of lymph node dissection and lymph node yield during radical nephrectomy for renal cell carcinoma over the last 30 years in a large multicentre European experience
- Long term outcomes of salvage lymph node dissection for clinically recurrent prostate cancer: results of a single institution series with a minimum follow-up of 5 years
- Intratunical injection of human adipose tissue-derived stem partially reverts fibrosis and restores collagen III/I ratio in a rat model of chronic Peyronie's disease
- Nephron sparing techniques independently reduce the risk of cardiovascular events after surgery in patients with clinical T1a-T1b renal mass and normal preoperative glomerular filtration rates: results from a large multi-institutional study
- Outcome of radical prostatectomy for misclassified active surveillance candidates
- Nephron sparing surgery does not decrease other-causes mortality relative to radical nephrectomy in patients with clinical T1a-T1b renal mass: results from a large multi-institutional study
- Renal function impairment after nephron sparing surgery or radical nephrectomy in patients with clinical T1a-T1b renal mass and normal preoperative glomerular filtration rates: results from a large multi-institutional study
- Assessing the optimal extent of salvage lymph node dissection in patients with single pelvic nodal uptake at [11c]-choline PET/CT scan from recurring prostate cancer
- Impact of surgical volume on surgical margin status in patients treated with robot-assisted radical prostatectomy

#### **Società Italiana di Urologia (S.I.U.) – Firenze, 27-30<sup>th</sup> September 2014**

##### **Posters:**

- Impact of surgical technique on the risk of biochemical recurrence in patients with intermediate and high-risk prostate cancer treated with radical prostatectomy
- Outcome of radical prostatectomy for misclassified active surveillance candidates
- Proposal of novel risk groups for outcome prediction following radical prostatectomy in contemporary prostate cancer patients
- A more extensive pelvic lymph node dissection is associated with improved survival of patients with node positive prostate cancer

- 5 long term outcomes of salvage lymph node dissection for clinically recurrent prostate cancer: results of a single institution series with a minimum follow-up of 5 years
- Pelvic lymph node dissection can be safely omitted in men with a risk of nodal metastases  $\leq 5\%$  based on the Briganti nomogram: validation of the EAU guidelines recommendations for nodal dissection based on patient outcome
- Nephron sparing surgery does not always decrease other-causes mortality relative to Radical Nephrectomy in patients with normal preoperative renal function
- Nephron sparing techniques independently reduce the risk of cardiovascular events after surgery in patients with a small renal mass and a normal preoperative renal function
- Renal function impairment after nephron sparing surgery or Radical Nephrectomy in patients with a small renal mass and normal preoperative renal function
- Impact of surgical volume on surgical margin status in patients treated with robot-assisted radical prostatectomy
- Decreasing rates of lymph node dissection and lymph node yield during radical nephrectomy for renal cell carcinoma over the last 30 years in a large multicenter European experience
- Has the new edition of the TNM improved the lymph node staging for Renal Cell carcinoma?
- Can we consider patients with limited biopsy Gleason score 3+4 eligible for active surveillance?

#### **ASCO GU Symposium – Orlando, FL, 26-28<sup>th</sup> February 2015**

##### **Poster:**

- Assessing the impact on morbidity and mortality of neoadjuvant chemotherapy in patients with high-risk bladder cancer eligible for radical cystectomy.

#### **EAU – Madrid, 20-24<sup>th</sup> March 2015**

##### **Posters:**

- Neoadjuvant cisplatin-based chemotherapy does not impact perioperative morbidity in patients underwent radical cystectomy for bladder cancer
- Prognostic effect of inflammatory lymphadenopathies in renal cell carcinoma patients treated with nephrectomy and extended lymph node dissection
- Salvage lymph node dissection for clinically recurrent prostate cancer: Which patients do benefit from this approach?
- Clinical utility of transperineal template guided mapping biopsy of prostate after negative magnetic resonance imaging guided transrectal biopsy
- Impact of the extent of lymph node dissection on survival of patients with locally

advanced prostate cancer treated with radical prostatectomy

**EAU – Munich, 11-15<sup>th</sup> March 2016**

**Posters:**

- Robot-assisted adrenalectomy in case of bulky pheochromocytoma
- Development of the first model of radical prostatectomy in mouse: A feasibility study with biochemical validation
- When to perform preoperative bone scan for kidney cancer staging
- Is a well-performed robot-assisted radical prostatectomy the real focal therapy for the treatment of clinically localized prostate cancer?
- The effect of time elapsed from surgery on the subsequent risk of cancer specific mortality in renal cell carcinoma patients
- Preoperative favourable characteristics in bladder cancer patients cannot substitute the necessity of extended lymphadenectomy during radical cystectomy: A sensitivity curve and a survival analysis

**EAU – London, 24-28<sup>th</sup> March 2017**

**Posters:**

- Predictive and prognostic effect of inflammatory lymphadenopathies in renal cell carcinoma
- Impact of intraoperative blood transfusions on survival after surgery for renal cell carcinoma
- Pure histological variants are associated with poor survival at radical cystectomy in patients with bladder cancer

**Società Italiana di Urologia (S.I.U.) – Naples, 7-10<sup>th</sup> October 2017**

**Posters:**

- Cistectomia radicale robotica con neovescica ileale intracorporea: tecnica chirurgica e risultati perioperatori preliminari
- Preoperative clinical characteristics, surgical and pathological outcomes of anteriorly located prostate cancer treated with robotassisted radical prostatectomy at a single referral tertiary center
- RARP for prostate cancer in renal transplant recipient patients. Beyond the feasibility: Technical and functional implications
- Central multiparametric prostate magnetic resonance revision may reduce the number of unnecessary biopsies. Short-term results of a single center experience
- Positive surgical margins after robot-assisted radical prostatectomy in the multiparametric MRI era: the experience of a high volume third referral Centre
- Storia naturale delle recidive locali post-nefrectomia trattate chirurgicamente
- Robot-assisted retroperitoneal lymph node dissection for non seminomatous germ cell testicular cancer: initial experience of a high volume center
- Confirmatory multiparametric-magnetic resonance to better select potential Active Surveillance candidates for low-risk prostate cancer: results of a high-volume center internal protocol

- The PIRADS 3 paradox: Implications on clinical evaluation and disease management

**I authorize the processing of personal data in accordance with Legislative Decree 196/2003 and subsequent amendments**

Milan, December 18<sup>th</sup> 2017