

## PRESS RELEASE

### **Study finds bilateral nerve sparing shortens recovery of erectile function and urinary continence after robotic-assisted radical prostatectomy**

(Hong Kong, 10 June 2025) – **Erectile dysfunction, urinary incontinence, and oncological outcome are always the three major concerns associated with robot-assisted radical prostatectomy (RARP), while bilateral nerve sparing remains a surgical judgement by urologists in balancing these postoperative outcomes. A study conducted by The University of Hong Kong (HKU) and Queen Mary Hospital (QMH) revealed that patients who underwent RARP with bilateral nerve sparing experienced significantly improved outcome in erectile function and urinary continence compared to those in the unilateral nerve sparing and non-nerve sparing groups, without compromising oncological outcomes. The findings were recently published in the *Hong Kong Medical Journal*.**

The research team from the Division of Urology, Department of Surgery at HKU's Li Ka Shing Faculty of Medicine and QMH recruited and followed up 431 patients who underwent RARP in QMH between January 2018 and April 2023. Patient demographics, 1-hour pad test results, International Index of Erectile Function (IIEF-5) questionnaire responses, and pathological parameters were analysed. Patients who received bilateral nerve sparing had a higher mean postoperative IIEF-5 score at both 2 months and 3 months. They also had lower mean urine leakage volumes in the 1-hour pad test at 1 month and 2 months postoperatively. There was no increase in the rate of positive surgical margin in the bilateral nerve sparing group.

The study also shows that bilateral nerve sparing technique in RARP significantly enhances recovery of erectile function and urinary continence within the first 6 months post-surgery, without compromise oncological outcomes. These findings contribute valuable insights to the field of urology and may help inform clinical decision-making in the management of prostate cancer.

The article "Effects of nerve sparing on erectile dysfunction and urinary incontinence in robot-assisted radical prostatectomy" was published in the *Hong Kong Medical Journal*.

<https://doi.org/10.12809/hkmj2411709>

## 新聞稿

### 研究發現雙側保留神經可縮短機械臂輔助根治性前列腺切除術後勃起功能及尿控恢復時間

（香港，2025 年 6 月 10 日） — 勃起功能障礙、尿失禁及腫瘤學結果一直是與機械臂輔助根治性前列腺切除術（RARP）有關的三大主要關注點，而雙側保留神經的選擇仍然是泌尿外科醫生在平衡術後這些結果時的重要手術決策。一項由香港大學（港大）及瑪麗醫院進行的研究顯示，接受雙側保留神經 RARP 的患者在術後勃起功能及尿控方面的結果顯著優於單側保留神經組及非保留神經組，且不影響腫瘤學結果。研究結果最近已在《香港醫學雜誌》發表。

研究團隊成員來自港大李嘉誠醫學院及瑪麗醫院泌尿外科學系，納入並跟進了於 2018 年 1 月至 2023 年 4 月期間在瑪麗醫院接受 RARP 的 431 名患者，分析他們的人口統計學特徵、一小時尿失禁護墊測試結果、國際勃起性功能指標（IIEF-5）問卷回應及病理參數。結果顯示，雙側保留神經組患者在術後兩個月及三個月的平均 IIEF-5 分數較高，而他們在術後一個月及兩個月的一小時護墊測試平均尿液滲漏量較少。此外，雙側神經保留術並未增加陽性手術切緣率。

研究亦發現，雙側保留神經技術在 RARP 中於術後六個月內顯著恢復勃起功能尿控，且不影響腫瘤學結果。這些研究結果為泌尿外科領域提供了寶貴的見解，並可能對前列腺癌的臨床決策產生重要影響。

詳細內容可參閱原文《保留神經對機械臂輔助根治性前列腺切除術中勃起功能障礙與尿失禁的影響》。

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Source: Omar WK Tsui, Kevin CH Shing, Aren PM Lam, et al. Effects of nerve sparing on erectile dysfunction and urinary incontinence in robot-assisted radical prostatectomy. Hong Kong Med J 2025;31:Epub 10 Jun 2025. <https://doi.org/10.12809/hkmj2411709>.

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