COMMENTARY

Does every second really count when it comes to renal ischemia during nephron sparing surgery?

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Jabaji and colleagues present data that support the growing notion that the relative impact of ischemia time on long term renal function may be less than previously thought.¹ The investigators propose that size and tumor complexity, as captured by the RENAL Nephrometry Score, are an independent predictor of long term renal function. The authors appropriately recognize that the RENAL Nephrometry Score is likely a surrogate for the degree of parenchymal preservation, which appears to be a significantly more robust predictor of long-term renal function than ischemia.^{2,3} These findings are consistent with emerging data that show the human kidney to tolerate global ischemia remarkably well.⁴ As such, this work contributes to a growing body of literature that should give pause to recent trends that may add unnecessary complexity to

Address correspondence to Dr. Alexander Kutikov, Department of Surgical Oncology, Fox Chase Cancer Center, 333 Cottman Avenue, Philadelphia, PA 19111 USA nephron sparing surgery. Indeed, before techniques such as selective segmental vessel microdissection⁵ or controlled hypotension⁶ are widely adopted, harms of global ischemia must first be proven.

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