

Approval of the research protocol by an Institutional Review Board

21-091.

Informed consent

Not applicable.

Registry and the Registration No. of the study/trial

Not applicable.

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Editorial Comment

Editorial Comment to Robot-assisted radical nephrectomy and inferior vena cava tumor thrombectomy: Initial experience in Japan

Minimally invasive surgery using laparoscopic techniques in the treatment of RCC with an IVC tumor thrombus has always been challenging; therefore, open surgery remains the standard treatment. In the context of urological procedures, RN with IVC TT, especially RA-RN and IVC TT (RA-RN/IVCTT), is of the most complex procedures for urologists. In addition, its safety and feasibility have not yet been established owing to the lack of literature. However, in a systematic review of 14 retrospective studies, Lardas *et al.*, concluded that surgical management of patients with non-metastatic RCC with IVC thrombus is complex, but potentially curative and acceptable.¹ Surgical procedures in RA-RN/IVCTT vary depending on the level of thrombus; recently, Seetharam *et al.*, reported that RA-RN/IVCTT is feasible and safe for level I, II, and III thrombus in high volume centers.² Due to the high levels of surgical complexity and variation, RA-RN/IVCTT is currently performed solely by well-experienced surgeons in limited high-volume centers, and its safety is still unknown.

In addition, RA-RN is yet to be approved by the health insurance system in Japan, preventing performance of RA-RN/IVCTT. In the present article, the authors described the first experience of RA-RN/IVCTT,³ which was performed on a patient with RCC and a level I IVC by an experienced surgeon. The operation was successfully completed with a

purely robotic procedure; no significant complications occurred, and perioperative outcomes were satisfactory. This article described an experience of RA-RN/IVCTT for a RCC patient with a level I IVC thrombus, aiding improvements in understanding of the procedure's safety and feasibility. The findings have potential novelty, especially in Japan.

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DOI: 10.1002/iju5.12425

Conflict of interest

The authors declare no conflict of interest.

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