Reviewer’s report

Title: Combined bladder neck preservation and posterior musculofascial reconstruction during robotic assisted radical prostatectomy: effects on early and long term urinary continence recovery.

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Reviewer: Fabrizio Presicce

Reviewer's report:

In this manuscript the authors have retrospectively evaluated the outcomes on urinary incontinence of 3 different surgical techniques: open retropubic radical prostatectomy + bladder neck preservation vs "standard" robotic assisted radical prostatectomy vs robotic assisted radical prostatectomy + bladder neck preservation + posterior reconstruction.

The study is clinical interesting however a number of possible bias and limitations should be highlighted.

The initial sample size of study has been 292 pts (232 pts considering those effectively enrolled), the enrolling time has last 7 years and 4 surgeons have been involved in the procedures. Therefore the average number of radical prostatectomy par year performed by each surgeon was 10, that we can consider a low volume number, possibly impacting on the functional outcomes of the surgical procedures.

In addition little is known regarding the selection criteria chosen by the authors to candidate the patients for the different surgical technique. The patients have not been randomized, but probably - speculating on what is written in the manuscript - over the time the authors passed from open retropubic radical prostatectomy + bladder neck preservation to "standard" robotic assisted radical prostatectomy and later from "standard" robotic assisted radical prostatectomy to robotic assisted radical prostatectomy + bladder neck preservation + posterior reconstruction. Therefore we can speculate that the favourable outcomes observed by the last surgical techniques may in part secondary to the increasing expertise of the surgeon with this surgical procedure.

Lastly very little is known regarding the characteristic of the patients at baseline, the authors only provided information on BMI, age, PSA, Prostate volume, Gleason Score, and Stage. We have no information on comorbidities, ASA score, medications, perioperative complications, adjuvant radiotherapy.

Are the methods appropriate and well described?
If not, please specify what is required in your comments to the authors.

No
Does the work include the necessary controls?
If not, please specify which controls are required in your comments to the authors.

No

Are the conclusions drawn adequately supported by the data shown?
If not, please explain in your comments to the authors.

No

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I am able to assess the statistics

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