Anti-androgen therapy suspension following prolonged clinical and biochemical response: outcomes in a series of elderly patients with advanced prostate cancer

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ABSTRACT

Aims and background. To describe the outcomes following the suspension of androgen-suppression therapy in a series of elderly patients in an advanced stage of prostate cancer and in prolonged clinical and biochemical response.

Material and methods. Of 371 consecutive patients with advanced prostate cancer and treated with androgen-suppression therapy, 44 older patients were defined as in stable response on the basis of the following: absence of noteworthy dysuria, normal prostate findings on digital rectal examination, and prostate-specific antigen values lower than 0.50 ng/ml. After suspending treatment, it was to be re-scheduled in case of onset of dy-suria, evidence of a palpable lesion on digital rectal examination, or a rise in prostate-specific antigen above 10 ng/ml. Progression of disease was defined as a prostate-specific antigen level increase at two subsequent measurements, and/or the appearance of new lesions, and/or evidence of progression of disease on digital rectal examination.

Results and conclusions. Median age of patients was 78.5 years at the moment of therapy suspension. After a median follow-up of 93.9 months, fourteen patients (31.8%) showed progression of disease, but only 7 (15.9%) of these died. In 7 (15.9%) patients, serum testosterone levels did not exceed 0.5 ng/ml, indicating an absence of gonadal activity. The median time to progression was 138.2 months, and the median cumulative survival from the start and from the suspension of androgen-suppression therapy was 105.5 months and 64.1 months, respectively. The savings in drug costs amounted to 772,267 Euro. Taking into consideration these outcomes of survival and of savings in drug costs, we can conclude that in these selected elderly patients, this treatment option could be of interest. Free full text available at www.tumorionline.it

Key words: androgen ablation, elderly, prostate cancer.

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