

η θέση της ακτινοθεραπείας στον καρκίνο του προστάτη

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δεδομένα

- τεκμηριωμένος ρόλος ακτινοθεραπείας
- κλιμάκωση της δόσης σχετίζεται με καλύτερο θεραπευτικό αποτέλεσμα
- υπεροχή IMRT/IGRT έναντι συμβατικής ακτινοθεραπείας

νεότερα δεδομένα

- υποκλασματοποίηση δόσης
- λειτουργική απεικόνιση
- μελλοντικές προκλήσεις

δεδομένα

ρόλος ακτινοθεραπείας

The NEW ENGLAND OUR NIAI C NIEDICINE The NEW ENGLAND JOURNAL OF MEDICINE

ESTABLISHED IN 1812

ORIGINAL ARTICLE

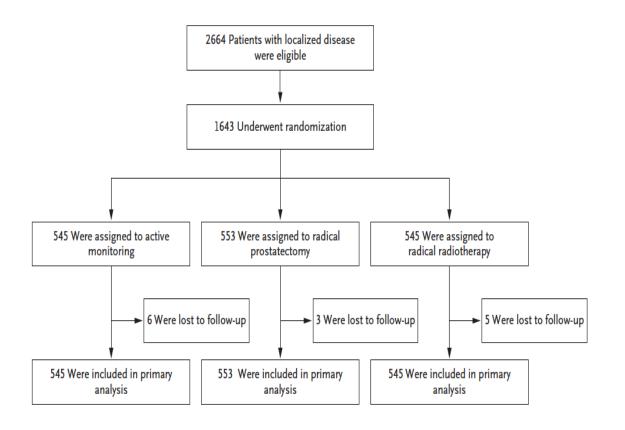
10-Year Outcomε

F.C. Hamdy, J.L. Donovan, J R.M. Martin, J. Oxley, M. Rot R. Kockelbergh, H. Kyn

Patient-Reported Outcomes after Monitoring, Surgery, or Radiotherapy for Prostate Cancer

J.L. Donovan, F.C. Hamdy, J.A. Lane, M. Mason, C. Metcalfe, E. Walsh, J.M. Blazeby, T.J. Peters, P. Holding, S. Bonnington, T. Lennon, L. Bradshaw, D. Cooper, P. Herbert, J. Howson, A. Jones, N. Lyons, E. Salter, P. Thompson, S. Tidball, J. Blaikie, C. Gray, P. Bollina, J. Catto, A. Doble, A. Doherty, D. Gillatt, R. Kockelbergh, H. Kynaston, A. Paul, P. Powell, S. Prescott, D.J. Rosario, E. Rowe, M. Davis, E.L. Turner, R.M. Martin, and D.E. Neal, for the ProtecT Study Group*

ProtecT



	Active monitoring (n=545)	Radiotherapy (n=545)	Radical prostatectomy (n=553)
Age at invitation (years)			
49-54	58 (11%)	62 (11%)	69 (12%)
55-59	140 (26%)	141 (26%)	137 (25%)
60-64	184 (34%)	176 (32%)	172 (31%)
65-69	163 (30%)	166 (30%)	175 (32%)
Median age (range)	62 (50-69)	62 (49-69)*	62 (50-69)
PSA (μg/L)			
3.0-5.9	373 (68%)	373 (68%)	371 (67%)
6.0-9.9	116 (21%)	121 (22%)	123 (22%)
≥10.0	56 (10%)	51 (9%)	59 (11%)
Median PSA (range; μg/L)	4.6 (3.0-20.9)†	4.6 (3.0-18.8)	4·7 (3·0–18·4)
Gleason score			
6	421 (77%)	423 (78%)	422 (76%)
7	111 (20%)	108 (20%)	120 (22%)
8–10	13 (2%)	14 (3%)	10 (2%)
Missing	0	0	1(<1%)
Clinical stage			
T1c	410 (75%)	429 (79%)	410 (74%)
T2	135 (25%)	116 (21%)	143 (26%)

ProtecT

- 545 active monitoring
 - PSA q3 m x 1y, q6 m thereafter, rise of 50% in 12 m: consider biopsy
- 553 radical prostatectomy
- 545 radical radiotherapy
 - RT: 3DCRT 74 Gy (37 fr) + NAD (3-6 m)
- 10 y follow up
- Disease Progression, Metastasis, Cancer Specific Survival, Overall Survival
- Toxicity
- Quality of Life
 - baseline, 6 m, 12m and annually thereafter

ICIQ: International Consultation of Incontinence Questionnaire

EPIC: Expanded Prostate Cancer Index Composite

ICSmaleSF: International Continence Society male Short Form

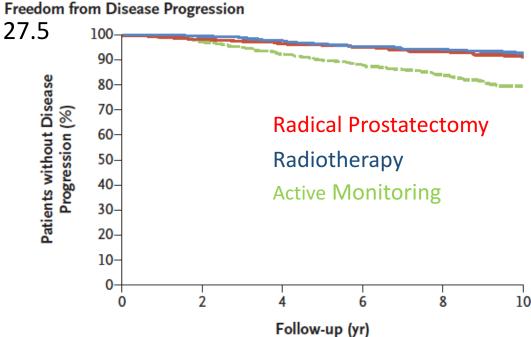
SF12: Medical Outcomes Study 12

HADS: Hospital Anxiety and Depression Scale

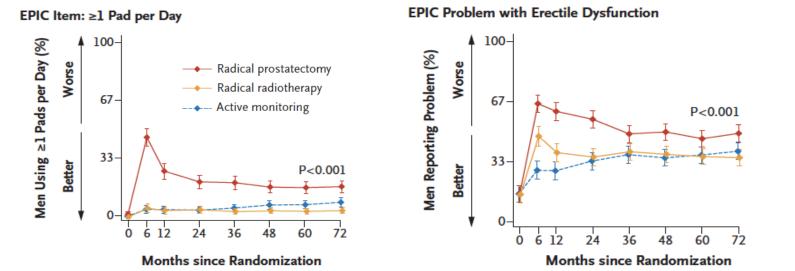
EORTC- QLQ C30

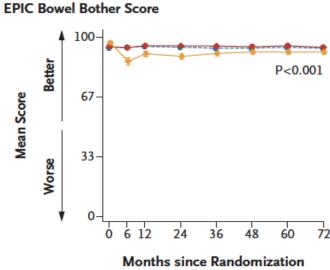
ProtecT αποτελέσματα θεραπείας

- Disease Progression
 - AM 112 men; 22.9 per 1000 person-years; 95% CI, 19.0 to 27.5
 - RP 46 men; 8.9 per 1000 person-years; 95% CI, 6.7 to 11.9
 - RT 46 men; 9.0 per 1000 person-years; 95% CI, 6.7 to 12.0 *p*<0.001
- Metastasis
 - AM 33 men; 6.3 per 1000 person-years; 95% CI, 4.5 to 8.8
 - RP 13 men; 2.4 per 1000 person-years; 95% CI, 1.4 to 4.2
 - RT 16 men; 3.0 per 1000 person-years; 95% CI, 1.9 to 4.9 *p*=0.004
- Prostate Cancer Specific Survival no significant difference



ProtecT τοξικότητα θεραπείας





- prostatectomy greatest negative effect on urinary continence at 6 months; the effect of urinary incontinence on
 QoL worse in the prostatectomy group for 2 years, but then similar to that reported in the other groups
- **nocturia** increased in all groups; the increase particularly in the radiotherapy group at 6 months
- at baseline 67% of men reported **erections** firm enough for intercourse, but by 6 months this rate fell to 52% in the active-monitoring group, to 22% in the radiotherapy group, and to 12% in the prostatectomy group
- **bowel function** worse in the radiotherapy group than in other groups. However, there was then considerable recovery in the radiotherapy group for these measures, apart from more frequent **bloody stools**

ProtecT σχετική με την υγεία ποιότητα ζωής

