

Early hormonal therapy hikes death rate in men with recurrent low-risk prostate cancer

If PSA levels start rising again after surgery to remove the prostate, it could mean that a man's cancer has returned and begun to spread. Men who have this so-called "biochemical recurrence" are often treated with hormonal therapy, either with or without radiation. Whether these early hormonal treatments improve survival after PSA levels rise, however, is hotly debated.

A study presented this year sheds new light on this vexing question. Investigators studied 468 men whose PSA levels started rising after radical prostatectomy, a surgical procedure to remove the prostate. Those whose PSA took more than nine months to double were considered to have a low-risk recurrence.

After 70 months, men with low-risk recurrence who had received early hormonal treatment (that is, before their PSA levels crossed a threshold of 5 ng/ml) had a 68% higher risk of death from any cause than low-risk men who did not get early hormonal treatment. That may be because hormonal therapy can have life-threatening side effects, such as diabetes, stroke, and osteoporosis. But the study also detected a survival advantage from early hormonal therapy among the much smaller group of men with high-risk prostate cancer recurrence, who are more likely to die of their disease.

The takeaway point? Hormonal therapy isn't for everyone, and in men with low-risk prostate cancer it can do more harm than good.

Source: Freedland S, Howard L, Amling C, et al. Does Early Androgen Therapy After Biochemical Recurrence Following Radical Prostatectomy Increase Overall Survival? Presented at the 2015 Annual Meeting of the American Urological Association, New Orleans, LA. Abstract No. MP82-15.