

Radiation added to hormone therapy increases survival for men with prostate cancer

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For men with locally advanced prostate cancer the addition of radiation treatment to anti-androgen hormone therapy reduces the risk of dying of prostate cancer by 50 percent compared to those who have anti-androgen hormone treatment alone, according to a randomized study presented September 22, 2008, at the American Society for Therapeutic Radiology and Oncology's 50th Annual Meeting in Boston.

"This randomized trial is the first to show that men with locally advanced prostate cancer will survive substantially longer when radiation is added to their treatment plan," Anders Widmark, M.D., lead author of the study and a professor in radiation oncology at Umea University in Umea, Sweden, said. "I would encourage men with locally advanced prostate cancer to talk to their doctor to see if they would be a good candidate for radiation therapy in addition to hormone treatment."

Locally advanced prostate cancer is cancer that has grown close to the border or outside the prostate gland and into neighboring tissue, but has not spread into the lymph nodes or to other organs. In this study, anti-androgen hormone therapy is used to treat prostate cancer by blocking the stimulating effect of testosterone on the prostate cancer cells, to shrink the prostate cancer and slow down the growth of prostate cancer. External beam radiation therapy (also called radiotherapy) involves a series of daily treatments to accurately deliver radiation to the prostate.

The study involved 880 patients with locally advanced prostate cancer who were randomly assigned to receive three months of intense hormone therapy (temporary castration) called total elimination of androgens in the body (total androgen blockade) followed by continuous anti-androgen therapy, allowing the testosterone to

come back or the same hormonal treatment combined with radiation therapy between February 1996 to December 2002.

Findings show that 18 percent of patients who underwent hormone therapy alone died of prostate cancer, compared to nine percent of those who had both hormone and radiation treatment. The quality of life at four years after treatment was similar between the two groups, with the exception of decreased social function in the patients who had the combined treatment.

Source: American Society for Therapeutic Radiology and Oncology

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