Intermittent androgen suppression for rising PSA level after radiotherapy.


Erratum in

Abstract

BACKGROUND: Intermittent androgen deprivation for prostate-specific antigen (PSA) elevation after radiotherapy may improve quality of life and delay hormone resistance. We assessed overall survival with intermittent versus continuous androgen deprivation in a noninferiority randomized trial.

METHODS: We enrolled patients with a PSA level greater than 3 ng per milliliter more than 1 year after primary or salvage radiotherapy for localized prostate cancer. Intermittent treatment was provided in 8-month cycles, with nontreatment periods determined according to the PSA level. The primary end point was overall survival. Secondary end points included quality of life, time to castration-resistant disease, and duration of nontreatment intervals.

RESULTS: Of 1386 enrolled patients, 690 were randomly assigned to intermittent therapy and 696 to continuous therapy. Median follow-up was 6.9 years. There were no significant between-group differences in adverse events. In the intermittent-therapy group, full testosterone recovery occurred in 35% of patients, and testosterone recovery to the trial-entry threshold occurred in 79%. Intermittent therapy provided potential benefits with respect to physical function, fatigue, urinary problems, hot flashes, libido, and erectile function. There were 268 deaths in the intermittent-therapy group and 256 in the continuous-therapy group. Median overall survival was 8.8 years in the intermittent-therapy group versus 9.1 years in the continuous-therapy group (hazard ratio for death, 1.02; 95% confidence interval, 0.86 to 1.21). The estimated 7-year cumulative rates of disease-related death were 18% and 15% in the two groups, respectively (P=0.24).

CONCLUSIONS: Intermittent androgen deprivation was noninferior to continuous therapy with respect to overall survival. Some quality-of-life factors improved with intermittent therapy. (Funded by the Canadian Cancer Society Research Institute and others; ClinicalTrials.gov number, NCT00003653.)

Comment in

Words of wisdom: re: intermittent androgen suppression for rising PSA level after radiotherapy. [Eur Urol. 2013]
ACP Journal Club. Intermittent and continuous androgen deprivation did not differ for mortality after
Intermittent androgen suppression for rising PSA level after radiotherapy for prostate cancer. [Ann Intern Med. 2013]

Words of wisdom. Re: intermittent androgen suppression for rising PSA level after radiotherapy. [Eur Urol. 2013]

Re: Intermittent androgen suppression for rising PSA level after radiotherapy. [J Urol. 2013]

Commentary on: Intermittent androgen suppression for rising PSA level after radiotherapy. [Urology. 2013]

Androgen deprivation--continuous, intermittent, or none at all? [N Engl J Med. 2012]

Re: intermittent androgen suppression for rising PSA level after radiotherapy. [J Urol. 2013]

Words of wisdom. Re: Intermittent androgen suppression for rising PSA level after radiotherapy. [Eur Urol. 2013]

PMID: 22931259 [PubMed - indexed for MEDLINE]  PMCID: PMC3521033  Free PMC Article