

PROSTATE CANCER FOUNDATION

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# ADVANCED PROSTATE CANCER



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## OVERVIEW OF TONIGHT

- ▶ What is advanced prostate cancer
- ▶ When to start treatment
- ▶ What is initial treatment ?
- ▶ New treatments available
- ▶ Specific Problems and other Specialties

# WHAT IM NOT GOING TO TALK ABOUT

- ▶ PSA testing/screening
- ▶ Curative Treatment for Early Prostate Cancer
  - ▶ Robotic surgery, Radical prostatectomy
  - ▶ Brachytherapy, Radiotherapy

## RESOURCES/READING/QUESTIONS

- ▶ Please ask questions - during/afterwards
- ▶ This presentation - [www.bayurology.co.nz](http://www.bayurology.co.nz)
- ▶ Prostate cancer foundation

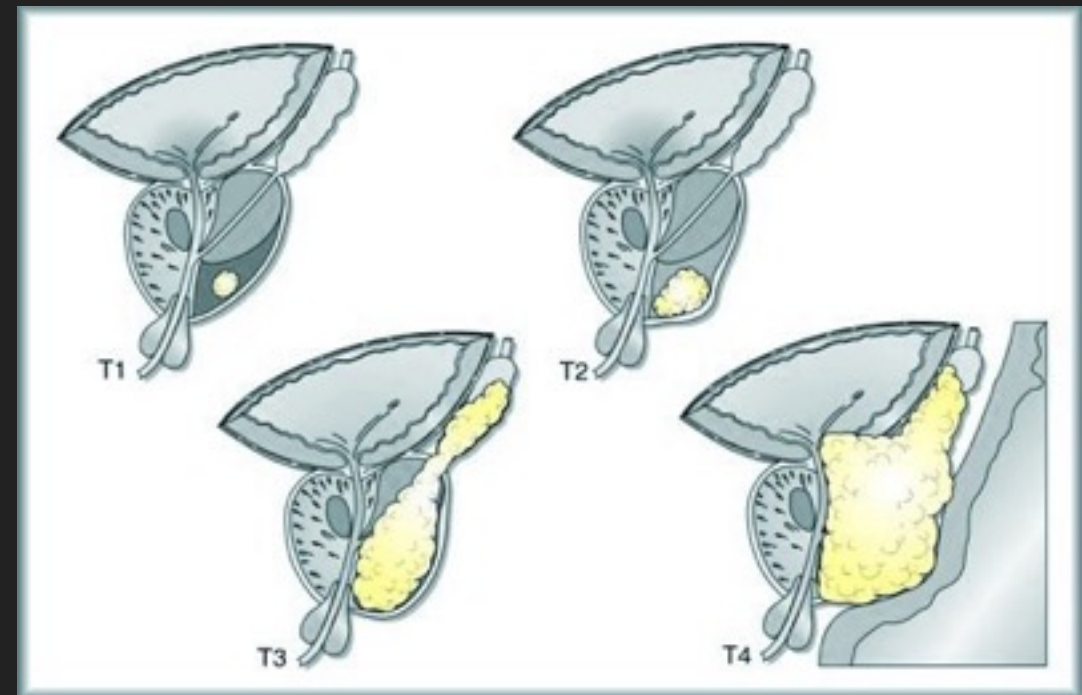
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# PROSTATE CANCER

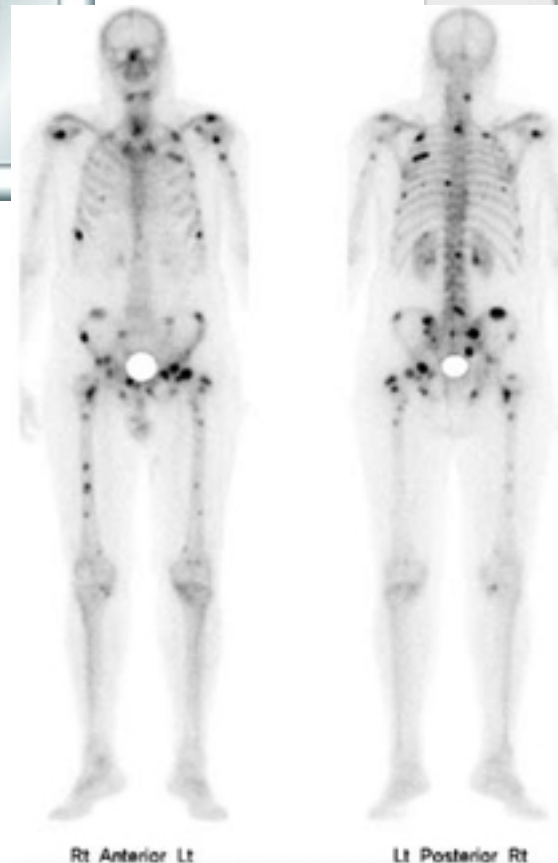
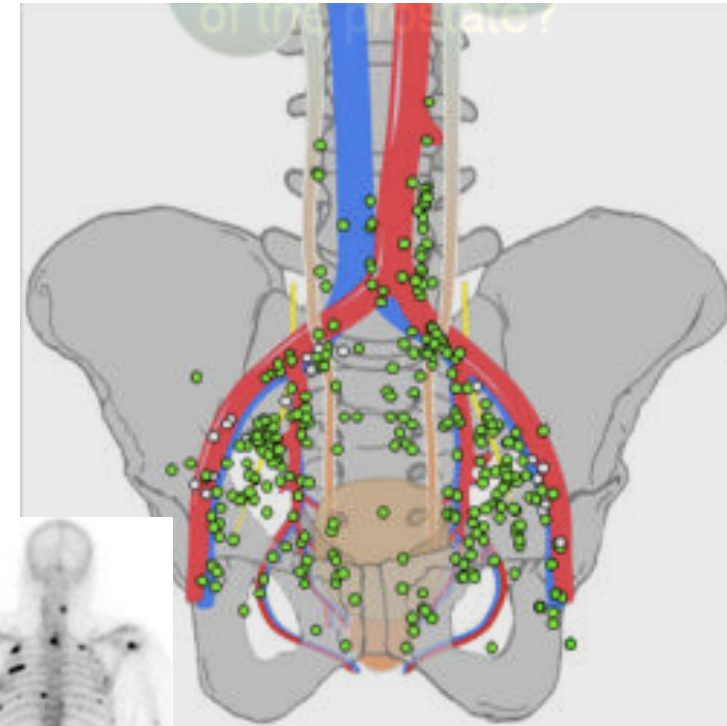
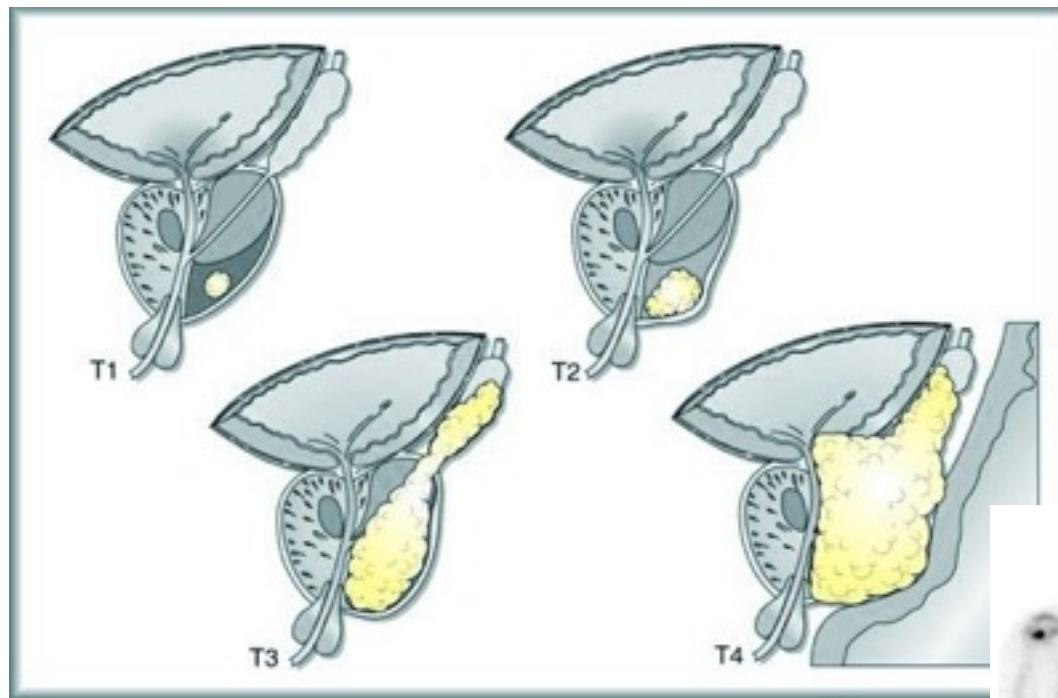
- ▶ Many men have/get prostate cancer
- ▶ Many men never know that they have it
- ▶ Many do not die of it
- ▶ Avoid treating those who don't need treatment
- ▶ Aggressively treat those who do (at the right time)

# WHAT IS ADVANCED PROSTATE CANCER?

- ▶ Cancer that cannot be cured
- ▶ Cancer outside the prostate
  - ▶ Spread to lymph nodes
  - ▶ Bones



# STAGING OF PROSTATE CANCER



# PROSTATE CANCER TIMELINE

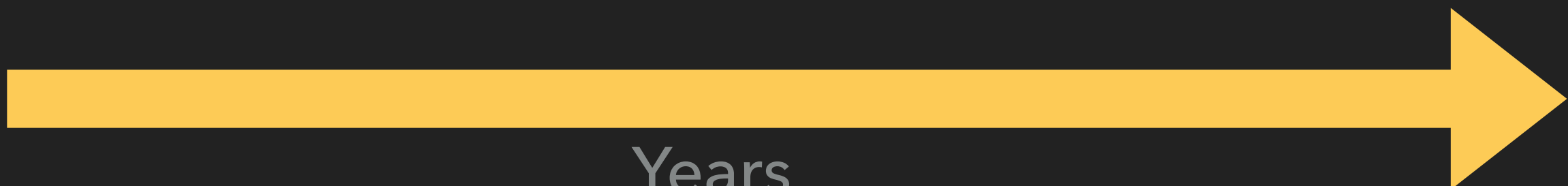
Curable

Early Stage  
(Curable)



Recurrent  
Cancer

Surgery  
Radiotherapy  
Brachytherapy



Years



# PROSTATE CANCER TIMELINE

Curable

Advanced

Early Stage  
(Curable)



Recurrent  
Cancer



Hormone  
Sensitive



Castrate  
Resistant



End Stage

Surgery  
Radiotherapy  
Brachytherapy

Years



## MEN WITH ADVANCED PROSTATE CANCER

- ▶ Who are they?
  - ▶ Recurrent Cancer after Radical Treatment
  - ▶ Men on watchful waiting
  - ▶ Men who have an elevated PSA
  - ▶ Men who present with symptoms of advanced disease
  - ▶ Can be diagnosed at any point on the timeline,

PROSTATE CANCER CAN BE A HUMBLING CONDITION TO TREAT

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**EVERY MAN IS DIFFERENT  
NOT ALL MEN ARE AVERAGE**

### CASE 1 – LAST FRIDAY

- ▶ 81 yr old man
- ▶ Rib pain - nothing else
- ▶ PSA = ?

CASE 1

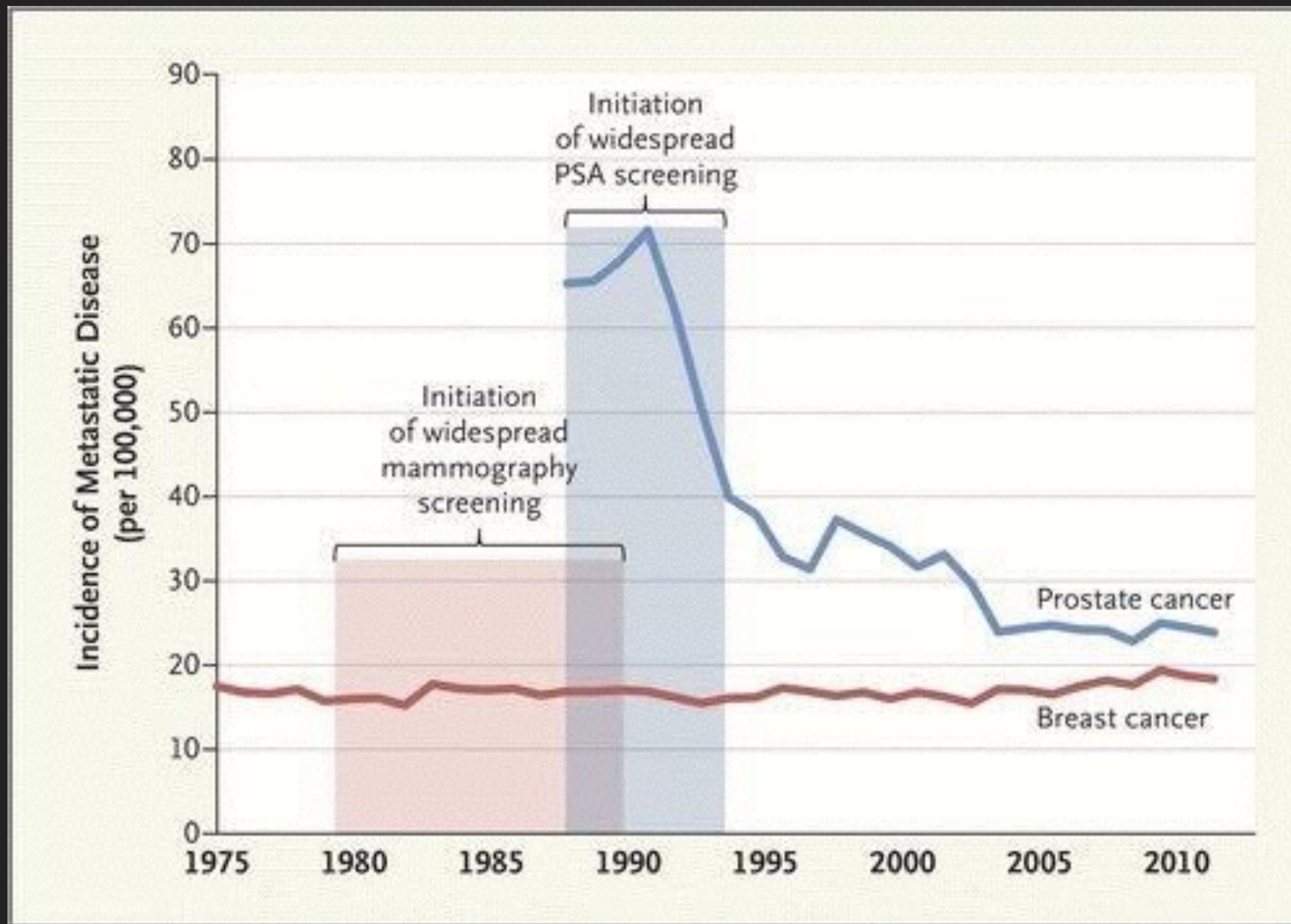
<div><div>11-Nov-15 11:15</div><div><div>Liver Function Tests</div><div>HAEMATOLOGY.....</div><div>REFERRED TESTS</div><div>Parathyroid Hormone</div></div></div>	<div>PSA 8330.00 ug/L H 0.0-7.0</div>
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### CASE 2

- ▶ 70yr old man
- ▶ Admitted to hospital
  - ▶ Never been sick
  - ▶ Diagnosed with advanced prostate cancer
- ▶ PSA - Normal

# PSA REDUCES RISK OF ADVANCED PROSTATE CANCER

## PSA TESTING



# TREATMENT OF ADVANCED PROSTATE CANCER

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## PROSTATE CANCER TREATMENT

Preserve quality of life

Early treatment does not affect survival

Avoid long term side effects of treatment

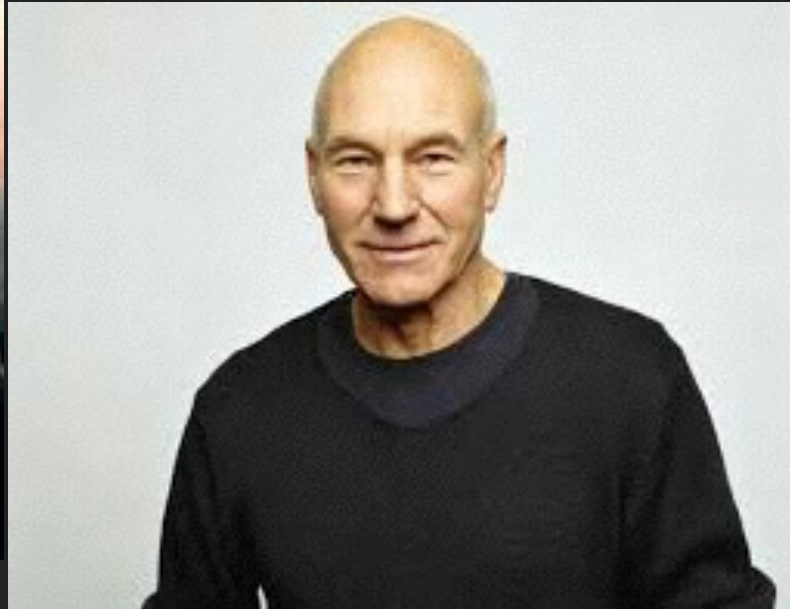
But

Need to prevent complications of advanced prostate cancer

LONGEVITY-WHICH ONE OF THESE GUYS NEEDS TREATMENT?

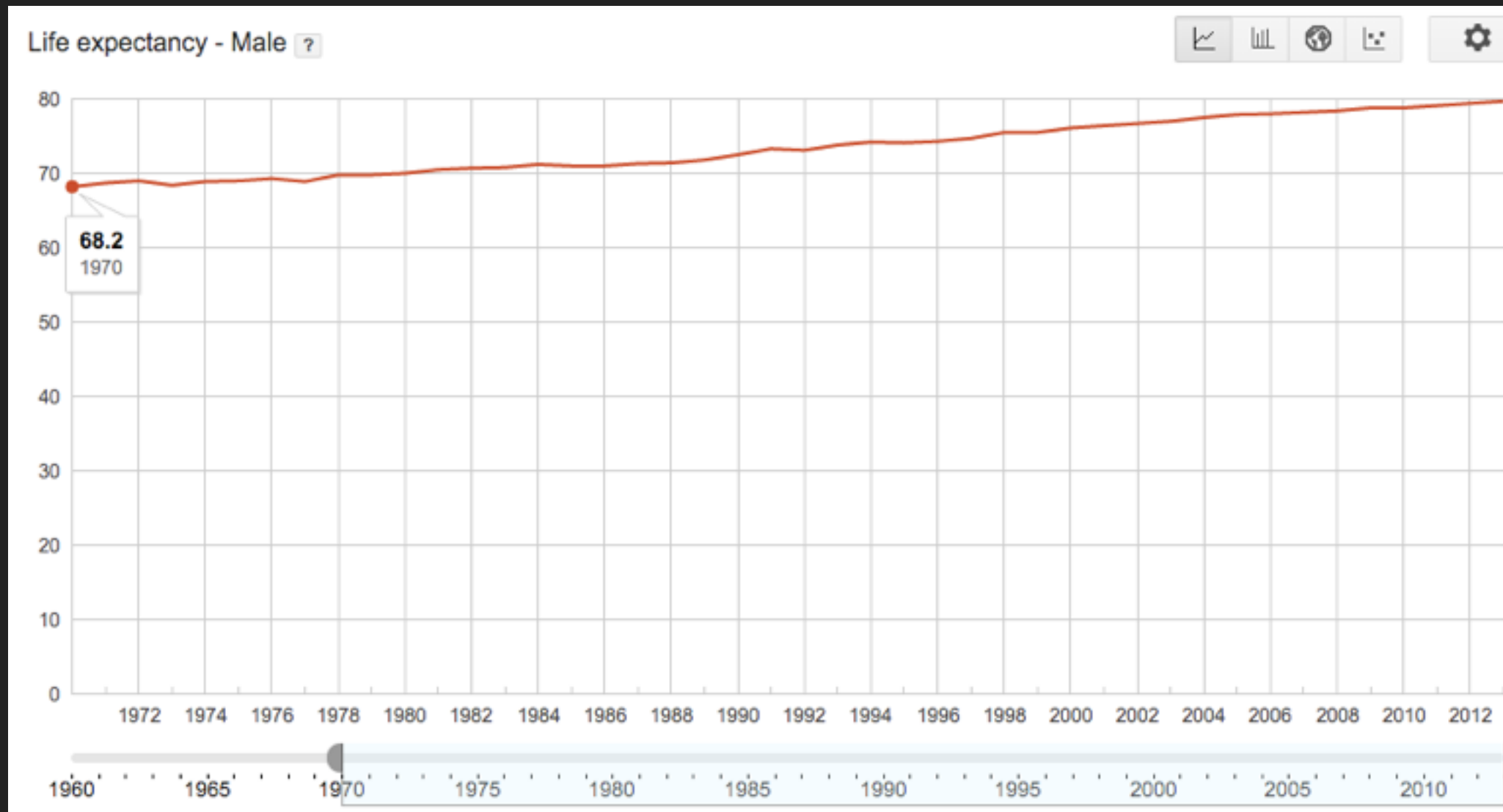
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ITS NOT YOUR DATE OF BIRTH THATS IMPORTANT



# NZ MEN ARE LIVING LONGER

► Prostate cancer is a slow growing disease, but

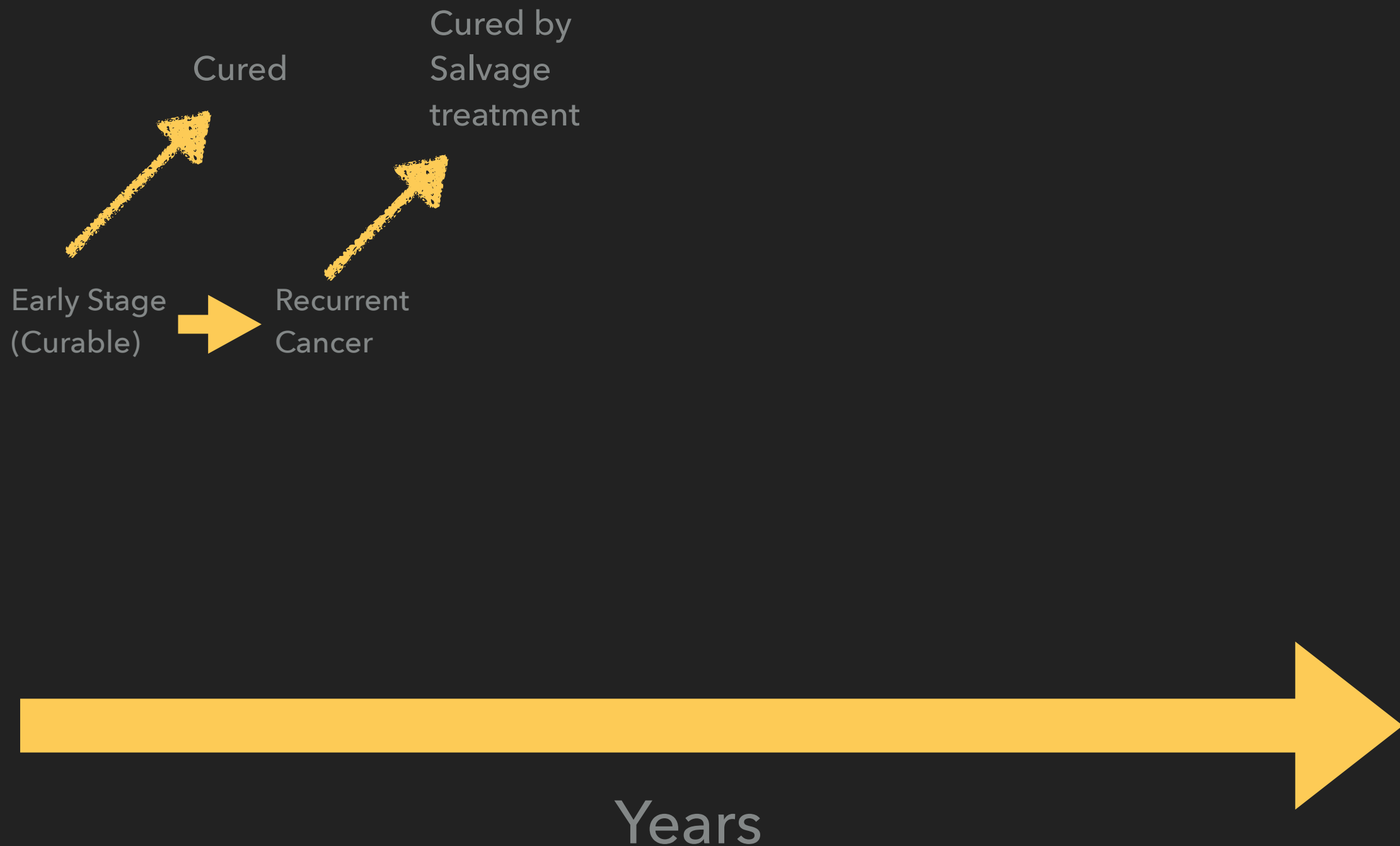


► Men are living longer

### A 65 YEAR OLD NZ MAN

- ▶ In 1970;
  - ▶ Lived another 12 years -to 77
- ▶ In 2014
  - ▶ Lives another 19 years - to 84
  - ▶ Prostate cancer becomes a factor

# PROSTATE CANCER TIMELINE



## STAGING – RADIOLOGY

- ▶ Bone scan
- ▶ MRI
- ▶ CT

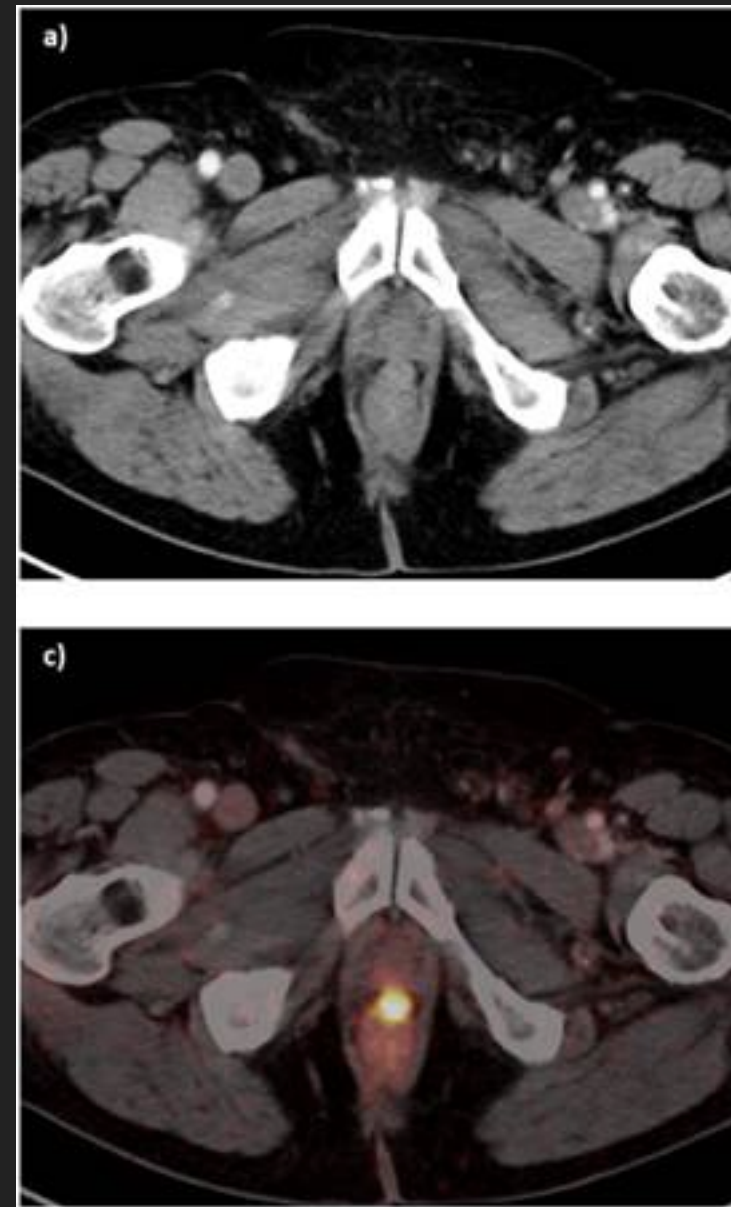
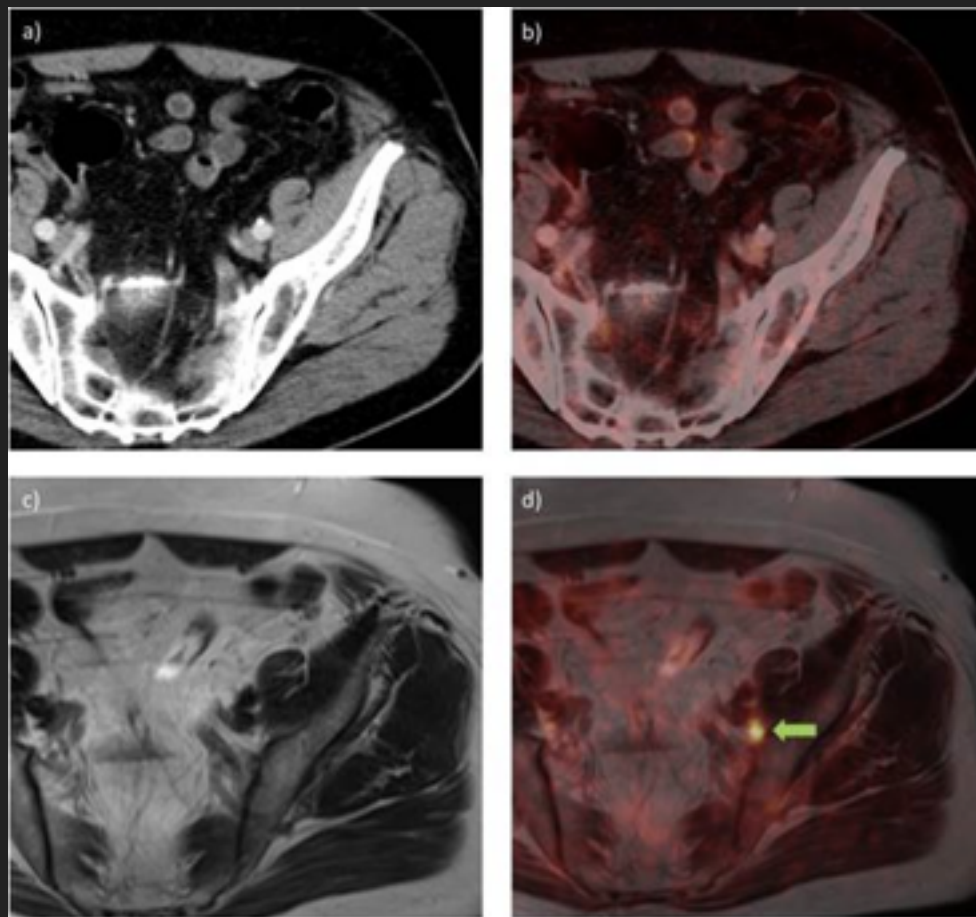
**REGULAR PSA IS VITAL**

PSMA SCAN - IS NEW, LOOKS GREAT, BUT THE JURY IS STILL OUT.....

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**BRIGHT LIGHT = CANCER. NO BRIGHT LIGHT = NO CANCER?**

► PSMA

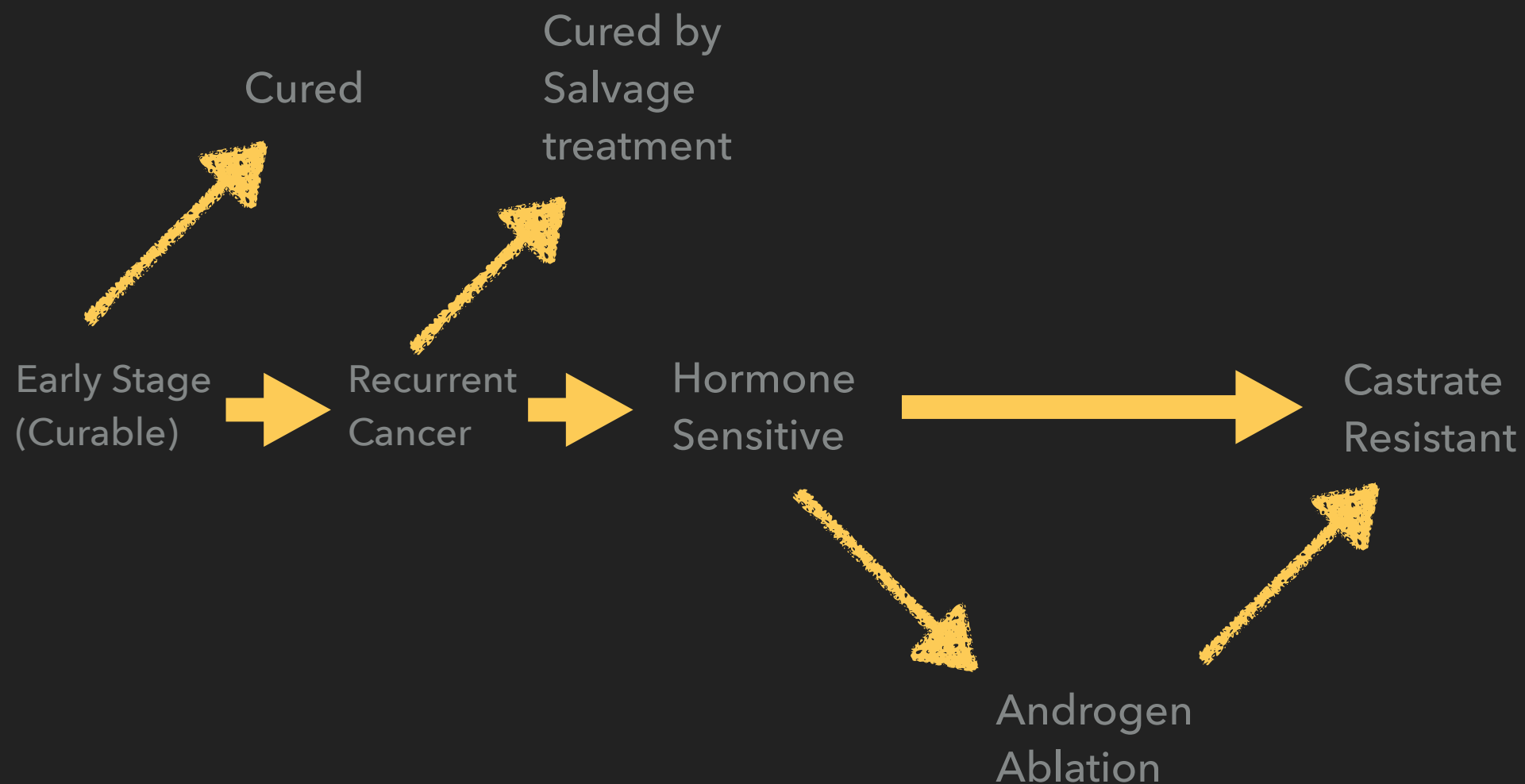


## WHEN TO START TREATMENT – ASSESS RISK

- ▶ Look at
  - ▶ Man - health, medications, etc
  - ▶ Prostate Features
    - ▶ PSA
    - ▶ Grade of cancer - Gleason Score 6,7,8-10
    - ▶ Stage of Cancer - does radiology show spread?



# PROSTATE CANCER TIMELINE



Gleason 6

Gleason 8-10

Years

## HIGH RISK

- ▶ Young man
- ▶ High grade
- ▶ Advanced Stage
- ▶ Rapidly rising PSA



Start  
Treatment

## TREATMENT – ANDROGEN ABLATION

► In the old days



► Now we have - Lucrin/Zoladex/Eligard Injections

## ANDROGEN ABLATION

▶ Safe

But

▶ Effective

Side Effects

▶ Durable

Hot Flushes

Weight Gain

Blood sugar

Bone density

▶ In the old days-started straight away

▶ Now- can safely delay starting injections until  
PSA 30 - 40 - 50 or even higher

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## ANDROGEN ABLATION – EXTRAS

- ▶ Pills can be helpful in combination with injections
  - ▶ Bicalutamide/Flutamide/Cyproterone
  - ▶ But additional benefit minimal
  - ▶ Additional Side effects usually not worth it

**THE END**

~~THE END~~

WAIT THERE'S MORE

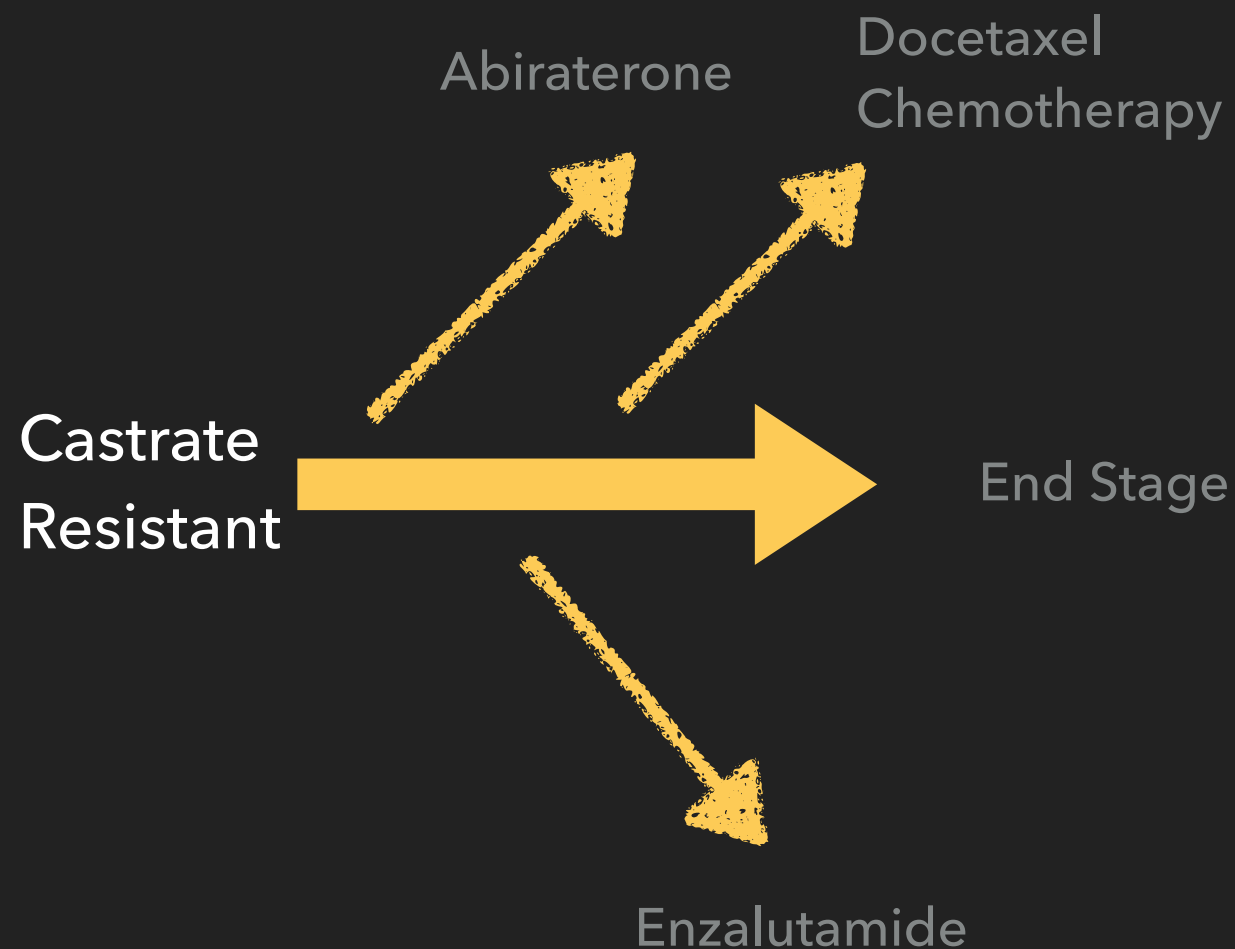
# EVENTUALLY INJECTIONS WILL STOP WORKING

- ▶ Historically very few (good) options after this
- ▶ Managing symptoms was the only option



# PROSTATE CANCER TIMELINE -2

## NEW TREATMENTS AVAILABLE



## NEW AGENTS

- ▶ Well studied
  - ▶ Comprehensive benefits/effects
    - ▶ Symptoms, complications, PSA, survival
    - ▶ Studies stopped early due to obvious benefit

### ABIRATERONE – ZYTIGA

- ▶ Works by stopping production of testosterone
- ▶ Safe
- ▶ Effective
- ▶ Practical - oral tablet
- ▶ Expensive, but

# ABIRATERONE – ZYTIGA – NOW FUNDED IN NZ

### Abiraterone acetate

#### INITIAL APPLICATION

Applications only from a medical oncologist, radiation oncologist, urologist or any other medical practitioner on the recommendation of a medical oncologist, radiation oncologist or urologist. Approvals valid for 5 months.

**Prerequisites** (tick boxes where appropriate)

- ☐ Patient has prostate cancer  
and  
☐ Patient has metastases  
and  
☐ Patient's disease is castration resistant  
and

- ☐ Patient is symptomatic  
and  
☐ Patient has disease progression (rising serum PSA) after second line anti-androgen therapy  
and  
☐ Patient has ECOG performance score of 0-1  
and  
☐ Patient has not had prior treatment with taxane chemotherapy

or

- ☐ Patient's disease has progressed following prior chemotherapy containing a taxane  
and  
☐ Patient has ECOG performance score of 0-2  
and  
☐ Patient has not had prior treatment with abiraterone

## NEEDS MONITORING

- ▶ Blood pressure
- ▶ Electrolytes
- ▶ Liver Function tests
- ▶ Fluid retention, weight

### ENZALUTAMIDE

- ▶ Proven to be effective, safe
- ▶ Few side effects - high blood pressure, seizures, fatigue
- ▶ High cost - not funded

## DOCETAXEL FOR PROSTATE CANCER

- ▶ Historically
  - ▶ toxic - significant side effects
  - ▶ questionable benefit, particularly in elderly men
  - ▶ But,

## NEW EVIDENCE

- ▶ Can use it early (When start Injection Treatment)

### ORIGINAL ARTICLE

#### Chemohormonal Therapy in Metastatic Hormone-Sensitive Prostate Cancer

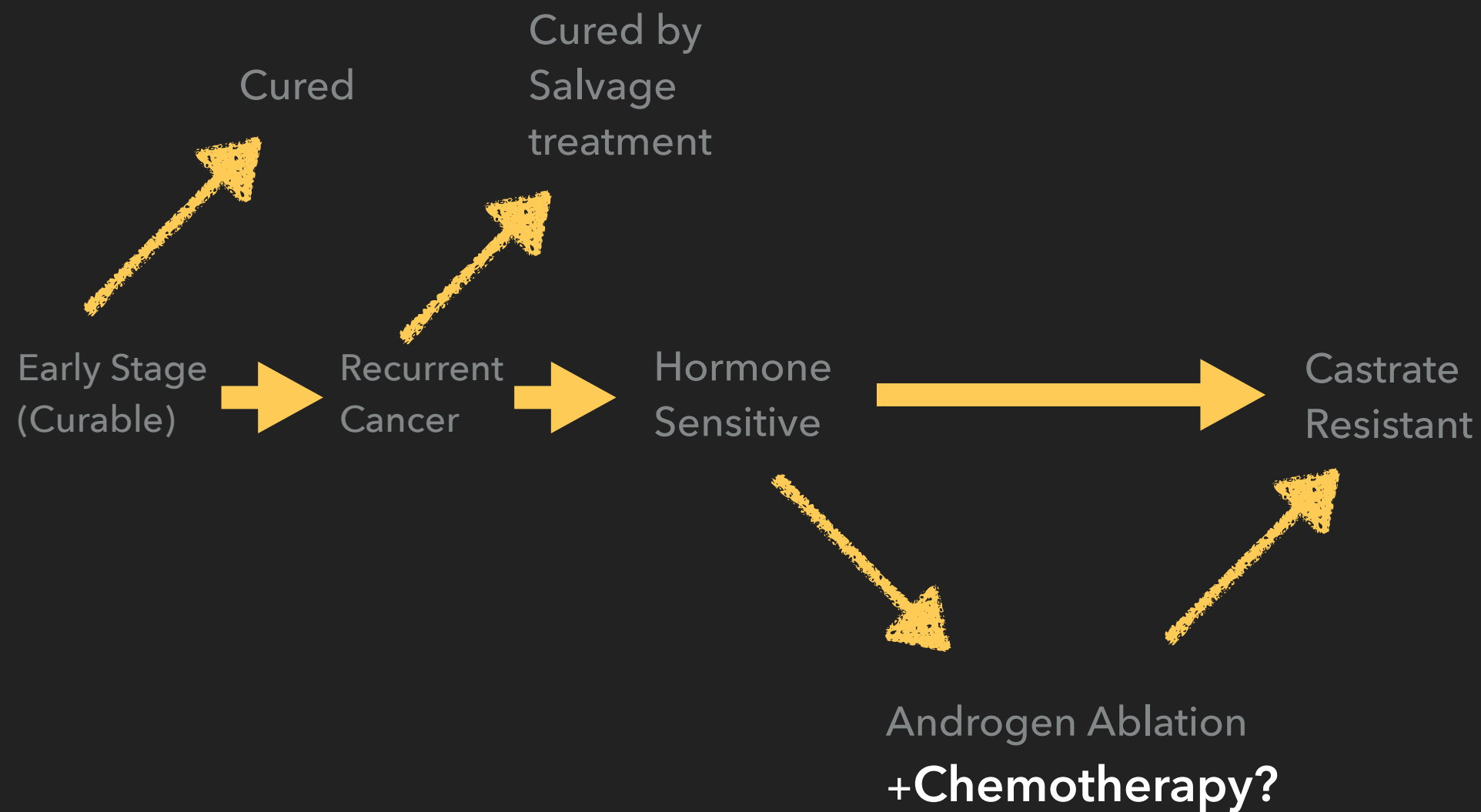
Christopher J. Sweeney, M.B., B.S., Yu-Hui Chen, M.S., M.P.H., Michael Carducci, M.D., Glenn Liu, M.D., David F. Jarrard, M.D., Mario Eisenberger, M.D., Yu-Ning Wong, M.D., M.S.C.E., Noah Hahn, M.D., Manish Kohli, M.D., Matthew M. Cooney, M.D., Robert Dreicer, M.D., Nicholas J. Vogelzang, M.D., Joel Picus, M.D., Daniel Shevrin, M.D., Maha Hussain, M.B., Ch.B., Jorge A. Garcia, M.D., and Robert S. DiPaola, M.D.  
N Engl J Med 2015; 373:737-746 | August 20, 2015 | DOI: 10.1056/NEJMoa1503747

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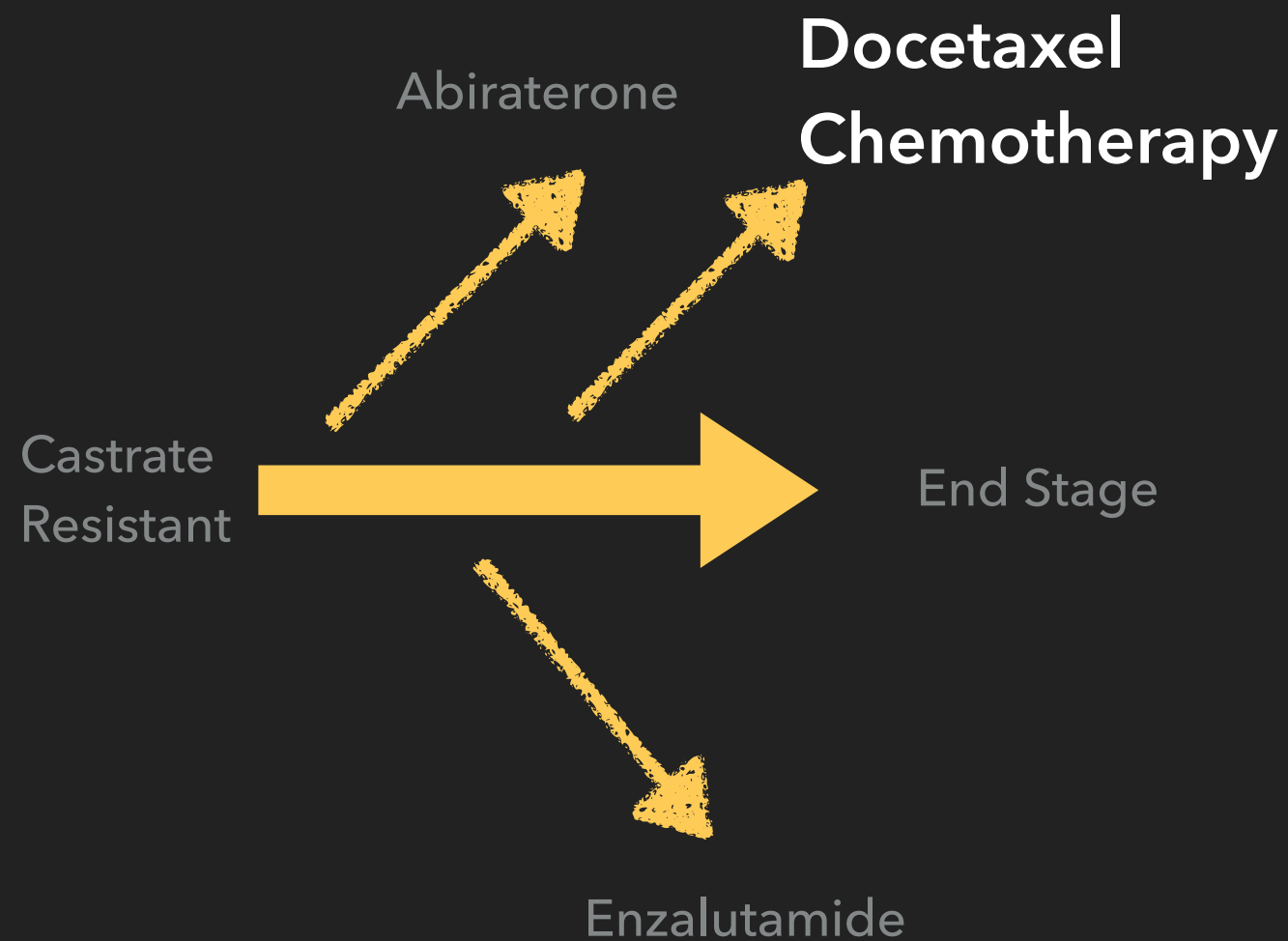
- ▶ Can use it late
  - ▶ After Injections stop working (possibly)
  - ▶ After Abiraterone stops working (possibly)



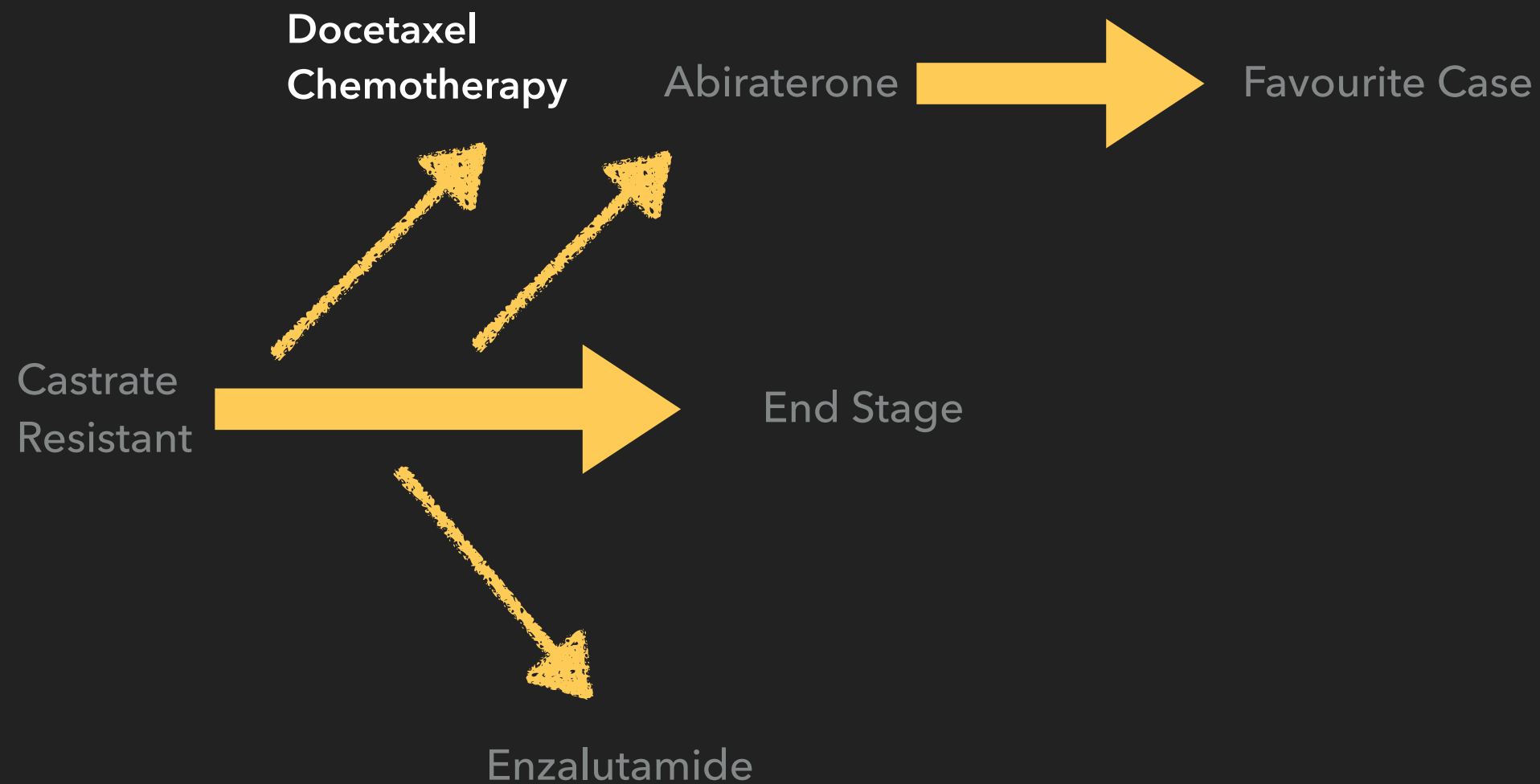
# PROSTATE CANCER TIMELINE – EARLY CHEMO



# PROSTATE CANCER TIMELINE –LATE CHEMO



# PROSTATE CANCER TIMELINE –LATE CHEMO



## THIS IS VERY IMPORTANT

- ▶ Support Groups
- ▶ Exercise Groups
- ▶ Prostate Cancer Foundation reading resources
- ▶ Books

# **SPECIFIC MANAGEMENT**

## PREVENT OSTEOPOROSIS + COMPLICATIONS OF CANCER

- ▶ Calcium and Vitamin D
- ▶ Bisphosphonates -
  - ▶ protect against osteoporosis/fracture/?pain
  - ▶ ? survival benefit

## VITAL ROLE

- ▶ Spinal Cord Compression
- ▶ Bone Pain
- ▶ Blood in the urine



### UROLOGISTS

- ▶ Obstructed kidneys - Unblock - stent/nephrostomy
- ▶ Bone Pain - Pain management, Radiotherapy
- ▶ Blood in urine - laser surgery



## HOSPICE/PALLIATIVE CARE

- ▶ Early referral to hospice found to be beneficial
- ▶ They are experts in managing advanced prostate cancer
- ▶ Advance Care Planning
- ▶ Panel Discussion

# ITS ALL ABOUT THE MAN

- ▶ Preserve quality of life
- ▶ Minimise side-effects
- ▶ Prevent complications of advanced cancer
- ▶ Encourage healthy lifestyle