Biochemical Failure does not Predict Overall Survival after Radical Prostatectomy for Localized Prostate Cancer: 10-year Results

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Précis: Biochemical failure does not predict survival after radical prostatectomy

Introduction
Radical prostatectomy provides excellent cancer control in most men with clinically localized disease. However, approximately 35% of men will experience a detectable serum prostate-specific antigen (PSA) elevation within 10 years following such surgery. At this early sign of "biochemical recurrence," patients want to know what this means, whether they will survive, and if not, how long they will have to live. This report is of an analysis of outcome in patients who developed biochemical recurrence.

Method
In this analysis, the researchers studied overall survival rates in 1,132 patients undergoing radical prostatectomy between 1986 and 1998. Biochemical failure was defined as a PSA concentration of at least 0.2 ng/ml.

Results
With a mean follow up of 56 months,

- Biochemical failure occurred in 213 patients.
- The 10-year survival rate was 88% in patients with biochemical failure, compared with a rate of 93% in patients without biochemical failure. The difference was not statistically significant (p=0.94).
- Patients treated with second-line therapy for biochemical failure had similar 10-year survival rates to those who did not receive therapy.

Discussion
Patients in whom serum prostate-specific antigen (PSA) levels increase after radical prostatectomy for localized prostate cancer have a 10-year survival equivalent to that seen in patients with undetectable PSA results. This has important implications in the selection of systemic therapies. However, longer follow up is needed to make more definitive conclusions.

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