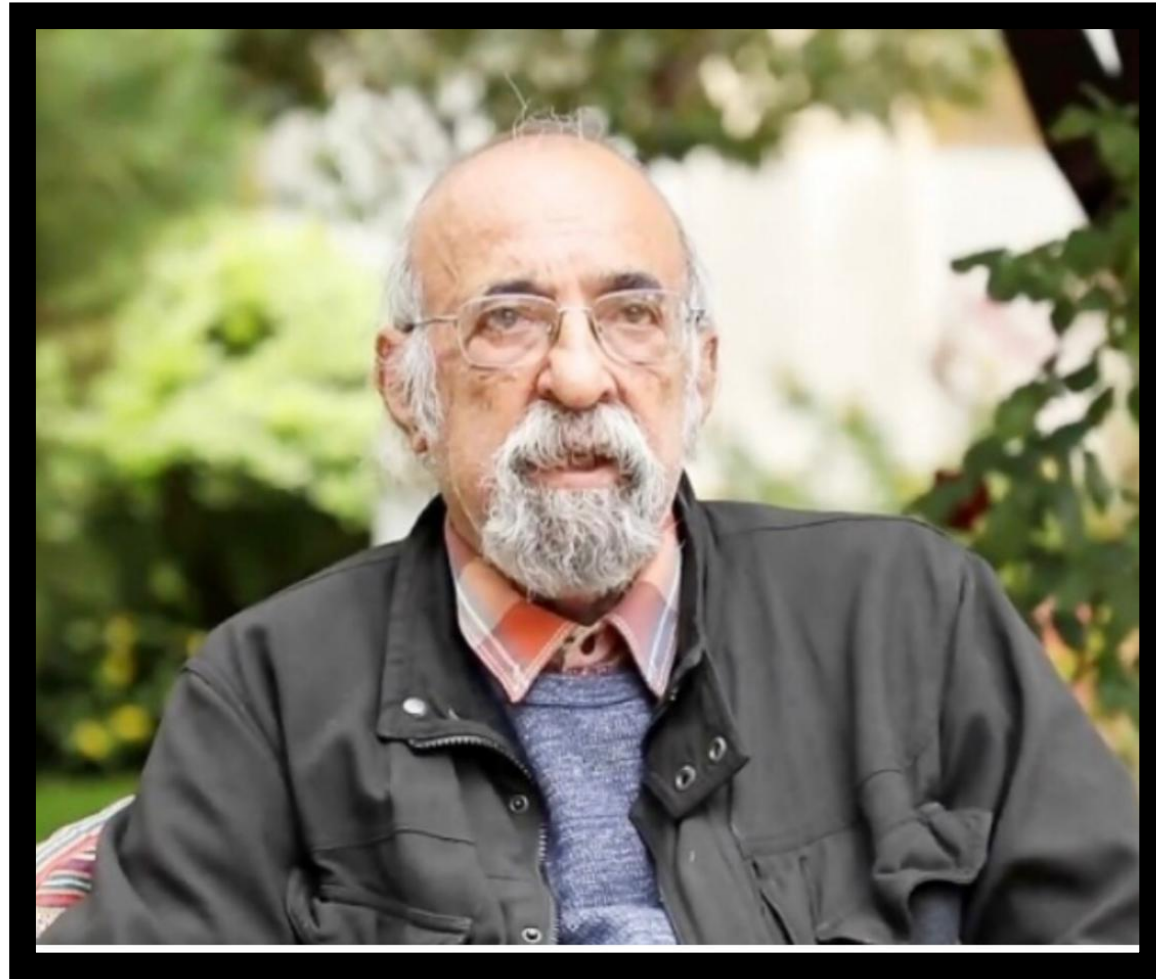


Panel Discussion on “Metastatic Prostate Cancer”

انجمن علمی سرطان ایران (ICA)
شاهه مرکز - اصفهان. ۱۳۹۹/۱۱/۳۰

جهان یادگار است و ما رفتنی



Metastatic Castration Sensitive

Prostate Cancer

Definition

N1M0: RT+ADT/or ADT alone

M1, High Volume

Visceral mets. Or ADT + Docetaxel

≥ 4 bone mets.

≥ 1 outside spine

& pelvis

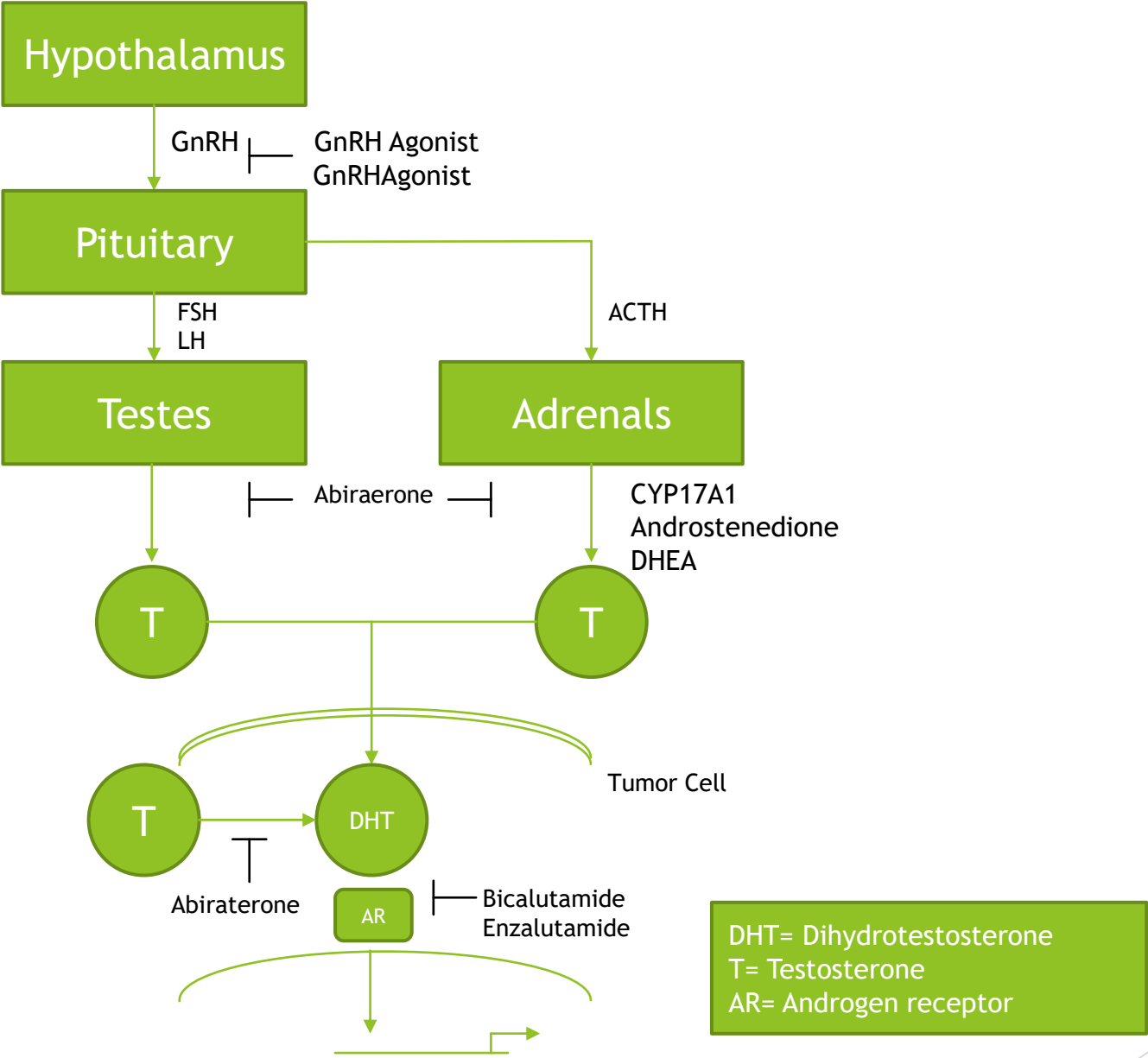
M1, Low volume ADT/ or dual ADT

Metastatic Prostate Cancer

Androgen Deprivation Therapy

- Anti androgens
- GnRh Agonist
- GnRh Antagonist
- orchiectomy
- Initial Flare
- Side effects

Mechanism of action of Anti-Androgen Therapies



Castration Resistant Disease (CRPC)

Definition/ Sequence of treatment?

- GnRh Agonist
- Abiraterone Acetate/ Enzalutamide
- Docetaxel/ Cabazitaxel
- Sipuleucel – T
- Radium - 223

Bone Mets. Consideration

* Palliative irradiation by:

- External XRT

- Radionuclides (strontium 89)
Lu-PSMA177

* SREs: Zoledronic acid/ Denosumab

BRCA alterations → olaparib

Case Presentation

* Male 72 yrs

PMH: Hypertension (mild), DJD

Cholecystectomy

h/o Dyspepsia, Anorexia, Frequency

(Resistant to symptomatic Therapies)

Endoscopy: Gastric mucosal inflammation (Gastritis?)

Biopsy: compatible with gastric mucosal associated lymphoid tissue (MALT) with extension to submucosa

Ph.EX: no LAP: no organomegaly

Primary work up:

Basic lab tests: near normal

LDH, B2 microglobulin, Ferritin: Normal

HIV, HCV, HbsAg: negative

CEA, CA19.9, PSA: normal

Patient was referred to cancer institute as a case of:

“Gastric Marginal zone Lymphoma of MALT type”

CT Scan: multiple lymphadenopathies along paraaortic
& pelvic chains. One liver cystic 2.5 cm focus
enlarged prostate, accessory spleen

Liver Dif. MRI: liver hemangioma

Recheck Lab Tests:

Phase reactants: normal

PSA = 55

CEA, CA19.9, α FP, CA242 = Normal

WBBS: 5 Points of bone mets. In ribs

Prostate Biopsy: Adenocarcinoma
Gleason 4+5=9

Treatment: Docetaxel/ ADT/ Metastron

5 yrs. Follow up



**Great Thanks
For your attendance**

F.Samiei MD