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REAL WORLD DATA REVIEW SHEDS LIGHT on MEDICAL TREATMENT

In the largest population-based retrospective study on combination therapies for high-risk prostate cancer, a team led by Grace Lu-Yao, PhD, MPH, professor and vice chair of medical oncology, found that more patients live longer if treated with prostate removal (prostatectomy) plus radiation therapy. The study was the first to show that removing the whole prostate and following up with radiation therapy is associated with greater overall survival than simply treating the prostate with radiation plus hormone-blocking therapy.

“Prostatectomy is an unpopular treatment,” notes Dr. Lu-Yao, whose research findings on cancer surveillance, screening and treatment for prostate cancer provide critical data for treatment decisions that improve patient care while reducing healthcare costs. “Our study showed that only six percent of men with high-risk cancer were treated with it. However, we found that 10 years after treatment, 89 percent of those who had prostate removal plus radiation were still alive—compared with 74 percent of those who received only radiation and hormone therapy.”

Yet there were trade-offs for the survival advantages: Men who received prostatectomy and radiotherapy had increased rates of erectile dysfunction and notably higher rates of urinary incontinence. “One of the strengths of population-based studies is that they reveal what happens in the real world, rather than the carefully controlled context of a clinical trial,” says Dr. Lu-Yao. ■



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