

FOCAL SALVAGE FOR PROSTATE CANCER RECURRENCES

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Purpose: Recurrent prostate cancer after previous radiotherapy can be treated with a salvage treatment of the entire prostate. Data from salvage prostatectomy, salvage cryotherapy or salvage brachytherapy series show high rates of severe (grade 3 or higher) toxicity, even up to 30%. This causes the urology community to be reluctant with regard to salvage treatments to the entire prostate.

Currently, Dynamic-Contrast Enhanced (DCE-) MRI allows localization of the recurrence within the prostate and thus enables focal salvage. We hypothesize severe toxicity rates will be significantly reduced by using focal salvage.

Methods: In 16 patients with biopsy proven local recurrent prostate cancer focal salvage was performed by I-125 brachytherapy. Recurrences were located by DCE-MRI and confirmed by a 12-core biopsy scheme. Prescription dose to the recurrence was 144Gy, GEC-ESTRO guidelines with regard to sparing of rectum and bladder were met. Toxicity was recorded using the Common Toxicity Criteria (CTC) and quality of life was measured using Rand-36, EORTC-C30 and-PR25.

Results: With a minimum follow-up of six months, grade 3 toxicity was observed in only 1 patient. Quality of life was not impaired.

Conclusion: Based on these preliminary data we conclude focal salvage seemed to be technically and clinically feasible, with an acceptable toxicity rate.