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PSA unresponsiveness in MPC

- 68 year old diagnosed with prostate cancer January 2016
- PSA > 100 mg/ml
- Gleason score – 4+5 = 9/10
- Multiple bone metastases present
- Bilateral orchidectomy done as first line treatment
- T. Bicalutamide was added

- After 4 months May 2016: PSA - 0.37 ng/mL
- July 2016 PSA – 26.3 ng/mL
- Second line – Fosfestrol 120 mg twice daily
- Zoledronic acid was added
- Received x 10 months
- PSA started rising again (70ng/mL)

- Bone scan – Increased intensity of previous lesions and appearance of new lesions
- CT chest and abdomen: no visceral lesions
- Changed treatment to Docetaxel
- However PSA response minimal after 4 cycles (78 ng/mL)

- Questions
- Role of combined androgen block in poorly differentiated prostate cancer
- Should we change chemotherapy in this setting
- Role of abiraterone in chemo unresponsive settings