ESMO Preceptorship Programme

Prostate Cancer – Lugano – 17 & 18 Oct 2019

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Treatment Sequencing in Prostate Cancer
DISCLOSURE OF INTEREST

- No disclosures
Case Presentation

85 year-old patient, no relevant co-morbidities, PS/ECOG 0-1

Urology Department on another institution:

**2009**
- March: PSA 11.5 ng/ml. April: DRE no suspicious nodules; Prostate Biopsy no tumour.

**2013**
- April: PSA 73 ng/ml
- May: Bone Scan no bone mets
- June: Prostate biopsy - ADC Gleason 7 (3+4) of the base and left inner 1/3 of the gland, 50%, 2/12 cylinders
  
  TURP + Bilateral Orquitectomy:
  
  Adenocarcinoma Gleason 7 (3+4), pT1c

**2014**
- Aug: Nadir PSA 1.37 ng/ml

**2015**
- Mar: PSA 2.2 ng/ml; Started Cyproterone Acetate 100mg/d, Nadir PSA 0.58 ng/ml
- Dec: ↑ Cyproterone Acetate to 200mg/d
Case Presentation

2017

○ **June:** Severe LUTS, PSA 18 ng/ml, obstructive Acute Kidney Injury due to tumoral invasion of the bladder trigone → TURP + Bilateral stenting:
  
  Adenocarcinoma Gleason 10 (5+5)

○ **July:** CT Scan – Iliopelvic adenopathies
  
  **Bone Scan** – No bone mets

  Started Nilutamide; Nadir PSA 1.38 ng/ml in Nov/17

2018

○ **Jan:** ↑ PSA 13 ng/ml

  Referral to **Medical Oncology**

○ **April:** 68Ga PSMA PET - 68Ga hypercaptation in prostate, seminal vesicles, bladder trigone, abdomino-pelvic nodes and bone (sternum, 3rd right rib, sacrum and iliac bone)

  → **Castration Resistant Prostate Cancer**
Case Presentation

Treatment Sequencing:

**April/2018**
- Enzalutamide

**July/2018**
- Docetaxel
  - June/18: Obstructive AKI: Stent Replacement
  - PSA 118 ng/ml

**Jan/2019**
- Cabazitaxel
  - Out/18: CT Scan: Stable disease
    Bone Scan: Bone DP
  - PSA 35 ng/ml
  - Mar/19: CT Scan: Lymph Nodes DP
  - PSA 180 ng/ml

**April/2019**
- Abiraterone Acetate + PDN
  - PSA 242 ng/ml

PSA 52 ng/ml
PSA 117 ng/ml
PSA 80 ng/ml
Case Presentation

July 2019: Disease Progression

- **Bone Scan**: Multiple bone mets in lumbar spine and pelvis
- **CT Scan**: Newly diagnosed mediastinal and hilar adenopathies
- **PSA**: 242 ng/ml (April 19) → 421 ng/ml (July 19) → 1145 ng/ml (Oct 19)

The patient still has a good PS…

**What would you consider doing next?**
Thank you for your attention!