

PCRIWeekly

Your source for what's new in the world of prostate cancer research



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With Radiation, Prostate Size Matters - MARK SCHOLZ, M.D.

Between 2004 and 2007, 214 men with prostates ranging in size from 11 to 148 cubic centimeters (cc) were treated at Yale University with intensity-modulated radiation therapy (IMRT) to a dose of 7500 rads. Serious urinary toxicity from the radiation was significantly more frequent in men whose prostate gland was larger than 50 cc.

The incidence of serious urinary toxicity doubled for every additional increase of 27 cc in additional prostate volume. The authors did not report on the incidence of sexual or rectal toxicity.

Researchers speculate that because this study showed a strong connection between prostate size and urinary side effects, that shrinking the prostate with anti-androgen medications such as Casodex might help reduce the risk of urinary side effects from radiation.

Read the abstract at: http://www.osti.gov/energycitations/product.biblio.jsp?osti_id=21491574

Urinary Retention After Seed Implants Depends on Several Factors

MARK SCHOLZ, M.D.

Doctors from the Netherlands evaluated 714 patients who had seed implantation between 2005 and 2008 to determine factors leading to a higher risk of urinary blockage after getting seed implants.

Overall, 8% of patients treated with seed implants in the study required a catheter to relieve urinary blockage. The study found three major factors predicted the risk of urinary blockage: prostate size, increase score on a common questionnaire called the IPSS, and the degree of protrusion of the prostate gland into the base of the urinary bladder.

Men with smaller prostates, lower IPSS scores and less bladder protrusion had less than a 5% risk of needing a catheter. When there was a combination of increased prostate size, high IPSS score and increased bladder protrusion, the risk of urinary retention was over 20%.

Takeaway Message: Multiple factors come into play when comparing options and selecting treatment(s) for prostate cancer. Men with large prostate glands and men with excessive urinary symptoms may be better off opting for surgery or primary hormone blockade, rather than radiation therapy.

Men with excessively large prostates whose hearts are set on radiation can elect to reduce prostate size with hormone blockade. The disadvantage to this is that they must endure the side effects of both hormone blockade and radiation therapy.

Read more at: [http://www.redjournal.org/article/S0360-3016\(10\)00818-7/abstract](http://www.redjournal.org/article/S0360-3016(10)00818-7/abstract)

What is PCRI Weekly?

PCRI Weekly is an e-newsletter brought to you by the Prostate Cancer Research Institute (PCRI), publisher of *Insights* magazine.

Each issue of PCRI Weekly provides a summary of a recent study, and a takeaway message from PCRI's executive director, Dr. Mark Scholz, explaining how this research can best be interpreted by a man with prostate cancer.

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Questions? Please contact PCRI Senior Writer-Editor Madhu Rajaraman at madhu@pcri.org.

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