

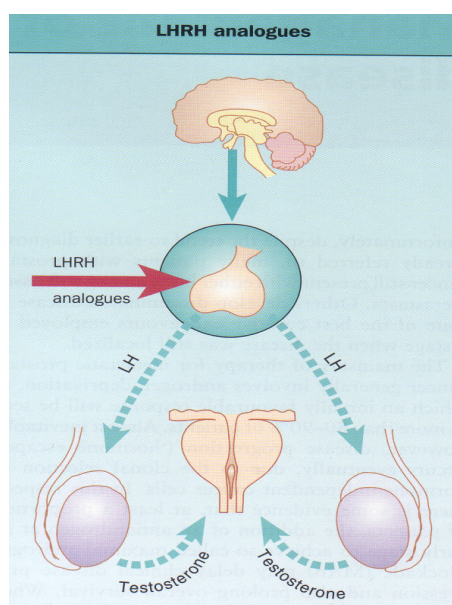
Androgen deprivation therapy for prostate cancer

In 1941 Huggins & Hodges described the androgen dependence of prostate cancer and in 1967 they were awarded the Nobel Prize in Medicine. There is up to a 90% response rate for even metastatic prostate cancer but it is never really a cure. The average duration of response is nearly 3 years but many men respond for many years. After that, androgen insensitive disease progression may still be extremely slow in some cases.

Androgen deprivation therapy historically involved surgical castration or administration of female hormones but now involves administration of depot injections lasting 1, 3, 4 or 6 months that act on the pituitary gland to stop testicular production of testosterone. This is used for treatment of metastatic disease, advanced local disease, neoadjuvant androgen deprivation therapy (prior to and concurrently with external beam radiotherapy to achieve a synergistic effect), after failed local treatment and for cytoreduction (size reduction) prior to brachytherapy.

Androgen deprivation therapy may relieve symptoms of bone pain, obstructive urinary symptoms, ureteric obstruction and spinal cord compression as well as delaying disease progression and increasing life expectancy.

Side effects of treatment are quite variable but not usually severe. Hot flushes are most common with lethargy, weight gain, body fat redistribution, muscle wasting, body hair loss, sexual dysfunction, and osteoporosis sometimes seen.



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