PSA nadir and outcome in 100 patients with pT3b prostate cancer.

Abstract

AIM: The prostate-specific antigen (PSA) nadir and long-term outcome in patients with pT3b prostate cancer were evaluated.

PATIENTS AND METHODS: From July 2000 to December 2012, in 100 patients (median age=62 years) with pT3b prostate cancer following radical retropubic prostatectomy (RRP) preoperative and pathological findings predictive of PSA nadir (≤0.2 vs. >0.2 ng/ml) were retrospectively evaluated; moreover, biochemical recurrence-free survival (bRFS), cancer specific survival (CSS) and overall survival (OS) in patients who underwent watchful waiting (16 cases), adjuvant (84 cases) and salvage (10 cases) therapy were recorded.

RESULTS: A PSA nadir >0.2 ng/ml was correlated with node involvement, Gleason score ≥9, cT2, PSA >20 ng/ml, positive surgical margins and total cancer percentage >20%. At a median follow-up of 90 months (range=10-155 months) bRFS, OS and CSS were 92%, 96% and 80%, respectively.

CONCLUSION: Radical retropubic prostatectomy combined with adjuvant and salvage treatments demonstrated a satisfactory outcome for pT3b prostate cancer.

KEYWORDS: Prostate cancer, pT3b PCa, pT3b PSA nadir, pT3b outcome

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