We congratulate Stephenson and colleagues on their excellent review of postoperative radiotherapy in prostate cancer [1]. They rightly point out that the controversy regarding adjuvant versus salvage radiotherapy cannot be resolved without prospective randomised controlled trials, and they highlight two ongoing trials: RADICALS (trial registration: ISRCTN40814031) [2] and RAVES (NCT00860652) [3]. RADICALS is being led by the UK Medical Research Council (MRC) Clinical Trials Unit and RAVES by the Trans-Tasman Radiation Oncology Groups (TROG). Another ongoing randomised trial is also addressing this question: GETUG-17 (NCT00667069), led by the French Groupe d’Etude des Tumeurs Uro-Génitales (GETUG).

The authors highlight the difficulty in adequately powering individual trials for clinically meaningful outcomes such as overall survival [1]. With this mind, the investigators of the ongoing RADICALS, RAVES, and GETUG-17 trials are discussing the development of an individual participant data (IPD) meta-analysis. Together, these three trials could provide up to 2000 high-risk patients randomised between adjuvant versus early salvage radiotherapy after radical prostatectomy. The meta-analysis would also aim to include data from any other relevant trials that are identified. The combined results from all relevant trials would increase the power to detect any impact of radiotherapy timing on overall survival.

The trials investigators will work with the Meta-analysis Group of the UK MRC Clinical Trials Unit to develop the protocol prospectively. This approach will allow outcomes, subgroups, and analyses to be defined in advance of any knowledge of the results of the individual trials and for the definitions to be applied consistently across the trials.

We encourage the international clinical community to support these three ongoing trials and thus increase the potential of the proposed meta-analysis to provide answers regarding the timing of radiotherapy that have so far eluded us.

Conflicts of interest: The authors have nothing to disclose.

References

