Optimizing the Management of PCa in Senior Adults: Call to Action

Matti Aapro
Multidisciplinary Oncology Institute
Genolier, Switzerland

Radical prostatectomy in senior adults with localized PCa
Steven Joniau, Leuven, Belgium

Radiation therapy in senior adults with localized PCa
Simon Hughes, London, United Kingdom

Management of advanced PCa in senior adults: the new therapeutic landscape
Matti Aapro, Genolier, Switzerland

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  ◆ Pfizer
  ◆ Sandoz

Proportion of population aged 60 years or older in 2002

Proportion of population aged 60 years or older in 2050
Life expectancy in senior adults: a large variability reflecting health status variability

*Observation reflecting Older Life Expectancy (years)

Dramatic decrease in curative therapy for localised PCa in men 75+, including high risk

High mortality due to PCa in men 70+ with Gleason 8-10 managed conservatively*

PCa management in senior adults: need for an accurate risk assessment!

Risk of non PCa-related death
- Health status +++
- Comorbidities
- Dependence
- Nutritional status

Risk of PCa-related death
- Aggressiveness of the tumor

*Negative or androgen deprivation therapy (bradedia) or deferred.
A call to action

- Older men have more aggressive tumours
- Older men have a significant risk of dying of PCa
- Only a minority with localized PCa receive curative therapy

Treatment decisions should be based on **health status, not chronological age**

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**Case study N°1**
Max, 75-year old man with localized PCa

- PCa characteristics
  - T2b
  - Gleason score 4+4
  - PSA 17.5 ng/mL
  - Positive biopsy cores: 3/10

- Co-morbidities
  - No urinary obstruction
  - Hypertension
  - Myocardial infarction in 2005

**How would you treat this patient?**
1. Radical prostatectomy
2. Radiation therapy
3. Hormonal therapy

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**Case study N°2**
John, 75-year old man with localized PCa
*Tennis champion in the 75+ group*

- PCa characteristics
  - T2b
  - Gleason score 4+4
  - PSA 17.5 ng/mL
  - Positive biopsy cores: 3/10

- Co-morbidities
  - No urinary obstruction
  - Hypertension
  - Myocardial infarction in 2005

**How would you treat this patient?**
1. Radical prostatectomy
2. Radiation therapy
3. Hormonal therapy

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Older men have a higher risk of dying due to PCa (SEER 1998-2007)

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Skosyrev E et al. Cancer 2012;118:3062-70

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Borger et al. Cancer 2012;118:8988-90