BACKGROUND

The history of prostate cancer is diagnostically relevant. Changes in treatment strategy over the past decade have led to an increase in the number of patients with metastatic prostate cancer (mCRPC). The objectives of this study were to document the characteristics and management of patients with mCRPC in routine clinical practice, independent of treatment used. The Prostate Cancer Registry: Do Patients With Metastatic Castration-Resistant Prostate Cancer (mCRPC) Differ According to Metastatic Status at Diagnosis?

METHODS

Study Design

The Prostate Cancer Registry is a real-world, multicentre registry of >1000 men with mCRPC. The registry was initiated in 2013 and completed in early 2016. Study duration will be 5 years, with a maximum follow-up of 10 years.

108 centres in 19 European countries are participating. Austria, Belgium, Denmark, France, Ireland, Luxembourg, Monaco, Norway, Portugal, Spain, Sweden, Switzerland, Turkey, and the Netherlands. Data from four centres except Switzerland were available for this analysis.

A range of clinical settings were represented, including oncology, urology, general medicine, small and large practices, in both public and private health-care systems.

Eligibility Criteria

- Men aged ≥18 years
- Presence of metastatic prostate cancer
- Prior prostatectomy
- Presence of castration resistance defined as disease progression despite castration levels ≥10 ng/mL, ≤1 ng/mL, or unknown, respectively
- Disease was confirmed by the presence of existing castration and/or appearance of new metastases.

OBJECTIVES

- To document the characteristics and management of patients with mCRPC in routine clinical practice, independent of treatment used.

- To assess the utility of the Prostate Cancer Registry as a predictive tool in real-world clinical practice.

RESULTS

- A total of 1323 consecutive men, enrolled between January 2015 and October 2015, were assessed (M0 = 526, M1 = 549, Mx = 248). Table 1 shows the patient characteristics at initial diagnosis.

- The analyses presented here were funded by Janssen EMEA; writing assistance was provided by Janine JEMME.

CONCLUSIONS

- In this real-life cohort of 1323 mCRPC patients, approximately half presented with metastatic disease at initial diagnosis of prostate cancer.

- A higher percentage of patients with M0 status at diagnosis presented with aggressive and extensive disease at mCRPC stage. At initial diagnosis, an initial prostate biopsy was not performed in 40.3% of M1 patients.

- Survival was shorter among patients with M1 status at initial diagnosis compared with M0 status.

Patient Characteristics at Study Entry (mCRPC)

- Compared with M0 patients at initial diagnosis, all M1 patients were slightly younger, with a higher proportion scoring ≥5 at initial diagnosis.

- Among M0 patients, a higher proportion had prostatectomy information compared with an initial diagnosis only, both surgery and radiation therapy.

- Initially present therapy varied significantly between M0 and M1.

- M0 patients had slightly higher V03% than M1 patients, with higher proportions of PSA≥40 at entry.

- PSA and alkaline phosphatase levels were higher in M1 than in M0 group.

- At study entry, a higher proportion of patients in the M1 group had ≥5 bone metastases compared with the M0 group (36.8% vs. 24.5%, p-value < 0.001).

- Analyses were also higher among M1 patients (Table 2).

- MCRPC (ClinicalTrials.gov identifier: NCT02236637).

- Data for patients with M1- and M0-status are described.

- All clinical data are subject to a validation process to ensure quality control.

- Data collected include only the data available per patient record; some patient data were not evaluable.

- Time from diagnosis to castration resistance for the M1 patient group is shown in Figure 1; in 50% of patients, this was less than 18 months.

- A score of 8-10 at initial diagnosis, and M1 patients also had a shorter time from diagnosis to CRPC, 12.5 (7-16).

- At initial diagnosis, M1 patients had a shorter time from diagnosis to CRPC, 11.8 (7-17).

- The median (range) time from diagnosis to CRPC for the M0 patient group is shown in Figure 1; in 50% of patients, this was less than 18 months.

- At initial diagnosis, M0 patients had a shorter time from diagnosis to CRPC, 10.2 (7-16).

- The median (range) time from diagnosis to castration resistance for the M1 patient group is shown in Figure 1; in 50% of patients, this was less than 18 months.