

# Multidisciplinary approach is key to successful treatment of aggressive prostate cancer

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A research team from the National Cancer Institute (NCI) designated Kimmel Cancer Center (KCC) at Jefferson has concluded – for the first time – that a multidisciplinary clinic approach to aggressive prostate cancer can improve survival in patients. The results from the 15-year study of the multidisciplinary clinic can be found in the November issue of *Journal of Oncology Practice*.

## Stats and Treatment

[Prostate cancer](#) remains the most common non-skin cancer and the second leading cause of cancer death in men in the United States. In fact, about 218,000 men will be diagnosed with the disease in 2010 with about 32,000 of them dying from it. Men are much more likely to be diagnosed with prostate cancer than women are to be diagnosed with breast cancer, making this a significant public health issue. Standard treatment of localized prostate cancer generally consists of active surveillance, surgery, radiotherapy, cryotherapy or other investigational methods. In deciding on a treatment regimen, patients must be informed of the risks and benefits of each treatment. All specialists must provide patients with up-to-date information on the options and be aware of the different influences that surround these men during the decision-making process.

## How It's Done at KCC

Since 1996, the KCC has offered newly diagnosed prostate cancer patients, and those needing additional consultation, the opportunity to be evaluated in a Multidisciplinary Genitourinary Cancer Clinic (MDGUCC). The clinic team works with patients and referring physicians to devise treatment plans that are tailored to the individual needs of each patient. The goals of this weekly clinic are to provide state-of-the-art oncology care and to serve as an educational resource for patients, their families and physicians in training.

"The primary goal of the MDGUCC approach to prostate cancer is to provide this balanced information in an open and interactive fashion, with all clinical specialists present at the same time," said Leonard Gomella, M.D., F.A.C.S., the Bernard W. Godwin, Jr. Professor of Prostate Cancer; associate director for Clinical Affairs at the KCC; Chair of the Department of Urology at Jefferson Medical College of Thomas Jefferson University; and lead investigator on this study. "Shared decision making through a real time, on site discussion with different specialists about the risks and benefits of each treatment can decrease distress and post-treatment regret."

## **The Study**

The research team took data from Jefferson's Oncology Data Services and compared it to a national prostate cancer outcomes database, the NCI Surveillance, Epidemiology and End Results (SEER) Program, for the year 2006 (ten years after the MDGUCC clinic started). Data on treatment changes in localized disease and related parameters were also assessed. Patient satisfaction was analyzed from a simple blinded, six-item questionnaire.

## **The Results**

The results from the 15-year clinic experience show that the multidisciplinary approach is key to successful treatment of aggressive, locally advanced stage three and four prostate cancer. In fact, 10-year data for these two stages of the disease show that KCC survival rates dramatically exceed SEER's nationwide survival for locally aggressive prostate cancer. During the past 15 years, there has been a shift towards robotically-assisted laparoscopic radical prostatectomy and a slight decrease in brachytherapy relative to external beam radiation therapy at the KCC. Ten-year survival data approaches 100 percent in stage one and two prostate cancer. Patient satisfaction with the KCC multidisciplinary approach is high as evidenced by the survey instruments. Ninety percent of patients reported the experience as 'good' or 'very good' and would recommend the MDGUCC.

"A high level of satisfaction with this patient-centered model is clearly seen. The multidisciplinary clinic approach to prostate cancer enhances outcomes through a coordinated approach to all therapeutic options," said Richard Pestell, M.D., Ph.D., M.B.B.S., F.R.A.C.P., F.A.C.P., director, Kimmel Cancer Center at Jefferson. "This clinic model serves as an educational tool for patients, their families and our trainees and supports clinical trial participation. The multidisciplinary approach to cancer is the hallmark of KCC programs."

"This study conclusively shows that a highly-coordinated, multidisciplinary approach to treating aggressive forms of prostate cancer is best," said Adam Dicker, M.D., Ph.D, Chair of the Department of Radiation Oncology at Jefferson Medical College of Thomas Jefferson University; Program Leader-Radiation Research and Translational Biology at the Kimmel Cancer Center; and co-investigator on this study. "A team of committed urologists, radiation oncologists, medical oncologists, radiologists, pathologists and other specialists, in partnership with dedicated coordinators, is essential for the success of this patient-centered program."

Provided by Thomas Jefferson University

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