Prostate cancer patients with cardiovascular disease were 52 per cent more likely to regret their treatment choices than men without problems with their heart or veins, according to a study published in the July issue of the urology journal *BJUI International*.

Research led by Harvard Medical School, USA, looked at 795 men with recurrent cancer in the Comprehensive Observational Multicenter Prostate Adenocarcinoma (COMPARE) registry.

"Treatment regret can have an adverse impact on a patient's overall outlook and has been associated with a poorer global quality of life" says lead author Dr Paul L Nguyen from the Department of Radiation Oncology at Harvard's Dana Farber Cancer Institute and Brigham and Women's Hospital.

"Understanding predictors of regret can help clinicians better counsel patients about their treatments so that later regret can be avoided."

Key findings of the study included:

- The researchers studied 410 men who had a prostatectomy (surgery), 237 who received external beam radiation therapy, 124 who received brachytherapy (internal radiation) and 24 who received primary androgen deprivation (hormone) therapy. These men experienced recurrence at a median of 5.5 years.
• Just under a third of the men (31 per cent) had cardiovascular issues such as heart attacks, congestive heart failure, angina, diabetes, stroke or circulation problems. They were slightly older than men without cardiovascular problems (67.6 versus 66.7 years) and were less likely to have undergone surgery as their primary therapy.

• Just under 15 per cent of the men reported regret and this was 52 per cent higher in men with cardiovascular problems than without.

• Men with cardiovascular problems were more likely to experience bowel problems than those without cardiovascular issues (44 per cent versus 36 per cent) and urinary problems (46 per cent versus 39 per cent). Men who had bowel problems reported 58 per cent higher levels of regret.

• Men diagnosed at a younger age were also more likely to regret their choice of treatment

"Most men with localised prostate cancer have multiple treatment options, each with their own set of potential risks and benefits" says Dr Nguyen. "While many patients are grateful for the chance to select their treatment, some may subsequently regret their treatment if the outcomes after therapy do not meet their expectations.

"Our study found that, among men with recurrent prostate cancer, those with cardiovascular health issues were 52 per cent more likely to regret their treatment choice than men without cardiovascular problems. It highlights the growing importance of considering other health issues such as cardiovascular disease when counseling patients about prostate cancer treatment options.

"The clinical implication of the present study is that it provides another rationale for patients with cardiovascular problems and prostate cancer to consider active surveillance, which aims to avoid or delay unnecessary
treatment in men with less aggressive cancers. This is because the potential benefit of treatment is relatively small for men with a short life expectancy and the potential for regret is significantly higher.

"Our research also suggests that prostate cancer patients with cardiovascular issues should be alerted to the potential increased risk of post-treatment toxicity, such as bowel problems, as this may help to reduce treatment regret if their cancer returns."


Provided by Wiley

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