

Active surveillance cost-effective for prostate cancer

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(HealthDay) -- In a theoretical cohort of 120,000 men, selecting active surveillance for prostate cancer results in considerable cost savings at five and 10 years of follow-up, compared with immediate treatment, according to a study published in the July issue of *Cancer*.

To examine the [health care costs](#) of an active surveillance paradigm for [prostate cancer](#), Kirk A. Keegan, M.D., from Vanderbilt University in Nashville, Tenn., and colleagues constructed a theoretical cohort of 120,000 men selecting active surveillance. A Markov model was used to simulate the number of men remaining on active surveillance and those exiting to each of five treatments over five years. Estimated total costs of immediate treatment and delayed treatment after five and 10 years of

active surveillance were compared.

The researchers found that active surveillance with five years of follow-up and subsequent delayed treatment resulted in average cost savings of \$16,042 per patient relative to initial [curative treatment](#); this represented a saving of \$1.9 billion dollars to the cohort. In the ninth year of follow-up the strict costs of active surveillance exceeded those of [brachytherapy](#). Compared with [biopsy](#) every other year, a yearly biopsy increased costs by 22 percent within the active surveillance cohort. Active surveillance still resulted in a cost benefit at 10 years of follow-up; however, the per patient savings were decreased by 38 percent (to \$9,944) relative to initial treatment.

"As the costs of health care rise, through the utilization of progressively more expensive technologies, the relative clinical and economic benefits of an active surveillance paradigm for the treatment of low-risk prostate cancer will likely become increasingly attractive," the authors write.

More information: [Abstract](#)
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