

# Active surveillance can reduce suffering among men with prostate cancer

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With active surveillance many men with prostate cancer could dispense with radiation treatment and surgery, and thus avoid adverse effects such as incontinence and impotence. This is the outcome of a study of almost 1,000 men diagnosed with prostate cancer conducted at Sahlgrenska Academy, University of Gothenburg, Sweden.

The introduction of PSA tests, which are used to screen for prostate cancer, offers early tumour detection, reducing [mortality rates](#). At the same time, prostate cancer is in many cases a slow-growing form of cancer. Many men may never develop symptoms during their lifetime, which means that they are being treated unnecessarily – and may be forced to live with serious side-effects such as [bowel disorders](#), [urinary incontinence](#) and impotence.

In a study involving 968 men, researchers at Sahlgrenska Academy, University of Gothenburg, found that many prostate cancer sufferers could dispense with treatment and avoid side-effects if they instead opted to undergo active surveillance. This study is a substudy within the major [prostate cancer screening](#) trial that has been running in Gothenburg since 1995 under the direction of Jonas Hugosson of Sahlgrenska Academy, University of Gothenburg.

"Active surveillance means monitoring development of the tumour through regular [PSA-tests](#) and [prostate biopsies](#). If the tumour shows signs of growth or becomes more aggressive, then the next stage is surgery or [radiation treatment](#). Many men can entirely avoid or at any

event postpone the adverse effects associated with curative treatment," says Rebecka Arnsrud Godtman, a doctoral student supervised by Jonas Hugosson.

Of the 968 men with prostate cancer studied, around half (46 per cent) opted for active surveillance as the treatment strategy. The majority of the men had low-risk tumours, but there were also men with intermediate or high-risk tumours.

The results show that:

- Of the 440 men who chose active surveillance, 60 died, but only one death was the result of prostate cancer.
- None of the men diagnosed with low-risk tumours developed metastatic [prostate cancer](#) or died from the cancer.
- 63 per cent of the men studied continued with active surveillance for the duration of the follow-up period (up to 15 years).
- 37 per cent of those who chose active surveillance discontinued this in favour of treatment (surgery, radiation treatment or hormone therapy). The main reason was that surveillance revealed that the tumour had grown.
- Only four men discontinued active surveillance on the grounds that it made them feel anxious.

Active surveillance is more risky for men with intermediate or high-risk tumours. The risk to men with intermediate or high-risk tumours of developing incurable and/or terminal cancer was four times greater than that to men with low-risk tumours.

"Overall, our results show that active surveillance has the potential to reduce overtreatment, enabling more men to avoid side-effects. A large proportion of the tumours detected through PSA screening are low-risk

tumours, and older men in particular could dispense with treatment and instead be monitored safely with active surveillance," says Rebecka Arnsrud Godtman.

Provided by University of Gothenburg

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