

Radioligand therapy slows advanced PSMA+ prostate cancer

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(HealthDay)—Lutetium-177 (^{177}Lu)-prostate-specific membrane antigen

(PSMA)-617 radioligand therapy added to standard care is beneficial for patients with advanced PSMA-positive metastatic castration-resistant prostate cancer, according to a study published online June 23 in the *New England Journal of Medicine*.

Oliver Sartor, M.D., from Tulane University in New Orleans, and colleagues conducted an international, phase 3 trial involving [patients](#) with metastatic castration-resistant prostate cancer previously treated with at least one androgen receptor-pathway inhibitor and one or two taxane regimens. A total of 831 patients were randomly assigned to receive ^{177}Lu -PSMA-617 plus protocol-permitted standard care, which excluded chemotherapy, immunotherapy, radium-223, and investigational drugs, or standard care alone. Patients were followed for a median of 20.9 months.

The researchers found that compared with standard care, ^{177}Lu -PSMA-617 plus standard care significantly prolonged imaging-based [progression-free survival](#) (median, 8.7 versus 3.4 months; hazard ratio for progression or death, 0.40) and overall survival (median, 15.3 versus 11.3 months; hazard ratio for death, 0.62). ^{177}Lu -PSMA-617 was significantly favored for all key secondary end points. A higher incidence of adverse events of grade 3 or above was seen with versus without ^{177}Lu -PSMA-617 (52.7 versus 38.0 percent), while quality of life was not adversely affected.

"The trial aimed to assess the efficacy of ^{177}Lu -PSMA-617 plus [standard-care](#) therapies that could safely be combined in order to provide physicians with a broad permitted range of concomitant treatment options," the authors write.

Several authors disclosed ties to biopharmaceutical companies, including Endocyte, which funded the study.

More information: [Abstract/Full Text \(subscription or payment may be required\)](#)

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