Researchers discuss metastatic castration resistant prostate cancer

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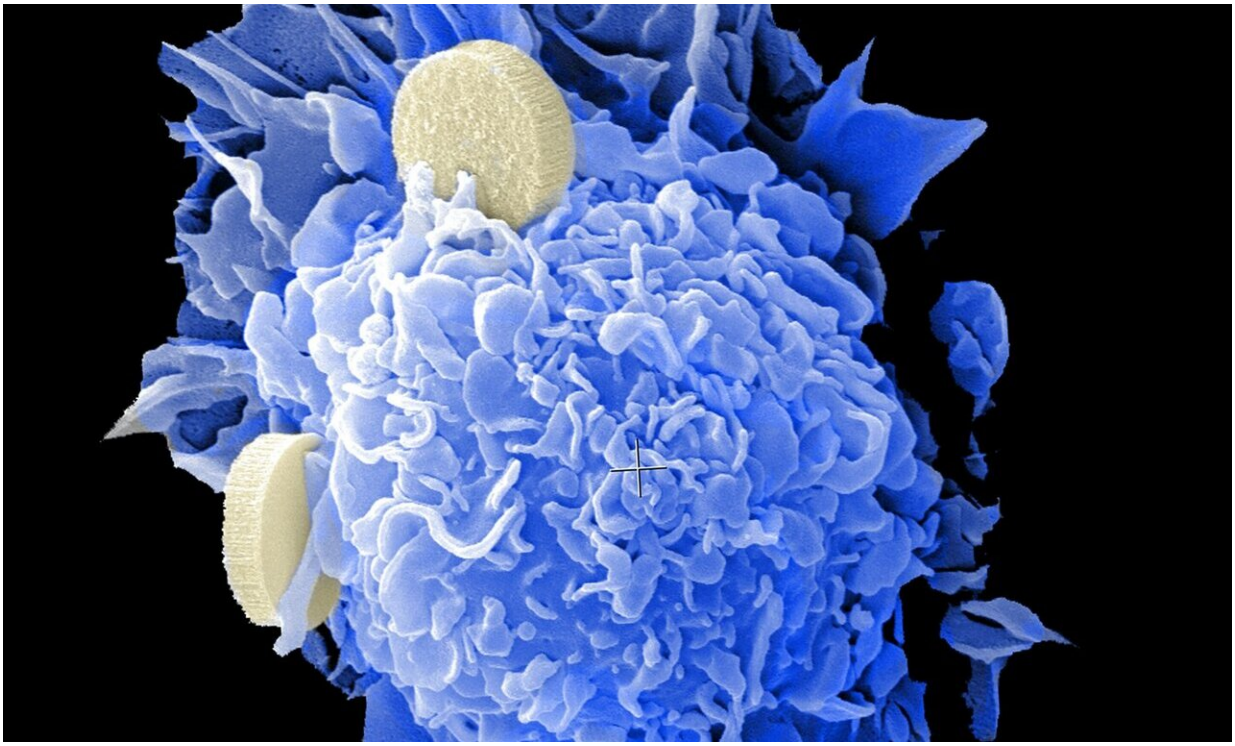

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A new editorial paper titled "Using early on-treatment circulating tumor DNA measurements as response assessment in metastatic castration resistant prostate cancer" has been published in *Oncotarget*.

In this new editorial, researchers S.H. Tolmeijer, E. Boerrigter, N.P. Van

Erp, and Niven Mehra from Radboud University Medical Center discuss metastatic castration resistant prostate cancer (mCRPC). mCRPC is lethal, but the number of life-prolonging systemic treatments available for mCRPC has expanded over the years. Real-world data suggest that the most common first-line therapy for mCRPC was treatment with an androgen receptor pathway inhibitor (ARPI), either enzalutamide or abiraterone, although more patients nowadays will receive ARPI and/or docetaxel already for hormone sensitive prostate cancer (HSPC).

Recent clinical trial data suggests the potential benefit of adding poly-ADP ribose polymerase inhibitors (PARPi) or lutetium-117-prostate-specific membrane antigen (LuPSMA) to first-line mCRPC treatment with ARPIs in a subset of patients. As these different drug classes are associated with different toxicity profiles and significant costs, it is highly important to identify which patients experience durable benefit from monotherapy ARPI and which patients would potentially benefit from treatment intensification or therapy switch.

"Research by Tolmeijer et al. 2023, published in *Clinical Cancer Research*, suggests that the detection of circulating tumor DNA (ctDNA) at baseline and 4-weeks after treatment initiation can predict response durability to first-line ARPIs," the researchers state.

More information: S.H. Tolmeijer et al, Using early on-treatment circulating tumor DNA measurements as response assessment in metastatic castration resistant prostate cancer, *Oncotarget* (2024). DOI: 10.18632/oncotarget.28599

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