

Decision regret uncommon after radical prostatectomy, IMRT

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patients expressed DR for treatment; compared to radiotherapy, there was more regret for the RP component of treatment (16.9 versus 4.2 percent; $P = 0.01$). For androgen deprivation, DR was 14.3 percent. Regrets for surgery were due to toxicity, not being adequately informed about alternatives such as radiotherapy, positive margins, and costs of surgery (83, 33, 25, and 8 percent, respectively). In the three radiotherapy-regretful and four ADT-regretful patients, toxicity caused DR. For salvage versus adjuvant approaches, patients were twice as regretful overall and of surgery (both 19.6 versus 10.0 percent).

"Decision regret after RP and post-prostatectomy IG-IMRT is uncommon, although [patients](#) regret RP more than postoperative IG-IMRT," the authors write.

More information: [Abstract](#)

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(HealthDay)—For patients with prostate cancer treated with radical prostatectomy (RP) and post-prostatectomy image-guided intensity-modulated radiotherapy (IG-IMRT), decision regret (DR) is uncommon and occurs more often after RP, according to research published online Aug. 16 in the *Journal of Medical Imaging and Radiation Oncology*.

Thomas P. Shakespeare, M.B.B.S., from the Mid North Coast Cancer Institute in Coffs Harbour, Australia, and colleagues surveyed 83 patients treated with RP and IG-IMRT with minimum follow-up of five years. A validated questionnaire was used to determine whether men had DR about treatment.

The researchers found that the median follow-up was 78 months post-IMRT. In 28, 72, and 48 percent of patients, adjuvant IG-IMRT, salvage, and [androgen deprivation](#) therapy (ADT) were used, respectively. Seventy percent of patients remained disease-free. A total of 16.9 percent of

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