

Management and survival in advanced prostate cancer in Nairobi.

Abstract:

To evaluate the management and survival of patients with advanced prostate cancer in this locality. DESIGN: A prospective case study. SETTING: Kenyatta National Referral Hospital and the Nairobi and Mater Hospitals. PATIENTS: Fifty nine patients with advanced cancer of prostate (extra prostatic locally advanced and metastatic cancer). RESULTS: Transperineal trucut needle biopsies of the prostate revealed 15 patients (25.42%) had poorly differentiated cancers with Gleasons scores greater than 7. Fifteen patients (25.42%) had moderately differentiated cancers with Gleason scores of 6; and twenty nine other patients (49.2%) had well differentiated cancers with Gleason scores of 4 and below. Surgical castration was effected on 15 patients four of whom also had 50 mg of oral bicalutamide (casodex) daily. Thirty six patients were treated with subcutaneous goserelin (zoladex) depot 3.6 mg every 28 days. Ten of these patients also had 50 mg oral casodex daily in addition to the zoladex. Three patients in this group also had external radiotherapy for severe bone pains. Only eight patients were treated with oral diethylstilboestrol 3 mg daily. All the 15 patients with undifferentiated cancers died within 12 months. Of the 22 patients surviving at 48 months irrespective of the method of treatment, 20 of them had well differentiated cancers with Gleasons scores of 4 or less. CONCLUSION: Survival in the undifferentiated and poorly differentiated prostate cancer Gleasons grades 4 and 5 with a score of over 7 is poor irrespective of the mode of treatment as all the patients in this group were dead within 12 months of diagnosis. Twenty patients (90.90%) of the surviving patients at 48 months had well differentiated cancers Gleasons grades 1 and 2 with scores of 4 or less indicating better prognosis for these tumours which are known to be slow growing with a much longer tumour doubling time.