

Treatment combinations among prostate cancer patients diagnosed in the Loddon Mallee Region

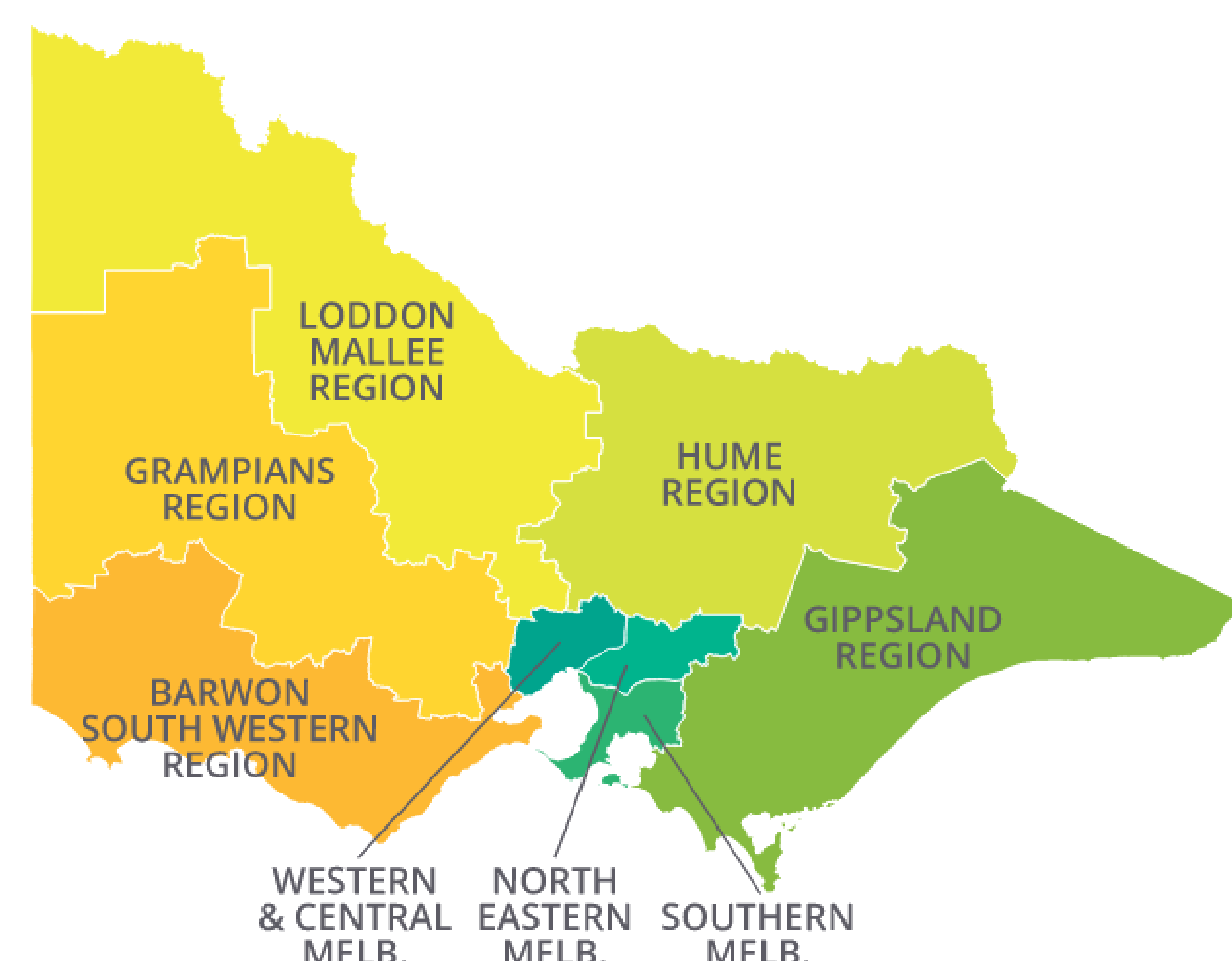
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Aims:

The most commonly diagnosed tumour type in Victoria, including the Loddon Mallee Region (LMR), is prostate cancer [1]. This study is aimed to determine the extent to which men diagnosed with localised and advanced prostate cancer in the LMR received specific treatment combinations.

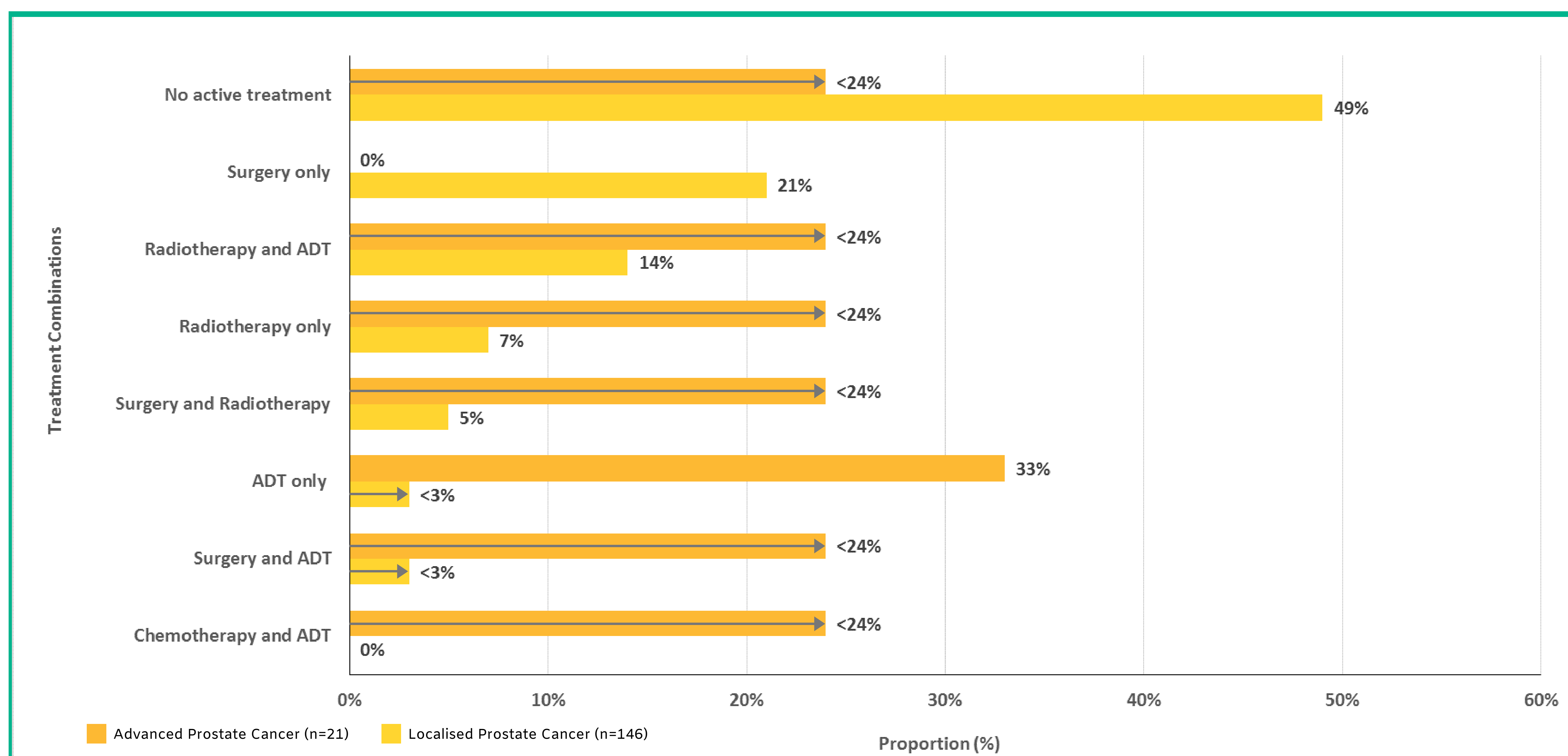
Method:

The cohort comprises of all patients with a Victorian Cancer Registry (VCR) diagnosis of prostate cancer during 2016 at six LMR health services. A retrospective audit of treatment combinations was conducted using hospital data sources, including paper and electronic medical records. Percentages corresponding to patient numbers <5 were censored for privacy reasons.



Results:

Among the 146 localised prostate cancer patients, the two most common active treatment combinations were surgery only (21%) and Radiotherapy [RT] with androgen deprivation therapy [ADT] (14%). The two most common treatment combinations among the 21 advanced prostate cancer patients were ADT only (33%) and RT with ADT (<24%).



No active treatment - Advanced Prostate Cancer (potentially palliation)
 No active treatment - Localised Prostate Cancer (potentially watchful waiting or active surveillance)

Conclusion:

In the Loddon Mallee Region, localised prostate cancer patients were mainly treated surgically only while advanced prostate cancer patients were mainly treated with ADT only.

Untreated patients may have been managed through watchful waiting, active surveillance or palliation. Due to different disease stages and treatment patterns, the supportive care needs of localised and advanced cancer patients are likely to differ.