

DR. CHARLES METZGER'S SATURDAY EVENING NEWSLETTER

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“The Efficacy and Safety of Metastasis-Directed Therapy in Patients with Prostate Cancer: A Systematic Review & Meta-Analysis of Prospective Studies-Beyond the Abstract.

Marcin Miszczyk, et. Al.

**[https://www.urotoday.com/recent-abstracts/urologic-oncology/prostate-cancer/148419-the-
efficacy-and-safety-of-metastasis-directed-therapy-in-patients-with-prostate-cancer-a-
systematic-review-and-meta-analysis-of-prospective-studies-beyond-the-abstract.html](https://www.urotoday.com/recent-abstracts/urologic-oncology/prostate-cancer/148419-the-efficacy-and-safety-of-metastasis-directed-therapy-in-patients-with-prostate-cancer-a-systematic-review-and-meta-analysis-of-prospective-studies-beyond-the-abstract.html)**

Good evening!

Metastasis Directed Therapy is used with all kinds of cancers. It can be done with surgery and / or radiation delivered by external beam (IMRT, SBRT) or via Theranostics. Sometimes chemotherapy or hormone blockers are added. The objective is to stop cancer from spreading by either taking out what is “feeding” the cancer and / or preventing the Mets from creating more Mets. Hormone therapies have side effects that vary depending on the patient and the drug. Chemotherapy has side effects too.

A researcher in Vienna, Austria named Marcin Miszczyk, led a team of nineteen other researchers from all over the world to determine if prior published research answers the question “does Metastasis Directed Therapy stop the progression of prostate cancer and minimize side effects both with and without hormone therapies”? Marcin Miszczyk and his researchers looked at 22 studies from all over the world encompassing 1137 patients.

This study of the studies is exciting. Zapping Mets with SBRT and without ADT stops progression. However, some studies indicate patients did better overall with ADT, those are patients with hormone sensitive cancer. Many prostate cancer patients do not benefit from hormone therapy. The twenty-two studies Miszczyk reviewed were prior to the use of artificial intelligence (Artera AI). With AI, those that won't benefit from hormone therapy can now be excluded from it.

One cautionary note from the researchers. While Metastasis Directed Therapy can “delay” the need for hormone therapy in selected patents patients whose Mets appears more than six months after the diagnosis of their prostate cancer, the studies still do not prove that MDT improves overall survival let's say beyond 2 years from MDT treatments. The researchers

advocate new, randomized (controlled) studies to see if combining ADT with MDT improves survival.

The takeaway? This is one example of personalized therapies working well for patients. Further refinements such as PET-PSMA guided SBRT and the use of AI to determine who will benefit from ADT therapy will prolong life, reduce metastatic disease and reduce side effects and costs.

Have a great rest of the weekend,

CKM