OVER THE NEXT DECADE SEEDS WILL REMAIN THE OPTIMAL BRACHYTHERAPY TREATMENT FOR EARLY PROSTATE CANCER



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DEFINITION OF WHAT

OPTIMAL BRACHYTHERAPY TREATMENT MEANS!!!!

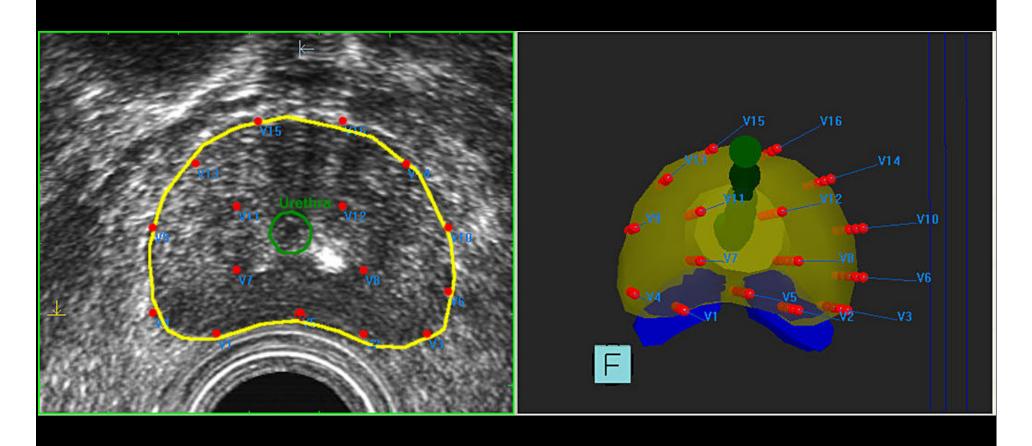
OPTIMAL TREATMENT????



DIFFERENT ANSWERS!!!!!

- LEARNING CURVE?
- LOCAL CONTROL?
- LESSER TOXICITY?
- ACCESIBILITY?
- LESS COST PER YEAR OF TREATMENTS
- INDIVIDUAL BIAS?

LEARNING CURVE NO DIFFERENT



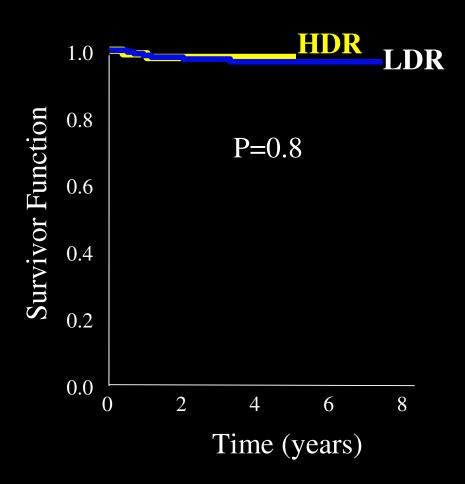
2D 3D

- LEARNING CURVE?
- LOCAL CONTROL?
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- LESS COST PER YEAR OF TREATMENTS
- INDIVIDUAL BIAS?
 - ABSENCE OF RANDOMIZED TRIALS

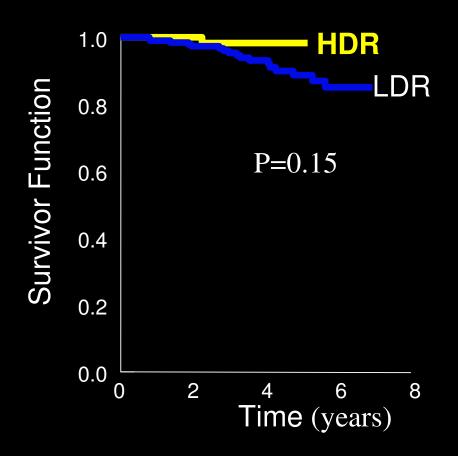
METHODS

- 454 treated with brachytherapy at William Beaumont or CET from 1993-2004
 - -248 HDR
 - 206 LDR
- HDR
 - WBH- 38 Gy in 4 fractions
 - CET- 42 Gy in 6 fractions over two implants 1 week apart
- LDR- 120 Gy with Palladium. All WBH
- Biochemical Failure- Phoenix Definition

BF FOR HDR VS. LDR



OS for HDR vs. LDR



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CHRONIC TOXICITY ACTUARIAL RATES

| | | Pts (n) | 1 year | 2 year | 3 year | p value |
|-------------|-----|---------|--------|-------------|--------|---------|
| Grade ≥1 | HDR | 169 | 25.2 | 45.6 | 49.6 | |
| | LDR | 161 | 47.7 | 55.5 | 60.4 | 0.002 |
| Grade ≥2 | HDR | 169 | 15.6 | 29.8 | 34.2 | |
| | LDR | 161 | 20 | 21.2 | 23 | 0.3 |
| Grade ≥3 | HDR | 169 | 2.4 | 5.7 | 5.7 | |
| | LDR | 161 | 6.3 | 7 | 7.7 | 0.4 |

CHRONIC G-U TOXICITY FOR DIFFERENT INSTITUTIONS

| Autho | | # Pts | F/U | Urethra | Grade | Grade | Impotenc |
|----------|-----|-------|-----|----------|-------|-------|----------|
| r | | | Mo. | Strictur | 2 | 4 | e |
| | | | | e | | | |
| Beyer | LDR | 489 | 32 | 2% | 20% | 0% | 25% |
| Blasko | LDR | 196 | 40 | 3% | 29% | 0% | 20-50% |
| Zelefsky | LDR | 145 | 24 | 12% | 31% | 0% | 53% |
| Zelefsky | LDR | 248 | 48 | 10% | 41% | 0.4% | 43% |
| Wallner | LDR | 65 | 24 | NS | 34% | 0% | 25% |
| Grills | LDR | 84 | 29 | 3% | 23% | 0% | 45% |
| Grills | HDR | 65 | 29 | 8% | 21% | 0% | 16% |
| Martinez | LDR | 127 | 37 | 1% | 26% | 0% | 41% |
| Martinez | HDR | 169 | 35 | 3.5% | 23% | 0% | 21% |

- LEARNING CURVE?
- LOCAL CONTROL?
- LESSER TOXICITY?

ACCESIBILITY?

- LESS COST PER YEAR OF TREATMENTS
- INDIVIDUAL BIAS?

SAME

- LEARNING CURVE?
- LOCAL CONTROL?
- LESSER TOXICITY?
- ACCESIBILITY?
- LESS COST PER YEAR OF TREATMENTS
- INDIVIDUAL BIAS?
 - FAVORS HDR WITH 2 OR 1 FRACTION

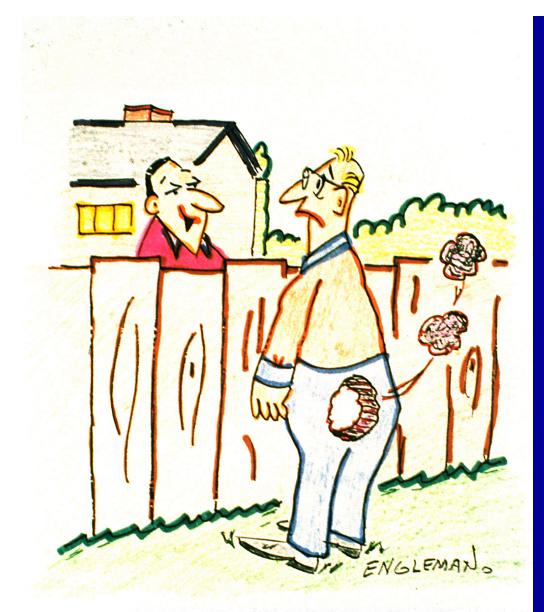
USA HEALTH CARE REFORM

•IS POLITICALLY DRIVEN BY OUTCOMES AND COST.

IT IS REALISTICALLY DRIVEN BY COST, COST, COST AND COST

- LESS DRIVEN BY OUTCOMES

- LEARNING CURVE?
- LOCAL CONTROL?
- LESSER TOXICITY?
- ACCESIBILITY?
- LESS COST PER YEAR OF TREATMENTS
- INDIVIDUAL BIAS?
 - FAVORS FOR
 - LDR: Drs GRIMM & HOSKIN
 - HDR: Drs MORTON & MARTINEZ



"ANY SIDE EFFECTS FROM YOUR PROSTATE RADIATION TREATMENTS?"

SEEDS OPTIMAL TREATMENT?

BECAUSE
HEALTH CARE
REFORM, IT
WILL NOT BE
IN THE USA