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THE CURRENT ARTICLE CRITICALLY REFLECTS ON THE VARIOUS THERAPEUTIC OPTIONS IN THE MANAGEMENT OF METASTATIC PROSTATE CANCER

Abstract: Despite improvements in the early detection, diagnostic and therapy, prostate cancer (CAP) is a leading cause of illness and death among men in Western Europe and the United States. Due to prostate-specific antigen (PSA) screening, the majority of patients present with localised disease and are candidates for definitive local therapy. Despite undergoing radical prostatectomy or radiation therapy for localised disease, the actuarial 10-year likelihood of recurrence for these patients is approximately 25%.

Surgical or medical androgen deprivation therapy represents the standard therapeutic approach in the management of metastatic prostate cancer. Unfortunately, androgen ablation therapy is palliative, with a median duration of response of 12-24 months. Just because of that, the therapy choice should be strongly determined by therapy influence on the quality of life.

Key words: The current article critically reflects on the various therapeutic options in the management of metastatic prostate cancer.