

Sanz Miguelañez J.L.¹, Gutierrez Gutierrez E.¹, Leal Hernández L.F.¹, Pozo Mengual B.¹, Alberto Bravo M.J.¹, Baudet León J.², Chicharro Almarza G.J.¹, Barriga Guijo R.M.¹, Rodriguez Cabero M.¹, Marcos Marín D.¹, Hernández Andrés I.¹

¹Hospital Universitario de Guadalajara, Dept. of Urology, Guadalajara, Spain, ²Hospital Nuestra Señora del Prado, Dept. of Urology, Talavera de la Reina, Spain

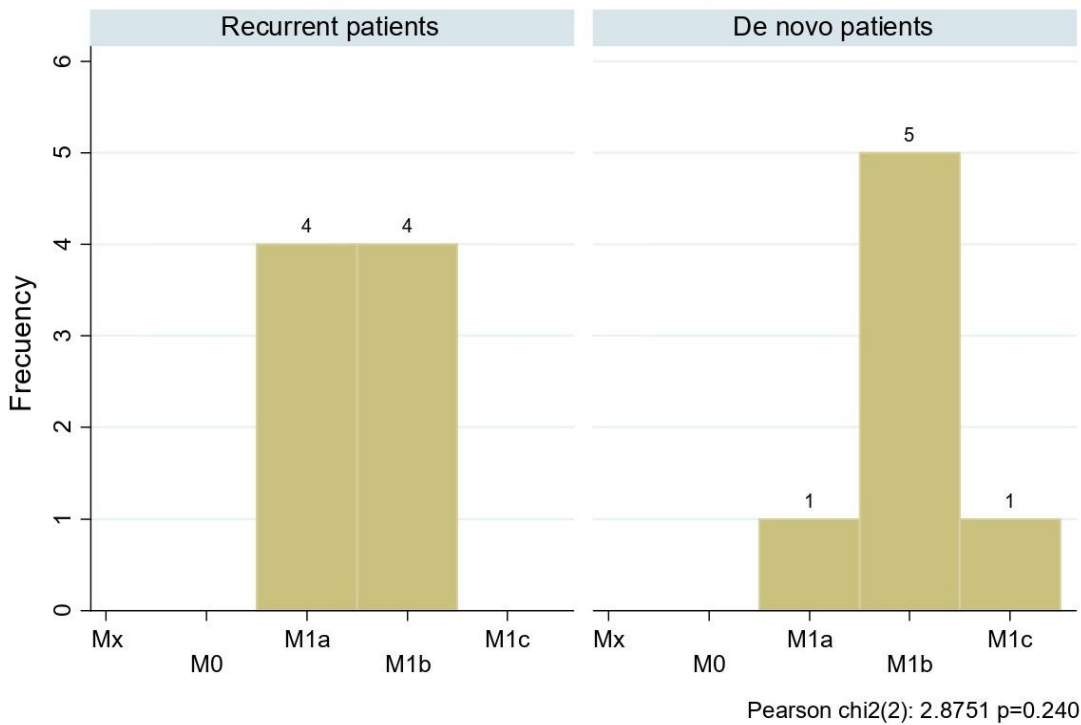
Introduction & Objectives: In the placebo controlled trial TITAN, apalutamide added to continuous androgen deprivation therapy (ADT) improved radiographic progression-free survival and overall survival in patients with metastatic castration sensitive prostate cancer (mHSPC). The objective of this analysis was to assess the initial PSA response in this set of patients.

Materials & Methods: Prospective observational cohort study in patients with mHSPC treated with apalutamide added to continuous ADT at Hospital Universitario de Guadalajara from 05/31/2020 to 05/31/2022.

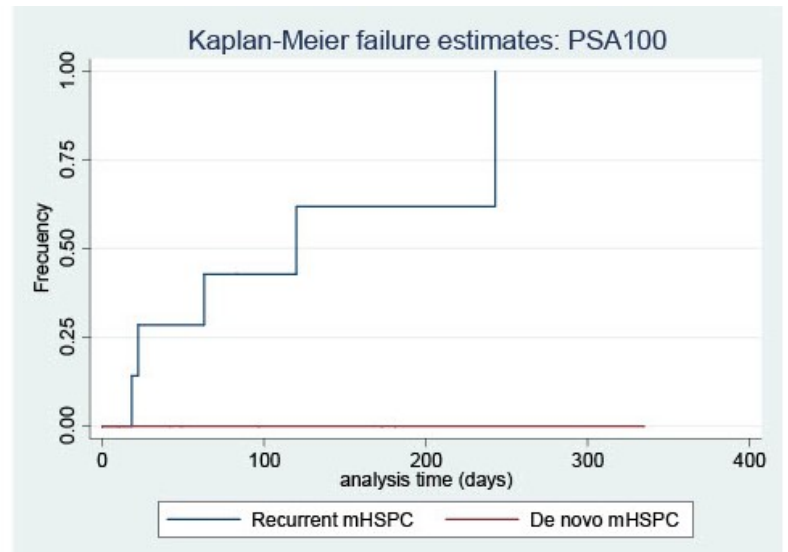
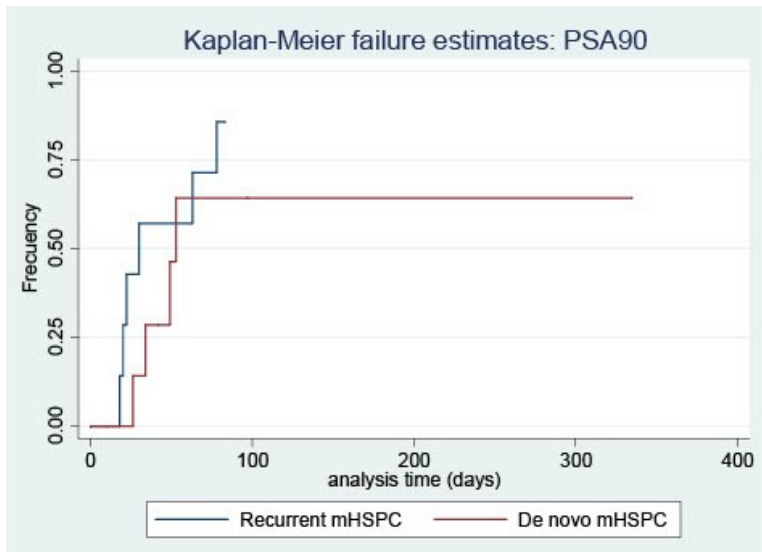
We performed a Cox regression analysis based on variables PSA90, defined as a decrease in the PSA value of at least 90% compared to the baseline and PSA100 defined as complete biochemical response. Kaplan Meier curves were used to represent PSA90 and PSA100 incidence function.

Results: A total of 15 patients received apalutamide in combination with ADT to treat mHSPC, 7 cases (46.7%) were diagnosed de novo and 8 cases (53.3%) were recurrent after treatment for localized prostate cancer. Recurrent patients were low volumen based on new generation imaging while de novo patients were high volumen in 85.71% (6/7) with conventional imaging.

M stage at treatment with apalutamide



With a median of 154 days (iq 277) of follow up, the percentage of patients with a PSA reduction of at least 90% was 75% (6/8) in the recurrent group and 57,14% (4/7) in the de novo group (HR 1,86 95% confidence interval 0.52-6.67, p=0.34). Complete biochemical response was achieved by 62.5% (5/8) of recurrent patients but de novo patients failed to get this response (Pearson chi2=6.56 p=0.01).



Conclusions: Apalutamide with ADT gets a quick and deep decline of PSA levels from baseline in patients with mHSPC. This decline is especially intense in recurrent low volume patients, who get a complete biochemical response in 62.5% of cases.