

Non-Metastatic CRPC, Talking to Your Patients about Treatment

HELPING PATIENTS NAVIGATE nmCRPC

For patients and their loved ones, prostate cancer is a complex and often confusing disease to navigate. With so many advancements and effective treatment options available, prostate cancer has become one of the most decision-intensive diseases. Men face multiple crossroads and decisions that must be made at varying stages of their prostate cancer journey.

A urologist's role is expanding in the treatment and care of non-metastatic castration-resistant prostate cancer (nmCRPC). Patients often look to their urologist to become true overarching caregivers throughout their prostate cancer journey. It is essential patients and physicians come together to map out a treatment plan that works well for a man's overall health and quality of life. Which treatment to use, and when, should be based on informed, shared decisions between you, your patient and their loved ones. There is also value in talking to your patients about their lifestyle, finances, support system and emotional wellbeing as they can impact their treatment pathway.

HORMONE THERAPY FOR ASYMPTOMATIC nmCRPC

The FDA has approved therapeutic agents for patients with nmCRPC. These patients are typically defined as those with a rising PSA and no radiologic evidence of metastatic prostate cancer. The Clinical Guidelines of the American Urological Association (AUA) have been updated to reflect these new treatment options and they may offer hope for men living with nmCRPC. They may also improve the quality and length of life for men with advanced prostate cancer.

CLINICAL TREATMENT PATHWAYS FOR nmCRPC

Informed, shared decisions between the physician, patient and their loved ones may take some time. Although patients may have gone through prior treatment, it may be valuable to review how prostate cancer may stop growing with androgen deprivation treatment (ADT) and explain how the cancer cells can "outsmart" ADT and become "castration-resistant."

GUIDELINE EXCERPT

Non-metastatic CRPC



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STANDARD

Apalutamide or enzalutamide with continued androgen deprivation for patients at high risk for developing metastatic disease (Evidence Level Grade A)

RECOMMENDATION

Observation with continued androgen deprivation for patients at high risk for developing metastatic disease (Evidence Level Grade C)

RECOMMENDATION AGAINST

Systemic chemotherapy or immunotherapy outside the context of a clinical trial (Evidence Level Grade C)

Bone Health

RECOMMENDATION

Preventative treatment (e.g. supplemental calcium, vitamin D) for fractures and skeletal related events (Evidence Level Grade C)

OPTION

Choose either denosumab or zoledronic acid when selecting a preventative treatment for skeletal related events for mCRPC patients with bony metastases (Evidence Level Grade C)

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Explaining the treatments available may be overwhelming to patients. Reviewing information in plain language is important. A summary of treatment options for nmCRPC may be found in the chart included as well as in the patient fact sheet called *Prostate Cancer: Talking to Your Doctor about nmCRPC Treatment*.

TREATMENT	CONSIDERATIONS
Androgen Deprivation Therapy (ADT) is hormone therapy given to stop or slow the production or action of male hormones, also known as androgens. Testosterone is the main androgen.	ADT is generally given by injection, and less commonly with orchiectomy. Several newer types of hormone therapy, such as apalutamide or enzalutamide, may also be used to treat advanced prostate cancer. In these cases, they may be given in combination with ADT.
Apalutamide is a medication for hormone therapy that may be taken by mouth as a pill. It is an anti-androgen used to slow the way prostate cancer develops and spreads.	Adverse events include, fatigue, hypertension, rash, diarrhea and nausea. Other reported events are weight loss, joint pain and falls. Lesser-reported events include fracture, dizziness, hypothyroidism, mental-impairment disorders and, very rarely, seizure.
Enzalutamide is a medication for hormone therapy that may be taken by mouth as a pill. It is an anti-androgen used to slow the way prostate cancer develops and spreads.	Adverse events include fatigue, back pain, hot flashes, falls, hypertension, dizziness and decreased appetite. Other reported events are convulsion, hypertension, neutropenia, memory impairment disorders and cardiovascular events.
Active surveillance is used to delay or avoid aggressive therapy. It may be good for men who do not have symptoms or want to avoid sexual, urinary or bowel side effects for as long as possible. Others may choose surveillance due to their age or overall health.	Patients and caregivers should know to expect many tests to track cancer growth and monitor progress to help focus on managing cancer-related symptoms.
Clinical trials are research studies to test new treatments or learn how to use existing treatments better. To learn more, patients may visit UrologyHealth.org/ClinicalTrials .	Many patients know little about clinical studies. If this is a good option for the patient, they may find value in learning the goal of finding treatment strategies for certain illnesses or groups of people.

Many people find the stages of prostate cancer to be confusing, so consider recapping the four stages in simple terms as seen below.

Stages I & II

Localized Prostate Cancer

Tumor has not spread (metastasized) beyond the prostate.

Stage III

Locally Advanced Prostate Cancer

Cancer has spread outside the prostate, but only to nearby tissues.

Stage IV

Advanced Prostate Cancer

Cancer has spread outside the prostate to other parts such as the lymph nodes, bones, liver or lungs.

Talking to patients may empower them to gain a level of comfort about treatment, side effects and quality of life. Patients entering this phase of treatment may be facing a loss of long-term survival and may be experiencing grief and providers can help patients and caregivers by acknowledging

potential strong feelings. Encourage patients to strive to maintain a sense of normalcy by continuing with usual daily routines, favorite activities and social interactions in the community or by seeking professional counseling.

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ABOUT THE UROLOGY CARE FOUNDATION

The Urology Care Foundation is the world's leading urologic foundation – and the official foundation of the American Urological Association. We provide information for those actively managing their urologic health and those ready to make health changes. Our information is based on the American Urological Association resources and is reviewed by medical experts.

To learn more, visit the Urology Care Foundation's website, **UrologyHealth.org/UrologicConditions**. For copies of printed materials about Prostate Cancer and other urologic conditions, visit **UrologyHealth.org/Order** or call 800-828-7866.

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