

Prostate Cancer: Surgery Best Option?

Study Shows 10-Year Prostate Cancer Survival Best When Patients Choose Surgery

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Oct. 8, 2007 -- Men who choose surgery for early prostate cancer are more likely to be alive 10 years later than men who opt for other treatments, a Swiss study shows.

In early prostate cancer, cancer cells haven't spread beyond the prostate. There are several different treatment options: surgical removal of the prostate (prostatectomy), external-beam radiation therapy, implantation of radioactive seeds (brachytherapy), freezing the tumor (cryotherapy), hormone therapy, and watchful waiting.

[Choosing a treatment](#) for prostate cancer isn't easy. Each treatment has a different set of benefits and a different set of risks. But there's a growing body of evidence showing that men who opt for surgery may have better odds of long-term survival.

The latest piece of this evidence comes from Geneva University researchers Christine Bouchardy, MD, MPH; Elisabetta Rapiti, MD, MPH; and colleagues. They analyzed data on all 844 prostate cancer patients diagnosed with early prostate cancer from 1989 through 1998 in Geneva, Switzerland.

The bottom line: Men who underwent surgery were 2.3 times less likely to die of prostate cancer than men treated with external radiation. Why did surgery seem to work better?

Prostate Surgery May Leave More Options Open

"It is related to the burden of disease," Rapiti tells WebMD. "The more of the tumor you are able to take away and the less you leave, the less chance you have for metastases [cancer cells that spread to other parts of the body]."

And Bouchardy says that even if surgery doesn't get every cancer cell, surgery patients with recurrent disease have more options than radiation patients with recurrent disease.

"Recurrence after surgery is easier to treat successfully -- with irradiation or irradiation plus hormonal therapy -- than after irradiation, when only hormonal therapy remains as an option," she tells WebMD.

Ash Tewari, MD, is director of prostate cancer-urologic oncology outcomes at the Brady Urology Institute at Cornell University. **Tewari** has been studying long-term outcomes after prostate cancer treatment. He was not involved in the Swiss study.

"If you look not only at this study but at the studies we brought out in the last three or four years, in terms of survival for 10 or even 15 years, there is a distinct advantage in patients who underwent surgery for localized prostate cancer," **Tewari** tells WebMD. "This has implications for patients comparing different treatment options."

Surgery is not the best choice for every patient. The Swiss researchers found that elderly patients and those with very early-stage tumors did just as well after radiation therapy as surgery patients.

"Radiation therapy remains an option for patients with short life expectancy, with contraindication to surgery, or who refuse surgery," Bouchardy says.

Bouchardy is quick to point out that survival isn't the only factor to consider when weighing prostate cancer treatment options. A man must also consider his [quality of life after treatment](#).

As do the Swiss researchers, Tewari warns that only a clinical trial, in which matched patients are randomly assigned to different treatments, can prove whether one treatment offers better long-term survival than another.

"But this is a well-conducted study in which it appears that aggressive prostate cancers in people with long life expectancy may have some life advantage if they get the cancer out of the body," he says.

The Swiss study appears in the Oct. 8 issue of *Archives of Internal Medicine*.