

Dieter Jocham

Department of Urology, Medical University
of Lübeck, Germany

Introduction

It was a great pleasure for me to act as Chairman of the Symposium 'Therapeutic Options for Localized and Locally Advanced Prostate Cancer', which was held in Brussels, Belgium, on May 16, 1997, as part of the EAU and Euf Symposium.

We were privileged to hear from internationally recognized experts in the field of prostate cancer (PCa). The topic under discussion, treatment of localized and locally advanced PCa, is such a large and important issue that it could undoubtedly, by itself, be the subject of a congress. Therefore, this meeting focused on specific aspects of PCa, bringing those attending in touch with the individual experience of the international faculty. The participants could hear about the role of neoadjuvant downsizing of PCa before the innovative therapeutic modality of cryosurgery.

Although the role of complete androgen blockade is still debated, I think it fair to say that it is no longer as favoured as it has previously been, with recent results demonstrating no or only a small advantage as compared with basic androgen ablation. Adding to these data is a report outlining Italian results which confirmed this trend. Of course, we need additional data before a firm recommendation about this therapy can be made, but the results indicate that urologists may have to start to question their use of complete androgen blockade.

Individualized therapy is very important, and any features which improve the treatment for patients not only in terms of efficacy, but also quality of life, convenience, and cost savings must be assessed. This has led to the development of longer-acting depot preparations, and in this Symposium we were able to learn about the efficacy of

different luteinizing hormone-releasing hormone agonist formulations, a 1-month compared with a 3-month depot, in patients with advanced PCa.

Basic research in the field of PCa today includes the role of apoptosis and the therapeutic options influencing the mechanisms leading to cell death. In order to achieve fundamental advances in treatment strategies, I think it is very important that research flourishes in this area. I was, therefore, pleased that the Symposium contained a report from one of the leading researchers in this field. Drawing on his extensive experience, he was able to demonstrate differences in the degree of apoptosis occurring in benign tissue, prostatic intraepithelial neoplasia, and PCa.

I believe that this Symposium provided participants with a wonderful opportunity to hear internationally renowned experts present their latest information on what is one of the most significant health threats facing men. Hopefully, we will be able to continue to add to this information, helping to develop more effective treatment strategies in the fight against this all too commonly encountered cancer.