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Introduction

It was a great honor for me to act as Chairman of this Satellite Symposium entitled 'An Integrated Approach to Prostate Cancer: Treatment Options and Issues', which was held on September 7, 1997, in Montreal, as part of the 24th SIU World Congress. Controversy abounds in the area of prostate cancer, and we are still unable to reach a consensus on some of the most important issues. With prostate cancer continuing to be a source of great morbidity and mortality, it is important that debate continues to allow clinicians and researchers to work toward developing agreement on some of these controversial areas. Therefore this symposium was both timely and valuable, allowing leading authorities to present their data on topics that are generating special interest. It is impossible to cover everything in the field of prostate cancer, and I therefore believe it is important to have symposia such as this which look in detail at a few particularly relevant topics. During this meeting we were fortunate to have leading experts reporting their most up-to-date findings.

We first heard about the indications and results of radical prostatectomy in locally advanced cancer with special reference to enhancing the efficacy of this technique. This leads to the problem of complications which can arise with this surgery, and it is therefore pertinent to discuss the problem of urinary incontinence and the use of an artificial urinary sphincter after surgery to manage this. The medical management of prostate cancer is rapid-

ly advancing and leuporelin, one of the major LHRH agonists, is now available as a very useful 3-month depot. Results comparing this 3-month formulation to the more common 1-month therapy are presented. The use of leuporelin given as neoadjuvant hormonal therapy (NHT) prior to radical prostatectomy has been investigated in several randomized, multi-institutional studies, and while there is agreement on effects such as reduction in tumor volume and incidence of positive margins, there is yet no clear consensus as to whether this translates into clinical benefit. In an attempt to clarify the possible role of NHT, a study has been performed to evaluate the efficacy of NHT with leuporelin plus cyproterone acetate (CPA), and preliminary data from this trial were reported. Finally, the problem of targeting men at risk of developing prostate cancer has always been a topic of great interest, and the symposium presents an overview on hereditary and familial prostate cancer.

A great deal of effort was put into ensuring that the symposium covered some of the most topical issues for clinicians and researchers in the field of prostate cancer. I am pleased that this effort resulted in such a stimulating and useful meeting for participants. As all the speakers are experts in the field of prostate cancer, I am sure those who attended the meeting found it enjoyable and thought-provoking.