

Researchers are studying tailored treatments to improve prostate cancer care



By Sally Robertson, BSc

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Researchers from the University of Glasgow are leading a study into individualized treatments for prostate cancer.



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By developing treatment tailored to the specific needs of a particular individual, the researchers hope to extend lifespans, which they hope will be the case for 9,000 men each year.

Currently, men who have advanced prostate cancer are usually prescribed hormone therapy and when that stops being effective, they are moved onto life-extending treatments.

The study would lead to a shift from this “one size fits all” approach, to finding out which drugs will be most effective at treating the cancer, based on what is driving the disease in individual people.

"Every man's prostate cancer is unique to him and so not surprisingly the way men respond to treatments varies enormously," explains Iain Frame, director of research at Prostate Cancer UK. "Clinicians are in effect left to treat patients 'in the dark' - with little idea as to which treatments will work best for which men."

The Glasgow researchers will collaborate with groups from London, Manchester and Belfast for the study, which has been launched by Prostate Cancer UK and will cost £1.4 million.

With more than 47,000 new cases diagnosed in the UK every year, prostate cancer is the most common form of cancer in men. About 25% of new cases are diagnosed after the cancer has spread from the prostate to other areas in the body, thereby reducing the likelihood of treatment being successful.

The research will initially look at men with advanced prostate cancer that can still be effectively managed with hormone therapy. The goal is to identify the changes in the DNA of prostate cancer cells so that a test can be developed to detect those changes. This will enable researchers to find out which drugs would best target the changes and prevent any further spread of the cancer. This approach is already used to treat women with advanced breast cancer.

Lead author of the study, Robert Jones, says: "It's already becoming clear in other common cancers, including cancers of the breast, lung and colon, that better outcomes can be achieved if we test the individual patient's tumour biology and then select the most appropriate treatment."

Source:

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