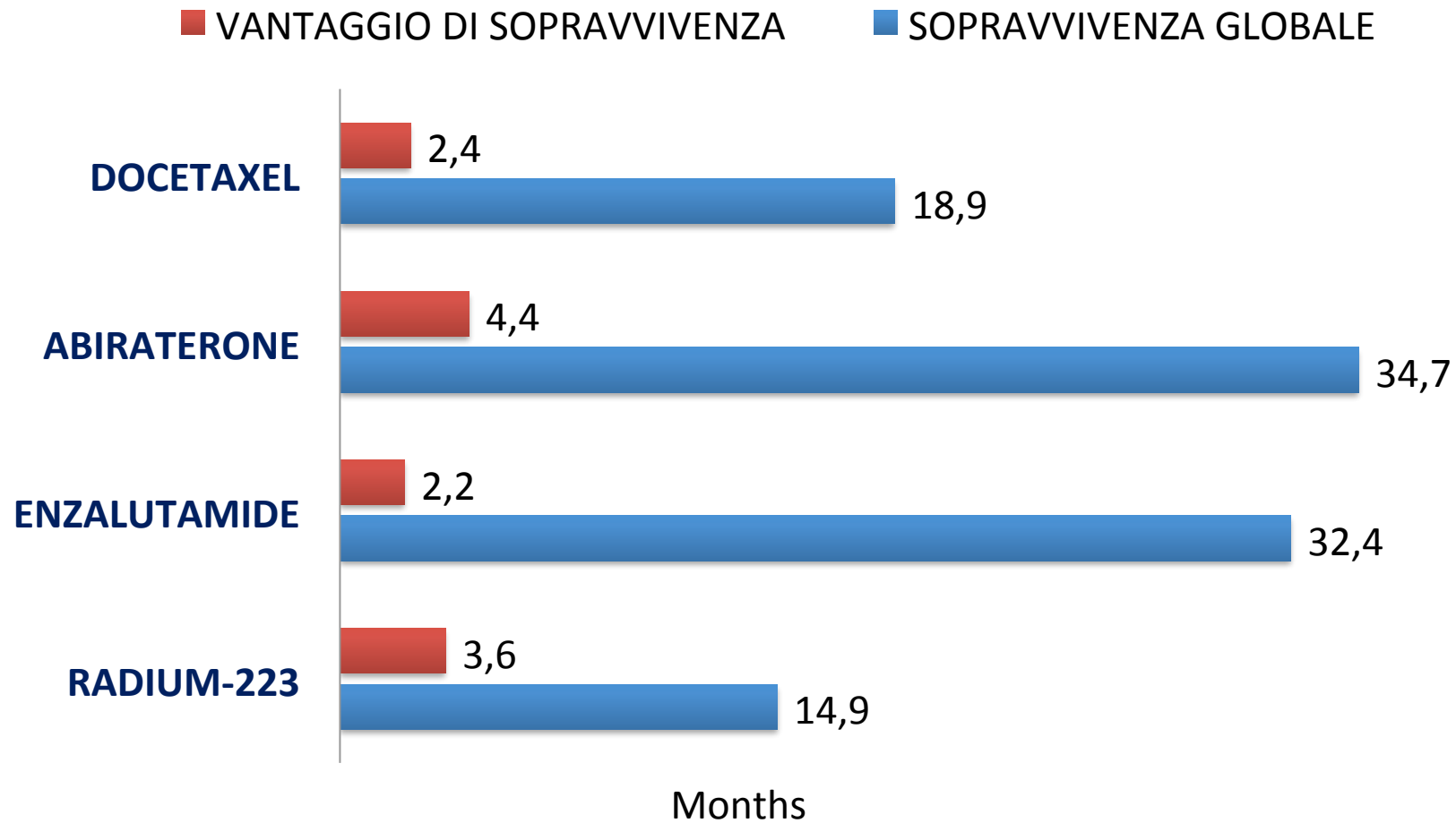


CONCLUSIONI

Terapie di prima linea per il paziente mCRPC



¹Tannock et al. N Engl J Med. 2004

³Ryan C et al. ESMO 2014; Abstract 7530
(oral presentation)

⁴Beer et al. N Engl J Med 2014

⁵Parker et al. N Engl J Med. 2013

Aumento della sopravvivenza globale

Treatment	Trial	Reference	Survival (mos)	Survival gain (mos)
Docetaxel/prednisone vs mitoxantrone/predn.	TAX-327 ¹	Tannock 2004	18.9 vs 16.5	2,4
Sipuleucel-T vs control	IMPACT ²	Kantoff 2010	25.8 vs 21.7	4,1
Abiraterone/prednisone vs Placebo/prednisone	COU-AA-302 ³	Ryan 2014	34.7 vs 30.3	4,4
Enzalutamide vs placebo	PREVAIL ⁴	Beer 2014	32.4 vs 30.2	2,2
Radium-223 vs placebo/BSC	ALSYMPCA ⁵	Parker 2013	14.9 vs 11.3	3,6

¹Tannock et al. N Engl J Med. 2004

²Kantoff et al. N Engl J Med. 2010

³Ryan C et al. ESMO 2014; Abstract 7530 (oral presentation)

⁴Beer et al. N Engl J Med 2014

⁵Parker et al. N Engl J Med. 2013

Benefici clinici delle nuove Terapie Post-ormonoterapia

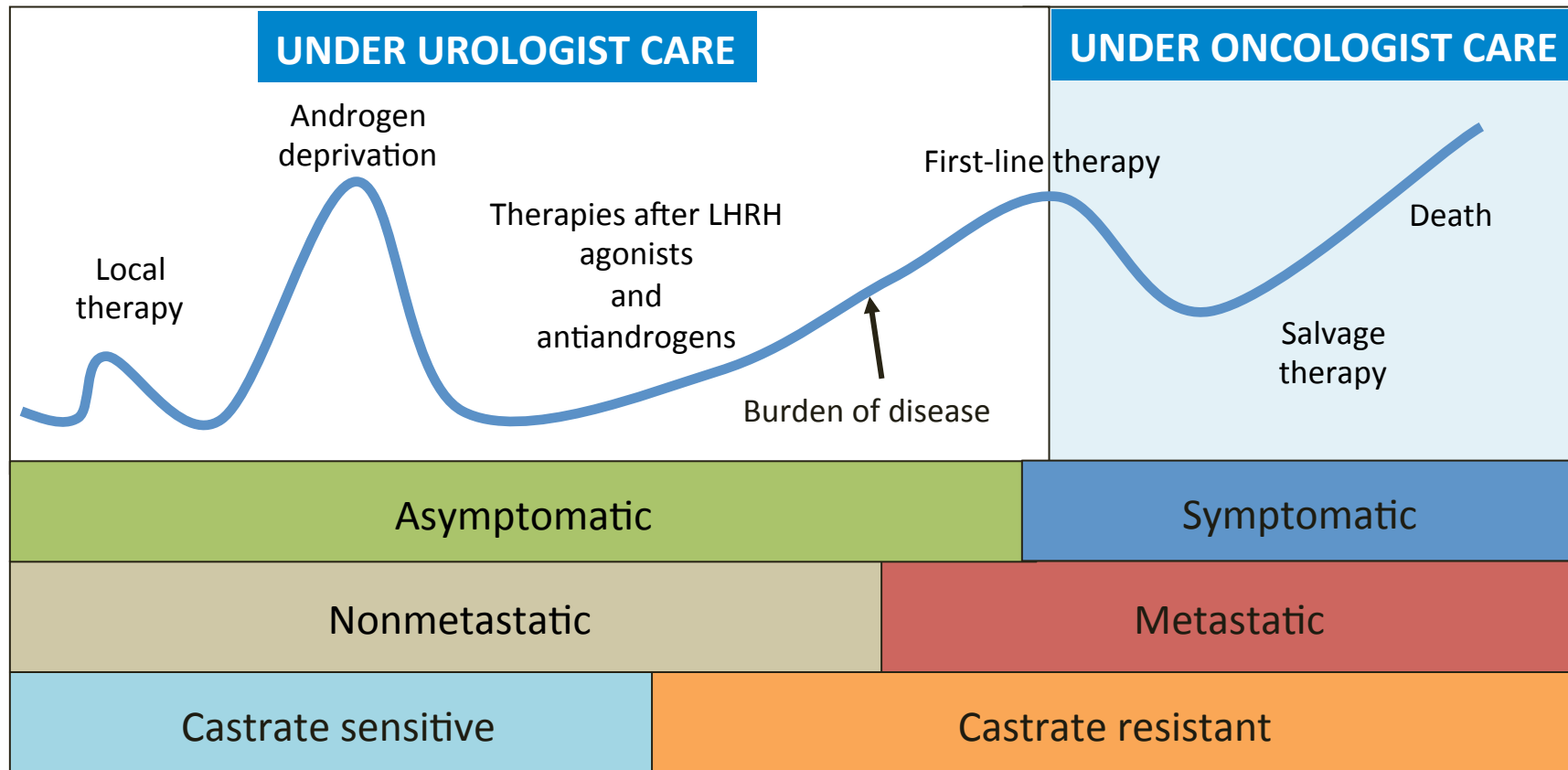


Farmaci attualmente approvati in Italia

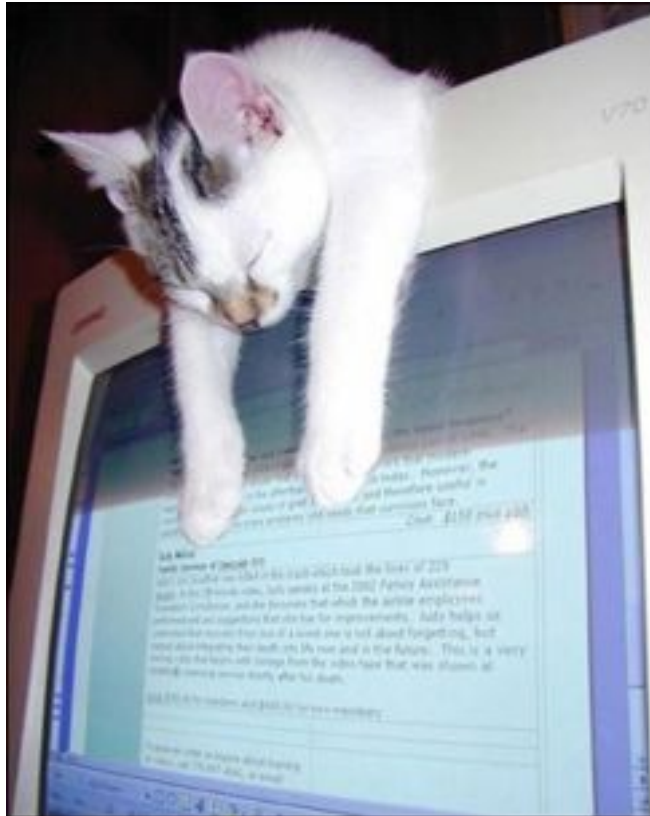
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Abiraterone	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Enzalutamide	<input type="checkbox"/>	<input type="checkbox"/>
Sipuleucel	<input type="checkbox"/>	—
Radium 223	<input type="checkbox"/>	<input type="checkbox"/>

Storia naturale del Carcinoma prostatico

UNDER RADIATION ONCOLOGIST CARE



Higano C, et al. In: Figg WD, et al. Drug management of prostate cancer; 2010.



Thank you !

