

Treatment decision-making for localized prostate cancer: What younger men choose and why

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Background and Objective: The literature lacks knowledge about information preferences and decision-making in young prostate cancer patients. This study provides insight into information sources consulted and factors dictating treatment decision-making in young prostate cancer patients.

Methods: Subjects were identified from pathology consult service of a National Center of Excellence. Questionnaires were mailed to 986 men, under 50 years of age, diagnosed with Gleason score 6 prostate cancer between 2001 and 2005.

Results: Four hundred ninety-three men responded. The most common primary therapies were surgery 397 (81.4%), radiation 52 (10.7%), and active surveillance (AS) 26 (5.3%). Participants with at least some college education ($P = 0.003$) or annual income $> \$100,000$ ($P = 0.003$) were more likely to consult three or more doctors. Amongst all treatments, “doctor’s recommendation” was the most influential information source, although relatively less important in the AS group. Internet was the second most frequent information source. Participants with higher education ($P = 0.0003$) and higher income ($P = 0.002$) considered sexual function more important while making a treatment choice. Only 2% of the men preferred a passive role in the decision-making. Informed decision-making was preferred more by patients who chose radiation and AS while shared decision-making was preferred more by surgery patients ($P < 0.05$). The majority (89%) of the respondents did not regret their decision. No difference in satisfaction levels was found between different treatment modalities.

Conclusions: This study provides insight into information sources consulted, such as the greater internet use, and various factors dictating treatment decision-making in young prostate cancer patients. There was an overall very high satisfaction rate regardless of the therapy chosen.

Editorial Comment

This is an interesting survey from the Johns Hopkins. Four hundred ninety-three men under 50 years diagnosed with Gleason score 6 prostate cancer answered a questionnaire related to type of therapy. The most common primary therapy was surgery 397 (81.4%), followed by radiation 52 (10.7%), and active surveillance 26 (5.3%) patients.

Interesting findings include: 1. Participants with some college education or higher annual income were more likely to consult 3 or more doctors; 2. Amongst all types of treatment “doctor’s recommendation” was the most influential information source; 3. Internet was the second most frequent information source; 4. Participants with higher education and higher income considered sexual function more important while making a treatment choice; 5. Only 2% of the men preferred a passive role in the decision-making; and, 6. Informed decision-making was preferred more by patients who chose radiation and active surveillance while shared decision-making was preferred more by surgery patients.

The study provided insight into information sources consulted, such as the greater internet use, and various factors dictating treatment decision-making in young prostate cancer patients.

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