PubMed

Format: Abstract

Urologe A. 2019 May;58(5):569-582. doi: 10.1007/s00120-019-0931-4.

[PSA increase after definitive treatment].

[Article in German]

Maurer T[1,2], Hadaschik B[3], Budäus L[4], Steuber T[5,4], Salomon G[4], Horn T[6], Herrmann K[7], Weber M[7], Giesel FL[8], Berliner C[9], Eiber M[10].

Author information

Following definitive treatment with curative intent a subset of patients with prostate cancer experience biochemical recurrence. In these patients clinical parameters are mostly used to decide if a local or systemic disease recurrence is present. While salvage radiation treatment is advocated for local recurrence after radical prostatectomy, no standard recommendations exist in cases of local recurrence after primary radiation therapy although salvage prostatectomy may be considered. Imaging procedures have traditionally not routinely been recommended for the onset of prostate-specific antigen (PSA) relapse; however, prostate-specific membrane antigen (PSMA) positron emission tomography (PET) computed tomography (CT) exhibits high detection rates even at low PSA values. Thus, the current German guidelines state that PSMA PET/CT can be considered if this could result in a decisive change in further treatment management. Currently, a positive influence on oncological long-term outcome, however, has not yet been proven.

KEYWORDS: Biochemical recurrence; Positron emission tomography; Prostate-specific membrane antigen; Prostatic neoplasms; Salvage therapy

PMID: 31049635 DOI: 10.1007/s00120-019-0931-4