

Poster Summary Slides

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Androgen Deprivation Therapy in Prostate Cancer: Assessing the Educational Need Among Urologists





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Androgen Deprivation Therapy in Prostate Cancer: Assessing the Educational Need Among Urologists

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Goal

Assess the level of comfort in prescribing ADT and the patterns of ADT use;
identify educational needs amongst urologists with regard to ADT.

Method

• A 7-question survey was electronically distributed to UroToday® subscribers during the period of October 8–20, 2010. Responses were received from 345 participants, although not all of them were completed.

Key Findings

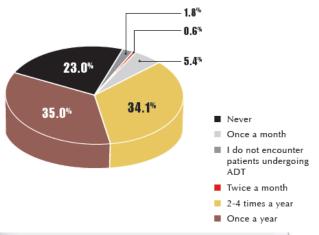
- Considerable variability in the monitoring of testosterone levels in patients on ADT.
- Lack of confidence with regard to identifying men who might benefit from ADT, the optimal timing of ADT, the use of intermittent versus continuous ADT, and mitigating side effects.
- These findings support the need for further education related to the management of advanced prostate cancer with ADT.

ADT=Androgen Deprivation Therapy

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Confidence Levels in Clinical Scenarios Related to Use of ADT



How often do you

monitor testosterone levels in men undergoing ADT? (n=331)



- Almost 50% of prostate cancer patients were being treated with ADT
- 35% check testosterone levels 1x/yr; 34% check levels 2-4x/yr; 23% never check testosterone levels in men on ADT
- Most common barriers to ADT treatment were AEs and reimbursement- and/or costrelated issues

