Study: Radical Prostatectomy Bests Radiation For Prostate Cancer

A comparative review of more than 230 previously published studies bumps radical prostate removal surgery above radiation in cost-effectiveness, quality of life after treatment, and patient survival. Surgery, whether performed traditionally, laparoscopically, or robotically, demonstrated improved outcomes across all three factors when compared to radiation for prostate cancer in the form of intensity-modulate radiation therapy, brachytherapy, or a combination of the two.

Dr. David Samadi , Vice Chairman, Department of Urology, and Chief of Robotics and Minimally Invasive Surgery at The Mount Sinai Medical Center believes these findings will be instrumental in shaping prostate cancer treatment decisions among newly diagnosed patients. "The comprehensive nature of this study gives very meaningful support to patients weighing prostate cancer treatment options," he said. "This data demonstrates that prostatectomy surgery saves money and lives. That verification, combined with the unique results of my SMART (Samadi Modified Advanced Robotic Technique) surgery, makes robotic surgery a superior choice for patients, their families, and the healthcare system."

Featured in the British Journal of Urology International, the findings were compiled using a Markov model with data from previously published studies on treatment expenses and outcomes for patient with low-, intermediate-, and high-risk prostate cancer. In almost all cases, radial prostatectomy—regardless of surgical method—proved more effective and less costly than radiation. An exception was noted in high-risk patients who underwent a combination of external beam radiation therapy (EBRT) and brachytherapy. According to Dr. Samadi, "High-risk patients are likely to have prostate cancer that has spread beyond the prostate and, therefore, would not be considered surgical candidates."

Notably, in the case of low-risk prostate cancer, intensity-modulated radiation therapy proved less effective and more expensive than radical prostatectomy surgery. In fact, a review of the financial impact on the patient and the payer, found radiation therapy to be consistently more expensive than surgery. Lifetime costs of the disease, including any necessary follow-up or salvage treatment, were statistically and clinically comparable across surgical methods, though significantly varied among radiation patients.

Dr. Samadi is one of few prostate surgeons uniquely trained and experienced in all three types of radical prostatectomy. With a foundation in traditional, open surgery and laparoscopic surgery, he was instrumental in the evolution of robotic use for prostate removal and has performed more than 4,000 successful robotic prostatectomy procedures. "Significant benefits are realized through the robot, but my foundation of earlier surgical methods is what drives successful SMART surgery," Dr. Samadi stresses.

Radiation and radical prostatectomy surgery are the two most commonly elected prostate cancer treatments. Dr. Samadi encourages patients to seek the counsel of a range of prostate cancer experts, but stresses, "I believe the most decisive plan of attack for localized prostate cancer is surgery. For most men anything else, including radiation, is less targeted, less effective, and less definitive."

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