Island docs help define options for prostate cancer

They devised a scoring system to see if a patient is a good candidate for brachytherapy

By ANDREA BOYANSKI

A group of physicians, including several local doctors, has found a way to determine if radioactive seed implantation is a good treatment option for prostate cancer patients.

Dr. Hoon K. Lee and Myr T. Adams, radiation oncologists at Regional Radiation Oncology in West Brighton, report that in 1997, an estimated 60,000 men nationwide were diagnosed with prostate cancer. Radioactive seed implantation, also called brachytherapy, is a non-invasive treatment that has become increasingly popular.

Brachytherapy consists of injecting radioactive seeds into the prostate gland. The seeds (about the size of a grain of rice) irradiate the cancer from inside the gland. The doctors noted that the side effects to brachytherapy are generally mild, although urinary retention can occur.

About 7 percent of patients develop the side effect for an average of 6.7 weeks and must use a catheter to drain their urine.

POINT EFFORT

The doctors, along with others from Richmond University Medical Center and New York Medical School, came up with the Seed Implant Retention Score (SIRS) to help identify those patients at greatest risk for prolonged urinary retention.

To determine the scoring system, they researched data on 87 patients who underwent brachytherapy at KUMC from 1997 to 2007. Patients with a score of zero to five seeds. Patients with a score of zero to five seeds.

The score is based on whether or not the patient has undergone surgical transection of the bladder (0 point), they are on baseline alpha blockers, which makes it easier for them to urinate (1 point), they need hormone therapy (1 point), their prostate is between 31 and 60 cubic centimeters (1 point), and if their prostate is larger than 60 cubic centimeters (2 points). In the future, we hope to have less complications by selecting the best candidates,” Dr. Lee noted, adding that he has begun to use the SIRS when counseling patients and deciding their treatment.

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