

New therapy for advanced prostate cancer available in Trinidad & Tobago

The Chemistry, Food & Drugs Division of the Trinidad & Tobago Ministry of Health approved the introduction of Abiraterone Acetate to the country, the first - orally administered androgen synthesis inhibitor (testosterone) medication for the treatment of patients with metastatic castration-resistant prostate cancer

Clinical trials have demonstrated that this new therapeutic resource for the standard therapy of patients with hormone-resistant tumors reduces the risk of death by approximately 35%. Abiraterone Acetate is available in Trinidad & Tobago under the trademark Zytiga[®].

According to the National Cancer Registry of Trinidad & Tobago, prostate cancer leads cancer statistics in the population with 22% of all cases. Amongst males, prostate cancer accounted for 42% of all new cases of cancer. Worldwide, prostate cancer is the second type of cancer most frequently diagnosed in men, and the fifth type overall. Near 1.1 million new cases of prostate cancer were diagnosed worldwide in 2012, and more than 300,000 men died because of the disease.

This type of cancer is the result of the malignant transformation of certain cells of the prostate, a gland located underneath the urinary bladder in men, one of the functions of which is to produce a part of the seminal fluid. Although a slowly developing disease, some prostate tumors may be very aggressive and extend quickly to invade other organs (metastasis).

Abiraterone Acetate is a new therapy administered orally as a single daily dose, which prevents androgen from being produced at their three sources: Testes, adrenal glands, and the tumor itself, through the strong block of the CYP 17 enzyme.

Androgens are hormones that promote both male development and sexual features, and prostate cancer cells have been shown to need them to grow.

"Abiraterone Acetate is an androgen synthesis inhibitor (testosterone) treatment that reduces the risk of death by approximately 35% of patients already treated with hormone therapy and chemotherapy. Approximately 20% of all patients with prostate cancer progress to a severe stage of the disease and could now benefit from this new therapeutic alternative", stated Dr. Carmen Martinez, Medical Director of Janssen for Venezuela, Central America and the Caribbean.

One of the most salient aspects of Abiraterone Acetate that distinguishes it from other oncologic treatments is that it possesses a novel mechanism of action, with a benefit as to the overall survival rate, and a tolerable toxicity profile. Additionally, Abiraterone Acetate also provides relief for bone pain that often afflicts patients at advanced stages of the disease.

"Before the appearance of Abiraterone Acetate, after progressing to chemotherapy most patients received either a second unsuccessful line of therapy or merely supportive, palliative treatment" added Dr. Martínez.

The treatment of this condition depends on its stage at diagnosis. Prostatectomy (surgical removal of the prostate), hormone block, or radiotherapy, are some therapeutic possibilities available for the treatment of this disease.

The primary objective of treatment in patients with advanced prostate cancer is to block the action of androgens such as testosterone, since this may result in the regression of the tumor whose development is stimulated by this hormone. However, with passing time many patients who had initially responded to treatments aimed at blocking the production of testosterone, start to produce the hormone again, which reactivates the disease.

Chemotherapy is used in those cases in which the disease has become castration-resistant, that is, that the prostate cancer has kept progressing despite treatment, thus exhausting the possibilities to carry out or to continue the hormone block.

Some treatments available for these patients are intravenous chemotherapies, with this group including only docetaxel and mitoxantrone until 2010.