Dott.ssa Agnese Savini

Clinica Oncologica
AOU-Ospedali Riuniti-Ancona

Mineralometria Ossea Computerizzata (MOC) non dirimente nelle decisioni terapeutiche: un caso emblematico di carcinoma della prostata

VI CONGRESSO NAZIONALE DELLA SOCIETÀ ITALIANA DI OSTEONCOLOGIA (ISO)

Padova, 14-15 Novembre 2017

CASO CLINICO

69 anni

- Ipertensione arteriosa
- Diabete mellito

Maggio 2011

Adenocarcinoma prostatico
Gleason 3 + 4 = 7
in 6/14 biopsie.

PSA=16.4 ng/ml

SCINTIGRAFIA OSSEA

TC ADDOME

RX TORACE

Maggio 2011

RT su loggia prostatica (dose totale 74 Gy)

Iniziava terapia ormonale Bicalutamide 150 mg

Maggio 2013

PET/colina:
Ipercaptazione linfonodale in sede iliaca esterna sx e otturatoria sx (SUV 3,6)
captazione alla ghiandola prostatica

Progressione linfonodale

Bicalutamide 150
DIAGNOSI

Iniziava BAT:
Bicalutamide150 mg +
Leuprorelina 3.75 mg

2011

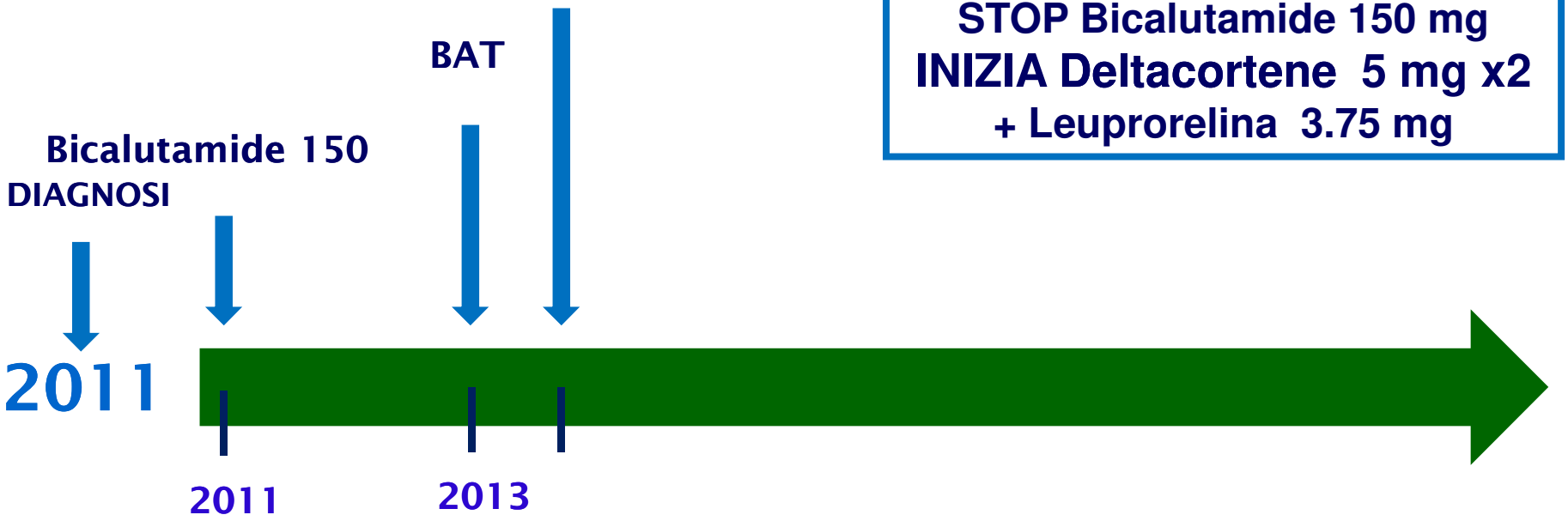
2011 2013

Ottobre 2013

•PSA 2,54 ng/ml

Progressione biochimica

STOP Bicalutamide 150 mg
INIZIA Deltacortene 5 mg x2
+ Leuprorelina 3.75 mg

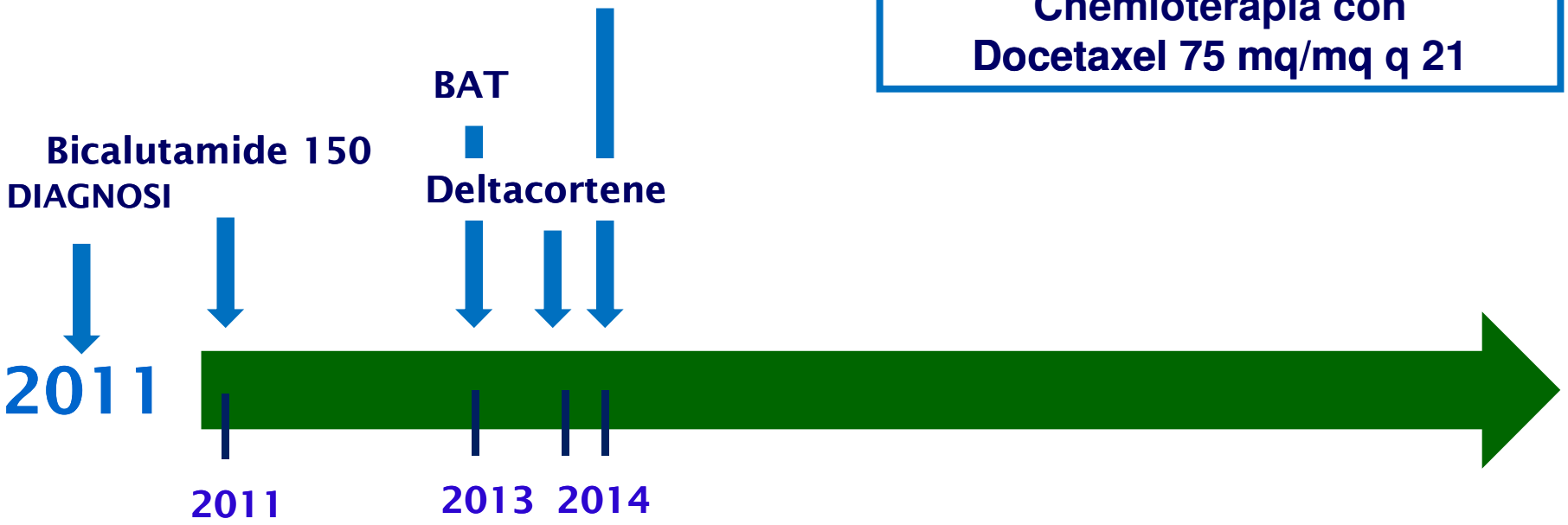


Dicembre 2013

•**PET/COLINA:**
aumento captazione linfonodo iliaco sx (4,2 vs 3,4) e su loggia prostatica

Progressione linfonodale

Chemioterapia con Docetaxel 75 mq/mq q 21

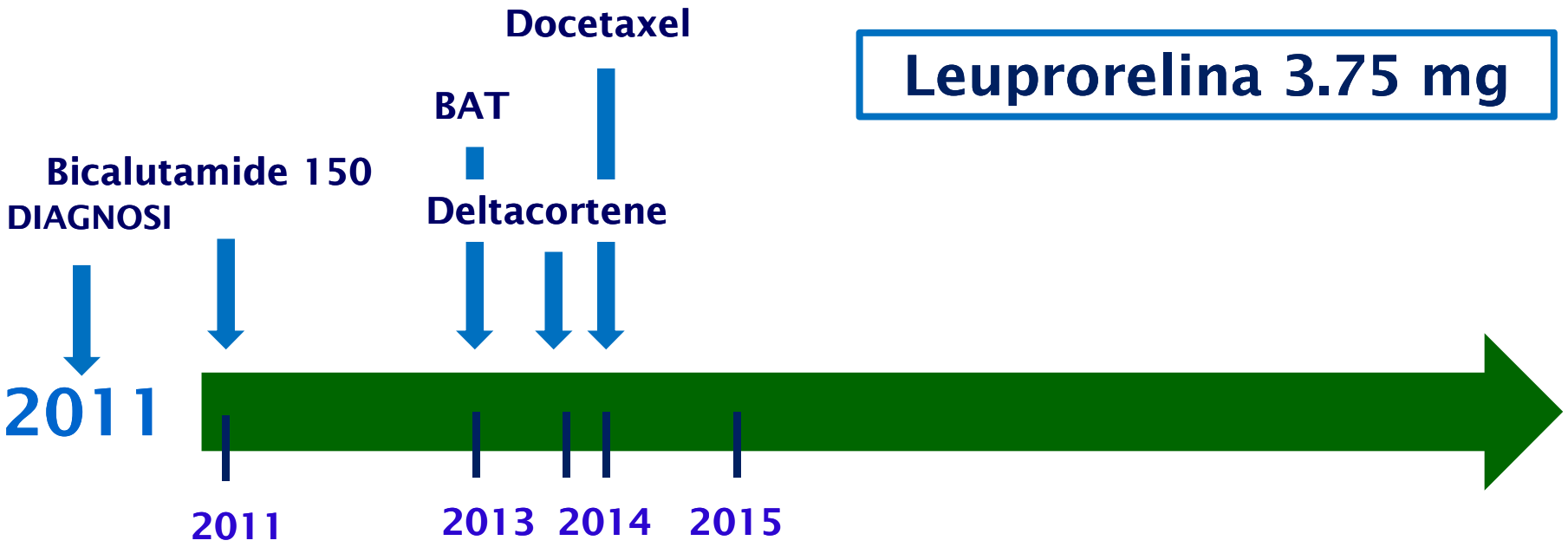


Gennaio – Giugno 2014

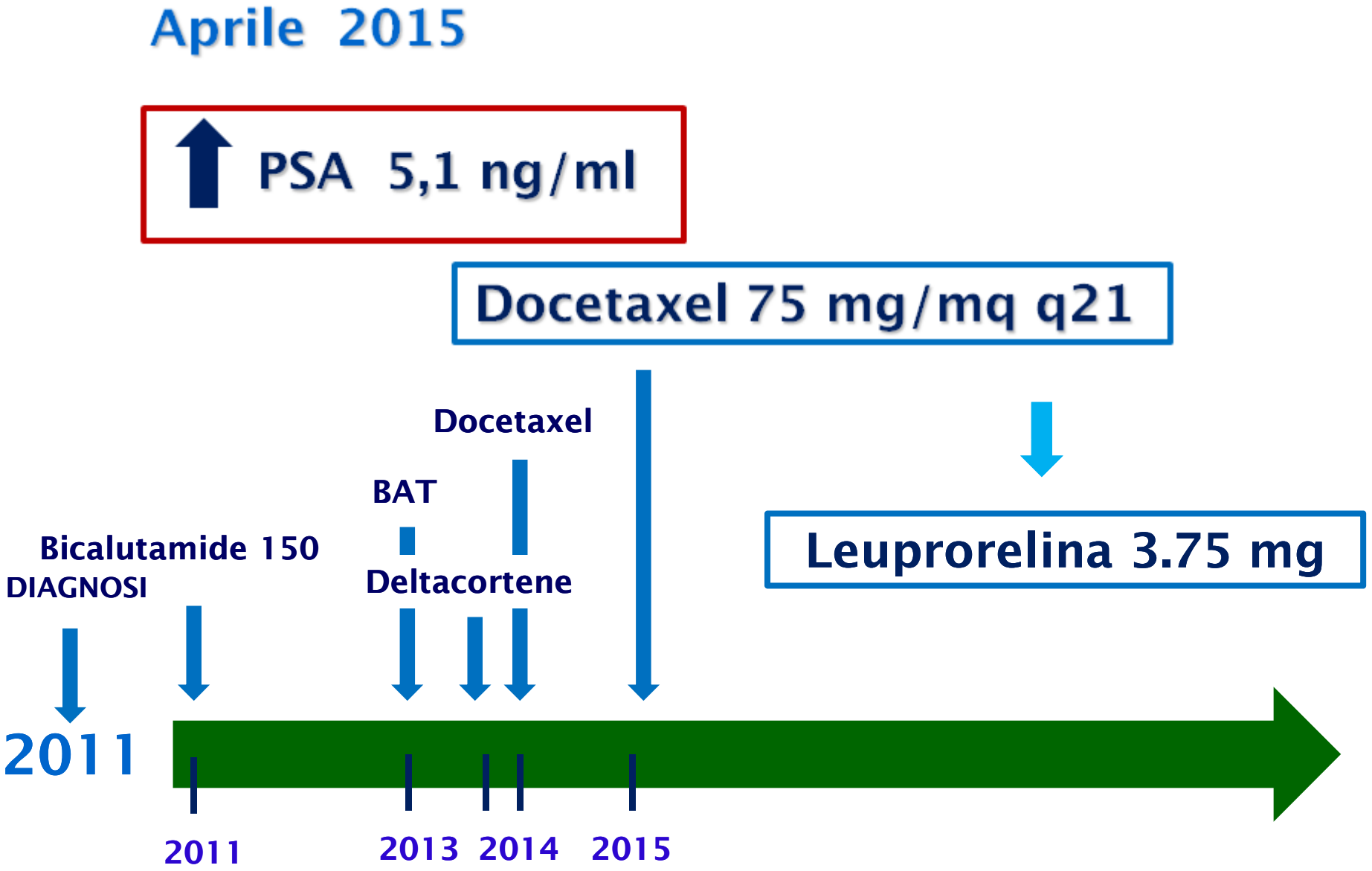
PSA

Docetaxel 75 mg/mq q21

Leuprorelina 3.75 mg

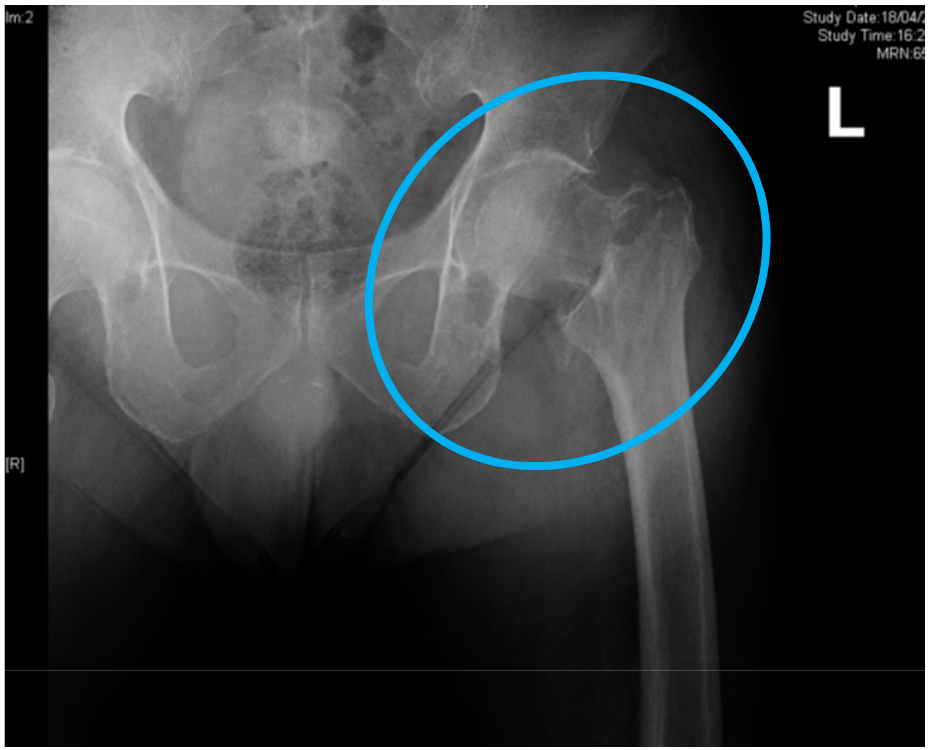


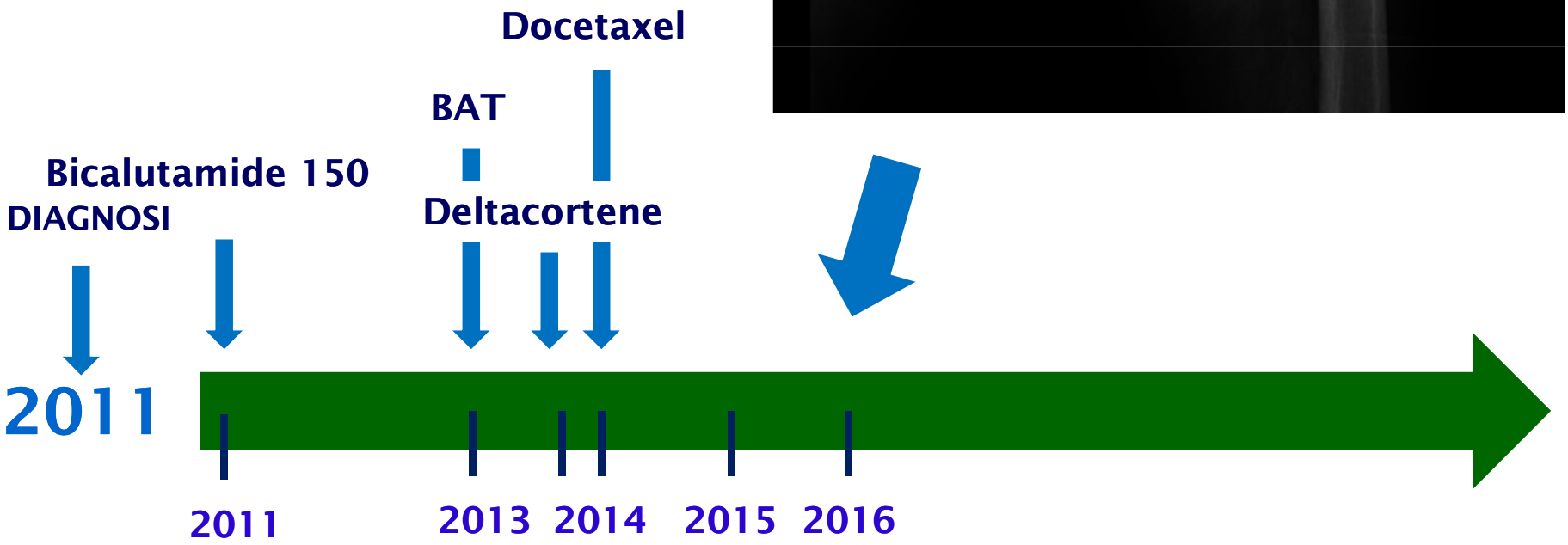
Aprile 2015


PSA 5,1 ng/ml
Docetaxel 75 mg/mq q21
Docetaxel
BAT
Bicalutamide 150
DIAGNOSI
Deltacortene
Leuprorelina 3.75 mg
2011
2011
2013
2014
2015

Aprile 2016

FRATTURA SCOMPOSTA ED INGRANATA EPIFISI PROSSIMALE LATERALE DEL FEMORE SX

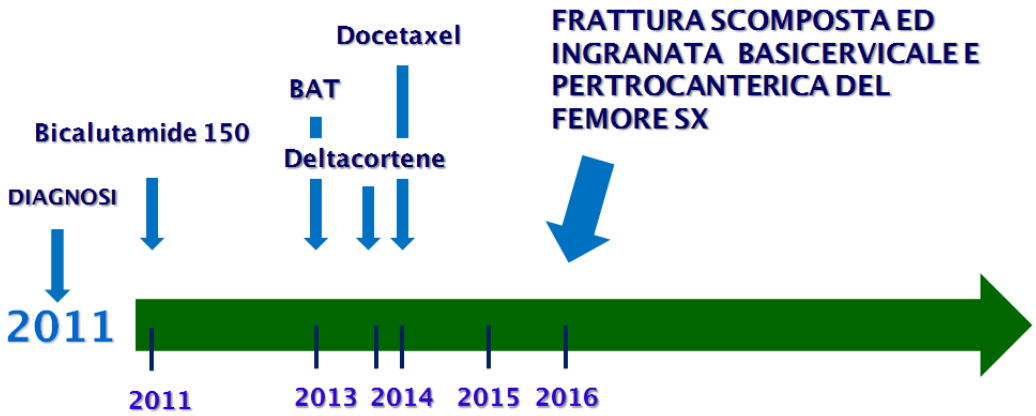




PROGRESSIONE OSSEA?

FRATTURA SU BASE OSTEOPOROTICA?

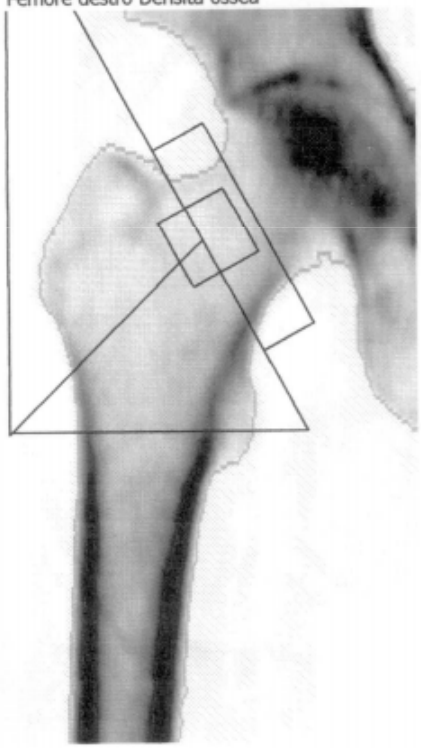
QUALI PARAMETRI RADIOLOGICI / BIOUMORALI?



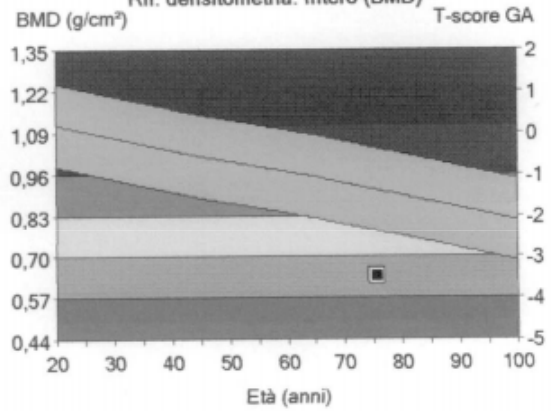
FRATTURA SU BASE OSTEOPOROTICA?

Data di nascita: 18/02/1942
Altezza / Peso: 168,0 cm 68,0 kg
Sesso / Etnia: Maschio Bianco

Femore destro Densità ossea

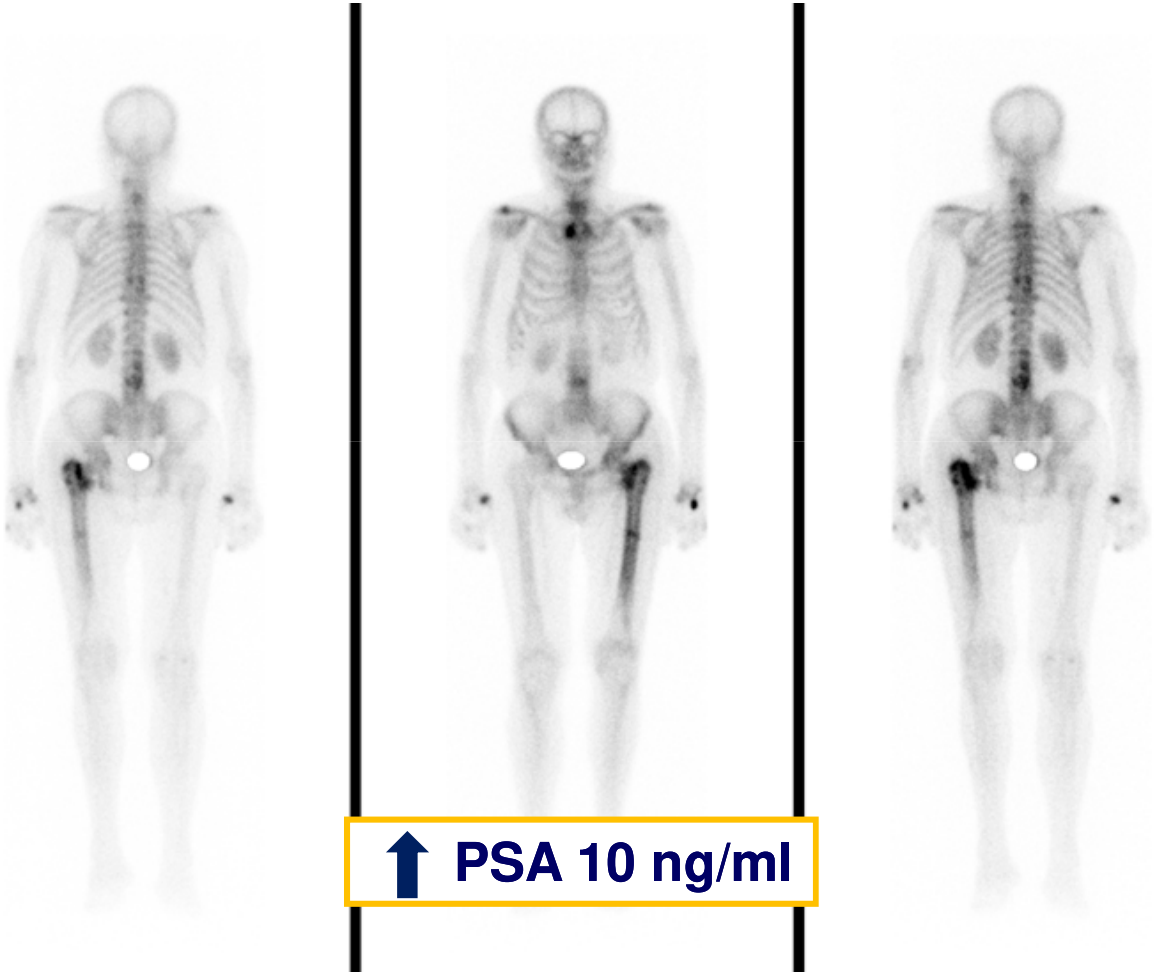


Rif. densitometria: Intero (BMD)



Regione	BMD [1] (g/cm²)	Giovane adulto [2] (%)	Giovane adulto [2] T-score	Pari età [3] (%)	Pari età [3] Z-score
Collo	0,599	56	-3,6	71	-1,9
Ward	0,419	44	-4,2	64	-1,8
Trocantere	0,522	56	-3,7	64	-2,7
Intero	0,638	59	-3,5	70	-2,1

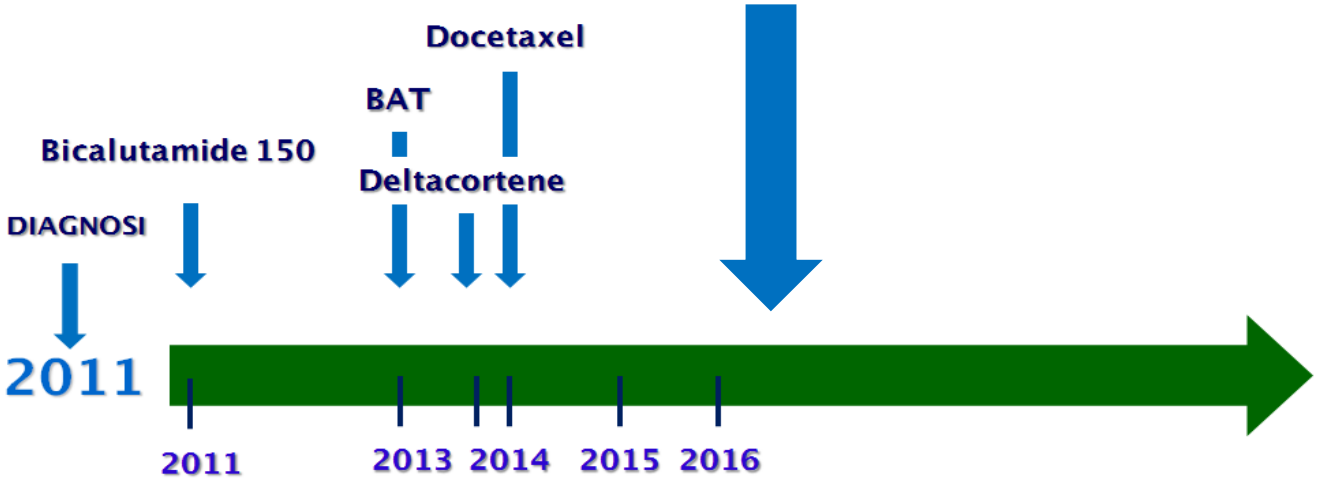
PROGRESSIONE OSSEA?



Luglio 2016

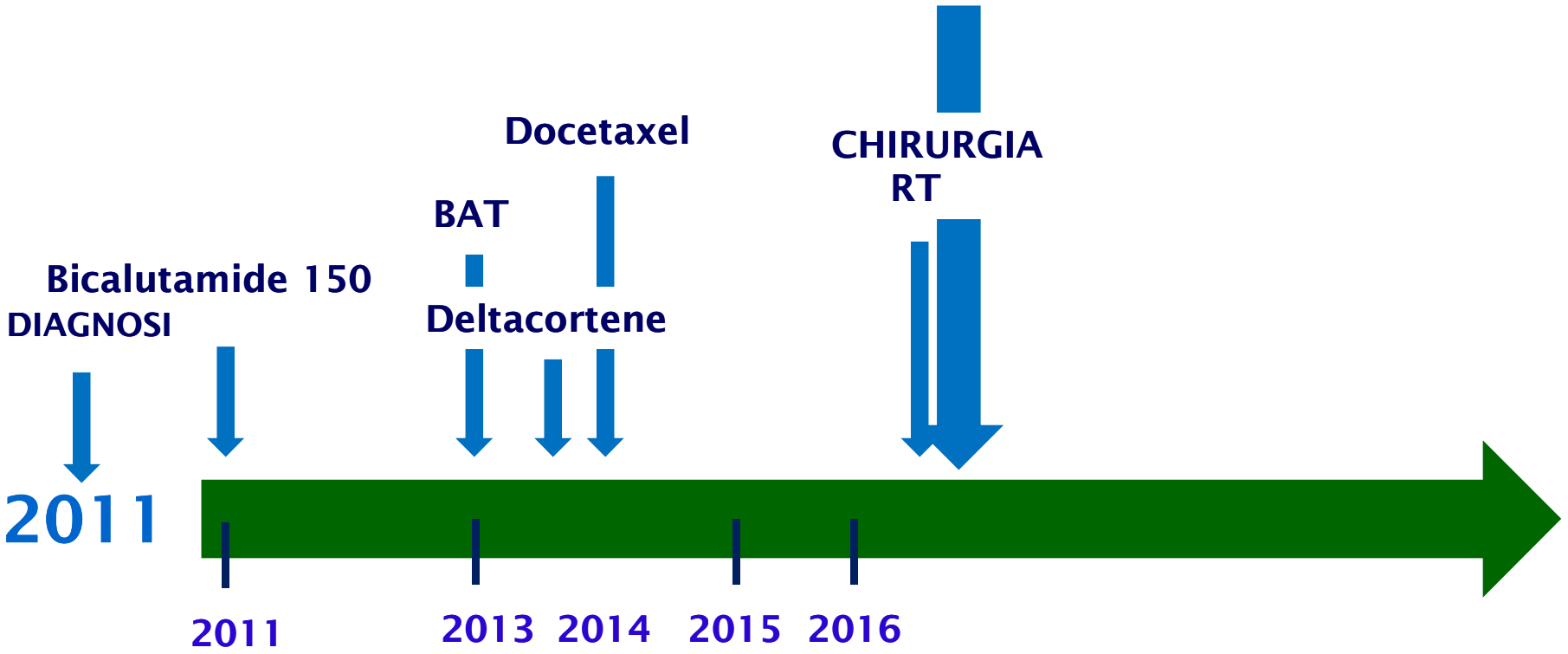
RT su FEMORE SX
(2000 cGy in 5 frazioni)

Denosumab 120 mg



Luglio 2016

ENZALUTAMIDE 160 mg/die



Dicembre 2016

Chemioterapia con CABAZITAXEL 25mg/mq q 21

Docetaxel

BAT

CHIRURGIA
RT
ENZALUTAMIDE

Bicalutamide 150

DIAGNOSI

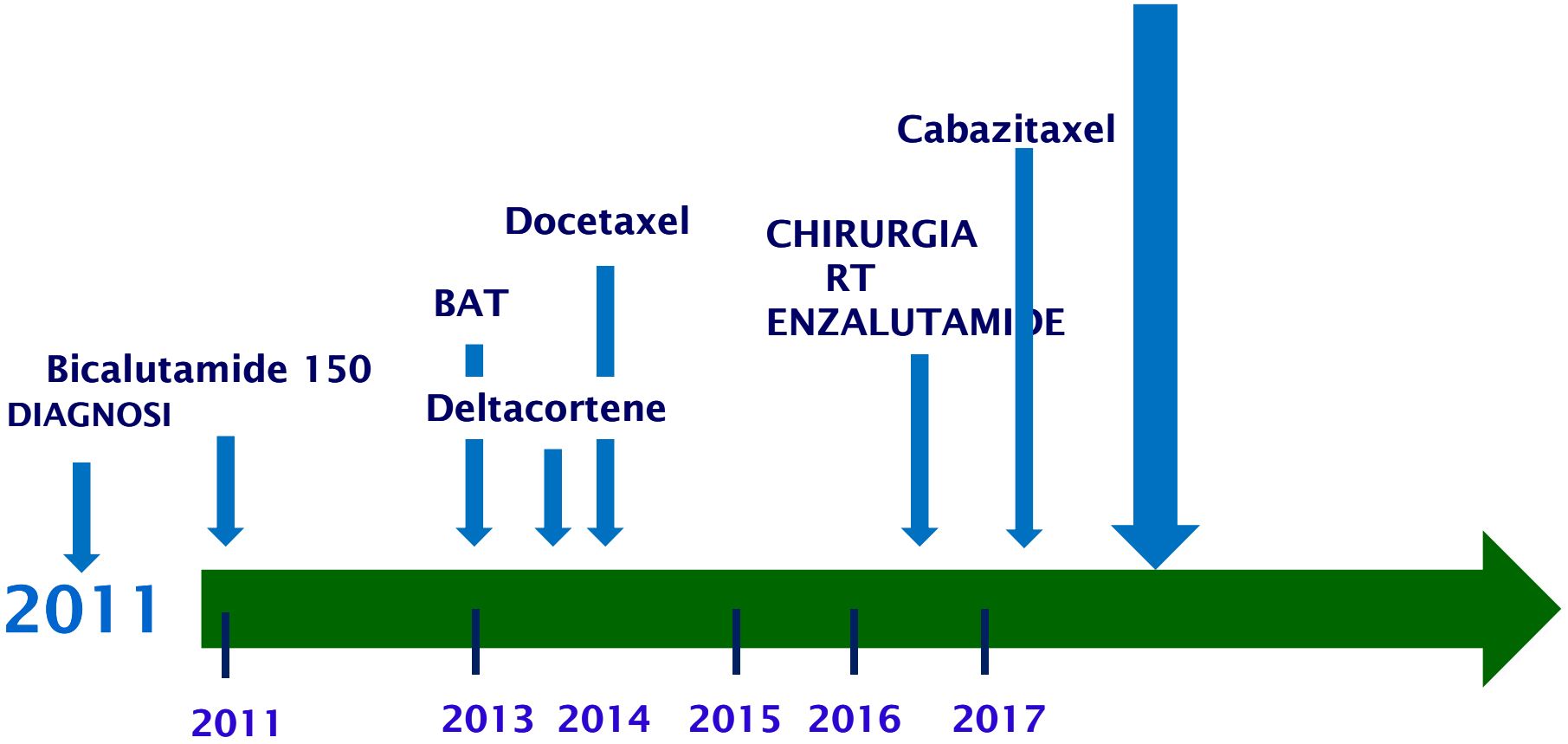
Deltacortene

2011

2011 2013 2014 2015 2016 2017

Giugno 2017

Progressione linfonodale → **Abiraterone 1000 mg/die**



ADT AEs

"Big Three"	What you see	What you don't see	What you feel
Loss of libido	Weight gain (increased risk of obesity)	Loss of BMD	Fatigue (very common symptom)
Erectile dysfunction	Gynecomastia	Anemia	Lack of energy, Lack of initiative
Hot flashes (distressful)	Loss muscle mass, strength (general frailty, feeling weak, increase the risk of falls and fractures)	Onset/worsening of lipids, HTN, diabetes (increased the risk of cardiovascular complication)	Depression (mood changes)
	Decr size penis and testes		Emotional lability
	Hair changes		Cognitive function (forgetfulness, lack of concentration)
			Aches and pains

www.impactjournals.com/oncotarget/ Oncotarget, Vol. 6, No. 14

Biological and clinical effects of abiraterone on anti-resorptive and anabolic activitv in bone microenvironment

Miche
Valent
Tucci[2]
Tonini
[1] Translat
[2] Departr

www.impactjournals.com/oncotarget/ Oncotarget, 2017, Vol. 8, (No. 12), pp: 20113-20121

Research Paper

Cabozantinib targets bone microenvironment modulating human osteoclast and osteoblast functions

Marco Fioramonti[1,*] Daniele Santini[1,*] Michele Iuliani[1] Giulia Ribelli[1], Paolo i[1], Vincenzo Denaro[2],

, Rome, Italy

Cancer Therapy: Preclinical

Clinical Cancer Research

Radium-223 Inhibits Osseous Prostate Cancer Growth by Dual Targeting of Cancer Cells and Bone Microenvironment in

Mari I. Suominen[1], Katja M. Fagerlund[1], Jukk
Jukka P. Morko[1], ZhiQi Peng[1], Esa J. Alhoni
Dominik Mumberg[5], Karl Ziegelbauer[5], San
Robert L. Vessella[4], and Arne Scholz[5]

www.impactjournals.com/oncotarget/ Oncotarget, 2017, Vol. 8, (No. 43), pp: 74987-75006

Research Paper

Cabozantinib-induced osteoblast secretome promotes survival and migration of metastatic prostate cancer cells in bone

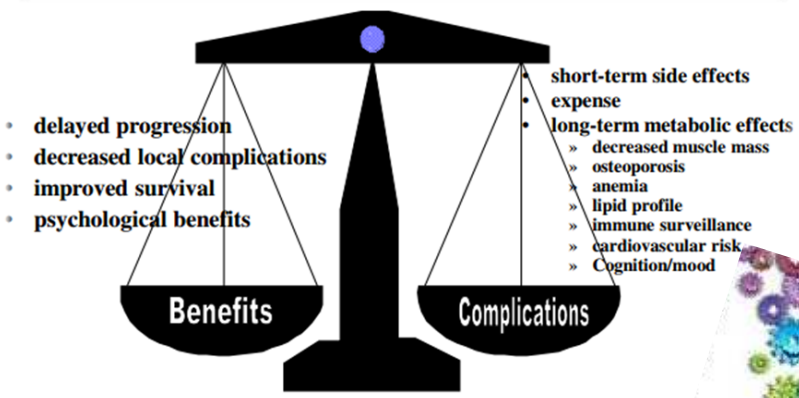
Kai-Jie Yu[1,5,6,*], Jeffrey K. Li[1,*], Yu-Chen Lee[1,*], Guoyu Yu[1], Song-Chang Lin[1], Tianhong Pan[7], Robert L. Satcher[7], Mark A. Titus[2], Li-Yuan Yu-Lee[4], Wen Hui Weng[6], Gary E. Gallick[2,3] and Sue-Hwa Lin[1,2,3]

[1]Department of Translational Molecular Pathology, The University of Texas M. D. Anderson Cancer Center, Houston, Texas, USA

[2]Department of Genitourinary Medical Oncology, The University of Texas M. D. Anderson Cancer Center, Houston, Texas, USA

[3]The University of Texas Graduate School of Biomedical Sciences at Houston, Houston, Texas, USA

[4]



F. Pantano, *et al.*

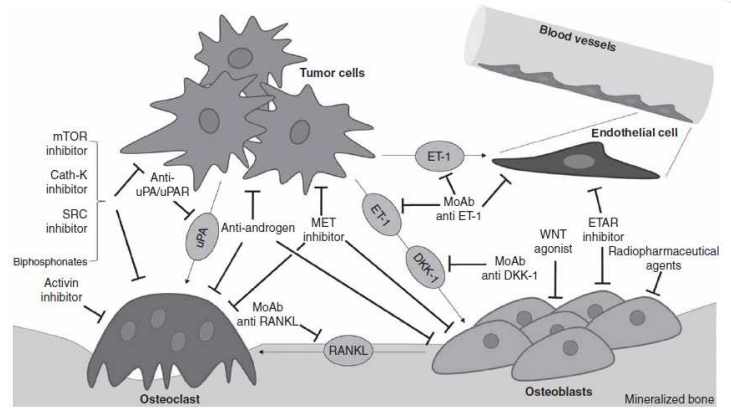


Figure 1. Pathways and molecules candidates in targeting bone metastases.

VI CONGRESSO NAZIONALE DELLA SOCIETÀ ITALIANA DI OSTEONCOLOGIA (ISO)

Padova, 14-15 Novembre 2017
PALAZZO ZACCO

Presidenti: *D. Santini, V. Zagonel*
Comitato Scientifico ISO: *A. Berruti, F. Bertoldo, N. Calipari, R. Casadei, T. Ibrahim, G. Lorusso*
Responsabili Scientifici: *A. Brunello, S. Zovato*

Con il patrocinio di:

Associazione Italiana di Oncologia Medica

Istituto Oncologico Veneto

Rete Oncologica Veneta