

Report from the Scandinavian Prostate Cancer Group August 2011 – August 2013

I was elected chairman of the SPCG in 2011 after a successful 30th Anniversary meeting held in Tampere by the former Chair Prof Teuvo Tammela. The following achievements have been reached since then.

Board meetings

We have held the yearly meeting in January at Arlanda. As collaboration with Oncologist, who also have been PI in one of our trials, we have decided at these meetings to change the rules for membership in the board. We now have one Oncologist with special Urological profile from each country as ordinary members. We have had at least one more board meeting yearly and have tried to arrange internet meetings through Skype with so far limited success.

Progress in SPCG Studies

SPCG 4 has reported QoL results through a dissertation from Eva Johansson in Uppsala defended in October 2011. Two papers has been published in major journals in 2012. A new update will be presented later this year.

SPCG 5 has published cardiovascular disease as a risk factor for Oestrogen treatment in 2011, the study is now considered finally closed.

SPCG 7 is working on an update this year, grants has been accepted for this work. Late side effects from radiation treatment was published in 2013.

SPCG 11 has reported the first central analysis for the Zeus study. Adding zoledronic acid in M0 high risk patients did not prolong the time to metastasis. The SPCG part of the study has not been analysed separately

SPCG 12 has now been closed for recruitment after 459 randomised patients for 3 years. Follow up proceed according to protocol and the final analysis is planned in 2015. It is the worlds largest study on adjuvant chemotherapy after radical prostatectomy for high risk patients.

SPCG 13 has recruited 363 patients and inclusion has closed. The study is on adjuvant chemotherapy after Radiation Treatment of high risk Prostate Cancer. An interim analysis of toxicity has been published in 2012. Follow up is ongoing and final analysis planned in 2017.

SPCG 14 has had a slow recruitment in randomising patients with rising PSA to bicalutamide +/- chemotherapy. The achievement is approximately 165 patients at the latest report.

SPCG 15 has been planned with a study board consisting of younger Urologists and Oncologists from all Scandinavian countries except Island. A application to the Ethics committee is planned in September 2013 under the lead of Dr Olof Akre, Karolinska, Stockholm. There have been several contacts with the EORTC regarding this study and workshops to outline the protocol. Hopefully the study can start recruitment this year and will be the next landmark study of SPCG.

SPCG 16 has been discussed; at first the suggestion was to be part of the PEACE-protocol planned by Prof Karem Fizazi. This was rejected as the interest to participate was limited. Instead the idea to randomise between docetaxel and abiraterone/enzalutamide in castrate resistant prostate cancer has been discussed. The Danish Board members are now trying to put together a synopsis for the Sandefjord meeting.

SPCG Trial meeting

In October 2012 the 3rd Trial meeting was held at the Johannesbergs Castle close to Arlanda with around 50 participants. The meeting is a joint venture with the industry and this time focused on locally advanced Prostate Cancer. Invited lecturers were Steven Joniau from Loeven, Belgium and Dr Kynaston, UK. Also a workshop for the SPCG 15 protocol was held to finalise the protocol. The trial meeting is held every 2nd year and is now established to support the collaboration between investigators, nurses and people from the industry.

SPCG Research Grant

From Ing-Britt and Stig Mårtensson foundation, a yearly Grant of 50 000 SEK is awarded to Clinical Research after application. Two Grants for 2011-2012 were donated to two young fellows in Copenhagen. There is a new Grant announced for 2013.

NUF-bulletinen

In NUF-bulletinen we have the “SPCG-corner” where we update the readers of our work and activities.

Economy

A donation of from Ing-Britt and Stig Mårtensson to a separate foundation under the SPCG foundation, has secured the possibility for SPCG to support the take off of new protocols. Support has been given to start the SPCG 15 study for workshop and applications. However, studies must be financed as much as possible in cooperation with the industry and through external applications. The economy is stable and gives room for the necessary meetings for the board as well as to support initiation of upcoming protocols.

Honorary members

P-O Hedlund who was one of the founders of SPCG and will be suggested as an Honorary Member as he now retires from the SPCG and the foundation.

In Conclusion

SPCG is an active group within NUF, in the meeting in Sandefjord the SPCG has a symposium updating the old active SPCG-studies as well as presenting the SPCG 15 and 16 protocols. We have a new generation of younger Urologists and Oncologists taking active part in the work and look forward to a bright future for the group.

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Chairman