

# MP18-7806: Propensity Score Matching (PSM) Comparison of Salvage Focal to Salvage Total Cryoablation of the Prostate

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## Objectives

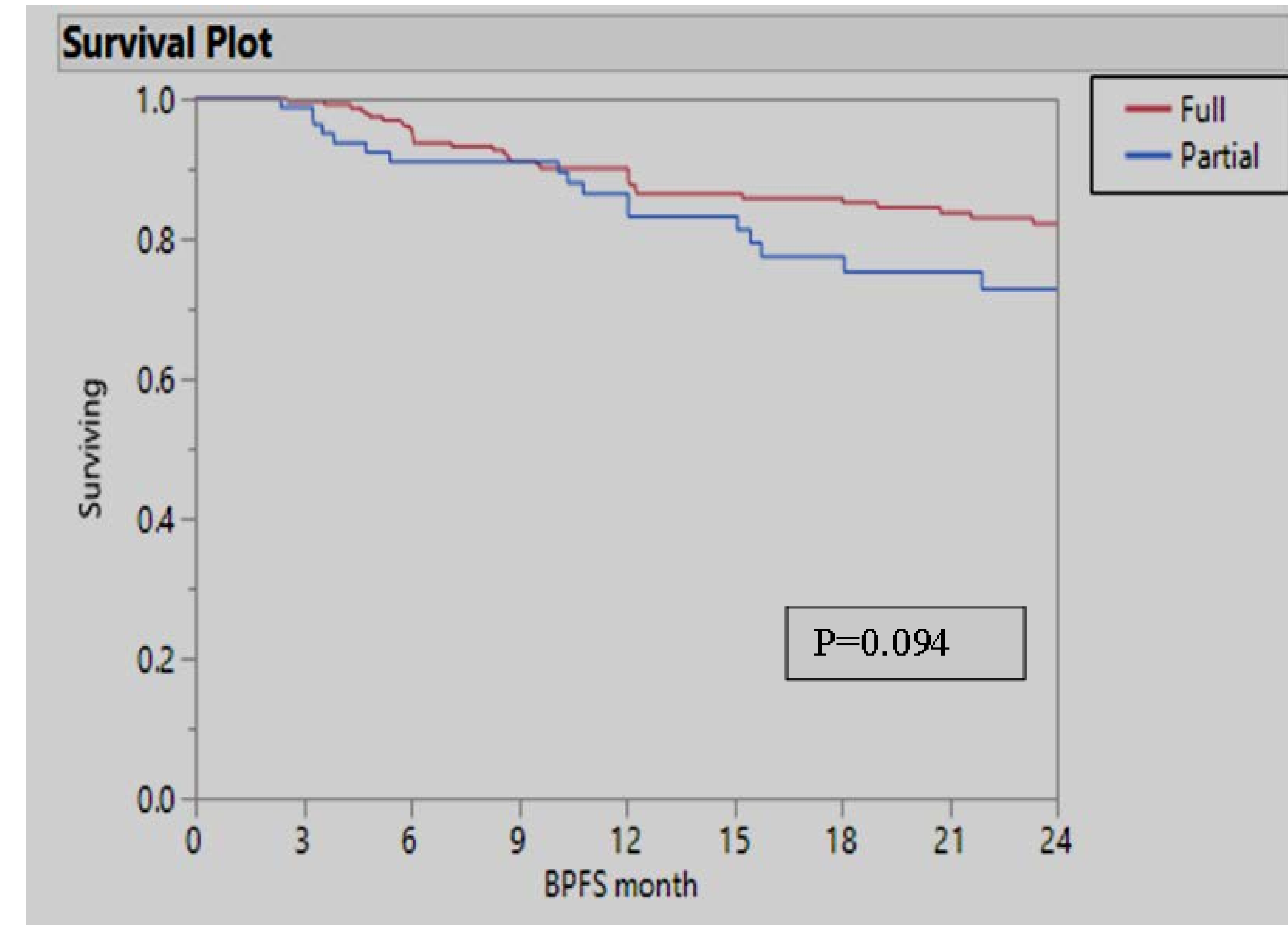
- To compare oncological efficacy and functional outcomes for focal (SFC) versus total (STC) salvage cryoablation of the prostate.

## METHODS

- In 400 men with recurrent disease after primary radiotherapy, we matched 100 treated with SFC to 300 treated with STC using propensity score matching with nearest neighbor method.
- Matching variables included age at time of treatment, pre-treatment PSA, Gleason sum, and NADT status.
- Primary outcomes were PFS using Phoenix criteria and post-treatment biopsy status.
- Secondary outcomes included post treatment urinary incontinence, ED, recto-urethral fistulae, and urinary retention.

## RESULTS

- Median age was 72 years (IQR.68-76).
- Median pre-treatment PSA 5.2 ng/ml (IQR, 3-8.7).
- Median Gleason Sum of 7 (IQR.6-7).
- There was a modest, non-significant improvement in 2-year PFS for STC compared to SFC (81.4% vs. 72.7%,  $p=0.09$ )
- No statistically significant difference in the prevalence of persistent cancer on post-treatment biopsy for STC compared to SFC (17/65 (26.2%) vs. 6/17 (35.3%),  $p=0.46$ ).
- STC was associated with a higher probability of transient urinary retention (17.7% vs. 8%.  $p=0.02$ ).
- No significant differences in post cryo urinary incontinence (28.4% vs.23.3%, $p=0.39$ ), rectal fistulae (2% vs 3%,  $p=0.56$ ) or new-onset ED (49% vs. 57.6%,  $p=0.47$ ) in STC vs. SFC respectively.



2 years KM BPFS comparing salvage full vs. salvage partial cryoablation of the prostate.

## CONCLUSIONS

- Compared to focal, whole gland salvage cryoablation was associated with a modest improvement in 2-year progression free survival and equivalent morbidity.
- Focal salvage cyroabaltion as opposed to whole gland therapy should be considered selectively, if at all, in men with exceptional sexual function even after primary radiation.