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Introduction & Objectives:

We aimed to investigate and compare the effect of goserelin acetate with leuprolide acetate on total prostate volume (TPV), post voiding residue (PVR), International Prostate Symptom Score (IPSS) and maximum flow rate (Qmax) reduction on cases of advanced Pca.

Materials & Methods:

Seventy one patients who taking hormono-therapy for advanced prostat carcinoma were enrolled between May 2015 and August 2016. Fifty one patients were found suitable for the study. Patients were divided into two groups (group 1: Who received goserelin acetate (10.8 mg /3 months), group 2: Patients who received leuprolide acetate (22.5 mg /3 months)). We recorded pre and post treatment Prostate specific antigen (PSA) and testosterone level, TPV, IPSS, PVR, and Qmax retrospectively.

Results:

Mean percent decrease in PSA (98.7%, 98.4%, respectively; p=0.9) and testosterone (92.9%, 96.4%, respectively; p=0.15) from baseline to 6th month was not significantly difference between two groups but TPV was reduced by (-20.2%±4.8, -15.6%±1.04), the median total IPSS score was decreased by (-34.77±8.8, -19.77±6.1), median Qmax increased by (%45.34±10.16 and %23.21±6.93), median PVR decreased by (-31.54±8.4, -19.23±5.5), respectively for two groups (all parameters (p < 0.05)).

Conclusions:

In this study, we observed that the improvement of voiding parameters goserelin acetate was better than that of leuprolide acetate. Especially it was detected the superiority of goserelin acetate group on the reduction of TPV, PVR and IPSS Despite PSA follow-up time is short, in the early period showed no significant difference in oncologic outcomes in both groups.