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Long acting LHRH analogue versus LHRH plus Cyproterone Acetate, versus Cyproterone Acetate alone in treatment of advanced prostate cancer.

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It is well known that continuos stimulation of gonadotrophins by the long acting LHRH agonist results in the paradoxical fall in LH and FSH and hence in Testosterone. It is also known the employ of LHRH analogues in treatment of prostatic carcinoma. We refer our experience obout 80 advanced prostatic carcinoma patients (stage C and D), submitted to random treatment with LHRH analogue (Zoladex, ICI, 118,630) or LHRH analogye plus antiandrogen (Cyptoterone Acetate Depot) at dosage of 300 mg weekly, or antiandrogen alone. The clinical examination, endocrino-strumental staging (hormonal assessment, isotope bone-scan, trans-rectal sonography) were performed as criteria from international protocol. The rationale and results of these type of trial, the first one never used, are discussed. The patients treated with Zoladex alone showed an prompte increase of LH, FSH and plasmatic testosterone at $3^{th}$ and $7^{th}$ day, at $28^{th}$ day these hormone levels reached to castrated. A second group of patients treated with Zoladex plus CPA, showed yet at $3^{th}$ and $7^{th}$ day hormonal levels lower than basal values, that remained under 100ng/100ml until $28^{th}$ day. A third group of patients showed a continous decrease of LH, FSH and Testosterone that showed a higher mean levels ( 140ng/100ml) as well observed in other studies with this type of treatment.

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EFFECTS OF TREATMENT WITH FLUTAMIDE,CYPROTERONE ACETATE AND LHRH ANALOGUE ON TESTICULAR TISSUE

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In order to evaluate the ultrastructural modifications induced on testicular tissue by treatment with Flutamide,Cyproterone Acetate and two LHRH analogues in advanced prostate carcinoma patients, we performed light and electron microscope examination of samples obtained by testicular biopsyes before and after 3 and 6 months therapy.In our patients, Flutamide was administered at dosage of 750 mg/daily,Cyproterone Acetate at dosage of 200 mg/daily.Zoladex (D-Ser-(But)6-Aza-Gly10-LHRH) was given subcut at 250 mg/daily and D-TRP6-LHRH-30 mg weekly. Light and electron microscope examination demonstrated that Flutamide does not induce modifications on Leydig cells; Cyproterone Acetate induces a severe damage of the interstitial tissue without contemporaneous evident effects on spermatogenesis.After a treatment of 3 months with the GNRH analogues interstitial tissue appeared substituted by a connective tissue, without presence of normal Leydig cells; germinal epithelium presents an arrest at spermatidical level.Zoladex induces a typical degeneration of nuclear membrane of spermatogonia.With D-TRP-6 notable signs of degeneration of Sertoli cells were observed.This findings confirm that the most important injury in target tissue by antihormonal actions are produced by LHRH analogue and CPA.Othervise it is well known that pure antiandrogens don't lower plasma androgens levels.