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IN BRIEF

PROSTATE CANCER

Effect of enzalutamide on health-related quality of life

Enzalutamide is associated with improved quality of life over placebo in men with progressive metastatic castration-resistant prostate cancer (mCRPC), according to a new study. Cella and colleagues randomly assigned 938 patients with mCRPC after docetaxel-based chemotherapy to either enzalutamide ($n=674$) or placebo ($n=264$). They evaluated FACT-P (Functional Assessment of Cancer Therapy–Prostate) scores at randomization, weeks 13, 17, 21, 25, and every 12 weeks thereafter and demonstrated that enzalutamide was associated with superior quality of life with two methods.

Original article Cella, D. *et al.* Impact of enzalutamide on quality of life in men with metastatic castration-resistant prostate cancer after chemotherapy: additional analyses from the AFFIRM randomized clinical trial. *Ann. Oncol.* doi:10.1093/annonc/mdl510

PROSTATE CANCER

IADT combined with 5 α -reductase inhibition

Intermittent androgen deprivation therapy (IADT) with a short or very short off cycle combined with 5 α -reductase inhibition might improve survival in patients with prostate cancer, say researchers. Previous work had shown that IADT combined with the 5 α -reductase inhibitor finasteride prolonged survival in animals with androgen-sensitive prostate tumours when off-cycle duration was fixed at 10–14 days, but that tumour growth resumed after several days. Pascal *et al.* used the LNCaP xenograft tumour model to show that use of IADT with 4-day off-cycles combined with the 5 α -reductase inhibitor dutasteride inhibited tumour regrowth and increased survival.

Original article Pascal, L. E. *et al.* 5 α -reductase inhibition coupled with short off cycles increases survival in the LNCaP xenograft prostate tumor model on intermittent androgen deprivation therapy. *J. Urol.* doi:10.1016/j.urol.2014.10.101

BPH

Oestrogen receptor beta agonist fails to improve symptoms

A new study reports that the oestrogen receptor beta agonist LY500307 does not improve symptoms in men with enlarged prostate secondary to benign prostatic hypertrophy (BPH). Roehrborn and co-workers' randomized, double-blind placebo-controlled study involving 414 patients showed that the drug was well tolerated but was terminated early because of an interim analysis that showed inadequate efficacy of LY500307 compared with placebo.

Original article Roehrborn, C. G. *et al.* Estrogen receptor beta agonist LY500307 fails to improve symptoms in men with enlarged prostate secondary to benign prostatic hypertrophy. *Prostate Cancer Prostatic Dis.* doi:10.1038/pcan.2014.43

PROSTATE CANCER

ASCO endorses adjuvant and salvage radiotherapy guideline

An ASCO endorsement panel has reviewed the 2013 AUA/ASTRO guidelines on adjuvant and salvage radiotherapy after prostatectomy and concluded that they are clear and thorough. The ASCO panel endorses the guidelines but they do add one qualifying statement that the risk of disease progression or recurrence is not the same for all candidates for adjuvant or salvage radiotherapy and, therefore, that the risk–benefit ratios are not the same for all men.

Original article Freedland, S. J. *et al.* Adjuvant and salvage radiotherapy after prostatectomy: American Society of Clinical Oncology Clinical Practice Guideline Endorsement. *J. Clin. Oncol.* doi:10.1200/JCO.2014.58.8525