Ablative therapy for people with localised prostate cancer: a systematic review and economic evaluation

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Plain English summary

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Ablative therapies are relatively new procedures for the treatment of localised prostate cancer. These therapies are promising because they may be as effective as either surgery or radiotherapy (i.e. standard treatments), while causing fewer side effects (e.g. incontinence or erection difficulties). They may also be better than active surveillance (whereby patients are monitored and only treated if there is cancer progression) because they actively treat cancer at diagnosis. They involve the application of different types of energy to either the entire prostate or specific areas with cancer, to achieve tissue destruction. Examples include cryotherapy (using rapid freezing and thawing), high-intensity focused ultrasound (HIFU, using heat generated from sound waves) and brachytherapy (using radioactive seeds implanted into the prostate). These procedures are generally carried out on a day-patient basis with patients allowed home the following day. The results from our study suggested that cryotherapy, HIFU and brachytherapy may have potential clinical benefits for many patients in terms of reduced incontinence and erection difficulties, while possessing similar benefits in terms of cancer control compared with either surgery or radiotherapy. However, the overall quality of the available evidence was very poor owing to the low quality of identified studies, and it remained impossible to determine if the benefits were real. In terms of balancing the cost of the ablative treatments against the benefits and harms produced, no technology appears better.
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This report

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