

PROSTATE CANCER TREATMENT REGIMENS

The selection, dosing, and administration of anticancer agents and the management of associated toxicities are complex. Drug dose modifications and schedule and initiation of supportive care interventions are often necessary because of expected toxicities and because of individual patient variability, prior treatment, and comorbidities. Thus, the optimal delivery of anticancer agents requires a healthcare delivery team experienced in the use of such agents and the management of associated toxicities in patients with cancer. The cancer treatment regimens below may include both FDA-approved and unapproved uses/regimens and are provided as references only to the latest treatment strategies. Clinicians must choose and verify treatment options based on the individual patient.

NOTE: GREY SHADED BOXES CONTAIN UPDATED REGIMENS.

General treatment notes:

- Encourage men with advanced prostate cancer to participate in clinical trials.¹
- Reserve systemic chemotherapy for men with castration-recurrent metastatic prostate cancer except when enrolled in a clinical trial.¹

REGIMEN	DOSING
First-Line Therapy	
Docetaxel (Taxotere) + prednisone ^{1,2}	Day 1: Docetaxel 75mg/m ² IV once every 3 weeks, plus Day 1: Prednisone 5mg orally twice daily. Repeat for up to 10 cycles if tolerated.
Sipuleucel-T (Provenge) ^{1,3,4}	Sipuleucel-T three complete doses (50million autologous CD54 ⁺ cells), given at 2-week intervals (range 1–15 weeks).
Second-Line Therapy	
Abiraterone acetate (Zytiga) ^{1,5,6}	Abiraterone 1,000mg orally once daily, plus prednisone 5mg orally twice daily
Cabazitaxel (Jevtana) + prednisone ^{1,7}	Day 1: Cabazitaxel 25mg/m ² IV, every 3 weeks, plus Day 1: Prednisone 5mg orally twice daily. Repeat for up to 10 cycles if tolerated.
Mitoxantrone (Novantrone) + prednisone ^{1,2,7} (palliative option)	Day 1: Mitoxantrone 12mg/m ² IV, every 3 weeks, plus Day 1: Prednisone 5mg orally twice daily. Repeat for up to 10 cycles if tolerated.
Sipuleucel-T (Provenge) ^{1,3,4}	Sipuleucel-T three complete doses (50million autologous CD54 ⁺ cells), given at 2-week intervals (range 1–15 weeks).

References

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