

# ASCO Genitourinary Cancers Symposium

#GU26

瀬戸 公介



ASCO Digital Initiatives

2026/2/26-2/28にアメリカのサンフランシスコで行われた  
米国腫瘍学会泌尿器科シンポジウム（ASCO GU2026）に参加しました。

## Salvage radiotherapy after radical prostatectomy in a Japanese cohort: Analysis from the MICAN study

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### BACKGROUND & PURPOSE

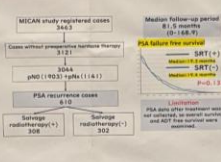
Salvage radiotherapy (SRT) is commonly used after PSA recurrence following prostatectomy, but survival benefit and optimal patient selection remain unclear. We evaluated outcomes using a large Japanese multicenter registry.

### Purpose

- Evaluating the Effectiveness of Salvage Radiation Therapy, Particularly Regarding Surgical Resection Margins, Based on the MICAN Study
- MICAN (Medical Investigation Cancer Network) STUDY
  - To analyze the treatment outcomes and prognostic factors in cases undergoing radical prostatectomy, and to verify which cases benefit from surgery
  - 3,463 cases undergoing radical prostatectomy at facilities belonging to the Ehime Prefecture Urological Association from January 2010 to December 2020

### METHODS

MICAN is a multicenter retrospective registry of radical prostatectomy cases from 2010-2020 (n=3,463). We analyzed 610 patients with PSA recurrence, pN0/pN1 status, and no neoadjuvant therapy. Patients were divided into SRT (+) (n=308) and SRT (-) (n=302). Salvage radiotherapy was delivered to the prostate bed at 60-72 Gy. Endpoints were overall survival and ADT-free survival. Multivariate analysis used Cox proportional hazards models.



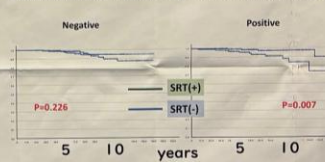
### RESULTS

A total of 610 patients with PSA recurrence (SRT, n=308; no SRT, n=302) were analyzed. Baseline characteristics were largely comparable between the two groups; however, patients receiving SRT were younger than those who did not receive SRT, while the distribution of surgical margin status did not differ between groups. In multivariate analysis, neither age nor surgical margin status was an independent predictor of overall survival. While no significant difference in overall survival was observed in the entire cohort, SRT was associated with a significant improvement in OS among patients with positive surgical margins, whereas no OS benefit was observed in margin-negative patients. In contrast, SRT independently prolonged ADT-free survival.

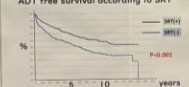
### Patient characteristics

Characteristic	SRT (+)	SRT (-)	P-value
Age (years)	67.1	70.1	<.001
PSA (ng/mL)	10.1	10.1	.98
PSA doubling time (months)	14.1	14.1	.98
Time to PSA recurrence (months)	14.1	14.1	.98
Time to SRT (months)	14.1	14.1	.98
Time to ADT (months)	14.1	14.1	.98
Time to death (months)	14.1	14.1	.98
Time to OS (months)	14.1	14.1	.98
Time to ADT-free survival (months)	14.1	14.1	.98

### Overall survival according to Resection Margin



### ADT free survival according to SRT



### DISCUSSION

Salvage radiotherapy improved overall survival specifically in patients with positive surgical margins, underscoring margin status as a determinant for patient selection. The significant prolongation of ADT-free survival further supports the clinical value of SRT in this systemic therapy after biochemical recurrence.

### CONCLUSION

Salvage radiotherapy was associated with a significant overall survival benefit in patients with positive surgical margins after PSA recurrence, but not in those with negative margins. SRT also significantly prolonged ADT-free survival in this Japanese multi-institutional cohort.



今回は応募した演題が採択され、「Salvage radiotherapy after radical prostatectomy in a Japanese cohort: Analysis from the MICAN study」という演題でポスター発表しました。初の海外発表で緊張しましたが、無事終わることができました。



また最新の泌尿器科分野の発表を聞くことができ、非常に刺激になりました。



食事はシーフードが有名ですが、どれもとても美味しかったです。



また、ケーブルカーに乗り込み、フィッシャーマンズワーフ、ゴールデンゲートブリッジを観光しました。



他大学の先生方ともお会いすることができ、有意義な学会となりました。