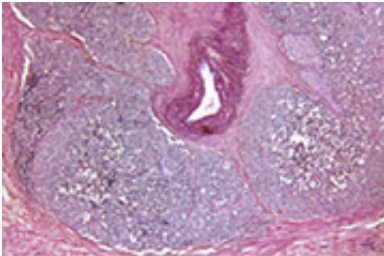


# CVD risk up with androgen deprivation Tx in prostate cancer

March 11 2015

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Microscopic view of prostate cancer

(HealthDay)—For men with prostate cancer (PCa), the risk for incident cardiovascular disease (CVD) is increased with androgen deprivation therapy (ADT), according to a study published online March 2 in the *Journal of Clinical Oncology*.

Sean O'Farrell, from King's College London, and colleagues used data on filled drug prescriptions in Swedish national health care registers to examine the risk of CVD associated with ADT in men with PCa. Data were collected in a cohort of 41,362 men with PCa on ADT and an age-matched PCa-free comparison cohort of 187,875 men. Overall, 10,656 men were on antiandrogens (AAs); 26,959 were on gonadotropin-releasing hormone (GnRH) agonists; and 3,747 underwent surgical orchiectomy from 2006 to 2012.

Compared to the comparison cohort, the researchers found that the risk of CVD was increased in men on GnRH agonists (hazard ratio for incident CVD, 1.21) and in those who underwent orchiectomy (hazard ratio, 1.16). The risk of incident CVD was decreased for men on AAs (hazard ratio, 0.87). Men who experienced two or more cardiovascular events before therapy had the highest CVD risk during the first six months of ADT versus the comparison cohort, with hazard ratios of 1.91 for GnRH agonist [therapy](#); 1.60 for AAs; and 1.79 for orchiectomy.

"There should be a solid indication for ADT in [men](#) with PCa so that benefit outweighs potential harm," the authors write.

Several authors disclosed financial ties to Ferring.

**More information:** [Abstract](#)  
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