

Prostate cancer immunotherapy works better for African-American men

May 15, 2017 11:30 AM Keith Brannon
kbrannon@tulane.edu
504-862-8789



Dr. Oliver Sartor, C.E. and Bernadine Laborde Professor for Cancer Research at Tulane University School of Medicine, presented the study results at the 112th American Urological Association annual meeting in Boston. Photo by Paula Burch-Celentano.

New study results released by Tulane University oncologist [Dr. Oliver Sartor](#) hold promising news for African-American men fighting advanced prostate cancer.

African-American men treated with immunotherapy drug sipuleucel-T had a median nine-month overall survival advantage compared to Caucasian men with the

disease, according to an analysis of 1,900 patients who received the treatment between 2011 and 2013.

Sartor, C.E. and Bernadine Laborde Professor for Cancer Research at Tulane University School of Medicine, presented the results at the 112th American Urological Association annual meeting in Boston on Saturday.

“This is the first time that I have ever seen a prostate cancer treatment seemingly work better in African Americans,” said Sartor, lead author of the study. “These new findings are very encouraging given that African-American men with prostate cancer have a mortality rate more than twice as high as Caucasian men and historically have presented with aggressive disease and have had worse outcomes in both real-world settings and controlled clinical trials.”

Sipuleucel-T is a cancer treatment that boosts the immune system to help it attack prostate cancer cells. It is used for advanced prostate cancer that no longer responds to hormone therapy.

The analysis found that African-American patients in the study had a median overall survival of 37.3 months compared to 28 months for Caucasian patients. Among the group of patients with the lowest median prostate specific antigen (PSA) levels at the time of treatment, African-American patients demonstrated over 16 months improved survival compared with Caucasian patients (54.3 months vs. 37.4 months, respectively).

“The fact that we saw an even greater benefit in African-American patients within the lower PSA quartile ranges is also important and provides further evidence that sipuleucel-T is best used early for those with metastatic hormone-resistant disease.”

Sartor was part of the steering committee that lead the study registry and headed up the analysis focusing on African-American patients’ results.

"These new findings are very encouraging given that African-American men with prostate cancer have a mortality rate more than twice as high as Caucasian men."
Dr. Oliver Sartor