



Novel Insights into the Molecular Mechanisms of Treatment Resistance and Predictive Biomarkers in Metastatic Prostate Cancer

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Message from the Guest Editors

Prostate cancer (PC) is the most common malignancy in men and a major cause of cancer death. For patients with PC who experience disease relapse after local therapy or for those with metastatic disease, androgen deprivation therapy (ADT) is the backbone of systemic therapy. However, almost all metastatic patients progress to an incurable metastatic castration-resistant prostate cancer (mCRPC), defined as radiographic progression and/or a rise in prostate-specific antigen (PSA) despite having a castrate level of testosterone. Although several new options for the treatment of mCRPC have been approved in the last decade—the CYP17 inhibitor abiraterone, the androgen receptor antagonist enzalutamide, the taxane cabazitaxel, the immunotherapy sipuleucel-T, the alpha-emitter radium-223 as well as PARP inhibitors and PSMA radioligands—unfortunately, not all patients initially respond to these therapies, while nearly all of them develop resistance. Thus, understanding the molecular and clinical mechanisms leading to therapy resistance and determine new predictive biomarkers is crucial.





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Message from the Editor-in-Chief

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