



New Insights into Diagnosis and Treatment of Prostate Cancer and Urological Epidemiology

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Message from the Guest Editors

Prostate cancer is the second most commonly diagnosed cancer in men. Patients with localized prostate cancer mostly undergo definitive curative therapy with surgery or radiation, followed by monitoring of prostate-specific antigen (PSA). However, approximately 30% of patients who undergo definitive treatment will have disease relapse. Androgen-deprivation therapy has been the mainstay of treatment for advanced prostate cancer and usually induces disease regression commonly defined by PSA declines, radiographic responses, and clinical improvement. Over time, castration-resistant prostate cancer (CRPC) cells emerge. CRPC is a heterogeneous disease state that ranges from the serologic progression of disease-only with no radiographic or clinical evidence of metastasis to evidence of metastasis and significant debilitating symptoms from disease progression. Therefore, there is an unmet need to identify new reliable markers, new non-invasive diagnostic approaches, new therapeutic targets, and novel drugs with appropriate treatment therapies to delay and/or overcome the development of CRPC, which results in cancer metastasis.





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