

EVIDENCE BASED MEDICINE?

by Charles (Chuck) Maack – Prostate Cancer Advocate/Mentor

We often hear of physicians who question the use of, for example, 5Alpha Reductase (5AR) inhibitors (dutasteride/Avodart or finasteride/Proscar), in androgen/hormonal deprivation therapy for advanced or recurring prostate cancer. They claim that they follow only “Evidence Based” Medicine.” Evidence based medicine works best for those who do their own research to determine that evidence rather than only read or listen to those who merely follow the direction provided in the National Comprehensive Cancer Network (NCCN) guidelines and fail to do their own homework. Medical Oncologists who are providing general cancer treatment should keep in contact with and review the papers authored by their colleagues who are specialists “specifically” in prostate cancer treatment (Stephen B. Strum, Ashland, Oregon; Charles E. “Snuffy” Myers, Earlysville, Virginia; Mark Scholz and Richard Lam, Marina del Rey, California; Robert “Bob” Leibowitz, Los Angeles, California; Glenn Tisman, Whittier, California, to name a few). And it would behoove all physicians treating prostate cancer to avail themselves of the material available at the Prostate Cancer Research Institute (PCRI) website www.pcri.org, and specifically the papers available under the index words “PCRI Papers” and “Newsletters.” This would keep them more and better in touch with the reality of treating advanced “prostate” cancer.

Undoubtedly, evidence based medicine is the safe road to travel for those physicians who may not have time to involve themselves in research, but evidence based medicine can be trumped by the protocols determined by physicians who go the steps beyond to determine the importance and usefulness of medications not having made it to the expense of trials to determine their efficacy.