Introduction

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This issue offers a detailed report on the presentations and discussions which took place at the recent Takeda Sponsored Symposium 'Hormonal Effects on Prostate Cancer Growth: Recent Scientific Progress and Clinical Outcome', held March 23, 1998, in Barcelona, as part of the XIIIth Congress of the European Association of Urology. I am grateful to the speakers for their excellent presentations, and to the audience for their active participation which made the symposium an invaluable forum for controversial issues relating to the therapy of prostate cancer (PCa). We were all extremely fortunate to be able to take part in this meeting where eminent scientists, oncologists and urologists presented the latest preclinical and clinical findings concerning hormonal effects on PCa growth. The high caliber of international experts convened for this meeting allowed us to develop a program which examined hormonal therapy in a range of different situations.

We discussed not only the use of luteinizing hormone-releasing hormone analogue (LH-RHa) as adjuvant therapy for metastatic PCa, but also neoadjuvant and adjuvant therapy for treating localized or locally advanced PCa. It was also timely that we included the topic of intermittent androgen blockade, as this is an area which is fast becoming of great interest and debate in the urological community. To help in developing a consensus on this emerging treatment option and other contentious issues, the symposium provided the chance to share and discuss the latest findings with our panel of specialists.

Prof. Sica, who has worked for many years on growth control of hormone-dependent tumors, spoke on the effect of an LH-RHa, leuporelin, on cell growth and expression of prostate-specific antigen in human prostatic cancer cells. Prof. Altwein lectured on therapeutic options available for optimal management of locally defined or advanced PCa. This was followed by Prof. Prezioso who gave his opinion on the new role of neoadjuvant hormonal treatment in clinically confined PCa. Prof. Bolla, responsible for one of the most important trials of the EORTC, spoke on adjuvant hormonal treatment with radiotherapy for localized or locally advanced PCa. We were fortunate to have the opportunity to hear him present the results of this major trial. Two presentations focusing on intermittent therapeutic schedules followed. The first, by Prof. Tunn, outlined the results from a trial investigating intermittent complete androgen blockade for prostate-specific antigen relapse after radical prostatectomy and in incidental PCa. This was followed by Prof. Rambeaud's presentation in which he addressed the issue of intermittent complete androgen blockade in metastatic PCa and gave his opinion on this new therapeutic modality.

For those who were not fortunate enough to attend this stimulating symposium, I urge you to read the following Proceedings to gain a comprehensive insight into some of the major issues facing urologists today.