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## Symposium on Carcinoma of the Prostate — Introduction

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## Symposium on Carcinoma of the Prostate — Introduction

Joseph C. Cerny, MD,\* *Guest editor*

In spite of a variety of clinical innovations in diagnosis, staging and treatment of prostatic carcinoma, age-adjusted death rates for this neoplasm have not changed significantly in 40 years. It is estimated that 60,000 new cases of cancer of the prostate will be diagnosed in this country in 1976, and that 20,000 patients will die of this disease. Most common of the genitourinary neoplasms, prostatic cancer is the third most frequent cause of all cancer deaths in men.

A resurgence of basic and clinical research activity in the past five years has initiated a sense of optimism that the inexorable mortality from prostatic carcinoma may at last be vulnerable to reversal. Increasingly, the importance of a multidisciplinary approach to the patient with carcinoma of the prostate is evident. The integrated and intensive efforts of Urology, Pathology, Radiology, Radiotherapy, Oncology, and Immunotherapy must be focused on each patient with this disease, if improved survival is to be achieved.

This issue of the Journal consists of papers presented at a Symposium on Carcinoma of the Prostate held at Henry Ford Hospital, in conjunction with the Detroit Branch of the

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### **Cerny, Guest Editor**

American Urological Association, Inc., January, 1975. The scope of topics presented confirms the role of specialties and disciplines other than Urology in the current management of this disease. The papers deal with those areas of investigation of prostatic cancer which are intensely under study,

and provide optimism for the future, eg, early and accurate staging of the disease, radical surgery in properly selected patients, radiation therapy, chemotherapy, immunotherapy, and appropriate, individualized palliation.