

New Information About How to Treat Recurring Prostate Cancer

PET and CT scans helped doctors select best treatment option and reduce side effects of treatment, finds a UCLA study published in JNCCN.

February 24, 2026 By National Comprehensive Cancer Network

New research in the February 2026 issue of [JNCCN—Journal of the National Comprehensive Cancer Network](#) found that incorporating information from prostate-specific membrane antigen (PSMA) PET/CT scans may be able to predict progression-free survival (PFS) and guide treatment planning in patients with rising prostate-specific antigen (PSA) levels following removal of the prostate.

The researchers used retrospective clinical data from 113 patients treated for prostate cancer at University of California Los Angeles (UCLA) Jonsson Comprehensive Cancer Center. All were staged with PSMA PET/CT scans for recurrent disease.

According to exploratory analysis, patients who showed no visible disease on the scans (T0N0M0) had the most favorable PFS, and whole-pelvis radiotherapy (WPRT) had no significant benefit compared to prostate bed radiotherapy alone. However, WPRT did significantly improve PFS for patients with local, visible disease (T_RN0M0). For patients with nodal or distant metastatic disease visible on the scans, androgen deprivation therapy (ADT) was significantly associated with improved PFS. Thus, PSMA PET/CT scans may help better tailor therapy for recurrence in this patient population.

“This research highlights the importance of facilitating routine PSMA PET/CT scans in patients with a biochemical recurrence of prostate cancer after surgery to remove the prostate gland,” said Lead Researcher John Nikitas, MD, UCLA Jonsson Comprehensive Cancer Center. “The information from these scans is strongly associated with long-term outcomes and frequently changes treatment recommendations. We found that other measures, like PSA levels, were not strongly associated with long-term response to secondary/salvage therapy.”

The researchers noted that by using PET/CT scans, they may be able to tailor therapies to not only achieve better results but also to reduce side-effects by avoiding any treatments that are less

likely to be effective.

“PSMA PET imaging lets us move from one-size-fits-all radiation therapy in the secondary/salvage setting to treatment that’s guided by the anatomy, and perhaps by extension, the actual biology of a patient’s prostate cancer,” commented E. Christopher Dee, MD, Memorial Sloan Kettering Cancer Center, who was not involved in this research. “This study shows that seeing where the cancer is, even at low PSA levels, may meaningfully shape treatment decisions and could potentially influence long-term outcomes. It’s a step forward in making prostate cancer care more precise and effective and can inform future prospective research in the secondary/salvage radiation space.”

Dr. Dee wrote a longer commentary on the study that is also featured in the February 2026 issue of JNCCN. To read the entire study “[Five-Year Outcomes After Prostate-Specific Membrane Antigen PET/CT-Guided Salvage Radiotherapy Following Radical Prostatectomy](#)” and the corresponding “[The Last Word](#)” commentary, visit JNCCN.org.

[This announcement](#) was originally published February 9, 2026, on the [National Comprehensive Cancer Network website](#).

© 2026 Smart + Strong All Rights Reserved.

<http://beta.docker.cancerhealth.com/article/personalized-treatment-recurring-prostate-cancer-leads-better-outcomes>