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*abstract*

## **Early Clinical Outcomes of Prostate SBRT: Regional Experience Driving Global Standards in Cancer Care**

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## Early Clinical Outcomes of Prostate SBRT: Regional Experience Driving Global Standards in Cancer Care

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**Introduction:** Stereotactic body radiotherapy (SBRT) has emerged as an effective, convenient, and resource-efficient treatment for localized prostate cancer, offering excellent tumor control with minimal toxicity. While global evidence supports its use, regional validation is essential to ensure safe and standardized adoption. This study presents early clinical outcomes from a regional SBRT program designed to align with international protocols and collaborative best practices.

**Methodology:** Consecutive patients with localized prostate cancer were treated with image-guided SBRT (36.25 Gy in 5 alternate-day fractions) to the prostate  $\pm$  seminal vesicles  $\pm$  pelvic nodes at HCG Cancer Centre, Mumbai. Treatments were delivered using Versa HD or CyberKnife platforms with stringent motion management—image verification on Versa HD and fiducial tracking on CyberKnife—and adherence to international organ-at-risk constraints. Outcomes assessed included PSA kinetics, acute and early late toxicities, and patient-reported urinary, bowel, hormonal, and sexual quality of life (QOL).

**Results:** Eighty-three patients were analysed with a median follow-up of 21 months. Rapid PSA decline was observed, 95% patients achieving biochemical control within 3–6 months. Overall, 5% local and distant failures. Acute urinary and bowel toxicities were mainly Grade 1–2, with no Grade  $\geq 3$  events. Temporary declines in patient-reported QOL during treatment returned to near baseline by 3 months. The collaborative regional framework enabled consistent training, quality assurance, and protocol harmonization across teams.

**Conclusion:** This early regional experience demonstrates that prostate SBRT can be safely implemented with excellent short-term biochemical control, minimal toxicity, and preserved QOL. Establishing regionally collaborative SBRT programs that adhere to global standards fosters safe adoption, generates context-specific evidence, and advances equitable global prostate cancer care. Long-term follow-up will further define durability and late effects.

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