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Patterns of de novo metastatic prostate cancer presentation: clinical, biological, and topographic characteristics at Mohammed VI University Hospital

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Background:
Unlike countries with organized screening, prostate cancer in Morocco is often diagnosed at a metastatic stage. Detailed description of presentation patterns and sites of involvement remains scare in the regional literature.

Methods:
Among 223 patients followed for prostate adenocarcinoma in the medical oncology department of the Mohammed VI University Hospital between January 2022 to December 2024, 181 presented with de novo metastatic disease (stage VI). Presenting symptoms, PSA, ISUP grade, metastatic topography, and tumor volume (CHAARTED criteria) were analyzed.

Results:
We identified 181 patients with de novo metastatic disease. Median age at diagnosis was 70 years (range: 48 - 89). Presentation was dominated by urinary symptoms (95% of the whole cohort, 172/181), followed by osteoarticular pain (30/181, 16.7%) and neurological signs suggestive of spinal cord compression (18/181, 10%).
Median PSA at diagnosis reached 146 ng/mL (IQR 36.4-745), and ISUP grade ≥ 4 was found in 65% of metastatic patients. Bone involvement was almost constant (176/181, 97.3%), isolated in 61.3% of cases and combined with other sites (visceral and/or nodal) in 35.9%. Visceral involvement (lung, liver, adrenal, meninges) was noted in 23% of patients, nodal involvement in 20.3%. High-volume disease (CHAARTED) was present in 73.2% of evaluable patients (n=120).

Conclusions:
In this cohort, metastatic prostate cancer in Morocco is characterized by predominant bone involvement, high PSA and histological grade, and a high proportion of high-volume disease, reflecting a structural diagnostic delay. These data support the value

of targeted early screening and improved access to upfront chemo-hormonal therapy in this high-risk population.