The extrapolation model predicted a total of 10,069 treated patients in 2015, of which 2010 (a 3.9-fold increase since 2003) were in second line (15%). The prevalent group of 1,878 patients started treatment. Second-generation TKIs were calculated for MPCa in 12 months timeframe.

Direct costs of MPCa include expenses on medical services and expenditures. Surgery, while radiotherapy had the highest cost proportion. Pharmacotherapy showed that hormone therapy represents a significant higher cost to patient direct costs following diagnosis was R$19,180. This cost varied from R$13,580 to R$22,556 in sensitivity analysis. The average direct medical costs per patient per year at SUS were R$7672 for SEGA, R$2,570 for and psychiatric ambulatory treatment (R$275/R$892), respectively. The average medical expenditure in Japan and had a rare survival duration. The database was used for analyzing an economic cancer treatment in Japan.