Claims

1. Use of a PSMA-binding radioligand therapeutic (RLT) agent, e.g. lutetium (^{177}Lu) vipivotide tetraxetan ([^{177}Lu]Lu-PSMA-617), or a pharmaceutically acceptable salt, solvate, hydrate, co-crystal, crystalline form, amorphous form, stereoisomer, or tautomer thereof in the manufacture of a RLT agent for use in a method of delaying castration and/or disease recurrence in adult male patients with prostate-specific membrane antigen (PSMA) positive (+) Oligometastatic Prostate Cancer (OMPC), wherein the method comprises the steps of:
   - (1^{st}) applying to said patients Stereotactic Body Radiation Therapy (SBRT), and
   - (2^{nd}) administering to said patients a therapeutically effective amount of the PSMA-binding radioligand therapeutic (RLT) agent, e.g. lutetium (^{177}Lu) vipivotide tetraxetan ([^{177}Lu]Lu-PSMA-617), or a pharmaceutically acceptable salt, solvate, hydrate, co-crystal, crystalline form, amorphous form, stereoisomer, or tautomer thereof.

2. The use of claim 1, wherein, the OMPC is a OMPC with 1 to 5 metastatic lesions detected by PSMA positron emission tomography (PET) using a radioligand imaging (RLI) agent comprising a positron-emitting radionuclide, but negative for M1 disease by conventional imaging (CI).

3. The use of claim 2, wherein the positron-emitting radionuclide is selected the group consisting of ^{18}F, ^{64}Cu, and ^{68}Ga.

4. The use of claim 2, wherein the RLI agent is selected from the group consisting of gallium (^{68}Ga) gozetotide [[^{68}Ga]Ga-PSMA-11], ^{64}Cu-SAR-bisPSMA, ^{64}Cu-PSMA I&T [copper (^{64}Cu) zadavotide guraxetan], piflufolastat (^{18}F) [^{18}F-DCFPyL], flotufolastat (^{18}F) [^{18}F-rhPSMA-7.3], vidoflufolastat (^{18}F) [^{18}F-CTT1057], ^{18}F-PSMA-1007, preferably selected from the group consisting of gallium (^{68}Ga) gozetotide and piflufolastat (^{18}F).

5. The use of claim 2, wherein the CI is based on Computed Tomography (CT)/Magnetic Resonance Imaging (MRI) and/or bone scans.

6. The use of claim 1, wherein the RLT agent is administered at a dose of from about 6 to about 8 GBq, preferably about 6.5 to about 7.8 GBq, more preferably 7.4 (±10%) GBq, once every 5 to 10 weeks, preferably 6 to 8 weeks, more preferably 6 (±1) weeks (i.e. 1 cycle) for up to 3 or to 4 cycles, preferably for 3 to 4 cycles, more preferably for 4 cycles.

7. The use of claim 1, wherein the radioligand therapeutic agent is administered at a dose of 7.4 (±10%) GBq once every 6 (±1) weeks (i.e. 1 cycle) for 4 cycles.

8. Use of a PSMA-binding radioligand therapeutic (RLT) agent, e.g. lutetium (^{177}Lu) vipivotide tetraxetan ([^{177}Lu]Lu-PSMA-617), or a pharmaceutically acceptable salt, solvate, hydrate, co-crystal, crystalline form, amorphous form, stereoisomer, or tautomer thereof in the manufacture of a RLT agent for use in a method of delaying castration and/or disease recurrence in adult male patients with prostate-specific membrane antigen (PSMA) positive (+) Oligometastatic Prostate Cancer (OMPC), wherein the method comprises the steps of:

(1^{st}) applying to said patients Stereotactic Body Radiation Therapy (SBRT), and

(2^{nd}) administering to said patients a therapeutically effective amount of the PSMA-binding radioligand therapeutic (RLT) agent, e.g. lutetium (^{177}Lu) vipivotide tetraxetan ([^{177}Lu]Lu-PSMA-617), or a pharmaceutically acceptable salt, solvate, hydrate, co-crystal, crystalline form, amorphous form, stereoisomer, or tautomer thereof;

wherein the OMPC is a OMPC with 1 to 5 metastatic lesions detected by PSMA positron emission tomography (PET) using a radioligand imaging (RLI) agent comprising a positron-emitting radionuclide, but negative for M1 disease by conventional imaging (CI);

wherein the positron-emitting radionuclide is gallium (^{68}Ga) gozetotide or piflufolastat (^{18}F);

wherein the CI is based on Computed Tomography (CT)/Magnetic Resonance Imaging (MRI) and/or bone scans; and

wherein the radioligand therapeutic agent is to be administered at a dose of 7.4 (±10%) GBq once every 6 (±1) weeks (i.e. 1 cycle) for 4 cycles.

9. A PSMA-binding radioligand therapeutic (RLT) agent, e.g. lutetium (^{177}Lu) vipivotide tetraxetan ([^{177}Lu]Lu-PSMA-617), or a pharmaceutically acceptable salt, solvate, hydrate, co-crystal, crystalline form, amorphous form, stereoisomer, or tautomer thereof for use in therapy.