

Prostate Cancer MRI *Accurate Diagnosis and Treatment*

All men at risk of prostate cancer need to be investigated

Some men investigated benefit from an MRI

Not all men who have an MRI require a biopsy

(Learn more, pamphlets 2, 3 and 4)

SAMUEL ARONSON, M.D.
Assistant Professor of Urology, McGill University

Groupe Santé Physimed
6363, Transcanadienne, suite 121
Saint-Laurent (Quebec) H4T 1Z9
Phone: 514 747-8888
Fax: 514 747-8188

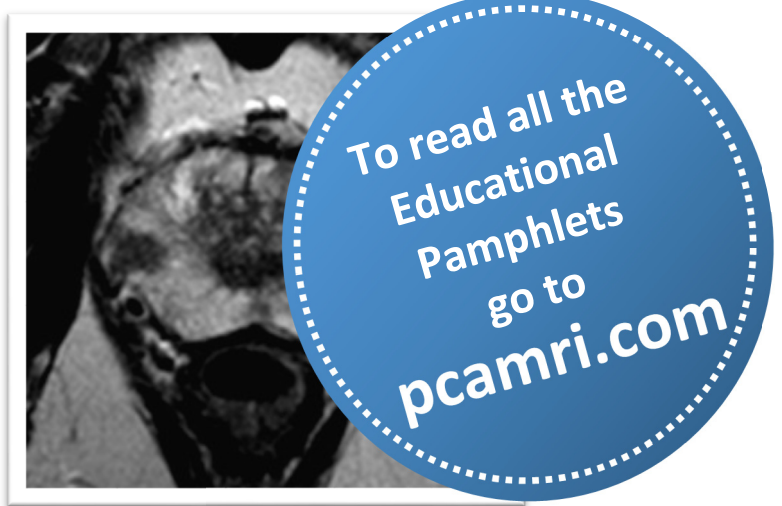
Jewish General Hospital
3755, Côte Ste-Catherine Rd, E-959
Montreal (Quebec) H3T 1E2
Phone: 514 340-7558
Fax: 514 340-7559

Designed by Annie Desjardins
Sponsored by Groupe Santé Physimed

www.pcamri.com

info@pcamri.com

Tips For Patients



PSA to Prostate MRI

for patients and curious doctors

Samuel Aronson, M.D.

Franck Bladou, M.D.

Armen Aprikian, M.D. & Marc Emberton, M.D. Forewords

can you imagine being treated
for a high fever, racking cough and
pneumonia without a chest x-ray ?
can you imagine being diagnosed or
treated for prostate cancer
without your doctor being able to see it ?
that is what we were doing
finally, the prostate can be seen
in anatomic and functional detail with
prostate MRI

Tips for patients

- > If you are concerned about prostate cancer, have a family-genetic history or are a black gentleman go to a friendly urologist for **Prostate Cancer Risk Assessment**.
 - Early prostate cancer has no symptoms
 - **Never believe** one PSA value. PSAs increase with age and for many reasons other than cancer.
 - **PSA trend** and **PSA density** are better predictors of cancer.
 - Newer advanced prostate cancer biomarkers and predictor tables are remarkably accurate.
- > If your urologist feels a **bump** on your prostate it may be stones, BPH, granulomas or cancer.
- > If you have a **High Risk** for prostate cancer, prostate **MRI** is usually indicated
- > MRI cannot be done or the study is **limited** when you have metallic body parts, poor kidney function and claustrophobia.
- > The advice to have a **prostate biopsy** is based on your **Risk** and the **MRI**.
 - A highly suspicious MRI usually requires **biopsy**
 - Mildly suspicious MRI may only need **monitoring** (always more accurate, do the MRI before biopsy)

*Early prostate cancers grow slowly.
Risk assessment, MRI, biopsy and treatment are not emergencies.
Take the time, have them done thoroughly and accurately.*

*When biopsy detects cancer
do not get alarmed
Most prostate cancers are **not aggressive**
grow very slow, cause **no harm**
For **aggressive cancers**
newer, effective, less invasive **treatments***