Prostate Cancer

The Men at Risk

> Less than **70** years with good health

> More than **10** year life expectancy
(most prostate cancers grow slowly, take years to grow dangerous;)

> Family – Genetic **History** of prostate cancer

> Black gentlemen

> Smoking, excess alcohol, environmental exposures

> Obese gentlemen

> **Persistent** PSA elevation in men less than 65 years old

> PSA increases in men on Avodart, Proscar, Testosterone

> PSA progression faster, higher than expected

> PSA more than **10** PSAD more than **0.15**

> Prostate nodule felt on digital rectal exam

> Men on **Active Surveillance**

> **Abnormal** Biomarkers and Predictor Tables

> **Previous** MRI, biopsy or diagnosis of prostate cancer

> **MRI PI-RADS Score** 4, 5, cancer nodules greater than 0.5 cc

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Prostate Cancer MRI
Accurate Diagnosis and Treatment

Prostate Cancer Risk Assessment
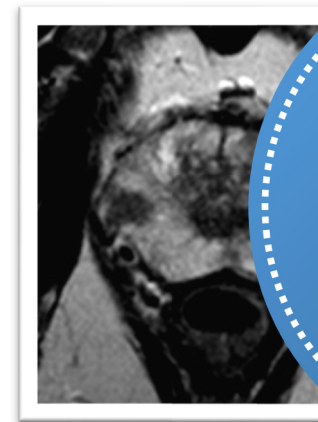
To read all the Educational Pamphlets go to pcamri.com

PSA to Prostate MRI

for patients and curious doctors

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Prostate Cancer Risk Assessment

Selects men for MRI

History

- ☐ Life expectancy, Age
- ☐ Major Illnesses
- ☐ Family-Genetic History
- ☐ Race
- ☐ Lower Urinary Tract Symptoms Urinary Tract Infections,
- ☐ Prostatitis
- ☐ 5 alpha reductase inhibitors (Avodart, Proscar)
- ☐ Testosterone
- ☐ Smoking, excess alcohol, environmental pollution
- ☐ **Previous** PSAs PSA Progression
- ☐ PSA Density
- ☐ **Previous** MRI, biopsy, prostate cancer, surgeries
- ☐ Predictor Tables
- ☐ Molecular-Genetic Biomarkers
- ☐ Metal fragments in the body

Exam

- ☐ Weight, Height
- ☐ Obesity
- ☐ Testicles
- ☐ Digital Rectal Exam

Laboratory

- ☐ PSA
- ☐ Molecular-Genetic Biomarkers
- ☐ Creatinine
- ☐ Urinalysis, urine culture

Imaging

- ☐ Trans Rectal Prostate Ultrasound (prostate volume, PSA density, post void residual, middle lobes)

MRI selects men for biopsy

Lead-Time Bias

PSA, other Biomarkers, Predictor Tables, prostate MRI and prostate biopsy may create Lead-Time Bias (the false improvement in cancer survival resulting from early diagnosis and treatment of non-aggressive, biologically inactive prostate cancers which will never harm patients).

Pre-Programmed Follow-up

Men at risk of prostate cancer who have a normal MRI and no biopsy or have a suspicious MRI and negative biopsy,

Active Surveillance

Men with diagnosed untreated non-aggressive cancer monitored in Active Surveillance Programs.