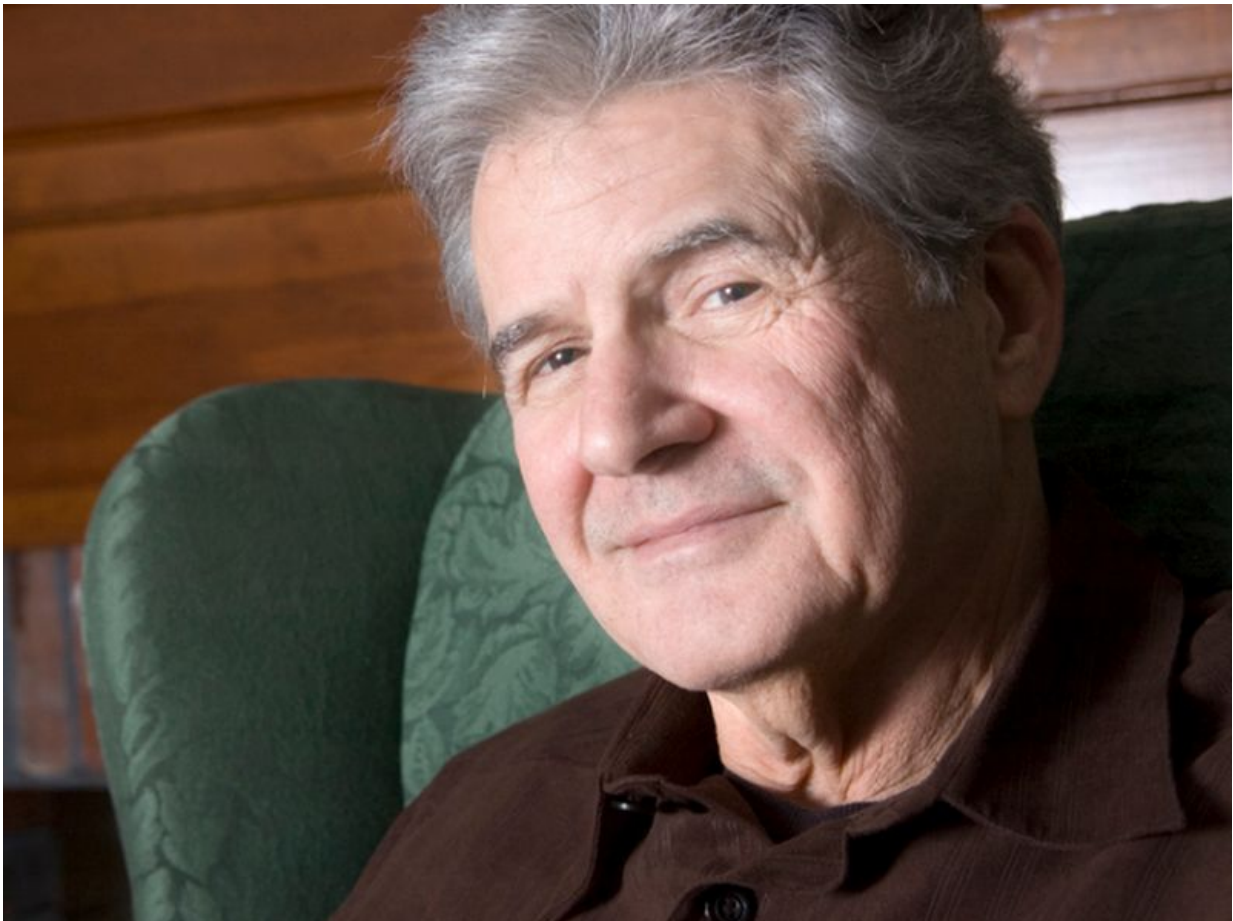


Less intense surveillance OK for some prostate cancer cases

December 23 2016



(HealthDay)—Certain patients on active surveillance for prostate cancer

may be eligible for less intensive surveillance, according to a study published in the January issue of *The Journal of Urology*.

Evan Kovac, M.D., from the Cleveland Clinic, and colleagues identified 300 men on [active surveillance](#) from a prospective database; the men had undergone initial surveillance prostate biopsy, with or without confirmatory biopsy, within one year of diagnosis. Eighty-seven percent were classified as having National Comprehensive Cancer Network very-low-risk or low-risk [disease](#) at diagnosis. The presence of 50 percent or more positive cores and/or surveillance prostate biopsy Gleason score upgrading was used to define disease reclassification on active surveillance.

The researchers found that 16 and 6 percent of patients had type I and II reclassification, respectively, at the time of initial surveillance prostate biopsy. The rates of type I and type II reclassification at initial surveillance prostate biopsy were reduced for those who underwent confirmatory biopsy (9 versus 23 percent [P = 0.001] and 3 versus 9 percent [P = 0.01], respectively). The two-year rates of subsequent type I and II reclassification were 17 and 3 percent, respectively, for the 251 [patients](#) without disease reclassification at initial surveillance prostate biopsy.

"Patients on active surveillance with stable disease at the time of initial surveillance prostate biopsy may be appropriate candidates for less intensive surveillance [prostate biopsy](#) schedules," the authors write.

One author disclosed financial ties to Cook and Healthtronics.

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Citation: Less intense surveillance OK for some prostate cancer cases (2016, December 23)
retrieved 14 February 2024 from <https://medicalxpress.com/news/2016-12-intense-surveillance-prostate-cancer-cases.html>

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