New Data Highlight Shifts in Diagnosis and Management of Prostate Cancer

San Diego, CA, May 7, 2016—Three new studies being presented during this year’s Annual Scientific Meeting of the American Urological Association highlight differing approaches in the diagnosis and management of prostate cancer, including variations in practice patterns. These studies will be presented to the media during a special press conference on Saturday, May 7 at 10 a.m. PT, to be moderated by AUA Public Media Committee Chair Dr. Scott Eggener.

Studies being presented include:

Informed Decision-Making for Prostate-Specific Antigen Screening (Abstract MP37-02): Despite an increase in advocacy for shared decision making and prostate-specific antigen (PSA) screening, conversations may be more likely to address the advantages of screening than the disadvantages, according to researchers in Boston. Using data from the 2014 Behavioral Risk Factor Surveillance System (PRFSS), researchers examined data for 130,592 men aged 40 and over without a history of prostate cancer who were surveyed using the PRFSS prostate cancer screening questionnaire. Of those men, 60 percent had been counseled about the benefits and/or risks of PSA screening, with 58 percent being counseled about advantages and 28 percent being counseled about disadvantages. Race, age, insurance status, higher income and education level were identified as independent predictors of the level of counseling received.

Men with Low-Risk Prostate Cancer: Nationwide, Population-based Study in Sweden (Abstract PD08-0): Active surveillance is increasing as an option for managing men with very low risk and low-risk prostate cancer, new data shows. Researchers from the United States, Sweden and the United Kingdom reviewed data from the National Prostate Cancer Register (NPCR) of Sweden and found that, between 2009 and 2014, the use of active surveillance increased in men aged 55 years and under with very low risk disease (44 percent to 84 percent) and low risk disease (22 percent to 59 percent). This increase was also seen men aged 55 to 59 (45 percent to 90 percent for very low risk and 33 percent to 71 percent for low risk) and 60 to 64 years (60 percent to 90 percent for very low risk and 40 percent to 74 percent for low risk).

Analysis of Active Surveillance Follow-Up: How Closely are Patients Monitored Over Time? (Abstract MP25-12): Though the use of active surveillance is increasing, there are wide variations in follow-up testing, according to new analysis of data from the Michigan Urological Surgery Improvement Collaborative (MUSIC). Using data from the registry, researchers in Royal Oak, MI and Ann Arbor identified 431 patients with prostate cancer who opted for active surveillance (and remained on the protocol for two years) and found that only 31 percent had follow-up PSA tests and biopsies according to guidelines from the National Comprehensive Cancer Network (NCCN). Of the men who did not receive follow-up care in line with NCCN guidance, 53 percent did not receive a repeat biopsy. Sixteen percent did undergo a repeat biopsy, but did not complete three or more PSA tests during the two years of follow up.

“These studies raise a number of important points, including an increase in the use of active surveillance to manage prostate cancer in men with low-risk disease,” Dr. Eggener said. “But most importantly, they highlight a need for consistency in how we discuss the benefits and risks of PSA screening and how we manage patients on active surveillance protocols.”

NOTE TO REPORTERS: Experts are available to discuss this study outside normal briefing times. To arrange an interview with an expert, please contact the AUA Communications Office at 410-689-3932 or email communications@AUAnet.org.

About the American Urological Association: The 111th Annual Scientific Meeting of the American
Urological Association takes place May 6-10, 2016 at the San Diego Convention Center in California.

Founded in 1902 and headquartered near Baltimore, Maryland, the American Urological Association is a leading advocate for the specialty of urology, and has more than 21,000 members throughout the world. The AUA is a premier urologic association, providing invaluable support to the urologic community as it pursues its mission of fostering the highest standards of urologic care through education, research and the formulation of health policy.

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