

## Current standard for diagnosis<sup>2</sup>

- PSA: When determining whether patients have prostate cancer or another prostate-related condition, a prostate-specific antigen (PSA) blood test can be initially conducted.
- DRE: Physicians typically use the PSA test results, along with a digital rectal exam (DRE) to help detect prostate cancer in men.
- TRUS-Guided Biopsy: If a man's PSA level is elevated, or if a suspicious lump is detected during a DRE, a physician may recommend a trans-rectal ultrasound (TRUS) prostate biopsy. This procedure involves taking 6 to 18 (sometimes more) random systematic samples of tissue from the prostate.
- If the TRUS is negative, repeat TRUS biopsies may be recommended over time, if the PSA level continues to be elevated or rising.<sup>3</sup>

The **FIRST OUTPATIENT IMAGING PROVIDER IN LOUISIANA** to combine 3T MRI technology and the Invivo DynaCad analytical tool with an academic radiology team approach to reading and interpreting prostate 3T MRI cases.



Other sources of information for Prostate Cancer detection include:

[www.ustoo.org](http://www.ustoo.org)  
[www.admetech.org](http://www.admetech.org)  
[www.manogram.org](http://www.manogram.org)  
[www.zerocancer.org](http://www.zerocancer.org)

<sup>1</sup> [www.cancer.org](http://www.cancer.org), "What are the key statistics about prostate cancer," Last Referenced Nov 4, 2011

<sup>2</sup> "University of Maryland Medical Center" [www.ymm.edu](http://www.ymm.edu), "Patient Education, Prostate Cancer Diagnosis," Last Referenced Nov 4, 2011

<sup>3</sup> "P. Puppo, C. Introini, P. Calvi, A. Naselli. Role of transurethral resection of the prostate and biopsy of the peripheral zone in the same session after repeated negative biopsies in the diagnosis of prostate cancer. *Eur Urol* 49 (2006) (873-878)

K. van Renterghem, G. Van Koeveringe, R. Achten, P. Van Kerrebroeck. Clinical relevance of transurethral resection of the prostate in "asymptomatic" patients with an elevated prostate-specific antigen level. *Eur Urol* 52 (2007) (819-826)

<sup>4</sup> Ahmed, H.U. et al. *Nat. Rev. Clin. Oncol.* 6, 197-206 (2009); doi:10.1038/nrcinonc.2009.18



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## Alternative Option to Diagnose Prostate Cancer Early

Information for patients, family members and caregivers to consider



better images mean better results



Prostate Program

# MRI Technology:

A new imaging option

www.disnola.com

*According to the American Cancer Society, prostate cancer is the most common cancer, other than skin cancer, in American men.<sup>1</sup>*

FACT

*One man in 6 will be diagnosed with prostate cancer during his lifetime, compared to one out of 8 women developing breast cancer.<sup>1</sup>*

FACT

FACT

*Prostate cancer is the second leading cause of cancer death in men behind lung cancer.<sup>1</sup>*



- MRI is an emerging tool for early imaging of prostate cancer and other prostate-related conditions.
- MRI uses radio frequency waves to create a detailed cross-sectional image of the prostate and surrounding tissues.
- Power postprocessing of the images may show specific, suspicious areas within the prostate.

## What to expect from prostate MRI

### Diagnostic MR Imaging Process:

Prostate 3T MRI is a noninvasive imaging technique that **does not utilize exposure to ionizing radiation.**

- When receiving an MRI, patients are positioned on an examination table integrated with the MR system.
- Small devices capable of sending and receiving radio waves, may then be placed around or adjacent to the prostate area. The patient is then moved into the MR system.
- An I.V. will be started in order to administer a contrast agent that is vital to the exam. Computer Aided Detection (CAD) is used to help the DIS radiologist identify lesions suspicious for prostate cancer.
- MRI exams generally include multiple scans (sequences), some of which may last several minutes. The entire prostate exam is usually completed in 35-45 minutes.
- When the examination is completed, patients may be asked to wait until the images are processed in the event additional scans are required.

## Who is a candidate for prostate MRI?<sup>4</sup>

- Men with elevated serum prostate-specific antigen (PSA) levels and a negative transrectal ultrasound guided (TRUS) biopsy.
- Men with a positive digital rectal examination and a negative TRUS biopsy.
- Men with a diagnosis of prostate cancer confirmed from a TRUS biopsy to exclude additional cancer or extension of cancer outside of the prostate gland.
- Men who have been treated for prostate cancer with radical prostatectomy, radiation therapy, cryotherapy, or high intensity focused ultrasound (HIFU) when there is concern for recurrence of prostate cancer (biochemical recurrence).

### What else should I know?

Once the prostate 3T MRI exam is complete, the radiologists will review the images and issue a complete, detailed report of the findings. The report and images are provided to the referring physician or health care provider.

You should always consult with your urologist, primary care physician or primary health care provider if you believe that you may benefit from prostate MRI.