





Micro-Ultrasound Imaging of Men with Family History of Prostate Cancer: Subpopulation Analysis from a Multi-Institution Randomized Clinical Trial



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p-value

< 0.001

< 0.001

0.86

0.36

0.06

0.98

FH-

64

6.2

43cc

36%

FH+

61

5.4

66%

41cc

36%

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OBJECTIVE

To investigate the relative efficacy of high-frequency 29 MHz transrectal micro-ultrasound ("micro-US") to conventional low-frequency 7–12 MHz transrectal ultrasound ("conv-US") in men with self-reported family history of prostate cancer.

METHODS

- 1,676 men without known prostate cancer were randomized 1:1 to micro-US or conv-US guided biopsy at 5 sites in North America from 2013-16
- Exactly 12-cores were taken transrectally from each subject
- Each core taken systematically or from a target near the systematic position.
- Clinically significant prostate cancer was defined as any Gleason Grade Group > 1 and/or any core with > 50% cancer

RESULTS

- Men with Positive Family History:
- Conv-US arm: 203/839 (24%)
- Micro-US arm: 180/837 (22%)
- Family History positive men had a lower risk profile
- PSA 5.4 vs 6.2 (p<0.001)
- Age 61 vs 64 (p<0.001)
- No significant differences in age or PSA between the family history positive conv-US or micro-US groups (PSA p=0.31, age p=0.76)
- Clinically significant cancer rate in micro-US arm was significantly higher than in conv-US arm (43% vs. 30% p=0.004)
 - Relative improvement of 45% higher than improvement seen in full population



Conventional

(p=0.004)

Figure 2: Micro-US demonstrated a

to conv-US in the FH+ subpopulation

significantly higher csPCa rate compared

€ 50

Table 1: Comparison of the Family History (FH) positive and negative groups. The FH+ group showed slightly lower risk indicators, but achieved the same csPCa detection rate overall

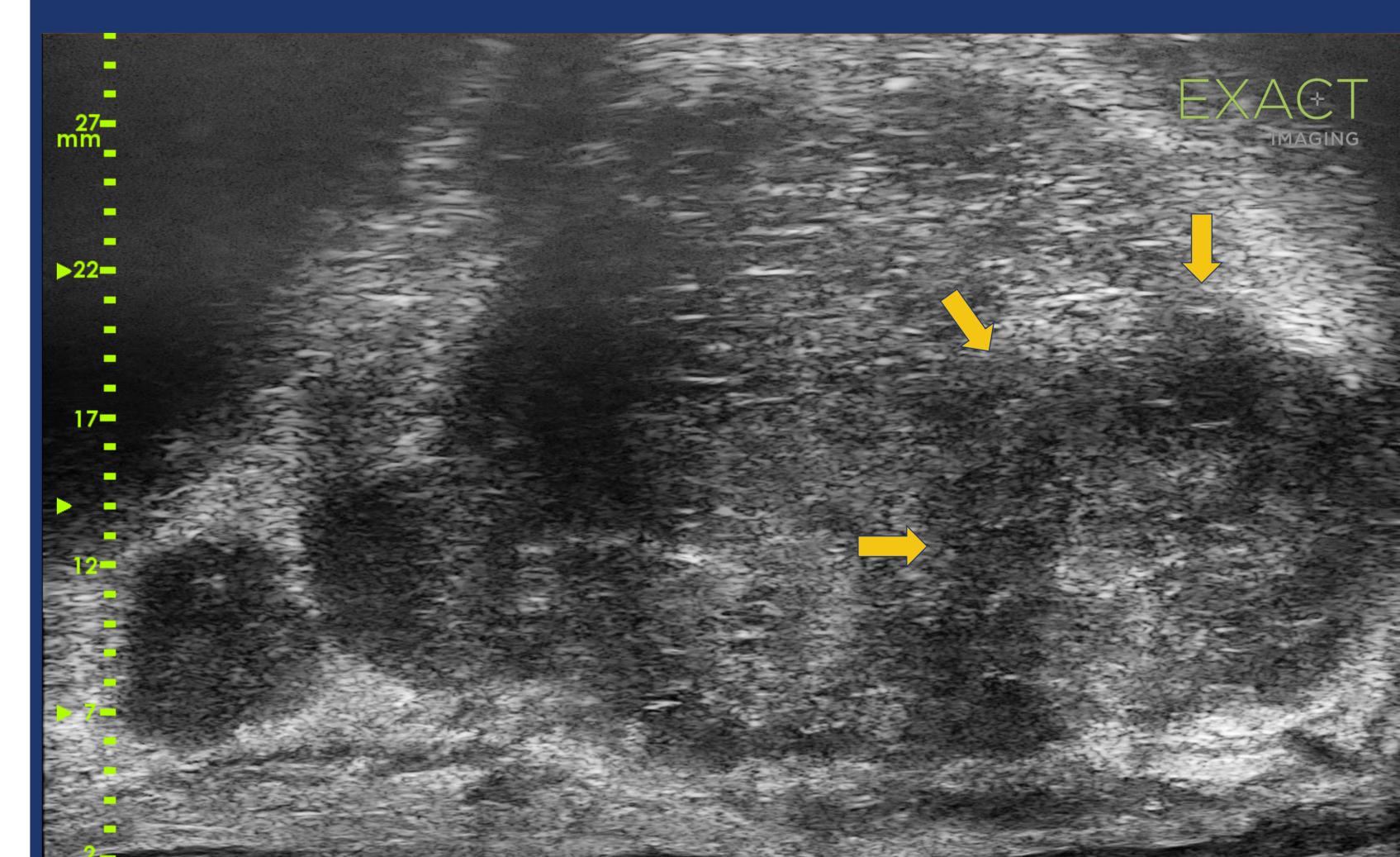
Figure 1: First-generation ExactVuTM micro-ultrasound system used in this study

Micro-Ultrasound

 Micro-US detected more significant prostate cancers than conv-TRUS in men with positive family history

Prior negative biopsy 15%

- Since the same number of biopsy samples were taken, the accuracy of micro-ultrasound targeting appears improved in these men; though the reasons for this remain unclear
- Further work will be required to confirm this phenomenon and identify the causes.



Demographic

DRE abnormal

Prostate volume

csPCa rate

Age

Figure 3: Micro-US image showing PRI-MUS 5 mixed echo lesion positive for csPCa

CONCLUSIONS