MP13-06: THE RAPID ACCESS PROSTATE IMAGING AND DIAGNOSIS (RAPID) PATHWAY—A MULTICENTRE UPDATE OF 1719 PATIENTS UNDERGOING MULTI-PARAMETRIC MRI AS A TRIAGE TEST

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**Introduction:** The PROMIS and PRECISION trials demonstrated the diagnostic value of multiparametric MRI and MRI-targeted biopsy respectively. Further, pre-MRI biopsy may lead to significant delays in diagnosis.

**Aim:** To report the updated outcomes of 1719 men from the ‘one-stop’ Rapid Access Prostate Imaging and Diagnosis (RAPID) pathway introduced across three hospitals. This pathway streamlines the standard diagnostic pathway into 1 or 2 visits using mpMRI to triage men to a same-day transperineal targeted and systematic biopsy, if required.

**Methods:** A transperineal prostate biopsy was offered if the mpMRI score was 4 or 5, or a score of 3 with PSA-density \( \geq 0.12 \). Significant prostate cancer was defined as Gleason \( \geq 3+4 \).

**Results:** The median age was 66 [IQR 60-72], PSA 6.7 [4.9-9.9] and median time from referral to mpMRI +/- biopsy was 9 [IQR 6-13] days. *(Diagnostic outcomes on slide 2)*

**Conclusions:** 40% men avoid immediate biopsy, 50% men have clinically significant disease on initial biopsy.
DIAGNOSTIC OUTCOME OF REFERRED PATIENTS

**Referred Patients**
- **Positive mpMRI**
  - 909 (53%)
- **Negative mpMRI**
  - 810 (47%)

**Targeted TP Biopsy**
- **Positive Biopsy**
  - 573 (63%)
  - Clinically Insignificant Cancer: 148 (16%)
  - Clinically Significant Cancer: 425 (47%)
- **Negative Biopsy**
  - 263 (29%)

**Systematic TP Biopsy**
- **Positive Biopsy**
  - 19 (2%)
  - Clinically Insignificant Cancer: 14 (1%)
  - Clinically Significant Cancer: 5 (0.6%)
- **Negative Biopsy**
  - 27 (3%)