Page: E3

Accurate test for the early detection of prostate cance

Dr Rajesh Gulia

rostate cancer likely affects 1 in 8 men during their lifetime. Those with family history of breast cancer in mothers or sisters, are also at increased risk. "In the curable stages, prostate cancer

is not symptomatic. If you are waiting for symptoms, you are missing a window of opportunity," says Dr Rajesh Gulia adding, "The American Cancer Society recommends testing for prostate cancer for men who are 50."

The traditional method for diagnosing cancer prostate is screening by serum prostate-specific antigen (PSA) or by digital rectal examination (DRE), followed by a 10-12 core transrectal ultrasonography (TRUS)-guided prostate biopsy. However, about 20%-30% of the cancers are missed by this approach.

"The advent of multiparametric magnetic resonance imaging (mpMRI) has improved the sensitivity of detecting cancer prostate. However, mpM-RI is not disease specific, and many benign conditions such as acute and chronic prostatitis, benign prostatic hyperplasia, or post biopsy changes can give falsepositive results and thus may result in an unnecessary biopsy," says Dr Gulia. Besides, field of evaluation is usually limited to the pelvis, necessitating separate imaging for distant metastasis.

Dr Gulia suggests, "The recently introduced Gallium-68 prostate-specific membrane antigen positron

> emission tomography (Ga-PSMA PET) is gradually establishing its place in the diagnostic algorithm of cancer prostate. Several studies have reported its accuracy in evaluating nodal and bony metastases and for detecting recurrences." Citing its advantages, he says that PSMA PET scan is relatively specific to malignant transformation as compared to mpMRI, which is not disease specific.

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Quoting a study Dr Gulia says, "The study by department of Urology, Safdarjang Hospital, New Delhi concluded that PSMA PET scan can most accurately identify patients suspected of har-

boring prostate cancer."

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