

A randomised controlled trial of magnetic resonance imaging-targeted biopsy compared to standard transrectal ultrasound guided biopsy for the diagnosis of prostate cancer in men without prior biopsy.

PRostate Evaluation for Clinically Important disease: Sampling using Image-guidance Or Not? PRECISION

Timeline

Start date recruitment:	December 2015	End date of study:	December 2017
End date recruitment:	October 2017	Status:	Completed
Published in NEJM (reference next page)			

In brief

This was a Randomised Controlled Trial. Men with clinical suspicion of prostate cancer who are referred for suspected prostate cancer were to be randomised 1:1 to mpMRI or to 10-12 core standard TRUS-biopsy. In the MRI arm if there was a suspicious lesion on mpMRI then men would undergo MRI-targeted prostate biopsy (up to 12 cores). If there was no suspicious lesion on mpMRI then men undergo no biopsy as part of protocol but reverts to standard of care management.

Organisation

This study was organised by the team of University College London and University College London Hospital. EAU Research Foundation endorsed the clinical trial and supported the trial with a limited grant to start up participating centres and the use of EAU Research Foundations' webbased datamanagement system 'Marvin' that enabled timely and efficient collection of data from the international participating centres in close cooperation with the Electronic Case Report form Team of the EAU Research Foundation.

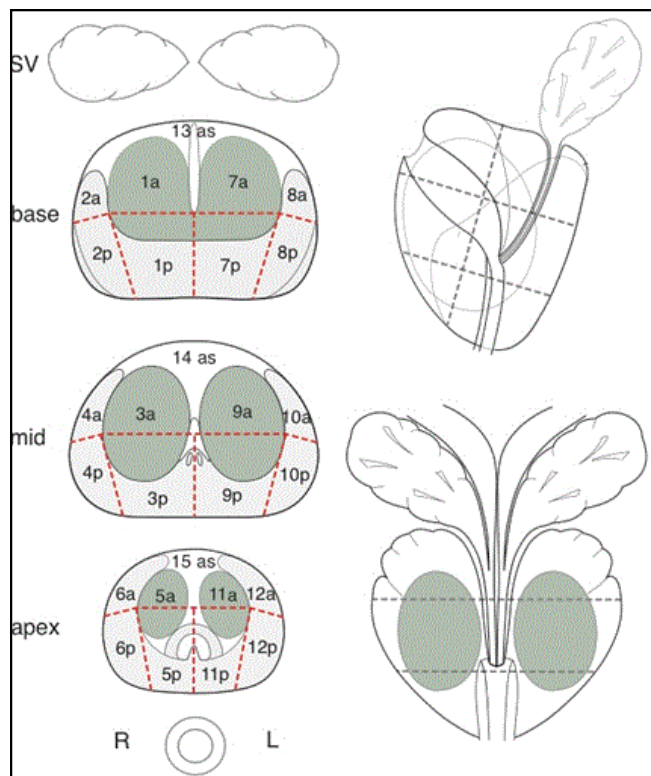
MPMRI reporting proforma

Primary objective

- To determine the proportion of men with clinically significant cancer detected by MRI-targeted biopsy compared to standard TRUS-biopsy.

Secondary objectives

- To determine the proportion of men with clinically insignificant cancer detected by MRI-targeted biopsy compared to standard TRUS-biopsy.
- To determine the proportion of men in the MPMRI arm who avoid biopsy.
- To determine the proportion of men who go on to definitive local treatment or systemic treatment.
- To determine the cancer core length of the most involved biopsy core (maximum cancer core length, MCCL).
- To determine the change in health related quality of life after intervention.
- To determine the proportion Gleason grade upgrading in men undergoing radical prostatectomy.



Please find the full description of the trial on the [ISRCTN Trial Register](#) and the [Clinicaltrials.gov](#) register.

**PRECISION Publication:****Title:**

MRI-Targeted or Standard Biopsy for Prostate-Cancer Diagnosis. N Engl J Med. 2018 May 10;378 (19):1767-1777. doi: 10.1056/NEJMoa1801993. Epub 2018 Mar 18.

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Link: <https://www.ncbi.nlm.nih.gov/pubmed/29552975>

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