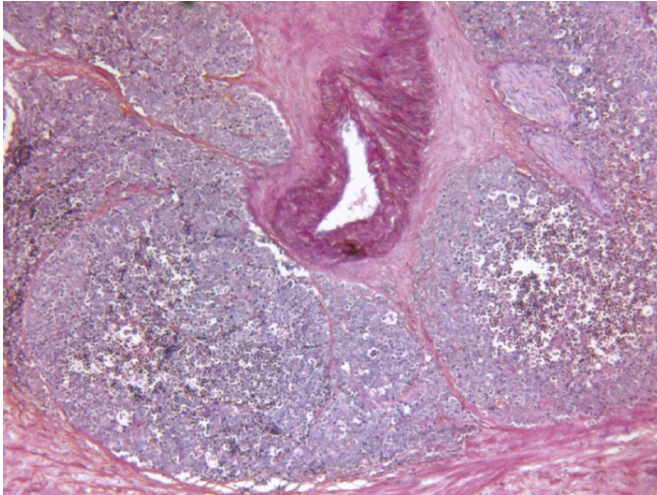


Diagnostic factors may help patients avoid prostate biopsy

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associated in the multivariable model (area under the curve, 0.85).

"Using this model to select patients for confirmatory biopsy would generally provide a higher net benefit than performing confirmatory biopsy in all patients, across a wide range of threshold probabilities," the authors write.

Several authors disclosed financial ties to the diagnostics and pharmaceutical company Opko.

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[Full Text](#)

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(HealthDay)—Initial diagnostic characteristics may be able to identify men initiating active surveillance who could avoid confirmatory biopsy, according to a study published in the January issue of *The Journal of Urology*.

Prassannah Satasivam, M.D., from the Memorial Sloan Kettering Cancer Center in New York City, and colleagues assessed whether initial diagnostic parameters (prostate-specific antigen density, magnetic resonance imaging result, percent positive cores, percent [cancer](#) in positive cores, and total tumor length) could predict the confirmatory biopsy result in 392 [men](#) (with Gleason 6 prostate cancer on initial biopsy) undergoing confirmatory biopsy.

The researchers found that 11 percent of men had high-grade cancer on confirmatory biopsy. In univariate analysis, all predictors were significantly associated with high-grade cancer at confirmatory biopsy. However, only prostate-specific antigen density and total tumor length were significantly

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