



UROLOGICAL SOCIETY OF AUSTRALIA AND NEW ZEALAND

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Urologists welcome budget announcement on MRI for men with prostate cancer

The Urological Society of Australia and New Zealand welcomes the announcement in the Federal Budget that a \$400 Medicare rebate will be available for MRIs to assist in the diagnosis and management of men with prostate cancer. Approximately 16,500 men are diagnosed, and 3,500 men die from prostate cancer in Australia each year.

“This will make a real difference to Australian men undergoing prostate cancer testing and we are pleased the Government has recognised the benefits of this technology in helping save lives while also eliminating overtreatment which is the overriding goal for Australian urologists treating prostate cancer patients,” says Adjunct Professor Peter Heathcote, President of the Urological Society of Australia and New Zealand.

The Urological Society has made ongoing representations to the Federal Government, advocating on behalf of Australian men for Medicare funding for MRI (multi-parametric magnetic resonance imaging) as an important tool that can improve the diagnosis of prostate cancer by enhancing the detection of clinically significant cancer that would benefit from treatment, while also ruling out insignificant cancers following investigation of an abnormal PSA (prostate-specific antigen).

The pathway to prostate cancer diagnosis starts with a PSA blood test. An elevated PSA level does not automatically mean a man has prostate cancer but it is a flag that prostate cancer may be present. This is usually confirmed by subsequent biopsies which are invasive and, in a small minority of cases, can have side effects or complications. While it is the best test available the PSA test is also criticised for detecting low-risk or indolent prostate cancer that may not have caused any problems.

“The most contemporary published studies in Australia and overseas confirm the benefit of MRI technology in improving the PSA testing pathway to detect prostate cancer,” says Adjunct Professor Heathcote.

“The use of MRI following an elevated PSA can help clinicians decide whether a biopsy is necessary or not as well as improving the diagnostic process to pick up significant cancers and avoid diagnosing indolent cancers.

“The cost of a biopsy is substantially higher than a MRI scan, so if we can safely reduce the number of biopsies, not only do we eliminate unnecessary discomfort and complications there would be a significant financial saving.

“Additionally the use of MRI guided biopsies in those men who are identified at risk allows for more accurate diagnosis and appropriate management of their prostate cancer. Our aim is always to make sure we capture those men who would benefit from treatment while minimizing the identification of men with clinically insignificant cancer so they don’t receive unnecessary treatment for a cancer that is unlikely to cause them harm.”

“While the benefits of this technology are evident, it is important to qualify this by recognizing that like any technology the benefits are only as good as the skill of the operator and we need to ensure its use in

prostate cancer diagnosis is conducted by specialists with appropriate experience and expertise to guarantee reliable outcomes.”

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