

Active Surveillance for Prostate Cancer

Patient Information – Urology Service

Now that you have chosen active surveillance for your prostate cancer, here are some further details about what will happen and when.

Active surveillance timeframe

Your cancer will be monitored with regular tests that have a set timeframe. These tests aim to find any changes that suggest the cancer is growing. Testing begins frequently at every three months. As you progress through the programme the frequency of testing reduces.

For PSA follow-ups you will receive a blood test form in the post, and the results of this by letter. Biopsy follow-ups will **always** occur in clinic (to perform the biopsy procedure), but you can choose to have your biopsy results by letter instead of attending another clinic.

Additionally, you may have an **MRI** at five months. This will be decided with your consultant. The MRI will show which area of the prostate to biopsy, to get the most accurate results.

Testing every three months

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| • Follow-up 1: PSA at 3 months | Notification by letter |
| • Follow-up 2: Biopsy , PSA and DRE at 6 months | Clinic appointment |
| • Follow-up 3: PSA at 9 months | Notification by letter |
| • Follow-up 4: PSA at 1 year | Notification by letter |

Testing every six months

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| • Follow-up 5: PSA at 1 ½ years | Notification by letter |
| • Follow-up 6: PSA at 2 years | Notification by letter |
| • Follow-up 7: Biopsy , PSA and DRE at 2 ½ years | Clinic appointment |

Testing every 12 months

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| • Follow-up 8: PSA at 3 ½ years | Notification by letter |
| • Follow-up 9: PSA at 4 ½ years | Notification by letter |
| • Follow-up 10: Biopsy , PSA and DRE at 5 ½ years | Clinic appointment |
| • Follow-up 11 onwards: PSA annually | Notification by letter |
| • Follow-up biopsy every five years from last biopsy | Clinic appointment |

Generally, once you reach the age of 75 years, only annual PSA blood tests are required (no biopsies).

Active surveillance tests

You will have the tests listed below, once you have decided to start on active surveillance.

Test: prostate specific antigen (PSA)

A blood test to measure the amount of PSA in your blood. PSA is a protein produced by the prostate.

Test: digital rectal examination (DRE)

The urologist may feel your prostate gland through the wall of your rectum (bottom).

Test: prostate biopsy

A biopsy involves taking small pieces of prostate tissue. This is sent to the laboratory to look for signs of prostate cancer. This may be performed as a trans-rectal ultrasound (TRUS) prostate biopsy. Saturation grid biopsies are sometimes required if the urologist decides a larger sample of prostate tissue is needed to assist the diagnosis. This procedure is done under a general anaesthetic and may be performed as a TRUS or as a transperineal prostate biopsy.

Test: magnetic resonance imaging (MRI)

An MRI scan may be undertaken to look for abnormal areas in your prostate. This will assist the urologist with the diagnosis and help identify where to take tissues samples from your prostate. If tests show signs that the cancer is changing, your urologist will discuss with you whether you should have treatment and what your options are.

Very few patients may have MRIs instead of biopsies. This is decided by your urologist.

Seen in clinic

You will be brought back to clinic if your PSA is above the limit set by your urologist. You will also be seen in clinic to discuss your biopsy results if they have changed.

Leaving active surveillance

You may stop active surveillance at any time by informing your consultant at clinic or by contacting the Urology Cancer Follow-up Coordinator at any time on (03) 364 0640, extension 88700.

Generally, the three main reasons patients leave active surveillance are:

- The cancer has grown, and a treatment is now required
- The patient no longer wants repeat biopsies and would prefer to undergo treatment
- The patient has reached 75 years old.

Contact information

For more information about:

- Hospital and specialist services, go to www.cdhb.health.nz
- Your health and medication, go to www.healthinfo.org.nz

For information on parking, how to get to the hospital, and visiting hours, please visit

www.cdhb.health.nz