

Defining the role of Transperineal biopsies in low risk prostate cancer: a literature review

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PSA screening often reveals prostate cancer that is unlikely to benefit from urgent treatment. Active surveillance (AS) became the standard treatment for these cancer patients. AS indications and protocols differ between centres, yet a combination of: TRUS biopsies, DRE findings and PSA measurements is often used.

In this review of 94 found MedLine articles, 26 were included for full text analysis concerning the effectiveness, cost efficiency and complication rate of TP.

Literature study

Following the available literature, there is no known clinical advantage of TP in cancer detection. This since these tumours are mostly of low or intermediate grade. However, possible advantages of TP consist of better staging of the tumour in risk categories and lower numbers of up- or downregulation after RP. Moreover, the complications associated with TP tend to be lower than in the TRUS groups. On the contrary, a better classification associated with increased costs might not be cost efficient for all patients.

Proposed approach

Transperineal biopsies have multiple advantageous characteristics in the staging of prostate cancers, for anteriorly located tumours and larger prostate volumes. On the other hand, TP is associated with a higher workload and costs, making it too expensive for every prostate cancer patient.

More studies should be done to draft a guideline in which the precise indications for TP biopsies are defined.