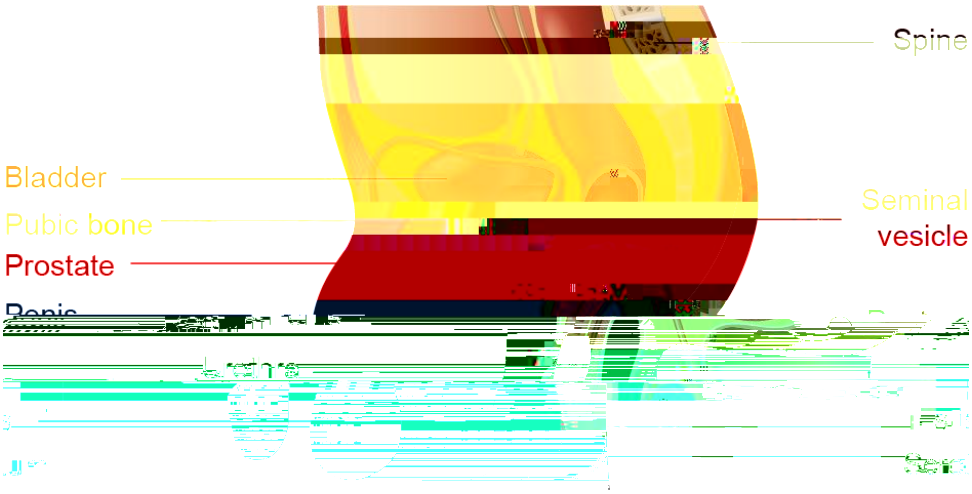
Having a transperineal prostate biopsy

This leaflet is written for patients, their family and any carers. It provides information about prostate biopsies for men who are considering this procedure. The leaflet goes through the indications, benefits, risks and procedure associated with this biopsy.

What is a prostate?

The prostate gland produces the white fluid that becomes part of the semen. It is located below the bladder and in front of the rectum and is roughly the size of a walnut. It frequently enlarges in older men and can obstruct the flow of urine. It is also one of the most common sites of cancer to occur in men.



What is MRI of the prostate?

Magnetic Resonance Imaging (MRI) is a type of scan that uses magnets to evaluate your prostate. The scan is done in the radiology department. MRI can help the doctor identify any abnormality in the prostate which may need to be sampled with prostate biopsy.

What is a transperineal prostate biopsy?

A biopsy involves taking small samples of tissue from the prostate gland. It is done when it is suspected that there is an abnormality, such as prostate cancer, within the gland. This is usually suspected if the prostate is felt to be abnormal on examination, or if a blood test, called PSA, is abnormally raised.

These samples are then analysed by a histopathologist (doctors who diagnose and study disease using expert medical interpretation of cells and tissue samples).

The biopsy can find out whether any of the prostate cells have become cancerous or, if there is pre-existing cancer, whether the cancer has changed.

Why is it needed?

There are a number of reasons why you might have been advised to have a prostate biopsy:

> You may have had a blood test showing a high level of prostate-specific antigen (PSA). PSA is a protein that is released into your blood from your prostate gland. High levels of PSA may indicate prostate cancer.
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> Your doctor/nurse specialist may have found a lump or abnormality during a digital rectal examination (DRE). A DRE is where a doctor feels your prostate gland through your rectum (back passage) with his/her index finger.
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> You may have had an MRI scan of the prostate that may have showed abnormal areas to target in your prostate. A prostate biopsy clarifies whether the abnormal areas harbor prostate cancer or not.
>
> You may have a known diagnosis of prostate cancer that has not required treatment and your doctor/nurse specialist might have recommended you enroll in active surveillance of prostate cancer

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It can help find out how aggressive any cancer may be and help us to decide what treatment options would be recommended.

What are the alternatives?

Occasionally the doctor may recommend observation and regular PSA blood test instead of the prostate biopsy if the suspicion of prostate cancer is low. Generally, if there is suspicion of cancer and if your body is fit to undergo curative treatment for prostate cancer, the doctor will recommend a prostate biopsy.

Although an MRI may be reassuring, it cannot completely exclude having prostate cancer therefore in some instances we recommend having a biopsy even if your MRI scan is normal.

What are the risks?

Although serious complications are rare, every procedure has risks. Your doctor will discuss these with you in more detail.

Blood when you pass urine:

t000-3r71 0 595.32 841.92 reW*nBT/F1 8.04 Tf1 021 7.15 37.6 6e12205650 0 595.32612.7DT6HFUHWNq

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