



European Association of Urology



Letter to the Editor

Re: Veeru Kasivisvanathan, Armando Stabile, Joana B. Neves, et al. Magnetic Resonance Imaging-targeted Biopsy Versus Systematic Biopsy in the Detection of Prostate Cancer: A Systematic Review And Meta-analysis. Eur Urol 2019;76:284–303

We read with great interest the article by Kasivisvanathan and colleagues [1]. In their systematic review and meta-analysis, the authors highlight the need to use magnetic resonance imaging (MRI)-targeted biopsies in men with a clinical suspicion of prostate cancer (PCa) [1]. This is a very straightforward message that has been increasingly received and adopted by physicians engaged in the management of these patients [2,3]. This being said, when a patient with clinically significant PCa is considered a candidate for surgical approaches such as radical prostatectomy, knowledge of the precise anatomic position of the disease throughout the prostate gland is of crucial importance for planning a procedure that must extirpate the cancer completely but at the same time preserve the anatomic structures responsible for urinary continence and erectile function. In this context, systematic biopsies when combined with MRI-targeted biopsies increase the detection of clinically significant PCa and are of significant importance for the surgeon in planning the surgical approach [4,5].

Disclosure: Francesco Montorsi certifies that all conflicts of interest, including specific financial interests and relationships and affiliations relevant to the subject matter or materials discussed in the manuscript are the following: None.

Conflicts of interest: The authors have nothing to disclose.

References

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