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Asheville Doctor Supports Adoption of Noninvasive MRI as First Line of Defense for Prostate Cancer Screenings and Diagnosis

Among the benefits, MRI lowers the chances of overdiagnosis and missed diagnosis

ASHEVILLE, N.C., September 15, 2021 – September is National Prostate Cancer Awareness Month – designated annually by presidential proclamation to focus attention on the disease and stress the importance of men getting regular screenings.

Dr. Mehul Bhakta, M.D. and director of Abdominal Imaging at [Asheville Radiology Associates Health Specialists](#) in Asheville, N.C., explains that although many prostate cancers won't impact a person's health during his lifetime even without treatment, some are more aggressive and can lead to serious health issues – and death if not treated.

According to the National Institutes for Health (NIH) National Cancer Institute (NCI), prostate cancer is the most common cancer and the second leading cause of cancer death among men in the United States. NCI estimates that 248,530 new cases of prostate cancer will be diagnosed in 2021, representing 13.1 percent of all new cancer cases, and will result in more than 34,000 deaths (5.6 percent of all cancer deaths).

Most prostate cancers are diagnosed in men aged 65+, and the risk for getting prostate cancer increases with age. Other risk factors include family history and race. A man with a father, brother or son who has had prostate cancer is two to three times more likely to develop the disease himself, and prostate cancer is more common in African-American men.

Unfortunately, prostate cancer does not usually present any "early" warning signs. By the time a patient starts to experience prostate cancer-related symptoms, the cancer has progressed to a more advanced stage. The good news is that when diagnosed and treated early, the survival rate is nearly 100 percent for localized or regional prostate cancers, which underscores the importance of regular screenings.

Some recent medical studies have analyzed the use of Magnetic Resonance Imaging (MRI) for prostate cancer screening and cited several benefits of using MRIs for the initial diagnostic protocol in lieu of long-practiced traditional methods.

“Historically, serum prostate-specific antigen (PSA) and digital rectal exams (DRE) have been the initial tests performed to screen for prostate cancer in men without symptoms,” Dr. Bhakta said. He elaborated that a PSA is a simple blood test with a normal value usually considered to be less



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than four nanograms per milliliter (ng/mL), adding that PSA values can be elevated for a number of reasons – the most concerning of which is prostate cancer.

“If an abnormality is found, a transrectal ultrasound (TRUS) guided prostate biopsy is typically performed,” he continued. “TRUS is a random, nontargeted biopsy in which 10 to 12 samples are taken. If positive, a prostate MRI – which provides a clear image inside the prostate and shows if the cancer has spread outside of the prostate – usually is obtained to evaluate the extent of the disease.

“The chances of missing a clinically significant cancer are much lower with a prostate MRI than with a TRUS biopsy,” Dr. Bhakta said. “Furthermore, noninvasive prostate MRI provides additional information such as cancer location within the gland, cancer size, involvement of adjacent structures and detection of abnormal pelvic lymph nodes – all of which could impact treatment.”

Another benefit of prostate MRI is that it can help guide which patients with an elevated PSA warrant biopsy, which can be uncomfortable, versus active surveillance, where the patient is closely monitored for the development of clinically significant cancer. If a biopsy is warranted due to a positive MRI, a prostate MRI can also provide information that would allow for a more targeted biopsy.

Moreover, a paper published earlier this month in *The New England Journal of Medicine* cites that MRI with targeted biopsy has shown to address the issue of high rates of overdiagnosis common with other initial diagnostic methods.

“Screening for prostate cancer with MRI and a targeted biopsy strategy would dramatically decrease overdiagnosis while maintaining the benefits of screening as MRI usually only detects cancers which are clinically significant,” Dr. Bhakta said.

Dr. Bhakta urges men to get regular prostate screenings and seek medical attention immediately if they notice any potential warning signs, such as weak or interrupted urine flow; frequent and sudden urge to urinate, especially at night; difficulty starting urination; trouble emptying the bladder completely; painful or burning sensations while urinating; or blood in urine or semen. Other more generalized symptoms can include pain in the lower back or pelvic area, weakness or numbness in the legs or feet, dizziness or fatigue.

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