

Low-risk prostate cancer patients will benefit from active surveillance guidelines

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New guidelines for active surveillance of prostate cancer will improve health outcomes for those with low grade diagnoses, according to two University of Otago, Wellington (UOW) experts who had input in to the international recommendations.

Prostate cancer is the most commonly diagnosed cancer in New Zealand men aged 45 and over, with around 2,500 diagnosed annually. Treatment options include surgery or radiation, or patients might be suitable for [active surveillance](#) – whereby they don't receive [treatment](#) but are closely monitored for changes in their cancer.

UOW pathologist Professor Brett Delahunt and urologist Professor John Nacey were part of an international, multi-specialty team convened by the College of American Pathologists that has highlighted pathologic parameters that are key for the successful identification of patients likely to benefit from active surveillance.

The team's recommendations have been published in the October issue of the highly prestigious Archives of Pathology and Laboratory Medicine.

Active surveillance is an important management option for men with low-risk [prostate cancer](#), particularly as removal of the prostate carries the small risk of impotence or incontinence, Professor Delahunt says.

The new guidelines provide, for the first time, clear pathologic

parameters for identifying those most likely to benefit from active surveillance and avoid such risks, he says.

"To date there has been no consensus on how to determine eligibility for active surveillance. These new protocols will allow us to better determine who is appropriate for active surveillance and when it should be stopped and the patient moved on to treatment."

More information: *Archives of Pathology & Laboratory Medicine*: October 2014, Vol. 138, No. 10, pp. 1387-1405. [DOI: 10.5858/arpa.2014-0219-SA](https://doi.org/10.5858/arpa.2014-0219-SA)

Provided by University of Otago

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