

## Shortening the diagnostic prostate pathway

### Purpose of the pilot

The RAPID (Rapid Access Prostate Imaging and Diagnosis) project operationalises the PROMIS trial for men with prostate cancer. A shortened diagnostic pathway and trialling 'first in the world' fusion technology for a revolutionary biopsy procedure. Up to 30% of men are discharged back to their GP on the day, knowing that they are low risk and having avoided an unnecessary invasive biopsy.

### Background

Prostate cancer is diagnosed in over 40,000 men in the UK each year. About 3-4 times as many men are biopsied every year. Most men on the current pathway have both an MRI and a biopsy regardless of the findings on MRI. The current standard biopsy technique offered exposes men to the risk of life-changing side effects and post-biopsy infection. The current biopsy technique offered has the potential to miss significant cancer or to find insignificant low grade cancer which does not benefit from treatment. Approximately 10,000 men die from the disease each year.

### Streamlining of the process and improvement in clinical equipment

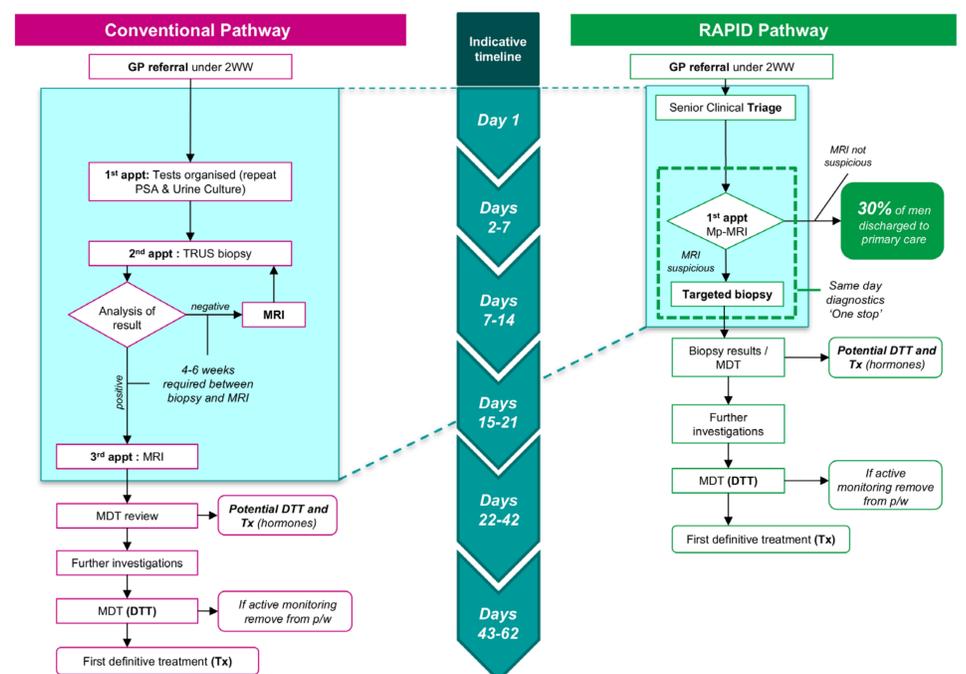
The RAPID project will provide faster access to a diagnosis by providing a one-stop shop, which reduces the number of hospital visits. For patients, this means being referred by their GP when they have a high PSA level for an initial assessment with a senior experienced clinician. They are then sent directly for a multi-parametric high definition MRI scan before biopsy.

Multi-parametric MRI is extremely detailed and the scan will show whether or not there is anything suspicious that needs further investigation. It is estimated that by using this technology, up to a third of men referred will find out on the same day that they do not have prostate cancer and can safely avoid having a biopsy.

Men with MRI results reported as 'suspicious' have targeted biopsies on the same day using brand new 'fusion technology', combining the multi-parametric images from the MRI with an ultrasound. This allows for a far more mapped and targeted biopsy, which is significantly more accurate and avoids the risks and costs of a general anaesthetic.

### Where the project is being implemented

Three pilot sites have been funded – Charing Cross Hospital, Queen Mary's Hospital and Epsom Hospital – to introduce this world leading new approach.



### Achievements to date

Significant improvement in Q2 2017/18 62 day cancer performance for prostate at Charing Cross Hospital (from 69.20% to 87.70%).

### Long term goals/benefits of the project

- Improve patient experience as the patient gets to know the outcome on that very same day (improved time to diagnosis).
- Earlier detection of clinically significant disease.
- Improve treatment allocation as a result of improved staging of the cancer due to absence of biopsy-related artefact.
- Fewer infections overall as a result of fewer biopsies.
- Reduction in the number of biopsies per patient and number of men biopsied (anticipated that the number of men biopsied will reduce by between 25% to 40% by the end of 2018/19).
- Reduced number of men unnecessarily on active surveillance.
- Creation of financial efficiencies in health economy.

### For more information

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