

Dr. Hu On Future Studies Of Transrectal Vs. Transperineal Prostate Biopsy.

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<https://www.urologytimes.com/view/dr-hu-on-future-studies-of-transrectal-vs-transperineal-prostate-biopsy>

Good Saturday Evening!

I hope you've enjoyed Thanksgiving and have lots of tasty leftovers.

If you've been in our Support & Information Groups, you've heard discussion about the advantages of transperineal biopsies (TP) over traditional trans rectal biopsies (TR). Norway made TP biopsies the standard of care following at least one patient death from a TR biopsy. Some urologists insist TP biopsies are better for finding cancers in parts of the prostate not reachable by TR. Take note that all sorts of things are mandated or banned in other countries that are not mandated or banned here. Often, it's the product of politics mixed with medicine.

There are few studies comparing TP to TR in the USA. At that, they are often clinical studies rather than randomized and controlled studies often combining data from different institutions and come up with different conclusions.

Data is now available from the PREVENT study from a research team headed by Jim C Hu, MD, MPH a professor of urology at Weill Cornell Medicine / New York-Presbyterian Hospital in New York, New York (<https://weillcornell.org/jimhu>). PREVENT stands for "PREclude infection EVEnts with No prophylaxis Transperineal" and the researchers want to know if TP provides better cancer detection with fewer infections than TR. Over 700 men participated in the randomized TP Vs. TR study. More about Dr. Hu and his research at: <https://research.weill.cornell.edu/about-us/news-updates/new-prostate-biopsy-technique-lowers-infection-risk>

WHAT'S AT STAKE: Ending the debate over greater patient safety with TP even with antibiotics administered prior to TR biopsies, dealing with pain and discomfort, justifying TP's larger costs and determining if TP is more accurate diagnostic.

PREVENT'S BOTTOM LINE: There's no statistically significant improvement in patient safety or ability to find lesions comparing TP to TR. More men got infection from TR biopsies with antibiotics administered prior to the procedure BUT, THE DIFFERENCE BETWEEN THE TWO TECHNIQUES WERE SEEN AS NOT "STATISTICALLY SIGNIFICANT". However, there's value in peace-of-mind. If you feel TP will be safer for you, discuss your concerns with your doctor.

The key to all of that is consistent with what we have been saying...get rectal cultures (Kaiser-Permanente takes cultures, but many hospitals do not) pre biopsy and the infection rate disappears. This is almost exclusively to getting the right antibiotic given before during and after the biopsy. This is also due to the main infection E. Coli is resistant to lots of antibiotics. Moreover, one geographical area may have

completely different antibiotic resistance. Why general practice Urologist can't adopt the rectal culture is beyond me.

Conclusions and clinical implications: Office-based transperineal biopsy is tolerable, does not compromise cancer detection, and did not result in infectious complications. Transrectal biopsy with targeted prophylaxis achieved similar infection rates but requires rectal cultures and careful attention to antibiotic selection and administration. Consideration of these factors and antibiotic stewardship should guide clinical decision-making.

PREVENT 2: Data from the PREVENT 2 study with over 1300 patients who had TP or TR in 12 different institutions should be available after the study ends in April 2025. This is another controlled, randomized study. <https://www.pcori.org/research-results/2020/comparing-two-types-prostate-biopsy-prevent2-study>

I'll report back on PREVENT 2's results when the study ends after April 2025. In the meantime, all of us at the Forum look forward to sharing your personal experiences in our 2nd and 4th Tuesday Support and Information groups.

Warmly,

CKM