

JAMA[®] **RADIO REPORT**

The Journal of the American Medical Association

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**This week's package, embargoed until:
11a.m. (ET) Tuesday, January 27, 2015 is:**

“M-R-I TARGETED BIOPSY BETTER FOR DETECTING HIGH-RISK PROSTATE CANCERS”

Radio script (TRT:60)

EMBARGO: 11 a.m. (ET) Tuesday, January 27, 2015

VO: PROSTATE CANCER IS USUALLY DIAGNOSED WITH A STANDARD BIOPSY, WHICH RANDOMLY SAMPLES THE ENTIRE PROSTATE WITH THE HELP OF ULTRASOUND. A NEWER MORE TARGETED APPROACH USES M-R-I TECHNOLOGY TO HELP IDENTIFY PROSTATE CANCER. A NEW STUDY EXAMINED WHETHER USING M-R-I, WAS BETTER AT DETECTING PROSTATE CANCER, ESPECIALLY HIGHER-RISK TUMORS.

“With this technology we have the opportunity to find those cancers that have been hiding and uncover the location and diagnose those patients.”

VO: DR. PETER PINTO FROM THE NATIONAL CANCER INSTITUTE, NATIONAL INSTITUTES OF HEALTH AND CO-AUTHORS LOOKED AT MORE THAN A THOUSAND MEN WITH ELEVATED P-S-A LEVELS. THESE MEN UNDERWENT AN M-R-I GUIDED TARGETED BIOPSY AND ALSO A STANDARD BIOPSY, USING ULTRASOUND ALONE. THE RESULTS OF BOTH BIOPSIES WERE THEN COMPARED. THE STUDY APPEARS IN JAMA, JOURNAL OF THE AMERICAN MEDICAL ASSOCIATION.

“We can find on average 30 percent more clinically significant high risk cancers than if we were to just perform the current traditional random biopsy. Low risk cancers that are felt to be over diagnosed and over treated were actually detected 17 percent less in a targeted biopsy.”

CATHERINE DOLF, THE JAMA REPORT.

