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Provision of MP-MRI scans for prostate cancer in North Wales

The term MP-MRI can be segmented into three distinct parts. The MP-MRI which is referenced within the 2014 NICE guidance, requires the first two elements to be routinely offered on the NHS. This is where the use of some scans that fall within the definition of an MP-MRI (but not a full diagnostic MP-MRI) are used for the further investigation of patients whose initial transrectal prostate biopsy is negative but where other test results (elevated or rising PSA blood test or Digital Rectal Examination findings) mean that the clinical suspicion of prostate cancer persists. The 2014 NICE guidance referenced MP-MRI is distinctly different from that of the current MP-MRIs that are offered by private providers; the private MP-MRIs offer the full three parts of the diagnostic MP-MRI.

The 2 part MP-MRI is available to all patients concerned as per NICE guidance (post biopsy indication) within the Health Board however, as part of allowing patient choice within a treatment pathway, discussions surrounding the full 3 part MP-MRI which is offered privately may also be discussed with the patient. This is to ensure that patients are fully informed of all options available to them at each stage of their pathway (this is a key part of the informed consent process). Discussions between the patient and clinician should occur in line with Prudent principles, where the outcome of which may be that the patient elects to undertake an investigation which has some published evidence, but as yet has not been through a more rigorous cost / benefit assessment and as such is not routinely available within the NHS.

Although current clinical evidence suggests that the use of the full diagnostic MP-MRI may be beneficial to patients in the pathway of prognosis and staging of cancer, this has not yet been supported by NICE.

As part of the work to establish the evidence for MP-MRI, between April 2014 and October 2015 Wrexham Maelor Hospital took part in the PROMIS Trial. This was a Medical Research Council multi-centre trial, investigating whether MP-MRI improves the ability to detect or to rule-out clinically significant prostate cancer in a group of men that had been advised to have prostate biopsy. Wrexham was the only hospital in Wales to take part in this study, and during the time that the trial was running patients who met the strict criteria for the research project did undergo a full MP-MRI, paid for through research funding.

During this time, two other health boards in South Wales piloted schemes to gather further evidence on the use of partial and full MP-MRI. The evidence from these, and other, studies is being assessed by NICE and we expect that they will be updating their guidance later this year.

Once the expected update is received, if the use of full diagnostic MP MRI's (before initial biopsy) are endorsed in appropriate patients, the Health Board will be developing the necessary business cases to evaluate the significant impact on staffing, radiological equipment, and development of staff members in order to provide the recommended MP-MRI for the patients of North Wales. In preparation the Health Board is currently drafting a preliminary business case examining the impact of the introduction of MP-MRI.