

20 September 2019

**Our Ref:** RFI 30543

Dear

**Freedom of Information Act 2000  
Information in Relation to MRI Use for Prostate Cancer**

I am writing to confirm that the South Eastern Health & Social Care Trust (the Trust) has now completed its search for information relating to the above which you requested on 21 August 2019. I apologise for the slight delay in responding to you.

A response to each of the questions raised has been provided by the Hospital Services Directorate and is attached in Appendix A. In respect on Question 4, I have sought clarification from the relevant Directorate for their replies and will reply respond to you in due course.

If you are unhappy as to how this request has been handled, you have the right to seek a review within the Trust in the first instance. You should write to the Information Governance Department, Lough House, Ards Community Hospital ([informationgovernance@setrust.hscni.net](mailto:informationgovernance@setrust.hscni.net)) within two months of the date of this response and your complaint will be considered and a response provided, within 20 working days of receipt.

If, after receiving a response, you remain unhappy, you can refer your complaint to the Information Commissioner at The Information Commissioner's Office –Northern Ireland, 3rd Floor, 14 Cromac Place, Belfast, BT7 2JB. It is important to note that if you refer any matter to the Information Commissioner, you will need to show evidence of having gone through the Trust's internal review procedure to try to resolve the matter with the Trust in the first instance.

If you have any queries about this letter, please do not hesitate to contact me. Please remember to quote the reference number above in any future communications.

Yours sincerely

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**Jane McCormick  
Information Governance Assistant**

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Appendix A

- Q1. Do you routinely conduct prostate MRI (bpMRI/mpMRI) scans before first prostate biopsy as part of the initial diagnostic process? (please tick all that apply):**
- A1. a) Yes, using T2-weighted, diffusion-weighted (multi-b ADC and high/long b) and dynamic contrast enhanced (DCE) sequences.
- Q2. If yes, to 1a: What percentage of men with suspected prostate cancer receive mpMRI before biopsy as part of the initial diagnostic process?**
- A2. The Trust does not hold information on the percentage of men with suspected prostate cancer who receive mpMRI before biopsy as part of the initial diagnostic process. Any man with suspect prostate cancer is referred, unless the Urologist elects to go straight to biopsy.
- Q3. If yes, to 1b: What percentage of men with suspected prostate cancer receive bpMRI before biopsy as part of the initial diagnostic process?**
- A3. This is not applicable.
- Q4. What are your eligibility criteria/exclusion criteria for prostate MRI? (please tick all that apply):**
- A4. d) Contra-indications.  
e) Other.
- Q5. Are you using results from the prostate MRI before biopsy to rule some men out of biopsy as part of the initial diagnostic process?**
- A5. Yes.
- Q6. Do you biopsy all PI-RADS or LIKERT 3 scores?**
- A6. b) No. This is a shared decision process between the Urologist and the patient and is influenced by PSA Density and/or PSA velocity.
- Q7. What threshold do you mostly use for ruling men out of biopsy?**
- A7. f) This varies depending on other factors. PI-RADs 1 or 2 generally do not get biopsy unless there are high clinical suspicions. Co-morbidity, including the use of the Charlson co-morbidity index, PSA dynamics and patient preference.
- Q8. What percentage of men do you estimate are ruled out of biopsy?**
- A8. The Trust does not hold this information centrally.
- Q9. Have there been any changes to your prostate MRI capacity in the last year? (please choose all that apply):**

- A9. a) There is increased capacity by outsourcing to the Independent Sector.  
c) There is agreement to use Dynamic Contrast Enhancement.

**Q10. *Has the number of radiologists at your trust/health board who report prostate MRI scans changed in the last year?***

- A10. c) This has stayed the same.

**Q11. *How many radiologists at your trust/health board report at least 250 prostate MRI scans per year?***

- A11. There are two Radiologists.

**Q12. *Which of the following processes do you follow to manage men ruled out of an immediate biopsy, but with a raised PSA?***

- A12. a) NICE Guidelines: prostate cancer diagnosis and management (NG131).