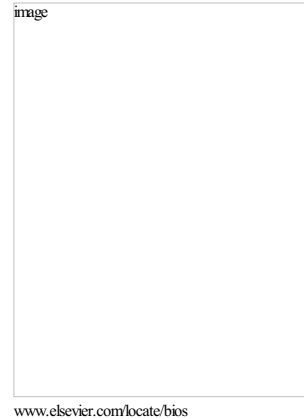


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Multiparametric Magnetic Resonance Imaging in the Evaluation of Prostate Cancer Recurrence

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Introduction

Prostate cancer (PCa) remains a major cause of morbidity and mortality in men, with 164,690 new cases and 29,430 deaths expected in 2018¹. Multiple treatment options for PCa exist. The choice of therapy usually depends on clinical parameters such as life expectancy and tumor grade and stage, as well as the treating physician's experience and the patient's preference (Table 1).

Despite the multiple options available for PCa treatment, PCa recurrence is a common problem in clinical practice. The frequency of recurrence is directly correlated with the initial stage of the disease at diagnosis and with the selected treatment modality; approximately 20% to 50% of patients undergoing radical prostatectomy (RP)²⁻⁴ and up to 20% to 50% of patients undergoing external beam radiation therapy (EBRT) or brachytherapy for localized PCa experience disease recurrence within 10 years^{5,6}. Recurrence is usually detected through a serial elevation in prostate-specific antigen (PSA) levels after treatment. This is known as biochemical recurrence (BCR) and usually precedes symptoms by months or years. The definition of BCR varies depending on the initial therapy used for treatment (Table 2).

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