

# PASS *Periodicals*

A publication of the Prostate Active Surveillance Study

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## Welcome to the Prostate Active Surveillance Study (PASS) Participant Newsletter

Exciting things are happening in PASS! Please read on for an update on the study and a summary of developments in research related to early stage prostate cancer. We also want to thank you for your continuing support. We hope you enjoy reading this issue of PASS Periodicals!

### Canary PASS Today

The Canary Prostate Active Surveillance Study (PASS) continues to enroll men at nine sites in North America. Sites include:

- ❖ Beth Israel Deaconess Medical Center (Boston, MA)
- ❖ Eastern Virginia Medical School (Norfolk, VA)
- ❖ Stanford University (Stanford, CA)
- ❖ University of British Columbia (Vancouver, BC, Canada)
- ❖ University of California San Francisco (San Francisco, CA)
- ❖ University of Michigan (Ann, Arbor, MI)
- ❖ University of Texas Health Science Center San Antonio (San Antonio, TX)
- ❖ University of Washington (Seattle, WA)
- ❖ Veteran Affairs Puget Sound Health Care System (Seattle, WA).

The men who enroll were diagnosed with localized prostate cancer, like yourself. They too have chosen to use active surveillance to manage their cancer. At each study visit we are collecting clinical information and samples to continue our research on prostate cancer.

Here is a current description of the study:

- ❖ Over 1300 men have enrolled in PASS.
- ❖ The average age of men entering the study is 64.
- ❖ Five years after diagnosis, about 30% of men in PASS had treatment such as surgery or radiation.
- ❖ Specimens (blood, urine, prostate tissue) have been collected at more than 6,900 study visits.
- ❖ Over 10,000 of these samples have been used for biomarker research.

### PASS: Long Term Follow-up

As participants complete five years of study visits, receive treatment, or move away from the study site they begin the long term follow-up phase of PASS. This portion of the study consists of annual data collection about disease status from medical records, by phone or from a short mailed questionnaire.

Data collected during this phase of PASS is very important for PASS researchers to address critical questions in prostate cancer research. Prostate cancer often changes very slowly, so having data about the disease for ten to fifteen years or more is necessary. Data collected during long-term follow-up will help us monitor changes over many years and better understand prostate cancer.

### Use of Active Surveillance is Increasing

In 2011, the NIH consensus panel recommended active surveillance as an appropriate option for men with low-risk prostate cancer. Two recent scientific publications indicate that more patients are choosing active surveillance for their primary treatment. One study analyzed data from 10,472 men in the CaPSURE national prostate cancer registry. In that group, use of active surveillance rose sharply after 2009, with about 40% of low-risk men choosing active surveillance. A second publication from another cohort of prostate cancer patients in Michigan confirms the increase, with 49% of low-risk patients opting for active surveillance.

### Research in PASS

We greatly appreciate the enthusiasm and dedication of PASS participants. We know you are interested in results from our research. Many biomarker studies require at least three years of follow-up and a minimum of 500 participants. Results are strengthened by additional participants and follow-up time. We are working hard to complete biomarker studies as PASS continues to grow and mature. Please turn to page 2 for the most recent findings.

[Outcomes of Active Surveillance.](#) In 905 men enrolled in PASS, we found that 24% of men had increased grade or tumor size while on active surveillance, and 19% of men on PASS had chosen to receive treatment for their cancer. The majority of men on PASS remained on active surveillance with cancer that did not progress, showing that active surveillance is an effective strategy for many men. (*Published in: Journal of Urology. 2016 Feb;195(2):313-20.*)

[Risk Calculator.](#) Data from PASS have been used to develop the first risk calculator for active surveillance. The calculator can be used to predict the risk of having cancer with high Gleason grade or that is present in a large amount at the next biopsy. The calculator has been shown to work in other cohorts, but recalibration may be required before it can be used in clinical practice. This work is an important step towards reducing the number of unnecessary biopsies while still monitoring for signs of aggressive cancer. (*Published in: European Urology. 2015 (68):1083-1088.*)

[Predicting high-grade cancer with the 4K Score.](#) Results from PASS were presented at the American Urological Association 2016 Meeting, showing that a blood biomarker test called the 4K Score can be used in active surveillance patients to predict reclassification at the first surveillance biopsy. The 4K Score is currently used before diagnosis to decide if a biopsy is needed. This result shows the 4K Score may be a useful tool in active surveillance to identify men who need more (or less) intensive surveillance. (Publication is in preparation.)

***To all of the PASS participants, whether you just joined the study, have been on the study for many years, have had treatment, or moved away from your study site, the members of the PASS research team can't thank you enough for taking part in this important study!  
Your continued participation is invaluable and we thank you for your support.***

## PASS Receives Canary Award

The Canary Foundation is an integral part of the PASS infrastructure. It is their unique partnership with the National Cancer Institute's Early Detection Research Network that helps provide the coordination and data management of PASS. Each year the foundation holds a symposium to gather researchers to share success and challenges of the cancer early detection community. At the ninth annual meeting, held in October 2013, the PASS research team was awarded the coveted Canary Award, in recognition of their outstanding research contributions. Our greatly appreciated and highly overworked PASS coordinators accepted the award on behalf of the entire team.

We offer a heartfelt thank you to the workhorses of this study, our PASS study coordinators. They have spent countless hours in the clinic, lab, and everywhere in between to keep this study afloat!



*Coordinators and Staff Pictured (in alphabetical order):  
Branda, Carol, Chenee, Hazel, Heather, Hilary,  
Jennilee, Jonathan, Kristin, Kyle, Lauren, Lisa, Michelle,  
Rabia, Sam, Srikanth, Stacy, Stephanie, Suzanne*

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National Study Coordinator and Editor: Lisa Newcomb, Ph.D.  
Assistant Editors: Suzanne Kolb & Hilary Boyer



Questions or Comments? Please send your letters to:  
PASS Periodicals  
Fred Hutchinson Cancer Research Center  
1100 Fairview Ave. NE, M3-B232  
Seattle, WA 98109-1024