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Nonsurgical treatment turns back the clock, shrinks enlarged prostate

Giving men "prostate of their youth"; prostatic artery embolization provides relief from frustrating urinary symptoms, helps men avoid surgery, say researchers

NEW ORLEANS (April 15, 2013)—Men with a common condition that causes frequent nighttime trips to the bathroom can get relief with a minimally invasive treatment that shrinks the prostate, suggests a study being presented at the Society of Interventional Radiology's 38th Annual Scientific Meeting in New Orleans. The early findings hail from the first prospective U.S. trial of prostatic artery embolization (PAE),

which reduces blood flow to the prostate, thus shrinking it.

"Nearly all men eventually suffer from an enlarged prostate as they age, and this treatment is almost like turning back the clock and giving them the prostate of their youth," said Sandeep Bagla, M.D., the study's lead author and an interventional radiologist in the department of cardiovascular and interventional radiology at Inova Alexandria Hospital in Alexandria, Va.

"Medications are of limited benefit and surgery-while it can correct the problem—can be risky and may cause significant side effects. PAE is a minimally invasive alternative with low risk that appears to reduce symptoms in the overwhelming majority of patients," he said.

Benign prostatic hyperplasia (BPH) affects more than half of 50year-old men and more than 80 percent of 80-year-old men. "All patients are looking for the least invasive treatment with lowest risk, and this U.S. clinical study confirms the results reported by interventional radiologists in Europe and South America," said Bagla. He noted that millions of men shy away from surgical and other transurethral procedures because they understandably do not want to risk urine leak, impotence or other complications that may arise from invasive procedures.

Highlights

- Prostate artery embolization (PAE) shrinks enlarged prostates, giving men relief from frequent urination and other symptoms, suggest early results of the first prospective U.S. study.
- 92 percent of men who had PAE experienced a significant decrease in their symptoms.
- Unlike surgery, which can lead to incontinence and impotence, PAE does not cause major side effects.
- More than half of men 50 and older and four out of five 80year-olds suffer from enlarged prostate.

In early findings of the study, 13 of 14 men (92 percent) who had PAE noticed a significant decrease in symptoms after one month. None of the men suffered any major complications, such as impotence, leaking urine or infection. Most went home the day of treatment.

Enrollment of 30 men for the first prospective U.S. study to evaluate PAE for enlarged prostates is underway and will be completed by fall, said Bagla. The study will look at clinical success and safety and will follow patients for two years to assess long-term results.

When the prostate becomes enlarged, it blocks urine flow through the urethra, leading to aggravating symptoms including nighttime urinary frequency, weak flow and inability to completely empty the bladder. Untreated, BPH can lead to bladder stones, poor kidney function and infections. Interventional radiologists have long treated a variety of cancerous and noncancerous conditions through embolization, which blocks blood flow to tumors and organs. For instance, uterine fibroid embolization (UFE) is used to shrink benign fibroid tumors in the uterus. By temporarily blocking blood flow through the prostate artery, PAE causes the prostate to shrink, providing a larger passageway for urine.

"The participants in our study report a true lifestyle-changing effect after this treatment, with some men stopping medication for their prostate symptoms altogether," said Bagla. "Patients who have not been helped by surgery or laser treatments have benefited. Since the treatment does not involve placing a catheter or device into the penis, there is no risk of narrowing of the urethra, incontinence or bleeding," he noted.

CONTACT

U.S. and international PAE experts recently discussed this treatment during a research consensus panel, conducted by the SIR Foundation, a scientific foundation dedicated to fostering research in interventional radiology for the purposes of advancing scientific knowledge, increasing the number of skilled investigators and developing innovative therapies that lead to improved patient care and quality of life. More information about the Society of Interventional Radiology, interventional radiologists and minimally invasive treatments can be found online at www.SIRweb.org.

Abstract 154: "Early Findings From a Prospective U.S. Trial: Prostatic Artery Embolization (PAE) in the Treatment of Benign Prostatic Hyperplasia (BPH)," S. Bagla, J.M. Cooper, K.S. Rholl, K.M. Sterling, D. Papadouris, A. van Breda, A. van Breda, J. Hedden, M. Ponturo, S. Pollach, L. McDermott, cardiovascular and interventional radiology, Inova Alexandria Hospital, Alexandria, Va., J. Wong, Alexandria Urological Associates, Alexandria, Va.; SIR 38th Annual Scientific Meeting, April 13–18, 2013. This abstract can be found at www.SIRmeeting.org.

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About the Society of Interventional Radiology

Interventional radiologists are physicians who specialize in minimally invasive, targeted treatments. They offer the most in-depth knowledge of the least invasive treatments available coupled with diagnostic and clinical experience across all specialties. They use X-ray, MRI and other imaging to advance a catheter in the body, such as in an artery, to treat at the source of the disease internally. As the inventors of angioplasty and the catheter-delivered stent, which were first used in the legs to treat peripheral arterial disease, interventional radiologists pioneered minimally invasive modern medicine. Today, interventional oncology is a growing specialty area of interventional radiology. Interventional radiologists can deliver treatments for cancer directly to the tumor without significant side effects or damage to nearby normal tissue.

Many conditions that once required surgery can be treated less invasively by interventional radiologists. Interventional radiology treatments offer less risk, less pain and less recovery time compared to open surgery. This year, SIR celebrates 40 years of innovation and advances in interventional radiology. Visit www.SIRweb.org.

The Society of Interventional Radiology is holding its 38th Annual Scientific Meeting April 13-18 at the Ernest N. Morial Convention Center, New Orleans. The theme of the meeting is 'IR Reaching Out,' adopted to illustrate the many ways the Annual Scientific Meeting provides valuable education to attendees with a broad range of diverse clinical interests and practice settings.

Local interviews and medical illustrations are available by contacting SIR's communications department staff: Ellen Acconcia, SIR communications manager/practice areas, eacconcia@SIRweb.org, (703) 460-5582, or Maryann Verrillo, SIR director of communications and public relations, mverrillo@SIRweb.org, (703) 460-5572.