

# Preface

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Prostate biopsy has progressed over the past century from an era of significant morbidity to the point where it can be performed in an office setting with low morbidity. The original description was an open perineal prostate biopsy performed as the first stage of a perineal prostatectomy. In contrast, major complications are now uncommon and prostate biopsy is one of the most common procedures performed by urologists.

Interest in the topic has increased dramatically in recent years as evidenced by the number of publications in the peer-reviewed literature by year of publication shown in Figure 1. This indicates that the topic will continue to grow as prostate cancer becomes more prevalent in an aging population.

Much of this recent interest relates to efforts to increase cancer detection, but there is increasing emphasis on improved instrumentation and technology. In addition, biopsy is now utilized to enhance evaluation of cancer quality relating to active surveillance for patients foregoing treatment because of the morbidity of prostate cancer treatments. However, the most significant increase in interest has been in the area of management of pain issues as evidenced by the number of peer-reviewed publications, which has exploded since the year 2000 (Figure 2).

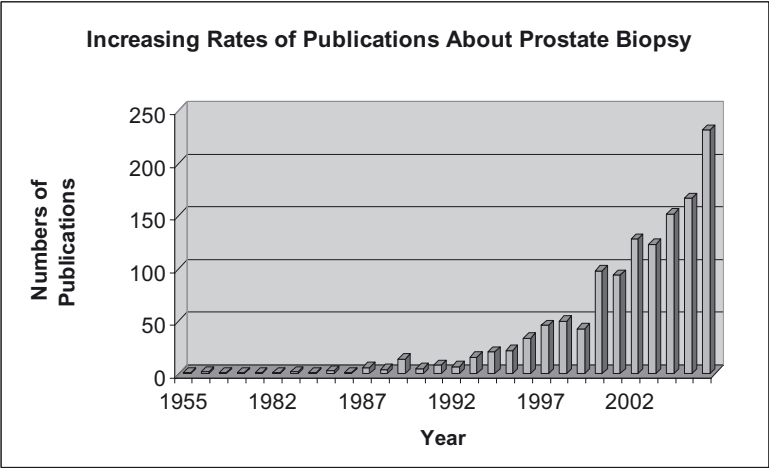


FIGURE 1.

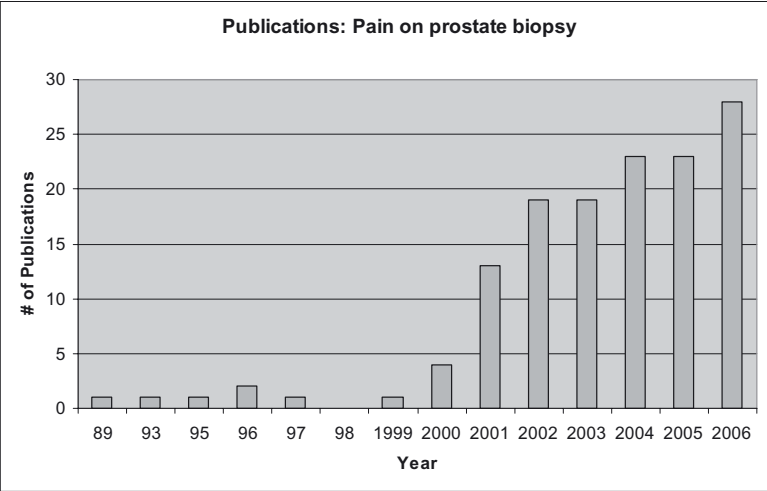


FIGURE 2.

The authors in this book have been carefully chosen as they represent the highest levels of expertise in this field. Browsing the list of authors involves recognition of those who have defined the science of prostate cancer diagnosis and those who continue to improve it. Taken together, their work shapes the state of the art in prostate biopsy and all topics related to prostate cancer diagnosis. The book includes intentional overlap of several chapters to acknowledge the existence and controversial nature of differing viewpoints by authorities considered the masters of their fields. Upon completion of this text, the reader will possess the most current understanding of this field.

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