EXINI

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MEASURING THE BONE SCAN INDEX (BSI) IS A STRONG COMPLEMENT TO PSA

Measuring the Bone Scan Index (BSI) on high risk patients with prostate cancer, can provide important information on survival, and is a strong complement to Prostate-Specific Antigen (PSA). This is shown in a recently published Swedish study.

In 2012, a number of studies have been published, showing the usefulness of the unique BSI value, calculated by the software EXINI bone. To these, another article is added, published in EJNMMI Research. This retrospective study from Sahlgrenska University Hospital in Gothenburg, Sweden, shows that the BSI measured at the occasion of diagnosis is a valuable add-on in order to risk-stratify high-risk patients with prostate cancer who underwent primary hormonal treatment.

Kaboteh R, et al. "Bone Scan Index: a prognostic imaging biomarker for high-risk prostate cancer patients receiving primary hormonal therapy." EJNMMI Research 2013, 3:9 doi:10.1186/2191-219X-3-9.

Conclusion: "*BSI can be used as a complement to PSA to risk-stratify high-risk prostate cancer patients at the time of diagnosis. This imaging biomarker, reflecting the extent of metastatic disease, can be of value both in clinical trials and in patient management when deciding on treatment.*"

BSI is an automatically measured imaging biomarker, which gives a quick and objective measure on the extent of the total skeleton that is inflicted by metastases. The current study, "Bone Scan Index: a prognostic imaging biomarker for high-risk prostate cancer patients receiving primary hormonal therapy" shows the BSI-value's strong connection to survival. The conclusion is that BSI adds further prognostic information in addition to the traditional measuring tools at hand, e.g. PSA.

- The results confirm earlier studies, and gives us further evidence that BSI adds new information. It gives quick and important guidance, which is valuable both in clinical routine, as in research, says *Lars Edenbrandt, Scientific Director & Founder of EXINI Diagnostics AB*

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