Reply to Sangeet Ghai's Letter to the Editor re: 'Francesco Giganti, Louise Dickinson, Clement Orczyk, et al. Prostate Imaging after Focal Ablation (PI-FAB): A Proposal for a Scoring System for Multiparametric MRI of the Prostate After Focal Therapy' Eur Urol Oncol 2023 May 18;S2588-9311(23)00083-

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Francesco Giganti, MD, PhD Division of Surgery and Interventional Science, University College London, 3rd Floor, Charles Bell House, 43-45 Foley St., London, United Kingdom W1W 7TS email: <u>f.qiqanti@ucl.ac.uk</u> Twitter: @giga_fra We appreciate Dr. Ghai's response and kind words to our article [1] because it provides some additional observations on the Prostate Imaging after Focal Ablation (PI-FAB) score, which is our newly suggested scoring system for multiparametric magnetic resonance imaging (MRI) of the prostate after focal ablation.

First, we agree that diffusion-weighted imaging (DWI) can lead the diagnosis of local recurrence (e.g., in the transition zone, as pointed out in the letter) after focal ablation, but it should also kept in mind that this sequence is not always included in the post-treatment MRI protocols, especially in the early post-treatment setting where the aim of the scan is to evaluate the coverage of the ablated zone and therefore dynamic contrast enhanced (DCE) sequences are the leading sequences here, as they are always performed for follow up imaging.

Second, we deliberately conceived PI-FAB as a 3-point scoring system based on our experience with the other available scoring systems in prostate MRI, as we have noted that the majority of scorers use 2,3 or 4 and the use of 1 and 5 are much rarer. This is reflected by the growing interest in the simplification of different scoring systems for prostate MRI [2-4], where the extreme values are often merged. This is a tricky area and could be a point of deliberation in the future. We envisage that the next iterations of scoring systems such as the Prostate Imaging Quality (PI-QUAL) [5] and Prostate Cancer Radiological Estimation of Change in Sequential Evaluation (PRECISE) [6] scores will consider this aspect and provide a simplified scale.

Lastly, we fully agree that the untreated prostate should be scored according to standard approaches (either Prostate Imaging Reporting and Data System - PI-RADS - or Likert scores) and also acknowledge that this could result in having two scoring systems using different scales in the same gland. However, we reiterate that the extreme scores (i.e., PI-RADS / Likert scores 1-2 and 4-5) convey the same clinical message, i.e., that biopsy should be either avoided or performed, respectively.

As mentioned in the original publication [1], we plan to apply PI-FAB in our large cohort of patients treated with focal therapy and we welcome collaboration with other national and international centres performing focal ablation to refine our PI-FAB proposal.

Urologists and Radiologists should always work synergistically, committing to innovation and improvement of the quality of life of patients with prostate cancer.

[1] Giganti F, Dickinson L, Orczyk C, et al. Prostate Imaging after Focal Ablation (PI-FAB): a proposal for a scoring system for multiparametric MRI of the prostate after focal therapy. Eur Urol Oncol (in press) https://doi.org/10.1016/j.euo.2023.04.007.

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[5] Giganti F, Allen C, Emberton M, Moore CM, Kasivisivanathan V, PRECISION study group. Prostate Imaging Quality (PI-QUAL): a new quality control scoring system for multiparametric magnetic resonance imaging of the prostate from the PRECISION trial. Eur Urol Oncol 2020;3(5):615-619.

[6] Moore CM, Giganti F, Albertsen P, et al. Reporting Magnetic Resonance Imaging in men on active surveillance for prostate cancer: the PRECISE recommendations – a report of a European School of Oncology Task Force. Eur Urol 2017;71(4):648-655.