Active surveillance (AS) has become the standard of care for most patients diagnosed with low-risk prostate cancer (PCa).

I read with great interest the article by Akarken et al. discussing their initial results with AS for low risk PCa patients.

In their retrospective study, the data of 36 patients who were included in the AS program in a single center, with the median follow-up period of 18.4 months, have been evaluated.

After reading the article, I propose some considerations for which clarification would be helpful. Although the inclusion criteria were stated as low-risk PCa patients, there were no patients in the study with involvement of more than 3 cores. There is only 1 patient with involvement of 3 biopsy cores. Under this circumstances, these results of the study mostly reflect the results of very low risk patient group.

Although patients with low risk PCa were specified as the inclusion criterion in the study, the absence of patients with more than 3 biopsy core involvements in the study suggests that there may be a bias in inclusion of very low risk patients in the study.

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Conflict of Interest
No conflicts of interest between the authors and/or family members of the scientific and medical committee members or members of the potential conflicts of interest, counseling, expertise, working conditions, share holding and similar situations in any firm.

Authorship Contributions
This study is entirely author’s own work and no other author contribution.
REFERENCES
