Specific Changes: Add recommendation for genetic risk assessment/testing to the Initial Clinical Assessment algorithm for newly diagnosed patients on page PROS-1, with a footnote describing the existing NCCN guidelines for assessment/testing (Genetic/Familial High-Risk Assessment: Breast and Ovarian, page BRCA-1):

“Personal history of prostate cancer (Gleason score \( \geq 7 \)) at any age with close blood relative with ovarian carcinoma at any age or breast cancer \( \leq 50 \) y or two relatives with breast, pancreatic or prostate cancer (Gleason score \( \geq 7 \)) at any age.”

FDA Clearance: Not applicable.

Rationale: The NCCN Guideline for Genetic/Familial High-Risk Assessment: Breast and Ovarian provide specific criteria for genetic evaluation/referral and testing of individuals with a personal history of prostate cancer. The identification of men with prostate cancers linked to an inherited mutation in \( BRCA1 \) or \( BRCA2 \) has clinical significance for managing their risks for the other cancers associated with these genes, i.e. male breast, melanoma and pancreatic cancer, as well as risks to family members. Identification of a mutation in \( BRCA1 \) or \( BRCA2 \) also provides prognostic information relevant to the treatment of their disease, as numerous studies have shown that prostate cancers in mutation carriers have a more aggressive course and are associated with worse outcomes.

Citations: The following articles are submitted in support of this proposed change. We would like to acknowledge the contributions of NCCN panel members who are also co-authors or co-contributors of some of these publications.


Sincerely,

[Signature]

Michael Brawer, MD
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