Supplementary Information

Figure S1. Risk of positive initial biopsies depending on urinary PCA3 score (n = 594 patients) Numbers of patients are indicated below the histograms for each category of PCA3 score. PCA3 = prostate cancer gene 3; PCa = prostate cancer.

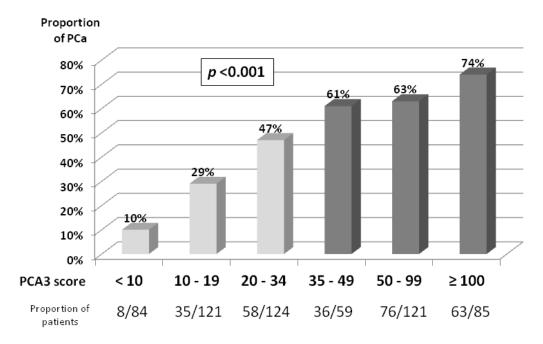


Figure S2. Diagnostic performances of serum PSA and urinary PCA3 score in predicting initial biopsy outcome (n = 594 patients). PSA = prostate-specific antigen; PCA3 = prostate cancer gene 3.

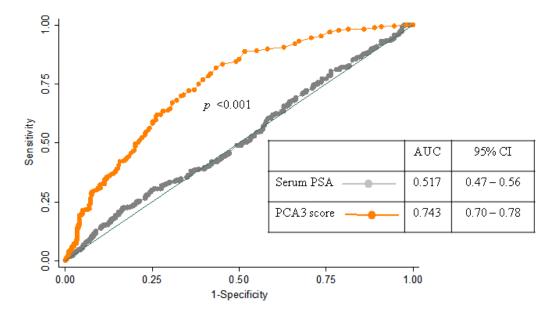


Figure S3. Decision curve analysis of predicting prostate cancer on initial prostate biopsy using regression models (n = 594 patients). Base model included age, DRE findings (suspicious *vs.* non-suspicious), prostate volume and serum total PSA. Urinary PCA3 score was added to the base model as either a continuous or a binary variable (around a cutoff 35) variable.

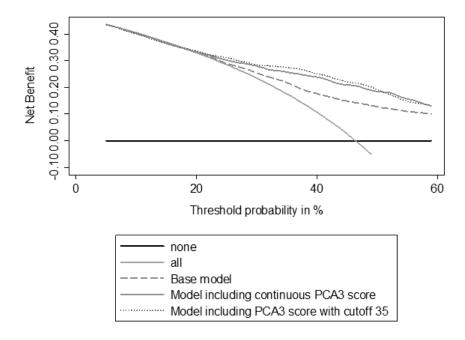


Figure S4. Comparison between the risk of prostate cancer as predicted by the Hansen's nomogram and the actual proportion of positive initial biopsies in the entire population (n = 594 patients). PCa = prostate cancer.

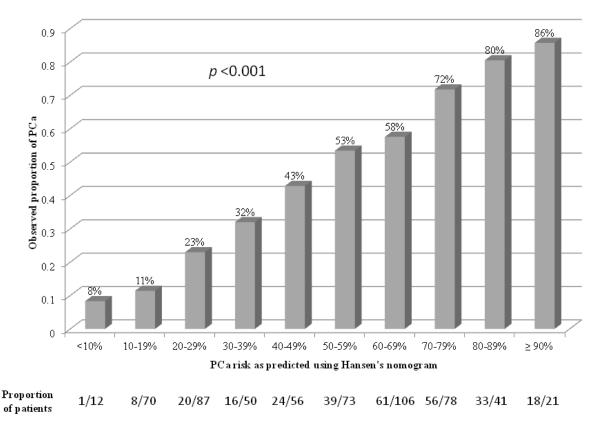
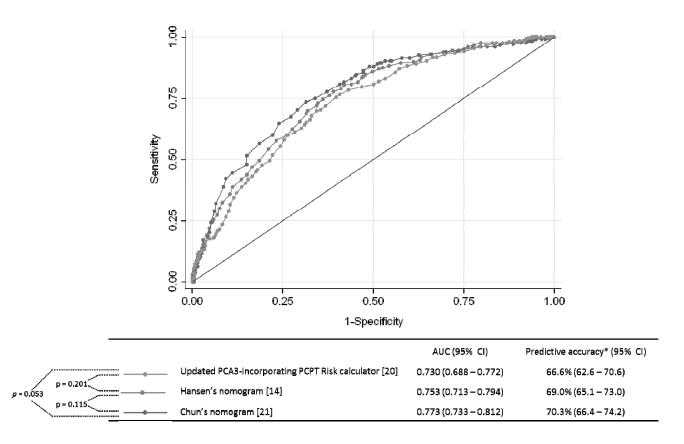


Figure S5. Comparison of performances of the three published urinary PCA3incorporating nomograms in predicting results of initial prostate biopsies (n = 536 patients) AUC = area under the curve; CI = confidence interval; PCPT = PCA3-incorporating prostate cancer prevention trial risk calculator. * Proportion of well-classified patients according to the best automatically calculated cutoff.



Pathological findings					
Number of samp	led cores ^a				
	12 cores	<i>n</i> = 520	88%		
	13-14 cores	<i>n</i> = 64	11%		
	15–18 cores	<i>n</i> = 10	2%		
Gleason score ^b					
	3 + 3 = 6	<i>n</i> = 148	54%		
	3 + 4 = 7	<i>n</i> = 81	29%		
	4 + 3 = 7	<i>n</i> = 30	11%		
	4 + 4 = 8	<i>n</i> = 15	5%		
	4 + 5 = 9	<i>n</i> = 1	0.5%		
	5 + 4 = 9	<i>n</i> = 1	0.5%		
Proportion of inv	aded cores ^b				
	≤33%	<i>n</i> = 191	69%		
	>33%	<i>n</i> = 85	31%		
Proportion of inv	aded tissue ^{b,c}				
I	Median (IQR)	5%	(2%–12%)		

Table S1. Pathological findings.

^a Assessed in the 594 patients; ^b Assessed in the 276 patients with positive biopsies; ^c Ratio length of invaded prostatic tissue/total length of biopsied prostatic tissue; IQR: interquartile range.

Table S2. Variation of diagnostic performances of urinary PCA3 test depending on various cutoffs.

Cutoff	Sensitivity	Specificity	Positive predictive value	Negative predictive value	Accuracy
17	89%	45%	58%	83%	65%
21	82%	57%	62%	78%	68%
24	78%	59%	62%	76%	68%
30	70%	67%	65%	72%	68%
35	63%	72%	66%	69%	68%
40	60%	74%	67%	68%	67%
45	55%	77%	67%	66%	67%
50	50%	79%	67%	65%	66%

PCA3 = prostate cancer gene 3; accuracy = proportion of correctly classified patients.

	Any PCa				HGPCa*			
	OR (95% CI)	p-Value	AUC (95% CI)	PA	OR (95% CI)	p-Value	AUC (95% CI)	PA
Age, year	1.05 (1.03–1.08)	< 0.001	0.602 (0.556-0.647)	58.1%	1.07 (1.04–1.11)	< 0.001	0.624 (0.570-0.679)	78.5%
DRE (suspicious vs. unsuspicious)	1.10 (1.05–1.16)	< 0.001	0.690 (0.649–0.705)	57.7%	1.18 (1.12–1.24)	< 0.001	0.742 (0.736-0.748)	78.6%
Prostate volume, cm ³	0.97 (0.96-0.98)	< 0.001	0.641 (0.597–0.685)	60.8%	0.97 (0.96-0.98)	< 0.001	0.651 (0.595-0.708)	78.5%
Serum PSA, ng/mL	1.03 (0.98–1.09)	0.257	0.517 (0.470-0.563)	54.0%	1.09 (1.03–1.16)	0.004	0.562 (0.504-0.620)	78.5%
PCA3 score, continuously coded	1.01 (1.01-1.02)	< 0.001	0.743 (0.704–0.782)	63.6%	1.01 (1.00–1.01)	< 0.001	0.689 (0.641–0.736)	77.4%
PCA3 score >21 <i>vs.</i> ≤21	5.90 (4.04-8.61)	< 0.001	0.794 (0.793–0.795)	68.4%	4.75 (2.82–7.99)	< 0.001	0.785 (0.781-0.788)	78.5%
PCA3 score ≥35 <i>vs.</i> <35	4.39 (3.11-6.20)	< 0.001	0.743 (0.741-0.745)	67.9%	2.76 (1.84-4.14)	< 0.001	0.661 (0.613-0.701)	78.5%

Table S3. Univariable logistic regression models predicting any prostate cancer and high-grade prostate cancer at initial biopsy.

Analyses were performed in the 594 patients. PCa = prostate cancer; HGPCa = high-grade prostate cancer (Gleason score \geq 7); OR = odds ratio; CI = confidence interval; AUC = area under the curve; PA = predictive accuracy using the best calculated cutoff; PSA = prostate-specific antigen; DRE = digital rectal examination; PCA3 = prostate cancer gene 3; * For this analysis, men with low-grade prostate cancer (Gleason score <7) were classified the same as men with negative biopsies.

_	Multivariate analysis							
	D		Base mode	el+	Base mode	2] +	Base mod	el+
_	Base model		continuous PCA3 score		PCA3 cutoff 21		PCA3 cutoff 35	
	OR (95% CI)	<i>p</i> -Value	OR (95% CI)	<i>p</i> -Value	OR (95% CI)	<i>p</i> -Value	OR (95% CI)	<i>p</i> -Value
Age, year	1.09 (1.05–1.12)	< 0.001	1.08 (1.04–1.11)	< 0.001	1.07 (1.03–1.11)	< 0.001	1.07 (1.03–1.11)	< 0.001
DRE	1.17 (1.10–1.24)	< 0.001	1.17 (1.10–1.24)	< 0.001	1.17 (1.10–1.24)	< 0.001	1.17 (1.11–1.24)	< 0.001
Prostate volume, cm ³	0.95 (0.94–0.97)	< 0.001	0.96 (0.94–0.97)	< 0.001	0.96 (0.94–0.97)	< 0.001	0.96 (0.94–0.97)	< 0.001
Serum PSA, ng/mL	1.16 (1.08–1.25)	< 0.001	1.16 (1.07–1.25)	< 0.001	1.15 (1.06–1.24)	< 0.001	1.15 (1.07–1.24)	< 0.001
Urinary PCA3 score	-	-	1.00 (1.00–1.01)	0.003	3.62 (2.07-6.36)	< 0.001	2.3 (1.46-3.64)	< 0.001
AUC	0.770		0.788		0.797		0.791	
IC95%	(0.723–0.817)		(0.744–0.833)		(0.754–0.839)		(0.747–0.834)	
<i>p</i> -Value*	-		<i>p</i> = 0.036		<i>p</i> = 0.037		<i>p</i> = 0.049	
PA	81.3%		81.1%		81.5%		81.8%	
IC 95%	(78.2%-84.4%)		(78.0%-84.3%)		(78.3%-84.6%)		(78.7%-84.9%)	
Increment in PA*	-		-0.2%		+0.2%		+0.5%	
<i>p</i> -Value *	-		p = 0.941		p = 0.941		p = 0.822	

Table S4. Multivariate analysis evaluating performances of logistic regression	on models to predict high-grade prostate cancer.

Analyses were performed in the 594 patients. AUC = area under the receiver operating curve; CI = confidence interval; DRE = digital rectal examination (suspicious vs. unsuspicious); OR = odds ratio; PA = predictive accuracy (proportion of well-classified patients according to the best automatically calculated cutoff); PSA = prostate-specific antigen; PCA3 = prostate cancer gene 3. * when comparing to the base model.

© 2013 by the authors; licensee MDPI, Basel, Switzerland. This article is an open access article distributed under the terms and conditions of the Creative Commons Attribution license (http://creativecommons.org/licenses/by/3.0/).