

# Understanding Prostate Cancer Screening

## [ And What it Means for ME ]

- **Does a high PSA mean that I have prostate cancer?**

- ⇒ Not necessarily.
  - ⇒ High PSA levels may be associated with non-cancerous conditions such as an enlarged prostate known as benign prostatic hypertrophy (BPH), an infection of the prostate (prostatitis), urinary tract infections (UTI), recent prostate or urinary tract procedures, or for no identifiable reason.
- ⇒ The only way to diagnose prostate cancer is by taking a biopsy.

- **What are my options if my PSA comes back elevated?**

- ⇒ Repeat: Most of the time, your physician will repeat the PSA test in about 3 months to see if the PSA is still elevated or if it has increased. It is important to remember that PSA levels may slowly and steadily rise without any underlying disease.
- ⇒ Further tests: If your physician is worried that a high PSA might be from another cause, the physician may order tests including a urine analysis, cystoscopy, or an ultrasound to look for signs of infection, blockage of the urethra, or an enlarged prostate—all of which can be treated. Your physician may refer you to a urologist for further evaluation.
- ⇒ Prostate Biopsy: If your PSA remains elevated or there are other risk factors or signs of cancer, your physician may refer you to a urologist for a biopsy.

- **What are treatment options for prostate cancer?**

- ⇒ There are currently a number of treatment options for men that are diagnosed with prostate cancer. They include watchful waiting, surgery, different types of radiation therapy, and medications that block hormone production.
- ⇒ Treatments are determined by different factors including the cellular grade of the cancer (known as the Gleason score), the stage or spread of the cancer, the age of the patient, and the side-effects of treatment options.

- **Where can I get more information about prostate cancer and PSA screening?**

- ⇒ The Centers for Disease Control information page on prostate cancer:  
<http://www.cdc.gov/cancer/prostate/>
- ⇒ The National Cancer Institute at the National Institute of Health PSA Fact Sheet:  
<http://www.cancer.gov/cancertopics/factsheet/detection/PSA>
- ⇒ U.S. Preventive Services Task Force statement on PSA screening:  
<http://www.uspreventiveservicestaskforce.org/uspstf12/prostate/prostateart.htm>

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- **What does the prostate gland do?**
  - ⇒ The prostate gland is located under the bladder. It makes substances that protect semen and produces 20-30% of the ejaculation fluid.
- **What is PSA?**
  - ⇒ PSA stands for Prostate Specific Antigen, a protein made by cells in the prostate gland that can be detected by a simple blood test.
- **What is PSA screening used for?**
  - ⇒ PSA screening is used in addition to a digital rectal exam (DRE) to help in the detection of prostate cancer, the #1 cause of cancer in men in the United States.
- **When should I start PSA screening and how often should I get it?**
  - ⇒ There is NO agreement on what age or how often men should get PSA screening.
  - ⇒ The United States Preventive Screening Task Force (USPSTF) no longer recommends PSA screening at all in the general population. Here are some of the major reasons why:
    - Early detection may not prolong life: In two major studies, PSA screening resulted in higher detection of prostate cancer, but screening did NOT result in decreased prostate cancer deaths after 10-years of follow-up.
    - There are high rates of false-positive results: One study found that 12% of men had false-positive PSA tests after having 3 rounds of screening. In a large trial, 76% of men with elevated PSAs had no evidence of cancer after biopsy, a procedure that involves taking samples from the prostate to diagnose cancer.
    - There are side-effects from over-treatment: There appears to be over-treatment of low-risk prostate cancers that may not ever cause death or harm, and treatments including prostatectomy (surgical removal of the prostate) and radiation can cause urinary incontinence and erectile dysfunction in 20-30% of men, among other side effects.
  - ⇒ You should discuss with your doctor whether you'd like PSA screening and how often you should have it. Some men may opt to have it done annually starting at age 50, once every few years, or only if they have abnormal physical exam findings or symptoms.
  - ⇒ Men with risk factors for prostate cancer including age 65 years or older, African American race, or having a father or brother with prostate cancer may choose to have earlier and more frequent screening.
- **What is an elevated PSA?**
  - ⇒ There are different opinions about what the cut-off is for a high PSA, but the most common definition is a PSA over **4 ng/dL**.
  - ⇒ In addition to the PSA value, your physician also looks at the PSA rate of increase; a rise over **0.75 ng/dL in 1 year** is considered high.