



PSA testing and prostate cancer: advice for well men aged 50 and over

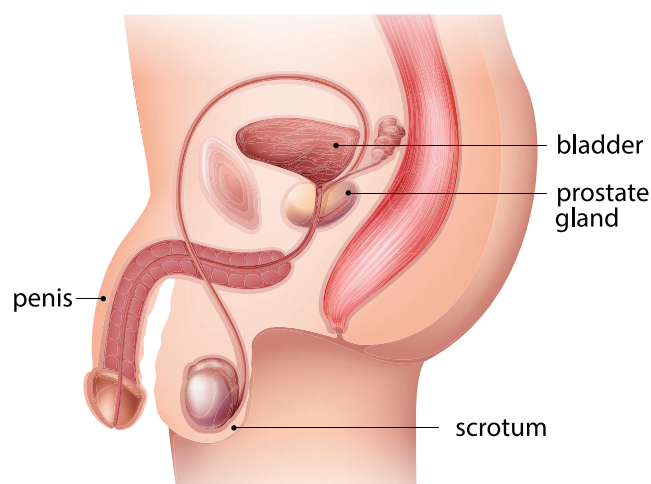
The prostate specific antigen (PSA) test may help find out if you are more likely to have prostate cancer. It is not perfect and will not find all prostate cancers.

Having a PSA test has potential harms and potential benefits.

This information should help you decide if you want to have the test or not. It is your decision. Before making your decision you may want to talk to your GP, practice nurse and your partner, family member or a friend.

Prostate cancer

The prostate gland lies just below your bladder. It helps produce healthy sperm. Problems with the prostate gland can affect how you urinate and your sexual function.



Prostate cancer is caused when some cells in the prostate start to grow out of control. Slow-growing cancers are common. They may not cause any symptoms or shorten your life.

Prostate cancer is the second most common cause of cancer deaths in UK men. Each year about 47,000 men are diagnosed with prostate cancer and about 11,000 die from the disease. Prostate cancer is rare in men under 50. The most common age of diagnosis is between 65 and 69.

Symptoms

Most early prostate cancers do not have any symptoms. If there are symptoms, many are the same as those caused by an enlarged prostate that is not cancerous. Symptoms can include problems urinating, pain when ejaculating, pain or stiffness in the lower body, extreme tiredness and loss of appetite.

Risk

You are at higher risk of prostate cancer if you:

- have a family history of prostate cancer
- are of black ethnic origin – the lifetime risk is 1 in 4 compared to 1 in 8 for white men
- are overweight or obese

There is no clear evidence to recommend PSA testing more for high risk men than low risk men.

PSA test

The PSA blood test measures the level of PSA in your blood. A raised PSA level can mean you have prostate cancer. But it can also mean you have a condition that is not cancer, such as enlargement of the prostate or a urinary infection.

Test results and follow-up

If you have a raised PSA level you might need further tests, including a biopsy. This involves taking small samples of your prostate through your back passage and checking them for cancer.

If you have prostate cancer, your specialist will discuss options. Men with slow-growing cancers may be offered active surveillance. This involves repeat PSA tests to monitor the cancer, with treatment offered if the cancer starts to progress.

Possible treatments include surgery, radiotherapy and hormone therapy. Side effects of treatment can include problems with erections, loss of fertility and incontinence.

Find out more at
www.nhs.uk/psa

Potential benefits and risks of PSA testing

	Having the PSA test	Not having the PSA test
Health 	If you have the PSA test and follow-on treatment you are less likely to die of prostate cancer than men who do not have the test. Having an abnormal PSA test result means you may be offered further tests and treatments, which may harm your health.	If you do not have the PSA test you are more likely to die of prostate cancer than men who do have the PSA test. You are also more likely to experience the complications of advanced incurable prostate cancer.
Test results 	The PSA test may reassure you if the result is normal. But it can miss cancer and provide false reassurance. If you have prostate cancer, you are more likely to be diagnosed and treated early. But an abnormal test result may also lead to unnecessary worry and medical tests when there is no cancer. The test cannot tell the difference between fast-growing cancers and slow-growing cancers that may not cause symptoms or shorten your life.	If you do not have the PSA test you may avoid unnecessary worry and tests after an abnormal result when there is either no cancer or a slow-growing cancer. If you have prostate cancer, you are less likely to be diagnosed and treated early.
Accuracy 	About 75 out of every 100 men who have an abnormal PSA test result do not have prostate cancer. This is called a false positive result. About 15 out of every 100 men who have a normal PSA test result do have prostate cancer. This is called a false negative result.	If you do not have a PSA test, you will not get a false positive or a false negative result but the chance of early detection may be missed.
Follow-up 	About 17 out of every 100 men who are tested have an abnormal test result. About 82 out of every 100 men who have an abnormal result will have a biopsy. Some men have problems or complications after a biopsy for prostate cancer. The most common complications are bleeding and infections.	If you do not have a PSA test, it is unlikely you will need to have a biopsy unless you get symptoms of prostate cancer, at which stage the cancer might be more advanced.
Treatment 	If you are diagnosed with prostate cancer, you will need to decide about treatment. Potential treatments can include surgery, radiotherapy and hormone therapy. Side effects of treatments for prostate cancer can include problems with erections, loss of fertility and incontinence.	If you choose not to have a PSA test, it is unlikely you will need treatment for prostate cancer, unless you get symptoms. This means you are less likely to have any complications from treatments.