AUAFOUNDATION
The Official Foundation of the American Urological Association

What Patients Should Know About Prostate Screening

Prostate cancer is the most common non-skin cancer in men in the United States, and the second leading cause of cancer death in men. One in six men will be diagnosed with prostate cancer during his lifetime. African-American men face a one in three chance of being diagnosed. Over 30,000 men die each year from prostate cancer; however, early detection may save lives.

The American Urological Association Foundation (AUA Foundation) is concerned that recent reports about prostate specific antigen (PSA) testing may present conflicting information to patients about the value of this critical prostate-cancer screening test. The benefits of regular screening and early detection should not be discounted in the overall population.

Speak to your healthcare provider.

The AUA Foundation believes that the decision to screen is one that a man should make with his doctor following a careful discussion of the benefits and risks of screening. In men who wish to be screened, the AUA recommends getting a baseline PSA, along with a physical exam of the prostate known as a digital rectal exam (DRE) at age 40.

What is PSA? Prostate-specific antigen (PSA) is a substance produced by the prostate gland. The PSA level in a man's blood is an important marker of many prostate diseases, including prostate cancer.

Men who wish to be screened for prostate cancer should have both a PSA test and a DRE. Evidence from research studies suggests that combining both tests improves the overall rate of prostate cancer detection.

A variety of factors can affect PSA levels and should be considered in the interpretation of results. The three most common prostate diseases— prostatitis, benign prostatic hyperplasia (BPH), and prostate cancer—may cause elevated PSA levels in the blood. Other medications, trauma or treatments (which can include a prostate biopsy or cystoscopy) to the prostate can affect PSA test results.

Men choosing to undergo PSA testing should know that some important factors may influence results.

- Change in PSA levels over time, known as PSA velocity, is used to assess both cancer risk and aggressiveness.
- Blood PSA levels tend to increase with age.
- Larger prostates produce larger amounts of PSA.

A prostate biopsy confirms the presence of prostate cancer. The decision to proceed with a prostate biopsy should be based primarily on PSA and DRE results. It should also take into account other factors including a man's family history of prostate cancer, his race, any prior biopsy history and other significant health issues he may have.

PSA level in a man's blood is generally a good predictor of the risk of prostate cancer and the extent of the cancer. Men whose PSA levels rise sharply over a short period are more likely to have prostate cancer than those who do not see significant changes in their PSA velocity.

The decision to use PSA for the early detection of prostate cancer should be individualized. Men should be informed of the known risks and the potential benefits of early screening.

To learn more about prostate cancer, visit **KnowYourStats.org** and click on the Resources link. **UrologyHealth.org** also includes valuable patient education information about prostate cancer, as well as many other urologic health resources and research information.

Know Your Stats
About Prostate Cancer®