

# Kijabe OPD Guidelines PSA Screening - should I be tested?



#### **Key Facts:**

- The PSA test (prostate specific antigen) is a blood test to see if you might have prostate cancer and to monitor treatment for prostate cancer.
- The PSA blood level is also increased in other conditions.
- Experts disagree on how useful the PSA test for screening is.
- This advice is for ASYMPTOMATIC men only. For SYMPTOMATIC men see LUTS guideline.

# **Benefits of Testing**

- PSA testing may lead to prostate cancer being detected earlier, before symptoms develop.
- Detecting prostate
   cancer early before
   symptoms develop may
   improve outcome
   (prognosis) and improve
   the chance of complete
   cure.

## **Limitations and Risks**

- False negative result: about 15 out of 100 men with a negative PSA test may have prostate cancer.
- False positive result: about 75 out of 100 men with a positive PSA test have a normal prostate biopsy (ie no evidence of cancer).
- A false positive PSA test may lead to unnecessary investigations, such as a prostate biopsy, and there may be sideeffects from this investigation, such as bleeding or infection.
- A positive result may also lead to unnecessary treatment. Many prostate cancers are slow growing and may not become evident during your lifetime. Sideeffects of treatment are common and can be serious, such as urinary incontinence and sexual problems.

#### How the Test is done.

If you decide to have a PSA test, your doctor will take a blood sample and will give you a digital rectal examination to feel the prostate gland and determine if it feels abnormal in any way.

When you have a PSA test, you should not have:

- An active urine infection.
- Produced semen (ejaculated) in the previous 48 hours.
- Exercised heavily in the previous 48 hours.
- Had a prostate biopsy within 6 weeks.
- Had a digital rectal examination in the previous week.

# PROSTATE SCREENING IN MEN

IF THERE WAS A PSA PROSTATE CANCER SCREENING PROGRAMME

Of 1,000 men aged 45-80, without any symptoms...

WITH PSA SCREENING

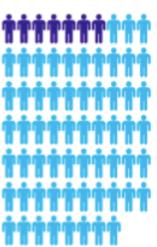
#### WITHOUT SCREENING

will be diagnosed with prostate cancer

will be diagnosed with prostate cancer

7 will die of prostate cancer

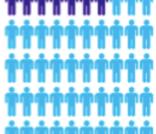
61 will be treated and survive their cancer

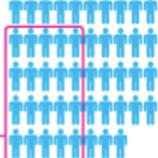


- 7 will die of prostate cancer
- 81 will be treated and survive their cancer
- 20 of the 81 will be overdiagnosed. These are cancers that wouldn't have caused any

harm.\* -

88





#### DUE TO SCREENING

No lives will be saved and around 20 men will be diagnosed with cancers that would not have caused them any harm.

lives will be saved due to screening



\*It is not possible to tell who these men are. They may go through unnecessary treatment, worry and potential complications such as infections, sexual dysfunction and bladder and bowel control problems.

Reference: Screening for Prostate Cancer (Review), The Cochrane Library 2013

LET'S BEAT CANCER SOONER cruk.org



### • References:

- Image Credit Cancer Research UK
- https://patient.info/mens-health/prostate-and-urethra-problems/prostate-specificantigen-test-psa