

PRINT-Finding Clarity in Confusion about Prostate Cancer Screening

Dr. Andy Peterson, a family physician at OSF Medical Group in Kewanee says he often sees men make an appointment with him after a heart attack or a cancer scare. Men are notoriously bad about getting regular check-ups but that could be changing. The latest data from the Centers for Disease Control and Prevention shows 64% of men said they'd seen a doctor in the past six months.

June is Men's Health Month, designed to raise awareness about the need for men to get regular preventative screenings and check-ups. One of the more challenging messages involves prostate cancer screening. Recommendations have changed several times in the past decade including as recently as a year ago.

Dr. Eminajulo (Emi) Adekoya, a urologist with OSF HealthCare Medical Group in Alton says the [U.S. Preventative Services Task Force latest recommendations](#) suggest a PSA blood test can reduce the chance of death from prostate cancer in some men but it can also lead to false positives, overtreatment and serious side effects such as incontinence or erectile dysfunction.

He suggests making a separate appointment with your family doctor to discuss if you should be screened and at what age. Prostate cancer is rarely found in men younger than 50 years old but Dr. Adekoya says risk factors matter.

"If a patient has a higher risk of getting an infection or if they don't have a family history of prostate cancer, those things kind of play into what age is the right age to start," he said.

The task force and the [American Urological Association](#) recommends men with average risk consider discussions with their family doctor after age 55. If a man has risk factors such as a father or brother who had prostate cancer he might want to begin screening discussions at age 40 to 45 years. Additionally, African American men should discuss early screening because research shows they are at a higher risk for the deadliest type of prostate cancer.

The blood test checks for the presence of prostate specific antigen (PSA). It's typically only found in the blood if something is wrong with the structure of the prostate, allowing the antigen to leak into the blood stream.

What if a test shows an elevated PSA concentration? Dr. Adekoya says that does not necessarily mean there is a cancer. He would perform another test to rule out lab error and then consider imaging, other tests or in some cases, order a biopsy. If the result is positive for cancer, he still might not suggest immediate treatment.

"If we do diagnose prostate cancer, even within that category of people with prostate cancer, there are different treatment options and one of the most common ones now is called *active surveillance*, where you don't have to get radiation or surgery, but we can watch it to make sure nothing is going crazy in there," he suggested.

An argument for regular tests include the ability to detect cancer early. Dr. Adekoya says most prostate cancer is slow-growing and research has found many men die of other causes before they even develop symptoms of prostate cancer.

However, there are different types and grades of prostate cancer and some could require treatment. Dr. Adekoya advises once you know your prostate cancer requires treatment, talk with both a surgeon and a radiation oncologist to make the best decision in consultation with a urologist.

He said some men prefer surgery because it leaves them with future treatment options.

"So if you get surgical treatment, you still have in your back pocket, radiation and hormone therapy if things kind of go crazy. If you get radiation treatment first, well then it's really hard to convince a surgeon after you've had radiation to take out the prostate," according to Dr. Adekoya.

He explains surgery after radiation is more difficult and results in more complications.

Bottom line: The greatest benefit of screening appears to be in men ages 55 to 69 years. Men should be informed about the benefits and risks of prostate cancer screening and treatment and make decisions that best reflect their personal values and preferences. According to the Preventative Service Task Force guidelines, once screening begins, it should occur every two to four years (if continued testing is desired) and should include a PSA blood test.

Guidelines suggest stopping screening after age 69, though some experts would continue offering screening to very healthy men beyond that age.

During this Men's Health Month, make it a priority to set up an appointment to talk with your primary care doctor or advance practice nurse about the preventative screenings and vaccinations that are most appropriate for you, based on your age. It is important to [establish regular care with a provider](#) who can order screenings, oversee your overall health, and coordinate care if you have other specialists.