

BROADCAST-Finding Clarity in Confusion about Prostate Cancer Screening

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 (ad-uh-COY-uh), 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 an appointment with your family doctor to discuss if you should be screened and at what age.

SOT-Dr. Emi Adekoya, urologist with OSF HealthCare Medical Group in Alton, IL

“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.” (:12)

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 40 or 45 years. African American men should discuss early screening because they're at a higher risk for the deadliest type of prostate cancer.

What if a test shows an elevated PSA concentration? Dr. Adekoya says that does not necessarily mean there is a cancer. There are other tests or a biopsy could be ordered. If results are positive for cancer, he says many urologists would not begin treatment right away.

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“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.” (:16)

Dr. Adekoya says most prostate cancer is slow-growing however some forms are aggressive and could require treatment. He suggests talking to both a surgeon and a radiation oncologist before making a decision.

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“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 it's really hard to convince a surgeon after you've had radiation to take out the prostate.” (:18)

Bottom line: The greatest benefit of screening appears to be in men ages 55 to 69 years. Once screening begins, it should occur every two to four years 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.

(For web, consider downloading and using the Prostate Screening Infographic)

