

### ARC's recommendation on screening for prostate cancer:

Based on current medical knowledge, it is very hard to definitively answer the question of the value of prostate cancer screenings.

Best evidence suggests that the value of screening is low and might be offset by the potential risk of over-diagnosing silent tumors or by the complication related to prostate biopsy and cancer treatment, especially in average risk patients.

We recommend that you discuss the information below with your doctor so we can help you make the best informed decision.

### What do I need to know about prostate cancer and screening for it?

- Prostate cancer is the second leading cancer in men in the United States. (1 in 6 men will be diagnosed with prostate cancer in their life time)
- Nearly two thirds of prostate cancers are diagnosed in men aged 65 or older.
- Prostate cancer is the second leading cause of cancer death in American men, behind only lung cancer. About 1 man in 36 will die of prostate cancer.
- Most men diagnosed with prostate cancer do not die from it. In fact, more than 2.5 million men in the United States who have been diagnosed with prostate cancer at some point are still alive today.
- Best evidence suggests that without screening, over 10 years, approximately 40 of 10,000 men ages 55 to 69 would be expected to die from prostate cancer.
- With regular PSA screening, only 33 would be expected to die from prostate cancer and seven lives would be prolonged. To achieve these benefits, more than 300 would need to be treated for prostate cancer, and some would have side effects, such as impotence or incontinence. These are best case scenarios based on current evidence. Some large studies suggest no mortality benefit at all.

### What are the Pros of prostate cancer screening?

- It is done with a simple blood test (PSA).
- Testing will find cancer at an earlier stage, in which case a cure is more likely.
- Evidence suggests that prostate cancer mortality and the risk of metastasis disease have fallen substantially. This might be due to PSA screening, but other factors, most notably advances in prostate cancer treatment, could be involved.

### What are the cons of Prostate cancer screening?

- About 50% of patients with an abnormal initial screen will end up not having cancer.
- May lead to increased numbers of prostate biopsies, which can cause pain and a very small chance of other complications like bleeding and infection.

- May detect slow growing (silent) cancer that may never bother you or shorten your life span, leading to anxiety and unnecessary treatments, as well as rare but significant side effects related to treatment like incontinence and erectile dysfunction.

### When would I consider screening?

- Men between the ages of 50-75 with no risk factors
- Men between the ages 40-75 with risk factors (African American, first degree family member with a prostate cancer before the age of 65)
- If you are having blood in the urine, pain or difficulty passing urine or trouble having an erection

### When would I consider not being screened?

*Screening is not recommended if:*

- Your age is less than 40 or over 75, you have significant medical problems, or a life expectancy of less than 10 years

*Screening could be deferred if:*

- You have no risk factors (African American or family history of prostate cancer before the age of 65) AND
- You have no urinary symptoms (blood in the urine, trouble urinating, pain, or erection trouble) AND
- You are concerned about the cons of prostate cancer screening discussed above.

### Major Societies recommendations:

- U.S Preventive Service Task Force and American Academy of Family Physicians: Recommends against PSA based screening for prostate cancer. [www.ahrq.gov/clinic/uspstfix.htm](http://www.ahrq.gov/clinic/uspstfix.htm) and [www.aafp.org](http://www.aafp.org)
- American Cancer Society and the American College of Physicians: Recommends against routine screening for all men and recommends for targeted screening based on individual factors and only after discussing the Pros and Cons of screening. [www.cancer.org/](http://www.cancer.org/) and [www.acponline.org/](http://www.acponline.org/)
- American Urology Association: Recommends informing men about the risks and benefits of screening and then screen annually for prostate cancer for all men starting at age 50 (age 40 for individuals at higher risk) [www.auanet.org/content/homepage/homepage.cfm](http://www.auanet.org/content/homepage/homepage.cfm)