

Investigating A Raised PSA

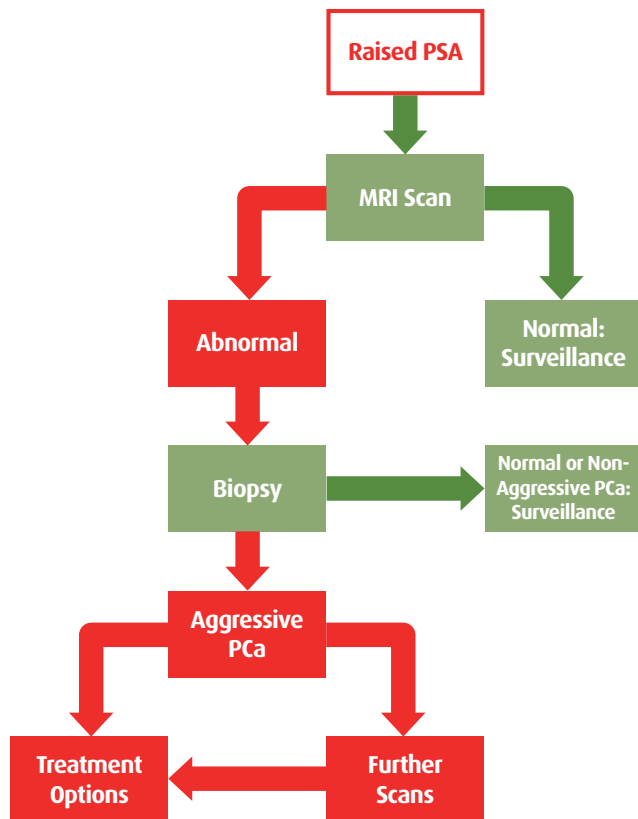
PSA levels : ng/ml**

Age	< 2.0	2.0-3.0	3.0-4.0	4.0-5.0	5.0-6.0	> 6.0
Under 50	Green	Yellow	Red	Red	Red	Red
50-59	Green	Green	Yellow	Red	Red	Red
60-69	Green	Green	Green	Yellow	Red	Red
70+	Green	Green	Green	Green	Yellow	Red

■ Normal: reassure
■ Slightly raised: review
■ Abnormal: investigate

*These levels are slightly higher than Dept of Health and slightly lower than the British Association of Urological Surgeons recommendations:

DoH: www.cancerscreening.nhs.uk/prostate/prostate-booklet-text.pdf
 BAUS: www.baus.org.uk/_userfiles/pages/files/Publications/MDT%20Prostate%20Cancer%20Guidance.pdf



CHAPS is a men's health charity dedicated to raising awareness and screening for all men's health issues and PCa in particular.

Tackle Prostate Cancer is the campaign name of The National Federation of Prostate Cancer Support Groups, charity no. 1163152. Tel no. 0800 035 5302. To find a support group near you, consult our website: www.tackleprostate.org/find-a-support-group-near-you.php For screening events see: www.tackleprostate.org/psa-testing-days.php

Prostate Cancer Charities & Screening Organisations

Barry Kilby Prostate Cancer Appeal:
www.facebook.com/bkpc
info@thebkpca.com
 01282 685 400



CHAPS: www.chaps.uk.com
info@chaps.uk.com
 01206 321253



Graham Fulford Charitable Trust:
www.psatests.org.uk
gfcharitabletrust@gmail.com
 01926 419959



PCaSO: www.pcaso.org
info@pcaso.org
 0800 035 5302



tackle

prostate cancer

Action for patients and their families
Registered Charity No 1163152

PROSTATE CANCER

SCREENING & THE PSA TEST

What All Men Need to Know



Conclusion

The best results are achieved by regular PSA tests starting no later than 50 and continued in a 'Screening Programme' with regular tests till at least age 70. The frequency of testing should be determined by risk: 1-2 yearly for men at high risk but less often if the risk is low.



Registered Charity No 1045849

Who Needs Screening?

All men should know about their prostate gland because it causes so many problems, one of which is cancer. International specialist urological panels recommend all men should start prostate cancer (PCa) screening from age 40, especially men at **high risk**. These are:

- Men in their 40s with an initial PSA > 1.00ng/ml
- Black men or mixed race men of African or Caribbean descent
- Men with a family history of PCa or breast cancer on the mother's side.

Men below age 40 DO NOT need screening. There is no evidence to support screening for elderly men with less than 10 years' life expectancy.

Why Screen?

Prostate Cancer is the commonest major cancer in UK men and the second commonest cancer killer now causing **48,000 new cases** and **12,000 deaths each year**. That is equivalent to a death every 45 minutes!

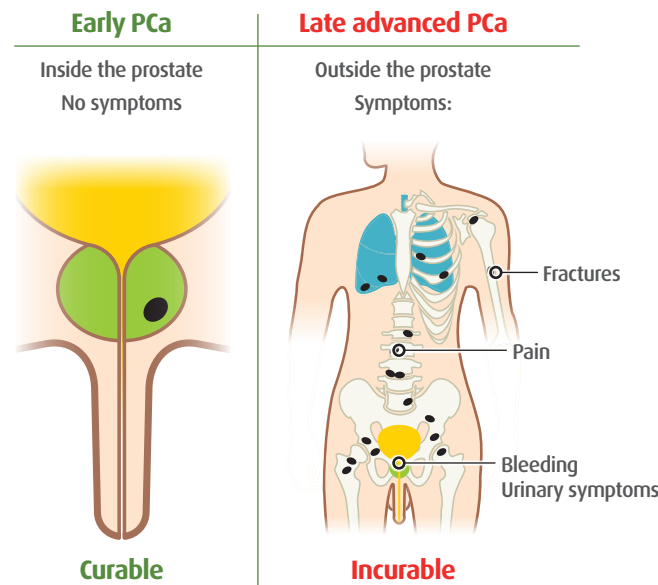
The UK has one of the worst death rates in Europe, even though trials running up to 20 years now clearly demonstrate that PCa screening with the simple blood test PSA could halve this death rate!

What is The Prostate?

The prostate is a small gland lying under the bladder and encircling the urethra, the tube that carries urine into the penis. It produces fluid (semen) to nourish sperm in a man's ejaculate.

Benign enlargement of the prostate affects most men over 65 and causes urinary symptoms such as a slow flow and frequent, urgent peeing, especially at night. It is easy to treat with drugs when caught early.

Prostate cancer usually grows slowly and causes no symptoms till it has spread. That is why screening needs to be done before symptoms arise whilst the cancer is still inside the prostate and curable.



How We Screen

Screening is done simply by a blood test called Prostate Specific Antigen (PSA), a protein produced only by the prostate. PSA is thus specific to the prostate but to no specific condition.

The NHS Prostate Cancer Risk Management Programme entitles all UK men over 50 to have an NHS PSA test (after counselling) which can be arranged by their GP.

About 1 in 3 men with a persistently raised PSA will have PCa and require specialist investigation. The first specialist test should be an MRI scan of the prostate, though other urine or blood tests may be done before deciding upon an MRI. If an MRI scan is normal, the risk of an aggressive PCa is very low. If the scan shows an abnormality, the next step is a biopsy to obtain prostate tissue samples. If no cancer is detected, the urologist will probably keep an eye on you for a year or two. If PCa is detected, more scans may be performed to ensure the cancer has not spread.

Once all this data has been collected, treatment options will be recommended for you to make an informed choice on the option that suits you best. Not all PCa needs active treatment but screen detected PCa confined to the prostate requiring treatment is nearly always curable and will not curtail your natural lifespan.