

WE MUST DO BETTER: A POSITION STATEMENT REGARDING PSA SCREENING



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Last May, the U.S. Preventative Services Task Force triggered a firestorm of debate when it recommended against the prostate-specific antigen (PSA) test as a screen for prostate cancer.

By discouraging PSA screening, they hope to diminish the harm caused by prostate cancer over-treatment. Unfortunately, they also risk delaying its diagnosis.

In her editorial responding to the controversy, Task Force chair Dr. Virginia Moyer summarized the committee's findings with this sentence: "We can do better." We at the Prostate Cancer Research Institute (PCRI), while disagreeing with the Task Force's "D" rating of PSA, do agree with Dr. Moyer's conclusion: We can, indeed, do better.

We can, for instance, do a better job of educating men on the optimal use of the PSA test. If men simply pause to think before rushing into a biopsy, they can:

- 1) Better determine the need for biopsy by determining the aggressiveness of the tumor with the PSA doubling time; and
- 2) Improve biopsy accuracy by locating the tumor beforehand with a multi-parametric MRI.

This is valuable information that improves biopsy outcomes and decreases the cost of care by improving the use of biopsy, the very things the USPS Task Force has asked us to do.

However, all this recent controversy gives people an excuse to ignore a disease that affects one in six men and causes the death of 28,000 every year. The subject of prostate cancer already makes men uncomfortable. The controversy over the PSA test gives them one more reason to avoid a well thought-out action plan for their prostate health and screening.

The PCRI encourages men to learn about PSA screening in consultation with their physician. When PSA screening detects elevated levels, be prepared for this consultation by using the PCRI Helpline and other educational programs before proceeding to biopsy and treatment.

PCRI supports Rep. Marsha Blackburn in her efforts to pass HR 5998, a bill that would help Dr. Moyer's team resolve controversies like this before they begin. The proposed bill would increase the accountability and oversight of the Task Force (to learn more about the bill and read the full text, visit <http://www.opencongress.org/bill/112-h5998/show>). You can take a position with us by sending me an e-mail at dfoster@pcri.org.

We at the PCRI encourage PSA use with wisdom, patience, education, healthy behaviors and careful health care choices. The PCRI stands in agreement with Dr. Moyer that together, we *must* do better.