

Study finds more PSA screening awareness needed among high-risk groups

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In one of the first examinations of PSA screening in younger men, a study published by researchers at Duke Medicine's Prostate Center finds that one-fifth of men under age 50 reported undergoing a prostate specific antigen (PSA) test to detect prostate cancer in the previous year, yet only one in three young black men reported ever having a PSA test in the previous year.

Overall, that's pretty good news for white men at average risk, researchers say, but not for black men or men with a family history who are at higher risk for developing the disease.

The findings appear online in the journal *Cancer* and will appear in the print version on Sept. 15.

"Our findings for black men are discouraging," says Judd W. Moul, MD, chief of the division of surgical urology at Duke and the paper's senior author. "We've been encouraging black men to get screened at age 40 or 45 for more than a decade, yet only one-third of these high-risk men reported being tested."

To assess how many men age 40-49 are being screened, Dr. Moul and Charles Scales, MD, a urology resident and researcher at Duke and the paper's first author, reviewed the 2002 Behavioral Risk Factor Surveillance System, an ongoing, state-based, random telephone survey of the U.S. population.

Their study showed several socio-demographic characteristics associated with PSA screening in young men. Young black men were more likely than young, white, non-Hispanic men to report having a PSA screening in the previous year. The survey also showed that younger Hispanic men were more likely to undergo PSA testing than younger white non-Hispanic men.

Health insurance, an ongoing physician-patient relationship, increasing obesity, and high household income and education level were also associated with having a recent PSA test.

"Our findings provide an important baseline assessment of PSA test use among young men as physicians debate whether to expand use of the PSA test in young men with risk-stratification strategies," says Scales.

Current guidelines encourage prostate cancer screening in men age 50 or older if they have a life expectancy of at least 10 years. High-risk groups, such as African Americans or those men with a positive family history, are encouraged to have a baseline screening at age 40.

There's plenty of debate related to these tests. Some question whether the recommended screening age of 50 should be made earlier for average-risk groups. Others debate whether too many PSA tests are being performed, and whether their financial incentives in physician practices may contribute to overuse. There's also an ongoing discussion about the possibility of more biopsies resulting from additional testing, and whether treatment-related side effects outweigh the years of life and money saved with less advanced disease management.

Moul believes the current guidelines should be changed to encourage baseline PSA Risk-Assessment starting at age 40.

"Even a subtle increase in the PSA value at that age is a pretty powerful

predictor of future prostate disease and cancer," says Moul. "Right now, only one in five men are getting a PSA test, which is encouraging, but I wish the number was higher. This research suggests we can do a better job of screening men at age 40, and a better job in high-risk men. There's a huge population of African American men who are not getting screened, and men with a family history of prostate cancer who are under 50 are also not getting screened."

Source: Duke University

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