

PSA screening declines following publication of large trials, guidelines

February 24 2011

PSA screening has declined in one large U.S. healthcare network since publication of two large screening trials and a set of guidelines, according to a study published online February 24 in the *Journal of the National Cancer Institute*.

In 2008, the U.S. Preventive Services Task Force issued guidelines recommending against PSA screening after age 75. The following year, investigators from two large screening trials reported contradictory results: The Prostate, Lung, Colorectal and [Ovarian Cancer](#) Screening Trial showed no difference in prostate cancer-specific mortality between screened versus non-screened [men](#), while the European Randomized study of Screening for [Prostate Cancer](#) trial found a 20% reduction in mortality with screening.

Steven B. Zeliadt, Ph.D., of the VA Puget Sound Health Care System, Seattle, and colleagues report that after publication of the trials, PSA testing declined in the U.S. Veterans Health Administration Pacific Northwest Network. The decline was 3 percentage points among men aged 40-54; 2.7 percentage points among those aged 55-74; and 2.2 percentage points among men aged 75 years and older.

The authors conclude that the guidelines and the trial results may have had a modest effect on PSA screening among men in the Veteran's Health Administration network.

In an editorial, Siu-Long Yao, M.D., and Grace Lu-Yao, Ph.D., of the

[Cancer](#) Institute of New Jersey write that it is not surprising that the effect has been only modest, given the conflicting findings of the two large trials and other studies: "When faced with data that could be interpreted as neither strongly supportive nor decidedly unfavorable, it is natural that health-care providers and their patients might not substantially alter their practices in regard to PSA screening."

Provided by Journal of the National Cancer Institute

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