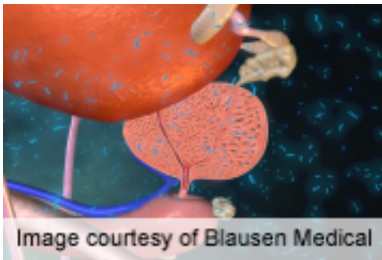


Article offers guidance on discussing PSA with patients

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(HealthDay)—Discussion of prostate-specific antigen (PSA) screening should focus on current guidelines and emphasize shared decision making, according to an article published Feb. 11 in the *Urology Times*.

Noting that there has been an increase in discourse relating to the controversy surrounding PSA testing in the lay press, John M. Hollingsworth, M.D., from the University of Michigan Medical School in Ann Arbor, outlined his patient discussions concerning PSA screening.

The author notes that most concerns relating to PSA testing stem from the current American Academy of Family Physicians and U.S. Preventive Services Task Force guidelines against PSA screening. However, other organizations, including the American College of Physicians (ACP), American Cancer Society, and American Urological

Association (AUA), recommend that patients and physicians consider the benefits and harms of PSA screening. The ACP recommends PSA testing for men with a clear preference for screening aged 50 to 69 years, while the AUA recommends it for those aged 55 to 69 years. Decision aids have been developed to assist with the process of shared [decision making](#) between the patient and physician; these may be useful in discussions with patients.

"During the initial consultation with a patient, it is also important to discuss the uncertainties, risks, and potential benefits of PSA screening so that he can make an informed decision," Hollingsworth writes. "Subsequent decisions on continued PSA [screening](#) must take into account changes to a man's health and preferences."

More information: [More Information](#)

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