

# Most Internet sources on prostate cancer disagree with expert panel's recommendation

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Only 17 percent of top-ranked consumer health websites advise against screening for prostate cancer, a recommendation made more than two years ago by the U.S. Preventive Services Task Force (USPSTF), according to a study presented at the 2014 Clinical Congress of the American College of Surgeons.

In an Internet search for the phrase "prostate [cancer screening](#)" on three main U.S. search engines, study researchers found that most sites appearing on the first results page recommended a patient-individualized approach to screening.

Prostate cancer is the most common cancer in men besides skin cancer, affecting one in seven American men over their lifetime according to the American Cancer Society.<sup>1</sup> Screening, which is routine testing in the absence of symptoms, can detect prostate cancer early. Screening tests for this cancer are the prostate-specific antigen (PSA) blood test, a digital rectal exam, or both.

"The recommendation not to screen men for prostate cancer is controversial," said lead author Philip Zhao, MD, a urologist at The Arthur Smith Institute for Urology at North Shore–Long Island Jewish Health System, New Hyde Park, N.Y. He performed the research while a resident physician at Rutgers–Robert Wood Johnson Medical School, New Brunswick, N.J, under the guidance of Robert E. Weiss, MD, professor of urology.

"Our study results suggest that two-thirds of the online community disagree with the USPSTF recommendation against prostate cancer screening," Dr. Zhao said.

An independent panel of medical experts, the USPSTF recommended in 2012 that men of all ages not get the PSA or other tests to screen for this cancer regardless of their risk factors for prostate cancer.<sup>2</sup> The task force contended that the potential benefit of lives saved from screening for prostate cancer (which it estimated at one man in every 1,000 screened) does not outweigh the expected risks. Possible risks the USPSTF cited included false-positive PSA results, complications from biopsy of the prostate, or side effects of treating a cancer that often is slow growing and not fatal.

The USPSTF recommends a discussion between patient and physician about benefits and risks of prostate cancer screening if a patient requests screening but advises physicians to recommend against screening.<sup>3</sup>

Many medical organizations disagree with the USPSTF guideline, Dr. Zhao said. Both the American Urological Association (AUA) and the American Cancer Society state that men at average risk over age 55 (AUA) or age 50 (American Cancer Society) who expect to live at least 10 more years should decide, in partnership with their physician, whether to be screened for prostate cancer.<sup>4, 5</sup>

To learn what recommendations the public is accessing about prostate cancer screening, Dr. Zhao said he and his colleagues conducted a web-based study because many people search the Internet for health information. The researchers chose Google, Microsoft's Bing, and Yahoo! search engines, which are the three most used U.S. search engines according to a comScore analysis in 2013.<sup>6</sup> Because 95 percent of web traffic goes to sites ranked on the first results page of search engines according to iCrossing,<sup>7</sup> the investigators limited their analysis to

websites appearing on the initial page of each of the three searches for "prostate cancer screening."

The researchers found 29 distinct websites, with seven sites common to all three search engines. They analyzed all 29 websites for type of site host, accuracy of content, and screening recommendations. The investigators found that 11 sites were from US commercial media, 10 from the US government, 4 from health organizations, 3 from academic institutions, and 1 from a foreign government (United Kingdom).

Only one site, a commercial source, presented incorrect information about prostate cancer screening according to Dr. Zhao.

Of the 29 websites, five sites (17.2 percent) recommended against screening for prostate cancer and another five gave no recommendations, the authors reported.

Most sites (65.5 percent;  $n = 19$ ) advocated that men make an informed decision about [prostate cancer screening](#) after discussing the individual risks and benefits with their health care provider.

"I think that's the right approach and the one being advocated by most health care organizations," Dr. Zhao said. "Zero screening is not backed up by good scientific evidence," he continued. "PSA screening has drawbacks, but it's the best modality we have at this point to detect [prostate cancer](#) early."

Dr. Zhao's research colleagues for the study were: Danielle Velez; Neal Patel, MD; and Robert E. Weiss, MD, all from Rutgers–Robert Wood Johnson Medical School.

**More information:** 1 American Cancer Society. Prostate cancer overview guide. Available at: [www.cancer.org/cancer/prostate ... rview-](http://www.cancer.org/cancer/prostate...rview-)

[key-statistics](#). Accessed September 15, 2014.

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