

Black men more likely to undergo PSA screening than non-hispanic whites

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African American men have the highest rate of prostate cancer and shorter survival time compared to other racial/ethnic groups in the U.S. Their mortality rate is more than twice that of their white counterparts. Early diagnosis through PSA screening may help forestall consequent morbidity and mortality. Investigators assessed the prevalence of self-reported screening by black and non-Hispanic white (NHW) men and found that despite long-standing disparities in health care access, black men 45 to 60 years old have a higher rate and probability of PSA screening compared to NHWs, reports the *Journal of Urology*.

The use of population-based PSA [screening](#) for the [early diagnosis](#) of prostate cancer is fraught with controversy. There are currently contrasting recommendations by professional medical bodies and the United States Preventive Services Task Force (USPSTF). Black men present a unique challenge, as they are widely acknowledged as a high risk group for prostate cancer, and are more likely to present with advanced disease at diagnosis and have inferior outcomes.

"While data suggest that PSA screening may afford survival benefit for black men, the lack of unanimity among national guidelines when and whether to screen black men presents a challenge to providing the best care for this group and is perplexing for health care providers," explained lead investigator Jesse D. Sammon, DO, of Henry Ford Hospital, Detroit, and the Center for Surgery and Public Health, Brigham and Women's Hospital, Boston, MA.

The research team examined data from the Behavioral Risk Factor Surveillance System (BRFSS) 2012 survey to assess the prevalence of self-reported PSA screening in 2011 from a weighted sample of U.S. men 40 years old or older to determine the association between race and sociodemographic characteristics that influence screening behavior among black men. Of the 122,309 survey respondents in the study population, 29% of black and 32% of NHW men reported undergoing PSA screening. Data on age, education, income, residence location, marital status, health insurance, regular access to a health care provider (HCP), and HCP recommendation to undergo screening were extracted.

Although more NHWs were tested overall, younger black males had higher rates and odds of screening than NHWs of similar age. Among black men, educational attainment had a more pronounced association with screening, whereas relative to NHW men, the association with HCP recommendations was less pronounced.

"PSA testing among young black men has increased steadily since the 1990s, and our results point towards continuation of this trend. Contrary to our initial hypothesis, significantly fewer black males reported PSA screening than NHWs, but black males aged 45-60 have a higher rate and probability of PSA screening compared to NHWs," commented Dr. Sammon.

According to Dr. Sammon and his colleagues, "Earlier PSA testing may allow diagnosis of lower risk prostate cancer in black men, and greater decline in [prostate cancer](#)-specific mortality has been noted for black versus NHW men since the PSA test was introduced in the 1990s. The increased odds for screening in young [black men](#), as demonstrated in our results, may reflect increased perception of this [high risk group](#) within the health care community and/or access to more equitable health care systems (such as the Veterans Health Administration)."

More information: Jesse D. Sammon et al. Determinants of Prostate Specific Antigen Screening among Black Men in the United States in the Contemporary Era, *The Journal of Urology* (2015). [DOI: 10.1016/j.juro.2015.11.023](https://doi.org/10.1016/j.juro.2015.11.023)

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