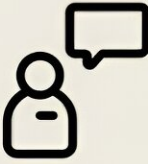





Patient communication preferences for prostate cancer screening discussions: A scoping review

September 25 2023

What facilitates productive discussions between men and their primary care doctors about prostate cancer risk (PScr)?

Researchers identify four clinical practices that improve shared decision making between doctor and patient:

 <p>Doctors who use plain language</p>	 <p>Adequate info about prostate screening</p>	 <p>Adequate time for conversation about screening</p>	 <p>A level of trust with their doctors to discuss prostate cancer risk</p>
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Fong, J., et al. Patient Communication Preferences for Prostate Cancer Screening Discussions: A Scoping Review. *AnnFamMed* 2023

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Patient Communication Preferences for Prostate Cancer Screening Discussions: A Scoping Review. Credit: *The Annals of Family Medicine*

In a study published in *Annals of Family Medicine*, members of the University of Ottawa Department of Family Medicine conducted a scoping review to understand men's communication preferences when

they discuss prostate cancer screening with their doctors.

Researchers analyzed a total of 29 studies and identified four main themes: men preferred that their [doctors](#) use everyday language; men wanted more information; men wanted the doctor to spend adequate time with them to explain [prostate cancer](#); and desired a trusting and respectful relationship with their doctor.

Three additional themes emerged that prohibited men from having any discussions at all: men who had already decided to pursue prostate cancer screening; men who were passive about their health; and those who felt their well-being was threatened by discussing prostate cancer screening.

Additionally, the researchers found that some Black men faced racism, which impacted medical interactions. The authors discuss strategies to support men's communication preferences and to address preconceptions surrounding prostate cancer screening.

Prostate cancer is the number one diagnosed malignancy and the third-leading cause of cancer-related death in men, according to the Canadian Cancer Society. Despite this, the 5-year survival rate for the disease is 91% and the overall mortality attributed to prostate cancer has decreased by 50% since 1995.

Although screening for prostate cancer can reduce mortality, there are significant risks of overtreatment due to false-positives. Because of the risks and benefits of [prostate cancer screening](#) for men aged 55-69, the USPSTF recommends individualized counseling and shared decision making around the screening.

More information: Justin Fong et al, Patient Communication Preferences for Prostate Cancer Screening Discussions: A Scoping

Review, *Annals of Family Medicine* (2023). DOI: [10.1370/afm.3011](https://doi.org/10.1370/afm.3011).
www.annfammed.org/content/21/5/448

Provided by American Academy of Family Physicians

Citation: Patient communication preferences for prostate cancer screening discussions: A scoping review (2023, September 25) retrieved 27 April 2024 from <https://medicalxpress.com/news/2023-09-patient-communication-prostate-cancer-screening.html>

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