

PCFA POLICY STATEMENT

PSA/DRE TESTING FOR EARLY DETECTION OF PROSTATE CANCER

(Approved 27th July 2006)

This Prostate Cancer Foundation of Australia (PCFA) policy on testing for prostate cancer is based on the unique experiences and observations provided by many thousands of Australians directly affected by prostate cancer and being diagnosed at the rate of over 12,000 per annum. PCFA coordinates a network of 83 support groups nationally. It is advised by foremost experts from the medical and scientific community and expert representatives of those sectors have participated in the formulation of this PCFA Policy.

POLICY

Early detection is the key to enabling better outcomes and potential cure of prostate cancer. Accordingly, PCFA recommends that men at 50 with no family history of prostate cancer, and men at 40 with a family history, should seek voluntary annual assessments in the form of a Prostate Specific Antigen (PSA) blood test together with a Digital Rectal Examination (DRE). It can be life threatening to wait for symptoms before seeking assessment.

BACKGROUND

PCFA is the peak body representing sufferers and survivors of prostate cancer and their families. Prostate cancer is the most commonly diagnosed male cancer affecting men from their forties onwards and with a similar incidence to breast cancer in women. Every week, about 250 Australian men are diagnosed and about 50 will die of prostate cancer.

PCFA believes in the promotion of men's health issues and supports the Council of Australian Governments (COAG) agreement of 10th February 2006 on a health action plan entitled "Better Health for All Australians" which :

- shifts the focus in health care to prevention and early detection of chronic disease, including cancer.
- introduces a "Well Person's Health Check" available through Medicare to detect and prevent chronic disease, for people around 45 years old. Annual PSA blood testing is currently available to all men under the Medicare Benefits Scheme (MBS) and can be one of several unrelated tests (such as cholesterol) conducted on the same blood sample.
- encourages active patient self management and the targeted training of GPs and health professionals.
- promotes healthy lifestyle choices

PCFA believes that men have a right to full knowledge of their own bodies, and to reach their own decisions about preventative health safeguards, based on reasonable access to the facts and expert unbiased advice.

PCFA is actively promoting awareness of prostate cancer and the widespread availability of low cost and simple PSA blood and DRE testing that can provide critical information relating to this mass killer. Many thousands of Australian men unknowingly have curable prostate cancer, but do not seek the initial precautionary PSA test until it is too late.

There is increasing evidence that the falling death rate from prostate cancer can, at least in part, be attributed to the efforts of testing and early treatment. For example in Australia the prostate cancer mortality rate has fallen 1.3% annually between 1990 and 2000. In the USA and Canada,

where PSA testing is more prevalent, the fall is about 25% while in Tyrol Austria, where screening is extensive, the fall is greater than 40%. The published research concludes that prostate cancer testing and early aggressive treatment of appropriately selected cases is likely to save lives. [*PSA Testing for the General Practitioner: Dr Phillip Stricker/ Prof Kerry Phelps*]. This conclusion is also supported by the American Cancer Society based on National Cancer Institute (US) data over the last 15 years.

Like all first stage cancer tests, a PSA test does not provide a conclusive diagnosis, and this can only be determined by a further biopsy in selected cases.

Prostate cancer has the relative advantage over other cancers of being slow growing and being confined within the prostate gland for a long period, in most cases. This timescale allows men diagnosed with early stage prostate cancer to consider appropriate treatment options based on their individual medical circumstances and personal preferences.

In keeping with the latest medical research internationally, PCFA notes that medical and research authorities around the world have proposed that annual PSA testing is a more accurate diagnostic marker when conducted alongside other PSA measures including:

- PSA baseline test around the age of 35, when a man is unlikely to have prostate cancer, in order to benchmark their personal PSA tests later in life.
- PSA “Velocity”, “Doubling Time” and “Free/Total Ratios” which can be derived from simple PSA measures in order to monitor the extent and likely progress of the disease.

In addition to its public awareness initiatives PCFA is participating in an education process for GPs and the medical community to assist them in advising their patients on the desirability of voluntary annual PSA/DRE testing. Those professionals are also challenged to dispel common myths and fears that surround the disease.

PCFA believes it is critical to dissociate symptoms, such as urinary problems, with prostate cancer. Urinary problems most commonly have non-cancerous origins. Urinary symptoms which are caused by prostate cancer generally indicate the existence of advanced disease that is treatable but not curable.

Treatment options for prostate cancer that has been diagnosed early are continuing to improve dramatically. These treatments increasingly provide a cure or greatly extended quality life with limited side effects. Men at risk of prostate cancer should take confidence from this reality.

Many men are dying from prostate cancer because they did not seek a timely PSA test. PCFA is mindful of legal questions being raised in the community regarding possible medical liability in respect of men not being made sufficiently aware of the possible life saving benefits of PSA testing.

Further information:

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