# Should I have a PSA test?

Your guide to PSA testing for prostate cancer.

# A simple PSA blood test is our first-line defence in the early detection of prostate cancer.

Your GP can order the test for you. Medicare covers the cost of one PSA test a year for men who are at a high risk of prostate cancer and one PSA test every two years for men at an average risk of the disease.

# What is a PSA test?

Prostate-specific antigen (PSA) is a protein produced by the prostate that can be used to test for and monitor prostate cancer. It can be produced by both normal and cancerous cells, whereby higher than normal levels may be a sign of prostate cancer.

# **Risk Factors**

There are four known risk factors for prostate cancer:

- 1. Age 40+
- 2. Family history (father/brother diagnosed)
- 3. Genetics (BRCA1/2)
- 4. Ethnicity (African ancestry)

Men who have a strong family history of prostate cancer face an increased risk of diagnosis and should consider PSA testing from an earlier age.



If we detect prostate cancer early, the five-year survival rate is nearly 100%. For men diagnosed at Stage 4, five-year relative survival drops to just 36%. PSA testing improves the likelihood of an early diagnosis.

**1 in 5 men** are likely to be diagnosed in their lifetime.

#### **Recommendations for men:**

- If you have no family history of prostate cancer, commence PSA testing every two years from the age of 50, and see your GP if you develop any symptoms in the meantime.
- If you have a higher risk of prostate cancer because of your genetics or family history, consider PSA testing every year from the age 40 or 45, depending on the strength of your family history.
- If you haven't started PSA testing yet, consider getting a baseline PSA test based on your individual risk level, to help inform early detection.



# Do I need to test if I have no symptoms?

**Yes.** Prostate cancer has no symptoms when it first develops, which means PSA testing is vital to early detection.

# What are the symptoms?

These are some of the symptoms that tend to develop once prostate cancer has become more advanced:

- Urinary symptoms including frequent urination, poor urine stream, dribbling at the end of passing urine, or slow to start the urine flow.
- Blood in the semen or urine.
- Pain on urination or ejaculation.
- Unexpected fatigue and weight loss.
- Back or pelvic pain.

# Understanding your test results

If your PSA rises quickly between tests, or increases to above 3 ng/mL, your doctor may repeat your PSA test after a short period. If your PSA is still high, they will refer you to a specialist for more tests. If you have a higher risk, you may be referred if your PSA is greater than 2 ng/mL. If you have symptoms of prostate cancer, such as changes in frequency of urination, and a PSA less than 3 ng/mL, ask your doctor about secondary screening methods, such as an MRI scan, which can be ordered by a urologist under Medicare.

Diagnosing prostate cancer usually requires a biopsy of your prostate, which requires tissue samples obtained by the use of a thin needle, inserted under anaesthetic. If the biopsy confirms the presence of cancer, your specialist will discuss treatment options with you. Many low-risk prostate cancers don't require treatment and will be monitored closely over time, while others will be more aggressive, requiring active treatment. The facts about prostate cancer



26,368 men diagnosed



3,901 men die each year

95.8% five-year survival

# Call us for support

We provide free Specialist Nursing and Telenursing Services, as well as a Prostate Cancer Counselling Service, with Support Groups located nationwide.

Call us today on 1800 22 00 99 or email enquiries@pcfa.org.au.

S 1800 22 00 99

Q prostate.org.au

