What is the aim of this leaflet?

The aim of this leaflet is to give you balanced information about the PSA test and things you may want to think about. We hope it will help you decide whether or not you should have the test, but there is no simple right or wrong answer. You may want to talk about this information with your GP and speak to your wife/partner.

PSA test

PSA (prostate specific antigen) is a protein made by the prostate gland which can be measured in your blood.

The PSA test which can give an early indication of prostate cancer is available to you if you want to be tested. However, experts disagree on how useful the PSA test is. This is why there is a lot of research being conducted and why there is no national screening programme for prostate cancer in the United Kingdom (UK).

What is the prostate gland?

- The prostate gland is only found in men
- It lies just below the bladder
- It is normally about the size of a walnut
- The urethra, which is the tube through which urine passes from the bladder, runs through the middle of the prostate
- The prostate helps to make semen, which mixes with the sperm made by the testes.

Please note this document is available, on request, in alternative formats.
Possible prostate problems

Most urinary symptoms in men over 50 years of age are due to aging, bladder changes and kidney function, e.g. getting up to go to the toilet at night.

1. Benign Prostatic Hyperplasia (BPH)

The most common problem of the prostate is prostate enlargement called benign hyperplasia (BPH). This is a benign (non-cancerous) condition where the prostate gets bigger gradually after the age of about 50. By the age of 70, about 8 in 10 men have an enlarged prostate. Passing urine frequently or difficulty in passing urine can be symptoms of BPH.

2. Prostate Cancer

Generally affects men over 60 and is rarely found in younger men. It is the most common type of cancer in men. Unlike many other cancers, prostate cancer is often present for years without you knowing it. This is because in most cases the cancer is slow growing and can take many years to cause any symptoms. However, some prostate cancers are fast growing and can spread to other parts of the body.

Digital Rectal Examination (DRE)

A common way of diagnosing a prostate problem is for the doctor to feel the prostate gland through the back passage (rectum). This is called a DRE (Digital Rectal Examination). Your GP will give you a DRE by inserting a lubricated gloved finger into your back passage to feel the prostate. You may find this uncomfortable, but it should not be painful.

The doctor feels the back surface of the prostate gland for any hard or irregular areas and to estimate the size. If the prostate gland is larger than expected this could be a sign of BPH. A prostate gland with hard lumpy areas may suggest prostate cancer. If the DRE result gives cause for concern you will be referred to a hospital specialist known as a Urologist.

What does the PSA test tell me about my prostate?

A raised PSA level may be due to other less serious conditions such as an inflamed prostate (prostatitis), urinary tract infection (UTI), sexual activity, ejaculations or an enlarged prostate, also known as benign prostatic hypertrophy (BPH). However, a raised PSA can be a sign that you have prostate cancer. The test can help to find early prostate cancer which may have a better chance of being successfully treated than more advanced
prostate cancer. The PSA level is often raised long before any symptoms of prostate cancer develop.

However:

- About two in three men with a raised PSA level do not have prostate cancer
- In some cases, the PSA level may be normal even when a prostate cancer is present
- Up to one in five men with prostate cancer have a normal PSA level

A single PSA test cannot show whether a prostate cancer is present, or whether it is slow or fast-growing.

If I have a PSA test, what happens next?

What happens next depends on whether or not you have symptoms; your personal risk of prostate cancer; how high the PSA level is; your age; and your DRE examination.

Advantages and disadvantages of having the PSA test

First, ask yourself if you are at particular risk of prostate cancer.

Your risk increases:

- If you are older
- If you have close relatives who have had prostate cancer, such as a father, brother, grandfather or uncle
- If you are of African-Caribbean or African-American descent.

Advantages

- It usually provides reassurance if the test result is normal
- It can help to detect prostate cancer before any symptoms develop
- Treatment in the early stages of prostate cancer could help men live longer and avoid further complications of cancer, and improve the quality of life

Possible disadvantages

- It could miss cancer in the prostate, and falsely reassure that all is well
- It might detect a slow-growing cancer that may never cause any symptoms or may never shorten your life span. But the diagnosis of ‘cancer’ may cause significant anxiety and affect quality of life, and lead to unnecessary treatments.
- Some prostate cancer treatment may lead to complications for example incontinence or erectile dysfunction
What happens if the PSA is raised?

A PSA test alone cannot diagnose prostate cancer. PSA naturally rises as men get older and the prostate gland gets bigger.

If your PSA level is raised, or your prostate feels abnormal when examined, your GP may refer you to a Urologist for a prostate biopsy. This is because a definite diagnosis of prostate cancer can only be made by taking cells from the prostate and then looking at them under a microscope.

A prostate biopsy involves using an ultrasound scanner to guide a probe into the rectum (back passage) with the help of local anaesthetic. Many men find the test embarrassing and uncomfortable and it can be painful. Samples from the prostate gland are taken. Antibiotics are given to reduce the risk of infection.

What if I have prostate cancer?

The decision about treatment will be taken by you and your Specialist, who knows your particular medical situation and can advise you. The likelihood is that your prostate cancer is a slow growing cancer. Therefore you have time to consider your options.

The decision to treat depends on a number of things including if the cancer is fast or slow growing and whether it has spread to other parts of your body or not. Your overall health, age, medical history and your views will be considered.

Further information

The information provided does not replace professional advice. If you have any questions or want to receive more information about PSA testing and prostate cancer you can discuss it with your doctor or practice nurse. You can also look at the following sources of information.

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<td>Macmillan Cancer Support</td>
<td><a href="http://www.macmillan.org.uk">http://www.macmillan.org.uk</a></td>
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<td>The Prostate Cancer Charity</td>
<td><a href="http://www.prostate-cancer.org.uk/">http://www.prostate-cancer.org.uk/</a></td>
<td>0800 074 8383</td>
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