

PSA testing and prostate cancer: advice for well men aged 50 and over

The prostate specific antigen (PSA) test may help find out if you are more likely to have prostate cancer. It is not perfect: it will not help find all prostate cancers, it will miss some and will detect some that would never go on to cause harm.

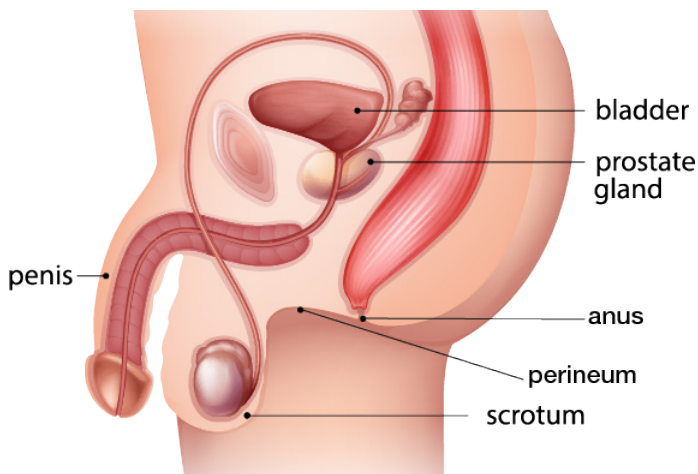
Having a PSA test has potential harms and potential benefits.

This information should help you decide if you want to have the test or not. It is your decision. Before making your decision you may want to talk to your GP, practice nurse and your partner, family member or a friend.

If you notice anything that is not normal for you, or are worried, you should speak to your GP.

Prostate cancer

The prostate gland lies just below your bladder. It helps produce healthy sperm. Problems with the prostate gland can affect how you urinate and your sexual function.



Prostate cancer is caused when some cells in the prostate start to grow out of control. Slow-growing cancers are common. They may not cause any symptoms or shorten your life.

Prostate cancer is the second most common cause of cancer deaths in UK men. Each year about 47,600 men are diagnosed with prostate cancer and about 11,600 die from the disease. Prostate cancer is rare in men under 50. The most common age of diagnosis is between 65 and 69 and the risk increases with age.

Symptoms

Most early stage prostate cancers do not have any symptoms.

Risk

You are at higher risk of prostate cancer if you:

- are aged 50 or older
- have a close relative, for example brother or father, who has had prostate cancer
- are of black ethnic origin (double the risk)

PSA test

PSA is measured using the PSA blood test. Most men will not have a raised PSA level. A raised PSA level (3 or over) can be caused by many things, such as a urinary infection, an enlarged prostate or prostate cancer.

If you decide you want a PSA test, refrain from vigorous exercise such as cycling or sex in the 2 days before the test. A prostate biopsy or cystoscopy in the 6 weeks before the test may also affect the PSA level.

Test results and follow-up

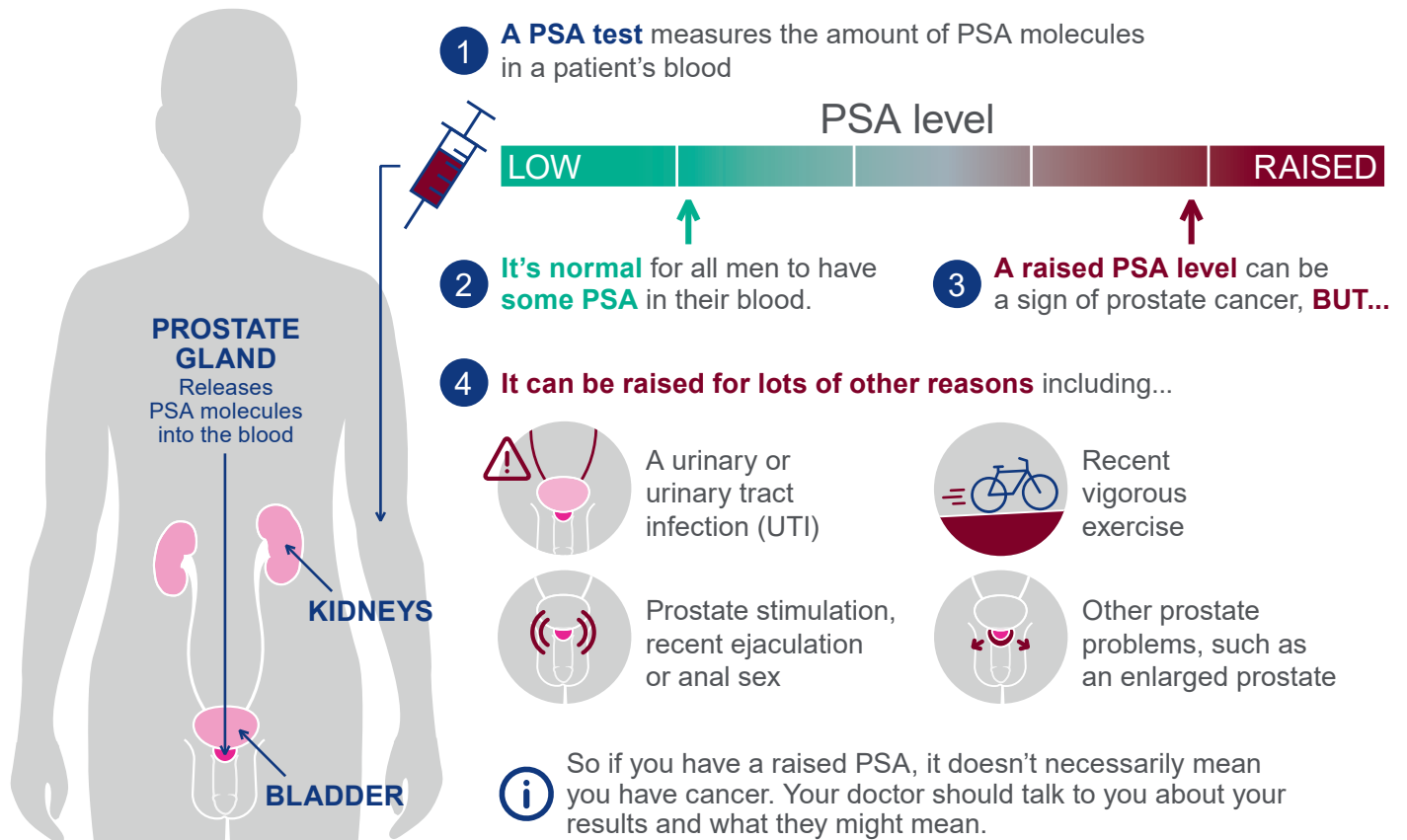
If you have a raised PSA level your GP will discuss referral to a specialist with you. You may have further investigations, such as an MRI scan of the prostate and a biopsy. A biopsy involves taking small samples of your prostate usually through your back passage or perineum (the skin just in front of the anus) and checking them for cancer.

If you have prostate cancer, your specialist will discuss options. Active surveillance is normally and safely offered to men with slow-growing cancers, that have not spread outside of the prostate gland. This involves regular tests to monitor the cancer, with treatment offered if the cancer starts to progress.

Treatments include surgery, radiotherapy, hormone therapy and chemotherapy. The type of treatment offered will depend on how advanced the cancer is and how fast it is growing. Side effects of treatment can include problems with erections, loss of fertility and incontinence.

Find out more at www.nhs.uk/psa

The PSA test and what the results might mean



Should I have a PSA test?

Before you decide whether to have the test, think about the information in this leaflet. Talk to your GP about the advantages and disadvantages of the test and your own risk of prostate cancer. Having a PSA test is a personal decision – what might be important to one man may not be to another.

Advantages

A PSA test can help pick up prostate cancer before you have any symptoms.

A PSA test can help pick up a fast-growing cancer at an early stage, when treatment could stop it spreading and causing problems or shortening your life.

Disadvantages

You might have a raised PSA level, even if you do not have cancer. Many men with a raised PSA level do not have prostate cancer.

The PSA test can miss prostate cancer. 1 in 7 men with a normal PSA level may have prostate cancer, and 1 in 50 men with a normal PSA level may have a fast-growing cancer.

If your PSA level is raised you may need a biopsy. This can cause side effects, such as pain, infection and bleeding. Not all men will need to have a biopsy.

You might be diagnosed with a slow-growing cancer that would never have caused any problems or shortened your life. Being diagnosed with cancer could make you worry, and you might decide to have treatment you do not need. Treatments can cause side effects which can affect your daily life, such as urinary, bowel and erection problems.

For more information on prostate cancer and prostate problems visit cancerresearchuk.org and prostatecanceruk.org

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