



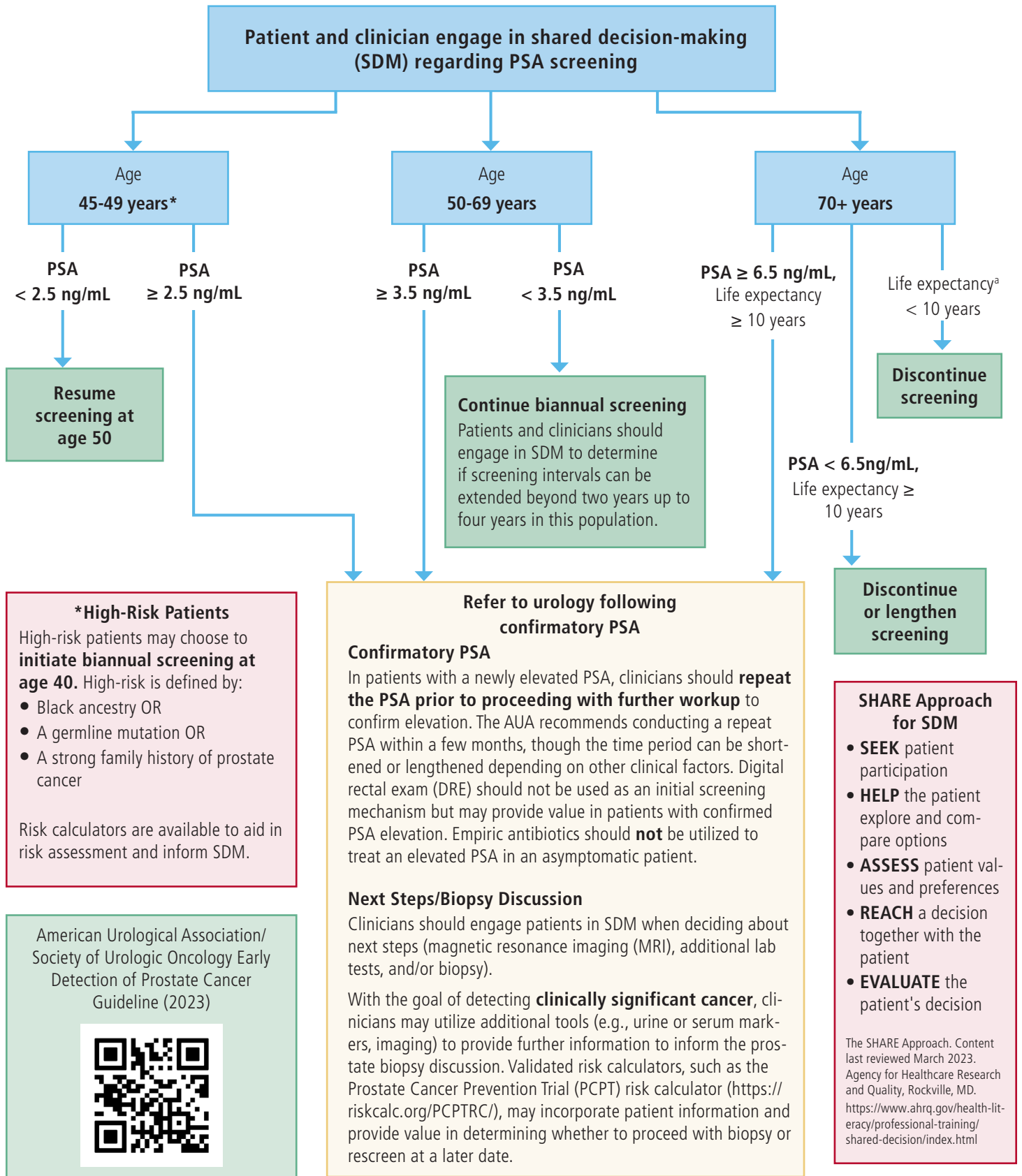
American
Urological
Association



**ADVANCING DIAGNOSTIC EXCELLENCE
AND HEALTH EQUITY:**

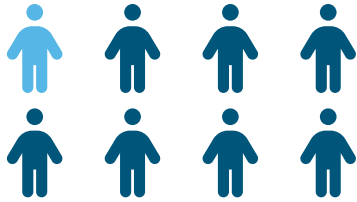
**The Role of PSA Screening
in Early Detection of
Prostate Cancer**

Tailoring Prostate-Specific Antigen (PSA) Screening for Prostate Cancer



^aEstimates of life expectancy may be ascertained using Social Security Administration Life Tables or online calculators.

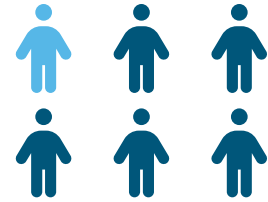
Prostate Cancer Disparities



1 IN **8**

MEN

IN THE U.S. OVERALL
WILL BE
DIAGNOSED WITH
PROSTATE CANCER
IN THEIR LIFETIME.¹



1 IN **6**

BLACK MEN

IN THE U.S. OVERALL
WILL BE
DIAGNOSED WITH
PROSTATE CANCER
IN THEIR LIFETIME.²

Black men are **1.8x** more likely to be diagnosed compared to their White counterparts.^{3,4}

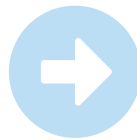
Black men are **2.1x** more likely to die from prostate cancer than their White counterparts.³

Black men are **44-75%** more likely than the general population to have advanced disease at the time of diagnosis.⁵

Prostate Cancer Screening

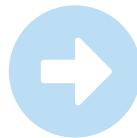
Since the introduction of Prostate-Specific Antigen (PSA) screening, there has been a **72%** reduction in the number of men with metastatic disease at the time of diagnosis.⁶

In 2012, the U.S. Preventive Services Task Force (USPSTF) recommended against PSA screening for men of all ages.⁷



In the years immediately following this recommendation, **rates of PSA screening decreased**, and the diagnosis of **advanced prostate cancer increased**.⁸

In 2018, the USPSTF recommended that clinicians inform Black men about their increased risk of developing and dying from prostate cancer.⁹

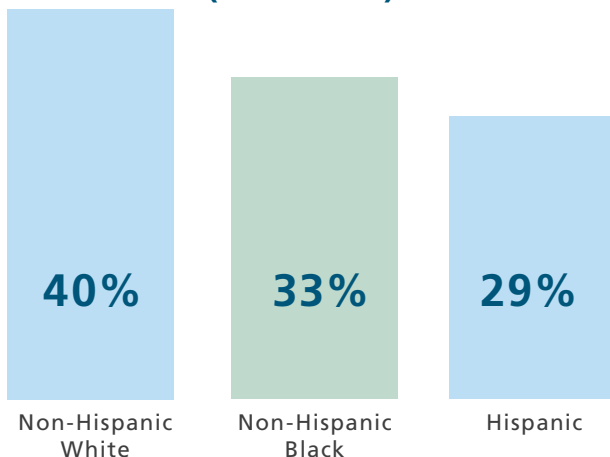


In 2022, **only 30%** of family physicians report **routinely informing Black men of their increased prostate cancer risk**.¹⁰

Even though Black men are **more than twice as likely to die** from prostate cancer, they are **screened at lower rates** than their White counterparts.

Some studies recommend starting PSA screening **3-9 years earlier** in Black men.⁵

% OF MEN AGED 55-69 WHO HAD A PSA TEST WITHIN THE PAST YEAR (2005-2021)¹¹



Due to the increased prostate cancer risk, the American Urological Association (AUA) recommends that clinicians offer prostate cancer screening to Black men beginning at **age 40-45**.¹²

Risks and Benefits of PSA Screening

The AUA recommends engaging in shared decision-making with people considering prostate cancer screening, so they can make an informed choice.

PSA screening may help to detect the cancer early .	Some prostate cancers are slow-growing and unlikely to cause harm (overdiagnosis).
If caught early, it is easier to treat and more likely to be cured.	There can be side effects associated with treatment, and not all prostate cancers require treatment (overtreatment).
Some patients prefer to have more information about their health.	An elevated PSA can be anxiety-provoking for some patients.

Reducing the Harms of Diagnosis and Treatment

Strategies to mitigate the harm associated with unnecessary biopsies and the overdiagnosis and overtreatment of prostate cancer:

TOOLS TO AID IN THE DETECTION OF CLINICALLY SIGNIFICANT PROSTATE CANCER:

Conducting **confirmatory PSA tests** and using **age-specific PSA cutoffs** can help reduce the number of unnecessary biopsies.

Prostate magnetic resonance imaging (MRI), prostate cancer **risk calculators**, other tests, and/or **digital rectal exam** (DRE) may be used to determine appropriate candidates for biopsy.

MANAGEMENT STRATEGIES TO PREVENT OVERTREATMENT OF PROSTATE CANCER:

Active surveillance is the recommended management strategy for low-risk disease. Active surveillance rates in low-risk prostate cancer increased from 27% in 2014 to 60% in 2021.¹³

Watchful waiting is the recommended management strategy for men with asymptomatic prostate cancer and a limited life expectancy.¹⁴



American Urological Association

Diagnostic excellence is defined as *“an optimal process to attain an accurate and precise explanation about a patient’s condition. An optimal process would be timely, cost-effective, convenient, and understandable to the patient. An accurate and precise diagnosis gains clinical value insofar as it leads to better choices in treatment.”*¹⁵ The AUA highlighted *“enhancing diagnostic excellence”* as a top priority in its *National Quality Agenda and Strategies for Urologic Practice*, emphasizing its importance in improving urologic health and urologic health care.

For additional information,
visit [AUAnet.org](https://www.auanet.org)

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