

## Men say they want prostate cancer test, despite risks

July 9 2013, by Valerie Debenedette

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A survey of men age 40 to 74 found that 54 percent said that they would still opt for a popular prostate cancer screening test despite recent recommendations that the test not be performed, finds a new study in *American Journal of Preventive Medicine*. Only 13 percent said they would choose not to be tested.

The U.S. Preventive Services Task Force (USPTF) recommends that middle-aged men not receive the prostate-specific antigen test (PSA) because research has shown that the benefits of testing do not outweigh the risks, which include false positive results.

More than three quarters of the men who participated in the survey said they were not aware of the new recommendation, said Linda Squiers,

Ph.D., senior health communication scientist at RTI International in Rockville, MD, and lead author of the study. Most men understood the reasoning behind the new recommendation when it was explained, she noted.

Black men, men with higher incomes, and those who had had a PSA test in the previous 2 years were more likely to say they will not follow the new recommendation, according to the new study. Men who were somewhat or very worried about getting [prostate cancer](#) were also more likely to want testing. The 1,089 men who participated had no history of prostate cancer.

That so few men said they would follow the new recommendation is not surprising. Routine testing for many [types of cancer](#) has been promoted for a long time, Squiers also noted. "Our culture is very pro screening. The idea that screening is beneficial and essential has been drilled into all of us."

David F. Penson, M.D., health policy chair for the American Urological Association (AUA) and professor at Vanderbilt University Medical Center in Nashville, agreed. "The men in the study may be saying that while, in general, they may agree with the USPSTF recommendation for large populations, when they consider their individual situation and their personal preferences, they would rather be tested and know their status."

Seventy percent of the men surveyed said that they either had not discussed the potential benefits or harm of screening with their health care provider or do not remember such a discussion, Squiers added. Those who did remember such a discussion only remember hearing of the benefits of testing. "We need to do a better job of presenting both the benefits and harms of screening to all patients and explaining the science behind the recommendation in plain language so everyone can understand it," she said.

The AUA has just released new clinical practice guidelines on [prostate cancer screening](#). The AUA says that it cannot recommend for or against routine PSA screening for men age 40 to 54 who are at average risk for prostate cancer, but does recommend discussions about testing between physician and patient for men age 55 to 69.

AUA advises that men age 40 and over who are at increased risk for prostate cancer, including black [men](#) and those with a strong family history, should discuss screening with their provider and then make an individualized decision about it. "The AUA is making a concerted effort to make the public aware of our new recommendations," Penson said.

**More information:** Squiers, L. et al. Prostate-specific antigen testing: Men's responses to the 2012 recommendations against screening, *Am J Prev Med.* 2013.

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