

## Challenging PSA DENIERS

## **PSA**

 Prostate Specific Antigen is a substance made in the prostate and detected in the blood stream of men using a simple test

 More than 3000 men die from prostate cancer in Australia every year

• The best method of looking at the prostate is with a multi-parametric MRI

 Taking multiple samples under general anaesthetic with a stay in hospital is not necessary

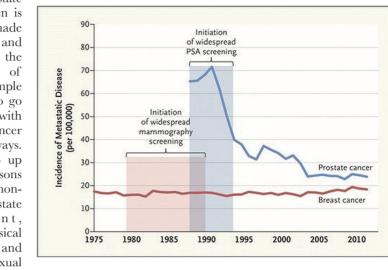
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PSA or Prostate Specific Antigen is a substance made in the prostate and detected in the blood stream of men using a simple test. It tends to go up in men with prostate cancer but not always. It can also go up for other reasons such as noncancerous prostate enlargement, infection, physical activity and sometimes sexual intercourse.



Before we look for a cancer and make a diagnosis we need to know that doing so is going to benefit the patient. By benefit, we mean that having this information and carrying out treatment is going to help the man live better and longer.

Some prostate cancers are what we call a low grade type and if present in small amounts do not warrant aggressive treatment. For example, if an 85 year old man has a small amount of non aggressive cancer then carrying out major surgery or radiotherapy or chemotherapy is not necessarily going to improve his length of life or quality of life.

Unfortunately, in the past men would tend to present at late stages of prostate cancer. This is when it is known as metastatic. That is, it has spread to other parts of the body. In this situation it can not be cured but may be able to be controlled to improve lifespan and lifestyle.

The graph published in The New England Journal of Medicine (Fig 1) shows the reduction in incidence of metastatic disease since the use of PSA testing and compares it with the use of Mammograms for the detection of breast cancer. No-one would deny that screening for breast cancer should not be carried out. So why, then do people deny the benefit

Of course, the only way to confirm the diagnosis of prostate cancer is to take a biopsy (sample). These days, if a man has an elevated PSA the best method of looking at the prostate is with a multi-parametric MRI which requires the man to lie on his back for usually less than half an hour. It is not necessary to use probes in the bottom. If the "screening" MRI detects an area of suspected tumour, a biopsy will be required on a separate occasion. Only one or two samples are usually needed with the MRI because of its accuracy particularly when the Soteria Remote Controlled Manipulator (RCM) is used. This is a "robot" which obtains extremely accurate biopsies and therefore taking multiple samples under general anaesthetic with a stay in hospital is not necessary.

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of screening for prostate cancer?

More than 3000 men die from prostate cancer in Australia every year. One out of every eight men will be diagnosed prostate with cancer in their lifetimes. The chance of being diagnosed with prostate cancer is doubled if a man's father or brother has been diagnosed.