PSA TESTING IN GENERAL PRACTICE

- This is a new guideline for appropriate use of the PSA test
- The limitations of the test are explained
**PSA testing in general practice**

Screening for prostate cancer is a controversial topic. At the moment there is no screening tool to tell us whether a patient has prostate cancer or not. A raised PSA implies an increased risk of prostate cancer but it can also be raised in other conditions such as benign enlargement of the prostate, prostatitis and UTI.

Approximately 2 out of 3 men with raised PSA level will not have prostate cancer. Of those with cancer, the nature of the condition in many elderly men means that radical treatment may be associated with higher morbidity than the condition itself.

A normal PSA does not rule out prostate cancer and inappropriate false assurance may be given.

In diagnosed prostate cancer, PSA has proven to be a very useful and accurate tumour marker.

**Who should have their PSA tested?**

- Patients in whom prostate cancer is suspected
- Patients who request PSA testing after appropriate information has been provided about the advantages and disadvantages of the test. Various approved patient leaflets are available.

**Please note:**
A PSA is not significantly affected by carrying out a digital rectal examination prior to the blood test.
Routine testing by members of the clinical team should be discouraged.

All patients with a raised PSA level, whatever the level, should be referred to the urologists for a further opinion. Likewise patients with an abnormal feeling prostate, even in the absence of a raised PSA, should be referred for a urological opinion.

For further information and patient leaflets the following websites are useful:

- [www.cancerscreening.nhs.uk](http://www.cancerscreening.nhs.uk)
- [www.prostate-cancer.org.uk](http://www.prostate-cancer.org.uk)
- [www.bupa.co.uk](http://www.bupa.co.uk)