

# SCREEN SMARTER

## Prostate Cancer Early Detection Guidelines

### Prostate Conditions Education Council (PCEC) Recommends:

Early detection begins with a PSA blood test. PCEC recommends that **every man age 45 and older should Know His Baseline PSA**. A digital rectal exam (DRE) is optional and generally recommended only if PSA is elevated or symptoms are present. Based on the baseline PSA result, PCEC recommends the following:

**PSA < 1.5 ng/mL:** Most men are considered low risk. Repeat PSA every 2-4 years, unless other risk factors are present.

**PSA ≥ 1.5 ng/mL:** This does not mean cancer, but it may indicate the presence of a prostate health condition. Follow up with a repeat PSA and discuss next steps with a healthcare provider.

**Abnormal DRE (if performed):** Follow-up evaluation with a healthcare provider is recommended.

#### At-Risk Populations:

**Age:** Increasing age is one of the most significant risk factors for developing prostate cancer. Men over age 65 are at increased risk.

**Race:** Black or African American men are about twice as likely to be diagnosed with and die from prostate cancer.

**Family History:** Having a close relative with prostate, breast, ovarian, colorectal, pancreatic or endometrial cancer, may increase prostate cancer risk, especially if the relative was diagnosed before age 60.

**Genetic Risks:** Inherited mutations passed down from a parent such as BRCA1, BRCA2, HOXB13, ATM, and others may raise risk.

**Occupational Exposures:** Certain jobs with increased chemical or carcinogen exposure may raise prostate cancer risk. Higher-risk groups can include firefighters, veterans, first responders, pilots, and agricultural workers, to name a few.

GUIDELINES	RECOMMENDATIONS
<b>Life Expectancy</b>	<ul style="list-style-type: none"> <li>PCEC does not recommend early detection in men who have a decreased life expectancy due to other serious health issues and have no signs of prostate cancer or other prostate conditions.</li> </ul>
<b>Additional Guidance</b>	<ul style="list-style-type: none"> <li>PCEC believes men should be informed about both the benefits and limitations of early detection, diagnosis, and treatment for prostate cancer so they can make informed decisions together with their healthcare provider that are right for them.</li> </ul>
<b>Men's Health Evaluation</b>	<ul style="list-style-type: none"> <li>PCEC encourages a complete Men's Evaluation. This may include testing for PSA, testosterone, triglycerides, cholesterol (HDL/LDL), and glucose, as well as new prostate cancer biomarkers and imaging tools when appropriate and available.</li> </ul>
<b>Understanding Early Detection</b>	<ul style="list-style-type: none"> <li>Early detection identifies a man's risk for prostate cancer. It does not diagnose the disease.</li> <li>Early detection may not be beneficial for all men. Some prostate cancers are slow growing and may never cause problems during a man's lifetime, and treatment can have side effects</li> </ul>
<b>PSA Blood Test</b>	<ul style="list-style-type: none"> <li>The PSA blood test can reflect a man's risk of having prostate cancer. It can detect signs of cancer as well as other benign prostate conditions.</li> </ul>
<b>Risk Stratification and Advanced Testing</b>	<ul style="list-style-type: none"> <li>PCEC supports further risk stratification in men with abnormal PSA results. This may include using blood, urine and tissue based genomic markers and other tests to better understand a man's risk, guide diagnosis, and inform treatment decisions.</li> </ul>