HSC Health and Social Care

Patient Information

Deciding about the Prostate Specific Antigen (PSA) Test

If you are unsure whether or not to have a PSA test this leaflet will give you the information to help you decide. The decision about having a prostate assessment should be taken by you with the help of your GP. Your GP can advise you further and knows your particular circumstances.

PSA test

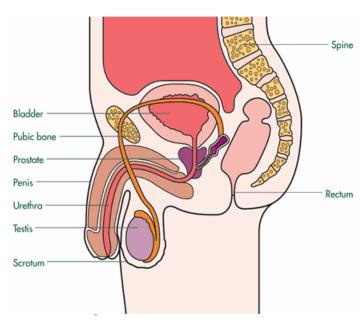
The PSA test is a blood test that measures the amount of prostate specific antigen (PSA) in your blood. PSA is a protein made by the prostate gland. It is normal to have a small amount of PSA in your blood and the amount rises as you get older and your prostate gets bigger.

In some cases the PSA test can give an early indication of prostate cancer and is available to you if you want to be tested. Currently, experts disagree on how useful the PSA test is and research continues to improve the diagnosis and management of patients with suspected prostate cancer.

What is the prostate gland?

- The prostate gland is only found in men
- It lies just below the bladder
- It is normally about the size of a walnut
- The urethra, which is the tube through which urine passes from the bladder, runs through the middle of the prostate gland
- The prostate gland helps to make semen, which mixes with the sperm made by the testes.

Diagram showing the prostate and surrounding organs



*Image is utilised with permission from Macmillan Cancer Support

Possible prostate problems

Most urinary symptoms in men over 50 years of age are due to ageing, bladder changes and kidney function, examples include:

1. Enlarged Prostate: Benign Prostatic Hyperplasia (BPH)

This is a benign (non-cancerous) condition where the prostate gets bigger gradually after the age of about 50. By the age of 70, about 8 in 10 men have an enlarged prostate. Passing urine frequently, especially at night, or difficulty in passing urine can be symptoms of BPH.

2. Prostatitis

This is the name given to a set of symptoms that are thought to be caused by an infection or by inflammation (swelling) of the prostate. This is not cancer.

3. Prostate Cancer

This generally affects men over 60 and is rarely found in younger men. It is the most common type of cancer in men. Unlike many other cancers, prostate cancer is often present for years without you knowing it. This is because in most cases the cancer is slow growing and can take many years to cause any symptoms. However, some prostate cancers are fast growing and can spread to other parts of the body.

Digital Rectal Examination (DRE)

A common way of diagnosing a prostate problem is for the doctor to feel the prostate gland through the back passage (rectum). This is called a DRE (Digital Rectal Examination). Your GP will give you a DRE by inserting a lubricated gloved finger into your back passage to feel the prostate. You may find this uncomfortable, but it should not be painful.

If the DRE result gives cause for concern then PSA assessment will be carried out.

What does the PSA test tell me about my prostate?

A raised PSA level may be due to other less serious conditions such as an inflamed prostate (prostatitis), urinary tract infection (UTI), sexual activity, ejaculations or an enlarged prostate (BPH), However, a raised PSA can also be a sign that you have prostate cancer. The test can help to find early prostate cancer which may have a better chance of being successfully treated than more advanced prostate cancer. The PSA level is often raised long before any symptoms of prostate cancer develop.

Points to note:

- About two in three men with a raised PSA level do not have prostate cancer
- In some cases, the PSA level may be normal even when a prostate cancer is present
- Up to one in five men with prostate cancer have a normal PSA level
- A single PSA test cannot show whether a prostate cancer is present, or whether it is slow or fast-growing and it may be necessary for a repeat PSA assessment to determine your care pathway.

If I have a PSA test, what happens next?

What happens next depends on whether or not you have any symptoms; your personal risk of prostate cancer; how high the PSA level is; your age; and your DRE examination.

Advantages and disadvantages of having the PSA test

First, ask yourself if you are at particular risk of prostate cancer.

Your risk increases:

- If you are older
- If you have close relatives who have had prostate cancer, such as a father, brother, grandfather or uncle
- If you are of African-Caribbean or African-American descent.

Advantages

- It usually provides reassurance if the test result is normal
- It can help to detect prostate cancer before any symptoms develop
- Treatment in the early stages of prostate cancer could help men live longer and avoid further complications of cancer, and improve the quality of life

Possible disadvantages

- It could miss cancer in the prostate, and falsely reassure that all is well
- It might detect a slow-growing cancer that may never cause any symptoms or may never shorten your life span.
- Some prostate cancer treatment may lead to complications for example incontinence or erectile dysfunction

What happens if the PSA is raised?

A PSA test alone cannot diagnose prostate cancer. PSA naturally rises as men get older and the prostate gland gets bigger. If your PSA level(s) is raised, or your prostate feels abnormal when examined, your GP may refer you to a Consultant Urologist for assessment. The urologist will look at your DRE results, PSA results, your risk of prostate cancer and your overall general health when deciding the best next step.

They may recommend a prostate biopsy which involves using an ultrasound scanner to guide a probe into the rectum (back passage) with the help of local anaesthetic. Each man is different and while some find the biopsy painful, others have only slight discomfort. Samples from the prostate gland are taken and antibiotics are given to reduce the risk of infection.

What if I have prostate cancer?

The decision about treatment will be taken by you and your Specialist, who knows your particular medical situation and can advise you. The likelihood is that your prostate cancer is a slow growing cancer. Therefore you have time to consider your options.

The decision to treat depends on a number of things including if the cancer is fast or slow growing and whether it has spread to other parts of your body or not. Your overall health, age, medical history and your views will be considered

Further information

The information provided does not replace professional advice. If you have any questions or want to receive more information about PSA testing and prostate cancer you can discuss it with your doctor or practice nurse. You can also look at the following sources of information.

Organisation	Website Address	Contact Number
Northern Ireland Cancer	http://www.cancerni.net	028 9536 3305
Network (NICaN)		
Macmillan Cancer Support	http://www.macmillan.org.uk	0808 808 0000
Cancer Research UK	http://www.cancerresearchuk.org	0808 800 4040
Prostate UK	https://www.prostatecanceruk.org/	0800 074 8383

The local Macmillan Support Centres offer free, confidential information and support, if you or a loved one has questions about cancer.

Trust Area	Hospital Site	Contact Number
Belfast Trust	Belfast City Hospital and Royal Hospital	028 9615 0077
South Eastern Trust	Ulster Hospital	028 9055 3246
Southern Trust	Craigavon Area Hospital	028 3756 1001
Northern Trust	Antrim Area Hospital	028 944 24000 ext 333079/334046 (Mon-Fri 9-5) Mobile: 077 9584 5435
Western Trust	Altnagelvin Hospital	028 7161 1272