

Screening for Prostate Cancer

The U.S. Preventive Services Task Force (Task Force) has issued a **final** recommendation on *Screening for Prostate Cancer*.

This recommendation is for adult men of all ages. It does not apply to men who have been diagnosed with or are being treated for prostate cancer.

The Task Force reviewed research studies on the prostate-specific antigen (PSA) screening test for prostate cancer. It concluded that the expected harms of PSA screening are greater than the potential benefit. This fact sheet explains the Task Force recommendation and what it might mean for you.

What is prostate cancer?

Prostate cancer is a cancer that occurs in the prostate, a small gland in men that makes fluid to carry sperm. The prostate is located below the bladder and in front of the rectum.

Screening for Prostate Cancer

Prostate cancer is the second most common cancer in men in the United States, after skin cancer. Older men, African-American men, and men who have a family history of prostate cancer have a greater risk of developing prostate cancer.

Although prostate cancer is very common, in many cases, the cancer does not grow or cause symptoms. If it does grow, it often grows so slowly that it isn't likely to cause health problems during a man's lifetime.

Two tests are commonly used to screen for prostate cancer:

- **Prostate-specific antigen (PSA) blood test:** This test looks for PSA, a substance that may be found in high amounts in men with prostate cancer. However, a high PSA level does not always mean that a man has prostate cancer. PSA levels may be high in men with other types of prostate problems.
- **Digital rectal exam:** For this test, the doctor inserts a gloved, lubricated finger into the rectum to feel the prostate for lumps or anything else unusual.

The Task Force recommendation primarily focuses on the PSA screening test, with or without the addition of a digital rectal exam or other screening tests.

Potential Benefits and Harms

The main goal of a cancer screening test is to reduce the number of deaths from the disease. The Task Force found that among adult men, only a very small number, if any, would experience this benefit as a result of screening.

The Task Force also found that PSA screening has important potential harms. The PSA screening test often suggests that prostate cancer may be present when there is no cancer. This is called a “false-positive” result. False-positive results cause worry and anxiety and can lead to follow-up tests that aren’t needed. These tests can cause harms such as fever, infection, bleeding, urinary problems, and pain. A small number of men will need to go to the hospital because of these complications.

If prostate cancer is diagnosed, there is no way currently to tell for sure if it is a cancer that will never cause a problem and does not need treatment or if it is an aggressive cancer that does need treatment. This means that many non-harmful cancers are diagnosed. This is called “overdiagnosis.”

Because there is so much uncertainty about which cancers need to be treated, at present, almost all men with prostate cancer found by the PSA test get treatment with surgery, radiation, or hormone therapy. Many of these men do not need treatment because their cancer will not grow or cause health problems. This is called “overtreatment.”

The Task Force found that the treatment of cancers found by the PSA test has important, often lasting harms:

- **Erectile dysfunction (impotence) from surgery, radiation therapy, or hormone therapy.**
- **Urinary incontinence from radiation therapy or surgery.**
- **Problems with bowel control from radiation therapy.**
- **A small risk of death and serious complications from surgery.**

To learn more about prostate cancer treatments and their potential harms, visit the Web sites at the end of this fact sheet.

The Task Force Recommendation on Screening for Prostate Cancer: What Does It Mean?

Here is the recommendation. When the Task Force recommends against screening, it is because the potential benefits of screening are not greater than the expected harms. The Notes help to explain key ideas.

The recommendation has a letter grade. The grade is based on the quality of the evidence about the potential benefits and harms of the screening test. This and other Task Force evidence grades are explained in the box at the end of this fact sheet.

Visit the Task Force Web site to read the [full recommendation statement](#) on screening for prostate cancer. The statement explains the evidence that the Task Force reviewed and how it decided on the grade. An [evidence report](#) on this topic provides more detail about the studies the Task Force considered.

1 The Task Force *recommends against* PSA-based screening for prostate cancer. **Grade D**

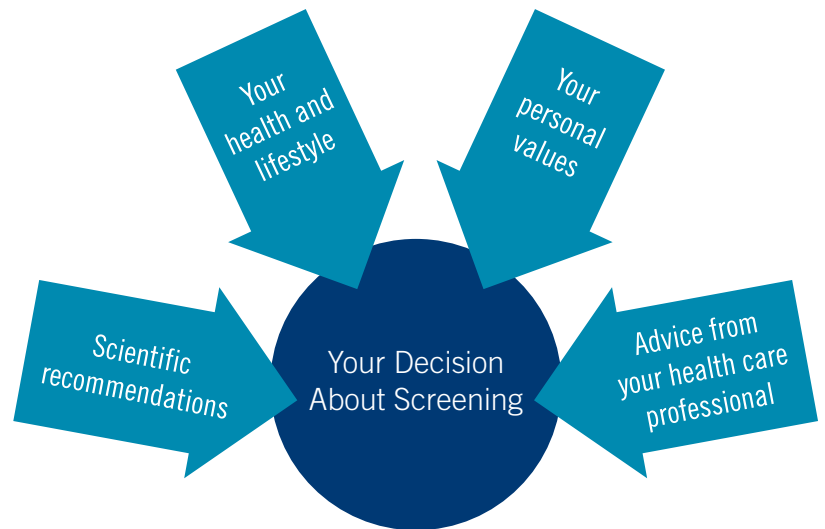
Notes

1 *recommends against*
The science shows that more men will be harmed by PSA screening than will benefit. The expected harms are greater than the small potential benefit.

Should You Be Screened for Prostate Cancer?

Getting the best health care means making smart decisions about what screening tests, counseling services, and preventive medicines to get and when to get them. Many people don't get the tests or counseling they need. Others get tests or counseling they don't need or that may be harmful to them.

Task Force recommendations can help you learn about screening tests, counseling services, and preventive medicines. These services can keep you healthy and prevent disease. The Task Force recommendations do not cover diagnosis (tests to find out why you are sick) or treatment of disease.



How should you decide whether to have a PSA screening test?

Consider your own health and lifestyle. Talk with your health care professional about your risk for prostate cancer. Think about your personal beliefs and preferences for health care. Learn about scientific recommendations, like this one from the Task Force. Weigh the potential benefits and harms of PSA screening and any treatment that may result. If you choose to get a PSA test, talk with your health care professional about the results of your test and whether further testing or treatment is right for you.





What is the U.S. Preventive Services Task Force?

The Task Force is an independent group of national experts in prevention and evidence-based medicine. The Task Force works to improve the health of all Americans by making evidence-based recommendations about clinical preventive services such as screenings, counseling services, or preventive medicines. The recommendations apply to people with no signs or symptoms of the disease being discussed.

To develop a recommendation statement, Task Force members consider the best available science and research on a topic. For each topic, the Task Force posts draft documents for public comment, including a draft recommendation statement. All comments are reviewed and considered in developing the **final recommendation statement**. To learn more, visit the [Task Force Web site](#).

USPSTF Recommendation Grades	
Grade	Definition
A	Recommended.
B	Recommended.
C	Recommendation depends on the patient's situation.
D	Not recommended.
I statement	There is not enough evidence to make a recommendation.

Click Here to Learn More About Prostate Cancer and PSA Screening

-  [PSA Screening: Statistics at a Glance \(USPSTF\)](#)
-  [Prostate Cancer Screening: Questions for the Doctor \(healthfinder.gov\)](#)
-  [Prostate Cancer Screening PDQ® \(National Cancer Institute\)](#)
-  [Prostate Cancer \(Centers for Disease Control and Prevention\)](#)