



PROSTATE CANCER – WHAT YOU SHOULD KNOW!

SCREENING – A PERSONAL DECISION

Prostate cancer is the third leading cause of cancer death in Nevada men. Although one in six men will develop prostate cancer in his lifetime, only one in 34 will actually die from disease.

FACTS:

- Each year almost 2,000 Nevada men will be diagnosed with prostate cancer and more than 200 will die from the disease.
- Prostate Specific Antigen (PSA) is a protein produced in the prostate gland.
- The United States Food and Drug Administration (FDA) approved the use of the PSA test together with a digital rectal exam to help detect prostate cancer among men age 50 and older.
- Doctors recommendations for screening vary.
- The higher a man's PSA level, the more likely cancer is present; however, there are many possible reasons for an elevated PSA level.
- The PSA screening test has limitations and remains controversial.
- Nearly 70 percent of prostate cancers occur in men age 65 and older.
- Finasteride (Proscar) can reduce the chances of getting prostate cancer.
- Men age 50 and older covered by Medicare can get a PSA test every 12 months.

RISK FACTORS:

Any man can develop prostate cancer; however, there are known risk factors:

- Being age 50 or older
- African-American ancestry
- Family history of prostate cancer
- Diet high in animal fats

REDUCING YOUR RISK:

The best ways to lower your risk of prostate cancer are:

- Eat a colorful variety of fruits and vegetables everyday
- Limit your intake of red and processed meats
- Eat a diet high in fiber
- Eat a diet rich in raw or cooked tomatoes, pink grapefruit, and watermelon
- If you are over 55 years old, ask your doctor about taking Finasteride

SCREENING CONSIDERATIONS:

- There is no specific normal or abnormal PSA level.
- Generally, a PSA level of less than four is considered normal; a level of more than 10 is of concern.
- PSA levels alone cannot distinguish between benign prostate conditions and cancer.
- One abnormal PSA test does not necessarily indicate a need for further diagnostic tests.
- Prostate cancer, benign prostate enlargement, inflammation, infection, age and race can all elevate PSA levels.
- PSA levels that continue to rise over time indicate other tests may be needed.
- No clear, scientific evidence suggests that the possible benefits of PSA screening (earlier detection of prostate cancer and prevention of death from prostate cancer) outweigh the risks of follow-up diagnostic tests and cancer treatment that include bleeding, infection, inability to control urine and erectile dysfunction.
- A man should discuss elevated PSA test results with his doctor because most men with such test results do not have cancer.