

## **Cancer Care Ontario Position Statement on Prostate Cancer Screening using the Prostate-Specific Antigen (PSA) Test**

- Randomized controlled trials of prostate cancer screening using the prostate-specific antigen (PSA) test have shown a small reduction in prostate-cancer mortality; however, harms associated with screening are common.
- Although a United States study<sup>1</sup> estimates that the rate of incident metastatic prostate cancer was three times higher in the pre-PSA era a net benefit of screening is yet to be proven.
- Given the potential harms of screening, including over-diagnosis and over-treatment, Cancer Care Ontario (CCO) does not support an organized, population-based screening program for prostate cancer.
- Men who are concerned about their risk of prostate cancer should talk to their primary care provider.
  - Individual decisions to screen should be made as a part of a shared-decision-making process involving a discussion between a man and his primary care provider.
  - Discussions about screening decisions should include:
    - The man’s risk for prostate cancer, including family history and race
    - The risks associated with biopsy and subsequent treatment, if indicated
    - The changing landscape of management towards active surveillance for low risk disease
    - The man’s general health and life expectancy, and personal preferences
  - CCO has developed patient and provider education materials that can be used to support the patient–provider discussions.
- CCO will continue to monitor emerging evidence on prostate cancer screening.

---

<sup>1</sup> Scosyrev E, Wu G, Mohile S, Messing EM. Prostate-specific antigen screening for prostate cancer and the risk of overt metastatic disease at presentation: analysis of trends over time. *Cancer*. 2012; 118(23):5768-76.