Just as women under the age of 50 are excessively screened for breast cancer using mammograms, frivolous prostate specific antigen (PSA) screening for men 75 or older goes against the grain, despite clinical guidelines suggesting otherwise.

Recent findings, published in JAMA, show 41 percent of about 61,000 men 75 or older routinely received PSA screening, with nearly 30 percent of the screenings ordered by their primary care physicians. In fact, some doctors were seven times more likely than others to order the screenings.

But are the tests clinically justified? According to the American Urology Association (AUA) and other major organizations, screening elderly men, given the relatively short life expectancy, is not appropriate medical care. But researchers say the issue is complex.

Nearly half of the men in the U.S. who died from prostate cancer were over 75 when the diagnosis was first made, said Patrick C. Walsh, MD, a professor of urology at Johns Hopkins Hospital.

Other PCPs and oncologists explain that the tumors found in older men diagnosed with prostate cancer often are not indolent.

And perhaps the real reason behind the measurement of PSAs in elderly men who don’t meet the recommendations: a fear of lawsuits.

ACSH’s Medical Director Dr. Gilbert Ross, agrees that most prostate cancer deaths occur in the elderly. But that is surely not a reason to screen over-75s with PSA, as the data show clearly that while some lives would be saved from prostate cancer, many fold more lives will be adversely and significantly affected, and many lives will be lost, due to false positive tests leading to needless biopsies and surgeries. This debate is over: docs, do not screen older men using PSAs; people, do not request PSA tests if you are not in the groups likely to benefit, and those over 75 are not in any such groups, absent specific indications.
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