
FOR THE RECORD

January 24, 2008

Ministry of Health

PROSTATE SPECIFIC ANTIGEN (PSA) TESTING IN B.C.

Recent media reports show some debate over whether prostate specific antigen (PSA) tests should be publicly covered as a broad population screening tool, despite concerns about the efficiency of this test. Here are the facts on PSA testing in British Columbia:

- The prostate specific antigen (PSA) test is a blood test commonly used to detect the presence of prostate cancer in men.
- In B.C., PSA tests are currently covered by the Medical Services Plan if a doctor determines that one is medically necessary. (For example, if a doctor found a lump on the prostate, then the test would be covered by MSP.) In 2006/07, MSP paid for more than 196,000 PSA tests.
- Under the renewed laboratory services agreement between the Province and the BC Medical Association, as of Feb. 2007, the cost of the PSA test was reduced to \$15.20, from \$26.14.
- According to current policy, the PSA test is not used as a diagnostic screening tool, but only for monitoring established metastatic disease, detection of early recurrence, and for the evaluation of men with symptoms.
- Currently, medical experts debate the benefits of using the PSA test as a population-based screening tool – i.e. testing men who show no signs of prostate cancer. Research currently provides conflicting evidence on the benefits and risks of PSA testing in screening men at average risk of developing prostate cancer.
- About 70 per cent of men with a test showing an increased PSA level will not have prostate cancer.
- Prostate cancer treatment is not without risks or side-effects, which can include erectile dysfunction and urinary incontinence. Consequently, if there is a diagnosis of prostate cancer, the physician may recommend simply monitoring the cancer with no treatment, depending on the type of cancer and the individual circumstances of the patient.
- Research to date indicates broad population-based PSA screening in other countries has not demonstrated a reduction in morbidity or mortality for men with prostate cancer.
- At this time, the relevant provincial authorities – including the BC Cancer Agency and the College of Physicians and Surgeons of BC – have advised that current evidence does not recommend the use of PSA testing as a broad population-based screening tool.
- While these agencies have reviewed the evidence and confirmed earlier recommendations, the Province continues to monitor research and evidence as it emerges to ensure government policies are in accordance with the best medical evidence.
- In this case, the Ministry of Health and BC Cancer Agency are awaiting the outcomes of two studies currently underway in the U.S. (the Prostate, Lung, Colon & Ovary Screening Trial, results due in 2009) and Europe (the European Randomized Study of Screening for Prostate Cancer, results due between 2007 and 2010).

- For further information on the pros and cons of PSA testing, visit the BC Cancer Agency website at www.bccancer.bc.ca/PPI/Screening/Prostate.htm and read the brochure, “The Pros and Cons of PSA Screening for Prostate Cancer.”

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