PSA Perspectives

Kirsten Martin

Follow this and additional works at: https://scholarworks.uvm.edu/fmclerk

Part of the Medical Education Commons, and the Primary Care Commons

Recommended Citation

https://scholarworks.uvm.edu/fmclerk/443

This Book is brought to you for free and open access by the Larner College of Medicine at ScholarWorks @ UVM. It has been accepted for inclusion in Family Medicine Clerkship Student Projects by an authorized administrator of ScholarWorks @ UVM. For more information, please contact donna.omalley@uvm.edu.
PSA PERSPECTIVES: ASSESSING PATIENT KNOWLEDGE ABOUT PSA TESTING & FACILITATING A CONVERSATION ABOUT RISKS AND BENEFITS

Kirsten Martin
Family Medicine Rotation 5, October-November, 2018
New Milford, Connecticut
Dr. Peter Anderson, MD
Problem Identification

• New recommendations from US Preventive Services Task Force (USPSTF) advise physicians discuss the risks and benefits of PSA screening with men age 55-69 to determine who gets screened, after previously advising against screening altogether

• Having a conversation about this screening test can take a significant amount of time to adequately educate patients about this controversial test

• There are limited resources available to PCPs to facilitate this conversation.

• Recommendations are conflicting and continue to change, further complicating the decision for patients and providers.
Cost Considerations

- The **cost per year of life saved** by prostate cancer screening with PSA and DRE was:
  - $2339-3005 for men aged 50-59,
  - $3905-5070 for men aged 60-69, and
  - $3574-4627 **overall** for men aged 50-69

- Prostate cancer screening by Medicare amounted to **$447 million** in 2009 US dollars

- The 3-year cost to Medicare for prostate cancer detection in men 70 years or older is approximately **$1.2 billion**.
Community (Patient) Perspective

• The majority of men interviewed reported that they knew very little about prostate cancer screening and prostate cancer.

• When asked what they would want to know about a screening test, men reported
  • “I would want to know if it works. If it works then great, as long as it is not going to have any side effects.”
  • “What is involved in getting the test itself, why do I need to get it, and when?”

• When asked how effective a screening test would need to be for a man to consider having it done, patients reported:
  • “I would just be acting with the assumption that it would be completely accurate.”
Community (Patient) Perspective

- When asked about PSA screening specifically, men were less likely to want screening after hearing that the screening does not decrease the chances of dying from prostate cancer.

- Men reported that they value the recommendation of their PCP regarding whether or not to have screening done.

- The outcomes of screening and available treatments were important to patients considering screening:
  - “Give me some good reasons to get the screening and the treatment [and I will do it]. But ... if you can’t do anything about it, then what’s the point ....”
Intervention

• Create a handout about the risks and benefits of PSA screening intended to
  • Decrease office time spent educating patients about PSA screening and allow more time to discuss other health concerns
  • Equip patients with an understanding of PSA screening, risks and benefits, and the potential consequences of a positive test
  • Empower patients to make screening decisions based on their unique values
Response to Intervention

• Patients seemed interested in learning more about PSA screening because they hear “cancer” and immediately want to be tested.

• Having the handout to give to patients helped facilitate the conversation and give people a chance to think over the potential consequences of a positive test before choosing to be screened.
Evaluation of Effectiveness

• Survey patients about their confidence about their understanding of the following before and after receiving the handout and having a discussion with their physician
  • What is PSA screening?
  • What are the consequences of a positive test?
  • What is involved in the treatment of prostate cancer?
  • What are the risks and benefits of receiving treatment for prostate cancer?
  • Should I be screened for prostate cancer?

• **The effectiveness was not evaluated in this project due to the short duration of the research**
Limitations

- A handout can only do so much to facilitate a discussion between a patient and a provider.
- Providers must remain diligent about educating their patients about PSA screening.
- Patient perspectives were only collected from one clinic, so there is limited diversity in cultural backgrounds, relationship with PCP, and other important factors.
Future Interventions

• Better screening tests for prostate cancer may be developed with the advances in medical imaging and genetic testing

• More specific recommendations should be developed to identify patients at higher risk for the more aggressive forms of prostate cancer

• A risk calculator could be developed to assist in the decision to screen patients for prostate cancer

• Better treatments targeted to the genetic mutations present in a given patient’s cancer
References


