## PSA testing and prostate cancer patient pathway FIGURE 3 The PCRMP PSA testing and prostate cancer patient pathway<sup>23</sup> Consultation in primary care No PSA PSA Informed choice test test PSA level raised PSA in usual range Age: 50-69 PSA value: ≥3.0 ng/ml Low risk of prostate cancer Refer to specialist Refer to specialist only if there are other concerns Informed choice No cancer Prostate biopsy diagnosed Cancer diagnosed Metastatic prostate cancer Localised prostate Locally advanced prostate cancer cancer Hormone or chemotherapy Informed choice Palliation External beam Active Watchful Radical radiotherapy and surveillance waiting prostatectomy brachytherapy\* Benefits: Benefits: Benefits: Benefits: avoids overtreatment avoids overtreatment aim is to cure or control aim is to cure or control non-invasive non-invasive Harms: Harms: radical, curative Harms: treatment can be up to 20% have residual side effects can include metastatic cancer given if sign of tumour (about half of erectile dysfunction, disease progression may develop and these will develop urinary symptoms, curative treatment biochemical or clinical bowel problems and may not be an option recurrence) infertility Harms: metastatic cancer increased risk of side effects include may develop and dying from prostate

www.gov.uk/government/uploads/system/uploads/attachment\_data/file/509193/Prostate\_Summary\_Sheet.pdf

cancer

curative treatment

may not be an option

The PCRMP resources also include a patient information sheet and full evidence review: see www.gov.uk/quidance/prostate-cancer-risk-management-programme-overview

infertility, erectile

incontinence

dysfunction and urinary

\* with or without

hormone therapy