**PROSTATE CANCER SCREENING**

**European Experts Advocate Population-based Screening**

The European Association of Urology, probably the most informed and expert major international body to make a judgement, has published a clear and unequivocal recommendation in favour of population-based Prostate Specific Antigen (PSA) screening to reduce the unacceptable death rate from Prostate Cancer (PCa).

In a lengthy paper published in the journal European Urology (Eur Urol, 2019; 76: 142-150), the 12 member expert panel drawn from across Europe, including the UK, has assessed all the key evidence accrued over 30 years of PSA use for PCa screening.

In summary, the greatest benefit derives from early detection of aggressive PCa at a curable stage which comes from having a baseline PSA at age 45 to individualise a man’s future risk of developing PCa. This should be linked to the other standard risk factors of ethnicity and a family history of prostate cancer or breast cancer to determine the subsequent follow-up interval: 1 yearly PSA for men at high risk, extending out to 8 yearly for men at lowest risk.

MRI scans and new biomarkers should be used to determine which men with a raised PSA require a prostate biopsy and, crucially, to avoid unnecessary biopsies. Men subsequently diagnosed with non-aggressive, localised PCa can be safely managed by active surveillance thus avoiding unnecessary overtreatment.

Having weighed up the pros and cons, the panel concluded that the weight of evidence now shows a clear balance in favour of screening and thus fully supports the introduction population-based PCa screening programmes.