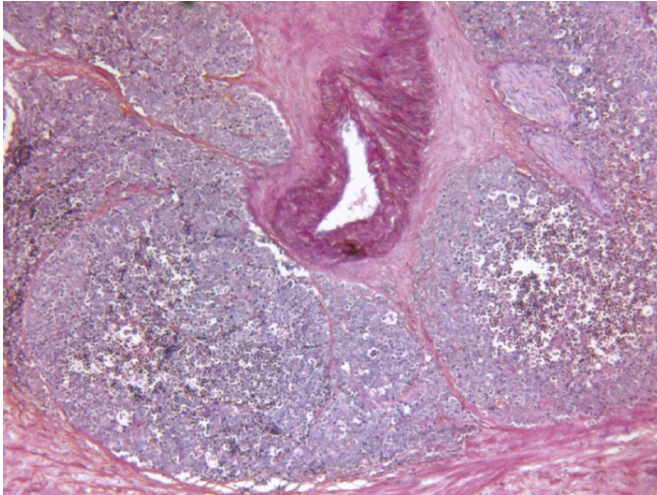


Impact of 2012 USPSTF guideline against PSA screening explored

29 December 2015



biopsies performed, with most of the decrease occurring in the detection of intermediate-risk tumors.

"Future focus on informed application of screening techniques may prevent the reversal of decades of improvement in the [prostate cancer](#) mortality rate," the authors write.

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(HealthDay)—Patients undergoing prostate needle biopsies after the 2012 U.S. Preventive Services Task Force (USPSTF) recommendation against prostate-specific antigen-based screening for prostate cancer for men of any age are more likely to be diagnosed with high-risk disease, according to research published in the January issue of *The Journal of Urology*.

John S. Banerji, M.D., from the Virginia Mason Medical Center in Seattle, and colleagues reviewed data from a prospective database of patients undergoing prostate needle biopsies from 2004 to 2014. The authors compared patients seen before and after the USPSTF recommendations.

The researchers found that, compared with the 1,416 patients in the pre-USPSTF group, the 310 patients in the post-USPSTF group had a higher prostate-specific antigen (P patients seen in the 30 months before the draft guidelines. There was a 31 percent decrease in the absolute number of

APA citation: Impact of 2012 USPSTF guideline against PSA screening explored (2015, December 29) retrieved 8 October 2022 from <https://medicalxpress.com/news/2015-12-impact-uspstf-guideline-psa-screening.html>

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