

Letter to the Editor: The Pundit Speaks

By Randolph M. Howes, M.D., Ph.D.

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“PSA Test is Misused and Unreliable, says Discoverer”

The discoverer of the PSA test, Dr. Richard Albin, is now speaking out and he has co-authored a book entitled, *"The Great Prostate Hoax"* (Macmillan, 2014). A 2004 study of older men with normal PSA levels found that about 15% of them actually had prostate cancer but doctors have known for years that the PSA is an imperfect test. There are no perfect tests and most can have either false positives or negatives. Obesity can cause false PSA lows. Tests must always be interpreted within the context of the patient's complete history, thorough physical examination and additional diagnostic or laboratory studies. Previously, it was thought that PSA was an all or nothing test but data has shown that a man at any PSA level can have prostate cancer. The U.S. Preventive Services Task Force issued a 2008 report and found that screening can detect some cases of prostate cancer, but the benefits of treatment in men over 75 “are small to none” and treatment often caused “moderate-to-substantial harms,” including impotence and bladder control and bowel problems, without evidence it saved the lives of these elderly men. Although PSA blood tests are often used to screen men for prostate cancer, there is still little evidence that they cut death rates from the disease, according to a 2009 article published in *CA: A Cancer Journal for Clinicians*. Only a biopsy can reveal certainty. But, current screening guidelines that recommend biopsies for men who have high "PSA velocity" but no other signs of prostate cancer are leading to many unnecessary biopsies. While use of the test has led to more prostate cancer diagnoses, it has done little to nothing to actually cut death rates. In an interview with *Medscape*, Dr. Albin said, "I believe that the use of the PSA test for screening asymptomatic men was strictly for money -- a lot of money." He said that was why he wrote the book. Dr. Albin maintains, the United States spends billions each year administering a preventive prostate cancer screening test to men, using PSA, that produces false positives in the majority of cases. He did agree, however, that elevated levels of PSA might be useful in predicting a recurrence of prostate cancer in men who were thought to be in remission. Remember, most men die with prostate cancer, not from prostate cancer.

In the America that I love, we will find more accurate “biomarkers” for all forms of cancer and will always consider the benefit/harm ratio for all forms of therapy. According to the ACS, "Research has not yet proven that the potential benefits of testing outweigh the harms of testing and treatment." Discuss this thoroughly with your doctor and ask plenty questions.

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