New resources on the Andrology Australia website:

Visit www.andrologyaustralia.org to find out how to take part in these new resources. A button is clearly labelled “Get involved” on the website to enable practitioners to offer comments on andrology/andrologycontent for download.

The survey results have established a need for further education programs targeted specifically to practice nurses to develop skills and knowledge in men’s health issues within general practice.

Practice nurses are becoming more aware of the health issues within general practice.

The initial aim of the reference group is to develop a practical education program in a format suitable to practice nurses in need of updating education in men’s health.

The survey results have established the need for further education programs targeted specifically to practice nurses to develop skills and knowledge in men’s health issues within general practice.

The reference group will guide and facilitate the development of the education program specific to practice nurses to deliver current evidence-based information on men’s health well-being. Information on depression and anxiety for men with prostate disease developed by beyondblue: the National Depression Initiative for Men is provided as an indicative content of the program.

The broadest possible information on cancers rates for prostate disease, the cancer management pathway strategies and outcomes, including depression, anxiety and mood, and trauma for prostate disease and anxiety. Find organ and members from the beyondblue website (www.beyondblue.org.au or the beyondblue info line 1300 224 686)

The second broad area is available to practice nurses in practice nurses in the Taps and Taps community to establish ongoing education and other sources of information. The reference group have included the Western Australian, Department of Health.

To ensure more can make informed choice for the early detection of prostate disease, they must be made aware of the potential benefits of PSA testing (or lack of). An Australian study has explored whether PCA3 could act as a PSA replacement and subsequently may increase the rate of over-diagnosis of low grade tumours with minimal morbidity. Since PCA3 is still an experimental test and have limited reproducibility. There are many researchers including new markers of prostate cancer. At this stage, there is no evidence to suggest that the PCA3 test is better than the current testing format suitable to practice nurse needs to may be accessible to practice nurses who have an interest in men’s health. Members of the Andrology and APNAs have links with their local Division of General Practice.

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Focus on: PSA Testing: What everybody (and health professional) needs to know

Author: Professor RA Tasker

What is a PSA test and when is it used?
Prostate Specific Antigen (PSA) is a protein produced in the prostate and it is normally found in low levels in a man’s bloodstream. A PSA test measures the level of PSA in the blood and may help to diagnose prostate disease. A high level of PSA in the blood almost always means that something is wrong with the prostate, but not necessarily prostate cancer.

A high PSA may be found in men who have prostate infection (infected prostate) or benign prostatic hyperplasia (BPH) (known as prostate enlargement) or for the reasons discussed above.

Why is the decision to have a PSA test so complex?
A single PSA test is not a reliable sign of prostate cancer on its own. A man is more likely to be diagnosed with prostate cancer if he has a series of abnormal tests. If you have an abnormal PSA, the additional steps can be lengthy and may involve discomforting tests and procedures.

What if I’m a health professional talking to my patients about prostate cancer screening?
For most men diagnosed with prostate cancer, there are three treatment possibilities: i) curative intent (surgical removal of the prostate) in some cases, ii) hormone therapy (androgen deprivation therapy), (iii) when cancer is asymptomatic (early detection) and (iv) actively monitoring (watchful waiting). Referral to a urologist is essential for assessment of an abnormal test. How and when should a man be counseled about their prostate health?

What if I’m a man thinking about prostate cancer testing?

What if I have a history of prostate cancer?
Men with a strong family history of prostate cancer (whether a grandfather, father, brother or cousin has the disease) are at a greater risk of developing prostate cancer and should think about being tested from 45-50 years of age. The average mammogram protects men over 50 years of age from prostate cancer. A man should discuss any family history of disease with his doctor.

What if I’m a health professional thinking about offering prostate cancer screening?
When is the optimal age to offer prostate cancer screening? Who should and shouldn’t be screened? These questions still remain unanswered.

What health information and resources are available on PSA testing?
Current resources which provide information based on the current evidence available include:

- Italian Prostate Cancer website (www.prostatehealth.org)
- LSA Cancer Fact: The Early Detection of Prostate Cancer in General Practice: Supporting Patient Decision (www.iscan.org.au) > Topic: ‘Whether to test for Prostate Cancer’
- Department of Health, Commonwealth of Australia > Topic ‘Monitoring of Tests at the Stage of Detection’
- Prostate Cancer Foundation of Australia (www.prostatecancer.asn.au) > Information on PSA testing.
- Current reviews of evidence-based resources include:

- Australian Prostate Cancer Information Service (www.apcis.org.au)
- The Cancer Council Australia (www.cancer organise) > Prostate Cancer (including PSA Decision Card)
- Prostate specific antigen (PSA) testing: Clinical Practice Guidelines for PSA testing in Australia. www.prostatecancer.asn.au
- Current resources which provide information based on the current evidence available include:

- The first group of critically ill men has been confirmed. Merv’s prostate test and follow-up analysis have been supported by reputable professional bodies. Any information provided should be given in a way that respects the man’s education level, personal circumstances, and, in particular, his health status and personal preferences. It should not be assumed that an informed man making his own decision will be able to disregard the medicolegal advice of his doctor or other health practitioners. Health practitioners should recognize that an abnormal PSA test result (it shows that cancer may be present) may have the potential to cause anxiety and distress for some men. However, the decision to have a biopsy is not a difficult one to make if there is a cancer diagnosis. Support such as a website dedicated to helping men make informed decisions about their prostate health is available (www.mervshaveacrackday.com.au). The website contains valuable information on prostate cancer and treatment options, educational information on prostate cancer, and was supported in kind by the Association of Prostate Cancer Collaboration and the Australian Prostate Cancer Foundation (APCC). Development funding was kindly provided by Lions Australia, and the site was supported by the Repatriation General Hospital (Australian Capital Territory) with a grant from the Movember Foundation. Development funding was kindly provided by Lions Australia, and the site was supported by the Repatriation General Hospital (Australian Capital Territory) with a grant from the Movember Foundation.

The Australian Prostate Cancer Information Service (APCIS) (www.prostatecancer.asn.au) was established in 2000 by the Australian Prostate Cancer Collaboration (APCC). The site was developed with a grant from the Movember Foundation. It has been designed to provide cancer survivors with a needs assessment survey of men with prostate cancer. The site was developed with the support of the Movember Foundation and was supported in kind by the help of the Association of Prostate Cancer Collaboration (APCC). Development funding was kindly provided by Lions Australia, and the site was supported by the Repatriation General Hospital (Australian Capital Territory) with a grant from the Movember Foundation. Development funding was kindly provided by Lions Australia, and the site was supported by the Repatriation General Hospital (Australian Capital Territory) with a grant from the Movember Foundation.
Focus on: PSA testing: What everybody (and health professional) needs to know

**What is a PSA test and when is it used?**

Prostate-specific antigen (PSA) testing is a simple blood test that measures a hormone produced in the prostate and is normally found in low levels in a man's bloodstream. A PSA test measures the level of PSA in the blood and may help to diagnose prostate disease. A high PSA in the blood usually means something is wrong with the prostate, but not necessarily prostate cancer.

A high PSA may be found in men who have prostate infection/inflammation (prostatitis), benign prostatic hyperplasia (BPH known as prostate enlargement), or least, common, prostate cancer.

**Why is the decision to have a PSA test a complex one?**

A single PSA test is not a reliable sign of prostate cancer on its own, as a man can be tested for prostate cancer without any symptoms. PSA levels can remain normal even after prostate cancer has been treated. The test should always be combined with other factors to determine the risk of prostate cancer and to ensure that the treatment plan is appropriate for the individual. Men should be informed that a normal PSA can vary depending on age, race, and family history.

**What is a PSA test and when is it used?**

PSA levels as a normal part of ageing as the prostate tends to grow and it can be normal for men to have a PSA level of up to 0.05 ng/ml. The prostate testing guidelines in Australia recommend that men with a PSA level of 0.1 ng/ml (or greater) must be referred to a urologist for further investigation.

**What if I have a family history of prostate cancer?**

Men with a strong family history of prostate cancer (a grandparent, father, brother, uncle, or cousin who has been diagnosed at a young age or at a greater risk of cancer and should think about being tested from the age of 40 years) should be tested at an earlier age. Men with a strong family history of prostate cancer may have a higher risk of cancer and should think about being tested from the age of 40 years.

**What if I’m a man thinking about prostate cancer testing?**

It is important to discuss family history of disease with your doctor.

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For most men diagnosed with prostate cancer, there are treatment options in addition to surgery and radiation therapy. A full list of references for this article is available by emailing nzerv@lions.org.au.
What is a PSA test and when is it used?

Prostate specific antigen (PSA) is a protein produced by the prostate and is normally found in low levels in a man's bloodstream. A PSA test measures the level of the PSA in the blood and may help to diagnose prostate disease. A high PSA in the blood almost always means that something is wrong with the prostate, but not necessarily prostate cancer.

A high PSA may be found in men who have prostate disease (definitive or definitive of the prostate), foreign tissue (prostate hyperplasia), (known as prostate enlargement), or a lost prostate cancer.

Why is the decision to have a PSA test or a cancer a complex one?

A single PSA test is not a reliable sign of prostate cancer. In fact, a decision is made to test for prostate cancer based on age, family history of prostate cancer, and other risk factors.

The decision to have a PSA test should be made with the understanding of all possible outcomes; including the physical and psychological side-effects as a result of further testing. Men should be informed of all possible outcomes and any intervention or treatment options. If you are considering having your first PSA test/DRE, it is important to discuss any family history of prostate cancer or disease with this number varying depending on age and Gleason score. For those men diagnosed with prostate cancer, a possible recommendation is due to the lack of evidence.

What if I'm a health professional talking to my patients about prostate cancer testing?

Men should be aware that there is debate about the potential for this decision and diagnosis may have.
Practice nurses are becoming more widely recognised as an integral part of delivering high-quality health care in a variety of professional settings. This is particularly true in the realm of men’s health, where practice nurses play a crucial role in the delivery of men’s health education and care. The systematic review of the literature reveals that practice nurses in Australia have an interest in men’s health, which is aligned with the broader scope of practice nurses. The survey results confirm that a need exists for practice nurses to acquire new skills and information on men’s health issues within general practice. The specific aim of the education program on men’s health issues in general practice is to establish the extent of the public’s knowledge of benefits of prostate cancer screening in Europe. The target audience for this educational program is practice nurses who wish to learn about the benefits of prostate cancer screening and how to incorporate it into their practice. The program includes a variety of educational activities, such as lectures, discussions, and case studies, to ensure that practice nurses are well-informed and equipped to provide high-quality care in this area. Practice nurses are encouraged to participate in this program to improve the quality of care they provide to men with prostate cancer.
Practice Nurse Men's Health Education

Professional education

Practice nurses are becoming more widely recognised as an integral part of achieving high-quality patient care in general practice. Andrology Australia has been working with the Australian Pharmacists’ Medicare Benefits Schedule (MBS) Nominations Committee (the MBS Nominations Committee) on the development of a new men’s health education program specifically targeted at MBS practitioners. The survey results established a need for a men’s health-specific education program targeted specifically to practice nurses. To address the information and education needs of practice nurses when determining the information and education program best suited to practice nurses across Australia, an education program was developed by beyondblue: the national depression initiative, in association with the Practice Nurse Specialist Group of the Pharmaceutical Society of Australia (PSA). The program presents information on common mental health issues for men with prostate cancer, including depression, anxiety, and stress. It is available free of charge on the PSA website (www.psa.org.au) or through the PSB’s toll-free 1800 243 789 CallBack line.

In brief

New resources on the Andrology Australia website:

To address the need for Practice Nurse education on men’s health within general practice, Andrology Australia has developed an education program specifically targeted to practice nurses. The program provides information on common men’s health issues and education needs of practice nurses when determining the information and education program best suited to practice nurses across Australia.

Public Consultation on draft Clinical Practice Guidelines for the management of Locally Advanced and Metastatic Prostate Cancer

The Australian Cancer Network is inviting public submission on its draft Clinical Practice Guidelines for the Management of Locally Advanced and Metastatic Prostate Cancer. The guidelines are intended to assist health professionals in providing evidence-informed and advanced and metastatic prostate cancer recognising clinical, psychological and palliative aspects of the disease. The draft documents were developed by committees of experts in collaboration with the ACN website at www.cancer.org.au/clinical-guidelines. Submission close 1 October 2010.

Research round-up

Public Knowledge of Benefits of Prostate Cancer Screening in Europe

A recent study1 surveyed 10,228 people aged 50 years and above in the five countries that account for the largest proportion of the European population, to establish the extent of the public’s knowledge of, and beliefs about, the benefits in general practice. The results show that 11 per cent of the men surveyed made an informed choice for the early detection of prostate cancer, and 16 per cent knew that the PSA test could save the lives of people with prostate cancer. In most countries men made the decision after talking with a medical professional or seeing a TV advertisement. The PSA test has been a controversial topic of discussion amongst the general public and professionals, with the potential to have a significant impact on the health of men.

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