

UNDERSTANDING THE PSA TEST



About this booklet

Prostate cancer is one of the most common types of cancer in the UK. Many men worry about getting prostate cancer, sometimes because a relative or friend has had it. Some men choose to have tests, including the PSA test, to find out if they have prostate cancer. The PSA test will not tell you if you have prostate cancer, but it can show whether you need further tests.

You may find this booklet helpful if:

- you wonder whether you should have the PSA test
- you have no symptoms, but want more information about the PSA test or prostate cancer
- you have symptoms, and want to know more about testing.

How to use this booklet

The booklet is split into sections to help you find what you need. You do not have to read it from start to finish. You can use the contents list on page 3 to help you.

It is fine to skip parts of the booklet. You can always come back to them when you feel ready.

Throughout this booklet, we have included quotes from men who have had the PSA test. These are from people who have chosen to share their story with us. To share your experience, visit [macmillan.org.uk/shareyourstory](https://www.macmillan.org.uk/shareyourstory)

For more information

We also have a booklet that you may find helpful called **Having tests for prostate cancer**.

We have other booklets for people who have been diagnosed with prostate cancer and already know what stage their cancer is:

- **Understanding early (localised) prostate cancer**
- **Understanding locally advanced prostate cancer**
- **Understanding advanced (metastatic) prostate cancer**

If you have more questions or would like to talk to someone, call the Macmillan Support Line free on **0808 808 00 00**, Monday to Friday, 9am to 8pm, or visit **macmillan.org.uk**

If you would prefer to speak to us in another language, interpreters are available. Please tell us, in English, the language you want to use.

If you are deaf or hard of hearing, call us using NGT (Text Relay) on **18001 0808 808 00 00**, or use the NGT Lite app.

We have some information in different languages and formats, including audio, eBooks, easy read, Braille, large print and translations. To order these visit **macmillan.org.uk/otherformats** or call **0808 808 00 00**

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What is the PSA test?

The PSA test is a blood test. When it is used with other tests, the PSA test can help doctors to diagnose prostate cancer.

Prostate-specific antigen (PSA) is a protein made in the prostate (see page 6). Some of this PSA leaks into the blood and can be measured in the PSA test.

Most men have small amounts of PSA in the blood. If the prostate becomes enlarged, inflamed or infected, then larger amounts of PSA get into the blood. The amount of PSA in the blood may also increase if there is cancer in the prostate.

The PSA test may help diagnose very early prostate cancer, before any symptoms develop. But there are advantages and disadvantages of having treatment for early prostate cancer. For example, even when prostate cancer is diagnosed early, treatment might not help men live longer. Prostate cancer may grow very slowly, and very few men with early prostate cancer will die of it. For some men, the possible side effects of treatment may be worse than the effects of the cancer itself. For example, some treatments may affect your ability to get an erection.

Some men may choose to have tests and treatment for early prostate cancer. Others do not want to know if they have prostate cancer. This is because they think knowing would cause them to worry, or that they would have to make difficult decisions about treatment. They may also be worried about the side effects of treatment.

Before you decide whether to have the PSA test, you may want to talk to your GP about it. It can help to think about some questions you would like to ask. There are some questions on page 29 that you might want to think about before deciding whether to have the PSA test.

There is no right or wrong answer about whether or not to have the PSA test. But it may help to think about whether you have any risk factors (see pages 12 to 16) for prostate cancer and about your own preferences.

We have more information on the benefits and disadvantages of the PSA test (see pages 26 to 27). Your doctor can also help you make a decision that is right for you.

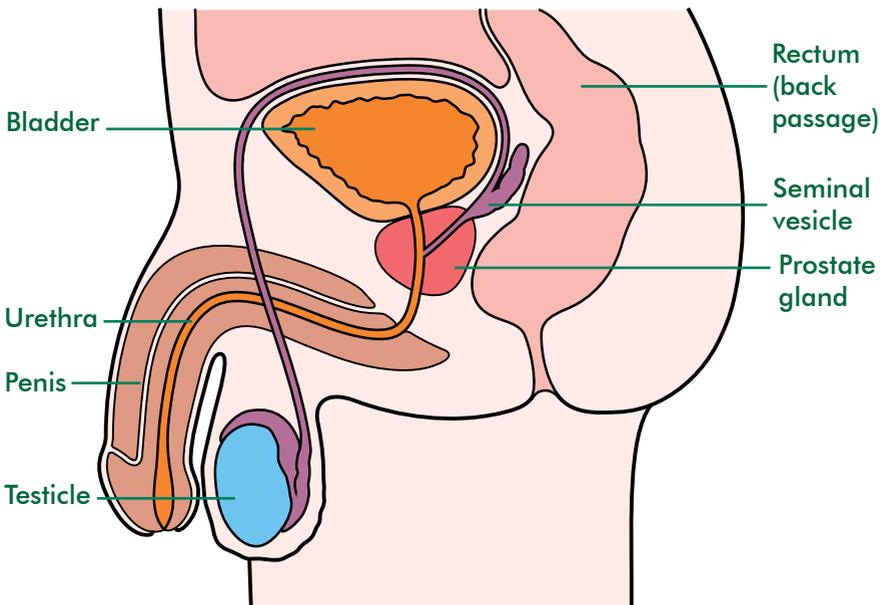
The prostate

The prostate is a small gland about the size of a walnut. The prostate gets bigger as men get older. It is divided into 2 lobes and has an outer layer called the capsule.

The prostate is below the bladder surrounding the first part of a tube called the urethra. The urethra carries pee (urine) from the bladder to the penis. The same tube also carries semen, which is the fluid containing sperm. Just behind the prostate is the back passage (rectum). There are also some lymph nodes (sometimes called glands) near the prostate.

The prostate contains muscle tissue and glandular tissue. Glandular tissue is tissue that releases (secretes) certain substances.

The prostate gland and surrounding structures



What does the prostate do?

The prostate produces a fluid that mixes with sperm (from the testicles) to make semen. The fluid is kept in a tube-shaped gland that sits behind the bladder. This gland is called the seminal vesicle. During sex, the muscle tissue helps force (ejaculate) prostate fluid and sperm into the urethra.

The male sex hormone testosterone (made in the testicles) controls how the prostate works. Testosterone is responsible for things like your sex drive, getting an erection and muscle development.

The prostate also produces a protein called prostate-specific antigen (PSA). This helps to make semen more watery. A blood test can measure PSA. This is called a PSA test. Doctors use it to help diagnose different prostate problems, including cancer.

Common prostate problems

You may not be aware of your prostate unless it causes you problems. The two most common prostate problems are:

- benign prostatic hyperplasia (also called benign prostatic hypertrophy, or BPH)
- prostatitis.

BPH and prostatitis can both cause a raised level of PSA in the blood, but they are not prostate cancer.

Benign prostatic hyperplasia (BPH)

This is when the prostate increases in size. It is part of the normal ageing process and is common in men over the age of 50.

Symptoms of BPH can include:

- difficulty starting to pee
- having a weak flow of pee
- needing to pee more often than usual, especially at night
- feeling like you have not completely emptied your bladder after peeing
- an urgent need to pee
- blood in the pee or semen (this is rare).



Prostatitis

This is when the prostate is inflamed, usually because of an infection. It can also be caused by injury to the prostate, or by some autoimmune diseases. Autoimmune diseases cause the body's immune system to damage healthy cells in the body.

In some men, prostatitis may not cause any symptoms. Other men may have symptoms, including:

- repeated urine infections (infections in your pee) – this can be treated with antibiotics
- pain in or around the end of the penis, testicles, inner thighs, the area between the testicles and back passage (perineum) or the lower back
- pain during ejaculation or blood in the ejaculated semen.

'I was going to the toilet often. I went for a while without coffee just to do some tests of my own, to check what was going on. I still had symptoms, so I went to see my GP.'

Aaron

Prostate cancer

Prostate cancer is the most common type of cancer in men. Each year, about 47,000 men in the UK are diagnosed with prostate cancer. It is usually diagnosed in men aged over 65. Prostate cancer can happen in younger men, but it is uncommon in men aged under 50.

Cancer that has not spread outside the prostate is called early (localised) prostate cancer. Men with early prostate cancer may not have any symptoms. Prostate cancer normally only causes symptoms if it becomes larger. When this happens, it presses on the bladder or the tube that drains pee (urine) from the bladder (urethra).

Problems with peeing are common as men get older. These symptoms are often caused by non-cancerous (benign) conditions of the prostate (see page 8). But it is important to talk to your doctor or nurse if you have any symptoms.

More men are diagnosed with prostate cancer because of PSA testing. But not all these cancers will need to be treated. Even without treatment, some prostate cancers will not shorten a man's life.

Risk factors and causes of prostate cancer

Doctors do not know the exact causes of prostate cancer. But there are risk factors that can increase a man's chance of developing it. Having one or more risk factors does not mean a man will get prostate cancer. Having no risk factors does not mean a man will not develop prostate cancer. Different risk factors may affect the risk of getting prostate cancer.

Age

This is the strongest risk factor for prostate cancer. Men aged under 50 have a much lower risk of prostate cancer, although they can still develop it. The risk increases as men get older. More than half of all prostate cancers diagnosed in the UK are in men aged 70 and over.

Ethnicity

Black men have a much higher risk of developing prostate cancer than white men. The reason for this is not clear, but it may be due to genetic factors. Black men are also usually diagnosed with prostate cancer at a younger age.

Prostate Cancer UK provide an information pack for black men aged 45 and over who are concerned about their risk (see page 36). It gives advice on talking to your GP about your risk of prostate cancer, to help you to decide whether to have tests.

Asian men have a lower risk of developing prostate cancer. The reason for this is unknown.

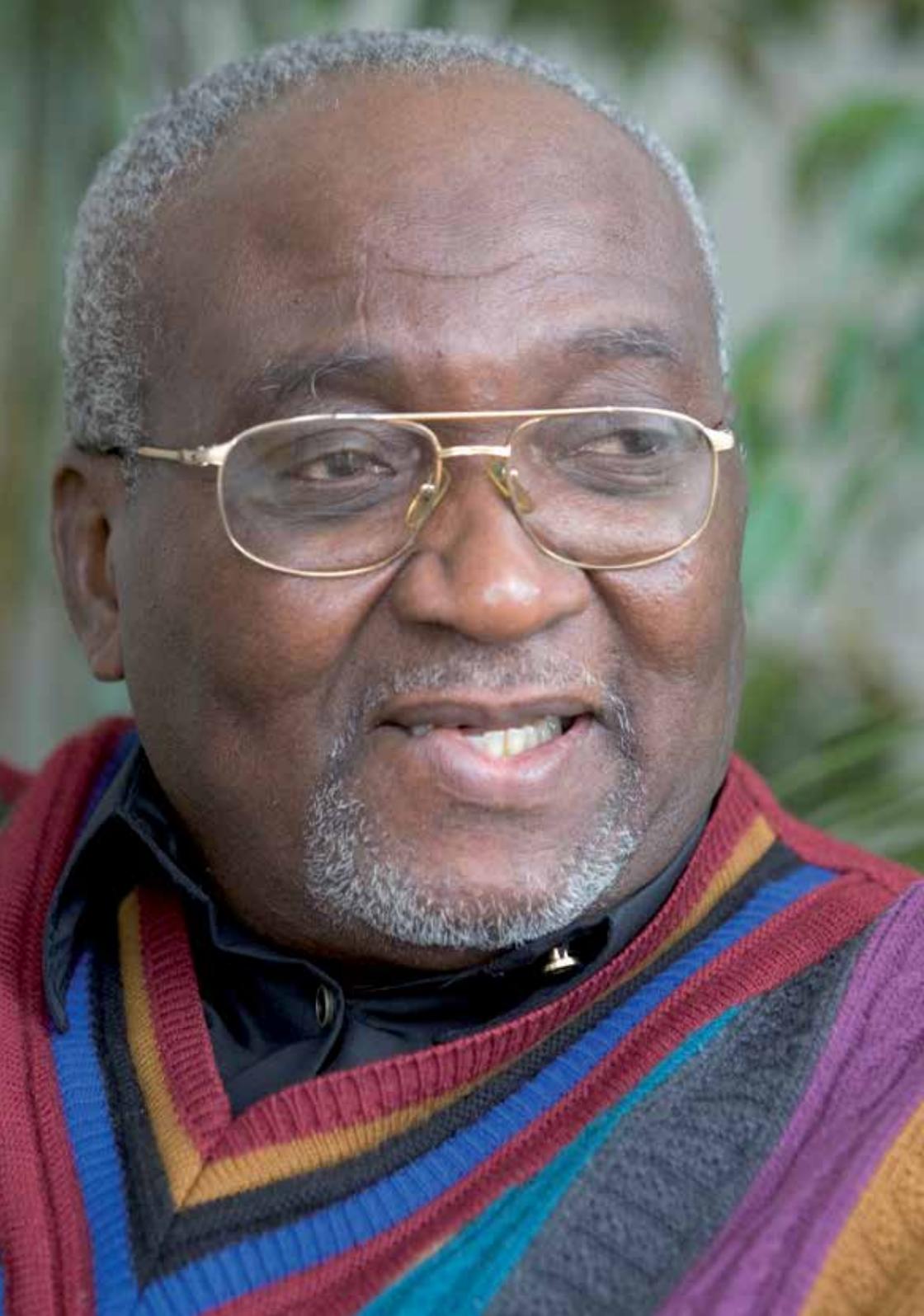
Family history

Most men who get prostate cancer do not have a family history of it. Getting older is much more likely to be the significant risk factor.

But occasionally there may be a possible family link (inherited). Certain things make this more likely. For example, the more men in a family that have prostate cancer, the younger they were when diagnosed and the more closely related they are.

'There was some family background of this illness. So on my next visit to my GP, I mentioned it to him. I thought it might be wise to ask for his advice about me having the test.'

Kwame



A man's risk of developing prostate cancer is higher if they have:

- either a father or brother who had prostate cancer – the risk is greatly increased if they were diagnosed under the age of 60
- two or more close relatives on the same side of the family who had prostate cancer – close relatives include a father, brother, grandfather, half-brother and an uncle
- certain inherited cancer gene changes (mutations).

We inherit our genes from our parents. Doctors think 5% to 10% of prostate cancers are linked to inherited gene changes (mutations). But they do not think there is a specific prostate cancer gene. It is thought that changes in a few genes are involved.

In a small number of men, prostate cancer may be linked to changes in the breast and ovarian cancer genes BRCA1 and BRCA2. Men with the BRCA2 gene mutation may have up to a 5 times higher risk of prostate cancer compared with the general population. The BRCA1 gene may also increase risk, but this is not as clear. Prostate cancer risk is also higher in men with Lynch syndrome, also known as hereditary non-polyposis colorectal cancer (HNPCC). We have more information about Lynch syndrome on our website (see **About our information** section on page 31).

Talk to your GP if you have a family history of cancer and are concerned about your prostate cancer risk.

We have more information about this in our booklet **Cancer genetics – how cancer sometimes runs in families** (see page 31).

Body weight and diet

Being very overweight (obese) may increase the risk of having a more advanced prostate cancer. It may also increase the risk of having a fast-growing (high grade) type of prostate cancer.

A diet high in animal fats may increase the risk of prostate cancer. This includes foods like red meat (such as beef, lamb and pork) and high-fat dairy products (such as butter, full-fat milk, cheese and cream).

A healthy, balanced diet is better for your general health. For most people, this includes:

- foods high in fibre (such as wholemeal bread, brown rice, oats, beans and lentils)
- lots of fruit and vegetables
- less red meat and less processed meat (such as sausages, burgers, bacon and ham)
- less fat and less sugar.

Eating a balanced diet and doing regular physical activity keeps you to a healthy weight. This may reduce your risk of certain types of cancers and other conditions, such as heart disease and diabetes.

We have more information about healthy eating and staying active in our booklets and on our website (see page 31).

Having the PSA test

What does the test involve?

The PSA (prostate-specific antigen) test is a blood test that measures the level of PSA in your blood. You can have this test at your GP surgery. You can talk to your GP about the benefits and disadvantages before deciding whether having the PSA test is right for you.

If you decide to have the PSA test, your GP or nurse will take a blood sample and send it to a laboratory to be tested.

Rectal examination

If you are having the PSA test, you will usually have a rectal examination as well. This is when the doctor or nurse inserts a lubricated, gloved finger into your rectum (back passage) to feel the prostate. It is sometimes called a digital rectal examination. It may be uncomfortable, but it is quick and should not be painful. If there is cancer in the prostate, it can feel different. Normally the prostate feels smooth, but if cancer is present, it can feel hard, rough or bumpy.

'The examination can be embarrassing but it is important to remember that no matter how uncomfortable you feel about it, get yourself checked out. It could save your life.'

Bill

PSA test results

What is a normal PSA level?

Your doctor may talk about a normal PSA level. Unlike some other blood tests, there is not one normal PSA level for everyone. The PSA level naturally gets higher as you get older and varies depending on the size of your prostate. The size of the prostate is different for each man and the prostate gets bigger with age. Your doctor will tell you what they think the normal level of PSA should be for you. They generally use these levels:

Age	Normal PSA level
50 to 59	Up to 3 nanograms per millilitre of blood (3ng/ml)
60 to 69	Up to 4 nanograms per millilitre of blood (4ng/ml)
70 to 79	Up to 5 nanograms per millilitre of blood (5ng/ml)
80 and over	No limit

What can affect the PSA level?

As men get older, the level of PSA in the blood rises slowly. It may also be raised by some common prostate problems (see page 8) or by cancer in the prostate. The level of PSA in the blood can also be raised by:

- infections
- ejaculation
- some types of exercise, such as cycling
- having a urinary catheter (a tube to drain pee)
- receiving anal sex or prostate stimulation during sex – it is best to avoid this for 1 week before the PSA test
- prostate or bladder surgery
- having a prostate biopsy (see page 22).

These will usually only raise the PSA for a short time. If you decide to have the PSA test, your doctor can give you advice about how long you may have to wait for the level to come back down.

Some men take medicines that help with urinary symptoms caused by an enlarged prostate. These can lower the PSA level in your blood. They include:

- finasteride (Proscar®)
- dutasteride (Avodart®, Combodart®).

If you have the PSA test, it is important to let your GP or nurse know about any medicines you are taking. This includes any drugs you can buy over the counter, complementary therapies or herbal drugs.

What happens after the PSA test?

What happens next depends on the results of the PSA test and the rectal examination.

If both the PSA level and the rectal examination are normal, you will not need any more tests as there is no reason to think you might have prostate cancer.

Your GP will refer you to see a specialist if:

- your PSA level is higher than normal
- the PSA level is normal but your rectal examination is not normal.

'I phoned my surgery to get my PSA result. The nurse said that it was nothing to worry about. She explained the normal range for me and that my result was at the bottom of that.'

Yusuf

If your PSA level is higher than normal but your rectal examination is normal, your GP usually checks your PSA level again before referring you to a specialist. You will usually be seen within 2 weeks of your GP making a referral.

The specialist will talk to you about your results and what will happen next. They may recheck your PSA level and do another rectal examination. They will talk to you about:

- your PSA level and whether anything could have raised it (see page 19)
- how your prostate felt during the rectal examination
- your personal risk of prostate cancer (see pages 12 to 16)
- your general health and any medical conditions you have.

After this, your specialist may talk to you about having an MRI scan and a sample of tissue taken from your prostate (a biopsy). They will explain the risks and benefits of this to help you make a decision. If the biopsy shows that you have prostate cancer, you may need some further tests to give doctors more information about the stage of the cancer. The stage of the cancer is its size and whether it has spread. We have more information on having tests for prostate cancer in our booklet. This is also available in audio (see page 31 for more details).

If you have prostate cancer, there are ways of treating and managing it. Your healthcare team can talk to you about your options.

How reliable is the PSA test?

Research has shown that 1 PSA test is not reliable on its own:

- 75 out of 100 men who have a **raised** PSA level (75%) will **not** have prostate cancer.
- 1 out of 7 men who have a **normal** PSA level (14%) **will** have cancer.

Most men will have more than one PSA test before they are offered a biopsy or an MRI scan of the prostate. If the level of PSA is high in several tests, or is increasing each time the test is taken, you will be offered further tests.



National screening for prostate cancer

Screening is a way to try to find cancer early in people who do not have any symptoms. In the UK, there are screening programmes for breast, bowel and cervical cancer. But there is currently no national screening programme for prostate cancer. On its own, the PSA test is not accurate enough to find prostate cancer to be used as part of a screening programme.

Some studies show that the lives of some men may be saved by PSA screening. But they also show the following:

- Screening may lead to more men having invasive tests, such as a biopsy, which can cause complications.
- Screening may lead to more men being treated for prostate cancers that would not cause them serious harm. They may be given treatments that have side effects, such as erection problems or urinary incontinence.

For a screening programme to be effective, the benefits need to outweigh the disadvantages.

Who can have a PSA test?

Although there is no screening programme, men aged over 50 can ask their GP for the PSA test. Or they may be offered one as part of a general health check. Before you have the test, your GP or nurse will talk through the benefits and disadvantages (see pages 26 to 27) of having your PSA checked. If you are aged under 50 but at higher risk of prostate cancer (see pages 12 to 16), you can talk to your GP about having the PSA test.

If you are a trans woman

Trans (transgender) women who were assigned male at birth still have a prostate gland, whether they have had genital reconstructive surgery or not. This means trans women can still get prostate cancer. If you identify as a trans woman and would like to have the PSA test, talk to your GP.

You may feel worried about talking to your doctor or practice nurse about this, but doctors and nurses are used to talking about many different needs. If you find it difficult to start the conversation, you could try showing them this information. You should talk about any worrying symptoms or concerns with your GP or nurse.

The LGBT Foundation has a helpline that can give you confidential advice and support – call **0345 3 30 30 30**. You can also talk to one of our cancer support specialists on **0808 808 00 00**.

Benefits and disadvantages of having the PSA test

Before deciding whether to have the PSA test, it can help to think about the possible benefits and disadvantages. You can talk about these with your GP or nurse.

Possible benefits

- If the test result is normal, you may feel more reassured.
- If your PSA level is slightly high, you can continue to have it monitored, especially if you have an increased risk (see pages 12 to 16).
- It can help to find prostate cancer before you have any symptoms.
- If further tests show you have an early, faster-growing prostate cancer, treatment may cure it or help you live longer.

Possible disadvantages

- If your PSA level is raised, you may feel anxious and worry about having more tests.
- It is possible to have a normal PSA level even in men who have prostate cancer.
- Although a raised PSA level does not always mean you have cancer, you may still need more tests, such as a biopsy, which can cause complications.
- If you are diagnosed with prostate cancer, you will need to make decisions about treatments, which can have difficult side effects.
- Treating prostate cancer may not help you to live for longer, and treatments with possible risks and side effects can affect your quality of life.

'The thing to always remember is that if you're going to have that PSA test, it might lead you down the route of biopsy and further hospital examinations.'

Steve



Questions to think about

To help you make your decision, you could think about the following questions:

- What would you do if your PSA level is high?
- What would you do if further tests find that you have an early prostate cancer?
- What difference will it make for you to know about an early prostate cancer?

Deciding whether to have the PSA test can be hard. Thinking about what is important to you can help you make the best decision for you.

If you have further questions, contact your GP. You can also call our cancer support specialists on **0808 808 00 00** (Monday to Friday, 9am to 8pm). They can discuss the options with you and send you more information.

'It was my final decision, but it wasn't a decision that I went off and made on my own. It was in combination with my family, with my wife and the GP.'

Jamal



About our information

We provide expert, up-to-date information about cancer. And all our information is free for everyone.

Order what you need

You may want to order more leaflets or booklets like this one. Visit **be.macmillan.org.uk** or call us on **0808 808 00 00**.

We have booklets on different cancer types, treatments and side effects. We also have information about work, financial issues, diet, life after cancer and information for carers, family and friends.

Online information

All of our information is also available at **macmillan.org.uk/information-and-support**

There you'll also find videos featuring real-life stories from people affected by cancer, and information from health and social care professionals.

Other formats

We also provide information in different languages and formats, including:

- audiobooks
- Braille
- British Sign Language
- easy read booklets
- eBooks
- large print
- translations.

Find out more at **macmillan.org.uk/otherformats**

If you'd like us to produce information in a different format for you, email us at **cancerinformationteam@macmillan.org.uk** or call us on **0808 808 00 00**.

Help us improve our information

We know that the people who use our information are the real experts. That's why we always involve them in our work. If you've been affected by cancer, you can help us improve our information.

We give you the chance to comment on a variety of information including booklets, leaflets and fact sheets.

If you'd like to hear more about becoming a reviewer, email reviewing@macmillan.org.uk You can get involved from home whenever you like, and we don't ask for any special skills – just an interest in our cancer information.



Other ways we can help you

At Macmillan, we know how a cancer diagnosis can affect everything, and we're here to support you.

Talk to us

If you or someone you know is affected by cancer, talking about how you feel and sharing your concerns can really help.

Macmillan Support Line

Our free, confidential phone line is open Monday to Friday, 9am to 8pm. Our cancer support specialists can:

- help with any medical questions you have about cancer or your treatment
- help you access benefits and give you financial guidance
- be there to listen if you need someone to talk to
- tell you about services that can help you in your area.

Call us on **0808 808 00 00** or email us via our website, **macmillan.org.uk/talktous**

Information centres

Our information and support centres are based in hospitals, libraries and mobile centres. There, you can speak with someone face to face.

Visit one to get the information you need, or if you'd like a private chat, most centres have a room where you can speak with someone alone and in confidence.

Find your nearest centre at **macmillan.org.uk/informationcentres** or call us on **0808 808 00 00**.

Talk to others

No one knows more about the impact cancer can have on your life than those who have been through it themselves. That's why we help to bring people together in their communities and online.

Support groups

Whether you are someone living with cancer or a carer, we can help you find support in your local area, so you can speak face to face with people who understand. Find out about support groups in your area by calling us or by visiting [macmillan.org.uk/selfhelpandsupport](https://www.macmillan.org.uk/selfhelpandsupport)

Online Community

Thousands of people use our Online Community to make friends, blog about their experiences and join groups to meet other people going through the same things. You can access it any time of day or night. Share your experiences, ask questions, or just read through people's posts at [macmillan.org.uk/community](https://www.macmillan.org.uk/community)

The Macmillan healthcare team

Our nurses, doctors and other health and social care professionals give expert care and support to individuals and their families. Call us or ask your GP, consultant, district nurse or hospital ward sister if there are any Macmillan professionals near you.

'Everyone is so supportive on the Online Community, they know exactly what you're going through. It can be fun too. It's not all just chats about cancer.'

Mal

Help with money worries

Having cancer can bring extra costs such as hospital parking, travel fares and higher heating bills. If you've been affected in this way, we can help.

Financial guidance

Our financial team can give you guidance on mortgages, pensions, insurance, borrowing and savings.

Help accessing benefits

Our benefits advisers can offer advice and information on benefits, tax credits, grants and loans. They can help you work out what financial help you could be entitled to. They can also help you complete your forms and apply for benefits.

Macmillan Grants

Macmillan offers one-off payments to people with cancer. A grant can be for anything from heating bills or extra clothing to a much-needed break.

Call us on **0808 808 00 00** to speak to a financial guide or benefits adviser, or to find out more about Macmillan Grants. We can also tell you about benefits advisers in your area. Visit [macmillan.org.uk/financialsupport](https://www.macmillan.org.uk/financialsupport) to find out more about how we can help you with your finances.

Help with work and cancer

Whether you're an employee, a carer, an employer or are self-employed, we can provide support and information to help you manage cancer at work. Visit [macmillan.org.uk/work](https://www.macmillan.org.uk/work)

My Organiser app

Our free mobile app can help you manage your treatment, from appointment times and contact details, to reminders for when to take your medication. Search 'My Organiser' on the Apple App Store or Google Play on your phone.

Other useful organisations

There are lots of other organisations that can give you information or support.

Prostate cancer support organisations

Bladder and Bowel Community

Tel 0800 031 5412

Email [help@](mailto:help@bladderandbowel.org)

bladderandbowel.org

www.bladderandbowel.org

Provides information and advice on a range of symptoms and conditions related to the bladder and bowel, including incontinence, constipation and diverticular disease.

Orchid

Tel 0808 802 0010

Email [helpline@](mailto:helpline@orchid-cancer.org.uk)

orchid-cancer.org.uk

www.orchid-cancer.org.uk

Funds research into men's cancers and their diagnosis, prevention and treatment. Offers free information leaflets and fact sheets, and runs an enquiry service supported by Orchid Male Cancer Information Nurses.

Prostate Cancer UK

Tel 0800 074 8383

www.prostatecanceruk.org

Provides information and support to men with prostate cancer and their families. Has offices in London, the Midlands, Scotland, Wales and Northern Ireland.

Prostate Scotland**Tel** 0131 603 8660**Email** info@

prostatescotland.org.uk

www.prostatescotland.org.uk

A Scottish charity set up to provide information, advice and support on prostate health and diseases of the prostate. You can watch videos online and download free leaflets and booklets.

Tackle Prostate Cancer (Prostate Cancer Support Federation)**Tel** 0800 035 5302**Email** helpline@

tackleprostate.org

www.tackleprostate.org

An organisation of UK patient-led prostate cancer support groups.

Support with sexual issues**The Sexual Advice Association****www.sda.uk.net**

Aims to improve the sexual health and well-being of men and women, and to raise awareness of how sexual conditions affect the general population.

General cancer support organisations**Cancer Black Care****Tel** 020 8961 4151**Email**

info@cancerblackcare.org.uk

www.cancerblackcare.org.uk

Offers UK-wide information and support for people with cancer, as well as their friends, carers and families, with a focus on those from BME communities.

Cancer Focus Northern Ireland**Helpline** 0800 783 3339

(Mon to Fri, 9am to 1pm)

Email

nurseline@cancerfocusni.org

www.cancerfocusni.org

Offers a variety of services to people affected by cancer in Northern Ireland, including a free helpline, counselling and links to local support groups.

Cancer Research UK**Helpline** 0808 800 4040

(Mon to Fri, 9am to 5pm)

www.cancerresearchuk.org

A UK-wide organisation that has patient information on all types of cancer. Also has a clinical trials database.

Cancer Support Scotland

Tel 0800 652 4531

(Mon to Fri, 9am to 5pm)

Email

info@cancersupportscotland.org

www.cancersupportscotland.org

Runs cancer support groups throughout Scotland. Also offers free complementary therapies and counselling to anyone affected by cancer.

Tenovus

Helpline 0808 808 1010

(Daily, 8am to 8pm)

Email

info@tenovuscancercare.org.uk

www.tenovuscancercare.org.uk

Aims to help everyone in the UK get equal access to cancer treatment and support. Funds research and provides support such as mobile cancer support units, a free helpline, benefits advice and an online 'Ask the nurse' service.

General health information

NHS Choices

www.nhs.uk

The UK's biggest health information website. Has service information for England.

NHS Direct Wales

www.nhsdirect.wales.nhs.uk

NHS health information site for Wales.

NHS Inform

Helpline 0800 22 44 88

(Daily, Mon to Fri, 8am to 10pm, Sat and Sun, 9am to 5pm)

www.nhsinform.scot

NHS health information site for Scotland.

Patient UK

www.patient.info

Provides people in the UK with information about health and disease. Includes evidence-based information leaflets on a wide variety of medical and health topics. Also reviews and links to many health and illness-related websites.

Emotional and mental health support

Mind

Helpline 0300 123 3393

(Mon to Fri, 9am to 6pm)

Text 86463

Email info@mind.org.uk

www.mind.org.uk

Provides information, advice and support to anyone with a mental health problem through its helpline and website.

Samaritans

Helpline 116 123

Email jo@samaritans.org

www.samaritans.org

Samaritans branches are located across England, Ireland, Scotland and Wales. Provides confidential and non-judgemental emotional support, 24 hours a day, 365 days a year, for people experiencing feelings of distress or despair.

LGBT-specific support

LGBT Foundation

Tel 0345 330 3030

(Mon to Fri, 10am to 10pm, and Sat, 10am to 6pm)

Email helpline@lgbt.foundation

www.lgbt.foundation

Provides a range of services to the LGBT community, including a helpline, email advice and counselling. The website has information on various topics including sexual health, relationships, mental health, community groups and events.

Disclaimer

We make every effort to ensure that the information we provide is accurate and up to date but it should not be relied upon as a substitute for specialist professional advice tailored to your situation. So far as is permitted by law, Macmillan does not accept liability in relation to the use of any information contained in this publication, or third-party information or websites included or referred to in it. Some photos are of models.

Thanks

This booklet has been written, revised and edited by Macmillan Cancer Support's Cancer Information Development team. It has been approved by our Senior Medical Editors, Dr Jim Barber, Consultant Clinical Oncologist and Dr Lisa Pickering, Consultant Medical Oncologist.

With thanks to: Dr Alison Birtle, Consultant Clinical Oncologist; Jane Booker, Macmillan Urology Nurse Specialist; Mr Christian Brown, Consultant Urological Surgeon; Sharon Clovis, Prostate Nurse Specialist; Gill Davis, Specialist Urology Nurse; Louise Dawson, Macmillan Uro-oncology Clinical Nurse Specialist; Ben Hearnden, Prostate Nurse Specialist; Mr Graham Hollins, Consultant Urological Surgeon; Dr Duncan McLaren, Consultant Clinical Oncologist; and Professor Jonathan Waxman, Professor of Oncology.

Thanks also to the people affected by cancer who reviewed this edition, and those who shared their stories.

We welcome feedback on our information. If you have any, please contact **cancerinformationteam@macmillan.org.uk**

Sources

We've listed a sample of the sources used in the booklet below. If you would like further information about the sources we use, please contact us at **cancerinformationteam@macmillan.org.uk**

National Institute for Health and Care Excellence (NICE). Suspected cancer: recognition and referral. 2015.

European Association of Urologists. Guidelines on Prostate Cancer. 2016.

Public Health England. Prostate cancer risk management programme: overview.

National Institute for Health and Care Excellence (NICE) Prostate cancer overview. <https://pathways.nice.org.uk/pathways/prostate-cancer> (accessed online from March 2017 until November 2017).

National Institute for Health and Care Excellence (NICE). Prostate cancer: diagnosis and treatment. January 2014.

National Institute for Health and Care Excellence (NICE). Surveillance report 2016 – Prostate cancer: diagnosis and management (2014) NICE guideline CG175. 2016.

Can you do something to help?

We hope this booklet has been useful to you. It's just one of our many publications that are available free to anyone affected by cancer. They're produced by our cancer information specialists who, along with our nurses, benefits advisers, campaigners and volunteers, are part of the Macmillan team. When people are facing the toughest fight of their lives, we're there to support them every step of the way.

We want to make sure no one has to go through cancer alone, so we need more people to help us. When the time is right for you, here are some ways in which you can become a part of our team.



Share your cancer experience

Support people living with cancer by telling your story, online, in the media or face to face.

Campaign for change

We need your help to make sure everyone gets the right support. Take an action, big or small, for better cancer care.

Help someone in your community

A lift to an appointment. Help with the shopping. Or just a cup of tea and a chat. Could you lend a hand?

Raise money

Whatever you like doing you can raise money to help. Take part in one of our events or create your own.

Give money

Big or small, every penny helps. To make a one-off donation see over.

Call us to find out more

0300 1000 200

macmillan.org.uk/getinvolved

Please fill in your personal details

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Surname _____

Address _____

Postcode _____

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Macmillan Cancer Support

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Do you pay tax? If so, your gift will be worth 25% more to us – at no extra cost to you. All you have to do is tick the box below, and the tax office will give 25p for every pound you give.

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Macmillan Cancer Support and our trading companies would like to hold your details in order to contact you about our fundraising, campaigning and services for people affected by cancer. If you would prefer us not to use your details in this way please tick this box.

In order to carry out our work we may need to pass your details to agents or partners who act on our behalf.



If you'd rather donate online go to macmillan.org.uk/donate

Please cut out this form and return it in an envelope (no stamp required) to:
Supporter Donations, Macmillan Cancer Support, FREEPOST LON15851,
89 Albert Embankment, London SE1 7UQ

This booklet is about the PSA test. Some men choose to have the PSA test to find out if they have prostate cancer. The PSA test will not tell you if you have prostate cancer, but it can show whether you need further tests.

This booklet is for anyone who wants to know more about the PSA test. It also includes information and questions to think about when deciding whether to have the PSA test.

If you have more questions or would like to talk to someone, call the Macmillan Support Line free on **0808 808 00 00**, Monday to Friday, 9am to 8pm, or visit **macmillan.org.uk**

Would you prefer to speak to us in another language? Interpreters are available. Please tell us in English the language you would like to use. Are you deaf or hard of hearing? Call us using NGT (Text Relay) on **18001 0808 808 00 00**, or use the NGT Lite app.

Need information in different languages or formats? We produce information in audio, eBooks, easy read, Braille, large print and translations. To order these, visit **macmillan.org.uk/otherformats** or call our support line.

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