

# Screening and early detection for prostate cancer.

## **Abstract:**

Prostate cancer is the most common malignancy in men. Mortality due to prostate cancer has continued to increase over the past five decades despite all the different options of treatment at the disposal of the urologist, such as, surgery, radiotherapy, chemotherapy and biotherapy. Presently, effective therapy for prostate cancer is only possible with early diagnosis of the disease still localised within the prostate. Recent studies have demonstrated that the present screening techniques including Digital Rectal Examination (DRE), Serum Prostate Specific Antigen (PSA) concentration, Transrectal Ultrasound (TRUS) and Random Ultrasonically guided multiple prostatic biopsies can detect some potentially curable asymptomatic localised cancers. The main goal of a cancer screening test is to help reduce mortality. To date, it has been established that screening increases early detection and survival but there is no evidence that screening reduces mortality. If in future early detection and intervention is proved to provide real benefit apart from the overdiagnosis of latent non aggressive tumours, then the mortality from prostate cancer could begin to decline in the next decade. However, if our current armamentaria of therapies continue to be ineffective in treating men with prostate cancer, the current emphasis on screening and early detection will decline.