



MEDIA RELEASE

Thursday, November 24, 2022

PM and Health Minister announce overhaul of prostate cancer test rules

Prime Minister Anthony Albanese and Health Minister Mark Butler have joined Prostate Cancer Foundation of Australia to announce an overhaul of Australia's Clinical Guidelines for PSA Testing.

The announcement was made at Prostate Cancer Foundation of Australia's annual Parliamentary Big Aussie Barbie in Canberra today.

Experts have called for new guidelines to improve early detection of the disease.

Quotes attributable to the Health Minister:

"Prostate cancer is the leading cause of cancer in this country, and the Albanese Government is committed to taking action to improve earlier detection and treatment of the disease.

"We are very serious about delivering on our election commitments to improve health outcomes for Australian men and families.

"More than 24,000 Australian men will be diagnosed with prostate cancer this year, and more than 3,500 will die from the disease.

"As Health Minister, I am determined to increase earlier detection of prostate cancer so that we can reduce avoidable deaths from the disease and manage the country's leading cause of cancer more effectively."

Quotes attributable to PCFA Chairman Adjunct A/Professor Steve Callister:

"Australia has one of the highest rates of prostate cancer in the world, with one in every five Australian men likely to be diagnosed by age 85.

"We commend the Government's support for our review of the 2016 guidelines and we look forward to commencing this work immediately.

"If we can diagnose all men at the earliest stage and ensure they have access to new medicines and care, we can beat this disease."

ENDS. Please see over page for key contacts and detailed data.

CONTACTS

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FACTS & FIGURES

Key figures:

- Prostate cancer is the most commonly diagnosed cancer in Australia.
- 24,217 Australian men will be diagnosed with prostate cancer in 2022.
- 3,507 Australian men will die from prostate cancer in 2022.
- 66 Australian men are diagnosed each day with prostate cancer.
- 10 Australian men will die each day from the disease.
- 240,245 Australian men are alive today after a diagnosis of prostate cancer.
- Men diagnosed with prostate cancer have a 95% chance of surviving for five years compared to their counterparts in the general Australian population.
- Between 1987–1991 and 2012–2016, five-year relative survival for prostate cancer improved from 60% to 95%.

Detailed data:

- Prostate cancer is the 2nd most common cause of cancer-related death among men.
- Prostate cancer will cause an estimated 12% of all male deaths from cancer in 2020.
- The estimated risk of a man being diagnosed with prostate cancer by age 85 is 1 in 5.
- The estimated risk of a man dying from prostate cancer by his 85th birthday is 1 in 23.
- The rate of men dying from prostate cancer has been gradually falling over the past 20 years.
- Men living in regional or rural areas have a 24% higher rate of dying than those in cities.
- Indigenous men with prostate cancer have an estimated 86% chance of survival by 5 years after diagnosis, which is lower than the national average.
- By 2040 it is estimated that 372,000 Australian men – or 2.4% of the projected male population – will be living with prostate cancer.

Figures on low awareness in Australia:

- 75% of Australians don't understand the PSA Test Guidelines.
- 70% of men and women don't know the symptoms of prostate cancer.
- 87% of Australians don't understand prostate cancer stages at diagnosis.

Mental health impacts of disease:

- 1 in 5 men with prostate cancer will develop anxiety and depression.
- 72% of men with prostate cancer will not seek help for distress.
- 67% of men with prostate cancer have unmet information needs.
- Men with prostate cancer face a 70% increased risk of suicide.

A 10-year study of Australian men affected by prostate cancer has found significant numbers of men have lower life satisfaction and experience long-term impairments to quality of life, whereby 35 to 40% of men experience poorer physical and mental quality of life outcomes and life satisfaction 10 years after the diagnosis and treatment of prostate cancer.

Please see over page for outline of the current guidelines and key recommendations that are likely to change.

The 2016 Guidelines recommend:

- Those considering having a PSA test should be provided with information about the benefits and harms of testing to support their decision to test or not.
- Those who are at average risk of prostate cancer who have been informed of the benefits and harms of testing, and who decide to undergo regular testing for prostate cancer, should be offered PSA testing every 2 years from age 50 to 69. Further investigation should be offered if the total PSA concentration is greater than 3ng/mL.
- Those 70 years or older who have been informed of the benefits and harms of testing and who wish to start or continue regular testing should be advised that the harms of PSA testing may be greater than the benefits of testing in men of their age.
- Those who have a father or one brother who has been diagnosed with prostate cancer have 2.5 to 3 times higher than average risk of developing the disease. Such men who have been informed of the benefits and harms of testing, and who decide to undergo regular testing for prostate cancer, should be offered PSA testing every 2 years from age 45 to 69.
- Those with a father and two or more brothers who have been diagnosed with prostate cancer have at least 9 to 10 times higher than average risk of developing the disease. Those who have been informed of the benefits and harms of testing, and who decide to undergo regular testing for prostate cancer, should be offered PSA testing every 2 years from age 40 to 69.
- Digital rectal examination is not recommended in asymptomatic cases as a routine addition to PSA testing in the primary care setting. Note, however, that on referral to a urologist or other specialist, digital rectal examination remains an important assessment procedure prior to consideration for biopsy.
- Since any mortality benefit from early diagnosis of prostate cancer due to PSA testing is not seen within less than 6 to 7 years from testing, PSA testing is not recommended for men who are unlikely to live another 7 years.

Potential changes in store for the new guidelines:

- The recommendation against testing for men over the age of 70 is likely to be overturned based on new evidence revealing higher rates of newly diagnosed men in this age bracket having metastatic disease at point of diagnosis.
- The guidelines are likely to make a firm recommendation on testing for men with a strong family history of prostate cancer.
- The two-yearly intervals recommended for testing may be shortened for high-risk groups.
- The use of Multiparametric MRI prior to prostate biopsy in the diagnosis of prostate cancer is likely to be recommended, following listing of the scans in 2018, after the original guidelines were released.
- The immediate management and treatment of test-detected prostate cancers will be updated to reflect the latest standards of care, including the listing of PSMA PET/CT scans for men with suspected high-risk or recurrent disease.