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HEALTH BRAINTRUST

**Congresswoman Donna Christensen Expresses Disappointment in the USPSTF Prostate Cancer Screening Recommendations; Calls the Final Recommendation a Step in the Wrong Direction**

WASHINGTON, May 22, 2012. Congresswoman Donna Christensen expressed deep disappointment over the final recommendation against the use of prostate-specific antigen (PSA) testing in the detection of prostate cancer that was issued by the U.S. Preventive Services Task Force (USPSTF).

“The final recommendations released yesterday will set back efforts to battle prostate cancer,” observed Congresswoman Donna Christensen, a physician. “Not only could the final recommendation discourage doctors from recommending or ordering the PSA test, but they may also create access barriers to those men who request the PSA test because they are in a high-risk group because a “D grade could lead to many insurance companies not offering coverage for the PSA test.”

“We know that PSA screening has been credited with as high as a 70 percent reduction in age-adjusted prostate cancer mortality over the last three and a half decades,” said Congresswoman Christensen. “We also know that while PSA tests – like so many other cancer screening and other tests – may yield false results. The doctors who treat patients know this better than anyone and take it into account in deciding the best course of treatment for them. Some patients may be treated more aggressively than might be required, but that indicates the need for more research, not denying individuals an early diagnosis. The benefits of early detection, the ability to project risk for prostate cancer, and the opportunity for successful treatment far outweigh the shortcomings.”

“Most egregious, the USPSTF recommendation did not take into account the disparities that exist in prostate cancer,” continued the Delegate, who Chairs the Congressional Black Caucus Health Braintrust. “In fact, rather than consider the disproportionate impact of prostate cancer on African-American men, men with a family history of prostate cancer, veterans exposed to Agent Orange and other men who are disproportionately affected by prostate cancer, the USPSTF instead applied a ‘one size fits all’ approach – an approach that runs counter to the research and that may put men at high risk for prostate cancer in an unnecessarily precarious position.”

Concluded Congresswoman Christensen, “I am deeply concerned with the final PSA testing recommendations issued by the USPSTF and I thus am actively encouraging men to continue to talk with their doctors to determine – together – whether PSA testing

is appropriate for them and I urge payors to not use these recommendations in determining reimbursement.”