



## **Us TOO International Prostate Cancer Education & Support Network Prostate Health Recommendations**

As Adopted by the Us TOO Board of Directors September 2003, Amended March 2009

Us TOO International Prostate Cancer Education & Support Network recommends that men have annual prostate examinations, which should include both a PSA blood test AND a digital rectal examination (DRE), starting at the following ages:

- By age 35 if you are an African American man, or have a family history of prostate cancer (either are considered high-risk)
- No later than age 40 for all other men

Moreover,

1. It is extremely important to "KNOW YOUR PSA." Keep a record of the exact numbers, not just that it is "in the normal range." Your first PSA blood test establishes your 'baseline' PSA score.
2. By tracking your PSA from year to year, you will know if it has increased too much since last year. A rise in PSA levels of 0.75 ng/mL or more within one year may require further investigation by your doctor. The rate of change – or velocity – in your PSA level can be a more significant sign of disease than the actual PSA level.
3. Us TOO believes that annual testing is so important that men should make it a calendar event such as your birthday, Father's Day or during September, which is Prostate Cancer Awareness Month.

Us TOO believes that following these recommendations will help detect prostate cancer earlier, improve the quality of life of diagnosed patients, and decrease the number of deaths caused by prostate cancer.

Us TOO believes that the earlier the disease is detected, the more easily and effectively it can be treated.

Us TOO also believes that the benefits of early detection and treatment outweigh the cost and inconvenience of occasional false positives that result in biopsies of healthy tissue. Those benefits are in the form of reduced overall cost and increased effectiveness of treating the disease.

*Us TOO is a 501(c)(3) charitable organization founded in 1990 by and for Prostate Cancer Survivors, their families and men at risk*

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