

Patient information

Information on the Prostate Specific antigen (PSA) Blood Test

Why have I been Referred to Urology

Your GP has asked the Urology Team at Eastbourne to see you and give advice regarding your prostate. In the course of investigations carried out by your GP, a PSA blood test has been taken.

Your PSA was found to be raised, although the cause for this is not clear. This information sheet has been written to answer commonly asked questions about the PSA test and to help you understand what the PSA result means.

Normal (age related) range of PSA	40 to 49 yrs – less than 2.5 ng/ml
	50 to 59 yrs – less than 3.5 ng/ml
	60 to 69 yrs – less than 4.5 ng/ml
	70 to 79 yrs – less than 6.5 ng/ml
	80 to 84 yrs – less than 10 ng/ml
	85 yrs and above – less than 20 ng/ml

What is PSA?

added to the semen. Small amounts of PSA go into the bloodstream. The amount of PSA in the blood stream can be measured by a simple blood test.

What can cause a raised level of PSA?

The following can cause raised amounts of PSA to enter the bloodstream:

- Benign Prostate Enlargement – the amount of PSA produced is directly related to the size of your prostate. Prostates naturally enlarge as you get older.
- Urinary tract infection (in the bladder or prostate) which may or may not have symptoms.
- Inflammation of the prostate – this can be present without causing any symptoms.
- Temporary rise due to recent ejaculation, or activities such as vigorous bicycle riding.
- After medical interventions touching the prostate e.g. urethral catheterisation, prostate surgery or a prostate biopsy.
- In the absence of any of the conditions mentioned above, a raised PSA level can be an indication of prostate cancer.

What further tests can be carried out when your PSA level is raised?

There will be a discussion with you at your first hospital appointment, as to whether further investigation should be informed. These investigations would take place during subsequent appointments as necessary.

A digital rectal examination (finger up the back passage) may be recommended.

An MRI (magnetic resonance imaging) scan is a common early test, but is not helpful for everyone.

If necessary, prostate biopsies would be offered to see if cancer is present.

This involves taking a small samples from the prostate under local anaesthetic and using the ultrasound probe as a guide. The samples are then checked under a microscope.

This test is a little uncomfortable, but not usually painful. Taking prostate biopsies can cause infection or temporary bleeding in the urine or semen.

Other formats

If you require any of the Trust leaflets in alternative formats, such as large print or alternative languages, please contact the Equality and Human Rights Department.

Tel: 0300 131 4434 Email: esh-tr.AccessibleInformation@nhs.net

After reading this information are there any questions you would like to ask? Please list below and ask your nurse or doctor.

Reference

The following clinicians have been consulted and agreed this patient information:
Enter names and Job titles (at least one from each site if appropriate)

The Clinical Specialty/Unit that have agreed this patient information leaflet:
Enter name here, if appropriate

Next review date: (Leave Blank)

Responsible clinician/author: Miss Sarah Tang – Consultant Urologist

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