# The one-stop prostate clinic: information for patients

## What will happen in the clinic?

Your doctor has referred you to the clinic because you have a raised PSA (prostate specific antigen), or an abnormal feeling prostate. At the clinic your urologist or clinical nurse specialist will discuss the implications of these findings, and arrange further tests to try and discover the cause of the problem.

Please note that it may take up to 3 hours to complete all the investigations required in the one-stop prostate clinic. It is usually possible to perform all the tests required on the same day, but if it is not, then we will need to ask you to return on another day.

During your visit to the hospital we will arrange for you to see the specialist, have a flow test, and do a scan of your bladder. Depending upon the outcome of these tests, we may also discuss with you whether you should have a prostate biopsy. Please bring a urine sample with you to the clinic.

## What is the PSA blood test?

If you want more information before deciding to have this test, it is important that you ask and that you fully understand what is involved. It is a blood test that measures the level of PSA in your blood.

PSA stands for **P**rostate **S**pecific **A**ntigen, which is a protein made by the prostate which naturally leaks into the bloodstream. Some men with symptoms of a prostate problem may consider having the test. The symptoms of benign prostate enlargement can be similar to the symptoms of a developing prostate cancer. Some men without any symptoms consider having the test to 'screen' for prostate cancer. However, in both of these situations, the decision to have a PSA test is controversial as there are pros and cons.

If the amount in the blood is abnormally high, it might indicate you have some disease in the prostate, which could be cancer or another condition such as inflammation. However, PSA is not a specific test for cancer and, before you have the test, it is important that you read and understand the following information.

## Why have a PSA test?

Although the PSA test is often done to detect cancer in men who have problems passing urine and is also used to help in the treatment of men who are known to have prostate cancer, it can also detect early prostate cancer before it causes symptoms or any abnormality of the prostate. At this stage it might be possible to remove the cancer by an operation, or to destroy it with radiotherapy. This may cure the disease.

Although using the PSA test in this way to screen for prostate cancer is sometimes recommended, some doctors do not think it is necessarily a good thing because it may detect very small cancers that pose no risk to your health.

## What do we know about PSA levels?

You need to consider the following points before you finally decide to have the test:

- A low PSA does not completely exclude prostate cancer (in men with a PSA between 1 and 3, 15- 20% can be found to have cancer on biopsy)
- A high PSA does not mean there is prostate cancer, although the higher the PSA the greater the risk that there is cancer (in men with a PSA between 3 and 10, only 20% are found to have prostate cancer on biopsy)
- A high PSA can be due to simple benign enlargement of the prostate, which is very common in men over 50, it can occur during an infection in the urine, and after surgery or tests on the prostate.
- The average level of PSA tends to be higher in older men

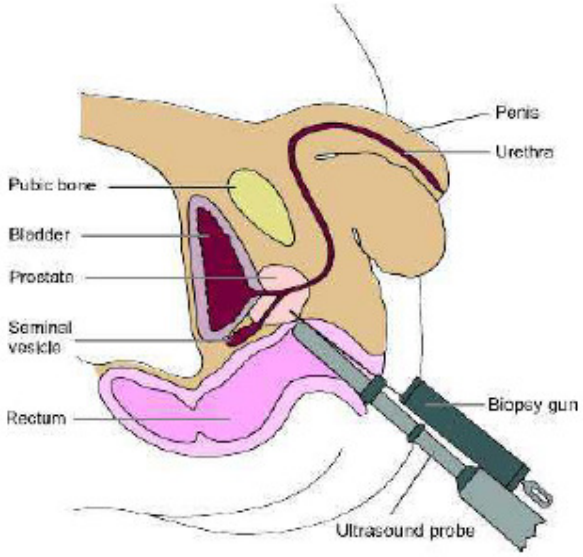
## What happens if the PSA is high?

There are no hard and fast rules, and even the experts don't always agree on the best course of action. What happens next depends on whether or not you have any symptoms, your personal risk of prostate cancer, how high the PSA level is, your age (the older you are, the higher your PSA level is likely to be whether or not you have prostate cancer) and also your general level of health.
As a rough guide, there are three main options after a PSA test:

- **PSA not raised:** Unlikely to have cancer. No further action required at present.
- **PSA slightly raised:** Probably not cancer, but might need to repeat the test or have a biopsy of the prostate.
- **PSA definitely raised:** Probably need a biopsy to find out if you have prostate cancer.

## What does the prostate biopsy involve?

This procedure involves using an ultrasound probe, inserted via the back passage, to scan the prostate. Local anaesthetic is then injected around the prostate. The size of the prostate can then be measured and abnormal areas may sometimes be seen. If biopsies are needed, a needle is inserted into the prostate and tissue samples (normally between 10 and 15) for pathological analysis are taken.




## Will I need any further treatment?

Any further treatment and follow up will be determined by the results of the biopsy. The results are usually available after 10 to 14 days, and you will have the opportunity to discuss the results with your doctor or a clinical nurse specialist then.

## What happens before my procedure?

You will usually be prescribed an antibiotic to help reduce the risks of infection from the procedure. The first dose should be taken about 15 minutes before the procedure. You will be asked to continue the antibiotics after the procedure, usually for 3 days.

If you are taking Warfarin, Aspirin or Clopidogrel on a regular basis, you must discuss this with your doctor because these drugs can cause increased bleeding. Clopidogrel and warfarin are usually stopped before your biopsy. There may be a balance of risk where stopping them will reduce the chances of bleeding but this can result in increased clotting, which may also carry a risk to your health. This will, therefore, need careful discussion with regard to risks and benefits.

## What happens on the day of my procedure?

Your procedure will be done as an outpatient, meaning that you do not need to be admitted to hospital. You can eat and drink as normal prior to the biopsy.

Although the test is performed under local anaesthetic, most men find it reassuring if a friend or relative accompanies them and is available to take them home.

It is not uncommon to experience some discomfort afterwards, and some bleeding. You will notice blood in your urine for up to 3 days, blood in the semen for up to 6 weeks and blood from the back passage for a day or two.

These are normal but if you are concerned by the degree of bleeding you should consult your doctor immediately. **You should also contact your doctor if you feel unwell after the procedure with a fever or chills, because this could mean that you have an infection after the biopsy which might require admission to hospital for intravenous antibiotics**.

You will be discharged home once you are comfortable with a three day course of antibiotics.

## What are the risks of the procedure?

Most procedures have a potential for side-effects. You should be reassured that, although all these complications are well-recognised, the majority of patients do not suffer any problems after a TRUS biopsy.

**The complications or side effects which can arise include:**

**Common (greater than 1 in 10)**

- Blood in the urine for up to a few days
- Blood in the semen – this may last for up to 6 weeks but is perfectly harmless and poses no problem
- for you or your sexual partner
- Blood in the stools
- Urinary infection (10% risk)
- Sensation of discomfort from the prostate due to bruising

**Occasional (between 1 in 10 and 1 in 50)**

- Blood infection (septicaemia) requiring hospitalisation (2% risk)
- Bleeding causing an inability to pass urine (2% risk)
- Bleeding requiring hospitalisation (1% risk)
- Failure to detect a significant cancer of the prostate
- The procedure may need to be repeated if the biopsies are inconclusive or your PSA level rises
- further at a later stage

**Rare (less than 1 in 50)**

- Inability to pass urine (retention of urine)

## What should I expect when I get home after my biopsy?

When you get home, you should rest for 48 hours and drink extra fluid, especially if you have blood in the urine. It is important that you complete your course of antibiotics. Try and avoid constipation by having a high fibre diet and drinking plenty of fluids.

## What else should I look out for after the biopsy?

If you develop a fever, severe pain on passing urine, inability to pass urine or worsening bleeding, you should contact your doctor immediately.

## Where can I get more information?

**For further information on any of the above, A range of further information leaflets and links are on our website.**

**0121 424 2000**
**www.heartofengland.nhs.uk**
**Heart of England NHS Foundation Trust**
**Bordesley Green East**
**Birmingham**
**B9 5SS**