In the United States, a man is diagnosed with prostate cancer every 3 minutes and death from the disease occurs every 15 minutes. This year, 35,000 men in the United States will die of prostate cancer, approximately 1 of every 4 who develop the disease. Although the number of deaths from other illnesses has decreased, the mortality from prostate cancer has risen during the last 5 years by 2.5% to 3% per year.

To reduce the number of deaths from prostate cancer, there are four approaches: primary prevention, early diagnosis, effective treatment of curable disease, and improved management of advanced disease. In the foreseeable future, it is unlikely that we will be able to prevent the disease by manipulating environmental or genetic factors or to cure patients with advanced disease while keeping morbidity at an acceptable level. Therefore, in order to reduce the number of deaths from prostate cancer, we are faced with the decisions of how far to go in diagnosing the disease and who should be offered treatment that may lead to cure.
Review: PSA-based screening does not reduce prostate cancer mortality or all-cause mortality
*Annals of Internal Medicine*; 156 (8): JC4-2

Population-based screening using prostate-specific antigen testing reduced prostate cancer mortality
*Annals of Internal Medicine*; 153 (12): JC6-9

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