Study Finds Shared Decision Making Still Lacking in Prostate Cancer Screening

Fewer than one in five men with recent testing reported full discussion

March 12, 2018—A new study finds many men receiving prostate specific antigen (PSA) testing do so without a comprehensive shared decision making process, contrary to current guidelines. The American Cancer Society study, appearing in Annals of Family Medicine, finds that in both 2010 and 2015 about 6 in 10 men who reported recent PSA testing said they had received at least one component of shared decision making. Meanwhile, only 1 in 10 with no PSA test reported receiving any component of shared decision making in both 2010 and 2015.

Recommendations for PSA testing have changed in the past several years and vary from organization to organization. But there is widespread consensus that PSA testing should not occur without shared decision making. Previous studies have shown infrequent use of shared decision making for PSA testing. In light of the recommendation modifications increasing the emphasis on shared decision making, researchers led by Stacey Fedewa aimed to identify any changes in shared decision making for PSA testing in recent years.

To find out, they conducted a retrospective cross-sectional study among men 50 and older participating in the 2010 and 2015 National Health Interview Survey (NHIS). They looked for changes in receipt of shared decision making among more than 9,500 men, measuring whether patients were informed about the advantages only, advantages and disadvantages, or full shared decision making (including advantages, disadvantages, and uncertainties regarding the test).

From 2010 to 2015, the proportion of men who reported a recent PSA test and said they received at least one element of shared decision making rose only slightly, from 58.5% to 62.6%. Being told only about the advantages of PSA testing declined (from 23.9% to 20.9%) and full shared decision making prevalence significantly increased (from 12.2% to 17.4%) in recently tested men. Nonetheless, in 2015 fewer than one in five men with recent PSA testing reported full shared decision, and the most common shared decision making situation was being told only about the advantages of PSA testing.

The authors also found full shared decision making was significantly less common in men without a high school diploma compared to college graduates. For example, among men with recent PSA testing, those without a high school diploma were about one-half as likely as men with a college degree to report full shared decision making.

The authors say their study is limited by its reliance on self-reported components of shared decision making. Compared with previous studies having more comprehensive measures of decision making, the current study observed a lower proportion of men who reported shared decision making. The authors say variations in shared decision making definitions could account for those differences. They add that it appears, however, that the benefits of PSA testing are more commonly discussed than risks or uncertainties regarding the test across studies and definitions.

“New and innovative strategies are needed to achieve more widespread application of shared decision making,” conclude the authors.

Study: Recent Patterns in Shared Decision Making for Prostate-Specific Antigen Testing in the United States; Ann Fam Med 2018;16:139-144. https://doi.org/10.1370/afm.2200.