



LAB NOTES · MEN'S HEALTH AWARENESS

Prostate Health: Awareness, Monitoring & Management

A guide for men — on the conversations we put off, the checks that matter, and what to expect from your GP.

Why This Matters Now

This guide follows recent high-profile prostate cancer deaths in the media. It's intended as general health information, not medical advice. Men with concerns about their prostate health should speak to their GP.

Prostate cancer remains one of the most common cancers affecting men, and recent public losses have brought renewed attention to the importance of awareness and early conversations with a GP. Much of the difficulty with prostate cancer is that it often causes no symptoms in its early, most treatable stages — which is why understanding risk factors and monitoring options matters, even for men who feel completely well.

What the Prostate Does

The prostate is a small, walnut-sized gland located below the bladder, responsible for producing part of the seminal fluid. It's common for the prostate to enlarge naturally with age — this is a separate condition (benign prostatic hyperplasia) from prostate cancer, though both become more common as men get older.

Common Prostate Conditions

CONDITION	DESCRIPTION
BPH (Benign Prostatic Hyperplasia)	Non-cancerous enlargement of the prostate; very common with age
Prostatitis	Inflammation of the prostate, sometimes due to infection
Prostate cancer	Abnormal cell growth in the prostate; often slow-growing, though some forms are aggressive

Risk Factors

- **Age** — risk increases notably from a man's late 40s onward, and continues to rise with age
- **Family history** — a father or brother with prostate cancer increases personal risk; family history of breast, ovarian, or pancreatic cancer can also be relevant, particularly where a BRCA2 gene variant is involved
- **Ethnicity** — Black men have a substantially higher lifetime risk of prostate cancer than the general population, and tend to develop it at a younger age
- **Genetics** — men with a confirmed BRCA2 pathogenic variant are at increased risk of more aggressive disease

Symptoms to Be Aware Of

- Frequent urination, particularly at night
- Difficulty starting or stopping urination
- Weak or interrupted urine flow
- Blood in urine or semen
- Pain during urination or ejaculation
- Unexplained pain in the pelvis, hips, or lower back

IMPORTANT

Early-stage prostate cancer very often causes no symptoms at all. The symptoms above are more commonly associated with BPH or prostatitis than with early cancer — but any new or persistent symptom should be discussed with a GP.

Monitoring & Screening — Current UK Position (2026)

This is an area of active change, so it's worth understanding the current position rather than older assumptions about "getting tested at 50."

There is no national population screening programme for prostate cancer in the UK. Following its 2025–2026 evidence review, the UK National Screening Committee (UK NSC) concluded that population-wide screening is more likely to cause harm than benefit — largely because the PSA test cannot reliably distinguish harmful, fast-growing cancers from slow-growing ones that would never cause a problem in a man's lifetime.

New: targeted screening for high-risk men. In 2026, the UK NSC recommended — and the UK government has accepted, for England — a targeted screening programme: PSA testing every two years for men aged 45–61 with a confirmed BRCA2 gene variant and a relevant family history (breast, ovarian, pancreatic, or prostate cancer). This is a recent, still-rolling-out change.

For men without these specific risk factors: any man aged 50 or over can request a PSA test from their GP as part of an informed-choice conversation — GPs are guided not to raise it proactively, and the decision is left to the individual after discussing pros and cons.

Men at higher risk may wish to have this conversation earlier — including men with a strong family history, a known BRCA2 variant, or Black men, who face a higher and earlier-onset risk. The right age to start is individual and best discussed directly with a GP.

About the PSA Test

- Measures prostate-specific antigen, a protein in the blood
- **Limitations:** it can miss some cancers, and a raised result does not mean cancer is present — a large majority of men with a raised PSA do not have prostate cancer
- Other causes of a raised PSA include urinary infection, an enlarged prostate, prostatitis, or recent prostate stimulation
- A raised PSA typically leads to further discussion, a possible repeat test, and — where appropriate — an MRI scan before any biopsy is considered

Other Monitoring Tools

- **Digital rectal examination (DRE)**
- **MRI scanning** — increasingly used to assess risk before proceeding to biopsy
- **Biopsy** — the only test that can definitively confirm a cancer diagnosis

Management Approaches (Following Diagnosis)

Treatment is individualised and depends on the type, stage, and aggressiveness of the cancer, alongside the man's age and overall health. Options a clinician may discuss include:

- **Active surveillance** — regular monitoring without immediate treatment, for low-risk, slow-growing cancers
- **Surgery** (prostatectomy)
- **Radiotherapy** (external beam or brachytherapy)
- **Hormone therapy**
- **Chemotherapy** — typically reserved for more advanced disease

Decisions between these options involve weighing effectiveness against quality-of-life impact, and should always be made with a specialist.

Key Takeaways

- Prostate cancer often has no early symptoms — don't wait for symptoms to think about risk
- Know your family history, including cancers on both sides of the family
- If you're in a higher-risk group, talk to your GP about starting the PSA conversation earlier than 50
- A raised PSA is a prompt for further discussion, not a diagnosis
- Any new or persistent urinary symptoms deserve a GP visit, regardless of age

Sources Consulted

- UK National Screening Committee, prostate cancer screening recommendation (gov.uk), 2026 review
- Cancer Research UK, PSA testing and screening guidance (health professional and public-facing pages), 2026
- Prostate Cancer UK, PSA blood test guidance
- Prostate Cancer Research, National Screening Day information, 2026